

## 1. Purpose

### 1.1. General

The purpose of this procedure is to meet IMPACT Community Service's obligation in ensuring the health and safety of all clients and visitors and to uphold their human rights as set out in the *Human Rights Act 2019 (Qld)*.

Staff and volunteers must behave in a professional manner and ensure the human rights principles of freedom, respect, equality and dignity are afforded to clients and visitors at all times.

Any visitor or client who experiences unacceptable behaviour is encouraged to report it.

As a minimum, everyone can expect:

- To be treated with respect and dignity
- To have access to a complaints process
- To be treated fairly and ethically
- To be treated in accordance with the principles of natural justice and the *Human Rights Act 2019 (Qld)*.

If a person feels that any of these principles are not adhered to, or that they are being mistreated or discriminated against in any way, they have the right of review or to register a complaint via this procedure.

The Complaints and Appeals Procedure has been established to:

- Reassure clients and visitors that any disputes or grievances will be taken seriously and handled professionally and confidentially to achieve a satisfactory and timely resolution
- Ensure that potential complainants have a clear understanding of the steps involved in IMPACT Community Services Complaints and Appeals procedure
- Ensure satisfactory and timely local resolution of issues with advocacy, conciliation and mediation services used where necessary
- Provide clients and visitors with contact details of public, independent authorities who may assist in the event a dispute or grievance is not able to be resolved locally

This procedure, when applied to the Registered Training Organisation operated by IMPACT Community Services, includes complaints and appeals received about the RTO, about and from students, trainers, assessors, staff, stakeholders and/or third parties. It also includes a Policy pertaining to the RTO. Please refer to Section 6.4 of this document for specific guidance for complaints and appeals regarding the RTO.

### 1.2. Quality Objectives

The aim of this procedure is to ensure that:

- All complaints received will be given priority and full consideration with the objective of satisfactory, timely and amicable settlement for all parties
- Resolution of any dispute between aggrieved parties will be addressed informally wherever possible, and in an open and trusting environment
- All matters will be resolved with reference to the Win-Win principles of dispute resolution
- All students undertaking accredited training delivered by IMPACT Community Services have access to an Appeal Process with regard to any decision (assessment or otherwise) made by the RTO including those made by third parties.
- The intention of the process is not only to ensure that the rights of people are protected, but also to continually improve the standard, and quality of services provided. All staff are to familiarise themselves with this procedure and ensure that all clients are also aware this process is available to them, and where needed any visitor with a complaint is also made aware of this process.
- The complaint management principles underlying this procedure reflect the Australian/New Zealand Standard AS/NZS 10002:2014 Guidelines for complaint management in organizations.

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## 2. Responsibilities

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### 2.1 Board

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Is responsible for:

- a) Accepting and actioning any complaints made regarding the Managing Director (MD) or decisions made by the MD.
- b) Liaising with the NDIS Commission with regards to any MD complaints in the NDIS space.
- c) Engaging an external person or body to handle complaints about the MD if necessary.

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### 2.2 Managing Director

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Is responsible for:

- a) Ensuring all complainants are afforded respect, dignity, confidentiality and a timely process of review with continuous consultation.
- b) Resolving any complaints or appeals that have not been resolved at a lower level to the satisfaction of the person making the complaint.
- c) Ensuring that the process for handling complaints and appeals is reviewed and amended annually or when necessary to reflect continual improvement within the organisation.
- d) For appointing independent arbiter/investigators if this becomes necessary.
- e) Reviewing and signing off on all complaints prior to recording with PaC.

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### 2.3 General Managers

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Are responsible for:

- a) Actioning a complaint or appeal should the relevant Manager not be available or an appropriate person to perform this task.
- b) Providing advice and guidance to staff with regard to management of complaints and appeals
- c) Monitoring trends in complaints and appeals and advising of corrective action should this be necessary.
- d) Ensuring all complainants are afforded respect, dignity, confidentiality and a timely process of review with continuous consultation.

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### 2.4 Managers

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Are responsible for:

- a) Being the first point of contact for any complaint
- b) Are responsible for resolving / ensuring the timely resolution of any complaints that fall within their sections.
- c) For ensuring the correct process is followed as per this procedure and any relevant program legislation.
- d) For identifying and implementing any improvement opportunities that could alleviate future complaints or appeals.
- e) For coaching and mentoring their teams in effective dispute resolution techniques and skills.
- f) Ensuring all complainants are afforded respect, dignity, confidentiality and a timely process of review with continuous consultation.

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### 2.4 People and Culture Services (PaC)

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Is responsible for:

- a) Maintaining all records pertaining to complaints and appeals
- b) Assisting with complaint resolution, or appeal as and when needed.
- c) For reporting to the Quality Management System representative on a quarterly basis.

d) Reviewing the Complaints System at each annual ADM Internal Audit when this procedure is reviewed

## 2.5 All Staff

Are responsible for following this procedure and any relevant legislation and/or rules pertaining to their program/contract (eg NDIS, RTO)

## 3. Terms and Definitions

<b>ADE</b>	Australian Disability Enterprise
<b>MD</b>	Managing Director
<b>NDIS</b>	National Disability Insurance Scheme
<b>RTO</b>	<b>Registered Training Organisation (RTO)</b> Section providing accredited training as per the Standards for Registered Training Organisations (RTO's) 2015
<b>RTO Complaint</b>	is any expression of dissatisfaction with an action or service of the Registered Training Organisation.
<b>RTO Appeal</b>	is where a student or staff member or stakeholder of or another interested party disputes a decision arising from a complaint, an assessment decision, or another <b>decision made by the RTO</b> .

**Complaints and appeals can arise from matters of concern relating to:**

- training delivery and assessment
- the quality of the training
- student support
- materials
- discrimination
- harassment

**Natural Justice** - is concerned with ensuring procedural fairness. It involves:

- Decisions and processes free from bias
- All parties having the right to be heard
- All parties having a right to know how and of what, they are involved/accused
- Investigating a matter appropriately before a decision is made
- All parties being told the decision and the reasons for the decision

<b>PaC</b>	People and Culture
<b>Person</b>	is the someone making the complaint (complainant or appellant) and can be an individual, a group or an entity/organisation
<b>WH&amp;S</b>	Work Health and Safety

## 4. References

<b>Acts:</b>	<b><i>Anti-Discrimination Act 1991 (Qld)</i></b> <b><i>Australian Human Rights Commission Act 1986 (Cwlth)</i></b> <b><i>Human Rights Act 2019 (Qld)</i></b> <b><i>Privacy Act 1988 (Cwlth)</i></b> <b><i>Information Privacy Act 2009 (Qld)</i></b> <b><i>National Disability Insurance Scheme Act 2013</i></b> <b><i>NDIS (Complaints Management and Resolution) Rules 2018</i></b>
<b>QMS:</b>	<b><i>Children and Youth Risk Management Strategy</i></b> <b><i>POL003 Quality Policy</i></b> <b><i>POL004 Privacy Policy</i></b> <b><i>POL005 Work Health and Safety Policy</i></b>

## Complaints & Appeals: Clients & Visitors

*POL007 Whistleblower Policy*  
*POL019 Safety and Wellbeing of Children, Young People or People with a Disability Policy*  
*ADM024 Disclosure and Reporting of Violence, Harm, Abuse, Neglect and Critical Incident*  
*ADM026 Grievance: Staff and Volunteers*  
*HRM006 Workplace Bullying, Sexual Harassment and Discrimination*  
*HRM007 Code of Conduct*

- Standards:** ISO 9001:2015 Quality management systems – requirements  
AS/NZS 10002:2014 Guidelines for complaint management in organizations  
Standards for Registered Training Organisations (RTO's) 2015  
National Standards for Disability Services  
National Principles for Child Safe Organisation  
NDIS Practice Standards and Quality Guidelines  
Human Services Quality Standards
- Other references:** Australian Qualifications Framework  
Australian Skills Quality Authority  
United Nations Convention on the Rights of Persons with Disabilities

### 5. WH&S / Risk Management / Environmental Requirements

IMPACT Community Services takes seriously its Duty of Care to all employees, volunteers, students and clients, and takes all steps which are reasonably possible to ensure their health, safety and wellbeing. IMPACT has concern for both the physical and mental health of our workers and clients and abides by all relevant health & safety legislation.

IMPACT Management is committed to employee welfare; all activities as per this procedure are to be conducted with due regard to staff workloads, comfort, health and safety.

If any staff member experiences any difficulties regarding their work environment, they are expected to discuss the issues with either their immediate Supervisor or the Work Health and Safety Manager.

All staff are expected and required to maintain currency regarding updates and changes to IMPACT's WH&S policies and procedures.

#### **RISK MANAGEMENT**

All staff are expected to be familiar with both *POL002 Risk Management Policy*, *MGT008 Organisational Risk Management* and *WHS007 Activity Risk Management Procedures*. Any matters that are seen by any staff to represent a risk to IMPACT's operations must be brought to the attention of their immediate Manager, who will then liaise with the Work Health and Safety Manager or Risk Coordinator so that appropriate preventative and/or improvement measures can be put in place.

#### **ENVIRONMENTAL STATEMENT**

IMPACT management encourages staff to be environmentally responsible whenever possible. Staff are required to be familiar with *MGT011 Environment Management* and to follow, when possible environmentally sound practices such as:

- ✓ Double-sided printing (long documents and emails)
- ✓ Saving and storing files electronically
- ✓ Recycling paper (confidential or general shredding)
- ✓ Recycling drink cans and bottles (to bins provided)
- ✓ Fans, air conditioners, lights, etc., turned off when rooms unoccupied

#### **SMOKING POLICY**

All IMPACT buildings and grounds up to and including 5 metres outside of our boundary on public lands (including R&C and business enterprises) are designated as Smoke Free zones. IMPACT staff are asked to restrict their smoking activity to **lunch breaks only** and must remove themselves from the grounds of IMPACT.

Smoking is not permitted inside IMPACT vehicles at any time.

***POL006 Smoke-Free Workplace Policy refers***

## 6. Procedure

### 6.1. Process for handling complaints or appeals

1. When an IMPACT Community Services staff member receives a complaint from a client or visitor, they must in the first instance:
  - Ascertain the complainant's wishes with regard to the desired outcome. Examples of possible outcomes may be an apology, a change in personnel or for strategies to be put in place so that the behaviour/situation does not continue
  - Advise the complainant of the process for complaints handling including time frames for acknowledgement of a written complaint (2 working days from receipt for initial acknowledgement), mediation and investigation
  - Advise of mediation options and processes (if necessary) and formal options including external avenues of complaint should the matter not be resolved at an organisational level
  - Advise that confidentiality will be on a "need to know" basis and that certain staff or Managers may need to be advised of the circumstances in order to resolve the complaint
2. So that complaint can be recorded, and necessary action taken to address the issues raised, the staff member must ensure that an **ADM025.01 Complaints, Appeals & Grievances** form is completed. This can be completed by the client or visitor, or if the complaint is taken verbally the staff member receiving the complaint must complete this form with the details provided by the client.
3. The staff member must then forward the completed form to the relevant program/section Manager and forward a copy to the associated General Manager. The relevant program Manager is then to take action to resolve the complaint, which must be noted on the **ADM025.01 Complaints, Appeals & Grievances** form. Where appropriate, consultation with the General Manager or People and Culture Manager should take place.
4. The completed and reviewed **ADM025.01 Complaints, Appeals & Grievances** form must then be forwarded to the People and Culture Team for recording in the electronic **Complaints Register**. The **Complaints Register** will record any action taken by the staff member to resolve the complaint.
5. In addition, the **Complaints Register**, records information to assist with identifying trends in reported complaints. This information will be used to ensure an ongoing process of continual improvement.
6. All steps of the resolution process must be noted on the complaints form, with this form being retained in the complaints file.

### 6.2. Complaints Resolutions

#### 6.2.1. Lowest Level Resolution (Step 1)

- a) IMPACT encourages open communication and an environment of trust. Therefore, any client or visitor with a complaint is encouraged to firstly raise the matter directly with the other party concerned if it is appropriate and safe to do so.
- b) A meeting should be arranged between the parties to discuss the issue and seek a win-win resolution.
- c) The complainant can have a support person accompany them if requested or, if required, an appropriate advocate can be present to ensure the integrity of the process is maintained.
- d) An independent unofficial mediator (eg: a representative from People and Culture) can also be requested to attend the meeting if requested.

#### **Resolution by Manager and or General Manager (Step 2)**

- a) Should the matter remain unresolved following Step No. 1, or should Step No. 1 not be appropriate, the matter will be brought to the responsible Manager and or General Manager for resolution.
- b) The Manager and or General Manager will consider the complaint and recommend a resolution.
- c) Initial response to written Complaints will be within two (2) working days or receipt.

## **Resolution by Managing Director (Step 3)**

- a) Should the matter remain unresolved following Step 2, or should Step 2 not be appropriate, the matter will be brought to the Managing Director for resolution.
- b) Should the grievance or dispute directly involve the Managing Director, the Managing Director will then refer the matter to the Chairperson of the Board of Directors.

## **Resolution by Arbitration (Step 4)**

- a) Should the matter remain unresolved following Step 3, the Managing Director may appoint an independent arbiter to review the dispute and suggest an amicable solution.

## **Resolution by External Authority**

- a) Should the matter remain unresolved following Step 4, the client or visitor may seek the advice (at their own expense) of an independent authority that is skilled in dispute resolution processes.
- b) Please note that although every effort is made to resolve a complaint at the lowest level, a complainant has the right to use an external avenue for the complaint or seek advice outside of the IMPACT Community Services process at any stage. Depending on the nature of the complaint, the complainant has a number of options (**see below 6.3**) as well as the Health Ombudsman or Public Advocate.

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## **6.3. Complaints and Appeals – Specific Contracts and Legislation**

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Staff delivering services under specific contracts should familiarise themselves with additional procedural requirements (if any) in the case of complaints ensuring **Guidelines** pertaining to specific contracts are adhered to.

### **NDIS**

NDIS Participants voice and opinion must be heard and the complaints process is a valuable way of acknowledging and responding to any complaint, big or small. The complaints process must be made available to all NDIS participants, so they have an opportunity to raise any issue or concern.

The participant would firstly report their concern to their Support Worker or NDIS Manager, who will then ensure the correct process of documentation and resolution. But the participant may want to go directly to a General Manager or Managing Director if they so wish or submit an anonymous complaint.

NDIS participants should also be advised that they can make a complaint directly to the NDIS Quality and Safeguards Commission - <https://www.ndiscommission.gov.au/> - **1800 035 544**, if they have any concerns or are not satisfied with the internal processes.

### **ADE**

For **ADE** specific complaints, there is also available an independent external **Complaint Resolution and Referral Service** and a **National Disability Service Abuse and Neglect Hotline** [hotline@workfocus.com](mailto:hotline@workfocus.com), or free call number of **1800 880 052**. Callers who are deaf or have a hearing or speech impairment can call **1800 555 677**.

### **Aged Care Services**

Staff delivering services under the **Aged Care Standards** should familiarise themselves with the requirements under these standards and be aware that where a consumer is not satisfied with the results of the internal complaint mechanisms, or for some reason does not want to use this mechanism, they should be advised to contact the relevant Authority or Commission complaint service regarding their complaint.

**Aged Care** participants should be advised that there is an **Aged Care Complaints Commissioner** who provides a free service for any concerns. The number is **1800 550 552**.

### **Complaints against the Human Rights Act 2019 (Qld)**

It is every individual's right under the Human Rights Act 2019 (Qld) to complain and seek a remedy, if they believe IMPACT has in some way breached one or more of their human rights. The complainant must first raise the complaint with any Manager or the Human Rights and Freedom from Abuse Officer (Karen Craft) and IMPACT will instigate a resolution. If there has been no resolution or an inadequate response, the complainant

## Complaints & Appeals: Clients & Visitors

may refer the matter to the Queensland Human Rights Commission after 45 business days have elapsed. The website is <https://www.qhrc.qld.gov.au/> and phone number: **1300 130 670**.

### **Privacy Complaints**

Any complaints raised relating to the privacy of information may be disclosed to their Support Worker, any Manager or the Privacy Officer (Lynn Downie). IMPACT will instigate a resolution within 30 days at a maximum. Should the complaint not be satisfactorily resolved, the individual can take the complaint to either:

#### State

- Information Commissioner <https://www.oic.qld.gov.au/about/privacy/privacy-complaint-form> or Ph: 1800 642 753

#### National

- Australian Information Commissioner [enquiries@oaic.gov.au](mailto:enquiries@oaic.gov.au) or Ph: 1300 363 992.

depending on the funding body of the relevant program.

### **Other People with Special Needs**

If necessary, for processing a complaint, IMPACT Community Services gives extra consideration to people with special needs including people with vision or hearing impairments and people from culturally and linguistically diverse backgrounds. The following are examples of what may be used to assist in the lodgement and resolution of a complaint:

- a) Allowing an advocate (e.g. a cultural elder) to accompany the complainant
- b) Writing notes as confirmation that the staff member taking the complaint and the complainant have been clearly understood
- c) Seeking the services of someone to interpret using sign language
- d) Seeking the services of an interpreter who speaks the native language of the complainant

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## **6.4 Complaints and Appeals – Registered Training Organisation ONLY**

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### **Scope**

This complaints and appeals policy and procedure for the RTO will manage allegations involving the conduct of:

- IMPACT Community Services RTO, its trainers, assessors and other staff
- stakeholders and others
- a third-party providing services on the RTO's behalf, its trainers, assessors or other staff (where this may be relevant to its operations)
- a student of IMPACT Community Services RTO

### **RTO Policy**

IMPACT Community Services believes that a person, who has a complaint or appeal, has the right to raise the complaint or appeal and expect that every effort will be made to resolve it in accordance with this policy, and without prejudice or fear of reprisal or victimisation.

The person has the right to present the complaint or appeal formally and in writing.

IMPACT Community Services will manage all complaints and appeals fairly, equitably and as efficiently as possible. IMPACT Community Services will encourage the parties to approach the complaint or appeal with an open mind, and to resolve problems through discussion and conciliation.

IMPACT Community Services seeks to prevent complaints by ensuring high levels of satisfaction with its training and assessment, its performance as an RTO and with its public image. If a complaint should arise, all staff are expected to be fair, courteous and helpful in all dealings with the person making the complaint or lodging the appeal, and to assist or refer where they can.

Where a complaint or appeal cannot be resolved through discussion and conciliation, IMPACT Community Services acknowledges the need for an appropriate external and independent person/party to mediate. The parties involved will be given the opportunity to formally present their case in an independent forum.

## Complaints & Appeals: Clients & Visitors

Confidentiality will be maintained throughout the process of making and resolving complaints/appeals. IMPACT Community Services seeks to protect the rights and privacy of all involved, and to facilitate the return to a comfortable and productive learning environment.

A copy of this Policy is available to the public, all stakeholders, students and staff via the IMPACT Community Services website and is available in the Student Handbook. Information and contact details of external authorities who may be approached, is also included.

### RTO Process

1. Should a person have a complaint or appeal, the following steps are to be followed:
  - a) Discuss the issue directly with those involved to try and resolve it verbally.
  - b) If no resolution is reached, discuss the issue with the Trainer and Assessor / RTO Coordinator to see if it can be resolved.
  - c) If this resolves the situation, the outcomes will be put in writing and signed by both parties. One of the two copies of the outcome will be placed on file (typically in the Student File) held with the Trainer/Assessor and securely stored in a locked cabinet. A copy should also be given to the Manager, Training Services.
  - d) If there is still no resolution, the person should put the following information relating to the complaint or appeal in writing to Manager, Training Services, IMPACT Community Services. This **written notification** can be made using the form [ADM025.01 Complaints, Appeals & Grievances](#) or by email, letter or over the phone (with a dictation made by the RTO representative), and must include:
    - A description of the complaint or appeal
    - A statement about whether the person wishes to formally present their case
    - Information about any prior steps taken to deal with the complaint or appeal
    - What they would like to happen to fix the problem and prevent it from happening again
2. A written acknowledgement of receipt of the complaint/appeal will be forwarded to the complainant within two working days.
3. The Manager, Training Services will either deal with the issue personally, or arrange for it to be dealt with by a management representative (e.g. General manager Operations). This process must commence within two working days from the time the Manager Training Services receives the **written notification** and a response/resolution is expected to be presented in most circumstances within 14 working days (depending on the nature of the complaint/appeal).
4. The Manager Training Services will:
  - Undertake a preliminary enquiry to determine nature of the complaint/appeal
  - Inform other relevant parties (if necessary)
  - Provide all parties an opportunity to present their case (with a support person and/or parent/guardian if a student is under 18 years of age)
  - Discuss with the parties any resolution and any arrangements required by the RTO
  - Record the outcome of discussion on [ADM025.01 Complaints, Appeals & Grievances](#)
  - Provide the outcome in writing to the person (and other parties if relevant)

*N.B. An independent unofficial mediator (e.g. a representative from People and Culture, a General Manager) can also be requested to attend any meetings at any stage of the process if this is considered to be beneficial.*

5. Should the matter remain unresolved following the above or should the above action not be appropriate, the Manager, Training Services will bring the matter to the attention of the Managing Director for resolution.
6. Should the matter remain unresolved at this stage, the Managing Director may appoint an independent party (person or panel) to review the dispute and suggest an amicable solution.

As examples, this party may include a Board member (or Chair) of the IMPACT Community Services Board, a member of the Client Reference Group, an Industry Representative or a person/group skilled in mediation.

Any costs involved must be outlined to the complainant prior to this appointment action.



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The person (complainant) will be given the opportunity to formally present their case. The time frame for this process may vary but should usually take no longer than 14 working days.

7. All parties involved will receive a written statement of the outcomes, including reasons for the decision within the 14-working day period. If the process is likely to take longer than 60 days from the complaint or appeal being received, the person will be notified in writing of the reason for the delay and be kept informed of all progress.
8. If the person is still not happy with outcomes from the independent process, they may take their complaint to the VET Regulator - the Australian Skills Quality Authority.
  - Information about the process can be found at:

<http://www.asqa.gov.au/complaints/make-a-complaint---domestic-students/before-you-make-a-complaint--domestic-students.html>

or at the National Complaints Hotline at <https://www.education.gov.au/NTCH>

*It is expected that all previous attempts at resolution will be made prior to a person approaching ASQA or the National Complaints Hotline.*

9. From any substantiated complaints and appeals, the causes will be reviewed as part of the RTO's continuous improvement processes, and appropriate corrective action will be taken to prevent or reduce the likelihood of reoccurrence. Actions that have been implemented for improvement will be recorded on the Continuous Improvement Register. The Managing Director signs off on all formal complaints.
10. Any complaint that is related to illegal activity, such as theft, assault etc., will be reported to the appropriate General Manager and the Managing Director immediately for their advice regarding referral to the appropriate authority.
11. Students have a maximum period of four (4) weeks in which they can appeal against results of assessment.
12. Appeals must be lodged in the four (4) week period immediately following results being available.
13. All documentation relating to complaints or appeals will be stored securely as per **the MGT003 Record Control and Management**. Records will be kept within locked filing cabinets and/or in a secure electronic environment. All interviews/discussions regarding the complaint will be conducted in a confidential environment. Discussion of any complaint/appeal will be on a "needs to know" basis.

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### Handling a Sexual Harassment Complaint

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Please refer to **HRM006 Workplace Bullying, Sexual Harassment and Discrimination** for information regarding the handling of complaints of workplace harassment and discrimination.

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### Complaints involving Abuse, Neglect or Exploitation of Children and/or People with a Disability

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Any complaints involving the abuse, neglect or exploitation of children or people with a disability must be documented on **ADM024.01 Harm, Abuse, Neglect and Critical Incident Form**. Please refer to **POL019 Safety and Wellbeing of Children, Young People or People with a Disability** and **ADM024 Disclosure and Reporting of Violence, Harm, Abuse, Neglect and Critical Incident**.

#### 7. Records

Records that verify this procedure has been followed correctly must be legible and accurate, readily identifiable, and retrievable.

For general practices and procedures regarding Record Management at IMPACT, refer to **MGT003 Record Control & Management**.

#### 8. Continuous Improvement and Evaluation

All programs and sections must adhere to a process of continuous improvement. Periodic evaluations must also be undertaken in accordance with the **MGT013 Evaluation**.

## Complaints & Appeals: Clients & Visitors

The management of IMPACT Community Services is committed to a process of Continuous Improvement for all of its programs and activities in accordance with the **ISO 9001:2015 Quality Management Systems**.

### **EVALUATION AND IMPROVEMENT**

As part of monthly meetings within each program, service or enterprise, staff have opportunities to evaluate processes, identify areas requiring attention and offer suggestions for improvement.

On an annual basis, staff contribute to the process of Continual Improvement via the completion of a **QMS002.03 QMS Staff Survey**. This form is distributed at the time of the Internal Audit of each program/enterprise (refer to **QMS002 Internal Audits and Management Review**). Contribution from these Surveys are reported to the Executive Management Team in the Quarterly QMS reports.

An important part of the Continual Improvement process is obtaining feedback on performance from a range of stakeholders throughout the year including; staff, clients, volunteers, Recycling and Collections workers, parents and carers, the community services sector and the business sector. **MGT013 Evaluation Procedure** details the process, collection and collation of evaluations and data across the organisation.

### **REGISTER**

After identification and implementation of improvements to their programs or enterprises, Managers are to record the enhancement on the **Organisational Continuous Improvement Register**, located at **W:\Corporate Services\Continuous Improvement\ Continuous Improvement Register**. Trends or exceptional entries are discussed at monthly Managers' meetings.

REVISIONS: 129 209 408 20100514 20101014 20110526 20111207 20130102 20130109 20130711 20130726 20130808  
20131031 20131212 20140602 20150211 20160224 20170605 20180313 20180626 20190115 20190729  
20190806 20200122 20201029