QUALITY MANAGEMENT MANUAL

Jun 2025 – V2

Contents

Introduction

Purpose
This Quality Management Manual outlines the structure, responsibilities, and processes that make up Altaira's Quality Management System (QMS). It ensures compliance with **AS/NZS ISO 9001:2015** and provides a foundation for the continual improvement of our services and systems.

Scope
The QMS applies to all operations, staff, and services provided by Altaira. It covers all activities related to client service delivery, staff competency, risk management, and organisational governance.

Quality Management System - Processes and Their Interaction
Altaira processes for QMS throughout the organisation includes:

Core Processes
•Client onboarding and needs assessment
• Recruitment and credentialing
• Staff allocation and service delivery
• Incident and complaint management

Support Processes
• Training and competency management
• Human resources
• IT and system management
• Document control

Governance Processes
• Risk management
• Internal audits
• Management review
• Continuous improvement

These processes interact to ensure consistent service delivery. Outputs from one process form inputs into another (e.g. recruitment and credentialing outputs inform staff allocation; incident trends inform training and risk management). Process effectiveness is monitored through audits, performance data, and management review.

References
•   AS/NZS ISO 9001:2015 Quality Management Systems – Requirements
•   Altaira Policies and Procedures
•   Altaira Quality Management Policy

Quality Management Policy

Policy Statement
Altaira's management team and staff are committed to operating a Quality Management System (QMS) based on the requirements of **AS/NZS ISO 9001:2015**. We strive to consistently meet client, statutory, and regulatory requirements while continually improving the effectiveness of our QMS.

Quality Objectives
Altaira establishes measurable quality objectives that are consistent with our Quality Policy and are reviewed annually at Management Review.

The following measurable objectives apply:

1. **Client Satisfaction**
Maintain overall client satisfaction results at ≥ 85% positive responses in six-monthly surveys.
2. **Reduction of Non-Conformances**
Reduce repeat non-conformances by 10% year-on-year through corrective action and root cause analysis.
3. **Training Compliance**
Maintain 100% compliance in mandatory training and regulatory requirements for all active staff.
4. **Corrective Action Effectiveness**
Ensure 100% of corrective actions are closed within agreed timeframes and effectiveness is verified.
5. **Internal Audit Completion**
Complete 100% of scheduled internal audits as per the annual risk-based audit program.

Progress against these objectives is monitored through audit results, system data (JLB), training records, and management review.

Objectives may be updated where risks, opportunities, or organisational context change.

Quality Management System
We will use the QMS to:
a) Record and manage incidents, hazards, near misses, non-conformances, and improvement opportunities.
b) Analyse trends to support risk-based thinking and identify meaningful areas for improvement.
c) Assess risks and implement effective controls.
d) Conduct risk-based audits to identify gaps, corrective actions, and further improvement opportunities.
e) Collect and review client and employee feedback to support continual improvement.
f) Monitor staff training needs and ensure training supports competence and service quality.

Performance Monitoring
While operational measures may be used internally to support decision-making, quality objectives are not based on KPIs.
Instead, performance monitoring activities will focus on:

- evaluation of process effectiveness,
- analysis of trends and risks,
- outcomes of audits and corrective actions,
- feedback from clients, employees, and stakeholders, and
- demonstrated improvement in QMS processes.

Review
Formal Management Review Meetings will be conducted annually, or more frequently if required, to assess:

- the performance and suitability of the QMS,
- progress toward quality objectives,
- the effectiveness of actions taken to address risks and opportunities, and
- opportunities for further improvement.

Conclusion
Our QMS provides a structured framework for achieving quality service delivery, identifying system deficiencies, and driving continual improvement. Success is measured by our ability to improve QMS processes, enhance client satisfaction, and strengthen overall organisational performance, in alignment with AS/NZS ISO 9001:2015.

Organisational Context

Understanding the Organisation and its Context

Altaira identifies and analyses internal and external factors that influence our ability to deliver consistent quality outcomes, including:
- regulatory requirements
- labour market conditions
- client needs
- operational and financial considerations
- workforce capability

Understanding the Needs and Expectations of Interested Parties
Key interested parties include:
- clients
- employees
- regulatory bodies
- suppliers and partners
- community stakeholders

Their requirements are periodically reviewed during management review and strategic planning.

Determining the Scope of the QMS
The QMS covers the planning, delivery, evaluation, and improvement of all staffing, care, and support services provided by Altaira.

Leadership

Leadership Commitment
Management demonstrates leadership by:
- aligning the QMS with strategic goals
- ensuring resources are available
- promoting risk-based thinking and continual improvement communicating quality expectations

Quality Policy Communication
The Quality Policy is communicated through onboarding, internal training, and regular reviews. It is available to employees and stakeholders.

Roles and Responsibilities
- Director: ultimate responsibility for QMS effectiveness.
- Quality Manager: oversight, audits, documentation control, corrective actions.
- Managers/Supervisors: implement QMS processes within their areas.
- All Staff: follow QMS procedures, report risks, non-conformances, and improvement

Planning

Actions to Address Risks and Opportunities
Risk identification methods include:
- incident and hazard reports
- client and staff feedback
- WHS assessments
- trend analysis
- internal audits

Actions include implementing controls, updating procedures, and monitoring effectiveness.

Planning of Changes
Changes to the Quality Management System are planned and implemented in a controlled manner.

When changes are required (e.g. legislative updates, process improvements, structural changes), Altaira will:

1. Identify the need for change
2. Assess potential risks and impacts
3. Determine required resources
4. Assign responsibility for implementation
5. Communicate changes to relevant stakeholders
6. Monitor effectiveness following implementation

Significant changes must be approved by the Director prior to implementation.

All changes are documented through management meeting minutes, updated procedures, or continuous improvement records within JLB.

Quality Objectives

Quality objectives reflect continual improvement and include:
- improving client satisfaction
- enhancing QMS process effectiveness
- reducing system non-conformances
- increasing workforce competence
- strengthening service consistency and safety

Objectives are reviewed annually during management review.

Support

Resources
Altaira ensures adequate personnel, infrastructure, equipment, and technology are available to maintain effective operations.

Competence and Training
Training needs are identified through:
- performance reviews
- regulatory changes
- operational needs
- incident trends

Training programs ensure staff remain competent and compliant.

Communication
Internal and external communication is structured, consistent, and documented.

Documented Information
Documents and records are controlled to ensure:
- correct versioning
- secure storage
- availability to relevant staff
- protection from unintended alteration

Details of our Document control process can be found in QMSPR001 Document Development and Control Procedure and QMSPRO002 Protection of Information Assets Procedure.

Organisational Knowledge

Altaira determines and maintains the organisational knowledge necessary for the effective operation of its processes and to achieve conformity of services.

Organisational knowledge is maintained through:
- Documented policies and procedures
- CRM and operational systems
- Training materials and competency assessments
- Lessons Learned reports
- Audit findings and corrective action records
- Management meeting minutes
- Risk registers and incident trend analysis

Knowledge gained through experience, audits, incidents, and feedback is reviewed and incorporated into process improvements.

Where critical knowledge is at risk (e.g. staff turnover), succession planning, cross-training, and documented procedures are used to mitigate risk.

Operation

Operational Planning and Control

Key operational processes are established, maintained, and reviewed, including:
- client needs assessment
- staff assignment and deployment
- compliance monitoring
- service delivery procedures

Requirements for Services

All client requirements are clearly defined, documented, and verified before service delivery.

Service Provision

Altaira ensures services are delivered safely, consistently, and in line with client expectations.

Control of External Providers

Altaira ensures externally provided services and suppliers do not adversely affect service quality.
External providers (e.g. IT systems, training providers, contractors) are:
- Selected based on capability and compliance requirements
- Reviewed during supplier contract reviews
- Monitored through performance, reliability, and feedback
- Reassessed if non-conformances or risks arise

Records of supplier evaluations and reviews are maintained as part of Management Review documentation.

Where regulatory requirements apply, supplier compliance documentation is verified.

Control of Non-conforming Outputs

Altaira use the online system JLB to log suggestions for improvement, non-conformances, incidents, hazards, concerns and risks. Non-conformances are recorded, investigated, and resolved through corrective actions. Identified risks will be put on the risk register and controls will be implemented.

Customer Communication

Altaira maintains structured communication with clients throughout service delivery.
Communication includes:

- Clear definition and confirmation of service requirements prior to commencement
- Ongoing communication regarding service changes or concerns
- Formal complaint handling processes
- Six-monthly client satisfaction surveys
- Documentation of feedback within JLB

Complaints are recorded, investigated, and addressed in accordance with QMSOR001 Incident Management Procedure.

Client feedback is analysed for trends and improvement opportunities.

Performance Evaluation

Monitoring, Measurement, Analysis, and Evaluation
Performance data is collected to assess QMS effectiveness.
This includes:

- trend analysis – completed six monthly on non-conformances and informs training.
- client and employee satisfaction results – completed six monthly as per the audit schedule
- audit findings – completed as per the audit schedule and non-conformances are rectified.
- training compliance – training needs analysis is completed annually in conjunction with trends identified through non-conformances.
- incident and hazard reports

Internal Audits
Risk-based internal audits are conducted to verify compliance and identify improvements. Altaira has an annual audit schedule based upon identified risks as follows:

HIGH RISK	REGULATORY REQUIREMENT (e.g. Police Clearance, AHPRA Registration, WHS Audit)	QUARTERLY
MEDIUM	REQUIRED FOR THE POSITION (e.g. Training, First Aid, CPR)	6 MONTHLY
LOW	Operational Audits	YEARLY

Audits will be delegated to staff by the Head of Compliance and Education. The audit schedule may vary due to Head of Compliance and Education discretion.

Management Review
Annual management review evaluates:

- QMS performance and suitability
- progress toward quality objectives
- risks and opportunities
- resource needs
- audit outcomes
- corrective action effectiveness
- client and employee satisfaction survey

Quality Management meeting Reviews are conducted as per Appendix

Management Review outputs include decisions and actions related to improvement opportunities, resource needs, changes to the QMS, and updates to quality objectives.

SWOT/Pestle Analyses
SWOT and Pestle Analyses are conducted and are used to inform the Business Plan. SWOT and Pestle Analyses and the Business Plan are reviewed annually at the Management Meeting.

Improvement

Continual Improvement
Altaira is committed to proactive and reactive improvement. Continual improvement is driven by:
- feedback
- audit results
- non-conformance analysis
- performance trends
- staff suggestions
- changes in context or requirements

Continuous improvements are logged on JLB. The Head of Education and Compliance will oversee the progress and completion of continuous improvements. The Director must be consulted regarding continuous improvements and will approve or decline requests for improvement.

Non-conformances and Corrective Action
The process is outlined in QMSOR001 Incident Management Procedure. The process includes:
1. Identify non-conformance
2. Contain (if needed)
3. Investigate root cause
4. Implement corrective action
5. Verify effectiveness
6. Document outcomes

Appendices
Appendix 1 – Quality System Management Meeting Agenda
Appendix 2 – SWOT Analysis
Appendix 3 – Pestle Analysis

Appendix 1 Quality System Management Meeting Agenda

Quality System Management Meeting Agenda

Date & Time: Click here to enter text. **Location: Altaira Conference Room**

Chairperson: Click here to enter text.

Standing Agenda Items

Report from Director
- Strategic Plan Report
- Finance Report
- Supplier contract reviews
- At risk sites report

Report from Regulatory and Compliance Operations Manager
- Trends analyses - Incidents, hazards and non-conformances
- CAR Report
- Continuous Improvement Plan Report
- Lessons Learned Report
- Audit Results
- Training Needs Report

Report from Client Manager
- Results of Client Satisfaction survey

Report from Head of Education and Compliance
- Results of Employee Satisfaction survey

Report from Head of Allied Health
- Results of Allied Health Satisfaction Survey

Review of SWOT

Review of PESTLE

ALTAIRA

Appendix 2 SWOT Analysis

Helpful	Harmful
Strengths (S)	**Weaknesses (W)**
Internal • Recruitment and support of new graduates • Permanent positions offered • Office staff – professional network, clinical skills, business skills, legal skills, knowledge of community care, experienced in personal care work and able to mentor and train • Customer service • Clinical governance • Recruitment process • Allocations process • Pricing structure • Large customer base • Free recruitment • Value adds – auditing, clinical and community support, 2025 application for RTO (cricos) in Cert III Individual Support CHC33021, First Aid HLTAID011, Manual Handling HLTWHS005, CPR HLTAID009, Assist Clients with Medication HLTHPS006 • Multi-skilled office staff – also can be a weakness when staff fall behind in their own work when covering for others • Small management team means that decisions are streamlined • Local company (can also be a weakness) • Transparency (can also be a weakness if clients become too aware of our weaknesses) • Strong evidence based-focus on occupational health services, with detailed yet succinct same day reports available • Strong Client Partnerships • Social Corporate Responsibility • Automated Systems CRM. LMS, SMA	• Employment of graduate nurses and PCWs and inexperienced hospitality staff • Local company (also a strength) • IT systems – reliance on IT (downtime when IT systems do not function as per requirement) • Office staff - lack of experience in office/team environment • Transparency with clients

Opportunities (O)	Threats (T)
External	
• Care minutes will increase agency usage • Growth in community sector will lead to increased usage • Opportunity to take over recruitment processes for clients • Conferences • Build upon existing network in the occupational health industry • Existing client relationships at ELT level may help leverage trials for pre-employment functional assessment overflow in aged care facilities • Look for soft entry to occupational health services for potential clients by offering manual handling training, injury prevention screening, discounted physio treatment as primary provider for work related injuries, etc. • Explore opportunities to utilise Michael's occupational health background as external return to work coordinator for smaller organisations • Become circus accredited RTO in Cert III Individual Support CHC33021, First Aid HLTAID011, Manual Handling HLTWHS005, CPR HLTAID009, Assist Clients with Medication HLTHPS006	• Employment of graduate nurses and PCWs and inexperienced hospitality staff • Local company (also a strength) • IT systems • Office staff - lack of experience in office/team environment • "fly by night " agencies entering the market and undercutting • Rostering portals being utilised to manage agency costs and hours • Key competitors HCA and YNA offering to agency rostering platforms as a side piece, it is a conflict of interest as they are managing the agencies on the platforms • Legislative changes in the industry and nation wide (Portable Long Service Leave; Aged Care wages increase 2025; Casual Conversion Industrial Reforms; Same Job Sam Pay) • Changes in federal Migration Policy

Appendix 3 Pestle Analysis

Area	Item	Impact
Political	Federal Migration Policy	Reduction in migration numbers – impact workforce and students for future RTO
	Same Job Same Pay bill	Ensuring strong compliance against the bill – further administrative costs
	Return to Work SA – updated Legislation	Onus on Labor Hire companies and host employers to provide suitable duties
	Portable Long Service Bill – South Australia	Increase cost against employees working in community sector, therefore increase charge rates to community clients -
	New Aged Care Act	Ensuring compliance with the new act.
Economic	Government funding into Aged Care Industry	Reduced agency bookings
	Competition from larger agencies	Consistent impact on attracting and retaining staff
	Tighter economy – rates rise; increase cost of living	Reduced bookings – Clients managing their agency spend more stringently
Sociological	Consumer and client expectation is high	Increased cost of compliance with clients' processes Difficulty in sourcing adequately qualified and experienced staff
	Increase in growth in community care	Increased demand for staff
	Increase in fraud amongst RTOs Need to verify certificates coming from candidates to ensure they have completed suitable training.	Increased cost of ensuring valid Cert 3
	Ageing population	Sustained demand and for increased demand in the future.
Technological	Increase in cyber threats	Increased cost of security and training
	Increased uptake by clients utilising Shift Booking Platforms	Increased cost in administrative work and allocators – increased competition to bid for shifts – resulting in loss of revenue and bookings
	Increased uptake of clinical IT systems by our clients	Increased cost of training for staff
Legal	New Aged Care Standards now scrutinize suppliers	Increased cost of compliance
	Care minutes introduced in aged care	Increased demand, especially for RNs
	Aged Care Code of Conduct and banning orders introduced	Increased cost of compliance, training

Environmental	Covid and other infectious diseases	Continued compliance with infection control measures, PPE Increased cost of training.