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1. PURPOSE

1.1. The Continuous Quality Improvement Policy supports ongoing review and refinement of CRCA safeguarding policies, procedures, activities and practices. It ensures that safeguarding improvement is informed by data, feedback, audit, learning, external review, and the lived experience of local churches and those affected by safeguarding practice.

2. BIBLICAL AND THEOLOGICAL BASIS

2.1. Proverbs 4:7 teaches that wisdom and insight are foundational. Continuous quality improvement reflects this wisdom by seeking to learn, understand and strengthen safeguarding practice.

2.2. The biblical call to faithful stewardship requires the CRCA to review, learn and act when safeguarding practice can be improved.

3. SCOPE

3.1. This policy applies to all members, pastors, elders, office bearers, staff, volunteers, contractors, Safe Church Representatives, Safe Church Administrator, Safe Church Unit, Safe Church Advisory Committee, and any person participating in CRCA activities.

3.2. The policy covers safeguarding policies, procedures, activities, training and development, feedback mechanisms, complaint and incident trends, reporting, audit, monitoring, review and stakeholder collaboration.

4. VALUES

4.1. The CRCA is committed to the following values so that the safety and well-being of all people remain at the forefront of decisions and actions.

4.1.1. **Scriptural teachings - upholding safety and dignity:** central to the Church's teaching is the call to embody love, mercy and justice. Colossians 3:17 calls all things to be done in the name of the Lord Jesus, and Luke 18:16 shows Jesus welcoming children and affirming their place in the kingdom. The responsibilities in this policy are therefore carried out in a way that honours the dignity, voice and safety of each person.

4.1.2. **Zero tolerance:** the CRCA has a zero-tolerance approach to abuse and harmful behaviour. The responsibilities in this policy must never be used to suppress, minimise or ignore concerns about safety, harm or abuse.

4.1.3. **Transparency and accountability:** the CRCA fosters a culture of openness, appropriate information sharing, feedback and accountable action.

4.1.4. **Shared responsibility:** safeguarding is everybody's responsibility and requires the participation of local churches, personnel, members and denominational safeguarding structures.

4.1.5. **Empowerment:** the CRCA supports people to understand their rights, speak up, raise concerns and contribute to the development of safer church environments.

4.1.6. **Integrity:** the CRCA fosters honest, ethical and respectful engagement at all levels of church life.

5. DEFINITIONS

5.1. Terms defined in the National Safeguarding Policy apply to this policy unless this section gives a more specific operational meaning.

5.2. **Continuous quality improvement** means an ongoing cycle of review, learning, corrective action and practice improvement designed to make safeguarding implementation more effective over time.

5.3. **Review cycle** means the planned timing and process for reviewing policies, records, incidents, complaints, feedback, training data, audit findings and implementation evidence.

5.4. **Incident learning** means learning drawn from an incident, near miss, complaint, breach, disclosure or safeguarding concern so that future risk can be reduced.

5.5. **Implementation monitoring** means checking whether safeguarding policies, controls, roles, training, records and pathways are being applied in practice.

5.6. **Audit** means a structured review of evidence against specified safeguarding requirements, policy expectations or implementation criteria.

5.7. **Corrective action** means an action required to address a gap, error, risk, non-compliance, inconsistency or failure in safeguarding practice.

5.8. **Trend analysis** means review of repeated issues, patterns, data or findings to identify systemic risk or improvement priorities.

5.9. **Policy review** means formal consideration of whether a policy remains accurate, coherent, current, usable and aligned with the CRCA safeguarding framework.

6. POLICY

6.1. **Commitment to excellence:** the CRCA is committed to ongoing improvement in safeguarding practice, policy and culture.

6.2. **Data-informed approach:** safeguarding incidents, complaints, feedback, training completion, worker-screening currency, audit findings, risk trends and implementation progress are used to identify opportunities for improvement.

6.3. **Open feedback culture:** feedback from members, children, young people, adults at risk, families, personnel, local churches and other stakeholders is valued and considered.

6.4. **Proactive evolution:** safeguarding risks change over time. The CRCA seeks to anticipate, identify and respond to emerging risks, including risks arising from technology, social media, changing legal obligations, mobility of personnel, and local-church practice.

6.5. **Continuous improvement cycle:** continuous quality improvement is ongoing. External or three-yearly audit is a structured checkpoint within a broader cycle of feedback, training, policy review, data analysis, implementation and local practice improvement.

6.6. Self-assessment: the Safe Church Advisory Committee uses a safeguarding maturity model assessment tool (based on the National Principles for Child Safe Organisations and relevant State/Territory obligations), to assess safeguarding maturity and inform improvement priorities.

6.7. **Trigger thresholds:** the Safe Church Advisory Committee maintains a catalogue of safeguarding indicators and triggers for review, including serious incidents, systemic issues, failed audit findings, substantiated complaints of denominational significance, regulatory direction, Police outcomes with safeguarding implications, and other matters identified by the Safe Church Advisory Committee.

7. PROCEDURES

7.1. **Data collection and analysis:** safeguarding incidents, complaints, concerns, training information, screening information, audit findings and implementation records are logged or recorded through approved CRCA safeguarding systems appropriate to the type of information. Systems and administrative records are maintained by the Safe Church Administrator where the CRCA safeguarding framework requires central records. Trend information is reported to the Safe Church Advisory Committee in a form that supports oversight, privacy and continuous improvement.

7.2. **Trend analysis:** safeguarding data is reviewed for patterns, recurring issues, unresolved risks and opportunities for improvement. Trend analysis occurs at least quarterly, with governance-level review at least annually, and immediate review after serious safeguarding incidents or matters of denominational significance.

7.3. **Review meetings:** Safe Church Advisory Committee meetings consider data, feedback, audit outcomes, implementation progress and emerging risks. Agendas are informed by current trends and risk indicators.

7.4. **Key performance indicators and thresholds:** the Safe Church Advisory Committee maintains a catalogue of safeguarding indicators covering complaint volume and timeliness, Reportable Conduct Scheme notifications, training completion, worker-screening currency, incident recurrence, audit-finding closure, and implementation progress.

7.5. **External review:** independent external review may be initiated where there is a serious or systemic safeguarding incident, a failed audit finding not closed within the agreed timeframe, a substantiated complaint of denominational significance, a regulator direction, a Police outcome with material safeguarding implications, or a determination by the Safe Church Advisory Committee.

7.6. **Community feedback mechanisms:** local churches and denominational bodies use accessible feedback pathways so community members can raise concerns, identify gaps and suggest improvements. Feedback is reviewed and used to inform action where appropriate.

7.7. **Action planning and piloting:** findings from audit, review, data analysis and feedback are translated into action plans. Significant changes may be piloted before wider rollout, with learning used to refine implementation.

7.8. **Rollout governance:** substantive amendments to safeguarding policies and procedures are rolled out under a defined plan that identifies the responsible body, communication method, training requirements, implementation timeframe and verification arrangements. The Safe Church Administrator maintains rollout records and administrative implementation information. Progress is reported to the Safe Church Advisory Committee for oversight and continuous quality improvement.

7.9. **Differentiated communication:** improvement outcomes and policy changes are communicated in formats appropriate to office bearers, personnel, volunteers, children and young people, parents and guardians, and the wider congregation. Cultural safety and accessibility are considered in communication.

8. ROLES AND RESPONSIBILITIES

8.1. Role definitions used in this policy are consistent across the CRCA policy suite.

8.2. **Safe Church Advisory Committee:** oversees the continuous-improvement process; reviews data, trends, audit outcomes and high-risk matters; maintains trigger thresholds; engages external experts where appropriate; and sets safeguarding improvement priorities.

8.3. **Safe Church Administrator:** administers approved safeguarding record systems, dashboards, registers, rollout records, training records, feedback tools and implementation records; supports reporting to the Safe Church Advisory Committee; and maintains the administrative information required for continuous quality improvement.

8.4. **Safe Church Unit:** may provide safeguarding response insights, triage information, complaints and incident trend information, and advice where improvement priorities arise from safeguarding response, escalation or statutory pathway matters. The Safe Church Unit provides response-related input but does not replace the governance role of the Safe Church Advisory Committee.

8.5. **Session / Church Council:** implements safeguarding improvements locally, participates in self-assessment and audit activity, provides required safeguarding information, receives improvement notices and communicates local changes to personnel and members.

8.6. **Safe Church Representative:** supports local implementation, encourages feedback, assists local awareness and supports the collection of information needed for local safeguarding improvement.

8.7. **Members and personnel:** provide feedback, participate in improvement processes, complete required training, report concerns and support safer practice.

9. BREACHES

9.1. Failure to adhere to this policy or to implement authorised safeguarding improvement actions may result in mandatory retraining, review of role or responsibilities, or other action under the Disciplinary and Breach Response Policy.

10. RELATED POLICIES

10.1. National Safeguarding Policy. Safeguarding Governance and Leadership Policy. Complaints Handling Policy. Disciplinary and Breach Response Policy. Learning and Development Policy. HR / Recruitment Policy. Information Sharing and Record Keeping Policy. Privacy Policy.

11. MONITORING AND REVIEW

11.1. This policy is reviewed every three years, or earlier where required by legislative change, regulator guidance, audit findings, serious incidents, a substantiated complaint, material safeguarding risk, or a decision of the Safe Church Advisory Committee. Feedback on this policy may be sent to the Safe Church Unit at scu@crca.org.au at any time.

Document	Control	History			
Version	Approval date	Effective date	Approved by	Author or review lead	Summary of changes
0.1	16/09/2025	16/09/2025	Not approved	Align Safeguarding	Initial consultation draft.
0.2	09/07/2026	09/07/2026	SCAC	Align Safeguarding	Statuary updates
0.3	28/07/2026	28/07/2026	SCAC (SIC)	Align Safeguarding	SCAC feedback
1.0	16/09/2026	16/09/2026	SCAC (SIC)	Align Safeguarding	First approved issue.