

QQ10 - Quality and Quality Assurance Policy and Procedure

Category: Quality Assurance Sub-category: Management of Quality Assurance

Policy Review Sheet

Last Reviewed: 01/02/19 Last Amended: 01/02/18

Next planned review in 12 months, or sooner as required.

Note: The full policy change history is available in your online management system.

Business Impact:	Low	Medium	High	Critical
	X			
Minimal action required circulate information amongst relevant parties.				

 Reason for this review:	Improve usability
 Were changes made?	Yes
 Summary:	Conversion to QCS new policy format. Addition of Healthcare Quality Improvement Partnership document (released May 2017) 'Social care audit guidance' as well as some general additions across the policy.
 Relevant Legislation:	<ul style="list-style-type: none"> • The Care Act 2014 • Equality Act 2010 • The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 • The Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2015 • Health and Safety at Work etc. Act 1974 • Human Rights Act 1998 • The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 • Management of Health and Safety at Work Regulations 1999 • Safeguarding Vulnerable Groups Act 2006
 Underpinning Knowledge - What have we used to ensure that the policy is current:	<ul style="list-style-type: none"> • Care Quality Commission, (2017), <i>Themes in health and social care</i>. [Online] Available from: http://www.cqc.org.uk/publications/themes-care/themes-health-social-care [Accessed: 01/09/2017] • The NICE Collaborating Centre for Social Care (NCCSC), (2017), <i>Quality standard resources</i>. [Online] Available from: https://www.scie.org.uk/nccsc/quality-standard-resources.asp [Accessed: 23/07/2018] • Healthcare Quality Improvement Partnership, (2017), <i>Social care audit in practice</i>. [Online] Available from: https://www.hqip.org.uk/resource/social-care-audit-guidance/#.XKIZ0HdFyUk [Accessed: 01/04/2019] • NICE, (2018), <i>Decision-making and mental capacity - Guidelines NG108</i>. [Online] Available from: https://www.nice.org.uk/guidance/ng108 [Accessed: 18/10/2018]
 Suggested action:	<ul style="list-style-type: none"> • Notify relevant staff of changes to policy • Discuss in team meetings • Discuss in supervision sessions • Confirm relevant staff understand the content of the policy • Encourage sharing the policy through the use of the QCS App

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? 1. Purpose

1.1 To identify that which 4SocialCare Ltd defines as “quality”. To ensure that the policies and processes which will promote that definition are in place, and to ensure that those processes are carried out in accordance with the definition.

1.2 To ensure compliance with legislation, regulations, quality standards and evidence-based practice.

1.3 To support 4SocialCare Ltd in meeting the following Key Lines of Enquiry:

Key Question	Key Line of Enquiry (KLOE)
SAFE	S2: How are risks to people assessed and their safety monitored and managed so they are supported to stay safe and their freedom is respected?
EFFECTIVE	E1: Are people’s needs and choices assessed and care, treatment and support delivered in line with current legislation, standards and evidence-based guidance to achieve effective outcomes?
EFFECTIVE	E2: How does the service make sure that staff have the skills, knowledge and experience to deliver effective care and support?
CARING	C2: How does the service support people to express their views and be actively involved in making decisions about their care, support and treatment as far as possible?
RESPONSIVE	R2: How are people’s concerns and complaints listened and responded to and used to improve the quality of care?
WELL-LED	W2: Does the governance framework ensure that responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed?
WELL-LED	W3: How are the people who use the service, the public and staff engaged and involved?

1.4 To meet the legal requirements of the regulated activities that 4SocialCare Ltd is registered to provide:

- The Care Act 2014
- Equality Act 2010
- The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- The Health and Social Care Act 2008 (Regulated Activities) (Amendment) Regulations 2015
- Health and Safety at Work etc. Act 1974
- Human Rights Act 1998
- The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009
- Management of Health and Safety at Work Regulations 1999
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2. Scope

2.1 The following roles may be affected by this policy:

- All staff

2.2 The following people may be affected by this policy:

- Service Users

2.3 The following stakeholders may be affected by this policy:

- Family
- Advocates
- Representatives
- Commissioners
- External health professionals
- Local Authority
- NHS



3. Objectives

3.1 The objective of this policy is to provide clarity and act as a signpost to support staff as they navigate through the quality and quality assurance systems within the organisation.

This policy focuses on quality governance which includes driving continuous improvement and ensuring that high levels of quality and safety are met.

This policy takes into account the processes, framework and structures used to govern quality, but this is underpinned by staff adhering to organisational values and behaviours that promote a culture that drives quality.

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4. Policy

4.1 4SocialCare Ltd Defines Quality Service as:

- The provision of care and support to Service Users and their families which is in accordance with the clearly identified individual wishes of the Service User (or their appointed advocate where it is clearly identified that the Service User is unable or unwilling to express their wishes), fully supporting their human rights, and the principles of the Mental Capacity Act 2005
- The organisation believes that the management style, policies and day-to-day practices within the organisation should support the human rights of its Service Users by promoting open communication, a culture of problem resolution rather than blame, and the involvement of all participants in the services provided
- The organisation believes that a culture that is supportive of continuous improvement must be maintained by way of regular auditing and reviewing of the standards of performance in all aspects of the organisation and its personnel, followed by open discussion of strengths and weaknesses and action-planning to resolve weaknesses

4.2 The key processes which must be followed in order to provide a quality service in this organisation are identified as follows:

Admission

- Processes are in place to identify the physical, psychological and social needs of the Service User prior to admission
- Processes match the Service User to The Service which ensures that the stated needs of the Service User are within the services that The Service is able and willing to offer, and provide a negotiation path to an agreed compromise in situations where The Service is unable to provide the requested service but the Service User is willing to modify their requirements
- Processes on admission are in place to ensure that the previously identified requirements of the Service User are made known to all care staff who will be concerned with the Support of the Service User ensuring that the reception of the Service User is personalised and welcoming as well as encouraging and supporting further information gathering and recording in order to guide the actions of staff

Care Planning

- Processes are in place to ensure that care and support for each Service User is informed by a Care Plan which records sufficient static and dynamic information to provide an individualised and planned service to each Service User
- Processes used ensure that the Care Plan supports and accommodates the regular reviewing of Service Users' needs and services, revision of the plan of care, communication of those changes to all persons concerned with the Support of the individual, review of the effect of the changes, followed by further review
- Individually named members of staff are identified as primarily responsible for the organisation's interaction with each respective Service User

Discharge

- Processes on discharge to other care facilities which ensure that Service Users who are transferring are accompanied by sufficient information in order to minimise the disruption caused by the move and to help the receiving organisation to begin providing quality care services as soon as possible
- Processes for discharge on death are to ensure that the family and friends of the Service User and the employees who knew the Service User are sensitively supported through their grieving process

Human Resources

- Processes which identify the number and skill-level of employees that are required to deliver quality services to the specified number of Service Users
- Processes which recruit employees according to the identified skill specification, and whose values match those identified as important by 4SocialCare Ltd, particularly with respect to the preservation of the human rights of Service Users
- Processes are in place to ensure applicable staff adhere to their professional codes of conduct and registration requirements
- Processes which inform the employee about the management framework within which they work, the standards of performance required of them, and the opportunities for development which are open to them

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- Processes to support the personal development of the employee through induction and throughout their employment with 4SocialCare Ltd, ensuring that the needs of the organisation and the skills of the employees are regularly reviewed and matched via the development programme
- Processes which ensure that employees are managed in accordance with best practice and statutes, signifying the value of the employee to the organisation

Administration

- Processes to ensure the financial stability of 4SocialCare Ltd
- Processes which identify and accurately record all value transactions between the organisation, the Service User and the Service User's representatives, including any sponsoring organisations
- Processes to ensure 4SocialCare Ltd's compliance with its statutory responsibilities
- Communication processes to ensure that all employees are fully and accountably informed of information required to carry out their duties
- A complaints receipt and recording process which promotes the ability of the Service User to control their living environment
- Processes to control the quality of goods and services brought into the organisation
- Processes which inform 4SocialCare Ltd, its employees and customers of the legal, financial and administrative framework within which they interact
- Processes which check that all audit and review processes are carried out as specified, that action planning takes place, that planned actions are carried through, and that the effects of planned action are fed back into the management process

Ancillary services

- Processes to ensure that Service Users' individual and collective requirements for food are delivered
- Processes to ensure that Service Users' clothing is adequately cared for
- Processes to enable Service Users to maintain their normal life patterns, and their normal connections with their communities

➔➔ 5. Procedure

5.1 Quality will be assured by the existence of, and adherence to, the relevant policies and procedures within the management system.

5.2 Governance

4SocialCare Ltd will use governance to ensure delivery of a consistently high standard of care and support to Service Users

In relation to governance, 4SocialCare Ltd will:

- Ensure everyone understands what the service is supposed to do
- Ensure everyone understands their role in delivering the service
- Monitor all policies and procedures and how these are implemented
- Review policies and procedures on a regular basis to identify where improvements can be made
- Conduct internal audits
- Share information and encourage staff members to raise any issues
- Allow for CPD, staff training and development
- Allow for (and encourage) Service Users' suggestions

5.3 Auditing

- The purpose of auditing is to verify the implementation of stated and documented policies, procedures and standards. Audit reports will identify the action required to achieve compliance
- Employees will be involved in the audit process, and results will be reported to them
- Specific communication strategies will be implemented to support the audit and the carrying out of remedial action and improvements, such as Quality Meetings, Team Meetings, Staff Meetings and Management Meetings

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6. Definitions

6.1 Quality Assurance

- Quality assurance is a self-explanatory term which refers to the quality of a particular product or a particular service that has been provided by one individual or a company

6.2 Governance

- A term used to describe the way a process is managed, controlled or overseen. In relation to healthcare, clinical governance is a framework under which NHS bodies in the UK are accountable for continuously monitoring and improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care should flourish

The 5 Themes of Clinical Governance

Leadership, strategy and planning - identifiable Clinical Governance Lead
Public and patient involvement
Quality improvement processes
Staff focus
Use of information

The Contractual Components

Patient and public involvement
Clinical audit
Risk management
Clinical effectiveness programmes
Staffing and staff management
Education, training and CPD
Use of information to support clinical governance and health care delivery

6.3 Policy

- A policy is a deliberate system of principles to guide decisions and achieve rational outcomes. A policy is a statement of intent, and is implemented as a procedure or protocol

Key Facts - Professionals

Professionals providing this service should be aware of the following:

- Professionals have a duty to review their quality assurance systems to ensure they remain fit for purpose, current and reflective of national best practice recommendations and changing legislation & regulation. Quality changes all the time
- Quality is always determined and led by Service Users, their relatives, advocates, and related professionals
- All staff must adhere to total commitment to quality and improvement in every aspect of their work
- The purpose of having policies, procedures and guidelines in place, is to detail how quality delivery of service is to be achieved

Key Facts - People Affected by The Service

People affected by this service should be aware of the following:

- 4SocialCare Ltd is fully committed to providing the highest possible quality of service
- 4SocialCare Ltd provides evidence-based care and continually monitors services to ensure they provide the highest quality of care and best value
- 4SocialCare Ltd obtains feedback from others who are involved with our services to ensure they remain fit for purpose and reflect the needs and wishes of the Service User

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Further Reading

As well as the information in the 'Underpinning Knowledge' section of the review sheet we recommend that you add to your understanding in this policy area by considering the following materials:

The National Institute for Health and Care Excellence (NICE) has host of best practice documents relevant for both health and social care as well as audit tools and e-learning. NICE can be accessed via <https://www.nice.org.uk/>

The Social Care Institute for Excellence (SCIE) has a page on their website dedicated to available Quality Assurance resources and services and can be accessed via: http://www.scie.org.uk/atoz/?f_az_subject_thesaurus_terms_s=quality+assurance&st=atoz

The CQC has a range of resources that can be accessed via <https://www.cqc.org.uk/publications/themes-care/themes-health-social-care>

Think Local Act Personal: A national partnership transforming health and care through personalisation and community-based support. They published their 'Driving up Quality' paper with key principles to quality assurance and have a range of resources on their website: <https://www.thinklocalactpersonal.org.uk/>

The Healthcare Quality Improvement Partnership (HQIP) offers a range of resources including audits and guides for the social care sector and care homes and can be accessed direct via: <https://www.hqip.org.uk/resource/#.XK8LgZhKgdU>

Outstanding Practice

To be 'Outstanding' in this policy area you could provide evidence that:

- 4SocialCare Ltd reviews practice to ensure policies, procedures and audits are embedded and part of daily working practice
- 4SocialCare Ltd has a culture of learning and reviewing of processes to ensure they remain current to constant change
- 4SocialCare Ltd seeks feedback from stakeholders at every opportunity to mould the service around the needs of the Service User
- Staff have access to a range of resources and have a competent understanding of quality and quality assurance
- 4SocialCare Ltd takes part in national audits relevant to their service and embed any recommendations from the outcome of these
- The wide understanding of the policy is enabled by proactive use of the QCS App