

# **Quality Assurance Policy**

#### Aim

The quality system is established to enable staff to deliver services that satisfy or exceed customer expectations daily. It therefore encompasses all activities that contribute to this. We aim to provide support and care that meets our Service Users' choices and where appropriate, provide opportunities for service users to manage their own care/support; and create opportunities for them to express their views by;

- Listening to what service users want
- Involving all in planning services to meet their needs and preferences
- Promoting ideas, policies and actions which meet their aspirations
- Working with partners and local communities

## **Objectives**

SOS Homecare's objective is to become a provider renowned for its quality of service, by:

- Ensuring the quality and standards of the services it provides.
- Seeking to innovate, integrate, and improve its range of services to meet the changing needs and aspirations of all the people we support.
- Set objectives and standards, based on understanding our Service Users.
- Provide staff with the capability to achieve these.
- Measure our achievement through consultation and monitoring.
- Make improvements based on feedback.
- Recognise communication is a core skill to achieve success.

Within our framework, our services have established service objectives and standards against which performance is evaluated. All staff are clear about their role and assisted to develop their full potential through training, supervision, and support. Our services are monitored, by frequent contact with service users through visits and satisfaction questionnaires and by supervision and support of all our staff. The outcomes of these contacts, plus other comments that are received, including complaints, are considered when regularly reviewing the service. Outcomes are also analysed by the Registered Manager(s), Quality Manager, and the Care Governance Team at their monthly meetings.

The service strives to achieve the highest quality service possible for all the people who use its services. However, the service also thinks that no matter how good its present services are, there is always room for improvement. The service will continue to work towards maintaining those high standards that have been achieved. It will continue to work to improve those standards where there is scope for further improvement. The service expects all care staff and other employees to be committed to deliver a quality service and to improve in every aspect of their work.

## Responsibilities

Staff are assisted in their tasks by the provision of written policies and procedures, formulated and reviewed on a regular basis by the Policy Working Group. Our philosophy is to encourage and equip all staff to contribute fully to the achievement of our service user's objectives through a culture that recognises quality as part of everything we do.

The company recognises that to ensure that all services provided by the company achieve this, the company must embrace several mechanisms to identify and evaluate those services. It is not sufficient to rely on information being reported on within operational teams; although this information is an essential reporting stream, a more robust system must be implemented.



Therefore, several lines of quality control will be implemented. As such the company aims to measure the quality of its services through five key areas;

- Service User quality measures
- Staff quality measures
- Operational reports
- Senior Management quality commitment
- Internal auditing

### **Service User Quality Measures**

- Quality Reviews; All Service Users are given the opportunity to comment on the quality of the service being provided, in confidence quarterly. Various tools are used to promote inclusion and ensure equitable access to this process.
- The company believe that the care planning and risk assessment process is essential to enabling the company to provide a high-quality service to the individual. Therefore, a personcentred and outcome focussed plan, and risk assessment must be in place. Again, these should be in place for everyone, along with regular reviews which ideally involve the individuals support circle.
- Review of care notes a sample of care notes will be audited each month by the care management teams at each service. A further sample is audited by the Quality Manager. Furthermore, the Quality Manager also reviews the audits completed, ensuring that issues have been identified, actions have been completed and recorded appropriately.
- Review of MAR charts all medication records will be audited each month by the care management teams at each service. The Quality Manager also reviews the audits completed, ensuring that issues have been identified, actions have been completed and recorded appropriately.
- A random sample of Service User files are inspected at each audit carried out by the Quality Manager to check that the company is meeting its compliance and legislative requirements.
- Engagement with the service users through quality assurance checks, quality reviews, satisfaction surveys, should also be recorded, and any resulting actions be followed up.
- Quality Assurance Checks are also carried out by the company's Quality Manager (see Internal Auditing for further information).

# **Staff Quality Measures**

- Safe recruitment and induction; the company has a Recruitment & Selection, and Training &
  Development policy that must be followed by all personnel, ensuring that safe and thorough
  recruitment, initial training and ongoing development is in place for all employees. Ensuring
  that staff are suitably trained to meet the needs of our service users is an essential process.
- Spot checks; these should be completed on each member of staff every three months and recorded in the personnel file. Any resulting actions must be identified, recorded and followed up.
- Supervisions/Appraisals; staff supervisions should occur four times a year (one of which will be an annual appraisal) in line with the Training & Development policy.
- Staff quality questionnaires; the company values the opinions of its employees and believes
  that retention of its employees has a significant impact on the quality of its services. Therefore, the company sends out an annual staff retention questionnaire which is intended to
  raise concerns and identify improvements that can be made, both for the retention of staff
  and the improvement in our service delivery.
- All employee files are inspected at each audit carried out by the Quality Manager to check that the company is meeting its compliance and legislative requirements in relation to recruitment, training and ongoing developmental sessions.



## **Operational Key Performance Indicators**

Monthly operational report — each Registered Manager completes a monthly Operational Report in relation to service quality measures and sends this report to the Directors and Quality Manager. The report includes details of safeguarding, care concerns, complaints, compliments, staffing levels, recruitment, and any general quality concerns or requirements. Any areas of concern are then followed up by the relevant individual with the Registered Manager, and any unresolved issues are then discussed with Care Governance Team (monthly).

### **Senior Management Quality Commitment**

- Senior management visits: the senior management team undertake frequent visits across all branches within the company.
- Care Governance Team: will meet monthly to review all compliance and quality information, making decisions to address any ongoing issues and to improve the quality of services being provided.
- The policies are regularly updated by the Care Governance Team as stated within each policy.

## **Internal Auditing**

Our Quality Manager along with support from the Directors will complete the following:

- Full-service Audit A comprehensive audit of each service will be conducted quarterly by
  the Quality Manager to ensure the branch is complying with current legislation and internal
  processes. This report will be made available to the Registered Manager and Directors.
  These reports will also be discussed at the Care Governance Team each month, to review
  compliance, progress and any required actions. This audit looks over the following areas;
  - Health & Safety
  - Regulatory
  - Infrastructure (complaints/compliments, on-call, team meetings, notifications)
  - Training
  - Recruitment Checks
  - Employee Files
  - Service User Files
- The Service User Quality Assurance Check the Quality Manager will randomly select service users to visit to ensure the quality of service that is being delivered is safe, meets the Service User's needs, that the experience they have is a good one and that they are treated with dignity and respect. The visit information will be passed to the Registered Manager to address any shortcomings in the care delivered. The Quality Manager will check with the Registered Manager, seven weeks after the audit that any areas of concerned are rectified. The Quality Assurance check is kept within the Service User's file.
- Complaints any complaints received by the company will initially be dealt with by the Registered Manager and stored on CarePlanner and within the service user file. In addition, during the quarterly audit, recent complaints will be followed up by the Quality Manager to ensure that resolution has been achieved and that the service levels now meet both company standards and the standards expected by the individual.

The company is committed to a continuous development approach to quality assurance. The company acknowledges that improvements can always be improved, and values working in partnership with other stakeholders such as service users, employees, carers, local authorities, and regulatory bodies.

#### **Review**

This policy will be reviewed every two years.