

**Quality Assurance and Improvement – CSP018** 

Policy and Procedure



Document Title	Quality Assurance and Improvement – CSP018
Version number	V2.0
Version date	15/09/2021
Author Title & Issuing Department	Head of Quality and Compliance
Target Audience	EMH Care and Support services: Supported Living Outreach Day Services Extra Care Nursing Homes

Approved By	Executive Management Team (EMT)
Date Approved	18/09/2018 - Housekeeping review 15/09/2021
Review Date	36 months from 15/09/2021

Links to Regulatory Standards – Economic/ Consumer Standards	The General Data Protection Regulation (EU) 2016/679 (the GDPR), and the Data Protection Act 2018  The Health and Social Care Act 2008  The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014  The Care Quality Commission (Registration) Regulations 2009
Outcomes for Customers	
How were tenants, residents and service users involved in the review/development of this document	
Training Provision	
Links to the Business Plan	
Links to Key Values	Integrity, Diversity, Openness, Accountability, Clarity and Excellence

### **Version Control**

Version	Revision Date	Author: Job Title	Change Description
V1	15/09/2021	Head of Quality and Compliance	Housekeeping review



### 1. Introduction

- 1.1 emh care & support is committed to delivering quality services and high standards of support and will achieve this through rigorous recruitment methods, staff management and through regular monitoring and review of the services provided to individuals
- 1.2 emh care & support recognises that leadership and management of quality assurance and improvement functions are critical to the success of any organisation, and this is especially true in the health or social care sector
- 1.3 It is our leaders and managers who "set the tone" for emh care & support, who enforce standards, and who implement the organisations policies and procedures. It is also leaders and managers who embed the "vision" and "values" for the organisation, stating what it believes in and what it stands for and delivering its aims, goals, and objectives
- 1.4 Taken together, these aspects form the ethos of emh care & support, within which managers and leaders work at inspiring and encouraging staff and ensuring that they know what they are aspiring to achieve

# 2. Definitions and Scope

- 2.1 This policy outlines the policy of emh care & support in relation to leadership and management of quality assurance and improvement procedures
- 2.2 The aim of this policy is to ensure that strong and effective leadership and management is always provided that ensures the safety and well-being of emh care & support service users
- 2.3 This policy applies to all managers, staff and volunteers working in or for emh care & support. Everyone has a responsibility for ensuring that they work within the remit of this policy and in the way they have been trained

## 3. Specifics of the Policy

### 3.1 Care Quality Commission Requirements

- 3.1.1 emh care & support recognises that leadership and management is an important part of compliance with the registration requirements of the Care Quality Commission ("CQC")
- 3.1.2 We therefore work at all times to ensure compliance with The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, which include the Fundamental Standards. The following regulations apply in relation to the leadership and management of quality assurance and improvement:
  - 3.1.2.1 **Regulation 4**: Requirements where the service provider is an individual or partnership which requires that, where a service provider is an individual or a partnership, they have the necessary



3.2

regulated activity 3.1.2.2 **Regulation 5**: Fit and proper persons: directors - which requires that people who have director level responsibility for the quality and safety of care, and for meeting the fundamental standards are fit and proper to carry out this important role 3.1.2.3 **Regulation 6**: Requirement where the service provider is a body other than a partnership - which requires that a provider is represented by an appropriate person nominated by the Company to carry out the management of the regulated activity provided 3.1.2.4 Regulation 7: Requirements relating to registered managers - which requires managers to be of good character 3.1.2.5 **Regulation 14**: Notice of absence - which requires the service to inform the CQC of a proposed absence for a continuous period of 28 days or more of the provider or the registered manager 3.1.2.6 **Regulation 15**: Notice of changes - which requires the service to inform the CQC of changes to the management 3.1.2.7 **Regulation 17**: Good governance - which requires that governance systems or processes must be established and operated effectively to ensure compliance with the requirements of the regulations **Our Commitment to Quality Assurance and Improvement** 3.2.1 emh care & support firmly believes in the concept of service user and supplier working together in pursuing this policy and in continually striving for improvements in service quality 3.2.2 Our quality approach is based on 3 fundamental principles: 3.2.2.1 Ensuring that we fully identify and conform to the needs of our service users

Looking at our service provision processes, identifying the potential

Everyone at emh care & support understanding how to do their job

for errors and taking the necessary actions to eliminate them

and doing it right first time, every time

qualifications, competence, skills and experience to carry on the

3.2.2.2

3.2.2.3



- 3.3 To ensure our policy is successfully implemented, staff are responsible for identifying service user requirements, and ensuring that the correct procedures are followed to meet those requirements
- 3.4 In achieving our policy ambitions, we will ensure:
  - 3.4.1 Management and the quality, competence and development of staff will be considered a key priority in the day to day operations of emh care & support, with sufficient resources being employed to support staff to perform their roles successfully
  - 3.4.2 Staff will be employed who are appropriately qualified and experienced, who have the qualities to uphold the highest standards of emh care & support at all times, and managers appointed who can manage the service they are responsible for to the highest standards
  - 3.4.3 Instilling an ethos of excellence and achievement, supported by managers, that is open, transparent, innovative, inclusive, and committed to providing compassionate person-centred care of the highest quality
  - 3.4.4 All staff and volunteers will reflect the ethos and values of emh care & support at all times, with managers communicating a clear sense of direction and leadership to staff which reflects the core aims and purpose of the organisation
  - 3.4.5 All staff will adhere to professional values and practices, accessing training and supervision as required, fulfilling their continuous professional development (CPD) and registration requirements and demonstrating their competencies through regular supervision and annual appraisal
  - 3.4.6 All staff and volunteers will be expected to show commitment to involving service users, carers, and other stakeholders in the running of the service, gaining service user feedback on a regular basis and responding positively to all complaints
  - 3.4.7 All staff and volunteers will demonstrate a commitment to continuous quality improvement which will include embracing and supporting change and innovation
  - 3.4.8 All staff and volunteers will always strive to promote and safeguard the wellbeing and interest of emh care & support service users
  - 3.4.9 Managers will possess and continually develop the skills to build upon and implement systems and policies to monitor, assess and improve service provision and delivery, ensuring that emh care & support delivers compassionate care that requirements and reflects best evidence based practice at all times
  - 3.4.10 Managers will possess and continually develop the skills to build upon and implement systems, policies and strategies for assessing and managing all risks to the safety and well-being of service users, including monitoring and reviewing health and safety / risk assessment systems and investigating and analysing accident and incident reports



- 3.4.11 Managers will possess and continually develop the skills to provide staff with positive leadership and support and act as role models for junior staff - they should be honest and open in all of their actions, including dealings with financial transactions
- 3.4.12 Managers will be expected to manage staff according to emh care & support's human resources policies in a way that is inclusive, fair, and based on equal opportunities and respect for diversity
- 3.4.13 The managerial and leadership requirements of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and the Care Quality Commission (Registration) Regulations 2009 will be met at all times, including all governance and quality assurance requirements, reporting and notification requirements, and all requirements relating to the training and competence of the registered person and managers

### 3.5 Training and Support

- 3.5.1 emh care & support will ensure that all staff understand and fully implement the organisation's policies and objectives and are able to perform their duties effectively through an on-going training and development programme
- 3.5.2 As part of their induction to emh care & support, all staff and volunteers are fully briefed on the Quality Policy, its aims, and objectives
- 3.5.3 All staff and volunteers are given full training to ensure they can carry out all functions of their role
- 3.5.4 Annual appraisals are held for all staff to assess performance and identify training needs
- 3.5.5 All training needs identified, to ensure quality is maintained, are fed into an overall training plan, and assessed and implemented, whilst considering any budgetary constraints
- 3.5.6 Objectives and action points are reviewed in 1:2:1 supervision meetings with line managers

# 4. Implementation

4.1 This policy will be reviewed every three years unless there is a legislative change or organisational need prior to the scheduled review date

## 5. Responsibilities

### 5.1 All staff and volunteers are expected to:

5.1.1 Always strive for excellence in both themselves and in the service users that they are responsible for



- 5.1.2 Always support the provision of high-quality, compassionate care
- 5.1.3 Work in partnership with other organisations to safeguard service users and ensure the provision of safe and compliant care
- 5.1.4 Monitor and respond to any concerns relating to the safeguarding of service users

#### 5.2 Leaders and managers are expected to:

- 5.2.1 Demonstrate strong leadership and direction in their strategic and operational management of their service
- 5.2.2 Create an atmosphere and culture across their service which is open, positive, and inclusive
- 5.2.3 Monitor service quality and work to ensure a continuous cycle of service improvement and excellence in all areas
- 5.2.4 Actively encourage innovation and creativity and support change in a positive and effective way
- 5.2.5 Actively encourage and rigorously monitor training and development on the part of staff
- 5.2.6 Monitor complaints and compliments relating to their service and respond to them appropriately and in a timely manner
- 5.2.7 Monitor accidents and incident reports and respond to them appropriately and in a timely manner, taking action to prevent the risk of reoccurrence
- 5.2.8 Properly employ staff management, supervision, and appraisal skills to ensure that staff teams are working to the very best of their potential and have the appropriate support to excel in their roles

### 6. Associated Documents

- Complaints and Feedback Policy
- Equality and Diversity Policy
- Health and Safety Policy
- Safer Recruitment Policy
- Data Protection Policy
- Safeguarding Adults at Risk Policy
- Mental Capacity Act Policy
- Consent Policy
- Appendix 1 Quality Policy Statement



Internal policies that are relevant and should be read in conjunction with this statement include.

- ► HR Data Protection Policy
- ► Personal Data Breach Policy
- ► Retention Policy



#### Appendix 1 – Quality Policy Statement

#### 'QUALITY IS EVERYONES RESPONSIBILITY'

#### **QUALITY POLICY STATEMENT**

As a company we aspire to be the 'Best social housing and care business in the Country, leading the market as a service provider and employer' In order to achieve our vision we must ensure the key values of our company apply to all the people who we support and who form our business relationships.

It is therefore necessary to continually improve the organisations effectiveness by eliminating at the earliest stage possible, all ambiguities which may affect a product or service quality.

The key to our success is to deliver a high standard of care through qualified, competent, and committed professional employees.

The emh Care and Support 'Quality Framework - Quality Management System' is a foundation to establish a company culture centred on continual improvement and having a 'desired outcome' based approach towards our service user's personal goals and aspirations.

In addition to this policy statement the Quality and Compliance team supported by the senior management team will agree 12 monthly objectives which will support the growth of the compliance measure within our services and the Quality Management System itself

The Quality and Compliance team commit to an open and transparent approach towards the audits undertaken and will work in partnership with relevant emh Care and Support employees in order achieve the best possible results in line with our company values.

Audit findings, incidents and other key statistics will be published and measured and will be reportable to the Board as part of the Quality and Compliance quarterly update.

The Quality Policy Statement will be reviewed as part of the internal Quality Framework annual review.