

SERVICE IMPROVEMENT PLAN

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Policy Statement




As part of our Good Governance Framework, this policy sets out how improvement to our service is achieved by the adoption of robust monitoring and audit systems. It is important for the growth and sustainability of the company that a continual improvement cycle is in place which identifies any deficits so that improvement plans can be implemented.

Planning for improvement

In order to improve, we must first identify the areas for improvement by obtaining feedback from all stakeholders involved in the service. A stakeholder could be:

-  The Resident
-  Family member or Advocate
-  Healthcare Practitioner
-  Social Worker
-  Local Authority Care Manager
-  Care & Support Staff
-  Care & Support Management Team
-  Care & Support volunteers

The feedback is gathered in 3 distinct ways, all of which relate to different areas of activity.

-  Resident-led feedback
-  Professional, multi-agency feedback
-  Regulatory framework feedback

Resident-led Feedback

This is core to the delivery of a person-centred quality service and Residents must be involved in the day to day choices of care, be listened to and encouraged to influence and shape their services.

True user involvement must reflect their needs and preferences but more importantly explore their experience of our service and how it met or failed to meet their expectations. We can only improve the quality of service delivery if we are aware of any shortfalls. This means engagement with the Resident, their family or representative on a continual basis. It is often the case that it takes a period of time to build an honest, working professional rapport with a resident but it is vital to build a relationship based on trust and open and honest dialogue. Sometimes things do not always work as they should, so setting the scene for a positive relationship from the beginning by using clear and open methods of communication is essential to maintain a quality user lead service.

Professional Multi-agency feedback

This is sometimes much more difficult to achieve and developing local networks can be a long and arduous journey. It is vital that multi-agency relationships are built up on the front line and there is a mutual understanding of roles and boundaries which encourages honest and open communication between professionals to ensure defined outcomes and goals are met i.e. that the safety, welfare and independence of the is at the core of the service delivery irrespective of the number of providers involved. This important cycle can be difficult and sometimes challenging for staff but by adopting a reflective model of supervision and learning from errors culture will enable staff to view peer or multi-agency partners as a positive learning experience which enhances practice and improves experience.

Regulatory Framework Feedback

This is perhaps the most challenging of all for staff and management. We have a regulatory framework, which in itself can mean more than one visit from various regulators. It is important to

be clear about the role and function of each regulator. For the Adult Social Care sector generally has the following:

The Care Quality Commission (CQC)

This is the national regulator for England and regulates providers registered under the Health and Social Care Act 2008 (Regulations 2014 and Registration Regulations 2009). This includes Domiciliary, Care and Nursing Homes. G.P. Surgeries, Dentists, Ambulance Services, NHS and more.

The Local Authority (L.A.)

This comes in various guises but this regulator is usually found within the Contracts Monitoring section of the Local Authority but will only be relevant where there is a contractual arrangement between a provider and the L.A. It is important to understand that the purpose of this regulator is to monitor the contract terms and specification. Knowledge of both documents is essential in order to meet the monitoring criteria. All L.A.'s devise their own contract terms and specification, so working contractually to different L.A.'s will mean different levels and priorities of the monitoring processes.

Monitoring (Internal)

As part of the Quality Assurance process, monitoring should take place regularly. *It is important to distinguish between Monitoring and Auditing. You monitor performance, you audit conformance.*

Auditing (Internal)

Regular audits are a vital tool in the continual drive for improvement. This should be systematic and planned activity which is robustly interrogated and actions identified.

Auditing (External)

It is becoming more important to evidence open and transparent ways of working within the Social Care Sector. Work on a Quality Standard is underway between the Care Quality Commission, Monitor, NHS England and L.A.'s so that at least they will all regulate to an agreed quality benchmark. This type of external scrutiny is very positive as new eyes, removed from everyday delivery of the service gives a different view or perspective which is often missed.

Data Interrogation

All of the aforementioned produce various types of data, often in the format of an action plan. However, surveys, questionnaires etc. which are returned should be scrutinised and the data collated and presented in a suitable format for dissemination into the improvement plan.

The Plan

This is only as relevant as the data upon which it is based. It is therefore important to be "H.O.T." Honest, Open and Transparent. Data and statistics can be skewed to give the best picture, it is important to see the service as it is, not how you think it is.

People Development

People are the building blocks of any quality management process. The only point where true responsibility for quality lies is with the person doing the job or carrying out the administrative process, people must engage with continuous improvement activities. This includes senior management, who must be committed to a culture of continuous improvement and an effective mechanism of recognising individual contributions. A simple thank you goes a long way.

Ownership

Everyone in the organisation needs to "own" a shared understanding of what continuous improvement means. This is why it is important within Health and Social Care, that evidence is collected in respect of the effectiveness of the service delivery and most important of all, its contribution to the Regulator's rating of the service.

Training Statement

All staff, as part of their induction are aware of the aims and objectives of the business, how business planning impacts and links to the day to day delivery of services, and how they, as individuals, are responsible for their contribution to the ongoing success and improvement of the business.

Related Policies
Audit
Business Planning
Compliance Principles
Good Governance
Notifications