**North Yorkshire County Council**

**Health & Adult Services**

**Quality Assurance Framework for Regulated Services**

Contracting, Procurement & Quality Assurance

July – v6.0

**Guidance Notes**

The Quality Assurance Framework (QAF) requires the provider to evidence their practice against a range of objectives and outcomes. This will be undertaken as a self assessment audit by the provider on an annual basis.

There are two formats for the QAF, with one for services which are regulated by the Care Quality Commission (CQC) and another designed for the voluntary and community sector.

Providers will have an element of choice in which QAF to complete based of the nature of their service. For example, a voluntary and community services provider may provide residential respite which is registered with CQC. In this instance the provider would complete the QAF for regulated services. Where a voluntary and community services provider offers a respite sitting scheme and has chosen to register with CQC for the provision of domiciliary care as part of that service provision they may choose whether to complete the process as a regulated service or may feel they want to complete the voluntary and community services QAF so that they can evidence the diverse nature of their service provision.

A QAF quality visit may be undertaken by staff members from the Contracting, Procurement and Quality Assurance Team. The need for a QAF quality visit may be determined by the information supplied by the provider requiring further discussion or contract compliance issues. There will be random sampling with providers across the spectrum of service provision. Also, a QAF quality visit may be undertaken at the request of the provider.

Another function within the wider framework of looking at quality is the baseline assessment. This is an onsite visit, during which staff from the Contracting, Procurement & Quality Assurance Team can view evidence about service delivery. This will include viewing client files relating to people in receipt of the service/support and funded by North Yorkshire County Council, attendance statistics, etc. Providers are asked to seek permission from their staff, in advance of the visit, so that recruitment, training and other staffing related material can be viewed. The baseline assessment provides the Council with an understanding of how an organisation functions on a day to day basis. Sometimes the baseline assessment may focus on a particular area of work to assist a provider in achieving improvements. Safeguarding Officers, Care Services Managers or Care Quality Commission Inspectors may also be involved in the baseline assessment quality visit.

As a result of safeguarding concerns the Council may undertake a full QAF quality visit or a baseline assessment visit to identify areas of immediate improvement or to evidence good practice.

Where a QAF quality visit or baseline assessment is being undertaken as a result of information supplied by the provider or on a random basis, information viewed will be restricted to people supported by the Council. Where the visit is the result of a safeguarding alert, information may be viewed in relation to any person receiving a service who is involved in the safeguarding alert. Also, Contracting, Procurement & Quality Assurance staff may have already obtained consent from people in receipt of the service/support or, where appropriate, their representative to view their records. The provider will, in the majority of instances, be notified in advance of the purpose of the visit. The notification letter will include details of who will be attending, the reason for the visit and an outline of the information which may be required. If the provider is unsure if they can share information they can contact the Contracting, Procurement and Quality Assurance Team to discuss this further.

The size of the provider organisation, set up of the service, etc. will be taken into account when undertaking a QAF visit or baseline assessment. It will be proportionate and sensitive to the size of the premises and disruption will be kept to a minimum. However, the achievement of positive outcomes for people and the gathering of evidence to support his will be consistently applied.

While the Council is aiming to reduce duplication of effort of processes and paperwork with other agencies it is evident that this will be an interim process, on the basis that some of the information will not be available in its in current form in the near future. Currently the information which providers will be asked to submit will include:

* Provider Compliance Assessment (PCA) completed for the Care Quality Commission;
* National Minimum Dataset for Social Care (NMDS-SC) information supplied to Care Quality Commission;
* Quality Risk Profile generated by the Care Quality Commission;
* Updated Safeguarding Adults Provider Self Assessment tool;
* Care Quality Commission Inspection Report;
* Additional data as identified later in this document.

The Council is unable to access this information direct from CQC as the information belongs to the provider and it is their responsibility to ensure that it is accurate and up to date.

As the Care Quality Commission develops new systems and process for providers to evidence their achievements the requirements detailed in this document will be reviewed. Once the new formats have been released the Council will consider whether the information gathered can be adapted and used for quality assurance purposes.

Providers must be able to evidence how they meet all of the standards within the objectives and outcomes in that section. If the provider cannot satisfy a standard within the objective and outcome they must propose an action plan to achieve the standard and move forward to improve the service to achieve the objective and outcome.

If the provider fails to meet pre-agreed timescales for improvement or the supply of additional information further compliance action may be necessary. If appropriate, safeguarding alerts may be generated. A copy of the evaluation tool used by the Council is available from www.northyorks.gov.uk/socialcarequalityassurance

Providers who are continuously striving for improvement can use this process as a tool to move to service excellence. In these circumstances the provider can submit an action plan which their service/support will be monitored against to assist them in continuous improvement.

On completion of the Quality Assurance Framework, whether as a self assessment or following a QAF quality visit or a baseline assessment, a summary report will be produced and shared with the provider in the first instance. This will detail what has been evidenced by the provider and, where applicable, observations made during visits to provider’s premises. The provider will be given an opportunity to comment on the content of the summary report and request factual changes. If the Contracting & Quality Assurance Officer/Manager and the Provider cannot agree the content of the summary form, the Provider may make representations to the Assistant Director - Contracting, Procurement & Quality Assurance who will consider the evidence. Providers may be required to provide documentation to support their objections to the content of the summary report.

In time it is envisaged that this information may be published on the Council’s website so that it is accessible by the public and will state whether the judgements made are as a result of self assessment or following a QAF quality visit. However, further work will be undertaken in relation to confidentiality, report format, etc. before this is progressed.

Objectives and outcomes for services commissioned by the Council are based on those included in Independence, Wellbeing and Choice 2005: Our Vision for the Future of Social Care for Adults in England. These are:

* Improved health and emotional well-being and support in managing long term conditions
* Improved quality of life, including access to universal services, and safety and security inside and outside the home
* Making a positive contribution to the local community
* Being able to exercise choice and control
* Freedom from discrimination and harassment
* Economic well-being, taking account of social activities and special needs
* Personal dignity including comfort and cleanliness

Therefore, in submitting evidence as part of the QAF process providers need to ensure that these objectives and outcomes are covered in their working practices.

**Please indicate whether the following information has been attached to this submission:**

|  |  |  |
| --- | --- | --- |
| **Document** | **Attached** | **Not Attached and Reason** |
| Provider Compliance Assessment (PCA) completed for the Care Quality Commission |  |  |
| National Minimum Dataset for Social Care (NMDS-SC) information supplied to Care Quality Commission |  |  |
| Quality Risk Profile generated by the Care Quality Commission |  |  |
| Care Quality Commission Inspection Report |  |  |
| Updated Safeguarding Adults Provider Self Assessment tool |  |  |

In addition to the above documents providers are required to provide the following evidence. Copies of procedures and relevant paperwork can be provided to support the explanation given:

|  |  |
| --- | --- |
| 1. | **How do you ensure that the service provided meets the person’s assessed needs? Please explain how you identify specific outcomes for each person receiving your service. How do you evaluate service delivery to ensure it meets peoples’ individual outcomes? Please include how you ensure people are assessed for and referred on to alternative provision, in a timely manner, i.e. if a person’s needs change how do you ensure they are reassessed if you can no longer meet their needs?** |
| 2. | **Please outline how your organisation works within the Deprivation of Liberties Safeguards. If you use a Deprivation of Liberties checklist or assessment tool please supply a copy.** |
| 3. | **How do you comply with the Mental Capacity Act and ensure that people’s capacity is appropriately assessed. If you have an assessment tool please provide a copy.** |
| 4. | ***For care homes (including nursing) only –* Have you completed theSafer Food, Better Business for Care Homes Supplement – Food Hygiene(England) Regulations 2006? If no, why? If, yes please explain how this information is updated and verified.** |
| 5. | **How is dignity and respect promoted within you service? Do you have a Dignity Charter? If yes, please supply a copy. Do you have a Dignity Champion?** |
| 6. | **How do you capture the views of users of your service? How do you ensure that people’s views are listened to and influence service delivery and procedures?** |
| 7. | **How do you engage agency staff? What checks or induction do you undertake?** |
| 8. | **What aspect of your service/support are you most proud of? Please provide an example of this and how it impacts on day to day practice within your service/support.** |

**Please return this form and supporting documentation to;**

[**Socialservices.contractingunit@northyorks.gov.uk**](mailto:Socialservices.contractingunit@northyorks.gov.uk)

**Or**

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