



Quality Assurance Policy

Notice to employees using a paper copy of this policy
The company Policies folder on the shared drive holds the most recent version of this document and all employees must ensure that they are using the most recent guidance.

Document Control

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Version Control

Version	Date	Amended by	Comments
V1.0	January 2017	Jonathon Short	New document implemented
V2.0	November 2017	Karen Hodgkinson	Document reviewed and updated to reflect current process within LHG for quality assurance
V3.0	26.06.2019	Karen Hodgkinson	Document reviewed and LHG document and version control standardised.

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Outcome

The required outcome is that the service is run in the best interests of the people we support and to provide the highest quality of care and support to each individual.

Purpose

This policy is intended to set out the values, principles and policies underpinning Libertatem Healthcare Group's approach to maintaining and improving quality and high standards and to ensure that standards set out by the regulators can be achieved.

Scope

This policy provides a framework and point of reference to support all Libertatem Healthcare Group employees in understanding the quality assurance programme that underpins the group's philosophy of providing high quality and individualised care.

Policy Statement

Libertatem Healthcare Group places a strong emphasis on providing the highest quality individualised service possible for all of the people we support. It works on the basis that no matter how good its present services, there is always room for improvement. Libertatem Healthcare Group is registered with the Care Quality Commission (CQC England).

Libertatem Healthcare Group believes that having the highest quality care is the absolute right of all the people we support. The aim of the organisation is to provide a professional and efficient service to meet all of the requirements of the people we support and the long term goal is to obtain the highest possible level of satisfaction from the people we support and relatives.

The people we support can expect to:-

- receive the highest quality care possible
- be given a say in the running of their care and support delivery through routine evaluations of their care
- be invited to participate in providing feedback through a confidential survey, which will be carried out at least annually.
- be provided with details on how to complain should any aspect of the service fail to meet their individual expectations or requirements and to have their complaints acted upon promptly. To this end the agency operates a robust complaints procedure. (See the Libertatem Healthcare Group Complaints Policy and Procedures for details on how this works.)

Procedure

Every member of staff within the Libertatem Healthcare Group can influence the quality of the service we provide to every person we support. Therefore we have an expectation within the organisation from the top to the bottom that every person should demonstrate a commitment to quality and service improvement in their working day. Ideas and contributions on service improvement are welcomed from all aspects of the business.

Managers Responsibilities include:-

- establish, maintain and implement a quality management system for Libertatem Healthcare Group.
- set standards and demonstrate regular reviews.
- establish annual review plan for quality improvement as part of the business plan
- ensure feedback is obtained at least annually from the people we support and develop action plan to review areas of improvement identified
- ensure feedback is obtained at least annually from employees within the group and develop action plan to review areas of improvement identified
- ensure feedback is obtained from stakeholders and their representatives at least annually and develop action plan to review areas for improvement identified

- ensure monitoring of the quality of care staff's work by undertaking regular supervision through direct and indirect supervision and in liaison with the person we support, unannounced visits to the home.
- monitoring and audit of complaints which will be fed back to the board at the quarterly meetings to identify areas for improvements.
- monitoring and audit of accidents or incidents reported which will be fed back to the board at quarterly meetings to review and identify any areas for improvements or trends that required action.
- completion of clinical audit as identified by the Clinical Director

Employees responsibilities include:-

- when working with the people we support always ensure high quality delivery of care and attention to detail
- report to the managers any issues affecting your ability to provide high quality care
- ensure prompt and detailed documentation of records to facilitate evidence of care given
- Undertake training as assigned to help you in your personal development and support you in the delivery of care
- Actively participate in supervision, both direct and indirect, to identify areas of self and or service improvement
- be able to sign post any person dissatisfied with care or service to the Libertatem Healthcare Complaints Procedure
- report any incidents, accidents or untoward incidents as soon as possible using the correct process to enable intervention and investigation
- Participate in annual employee survey to provide feedback that may help the organisation in reviewing and improving quality.

Audit

The clinical director will ensure that data is collated on a regular basis and will review information to develop service improvement plans. Audit data will be reviewed at the quarterly board meetings. All data collected during audits are treated as confidential. Service improvements

Training

Libertatem Healthcare Group recognises that in order to provide a quality service, the organisation requires high quality staff that are suitably trained, supervised and supported. In particular we are committed to ensuring that:

- all new staff read, understand and become committed to the policy on quality as part of their induction training
- each member of staff has a personal development plan in which their training needs are identified and a plan made as to how such needs will be met.

The Quality Assurance Process

The Clinical Director will assume the lead role in relation to quality assurance and will work with the board of directors to ensure the continued service improvement is maintained throughout the group.

This will include:-

- the maintenance of best practice in service delivery
- compliance with national standards throughout the company (Care Quality Commission Regulations)
- CQC registered manager
- implementation of clinical governance framework
- ensuring appropriate risk assessments are undertaken
- Management of the complaints process and audit log
- management of Health and Safety processes and audit
- Reporting and monitoring of incidents and audit
- Reporting of any events that fall under RIDDOR
- Oversight and review of appropriate staff training

- ensuring appropriate induction of staff has been undertaken
- ensuring E-Learning offered meets appropriate standards
- ensuring mandatory training undertaken is appropriate and course content is reviewed
- Oversight of the requirement for specialist and bespoke training for Complex Care clients

Monitoring the quality of service delivery and business development will ensure the Company remains compliant to the regulations.