

Quality Monitoring Framework

Organisation	Trustees of Seely Hirst House
Service Name	Seely Hirst House Care Home
Service Manager	Julie Ward-Daft
Compliance Officer	Ruth Harrison
Date of Visit	31 st January 2017

RAG Quality Rating Criteria

Type of visit	Annual Quality Monitoring Visit.
Current Service Level	

	Quality Rating	Total	Definition
E	Excel	2	Excels outcomes, over and above the standard requirement.
G	Fully met	37	Meets outcomes.
A	Partially met	2	Partially meets outcomes.
R	Not / briefly met	0	Does not meet / briefly meets outcomes.

Action plan required? (Yes/ No)	NO
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Overall Quality RAG	Overall Score
GREEN	89.84%

* Action plan can be found at the end of the report.



SECTION 1: ASSESSMENT AND CARE / SUPPORT PROVISION

A. Service Initiation

Outcome	Criteria	RAG	Comments:
Comprehensive assessment / service initiation processes in place.	A1) Documentation confirms that the provider can meet the needs of the citizen prior to service initiation.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.
	A2) The Mental Capacity Act and DoLS have been considered and acted upon where applicable.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.

B. Care/Support Plans

Outcome	Criteria	RAG	Comments:
Care/Support plans are person-centred and record the needs of the citizen whilst ensuring a holistic approach to service delivery.	B1) Care/support plans are person centred, based on citizens' individual needs, preferences and choices.	E	<p>Care plans provide a very clear description of citizens' needs and choices and demonstrate an exceptionally person centred approach. The Care plans examined during the visit have personal information including a photograph of the citizen. There are life histories within the care plan that include information on family, previous work history and information about the citizens life from childhood through to present day. Information about what the citizens are interested in at present is recorded, e.g. colouring, knitting and animals.</p> <p>The information about the citizens preferences around night time routine is detailed and extends to information about the citizens preferred type of pillow. The care plan for dressing includes information that the citizen experiences discomfort while dressing, however it also says that the citizen is able to dress themselves. The care plans examined shows a very clear description of citizens' needs and choices and demonstrate an exceptionally person centred approach that promotes independence through illustrating what the citizens are able to do for themselves.</p>
	B2) The service is proactive in engaging with a range of professionals and agencies and relevant professionals are involved in	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.



	care/support planning.		The service is engaged with a number of professionals. Within one care plan examined it detailed a referral to the SALT team. Handover notes are used to evidence what is happening within the home and any follow up information is detailed.
	B3) The MCA and DoLS have been considered and acted upon where applicable.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.
	B4) Provider actively seeks citizen, carer/family and, where appropriate, advocate involvement in the care / support planning process.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes. Where the citizens and family want to be involved in the care support planning process this is recorded. For one citizen's care plan examined during the visit both the citizen and family were involved with care plan reviews. The other care plan examined referred to involvement of an advocate.
	B5) A proactive approach is taken to ensure that citizens' communication needs are addressed.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes. The care plans detail information about citizens hearing and sight along with information about citizens' memory and the need for staff to speak clearly and provide basic instructions. For one citizen it mentions the use of blinking and hand gestures as a way the citizen communicates.
	B6) Support is planned to meet agreed outcomes for citizens where appropriate.	N/A	N/A

C. Risk Assessment			
Outcome	Criteria	RAG	Comments:
Comprehensive risk assessments and risk management processes in place.	C1) Risk assessments are completed in line with care/support plans, outlining identified risk and relevant preventative measures.	A	Risk assessments and details on causes, symptoms and treatments for specific medical conditions were missing. As discussed during the visit the home are in the process of implementing these in conjunction with input from the GP.
	C2) Processes/strategies are in place and implemented to manage identified risk.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.

			Processes and strategies in place include falls logs, body and weight charts. Within the mental health care plan for one citizen it details the use of ABC charting by requiring staff to record when a citizen requests to go home, the triggers, etc. for this request.
D. Reviewing Process			
Outcome	Criteria	RAG	Comments:
Care/Support plans are reviewed to ensure citizens' identified needs continue to be met.	D1) Care plans and risk assessments are reviewed and updated within appropriate timescales and/or where changes to individual needs are identified.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes. Care plans are regularly updated. Where the citizens and family want to be involved in the care support planning process this is recorded. For one citizens care plan examined during the visit both the citizen and family were involved with care plan reviews. The other care plan examined referred to involvement of an advocate. Handover notes are used to evidence what is happening within the home and any follow up information is detailed.
	D2) Provider actively seeks involvement of citizen, carer/family, and advocacy (where appropriate) and other relevant professionals in the care/support review process.	G	Where the citizens and family want to be involved in the care support planning process this is recorded. For one citizens care plan examined during the visit both the citizen and family were involved with care plan reviews. The other care plan examined referred to involvement of an advocate. Information from a DoLS assessment was completed and in place within one citizens care plan while diet information from SALT was included within another care plan.
E. Staff			
Outcome	Criteria	RAG	Comments:
Citizens needs are met by a suitable and appropriately trained workforce.	E1) The service is suitably staffed at all times taking into account citizen's needs and preferences.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.
	E2) Assessment and care/support planning is addressed in a structured induction programme, appropriate to the service.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.
	E3) Staff are continually supported and appraised in their role through supervisions, mentoring and appropriate training.	E	Staff Supervisions are held on a regular basis so that staff can be continually supported and appraised on an on-going basis. Discussions during the supervisions include punctuality, training, attitudes of staff and safeguarding. Staff training is up to date and is continually being



			<p>monitored. A number of training courses have already been arranged throughout 2017. In addition a number of other courses have been undertaken by staff to support the work they do. These additional courses include Oral Hygiene, Stroke Awareness, Depression and Bathing & Grooming in bed.</p>
	E4) Staff are appropriately trained in assessment and support/care planning.	G	<p>Fully met - The evidence looked at on the day of the visit met the guidance notes.</p> <p>Staff supervisions are held on a regular basis so that staff can be continually supported and appraised on an on-going basis. Discussions during the supervisions include training, attitudes of staff and safeguarding as well as their individual duties.</p> <p>Staff training is up to date and a number of training courses have already been arranged throughout 2017. The members of staff are also completing the Care Certificate and the information on the progress of this is recorded on the Care Certificate matrix so that management have an overview of their progress.</p> <p>Team meetings have occurred regularly throughout 2016.</p>
Staff have understanding of assessment and care/support planning	E5) Staff demonstrate an appropriate understanding of needs assessment and care/support planning.	G	<p>Fully met - The evidence looked at on the day of the visit met the guidance notes.</p> <p>Staff supervisions are held on a regular basis so that staff can be continually supported and appraised on an on-going basis as detailed above. Staff training is up to date and a number of training courses have already been arranged throughout 2017.</p> <p>Handover notes are used to evidence what is happening within the home and any follow up information is detailed.</p>

SECTION 2: SAFEGUARDING

A. Policies and Procedures

Outcome	Criteria	RAG	Comments:
Appropriate safeguarding policies and procedures are in place to ensure the safety of citizens.	A1) A copy of the 'Nottingham and Nottinghamshire Multi Agency Safeguarding Vulnerable Adults Procedure for raising a concern and referring' is made available to staff and is referenced within or in line with providers' in-house policy.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.
	A2) Staff have access to and an understanding of safeguarding policies and procedures.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes. Staff Supervisions are held on a regular basis so that staff can be continually supported and appraised on an on-going basis and discussions do include safeguarding.
	A3) Policies and procedures are regularly reviewed and updated as necessary.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.

B. Safeguarding Information & Referrals

Outcome	Criteria	RAG	Comments:
Relevant information on safeguarding is made available to citizens, relatives and/or carers.	B1) Information on safeguarding is made available and is accessible to citizens and other key partners.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes. Information on safeguarding is made available to citizens and relatives.
	B2) Manager and staff know when, how, where and to whom to make a safeguarding referral. There is a designated and appropriately trained safeguarding lead.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.

	B3) A record of safeguarding referrals is maintained.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.
C. Communication			
Outcome	Criteria	RAG	Comments:
Communication practices in place to keep staff, citizens and carers up to date on relevant issues.	C1) Processes are in place to ensure communication of relevant information between staff and other professionals.	G	<p>Fully met - The evidence looked at on the day of the visit met the guidance notes.</p> <p>Information on safeguarding and other issues is made available to citizens and relatives through meetings and citizen reviews. There are posters around the home that contain a variety of information as well as a welcome pack for the citizens. The website also contains up to date information about the home and a link to the latest CQC inspection report.</p> <p>Team meetings occur regularly to ensure that staff have up to date information and the handover notes are used on a daily basis to evidence what is happening within the home.</p>
D. Staff			
Outcome	Criteria	RAG	Comments:
Staff have been through appropriate processes to ensure they are suitable to work in this area.	D1) A robust and appropriate recruitment and selection process is followed in the appointment of all staff.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.
	D2) Safeguarding is addressed in a structured induction programme, as appropriate to the service.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.
Staff are appropriately trained to safeguard citizens.	D3) All mandatory safeguarding training appropriate to the service has been undertaken and is updated regularly.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.
	D4) Effectiveness of training is monitored, within an appropriate timescale, to ensure staff are fully competent and confident in day to day service delivery.	G	<p>Fully met - The evidence looked at on the day of the visit met the guidance notes.</p> <p>Staff are continually supported and appraised on an on-going basis through regular supervisions and staff meetings.</p>

SECTION 3: EQUALITY AND DIVERSITY

A. Commitment to Equality and Diversity

Outcome	Criteria	RAG	Comments:
Equality and diversity considerations are central to service delivery.	A1) Equality and Diversity needs are discussed with citizens and addressed in care/support plans.	G	<p>Fully met - The evidence looked at on the day of the visit met the guidance notes.</p> <p>The care plan for Spiritual and Cultural needs is split into language and religion sections. Where a citizen has no beliefs or is no longer practicing their religion this is specified within the care plan.</p> <p>Information on citizens last wishes are recorded with as much or as little information as the citizens want. The care plans also detail if a citizen prefers a male or female carer.</p>
	A2) The diverse needs and preferences of citizens, including under-represented groups, are catered for.	G	<p>Fully met - The evidence looked at on the day of the visit met the guidance notes.</p> <p>Citizens likes and dislikes are recorded and information about food and drink preferences as well as preferred crockery is detailed within the care plan. Information on dietary requirements for each citizen is kept within the kitchen.</p>

B. Staff

Outcome	Criteria	RAG	Comments:
Staff are aware of and appropriately trained in relation to Equality and Diversity	B1) Staff demonstrate an appropriate understanding of, and are aware of the importance of, equality and diversity, when delivering care/support.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.
	B2) Staff receive appropriate induction and training in relation to equality and diversity.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.



SECTION 4: INVOLVEMENT AND EMPOWERMENT

A. Service Information and Communication

Outcome	Criteria	RAG	Comments:
There is an appropriate level of information available about the service.	A1) Information about the service is available and accessible to citizens and other appropriate parties.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes. The home has a welcome pack and a website as well as leaflets and posters around the home.
	A2) Processes are in place to keep citizens and other appropriate parties up to date on relevant issues.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes. Information is made available to citizens and relatives through residents meetings and one to one discussions.

B. Empowerment

Outcome	Criteria	RAG	Comments:
Citizen empowerment is central to the Service.	B1) Citizens are supported to engage in activities of their choice.	A	A number of activities are available within the home such as bingo and art. Where citizens take part in an activity this is recorded in the activities record, e.g. games sessions, reminiscence and time with the guinea pig. For one file examined during the visit there was a record of only 2 activities listed for a whole month, so it looks as if staff are not trying to involve this citizen in any activities. If the home also records when a citizen declines to take part in an activity it will show that staff are making the effort and that the citizen is not interested. A record of activities where citizens do not engage will also help inform staff what future activities the citizen may be interested in and which activities the citizen doesn't like.
	B2) Citizens are supported to be involved in the wider community where appropriate.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes. Citizens are enabled to go into the community where possible.



	B3) There is evidence that independence is promoted where applicable.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes. A number of aids are used within this home and care plans and risk assessments detail the use of the aids for communication, mobility, night care, etc. Staff are also available to help out while still promoting independence. This was evidenced during the visit where citizens were walking around the home with the aid of mobility aids and staff guidance. Mealtimes were being supported in a discreet and appropriate manner. During the visit one to one support was seen to be provided with the carers sitting with the citizens who needed additional support.
	B4) Information is available to citizens, family etc about how to complain and (where applicable) there is evidence that citizens understand how to complain.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes. Information on complaints is made available to citizens and relatives through meetings and the welcome pack.
	B5) There is a robust complaints procedure in place and complaints are recorded appropriately.	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.
C. Citizen Involvement			
Outcome	Criteria	RAG	Comments:
Citizens are empowered and involved in decisions about their services and can make changes	C1) Citizens are supported to inform and make changes to their individual support / care	G	Fully met - The evidence looked at on the day of the visit met the guidance notes. Where the citizens and family want to be involved in the care support planning process this is recorded. For one citizen's care plan examined during the visit both the citizen and family were involved with care plan reviews. The other care plan examined referred to involvement of an advocate.
	C2) There is evidence that citizens have been involved in / consulted about any changes to service provision	G	Fully met - The evidence looked at on the day of the visit met the guidance notes.

			Information is made available to citizens and relatives through review meetings and residents meetings.
D. Staff			
Outcome	Criteria	RAG	Comments:
Staff understand principles around involvement and empowerment	D1) Staff demonstrate an understanding and awareness of citizen involvement and empowerment when delivering care and support	G	<p>Fully met - The evidence looked at on the day of the visit met the guidance notes.</p> <p>Team meetings and staff supervisions are held on a regular basis so that staff can be continually supported and appraised on an on-going basis around involvement and empowerment.</p> <p>A number of staff are trained in Dignity / Dignity Champions</p>

ACTION PLAN ARISING FROM THIS MONITORING VISIT

Section / Description/ Outcome/ Criteria	Action Required	Person Responsible	Date reviewed and completed