

Title of Document	Quality Assurance Policy
Name of Department	Quality

What type of document is this?	Policy		
Which Helping Hands POL/SOP/W.I does this document relate to?	N/A	Reference number of POL/SOP/W.I	N/A

Which Operational Priority/Priorities does this document link to?	Governance Framework	Superior Client Care	People, Performance & Culture	Business Growth

Custodian of document	Group Managing Director	Committee/Group responsible for this document	Policy Committee
Approval date and committee chairperson signature	29.04.25	When is its next scheduled review?	29.04.28

Who does it apply to?	All Helping Hands staff at the facility					
	Does it apply to bank workers?	Yes	Does it apply to agency staff?	NA	Does it apply to third party contractors?	No

Purpose of the Policy	<p>Effective Quality Assurance is essential to ensuring our customers receive a premium service which is person-centred, safe, caring, effective, responsive and well-led.</p> <p>We are here to improve the lives of our customers in every way we can; as we continue to grow, we will maintain a robust approach to quality monitoring and continuous improvement with the purpose of helping people to live well in the homes and communities they love.</p>
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ROLES AND RESPONSIBILITIES

Role	Responsibility
Head of Quality	To ensure that this policy is cascaded and embedded
Area Care Managers Care Managers	To ensure this policy is embedded and adhered to
Responsible Individual (Wales) Group Managing Director	Quarterly visits to the services (meeting with carers, customers and managers on a rotating schedule)
Regional Care Directors	To monitor policy adherence
Quality Assurance Business Partners	To adhere to policy guidelines
All Staff	To read and understand the policy

1.0 Scope

This policy may impact and affect various stakeholders such as Commissioners, Local Authority, NHS, Family, Advocates, External health professionals, customers, local and is in place to create a framework to identify and ensure quality at Helping Hands and staff, customers and other stakeholders understand.

- Helping hands commit to ensuring quality and ensuring that robust governance processes exist, which meet the needs of its customers, its employees, the regulators and other key stakeholders.
- We strive to have the tools to measure the progress and development of Helping Hands and its staff in meeting quality in every aspect of the service.
- To ensure continuous quality improvement at Helping Hands, we emphasise that the provision of evidence-based best practice underpins all activity across the service and its processes are benchmarked against regulation and other key frameworks relevant to the industry such as NICE guidelines and other best practice guidance.
- It is important to ensure employees at Helping Hands understand the quality assurance process and their roles and responsibilities to achieve consistently good service outcomes against quality markers.

2.0 Quality Assurance Framework

We aim to ensure that through our quality and monitoring framework we liaise with all stakeholders regularly in order to gain insightful feedback, ensure customers views and needs are heard and accommodated as far as possible and to implement any changes necessary for continuous improvement of our services.

2.1 Helping Hands Quality Assurance framework includes:

2.1.1 For Carers:

- Regular contact and supervision
- Regular direct observation
- Annual Appraisal
- Regular infection prevention control, medication and moving & handling competencies
- Safe Recruitment (pre-employment checks)
- Regular team meetings
- Helping Hands Moments of Kindness staff recognition scheme
- Thorough carer handover and orientation processes
- Carer surveys completed by the Customer Experience (CX) team
- Lone working risk assessments
- Role based training
- Ongoing and specialist clinical training

2.1.2 For Customers:

- Regular contact and quality assurance checks completed by Operational teams
- Care needs reviews completed by Operational teams
- Feedback monitoring including complaints and compliments
- Carer handovers / introductions (Live In)
- Carer profiles (Live In)
- Customer surveys completed by the Customer Experience (CX) team
- Financial support monitoring (audits)
- Support plan and support related risk assessments
- Celebrating successes

2.1.3 For Both Customers & Carers:

- Accidents & incidents monitoring including RIDDOR
- Reporting incidents, themes, trends analysis and lessons learned
- Compliance monitoring
- Policy and procedure review
- Quality Assurance audits
- Quality risk monitoring

3.0 Governance

3.1 Maintaining Good Governance and strong Leadership at Helping Hands ensures we continue to successfully meet our Purpose of Helping people live well in the homes and communities they love.

3.2 Our established systems and processes which are in place ensures compliance with regulations and enabling us to assess, monitor and improve the quality and safety of our service. Systems and processes include:



- 3.2.1 Structured, regular auditing of customer records, including Medication Administration Records, Customer Visit Notes and Financial Transactions (*refer to W.I-054 Auditing & Audit Tools Work Instruction*)
- 3.2.2 Analytical dashboards to monitor compliance with processes and to plan compliance.
- 3.2.3 Independent Quality auditing team ensuring that services receive regular audits including celebrating successes of the service, themes, trends and actions.
- 3.2.4 Monthly Governance Service reviews completed by local Branch Care Managers which includes:
 - Review of accidents / incidents, complaints, safeguardings, health, fire & safety compliance
 - Dip checking compliance of customer and carer records
 - Review of carer attendance, punctuality and continuity
 - Review of lessons learnt and continual improvement
- 3.2.5 Quarterly Helping Hands Quality & Governance meeting which includes discussion, analysis and review of:
 - Overall Quality at Helping Hands
 - Regulatory activity, including regulatory inspections
 - Internal quality audits, themes and applicable actions for continuous improvement
 - Quality development
 - Retention, care visit punctuality, continuity of care
 - Incident reporting, health, fire and safety compliance.
 - Learning and Development across Helping Hands
 - Customer and employee feedback
 - Information governance and GDPR
- 3.2.6 Quarterly trend papers based on analysis of trends and themes are communicated to Operational teams.
- 3.3 Effective channels of communication enable key messages and information to reach internal and external stakeholders.
- 3.4 Regular news bulletins, including a regular Quality bulletin, are cascaded to Helping Hands employees to keep people informed and up to date on items such as:
 - 3.4.1 Regulatory updates and changes
 - 3.4.2 New Policy and procedural updates and reviews
 - 3.4.3 Key themed topics to help our employees and customers to develop knowledge and understanding
 - 3.4.4 Useful resources and information based on current insights and trends
 - 3.4.5 Good new stories

4.0 Touchpoint Plan

- 4.1 Helping Hands has a touchpoint plan in place which helps us check we are meeting the expectations of our customers and carers from the start.
- 4.2 The pre-determined touchpoint plan is applicable to all regulated customers and to Live-In carers (*see Appendix One – Touchpoint, Customer & Carer Journey*).
- 4.3 The customer touchpoints are completed with the customer over the telephone. However, the customer may consent for the touchpoint to be completed with a representative, or the touchpoint may be required to be completed with a representative if the customer lacks the capacity to the decision in question.
- 4.4 Compliance is tracked through our internal Touchpoint Analytical dashboard. The dashboard also allows Operational teams to plan and action Touchpoint calls.

5.0 Customer & Carer Journeys

- 5.1 Customer and carer journeys are composed of pre-planned automated tasks within the Customer and Carer IT Platform.
- 5.2 Once a start date for the customer / carer is inputted, tasks are planned which include care needs reviews, quality assurance checks, supervisions, direct observations and appraisals (*see Appendix One – Touchpoint, Customer & Carer Journey*)
- 5.3 The automation is designed to ensure the best possible service is being delivered and that we meet the changing needs of our customers and carers.
- 5.4 So that we remain flexible and person-centred, unplanned tasks can be triggered to accommodate any change in needs.
- 5.5 Contact with customers and carers throughout their journey with Helping Hands is evidenced on the relevant form in the IT Care Planning system (*see Appendix Two - Customer & Carer Documents / Forms*)
- 5.6 Compliance is tracked through our internal Customer and Employee compliance Analytical dashboards. The dashboards also allow Operational teams to plan and actions tasks.

6.0 Quality Monitoring – Auditing and Insights

6.1 Auditing

- 6.1.1 A designated independent audit team with Helping Hands regularly audits each service. Audits monitor adherence to care regulations and quality processes (*refer to W.I-054 Auditing & Audit Tools Work Instruction for further details*).
- 6.1.2 Internal audits not only serve as a way to check and ensure compliance, but they also provide us with opportunities to identify areas of development and continuous improvement of the service.
- 6.1.3 Audit compliance is tracked through our internal Audit Analytical dashboard.

6.2 Insights

- 6.2.1 Regular trend analysis of data also provide insight and focus on key areas. Intelligence is provided to Operational teams to introduce and implement, where appropriate, any changes that will improve and develop the quality of the service.
- 6.2.2 Based on trends and themes identified during audits and analysis of incident reporting, resources and learning material are developed and communicated to Operational teams.
- 6.2.3 Operational teams, with the support of our Quality Business Partners, continually upskill, focus on service improvement and development based on key insights provided.

6.3 Quality Assurance Checks

- 6.3.1 As part of the customer journey at Helping Hands, Quality Assurance checks are undertaken with the customer to ensure that the service we provide is safe, effective and of a premium quality.
- 6.3.2 Quality Assurance checks are completed by the local service with the customer and includes checks on:
- Carer / employee presentation and conduct
 - Safety
 - Overall satisfaction of the service
 - Suggestions for improvement
- 6.3.3 Feedback is reviewed by the service and improvements are made where identified.

7.0 Customer Experience Team

- 7.1 We seek feedback on the service from customers and carers through our Customer Experience Team (CX team). Feedback is sought through structured surveys which are carried out over the phone (*see Appendix Three - Customer Experience Feedback Process*).
- 7.2 The CX team produces a service feedback and development pack based on the customer and carer feedback.
- 7.3 The pack is cascaded to Operational Teams who are responsible to review the feedback and work towards continuous improvement and development of the service.
- 7.4 We will attempt to resolve any expression of dissatisfaction raised and we encourage customers, their families and / or their representatives to contact us to provide feedback. If we fail to resolve an expression of dissatisfaction or the customer and / or their family, or representatives wishes to pursue the matter, we must follow the complaint policy & procedure.

TRAINING

Is training required?	All staff will be guided on the Quality Assurance Process
Details of training	

COMPLIANCE

How is compliance with the POL going to be monitored	This policy will be monitored by the Quality Assurance team. Should there be changes within regulation or legislation this policy will be reviewed.
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EQUALITY IMPACT ASSESSMENT AND PROCEDURAL INFORMATION

	Positive / Negative / N/A	Comments
Does the document have a positive or negative impact on one group of people over another on the basis of their:		
• age?	NA	
• disability?	NA	
• gender reassignment?	NA	
• pregnancy and maternity (which includes breastfeeding)?	NA	
• race (including nationality, ethnic or national origins or colour)?	NA	
• marriage or civil partnership?	NA	
• religion or belief?	NA	
• sex?	NA	
• sexual orientation?	NA	

If you have identified any potential impact (including any positive impact which may result in more favourable treatment for one particular group of people over another), are any exceptions valid, legal and/or justifiable?	NA	
If the impact on one of the above groups is likely to be negative:		
• Can the impact be avoided?	NA	
• What alternatives are there to achieving the document's aim without the impact?	NA	
• Can the impact be reduced by taking different action?	NA	
• Is there an impact on staff, client or someone else's privacy?	NA	

What was the previous version number of this document?	Version 04	
Changes since previous version	Complete review of Policy, all sections including appendices.	
Who was involved in developing/reviewing /amending the POL?	Quality Business Partner Head of Quality Quality Development Lead	
How confidential is this document?	Public	Can be shared freely within and outside of Helping Hands

References	Care Act 2014 Care Quality Commission Care Inspectorate Wales Equality Act 2010 GDPR 2018
Associated Documents	Auditing & Audit Tools Work Instruction Complaints Policy

Appendix One – Touchpoint, Customer & Carer Journey

- Live In Care Managed Start** = 'To be completed every time a carer is introduced to a customer' – our commitment to ensure a smooth transition between carer changeover and one which provides an opportunity to get to know our people whilst maximising the potential for people to live well in their community.

Touchpoint Plan - Meeting & exceeding expectations from the start

Who & When?	Visiting and Live In Customers	Live In Carers
Day 1	'Check in' to see how the first day has gone (Visiting Regulated Customers Only)	N/A
Week 1	'Check in' to see how the first week has gone (All Regulated Customers)	Check in; review CP; Activities and make sure they are ok
Month 1	Are they happy with the service? (All Regulated Customers)	Is the Care Certificate underway – Are they happy with Placement had and communication / support with office & Carer services
Month 2	Does the care plan need reviewing and is there any improvements we need to address. (All Regulated Customers)	Is the Care Certificate underway – Are they happy with Placement had and communication / support with office & Carer services

2. Customer Journey – Once the customer reaches month 3, the ongoing customer journey commences

Customer Journey (England & Wales)							
	Start Date	Week 1 – Month 3	ONGOING JOURNEY	Month 3	Month 6	Month 9	Month 12
ENGLAND NON-REGULATED					Care Needs Review & QA Check		QA Check
ENGLAND REGULATED LI & VC	Managed start (Live In ONLY)	Touchpoint Plan		Care Needs Review	QA Check	Care Needs Review	QA Check
WALES REGULATED LI & VC	Managed start (Live In ONLY)	Touchpoint Plan		Care Needs Review & QA Check	Care Needs Review & QA Check	Care Needs Review & QA Check	Care Needs Review & QA Check

3. Carer Journey

Live In Carer Journey (England & Wales)						
Day 1 Placement	Week 1 – Month 3	ONGOING JOURNEY	Month 3	Month 6	Month 9	Month 12
Carer orientation & mentorship meeting - for every carer arriving at every placement (To include orientation, carer competency, 1-1)	Touchpoint Plan		Direct Observation 1-1 supervision	1-1 supervision	Direct Observation 1-1 supervision	1-1 supervision & Appraisal

Clock to restart each time carer moves from one placement to another – if carer in placement 3 months + A direct observation & 1-1 supervision will be required.



- If Carer leaves placement (Clock stops)
- When Carer arrives at next placement despite if rotation - 'Carer Orientation & Mentorship meeting' is completed (Clock Starts)
- If Carer still in placement at 3M above carer journey kicks in.

Visting Carer Journey (England & Wales)						
	Month 1	ONGOING JOURNEY	Month 3	Month 6	Month 9	Month 12
ENGLAND	Direct Observation & 1-1 supervision		Direct Observation	1-1 Supervision	Direct Observation	1-1 supervision & Appraisal
WALES	Direct Observation & 1-1 supervision		Direct Observation 1-1 supervision	1-1 supervision	Direct Observation 1-1 supervision	1-1 supervision & Appraisal

Appendix Two – Customer & Carer Documents / Forms

Customer Documents Required on ACCESS
Support Plan, Risk Assessments and Consent to Care
Visiting Care Agreement
Mental Capacity Assessment & Best Interest
Touchpoint for Customers Form
Care Needs Review Form
Quality Assurance Check Form
Customer Audit Form – (for Customer Visit Notes, eMAR, Financial Transactions)
Pro Renata (PRN) Protocol Form
Prescribed Medication Received Form
Medicines Return for Disposal Form
Medicines List Form (for level 0)
Body Observation Form
Customer Notification Form
Communication Log
Medication Error Report Form
Accident – Near Miss & Incident Form
Safeguarding Notification
Complaints Report Form
Compliments
Live-In Managed Start Form
Live-In Financial Record
Live-In Court of Protection Notification
Live-In Notification of Death

Carer Documents Required on ACCESS
Live-In Carer Time Task Analysis
Live-In Carer Orientation & Mentorship Meeting Form
Live-In Touchpoint for Carers Form
Carer Accident-Near Miss & Incident Form
Working Time Regulations 48hr Opt-Out Agreement
Medical Questionnaire
Onboarding Personnel documentation - Right to Work – Home Office Document
Supervision Records
Direct Observation Records (includes IPC competency, Moving & Handling competency, Medication Competency)
Care Worker Risk Assessment (includes Lone Worker Risk Assessment and Vulnerability to Infectious Diseases Risk Assessment).
Appraisal Document

Appendix Three - Customer Experience Feedback Process

