

BUSINESS MANAGEMENT		
The provider must demonstrate good business management which assists them to meet all service user outcomes.		
1.1	Registration / Insurance Certificates	Service Self Assessment
	Requirements for Level C	Evidence submitted and found where
	Care Quality Commission Registration Certificate and CQC Registered Manager	
	Professional Indemnity Insurance (£5m)	
	Employers Liability (£10m)	
	NMC or GMC register (where applicable)	
	Malpractice Nursing (£5m)	
	Public/Products Liability (£10m)	
	GPs with special interests	
	Consultants RGP Level 1 or 2	
	Clinical Negligence (£5m)	
	Staff insurance for travel in their own vehicle.	
		Level C
	Requirements for Level B	
	The Provider has a current risk assessment	
		Level B
	Requirements for Level A	
	Insurance policies that cover use of / setting up temporary accommodation during an emergency (closure of the current site).	
	Insurance that covers costs of additional staff and other resources during this period	
		Level A
		Overall assessment for Standard 1.1 D
	Comments	
1.2	Business Premises	Service Self Assessment
	Requirements for Level C	Evidence submitted and found where
	The facilities are suitable and sufficient for the needs of the service provision	
	Suitable meeting / training rooms (including meetings rooms for confidentiality)	
	Confidential information storage facilities	
	Office base within the geographical boundary of Leicestershire	
	Individuals able to contact the office base by telephone, e-mail, minicom and fax (at the cost of local rates or below) or in person by appointment if necessary.	
		Level C
	Requirements for Level B	
	Risk assessments of the Service and any premises within which the service is delivered, are conducted at service inception and with appropriate frequency thereafter, following an incident, and at least annually.	
	Where staff work alone, risk assessments specifically address the risks faced by lone workers and clients.	
		Level B
	Requirements for Level A	

Clients are involved in risk assessments (<i>other than individual client risk assessments</i>), which record their participation.		
There is a dynamic approach to risk management with the aim of reducing risk.		

Level A
Overall assessment for Standard 1.2 D

Comments

1.3 Requirements of the job		Service Self Assessment
Requirements for Level C	Evidence submitted and found where	
The person managing the service is approved, trained and skilled		
It is clear what all staff roles / responsibilities are		
Arrangements are in place for the Owner, managers and Senior Staff defining their roles and responsibilities		
Clear reporting and accountability mechanisms are in place and understood by all staff		
An accountable senior member of staff is contactable at all operational times		
Level C		
Requirements for Level B		
Staff job descriptions and handbooks focus on the purposes and outcomes required of staff rather than the tasks to be performed. Staff members are assessed immediately following and several months after the receipt of training for confidence and competence in skills learned.		
Staff members report the quality and validity of training provided, and how it has improved their practice within the service provision.		
Level B		
Requirements for Level A		
Staff members confirm that the organisational culture is one that is open to innovation and can point to service improvements that have come about as a result.		
The Provider has trained ambassadors in specialist areas such as dementia or brain injury.		

Level A
Overall assessment for Standard 1.3 D

Comments

1.4 Business Practices / Policies and Procedures		Service Self Assessment
Requirements for Level C	Evidence submitted and found where	
Staff understand and have access to up-to-date copies of all policies, procedures and codes of practice		
Service users have access to relevant information on the policies and procedures and other documents in appropriate formats		

Providers have systems / policies / procedures in place to deliver the "Service" as outlined within Leicester City Council's Contract / Core Agreement and Service Specification.		
There is a system that ensures all staff are aware of, understand and implement all core company policies		

Level C

Requirements for Level B

There is a periodic (at least annual) review of the effectiveness of all policies including safeguarding and protection from abuse and their implementation.		
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Level B

Requirements for Level A

The service can demonstrate that changes have been made as a result of policy and procedure review which shows the impact of and stakeholder involvement.		
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Level A

Overall assessment for Standard 1.4 D

Comments

1.5 Care at Home: Logistics (not currently applicable to DAAS)

Requirements for Level C	Evidence submitted and found where	Service Self Assessment
The service operates within a clearly written set of aims and objectives. There are documented specific intended outcomes, which are sufficiently clear to enable managers or other stakeholders to assess the success of the service.		
There is a system in place to calculate how long it will take for staff to travel between visits. This ensures that full time requirements are given to rotas which take into account staff travel times for car users, walkers, cyclists and drivers.		

Level C

Requirements for Level B

Periodic reports to the governing body or senior managers analyse measures and indicators of service quality, identify any apparent strengths and weaknesses and outline plans of action to build on strengths and address weaknesses.		
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Level B

Requirements for Level A

Results of quality monitoring are periodically (at least annually) reported to SU and other stakeholders. The service is accredited by means of an appropriate quality system, for example, up-to-date certificates from accrediting bodies.		
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Level A

Overall assessment for Standard 1.5 D

Comments

1.6 Sub-Contracting		Service Self Assessment
Requirements for Level C	Evidence submitted and found where	
Where sub-contracting is required, the provider will have in place: Checks that demonstrate qualified staff are able to carry out tasks e.g. plumber, an electrician or district nurse, GP, community pharmacy, holistic therapists, activity providers. Suitable arrangements for checking the quality of the sub-contracted service Suitable arrangements for checking the quality of work provided as part of the contract Financial arrangements		
Level C		
Requirements for Level B		
Periodic progress reports from the subcontractor, as well as feedback about both the project at hand and the overall relationship		
Level B		
Requirements for Level A		
SU have been consulted about the quality of the work undertaken by the sub-contractor.		
Level A		

Overall assessment for Standard 1.6 D

Comments

Overall Self Assessment Score Standard 1: Not Met
D

2 PERSONALISED CARE, TREATMENT AND SUPPORT

The provider promotes and facilitates improved health and emotional well-being of its service users, ensuring they receive effective, safe and appropriate care, treatment and support to meet individual need. This approach enables service users to have a fulfilled life, making the most of their capacity and potential.

2.1 Carrying out tasks in accordance with my needs		Service Self Assessment
Requirements for Level C	Evidence submitted and found where	
Staff individually and collectively have the skills, knowledge and experience to deliver the services and care which the service states in its information material that it can provide		
The skills and experience of care staff are matched to the care needs of each service user		
Staff are able to communicate effectively with the service user using the individuals preferred method of communication		
There are nutrition and fluid monitoring charts in place if required and this care is planned		
Service user food choices, likes/dislikes, allergies and requirements are taken into account when preparing food		
Access to/information about/choice of food and drink is provided to meet diverse needs, making sure food and drink is nutritionally balanced and supports good health		

Where there are concerns about SU's in relation to nutrition and fluid intake causing deterioration of general health, including Ulcer Ambition, timely remedial action is taken which includes a referral to the appropriate Health Agency such as SALT, District nurses, Home visitors, GP, Dentist, Optician		
Specialist expertise is sought which includes access to mentors, peer support, mutual aid (where applicable)		
Level C		
Requirements for Level B		
Support planning takes account of the wider needs of the client (beyond those being met directly in the service) which impact upon their need for support.		
Specialist expertise is sought, where required, when drawing up support / risk management plans.		
Level B		
Requirements for Level A		
Support and risk management plans complement any statutory care plan or support plans provided by other agencies. Support and risk management plans indicate that clients are encouraged to take reasonable risks in developing their independence.		
SU outcomes are used to inform service development and strategic planning. Support and risk management plans complement any statutory care plan or support plans provided by other agencies. SU's are consulted with regarding any environmental changes and have an input to the design process.		

Level A
Overall assessment for Standard 2.1 D

Comments

2.2 My personal needs will be assessed to ensure I get safe and appropriate care that supports my human rights and that my wishes have been fully considered		Service Self Assessment
Requirements for Level C	Evidence submitted and found where	
The risk of the SU receiving unsafe or inappropriate care, treatment and support is reduced by: assessing the needs of the SU, planning and delivering care, treatment and support so that SU's are safe, their welfare is protected and their needs are met taking account of published research and guidance making reasonable adjustments to reflect people's needs, values and diversity having arrangements for dealing with foreseeable emergencies		
An individual care plan outlining the delivery arrangements for care is developed and agreed with each SU. The plan is generated from the initial assessment and support plan completed by the Local Authority Care Management staff and the SU.		
The plan is informed by the expressed wishes and preferences of the individual SU, including the use of an advocate, where appropriate and induces recovery ambitions (where appropriate)		
Level C		
Requirements for Level B		
Staff harness individual clients' insight into the assessment of needs and risks.		
Specialist expertise is sought, where required, when conducting needs / risk assessments.		

Level B		
Requirements for Level A		
The needs and risk assessment policy and procedures encourage appropriate risk taking and discourage risk avoidance as the key feature of support delivery. Needs and risk assessments balance promotion of independence with effective risk management.		
There is clear evidence to demonstrate SU involvement in the design of services to encompass life choices. The service can demonstrate that changes have been made to improve service delivery as a result of SU involvement in policy and procedure review.		

Level A
Overall assessment for Standard 2.2 D

Comments

2.3	My care and support will be reviewed and maintained to make sure it meets my needs		Service Self Assessment
	Requirements for Level C	Evidence submitted and found where	
	Staff are proactive in identifying and reviewing changing need and risk. SU files show that all SU risks have been reviewed and updated.		
	Services update their own care assessments and continuously review, evaluate and revise care, health and recovery plans for all SU to inform Care Managers of changing needs.		
	Such plans will reflect that support needs can reduce as well as increase. Care plans reflect each individual's changing needs and circumstances.		
	Reviews of needs as a minimum are undertaken when a situation means a re-assessment of risk is required and if not at least annually.		
	The needs and risk assessment policy and procedure is written down and reviewed every three years. The procedures state how clients will be involved. Staff understand and follow the procedures. Needs and risk assessments take into account the views of other services as appropriate.		
Level C			
	Requirements for Level B		
	The service works constructively with risk and does not use risk assessment to exclude applicants inappropriately.		
	Staff harness individual clients' insight into the assessment of needs and risks. Specialist expertise is sought, where required, when conducting needs / risk assessments.		
Level B			
	Requirements for Level A		
	The needs and risk assessment policy and procedures encourage appropriate risk taking and discourage risk avoidance as the key feature of support delivery. Needs and risk assessments balance promotion of independence with effective risk management.		
	The service can demonstrate that changes have been made to improve service delivery as a result of policy and procedure review and can show the impact of client and stakeholder involvement.		

Level A
Overall assessment for Standard 2.3 D

Comments

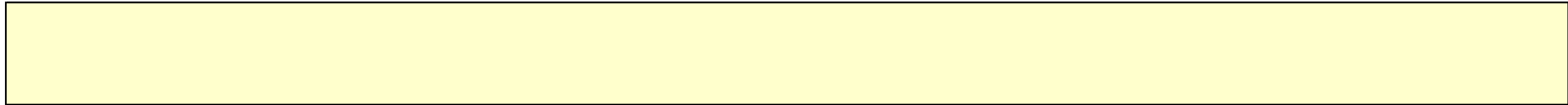
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2.4 Dignity and Respect	Evidence submitted and found where	Service Self Assessment
Requirements for Level C		
The Registered Manager ensures that there is continuity in relation to the care or support worker/s who provide the service to each SU Staff deployment is in accordance with individual care plans (numbers and skills and taking into account gender issues)		
Consultation with SU around any staff changes		
The number of staff supporting each SU is kept to minimum and ensures that consistency is maintained with a minimum number of staff to respect individuals dignity		
Staff are made aware of and understand their professional boundaries and their practice reflects this. A code of conduct (or similar document) makes clear appropriate boundaries for staff and volunteers		
Staff are clear of their responsibilities. There is evidence of clients' views being incorporated. Where clients disagree with assessments or reviews their views and reasoning are recorded. Clients have access to their file and are provided with a copy of assessments and reviews if they wish.		
Clients confirm that their views have been listened to and taken into account. Clients confirm that they are supported in meeting their cultural, religious and/or lifestyle needs, in line with the Equalities Act.		
Level C		
Requirements for Level B		
Needs and risk assessments, support plans and reviews seek to involve other professionals, carers, family and/or friends as the client wishes.		
Records demonstrate that a SU is always consulted / informed when a staff member changes. The support plan is person centred and can demonstrate active involvement of the SU in its composition.		
Level B		
Requirements for Level A		
Needs and risk assessment and support planning procedures balance respect for clients' views, preferences and aspirations with effective risk management. Staff are able to describe how they deal with disagreements and how they balance respect for clients' wishes with effective risk management.		
Staff are able to describe how they deal with disagreements and how they balance respect for clients' wishes with effective risk management. Clients confirm how they have been supported to access a range of services to meet their diverse needs – both those provided by the organisation and those available through other providers such as non-regulated activities from faith or community groups.		

Level A

Overall assessment for Standard 2.4 D

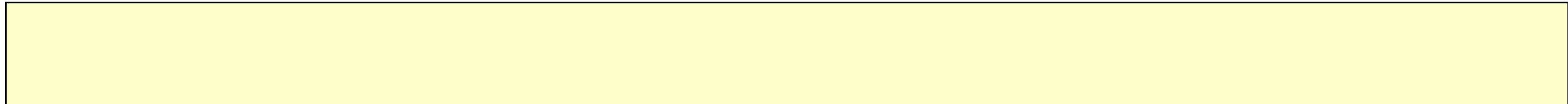
Comments



2.5 Equality and Diversity		Service Self Assessment
Requirements for Level C	Evidence submitted and found where	
There are equality and diversity policies / procedures which have been reviewed in the last three years which are known and adhered to by all staff		
Compliance with the Equality Act 2010 and reasonable adjustments (e.g. for sensory, physical, mental health needs or autism spectrum disorder)		
Person centred assessment (self-assessment if possible) and family/advocate involvement as necessary, to identify health, social, personal and emotional needs, outcomes and preferences. Staff have received Equality and Diversity training.		
Clients confirm that they are supported in meeting their cultural, religious and/or lifestyle needs, in line with the Equalities Act		
Level C		
Requirements for Level B		
Needs and risk assessments, support plans and reviews seek to involve other professionals, carers, family and/or friends as the client wishes		
The support plan is person centred.		
Level B		
Requirements for Level A		
Needs and risk assessment and support planning procedures balance respect for clients' views, preferences and aspirations with effective risk management.		
Staff are able to describe how they deal with disagreements and how they balance respect for clients' wishes with effective risk management. Clients confirm how they have been supported to access a range of services to meet their diverse needs – both those provided by the organisation and those available through other providers.		

Level A
Overall assessment for Standard 2.5 D

Comments



Overall Self Assessment Score Standard 2: Not Met
D

3 SAFEGUARDING AND SAFETY

Service users are protected from abuse, or the risk of abuse and their dignity and human rights respected and upheld. Access to care without hindrance from discrimination or prejudice. SU and staff should be as safe as they can be. Any risks are appropriately managed. Positive risk is encouraged, appropriately managed and the service is not risk adverse. Any 'vulnerable' situations are appropriately identified and responded

3.1 I will be protected from abuse or the risk of abuse, discrimination and harassment and care workers will respect my human rights		Service Self Assessment
Should any serious incidents occur, relevant authorities are notified		
Requirements for Level C	Evidence submitted and found where	
SU, staff and visitors are in safe, accessible surroundings that promote wellbeing. Services take account of any relevant design, technical and operational standards and manage all risks in relation to the premises e.g. infection control.		
SU, staff and visitors know they are protected against the risks of unsafe or unsuitable premises through: The design and layout of the premises being suitable for carrying out the regulated activity, appropriate measures being in place to ensure the security of the premises and any grounds being adequately maintained, compliance with any legal requirements relating to the premises.		
There is a whistle blowing policy which has been reviewed in the last three years which is known and adhered to by staff		
Have a business continuity / risk management plan that covers emergency situations such as fire, flood and/or significant change in the physical standard of the home		
Emergency call-out and out of hours support arrangements are documented and publicised to service users and staff in ways appropriate to their needs		
The service maintains appropriate records to demonstrate cleanliness and adherence to infection control procedures within the service provision. The service ensures the competence of staff members with cleanliness and infection control requirements		
The service maintains an up to date business continuity plan.		
Level C		
Requirements for Level B		
The service ensures that a business continuity plan is updated at least annually. The service can demonstrate effective action when cleanliness and adherence to infection control procedures within the service provision has resulted in an infectious outbreak.		
The service has an infection control champion.		
Level B		
Requirements for Level A		
The service undertakes regular and robust cleanliness and infection control audits, producing and implementing actions plans where appropriate including advice from LCC H&S.		
Level A		
Overall assessment for Standard 3.1 D		
Comments		

3.2 Equipment that meets my individual needs.		Service Self Assessment
Requirements for Level C	Evidence submitted and found where	

<p>The service follows published guidance and training about how to use medical devices safely and will make sure equipment is:</p> <ul style="list-style-type: none"> - suitable for its purpose - available - properly maintained - used correctly and safely - promotes independence - comfortable 		
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Level C

Requirements for Level B

<p>There is a documented approach to risk taking and the use of equipment that enables staff members to understand the meaning of “appropriate risk taking” and discourages risk avoidance as the key feature of support planning</p>		
<p>Support planning takes account of the wider needs of the client (beyond those being met directly in the service) which impact upon their need for support.</p>		

Level B

Requirements for Level A

<p>There is a strategic approach to promoting independence and maximising SU participation in the wider community. Expertise and resources are available to enable SU to develop their talents and abilities and positive risk taking.</p>		
<p>Mechanisms are in place between the service and external agencies to facilitate and enable joint working. Client outcomes are used to inform service development and strategic planning. SU's have been consulted with regarding the choice of equipment they are offered.</p>		

Level A

Overall assessment for Standard 3.2 D

Comments

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3.3 I will receive care, treatment and support that meets my needs

Requirements for Level C	Evidence submitted and found where	Service Self Assessment
<p>The service takes action to identify and prevent abuse from happening. Respond appropriately when it is suspected that abuse has occurred or is at risk of occurring.</p>		
<p>Ensure that Government and local guidance about safeguarding from abuse is accessible to all staff and put into practice.</p>		
<p>Demonstrate how the service ensures SU are protected from physical, financial, verbal, sexual or racial abuse and neglect or abuse through the misapplication of drugs by deliberate intent, negligence or ignorance. Make sure that the use of restraint is always appropriate, reasonable, proportionate and justifiable to that individual and used in a way that respects dignity and protects human rights. Where possible its use respects the preferences of the SU.</p>		
<p>Protect others from the negative effect of any behaviour of SU. Where applicable, only use Deprivation of Liberty Safeguards when it is in the best interests of the SU and in accordance with the Mental Capacity Act 2005.</p>		

<p>The SU, families and friends are routinely provided with information about the MCA and DOLS and the right for them to bring to the service's attention that there should be an application for a DOLs authorisation and what else they could do if the service did not agree. Prompt action, consistent with agreed procedures, is taken in relation to individual concerns from staff, SU or others and appropriate support is provided to them including whistle blowers</p>		
<p>A log records detail of incidents, near misses and outcomes and shows appropriate action and reporting in line with the Contract and CQC. There are appropriate arrangements to enable SU and staff to access help in crisis or emergency. Emergency call-out and out of hours support arrangements are documented and publicised to SU and staff in ways appropriate to their needs.</p>		
<p>There is a no-response/ no access policy and procedure for example where SU's receive care at home and providers are unable to make contact at planned visit times. This includes sharing information with relevant agencies when SU are on a respite break or away with family / carers. There is a plan for dealing with any disruption to the service (contingency planning).</p>		

Level C

Requirements for Level B

<p>There is a periodic (at least annual) review of the effectiveness of safeguarding and protection from abuse policies and procedures and their implementation. The policy and procedure review seeks to identify and address disincentives to reporting concerns.</p>		
<p>Disclosure and Barring Service checks are updated every three years. The service appropriately supports staff members through, for example, supervision, in dealing with abuse cases. Staff understand how diversity, beliefs and values of people who use services may influence the identification, prevention and response to safeguarding concerns. The service has mechanisms in place that reinforce professional boundaries.</p>		

Level B

Requirements for Level A

<p>There is a planned approach to working with other agencies. The service can demonstrate that key safeguarding partners are involved in policy and procedure review. The service can demonstrate that changes have been made to improve service delivery as a result of review or following an incident / safeguarding investigation.</p>		
<p>Policy and procedure review can show the impact of client and stakeholder involvement. The service is proactive in promoting and sharing good practice beyond the service on safeguarding vulnerable adults. The service can demonstrate that changes have been made to improve service delivery as a result of policy and procedure review. Regular review of safeguarding incidents to assess the root cause(s) is undertaken the outcome of which is reflected in changes to service delivery.</p>		

Level A

Overall assessment for Standard 3.3 D

Comments

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3.4 Care workers will carry out tasks in accordance with infection control guidelines		Service Self Assessment
Requirements for Level C	Evidence submitted and found where	
Infection Control The service complies with the requirements of regulation 12, with regard to the Code of Practice for Health and Adult Social Care on the Prevention and Control of Infections and related guidance		
Level C		
Requirements for Level B		
The service maintains appropriate records to demonstrate cleanliness and adherence to infection control procedures within the service provision. The service ensures the competence of staff members with cleanliness and infection control requirements.		
Level B		
Requirements for Level A		
The service undertakes regular cleanliness and infection control audits, producing and implementing actions plans including advice from LCC H&S.		
Level A		
Overall assessment for Standard 3.4 D		

Comments

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3.5 If the care provider is assisting me with medication, I will get the medicines I need, when I need them, and in a safe way		Service Self Assessment
Requirements for Level C	Evidence submitted and found where	
The service handles medicines in accordance with NICE guidance i.e safely, securely and appropriately prescribed medicines are given by people safely. There is a log book, policy and procedure for those who self-medicate. The service follows published guidance about how to use medicines: There is a medication policy which has been reviewed annually and is known and adhered to by all staff who administer.		
Staff only provide assistance with taking medication or administering medication or undertake other health related tasks when it is within their assessed competence.		
Staff have received necessary specialist SU specific training and it is with the informed consent of the SU or their relatives or representative.		
Procedures for reporting medication concerns which include: How care and support workers follow the services procedures for reporting concerns, responding to incidents and seeking guidance. How the service identifies and responds to any changes or concerns in an individual's needs. Recording administration of medication within the care plan and other records.		
Care and support workers agree with the SU to record any observations of the taking of medication and any assistance given (including dosage and time of medication)		
The service has a homely remedies policy and procedure and Homely remedy MAR records that indicate what an SU can have, when, in what quantity and any contra-indicators if having other prescribed medicines. The service has a policy and procedure for accepting medicines from those on respite care / short breaks. The service has a policy and procedure for hospital discharge of SU.		
Level C		
Requirements for Level B		

The service has a service agreement with a local pharmacy which includes a terms of reference, a clear statement in relation to ordering, waste management and returns. The Service has an alternative supplier for medicines in the event that its primary supplier cannot deliver an order on time.		
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Level B

Requirements for Level A

The service can demonstrate that it encourages an SU to manage their own medication(s) including offering lockable storage in their own room.		
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Level A

Overall assessment for Standard 3.5 D

Comments

3.6 If I have been assessed as requiring help with managing my financial affairs:

Requirements for Level C	Evidence submitted and found where	Service Self Assessment
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The registered person ensures there are policies and procedures in place for staff on the safe handling of service users money and property		
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There are invoice procedures for private and direct payment clients		
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Where service users are unable to take responsibility for the management of their finances, this is recorded on the risk assessment and action taken to minimise the risk		
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Cash transactions are regularly recorded on cash record sheets if staff are handling a service users money (e.g. shopping)		
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There are procedures to prevent staff from personal benefit when working with vulnerable people		
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There is a documented risk assessment addressing potential for personal benefit		
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Level C

Requirements for Level B

The service can demonstrate that changes have been made to improve service delivery as a result of policy and procedure review, learning and development, incidents and / or near misses.		
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Level B

Requirements for Level A

The service can demonstrate that changes have been made to improve service delivery as a result of policy and procedure review that can show the impact of SU involvement.		
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The service advises and encourages an SU to manage their own money		
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Level A

Overall assessment for Standard 3.6 D

Comments

Overall Self Assessment Score Standard 3: Not Met
D

4 STAFFING
The service has the right staff with the right skills, qualifications, experience and knowledge to support its service users. It looks at training needs for staff and how they should be supported to carry out their role, including the time they will need away from work in order to take part in learning and development opportunities. The service will be flexible and adaptable to service users changing needs and requirements.

4.1 I will be cared for by care workers who have the knowledge, skills and experience needed to meet my health and welfare needs	Evidence submitted and found where	Service Self Assessment
Requirements for Level C		
Effective recruitment and selection procedures in place, relevant checks carried out when employing staff There is a rigorous recruitment and selection procedure which meets the requirements of legislation, equal opportunities and anti-discriminatory practice and which ensures the protection of SU and their relatives		
Staff recruitment and induction has a clear focus on promoting the intrinsic value of each individual SU and ensures that the values of each member of staff are consistent with this message		
All managers and staff are provided with a written job description, person and work specification identifying their responsibilities and accountabilities and copies of the organisations staff handbook		
There is a structured induction process, which is completed by new care and support staff. Induction Program should include the Skills for Care Common Induction Standards		
Level C		
Requirements for Level B		
Staff job descriptions and handbooks focus on the purposes and outcomes required of staff rather than the tasks to be performed. There is documentary evidence of the service provider being able to respond to unexpected changes in staffing levels, for example, sickness, absences and emergencies.		
Staff members are assessed immediately following and several months afterwards the receipt of training for confidence and competence in skills learned. Staff members report the quality and validity of training provided, and how it has improved their practice within the service provision.		
Level B		
Requirements for Level A		
There is a documented service-wide training plan, which cascades the needs of the service into individual training plans. There is formal recording of feedback from clients (e.g. via complaints, formal consultation processes, key-working, day-to-day discussions with staff etc.) and documentary evidence of this being collated and taken account of when preparing training plans		
Staff members confirm that the organisational culture is one that is open to innovation and can point to service improvements that have come about as a result including the use of champions and ambassadors in specific areas such as dementia.		
Level A		

Overall assessment for Standard 4.1 D

Comments

4.2 I will be cared for by care workers who have gone through a thorough recruitment and induction process and who have the right training and skills to do their jobs properly .		Service Self Assessment
Requirements for Level C	Evidence submitted and found where	
Staff are registered with the relevant professional regulator or professional body where necessary and are allowed to work by that body		
Staff who are thought to be no longer fit to work in health and adult social care, and meet the requirement for referral, are referred to the appropriate bodies		
Sufficient staff with the right knowledge, experience, qualification and skills to support Sus. There is a training needs analysis for each staff member which is incorporated into the staff training and development plan		
The service measures on going staff competence in respect of each area of training provided; 'on the job' training is with the consent of the SU		
There are staff supervision and appraisal mechanisms to monitor staff competence in core areas of service delivery		
Statutory and mandatory training (e.g. medication, moving and handling, handling SU's finance) are covered in staff supervisions and appraisals There is documentary evidence that supervision specifically addresses the nature and limits of relationships between staff and SUs and maintains dignity		
Staff are properly supported to provide care and treatment to SUs; properly trained, supervised and appraised		
Staff are enabled to acquire further skills and qualifications that are relevant to the work they undertake		
Level C		
Requirements for Level B		
Staff are enabled to acquire further skills and qualifications that are relevant to the work they undertake (e.g. CPD). Where staff work alone, risk assessments specifically address the risks faced by lone workers and clients. There is documentary evidence of the service provider being able to respond to unexpected changes in staffing levels, for example, sickness, absences and emergencies.		
Staff members are assessed immediately following and several months afterwards the receipt of training for confidence and competence in skills learned.		
Level B		
Requirements for Level A		
Clients are involved in risk assessments (<i>other than individual client risk assessments</i>), which record their participation. There is a dynamic approach to risk management and the service proactively looks to reduce risk, but is not risk averse.		
Level A		

Overall assessment for Standard 4.2 D

Comments

4.3 I will be consulted about the flexibility of my service, and whether informal arrangements have been taken into account in planning service delivery		Service Self Assessment
Requirements for Level C	Evidence submitted and found where	

Staff are reliable and dependable. Staff can respond flexibly to the needs and preferences of SU which arise on a day to day basis and services are provided in a way that meets the outcomes identified in the care plan		
Staff rota's are appropriate to meet care needs; times to suit / agreed with SU		
Staff have a clear understanding of how they can communicate changing Circumstances within their own organisation		
Staff arrive at the SU home within the time band specified and work for the full amount of time allocated		
Care is not rushed, time is allocated in a way so that there is enough time to carry out what is required in a way that the SU wants		
There is continuity in relation to the staff who provide(s) support and care to each SU		
Staff deployment is in accordance with individual care plans		

Level C

Requirements for Level B

Staff are enabled to acquire further skills and qualifications that are relevant to the work they undertake. Where staff work alone, risk assessments specifically address the risks faced by lone workers and clients. There is documentary evidence of the service provider being able to respond to unexpected changes in staffing levels, for example, sickness, absences and emergencies.		
Staff members are assessed immediately following and several months afterwards the receipt of training for confidence and competence in skills learned.		

Level B

Requirements for Level A

Clients are involved in risk assessments (<i>other than individual client risk assessments</i>), which record their participation. There is a dynamic approach to risk management and the service proactively looks to reduce risk, but is not risk averse.		
No decision about me, without me		

Level A

Overall assessment for Standard 4.3 D

Comments

4.4	If I have more than one service, or if I am moved between services, I will get safe co-ordinated care, treatment and support		Service Self Assessment
	Requirements for Level C	Evidence submitted and found where	
	The service cooperates with others involved in the care, treatment and support of the SU i.e. when the responsibility is shared or transferred to one or more services, individuals, teams or agencies		
	Information is shared in a confidential manner with all relevant services, individuals, teams or agencies to enable the care, treatment and support needs of the SU to be met		
	The service proactively seeks to engage other agencies in supporting SU; works with other services, individuals, teams or agencies to respond to emergency situations. SU are supported to access other health and social care services they need		

Mechanisms are in place between the service and external agencies to facilitate and enable joint working		
Level C		
Requirements for Level B		
The service can demonstrate that there is a planned and effective approach to working with other agencies. There is a periodic (at least annual) review of the effectiveness of safeguarding and protection from abuse policies and procedures and their implementation.		
The policy and procedure review seeks to identify and address disincentives to reporting concerns. Disclosure and Barring Service checks are updated every three years.		
Level B		
Requirements for Level A		
There is a planned approach to working with other agencies and the service can demonstrate SU involvement.		
The service can demonstrate that changes have been made to improve service delivery as a result of review or following an incident / near miss and can show the impact of client and stakeholder involvement.		

Level A
Overall assessment for Standard 4.4 D

Comments

Overall Self Assessment Score Standard 4: Not Met
D

5 **QUALITY AND MANAGEMENT**

The home care provider will routinely check the quality of their service.

5.1 The provider will regularly monitor the quality of the service they provide to make sure I receive the support I need		Service Self Assessment
Requirements for Level C	Evidence submitted and found where	
There is a Quality Management Plan (QMP) which has been reviewed annually and is known and adhered to by all staff; makes clear that where specialist knowledge is required to run the service safely that professional advice is sought. A QMP will identify, monitor and manage risks to people who use, work or visit/access the service and includes how the service will routinely involve SU, carers, families, peer mentors views in the running of the service		
There is a process and a procedure for consulting on a regular basis with SU and their carers about the care service and assuring quality and monitoring performance		
SU feedback is actively sought on their preferred methods of consultation		
SU are offered a range of opportunities to give their views, make comments, and offer ideas about the services provided		
The outcome from the Quality Management process is made available to SU, their family or representatives and reviewed		
There is evidence that feedback is listened to and implemented and includes; Outcomes and Actions met		
Level C		
Requirements for Level B		

SU are offered a range of opportunities to give their views, make comments, and offer ideas - both individually and in groups - about the services provided.		
Mechanisms for consultation are wide-ranging and aimed at securing the inclusion of all SU, to the extent and at the level they wish to be involved. Appropriate support is available to enable SU with different needs to be consulted e.g. travel expenses, signing, audio loop systems.		

Level B

Requirements for Level A

Consultation focuses on SU concerns and they have opportunities to play an active role in shaping current and future service delivery. Mechanisms for consultation are open and flexible so that clients can raise their own issues and concerns and not just respond to what the service defines as important. Forums and opportunities are available so that SU can come together, to share experiences and discuss what will meet their needs.		
Decision-making mechanisms facilitate SU involvement in designing and developing services and setting quality standards. There is a periodic (at least annual) review of the effectiveness of consultation mechanisms and the outcomes achieved.		

Level A

Overall assessment for Standard 5.1 D

Comments

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5.2 My personal records and information will be accurate and will be kept safe and confidential

Requirements for Level C	Evidence submitted and found where	Service Self Assessment
Keep accurate personalised care, treatment and support records secure and confidential for each SU Securely destroy records taking into account any relevant retention schedules. There are confidential waste facilities		
There is a confidentiality policy which has been reviewed in the last three years which is known and adhered to by all staff		
Care and support staff respects information given by SU or their representatives and in confidence and handle information about SU in accordance with Data Protection Act 1998. Service policies and procedures are written in the best interests of the SU		
Store records in a secure, accessible way that allows them to be located quickly. Suitable provision is made for the safe and confidential storage of SU records and information including the provision of lockable filing cabinets and shielding computer screens or hand written records from general view when displaying personal data		
The service maintains all the records required for the protection of SU and the efficient running of the business for the requisite length of time		
Daily records and care plans will be recorded in a manner which is factual and avoids personal opinion or judgements		

Level C

Requirements for Level B

Support planning takes account of the wider needs of the SU (beyond those being met directly in the service) which impact upon their need for support. The service proactively seeks to engage other agencies in supporting SU.		
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Specialist expertise is sought, where required, when drawing up support / risk management plans.		
Level B		

Requirements for Level A		
Support and risk management plans complement any statutory care plan or support plans provided by other agencies. Support and risk management plans indicate that clients are encouraged to take reasonable risks in developing their independence.		
Mechanisms are in place between the service and external agencies to facilitate and enable joint working. Reviews are co-ordinated to complement the reviews of any statutory care plan or support plans provided by other agencies. The service takes a case conference approach that includes engaging other services in reviews. SU outcomes and reviews of needs and risks are used to inform service development and strategic planning.		

Level A
Overall assessment for Standard 5.2 D

Comments

5.3 I or someone acting on my behalf can complain and will be listened to		Service Self Assessment
Requirements for Level C	Evidence submitted and found where	
Systems in place to deal with comments and complaints. Consider fully, respond appropriately and resolve, where possible, any comments and complaints		
There is a written complaints policy and procedure that has been reviewed in the last three years and this is used as a tool for service development i.e. improves the service by learning from adverse events, incidents, errors and near misses that happen, the outcome from comments and complaints, and the advice of other expert bodies where this information shows the service is not fully compliant		
All SU, carers and staff are made aware of the complaints procedures and how to use them		
A record is kept of all complaints and compliments including details of the investigation and action taken within reasonable response times in accordance with the organisations complaints policy		
The organisation carry out an on-going analysis of concerns/complaints to identify emerging patterns. The organisation uses the findings to inform its quality management and service/staff development and improvements plans		
Positive action is taken to encourage, enable and empower SU to use the complaints and compliments procedure including access to appropriate interpretation methods of communication		
Level C		
Requirements for Level B		
The organisation and its staff see complaints as a positive tool. There is a periodic review (at least annual) of complaints received.		
There is a periodic review (at least annual) that asks whether there is sufficient awareness of the procedure and what would inhibit complaints.		
Level B		
Requirements for Level A		

The service can demonstrate that reviews of policy, procedure and complaints received have been used to improve service delivery and can show the impact of client and stakeholder involvement. There is a documented service-wide training plan, which cascades the needs of the service into individual training plans.		
Staff members confirm that the organisational culture is one that is open to innovation and can point to service improvements that have come about as a result.		

Level A
Overall assessment for Standard 5.3 D

Comments

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Overall Assessment Score Standard 5: Not Met
D

6	VOICE, CHOICE AND CONTROL
Service users have access to choice and control of good quality care, which is responsive to individual needs and preference, includes consultation about personal preferences and wishes. Choices	

6.1	I will receive good advice and information to make choices	Service Self Assessment																														
	<table border="1" style="width: 100%;"> <tr> <th style="width: 40%; text-align: left;">Requirements for Level C</th> <th style="width: 40%; text-align: left;">Evidence submitted and found where</th> <th style="width: 20%;"></th> </tr> <tr> <td>A SU Guide / handbook / directory and other information materials are available/produced, setting out service aims and objectives, the range of facilities and services offered and the terms and conditions of receiving the service / occupancy.</td> <td></td> <td></td> </tr> <tr> <td>Copies of the following written policies (where applicable) are made readily available that deal with: The management of continence*. Care for those with advanced stages of dementia, including the management of challenging behaviour and procedures for dealing with medical emergencies. The ordering, storage and administration of drugs Dealing with abuse and allegations of abuse. Managing personal allowance Policies for admissions, transfers and discharges. Control of infection Providing care in a dignified manner which would include maximising independence.</td> <td></td> <td></td> </tr> <tr> <td>A care plan is drawn up with the involvement of the SU wherever possible and/or their representatives on their behalf, and any other professionals as appropriate The care plan takes into account the SU wishes and preferences about the way care is provided and their chosen lifestyle – in keeping with any legal requirements</td> <td></td> <td></td> </tr> <tr> <td>The care plan is used to determine what and how services are to be delivered</td> <td></td> <td></td> </tr> <tr> <td>Staff understand the approach and can describe how they work with the SU to promote independence. There is a documented approach to risk taking that enables staff to understand the meaning of 'appropriate risk taking' and discourages risk avoidance as the key feature of support planning</td> <td></td> <td></td> </tr> <tr> <td>Care assessments use appropriate methods of communication so that the SU and their representatives are fully involved</td> <td></td> <td></td> </tr> <tr> <td>The risk assessment policy and procedure is reviewed at least every three years</td> <td></td> <td></td> </tr> <tr> <td>Staff carrying out risk assessments and reviews are competent to do so There are systems in place to ensure that staff can be deployed / redeployed if there are any choices or concerns from SU</td> <td></td> <td></td> </tr> <tr> <td>The care plan sets out in detail the action that will be taken by care and support workers to meet the assessed needs and communication requirements</td> <td></td> <td></td> </tr> </table>	Requirements for Level C	Evidence submitted and found where		A SU Guide / handbook / directory and other information materials are available/produced, setting out service aims and objectives, the range of facilities and services offered and the terms and conditions of receiving the service / occupancy.			Copies of the following written policies (where applicable) are made readily available that deal with: The management of continence*. Care for those with advanced stages of dementia, including the management of challenging behaviour and procedures for dealing with medical emergencies. The ordering, storage and administration of drugs Dealing with abuse and allegations of abuse. Managing personal allowance Policies for admissions, transfers and discharges. Control of infection Providing care in a dignified manner which would include maximising independence.			A care plan is drawn up with the involvement of the SU wherever possible and/or their representatives on their behalf, and any other professionals as appropriate The care plan takes into account the SU wishes and preferences about the way care is provided and their chosen lifestyle – in keeping with any legal requirements			The care plan is used to determine what and how services are to be delivered			Staff understand the approach and can describe how they work with the SU to promote independence. There is a documented approach to risk taking that enables staff to understand the meaning of 'appropriate risk taking' and discourages risk avoidance as the key feature of support planning			Care assessments use appropriate methods of communication so that the SU and their representatives are fully involved			The risk assessment policy and procedure is reviewed at least every three years			Staff carrying out risk assessments and reviews are competent to do so There are systems in place to ensure that staff can be deployed / redeployed if there are any choices or concerns from SU			The care plan sets out in detail the action that will be taken by care and support workers to meet the assessed needs and communication requirements			
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The care plan identifies areas of flexibility to enable the SU to maximise their potential and maintain their independence		
The plan is signed by the SU and/or their representative and is available in a language and format that the SU can understand		
A copy of the plan is held by the SU unless there are clear and recorded reasons not to do so		
Reviews of needs are undertaken at least annually or more frequently if required and care, health and recovery plans are updated to reflect this		

Level C

Requirements for Level B

Support plans show that staff members and SU have discussed any wishes for volunteering, employment, training, education, social and leisure activities outside of the service.		
Information concerning the availability of such services, activities and opportunities is made readily available in ways appropriate to SU needs.		

Level B

Requirements for Level A

The Service can demonstrate that changes have been made as a result of policy and procedure review. Policy and procedure review show the impact of service user and stakeholder involvement.		
SU are able to influence how they receive information about safeguarding and protection from abuse and the reporting mechanisms for raising concerns. The service can demonstrate that where an SU has a licence to occupy or is placed in a care / nursing home a capacity test has been undertaken.		

Level A

Overall assessment for Standard 6.1 D

Comments

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6.2 I will be supported and consulted about my preferences and wishes for planning end of life care (not currently applicable to DAAS)

Requirements for Level C	Evidence submitted and found where	Service Self Assessment
There is a clear and documented approach to supporting the SU end of life wishes		
The service is able to demonstrate that there are robust process and procedures in place to ensure that SU (and families where appropriate) are consulted about their wishes for end of life care		
An end of life care plan is drawn up with the involvement of the service user whenever possible or their representatives on their behalf, and any other professionals as appropriate		
The end of life care plan takes into account service users' wishes and preferences in relation to the way in which the care is provided		

Level C

Requirements for Level B

The service has a person-centred approach to death and dying, and this is integral in service provision. The SU an End of Life care pathway, or equivalent, in the delivery of good quality end of life care		
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The service understands, and recognises and promotes the psychological needs of SU. The Service support SU in receiving psychological support for themselves if dying, or if received news of the bereavement of someone close to the SU.		
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Level B

Requirements for Level A

The service is a registered provider of nationally recognised programmes of good practice in end of life care, for example, Gold Standards Framework. The framework has been integrated into their service provision		
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Reviews of policies, procedures and practice guidance can show the impact of SU involvement. The service has a holistic approach to death and dying, supports SU in their physical, mental, emotional and spiritual needs.		
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Level A

Overall assessment for Standard 6.2 D

Comments

Overall Assessment Score Standard 6: Not Met
D

Overall Assessment Score All Standards Not Met
D

Standard	Self Ass'ment
1	D
2	D
3	D
4	D
5	D
6	D