



Standards for Quality Assurance Policy

July 2022

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1 INTRODUCTION - 1ST HOMECARE AND QUALITY ASSURANCE

1st Homecare aims to provide care to our clients of the highest possible standards. We recruit our staff with care and ensure that they are trained to be proficient in the performance of tasks that will be required of them. We monitor our service standards closely and use a variety of means to review the care we provide, which are outlined below.

2 PRE-EMPLOYMENT CHECKS

Before employing someone as a carer, 1st Homecare will undertake a check through the Disclosure and Barring Service (DBS). The Company will also obtain a minimum of 2 references, normally from previous employers. These references will be verified with the referees. Please see the Recruitment Policy for more information.

3 PERSONAL ASSESSMENTS, RISK ASSESSMENTS AND CARE PLANS

Prior to any care being undertaken by 1st Homecare, an initial visit will be made by the Branch Manager or other delegated individual, to conduct a Personal Assessment, at which the personal and physical needs of each potential client will be assessed, as well as a Health & Safety Risk Assessment to assess the home environment. Other assessments will be conducted as appropriate as per the Risk Assessment Policy. A Care Plan will then be prepared for the client. The Risk Assessment Policy should be referred to for further information regarding risk assessments. The Care Plan and Risk Assessments will be reviewed at regular intervals or more frequently as required.

3 COMPETENCY ASSESSMENTS, SPOT CHECKS, APPRAISALS AND SUPERVISION OF STAFF

Competency assessments

New carers will be observed to check their competency with regard to medication and other areas that are specified by the Care Certificate and/or are required by 1st Homecare itself.

Spot checks and after care spot checks

We perform spot checks on our carers at regular intervals, to ensure they are competent and are carrying out care in accordance with the standards required. For new carers, spot checks are carried out more frequently in the initial weeks after starting employment.

Spot checks are performed whilst the carer is undertaking a client visit. An appropriate member of the management team (or delegated individual) will observe the carer working to ensure that he or she is providing the care and support agreed in the Care Plan and is working correctly and in accordance with 1st Homecare's Values and agreed ways of working. Any comments that the client (or his/her appropriate representative) may have on the standards of care he or she is receiving will be sought also. A spot check form will be completed and the outcome will be fed into supervisions and appraisals or if more urgent, there will be a follow up discussion with the carer and where required, appropriate action will be taken.

Additionally, "after care spot checks" are carried out after the carer has finished the visit and left, and the client's comments (or those of his/her appropriate representative) will be sought on the standards of care being delivered.

Supervisions

Supervisions are conducted on a one-to-one basis with staff at approximately 3-monthly intervals to provide feedback to them on their performance, get their feedback, and also discuss any issues that have arisen and any training that may be appropriate or the member of staff would like to undertake. In between Supervisions, there will be meetings as required between staff member and manager especially where the carer is new.

Appraisals

An annual appraisal will be conducted. The Appraisal and Supervision Policy should be referred to for further information.

4 CLIENT QUESTIONNAIRES & TELEPHONE MONITORING

Client questionnaires

Usually twice a year, 1st Homecare will write to currently active clients for their opinions on the standard of care they receive. Clients are informed at the time that completing the questionnaire is a voluntary process, and that they are under no obligation to complete it or to identify themselves.

When the completed questionnaires are received at the Office, the responses are reviewed, scored, and an action plan is drawn up to ensure that any actions required are fed back into the service provided. 1st Homecare writes to its clients providing feedback on the outcome and giving details of any measures it is taking to improve areas of performance as a result of the responses received.

Telephone monitoring

Telephone monitoring will be conducted approximately every 13 weeks to check if the client is happy with the service he or she is receiving or if any changes are required. In the case of a new client, the first telephone monitoring should normally be conducted approximately 2 weeks after the commencement of service, so that any changes can be picked up and made at the early stages of providing the service.

4 AUDITING OF CLIENT RECORDS

1st Homecare monitors daily the Care Plan activities to be carried out for clients to ensure they have been completed, check any notes made and follow up with carers where activities have not been completed.

MAR (Medication Administration Records) are also audited on a regular basis. If these are in digital form, an alert will be received by the Office if any medication is not recorded as having been given to the client and will be followed up promptly by the Office. All matters noted are recorded, with follow up actions and a responsible person assigned, and signed off by the Branch Manager.

5 DAY-TO-DAY FEEDBACK

We monitor the quality of care we provide on an ongoing basis through dialogue in the form of calls that we make to, and receive from, our carers, or from discussions with our carers when they come into the Office, or (in the case of our Kings Langley branch) through the feedback also from the Intake team. Equally, we also monitor our standards of service from calls we receive from and make to our clients/their family.

Comments and information received are entered as notes in the client section of PeoplePlanner or recorded as an Event where appropriate. Action, if required, is taken and the report filed. If the feedback concerns the standard of service offered by the carer, it is discussed with the carer and appropriate action will be taken to address any issues.

6 STAFF MEETINGS

In addition to our regular appraisal and supervision meetings with carers, staff meetings take place with Office staff and also with carers, at which they can raise any issues regarding 1st Homecare's standards of care, and any views on possible improvements that can be made. These meetings are an open discussion and give carers the opportunity to voice their opinions and to play a part in 1st Homecare's progression.

7 GENERAL

This Policy may be amended from time to time and a new version issued as required. Staff will be informed of the amended version.

CHANGE HISTORY

Issue	Date	Description of Change and Reason
1	November 2012	First Issue
2	July 2013	Second Issue
3	August 2013	Third Issue
4	December 2013	Fourth Issue
5	November 2014	Fifth Issue – to reflect new Risk Assessment Policy, minor changes including to formatting, and insert review date
6	September 2015	Sixth Issue – to include Pre-employment checks and to reflect changes to regularity of spot checks and supervisions.
7	February 2016	Seventh Issue – amendment to intervals at which spot checks and supervisions conducted
8	June 2016	Eighth Issue - amendment to spot check intervals and telephone monitoring and inclusion of section on auditing of client records
9	January 2017	Ninth Issue – amendments to make applicable to both offices and tidy up some parts.
10	January 2019	Tenth Issue – change of address, tidying up some parts
11	January 2020	Eleventh Issue – inclusion of KL office address, other minor changes
12	July 2021	Twelfth Issue – Changes to reflect change to digital system through introduction of Access, different practices at branches, and to correct typos.
13	July 2022	Thirteenth Issue – Minor changes regarding MAR and to wording.

DOCUMENT CONTROL

Name of document	Standards For Quality Assurance
Status	Approved
Issue	13
Issue date	July 2022
Maintainer	1HC
Owner	1HC
File name	1HC Standards for Quality Assurance Policy
File location	Policies and procedures`/Care
Review date	July 2023