

The Eastern Region Monitoring Tool & Report for Adult Social Care Non-regulated Services

Release 1.0 March 2015

This workbook forms part of the Regional Quality Monitoring Framework (QMF) and has been designed to support local authorities in monitoring and assessing the overall outcomes experienced by service users. It measures the delivery against the regional standards by gathering evidence across a wide range of sources.

LA Name:	Hertfordshire
Provider:	Victoria House (Runwood)
Address	Greenbanks Road, Watford, Hertfordshire, WD17 4JP
Parent Company	Runwood
Officer	Jade Hunt
Date:	30th November 2018

This Document has been approved by the Directors of Adult Social Services - Eastern Branch. Please email any queries to guy.pettengell@hertfordshire.gov.uk

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		% Combined score
1	Respecting & Involving Service Users	100.0%
2	Consent	100.0%
3	Care & Welfare of Service Users	100.0%
4	Meeting Nutritional Needs	100.0%
5	Co-operating with other Providers (currently not assessed)	0.0%
6	Safeguarding People who use the Service from Abuse	100.0%
7	Cleanliness & Infection Control	100.0%
8	Management of Medicines	100.0%
9	Safety & Suitability of Premises	100.0%
10	Safety, Availability & Suitability of Equipment	100.0%
11	Requirements Relating to Staff	100.0%
12	Suitability of Staffing	100.0%
13	Supporting Staff	100.0%
14	Assessing & Monitoring the Quality of Service provision	100.0%
15	Quality of Management (Complaints)	100.0%
16	Records	100.0%
Overall % score		100.0%

East of England Rating

Excellent (95%)	Overall rating	100.0%
Good (78%)		
Requires Improvement (65%)		
Poor (<65%)		

Section A Support Planning & Assessment

Support Planning: Does it include: All assessed areas of need / An appropriate person centred approach to supporting assessed need / appropriate risk management / risk assessment?

**The Assessment: Does it include: Personal Info / Reasons for referral / Medical history / Allergies & Intolerances / Likes & Dislikes / Assessment of Need / Consideration of risks?
Is it: Signed by SU / Rep? / Life history / includes a Photo**

Select one answer from the drop down list below:

Note: To insert a new line, you press the "Alt" key plus the "enter" key

Standard 1 (CQC Outcome 1)	Respecting & Involving Service Users (Care planning & assessment stage)		
a	That service user needs are at the centre of service provision and agreed outcomes are measurable and that the service and support delivered ensures that service users' choices are taken into account in the way in which the service is provided. Service users' privacy, dignity and independence are respected at all times and their (or their carer's) views are taken into account in the way the service is provided.	Met	Care plans are detailed, including abilities as well as what the SU requires support with. Care plans and assessments are in date and regularly reviewed and goals and outcomes are set in the care plan. Care plans include background information on the SU's life and some have a full life history booklet with photos and memories. All service users are given the opportunity to do this, however some don't want to. Service users are given choices and are involved in reviews along with family members where appropriate. One SU with Dementia eats food with her hands and will not use cutlery and therefore the service has adapted to accommodate this by giving her
b	That the service is able to respond to service user choices and service users are provided with appropriate information in appropriate formats and are always involved in making decisions about the way they receive services and are supported to express their views.	Met	
Standard 2 (CQC Outcome 2)	Consent (Care planning & assessment stage) and where appropriate		
a	Where they are able, service users give valid consent to the service they receive. They understand and know they can change any decision that has been previously agreed about their service. And service managers are aware of when to obtain consent, when to take verbal or implied consent and how to support staff in maintaining appropriate records	Met	Consent was evident throughout. Where service users could not sign, there were POA/representative details and signatures. Mental capacity is taken into account within the assessments which is also reviewed on a regular basis.
b	That service user's human rights continue to be respected and are taken into account at all times.	Met	
Standard 3 (CQC Outcome 4)	Care & Welfare of Service Users (Care planning & assessment stage)		
a	Evidence that Service Users (and where appropriate their stakeholders) are involved in their care and support planning.	Met	Care plans and consent to care forms are signed by service users and/or their family members where appropriate. They are reviewed every three months. Initial assessment is in place and so were HCC Connected Lives assessments. The day centre encourages social interaction and gives the opportunity for service users to socialise with each other and join in with the activities that the staff put on for them. There were a few rooms within the day centre with different activities or a quiet room to sit and read if preferred. Today's activities
b	That the support and service provided safely meets service users' needs and supports service users to achieve their goals, protects their rights, maximises their independence, health and wellbeing and reflects their strengths, abilities and interests.	Met	
Standard 4 (CQC Outcome 5)	Meeting Nutritional needs (Care planning & assessment stage)		
a	That service users are supported to make healthy choices and lead healthy lifestyles and are provided with access to information about healthy and balanced diets in appropriate formats.	Met	Care plans detail allergies, likes and dislikes. All files included all nutritional information required. Service users are offered a choice of a biscuit or toast with their cup of tea/coffee on arrival to day centre. Service users are offered healthy and various choices for lunch at the day centre which includes hot and cold options. 1 SU with Dementia is provided with finger food options as they won't eat with cutlery, making sure that she eats well with minimum stress to her.
b	Where appropriate, service users are enabled and supported to have a choice of nutritional and balanced food and drink to meet their diverse needs.	Met	

Standard 8 (CQC Outcome 9)	Management of Medicines (Care planning & assessment stage)
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a	That where appropriate service users will have the medicines they are prescribed, at the times they need them, and in a safe way.	Met	No SU files seen required medication assistance from the day centre staff, however any medication that SU's bring with them is safely stored and logged on a MAR sheet when given. Care plans clearly state information on medication that all service users are on at the front of the files. Service users and family members where appropriate are involved in all aspects of the support plans. Staff are appropriately trained and training is refreshed when due. Matrix was viewed, 3 staff have modules about to expire but are
b	That appropriate records are maintained and updated. Staff are in receipt of relevant up to date training.	Met	

Total for Section A	100.0%
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Daily Records & Reviews

A(i)	DAILY RECORDS: Do daily records reflect care plan and are elements identified fed back into care plan. Any health issues / accidents and / or incidents noted in the file	Met	Daily records are clear and detailed and reflect the care plan. Any changes noted trigger a care plan review. Health information along with specific medications are recorded clearly at the front of each file.
A(ii)	CARE REVIEWS: Has the care needs been reviewed appropriately / regularly and / or when a change has been identified	Met	Evidence that care reviews have been completed and are done so regularly every three months or when changes have been identified.

Total for A, A(i) & A(ii)	100.0%
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**Section A
Additional
notes for the
Provider**

No comment A

Section B Service User & Carer Experience (Discussion & Observation)

Discussion with SU / Carer / Observation of interaction / Activities / Other feedback etc

Select one answer
from the drop
down list below:

Note: To insert a new line, you press the "Alt" key plus the "enter" key

Standard 1 (CQC Outcome 1)		Respecting & Involving Service Users (SU experience)	
a	That service user needs are at the centre of service provision and agreed outcomes are measurable and that the service and support delivered ensures that service users' choices are taken into account in the way in which the service is provided. Service users' privacy, dignity and independence are respected at all times and their (or their carer's) views are taken into account in the way the service is provided.	Met	Service users when spoken with, enjoy attending the day centre and from observation appeared to be enjoying socialising. Staff are friendly and caring towards each individual SU and both staff and the manager are knowledgeable about every persons likes, dislikes and needs. Staff treat everyone with respect and kindness and give them choice of what they wish to do. There was a vegetable patch for them to tend to, crafts, games and a quiet room. Service users are placed at the centre of their care. They are involved in the support planning and it was evident from observation that they were provided with choice and control of what they wished to do.
b	That the service is able to respond to service user choices and service users are provided with appropriate information in appropriate formats and are always involved in making decisions about the way they receive services and are supported to express their views.	Met	
Standard 2 (CQC Outcome 2)		Consent (SU experience)	
a	Where they are able, service users give valid consent to the service they receive. They understand and know they can change any decision that has been previously agreed about their service. And service managers are aware of when to obtain consent, when to take verbal or implied consent and how to support staff in maintaining appropriate records	Met	Staff were very attentive towards the service users and understood consent. One SU with Dementia does not verbally communicate but staff still knew what she wanted and were able to support her. Signed consent documents were present in service user files. Observations confirmed that staff treat service users with dignity and respect at all times.
b	That service user's human rights continue to be respected and are taken into account at all times.	Met	
Standard 3 (CQC Outcome 4)		Care & Welfare of Service Users (SU experience)	
a	Evidence that Service Users (and where appropriate their stakeholders) are involved in their care and support planning.	Met	Service users and their families where required are involved in care and support planning and the decision to attend the day centre. Service users spoken to enjoy attending the day centre and this is clear from observations. It was evident that the staff know each of the service users extremely well and know what they like/dislike and what their level of need is. Evidence seen that the provider regularly reviews support plans to ensure needs and preferences are being met.
b	That the support and service provided safely meets service users' needs and supports service users to achieve their goals, protects their rights, maximises their independence, health and wellbeing and reflects their strengths, abilities and interests.	Met	

Standard 4 Meeting Nutritional needs (SU experience) (CQC Outcome 5)			
a	Evidence that service users are supported to make healthy choices and lead healthy lifestyles and provide access to information about healthy and balanced diet, recognising individual preferences, cultural and dietary requirements.	Met	Care plans clearly state likes and dislikes. Allergies and medication information is clearly stated at the front of the files. Service users are offered healthy choices for lunch at the day centre which include hot and cold options such as salads, jacket potatoes and a full hot meal option. Observations confirmed appropriate infection control/hygiene practices. Staff wore appropriate PPE when dishing up breakfast and lunches and changed PPE when tidying up.
b	Not used	Not assessed	
Standard 8 Management of Medicines (SU experience) (CQC Outcome 9)			
a	That where appropriate service users will have the medicines they are prescribed, at the times they need them, and in a safe way.	Met	No SU files seen required medication assistance from the day centre staff, however any medication that SU's bring with them is safely stored and logged on a MAR sheet when given. Care plans clearly state information on medication that all service users are on at the front of the files. Service users and family members where appropriate are involved in all aspects of the support plans. Staff are appropriately trained and training is refreshed when due. Matrix was viewed, 3 staff have modules about to expire but are
b	That appropriate records are maintained and updated. Staff are in receipt of relevant up to date training.	Met	
Standard 11 Requirements relating to staff recruitment (SU experience) (CQC Outcome 12)			
a	Service users are safe and their health and welfare needs are met by staff who have been appropriately recruited and who have the right qualifications, skills and experience and that there are robust arrangements in place around the appropriate behaviour of staff in relation to their professional conduct and the way that they support service users.	Met	Evidence that staff have the appropriate skills, qualifications and experience to safely look after the service users. Observations confirm that the service users are safe and that their health and wellbeing is met. All files included all nutritional and medical information that may be required. SUs are involved in elements of recruitment where appropriate.
b	That service users are involved in the recruitment and selection process.	Met	
Standard 12 Staffing and Staff Deployment (SU experience) (CQC Outcome 13)			
a	Evidence that the provider ensures that there are sufficient staff to deliver support with the right knowledge, experience, qualifications and skills to provide effective support.	Met	There were the right number of experienced and knowledgeable staff running the day centre. Staff interaction observed was very good, they were respectful and took the time to speak with the service users individually. It was evident that staff were able to communicate effectively to service users with a variety of needs. The service users appeared to like the staff members and interacted well with them. The parent organisation has a robust business contingency plan in place covering their services.
b	That the provider has robust mechanisms in place to manage both expected and unexpected changes in the service.	Met	

Standard 15 Complaints (SU experience)
(CQC Outcome 17)

<p>a That service users and / or their nominated representative know how to complain and can be sure that the provider will listen to and act on their comments and complaints. They know that they will not be discriminated against for making a complaint or raising an issue. The complaints procedure will be accessible to service users and their carers and available in appropriate formats</p>	<p>Met</p>	<p>There have been no complaints from service users but the provider has a robust procedure in place with appropriate response times. Any complaints raised would be appropriately recorded and reported to HCC as per the complaints procedure. There is a file for any comments and complaints to be logged along with actions taken. Compliment cards were displayed on walls of the service.</p>
<p>b That they will maintain adequate records about any comments and complaints, including any relevant and factual information about the investigation, responses, outcomes and actions taken.</p>	<p>Met</p>	

Total for Section B 100.0%

**Section B
 Additional
 notes for the
 Provider**

No comment

Section C Support workers (Observation of Staff Practice & Staff Interviews / Discussions)

Observation of: Dignity / respect / language / attitude / enabling independence

Select one answer from the drop down list below:

Note: To insert a new line, you press the "Alt" key plus the "enter" key

Standard 1 Respecting & Involving Service Users (staff obs. & interviews) (CQC Outcome 1)		
a	That service user needs are at the centre of service provision and agreed outcomes are measurable and that the service and support delivered ensures that service users' choices are taken into account in the way in which the service is provided. Service users' privacy, dignity and independence are respected at all times and their (or their carer's) views are taken into account in the way the service is provided.	Met
b	That the service is able to respond to service user choices and service users are provided with appropriate information in appropriate formats and are always involved in making decisions about the way they receive services and are supported to express their views.	Met
Standard 2 Consent (staff obs. & interviews) (CQC Outcome 2)		
a	Where they are able, service users give valid consent to the service they receive. They understand and know they can change any decision that has been previously agreed about their service. And service managers are aware of when to obtain consent, when to take verbal or implied consent and how to support staff in maintaining appropriate records	Met
b	That service user's human rights continue to be respected and are taken into account at all times.	Met
Standard 3 Care & Welfare of Service Users (staff obs. & interviews) (CQC Outcome 4)		
a	Evidence that Service Users (and where appropriate their stakeholders) are involved in their care and support planning.	Met
b	Evidence that service users know who their support worker is (and key worker if applicable) and how they can contact you as the provider of their service.	Met
Standard 4 Meeting Nutritional needs (staff obs. & interviews) (CQC Outcome 5)		
a	Evidence that service users are supported to make healthy choices and lead healthy lifestyles and provide access to information about healthy and balanced diet, recognising individual preferences, cultural and dietary requirements.	Met
b	Not used	Not assessed
Standard 6 Safeguarding People who use the Service from abuse (staff obs. & interviews) (CQC Outcome 7)		
a	Service users are protected from abuse or the risk of abuse and their human rights are respected and upheld by the provider and their staff understanding their responsibilities under the Local Authority's safeguarding and whistleblowing policies and procedures and ensuring that all staff complete safeguarding training	Met
b	Service users and their carers are supplied with information in appropriate formats relating to safeguarding and how to report concerns and are supported when they have to take part in any safeguarding	Met

Standard 7 Cleanliness & Infection (staff obs. & interviews)			
(CQC Outcome 8)			
a	Service users, where appropriate, experience support in a clean environment that protects them from, and reduces the risk of infection and this is supported by the provider having appropriate arrangements in place for the management and disposal of waste.	Met	There is appropriate training and refreshers for Cleanliness and Infection confirmed. There is a matrix in place that is monitored by the Home Manager, a print out is evidenced in individual staff training files. It was evident through observation that staff were competent and that they showed good practice with regard to infection control and waste management within the day centre. Aprons were worn when dishing up dinners at lunch time and surfaces around the day centre were kept clean and tidy.
b	Where appropriate, service users, carers and visitors are supplied with information in accessible formats relating to infection control. Staff have training with regard to infection prevention and control, and waste management.	Met	
Standard 10 Safety, Availability & Suitability of Equipment (staff obs. & interviews)			
(CQC Outcome 11)			
a	Evidence that equipment is suitable for its purpose, available, properly tested and maintained, used correctly and safely, is comfortable and promotes independence and is stored safely.	Not assessed	Evidence that staff have appropriate manual handling training and refreshers. Matrix viewed showed that all staff were up to date with this. There are no SU's that currently attend the day centre that require this level of support.
b	That staff are appropriately trained on how to use equipment safely.	Met	
Standard 12 Staffing and Staff Deployment (staff obs. & interviews)			
(CQC Outcome 13)			
a	Evidence that the provider ensures that there are sufficient staff to deliver support with the right knowledge, experience, qualifications and skills to provide effective support.	Met	There were the right number of experienced and knowledgeable staff running the day centre. Staff interaction observed was very good, they were respectful and took the time to speak with the service users individually. It was evident that staff were able to communicate effectively to service users with a variety of needs. The service users appeared to like the staff members and interacted well with them. The parent organisation has a robust business contingency plan in place covering their services.
b	That the provider has robust mechanisms in place to manage both expected and unexpected changes in the service.	Met	
Standard 13 Supporting Staff			
(CQC Outcome 14)			
a	Service users are safe and their health and welfare needs are met by staff who are appropriately inducted, and trained and the induction process should be supported by service users wherever possible	Met	Staff receive appropriate induction and probationary period at commencement of employment. Copies of contracts and interview notes were present on files. Regular supervisions are also completed along with monthly staff meetings. Appropriate training and refreshers are completed regularly and these were evidenced on the training matrix. Observations confirmed competency of staff.
b	That staff are supervised at agreed intervals in accordance with their competency and by appropriately qualified staff and receive the development opportunities they need to carry out their role effectively whilst keeping their skills and training up to date.	Met	

Total for Section C 100.0%

**Section C
Additional
notes for the
Provider**

No comment

Section D Support worker/s (Records / Files)

Recruitment Files: Applications / References X2 / gaps in employment
 Induction Records: Meet Skills for Care Common Induction Standards
 Training Records: Mandatory training completed
 Supervision: Regular & appropriate
 Annual; Appraisals: Completed when required includes professional development

Select one answer
 from the drop
 down list below:

Note: To insert a new line, you press the "Alt" key plus the "enter" key

Standard 11 Requirements relating to staff recruitment (CQC Outcome 12)			
a	Service users are safe and their health and welfare needs are met by staff who have been appropriately recruited and who have the right qualifications, skills and experience and that there are robust arrangements in place around the appropriate behaviour of staff in relation to their professional conduct and the way that they support service users.	Met	Evidence that staff are DBS checked and have relevant right to work ID which was verified. Application forms and employment history present and evidence of robust employment process with probationary period which is generic across the organisation. References were present and had been followed up, however had not been signed to verify. Copies of contracts and interview notes were present in files. Staff have sufficient training and refreshers for which there is a matrix in place. Service users are involved in elements of the recruitment where possible but this is not always
b	That service users are involved in the recruitment and selection process.	Met	

Standard 13 Supporting Staff (Induction / Supervision / Training Records) (CQC Outcome 14)			
a	Service users are safe and their health and welfare needs are met by staff who are appropriately inducted, and trained and the induction process should be supported by service users wherever possible	Met	Evidence that staff members understand their roles and responsibilities. Contracts of employment have been issued and signed. Competency and knowledge sheet paperwork was evidenced and signed off. Staff are appropriately inducted and receive regular training refreshers. Regular supervisions and staff meetings are also held.
b	That staff are supervised at agreed intervals in accordance with their competency and by appropriately qualified staff and receive the development opportunities they need to carry out their role effectively whilst keeping their skills and training up to date.	Met	

Total for Section D 100.0%

**Section D
 Additional
 notes for the
 Provider**

No comment

Section E Service User's Home & General Safety

Audit: Observation & Records Audit

Select one answer from the drop down list below:

Note: To insert a new line, you press the "Alt" key plus the "enter" key

Standard 7 (CQC Outcome 8)		Cleanliness & Infection Control
a	Service users, where appropriate, experience support in a clean environment that protects them from, and reduces the risk of infection and this is supported by the provider having appropriate arrangements in place for the management and disposal of waste.	Met
b	Where appropriate, service users, carers and visitors are supplied with information in accessible formats relating to infection control. Staff have training with regard to infection prevention and control, and waste management.	Met
<p>Appropriate training and refreshers confirmed around infection control. It was evident through observation that staff were competent and that they showed good practice with regard to infection control and waste management within the day centre. Aprons and gloves were worn when dishing up dinners at lunch time and surfaces around the day centre were clean and tidy. Hand washing posters were seen also.</p>		
Standard 8 (CQC Outcome 9)		Management of Medicines
a	That where appropriate service users will have the medicines they are prescribed, at the times they need them, and in a safe way.	Not assessed
b	That appropriate records are maintained and updated. Staff are in receipt of relevant up to date training.	Met
<p>No SU files seen required medication assistance from the day centre staff, however any medication that SU's bring with them is safely stored and logged on a MAR sheet when given. Care plans clearly state information on medication that all service users are on at the front of the files. Service users and family members where appropriate are involved in all aspects of the support plans. Staff are appropriately trained and training is refreshed when due. Matrix was viewed, 3 staff have modules about to expire but are</p>		
Standard 9 (CQC Outcome 10)		Safety & Suitability of Premises
a	The provider protects people, staff and others against the risks of unsafe or unsuitable office premises.	Met
b	That the Provider takes into account the specific needs of service users when using any premises and that effective risk management arrangements are in place.	Met
<p>Observation confirmed that the premises was safe and secure for staff and service users. The area was tidy at all times there were no trip hazards. Security doors throughout are buzzer entry and the office area is seperated by a door secured with code lock. There is CCTV in operation for safety and security also. Organisation carries out appropriate risk assessments of the property.</p>		
Standard 10 (CQC Outcome 11)		Safety, Availability & Suitability of Equipment
a	Evidence that equipment is suitable for its purpose, available, properly tested and maintained, used correctly and safely, is comfortable and promotes independence and is stored safely.	Not assessed
b	That staff are appropriately trained on how to use equipment safely.	Met
<p>No service users within the day centre are supported with any transfers with equipment, however staff are appropriately trained and refreshed for this.</p>		

Total for Section E 100.0%

**Section E
Additional
notes for the
Provider**

No comment

Section F (Provider Management, Staff Deployment & QA Systems)

File Audit: QA Report (SU Feedback / Learning and Changes made from QA Data and SU / CW feedback / Complaints / Complaints Policy / Records...
Staffing Audit: Rotas, Robustness / Training & Skills, matching CW to SU

Select one answer
from the drop
down list below:

Note: To insert a new line, you press the "Alt" key plus the "enter" key

Standard 12 Staffing and Staff Deployment (CQC Outcome 13)		
a	Service users and their health and welfare needs are met by management co-ordination of sufficient numbers of appropriate staff that are always available with the right qualifications, knowledge, skills, approach and experience to maintain effective services. The service is adequately supported through a robust, accessible management structure operating at the same time as service provision.	Met
b	That the provider has robust mechanisms in place to manage both expected and unexpected changes in the service.	Met
Standard 14 Assessing & Monitoring the Quality of Service Provision (CQC Outcome 16)		
a	Service users benefit from safe, outcome focused person centred, quality support underpinned by effective decision making and management of risks to their health, welfare and safety. To do this the provider will proactively gather and evaluate information that includes feedback on staff from all stakeholders especially service users and carers in order to monitor and improve the delivery of care and support services.	Met
b	That service users / carers health and social care professionals and staff can raise concerns and make suggestions and that these are listened to and lessons learned are used to improve the quality of services delivered.	Met
Standard 15 Complaints (CQC Outcome 17)		
a	That service users and / or their nominated representative know how to complain and can be sure that the provider will listen to and act on their comments and complaints. They know that they will not be discriminated against for making a complaint or raising an issue. The complaints procedure will be <u>accessible to service users and their carers and available in appropriate formats</u>	Met
b	That they will maintain adequate records about any comments and complaints, including any relevant and factual information about the investigation, responses, outcomes and actions taken.	Met
Standard 16 Records (CQC Outcome 17)		
a	That service users are confident that the records kept by the provider about their service (including those that are required to protect their safety and wellbeing) are accurate and fit for purpose and are used to effectively plan the ongoing care and support with the service user and carer	Met
b	That service user records are held securely and remain confidential in line with the Data Protection Act and the requirements of the Local Authority.	Met

Total for Section F 100.0%

**Section F
Additional
notes for the
Provider**

No comment