



Review Sheet



Last Reviewed
03 Sep '21



Last Amended
03 Sep '21



Next Planned Review in 12 months, or sooner as required.

Business impact



Changes are important, but urgent implementation is not required, incorporate into your existing workflow.

Reason for this review

Change in legislation

Were changes made?

Yes

Summary:

This policy outlines good governance and how a service can continually improve through monitoring and audits. It has been reviewed to include reference to the CQC's way of assessing from August 2021 and includes a new policy statement (4.6) and reference to highlight this within the policy. Existing references also checked to ensure they remain current.

Relevant legislation:

- The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Health and Social Care Act 2008 (Registration and Regulated Activities) (Amendment) Regulations 2015
- Health and Safety at Work etc. Act 1974
- Medicines Act 1968
- General Data Protection Regulation 2016
- Data Protection Act 2018
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)

Underpinning knowledge - What have we used to ensure that the policy is current:

- Author: Information Commissioner's Office, (2021), *Link to the ICO website for Information & Guidance*. [Online] Available from: <https://ico.org.uk/> [Accessed: 3/9/2021]
- Author: CQC, (2021), *How we will assess quality and update ratings from August 2021*. [Online] Available from: <https://www.cqc.org.uk/news/providers/how-we-will-assess-quality-update-ratings-august-2021> [Accessed: 3/9/2021]
- Author: Information Commissioner's Office, (2021), *Accountability and Governance*. [Online] Available from: <https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/accountability-and-governance/> [Accessed: 3/9/2021]
- Author: NHS, (2021), *Data Security and Protection Toolkit*. [Online] Available from: <https://www.dsptoolkit.nhs.uk/> [Accessed: 3/9/2021]
- Author: Royal College of Nursing, (2016), *Clinical Governance*. [Online] Available from: <https://www.rcn.org.uk/clinical-topics/clinical-governance> [Accessed: 3/9/2021]
- Author: Scally, G and Donaldson, L, (1998), *Clinical Governance and the Drive for Quality Improvement in the New NHS in England*. [Online] Available from: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1113460/> [Accessed: 3/9/2021]
- Author: Care Quality Commission, (2021), *Regulation 17: Good governance - Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 17*. [Online] Available from: <https://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-17-good-governance#guidance> [Accessed: 3/9/2021]

Suggested action:

- Encourage sharing the policy through the use of the QCS App

Equality Impact Assessment:

QCS have undertaken an equality analysis during the review of this policy. This statement is a written record that demonstrates that we have shown due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations with respect to the characteristics protected by equality law.



1. Purpose

1.1 To describe what good governance means to HOLISTIC QUALITY CARE LTD and the processes that contribute to it, including Quality Assurance.

The Quality and Quality Assurance Policy and Procedure must be read alongside this policy.

1.2 To specify who has accountability and what action HOLISTIC QUALITY CARE LTD takes to continuously improve services.

1.3 To meet the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 17 Good Governance.

1.4 This policy should be read in conjunction with:

- | Quality Assurance Policy and Procedure
- | Stakeholder Surveys
- | Management Meetings Policy and Procedure

1.5 To support HOLISTIC QUALITY CARE LTD in meeting the following Key Lines of Enquiry:

Key Question	Key Lines of Enquiry
EFFECTIVE	E1: Are people's needs and choices assessed and care, treatment and support delivered in line with current legislation, standards and evidence-based guidance to achieve effective outcomes?
RESPONSIVE	R2: How are people's concerns and complaints listened and responded to and used to improve the quality of care?
SAFE	S2: How are risks to people assessed and their safety monitored and managed so they are supported to stay safe and their freedom is respected?
WELL-LED	W2: Does the governance framework ensure that responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed?

1.6 To meet the legal requirements of the regulated activities that {HOLISTIC QUALITY CARE LTD} is registered to provide:

- | The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- | Health and Social Care Act 2008 (Registration and Regulated Activities) (Amendment) Regulations 2015
- | Health and Safety at Work etc. Act 1974
- | Medicines Act 1968
- | General Data Protection Regulation 2016
- | Data Protection Act 2018
- | Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)



2. Scope

2.1 The following roles may be affected by this policy:

- | All staff
- | Registered Manager

2.2 The following Service Users may be affected by this policy:

- | Service Users

2.3 The following stakeholders may be affected by this policy:

- | Commissioners
- | External health professionals
- | Local Authority
- | NHS



3. Objectives

3.1 To demonstrate the role that HOLISTIC QUALITY CARE LTD and its management plays in strategically leading and managing the service through good governance and continuous learning.

3.2 To ensure that all staff understand the structures and processes in place which contribute to good governance and their role within it.

3.3 To ensure that evidence-based care is used to continuously improve quality through a culture of openness and transparency where lessons are learnt from audit, quality assurance and engagement with all stakeholders.

3.4 To create a structure which facilitates engagement at all points of governance with Service Users.



4. Policy

4.1 HOLISTIC QUALITY CARE LTD Statement

HOLISTIC QUALITY CARE LTD commits to providing safe, high-quality, person-centred Care supported by a clear governance structure which meets the legal responsibilities of HOLISTIC QUALITY CARE LTD, complies with best practice and engages and responds to our staff, Service Users and wider stakeholders. HOLISTIC QUALITY CARE LTD will:

- | Take a human rights-based approach that protects and upholds a Service User's right to privacy, dignity, choice, respect and control
- | Encourage, listen and respond to the views of Service Users, staff and people who have an interest in HOLISTIC QUALITY CARE LTD
- | Promote a culture of openness, honesty and transparency, fulfilling our Duty of Candour responsibilities. Our staff will be knowledgeable and confident to challenge and report risks and concerns
- | Have clearly defined roles and responsibilities to ensure accountability
- | Identify risks in all areas of HOLISTIC QUALITY CARE LTD and will act to remove or reduce these risks
- | Provide measures based in good practice and legislation to quality assure and measure the effectiveness of HOLISTIC QUALITY CARE LTD services learning lessons and improving the service
- | Analyse governance processes to identify themes and trends and take corrective action where required
- | Review all governance processes to ensure that we work innovatively and are effective

HOLISTIC QUALITY CARE LTD follows this policy and procedure to create an environment in which excellence in care will flourish.

4.2 Information Governance

HOLISTIC QUALITY CARE LTD understands it is accountable for compliance with the UK General Data Protection Regulation, and will demonstrate that appropriate technical and organisational measures have been put in place to meet these requirements which are set out in the data protection policies and procedures of HOLISTIC QUALITY CARE LTD.

Our areas of governance comply with the standards and requirements of the Information Commissioner's Office, including registration. Our policies and procedures also give a framework to compliance with both the UK General Data Protection Regulations and the Data Security Protection Toolkit.

These additional policies are the framework for good governance around which HOLISTIC QUALITY CARE LTD manages information.

4.3 Accountabilities - Holistic Quality Care Ltd will:

- | Have responsibility for scrutinising governance systems and processes at HOLISTIC QUALITY CARE LTD through quality assurance and audit
- | Ensure continuous improvement
- | Have an organisational structure in place that defines leadership and accountability
- | Ensure that there is accessible engagement with Service Users, HOLISTIC QUALITY CARE LTD and staff to ensure that their views and feedback shape the service

4.4 Responsibilities - The Registered Manager

- | Be responsible for overall management of HOLISTIC QUALITY CARE LTD
- | Seek and respond to the views of Service Users, staff, health professionals, advocates and other interested parties
- | Delegate responsibility and hold staff to account for agreed actions
- | Have governance systems that are effective and fit for purpose and achieve continuous improvement
- | Report statutory notifications and escalate concerns to Anbara Haji Abdullahi
- | Take a values-based approach to recruitment and promoting staff retention
- | Promote an open, transparent culture and learning environment
- | Ensure that there is ongoing compliance with regulatory and contractual requirements



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- | Ensure compliance with policies and procedures
- | Ensure that there are enough staff with suitable skills, experience and knowledge
- | Quality assurance processes and practice
- | Review and learn from accidents, incidents (including safeguarding), complaints and share this learning with staff
- | Act on results of audits and reviews of the service
- | Collate, report and use data to inform stakeholders of the quality of the service
- | Seek expert advice by working with other health professionals
- | Work within codes of conduct and act as a role model at all times

4.5 Responsibilities - Care Worker

- | Work within their job description and code of conduct
- | Provide the Care as planned
- | Raise concerns and suggestions in a timely manner
- | Identify personal learning needs
- | Follow the policy and procedure
- | Work within codes of conduct and act as a role model at all times

4.6 Regulatory Inspections

HOLISTIC QUALITY CARE LTD is regulated by Care Quality Commission and will ensure that governance systems are in place to ensure the safe and effective running of the service, in order to provide high quality Care to its Service Users.

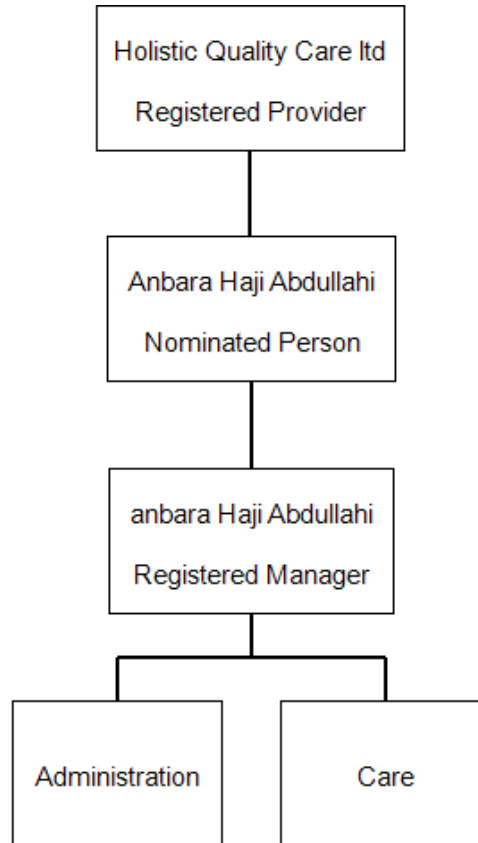
HOLISTIC QUALITY CARE LTD recognises that how the CQC regulates is evolving, especially since the coronavirus pandemic, and will continue to monitor updates in relation to this. Information on the current changes to the way CQC are monitoring services can be found [here](#).



5. Procedure

5.1 Organisational Chart

HOLISTIC QUALITY CARE LTD has the following Organisational Chart in place. This details the staffing structure within the service.



Staff should refer to the HOLISTIC QUALITY CARE LTD Business plan for further details around staffing details and strategic plans.

5.2 Accountability

- | HOLISTIC QUALITY CARE LTD has a clear, structured approach to governance. All staff have a line manager and defined accountabilities documented in job descriptions
- | Each member of staff (including all management levels) is subject to supervision and annual appraisal linked to the Business Plan at HOLISTIC QUALITY CARE LTD
- | Where there is accountability for informing external stakeholders such as regulatory bodies, the NHS and local authority, all roles and responsibilities are documented
- | Staff will ensure that they work within their own professional codes of conduct at all times and HOLISTIC QUALITY CARE LTD will not hesitate to contact professional bodies to notify areas of proven concern within the bodies' remit
- | All staff at HOLISTIC QUALITY CARE LTD have accountability for ensuring that they work within HOLISTIC QUALITY CARE LTD and Leeds City Council safeguarding procedures, and any poor practice or failure to follow the procedures will result in disciplinary action

An organisational structure and accountability chart can be found within the business plan of HOLISTIC QUALITY CARE LTD.

5.3 Communication



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HOLISTIC QUALITY CARE LTD senior leadership will ensure clear and transparent communication channels throughout the organisation and with all Service Users (and those legally responsible for them), staff, and other stakeholders.

Information will be appropriate, accessible, timely and provided in a format which meets the needs of the recipient.

The website of HOLISTIC QUALITY CARE LTD and its internal IT systems will be kept up to date with the latest information for the service.

Further information can be found within the Communication Policy at HOLISTIC QUALITY CARE LTD.

5.4 Involvement of Service Users, Their Carers and Those Legally Responsible

- | In order to ensure governance is effective and holistic, Service Users will be involved in determining the quality, timeliness and level of support provided, and inform the results of any governance processes
- | HOLISTIC QUALITY CARE LTD will support all Service Users' meaningful involvement and will ensure they are not discriminated against because of their age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation
- | HOLISTIC QUALITY CARE LTD will listen to Service Users and HOLISTIC QUALITY CARE LTD will make the changes needed after analysing the information
- | Systems, such as surveys, will be used to gain Service User views at least annually
- | Any changes made will be fed back to the Service User and recognition given to their views
- | This process is central to the concept of 'person-centred care' and continuous improvement
- | HOLISTIC QUALITY CARE LTD will work to the Accessible Information Standards to ensure equality for the people who use its services
- | HOLISTIC QUALITY CARE LTD has an accessible complaints policy in place and any complaints will be dealt with on both an individual basis and reviewed as a collective for trends and patterns

Involvement of HOLISTIC QUALITY CARE LTD Staff and Relevant Agencies/Bodies

- | As well as Service Users, HOLISTIC QUALITY CARE LTD will meet and engage with stakeholders to consult, gain feedback and comment on the service and any changes to it
- | Formal and informal feedback will be recorded and analysed and used to make necessary improvements
- | HOLISTIC QUALITY CARE LTD will ensure that all stakeholders receive feedback on their input

5.5 Quality Assurance and Audit

anbara Haji Abdullahi is responsible for quality assurance within HOLISTIC QUALITY CARE LTD.

The quality assurance processes of HOLISTIC QUALITY CARE LTD self-assess the service to check that acceptable standards are met and exceeded. Those standards are based on best practice, legislative and regulatory requirements, and the input of Service Users.

anbara Haji Abdullahi will report to senior leadership the results of quality assurance for overall scrutiny and decision making, undertaking audits in areas including health and safety, medication management, infection control, care planning, safeguarding, environmental etc.

anbara Haji Abdullahi will undertake reviews and monitor systems and processes to identify where quality or safety issues are being compromised and will respond appropriately and without delay. HOLISTIC QUALITY CARE LTD will do this by:

- | Using best practice, including NICE guidelines and CQC regulations to benchmark standards and performance
- | Listening and including the views of the Service User
- | Putting in place an audit cycle and review themes, trends and risks from audit at senior management level

Details of the quality assurance and audit processes can be found within the Quality and Quality Assurance Policy and Procedure of HOLISTIC QUALITY CARE LTD.

5.6 Risk Management

HOLISTIC QUALITY CARE LTD understands that risk management is about minimising risks to Service Users by:

- | Identifying what can and does go wrong during Care
- | Understanding the factors that influence this



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- | Learning lessons from any adverse events
- | Ensuring that action is taken to prevent recurrence
- | Putting systems in place to reduce or eliminate risks

Within HOLISTIC QUALITY CARE LTD, we will manage risk by:

- | Reviewing complaints, accidents and incidents, near misses, safeguarding and whistleblowing concerns
- | Actively learning from mistakes by reviewing every incident or near miss, when it arises, investigating why it happened, how it happened, who was involved and create an action plan that we will follow to stop it happening again. The review of all incidents will be analysed to identify themes or trends so that this will also evidence whether HOLISTIC QUALITY CARE LTD is learning from incidents

5.7 Staff Management

- | Staff will be supervised in line with the Supervision Policy and Procedure and this will be recorded and evidenced
- | The supervisions will contain relevant discussions about specific issues of concern, will inform the governance process and identify best practice and areas that need to be redressed
- | Staff will be encouraged to share views and opinions and be involved in Care Planning and the development of ways of working
- | Staff with accountability for particular areas of work will be informed of these responsibilities and provided with tools and guidance to ensure that they deliver the identified oversight responsibility
- | Role-specific codes of conduct will be used as a means of monitoring performance and staff standards

5.8 Continuing Professional Development

- | Staff skills will be regularly reviewed and where additional training is required, this will be identified and provided
- | Opportunities will be provided to widen skills, understanding and knowledge
- | This will increase the ability of the staff, and ultimately, HOLISTIC QUALITY CARE LTD, to provide effective, timely and responsive support
- | Where incidents arise, a root cause analysis will assess whether training needs to be reviewed

5.9 Remediating Underperformance

- | Any shortfalls in Care provision will be identified through the governance process
- | The reasons for the shortfall will be analysed and if the issue was the result of poor performance by staff it will be addressed either through supervision, additional training, disciplinary procedures or ultimately dismissal
- | If there are implications for staff teams it will be addressed through training, supervisions or team meetings
- | Risk assessments, Care Plans and ways of working will be revisited and updated to reassess the issues and develop more robust processes
- | External resources may be identified to assist with the delivery of training or to provide guidance on improving practice
- | HOLISTIC QUALITY CARE LTD will ensure that its staff are aware of key policies and procedures such as Whistleblowing, Safeguarding, Accident and Incident Reporting and that they adhere to these policies included in the QCS Management System
- | All staff have a responsibility for staying up to date with HOLISTIC QUALITY CARE LTD policies and procedures and checking the QCS online or mobile app for updates and documents
- | anbara Haji Abdullahi has responsibility for ensuring that the policies and procedures within the QCS Management System are customised and reflect all aspects of governance processes within HOLISTIC QUALITY CARE LTD and that staff have read and understood the documents

5.10 Record Keeping and Personal Information

HOLISTIC QUALITY CARE LTD will securely keep and maintain accurate, complete and detailed records of Service Users and any information relating to the planning and delivery of care and treatment (including policies and procedures, audits and government arrangements) to ensure a clear and transparent audit of

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Service User care and support and identified needs, wishes and consent.

Where a Service User is assessed as lacking capacity, full details of the process and subsequent decisions will be recorded in full.

Complete records will also be kept of staff including their suitability for the post through recruitment, training and continual development, commendation and disciplinary actions.

All information is kept in line with data protection law and disposed of when justified retention needs have come to an end, in adherence with the UK General Data Protection Regulations 7 Principles of:

- | Lawfulness, fairness and transparency
- | Purpose limitation
- | Data minimisation
- | Accuracy
- | Storage limitation
- | Integrity and confidentiality (security)
- | Accountability

All information will be kept securely and accessible only by authorised persons.

5.11 Evaluation

The senior management team at HOLISTIC QUALITY CARE LTD will evaluate this policy and procedure annually, utilising stakeholder feedback, quality assurance and monitoring.

Where information comes to light which requires change before this point, HOLISTIC QUALITY CARE LTD will make changes and distribute the updated policy when the changes are required.

**6. Definitions****6.1 Governance**

- | A framework through which organisations are accountable for continually improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in care will flourish

6.2 Root Cause Analysis

- | A method of problem-solving used for identifying the root causes of faults or problems. It is a useful tool following safeguarding incidents, complaints, accidents, near misses or any other incidents that cause concern

6.3 Information Governance

- | Data Security and Protection Toolkit
 - | The Data Security and Protection Toolkit is an online self-assessment tool that allows organisations to measure their performance against the National Data Guardian's 10 data security standards
- | UK General Data Protection Regulation (UK GDPR)
 - | UK GDPR has replaced previous data protection rules and has brought up to date the laws that protect the use of individuals' personal information
- | Information Commissioner's Office
 - | The UK's independent authority set up to uphold information rights in the public interest, promoting openness by public bodies and data privacy for individuals

6.4 Accessible Information Standard

- | From 1st August 2016 onwards, all organisations that provide NHS care and/or publicly funded adult social care are legally required to follow the Accessible Information Standard. The Standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of patients, Service Users, carers and parents with a disability, impairment or sensory loss - (NHS England)



Key Facts - Professionals

Professionals providing this service should be aware of the following:

- | Staff will have regular supervisions and HOLISTIC QUALITY CARE LTD will have an appraisal process in place so that staff understand what they are accountable for
- | HOLISTIC QUALITY CARE LTD has processes in place where Care practices are identified, reported and monitored and actions are taken to improve practice
- | All staff have responsibility for following processes and procedures and using appropriate recording methods, which is all part of robust governance procedures
- | HOLISTIC QUALITY CARE LTD consistently uses root cause analysis following any incidents, including safeguarding incidents, to understand lessons learnt and prevent issues arising again



Key Facts - People affected by the service

People affected by this service should be aware of the following:

- | You will be involved and your opinions sought regarding the care and support provided
- | HOLISTIC QUALITY CARE LTD has a complaints procedure that we will share with you in a way that makes it easy for you to tell us when something is wrong



Further Reading

As well as the information in the 'underpinning knowledge' section of the review sheet we recommend that you add to your understanding in this policy area by considering the following materials:

Skills for Care offers a suite of resources to support with roles and responsibilities alongside governance care guides for social care:

<https://www.skillsforcare.org.uk/Leadership-management/managing-a-service/roles-and-responsibilities/Roles-and-responsibilities.aspx>

SCIE - Guide 34 - Practice development - Collaborative working in social care (SCIE, 2010) - SCIE has identified collaborative methodology as one of many ways of implementing change based on evidence from research and practice. The method presented here has been adapted for social care from the NHS model and represents a simple approach to change management:

<https://www.scie.org.uk/publications/guides/guide34/>

NHS Improvement - Root Cause Analysis - Using five whys:

<https://www.england.nhs.uk/improvement-hub/wp-content/uploads/sites/44/2015/08/learning-handbook-five-whys.pdf>

SCIE - Guide 38 Social Care Governance (SCIE, 2011) - although not updated since 2011, this workbook provides some clear governance practices for England:

<https://www.scie.org.uk/publications/guides/guide38/>

HOLISTIC QUALITY CARE LTD Quality and Quality Assurance Policy and Procedure



Outstanding Practice

To be ' outstanding ' in this policy area you could provide evidence that:

- | HOLISTIC QUALITY CARE LTD uses best practice resources to inform development and evidence that governance drives improvement
- | Accountability and responsibility for governance is widely known and people are actively seeking responsibility
- | Service improvements can be directly attributed to the governance processes
- | HOLISTIC QUALITY CARE LTD has evidence of being exceptionally open and transparent in the area of governance
- | Where mistakes or errors are identified through governance processes, they are addressed in a timely manner and they do not reoccur
- | External organisations are involved in governance structures at HOLISTIC QUALITY CARE LTD
- | HOLISTIC QUALITY CARE LTD consistently uses root cause analysis following any incidents, including safeguarding incidents, to understand lessons learnt and prevent issues arising again
- | The wide understanding of the policy is enabled by proactive use of the QCS App



Forms

Currently there is no form attached to this policy.