

Insert logo here

Good Governance Policy

This document is uncontrolled when downloaded or printed

Reference number	
Version	
Date ratified	
Issue date	
Review date	

Contents

1	Purpose
2	Responsibilities
3	Legislation & Regulation
4	Quality Assurance Frameworks

1. Purpose

[INSERT HOME/COMPANY NAME] is committed to delivering quality services. Our goal is to offer continuous improvement, ensuring effectiveness, efficiency, and value. We will be achieved within a framework of equality and values that promote the rights and desires of the people who we have the pleasure of caring for.

The management of [INSERT HOME/COMPANY NAME] believes that, the ongoing monitoring, evaluating, and learning of practice is essential in striving for quality standards, which will have a direct impact on care delivery and outcomes.

2. Responsibilities

The Nominated Individual: is responsible for the implementation of this policy in its entirety. They are a key contact for the service.

The Registered Manager is responsible for

- The implementation of this policy
- The monitoring and implementation of the Statement of Purpose.
- Ensuring all audits and monitoring processes are carried out
- The findings of subsequent audits are actions upon
- All action plans are addressed each month and progress is recorded
- To keep individuals internal and external of the company up to date.

The Deputy Manager: is responsible for implementing this policy in the absence of the manager.

All Staff: are responsible for ensuring this policy is adhered to at all times.

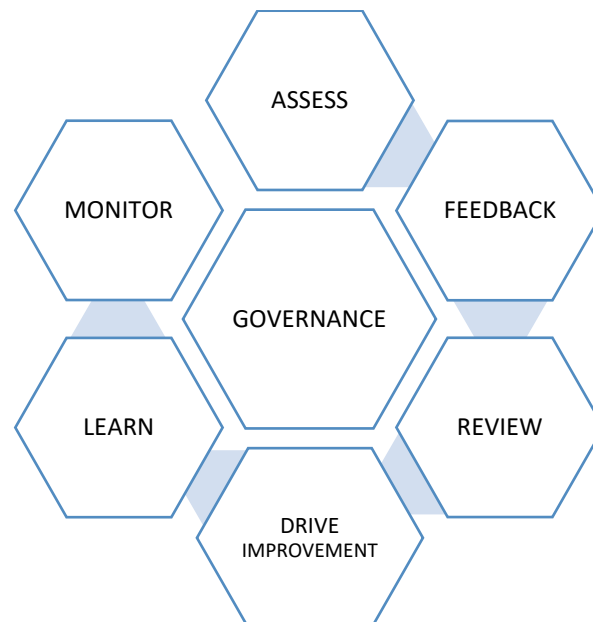
3. Legislation and Regulation

Health and Social Care Act 2008
Regulation and Inspection of Social Care (Wales) Act 2016
Public Services Reform (Scotland) Act 2010
Social Services and Well-being (Wales) Act 2014
Adult Support and Protection (Scotland) Act 2007
Adults with Incapacity (Scotland) Act 2007
Health and Safety at Work Act 1974
Safeguarding Vulnerable Groups Act 2006
Mental Capacity Act 2005
Mental Health Act 1983
Equality Act 2010

Data Protection Act 1998/GDPR 2018
COSHH Regulations 2002
Controlled Drugs Reg 2013
Food Safety Act 1990
Medicines Act 1968
Misuse of Drugs Act 1971

CQC Regulatory focus: Regulation 17 Good Governance

Sets out that Providers must provide a written report to CQC setting out how they assess, monitor, and improve quality and safety of their service. Providers must have effective governance, quality assurance and auditing systems and processes.



4. Quality Assurance Frameworks

Externally

[INSERT HOME/COMPANY NAME] work within several externally imposed quality frameworks that define standards. The most important of these include:

- Outcomes set by the CQC
- Other regulatory standards, e.g. food safety

In general, these external quality frameworks all aim to ensure that quality is built into services through setting and implementation of standards, through processes for review, and through monitoring to ensure that services meet the needs of service users and other stakeholders.

Internal

[INSERT HOME/COMPANY NAME] is aware that other key aspects of quality assurance include mechanisms for the monitoring or auditing of services to ensure they are being delivered as originally intended. These include:

- Spot checks
- Monthly audits, such as:
 - Complaints
 - Incident and accidents
 - Care plans
 - Health and Safety
 - Recruitment processes
 - Medication
 - Infection control

As part of this process audits are used to identify good practice and areas of improvement required.



- Satisfaction surveys – service users’ questionnaires, family/advocates questionnaires, stakeholder questionnaires
- Comprehensive policies and procedures which are regularly reviewed considering changing legislation

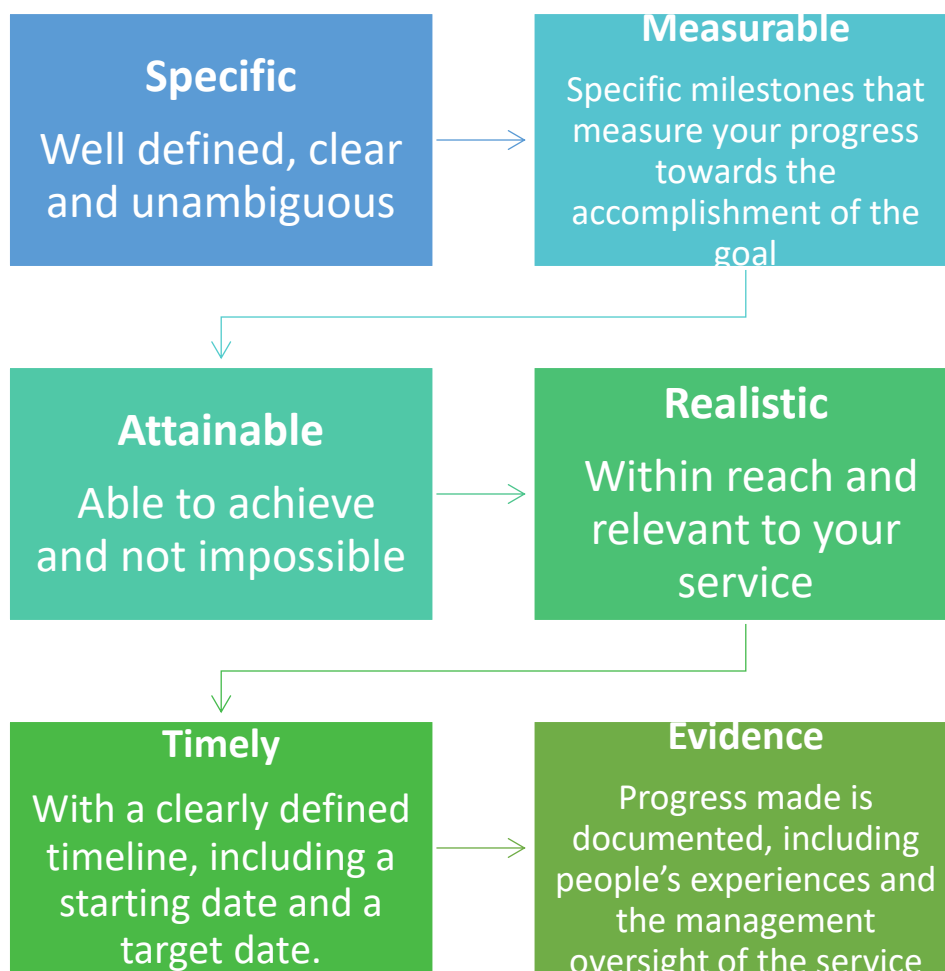
Service User Involvement

- To ensure that the Quality Assurance processes are embedded into practice it is essential that we obtain service user feedback. This feedback must be taken on board and reviewed to ensure we act on this and learn from our mistakes.

- [INSERT HOME/COMPANY NAME] 's main aim is to provide a service that delivers quality care to people in their own homes. This will be achieved through a professional service in which we will support service users and enable them to be involved in the following:
- Consultation
- Questionnaires and surveys
- Suggestions
- Complaints
- Meeting attendance

Action planning

All of the findings through the governance framework will formulate part of the action plan and be worked on by the team to improve standards. The following approach will be taken within the action plan.



This will ensure an effective plan that allows a consistent approach to quality improvement and monitoring.

Equality impact assessment checklist		Yes/No?	Comments
1.	Does the procedural document affect one group less or more favourably than another on the basis of:	No	
	• Race	No	
	• Ethnic origins (including gypsies and travellers)	No	
	• Nationality	No	
	• Gender	No	
	• Culture	No	
	• Religion or belief	No	
	• Sexual orientation including lesbian, gay and bisexual people	No	
	• Age	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are there any exceptions valid, legal and/or justifiable?	N/A	
4.	Is the impact of the procedural document likely to be negative?	No	
5.	If so can the impact be avoided?	N/A	
6.	What alternatives are there to achieving the procedural document without the impact?	N/A	
7.	Can we reduce the impact by taking different action?	N/A	

If you have identified a potential discriminatory impact of this procedural document or need advice, please refer it to the Nominated Individual.