# Adult Social Care Quality Assurance

### e-newsletter 10



# Hello all!

Welcome to the tenth edition of our quality assurance e-newsletter. This e-newsletter aims to provide support to everyone in Adult Social Care (ASC), from frontline practitioners to leads and managers – and offer an insight into the ongoing work aimed at developing our quality assurance approach.

We also aim to consider and reflect on the impact of this work on ASC as well as on those drawing on our care and support.

In addition, we want to foster discussions and create avenues for engagement, facilitation participation and collaboration.

Lastly, I also want to wish everyone a happy festive season and a Merry Christmas to those who celebrate. Let's work towards our collective New Year's resolution, "Quality is not an act, it is a habit."

### **SUPERVISION MATTERS**

We have launched our supervision surveys for both *supervisees* and *supervisors* to give you an opportunity to have your say about the supervision that you receive and/or provide. There are two separate surveys depending on whether you are a supervisee or a supervisor. Supervisors will have the option to complete both the supervisor and supervisee survey if they chose to do this.

Each survey only *takes 10 minutes to complete*. Your feedback is incredibly important to help us shape a supervision offer that gives you what you need, when you need it.

### Who is it for?

The surveys are for practitioners and managers in Support & Safeguarding, CLDS, CYPDS and Mental Health Services (Section 75 Social Workers). We encourage practitioners and managers of all levels in the relevant service areas to complete the survey.

For now, the supervision surveys are aimed at those in the operational teams, those who engage in practice and those who manage practitioners. However, we are also planning surveys for colleagues in other areas and roles to ensure that no one is left oud everyone gets to have their say.

#### Why do it now?

We haven't conducted a supervision survey since our supervision policy was updated a couple of years ago. The policy needs to be reviewed and updated as it does not currently capture our work on equality work or our efforts in implementing trauma informed practice, amongst other initiatives. Your feedback will be helpful in reviewing our supervision policy as well as support us in shaping our future approach.

#### Worried about sharing your feedback?

We want to reassure you that your feedback will be treated with *sensitivity and integrity to help retain your anonymity*.

We ask people about their teams/roles for the purpose of analysing feedback through the lens of each team/role. The same applies to protected characteristics. However, we have provided a "**Prefer not to say**" option for those who choose not to disclose such information. Importantly, selecting this option doesn't influence the survey questions or the extent to which you share information.

This survey is *not* mandatory, however the more responses we receive, the more accurate our understanding of supervision will be, and we will be better equipped to take the necessary actions across ASC to improve our current offer.

There is a section at the end for comments / reflections where you can add anything you would like to share which has not been captured in survey questions. Please feel free to use this section to express your views freely.

#### How to complete the survey?

It is so easy, you click on one of the links below, depending on whether you are a supervisee or supervisor, and answer the questions before submitting.

Supervisee Survey: https://forms.office.com/e/Y28T2ZW1Hs

Supervisor Survey: https://forms.office.com/e/YN7m2XgS7E

### The deadline for completion has been extended to Friday 12 January 2024.

If you have any questions or experience any issues when filling out the survey, please do not hesitate to get into contact with Roisin Harper (roisin.harper@camden.gov.uk) who will be able to assist you with your query. After receiving and processing the responses, it will be analysed and fed into our Quality Action, Learning and Development and Workforce Development Plans.

The board has committed to each service nominating a "**Story Gatherer**" to help us to capture stories of difference that demonstrate best practice and outcomes for those drawing on care and support.

## **QUALITY ASSURANCE FRAMEWORK (QAF)**

We are delighted to share with you that we have approved the first version of the Quality Assurance Framework at this month's Quality board meeting.

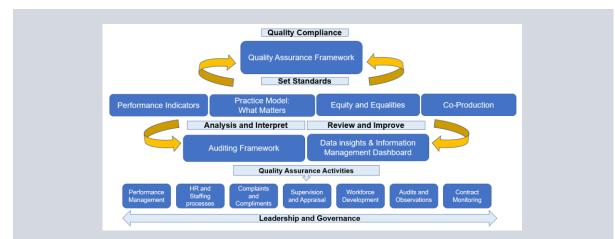
### Purpose of a Quality Assurance Framework

The main outcomes of quality assurance are to enable managers and staff to:

- measure outcomes and consider whether practice and service delivery actively "make a difference" to adults drawing on care and support, their carers and families
- understand and quantify the impact of our What Matters approach on people drawing on care and support and their families
- set appropriate standards and benchmarks and model excellence
- recognise the strengths and weaknesses in service provision and identify actions to develop and improve services
- reflect critically on the quality of social care practice and service provision
- encourage and inform **debate**, **discussion**, **and challenge** so the division can address issues, find solutions, and ultimately improve services and outcomes
- become a learning organisation where staff are aware of expectations and feel supported to work to a high standard of practice
- provide ownership for standards and a shared common purpose so that the staff understands what is expected of them and can take responsibility in relation to quality
- Identify opportunities and risks in and feed into commissioning delivery

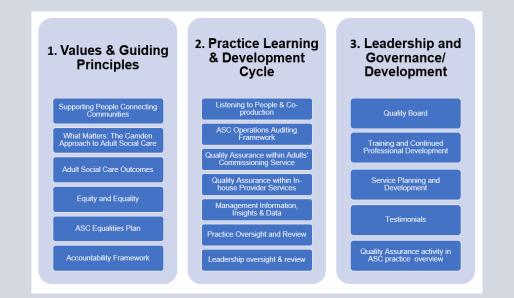
### Quality assurance Framework (QAF) Structure

A QAF is a way of ensuring we are compliant in relation to quality. However in order to measure quality, we need to have very clear indicators and standards for what quality looks like. This needs to be reflective of "What Matters" to people who draw on care and support, carers and families. There is development work happening across ASC which will shape what quality looks like, how we deliver on this and therefore how we measure it, for example the refresh of the "What Matters" approach and development of our data driven management information dashboard. Therefore the QAF will be updated on a quarterly basis to ensure we include these pillars of quality within the framework once they are established.



### **Quality Assurance Overview**

We are in the process of adding the complete QAF to the ASC Practice Guide to make it more accessible and searchable. Here is an overview of the sections which make up the framework.



We look forward to sharing more with you about what the QAF will look like in practice, what the implementation of it will mean for you in your role and the impact it will have on people who draw on care and support, carers and their families.

### **MENTAL HEALTH: QUALITY UPDATE**

At the December's Quality Board, *Ian Sherriffs (Head of Services for Ageing and Mental Health)* provided an overview of the approaches used to monitor quality, areas of improvement and areas of focus for mental health Section 75 arrangements.

### Some of the processes to ensure quality practices are:

- Monthly service managers meetings senior members of S75 teams meet and discuss current issues, and share experiences of good practice.
- Quarterly S75 Meetings a range of Social Care and Health performance indicators are reviewed including both Qualitative and Quantitative measures.
  Ongoing developments focus around quality of quarterly data with an increased emphasis on ownership within services.
- NLMPH monthly and quarterly performance reports a range of indicators such as waiting time for allocation, dialog+, and risk assessment are included in board reports. S75 performance is to be reported quarterly from Q3.
- Complaints and Compliments collated within C&I via the feedback email address.
- Commissioning arrangement with NCL requires monthly reporting on a range of quality measures.
- Partnership safety huddle reviews safety incidents across the partnership including serious incidents, deaths, Investigation responses and training compliance. This includes S75 services.
- Clinical Fridays senior management conducts unannounced visits to services on weekly basis to discuss a range of topics highlighting areas of learning and celebrate successes. Outcomes of clinical Friday shared with all staff on weekly basis.

### Steps taken to improve Quality Assurance in past six months:

- Monthly data sharing agreement established between C&I Business Manager and Camden Data Analyst for care act assessments, reviews, and carers assessments. Trends, gaps, and areas of good practice to be discussed in the new monthly S75 Team Manager Forum, which also incorporates a Quality Management System approach across the partnership.
- Lorna, Mental Health Practice Development Lead has developed training programme for MH services and individuals based on improvement areas highlighted in Belinda Oates Audit with ongoing efforts to embed learning.
- Addressing differences in complaints and compliments between C&I and Camden MH service provision through facilitated meetings between the two teams and sharing data
- Work has started across Camden and C&I to improve accessibility and quality of safeguarding data.
- Localised documentation audits within C&I for example Older Adults, this includes review of social care offer. Required expansion across other S75 services.
- CRFD and escalation focus on Camden specific data set that will identify escalation and improve efficiency and service user experience.

### Areas of focus and how they are being/ going to be addressed:

• Social Work performance data – accessibility and processes across partnership has been unclear, this is being addressed through new relationship between business

manager and data analyst and expansion of performance accountability meetings with service team managers.

- Service users reviewed in timely manner large number of social care reviews are overdue. Individual service level action plans to be created to address.
- Number of carers assessments low number of identified carers and carer assessments taking place within MH services. Work has begun in linking in with carer leads with C&I to developing this area.
- Voice of people drawing on care and carers missing qualitative data and accounts from service user and carers of what difference the MH social work input has made. Experts by Experience required present for large scale forums but needed at more local level.
- Monitoring of S117 Oversight of s117 has been variable, Business Manager developing processes to improve reporting and monitoring on monthly basis.

The board reflected on some of the similarities in relation to areas of focus such as reviews and voice of people and carers which also apply to other areas. There was consideration given for how we can think about and respond to these areas systematically to create collective impact and equity of experience across ASC.

I hope this e-newsletter continues to provide useful information about Quality Assurance in ASC. If you want to read our previous e-newsletters, please visit <u>here</u>.

If anyone has any questions or suggestions, please do reach out to me, Roisin Harper, our ASC Quality Assurance Lead, your head of service or your manager.

With best wishes,

Jamie Spencer Head of Insight, Quality and Financial Services