Policy Name	Module
Good Governance	**Operations**

Statement of purpose

Springhill Care Ltd recognises our duty and responsibility under the *Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 17 Good Governance, Care Quality Commission (CQC) Fundamental standards* and other relevant legislations, to ensure that we have effective governance systems in place to constantly monitor and improve the quality and safety of our care service.

Springhill Care Ltd understands that good governance is the recognition of and the maintenance of good and safe practice, accountability, learning from our mistakes, transparency and continually improving the quality of our service to the people we support and for our Staff.

The purpose of this policy is to provide clear information and procedures in how the management of the organisation is structured and organised to meet governance arrangements.

Good governance is not defined by a single task, but rather, a series of processes that develop a robust picture of the organisation's overall governance. These processes are outlined within this policy and should be used to deliver high quality services and to help to improve where shortfalls have been identified.

Springhill Care Ltd acknowledges that no matter how well we achieve our aims and objectives, there is always room for improvement. Therefore, we shall continuously seek practices and environments that are safe, effective, caring, responsive and well-led.

As part of our quality assurance monitoring processes, this policy shall be reviewed at least annually by Springhill Care Ltd Registered Manager.

It is the overall responsibility of the Registered Manager to ensure that all Staff have read and signed (as understood) this policy for Springhill Care Ltd, and that it is implemented consistently in daily practice. It is the overall responsibility of every Staff member to follow this policy and procedure. Failure to do so may lead to disciplinary action.

A current copy of the policy will be available electronically and in the Office.

This person accountable for this Policy/Procedure is Kwaku Bosu.
This Policy / Procedure was last updated on 31/03/2023.
This Policy / Procedure is due to be reviewed on 30/03/2024.

What is Good Governance?- Social care governance is a framework for making sure that social care services provide excellent ethical standards of service and continue to improve them. Our values, behaviours, decisions and processes are open to scrutiny as we develop safe and effective evidence-based practice.

Good governance means that we recognise our accountability, we act on lessons learned and we are honest and open in seeking the best possible outcomes and results for people.

✓ *Definition taken from the Social care governance: a workbook based on practice in England. Available at the following website:*
   https://www.scie.org.uk/publications/guides/guide38/files/guide38.pdf)

Springhill Care Ltd believes that the organisation and all of our employees have a responsibility for the quality of the services that we provide (this includes service user involvement).

We recognise that achieving high quality services and positive outcomes for both our Staff and Service Users, we must work in partnership to continually develop and improve our services, through:

✓ Promoting public, Staff and Service User involvement;
✓ Robust organisational structures and processes;
✓ Promoting safety and effectiveness, to include Staff support, training and development to provide effective services;
✓ Promoting the quality of service provision through policies and procedures to enable continuous improvement.

Springhill Care Ltd approaches to the overall good governance of our services are to ensure:

✓ There is a clear focus on our organisation's purpose and outcomes for our Service Users;
✓ Clarity of roles and organisational functions;
✓ The management of risk and transparency in decision-making;
✓ The engagement with key stakeholders;
✓ Clear accountability and ownership of practice.

Springhill Care Ltd will:

✓ Take a human rights-based approach that protects and upholds a Service User's rights to privacy, dignity, choice, respect and control.
✓ Encourage, listen and respond to the views of Service Users, Staff and of others whom have an interest in Springhill Care Ltd.
✓ Promote a culture of openness, transparency, fulfilling our Duty of Candour responsibilities. Our Staff are 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 Springhill Care Ltd and will act to remove or reduce these risks.
✓ Analyse governance processes to identify themes and trends and take corrective action where required.
✓ Review all governance processes to ensure that we work annotatively and are effective.

Accountabilities & Responsibilities

Springhill Care Ltd recognises that appropriate, professional leadership is essential to support sound decision-making and improving practice and service delivery.

There are specified roles within the organisation and externally that cover specific tasks to enable good governance.
Where there is accountability for informing external stakeholders or the involvement of other organisatons about any aspect of Springhill Care Ltd, accountability will be documented.

All Staff at Springhill Care Ltd will work within their professional Codes of Practice at all times.
All Staff at Springhill Care Ltd have accountability for ensuring that they work within the organisation's safeguarding procedures, and any poor practice or failure to follow these procedures will result in disciplinary action.

Springhill Care Ltd will ensure the consistent compliance of statutory requirements, such as Data Protection Act 2018, General Data Protection Regulation and from the Information Commissioners Office (ICO).

The following is Springhill Care Ltd management structure:

Director / Registered Manager / Nominated Individual - Kwaku Bosu

Kwaku is responsible for the Regulated Activity of Personal Care. This means he is the accountable person for Springhill Care Limited and needs to ensure that CQC regulatory frameworks, standards and best practice are being following throughout the organisation at all times. He will be responsible for the hiring and inducting of new staff in line with the recruitment policy and ensuring that they are supported to carry out their daily duties to a high standard. Kwaku will be carrying out the initial assessments of new clients and creating their person centred care plans with regular reviews. He will be responsible for the smooth running of the service and producing reports and following data schedules to support with organisational monitoring and compliance with the CQC, including carrying out regular audits and financial reviews.

Accountabilities & Responsibilities

Springhill Care Ltd also recognises that without our dedicated care and support team, the organisation will not be able to deliver high quality care or improve our services effectively.
The following is Springhill Care Ltd employee structure:

Care Co-ordinator – Will carry out and be responsible for the scheduling of care calls and visits according to the clients preferred times as detailed in their care plans and the staff available on the rota each day. Will aim to match clients with support workers who have similar interests and personality traits to facilitate the building of good working relationships. Will be a main point of contact for staff who may call the office with questions and queries on their day to day duties or concerns and problems they may have whilst supporting the client. Will be responsible for booking in and allocating annual leave dates, covering calls when support workers call in sick, and overall managing the daily schedule so that the clients get the support they want and need.

Administrative Staff- Responsible for general admin duties in the office and answering enquiries over the phone and by email. Admin staff will be responsible for tracking finances and company spending in order to produce information and reports as and when required. They will also be managing staff wages and expenses and Client accounts.

On-call Staff- Handling staff and Client enquiries and needs outside of regular office hours, to be available 24/7 on weekends and bank holidays and be on standby to cover calls that may be left unfilled due to staff absences and sickness. Being available to support staff in emergencies and

confident to give staff the correct advice on how to proceed safely. On-call staff will rotate from week to week.

Support Workers - Responsible for delivering high quality, person-centred care to our Clients as stipulated in their care and support plans. Promoting their health, safety and wellbeing and using initiative to improve their quality of life by encouraging social and leisure activities where this is possible and safe for the Client. Always being alert to safeguarding concerns and being knowledgeable of company policies and procedures so as to always act in the best interest of the Client and ensure they are safe and supported to reach their potential. Preventing the spread of infections such as COVID-19 by having excellent standards of hygiene and promoting this with Clients, reporting any concerns and always discussing anything they are unsure about with the Registered Manager. Representing Springhill Care Limited at all times whilst on duty so being professional and compassionate with our Clients but also being mindful of their behaviour outside of work, avoiding behaviour and acts that may bring the company into disrepute.

All Employees

All Staff are responsible for quality and implementing Springhill Care Ltd aims and values consistently within their daily work.

- ✓ Ensuring the provision of high quality care and support
- ✓ Sharing good practice
- ✓ Commitment to creating a learning environment
- ✓ Input to the appraisal process, process audits and risk management
- ✓ A person-centred approach, which ensures equality and diversity.

Accountability for every Service User support lies with each Staff member and will be monitored regularly by the Registered Manager. Feedback will be sought from our Service Users and relevant stakeholders at regular intervals.

Audit & Compliance

Internal Audits are essential to providing the evidence that the processes of governance are being followed and achieved. Auditing is undertaken as a regular activity to ensure that standard procedures are implemented, with actions identified to meet any deviation or shortfall from expected standards.

Specific audits in areas of health and safety, medication management, infection, prevention & control, care planning, safeguarding, record keeping and other areas of the organisation are conducted regularly by the Management Team at regular intervals throughout the year.

Internal audits are conducted, along with a comprehensive annual quality assurance programme that includes sending questionnaires to those who receive our services, their families, care managers and Staff on a quarterly rolling basis. The results are separately available upon request.

Springhill Care Ltd will undertake regular reviews and monitor systems and processes to identify where quality or safety issues are being compromised. The organisation will respond appropriately and without delay where this occurs.

Springhill Care Ltd will do this by:

- ✓ Undertaking regular audits in areas such as health and safety, medication management, infection control, care planning and safeguarding etc.
- ✓ Using best practice guidelines such as NICE guidelines to benchmark standards and performance.
- ✓ Involving Service Users where possible.
- ✓ Ensuring an audit cycle is in place to review themes, trends and risks from audit at all leaves.

Quality Assurance

Springhill Care Ltd aims and values are embedded into our quality assurance processes that are designed to review and monitor the support provided by the organisation. These quality assurance processes will be developed in line with best practice and reflect the organisation's aims and objectives for the highest possible standards of care and support.

Some of the processes used to review quality and improve our services will include:

- ✓ 6-monthly Quality Audit.
- ✓ Regular supervision review meetings with our Staff and regular Staff development assessments.
- ✓ Annual Service Quality Questionnaire and Quality Assurance Feedback Form for the people we support and relevant stakeholders (carers/ representatives/ advocates etc.)
- ✓ Monthly Staff meetings.
- ✓ Training and development programme.
- ✓ A Complaints procedure, where we shall investigate and analyse the cause of any complaint or problem and take prompt and appropriate action to prevent a reoccurrence.
- ✓ Care Quality Commission Review and Inspection Reports.
- ✓ Monthly financial audit.
- ✓ 6 monthly care plan reviews.
- ✓ Service Review by commissioners.
- ✓ Adhoc visits to our Service Users by the Registered Manager.
- ✓ Robust recruitment processes to ensure 'fit and proper' persons are employed.
- ✓ Staff Competency assessments.
- ✓ Robust workplace risk assessments.
- ✓ Safeguarding & Whistleblowing procedures.

Springhill Care Ltd will ensure quality assurance processes are under constant review to ensure that they remain fit for purpose. This will support the organisation to have all the information we need to identify any areas that fall under standards and put individuals at risk. Therefore allowing the organisation to be able to take prompt remedial action.

Effectiveness

Effectiveness is making sure the right individuals receive the right care at the right time, in the most effective way. Springhill Care Ltd will achieve this by ensuring:

- ✓ Care Plan and Service User reviews are undertaken, to ensure care practice is delivered in a way that is in line with best practice and to identify when changes and areas of improvement.
- ✓ The effectiveness is monitored, and additional resources and support identified where appropriate e.g. district nurses, GPs or other community health support.
- ✓ Where a support issue is beyond the knowledge, skills and experience of that Staff member involved, then additional support is identified to ensure that issues are shared and the outcomes for the Service User is improved.

Remedying Underperformance

- ✓ Any shortfalls in support 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.
- ✓ Service Users and relevant authorities and regulators will be notified where any 'Notifiable of Safety Incidents' occur as per the organisation's Duty of Candour Policy & Procedure.
- ✓ If there are implications for Staff teams, it will be addressed through training, supervision and Staff meetings.
- ✓ Risk assessments, Care Plans and agreed ways of working will be revisited and updated to reassess the issues and develop more effective and robust processes.
- ✓ External resources will ensure Staff are aware of key policies and procedures, via electronic updates and team meetings.
- ✓ All Staff have the responsibility to Staff up to date with the organisation's policies and procedures when notified by the Registered Manager.
- ✓ The Registered Manager has the responsibility for ensuring all policies and procedures are customised and reflect all aspects of governance processes within Springhill Care Ltd. This includes ensuring Staff have read and understood all agreed ways of working.

Service User Involvement

It is a requirement within Regulation 17: Good governance of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (as amended), for registered providers to seek and act on feedback from relevant persons and others on the services provided. This is a very important part of the process of good governance within the organisation to continually evaluate and improve our services.

Involvement of Service Users is fundamental to our ability to understand performance. To make sure that governance is effective and holistic, Service Users are involved and asked for their feedback on the timeliness and quality of services provided. As an organisation, we listen and adapt to feedback accordingly. Systems such as regular care and support plan reviews, surveys are used and changes made are fed back to our Service Users and their views recognised. This process is central to the concept of 'person centred care' and continuous improvement. Springhill Care Ltd will work to the Accessible Information Standards to ensure equity for the people who use our services.

Springhill Care Ltd provides all of our Service Users with an accessible compliment and complaints policy. The organisation welcomes compliments, suggestions and/or complaints from all of our Service Users and relevant persons about the support they receive. This will enable the organisation to identify areas for improvements, recognise our successes and maintain a positive culture of co-operation within the organisation.

It is also very important to Springhill Care Ltd that our Staff are safe, happy and their health and wellbeing is supported. We therefore regularly seek all of our employee's suggestions and give opportunities for our Staff to raise their concerns or worries through team meetings, one-to-one sessions, facilitate regular supervision meetings. This enables the organisation to improve support provided to our Staff, maintain quality and maintain a positive culture of co-operation within the organisation.

Risk Assessment & Management

It is vital that Springhill Care Ltd effectively identifies, assesses, manages, reduces, audits and reviews all risks to maintain the health, safety and welfare of our Service Users, Staff and others involved in the service or members of the public.

Springhill Care Ltd will consistently ensure that we retain our 'fitness for purpose' to safeguard those we support.

All employees (including directors and registered managers) are required to have an enhanced DBS check and must receive a satisfactory outcome for their suitability to work with vulnerable adults.

Each potential employee undergoes a rigorous interview process where appropriate people we support are invited to be involved in the selection/recruitment and induction process.

The organisation's policies and procedures are created to provide clear information, guidance and protocols to our Staff on the organisation's expectations of performance and behaviours, current codes of practice, legislation and regulations to carry out their role safely and effectively.

This includes, procedures relating to health and safety, infection prevention and control, medication administration and management, adult safeguarding and protection, the reporting of concerns, accidents, incidents and near-misses, information governance (Data protection and confidentiality) and the use of effective monitoring systems including, risk assessment, rating and severity scores.

All causes for concern/ alerts and errors are carefully logged and reported to all relevant parties including, the local adult safeguarding authorities' team, appropriate commissioners, the Care Quality Commission (CQC) and family members to ensure thorough and detailed actions are taken. This allows us to respond and monitor appropriately within given timelines.

All of the organisation's policies and procedures and templates are reviewed at least once annually or when significant changes to practice, legislations and regulations occur.

Record Keeping

Springhill Care Ltd are required to have systems and processes in place to maintain securely an accurate, complete and contemporaneous records in respect of each Service User. This includes records of the care and treatment provided to the Service User and of decisions taken in relation to their care and treatment.

As part of our monitoring, auditing and good governance processes, the organisation will ensure the following:

- ✓ All Service User care and support records will be fit for purpose and monitored to ensure they are complete, legible, indelible, accurate and up to date, with no undue delays in recording information about a Service Users care and treatment;
- ✓ All accurate records of all decisions taken about a Service Users care and treatment will be retained, including discussions with service users, carers and representatives;
- ✓ All consent records and advanced decisions to refuse care and treatment will be easily accessible, including where changes of consent have occurred;
- ✓ All decisions made on behalf of a person who lacks capacity will be recorded and provided as evidence in accordance with the Mental Capacity Act 2005 or, where relevant, the Mental Health Act 1983, and their associated Codes of Practice;
- ✓ All records will be accessible to only authorised and relevant professionals both within the organisation and outside of the service on a need-to-know basis;
- ✓ All records will be created, amended, stored and destroyed in line with current legislation and guidance;
- ✓ All records will be kept secure at all times and only accessed, amended, or securely destroyed by authorised individuals;
- ✓ Physical and electronic records will be held securely and securely destroyed in line with the Data Protection legislation, General Data Protection Regulation and Information Commissioner's Office (ICO).

Training & Continuous Professional Development

Continued professional development is always key to any continual improvement processes, so all our Staff skills are reviewed and, where additional training is required, this is identified and provided.

All Staff undergo a minimum 4 weeks induction programme. In addition, in house training of specialist training, required to support/care for our Service User's disabilities as well as other specialist training and refresher courses are available.
This can include specialist training tailored to the individuals needs and sourced from external specialist training providers. We also support Staff to study for their Level 2 and 3 Diploma and Apprenticeship qualifications and reward their attainment. All service managers hold, or are studying for, Level 5 Leadership & Management in Care qualification.

Wherever incidents arise, the Registered Manager will carry out an investigation and recommendations will be implemented appropriately.
Remedying under performance is an integral part of our follow up to our quality governance processes. Shortfalls can be addressed either via additional supervision and or in team meetings.
Springhill Care Ltd will always ensure its Staff are aware of key policies such as whistleblowing, safeguarding, and accident and incident reporting.

Relevant Legislation

https://www.legislation.gov.uk/uksi/2014/2936/contents/made
👓 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (as amended)
http://www.legislation.gov.uk/ukpga/2005/9/contents
👓 Mental Capacity Act 2005
http://www.legislation.gov.uk/ukpga/1983/20/contents
👓 Mental Health Act 1983
http://www.legislation.gov.uk/ukpga/2018/12/contents/enacted
👓 Data Protection Act 2018
https://www.gov.uk/government/publications/guide-to-the-general-data-protection-regulation
👓 GDPR

Relevant Regulations

https://www.cqc.org.uk/sites/default/files/20150324_guidance_providers_meeting_regulations_01.pdf
👓 Regulation 5: Fit and proper persons (directors)
👓 Regulation 4,6, 7: Fit and proper persons (registered managers)
👓 Regulation 15: Premises and equipment
👓 Regulation 12: Safe care and treatment
👓 Regulation 17: Good Governance
👓 Regulation 19: Fit and proper persons
https://www.scie.org.uk/publications/guides/guide38/files/guide38.pdf
👓 Social Care Governance: a workbook based on practice in England

Key Lines of Enquiry KLOE

Safe:
- How are risks to people assessed and their safety monitored and managed so they are supported to stay safe and their freedom is respected?
- Are lessons learned and improvements made when things go wrong?

Effective: 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: How are people's concerns and complaints listened and responded to and used to improve the quality of care?

Well-led:
- Is there a clear vision and credible strategy to deliver high-quality care and support, and promote a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people?
- Does the governance framework ensure that responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed?
- How does the service continuously learn, improve, innovate and ensure sustainability?

Staffing Structure

Here at Springhill Care Ltd we put great emphasis on empowering our Staff to fulfil their roles to the best of their ability. By having a clear structure to our team, we're able to ensure each member of Staff is clear in their responsibilities whilst knowing we're able to meet the expectations of our clients.

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                    │      Manager        │
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     │ Care Co-ordinator │          │ Administrative Staff │
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│ Support Worker │    │ Support Worker │    │ Support Worker │
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This Policy / Procedure is due to be reviewed on 30/03/2024