

Adult Social Care and Continuing Healthcare Quality Assurance Report

As part of closer integrated working and supported by the Better Care Fund, Surrey County Council and NHS Surrey Downs Clinical Commissioning Group (as the host commissioner for Continuing Healthcare in Surrey) are jointly quality assuring and monitoring joint providers of adult social care and continuing healthcare services.

An outcome based approach has been developed for evaluating the quality of these services commissioned by Surrey. This is in keeping with responsibilities under The Care Act 2014 and is underpinned by the Continuing Healthcare National Framework 2012.

A statement of purpose and a methodology document are being developed which will describe the approach in more detail.

Quality Assurance reports are available internally within Surrey County Council and the 6 Surrey Clinical Commissioning Groups and are routinely shared with the Care Quality Commission. In some circumstances they may be shared with key stakeholders within the context of safeguarding. The reports should not be reproduced or shared with any other parties without consulting the provider and the Quality Assurance teams, however, they are subject to Freedom of Information and Data Protection legislation.

Service and visit details

Name of service:	
Name of provider:	
Type of service:	
Name of registered manager:	
Address of service:	
Number of registered places:	
Current occupancy/no. of service users:	

Date of visit: Announced or unannounced:	
Quality Assurance visit carried out by (name/ role/ organisation):	
Who we spoke with (name/ role/ organisation): <i>(names of people using the service not to be listed)</i>	

The outcome areas reported upon are drawn from the Think Local Act Personal (TLAP) “I” statements that is included in service specifications for commissioned services. The “I” Statements have been supplemented by some additional measures to cover management, quality assurance and any other observations. We understand that from the TLAP website that the Care Quality Commission are mapping the “I” Statements to the regulatory standards.

Information of the last regulatory visits that we are aware of: (For example, Care Quality Commission, Surrey Fire and Rescue, Environmental Health, Health and Safety Executive, Public Health etc. where appropriate). <i>(please refer to relevant websites)</i>

Background/ reason for visit:

Information and advice: “I have accurate information and advice when I need it.”
Summary of evidence:

Active and supportive communities: “I am part of an active and supportive community, maintaining friends and family friendships”.

Summary of evidence:

Flexible integrated care and support: “I get the support I want and need in the way I wish to receive it, with mutual respect and understanding.”

Summary of evidence:

Workforce: “I feel confident that I am supported by people who have the values, skills, training and competence to meet my specific needs.”

Summary of evidence:

Risk enablement: “I am in control of my life and am enabled to remain safe.”

Summary of evidence:

Personal budgets and self-funding: “I know what money is available for my care and support and am in control of my finances with access to skilled advice when I need.”

Summary of evidence:

Health: “I will be supported to stay as healthy and as well as possible for as long as possible.”

Summary of evidence:

Housing: “I am involved in decisions about where I live, who I live with and my personal belongings.”

Summary of evidence:

Partnership working: “I experience seamless services from commissioners and my service provider(s) who work quickly and professionally together.”

Summary of evidence:

Any other observations:

Summary of evidence:

Observations about leadership, management and quality assurance systems:

Summary of evidence:

Summary and Actions

Acknowledgement of area of good practice:

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Good practice recommendations:

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Useful sources of information:

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Referral for specialist advice (by whom):
(e.g. pharmacy, fire officer, manual handling, tissue viability, safeguarding)

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Any other agreed actions (by whom/ by when):

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Provider response to the recommendations (by whom, by when):

Signed off at provider by:
Date:

DRAFT