

## **Introduction**

Regulation 23 (1) (d)<sup>1</sup> requires a provider to "*ensure that there is an annual review of the quality and safety of care and support in the designated centre and that such care and support is in accordance with standards*".

Regulation 23(1)(e) also requires the provider to "*ensure that the review referred to in subparagraph (d) shall provide for consultation with residents and their representatives*"

The standards provide a framework for the ongoing development of person-centred residential services for all people with disabilities. This guidance and template has been developed to provide a framework for you to undertake and record your annual review of quality and safety of care and support in your designated centre, and make judgments about your performance against the standards.

The aim of the template is to support you to measure your performance against the national standards, and to identify areas for ongoing improvement of your service. It is not a statutory template, and as such you are not required to use it, however, you are required to produce a report of your annual review and make a copy available to residents and to the Chief Inspector (if so requested).

The template includes a series of prompts to support you to:

- assess your performance against each standard
- rate your performance
- develop a plan to address any areas for improvement
- write a final summary

<sup>1</sup> Health Act 2007 (Care and support of residents in designated centres for people (children and adults) with Disabilities Regulations 2013

## About the template

The template has two sections.

- Section 1 Quality and Safety
- Section 2 Capacity and Capability

Each section is made up of four themes which are set out in full in the national standards for residential services for children and adults with disabilities which are available on our website, [www.hiqa.ie](http://www.hiqa.ie). The standards are then written against each theme.

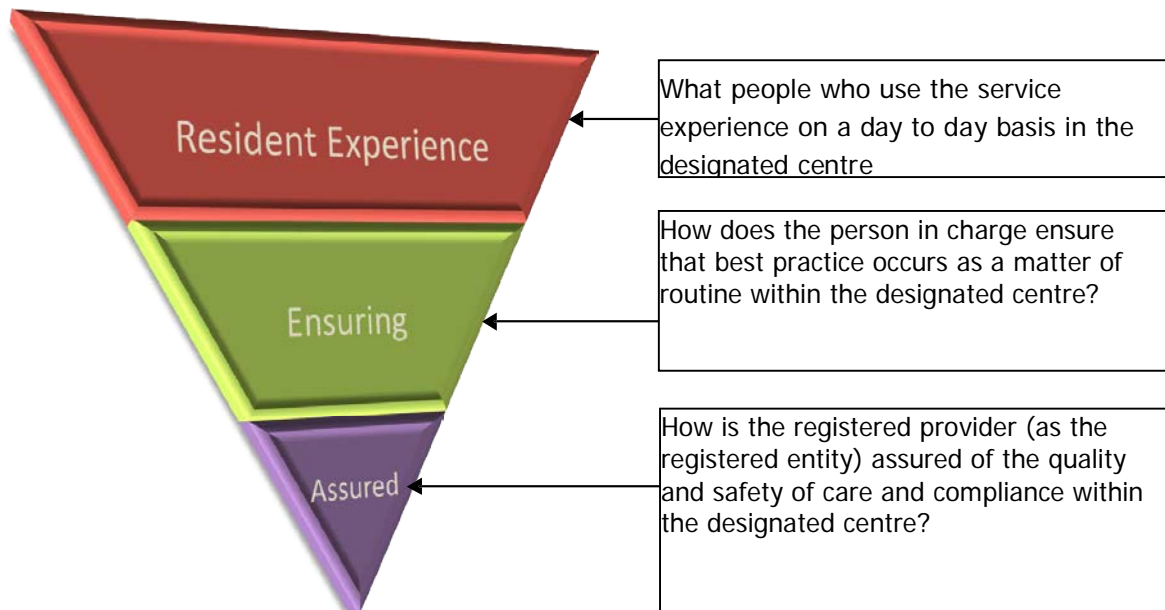
Figure 1: Themes in the national standards

Figure 1: Themes in the National Standards



## Assessing your performance

In considering the assessment of your designated centre against the standards, you should be guided by the principles enshrined within the following model.



## Assessing each standard

For each standard, you should consider the following, including examples:

- How are you assured there are effective systems in place to make sure people using the service receive good quality and safe care?
- How do you monitor and evaluate the practice in your centre?
- How are you assured that there are effective procedures in place?
- What are your accomplishments in this area this year?
- Have you identified areas you need to improve?
- The findings in the report of your six monthly unannounced visits and the review of the action plans to address concerns raised during these visits

Appendix 1 sets out some examples of assurance methods:

- Outcomes for people who use the service
- Effective policies and procedures
- Monitoring performance
- Effective reporting arrangements
- Outcomes of assurance methods

## **Rating your performance**

When rating your performance you should review all of the evidence you have identified through the assurance methods you have carried out, including your unannounced visits to your centre, and make a judgment about whether you are meeting the standard or not.

## **Developing a plan to address areas for improvement**

There is an improvement plan at the end of each section. This should assist you to identify how you intend to address any areas where you have assessed that quality improvement is needed. When considering what actions to take it may be useful to consider the following:

- Improvement to be achieved.
- Actions that need to be taken
- Resources (if any) that are needed
- How the improvement is to be measured
- Timescales by which improvements will be achieved.
- Who is responsible?

## **Summary**

You may find it useful to bring all the information to a summary at the end of the document, considering the following:

- Have standards been identified where there is a need for quality improvement?
- Have any regulations been identified as non-compliant by HIQA?
- Has the service has been provided in line with your statement of purpose?
- How are you going to use this information to support your service planning and allocation of resources?
- What is your plan to make improvements, if required?
- If you HIQA have judged that you are not compliant with any regulations what actions are you taking to achieve compliance?

In some cases the Chief Inspector may ask for a copy to be submitted to HIQA or it may be reviewed on inspection.

## About the centre

Centre name:

Centre ID:

Registered provider:

Person in charge:

**Note: All standards apply to children and adults, except where stated 'adults' or 'children'**

## Section 1

### Quality and Safety

Theme 1: Individualised Supports and Care		Quality improvement required? Y/N Where yes complete improvement plan
Standard 1:1	The rights and diversity of each person are respected and promoted.	
Standard 1.2	The privacy and dignity of each person are respected.	
Standard 1.3 <b>Adults</b>	Each person exercises choice and control in their daily life in accordance with their preferences.	
Standard 1.3 <b>Children</b>	Each child exercises choice and experiences care and support in everyday life.	
Standard 1.4 <b>Adults</b>	Each person develops and maintains personal relationships and links with the community in accordance with their wishes.	
Standard 1.4 <b>Children</b>	Each child develops and maintains relationships and links with family and the community.	

Standard 1.5	Each person has access to information, provided in a format appropriate to their communication needs.	
Standard 1.6	Each person makes decisions and, has access to an advocate and consent is obtained in accordance with legislation and current best practice guidelines.	
Standard 1.7	Each person's complaints and concerns are listened to and acted upon in a timely, supportive and effective manner.	

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Improvement Plan	Action/ Resources	Timescale

<b>Theme 2: Effective services</b>		<b>Quality improvement required? Y/N</b> Where yes complete improvement plan
Standard 2.1	Each person has a personal plan which details their needs and outlines the supports required to maximise their personal development and quality of life, in accordance with their wishes.	
Standard 2.2	The residential service is homely and accessible and promotes the privacy, dignity and welfare of each person.	
Standard 2.3	Each person's access to services is determined on the basis of fair and transparent criteria.	
Standard 2.4 <b>Adults</b>	Young adults are supported throughout the transition from children's services to adults' services.	
Standard 2.4 <b>Children</b>	Children are actively supported in the transition from childhood to adulthood and are sufficiently prepared for and involved in the transfer to adult services or independent living.	



Improvement Plan	Action/ Resources	Timescale

<b>Theme 3: Safe services</b>		<b>Quality improvement required? Y/N</b> Where yes complete improvement plan
Standard 3.1	Each person is protected from abuse and neglect and their safety and welfare is promoted.	
Standard 3.2	Each person experiences care that supports positive behaviour and emotional wellbeing.	
Standard 3.3	People living in the residential service are not subjected to a restrictive procedure unless there is evidence that it has been assessed as being required due to a serious risk to their safety and welfare.	
Standard 3.4	Adverse events and incidents are managed and reviewed in a timely manner and outcomes inform practice at all levels.	

Improvement Plan	Action/ Resources	Timescale

<b>Theme 4: Health and development</b>		<b>Quality improvement required? Y/N</b> Where yes complete improvement plan
Standard 4.1	The health and development of each person is promoted.	
Standard 4.2	Each person receives a health assessment and is given appropriate support to meet any identified need.	
Standard 4.3	Each person's health and wellbeing is supported by the residential service's policies and procedures for medication management.	
Standard 4.4 <b>Adults</b>	Educational, training and employment opportunities are made available to each person that promotes their strengths, abilities and individual preferences.	
Standard 4.4 <b>Children</b>	Education opportunities are provided to each child to maximise their individual strengths and abilities.	

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Improvement Plan	Action/ Resources	Timescale

## Section 2

### Capacity and Capability

<b>Theme 5: Leadership governance and management</b>		<b>Quality improvement required? Y/N</b> Where yes complete improvement plan
Standard 5.1	The residential service performs its functions as outlined in relevant legislation, regulations, national policies and standards to protect each person and promote their welfare.	
Standard 5.2	The residential service has effective leadership, governance and management arrangements in place and clear lines of accountability.	
Standard 5.3	The residential service has a publicly available statement of purpose that accurately and clearly describes the services provided.	
Standard 5.4	The residential service has appropriate service level agreements, contracts and/or other similar arrangements in place with the funding body or bodies.	

Improvement Plan	Action/ Resources	Timescale

<b>Theme 6: Use of resources</b>		<b>Quality improvement required? Y/N</b> Where yes complete improvement plan
Standard 6.1 <b>Adults</b>	The use of available resources is planned and managed to provide person-centred effective and safe residential services and supports to people living in the residential service.	
Standard 6.1 <b>Children</b>	The use of available resources is planned and managed to provide child-centred, effective residential services and supports to children.	



Improvement Plan	Action/ Resources	Timescale

<b>Theme 7: Responsive workforce</b>		<b>Quality improvement required? Y/N</b> Where yes complete improvement plan
Standard 7.1	Safe and effective recruitment practices are in place to recruit staff.	
Standard 7.2	Staff have the required competencies to manage and deliver person-centred, effective and safe services to people living in the residential service.	
Standard 7.3	Staff are supported and supervised to carry out their duties to protect and promote the care and welfare of people living in the residential service.	
Standard 7.4	Training is provided to staff to improve outcomes for people living in the residential service.	

Improvement Plan	Action/ Resources	Timescale

<b>Theme 8: Use of information</b>		<b>Quality improvement required? Y/N</b> Where yes complete improvement plan
Standard 8.1	Information is used to plan and deliver person-centred, safe and effective residential services and support.	
Standard 8.2	Information governance arrangements ensure secure record-keeping and file-management systems are in place to deliver a person-centred, safe and effective service.	

Improvement Plan	Action/ Resources	Timescale



## Appendix 1

### Examples of approaches to assurance methods

Type	Example methods
<b>Outcomes for people who use the service</b>	<ul style="list-style-type: none"><li>• How are people who use the service involved in the running of the service?<ul style="list-style-type: none"><li>○ Resident forums</li><li>○ Involved in recruitment</li><li>○ Consulted about changes in the service</li><li>○ Involved in key decisions about their own home?</li></ul></li><li>• How has this informed your practice?<ul style="list-style-type: none"><li>○ What evidence is there?</li></ul></li><li>• Identify if people who use the service are enabled to make choices about their lives<ul style="list-style-type: none"><li>○ Are people who use the service making choices about day to day arrangements?</li><li>○ Are people who use the service involved in making choices about how they spend their time?</li><li>○ Are people who use the service supported to make decisions about their lives?</li><li>○ Do they consider they have a good quality of life?</li></ul></li><li>• Seek the views of the people who use the service on the quality of the service:<ul style="list-style-type: none"><li>○ Speak with people who use the service</li><li>○ Use alternative communication methods where appropriate</li><li>○ Observe quality of interactions with peers and staff</li><li>○ House meetings</li><li>○ Children/ residents forums</li><li>○ Surveys</li><li>○ Comments boxes</li><li>○ Communication with relatives and representatives, where appropriate</li></ul></li><li>• Observe practice<ul style="list-style-type: none"><li>○ Informally spend time with the people in their own environment</li><li>○ Observe staff practice</li><li>○ Consider formal observation tools</li></ul></li><li>• Review practice in relation to:<ul style="list-style-type: none"><li>○ Positive behaviour support</li><li>○ Restrictive practice</li><li>○ Incidents/ accidents</li><li>○ complaints</li></ul></li><li>• Review documentation<ul style="list-style-type: none"><li>○ Are relevant documents accessible by people?</li><li>○ Is key information available for people? (for example complaints, advocacy, keeping safe)</li><li>○ Have assessments for children/ residents been carried out within</li></ul></li></ul>

Type	Example methods
	<ul style="list-style-type: none"> <li>○ required timeframes?</li> <li>○ Are records clear?</li> <li>○ Where support needs are identified, is it clear how those needs will be met?</li> <li>○ Where other professional input is required, has it been identified and facilitated?</li> <li>● Have other professionals recommendations been implemented?</li> </ul>
<b>Effective policies and procedures</b>	<ul style="list-style-type: none"> <li>● Confirm you have the policies required by the regulations in place? (reg4 schedule 5)</li> <li>● Carry out samples/audits to check they are effective <ul style="list-style-type: none"> <li>○ Do they provide clear information?</li> <li>○ Does the audience understand them?</li> <li>○ Are they put into practice?</li> <li>○ Are there any areas where practice is not following what is set out in the policy or procedure? For example, staff are not clear how to record information when a complaint is made to them.</li> <li>○ Do any need to be reviewed/updated?</li> </ul> </li> </ul>
<b>Monitoring performance</b>	<ul style="list-style-type: none"> <li>● Carry out unannounced visits <ul style="list-style-type: none"> <li>○ Speak with people who use the service and relatives</li> <li>○ Use alternative communication methods where appropriate</li> <li>○ Observe quality of interactions with peers and staff</li> <li>○ Meet with staff</li> <li>○ Observe practice of staff</li> <li>○ Check staffing levels</li> <li>○ Sample procedures, such as complaints and safeguarding</li> <li>○ Inspect the premises (clean, tidy, free of risk)</li> </ul> </li> <li>● Ensure audits are in place to monitor performance</li> <li>● Have systems in place to review results of audits, and record actions to be taken so they can be monitored</li> <li>● Ensure the risk assessment mechanisms are effective <ul style="list-style-type: none"> <li>○ Are risks being identified?</li> <li>○ Are you assured that steps are being put in place to mitigate identified risks?</li> <li>○ Are all safety procedures being followed? (fire, risk management, premises, vehicle management)</li> </ul> </li> </ul>
<b>Effective reporting arrangements</b>	<ul style="list-style-type: none"> <li>● Are there systems for important information to be escalated through managers?</li> <li>● Do you receive the information you need to be assured the service is meeting the needs of the people who use the service, and complying with the standards and regulations?</li> <li>● Is there an appropriate procedure for escalation of pertinent information?</li> <li>● Is the staff team kept informed on changes for people who use the</li> </ul>



Type	Example methods
	<p>service, practice, upcoming events, expectations for practice?</p> <ul style="list-style-type: none"> <li>• How do managers and staff request resources for areas where a need has been identified? For example specific training to meet the health needs of people who use the service.</li> <li>• Are there mechanisms for managers to meet and share information?</li> <li>• Are there appropriate on call arrangements?</li> </ul>
<p><b>Outcomes of assurance methods</b></p>	<ul style="list-style-type: none"> <li>• How are the assurance methods you are using supporting you to run an effective service? <ul style="list-style-type: none"> <li>○ What do you know?</li> <li>○ How are you going to respond?</li> </ul> </li> <li>• How are the results impacting your business planning?</li> <li>• How are your assurance methods improving the service for people who use the service?</li> <li>• Are you assured that the service is meeting the needs of the people who use the service?</li> <li>• Are you assured that you are meeting the standards and regulations?</li> <li>• If you are not, what are you going to do about it?</li> <li>• If you are, what are you going to do to continuously improve the service and the experience of people using it?</li> <li>• How do you let people who use the service, and their relatives know about the results of your review?</li> <li>• How do you let employee's know about the findings of the review, and engage them in any improvements needed?</li> </ul>