

Annual Review Report-

Assessing performance against the national standards for residential services for children and adults with disabilities

An tÚdarás Um Fhaisnéis agus Cáilíocht Sláinte

Regulation 23(1)(d)

Introduction

Regulation 23 (1) (d)¹ 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

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

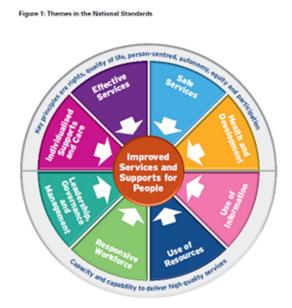
About the template

The template has two sections.

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

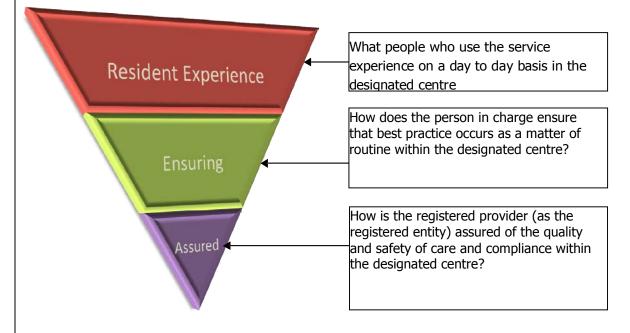
Each section is made up of four themes which are set out in full in the national standards for residential services for children and adults with disabilities which are available on our website, <u>www.hiqa.ie</u>. The standards are then written against each theme.

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.



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Regulation 23(1)(d)

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 Adults	Each person exercises choice and control in their daily life in accordance with their preferences.	
Standard 1.3 Children	Each child exercises choice and experiences care and support in everyday life.	
Standard 1.4 Adults	Each person develops and maintains personal relationships and links with the community in accordance with their wishes.	
Standard 1.4 Children	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.	

Improvement Plan	Action/ Resources	Timescale

Theme 2: Effec	ctive services	Quality improvement required? Y/N 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 Adults	Young adults are supported throughout the transition from children's services to adults' services.	
Standard 2.4 Children	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

Theme 3:	Safe services	Quality improvement required? Y/N 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

Theme 4: Hea	Ith and development	Quality improvement required? Y/N 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 Adults	Educational, training and employment opportunities are made available to each person that promotes their strengths, abilities and individual preferences.	
Standard 4.4 Children	Education opportunities are provided to each child to maximise their individual strengths and abilities.	

Improvement Plan	Action/ Resources	Timescale

Section 2

Capacity and Capability

Theme 5: Leade	rship governance and management	Quality improvement required? Y/N 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

Theme 6: Use	of resources	Quality improvement required? Y/N Where yes complete improvement plan
Standard 6.1 Adults	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 Children	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

Theme 7: Resp	oonsive workforce	Quality improvement required? Y/N 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

Theme 8: Use	of information	Quality improvement required? Y/N 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

Summary

Appendix 1

Type	Example methods	
Outcomes for	How are people who use the service involved in the running of the	
people who	service?	
use the service	 Resident forums 	
	 Involved in recruitment 	
	 Consulted about changes in the service 	
	 Involved in key decisions about their own home? 	
	How has this informed your practice?	
	 What evidence is there? 	
	Identify if people who use the service are enabled to make choices	
	about their lives	
	\circ Are people who use the service making choices about day to day	
	arrangements?	
	\circ Are people who use the service involved in making choices about	
	how they spend their time?	
	$_{\odot}$ Are people who use the service supported to make decisions	
	about their lives?	
	$_{\odot}$ Do they consider they have a good quality of life?	
	• Seek the views of the people who use the service on the quality of the	
	service:	
	 Speak with people who use the service 	
	 Use alternative communication methods where appropriate 	
	 Observe quality of interactions with peers and staff 	
	• House meetings	
	 Children/ residents forums 	
	o Surveys	
	• Comments boxes	
	 Communication with relatives and representatives, where 	
	appropriate	
	Observe practice Tafarmally around times with the people in their own environment	
	 Informally spend time with the people in their own environment 	
	 Observe staff practice Consider formal shares that 	
	 Consider formal observation tools 	
	Review practice in relation to:	
	 Positive behaviour support Destrictive prosting 	
	 Restrictive practice Insidents (assidents 	
	 Incidents/ accidents complaints 	
	 complaints Review documentation 	
	 Are relevant documents accessible by people? Is key information available for people? (for example complaints) 	
	 Is key information available for people? (for example complaints, advocacy, keeping safe) 	
	Line approximate for shildren (residents loss apprised out within	
	• Have assessments for children/ residents been carried out within Page 23 of 25	

Туре	Example methods
	required timeframes?
	 Are records clear?
	\circ Where support needs are identified, is it clear how those needs
	will be met?
	\circ Where other professional input is required, has it been identified
	and facilitated?
	Have other professionals recommendations been implemented?
Effective	• Confirm you have the policies required by the regulations in place?
policies and	(reg4 schedule 5)
procedures	Carry out samples/audits to check they are effective
	 Do they provide clear information?
	 Does the audience understand them?
	 Are they put into practice?
	\circ 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.
	 Do any need to be reviewed/updated?
Monitoring	Carry out unannounced visits
performance	 Speak with people who use the service and relatives
	 Use alternative communication methods where appropriate
	 Observe quality of interactions with peers and staff
	 Meet with staff
	 Observe practice of staff
	 Check staffing levels
	 Sample procedures, such as complaints and safeguarding
	 Inspect the premises (clean, tidy, free of risk)
	Ensure audits are in place to monitor performance
	Have systems in place to review results of audits, and record actions to
	be taken so they can be monitored
	Ensure the risk assessment mechanisms are effective
	 Are risks being identified?
	\circ Are you assured that steps are being put in place to mitigate
	identified risks?
	• Are all safety procedures being followed? (fire, risk management,
	premises, vehicle management)
Effective	Are there systems for important information to be escalated through
reporting	managers?
arrangements	• 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?
	Is there an appropriate procedure for escalation of pertinent
	information?
	Is the staff team kept informed on changes for people who use the

Туре	Example methods
	service, practice, upcoming events, expectations for practice?
	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.
	Are there mechanisms for managers to meet and share information?
	Are there appropriate on call arrangements?
Outcomes of	How are the assurance methods you are using supporting you to run an
assurance	effective service?
methods	 What do you know?
	 How are you going to respond?
	 How are the results impacting your business planning?
	• How are your assurance methods improving the service for people who use the service?
	• Are you assured that the service is meeting the needs of the people who use the service?
	Are you assured that you are meeting the standards and regulations?If you are not, what are you going to do about it?
	• If you are, what are you going to do to continuously improve the service and the experience of people using it?
	 How do you let people who use the service, and their relatives know about the results of your review?
	 How do you let employee's know about the findings of the review, and engage them in any improvements needed?