

Your Business Matters...





Housekeeping



Please keep your mobiles on silent during the presentations



Exits



No planned fire drills



Comfort Break

Todays Event Business Development Services **Updates from HCC**

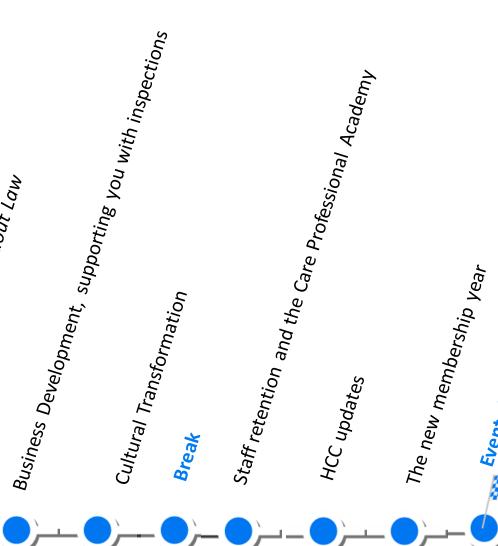
Membership, what's new for 2024

Business Development, HR updates and more...

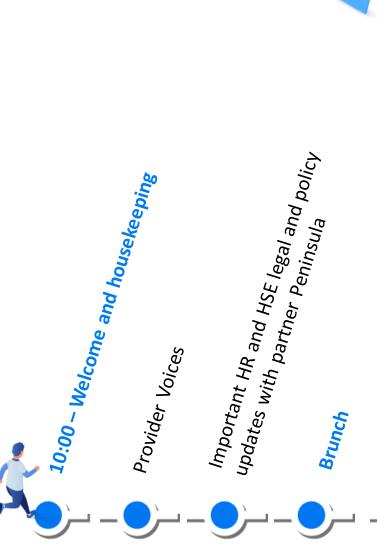


CQC Update with Partner Ridout Law

HCC Monitoring Updates



Event closes



Sharon Davies OBE

CEO
Hertfordshire Care Providers Association







Care workforce pathway for adult social care
The care workforce pathway outlines the knowledge,
skills, values and behaviours people need to work in
adult social care.

We can now bring you an update...



Adult Social Care Training and Development Fund



- Eligible adult social care (ASC) employers can claim varying levels of reimbursement from this fund, for spend on upskilling the adult social care workforce
- The new fund is based on the Workforce

 Development Fund (WDF), administered by Skills for Care, and allows ASC employers to receive direct reimbursement through a digital online claims service. The WDF will be scaled down in the financial year 2024 to 2025. However, the new Adult Social Care Training and Development Fund is backed by significantly more funding and will therefore enable the workforce to access more funded training and development places
- How HCPA will support you through this journey...





The fund is made up of 2 elements



care skills funding – including the new care certificate L2



revalidation funding (this means general development and is not referring to nurses. Non-regulated staff are not included in this funding)



Claims for reimbursement will be made through a digital online claims service, which will go live in summer 2024.



Care skills funding

Over £50 million of the total fund value is dedicated to supporting up to 37,000 individuals in direct care roles to enrol onto the new Level 2 Adult Social Care Certificate qualification by March 2025.

Further information on the total funding available under care skills funding will be confirmed later in the year, prior to the digital online claims service going live in summer 2024.



Revalidation funding

As part of this fund the government intends to make contributions to the cost of continuing professional development for revalidation for eligible, registered staff. More information about this element of the fund, along with the total funding available, will be confirmed in summer 2024.



How to claim



- The fund is intended to be administered by the NHS Business Services Authority (NHSBSA) on behalf of the Department of Health and Social Care (DHSC).
- While claims will be eligible for learning and development started on, or after, 1 April 2024, there will be a phased approach to onboarding for the initial launch of the digital online claims service in summer 2024. NHSBSA will manage the onboarding and send invitations to ASC employers to access the service.
- An updated version of this guidance will be published with further information on how to use the digital claims service to claim reimbursement prior to it going live in summer 2024.



Please be aware that while this new fund is backed by a significant amount of funding the overall funding pot is limited and, once exhausted, claims submitted will not receive reimbursement. Throughout the year the sector will be periodically notified of remaining funding.





Funding eligibility criteria

Funding is available for non-regulated members of the adult social care workforce in England, including deputy and Care Quality Commission registered managers and agency staff.

To qualify, their employer (including local authorities) must meet all of the following criteria:

- provide an adult social care service
- directly employ care staff in England
- have completed the <u>Adult Social Care</u> <u>Workforce Data Set (ASC-WDS)</u>.



How the funding can be used

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- ASC employers will be able to claim a reimbursement for any of the quality assured training courses and qualifications identified in Appendix A of the guidance, including the new Level 2 Adult Social Care Certificate.
- Please note that any pre-conditions of enrolment for courses and qualifications will be set out by awarding organisations and training providers and are not contained within this guidance.
- All courses and qualifications will have a set reimbursement rate that is a cost contribution to the overall course cost.



The payment caps reflect the maximum, not default, reimbursement amount. Where the evidenced spend for a course is lower than the payment cap for that specific course, the reimbursement will be for the evidenced spend only. No employer will be reimbursed more than the value of any legitimate evidenced spend. Repeat courses per employee are not eligible for reimbursement.







Level 2 Adult Social Care Certificate

- The Level 2 Adult Social Care Certificate has been developed from the widely used Care Certificate standards, and is part of the commitment to recognising our care workforce for the professional career it is.
- Currently over 50% of the workforce do not hold an accredited qualification, but the sector is filled with experienced and committed colleagues who deserve to be acknowledged for the skilled care they provide.
- The aim is that the Level 2 Adult Social Care Certificate will provide a route for thousands of staff to gain a recognised qualification, reaffirming care work as a career, and helping to promote recruitment and retain talent.



It is the intention for the sector to work towards a Level 2 qualification for all staff which is why the new Level 2 Adult Social Care Certificate qualification has been introduced. Having a more recognised and qualified workforce will offer a greater peace of mind to people who draw on care and support, families, loved ones and care providers that people with the right skill set and values are joining the profession. This new qualification will compliment current Level 2 learning programmes and will be viewed by the Care Quality Commission in line with the existing Level 2 options.

For this qualification funding is available for non-regulated members in direct care roles, including agency staff. This includes:

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- activities workers
- care workers
- personal assistants
- rehabilitation workers
- shared lives carers
- advocacy workers

any <u>other roles where staff work with people who need the</u> <u>care and support of the adult social care workforce in England</u>

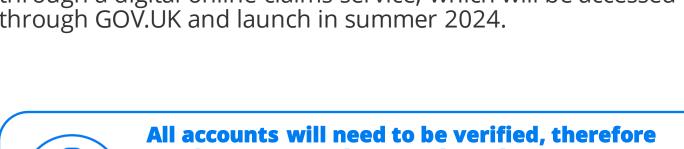
Qualifying members must be employed by an employer (including local authorities) who meets all of the following criteria:

- provides an adult social care service
- directly employs care staff in England
- is registered on the ASC-WDS



How to access the funding

ASC employers will be able to claim reimbursement for the costs of training and development for eligible employees through a digital online claims service, which will be accessed through GOV.UK and launch in summer 2024.





employers must also complete the ASC-WDS.

The ASC-WDS is a free online data collection service run by Skills for Care that covers the adult social care workforce in England.

Following verification...

Following account verification, ASC employers will be able to submit claims on behalf of their employees. For each claim, employers will be required to:

- confirm the employee is employed in an eligible role and that the information provided is correct to the best of their knowledge
- confirm the employee has started the course or qualification
- confirm that training is eligible
- provide evidence that the training is eligible and has been completed, including:
 - proof of payment (which should include the payment organisation and recipient organisation)
 - what the payment was for
 - amount
 - VAT number (if not exempt)
 - date of payment
 - dated certificate of completion
 - unique learner number (if applicable)
 - **a** candidate registration number (if applicable)
 - name of awarding organisation
 - name of training provider or learning centre

Reimbursement will generally be made following training or course completion.







Sign a declaration...

- ASC employers will have access to the Secretary of State's grant determination letter for the ASC Training and Development Fund, and will be required to sign a declaration of adherence to the scheme rules and grant conditions before claims will be processed.
- Costs paid out in error or for fraudulent claims will be recovered, as set out in the grant determination letter. Further action including criminal proceedings may be taken if a fraudulent claim has been made where possible, ASC employers should retain any evidence of an employee starting a course as this may be requested as part of post claim assurance processes carried out by the intended service administrator, NHSBSAfunding will be capped for each employer.
- For the financial year 2024 to 2025 the cap will be set at £4.5 million per employer and will apply to claims submitted across all elements of this scheme:
 - Care Skills Funding and Revalidation Funding inclusively. Where an employer is part of a group of companies (for example, has a parent company and/or subsidiary companies) the £4.5 million cap will apply as the total available to the whole group of companies
 - reimbursement is **not available for backfill pay** funding will generally be paid out for instances where courses are failed but completed (for example, failure to pass the final assessment) reimbursement is not available for course repeats



Appendix A: list of eligible training courses and qualifications

All these can be offered as one-off or as a bespoke package by HCPA as we are a Skills for Care Centre of Excellence and are registered with Awarding Bodies.

Should an employer want to go down the route of awarding their own qualifications HCPA will support you with both training and assessing qualifications.

Qualifications:Care Certificate

HCPA will maintain the induction course (formerly the old Care Certificate training 4-6 day course) which will act as a <u>pre-cursor</u> to the larger Level 2. A staff member will be contacted 3-6 months after completion of the induction

Level and type	Title	Number	TQT hours	Awarding organisation	Maximum reimbursement amount (£)
Level 2 Certificate	Level 2 Adult Social Care Certificate	To be confirmed	369	To be confirmed	1500



Digital Learning



Name of module	Maximum reimbursement amount (£)
Leading and managing in adult social care	55
Supporting and developing teams	55
Regulation and governance	55
Effective communication	55
Working with partners	55
Leading a person-centred service	55
Safeguarding and mental capacity	55
Making decisions	55
Managing resources	55
Learning and innovating	55
Personal development and wellbeing	55

These provide good pre-learning to HCPA courses.

Call us to find out which courses are matched digital/F2F

Also available:

- Digital learning for managers
- Digital learning for CQC inspection preparation
- Creating an inclusive organisation digital learning modules

Name of learning programme	Maximum reimbursement amount (£)
Digital leadership programme	510
Leading change improving care	510
Lead to succeed	510
Movingup	510
New directors	510
Understanding performance management	130
Understanding self- management skills	130
Understanding workplace culture	130
Well-led	510



Longer learning programmes:

- Can take anything from 1-5 days of face to face learning https://issuu.com/hcpa-publications/docs/leadershipcoursesbrochure_01feb2023_cl_v32 ?fr=sNGU0MzcyMTY2MjY
- Please note Leading Change Improving Care is exclusively offered to scholars in the Academy https://www.careprofessional.co
 .uk/scholar/



Mental Health First Aid

	Maximum reimbursement amount (£)
Mental health first aid	105



Positive Behavioural Support (PBS)

Name of module	Maximum reimbursement amount (£)
First step to foundation	55
PBS foundation level	155
PBS intermediate level	305
PBS advanced level	460

Qualifications - awards, certificates, diplomas

Qualifications: activity provision

Qualifications: advocacy

Qualifications: assessment

Qualifications: autism

Qualifications: dementia

Qualifications: digital leadership

Qualifications: end of life care

Qualifications: epilepsy

Qualifications: falls prevention

Qualifications: food safety and nutrition

Qualifications: health and social care diplomas Qualifications: health and social care diplomas Qualifications: health and social care diplomas

Qualifications: medication

Qualifications: Mental Capacity Act 2005

Qualifications: mental health

Qualifications: oral health

Qualifications: stroke

Qualifications: train the trainer



Certs belong to people

- Please remember it is poor practice to keep hold of any certificates that your staff member earns. Certificates are the property of the person completing the training course or qualification
- Use the Academy so that <u>both</u> you and your staff member has access to any certificates







Key take-aways

- When you get the letter, please register
- Keep your data up to date
- Watch out for updates from us
- Call us if you need to understand anything at all



New education programmes for 2024

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- Advocacy
- Auditing & Quality
- Evidencing & Action Planning
- Observations & Competency Assessments
- Supporting Relationships: Relationship and Sexuality Awareness
- Train the Trainer (funded for 2024)
 - Care induction
 - Medication
 - Care Planning
 - Mental Capacity
 - Safeguarding
 - Older People Positive Behaviour Support
- Care Culture CHAMPION
- Cultural Awareness
- Trainer CPD and networking
- New STAN+ Mental Health, Older People, Adult Disability



Michelle Airey

Provider Voice







Provider voice

What are the three things worrying you about your business this year?

What would help you provide even better quality care?

What skills do you wish your workforce could attain?

Tabletop Discussion









Unpacking the latest employment law changes affecting your care staff





Jay Smy Business Development Manager



Joseph Gill
Peninsula Face2Face – Head of Operations

About **Peninsula**



Protecting employers for 40 years



Supports over 75,000 businesses worldwide



Working with SMEs and large employers



1M pieces of HR advice given per annum



Advice given 24/7



Handling tribunal cases for employers



Peninsula Face2Face



Disciplinaries

Let an HR consultant manage the complex disciplinary process for you – from start to finish.



Grievance meetings

When a third-party professional handles your employee's complaint, you remove bias and risk.



Capability reviews

Get your employee back on track with expert, in-person support.



Peninsula Face2Face

Appeals

TUPE Transfers

Exit Interviews

Probation reviews

Mediation

Culture reviews

Redundancy consultations

Welfares & Return To Works

Training







Did you know...

- April saw **10** employment law changes
- Some were brand new laws; others were updates
- Every one of them required action from employers

Here's what we'll cover

- Minimum Wage
- Carer's leave
- Pregnancy & redundancy
- Flexible working
- Paternity leave
- Holiday entitlement & holiday pay
- Statutory payments



Minimum wage

- ✓ 21/22-year-olds now caught by National Living Wage: £11.44 per hour
- ✓ Be aware of birthdays and apprenticeship anniversaries
- 17 employers in care sector recently "named and shamed" for underpaying
- Unpaid travel time; uniform/worker purchase of clothes to meet dress code; apprentice rate

NMW rates from 1 April 2024





Carer's leave

- 6th April 2024
- One request per 12 months
- Unpaid
- "Long term care need"
- Policy, records, full management system
- Not to be confused with time off for dependants

Pregnancy and redundancy

Scenario

You're going through a redundancy exercise with your employees, and you've met with them once to inform them that they are at risk of being made redundant.

Then an employee informs you that they are pregnant.

Does this change anything?



Yes.....

- ✓ Rights for employees during a redundancy exercise changed on 6 April 2024
- ✓ You can still make them redundant, but you will need to take extra steps
- Extra caution will be needed from the moment they tell you they are pregnant, throughout maternity leave and on their return to work until 18 months after the baby is born
- Also applies to return from adoption leave and shared parental leave
- Failure to do this will increase your risk of a discrimination claim



Flexible working

New rules from 6 April mean that

- You will get more requests permitted from day one and number of requests employees can make per year will double
- Your paperwork needs to be reviewed update your policy and your application forms; info required from employee will change
- You will need to deal with the request quicker statutory timeline for dealing with requests will be cut by a third
- You need to try to find a compromise must consult with employee before refusing a request



Paternity leave

When expected week of childbirth is after 6 April 2024 or when an employee will be absent

Expected date of adoption placement is on or after 6 April 2024

Much more flexibility to be built into the system

Employees won't lose their entitlement anymore

More uncertainty for you over when they will be taking leave



Holiday entitlement and holiday pay have changed.....

Irregular hours workers e.g. zero hours workers

Permanent irregular hours workers now accrue annual leave on the basis of 12.07% of hours worked.

You can only use from the start of new leave years on or after 1 April 2024.

Will involve a 'change to terms' process for existing employees.

Rolled up holiday pay is now allowed.

Statutory payments ...

Employees on sick leave: £109.40 to £116.75 from 6 April 2024

Also, those on maternity/paternity etc: £172.48 to £184.03 from 7 April 2024

Maximum week's pay for redundancy pay increases to £700 from 6 April 2024



Some interesting cases – constructive dismissal

The claimant started working for the respondent because she was friendly with the manager.

There was a heated argument where the manager shouted at the claimant: "No wonder you have no friends".

The claimant resigned and brought a claim for constructive unfair dismissal.

The claimant was successful.

The ET said that no employee should be spoken to like that. It was a personal attack which was a serious breach of the claimant's employment contract that entitled her to resign.



Some interesting cases – unfair dismissal & discrimination

Following a stroke, the claimant, a Care Home Manager, asked to reduce her working days from 5 to 4 days a week. It was agreed to on a trial basis.

Two weeks after the trial started, she was required to attend a disciplinary hearing because of an alleged administrative error, then dismissed for gross misconduct.

The claimant brought claims of disability discrimination and unfair dismissal.

The ET held that it was a minor error which used as an excuse to dismiss.

The real reason, the ET found, was the flexible working request.

The claimant received £100,840.



Some interesting cases – unfair dismissal

A group of care home employees were dismissed because they failed to comply with the contractual Covid vaccine requirement policy.

They brought unfair dismissal claims.

The ET found that their dismissal was reasonable and proportionate.

They appealed the decision arguing that the ET did not properly assess the infringement on their human rights.

The appeal hearing is expected this year.



Looking forward...

- ✓ New law on TUPE (where a business is bought out or a service provision change takes place consultation rules are changing in June
- New statutory code of practice on "fire and re-hire" coming on 18th June 2024
- ✓ New duty to prevent sexual harassment from October 2024
- Prime Minister announced plans to take responsibility for fit notes away from GPs



Useful Resources





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Allow GLU's leading experts to empower you and your teams with Growth, Learning and Understanding.



To find out more scan here





Any Questions?







Connect with us











Brunch





Bryony Morris







Safety and Improvement Process

Bryony Morris

Head of Provider Monitoring and Assurance





Safety and Improvement Process Policy

- The Safety and Improvement Process was established in 2017
- Provides a formal multi-agency approach to ensuring safe and effective care across all Adult Care services in Hertfordshire
- The process ensures quality and contractual compliance is continuously assessed and reviewed while providing a mechanism for addressing and improving non-compliance and ineffective or unsafe service provision.



Who was involved?

- Several working groups made up of partners across Health and social care, including OP and ADS operational teams, commissioners, HPFT and ICB.
- Providers across a range of service types
- Review with an Expert by Experience across the whole policy
- Engagement and involvement from other key partners including HCPA, Healthwatch, Hertfordshire Fire and Rescue, CLCH and HCT.

Proposed Outcome

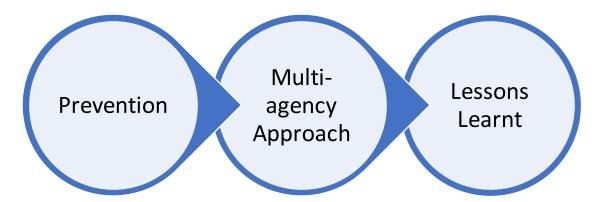
The outcome from the review of the SIP process will be to provide a co-produced multiagency policy and process for ensuring that care provision across Hertfordshire delivers safe and effective care for those who require it with clear mechanisms for addressing and supporting improvement through a multi-agency approach.

The revisions will ensure a system wide approach to ensuring the right mechanisms are agreed in relation to reviewing, escalating and addressing areas relating to safe and effective care, contractual compliance and continuous improvement for individuals receiving a care service in Hertfordshire which all agencies take responsibility for.

Prevention, reflection and identifying and embedding lessons learnt will be key to ensuring continuous improvement.

Key Changes

- Strengthening the **prevention** element of the policy
- Strengthening the **lessons learnt** and **continuous improvement** following a SIP to minimise providers falling back into the process.
- Improving the **reporting of SIPs at SQIG** (service quality improvement group) to focus on themes and triggers for clear actions across the partners attending this meeting.



Key Changes

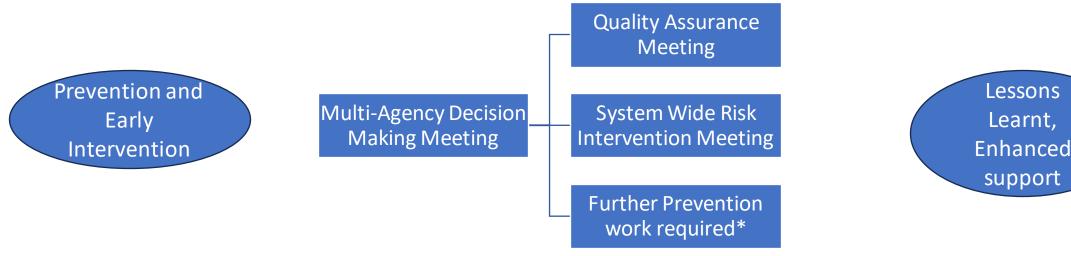
Changing the name of the 'SIP' meetings to a **System Wide Risk Intervention Meeting** (SWIM) so that the MDMM, QAM and SWIM sit under the umbrella term of SIP

Lessons

Learnt,

support

- Changing the focus of QAMs to be more preventative to ensure there are clearer distinctions with the serious interventions and actions required at a SWIM
- A greater emphasis on the **individuals voice** influencing the process at every stage



Creating a cleaner, greener, healthier Hertfordshire

Changes to Thresholds

The thresholds for meeting the requirement to be escalated into the Safety and Improvement Process should be triangulated to assess the impact on individuals. These include but are not limited to the following:

- Concerns arising reported, where the concern or pattern of concerns indicate a wider risk to individuals.
- Ineffective or concerns in relation to leadership, management, and oversight.
- Lack of quality and oversight of governance procedures.
- Concerns in relation to technical and clinical care which indicate an overarching risk.
- A significant injury or death, or a near-miss event, or potential for significant injury or death resulting from poor care or service delivery.
- Patterns or trends in care delivery, which can include ineffective infection, prevention and control measures, where remedial action is not taken or has had no impact and there are indications that adults are at risk of abuse or neglect.
- Notification from CQC of concern, enforcement action and/or expected Inadequate rating or local PAMMs rating of Poor.

Other Changes

- Ensuring Providers that are taken through the SIP service are based on clear evidence against the thresholds
- Amendments to quoracy to allow for senior health representatives to be included
- Expectation that **reports are shared in advance** and shared with the membership
- **Ability to take a Provider through the process** as opposed to multiple services for the same provider, at chairs discretion
- Clearly **outlining consequences** of SIP meetings, including embargo and termination of contracts
- Clearer guidance around Providers where there is not a contractual relationship.

Access to Policy

The revised policy can be found on the Hertfordshire Safeguarding Adults Board internet pages here:

safety-and-improvement-process-2024.docx (live.com)



Creating a cleaner, greener, healthier Hertfordshire





CQC's New Regulatory Regime

Paul Ridout, Managing Director

30 April 2024



CQC's New Regulatory Regime

WHAT IS CHANGING?



Provider Portal

- All your interactions with the CQC
- Faster, easier and more streamlined way to share information with the CQC
- March 2024 all Providers invited
- CQC Guidance

CQC Teams

- Operations manager
- Assessors
- Inspectors
- Regulatory Co-ordinators
- Regulatory Officers
- Specialist Advisors
- Experts by Experience



CQC Teams

Operations Managers

- Have oversight of the whole assessment team across all sector
- Have oversight of risk and systems in a local area
- Take some decisions around enforcement

CQC Teams

Assessors

- Sector specialists
- Review data, information and notifications about your service
- Decide when to assess your service
- Collect and consider evidence

CQC Teams

Inspectors

- Sector specialists
- Plan and carry out on-site assessment and enforcement action
- Involved in monitoring risk, scoring, writing reports and factual accuracy



CQC Teams

Regulatory Co-ordinators

- Work across sectors
- Main point of contact for any enquiries for assessment teams
- Triage information and collect evidence



CQC Teams

Regulatory Officers

- Support administrative duties
- For example, inspection planning and gathering the experiences of people using services.

Assessment Process Step 1: Review Step 6: Step 2: Plan Final Rating Assessment Report Step 5: Step 3: Factual Gather Accuracy Evidence Check Step 4: Make Judgement



CQC's Single Assessment Framework

Our framework will assess providers, local authorities and integrated care systems with a consistent set of key questions, from registration through to ongoing assessment

Aligned with "I" statements, based on what people expect and need, to bring these questions to life and as a basis for gathering structured feedback

Expressed as "We" statements; the standards against which we hold providers, LAs and ICSs to account

People's experience, feedback from staff and leaders, feedback from partners, observation, processes, outcomes

Data and information specific to the scope of assessment, delivery model or population group



Questions



Quality Statements and Evidence Categories

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		Safe						Effe	ctive	•			С	aring	g		Responsive					Well led								
Evidence categories	Learning culture	Safe systems, pathways and transitions	Safeguarding	Involving people to manage	environments	Safe and effective staffing	s optimisat	Assessing needs	Delivering evidence-based care and treatment	How staff, teams and services work together	Supporting people to live healthier lives	Monitoring and improving outcomes	Consent to care and treatment	Kindness, compassion and dignity	Treating people as individuals	ģ,	Responding to people's Workforce wellbeing and	enablement Person-centred care	ovision,	inform	g :	Equity in experiences and	Planning for the future	Shared direction and culture	Capable, compassionate and inclusive leaders	Freedom to speak up		Partnerships and Learning, improvement and	Environmental sustainability – sustainable development	Workforce equality, diversity and inclusion
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Feedback from staff and leaders																														
Feedback from partners																														
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Quality Statements

- https://www.cqc.org.uk/about-us/how-we-will-regulate/five-keyquestions-and-quality-statements
- Replace KLOES, prompts and rating characteristics
- 'We' and 'I' statements fall under each Quality Statement
- Link to Regulations
 - The Health and Social care Act 2008 (Regulated Activities) Regulations 2014
 - Care Quality Commission (Registration) Regulations 2009

Quality Statements Example:

Assessing needs

'We' statement

 'We' maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them

'I' statements

- I can get information and advice about my health, care ...
- I have care and support that is co-ordinated...
- I have care and support that enables me to live as I want to...

Priority Quality Statements

- Set of quality statements that are given priority
- Move towards being proactive rather than reactionary
- Priority Quality statements will represent the minimum scope to a routine assessment over a period of 1-2 years

Evidence Categories - under each Quality Statement:

- 1. People's experience of health and care services
- 2. Feedback from staff and leaders
- 3. Feedback from partners (stakeholders)
- 4. Observation
- 5. Processes
- 6. Outcomes

Evidence Categories - Care Homes and Supported Living

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Evidence categories	Learning culture	Safe systems, pathways and transitions	Safeguarding	people to manage	ronments	Infection prevention and	s optimisat	Assessing needs	Delivering evidence-based care and treatment	How staff, teams and services work together	Supporting people to live healthier lives	Monitoring and improving outcomes	Consent to care and treatment	Kindness, compassion and dignity	g people as individuals	choice and	Responding to people's Workforce wellbeing and	nent	Person-centred care	mation	to and involving	Equity in access	g for the future	Shared direction and culture	Capable, compassionate and inclusive leaders	speak up	and assurance	Partnerships and Learning, improvement and	ental sustainability – le development	Workforce equality, diversity and inclusion
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Evidence Categories - Care Homes and Supported Living

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Evidence categories	Learning culture	Safe systems, pathways and transitions	Safeguarding	Involving people to manage		tion prevention	Sare and effective staffing Medicines optimisation	Assessing needs	Delivering evidence-based care and treatment	How staff, teams and services work together	Supporting people to live healthier lives	Monitoring and improving outcomes	Consent to care and treatment	Kindness, compassion and dignity	Treating people as individuals	Independence, choice and control	Responding to people's	Workforce wellbeing and enablement	Care provision, integration		access	Equity in experiences and	Planning for the future	Shared direction and culture	Capable, compassionate and inclusive leaders	Freedom to speak up	8	Partnerships and	Environmental sustainability –	Sustainable development Workforce equality, diversity	
People's Experience																													\perp		
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No 'Outcomes' Quality Statements for adult social care

Outcomes

Are

Outcomes with a 'capital O' - referring to nationally available data sets

Not

outcomes with a 'small o' - seen through the People's Experiences quality statement and data on levels of satisfaction

CQC's NEW REGULATORY REGIME

- What is changing (continued)
 - Scoring and Rating
 - Reports
- Timelines
- Preparing for change
 - Assessment
 - Evidence
 - First Scores
 - FAC



Ratings





Ratings

Evidence Score

- •4 Exceptional Standard
- ·3 Good Standard
- ·2 Some Shortfalls
- ·1 Significant Shortfalls

Quality Score

- •Combine Evidence Scores to reach a total Quality Statement Score
- •25-38% = 1:Inadequate
- •39-62% = 2:Requires Improvement
- •63-87% = 3:Good
- •87%+ = 4:Outstanding

Key Question Score

- •25-38% = 1:Inadequate
- ·39-62% = 2:Requires Improvement
- \cdot 63-87% = 3:Good
- \cdot 87%+ = 4:Outstanding

Evidence Score - Caring Key Question Example

Kindness, compassion & Dignity										
Evidence category	Rating									
People's experience	4									
Feedback from staff and leaders	4									
Feedback from partners	2									
Observation	3									
Processes	3									
Outcomes	4									
TOTAL										
%										
Rating										

Treating, people as individuals										
Evidence category	Rating									
People's experience	3									
Feedback from staff and leaders	2									
Feedback from partners	2									
Observation	1									
Processes	3									
Outcomes	3									
TOTAL										
%										
Rating										

Independence, choice and control										
Evidence category	Rating									
People's experience	2									
Feedback from staff and leaders	4									
Feedback from partners	3									
Observation	3									
Processes	3									
Outcomes	3									
TOTAL										
%										
Rating										

Responding to people's immediate needs										
Evidence category	Rating									
People's experience	4									
Feedback from staff and leaders	4									
Feedback from partners	3									
Observation	2									
Processes	2									
Outcomes	2									
TOTAL										
%										
Rating										

Workforce wellbeing and enablement										
Evidence category	Rating									
People's experience	3									
Feedback from staff and leaders	3									
Feedback from partners	4									
Observation	4									
Processes	3									
Outcomes	3									
TOTAL										
%										
Rating										

Ratings

Evidence Score

- 4 Exceptional Standard
- · 3 Good Standard
- · 2 Some Shortfalls
- · 1 Significant Shortfalls

Quality Score

- Combine Evidence Scores to reach a total Quality Statement Score
- 25-38% = 1:Inadequate
- 39-62% = 2:Requires Improvement
- 63-87% = 3 :Good
- 87%+ = 4:Outstanding

Key Question Score

- 25-38% = 1:Inadequate
- · 39-62% = 2:Requires Improvement
- \cdot 63-87% = 3:Good
- \cdot 87%+ = 4:Outstanding

Quality Score - Caring Key Question Example

Kindness, compassion & Dignity										
Evidence category	Rating									
People's experience	4									
Feedback from staff and leaders	4									
Feedback from partners	2									
Observation	3									
Processes	3									
Outcomes	4									
TOTAL	20/24									
%	83%									
Rating	Good (3)									

Treating, people as individuals										
Evidence category	Rating									
People's experience	3									
Feedback from staff and leaders	2									
Feedback from partners	2									
Observation	1									
Processes	3									
Outcomes	3									
TOTAL	14/24									
%	58%									
Rating	RI (2)									

Independence, choice and control										
Evidence category	Rating									
People's experience	2									
Feedback from staff and leaders	4									
Feedback from partners	3									
Observation	3									
Processes	3									
Outcomes	3									
TOTAL	16/24									
%	66%									
Rating	Good (3)									

Responding to people's immediate needs										
Evidence category	Rating									
People's experience	4									
Feedback from staff and leaders	4									
Feedback from partners	3									
Observation	2									
Processes	2									
Outcomes	2									
TOTAL	17/24									
%	71%									
Rating	Good (3)									

Workforce wellbeing and enablement		
Evidence category	Rating	
People's experience	3	
Feedback from staff and leaders	3	
Feedback from partners	4	
Observation	4	
Processes	3	
Outcomes	3	
TOTAL	20/24	
%	83%	
Rating	Good (3)	

Ratings

Evidence Score

- 4 Exceptional Standard
- · 3 Good Standard
- · 2 Some Shortfalls
- · 1 Significant Shortfalls

Quality Score

- Combine Evidence Scores to reach a total Quality Statement Score
- 25-38% = 1:Inadequate
- 39-62% = 2:Requires Improvement
- 63-87% = 3:Good
- 87%+ = 4:Outstanding

Key Question Score

- 25-38% = 1:Inadequate
- · 39-62% = 2:Requires Improvement
- \cdot 63-87% = 3:Good
- \cdot 87%+ = 4:Outstanding

Ratings

Evidence Score

- •4 Exceptional Standard
- ·3 Good Standard
- ·2 Some Shortfalls
- ·1 Significant Shortfalls

Quality Score

- •Combine Evidence Scores to reach a total Quality Statement Score
- •25-38% = 1:Inadequate
- •39-62% = 2:Requires Improvement
- •63-87% = 3:Good
- \bullet 87%+ = 4:Outstanding

Key Question Score

- 25-38% = 1:Inadequate
- \cdot 39-62% = 2:Requires Improvement
- · 63-87% = 3:Good
- \cdot 87%+ = 4:Outstanding

Key Question Score - Caring Key Question Example

Quality Statement	Score
Kindness, compassion & Dignity	3
Treating, people as individuals	2
Independence, choice and control	3
Responding to people's immediate needs	3
Workforce wellbeing and enablement	3
Total score	14/20
%	70%
Rating	Good

The CQC calculate a percentage score by dividing the total (in this case 14) by the maximum possible score. For the Care key question, this is 5 quality statements multiplied by the highest score for each statement which is 4. So the maximum possible score is 20.

Here, the percentage score is 70% (14 divided by 20)

Using the thresholds, this key question falls within 63 % and 87%.

The Caring key question is rated Good

Rating Limiters

New <u>Guidance</u> states:

"If the key question score is within the:

Good range, but there is a score of 1 for one or more quality statement scores, the rating is limited to **requires improvement**;

Outstanding range, but there is a score of 1 or 2 for one or more quality statement scores, the rating is limited to **Good.**"

 Old rating limiters related to Well-Led and also overall to RI if there was a breach of regulations in any domain.

Ratings

- Scores will indicate upper and lower threshold of rating
- Percentage scores used as benchmarking
- CQC can update evidence and quality statement scores at any time
- CQC can update ratings at any time

Reports

- Shorter inspection reports
- Collection of summaries
- Include benchmarking information
- Standard template text remains
- Written for the public, not the Provider

Reports

Abigail Court (Domicillary Care)

"We looked at 5 quality statements; Safeguarding; Involving people to manage risks; Safe and effective staffing; Independence, choice and control and Equity in experiences and outcomes."

Reports

Abigail Court (Domicillary Care)

Safeguarding (in Safe Key Question)

"There were effective systems, processes and practices to ensure people were safe from the risk of harm and abuse.

Staff understood their responsibilities to keep people safe. One staff member said, "I would always raise any concerns and speak up if I had a problem." Leaders notified the local authority and CQC of any safeguarding concerns where required.

People told us they felt safe and confident to raise any concerns they might have."

TIMELINES

End of transition period – June/July 2024

Until end June 2024

Regularly review the new SAF

Start July 2024

- Decide new frequencies of assessment
- Publish Priority Quality Statements
- Publish detailed schedule for planned assessments



Guidance and toolkits

- CQC guidance '<u>Our New Approach to</u>
 <u>Assessment</u>' cover quality statements and evidence categories
- **Skills for Care** toolkits 'Good and Outstanding (GO) online inspection toolkit' cover the current CQC Assessment Framework and new SAF
- Helpful for providers if they want to prepare for CQC's new monitoring & inspection regime.

Assessment - Thresholds

- Outstanding terms like 'Creative/innovative/going the extra mile/good levels of person-centred care
- Good The Quality Statements are pinned at 'Good' level
- Requires Improvement Sometimes/not always/ possible regulation breaches
- Inadequate Level of care 'not happening'/regulation breaches

Feedback

- People's experience
- Feedback from staff and leaders
- Feedback from partners



Feedback - People's experience

- Phone calls
- Emails
- Complaints
- Compliments
- Survey results
- "Give feedback on care" forms
- Interviews with residents and relatives
- Focus groups



Feedback - Feedback from partners

Interviews

Engagement events



Observation - On-site assessments / inspections

- How staff interact with people
- The environment
- Equipment and premises



Off-site activity

- Annual PIR using existing collection method
- Online reviews of clinical records
- Direct requests for evidence
- Online interviews with staff
- "Providers do not need to submit evidence to us proactively. We will ask you for anything we need."

Processes - Governance

- Systems and processes
- Policies and procedures
- Visions and strategy and SOP
- Financial viability and Business Continuity
- Quality assurance and Auditing
- Quality initiatives
- Improvement plans
- Training and competency assessments
- Risk management
- Equality and Diversity
- Incidents investigations



First Score

"For each of the quality statement we look at, we will collect evidence and score all the relevant evidence categories. This means the scores for those quality statements will be entirely based on our new assessment."

PREPARING FOR CHANGE

First Score – Old rating converted to a score

First Score	Current Key Question Rating
4	Outstanding
3	Good
2	Requires Improvement
1	Inadequate

PREPARING FOR CHANGE

First Score - Tweaks

- 'Workforce wellbeing and enablement' quality statement uses your old Well Led rating
- 'Care provision, integration and continuity' quality statement uses your old Well Led rating
- Providing information quality statement uses your old Effective rating
- No score is given for the quality statement 'Environmental Sustainability', as it is not something you have been expected to look at so far.

PREPARING FOR CHANGE

Factual Accuracy Comments

CQC's aim:

"Providers will be able to review our draft inspection judgements though an improved process for checking the factual accuracy of draft reports"

Reality:

- Shorter, more succinct reports
- But is the on-going Assessment an Inspection?
- But if CQC does carry out an inspection it HAS to produce an inspection report

WHAT IS CHANGING?

Factual Accuracy Comments - Example

- <u>Title</u> Care Quality draft assessment for [xxx]
- <u>Summary</u> The service is not performing as well as it should and we have told the service how it must improve
- <u>Section</u> 'Overall People's Experience'
- <u>Key Question summary</u> This service was not always [safe]
- Scoring Quality statements 3 (Good), Key Question RI, Overall RI

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Jackie Taylor

Head of Business Development

and

René Rogers

Business Development Coaching Manager







Services We Offer





Business
Development
Business Coaching

Executive Coaching

New:

- Supervision for Managers
- Grow Your Business



Business
Development
Inspection & Monitoring

Support

Pre-Inspection

New:

CQC Single Assessment Evidence Categories Tool

Post-Inspection

- Action Planning Support
- Governance & Quality
 Assurance

Coming Soon:

PAMMs Monitoring Tool



Business Development

Business Continuity Planning

ACE



Business Development

Impartial Feedback Service

Stakeholder Feedback on service



Culture

- 6 C's Culture Check
- Swell

New:

Cultural Values in Care Survey





Business Development Coaching Manager



Business Coaching has 3 main services within the offer:

Executive Coaching

New

- Supervision for Managers / Nominated Individuals
- Grow Your Business



Executive Coaching

HCPA offer Executive Coaching to help providers reach their chosen goals.

The sessions are designed to improve workplace performance by focusing on the specific goals set, and the competencies and skills required to achieve them.

There are currently 5 x 60 min sessions on offer (funded), and it is suggested intervals of between 1-4 weeks between sessions works best.



During a typical coaching session we may use the following tools:

- GROW Model
- SWOT Analysis
- Wheel of Work







Supervision for Registered Managers/Nominated Individuals

HCPA are now offering Supervision for Registered Managers who are also the Nominated Individuals.

Our offer includes 5 x supervisions a year, to have bimonthly, and an annual appraisal at the end of the year.

By actively engaging in HCPA's Supervision for Managers programme, you are demonstrating that you take your own professional development seriously and can demonstrate on-going CPD.





Focus





Leadership Focus

Grow Your Business

Starting or managing a care business is an exciting and rewarding venture, however it also needs careful planning. It is important to know where to begin and where to find the right information to ensure the success of the business.

HCPA are offering this service to support the provider with the following areas:

- PHASE 1: Business Start Up signposting only
- PHASE 2: Governance Health Check
- PHASE 3: Review of Business Plan, Marketing Plan, Financial Forecasting, Staffing, Recruitment & Retention | SWOT Analysis
- PHASE 4: Business Growth Ideas Generation | Short/Long Term Action Planning | Support Network/Partnerships

5 sessions in total with pick and mix options for some phases



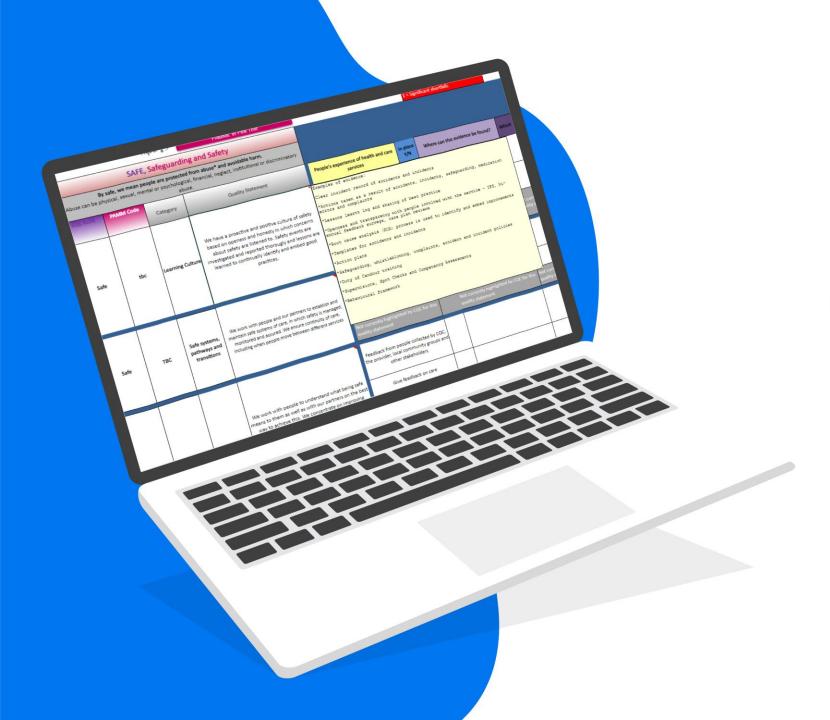




- Pre & Post Inspection Support
- Governance & Quality Assurance

New

- CQC Single Assessment Framework Evidence Categories
- Coming soon: PAMM's Inspection Tool





Pre-Inspection

5x 2 hr sessions (trial) working through the new CQC single Assessment Framework Evidence Categories Tool we have developed that maps out which of the 6 evidence categories are required for each quality statement based on your service type.







Evidence categories

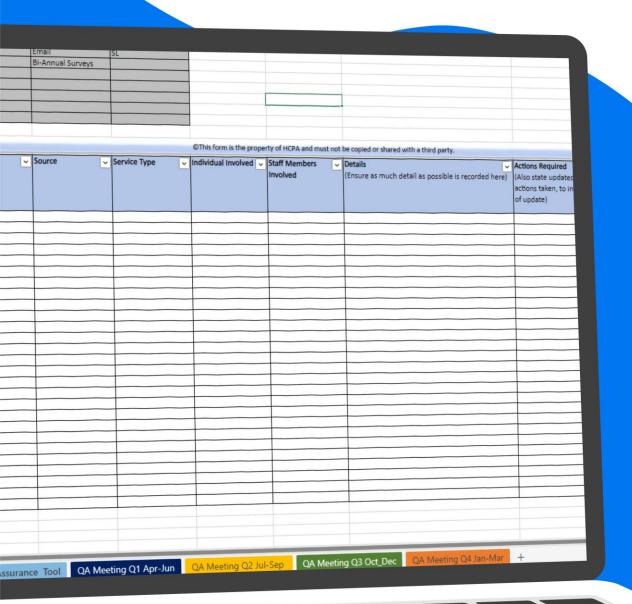
People's experience of health and care	In pla	ff are aware of this and how?	Feedback from Staff and Leaders	In place Y/N	Where can this evidence be found?	Which staff are aware of this and how?
services	Y/N		Feedback from staff collected by CQC and the provider			
Feedback from people collected by CQC, the provider, local community groups			Feedback from leaders			
and other stakeholders			Whistleblowing			
Give feedback on care			Feedback from staff collected by CQC and the provider			
			Feedback from leaders			
			Whistleblowing			
the,			Feedback from staff collected by CQC and the provider			
Give feedback on care			Feedback from leaders			
			Whistleblowing			
Feedback from people collected by CQC, the provider, local community groups and other stakeholders			Feedback from staff collected by CQC and the provider			
Give feedback on care			Feedback from leaders			
			Whistleblowing			



Post-Inspection

- 3 x 2 hr sessions
- Action Planning/ Service Improvement Planning for PAMMS and CQC

									Service Type:					
Н		SIP for <company name=""></company>												
Ш		Daramanda	tion: Courte a	reals file that show	comments a change	a implemented. The come arounder that were highlighted	as requires improvement and evidence how lessons learnt have been turned	lists actions and sensedures	Name of Site:					
Ш									Action Plan Owner:					
Ш		Becom	amendation: M	teinbers a log of 13	umphasty Complime	nix/ Issues/ New Misses/ Issues requiring Safeguarding esti	dation & Evidence of Periodic Quality Assurance Benevi Meetings (addressin	g actiong key themes)	Ref No: the					
Ш						Pithis form is the property of LKSVA and must not be co	pred or shared with a third party.							
Ц						CORRECTIVE ACT								
F	Di V	Source: (KLO	Catego	Priority	ISSUE/S HIGHLIGHTED IN LAST CQC/ HCC INSPECTION REPORT	ACTIONS & PROGRESS UPDATES Describe clearly, corrective action To be Taken / Taken	ACTION OWNER	LEAD RESOURCE/S					
	on Plan	//www.i	Pamms Ref		Amber - Medium Green - Low	(it would be a good idea to link it in with the relevant KLOE/ PAMM's Code)	"Haw will you evidence reviews, actions and embed continuous. learning*		to impainent charge;					
П			I.e. Safe (tibc)		RAG	Reviewing and agreeing priority areas from CQC/HCC/CCG/HCPA action plans	Please use this column to also provide any updates (these should be dated i.e. 01/01/22: Newsletter to include Visiting Protocol)	Name/s	Name/s					
ć	dd/mm/yy	PAMM's		Care & Support Planning		MCA, training is needed and should have 95% compliance. A plan is needed to sustain ongoing training								
		PAMM's		Training		Training Matrix is not currently fit for purpose (not user friendly, difficult to pull out key information for governance purposes)								
П		cqc		Recording and Reporting		Insight Mandatory training is not at a satisfactory level								
H	$\neg \neg$	cqc		IPC		MCPC!								
H	+			Safeguarding										
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14	\rightarrow			Management Medication										
Ш				Administration										
Ш				Notifications										
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				Equipment										
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Щ				Financial										





Governance and Quality Assurance

- 3 x 2 hr Sessions
- Ensured Robust Systems and Processes are in place





- BCP consists of 8x 1hour weekly sessions
- BCP Tool was developed as a result of a HCC led steering group
- Good feedback from regulators for Providers who have completed the support / developed robust BCPs



Business Continuity Plan Toolkit

for Care Providers

DOCUMENT CONTROL INFORM	IATION
Name of service Author/ Lead Version Number Date of Last Review/ Update Date of Next Review Review Frequency Testing Exercises	<pre><enter company="" name=""> <enter full="" name=""> <enter number="" version=""> <enter and="" date="" if="" it="" just="" or="" reviewed="" state="" updated="" was=""> <enter date=""> <enter date=""> <this and="" annual="" as="" be="" best="" ensure="" every="" information="" is="" key="" practice="" quarter="" should="" to="" updated="" when.="" would=""> List 4 planned testing exercises for potential BCP threats that could occur in the year </this></enter></enter></enter></enter></enter></enter></pre> List 4 planned testing exercises for potential BCP will be tested and how i.e. desktop as <be (specify="" a="" and="" as="" bcp="" be="" desktop="" drills="" fire="" for="" frequency="" how="" i.e.="" life="" periodic="" provide="" real="" specific:="" tested="" timeline="" well="" when="" will="" your=""></be>
	e.g. January: Fire Drill - Full Mock evacuation, residents and staff. e.g. October: Test adverse weather threat, this will be tested within a monthly team meeting as a desktop exercise Note: be strategic, test scenarios based on the time that they are likely to occur











CONTENT PAGE

Section	Page No
Document Control	
Business Continuity Plan (BCP) Response Team - Key Contacts	
Escalation Process Workflow Chart	
Other Useful Contacts	
Service User One Page Profile (& NOK, POA) Contact & Info	
Staff One Page Profile/ Contact Details	
Business Priorities - Business Impact Analysis	
Risk Priority Key	
Critical Level Key	
Business Continuity Threats and Mitigations	
Critical Business Functions that must be operational	
Business functions /areas can be temporarily postponed during emergencies	
Business functions /areas can be temporarily postponed during emergencies	





BUSINESS CONTINUITY PLAN (BCP) RESPONSE TEAM - KEY CONTACTS

Name		Surname	Role	Contact Number (Office and Mobile)	Threat Lead For	Can They Invoke The BCP	Who will deputise in their absence?
				Number & state if work			
<enter n<="" td=""><td>lame></td><td><enter surname=""></enter></td><td><enter role=""></enter></td><td>phone></td><td><enter drill="" fire="" i.e.="" threat=""></enter></td><td><enter either="" no="" or="" yes=""></enter></td><td><enter name=""></enter></td></enter>	lame>	<enter surname=""></enter>	<enter role=""></enter>	phone>	<enter drill="" fire="" i.e.="" threat=""></enter>	<enter either="" no="" or="" yes=""></enter>	<enter name=""></enter>
					All Threats		

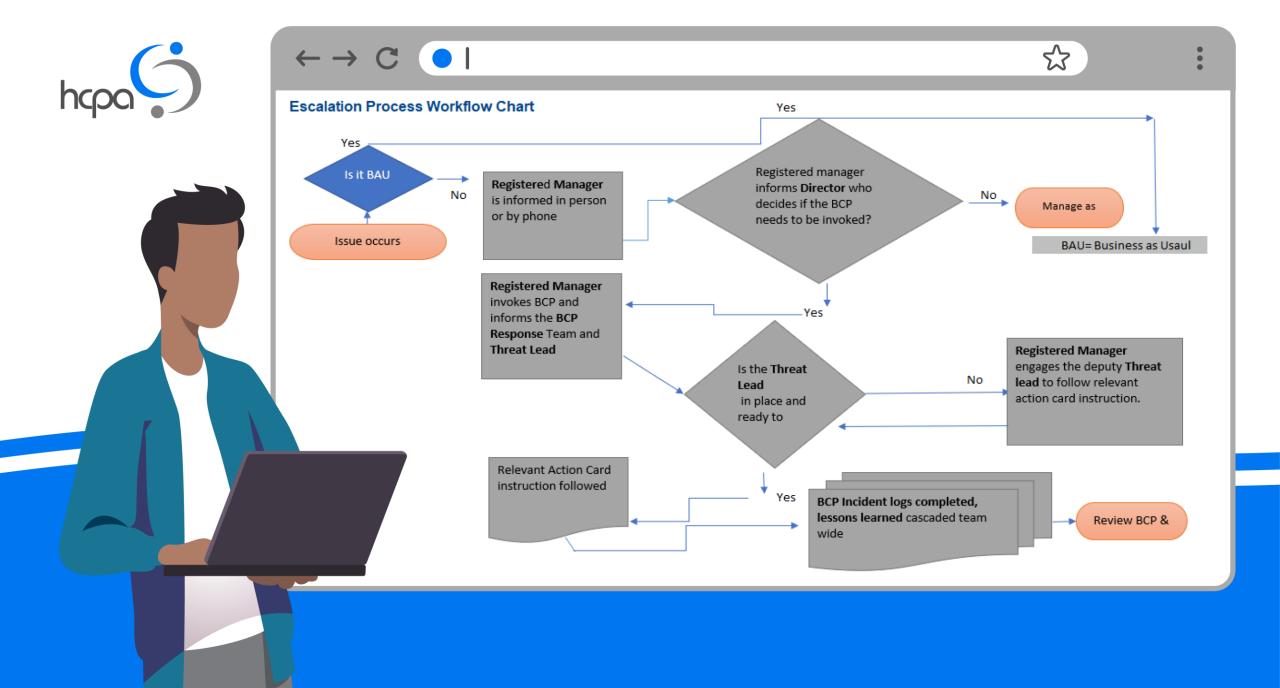
Notification Procedure

<Enter details of who, what, how and why for example: Contact Manager in the first instance by phone or in person, informing them of incident. Manager will then notify the Director by phone or in person and a decision is made to invoke the BCP and signpost to the relevant threat lead who refers to the relevant threat based action cards for detailed guidance, Logs the issue and arranges a debrief to capture lessons learnt which they then share with the wider team.>

















Prganisation - Be specific, include their name h	Primary Contact Name (if known)	Contact Number (Office and Mobile)	Policy/ Reference Number	How often is the arrangement reviewed
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BUSINESS PRIORITIES

Risk Probability:

High: Means, expected to occur in most circumstances **Medium:** Means, fairly likely to occur at some time

Low: Means, unlikely to occur but could do so at some time

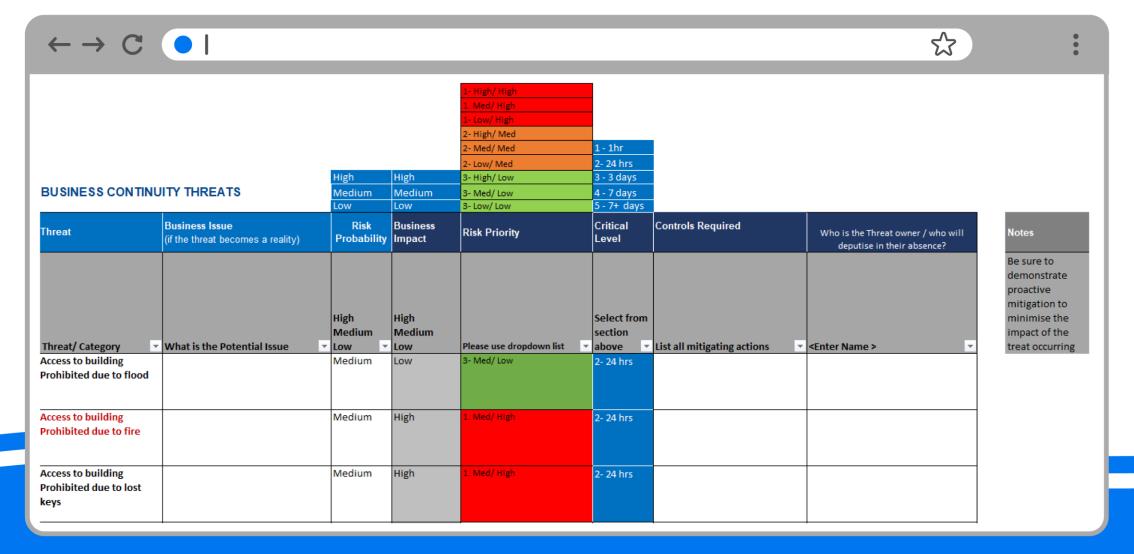
Business Impact:

High: Would cause a major disruption to the service, would affect clients

Medium: Would cause noticeable disruption, may affect clients **Low:** Would cause insignificant disruption, may not affect clients

Risk Priority Key	Measures Required
1-High/ High & Med/ High & Low/ High	Requires active management and control to manage the risk down and maintain exposure to the risk at an acceptable level
2-High/ Med & Med/ Med & Low/ Med	Requires contingency planning with early warning mechanisms and risk mitigation
3- High/ Low & Med/ Low & Low/ Low	Requires periodic review and assessment of risk

Critical Level Key	Maximum Allowable Down Time (Include time it would take to restore the function to full operation)	This is Optional
1	Activity to be restored within 1 hour	functions that need to be restored in this time frame
2	Activity to be restored within 24 hours	functions that need to be restored in this time frame
3	Activity to be restored within 3 working days	functions that need to be restored in this time frame
4	Activity to be restored within 7 working days	functions that need to be restored in this time frame
5	Activity to be restored post 7 working day	functions that need to be restored in this time frame











Action Card Gas Leak

Triger/s	<state e.g.="" gas="" smell="" triggers=""></state>	
	Weekdays 9am-2pm Maintenance Person To Take Control of Incident	_
Step	Procedure if you smell gas:	
Step 1	If you smell gas	
Step 2	Do not turn on/off light switches or anything else that may cause a spark	
Step 3	Check the gas isn't left on in the kitchen. If it is, turn off and open windows	
Step 4	If cause is unknown, turn main gas supply off. This is located in the cupboard under the staircase	
Step 5	Open windows, close fire doors and move residents in the vicinity to the fire zones which is : <enter affected="" area="" away="" be="" detail="" from="" is,="" of="" should="" that="" the="" where="" which=""></enter>	
	The heating will stop working. Follow the Power supply failure plan to ensure residents are kept warm- do not use electric heaters in the zones where the gas is (boiler room, kitchen, laundry room and the rooms directly	
Step 6	above these as an example)	1
Step 7	If the above has not rectified the issue, Call the Gas Emergency Number <enter 0800="" 111="" 999="" i.e.="" number="" the=""> and advise them that there is a gas leak</enter>	
Step 8	Do Not smoke or use any flames within the home	
Step 9	Inform the oncall manager of the situation <enter and="" contact="" details="" name="" their=""></enter>	
	Procedure for restarting the boiler: once the gas company has advised that it save to do so, restart the boiler -Flashing blue light indicates that the boiler has cut out -Step1 - Pull down the front flap	
	-Step 2 - turn the dial anti-clockwise (until it clicks) to reset position for 10 seconds	
	-Step 3 - Wait till the boiler restarts, a blue light should be on continuously along with a small green light. The	
Step 10	boiler should now be reset, if it is not, repeat step 1-3.	
	Incident close down procedure: BCP lead ensures that the incident has been logged, conducts a debrief and	
Step 11	discusses lessons learnt and reviews the BCP if required	Generio
Step 12	Communication: Thank the team that have helped, learning shared with wider team including service users and their families or friends	Generio







The Consequences of not having a business continuity plan can include some or all of the following:

- Business interruption
- Supply chain failure
- Injury or death

- Financial loss
- Employee productivity
- Business reputation

What are our providers saying?



We have a brand new BCP in place, which is much more user friendly and detailed than what we had in place previously.

- NOUVITA











■ ACE – This service compliments our BCP offer





Stakeholder Feedback



6 C's Culture Check

Swell

New: Cultural Values in Care Survey

Impartial Feedback Service

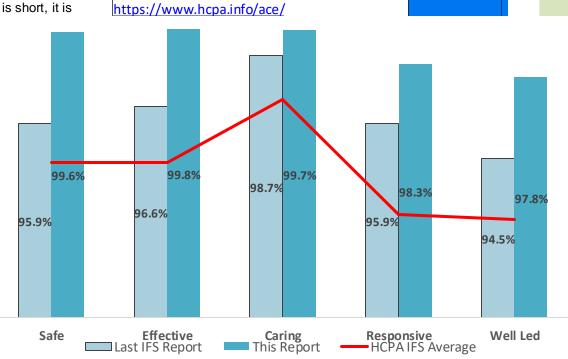


Action	Links
Utilise NICE assessment tools to help your organisation with the	https://www.nice.org.uk/guidance/published?ty
. , ,	pe=sc
Safe 3. The service may be understaffed, in which case it is	https://www.hcpa.info/herts-good-care/
recommended that you utilise the HCPA Recruitment Service - it	
is currently free to members and the team will support you in all	
aspects of recruitment. If you are currently using the service and	
have any feedback on the service, please do get in touch.	

Safe 3. To support the provision when staffing is short, it is suggested that you set up agreements with recruitment agency in readiness for any er we have set up our Agency Charter of Exc

where we have identified agencies that will standards, follow the link to see agencies n

Safe 3, If you are struggling to retain staff, at the culture within the organisation, to hel areas that can be improved. The 6C's culti you with this. For more information follow to website and contact the Business Developn



People Using Service - Overall Satisfaction											
8%		5%		5%		7%		5%			
92%		95%		95%		93%		95%		100%	
	E	FFECTIV	E	CARING	RE	SPONSI	VE V	VELL LE	_	TOTAL POSITIVE	

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	TOTAL	
	8%	92%	0%	0%	0%	100%	
	5%	95%	0%	0%	0%	100%	
	5%	95%	0%	0%	0%	100%	
	7%	93%	0%	0%	0%	100%	
	5%	95%	0%	0%	0%	100%	
E	10	0%					

rates the overall level of satisfaction recorded by People Using Service
II the Strongly Agree and Agree responses as a percentage of all the
questions they answered.

Loyalty Matrix

By combining overall job satisfaction and an employee's anticipated tenure (that is, how long they believe they will stay at that organisation) we can calculate a Loyalty Matrix which gives an even stronger sense of how employees feel about their jobs.

WHAT DO THE GROUPS IN THE LOYALTY MATRIX MEAN?

Committed Loyalists	Through the positive contrib	who are highly satisfied with their jobs and have a long-term intention to stay with their organisation. butions they make to productivity, customer satisfaction, the morale of their co-workers and ultimately, cial performance and overall success, they are the foundation of their organisation's human capital.
Satisfied Opportunists	are both an asset and a lial	fied with their jobs but are not deeply committed to the organisation in the long-run. As a result, they bility. They are happy and productive workers, but they represent a risk of employee turnover. Their lack anisations means that they can be lured away by other employers.
Change Seekers		ely on their way out of their organisations, lacking both commitment and intention to stay. They are apt their more committed colleagues and may also be a drag on the morale of those around them.
Dissatisfied Compromisers	These are the employees valurnover costs, they may soby lowering the morale of o	Example
	Care Staff	
Committed Loyalists	16	March 2024
Satisfied Opportunists	1	
Change Seekers	2	

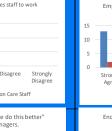
Dissatisfied Compromisers

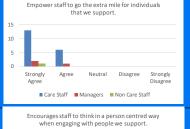
Example March 2024



Care Continued

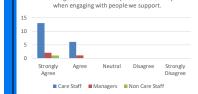






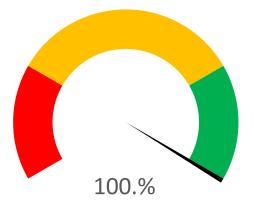


Comments Regarding Care



From Non Care Staff

Care is important for mental and physical health of a person.	organisation strongly promotes t	
Total Staff Employed	25	re complete face to face tance of Health and
Total Responses Received	23	ection, we do practical addition, senior staff
Care Staff Responses	19	k PPE is being used. We certificates, we tell
Manager Responses	3	one has done when they rs and their families.
Non Care Staff Responses	1	is and their farmics.



Disagree

■ Care Staff ■ Managers ■ Non Care Staff

Strongly

Positivity Assessment

There are some very postive comments from your staff members and it is lovely to hear that successes are celebrated during Team meetings. To maintain positivity and inclusive team spirit, including all days, nights and part time staff it may be an idea to include a staff notice board in a prominent place. It is good to see that Mangement have identified issues with communication and are putting appropriate actions in place. Staff are clearly encouraged to report any safeguarding concerns, but may need a little more encouragement/support to report any health & safety concerns or complaints. The Management clearly encourages staff intergration and enable contact to support staff development and improvement, perhaps a suggestion box may also be useful. There is good use of initivate ideas and incentives to encourage all staff to atend team meetings and communicate through "WhatsApp' group. It is clear and apparent that the majority of staff are committed to the company. Have you considered joining The Care Professional Standards Academy? This is a platform where Care Professionals can log training certificates and qualifications and gain access to exclusive rewards and discounts. Employers can also utilise the platform to track and monitor staff training and development, and incentivise heir staff to engage with further training. We will ask a member of the team to make contact with you shortly to discuss this further



Cultural Values in Care



This table will help you quickly identify where your staff and people who use your service most agree that you deliver excellent culturally appropriate care and the areas where you may want to investigate opportunities to improve.

Please refer to the questions on the next three pages.

		Person u		Staff N	Staff Member		nager	1	Α	Ш		
		Strongly Agree	Agree	Strongly Agree	Agree	Strongly Agree	Agree		Strongly Agree	Agree	_	
	K1	75%	25%	67%	33%	67%	33%					
(K2	50%	50%	33%	67%	67%	33%					
KIND	K 3	50%	25%	33%	0%	67%	33%		57%	33%		90%
•	K4	75%	25%	67%	0%	33%	67%					
	All Kind	63%	31%	50%	25%	58%	42%					
								1				
	H1	50%	50%	67%	33%	33%	67%		52%	43%	95%	
ST	H2	75%	25%	33%	33%	33%	67%					
HONEST	H3	50%	50%	67%	33%	33%	67%					95%
¥	H4	50%	25%	67%	33%	67%	33%					
	All Honest	56%	38%	58%	33%	42%	58%					
	D4							1				
	R1	33%	67%	33%	33%	67%	33%					
ECT	R2	25%	75%	67%	33%	67%	33%					
RESPECT	R3	25%	50%	33%	67%	33%	67%		40%	50%		90%
RE	R4	25%	75%	33%	0%	33%	67%					
	All Respect	27%	67%	42%	33%	50%	50%					

				A	II Resp	onses - C	overall Sa	tisfact	tion					
Strongl	y Agree	Ag	gree	Disa	igree	Strongly o	lisagree 💮	I'm not s	ure - Please	tell us why	/ in the co	mment box		
Kind	ŀ	Honest		Respect		Courageou	s Whole Person		on	n Flexible		e Prou		Overall
8% 3%		5%		8% 3%		10%		3%		8% 5%		16%		Satisfaction
3%	% 43%		53%		38% 43%		48%		35% 49	N.	38%	41%	41%	90%
	Pe	ople U	sing Se	rvice						Staff N	Летb	ers		
		Agree	Strongly Ag	gree						Agree	Strongly Ag	ree		
31% 38% 63% 56%	67% 27%	38%	69% 25%	53%	899 54%		25%	33% 58%	33% 42%	33%	58%	67% 50%	86%	
KIND	RESPECT	COURAG	WHOLE	FLEXIBLE	PROUD	POSITIVE	KIND	HONEST	RESPECT	COURAG	WHOLE	FLEXIBLE	TOTAL	
	Strongly	Agree	Disagree	Strongly	I'm not	TOTAL			Strongly Agree	Agree	Disagre	Strongly	I'm not	TOTAL
Kind	Agree 63%	31%	6%	disagree 0%	sure 0%	100%	Kind	Kind		25%	17%	disagree 8%	sure 0%	100%
Honest	56%	38%	6%	0%	0%	100%	Hones		50% 58%	33%	8%	0%	0%	100%
Respect	27%	67%	0%	7%	0%	100%	Respect		42%	33%	25%	0%	0%	100%
Courageous	38%	56%	6%	0%	0%	100%	Courageous		50%	33%	17%	0%	0%	100%
Whole Person	25%	69%	6%	0%	0%	100%	Whole Pe	erson	42%	58%	0%	0%	0%	100%
Flexible	53%	20%	13%	13%	0%	100%	Flexibl		25%	67%	8%	0%	0%	100%
Proud	54%	31%	15%	0%	0%	100%	Proud		50%	33%	8%	8%	0%	100%
TOTAL POSITIVE	89	9%					TOTAL PO	SITIVE	8	6%				
This graph illustrates hows all the Strongly		Agree resp					This graph illuall the Strongl							

Governance Training That Compliments This Offer

Champion Training

- ADS Positive Behaviour Support
- DementiaPersoncentred
- Falls & Frailty
 - Dementia
 Positive
 Behaviour
 Support
- Enabling & Mobility
- Care Culture
- Medication
- Care car
- Safeguarding
- IPC

Mental Capacity

To Support Governance/ Manager Responsibilities

- Governance: Caring, Effective, Responsive, Safe, Well-led
- Dementia
- Medication
- Moving & Assisting
- Safeguarding
- Mental Capacity



Contact Us!

(A) HCPA Business Development Team

businessdevelopment@hcpa.co.uk

② 01707 536020





Davyd Strahan-Hughes

Leadership Education Manager









TEAM BUILDING TOOL

Leading Cultural Transformation

Intent





"I suppose it is tempting, if the only tool you have is a hammer, to treat everything as if it were a nail.."

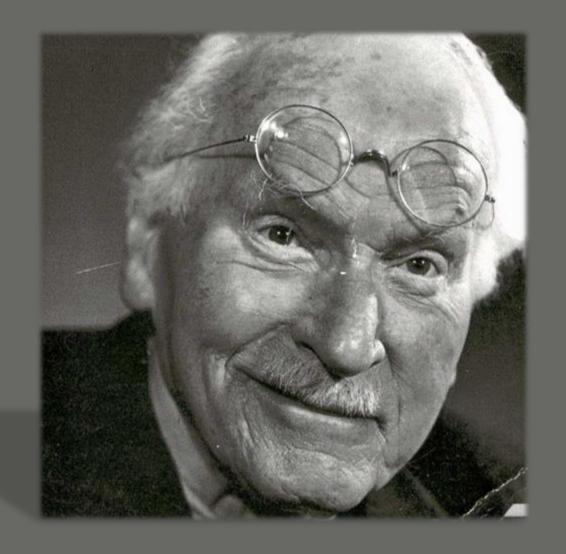
Abraham Maslow, psychologist



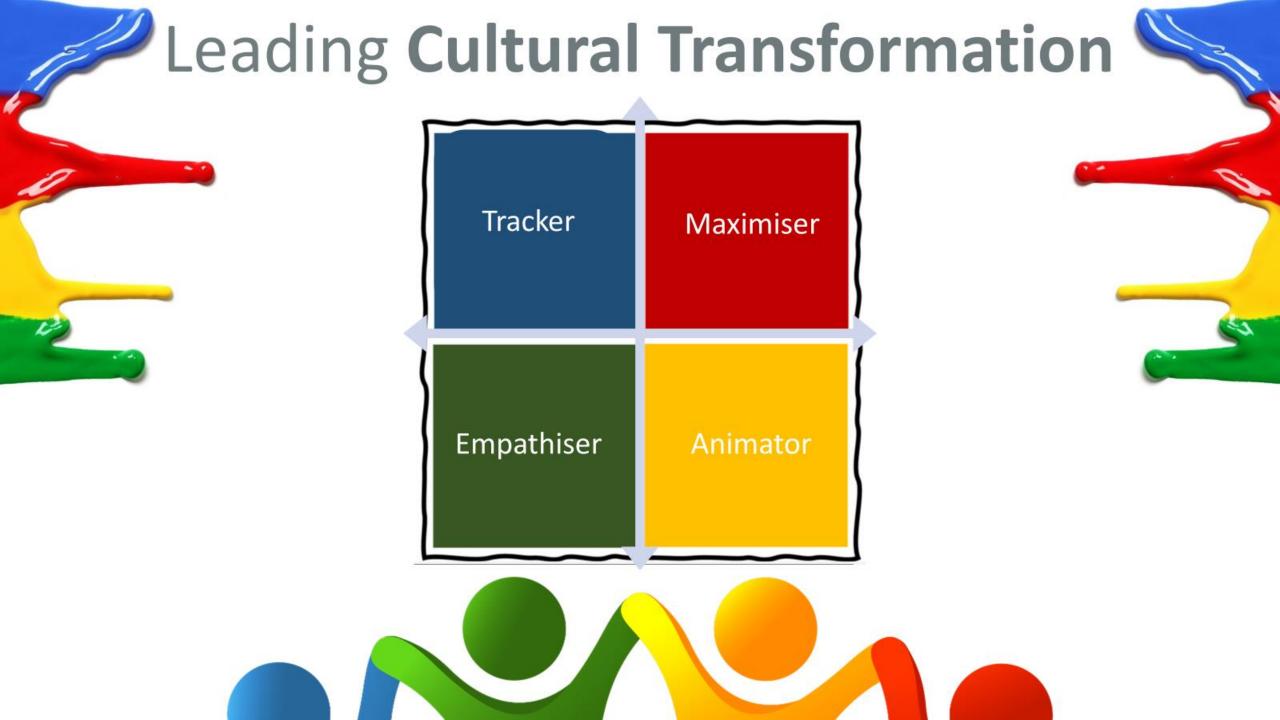


Carl Gustav Jung (1875 – 1961)

- Established an arm of psychology known as 'Analytical Psychiatry'
- First featured in his 1921 publication 'Psychological Types'







ENGAGING FOR SUCCESS

BIS published **Engaging for Success** (more commonly known as the MacLeod Report), a study by **David MacLeod** and **Nita Clarke** of over 300 organisations across the UK demonstrating high **employee engagement** and high performance.

They concluded that the common factors in all these organisations were the Four Enablers of engagement.

Average sick days per year:

ncreased

Employee

Engagement

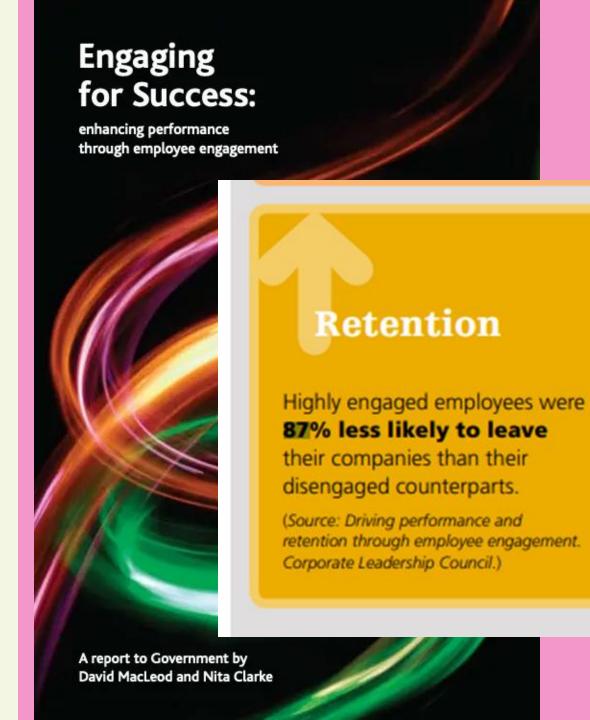
Gallup

Engaged Staff

2.7

Disengaged Staff

6.2



Cultural Transformation Programme

The 4 Pillars of Employee Engagement (The Macleod Report)

courageous and

GOV.UK

Well-led:

statements

assess care

Universal

Sector

Values

quality

used to

Strategic Narrative

Shared direction and culture

Engaging Managers

Employee Voice

Freedom to

Organisational Integrity

Workforce equality,

Additional services

include:

 Enhanced Leadership

Support

Cultural Support



Skills



CULTUR TRANSFORMATION

Care Quality Commission Culture Champion

Having an **HCPA** Culture Champion in your service will help to embed best practice, support the Cultural Change Programme to achieve

the best outcomes and ensure that Culture

is improved

with a

positive

impact on

your service

Tools, Models, services and resources utilised throughout the sessions

We have a shared vision, strategy

and culture. This is based on transparency, equity, equality and human rights, diversity and inclusion, engagement, and understanding challenges and the needs of people and our communities in order to meet these.

Cultural Web -

Johnson &

Scholes

Capable, compassionate and inclusive

We have inclusive leaders at all levels who understand the context in which we deliver care, treatment and support and embody the culture and values of their workforce and organisation. They have the skills, knowledge, experience and credibility to lead effectively. They do so with integrity, openness and

leaders

honesty.

speak up We foster a positive culture where people feel that they can speak up and

diversity and inclusion We value diversity in our workforce. We work towards an inclusive and fair that their voice people who work for us. will be heard.

flexible, open

culture by improving equality and equity for

> Customer Service Skills

Wellbeing

Continued

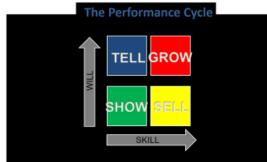


ABOUT US

Kurt Lewin -Leadership Styles

6 C's Culture Check

see the whole



ohnson and Scholes Cultural Web



Behaviours

Framework

Behaviours Framework Vision and goals Values Behaviours Customer Culture satisfaction Staff well-being Performance Partnership working Outcomes need to be distinguished from inputs and outputs

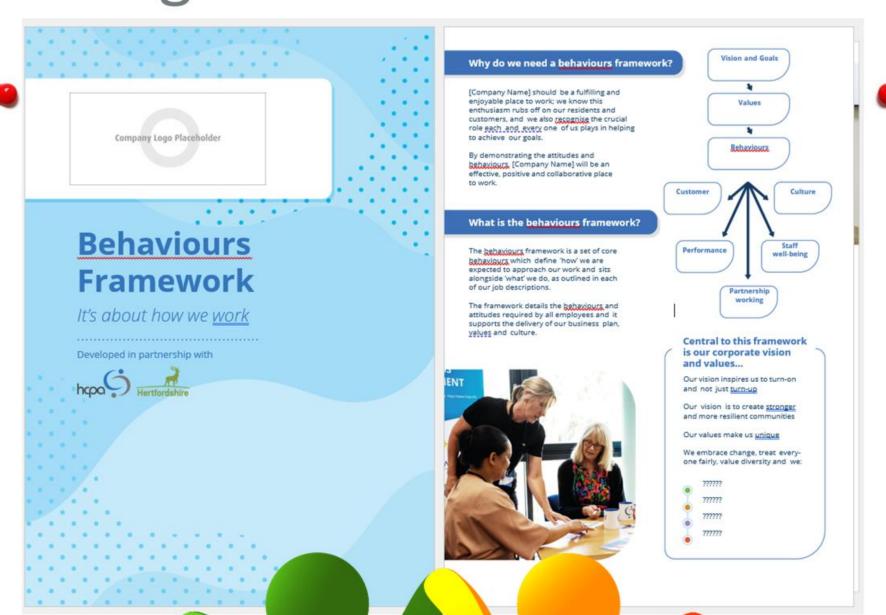
INPUTS

OUTPUTS

OUTCOMES



Leading Cultural Transformation



Appendix 1: Mapping the values and behaviours framework to CQC five key questions

Dignity and respect			CQC Key Lines of Enquiry		
	Dignity and respect				
treat people with dignity and respect regardless of their culture, religion, age, race, sexual orientation or disability	Caring				
accept and respect people's individuality	Responsive				
take time to listen to people; think about what needs to be known about the person to provide care to them	Responsive				
communicate in an open, accurate and straightforward way using appropriate language	Effective				
allow people to maintain their dignity and feel comfortable, particularly when receiving personal care	Caring				
protect and respect people's confidential personal information	Caring	Safe			
check with people about how they want to be addressed and use humour appropriately	Caring				
respect people's right to make their own decisions and choices about how they want to be cared for	Responsive	Caring			
respect people's homes, family relationships and facilities	Caring				
respect the position of trust they have with people who need care and support and customers	Caring	Safe			
deal sensitively and appropriately with behaviour that challenges	Effective	Safe	Caring		

	CQC Key Lines of Enquiry			
Learning and Reflection				
commit to learning and developing themselves in their work	Effective			
are self-aware and regularly reflect on the work that they do, how they do it and the impact they have on those being supported	Effective	Caring	Safe	
are honest and transparent and not afraid to say when they have done something wrong	Safe			
support, coach and mentor people who need care and support and/or other staff to enable them to learn new skills and increase their self-esteem	Responsive	Effective	Safe	
seek, reflect on and learn from feedback from colleagues, people who use services and their families	Effective	Safe	Caring	
are open to learning from others and willing to share knowledge and best practice	Effective	Safe	Caring	
know their own limits and know when to seek support and advice	Safe	Effective		
think innovatively about how to best use limited resources to come up with new ways to support people who need care and support	Effective			

	CQC Key Lines of Enquiry				
Working together					
empower, encourage and enable people who need care and support and other staff to do things for themselves and to make their own decisions	Responsive	Effective			
communicate options and offer realistic choices to people who need care and support	Responsive	Effective			
build two-way relationships of trust with colleagues, people who use services and other stakeholders	Effective	Caring			
commit to working with and supporting others as part of a team	Effective				
communicate effectively with others, using detailed and appropriate communication, including handover tools	Safe	Effective	Well-led		
understand and respect other people's priorities	Responsive	Caring			
adapt their approach according to the individual, situation and context	Responsive	Caring			
develop local networks and involve other professionals when needed for additional information and support	Effective	Safe			

	CQC Key Lines of Enquiry			
Commitment to quality care and support				
are committed and passionate about doing anything they can in their work to make people who need care and support's lives easier	Effective	Well-led		
contribute to delivering person centred care, putting the service user or customer at the heart of everything they do and helping them when the need it	Responsive	Caring		
give people who need care and support their full attention	Responsive	Caring		
are authentically warm, kind, empathetic, reliable and compassionate in their actions	Caring			
are professional and act with integrity at all times	Caring			
are flexible and proactive – responding calmly to what goes on in the day	Responsive	Well-led		
have clear boundaries with customers and people who need care and support and follow procedures and guidelines in their work	Caring	Effective		
are prepared to take positive risks, clearly explaining the consequences of risks to others	Well-led	Safe	Caring	
take personal responsibility for ensuring they contribute to the provision of excellent, safe, high quality care and support to others	Safe	Caring		
have the courage to speak up and challenge others where they have concerns about the quality or safety of care being provided	Safe			









Unlock Outstanding Care with our **Cultural Transformation Programme!**

A positive workplace culture drives engagement, performance, and retention in care settings. Investing in culture not only meets the CQC Single Assessment Framework but also empowers staff, creating a committed workforce essential for outstanding care.



Empowerment Through a Behaviours Framework:

We support providers to define values and set clear behavioual expectations. We utilise the **Skills for Care** example framework and include both the CQC Quality Statements and the DHSC Universal Sector Values

Built on Macleod's Four

Our approach is rooted in the Macleod Report's findings, highlighting the connection between employee engagement and performance, ensuring that your organisation thrives on all fronts.





Tailored to Providers' Needs:

The programme begins with a consultation to define your Strategic Narrative, our programme focuses on creating a culture where organisational Values are the foundation for managing behaviours to deliver truly Person-Centred care.

Committed to Culture:

Our commitment to you sets us apart, our annual reminders demonstrate our year-long support ensuring your continued success. With unparalleled dedication we work with you to ensure a culture of continued improvement. Experience the difference with our comprehensive Cultural

Transformation Programme - the ultimate support for your journey towards gaining and maintaining outstanding care.



Understanding you and your TEAM:

Teams will complete our **Exclusive TEAMology Tool** to help appreciate individual strengths, opportunities and key drivers while gaining insight into what is driving others and balancing INTENT versus PERCEPTION. This ensures that an **Employee Voice** contributes to creating the framework.

Continued Support:

We will continue to support you on your Cultural transformation journey by reaching out 6 months after you start the programme to see what is going well and where we can support further to ensure a successful culture is realised that will set your organisation up to thrive and deliver an Outstanding service.

Seamless Integration with CQC Framework:

By creating a behaviours Framework our programme seamlessly aligns with the COC single assessment framework, ensuring compliance, Organisational Integrity and surpassing regulatory standards, setting a new benchmark for care excellence.

Leadership Support:

Once created we will revisit to support leaders to embed the Framework into the organisation and understand how to use the tool to set expectations around and address behaviours. We will also explore how Engaging Managers can utilise knowledge from TEAMology to understand their own leadership styles by undertaking our Exclusive TEAMology Leadership Tool

Once enrolled on the programme everyone will have access to the Community Zone of the TEAMology website to continue building their understanding of the psychological types.

Additional Services Available:

Consider some of following to further support teams to enrich your

- Enhanced leadership skills: Continuing to develop TEAMology knowledge around improving team performance and learning the power of coaching for success
- Customer service skills: By utilising TEAMology further, teams learn about the different types of customers, how to communicate effectively with each type and what matters to people when they complain to reduce escalation and improve the quality of your service
- Wellbeing support: TEAMology helps us to recognise signs of stress and how to support more effectively based on our psychological preferences.



For more information about this programme please contact:

info@teamologytool.co.uk Or call 01707 536020

Camille Leavold

Managing Director: Abbots Care







Cultural Transformation Training

Abbots Care Ltd

CAMILLE LEAVOLD

MANAGING DIRECTOR AND CO-FOUNDER

www.abbotscare.com

Why we got involved











To help promote our culture and values and to remind employees why they are so important

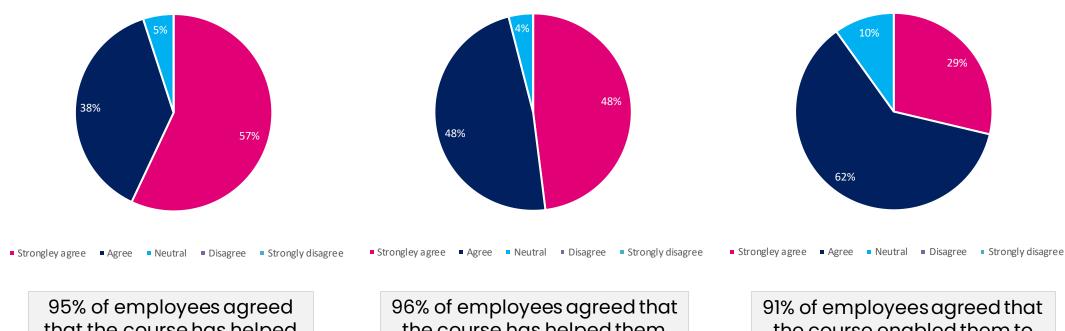
To help engage all employees on how we embed our values through the work we do everyday To help build better working relationships with colleagues and customers

To help employees understand their psychological type and working styles

Our Experience



Results from our feedback survey stated:



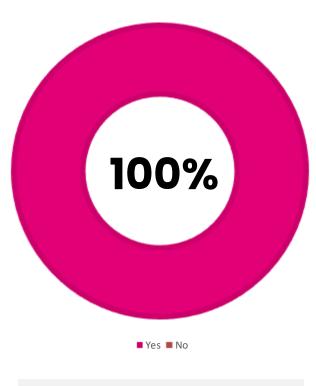
that the course has helped them understand their psychological type.

the course has helped that interact and engage more productively with colleagues.

the course enabled them to appreciate qualities of their colleagues and work more effectively together to embed our values into their work.

Our Feedback





Agreed the course was beneficial to them.

Employee comments



"The course has helped me understand my own working style and to be more confident in my approach to others"



"I was able to see how different people operate working in a team, it's really beneficial to see how people work and feel individually."



"A better understanding all round of different people's perspectives on how they see things and how they deal with things as well as using different approaches to situations"



"I found it really interesting, and I feel more positive that being more of an introvert is a very positive attribute to have in life."



"Good team building experience, encouraged staff to engage with each other and discuss the course. Got to attend with other departments and understand their working styles and approaches."



"It was a great training programme, very informative and great fun too."

Benefits and Impact



Using different approaches in different situations for better outcomes

Better understanding of our culture and company values

Positive impact

Improvement in working relationships

Seeing things from different perspectives

Building confidence within

Better understanding of working styles

Encouraging and supporting each other more

Better communication within teams

Communicating and sharing values more

Appreciation for colleagues and customers

Understanding that we are all working towards the same outcome – to provide high-quality care



Embedding our Values



We recently had our Business planning event for all Managers and Team leaders to present their KPI's for 2024/2025.

Each Manager/Team leader weaved our values into their KPI's and set clear measurable targets for us to meet.

This will impact how our culture and values are filtered across all departments, ensuring everyone is working together to achieve the set targets with the same purpose and outcome in mind.

Recruiting caring people

Supporting and training them to an enhanced level and retaining them Having **fun** whilst at work

Great
teamwork
and supporting
each other

Innovation

seeking out flexible and innovative approaches and never allowing bureaucracy or institutional thinking to get in our way A passion for making a difference

to families lives by enabling and supporting A genuine desire to care for and support people with disabilities and to improve

peoples' lives

THANK YOU

Camille Leavold

Email: Camille@abbotscare.com

Website: abbotscare.com





COMMITTED TO CULTURE

Survey

Natasha Bartley

Senior Care Leadership Educator





Care Culture Champion

For Managers and Leaders

NEW Course – released today!





"The culture of an organisation is its personality and character"



The role of the **Care Culture** Champion is to action and promote Organisational Culture

Who can be a Care Culture Champion?



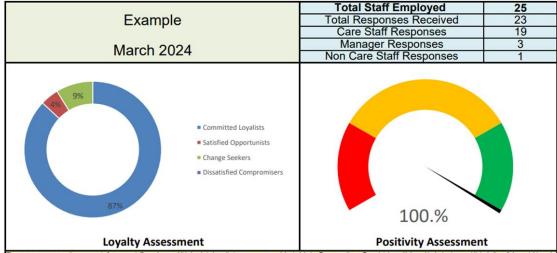


6C's Culture Check









There are some very positive comments from your staff members and it is lovely to hear that successes are celebrated during Team meetings. To maintain positivity and inclusive team spirit, including all days, nights and part time staff it may be an idea to include a staff notice board in a prominent place. It is good to see that Management have identified issues with communication and are putting appropriate actions in place. Staff are clearly encouraged to report any safeguarding concerns, but may need a little more encouragement/support to report any health & safety concerns or complaints. The Management clearly encourages staff integration and enable contact to support staff development and improvement, perhaps a suggestion too xmay also be useful. There is good use of initivate ideas and incentively set on exceeding the clear of the safety of the safety

 $\ensuremath{\texttt{@}}$ This form is the property of HCPA and must not be copied or shared with a third party



Supporting Relationships:





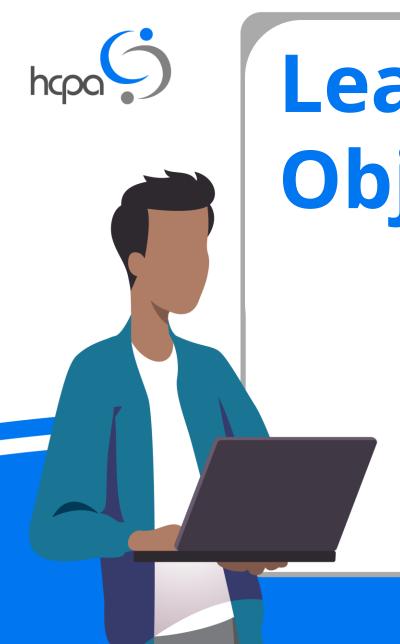












Learning Objectives:

- 1. Communication Skills
- 2. Understanding Diverse Needs
- 3. Consent and Boundaries
- 4. Cultural Sensitivity
- **5.**Support for Individuals
- **6. Legal and Ethical Considerations**

Gill Forward

Academy Manager & Leadership Trainer

Staff retention and the Care Professional Academy



How can Care Professional Academy support you with retention?

- Free employee benefit scheme with rewards discounts & cash back
- Training passports for your staff
- Access to online profile certificates stored in one place
- Plus, as a provider you can access online provider portal for governance, compliance & evidence for inspections



Academy Tiers

Care Professional cademy

Tier 1

The employee benefits programme: Discounts and savings available at over 800 UK retailers - food shopping, holidays, DIY, insurance, cinema, days out. All achieved by attending just 6 hours of training!

Tier 2 The Academy Affiliate travel club: Take advantage of great value travel discounts on local bus travel, 10% off car and van rentals, low price car leasing deals, and more!

Tier 3 The Student Zone: Free student discounts and the opportunity to purchase NUS student card.

Tier 4

Preferential rates only for Care Professionals: Receive preferential rates on essential workwear, household items and equipment, and massive savings on day experiences and gifts.

Tier 5

Special luxury deals and time-limited offers: All year-round including spa days, spa breaks, treatments, hotel stays and online retailers for lifestyle products including makeup, skincare, gym wear and cosmetics





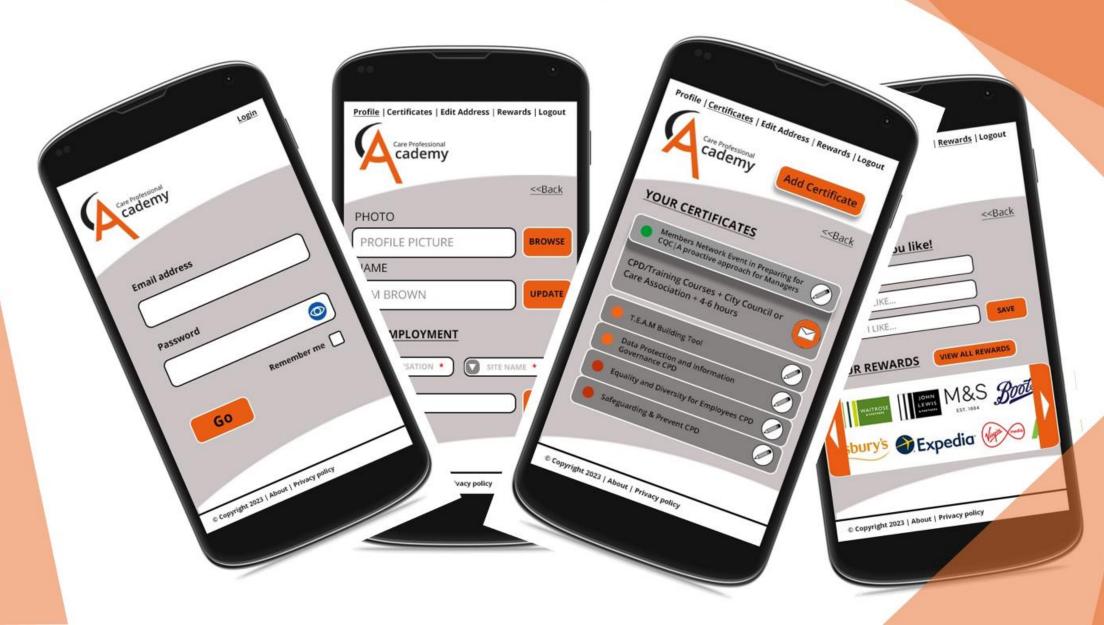
"It would be great to access everything on the go" "Having one login would be great "

"The Academy is brilliant, but I want everything in one place"

We have listened

Let me introduce CPA APP to you

Care Professional Academy APP

















App Plan



- V1 tested within HCPA
- V2 tested a few providers and their staff
- V3 release to Care Professionals will include:-
 - Everything you have seen today
 - Care Professional registration
 - SSO to rewards
 - Notifications
 - Training zone links
 - Directory for support

Retention



- Critical for continuity of care, your developing culture, reducing your costs and your succession planning to grow & stabilise your organisation
- Supporting your staff with their financial well-being & personal development is key to you retaining them
 - 71% said it was key to their decision to stay at the company
 - 76% of employees said they feel more motivated when their organisation is supporting them



Chris Badger

Executive Director, Adult Care Services Hertfordshire County Council





National context

- Care Quality Commission
- Winter
- Conservative Party
 - Care cap
- Labour Party
 - National Care Service
 - New deal for care workers
 - o Funding??



HCC - Council Budget Position

- HCC forecast to overspend by £5.7m which will be funded from reserves
- As part of the recently agreed integrated plan a (£1.1bn) balanced budget position for 24/25. This has been achieved through:
 - Plans to deliver £46m of savings in 24/25
 - Using £13m of reserves, totalling £38m over 23/24 and 24/25
 - Increasing council tax by 4.99%
- Budget gap of £21.9m in 25/26

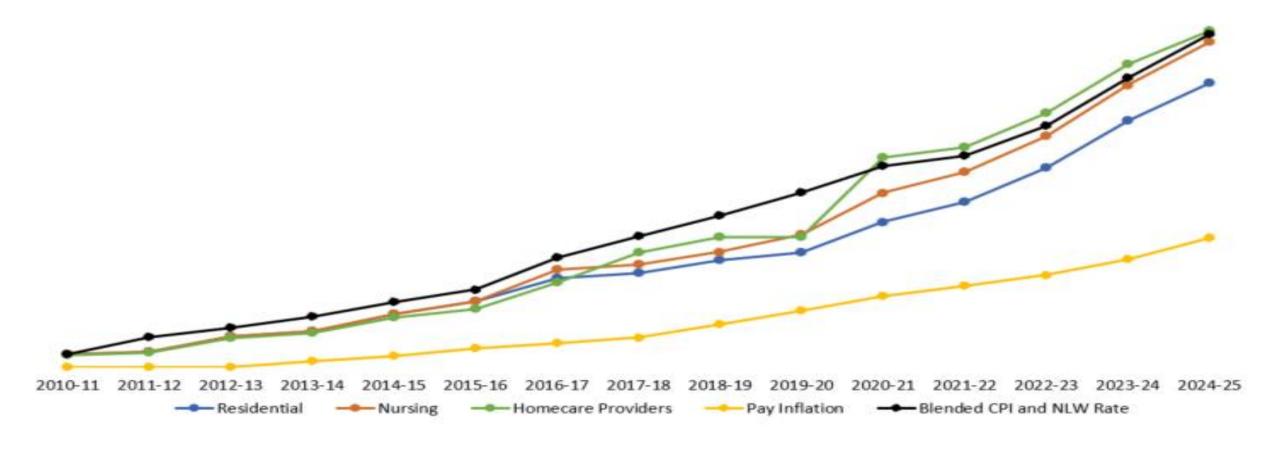




Care Worker Pay in our model

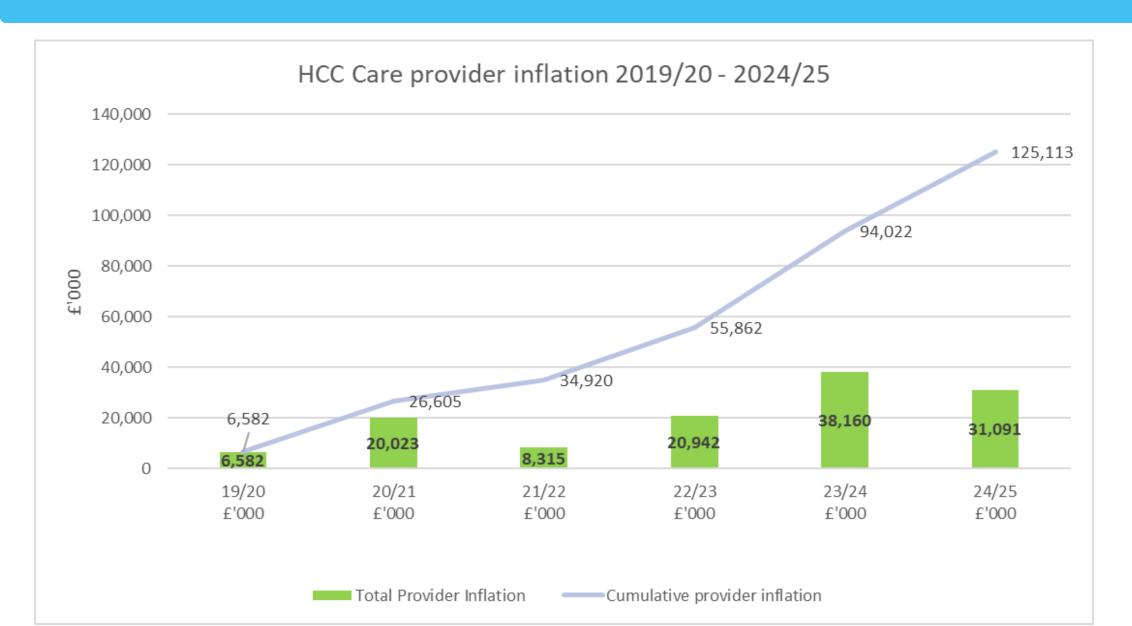


Adult Social Care - Care Worker Wages





Provider inflation - historic



Adult Care Summary

- Budget set to increase by £49.9m (£35.5 net) in 2024/25
 - £31.1m for fee uplifts
 - £17.2m Demography
 - £1.1m Supported Living
- Savings of £14.4m
 - Connect and Prevent (£3.9m rising to £23m in 2027/28)
 - Number of Commissioning Strategies (£1.3m)
 - Utilisation of grants and one-off funding (£3.3m)
 - Adult Disability Accommodation (£1m)
 - Other Efficiencies
- Protected investment in the Voluntary Sector (over £16m), Domestic Abuse (£1m), Adults with multiple Disadvantage (£4.9m)



Residential / nursing care for people with frailty or dementia

Pilot for care home service for people with non-cognitive symptoms of dementia underway (finishing in September 24'):

- MDT approach with strength based, psycho-social intervention as first line approach.
- Improvements to both community step up pathways and step down from mental health inpatients services.
- Commissioners to bring forward learning for procurement and care home workforce development later this year.

Discharge To Assess 2 successfully tendered in 2023.

- Special focus on training for care home staff this year.
- Will update partnership at a future HCPA network events.

Commissioners working on 5-year strategy on care homes for people with high frailly and dementia.

- Unpinned by evaluation of care model within direct input from people with lived experience, care providers and partners.
- Steering group in place with partners (including HCPA).
- Due to be agreed by September 24'

Community Support Commissioning for Older People

- Tender opportunity this summer for **Extra Care contracts**. New contracts to start from April 2025. Details will be shared via HCPA and Supply Hertfordshire.
- Watford inclusivity project. Working with partners at Watford Borough Council
 and HealthWatch to explore accessibility issues for Support at Home services and
 identify any challenges experienced by people from minority backgrounds.
- Market Sustainability and Improvement Fund
 - 2024/25 communications coming out imminently requesting data on recruitment figures and capacity.
 - Submission deadline with DHSC 22nd May really important as this sets out case for funding for the sector!

Mental Health Commissioning

- HPFT Community Support and Homecare contracts remodelling work is underway. Market engagement expected to be in Q1 and Q2 24/25 with a tender process later in the year.
- Positive feedback from providers on the new style of HPFT/Provider meetings. Provider partners feedback noting appreciation to have an avenue to discuss their issues with HPFT and secondary services.
- Mental Health Provider Forum on the 8th May, focus areas on Safeguarding and Market Shaping. Contact HCPA to attend if you are a provider of Mental Health services in Herts.
- Counselling Services current framework contract is ending, and options are being reviewed for the replacement contracting framework, including implications of the Provider Selection Regime.



Disabled Adults' Commissioning

- Supported Living Framework tender process well underway. Submission deadline was 29 April, evaluation process has started. Very good level of interest and engagement.
- Co-production and service development work on Short Breaks and known gaps relating to services for autistic adults. Watch this space exciting opportunities coming
- New Supported Accommodation design specification and standards agreed will be shared to inform conversations with housing providers and developers
- Dedicated work starting on mapping and addressing voids/vacancies across Hertfordshire's Supported Living and Disabled Adults residential care services.
- Improvements and updates being made to the system the Council and providers use (e-brokerage) to share and respond to referrals

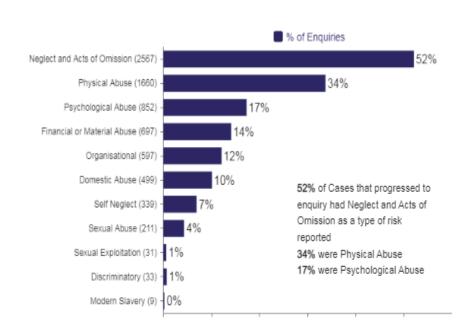
Adult Safeguarding 2023/24

- Thank you for your continued use of the safeguarding portal. In Mach 2024 we reach the 30,000 milestone of contacts via the portal
- Adult safeguarding Overall activity has increased in 23/24 with 15% more concerns (+1127) and 24.2% more Enquiries (+880) during the year
- We are soon to make a change to the recorded outcomes of a safeguarding enquiry to be more in line with the Care Act. The outcomes will focus on risk and personalised outcomes expressed by the adult. We will no longer record substantiated/unsubstantiated abuse as an outcome of the enquiry.





Type of Risk - as a proportion of all enquiries concluded





Creating a cleaner, greener, healthier Hertfordshire







Sarah Scott-Foster

Marketing, Events and Membership Manager Hertfordshire Care Providers Association









The New Membership Year. What's New 2024 - 2025

- The new look website
- The Manager Portal
- Updated benefits to Silver and Gold
- New and improved membership brochure
- New fully funded projects and initiatives
- New services within HCPA Business Development which can assist further with inspections
- 'Ask Us Anything'!



Make the most of your 2024 HCPA Member Benefits

With Exclusive access to...

- Manager mentoring and coaching including support in a crisis
- 24/7 access to the government recognised Provider Hub support line
- Free access to our nationally recognised recruitment service
- Toolkits and checklists to help quality assure your business
- Bespoke fully funded Care Sector training
- Invitation to member networking events





















As a membership organisation we partner with leading businesses to support you in all your business needs. As a member you have exclusive access to...





- Legal advice 15% off Ridouts headline prices
- Exclusive discounted prices on photocopying equipment and bulk printing with Inception
- Preferred rates to join Peninsula Business Services, assisting with HR and Health and Safety
- Large savings on Utility bills via Business Saving Experts
- Access to lower cost business support, consultancy, policy writing, PR, food solutions and IT via our partner services
- apetito, Underwoods Consulting, Fos.net, Overseas Immigration, Specsavers Home Services

Strategic partners: www.hcpa.info/in-partnership

Visit their stands TODAY!

SILVER ELIGIBILITY

Evidence that you are actively promoting the Care Professional Academy to your staff...

2 x people who have each attended 12 hours of designated leadership courses.

Silver Benefit

Leadership culture ½ day course (webinar style, open to all silver members, by invitation, no cap)



Must have reached silver status Engaged with and completed IFS Have an overall good rating with PAMMS, CQC Engaged with and completed two other HCPA services, such as 6C's, CVC, etc

Gold Benefit

Marketing package (Gold shout out/ Gold logo / Gold membership list in brochure)
Bespoke Behaviours Framework consultation with Leadership T.E.A.M ½ day





A catalogue of designed brochures and toolkits







Newsletters

Stay up to date with sector news!

Ensure you and your leadership team are signed up to receive HCPA's newsletters.

Subscribe to our mailing list





Consider Mental Capacity



In light of the cold weather warning, HCPA would like to share some key messages and

There is a 70% probability of severe cold weather/icy conditions/heavy snow petween 6pm on Sunday the 15th January and 9am on Thursday the 19th of January in parts of England. This weather could increase the health risks to vulnerable people and disrupt the delivery of services.

Please refer to the national Cold Weather Plan and your emergency plan for Ridouts free 1:1 online surgeries - 2nd May

This is a Yellow level warning (level 2) for East of England: "Becoming colder is a a remove were warning thever 43 for East or Engering. Decorning conver-month Monday the tech of January, with daytime temperatures falling and

if you have any questions about managing risks from cold weather, or need urgent You not any quesions about menuging this truth columnation, or metal magnitudes appeared to the Hope Care Provider support for your service, prease on four fremove or community for the first of the



Moving & Assisting: Train the Trainer Starting 13th January - Book Now!

and assisting people is a key part of the working day for most frontline from moving equipment, laundry, catering, supplies or waste to assisting

ou know, poor moving, and handling/assistance



E-NEWS

0000

Main Headlines:

Activity Leads webinar Upcoming HCPA events

are providers a free 1:1 appointment to Cuss and provide guidance on any legal usues affecting your business





ase take time to read below the following important

ant Information from the Department of Health and Social re for CQC Regulated providers - The enforcement process for letion of the capacity tracker is about to start ACT NOW vise you may get fined.

read the message below from the Department of Health and Social Care th HCPA have been asked to circulate. If you are not updating the Capacity ker, then you will need to start to avoid fines.

p of organisations working in the field of adult social care ed concerns with regards to the guidance being given on

itop, refresh, and get back to

right on intection prevention, this year a present of infection Prevention" which highlights getting

nfection revention

ntly produced by C PH & HCPA

Veek!

BETTER SECURITY. BETTER CARE. LEGALLY REQUIRED.



MPORTANT UPDA

m Herts County Coun

hanges to PCR testing

wis a letter from DHSC outlining the changes and

ease note that from Saturday April 1st any PCR r

ear Managers



Data Processing workshop - FREE

pasics of infection prevention

Events

- HCPA Network Events
- HCPA Service Specific Manager Forums (Online)
- Topic Specific Webinars
- HCPA Topic Specific Study Days (New for 2024)
- Partner Study Sessions including, Fire Safety, Tender Bid sessions, HR
- The Hertfordshire Care Awards





How entering awards can raise your profile



By nominating and being successful, entering awards can:

- Enhance your company / organisations image, shaping client attitudes
- Create positive publicity and heighten visibility to staff and to current and potential clients
- Promote your company as being successful
- Differentiate your company from its competitors
- Promote and showcase good community relations and responsibility
- Provide entertainment opportunities for your clients and staff
- Produce positive coverage in a cost-effective way

Launch date: 20th May 2024 Awards date 28th November 2024 Visit: www.hcpa.info/careawards





Team Awards

- Most Innovative Residential Care Team
- Most Innovative Homecare Team
- Most Innovative Adult Disability or Mental Health
 Team

Organisation Award

The Care Culture Award

Individual Awards

- The Compassion Award for Residential Care
- Outstanding Achievement In Homecare Award
- Outstanding Achievement in Adult Disability or Mental Health Support
- The Care Leadership Award
- The Care Contribution Award

New for 2024

The Judges' Award

Recognising best practice in Care since 2011

THE HCPA CARE PROVIDER HUB PROVIDING PEACE OF MIND.....





ASK us anything! We are your support service, here to answer your questions on all topics Adult Social Care related.



- Govt guidance, laws, standards and expectation
- Covid: PPE, vaccinations and infection control
- Liaison with Hertfordshire County Council
- Funding, contracting and commissioning
- Staff wellbeing and recognition

- HR, Staffing and recruitment
- Training and education
- Business continuity
- Data protection
- Monitoring
- Equipment
- Insurance

Your hub, your support service.....

01707 708108 / **assistance@hcpa.co.uk** (Mon to Fri - 9am to 5pm). **www.hcpa.info/hub**

HCPA: 'Sharing best practice in care through partnership'