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**Core assurances**

Experience has taught us that when things go wrong in care services, they often relate to key areas. Theory and inquiries into when care goes wrong have highlighted the areas that are important to monitor because these can be identified as early indicators of concern to people using services ([Scottish Government 2014](https://www.gov.scot/publications/early-indicators-concern-care-services/), [Hull University 2012](https://www.hull.ac.uk/work-with-us/research/site-elements/docs/groups/early-indicators-of-concern-for-older-people.pdf), [Francis Report 2013](https://www.gov.uk/government/publications/report-of-the-mid-staffordshire-nhs-foundation-trust-public-inquiry)).

These are the key areas considered during the registration process, and policies and procedures relating to them must be in place before a service is registered. Because we know, and research tells us, that these key areas are essential to a service being safe, we have called them ‘core assurances’.

This checklist of core assurances highlights what inspectors must look at in the course of an inspection.  It helps guide providers on the areas that are important to people’s safety and wellbeing as well as identifying any potential risks to outcomes for children and young people.  This is because for children and young people's rights to be safe and have good outcomes, core assurances must be consistent, planned and embedded.  We know that quality inputs and processes are a key driver for good outcomes and minimising the risks to poor outcomes, which is why we examine these core assurances at every inspection.  Our focus is on the effectiveness of these in delivering good outcomes and minimising the risk of poor outcomes.

The process for checking the core assurances is different from the rest of the self-evaluation as they are not evaluated, they are minimum assurances that need to be in place.

This template (which includes a worked example) is devised to help you check that you are meeting all of these core assurances and that you are able to evidence this.

**Worked example**

|  |  |  |
| --- | --- | --- |
| **General actions** | **Date checked** | **Comments/actions required** |
| A registration certificate is on display and contains accurate information that reflects the service currently being delivered. | 16/7/23 | Old certificate displayed, print off the new one that was issued after we applied for and received a variation in our conditions |
| A valid insurance certificate is on display or readily available  | 16/7/23 | Certificate is held electronically – printed off hard copy for ease of access – displayed with registration certificate so it is easy to see for families and visitors. |

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| **Protection**  |
| * There is a child protection policy and procedure that evidences how people are kept safe.
* Staff are trained in child protection and are confident in knowing when and how to make referrals, including notifying the Care Inspectorate.
* Where required, there is evidence that appropriate child protection referrals have been made and followed up.
 |
| How can we evidence that we meet this core assurance? |
| We have a child protection policy and procedure in place, last reviewed/updated 01/09/2022. This includes a flowchart of the actions we need to take when a concern is raised. Child Protection training has been completed through an accredited training provider. This included advanced child protection training for the child protection coordinator and the head of care. We have had discussions at staff meetings to ensure all staff remain aware of their responsibilities. We have made one child protection referral to social work during the past year, which was notified to the Care Inspectorate. A detailed chronology is stored securely, and we have subsequently had contact with a social worker for the family to ensure we are monitoring, recording and sharing any relevant information.  |
| Any additional actions to be taken? |
| Child protection policy is now due for review – latest national guidance for 2023 to be included within this.  |

**Core assurances self-evaluation template**

**Service…………………………………………………………………………………………**

**Date completed………………………………………………………………………………**

**Completed by………………………………………………………………………………...**

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| --- | --- | --- |
| **General actions** | **Date checked** | **Comments/actions required** |
| A registration certificate is on display and contains accurate information that reflects the service currently being delivered. |  |  |
| A valid insurance certificate is on display or easily accessible. |  |  |

|  |
| --- |
| **Protection**  |
| * There is a child protection policy and procedure that evidences how people are kept safe.
* Staff are trained in child protection and are confident in knowing when and how to make referrals, including notifying the Care Inspectorate.
* Where required, there is evidence that appropriate child protection referrals have been made and followed up.
 |
| How can we evidence that we meet this core assurance? |
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| Any additional actions to be taken/areas for improvement? |
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| **Infection prevention and control**  |
| * All staff have an understanding of infection prevention and control, including the importance of regular handwashing, which contributes to a safe and hygienic environment for children and young people.
* The service has governance and quality assurance processes in place for infection prevention and control.  This includes regular training in key areas such as infection prevention and control and food hygiene where appropriate.
* Leaders ensure that staff have access to suitable equipment and appropriate cleaning products where needed.
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| How can we evidence that we meet this core assurance? |
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| Any additional actions to be taken/areas for improvement? |
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| **Medication system and records**  |
| * Children and young people are protected by safe medication management policies and practices.  This includes regular audits and accurate tracking of children and young people’s medication.
* Legislation and good practice guidance are followed when supporting children and young people who do not have capacity to take medication, where children and young people are managing their own medication and when as-required medication is prescribed.
* Where there are medication errors, services make appropriate notifications and learn from these to improve medication practice.  This is supported by regular training and development opportunities for staff.
 |
| How can we evidence that we meet this core assurance? |
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| Any additional actions to be taken/areas for improvement? |
|  |
| **Management of people’s finances**  |
| * Children and young people’s personal property and finances are supervised and protected.
* Clear financial policies and procedures for the management of children and young people’s money and possessions are documented and evidenced in practice.
 |
| How can we evidence we meet this core assurance? |
|  |
| Any additional actions to be taken/areas for improvement? |
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| **Accident/incident records**  |
| * A clear record of all accidents and incidents involving children and young people occurring in the service is maintained and, where required, notified to the Care Inspectorate and/or the appropriate agency or authority.  There are quality assurance processes around accident and incidents and evidence of learning from these.
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| How can we evidence that we meet this core assurance? |
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| Any additional actions to be taken/areas for improvement? |
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| **Development/Improvement plan**  |
| * There is an up-to-date development/improvement plan in place that is informed by feedback from staff and children and young people who use the service, and their relatives. This plan is actively used to drive improvement in the service.
 |
| How can we evidence that we meet this core assurance?  |
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| Any additional actions to be taken/areas for improvement? |
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| **Complaints** |
| * The complaints and concerns of each child or young person, their family, advocate or representative and visitors are listened to and acted on and there is an effective appeals procedure.
* People are made aware promptly of the outcome of any complaints and there are processes in place to implement learning from complaints.  A record is made of all complaints, responses and outcomes and details of any formal investigations undertaken.
* The complaints process is accessible and easy for people to use.  It can easily be understood by children and young people using the service.
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| How can we evidence that we meet this core assurance? |
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| Any additional actions to be taken/areas for improvement? |
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| **Staff recruitment procedures**  |
| * Safe and effective recruitment practices are in place to recruit staff in accordance with good practice and national safer recruitment guidance.
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| How can we evidence that we meet this core assurance? |
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| Any additional actions to be taken/areas for improvement? |
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| **The physical environment** |
| * The service is clean, tidy, welcoming and free from avoidable and intrusive noise and smells.  The layout of the setting and quality of the furnishings and fixtures is nurturing and meets children and young people’s needs and outcomes.
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| How can we evidence that we meet this core assurance? |
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| Any additional actions to be taken/areas for improvement? |
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| **Maintenance records for safety equipment** |
| * Equipment needed for the safe operation of the service is well-maintained in line with the manufacturer’s instructions and any other relevant legislation.

 * Staff and children and young people are aware of emergency procedures, including where evacuation is required.
* Where specialist equipment is needed, there is a process for ensuring this is properly installed and remains safe through appropriate testing and servicing.
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| How can we evidence that we meet this core assurance? |
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| Any additional actions to be taken/areas for improvement? |
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| **Planned care and support**  |
| * The child or young person’s personal plan is outcome-focused and based on an ongoing comprehensive assessment of individual needs and strengths.  It is implemented, evaluated and reviewed, reflects the child or young person’s changing needs. It outlines the support required to maximise their quality of life in accordance with their wishes.
* Children and young people are actively involved in their personal planning process. Care is person-centred and delivered in accordance with each child or young person’s individual plan.
* Personal plans are accessible to children and young people and the staff providing their care and support, ensuring their needs and wishes are met.
 |
| How can we evidence that we meet this core assurance? |
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| Any additional actions to be taken/areas for improvement? |
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| **Management oversight and governance/administration** |
| * There are governance and oversight systems in place to identify risks and ensure appropriate action is taken to improve outcomes for children and young people.  These include leaders’ behaviours to create the right environment for safe quality care.
* There are internal and external quality assurance systems such as managers and boards of governors in place to promote high quality care and support.
 |
| How can we evidence that we meet this core assurance? |
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| Any additional actions to be taken/areas for improvement? |
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| **Meaningful connections** |
| * Children and young people are actively supported with in-person meetings, visits and digital and/or traditional forms of communication to maintain social and community connections.  This includes staying connected with families and other people important to children and young people.
* Staff demonstrate they understand and apply the principles of sustaining meaningful relationships in children and young people’s lives and how to support them with this.
* Practice is strengthened by a policy that outlines how children and young people will be supported to keep in touch with people who are important to them.

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| How can we evidence that we meet this core assurance? |
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| Any additional actions to be taken/areas for improvement? |
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