Self Assessment Form
Care Homes for Older People
Guidance Note

You are advised to use the accompanying guidance when completing the self assessment.

When you complete the self assessment, it is important that you take consideration of the National Care Standards. To help you to do this, you will find examples of sources of evidence and questions to ask about the service, matched to National Care sub Standards (in brackets) by clicking on the help icon next to the Quality Statement. Some examples may not apply to your service so it is important that you take time to look at these and use those most applicable. It is not meant to be used simply as a checklist. For some services there may be other legislation or best practice which will inform how you work. This is included under the heading 'Legislation and Best Practice Signposting below:

NB: The term "service users and carers" is used throughout this document for ease of reference, but is also taken to include family members and other representatives e.g. guardians, advocates etc. The term "carer" is used to mean people who look after a partner, husband or wife, son or daughter, relative or friend with a disability or illness. Many carers live with the person they care for, but many look after someone who lives independently, in supported accommodation, in hospital, or in a care home.

Legislation and Best Practice Signposting
When completing the self-assessment you should be aware of the provisions of the Public Services Reform (Scotland) Act 2010 and associated regulations; and, where appropriate, the Regulation of Care (Scotland) Act 2001.

Care Home Learning Network
Community Care (Direct Payments) Act 1996
Adults with Incapacity (Scotland) Act 2000
Adults with Incapacity (Scotland) Act 2000 – Part 4 Code of Practice for Managers of Authorised Establishments
Community Care and Health (Scotland) Act 2002
Adult Support and Protection (Scotland) Act 2007
Protection of Vulnerable Groups (Scotland) Act 2007
Better Health, Better Care (2007)
Delivering for Health (2005)
Scotland’s National Dementia Strategy (2010)
Safer Recruitment Guidance, Scottish Executive (2007)
Mental Health (Care & Treatment) (Scotland) Act 2003
The Handling of Medicines in Social Care, RPSGB 2007
http://www.rpsgb.org/pdfs/handlingmedsocialcare.pdf

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The Inspection Focus Areas (IFAs)
Please see the SCSWIS at www.scswis.com
Quality Theme 1: Quality of Care and Support

Quality Statement 1.1

We ensure that service users and carers participate in assessing and improving the quality of care and support provided by the service.

Sources of Evidence
- Participation strategy
- Training for staff to deliver the participation strategy
- Records of how service user and carer participation has led to service improvements
- Access to independent advocacy and support services (10.9, 11.1, 11.6)

Service provider evidence of strengths

Areas of improvement identified by the service provider:

DOCUMENT FOR INFORMATION ONLY – DO NOT USE TO SUBMIT TO CARE INSPECTORATE
Other issues
Please provide information about any other issues you feel are relevant when making the quality assessment.

Target action date
Please provide a target date by when you will complete any improvement actions you have mentioned above.

Service provider grading
Please provide a grade for your service under this Quality Statement. Please tick one box below.

☐ 6 – Excellent          ☐ 5 – Very good          ☐ 4 – Good
☐ 3 – Adequate           ☐ 2 – Weak              ☐ 1 – Unsatisfactory
Quality Statement 1.2

We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.

Sources of Evidence

- Personal care plan and needs assessment (8.1, 8.3, 8.4, 8.6, 12.1, 17.2, 17.3, 17.5, 17.6)
- Information on activities within the home (8.2, 12.4, 14.7, 17.1)
- Barrier free access to cultural, social, and religious activities (12.2)
- Key days (birthdays/holy days) recording (12.3)
- Menu choices (12.2, 13.2, 13.3)
- Access to snacks and drinks (13.5, 13.8)
- Financial policy, supported by practice example (8.4, 8.5)
- Local community links (17.4, 17.7, 17.8, 17.9)
- Confidentiality statement/policy supported by practice example (10.4, 10.5, 10.6, 11.3)
- Complaints procedure supported by practice example (5.1, 11.2)
- Equal Opportunities – dissemination of policy (10.7, 10.8)
- Policy to ensure Voting Rights are maintained (10.9)
- Life story work

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.

Sense of Belonging

- How do you enable the service user to make links with their personal and cultural past?
- How do you make this possible for people who are cognitively very frail?
- In what ways are service users able to personalise the living space?

Sense of Purpose

- How do staff know, or are able to find out about, the service users’ interests and build on these?
- How do you ensure there is shared understanding of the care home’s vision and of the expectations of the service users and relatives?
- Can you give examples of when a service user was enabled to express their individuality?

Sense of Continuity

- What systems are in place to ensure continuity with a key staff member in the home who can develop real knowledge of the individual as a person?
- To what extent are service users able to follow their own daily routine in the home?

Sense of Security

- Are there private physical spaces in the home?
- Is there a written record when staff feel they are unable to support the service user in the choice they are making?

DOCUMENT FOR INFORMATION ONLY – DO NOT USE TO SUBMIT TO CARE INSPECTORATE
- Are there regular discussions and clear documentation with service users their family about balance of rights and risks?
- How can a service user be sure that their bedroom is a place that can offer them privacy?

**Sense of Achievement**
- How are the service user's hopes for the future explored in this home?
- Are the service user's strengths and achievements documented?

**Service provider evidence of strengths**

**Areas of improvement identified by the service provider:**

**Other issues**
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Target action date
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Service provider grading
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☐ 6 – Excellent  ☐ 5 – Very good  ☐ 4 – Good
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Quality Statement 1.3

We ensure that service user’s health and wellbeing needs are met.

Sources of Evidence
- Policy on food, fluid and nutrition (13.4, 13.9, 13.10)
- Under nutrition risk screening (13.6, 14.6)
- Percentage of staff trained in food hygiene (13.7)
- Personal plans
- Staff training on nutritional issues (13.6)
- Access to health practitioners (14.1, 14.2, 14.4, 14.5, 14.10)
- Healthcare needs assessment (14.3, 14.9, 14.11)
- Medication policy (15.1 – 15.12)
- Mental health and well being assessment
- Continence care plans
- Staff training on continence care
- Policy and procedures on care of dying, death and bereavement (19.1 – 19.8)
- Policy on pain and symptom management (14.8)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.

Sense of Security
- How aware are you of the research into the health needs of older people in long term care facilities?
- Where service users require a range of aids how are these maintained, stored and used?
- What is your understanding of protection of vulnerable adults issues and how do you address these?
- How do service users access specialist health care services when needed?
- How are the health care needs of service users assessed?

Sense of Achievement
- How are service users supported to take part in their own health care?
- How do you assess whether you are adequately meeting the health care needs of service users?

Sense of Significance
- How are service users’ mental health and wellbeing needs identified and addressed?
- Do service users approach staff with personal worries and concerns?
- How do you identify the health needs of individual service users?

Sense of Purpose
- How is the promotion of a healthy lifestyle undertaken on a daily basis in your home?
- What role do staff feel they play in the delivery of health care?
What opportunities are there in your home for multi agency and multi-professional collaboration or discussion?
What policies are in place to ensure that the health needs of service users are met?

**Sense of Continuity**
- Are service users supported to maintain links with their own GP?
- Are service users supported to maintain links with their dentist, optician, chiropodist and other health service providers?

**Service provider evidence of strengths**


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**Areas of improvement identified by the service provider:**

Other issues
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Target action date
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Service provider grading
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Quality Statement 1.4

We use a range of communication methods to ensure we meet the needs of service users.

Sources of Evidence
- Personal care plan (8.4, 8.6, 10.1, 10.2)
- Communication needs recorded (10.3, 18.1 – 18.5)
- Personal record book (with details/photographs of family, friends)
- Life history
- Inspection report availability (11.8)
- Access to advocacy (11.4, 11.5, 11.6)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.

Sense of Purpose
- How are staff supported to involve service users and their families?
- Where individual choices are not able to be met, how do you communicate this in an open and transparent manner which is understandable to the service user and their family?
- How are service users given opportunities to play an active role in personal care, the development of the service and in providing feedback?

Sense of Belonging
- Are shared goals documented?
- Do service users have access to their care plans?

Sense of Significance
- How do staff support service users with a degree of cognitive impairment to express their needs?
- How are staff, service users and relatives views sought within your home?
- How are staff, service users and families involved in any decisions that are made about their care and/or the running of your home?
- How do you gather information about the service user and family experience?
- How do you gather feedback from other stakeholders involved with this service?

Sense of Continuity
- Does each service user have a care plan to which they have contributed?
- Does the service user and or family attend and contribute to reviews?
- How are voting rights maintained?
- Are care plans structured in such a way that it is easy for service users and families to contribute to these?

Sense of Security
- What advocacy groups are involved with the service users?
- Do service users and their families have access to a responsive and effective complaints procedure?
- How do complaints feed into the development plans for the service?
- Would relatives and service users say that you welcome the feedback from them on all aspects of their care?
- How do you monitor and respond to the issues raised by the service users and their families?

**Service provider evidence of strengths**

**Areas of improvement identified by the service provider:**

**Other issues**
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Target action date
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Service provider grading
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Quality Statement 1.5
We respond to service users' care and support needs using person centred values.

Sources of Evidence
- Personal care plan and needs assessment (6.1, 6.2, 6.3, 13.1)
- Access to own GP and other health professionals (8.2)
- Keyworker system (7.1, 7.2, 7.3, 11.1)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.
- Does each service user have a personal plan which they have contributed to and which is reviewed periodically with their input?
- What evidence is there from team meetings, and individual staff supervision, that service user needs are being followed up on a daily basis?
- Do you sample records to ensure that staff are following through the care plan on a daily basis?

Service provider evidence of strengths

Areas of improvement identified by the service provider:
Other issues
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Target action date
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Service provider grading
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- □ 3 – Adequate     □ 2 – Weak       □ 1 – Unsatisfactory
Quality Statement 1.6
People who use, or would like to use the service, and those who are ceasing the service, are fully informed as to what the service provides

Sources of Evidence
- Procedures on introductory visits (2.1, 2.2)
- How do you support service users and their families to be involved in decisions that affect their place of care?
- How do you support service users and their families to manage loss and transition?

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.

Sense of Continuity
- How informative is the introductory pack/handbook that informs people about the home? Has this pack been developed in partnership with service users and relatives?
- Is there an opportunity for prospective service users to have trial visits?
- How is information gathered to ensure plans are put in place to ensure there is continuity with service users' previous experiences?
- What systems are in place to ensure that discussions take place with carers, family and friends to explore their expectations about the home and what role they would like to play?

Sense of Significance
- How and when are service users informed about their access to inspection reports and other quality reviews about care in the home

Sense of Security
- Is there access to advocacy service and others who can assist the service user in decision making in relation to where they live.
- What evidence do you have that discussions have taken place with the service user and their and family about the desired place of care should the service user's circumstances change?
- How are service users supported to cope with the move into the care home?

Sense of Belonging
- To what extent are service users able to set up their room as they would like it?
- What role do other service users play when a new service user moves into the home?
- How are ‘rules’ of the home introduced to the service user?
Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues
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Target action date
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Service provider grading
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Quality Statement 1.7
This Quality Statement is not applicable to this service type.

Quality Statement 1.8
Living with life limiting conditions is viewed as an integral part of life in this care home.

Sources of Evidence
- Policy and procedures on care of dying, death and bereavement (19.1 – 9.8)
- Do staff value and implement the principles of palliative care?

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.

Sense of Continuity
- What support is offered to service users and families who wish to explore the challenges of living with a life limiting illness?
- Is bereavement support offered to relatives?
- Is bereavement support offered to other service users?
- Do you have access to bereavement support groups?
- How are staff supported after the death of a service user?
- How do you ensure that consistent care is delivered by key people?

Sense of Significance
- How do you ascertain the service user and families wishes for care at the end of life?
- How are service users supported to complete advanced directives?
- How are staff encouraged to explore their own attitudes to death and dying?
- How are other service users supported when their friend is dying in this home?
- How are staff supported to feel confident at discussing end of life issues with relatives and family?
- What guidance is in place to help staff to support the spiritual needs of service users?

Sense of Belonging
- How are service users supported to make connections with their past life experience and their current situation?
- How are relatives supported during the last few days of their loved ones life?

Sense of Security
- What external agencies do you involve to support staff, relatives and service users during the last phases of their lives?
- Would staff say that there is open communication about dying in this home?
- Do you have access to and use specialist palliative care services?
- How do you obtain service users opinion about their care towards the end of their lives?

**Sense of Achievement**
- How do you implement the national care standards on support and care in dying and death?
- What has been implemented in your care service in relation to end of life care from the best practice guidance document Making Good Care Better National practice statements for general palliative care in adult care homes in Scotland by the Scottish Government and the Scottish Partnership for Palliative Care
  

**Service provider evidence of strengths**

**Areas of improvement identified by the service provider:**

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Other issues
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Target action date
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Service provider grading
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Quality Theme 2: Quality of Environment

Quality Statement 2.1
We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

Sources of Evidence
- Participation strategy
- Training for staff to deliver the participation strategy
- Records of how service user and carer participation has led to service improvements
- Access to independent advocacy and support services (10.9, 11.1, 11.6)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.
- What do people and staff think of the environment?
- Does the information booklet reflect reality?

Service provider evidence of strengths

Areas of improvement identified by the service provider:
Other issues
Please provide information about any other issues you feel are relevant when making the quality assessment.

Target action date
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Service provider grading
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☐ 6 – Excellent ☐ 5 – Very good ☐ 4 – Good
☐ 3 – Adequate ☐ 2 – Weak ☐ 1 – Unsatisfactory
Quality Statement 2.2
We make sure that the environment is safe and service users are protected.

Sources of Evidence
- Written legal agreement (3.1, 3.2, 9.9)
- Care home contract – individual agreement (3.1)
- Health and Safety policy with practice evidence (3.3)
- Fire safety plan (3.3, 4.9)
- Cleaning and food hygiene records
- Accident, incident and restraint report (9.6)
- Personal Insurance policy (3.3)
- Recruitment policy (3.3, 5.5, 5.15)
- Volunteer policy (3.3)
- Restraint policy (3.3, 5.14, 9.6, 9.8)
- Shift rotas
- Environmental Health Policy (5.1)
- Children Visiting Policy (5.1)

Service provider evidence of strengths

Areas of improvement identified by the service provider:
Other issues
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Target action date
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Service provider grading
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Quality Statement 2.3
The environment allows service users to have as positive a quality of life as possible.

Sources of Evidence
- Barrier free home and garden (4.1)
- Infection control policy (4.2, 4.3)
- Physical environment check on bedrooms (4.4 – 4.14, 4.16, 4.18 – 4.20, 4.24)
- Risk assessment – evidence of service users' involvement (3.4, 5.1, 9.1, - 9.3)
- Communication aids
- Running notes
- Physical environment check on communal area (4.15, 4.21, 9.5)
- Physical environment check on building (4.22, 4.23)
- Opportunities for service users to make observations, express views and make suggestions about the service provision to them.

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.
- How do you ensure that all participants in the home (staff, service users and their relatives) have opportunities to make a contribution and support each other?
- How do you strive to ensure that recreation, social, community and personal development are essential parts of the service users' quality of life?

Sense of Significance
- To what extent do service users have a say in the running of the home?
- How are service users and staff involved in the recruitment and orientation of new service users and staff?
- Are service users and their families, staff and other stakeholders consulted in the drafting of policies that effect them?
- Is there protected time to speak to relatives and friends?
- Are there private places for relatives and friends to speak to service users?

Sense of Belonging
- Do service users take part in community and leisure activities?
- How are service users encouraged and supported to make friends within the wider community, including their own community?
- Are families and friends of service users able to visit freely and where appropriate participate in the care of the service user?
- What contribution do relatives make to care, and how is this communicated to others?
- How are staff supported to make links with organisations in the local community where the care home is situated?
- What links does the care home have with the local community?
- How are service users supported to develop social relationships within and outwith the home?
Sense of Achievement
- How are service users encouraged and supported to develop as individuals?

Sense of Continuity
- How do service users gain access to shops, money, and transport?
- If a service user wanted to buy a present for their friend how would they be supported to do this?

Service provider evidence of strengths

Areas of improvement identified by the service provider:
Other issues
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Target action date
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Service provider grading
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Quality Statement 2.4
The accommodation we provide ensures that the privacy of service users is respected.

Sources of Evidence
- Physical environment check on bedrooms to ensure privacy and accessibility for visitors (16.1 – 16.7)
- Evidence of practice on personal items (16.8 – 16.10)

Service provider evidence of strengths

Areas of improvement identified by the service provider:
Other issues
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Target action date
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Service provider grading
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Quality Theme 3: Quality of Staffing

Quality Statement 3.1
We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Sources of Evidence
- Participation strategy (11.1 – 11.8)
- Service user questionnaires, minutes of consultation meetings etc.
- Recruitment and retention policies
- Training plans (5.1, 5.6, 5.9)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.
- Do you have a participation strategy which reflects the way in which you engage with service users and carers?
- How has the service user and carer participation led to service improvements in respect of staffing?
- How does your service take into account the views of service users about staffing in your service (e.g. questionnaires, group or individual consultation meetings)?
- To what extent do you involve service users and carers in the recruitment and selection of staff?
- To what extent do you involve service users and carers in the development of staff training plans?
- How do you take the views of carers into account in determining the strengths and areas of development of the service in respect of staffing?
- What recent service improvements have you made, in respect of staffing, as a result of taking into account service users and carers' views?
- How has service user/carer feedback helped to grade this Quality Theme related to staffing?

Service provider evidence of strengths
Areas of improvement identified by the service provider:

Other issues
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Target action date
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Service provider grading
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Quality Statement 3.2
We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Sources of Evidence
- Recruitment and retention policies (5.5, 5.6, 5.10)
- Staff files (5.4, 5.6)
- Adult and child protection policies
- Induction programme (5.3)
- Disclosure Scotland and/or PVG scheme checks (5.5)
- Checks with professional bodies (e.g. SSSC, NMC, GMC) (5.5)
- Staffing arrangements including rotas

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.
- Do you operate an effective, safe and transparent recruitment and retention policy and procedures?
- Do you have an equal opportunities policy which you monitor to ensure equality and fairness for staff including race, religion, ethnicity, disability and gender?
- Do your staff files reflect that you have followed robust procedures and the appropriate checks have been undertaken (e.g. Disclosure Scotland and/or PVG scheme checks, SSSC, GMC, NMC) for all staff grades and volunteers?
- Have you recruited staff in appropriate numbers and skill mix to meet the aims and objectives of the service and the needs of service users?
- Are your staff registered with the relevant professional body (e.g. SSSC, GMC, NMC)?
- Do your staff undergo a comprehensive induction programme? What does this cover?
- How does your service promote an open and transparent environment such that your staff are confident in reporting poor practice? Do your staff view feedback with defensiveness or as an opportunity?
- How do you ensure that your staff have a good knowledge of your adult and child protection policies and a clear understanding of their roles and responsibilities in respect of adult and child protection?
Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues
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Target action date
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Service provider grading
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Quality Statement 3.3
We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Sources of Evidence
- Policies and procedures e.g. recruitment, whistleblowing, service user protection (5.1-5.6, 5.10)
- Induction programme (5.3)
- Staff development strategy (5.9)
- Staff records including professional development, education and training (5.9, 5.10)
- Records of communication with staff, service users and carers, other agencies (13.6, 14.4, 14.8, 14.9, 15.5)
- Exit interviews

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.
- What relevant policies do you have in place to support this Quality Statement e.g. recruitment, whistleblowing, confidentiality, protection of vulnerable adults and child protection? How do you ensure that staff are aware of these policies and procedures and can implement them appropriately?
- How does individual staff development link into your staff development strategy, e.g. framework for staff supervision, continuous professional development, education and training programmes which ensures that staff are adequately trained to meet the needs of the service users? Do your staff records reflect this?
- How do your staff work to relevant professional Codes of Practice (e.g. SSSC, NMC, GMC)?
- How do you ensure that your staff are aware of the National Care Standards, research and best practice and how do they use these to inform their, and others', day to day practice?
- How do you ensure that your staff work in effective teams which deliver good outcomes for service users?
- Can your staff demonstrate a knowledge of the needs of the service users and do they plan service users’ care accordingly?
- How do your staffing arrangements promote continuity of care?
- Are your staff clear about lines of communication and accountability? e.g. would staff state that engagement with management and other staff is positive? What is the communication network across departments and between management and other staff?
- What mechanisms are in place which support your staff to liaise appropriately with other professionals and agencies?
- Does your service/organisation have an open and transparent environment such that your staff are confident in reporting poor practice?
- Do your policies and practice support staff retention?
### Service provider evidence of strengths


### Areas of improvement identified by the service provider:


### Other issues
Please provide information about any other issues you feel are relevant when making the quality assessment.


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Service provider grading
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Quality Statement 3.4
We ensure that everyone working in the service has an ethos of respect towards service users and each other.

Sources of Evidence
- Policies and procedures (5.1, 5.4, 5.10, 9.7)
- Participation strategy, minutes of meetings etc.
- Staff training records (5.4, 5.6, 5.7, 5.9)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.
- How do you ensure that there are clear procedures for setting standards of conduct, care and welfare?
- How would your staff demonstrate that they have a good knowledge of the National Care Standards (NCS) and the principles, including how these have had a direct impact on their work with service users?
- How do your policies and procedures reflect the NCS and principles?
- Staff and carers can describe a culture of the service which reflects good values and your staff can be observed putting these values into practice, interacting positively with service users and being responsive to service users' needs?
- Are your staff trained in the promotion of the principles of equality and diversity and what evidence do you have that they operate in accordance with these principles?
- How do your staff encourage service users to express their views and ask questions?
- What opportunities do you provide for both your staff and service users to discuss matters in confidence?
- If asked, would your service users report that staff are respectful and caring and treat them with dignity?

Service provider evidence of strengths
Areas of improvement identified by the service provider:

Other issues
Please provide information about any other issues you feel are relevant when making the quality assessment.

Target action date
Please provide a target date by when you will complete any improvement actions you have mentioned above.

Service provider grading
Please provide a grade for your service under this Quality Statement. Please tick one box below.

☐ 6 – Excellent  ☐ 5 – Very good  ☐ 4 – Good
☐ 3 – Adequate  ☐ 2 – Weak     ☐ 1 – Unsatisfactory

DOCUMENT FOR INFORMATION ONLY – DO NOT USE TO SUBMIT TO CARE INSPECTORATE
Quality Theme 4: Quality of Management and Leadership

Quality Statement 4.1
We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Sources of Evidence
- Participation strategy (11.1 – 11.8)
- Service user questionnaires, minutes of consultation meetings etc.
- Corporate plan/annual report/statement of aims and objectives

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.
- Do you have a participation strategy which reflects the way in which you engage with service users and carers?
- How has service user and carer participation influenced the strategic direction of your service?
- How do you take into account the views of service users in respect of development of the strategic direction of your service (e.g. questionnaires, group or individual consultation meetings)?
- How have you involved service users in undertaking this self assessment process?

Service provider evidence of strengths

Areas of improvement identified by the service provider:
Other issues
Please provide information about any other issues you feel are relevant when making the quality assessment.

Target action date
Please provide a target date by when you will complete any improvement actions you have mentioned above.

Service provider grading
Please provide a grade for your service under this Quality Statement. Please tick one box below.

☐ 6 – Excellent  ☐ 5 – Very good  ☐ 4 – Good
☐ 3 – Adequate  ☐ 2 – Weak     ☐ 1 – Unsatisfactory
Quality Statement 4.2
We involve our workforce in determining the direction and future objectives of the service.

Sources of Evidence
- Communication records with staff (e.g. minutes of team meetings, staff questionnaires) (5.4)
- Staff supervision/appraisal records (5.1, 5.5)
- Staff professional development and training records (5.2, 5.4)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.
- Are your staff knowledgeable about the strategic plan, and aims and objectives of the service, and are consulted when aims and objectives are developed? How are staff offered the opportunity to influence the strategic direction of your service?
- How would staff describe the culture of leadership and management in your service?
- How do you encourage your staff to bring new ideas and learning into the service?
- Do you consult your staff about how their time and skills are deployed in the service? What influence do your staff have on staffing/staff management issues?
- How do you promote an effective learning culture for your service/organisation, including providing access to resources to enable staff to keep up to date about the care sector in which your service operates (e.g. websites, journals, magazines and reports)?

Service provider evidence of strengths
Areas of improvement identified by the service provider:

Other issues
Please provide information about any other issues you feel are relevant when making the quality assessment.

Target action date
Please provide a target date by when you will complete any improvement actions you have mentioned above.

Service provider grading
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☐ 3 – Adequate  ☐ 2 – Weak  ☐ 1 – Unsatisfactory
Quality Statement 4.3
To encourage good quality care, we promote leadership values throughout our workforce.

Sources of Evidence
- Training records (5.1 – 5.4, 5.7, 5.9)
- Appraisal/supervision records (5.1, 5.4)
- Staff surveys

Corporate plan/annual report/statement of aims and objectives

NB References to "Managers" means owners, managers, a board etc. as appropriate.

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.
- Is it clearly defined who is responsible for planning within your service and updating your service's strategic aims and objectives, including updating policies, staff management structure and staff training to deliver new strategic developments?
- How do you ensure that your staff understand the aims and objectives contained in your corporate plan/annual report/statement of aims and objectives, and are they committed to them?
- Do your managers have aims and objectives which clearly define their leadership responsibilities?
- Do your staff demonstrate effective leadership qualities and communication skills which foster effective working relationships between staff and service users?
- How do you motivate your managers and staff to become leaders? What evidence do you have that you have achieved this outcome?
- What systems do you have in place to support staff to develop their leadership skills and management of change?
- Do you make leadership training accessible to all staff?
- What evidence do you have that staff success is recognised and celebrated?
- Do you promote staff autonomy and decision making in a supportive environment?
- How do the leadership values in your service ensure that staff are continually striving towards achieving high quality evidence-based relationship centred care?
Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues
Please provide information about any other issues you feel are relevant when making the quality assessment.
Target action date
Please provide a target date by when you will complete any improvement actions you have mentioned above.

Service provider grading
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☐ 3 – Adequate  ☐ 2 – Weak  ☐ 1 – Unsatisfactory
Quality Statement 4.4
We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Sources of Evidence
- Corporate plan/annual report/statement of aims and objectives
- Quality assessment policies, methods and records of reviews and updates
- Quality assurance models
- Best value review
- Self evaluation process
- Records of consultation with stakeholders including service users and carers
- Quality Assurance Awards
- Complaints procedure including access to advocacy (11.1 – 11.6)

Some questions to ask yourself. You may wish to record your responses as part of the evidence you submit to us.
- How do you assure quality in your service?
- What quality assurance models do you use/participate in (e.g. Scottish Government Self Evaluation document "How good is our team", Investors in People, scrutiny from external bodies)?
- How often do you review the quality systems you have in place?
- How are service users involved with your quality assurance and self evaluation process?
- What methods have you developed to encourage feedback from stakeholders e.g. service users and carers, social workers and external regulators and agencies?
- What action have you taken in response to feedback from service users and carers and other stakeholders and how has this improved the service?
- Have you developed, submitted and implemented an action plan to take account of any requirements and recommendations from regulatory activity?
- How does quality assurance inform staff supervision?
- Do you make notifications to stakeholders, SCSWIS, SSSC and other professional bodies?
Service provider evidence of strengths

Areas of improvement identified by the service provider:

Other issues
Please provide information about any other issues you feel are relevant when making the quality assessment.
Target action date
Please provide a target date by when you will complete any improvement actions you have mentioned above.

Service provider grading
Please provide a grade for your service under this Quality Statement. Please tick one box below.

- [ ] 6 – Excellent
- [ ] 5 – Very good
- [ ] 4 – Good
- [ ] 3 – Adequate
- [ ] 2 – Weak
- [ ] 1 – Unsatisfactory