Appendix 3 - Documents that support QA Visits

The following documents support the Quality Assurance visits

Quality Assurance Visits Public Health Service Contracts

Quality Assurance (QA) visits form part of the QA process and provide invaluable contextual insight and assurance of the quality of services commissioned and provide an important opportunity for commissioners and providers to learn and improve services.

QA Visits are either planned (as set out in the contract schedules), responsive or unannounced.

The overarching aims of QA visits are to:

- 1. Gain a contextual understanding of the services commissioned
- 2. Develop effective working relationships between staff in provider and commissioner organisations
- 3. Understand the perspectives of Service Users (SUs) and the successes and constraints of service user journey's
- 4. Explore and triangulate performance and quality indicator to support a shared understanding of continuous quality improvement and service development
- 5. Identify key areas of success and any areas of concern
- 6. Agree actions and timescales as an outcome of QA visit

| Commissioner and p | provider actions to support Q | A Visits | |
|----------------------|-----------------------------------|---|---|
| When | Who | What | Notes |
| Please note the aims | and objectives of the visit are s | et out in the QA Visit documentation | |
| 4 weeks before visit | Commissioner and provider | Agree service are to be visited | Ideally this can be agreed at Contract Quality Review Meeting |
| | Commissioner | Confirm who will be part of the commissioner QA Team Confirm with the provider, the location, time and duration of visit | Confirmed by Contract Lead |
| | Commissioner | Provide QA Visit documentation to provider that sets out: 1. Aim and objectives of the QA visit 2. The requirements of the visit (for example observe service delivery and setting(s), meet Service Users | Shared by Contract Lead QA documentation developed jointly by Policy Lead, Quality Lead and Contract Lead |

| | mmissioner and provider actions to support QA Visits | | |
|----------------------|--|---|------------------------------------|
| When | Who | What | Notes |
| | | (SU) and staff) including format of engagement with | |
| | | SU and staff | |
| | | Provide an outline time schedule for the visit | |
| 3 weeks before visit | Provider | Complete service details on QA Visit documentation and | |
| | | share with commissioner | |
| | | This should include any audit reports and supporting | |
| | | Service User vignettes/stories/feedback | |
| | | Confirm to commissioner which staff and how many | |
| | | service users will be part of the QA Visit | |
| | | Add detail to the time schedule to support the visit and | |
| | | share with commissioner | |
| | | Ensure staff and rooms for the visit are available | |
| 2 Weeks before | Commissioner | QA Team hold a Pre Visit Preparation meeting - review | |
| | | documentation and reports shared by provider, agree | |
| | | how they will undertake the visit, responsibilities of the | |
| | | QA Team for the QA visit and questions and focus of | |
| | | discussion | |
| 1 week before | Commissioner /provider | Confirm arrangements for QA visit and provide any | |
| | | clarification of times schedule and arrangements | |
| | | It should be made clear to any staff or service users who | |
| | | agree to share information as part of the QA visit that any | |
| | | information that is shared that may present as a | |
| | | safeguarding concern will be escalated in accordance | |
| | | with the NSCB Interagency Safeguarding procedures. | |
| Day of visit | Provider | Ensure service area, staff and SUs available to support | |
| | | agreed schedule of visit | |
| | Commissioner and Provider | Setting the scene – an initial meeting at the start of the | Opportunity to clarify and confirm |
| | | visit to confirm format and focus and timescales of the | requirements |
| | | visit format | |
| | Commissioner | Undertake visit with providers as per visit schedule | |
| | Commissioner | QA Team meet to agree initial headline feedback | |
| | | Discuss any urgent safeguarding or safety concerns | |
| | Commissioner and Provider | QA Team and provider representatives meet together for | |
| | | sharing learning from visit | |
| | | Commissioner shares headline feedback | |
| 1 week post visit | Commissioner | QA Team meet to review and agree feedback to be | Feedback and documentation to be |
| • | | shared with provider and any actions required | shared by Contract Lead |

| Commissioner and p | rovider actions to support Q | A Visits | |
|---|-------------------------------------|--|--|
| When | Who | What | Notes |
| 2 weeks post visit (10 working days) | Commissioner | Provide feedback report and areas for to be developed into an agreed action plan following the visit | Written by Quality Lead and agreed by QA Team who attended the visit Shared with provider by contract lead |
| Next Contract Quality Review Meeting | Provider Commissioner and provider | Provide draft action plan, to include action, owner, timescales Agree action plan, time scales and review | Discuss and agree at next available meeting |

Template for Quality Assurance Visit - Public Health Service Contracts

Introduction from commissioners

Local authorities have a statutory duty to have regard to the NHS Constitution (2009) when exercising their public health functions under the NHS Act 2006. This includes principles, values, rights, responsibilities and pledges set out within the NHS Constitution as set out in the Public Health Supplement to the NHS Constitution (2013).

Nottinghamshire County Council as a commissioner of Public Health Services recognises that patients/service users and the public 'have the right to be treated with a professional standard of care, by appropriately qualified and experienced staff, in a properly approved or registered organisation that meets the levels of safety and quality' (NHS Constitution 2009:26).

Commissioning is a tool for ensuring high quality, cost effective care and relies on adequate and meaningful data and information about the service. Quality is a golden thread that runs through the Public Health Service contract.

Each contract sets out generic and service specific quality requirements that are focused on the delivery of high quality of care that is evidenced based and cost effective. With a clear requirement and commitment to the delivery of improved safety, effectiveness of services and improved service user experience. The Quality Assurance Visits (QAV) form part of the quality assurance process and provide an opportunity for provider and commissioners to work collaboratively to enhance the quality of care and SU experience.

The planned visit...

| Details of the visit | |
|--|--|
| Service name | |
| Service area | |
| Place (of visit) | |
| Date of visit | |
| Names and roles of Public Health Team who will be part of visit | |

| Reason for visit | Quality Assurance visit as agreed and set out within the quality schedule |
|------------------|---|
| Aim of the visit | For commissioners to gain an understanding of the service commissioned, to meet staff and service |

| users, to develop effective working relationships between provider and commissioner and to provide assurance to the Public Health Senior Leadership Team (PH SLT) and Nottinghamshire County Council about the quality of Public Health Services |
|--|
| commissioned. |

Sections 1-7 to be completed by the provider in advance of the visit and shared with the commissioner 2 weeks prior the planned visit

| commissioner 2 wee | ks prior the planned visit |
|----------------------------|---|
| 1. Background infor | mation about the service |
| Please provide the details | s below: |
| Background | |
| information about | |
| the service area to | |
| be visited | |
| 0. Comice Hear (011) | Osfato |
| 2. Service User (SU) | y for the service area visited below |
| Number of serious | y for the service area visited below |
| incidents and SU | |
| safety incidents over | |
| last 6 months | |
| Themes identified | |
| and action taken | |
| and action taken | |
| | |
| 3. Service User Exp | |
| · | y for the service area to be visited below: |
| Number of | |
| complaints over last | |
| 6 months | |
| | |
| Themes and action | |
| taken | |
| What do service | |
| users tell you? | |
| l access to a year | |
| SU feedback | |
| _ | |
| Compliments | |
| | |
| Other feedback from | |
| SUs | |
| | |

| 4. Quality standards | |
|----------------------------|---------------------------------------|
| Please provide a summar | y for the service area visited below: |
| Staffing levels | |
| | |
| | |
| | |
| | |
| | |
| Audits | |
| | |
| | |
| | |
| | |
| 5. Areas of focus for | |
| Please provide the details | below: |
| Add detail for visit* | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| 6. Workforce and sta | |
| Please provide the details | s below: |
| Workforce | |
| Development and | |
| training-how are | |
| these needs met | |
| Ctoff wallbaing | |
| Staff wellbeing | |
| (survey results) | |
| Staff profile | |
| Staff sickness | |
| Otali Sickriess | |
| Staff turnover | |
| Otan tamover | |
| | |
| Vacancy rate | |
| vacarity rate | |
| | |
| L | |
| 7. Placements for st | udents and volunteers |
| Please provide the de | |
| Students | Julio Dolow. |
| Otauenta | |

| training institutions | |
|-----------------------|------------------------|
| do you collaborate | |
| with? | |
| What type of | |
| student, length of | |
| placement and | |
| number placed in a | |
| year? | |
| Do you have any | |
| students in the | |
| service area | |
| currently? | |
| Feedback from | |
| students | |
| | |
| Placement audits | |
| Volunteers | |
| Do you have a | |
| volunteer | |
| programme in the | |
| service? | |
| Summary of | |
| volunteer training | |
| and accreditation | |
| Feedback from | |
| volunteers | |
| | |
| Summary of visit from | <u>n Commissioners</u> |
| | |
| Summary of visit fro | om commissioners |
| What we observed | |
| /saw | |
| | |
| | |
| What we beard | |
| What we heard | |
| | |
| | |
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Which HEI and

What staff told us

(for example:

| Head | of | Service, |
|------------|-------|----------|
| Practition | one | rs, |
| Admin | staf | f) |
| What s | erv | ce users |
| shared | l wit | h us |

References

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http://webarchive.nationalarchives.gov.uk/20150407084003/http://www.midstaffspublicinquiry.com/report

ⁱⁱⁱ Public Health Supplement to the NHS Constitution - for local authorities and PH England. 2013.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/473475/NHS_Constitution-PublicHealthSupp.pdf

iv The Equality Act 2010. Equality Act Guidance. 2010. https://www.gov.uk/guidance/equality-act-2010-guidance

^v The Health and Social Care (Safety and Quality) Act 2015. http://www.legislation.gov.uk/ukpga/2015/28/pdfs/ukpga 20150028 en.pdf

ⁱ Health and Social Care Action (2012)

ⁱⁱ The Mid Staffordshire NHS Foundation Trust Public Enquiry. Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry. Chaired by Robert Francis QC. 2013. London Stationary Office.