

# Quality Outcomes Report 2015



North Tyneside Council

Parkvale  
August 2015



Name of Service:	Parkvale
Date of Visit:	20th August 2015
Manager:	John Tolan
Person in Charge on day of visit:	John Tolan
Contracts Team Officers:	Nina Dixon and Bev Gosling

Not Met	Poor evidence of outcome being met
Partially Met	Good evidence of outcome being met /majority of evidence is in place but not all
Fully Met	All evidence is in place demonstrating the outcome is fully met

**SUMMARY;**

Parkvale is a residential care service for males with a forensic background with a degree of learning disability or mental health needs. The service is situated in the Whitley Bay area of North Tyneside. Staff members spoken with during the visit were very positive about their role and felt that the organisation and The Manager supported them well. People supported appeared happy within their environment during the course of the visit.

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
1. People benefit from Personalised Care	1.1 Effective assessment procedures ensure that placements are appropriate and well planned	Overall this outcome was met. It would be good practice to ensure that any best interest decisions made regarding placements should be held within the persons' records.	Fully met	2
	1.2 Effective care planning and review processes ensure people receive excellent, individualised care	Overall this outcome was met. Clients had signed support plans viewed which showed that they had involvement in the care planning process. Long term goals for people had been identified, where independence was promoted.	Fully met	2
	1.3 Positive risk taking ensures people are encouraged to maintain independence	This outcome was partially met. The organisation does not have a formal positive risk taking policy in place. Clients were being supported to take positive risks where possible. This was supported in line with ministry of justice sanctions.	Partially met	1
			<b>Score</b>	<b>5</b>
2. People are supported by excellent staff	2.1 Comprehensive training procedures ensure staff have access to up to date knowledge and skills that is appropriate to the needs of the clients receiving the service.	Overall this outcome was met. It would be good practice to have expiry dates of training attended and the date of the actual attendance within the matrix. Therefore a firm view of staff training being up to date would be possible.	Fully met	2
	2.2 Staff are supported to undertake their duties	Overall this outcome was met. It would be good practice for staff to sign meeting minutes to show evidence of their attendance or to acknowledge that minutes have been read.	Fully met	2

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score	
2. People	2.3 Positive Staff Morale ensures people receive dignified care from a stable and productive staff team	This outcome was partially met. The organisation does not carry out an annual staff satisfaction survey which would be good practice in being able to bench mark quality and performance targets as a result.	Partially met	1	
			<b>Score</b>	<b>5</b>	
3. Management systems ensure an excellent quality of service provision	3.1 Effective quality assurance procedures ensure the manager has a clear overview of service performance	This outcome was partially met. There was a case tracking system in place, which enabled The Manager to identify actions to be taken as required. Accidents and Incidents are responded to through a reporting process on an individual basis. To further develop quality assurance systems it may be beneficial for the organisation to have a monthly reporting system, which would allow for action plans to be developed. At Head Office a system to disseminate new versions of policies to staff was being developed and had yet to be formally introduced. A Management review of the service was not in place, again this may be beneficial where audit plans could feed into a yearly plan ahead.	Partially met	1	
	3.2 Effective Business Continuity procedures ensure the service can continue to care for people during crisis situations	This outcome was not met. As reflected within the previous two years' quality monitoring reports, the service does not have a Business Continuity Plan. Within Head Office there are emergency telephone numbers and reference to alternative accommodation. However there was no tangible evidence that demonstrated staff working within the service had a clear plan available to them to follow in the event of an emergency. The plan should consider all crisis events that may impact negatively on the safety and well-being of people using the service e.g. pandemics, severe weather i.e. floods. The impact of the risk factors/events should then be identified. Staff should be aware of and trained in the use of the plan. The response plan should be reviewed annually/key contact details updated as required.	Not met	0	
	3.3 Effective recruitment procedures ensure the right staff are employed and people are protected from harm		0	Fully met	2
	3.4 Effective staff management ensures the right numbers of staff are available at the right time and have the right skills, knowledge, experience and competencies to carry out these duties.	Overall this outcome was met. The staffing rota viewed showed that the number of hours people needed for their support was being provided. It would be good practice to ensure that The working time directive is addressed with opt out forms held for each staff member, where applicable. This should ensure that people don't work back to back shifts.		Fully met	2
	3.5 Robust financial procedures ensure people retain as much financial independence as possible and are protected from financial abuse	This outcome was partially met. Within the support plans viewed inventories were not present. It would be good practice to complete inventories, particularly for larger items of value.		Partially met	1
			<b>Score</b>	<b>6</b>	

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
4. People benefit from a transparent, consistent and equitable service through effective policies and procedures	4.1 Effective Health and Safety procedures ensure people are cared for in a safe environment	This outcome was not met. The Health and Safety Policy had recently been reviewed, although the most recent version was not available within the service. During the visit it was explained that new arrangements for sharing updated policies with staff were being developed at Head Office. The Manager was reporting accidents and incidents appropriately, with remedial actions being identified on an individual report basis. It would be good practice to develop an auditing process, which would assess performance and enable trends to be identified. Clear arrangements for the consultation with staff had yet to be developed. An Immediate Notification was issued to the provider at the time of the visit as The Fire Risk Assessment was not completed by a trained person and it was not representative of the service building structure or bespoke to the service. Fire drills were taking place but no clear link to the evacuation plan was evident within drill discussion records. PEEPs could be expanded to cover night time and any mobility needs applicable to the individual. PEEPs should be held in a central file, readily available in the event of an emergency. It would be good practice to include scenarios during night time hours within fire drills for staff.	Not met	0
	4.2 Equal Opportunities procedures promote equal access to services and protect people from discrimination	This outcome was partially met. Recruitment procedures could be expanded to demonstrate that an effort will be made to include interview members appropriate to gender of candidates. Exit interview process' should offer the opportunity for staff to explain reasons for leaving and used to develop the service. Equality Impact Assessments are not carried out when implementing or reviewing policies.	Partially met	1
	4.3 Proactive Complaints and Compliments procedures ensure services are reactive and responsive to people's needs	Overall this outcome was met. Although the organisation does have a complaints policy, it is provided to people on request (as mentioned within the service user guide). It was a recommendation that the complaints policy could be readily available and accessible within the service. The complaints log was viewed and there was no record of any complaints being made over the last year. It would be good practice to ensure that the log captures	Fully met	2
	4.4 Confidentiality and data protection procedures ensure that sensitive information is treated with respect	Overall this outcome was met. The organisation has a confidentiality policy, which covers all aspects of client information. It would be good practice to include specific reference to individuals financial status being confidential and should not be shared except on a "need to know" basis. Also that Staff understand they must not borrow nor benefit either directly or indirectly from residents money.	Fully met	2
			<b>Score</b>	<b>5</b>
d respect	5.1 People are able to engage in meaningful activity and occupation	This outcome was fully met.	Fully met	2
	5.2 People are encouraged and supported to maintain and develop relationships	This outcome was fully met.	Fully met	2
	5.3 People are proactively involved in services	This outcome was partially met. It would be good practice to reflect people supported playing a validated role within staff recruitment procedures. Individual client satisfaction surveys are carried out, although the results are not collated holistically throughout the organisation. This would be beneficial in terms of developing services or setting targets.	Partially met	1

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
5. People experience dignity and	5.4 People experience Choice and Control in every part of their life	Overall this outcome was met. One persons' support plan viewed showed that a 'strip wash' was being recorded on an almost daily basis. It was not clear if this was suitable to the person or if any intervention or prompts would be needed around personal hygiene, according to the support plan information.	Fully met	2
	5.5 Privacy is a valued part of everyday life	Overall this outcome was met. It was explained during the visit that historical arrangements were in place around people being supported to manage keys. It would be good practice in the future to demonstrate this consideration within the support planning process.	Fully met	2
	5.6 People experience a sense of belonging and being a valued part of the community	This outcome was partially met. For clients who are able to access leisure and educational activities within the community, it would be good practice to reflect on this and set goals within support plans. A community mapping exercise may assist with this, in being able to signpost people to particular activities or venues. It was acknowledged that there was some literature about local services available on the notice board in the kitchen area.	Partially met	1
	5.7 People have timely and appropriate access to information	Overall this outcome was met. Advocacy arrangement information could be included within Service User Guides. The service utilised house meetings to discuss relevant information pertaining to the service.	Fully met	2
			<b>Score</b>	<b>12</b>
6. People are protected from avoidable harm and are cared for in a safe environment	6.1 The Mental Capacity Act 2005 and Deprivation of Liberty procedures are effective and ensure people are treated with dignity and are protected from harm	This outcome was partially met. It was good to see that people were being supported to make particular choices and decisions around their lives. However it was felt that consideration of peoples' capacity should be considered when important or specific decisions need to be made. It would be good practice to have ready access to MCA forms within the service.	Partially met	1
	6.2 Excellent safeguarding procedures ensure people are protected from harm	Overall this outcome was met. A procedure to demonstrate staff's awareness of the whistle blowing policy could be developed. The Safeguarding policy could be expanded to include the arrangements for people entering the service to carry out maintenance work.	Fully met	2
	6.3 Proactive falls prevention practices and procedures ensure that actions are taken to reduce the incidence and impact of falls	This outcome was not applicable to the client group at the time of our visit.	Not applicable	Not applicable
	6.4 Maintaining a safe environment ensures people are protected from potential hazards	This outcome was partially met. Repairs and maintenance requests are submitted via an online system. The Manager is required to grade the work according to high, medium or low request. This system could be developed further by recording an intended date for works and to record when completed. The Manager completes checks of furniture and equipment, it would be good practice to formally record these checks. It would be good practice to have a 'schedule of works' in place to inform people of the intended renewal and maintenance programme for the internal environment within the service	Partially met	1
	6.5 Appropriate and safe equipment ensures people receive safe and dignified care	This outcome was not applicable to the client group at the time of our visit.	Not applicable	Not applicable
			<b>Score</b>	<b>4</b>

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
7. People experience improved health and well-being	7.1 People's nutritional needs are comprehensively met and dining is a positive experience for all	This outcome was fully met.	Fully met	2
	7.2 Effective Health and Hygiene practices minimise the risk of cross infection	Overall this outcome was met. It was a recommendation to address reporting procedures to Environmental Health within the organisations' Infection Control Policy.	Fully met	2
	7.3 Robust medication procedures ensure people receive the right medication at the right time to protect their health	This outcome was partially met. As reflected within last years' quality mentoring report; error reporting procedures are referenced within the organisations' medication policy, it would be good practice to include recording on safeguarding log. Medication training and competencies need to be updated for staff within the service.	Partially met	1
			<b>Score</b>	<b>5</b>

<b>Total Scored</b>	<b>42</b>
<b>Maximum Score</b>	<b>56</b>
<b>Percentage scored</b>	<b>75%</b>