

3	Encourage and support Service Users to always express their view, choices and preferences about the way their care and support is delivered.	<p>Documentation</p> <ul style="list-style-type: none"> - The care plan should be individually tailored, person centred, include appropriate information on the SU's preferences and views and clearly evidence that they were involved in the decisions about how their care and support is to be delivered. - Robust induction process is in place that covers rights and choices. - Advocacy is provided for people with no family or friends. - The provider undertakes citizen quality surveys or similar. <p>Staff feedback</p> <ul style="list-style-type: none"> - Staff can explain how they know about citizens' preferences and to be encouraging them to exercise choice. <p>User feedback</p> <ul style="list-style-type: none"> - Service users confirm they are always able to express their views, exercise choice and preference about how their care is delivered.
4	Put service users at the centre of their care by giving them adequate information in an appropriate and meaningful way to enable them to make informed decisions about the care and support they receive.	<p>Documentation</p> <ul style="list-style-type: none"> - The Provider meets the requirements of the 'Accessible Information Standard' in its delivery of services including the 5 steps. 1. Ask, 2. Record, 3. Alert/flag/highlight, 4. Share, 5. Act. - Citizens' communication needs have been properly & thoroughly identified & recorded - Citizen's communication needs and the way these are to be met are highly visible whenever

	6	Encourage and support Service Users to give them feedback about how they can improve their Services and act on the feedback given.	<p>Documentation</p> <ul style="list-style-type: none"> - The service has systematic methods in place to ask for, record and act on customer feedback - The service clearly documents customer feedback and how it acts upon this to improve the service. - A variety of methods are used to collect feedback - meetings, questionnaires, surveys, interviews, etc. - The views of family, friends, advocates and visiting professionals are sought. <p>User feedback</p> <ul style="list-style-type: none"> - Citizens (and family/advocates) will report that they are encouraged to give feedback and that it is easy to do so. They will know what changes have been made as a result. <p>Staff feedback</p> <ul style="list-style-type: none"> - Manager & staff will be able to explain how they encourage & enable all citizens to give feedback, including promoting and enabling the use of advocates (formal & informal) for citizens without family members or friends to support them.
2. Consent	1	Ensure staff know and understand when to obtain consent, when to take verbal or implied consent and how to document records of consent.	<p>Documentation</p> <ul style="list-style-type: none"> - Records of consent are kept and updated regularly. <p>Staff feedback</p> <ul style="list-style-type: none"> - Staff can explain that they understand when to obtain consent and how to record this.
	2	Assess their capacity as required to give informed consent and ensure this is reviewed regularly.	<p>Documentation</p> <ul style="list-style-type: none"> - Care plans evidence that appropriate capacity assessments have been carried out and reviewed regularly. - Best interest decision making is documented. - Decisions are followed in line with the Mental Capacity Act and that any restrictions are taken into account in line with Deprivation of Liberty Safeguards when providing care and support. - Care plans contain the date of the expiry of any authorised Deprivation of Liberty Safeguards. - Power of Attorney is clearly documented and evidenced across the care plan where relevant.
	3	Provide Service Users with sufficient information relating to consent and ensure this is reviewed regularly	<p>Documentation</p> <ul style="list-style-type: none"> - Service users are provided with accessible and up to date information about consent.
	4	Support Service Users to access advocacy services to help them make informed decisions.	<p>Documentation</p> <ul style="list-style-type: none"> - Service users have been assessed as to whether they require an Mental Capacity Act advocate and, if so, the required authority been obtained.
	5	Follow advanced decisions in line with the Mental Capacity Act 2005.	<p>Documentation</p> <ul style="list-style-type: none"> - Any advanced decisions are both recorded and followed in line with the Mental Capacity Act and that any restrictions are taken into account in line with Deprivation of Liberty Safeguards when providing care and support.

	<p>6 Take account of restrictions in line with the Deprivation of Liberty Safeguards when providing care and support.</p>	<p>Documentation - Any restrictions are taken into account in line with Deprivation of Liberty Safeguards when providing care and support. Care plans contain the date of the expiry of any authorised Deprivation of Liberty Safeguards. Staff feedback - Care staff are able to describe how they ensure that the principles of the Mental Capacity Act are put into practice in their daily work.</p>
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Gold evidence examples

Listed below are examples of the type and style of evidence that is required for a Gold rating to be awarded.

Respecting and involving service users

- The service ensures all its employees are aware of

	<p>Food and drink are provided in environments that promote Service Users dignity and they have a choice about whether to eat alone or with company.</p> <p>Support Service Users to access specialist services, guidance and advice where required.</p>	<p>Documentation</p> <ul style="list-style-type: none"> - Care plans evidence service user eating and drinking preferences and needs. <p>User feedback</p> <ul style="list-style-type: none"> - Service users confirm they can choose where to eat. <p>Documentation</p> <ul style="list-style-type: none"> - If required the care and support plans should evidence details of support to access any specialist services. - Clear record of any specialiaa.anyiaa f 519.996 (p) 148.716 40.32 Td .73847(e)4531(n)2.09607(d)2.03e
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Listed below are examples of the type and style of evidence that is required for a Gold rating to be awarded.


Care and welfare of service users

- The service uses imaginative and innovative ways to manage risk and keep people safe while making sure they have a full and meaningful life. The service actively seeks out new technology and solutions to make sure that people have as few restrictions possible.
- There is a transparent and open culture that encourages creative thinking in relation to people's safety. The service seeks out current best practice and uses learning from this to drive improvement.
- Staff show empathy and have an enabling attitude that encourages people to challenge themselves while recognising and respecting their lifestyle choices.
- The service receives very high levels of outcome delivery approvals over a prolonged period from social workers during individual case reviews.
- The service is focused on providing person-centred care and it achieves exceptional results. Ongoing improvement is seen as essential. The service strives to be known as outstanding and innovative in providing person-centred care based on best practice.
- The service is flexible and responsive to people's individual needs and preferences, finding creative ways to enable people to live as full a life as possible. Where the service is responsible, the arrangements for social activities, and where appropriate education and work, are innovative and meet people's needs.

Domain 3 - Safeguarding and Safety

Standard	No.	Criteria	Silver evidence examples
6. Safeguarding people who use the service from abuse		Take action to identify and prevent abuse from happening in the Services and respond appropriately when it is suspected that abuse has occurred or is at risk of occurring.	<p>Documentation</p> <ul style="list-style-type: none"> - Staff have been appropriately trained, training is up to date and records reflect this. - Policies and procedures are up to date and regularly reviewed. - Safeguarding log is maintained and reviewed. - Service user guide details the process and who to contact. - Evidence of learning from previous safeguarding alerts and that this has been implemented. <p>Staff feedback</p> <ul style="list-style-type: none"> - Staff can explain knowledge of safeguarding, the different types of abuse or neglect, what to look for and how to report a concern both within and outside their organisation.
		Be aware of, and follow, their responsibilities under the Local Authority's safeguarding and whistle-blowing policy and procedures.	<p>Staff feedback</p> <ul style="list-style-type: none"> - Staff are able to explain how they would identify and prevent abuse and what they would do if they suspected that abuse had occurred, including their responsibilities under the Local Authority's safeguarding and whistle-blowing policy (and procedures) and who to report concerns to, both within and outside of the organisation.
		Ensure that appropriate guidance and training about safeguarding adults from abuse is accessible to staff, put into practice, implemented and monitored.	<p>Documentation</p> <ul style="list-style-type: none"> - Training records are up to date and reviewed regularly, refresher training is given. (Safeguarding, MCA, DoLS) - Safeguarding is discussed at staff meetings and in supervision meetings. <p>Staff feedback</p> <ul style="list-style-type: none"> - Staff confirm they have had the relevant training, can explain the principles and how they put what they have learned into practice.
		Where possible, only use Deprivation of Liberty Safeguards when it is in the best interest of the Service User and in accordance with the Mental Capacity Act 2005.	<p>Documentation</p> <ul style="list-style-type: none"> - Assessments, together with and care/support plans effectively maintain people's safety and Deprivation of Liberty Safeguards are only used when in the best interests of the service user.
		Review and update the Service User's care and support plan to ensure that individuals are properly supported following any (alleged) abuse.	<p>Documentation</p> <ul style="list-style-type: none"> - Evidence that the care plan has been updated to reflect the care and support given following incidences of alleged abuse. - Records demonstrate how the person is supported.

		sources of support outside the Services, including the Local Authority, and actively support and encourage Service Users to raise issues and concerns when necessary.	- Documentation is in an accessible format where required.
7. Cleanliness and infection control		Support Service Users and their carer when they have to take part in any safeguarding processes. Have effective arrangements in place to maintain appropriate standards of cleanliness and hygiene for the prevention, management and control of infection as identified in The Health & Social Care Act 2008 Code of Practice for health and adult social care on the prevention and control of infections and related guidance.	Documentation - Record of discussion of the safeguarding with the service user. - Evidence of identifying the support needs of the service user. Documentation - Effective systems and processes are in place to maintain cleanliness and hygiene, and control infection, e.g. Legionnella, cleaning rotas. Observation - Appropriate equipment



Keep appropriate records around the (prescribing) administration, monitoring and review of medications.

- Out of date or unused medication is disposed of appropriately, including appropriate disposal of controlled drugs.

Documentation

- MAR charts and medicine audit records. MAR chart includes name, D.O.B., allergies, dated photograph to enable easy identification of medicine recipient.
- PRN protocols are in place for PRN medication. Body maps are used for topical applications.
- Care plan is regularly reviewed and updated to reflect current medication and needs.
- Evidence of supporting the GP prescription review process.
- Effective monitoring of medication efficacy and side effects and that appropriate risk assessments are in place.

	Ensure that staff are appropriately trained on how to use equipment safely.	Documentation - Training records are up to date and demonstrate that staff have been appropriately trained. Staff feedback - Staff confirm that they have received appropriate training on how to use equipment safely and that they are confident to do so and that support is available if required.
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Gold evidence examples

Listed below are examples of the type and style of evidence that is required for a Gold rating to be awarded.

Safeguarding people from abuse

- The service has maintained an exceptional level of safety and has safeguarded the service users in its care to a very high standard and has delivered this consistently for a significant period of time. This can be demonstrated in the way that safeguarding issues are reported, investigated, reviewed and learned from.
- Staff demonstrate a high level of understanding of the need to keep people safe and have exceptional skills and the ability to recognise when people feel unsafe.
- Staff confidently make use of the Mental Capacity Act 2005 and use innovative ways to make sure people are involved in decisions about their care so that their human and legal rights are sustained.

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- The service uses imaginative and creative ways to manage risk and keep people safe while making sure they have a meaningful life. The service actively seeks out new technology and solutions to make sure people have as few restrictions as possible.
- A person centred approach is taken to assessing and reviewing risk, which promotes positive risk taking and provides as much freedom as possible.
- An overall approach pervades the service which maximises service user independence.

Domain 4 - Suitability of staffing

Standard	N
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		sickness, vacancies, absences and emergencies).	Managers can explain the business continuity plans and their roles and responsibilities.
		<p>Have effective mechanisms in place to identify and manage risks that result from inadequate staffing levels.</p> <p>Ensure that staff are able to communicate effectively and appropriately with Service Users who may have a variety of needs. Staff should have a basic understanding and appreciation of different cultures and be able to speak and understand English (or</p>	<p>Documentation</p> <ul style="list-style-type: none"> - Effective business continuity planning has been carried out and plans are in place. <p>Staff feedback</p> <ul style="list-style-type: none"> - Managers can explain the business continuity plans and their roles and responsibilities.

		work they undertake and the needs of the Service.	<ul style="list-style-type: none"> - Training needs are identified and documented via supervision. - Training records are updated and reviewed. <p>Staff feedback</p> <ul style="list-style-type: none"> - Staff confirm they have the opportunity to acquire further skills and qualifications relevant to their role.
		Ensure that any temporary staff have the appropriate training and skills to undertake their role.	<p>Documentation</p> <ul style="list-style-type: none"> - Relevant checks have been made that temporary staff have been appropriately trained to undertake their role. <p>Staff feedback</p> <ul style="list-style-type: none"> - Temporary staff confirm they have received appropriate training to carry out their role.
		Assess risks that may impact on performance and make reasonable adjustments to enable staff to fulfil their role.	<p>Documentation</p> <ul style="list-style-type: none"> - Risks are identified by performance management or staff supervision. - Reasonable adjustments have been made to enable staff to carry out their role.
		Have appropriate policies and mechanisms in place to prevent and manage incidents of bullying, harassment and violence towards staff.	<p>Documentation</p> <ul style="list-style-type: none"> - Relevant policies and procedures are available and accessible - Staff handbooks provide information about support available in event of bullying, harassment and violence at work. <p>Staff feedback</p> <ul style="list-style-type: none"> - Staff confirm that they feel supported and are aware of the mechanisms in place to prevent and manage bullying, harassment and

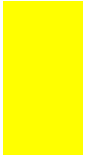
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Domain 5 - Quality of management

Standard	No.	Criteria	Silver evidence
13. Assessing and monitoring the quality of service provision	1	Continually gather and evaluate information about the quality of Services delivered to ensure that people receive safe and effective care and support	Documentation - Quality assurance system is in place and is actively used. - Satisfaction .91 3.99609 3.99609 re f 733.19(a)2.09607(c)--6 1317.91 m 838.996 44e

visitors to the service.

risks.



- Service users confirm that they feel they would be supported if they have had cause to

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of effective audits.

analysed and acted upon to deliver service improvement.