



Quality · Safety · Innovation

TSA Quality Standards Framework

AUDIT REPORT



10482

Audit Report

Organisation

Community Link Service - Horsham District Council

Main contact name(s)

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Audit date

28 May 2024

Audit type

3-Year Full Audit

Auditor

Anthony Anderson

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Scope of Audit

The TEC Services Association Quality Standards Framework audit will cover - a review of any improvement needs since the last audit (if any), the Common Standards and Service Delivery Modules listed below:

- User and Carer Experience (Version 4.1 - UE)
- User and Service Safety (Version 4.2 - US)
- Effectiveness of Service (Version 3.1 - ES)
- Information Governance (Version 4.1 - IG)
- Partnership Working & Integrated Services (Version 3.0 - PW)
- The Workforce (Version 3.3 - TW)
- Business Continuity (Version 3.2 - BC)
- Ethics (Version 3.1 - ET)
- Performance & Contract Management (Version 3.1 - PM)
- Continuous Improvement & Innovation (Version 3.1 - CI)
- Assessment of and Installation of TEC (Version 5.2 - AI)

The Audit Scheme has been established to provide independent external audit of an organisation against the requirements of the Quality Standards Framework. TEC Quality confines its requirements, evaluation, review, decision and surveillance (if any) to those matters specifically related to the scope of certification unless an extension of scope has been agreed with the organisation concerned.

Methodology

The Audit has been conducted using a document sampling process and in discussion with Senior Management and Staff. TEC Quality are not therefore responsible for any issues present but not identified at the time of the audit. This report provides a summary of the audit findings, highlighting any areas for improvement, or non-compliance, but will also show any areas of particular "Good Practice" that the auditor may find. The tables in the report show the improvement areas, but where modules are omitted, it can be assumed that the organisation has demonstrated, "Compliance" with the criteria audited in that module.

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Introduction

Serving the local community since 1986, Community Link has approximately 1,750 connections of which 1,460 are Digital, which is a significant jump on last year's total of 836 Digital customers.

The 24-hour Call Monitoring element of the service is sub-contracted to Mole Valley Life, who are certified to the Quality Standards Framework (QSF).

As part of Horsham District Councils Environmental Health and Licencing Department, Community Link provide Support, Assessment, and Installation services to disabled and vulnerable people of all age groups within the Horsham District.

Providing a variety of TEC to meet their Service Users needs, the main goal of the service is to ensure all Service Users are at the centre of decisions made about their treatment and care using a person-centred approach. Working in line with Horsham District Councils Corporate Plan, the Council Plan Themes include:

- Supporting People and Communities
- Inspiring greener futures – the Council aim to be net zero by 2030
- Building a thriving local economy
- Always listening, learning and improving

The Community Link service enables residents to live independently, by providing affordable access to a range of assistive technology.

To maintain QSF certification, a full onsite Audit took place over two days within the Councils Head office, in the heart of Horsham.

The Audit discussions focused on the following areas:

- Future development plans for the service
- Details of Incidents /Complaints
- Workforce plans e.g., recruitment, resource planning, training and development, communication, appraisals
- Details of any Safeguarding issues
- Business Continuity Planning
- Measures of Excellence data for the Assessment and Installation of TEC

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- Analogue to Digital Transformation update
- Design Authority and Service Resilience
- Cyber Security

The Auditor was provided with supporting relevant documentation, policies and procedures which were reviewed prior to and post audit. The document review included:

- Analogue to Digital migration evidence
- Business Continuity Plans
- Various Policies & Procedures
- Survey Data
- Training Records & Corporate Insurance Certificates
- Community Link Service & Business Growth Plan
- Full Measures of Excellence Data for Assessment and Installation of TEC
- Case Studies
- Partnership Working evidence

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Summary of Evidence Reviewed/Key Findings

Standards and Service Delivery Modules

User and Carer Experience (Version 4.1 - UE)

Total Number of Criteria in this Module	9
Number of Criteria Compliant	9
Number of Criteria Improvement Observation	0
Number of Criteria Not applicable	0
Number of Criteria Requires improvement	0
Number of Criteria Inadequate	0

User and Service Safety (Version 4.2 - US)

Total Number of Criteria in this Module	15
Number of Criteria Compliant	15
Number of Criteria Improvement Observation	0
Number of Criteria Not applicable	0
Number of Criteria Requires improvement	0
Number of Criteria Inadequate	0

Effectiveness of Service (Version 3.1 - ES)

Total Number of Criteria in this Module	8
Number of Criteria Compliant	8
Number of Criteria Improvement Observation	0
Number of Criteria Not applicable	0
Number of Criteria Requires improvement	0

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Number of Criteria Inadequate	0
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Information Governance (Version 4.1 - IG)

Total Number of Criteria in this Module	18
Number of Criteria Compliant	18
Number of Criteria Improvement Observation	0
Number of Criteria Not applicable	0
Number of Criteria Requires improvement	0
Number of Criteria Inadequate	0

Partnership Working & Integrated Services (Version 3.0 - PW)

Total Number of Criteria in this Module	8
Number of Criteria Compliant	8
Number of Criteria Improvement Observation	0
Number of Criteria Not applicable	0
Number of Criteria Requires improvement	0
Number of Criteria Inadequate	0

The Workforce (Version 3.3 - TW)

Total Number of Criteria in this Module	16
Number of Criteria Compliant	16
Number of Criteria Improvement Observation	0
Number of Criteria Not applicable	0
Number of Criteria Requires improvement	0
Number of Criteria Inadequate	0

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Business Continuity (Version 3.2 - BC)

Total Number of Criteria in this Module	14
Number of Criteria Compliant	14
Number of Criteria Improvement Observation	0
Number of Criteria Not applicable	0
Number of Criteria Requires improvement	0
Number of Criteria Inadequate	0

Ethics (Version 3.1 - ET)

Total Number of Criteria in this Module	11
Number of Criteria Compliant	11
Number of Criteria Improvement Observation	0
Number of Criteria Not applicable	0
Number of Criteria Requires improvement	0
Number of Criteria Inadequate	0

Performance & Contract Management (Version 3.1 - PM)

Total Number of Criteria in this Module	13
Number of Criteria Compliant	13
Number of Criteria Improvement Observation	0
Number of Criteria Not applicable	0
Number of Criteria Requires improvement	0
Number of Criteria Inadequate	0

Continuous Improvement & Innovation (Version 3.1 - CI)

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Total Number of Criteria in this Module	8
Number of Criteria Compliant	8
Number of Criteria Improvement Observation	0
Number of Criteria Not applicable	0
Number of Criteria Requires improvement	0
Number of Criteria Inadequate	0

Assessment of and Installation of TEC (Version 5.2 - AI)

Total Number of Criteria in this Module	43
Number of Criteria Compliant	40
Number of Criteria Improvement Observation	0
Number of Criteria Not applicable	3
Number of Criteria Requires improvement	0
Number of Criteria Inadequate	0

Rating definitions

Rating	Definition
COMPLIANT	An organisation that has demonstrated compliance with all the QSF outcomes and minimum criteria. However there may be some development observations found during the audit, which can be worked upon for the next audit.
REQUIRES IMPROVEMENT	An organisation that does not meet the minimum criteria and requires corrective action before certification can be granted, but which is not considered to be safety related. A three-month window is allowed for this improvement.
INADEQUATE	An organisation where safety concerns have been identified, which need to be corrected prior to certification being granted. A one-month



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	period is allowed for this corrective action.
IMPROVEMENT OBSERVATION	Is an improvement that the auditor has identified, that may improve the service offering, but is not a requirement of the QSF, or is a mandatory improvement area.

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Audit summary

The audit commenced with introductions and a discussion around the methodology and scope of the audit. The audit was completed by Anthony Anderson, TEC Quality's Quality and Improvement Manager and members of the Horsham Community Link Management Team.

There had been no Improvement Needs from the last Annual audit.

Management confirmed that there had been no serious complaints, incidents, or data breaches over the last 12 months.

The Community Link team is led by the Head of Environmental Health and Licensing, along with the Environmental Health Officer, Team Leader, and Quality & Contracts Officer. The Projects & Partnership Officer is responsible for engaging and working with partners amongst other duties, and four further Advisors complete Assessments, Installations, and Maintenance of TEC, amongst various other areas of responsibility.

A presentation was delivered around the service from the Head of Environmental Health and Licensing, which included:

- Who are Community Link.
- Introduction to the Community Link Team.
- Departmental Structure.
- Horsham District Councils Values, Vision and Mission.

A second presentation was delivered by the Team Leader and Quality & Contracts Officer, which focused on the following:

- Service Achievements.
- Business Continuity learnings.
- Measures of Excellence (KPI) data.
- Update on Analogue to Digital migration.
- 'Looking to the Future' plans.

Both presentations gave the Auditor a good understanding of the service offering, along with a current update of the services performance and progress on the Analogue to Digital switch.

The service has recently undergone a restructure of the department, with the implementation of a Team Leader to absorb the day-to-day responsibilities and an additional resource which has been

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approved, with a new Community Link Advisor position being created and filled. The new Team Member is due to commence employment in June 2024.

Referrals are primarily received from family or the client themselves, with the highest referral rate being from the Service User themselves and sits at 34.6% of the total referrals received. With the service working heavily in the Community, referrals are also received from charity Age UK, Occupational Therapists and various Hospitals within the District and beyond.

The Auditor was provided with Measures of Excellence (KPI) data, which captures performance against the requirements of the QSF for the Assessment and Installation of TEC module. Data shows the service is performing well against the requirements, with detailed exceptions to the Measures of Excellence analysed by the Team.

Through discussions with the Management Team, it was evident the service has a Design Authority (DA) in place, which is a mixture of the Management Team, who possess responsible and accountability for the delivery of safe services. Role profiles list out each area of responsibility which includes each area of service delivery. The Auditor was provided with an example where the DA worked together to resolve an issue due to an outage which occurred in 2023.

The service has effective Business Continuity Plans (BCP, Version 2.0 February 2024) in place, which covers all areas of potential disruption to service and details the impact of a disruption, recovery time objectives, service dependencies and business critical activities.

The Auditor was provided with evidence of testing of the BCP, with a heavily detailed Business Continuity test report provided, which demonstrated testing of key areas of service delivery, which included:

- A prolonged severe weather event.
- Network error resulting in a loss of drives and email.
- Missing staff member (Lone Worker incident)
- Electrical disruption.
- Office Fire.

The report detailed how the Team would react to the scenarios presented to them, with the objectives of the tests highlighted along with recommendations to further strengthen resilience and Business Continuity arrangements.

A Business Impact Analysis (BIA) is in place and provides detailed information of potential events within five categories.

- Loss of access to main building
- Reduction in staff or key personnel

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- Loss of water supply, fuel, or electrical power
- Loss of key equipment or specialist equipment
- Loss of IT Systems, Telecommunications, Data and Information

The service has adopted a four-phase approach to the Analogue to Digital switch, which includes:

- Updating Service Users of the Digital switchover and researching digital TEC suppliers.
- Gathering Service User opinion and testing within staff's homes.
- Presenting the Digital options to Service Users and testing within their homes.
- Implementation of Digital TEC, being risk-averse whilst continually reviewing the quality and effectiveness of service delivery.

Of the 1,750 connections within the community, to date there are 1,460 Digital alarms installed within Service Users homes. The service is on track to complete the migration to Digital by the end of 2024. The service has a Data Sharing Agreement in place with BT to ensure all Service Users are safely migrated to Digital, or alternatives are found in areas where there may be signal issues.

Surveys are completed with their Service Users via an Annual Quality Survey, to establish the effectiveness of the service, how well they are performing and if there are any improvements that could be made. The service compare analysis over the course of the past 5 years, with the 2023/2024 results showing the following:

- 89% of Service Users have tested their pendant.
- 35% have used their pendant in an emergency.
- 100% rating of 'Excellent or Good' for the quality of response from the Monitoring Centre.
- 100% for the quality of the Community Link Team.
- 100% stated the service gives them peace of mind.
- 96% have a linked Smoke Detector.
- 100% new Service Users overall satisfaction score.

Other questions capture information around Key Safes, regular testing of the alarms and whether personal information is kept up to date.

The service is actively tracking survey data with internal KPI's to measure whether targets are achieved or not, with actions in place for negative data and analysis over positive data.

User Forum Groups take place in person and are an opportunity for Service Users to discuss directly

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with the Team any feedback they may have on the service, and to share their own experiences with the group. The Groups also offer the opportunity for Service Users to meet with other Service Users and meet the Team. The service see this as a way of engaging with its Service Users, along with effective continuous improvement.

Mole Valley Life, who are certified to the QSF, complete Call Monitoring of alarms for the service, and the Auditor was shown evidence of performance reports along with call exception reports, which are sent monthly to the Community Link Team.

There are effective Policies and Procedures (P&P's) in place which cover all aspects of service delivery and are accessible to all staff. A 'Policies and Procedures Record of Reviews and Actions' document details the policies, with accurate version controlling processes in place to ensure all P&P's are up to date.

The Auditor was provided with a full demonstration of the services 'Ulysses' system, which is a database used to control and complete all the services workload. The system is bespoke for the Community Link Team, and the service worked with developers to create a fit for purpose system.

Training takes place through the Horsham District Councils Learning and Behaviours portal, which is maintained by the HR Department. All Team Members must complete mandatory training, and this is monitored by Management. Refresher training includes:

- Security Awareness
- Safeguarding
- Public Sector Data Ethics
- Data Protection Essentials
- Health & Safety
- Disability & Discrimination
- Display Screen Equipment (DSE)

The Auditor was provided with an example checklist of a new starter's induction into the Community Link Service, which featured all areas of service delivery and is completed over the course of four weeks. Training includes:

- Introduction to TSA
- Health & Safety
- Remote Working
- Lone Worker

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- Office Tour
- Meet the Team
- Database/systems training
- Mandatory training

Through working with Admiral Nurses, who specialise in Dementia care, the service has invested in Animal therapy, via RoboPets, which is a specialist in robotic interactive companion pets and is widely recognised to bring an element of calm and comfort to people with conditions such as Dementia and Alzheimer's. RoboPets are seen as an alternative to introducing live animals into the Service Users home, particularly in homes where pets are not allowed.

The Auditor was able to witness an installation and attended a site visit with the Projects & Partnerships Officer, where a Digital alarm was installed for a new Service User. It was evident throughout the process of the installation that the Officer was well trained and competent to carry out their role and install the equipment safely and with quality.

The installation process was explained fully to the Service User, and it was evident the Officer possessed a high level of knowledge in relation to the product and its functions, which were demonstrated to the Service User, with all questions and concerns raised by the Service User answered confidently.

Range testing was completed thoroughly throughout the property, both inside and outside, and the pendant and Firehawk Smoke Detector were successfully linked to the alarm unit. The Service User was encouraged to press the pendant and communicate with the Monitoring Centre, who was welcomed to the service by the Monitoring Advisor.

Detailed documentation was left with the Service User, which included information on payments, support organisations and the equipment being installed. The Service User was encouraged to complete monthly testing of the alarm and was re-assured that false alarm activations are fine, as the Service User was concerned over accidentally activating the alarm.

The Auditor commends the Customer Service skills of the Officer which were demonstrated during the installation. They made the Service User feel relaxed, comfortable and at ease with the equipment. The Service User commented on the service and advised "*you are the best*".

The Auditor was able to have a discussion with a Community Link Advisor, and it was clear from the discussion and scenarios presented to the staff member that they ensure their Service Users are well cared for, treated with dignity and respect. The conversation confirmed there is an 'open door' policy within the service, where staff are supported and encouraged by Management, with regular 1:1's occurring. Lone Worker procedures are in place for staff via 'Footprint' devices, and all staff carry these when working in the community.

The Auditor observed during the witnessed installation the Officer carrying their Footprint device.

A discussion around the training and support provided demonstrated a culture of continuous learning,

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support and development exists within the service.

Partnership working is exceptionally strong, with the Projects & Partnerships Officer delivering a presentation to the Auditor on Community Links partnership work. The service is linking in with Hospitals across the district and have secured funding to purchase Ownfones, which provide easy access to the Monitoring Centre at the press of a button. This bridges the gap between the Service User leaving hospital and the installation of equipment in their home. Community Groups are effective in obtaining referrals, with the service linking in with Neighbourhood Wardens, GP Surgeries, Churches, The National Trust and Age UK, amongst others.

The service ensures Occupational Therapists (OT's) are aware of the services provided by the Community Link Team, with regular presentations and training delivered across six hospitals who are in partnership with the service. There are effective working relationships with Saxon Weald, who are the main Housing provider within Horsham, and Libraries, where the service make available to people who may visit the library what Community Link can offer, through leaflets and documents detailing the service offering. This broadens the options of where referrals may be obtained.

Libraries are also offering a drop off service, for family/friends of Service Users who have passed away, where they can drop the equipment into the library, where it will then be collected by a Community Link Advisor.

Age UK continues to be one of the services strongest partners, with an effective two-way relationship in place to signpost Service Users into each other's services. The two teams meet virtually once a month, with 40 other professionals, as part of Horsham District Councils Professionals Networking Meeting. These meetings are an opportunity for the group to discuss the services on offer, along with better signposting for Service Users.

The service partner with West Sussex Fire & Rescue Service (WSFR), with WSFR providing 'Safe and Well' visits to Service Users, along with completing the installation of Firehawk linked smoke detectors. Detectors are pre-programmed by Community Link Advisors and left within the property in a suitable location, until a Safe and Well visit is performed.

The Auditor had a conversation with the Team Lead Programme Support from WSFR to discuss the Safe and Well process and partnership working. Safe and Well visits are completed on all Service Users and consists of a pre-arranged visit from the Fire Service, with WSFR contacting the Service User directly, to offer advice on how to make their home safer through a detailed inspection within the home and the identifying of any fire risks, along with the installation of the pre-programmed Firehawk and any other Fire Detection Equipment deemed necessary by WSFR.

The Safe and Well visit is categorised into three sections, which includes identifying fire risks, overall health of the Service User and overall wellbeing which includes a holistic assessment which does not just focus on the fire aspect, but other areas of home safety.

Conversations with the Team Lead Programme Support confirmed a good working relationship exists, with a working partnership which has been established over the course of 20 years. WSFR work closely with the Community Link Team to understand where vulnerable people are in the community, and how the service can help. The Community Link team will refer all Service Users into the Fire Service to perform the Safe and Well visit, with TEC referrals always being categorised as 'High' or

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'Very High' based on triaging of the Service User, with 'High' referrals being handled within 7 days and 'Very High' referrals within 24 hours.

Looking to the future, the service will be focussing on the following areas:

- Continue to build on new Partnership relations and a review of existing Partnerships.
- Linking with Urgent Community Response Teams.
- Work with Hospitals, Occupational Therapists, Falls Teams, Social Prescribers and Care Coordinators.
- Continue the current effective Partnership working.

Community Link have demonstrated they are a service determined to provide excellent customer service to their Service Users. Through strong partnership working, sound policies and procedures which are built on a bedrock of quality, and a strong Leadership Team driving the service forward, the Community Link Team have demonstrated that they have the governance framework in place to ensure the service is safe, ethical and is delivered with real quality.

- **For Criterion [IG18](#), The Service have demonstrated that they are Compliant.**
- Public Services Network (PSN) compliance

The Auditor recommends that Community Link Service - Horsham District Council is granted certification to the Quality Standards Framework. For surveillance audits, certification can continue.



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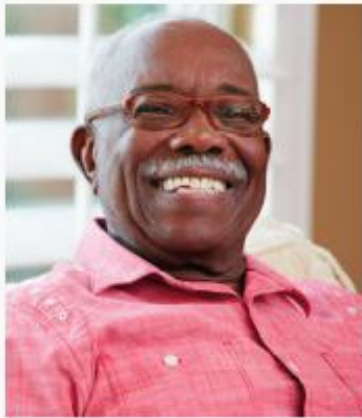
Auditor signature

A handwritten signature in black ink, appearing to be 'A. A.', written over a white background.

Auditor on behalf of



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Telecare



Wellness
Devices



E-health



Self-care
Apps



Telemedicine



Telecoaching



Telecare Call
Monitoring



Telehealth



Telecare Response
Services

TEC Quality is the organisation set up to develop and run the Quality Standards Framework (QSF) - a set of outcome based standards developed in partnership with key stakeholders across the TEC sector. TEC Quality audits and certifies organisations against these standards.

Whilst QSF is the intellectual property of the TSA, TEC Quality has full autonomy and sector-wide support to administer the QSF standards. TEC Quality has a team of independent auditors, who have all been trained to ISO 19011 standards.



www.tecquality.org.uk

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