



Quality · Safety · Innovation

TSA Quality Standards Framework

AUDIT REPORT



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Community Link (Horsham District Council) Audit Report

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Audit Report

Organisation

Community Link

Address

Horsham District Council Parkside Chart Way Horsham West Sussex RH12 1RL

Audit Dates

8th & 9th June 2021

Auditor

Judith Allen

Scope of Audit

The Audit will cover TEC Services Association Quality Standards Framework including:

- 10 Common Standard Modules
- Service Delivery Modules
 - Assessment & Installation of TEC

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.





Introduction

As part of Horsham District Councils, Environmental Health and Licencing Department, Community Link provide a support, assessment and installation service to disabled and vulnerable people of all age groups within Horsham. They have been serving the local community since 1986 and have over 1,700 customers.

The 24-hour Call Monitoring element of the Service is subcontracted to Mole Valley who are a QSF Certified Monitoring Centre.

The Service works in line with Horsham District Councils Corporate Plan, whose vision and values are:

- To be recognised as a Council that provides high quality, easily accessible and value for money services.
- One team working together to provide services that make Horsham District a great place to live, work and visit.

Community Link's main objective is, to assist customers to live independently in their local community, by providing affordable access to a range of assistive technology. The service ensures customers are at the centre of decisions about their own treatment and care.

Following the resignation of the Service Manager in 2020, a review of the service was undertaken and in line with the Councils strategy to enhance organisational effectiveness and promote continuous performance improvement, a new structure was introduced in May 2020.

The position of the previous manager was absorbed by natural succession from within the Community Link team, with new role profiles created and with the new management team reporting to the Principal Environmental Health Officer. The Community Link structure now consists of:

- Quality & Contracts Officer
- Operational & Co-ordination Officer
- Projects and Partnership Officer
- 2 Community Link Advisors

This is the 2nd full QSF audit for Community Link and was conducted completely remotely via Microsoft TEAMS due to the Covid-19 pandemic. Over the 2 days of the audit, the Auditor spoke to the Management Team, Head of Service, Emergency Planning Officer, Customer and Staff.

In advance of the audit a range of documents were uploaded to the TEC Quality portal and reviewed by the Auditor and with further documentary evidence provided during the audit. This included:

- Policies and Procedures
- Service Induction and Training Records
- Survey Results
- Corporate Contracts
- Gap Analysis
- Etc.



Audit Report

TSA Quality Standards Framework Modules Audited

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 period is allowed for this corrective action.

Standards Modules		
MODULE	RATING	IMPROVEMENT NEED
User & Carer Experience	COMPLIANT	No
User and Service Safety	COMPLIANT	No
Effectiveness of Service	COMPLIANT	No
Information Governance	COMPLIANT	No
Partnership Working and Integrated Services	COMPLIANT	No
The Workforce	COMPLIANT	No
Business Continuity	COMPLIANT	No
Ethics	COMPLIANT	No
Performance and Contract Management	COMPLIANT	No
Continuous Improvement and Innovation	COMPLIANT	No

Service Delivery Modules				
MODULE	RATING	IMPROVEMENT NEED		
Assessment & Installation of TEC	COMPLIANT	No		



Audit Report

Audit Summary

User & Carer Experience COMPLIANT

From the evidence reviewed prior to and during the audit by the Auditor, the Service appears compliant with all criteria for this module.

User and Service Safety COMPLIANT

From the evidence reviewed prior to and during the audit by the Auditor, the Service appears compliant with all criteria for this module.

Effectiveness of Service COMPLIANT

From the evidence reviewed prior to and during the audit by the Auditor, the Service appears compliant with all criteria for this module.

Information Governance COMPLIANT

From the evidence reviewed prior to and during the audit by the Auditor, the Service appears compliant with all criteria for this module.

Partnership Working & Integrated Services COMPLIANT

From the evidence reviewed prior to and during the audit by the Auditor, the Service appears compliant with all criteria for this module.

The Workforce COMPLIANT

From the evidence reviewed prior to and during the audit by the Auditor, the Service appears compliant with all criteria for this module.

Business Continuity COMPLIANT

From the evidence reviewed prior to and during the audit by the Auditor, the Service appears compliant with all criteria for this module.



Audit Report

Ethics COMPLIANT

From the evidence reviewed prior to and during the audit by the Auditor, the Service appears compliant with all criteria for this module

Performance & Contract Management COMPLIANT

From the evidence reviewed prior to and during the audit by the Auditor, the Service appears compliant with all criteria for this module

Continuous Improvement & Innovation COMPLIANT

From the evidence reviewed prior to and during the audit by the Auditor, the Service appears compliant with all criteria for this module.

Service Delivery Modules

Assessment and Installation of TEC COMPLIANT

From the evidence reviewed prior to and during the audit by the Auditor, the Service appears compliant with all criteria for this module.

Audit Summary

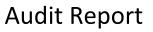
With the evidence provided and through discussions with the team, it is evident Community Link are committed to ensuring that the customer experience is at the centre of what they do, from initial referral, through to the disconnection and closure of the account and that the focus is on a positive outcome for the customer and those involved in their care.

There is a commitment to make sure customers are involved and consulted on all aspects of the service provision and which was substantiated through discussions with the team and evidence of the 'Client Service Consultation Strategy'

Consultation and involvement take place in a number of ways, including talks to older persons groups, newsletters, satisfaction surveys, user groups and visits to the service offices (pre Covid).

All new customers are provided with a very comprehensive Customer Guide, which provides a wealth of information and are encouraged to be involved in every aspect of their care including:

- Choosing their triage date upon enquiry
- Communicating their needs and concerns to the Community Link Advisor during triage.
- Discussing TEC options and what would provide the best possible outcome.
- Referrals and partner agency advice
- Installation date





- Payment plans
- Freedom that they cancel service at any time.
- Re-assessment plans
- Surveys to improve service delivery
- New TEC options
- Analogue to Digital Planning
- TEC trials
- VR trials.

There was a substantial amount of information supplied to the Auditor, evidencing the commitment to effectiveness of care and specific cases where user feedback had directly influenced the design and delivery of the service including, case studies, complaints and compliments logs, results of the annual user survey and SCAM letter warnings.

The service was delighted with the results of the 2020-2021 survey, as it provided some very meaningful information which has been used to make improvements and in particular of those surveys returned, 100% had a linked smoke detector installed by their partner West Sussex Fire and Rescue Service (WSFRS) following referral from Community Link.

The Auditor spoke to a customer who stated she was completely happy with the service she received from Community Link and that 'they go above and beyond and are always willing to help with anything'.

There appears to be strong leadership within the Management Team, who have a proactive approach to quality assurance. The Community Link Quality and Improvement Framework sets out the services vison of quality, which is strongly linked to the stakeholder engagement cycle. It is considered stakeholders have a critical role in driving quality and the services quality framework reflects recommendations from reports, KPI's, surveys, partner meetings and user groups.

The service has 'aligned their vision of quality within Telecare, alongside other agencies, including the NHS and social sector and which enables the system to maintain a shared view of quality'. The three main elements of quality which are Safety, Effectiveness and Experience are now at the core of the teams' decision making and service delivery'.

The governance infrastructure for documentation, information and operational practices is comprehensive. All policy, process documentation and procedures are well structured and managed. Operational specific processes are regularly reviewed, to ensure information is updated with any significant changes to legislation, or technology.

The Auditor was provided with evidence of organisational induction training, including Health & Safety, Risk Safeguarding and GDPR. There appears to be a culture of learning, with staff encouraged to develop new skills and with all staff receiving additional role specific training and TSA Fire Safety Training. Evidence provided during the audit demonstrates all training is up to date.

Evidence was provided of 1-2-1 meetings which are conducted monthly and Personal Development Plans are reviewed quarterly. All objectives are recorded on the corporate T1 Appraisal system, produced by the Councils HR department.





Community Link is keen to ensure they keep up to date with new and upcoming technology, to provide the best outcomes for clients and strive for continual improvement.

Due to the impending analogue to digital switch, the service has undertaken a review of their current equipment and consider this does not meet expected digital standards. Evidence was provided of their digital strategy to investigate the best digital options. Research has been carried out by interviewing suppliers, review and testing equipment and carrying out a full analysis of their findings.

Following interviews and an in-depth analysis, the service has chosen "Chiptech." as their preferred supplier, as it is considered their equipment is innovative, extremely easy to operate, for both customers and staff and importantly they have a similar ethos as Community Link.

Data Protection was highlighted by both staff and mangers to be of paramount importance, with all staff having undertaken e-learning training, to underpin knowledge of specific procedures and policies relating to their role. There was evidence that all staff had a good understanding of their role concerning data protection and have completed the regular mandatory training.

There have been no data breaches in the past 12 months.

The Auditor was given a demonstration of the newly developed 'Ulysses Care System', which is a cloud-based system developed in-house by the service in collaboration with Ulysses. The system provides a suite of management tools to manage referrals, create care plans and create staff rosters etc.

The system went live in May 2020, but prior to its use by staff out in the field and to ensure the integrity and security of the system, an internal Application Control Audit and penetration testing was undertaken, with no adverse findings.

The introduction of the system will allow staff to work agile and with information uploaded directly to the monitoring platform in real time. This will also eliminate the use of paper-based systems and increase data security.

Under the umbrella of the Council, the service is registered with the Information Commissioners Office (ICO). Evidence was provided, detailing the different methods in which Customers are made aware of how their information will be used and how to access their information.

Fostering partnerships is seen as an integral part of the service and they have established effective partnerships with a range of stakeholders including Neighbourhood Wardens, Police, West Sussex Fire Service, Trading Standards etc. The service recognises the value of maintaining good communication with partners and has developed a role of Projects and Partnership Officer, whose role is to promote TEC in the wider health arena and attends many forums including the Health and Wellbeing Partnership.

A discussion between the Auditor and the Safety Officer from West Sussex Fire Service, emphasised the importance of the close working relationship they have developed with Community Link and how onward referrals are made for the installation of fire equipment and home fire safety checks.



Audit Report

The Marketing Plan for 2019-2021 was provided as evidence, which demonstrates the services objectives and how they aim to achieve these. All marketing activity must adhere to the following principles of:

- Honesty Reflect true representation of service delivery and TEC equipment.
- Fair -That all new customers are treated equally in relation to the Equality & Diversity Policy and that prices of equipment do not exceed industry standards
- Respectful -All New customers should be entitled to make their own decisions in relation to TEC. No Marketing should be derogatory E.g. "Old People."
- Transparent -Community Link will ensure transparency with all marketing formats and ensure all information is presented upfront e.g. "No hidden small print."

There are comprehensive Business Continuity Plans and risk assessments covering all service areas, with the plans updated to ensure the safety of staff and stakeholders during the Covid-19 pandemic.

The Auditor discussed the plans with the Councils Emergency Planning Officer and although working through the Pandemic has been a challenge, their plans have enabled the team to effectively deliver services to support their clients.

Evidence of Business Continuity Desk Top Testing and Business Impact Analysis were made available to the Auditor.

Following discussions with the Management Team and review of documentation, the Auditor is satisfied that the Service has developed appropriate plans in response to the Corona Virus Pandemic

There are rigorous performance monitoring systems in place for all aspects of the assessment and installation process, with information provided on exception reports, detailing reasons and actions taken should any part of the process not meet the required standard. This information is used to effectively track performance, identify reasons for any shortfall and make any adjustments to service delivery.

Evidence provided demonstrates that all KPI's have been achieved and have exceed the required performance requirements during the past 12 months.

The Auditor was unable to attend an installation but discussed the process with members of the team. They were able to demonstrate they had a person-centred approach and had a good knowledge of different kinds of equipment and of processes, including risk assessment, the installation process, safeguarding and data protection.

Staff were able to demonstrate how they would refer customers to alternative services with their consent and in particular with referrals to the fire service for home safety checks and installation of linked smoked detectors.

The service demonstrated a clear strategic and operational structured approach to the audit, with well thought through evidence preparation, which clearly aligns to the Quality Standards Framework. This gave the Auditor a clear appreciation of the importance placed on the delivery of a quality and safe service, Community Links future vision, commitment and enthusiasm to bring continuous improvement to their offering.



Audit Report

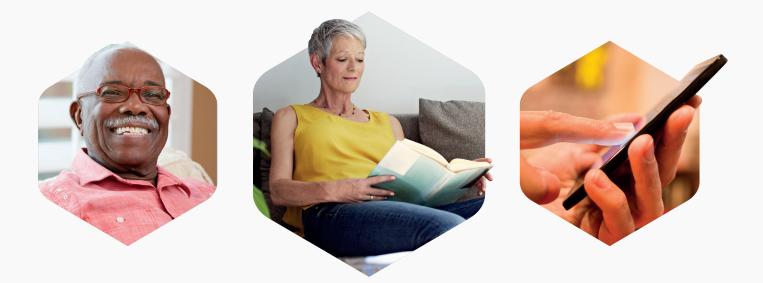
The Auditor considers that Community Link has met all the elements of the QSF and has provided sufficient evidence to demonstrate they are providing a quality and safe service to its users and is therefore recommended for certification to the QSF.

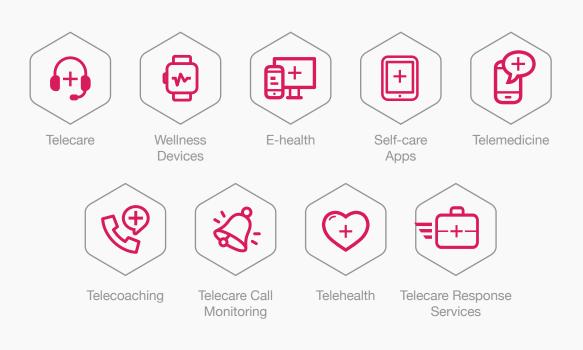
Auditor Signature

J. A. Allen

JUDITH ALLEN Auditor on behalf of







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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