



## Self-evaluation tool

Name of service:

Name of manager:

Date of self-evaluation:

### Quality indicator 1.1 People experience compassion, dignity and respect.

#### How are we doing?

People experience compassion

Unsatisfactory	Weak	Adequate	Good	Very Good	Excellent
			X		

People experience dignity and respect for their rights as an individual

Unsatisfactory	Weak	Adequate	Good	Very Good	Excellent
			X		

People have help to uphold their rights as a citizen free from discrimination.

Unsatisfactory	Weak	Adequate	Good	Very Good	Excellent
			X		

#### How do we know?

##### *What did we do?*

**We asked for staffs views** – 30 questionnaires and a discussion at a team meeting (eight staff present)

**We asked eight relatives/carers** views using a questionnaire

**We asked four stakeholders** to complete a short questionnaire

**We audited 10 risk assessments** in personal plans to make sure that restrictions were proportionate, reviewed regularly and updated.

**We observed staff practice and interactions** both through observation of practice shadowing or working alongside staff and by listening to interactions over the phone

or via virtual technology (consent was sought from individuals being supported). We did this on eight occasions over a four-week period.

**We asked people who using the service** what their views were – 20 questionnaires, 2 focus groups and 10 focussed one to one conversations.

### ***What did we find?***

We found that **four out of 10 risk assessments didn't include the signature** of the person or their representative (when they lacked capacity to consent) to any restrictions in place. Two of these risk assessments had not been updated in over a year and required a review.

*Our observations showed us that:*

**Relationships between staff and people using the service are warm and genuine.** Staff knew people very well, including their individual histories and what was important to them. This is also recorded in people's personal plans in the 'what is important to me' section.

In the focus group, people told us that what they especially appreciated was that **staff took extra time to help people feel at ease and helped them feel valued.** People commented that staff **were always respectful and kind.**

Whilst all people using the service reported feeling involved in their support, five staff and three family members said that **people and their families (where appropriate) were not sufficiently involved in decisions** about people's support, especially where there were changes to the staff team or timings of support.

*We observed that:*

**Staff used their knowledge** of people and their personal preferences to adapt the way they provided support to suit each individual. We observed staff trying to support people sensitively, encouraging participation and independence.

**18/20 people said their support was 'very good' or 'excellent'.** For people who were reluctant to give feedback or had difficulty expressing their views, we used simplified language and creative, interactive games to help them feel comfortable and confident in expressing their views.

**4/8 relatives said that their relatives' support was 'very good or excellent'**

**15 Staff told us they valued the people who they supported** and were encouraged to develop strong bonds and relationships with people.

**Four family members and 11 people using the service rated us 'adequate'** for question five about communication.

**Four visiting professionals said that the support provided was compassionate and person centred** and staff were always available.

**What are we going to do now?**

We will repeat this in three months and continue to ask staff to look to good practice to help guide what they do.

We will be better at communicating and involving people in decision-making. We will send out a monthly update to those using the service and their representatives so that people are more informed about what is happening in the service. We will use this update to tell them about their rights to be involved in decision-making and tell them who they should communicate any concerns to.

Where people and relatives don't feel sufficiently involved in decision-making, key workers will talk to them and ask them how we can do better. Then we will take action to make sure people feel listened to.

We aim to achieve only grades of 'good' or above when we ask people about how we communicate with them.

We'll review our risk assessment process to make sure that the appropriate people are involved where there are issues of capacity, and that these are reviewed on a timely basis.



### Next steps: developing your improvement plan

The manager retains overall responsibility for completing and reviewing the improvement plan. This should be in a format you can share. Aim to review this plan regularly and make the information accessible so you can share it with the people who experience your care, their families, staff and others involved with your service. It is essential that they are part of the review process and that they feel some ownership of the plan.

<b>Outcome</b> What do we want to achieve?	<b>Actions</b> How are we going to do it?	<b>Timeframe</b> When do we want this to be completed or next reviewed?	<b>Person responsible</b> Who is doing each action or responsible for ensuring it gets completed?	<b>Where are we now?</b> What have we achieved, and what has prevented us from doing what we wanted?
Improve communication with people we support and their representatives.  Better involve people in decision-making.  Achieve evaluations of 'good' or better for question 5.	Send a monthly update to people we support and their representatives.  Update the procedure to ensure all changes to staff teams and timings of visits are communicated.  Encourage staff and people using the service to provide updates to share with families.	Review in 12 weeks – repeat the questionnaires.	Manager to collate content. Admin to send out via email.  Consider options for contacting those without email access.  Senior coordinator to ensure procedure is updated and staff made aware.  Key workers to ensure people using the service and their families are informed of the update.	

	Talk to people, staff and families to see how we can do better			
Update our risk assessments with appropriate involvement from people and their representatives.	Review our risk assessment process and build in a timely review process that involves the right people	Review on a three-monthly basis	Manager and staff	

