

QA01: Quality Standards Policy

1.0 Scope

- 1.1 This policy applies to all employees, volunteers and students at After Adoption.
- 1.2 This policy underpins all work commissioned from/or undertaken by After Adoption.
- 1.3 This policy is aligned with and supports the Agency's values as set out in the Strategic plan and the Quality Charter (QA02)

2.0 Quality Overview

- 2.1 After Adoption is registered as a Voluntary Adoption Agency under Care Standards Act 2000 and is regularly inspected by Ofsted.
- 2.2 All After Adoption services conform to the National Minimum Standards for Adoption Services 2014 (NMS)
- 2.3 Since 1998 After Adoption has been formally recognised as an Investor in People organisation and achieved the Gold award in 2014.
- 2.4 After Adoption is committed to the further development of quality and excellence and has demonstrated its commitment to the pursuit of quality and organisational excellence through the North of England Excellence (NoEE). After Adoption achieved recognition to excellence in 2013.

3.0 Policy

- 3.1 After Adoption is committed to implementing appropriate quality management systems and processes to enable the delivery of a high quality service.
- 3.2 The quality standards provide a framework for continual improvement in order to increase and enhance service user, stakeholder and staff satisfaction. It will effectively provide the Agency and its users with the confidence that the provision of service will be delivered to consistently high standards. (See page 6 for framework)
- 3.3 After Adoption is committed to:
 - Improving the outcomes for children who are in the care system
 - Improving the lives of those who live with the difference adoption brings to their lives
 - Involving service users, staff, volunteers and other stakeholders in the review and development of its services
 - The development of skills and learning
 - Raising the organisation's profile.
 - Innovative practice
 - Learning and dissemination
 - Ensuring value for money whilst delivering quality services.

4.0 Implementation

- 4.1 Every employee, volunteer and student will:
 - take part in training and professional development in order to continuously improve standards
 - follow regulations as set out in appropriate legislation
 - follow After Adoption policies and procedures relating to their work
- 4.2 Senior managers will:
 - Reflect the ambition of the organisation to provide excellence in all its work
 - Identify strategic priorities for the agency in response to internal and external demands and initiatives.
 - Support the quality cycle in their areas
 - Ensure all improvement plans are properly monitored
 - Encourage and develop third party assessment of activities and performance
 - Monitor compliance with quality issues

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- Oversee the standard of staff performance in their area, ensuring appropriate staff development and induction
- Respond promptly to feedback regarding their provision, providing reinforcement regarding positive feedback and initiating and monitoring responses to negative feedback
- Oversee the review of policies and procedures applicable to their service/area
- Ensure that all managers and staff comply with policy and procedure

5.0 Quality Cycle

5.1 After Adoption reviews and monitors its performance by:

- The annual review of performance against strategic corporate objectives by the Trustee Board
- Twice yearly reporting through the Chief Executive to the Trustee Board of business performance against KPIs
- Quarterly review and monitoring, by the Senior Management Group, of performance against key indicators listed in the annual Corporate Action Plan
- Monthly monitoring of operational activity by the senior and operational teams which includes executive scrutiny and budget monitoring
- Quality and excellence monthly monitoring
- Accreditation through recognised benchmarks of compliance, inspection and quality
- Producing annual business performance reports
- Continually reviewing and endeavouring to improve processes and levels of service
- Collaborative working and learning from one another

6.0 Procedures

<p><u>Governance</u> The Board meets five times a year (including a development day).</p> <p>Finance Sub-Group</p> <p>Staffing Sub-Group</p>	<p>Full Trustee Board meeting is to review the organisation's performance report (presented by the Chief Executive) that looks at all aspects of the business.</p> <p>Financial monitoring and analysis including capital projects, income generation and financial procedures. Reports feed into the full Trustee Board.</p> <p>People Management monitoring and analysis, recruitment and retention, safeguarding and complaints, Reports into the full Trustee Board.</p>
<p><u>Strategic Management</u> Senior Management Group (SMG)</p>	<p>Responsibility delegated by the Board to the CE.</p> <p>Monthly strategic planning and review meetings – development of Corporate Action Plan and Strategic Plan.</p> <p>Monthly business meetings – monitors performance against the Corporate Action Plan – reports from Deputy Chief Executive, Head of Adoption Services, Finance, Fundraising, Business Development & Communications, HR and Quality.</p>
<p><u>Operational Management</u></p>	<p>Report on operational performance to SMG.</p> <p>Head of Adoption Services report to and are line managed by the Deputy Chief Executive.</p> <p>Service Managers provide contract and project management</p>

<p>Operational Management Group (OMG)</p> <p>Regional Teams</p>	<p>including conformity to contracts and legislation.</p> <p>Information is cascaded from SMG to OMG then to regional team meetings.</p> <p>Every two months, monitoring performance against the Corporate Action Plan. Attended by a representative of the Senior Management Group and key operational managers. Discuss key themes regarding operational matters and make proposals to SMG.</p> <p>Service managers manage the performance of staff teams, including supervision, performance management and the monitoring of individual work plans.</p>
<p><u>Monitoring & Outcome Evaluation</u></p>	<p>Reports are provided to all service commissioners detailing service take up and performance including:</p> <ul style="list-style-type: none"> • User group • Service requested • Ethnic origin • Gender • Events/groups facilitated • Support given (both descriptive & quantitative measure) • Outcomes • Safeguarding • Complaints • Baseline/Outcomes • User Feedback • Training, including Continual Professional Development • Data Protection breaches and potential breaches <p>Additional information can be provided on request.</p>
<p><u>User Feedback</u></p>	<p>Feedback is sought from users in various ways including:</p> <ul style="list-style-type: none"> • The completion of baseline/outcome forms, prior to and at the end of an intervention • During group sessions • Family days/events • On the After Adoption website. • Service Users being given the opportunity to ‘tell their story’ • Youth Advisory Group with the specific aim of involving Young People from the outset in determining how we offer and develop our services and to find out what are the specific issues they feel we should address • Consultations <p>Information about how to make comments, compliments and complaints is given to all service users.</p>
<p><u>Financial Management</u></p>	<p>Monthly management accounts reviewed by SMG with updates regarding:</p> <ul style="list-style-type: none"> • Cash Flow • Budgets • Risk Management • Debtors • Property • Health & Safety
<p><u>People Management</u></p>	<p>Report on People Management Performance to SMG:</p> <ul style="list-style-type: none"> • Recruitment, turnover retention & induction

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	<ul style="list-style-type: none"> • Training/events • Disciplinary/Grievances • Complaints • Reward & Recognition • Volunteers • Sickness • Students • Performance Development Reviews
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7.0 Assurance

7.1 After Adoption will continue to ensure quality standards are maintained across all of its services provided. This is achieved through the following:

- Service Delivery
- Key Performance Indicators
- Learning, teaching and assessment
- Service User feedback
- Professional accreditation
- Staff & volunteer feedback
- Student placement, review and feedback
- Analysis of quantitative data
- Internal reviews
- Stakeholder reviews
- Complaints and compliments
- Quality management

7.2 Complaints

7.2.1 Complaints are seen as opportunities for improvement and the process of how complaints can be made is available to all staff, service users and stakeholders. Progress on complaints and trends are regularly monitored and monthly reports are produced for the Senior Management Group and the Board of Trustees.

8.0 Quality Cycle

Within the operation of the Quality Standards, the Agency will ensure that:

1. Quality audits are carried out internally. All management systems and processes will be audited according to a planned schedule. All audit reports will identify areas of non-compliance and specify the corrective action needed. Forms for use when case file auditing can be found within the Recording Policy (AA04) There are 3 levels of audit responsibility:
 - **Level 1 – ASW/ASSW** – use of a self audit tool which allows workers to ensure their recording meet the required standards for a manager’s audit. This tool is used at quarterly intervals throughout the period of work with the service user.
 - **Level 2 – Service/Team Manager** – each manager of staff supervision files will include form AA04 R1A showing case files audited by their line manager. Managers are also responsible to auditing and for routine overview of casework.
 - **Level 3 – Senior Management** – will audit a minimum of 6 randomly selected files per region every 6 months and complete form R2 which is submitted to the Quality Standards Manager for central record. Lead/Senior Managers also undertake spot file audit at their discretion.
2. Quality records are to be maintained throughout as a basis for providing quality assurance to all its service users, and stakeholders. This relates to minutes of

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meetings (eg Team Meetings), service user files and information held on the database.

3. Personnel, supervision and HR files are audited on a rolling programme using form QA01a.

9.0 References

Recording Policy – AA04
Complaints Policy – AA05
Office Audit Template – QA01c
Quality Charter – QA02
User Feedback Policy – SMU01

Quality Framework

