

# Driving and evidencing improvements



## Securing support for long-term improvements



**Jan Fryer is Operational Director at Vivo Care Choices, a provider of services across Cheshire West and Chester. Here Jan tell us how Vivo's commitment to long-term improvements have been achieved and put the service in a strong position when the pandemic hit.**

### What prompted our improvement journey

Back in 2017, we had some services rated good and some rated required improvement, we also had one service in special measures.

We developed an improvement plan for each service and during 2018/19/20 and achieved an overall good rating for every service which included supported living, shared lives, respite and a residential care home.

We started thinking about the journey towards achieving outstanding across our services, and our desire to become a provider of choice for people and an employer of choice.

### How we began our journey

The first part of this process was to evaluate our various services. We began by reviewing our management and leadership team to ensure we had experienced people with the skills and competencies we required for each service area.

We started to build a new management team by retaining some highly skilled managers, provided opportunities for existing staff to be promoted into management roles and recruited some external registered managers with experience of improving services and supporting people with autism, and people living with dementia.

### Achieving good was just the beginning

Over an initial 18-month period we saw a lot of improvements and achieved our original goals, but we also wanted to continue to strengthen our service delivery. This required us to convince our Board on further investment and support including a full restructure with us putting in some extra levels of senior support staff and deputy managers.

We achieved Board support by providing them with evidence of what was not working effectively. For example, our earlier training approach was not sustainable, we needed to find a new way to train and refresh staff knowledge and skills. We purchased an i-learn electronic system and developed a program which was a mixture of the i-learn and face to face training courses covering both mandatory and specialist.

With Board approval, we were able to take forward an Operational Improvement Plan for implementation across our multiple different sites. Our Board members also took an active role leading on the different areas of CQC's inspection focus.

### **Reviewing best practice**

One of our first actions to commence the work was to meet with Skills for Care to help shape our improvement plan.

We also purchased the Skills for Care's Good and outstanding care guide and Guide to improvement. We used the checklists from the guides but adapted these further to suit our different service areas and to shape our own quality assurance approach. The guides helped us to sense check what we were doing and ensured we were following the right pathway.

### **Driving forward improvements**

Our focus on Continuous Improvement has enabled us to implement a number of changes including a culture programme, organisational restructure, and reviews of our training, risk assessments and care plans processes. Within 6-months, we were able to develop a quality assurance programme, an updated audit tool and appointed a new quality assurance officer to lead this work.

The Quality Officer role was established to work between our managers, leadership team and board to help us have an overview of the improvement plan and keep track of our progress. One of the first jobs of our Quality Officer was to set up a CQC platform on our intranet providing easy access for our managers and leaders to all our policies and procedures, improvement plans and training records.

### **How improvements helped when the pandemic hit**

We looked at improvements to Infection, Prevention and Control (IPC), understanding risks and raising issues. We developed positive relationships with IPC specialists, health and safety leads and the creation of our own internal champions in several areas, which helped us to focus on continually improving our processes, systems and policies. These improvements have been so important and has helped with the COVID-19 situation as we were able to adapt this to strengthen the support required for each individual who use our services.

We also identified that our communications both internal and external needed to be improved, therefore we recruited a new Communications Officer to lead on this area. This role has been essential and helped enormously when the COVID-19 pandemic hit.

Their expertise meant that they could very quickly review complex Government guidance, public health advice, infection control enhancements that included the use of additional PPE, and clearly communicate it across our service, this has continued throughout and has been essential for accuracy, clarity and speed as the guidance has changed.

### **Continuing our improvement journey**

Whilst the CQC stopped their full inspection process, their inspectors have held phone calls with the managers and worked through the interim COVID-19 virtual inspection calls which was a reassuring positive process and ensured contact with CQC has been maintained throughout the pandemic.

We have recently purchased an electronic care planning system called Iplanit which is a very bespoke person-centred care planning and risk assessment system, training for all staff on its use will begin in February 2021.

## How skills for care can support your quality improvement

Skills for Care provides a range of ways to support services to meet and exceed quality standards.

Our [Good and outstanding care](#) resources showcase the standards that are expected, whilst our [Guide to improvement](#) provides a step by step approach to addressing issues with quality.

During the pandemic, the CQC is using the Transitional Monitoring Approach and our accompanying [Information film and self-check tools](#) can prepare frontline managers, quality and compliance leads.

Our new [Social care workforce and quality model](#) is aimed at increasing productivity, improve quality and support. Meanwhile, the [Adult Social Care Workforce Data Set \(ASC-WDS\)](#) can be used to benchmark your service and evidence what you are doing.

Finally, our free [Learning from events](#) online learning helps managers to reflect on accidents and incidents to help identify practical ways to mitigate their re-occurrence and plan associated improvements.

**Further information and advice about Quality improvement and quality assurance is available from**

[www.skillsforcare.org.uk/COVID-19webinars](http://www.skillsforcare.org.uk/COVID-19webinars)