

## **| Social care audit for leaders**



# About us

The Healthcare Quality Improvement Partnership (HQIP) was established in 2008 to promote quality improvement. HQIP develops and promotes tools, resources, skills, methods, and guidance to support a culture of reflective practice and continuous quality improvement.

We work in partnership with both health and social care stakeholders – including people who use services and their representatives, professional staff, clinicians, and management staff – and specialise in leading and promoting data-rich or evidence-based programmes of quality improvement, where high-value qualitative or quantitative information is collected and used to drive quality improvement and better care outcomes.

The relationship between people who use services and those who deliver them is at the heart of high-quality health and social care. We encourage staff to work closely with service users, to actively collaborate, listen, and share information to implement effective quality improvement initiatives.

HQIP is led by a consortium of professional bodies: the Academy of Medical Royal Colleges, the Royal College of Nursing, and National Voices – the national coalition of health and social care charities that works to strengthen the voice of patients, service users, carers, their families, and voluntary organisations.



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# Overview

## Purpose of this guide

This guide provides an overview of the social care audit quality improvement cycle, and sets out the role of operational and strategic leaders in implementing care audit within their organisation. It describes the benefits of care audit for people who use services, care organisations, and professionals, as part of a whole-systems approach to quality and service improvement, and the fundamental importance of involving those who use services throughout.

## Why care audit?

The aim of social care is to improve, or maintain, the quality of people's lives, and their wellbeing, through personalisation and empowerment. To understand how successful social care practice is, and to improve upon it, we must measure outcomes using care audit, to check that services are effective for people who use them.

## Who is this guide for?

This guide is for operational leaders who are the professionals within care services with responsibility for monitoring people and practices, and for strategic leaders who are responsible for establishing an improvement culture and checking standards are met across their organisation.<sup>i</sup>

## Consultation process

A series of workshops and national seminars were held to ensure this guidance reflects the experience, achievements and challenges of the many organisations, services, and disciplines within the social care sector.

## Further guidance

This guide forms part of a suite of guidance developed to support social care professionals to undertake care audit, including [Social care audit in practice \(HQIP, 2017a\)](#), a detailed, step-by-step approach to care audit using the quality cycle, and an abridged version of that guide, [Social care audit in practice: Summary guide \(HQIP, 2017b\)](#).

## Note on terminology

Due to the vast range of organisations, services and disciplines within the social care sector, there are some differences in terminology used. For consistency, in this document we refer to those who use social care services, whether in their own home, a care home, supported living, or other environment, as 'people who use services'. We have used the term 'senior management team', or 'manager', for the individuals responsible for leading and running an organisation, whether a single home or service, or an organisation with multiple services and sites.

## Acknowledgements

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i. Based on the National Skills Academy for Social Care Leadership Qualities Framework: [www.skillsforcare.org.uk/documents/leadership-and-management/leadership-qualities-framework/leadership-qualities-framework.pdf](http://www.skillsforcare.org.uk/documents/leadership-and-management/leadership-qualities-framework/leadership-qualities-framework.pdf)

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# Introduction

This guide provides an overview of social care audit for operational and strategic leaders, and sets out:

- What care audit is, and its place within social care quality and governance frameworks
- Specific contributions care audit can make to your organisation
- What you can do, as a senior manager, or management team, to put in place a programme of care audit as part of effective social care governance
- Benefits of care audit for people who use services, staff, organisations, and commissioners

Quality in all care service provision needs to be high – for people using the service, for their carers and family members, for organisations and their staff, and for those commissioning care. Often, quality in social care has been measured in terms of ‘cost’ and ‘efficiency’. Increasingly though, ‘value’ is important: high quality, effective services, delivered economically.

*“Care audit enables efficiencies to be made in times of austerity, whilst improving standards.”*

**Shirley Allen, Bury Council Strategic Development Unit,  
Department of Communities and Wellbeing**

Many social care organisations already have a strong ethos of quality. At a national level, the sector-led collaboration [\*Think Local, Act Personal \(TLAP\)\*](#) works to create a broader, more systematic approach to quality improvement, for services that are truly personalised. The [\*Social Care Institute for Excellence \(SCIE\)\*](#) has created outcome-based tools and quality frameworks to help define excellence for different care services, settings and user groups. Additionally, [\*Skills for Care\*](#) is committed to transforming quality of care through workforce development, and the [\*National Care Forum’s \(NCF\)\*](#) ‘Quality First’ initiative provides one of many frameworks available for members to benchmark their services against one another to drive improvement.

Fundamentally, the aim of social care is to improve, or maintain, the quality of people’s lives, and their wellbeing, through personalisation and empowerment.

To understand how successful social care practice is, and to improve upon it, we must measure outcomes to check that services are effective for people who use them. In healthcare, the process of measuring practice against agreed and proven standards for high-quality care, and taking action to align practice with those standards to improve service quality and outcomes for patients and their carers, is known as ‘clinical audit’.

The care audit approach described in this guide follows the universal principles of audit, as per clinical audit, and offers a simple method to continually improve quality and demonstrate the effectiveness of care provided.

Using a unified, cross-sector approach to measuring quality against common standards enables comparison of performance and highlights best practice to be shared peer to peer and through case studies. It also supports people who use services, their family members, carers, and advocates, to make meaningful choices regarding care based on clear and transparent performance data.

At a national level, the [\*Care Quality Commission \(CQC\) Fundamental Standards \(CQC, 2017a\)\*](#) describe the care people should expect (with prompts for providers to consider), in order to meet the requirements for quality improvement and audit set out in [\*Regulation 17: Good governance, of the Health and Social Care Act 2008 \(Regulated Activities\) Regulations 2014 \(CQC, 2017b\)\*](#):

*“To meet this regulation, providers must have effective governance, including assurance and auditing systems or processes. These must assess, monitor and drive improvement in the quality and safety of the services provided, including the quality of the experience for people using the service. The systems and processes must also assess, monitor and mitigate any risks relating to the health, safety and welfare of people using services and others. Providers must continually evaluate and seek to improve their governance and auditing practice.”*

Also, the National Institute for Health and Care Excellence (NICE) set a range of [\*guidance and quality standards\*](#), covering evidence-based, high-quality care, to support health and social care practitioners and commissioners with optimal service provision.

However, a programme of care audit should work beyond national requirements and initiatives, to address issues that relate specifically to the local population, those in receipt of care, and the services provided.

As social care strives for a personalised system, approaches to quality improvement must actively support the development of services with the people who use them. Care audit requires the involvement of people who use services at every stage of the improvement cycle.

*“Without the service users voice, how can you know you’ve got it right?”*

**Margaret Hughes, HQIP Service User Network member**

Care audit also contributes to meeting the requirements of the overarching domains of the [\*Adult Social Care Outcomes Framework \(Department of Health, 2014\)\*](#):

- Ensuring quality of life for people with care and support needs
- Delaying and reducing the need for care and support
- Ensuring that people have a positive experience of care and support
- Safeguarding adults whose circumstances make them vulnerable, and protecting them from avoidable harm

## The importance of effective leadership

Improving care outcomes and day-to-day experiences for people who use services is a key aim of the frontline team, and the responsibility of those who manage the service. Effective leadership is essential in changing attitudes and involving all staff in every aspect of social care quality improvement.

*The Leadership Qualities Framework (Department of Health, 2011)* of the National Skills Academy for Social Care covers seven dimensions within which social care professionals need to demonstrate leadership, including:

### Dimension 4 – Improving Services:

- **Ensuring the safety of people who use services:**  
In order to ensure the safety of people who use services, leaders must assess and manage the risks associated with service developments, balancing economic considerations with the need for user safety
- **Critically evaluating:**  
Working individually or as part of a team, leaders must think analytically and conceptually in order to identify where services can be improved
- **Encouraging improvement and innovation:**  
Leaders should encourage improvement and innovation in order to create a climate of continuous service improvement
- **Facilitating transformation:**  
Facilitating transformation means contributing to change processes that lead to improved health and social care

### Dimension 5 – Setting Direction:

- **Identifying the context for change:**  
Identifying the context for change means taking a variety of factors into account in order to fully understand the environment in which change is taking place
- **Applying knowledge and evidence:**  
Leaders must gather information that enables them to make evidence-based challenges to systems and processes, with the aim of identifying opportunities for service improvements

- **Making decisions:**  
When leaders make decisions they do so basing their judgements on both the available evidence and their own values
- **Evaluating impact:**  
Leaders measure and evaluate outcomes, taking corrective action where necessary and being accountable for their decisions

Aside from ensuring high-quality experiences for people who use services, care audit for improvement also affords the business benefits of delivering high-quality care: staff retention, controlling waste and inefficiencies, retaining and attracting business, and meeting the requirements of regulators and commissioners.

Care audit fosters a high-quality service, and provides evidence that your organisation is committed to enhanced service-user outcomes and experience of care. It also balances the tendency to focus on concerns, by recognising and encouraging excellent practice where it exists. Care audit should play a key role in every management team's quality assurance framework, as part of a wider landscape of monitoring and feedback arrangements, including the review of incidents reported and complaints made. These various elements help form a comprehensive and proactive risk management system that supports safety and efficiency, and fosters wellbeing, choice, equality, and accessibility for people who use services.

**As a service leader using care audit to compare practice with agreed quality standards, you can be confident that you provide a safe, effective service, and can demonstrate this objectively to others.**

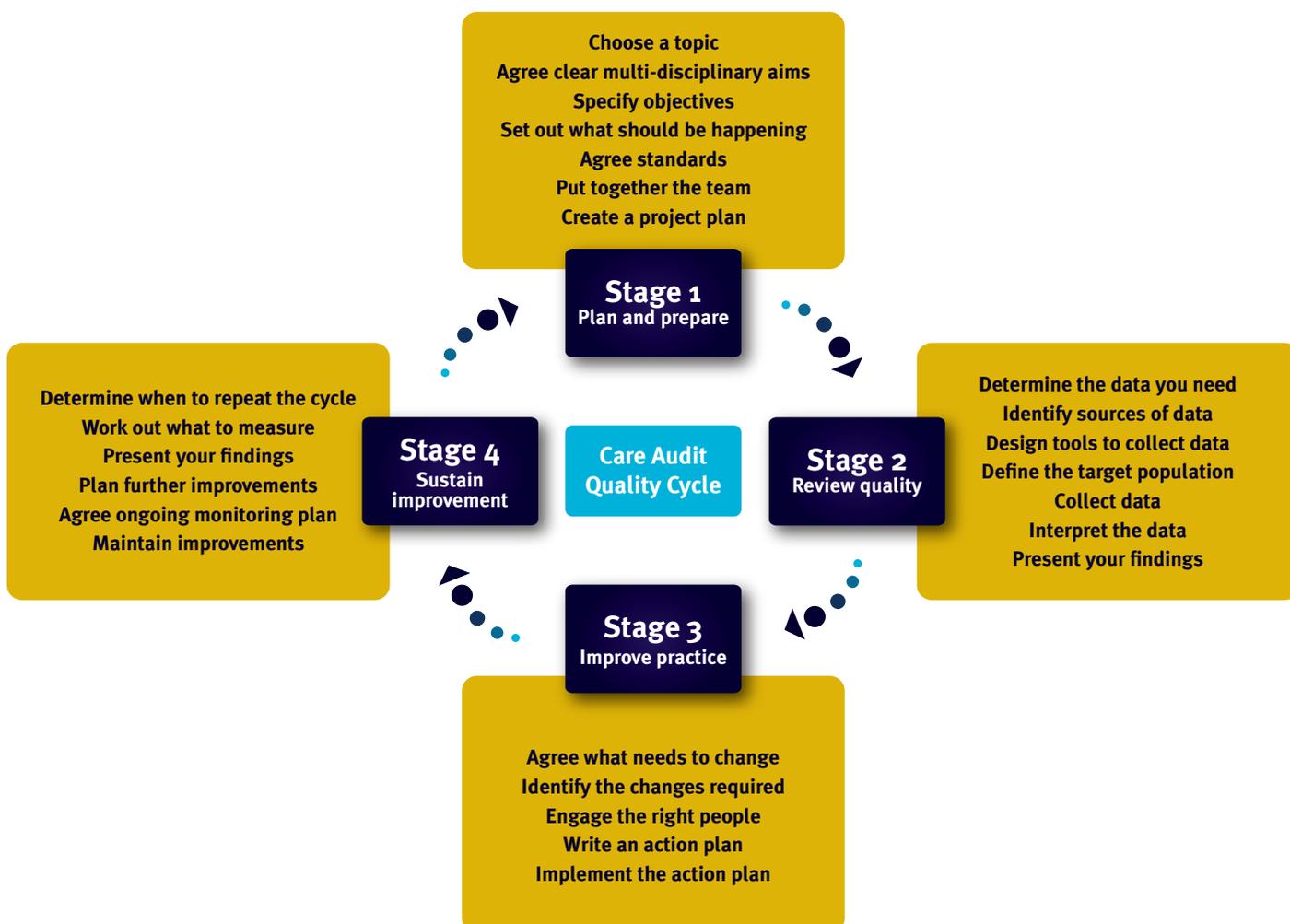
# 1. What is care audit?

## In this section:

- Key stages of the care audit quality cycle
- How care audit complements existing governance and quality systems

## 1.1 Key stages of the care audit quality cycle

The care audit quality cycle for service improvement has four stages:



### The care audit quality cycle

The care audit quality cycle provides a system for checking how well the services you provide meet evidence-based standards, highlights how services might be improved, and ensures, through robust action-planning and further audit, that you implement the changes needed to improve care and outcomes for people who use your services.

## 1.2 How care audit complements existing governance and quality systems

*“The quality of care and support is first and foremost the responsibility of providers. Management Boards, non-executive directors and leaders must ensure that systems are in place, which accurately provide assurance to themselves, service users and their families, and the public, that the essential requirements are being met.”*

**Caring for our future: reforming care and support (Department of Health White Paper, July 2012)**

Most social care organisations use a number of different approaches to support quality improvement and maintain safety within their services, and all quality improvement activity should also support the achievement of overarching organisational aims and objectives.

As a service manager, you may believe that you know quality when you see it, and feel content with the staffing, supervision, environment and care experience for people who use your services. However, a systematic review using care audit will analyse service delivery objectively and definitively against agreed standards of quality. Providing a service that meets expected standards of quality isn’t just a moral obligation or a business necessity – it’s a legal requirement. All social care organisations are expected to undertake activities to ensure statutory and mandatory frameworks for high-quality care, such as the [Care Quality Commission \(CQC\) Fundamental standards \(CQC, 2017a\)](#), are met. Examples of such activities include:

- Compliance with standards may be checked through episodic organisation-wide surveys, and one-off activities, such as serious case reviews

- Continuous monitoring and improvement activities might be in place, including staff supervision, surveys and interviews of people who use services, and peer review
- Service uptake and utilisation of resources may be monitored to check the use of day services, rooms, beds, length of stay, or repeat use of services

With different functions and contexts, each of these activities is valuable in improving the quality of services. Most services need a mix of approaches for robust quality management, which allow the organisation, service, and staff, to:

- Identify and respond to poor performance
- Ensure high standards of on-going practice
- Continuously improve services
- Acknowledge and provide encouragement where excellent practice exists

The information outputs generated through a wide range of quality improvement activities can inform care audit topic selection. Care audit is one of the most robust quality improvement methods available, as it measures service performance against objective quality standards that are based on agreed best practice. This means care audit can demonstrate where services exceed the minimum standards expected, beyond compliance with statutory requirements, providing an opportunity to demonstrate excellence. Recognising that a service is performing well can create a positive and enthusiastic culture of continuous quality improvement, and teams are driven to address shortfalls and work towards high standards of care and service delivery.

As care audit provides a system for assessing how well services meet evidence-based standards, it is sometimes confused with performance monitoring. Unlike contract-monitoring and compliance activities that check performance, care audit focuses on achieving incremental, evidence-based quality improvement, through an ongoing cycle that need not stop once you have hit a performance target or regulatory standard.

The diagram below presents a model of social care governance for quality services, from *Social care governance: A practice workbook (SCIE, 2013)*:



**A model of social care governance**

## 2. The role of the senior management team

### In this section:

- Quality improvement as a core responsibility of those who manage services
- Maximising the value of care audit
- Ensuring structures are in place to support an effective audit programme

### 2.1 Quality improvement as a core responsibility of those who manage services

In a single care home or large provider organisation, a manager or senior management team need to have systems and processes in place to access evidence of the quality of services provided.

These systems need not be unduly costly or time-consuming to set up and maintain, and should be proportionate to the size and complexity of your organisation. They should not be accessible only to the few – ongoing quality improvement is every manager's role. It is also part of organisational culture, regardless of organisation size, therefore all staff need to be aware of standards set, levels of compliance achieved, and any measures required to address shortfalls identified.

As with all quality improvement methods, care audit does require some investment of time and energy, but only at the scale of the individual service or organisation, and should, as far as possible, become part of every day practice for an effective service.

Care audit has to be a strategic priority for service leaders, whether managers, or the senior management team. As part of good governance, it provides ongoing evidence of the quality of organisational activity, and contributes to the Board's key function: assessing and monitoring care quality.

As a service leader, you will need confidence in the reports, data and intelligence provided to you as assurance of safe, high-quality systems of care. Care audit is a useful measure of quality, providing robust evidence of excellence, or identifying shortfalls requiring improvement.

Leaders will want to be assured that care audits are:

- **Material:**  
Focused on key issues where their value clearly outweighs cost
- **Professional:**  
Undertaken and completed to high standards
- **Embedded:**  
Leading to improvements that are made and sustained

### 2.2 Maximising the value of care audit

The value of care audit can be maximised by ensuring it is aligned to strategic organisational needs, focusing on outcomes and meeting internal objectives and external requirements, securing adequate resources through integration with other quality improvement processes, and ensuring that any shortfalls identified are acted upon and improvements made. The diagram overleaf illustrates.

## Maximising the value of care audit

### Add value

- Focus on improving outcomes
- Reflect your organisation's strategic priorities
- Reflect the views of the people who use your services
- Meet national regulatory requirements
- Meet commissioner requirements
- Respond to organisational issues and challenges
- Integrate financial and quality information

### Secure resources

- Integrate care audit into other organisational processes for quality improvement
- Have a named quality lead
- Make the necessary resources available
- Place care audit as a standing item for review at senior management and board meetings
- Ensure the process is robust – HQIP's Social care audit in practice guide provides tips and advice on audit design

### Improve quality

- Produce results that are shared and acted upon
- Close the loop – take steps to ensure that the cycle is repeated so that any areas for further improvement can be identified
- Communicate results clearly to staff, to your Board, to people who use services, carers, relatives, and potential consumers or users of your service

## 2.3 Ensuring structures are in place to support an effective audit programme

Leadership is essential to ensure all quality improvement activity is properly resourced and effective.

To maximise the value of care audit, it must be properly resourced and directed, otherwise it could become a tokenistic exercise without the power to deliver real change and improvement.

To ensure your care audits are worthwhile and staff are empowered to make real changes, you should:

### Integrate care audit into your wider quality assurance systems

- Ensure the processes and resources for undertaking care audits are part of any wider systems your organisation has for planning and performance management
- Report the outcomes of care audits routinely with other performance information

### Have a named quality lead at senior manager level

- Identify an accountable lead for the care audit programme

### Make the necessary resources available

- Ensure staff have time to participate in care audit (as far as possible, care audit should be embedded into the daily routine)
- Provide administrative and any other practical support staff need
- Provide training required to carry out the audit
- Ensure any financial costs are identified and met – they should be offset many times over by efficiency gains and new business

### Make the process robust

- Undertake and complete audits to professional standards. HQIP's *Social care audit in practice guide (HQIP, 2017a)* provides detailed guidance and support and is available to download at [www.hqip.org.uk](http://www.hqip.org.uk)

### Share results and act upon them

- Once care audit stages have been completed, share results with staff, people who use services, their relatives and carers
- Ensure the findings lead to action plans for improvement, and that these are implemented

### Sustain your improvements

- Ensure the care audit quality cycle is repeated so that improvements are acknowledged and areas for further attention identified

# 3. Benefits of care audit

## In this section:

- Benefits of care audit – summary diagram
- Benefits for people who use services
- Benefits for organisations
- Benefits for social care professionals
- Using care audit to support procurement and commissioning

## 3.1 Benefits of care audit – summary diagram



**Benefits of care audit for people who use services, staff, and performance**

## 3.2 Benefits for people who use services

*“Service user involvement in social care audit helps to increase mutual understanding and a sense of common interest and goals between providers and service users.”*

**Dr Sarah Markham, HQIP Service User Network member**

The most important measure of success of any kind of care quality improvement activity is the benefit to people who use services. Unless organisations meet the needs of the people who use their services, they are unlikely to succeed.

The views of people who use services are fundamental, to understand how well a service operates, and how it can be improved.

Care audit puts people who use services at the heart of quality improvement activity in the following ways:

### **Designing services in partnership with the people who use them**

Involving people who use services and their relatives, carers or representatives is essential to care audit. They can and should be involved throughout the process, from identifying topics, defining standards of quality and contributing to data collection through interviews, surveys and questionnaires, to suggesting improvements and agreeing action plans.

### **Supporting people to make informed choices**

It is crucial that people who use or are about to use a care service have access to information that will help them decide which service to use. Services that use care audit can advise existing and potential users of the standards they aspire to, and how well they are doing against them. This enables people who use services to make better informed choices and promotes greater confidence in the quality of care services.

### **Enabling service user fulfilment and addressing oppressive practice**

Care audit can identify any practice that is restrictive and oppressive, or represents values and behaviours that work against the interest of people who use services, to be challenged and replaced.

## 3.3 Benefits for organisations

*“Care audits can help with inspection and marketing – people want to know that quality matters.”*

**Jill Manthorpe, Professor of Social Work and Director of the Social Care Workforce Research Unit, King’s College London**

Providers of social care operate in an increasingly squeezed financial environment.

With diminishing resources, investing in care audit can offer a return on investment, through, for example:

### Meeting regulatory requirements

Increasingly, social care organisations find themselves working to demonstrate the quality of what they do against a variety of frameworks, for a range of inspection regimes. Care audit can demonstrate that organisations and services meet regulatory requirements, with the added benefit of a focus on improving quality, which must also be demonstrated on most inspections.

### Improving business performance

Care audit brings a better understanding of the strengths and weaknesses of a service, enabling organisations to make more informed choices about where to target funds. Improved business performance and efficiency savings can be achieved through identifying wasteful or unnecessary practices.

### Enabling organisations to match their practice to the standards of the best

Care audit enables providers to benchmark their practice against one another, by auditing their practice using the same standards. If organisations publish the findings from their care audits, other providers are encouraged to match or exceed them.

### Providing credible information about the quality of services

Care audit provides credible, evidence-based information about the quality of services, which organisations can use to reassure existing customers of the value and quality of their services, and to confidently promote their successes to new audiences.

### Sharing best practice within the organisation

Organisations already using a care audit approach can gather examples of innovation and good practice from within their services and share them with other services across the organisation.

### Supporting more integrated services

As local authorities develop their role in integrating the commissioning of healthcare, social care, and public health services, there will be an increase in joint review of care pathways covering all settings. Care audit can be used by different agencies along a care pathway to help integrated services harmonise their practice, creating a better understanding of the network of systems, processes and outcomes.

### Building a partnership approach to service development and delivery

Cross-sector audit – through co-operation between hospitals, GPs and care homes – could, for example, lead to better transfers of care both on admission and discharge, and reduce unnecessary admissions and delayed discharges.

### 3.4 Benefits for social care professionals

*“Care audit is helpful – staff want to know what they are doing well and not so well.”*

**Jill Manthorpe, Professor of Social Work and Director of the Social Care Workforce Research Unit, King’s College London**

People working in social care support some of the most vulnerable people in our society in complex and diverse ways. The quality of their practice is already supported through their values, commitment to self-determination for the people they work with, and professional processes such as supervision. Care audit provides a complementary and powerful addition to these existing approaches, as a source of objective evidence of compliance with best practice, for example, through:

#### Engaging staff in improving quality

Engaging staff in care audit helps teams and individuals articulate what quality should look like, and understand how their role contributes to maintaining and improving the quality of their service. This also enables staff to identify associated development needs, and explore their career pathway.

#### Supporting supervision, training and development

Information from care audit can support supervisory and performance management activities by acknowledging exemplary practice, and identifying areas for improvement.

#### Receiving positive feedback from the people who use services

Care audit can motivate, as throughout the process staff often hear positive feedback about their services that was previously not sought or received.

#### Enabling reflection on personal values, practice and career development

Care audit provides the opportunity for staff to reflect on their own practice, and evidence of this to meet continuing professional development requirements.

### 3.5 Using care audit to support procurement and commissioning

The emphasis of care audit is on enabling providers to improve their services, and while the process, findings, and action plans belong to the provider organisation, the outputs from care audits can usefully contribute to procurement and commissioning arrangements.

A significant percentage of social care services, whether directly commissioned by local authorities or through personal budgets, are publicly funded. Both commissioners and providers need to demonstrate that public funding is spent appropriately on high-quality, efficient services. Purchasers, especially local authorities, will wish to see care providers benchmarked to compare service quality.

While the results of a quality improvement programme in improving services are crucial, purchasers will also appreciate evidence of a visible, proactive system to address shortfalls in care.

# 4. Putting it all together

## This guide covered:

- What care audit is and its place within social care quality and governance frameworks
- Specific contributions care audit can make to your organisation
- What you can do, as a senior manager or management team, to put in place a programme of care audit as part of effective social care governance
- Benefits of care audit for people who use services, staff, organisations and commissioners

It is the responsibility of the senior team to put in place the overall structure for quality improvement, but not necessarily to decide upon fine detail. Instead, the finer detail should be agreed by front line staff, people who use services, their relatives and carers.

## How to get started:

### Assign someone in an appropriate role to lead on quality improvement

This may be your quality manager in a large organisation, or a senior manager where there is no-one with a specific responsibility for quality. In a large organisation a Board member should also have responsibility for quality, as well as a senior staff member.

### Give the lead space and time to take this work forward

They will also need the resources to develop a plan to organise the delivery of this work across the service.

### Agree the topics to be reviewed

These may be specific or broad, and can be reduced to standards and criteria in discussion with people who use services, their relatives, carers, and staff.

For an overarching quality review process it may be appropriate to agree the criteria against which services will be audited at a corporate or senior level. This can provide a development or team building activity for senior teams and front line staff. However, audit criteria should always be agreed with staff working within the services to be audited.

## It is useful to remember:

- The senior team, including, ideally, the Board, should review all care audit findings as they arise
- You should ensure an action plan is put in place to deliver the changes required, which the Board or senior management team may need to approve
- You need to be assured by those responsible that the necessary changes have been made, and that these will be reviewed by further audit in order to confirm improvement
- Having put an ongoing audit programme in place, the programme itself should be reviewed periodically by the senior team or Board to check it is being implemented; every time a review is completed, the senior team should consider the results and approve evidence of improvement actions taken; you will want to see that audit results are communicated to all interested parties – including users of services, commissioners, and stakeholders if you decide to use audit outputs within your marketing materials

**You now have a continuous quality improvement system in place – which is integrated into your day-to-day business practices to enable ongoing review of the quality of your services, how far you've improved, and what you can do to improve next.**

## 4.1 Checklist for senior teams – care audit organisation

### Maximise value

- Does the care audit we have planned focus on improving experience and outcomes for the people who use our services?
- Will the care audit enable us to demonstrate that we meet regulatory requirements?
- Will the care audit enable us to demonstrate that we meet commissioner requirements?
- Will the care audit address any areas of concern we have identified?
- Will the care audit help us to meet our wider plans for the organisation and services?
- How will we promote the positive findings and the improvements we make as a result of the care audit undertaken?

### Ensure resources and effectiveness

- How does the care audit fit with other work we are doing and processes we have for assuring and improving quality?
- Who is the named lead for quality improvement within the organisation?
- Do staff require any training to carry out the care audit we have planned?
- How will we provide training in care audit to staff who need it?
- Which resources do we need to make available in order to undertake the care audit we have planned – including administrative support and freeing up staff time?
- How will we ensure that the way each care audit cycle is undertaken is robust?
- How will we involve people who use services?

### Continually improve quality

- When will the findings for each care audit be reported to the senior team?
- How will findings from each care audit cycle be shared with stakeholders?
- Is there an action plan for care audit based on the findings of each care audit cycle?
- Which improvements have been achieved following the implementation of each action plan, and what further improvements are planned?
- Is there any learning from individual care audits about how we can improve quality, that we can apply to our other services/locations?
- How will we share this learning?
- Is there a pattern in the findings from care audits whereby we need to focus on particular aspects of how our services work?

# References

Care Quality Commission (CQC), 2017a. Fundamental standards: [www.cqc.org.uk/content/regulations-service-providers-and-managers](http://www.cqc.org.uk/content/regulations-service-providers-and-managers)

CQC, 2017b. Regulation 17: Good governance, Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: [www.cqc.org.uk/content/regulation-17-good-governance](http://www.cqc.org.uk/content/regulation-17-good-governance)

Department of Health, 2011. National Skills Academy for Social Care Leadership Qualities Framework (LQF): [www.skillsforcare.org.uk/documents/leadership-and-management/leadership-qualities-framework/leadership-qualities-framework.pdf](http://www.skillsforcare.org.uk/documents/leadership-and-management/leadership-qualities-framework/leadership-qualities-framework.pdf)

Department of Health, 2012. Caring for our future: [www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/136422/White-Paper-Caring-for-our-future-reforming-care-and-support-PDF-1580K.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/136422/White-Paper-Caring-for-our-future-reforming-care-and-support-PDF-1580K.pdf)

Department of Health, 2014. Adult Social Care Outcomes Framework: [www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/375431/ASCOF\\_15-16.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/375431/ASCOF_15-16.pdf)

Healthcare Quality Improvement Partnership (HQIP), 2017a. Social care audit in practice: [www.hqip.org.uk/social-care/](http://www.hqip.org.uk/social-care/)

HQIP, 2017b. Social care audit in practice: Summary guide: [www.hqip.org.uk/resources/social-care-audit-guidance/](http://www.hqip.org.uk/resources/social-care-audit-guidance/)

National Institute for Health and Care Excellence (NICE), 2017. NICE guidance and quality standards: [www.nice.org.uk/about/nice-communities/social-care/social-care-guidance-and-standards-and-the-quality-landscape](http://www.nice.org.uk/about/nice-communities/social-care/social-care-guidance-and-standards-and-the-quality-landscape)

Social Care Institute for Excellence (SCIE), 2013. Social care governance: A practice workbook. 2nd edition: [www.scie.org.uk/publications/misc/governance.pdf](http://www.scie.org.uk/publications/misc/governance.pdf)

# Further reading

HQIP website: [www.hqip.org.uk](http://www.hqip.org.uk)

HQIP – dedicated patient and public involvement pages: [www.hqip.org.uk/involving-patients/](http://www.hqip.org.uk/involving-patients/)

HQIP, 2015. Clinical audit: A guide for NHS Boards & partners: [www.hqip.org.uk/resources/clinical-audit-a-guide-for-nhs-boards-and-partners/](http://www.hqip.org.uk/resources/clinical-audit-a-guide-for-nhs-boards-and-partners/)

The Health Foundation, 2012. Overcoming challenges to improving quality: [www.health.org.uk/publication/overcoming-challenges-improving-quality](http://www.health.org.uk/publication/overcoming-challenges-improving-quality)

National Care Forum: [www.nationalcareforum.org.uk/](http://www.nationalcareforum.org.uk/)

The National Institute for Health and Care Excellence website: [www.nice.org.uk/aboutnice/qualitystandards/qualitystandards.jsp](http://www.nice.org.uk/aboutnice/qualitystandards/qualitystandards.jsp)

PROGRESS, 2012. The EU Programme for employment and social solidarity 2007-2013, Measuring Progress: Indicators for care homes: [www.euro.centre.org/data/progress/PROGRESS\\_ENGLISH.pdf](http://www.euro.centre.org/data/progress/PROGRESS_ENGLISH.pdf)

SCIE website:

[www.scie.org.uk/atoz](http://www.scie.org.uk/atoz)

SCIE – dedicated participation pages: [www.scie.org.uk/publications/guides/guide17/participation/index.asp](http://www.scie.org.uk/publications/guides/guide17/participation/index.asp)

SCIE, 2011. Social care governance: a workbook based on practice in England (SCIE Guide 38): [www.scie.org.uk/publications/guides/guide38/](http://www.scie.org.uk/publications/guides/guide38/)

Skills for Care: [www.skillsforcare.org.uk/](http://www.skillsforcare.org.uk/)

Think Local Act Personal, 2017. Making it Real: Marking progress towards personalised, community based support' [www.thinklocalactpersonal.org.uk/Browse/mir/aboutMIR/](http://www.thinklocalactpersonal.org.uk/Browse/mir/aboutMIR/)



Further information is available at: [www.hqip.org.uk](http://www.hqip.org.uk)

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