

Achieving Excellence

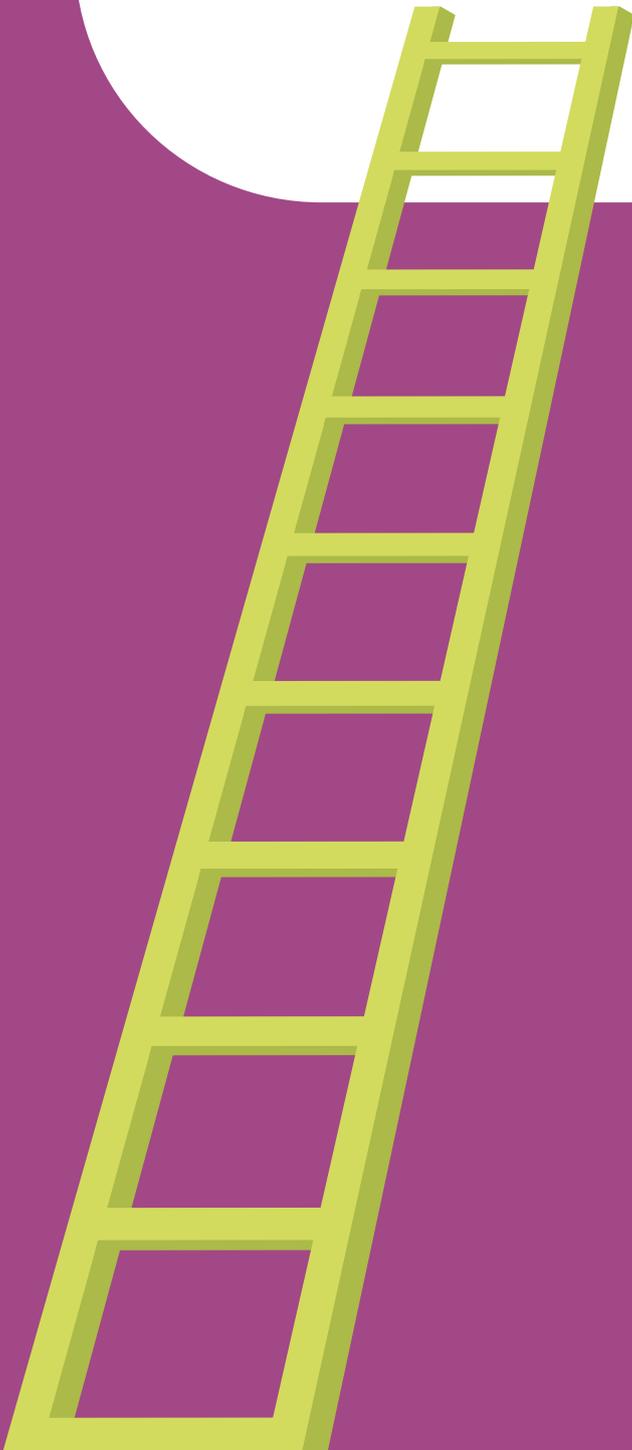
Our Quality Assurance Framework 2016



Person Shaped Support

The illustration features a stylized mountain range with four peaks. The peaks are colored in shades of teal and green, with yellowish-gold summits. A red banner with the text 'Person Shaped Support' is attached to the tallest peak. Several white, fluffy clouds are scattered across the purple background.

**“This 2016 version of our
Quality Assurance Framework
reflects the progress we have made
so far and demonstrates that PSS
is truly achieving excellence”**



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Achieving Excellence

An Introduction from the Chief Executive

The publication of 'Towards Excellence: A Quality Assurance Framework' in 2012 marked a significant milestone in the development of PSS; it outlined how we would assure and evidence that PSS is an organisation that delivers consistently high quality services and sets ourselves targets for continuous improvement.

In 2016, this third version entitled '**Achieving Excellence: Our Quality Assurance Framework**' outlines a refreshed approach for PSS. It is an updated version of the previous Quality Assurance Framework which has been revised to take account of our achievements and our learning over the past 4 years, as well as better reflecting what PSS is about and our values from 2016/17 onwards.

This Framework doesn't sit in isolation as there are a number of other policies and strategies in PSS which contribute to the overall quality of the services we provide. One of the most important is our **Quality Management Model**. This sets out WHAT the different standards are which, if they are being met, demonstrate that services are truly achieving excellence. This **Quality Assurance Framework** is the tool we use to assess and evidence HOW those standards are being met and who and what is involved in making that happen.

Our Quality Management Model defines quality in terms of:

- Experience
- Safety
- Effectiveness

The model and the framework are both in turn underpinned by our values and where we are going as an organisation. These were refreshed as part of our new Big Plan going forward from 2016-2017, and take account of the changing environment in which PSS is working and the challenges we are likely to face in the future.

Our Values:

We are Big Hearted
We are Genuine
We are Open Minded
We are Determined



About PSS

WHAT do we do?

We're a UK based social enterprise founded in 1919 that works with people to improve their lives at home, in their families, through their health and wider support networks.

WHY do we do it?

Whatever challenges life brings, we believe that everyone should have the chance to change things for the better.

WHERE are we going?

We'll approach our centenary in the spirit of our early days...responsive to a changing world, meeting unmet need, and delivering stand-out support wherever we work.

This 2016 version of our Quality Assurance Framework reflects the progress we have made so far in refining our approach to quality assurance. In the true style of always improving, it captures our learning in terms of the tools, techniques and governance we have in place to demonstrate that PSS is truly achieving excellence.

Lesley Dixon, Chief Executive

WHAT is Achieving Excellence?

Achieving Excellence: Our Quality Assurance Framework is a tool which outlines how we collect and review information that tells us whether we are meeting the standards in our Quality Management Model.

The Quality Management Model is shown below, with the experience, safety and effectiveness of services at the heart of it and the principles of inclusion and transparency running throughout every layer of the model.

The Quality Assurance Framework enables us to assess how well we provide the building blocks to support quality, how well we review and monitor quality, as well as how we get things moving by supporting services and sharing best practice.

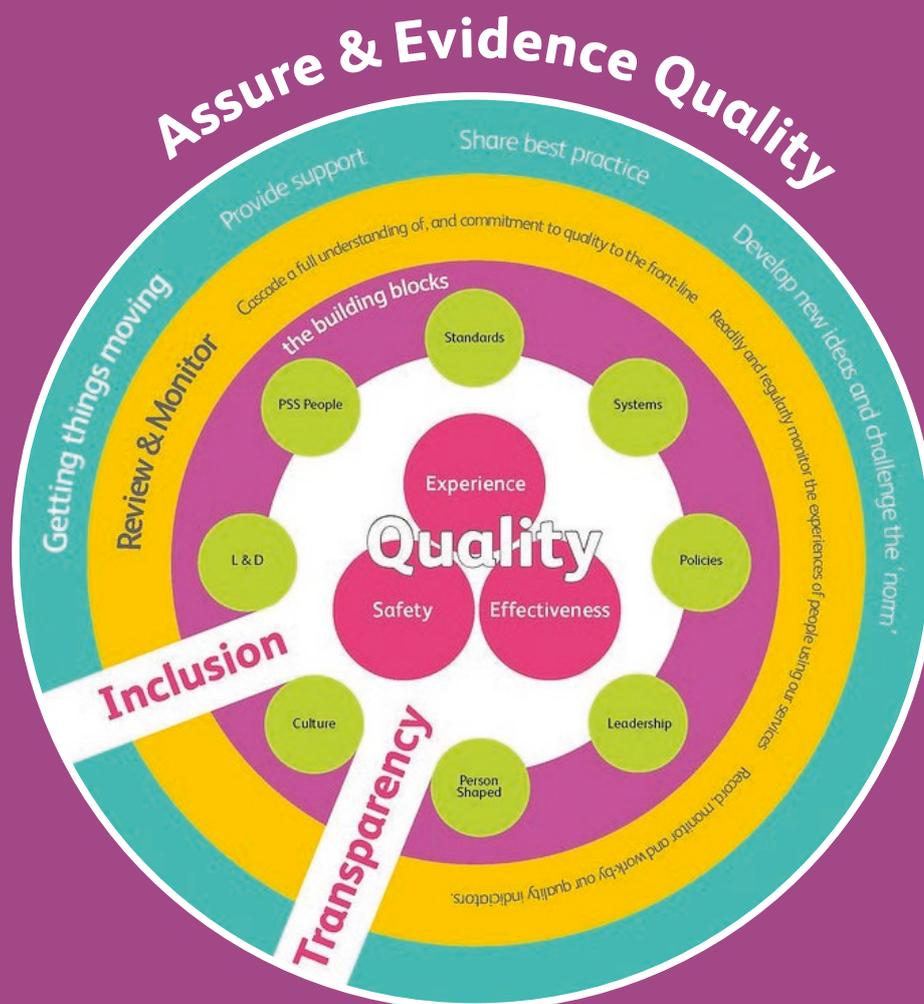


Figure 1: PSS Quality Management Model

Benefits of the Quality Assurance Framework

There are a great number of benefits of having a Quality Assurance Framework at PSS, which are shown in the diagram below.



Figure 2: Benefits of PSS Quality Assurance Framework

WHO is involved in Achieving Excellence?

This section will look at who is involved in the delivery of Achieving Excellence throughout the organisation. It will look separately at:

- **Service Users** and their importance in the quality process
- **Groups involved in Quality Assurance** and how it is 'owned' at PSS
- **Key Staff** who have individual responsibility for quality

Service Users

PSS stands for Person Shaped Support and therefore the involvement of people who use our services in how they are designed and delivered is crucial. The chart below shows how service users **engage with** PSS, how PSS actively engages with service users and how they both **work together**. It is based around the three principles embedded in our Service User Inclusion Framework (People Shaping Services) which are:

- Individual participation - (*I am in control of my services*)
- PSS pro-actively seeking feedback - (*We can make our services better*)
- Partnership Working - (*I work in partnership with PSS*)



Figure 3: Service User and PSS engagement

Groups involved in Quality Assurance

The responsibility for the quality of service delivery is owned at the highest level within PSS. Leadership Team take the overview of quality within PSS, there is further scrutiny from the Board of Trustees' Audit & Governance sub-committee before final reporting to the Board of Trustees who take any further decisions as necessary. There is a separate group called the 'Quality Reference Group' which guides and supports the development of quality assurance within PSS. The chart below shows the different groups in PSS that are involved with quality assurance, as well as how often they meet and a brief summary of their role.

Board of Trustees - meets quarterly

Overall responsibility for the work of PSS and has oversight of the Key Performance Indicators (KPI's) relating to Quality, as well as the minutes of the Audit and Governance Sub Committee.

Audit and Governance sub committee - meets quarterly

To maintain an overview of performance relating to quality, including compliance with regulatory quality standards and contract compliance.

Quality Reference Group - meets triannually

To guide and support the development of quality assurance practices within PSS, including service user engagement and the Annual Quality Account. To consider new potential practices relating to Quality.

Leadership Team - meets monthly

Has overall operational responsibility for the delivery of high-quality services across the organisation. Quality items can be brought to any leadership team meeting and quality is a standing item on the agenda.

Senior Management Team - meets bi-monthly

Brings together senior managers of operational and central teams to take an overview of service delivery to improve quality.

Figure 4: Groups involved in Quality Assurance

Key Staff with specific responsibility for quality

There are three key staff members with specific responsibility for quality within PSS. These are the **Director of Services** who has overall responsibility for ensuring the quality and effectiveness of PSS services. There is a strong dotted line between that post and that of the **Head of Quality and Compliance**, whose role it is to support services to meet all Quality Assurance requirements are met and meet the standards that are set out in the Quality Management Model. The **Quality Business Partner** supports these roles, as well as administering the quality reference group and the policy updating process.



Chris Barker: Director of Services

- Has overall responsibility for the quality of service delivery, and therefore has to have oversight of the quality assurance process.
- High level of involvement with regulator and commissioner inspections and visits and agreeing action plans and next steps.
- Nominated/Responsible Individual for regulated services.



John McLean: Head of Quality and Compliance

- Has overall responsibility for the development, updating and delivery of the Quality Assurance Framework and Quality Management Model.
- Has a key role in other areas related to quality including Impact Reporting and Service User Engagement.



Kate Reid: Quality Business Partner

- Supports the Head of Quality and Compliance in all areas of Quality Assurance, including carrying out Quality Reviews, conducting the service user surveys, administering the quality reference group and the policy updating process.
- Prepares reports on quality indicators for the Board of Trustees and sub-committees.

Figure 5: Key Staff with responsibility for Quality

Others with responsibility for quality

As much as quality is the main responsibility of these three key roles; service managers have the key responsibility within their own services for ensuring and delivering quality. However quality should be a priority for everyone at PSS. The statement from the Big Plan that ‘we will deliver stand out support wherever we work’ is achieved through the business planning process which is designed in a ‘cascade’ format from the top down. This ensures that we can trace a golden thread from the objectives in the **Big Plan**, down through **Service Plans** into individual **My Plans** for staff. Therefore quality is truly embedded in the fabric of the organisation and we can see that the people at all levels of PSS have a part to play.

Heads of Service

- Responsibility for monitoring and improving the services in their portfolio.
- Holding team meetings and 1-2-1-’s with managers with quality as a standing item.
- Engagement with front line services.

Service Managers

- Responsible for day to day delivery of quality services.
- Responsible for preparing for and following up on Quality Reviews.
- Responsible for sourcing ongoing feedback to improve services.

Team Leaders

- Responsible for management of staff and team on a day-to-day basis
- Responsible for quality assurance including day to day checks and quality controls (e.g. medication checks, file audits)

Staff

- Staff should be aware of the standards required of them in their job descriptions and delivering to this standard.
- Staff should actively identify opportunities for personal development to aid quality improvement.

Supporters and Champions

- Supporters and Champions should be encouraged to be involved as much as possible to support the quality agenda at PSS (e.g. on recruitment panels, tender panels, presentations).

Figure 6: Others with responsibility for quality

HOW do we deliver Achieving Excellence?

As outlined in the introduction - the Quality Management Model is the PSS measure of 'what excellent looks like' and 'Achieving Excellence; our quality management framework' is 'how do we know we are achieving it'?

The quality management model itself has many different layers and therefore a range of different mechanisms are required in this framework to ensure that we are monitoring and assuring every aspect of the model. This section explains the different techniques we use for quality assurance.

One common theme throughout all of the techniques is that they will contribute to demonstrating that services are meeting the PSS Quality Standards. These are mapped to regulatory standards and are supported with the evidence we would look for in relation to them. There are 10 standards which are as follows:

- 1. Activities prior to starting service**
- 2. Delivering a person-centred approach**
- 3. Providing safe care and protection from harm**
- 4. Effective record keeping and finance**
- 5. The "Tell Us" process – receiving and acting on all feedback**
- 6. Demonstrating service effectiveness**
- 7. People who support service users**
- 8. A well-led and managed service**
- 9. Excellent quality of the environment**
- 10. Services continuous improvement and development**

Quality Assurance Systems and Approaches

Internal Checks and Controls

The 10 methods we use to assure quality internally are:

1. Quality Reviews
2. Surveys
3. Front-Line Visits
4. Quality Controls
5. Policies and Procedures
6. Learning and Development
7. Tell Us
8. Safeguarding Procedures
9. Business Planning and Performance Management
10. Internal Serious Case Reviews

The remainder of this section will go into more detail on each of these methods, what they are, how they help us quality assure services, as well as which parts of the quality management model and quality standards they help us to assure.

Figure 7: Internal Methods for Quality Assurance

1. Quality Reviews

Quality Reviews are the primary method used internally by PSS to quality assure services. The review process is refined each year based on learning from the previous set of reviews.

How do they assure quality?

The process consists of a pre-assessment completed by the service manager, followed up by an on-site visit from the quality and compliance team. The visit consists of exploring each of the PSS Quality Standards following some key lines of enquiry, as well as file inspections and potentially meeting with service users and carers. Each of the key lines of enquiry is scored on a scale and it automatically calculates the 'rating' for the service. Any services which are rated as 'red' or 'amber' must produce action plans for improvement and will receive a follow up visit 6 months later for further quality conversations to assess progress.

The quality review process helps us to assess all ten PSS quality standards and all the elements within the quality management model.

2. Surveys

What people tell us about our services is one of the most important measures of quality that we have. The diagram on page 7 demonstrates different ways in which we engage specifically with service users, and one of these is our annual survey process.

How do they assure quality?

The survey process is being re-designed for 2016 onwards and we are reviewing the questions being asked and asking our staff as well as our Quality Reference Group, which includes service users, for their opinions on the changes. The questions will continue to capture whether our service users would recommend us to friends or family. However they will go into more detail on specific elements of quality, as well as the contribution PSS has made to their lives, for example – improving their health and wellbeing, or their quality of life overall. We will give service users the information needed to feed back more formally if they wish to using the 'Tell Us' process.

From 2016 onwards we are carrying out 4 surveys – one for service users, one for our Shared Lives Carers, one for our supporters (and volunteers) and a new one for our commissioners. Following the process, results will be cascaded to services along with any specific comments and they will be required to produce an action plan for improvement as well as developing a 'You Said, We Did' report demonstrating positive action from survey feedback.

The survey process helps us to assess Quality Standard 6 – 'Tell Us: receiving and acting on all feedback' and that we 'readily and regularly monitor the experiences of people using our services' from the Quality Management Model.

3. Front Line Visits

PSS Trustees, the Leadership Team, and Heads of Service are all required to visit frontline services to meet front line staff and service users.

How do they assure quality?

The visits are carried out using a structured “Quality Conversations Toolkit” to engage and provide a brief feedback report on their visit to the Director of Operations and quality management team. Any issues that are highlighted will be addressed and referred to the service manager for follow up and actioning.

Front Line Visits help us to assess Quality Standards 2,3,7,8,9 and 10. They also cover the full ‘review and monitor’ layer of the quality management model as well as the ‘leadership’ building block.

4. Quality Controls

Team Leaders and Managers as part of their role are required to maintain detailed records and quality checks for different areas of their services.

How do they assure quality?

One example would be file audits, which services often carry out on service user and shared lives carers files – ensuring that all paperwork is up to date and complete and highlights areas for improvement. These are captured on a template and will have actions and deadlines for improvement. They may also review case notes to ensure they are robust and professional. Another example would be medication sheets – ensuring these are signed off and that medication is counted as required to ensure that people are kept healthy and safe. Failure to complete may result in additional training or performance improvement development plans being put in place. Health and Safety weekly, monthly and annual checks are also important regarding the quality of the environment. These kinds of quality controls are carried out regularly and are also checked as part of quality reviews.

Quality controls help us to assess Quality Standards 2,3,4,8 and 9. They cover the Leadership, Culture and Systems building blocks in the quality management model.

5. Policies and Procedures

Ensuring that there are robust and current policies and procedures in place is essential, to enable staff to understand their role and the standards they are expected to adhere to and to keep themselves and service users safe.

How do they assure quality?

Up to date policies and procedure ensure that staff are up-to-date, that they reflect best practice and guidance and are in line with legislation and regulation. There is a clear process in place for updating policies, procedures and guidance. There is also a key performance indicator which is reported to the Board of Trustees on the number of policies that have been updated within timescale. When reviewing services we also check that managers and staff fully understand key policies and know where to find them.

Policies and Procedures will be in place for all of the 10 Quality Standard areas. They also cover the ‘policies’ building block in the quality management model.

6. Learning and Development

Ensuring that staff are qualified and trained to carry out their roles is fundamental to ensure that we provide effective and safe care. Therefore having mandatory training, minimum standards and support to learn and develop is crucial to delivering quality care and support – both on the front line and within central services.

How do they assure quality?

Each job description and person specification will outline the required qualifications needed for the job. All staff are recruited in line with our recruitment policy and any training needs or where someone is working towards a qualification will be taken into account. Mandatory training is required for all staff on 3 areas – PSS Induction, Safeguarding and Dignity at Work; however additional training is required for other staff to enable them to carry out their role effectively (e.g. medication, confidentiality, moving and handling). There is a key performance indicator on the number of staff qualified to carry out their roles which is reported through to the Board of Trustees. The Quality and Compliance Team will also do spot checks on the HR System for mandatory training as part of the quality review process, and explore how other training opportunities are identified and delivered. Feedback will be given to team managers as well as recommendations for action where required.

Training and Qualifications help us to assess Quality Standard 7 – People who support service users, as well as the building blocks of PSS People and Learning and Development from the Quality Management Model.

7. “Tell Us”

As well as proactive quality assurance, we believe that the best way to improve is to react when things don't go so well and to identify good quality from the compliments we receive. Having a clear feedback policy is essential and in PSS we have “Tell Us”. This is the umbrella term we use for capturing feedback, but is also the title of our complaints and compliments form.

How do they assure quality?

The “Tell Us” process gives all service users, carers, supporters, commissioners and any other stakeholder the opportunity to identify areas of concern, make complaints, or alternatively to compliment the service that they have received. These are then dealt with through the required process to a strict timescale and where there are any issues in the case of a concern or complaint, remedial action is taken. These are co-ordinated through the Quality and Compliance team, enabling us to identify any patterns emerging from services. Complaints, concerns and compliments are reported quarterly to the Board of Trustees for overview.

The “Tell Us” process helps us to assess Quality Standard 6 – ‘Tell Us: receiving and acting on all feedback’ and that we ‘readily and regularly monitor the experiences of people using our services’ from the Quality Management Model.

8. Safeguarding Procedures

Another measure of quality is the provision of safe care, and how well staff understand their role as regards safeguarding adults and children.

How do they assure quality?

The Safeguarding process enables all staff and shared lives carers to identify anything which compromises the safety and wellbeing of service users; this includes various types of active abuse (e.g. physical, financial) as well as passive forms of abuse (e.g. neglect). Having an effective process in place to report and act on safeguarding alerts enables the quality and compliance team to have the overview of the alerts that are coming through from services, helps us to spot any patterns, and the process also highlights any concerns over staff members or shared lives carers. The onus is on service managers to investigate safeguarding issues where appropriate, and to ensure that appropriate action is taken to rectify as well as prevent future recurrence.

The Safeguarding process helps us to assess Quality Standard 3: Providing safe care and protection from harm, and that we are delivering on the 'standards' and 'policies' building blocks as well as the core element of 'Safety' in the Quality Management Model.

9. Business Planning and Performance Management

Ensuring that service plans are in place and that team meetings and 1-2-1 meetings are taking place regularly are vital; as it ensures that key messages are cascaded, performance is managed appropriately, training needs are identified and that all staff know their role in delivering a quality service.

How do they assure quality?

Service plans being in place will link to the overarching objectives of PSS, and these in turn will be used by staff to complete their own individual plans. Therefore quality will be embedded throughout each elements of business planning from the organisational to the individual. Ensuring there is regular monitoring through team meetings and 1-2-1 meetings forms part of the quality review process, whereby a calendar and the minutes of team meetings are checked as well as the frequency of 1-2-1 meetings. Quality should be a standing item on the agendas for both. Where it has been identified that plans are missing or that meetings are not happening frequently, this will be brought to the service manager's attention for action.

Business Planning and Performance Management help us to assess Quality Standards 7, 8 and 10. It also helps us assess the building blocks of PSS People, Learning and Development, Culture and Leadership from the Quality Management Model as well as ensuring that we "cascade a full understanding of, and commitment to, quality to the front line".

10. Internal Serious Case Reviews

An internal serious case review would be carried out following serious service delivery failure, or a one-off critical incident.

How do they assure quality?

Serious Case Reviews will be commissioned by the CEO and reported on to the Board of Trustees. They will require a forensic examination of the issues identified within the service to pinpoint any failures in the system which led to the incident. By carrying out this detailed analysis, it will enable issues to be identified, reported, rectified and that organisational learning is captured and disseminated as part of the process. Services may be suspended for the duration of the service until the issues are addressed and the service is safe and of the required standard of quality again.

Serious Case Reviews help us to assess Quality Standard 3: Providing safe care and protection from harm, as well as the 'Standards', 'Safety' and 'Leadership' elements of the Quality Management Model.

External Checks and Controls

There are also a number of external bodies which provide feedback on the quality of our services. These include:

1. Care Quality Commission and Care and Social Services Inspectorate for Wales

2. Charity Commission

3. Commissioners and Service Funders

4. Internal and External Auditors

5. Health and Safety Executive

6. PSS Health and Safety Consultants

7. Fire Authority Inspections

8. Environmental Health Officer Inspections

These organisations provide, as a minimum, annual checks, inspections and audits relating to quality or they may require specific submissions (e.g. submission of Annual Report to Companies House). On completion of audits or inspections, the results will be shared with Leadership Team and presented to the relevant sub-committee and Board of Trustees and all required actions will be delegated and followed up.

Figure 8: External Bodies who Quality Assure us

Other External Quality Bodies

Social Care Commitment

We have voluntarily signed up to the Social Care Commitment in England and are required to complete an annual refresh of our plans to deliver on the social care commitment standards. This involves setting specific targets and self-assessing against these each year.

Investors in People

We have to internally review and be externally reviewed against Investment in People Standards

NICE and SCIE Guidelines

The National Institute for Health and Care Excellence provides social care, public health and clinical guidelines and quality standards on health and social care, which is based on the best available evidence and gives clear guidance on best practice and high-quality care. The Social Care Institute for Excellence fulfils a similar role but purely for social care. As part of our quality process, we will identify any such relevant guidelines or standards for services and suggest benchmarking against them and embedding recommendations into practice.

NHS Information Governance Toolkit

A requirement for any NHS or commissioned organisation to adhere to standards around information governance; this is assessed through self-completion of an annual toolkit.

Cyngor Gofal Cymru / Care Council for Wales

For our PSS services based in Wales, the Care Council for Wales exists to regulate the social care profession and ensure that the workforce is safe to practice and works to a high professional standard.

HOW is PSS accountable for Quality?

Reporting on quality is seen as an important way of quality assuring services, as it enables us to be open and transparent about what we do (transparency being a thread running through the whole quality management model) and being able to truly reflect and evaluate the quality of our services.

It also facilitates constructive challenge from staff and service users, as well as having the potential to generate new ideas and suggestions for improvement and change.

This section will describe 8 main ways in which we report on quality in order to be open about how we are performing, and enable staff and stakeholders to discuss, challenge and compliment the services that we provide.

- 
1. Quality Account
 2. Impact Reporting
 3. Key Performance Indicators
 4. Quarterly Board Reports
 5. Statutory Reports
 6. Quarterly Reports to Commissioners
 7. Internal Communications
 8. You Said, We Did

Figure 9: Methods of Reporting

1. Quality Account

The Quality Account is the annual detailed report that is produced for the Board of Trustees about quality within PSS. It is also shared with staff across PSS, and an abridged, easy-read version is also published on our website.

How does it make us accountable?

Producing an annual Quality Account fulfils two key purposes:

- It provides a report on all aspect of quality within PSS that is available to the Trustees and all staff.
- It is presented to the Board of Trustees who are given the opportunity to ask questions, it is available for staff to comment and a version is published on our website for the public to view.
- It also provides the basis for which the PSS quality improvement targets for the forthcoming year are set.

The Quality Account will be supplemented with other documents from 2016-17 onwards, including the PSS Engagement Toolkit which will set out best practice on engaging with our stakeholders, and the report on the Quality Review Findings for 2016/17 which summarises all the learning, best practice and general actions for improvement for PSS as a whole.

2. Impact Reporting - Telling and Evidencing the Story of Change

An important aspect of quality assurance moving forward is being able to evaluate the impact of the service in the broadest sense as regard the outcomes it has for those who are invested in it.

How does it make us accountable?

The Impact Report is available for service users, staff and commissioners and not only outlines what individual services, and PSS as a whole, are delivering – but also looks at the wider outcomes and social impact for commissioners, councils, the NHS, service users and other stakeholders. Where possible this will also include figures on potential cost savings or ‘return on investment’ and social return on investment.

3. Key Performance Indicators

PSS has a suite of 68 Key Performance Indicators (KPI's), the majority of which look at internal central services and how they are performing and delivering from a ‘corporate health’ perspective.

How does it make us accountable?

The KPI's cover the leadership of the organisation, our internal arrangements, our financial governance and our drive to improve. These are overseen by the sub-committees and the Board of Trustees and are presented quarterly where they are scrutinised and challenged. Each KPI is accompanied by a narrative and commentary on action for improvement where any are ‘off-track’.

4. Quarterly Board Reports

The audit and governance sub-committee and ultimately the Board of Trustees are provided with quarterly reports relating to quality within PSS; including a specific report on incidents, safeguarding, feedback and concerns/complaints.

How does it make us accountable?

Much as the KPI's give a broad overview of corporate health, the more detailed reports drill down into the figures and provide more in-depth analysis and commentary on quality issues. The sub-committee and Board of Trustees again can query the report in more depth when it is presented and request additional information or action to be taken.

5. Statutory Reports

As a private limited company, and as a registered charity, PSS has to provide an annual report (which implicitly references quality of services) to Companies House and the Charity Commission for England & Wales and additionally report serious incidents to them.

How does it make us accountable?

These reports are published on the organisations' websites, and the bodies will be able to review and query anything within the reports which could identify PSS as non-compliant. This is a further layer of scrutiny on top of our already rigorous governance processes.

6. Quarterly Reports to Commissioners

As part of most awards and grants; regular reporting to the commissioner or award making body is a condition of the contract. Services therefore usually have to submit regular reports to commissioners which detail the activities they have undertaken in line with their service specification. Commissioners will use these to determine if the specification is being met to the requisite cost and quality on which the tender was awarded.

How does it make us accountable?

Regular oversight from the organisations and bodies that commission our services ensures that we keep tight control of quality across our services. Reporting these frequently and being accountable for the funding coming into the PSS is one way that quality remains high on the agenda.

7. Internal Communications

To communicate with our staff, a variety of techniques are used. Staff surveys are one way of capturing information, and publishing information about service performance and quality issues enables us to disseminate information. This is usually done through regular blogs, on the intranet site 'Dottie', as well as from 2016 – a proposed 'performance roundup' feature in The Loop magazine which will focus on good news stories, examples of quality and some of the KPI's to help make staff aware of the quality issues being discussed at Board level. A new post from June 2016 - Head of Learning and Engagement - will develop this further.

How does it make us accountable?

As part of the 'transparency' thread – using internal communications to publicise performance and the work of the Board is a way of making Quality a regular and embedded part of the PSS Culture. It is also a way of 'demystifying' the Board of Trustees by showing all PSS People who they are, the kind of things that they do and what they look at to keep PSS on track with its strategic objectives.

8. You Said, We Did

The survey process which is carried out annually often results in feedback for services, which we disseminate to them along with their results. From 2016 onwards, services who receive feedback will be required to take this on board and produce 'you said, we did' type-feedback in whichever medium is most appropriate for their service.

How does it make us accountable?

This will demonstrate that we take feedback seriously and that surveys aren't tokenistic or just done because they're good practice. By showing what we have done as a result of the feedback that improvements are made based on what people tell us about the quality of our services, it makes clear that we value the voice of our service users, carers, supporters and commissioners.



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