**Ensuring Quality Questionnaire for Supported Accommodation Providers (v.1.1)**

**Declaration**

I am a supported living provider and can demonstrate if required that there is a separation of tenancy and support and care. If the circumstances change I will inform you and register with the correct local authority.

Yes  No

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_

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| **How do I fill it in?**  Some of the questions you must commit to by putting an X in the right box. For example:  Yes (double click on the box and select checked)  No  There are 13 questions with this symbol which need to be answered in **300** words  Committing to something is not simply ticking the yes. You must ensure that your organisation does what you have promised to do. You must check what you do currently and make changes if you have to. People who buy your service and the people who monitor you against these standards will check that you have done this. If you do not do what you have committed to, you will not be meeting the standards and will be removed from the lists of providers who do meet the standards.  **REMEMBER:** **If you are sending in examples of support plans and risk assessments that you must take out the person’s name. We should not be able to identify the person they are about.** |

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| There are 11 pieces of **evidence** which you will need to provide alongside this questionnaire. Please submit together and send to [ensuringquality@towerhamlets.gov.uk](mailto:ensuringquality@towerhamlets.gov.uk) | | |
|  | **Enclosed (Yes/No)** | **Comments:** |
| 1. Confirmation that you have attended borough Safeguarding training |  |  |
| 1. Business Continuity Plan – this should be a detailed plan intended to cope with the effects of an emergency or crisis. |  |  |
| 1. Complaints Policy |  |  |
| 1. Completed **and** anonymised Person Centred Support Plan (if relevant) |  |  |
| 1. DBS reference numbers and date of issue for each employee.  **Please present within a spreadsheet.** |  |  |
| 1. Employer Liability Insurance |  |  |
| 1. Public Liability Insurance |  |  |
| 1. Completed **and** anonymised Risk Assessment |  |  |
| 1. Safeguarding Policy/Statement |  |  |
| 1. Staff training record/matrix |  |  |
| 1. Safer Recruitment Record Sheet |  |  |

**NB if requested please be prepared to submit your Health and Safety materials, Equalities Policy and any other policies relevant to the standards.**

**N.B. the readers of this section will be people with support needs and their carer. Make sure you write this information for them.**

**All about us: Information for people who might buy your service**

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| Contact Information |
| Name Of Organisation: |

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| Registered Manager | | | | | | |
| Title: | Mr | | Mrs | Miss | Ms | Other |
| First Name(s): | |  | | | | |
| Surname: | |  | | | | |

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| Responsible person/Chief Exec/Owner name: | | | | | | |
| Title: | Mr | | Mrs | Miss | Ms | Other |
| First Name(s): | |  | | | | |
| Surname: | |  | | | | |
| Address: | | | | | | |
| Postcode: | | | | | | |
| Email: | | | | | | |
| Telephone: | | | | | | |
| Website: | | | | | | |
| Registration No.:  (Charities Commission/ Companies house/Other as applicable) | | | | | | |

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| **WHAT**  What is your basic service?  What are additional add-ons?  What exactly is included – for example transport, equipment, staffing?  **Respite**  Can you work with people on a short-term basis? |
| **COST**  per hour:  Hourly unit cost:  Weekly unit cost: |
| **WHY**  *(Why choose this organisation)* |
| **WHO**  *(Who the Activity is aimed at if relevant, for example client group, age ranges, languages catered for, accessibility)* |
| **WHEN**  *Are staffs on site?*  *Is it staffed overnight? Waking or sleeping cover?* |
| **HOW**  *to access this service*  *Initial contact details and the process that you follow to assess them*  *What the organisation needs the customer to do to attend (ie not be in need of personal care or medication or comply with code of conduct?)*  *How to feedback on the service and who is the person responsible for the feedback*  *As part of the move to skill people to live independently, how do you support the Service user to contact the landlord for housing matters?* |

**People who attend/receive the service are supported to achieve the**

**following outcomes.**

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| **NB if you tick any of the following boxes you must make sure that you look at the guidance and demonstrate your specialist knowledge in your answers** | | | | | | |
| Learning Disability | | Challenging Behaviour | | | Dementia | |
| The following has no additional guidance but it is helpful for people to know if you work with: | | | | | | |
| Physical Disabilities | Sensory Impairments | | Older People | Autism | | Mental Health |

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| **Do you working in an of the following London boroughs?** | | | | | |
| Barking & Dagenham | Havering | Redbridge | Newham | Tower Hamlets | Waltham Forest |

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| **STANDARD 1**  I have support that is right for me  I am at the centre of the service  I am part of the community  I am independent  I can make decisions about my support |

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| Q1 | 1. Personalisation gives people choice and control over their lives. A personalised service puts the person at the centre of the service supports the person to be part of the community promotes independence encourages the person to make decisions about their support, takes advantage of personal budgets and other measures to deliver what people want through personalisation.  How do you make sure people have choice and control? Please refer to all the points above. |

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| **STANDARD 2**  I am supported to reach what I want to achieve by using the service  The organisation knows what I want to achieve by going to the service  They support me to do this safely  We make sure it is happening |

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| Q2 | How do you understand and meet the individual outcomes of people who buy your services? |

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| **Evidence Required:**  Support Plan Templates |

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| Q3 | How do you find out what people want to achieve and what support they need to do so? |

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| **Evidence Required:**  Examples of Risk Assessments |

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| Q4 | How do you make it happen? |

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| **Evidence Required:**  Might include a support plan and risk assessment policy |

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| Q5 | Please supply success stories or example? |

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| **STANDARD 3**  I am supported to take risks and stay safe |

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| Q6 | How do you support people to take risks and stay safe? |
| Q7 | How do you empower people to raise issues with the landlord and manage tenancy related risks? |

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| **Evidence Required:** Service User Guide |

**Quality Standards the Organisation must meet to ensure the delivery of the individual outcomes**

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| **STANDARD 4**  I have all the information I need to understand the service and to make sure it is working well for me |

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| Q8 | How will you make sure information about your service is communicated in a way that people who buy your service understand? This includes information about costs, what is included, any rules, how to complain, how to stay safe? Specifically refer to how you actively support people to understand their tenancy agreement and your service level agreement. |

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| **Evidence Required:** This can be a Tenancy Agreement, A Service Level Agreement between the landlord and yourself as support provider which evidences regular communications between yourselves. |

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| Q9 | How will you support people to understand, manage and evidence their social care spending, for example, by providing Annual statements or Accounts |

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| **Evidence Required:** Complaints Policy |

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| **STANDARD 5**  The organisation changes and improves because it listens to what people say they want |

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| Q10 | How will you make sure that you listen to everyone (including anyone with communication support needs), make changes and let people know what you have changed? |
| Q11 | Every year we will expect you to submit evidence that you have done this. Do you commit to providing this?  Yes  No |

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| **STANDARD 6**  The organisation treats everyone as equally important and respects everyone’s individual needs |

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| Q12 | In light of Equalities Laws and your borough’s equality plans - do you commit to treating everybody fairly and as equally important?  Yes  No |
| Q13 | How will you ensure your organisation treats everyone as equally important and respects everyone’s individual needs? For example: Can everyone access your services? Cultural and religious needs? Communication needs? |

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| **STANDARD 7**  The organisation has staff and volunteers with the right qualities, skills and experience |

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| Q14 | People have told us that they want staff who care, listen, respect, empathise and don’t judge. Do you commit to showing these qualities?  Yes  No |
| Q15 | How will you make sure your staff and volunteers have the qualities that people who buy you service want? |
| Q16 | How do your management and recruitment procedures make sure your staff can safely deliver the service? |
| Q17 | How do you make sure that you (and your staff) continue to develop the knowledge and skills to deliver this service? |

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| **Evidence Required:** could include 7 Staff training records/plan. |

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| **STANDARD 8**  The organisation has everything in place to deliver a safe service |

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| Q17 | What do you do to make sure everyone who works at and uses your service is safe? |

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| **Evidence Required:**  confirmation that your organisation’s identified safeguarding lead has attended *borough* Safeguarding training |

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| Q18 | Do you know what your legal health and safety requirements are and do you commit to meeting them?  Yes  No |

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| **For Information:**  We expect the following documentation to be in place. You do not need to submit them with this questionnaire but may be asked at any time to show them to borough officers/potential purchasers.   * H&S risk assessment procedure * H&S inspections have been done and written down, including findings and * action taken * Fire safety procedures to be in place * H&S risk assessments and management plans have been done and * reviewed every year or if something happens * Incidents/accidents are reported to Care Manager and appropriate action * taken * Lone working risk assessment/policy if appropriate |

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| Q19 | Do you commit to meeting your legal health and safety requirements and sharing the above documentation and any other related documentation if requested?  Yes  No |
| Q20 | Do you commit to keeping the people who buy your service safe by Showing the people who buy your services that you follow the DBS guidance?  Yes  No |
| Q21 | How do you make sure that you (and your staff/volunteers) understand what abuse is how to stop it happening within your service and what to do if they find out abuse is happening both within and outside of the service? |

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| **Evidence Required:**  Confirmation that your organisational lead for Safeguarding has attended borough Safeguarding training. NB you must demonstrate in Q13 that all your staff have undertaken some sort of Safeguarding training.  Evidence 10 Safeguarding Policy. |

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| Q22 | Do you understand and work to the [London Multi-Agency Adult Safeguarding Policy & Procedures](file:///\\thpnas01\mydocuments\allison.rosenthal\My%20Documents\Ensuring%20Quality%20Project\EQ%20Web%20pages%20content\London%20Multi-Agency%20Adult%20Safeguarding%20Policy%20and%20Procedures%20–%20updated%20August%202016%20–%20LondonADASS.mht), your host borough’s safeguarding guidelines and agree to cooperate fully with any borough investigations?  Yes  No |
| Q22 | Do you commit to using our [Professional Boundaries Guidance](#Appendix6)?  Yes  No we already have a policy of our own |

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| **Evidence Required:**  Please provide a copy of your relevant insurance documents  Insurance documents demonstrating, 10 million minimum for public liability, 10 million for employers liability |

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| Q23 | Have you or your company been convicted of a criminal offence, or committed an act of grave misconduct relating to the conduct of your service?  Yes  No |
| Q24 | Have you or your company fulfilled your obligations relating to the payment of taxes and social security?  Yes  No |
| Q25 | Do any of the matters included in [Regulation 23 of the Public Contracts Regulations 2006](http://www.legislation.gov.uk/uksi/2006/5/regulation/23/made) apply to you?  Yes  No  NB please note that this will exclude you. Please see legal appendix. |
| Q26 | Please declare any potential conflicts of interest and how you have dealt with them? For example, are you or anyone connected to your organisation an employee/ex-employee/elected member of one of the boroughs? |
| Q27 | Is your organisation ready for when things go wrong which means you might struggle to deliver the service? |

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| **Evidence Required:**  Business Continuity Plan |

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| Q28 | Do you commit to meeting your obligations under the Data Protection Act 1998?  Yes  No |
| Q29 | Do you commit to working within [good practice standards of financial management](#FinancialManagement)?  Yes  No |
| Q30 | Do you commit to following guidance from the [Charity Commission](http://www.charitycommission.gov.uk/running-a-charity/money-and-accounts/handling-money-safely/) and/or [Companies House](http://www.companieshouse.gov.uk/about/gbhtml/gp2.shtml#ch6) as relevant to your organisation? If applicable, by what date each year will your submitted accounts be available for viewing?  Yes  Date:\_\_\_\_\_\_\_\_\_\_\_\_ No  N/A |
| Q31 | Has your service been decommissioned for reasons of quality in the past three years or have any of your managers or directors been involved with a service which has been decommissioned for reasons of quality in the past three years?  Yes  No  If yes please explain what happened and what you have done to make sure that this does not happen again? |
| Q32 | How do you check quality within your organisation? How do you make sure your support plans are delivered, policies are followed, contracts are kept to and the person who comes to your service is happy? |
| Q33 | Is there anything else you would like to share with us that you think we should know? |

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| **Legal Appendix**  In applying to have your service placed on the Ensuring Quality Framework, you agree that if you cease to meet the standards or concerns arise in respect of any risk you or your staff may pose to vulnerable adults or children, Ensuring Quality or any individual Council which is a member of Ensuring Quality may share this information with the other boroughs and any service users currently buying your service. Where possible we will give you an opportunity to respond to any concerns raised, but if those concerns are sufficiently serious, that notice may be given immediately, due to our safeguarding responsibilities. You will then be given an opportunity to respond or appeal the decision, and this will be adjudicated on. Until you have received confirmation that you have met our standards, or if you are subsequently removed from the Ensuring Quality Framework, you cannot use the Ensuring Quality mark, or make any statements which could be taken directly or indirectly to imply that you have achieved our standards. We will take legal action for any misleading use of the Ensuring Quality mark.  In the event that your organisation has not complied with questions 22, 23 and 24, the Council reserves the right to disqualify your organisation from the Ensuring Quality Framework.  The Council reserves the right to make amendments to the questions contained in this Ensuring Quality Questionnaire without notice and in the event you cannot comply with any such additional questions the Council reserves the right to disqualify you from the Ensuring Quality Framework.  For the avoidance of doubt, by your organisation completing the Ensuring Quality Questionnaire the Council will not be entering into any contract with your organisation.  For the avoidance of doubt, by your organisation completing the Ensuring Quality Questionnaire the Council will not guarantee any work to your organisation.  It is your organisation’s responsibility to ensure that any material changes to your organisation which impact upon the accuracy of the questions answered in this Ensuring Quality Questionnaire subsequent questions from time to time) are relayed to the Council as soon as possible and in the event that as a result of such changes your organisation becomes non-compliant then the Council reserves the right to disqualify you from the Ensuring Quality Framework.  If you are successful in your application to the Ensuring Quality Framework then you agree to abide by any further conditions in respect of using any websites or other materials or devices in connection with the Ensuring Quality Framework.  I confirm that I agree to these terms  Yes  No  **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**Please ensure you include the supporting documents with your submission and send to** [**ensuringquality@towerhamlets.gov.uk**](mailto:ensuringquality@towerhamlets.gov.uk)