

Safe

When we assess a quality statement for community health services and hospices we will usually look at evidence in the categories listed.

Learning culture

We have a proactive and positive culture of safety based on openness and honesty, in which concerns about safety are listened to, safety events are investigated and reported thoroughly, and lessons are learned to continually identify and embed good practices.

Evidence categories

- [people's experience of health and care services](#)
- [feedback from staff and leaders](#)
- [processes](#)

Safe systems, pathways and transitions

We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored and assured. We ensure continuity of care, including when people move between different services.

Evidence categories

- [people's experience of health and care services](#)
- [feedback from staff and leaders](#)
- [feedback from partners](#)
- [processes](#)

Safeguarding

We work with people to understand what being safe means to them as well as with our partners on the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect, and we make sure we share concerns quickly and appropriately.

Evidence categories

- [people's experience of health and care services](#)
- [feedback from staff and leaders](#)
- [processes](#)

Involving people to manage risks

We work with people to understand and manage risks by thinking holistically so that care meets their needs in a way that is safe and supportive and enables them to do the things that matter to them.

Evidence categories

- [people's experience of health and care services](#)
- [feedback from staff and leaders](#)

- [observation](#) (hospices)
- [processes](#)

Safe environments

We detect and control potential risks in the care environment and make sure that the equipment, facilities and technology support the delivery of safe care.

Evidence categories

- [people's experience of health and care services](#)
- [feedback from staff and leaders](#)
- [observation](#)
- [processes](#)

Safe and effective staffing

We make sure there are enough qualified, skilled and experienced people, who receive effective support, supervision and development and work together effectively to provide safe care that meets people's individual needs.

Evidence categories

- [people's experience of health and care services](#)
- [feedback from staff and leaders](#)
- [observation](#) (hospices and community health services for inpatients)
- [processes](#)

Infection prevention and control

We assess and manage the risk of infection, detect and control the risk of it spreading and share any concerns with appropriate agencies promptly.

Evidence categories

- [people's experience of health and care services](#)
- [feedback from staff and leaders](#)
- [observation](#)
- [processes](#)

Medicines optimisation

We make sure that medicines and treatments are safe and meet people's needs, capacities and preferences by enabling them to be involved in planning, including when changes happen.

Evidence categories

- [people's experience of health and care services](#)
- [feedback from staff and leaders](#)
- [observation](#)
- [processes](#)