

# Safe

## For all quality statements under safe

### Evidence categories

#### People's experience

- feedback from people collected by CQC, the provider, local community groups and other stakeholders
- give feedback on care

#### Feedback from staff and leaders

- feedback from staff collected by CQC and the provider
- feedback from leaders
- whistleblowing

## 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 and feedback from staff and leaders, also this specific category.

### Processes

- duty of candour records
- evidence of learning and improvement
- incident, near misses and events records

## 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 and feedback from staff and leaders, also these specific categories.

### Feedback from partners

- commissioners and other system partners
- health and care professionals working in or with the service

### Processes

- people's care records or clinical records
- records of referral, transfer and transition of care

## 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 and feedback from staff and leaders, also this specific category.

### Processes

- DoLS and Court of Protection (POA) records
- Mental Capacity Act records and training
- people's care records or clinical records
- safeguarding policy, records and training

## 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 and feedback from staff and leaders, also this specific category.

### Processes

- arrangements to
  - respond to emergencies
  - identify people in need of urgent medical treatment
- DoLS and Court of Protection (POA) records
- people's care records or clinical records
- records of restrictive practice

## 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 and feedback from staff and leaders, also this specific category.

### Processes

- business continuity plans (including in response to extreme weather events)
- environmental risk assessment
- equipment maintenance and calibration records
- health and safety risk assessments
- infection prevention and control audit and action plans

## 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 and feedback from staff and leaders, also this specific category.

### Processes

- appraisal and supervision records
- recruitment records
- staff vacancy and turnover rate
- staffing and staff skill mix records
- training in communication with people with a learning disability and autistic people
- training, development and competency records

## 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 and feedback from staff and leaders, also this specific category.

### Processes

- infection prevention and control policy
- minimising the risk of infection at the services (shared lives only)

# 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 and feedback from staff and leaders, also these specific categories.

### Observation

- equipment
- staff practice (including how they deliver care, staff culture and behaviours)
- the care environment

### Processes

- administering and dispensing medicines
- medicines audits and action plans
- medicines reviews
- PRN protocols
- people's care records or clinical records