42 Good Governance: Organisational Structure Policy

Purpose

This policy shows how Salford Care & Support Services Ltd and its Residential Care Home, The Laurels is organised and managed in line with the requirements of Regulation 17 Good Governance of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This regulation requires service providers to have methods to:

a. assess, monitor and improve the quality and safety of the services provided including the quality of people's experience in receiving the services

b. to assess, monitor and mitigate risks to the health, safety and welfare of people receiving care and others involved, which includes risks to staff

c. keep securely accurate records of the care and treatment provided to each person receiving care and of decisions taken about their care and treatment *in accordance with GDPR and Data Protection Regulations as outlined in company policy. (See Appendix 2)*

d. keep securely other records on staff and those required for the management of the service *in accordance with GDPR and Data Protection Regulations as outlined in company policy. (See Appendix 2)*

e. seek and act on feedback from people receiving care and others in order to be assessing and improving the services

f. ensure that the company's methods of governance and management remain effective.

The regulation also requires care providers to reply to CQC requests for information (for example, in response to concerns or queries about the service or to complete a Provider Information Return) 28 days from receiving the request.

The company is also mindful of the Quality Statements under Well-led, which with other domains form the CQC single assessment framework, and seeks to answer in its governance practices all questions relating to:

- shared direction and culture
- capable, compassionate and inclusive leaders
- freedom to speak up
- workforce diversity, equality and inclusion

- governance, management and sustainability
- partnerships and communities
- learning, improvement and innovation
- environmental sustainability — sustainable development.

Description of Service

The company is registered with the Care Quality Commission to deliver the following regulated activities.

- Accommodation for person who require nursing or personal care.

The company is registered to have the legal entity as:

- Salford Care & Support Services Ltd with the:
  - Nominated Individual as: *Robert Baillie*
  - Registered Manager as: *Fiona Langton*

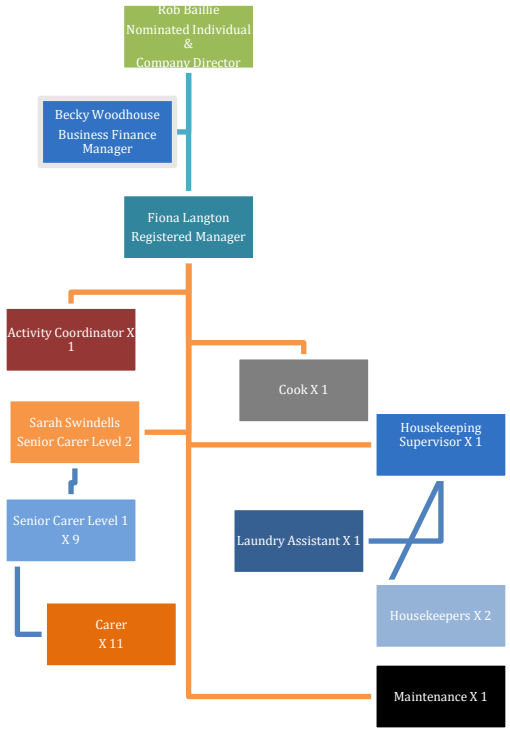
The company operates The Laurels as a care home without nursing to older people as defined within the Statement of Purpose

Organisation and Management Overview

The company operates within the following structure.

2.0 Organisation & Staffing Operating Structure:

Salford Care & Support



How the Company Provides "Good Governance"

The company has a suite of polices that show in detail its compliance with Regulation 17 which includes

Quality Assurance and Management

Responding to the Experiences of People Receiving Care

Complaints and Compliments

Audit planning forms

Audit tools

Questionnaires and survey forms

Complaints forms

Business planning tools

Safeguarding People Receiving Care from Abuse and Harm

Mental Capacity, Human Rights and Deprivation of Liberty

Care / Clinical Governance

Health and Safety

Infection Prevention and Control (including for Covid-19)

Medication Administration and Management (and additional policies)

Risk Assessment and Management for People Receiving Care

Risk assessment and management forms (related to different risk areas to be Assessed)

Critical incident reporting and reviewing forms

Medication audit forms

Records and Record Keeping

People Who Use Services' Access to Records

/Information Governance Under the GDPR

Care records auditing forms

Statutory Notifications

Working with Other Providers and Agencies

Monitoring and auditing

Appropriate and delegated staff who are trained and qualified to do so will carry out continuous checks on:

- care practices and recording
- catering arrangements
- administration of medicines
- use of equipment and devices used in the delivery of care
- checking of location premises for health, safety and security, including fire safety
- checking of infection control and hygiene measures (including for Covid-19)

- current safeguarding and complaints' issues, including any alerts to the local safeguarding authority
- checks on staffing availability and performance
- continuity of care: travel and care time.

There is/will be a rolling schedule of audits on a 1–3 month basis to carry out full checks on the above areas together with:

- risk assessments and control measures, including mental capacity issues
- staffing complements, staff supervision and training
- all health and safety issues
- infection prevention and control issues.

Our Audit Timetable can be viewed in Appendix 1

There is/will be at least an annual self-evaluation of the service's performance against each of the five Key Questions and Quality Statements using suitable professional tools, which include obtaining systematic feedback from people who use our services and external stakeholders who may be friends, family representatives, external professionals etc..

Signed:	R Baillie
Date:	04/11/24
Review date:	03/11/25

Appendix 1

Salford Care & Support

Holly Court GOVERNANCE FRAMEWORK & AUDIT TIMETABLE

Audit	Role Responsible for completion	Role Responsible for completion	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	April	May
1a. Premises														
1b. Internal H&S														
2. Infection Prevention & Control (3 monthly)														
2a. Hand Hygiene (Individual copies to be held with supervision records)														
3. Full Medication														
4. Skin Integrity/ Pressure Areas														
5. Care Plan 20%														
6. Kitchen														
7. Activity														
8. Dining Experience														
9. HR - Staff Files														
10. Monthly Accidents														
11. Resident Survey														
12. Relative Survey (To add feedback here)														
13. Dignity														
14. Resident of the Day														
15. Dementia Friendly Checklist														
16. Training Matrix														
17. Complaints Log														
18. CQC Notifications Log														
19. Safeguarding Log														
20. DoLS Tracker														
21. Probation, Supervision & Appraisal Tracker														
22. Fire Drill Log														
23. Service Improvement Plan (SIP)														
24. Laundry														
25. Maintenance Overview														
26. Night Visit Report														
27. Mattress														
28. Data Security														
29. Use of Bed Rails														
30. Nurse Call Bell Response Times														
31. Weight Monitoring														
31. Compliance FFF & E														

Appendix 2

26 Data Protection and Compliance with the General Data Protection Regulation Policy

Aim and Scope of Policy

The policy, which is in line with UK data protection laws, shows how the company (Salford Care & Support Services Ltd) complies with the data protection requirements found in Regulation 17: "Good Governance", of the Health and Social Care Act (Regulated Activities) Regulations 2014.

To comply with these regulations Salford Care & Support Services Ltd must have good governance of record keeping resulting in records that are comprehensively fit for purpose and securely maintained.

The company recognises that it must keep full, accurate, up-to-date records on people receiving care, staff and other aspects concerning the running of the service in line with data protection, confidentiality, secure storage and authorised access policies and procedures.

This company also understands that all records required for the protection of people receiving care and for the effective and efficient running of the company should be collected, maintained and kept according to the Data Protection Act 2018 and the General Data Protection Regulation (GDPR).

This data protection policy applies to all manual and digital records kept by the service in relation to people receiving care, including those involved with them, whose personal data might be found on their records. This includes all staff and any third parties (agencies and professionals) with whom anyone's personal data information held by the service might have to be disclosed or shared.

The policy is used with other relevant record-keeping and information governance policies.

Policy Statement

The company recognises it must keep all records required for the protection and wellbeing of people receiving care, and those for the effective and efficient running of the company such as staff records to comply currently with the Data Protection Act 2018 and the General Data Protection Regulation (GDPR), which came into force in May 2018.

Salford Care & Support

In line with its registration under the Data Protection Act, and to comply with GDPR, the service understands that it will be accountable for the processing, management and regulation, and storage and retention of all personal data held in the form of manual records and on computers.

This means that all personal data obtained and held by the company to carry out its activities as a registered company must:

g. have been obtained fairly and lawfully

h. held for specified and lawful purposes as an organisation that is carrying out a public duty

i. processed in recognition of persons' data protection rights, which are described in GDPR in terms of the right:

    a. to be informed

    b. to have access

    c. for the information to be accurate and for any inaccuracies to be corrected

    d. to have information deleted (eg if inaccurate or inappropriately included)

    e. to restrict the processing of the data to keep it fit for its purpose only

    f. to have the information sent elsewhere as requested or consented to (eg in any transfer situation)

    g. to object to the inclusion of any information (eg if considered to be irrelevant)

    h. to regulate any automated decision-making and profiling of one's personal data

j. be adequate, relevant and not excessive in relation to the purpose for which it is being used

k. be kept accurate and up to date, using whatever recording means are used or agreed (eg manual or electronic)

l. not be kept for longer than is necessary for its given purpose (eg in line with agreed retention protocols for each type of record)

m. have appropriate safeguards against unauthorised use, loss or damage with clear procedures for investigating any breaches of the data security

n. comply with the relevant GDPR procedures for international transferring of personal data.

In line with the Data Protection Act 2018 and the GDPR, the company has a data controller and a nominated data protection officer, who is responsible for the safekeeping and safeguarding of all personal data held by the company.

Procedures

The service has taken the following steps to protect everyone's personal data, which it holds or to which it has access so that it complies with current data protection laws and GDPR.

- It appoints or employs staff with specific responsibilities for:

    a. the processing and controlling of data (data controller)

    b. the comprehensive reviewing and auditing of its data protection systems and procedures (data protection manager or auditor)

    c. overviewing the effectiveness and integrity of all the data that must be protected (data protection officer).

    There are clear lines of responsibility and accountability for these different roles.

    Note:

    How these roles and data protect functions are organised and distributed in an organisation will vary, but it is important to specify who is responsible for what.

- It provides information to people who use services and others involved in their care on their data protection rights, national data opt-out policy, how it uses their personal data and how it protects it. The information includes the actions people who use services and staff can take if they think that their data has been compromised in any way (eg through the complaints procedure or grievance procedure in the case of staff).

- It provides its staff with information and training to make them aware of the importance of protecting people's personal data, to teach them how to do this, and to understand how to treat information confidentially.

- It can account for all personal data it holds, where it comes from, and who it is and might be shared with.

- It carries out risk assessments as part of its reviewing activities to identify any vulnerabilities in its personal data handling and processing, and to take measures to reduce the risks of mishandling and potential breaches of data security. The procedure includes an assessment of the impact of both use and potential misuse of personal data in and by the service.

- It recognises the importance of seeking individuals' consent for obtaining, recording, using, sharing, storing and retaining their personal data, and regularly reviews its procedures for doing so, including the audit trails that are needed and are followed for all consent decisions.
- It has policies and procedures for enabling people who use services and/or staff to have access to their personal information, and for the making of subject access requests that are in line with GDPR.
- It has the appropriate mechanisms for detecting, reporting and investigating suspected or actual personal data breaches, including security breaches. It is aware of its duty to report significant breaches that cause significant harm to the affected individuals to the Information Commissioner, and is aware of the possible consequences (eg fine).
- [Where applicable.] If the organisation holds personal data on any child under the age of 16, it informs the child how their data is being protected in ways that the child can understand and has procedures in place to obtain consent of the responsible parent for obtaining and using the child's data.

Compliance With Data Protection Law and the GDPR After the End of Covid-19 Restrictions

The company has followed the advice and guidance of the Information Commissioner's Office during the Covid-19 restrictions. Since these have been lifted the company will continue to follow ICO updated advice to the effect.

- It has reviewed all extra personal information collected during the pandemic for its current lawfulness, purpose and usefulness and taken steps to dispose anything that is no longer needed.
- In doing so the company follows current government guidance on what information is still required or might need to be shared on public health grounds.
- It will continue to submit data to the DHSC Capacity Tracker as required by the provisions of the Health and Social Care Act 2022, which requires information on the vaccination status of care staff.
- The company understands that this and any other information that qualifies as personal information can only be obtained and submitted with each person's full consent.

- The company recognises that with any such requests for information it must only provide it if there is a lawful and compelling reason for doing so. It will only provide this after it has processed the information fairly.

National Data Opt-Out Policy

All regulated social companys in England need to comply with the national data opt-out policy by 31 July 2022.

Introduced by the National Data Guardian in the *Review of Data Security, Consent and Opt-Outs* (2018), the national data opt-out provides everyone with the ability to stop health and adult social care organisations sharing confidential patient information for reasons other than direct care and treatment, such as research or planning.

National data opt-out applies where a person is receiving social care provided, arranged or funded, in part or whole, by Local Authorities or the NHS in England. This does not affect individual care provision, where data processing is legally required, the individual has consented to processing or data has been appropriately anonymised.

It only applies when Regulation 5 of the Health Service (Control of Patient Information) Regulations 2002 ("Regulation 5 support") is utilised on a legal basis to process confidential patient information where processing would otherwise be a breach of confidentiality.

The term "confidential patient information" is a specific legal term which applies to information about the health of a person who uses services or social care that can identify them.

Training

New staff must read and understand the policies on data protection and confidentiality as part of their induction.

All staff receive training covering basic information about confidentiality, data protection and access to records.

Training in the correct method for entering information in an individual's records is given to all care staff.

The nominated data controller/auditors/protection officers for the company are trained appropriately in their roles under GDPR.

All staff who need to use the computer system are trained to protect individual's private data, to ensure data security, and to understand the consequences to them as individuals

and the organisation of any potential lapses and breaches of the service's policies and procedures.

Review

Signed:	R Baillie
Date:	04/11/24
Review date:	03/11/25