

# FACTFILE: GCE HEALTH & SOCIAL CARE

## A2 3: PROVIDING SERVICES



### Quality Assurance

#### Students should be able to:

- discuss the role of codes of practice or conduct in guiding health and social care workers, for example those provided by Northern Ireland Social Care Council (NISCC) and Nursing and Midwifery Council (NMC);
- demonstrate knowledge and understanding of other quality assurance mechanisms including:
  - feedback from service users and families such as surveys and complaints, including the role of the Patient and Client Council (PCC); and
  - inspections conducted by the Regulation and Quality Improvement Authority (RQIA);
- demonstrate knowledge and understanding of the regulatory role of the:
  - Northern Ireland Social Care Council (NISCC);
  - General Medical Council (GMC); and
  - Nursing and Midwifery Council (NMC).



### Course Content

Codes of practice for health and social care staff set out very clearly the way in which health and social care practitioners should conduct themselves. The codes of practice are written to regulate and standardise practice and they enable the general public to have a clear understanding of the behaviour and attitudes that they should expect from staff providing care for them or for members of their family. Codes of practice should mean that care provided is safe and compassionate. Staff who do not adhere to their code of practice can be disciplined and this may mean they lose their registration to practise and their job. It is important that students understand that simply having a code of practice does not guarantee quality care is provided. There are numerous incidences of health and social care staff being disciplined for failing

to live up to the standards set out in their code of practice.

#### Activity 1

(a) In groups of four, select one of the following staff groups and create your own code of conduct/practice, which contains at least six key rules around behavior and practice:

- Nurses.
- Social workers.
- Social care workers.

Write out your code in bullet points as a set of instructions that you think your selected staff group should follow when working with service

users. Compare your code to what others in your class group have come up with and discuss the similarities.

(b) Now, log on to the following websites and download:

- the code of conduct for nurses and midwives; <https://www.nmc.org.uk/standards/code/>
- the standards of conduct and practice for social workers; [http://niscc.info/storage/resources/web\\_optimised\\_91740\\_niscc\\_standards\\_of\\_conduct\\_and\\_practice\\_bluepurple.pdf](http://niscc.info/storage/resources/web_optimised_91740_niscc_standards_of_conduct_and_practice_bluepurple.pdf)
- the standards of conduct and practice for social care workers; [http://niscc.info/storage/resources/web\\_optimised\\_91739\\_niscc\\_social\\_care\\_workers\\_book\\_navy\\_pink.pdf](http://niscc.info/storage/resources/web_optimised_91739_niscc_social_care_workers_book_navy_pink.pdf)

Look through all three codes and discuss the similarities. Were the codes you designed similar?

### What is meant by quality assurance mechanisms?

Measuring the quality of health and social care services is important because it tells us how the services are performing and leads to improved care. Quality assurance mechanisms are ways of assessing performance and determining standards. They use data to evaluate the performance of health and care providers against recognised quality standards. Quality assurance mechanisms can take many forms including feedback from service users and their families, monitoring complaints and outcomes of inspections.

### Feedback from service users and families

Feedback from service users and their families can raise quality as it can identify areas that are not up to the standard expected. If management and staff take on board this feedback then improvements in quality should be the result. For example, if service users and/or their families indicate problems with cleanliness in an environment as a result of feedback from a questionnaire then measures should be taken to deal with this issue. Feedback is achieved through the use of surveys whereby service users and/or families can answer questions honestly and anonymously regarding the care they experience.

### Complaints

Monitoring any complaints received can help improve the quality of care; as all staff should know a complaints policy is in place and would be less likely, for example, to provide care that is sub-standard. Having a complaints policy also

empowers service users and their families as they know they have the right to complain if they feel their needs are not being properly met or if the standard of care they are receiving is not up to the standard expected. Therefore, providing service users with the opportunity to express their views may indeed help to raise the quality of care provision.

Information on the quality of service provision can also be provided through the **Patient and Client Council (PCC)**. The PCC was established in 2009 and provides an independent voice on health and social care issues and on the experiences of service users, carers and communities. The PCC is motivated to improve the health and social care service provision through partnership between the public and the health and social care organisations that provide the services. They listen and act on the views of service users and provide direct support to those who wish to make a formal complaint relating to health and social care. Visit the PCC website to find out more about how they can help to ensure quality in the delivery of health and social care services:

<http://www.patientclientcouncil.hscni.net/>

### Inspections

Inspections are designed to help raise the standard of care by focusing service providers on the level of care they should be providing. Inspections are conducted by the Regulation and Quality Improvement Authority (RQIA) - You can read more about them later – and cover all aspects of provision including cleanliness, the patient experience and waiting times etc. Inspection reports inform service users and their families how well a service is providing care as well as showing what needs to be improved. Inspection reports are available for the public to read and these reports can influence a service user quite considerably – they may decide to go somewhere else if an inspection report is not particularly good and so the organisation could suffer financially. Therefore standards of care provision are likely to be influenced by inspections.

It is important to note that the indicators of quality identified above are not fool proof in terms of measuring quality. For example, the number of complaints received by a Trust in any one year may not be a true reflection of the actual number of people who were dissatisfied, as some people may not complain. Feedback from service users may also not be entirely accurate as some may say what they think staff want to hear and this might not be a true reflection of their experience of care.

## Activity 2

- (a) Design a leaflet for distribution in your local community which details the role and function of the Patient and Client Council (PCC).
- (b) Explain two advantages for service users of the following quality assurance mechanisms in health and social care:
  - feedback from service user and their family; and
  - monitoring complaints.

### What is the RQIA and how does it contribute to quality assurance in health and social care?

The Regulation and Quality Improvement Authority (RQIA) was established under The Health and Personal Social Services (Quality, Improvement and Regulation) (Northern Ireland) Order 2003. It is an independent body responsible for monitoring and inspecting the availability and quality of health and social care services in Northern Ireland, and encouraging improvements in the quality of those services.

The RQIA is responsible for registering and inspecting a wide range of health and social care services. Inspections are based on nationally agreed minimum care standards that will ensure that both the public and the service providers know what quality of service is expected. Inspectors from the RQIA visit nursing and residential care homes and children's homes to examine all aspects of the care provided. They aim to guarantee the comfort and dignity of those using the facilities, and ensure public confidence in the health and social care and early years services provided in Northern Ireland. You can find out more information about the RQIA by visiting their website:

<https://www.rqia.org.uk/>

## Activity 3

- (a) Discuss four ways the RQIA contributes to improving the quality of services provided in health and social care settings.
- (b) Working in groups, draw up a list of areas an inspection in a nursing home for elderly service users would be likely to cover and then find a live inspection report from the RQIA website and note the areas inspected.

## Other Regulatory Organisations

The Northern Ireland Social Care Council (NISCC), which was established in 2001, is responsible for the standards of practice of social workers and social care workers in Northern Ireland. The General Medical Council (GMC) is also a regulatory body with responsibility for regulating the practice of doctors in the UK. The GMC determines standards of medical practice for students and doctors and takes action when these standards aren't met. The Nursing and Midwifery Council (NMC) meanwhile is responsible for standards of practice for nurses and midwives across the UK.

These councils regulate practice by determining the standards set out in the codes of conduct and practice for their respective staff. In order to carry out their function effectively, they maintain a register that includes the names of all those licensed to practice and each registrant's particular qualifications. The practice of staff must reflect the standards set out in their code and if it doesn't their regulatory body may be informed and a hearing will be arranged. The regulatory body will use the registrant's code of practice to judge if the registrant has deviated in any way from the standards expected and will then decide how they should be disciplined for any breach. The outcome of a hearing may mean that a registrant is placed on a period of probation so their professional behaviour can be monitored, or it may be that a decision is made to remove the registrant from the register so he or she is no longer allowed to practice. Decisions made at hearings depend on the details of the case and each case is unique.

The regulatory bodies are therefore responsible for ensuring that standards of conduct and practice reflect the code of practice and so the service user receives quality care.

Try the activity below to develop your knowledge and understanding of the role and function of these regulatory bodies.

## Activity 4

- (a) Look for stories in the local newspapers or online about health and social care staff who have been disciplined. These can be found on the websites of each regulatory body – discuss what aspects of their code of practice the disciplined staff didn't adhere to.

In groups create your own case studies, or

visit one of the regulatory body websites and find a real case study where a nurse, a social worker, a social care worker or a doctor has done something which directly contravenes their code. Then pass your case study to another group in the class who should take on the role of the regulator and see if they can detect the wrong doing by using the relevant code of conduct for that worker. This will help you to appreciate how codes work and why it is important for health and social care practice to

- be properly regulated.
- (b) Discuss four ways codes of practice can contribute to the provision of quality care for service users. **Top tip:** use examples from the nurses code to help you to explain the benefits of a code of practice