Clinical and care governance frameworks across HSCIP 4

Ensure safeguarding

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Implement our clincal care governance framework

Staff support, development, training, OD, supervision and peer review 5

Develop agreed eligibility, thresholds & criteria for service access/care pathways 6

Use tools, processes, codes of practice, evidence, performance management, quality assurance to be a learning organisation 7

Agreed, appropriate, consistent approach to mapping, assessment, commissioning & monitoring of commissioned health & social care services 8

Single point of contact, centre for social work & multiagency safeguarding 9

Individual case management, Care Programme approach, guardians 10

Awareness raising/ communications campaigns regarding harm 11

Information/data is accurate provided on time, shared appropriately and highlights all concerns/risks 12

All stakeholders design/redesign services based on need 13

Advocacy for those identified as vulnerable. Crisis support. 14

Health and care providers/ patients and carers are supported to, and speak up when they see compromising practice [whilstleblowing policy] 15

Single shared assessment & review empowers individuals to manage risk effectively 16

Use technology and systems to improve quality, safety & care 17

Internal & external scrutiny of policies, procedures, commissioned & multi-agency services, audit regulated services and improvement responses 18

Review, impact assess, monitor and evaluate services 19

Maximise links and contributions of wider partners 20

Short-term outputs/outcomes Interim outcomes

HISCIP has robust governance, open leadership, a learning culture 21

Hi quality, professional, 'evidence based' and ethical practice is the norm across the partnership 22

Improvement processes are increasingly embedded in practice 23

Risk identification, management are embedded in practice 24

Unacceptable practice/ harm is detected quickly & managed & future risks mitigated/managed effectively 25

Those vulnerable &/or experiencing harm/ in crisis gain access to appropriate services/ pathways that will improve their safety & wellbeing/protect them 26

Appropriate interventions are in place to protect/prevent harm 27

Communities trust that systems are in place to identify, report, intervene & where possible prevent harm 28

There is collective & individual responsibility for negative outcomes associated with poor practice 29

People providing & receiving services are enabled to infleunce/improve services 30

Services are compliant with national care/clinical standards 31

Quality, safety & dignity are accepted as the responsibility of all staff 32

Everyone is protected and has their human rights & dignity are respected 33

Services are safe & risks minimised 34

Staff & communities have influenced the design/redesign of new/existing services to ensure quality & safety 35

Everyone identified as at risk of harm feels safe, secure, supported and protected 36

Service users feel /are supported & where appropriate can plan ahead and manage risks 37

Commissioned services comply with minimum standards, policies and procedures 38

Quality & safety is strengthened within services provided within the community 39

Service quality improves 40

Reduced exposure to all forms of exploitation & harm 41

People are safe from harm, have positive experiences of servicies and have their dignity respected 42

People are able to live out their lives independently and at home or in a homely setting 43

Throughout their lives people are able to look after, improve or maintain their own health & wellbeing 44

Reduced inequalities in access, uptake and outcomes for opportunities and services 45

Services are co-designed/ produced integrated, effective, efficient, localitybased, tailored, sustainable & improve/ maintain the quality of life/ of service users 46

Shift in the balance of service use, care & resources in favour of preventative, community based services & assets 47

Staff & volunteers are motivated, confident, competent & have capacity to deliver safe, effective self mangement/support/ services 48

Everyone lives in good health for longer and participates as citizens 49

Longterm outcomes

More inclusive & resilient communities 50

High quality, flexible, inclusive services/assets used by the right people at the right time 51

Key

Main outcome

National outcomes