Medicare People

LIVE-IN CARE

Quality Assurance Policy and Procedure

Policy Title	Quality Assurance Policy and Procedure
Organisation	Medicare People Limited
Service Type	Live-In Care Services
Policy Owner	Registered Manager
Version	1.0
Date Created	07/07/2026
Review Date	Annually

1. PURPOSE

Medicare People is committed to delivering safe, effective, caring, responsive, and well-led live-in care services that consistently meet the needs and expectations of the people we support.

The purpose of this Quality Assurance Policy and Procedure is to establish a structured approach to monitoring, evaluating, and continuously improving the quality, safety, effectiveness, and compliance of our services.

We recognise that quality assurance is an ongoing process that ensures positive outcomes for people receiving care, supports regulatory compliance, and promotes a culture of continuous improvement.

2. Scope

This policy applies to:

- All employees, workers, agency staff, and contractors.
- All aspects of service delivery.
- Individuals receiving care and support.
- Managers, Coordinators, Assessors, and Live-In Carers.
- Quality monitoring, auditing, governance, and service improvement activities.

The policy covers care delivery, safeguarding, medication support, care planning, recruitment, training, complaints management, health and safety, and regulatory compliance.

3. Definitions

Quality Assurance	Quality assurance is the systematic process of monitoring, reviewing, and improving services to ensure high standards of care are achieved and maintained.
Quality Improvement	Quality improvement refers to planned actions taken to enhance service quality, improve outcomes, reduce risks, and address identified issues.
Audit	A formal review of systems, processes, records, and outcomes to assess compliance and identify opportunities for improvement.
Governance	The framework through which Medicare People directs, manages, monitors, and improves its services.
Continuous Improvement	The ongoing process of reviewing performance, learning from experiences, and implementing improvements.

4. Policy Statement

Medicare People is committed to:

- Delivering high-quality, person-centred live-in care.
- Complying with all relevant legislation and regulatory requirements.
- Continuously monitoring and improving our services.
- Seeking feedback from people receiving care, relatives, staff, and professionals.
- Learning from complaints, incidents, compliments, safeguarding concerns, and audits.
- Promoting openness, accountability, and transparency.
- Identifying and managing risks effectively.
- Ensuring lessons learned result in measurable improvements.
- Maintaining a culture of continuous learning and development.

Quality assurance activities will be embedded throughout all aspects of service delivery.

5. Roles and Responsibilities

Registered Manager

The Registered Manager is responsible for:

- Overseeing the quality assurance framework.
- Monitoring service performance.
- Conducting and reviewing audits.
- Implementing service improvement plans.
- Managing complaints and incidents.
- Ensuring compliance with regulatory requirements.

- Reporting quality outcomes to senior management where applicable.

Care Coordinators and Assessors

Care Coordinators and Assessors are responsible for:

- Monitoring care quality.
- Reviewing care plans and risk assessments.
- Responding to concerns identified through monitoring activities.
- Supporting continuous improvement initiatives.
- Escalating quality concerns to the Registered Manager.

Live-In Carers

Live-In Carers are responsible for:

- Providing care in accordance with policies and care plans.
- Reporting incidents, concerns, and risks.
- Participating in supervision and quality reviews.
- Contributing suggestions for service improvement.
- Maintaining accurate care records.

All Employees

All employees have a responsibility to:

- Promote quality and safety.
- Cooperate with audits and investigations.
- Report concerns promptly.
- Participate in training and development.
- Support continuous improvement.

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6. Procedure

6.1 Quality Monitoring Framework

Medicare People will operate a structured quality monitoring system that includes:

- Internal audits.
- Care record reviews.
- Spot checks.
- Service user feedback.
- Staff supervision.
- Competency assessments.
- Complaints analysis.
- Incident analysis.
- Safeguarding reviews.

- Training compliance monitoring.

Information gathered will be used to evaluate service performance and identify improvement opportunities.

6.2 Care Plan Reviews

Care plans and risk assessments will be reviewed:

- At regular intervals.
- Following changes in needs.
- Following incidents or concerns.
- Following hospital admissions or discharges.
- At the request of the individual or their representative.

Reviews will ensure care remains safe, effective, and person-centred.

6.3 Audits

The Registered Manager will conduct audits including, but not limited to:

- **Care Planning Audits -** To ensure care plans are accurate, current, and person-centred.
- **Medication Audits** - To ensure safe medication management and appropriate documentation.
- **Staff File Audits** - To ensure recruitment and employment records remain compliant.
- **Training Audits** - To monitor completion of mandatory and specialist training.
- **Health and Safety Audits** - To monitor environmental risks and safe working practices.
- **Policy Reviews** - To ensure policies remain current and compliant with legislation and best practice.

Audit findings will be documented and reviewed.

6.4 Service User Feedback

Feedback will be actively sought from:

- People receiving care.
- Family members.
- Representatives.
- Advocates.
- Healthcare professionals.
- Commissioners where applicable.

Methods may include:

- Surveys.
- Telephone reviews.
- Care reviews.
- Quality assurance visits.
- Compliments and complaints.
- Informal discussions.

Feedback will be analysed and used to improve services.

6.5 Complaints and Compliments

Complaints and compliments provide valuable information regarding service performance.

All complaints and compliments will be:

- Recorded.
- Reviewed.
- Investigated where appropriate.
- Analysed for trends and themes.

Learning outcomes will be incorporated into improvement plans and staff development activities.

6.6 Incident and Safeguarding Reviews

All incidents, accidents, near misses, and safeguarding concerns will be reviewed to identify:

- Contributing factors.
- Root causes.
- Learning opportunities.
- Preventative measures.

Where required, corrective actions will be implemented and monitored.

6.7 Staff Supervision and Competency Monitoring

Employees will receive regular:

- Supervision.
- Observations.
- Spot checks.
- Competency assessments.
- Appraisals.

These activities will help ensure employees maintain the skills, knowledge, and behaviours necessary to provide safe and effective care.

6.8 Service Improvement Planning

Where quality concerns or improvement opportunities are identified, an improvement plan will be developed.

Improvement plans should include:

- The issue identified.
- Required actions.
- Responsible individuals.
- Target completion dates.
- Review arrangements.

Progress will be monitored until actions are completed.

6.9 Learning and Continuous Improvement

Medicare People will learn from:

- Complaints.
- Compliments.
- Audits.
- Safeguarding concerns.
- Incidents.
- Staff feedback.
- Service user feedback.
- CQC inspections.
- Best practice guidance.

Lessons learned will be shared through:

- Team meetings.
- Supervision sessions.
- Training.
- Policy updates.
- Service improvement initiatives.

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7. Records and Documentation

The following records will be maintained:

- Audit reports.
- Care plan reviews.
- Quality monitoring reports.
- Complaints and compliments records.
- Incident and safeguarding records.
- Supervision records.
- Training records.
- Action plans.
- Service improvement plans.
- Feedback surveys.

Records will be stored securely and retained in accordance with the organisation's Data Protection and Records Management policies.

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8. Training and Competency

All relevant employees will receive training and guidance on:

- Quality assurance processes.

- Person-centred care.
- Record keeping.
- Risk management.
- Incident reporting.
- Complaints management.
- Safeguarding.
- Continuous improvement methodologies.

Competency will be monitored through supervision, observation, audits, and appraisal processes.

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9. Monitoring and Governance

The Registered Manager will oversee the Quality Assurance Framework through:

- Monthly audit reviews.
- Quarterly quality reviews.
- Analysis of trends and performance indicators.
- Review of complaints and safeguarding activity.
- Review of staff performance data.
- Review of service user feedback.
- Monitoring completion of improvement actions.

Key performance indicators may include:

- Complaints received.
- Complaints resolved within target timescales.
- Care plan review compliance.
- Training compliance.
- Safeguarding incidents.
- Medication errors.
- Staff supervision compliance.
- Service user satisfaction levels.

Quality findings and improvement actions will be documented and reviewed regularly.

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10. Related Policies

- Complaints Policy and Procedure
- Safeguarding Adults Policy
- Consent to Care and Support Policy and Procedure
- Risk Assessment Policy
- Incident Reporting Policy

- Medication Policy
- Recruitment and Selection Policy
- Training and Development Policy
- Whistleblowing Policy
- Duty of Candour Policy

11. Review and Version Control

This policy will be reviewed annually or sooner following:

- Changes in legislation.
- Changes in CQC guidance.
- Inspection findings.
- Significant incidents.
- Safeguarding investigations.
- Audit findings.
- Service developments.

Approved By: Stuart Wells

Position: Managing Director

Date: 07/07/2026

Medicare People currently provides introductory live-in care services. We have submitted our application to the Care Quality Commission (CQC) and intend to introduce a fully managed live-in care service following registration.