

**A**chieving  
**C**are  
**T**ogether  
2026

#NorfolkACT2026

# Quality Assurance Systems, Recording & Analysis

Workshop

3 March 2026



# Introductions

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# Housekeeping

Fire alarm is not planned  
You are free to move around as needed during the 45-minute session  
There is no set break, feel free to leave for the toilet as needed

Be respectful of one another  
Safe place for discussion  
Maintain confidentiality – feedback will be anonymised



# Outline of Workshop

- What does Quality Assurance cover?
- 3 workshop questions, discussed in groups
- Feedback on the individual questions

Optional (if time allows):

- Example quality assurance templates
- Q&A



# What sort of things does quality assurance include?

- Complaints
- Safeguarding
- Medication errors
- Medication
- Falls
- Accidents, incidents and near misses
- Daily walkarounds
- Audits
- Visit records
- Trend analysis

- Visit punctuality and duration
- Continuity of care
- Missed visits
- Business continuity events
- Care plan reviews
- Training
- Supervisions
- CQC
- PAMMS
- Lessons learned

Systematic  
monitoring,  
evaluation, &  
improvement  
of services

# Workshop discussion

In terms of QA systems, recording and analysis:

1. Where are you now and what are your goals?
2. What support do you need to make improvements?
3. What would be the impact of making these improvements?

Please be prepared to feedback to the group!

# Some ideas...

## Basic process:

### Monitor the issue

- E.g. complaints log, complaints record, investigation records

### Outcome & Feedback

- E.g. investigation outcome, letter to complainant

### Learning from individual incidents

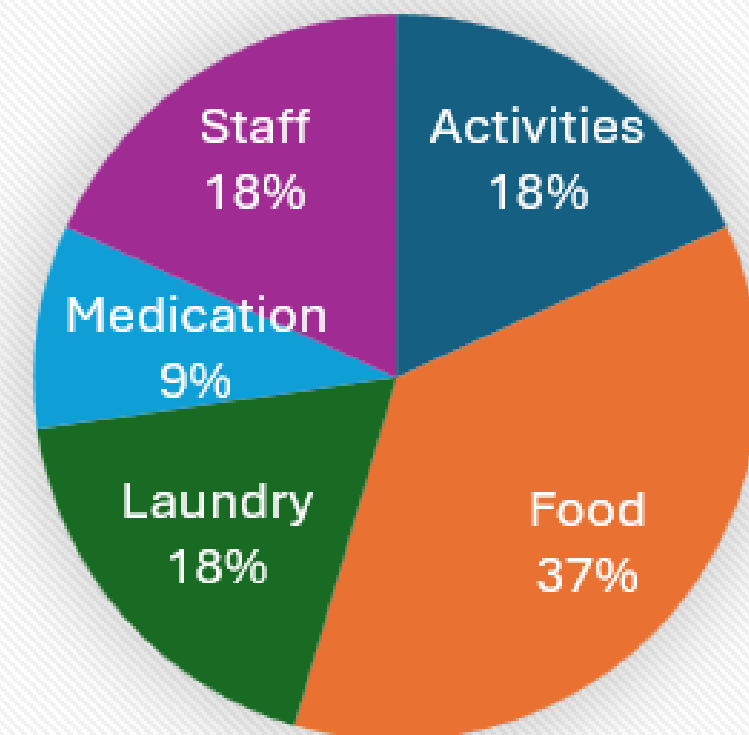
- E.g. Root cause analysis, lessons learned report

### Investigating and learning from trends

- E.g. quarterly review, issues, times, what are the patterns? Reasons? Actions

Revisit to show progress.

### Complaint categories Q1 2024



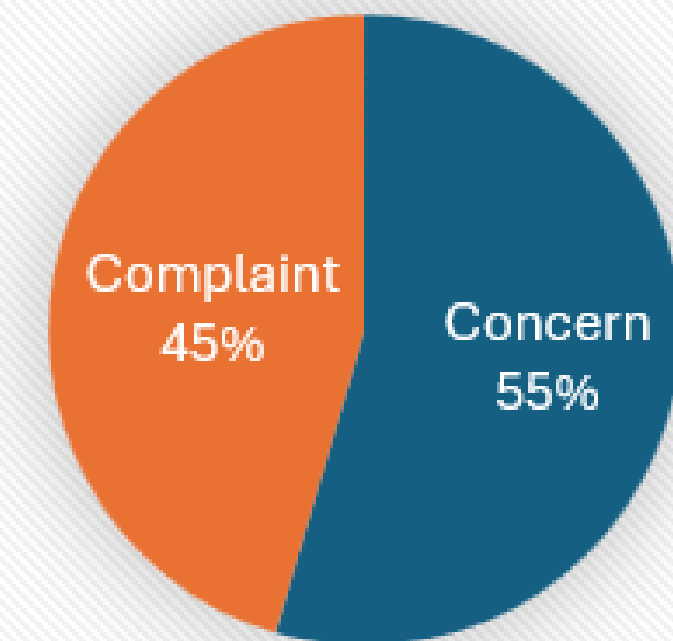
■ Activities ■ Food ■ Laundry ■ Medication ■ Staff

#### **Were there any trends in category?**

*E.g. Most complaints were about food. These all occurred in June when the Chef was on holiday. Agency staff were used to cover this absence. These staff were not familiar with SUs' preferences.*

*Action point: Create an induction specific to kitchen staff (whether agency or core), including SU need and preferences.*

### Complaint severity Q1 2024



■ Concern ■ Complaint

#### **Were there any trends in severity?**

*E.g. Most were less formal "concerns", rather than formal complaints. This shows that SUs and their representatives feel comfortable raising smaller issues with us to improve their time with the service.*

Review SMART actions from the previous quarter's analysis.

What SMART actions were taken as a result of this analysis?

**Trend Analysis**

Review of:	
Today's Date:	
Dates included in this review: (recommend 3 months)	

Check the previous analysis of this issue – are all actions completed?

How many issues have there been over the last 3 months?

Were all of these investigated and acted upon individually?

Have all appropriate notifications been made (CQC, NCC, RIDDOR etc.)

How many issues are ongoing/unresolved, and why?

What common issues or trends are there?

What can we change to reduce the chances of these issues recurring?

**Action Plan**

Ref	Issue	Action	Who	Planned Completion	Actual Completion

# Trend analysis:

Have individual issues been managed effectively?

What can we learn from them?

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Plan time for QA and stick to it!

- Be aware of issues, no surprises at inspections
- Not a paperwork exercise, drives genuine improvement

# PAMMS Guidance

- Question-by-question guidance
- Searchable by topic
- Sources of evidence
- What “Good” may look like
- Supporting information

## **F02 – Rotas and staffing tools**

Rotas and records show that there are sufficient staff on duty with the right knowledge, experience, qualifications and skills to provide effective care and support.

Source of Evidence	What “Good” looks like	Support
<ul style="list-style-type: none"> <li>• Rotas</li> <li>• Dependency tool</li> </ul>	<ul style="list-style-type: none"> <li>• Rotas show there are enough staff at all times, with the skills to meet <u>SUs</u>’ needs.</li> <li>• Staffing meets requirements of a dependency tool.</li> <li>• Roles are clear, e.g. support worker, chef, activities, cleaning</li> <li>• Full names are used</li> <li>• Clearly indicate who is responsible for meds (where applicable).</li> <li>• Agency staff are identified</li> <li>• Staffing levels and skill mix must be reviewed “continuously” – suggest formal review monthly.</li> </ul>	<p><a href="https://www.skillsforcare.org.uk">Tips to help you to decide safe staffing levels for your service (skillsforcare.org.uk)</a></p> <p><a href="https://www.gov.uk">Rest breaks at work: Overview - GOV.UK (www.gov.uk)</a></p>



# Thank You

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