MEADOW COURT

QUALITY MANUAL

Trenchard Park Gardens

Minehead Road

Norton Fitzwarren

Taunton

Somerset

TA2 6NS

MEADOW COURT

QUALITY MANUAL

MANUAL IDENTIFICATION

Copy Number:.....of.....

Issued to.....

Title.....

Signed:.....

Quality Manager

MEADOW COURT

QUALITY MANUAL

REVISION AND AMENDMENT REGISTER

DATE	PAGE NUMBER	PROCEDURE NUMBER	REVISION DETAILS	ISSUE NUMBER

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FOREWORD

This Quality Manual is the means by which Meadow Court (the 'Organisation') satisfies the requirements of its customers, particularly with regard to management responsibility.

The Organisation is obliged to ensure that its Quality Policy is fully and completely understood by its employees, and that its procedures are implemented and maintained at all times. This Quality Manual is in accordance with the requirements of **BS EN ISO 9001 : 2015**. All of the components of the Quality Management System shall be periodically and systematically reviewed by both internal and external Quality Audit procedures.

The Quality Manager, appointed by the Organisation's Director/Registered Manager is responsible for the control of all matters relating to the implementation of these procedures.

The assurance of quality is fundamental to all the work undertaken by the Organisation. All personnel at every level in the Organisation's structure shall practise the procedures established.

The potential benefits to the Organisation of implementing this Quality Management System are:

a) The ability to consistently provide products and services that meet customer and applicable statutory and regulatory requirements
b) Facilitating opportunities to enhance customer satisfaction
c) Addressing risks and opportunities associated with its context and objectives
d) The ability to demonstrate conformity to specified Quality Management System requirements.

The principles upon which this Quality Management System is based, as described in ISO 9000 : 2015, are:

a) Customer focus
b) Leadership
c) Engagement of people
d) Process approach
e) Improvement
f) Evidence-based decision making
g) Relationship management.

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PROFILE

Meadow Court is a supported living Unit which enables individuals to live in their own tenancy and within a community environment as an alternative to: residential care, social isolation with limited support or living with family. We support individuals to have their own accommodation, whilst having the benefit of 24 hour available staffing support with communal facilities that encourages socialisation, friendship and respect whilst individuals being able to have their own space to live in when they seek their own company, or to invite someone to be with them, in their own home.

Meadow Court is for:

Adults with a learning disability who would like to live independently, but with a support system throughout the day and night. It helps individuals move from residential care to have their own independence or as an alternative to living with families or having their own accommodation with limited interventions.

We offer a range of support based on people's individual needs and aspirations.

This can include support with:

- Household tasks
- Writing for and speaking up for the individual
- Personal support
- Maintaining a tenancy
- Taking medication
- Money management
- Building links with friends, family and the community
- Social and leisure activities
- Making healthy lifestyle choices.

The Organisation's success has always been attributable to a firm commitment to quality throughout its operations.

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QUALITY POLICY

Meadow Court (the 'Organisation') aims to provide defect free products and services to its customers on time and within budget.

The Organisation operates a Quality Management System that has gained BS EN ISO 9001 : 2015 certification, including aspects specific to the provision of supported living services for individuals with learning disabilities.

The management is committed to:

1. Develop and improve the Quality Management System
2. Continually improve the effectiveness of the Quality Management System
3. The enhancement of customer satisfaction.

The management has a continuing commitment to:

1. Ensure that customer needs and expectations are determined and fulfilled with the aim of achieving customer satisfaction
2. Communicate throughout the Organisation the importance of meeting customer needs and all relevant statutory and regulatory requirements
3. Establish the Quality Policy and to set Quality Objectives at relevant functions, levels and processes
4. Ensure that the Management Reviews set and review the Quality Objectives, and report on the internal audit results as a means of monitoring and measuring the processes and the effectiveness of the Quality Management System
5. Ensure the availability of resources.

The structure of the Quality Management System is defined in this Quality Manual.

All personnel understand the requirements of this Quality Policy and abide with the contents of the Quality Manual. The Organisation complies with all relevant statutory and regulatory requirements. The Organisation constantly monitors its quality performance and implements improvements when appropriate.

This Quality Policy is regularly reviewed in order to ensure its continuing suitability.

Copies of the Quality Policy are made available to all members of staff and to relevant interested parties. Copies of the minutes of Management Reviews, or extracts thereof, are provided to individual members of staff in accordance with their role and responsibilities as a means of communicating the effectiveness of the Quality Management System.

Signed:_____ **Name:**_____ **Date:**_____.

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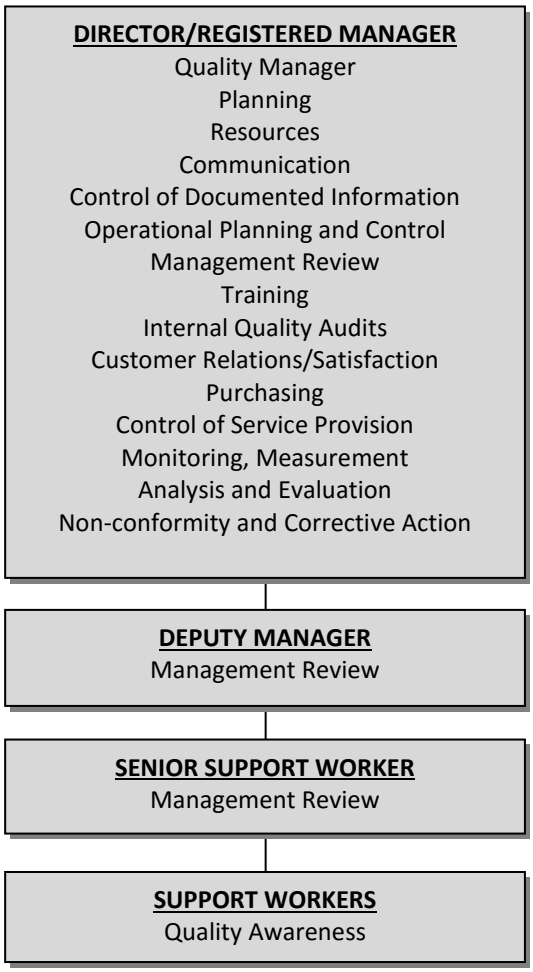
QUALITY STRUCTURE CHART



This chart establishes responsibilities and lines of internal communication within the Quality Management System and does not necessarily portray other management structures.

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1 - SCOPE

The scope of the Organisation's certification is defined within the Quality Policy and is recorded on the ISO 9001 Certificate. As a minimum this Quality Manual addresses all requirements for conformance with BS EN ISO 9001 : 2015 in pursuit of any activities falling within the scope of its certification.

This Quality Manual demonstrates the Organisation's:

1. Ability to consistently provide products and services that meet customer and applicable statutory and regulatory requirements, and
2. Aims to enhance customer satisfaction through the effective application of the Quality Management System, including processes for improvement of the System and the assurance of conformity to customer and applicable statutory and regulatory requirements.

Whenever any requirement(s) of this International Standard cannot be applied they are deemed to be not applicable. The rationale for all such exclusions is clearly set out in this Quality Manual.

Such inapplicabilities do not affect the Organisation's ability, or responsibility, to provide products and services that meet customer and applicable statutory and regulatory requirements.

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2 - NORMATIVE REFERENCES

At the time that this Quality Manual was prepared the entire fundamentals and vocabulary relating and applied to ISO 9001 : 2015 are set out in the document titled:

ISO 9000 : 2015, Quality Management Systems — Fundamentals and Vocabulary.

Parties to agreements based on ISO 9001 : 2015 are encouraged to adopt the amendments contained in any subsequent editions of the International Standard that may be published. Members of ISO and IEC maintain registers of currently valid International Standards.

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3 - TERMS AND DEFINITIONS

The International Organisation for Standardisation (ISO) has defined 138 terms for use in Quality Management Systems and these can be found in ISO 9000 : 2015 - Quality Management Systems — Fundamentals and Vocabulary. The following, however, may be helpful:

A **management system** is a 'set of interrelated or interacting elements of an organisation to establish policies and objectives, and processes to achieve those objectives.'

An **objective** is a 'result to be achieved.'

A **product** is the 'the output of an organisation that can be produced without any transaction taking place between the organisation and the customer.'

A **service** is the 'the output of an organisation with at least one activity necessarily performed between the organisation and the customer.'

A **customer** is a 'person or organisation that could or does receive a product or a service that is intended for or required by this person or organisation.'

A **provider (alternatively known as a supplier)** is an 'organisation that provides a product or service.'

A **process** is 'a set of interrelated or interacting activities that use inputs to deliver an intended result." In simple terms, what you do to get something.

A **procedure** is 'a specified way to carry out an activity or process.'

A **document** is 'information and the medium on which it is contained.'

A **record** is a 'document stating results achieved or providing evidence of activities performed.'

Documented information is 'information required to be controlled and maintained by an organisation and the medium on which it is contained.'

Context of the organisation is a 'combination of internal and external issues that can have an effect on an organisation's approach to developing and achieving its objectives.'

Interested party is 'a person or organisation that can affect, be affected by, or perceive itself to be affected by a decision or activity.'

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3 - TERMS AND DEFINITIONS (continued)

Improvement is 'activity to enhance performance.'

Non-conformity is 'non-fulfilment of a requirement.'

Corrective action is 'action to eliminate the cause of a non-conformity and to prevent recurrence.'

Preventive action is 'action to eliminate the cause of a potential non-conformity or other potential undesirable situation.'

Risk is the 'effect of uncertainty.'

A **Quality Plan** is a 'specification of the procedures and associated resources to be applied when and by whom to a specific object.'

An **Audit** is a 'systematic, independent and documented process for obtaining objective evidence and evaluating it objectively to determine the extent to which the audit criteria are fulfilled.'

Quotation marks on this page denote direct quotations from ISO 9000 : 2015.

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4 - CONTEXT OF THE ORGANISATION

4.1	**Understanding the Organisation and its context**
Summary of Requirements	The Organisation is to determine both the external and internal contexts in which it operates and shall monitor and review the issues which arise.

	STATEMENT/PROCEDURE
1.	The Organisation's external context has been evaluated and documented, taking into account such factors as: 1. The social and cultural environment 2. The political environment 3. The legal and regulatory environment 4. The market environment 5. The technological environment 6. The economic environment 7. The natural environment 8. The competitive environment 9. The geographical scope of each environment 10. Key drivers and trends.
2.	The Organisation's internal context, within which it seeks to achieve its objectives, has been evaluated and documented, taking into account such factors as: 1. Governance 2. Organisational structure, roles and accountabilities 3. Policies, objectives and the strategies that are in place to achieve them 4. Capabilities, in terms of resources and knowledge 5. Information systems, information flows and decision-making processes 6. Organisational culture 7. Standards, guidelines and models 8. Contractual relationships.
3.	The external and internal context is reviewed at least annually and the documentation updated accordingly.

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4 - CONTEXT OF THE ORGANISATION

4.2	**Understanding the needs and expectations of interested parties**
Summary of Requirements	The Organisation shall determine its relevant interested parties, along with their requirements with regard to the Quality Management System.

	STATEMENT/PROCEDURE
1.	The interested parties that are relevant to the Quality Management System are defined as: 1. Customers 2. Employees 3. Providers 4. Management 5. Social services 6. Health Authorities.
2.	The significant requirements of these interested parties include: 1. The consistent provision of products and services which meet customer requirements 2. The continual enhancement of customer satisfaction 3. A safe and pleasant working environment 4. Adherence to legal and regulatory requirements.

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4 - CONTEXT OF THE ORGANISATION

4.3	**Determining the scope of the Quality Management System**
Summary of Requirements	The scope of the Quality Management System shall be determined and documented using: a) The context of the Organisation b) The requirements of relevant interested parties c) The Organisation's products and services.

	STATEMENT/PROCEDURE
1.	Taking into account the output from Sections 4.1 and 4.2 above, along with the products and services offered by the Organisation, management ensures that this Quality Manual includes: 1. The defined scope of the Quality Management System with any non-applicable clauses identified and justified 2. Documented procedures or reference to them within other documents 3. A description of the interaction of processes.
2.	Effective implementation of the Quality Management System is monitored on an informal basis, as part of the Organisation's day-to-day operations.
3.	The Director/Registered Manager deals with instances when the Quality Management System is not correctly implemented.
4.	Persistent breaches of the Quality Management System are dealt with in accordance with the Organisation's disciplinary procedures.
5.	Such breaches are taken into account when reviewing: 1. The overall operation of the Organisation's Quality Management System 2. The Quality Manual, to ensure that it is up to date and accurately reflects the working practices of the Organisation 3. Staff training requirements.

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4 - CONTEXT OF THE ORGANISATION

4.4	**Quality Management System and its processes**
4.4.1	
Summary of Requirements	The Organisation shall fully establish and operate a Quality Management System in accordance with the requirements of the International Standard, including the determination of required processes and their application throughout the Organisation.
4.4.2	
Summary of Requirements	The Organisation shall document its processes and maintain sufficient documented information to provide evidence that the processes and associated operations are being carried out.

	STATEMENT/PROCEDURE
1.	As part of the implementation of this Quality Management System, the Organisation has identified and documented in this Manual: 1. The processes needed for the Quality Management System 2. The sequence and interaction of these processes 3. The criteria and methods used to ensure the effective operation and control of these processes, including responsibilities and authorities 4. The means to ensure the availability of the resources and the information necessary to support the operation, monitoring and continual improvement of these processes 5. The risks and opportunities as determined in accordance with the requirements of Section 6.1 6. The processes used to measure where applicable, monitor and analyse these processes and implement action necessary to achieve planned results and monitor continual improvement.

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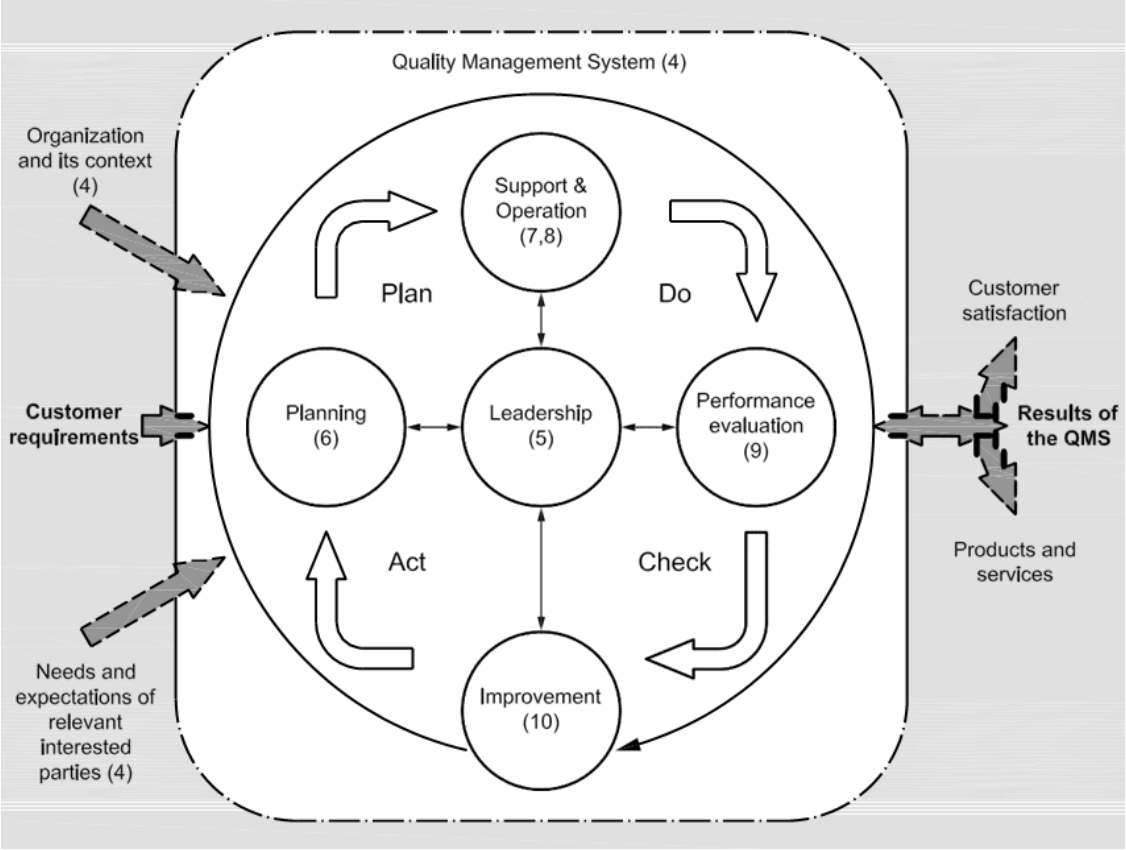
4 - CONTEXT OF THE ORGANISATION

4.4	**Quality Management System and its processes (continued)**
2.	The Quality Management System is based on the following process model:  Note: Numbers in brackets refer to the clauses in the International Standard.
3.	As part of the Management Review process, the Organisation reviews the Quality Management System and, when required, makes changes in order to ensure that it continues to meet management requirements and market conditions.

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5 - LEADERSHIP

5.1	**Leadership and commitment**
5.1.1	**Leadership and commitment for the Quality Management System**
Summary of Requirements	Top management shall demonstrate its leadership and commitment with regard to the Quality Management System by: a) Defining quality related responsibilities b) Ensuring the implementation of the Quality Management System and its integration into the Organisation's business processes c) Ensuring that the customer's quality requirements are reflected in the products and services provided. Clear evidence of top management's commitment to the Quality Management System, including its development and improvement, must be made available.

	STATEMENT/PROCEDURE
1.	The Quality Policy includes a commitment from management to develop and improve the Quality Management System by: 1. Communicating throughout the Organisation the importance of meeting customers' requirements 2. Communicating throughout the Organisation the importance of meeting all relevant statutory and regulatory requirements 3. Establishing the Quality Policy and its Objectives 4. Promoting improvement 5. Conducting Management Reviews 6. Ensuring the availability of resources.
2.	Management also commits to: 1. Promote the use of risk-based thinking 2. Ensure that the Quality Management System performs as intended 3. Support other relevant management roles with regard to their delegated responsibilities.

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5 - LEADERSHIP

5.1	**Leadership and commitment (continued)**
5.1.2	**Customer focus**
Summary of Requirements	Top management shall ensure that the Organisation: a) Understands and meets its customer and compliance requirements b) Determines the risks and opportunities with regard to product and service conformity, and customer satisfaction. c) Focuses on continual improvement in customer satisfaction.

	STATEMENT/PROCEDURE
1.	Customer focus is ensured by the implementation of the contract review processes set out in Section 8.2.2 (Determination of requirements for products and services).
2.	Feedback from customer monitoring as described in Section 9.1.2 of this Manual is reviewed during Management Review.
3.	The risks and opportunities that can affect conformity of products and services and the ability to enhance customer satisfaction are determined and addressed as part of Section 6.1.

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5 - LEADERSHIP

5.2	**Policy**
5.2.1	**Establishing the Quality Policy**
Summary of Requirements	Top management is to create and implement a Quality Policy that: a) Takes into account the purpose and context of the Organisation b) Supports the strategic direction of the Organisation c) Provides a suitable framework for the setting of Quality Objectives d) Commits top management to satisfy applicable requirements e) Commits top management to continual improvement of the Quality Management System.
5.2.2	**Communicating the Quality Policy**
Summary of Requirements	The Quality Policy shall be: a) Documented and made available to all interested parties b) Communicated, understood and implemented throughout the Organisation.

	STATEMENT/PROCEDURE
1.	The Organisation's Quality Policy is documented earlier in this Quality Manual and fulfils the requirements summarised above.
2.	In order to provide evidence of the Organisation's commitment to the Quality Policy, it is regularly reviewed and any changes are approved as part of the formal Management Review proceedings. These reviews and all approved changes are recorded in the minutes of the Management Reviews.
3.	Copies of the Quality Policy are made available to all members of staff. Copies of the minutes of Management Reviews, or extracts thereof, are provided to individual members of staff in accordance with their role and responsibilities as a means of communicating the effectiveness of the Quality Management System.
4.	Copies of the Quality Policy are made available to relevant interested parties, where considered appropriate to do so.

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5 - LEADERSHIP

5.3	Organisational roles, responsibilities and authorities
Summary of Requirements	Top management shall ensure that the responsibilities and authorities for roles within the Quality Management System are defined and understood throughout the Organisation.

	STATEMENT/PROCEDURE
1.	Responsibilities and authorities, together with the job titles of those responsible for communicating them throughout the Organisation, are illustrated on the Quality Structure Chart in this Manual.
2.	The Director/Registered Manager ensures that, at all times, a nominated member of staff, referred to in this Manual as the Quality Manager, has responsibility for: 1. Ensuring that the Quality Management System accurately reflects the requirements of the International Standard 2. Ensuring that all processes deliver their intended results 3. Providing reports on the performance of the Quality Management System and reporting opportunities for improvement back to Top Management 4. Prioritising customer focus 5. Evaluating and implementing planned changes to the Quality Management System.

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6 - PLANNING

6	**Planning**
6.1	**Actions to address risks and opportunities**
6.1.1	
Summary of Requirements	The Organisation shall consider the context of the Organisation and the requirements of interested parties in order to define all relevant risks and opportunities associated with the operation of the Quality Management System.
6.1.2	
Summary of Requirements	The Organisation shall: a) Take appropriate actions to address the risks and opportunities b) Integrate and implement those actions throughout the Quality Management System c) Evaluate the effectiveness of those actions.

	STATEMENT/PROCEDURE
1.	Quality Management System planning forms part of the Management Review process described in Section 9.3.
2.	The Organisation holds regular management and operational review meetings to set and monitor the quality related objectives, ensuring that risks and opportunities are included as part of this process to the extent considered necessary. The management team reviews the Quality System in order to ensure that it addresses all relevant processes and verification requirements.
3.	Processes that are necessary to facilitate the service provided, are determined, planned and implemented in accordance with the relevant procedures described in Section 8.1 of this Manual. The effectiveness of the documented procedures is subject to regular Management Review and revisions/improvements are made as necessary.

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6 - PLANNING

6.1	Planning (continued)
4.	The risks and opportunities that can affect conformity of products and services and the ability to enhance customer satisfaction are determined and addressed by inclusion in all relevant decision-making processes to the extent considered necessary.
5.	Wherever project specific risks and opportunities are identified, and where considered appropriate by management, suitable treatment is documented on a Quality Risks Register and implemented.
6.	Risk Assessments and Method Statements are recorded and retained in each Project Pack.

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6 - PLANNING

6.2	**Quality objectives and planning to achieve them**
6.2.1	
Summary of Requirements	The Organisation shall establish Quality Objectives at relevant functions, levels and processes throughout the scope of the Quality Management System.
6.2.2	
Summary of Requirements	The Organisation shall develop suitable plans for achieving the Quality Objectives, including required actions and resources, responsibilities, timescales and evaluation of results.

	STATEMENT/PROCEDURE
1.	The Organisation's primary Quality Objective is defined in the Quality Policy as "the Organisation aims to provide defect free products and services on time and within budget".
2.	Quality Objectives are established and documented at relevant functions, levels and processes needed for the Quality Management System.
3.	Effective measurement of the defined Objectives is achieved by the application of all of the procedures described in Sections 9 and 10 of this Manual relating to recording, monitoring and analysing customer feedback and non-conformance issues.
4.	Effective review of the defined Objectives is an integral part of the Quality Policy review as required by the procedures described in Section 9.3 (Management review).

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6 - PLANNING

6.3	Planning of changes
Summary of Requirements	The Organisation shall plan any necessary changes to its Quality Management System.

	STATEMENT/PROCEDURE
1.	The Quality Manager is responsible for assessing all proposed changes to the Quality Management System in accordance with the criteria summarised above.
2.	Proposed changes are documented on a Quality Change Control Record and, where necessary, circulated to relevant interested parties for comment. The form reflects: 1. The purpose of the changes and their potential consequences 2. Resource availability 3. Responsibilities and authorities.
3.	When made, all changes are reflected in the Quality Manual and communicated to relevant interested parties.
4.	The Quality Manager monitors the impact of any change and proposes further change in the event of adverse consequences.

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7 - SUPPORT

7.1	**Resources**
7.1.1	**General**
Summary Of Requirements	The resources needed for the establishment, implementation, maintenance and continual improvement of the Quality Management System shall be determined and provided.
7.1.2	**People**
Summary of Requirements	The persons necessary for the effective implementation of the Quality Management System and for the operation and control of its processes shall be determined and provided.

	STATEMENT/PROCEDURE
1.	The identification of revised or additional resources required to implement and improve the processes of the Quality Management System takes place as part of day-to-day management as well as part of the Management Review procedures described in Section 9.3.
2.	The Organisation considers: 1. The level of existing internal resources in terms of their capabilities and constraints 2. Resources which need to be obtained from external providers.
3.	In addition to Management Reviews, formal management meetings take place on a regular basis for which Minutes are recoded identifying tasks assigned and action points identified. Significant issues are also discussed at informal meetings held as part of the day-to-day operation of the business and appropriate action is agreed and implemented, as necessary.

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7 - SUPPORT

7.1	**Resources (continued)**
7.1.3	**Infrastructure**
Summary of Requirements	The infrastructure necessary for the operation of the Organisation's processes and to achieve conformity of products and services shall be determined, provided and maintained.

	STATEMENT/PROCEDURE
1.	Care staff monitor the performance of equipment on a daily basis. Any required preventive maintenance is carried out in-house or through the services of external contractors in order to ensure continuing process capability.
2.	Quality related computer files are maintained in accordance with the relevant procedures described in Section 7.5.3 (Control of documented information).
3.	The Registered Manager is responsible for all requirements relating to the maintenance of equipment including: 1. Defining the Planned Preventive Maintenance (PPM) of all new and existing equipment 2. Scheduling the frequency of equipment maintenance 3. Maintaining PPM records 4. Identifying requirements of first line spare parts 5. Arranging appropriate maintenance requirements.
4.	Wherever feasible users of equipment ensure its regular cleaning both when in use and in particular, after each period of use.
5.	Maintenance in accordance with the record schedule for each piece of equipment or repair as necessary is undertaken. All actions are endorsed and signed on the record.
6.	Under no circumstances is unserviceable or suspected faulty equipment activated or operated without prior authority or instructions.
7.	The Organisation's computer system is serviced and maintained by an experienced member of staff or an approved external sub-contractor with the necessary expertise.

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7.1	Resources (continued)
8.	The Contract with the external support provider includes maintenance and updates to systems and virus definition updates, software patches and upgrades.
9.	All portable electrical equipment is PAT tested in accordance with the current regulations.
10.	Inspection of personal protective equipment is the responsibility of the user who shall report any deficiencies in accordance with the requirements of the Organisation's Health & Safety procedures.
11.	All fire fighting equipment and sprinkler systems are thoroughly examined at twelve-monthly intervals in accordance with the relevant legal and regulatory requirements. Weekly fire alarm testing and three-monthly evacuation exercises are undertaken and recorded in the Fire Log.
12.	For the purposes of this Quality Management System, all other elements of the infrastructure are treated as resources and provided, maintained, checked and replaced accordingly. This is administered by the application of the relevant procedures set out in Sections 8.5.1 (Control of production and service provision) and 7.1.5 (Monitoring and measuring resources).

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7 - SUPPORT

7.1	**Resources (continued)**
7.1.4	**Environment for the operation of processes**
Summary of Requirements	The work environment required to achieve conformity with product and service requirements shall be identified, determined, provided and managed.

	STATEMENT/PROCEDURE
1.	Senior management ensures that a suitable environment is maintained that provides for safe systems of work and the ability to achieve conformity to product and service requirements.
2.	Staff facilities and the workplace are maintained in an acceptable condition in order to ensure that all staff can carry out their duties effectively and efficiently.
3.	The home is regularly cleaned to provide a pleasant working environment for staff, living environment for residents and for safety reasons.
4.	Social and psychological factors affecting the staff and residents are also taken into account in order to ensure a suitable working and living environment.

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7 - SUPPORT

7.1	**Resources (continued)**
7.1.5	**Monitoring and measuring resources**
7.1.5.1	**General**
Summary of Requirements	The resources needed to ensure valid and reliable monitoring and measuring results shall be determined and provided. Appropriate documented information shall be maintained to demonstrate fitness for purpose of the monitoring and measurement resources.
7.1.5.2	**Measurement traceability**
Summary of Requirements	In circumstances in which measurement traceability is a requirement, or is essential in providing confidence in the validity of measurement results, equipment shall be accurately calibrated or verified, or both. Equipment shall also be uniquely identified and safeguarded from factors which would invalidate the calibration and hence the measurement results.

	STATEMENT/PROCEDURE
1.	Whenever equipment is used for final verification, it is calibrated and traceable to National Standards or, if not possible, the methods of calibration are defined.
2.	The Organisation does not use any equipment that requires any accurate measuring/monitoring requirements. Therefore, this Section is not applicable to the nature of the Organisation's current activities. The Management Review process monitors this situation.
3.	Should these circumstances change, any equipment used for final verification would be calibrated and traceable to National Standards or, if not possible, the methods of calibration defined.

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7 - SUPPORT

7.1	**Resources (continued)**
7.1.6	**Organisational knowledge**
Summary of Requirements	Sufficient knowledge shall be determined by the Organisation in order to operate its processes and to ensure that its products and services suitably conform. Maintenance and availability of this knowledge to the necessary degree shall be ensured. The Organisation shall consider its existing knowledge when dealing with changing requirements and trends and determine how any extra knowledge needed and necessary updates may be obtained or how access may be gained to these.

	STATEMENT/PROCEDURE
1.	The Organisation's knowledge is mainly vested in: 1. Its staff 2. Its documented information.
2.	Levels of competence and awareness are improved at every opportunity, in accordance with Sections 7.2 and 7.3 of this Quality Manual.
3.	Staff are encouraged to share knowledge with colleagues as frequently as necessary so that a high level of knowledge is sustained throughout the Organisation.
4.	An environment of learning is created, with staff being encouraged to train in a range of skills, both those essential for their current job and those which permit individual self-development.
5.	Information is communicated to all levels of the Organisation using the principles embodied in Section 7.4.
6.	Documented information is created as far as practicable to reflect the knowledge possessed by the Organisation's staff and is controlled in accordance with Section 7.5.

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7.2	**Competence**
Summary of Requirements	The following shall be undertaken by the Organisation: a) The competence required of person(s) doing activities under its control affecting the performance and effectiveness of the Quality Management System shall be determined b) The Organisation shall ensure that such persons are competent as regards suitable education, training, or experience c) Actions shall be taken to gain the competence required and to assess the effectiveness of actions taken, where applicable d) As evidence of competence, appropriate documented information shall be kept.
7.3	**Awareness**
Summary of Requirements	It shall be ensured by the Organisation that persons doing work under the Organisation's control are aware of: a) The Quality Policy b) Relevant Quality Objectives c) Their role in relation to the effectiveness of the Quality Management System, including the advantages of improvements in performance d) The consequences of failing to meet the Quality Management System requirements.

	STATEMENT/PROCEDURE
1.	All new members of staff receive appropriate induction training during their probationary period. This includes an introduction to the Quality Policy and their individual role in the operation of the Quality Management System and the achievement of relevant Quality Objectives, in addition to the implications of not conforming with the Quality Management System requirements.
2.	Staff training and competence are assessed taking into account each individual's education, skills and experience.

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7.2	**Competence(continued)**
3.	Requirements for further training are identified as part of day-to-day management and as part of the Management Review process set out in Section 9.3.
4.	Training and competence requirements may be identified as a result of: 1. Performance reviews 2. New personnel 3. New equipment and/or technology 4. Revised legal and/or regulatory requirements (e.g. Health & Safety) 5. Revised industry standards 6. Employee request.
5.	Appropriate training methods and aides are used that may include: 1. Internal training by suitably trained staff 2. External training by an approved training provider 3. Electronic media 4. Technical manuals.
5.	A record of staff training and competence is kept including such details as: 1. Level of competence attained 2. Date of training or event 3. Training and/or activities undertaken 4. Duration 5. Qualifications and/or Certificates attained 6. Ongoing and/or future training and/or re-certification requirements.
6.	All Care Staff are required to undertake Care Certificate, Essential Knowledge and QCF Diploma training to levels 2, 3 and 5 as appropriate to their requirements.
7.	For quick reference a training skills matrix is maintained identifying the key skills attained by each member of staff. When training Certificates are obtained with a time specific renewal date, the required renewal date is recorded on the training skills matrix.

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7.2	**Competence(continued)**
8.	Training qualifications are periodically monitored as a means of improving the quality system and to ensure all employees are trained to the skills required for the work.
9.	All new staff are required to provide proof of eligibility to work in the UK, undergo and pass a DBS check, provide two references including one from a previous employer and agree to undertake training as required.
10.	All care staff undergo regular supervised training and six-monthly appraisals.
11.	Qualified staff are responsible for undertaking and recording all continuing professional development training as required by their particular professional body.

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7.4	**Communication**
Summary of Requirements	The internal and external communications relating to the Quality Management System shall be determined, including: a) The subject of its communications b) When communications take place c) With whom communications should be carried out d) How communications are carried out e) Who takes part in communications.

	STATEMENT/PROCEDURE
1.	The Quality Policy is displayed on the Organisation's premises in order to ensure that it is made available and brought to the attention of all members of staff.
2.	The effectiveness of the Quality Management System is communicated throughout the Organisation by providing copies of the minutes of Management Reviews, or extracts thereof, to individual members of staff in accordance with their role and responsibilities.
3.	Appropriate methods for internal communication are used according to the nature and required distribution of the information.

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7.5	**Documented information**
7.5.1	**General**
Summary Of Requirements	The following shall be included in the Organisation's Quality Management System: a) Documented information as dictated by the International Standard b) Documented information determined as being essential for the effectiveness of the Quality Management System by the Organisation.

	STATEMENT/PROCEDURE
1.	The following items are particularly significant in contributing to the Quality Management System and ensuring the effective operation and control of its procedures: 1. The Quality Policy 2. This Quality Manual 3. Quality critical records 4. The requirements of the Care Quality Commission 5. Care Act 2014 6. Health & Safety at Work Act 1974.

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7.5	**Documented information (continued)**
7.5.2	**Creating and updating**
Summary of Requirements	The following shall be ensured by the Organisation when documented information is created and updated: a) That it is suitably identified and described (e.g. a title, date, author, or reference number) b) Format (e.g. language, software version, graphics) and media (e.g. paper, electronic) c) Review and approval for suitability and adequacy.

	STATEMENT/PROCEDURE
1.	All created and updated documented information includes the following: 1. Title 2. Date 3. Author 4. Template reference 5. Reference number 6. Version number.
2.	New document templates are approved by the Quality Manager and recorded on the Document Template Control Schedule, to ensure that up-to-date templates are used consistently throughout the Organisation.
3.	Where necessary, documents are approved at an appropriate level before release from the Organisation.

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7.5	**Documented information (continued)**
7.5.3	**Control of documented information**
7.5.3.1 Summary of Requirements	The Organisation is to control documented information essential for the Quality Management System and for ISO 9001 : 2015 to ensure: a) Its availability and suitability for use, where and when it is required b) Adequate protection of this documented information (e.g. from loss of confidentiality, unsuitable use, or loss of integrity).
7.5.3.2 Summary of Requirements	The following activities shall be addressed by the Organisation for the control of documented information, as applicable: a) Distribution, access, retrieval and use b) Storage and preservation, including preservation of legibility c) Control of changes (e.g. version control) d) Retention and disposition. The Organisation shall identify, as appropriate, and control documented information of external origin which it determines to be necessary in order to plan and operate the Quality Management System. The Organisation shall protect documented information kept as evidence of conformity from unintentional amendments.

	STATEMENT/PROCEDURE
	QUALITY MANUAL
1.	The Quality Manager has approved this Quality Manual and will approve all subsequent issues.
2.	The only controlled copy of the Quality Manual is that held on the Organisation's computer system and is maintained by the Quality Manager.
3.	All hard and any other electronic copies are by definition uncontrolled.

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7.5	**Documented information (continued)**
4.	Proposed changes to the Quality Manual are identified during the day-to-day activities as well as more formally during the Management Review process described in Section 9.3.
5.	Proposed changes are reviewed and, if appropriate, adopted by the Quality Manager after taking into account all of the relevant information.
6.	When adopted, changes are made to the controlled copy of the Quality Manual and the appropriate personnel are notified of the change.
	OTHER CONTROLLED DOCUMENTS
7.	The latest versions of all relevant standards, legal requirements, codes of practice and technical literature are either held in hard copy or accessed from the website as a controlled issue from the issuing authority. Superseded copies, if retained, are marked as superseded to prevent their inadvertent use.
8.	Internal documents and forms are held as a master version on computer when generated in this way. As a document is updated, the master version held on the system is updated to reflect the change. In addition a hard copy of the Organisation's stationery is held as a master document in a Master Document File with a Master Register identifying the document, the date of issue and revision status.
9.	Templates are periodically reviewed for style and technical content prior to their issue and overall as part of the Management Review process for their continued suitability.
10.	New, or improvements to existing, document templates are authorised by the Quality Manager before adoption into the Quality Management System.
11.	Risk Assessments, Method Statements and Support Planning procedures are subject to review on a monthly basis. All other policies and procedures are reviewed on an annual basis.
11.	A technical library of supplier and trade information, reference material and catalogues is maintained electronically. In instances where a hard copy document retained is revised or updated by the supplier, the original version is removed from the library and destroyed or suitably marked and retained for reference purposes.

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7.5	**Documented information (continued)**
	GENERAL CONTROLS
12.	The Organisation's computer system is backed up on a continual basis to Cloud storage currently provided by BT.
13.	The integrity of the computer system and the data held on it is maintained by running background virus protection software where applicable and the maintenance of effective and regularly updated firewalls.
	RECORDS
14.	The Quality Manager is responsible for keeping the following records and similar documents for a minimum period of 12 months or as required by legal, regulatory and/or contractual requirements, whichever is the longer, in order to demonstrate conformity to the requirements and effective operation of the Quality Management System: 1. Previous Management Review Records 2. Quality Audit Reports 3. Management Information Records 4. Staff suggestions 5. Staff Training Records 6. Non-conformance Records including customer complaints 7. Customer Satisfaction Monitoring Records 8. Supplier/Sub-contractor approval records 9. Risk Assessments 10. Method Statements 11. Care plans 12. Staff files 13. Resident files 14. Quality Assurance files 15. Safeguarding files 16. Care Order Finance Forms.

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7.5	**Documented information (continued)**
15.	The Quality Manager is responsible for: 1. Identifying and specifying the records that are subject to control 2. Nominating individuals responsible and accountable for every record 3. Specifying the contents of records (through procedures) 4. Record disposal.
16.	The Organisation's storage system, both in electronic and hard copy, ensures that all quality records and similar documents are adequately protected, remain legible and identifiable. Records are stored and maintained in a manner to make them readily retrievable, in facilities that provide an environment to minimise deterioration or damage and to prevent loss.
17.	The Quality Manager maintains a Document Template Control Schedule identifying changes to the Organisation's documentation.
18.	Quality records are reviewed annually by the Quality Manager and those retained in excess of the specified retention period are disposed of or are appropriately marked to show their superseded status.

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8.1	**Operational planning and control**
Summary of Requirements	Planning, implementation and control of the processes (see 4.4) necessary to meet the requirements for the provision of products and services, and to implement the actions determined in Clause 6, shall be carried out as the Organisation: a) Determines the requirements for the products and services b) Establishes criteria for: a. The processes b. The acceptance of products and services. c) Determines the essential resources to conform to the product and service requirements d) Implements control of the processes based on the criteria e) Determines and keeps documented information as required: a. To be sure that the processes have been executed according to plan b. To be able to show that products and services conform to their requirements. The output of this planning shall suit the Organisation's operations. Planned changes shall be controlled and the results of unintentional changes evaluated by the Organisation, taking action to lessen any adverse effects, as necessary. It shall be ensured that outsourced processes are controlled by the Organisation (see 8.4).

	STATEMENT/PROCEDURE
1.	The work planning process involves determining and taking into account the Quality Policy, Objectives and the requirements of the product and/or service requirements. This is achieved by the application of the documented Quality Management System and related processes and includes the provision of any necessary resources and validation and verification methods.
2.	Each member of staff is responsible for planning their own work subject to supervisory and management requirements and instruction.
3.	Confirmed customer projects are subject to a project-specific review to determine planning, staff and other requirements relating to the work.

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8.1	Operational planning and control (continued)
4.	All work is planned and scheduled to an agreed programme to meet the customers' requirements and to ensure the order is completed safely, on time and within budget.
5.	All work is planned and scheduled, by the Director/Registered Manager or their nominated representative, taking into account the human, material and sub-contract resources available.
6.	Prior to commencement of all major Contracts, a pre-contract meeting is held. All labour requirements are agreed and future allocations recorded within the contract documents.
7.	Regular face-to-face meetings are held between managers and clients throughout the duration of the contract.
8.	Each member of supervisory staff is responsible for planning their own work in consultation with more senior management.
9.	Resident file records are kept updated with the progress of the various aspects and stages of all contracts.
10.	Minimum stocks of common materials are maintained and any shortfalls are addressed by the application of the procedures described in Section 8.4, Purchasing.
11.	Holidays are planned and scheduled to ensure adequate staff coverage to meet the customer demand.
12.	Whenever it is considered that specialist skills and/or products are required for particular residents, the Organisation may use a sub-contractor or provider selected in accordance with procedures described in Section 8.4, Control of externally provided products and services, of this Manual.

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8.2	**Determination of requirements for products and services**
8.2.1	**Customer communication**
Summary of Requirements	The following activities relate to communication with customers: a) The provision of information relating to products and services b) The handling of enquiries, contracts or orders, including changes c) Acquiring customer feedback relating to products and services, including customer complaints d) The handling or control of customer property e) Establishing particular requirements for contingency actions, when relevant.
8.2.2	**Determining the requirements related to products and services**
Summary of Requirements	The Organisation shall ensure the following when determining the requirements for the products and services for customers: a) Description of the requirements for the products and services, including: a. Any applicable statutory and regulatory requirements b. Those considered essential by the Organisation. b) The Organisation can realise the claims for its products and services on offer.
8.2.3	**Review of requirements related to products and services**
8.2.3.1	
Summary of Requirements	The Organisation's ability to fulfil the requirements for products and services to be offered to customers shall be ensured. A review shall be conducted by the Organisation before it commits to supplying products and services to a customer, which shall include the following: a) Requirements as described by the customer, which include the requirements for delivery and post-delivery activities b) Requirements not specified by the customer, but essential for the stated or intended use, when known

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8.2	**Determination of requirements for products and services (continued)**
8.2.3	**Review of requirements related to products and services (continued)**
8.2.3.1 (cont'd)	
Summary of Requirements (continued)	c) The Organisation's stated requirements d) Statutory and regulatory requirements which apply to the products and services e) Contract or order requirements that are different to previous ones. Resolution of contract or order requirements that are different from requirements previously defined shall be ensured by the Organisation. Before acceptance, the Organisation shall confirm the customer's requirements in the event that the customer fails to provide a documented statement of their requirements.
8.2.3.2	
Summary of Requirements	Documented information shall be kept by the Organisation, as applicable: a) On the outcomes of the review b) On any further requirements for the products and services.

	STATEMENT/PROCEDURE
1.	Enquiries and orders are received or acquired in relation to a request for the provision of supported living accommodation primarily by the following means: 1. Telephone, post, e-mail and visit to the Organisation's home 2. Established customer (direct customers and County Councils) 3. Established industry contacts 4. Approved contractor status Invitation to Tender 5. The Proactis online portal 6. The Organisation's website and other marketing initiatives.
2.	Enquiries detailing the number and perceived ratio of one-to-one and flexible hours required are received by the Director/Registered Manager and are reviewed to establish the financial viability and acceptability of risk.

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8.2	**Determination of requirements for products and services (continued)**
3.	The defined enquiry is reviewed in order to establish the Organisation's ability and wish to meet the requirements. Whenever appropriate, the Director/Registered Manager or designated representative may contact the customer to clarify details or resolve any perceived anomalies. If the Director/Registered Manager feels that the Organisation is unable or unwilling to pursue the enquiry, the customer is informed and all enquiry documents are returned, retained or destroyed as appropriate.
4.	In instances where an order or enquiry is received from a new customer a dedicated customer record is generated.
5.	Whenever considered necessary, a credit check is carried out on the prospective customer by the Organisation's Accounts Department in order to ascertain their financial status.
6.	Tender applications received on the Proactis Portal are completed and a bid returned in accordance with the requirements of the customer and by the agreed deadline.
7.	In instances where the Organisation's bid is not successful the Organisation attempts to solicit feedback as to the reason.
8.	In instances where the bid is successful an admission date is agreed.
9.	Risk Assessments and Support Plans are drafted by the relevant Social Worker and submitted to the Organisation by e-mail together with a completed copy of the Care Order Finance Form confirming the total number of hours, hourly rate and proposed duration of stay.
10.	In instances where as the result of the request being of an emergency nature the Care Order Finance Form is not received in advance of the resident arriving e-mail confirmation is generated by the Organisation and issued to the relevant authority confirming the details.
11.	The Organisation's accommodation is made ready for the resident's arrival.

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8.3	**Design and development of products and services**
8.3.1	**General**
Summary Of Requirements	An appropriate design and development process to ensure the provision of products and services shall be set up, put into place and maintained by the Organisation.
8.3.2	**Design and development planning**
Summary of Requirements	The Organisation shall consider the following as it determines the stages and controls for design and development: a) The nature, duration and complexity of activities relating to design and development b) The necessary process stages, including applicable design and development reviews c) The necessary activities relating to design and development verification and validation d) The responsibilities and authorities playing a role in the design and development process e) The internal and external resource requirements for the design and development of products and services f) The necessity to control interfaces between individuals playing a role in the design and development process g) The need to ensure that customers and users are involved in the design and development process h) The requirements for future provision of products and services i) The anticipated degree of control that customers and other relevant parties should have over the design and development process j) The documented information necessary to prove the fulfilment of design and development requirements.

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8.3	**Design and development of products and services (continued)**
8.3.3	**Design and development inputs**
Summary of Requirements	The necessary requirements for the particular kinds of products and services to be designed and developed are to be determined by the Organisation. The following are to be considered by the Organisation: a) Requirements related to function and performance b) Information resulting from earlier similar activities in design and development c) Statutory and regulatory requirements d) Standards or codes of practice that the Organisation has pledged to put into practice e) Possible effects of failure due to the nature of the products and services. Inputs shall be sufficient for design and development purposes, complete and unambiguous. Where there are conflicting design and development inputs, a decision shall be reached. Documented information on design and development inputs shall be kept by the Organisation.
8.3.4	**Design and development controls**
Summary of Requirements	Controls shall be applied to the design and developments process by the Organisation to ensure the following: a) Definition of results to be accomplished b) Reviews are carried out to assess the ability of the results of design and development to fulfil requirements c) In order to ensure that the design and development outputs are in line with the input requirements, verification activities are carried out d) In order to ensure that the resulting products and services are in line with the requirements for the specified application or intended use, validation activities are carried out by the Organisation e) When difficulties are determined during the reviews, or verification and validation activities, any suitable actions are taken f) Documented information of these activities is kept.

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8.3	**Design and development of products and services (continued)**
8.3.5	**Design and development outputs**
Summary of Requirements	It shall be ensured that design and development outputs shall do the following: a) Fulfil the input requirements b) Are sufficient for the ensuing processes for the provision of products and services c) Comprise or make reference to monitoring and measuring requirements, as appropriate, and acceptance criteria d) Give details of the characteristics of the products and services that are required for their specific purpose and their safe and correct provision. Documented information on design and development outputs shall be kept by the Organisation.
8.3.6	**Design and development changes**
Summary of Requirements	Changes made during or after the design and development of products and services shall be identified, reviewed and controlled by the Organisation to the degree required so that no detrimental impact on conformity to requirements is experienced. Documented information shall be kept by the Organisation on: a) Changes to design and development b) Review results c) The authorisation of the changes d) Preventive actions for detrimental impacts.

	STATEMENT/PROCEDURE
1.	The Organisation does not currently undertake any design activities or other similar processes addressed by this Section of the Standard. Should this situation change, by customer demand or any other reason, appropriate procedures will be developed and introduced. The Management Review process continuously monitors this situation.

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8.4	**Control of externally provided products and services**
8.4.1	**General**
Summary of Requirements	The conformity of externally provided processes, products and services to requirements shall be ensured by the Organisation. The controls to be applied to externally provided processes, products and services shall be determined by the Organisation when: a) There is an intention to incorporate products and services from external providers into the Organisation's own products and services b) There is a direct provision of products and services to the customer(s) by external providers on behalf of the Organisation c) Provision of a process, or part of a process, is made by an external provider due to a decision made by the Organisation. Criteria for the evaluation, selection and monitoring of performance and re-evaluation of external providers shall be determined and put into practice by the Organisation, according to their ability to provide processes or products and services in line with requirements. Documented information of these activities and any required actions arising from the evaluations shall be kept by the Organisation.
8.4.2	**Type and extent of control**
Summary of Requirements	The Organisation shall ensure that its ability to consistently deliver conforming products and services to its customers shall not be adversely affected by externally provided processes, products and services. The following shall be carried out by the Organisation: a) The Organisation shall ensure that externally provided processes stay within the control of its Quality Management System b) Both the controls that it intends to apply to an external provider and those it intends to apply to the resulting output shall be defined

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8.4	**Control of externally provided products and services (continued)**
8.4.2	**Type and extent of control (continued)**
Summary of Requirements (continued)	c) The following shall be considered: a. The way in which the externally provided processes, products and services might potentially impact the Organisation's position regarding its consistent fulfilment of customer and applicable statutory and regulatory requirements b. The degree to which the controls applied by the external provider are effective. d) It shall be ensured that the externally provided processes, products and services fulfil requirements through the determination of the required verification or other activities.
8.4.3	**Information for external providers**
Summary of Requirements	The suitability of requirements shall be ensured by the Organisation before they are communicated to the external provider. The Organisation's requirements for the following shall be communicated to external providers: a) The provision of processes, products and services b) The approval of the following: a. Products and services b. Methods, processes and equipment c. The release of products and services. c) Competence, which includes any essential qualification of persons d) The external providers' interactions with the Organisation e) The Organisation's application of control and monitoring of the external providers' performance f) Activities relating to verification or validation that the Organisation, or its customer, plans to carry out at the external providers' premises.

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8.4	**Control of externally provided products and services (continued)**
	STATEMENT/PROCEDURE
1.	A regularly updated List of Approved Providers and Sub-contractors is in place. New providers and sub-contractors are selected based on a number of criteria that may include: 1. Ability to supply products or services to British/European/International Standards 2. Quality – samples may be obtained 3. Availability and delivery 4. Cost and Terms of Business 5. Historical supply performance 6. Customer specified requirements 7. Published technical data 8. Location 9. Technical support 10. ISO 9000 and 14001 status.
2.	Before new providers or sub-contractors are added to the list, the Organisation's approval procedure is followed with completed supplier/sub-contractor approval questionnaires retained.
3.	New providers are only added to the list once their initial Order has proved satisfactory.
4.	All providers of quality critical items and sub-contractors are selected from the List of Approved Providers and Sub-contractors.
5.	Orders for consumables and frequently ordered food products are placed to maintain previously determined stock levels.
6.	One off Orders may be placed with non-approved providers with the specific authority of the Director/Registered Manager. Such Orders must be clearly identified in order to highlight that additional incoming goods inspection may be required.
7.	Providers of subcontracted services are contacted by telephone, e-mail or note confirming the scope of the services required.

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8.4	**Control of externally provided products and services (continued)**
8.	On receipt, goods in are checked for conformity with the Purchase Order, the provider's delivery documents and for transit damage.
9.	If any damage or order discrepancy is identified the provider is contacted in order to address the issue and a record of the occurrence is made on a Management Information/ Non-conformance Report passed to the Quality Manager for discussion at the next Management Review in accordance with the relevant procedures described in Section 9.3 (Management Review).
10.	Providers and sub-contractors who continually fail to meet the Organisation's delivery and quality standard requirements are removed from the List of Approved Providers and Sub-contractors.
11.	Should there be a requirement for verification at the supplier's premises, by either the Organisation or the customer's representative, then the details of the verification processes to be used are described in the purchasing documents.

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8.5	**Production and service provision**
8.5.1	**Control of production and service provision**
Summary of Requirements	Production and service provision shall be put into practice by the Organisation under controlled conditions. Controlled conditions include the following, as applicable: a) The availability of documented information, defining: a. The characteristics of the products to be manufactured, the services to be delivered, or the activities to be carried out b. The results to be accomplished b) The availability and use of appropriate monitoring and measuring resources c) In order to ensure that criteria for control of processes or outputs, and acceptance criteria for products and services, have been met, monitoring and measurement activities shall put into practice at appropriate stages d) Suitable infrastructure and environment shall be used for the operation of processes e) Competent persons shall be appointed, which includes any necessary qualification f) The ability to achieve planned results of the processes for production and service provision, where the resulting output cannot be verified by monitoring or measurement carried out afterwards, shall be validated and periodically revalidated g) Preventive actions shall be carried out to avert human error h) Release, delivery and post-delivery activities shall be put into practice.

	STATEMENT/PROCEDURE
1.	All staff carry out their work reflecting: 1. Agreements with customers 2. Their skills, training, qualifications and experience 3. Further instructions from more senior management 4. Further instructions from customers. Therefore documented generic work instructions are not considered appropriate.

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8.5	**Production and service provision (continued)**
2.	Upon arrival at the home new residents are provided with, and have explained to them, a copy of the Tenancy Contract and Support Contract in traditional text or 'easy read' format as appropriate.
3.	All residents are advised of the ability to receive support from third parties prior to signing the Contracts and this is recorded as part of the Tenancy and Handbook confirmation procedure.
4.	A Client Handbook is provided and signed for on the Tenancy and Handbook Confirmation slip detailing the services the resident can expect.
5.	A copy of the completed Tenancy and Handbook Confirmation slip is retained.
6.	A Resident File is generated and populated with the following: 1. Personal data 2. History of support needed 3. Risk Assessments and Support Planning 4. Essential Action Planning 5. Monthly Reviews 6. Accident/Incident Forms 7. Legal correspondence 8. Social Services/Health Authority assessments and reviews 9. Medical information 10. Vital Signs Forms 11. Sickness Certificate copies 12. Support Tenancy Contracts 13. Financial Information 14. DWP/PIP Forms 15. Client and Family Quality Surveys 16. Written correspondence 17. Tenancy and Handbook Confirmation Slip.
7.	Support Plans received from Social Services are appraised and amended as necessary on a monthly basis throughout the resident's stay.
8.	Resident care reviews are completed on site by social workers with a copy of the report retained in the Resident File.

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8.5	**Production and service provision (continued)**
8.5.2	**Identification and traceability**
Summary of Requirements	Suitable means shall be used by the Organisation to identify outputs when it needs to ensure that products and services conform to requirements. The status of outputs regarding monitoring and measurement requirements throughout production and service provision shall be identified by the Organisation. When traceability is a requirement, the unique identification of the outputs shall be controlled and in order to enable traceability, the required documented information shall be kept.

	STATEMENT/PROCEDURE
1.	The Organisation is able to identify the status of tender applications at any stage of the process with reference to the Proactis Portal records.
2.	Unique identification is provided by the initial customer number provided at the Tender stage and resident's name.
3.	Carer traceability is recorded by the use of Timesheets completed on a monthly basis checked by the off duty Supervisor prior to submission to the Director/Registered Manager.
4.	If additional traceability is required by the customer the method of providing this is agreed prior to the work commencing.

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8.5	**Production and service provision (continued)**
8.5.3	**Property belonging to customers or external providers**
Summary of Requirements	While under the Organisation's control or in use by the Organisation, care shall be exercised with customer-owned property or property owned by external providers. The identification, verification, protection and safeguarding of customers' or external providers' property which has been provided for use or is to be incorporated into the products and services. The customer or external provider shall be notified in the event that the property of a customer or external provider is lost, damaged or otherwise found to be unsuitable for use, and documented information on what has occurred shall be kept.

	STATEMENT/PROCEDURE
1.	On its receipt by the Organisation, customer property is clearly identified and subsequently processed in accordance with the relevant procedures set out in Section 8.5.4.
2.	All data and information provided by customers are treated as confidential in accordance with the requirements of the Data Protection Act 1998 and are protected using suitable physical and electronic protection methods.
3.	Customers are notified of any loss, corruption, or other damage to their data, information or property.

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8.5	**Production and service provision (continued)**
8.5.4	**Preservation**
Summary Of Requirements	In order that conformity to requirements is ensured, outputs shall be preserved by the Organisation during production and service provision to the extent necessary.

	STATEMENT/PROCEDURE
	IDENTIFICATION
1.	Procedures relating to identification, handling, storage and protection are identified as part of day to day operations of the Organisation.
2.	All items are identifiable by their unique composition or by reference to the manufacturer's packaging, marking or labelling.
3.	Whenever appropriate, Risk Assessments are carried out and documented according to the requirements of the Health & Safety at Work Act and similar legislation and regulation.
	PROTECTION
4.	Personal Protective Equipment (PPE) is issued training is provided and records maintained.
5.	All equipment is used with due regard to the relevant Health & Safety guidelines and the Organisation's Health & Safety Policy in operation at that time.
	HANDLING
6.	Handling of all equipment, products and materials is by recognised methods and techniques for the type of equipment or product being handled.
7.	When handling requirements are covered by legislation, codes of practice or regulations only suitably trained, qualified and/or experienced staff are assigned to the activity.

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8.5	**Production and service provision (continued)**
	STORAGE
8.	Where applicable, CoSHH regulations are applied to any substance falling into this category. Product data sheets for materials and chemicals are sourced and issued to staff as required.
9.	Hazardous items covered by CoSHH regulations or otherwise considered dangerous, are stored in a locked or manned office. Access to these items is restricted and the storage is appropriately marked.

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8.5	**Production and service provision (continued)**
8.5.5	**Post-delivery activities**
Summary of Requirements	Requirements for post-delivery activities related to the products and services shall be fulfilled by the Organisation. The Organisation shall consider the following as it determines the extent of post-delivery activities required: a) Any requirements of a statutory or regulatory nature b) The possible unwanted consequences related to its products and services c) The products' and services' nature, use and planned lifetime d) Customer requirements e) Customer feedback.

	STATEMENT/PROCEDURE
1.	Upon departure from the home the resident is assisted with the relocation of their belongings to their new dwelling.
2.	A post accommodation advice service is available to all residents following their departure.

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8.5	**Production and service provision (continued)**
8.5.6	**Control of changes**
Summary of Requirements	Changes for production or service provision shall be reviewed and controlled by the Organisation to the extent necessary so that continuing conformity with requirements is ensured. Documented information which details the results of the review of changes, the person(s) authorising the change, and any necessary actions resulting from the review shall be kept by the Organisation.

	STATEMENT/PROCEDURE
1.	A formal change control process is in place to ensure the proper evaluation and approval of all proposed significant changes to production and service provision.
2.	A Quality Change Control Record is used identifying the following: 1. Details of the change 2. Purpose and consequences of the change 3. Resource availability 4. Responsibilities and Authorities.
3.	Additionally comprehensive e-mail records are recorded of any changes identified by either the Organisation or customer as part of the service provision.

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8.6	Release of products and services
Summary of Requirements	In order to verify that the product and service requirements have been fulfilled, planned arrangements shall be put into practice by the Organisation at appropriate stages. Unless given approval by an appropriate authority and, as applicable, by the customer, the release of products and services to the customer shall not take place before the satisfactory completion of planned arrangements. Documented information shall be kept by the Organisation regarding the release of products and services. The documented information includes: a) Evidence of conformity with the acceptance criteria b) Traceability to the person(s) having authority to allow the release.

	STATEMENT/PROCEDURE
1.	Each member of staff is responsible for verification of their own work. Other than periodic management supervision no secondary in-process inspection or verification is required.
2.	All provider and sub-contractor services are continually monitored throughout their Delivery and Non-conformance Records are made as appropriate.
3.	Invoices are sent out to the customer in accordance with the terms of the original Contract.
4.	Acceptance and payment of the Final Invoice confirms completion of the order.

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8.7	**Control of non-conforming outputs**
8.7.1	
Summary of Requirements	When outputs do not conform to their requirements, the Organisation shall ensure that these are identified and controlled for the prevention of any unintended use or delivery. Based on the nature of the non-conformity and its effect on the conformity of products and services, appropriate action shall be taken by the Organisation. Any appropriate action shall also be taken by the Organisation regarding any non-conforming products and services detected after delivery of products, during or after the provision of services. Non-conforming outputs shall be dealt with in one or more of the following ways: a) Correction b) Segregation, containment, return or suspension of provision of products and services c) Notifying the customer d) Acquiring authorisation for acceptance under concession. When non-conforming outputs are corrected, conformance with any requirements shall be ensured through verification.
8.7.2	
Summary of Requirements	Documented information shall be kept by the Organisation that: a) Details the non-conformity b) Details any actions taken c) Details any concessions obtained d) Designates the authority deciding the action regarding the non-conformity.

	STATEMENT/PROCEDURE
1.	All activities not meeting the requirements of the Quality Management System or agreements with customers are suspended pending further action.

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8 - OPERATION

8.7	**Control of non-conforming outputs (continued)**
2.	All materials, products, services and sub-contractor performance not meeting the required specification are clearly identified and/or segregated pending a decision regarding their further disposition.
3.	Non-conformances are investigated in order to establish their cause.
4.	A record is kept on a Non-conformance Report of all non-conformances with a clear explanation of the identified cause and details of any corrective action carried out.
5.	All consequences of the non-conformance are similarly controlled.
6.	Non-conforming items are clearly marked and held in a designated quarantine area pending return to the supplier. They will then be subject to the provision of either replacement items or the issue of a Credit Note, as appropriate and agreed.
7.	Any non-conforming items identified at delivery inspection are not signed for on the Delivery Note and are returned to the supplier. If not identified as part of the delivery inspection the Accounts Department will be advised at the earliest opportunity.
8.	The Organisation records instances of non-conformance or customer complaints on a Non-conformance Report, Concern Form/Customer Complaint Form as applicable and appropriate actions are taken to rectify issues raised.
9.	Actions are recorded on a Non-conformance Report or Customer Complaint/Concern Form that is kept on file at the Organisation's Office for reference.
10.	Unsatisfactory provider performance is also recorded on Non-conformance Reports together with any actions taken. This may include removal from the List of Approved Providers and Sub-contractors in extreme cases.
11.	Non-conformances relating to sub-contractors and sub-contracted services are recorded as non-conformances and these records are passed to the Quality Manager for immediate attention and to the next Management Review.

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9 - PERFORMANCE EVALUATION

9.1	**Monitoring, measurement, analysis and evaluation**
9.1.1	**General**
Summary of Requirements	The following shall be determined by the Organisation: a) Items requiring monitoring and measurement b) In order to ensure valid results, any required methods for monitoring, measurement, analysis and evaluation c) Scheduling of the monitoring and measuring d) Scheduling of analysis and evaluation of the results from monitoring and measurement. The performance and effectiveness of the Quality Management System shall be evaluated by the Organisation. Appropriate documented information shall be kept by the Organisation as evidence of the results.

	STATEMENT/PROCEDURE
1.	The Organisation monitors, measures, analyses and improves its processes in order to: 1. Demonstrate conformity of its activities 2. Ensure conformity to the Quality Management System 3. Continually improve the effectiveness of the Quality Management System.
2.	The Organisation continuously employs statistical analysis techniques to measure and monitor product improvement and conformity. These techniques may relate to: 1. Data analysis 2. Performance testing 3. Defect analysis.

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9 - PERFORMANCE EVALUATION

9.1.1	**General (continued)**
3.	Information obtained by such statistical analysis may relate to: 1. Trends 2. Operational performance 3. Levels of customer satisfaction 4. Overall effectiveness and efficiency.
4.	Monitoring and measurement of processes are achieved by implementation of the procedures set out in Sections 9.2 (Internal audit) and 9.3 (Management review).
5.	Documents used to facilitate the monitoring and measurement of processes include but are not limited to: 1. Quality Audit Records 2. Customer Feedback Records 3. Non-conformance Records.

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9 - PERFORMANCE EVALUATION

9.1	**Monitoring, measurement, analysis and evaluation (continued)**
9.1.2	**Customer satisfaction**
Summary of Requirements	Customers' perceptions of the extent to which their requirements and expectations have been met shall be monitored by the Organisation. The methods for acquiring, monitoring and reviewing this information shall be determined by the Organisation. Customer surveys, customer feedback on delivered products and services, meetings with customers, market-share analysis, compliments, warranty claims and dealer reports are all examples of monitoring customer perceptions.

	STATEMENT/PROCEDURE
1.	All personnel maintain close relationships with customers and actively monitor their level of satisfaction with the Organisation's activities.
2.	All observations received, whether positive or negative, are recorded on a Management Information Report and subsequently administered accordingly.
3.	In addition, a representative sample of customers are requested to complete a Quality Assurance Profile questionnaire. The questionnaire is designed to gain resident perceptions of whether the Organisation has met their expectations.
4.	Completed resident questionnaires are collated, analysed and the findings reviewed as part of Management Review activities in order to identify quality related trends.

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9 - PERFORMANCE EVALUATION

9.1	**Monitoring, measurement, analysis and evaluation (continued)**
9.1.3	**Analysis and evaluation**
Summary of Requirements	Appropriate data and information arising from monitoring and measurement shall be analysed and evaluated by the Organisation. The following shall be evaluated using the results of analysis: a) Conformity of products and services b) The level of customer satisfaction c) The performance and effectiveness of the Quality Management System d) The extent to which planning has been put into practice effectively e) How effective any actions taken to address risks and opportunities have been f) External providers' performance g) The necessity for improvements to the Quality Management System.

	STATEMENT/PROCEDURE
1.	The following data is analysed in order to identify trends and opportunities for preventive and/or improvement actions: 1. Customer Satisfaction Monitoring Records 2. Product and/or Service Conformity Records 3. Product and/or service trends 4. Results of internal Quality Audits as a measurement of the effectiveness of the Quality Management System 5. Non-conformance Records.
2.	The analysed data is presented as critical input into the Management Review process set out in Section 9.3.

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9 - PERFORMANCE EVALUATION

9.2	**Internal audit**
9.2.1	
Summary of Requirements	Internal audits shall be carried out at planned intervals by the Organisation for the provision of information regarding whether the Quality Management System: a) Conforms to: a. The Organisation's own requirements for its Quality Management System b. The requirements of the International Standard b) Is put into practice and maintained effectively.
9.2.2	
Summary of Requirements	The following shall be carried out by the Organisation: a) An audit programme(s), including the frequency, methods, responsibilities, planning requirements and reporting shall be planned, set up, put into practice and maintained, taking into consideration the importance of the related processes, changes affecting the Organisation, and previous audit results b) For each audit, the audit criteria and scope shall be defined c) Auditors shall be selected and audits conducted to ensure objectivity and the impartiality of the audit process d) The Organisation shall ensure that relevant management are notified of audit results e) Appropriate correction and corrective actions shall be undertaken in a timely manner f) Documented information shall be kept to demonstrate that the audit programme and the audit results are being put into practice.

	STATEMENT/PROCEDURE
1.	A Quality Audit Programme is maintained by the Quality Manger ensuring that every Section of the Quality Management System is verified at least annually.
2.	More frequent Quality Audits may be organised by the Quality Manger depending on the importance of the activities being audited.

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9 - PERFORMANCE EVALUATION

9.2	**Internal audit (continued)**
3.	Internal Quality Audits are carried out according to the following procedures:
4.	At the beginning of every month, the Quality Manger consults the Quality Audit Programme and establishes which, if any, parts of the Quality Management System are to be audited during the coming month.
5.	A member of staff, whenever possible independent of the activity to be audited, is appointed by the Quality Manger.
6.	The Auditor refers to the Quality Manual and determines the activities to be audited.
7.	The Auditor selects a representative number of records to be audited on a random basis.
8.	The Auditor advises any personnel concerned that a Quality Audit is being undertaken and answers any questions they may have regarding the audit.
9.	The Auditor examines the records selected in order to determine whether the activities identified above have been carried out correctly.
10.	The Auditor keeps a record of the process and the findings of the Quality Audit.
11.	The Quality Audit Record and all other documents relating to internal audits are passed to the Quality Manger.
12.	The Quality Audit Record and all other documents relating to internal Quality Audits are retained for inspection by QMS International at the annual external Quality Audit.
13.	All issues arising from the internal Quality Audit requiring immediate attention are discussed with the appropriate personnel and a record is kept on a Quality Audit Report or Management Information Report as appropriate.
14.	The Quality Manger ensures that the Quality Audit results are discussed at the next Management Review.

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9 - PERFORMANCE EVALUATION

9.3	**Management Review**
9.3.1	**General**
9.3.2	**Management Review inputs**
9.3.3	**Management Review outputs**
Summary of Requirements	At planned intervals the Organisation's Quality Management System shall be reviewed by top management so that its ongoing suitability, adequacy, effectiveness and alignment with the strategic direction of the Organisation may be ensured.

	STATEMENT/PROCEDURE
1.	As part of the initial implementation of the Quality Management System, a Management Review was held during the first two months of its adoption in accordance with the procedures set out below.
2.	A Management Review is carried out at not greater than three-monthly intervals and addresses, in addition to general matters, the following: 1. Non-conformance Records 2. Status of corrective actions 3. Management Information trend analysis 4. Follow up actions from earlier Management Reviews 5. The extent to which Quality Objectives have been met 6. Monitoring and measurement results, including audits 7. The effectiveness of actions taken to address risks and opportunities 8. Changes in the external and internal issues that could affect the Quality Management System, including requirements for additional or revised resources 9. The Organisation's Quality Policy, Objectives and goals in order to determine whether they remain relevant to the requirements of customers and management 10. The overall operation of the Organisation's Quality Management System in order to determine its continuing suitability and effectiveness

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9 - PERFORMANCE EVALUATION

9.3	**Management Review (continued)**
2./ continued	11. Opportunities for improvement 12. The performance of external providers, including any required actions resulting from unsatisfactory performance 13. Staff training and competence requirements 14. Customer satisfaction and feedback from relevant interested parties.
3.	The agenda and minutes of Management Reviews are retained in accordance with Section 7.5.3.

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10 - IMPROVEMENT

10.1	**General**
Summary of Requirements	Opportunities for improvement shall be determined and selected by the Organisation and any necessary actions to fulfil customer requirements and improve customer satisfaction shall be carried out. Included in these are: a) The improvement of products and services to fulfil requirements as well as for addressing future needs and expectations b) Correcting, preventing or reducing unwanted effects c) The improvement of the performance and effectiveness of the Quality Management System.

	STATEMENT/PROCEDURE
1.	The effectiveness of the Quality Management System is continually reviewed and improved through the Management Review process set out in Section 9.3 and by: 1. The application of the Quality Policy 2. The application of the Quality Objectives 3. Quality Audits 4. Analysis of data 5. Corrective actions 6. The evaluation and treatment of risks and opportunities 7. Circulation of Management Review Minutes.

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10 - IMPROVEMENT

10.2	**Non-conformity and corrective action**
10.2.1	
Summary of Requirements	In the event of a non-conformity, including any resulting from complaints, the Organisation shall do the following: a) Respond to the non-conformity and, as applicable: a. Take measures to control and correct it b. Handle the outcomes. b) Assess the requirement to act to remove the cause(s) of the non-conformity, to prevent its occurrence or recurrence elsewhere, through: a. The review and analysis of the non-conformity b. The determination of the causes of the non-conformity c. The determination of whether similar non-conformities exist, or could potentially occur. c) Put any necessary action into practice d) Review the effectiveness of any corrective action carried out e) If necessary, update risks and opportunities ascertained at planning stage f) If necessary, make changes to the Quality Management System Corrective actions shall be appropriate to the effects of the non-conformities in question.
10.2.2	
Summary of Requirements	Documented information shall be kept as evidence of the following: a) The nature of the non-conformities and any actions taken subsequently b) The results of any corrective action.

	STATEMENT/PROCEDURE
1.	The nature of, and action taken to correct, any non-conformances is recorded on the Non-conformance Report/Concern Form/Customer Complaint Form as appropriate.
2.	An investigation is undertaken to determine the cause of the non-conformance.

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10 - IMPROVEMENT

10.2	**Non-conformity and corrective action (continued)**
3.	The corrective actions taken to prevent recurrence of non-conformances, and those records and reports generated, are regularly reviewed at Management Reviews in order to identify any trends and to determine the effectiveness of preventive measures taken.
4.	Revised procedures are developed and implemented as considered appropriate and are reviewed accordingly.

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10 - IMPROVEMENT

10.3	**Continual improvement**
Summary of Requirements	The suitability, adequacy and effectiveness of the Quality Management System shall be continually improved by the Organisation. The results of analysis and evaluation, and the outputs from Management Review, shall be considered by the Organisation so that any needs or opportunities requiring attention as part of continual improvement may be determined.

	STATEMENT/PROCEDURE
1.	The Organisation ensures continual improvement of the suitability, adequacy and effectiveness of the Quality Management System by application of the procedures documented in Section 10.1.