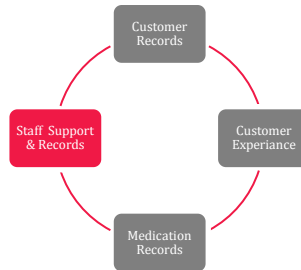


This guidance document sets out the expectations for Registered Managers in relation to the relevant minimum checks that should be completed in their service and the frequency of these checks relating to **Staff Support and Records**.



#### (4) Staff Support and Records

Area	Frequency	Quality Check
<b>Employee Files</b>	Registered Manager to complete a random check of 2 staff files per month, and all new staff started each month.	<p>Are all records present that should be?</p> <ul style="list-style-type: none"> <li>• Application form and employment history include explanation for any gaps</li> <li>• References from previous employment</li> <li>• Contract</li> <li>• Proof of ID – including recent photograph</li> <li>• DBS Reference number and within 3 years of issue by ECL.</li> <li>• Confirmation they are physically and mentally fit to complete the role.</li> <li>• Supervision Records</li> <li>• PMR</li> <li>• Right to work in the UK.</li> <li>• Training Records/Certificates</li> </ul> <p>Has the staff member received regular supervision in line with the policy requirement?</p> <p>Has the staff member received regular observation of practice in line with the policy requirement?</p> <p>Where information is missing, ensure this is followed up with appropriate ECL staff.</p> <p>Record findings on QAF15 Employee File Monthly Check. Ensure a copy is kept on the teamshare for audit purposes.</p>
<b>Employee Training</b>	Monthly by all managers of staff who work in the regulated service.	<p>To check the relevant information records, such as RADAR or local compliance matrix to ensure that their direct reports have the appropriate and up to date;</p> <ul style="list-style-type: none"> <li>• Mandatory Training</li> <li>• Care Certificate module training</li> <li>• Other relevant training for the role</li> </ul> <p>Where training is due for renewal or overdue this must be booked on.</p>

<b>Performance Management Review and Personal Development Needs</b>	Yearly by all managers of staff who work in the regulated service.	Ensure all staff have had a performance management review for the last year and new objective set for the coming year.  Ensure all staff have had a review of their personal development needs for the coming year.
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## Relevant CQC Regulation

### CQC Requirement 17 – Good Governance

#### Component of the regulation

#### **17(1) Systems or processes must be established and operated effectively to ensure compliance with the requirements in this Part.**

Providers must operate effective systems and processes to make sure they assess and monitor their service against Regulations 4 to 20A of Part 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (as amended). The provider must have a process in place to make sure this happens at all times and in response to the changing needs of people who use the service.

The system must include scrutiny and overall responsibility at board level or equivalent.

Without limiting paragraph (1), such systems or processes must enable the registered person, in particular, to—

#### **17(2)(d) maintain securely such other records as are necessary to be kept in relation to—**

- (i) persons employed in the carrying on of the regulated activity, and**
- (ii) the management of the regulated activity;**

Records relating to people employed and the management of regulated activities must be created, amended, stored and destroyed in accordance with current legislation and guidance.

Records relating to people employed must include information relevant to their employment in the role including information relating to the requirements under Regulations 4 to 7 and Regulation 19 of this part (part 3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This applies to all staff, not just newly appointed staff. Providers must observe data protection legislation about the retention of confidential personal information.

Records relating to the management of regulated activities means anything relevant to the planning and delivery of care and treatment. This may include governance arrangements such as policies and procedures, service and maintenance records, audits and reviews, purchasing, action plans in response to risk and incidents.

Records must be kept secure at all times and only accessed, amended or destroyed by people who are authorised to do so. Information in all formats must be managed in line with current legislation and guidance. Systems and processes must support the confidentiality of people using the service and not contravene the Data Protection Act 1998.

### CQC Requirement 18 - Staffing

#### Component of the regulation

#### **18(1) Sufficient numbers of suitably qualified, competent, skilled and experienced persons must be deployed in order to meet the requirements of this Part.**

Providers must deploy sufficient numbers of suitably qualified, competent, skilled and experienced staff to make sure that they can meet people's care and treatment needs and therefore meet the requirements of Section 2 of these regulations (the fundamental standards).

Providers should have a systematic approach to determine the number of staff and range of skills required in order to meet the needs of people using the service and keep them safe at all times. The approach they use must reflect current legislation and guidance where it is available. In determining the number of staff and range of skills required to meet people's needs, they should consider the different levels of skills and competence required to meet those needs, the registered professional and support workers needed, supervision needs and leadership requirements.

Staffing levels and skill mix must be reviewed continuously and adapted to respond to the changing needs and circumstances of people using the service.

There should be procedures to follow in an emergency that make sure sufficient and suitable people are deployed to cover both the emergency and the routine work of the service.

18(2) Persons employed by the service provider in the provision of a regulated activity must—

**18(2)(a ) receive such appropriate support, training, professional development, supervision and appraisal as is necessary to enable them to carry out the duties they are employed to perform,**

Providers must ensure that they have an induction programme that prepares staff for their role. It is expected that providers that employ healthcare assistants and social care support workers should follow the Care Certificate standards to make sure new staff are supported, skilled and assessed as competent to carry out their roles.

Training, learning and development needs of individual staff members must be carried out at the start of employment and reviewed at appropriate intervals during the course of employment. Staff must be supported to undertake training, learning and development to enable them to fulfil the requirements of their role.

Where appropriate, staff must be supervised until they can demonstrate required/acceptable levels of competence to carry out their role unsupervised.

Staff should receive appropriate ongoing or periodic supervision in their role to make sure competence is maintained.

Staff should be supported to make sure they are can participate in:

- Statutory training.
- Other mandatory training, as defined by the provider for their role.
- Any additional training identified as necessary to carry out regulated activities as part of their job duties and, in particular, to maintain necessary skills to meet the needs of the people they care for and support.
- Other learning and development opportunities required to enable them to fulfil their role. This includes first aid training for people working in the adult social care sector.

All learning and development and required training completed should be monitored and appropriate action taken quickly when training requirements are not being met.

Staff should receive regular appraisal of their performance in their role from an appropriately skilled and experienced person and any training, learning and development needs should be identified, planned for and supported.

Health, social and other care professionals must have access to clinical or professional supervision as required, in line with the requirements of the relevant professional regulator.

**18(2)(b) be enabled where appropriate to obtain further qualifications appropriate to the work they perform, and**

Providers must support staff to obtain appropriate further qualifications that would enable them to continue to perform their role. Providers must not act in a way that prevents or limits staff from obtaining further qualifications that are appropriate to their role.

**18(2)(c) where such persons are health care professionals, social workers or other professionals registered with a health care or social care regulator, be enabled to provide evidence to the regulator in question demonstrating, where it is possible to do so, that they continue to meet the professional standards which are a condition of their ability to practise or a requirement of their role.**

Where registration with a professional body is a requirement of the role, providers must make sure that staff are able to meet the requirements of the relevant professional regulator throughout their employment, such as requirements for continuing professional development.

Staff should be supported to join Accredited Voluntary Registers if they wish. Providers must have appropriate systems in place to support this, such as revalidation and meeting codes of practice. Providers must not act in a way that prevents, limits or would result in staff not meeting requirements required by professional regulators