



QUALITY POLICY

1.

OVERVIEW OF SPODA

1.1 Vision

Our vision is for a community where everyone living with or affected by someone else's substance misuse can achieve a quality of life that promotes social inclusion, choice and change.

1.2 Mission

Our mission is to provide information, advice and support to those affected by someone else's substance misuse.

1.3 Our Values

- Be non judgemental and supportive
- Treat everyone with courtesy, dignity and respect and pay due regard to diversity
- Be a voice for our client group
- Ensure our services reflect the diverse needs of our communities
- Provide the best possible within available resources
- Be open to learning, change and innovation and use this to improve our services

1.4 Our aims

The preservation of mental, emotional and psychical health; the relief of need and the advancement of education for families, carers and friends of people affected by another's substance use.

To provide for the benefit of the public, assistance through conciliation for families, partners, carers and friends whose relationships have broken down as a result of another person's substance use and to advise and help in the settlement of differences.

Our Objectives will be achieved by providing:

- Information around potential problems and harm caused by the effects to all concerned others residing within Derbyshire.
- Advice in coping strategies and education surrounding substances, their effects and the law and to ensure that families, carers and friends are aware of their rights.
- Effective support for families, carers and friends whilst taking into account the principles of harm reduction
- Advocacy by being a local voice for all families and their loved ones to improve service provision for the substance user, their concerned other and the communities in which they reside

2.

QUALITY MANAGEMENT SYSTEM

SPODA has a commitment to quality and a formal quality management system (QMS) that addresses the following areas:

- Quality and clinical governance
- Performance monitoring and review
- Equal Opportunities
- Health and Safety
- Policy and Procedures
- Managing external relationships
- Human Resources management
- Financial Management
- Strategic and business planning
- Human resource development
- Carer/User involvement
- The learning culture of the organisation
- Service innovation.

The QMS is based on QUADS, organisational standards for drug and alcohol services and compliant with NHS Standards for Better Health and the Public Health Outcomes Framework. The QMS assists implementation of SPODA's governance framework, which aims to bring about continuous improvement through the collection and analysis of service data.

The Management Team and the board of Trustees are responsible for implementing the QMS and ensuring the system is understood and complied with at all levels of the organisation.

They are responsible for ensuring that all staff:

- Are aware of the policies and objectives of the organisation
- Are committed to implementing SPODAS Quality Management System
- Understand service user requirements
- Create positive internal and external communications
- Understanding of the organisation's processes
- Understanding how statutory and regulatory requirements impact on the organisation and service users
- Understand their area of responsibility
- Use time and resources efficiently
- Reduce wastage
- Contribute to high levels of morale and motivation within the organisation.

SPODA's Quality Management System is managed by the Project and the Office Manager. All senior workers are responsible for ensuring awareness of the processes. All staff are required to maintain the system and to have a stake in improvements to efficiency.

An internal audit of procedures and policies is conducted annually by the manager and the Board of Trustees. A review of the Quality Objectives (aligned with the business plans strategic objectives) takes place annually. In addition achievement of the quality objectives are measured against quarterly targets set in relation to the business plan and agreements with commissioners. Staff contribution towards the Quality Objectives are measured in supervision and documented appropriately.

3 CONTROL OF DOCUMENTS

All documents are maintained and controlled by the Manager and the Board of Trustees. Policy and procedure documents are reviewed annually. Any documents requiring amendment are updated, authorised, and completed. All updates to documents are signed and dated by the Manager or the Chair of SPODA. Documents are re-issued as an electronic PDF document and a limited number of hard copies are produced. Obsolete documents will be archived and restricted, electronic copies of all past versions are kept.

The manager and senior workforce hold responsibility for cascading information to staff.

3.1 Implementation

- **REFER TO: SPODA's Employee Handbook**

4 CONTROL OF RECORDS

All project documents are stored in appropriate electronic folders and managed by the administration office. Hard copies of documents are restricted to a minimum and should not be produced unnecessarily. Electronic records are encouraged over hard copies due to environmental concerns, available storage space and to prevent unnecessary expenditure.

Each department maintains its own systems. Records, both electronic and hard copies, should be legible and easy identifiable. Filing and storage should be chronological or thematic and consistency should be maintained – this is determined by each department. Where databases are in use, relevant documents should be scanned and attached where possible. Email correspondence should be filed thematically where appropriate.

4.1 Client Records

In line with NHS and Caldecott guidelines SPODA will store service user files for a minimum of 8 years unless exceptional circumstances dictate otherwise.

SPODA will ensure that computer passwords are changed periodically and that sensitive data is always backed up. Any written information relating to service users will be kept securely.

5 MANAGEMENT COMMITMENT

5.1 Role of Management Team

SPODA's management team are committed to the development and implementation of a Quality policy and to frequently review this system.

Business plan objectives are established every three years by the Board of Trustees and the management team. SPODA's quality objectives are aligned to specific business plan objectives.

5.1.1 Implementation

1. Business plan strategic objectives are established as part of the planning cycle and authorised by the Board of the Trustees
2. The Quality objectives for the three year plan are aligned with specific strategic business plan objectives
3. Specific actions are set relating to each strategic business aim or quality objective

5.2 Customer Focus

SPODA's management team are committed to ensuring that services meet the diverse needs of our clients. The involvement of service users in developing effective and robust services is a high priority within our organisational framework in order that service users have the opportunity to say how they would wish to be treated.

5.2.1 Implementation

Service Users

A service user involvement framework is established for each service including a combination of the following:

- Satisfaction surveys and questionnaires (recorded)
- Carer forums as steering groups for implementation of new service provision

5.3 Quality Policy

Our vision is for a community where everyone living with and /or affected by someone else's substance use can achieve a quality of life that promotes social inclusion, choice and change.

It is our policy to maintain a quality system designed to meet our quality objectives relating to the people who use our services and to review and improve our systems and processes of service delivery.

This Quality policy defines our quality objectives and top line management responsibilities. All training that personnel receive emphasises an understanding of quality and its impact on client satisfaction. Client satisfaction is an essential part of the quality process.

To ensure the organisation maintains its awareness for continuous improvement, the quality process is regularly reviewed and is subject to annual audit.

The requirements of the organisation's quality system are mandatory and all company personnel have a responsibility and obligation to it.

5.4 Quality Objectives

Our objectives are set out in our business plan and are then implemented via the Project Manager. These objectives are monitored via individual appraisals & team meetings. SPODA's Quality objectives are as follows:

Objective 1: Information – SPODA will continue to provide information around potential problems and harm caused by the effects of substance use;

Objective 2: Advice – SPODA will advise on coping strategies and education surrounding substances, their effects and the law;

Objective 3: Support – SPODA will continue to provide effective support for parents, families, carers and friends whilst taking into account the principles of harm reduction;

Objective 4: Advocacy – SPODA will be a local voice for all families and their loved ones to improve service provision for the substance user, their concerned others and the communities which they reside in.

5.5 Quality Management System Planning

Management will ensure the Quality Management System is carried out in order to meet the requirements as well as the organisational quality objectives. The management team will also maintain the integrity of the quality management system whenever changes to the system are planned or implemented.

5.5.1 Implementation

1. Business plan strategic objectives are established as part of the planning cycle and authorised by the Board of the Trustees
2. The actions relating to the quality objectives are reviewed each quarter in Trustees meetings.
3. Quality objectives reviewed each quarter by measuring against actions. Audits, and data monitoring feed into the process.

Changes to the Quality policy regarding planned or implemented changes are cascaded via communication channels.

5.6 Responsibility, authority and communication

The management structure within SPODA is shown as an organisation

5.6.1 Management Representative

The Quality Management representative is responsible for the maintenance, measurement and review of our Quality Management System. The Quality Management representative will ensure that the processes needed for the Quality Management System are established, implemented and maintained within SPODA. In addition he/she will report to management team about system performance and need for improvement, as well as promote awareness of the need for service user involvement throughout the organisation.

5.6.2 Internal Communications

Management utilise SPODA's internal communications framework in order to disseminate information about the effectiveness of any management agenda.

5.7 Management Review

5.7.1 General

Management ensures:

- That the ongoing activities of SPODA are reviewed regularly and that any required corrective action is adequately implemented and reviewed to establish an effective preventative process
- Measurement of SPODA's performance against our declared Quality objectives
- That internal audits are conducted regularly to review progress and assist in the improvement of processes & procedures. The reviews will be discussed as part of SPODA's monthly staff meetings
- That employees have the necessary training, support, specifications and equipment to effectively carry out the work.

The management team holds planning and review meetings regularly. Minutes of these are taken and the agenda normally includes an update and discussion around the current work of all departments and service provision.

5.8 Review Input

The management team meetings review the following information:

- Risk management and the status of risk assessments
- Results of audits
- Serious untoward incidents
- Status of preventive and corrective actions
- Follow up actions from previous management reviews
- Changes that could affect policies and procedures (Quality Management System)
- Recommendations for improvements.

5.8.1 Implementation

- Meetings are scheduled
- A suggested agenda is prepared by the Chair
- Members invited to add items to the agenda
- Agenda is circulated to members
- Meeting take place
- Actions defined
- Meetings are minuted by a designated staff member
- Minutes are approved by Chair
- Minutes are circulated amongst members
- Completion of actions is reviewed at the next meeting

5.9 Review Output

The Board of Trustees and the management team reviews produce the following outputs:

- Policies and procedures are updated to make operations more efficient
- Operations and services are improved through measurement against targets and actions to improve or rectify specific areas.
- Where resources are lacking actions are put in place to rectify this.

5.9.1 Implementation

- Corrective actions are identified
- Targets created
- Improvements actioned
- Situation re-evaluated at a specified later date.

6 PROVISION OF RESOURCES

SPODA will ensure and improve effectiveness of the quality system. SPODA will also ensure that the resources needed to enhance the satisfaction and requirements of service users, service commissioners and staff are identified and in place through audit and continual review.

6.1 Human Resources General

SPODA's Employee Handbook gives comprehensive information, policies and procedures relating to Human Resources. All staff have access to this handbook. Relevant policies and procedures can be found in the following staff handbook sections:

- **REFER TO: SPODA'S EMPLOYEE HANDBOOK**

6.1.1 Competence, Awareness & Training

SPODA ensures that staff comply with the policies and procedures, and are reliable, through our recruitment practices, induction, professional development, staff supervision and performance management systems.

6.2 Infrastructure

SPODA's buildings, workspace and associated utilities are managed by the administration department led by the Manager. The procurement and management of hardware, software and supporting services such as communication and information systems are also coordinated by the Manager.

6.2.1 Implementation

Buildings, workspace and associated utilities requirements are regularly reviewed to ensure we make efficient use of office space. Both hardware and software is reviewed on an ongoing bases to ensure that office staff are equipped with fit for purpose IT equipment and software.

IT systems are maintained and serviced by an external IT company in conjunction with the manager.

The office prepares and distributes a wide range of information:

- Financial Accounts
- Management & Performance information
- Training updates
- Records for health and safety requirements

6.3 Work Environment

SPODA provides premises and sustain a work environment which is suitable in terms of capacity, range of uses, and location, to ensure effective operations. Where services are

located in shared locations or hosted in the community our reach is more restricted. Support and liaison is provided by the management team.

7 PRODUCT REALISATION

7.1 Planning of Product Realisation

SPODA product realisation comprises of the following:

- Business Development: activities including tendering for contracts and developing new services .This function is carried out by the Project Manager, the financial administrator and the office manager.
- Fundraising activities: including production of funding proposals, and fundraising events. This function is carried out by the Project Manager, the financial administrator,the office manager and team

Business Development – Establishment of services

SPODA is responsible for both the planning and delivery of its services. We work closely with service commissioners to develop services to their requirements.

The Project Manager ensures:

- Employment of staff who meet necessary competencies and standards
- That policies and procedures are in place to govern services
- Premises are secured and contracts are in place
- Contract compliance
- Relevant infrastructure is in place
- The needs of service commissioners are met

The quality objectives for services are:

- The Service Level Agreement (SLA) for each service
- Service user needs and ongoing
- National and local targets and identified needs

Outputs are measured by:

- Key Performance Indicators set in consultation with grant leads and the commissioners
- Service user consultation

Fundraising

Fund raising can be secured by charitable funding streams to *sustain* existing services and to develop new areas of work. The financial administrator, and the project manager will research potential funders and prepare fundraising proposals for trusts, foundations, companies and individual donors.

The Project Manager and the financial administrator will ensure that

- High quality relationship management
- Outputs
- Outcomes
- Timely and thorough reporting
- Tangible outcomes
- Measurable outputs

7.2 Determination of Requirements related to Product

SPODA works toward meeting various standards and requirements. One of which are key performance indicators which are determined as part of the Service Level Agreements (SLAs) for projects in the community and within the prison establishments. SPODA also adheres to other standards. With regard to the community projects this includes service specifications, relevant legislation and policy.

7.2.1 Implementation

All service requirements, including targets, reporting requirements and reviews are drawn up in contracts with service commissioners. The standard of our delivery against these contracts is then assessed in regular quarterly performance reviews, according to agreed standards and deadlines across all our projects and services.

7.3 Review of Requirements Related to Product

Prior to bidding for a service contract a number of steps are followed to ensure that SPODA is capable of meeting the requirements and that the proposed service is compliant and adaptable to our business aims.

7.3.1 Implementation

A review of the requirements is initially carried out by the Project Manager. The Project Manager then determines whether a bid should be made. This decision has to be authorised by the Trustees before the bid process can be started.

7.4 Customer Communication

Commissioners

Formal communication with commissioners is governed by agreed reviews and regular meetings. This is redefined on a case by case basis. Externally, meetings are held regularly with commissioners of SPODA's services to monitor output, outcomes and effectiveness. A complaints framework is in place for commissioners and service users.

Service users

Feedback and consultation is achieved with service users via a combination of exit questionnaires, formal and informal meetings, and service-user groups as and when required.

7.5 Purchasing Process

The supply of goods and services is based on a purchase order system. It is essential, for financial control and operational purposes that the following policy statements and procedures for ordering are complied with:

Purchasing Policy

SPODA shall have control over the purchase of its goods and services and such control shall be exercised through the purchase order system. Purchase orders (POs) are raised to ensure all expenditure has been authorised. Invoices received which are not supported by a purchase order will be returned to the supplier.

7.5.1 Implementation

When goods and services are procured a purchase order is raised with all details of the goods or service being provided. Purchase orders are matched to delivery advice notes and invoices to ensure the accuracy of the ordering system and that prices are within the guidelines of agreed expenditure. Invoices are only paid once all goods and services have been received and verified.

Reviews, verification and evaluation

Once the processes have been followed the financial data becomes comparable over a certain period of time.

Therefore, regular supplier reviews can be completed to ensure that the charity receives value for money from all its suppliers, contracts and leases.

7.5.2 Purchasing Information

Full documentation is required to obtain PO numbers, cheque requisition or credit card requisition - information relating to the expenditure, as well as evidence of cost. The authorisation levels are as follows:

| Authorisation Levels | Amount |
|--|---------------|
| Administrator – Stationery and Equipment | Up to £500 |
| Manager – Direct Debits/Standing Orders | Up to £3,000 |
| Board of Trustees – DD/SO | Over £3,000 |
| Manager - Purchases | Up to £3,000 |
| Board of Trustees – Purchases | Over £3,000 |

7.5.3 Implementation

Once all financial documentation and information has been supplied to the finance department, the relevant staff will counter sign and/or process the request for payment.

7.6 Control of Service Provision

SPODA services are explained and defined in various ways, including the Service Level Agreements (SLAs), Key Performance Indicators, Quality Standards and external and internal audit results.

7.6.1 Validation of Processes for Service Provision

SPODAS success in service delivery is predominantly measured by the proportion of people who leave the services with improved health and well being, reduced stress and strain and improved family functioning.

7.6.2 Identification & Traceability

Finance

All our supplies and goods are purchased, using controlled financial processes and procedures that require all necessary documentation to be attached when filling in cheque/BACS and credit card requisition forms or a purchase order form. The information remains traceable, comparable and measurable throughout the whole process from ordering through to purchasing over a set period of time and across a selection of suppliers.

Human Resources

Personnel records are predominantly paper records stored in locked filing cabinet. These are maintained by archiving and shredding old files as required. Information that is kept includes:

- Application Form
- Contract, Job Description, References
- Induction
- Driving and Insurance – Laptops/Mobile Phone Contracts
- Training Certificates
- CRB Identity Check and Security Vetting and Barring
- Supervision
- Absence/Return to Work
- Employee Handbook
- Emergency Contact

8 MEASUREMENT, ANALYSIS & IMPROVEMENT

8.1 Quality Standards

In all of SPODA's services there are a specific set of quality measurements developed to be used to audit each service to enable a purchaser to be assured of the quality of delivery.

Service Level Agreements (SLA) are used to identify the areas of a contract that will be measured and monitored.

8.1.1 Implementation

We review our performance as part of a continuous review of management information. These reports help us to assess whether we are meeting our performance targets and provide us with month on month business performance benchmarking information. SPODA conduct annual audits, and provide quarterly reports to the Board of Trustees.

8.2 Customer Satisfaction

Service users

The results of user satisfaction questionnaires, the outcomes of consultations, audits, complaints and comments and the informal feedback of meetings will be examined at regular intervals. Developments or corrective action with staff will be reviewed and responded to through a documented process. Feedback and outcomes will be communicated to service users and external members through a clearly documented process.

A comprehensive framework of involvement for ongoing service user and carer engagement will include:

- Satisfaction surveys
- Service user and carer representation on the SPODA Board of Trustees
- Formal links with other carers organisations
- Training and support for service users to participate
- Service user involvement in audits

8.2.1

Implementation

This framework will ensure service users are involved in quality assurance and performance management in the following ways:

- Customer satisfaction survey: conducted every year. Results are used to inform service improvement
- Complaints and comments: information received through the complaints and comments system is summarised quarterly and used to inform service improvement.

8.2.2

Corrective Actions

The complex nature of the clients we work with demands that we have flexible but effective processes and procedures in place. Day to day resource issues affecting delivery of services to clients, such as staff absences or unavailability of premises to deliver interventions are identified and managed by the management team and senior staff to ensure minimal impact upon the end users of the service.