



Quality Manual

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1. Introduction

This document is the Quality Manual of Compass Disability Services.

The Quality Manual is the property of Compass Disability Services and is a controlled document. As the trading arm of Compass Disability Services, CDST Ltd will adopt all of the policies, procedures, values, beliefs and quality standards of the charity.

The purpose of the Quality Manual is to provide an overview of Compass Disability Services, the activities it carries out and the quality standards of operation it conforms to.

It is not designed to act as a procedures manual, although it does carry information about where procedures information is located and the detailed information on documentation requirements for essential procedures, e.g. version control, document referencing, internal audit, etc.

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2. The Issue Status

The issue status is indicated by the version number in the footer of this document. It identifies the issue status of this Quality Manual.

When any part of this Quality Manual is amended, a record is made in the amendment log below.

The Quality Manual can be fully revised and re-issued at the discretion of the Board of Trustees.

Please note that this Quality Manual is only valid on the day of printing.

Issue	Issue Date	Page (s) amended	Additions/Alterations	Initials
3	15/02/11	28	Flow chart updated to reflect procedure	SA
4	24/03/11	7	Number of Employees	ME
4	24/03/11	13	Complaints Management amended to reflect new process	ME
4	24/03/11	17	Measurement amended to reflect changes in procedures	ME
4	24/03/11	18	Updated Corrective/Preventative Action	ME
4	24/03/11	29	Amended form references in Internal Audit flow chart	NW
5	27/09/11	9	Following consultation at whole team meeting Quality Objectives have been amended	ME
6	05/01/12	3	Changed control of documents to document referencing	NW
6	05/01/12	6	Changed responsibilities to read manual instead of policy	NW
6	05/01/12	7	Removed Compass Equality Network and replaced with Somerset Learning & Development Hub Corrected the number of staff	NW
6	05/01/12	14	Made reference to negative feedback procedure	NW
6	05/01/12	15/16	Amended to be consistent with recently audited purchasing policy	NW

6	05/01/12	17	Replaced flow chart with more relevant diagram	NW
6	05/01/12	23/24	Updated to be consistent with recently audited policies	NW
6	05/01/12	27	Added declined funding/tender section	NW
6	05/01/12	28	Added section concerning review and QM check	NW
6	05/01/12	29	Flow chart simplified	NW
7	13/01/12	9	Corrected scope	NW
8	31/01/12	27	Amended core business flowchart to be consistent with CEO authorisation	NW
9	07/09/12	6/7	Added detail to "In Practice" section as per QR Action points from 20/08/12.	ME
9	07/09/12	8	Amended reference to income levels and quantity of staff	ME
9	07/09/12	10	Some grammatical changes plus the addition of a reference to customer involvement in the development of services	ME
9	07/09/12	11	Referenced the annual Quality Review meeting	ME
9	07/09/12	12	Reference made to volunteers	ME
9	07/09/12	13	Removed references to Wiltshire	ME
9	07/09/12	14	Reference the "What You Can Expect From Us" leaflet	ME
9	07/09/12	23	Removed reference to Environmental Action Plan and replace with Internal Resources Action Plan	ME
9	07/09/12	24	Removed "regardless of status or position"	ME
10	05/10/12	13	Capitalised Managed Accounts Service	ME
10	14/11/12	17	Added Risk Assessments and Exit Interviews to 'Where is data collected'	NW
10	14/11/12	17	Amended inconsistency with full stops and capital letters	NW
10	14/11/12	17	Added 'end of project procedure' to where analysis takes place	NW

10	14/11/12	18	Data analysed against the following – changed “perception of the company high” to perception of the company positive”.	NW
10	14/11/12	18	Data analysed against the following – changed “employees” to “employees and volunteers”	NW
10	14/11/12	18	10.2 Changed “company is high” to “company is positive”	NW
10	14/11/12	26	Redesigned to show current management structure	NW
10	14/11/12	27	Amended to show employee and volunteers as part of recruitment process	NW
11	15/09/13	26	Overhaul of management Structure	NW
12	01/10/13	Various	Full audit completed as part of the Quality Review meeting – See action points for changes	ME
13	06/11/14	29	Flow chart updated to reflect procedure	AE
13	06/11/14	7	Full stop at end of paragraph 2	ME
13	06/11/14	7	Quality Assurance in Practice – Capitalised practice. 6 th bullet amended to “work planning tools with measurable outcomes.”	ME
13	06/11/14	8	Quality Marks – added “and affiliations” after marks	ME
13	06/11/14	9	Paragraph 1 – Amended mission “to enable and empower disabled people and carers to have independence, choice and control in their lives	ME
13	06/11/14	9	Made reference to Steering group in paragraph 2	ME
13	06/11/14	10	Paragraph 3 amended to state now an established organisation with an income in excess of £1,000,000	ME
13	06/11/14	10	Updated number of employees	ME

13	06/11/14	12	Removed Project before the words “work plan”	
14	22/01/15	12	QO bullets numbered for referencing with Work plan purposes	ME
14	22/01/15	14	Add bullet “Give preference to internal candidates, including volunteers when vacancies arise in order to retain skills and experience and recognise the contribution that existing team members make.	ME
14	23/01/15	15	Updated responsibilities for home workers and included information relating to Aquarium and Chorus HR	ME
14	23/01/15	16	Updated responsibility for the Core business process to the BDM	ME
14	23/01/15	18	Add “and Direct Mailing houses” to 2 nd paragraph under Annual Service and Support Agreements	ME
14	23/01/15	19	Add Steering groups to “where analysis takes place”	ME
14	23/01/15	20	Page tidied and “Risk Register Action plan” added to Improvements	ME
14	23/01/15	22	Replaced Office Manager with Office Supervisor and bullet points made consistent with rest of document	ME
14	23/01/15	25	Replaced Internal Resources Work Plan with “relevant Work Plans	ME
14	23/01/15	26	Updated to reflect minor changes to H&S Policy	ME
14	23/01/15	27	Updated to reflect new structure	ME
14	23/01/15	29	Updated with new mission	ME
15	26/01/15	12	QO 9 updated	ME
16	17/11/15	Various	As per Quality review meeting Action points 06/10/15	ME
17	27/01/17	Various	“users” to be amended to “customers” throughout	ME
17	27/01/17	3	Reference made to CDST Ltd	ME
17	27/01/17	9	Reference the Equality Analysis Action Plan	ME
17	27/01/17	10	Reference made to the establishment of CDST Ltd and Compass Wellbeing	ME

17	31/01/17	10	Mission amended to read "To promote wellbeing and enable and empower disabled people and carers to have independence, choice and control"	
17	31/01/17	10	Amended % of disabled people to 51%.	
17	31/01/17	15	Made reference to probationary review procedure	
17	31/01/17	15	Changed reference to Two Ticks status to "maintain the Department for Work and Pensions Disability Confident Employer status"	
17	31/01/17	15	Internal Recruitment bullet point amended to include "who fulfil the person specification"	
17	31/01/17	16	Bullet added "Management and maintenance of health and safety records".	
17	31/01/17	16	Paragraph added "A system to manage customer contact includes a telephone system with out of hours answering and message taking capability and web based forms to enable requests for information or advice".	
17	31/01/17	17	"This procedure is made readily available to customers during home visits as appropriate" added to paragraph referencing the "What you can expect from us" leaflet	
17	31/01/17	17	Extract from Purchasing policy updated to reflect current policy	
17	31/01/17	20	Where is data collected – Data Extraction added Where analysis takes place – Business Planning review and Project Reporting added	
17	31/01/17	24	Removed reference to the Media Officer	

17	31/01/17	26	Replaced charities act 2011 with 2016. Added Social Services and Well-being (Wales) Act 2014 Accessible Information Standard 2016	
17	31/01/17	26/27	Environmental and Health and Safety Policy Statements updated to reflect current policies	
17	31/01/17	29	Updated to reflect new structure as from April 17	
17	31/01/17	30	Reference made to probationary review procedure in last action box	
17	31/01/17	31	Updated mission statement to reflect 2017 changes	
17	31/01/17	32	Included acknowledgement to complainant in first action box	
17	17/02/17	26	6 pack regulations updated	

3. The Quality Policy

Introduction

For any organisation to be successful it is essential that customers' requirements are fully met. Compass Disability Services is committed to providing the best services possible and needs to be able to demonstrate that it provides quality services and manages the organisation efficiently and effectively.

In an increasingly competitive market it is critical that Compass Disability Services is able to evidence our commitment to quality to partners, customers, potential employees and volunteers.

What is Quality Assurance?

Quality assurance is the process of verifying or determining whether products or services meet or exceed customer expectations. Quality assurance is a process-driven approach with specific steps to help define and attain goals. This process considers design, development, implementation and evaluation. It is essentially about learning what we are doing well and striving to do it even better. It also means finding out what we may need to change to make sure we meet the needs of our customers.

Quality Assurance in Practice

As a customer-led organisation, we endeavour to understand current and future customers' needs and will strive to meet customers' requirements and exceed expectations at all times.

There is a shared understanding throughout the organisation about what we are trying to achieve and how we are trying to achieve it. This involves:

- Agreeing quality objectives, reviewing their relevance and monitoring performance against objectives regularly
- Ensuring that our customers know what to expect from us
- Having a Board and management team in place who can provide clear vision and direction
- Having all policies and procedures documented and reviewed
- Having a Business Plan that details our strategic priorities for the next five years
- Having work planning tools with measurable outcomes
- Developing a Personal Development Plan for each employee to ensure that they have the relevant skills and expertise
- Using effective communication tools to keep everyone informed
- Actively participating in the audit process, both internal and external, in order to drive continual improvement.

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There is a technical infrastructure capable of supporting the delivery of our aims and strategic priorities.

There are the necessary resources in place to support the delivery of our aims and strategic priorities.

There are monitoring procedures in place to ensure that policies and procedures are being implemented and are effective.

We have positive relationships with our partners and others working in our field to enable us to share experiences and resources, to pool expertise and work in partnership in the best interest of our customers.

We evaluate all activity on a continual basis and use the feedback gained to inform the development of our policies, Business Plan, Work Plans, Personal Development Plans and our Equality Analysis Action Plan.

Quality Marks

There are various industry quality marks and affiliations that demonstrate that an organisation has effective quality management systems in place. Compass Disability Services will hold at least one that is easily recognised within our field and seen to be synonymous with quality. This will be assessed on an annual basis to ensure that it is still the most relevant for the organisation.

Responsibilities

Ultimate responsibility for the implementation of this policy rests with the Board of Trustees. They are responsible for ensuring that the policy is reviewed, ensuring that the organisation is in a position to deliver quality services as described above.

The Chief Executive is responsible for overseeing the implementation of the Quality Assurance Policy and ensuring that all managers are adhering to their responsibilities.

The managers' responsibilities fall primarily with the Finance and HR Manager in terms of ensuring that quality assurance processes are assigned to relevant employees and volunteers and that adequate and appropriate training is delivered to enable all employees and volunteers to deliver the required standards.

Achievement of this policy's aims involves all employees and volunteers. In order for the organisation to be successful every person must understand our customers' needs and be responsible and accountable for the quality of their work.

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4. Overview of Compass Disability Services

Compass Disability Services is an innovative, enlightened and positive organisation. Our mission is **"To promote wellbeing and enable and empower disabled people and carers to have independence, choice and control"**.

Compass Disability Services is a customer-led organisation and our Board of Trustees is compiled of at least 51% disabled people and is representative of our service customers and the fields in which we work. Our Compass Carers project has an independent steering group made up of volunteers who reflect the carers community. Compass Disability Services is a "Two Ticks" employer and actively promotes the recruitment of disabled people in our organisation.

The organisation was established in May 2000 gaining charitable status and becoming an incorporated company in 2004 and is now well established with an income in excess of £1,000,000 in the financial year to March 2016.

Compass Disability Services works through consultation, representation, training and service delivery to achieve our aims. We facilitate various projects including Compass Independent Living Services, Compass Disability Network, Compass Carers and the Taunton Shopmobility service. We also provide conferencing and meeting facilities at our offices in Taunton.

Compass Disability Services employs approximately 50 people, including office and home based employees. We further work with volunteers, with whom we hope to establish a mutually beneficial relationship.

In 2016 CDST Ltd was established as the charities trading arm. In the same year Compass Wellbeing, a fully inclusive wellbeing centre was developed and is delivered under CDST Ltd's range of services. Further services where customer charging applies will be transferred to CDST Ltd in 2017.

Compass Disability Services commissioners include county councils, district and borough councils, local authority health service providers, clinical commissioning groups and other organisations.

5. The Scope of Registration

The management and delivery of service and facilities for people with disabilities and their carers in the field of social care.

EXCLUSIONS

The Quality Manual shall conform to all the requirements of ISO 9001:2008, with the exception of clause 7.6 Control of Monitoring and Measuring Devices which are not applicable to any of our activities.

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6. Our Quality Objectives

As a customer-led organisation Compass Disability Services endeavours to understand current and future customers' needs and will strive to meet customers' requirements and exceed expectations at all times. In order to demonstrate our intentions, we have identified the following Quality Objectives.

1. We will endeavour to deliver services and projects in line with agreed specifications, legal requirements (See **Appendix 1**) and our Articles of Association and will endeavour to add value where possible
2. We will endeavour to deliver services and projects in line with customer requirements and ensure that they are involved in the design and delivery of all services
3. We will endeavour to deliver services and projects within the agreed time frames
4. We will endeavour to deliver services and projects in line with budget
5. We will endeavour to ensure the sustainability of the organisation through the appropriate use of existing funds and by successfully securing new funds
6. We will conduct our business in an ethical and professional manner (See **Appendix 2: Environmental Policy Statement** and **Appendix 3 Health and Safety Policy Statement** and **section 9.3 Purchasing**)
7. We will endeavour to satisfy customers and partners requirements and get things right first time. When we make mistakes we will apologise, work to rectify the problem and learn from them
8. We will have clear policies and procedures in place to ensure that there is a consistent approach to the delivery of quality services
9. We will endeavour to ensure that all staff and volunteers have an understanding of their role in the delivery of quality services and will provide them with the opportunities to develop relevant skills and experiences to enable them to perform to a high standard
10. We will actively seek to maintain the profile of Compass Disability Services, and use appropriate media to ensure that the aims of the organisation are understood and appropriate people have the opportunity to be involved
11. Where fees are chargeable to customers we will endeavour to ensure that they are fair and equitable whilst ensuring the viability of services
12. Our management team will collect and analyse: customer feedback, work plan progress, financial performance data and business performance data to ensure that quality objectives are being met.

7. Management Responsibility

The management structure of Compass Disability Services is shown as an organisation chart (see **Appendix 4**). The chart shows functional relationships and responsibilities.

The Finance and HR Manager is the designated Quality Representative and is responsible for the maintenance and review of all quality assurance activities.

The management ensures that:

- Services are evaluated regularly and any required corrective action is adequately implemented and reviewed to establish an effective preventative process.
- Performance is measured against its declared Quality Objectives.
- Quality Objectives are reviewed, and if necessary amended, at the annual Quality Review meeting and the performance communicated to all staff.
- A range of policies and procedures are available to provide direction and structure within the organisation.
- Internal audits are conducted regularly to review progress and assist in the improvement of processes and procedures.
- Employees and volunteers have the necessary training, skills and experiences to effectively carry out their work.
- There is a technical infrastructure capable of supporting the delivery of its aims and strategic priorities.
- There are the necessary resources in place to support the delivery of its aims and strategic priorities.
- It has positive relationships with its commissioners and others working in its field to enable it to share experiences and resources, to pool expertise and work in partnership in the best interest of its customers.

8. Resources

8.1 Human Resources

Compass Disability Services considers the development and motivation of its workforce as one of the key factors in the delivery of quality services.

To this end all employees and volunteers will:

- Receive a detailed induction as outlined in the Induction Policy.
- Be supported through a probationary review procedure to ensure that they are provided with appropriate support and feedback during their first 6 months in employment.
- Be supported in the creation of a Personal Development Plan to ensure that they have the relevant skills and expertise to fulfil their roles and achieve their aspirations.
- Be provided with regular opportunities to provide feedback to the management team.
- Be encouraged to participate in the development of policies and procedures.

Compass Disability Services will:

- Provide a range of learning experiences to suit individual need and support the completion of Personal Development Plans.
- Provide a detailed staff and volunteer handbook to all employees and volunteers.
- Give preference to internal candidates, including volunteers, who fulfil the person specification, when vacancies arise in order to retain skills and experience and recognise the contribution that existing team members make.
- Have a range of policies and procedures in place designed to demonstrate our commitment to our employees and employment law and ones that recognise the unique contribution and needs of volunteers.
- Actively seek the involvement of disabled people in its workforce and maintain the Department for Work and Pensions Disability Confident Employer status.

The recruitment process is shown as a flowchart (See **Appendix 5**).

8.2 Infrastructure

Administration

Central administration is conducted at its sites in Taunton. This includes:

- All financial administration.
- Processing of service customer referrals.
- Maintenance of project records.
- Maintenance of all personnel records.
- Management of dormant or expired service customer records.
- Maintenance of quality records.
- Management and maintenance of health and safety records.

Home workers' administration responsibilities include:

- Maintenance of project records.
- Processing of service customer self-referrals.

Technical Infrastructure

A system to manage customer contact includes a telephone system with out of hours answering and message taking capability and web based forms to enable requests for information or advice.

All computerised documents are accessed via a central server or our customer management system. Both office workers and remote workers can access the central server.

Our customer and staff management systems are cloud based and delivered through contract with Charity Log, Aquarium and Chorus HR who hold relevant quality marks for their industry.

IT systems are maintained under contract with a local IT specialist. Compass Disability Services' Business Continuity Policy and Procedure sets out what will happen in the event of an emergency to ensure that services can be maintained.

All relevant electrical equipment is PAT tested regularly.

All fire and safety equipment is maintained under agreement by external specialists. Logs are maintained and are available for inspection.

A Lone Alert system is maintained to provide additional security to lone workers. This system is reviewed regularly.

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9. Product Realisation

9.1 Planning of product realisation

Compass Disability Services is responsible for the planning and delivery of its projects, working closely with our commissioners and customers to satisfy mutual requirements.

There is a flow chart to illustrate the core business process which is overseen by the Business Development Manager (See **Appendix 6**).

9.2 Complaint Management

Compass Disability Services is committed to enabling customers to influence and easily voice their views and opinions about its organisation and effect change where possible and appropriate.

We will endeavour to satisfy customers and partners requirements and get things right first time. When we make mistakes we will apologise, work to rectify the problem and learn from them.

In line with its Equal Opportunities Policy, all people that come into contact with the organisation can expect to be treated fairly, with respect, dignity and understanding.

All feedback is valued and is therefore recorded, actioned and monitored as per our Negative Feedback and Formal Complaints procedures.

It is recognised that it is not always possible to solve a problem in an informal way; therefore a “What You Can Expect From Us” flyer has been drawn up to structure what a complainant should do and what response they can expect from the organisation. This procedure is made readily available to customers during home visits as appropriate and on the Compass Disability Services’ website. A copy can be requested by contacting the office.

In order to make improvements to how policies and procedures are implemented, Compass Disability Services will regularly review complaints that have been made, however informal and measure the effectiveness of any corrective action.

The complaints procedure is shown as a flowchart (See **Appendix 7**)

We equally recognise and value positive feedback and will endeavour to share this as appropriate.

9.3 Purchasing

Compass Disability Services' Purchasing Policy sets out guidelines for purchasing activity in order to ensure;

- Compliance with any statutory requirements
- The organisation is able to meet its objectives
- All purchasing is undertaken using the same principles and the most effective use of funds.

It also aims to show that quality of service and the ethos of the organisation still has its place alongside 'best price' practice in the purchasing of all goods and services.

The following are extracts from the Purchasing Policy.

Value for Money

When procuring goods, services or works, all staff are responsible and accountable for achieving value for money. In addition, staff are urged to seek continuous improvements in value for money to remain within budgetary constraints and improve efficiency, whilst bearing in mind the ethical considerations of purchases e.g. fair-trade goods.

Sound Business

Purchasing decisions must also be evaluated to ensure that they are inline with the organisations strategic aims and make sound business sense. If staff are unsure if decisions are sound, clarification should be sought from the CEO.

Suppliers

All suppliers will be dealt with equally, with integrity, fairness, and courtesy and in a professional manner. Relationships with suppliers should be constructive, but built on a competitive approach that will lead to cost savings and better quality. There may be occasions when the organisation may approach suppliers asking for donations from them, suppliers may also wish to give away point of sale items neither of these should influence the purchasing decisions.

Environmental Considerations

Environmentally sound purchasing can help to reduce our carbon footprint and our impact on the environment. The organisation will also benefit in the delivery of better value for money (e.g. through buying energy-efficient products), an improved organisational environment and improved reputation. This can be achieved by building environmental considerations into all aspects of the purchasing process (e.g. purchasing recycled products, local products to reduce delivery distance etc) in line with the organisations Environmental Policy.

Scope

This policy applies to all purchases (individual, one off and annual purchases) that have an expected cost of £50 or more.

A purchase requisition form will be completed for all purchases to support the finance processes.

Individual/One off Purchases

If the purchase is expected to exceed £50 then quotes must be obtained and a record maintained as per the purchasing procedure. If price is not the primary consideration for the purchase (e.g. a venue is needed in a particular area) the reason must be clearly stated in the comments box of the supplier database.

Annual Quotations and Agreements

Where it is not appropriate to gain quotes each time a purchase is made (e.g. utilities, support or service agreements, meeting room catering etc) then various different approaches will be taken to ensure that best value, alongside suitability is being achieved. This may include obtaining an annual quote from multiple suppliers for comparison, an annual supplier evaluation or the review of service/support agreements that may cover several years. In all cases the responsible person, who will be the one who is most closely connected to the item purchased, will be responsible for ensuring that appropriate certificates, insurances and quality marks are held.

Purchasing Limits

The Board of Trustees are ultimately responsible for all spending within the organisation. The CEO can authorise any individual payment up to £5000 on non-routine items without the need to get the Board's approval.

The Finance and HR Manager can authorise any individual payment up to £2500 on non-routine items without the need to get CEO approval.

Routine or regular payments that exceed the above limits should be agreed at the time of purchasing by the CEO and if appropriate the Board of Trustees.

10. Measurement, Analysis and Improvement

The flow chart below shows our Measure, Analyse and Improve Quality Process



10.1 Measurement

Compass Disability Services Complaints Log and Internal Audits support the Quality Manual. The Evaluation and Monitoring Evidence Record defines the actions that are required to generate relevant data for analysis. Data is collected from, but not restricted to:

- Complaints database
- Internal Audits
- Customer feedback
- Commissioner feedback
- Staff and volunteer feedback
- Positive feedback.

10.2 Analysis

The data is collated and analysed to determine:

- If quality and equality objectives have been met
- If strategic priorities are in line with the needs of customers
- If stakeholders are satisfied with the services/projects delivered
- If legal/statutory requirements are being met
- If Compass Disability Services is financially sound
- If specifications/targets are being achieved
- If stakeholders perception of the company is positive
- If all services and facilities delivered by Compass Disability Services are non-discriminatory
- If the employees and volunteers of Compass Disability Services are effective and efficient in the delivery of services and facilities.

10.3 Improvement

There is an agenda template for all staff meetings, Senior Management review meetings and the Trustees Board meetings. These include but are not limited to the following agenda points:

- Review of previous action points
- Work Plan review
- Calendar of Duties review
- Policy and other action plan reviews
- Quality Review – Internal Audit, complaints and negative feedback review
- Risk Register Action Plan.
- Training needs
- Communication.

11. Office Procedures

11.1 Corrective/Preventative Action

Compass Disability Services identifies non-conformities and any actual or potential shortfalls in quality standards in various ways. This includes Complaints Management (See Section 9.2) and Internal Auditing. Improvement actions are identified and their implementation reviewed to ensure that the desired effects have been achieved, or potential problems are avoided thus maintaining quality practices throughout the organisation.

Internal Audits

Purpose

To ensure Compass Disability Services audits all processes, procedures, systems and policies on a regular basis. Internal Auditing allows the company to monitor the effectiveness and efficiency of all the above and make continual improvements to the benefit of its customers. The internal auditing process is shown as a flowchart (See **Appendix 8**)

Responsibilities

The Quality Representative has overall responsibility to ensure the Internal Audit system is effective and used efficiently.

All department heads are responsible for ensuring the completion of Internal Auditing for their department/project and ensuring all new items are correctly added to the Internal Audit system. The responsible person may elect a member of staff working within their department/project to carry out the Internal Audit.

All auditors are responsible for consulting with relevant staff, volunteers and/or trustees before making any changes to existing practices or implementing any significant improvements.

Scope

All new and existing procedures, systems, processes and policies will be audited.

Records

An Internal Audit form is used to track the process of an Internal Audit and it is recorded on the Internal Audit Log. All Internal Audit forms will be authorised by the responsible person and filed by the Quality Representative as a quality record. These records will be archived yearly.

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11.2 Control of Records

Purpose

To ensure that all records are:

- Stored appropriately (in the correct format, in the appropriate place and for the correct length of time).
- Stored safely (sensitive data is protected).
- Records are easily retrievable.

Any records containing sensitive data will be stored securely in locked facilities or electronically stored and password protected.

Responsibility

All staff have a responsibility to ensure the correct storage and retention of documents. The Quality Representative is responsible for monitoring the correct storage, retention and destruction of records.

Procedure

Records are both physically and electronically stored according to data protection guidelines and as detailed in the Data Storage List. The Data Storage List details:

- Record name.
- The period of retention (if applicable).

Records are securely destroyed after the minimum storage period. They are regularly reviewed by the Data Controller, Project Managers, and the Site Supervisor and as documented in the Data Storage List and as per current legislation.

Computerised Records

Computer records are identified by suitable file name and/or folder and are backed up on a daily basis.

Other software systems are maintained and monitored by an external supplier under a contract and are also backed-up.

11.3 Version Control

Purpose

To ensure that all internal and external generic documents, subject to revision and necessary for the administration of the quality system, are controlled and the correct version is used.

Responsibility

The Senior PA and Governance Officer is responsible for overseeing the version control of documents. The Senior PA and Governance Officer and ensuring that all documents produced are consistent with our standards. Staff have a responsibility for ensuring that the correct version of documents are used.

Procedure

Internal and external controlled documents are electronically stored detailing:

- The document.
- The version number.
- The person who has made the revision.

The revision of documents is identified on the document and electronic file detailing the document name, revision number, and hyperlink to the location of the document.

Obsolete documents are destroyed or marked “Reference only”.

The version number of each controlled document is recorded in the footer of each page.

All generic documents are version controlled.

A record of the current version number is recorded on the Version Control Log.

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Appendix 1 - Significant Legislation

Compass Disability Services endeavours to remain up to date with all applicable UK and international legislation. Due to the nature of the organisation some legislation plays a more significant part in the management of services than others. The most significant legislation applicable to Compass Disability Services is;

The Six Pack Regulations

The Management of Health & Safety at Work Regulations 1999
 The Workplace (Health, Safety & Welfare) Regulations 1992
 Provision and Use of Work Equipment Regulations 1998 (PUWER)
 The Personal Protective Equipment Regulations 2002 and the Personal Protective Equipment at Work Regulations 1992
 The Manual Handling Operations Regulations 1992
 The Health & Safety (Display Screen Equipment) Regulations 1992

Other Health and safety regulations

The Regulatory Reform (Fire Safety) Order (RRFSO) 2005
 Health and Safety at Work etc Act 1974
 Control of Substances Hazardous to Health (as amended 2004)
 The Health & Safety (First Aid) Regulations 1981
 The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995

Employment Legislation

Employment Rights Act 1996
 Employment Acts
 The National Minimum Wage Regulations (1999)
 The Working Time (Amendment) Regulations 2003
 The Transfer of Undertakings (Protection of Employment) Regulations 2006
 Pensions Act 2008
 Rehabilitation of Offenders Act 1974
 DBS Code of Practice as published under section 122 of the Police Act 1997 (revised 2015).

Other regulations

The Disclosure and Barring Service (Core Functions) Order 2012
 Charities Act 2016
 Equality Act 2010
 Data Protection Act 1998
 Safeguarding Vulnerable Groups Act 2006
 Company Act 2006
 The Care Act 2014
 The Children and Families Act 2014
 Social Services and Well-being (Wales) Act 2014
 Accessible Information Standard 2016

Appendix 2 – Environmental Policy Statement

Compass Disability Services will comply fully with environmental legislation and in addition is committed to continue efforts to:

- Promote our Environmental Policy at every level of the organisation and with organisations we work with and on behalf of
- Increase awareness of environmental responsibilities among staff and volunteers
- Recycle as much waste material as is appropriate and beneficial to the environment
- Minimise waste and pollution, and develop and operate environmentally sound waste management procedures; including
 - Encouraging the use of car sharing for staff and volunteers
 - Reducing water consumption
- Continue to reduce the consumption of fossil fuels and to incorporate long term strategies for energy efficiency into planning and development
- Promote a purchasing policy which will give preference, as far as practicable, to those products and services which cause the least harm to the environment
- Avoid wherever practical the use of environmentally damaging substances, materials and processes
- Consider environmental factors in respect of the growth of the organisation, seeking (as far as is practical) to reduce harmful environmental impacts and to integrate new developments into the local environment.

Responsibilities

Ultimate responsibility for the implementation of this policy lies with the Board of Trustees, and in turn with the Chief Executive Officer. Managers have a responsibility to conduct their duties in the most environmentally efficient manner and encourage all staff and volunteers to do the same. In addition, all employees and volunteers bear the responsibility of complying with this policy and working towards the environmental outcomes set out in the relevant Work Plans.

It is the collective responsibility of all staff and volunteers to strive to be as environmentally friendly as possible in order for us to minimise the effects of our operations on the environment. Compass Disability Services will encourage those employed by and associated with the organisation, to develop and maintain an awareness of our responsibility to the environment and to develop a culture in which positive challenge to inappropriate behaviour, with respect to the environment is a part of normal practice.

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Appendix 3 – Health and Safety Policy Statement

Compass Disability Services believes that adequate provision for health and safety are essential to working life. The maintenance of healthy and safe working conditions and the prevention of injuries are not only of vital importance to the organisation’s efficiency, but also in the best interests of all stakeholders and their families. It is essential that every employee and volunteer is aware of, understands and cooperates with the organisational health and safety policy and that good communication exists at all levels of the company. This statement is provided to ensure that all reasonably practicable steps are taken to secure the health, safety and welfare of all persons within Compass Disability Services and to encourage a positive attitude to health and safety.

A copy of this statement is displayed by the kitchen in, Unit 11 12 and is available to all employees and volunteers working for and with this organisation. A poster on Health and Safety Law is displayed in each building kitchen at Compass Disability Services and Shopmobility.

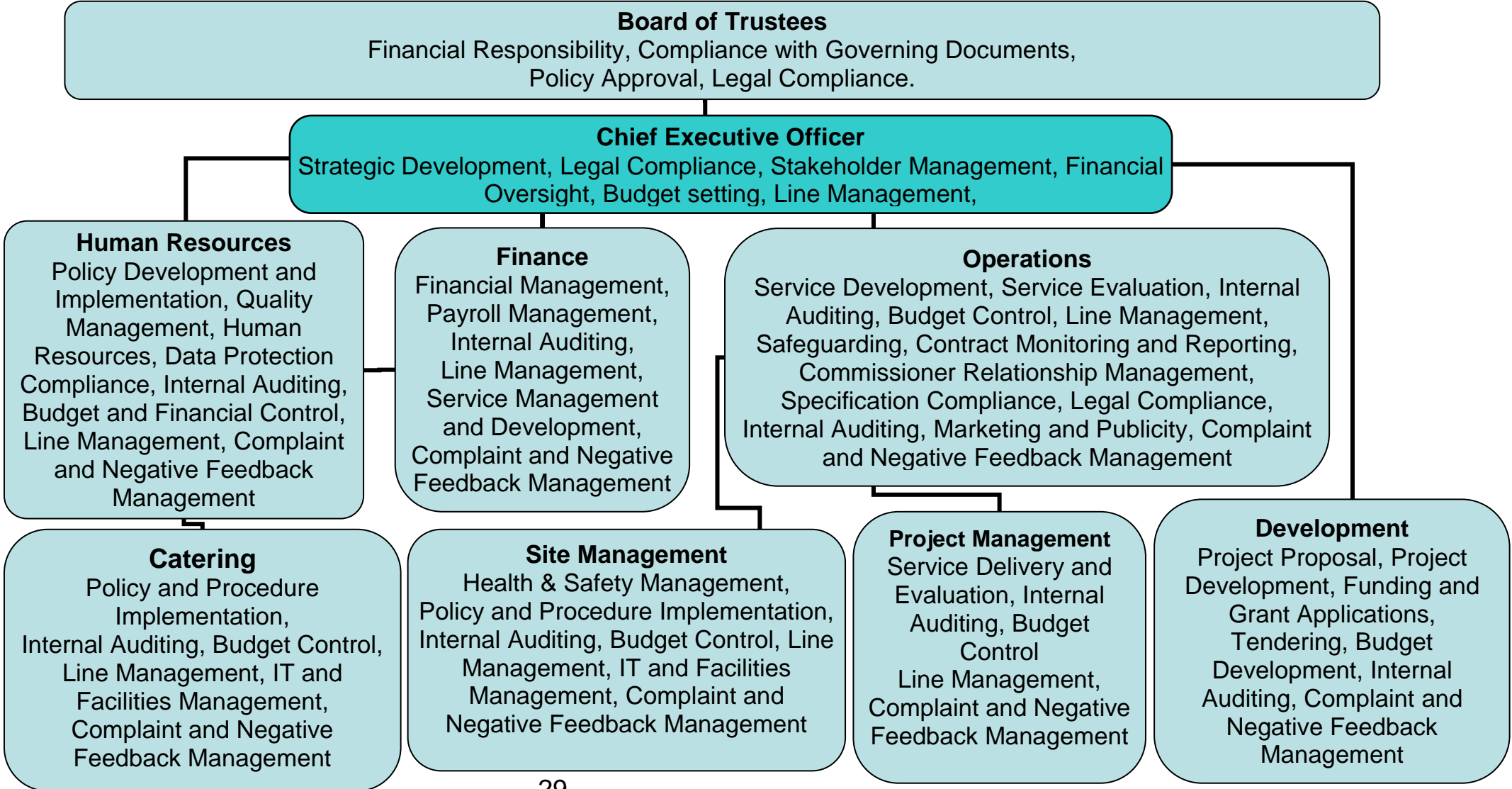
Compass Disability Services will comply with all aspects of health, safety and welfare legislation in all areas of its work. The organisation will audit, measure and review health & safety performance, implementing changes as necessary.

Responsibilities and Delegated Authority

The Board of Trustees have ultimate responsibility for Health and Safety at Compass Disability Services, and for ensuring that the policy is reviewed on an annual basis or whenever any changes are made to the premises or operations of the organisation, to keep the policy in line with current legislation.

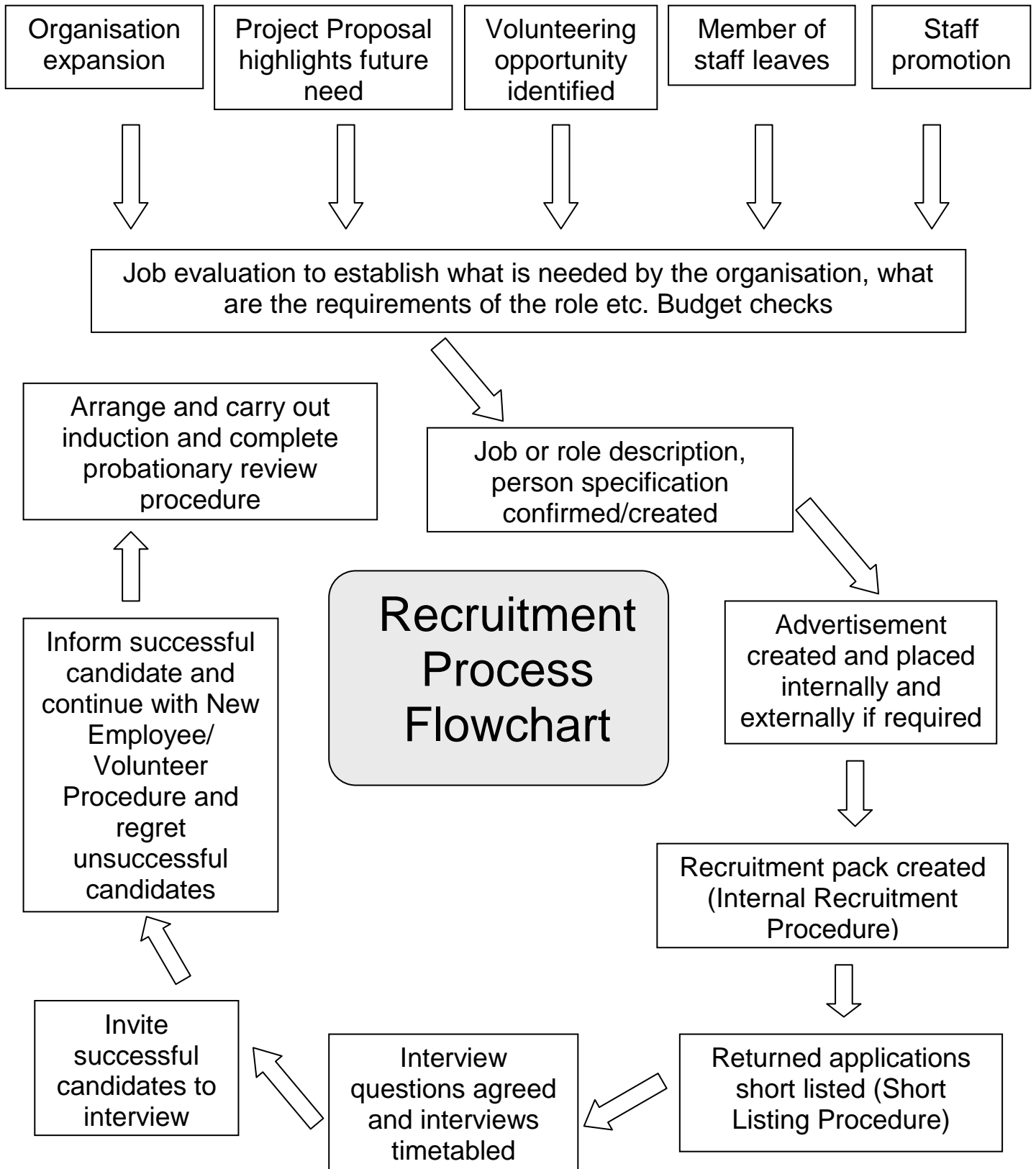
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Appendix 4 – Management Structure

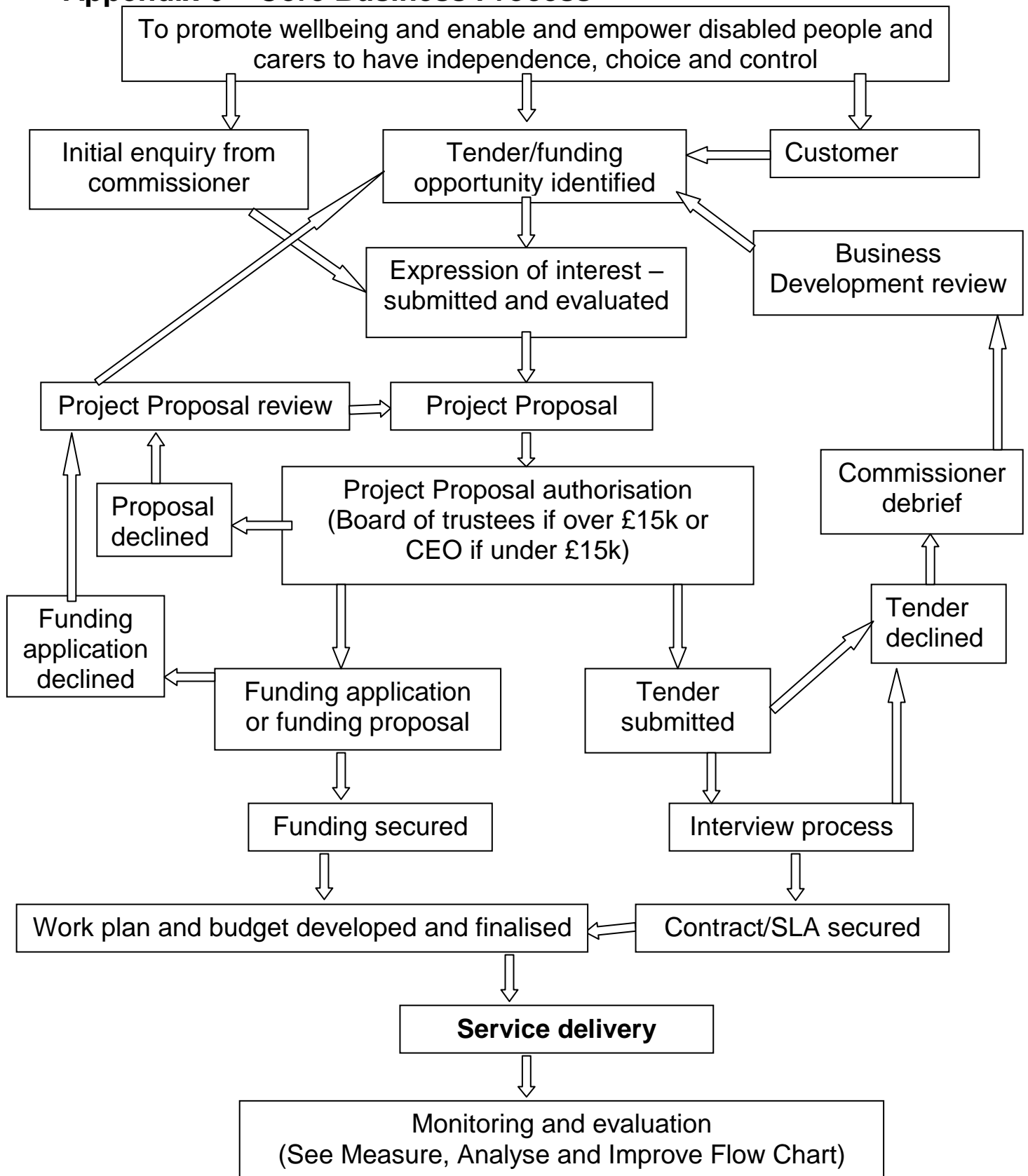


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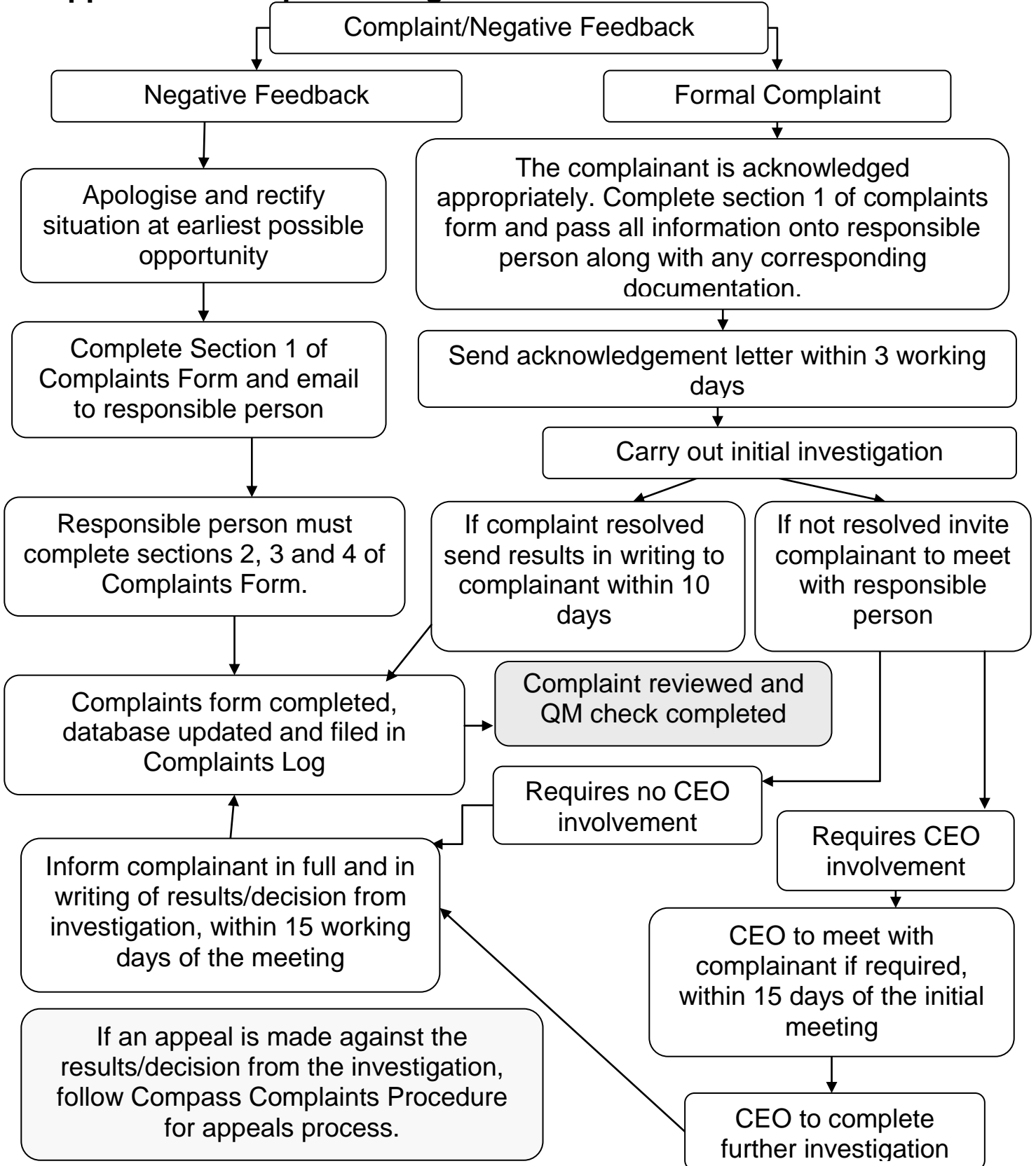
Appendix 5 – Recruitment Process Flowchart



Appendix 6 – Core Business Process



Appendix 7 Complaints/Negative Feedback Procedure Flowchart



Appendix 8 Internal Audit Flowchart

