

PAMMS – Provider Assessment and Market Solution

Adass – Eastern Region

What is PAMMS?

- It is an online monitoring tool introduced across the Adass Eastern Region.
- Care Standards Monitoring questions have been designed to support the new Adass contract.
- **Five** care domains are split into **16** standards which are weighted.
- Services will be scored across individual standards.
- This means if one standard is not achieved then the outcome of the whole domain is not necessarily affected.

Care Standards will continue to...

- Liaise with you on the timing of assessments.
- Visit services to carry out monitoring assessments.
- Use the same methodology to carry out assessments.
- Assess to the same standards as currently used, which includes formal feedback from service user and staff.
- Complex Care Team Pharmacist will assess medication management.

What this means for you...

- Reports can be viewed online.
- Registered Managers will have more responsibility for their own action plans.
- Interactive process including direct communication with Care Standards Team through an online portal.
- Can help with your preparations for CQC inspections.
- The assessments will be tailored to meet the requirements of specific service areas.



Further Help for Providers

- This system will require Registered Managers to communicate with the Care Standards Team via an internet portal. Care Standards Monitoring Officers will be providing support during the first assessment with each provider.
- The link to a video showing you what the new assessment will look like for providers. If link does not open on click, Right click and select Open Hyperlink from menu.

http://www.pammstraining.org/adassportal/videos/Creating_and_managing_an_action_plan.mp4

Example lay out

Logged in as kho (ADASS Admin) [Log Out](#)


Test Server


ADASS ER Accommodation Services for Adult Care Services

[← Back to Results](#)

Summary **Full Report** [Areas For Improvement](#)

Involvement and Information

Respecting and Involving Service Users

Standard Rating

Requires Improvement

★☆☆☆☆

[PDF Version](#)

[Assessment Ratings Criteria](#)

	Criteria		
A01	The care plan should be individually tailored, person centred, include appropriate information on the SU's preferences and views and clearly evidence that they were involved in the decisions about how their care and support is to be delivered This is confirmed via the pre-admission, daily records & across care plans.	Good ★★★★★	<ul style="list-style-type: none"> ▼ 1. Involvement and information <li style="background-color: #e91e63; color: white; padding: 2px;">Respecting and Involving Service Users Consent ▼ 2. Personalised Care and Support Care and Welfare of Service Users Meeting Nutritional Needs Co-operating with other Providers ▼ 3. Safeguarding and Safety Safeguarding People who use the Service from Abuse Cleanliness and Infection Control Management of Medicines Safety and Suitability of Premises Safety, Availability and Suitability of Equipment ▼ 4. Suitability of Staffing Requirements Relating to Staff Recruitment
A02	There is evidence that SU's have been given information in appropriate formats (meeting the accessible information standards) to enable them to make informed decisions about their care and support (e.g. signed information on admission forms).	Poor ★☆☆☆☆	
B02	Through observation of staff interaction and discussion with service users there is evidence that service users are always placed at the centre of their care and provided with appropriate and adequate information to enable them to make informed decisions about the care and support they receive.	Good ★★★★★	
B01	Through observation of staff interaction and discussion with service users there is evidence that SU's are not discriminated against, are treated as an individual and their diversity is respected and their privacy, dignity and independence is maintained and upheld at all times. SU's are treated with kindness, compassion and empathy. Care workers are seen to support SU's choices and preferences in regards the way their care and support is delivered.	Good ★★★★★	
B03	Service users confirm that they are encouraged to provide feedback about how the service might be improved and confirm that that they are listened to and their feedback is acted upon.	Good ★★★★★	
B04	Service users spoken with (where appropriate) confirm that they are supported to maintain relationships with family, friends and the community in which they live and are supported to play	Good ★★★★★	

Bedford Borough Benchmarks (OP Accommodation)

Standard 1	Respecting and Involving Service Users
	<ul style="list-style-type: none">• Is there a care file in place for all service users?• Has a pre-assessment been carried out prior to care delivery?• Is there a personalised care plan in place?• Is there evidence of the service user involvement in the development of their care plan?• Does the care plan contain information that reflects service user's preferences?• Do daily records reflect service user preferences?• Have service users been given information about the service in an appropriate format?• Are service users treated with dignity and respect?• Are service users treated with kindness and compassion?• Is their diversity and independence respected?• Are service users encouraged to provide feedback to the service about their care?• Is feedback given to service users following their comments?• How are service users supported to maintain relationships with their families, friends and the wider community?• Is there an activities programme in place?



Standard 2	Consent
	<ul style="list-style-type: none">• Have MCA's been completed where required and has capacity been considered in a meaningful way?• Have MCA's been reviewed?• Has a Best Interest Decision been documented?• Have DOL's authorisations been applied for where restrictions are required?• Is there a DOL's care plan in place?• Does it include an expiry date?• Do any service users have a POA in place?• Do staff have an understanding of 'consent', verbal and implied?• Are staff able to document records of consent?• Are staff able to apply the principles of MCA?
Standard 3	Care and Welfare of the Service User
	<ul style="list-style-type: none">• Are care plans signed by service user where appropriate?• Do care plans contain sufficient information to provide effective support?• Is there a keyworker system in place?• Is there evidence that service users have been given information regarding the key working system?• Is there reference to key worker in the care plan?• Does the service user know who their key worker is?• Do staff have a good knowledge of their role as keyworker?• Do service users have contact and emergency contact details for the provider?• Are service users provided with an accessible copy of the organisations complaints procedure?• Does the care plan reflect the service user's strengths, abilities, interests and preferences?• Do care plans contain information about service user's level of independence and goal setting?• Are there risk assessments in place that reflect current needs?• Do risk assessments address any specific or health needs?• Are potential risks reflected in the care plan?• Is there a PEEP's risk assessment in place?• Are care plans and risk assessments reviewed on a regular basis and reflect current need?• Are service user's involved in the reviewing process?• Are daily records up-to-date, legible and reflect current circumstances?• Do care staff deliver care in accordance with current care plans and risk assessments?• Are service users encouraged to maintain independence?• Are service user's supported to maintain links with family, friends and the community?• Are service users supported to maintain good levels of nutrition?



Standard 4	Personalised Care and Support
	<ul style="list-style-type: none">• Is there a nutritional care plan in place that includes information on allergies, dietary restrictions and preferences?• Are nutritional assessments carried out where required e.g. MUST?• Are service users supported to access any specialist services if required?• Is guidance from specialist services included in the care plan?• Do staff behave appropriately in relationship to food and hygiene?• Are service users able to make food choices that meet their preferences?• Are service users able to choose where they eat?• Is there appropriate access to food and fluids?
Standard 5	Cooperating with other Providers
	<ul style="list-style-type: none">• Where applicable, do care plans evidence cooperative working between providers?• Where service users are transferred between services is this reflected in the records?• Is there evidence of supporting service users to access health and social services?
Standard 6	Safeguarding who use the Service from Abuse
	<ul style="list-style-type: none">• Are risk assessments effective?• Does the provider carry out and document regular observations of staff practice?• Do service users feel safe and supported by provider?• Is there a safeguarding policy in place?• Is all safeguarding training in date?• Have staff received training in MCA and DoL's?• Are staff familiar with local safeguarding procedures?• Is there appropriate and accessible safeguarding information on display?• Is there a missing persons policy?



Standard 7	Cleanliness and Infection Control
	<ul style="list-style-type: none">• Is good practice followed in relation to cleanliness and infection control?• Have staff received appropriate infection control training?• Are staff familiar with waste management system?• Does environment reflect appropriate standards of cleanliness and hygiene?• Is there appropriate signage on display relating to infection control?
Standard 8	Management of Medicines
	<ul style="list-style-type: none">• Do care plans document service users input into decision making regarding their medication?• Is covert medication being administered and if so, is there an MCA and Best Interest decision in place?• Have care staff undergone medication training and their competency to handle medication assessed?• Are staff able to handle medicines safely, securely and appropriately?• Is medication stored safely?• Is medication administered safely, including homely remedies and covert medication?• Are accurate records maintained for the prescribing and administration of medications?• Are regular medication audits completed and documented?• Do service users have regular medication reviews?
Standard 9	Safety and Suitability of Premises
	<ul style="list-style-type: none">• Is the building well maintained?• Are there any hazards?• Does the building meet the needs of the service user group?• Are there appropriate security arrangements in place regarding access to the building?• Has a fire risk assessment been carried out?• Has an environmental risk assessment been carried out?• Is there a business continuity plan in place?



Standard 10	Safety, Availability and Suitability of Equipment
	<ul style="list-style-type: none">• Is manual handling training in date?• Is there sufficient equipment?• Is equipment fit for purpose and well maintained?• Is equipment used safely?• Is equipment stored safely?
Standard 11	Requirement relating to Staff Recruitment
	<ul style="list-style-type: none">• Have all staff undergone employment checks, e.g. DBS, references, right to work and membership of professional bodies?• Have agency and voluntary staff been subject to same level of checks as employed staff?• Have all staff including agency/voluntary/student staff undergone an in house induction?• Have external providers undergone appropriate checks i.e. Hairdressers etc.?• Have all staff, including agency/voluntary/student staff been provided with information regarding their role and responsibilities?
Standard 12	Staffing and Staff Deployment
	<ul style="list-style-type: none">• Are there sufficient levels of staff, with appropriate levels of knowledge, skills and experience?• Are there robust mechanisms in place to manage expected and unexpected changes in staff levels?• Do you have any vacancies?• Is there a rota in place that details experience, qualifications and skills?• Do staff have sufficient knowledge of health promotional to support service users?• Are staff able to communicate effectively with service users?



Standard 13	Staff Support
	<ul style="list-style-type: none">• Have all care workers received an induction that is in line with skills for care certificate?• Is there evidence that care workers receive appropriate and regular supervision?• Is there evidence that care workers receive an annual appraisal?• Is all mandatory training up to date?• Is there a training matrix in place?• Is there access to certification?• Are care workers well supported?• Are there mechanisms in place to prevent bullying, harassment and violence in the workplace?
Standard 14	Assessing and Monitoring the Quality of Service Provision
	<ul style="list-style-type: none">• Are care workers confident to raise concerns regarding poor performance and are supported by management to do so?• Can providers supply evidence that they gather and evaluate information, e.g. satisfaction survey, about the quality of their service?• Are providers able to supply evidence that they have given consideration to safe and effective care?• Can provider supply evidence that they have acted upon feedback?• Can provider demonstrate clear mechanisms in place for people, including staff, to raise concerns about risk to people and poor performance openly?
Standard 15	Using Information and Dealing with Complaints
	<ul style="list-style-type: none">• Are service users aware of how to complain and contact the provider and the LA?• Are service users supported to make a complaint?• Are service users and their relatives informed of outcome of their complaints?• Does provider respond appropriately to complaints?• Are regular staff meetings held and documented?• Are staff able to add to the agenda?• Is there evidence of regular resident/relatives meetings?• Where appropriate, does the provider share details of complaints and their outcomes with the Local Authority?
Standard 16	Records
	<ul style="list-style-type: none">• Are personal records of service users clear, accurate, factual, complete, personalised, fit for purpose and up-to-date?• Are records held securely and remain confidential?• Is there a robust process in place for the management of DOLS authorisations?• Is there a robust system of auditing in place with clear action plans if required?