Service User-Led Accreditation Programme

Standards and measures

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Standards and measures

Below are the standards against which services going through accreditation will be asked to self-assess. Each standard has guidance for recommended evidence. However, this is only guidance and services should feel free to provide other forms of evidence they believe would help demonstrate adherence to the standard.

Some evidence for the standards below will also come from the assessors visit, their observations and meetings with staff, service users and carers.

	1. Open and Welcoming
1.1	Service users report that they are satisfied that all areas are pleasant and welcoming **(Standard not applicable for Home visiting services)** *Guidance for evidence, e.g:* *> PLACE Assessment score + action plan* *> Assessors observations and meetings with service users and carers*
1.2	**THIS IS 'A MUST MEET' STANDARD** Service provides information to service users and carers about the team/service/ward? *Guidance for evidence, e.g:* *> Leaflets and information board* *> Welcome pack;* *> Monthly newsletters to service users with patient feedback and service response, where appropriate.* *> Home Notes given to service users accessing community health services* *> Assessors observations and meetings with service users and carers*
1.3	Service has comprehensive Welcome Pack **(standard not applicable for Outpatient services)** *Guidance for evidence, e.g:* *> Welcome Pack* *> Assessors observations and meetings with service users and carers*
1.4	**THIS IS 'A MUST MEET' STANDARD** Service ensures that every service user and carer are treated fairly and without stigma throughout the course of receiving care Note: this standard is not included in the team's self-assessment *Guidance for evidence, e.g:* *> Assessors observations and meetings with service users and carers*

2. Using our experience

2.1	**THIS IS 'A MUST MEET' STANDARD** Service can demonstrate that they include service users in decision making about their care *Guidance for evidence, e.g:* *> Care plan + Dialog Plus* *> Community Health Services: "What matters to you"* *> Forensics: "Service user experience questionnaire"* *> Assessors observations and meetings with service users and carers*
2.2	Service responds to and acts on concerns and complaints in order to improve the service *Guidance for evidence, e.g:* *> Evidence of actively using local resolution pathways* *> Assessors observations and meetings with service users and carers*
2.3	Service can demonstrate it includes and invites service users and carers to service management level meetings ***This standard is optional**

3. Recovery focused

3.1	Service can demonstrate that it asks service user and carer for feedback to enhance the outcome of care *Guidance for evidence, e.g:* *> 'You said we did' board - dated (observation)* *> Community meeting minutes* *> PREM Data collection practice and responding to feedback* *> Community Health Services: Monthly newsletters to service users with patient feedback and service response, where appropriate.* *> Assessors observations and meetings with service users and carers*
3.2	Information is provided and clearly explained in ways accessible to the service user and carers about the diagnosis / difficulty and treatment plan. *Guidance for evidence, e.g:* *> Leaflets - easy read versions and different languages to be available;* *> Information on diagnosis and medications* *> Assessors observations and meetings with service users and carers*

3.3	All service users and carers are fully informed of their rights on an ongoing basis *Guidance for evidence , e.g:* *> Care plan* *> Welcome Pack* *> Service Leaflet;* *> Carers Handbook* *> Consent to proceed (for Community Health Services)* *> Assessors observations and meetings with service users and carers*
3.4	All service users and carers are fully informed of treatment options and side effects on an ongoing basis, including range of psychological therapies (for mental health services) *Guidance for evidence , e.g:* *> Care plan* *> Welcome Pack* *> Assessors observations and meetings with service users and carers*

4. Creative

4.1	Service can demonstrate they provide and/or promote creative, therapeutic and skill based activities on a regular and frequent basis/ *Guidance for evidence, e.g:* *> Activities timetable for inpatient settings* *> Collaboration with Recovery Colleges* *> Dialog Plus (Care Plan)* *> Signposting and supporting engagement in community resources and activities for community health services* *> Assessors observations and meetings with service users and carers* * Standard is not applicable to Extended Primary Care Team (EPCT)

5. Aiming for excellence

5.1	The service can demonstrate the use of Quality Improvement. *Guidance for evidence, e.g:* *> The service has undertaken a QI project in the last year*
5.2	Service can demonstrate people participation in quality improvement *Guidance for evidence, e.g:* *> There was Big I involvement* *> Assessors observations and meetings with service users and carer.*
5.3	Staff are capable and supported to deliver quality care that is evidence based and responsive to the service-user's physical and mental health needs *Guidance for evidence, e.g:* *> Assessors observations and meetings with staff, service users and carers*

6. Reaching out

6.1	Service can demonstrate smooth, clear and simple transition of care post discharge. *Guidance for evidence, e.g:* *> Discharge plan for inpatient and community* *> Information on Recovery College and People Participation; MIND* *> Assessors observations and meetings with staff, service users and carers*
6.2	The service can demonstrate that it effectively collaborates with and sign posts to other agencies involved in a person's care. *Guidance for evidence, e.g:* *> Care Plan* *> Welcome Pack* *> Community Health Services: Monthly GP meetings and multidisciplinary working* *> Assessors observations and meetings with staff, service users and carers*

7. Empowering

7.1	Service provides service users with information to aid their recovery (For example: benefits, housing, social care, employment) *Guidance for evidence , e.g:* *> Care plan - Dialog Plus* *> Welcome Pack* *> Care Navigation input and signposting for Community Health Services (EPCT only)* *> Assessors observations and meetings with staff, service users and carers*
7.2	**THIS IS 'A MUST MEET' STANDARD** Care / treatment plans identify the skills and strengths for service users to manage their recovery *Guidance for evidence , e.g:* *> Care plan - Dialog Plus* *> Welcome Pack* *> Care Plan inclusive of self-management aspects as appropriate for Community Health Services* *> Assessors observations and meetings with staff, service users and carers*

8. Inclusive

8.1	**THIS IS 'A MUST MEET' STANDARD** The service can demonstrate they consult with service user groups. *Guidance for evidence, e.g:* *> Community meetings minutes;* *> Community Health Services: Working Together Group* *> Assessors observations and meetings with staff, service users and carers*

8.2	Service can demonstrate it is culturally inclusive (towards staff and service users and carers) and is able to meet the needs of older people, men, LGBTQ and BME communities, and people with intellectual disabilities. *Guidance for evidence, e.g:* *> Assessment records to include access, quality and outcomes* *> Assessors observations and meetings with staff, service users and carers*

9. Safe

9.1	<u>**THIS IS 'A MUST MEET' STANDARD**</u> Service users and carers report having opportunity and confidence to raise concerns. *Guidance for evidence, e.g:* *> Welcome Pack* *> Home notes for Community Health Services* *> Assessors observations and meetings with staff, service users and carers*
9.2	Service has safe staffing levels to deliver good quality care *Guidance for evidence, e.g:* *> Staff boards;* *>Team operational policy* *> Vacancy rates* *> Safe staffing level boards* *> Community Health Services: "Safe caseloads"* *> Assessors observations and meetings with staff, service users and carers*
9.3	Any issues concerning risk and/or safety are discussed with service user *Guidance for evidence, e.g:* *> Risk assessment for inpatient services* *> Risk assessment for community services* *> EMIS records for Community Health Services* *> Assessors observations and meetings with staff, service users and carers*

For any queries or questions please contact us:

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