

**MONITORING AND REVIEW OF SUPPORTING
PEOPLE SERVICES**

**QUALITY ASSESSMENT FRAMEWORK:
SUPPLEMENTARY SERVICE OBJECTIVES**

Office of the Deputy Prime Minister

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Group 1 - empowerment

S 1.1 – informing service users
Service users are well informed so that they can communicate their needs and views and make informed choices.
<i>Explanatory note: Information about rights and responsibilities is covered by Objective S2.2 and description of the service is addressed by Objective S3.1. This Objective focuses on approaches to and systems for communication between providers and service users.</i>

Performance Level D											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl. ¹	3
i	Information for service users is limited and the need for further work in this area is accepted.									Comments/Issues	

¹ Supported Lodgings and Adult Placements

Quality Assessment Framework: supplementary service objectives

Performance Level C											
Standards					Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
										Comments/Issues	
i	Staff are knowledgeable about the range of services and support provided by their own organisation that may meet the needs of service users				Up-to-date relevant information is contained on staff noticeboards, in handbooks, operational manuals, newsletters or other relevant media. Staff are able to demonstrate knowledge of the types of services and support available.						
										Comments/Issues	
ii	Potential users are able to make informed choices when accepting an offer.				Referral agencies confirm that information about the service is made available to them in a form appropriate to intended service users. Potential users are able to meet with staff before accepting an offer. Current service users confirm that they were able to do this.						
										Comments/Issues	
iii	Potential users are able to make informed choices when accepting an offer.				Potential users are able to visit the service before accepting an offer. <i>Note: may not apply to domestic violence services.</i> Current service users confirm that they were able to do this.						
										Comments/Issues	

Quality Assessment Framework: supplementary service objectives

Performance Level B												
Standards						Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3	
i	Staff are knowledgeable about and can facilitate access to support and services provided by other organisations that may meet the needs of service users (e.g. education, employment).					Up-to-date information is secured and maintained about support and services provided by other organisations that may be relevant to the needs of service users. Staff are able to explain what kinds of support, training and skills development are available to facilitate independent living among service users. Staff are able to describe how users can access a range of appropriate services and support both within their own organisation and from other relevant organisations.					Comments/Issues	
ii	Service users understand that they are able to receive services from alternative service providers (where these exist).					Service users are able to explain the options available to them.						
	Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.		HIAs	3	Supp.Lodg. & Adult Pl.	3
iii	Users are offered opportunities to have a say in what kind of information they want, and in what forms.					Users can describe opportunities that are made available to them to say what kind of information they need, and the forms in which it should be offered.					Comments/Issues	

Quality Assessment Framework: supplementary service objectives

Performance Level A												
Standards						Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3	
i	Service users understand how to access a range of services to meet their diverse needs – both those provided by the organisation and those available through other providers.					There is a documented protocol which ensures that service users are informed of the options available. Service users are able to explain their options.					Comments/Issues	
ii	Service users understand the procedure for terminating the current service and for accessing alternative support, if appropriate.					Service users are able to explain the procedure. Service users are aware of how they might access alternative support that may be more appropriate to meet their current needs.						
	Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.		HIAs	3	Supp.Lodg. & Adult Pl.	3
iii	Service users understand the options available to them.					Service users can explain the key differences between the service they are using and other services on offer that may address their needs.					Comments/Issues	
iv	Potential users are able to meet with existing users before accepting an offer.					Current service users confirm that they were able to do this. <i>Note: may not apply to domestic violence services.</i>						

Quality Assessment Framework: supplementary service objectives

S 1.2 – consulting and involving service users
Service users are consulted about the services provided and are offered opportunities to be involved in their running.

Performance Level D											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
										Comments/Issues	
i	There is no structured consultation framework place and the need to develop one is accepted.										

Performance Level C											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	Service users have the right to be consulted.					The statement of rights and responsibilities includes the right to be consulted.					Comments/Issues
ii	Service users and carers are consulted on all significant proposals, which affect their lives or comfort, and their views taken into account.					Records show that formal or informal consultation has taken place and that proposals have been developed or amended in the light of feedback from service users.					

Quality Assessment Framework: supplementary service objectives

Performance Level B												
Standards						Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3	
i	Users are offered a range of opportunities to give their views make comments, offer ideas - both individually and in groups - about the services provided.					<p>There is a documented approach to consultation which makes clear what steps are taken to ensure that consultation occurs and is effective.</p> <p>Mechanisms for consultation are wide-ranging and aimed at securing the inclusion of all service users, to the extent and at the level they wish to be involved.</p> <p>Staff can point to several examples of how service users can and have influenced decisions about how a service is delivered, which go beyond consultation on already formulated proposals.</p>					Comments/Issues	
ii	Support is provided to facilitate engagement, and opportunities and forums for involvement are designed to encourage participation.					<p>There is evidence that appropriate support is available to enable users with different needs and capacities to be consulted. This includes practical help (e.g. travel expenses, signing, audio loop systems), advocacy, social skills development (assertiveness, self-confidence) and other specific skills development as appropriate.</p>						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.		HIAs	3	Supp.Lodg. & Adult Pl.	3	
iii	Service users are clear about what is expected of them, what they can influence and what will happen as a result of their involvement.					<p>There is evidence that information is provided from the outset that clarifies what scope there is for users to have an influence on decision-making, and what they can and cannot influence.</p> <p>There is a documented process for informing service users of how their views have been taken into account.</p>					Comments/Issues	

Quality Assessment Framework: supplementary service objectives

Performance Level A												
Standards						Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3	
i	Consultation focuses on service users' concerns and they have opportunities to shape the agenda.					<p>Mechanisms for consultation are sufficiently open and flexible that users have the opportunity to raise their own issues and concerns and not just respond to what the service defines as important.</p> <p>Forums and opportunities are available that enable users to come together, to share experiences and determine what will meet their needs.</p> <p>There is documentary evidence to indicate that users' views are sought about preferred methods of consultation.</p>					Comments/Issues	
ii	Review processes exist for staff and service users to examine the effectiveness of consultation mechanisms and the outcomes achieved.					<p>There is a documented process of review that indicates the effectiveness of the consultation process and outcomes from the perspective of service users; staff and managers.</p> <p>Documents from the review (minutes, notes) indicate what is successful and what needs to change to secure more meaningful involvement.</p>						
	Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.		HIAs	3	Supp.Lodg. & Adult Pl.	3
iii	Service users have opportunities for meaningful participation at the highest levels in running the service.					<p>There are creative and appropriate mechanisms in place to facilitate service users' involvement.</p> <p>Decision-making mechanisms facilitate users being involved in designing and developing services and setting quality standards.</p> <p>Minutes of decision-making forums illustrate how service users' views have been taken into account.</p> <p>Service users confirm that they believe that their views have been properly considered.</p>					Comments/Issues	

Quality Assessment Framework: supplementary service objectives

S 1.3 – empowerment and supporting independence
There is a commitment to empowering service users and supporting their independence.

Performance Level D											
Standards				Evidence							
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	The service description and/or support plans do not address empowerment and the need for further work is accepted.						Comments/Issues				

Performance Level C											
Standards				Evidence							
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs		Supp.Lodg. & Adult Pl.	3
i	The service encourages service users to do things for themselves whenever possible rather than rely on staff.				Statements in the service description, support plans, house meeting minutes etc.. Staff and service users confirm that this happens.			Comments/Issues			

Quality Assessment Framework: supplementary service objectives

Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.		HIAs	3	Supp.Lodg. & Adult Pl.	3
											Comments/Issues
ii	Service users are encouraged to take part in active decision making about their home and the services they receive.					Statements in the service description. Staff and service users confirm that this happens.					

Performance Level B											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	The service has a defined approach to empowering service users.					The approach is documented and: <ul style="list-style-type: none"> defines the meaning of empowerment as it applies to users of the specific service describes how the service aims to empower service users and support their independence 					Comments/Issues
ii	Staff understand and work in accordance with the approach.					Empowerment and promoting independence feature in training and induction programmes. Staff are able to describe how they work with service users in order to promote independence etc.					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.		HIAs	3	Supp.Lodg. & Adult Pl.	3
iii	Independence is promoted through appropriate skills training and/or equipment and adaptations and services relevant to individual needs.					Support plans and/or key working programmes incorporate the learning of independent living skills and/or acquisition of enabling equipment and adaptations etc. appropriate to the needs of the service users.					Comments/Issues

Quality Assessment Framework: supplementary service objectives

Performance Level A												
Standards						Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3	
i	Assessments of client risk balance the duty of care with promotion of independence.					Support plans or key working records indicate that service users are encouraged to take reasonable risks in developing their independence.					Comments/Issues	
ii	Information about and understanding of individual users places emphasis on their strengths and supports them in developing their own solutions to problems.					Case records and other documents as well as service users confirm this to be the case.						
	Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs		Supp.Lodg. & Adult Pl.	3
iii	Organisational culture encourages appropriate risk taking.					There is a documented approach to risk taking that enables staff to understand the meaning of “appropriate risk taking” and discourages risk avoidance as the key feature of support planning. <i>Note: the requirement is for an emphasis on the way services are delivered rather than a precise system.</i>					Comments/Issues	
	Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.		HIAs			Supp.Lodg. & Adult Pl.
iv	Service users play an active role in shaping current and future service delivery.					Service users are involved appropriately and effectively in: <ul style="list-style-type: none"> • staff recruitment • business planning • review of the service description • review of aims and objectives • management structures e.g. board of management, sub-committees, AGMs, HIA Advisory Boards etc. 					Comments/Issues	
	Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.		HIAs			Supp.Lodg. & Adult Pl.

Quality Assessment Framework: supplementary service objectives

v	Expertise and resources are available to enable service users to develop their talents and abilities.	Case records and other documents as well as service users confirm this to be the case. Service users provide examples of specific initiatives that have expanded their skills, confidence and self-esteem.	
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Quality Assessment Framework: supplementary service objectives

S 1.4 – participation in the wider community
Service users are empowered in their engagement in the wider community and the development of social networks.

Performance Level D											
Standards				Evidence							
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs		Supp.Lodg. & Adult Pl.	3
i	There is no generalised approach to empowering service users in their engagement in the wider community and the need for action in this area is accepted.						Comments/Issues				

Performance Level C												
Standards				Evidence								
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs		Supp.Lodg. & Adult Pl.	3	
i	Service users are encouraged to consider ways in which they can participate in the wider community.				Support plans show that staff and service users have discussed aspirations for employment, education, social and leisure activities outside of the confines of the service. Literature concerning the availability of such services, activities and opportunities is made readily available e.g. leaflets, posters, information imparted during key working sessions, informal contact with staff etc.			Comments/Issues				

Quality Assessment Framework: supplementary service objectives

ii	The service actively encourages and promotes links with friends and, where appropriate, families.	Support plans refer to specific actions or initiatives to be taken to support service users where appropriate.	
iii	There are no unnecessary barriers that prevent service users from maintaining these networks.	Except in particular cases (e.g. domestic violence and offender services) there are no policies or rules that prevent service users from visiting or receiving friends and relatives. Service users confirm this.	
iv	Service users wishing to develop intimate relationships are able to do so.	There are no unnecessary rules which restrict the freedom of service users to develop intimate relationships.	
	Supported housing 3	Sheltered housing 3	Floating support 3
		Very short term accom. 3	HIA's 3
			Supp.Lodg. & Adult Pl. 3
v	The service provides service users with structured opportunities to participate in leisure services, education and employment within the wider community.	Records of participation in events or activities. Service users confirm that they are able to participate in activities that they have chosen.	Comments/Issues

Performance Level B			
Standards			Evidence
Supported housing 3	Sheltered housing 3	Floating support 3	Very short term accom. 3
			HIA's 3
			Supp.Lodg. & Adult Pl. 3
i	There is a strategy for maximising service users participation in the wider community.	The strategy is documented and describes the steps that will be taken to assist service users to engage with the wider community. Where appropriate steps should include referring service users to other support services such as befriending and family mediation.	Comments/Issues

Quality Assessment Framework: supplementary service objectives

ii	Staff understand and work to deliver the strategy.	The importance of engagement in the wider community and the steps to be taken to promote it feature in training and induction programmes. Staff are able to describe how they work with service users in order to promote engagement.	
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Performance Level A										
Standards						Evidence				
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	Supp.Lodg. & Adult Pl.	3
i	Service users are able to participate in leisure services, education and employment within the wider community how and when they choose, and the service provider provides the necessary support for enabling this.					Staff and resources are available to respond to individual requests for support. Service users have access to transport and telephones in order to make their own arrangements. Service users confirm that they are encouraged and supported to participate in “mainstream” services.				Comments/Issues
ii	The service provides users with appropriate confidence building and skills development to participate in the wider community.					Support plans and service descriptions feature skills training, counselling, advocacy and other support services tailored to enhancing the independence of individual service users. (These may be provided directly by the service provider or by other external agencies.) Service users confirm that such support is provided and is working effectively towards meeting their needs.				

Quality Assessment Framework: supplementary service objectives

iii	<p>Service users are able to visit or receive friends and family as and when they choose.</p>	<p><i>When applying this standard account must be taken of health and safety considerations and service users' support plans.</i></p> <p>Staff and resources are available to respond to individual requests for support in arranging such contacts.</p> <p>Service users have access to transport and/or telephones in order to make their own arrangements.</p> <p>Service users confirm that they are encouraged and supported to participate in "mainstream" services.</p>	
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Group 2 – rights and responsibilities

S 2.1 – privacy and confidentiality
Individual rights to privacy and confidentiality are respected
<i>Explanatory note: The suitability of premises is addressed by Objective S3.3.</i>

Performance Level D											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	There are no policies governing confidentiality and privacy and the need to develop them is accepted.									Comments/Issues	

Performance Level C											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	There are confidentiality, privacy and freedom of information policies.					The policies exist and are appropriate to the service user group. The policies have been reviewed within the last five years and are in accordance with relevant legislation and best practice (see checklist in Guidance).					Comments/Issues

Quality Assessment Framework: supplementary service objectives

ii	Service users are made aware of the policies and their associated rights.	The policies are explained in service users' handbook, induction packs or similar introductory information. Service users confirm awareness of the policies and their implications for them.	
iii	Access to service users' personal records is restricted to those with a need to have access.	Paper records are kept in locked cabinets or locked rooms to which only authorised personnel have access. Computerised records are protected by security protocols e.g. passwords etc.	
iv	The confidentiality and privacy policies are understood and implemented by staff.	Induction and/or training programmes address the policies. Staff are able to explain the main features of the policies and the implications for their work.	
Supported housing	3	Sheltered housing	3
Floating support		Very short term accom.	3
		HIAs	
		Supp.Lodg. & Adult Pl.	3
v	Service users receive their mail unopened.	The confidentiality policy states that this shall be so. Staff and service users confirm that this happens.	Comments/Issues
vi	Service users are entitled to privacy within their own spaces.	Documented protocols govern staff, contractors and other service users entering private spaces and interview or meeting rooms. In accommodation-based services the protocols are in accordance with relevant clauses contained within tenancy and license agreements.	

Quality Assessment Framework: supplementary service objectives

Performance Level B											
Standards					Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	Service users understand their rights under the policies.				Users are able to describe their principle rights. Users know how to access copies of written records relating to themselves.				Comments/Issues		
ii	The policies make clear when confidentiality may be set aside and why.				The policies explain arrangements for information sharing with other agencies.						
iii	The policies and their effectiveness are regularly reviewed.				Minutes or other notes confirm this.						

Performance Level A											
Standards					Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.		HIAs	3	Supp.Lodg. & Adult Pl.	3
i	Service users are actively involved in the drafting and/or review of the confidentiality and privacy policies.				Minutes or other notes record participation by service users.				Comments/Issues		

Quality Assessment Framework: supplementary service objectives

Supported housing	Sheltered housing	Floating support	Very short term accom. 3	HIAs	Supp.Lodg. & Adult Pl. 3	
ii	Service users are actively involved in the drafting and/or review of the confidentiality and privacy policies.		In services where it is not practicable for service users to be involved, policy reviews involve external agencies able to consider the service from a user perspective (e.g. principal referral agencies, advice agencies etc.).			Comments/Issues

Quality Assessment Framework: supplementary service objectives

S 2.2 – rights and responsibilities

The rights and responsibilities of service users, staff and community are promoted and protected.

Performance Level D											
Standards				Evidence							
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	There is no statement of the rights and responsibilities of service users and the need to develop one is accepted.						Comments/Issues				

Performance Level C											
Standards				Evidence							
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	There is a statement of the rights and responsibilities of service users.			The statement exists and covers all relevant areas (see checklist in Guidance).			Comments/Issues				
ii	The statement is explained to service users on entry to the service.			Staff and service users confirm this to be the case.							

Quality Assessment Framework: supplementary service objectives

iii	<p>There is a clear and accessible statement of the rights and responsibilities of staff which</p> <ul style="list-style-type: none"> covers their relationship with service users and other agencies is understood by staff and implemented is explained to staff on entry to the service and reinforced through support and supervision thereafter. 	<p>The statement exists and sets out the professional boundaries of staff in relation to service users and other professionals.</p> <p>Staff are able to demonstrate understanding of the approach set out in the statement.</p> <p>There is evidence from notes or minutes of induction, supervision and training activities that the statement is conveyed to staff and reinforced by managers.</p>										
Supported housing	3	Sheltered housing	3	Floating support		Very short term accom.	3	HIAs		Supp.Lodg. & Adult Pl.	3	
iv	<p>Residents' rights and responsibilities in relation to their accommodation are explained.</p>	<p>All residents have received and signed an occupancy agreement that sets out their rights and obligations in relation to the accommodation that is provided together with their support.</p> <p>Signed originals are retained by the landlord and the resident.</p>	Comments/Issues									

Performance Level B												
Standards						Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3	
i	<p>The statement of rights and responsibilities is accessible to people who use the service.</p>					<p>The statement is written in plain language and, where necessary, is available in forms which make appropriate use of video, audio, the spoken word etc. in order to ensure maximum accessibility to the intended service user group.</p>						Comments/Issues
ii	<p>The statement</p> <ul style="list-style-type: none"> is reflected in actual practices explains the need for any restrictions upon personal freedoms 					<p>Case notes or support plans evidence service delivery that is consistent with the statement.</p> <p>Staff and documentary evidence confirm that practices are consistent with statement.</p>						

Quality Assessment Framework: supplementary service objectives

Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.		HIAs		Supp.Lodg. & Adult Pl.	3
iii	The statement is reinforced with service users after entry.					Case notes or similar demonstrate that the notion of rights and responsibilities is explored through individual or group work with service users. Service users and staff confirm this to be the case. Staff can explain how it happens.					Comments/Issues

Performance Level A											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	Service users understand their rights and responsibilities.					Service users are able to describe their rights and responsibilities in ways that are consistent with the statement.					Comments/Issues
ii	The extent to which the service promotes and protects the rights and responsibilities of service users, staff and the community is periodically reviewed in participation with service users.					There are notes of such reviews and the outcomes. There is evidence of participation of service users, staff and members of the community (e.g. minutes of meetings, attendance lists etc.).					

Quality Assessment Framework: supplementary service objectives

S 2.3 – complaints
Users, carers and other stakeholders are made aware of complaints procedures and how to use them.

Performance Level D											
Standards				Evidence							
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	There is no written complaints procedure and the need to develop one is accepted.								Comments/Issues		

Performance Level C											
Standards				Evidence							
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	There is a written complaints procedure which makes clear: <ul style="list-style-type: none"> whom to complain to in the first instance; what the organisation will do; how to escalate a complaint and appeal in the case of dissatisfaction with the outcome. 				The procedure exists and has been reviewed within the last five years. In accommodation-based services where the landlord and support provider are not the same body, the procedure makes clear whom to complain to regarding the support service.				Comments/Issues		

Quality Assessment Framework: supplementary service objectives

ii	All service users and carers are made aware of the complaints procedures and how to use them.	The existence of the procedure is publicised in appropriate ways e.g. in service user induction or welcome packs or handbooks, on notice boards etc.	
iii	Staff follow the procedure.	Staff are able to describe the procedure. There is a log of complaints.	
iv	Action is taken in response to individual complaints.	A log records outcomes to complaints and shows that appropriate action is taken within reasonable response times.	

Performance Level B											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	The language and presentation of the procedure promotes understanding by the majority of service users.					The procedure is written in simple language and is available in forms appropriate to the needs of as many service users as reasonably possible.					Comments/Issues
ii	The procedure is understood by service users.					Service users are able to describe the procedure.					

Quality Assessment Framework: supplementary service objectives

iii	Outcomes of complaints are fed back to complainants	Case files or other records contain correspondence or notes of verbal feedback.	
iv	Complaints are seen by the organisation and its staff as a positive feedback tool.	<p>Staff receive training in dealing with and encouraging complaints.</p> <p>Service users and carers feel able to complain and are confident that their complaint will be dealt with in a positive manner.</p> <p>There is a periodic review (at least every five years) that asks whether there is sufficient awareness of the procedure and what might inhibit complaints.</p>	

Performance Level A						
Standards				Evidence		
Supported housing	3	Sheltered housing	3	Floating support	3	
Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3	
i	Service users and carers are encouraged and empowered to use the complaints procedure.	Records (e.g. case notes, support plans, day-books) show that individual service users have been encouraged and supported in the use of the complaints procedures. Independent advocacy is available to help service users and carers to use the complaints system.	Comments/Issues			
ii	Complaints are proactively used in planning and shaping services with the involvement of service users and carers.	There is a periodic (at least annual) review of complaints received, which is shared with service users and carers who participate in determining consequent changes or improvements to the service.				
iii	The complaints procedure specifically addresses complaints from external individuals or organisations.	The procedure is documented.				

Quality Assessment Framework: supplementary service objectives

Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.		HIAs	3	Supp.Lodg. & Adult Pl.	3
iv	Reviews of the complaints procedure involve service users and carers.			There is a periodic review (at least every five years) of the complaints procedure which involves service users and carers in determining any changes in the procedures. The review should aim to ask whether there is sufficient awareness of the policy and what might inhibit complaints.			Comments/Issues				

Group 3 – the service

S 3.1 – service description
The provider has a coherent description of the support service/s to be provided, based on defined values, rights and philosophy of support.

Performance Level D											
Standards				Evidence							
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	There is no service description available to potential service users and other interested parties and the need to develop one is accepted.						Comments/Issues				

Performance Level C											
Standards				Evidence							
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	There is a description of the service, whom it is for and how it can be accessed.				The service description exists and covers basic information (see checklist in the Guidance) The information provided to current and potential service users contains a copy of the description.			Comments/Issues			

Quality Assessment Framework: supplementary service objectives

ii	The service description is up-to-date, accurate and used.	<p>There is documentary evidence (e.g. meeting minutes) to show that the description has been reviewed within the last three years or since the last time that there was a substantive change to the service).</p> <p>Staff describe the service in terms similar to those in the service description.</p> <p>The description is used to communicate with purchasers, current and potential service users, current and future staff and other stakeholders.</p>	
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Performance Level B												
Standards						Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3	
i	The service description is comprehensive.					The service description provides comprehensive information (see checklist in the Guidance).					Comments/Issues	
ii	The description is accessible to the majority of potential and actual service users and other stakeholders.					The description is written in simple language and is available in forms appropriate to the majority of service users for whom the service is intended.						

Quality Assessment Framework: supplementary service objectives

Performance Level A											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	The description is understood by service users and carers.					Descriptions of the service by service users are in accordance with the service description.					Comments/Issues
ii	The description addresses quality assurance.					The description explains: <ul style="list-style-type: none"> • how standards of service delivery are assured • what quality measures are in place • how service users have been involved in shaping the service. 					

Quality Assessment Framework: supplementary service objectives

S 3.2 – choice, sensitivity and responsiveness		
The service is flexible, sensitive and responsive with the aim of maximising service users’ dignity, independence, choice and control over their own lives.		
<i>Explanatory note:</i> <i>Many aspects of dignity, independence, choice and control are also addressed by Objectives S1.4, S1.2, S2.1, S2.3, and S3.3.</i>		

Performance Level D												
Standards						Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3	
i	There are few or no special measures in place to ensure that the service is flexible, sensitive, responsive to choice and maximises dignity and independence and the need to develop these is accepted.									Comments/Issues		

Performance Level C												
Standards						Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3	
i	The service is committed to ensuring that users have as much respect, dignity, independence, choice and control over their own lives as possible.						The service description states that the service aims to achieve this.			Comments/Issues		

Quality Assessment Framework: supplementary service objectives

Supported housing	3	Sheltered housing	3	Floating support		Very short term accom.	3	HIAs		Supp.Lodg. & Adult Pl.	3	
ii	<p>Service users have reasonable control over their day-to-day living.</p> <p><i>The aim of this standard is to ensure that there are no unnecessary arbitrary rules which restrict service users' freedoms. Evidence sought should demonstrate that the spirit of this standard is adhered to rather than the letter of the specific evidence given here which is provided for illustrative purposes.</i></p>					<p>Users are able to choose their own times for getting up, going to bed, receiving visitors, how they dress etc.</p> <p>Subject to the requirements of support plans and any statutory orders, service users are able to decide how they spend their time.</p> <p>Any "house rules" are made in consultation with service users – as confirmed by minutes of house meetings or similar forums.</p>					Comments/Issues	

Performance Level B												
Standards						Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3	
i	<p>The service responds to changing needs as identified through reviews of individual support needs.</p>					<p>Minutes, case notes, support plans, staff and service users confirm that requests for change or changing needs are given proper consideration.</p> <p>Where requests for change are not able to be met, service users are provided with a full explanation, as recorded in case notes, support plans or correspondence.</p> <p>Where requests for change are not met, there is a right of appeal.</p>					Comments/Issues	
ii	<p>Feedback from service users is regularly collected and reviewed</p>					<p>There are records of feedback collected through e.g. house meetings, HIA Advisory Groups, surveys, exit interviews or other appropriate methods.</p>						
iii	<p>There are easy to use feedback mechanisms for spontaneous use by service users.</p>					<p>There are well publicised formal means such as suggestions boxes, meetings etc. as well as informal means such as talking to members of staff which are backed up by formal recording processes.</p>						

Quality Assessment Framework: supplementary service objectives

iv	Service users have reasonable choice over the services they receive and how they are delivered.	Policies, the service description, service users themselves confirm that they are able participate in support planning and are able to exercise some choice over times that services are provided, who provides their support etc.	
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Performance Level A											
Standards				Evidence							
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	Service users are able to discuss concerns or worries about the service with an independent person before or instead of lodging a formal complaint.			Formal arrangements are in place and evidenced by agreements with the person or organisation. The person or organisation can confirm the arrangement. Service users are made aware of the arrangement via noticeboards, handbooks, periodic reminders from staff etc.			Comments/Issues				
ii	The service is periodically reviewed to ensure that it remains appropriate to the needs of service users.			There is a documented process of service review which takes account of the views of staff, service users and, where appropriate, carers and relatives and other stakeholders. The most recent review has taken place within the last three years, the outcomes of the review have been documented and changes implemented as required (within the constraints of any resource limitations).							
iii	Resources are sought to enable the service to respond to the wishes and needs of service users.			Where resource constraints have led to limitations on responding to service user choice or changing needs (as evidenced by case notes, support plans, feedback from staff or service users, service reviews etc.) there is evidence of initiatives to attract these resources i.e. grant applications, fund-raising etc.							

Quality Assessment Framework: supplementary service objectives

S 3.3 – the living environment
<p>The living environment</p> <ul style="list-style-type: none"> • is suitable for its stated purpose, accessible, safe and well maintained • is appropriate to the needs of residents • meets the requirements for independence privacy and dignity.
<i>The failure to achieve standard C(i) represents a serious potential risk to service users and/or staff. Where standard C(i) is not achieved providers must take immediate steps to bring performance up to this level.</i>
<p>Special note regarding applicability <i>This Objective only applies in services where accommodation and support are provided as a single linked package. If a service user may move home (within the locality) to a dwelling of their own choice and still receive the same service then the accommodation and support should not normally be considered as linked and so this Objective does not apply.</i></p>

Performance Level D											
Standards				Evidence							
Supported housing	3	Sheltered housing	3	Floating support		Very short term accom.	3	HIAs		Supp.Lodg. & Adult Pl.	3
i	<p>The premises do not comply with statutory requirements and the need for immediate action is accepted or The premises are unsatisfactory in other ways and the need for urgent action is accepted.</p>						Comments/Issues				

Quality Assessment Framework: supplementary service objectives

Performance Level C						
Standards				Evidence		
Supported housing	3	Sheltered housing	3	Floating support		
Very short term accom.	3	HIA's		Supp.Lodg. & Adult Pl.	3	
i	Premises comply with applicable legal requirements.			The provider holds certificates or other documentation to show that the premises meet applicable requirements (see checklist in the Guidance).		Comments/Issues
ii	Responsive maintenance is efficient and effective.			There is visual evidence of the building being maintained in a sound order. The provider has arrangements in place to ensure that maintenance needs can be responded to rapidly. Residents report that they are generally happy with the maintenance of the building.		
iii	Residents are able to add their own possessions.			Residents handbooks, welcome packs or other information state this to be the case and residents confirm that this happens in practice.		
iv	No residents share a bedroom unless they choose to do so.			Any residents currently sharing a room confirm that this is through choice.		

Quality Assessment Framework: supplementary service objectives

Performance Level B										
Standards					Evidence					
Supported housing	3	Sheltered housing	3	Floating support	Very short term accom.	3	HIAs	Supp.Lodg. & Adult Pl.	3	
i	<p>The suitability of the living environment has been objectively appraised for suitability for its stated purpose.</p> <p><i>The aim of this standard is to prompt service providers to periodically consider whether the premises that are used for service delivery are still suitable in terms of their general size, layout, design and features.</i></p> <p><i>The purpose of the checklist opposite is to act as a prompt to providers when considering the suitability of the premises. These items should be interpreted as meaning, for example, “We have considered the location of the service in relation to the needs of the service users”.</i></p>				<p>There is a documented review which has taken place within the last five years which takes account of the following factors:</p> <ul style="list-style-type: none"> • no. of rooms / flats • sizes of rooms / flats • communal spaces and public rooms • utility rooms – bathrooms, kitchens, laundries etc. • accessibility to people with physical, visual or auditory impairment • needs for privacy and dignity • grounds, gardens and parking • safety of staff, residents and visitors • 				Comments/Issues	
ii	<p>Any significant shortcomings arising from the appraisal will be remedied within a reasonable timescale.</p>				<p>There is a documented and agreed plan in place for addressing these shortcomings and necessary funding commitments have been received.</p>					
iii	<p>The use of surveillance equipment is kept to a minimum and is only used with the agreement of residents.</p> <p><i>This standard should be applied with due regard to safety and security considerations.</i></p>				<p>The use of CCTV and other surveillance is used only in external areas and internal areas where there would otherwise be a danger to residents.</p> <p>There are documentary records to show that residents have been consulted and, unless there are over-riding safety or security considerations, are in agreement with the use of CCTV etc.</p>					

Quality Assessment Framework: supplementary service objectives

iv	The living environment is non-institutional.	Furnishings, fittings, adaptations and equipment are good quality and are as domestic, unobtrusive and ordinary as is compatible with fulfilling their purposes. Confirmed by visual inspection and residents.	
v	The premises in which the service is delivered promote privacy and dignity.	Private space other than bedrooms – e.g. separate meeting room, private use of a communal room - is available for interviews and meetings with staff, visitors and other residents, Toilets, bathrooms and residents’ private spaces (e.g. bedrooms or flats) have locks. Telephones are sited in such a way that conversation cannot be overheard e.g. they are in enclosed booths or rooms.	
vi	The environment promotes healthy living.	The premises are clean and free from offensive odours and provide access to sufficient heat, light and ventilation.	
vii	The environment promotes independent living.	There are equipment and adaptations to assist with those disabilities or impairments most commonly encountered amongst residents.	
viii	There are no unnecessary restrictions on residents’ movements, their use of the building and their receiving of visitors. <i>This standard should be applied with due regard to health and safety considerations, service users’ support plans and any “house rules”.</i>	Residents are able to entertain in their own rooms or flats or in other private spaces. Individuals are able to leave and enter the premises and their own rooms or flats at any time. There is a visitors policy which clearly establishes appropriate guidelines for matters such as overnight visitors, use of communal areas for guests etc. The guidelines protect the privacy and quiet enjoyment of other residents and do not place any unnecessary restrictions on the freedom of individual residents.	

Quality Assessment Framework: supplementary service objectives

Supported housing	3	Sheltered housing	3	Floating support		Very short term accom.		HIAs		Supp.Lodg. & Adult Pl.		
ix	The decoration of the internal environment is determined or influenced by residents.					Residents are consulted about the decoration and furnishing of communal areas. Residents of temporary housing are consulted about the decoration and furnishing of their own rooms or flats. Residents of permanent housing are able to redecorate the interior of their own flats or rooms as they choose. All of the above rights or policies are explained in residents' handbooks, welcome packs or other information and residents confirm that they exercise these rights in practice.					Comments/Issues	
										3		
x	The decoration of the internal environment is determined or influenced by residents.					Residents are consulted about the decoration and furnishing of their own rooms or flats and their right to be consulted is explained in residents' handbooks, welcome packs or other information and residents confirm that they exercise these rights in practice.					Comments/Issues	
xi	Residents are able to add their own furnishings. <i>This standard should be applied with due regard to health and safety considerations and to the practical limitations that may be faced in extremely short-term accommodation.</i>					Residents handbooks, welcome packs or other information state this to be the case and residents confirm that this happens in practice.					Comments/Issues	
xii	Maintenance response times are monitored and found to be acceptable.					There is a log of all maintenance requests by staff or residents together with response times. Response times are in line with reasonable targets set by the organisation. Records show that emergency repairs are always dealt with within 24 hours.						

Quality Assessment Framework: supplementary service objectives

Performance Level A										
Standards					Evidence					
Supported housing	3	Sheltered housing	3	Floating support	Very short term accom.	3	HIAs	Supp.Lodg. & Adult Pl.	3	
i	Privacy policies are set by residents.				Documentary records and residents (if those involved are still resident) confirm that their views were fundamental to the development of policies covering use of communal spaces, visitors, surveillance equipment, noise etc.				Comments/Issues	
ii	The environment promotes independent living.				<p>There are equipment and adaptations to assist with all common disabilities and impairments (i.e. physical and leaning disabilities, auditory and visual impairments).</p> <p>All residents have unrestricted access to (private or shared) laundry, cooking and washing facilities. Where such access would otherwise present a health and safety risk, staff are available to assist residents.</p>					
iii	Residents are involved in determining target response times for day-to-day maintenance.				Reasonable and realistic response targets are agreed with residents and outcomes are reported to residents on a periodic basis (at least annually).				Comments/Issues	

Group 4 – organisation and management

S 4.1 – leadership and accountability and management systems
There is a robust approach to governing, directing and accounting for the service which is underpinned by effective systems and practices which support service delivery.
<p><i>Explanatory note:</i> <i>Many aspects of a full suite of systems and procedures are addressed elsewhere in the Service Objectives:</i> <i>Human resources management – Objective S4.3</i> <i>Property management – Objective S3.3</i> <i>Service quality management – Objective S4.2</i> <i>Outcome monitoring – S4.2</i></p>

Performance Level D											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
											Comments/Issues
i	Adequate systems and practices are not yet in place or the provider organisation is not properly constituted (does not apply to sole traders) or is operating outside its legal powers and a need for urgent action is accepted.										

Quality Assessment Framework: supplementary service objectives

Performance Level C												
Standards						Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3	
i	The service is within the provider's legal powers.					The service provided is within the provider's powers as stated in its governing instrument. <i>(Trust Deed in the case of charities, Memorandum and Articles of Association in the case of limited companies and industrial and provident societies and various statutes in the case of statutory sector providers.)</i> <i>Unlikely to apply to sole traders or most partnerships.</i>					Comments/Issues	
ii	The provider ensures that there are sufficient resources available to provide the service to the required standard.					The trustees, board of management or proprietors: <ul style="list-style-type: none"> • prepare an annual service budget in advance of the start of the financial year • receive regular (at least quarterly) accounts showing service income and expenditure to date compared to budget • prepare an annual statement of accounts which is audited (certified in the case of partnerships and sole traders) by a suitably qualified person or body 						
iii	Internal accountability is clear and the respective roles and responsibilities of staff and board, trustees or proprietors are clearly defined.					All staff have up-to-date job descriptions which accurately describe <ul style="list-style-type: none"> • their principle responsibilities • to whom they report • for whom they are responsible. All responsibilities which are delegated to service staff are documented in job descriptions of staff and / or referred to in statements of delegated authority.						

Quality Assessment Framework: supplementary service objectives

iv	Managers are aware of the key risks faced by the service and conduct its business accordingly.	Service managers can readily describe the principal risks faced by the service and how they manage or minimise these.	
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Performance Level B											
Standards				Evidence							
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	The service is accountable to service users, funders and regulators.			The service provider holds an annual general meeting, or equivalent, to which key stakeholders and other interested parties are invited and at which they may question members of the provider's governing body or its proprietors.			Comments/Issues				
ii	The provider ensures that there will continue to be sufficient resources available to provide the service to the required standard.			There is a realistic budget covering at least the current and next two financial years. Future budgets are reviewed annually in the light of past performance.							
iii	Demand for services is monitored on an ongoing basis.			(At least) quarterly reports monitoring readily available demand indicators e.g. utilisation (i.e. occupancy, take-up etc), waiting lists, nos. of referrals, feedback from purchasers and other stakeholders, reasons for referrals refused and offers not accepted etc.							

Quality Assessment Framework: supplementary service objectives

iv	There is a robust programme of internal audit.	There is a documented process of internal audit which periodically examines compliance with all policies and procedures applicable to the service. Coverage and frequency should be determined in the light of a risk assessment of the consequences of non-compliance. The programme must be adequately resourced at a level appropriate to the scale of the organisation. In small providers it might be undertaken by a committee member. In larger providers it is likely to be undertaken either by means of internal specialist staff or a sub-contract with a suitable external body.	
v	There is a formal mechanism of risk assessment and management applicable to the service.	<p>The risk assessment is documented and no more than three years old.</p> <p>Assessed risks include more than financial risks (e.g. political change, economic factors, reputational risk etc.).</p> <p>Actions have been taken (or are planned to be taken) to minimise or manage significant risks (as evidenced by minutes and/or confirmed by staff). Planned actions are documented together with target completion dates and identified responsible personnel.</p>	
vi	The governing body regularly monitors service quality.	<p>The governing body or proprietors receive regular reports containing (qualitative and/or quantitative) information regarding service quality. Such information should cover at least:</p> <ul style="list-style-type: none"> • occupancy / take-up • turnover (staff and service users) • complaints • reasons for leaving (staff and service users) • staff vacancies • use of temporary staff <p>The governing body or proprietors receive regular (at least annual) reports of service user satisfaction.</p>	

Quality Assessment Framework: supplementary service objectives

Supported housing	Sheltered housing	Floating support	Very short term accom.	HIAs	3	Supp.Lodg. & Adult Pl.
vii	The governing body regularly monitors service effectiveness.		The governing body or proprietors receive regular reports which: <ul style="list-style-type: none"> • evaluate time-limited projects when these have ended • monitor reasons for withdrawal or termination of the service. 			Comments/Issues

Performance Level A											
Standards			Evidence								
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	The governing body or proprietor monitors service outcomes and reviews service delivery, staff training etc. in this light.		Regular reports are received (at least quarterly) and enable trustees, directors or proprietors to assess the success of the service in delivering intended outcomes and meeting its aims and objectives.			Comments/Issues					
ii	Future demand for the service is assessed periodically.		Periodic reports (at least every three years) assess information from a wide range of sources e.g. demographic data, local strategies and plans, feedback from purchasers and/or funders etc.								
iii	Risk assessments take account of the views and knowledge of relevant external bodies.		The documented risk assessment records the evidence used in assessing risk and this covers key external agencies such as referral agencies, peer providers, funders, neighbourhood organisations etc.								

Quality Assessment Framework: supplementary service objectives

S 4.2 – continuous improvement
The service is organised within a culture of continuous improvement. This Framework is used as the basis for ensuring that the key aspects of support service improvement are being described, evaluated and improved.
<i>Explanatory note: Some mechanisms for achieving continuous improvement (e.g. feedback from service users, service reviews etc.) are addressed elsewhere e.g. Objectives S1.4, and S3.2.</i>

Performance Level D											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
											Comments/Issues
i	Mechanisms for delivering continuous improvement are not yet in place and the need for developing them is accepted.										

Performance Level C											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	The purpose of the service and its intended outcomes are clear.					The service operates within a clearly written set of aims and objectives. There are documented specific intended outcomes which are sufficiently clear to enable managers or other stakeholders to assess the success of the service.					Comments/Issues

Quality Assessment Framework: supplementary service objectives

Performance Level B											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	Service quality is monitored.					There are documented formal and informal processes for monitoring service user satisfaction, complaints are monitored and analysed, comments and feedback from other stakeholders is recorded and periodically analysed. Improvement plans are recorded and implemented (documentary evidence plus confirmation from service users and/or staff).					Comments/Issues
ii	Service user outcomes are monitored.					There are data gathering, recording and reporting mechanisms in place that enable analysis of the outcomes for service users at the point when they leave the service.					
iii	There is a planned approach to quality improvement.					Periodic reports to the governing body or senior managers analyse measures and indicators of service quality, identify any apparent strengths and weaknesses and outline plans of action to build on strengths and address weaknesses.					

Performance Level A											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	The provider is accountable for the quality of its service.					Results of quality monitoring are periodically (at least annually) reported to service users and other stakeholders.					Comments/Issues

Quality Assessment Framework: supplementary service objectives

ii	The service is accredited by means of an appropriate quality system.	Up-to-date certificates from accrediting bodies (e.g. Investors In People, CSHS, British Standards Institute etc.).	
iii	Service quality is monitored by means of specifically designed quality measures which are developed in conjunction with service users.	Evidence (minutes, correspondence, confirmation by service users and staff) of the process by which service users were involved in the development of quality measures.	
iv	The service participates in organisational learning activities with a view to improving service delivery.	Records demonstrate that the service is an active participant of such initiatives as benchmarking clubs, peer review, quality circles etc. Staff are able to describe quality improvements which have arisen directly from such activities.	
v	Periodic service reviews ask not just whether things are done right but whether the right things are done.	There is a documented process of service review which invites, facilitates and enables service users and other stakeholders to consider the fundamental basis on which the service is delivered and whether service outcomes could be achieved in better ways.	
Supported housing	3	Sheltered housing	
Floating support	3	Very short term accom.	3
		HIAs	3
		Supp.Lodg. & Adult Pl.	3
vi	Services with a rehabilitative purpose monitor medium term service user outcomes.	<p>There are data gathering, recording and reporting mechanisms in place that enable analysis of the outcomes for service users at an appropriate point in the future after they leave the service.</p> <p>Periodic reports to the governing body or senior managers analyse this data, identify any apparent strengths and weaknesses of the service and lead to appropriate action to build on strengths and address weaknesses.</p> <p><i>(NB It is recognised that the success of these measures will depend on the nature of the people using the service and their willingness to participate in such monitoring. The provider should be able to demonstrate that reasonable efforts are made.)</i></p>	<p style="text-align: center;">Comments/Issues</p>

Quality Assessment Framework: supplementary service objectives

S 4.3 – staff recruitment, management and development
Service quality and improvement are achieved through sound support, management and development of all the people working to deliver support.
<i>Explanatory note: equal opportunities and anti-discriminatory practice are addressed by Core Service Objective C1.4</i>

Performance Level D											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	Adequate procedures for the recruitment, management and development of staff are not yet in place and the need to develop them is accepted.										Comments/Issues

Performance Level C											
Standards						Evidence					
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3
i	Recruitment processes focus on the needs of the service.						Job descriptions and person specifications are periodically reviewed (either annually or each time the post becomes vacant, whichever is the greater) to ensure that new staff have the skills, experience and aptitudes required to deliver a good quality service.				Comments/Issues
ii	There is an induction programme for new staff and volunteers.						The programme is documented. Records (e.g. personnel files, attendance records etc.) show that all staff and volunteers receive induction shortly after joining the service.				

Quality Assessment Framework: supplementary service objectives

iii	All staff know what is expected of them in their work.	All service delivery staff have up-to-date job descriptions which reflect their actual responsibilities and the requirements of the service. Staff are able to describe the purposes of their jobs and key responsibilities in line with their job descriptions.	
iv	Operational policies are made clear to staff.	There is a comprehensive policies and procedures manual (or equivalent) covering all aspects of service delivery. The manual is accessible for easy reference by staff (i.e. it is located on site and staff know where to find it).	
v	All staff and volunteers involved in service delivery have access to regular support and supervision.	Supervision notes show that regular supervision takes place and feedback on performance given.	
vi	Staff and volunteers are able to discuss any concerns with knowledgeable managers as and when necessary.	Staff and volunteers confirm this to be the case.	
vii	Staff performance is monitored and managed.	All service delivery staff receive periodic (at least annual) appraisals at which performance is considered and development or improvement plans put in place.	

Quality Assessment Framework: supplementary service objectives

Performance Level B												
Standards						Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3	
i	Recruitment processes focus on the core skills and competences required in order to deliver a quality service.					Recruitment adverts, job descriptions and staff handbooks focus on the purposes and outcomes required of staff rather than the tasks to be performed. The provider uses a range of candidate assessment methods designed specifically to assess for particular skills and competences e.g. interview, role play, written exercise, psychometric testing etc.					Comments/Issues	
ii	Staff are familiar with operational policies.					Staff are able to describe the principal content of the procedure manual (or equivalent). Staff are able to describe the key features of individual policies and procedures.						
iii	Targets for individual performance are linked to service aims and objectives.					There is documentary evidence that demonstrates that service-level objectives are cascaded into individual objectives e.g. annual business plan, team or departmental plan, support and supervision notes.						
iv	Sufficient resources are made available to ensure that essential training needs are met.					There is an adequate training budget. If training is provided “on the job”, staff complements are above the minimum required to deliver the service.						

Performance Level A												
Standards						Evidence						
Supported housing	3	Sheltered housing	3	Floating support	3	Very short term accom.	3	HIAs	3	Supp.Lodg. & Adult Pl.	3	
i	Individual appraisal incorporates feedback from					There is a documented appraisal process which					Comments/Issues	

Quality Assessment Framework: supplementary service objectives

	a range of sources (e.g. service users, peers, other managers, managed staff etc).	describes the mechanisms for gathering feedback from other sources, how it is to be used and by whom. Appraisal notes record the use of this feedback.	
ii	The developmental or continuous improvement needs of the service are reflected in training planning.	There is a documented service-wide training plan, which cascades the needs of the service into individual training plans. There are periodic team, patch or whole group meetings at which collective support and supervision needs are addressed.	
iii	Feedback from service users influences the design of training plans.	There is formal recording of feedback from service users (via e.g. complaints, formal consultation processes, key-working, day-to-day discussions with staff etc.) and documentary evidence of this being collated and taken account of when preparing training plans.	
iv	Staff have opportunities to ask “what can I do to improve the service”.	The provider organises periodic (at least annual) events where staff have time out from service delivery to reflect on practice and quality matters with a view to improving quality and outcomes. Outcomes from these opportunities are recorded and action plans implemented.	
v	Staff are supported in developing new practices.	Management processes (e.g. staff supervision meetings) encourage staff to discuss new ideas for service delivery and, after suitable risk assessment, to experiment with these. Staff confirm that the organisational culture is one which is open to innovation and can point to service improvements which have come about as a result.	
	Supported housing 3	Sheltered housing 3	Floating support 3
	Very short term accom.	HIAs 3	Supp.Lodg. & Adult Pl. 3
vi	Service users are actively involved in staff	Service users are involved in the definition of support	Comments/Issues

Quality Assessment Framework: supplementary service objectives

	recruitment.	needs and, hence, the preparation of job descriptions and person specifications and, where appropriate and feasible, in candidate selection. Where needed, there are appropriate mechanisms in place to train and support service users through these processes to enable meaningful participation.	
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