

Kirklees MC

Supporting People

Accreditation Policy

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1.0 Introduction

- 1.1 As part of the process of managing Support Services, local authorities need to assure themselves that *providers* or *potential providers* of Supporting People services are suitable organisations. Accreditation is concerned with the *organisations* that provide or wish to provide services and is not directly concerned with the quality of service delivery.
- 1.2 The aim of this guidance is to provide an accreditation system which ensures service providers and potential service providers are effective and robust organisations whilst not imposing overly bureaucratic and burdensome procedures (which could also potentially disadvantage smaller or BME providers).

2.0 Key Requirements

- 2.1 The Monitoring and Review Guidance published by ODPM in December 2002 requires that providers:
- are financially viable;
 - have competent administrative procedures that are able to properly handle and account for Supporting People grant;
 - have effective employment policies to cover staff development, staff supervision and the health and safety of both staff and service users (not applicable to Sole Traders);
 - have sufficiently robust management procedures to provide Supporting People services; and
 - are able to demonstrate a track record or competence to deliver services.

3.0 Frequency and Timing

- 3.1 ODPM has confirmed the need for the accreditation scheme to sit alongside the review process. Therefore accreditation must be completed before or as part of the first stage of the review process.
- 3.2 New contracts should only be issued to accredited providers.
- 3.3 Accreditation lasts for a three-year period or until the next service review, which ever is the longer. At the end of this period and before the issuing of a further contract a provider must be re-accredited.
- 3.4 If an existing provider fails to meet the accreditation criteria then it should be given up to a year to achieve the required standard.

4.0 Services Provided by Statutory authorities

- 4.1 Statutory authorities (local authorities, health authorities, primary care trusts and probation services) do not need to be accredited in order to receive Supporting People funding.

- 4.2 Accreditation is not deemed necessary because whilst the fact of being a public body does not guarantee that an organisation is stable or robust enough to deliver services, generally statutory sector providers are safeguarded from going out of business and leaving service users without a service.
- 4.3 Furthermore, statutory sector providers are subject to regulatory and inspection regimes i.e. District Audit, Social Services Inspectorate, and the Audit Commission which seek to ensure that they are accountable and soundly managed.

5.0 Services Provided by Other Organisations

- 5.1 All organisations, except statutory organisations, which are currently providing or wish to provide support services funded through the Supporting People Grant, must be accredited.

6.0 Sole Traders

- 6.1 The term “sole trader” refers to individual support providers who are not working for a charity, housing association, limited company or other type organisation but are working by themselves, often in their own homes, and not employing any support staff.
- 6.2 Many of the requirements of the accreditation process do not apply to this type of provider. The Accreditation Questionnaire for Sole Traders is attached at Appendix 2.

7.0 Passporting

- 7.1 In order to ensure that providers do not need to undergo multiple accreditations, certain other accreditation arrangements are considered suitable to “passport” providers through some or all of the accreditation requirements.
- 7.2 These arrangements fall into two categories:
- accreditation by other local authorities; and
 - accreditation by other frameworks.
- 7.3 Passporting may not be applicable to Sole Traders as it is unlikely they will be operating in two different local authorities. Likewise, most sole traders are unlikely to achieve accreditation through other quality frameworks, which apply mostly to larger organisations.

8.0 Accreditation by Other Local Authorities

- 8.1 It is in the interests of both providers and Administering Authorities to minimise the workload associated with accreditation subsequently ODPM Guidance urges authorities to consider the benefits of accepting the accreditation of a provider by

another authority. This would mean that accreditation by one local authority would permit a provider to deliver similar services to any other authority.

8.2 There is the intention to work with other Administering Authorities to develop shared and consistent accreditation criteria. However, as this has not been possible, the following applies to the Kirklees accreditation process:

- Kirklees will accept accreditation by other authorities where the Commissioning Body is satisfied that the authority's accreditation process is sufficiently rigorous.
- Providers may be required to supply duplicate copies of all evidence supplied to the accrediting authority.
- If the Commissioning Body is not satisfied with all of the key requirements (outlined in 2.1) then the provider will be passported through those areas which are deemed satisfactory and must undergo Kirklees's own accreditation process to gain accreditation in any outstanding areas.
- The Commissioning Body will make the final decision on the accreditation of providers.

9.0 Passporting by Other Accreditation Frameworks

9.1 A number of existing accreditation frameworks are used by various groups of support providers which overlap with Supporting People accreditation requirements. To avoid double scrutiny, authorities may accept accreditation with these other frameworks as evidence of meeting some or all of the five Supporting People accreditation criteria.

9.2 Existing frameworks are assessed in one of two ways:

- External Validation - externally accredited by trade associations and other organisations which are independent of the service provider
- Self-assessments – not externally validated

9.3 Authorities have to make a policy decision as to whether or not they will accept either of the above types of framework as providing sufficient evidence of a provider's suitability.

9.4 Due to the subjective nature of self-assessments it is difficult to measure their reliability and hence the potential risks involved in accepting such assessments as a true reflection of an organisations suitability. Therefore Kirklees **will not accept** self-assessment frameworks to passport providers through any key requirement of the accreditation process.

9.5 Whilst no assessment can be watertight, externally validated accreditation frameworks provide a higher degree of reliability as the assessment is more likely to be objective and standardised, hence they are considered to be a more rigorous method of assessment. Kirklees will accept externally validated frameworks to passport providers through some or all of the criteria required under the accreditation process.

- 9.6 The table below details the externally validated accreditation frameworks, which Kirklees will accept, and the key requirements of the accreditation process for which each framework will provide a passport.

Framework	Key Requirements of Accreditation				
	Financial Viability*	Competence to handle SP grant	Employment policies	Robust management/	Competence track record
Housing Corporation	✓	✓		✓	
Commission for Social Care Inspectorate	✓		✓		✓
Community Legal Services		✓	✓	✓	✓
Centre for Sheltered Housing Studies – Code of Practice			✓		✓
Investors in People			✓	✓	

* As LA and other Organisation accreditations are not a guarantee of financial viability, Providers will be asked to provide their most recent full audited accounts, and a business plan which includes cash flow forecasts and a detailed budget with financial projections of income and expenditure for at least one year ahead and preferably for three years.

10.0 Accrediting Organisations without a Passport

- 10.1 In cases where a provider (or would-be provider) does not hold either:
 (i) a valid passport covering all five requirements; or
 (ii) a valid Certificate of Accreditation from another local authority

Kirklees will accredit the provider in order to issue a new contract for Supporting People services.

- 10.2 In such cases providers will be assessed against the five key criteria following ODPM guidance.
- 10.3 Each key criterion is made up of specific evidence based standards. Generally providers need to supply evidence to prove that they meet all of the standards for each of the five criteria in order to gain accreditation. Details of the criteria can be found in 'Accreditation of Providers of Supporting People Services' – ODPM May 2004.

11.0 Process for Accrediting Existing Providers

- 11.1 For simplicity the required evidence will be collected by means of a questionnaire which providers will complete and return with appropriate supporting evidence. A copy is attached at Appendix 1 and at Appendix 2 for Sole Traders.
- 11.2 The Supporting People Team will collate the information and compile a report and recommendation for the Commissioning Body. The Commissioning Body will make the final decision on whether a provider is accredited or not.
- 11.4 Existing providers must meet all the essential criteria but there are likely to be some existing providers which, at the time of their first service review, cannot meet all the criteria. In such cases, the Supporting People Team will agree with the provider a realistic time by which the criteria are to be met. The timescales will be kept as short as possible (not exceeding more than one year) and will be reviewed periodically. The interim contract will be extended on a temporary basis until the deadline.
- 11.5 In cases where the criteria are still not met the Commissioning Body will decide whether to grant a further extension or to terminate the contract.
- 11.6 In all cases, the Supporting People Team will ensure that the reasons for accreditation or non-accreditation of providers are clearly recorded and documented and that copies of relevant evidence are retained.
- 11.7 Clear reasons for accreditation or non-accreditation (to the extent that this is possible without breaking any confidences of service users or stakeholders) will be supplied to all providers within four weeks of the decision made by the Commissioning Body.

12.0 Process for Accrediting New Providers

- 12.1 New providers are those seeking to provide a support service within the authority for the first time.
- 12.2 As with existing providers evidence will be collected by means of a questionnaire (attached at Appendix 1/2) which new providers will complete and return with appropriate supporting evidence.
- 12.3 New providers must meet all of the essential criteria in order to be accredited and provide Supporting People funded services.
- 12.4 In order to satisfy the Commissioning Body that there are no reasons why the potential provider may be unsuitable to work with vulnerable people the Supporting People Team will consider:
- the requirements of the service
 - the skills, experience and attributes of the provider
 - the extent to which the provider's skills etc. match the requirements of the service.

- 12.5 The Supporting People Team will collate the information and compile a report and recommendation for the Commissioning Body. The Commissioning Body will make the final decision on whether a new provider is accredited or not.
- 12.6 Where any concerns are identified, depending on the gravity of these, the Commissioning Body will either:
- decline to accredit the provider and not enter into an SP service contract; or
 - agree with the provider a future date by which the concerns will have been addressed and review the application for accreditation at that date.
- 12.10 In all cases, the Supporting People Team will ensure that the reasons for accreditation or non-accreditation of providers are clearly recorded and documented and that copies of relevant evidence are retained.
- 12.11 Clear reasons for accreditation or non-accreditation (to the extent that this is possible without breaking any confidences of service users or stakeholders) will be supplied to all providers within four weeks of the decision made by the Commissioning Body.

13.0 Successful Accreditation

- 13.1 When a decision has been made by the Commissioning Body to accredit a provider, notification will be sent by the Supporting People Team to the provider. A certificate will be issued to the Provider and the details will be recorded on the Supporting People approved list. This list will be maintained and updated regularly, and will be utilised when commissioning new services (refer to the Supporting People Commissioning Policy).