

**MONITORING AND REVIEW OF SUPPORTING
PEOPLE SERVICES**

**QUALITY ASSESSMENT FRAMEWORK–
CORE SERVICE OBJECTIVES**

Office of the Deputy Prime Minister

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ADMINISTERING AUTHORITIES AND PROVIDERS ARE STRONGLY URGED TO READ THE GUIDANCE [‘USING THE QAF’](#) WHEN ASSESSING SERVICES AGAINST THESE STANDARDS

Quality Assessment Framework – core service objectives

C1.1 – needs and risk assessment

Assessments of needs and risks are carried out for all service users. Processes place users’ views at the centre, are managed by skilled staff and involve carers and/or other professionals.

Performance Level D												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	There is no formalised approach to needs and risk assessment and the need to develop one is accepted.											

Quality Assessment Framework – core service objectives

Performance Level C												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	<p>The needs of service users and any inherent risks are assessed on a consistent and comprehensive basis prior to a service being offered, or very shortly afterwards as appropriate to the needs of the client group.</p>			<p>The needs and risk assessment process is written down and staff can describe the procedures that are followed.</p> <p>There is an assessment tool appropriate to the service user group. Suggestions for coverage:</p> <ul style="list-style-type: none"> • Advocacy and communication • Budgeting and managing finances • Claiming welfare benefits • Safety and security of the home • Move-on aspirations • Setting up home and maintaining home • Maintaining tenancy • Personal safety and risk • Mobility, aids and adaptations • Medication • Risks to staff and community • Physical health and hygiene • Emotional well being and mental health • Substance misuse • Family & social contacts • Social and leisure interests • Training and employment • Cultural and faith needs • Recent use of other support services • Housing need and recent history • Child care • Parenting skills • Practical home care • Any other concerns raised by the prospective service user. <p>The needs and risk assessment procedures are covered in staff induction and/or training programmes.</p> <p>Copies of all assessments are kept on file and are available for inspection.</p>								

Quality Assessment Framework – core service objectives

Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.		HIAs	✓			
ii	The needs of service users and risks are reviewed periodically on a consistent and systematic basis.			<p>Case notes show that all service users' needs have been reviewed with appropriate frequency and at least annually.</p> <p>Case notes show that risk assessments have been reviewed with appropriate frequency, after each particular incident, each critical incident and at least annually.</p> <p>The procedures for timing and carrying out reviews are documented in individual case records.</p> <p>The procedures are covered in staff induction and/or training programmes.</p>								
iii	Needs and risk assessment and reviews involve service users and take full account of their views, targets and aspirations.			<p>The written procedures describe how service users' views are to be incorporated.</p> <p>Where prospective service users disagree with any outcomes of assessment or reviews their views and reasoning are recorded.</p> <p>Service users are provided with a copy of assessments and reviews.</p> <p>Service users confirm that their views have been listened to and taken into account.</p>								
iv	Assessment and review procedures are reviewed periodically and in response to changing legislative or funding requirements.			<p>There is documentary evidence that the procedures have been reviewed and/or updated within the last five years (or more recently if required by external factors).</p>								
v	Staff carrying out needs and risk assessments and reviews are competent to do so.			<p>Training records and/or personnel files show that relevant staff have been trained in needs and risk assessment and review.</p> <p>Staff are able to describe the assessment and review processes and the rationale behind the key elements.</p> <p>Personnel files show that staff undertaking assessments and reviews are experienced in working with those needs most commonly encountered amongst prospective service users.</p> <p>Records show that, when necessary, assessments and reviews are carried out by more than one member of staff in order to broaden the skills / knowledge base.</p>								

Quality Assessment Framework – core service objectives

Performance Level B												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	When prospective service users give permission, outcomes of assessments are explained to referral agencies.			Referral agencies confirm that they receive these explanations.								
ii	Outcomes of assessments and reviews are explained to service users.			<p>The written procedures state that decisions must be explained to all current service users and successful and unsuccessful applicants.</p> <p>Successful applicants / existing service users are provided with a written explanation of the outcome and copies are placed on their case files.</p> <p>Unsuccessful applicants are provided with a written explanation and copies are retained on file by the provider.</p>								
iii	Unsuccessful applicants are referred to more appropriate services.			Assessment records show that unsuccessful applicants have been advised as to potential alternative providers.								
iv	There is a right of appeal against decisions arising from assessments and reviews with which service users disagree.			<p>Procedures describe the appeals process.</p> <p>Appeals are attended by staff additional to those who carried out the review.</p>								
v	Service users have the right to be accompanied at appeals.			Service users are given written details of the appeals process which explain who will be involved, when and where the appeal will take place and that the applicant may be accompanied by a friend or relative or other professional or advocate.								

Quality Assessment Framework – core service objectives

Performance Level B												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
vi	The service takes a proactive approach to involving other agencies in its work that includes trying to establish stronger links or more regular interaction with key agencies.			Copies of correspondence or minutes of meetings demonstrate inter-agency liaison. Other agencies are able to confirm the joint working initiatives. There are named contacts in all of the key agencies and examples of regular information sharing. Staff are readily able to refer to relevant individuals and describe the nature of contacts with them.								
vii	Feedback is periodically sought from key agencies as part of service planning and review.			Feedback from other agencies is recorded. There are minutes, reports or other documents that refer to this feedback being incorporated into service planning and review.								

Performance Level A												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	Professional expertise is available when necessary.			There is documentary evidence (correspondence, protocols etc.) that external experts are available to participate in assessments when necessary.								
ii	Formal mechanisms are in place between the service and external agencies to facilitate and enable joint working.			Initiatives such as shared protocols, joint assessment procedures, joint training can be described by staff and evidenced by appropriate documentation.								
iii	Service users are involved in periodic reviews of the needs and risk assessment and review procedures.			Notes of the reviews record service users' involvement.								

Quality Assessment Framework – core service objectives

Performance Level A												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
iv	Outcomes of reviews (of individual needs and risk assessments) are used to inform service development and strategic planning.			Reviews of support needs consider how successful the service has been in assisting service users in realising their plans, targets or aspirations and this information is used to improve services. Business plans and/or other strategic documents cite evidence from outcomes of reviews in the planning or remodelling of future services so as to ensure that services continually reflect changing needs and aspirations.								

Quality Assessment Framework – core service objectives

C1.2 – support planning												
Service users have up-to-date support plans in place. Processes place users’ views at the centre, are managed by skilled staff and involve carers and/or other professionals.												
Performance Level D												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	There is no formalised approach to support planning and the need to develop one is accepted.											

Performance Level C												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	All service users have individual support plans that address the needs and risks identified by the needs and risk assessment process and the outcomes that they want to secure from the service.			The plans exist and copies are placed on service users’ case files. Clear links can be seen between assessments of service users’ needs and their support plans.								

Quality Assessment Framework – core service objectives

Performance Level B												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	Support plans are outcome-focused.			Support plans incorporate <i>specific</i> intended outcomes which have been agreed with service users and, if appropriate, carers, relatives or other advocates.								
ii	The service takes a proactive approach to involving other agencies in its work that includes trying to establish stronger links or more regular interaction with key agencies.			Copies of correspondence or minutes of meetings demonstrate inter-agency liaison. Other agencies are able to confirm the joint working initiatives. There are named contacts in all of the key agencies and examples of regular information sharing. Staff are readily able to refer to relevant individuals and describe the nature of contacts with them.								
iii	Feedback is periodically sought from key agencies as part of service planning and review.			Feedback from other agencies is recorded. There are minutes, reports or other documents that refer to this feedback being incorporated into service planning and review.								

Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.		HIAs	✓			
iv	Individual support plans are revised to reflect outcomes of reviews.			Review records demonstrate clear links between changing need, revised user outcomes and support plans.								

Quality Assessment Framework – core service objectives

Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.		HIAs	✓			
v	The timing of reviews is responsive to service users.			<p>Procedures state that reviews can be initiated at any time by a service user.</p> <p>This right is explained within the service description, service users' handbook etc.</p> <p>Service users confirm that they are aware that they can initiate reviews.</p>								
vi	Support planning takes account of the wider needs of the service user (beyond those being met directly in the service) which impact upon their need for support, and the extent to which these are currently being met by external agencies.			<p>Case notes or support plans demonstrate such planning takes place.</p> <p>Staff are able to describe the arrangements by which wider support needs are met and by which there is co-ordination between the various agencies concerned.</p>								

Performance Level A												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	Professional expertise is available when necessary.			<p>There is documentary evidence (correspondence, protocols etc.) that external experts are available to participate in support planning when necessary.</p>								
ii	Formal mechanisms are in place between the service and external agencies to facilitate and enable joint working.			<p>Initiatives such as shared protocols, joint support planning arrangements, joint training can be described by staff and evidenced by appropriate documentation.</p>								

Quality Assessment Framework – core service objectives

Performance Level A												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
iii	There are periodic meetings with key agencies to plan or review support service delivery.			Both the provider and the other agencies are able to provide records of such support planning meetings and reviews.								
iv	Service users are involved in periodic reviews of the needs and review procedures.			Notes of the reviews record service users' involvement.								
v	Outcomes of reviews (of individual support needs) are used to inform service development and strategic planning.			Reviews of support needs consider how successful the service has been in assisting service users in realising their plans, targets or aspirations and this information is used to improve services. Business plans and/or other strategic documents cite evidence from outcomes of reviews in the planning or remodelling of future services so as to ensure that services continually reflect changing needs and aspirations.								

Quality Assessment Framework – core service objectives

C 1.3 – security, health and safety
The security, health and safety of all individual service users and staff are protected.
<i>Explanatory note: Individual service user risk is addressed by Objectives C1.1 and S1.3. This standard addresses security and health and safety risks that potentially affect all service users.</i>
<i>The failure to achieve level C represents a serious potential risk to service users and/or staff. Where level C is not achieved providers must take immediate steps to bring performance up to this level.</i>

Performance Level D												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	There is no up-to-date health and safety policy but the need for immediate action to achieve performance level C is accepted.											

Quality Assessment Framework – core service objectives

Performance Level C												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	There is an up-to-date health and safety policy.			<p>The policy is less than five years old and is in accordance with relevant legislation. It includes, where applicable:</p> <ul style="list-style-type: none"> • Consumer Protection Act 1987, • Management of Houses in Multiple Occupation Regulations 1990 and local HMO regulations, • Gas Safety (Installation and Use) Regulations 1998, • Furniture and Furnishings (Fire) (Safety) Regulations 1988 (as amended in 1993), • Electrical Equipment (Safety) Regulations 1994, • Plugs and Sockets etc. (Safety) Regulations 1994, • Health and Safety at Work Act 1974, • Construction Design & Management Regulations • Disability Discrimination Act 1995 <p>Free leaflets are available from the Health and Safety Executive: An introduction to health and safety; Stating your business: guidance on preparing a health and safety document for small firms.</p> <p><i>(Note: where they are not the same body, some of the above requirements may be the responsibility of the landlord rather than the support provider.)</i></p>								
ii	Staff understand and implement the policy.			<p>Staff induction programmes cover the health and safety policy.</p> <p>Staff are able to describe the principal features of the policy and the impact on their work.</p>								
iii	Special attention is paid to the risks of lone workers.			<p>Where staff work alone, risk assessments specifically address the risks faced by lone workers.</p> <p>There is a lone worker policy that sets out procedures to minimise the risks to people working alone.</p>								

Quality Assessment Framework – core service objectives

Standards				Evidence				Evidence?		Comments
								Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support		Very short term accom.	✓	HIAs		
iv	Health and safety inspections of shared housing and common areas of other services are conducted at appropriate intervals.			There are records of the inspections, participants, key findings and action taken. Inspection intervals are proportionate to the perceived risks and the vulnerabilities of the service users.						
v	Risk assessments of premises and service delivery mechanisms are conducted periodically, at least annually to identify health and safety and security risks to staff and service users.			There are records of the inspections, participants, key findings and action taken. Where staff work alone, the assessment specifically addresses the risks faced by lone workers.						
vi	Action is taken in response to individual concerns raised by staff or service users.			Records of concerns raised, action taken and feedback provided.						
vii	Where applicable (i.e. in services where staff are not on-site at all times) service users understand the emergency call-out procedures.			These procedures are documented and where appropriate are posted in prominent location(s) on the premises while taking account of the need to create a homely and non-institutional environment. Service users can correctly describe the arrangements.						
viii	Service users are aware of the health, safety and security policies and understand how to report concerns.			Service user handbooks, welcome packs or other information explain the procedures. Concerns are documented and illustrate that service users understand and participate in health, safety and security risk identification.						

Quality Assessment Framework – core service objectives

Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing		Sheltered housing		Floating support	✓	Very short term accom.		HIAs	✓			
ix	The risks to staff associated with working in other people’s homes are assessed periodically, and at least annually.			There are records of the assessments, participants, key findings and action taken. Where staff work alone, the assessment specifically addresses the risks faced by lone workers.								

Performance Level B												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	A formal methodology exists for conducting risk assessments.			The methodology is documented and covers all potential risks (other than risks to <i>individual</i> service users).								
ii	Service users are involved in risk assessments.			The risk assessment methodology sets out how service users are to be involved. Assessment records record the participation of service users.								
iii	In services which are not staffed 24 hours a day there are arrangements in place to provide out-of-hours support to service users in crisis or emergency.			There is a telephone number that services users can call and talk to an appropriate support agency. This need not necessarily be the support provider and may be another provider with whom there is an agreement to provide out-of-hours telephone support. The number is well publicised to service users in handbooks, leaflets, posters etc.								

Quality Assessment Framework – core service objectives

Performance Level A												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	Service users are involved in review of health and safety and security policies and procedures.			<p>Minutes or other records of the review processes demonstrate participation or, at least, that all reasonable efforts have been made to secure participation</p> <p><i>In very short-term accommodation it may be more desirable or practical to involve an alternative person or organisation in lieu of service users (e.g. a principal referral agency). The intention is to bring a perspective that is external to that of staff involved in day-to-day service delivery.</i></p>								

Quality Assessment Framework – core service objectives

C 1.4 – protection from abuse
The right of service users to be protected from abuse is safeguarded.
<i>The failure to achieve level C represents a serious potential risk to service users and/or staff. Where level C is not achieved providers must take immediate steps to bring performance up to this level.</i>
<i>This objective applies to all kinds of abuse, many of which are not physical in their nature, e.g. financial or material abuse or abuse through neglect or omission. Approaches to protection from abuse therefore must be appropriate to the particular type of service concerned and based on an assessment of the full range of risks faced.</i>

Performance Level D												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	There are no up-to-date policies and procedures to ensure protection from abuse and the need for immediate action to achieve performance level C is accepted.											

Quality Assessment Framework – core service objectives

Performance Level C												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	There are robust up-to-date procedures (including a whistle-blowing policy and recruitment checks) for avoiding and responding to actual or suspected abuse or neglect.			<p>The procedures are documented and address physical, sexual, psychological, financial or material and discriminatory abuse and acts of neglect or omission.</p> <p>The procedures are in accordance with the Public Interest Disclosure Act 1998 and, where appropriate, with the Department of Health guidance “No Secrets”.</p> <p>The procedures have been reviewed within the last five years.</p>								
ii	Prompt action is taken in response to individual complaints or concerns from staff or service users.			A log records details of investigations and outcomes and shows that appropriate action is taken.								
iii	The policies and procedures are fully understood by staff.			<p>Staff induction and training programmes specifically address protection from abuse.</p> <p>Staff are able to describe the principal elements, the reasons behind them and their implications for their work.</p> <p>Staff know to whom they should report any actual or suspected abuse or neglect.</p>								
iv	There are procedures to prevent staff from personal benefit when working with vulnerable people.			There is a documented risk assessment addressing potential for personal benefit through abuse e.g. in the provision of financial advice, power of attorney, handling service users’ money, managing improvement works etc. and procedures in place to minimise identified risks.								
v	Staff are made aware of and understand their professional boundaries.			<p>There is documentary evidence that induction, training, supervision etc. specifically addresses the nature and limits of relationships between staff and service users.</p> <p>Staff are able to describe the policies concerning relationships with service users.</p>								
vi	Service users are aware of the procedures for reporting abuse or neglect.			<p>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.</p> <p>Service users understand what constitutes abuse and know to whom they should report any actual or suspected abuse or neglect.</p>								

Quality Assessment Framework – core service objectives

Performance Level B												
Standards				Evidence					Evidence?		Comments	
									Yes	No		
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	Staff receive appropriate training.			Training is provided to all relevant staff. HR records show that the training has been attended. Staff can explain the content of the training and the impact on their work. Staff can explain how to recognise symptoms of abuse or neglect. Staff can explain how to deal appropriately with aggression from service users.								
ii	There is a periodic (at least annual) review of the effectiveness of abuse policies.			The review is documented and examines how each reported case was dealt with and also aims to identify and address any disincentives to reporting of actual or suspected abuse or neglect.								

Performance Level A												
Standards				Evidence					Evidence?		Comments	
									Yes	No		
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	Service users are actively involved in reviewing the policies and procedures.			Minutes or other records of the review processes demonstrate participation. <i>In very short-term accommodation it may be more desirable or practical to involve an alternative person or organisation in lieu of service users (e.g. a principal referral agency). The intention is to bring a perspective that is external to that of staff involved in or responsible for service delivery.</i>								
ii	There is a co-ordinated multi-agency approach to tackling abuse or neglect.			Notes of multi-agency working e.g. minutes and agendas, named contacts, joint action plans etc.								

Quality Assessment Framework – core service objectives

Performance Level A												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
iii	There is a planned approach to victim support			There is a documented means of responding to victim support including, for example; agreements with other providers to offer alternative services to victims, providing or putting victims in touch with forms of support such as counselling, legal advice etc.								
iv	There is a planned approach to dealing with perpetrators			There are clear procedures in place for identifying perpetrators, informing the police and/or taking legal action if appropriate, terminating employment, working with perpetrators to avoid recurrence etc.								

Quality Assessment Framework – core service objectives

C 1.5 – fair access, diversity and inclusion
There is a commitment to the values of diversity and inclusion and to practice of equal opportunity (including accessibility in its widest sense) and the needs of black and minority ethnic service users are appropriately met.

Performance Level D												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	There is no written statement of equal opportunity policy (EOP) or documented approach to diversity and inclusion and the need for further work is accepted.											

Performance Level C												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	The eligibility criteria and application process are publicised and freely available.			The eligibility criteria, means of prioritising applications and the application process are written down and described in plain language. Copies are provided to all enquirers.								
ii	The assessment and allocations processes are up-to-date and ensure fair access to the service.			There is a documented procedure that specifies how enquiries and applications are processed, assessed and prioritised. The procedures have been reviewed within the last five years. The assessment procedure ensures that service user's needs are compared objectively with the eligibility criteria of the service.								

Quality Assessment Framework – core service objectives

Performance Level C												
Standards				Evidence						Evidence?		Comments
Supported housing		Sheltered housing		Floating support		Very short term accom.		HIAs		Yes	No	
	✓		✓		✓		✓		✓			
iii	There are written policies covering equal opportunity (EOP), anti-discriminatory practice (ADP) and harassment.			<p>The policies exist and cover discrimination on grounds of:</p> <ul style="list-style-type: none"> • gender, • age, • religion, • race, • disability, • nationality and sexuality. <p>The policies cover staff and service users and address access to services and employment.</p> <p>The equal opportunities policy is in accordance with the:</p> <ul style="list-style-type: none"> • Race Relations Act 1976, • Disability Discrimination Act 1995, • Human Rights Act 1998, • Sex Discrimination Act 1975 <p>and subsequent amendments to these.</p> <p>The policies are in accordance with the Commission for Race Equality Code Of Practice.</p> <p>The policies have been reviewed within the last five years.</p>								
iv	There is a recruitment and selection policy that aims to eliminate discrimination in recruitment processes.											
v	Staff are familiar with the above policies.			Policies are covered in induction programmes. Staff are able to describe key features of the policies.								

Quality Assessment Framework – core service objectives

Performance Level C												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
vi	Information is made available to service users about the availability of cultural and religious organisations and centres.			There are prominently available posters, leaflets etc., and/or support plans, key-working notes etc. record that information has been imparted.								

Performance Level B												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	There is a documented plan for ensuring equality of opportunity and anti-discriminatory practice.			The plan exists and covers both staff and service users.								
ii	Particular attention is paid to ensuring fair access to minority and “hard to reach” groups.			<p>The eligibility criteria, means of prioritising applications and the application process are distributed to organisations working with individuals from minority and discriminated against groups.</p> <p>Target organisations are able to confirm receipt.</p> <p>Active links are made with organisations working with minority and discriminated against groups with the aim of ensuring that referral pathways, eligibility and service design are non-discriminatory and promote fair access.</p> <p>There is evidence of the active links e.g. minutes of recent meetings, named contacts in other organisation, correspondence, confirmation from other parties etc.</p>								

Quality Assessment Framework – core service objectives

Performance Level B												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
iii	The effectiveness of the equal opportunities and anti-discriminatory policies and plans are periodically reviewed. Equality access targets are set and performance monitored against these.			The targets are documented and approved in appropriate minutes. Relevant staff demonstrate a working knowledge of the targets. Periodic reviews (at least annual) of statistics and other performance information compared to targets contained with the plan.								
iv	The ADP, EOP and harassment policies are implemented and effective.			The workforce reflects the diversity and cultural profile of service users. Staff are able to explain the policies and how they impact on their work. Staff are able to refer to specific actions or changes arising from the policies (e.g. changes in recruitment practices, challenges to unacceptable language or behaviour etc.).								
v	Service users are provided with information on organisations or services for discriminated-against groups.			The information is evident on notice boards, in newsletters, service user handbooks, introductory information or other suitable media.								
vi	The communication needs of service users are catered for.			Where necessary, service users are able to communicate in forms other than English There is evidence that reasonable efforts have been made to provide written communications (including information about the service and how to apply) in the preferred forms (e.g. other languages, signing, Braille etc.) of as many service users or potential service users as feasibly possible.								
vii	Staff understand and are sensitive to particular needs of service users from minority groups.			Records show that staff are specifically recruited or trained to ensure this understanding.								

Quality Assessment Framework – core service objectives

Performance Level B												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
viii	Service users are made aware of the above policies.			Policies are explained in service users' introductory information. Service users confirm awareness of the policies.								
ix	The eligibility criteria and application process are actively distributed to relevant agencies.			The eligibility criteria, means of prioritising applications and the application process are periodically (at least annually) distributed to referral agencies, commissioners, advice services, other providers and any other agencies in regular contact with members of the target service user group(s). Target organisations can confirm that this happens.								

Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support		Very short term accom.	✓	HIAs				
x	Service users are able to observe their religious and cultural customs.			Services where meals are provided cater for varying dietary requirements. Service users have access to places of worship. This may be appropriate space on the premises or at local churches, mosques etc. Where travelling is necessary, the service offers assistance to those service users who need it.								

Quality Assessment Framework – core service objectives

Performance Level A												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	There is a co-ordinated multi-agency approach to tackling discrimination and harassment			Notes of multi-agency working e.g. minutes and agendas, named contacts, joint action plans etc.								
ii	There is a planned approach to victim support			There is a documented means of responding to victim support including, for example; agreements with other providers to offer alternative services to victims, providing or putting victims in touch with forms of support such as counselling, legal advice etc.								
iii	There is a planned approach to dealing with perpetrators			There are clear procedures in place for identifying perpetrators, informing the police and/or taking legal action if appropriate, terminating employment, working with perpetrators to avoid recurrence etc.								
iv	Key stakeholders are actively involved in reviewing eligibility criteria, application procedures and prioritisation.			Correspondence, minutes, stakeholders themselves etc. confirm participation of referral agencies, funders / commissioners, organisations working with discriminated against groups etc.								
v	Fair access is assured by independent audit.			There are records of periodic independent audits of the assessment and allocation process. (<i>“Independent” does not necessarily mean by somebody outside the provider organisation but refers to a person or people not involved in or responsible for service delivery.</i>)								

Performance Level A												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.		HIAs	✓			
vi	Service users are involved in the periodic review of the ADP, EOP and harassment policies.			Notes of involvement or consultation through meetings, focus groups, newsletters etc.								

Quality Assessment Framework – core service objectives

Standards		Evidence								Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.		HIAs	✓			
vii	Service users are actively involved in reviewing allocations procedures.	Staff, minutes, procedures, other notes and service users (if still using services) confirm.										

Quality Assessment Framework – core service objectives

C 1.6 – complaints												
Users, carers and other stakeholders are made aware of complaints procedures and how to use them.												
Performance Level D												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	There is no written complaints procedure and the need to develop one is accepted.											

Performance Level C												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
i	There is a written complaints procedure that 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.								
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.								

Quality Assessment Framework – core service objectives

Performance Level C												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
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						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
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.								
ii	Service users understand the procedure.			Service users are able to describe the procedure.								
iii	Outcomes of complaints are fed back to complainants			Case files or other records contain correspondence or notes of verbal feedback.								
iv	The organisation and its staff see complaints as a positive feedback tool.			Staff receive training in dealing with and encouraging complaints. Service users and carers feel able to complain and are confident that their complaint will be dealt with in a positive manner. 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.								

Quality Assessment Framework – core service objectives

Performance Level A												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.	✓	HIAs	✓			
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.								
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.								

Performance Level A												
Standards				Evidence						Evidence?		Comments
										Yes	No	
Supported housing	✓	Sheltered housing	✓	Floating support	✓	Very short term accom.		HIAs	✓			
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 that 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.								