

NIHE Supporting People, Provider Accreditation Process

INTRODUCTION

The monitoring and review framework under Supporting People is made up of various elements. One of these elements is the Quality and Monitoring Toolkit, which is intended to help both the SP team and providers improve services and achieve higher standards.

The elements of the toolkit are:

- Provider Accreditation Process
- The Quality Assessment Framework
- The Performance Framework
- Validation Visits
- Value for Money methodology
- Service User Involvement guidance
- Involving stakeholders in service review

These notes focus on the **Provider Accreditation Process**.

The Accreditation Framework is in line with and reflects ODPM Guidance issued by the ODPM in May 2004 which identified the requirement for Administering Authorities to ensure that provider organisations were sufficiently robust, effective and competent to deliver Supporting People Services.

The process is underpinned and directed by the need to ensure the provision of consistent, high quality and 'value for money' Housing Related Support Services.

The Accreditation process will be a key Risk Management tool for SP and will endeavour to ensure that organisations commissioned to provide Supporting People Services have the capability, structure and capacity to continue to deliver quality services for the duration of a funding agreement.

The principles of the Accreditation Framework will be applied across all provider organisations. An 'Accreditation Lite' framework has been designed for Small providers, Sole traders and specialist organisations, and may better reflect the constitution and operations of service providers falling into these categories (See below).

Exemptions

All organisations providing or wishing to provide Supporting People Services will be required to be Accredited with the exception of the following statutory bodies:

- Health and Social Services Boards / Trusts
- Housing Associations
- Northern Ireland Housing Executive

Existing regulatory frameworks and inspection regimes ensure that these 'statutory bodies' remain appropriately managed, accountable and are able to consistently deliver services

Accreditation Lite

As the Supporting People Programme engages with a diversity of organisations, it is recognised that certain aspects of the Accreditation Criteria may not be appropriate to small or specialist providers. This will be reflected in the application of an Accreditation Lite Process whereby SP will adopt a pragmatic approach to the evidencing of standards with the same being appropriate to the size and complexity of the organisation.

Provider organisations falling into the categories whereby Accreditation Lite may be applied (see explanation of terms attached) can opt for this assessment instead of the full accreditation assessment.

Where an organisation is awarded 'Accreditation' status under the 'Lite' assessment framework the conditions and duration attached to the same differ from those attached to the Full Accreditation status (see Frequency of Accreditation).

Accreditation Criteria

FINANCIAL VIABILITY

In assessing financial viability, the SP team are looking for indicators of sound financial management and evidence that the organisation is likely to remain viable for the foreseeable future. SP will also seek to ensure that providers are aware of potential risks and take suitable measures to minimise, plan for, and mitigate the effects of those risks, should they materialise.

The key requirements that organisations will have to address are:

- **Business plans:** backed up by a process which seeks to ensure that potential problems are foreseen, planned for and hopefully minimised or avoided, and which looks at all aspects of the business.
- **Budgets and management accounts:** annual budgets should be in place and a process for monitoring actual results regularly throughout the year ie management accounting.
- **Cashflow projections:** supported by realistic assumptions of income and expenditure patterns. Where the cashflow identifies borrowing requirements, this

should be supported by evidence that borrowing facilities will be available when required.

- **Risk Management Strategy:** supported by evidence that the strategy is being applied. (guidance: *the Office of Government Commerce link below provides details on the purpose of a risk management strategy and how to carry out a risk management health check.*

http://www.ogc.gov.uk/documentation_and_templates_risk_management_strategy_.asp

The Charity Commission link below provides access to a pdf document highlighting the background to charities reporting of risk management in the trustees Annual Report. It also provides examples of risk areas, their potential impact and mitigation.

<http://www.charity-commission.gov.uk/library/investigations/pdfs/charriskapp.pdf>)

COMPETENT ADMINISTRATIVE PROCEDURES

In assessing this criterion, the SP team will seek to ensure that:

- The organisation is operating within its legal powers and that provision of SP services is within the aims and objectives specified by the governing instrument e.g. trust deed, memorandum and articles of association etc.
- There are suitable arrangements for financial administration in place eg accounting systems / financial record keeping, procedures appropriate for the size and complexity of the organisation, formally approved delegated authorities.
- The annual accounts indicate the SP grant has been applied for the purposes that it was intended (relevant for organisations accredited after being in receipt of SP grant for one year).

EFFECTIVE EMPLOYMENT PRACTICES

The key requirements that organisations will have to address in order to satisfy this criterion are:

- To operate an equal opportunities policy addressing all aspects of discrimination in terms of staff and service users.
- To operate a health and safety policy
- To provide an induction programme for staff and volunteers
- To produce a comprehensive set of policies and procedures covering all aspects of service delivery.
- To provide regular support and supervision to staff and volunteers
- To ensure that staff performance is monitored and managed and training and development needs considered.

TESTING ROBUST MANAGEMENT PROCEDURES

The key requirements that organisations will have to address in order to satisfy this criterion are:

- To ensure that the organisation is properly constituted and has an appropriate governing instrument
- To ensure that the organisation is governed by an experienced and competent

governing body

- To ensure that internal accountability is clear and that the respective roles and responsibilities of staff and the governing body are clearly defined.
- A fraud response plan to ensure that the responsibilities of staff and the governing body are understood. (guidance: *The following link provides a copy of the Department for Social Developments Fraud Response Plan and sets out senior managements commitment to the highest standards of openness, probity and accountability in all Department Business.*

http://www.dsdni.gov.uk/fraud_internal_frp_june_01.doc

The Chartered Institute of Management Accountants have produced a pdf document covering all aspects of fraud in terms of its extent, patterns, causes, prevention, detection and how to respond to it. This document also provides an overview to risk management. Please click on the following link:

http://www1.cimaglobal.com/cps/rde/xbcr/SID-0AE7C4D1-8D303EF2/live/cid_techguide_fraud_risk_management_feb09.pdf.pdf)

TESTING COMPETENCE / TRACK RECORD (new providers only)

This criterion is essentially aimed at assessing new providers of SP services. The SP team seek to satisfy themselves that the provider has:

- an adequate understanding of the needs of the proposed service users and is suitably experienced to provide those services
- an adequate understanding of the aims of SP services
- experience within the organisation of working with people with similar needs to those of the proposed service users
- a history of delivering services similar to SP eligible services

The Questionnaire

Both the accreditation questionnaire and evidence portfolio must be completed and returned to the SP team within 28 days of the issue date - using this guidance and the checklist to ensure that the evidence provided by the organisation fully meets the required for validation of either the Accreditation or Accreditation 'Lite' criteria (as applicable).

Failure to complete and return the questionnaire could have implications on existing funding, formal funding agreements will not be entered into with non-accredited providers.

Where the appropriate criteria are less than fully met, an action plan must accompany the questionnaire stating how criterion is to be met in full and accreditation completed.

Award of Accreditation

When a decision has been made to accredit a provider organisation a certificate of Accreditation will be issued. The Certificate will be specific in relation to the type of Accreditation Assessment applied (Full or Lite), type of service the provider organisation has been accredited to provide and subject to specific conditions in terms of:-

- Service
- Expiry date
- Transfer of
- Advertising, Promotion and Recommendation
- Review

Frequency of Accreditation

Accreditation will normally be valid for 3 years or until the Service Review (whichever is the longer) unless the circumstances outlined below.

Organisations with a valid Certificate of Accreditation will be subject to on-going monitoring and risk assessment by the Supporting People Team.

The Supporting People Team reserves the right to undertake a review of Accreditation status at any time should :-

- a) the Risk Assessment, Service Review and Monitoring processes indicate any concerns about the organisations ability to continue to deliver services or
- b) where the organisation fails to comply with the conditions of the Supporting People Funding Agreement for either Short-term or Long Term Services (as appropriate)

If concerns are identified through any of these processes, the Supporting People Team has the option to:-

- a) undertake an immediate Service Review and Re-Accreditation of the provider organisation or
- b) withdraw accreditation status

Accreditation may be refused or withdrawn if :-

it is subsequently revealed that false or mis-represented information has been supplied for the accreditation process

Accreditation Lite

The above criterion will apply to accreditation lite, additionally a review of accreditation lite will take place where the following circumstances apply:-

- Where additional SP services are to be commissioned from the provider organisation
or
- The provider organisation's scoring on the matrix moves into the 'full' accreditation band

Failure to meet Accreditation standards

Accreditation of a support provider is not automatic and SP reserve the right to refuse accreditation where an organisation fails to evidence it meets the minimum standards required. Where the minimum standard is not achieved an action plan must be agreed as to how criterion is to be met in full and accreditation completed.

Failure to secure a Certificate of Accreditation within an agreed period may result in a recommendation to the SP Commissioning Body for any existing SP funding to be terminated in line with *Schedule 10* of the SP funding agreement.

Any organisation not achieving Accreditation status will not be included on the Supporting People list of Accredited Providers for future commissioning purposes.

New Service Providers

New providers are those seeking to provide a support service within Northern Ireland for the first time within a commissioning of services framework.

The Accreditation process for new providers will follow that applied to existing providers, (although there will be an additional requirement to assure SP that there are no reasons why the potential provider may be unsuitable to work with vulnerable people) the SP team will consider:-

- the requirement of the service
- the skills, experience and attributes of the provider
- the extent to which the providers skills etc. match the requirements of the service.

There will be an interview with the potential provider to confirm information supplied in support of the application

In the case of a 'new' service provider Accreditation must be achieved prior to any SP funding agreement being established or service being delivered.

Delivery of SP Services by a third party

In circumstances where agreement has been reached that the Supporting People Service be sub-contracted and delivered by a third party, the existing Supporting People Accreditation Framework will not apply to the 'third party' organisation that has been sub contracted to undertake this Service.

It is the responsibility of the organisation 'directly contracted' with by SP to ensure that any 'third party' or sub contractor organisation delivering services on their behalf are sufficiently robust, competent and structured to ensure service delivery in line with the content of the Supporting People Funding Agreement.

As part of any 'Sub-Contracting' process organisations may need to evidence how they ensure that appropriate 'safeguards' are in place to ensure service delivery and minimise any risk of organisation/service failure. SP may request copies of Risk Assessments where appropriate.

Appendix 1

SUPPORTING PEOPLE ACCREDITATION QUESTIONNAIRE

<u>ORGANISATION DETAILS</u>	
ORGANISATION MAKING APPLICATION	
ORGANISATION CONTACT NAME	
POSITION	
ADDRESS	
TEL	
E-MAIL	
ORGANISATIONAL STATUS	
<i>Please indicate by ticking ✓</i>	
SOLE PROPRIETOR	
VOLUNTARY	
ORGANISATION/CHARITY	
PUBLIC LIMITED COMPANY	
PARTNERSHIP	
PRIVATE LIMITED COMPANY	
OTHER	
Do you wish to be assessed under the Accreditation Lite framework? Please indicate by ticking appropriate box	<div>YES</div> <div></div> <div>NO</div> <div></div>

<p>1</p>	<p>FINANCIAL VIABILITY - Business Planning</p> <p>Does your organisation follow a business planning process? Yes / No If so, please describe (e.g. prepared by, approved by, reviewed and updated by and when).</p> <p>Is there a current business plan? Yes / No If yes, please submit as supporting documentation.</p> <p>Does the Business Plan reflect the strategic direction of the organisation?</p>
<p>2</p>	<p>FINANCIAL VIABILITY - Financial projections</p> <p>What is the current financial year of the organisation?</p> <p>Does the budget include 3 years financial projections? Do the projections provide details of the income for the coming 3 years?</p> <p>When was the budget for the current financial year approved by the Board / management committee?</p> <p>Please submit the current year budget as supporting documentation, and provide details of assumptions made when producing the budget.</p> <p>Do you have an up-to-date cashflow? Yes / No</p> <p>If so, how often is the cashflow updated?</p> <p>On what basis are cashflows prepared (eg one-year monthly rolling, three-year quarterly rolling)?</p>

	<p>Please submit latest cashflow as supporting documentation.</p> <p>Does the organisation have future borrowing requirements? Yes / No</p> <p>If so, please provide evidence that necessary borrowings have been agreed.</p>
3	<p>FINANCIAL VIABILITY - Financial performance</p> <p>How frequently are management accounts prepared for the organisation?</p> <p>How frequently do the board of management review the management accounts?</p> <p>Provide evidence of the review e.g.: extract from the Board/Management meeting minutes.</p> <p>Does the presentation of the management accounts include an analysis of variances and the identification of any necessary corrective action? Yes / No</p> <p>Please provide a copy of the most recent management accounts as supporting documentation.</p>
4	<p>FINANCIAL VIABILITY – Annual Financial Statements</p> <p>Does your organisation / business have annual financial statements audited by an independent and professionally qualified auditor?</p> <p>Yes / No</p> <p>If so please provide a set of the latest audited accounts</p>

	<p>Do you receive a management letter from the external auditors at the conclusion of each audit commenting on the financial systems and controls in place?</p> <p>Yes / No</p> <p>If so, please submit a copy of the latest auditor's management letter, including the management response.</p>
5	<p>FINANCIAL VIABILITY - Risk assessment</p> <p>Do you have a formal process for risk assessment? Yes / No</p> <p>Do you have an approved risk management strategy? Yes / No</p> <p>If yes in either case, please submit.</p> <p>Please provide a list of insurances detailing insurance covers, amounts insured, and names of insurers. **</p>
6	<p>COMPETENCE TO MANAGE AND ACCOUNT FOR SP GRANT</p> <p>Do the aims and objectives specified in the organisation's governing instruments (eg Memorandum and Articles, Trust deed, etc) allow the provision of SP services? Yes / No</p> <p>If yes, please summarise the wording of the section that allows this. (Alternatively, a copy of this section of the governing instruments can be submitted.)</p> <p>Has the Board / Management Committee formally approved delegated authorities and standing orders? Yes / No</p> <p>Do you have financial procedures in place suitable for the size and complexity of the organisation? Yes / No</p>

	<p>Do formal finance procedure manuals exist and are they regularly updated? Yes / No</p> <p>Provide details of the finance staff and their qualifications and experience.</p> <p>What system(s) do you use for recording income and expenditure of the organisation (ie computerised accounts, manual records, etc)?</p> <p>What back-up procedures are in place for computerised systems?</p>
7	<p>EFFECTIVE EMPLOYMENT PRACTICES</p> <p>Please provide a copy of your Equal Opportunities policy**.</p> <p>Please provide a copy of your Health & Safety Policy**</p> <p>Is there a formal induction process for new staff and volunteers? Yes / No</p> <p>If so, please describe. (Please submit a copy of a recent induction programme in support of your description.)</p>
8	<p>EFFECTIVE EMPLOYMENT PRACTICES – operational policies and procedures</p> <p>Are operational policies and procedures fully documented? Yes / No</p>

	<p>Please provide a list of operational policies and procedures documented, identifying date of last review / approval.</p> <p>Please describe the training mechanisms in place for staff and volunteers re operational policies and procedures (ie formal training programme, on-the-job training etc)</p>
9	<p>EFFECTIVE EMPLOYMENT PRACTICES – staff supervision, support and appraisal</p> <p>Are Human Resource / Personnel policies and procedures are fully documented? Yes / No</p> <p>Please provide a list of documented policies and procedures.</p> <p>Please describe the process of staff and volunteer supervision (ie weekly or monthly sessions held with line manager, whether sessions are documented / signed etc)</p> <p>Please describe the process for performance monitoring and management (ie appraisal frequency, mechanism for training and development assessment, mechanisms for target setting etc)</p>
10	<p>TESTING ROBUST MANAGEMENT PROCEDURES</p> <p>What is the legal status of the organisation?</p> <p>What governing instruments prescribe the aims and objectives, and the legal formalities by which the organisation is bound (eg Memorandum and Articles of Association, trust deed, etc)?</p> <p>Does the Board / management committee have documented terms of reference? Yes / No</p> <p>If so, please submit a copy.</p>

	<p>Do Board / Management Committee members have job descriptions? Yes / No</p> <p>Please provide a list of Board / Management Committee members, detailing names, number of years on the Board, experience / skills, and qualifications relevant to their position / role on the Board.</p> <p>Please submit a copy of the minutes of the Board / Management Committee meetings held during the last 12 months.</p> <p>Has the board approved a Fraud Response Action Plan? Yes / No</p> <p>If yes please submit a copy.</p>
11.0	<p>STAFFING</p> <p>Please submit a staff structure chart.</p> <p>Do all staff have up to date job descriptions? Yes / No</p> <p>Do job descriptions reflect the requirements for delivery of Supporting People services? Yes / No</p> <p>Please submit job descriptions typical to each post SP eligible post i.e. Manager, Senior Support Worker, Support worker etc to reflect the organisations staffing structure.</p>
12.0	TESTING COMPETENCE / TRACK RECORD – (new providers only)
12.1	Please outline the needs of the proposed service users
12.3	What is your interpretation of the aims of Supporting People?
12.4	What experience is there within your organisation of working with people with similar needs to those proposed users of the service?

12.5	History of providing services Please provide the details of 2 people/organisations that will provide a reference relating to the service being provided by your organisation	
	Name	Name
	Organisation	Organisation
	Position	Position
	Address	Address
	Telephone	Telephone
	E-mail	E-mail
	Relationship	Relationship

** - to be submitted only if they have not previously been submitted as part of the contract monitoring obligations

Appendix 2

Checklist of supporting document required in support of the Questionnaire – NOTE:
shaded cells indicate the minimum information required for an 'Accreditation Lite'
assessment for applicable organisations (see definitions)

<i>Ref</i>	<i>Documents</i>	Tick
Q1	Current business plan	
Q2	Current year budget and supporting assumptions	
Q2	Latest cashflow	
Q2	Evidence of any borrowings	
Q3	Minutes of Board / Management Committee evidencing review of Management Accounts	
Q3	Latest management accounts	
Q4	Latest audited accounts	
Q4	Last auditor's management letter	
Q5	Risk assessment	
Q5	Risk Management Strategy	
Q5	List of insurances **	
Q6	Governing Instrument	
Q6	Details of finance staff qualifications and experience	
Q7	Equal Opportunities Policy **	
Q7	Health and Safety Policy **	
Q7	Recent induction programme (sample copy)	
Q8	List of documented operational policies and procedures	

Q9	List of documented Human Resource /Personnel policies and procedures	
Q10	Terms of reference for Board / Management Committee	
Q10	Jobs descriptions for Board / Management Committee	
Q10	List of Board / Management Committee members + pen pictures of skills, qualifications etc	
Q10	Copies of minutes of Board / Management Committee meetings held during last year	
Q10	Copy of Fraud Response Action plan	
Q11	Staff structure chart	
Q11	Job descriptions for SP funding eligible posts	
Q12	New providers only – 2 references	

** Do not resubmit if you have already submitted these as part of contract monitoring obligations.

Questionnaire Explanation of terms

Term	Explanation
Business Plan	<p>The business plan should be appropriate to the size and complexity of the organisation and should be tailored to suit it's purpose. It would generally include:-</p> <ul style="list-style-type: none"> ▪ Organisational background ▪ Analysis of the sector in which the organisation operates ▪ Activities and services – including direction and planned performance of the organisation ▪ Financial Commentary and projections ▪ Performance Review
Delegated authorities and standing orders	<p>Delegated authorities and standing orders is the tool used by the Board / Management Committee to specify how members of staff are permitted to carry out certain actions, such as committing expenditure, authorising payments and entering legal agreements. The delegated authorities also specify any financial limits that apply. This may also be used to specify authorities for sub-committees where this is relevant.</p>
Finance policies and procedures	<p>Policies and procedures that relate to the financial management of the organisation, e.g. treasury management, bank and cash, purchasing and payments, payroll, travel and expenses, Income and receipts, etc.</p>
Human Resource / Personnel policies and procedures	<p>Policies and procedures that relate to the employment of staff and volunteers e.g. recruitment and selection, training and development, performance management, appraisal, sickness and absences, etc.</p>
Operational policies and procedures	<p>Policies and procedures that relate to the delivery of services to service users e.g. lettings and allocations, assessment procedures, lone worker policy, move-on and resettlement, complaints, appeals, etc.</p>

Accreditation Lite – explanation of terms

Applicants can opt to have the full accreditation standards applied.

The Accreditation Lite approach can only be applied to small or specialist providers such as:-

- Sole Traders
- Small providers
- Community alarm services or
- Organisations scoring 8 or less on the matrix below :-

Select one value from each section and put the value into the scoring column. Total these at the bottom.		
	Value	Score
Section 1 :- SP contract value -existing / potential service		
£1 - £50,000	1	
£50,000-£150,000	2	
£150,000 +	3	
Section 2:- Staff		
1-3	1	
4-10	2	
11+	3	
Section 3:- Units		
1-4	1	
5-14	2	
15+	3	
Section 4:- Services		
1	1	
2-4	2	
5+	3	
Total		

For the purpose of the Accreditation Lite assessment the following definitions will apply :-

Sole Trader

Is an individual support provider who is not working for a charity, housing association, limited company or other type of organisation, but are working for themselves, often on their own homes and not employing any housing related support staff

Small and specialist providers	A small provider is considered to be an organisation that employs or sub-contracts less than 2 full time equivalent members of staff
Community Alarm services	Are services which are simply a telephone based alarm service and do not include the provision of visiting support staff as part of the service

Demonstration of financial viability

- If the organisation is a limited company, the company is obliged to produce a set of annual accounts. The latest set of accounts should be submitted as demonstration of financial viability.
- If the organisation is registered as a sole trader, and annual accounts are not created. You should demonstrate financial viability as outlined below:-
 - Where the annual turn-over is in excess of £15,000 per annum (as at February 2005) you are obliged to supply the Inland revenue with details of income, expenses and net business profit for tax purposes. You should forward a copy of this break-down as proof of financial viability. On the basis of the robustness of this evidence, SP may choose to ask for a banker's reference.
 - Where you also complete a summary of the balance sheet as part of the tax return, you should submit the same to supplement the financial information already provided.
 - If the annual turnover is less than £15,000 per annum (as at February 2005), then a bank statement should be submitted. SP may request additional information about the organisation's financial stability.