CORC Accreditation & Self Review Framework

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Overview

- Context

- Benefits

- Self Review Framework

- Process

- Becoming a pilot site

- Questions

Caveat

- This is still in development

- We are looking for Pilot sites

- Please consider how this may work in your service

- We welcome all of your feedback!

Context

- Routine use of outcome and feedback measures is embedded within national guidance:

  ✓ **Delivering With Delivering Well (2014)**

  ✓ **Future In Mind (2015)**

  ✓ **Local Transformation Plans for Children and Young People's Mental Health and Wellbeing (2015)**

  ✓ **Access and Waiting Time Standard for Children and Young People with an Eating Disorder (2015)**

LABYRINTH

THE STORYBOOK BASED ON THE MOVIE

Self-Review Framework

- Designed to promote a 'whole system' approach to ROMs implementation

- Based on evidence to date of what makes for effective use of outcomes and feedback data to inform quality service provision

| 1 Where are you now in terms of collation and use of outcomes and feedback? | 2. How are you going to get from where you are now to where you want to be? | 3. What do you want to achieve in terms of collation and use of outcomes and feedback? |

Approach

Strategically led

A 'whole system' approach, Involving staff across the service and at every level,

A collaborative approach which involves children, young people and their parents and carers

Continuous improvement

Benefits

- Break down how well you meet each component necessary for successful implementation of ROMs

- Use CORC membership to help you get from A to B

Benefits

- Demonstrate good practice to a *minimum required standard*

- Recognition of the quality of your service through a national accreditation system

- Demonstrate the quality of your service to young people, parents, referrers and commissioners

What does it look like?
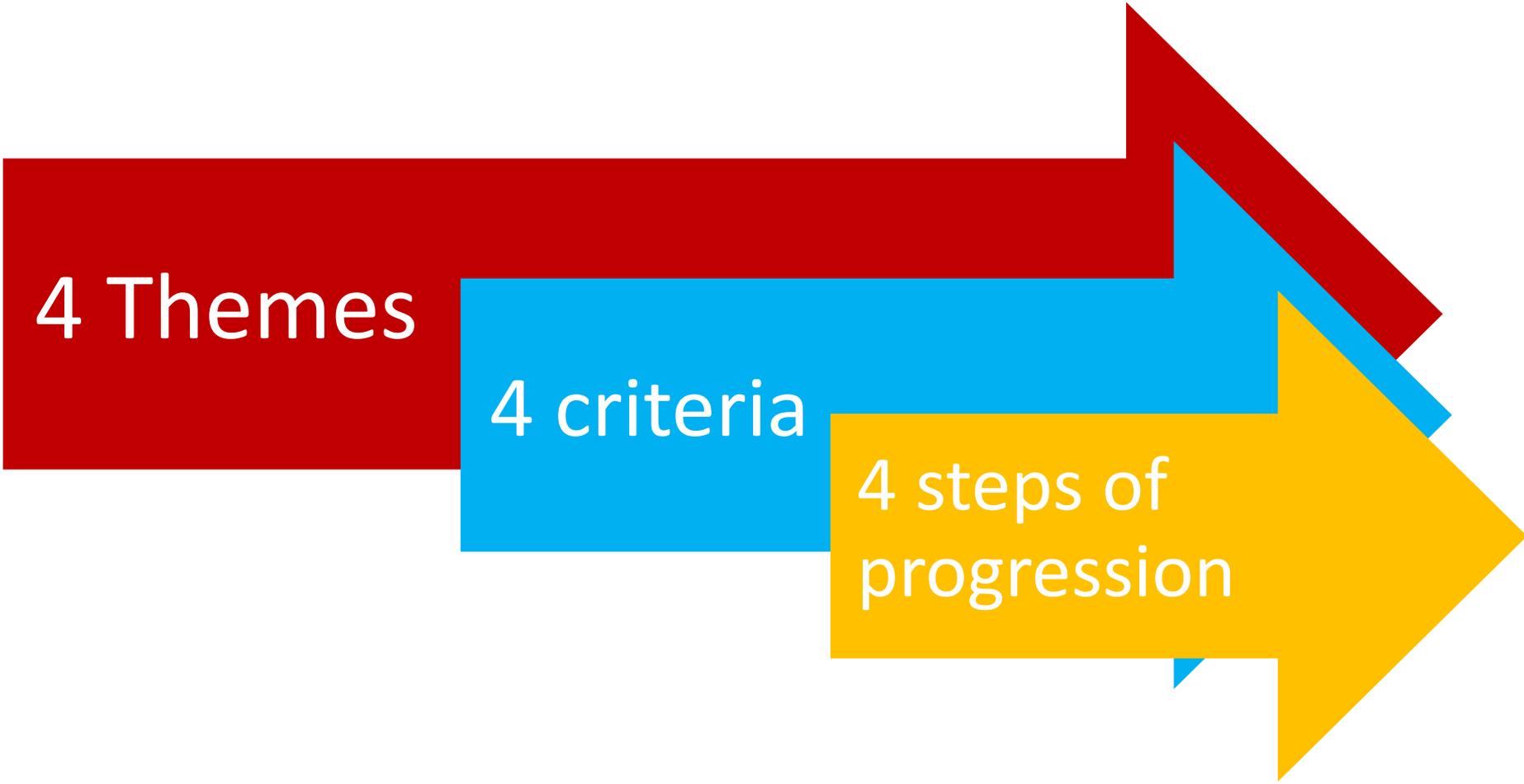
4 Themes

4 criteria

4 steps of progression

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What does it look like?

Leadership & Management	Staff Development	Technology and Information Management	Experience of Service
• Organisational vision • Organisational commitment to collection and collation • Organisational commitment to interpretation and use • Organisational culture supportive of use and learning	• Understanding of use of different data sources (including measures) • Use of particular data sources (including measures) • Training and Continued Professional Development (CPD) • Review of measures and feedback in supervision	• Enabling data use in direct practice with clients • Enabling use of data at practitioner level • Enabling use of data at team level • Enabling use of data at service level	• CYPPC understanding of measures • Communication with CYPPCs about measures • Collaborative setting of goals and choice of measures • CYPPC feedback on support

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What does it look like?

Leadership & Management	Step achieved				Staff Development	Step achieved			
	1	2	3	4		1	2	3	4
Organisational Vision					Understanding of use of different data sources (including measures)				
Organisational commitment to collection and collation					Use of particular data sources (including measures)				
Organisational commitment to interpretation and use					Training and Continued Professional Development (CPD)				
Organisational culture supportive of use and learning					Review of measures and feedback in supervision				

Infrastructure & Information Management	Step achieved				Service user involvement	Step achieved			
	1	2	3	4		1	2	3	4
Enabling data use in direct practice with clients					CYPPC understanding of measures				
Enabling use of data at practitioner level					Communication with CYPPCs about measures				
Enabling use of data at team level					Collaborative setting of goals and choice of measures				
Enabling use of data at service level					CYPPC feedback on support				

Stepping Stones to CORC Accreditation

- Accreditation = at least step 3 in each of the 16 criteria.

- Determine where your service is now, and where you need to get to.

Good start
At least step 3 has been achieved in 4 of the 16 criteria.

Half way
At least step 3 has been achieved in 8 of the 16 criteria.

Almost there
At least step 3 has been achieved 12 of the 16 criteria.

Accreditation standard
At least step 3 has been achieved in all 16 criteria.

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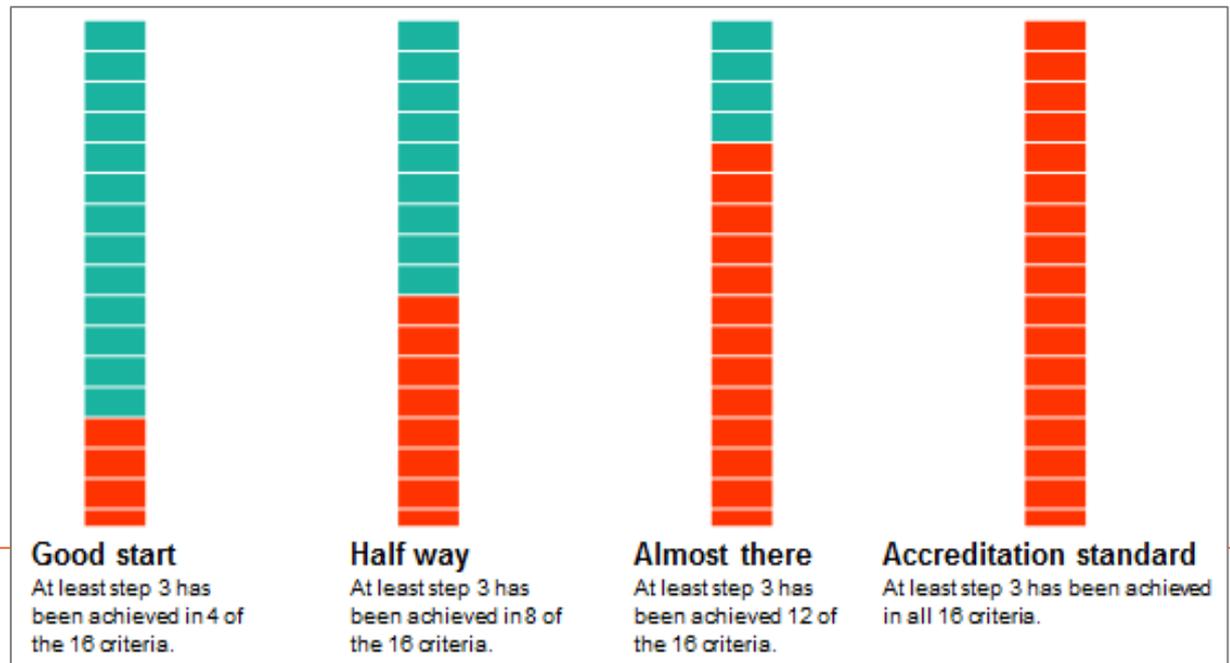
Self-Review & Accreditation Process

Initial meeting with service → **2 weeks** → Feedback deadline → **1 week** → Return framework to service → **8 weeks** → Self-review and survey completion deadline

Service to feedback on the document itself.
- What doesn't make sense?
- What else would they need to know?
- How feasible do they think the task is?

CORC to review feedback and amend document as necessary.

Service to undertake self-review, which will include staff completing CORC survey. CORC will collect survey results and service will submit

2 weeks ↓

Meeting to discuss report and formulate action plan ← **2-4 weeks** ← CORC publish preliminary report

Identifying particular areas of development will be data driven, calling upon analysis of the survey and other evidence using the COM-B model of Behaviour Change.

Service implements action plan with support of RISO over 12 month period

The work will bed led by the service and supported by the RISO. The nature and structure of supported offered by CORC will be agreed locally but could include:
- Staff training on using measures clinically or in supervision
- Process mapping to improve data collection rates
- Training managers / commissioners on how to make meaningful interpretation of data (MINDFUL approach)

12 month review meeting → Enter Accreditation process

Service and RISO will review where the service is in relation to the framework and either recommend further development work or applying for accreditation.

Self-Review

- Whole system assessment of 'where are we now?'

- CORC practice and perspectives survey

- Evidence recorded

- Assign & record 'Step' achieved

- Determine Action Plan for areas requiring development

Evidence

- Framework includes examples of evidence you might consider

Step 1	Step 2	Step 3	Step 4
CORC reports are seen by limited staff members in team and have limited impact on team planning.	Report circulated and/or discussed in relevant team staff forum.	Actions are taken as result of report to improve service provision within the team.	Key learning from report shared with service users. .
Example Evidence			
• Receipt of CORC report	• Staff meeting agendas • Action plan	• Evidence of actions taken cross referenced with outcome of feedback data • Service user feedback	• CORC findings displayed in waiting room
	.	**CORC Accreditation Step**	

Accreditation

- Requested by you when you're ready

- Evidence for your self-assessment; this may include:

  - desktop exercise & discussion

  - focus groups/interviews with staff, service users and other key stakeholders

  - observation of practice

Accreditation

- Accreditation Report:
  - o Verbal feedback provided during the visit
  - o CORC Officer recommends Accreditation (or not!) to CORC Board representatives
  - o Written summary report sent to service, with Accreditation certificate (or assessed 'Step' towards accreditation)

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A closer look

Organisational vision

Step 1	Step 2	Step 3	Step 4
A vision of meaningful use of routinely collected outcome and feedback data is held by staff with a clear focus on shared decision making. This must include at least some from each of the following groups: • Senior staff e.g. service mangers and/or board member and/or senior clinician • Practitioners • Service user advocates • Administrative staff	A routine outcome and feedback implementation group or equivalent is in place consisting of representatives from senior staff, service user advocates, admin and practitioners. .	Outcome and feedback flowing within the service and staff signed up to the process and vision.	Outcome is embedded within a context of shared decision making and being developed to fit local context.

Example Evidence

Commitment to use of outcomes and feedback data in the context of collaborative practice and shared decision making shown in: • Action plans • Senior staff memos and /or priorities • Board items • Job plans	Evidence of attempts at implementation from: • Minutes of meetings • Reports to board • Staff training	Evidence of implementation from: • Staff survey • Training assessments • Service user survey Evidence of data flow to HSCIC or CORC or elsewhere– e.g. parent and child SDQ data submitted to evidence data collection from multiple perspectives	Evidence of ongoing development e.g. • CYPS and their families are included within the consultation process for the introduction of new outcome and session by session measures.

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Organisational commitment to collection and collation

Step 1	Step 2	Step 3	Step 4
There is a process for monitoring and review of the collection and collation of outcomes and feedback.	Reviews of outcome monitoring takes places with involvement of senior staff.	Outcome and feedback monitoring occurring and regularly reviewed as part of regular senior management and teams meetings.	Monitoring and review of outcome and feedback collection and collation is carried out in collaboration with young people and commissioners.

Example Evidence

• Protocols in place • Staff training	• Action plans • Senior staff memos and /or priorities • Board items • Job plans	• Standing agenda item • Action plans • Standing board item • Evidence of data flow review	• Minutes of collaborative meetings with young people and commissioners

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Organisational commitment to interpretation and use

Step 1	Step 2	Step 3	Step 4
Data collated at least annually e.g. CORC report or internal report and reviewed by senior staff.	Collated data reviewed by senior staff and practitioners at least annually.	Collated data is reviewed at least annually by wider range of stakeholders including senior staff, practitioners, service user advocates and used to inform action plans, QI or CPD strategies.	Collated data is reviewed at least annually by wider range of stakeholders including senior staff, practitioners, service user advocates and used to inform action plans, QI or CPD strategies and used to inform discussions with commissioners.

Example Evidence

Step 1	Step 2	Step 3	Step 4
• CORC report • Internal collated report • Minutes of meeting when reviewed	• CORC report • Internal collated report • Minutes of meeting when reviewed	• CORC report • Internal collated report • Minutes of meeting when reviewed • Actions plan • Minutes include attendance by relevant groups • Evidence of action plans QI or CPD	• CORC report • Internal collated report • Minutes of meeting when reviewed • Actions plan • Minutes include attendance by relevant groups • Evidence of action plans QI or CPD • Evidence of agreed actions with commissioners

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Organisational culture supportive of use and learning

Step 1	Step 2	Step 3	Step 4
Local ROMs champion(s) exist and clinicians feel that the use of outcomes is valued and expected.	Staff are supported in discussing the use of outcome and feedback measures in supervision.	Outcome measures are aligned to wider strategies within the service including participation and evidence based practice, care pathway developments.	Across all levels there is a continuous striving to improve practices around outcome measures.

Example Evidence

• Champions identified • Attitudinal survey to ROMs disseminated • Results of survey suggest there is transparency around how data garnered by outcome and feedback measures will be used in the organisation.	• Evidence of use of ROMs in supervision • Inductions for new staff includes ROM training / protocols	• Team and clinical discussions include the use of outcome measures as shown in minutes/case notes/supervision on notes • Clinicians and young people feel and experience positive use of outcome measures as shown in staff and user surveys	• Both clinicians and CYPPCs feel valued and part of the service development process as shown in user feedback and staff feedback. • Evidence of use of outcome and or feedback data to inform QI projects or other service changes • Evidence of change in how measures are used as result of learning

CORC accreditation step

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Becoming a Pilot Site

- No financial cost (future accreditation assessment will be costed)

- Led by you

- Full support from CORC Regional Team

- 'Test' our proposed Accreditation framework and help us develop it

- (Hopefully) become accredited!

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Questions