

PRACTICE PLUS ACCREDITATION FRAMEWORK

The purpose of this document is to provide organisations with advice and guidance on methods and processes for self-assessment as part of IWL Practice Plus accreditation. The document also provides advice and guidance to validation teams on methods and processes to validate organisations self-assessment as part of Practice Plus accreditation.

The 10 national Practice Plus pilots have helped inform this framework document. The following templates are available on CD-Rom to support the accreditation framework

- Accreditation flowchart
- Staff Involvement flowchart
- Self assessment report template
- Validation report template
- Moderation report template

1. Internal Self Assessment

Principles of Self - Assessment

Practice Plus is a combination of internal self-assessment and peer review. Once organisations believe they have made significant progress towards Practice Plus accreditation they should begin their Practice Plus self-assessment to bring together the hard evidence that their staff are enjoying better working lives.

The self- assessment process should be

- fully representative of all staff groups in the organisation, as well as representative of ethnicity, race and disability etc.
- robust and informed by staff soundings
- Carried out in partnership with NHS Trade Unions (see Staff Involvement flowchart)

Self- Assessment Process

Organisations will need to demonstrate to the validation team that they have undertaken a robust self-assessment process. Local Trade Union representatives are ideal members of staff to be included in this data gathering exercise. Within Practice Plus pilot sites, local Trade Union representatives took up roles of facilitators or scribes alongside HR and other colleagues undertaking focus groups and interviews as part of the self-assessment process. Examples of staff to support the self-assessment are included at **appendix 1**.

The Practice Plus Pilot sites used different methods for gathering the views of staff in ways that suited their individual organisations such as

- Utilising existing staff meeting structures – team briefs/departmental meetings etc to gain staff views
- Focus groups / interviews / emails surveys and questionnaires / road shows

Examples of evidence organisations might provide to the validation team to show that the self-assessment process was robust are included in **Appendix 2**.

The size of NHS organisations varies, making decisions on appropriate numbers of people to be included during the self-assessment process difficult to set, but as a guide see table 1 below.

Table 1

No. Of Staff in Organisation	Suggested Sample %
501 - 1000	5-15
1001 - 2500	4 - 8
2501 - 5000	2 - 4
5000 +	1 - 3

Good practice examples from the Practice Plus Pilot sites can be found on the IWL website at <http://www.dh.gov.uk/policyandguidance/humanresourcesandtraining/modelemployer/improvingworkinglives>

When the organisation has produced the self-assessment report this is scored jointly (see Staff Involvement Flowchart) and will then be signed off by the Chief Executive and Staff Side Chair.

Self Assessment Report

The self-assessment report should describe

- What the Organisation needed to do following its Practice assessment (progress against action plan, evidence of the journey towards Practice Plus).
- How the organisation has continued to progress
- How the organisation tested its achievements, (evidence of staff views informing the self assessment results).
- Demonstration of evidence / outcomes of achievement against each IWL Indicator

Extracts of Practice Plus pilot organisations self assessment reports are available on the national IWL website.

A minimum data set template has been developed to guide organisations on the type of information that needs to be drawn together to present clear concise data about the organisation, which will assist the validation process. This is included in this CD Rom

2. External Validation Process

Team Planning Meeting

Feedback from pilot organisations identified that a Team Planning meeting before the Orientation meeting was crucial so that the validators can

- get to know one another
- start to build relationships
- agree their approach as a team
- enable the Team Leader to share knowledge of the organisation and their progress towards Practice Plus implementation
- begin to assimilate information in the self-assessment report
- begin a discussion of the organisations strengths as well as areas of challenge.
- develop and agree the programme for the on site visit, using evidence contained within the self-assessment report to drive and inform this programme.

The team will also need to ensure they have a thorough understanding of the organisations self-assessment process/methods. For example, information should be available to the team of

- Numbers of staff seen during self assessment by job role, gender and ethnic group
- Questions asked to staff during focus groups and interviews
- Names and roles of facilitators used to collect evidence.
- Raw data collected within the internal evidence gathering process.

The team should also start to prepare a list of questions to facilitate

- More meaningful, informed discussion at the orientation meeting
- Informed planning of focus group membership during the planned on site visit
- Planning and logistics of the on site visit

The team should also agree dates and venue for the completion of the validation report. All team members will ideally meet at the end of the on site visit to complete the report. Validators within the Pilot sites found it useful to complete the report on site immediately after the on site visit.

3. Orientation Visit

Principles for Orientation meeting

The orientation meeting provides the opportunity to scope the on-site visit, meet the key contacts and agree logistics and domestic arrangements. It is also an opportunity to foster relationships and reassure the organisation by being supportive, positive, enabling and flexible. The Team Leader should agree the agenda in advance with the Trust IWL Lead.

The Validation Team will need to judge from the self-assessment report areas of strength and challenges for the organisations and which staff groups they want to talk to. These decisions should be shared with the Trust IWL lead to confirm the programme for the on site validation – who the team wish to see, types and numbers of staff groups for focus groups and interviews. This will enable the Trust to begin planning for the onsite validation.

The size of NHS organisations varies, making decisions on appropriate numbers of people to be seen during the validation process difficult to set, but as a guide see suggested numbers in table 2.

Table 2

No. Of Staff in Organisation	Suggested Sample % at self assessment	Min. numbers for validation teams
501 - 1000	5-15	40
1001 - 2500	4 - 8	75
2501 - 5000	2 - 4	90
5000 +	1 - 3	110

The Validation Team and Organisation will need to

- Confirm the on site timetable ensuring enough time is built into the validation to allow teams to meet, discuss, reflect and plan.
- Agree planning, logistics and housekeeping issues - transport, facilities, admin support
- Confirm informal feedback arrangements how this will take place and who should attend.
- Check any additional information that might be required.

Time should be built into the programme to allow the team to spend time together to finalise list of questions informed by additional evidence gathered at the Orientation meeting.

4. On site Validation

Validation process

The validation process is likely to take 4 validators (including the team leader) 2 - 3 days. However in large organisations teams may consist of 4 validators plus the Team Leader. In such circumstances the Team Leader will take on a greater co-ordinating role between the team and the organisation.

The Validation Team will use a number of consistent processes to validate evidence provided by the organisation in their self-assessment report. One vital role of Validators will be to determine if staff were able to speak freely and confidently in their earlier interviews / focus groups within the internal self-assessment process. The validation processes should be used to validate evidence in the self-assessment report, probing both areas of good practice and any identified gaps or areas of challenge. Validation is **not** about carrying out a repeat exercise of the self-assessment.

Validators request 'sprinkling' of staff that have been involved in the self-assessment process to be present in focus groups within the validation process in order to test the self assessment process. Validators will need to interview staff involved in the organisations self assessment process e.g. local TU representatives or members of IWL steering group etc - to gain an understanding of how the internal self-assessment process was conducted. The aim is to confirm a robust and transparent process was undertaken in partnership with staff and local trade unions.

Validators will be required to test the extent of staff involvement and partnership working between the organisation and local trade union reps/ staff side. A specific focus group or interviews with local trade union reps should be built into the on-site programme. This should enable the team to gain an understanding on the approach used to involve local trade union reps in the self-assessment process as well as the completion and scoring of the self-assessment report.

The following are a number of validation processes that can be used

- Staff focus groups with membership informed by the self assessment report
- One to one Interviews informed by self assessment report
- Reviewing storyboard and case study evidence / vignettes of good practice describing how good people management has influenced patient care/ service delivery as well as benefiting staff.
- Walk about - observation
- Considering written evidence especially Staff Opinion Survey.

Verbal Feedback

Verbal feedback without an overall recommendation will be given to the organisation at the end of the on site visit.

Validation Report

The 3rd and 4th day can be used by the validation team to develop the validation report. A national validation report template is available to assist this process.

5. Moderation

Moderation is part of the national guidelines for practice plus accreditation and all reports will be moderated, to make sure evidence clearly matches the scoring. The Team Leader and trade union rep from the team should attend the moderation; other team members are of course welcome to attend. A national template and training programme is available to assist this process and ensure consistency.

Following moderation the report should then be submitted to the organisation to check for factual accuracy, before the evidence is put to the Accreditation Panel, made up of local stakeholders, who will quality assure the process, and ratify the report.

Appendix 1

List of staff used in Practice Plus pilot sites as facilitators for the organisations self-assessment process

- Members of the IWL steering group
- Staff Involvement officer
- Staff side chair
- Local trade union representatives from NHS accredited trade unions
- Training and development manager
- HR managers
- Members /Chair of equality and diversity group
- Harassment advisors
- Non-exec members of the trust board
- IWL Champions
- Health and safety reps

Appendix 2

Self Assessment Process

Examples of evidence/ information the organisation might provide to validation teams as evidence that the self-assessment process was robust.

- Evidence of staff side involvement in self-assessment process
- Names and roles of facilitators used to collect evidence.
- Numbers of staff seen during self-assessment by job role, gender and ethnic group
- Lists of questions asked to staff during focus groups and interviews
- Description of how questions were formulated
- Samples of raw data collected within the internal evidence gathering process.
- Description of how evidence was collated by the facilitators
- Was the information collated half reviewed at any point? Did the questions change after review?
- Description of process used to score the self-assessment report.
- Transcript of ground rules used to reassure staff that information provided would be non-attributable.
- Copy of letter inviting staff to attend focus groups /1-1 interviews etc.