



TENANCY SUSTAINMENT SERVICES

SERVICE STANDARDS

October 2008



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1.0 Introduction

This document sets out the service standards that current Tenancy Sustainment service providers have agreed will be met in the delivery of RSI Tenancy Sustainment services. It is based on the Supporting People Quality Assessment Framework but has been altered to make it more applicable to a floating support setting and to the particular access arrangements that apply to RSI units let via the Clearing House.

The document provides a clear and consistent framework for assessing and ensuring the quality of Tenancy Sustainment services. It is for use by providers as part of a quality assessment process and as a tool for continuous improvement. It allows providers to demonstrate to funders, service users and other stakeholders that they are delivering services to a high standard.

Providers will ensure that the service standards set out in this document are embedded into their approach to service delivery and their organisational culture. Given that the current providers are familiar with using the Quality Assessment Framework for SP-funded services within their organisation, it is not expected that the introduction of this service standards document will add any unnecessary extra monitoring. Instead, its adoption will bring the RSI Tenancy Sustainment Services in line with quality standards being adopted elsewhere by service providers.

Service performance will be assessed by examining evidence of the ways in which these service standards are being met and awarding a performance score in each of the areas included. There are four possible scores:

- A denotes excellence and is associated with service providers striving to be leaders in their field.
- B denotes good practice.
- C means that the service meets the required minimum standard but there is scope for improvement.
- D means that the service is failing to meet some or all of the minimum service standards set out in level C. In some instances immediate action will be required to meet legal, statutory or health and safety standards.

Assessment at level D means that the service is operating at an unacceptable level. The provider will agree and implement an action plan to achieve at least level C within the minimum feasible timescale. Failure to do this may result in the review of grant funding to the service.

2.0 Self-Assessment

TST providers will complete the self assessment form included at Appendix 2 within this document on an annual basis and submit to CLG by **10th January**.

3.0 Continuous improvement

To gain maximum benefit from this standards document and the required annual self assessment, TST providers agree to embrace it as a tool for improving service quality rather than as a monitoring tool used by funders. Used in this way, the document can promote improved awareness of service quality and to create an environment in which informed planning of quality improvements can happen. If using the document as a continuous improvement tool, providers agree to ensure that the self-assessment is carried out as objectively as possible, possibly by staff other than those closely involved in the day-to-day running of the service concerned.



Appendix 1 – TST Service Standards

1. Needs and Risk Assessment	
Comprehensive assessments of needs and risks are carried out for all tenants at the commencement of their support and repeated at appropriate intervals. Assessment processes place tenants' views at the centre, are managed by skilled staff, are comprehensive and involve other professionals as necessary.	
Performance Level C	
Standards	Evidence
C1	<p>The needs of tenants and any inherent risks are assessed on a consistent and comprehensive basis at the commencement of the support service.</p> <p>The needs and risk assessment process is written down, clearly understood by staff and the assessment tools are appropriate to the outcomes the service is intended to achieve. The assessment tools <u>specifically</u> cover the areas of need listed below:</p> <ol style="list-style-type: none"> 1. <u>Move On needs:</u> <ul style="list-style-type: none"> ⇒ Exploration of needs and aspirations ⇒ Preparatory work needed (eg: saving for deposit, paying off arrears, pre-tenancy work, etc.) ⇒ Raising awareness around likely move on options 2. <u>Physical Health needs:</u> <ul style="list-style-type: none"> ⇒ Basic health needs and need for support around accessing services (eg: dental check, eye test, hearing test, chiropody, TB, etc.) ⇒ The need for support around accessing health checks/treatment in relation to the prevention and treatment of chronic diseases (eg: heart, blood pressure, chest/respiratory functioning, functioning of kidneys and liver, checks for diabetes, etc.) ⇒ Need for support around sexual health and access to checks/services ⇒ Need for support around hygiene, self care and medication ⇒ Need for support around pursuing a healthier lifestyle (eg: nutrition, smoking, etc.) ⇒ Mobility issues and need for aids and adaptations ⇒ Access to appropriate external support (eg: GPs, clinics, care services, inoculations, etc.) ⇒ Ability to concentrate/memory issues 3. <u>Mental health and substance misuse needs:</u> <ul style="list-style-type: none"> ⇒ Access to appropriate external support/treatment (eg: CMHTs, day programmes, rehab) ⇒ Need for support around hygiene, self care and medication ⇒ Need for support around pursuing harm minimisation or treatment options ⇒ Need for support around blood borne infections

<p>C1 (cont)</p>		<p>4. <u>Employment/Training/Education needs:</u></p> <ul style="list-style-type: none"> ⇒ Exploration of needs and aspirations ⇒ Preparatory work needed ⇒ Basic skills check (eg: literacy, numeracy) and identification of barriers to accessing ETE ⇒ Assessment of suitability for accessing work-like activities ⇒ Access to appropriate external support (eg: job clubs, local ETE services, etc.) <p>5. <u>Management and maximisation of income:</u></p> <ul style="list-style-type: none"> ⇒ Debt issues, budgeting needs and support required ⇒ Benefits check to identify entitlement <p>6. <u>Risk issues and safety and security:</u></p> <ul style="list-style-type: none"> ⇒ Personal safety and home security ⇒ Vulnerability to harassment/abuse and risk of self harm ⇒ Risks to others (ie: staff, community, family/friends) <p>7. <u>Social networks and inclusion:</u></p> <ul style="list-style-type: none"> ⇒ Family and social contacts, cultural and faith needs, social and leisure interests ⇒ Meaningful occupation, advocacy and communication needs, childcare/parenting issues <p>8. <u>Tenancy sustainment and basic home care:</u></p> <ul style="list-style-type: none"> ⇒ Paying bills and rent ⇒ Managing repairs/housing management/landlord issues ⇒ Practical home care <p>In most cases, given the type of identified need and the level of support offered by TSTs, the expectation is that identified needs will be met by external agencies with TST staff having a role in arranging/advocating for access to these services and supporting tenants to maintain contact with agencies and pursue agreed goals. The assessments should also allow scope for other needs to be identified by the tenants not covered by the above list.</p>
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Performance Level C (cont.)		
Standards		Evidence
C2	The needs of tenants and risks are reviewed periodically on a consistent and systematic basis.	Case notes show that needs assessments have been reviewed and/or repeated to an appropriate frequency and at least every six months. Case notes show that risk assessments have been reviewed, after a critical incident or substantive change in needs. The procedures for timing and carrying out reviews are documented in individual case records. The procedures are covered in staff induction and/or training programmes.
C3	Needs and risk assessment and reviews involve tenants and take full account of their views, targets and aspirations.	The written procedures describe how tenants' views are to be incorporated. Where prospective tenants disagree with any outcomes of assessment or reviews their views and reasoning are recorded. Tenants are provided with a copy of assessments and reviews. Tenants confirm that their views have been listened to and taken into account.
C4	Assessment and review procedures are reviewed periodically and in response to changing legislative or funding requirements. The processes are applicable and appropriate for use in a TST setting.	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 e.g. legislative changes) and that the organization is ensuring that the processes can be used successfully in a TST setting.
C5	Staff have the required skills and competencies to undertake the needs and risk assessments. The quality of assessments are checked by managers.	The needs and risk assessment procedures are covered in staff induction and/or training programmes. Training records prove this. Copies of all assessments are kept on file and are available for inspection. Assessments are signed off by managers where appropriate and service providers arrange for the quality of assessments to be audited regularly. Staff are able to describe the assessment and review processes and the rationale behind it. Staff undertaking assessments and reviews are experienced in working with those needs most commonly encountered amongst tenants. 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.

Performance Level B		
Standards		Evidence
B1	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.

Performance Level B		
Standards		Evidence
B2	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
A1	Professional expertise is available when necessary.	There is documentary evidence (correspondence, protocols etc.) that external experts are available to participate in assessments when necessary.
A2	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.
A3	Tenants are involved in periodic reviews of the needs and risk assessment procedures.	Notes of the reviews record tenants' involvement.
A4	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 tenants 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.

2. Support Planning

Tenants have up-to-date support plans in place. Support planning processes place users' views at the centre, are managed by skilled staff and involve carers and/or other professionals. Support plans are outcome focused and involve other agencies in the achievement of intended outcomes where necessary.

Performance Level C

Standards		Evidence
C1	All tenants 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 tenants' case files. Clear links can be seen between assessments of tenants' needs and their support plans. The support plans are comprehensive and reflect the nature and duration of the support service provided.
C2	Support plans are outcome-focused.	Support plans incorporate <i>specific</i> intended outcomes which have been agreed with tenants and, if appropriate, carers, relatives or other advocates.
C3	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.
C4	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.	Case notes or support plans demonstrate such planning takes place. 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.
C5	Support planning is set up and managed so as to allow accurate reporting of outcomes data.	Organisations ensure that the accuracy of outcomes information reported for TST services is subject to regular cross checking to ensure that information provided clearly links back to the support plans.
C6	Individual support plans are revised to reflect outcomes of reviews.	Review records demonstrate clear links between changing need, revised user outcomes and support plans.

C7	The timing of reviews is responsive to tenants.	Procedures state that reviews can be initiated at any time by a tenant. This right is explained within the service description, tenants' handbook etc. Tenants confirm that they are aware of this.
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Performance Level B		
Standards		Evidence
B1	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.
B2	Formal mechanisms are in place between the service and external agencies to facilitate and enable joint working.	Initiatives such as shared protocols, joint support planning arrangements, joint training can be described by staff and evidenced by appropriate documentation.

Performance Level A		
Standards		Evidence
A1	Professional expertise is available when necessary.	There is documentary evidence (correspondence, protocols etc.) that external experts are available to participate in support planning when necessary.
A2	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.
A3	Tenants are involved in periodic reviews of the support planning procedures.	Notes of the reviews record tenants' involvement.
A4	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 tenants 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.

3. Security, Health and Safety

The security, health and safety of all individual tenants and staff are protected.

Performance Level C		
Standards	Evidence	
C1	There is an up-to-date health and safety manual. Clear mechanisms exist that provide for the review of the manual in accordance with legislative and other changes in this area.	<p>The manual is less than five years old and is in accordance with relevant legislation. It has been reviewed by a competent person to fully reflect any changes in law and practice affecting health and safety within that period and it shows how health and safety is managed within the organisation. The manual allows the organisation to discharge its legal and statutory responsibilities to staff, service users and the public and it specifically includes policies relating to:</p> <ul style="list-style-type: none"> ⇒ Safer lone working practices ⇒ Dealing with challenging behaviour ⇒ Incident and accident management ⇒ Infectious Diseases prevention ⇒ Office and VDU safety ⇒ Safety inspections ⇒ Fire safety procedures
C2	Staff understand and implement the relevant areas of the manual and are competent to identify and minimise risks.	Staff induction programmes cover the relevant areas of the health and safety manual. Staff are able to describe the principle features of the policy and the impact on their work. Staff are offered training or instruction appropriate to their work in the TSTs (eg: dealing with challenging behaviour, lone working, infectious diseases, health and hygiene, etc.)
C3	Special attention is paid to the risks of lone workers.	There is a lone worker policy that sets out procedures to minimise the risks to people working alone. The organisation has a risk assessment that relates to the risks associated with lone working, this is reviewed annually and following any incident. Staff can explain how to deal appropriately with aggression from tenants.
C4	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.
C5	A formal methodology exists for conducting risk assessments of office premises and service delivery mechanisms and these are conducted periodically, at least annually to identify health and safety and security risks to staff and tenants.	The methodology is documented and covers all potential risks (other than risks to/from individual tenants). There are records of the assessments, participants, key findings and action taken.

Performance Level C (cont.)		
Standards		Evidence
C6	Action is taken in response to individual concerns raised by staff or tenants.	Records of concerns raised, action taken and feedback provided.
C7	Tenants are aware of the health, safety and security policies and understand how to report concerns.	Tenant handbooks, welcome packs or other information explain the procedures and differentiate clearly between what is a landlord/housing management issue and a support/TST issue. Concerns are documented and illustrate that tenants understand and participate in health, safety and security risk identification.

Performance Level B		
Standards		Evidence
B1	Tenants are involved in risk assessments.	The risk assessment methodology sets out how tenants are to be involved. Assessment records record the participation of tenants.
B2	In services which are not staffed 24 hours a day there are arrangements in place to provide out-of-hours support to tenants 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 tenants in handbooks, leaflets, posters etc.

Performance Level A		
Standards		Evidence
A1	Tenants are involved in review of health and safety and security policies and procedures.	Minutes or other records of the review processes demonstrate participation or, at least, that all reasonable efforts have been made to secure participation.

4. Protection from Abuse
The right of tenants to be protected from abuse is safeguarded.

Performance Level C		
Standards		Evidence
C1	There are robust up-to-date procedures in place that govern how organisations will avoid and respond to actual or suspected abuse or neglect.	The procedures are documented and address physical, sexual, psychological, financial or material and discriminatory abuse and acts of neglect or omission. The procedures are in accordance with the Public Interest Disclosure Act 1998 and, where appropriate, with the Department of Health guidance "No Secrets". The organisation has a Whistle Blowing Procedure in place and undertakes appropriate recruitment checks. The procedures have been reviewed within the last five years.
C2	Prompt action is taken in response to individual complaints or concerns from staff or tenants.	A log records detail of investigations and outcomes and shows that appropriate action is taken.
C3	The policies and procedures are fully understood by staff.	Staff induction and training programmes specifically address protection from abuse. Staff are able to describe the principal elements, the reasons behind them and their implications for their work. Staff know to whom they should report any actual or suspected abuse or neglect.
C4	There are procedures to prevent staff from personal benefit when working with vulnerable people.	There is a documented organisational risk assessment addressing the potential for personal benefit through abuse eg: in the provision of financial advice, power of attorney, handling tenants' money, managing improvement works etc. and procedures in place to minimise identified risks.
C5	Staff are made aware of and understand their professional boundaries.	There is documentary evidence that induction, training, supervision etc. specifically addresses the nature and limits of relationships between staff and tenants. Staff are able to describe the policies concerning relationships with tenants.
C6	Tenants are aware of the procedures for reporting abuse or neglect.	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. Tenants understand what constitutes abuse and know to whom they should report any actual or suspected abuse or neglect.
C7	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.

Performance Level B		
Standards		Evidence
B1	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 B (cont.)		
Standards		Evidence
B2	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.
B3	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.

Performance Level A		
Standards		Evidence
A1	Tenants are actively involved in reviewing the policies and procedures.	Minutes or other records of the review processes demonstrate participation.
A2	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.

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 tenants are appropriately met.

Performance Level C

Standards		Evidence
C1	There are written policies covering equal opportunities, anti-discriminatory practice and harassment.	<p>The policies exist and cover discrimination on grounds of gender, age, religion, race, disability, nationality and sexuality. The policies cover staff and tenants and address access to both services and employment.</p> <p>The equal opportunities policy is in accordance with the Race Relations Act 1976, Disability Discrimination Act 1995, Human Rights Act 1998, Sex Discrimination Act 1975 and all and any subsequent amendments to these. 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>
C2	There is a recruitment and selection policy that aims to eliminate discrimination in recruitment processes.	<p>The policies exist and cover discrimination on grounds of gender, age, religion, race, disability, nationality and sexuality and are in accordance with relevant legislation. The policies have been reviewed within the last five years.</p>
C3	Staff are familiar with the above policies.	<p>Policies are covered in induction and training programmes. Staff are able to describe key features of the policies.</p>
C4	Information is made available to tenants about the availability of cultural and religious organisations and centres and the availability of organisations or services for discriminated-against groups.	<p>There are prominently available posters, leaflets, etc. at any offices used by tenants and assessments, support plans, key-working notes, etc. record that information has been imparted where appropriate.</p>
C5	The communication needs of tenants are catered for.	<p>Where necessary, tenants 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 tenants or potential tenants as feasibly possible.</p>

Performance Level B		
Standards		Evidence
B1	There is a documented plan for ensuring the effectiveness of the equal opportunities and anti-discriminatory policies and plans are periodically reviewed. Where appropriate, targets to address under-representation are set.	The plan exists and covers both staff and tenants. An action plan, including any targets, has been appropriately signed off. Relevant staff demonstrate a working knowledge of the targets. Periodic reviews (at least annual) of statistics and other performance information compared to targets contained within the plan.
B2	The ADP, EOP and harassment policies are implemented and effective.	The workforce reflects the diversity and cultural profile of tenants. 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.).
B3	Tenants are provided with information on organisations or services for discriminated-against groups	The information is evident in handbooks, induction information, casework notes, etc.
B4	Staff understand and are sensitive to particular needs of tenants from minority groups.	Records show that staff are specifically recruited or trained to ensure this understanding.
B5	Tenants are made aware of the above policies.	Policies are explained in tenants' introductory information. Tenants confirm awareness of the policies.

Performance Level A		
Standards		Evidence
A1	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.
A2	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.
A3	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.
A4	Tenants are involved in the periodic review of the ADP, EOP and harassment policies.	Notes of involvement or consultation through meetings, focus groups, newsletters etc.

6. Complaints

Users, carers and other stakeholders are made aware of complaints procedures and how to use them. Processes are effective and organisations can demonstrate that notice is taken of complaints and improvement work that they may highlight as necessary.

Performance Level C

Standards		Evidence
C1	There is a written complaints procedure that makes clear whom to complain to in the first instance; what the organisation will do; how to escalate a complaint and how to appeal in the case of dissatisfaction with the outcome.	The procedure exists and has been reviewed within the last five years. In TST services where the landlord and support provider may not be the same body, the procedure makes clear who to complain to regarding the support service and who to complain to about the housing management service.
C2	All tenants 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.
C3	Staff follow the procedure.	Staff are able to describe the procedure. There is a log of complaints.
C4	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
B1	The language and presentation of the procedure promotes understanding by the majority of tenants.	The procedure is written in simple language and is available in forms appropriate to the needs of as many tenants as reasonably possible.
B2	Tenants understand the procedure.	Tenants are able to describe the procedure.
B3	Outcomes of complaints are fed back to complainants	Case files or other records contain correspondence or notes of verbal feedback.

B4	The organisation and its staff see complaints as a positive feedback tool.	Staff receive training in dealing with and encouraging complaints. Tenants 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.
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Performance Level A		
Standards		Evidence
A1	Tenants and carers are encouraged and empowered to use the complaints procedure.	Records (e.g.: case notes, support plans) show that individual tenants have been encouraged and supported in the use of the complaints procedures. Independent advocacy is available to help tenants and carers to use the complaints system.
A2	Complaints are proactively used in planning and shaping services with the involvement of tenants and carers.	There is a periodic (at least annual) review of complaints received, which is shared with tenants and carers who participate in determining consequent changes or improvements to the service.
A3	The complaints procedure specifically addresses complaints from external individuals or organisations.	The procedure is documented.
A4	Reviews of the complaints procedure involve tenants and carers.	There is a periodic review (at least every five years) of the complaints procedure that involves tenants 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.

Appendix 2 – Self Assessment Form

This table should be used for recording the outcomes of self-assessments and any action points that are needed. Please note that this self assessment may be subject to validation. Any service provider indicating a score of D must include an urgent action plan for how performance will be improved.

Organisation Name: _____ **Service Name:** _____ **Date:** _____

Core Objectives		D	C	B	A	Actions/issues
1	Assessments of needs and risks are carried out for all tenants. Processes place tenants' views at the centre, are comprehensive, are undertaken by skilled staff and involve other professionals.					
2	Tenants have up-to-date support plans in place. Processes place tenants' views at the centre, are managed by skilled staff and involve carers and/or other professionals.					
3	The security, health and safety of all individual tenants and staff are protected.					
4	Tenants have the right to be protected from abuse and this right is safeguarded.					
5	There is a commitment to the values of diversity and inclusion and to practice of equal opportunity and the needs of black and minority ethnic tenants are appropriately met.					
6	Tenants, carers and other stakeholders are made aware of complaints procedures and how to use them.					