



Department for Child Protection

SELF ASSESSMENT GUIDE
FOR PLACEMENT SERVICE PROVIDERS
2009/2010

Electronic copies of this document are available by contacting the Manager Standards Monitoring Unit

on 9222 2598

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OVERVIEW

Better Care, Better Services Standards apply to all children in the CEO's care who are supported by the Department for Child Protection or funded services from 1 January 2008.

The sector across Western Australia involved in caring for children is committed to striving for excellence in the standard of safety and care responses for children and young people. Hence, the standards monitoring process, including the self assessment and external monitoring, is designed to:

- Be a collaborative process enabling the participation of interested stakeholders;
- Be an open and transparent process;
- Provide balance between compliance and service improvement;
- Expect a pace of change that is not beyond the capacity of the service;
- Take into account the size and location of the service;
- Maintain the anonymity of participants in reports;
- Provide an overview at a point in time of the operations of a service.

PURPOSE OF THE SELF ASSESSMENT

The purpose of the Self Assessment is to enable service providers to:

- identify how well they meet the needs of consumers;
- determine where there is scope for improvement;
- develop an action plan to improve the quality of service; and
- report progress against the external standards monitoring report, where relevant.

The self assessment is an integral part of the external monitoring of services against the *Better Care Better Services Standards (2007)*. At the time of external monitoring visits, the self assessment will be reviewed to determine if service performance, as measured against the standards, is accurately recorded.

The self assessment document is a management reporting document designed for staff and not consumers. While consumer participation is an essential component of the self assessment process, it is not appropriate for consumers to fill in the form.

INSTRUCTIONS UPON COMPLETION

Please return a hard copy of the completed self assessment to the Standards Monitoring Unit by close of business on **FRIDAY 29 OCTOBER 2010:**

**Standards Monitoring Unit
Department for Child Protection
Level 2, 189 Royal Street
EAST PERTH WA 6004.**

Enquiries can be directed to the Manager, Standards Monitoring Unit on 9222 2598.

STAGES OF THE SELF ASSESSMENT

PART A: THE SELF ASSESSMENT FORM
PART B: DEVELOPMENT OF AN ACTION PLAN
PART C: PROGRESS REPORT AGAINST PREVIOUS ACTION PLAN
PART D: PROGRESS REPORT AGAINST EXTERNAL STANDARDS
MONITORING REPORT
PART E: SELF ASSESSMENT STATEMENT

PART A: THE SELF ASSESSMENT FORM

The purpose of Part A is to help Service Providers, in consultation with consumers, assess how well the service is meeting their needs and whether there is scope to improve the way services are delivered.

The monitoring process

For an organisation to function effectively, it has to identify and manage numerous linked activities. The application of a system of processes within an organisation, together with the identification and interaction of these processes, and their management, can be referred to as the “process approach”.

The Self Assessment is designed to assist organisations to determine if the processes and procedures operating within their organisation are meeting the *Better Care Better Services Standards 2007*.

Four information sources

The Self Assessment approach has been designed to gather information based on four sources. These are:

- Process documentation;
- Staff and management awareness;
- Output documentation; and
- Consumer feedback.

Example:

Supporting Standard	Process Documentation	Staff and Management Awareness	Output Documentation	Feedback from Children and Young People/Carers/Parents/Staff
3.12 Services adhere to policies and procedures to manage children who exhibit difficult or aggressive behaviours which place their own safety and that of others at risk and receive training to understand and safely respond.	Accommodation and Care Services (ACS) Procedures Manual 5.7 <i>Physical Restraint</i> . Also refer to ACS 1.7 <i>Therapeutic Crisis Intervention</i> .	Two staff reported policy and procedures were covered in their induction to the service. Staff reported attending TCI training.	Record of incident report on file as per ACS 5.7 instructions. Record of Life Space interview on file.	No feedback was obtained from children or young people in relation to this supporting standard. or One child made reference to a Life Space interview.

Process documentation

Process documentation ranges from the high order material that establishes the legislative mandate, mission or purpose of the service to detailed work level instructions and all material between. Process documentation may be electronically stored, paper based, visual or audio.

Staff and management awareness

Staff and management awareness relates to the knowledge and understanding, of staff and management, in relation to the process documentation that directs their work. This may be demonstrated by staff knowing where to locate or access information, or providing examples of where they have implemented a process.

Output documentation

This is the 'record' or evidence that a process is completed. Evidence may include case notes, records of staff training, records of evacuation drill etc. The records may relate to a specific child or young person or a work unit or Department process.

Consumer Participation

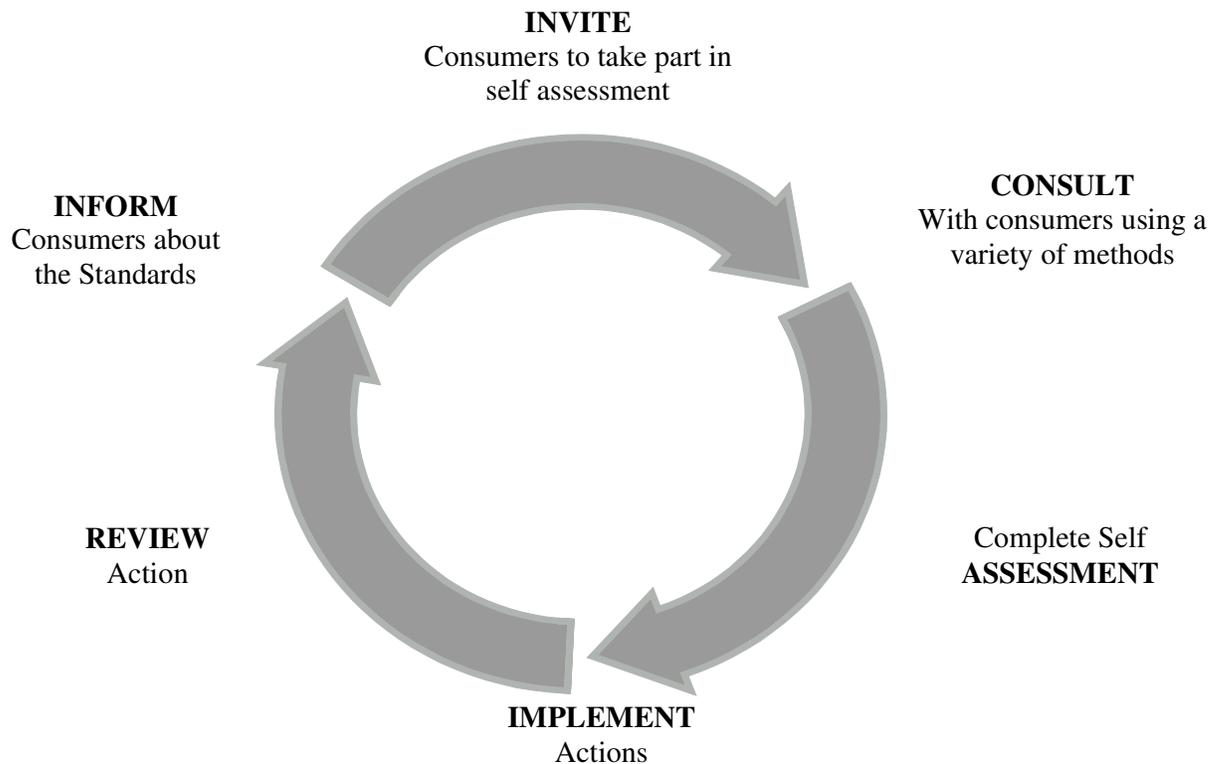
As a service provider, it is your responsibility to ensure that the views of the consumers are represented in the self assessment. Due to the diversity of services and the range of consumers it is not possible to outline any one

method that will effectively involve your service's consumers in the self assessment. It is suggested you develop an appropriate method to involve consumers in the self assessment in consultation with some consumers.

In developing the process you may like to consider:

- who the consumers are (children and young people, family members, carers);
- what the service really needs to know and what the most relevant questions to ask consumers are;
- any special needs consumers may have to be able to participate, for example transport, interpreters, age;
- how consumers will be supported to participate;
- appropriate methods to gain the views of a broad range of consumers; and
- how consumers' privacy and confidentiality can be protected.

The process whereby consumers take part in the self assessment could follow along the lines of the flow chart diagram illustrated below.



The self assessment should be based on both consumer and staff input (refer to Part F and G). This process produces the most useful information, when consumers are consulted through methods appropriate to their communication needs. You may need to make a number of different methods available to consumers.

Having consulted with consumers, Service Providers need to complete the Self Assessment Form by considering systematically whether the Service meets each supporting standard.

Supporting Standards are a guide to the policies, procedures and practices that a service may have in place and are not meant to be an exhaustive list.

Not every supporting standard is relevant to every service type.

Some useful questions to ask about each supporting standard include:

- What does this supporting standard mean when applied to our service(s)?
- What are we doing now that incorporates the principles of this supporting standard into our practice?
- What evidence do we have to demonstrate our performance against this supporting standard?
- Have we changed the way we do things over the last twelve months?
- Are we doing things better since the last self assessment?
- What documentation should we gather?
- What else could we do to incorporate the intent of the supporting standard into our practices?

After considering these questions, you need to:

- assess whether your service is meeting each relevant supporting standard;
- assess to what extent each standard is being met; and
- provide comments in support of that assessment using the Self Assessment Form in Part A and describe what actions your service intends to take to more fully meet the standard using the Action Plan in Part B.

Guidelines for undertaking the Self Assessment:

When undertaking the self assessment service providers need to keep in mind the following:

- Although the Self Assessment Form in Part A contains prompts to inform assessment it is not an exhaustive list. Service providers need to formulate questions relevant to the service's staff and consumer group that will adequately assess if the standard has been met.
- Where the Better Care Better Services supporting standards state 'the Department' this is read as the Department for Child Protection.
- The term "Care Plan", "Care Plan Review" or "Provisional Care Plan" refers to the legislated definitions contained within the *Children and Community Services Act 2004*.
- The term "Case Worker" extends to the case worker employed by the service provider (as well as that of the Department for Child Protection).

PART B: ACTION PLAN

Part B identifies actions to be undertaken to improve the quality of the service in line with the standards and the concept of continuous improvement.

Consumers, particularly those who were involved in the self assessment, will be interested in the Action Plan. Some may wish to help you identify the actions while others would like to be informed of what actions are planned over the next year. Some consumers may decline to participate.

Complete the Action Plan contained in Part B. Please duplicate the Action Plan if extra pages are needed.

PART C: PROGRESS REPORT AGAINST THE ACTION PLAN

Service Providers are required to keep a record of their progress against the findings of the self assessment. The self identified issues and action taken will inform future external monitoring.

Complete the Progress Report against the Action Plan contained in Part B.

PART D: PROGRESS REPORT AGAINST THE STANDARDS MONITORING REPORT

This section applies only to those services which have been assessed externally by a Standards Monitoring Team.

External monitoring reports usually include recommendations designed to improve the quality of the services. **Opportunities for Service Improvement** focus upon the ideals inherent in the *Better Care Better Services Standards (2007)*, to which service providers are committed. Opportunities for Service Improvement should be carefully considered by the service's management and implemented when possible. They are subject to the normal organisational planning processes and are not a directive of the Department for Child Protection. Progress in implementing any opportunities for service improvement must be commented upon in this document.

As there is a separate reporting mechanism for required actions, they do not need to be included in this report.

If this section applies, please complete the progress report contained in Part D. Please duplicate the Progress Report if extra pages are needed.

PART E: SELF ASSESSMENT STATEMENT

The Department for Child Protection is keen to receive information about the level of consumer participation in the self assessment process. Please complete the Self Assessment Statement in Part E and ensure it is signed by the principal contact person and certified correct by another person wherever possible.

PART F: RECORDING TEMPLATE

The Standards Monitoring Unit has developed a template Service's can use when consulting with consumers. The template captures a 'yes', 'no' or 'uncertain' response from consumers and provides room for comment. If documented evidence is sighted at the time of consultation this can also be recorded.

PART G: QUESTIONNAIRE FOR CHILDREN AND YOUNG PEOPLE

The participation of children and young people is critical to the monitoring process. It is recommended monitors are available to meet children face-to-face. Given the skills required in ascertaining reliable information from young children only children eight years of age and older should be contacted.

Where a child cannot be met face to face, contact via telephone should be considered or a request can be made of the child's carer or mentor to complete a questionnaire with the child. It is important the person completing the questionnaire with the child is not in a position that may lead the child to give a biased report. The questionnaire for children and young people asks questions that address the standards in a non-threatening and age appropriate manner for children over the age of eight years of age with average intellectual capacity.