



Charity reg. No. 228636

# **Accreditation for Community Mental Health Services (ACOMHS)**

## **Accreditation Process**

**January 2017**

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This booklet describes accreditation for community mental health services and provides information about the review processes and the accreditation ratings awarded.

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## Provisional timetable and checklist

What you need to do	Expected timescale	Tick
<p><b>Getting started:</b></p> <ul style="list-style-type: none"> <li>• Choose a team lead who will be the main link between your service and the ACOMHS team.</li> <li>• Choose two members of your team who will each attend other services' peer reviews as a reviewer.</li> <li>• Familiarise yourselves with the ACOMHS standards document.</li> </ul>	Month 0	
<p><b>Developing a communication strategy</b></p> <ul style="list-style-type: none"> <li>• Email 'join' to <a href="mailto:ACOMHS-Chat@rcpsych.ac.uk">ACOMHS-Chat@rcpsych.ac.uk</a> to join the ACOMHS discussion forum.</li> <li>• Organise a meeting to introduce team members to ACOMHS.</li> <li>• Publicise ACOMHS to the wider trust/organisation via newsletters, meetings, bulletin boards and/or intranet.</li> </ul>	Month 0	
<p><b>Self review</b></p> <ul style="list-style-type: none"> <li>• Circulate data collection tools and hand out paper questionnaires to service users, carers and referrers. Please note that the target number of responses must be reached by the end of the 12 week self review period.</li> </ul>	Months 1-3	
<p><b>Action planning</b></p> <ul style="list-style-type: none"> <li>• The time in between self and peer review has been designed in order to give you time to make improvements in your service, based on self review feedback. These changes will be documented at peer review and included in your final report.</li> </ul>	Months 3 - 4	

<p><b>Preparing for your team's peer review</b></p> <ul style="list-style-type: none"> <li>• The ACOMHS team will discuss with you a suitable date for your peer review.</li> <li>• Let the ACOMHS team know if any adjustments to the suggested timetable will be necessary at least one month in advance.</li> </ul>	Months 3-4	
<p><b>Peer Review</b></p> <ul style="list-style-type: none"> <li>• A review team comprising community mental health service staff, a service user and/or carer and a member of the ACOMHS team will visit your service to verify the self review feedback, and identify areas of achievement and areas for improvement.</li> </ul>	Months 4 - 5	
<p><b>Accreditation Committee decision</b></p> <ul style="list-style-type: none"> <li>• A team of experts in the field of community mental health, including professional and service user representatives, examine your service's report and make a recommendation about accreditation status.</li> <li>• Your accreditation decision will be fed back to you.</li> </ul>	Months 5 - 8	
<p><b>Making improvements to your service</b></p> <ul style="list-style-type: none"> <li>• Your final report will describe your team's achievements and suggest areas for improvement. We suggest you arrange to meet with your team to disseminate the feedback and formulate action plans for service development work.</li> <li>• Disseminate your report and action plan to senior managers within your trust/organisation, the wider trust/organisation via newsletters, meetings, bulletin boards and/or intranet.</li> </ul>	Months 8-12	

<p><b>Interim data</b></p> <ul style="list-style-type: none"> <li>• Once accredited, services will be asked to submit interim self review data to demonstrate continued compliance with the standards.</li> <li>• Services will also receive ongoing support with service improvement and will report on progress with any agreed service improvement plans.</li> </ul>	<p>Months 12 - 36</p>	
<p><b>Reviewing another service</b></p> <ul style="list-style-type: none"> <li>• The members of your service nominated to attend other services' peer reviews will be able to select a peer review from a list of options. Please note that we ask your organisation to cover the cost of travel to and from the review.</li> </ul>	<p>As needed</p>	

## Objectives

The purpose of ACOMHS is to improve the care provided by community mental health services in the United Kingdom and Ireland.

It will achieve this by:

- Accrediting community mental health services.
- Creating a national network to support staff through:
  - the ACOMHS peer review process;
  - an email discussion group.
- Maintaining a database of standards for community mental health services.

## Overarching Principles and Standards

The overarching principles of ACOMHS are:

People with mental health problems should receive timely assessment and evidence based treatment which is focused on their individual choice, needs and recovery goals.

People with mental health problems and their carers should receive a service that is person-centred and takes into account their unique and changing personal, psychosocial and physical needs.

The standards and criteria cover the following topics:

- Management systems for the service;
- Staff training and support;
- Assessment, care and treatment of service users;
- Signposting to ongoing care management and follow up;
- Support for carers.

The standards are drawn from a range of authoritative sources (details can be downloaded from our website [www.rcpsych.ac.uk/acomhs](http://www.rcpsych.ac.uk/acomhs)) and also incorporate feedback from service user and carer representatives and experts from a range of relevant professions.

The set of standards is comprehensive and some standards are aspirational; it is unlikely that any service could meet all of them. To support their use in the accreditation process, each standard has been categorised as follows:

- **Type 1:** criteria relating to patient safety, rights, dignity, the law and fundamentals of care, including the provision of evidence-based care and treatment;
- **Type 2:** criteria that a service would be expected to meet;
- **Type 3:** criteria that are desirable for a service to meet, or criteria that are not the direct responsibility of the service.

*Note: In the event that ACOMHS finds evidence that the Trust's (or other organisation's) community mental health service threatens the safety, rights or dignity of patients, the Trust (or other organisation) will be informed, in writing, and is expected to take appropriate action. If the Royal College of Psychiatrists is not satisfied that appropriate action has been taken, it reserves the right to inform those with responsibility for the management of the service and/or the relevant regulatory body.*

The standards have been used to generate a series of data collection tools for use in the self review and peer review processes.

There are several data collection tools because it is important that each standard is evaluated using the most appropriate method(s) and source(s) of information. The methods are described more fully in the section below.

## **The College Website**

Services which are members of ACOMHS will be listed on the Royal College of Psychiatrists website. Once a final accreditation rating has been awarded, this will be posted on the website next to the name of the community mental health service.

## **The Accreditation Process**

The time from registration as a member of ACOMHS to a service's accreditation status being decided will be a minimum of six and nine months (assuming that data is collected and returned within the time frames set out in the diagram on page 3-5). There are three main phases: self review, a peer review visit, and a decision about accreditation status.

## Phase 1: Self review

This is an opportunity for the local multidisciplinary team to review its local procedures and practices against the ACOMHS standards and, if necessary, to make the changes required to achieve accreditation.

At the beginning of the self review period, the service will be sent the relevant copy of the *ACOMHS Standards for Community Mental Health Services* and the self review data collection tools. The latter should be completed and returned within three months.

These audit tools have been developed to support the measurement of adherence to the criteria associated with each standard. They include:

**Workbook:** the service rates itself against each of the standards.

**Service user questionnaire:** a series of questions for people with mental health problems, about different aspects of the services provided by the community mental health service e.g. the assessment process, care and treatment, the provision of information, and choice.

**Carer questionnaire:** a series of questions about carers' experiences of different aspects of the services provided by the community mental health service e.g. the contact with the service, support in the caring role, the provision of information, and choice.

**Staff questionnaire:** a series of questions about community mental health service staff experiences of different aspects of the services provided by the community mental health service e.g. staff support, supervision and training.

**Referrer questionnaire:** a brief series of questions for referrers about different aspects of the referral process and service provision.

**Case note audit:** an audit of a sample of case notes against a checklist of standards.

A summary of the results from the self review will inform discussions at the peer review visit.

## Phase 2: Peer review visit by an external team

The purpose of the one-day visit by a peer review team is to validate the self review findings and to provide a valuable opportunity for discussion, and for the review team members to share ideas, make suggestions, offer advice and give support.

The peer review visit will be scheduled to take place four to eight weeks after the self review data has been returned. Staff from other services participating in ACOMHS will be invited to act as members of peer review teams and will visit a community mental health service from a different Trust. The team will typically consist of four members (two professionals, one service user or carer and a representative from the ACOMHS project team). The team will have undergone specific training at the Royal College of Psychiatrists' Centre for Quality Improvement.

Only one peer review visit will normally be made to the service during the three year cycle. If a further visit is required because it is identified that the service poses a threat to patient/staff safety, the re-visit will be charged at the rate of £600 +VAT per day.

Review visits which are cancelled by the service will also incur a charge of £600 +VAT per day. Review visits which are cancelled by the ACOMHS Project Team, or for reasons beyond the control of the service, will not incur a charge.

Two further data collection tools are used at peer review visits:

- **Peer review carer questionnaire**
- **Peer review service user questionnaire**

Following the peer review visit, teams can expect to receive their draft report within 2 weeks. Teams will then have 30 days to comment on the report before it is submitted for an accreditation decision.

### **Phase 3: Accreditation decision**

Data from the self review and peer review will be compiled by the ACOMHS project team into a summary report of the service's strengths and areas for improvement. Once this has been verified by the review team who visited the service, the ACOMHS *Accreditation Committee (AC)* will consider the data and decide an accreditation status for the service. The AC acts as part of the Combined Committee for Accreditation; this Committee has an overall Chair who assures governance and consistency across those projects measuring the quality of services which are managed by the College.

There are three categories of accreditation status:

- **Category 1: "accredited"**.  
The service would *at the point of the AC meeting*:
  - meet all Type 1 standards;
  - meet 80% of Type 2 standards;
  - meet 60% of Type 3 standards.

Accreditation at Category 1 is valid for up to three years, subject to satisfactory completion of interim review.

- **Category 2: "accreditation deferred".**

The service would *at the point of the AC meeting*:

- fail to meet one or more Type 1 standards but demonstrate the capacity to meet these within a short time;
- fail to meet 80% of Type 2 standards and/or 60% of Type 3 standards but demonstrate the capacity to meet sufficient standards within a short time.

The service would receive a report detailing the strengths and weaknesses that had been identified, with an emphasis on those standards that need to be addressed for accreditation to be awarded. Data would be collected within a three or six-month period to confirm that the service now meets the criteria for Category 1 approval.

- **Category 3: "not accredited".**

The service would *at the point of the AC meeting*:

- fail to meet one or more Type 1 standard and not demonstrate the capacity to meet these within a short time;
- fail to meet 80% of Type 2 standards and/or 60% of Type 3 standards and not demonstrate the capacity to meet sufficient standards within a short time.

The service would receive a report detailing the strengths and weaknesses that have been identified and a clear statement of which standards have to be met for the service to be approved.

Services which fail to submit adequate self review data may also be considered for Category 3.

## **Final report and accreditation certificate**

Once a service has been accredited, a final bound report (including an action planning template) and an accreditation certificate will be sent to the service, and their accreditation will be listed on the Royal College of Psychiatrists' website.

Accreditation certificates are issued for three years and are valid for the whole period, unless the service fails to submit a satisfactory interim questionnaire. Please see the section 'Interim Questionnaire' for more information.

The service will be recorded as accredited for three years from the date of the first available Accreditation Committee meeting. The service is required to

begin review six to nine months before the end of their accreditation period, in order to ensure their accreditation does not lapse.

## **Appeals process**

One or more of the following shall constitute grounds for an appeal under the appeal procedure:

- There is evidence of an administrative irregularity or procedural failure and the service believes that, were it not for that irregularity or failure, the accreditation decision would have been different
- The service believes it is meeting standards which the accreditation committee has judged to be not met and which, if they were deemed to be met, would affect the level of accreditation

An appeal must be lodged in writing to the ACOMHS Programme Manager within eight weeks of the accreditation decision having been communicated to the local ACOMHS lead. Appellants are asked to provide documentary evidence to support their claims. A detailed description of the stages of the appeals process is available on request.

## **Activities and Support during a Service's Accredited Period**

### **Interim review**

The purpose of the interim review is to ascertain whether the service has undergone any significant changes since initial accreditation.

Services will also be asked to provide an update on their progress in achieving the targets outlined in their ACOMHS action plans, which should have been completed following initial accreditation.

### **Standards revision**

ACOMHS will undertake a regular revision and update of standards to take account of new developments. Once the updated standards have been published, all member services will be informed. Services are assessed against the set of standards that were in place when they commenced their self review until the point of accreditation. Subsequent interim reviews are based on whichever set of standards is currently in place.

### **Email discussion groups**

Throughout the period of accreditation, service staff will have access to advice and support from the Royal College of Psychiatrists and other members of

ACOMHS through the email discussion group. Any member of staff from a member service can sign up to the ACOMHS email discussion group by emailing 'JOIN' to [ACOMHS-Chat@rcpsych.ac.uk](mailto:ACOMHS-Chat@rcpsych.ac.uk).

Further information can also be found at [www.rcpsych.ac.uk/acomhs](http://www.rcpsych.ac.uk/acomhs).

## **How Can You Become More Involved?**

### **Join a peer review team**

It is expected that staff from participating services and local service users and carers will visit other services as review team members. This will normally involve spending a day at a service and commenting on a draft of the service's report. Travel and – where necessary – accommodation expenses for service users and carers will be reimbursed in accordance with the Royal College of Psychiatrists' policy. Professionals employed by the NHS or a private organisation should ask their Trust/organisation to costs of their travel.

In order to become a reviewer, staff, service users and carers must attend a reviewer training day. These take place at least twice a year, with dates advertised via email.

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