



Glossary and FAQs



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1 What is accreditation?

The accreditation system is designed to incorporate, evaluate and promote the particular ethos, qualities and added value that the sector can bring to service provision. Its purpose is to:

- Assess organisations for 'fitness for purpose' and inclusion on the Register of Approved Providers;
- Assist organisations in checking that appropriate standards are in place and in identifying areas for improvement;
- Identify examples of good practice which could usefully be shared across the sector.

The accreditation process recognises that all organisations are different and is not seeking to set organisations up to 'fail'. The process seeks to recognise what is good enough and to offer support and repeat opportunities for organisations to demonstrate that they are fundamentally fit for purpose.

Accreditation should be an encouraging, worthwhile and rewarding experience and should really make a difference. Successful completion should enhance the credibility of organisations, recognise their success, and pave the way for opportunities to build on their achievements to develop and deliver more and better services, if they wish to do so.

Accreditation will normally last for a period of three years. Organisations wishing to maintain their position on the Register will be reassessed within three years of the date of first/most recent registration.

2 Why do we need it?

The stage is set for the third sector to have a greater role in public service delivery. Many organisations want to be part of this new agenda and they want to participate on terms which promote the distinctive ethos and style of the sector and which strengthen the sector. They also recognise that contracts to deliver services will be earned on merit and that these contracts are likely to carry greater regulation and inspection.

acquA is a bold step in self regulation, establishing a hallmark of good practice that will enable organisations to demonstrate their fitness for purpose for service delivery. It promotes professionalism through the setting of standards within a framework that combines learning and improvement with rigorous objective assessment.

As well as enabling providers to demonstrate that they are 'fit for purpose' to deliver services and how they add value to the service, acquA is welcomed and supported by funders and commissioners who will have a pool of strongly performing preferred providers from which to procure services.

3 What is the Register of Approved Providers?

A key function of The Alliance is to establish and maintain a Register of Approved Providers (RAP) of health and social care services in the voluntary and community and not for profit sector in Herefordshire. The establishment of the Register is at the heart of a five year change programme and is a new undertaking for The Alliance. Inclusion on the Register is one of the benefits of full membership of The Alliance.

Some of the benefits of being on the Register include:

- early notification of new service opportunities;
- a stronger voice for providers;
- the sector being in a position to take on more services;
- more streamlined processes for accessing funding.

4 Who is this register for?

The Register is open to voluntary, community and not for profit organisations which are providing health and social care services in Herefordshire, however they are funded, and which are full members of The Alliance i.e. have successfully completed accreditation. (see also question 5 below)

Organisations may apply for accreditation as and when they are ready to do so in readiness for the Register of Approved Providers coming into effect in April 2007. In order to access the full range of help available until August 2006, prospective full members are strongly recommended to commence the process as soon as possible.

In the future the accreditation process is likely to be essential for a wider section of the voluntary, community and not-for-profit sector in Herefordshire.

5 How do I get on the Register?

By successfully completing the accreditation process and becoming a full member of The Alliance. Full membership of The Alliance will be subject to accreditation, not automatic, and will be reviewed on a regular basis. During 2006/7 some Supporting People and CSCI registered organisations are exempt from accreditation. See Procedure and Guidance Notes section 3.4 for details.

6 What happens if I am not on the Register of Approved Providers?

From April 2007, all voluntary, community, and not for profit organisations funded by Herefordshire Primary Care Trust, Herefordshire Council's Directorate of Adult and Community Services, and Herefordshire Council's Children's Services Directorate, to deliver health and social care services, whether by grant or under contract, will be required to be on the Register of Approved Providers. If you are not on the Register of Approved Providers this may affect your eligibility to tender for contracts with Herefordshire Council or the Primary Care Trust.

7 Who is involved in delivering the process?

The Alliance Accreditation Team is leading the work. A team of seven out-of-county Assessors has been contracted, all with wide experience of working in the voluntary sector and in organisational development and performance improvement. Assessors will undertake diagnostic visits and formal assessments, and will report to an Accreditation Panel.

The Accreditation Panel has been appointed by The Alliance Board and comprises individuals with wide experience of working within the sector; commissioning services, quality systems, and/or assessment and regulatory frameworks. The Panel's role is to ensure that the accreditation process is fair, valid and reliable. The Panel will report to The Alliance Board with recommendations on accreditation for full membership and Approved Provider registration.

Team biographies are available from the Team Administrator or from The Alliance website (www.allianceherefordshire.org.uk).

8 When will the process start?

The assessment period will run from March 2006 with the aim of completing the majority by August 2006. The investment of Change-Up funds has provided additional capacity to accelerate the accreditation process and the establishment of the Register of Approved Providers during this period.

9 Will there be time for me to gain accreditation before contracts for 2007 are awarded?

The Accreditation Team is in place and it is anticipated that the majority of organisations applying to start the acquA process can be assessed by August 2006. The number of organisations successfully completing the process will be dependent on individual circumstances.

10 What support is available to organisations?

An Accreditation Broker has been recruited to provide independent practical assistance to members of The Alliance working towards accreditation. The Broker will facilitate access to resources and training opportunities, will signpost organisations to sources of specific help and advice, and broker the sharing of good practice.

The accreditation is designed to be a positive and supportive experience. The Alliance recognises, though, that for some organisations there will be questions and perhaps some concerns and anxieties about accreditation.

Organisations awaiting assessment will also want to carry out preparatory work and The Alliance will do all it can to provide information, time for preparation and practical support.

Organisations can use the diagnostic interview to check how well they are doing, to identify any improvements required and to agree a timeframe for this with the benefit of an experienced Assessor to talk this through with them prior to the formal assessment visit.

A Members' Development Fund has been set up to provide resources for organisations to undertake necessary development to achieve the accreditation and for The Alliance to arrange events on specific topics for groups of members.

11 What sort of documentary evidence will be needed for the accreditation process?

Assessors will be looking for a combination of documentary and oral evidence. Some documentation is essential and details can be found in the Assessment Registration Form. Assessors will also want to meet with a range of people in the organisation, agreed in advance, in order to understand what the documentary evidence means in practice and to form a full picture of the organisation.

12 Why do I have to submit the records of board meetings?

These are requested because they provide information about critical areas of the accreditation framework. These not only indicate the nature of governance and management within an organisation but also provide evidence relating to other units such as finance, leadership, policy and planning, looking outwards. The Assessor will read these as part of the desktop review and will learn about how your organisation is run e.g. sub-committee structure if applicable, delegated powers, attendance at board meetings, proceedings at the Annual General Meeting etc.

The Assessor will also gain insight into issues and decisions which have affected your organisation over the past twelve months, which in turn helps the organisation to demonstrate how it is fit for purpose. If any organisation finds that the minutes of board meetings cannot be provided (e.g. for reasons of confidentiality) this should be discussed with the Accreditation Team Manager.

If you are subject to a Charity Commission review visit you will be asked to submit copies of your last four board meeting minutes and last two AGM minutes.

13 Why is there so much paperwork involved in the accreditation?

Every effort has been made to keep the paperwork to a minimum. In order to have a robust, reliable, fair and valid process a certain amount of paperwork is inevitable. The system will be kept under review and adapted in the light of experience.

14 How can I be confident that the information I send in will be treated in confidence?

The accreditation process includes a confidentiality protocol which outlines the controls in place to ensure the confidentiality of information. Independent Assessors from outside the county have been recruited to minimise the risk of conflicts of interest. Organisations undergoing assessment are also asked to commit to the maintenance of confidentiality.

15 Why do you want to tape the assessment visit?

There are a number of reasons for this:

- for an Assessor or the organisation to refer back to in order to ensure accuracy;
- to provide an effective audit trail for the information gathered;
- to reduce the burden of note taking during a visit, thereby allowing a more direct dialogue between the Assessor and representatives of the organisation.

Organisations are not obliged to agree to this. The decision about the use of tape recording will be made during the diagnostic visit, in discussion with the Assessor.

16 Why do we need another quality system? How does this fit in with other quality assurance systems like Community Legal Services Framework, Quality Counts etc?

The Alliance accreditation is not intended to duplicate effort and is designed to take account of quality assurance frameworks in a fair and demonstrable way. It allows an organisation to present evidence already gathered as part of other quality inspections and to discuss their approach to quality assurance and continuous improvement with the Assessor.

Most systems do not fully cover all of the seven units of The Alliance accreditation e.g. Investors in People would not cover the Finance unit. Not all are externally assessed e.g. PQASSO is self-assessed and is an excellent tool for continuous improvement over a period of time, but it is not interchangeable with an external assessment.

17 What is 'passporting'?

Some organisations will have recognised quality systems already in place such as Investors in People or Quality Counts. Assessors will use the principle of 'passporting' so that organisations can present any evidence or data previously provided to other parties in order to show how they meet any of The Alliance standards.

Passporting does **not** mean that by showing a certificate the Assessor will automatically omit units or criteria within the assessment tool, but it will mean that organisations can show evidence already gathered and gain the benefit of work already undertaken (i.e. as with Accreditation of Prior Learning). These areas will form the basis of detailed discussion at the diagnostic meeting, and the scope of the assessment will be advised by the Assessor.

Organisations that have achieved Level C and above under the Herefordshire Supporting People programme will be counted as complying with The Alliance accreditation in 2006/7, where this covers all of the activities and services they deliver.

Similarly, organisations that have completed a successful Commission for Social Care Inspection (CSCI) for provision of residential care homes or domiciliary services will be counted as complying with The Alliance accreditation during 2006/7, where this covers all of the activities and services they deliver.

This does not preclude these organisations from undertaking The Alliance accreditation if they choose to do so. Indeed, providers are actively encouraged to participate so that their experience can inform a review which will take place later in 2006/7, when the relative scope and content of each of the accreditation systems will be compared.

Some Supporting People organisations and those providing residential care and/or domiciliary services will deliver services which are outside the Supporting People programme and the scope of the Commission for Social Care Inspection. Where these services form a significant proportion of an organisation's activity, those organisations will need to be accredited through The Alliance in order to become full members of The Alliance and be included on the Register of Approved Providers.

18 What if I want to make a complaint?

The Alliance welcomes feedback on its activities. Comments including compliments and concerns can be registered as well as formal complaints. A lot depends on the nature and seriousness of the complaint, but generally any complaint should first be brought to the attention of the Accreditation Team Manager, so that we can try to resolve matters as quickly as possible. A copy of the feedback policy is included at Appendix F within the Procedure and Guidance Notes.

19 What if we disagree with the Assessor's report and/or recommendation to the Panel?

The Accreditation Panel is responsible for overseeing, quality assuring and ensuring consistency in the accreditation process. The Panel will handle any appeals against assessment findings or complaints about the Accreditation process. Appeals may be made about the process or results of assessment. In handling appeals, the Accreditation Panel may interview the assessor and review the evidence collated by him/her, and/or may commission a second assessment. A copy of the appeals procedure is included at Appendix E within the Procedure and Guidance Notes.

20 How will the accreditation process be reviewed (evaluated) to ensure it is working properly?

The Accreditation Panel is responsible for overseeing, quality assuring and ensuring consistency in the accreditation process. The Panel will carry out this responsibility by considering and moderating all assessment reports.

The Panel will also review all evaluation forms about the assessment process and review the accreditation procedure in the light of experience. All assessed organisations will be invited to complete an evaluation form. Assessors will also complete an evaluation form. These evaluations will be analysed and the results reported regularly to The Alliance Board.

21 How will Alliance Board members avoid a conflict of interest?

Board Directors will not be involved in direct decisions regarding the accreditation of individual organisations. The role of the Board is to appoint and oversee the work of the Accreditation Panel and to ensure that the Panel operates fairly and with integrity. Reports made by the Accreditation Panel to the Board will give the name of the organisation and the recommendation only. Board members will not have access to any detailed information gathered during the accreditation process. Summary anonymised data will be provided to show overall progress, distribution and trends.

22 Will there be a charge for accreditation?

There is no charge for accreditation. A membership fee will be levied by The Alliance when an organisation achieves full membership, according to a sliding scale based on the annual turnover of the organisation. Membership fees are reviewed annually. They provide a fund administered by The Alliance for members' development and services for members.

23 Can the costs associated with this be charged to funders and commissioners of services?

When organisations bid for contracts with funders their costings should be based on full cost recovery. This will ensure that all legitimate overhead and running costs are taken into account, including any costs arising from the accreditation, registration and inspection.

24 How often will we need to be re-assessed?

Accreditation is valid for a period of three years. Organisations wishing to remain full members of The Alliance and be included on the Register of Approved Providers will be reassessed within three years of their last registration date.

25 Can I apply to the Members' Development Fund?

Yes, the Members' Development Fund is a resource available to all organisations who are applying for full membership. Details of eligible activity and how to apply will be provided subject to final approval in April 2006.

26 How can we undertake this when all our staff are unpaid volunteers and there is not anyone with time or knowledge to do this?

The information required for the accreditation process should be readily available in all organisations. The process has been designed to be as light touch as possible but it is acknowledged that some additional work will be inevitable. Assessors will discuss with you at the diagnostic visit how the assessment can be carried out in a way that is proportionate and appropriate to the scale, scope and style of your organisation. It is intended that this work should have positive benefits for all participants by clarifying and developing organisational good practice.

27 How can I be sure that funders are going to abide by the decisions of the Accreditation Panel when they award contracts?

The accreditation has been drawn up in consultation with the principal funders and commissioners of services in Herefordshire. The Alliance will continue to work with these bodies to ensure the effective and consistent operation of the process.

28 Why are the funders making voluntary organisations go through all this? Private sector providers do not have to.

The accreditation is not being imposed by funders. The impetus for the introduction of an accreditation process has come from voluntary sector organisations that wish to have a method by which they can demonstrate their fitness for purpose to deliver services. Funders in the area have welcomed this development and have worked with The Alliance to develop the process so that it meets their needs as well. As a result, funders and voluntary, community and not-for-profit providers together should be in a position to demonstrate to central government that the sector is in a strong position to deliver effective services.

Glossary

Accreditation

A process leading to certification confirming that identified standards and criteria are met, usually carried out by an external body.

Accreditation Broker

The person appointed to provide independent support to organisations going through the accreditation process.

Accreditation Panel

The Accreditation Panel has been appointed by the Board of The Alliance to adjudicate on applications for accreditation under The Alliance's accreditation scheme for third sector organisations providing services in the field of health and social care. It carries out its activities in objectively scrutinising and making decisions on applications based on the recommendations of the Assessors and at arms length from the Board. It reports its decisions to the Board for ratification.

Aim

An aim tells everyone why the organisation or service exists and the difference it wants to make.

Assessed need

A health and/or social care need which has been recognised and defined by a suitably qualified health/social care professional using a nationally recognised and accredited assessment tool.

Assessment visit

The formal visit by an Assessor to an organisation to review its operation and to gather the necessary information from which to compile the assessment report and recommendation to the Accreditation Panel.

Assessor

The person appointed to undertake the accreditation assessment process on behalf of The Alliance. An Assessor will be allocated to an organisation undergoing accreditation and will be the Assessor throughout the process.

Benchmarks

A comparison of activities or results (performance) against those already achieved by your organisation or by another organisation.

Business Plan

A detailed plan showing how an organisation will manage and secure the resources in order to achieve its strategic aims.

Charity Commission

The Charity Commission is established by law as the regulator and registrar for charities in England and Wales. It aims to provide the best possible regulation of charities in England and Wales in order to increase charities' effectiveness and public confidence and trust.

Chief Officer

The most senior member of staff responsible for managing the delivery of the organisation's activities. Variously called Chief Executive; Manager; Director; Coordinator.

Client

The person or group receiving a particular service.

Commissioner

The organisation or person seeking to obtain specified services.

Company Secretary

The Company Secretary is the chief administrator for a company. All private and charitable companies limited by guarantee must have a Company Secretary. (S)he normally takes charge of ensuring that any documents which need to be sent to Companies House are sent on time. The Company Secretary is an officer of the company.

Desktop review

The consideration of documentation submitted by an organisation to their Assessor prior to the diagnostic visit. This enables the Assessor to establish whether the documentation provided meets the relevant criteria, identify the range of personnel to be interviewed in due course during the assessment visit, and identify any areas to be explored further during the diagnostic and/or assessment visits.

Diagnostic visit

The initial visit by the Assessor to an organisation for a semi-structured interview in order to review the initial self assessment made by the organisation and agree a time frame for the full assessment visit.

Director

The term is used to refer to a member of the management committee, board of directors or board of trustees. Directors are responsible for ensuring that an organisation is properly governed and managed. Company Directors have specific responsibilities to ensure that statutory documents such as accounts and annual returns are delivered to the regulatory authorities.

Effective

Having the results or effect that you want; producing the intended benefits.

Efficient

Producing the intended results with the minimum necessary resources.

Ethical

Acting in accordance with identified moral principles.

Evaluation

A process of making judgements on how an organisation or service is doing, assessed against agreed criteria.

Fit for Purpose

An organisation which is 'fit for purpose' can demonstrate that it has appropriate structures, policies and procedures in place to ensure the safe delivery of its current and future services to a good standard.

Full Cost Recovery

The inclusion of the relevant part of overhead costs as part of the total cost of delivering a service.

Funder

A person or organisation providing finance for a service or activity.

Fundraising

Specific licensed activity such as a street collection or event to attract donations.

Good Practice

Methods and procedures which work and are appropriate for the sector. These are normally based on shared knowledge and experience, expert advice or on the recommendations of regulators. This is sometimes referred to as 'best practice'. For the purposes of accreditation, the term 'good practice' is used throughout the documentation.

Governance

The way in which an organisation understands its responsibilities, manages itself effectively, adopts safe and legal practice and is properly accountable.

Governing Body

The management committee of the organisation. For a registered charity this is the Board of Trustees. For a limited company or charitable company this is the Board of Directors.

Governing Document

The legal document defining the legal status of the organisation. For a company it will be a Memorandum and Articles of Association; for an unincorporated Association, it is likely to be a constitution or rules; for a Trust it will be a trust deed (sometimes called a declaration of trust).

Impact

Impact refers to longer term and/or wider ranging effects or changes e.g. longer term effects on users, effects on society as a whole.

Income

Resources and assets received by an organisation.

Input

The resources and activities that an organisation uses to create the services offered.

IT / ICT

Information Technology and Information and Communication Technology, refers to all hardware, software and related systems including the internet.

Mission

Statement of the purpose of an organisation, normally including its overall aims and values.

Networks

Groups of people or organisations who interact with each other.

Objectives

The practical steps to be taken to achieve an organisation's aims.

Outcome

Outcomes are the effects of your activities on your users or other stakeholders i.e. the changes brought about by your activities.

Output

Outputs refer to the volume and range of products/services delivered by your organisation and the number of people using them.

Partnership

An arrangement between individuals or organisations to enable them to work together.

Performance

This refers to both the accomplishments of an organisation and to the way it functions. Performance can usually be measured where targets and outputs have been set. Organisational performance can also be compared with other similar organisations (bench-marking). See also Benchmarks.

Plan

A description of how an organisation will achieve certain things.

Policy

A statement of how an organisation will deal with specific issues.

Procedure

A written description of how things are done.

Process

A series of actions that are carried out to achieve a specific result.

Procurement

The process whereby funders secure services.

Project

A significant task involving activities and resources that require co-ordination and control, usually time limited, often to pilot or test a new way of working.

Purchaser

A person or organisation who procures and pays for specific services

Recognised Need

An identified gap in provision of service for an individual, group or community, for which there is some evidence.

Resources

A stock or supply of materials or assets (including financial, human, intellectual) that can be drawn on in order to function effectively.

Services

The activities undertaken and resources provided for users and delivered for purchasers, including projects, contracts, service level agreements and grant-aided work.

Service user

The person who uses the products/services of an organisation.

SORP

Statement of Recommended Practice on Accounting by Charities.

Stakeholder

Anyone who has an interest in the activities of an organisation, including service users, funders, staff, volunteers, supporters etc.

Standard

An agreed level against which an activity or service is measured.

Supplier

Anyone who provides goods or services to an organisation.

Target

Something to aim for that will produce a measurable result.

Trading

The delivery of goods or services in return for some form of payment.

Trend

A change over time.

Trustee

A person responsible for overseeing the management of charity. Can also be called by different names according to the legal status of the charity and its Governing Document. Common examples include 'Director' (of a charitable company); 'Member of the Management Committee'; 'Member of the Council of Management'; 'Executive Committee Member'.

User

A person who uses the services of an organisation, including clients, participants, beneficiaries, casual callers and referring agencies (but **not** commissioners of services or funders).

Values

Guiding principles and beliefs about how something should be done.

Vision

An image of what the future could be like; an aspiration for how an organisation can achieve its mission.

Some glossary definitions are drawn from other sources and publications including those of Charities Evaluation Services, Charities Aid Foundation and the Charity Commission.

Notes

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1st Edition

Disclaimer

Organisations applying for full membership of The Alliance agree to abide by the acquA procedure and the decision of the Accreditation Panel.

The Alliance is a support organisation which encourages collaborative working between organisations. Advice and guidance will be given to organisations seeking to improve their effectiveness in order to gain full membership and inclusion on the Register of Approved Providers. The Alliance accepts no responsibility or liability for any loss, damage or costs, howsoever arising, whether directly or indirectly, as a result of actions and decisions taken (or not taken) by any person or organisation, arising from the accreditation process.

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Trademark

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The Alliance Herefordshire:

- Provides structured third sector input into the strategic planning and joint commissioning of services
- Maintains the Register of Approved Providers (RAP) of services
- Develops the Compact in health and social care and its associated Codes of Good Practice



Working collaboratively for improved health and care services in Herefordshire

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