

recovery. choice. hope. meaning. goals. abilities. identity.

# Psychosocial Rehabilitation Support Services Standards

quality of life. life journey. achievement. support. belonging.

Self Assessment



# **Guidelines for Completing the Self Assessment**

### Introduction

In 2005 the Mental Health Unit of the Department of Health commissioned Quality Management Services (QMS) to develop standards for psychosocial rehabilitation support services in South Australia. These standards are of one of a series of sector development strategies in mental health reform, aimed at developing a recovery-focused service system. Based on a Continuous Quality Improvement (CQI) approach, the Standards will be an important tool in promoting and monitoring the progress of reform at both the individual service and sector level perspective.

The Standards aim to capture the perspectives and experiences of both consumers and service providers. The Standards reflect the themes of the National Mental Health Standards and the principles of psychosocial rehabilitation support services in South Australia. They recognise that whilst consumers and service providers may define things differently, the focus is on a partnership model of recovery oriented psychosocial rehabilitation support. Common themes for service providers under this model include hope, recovery, personal responsibility, self advocacy, personal and social support.

More information on the background to the Standards and a full list of the principles can be found in the *Psychosocial Rehabilitation Support Service Standards (PRSSS)*. It is recommended that you complete the Self Assessment Tool in conjunction with the PRSSS.

### An overview of the Self Assessment Tool

The monitoring process for the Psychosocial Rehabilitation Support Service Standards includes both internal and external review.

The Self Assessment Tool (SAT) guides the service provider's internal review of their service. Self assessment may also include internal audits, staff, consumer and stakeholder surveys or forums and other processes which encourage critical reflection. An external review may involve a review team examining key service documentation such as annual reports, strategic and business plans, organisational charts, the SAT and any evidence which is referred to. This would also involve a range of interviews with groups such as consumers, staff and volunteers, management and stakeholders.

The SAT is designed to assist service providers to record what they do in order to meet a Standard (ie their systems), and to identify what evidence they have to show the systems are in place and working. The SAT also helps to give the Review Team an understanding of a service and how it operates.

The SAT also asks you to rate your service against each Standard. This is important information for a review team. If the rating differs from the service provider's rating, it acts as a flag for the Review Team to explore this further with the service provider. A difference in ratings may indicate that the service provider is not clear about the requirements or may not have provided the appropriate evidence to the review team.

# Ratings and the Self Assessment

The ratings in the SAT occur on two levels:

- 1. Meeting each indicator if the service has an effective system in place that is described, and evidence confirms this, then the indicator is considered met. Both the service and the review team rate each indicator at the bottom of the standard.
- 2. Rating the standard the standard is considered:

**Met** – if all indicators are met.

Met in Part - if any one indicator is not met.

Not Met - if two or more indicators are not met.

# How to complete the SAT

# Step 1 - Cover Sheet

Complete the Self Assessment Cover Sheet on page 9 and insert the name of the Broader Organisation in the footer.

# **Step 2 – Collaborative Assessment**

Decide how your service would like to complete the SAT. A collaborative approach is encouraged, for example, you may form a number of working groups of staff and consumers who work together to complete the SAT. Responsibility may be shared between senior managers / team leaders or you may have a staff member assigned to coordinate the self assessment process.

# Step 3 – Describe how you have met the Standards

Using the Psychosocial Rehabilitation Support Service Standards (PRSSS) describe how you address each system indicator, making sure that your answer relates to the overall standard description and the Key Elements embedded within it. Limit your description to 200 words per system indicator. Both the SAT and the PRSSS include notes and examples and further information to assist you.

# Step 4 – Provide Evidence

Document sources of evidence to show that systems are in place and are working effectively. Evidence might include your strategic or business plan, consumer file notes, newsletters, policies etc. The information and examples in the SAT and the PRSSS will help.

# Step 5 – Reviewing your System

For each of the System Indicators, report on "System Indicator Met: Yes / No" and "All Key Elements Addressed: Yes / No". You are only required to give a yes or no response – additional information is not necessary as information relevant to your response will be found in your system descriptions and evidence preceding this.

# **Step 6 – Ongoing Improvement**

Record future improvements that you recognise are required to address gaps in your system or processes in the section "Areas for Improvement".

# Step 7 - Self Rating

Using the ratings information on page 4, rate your service for each Standard once you have completed the self assessment against each Standard.

# **Further Information**

For further information, definitions of key terms and how to understand the PRSSS and the principles underpinning them, please refer to the document Psychosocial Rehabilitation Support Service Standards.

# **Example of completed Self Assessment**

STANDARD 2: RIGHTS AND RESPONSIBILITIES The Psychosocial Rehabilitation Support Service upholds the rights and responsibilities of consumers, carers and the community			
Key Elements			
<ul> <li>Respect</li> <li>Privacy</li> <li>Confidentiality</li> <li>Informed consent</li> <li>Use and Access to Personal Information</li> </ul>	<ul><li>Complaints</li><li>Advocacy</li><li>Refusal of Tre</li><li>Participation</li></ul>	eatment	
Self Assessment Rating against the above standard:	MET □	MET IN PART □	NOT MET □
SYSTEM DESCRIPTION		EV	/IDENCE
2.1 Policies and procedures are in place to ensure that consu	umers are informed ab	out their rights and responsibilities inclu	ding privacy, confidentiality and complaints.
How do you address this indicator?		List your evidence relating to this indic	cator
The service has a policy (and plain English version) on consuresponsibilities. When consumers commence with the service with a copy of the rights and responsibilities in the consumer also discussed verbally on commencement and this is noted form. Consumers are periodically reminded through newslett reassessment. Consumers have access to an interpreter who consumer booklet has been translated into six local commun	e they are provided booklet. These are on the assessment ers and at ere required and the	<ul> <li>Policy Manual/Intranet</li> <li>Copy of booklet in multiple lar</li> <li>Assessment form</li> <li>Newsletters</li> <li>Consumer files and database</li> </ul>	nguages

**2.2** Responsibility is delegated for upholding the rights and responsibilities of consumers, carers and the community and for managing privacy and complaints processes.

How do you address this indicator?

Policy on consumer rights and responsibilities includes who is responsible for upholding and promoting them. This is also reflected in job descriptions. Strategic and operational planning includes reference to rights and responsibilities and assigns responsibility for actions etc. The rights and responsibilities posters in the offices include who is responsible for them. The service has a consumer and carer forum which can look at the rights and responsibilities, as can the BoM

List your evidence relating to this indicator

- Policy manual/intranet
- Job descriptions
- Minutes/notes of planning sessions
- Strategic and operational plans
- Posters
- ToR for consumer and carer forum
- BoM agendas and minutes

System Indicator Met: Y/N

All Key Elements Addressed: Y/N

**2.3** Staff have knowledge and comply with policies and procedures, relevant legislation, regulations and guidelines in relation to the rights and responsibilities of consumers, families and carers.

How do you address this indicator?

Consumer rights and responsibilities are included in the staff orientation. Copies of the rights and responsibilities are also on posters in all offices. Staff job descriptions make reference to upholding and promoting the rights and responsibilities of consumers. Staff participated in training with two other local providers on consumer rights and responsibilities and duty of care.

List your evidence relating to this indicator

- Staff orientation checklist and folder
- Rights and responsibilities posters
- Job descriptions and staff files
- Training flier and training records

System Indicator Met: Y/N

All Key Elements Addressed: Y/N

**2.4** The rights and responsibilities of the consumer are integral to service provision

How do you address this indicator?

Consumer rights and responsibilities are included in a range of publications, eg with the values and mission statement in service brochures, strategic and operational plans. Planning includes any developments required to implement or promote rights and responsibilities – eg improving access to services. Rights and responsibilities are also included in individual plans and where appropriate link to a goal. The "Mental Health Statements of Rights and Responsibilities" publication was used as the basis for a local community forum to promote the service – focus on community rights and responsibilities.

List your evidence relating to this indicator

- Service brochures
- Strategic and operational plans
- Individual plans
- Community forum on rights and responsibilities flier and minutes

System Indicator Met: Y/N

All Key Elements Addressed: Y/N

# **2.5** The service monitors its performance of the above indicators and uses data collected to improve its performance (CQI indicator)

How do you address this indicator?

The service does an annual survey of consumers, which asks them about their rights and responsibilities, and there is a complaints system. Where these identify trends or gaps, the issue is referred to the consumer and carer forum and is reported to the BoM.

List your evidence relating to this indicator

- Consumer surveys
- Consumer and carer forum agendas and minutes
- BoM agendas and minutes

System Indicator Met: Y/N

All Key Elements Addressed: Y/N

# **Areas for improvement:**

The rights and responsibilities could be added to the risk management framework

SERVICE NAME	
PROGRAM NAME	
CONTACT NAME	
ADDRESS	
PHONE	
FAX	
EMAIL	
DATE SELF ASSESSMENT COMPLETED	
DATE SELF ASSESSMENT SUBMITTED	
DATE OF EXTERNAL REVIEW	

STANDARD 1: DELIVERY OF SERVICES The psychosocial rehabilitation support service is based on recovery focussed principles and provides accessible and person centred services			
Key Elements			
<ul> <li>Access</li> <li>Person Centred Focus</li> <li>Client Assessment and Review</li> </ul>	<ul><li>Service Plannii</li><li>Service Transii</li><li>Recovery Oriei</li></ul>	tion	
Self Assessment Rating against the above standard:	MET □	MET IN PART □	NOT MET
SYSTEM DESCRIPTION		EVID	PENCE
<b>1.1</b> The service's policies and procedures address access transition; while promoting the least restrictive and intrusive			ent and review, service planning and
Describe your system relating to this indicator		List your evidence relating to this indicat	cor
System Indicator	Met: Y/N	All Key Elements Addressed: Y / I	N
<b>1.2</b> Responsibility is delegated for ensuring the model of se rehabilitation support service.	ervice delivery is compre	hensive and is based on the principles of	a recovery focussed psychosocial
Describe your system relating to this indicator		List your evidence relating to this indicat	cor
System Indicator	Met: Y/N	All Key Elements Addressed: Y / I	N

1.3 Staff have knowledge of the access, referral, assessment, review, service planning and transition processes.		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y/N	All Key Elements Addressed: Y / N	
1.4 The above policies and procedures based on the principles of psychosocial rehabilitation are embedded in the service model and evident in practice.		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
1.5 The service monitors its performance of the indicators and uses data collected	to improve its performance (CQI indicator)	
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y/N	All Key Elements Addressed: Y / N	
Areas for improvement:		

STANDARD 2: RIGHTS AND RESPONSIBILITIES The Psychosocial Rehabilitation Support Service upho Key Elements		onsibilities of consumers, carers and th	ne community
<ul> <li>Respect</li> <li>Privacy</li> <li>Confidentiality</li> <li>Informed Consent</li> <li>Use and Access to Personal Information</li> </ul>	<ul> <li>Complaints</li> <li>Advocacy</li> <li>Refusal of Trea</li> <li>Participation</li> </ul>	atment	
Self Assessment Rating against the above standard:	MET 🗆	MET IN PART □	NOT MET
SYSTEM DESCRIPTION		EVIDI	ENCE
2.1 Policies and procedures are in place to ensure that con	sumers are informed ab	out their rights and responsibilities includin	g privacy, confidentiality and complaints.
Describe your system relating to this indicator		List your evidence relating to this indicate	or
System Indicator	Met: Y/N	All Key Elements Addressed: Y / N	I
<b>2.2</b> Responsibility is delegated for upholding the rights and processes.	responsibilities of consu	mers, carers and the community and for m	nanaging privacy and complaints
Describe your system relating to this indicator		List your evidence relating to this indicate	or
System Indicator	Met: Y/N	All Key Elements Addressed: Y/N	I

2.3 Staff have knowledge and comply with policies and procedures, relevant legislation, regulations and guidelines in relation to the rights and responsibilities of consumers, families and carers.		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
·	·	
2.4 The rights and responsibilities of the consumer are reflected in all aspects of se	rvice provision	
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
2.5 The service monitors its performance of the above indicators and uses data collected to improve its performance (CQI indicator)		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
Areas for improvement:		

STANDARD 3: SAFETY The activities and environment of the Psychosocial Rehabilita community	ation Support Se	rvice are safe for consumers, carers, famili	es, staff, volunteers and the	
<ul> <li>Staff and Volunteer Safety</li> <li>Safety in Mental Health Care</li> <li>Cultural Safety</li> <li>OHS &amp; W Systems</li> </ul>	Partnership wit Prevention of A Safety of Carer			
Self Assessment Rating against the above standard:	MET 🗆	MET IN PART □	NOT MET □	
SYSTEM DESCRIPTION		EVIDENCI	Ε	
3.1 Policies and procedures are in place to ensure a safe environment for consumers, carers, staff and the community				
Describe your system relating to this indicator		List your evidence relating to this indicator		
System Indicator Met: \	Y / N	All Key Elements Addressed: Y / N		
3.2 Responsibility is delegated for providing a safe environment, c	cultural safety and	safe work practices		
Describe your system relating to this indicator		List your evidence relating to this indicator		
System Indicator Met: \	Y / N	All Key Elements Addressed: Y/N		

3.3 Staff and management have knowledge of and comply with relevant safety legislation, regulations and principles and practices		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
<b>3.4</b> Safety of the consumer, staff and the community are reflected in practice.		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
3.5 The service monitors its performance of the above indicators and uses data collected to improve its performance (CQI indicator)		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
Areas for improvement:		

Consumers, carers and the community, where appropring Support Service			ation of the Psychosocial Rehabilitation
Key Elements			
<ul> <li>Consumer Participation in Care</li> <li>Participation in Planning</li> <li>Barriers to Participation</li> </ul>	<ul><li>Advocacy</li><li>Consumer Fee</li></ul>	edback Addressed	
Self Assessment Rating against the above standard:	MET □	MET IN PART □	NOT MET
SYSTEM DESCRIPTION		EVI	DENCE
<b>4.1</b> Policies and procedures relating to the participation of comprehensive and inclusive	consumers, carers and t	he defined community in planning, evalua	ation and service delivery are
Describe your system relating to this indicator		List your evidence relating to this indica	ator
System Indicator	Met: Y/N	All Key Elements Addressed: Y /	N
4.2 Responsibility is delegated for ensuring consumer, care	er and community partici	pation	
Describe your system relating to this indicator		List your evidence relating to this indica	ator
System Indicator	Met: Y/N	All Key Elements Addressed: Y /	N

<b>4.3</b> Staff, consumers, carers and the community have the necessary knowledge t	o maximise participation in planning, evaluation and service delivery
Describe your system relating to this indicator	List your evidence relating to this indicator
System Indicator Met: Y/N	All Key Elements Addressed: Y / N
4.4 Participation of consumers, carers and the defined community is integral to se	ervice provision and development
Describe your system relating to this indicator	List your evidence relating to this indicator
System Indicator Met: Y / N	All Key Elements Addressed: Y / N
4.5 The service monitors its performance of the above indicators and uses data c	ollected to improve its performance (CQI indicator)
Describe your system relating to this indicator	List your evidence relating to this indicator
System Indicator Met: Y/N	All Key Elements Addressed: Y / N
Areas for improvement:	

STANDARD 5: PROMOTION OF POSITIVE MENTAL HEALTH, EARLY INTERVENTION, PREVENTION AND COMMUNITY ACCEPTANCE The Psychosocial Rehabilitation Support Service actively promotes positive mental health, early intervention, prevention and community acceptance of people affected by mental illness resulting in reduced stigma and better recovery outcomes				
Key Elements				
<ul> <li>Collaboration</li> <li>Networking and Partnerships</li> <li>Positive Mental Health</li> </ul>	<ul> <li>Prevention and Early Intervention</li> <li>Community Understanding</li> <li>Reduced Stigma</li> </ul>			
Self Assessment Rating against the above standard:	MET □	MET IN PART □	NOT MET	
SYSTEM DESCRIPTION			EVIDENCE	
<ul> <li>5.1 The service has documented polices and procedures to:</li> <li>promote community acceptance</li> <li>Guide its role in mental health promotion, early intervention and the prevention of mental health problems.</li> </ul>				
Describe your system relating to this indicator		List your evidence relating to this i	ndicator	
System Indicator I	/let: Y/N	All Key Elements Addressed	: Y/N	
<ul> <li>5.2 Responsibility is delegated for:</li> <li>Promoting community understanding of the issues faced by people living with a mental health problem or illness.</li> <li>Ensuring collaborative approaches to promoting improved social and emotional wellbeing and reducing mental health problems/illness.</li> </ul>				
Describe your system relating to this indicator		List your evidence relating to this i	ndicator	
System Indicator M	/let: Y/N	All Key Elements Addressed	: Y/N	

5.3 Staff have knowledge of the issues faced by consumers relating to community acceptance and understand their role in mental health promotion, early intervention and prevention.		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y/N	All Key Elements Addressed: Y / N	
5.4 Community acceptance, mental health promotion, early intervention and prevention of mental health problems are integral to programs and services.		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
5.5 The service monitors its performance of the above indicators and uses data collected to improve its performance (CQI indicator)		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y/N	All Key Elements Addressed: Y / N	
Areas for improvement:		

STANDARD 6: ACCEPTANCE OF DIVERSITY The Psychosocial Rehabilitation Support Service delivers non-discriminatory support that is sensitive to the gender, social and cultural values of the consumer.  Key Elements				
Cultural Competency (CALD & ATSI)     Use of Interpretation	<ul> <li>Special Needs</li> <li>Use of Interpreters</li> <li>Other Communication Aids</li> </ul>			
Self Assessment Rating against the above standard: MET □	MET IN PART □ NOT MET □			
SYSTEM DESCRIPTION	EVIDENCE			
<b>6.1</b> Policies and procedures guide person centred service planning and delivery in relation to the consumer's age, gender, culture, sexual orientation, socioeconomic status, religious beliefs, previous psychiatric diagnosis, past forensic status and physical or other disability.				
Describe your system relating to this indicator	List your evidence relating to this indicator			
System Indicator Met: Y / N	All Key Elements Addressed: Y / N			
6.2 Responsibility is delegated for ensuring that gender, social and cultural values are considered in service planning and delivery				
Describe your system relating to this indicator	List your evidence relating to this indicator			

System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
6.3 Staff and management have a good knowledge of the social and cultural groups represented in the local community and an understanding of the social and historical factors relevant to their current circumstances. They are accepting of diversities in all its forms.		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y/N	All Key Elements Addressed: Y / N	
6.4 Acceptance of diversity is evident in practice.		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Metr. V / N	All Kay Flaments Addressed: V / N	
System Indicator Met: Y / N All Key Elements Addressed: Y / N		
<b>6.5</b> The service monitors its performance of the above indicators and uses data		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
Areas for improvement		
Areas for improvement:		

STANDARD 7: WORKING TOGETHER  Psychosocial Rehabilitation Support Services are coordinated and integrated within a range of services, sectors and key stakeholders to ensure continuity of care for the consumer			
Key Elements			
gonit / topocomont and got from hamming	<ul> <li>Shared Care</li> <li>Networks and Partnerships</li> <li>Links with Acute and Community Services</li> </ul>		
Self Assessment Rating against the above standard:	MET 🗆	MET IN PART □	NOT MET □
SYSTEM DESCRIPTION		EVIDE	NCE
7.1 Policies and procedures guide a collaborative and integrated mental health system.			
Describe your system relating to this indicator		List your evidence relating to this indicato	r
System Indicator Me	t: Y/N	All Key Elements Addressed: Y / N	
7.2 Responsibility is delegated for ensuring the service works with the broader community, other services, the consumer, their carer and family to achieve the consumer's identified goals			
Describe your system relating to this indicator		List your evidence relating to this indicato	r
System Indicator Me	t: Y/N	All Key Elements Addressed: Y/N	

7.3 Staff and consumers are supported to gain knowledge of other health and community service providers or other sectors		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y/N	All Key Elements Addressed: Y / N	
7.4 A collaborative approach is evident in service provision		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
7.5 The service monitors its performance of the above indicators and uses data collected to improve its performance (CQI indicator)		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
Areas for improvement:		

# STANDARD 8: ORGANISATIONAL GOVERNANCE AND MANAGEMENT

The Psychosocial Rehabilitation Support Service has governance, management and human resource development practices that maximise organisational efficiency, transparency and effectiveness in order to ensure accountability and sustainability

# **Key Elements**

- Corporate and Service Governance
- Strategic and Operational Planning
- Risk Management
- Human Resource Management

- Knowledge Management
- Financial Management
- Accountability

Self Assessment Rating against the above standard: MET □	MET IN PART □ NOT MET □	
SYSTEM DESCRIPTION	EVIDENCE	
8.1 Organisational governance and management policies and procedures based on strategic and legislative requirements guide service management.		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
8.2 Responsibility is delegated for ensuring that corporate and service governance meets business and accountability requirements		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	

8.3 Knowledge and skills to competently manage service directions and accountability are ensured.		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
8.4 Organisational governance and management support an effective and efficient service.		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
8.5 The service monitors its performance of the above indicators and uses data collected to improve its performance (CQI indicators)		
Describe your system relating to this indicator	List your evidence relating to this indicator	
System Indicator Met: Y / N	All Key Elements Addressed: Y / N	
Areas for improvement:		