



VICTIMS SUPPORT PROGRAMME

&

PEACE IV

Clinical Governance Framework

G2/VSS

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## 1 Introduction

1.1 The vision of the Victims and Survivors Service (VSS) is ***to improve the health and wellbeing of victims and survivors***. One of the ways we can achieve this is by ensuring the delivery of quality services that meet their needs.

1.2 The VSS Clinical Governance Framework has been established to ensure recognisable and consistent standards apply to the delivery of services to victims and survivors by all organisations funded under the Victims Support Programme (VSP) and PEACE IV Programme. It also provides a framework to promote continuous improvement and to create an environment in which high quality services will flourish with a localised, community and voluntary setting.

The VSS Clinical Governance Framework has been developed to align with the Commission for Victims and Survivors (CVS) *Standards for Services provided to Victims and Survivors* (see **Annex 1**), and should be read in conjunction with that document and other key VSS Guidance Notes referenced below.

## 2 Key Components of Clinical Governance

### 2.1 Risk Management

Risk management involves minimising risks to victims and survivors attending services by:

- identifying what may go wrong when someone is in your service;
- understanding the factors that influence this;
- taking appropriate action in response to issues as they arise;
- learning lessons from any adverse events;
- ensuring action is taken to prevent recurrence; and
- putting systems in place to manage and reduce risks.

### 2.2 Monitoring and Evaluation

Monitoring and evaluating what services we provide measures the quality, impact, and outcomes of the services and support offered to victims and survivors. It allows organisations to assess their current delivery and to identify opportunities for improvement. On that basis, changes can be made, followed by further evaluation to see if these changes have been successful and what additional actions may be required.

Monitoring and evaluation provides an opportunity to collectively learn and develop to ensure we are all providing the best possible services to victims and

survivors. The VSS will require and support organisations to monitor and evaluate the services and support that they deliver, in line with the monitoring and evaluation frameworks that have been agreed at a strategic level. (*Reference: VSS Monitoring & Evaluation Guidance Note*)

As well as monitoring and evaluating interventions at an individual level, the VSS will also provide anonymised qualitative and quantitative data to CVS to inform research projects aimed at better understanding the needs of victims and survivors.

### **2.3 *Education, Training, and Continuing Professional Development***

It is vital that those providing interventions and support to victims and survivors have the knowledge and skills they need. In order to support this capacity and skills development, the VSS will deliver a Workforce Training and Development Programme in response to a Training Needs Analysis for those working with victims and survivors.

This Programme will be funded under PEACE IV and will offer opportunities to learn new skills, to keep up to date with key developments, and to adopt and maintain reflective practice in relation to the work with victims and survivors.

The Programme also provides opportunities for Continuous Professional Development for staff registered with a Professional Body.

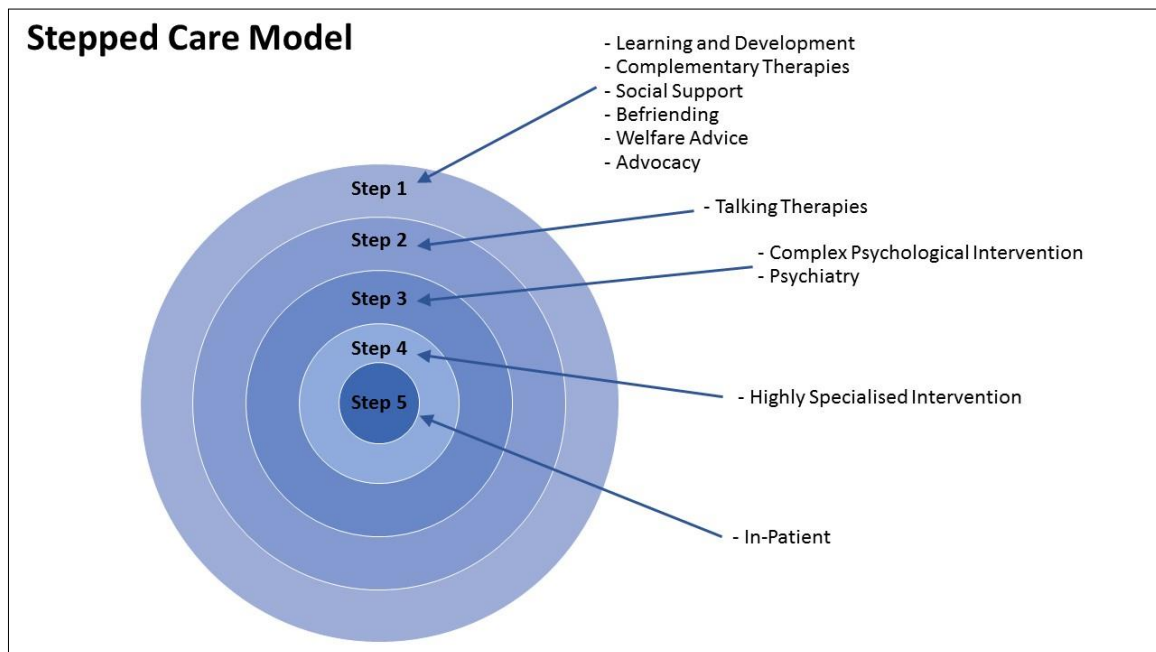
### **2.4 *Effective Practice***

All interventions and support delivered to victims and survivors by VSS-funded organisations should be based on cumulative learning leading to best practice and in line with the Stepped Care Model (see Figure 1 below).

The Stepped Care Model is a holistic approach to co-ordinating and organising support and services for victims and survivors. It supports an approach which recognises and acknowledges the different complexity of need.

The VSS funds Step 1 and Step 2 interventions within the community and voluntary sector and Step 3 interventions where appropriate and where practitioners have the relevant qualification and skills to deliver these.

**Figure 1: Stepped Care Model** (as adapted to illustrate VSS funded services)



## 2.5 ***Experience and Involvement of Victims and Survivors***

To offer the highest quality of services it is important that the VSS and all VSS-funded organisations work in partnership with victims and survivors and their families.

This includes gaining a better understanding of the priorities and concerns of those who use services by involving them in the work, including design of services, policy and planning. (*Reference: VSS Monitoring & Evaluation Guidance Note*)

## 2.6 ***Staffing and Staff Management***

Appropriate staffing and staff management is vital for the provision of high-quality services. This includes the recruitment and retention of skilled staff, working in an efficient team and in a well-supported environment. Where relevant, staff will be required to be registered with a relevant Professional Body. Organisations and individual practitioners must also ensure they have acquired the appropriate relevant indemnity insurance as necessary (for example: professional and public liability, employee liability etc.) (*pg 10. CVS Standards for Services Provided to Victims and Survivors*)

To ensure consistent practice, the VSS Clinical Governance Framework requires all VSS-funded organisations to establish the following policies and procedures as part of their normal operations:

- Safeguarding Adults at Risk
- Child Protection Policy
- Risk Management Policy
- Data Protection Policy
- Social Media Policy
- Lone Worker Policy
- Adverse Incident Policy
- Confidentiality Agreement
- Access NI checks

*This is not an exhaustive list*

## 2.7 **Context – Public Health Agency TAKE 5 Steps to Wellbeing.**

The VSS Clinical Governance Framework takes account of the policy and delivery context within which the VSS and its funded organisations deliver services to victims and survivors.

Belfast Strategic Partnership's Emotional Health and Wellbeing Thematic Group launched the Take 5 steps to wellbeing in January 2015. Now a regional campaign, Take 5 is endorsed by the Bamford monitoring group, all five Health and Social Care Trusts and the Public Health Agency. Take 5 promotes five simple, practical steps help towards improving emotional wellbeing.

The banner below captures these 5 key themes.



### 3 The VSS Clinical Governance Framework

#### 3.1 Risk Management

Taking into account the strategic context and the key components of the VSS Clinical Governance Framework, the following section provides further practical guidance. Practical approaches and processes which should be established are outlined below in order to ensure sound and robust clinical governance.

The CVS standards for services provided to victims and survivors underpins this framework. Both the standards and this framework are intended to be live documents, and updated on a regular basis depending on current best practice and practical learning.

CVS Standards for Services provided to Victims and Survivors		VSS Implementation	
REF	Standard	Action/ Implementation	Monitoring and Evaluation
C1.2 C3.2, C3.5, C3.6 C5.8 C8.4 C9.6,C9.7 C9.8 C10.6 C11.2	<p>Personnel are aware of the risk factors relating to participant groups and are competent in responding to risks should they be identified.</p> <p>Services and activities should ensure practical and emotional safety is considered.</p>	<p>Pro-active approach to ensure services and programmes are targeted at/offered to/delivered to marginalised, disadvantaged &amp; higher-risk groups.</p> <p>Attending and successfully completing relevant training.</p> <p>Have and implement the following: -Client Risk Management Policy. -Data Protection Policy. -Evidence of risk policy and procedures being carried out.</p>	<p>Individual Needs Consultation review and Advocacy Support Feedback</p> <p>Evidence of training records attendance and successful completion.</p> <p>Quarterly Review by Programme Officer.</p>

		-Referral Procedure.	
C3.3 C5.7 C7.6 C9.10	Accurate and appropriate records relevant to service provision maintained. VSS Data protection policy and appropriate referral pathways and processes are utilised.	Have and implement the following:  - VSS Data protection policy.  Utilising and evidencing appropriate and timely referral pathways and processes.	Quarterly Review by Programme Officer.  Individual Needs Consultation Review. Attendance at VSS working groups.
C3.5	The organisation works to ensure that the welfare and protection of children and vulnerable adults in its care is paramount.	Attending and successfully completing relevant training.  Have and implement the following: -Adult Safeguarding Policy. -Child Protection Policy.	Individual Needs Consultation review.  Evidence of training records attendance and successful completion.  Quarterly Review by Programme Officer.
C3.7	The organisation has in place processes to identify and respond to serious adverse incidents	Attending and successfully completing relevant training.  Have and implement the following: -Serious Adverse Incident Policy.	Evidence of training records attendance and successful completion.  Quarterly Review by Programme Officer.



**3.2 Monitoring and Evaluation**      *(Reference: VSS Monitoring & Evaluation Guidance Note)*

CVS Standards for Services provided to Victims and Survivors		VSS Implementation	
REF	Standard	Action/ Implementation	Monitoring and Evaluation
C3.8 C9.4, C9.9 C10.4 C11.4	The organisation has in place processes to ensure that where appropriate, service users benefit from sign posting and referrals to other relevant agencies or organisations.	<p>Documented signposting and referral procedures with other relevant agencies or organisations based on knowledge of the geographic and demographic service delivery.</p> <p>Monitoring of signposting and referrals made outside the organisation.</p> <p>Building knowledge of and partnership building with other VSS-funded organisations as well as other community, voluntary and statutory providers.</p>	<p>Quarterly Review by Programme Officer.</p> <p>Individual Needs Consultation review.</p> <p>Regular engagement with Case Managers.</p> <p>Case Studies.</p>

### 3.3 Education, Training and Continuing Professional Development

CVS Standards for Services provided to Victims and Survivors		VSS Implementation	
REF	Standard	Action/ Implementation	Monitoring and Evaluation
C6.5	Counselling personnel are in receipt of appropriate clinical supervision in line with the requirements of their regulatory Professional Body.	Clinical supervision requirements funded by Peace IV Workforce Training and Development Programme.	Annual Review by Health & Wellbeing Case Managers.
C2.3 C6.3, C6.5 C7.3, C7.4, C7.7 C8.3 C9.3 C10.3, C10.9, C10.10	Clear support and supervision arrangements are in place. (General)	Relevant induction and training by all staff completed.  Implementing personal development plans for all staff.  Provision of relevant training to all staff within organisations.  Line Management/ supervision arrangements in place for all staff.	Quarterly Review by Programme Officer.  Evidence of training records attendance and successful completion.

### 3.4 Effective Practice

CVS Standards for Services provided to Victims and Survivors		VSS Implementation	
REF	Standard	Action/ Implementation	Monitoring and Evaluation
C1.4 C8.7, C8.8, C8.10	Existing and new legislation and guidance which might impact upon the service is complied with.	<p>Availing of Workforce Training and Development Programme.</p> <p>Head of Health and Wellbeing will ensure VSS-funded organisations are up to date with all new emerging legislation and guidance.</p> <p>Knowledge of relevant NICE Guidelines and other relevant guidelines or Acts (e.g. Disability Discrimination Act etc.)</p> <p>Attending VSPWGs; Case Worker Forums and Advocacy Support Network Forums.</p>	<p>Evidence of training records attendance and successful completion.</p> <p>Quarterly Review by Programme Officer.</p> <p>Recorded engagement with relevant forums.</p>

C5.5	A full consultation is carried out, by the practitioner providing the treatment, in a manner that is relevant to the client.	<p>All consultation processes and assessments within organisations are in line with best practice and an agreed regional approach.</p> <p>Triage approach to assessment in place:</p> <ul style="list-style-type: none"> <li>- Individual Needs Consultation (Health &amp; Wellbeing Caseworker)</li> <li>- Complex Needs (Health &amp; Wellbeing Case Manager, to include persistent pain, education &amp; training, disability aids, volunteering, trauma-focused physical activity and psychological therapies.</li> </ul>	<p>Quarterly Review by Programme Officer.</p> <p>Engagement with relevant forums.</p> <p>Outcome measures i.e. MYMOP, WSAS and CoreNet, CARE Patient Experience Questionnaire..</p>
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### 3.5 Service User and Carer Experience and Involvement

CVS Standards for Services provided to Victims and Survivors		VSS Implementation	
REF	Standard	Action/ Implementation	Monitoring and Evaluation
C5.7	Informed consent gained.	Have and implement the following: -Confidentiality Agreement	Individual Needs Consultation review.

		Ensure all engagement with service is agreed collaboratively with individual and written consent given.	Quarterly Review by Programme Officer.
C3.4 C8.5, C8.6, C8.7, C8.8, C8.14 C9.9, C9.10, C9.13 C11.2	The organisation promotes respect and protects the confidentiality of all service users at all times.	<p>Have and implement the following:</p> <ul style="list-style-type: none"> <li>-Confidentiality Agreement.</li> <li>-Data Protection Policy.</li> </ul> <p>In conjunction with:</p> <ul style="list-style-type: none"> <li>-Supervision and regular mentoring and support.</li> <li>-Professional code of conduct.</li> <li>-Ethos of organisation.</li> </ul> <p>Attending relevant training.</p>	<p>Evidence of training records.</p> <p>Quarterly Review by Programme Officer.</p> <p>Feedback via CARE Patient Experience Questionnaire.</p>

### 3.6 Staffing and Staff Management

CVS Standards for Services provided to Victims and Survivors		VSS Implementation	
REF	Standard	Action/ Implementation	Monitoring and Evaluation
C5.3, C5.4, C6.2 C6.3, C6.5, C6.6 C7.3, C7.4, C7.7	Practitioners must be suitably qualified and work within the limits of their knowledge, understanding, skills and competence.	Service Managers to ensure all practitioners are fully qualified and have up to date registration with a recognised Professional Body.	Quarterly Review by Programme Officer.
C2.4 C5.4 C6.4 C7.3, C7.4 C8.9, C8.10	Staff and volunteers have appropriate qualifications and skills for their current roles.	Supervision arrangements are in line with regulatory bodies' codes of conduct and practice where relevant.  Job descriptions for all staff are commensurate with roles and responsibilities.  Attending relevant training as identified in Personal Development Plan.  Volunteer Framework to be established under Peace IV resilience budget.	Quarterly Review by Programme Officer.  Liaison with Case Manager overseeing Volunteer Framework.  Training Records.  Recruitment verification process.
C4.13 C7.8	Service providers and relevant personnel demonstrate an active commitment to self care.	Professional and personal commitment to self-care in accordance with ethical frameworks, codes of conduct and organisational staff guidance/handbooks.	Quarterly review by Programme Officers.

		Regular supervision, mentoring and support.  Attending relevant training identified as part of Personal Development Plan.	
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## **4 Review**

- 4.1 This document will be reviewed on an ongoing basis to ensure compliance with current best practice. As such, it should be treated as a live document. Any updated versions will be made available to all VSS-funded organisations.



## **ANNEX 1: Standards for Services provided to Victims and Survivors**

*(Separate document available on VSS website)*