

A **quality improvement framework**
to support self-evaluation for
appropriate adult services in
Scotland

November 2023



Introduction

This quality improvement framework was developed in consultation with stakeholders, including the National Oversight Group for appropriate adult provision, the Convention of Scottish Local Authorities (COSLA) and the Scottish Government. It also reflects feedback from local partners. This framework is for local authorities¹ and their partners to support self-evaluation of appropriate adult services. It is designed to lead to improvement in services. It is adaptable and can be used flexibly to undertake proportionate self-evaluation irrespective of geography, size or design of the service. Improved outcomes and experiences of people who receive support are at the heart of the guidance. It also focuses on how well local authorities, often working in partnership with key stakeholders, design and deliver a rights-based, high-quality, statutory service.

The Care Inspectorate's vision is for world-class social care and social work in Scotland, where everyone, in every community experiences high-quality care, support and learning, tailored to their rights, needs, and wishes.

The [Health and Social Care Standards](#) set out what people have the right to expect when experiencing health, social care and social work services in Scotland. They seek to provide improved outcomes for everyone and ensure that people are treated with dignity, respect and their human rights are upheld. The standards describe what people should experience from a wide range of care and support services. The Care Inspectorate's expectation is that the Standards inform planning, commissioning, delivery and quality assurance of care and support services. They can also be used to inform decisions about quality.

Throughout this guide, we use the term 'people who require or receive support during police procedures'. This refers to people who may have been the victim of a crime, witnessed a crime or be suspected of committing a crime. Police procedures may relate to formal interview or the gathering of biometric data such as DNA, fingerprints or photographs.

When we use the term 'staff', it refers to all people working within the appropriate adult service regardless of their designation or status. For example, volunteer, self-employed person, or someone employed by the local authority.

Background

Appropriate adult services are provided to vulnerable people aged 16 and over. A person is deemed to be vulnerable if, owing to a mental disorder, they need support to communicate effectively or understand sufficiently what is happening during police procedures. This may be due to mental illness, personality disorder, learning disability or other cause.

¹ This term reflects the enabling legislation. While 'local authorities' is used it is recognised that Appropriate Adult services may come under the remit of health and social care partnerships or be delivered by commissioned services.

[The Criminal Justice \(Scotland\) Act 2016](#) provides the legislative background to which appropriate adult services operate. Particular requirements are placed on a range of organisations with a view to ensuring the availability of a consistent and sustainable appropriate adult service:

- Section 42 of the 2016 Act places a duty on the police to facilitate support for people in their custody who are defined as ‘vulnerable’.
- Section 99 of the 2016 Act places a duty on local authorities to provide an appropriate adult service when it is required.

The statutory guidance for local authorities was first published by the Scottish Government on 10 January 2020. Local authorities must have regard to this and any subsequent guidance when undertaking their appropriate adult functions. The Scottish Government also created a non-statutory oversight structure to further promote consistency, quality, and sustainability of appropriate adult provision at a national level. This is described in the appendices.

The role of the Care Inspectorate

Within the 2016 Act, Section 100 enabled Scottish Ministers to confer a duty to assess the quality of appropriate adult services. The Care Inspectorate was assigned this duty and tasked with producing a quality improvement framework to support self-evaluation of appropriate adult services in Scotland.

A self-evaluation model informed by a quality improvement framework offers opportunities for local authorities, their partners, and commissioned services to gauge the extent to which they are delivering a consistent and sustainable appropriate adult service.

As part of the Care Inspectorate responsibilities for assuring the quality of appropriate adult services, we may ask for details of any self-evaluations undertaken and for improvement plans to be submitted as part of this quality assurance process.

Using self-evaluation to plan improvement

Self-evaluation is central to continuous improvement. It is a learning process through which those responsible for providing an appropriate adult service get to know how well they are doing. It can also help to identify the best ways to improve the service to make it more efficient and effective.

Self-evaluation is not meant to be a mechanistic or bureaucratic process. The framework is designed to help services:

- reflect upon practice
- recognise the work which is having a positive impact for those who request, provide and receive an appropriate adult service
- identify where quality needs to be maintained and where improvement is needed
- inform stakeholders about the quality of services.

Self-evaluation helps to establish a baseline – a starting point – from which local authorities can monitor progress and measure the impact of any improvements made in how the appropriate adult service is designed, delivered and experienced.

The self-evaluation questions

Self-evaluation is based on three key questions:

1. How are we doing?

This is the starting point for self-evaluation. It is the baseline for any further development and improvement. By considering performance management information, quality assurance data and feedback from service users, staff and partners, it will be possible to evaluate how well the service is operating currently. Using the quality framework enables benchmarking of current practice alongside progress against local and national targets. Answering this question helps to identify strengths within and across service delivery. It also enables consideration of the areas that need to be improved or further developed.

2. How do we know?

In considering this question, services identify, gather and review the evidence available to them to show the difference the appropriate adult service is making for people who require support. Various sources of evidence, both qualitative and quantitative, can inform the service about the quality and impact of their work. This may be performance data, documentation that evidences decision making or feedback from partners, and people who request and receive a service.

3. What do we plan to do next?

This question helps services to take forward the learning from the self-evaluation and develop a set of clear and tangible priorities for improvement or investment. This approach offers opportunities to reach considered and robust conclusions. This then allows identification of the most appropriate course of action to ensure improvement is realistic, achievable, and likely to impact positively upon outcomes for people using the appropriate adult service. To view the self evaluation guide click [here](#).

Improvement planning

Improvement planning is part of the wider quality assurance and self-evaluation cycle. In order to identify what needs to improve and what improvement actions are working, self-evaluation needs to be ongoing. It is not a one-time activity. The timescales and focus areas for self-evaluation are set by services and depend on where a service is on its continuous improvement journey. For services that need to make several essential improvements to deliver improved outcomes for people, more regular reviews would be needed. This is to help ensure the service continues to move forward and make changes when things are not working as expected or planned.

The areas for improvement identified through self-evaluation should be detailed within an improvement plan. This should be SMART (specific, measurable, achievable, realistic and timebound). The plan should clearly state what will be done, by whom and within a clear timescale.

The Quality improvement framework

The following framework of quality indicators is designed to help with evaluating and improving the quality of appropriate adult services. It is informed by the approach used by the European Foundation for Quality Management (EFQM). The Care Inspectorate has adapted the EFQM model to design frameworks for a range of social care and social work settings. The development of this framework has been informed by consultation and collaboration with a range of stakeholders, service providers, staff, service users and unpaid carers.

The quality improvement framework for appropriate adult services is framed around six key questions. Using a self-evaluation approach, the framework helps local authorities to answer the following questions.

- What key outcomes have we achieved?
- How well do we meet the needs of people and our staff?
- How good is our delivery of our appropriate adult service?
- How good is our management?
- How good is our leadership?
- What is our capacity for improvement?

Quality indicators

Under each key question sits a number of quality indicators. These have been developed to help answer the self-evaluation questions. Each quality indicator has a small number of key factor bullet points to guide what areas of practice should be considered. The quality indicator, or combination of quality indicators to be considered will depend on the self-evaluation question(s) the service wishes to answer.

Each quality indicator has example illustrations describing what very good and weak practice can look like and that can be used to gauge the quality of services. As the design and delivery of services differ across the country, these illustrations are not intended as a checklist or definitive description of all aspects of an appropriate adult service. The Care Inspectorate uses a six-point scale to evaluate strengths and confirm areas for improvement. This scale can be used by local authorities and their partners when undertaking self-evaluation in order to gauge and benchmark performance. The scale is detailed in appendix 1. The example illustrations are informed by the 2016 Act, the national guidance and responses from consultations and collaboration activities.

The final overarching question ‘What is our overall capacity for improvement?’ requires a global judgement, based on all the evidence under consideration. The judgement is forward looking, but also takes account of contextual factors that might influence an organisation’s capacity to improve such as changes in funding, recruitment and retention of staff, restructuring or other national and local factors.

The quality indicator framework

What key outcomes have we achieved?	How well do we meet the needs of stakeholders?	How good is our delivery of our appropriate adult Service?	How good is our management?	How good is our leadership?
1. Key performance outcomes	2. Impact on people	5. Delivery of key processes	6. Policy, service development, planning and improvement	9. Leadership and direction
1.1 Improved outcomes for people who are supported by the appropriate adults service	2.1 People experience improved communication and understanding during police procedures	5.1 Providing help and support when it is needed	6.1 Policies and legal measures	9.1 Vision, values and aims
		5.2 Recognising and responding to risk and need	6.2 Planning and improving services	9.2 Leadership of people
		5.3 Involving people with experience of appropriate adults service	6.3 Performance management and quality assurance	9.3 Leadership of improvement and change
			6.4 Securing improvement through self-evaluation	
	3. Impact on staff		7. Recruitment, management and support of staff	
	3.1 Impact on staff		7.1 Recruitment	
			7.2 Staff training, development and support	
	4. Impact on the community		8. Commissioning of services?	
	4.1 Impact on the community		8.1 Commissioning arrangements	
<p>Key question 10: What is our capacity for improvement?</p> <p>Global judgement based on an evaluation of the framework of quality indicators</p>				

What key outcomes have we achieved?

Key area 1: Key performance outcomes

This section relates to the demonstrable improvements and positive outcomes achieved by the appropriate adult service. It considers wellbeing outcomes within a human rights approach. It specifically focuses on improvements in performance against nationally and locally determined outcomes.

Quality indicator 1.1: Improved outcomes for people who are supported by the appropriate adults service

Key factors - the extent to which we are able to show:

- people are able to understand and communicate during police procedures
- positive outcomes through sustained trends and effective use of reliable data.

Quality illustrations	
Very good	Weak
<p>We proactively promote and protect the rights of vulnerable people who come into contact with the justice system. We consistently gather data that shows access to the appropriate adult service is equitable. This includes how promptly support is delivered.</p> <p>We are highly effective in supporting people in understanding and exercising their rights. The way we gather feedback on the delivery of the appropriate adult service is efficient, reliable and used consistently.</p> <p>As a result of the feedback we receive, we can confidently show that our service supports improved understanding and communication for people during police procedures. This contributes to our ability to identify improved outcomes.</p>	<p>We have made limited progress in developing a statutory service.</p> <p>Inconsistent practice means people and partners often experience significant delays in receiving appropriate adult support.</p> <p>We are in the early stages of gathering data about intended outcomes for people who require support from an appropriate adult. We cannot yet demonstrate that people are helped to understand and communicate during police procedures.</p> <p>How we seek feedback is inconsistent. As a result, we do not receive meaningful information to allow us to demonstrate improved outcomes for people.</p>
<p>We have established a reliable way to report on person-centred outcomes. This enables us to promote best practice or make necessary adjustments to support improvement.</p>	<p>We have no reliable way to gather robust evidence to report on person-centred outcomes. As a result, we cannot be confident that we are delivering an efficient and effective appropriate adult service.</p>

We have a high level of confidence in the efficiency and effectiveness of the appropriate adult service.

Consistent use of accurate, reliable data shows improving outcomes against local and national targets for people who require support during police procedures.

Regular analysis of data and performance allows us to understand people's needs and identify trends. As a result, we are able to identify gaps in the service and address areas of inequality.

Our use of data is underdeveloped. Information is limited, which prevents effective analysis. As a result, we are unable to demonstrate what is working well or where improvement is required.

We encounter some challenges that mean we cannot always support people who require the appropriate adult service in a timely manner. These issues are recognised by leaders and reflected within local and national reporting systems.

How well do we meet the needs of stakeholders?

Key area 2: Impact on people

This section relates to operational and strategic management of the appropriate adult service. It considers the effectiveness of service planning and development and the extent to which this is based upon an understanding of local need. It is concerned with whether the service reflects relevant standards and a human-rights-based approach. It focuses on the effectiveness of performance management and quality assurance in ensuring a high standard of service delivery. It takes account of how well self-evaluation is informing improvement and service development.

Quality indicator 2.1: People experience improved communication and understanding during police procedures

Key factors - the extent to which we can show:

- people feel listened to, understood and respected
- people experience positive outcomes as a result of receiving support.

Quality illustrations	
Very good	Weak
<p>People receiving support from an appropriate adult feel listened to and that their views are taken seriously. As a result, they feel able to communicate and be understood during police procedures.</p> <p>People feel they are understood and treated fairly with dignity and compassion</p>	<p>We have no feedback from people to demonstrate how well we meet their needs during police procedures.</p> <p>People do not feel listened to or understood. As a result, they do not feel adequately supported or respected.</p>
<p>People feel fully supported by the appropriate adult. They understand why the person is present and they have access to information about the appropriate adult role in a format appropriate to their needs.</p> <p>People feel the appropriate adult service contributes positively to their overall wellbeing. Their rights are promoted throughout and any barriers to communication are quickly identified and removed. As a result, they are able to understand and be understood during police procedures.</p>	<p>Limited information is available to support people to understand the role of the appropriate adult. People report that although an appropriate adult is present, they do not understand why.</p> <p>People do not feel supported due to minimal engagement and as a result, they struggle to understand or be understood during police procedures.</p> <p>People receiving support cannot identify any positive outcomes.</p>

Key area 3: Impact on staff

This section focuses on the views of staff and their feelings about the appropriate adult role and service. It considers the extent to which staff feel valued, motivated, and understand their role. It relates to how well they are involved in the ongoing design and development of the service and how they feel their role contributes to positive outcomes for people.

Quality indicator 3.1: Impact on staff

Key factors - the extent to which we can show:

- staff at all levels feel valued, motivated, and involved
- staff at all levels understand their role and confidently and competently fulfil their statutory responsibilities
- staff feel their work contributes to improved outcomes for people.

Quality illustrations

Very good	Weak
<p>Staff experience consistent levels of consultation, feel well informed and are confident that their views are listened to.</p> <p>Highly motivated and satisfied staff are able to engage meaningfully in the ongoing planning and development of the appropriate adult service. As a result, staff morale is high.</p>	<p>The views of staff are not actively sought or listened to. There is little opportunity to contribute to service development.</p> <p>Staff convey varying levels of job satisfaction, and their morale is low. They feel undervalued, unsupported, and unable to influence the development of the service.</p>
<p>Staff have a clear understanding of the statutory appropriate adult service and their role within it. They routinely receive high-quality information, support, and guidance to effectively undertake their role.</p> <p>Staff are confident and competent in fulfilling their appropriate adult responsibilities. They feel they have access to a full range of learning opportunities to meet their identified needs and resources which promote best practice.</p>	<p>Staff feel isolated and unsupported. Learning opportunities are not promoted and there are few resources available to support them in their work. As a result, they lack confidence and competence when undertaking their role.</p> <p>Staff are unclear about their role within the appropriate adult service or what is expected of them.</p>

Staff have a strong and shared commitment to delivering a high-quality, independent, and objective appropriate adult service that protects human rights and promotes equality.

All staff have the knowledge, skills, confidence and capacity to recognise and respond to people affected by trauma. Staff communicate effectively across all levels of the service to achieve improved outcomes for people.

Staff are unclear about their role and have limited understanding of the needs of people who require support to communicate and be understood during police procedures.

Staff do not feel they have capacity or are appropriately supported to respond to the needs of people when an appropriate adult service is requested. As a result, they do not feel they are contributing to positive outcomes for people.

Key area 4: Impact on the community

This section considers how well the community understands, values, and has an opportunity to influence the design and development of the appropriate adult service. It focuses on the strength of links to the wider vision for community justice and the extent to which there is public confidence in justice processes.

Quality indicator 4.1: Impact on the community

Key factors - the extent to which we can show:

- community awareness of the appropriate adult service
- engagement with communities of interest to inform service design and development
- connectivity with community justice outcome improvement plans.

Quality illustrations

Very good	Weak
<p>We have successfully raised awareness of the appropriate adult service across our local community. Our approach to engagement is detailed in a comprehensive communication strategy.</p> <p>We make effective use of community engagement opportunities to raise awareness and deliver a consistent message about the service. This includes engagement with community justice partners.</p>	<p>There is no communication strategy.</p> <p>Efforts to raise awareness of the appropriate adult service or engage communities are limited.</p> <p>We have not yet developed a clear approach to promoting the service with community justice partners.</p>
<p>We actively engage with communities of interest, including victim groups and carer representatives. This ensures our appropriate adult service is best placed to meet the needs of people who require support to communicate and be understood during police procedures.</p> <p>We have a range of ways in place to support community engagement. Suggestions, feedback and complaints procedures are readily available to the public to share their experiences and are used to inform service design and delivery.</p>	<p>We have not yet taken steps to seek the view of communities or people who may have an interest in the effective delivery of the appropriate adults service. The wishes of the community are therefore underrepresented in our design and development.</p> <p>The ways we seek feedback are underdeveloped, therefore there are few opportunities to meaningfully inform service design and delivery.</p>

A comprehensive, up-to-date community justice strategic needs and strengths assessment has been undertaken. It reflects the needs of people who require support to communicate and be understood during police procedures. These needs are also represented within related strategic plans and policies.

The appropriate adult service operates in isolation with little connection to wider community justice partners at a strategic or service design level.

How well do we deliver our appropriate adult service?

Key area 5: Delivery of key processes

This section focuses on processes for service delivery. It considers the effectiveness of identifying and responding to a need for support and the timeliness of that service. It questions the extent to which services are available when needed. It also considers the effectiveness of referral and risk-based processes in the delivery of an efficient service. This includes providing consistent support to people about whom multiple referrals are received over time. It explores the extent to which methods are in place to enable people receiving a service to express their views.

Quality indicator 5.1: Providing help and support when it is needed

Key factors - the extent to which we can show:

- effective processes enable prompt recognition and response when appropriate adult support is needed
- services are accessible with a variety of supports available to ensure that needs are met.

Quality illustrations	
Very good	Weak
<p>Our referral system is clearly communicated and understood by partners. Co-ordination of our response is ensuring the consistent delivery of appropriate adult support when and where it is required.</p> <p>People receive support when they need it, irrespective of the request being received in or out of office hours.</p> <p>Where there are delays, they are unavoidable and for the shortest period possible. If there are delays, people are kept informed to reduce anxiety and the learning is used to improve service delivery.</p> <p>We regularly monitor the effectiveness of our processes and make improvements if needed.</p>	<p>There is no consistent approach to accessing the appropriate adult service. Referral pathways are absent or not clearly communicated or understood. This affects our ability to provide support when and where it is required.</p> <p>As referral processes are not clearly defined, there is over reliance on unrecorded verbal exchanges.</p> <p>Our referral processes are not regularly reviewed and there are few records of the service provided. As a result, we cannot be confident that we are delivering an efficient and effective service in accordance with local and national expectations.</p> <p>There is significant impact to people’s wellbeing as delays in the attendance of an appropriate adult hinders or postpones efficient police procedures.</p>

<p>Appropriate adults are alert and recognise the signs that someone is in distress or requires their support during police procedures and respond without delay.</p>	<p>Our service is not sufficiently person-centred. Staff are slow or fail to recognise the need for help or intervention during police procedures. Needs are therefore unmet.</p>
<p>We deliver person-centred support. We are attentive to the needs of people and where there are multiple referrals, we offer consistency of provision where appropriate.</p>	<p>People experience a poor service with a disproportionate or inappropriate response because of their vulnerability and communication difficulties.</p>
<p>If a person requires particular support to aid communication, our staff are knowledgeable about the available options and how to access them.</p>	<p>There are poor outcomes for people as referral systems are based on organisational need rather than person-centred principles.</p>
<p>Where onward referral or specialist support is required, there are clearly defined processes for this to happen efficiently and effectively and these are used consistently.</p>	<p>While a process exists, when specialist support is needed, this is rarely accessed and therefore has no positive effect.</p>

Quality indicator 5.2: Recognising and responding to risk and need

Key factors - the extent to which we can show:

- appropriate adults take account of risk, need and wellbeing when helping the person to understand and communicate
- information sharing procedures, recording and storage are effective and legally compliant.

Quality illustrations	
Very good	Weak
<p>We ensure appropriate adults have time to engage with the person before the interview progresses. This enables them to fully explain their role, build rapport and take full account of risk, needs and overall wellbeing.</p> <p>The appropriate adult has the confidence to intervene and make effective use of appropriate skills and resources to support communication and understanding.</p> <p>Where there are wellbeing concerns or risks identified about a person supported by an appropriate adult, these are promptly brought to the attention of the interviewing officer. Relevant services and supports are made available, in addition to police procedures.</p>	<p>Appropriate adults have no time to introduce themselves or develop a relationship with the person being interviewed. As a result, they are less well informed on the person's overall circumstances.</p> <p>The appropriate adult does not fully consider the person's wellbeing needs and risks. As a result, communication support during police procedures is less effective.</p> <p>Appropriate adults lack clarity about their role. Access to tools to support communication is limited. This contributes to delays in alerting the interviewing officer to the need for specialist support to aid communication.</p>

Our information sharing processes are highly efficient and effective. This ensures identified risks and needs are brought to the attention of relevant services without delay.

Information sharing is proportionate and fully compliant with relevant legislation and local authority guidance.

If the person is the subject of an order or intervention under the Adults with Incapacity (Scotland) Act, there are clear local policies in place to ensure the proportionate and legal sharing of relevant information.

There is no clear guidance or process to support effective information sharing. As a result, this takes place ad hoc and is not always legally compliant.

There is a significant risk to people's wellbeing as critical information is not shared promptly or acted upon appropriately to protect people from harm.

Quality indicator 5.3: Involving people with living experience

Key factors - the extent to which we can show:

- the views, wishes and expectations of people are sought and taken into account
- people understand their rights and how information held about them will be used and shared.

Quality illustrations

Very good	Weak
<p>We welcome and encourage feedback about the appropriate adult service, including any complaints.</p> <p>Our information is in a format and language that enables and supports people to give feedback and make formal complaints. This can be done in a variety of easily accessible ways to ensure fairness and equality.</p> <p>Any complaints are acted on within agreed timescales and the outcomes shared with the person or their representative.</p>	<p>Peoples' views and preferences are not routinely sought or there is little regard for people's needs and wishes.</p> <p>We offer limited or no information about how to express dissatisfaction or make a complaint. People are often unaware that they can complain or feedback about the service they receive as local procedures are not easily accessible or understood.</p> <p>We do not routinely acknowledge complaints and feedback or report if there has been any impact on service delivery.</p>
<p>People understand their rights and how information held about them will be used and shared.</p> <p>People have a clear understanding of the role of the appropriate adult and their independence in supporting communication during police procedures.</p> <p>People are made aware of how any information that is held about them will be used. We therefore ensure their rights and dignity are respected, and they are free from discrimination and unfair treatment.</p> <p>The person is helped to understand the limits of confidentiality and that some information may need to be shared, including during legal processes, without their consent if it concerns safety.</p>	<p>People are unclear about their rights, what information is gathered and how it is used.</p> <p>People do not fully understand what the appropriate adult does or how the role is meant to assist them to communicate during police procedures.</p> <p>Staff are unsure about what information they can share, either with the person it is held about or with key stakeholders. As a result, we are inconsistent and either share too much information or not enough.</p> <p>Our approach to gaining consent and sharing information is inconsistent. As a result, people do not always know when information will be shared without their consent.</p>

How good is our management?

Key area 6: Policy, service development, planning and improvement

This section relates to operational and strategic management of the appropriate adult service. It considers the effectiveness of service planning and development and the extent to which this is based upon an understanding of local need. It is concerned with whether the service reflects relevant standards and a human-rights-based approach. It focuses on the effectiveness of performance management and quality assurance in ensuring a high standard of service delivery. It takes account of how well self-evaluation is informing improvement and service development.

Quality indicator 6.1: Policies and legal measures

Key factors - the extent to which we can show:

- policies and procedures are clear and reflect strategic objectives and operational requirements
- all policies comply with current equality and human rights legislation.

Quality illustrations	
Very good	Weak
<p>We have developed and implemented a cohesive range of policies and procedures which reflect the strategic vision for the appropriate adult service. These are easily accessible and understood by staff and partners.</p> <p>Policies and procedures promote and support best practice and are outcome-focused.</p> <p>Policies fully reflect local and national priorities and expectations.</p>	<p>Our policies are of variable quality and do not always reflect the vision, values and aims for the service.</p> <p>Policies and procedures are often out of date and there is no consistent way to ensure they are reviewed to incorporate changes in national and local guidance.</p>
<p>Equality, inclusion and human rights are embedded within our policies for service delivery and planning.</p> <p>Policies and procedures are subject to appropriate impact assessments that are effectively implemented and regularly reviewed.</p>	<p>We recognise the need for equality and engagement in all our service planning and delivery but have done little or no work to ensure this happens.</p> <p>Our policies do not adequately consider equality and human rights issues.</p> <p>There are weaknesses and inconsistencies in the way guidance and legislation are implemented.</p>

Quality indicator 6.2: Planning and improving services

Key factors - the extent to which we can show:

- effective governance and planning systems
- plans reflect the principles of participation and inclusion.

Quality illustrations	
Very good	Weak
<p>Governance and reporting arrangements are clear and reflect local partnership arrangements.</p> <p>A robust service planning process ensures that strategic and operational plans are aligned with each other.</p> <p>Plans are informed by a strategic needs and strengths assessment, comprehensive data and performance information.</p> <p>We are highly effective at identifying emerging or potential risk and take timely, proportionate action to mitigate this. Our service has clear lines of accountability to ensure actions are achieved and progress is reported.</p>	<p>We recognise the importance of good governance and planning. However, our approach is often reactive, making it difficult to confidently gauge progress in implementing key actions.</p> <p>A strategic needs and strengths assessment has not been undertaken or is out of date. Plans therefore do not reflect current priorities or local needs.</p> <p>Approaches to identifying and managing risk are not fully developed. As a result, we are not well informed about potential or emerging risks.</p>
<p>Our plans reflect our commitment to the Health and Social Care Standards.</p> <p>People, staff and relevant third sector organisations are regularly involved and consulted. We collaborate with statutory partners, directing the development and delivery of services. As a result, we uphold individual rights and deliver positive personal outcomes.</p>	<p>Our plans are not routinely shared externally and feedback is limited.</p> <p>Local input into plans is not consistently sought or achieved. People, staff and relevant third sector organisations report differing experiences of involvement with development and delivery.</p>

Quality indicator 6.3: Performance management and quality assurance

Key factors - the extent to which we can show:

- regular performance management and quality assurance ensure a high standard of service delivery
- quality assurance arrangements involve staff at all levels in taking responsibility for service quality.

Quality illustrations	
Very good	Weak
<p>We have developed and implemented a highly efficient performance and quality assurance framework. By regularly reviewing reliable performance information, we are able to gauge our progress against local and national outcomes.</p> <p>Performance reports are routinely considered by senior leaders who provide appropriate levels of scrutiny and challenge. Corrective action is taken when necessary to achieve goals.</p> <p>Our embedded quality assurance approach takes equal consideration of peoples' experiences and performance data to measure outcomes and drive improvement.</p>	<p>We have yet to develop or implement a performance and quality assurance framework. We therefore do not have an efficient and reliable system to gather timely and accurate data that enables us to report on our performance progress.</p> <p>There is a lack of oversight of quality assurance or performance information. This negatively impacts our ability to set realistic performance targets or take remedial improvement action.</p> <p>We can demonstrate a few improvements in the quality of processes but not in outcomes for people. Staff are unconvinced about the effectiveness of our processes.</p>
<p>Effective communication with staff ensures expectations and aspirations for the service are clear and understood. A learning culture based on performance and self-evaluation supports our commitment to continuous improvement.</p> <p>Staff understand what they need to do to improve the quality of their work. Their involvement in quality improvement is demonstrated by their engagement at events, in surveys and during supervision.</p> <p>Quality assurance systems are used to encourage a high standard and consistency of work by all staff. We continually strive to improve our service.</p>	<p>Staff believe that assuring the quality of the service is a management task and do not feel connected to quality assurance, self-evaluation and improvement activities.</p> <p>We are not proactive in challenging ourselves to improve our performance by making targets more ambitious. While improvements are delivered in some areas of work, key outcomes remain inconsistent.</p> <p>There are significant gaps in the work covered by our quality assurance processes. Arrangements do not include staff at all levels.</p>

Quality indicator 6.4: Securing improvement through self-evaluation

Key factors - the extent to which we can show:

- self-evaluation is prioritised, planned and coordinated
- self-evaluation informs and leads to improvement and service development.

Quality illustrations

Very good	Weak
<p>We have an established approach to self-evaluation and improvement guided by relevant frameworks and data analysis. We review the quality of services and challenge ourselves to strive for better results.</p> <p>Self-evaluation activity is planned and co-ordinated. It is informed by accurate performance information to identify a manageable number of priorities.</p> <p>We support and encourage staff to carry out self-evaluation as an integral part of their work, equipping them with the knowledge and skills to do this well.</p> <p>Where services are commissioned, we provide sufficient guidance and adequate resources for the service to undertake or contribute to self-evaluation.</p>	<p>We do not plan or co-ordinate self-evaluation activity and are not able to identify priority areas for self-evaluation.</p> <p>Our service has not yet developed a level of maturity to support a culture of support and challenge.</p> <p>We do not fully understand what is done well and what needs to improve.</p> <p>There is no cycle of planned and co-ordinated self-evaluation activity.</p> <p>Commissioned services are not adequately supported or resourced to undertake or contribute to self-evaluation.</p>

Self-evaluation focuses on outcomes and can demonstrate notable and tangible improvements in performance and the wellbeing of people who require support during police procedures.

We clearly communicate our improvement priorities. As a result, staff understand fully what they need to do to improve the quality of their work. We involve everyone in well-established self-evaluation practice with a strong focus on improving outcomes.

Commissioned services are fully involved in developing and delivering improvement plans.

We seek the views of those using services but do not do this systematically or use the evidence gathered well enough as part of self-evaluation. Staff have limited involvement in or awareness of self-evaluation.

Self-evaluation continually identifies the same areas for improvement. We make improvement plans but they are largely ineffective. As a result, staff are not convinced about the benefits of self-evaluation in securing improvement.

Commissioned services are not sufficiently included in delivering improvement.

Key area 7: Management and support of staff

This section focuses on the management and support of staff responsible for developing and delivering the appropriate adult service. It considers how the workforce is developed within the available resources. It looks at how well a workforce development strategy supports staff to perform their statutory duties competently and confidently.

Quality indicator 7.1: Recruitment

Key factors - the extent to which we can show:

- a workforce plan is in place which monitors current and future staffing
- a commitment to equality, inclusivity, and diversity in recruitment and retention.

Quality illustrations	
Very good	Weak
<p>We have developed a comprehensive workforce plan. As a result, we understand our staffing requirements and can ensure the right number of staff, with the right balance of skills are available to deliver the statutory appropriate adult service.</p> <p>Safer recruitment practices are strictly applied to help protect people who require support from potential abuse and other harm.</p>	<p>We either do not have a workforce plan or it does not help us identify and prioritise our staffing needs.</p> <p>Recruitment challenges mean we do not have sufficient levels of staff across the service.</p> <p>Recruitment practices are inconsistent and do not assure safe recruitment or match skills and knowledge as defined in the selection criteria.</p>
<p>We recruit from across society to ensure a broad range of experience and backgrounds to best support people who use the appropriate adult service.</p> <p>We are effective in retaining staff as we recognise and value their skills.</p>	<p>There is a negative impact to people using the appropriate adult service as there is little consideration of the backgrounds or experience of staff when we recruit.</p>

Quality indicator 7.2: Staff training, development and support

Key factors - the extent to which we can show:

- staff are confident and can undertake their duties competently
- positive outcomes from workforce planning, training and development of staff at all levels and in line with national priorities and local targets
- staff are enabled to reflect upon and improve their practice through advice, guidance and supervision.

Quality illustrations	
Very good	Weak
<p>An effective induction process is in place for new staff that includes role-specific information.</p> <p>Staff are trauma informed, skilled and appropriately trained and equipped to undertake their role safely and competently. They are encouraged to exercise initiative and good judgement.</p> <p>Through systematic use of quality assurance, supervision and appraisal processes we effectively develop the skills and competence of our appropriate adult staff.</p>	<p>There are varying levels of confidence and competence among our staff, which is unaddressed.</p> <p>Staff lack confidence and are reluctant to use initiative or take appropriate decisions.</p> <p>A lack of training and guidance impacts negatively on staff's ability to develop the skillset they require to fulfil their role.</p>
<p>Consistent delivery of our workforce strategy and training needs analysis demonstrates our ability to develop, support and retain staff across the appropriate adult service.</p> <p>Learning opportunities are easily accessible and targeted to identified training priorities. Evaluations are very positive and demonstrate the positive impact of training and development undertaken by staff.</p>	<p>We lack a strategic approach to workforce planning and development, or existing strategies do not reflect the requirements of the appropriate adult service.</p> <p>Access to, or uptake of, training or uptake of it is low. Evaluations show poor responses to staff training and development activities and the limited impact of it.</p>
<p>We have established a positive and supportive learning culture. Staff have regular access to advice, guidance, support and supervision. This includes access to specialist support if required.</p>	<p>Staff do not have access to a relevant appraisal process or quality supervision and guidance to support their development. We do not hold staff accountable for their work or equip them to fulfil their responsibilities.</p>

Key area 8: Commissioning of services

This section focuses on the effectiveness of commissioning, quality management and prioritisation of resources. It considers the extent to which the service evaluates and seeks assurance that relevant standards and priorities are being attained routinely and people experience positive outcomes.

Quality indicator 8.1: Commissioning arrangements

Key factors - the extent to which we can show:

- in partnership we develop and implement strategic commissioning arrangements so that people get support that is right for them
- evaluation and monitoring to review the quality of commissioned services.

Quality illustrations

Very good	Weak
<p>Commissioning of services is based upon a comprehensive strategic needs and strengths assessment and the key priorities are outlined in strategic plans. Plans are analysed and updated to reflect current and future needs.</p> <p>Commissioned services are well delivered in line with relevant Scottish Government guidance.</p> <p>We consistently achieve good outcomes for people requiring appropriate adult support through services that meet the priorities and high standards we set.</p>	<p>Approaches to developing strategic commissioning are at an early stage.</p> <p>Commissioning is not informed by a comprehensive understanding of need, and we are not well enough informed about resources and capacity.</p> <p>Services are commissioned to meet gaps in service, or contracts are renewed without a thorough review of overall need.</p> <p>We are unable to evidence that strategic priorities or national guidance are used to ensure delivery of a high-quality service.</p>
<p>Robust monitoring and reviewing systems are in place to ensure delivery of a high-quality service.</p> <p>We monitor and review the quality of commissioned services in partnership with providers.</p> <p>We proactively seek out the views of people with lived experience to inform future commissioning.</p>	<p>Monitoring and review processes are not flexible enough to capture relevant data about the quality of services.</p> <p>We do not gather sufficient evidence to inform the commissioning of services and we lack a structured approach to inform this activity.</p>

How good is our management?

Key area 9: How good is our leadership?

This section relates to the commitment and effectiveness of leaders in delivering a quality statutory appropriate adult service. It considers the extent to which a clear vision and values inform the development and delivery of a sustainable service. There is a focus on driving forward improvement and change which takes account of how well leaders are adapting the service dependent on need.

Quality indicator 9.1: Vision, values and aims

Key factors - the extent to which we can show:

- leaders share their vision of how people using the service experience the best possible support and outcomes
- leaders ensure that all people are treated with respect without discrimination.

Quality illustrations

Very good	Weak
<p>We demonstrate strong governance and collective ownership of the ambitions and aspirations for the statutory appropriate adult service.</p> <p>A shared vision connects key plans, including the local outcome improvement plan and community justice outcome improvement plan. We make sure that plans are effective and state what is important to deliver the right support to people.</p> <p>There are clear links between our vision, values and aims and national priorities and aspirations. We work to achieve the best possible support outcomes for people as shaped by their views and experiences.</p>	<p>The service is still at an early stage in meeting our responsibilities for the statutory appropriate adult service.</p> <p>There is a lack of ownership and aspiration for the service at a strategic level.</p> <p>Plans are underdeveloped, lack ambition and are not well enough connected to an overall vision. They do not link with the shared aims in other services.</p>
<p>Our values are informed by a human rights approach and the Health and Social Care Standards.</p> <p>We promote a supportive, inclusive and respectful culture that is shaped by people's views and needs. We share a common purpose and high expectations for our service.</p>	<p>There is limited or no evidence that equality and inclusion are embedded either within policies, procedures and plans or from reviewing practice.</p> <p>Staff, partners and communities of interest do not have confidence in the leadership of the service. It lacks energy, visibility and effectiveness.</p>

Quality indicator 9.2: Leadership of people

Key factors - the extent to which we can show:

- effective decisions about staff and resources
- staff are empowered to support people
- leadership at all levels has a positive impact on staff.

Quality illustrations

Very good	Weak
<p>Our leaders at all levels engage meaningfully with staff, people who require support and wider communities of interest.</p> <p>We are skilled at identifying and delivering the right type and level of resource needed to provide a highly effective appropriate adult service.</p>	<p>Leaders at all levels lack the skills and knowledge to anticipate the type and level of resources needed to deliver a statutory appropriate adult service. This contributes to difficulties arising and escalating.</p>
<p>By acknowledging, encouraging and appreciating the efforts, contribution and expertise of staff, we have instilled a safe-to-challenge culture.</p> <p>We employ a range of very effective ways to communicate with staff. This ensures they are informed and empowered to fulfil their statutory role and responsibilities.</p>	<p>Staff are not confident that they are allowed to help identify solutions.</p> <p>Leaders are unaware of the importance and so do not appreciate or encourage staff at all levels to deliver high-quality support.</p>
<p>All leaders help motivate staff to deliver high-quality support.</p> <p>Leaders recognise achievements and celebrate success.</p>	<p>Opportunities to use initiative, take responsibility and influence change are limited. Staff seldom adopt a leadership role. There is little evidence that professional learning is linked to organisational priorities.</p> <p>Leaders do not fully recognise and celebrate the achievements of staff.</p>

Quality indicator 9.3: Leadership of improvement and change

Key factors - the extent to which we can show:

- quality assurance, including self-evaluation and improvement plans drive change and improvement where necessary
- change is well managed.

Quality illustrations	
Very good	Weak
<p>We demonstrate a clear commitment to improving the statutory appropriate adult service.</p> <p>We are focused on delivering intended outcomes for people and partners. We learn from self-evaluation and collaboration with others, and we often explore new ways to be innovative.</p> <p>We use quality assurance and self-evaluation to identify and promote good practice in planning, commissioning and service delivery.</p> <p>We are highly motivated to learn from others and are confident in adapting and embedding good practice from elsewhere.</p>	<p>Approaches to improvement are not well planned and few improvements are made. We are slow to take corrective action.</p> <p>We are poor at identifying and sharing success and rarely look outside of our own service to learn from others.</p> <p>We have put in place a number of successful but time limited initiatives. However, learning from these is not embedded in supporting practice change more widely.</p>
<p>We use proven improvement models and promote evidence-based approaches to change management.</p> <p>We continually challenge ourselves on what is best practice and use our resources well to support the continuous improvement of the appropriate adult service.</p> <p>Our improvement plan details the future direction of the service and is well managed.</p>	<p>We do not have an agreed approach to successfully delivering change. The pace of improvement is slow, and progress is not always sustained.</p> <p>Often, the primary focus is on the need to make financial savings rather than improving outcomes for people.</p> <p>Our improvement plan is not evidence-based and is difficult to implement, which undermines its effectiveness.</p>

Quality indicator 10: Leadership of improvement and change

This final section of the quality improvement framework presents an opportunity for comment on the overall capacity for improvement. This requires a judgement based on the evidence and evaluations from all the relevant key areas in the framework that have been used to inform the self-evaluation. The judgement is a forward-looking self-assessment, but also takes account of contextual factors that might influence an organisation's capacity to improve the quality of the service in the future.

Leaders need to consider the robustness of their strategic approach, the strength of their oversight and governance and the effectiveness of collaborative working. Issues that influence this will include national drivers, budgetary pressures, political, structural and policy changes, as well as organisational culture.

What each appropriate adult service is able to demonstrate will depend upon their stage of development. There may be variation across the key areas. Nevertheless, this will be useful in establishing a baseline for improvement and in identifying and targeting support to achieve the intended outcomes.

Key factors – extent to which we know our service and are able to:

- self-assess accurately
- self-evaluate to secure improvement
- develop strategic priorities
- implement strategic priorities
- evaluate progress towards achieving improvement

Appendix 1: the six-point scale

We will use the six-point scale when evaluating the quality of performance across quality indicators.

6	Excellent	Outstanding or sector leading
5	Very Good	Major strengths
4	Good	Important strengths, with some areas for improvement
3	Adequate	Strengths just outweigh weaknesses
2	Weak	Important weaknesses – priority action required
1	Unsatisfactory	Major weaknesses – urgent remedial action required

An evaluation of **excellent** describes performance which is sector leading and supports experiences and outcomes for people which are of outstandingly high quality. There is a demonstrable track record of innovative, effective practice and/or very high quality performance across a wide range of its activities and from which others could learn. We can be confident that excellent performance is sustainable and that it will be maintained.

An evaluation of **very good** applies to provision that demonstrates major strengths in supporting positive outcomes for people. There are very few areas for improvement. Those that do exist will have minimal adverse impact on the experiences and outcomes of people receiving appropriate adult support. An evaluation of very good represents a high standard of performance therefore it is appropriate to continue the delivery of service without significant adjustment.

An evaluation of **good** applies to performance where there are a number of important strengths which, taken together, clearly outweigh areas for improvement. The strengths will have significant positive impact for people receiving appropriate adult support. However, the quality of experience of people receiving support or referring partners may be diminished in some way by aspects of the service that require improvement.

An evaluation of **adequate** applies to performance where there are some strengths, but these just outweigh weaknesses. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people is reduced significantly because key areas of performance need to improve. Performance which is evaluated as adequate may be tolerable in particular circumstances, such as where a service is not yet fully established, or in the midst of major transition. However, continued performance at adequate levels is not acceptable. Improvements must be made by building on strengths while addressing those elements that are not contributing to positive experiences and outcomes for people.

An evaluation of **weak** applies to performance in which strengths can be identified but these are outweighed or compromised by significant weaknesses. The weaknesses, either individually or when considered together, substantially affect people's experiences or outcomes. Without improvement as a

matter of priority, the wellbeing and safety of people may be compromised, or their critical needs not met. Weak performance requires action in the form of structured and planned improvement by the service provider with a mechanism to demonstrate clearly that sustainable improvements have been made.

An evaluation of **unsatisfactory** will apply when there are major weaknesses in critical aspects of performance that require immediate remedial action to improve experiences and outcomes for people. It is likely that the wellbeing or safety of people in need of appropriate adult support will be compromised by risks that cannot be tolerated. Those accountable for the commissioning and/or delivery of the statutory appropriate adult service must ensure the necessary actions for improvement are carried out as a matter of urgency to ensure that people are protected, and their wellbeing improves without delay.

Appendix 2: References

This guidance has relevance for a range of people including those who:

- require a service
- request a service
- provide a service
- quality assure a service.

Our focus is very much on putting the voices of people front and centre and embedding a human rights approach within the self-evaluation framework. This is in line with the ethos and messages of the following cross-cutting policies.

[Appropriate Adults: guidance for local authorities - gov.scot \(www.gov.scot\)](#)

[Health and Social Care Standards | NHS inform](#)

[Independent Review of Adult Social Care - gov.scot \(www.gov.scot\)](#)

[Independent Care Review – The root and branch review of Scotland’s care system.](#)

[Care Inspectorate Corporate Plan 2022.pdf](#)

[New vision for justice - gov.scot \(www.gov.scot\)](#)

[National Strategy for Community Justice - gov.scot \(www.gov.scot\)](#)

[United Nations Convention on the Rights of the Child \(Incorporation\) \(Scotland\) Bill: leaflet - gov.scot \(www.gov.scot\)](#)

[Introduction to Scottish Human Rights](#)

[Scottish Human Rights Self-Assessment](#)

Stakeholders must ensure there is *"a relentless focus on involving people who use services, their families and carers in developing new approaches at both a national and local level"*. (The Independent Review of Adult Social Care)

The aim of self-evaluation is *"to identify and support improvement to help services make the positive change they need to... involve people who experience care and carers in this work so they have a strong voice in shaping improvements that will make a positive difference to their lives"*. (Care Inspectorate Corporate Plan).

Appendix 3 – The national oversight structure for appropriate adult services

COSLA has hosted the national appropriate adult coordinator since September 2020 and the policy and participation officer (appropriate adults) since April 2022. This was a result of an agreement to work with the Scottish Government to implement the new statutory appropriate adult services.

National oversight group

This group is made up of members from appropriate adult services, justice and health partners, local and national government, and third sector organisations representing people who use services. It sets and oversees the direction of appropriate adult policies at a national level. The group also oversees implementation of the national training framework.

National coordinator

The postholder provides a national single point of contact for appropriate adult services and the Care Inspectorate. The coordinator gives help and guidance related to implementation of the statutory service. The coordinator is represented on the national oversight group and is involved in developing appropriate adult policy.

Practitioners forums

Local authorities are encouraged to establish forums for appropriate adult teams to ensure a network of support for appropriate adult services where practitioners, coordinators and managers discuss good practice, share information and identify issues at an operational level.

You can find out more by clicking [here](#).

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