

# Assessment Report

## Charter Mark

Assessment Report Prepared for

**Derbyshire County Council  
Social Services Department  
Walton Hospital Assessment Team**

Teresa Bateman,  
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Walton Hospital  
Whitecotes,  
Walton,  
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**Type of Assessment:** Initial

**Date of on-site assessment:** 06/12/05

**Assessment Criteria:** Charter Mark

**Lead Assessor:** Fred Weston

**Result:** Award of the Charter Mark would be recommended

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## 1. Executive Summary

Following a two-stage assessment process Derbyshire County Council – Social Services Department-Walton Hospital Assessment Team were found to be enthusiastically committed to the Charter Mark ethos. The commitment was found from Senior Management levels through to operation and front line staff.

During the assessment a number of partial compliances with the standard were identified. These are detailed in section 5 of this report. However, these partial compliances are below the maximum allowable by the current scheme and so we are please to inform you that:

**“Award of the Charter Mark would be recommended”**

As the next stage of process we would ask you to develop an action plan for each of the areas of partial compliance. Further details can be found in section 7 and 8 of this report.

## 2. Method of Assessment

The assessment was undertaken in two stages. The first was a document review on an application pack prepared by Derbyshire County Council – Social Services Department-Walton Hospital Assessment Team. This enables the assessor to gain an understanding of how the organisation has met the requirements of the Charter Mark standard.

Following this document review a report was prepared that outlined areas that would be the focus of next stage of the assessment.

The final stage was an on-site assessment. The objective of this part of the assessment was to obtain objective evidence that the applicant was meeting the requirements of the Charter Mark standard in the area covered by the scope of the application. Objective evidence was obtained from a review of further documentation and interviews with staff, customers, representatives of partner organisations and senior management. In view of the customer focus of Charter Mark the views of customers are considered of great importance.

During the assessment process the Charter Mark criteria are scored on a four-band scale:

**Best Practice** – all aspects of the element are met, and the applicant can demonstrate that they have gone beyond the requirements

**Full compliance** –all aspects of the element are met

**Partial compliance** – some but not all aspects of the element are met and remedial action to meet the remainder could be put in place within a short period of time (maximum three months)

**Major non-compliance** - the requirements of the element are not met

The current scheme allows applicants a maximum number of partial compliances that equates to a pass mark of 70% for all criteria.

### 3. Opening Meeting

Prior to the commencement of the site assessment, a meeting was held and attended by the following personnel: -

Representing Derbyshire County Council – Social Services Department-Walton Hospital Assessment Team:

Teresa Bateman  
Glenys Clinton.  
John Ahmed.  
Janette Wajs

Representing SGS United Kingdom Ltd:

Fred Weston. (Lead Assessor)

The assessment activity and the operation of Non-compliances were explained and an itinerary, which had been forwarded to Derbyshire County Council – Social Services Department-Walton Hospital Assessment Team in advance, was agreed. The organisation was informed that all information obtained during the assessment would be treated in the strictest confidence.

The scope of Assessment was confirmed as: "Derbyshire County Council – Social Services Department-Walton Hospital Assessment Team"

## 4. On-site Assessment

The Assessors were accompanied throughout the assessment by Teresa Bateman with other Company Personnel being involved when assessing activities within their responsibility.

The assessment took place over one day.

The successful assessment resulted in the raising of ten minor non-compliances. A number of observations are listed in Section 5 of this report.

Details of the non-compliances follow for Derbyshire County Council – Social Services Department-Walton Hospital Assessment Team to address as appropriate and complete an action plan. Details of the action plan should be forwarded to SGS United Kingdom Ltd. within three months of the date of the assessment.

Criterion	Number of Elements	Maximum number of Partial compliances	Actual number of non / partial compliances
1	11	3	3
2	15	4	2
3	10	3	0
4	13	3	3
5	7	2	1
6	7	2	1

## 5. Details of Areas of non-compliance

### **CRITERION 1**

1.2.2 No evidence could be found that your performance against customer care standards is being monitored.

1.3.3 Information about and performance against your standards could be made available to a wider audience.

1.3.5 Although you provide feedback on individual customer issues this is not the case with more generic issues that may have affected your performance.

### **CRITERION 2**

2.1.5 No evidence could be found of feedback to customers on issues arising from the general consultation you engage in.

2.3.1 More could be done to provide information to customers and potential customers about your service.

### **CRITERION 3**

Fully compliant in this Criterion.

### **CRITERION 4**

4.2.1 No evidence could be provided of performance against all of your standards over the last three years.

4.2.2 No trends in the levels of customer satisfaction with your service were available.

4.3.5 Currently you are not publishing details of complaints, compliments or suggestions that are raised at a local service level to your customers.

### **CRITERION 5**

5.1.4 No evidence could be found that you benchmark your service against similar services.

### **CRITERION 6**

6.2.4 No formal system exists through which you can cascade the learning resulting from the community activity the Service engages in.

## 6. Closing Meeting

The closing meeting was attended by the following Personnel:

Representing Derbyshire County Council – Social Services  
Department-Walton Hospital Assessment Team:

Teresa Bateman  
Glenys Clinton.  
John Ahmed.  
Janette Wajs

Representing SGS United Kingdom Ltd:

Fred Weston.

The meeting was informed that Teresa Bateman Derbyshire County Council – Social Services Department-Walton Hospital Assessment Team would be recommended for the Charter Mark award. The partial compliances were discussed in detail and the observations made were noted by Teresa Bateman during the assessment.

## 7. Observations Made During Assessment Process

During the site assessment the following general observations were made. These can include positive observations of good practice and opportunities for improvement that were seen over the entire assessment process: -

- Excellent staff who are motivated, professional and clearly focused upon customer need.
- A very good range of well managed partnerships that are clearly resulting in an improvement in the experience of your customers.
- Good use of new technology, especially the use of Framework I, although the full potential offered by this development will not be achieved without clear linkages with the parallel NHS data management system.
- You are engaged in a number of interesting and innovative research projects, in particular the Derwent Project that is a very good example of multi-disciplinary team working.

- Very good levels of customer satisfaction are being achieved, however you should note the comments earlier in this report with regard to trends.
- Good support is provided to staff along with appropriate levels of training and this is generating a 'Can-do' culture and a positive enthusiasm for the Service.

## 8. Action Planning

The achievement of Charter Mark is an on-going activity and it is important that Derbyshire County Council – Social Services Department-Walton Hospital Assessment Team continue to meet the requirements of the Charter Mark criteria throughout the three years that the mark is awarded. In addition the ethos of Charter Mark is that the organisation continually improves during this period.

It is therefore a requirement of the scheme that SGS undertakes an action plan review visit twelve months from this assessment.

### Short Term Action Planning

Using the forms included at the end of this report the applicant should indicate the plans that they propose to put in place to ensure they meet the requirement of the standard identified as being non-compliant in section 5 of this report.

The action plan should include details of the actions to be taken and the timescales involved in completing the plan. In the case of Partial compliance this should not be more than three months.

### On-going review

It is a requirement of the grant of the Charter Mark certificate that the applicant informs SGS of any major change in the service provision covered by the scope of the certificate. This includes re-organisation or mergers of the applicant.

In addition SGS must be informed if the certificated service begins to receive a significant increase of customer complaints or critical press coverage.

If the organisation is in doubt we strongly recommend contacting the SGS Charter Mark Customer care team for advice on the significance of any service or organisational change or issues around customer complaints.

SGS will make an Action Plan Review visit within 12 months of the date of your certificate. The SGS Charter Mark Customer Service team will contact you to arrange this visit.

### **Report**

SGS recommends that Derbyshire County Council – Social Services Department-Walton Hospital Assessment Team retains a copy of this report to aid continuous improvement and as a reference document if the organisation chooses to re-apply for Charter Mark.