

# Quality Standards



**Specialist teaching and support  
services for deaf children  
and young people  
guidelines for professionals**



Deaf children and young people have the same right as everyone else to participate equally in education, to be included alongside their peers, and to achieve their potential across the full range of educational and life opportunities. Specialist teaching services play a crucial role in helping to improve outcomes for deaf children and young people.

This guidance sets out quality standards which can be applied across the full range of services provided for deaf children and young people in early years settings, mainstream, special school and other provision.

These quality standards have been created to lead to improved outcomes for deaf children and young people and to contribute directly to the achievement of national policies ensuring that deafness does not become a barrier to a child's development and achievement.

# Contents

	Paragraph	Page
<b>Overview</b>		2
<b>Introduction</b>	1–3	4
<b>Planning, developing and commissioning services</b>	4–10	5
<b>Self-evaluation</b>	11–14	8
<b>Gathering evidence</b>	15	9
<b>Identifying the contribution of the service</b>	16–18	9
<b>The standards</b>	19–20	10
<b>Section One: Outcomes – standards 1-6</b>	21–24	11
<b>Section Two: Service management and delivery – standards 7-16</b>	25–27	24

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# Overview



The standards which follow have been adapted from the (2008) DCSF standards for SEN Support and Outreach Services<sup>1</sup>, but DCSF endorsement of these standards should not be assumed and is not implied. This version has been developed specifically for use by specialist services for deaf children and young people, and has been drafted so that the standards can be applied throughout the UK. However, we acknowledge that services may want to adapt them to reflect the context in their countries. We are also aware that some national governments in the UK have or may wish to produce their own specific guidance for hearing support services. We would be pleased to support such initiatives and hope that this document will be helpful in the development and review of country-specific standards.

The work has been led by the former Regional Partnership facilitators who developed the DCSF standards, together with representatives from RNID, NDCS (both of which provided the funding), and BATOD. In addition we are grateful to the many specialist staff who contributed their knowledge and expertise through the consultation process.

The vision for children who are deaf is that their needs and those of their families are identified and assessed, and that appropriate intervention is received as early as

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<sup>1</sup> Quality Standards for Special Educational Needs (SEN) Support and Outreach Services. Department for Children, Schools and Families, 2008. DCSF Document ref 00582-2008DOM-EN. ISBN: 978-1-84775-245-1. Crown copyright 2008.

possible. Deaf Children and Young People (DCYP)<sup>2</sup> and their families need to receive early support from high quality, efficient and integrated services, which respond well to their changing needs. This vision of effective ongoing intervention, with access to high quality, multi-agency support, continues into transition and adult life.

Specialist teaching and support services for deaf children and young people will be delivered by a range of professionals working collaboratively. This will involve a number of different providers, working in partnership, to enable children and parents<sup>3</sup> to make informed choices around issues that affect their lives.

Services for deaf children and young people may take a variety of forms in different locations, but the standards set out here are intended to be broadly applicable irrespective of differences in settings and local or national policy across the four countries of the UK. It is hoped the standards will:

- illustrate good practice in the provision of services for deaf children and young people
- support local services to reduce variability and ensure quality of delivery
- help guide the development of local provision and support
- facilitate benchmarking provision across services to inform and influence commissioning
- assist those with statutory responsibility and others in determining appropriate resources and arrangements
- assist in the monitoring and evaluation process.

Specifically, the standards are designed to lead to improved outcomes for DCYP and will contribute directly to the achievement of national policies reflecting this, whilst ensuring that deafness does not become a barrier to a child developing and achieving.

A free downloadable copy of these standards is available from the NDCS website: [www.ndcs.org.uk/QS\\_hearingsupportservices](http://www.ndcs.org.uk/QS_hearingsupportservices).

Hard copies may also be ordered through the NDCS Freephone Helpline – see the back cover for details.

If you have any comments on these standards as a result of your experience in using them, please send them to NDCS using the attached evaluation form.

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<sup>2</sup> Throughout these standards, we have used the abbreviation DCYP. This is designed to cover all deaf children and young people, including those in settings and schools, and other provision. The term 'deaf' covers all degrees of hearing impairment.

<sup>3</sup> Here, and throughout the standards, 'parents' should be taken to include all those with parental responsibility (including corporate parents), or who have care of a child.

# Introduction

1. Specialist teaching and support services play a crucial role in helping to improve outcomes for DCYP. This guidance sets out quality standards which can be applied across the full range of services provided for DCYP in schools and settings, including mainstream, special school and other provision.
2. DCYP have the same entitlement as all CYP to participate equitably in education, to be included alongside their peers, and to achieve their potential across the full range of educational and wider opportunities.
3. **Using the standards should improve:**
  - the offer made by these services
  - the outcomes for DCYP
  - the efficient and effective use of resources**and should also:**
  - assist in planning, developing, and commissioning services
  - assist in developing effective partnership working
  - provide a framework for self-evaluation
  - build capacity within services and settings.

# Planning, developing and commissioning services

4. It is good practice for local authorities (LAs) and others with statutory responsibilities to carry out an audit and analysis of local needs when planning children's services. Effective commissioning and provision of high quality children's hearing services require accurate information about numbers of deaf children, their needs and the needs of their families. Any audit and analysis should be informed by specialist knowledge and appropriate consultation.
5. Effective commissioning and provision of high quality DCYP services require accurate information about the scale and nature of the hearing loss. The implementation in 2006 of the universal Newborn Hearing Screening Programme (NHSP) has been a major catalyst for change in children's hearing services.
6. Ideally any audit and analysis should lead to integrated commissioning arrangements for all support and outreach services through locally and nationally determined, or other, arrangements. These arrangements should always link to local health and social care services, and, where appropriate, to local providers within the private and voluntary sectors, whilst recognising parents as full and equal partners in the team.
7. The standards will assist LAs, integrated teams, school clusters and federations, schools and settings and other provision, in commissioning services for DCYP. They could also be used to inform service level agreements and other contractual arrangements. They provide a basis on which existing services can be monitored and developed to better meet the needs of the client group.
8. The standards will support systematic monitoring to ensure that all services, including health, audiology, speech and language therapy, and any equipment provided (such as hearing aids, personal FM systems and implants) are appropriate.
9. Services for DCYP also play a role in school improvement. Where services are traded, commissioning arrangements should take into account the need for impartiality, and the ability to challenge settings and schools, and other provision about practice, without prejudicing any contractual arrangements.
10. Permanent hearing loss or deafness in children is a low incidence disability but one that needs vigilant detection to ensure that the life chances of the deaf child are not affected negatively. Services for DCYP are delivered in a context, nationally and locally, where data is known, albeit always on small scale samples. This data can set the context for delivery and development of services. Some relevant examples follow:
  - 90% of deaf children are born to hearing families<sup>4</sup>
  - The implementation of the Newborn Hearing Screening Programme (NHSP), which has been universally available since 2006, has provided the opportunity

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<sup>4</sup> Schein, J. D. (1989). *At home among strangers*. Washington, DC: Gallaudet University Press.

for congenitally deaf children to be identified very soon after birth. From published epidemiological evidence we know that approximately 1.6 babies per 1000 born will have a permanent childhood hearing impairment (PCHI)<sup>5</sup>

- An estimated further 0.5-0.9 per 1000 children develop or acquire PCHI by the age of 10 (Fortnum et al. 2001)<sup>6</sup>
- All hearing difficulties are more common in disadvantaged and ethnic communities due to a combination of factors, including the impact of poverty and social deprivation on the health of the mother in pregnancy, and some genetic conditions (Fortnum and Davis 1997<sup>7</sup>, Kubba et al. 2004)<sup>8</sup>
- Approximately half the cases of permanent childhood hearing impairment have a genetic cause (Morton 1991)<sup>9</sup>
- 30%-40% of DCYP have additional health needs or development problems (e.g. Fortnum and Davis 1997), and 20% have more than two
- There is evidence that children with hearing impairment are more likely to experience mental health problems or to be abused. Estimates relating to deaf children suggest a prevalence of mental health problems of 40% compared to 25% in their hearing counterparts<sup>10</sup>
- 2007 School Census information for England shows that:
  - 12,345 pupils attending all schools were placed at school action plus on the SEN Code of Practice or with statements where hearing impairment was the main type of special educational need
  - Of those placed at school action plus or with statements where hearing impairment was the main type of special educational need
    - 22% were eligible for free school meals
    - 25% were recorded as having an additional special educational need (8% with moderate learning difficulty and 7% with speech, language and communication needs)
    - 21% were recorded as being from minority ethnic groups (compared with 17% for all pupils)

5 Report of the Evaluation of the first phase of implementation of the NHSP (Revised 2005). Permanent Childhood Hearing Impairment (PCHI) is defined as bilateral hearing impairment exceeding 40 dBHL ([http://www.who.int/pbd/deafness/hearing\\_impairment\\_grades](http://www.who.int/pbd/deafness/hearing_impairment_grades)).

6 Fortnum H., Summerfield Q., Marshall D., Davis A., and Bamford J., Prevalence of permanent childhood hearing impairment in the United Kingdom and implications for universal neonatal hearing screening: questionnaire based ascertainment study; *BMJ* 2001; 323:536.

7 Fortnum, H. and Davis, A. Epidemiology of permanent childhood hearing impairment in Trent Region, 1985-1993, *British Journal of Audiology*, 1997, 31, 409-446.

8 Kubba H., Macandie C., Ritchie K., and Macfarlane M., *Is deafness a disease of poverty? The association between socio-economic deprivation and congenital hearing impairment*. *International Journal of Audiology*, 1708-8186, Volume 43, Issue 3, 2004, Pages 123 – 125.

9 Morton, N. D. (1991). Genetic epidemiology of hearing impairment. *Annals of the New York Academy of Science*, 630, 16–31.

10 Department of Health and National Institute of Mental Health (2005) 'Towards Equity and Access'.

- The number of pupils placed at school action plus or with statements where hearing impairment is the prime type of SEN represents 0.2% of the total pupil population (i.e. two per thousand). For Asian and British Asian pupils the incidence rate is higher at three per thousand and for Pakistani pupils the incidence is five per thousand
- The number of pupils placed at school action plus or with statements where hearing impairment is the prime type of SEN represents 2.1% of all pupils placed at school action plus or with statements
- A further 3,040 pupils placed at school action plus or with statements had hearing impairment recorded as a secondary type of SEN. However, the completion of the secondary SEN type on the School Census is not statutory, so caution should be used when considering this number.



# Self-evaluation

11. Many services for deaf children and young people already have self-evaluation procedures in place. Rather than replacing these, services may choose to use the quality standards to provide a framework for comparison which will enable any gaps in the service to be identified. A comprehensive self-evaluation will cover all the areas set out in the standards, with appropriate supporting evidence being gathered on a regular basis.
12. Services will find it useful to benchmark their performance against similar services on a regional or national basis, although it is recognised that individual variation in local configuration of services may mean that direct comparisons cannot always be made.
13. Data from self-evaluation should be collected regularly, with annual data collated over a three-year period, enabling trends to be identified towards targets which may be derived from benchmarking activity.
14. Many services collect data concerning activity levels and the perceptions of service users. To make use of the quality standards to promote service improvement, the information derived from collected data should be compared against these standards. Services can then rate themselves against the following criteria:

**Outstanding** – can consistently demonstrate high rates of progress in the majority of DCYP, and provide evidence of continuous improvement in service management and delivery in most areas over a three-year period.

**Good** – can demonstrate high rates of progress in the majority of DCYP, and can provide evidence of improvement in service management and delivery in most areas.

**Satisfactory** – can provide consistent evidence of positive outcomes for DCYP, and can show how data has been used to improve service management and delivery in some areas.

**Inadequate** – few examples of evidence showing positive outcomes for DCYP can be provided.

# Gathering evidence

15. Evidence in support of the standards may fall into one of two broad categories:
  - a. Performance measures – generally provided as numerical data which may reflect progress made by DCYP in the form of targets achieved including those relating to: social, emotional, attitudinal or behavioural issues; attainment and achievement data; results of criterion and norm referenced testing; contextual value added; progress through the curriculum; or activity levels of the service.
  - b. Perception measures – generally of the recipients of the service including DCYP, their parents and service staff, but also school improvement services, other partners, and local authority commissioners. This may take the form of evidence gathered from questionnaires, surveys and interviews. Anecdotal evidence may also be useful to support other evidence for illustrative purposes.

## Identifying the contribution of the service

16. It is often difficult to differentiate the contribution made by a service to the progress of individual DCYP from that made by the school, setting, or other provision; the contribution of parents; and the progress that may have been made anyway. These elements are central to any judgements about service effectiveness and include issues around value for money.
17. Whilst it is impossible to fully separate the impact of these different elements, where a support or outreach service has:
  - a. intervened either directly (e.g. through regular individual 1:1 or small group contact) or indirectly (through consultation and advice to staff, or parents) and
  - b. identified and set targets and
  - c. implemented or advised on strategy to attain these targetsevidence of progress towards these targets, which may be gathered jointly, can be attributed to the work of the service, whilst recognising that the outcome is the result of partnership working.
18. For example, a peripatetic teacher of the deaf may work directly with a young person on a regular basis on communication, or a pre-school home visitor may help parents set targets for their child and advise on home-based activities to achieve the targets. In both cases progress towards targets can be attributed to the work of the service, even though in the latter case the service may not have worked directly with the child to achieve them.

# The standards

19. These standards are presented in two sections: outcomes and service management and delivery. Whilst the effectiveness of a service will be judged by the quality of the outcomes it achieves, these will reflect how well the service is led and managed. External assessment of a service for deaf children and young people is likely to focus primarily on outcomes, but the delivery of excellence requires managers to ensure that they also focus on the means by which this can be achieved.
  
20. Whilst the standards which follow directly reflect those in the DCSF document, as well as being adapted for services for DCYP, descriptors have been provided for each of the four levels to assist services in carrying out their self-evaluation. These should be used as a guide in this process, bearing in mind that services may identify other factors they may wish to take into account.

# Section One: Outcomes

## Introduction to the Outcomes Standards 1-6

21. The primary purpose of services is to improve outcomes for DCYP. These may be relatively broad, such as ensuring that the current placement for an individual DCYP can meet his/her needs, or quite specific as in achieving functional literacy or age appropriate communication skills.
22. Outcomes may be derived from objectives set out in formal documents (such as a statement of special educational needs), individual or group targets or provision plans. They should be considered, where appropriate, in the context of national and local policy.
23. It is essential for services for deaf children to establish, where appropriate, links with health and other services and participate in any joint assessment procedures. Services should be proactive in ensuring the safety of DCYP, enable them to make a positive contribution in their setting, and support transition planning.
24. In addition to outcomes for DCYP, this section also addresses outcomes for parents, settings and schools, other partners, and staff.



**STANDARD 1 – Programmes of intervention for DCYP provide support to parents, settings and schools, and individuals which are specifically tailored to improve young people’s life chances. These programmes will include educational, linguistic, audiological, social and emotional support/ guidance. Outcome data will be systematically monitored and recorded in order to secure continuous service improvement.**

Supporting evidence:

- Programmes and interventions are regularly monitored.
- Intervention strategies are modified to take account of the response of DCYP, parents, settings and schools and individuals; feedback is given to them and their own views are carefully considered and acted upon.
- Outcome data is systematically identified, collected and analysed over time to evaluate the effectiveness of intervention strategies.
- The progress of individuals or particular groups of DCYP is monitored after intervention has finished, where appropriate, especially at important transition times between settings.

## Descriptors

### Outstanding

Quality assured data has been collected, analysed, and benchmarked over most areas of activity over a three-year period.

Data, including regular and accurate assessment, is used to inform individual intervention strategies and there is evidence of good progress for most DCYP over a three-year period.

DCYP and parents have been consistently involved in monitoring progress and interventions over a three-year period.

Interventions have been systematically differentiated and improved based on data analysis over a three-year period.



### Good

Quality assured data is collected and analysed over most areas of activity.

Data, including regular and accurate assessment, is used to inform individual intervention strategies and there is evidence of good progress for most DCYP.

DCYP and parents are consistently involved in monitoring progress and interventions.

Interventions are regularly differentiated based on data analysis.



### Satisfactory

Quality assured data is collected and analysed and used to support service improvement and planning.

Data, including regular and accurate assessment, is used to inform individual intervention strategies.

DCYP and parents are involved in monitoring progress and interventions.

There is evidence of differentiation arising from data analysis.



### Inadequate

Some data is collected but quality assurance and analysis is limited.

Data is not used sufficiently to evaluate the effectiveness of intervention strategies.

DCYP and parents are rarely involved in discussion of interventions.

There is an insufficiently differentiated approach to individual needs arising from interpretation of the data.





**STANDARD 2 – An effective service promotes the use of interventions based on up-to-date specialist knowledge through regular and targeted in-service training, awareness raising and sharing of current techniques in line with national policy and outcomes for children.**

Supporting evidence:

- Interventions are realistic within the context of the setting.
- Intended outcomes are agreed with DCYP, their class or subject teacher and parents, and others involved with them.
- Interventions are planned to enhance the development of self-confidence and self-esteem.
- Targets in intervention programmes are SMART.

## Descriptors

### Outstanding

Interventions have been systematic and targets SMART over a three-year period, relate to agreed outcomes and enhance the development of self-confidence and self-esteem.

There is evidence of good progress for most DCYP over a three-year period.

Interventions have been introduced with consistent involvement of DCYP, their class teacher and parents over a three-year period.



### Good

Interventions are systematic and targets are SMART. They relate to agreed outcomes and enhance the development of self-confidence and self-esteem.

There is evidence of good progress for most DCYP.

Interventions are introduced with significant involvement of DCYP, their class teacher and parents.



### Satisfactory

Interventions are usually systematic and some of the intervention targets are SMART, relate to agreed outcomes and enhance the development of self-confidence and self-esteem.

There is evidence of progress for DCYP.

Interventions are introduced with some involvement of DCYP, their class teacher and parents on a regular basis.



### Inadequate

Interventions are not systematic and there is no consistent attempt to ensure that intervention targets are SMART, relate to agreed outcomes and enhance the development of self-confidence and self-esteem.

There is little evidence of progress for DCYP.

Interventions are introduced without significant involvement of DCYP, their class teacher and parents.





**STANDARD 3 – Parents of DCYP should be involved in the planning of interventions and outcomes to support their child’s learning and development. For services this will involve a variety of family friendly processes from the earliest stage and throughout their school life.**

Supporting evidence:

- Interventions and intended outcomes are agreed with parents.
- Parents are involved in planning, informing or supporting any intervention programme.
- Information is collected from parents/key workers/lead professionals concerning their views about the effectiveness of the service, and where appropriate, is acted upon.
- Parents are provided with information in an accessible manner.

## Descriptors

### Outstanding

All parents have been given the opportunity to be involved in agreement of intended outcomes for interventions and have been over at least a three-year period.

Parents consistently feel valued and feel that their contributions and requests are listened to and they receive a response.

All parents have been given the opportunity to be actively involved in informing and supporting strategies and have been over a three-year period.

Information from all parents and professionals has been sought and used regularly and systematically and can be shown to have informed the service development plan over a three-year period.

The service can demonstrate an innovative and strategic approach to engaging all parents.

All parents are provided with a comprehensive range of accessible information.

### Good

All parents are regularly given opportunities to be involved in agreement of intended outcomes for interventions.

Parents usually feel valued and feel that their contributions and requests are listened to and they receive a response.

All parents are regularly given opportunities to be actively involved in informing and supporting strategies.

Information from parents and professionals is used regularly and consistently to inform the service development plan.

A comprehensive range of accessible information is provided to the majority of parents.

### Satisfactory

Parents are regularly given opportunities to be involved in agreement of intended outcomes for interventions.

Parents are regularly given opportunities to be involved in informing or supporting strategies.

There is some evidence of the active involvement of parents in informing the service development plan.

There is accessible information for parents.

### Inadequate

Parents are rarely involved in the agreement of intended outcomes for interventions.

Parents are rarely involved in informing or supporting interventions.

There is limited use of information from parents and professionals to inform service development.

There is limited provision of accessible information for parents.





**STANDARD 4 – Services will work in partnership with schools and settings to increase their capacity to meet the needs of DCYP without creating a culture of dependency. In this process, services will develop contractual arrangements with settings and schools, and provide training and advice on the effective use of support.**

Supporting evidence:

- A contractual relationship, such as a service level agreement or partnership agreement, which clearly describes the obligations and expectations of all parties, is established with schools and other settings.
- Services are delivered in a manner designed to increase the capacity of settings and schools, and other provision to meet user needs from within their own resources and expertise.
- Services are delivered in a manner that is consistent with target setting processes within the service.
- Planning for the use of additional resources ensures that there is an appropriate ratio between providing targeted support and ensuring the individual DCYP is enabled to become an independent learner.

## Descriptors

### Outstanding

Contractual arrangements or a working partnership have been negotiated, evaluated and developed in over a three-year period.

There is evidence, over a three-year period, that services have effectively developed the capacity and self-sufficiency of providers.

There is evidence, over a three-year period, that target setting is consistent and reflected in whole service delivery.

There is evidence, over a three-year period, that the DCYP is increasingly self-sufficient, resilient and an independent learner.

### Good

There is clear evidence of the establishment of contractual arrangements or a working partnership.

There is clear evidence that services are effectively developing the capacity and self sufficiency of providers.

There is clear evidence that target setting and delivery of service is consistent.

There is consistent evidence that the DCYP is increasingly self-sufficient, resilient and an independent learner.

### Satisfactory

There is some evidence of the establishment of contractual arrangements or a working partnership.

There is some evidence that services are increasing the capacity and self sufficiency of providers.

There is some evidence that delivery of the service to agreed targets is developing.

There is some evidence that collaborative planning of targeted support is facilitating increasing independence.

### Inadequate

There is no evidence that a contractual arrangement or a working partnership has been established and information shared.

DCYP services are not evaluated as being effective in developing increasing strategies for independence.

There is little correlation between the DCYP service targets and service delivery.

There is insufficient evidence of collaborative involvement in the planning and use of targeted support for DCYP in order to promote self-sufficiency and resilience.





**STANDARD 5 – Services have a clear purpose which takes into account LA policies, the needs of schools and settings, and the specialist needs of DCYP.**

Supporting evidence:

- Services are commissioned to undertake specific types of work reflecting LA and national policies.
- The service contributes to the achievement of LA targets and capacity building as part of the overall range of provision.
- Written agreements are in place about the services provided to all those involved.
- There is collaboration with other services and statutory and voluntary agencies to ensure that the contribution of each is maximised for the benefit of DCYP.

## Descriptors

### Outstanding

Service aims clearly reflect LA and national policies and plans and have done so over a three-year period.

The service can demonstrate a significant contribution to achieving LA targets and capacity building over a three- year period.

All involved with the service have easy access to clear and comprehensive written agreements about what the service provides which have been in place for a three-year period.

There is considerable evidence of consistent and effective collaboration with other statutory and voluntary agencies that has benefited DCYP consistently over a three-year period.

### Good

Service aims clearly reflect LA and national policies and plans.

The service can demonstrate a significant contribution to achieving LA targets and capacity building.

There are clear and comprehensive written agreements in place about what the service provides.

There is clear evidence of consistent and effective collaboration with other statutory and voluntary agencies that benefits DCYP consistently.

### Satisfactory

Service aims reflect LA and national policies and plans.

The service can demonstrate some contribution to achieving LA targets and capacity building.

There are some written agreements in place about what the service provides.

There is some collaboration with other statutory and voluntary agencies that benefits DCYP.

### Inadequate

Service aims do not sufficiently reflect LA and national policies and plans.

The service cannot demonstrate that it is making a contribution to achieving LA targets and capacity building.

There are insufficient written agreements in place about what the service provides.

There is limited collaboration with other statutory and voluntary agencies that benefits DCYP.





**STANDARD 6 – Feedback about the effectiveness of service interventions is collected from DCYP, parents and other stakeholders. This feedback is collated on a regular basis and used to inform service planning, delivery and improvement. The contribution of the service to the progress of DCYP is monitored in part through this feedback.**

Supporting evidence:

- Views about the effectiveness of the service are collected from DCYP.
- Feedback is gathered regularly in relation to the contribution of the service to the progress of individuals and groups of DCYP, to the continuing professional development (CPD) of staff, and to the fulfilment of the school, setting, or other provision's mission and objectives.
- There are audit trails showing how feedback from service users has been used to improve service delivery.

## Descriptors

### Outstanding

DCYP have been given regular and innovative opportunities to feed back their views on the service they receive for at least a three-year period.

There is consistent evidence that feedback from service users has been used to improve service delivery over at least a three-year period.

There is regular and consistent use of audit trails to evidence how feedback from service users has improved service delivery over at least a three-year period.

### Good

DCYP are given regular opportunities to feed back their views on the service they receive.

There is consistent evidence that feedback from service users has been used to improve service delivery.

There is regular and consistent use of audit trails to evidence how feedback from service users has improved service delivery.

### Satisfactory

DCYP are given some opportunity to feed back their views on the service they receive.

There is evidence that feedback from service users has been used to improve service delivery.

Some audit trails have been used to evidence instances of where feedback from service users has been used to improve service delivery.

### Inadequate

DCYP are rarely given the opportunity to feed back their views on the service they receive.

There is little evidence that feedback from service users has been used to improve service delivery.

Audit trails are not used to evidence how feedback from service users has been used to improve service delivery.



# Section Two: Service management and delivery

## Introduction to the SMD Standards 7-16

1. The achievement of outcomes will depend on how well the service is led and managed. Where an outreach service is provided by a school, setting or other provision, the standards could be addressed through existing management processes. However, there should be clarity about allocation of resources to the core business of the school, setting or other provision, and to the outreach service, and the impact of one upon the other.
2. Where services are traded, the principles of ‘full cost recovery’<sup>11</sup> should be followed to ensure that these criteria can be adequately met.
3. This section addresses a range of service management areas including leadership (which can be exercised at various organisational levels), policy, processes, staff, partnerships and resources.

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<sup>11</sup> ‘Full cost recovery’ means the inclusion of all overheads and expenses in estimating the costs of service delivery.





**STANDARD 7 – Leaders have a clear vision with the aims and objectives of the service outlined in a development plan which is regularly reviewed in line with other LA plans. Diversity is embraced by recognising the unique nature of each DCYP and the wider needs of their families.**

Supporting evidence:

- The service has a clear purpose and values shared by all members of staff.
- The service development plan is reviewed regularly, in the context of local and national policies and strategy, and shared with staff.
- Managers demonstrate commitment and support for continual improvement.
- Managers articulate the values of the service and lead by example.
- The service has a process to review leadership effectiveness (e.g. 360° feedback).

### **Descriptors**

#### **Outstanding**

The service has a clear purpose and values and there is evidence that the vision has been clearly articulated by all staff over three years.

There has been consistent review of the service development plan over a three-year period, within the context of local and national policy. There is evidence that staff understand the development plan.

Leaders of the DCYP service have evidence of staff involvement in the service development plan over a three-year review cycle, with clear and relevant reference to LA policy and context.

There is evidence of the positive impact of systematic appraisal and review over a three-year period, on the role of leaders and managers.

There is good evidence over a three-year period that leaders have promoted equal opportunities and celebrated diversity.



## Good

The service has a clear purpose and values which are shared by all staff.

There is a regular review cycle for the development plan which sits within other local plans and national context, and is articulated to staff.

The DCYP plan reflects the views of the staff, through management consultation, in a published review cycle, consistent with LA objectives.

Managers demonstrate strategic leadership and commitment through careful planning and evaluation of service development.

There is evidence of the impact of systematic appraisal and review on the role of leaders and managers.

There is good evidence that leaders promote equal opportunities and celebrate diversity.

## Satisfactory

There is some understanding of the purpose, values and vision of the service shared by staff.

The service development plan is reviewed, but not systematically. There is some reference to other policies, and staff are sometimes informed.

Most DCYP service staff are involved in the development of plans for the service.

There is evidence from service managers that there is a developing strategy for DCYP service development.

There is evidence, through appraisal, of the role of the leaders and managers which demonstrates some areas of strength.

There is evidence that leaders promote equal opportunities and celebrate diversity.

## Inadequate

The purpose and values of the service for DCYP are not clearly articulated and there is no coherent vision shared by staff.

The DCYP service development plan is rarely reviewed and does not take account of other local authority policies for children and their parents, and the national context and initiatives.

DCYP service staff are not involved to a significant degree in the development of plans for the service.

There is no evident strategic commitment to continuing DCYP service development.

There is little evidence of strong leadership or evaluation of its effects on the service for DCYP.

There is little evidence that leaders promote equal opportunities and celebrate diversity.



**STANDARD 8 – Services for DCYP will be led by managers who motivate, support and recognise the culture of continuous improvement amongst staff. Staff are treated equally and fairly with full involvement and consultation when change is required.**

Supporting evidence:

- Managers engage with and listen to staff at all levels.
- All staff members are able to give examples of supportive, effective and motivational leadership and describe how their contribution to the service is recognised by managers.
- There is evidence to show that all staff are treated equally/fairly.
- Managers empower all staff to be involved in change.
- Managers ensure appropriate resources and support are provided for change initiatives.

## Descriptors

### Outstanding

A process of consultation with all staff is in place and documented. Meetings are recorded and outcomes inform the continued development of professional skills for all staff. Consultation is planned and regular over a three-year period.

Appraisal and 360<sup>0</sup> feedback takes place on a planned regular basis and is documented. Outcomes demonstrate strong leadership and guide continued improvement. Staff are given formal feedback which is timely and supportive.

All staff are given opportunities to contribute to service development through planned and structured meetings. There is clear evidence to show that issues relating to management are resolved within given timeframes and procedures.

The service development plan is shared with all staff and details individual staff responsibilities in meeting targets. Staff are actively encouraged to propose, change and modify targets over a three-year period. Resources are planned and allocated over a rolling three- year period to support all service activities and staffing.



## **Good**

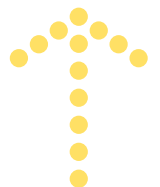
There is a clear process of consultation with all staff and outcomes are documented.

Managers' performance is monitored through regular appraisal. Meetings are documented and demonstrate clear targets for improvement. Staff are provided with timely support and guidance towards service targets.

All staff are given opportunities to contribute to service development through informal meetings. Managers ensure all staff are supported equally and that any issues of management are addressed.

The service publishes a clear development plan which is shared with all staff.

Resources are allocated to support new initiatives and maintenance targets.



## **Satisfactory**

Consultation is in place for members of staff and outcomes are documented.

Managers' performance is monitored through regular performance management meetings. Staff are given feedback on their performance meeting service aims.

Staff are given opportunities to contribute to service development. Managers provide informal opportunities for staff to discuss issues of management.

There is a documented plan for service development, which is shared with staff. Some resource management is evident in the meeting of service targets.



## **Inadequate**

There is no formal process of consultation with staff, where issues and developments can be discussed.

Feedback on managers' performance (e.g. 360<sup>0</sup>) identifies significant weaknesses in leadership.

There is little or no evidence to illustrate that staff are given equal opportunity to affect service development and delivery. There is evidence that issues relating to management have not been resolved with individual members of staff.

There is no clear plan of service development. Developments, where they exist, are not connected to the service plan and do not allow for the provision of adequate resources and support.



**STANDARD 9 – Leaders maintain positive relationships with DCYP, parents, settings and schools, and other providers. Managers keep the profile of their service and the needs of DCYP high on the wider agenda.**

Supporting evidence:

- Fully accessible information is published about what users can expect from services, their costs and how well they perform in meeting the needs of DCYP.
- Managers are involved in a range of external activities that develop and support the service, including sharing effective working practice with others.
- Managers can demonstrate how their involvement has delivered improvement and growth, and/or enhanced the reputation of the service.
- Complaints procedures are clear and accessible to service users and speedy and effective action is taken in response to complaints.
- Information from complaints, compliments and other feedback is used to inform service development.

**Descriptors**

**Outstanding**

The service publishes a comprehensive range of information on service provision and intervention. Costs relating to all service activity are published or available on request.

There is a structured process of evaluating effectiveness of service provision over a three-year period. Outcomes are shared and guide future development of the service in partnership with stakeholders.

The service can demonstrate involvement in collaborative working across regional boundaries. The service contributes and leads in some areas of national guidance.

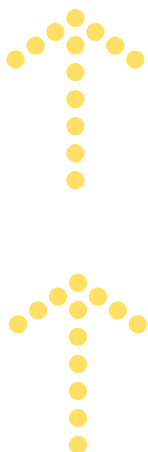
Improvement and growth is planned and evaluated in consultation with stakeholders and DCYP. Outcomes of evaluation are used to guide future development over a three-year period. Improvements and growth are clearly documented and shared with stakeholders and DCYP.

There is a clear process for complaints at LA level. Complaints and compliments are recorded and shared with dedicated LA department. Outcomes have informed future service development over a three-year period.

**Good**

Published information on service provision is available to all stakeholders in an accessible form. Costs relating to core service provision are available to all stakeholders.

Service intervention and provision are monitored regularly and outcomes of its effectiveness shared with stakeholders.



There is a high degree of inter-authority collaboration which is mutually supportive. The service contributes to national recommendations and guidance.

Managers' performance towards improvement and growth is monitored and evaluated at senior management level. There is clear planning for service development in place. Targets are set and outcomes demonstrated through feedback.

There is a clear process of complaints at LA level. Complaints and compliments are recorded and shared with dedicated LA department. Outcomes inform future service development.

### **Satisfactory**

There is published information on the activities of the service to DCYP and stakeholders. Information is available to parents and stakeholders. Information on service provision costs is available to stakeholders.

The service monitors the effectiveness of its interventions with DCYP and parents.

There is evidence of collaborative working with neighbouring LAs. The service works within a framework of national guidance.

Evaluation of managers' performance against service outcomes takes place within the local context. Some areas of service improvement and growth can be demonstrated.

There are guidelines for complaints which operate at service level. Procedures are in place but not monitored.

Complaints and compliments are dealt with at service level and outcomes used to inform future service provision.

### **Inadequate**

There is no published information on the activities and remit of the services to DCYP which is accessible to all users. Costs for service provision, where they are charged, are not clearly identified or provided in a timely fashion.

There is no information on the effectiveness of the services offered to DCYP and their parents.

There is little evidence of collaborative working with other services or authorities. Processes are implemented in isolation and not shared with other agencies/services.

No formal evaluation of managers' effectiveness takes place. Service improvement and growth is not monitored or recorded.

There are no clear published guidelines for parents and stakeholders on procedures for complaints. Responses to complaints are not carried out in accordance with authority regulations and timescales.

The service makes no attempt to amend service delivery in response to complaints and compliments.





**STANDARD 10 – The development of services for DCYP takes place with the involvement and consultation of all parties to shape planning and service delivery. Services for DCYP should promote the principles of ‘informed choice’.**

Supporting evidence:

- The views of DCYP and parents, settings and schools, and other providers are sought in evaluating the service and when changes are proposed.
- Ideas and suggestions from parents, settings and schools, and other providers are evaluated and, where appropriate, incorporated into plans.
- Policy and strategy are based on the present and future needs and expectations of all service users and stakeholders.
- Policies are designed to give service users choice about the services provided.
- Expectations are clearly stated and include arrangements for transparent communication, access to services, response times and accountability.

## Descriptors

### Outstanding

The service carries out regular and comprehensive consultation with DCYP and all stakeholders. Responses are systematically recorded and guide development of provision over a three-year period.

Future needs of the service have been evaluated over a three-year period within a framework of consultation with stakeholders and DCYP. The service is responsive to guidance and recommendations in the field of hearing impairment and wider educational context.

Policies offer flexibility in service provision and are adapted in response to consultation and feedback from all stakeholders and DCYP.

Expectations for parents and DCYP are clearly identified and documented. Policy and practice are reviewed in consultation with stakeholders and DCYP and form the basis for service development over a three-year period.

Accountability for all service provision is clearly defined and shared with stakeholders and DCYP.

### Good

The service regularly consults with DCYP and stakeholders when planning future developments of the service.

Service provision is reviewed in consultation with all relevant stakeholders and DCYP. There is a clear process that drives policy change which is shared with stakeholders. Outcomes are used to guide future service provision.

Expectations for parents and DCYP are clearly identified. Policy and practice is reviewed in light of feedback from stakeholders. Accountability for overall service provision is clearly defined and shared with stakeholders and DCYP.

### Satisfactory

There is evidence of active consultation with DCYP and stakeholders when proposals to change service provision are made.

There is evidence of active consultation with stakeholders when considering changes in policy and practice. Current practice is reviewed at service level only.

The service regularly communicates expectations to some parents and DCYP. Practices and protocols are developed at service level only.

Accountability for service provision is defined but not fully shared with stakeholders.

### Inadequate

There is no formal mechanism in place to promote consultation with stakeholders. Proposed changes to service provision are not shared with stakeholders.

Future needs of service users are not considered within the scope of policy and practice. Current practice is not reviewed in collaboration with stakeholders.

Service policies are not shared with stakeholders and are not responsive to users' changing needs.

There is no mechanism to communicate the service's expectations for parents and DCYP. Service practices and protocols are not clearly communicated to stakeholders. Accountability for service provision is not clearly defined; stakeholders are unable to judge the chain of responsibility.





**STANDARD 11 – Services for DCYP will have a service development plan which is reviewed and updated regularly. The needs of DCYP are integrated into the wider context of local authority and national policies and plans. Managers of services for DCYP will ensure that regional benchmarking takes place and that the outcomes inform the service development plan.**

Supporting evidence:

- The service development plan is based on information from performance measurement, research, learning and externally related activities such as benchmarking.
- The plan is aligned to the local, regional and national policies.
- Managers and all staff understand the plan and recognise their role in fulfilling its objectives.
- The plan balances the long- and short-term requirements of the service, addresses the needs of stakeholders, and takes account of contingency and risk.
- There is a robust process for communicating, reviewing and updating the service development plan.

## Descriptors

### Outstanding

The service development plan has been fully informed by data relating to service delivery, benchmarking and other external data over a three-year period.

There is evidence of substantial continual development and improvement in service delivery driven by the service development plan over a three-year period.

In addition to responding to local and national plans, there is evidence of active involvement and influence in the formulation of local plans.

Annual review procedures involving users and stakeholders have been in place for a three-year period.

### Good

The service development plan is fully informed by data relating to service delivery, benchmarking and other external data.

It is clear how the service development plan is informed by relevant local and national plans.

Staff are fully committed to achieving the service development plan.

The service development plan is comprehensive, addressing all relevant areas.

Annual review procedures are comprehensive and include users and stakeholders.

### Satisfactory

A service development plan is in place based on data collected internally or externally.

The service development plan makes reference to local and national plans, although it is not clear how one informs or enhances the other.

Staff are aware of the service development plan, and work towards achieving it.

The plan addresses most relevant issues, with only minor omissions.

Annual review procedures are in place.

### Inadequate

There is no service development plan in place, or the plan is out of date and not informed by recently collected data.

The service development plan does not take into account other relevant plans focusing on children and young people.

A service development plan is in place but it is not owned by staff and is not reflected in service delivery.

The service development plan does not address all relevant issues.

No review procedures are in place for the service development plan.





**STANDARD 12 – Key processes<sup>12</sup> within services will embrace the concept of inclusion to ensure the rights and responsibilities of DCYP and their parents are fully respected. Recent research will inform service practice and feedback from stakeholders will support the principles of core service activities.**

Supporting evidence:

- Key processes uphold principles of inclusion in its widest sense and are clearly defined and communicated.
- All staff are clear about their own responsibilities.
- Performance measures, standards and improvement targets are in place for key processes, and planning for DCYP takes account of recent research and published data.
- Resource allocation to DCYP is regularly reviewed to ensure equitable access to services.
- Key processes are regularly reviewed, with employers and stakeholders having an opportunity to feed back on their effectiveness.

<sup>12</sup> 'Key processes' refers to the main activities of the service such as referral, assessment, intervention etc.

## Descriptors

### Outstanding

Evidence of the impact of the service in promoting inclusion is available over a three-year period.

There is evidence of improvement in the key processes of service delivery over a three-year period as a result of data analysis.

The service is actively involved in carrying out research.

There is evidence of improvement in key processes as a result of the effective management of resources.

There is evidence of continual improvement in key processes as a result of regular review over a three-year period.

### Good

The service promotes inclusion and data is systematically collected which evidences this.

Staff are motivated to deliver the service to the best of their ability.

Data is systematically gathered to improve key processes.

Key processes are fully informed by recent research.

Resource allocation is regularly reviewed to enhance key processes.

Key processes are reviewed systematically and feedback sought from users and stakeholders.

### Satisfactory

The service promotes inclusion, although there is only anecdotal data of the impact.

Staff carry out their duties in accordance with service policy.

Data is gathered around key processes, although there are some gaps.

Account is taken of recent research evidence.

Resource allocation is reviewed as and when the need arises.

Key processes are reviewed when there is evidence of a need to improve.

### Inadequate

The service is delivered in a manner which does not promote inclusion.

Staff carry out their duties in accordance with their own beliefs rather than service policy.

Data is not gathered, nor targets set, for service delivery.

Service delivery is not informed by recent research.

Resources are deployed on the basis of custom and practice.

Service delivery remains largely static and unchanged, and is not shaped by feedback.



**STANDARD 13 – Services for DCYP manage staff effectively and efficiently to the benefit of the service users. A performance management process is in place in line with the relevant professional requirements, and managers have the knowledge and skills required to implement this.**

Supporting evidence:

- Managers have the knowledge and skills they need to develop their staff effectively, including access to specialist advice and support as necessary, and ensure that appropriate training and development opportunities are provided, and are accessible to all staff.
- All staff are consistently and effectively managed from recruitment through to exit, to the mutual benefit of the individual, the service and the LA.
- Examples to demonstrate improvements in the efficiency and effectiveness of all staff, informed by the routine collection of information on staff satisfaction, turnover, sickness and absenteeism, can be identified at all levels.
- Managers ensure that appropriate professional guidance is accessible.
- Performance appraisal of all staff is effective, the achievement of staff performance targets is monitored, and the process leads to training and development aligned to the performance requirements of the service, and the defined needs of the individual.

**Descriptors**

**Outstanding**

Managers have the knowledge and skills to develop staff effectively and this has taken place over at least a three-year period.

There is a well-structured programme of training and development, which is accessible and promoted to all staff according to their needs and roles, and which has been in place for a three- year period.

The training has a positive impact beyond the service.

Staff are consistently and effectively managed at all stages of their work from recruitment to exit.

The management of staff has significant benefits for the individual, the service and the organisation over a three-year period.

There is a well understood mechanism to illustrate how the efficiency and effectiveness of staff are identified at all levels of work; examples of good practice are used to improve the service which has a clear effect on the progress of most DCYP over a three-year period.

Professional guidance is consistently available and accessible and has an impact both within and beyond the LA.

Performance appraisal is consistent, targets are monitored, appropriate training and development is agreed and consistently provided and links directly to the needs of the individual and the service; its positive impact has been monitored over a three-year period.



## Good

Managers have the knowledge and skills including specialist advice and support to develop staff effectively.

There is a well-structured programme of training and development, which is accessible and promoted to all staff according to their needs and roles.

Staff are consistently and effectively managed at all stages of their work from recruitment to exit.

The management of staff has significant benefits for the individual, the service and the organisation.

There is a well-understood mechanism to illustrate how the efficiency and effectiveness of staff are identified at all levels of work; examples of good practice are used to improve the service which has a clear effect on the progress of most DCYP.

Professional guidance is consistently available and accessible.

Performance appraisal is consistent, targets are monitored, appropriate training and development is agreed and consistently provided and links directly to the needs of the individual and the service.

## Satisfactory

Managers have the knowledge and skills including specialist advice and support needed to develop staff effectively but there is only a limited programme of training and development which is not consistently available to all staff.

There is evidence that staff are managed appropriately during a range of stages of their work from recruitment to exit.

The management of staff has discernible benefits for the individual, the service and the organisation.

There is a mechanism to illustrate how the efficiency and effectiveness of staff can be identified at all levels of work although this is not consistently applied; examples of good practice in this area are used to improve the service.

Some professional guidance is available and accessible.

There is evidence of some effective performance appraisal in which targets are monitored and appropriate training and development is provided, and there is appropriate understanding of the role of the teacher of the deaf, linking directly to the needs of the individual and the service although this is not consistent across the service.

## Inadequate

Managers do not have the knowledge and skills including specialist advice and support to develop staff effectively. There is no appropriate programme of training and development.

Staff are not consistently and effectively managed at all stages of their work from recruitment to exit.

There is no consistent mechanism to illustrate how the efficiency and effectiveness of staff can be identified.

Professional guidance is not consistently available and accessible.

Performance appraisal is inconsistent: targets are not systematically monitored, or the appraiser has no up-to-date understanding of the role of the teacher of the deaf; appropriate training and development is not agreed or, if agreed, not consistently provided, and does not link directly to the needs of the individual and the service.



**STANDARD 14 – All staff within services for DCYP will achieve and maintain high levels of specialist knowledge relevant to the field of deafness and its implications. Staff will remain up to date in understanding the special needs of DCYP and their families with the competency to develop new insights to overcome barriers. For teachers this will mean the mandatory qualification (MQ).**

Supporting evidence:

- All staff maintain high levels of specialist knowledge/appropriate qualifications including significant participation in multi-agency training. They keep up-to-date with current research and methodologies, and have the necessary personal skills for partnership working with fellow professionals and others.
- All staff understand the nature of DCYP's needs and the range of provision that best promotes their achievements, and are able to provide new insights to overcome barriers.
- All staff are skilled in communicating with service users and stakeholders, and can disseminate and share information effectively and appropriately, including funding arrangements for additional or special educational needs within the LA.
- The service recognises the contribution of all staff to its success, acknowledges individual achievements, and promotes policies designed to maintain a reasonable work/life balance.
- All staff have the opportunity to take part in service development activities and projects within the organisation. Data is gathered on the impact of training and development.

## Descriptors

### Outstanding

Staff have high levels of specialist knowledge and appropriate and advanced qualifications, including for teachers, the MQ, and have a positive impact on other professionals both within and beyond the LA.

All staff have actively extended their knowledge of developments in the field of deaf education over a three-year period.

Service development activities are arranged to ensure participation from all staff and their impact has been monitored over a three-year period.

Staff consistently and effectively communicate and share information with service users and stakeholders and the impact of this has been monitored over a three-year period.

The service has a clear and consistent policy to recognise the contribution of individual staff and to ensure that staff maintain a reasonable work-life balance and the impact of this has been monitored over a three-year period.



## **Good**

Staff have high levels of specialist knowledge and appropriate qualifications, including for teachers, the MQ.

Staff actively extend their knowledge of developments in the field of deaf education.

Service development activities are arranged to ensure participation from all staff and their impact is monitored.

Staff consistently and effectively communicate and share information with service users and stakeholders.

The service ethos recognises the contribution of individual staff and ensures that staff maintain a reasonable work-life balance.

## **Satisfactory**

There is some effort to ensure that staff have appropriate levels of specialist knowledge and appropriate qualifications, including for teachers, the MQ.

Staff are encouraged to extend their knowledge of developments in the field of deaf education.

Service development activities are arranged to ensure participation from the majority of staff although their impact is not systematically monitored.

Staff communicate and share some information with service users and stakeholders although this is not consistent and comprehensive.

The service recognises the contribution of individual staff and tries to ensure that staff maintain a reasonable work-life balance although this is not consistent.

## **Inadequate**

There is no consistent approach to ensuring that staff have high levels of specialist knowledge and appropriate qualifications, including for teachers, the MQ.

Staff are not encouraged to extend their knowledge of developments in the field of deaf education.

Service development activities are not arranged to ensure participation from all staff and their impact is not monitored.

Staff do not consistently and effectively communicate and share information with service users and stakeholders.

The service does not have a clear and consistent policy to recognise the contribution of individual staff and to ensure that staff maintain a reasonable work-life balance.





**STANDARD 15 – There is collaboration with other service providers and parents to ensure that services are complementary, easy to access and use, effective and joined up to deliver an optimum service to DCYP and their parents.**

Supporting evidence:

- There are clear links between key partnerships and the overall mission, vision and goals of the service.
- Services are commissioned to undertake specific types of work within their own local context, taking account of other local services and funding arrangements.
- Management responsibilities and lines of accountability are clear in a multi-agency context.
- There is joint working with partners and parents through multi-agency forums to encourage innovation and continuous improvement.
- Organisational and cultural differences with partners are recognised and addressed.

## Descriptors

### Outstanding

There is excellent and detailed evidence of the service for DCYP working regularly and effectively in collaboration with other service providers and parents over a three-year period at all relevant levels of operation.

There is clear evidence of effective working with parents over a three-year period.

There are clear management responsibilities across agencies with evidence logged over a three-year period to show innovation and continuous improvement, resulting from effective joint working.



### Good

There is good evidence of the service for DCYP working regularly and effectively in collaboration with other service providers at case and strategic level.

There is clear evidence of effective working with parents.

Management responsibilities are clear to all service providers in the multi-agency context and there is good evidence of joint working to achieve continuous improvement.



### Satisfactory

There is evidence of joint working between the service for DCYP and other service providers indicating positive outcomes but this operates only at individual case level.

There is evidence of effective working with parents.

Management responsibilities are clear in the multi-agency context and some evidence exists of joint working to achieve continuous improvement.



### Inadequate

The service for DCYP works mostly in isolation with little evidence of effective multi-agency working and few examples of positive outcomes achieved through joint working.

There is little evidence of effective working with parents.

There is a lack of clarity regarding management responsibilities in the multi-agency context and insufficient evidence of joint working to achieve continuous improvement.





**STANDARD 16 – The needs of DCYP and their families are met through astute financial management of services which supports performance and operational requirements and achieves value for money. The specialised technology required for DCYP is properly managed with a rolling programme of investment and replacement.**

Supporting evidence:

- A clear funding strategy is in place, linked to the service development plan and local authority policies and plans.
- Financial resources are deployed to ensure equality of access for all service users.
- The service development plan includes strategies for maintaining and sustaining the quality of any premises and specialist resources to improve accessibility and standards of education.
- There is a policy for managing technology, including the maintenance of specialist equipment and the replacement of outdated equipment where it would otherwise impact on service provision.
- Review procedures are in place to identify and evaluate new and emerging technologies which may have an impact on service delivery.

## Descriptors

### Outstanding

There is excellent evidence of the ways in which the funding strategy has been effectively linked to service plans and has supported the performance and operational requirements of the service for DCYP over a three-year period.

The policy for the management and replacement of specialist equipment for DCYP is effective. There is evidence from the records of planning, training and inventories over a three-year period that the service is effective in its approach to identifying and evaluating new technology.

There is good evidence of effective deployment of resources and equality of access for DCYP which can be tracked over a three-year period.

### Good

There is good evidence of a clear funding strategy with links to service plans which show effective support of the performance and operational requirements of the service for DCYP.

A policy is in place for the management and replacement of specialist equipment for DCYP and the service has a good record of identifying and evaluating new technology.

There is good evidence of effective deployment of resources and equality of access for DCYP and their families.

### Satisfactory

There is a funding strategy in place to support the performance and operational requirements of the service for DCYP.

A policy is in place for the management and replacement of specialist equipment for DCYP and there is some identification and evaluation of new technology.

There is evidence of effective deployment of resources and equality of access for DCYP and their families.

### Inadequate

Financial and resource management undermines the performance and operational requirements of the service for DCYP.

There is no policy for the management and replacement of specialist equipment for DCYP and new technology is not properly identified or evaluated.

Inadequate deployment of resources leads to inequality of service access for DCYP and their families.



RNID is the charity working to create a world where deafness or hearing loss do not limit or determine opportunity, and where people value their hearing. We work by campaigning and lobbying, raising awareness of deafness and hearing loss, promoting hearing health, providing services and through social, medical and technical research.

NDCS is the national charity dedicated to creating a world without barriers for deaf children and young people. We represent the interests and campaign for the rights of all deaf children and young people from birth until they lead independent lives.

BATOD is the only association representing and safeguarding the interests of teachers of deaf children and young people in the United Kingdom. BATOD promotes the educational interests of all deaf children, young people and adults.



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