

## Director Audit tool for Community Rehabilitation Best Practice Standards

Please review each statement and answer “Yes/no” as to whether your centre is meeting each recommendation in order to make a valid assessment of areas for improvement. You can also include your own suggestions for how you plan to address each recommendation in “Action plan”.

### Referral process

Measure			Action plan
I ensure that the information that specifies the direct access pathways is easily available in a variety of formats	Yes	No	
I ensure rapid and skilled triage of patients through the access point	Yes	No	
The clinicians I manage have the autonomy to set their appointment times so that patients are supported to self-manage, including learning how and when to self-refer	Yes	No	
I work within the rehabilitation network to ensure that written and online materials meet the needs of the local community	Yes	No	
I monitor referrals to ensure that underserved populations are not neglected	Yes	No	

I ensure reasonable adjustments are made to ensure equity of access and provision	Yes	No	
I provide a directory of rehabilitation services and a map which demonstrates potential flow of patients through the system	Yes	No	
I ensure the map and directory is updated as required, no less frequently than annually	Yes	No	

### Rehabilitation interventions timely/co-ordinated

I recognise the importance and complexity of the care co-ordination role by allowing enough time to be allocated to this in people's job plans	Yes	No	
I deliver and monitor mandatory training in needs-led assessment and the biopsychosocial model	Yes	No	
I work to ensure that paperwork and IT systems support interdisciplinary and needs-led approaches	Yes	No	
I ensure that information can be shared between systems easily and effectively	Yes	No	
I facilitate case management discussion	Yes	No	
I ensure that all team members have a shared understanding of admission and discharge procedures	Yes	No	

## Rehabilitation interventions meet patient need

I deliver and monitor mandatory face-to-face training in patient activation	Yes	No	
I deliver and monitor mandatory face-to-face training in shared decision-making	Yes	No	
I deliver and monitor mandatory face-to-face training in simple behaviour change techniques	Yes	No	
I work with commissioners, local clinicians and the rehabilitation network to map current pathways, identify service duplications and service gaps	Yes	No	
I work with local clinicians and the rehabilitation network to develop clear pathways for patients with different needs, including those with multimorbidity, and with options for patients with different levels of activation	Yes	No	
I ensure staff have time to provide information, undertake patient activation, and shared decision-making , recognising that 'front-ending' clinical consultations will save time in the long term	Yes	No	

## Rehabilitation pathways meet need

I ensure information can be shared, with appropriate governance, between different services and care providers	Yes	No	
I provide multidisciplinary input to care homes	Yes	No	

I provide the resources to support behaviour change that allow patients to progress their rehabilitation, including, minor pieces of equipment, short telephone contacts, emails, texts, online support	Yes	No	
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### Rehabilitation services enable optimisation

I have the budget to ensure adequate staff numbers, and expertise to deliver timely and effective treatment	Yes	No	
I deliver and monitor mandatory face-to-face training in supported self-management	Yes	No	
The service I manage provides generic- and condition-specific structured education courses, both digital and face to face	Yes	No	
I ensure the long-term conditions register is maintained and patients are offered annual review	Yes	No	
I provide practice placements to support the ongoing workforce supply for effective rehab programmes	Yes	No	

### Rehabilitation services are well led

I conduct audits and benchmark my services against similar services elsewhere	Yes	No	
I identify service priorities and link, collate and review data to these	Yes	No	

I ensure staff are aware of the data analysis and how this feeds into service design	Yes	No	
I ensure that the information system is appropriate and sufficient to gather and review information on rehabilitation services to monitor quality and outcomes	Yes	No	
I support a learning culture around compliments, complaints, adverse incidents and SUIs	Yes	No	

## Family, Friends, and Carers

I have developed pathways to support families	Yes	No	
I monitor the experience of families by obtaining feedback	Yes	No	
I understand where the data I collect is sent	Yes	No	
I understand how the data I collect gets used because there is regular feedback	Yes	No	
I work within a culture that celebrates excellence and which allows me to acknowledge and learn from errors	Yes	No	

## Family, friends & carers

I identify which patients rely on carers	Agree	Mostly Agree	Mostly Disagree	Disagree
I encourage families to attend appointments	Agree	Mostly Agree	Mostly Disagree	Disagree
I encourage families to ask questions	Agree	Mostly Agree	Mostly Disagree	Disagree
I involve families in the development of the rehabilitation plan and aim to develop shared expectations of rehabilitation	Agree	Mostly Agree	Mostly Disagree	Disagree
I am confident in engaging carers in the rehabilitation treatment plan to enable its implementation	Agree	Mostly Agree	Mostly Disagree	Disagree
I make sure families are familiar with and confident in the use of any equipment that has been provided	Agree	Mostly Agree	Mostly Disagree	Disagree
I can recognise when families need support and refer to specialist services when needed	Agree	Mostly Agree	Mostly Disagree	Disagree



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