POLICY AND STRATEGY

Information and advice quality framework

Defines the quality standards for accredited information and advice providers.

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Contents

Introduction

The provision of information, advice and guidance services in Wales is a key enabler of the Welsh Government's Programme for Government 2021 to 2025 and will contribute to the goals of the Well-being of Future Generations (Wales) Act 2015 into the future and the Social Services and Well-being (Wales) Act 2014. Access to these services is seen as central in giving everyone a fair and equal chance in life. As such, the Welsh Government is committed to strengthening information, advice and guidance services, with the aim of helping people to understand and exercise their rights and make informed decisions about their lives.

This edition of the framework is a refreshed version of the document first produced in 2018 and captures learning from the response of services to meet the needs of individual and communities through successive waves of COVID and the economic and social recovery from COVID. It builds upon earlier work undertaken by the Welsh Government, such as the Advice Services review and reflects the strategic priorities of the Welsh National Advice Network.

As a funder of organisations providing free and independent information, advice and guidance services, the Welsh Government has a particular interest in ensuring that the organisations it funds are effectively managed; that the information and advice provided by them is up to date and that staff providing front-line services have the necessary skills and competencies to provide the best possible service to clients.

The Information and Advice Quality framework (IAQF Wales) continues to seek to provide a consistent approach to ensuring and assuring quality information, advice and guidance for the people of Wales.

For local authorities

If the service being accredited is part of a local authority providing an information, advice and assistance (IAA) service, as required by the Social Services and Well-being (Wales) Act 2014, there will be specific duties and requirements under the Act, Regulations, codes of practice and guidance relating to aspects which are included in this framework. Examples include needs assessments (quality criteria 2.2), safeguarding (3.6), the awareness framework (including safeguarding training, 5.1) and case requirements for IAA (4.3). Should the legal requirements relating to IAA services differ from the requirements of the IAQF Wales the legal requirements will take precedence.

Accountabilities

IAQF Wales is owned by the Welsh Government and both the content of the IAQF Wales, and the associated assurance processes will be reviewed by Welsh Government periodically. IAQF Wales builds upon the range of existing quality assurance schemes used by many information and/or advice providers in Wales. It does not establish a new set of standards but requires existing standards to address and meet the quality criteria within the 7 quality areas. Similarly, IAQF Wales does not establish a separate assurance process for individual providers but works with existing assurance processes undertaken by standard owners where these are compliant with the requirements of IAQF Wales.

Standard owners providing quality assurance services to individual service providers in Wales wishing to become an IAQF Wales approved accrediting body are required to map both the content of their standards and their assurance processes to ensure compliance with the requirements of IAQF Wales. Where there is variation, they may be required to adapt their scheme to secure accrediting body status. The opportunity to develop standards and assurance

processes compliant with IAQF Wales and seek IAQF Wales approved accrediting body status is open to any organisation.

IAQF Wales approved accrediting bodies will provide assurance that providers accredited against IAQF Wales, meet the requirements of the framework. IAQF Wales accredited providers will be responsible for ensuring that their services meet the needs of their service users and delivered in line with the requirements of IAQF Wales.

The Welsh Government will maintain a register of IAQF Wales approved accrediting bodies whose standards and processes have been assessed as meeting and continuing to meet the requirements of the IAQF Wales to ensure the integrity of the framework. The accompanying document "The IAQF Wales: Becoming an IAQF Wales Approved Accrediting Body" provides further information on the removal of IAQF Wales approved accrediting body status where there are concerns that changes to that body's scheme or that body's operation of the scheme may undermine the integrity of IAQF Wales. IAQF Wales will also be subject to review and revision, changes to IAQF Wales may require IAQF Wales approved accrediting bodies to be reassessed against any new requirements arising from such reviews.

IAQF Wales approved accrediting body status is normally provided to standard owners for a period of 3 years.

Freedom of Information

In all cases, the auditors and the agencies should be aware that correspondence, notes and reports shared with the Welsh Government are potentially subject to FOIA.

A dynamic framework

IAQF Wales is designed to be an evolving framework and will be subject to periodic review and development. We welcome your comments on IAQF Wales and contact details are provided on the web-site.

The benefits of the framework

In this section we highlight the key benefits for different groups from IAQF Wales.

For the public

IAQF Wales is designed to assist members of the public in the selection of sources of support by providing assurance that information and advice services offer high quality interventions. All organisations complying with IAQF Wales will have been independently assessed as providing quality services. IAQF Wales compliant services are easily identifiable. Each service displays the IAQF Wales quality mark on their premises, websites and other published materials.

For funders

IAQF Wales is designed to provide assurance to all funders of advice and associated services in Wales that they are supporting good quality services with a commitment to continuous improvement.

For service providers

For service providers IAQF Wales is designed to provide a consistent means of demonstrating the quality of services that they provide. IAQF Wales allows providers to demonstrate to the public and their funders that they are providing a quality service.

IAQF Wales compliance also supports efficient and effective service delivery as providers will have a robust framework of policies, procedures and processes to underpin their work. Policies, procedures and processes are not an end in themselves but are essential to ensure the delivery of consistently high-quality information, advice and associated services. Alongside assurance that each service has all the necessary policies, procedures and processes, IAQF Wales is focused on delivering good outcomes and will assess the quality of service provided.

Referral between information and advice providers is an important means of ensuring that individuals receive the best possible service to meet their needs. IAQF Wales allows providers to make referrals to other organisations with the confidence to know that their client will receive a service of high and consistent quality.

The process for securing IAQF Wales through existing standard owners who have secured IAQF Wales approved accrediting body status allows providers to select the most appropriate quality assurance scheme for their service to provide them with external assessment and support.

For standard owners

Separate documentation, "The IAQF Wales: Becoming an IAQF Wales Approved Accrediting Body" has been prepared for standard owners to assist

them to register their current quality assurance process as compliant with the IAQF Wales. Further information and guidance can be found on the website.

The assurance process

The approach to quality assurance in Wales not only seeks to ensure that all information, advice and guidance providers meet minimum standards in relation to safety, responsiveness and effectiveness, but also seeks to embed a culture of continuous improvement within individual providers and across the sector as whole.

IAQF Wales builds upon the range of existing quality assurance schemes used by some information and/or advice providers in Wales. It does not establish a new set of standards but requires existing standards to address and meet the quality criteria within the individual quality areas. Similarly, IAQF Wales does not establish a separate assurance process for individual providers but works with existing assurance processes undertaken by standard owners where these are compliant with the requirements of IAQF Wales.

Standard owners providing quality assurance services to individual providers in Wales may need to adapt both the content of their standards and their assurance processes to comply with the requirements of IAQF Wales. The opportunity to develop standards and assurance processes compliant with IAQF Wales and seek IAQF Wales approved accrediting body status is open to any organisation.

IAQF Wales accreditation issued by standard owners will normally be for a maximum period of 3 years from the issuing of an organisation's audit or assessment report (IAQF Wales approved accrediting bodies may require more frequent assessments). Continued maintenance of this accreditation is dependent upon "Interim Validation" where accredited services must undertake

an internal self-assessment indicating continued compliance with IAQF Wales at the midpoint of that service's accreditation (or more frequently if required by that service's IAQF Wales approved accrediting body) with the reporting of major changes to their standard owner. IAQF Wales approved accrediting bodies will determine the major changes in relation to turnover, staffing changes etc. that the service must report on and any action that may be required by that service to maintain their accreditation which may include full or partial re-audit or other remedial action. Further information is included in the IAQF Wales: becoming an IAQF Wales approved accrediting body document.

IAQF Wales quality assurance and improvement cycle

The improvement cycle below illustrates the IAQF Wales approach to the different stages of assurance:

- self assessment
- external desk top process assessment
- qualitative assessment (including peer review where appropriate
- report
- improvement plan
- improvement plan
- interim validation

Ongoing requirements for standard owners

Services accredited against the IAQF Wales will need to:

- submit full details of their service to the Welsh Government's directory of information and advice providers
- update full details of their service to the Welsh Government's directory of information and advice providers within 1 month of any change to their

service

- confirm their data entry on the Welsh Government's directory of information and advice providers every 6 months
- prominently display IAQF Wales accreditation logo in premises and other materials in line with any published guidance by the Welsh Government
- remove any IAQF Wales accreditation marks within 7 days of the suspension, withdrawal or removal of IAQF Wales accreditation

Changes to the scope of IAQF Wales

The terms of reference for the review of IAQF Wales which has informed this edition were to:

- maintain a robust framework that promotes confidence of the public, funders, referral bodies and standard owners
- ensure that IAQF continues to promote continuous improvements in front-line services
- ensure that the process requirements are consistent with standards assessment best practice
- ensure that the content requirements are consistent with best practice in service delivery
- ensure that the scope of IAQF reflects the range and diversity of the range of services providing information and advice in Wales

The service response to COVID brought about many changes to the day-to-day operation of local services with, for many, much greater use of, for example, telephone and other support, a different cohort of services users or different presenting needs and often much closer inter-agency working. It also galvanised engagement of many more people in community action through varied services such as food banks, befriending schemes and many others. This is reflected in the change to the scope of IAQF Wales and the requirements for quality

assurance standards for smaller organisations being reframed to be more proportionate to the service provided.

The mandated requirement to work from home meant that quality assurance services themselves were forced to change, for example, often undertaking service audits remotely.

This is reflected in the change to the IAQF process requirements below.

There has also been learning from delivery of the IAQF Wales approved accrediting body arrangements delivered through IAQF's regulation and improvement service. This learning is reflected in other minor changes and updates in the IAQF Wales.

Scope

Following the review of IAQF Wales the scope of the scheme has been expanded to include a new category of "associated service" which is designed to provide a quality assurance framework for smaller organisations and services which are engaged in some aspects of information, advice or guidance but are not primarily focused on this area. The definition of "associated services" draws upon the distinction between money advice and money guidance developed by the **money and pensions service**.

Advice

An advice service is likely to recommend a course of action for you to take based upon the information you have provided and your circumstances. It will be provided by a qualified and regulated individual or by a regulated organisation. Providers of advice are responsible and liable for the accuracy, quality and suitability of any recommendation they make and you are protected by law.

Associated Services

Associated services are more likely to provide you with information and guidance that can help you narrow your options but will not make a recommendation on what course of action you should take. Providers of these services are responsible for the accuracy and quality of the information they provide but not for any decision that you make that is based on this information. It may suggest what you might do but it will not recommend any course of action.

From June 2022 Standard Owners will need to identify which of the following categories of IAQF accreditation they are seeking. The choices are:

- IAQF core service: this replaces the former category of "IAQF accredited (without peer review)"
- IAQF core service plus: this replaces the former category of "IAQF accredited (with peer review)"
- IAQF associated service: this is a new category with amended requirements for quality assurance standards being reframed to be more proportionate and appropriate to the service provided. We appreciate that the difference between advice, information and guidance can by a grey area. IAQF's regulation and improvement service will collaborate with standard owners to identify which category of IAQF best reflects the services that they wish to assure.

Associated Services form a key part of local services and IAQF regulation and improvement will work with potential standard owners to bring forward schemes that support such services on their quality improvement journeys.

IAQF process

IAQF's assessment process has been updated to reflect learning from the operation of quality assurance schemes by standard owners during COVID lockdowns. The requirement for on-site inspections has been removed. IAQF's regulation and improvement service will examine the methodology of standard owners in relation to remote, on-site or mixed media approaches as part of the assessment of standard owners applications.

IAQF content

For core service and core service plus, there have been some minor changes to the requirements in a number of quality areas and there are significant changes to the arrangements in relation to quality area 7: outcomes. For standard owners that have already obtained approved accrediting body status the IAQF regulation and improvement service will provide targeted briefings.

For associated services, there are a new set of requirements.

Definitions

What does good information and advice look like?

Good quality information and advice is:

- factually accurate and up-to-date
- impartial and in the best interest of the client
- delivered by an appropriately trained and competent information worker or adviser

- appropriate and relevant to the client's needs and circumstances
- provided in such a way as to enable the client to make informed and appropriate choices from options presented and take positive/beneficial action where possible
- followed-up to assess the impact of the information or advice

Types of advice

IAQF Wales recognises that information and advice may take many forms. We have defined these as types of advice. The existence of all these types of advice is important in ensuring that all members of the community have access to the right support at the right time. Delivering good quality information is just as important as delivering good quality specialist casework, perhaps more important, without good quality information the numbers who may require specialist support would be unsustainable and many would find their needs unmet.

IAQF Wales has divided information and advice into 5 broad headings:

- type 1: information
- type 2: guidance
- type 3: advice
- type 4: advice with casework
- type 5: specialist casework

In addition, IAQF Wales now covers a new category of associated service.

In the sections below we provide a more detailed description of each type with an example of what that definition means in practice. Please note, within this report we have provided a range of generic examples The IAQF Wales: guidance and good practice document contains further examples relating to particular advice topics.

Type 1: information

Describes a service which gives clients the information they need for them to know more and do more about their situation. It can include providing information about policies, rights and practices; and about local and national services and agencies who may be able to offer the client further help. Responsibility for any further action rests with the client.

A client asks whether he can get help with his council tax. You provide him with a leaflet "Help with Council Tax" and provide details of 2 local advice services which offer advice on welfare benefits.

Type 2: guidance

Describes a service which may discuss the advantages and disadvantages of different options without making specific recommendations. It may include making and receiving referrals, identifying emergencies and prioritising issues.

A client wants to understand his finance options before choosing a new or used car. The money adviser explains the features of various purchasing options but does not recommend a particular finance option or provider.

Type 3: advice

Describes services which diagnose the client's legal problem and any related legal matters; identifies options and relevant legislation and decide how it applies to a client's specific circumstances; includes identifying the implications and consequences of such action and grounds for taking action; includes form filling; provides information on matters relevant to the problem such as advising on next steps and identifying dates by which action must be taken to secure the

client's rights. Advice may take place on more than 1 occasion.

A client asks whether she can get help with caring for an elderly neighbour. You conduct a benefit check and identify she may be entitled to claim carers allowance depending on her neighbour's benefits situation. You advise the client to obtain a claim form to protect her potential date of claim and offer details of services who can offer help to the client and her neighbour.

Type 4: advice with casework

Includes all elements of an advice service and involves acting on behalf of the client to move the case on. It could include negotiating on behalf of the client with third parties on the telephone, by letter or face to face. It will involve the advice provider taking responsibility for follow-up work.

A student is having difficulty in negotiating the return of their damage deposit from local landlord. You contact the landlord and explain that you will be supporting the student to recover the maximum value of the deposit. The landlord claims there was damage to the property which the student later accepts. You negotiate a reasonable deduction for the damage.

Type 5: specialist casework

Describes services where the adviser or the service undertakes advice and casework at a level where very detailed knowledge of the law and case law is required. Usually this means it is delivered by advisers who have the necessary depth of legal knowledge and expertise to undertake representation for clients through the court or tribunal.

The client has lost a first-tier social security tribunal. Your adviser identifies an error of law in the tribunal's decision which they will go on to argue before the

Upper Tribunal. Their arguments will reference legislation and case law.

Associated services

This is a new category for IAQF Wales and is designed to expand access to quality assurance schemes to a wider range of support services. It is designed to be permissive and to be appropriate for a wide range of services where there may be some element of information, advice or guidance but their main work is likely to be other activities such as befriending schemes, foodbanks etc. By developing this new category, it ensures such services can participate in local partnerships funded through Welsh Government's Single Advice Fund, which requires partners to be IAQF accredited.

Advice topics

IAQF Wales has been developed in response to the Welsh Government's identification of the important role that information and advice services should play in supporting the delivery of 2 of its strategic goals:

- tackling poverty and promoting financial inclusion
- promoting equality and building cohesive communities

Services should also promote the national well-being outcomes set out in the Well-being statement for people who need care and support and carers who need support, issued under the Social Service and Well-being (Wales) Act 2014. It is also expected that information and advice services will play an important role in ensuring that Wales delivers against the aspirations contained within Well-being of Future Generations (Wales) Act 2015. This overarching framework provides the opportunity to address the requirements of delivering outcomes that tackle poverty, promote equality and community cohesion and address the needs set out in the Social Service and Well-being (Wales) Act under the

following headings:

- a prosperous Wales
- a resilient Wales
- a healthier Wales
- a more equal Wales
- a Wales of cohesive communities
- a Wales of vibrant and thriving welsh language
- a globally responsible Wales

To this end IAQF Wales is particularly focused on those social welfare advice topics that directly support these goals, most importantly:

- welfare benefits
- financial inclusion including debt and money advice
- housing and homelessness
- employment
- immigration
- discrimination

If the focus of a service is in providing information and advice on other topics IAQF Wales may still be relevant to your work. For example, if the service is focussed on advising the victims of domestic abuse an understanding of an individual's rights under housing law or means by which they may secure welfare benefits or tackle debt may still be relevant.

IAQF Wales quality areas

IAQF Wales comprises 7 quality areas:

1. well managed

2. well planned
3. accessible, caring and safe
4. accurate and appropriate
5. competent staff
6. bilingual
7. delivering outcomes

1: well managed

Robust general management standards to deliver effective and sustainable management of the service and its resources. Six requirements.

2: well planned

Ensuring interventions are evidence based, reflect the needs of the community, subject to periodic review with robust governance to ensure effective accountability. Four requirements.

3: accessible, caring and safe

Accessible to all members of the community, providing the highest standards of quality care and place the safety of the individual at the centre of their work. Six requirements.

4: accurate and appropriate

All paid and unpaid staff gain, maintain and develop the awareness, knowledge and skills necessary to meet the needs of their service users. Three requirements.

5: competent staff

All paid and unpaid staff gain, maintain and develop the awareness, knowledge and skills necessary to meet the needs of their service users.

6: bilingual

Services have arrangements in place to meet the needs of individuals whose preferred or required language is Welsh. Good practice for Welsh language should be the service aspiration for all relevant community languages. Three requirements.

7: delivering outcomes

Services should be moving towards having measures to assess the impact that their service is making. One requirement.

Appendices: detailed quality requirements

Core service and core service plus

Overview

Robust General Management Standards should deliver effective and sustainable management of the service and its resources.

Quality area 2: well planned

Quality criteria	Evidence of compliance	Satisfactory/good	Outstanding
1.1. The service has a clear remit based on need, detailing: • the information and/or advice topics covered by the service • the information and/or advice "types" of advice offered • the methods for delivering the service (for example face to face, telephone etc. • the target population for the service (for example by geographical area and/or community of interest such as young people only etc.)	A written remit for the service is available. Advice topics, types, methods of delivery and target population are included in promotional materials for the public.	Needs assessment completed (see 2.2 below). Clear, written and published remit available and aligned with the needs assessment. Evidence of capacity to respond rapidly to new or emerging needs.	Evidence of planning and reviewing the remit of the individual service in partnership with other relevant organisations and/or provider agencies. Evidence of public consultation on the remit of the service.

Quality criteria	Evidence of compliance	Satisfactory/good	Outstanding
1.2 Clear management structure with defined roles and responsibilities	Organogram or written description of management structure, including, where applicable, governing body. Roles and responsibilities of everyone involved in planning, management and delivery of services.	Organogram with review date within last 12 months. Evidence of inclusion of management structures within staff induction plans. Dated job descriptions for all of those involved in the planning, management and delivery of services. Staff have knowledge of management structure, roles and responsibilities.	For third sector organisations this must include details of current governing body members and roles where applicable. Succession plan for key management and governance roles. Clear development routes for all staff.
1.3 All staff involved in the planning, management, support or delivery of services have regular supervision, annual appraisal and access to staff development opportunities	Clear policy on paid and unpaid staff supervision, appraisal and development commensurate with experience. Staff training	Evidence of regular supervision of all paid and unpaid staff and annual appraisal / review of development plan. Individual and / or organisational training plan supported linked to development plans.	Succession planning for staff in service critical roles (for example some specialist advisers). Development programme which demonstrates developing capacity including business

Quality criteria	Evidence of compliance	Satisfactory/good	Outstanding
	records demonstrating appropriate training has been provided commensurate with work roles and responsibilities.	Staff attendance records are in place and these are reviewed.	critical roles.
		Organisational policies, procedures and documentation covering all aspects of health and safety compliance in relation to the service provider's remit. Examples: lone working, visiting services users in their home, workstations.	Evidence of individuals taking up development opportunities (internally and externally).
	Health, safety and well-being of staff reflected in robust policies.		The service demonstrates a proactive policy for promoting staff well-being.
	Staff training budget in place.	Staff training on equality, diversity and discrimination awareness and diversity provided at induction and at least every 2 years thereafter.	The service demonstrates a proactive policy for dignity at work.
	Training records for all staff in equality and diversity are maintained.		Adopts an innovative approach to ensure staff conduct their roles well and safely.
	Monitoring in place for paid and unpaid staff by protected characteristics.		

Quality criteria	Evidence of compliance	Satisfactory/good	Outstanding
1.4 Robust system of financial management	Clear documentation of financial management systems with documented lines of delegated authority for budget holders. Clear arrangements for establishing and monitoring annual service budgets.	Named individual responsible for overall financial management. Arrangements for periodic external scrutiny of finances by senior person not involved in day to day financial management for example treasurer / management committee. Annual service budget prepared and regularly reviewed. External audit undertaken where legally required. Management reports on performance against budget reviewed at least 4 times per year.	Indicative service budget prepared for the next 3 years including best case, base case and worst-case scenarios. Clear assessment/ mitigation of financial risks included in budget. Evidence that financial prudence is observed with organisation management (for example procurement procedures). Regular management accounts show budgets vs. actual by project and explain variances.
1.5 Clear lines of internal communication	Internal communication plan. Team meeting	Team meetings or alternative method of internal communication taking place at least 10 times per year.	Staff engagement in planning. Whistle blowing policy.

Quality criteria	Evidence of compliance	Satisfactory/good	Outstanding
	cycle. For third sector organisations management committee meetings held according to constitutional requirements.	Documented procedures for staff escalating concerns about service or management.	'End to end' communication and organisational understanding. Examples: 'back to the floor days' for managers / board members; staff suggestions; job mentoring etc.
1.6 Compliance with all relevant general legislation and regulation	Office manual identifying relevant legislation and detailing compliance and staff awareness of this. Legal requirements adhered to for example Financial Conduct Authority. Authorisation held where the service	Up to date office manual with evidence of review within last 12 months. Inclusion of office manual within induction plan for new staff. Insurances held are appropriate to the service provided. Evidence of organisation / staff awareness of legislative / regulatory requirements.	

Quality criteria	Evidence of compliance	Satisfactory/good	Outstanding
	delivers regulated debt advice and/or non-commercial credit information services.		

Overview

The planning of services is a key component of developing a quality service. Standards for planning should ensure that interventions are evidence based, reflect the needs of the community, subject to periodic review and with robust governance arrangements to ensure effective accountability. Service planning should include consideration of evidence from quality area 7: delivering outcomes.

Quality area 2: well planned

Quality Criteria	Evidence of Compliance	Satisfactory/Good	Outstanding
2.1 Service governance	There is a documented governance structure	Strategic and operational leads clearly identified.	Programme for public engagement in governance.

Quality Criteria	Evidence of Compliance	Satisfactory/Good	Outstanding
	that: • ensures that the activities of the service are both within the law and within its constitutional remit • determines the mission and purpose of the service and agrees strategic plans • develops and agrees policies • agrees the budget and monitors financial performance and accountability to funders • ensures the service has adequate resources and that these are effectively managed • monitors service provision	Responsibility and accountability for planning and reviewing the service operations and outcomes clearly evidenced. Roles and responsibilities, authorities and accountabilities communicated to all within the service. Up to date Risk Register in place and risk register reviewed by governing body at least 4 times per year Regular reporting on operational performance.	For third sector organisations, programme for equipping individuals from socially excluded communities to engage in the governance of the service Effective engagement between governance leads and strategic managers. Robust business continuity plan in place

Quality Criteria	Evidence of Compliance	Satisfactory/Good	Outstanding
	• acts as employer and actively reviews the performance of the most senior member of staff, sets salary levels • regularly reviews performance through monitoring and evaluation • reviews its own performance as a governing body • understands and manages risk		
2.2 Needs assessments	Business plan for service delivery considers community needs assessment (commissioned or in partnership).	Undertakes / commissions or works in partnership to identify needs of the community for example with local networks. Needs assessment is mapped against existing delivery to	Needs assessment considers early intervention and prevention. Actively participates in local / national early prevention initiatives. Needs assessment uses a range of national and local data using a clear methodology.

Quality Criteria	Evidence of Compliance	Satisfactory/Good	Outstanding
		avoid duplication.	
		Systems for recording client information and any specific needs.	
		Client feedback systems in place with evidence of reviewing and adapting services.	
2.3 Business planning	Costed, business plan includes service objectives; details of service provided; forward strategy, action plan.	Uses needs assessment to evaluate gaps in service and if / how the service plan can meet these.	Impact assessments built into business planning.
			Plan has strong focus on early intervention and prevention.
	Business plan clearly states, goals, values and objectives of business and where service fits into community.	Focus of service delivery tailored to community needs.	Clear vision on community needs and who is best to serve these.
		Funding applications linked to needs assessment and business objectives	Partnerships form foundation of business planning.
	Business Plan reflects the service remit at 1.1 above.		
		Realistic key performance indicators / critical	Funding applications involve partnerships and avoid duplication of provision.

Quality Criteria	Evidence of Compliance	Satisfactory/Good	Outstanding
		success factors built into business plan.	Business plan includes marketing strategy.
		Planning demonstrates clear understanding of local and national environment and how service fits into this.	Business plan recognises social benefits to community. Example value of business to volunteers / Board members.
		Summary of plan accessible to service users and potential service users.	The plan seeks to improve service productivity.
2.4 Service review	Review methodology built into business plan. Key outcomes of service delivery are analysed and reviewed. Includes feedback from clients, staff and partners. Monitoring in place for service use by protected characteristics.	Key outcomes and performance are built into the business planning review and improvement targets set. Review builds on successes and is transparent about weaknesses. Trends identified and evaluated against planning review to inform service	Benchmarks against other providers processes / outcomes. Review is open to staff suggestions. Involves clients in review process. Participates in local / national initiatives to identify meaningful outcomes for service delivery and how these can inform planning and review.

Quality Criteria	Evidence of Compliance	Satisfactory/Good	Outstanding
		improvements. Involves stakeholders in review process.	Takes account of targets relating to early intervention / prevention in the context of local and national landscape.

Overview

Services operating under IAQF Wales should be accessible to all members of the community, provide the highest standards of customer care and place the safety of the individual at the centre of their work.

Quality area 3: accessible, caring and safe

Quality Criteria	Evidence of Compliance	Satisfactory/Good	Outstanding
3.1 Equality, diversity and accessibility	Policy detailing how the needs of the community are to be met by the service provider, including those who may be disadvantaged or discriminated against.	Equalities taken account of in policies and procedures. The service's statement of equality and diversity is reviewed	All relevant policies, procedures, and plans have equalities impact assessments. Gathers appropriate statistical information regarding service use to ensure the needs of the

Quality Criteria	Evidence of Compliance	Satisfactory/Good	Outstanding
	Policy must also detail the type of work undertaken and where service provision is limited to certain target groups. Methods of delivery of service are designed and regularly reviewed to promote accessibility. The service has a clear and public statement on equality and diversity.	at least once every two years and where appropriate produces an action plan. Staff have access to translation facilities, directly or via partnership arrangements. Staff are aware of cultural issues which impact on service delivery and take account of these when delivering service. Paid and unpaid staff training records evidence equalities awareness training. Accommodation and facilities regularly reviewed to ensure accessibility.	community are being fully met and inform planning to close identified gaps. All information relevant to service users in any medium for example posters; website checked for appropriate language and clarity, ensuring this information is accessible to all service users. Service seeks out and consults with non-service users. Paid and unpaid staff profile reflects the community it serves in terms of equality and diversity.

Quality Criteria	Evidence of Compliance	Satisfactory/Good	Outstanding
		Methods of delivery are reviewed to ensure accessibility. Service has a plan to ensure that recruitment of paid and unpaid staff reflects the community served.	
3.2 Codes of behaviour are in place for both staff and service users	A clear statement regarding expectations of behaviour of staff and service users is accessible to all staff and service users. Staff always adhere to codes of behaviour, via all communication channels. Paid and unpaid staff training records in customer care.	Staff and service users are clear about the boundaries of acceptable behaviour and the impact behaviours have on other service users. Statement of expectations of service user and staff behaviours to be prominently displayed. Evidence of staff training in appropriate	

Quality Criteria	Evidence of Compliance	Satisfactory/Good	Outstanding
		behaviours when dealing with service users. All client facing staff receive training and support in customer care and dealing with challenging behaviour. Policies and procedures covering health and safety (for example lone working).	
3.3 Information governance	Policies and processes ensure that service user details and client records are managed in line with data protection legislation at all times. Training records for relevant staff evidence training in data protection issues. Service users are made	Clear information governance policy in place including: • confidential interview space for service users • service users asked for explicit permission to record / pass on any sensitive	Actively participates in networking with other organisations within service provider area to ensure service user confidentiality is preserved whilst most effective service is delivered. Holds ISO 27001 Information assurance standard.

Quality Criteria	Evidence of Compliance	Satisfactory/Good	Outstanding
	aware of how the service provider will manage their data; boundaries to confidentiality and of how to complain regarding any breach of confidentiality. Structured system in place to manage client records. Registered with the Information Commissioner.	personal data to another service • record maintenance, retention and destruction policy including specification of secure destruction of records in place for all information formats • all staff understand the process for dealing with breaches of information governance policy	
3.4 Complaints and compliments	Clear, publicised and accessible complaints policy, detailing all steps of complaints process including external arbiters where appropriate.	Complaints procedure accessible to all users and staff trained in how to identify complaints and deal with these	Actively participates in local / national groups which aim to improve service user experience.

Quality Criteria	Evidence of Compliance	Satisfactory/Good	Outstanding
	All staff receive training appropriate to their role in complaints handling.	accordingly. Analysis of complaints and compliments received is used to improve services and improvements are monitored. Changes to services arising from customer feedback is included in the annual report. Positive service user feedback is shared openly and feeds into staff appraisal system.	
3.5 Redress for service users in the event of service errors	The service has a clear policy in place for service user redress. Appropriate professional indemnity insurance is held.	Duty of candour in place to alert service user to errors made and provide them with appropriate redress.	Level of indemnity cover kept under review. Duty of candour is reflected in job descriptions and induction training.

Quality Criteria	Evidence of Compliance	Satisfactory/Good	Outstanding
3.6 Safeguarding	Policy on safeguarding of children and young people, including named responsible officer. Policy on safeguarding of adults at risk, including named responsible officer. Staff training record on safeguarding training for all client facing staff.	All relevant staff trained in identifying safeguarding issues and means of escalating concerns. Service has arrangements in place for referral of safeguarding concerns.	Service engages with / provides information to appropriate safeguarding boards. Service participates in local / national initiatives relating to safeguarding issues.

Overview

Regardless of the medium through which information and advice is delivered (for example face to face, telephone, digital), services operating under IAQF Wales must have processes that ensure safe, effective and efficient services for their users.

Quality area 4: information and advice provision

Quality criteria	Evidence of compliance	Satisfactory/good	Outstanding
4.1 Ensuring service is provided "in the best interests of service users"	Policies and procedures detailing boundaries to independence of service. Information provided to service user as to other sources of advice provision where there is any potential, perceived or actual conflict of interest. Costs notified to service user in a transparent and timely manner.	Information relating to independence of service is available service users to make an informed decision about using the service from the outset of their case. Service user is notified of boundaries of service from the outset of the case. Service demonstrates that they can act in the best interest of the service user. All staff aware of need to declare conflict of interest in relation to service being provided.	Service actively and consistently participates in local networks to ensure that all service users can access information / advice which is in their best interest. Client feedback and engagement addresses question of independence to inform policy development.
4.2 Networking and referral	Organisation engages with a range of	Evidence of active and consistent participation in local and national	Takes a leading role in promoting formal and

Quality criteria	Evidence of compliance	Satisfactory/good	Outstanding
external stakeholders in the best interests of their service users. Maintenance of an up to date directory of signposting / referral agencies and their remit. Minutes of local referral network meetings. Referral and feedback procedure.	networks. Partnership working and joint projects. All staff are aware of the need to provide the service user with information, advice and assistance which is within their service's remit and who to signpost / refer to ensure the service user's best interests are served. Staff can identify where signposting / referral to a particular service could lead to a conflict of interest for the service user. Staff can take referrals from other agencies where appropriate. Structured referral system is in place locally, with formal referral agreements	informal networking opportunities. Identifies networking opportunities from service user data and outcomes and engages in social policy using strategic networks. Provides training to other services in area. Provides opportunities for partners to exchange staff on short term basis. Captures detailed data on referrals and uses this to improve referral arrangements,	

Quality criteria	Evidence of compliance	Satisfactory/good	Outstanding
			networks and protocols.
			Participates in / leads on meetings of local / national services.
4.3 Service recording and case management	Policies and procedures for case recording and case management that includes initial interview; definition of case; case closure procedure. Structured case management system, IT or paper based. Review process in place of casework by suitably	Policies and processes ensure case recording is undertaken in a consistent and effective manner. Details of how cases are to be reviewed and responsibility for this. Case details relevant background; options discussed; action plan; timescales; client notifications; roles and responsibilities; outcomes and closure. All documentation relating to a case is traceable and appropriately archived.	Promotes the opportunity for the service user to have access to their case work records. Engages / leads on local / national discussions regarding efficient, effective and consistent case management. Has local / national peer review system in place to ensure casework is of the correct

Quality criteria	Evidence of compliance	Satisfactory/good	Outstanding
	qualified person.	Service users' documentation is returned to them within set timescales. Key dates are recorded and reviewed and are easily accessible for succession purposes. Case recording is succinct and contains all relevant detail. Can be easily followed by other case workers, management and auditors.	standard.
4.4 Information	Access to suitable and up to date information sources either online or paper based.	Suitable reference library; use of internet resources. Subscription to journals or groups. Evidence of regular review of information sources.	Involvement in sharing information through local and regional networks.

Quality area 5: competent information and advice staff

Overview

Services operating to the IAQF Wales must ensure that all paid and unpaid staff gain, maintain and develop the awareness, knowledge and skills necessary to meet the needs of their service users. For this quality area IAQF Wales specifies the level of awareness and the range of skills required by information and advice providers. In addition we have identified the Framework against which the advice topic specific areas will need to be assessed by standard owners. In developing their response to this quality area standard owners will need to consider the evidence requirements in order that they can the assess the extent to which service providers:

- have systems to identify the skills and knowledge required to meet users' needs and the procedures to match these requirements with paid and unpaid staff delivering the service
- ensure that all staff are provided with adequate training and development
- ensure that all staff involved in delivering the service have core competencies before they advise the public
- ensure that all staff undertake sufficient information and advice work and update training to maintain their competence
- ensure that all cases are dealt with by an adviser competent in that area of law
- ensure that all information and advice work is supervised by a suitably qualified individual, either from within or outside the service
- ensure that the service provider understand the work of other relevant agencies in their localities

5.1 Awareness framework

All paid and unpaid staff engaging with the public should be able to demonstrate that they have an awareness of the following areas regardless of the topics of advice provided by their service.

For type 1 and type 2 service providers this must include awareness of the system and where or who to signpost to in the following areas:

- benefits system
- debt and financial capability
- housing rights
- employment rights
- equalities/human rights/data protection/ discrimination
- health and social care

In addition all paid and unpaid staff must secure Safeguarding level I training for children and adults.

For type 3, 4 and 5 service providers this must include awareness of the system and a good knowledge of where to refer for further support in the following areas:

- benefits system
- debt and financial capability
- housing rights
- employment rights
- equalities/human rights/data protection/discrimination
- health and social care

In addition all paid and unpaid staff must secure Safeguarding level I training for children and adults.

5.2 Knowledge framework

Standard owners will need to demonstrate that their assessment process ensures that all paid and unpaid staff engaging with the public should be able to demonstrate that they have the appropriate level of knowledge in the advice topic for the type of information or advice delivered by them within their service. This should include evidence that training of sufficiently high quality is undertaken and learnt from by all relevant staff.

Knowledge requirements for information workers and advisers should be evidenced in their job descriptions and/or person specifications and referenced in information workers and advisers' annual appraisals.

5.3 Skills framework

All paid and unpaid staff engaging with the public should be able to demonstrate that they have appropriate skills in the following areas regardless of the topics of advice provided by their service.

Type 1: information

- customer care and dealing with challenging clients
- communication skills (speaking and listening) at an appropriate level
- internal monitoring and recording of enquiries
- making and receiving referrals
- self-reflection and self-assessment
- understanding and acting on personal and organisational limits

Type 2: information and guidance

- customer care and dealing with challenging clients
- effective research into local, regional and national agencies to signpost appropriately
- communication skills (speaking and listening) at an appropriate level
- internal monitoring and recording of enquiries
- making and receiving referrals
- self-reflection and self-assessment
- understanding and acting on personal and organisational limits

Type 3: advice

- customer care and dealing with challenging clients
- effective interviewing
- diagnosing problems
- effective research into local, regional and national agencies to signpost appropriately
- effective legal research (knowing where to find up to date information on the client's problems)
- communication skills (speaking and listening) at an appropriate level
- writing skills including form filling and letter writing
- internal monitoring and recording of enquiries
- recording assistance given
- making and receiving referrals
- self-reflection and self-assessment
- understanding and acting on personal and organisational limits

Type 4: advice with casework

- customer care and dealing with challenging clients
- effective interviewing
- diagnosing problems
- effective research into local, regional and national agencies to signpost appropriately
- effective legal research (knowing where to find up to date information on the client's problems)
- communication skills (speaking and listening) at an appropriate level
- writing skills including form filling and letter writing
- internal monitoring and recording of enquiries
- recording assistance given
- managing casework (for example understanding the timeliness of interventions etc.)
- making and receiving referrals
- negotiation on behalf of the client
- preparation for a case for representation in court or tribunal
- representation (for example in courts or tribunals)
- self-reflection and self-assessment
- understanding and acting on personal and organisational limits

Type 5: specialist casework

- customer care and dealing with challenging clients
- effective interviewing
- diagnosing problems
- effective research into local, regional and national agencies to signpost appropriately
- effective legal research (Knowing where to find up to date information on the client's problems)

- communication skills (speaking and listening) at an appropriate level
- writing skills including form filling and letter writing
- internal monitoring and recording of enquiries
- recording assistance given
- managing casework (for example understanding the timeliness of interventions etc.)
- making and receiving referrals
- negotiation on behalf of the client
- preparation for a case for representation in court or tribunal: dependent on the work of the service
- representation (for example in courts or tribunals): dependent on the work of the service
- self-reflection and self-assessment
- understanding and acting on personal and organisational limits

Overview

Services operating to the IAQF Wales should seek to ensure that they have arrangements in place to meet the needs of individuals whose preferred or required language is Welsh. Organisations that are required to comply with the Welsh language standards should refer to those standards in relation to the services they deliver. For organisations that do not currently fall directly under the Welsh language standards, they must have an effective action plan to ensure they move towards providing their service in the clients preferred language in line with the requirements below within 10 years. Good or best practice for Welsh language should, wherever possible, be the service aspiration for all community languages.

Quality area 6: a bilingual service

Quality criteria	Evidence of compliance	Satisfactory/good	Outstanding
6.1 The internal management of the service is moving towards full bilingualism	A clear Welsh language progress plan with timelines for moving towards fully bilingual service management based upon the planning tool available on the Welsh Language Commissioner's website.	Language champion within the organisation to promote Welsh language. All staff aware of the organisation's Welsh language policy. Training available to staff in the use of the Welsh language. Bilingual aspirations reflected in recruitment policies. Policies are available to staff in Welsh language on request.	Key internal management documents are available in the Welsh language for staff on request. Training and development opportunities for staff are made available in the medium of Welsh language Staff encouraged to use the Welsh language in their day to day work. Designated budget for translation.

Quality criteria	Evidence of compliance	Satisfactory/good	Outstanding
6.2 Well planned service with clear accountabilities for developing Welsh language capacity	Needs assessment includes the needs of Welsh speakers. Business planning responds to the needs of Welsh language speakers.	Named person for promoting development of Welsh language. Monitoring of service use and outcomes reports on Welsh language speakers. Proactive offer of language choice to service users, record of language choice when transferred within the organisation and with partners.	Clear process for systematic review of the service and Welsh language capacity with senior leadership.
6.3 Accessible,safe and caring services available in Welsh language	Service committed to ensuring that services are accessible to clients whose preference or need is Welsh language. Internal protocols and / or referral arrangements to deliver bilingual services. Access to services in Welsh on request (for example through referral arrangements or access to translation services).	Resources are available to provide services in Welsh language and to fund staff training in Welsh language. Translates own leaflets on request. Offer is made clear to all service users.	All information resources (paper and digital) are available in Welsh. Training for staff in providing customer care in Welsh.

Quality criteria	Evidence of compliance	Satisfactory/good	Outstanding
		Links to good quality websites with bilingual content (for example DWP, MAPS etc.). Effective monitoring of Welsh language service requests and Welsh language speakers satisfaction with the service. Bilingual welcome to the service.	Capacity to deliver fully bilingual service. Proactive offer with regards to availability of Welsh services made to all service users.

Overview

Services should be moving towards having measures to assess the impact that their service is making. Where appropriate this should include outcome measures that demonstrate their impact in relation to:

- tackling poverty and/or financial exclusion
- promoting equality and/or community cohesion

It is also expected that services in Wales contribute to the delivery of the aspirations contained within Well-being of Future Generations (Wales) Act 2015. Contributing to the improved outcomes for:

- a prosperous Wales
- a resilient Wales
- a healthier Wales
- a more equal Wales
- a Wales of cohesive communities
- a Wales of vibrant and thriving Welsh language
- a globally responsible Wales

Standard owners will be expected to report that their standard holders have considered the outcomes that they anticipate delivering. It is recommended but not required that they should also consider these against the seven outcome domains from Well-being of Future Generations (Wales) Act 2015. This will normally be evidenced in the response to the requirements at 1.1 and 2.2 above.

Over time it will be expected that the IAQF Wales will develop common outcome measures for use by accredited agencies across Wales.

The examples below are some of the ways in which services may wish to identify outcomes against the aspirations in the Well-being of Future Generations (Wales) Act 2015.

Quality area 7: delivering outcomes

Strategic goals	Outcome measure	What to measure
7.1 A prosperous Wales	Services may consider the contribution they make to tackling poverty and / or financial exclusion. Outcomes could include: • financial gains • economic well-being	Income for client secured / predicated. Reduced / managed debt.

Strategic goals	Outcome measure	What to measure
	• securing rights and entitlements • education, training and employment	Access to information / advice at right time. Advice stages for example 'crisis advice' versus initial application. Outcome of referrals OR referrals tracked. Improved qualifications. People are in work or supported to work.
7.2 A resilient Wales	Services may consider the contribution that they make to ensuring social, economic and ecological resilience and the capacity to adapt to change. Outcomes could include: • contribution made to reducing carbon emissions • amount of procurement locally sourced	Impact of any internal environmental policies (for example car-pooling, enhanced travel payments for low carbon emission transport, recycling). Impact of any advice activities on securing funds for clients to environmental retrofitting funds etc. Social return on investment audits to include environmental gain.

Strategic goals	Outcome measure	What to measure
7.3 A healthier Wales	Services may consider the contribution that they make to ensuring improvements in people's physical and mental health and well-being and that these improvements are sustainable. Outcomes could include: • reduced levels of stress (for example by tackling debt problems) • reduced fuel poverty • reducing the numbers of people in temporary / inappropriate accommodation • reducing health adverse housing disrepair • reductions in people at risk of domestic violence	People report healthier / less stressed. Numbers of people supported to maintain/ improve access to utilities (for example gas and electricity arrears). Numbers of people supported to access appropriate housing. Numbers of people supported to tackle housing disrepair. Numbers supported to escape situations of domestic violence.
7.4 A more equal Wales	Services may consider the contribution that they make to ensuring that people are able to fulfil their potential regardless of their background or circumstances. Outcomes could include: • increased numbers of people reporting that feel involved in decisions affecting their lives • improved access to training, development and support	Numbers of people reporting that they feel more independent / better able to make their own decisions. Numbers of local people trained or supported into employment. Number of people who are more confident to engage in

Strategic goals	Outcome measure	What to measure
		public life.
7.5 A Wales of cohesive communities	Services may consider the contribution that they make to ensuring that they are building are attractive, viable, safe and well-connected communities. Outcomes could include: • reductions in the number of people reporting that they feel isolated or lonely • increased number of people feeling that they belong to their local area • increased numbers of people reporting that they have access to the right information and advice when they need it	Numbers of people contributing to the work of the service (for example volunteer hours). Numbers of people participating in community activities. Numbers of people reported as feeling more part of their local community. Levels of satisfaction with access to services. Reductions in numbers of people reporting that they are unable to participate in recreational or cultural activities due to financial or other circumstances.
7.6 A Wales of vibrant and thriving Welsh language	Services may consider the contribution that they make to ensure a society that promotes culture, heritage and the Welsh language encouraging participation by people in cultural and recreational activities. Outcomes could include:	Increased percentage of service information resources available in Welsh language. Numbers of paid and unpaid

Strategic goals	Outcome measure	What to measure
	• improved access to information and advice in Welsh • increased numbers of staff able to provide bi-lingual services	staff confident to provide information and advice in Welsh language Increasing take up of Welsh language services.
7.7 A globally responsible Wales	The seventh strategic goal is an overarching consideration for all publicly funded services in Wales. Welsh Government would welcome examples from services of outcomes achieved that support this goal.	

Associated services

Overview

Robust general management standards should deliver effective and sustainable management of the service and its resources.

Quality area 1: well managed

Ref.	Quality Criteria	Evidence of Compliance
1.1	The service has a clear remit based on need	The service remit includes details of • the service that is provided • the ways in which that service will be provided • the target population for the service (for example by geographical area and / or community of interest such as young people only etc.)
1.2	The service has a clear management and accountability framework	There is a clear management structure with defined roles and responsibilities of paid and unpaid staff, including, where applicable, governing body.
1.3	The health, safety, well-being and development of paid and unpaid staff is reflected in policy and practice	This should include: • all paid and un-paid staff have regular supervision, annual appraisal and access to development opportunities • health, safety and well-being of staff reflected in robust policies
1.4	The service has a robust system of financial management	Clear documentation of financial management systems with documented lines of delegated authority for budget holders. Clear arrangements for establishing and monitoring service budgets. Named individual responsible for overall financial

Ref.	Quality Criteria	Evidence of Compliance
		management.
		Arrangements for periodic external scrutiny of finances by senior person not involved in day-to-day financial management for example treasurer / management committee / trustees.
1.5	Clear lines of internal communication	Regular team meetings.
		For third sector organisations management committee meetings held according to constitutional requirements.
1.6	Compliance with all relevant general legislation and regulation	Office manual identifying relevant legislation and detailing compliance.
		Paid and unpaid staff have knowledge of office manual and contents.

Overview

The planning of services is a key component of developing a quality service. Standards for planning should ensure that interventions are evidence based, reflect the needs of the community, subject to periodic review and with robust governance arrangements to ensure effective accountability. Service planning should include consideration of evidence from quality area 7: delivering outcomes.

Quality area 2: well planned

Ref.	Quality criteria	Evidence of compliance
2.1	Service governance	There is a documented governance structure that: • ensures that the activities of the service are both within the law and within its constitutional remit • determines the mission and purpose of the service and agrees strategic plans • develops and agrees policies • agrees the budget and monitors financial performance and accountability to funders • monitors service provision • where appropriate acts as employer and actively reviews the performance of the most senior member of staff, sets salary levels. • reviews its own performance as a governing body • understands and manages risk
2.2	Needs assessments	The service plan considers the needs of the community it seeks to serve.
2.3	Business plan / service plan	That there is a business or service plan that includes: • service objectives, details of service provided and budget • the goals and value of the service • that reflects the service remit at 1.1 above
2.4	Service review	That the service periodically reviews itself, including: • key outcomes from the service • feedback from clients, staff and partners

Ref.	Quality criteria	Evidence of compliance
		• examines service use by protected characteristics

Overview

Services operating under IAQF Wales should be accessible to all members of the community, provide the highest standards of customer care and place the safety of the individual at the centre of their work.

Quality area 3: accessible, caring and safe

Ref.	Quality criteria	Evidence of compliance
3.1	Equality, diversity and accessibility	The service has a clear and public statement on equality, diversity and inclusion which includes how the needs of the community are to be met by the service provider, including those who may be disadvantaged or discriminated against. Where service provision is limited to certain target groups this should be clearly stated. Methods of delivery of service are designed and regularly reviewed to promote accessibility and inclusion.
3.2	The service sets clear expectation on the	A clear statement regarding expectations of behaviour of

Ref.	Quality criteria	Evidence of compliance
	behaviours it expects from staff and from service users	staff and service users is accessible to all staff and service users.
		Staff always adhere to codes of behaviour, via all communication channels.
		Paid and unpaid staff are supported to deal with disruptive behaviour to ensure the safety and accessibility of the service for staff and all service users.
3.3	Information governance	Policies and processes ensure that service user details and client records are managed in line with data protection legislation at all times.
		Training records for relevant staff evidence training in data protection issues.
		Service users are made aware of how the service provider will manage their data; boundaries to confidentiality and of how to complain regarding any breach of confidentiality
3.4	Complaints and compliments	Clear, publicised and accessible complaints policy, detailing all steps of complaints process including external arbiters where appropriate.
3.5	Redress for service users in the event of service errors	The service has a clear policy in place for service user redress and where appropriate the service maintains professional indemnity insurance.
3.6	Safeguarding	The service must have a policy on safeguarding of

Ref.	Quality criteria	Evidence of compliance
		children and young people which includes details of internal reporting and arrangements for external referral where appropriate.
		The service must have a policy on safeguarding of adults at risk which includes details of internal reporting and arrangements for external referral where appropriate.

Overview

All services operating under IAQF Wales must have processes that ensure safe, effective and efficient services are delivered in the best interest of their service users.

Quality area 4: information and related service provision

Ref.	Quality Criteria	Evidence of Compliance
4.1	Ensuring service is provided "in the best interests of service users"	The service should be committed to delivering in the best interests of its service user. It should have policies which include: • any boundaries to the independence of the service and its capacity to act in the service users' best interests • advise the service user of any potential, perceived or actual conflict of interest • provide information on alternative sources of help or

Ref.	Quality Criteria	Evidence of Compliance
		support where appropriate
4.2	Networking and referral	The service should: • engage with a range of external services to ensure that they are best able to operate in the best interests of their service users • maintain up to date information on external sources of support to facilitate signposting or referral to these services
4.3	Service recording and case management	Proportionate and appropriate details of, and information on service users should only be kept where this is in the best interests of the service user (see also 3.3 above)
4.4	Information resources	The service should maintain appropriate and up to date information to support its service users.

Quality area 5: competent information and advice staff

Overview

Services operating to the IAQF Wales must ensure that all paid and unpaid staff gain, maintain and develop the awareness, knowledge and skills necessary to meet the needs of their service users. Services will need to ensure that they:

• have systems to identify the skills and knowledge required to meet users' needs and the procedures to match these requirements with paid and unpaid

staff delivering the service
- ensure that all staff are provided with adequate support, supervision, training and development for the role required
- ensure that all staff involved in delivering the service have core competencies required before serving the public
- ensure that all staff undertake sufficient update training to maintain their competence
- ensure that the service provider understand the work of other relevant agencies in their localities

5.1 Awareness framework

All paid and unpaid staff engaging with the public should be able to demonstrate that they have a broad awareness of the issues relating to their key client groups.

5.2 Knowledge framework

All paid and unpaid staff should have sufficient knowledge in the subject area of their service to meet the needs of their service users. This should be evidenced in their job descriptions and/or person specifications where appropriate.

5.3 Skill framework

All paid and unpaid staff engaging with the public should be able to demonstrate that they have appropriate skills to deliver their role. This will vary from service to service and may include customer service, communication skills and making referrals etc.

Overview

Services operating to the IAQF Wales should seek to ensure that they have arrangements in place to meet the needs of individuals whose preferred or required language is Welsh. Organisations that are required to comply with the Welsh language standards should refer to those standards in relation to the services they deliver. For organisations that do not currently fall directly under the Welsh language standards, they should have an effective action plan to ensure they move towards providing their service in the clients preferred language in line with the requirements below within 10 years. Good or best practice for Welsh language should, wherever possible, be the service aspiration for all community languages.

Quality area 6: a bilingual service

Ref	Quality criteria	Evidence of compliance
6.1	The internal management of the service is moving towards full bilingualism	Services should have a Welsh language progress plan with timelines for moving towards fully bilingual service. This can be evidenced by using the palling tool available on the Welsh Language Commissioner's website.
6.2	Well planned service with clear accountabilities for developing Welsh language capacity	
6.3	Accessible, safe and caring services available in Welsh	

Ref	Quality criteria	Evidence of compliance
	language	

Quality area 7: delivering outcomes

Overview

Services should be moving towards having measures to assess the impact that their service is making. Where appropriate this should include outcome measures that demonstrate their impact in relation to:

- tackling poverty and/or financial exclusion
- promoting equality and/or community cohesion

It is also expected that services in Wales contribute to the delivery of the aspirations contained within Well-being of Future Generations (Wales) Act 2015. Contributing to the improved outcomes for:

- a prosperous Wales
- a resilient Wales
- a healthier Wales
- a more equal Wales
- a Wales of cohesive communities
- a Wales of vibrant and thriving Welsh language
- a globally responsible Wales

Standard owners will be expected to report that their organisations have considered the outcomes that they anticipate delivering and that these have been considered these against the seven outcome domains from Well-being of

Future Generations (Wales) Act 2015. This will normally be evidenced in the response to the requirements at 1.1 and 2.2 above.

Over time it will be expected that the IAQF Wales will develop common outcome measures for use by accredited agencies across Wales.

The examples below are some of the ways in which services may wish to identify outcomes against the aspirations in the Well-being of Future Generations (Wales) Act 2015. However, there is no requirement to develop a comprehensive outcome framework at this time.

Quality area 7: delivering outcomes

Strategic goals	Outcome measure	What to measure
7. 1 A prosperous Wales	Services may consider the contribution they make to tackling poverty and / or financial exclusion. Outcomes could include: • financial gains • economic well-being • securing rights and entitlements • education, training and employment	Income for client secured / predicated. Reduced / managed debt. Access to info/advice at right time. Advice stages for example 'crisis advice' versus initial application. Outcome of referrals OR referrals tracked. Improved qualifications. People are in work or

Strategic goals	Outcome measure	What to measure
		supported to work.
7.2 A resilient Wales	Services may consider the contribution that they make to ensuring social, economic and ecological resilience and the capacity to adapt to change. Outcomes could include: • contribution made to reducing carbon emissions • amount of procurement locally sourced	Impact of any internal environmental policies (for example carpooling, enhanced travel payments for low carbon emission transport, recycling). Impact of any advice activities on securing funds for clients to environmental retrofitting funds etc. Social Return on Investment audits to include environmental gain.
7. 3 A healthier Wales	Services may consider the contribution that they make to ensuring improvements in people's physical and mental health and well-being and that these improvements are sustainable. Outcomes could include: • reduced levels of stress (for example by tackling debt problems) • reduced fuel poverty • reducing the numbers of people in temporary / inappropriate accommodation • reducing health adverse housing	People report healthier / less stressed. Numbers of people supported to maintain / improve access to utilities (for example gas and electricity arrears). Numbers of people supported to access appropriate housing.

Strategic goals	Outcome measure	What to measure
	disrepair • reductions in people at risk of domestic violence	Numbers of people supported to tackle housing disrepair. Numbers supported to escape situations of domestic violence.
7. 4 A more equal Wales	Services may consider the contribution that they make to ensuring that people are able to fulfil their potential regardless of their background or circumstances. Outcomes could include: • increased numbers of people reporting that feel involved in decisions affecting their lives • improved access to training, development and support	Numbers of people reporting that they feel more independent / better able to make their own decisions. Numbers of local people trained or supported into employment. Number of people who are more confident to engage in public life.
7.5 A Wales of cohesive communities	Services may consider the contribution that they make to ensuring that they are building are attractive, viable, safe and well-connected communities. Outcomes could include: • reductions in the number of people reporting that they feel isolated or lonely • increased number of people feeling that they belong to their local area • increased numbers of people reporting	Numbers of people contributing to the work of the service (for example volunteer hours). Numbers of people participating in community activities. Numbers of people reported

Strategic goals	Outcome measure	What to measure
	that they have access to the right information and advice when they need it	as feeling more part of their local community. Levels of satisfaction with access to services. Reductions in numbers of people reporting that they are unable to participate in recreational or cultural activities due to financial or other circumstances.
7.6 A Wales of vibrant and thriving Welsh language	Services may consider the contribution that they make to ensure a society that promotes culture, heritage and the Welsh language encouraging participation by people in cultural and recreational activities. Outcomes could include: • improved access to information and advice in Welsh • increased numbers of staff able to provide bi-lingual services	Increased percentage of service information resources available in Welsh language. Numbers of paid and unpaid staff confident to provide information and advice in Welsh language Increasing take up of Welsh language services.
7.7 A globally responsible	The seventh strategic goal is an overarching consideration for all publicly funded services in Wales. Welsh Government would welcome examples from services of	

Strategic goals	Outcome measure	What to measure
Wales	outcomes achieved that support this goal.	