

Where are we now and what does good look like?

Name of service:
Where the service operates:
Key contacts:

CAREMORE® Considerations	Initial Assessment
<p>C - Care Standards</p> <ol style="list-style-type: none"> 1. What care standards are in place across the steps of the care pathway? 2. What recognised care standards are applicable within core governance? 3. How have you engaged with staff and the public in the development of care standards? 	
<p>A - Activity</p> <ol style="list-style-type: none"> 4. Define the activities that are delivered by the service. 5. How is the activity being measured and from what data sources? 6. What are the activity trends, identifying the impact of the work on demand and capacity? 	
<p>RE - Resource Envelope</p> <ol style="list-style-type: none"> 7. Identify all resources (capital, revenue and infrastructural) and sources of funding used by the service 8. What are the non-recurrent and recurrent costs and how are resources, staff and non staff costs are applied across the care pathway? 9. What is the likely impact of the way resources are allocated across the care pathway? 	

CAREMORE® Considerations	Initial Assessment
<p>M - Models of Care</p> <p>10. What is the primary purpose of the service and how are appropriate service users identified and referred?</p> <p>11. Summarise the model of care and the typical service user journey?</p> <p>12. Is there precedence, or evidence of effectiveness from other similar schemes and models of care?</p>	
<p>O - Operational arrangements</p> <p>13. Identify key relationships between partners and describe the structure of the delivery team</p> <p>14. What arrangements are in place to manage day to day operational activities?</p> <p>15. What operational pressures exist and how are they being addressed?</p>	
<p>R - Review of performance</p> <p>16. What performance measures are being collected and monitored?</p> <p>17. What is the overall level of performance against the care standards?</p> <p>18. Is there scope for further innovation and improvements in performance?</p>	
<p>E – Evaluation</p> <p>19. How do you learn from the outcomes and experiences of staff and service users?</p> <p>20. How does the service demonstrate value for money and sustainability?</p> <p>21. How effective is the service overall, at delivering its primary purpose?</p>	

Appendix 2 – List of Standard Schedules

Section	Headings	Schedule Reference	Draft Schedule Name
C	Care Standards	C1	Care Standards descriptors
		C2	Bibliography of Relevant Publications
A	Activity	A1	Activity Descriptors
		A2	National Dataset and Definitions
RE	Resource Envelope	RE1	Resource management Descriptors
		RE2	Revenue information
		RE3	Capital information
M	Model(s) of Care	M1	High level description for the model of care
		M2	Detailed wiring diagram for local model of care
O	Operational Arrangements	O1	Commissioning and planning alignment
		O2	Description of the Application of the Model of Care
		O3	Extant Policies, Protocols, Pathways
		O4	Continuous Improvement and Service Change
R	Review of Performance	R1	Performance descriptors
		R2	Data repository of Activity, Resources, Performance measures & reporting arrangements
E	Evaluation	E1	Evaluation methods
		E2	Evaluation programme
		E3	Evaluation reports

Care Standards	Activity	Resource Envelope	Model	Operations	Review	Evaluate
Output: An evidenced set of care standards for the provision of services to ensure that the right expectations are defined for quality and safety	Output: An accurate description of the activities within undertaken within the service to ensure that the right capacity is available to meet the right demand	Output: A comprehensive description of the assets which may be utilised and affected with the ambition of making the best use of all existing resources	Output: A common high level model of care for the provision of service to ensure that people can access the right staff, at the right place, at the right time	Output: The establishment of robust local mechanisms to ensure effective delivery with the right interaction between patients, professionals and organisations	Output: An agreed system of performance measurement to ensure that the right monitoring and management to deliver continuous improvement	Output: An agreed set methods and criteria for judging the achievement of the right patient outcomes from the right patient experience at the right cost
Action Planned @ Date						
Action Taken @ Date						
Schedules						
C1 Care Standards C2 Bibliography of Relevant Publications	A1 Activity Descriptors A2 National Dataset and Definitions	RE1 Resource Management Descriptors RE2 Revenue Value Spend across the Model of care RE3 Capital Value Spend across the Model of care	M1 Model of Care Description <i>(high level)</i> M2 Model of Care wiring diagram (for each department)	O1 Commissioning and IMTP alignment O2 Application of the Model of Care O3 Extant Policies, Protocols, Pathways O4 Continuous Improvement and Service Change	R1 Performance Measurement Descriptors (eg including staff and service user expectations and experience) R2 Data Repository (Note: this consists of A1 + RE1 + R1 and will be linked to “quadruple aim” outcomes and include reporting requirements)	E1 Evaluation methods E2 Evaluation programme E3 Evaluation reports