**Alzheimer’s Disease International**

**Accreditation**

**Guidance and Process**

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**Alzheimer’s Disease International (ADI) Accreditation**

**Context**

ADI's vision is an improved quality of life for people with dementia and their families throughout the world and to ensure that people with dementia receive high quality, person –centred care, provided by appropriately trained professionals and carers.

Dementia care training programmes are delivered globally, with the aim of providing family members, individuals or groups with the opportunity to support people with dementia. Training programmes also provide health care professionals with additional skills and a greater understanding of dementia in a wider social context.

**Accreditation**

The purpose of accreditation is to formalise and regulate the delivery of training programmes, recognising a structured approach to training, and establish standards that the providers of training programmes would need to adhere to. By establishing accreditation standards, ADI aims to support the improvement of care for people with dementia and reduce on the variation in the quality of care provided and ensure a more focused approach on meeting people’s needs. Accreditation means that the training and learning activity has reached the required ADI standard, ensuring integrity and quality at all levels.

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**Executive Summary**

This document sets out the standards for ADI accreditation of training programmes, delivered globally to support the care of dementia patients.

While setting the standards that accredited provision is expected to meet, these standards are intended to be flexible and recognise the many different local environments, diversity of national systems, cultural settings, where training is delivered.

Given the global reach of ADI, and the cultural diversity that exists at an international level, the aim of ADI accreditation would not to be so prescriptive as to have a very rigid set of standards for the design, content and delivery of training programmes, and will therefore respect national and local contexts.

At the core of an accreditation process is the recognition of role of the provider, and its capacity to offer or support training programmes, recognising the needs of local communities and individuals within these communities.

Accreditation will also assess training programmes, to include overall design, delivery and where applicable, assessment methods.

Accreditation will seek to understand how local groups adapt their training programmes to meet the needs of people with dementia, their carers and providers.

ADI accreditation will encourage training excellence and also an ongoing commitment to improvement process and also continuing professional development (CPD). Providers gaining accreditation are expected to maintain and demonstrate commitment to regular improvement within their own programmes over the duration of each accreditation period. Individuals who have been trained on accredited programmes will also need to undertake and be committed to regular CPD activities, and provide regular updates or evidence of on-oing training.

Accreditation will allow ADI to understand and oversee how training programmes are being delivered globally and adapting in line with dementia care and research. It will also work in the reverse i.e. providers, trainers and trainees, by seeking accreditation, will result in high level recognition of their programmes.

ADI accreditation will recognise and also differentiate between training programme offerings and the different levels (family carer, domestic carer, health care trainer, train the trainer).

ADI accreditation will recognise and respect the needs of local environments and also the diversity of national systems. It will consider the educational and cultural environment in which training programmes operate, and the wider international context.

As a global organisation, ADI as part of the accreditation process, will seek to understand and assess how providers are developing and adapting their training programmes to reflect local needs and local health care structures.

ADI accreditation will provide a global network of trainers and participants, allowing them to connect with like-minded people from programmes that have received high level recognition from ADI.

ADI accreditation will allow ADI to understand how training programmes are designed, developed, delivered, assessed and evaluated, using internationally recognised standards.

Perhaps a long-term goal might be to move towards increased convergence of various training programmes resulting in the delivery of a generic programme, delivered worldwide.

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**Summary of processes**

Below is a summary of the process for accreditation from an initial eligibility request, followed by formal registration with ADI for accreditation, a formal visit by an ADI accreditation panel, continuous improvement/annual monitoring, and re-accreditation. Each step is summarised briefly below and will have separate guidance and process documents, charts, templates and forms where applicable.

1. **Eligibility request**

Formal application to ADI for consideration for accreditation, containing information on the provider, type of training courses provided, level of training, national and local context, and information on participants for each course. Certain eligibility criteria will need to be met if an organisation/body is to be accepted for the accreditation process by ADI.

1. **Accreditation visit (post-eligibility acceptance)**

Visit by ADI global review panel to review the provider, and training programmes offered, following the submission of a self -assessment report to ADI in advance of the panel visit.

**3. Accreditation of provider/training programme by ADI board**

**4. Continuous review/ on-going development**

The provider will undertake /respond to any recommendations/suggestions from the review panel post accreditation visit and will aim to further develop and enhance training programmes and will also provide annual updates to ADI.

**5. Re-accreditation**

Formally request a re-accreditation visit as a provider and participants of accredited training programmes can update/refresh their skills as part of ongoing CPD.

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**Eligibility request**

In order to enter the ADI accreditation process, formal application to ADI for consideration for accreditation, is required and can be done by downloading an eligibility request form from the ADI accreditation website. Those completing the application should provide general information on the provider, type of training courses provided, level of training, programme content, national and local context, and information on course participants. Certain eligibility criteria will need to be met if an organisation/training body is to be accepted for the accreditation process by ADI.

The ADI board will review all applications for accreditation.

Each application will be mapped by ADI board members against a set of criteria, some of which are listed below.

Is the provider/ training organisation demonstrating stability in the following areas to support training:

* Structure
* Governance
* Management
* Budget and Resources
* Programme design
* Programme content

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**Accreditation Standards**

**The Provider**

The information and standards detailed below can be used to accredit a provider of training programmes, recognising that the provider is an established institution/organisation, a national organisation/health care service or a provincial/local health care group.

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**Standard 1**

The provider should demonstrate how it operates in the dementia care environment with specific reference to local and national associations, but also demonstrate an awareness of the international ADI setting which promotes care and support for people with dementia and their carers.

Criteria for assessment

* Provide general information on national dementia care policies and national health programmes
* Provide information on national and local dementia care associations
* Describe how the provider operates within the above contexts/frameworks
* Describe the ways in which other key external and internal stakeholders are
* involved in design of training programmes offered/managed by the provider

**Standard 2**

The provider will have a record of stability in terms of overall governance, management, operations, finances/budget/resourcing.

Criteria for assessment

* Describe the management structure, roles and responsibilities assigned to each role within the management team, operations team and finance team
* If applicable describe how the Governance structure operates and involvement with management and operational activities
* Provide details of how income is generated by/for the provider, detailing links with government funding departments, local authorities, not-for-profit organisations and other sources of funding/income
* Describe the facilities used to deliver training programmes e.g. rooms, IT setup, study rooms
* Describe how budgets are managed and monitored

**Standard 3**  
The provider has sufficient resources to design, develop and deliver training programmes at different levels and the capacity to monitor and evaluate on a regular basis.

Criteria for assessment

* Explain how training programmes are designed and approved by the provider
* Describe processes that are used to monitor training programmes and mechanisms in place to monitor quality

**Standard 4**

The provider manages the training programmes with identifiable policies, guidance, procedures to support the trainer and trainee.

Criteria for assessment

* Describe processes that are in place to monitor the quality of delivery/ instruction on the programmes, and overall learning of attendees

**Standard 5**

The provider has well-documented and well-communicated processes to manage and support those involved in training, and those being trained. They should demonstrate consistency with the ADI aims and objectives

Criteria for assessment

* Explain how trainers and trainees are supported – e.g. appraisal systems/trainee support/mentor schemes/family support schemes
* How do these link in with ADI objectives

**Standard 6**

The provider has professional staff and/or services sufficient to ensure quality outcomes across the range of training programmes it offers and to achieve other aspects of ADI objectives

Criteria for assessment

* Describe process and systems in place
* Are adequate resources available to undertake this activity

**Standard 7**

The provider has a process in place to revise training programmes, in line with local and national requirements and also ADI requirements

Criteria for assessment

* List and provide a brief description of external groups who are linked to the provider and the programmes it delivers.
* Does trainer and the trainee contribute to this process?

**Standard 8**

The provider has systems in place to monitor content, structure, delivery, and assessment of curriculum content and that it is appropriate to general expectations for the programme type and learning objectives

Criteria for assessment

* Provide detail of systems in place to undertake this work and examples of follow-up

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**Train the trainer programme**

**Standard 1: The programme**

The training programme should be well-designed, of suitable level, with clear learning outcomes and an appropriate balance between knowledge acquisition and skills acquisition.

Criteria for assessment

* The design and content of programmes should embrace a range of theory, firmly connected to the practical world of dementia care in both national and local context and setting
* In order to develop sufficient knowledge and skills in the area of dementia care, the training programme should have/encourage interaction between trainers and trainees
* Describe the processes used to design and develop the training programme in line with local context and settings, meeting the needs of people with dementia, their carers, but also in line with ADI accreditation standards and overall strategy and focus
* Describe the recognition that the training programme receives in the local and national context and if any qualifications are obtained after the successful completion of training
* Programmes should be regularly evaluated through feedback from participants and the community they serve
* Describe synergies with other dementia care programmes delivered locally, nationally and globally
* Will participants have the necessary skills to carry out work with people who have dementia?
* How is the award of certification/successful completion of the training programme managed? Describe mechanisms used to protect the integrity and validity of the process, objectivity in terms of standards, in order to warrant ADI accreditation
* Provide evidence of satisfaction on the part of key stakeholder groups with regard to programme design, content and delivery (e.g. carers, patients, local authorities)
* What mechanisms exist for assuring consistency and integrity with training programmes that may be needed by external bodies (i.e. NGOs, local health organisations, professional bodies, national and local agencies)

**Standard 2: Content**

The content should be specific to the area of dementia care and awareness, building on existing knowledge and skills acquired through training in other areas of dementia care such as nursing, GP training, social worker training. It should factor in the basic principles of dementia care

Criteria for assessment

* How does the development and review cycle ensure that the training programme objectives and learning outcomes, in addition to content, delivery methods and materials for training are relevant, up-to-date and of high quality
* Describe the content, modules offered and the pedagogy adopted to deliver the training programme
* How are the programme objectives and intended learning outcomes translated into the practical aspects of dementia care

**Standard 3: Training materials**

The training materials should be well structured, easily understood and provide participants with sufficient resources to support their learning and comprehension of the various topics delivered during the training session

**Standard 4: Assessment**

The assessment methods should be in line with the overall aims and objectives of the training, and should support the course design in terms of its level, objectives, intended learning outcomes and overall ethos but should also be valid and reliable in the area of dementia care

Criteria for assessment

* There should be a reasonable balance in the assessment of knowledge and development of skills. Competency should also be evident.
* Describe the assessment system for monitoring and grading participants work
* How does the provider ensure that participants meet the agreed objectives and learning outcomes for local or national recognition, if applicable? Does the assessment regime support the programme design in terms of objectives and general philosophy?
* Does the assessment explicitly identify the criteria for assessment and the range –if applicable? How does the provider ensure that the assessment regime is applied with sufficient rigour?

**Standard 5: Trainers**

Those delivering training should be sufficiently knowledgeable in the area of dementia care to deliver such a programme. They should be qualified and skilled to do so and active in the delivery of care and training.

Criteria for assessment

* The Provider should ensure the quality of its trainers through appropriate selection processes
* Trainers should have followed a path of progression into the area of dementia care
* Evidence i.e. through family carer to domestic carer training or via health care route
* Trainers should be closely connected to the world of dementia and dementia care
* Describe the teaching methods currently used in programme delivery (lecture, classes, group work, tutorials)
* Trainers should keep abreast of up-to-date research and developments in the area of dementia care and be sufficiently skilled to translate into the training programmes for the benefit of participants – trainees and ultimately those suffering with dementia
* Teaching/training should be of high quality and at an appropriate level and depth and supported by the development of personal skills
* Are trainers fully aware of the aims and objectives of the training programme and how are these conveyed to trainees? Do they explicitly explain to participants what they are expected to know and be able to do at the end of the programme?

**Standard 6: Trainees**

The programme should specify entry criteria for trainees (ie potential trainers), which should lead to a suitable candidate undertaking the programme of training and a suitable mix of trainees.

Criteria for assessment

* The provider should ensure the quality of its trainees through appropriate selection processes, through the monitoring, development and progression through dementia care programmes, family carer, domestic care workers, health care workers in its programmes, and through the provision of appropriate student services
* Selection processes for admission to the programme should be sufficiently rigorous to ensure that an appropriate, sustainable and diverse cohort is recruited and maintained
* The training programme should assist participants to define their future next steps in dementia care
* Are trainees fully aware of the aims and objectives of the training programme and how are these conveyed to trainees in advance of commencement of training?
* Do trainees know explicitly what is expected of them post training - what they can do at the end of the training programme?

**Standard 7: Resourcing and administration**

There should be adequate financial and administrative resource to support the trainer and trainee, to undertake the delivery and attend the programme of study.

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**Health care professional training programme**

**Standard 1: The programme**

The training programme should be well designed, of suitable level, with clear learning outcomes and an appropriate balance between knowledge acquisition and skills acquisition.

Criteria for assessment

* The design and content of programme should embrace a range of theory, firmly connected to the practical world of dementia care in both national and local context and setting
* In order to develop sufficient knowledge and skills in the area of dementia care, the training programme should have /encourage interaction between trainers and Health Care workers
* Describe the processes used to design and develop the training programme in line with local context and settings, meeting the needs of people with dementia, their carers, but also in line with ADI accreditation standards and overall strategy and focus
* Describe the recognition that the training programme receives in the local and national context and if successful completion of the training is recognised and supported locally
* Programmes should be regularly evaluated through feedback from participants/Health Care professionals and the community they serve

**Standard 2: Content**

The content should be specific to the area of dementia care and awareness, building on existing knowledge and skills acquired through training in other areas of dementia care and health care professional training, such as nursing, GP training, social worker training. It should factor in the basic principles of dementia care

Criteria for assessment

* How does the development and review cycle ensure that the training programme objectives and learning outcomes, in addition to content, delivery methods and materials for training are relevant, up-to-date and of high quality?
* Describe the content, modules offered and the pedagogy adopted to deliver the training programme
* How are the programme objectives and intended learning outcomes translated into the practical aspects of dementia care?

**Standard 3: Training materials**

The training materials should be well structured, easily understood and provide participants with sufficient resource to support their learning and comprehension of the various topics delivered during the training session.

**Standard 4: Assessment**

The assessment methods should be in line with the overall aims and objectives of the training, and should support the course design in terms of its level, objectives, intended learning outcomes and overall ethos but should also be valid and reliable in the area of dementia care and healthcare professionals

Criteria for assessment

* There should be a reasonable balance in the assessment of knowledge and development of skills.
* Describe the assessment system for monitoring and grading participants work
* How does the provider ensure that participants meet the agreed objectives and learning outcomes for local or national recognition - if applicable? Does the assessment regime support the programme design in terms of objectives and general philosophy?
* Does the assessment explicitly identify the criteria for assessment and the range –if applicable? How does the provider ensure that the assessment regime is applied with sufficient rigour?

**Standard 5: Trainers**

Those delivering training should be sufficiently knowledgeable in the area of dementia care and overall training of healthcare professionals, in order to deliver such a programme. They should be qualified and skilled to do so, and active in the delivery of care and training.

Criteria for assessment

* The Provider (if applicable) should ensure the quality of its trainers through appropriate selection processes
* Trainers should have followed a path of progression into the area of dementia care,

i.e. Through family carer to domestic carer training or via health care route

* Trainers should be closely connected to the world of dementia and dementia care
* Describe the teaching methods currently used in programme delivery (lecture, classes, group work, tutorials).
* Trainers should keep abreast of up-to-date research and developments in the area of dementia care and be sufficiently skilled to translate into the training programmes for the benefit of participants – trainees and ultimately those suffering with dementia
* Teaching/training should be of high quality and at an appropriate level and depth and supported by the development of personal skills
* Are trainers fully aware of the aims and objectives of the training programme and how are these conveyed to trainees? Do they explicitly explain to participants what they are expected to know and be able to do at the end of the programme?

**Standard 6: Trainees**

The programme should specify entry criteria for trainees, which should lead to suitable candidates undertaking the programme of training and a suitable mix of trainees from healthcare professional backgrounds

Criteria for assessment

* The provider should ensure the quality of its trainees through appropriate selection processes, through the monitoring, development and progression through dementia care programmes family carer domestic care workers, health care workers in its programmes, and through the provision of appropriate student services
* Selection processes for admission to the programme should be sufficiently rigorous to ensure that an appropriate, sustainable and diverse cohort is recruited and maintained
* The training programme should assist participants to define their future next steps in dementia care
* Are trainees fully aware of the aims and objectives of the training programme and how are these conveyed to trainees in advance of commencement of training?
* Do trainees know explicitly what is expected of them post-training and what they can do at the end of the training programme?

**Standard 7: Resourcing and administration**

There should be adequate financial and administrative resource to support the programme - to undertake the delivery and attend the programme of study.

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**Domestic care worker training programme**

**Standard 1: The programme**

The training programme should be well designed, of suitable level, with clear learning outcomes and an appropriate balance between knowledge acquisition and skills acquisition.

Criteria for assessment

* The design and content of programme should embrace a range of

theory, firmly connected to the practical world of the domestic care giver/ worker

* In order to develop sufficient knowledge and skills in the area of dementia care, the training programme should have /encourage interaction between trainers and the Domestic care giver
* Describe the processes used to design and develop the training programme in line with local context and settings, meeting the needs of people with dementia and their carers
* Describe the recognition that the training programme receives in the local context and if successful completion of the training is recognised and supported locally
* Programmes should be regularly evaluated through feedback from participants/domestic care workers and the community they serve.

**Standard 2: Content**

The content should be specific to the area of dementia care and awareness, building on existing knowledge and skills acquired through training in other areas of dementia care and domestic care giver training. It should factor in the basic principles of dementia care.

Criteria for assessment

* How does the development and review cycle ensure that the training programme objectives and learning outcomes, in addition to content, delivery methods and materials for training are relevant, up-to-date and of high quality?
* Describe the content, modules offered and the pedagogy adopted to deliver the training programme
* How are the programme objectives and intended learning outcomes translated into the practical aspects of dementia care undertaken by the domestic care giver?

**Standard 3: Training materials**

The training materials should be well structured, easily understood and provide participants with sufficient resource to support their learning and comprehension of the various topics delivered during the training session.

**Standard 4: Assessment**

The assessment methods should be in line with the overall aims and objectives of the training, and should support the course design in terms of its level, objectives, intended learning outcomes and overall ethos but should also be valid and reliable in the area of dementia care and domestic care givers

Criteria for assessment

* There should be a reasonable balance in the assessment of knowledge and development of skills.
* Describe the assessment system for monitoring and grading participants work
* How does the provider ensure that participants meet the agreed objectives and learning outcomes for local or national recognition - if applicable? Does the assessment regime support the programme design in terms of objectives and general philosophy?
* Does the assessment explicitly identify the criteria for assessment and the range –if applicable? How does the provider ensure that the assessment regime is applied with sufficient rigour?

**Standard 5: Trainers**

Those delivering training should be sufficiently knowledgeable in the area of dementia care and overall training of domestic care givers, in order to deliver such a programme. They should be qualified and skilled to do so and active in the delivery of care and training.

Criteria for assessment

* The Provider (if applicable) should ensure the quality of its trainers through appropriate selection processes
* Trainers should have followed a path of progression into the area of dementia care, i.e. through family carer to domestic carer training or via health care route
* Trainers should be closely connected to the world of dementia and dementia care
* Describe the teaching methods currently used in programme delivery (lecture, classes, group work, tutorials)
* Trainers should keep abreast of up-to-date research and developments in the area of dementia care and be sufficiently skilled to translate into the training programmes for the benefit of participants – trainees and ultimately those suffering with dementia
* Teaching/training should be of high quality and at an appropriate level and depth and supported by the development of personal skills
* Are trainers fully aware of the aims and objectives of the training programme and how are these conveyed to trainees? Do they explicitly explain to participants what they are expected to know and be able to do at the end of the programme?

**Standard 6: Trainees**

The programme should specify entry requirements for trainees, which should lead to suitable candidates undertaking the programme of training.

Criteria for assessment

* Selection processes for admission to the programme should be sufficiently rigorous to ensure that suitable candidates are accepted onto the training
* The training programme should assist participants to define their future next steps in dementia care
* Are trainees fully aware of the aims and objectives of the training programme and how are these conveyed to trainees in advance of commencement of training?
* Do trainees know explicitly what is expected of the them post-training and what they can do at the end of the training programme?

**Standard 7: Resourcing and administration**

There should be adequate financial and administrative resource to support the programme - to undertake the delivery and attend the programme of study.

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**Family Care Giver *Acknowledgement***

Individuals will have experience working with persons with dementia and/or a family caregiver, as a professional, family caregiver or volunteer

Be a member of and show commitment to the local ADI organisation

Work closely with other/related dementia care groups

Demonstrate interest/show a commitment to developing skills in the area of dementia care by joining the development pathway to achieving a higher level of training in dementia care

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**Evaluation Report**

The evaluation report is a key document in the ADI accreditation process and allows those seeking accreditation the opportunity to provide information in order to gain formal recognition as an established provider, supporting the delivery of high-quality dementia care training programmes.

The evaluation report summarises the outcome of the initial internal evaluation process by those seeking accreditation, and as such forms the basis for the ADI global review panel to commence the accreditation process.

The provider/training programme seeking accreditation should:

* Aim to provide and present information that is clear and also establish a basis for review and subsequent evaluation by the ADI global review panel
* Present information, data/evidence in a format that can be tested by panel members/reviewers against the accreditation standards
* Ensure that the evidence/data and additional supporting documentation aids understanding and supports statements in the report

In drafting the evaluation report, those seeking accreditation i.e. the provider, or training body, should refer to and adhere to ADI standards and criteria, which explains in detail what should be covered for each of the areas/standards in the ADI accreditation framework.

The report should be a reflection on the provider and/or training programmes, rather than a marketing document. Each standard should be addressed separately in the report, with a critical analysis addressing the standards/criteria and an assessment of evidence provided. It is anticipated that there may be some overlap of content, depending on the provision/provider/training programme being accredited. Each standard/chapter should begin with a summary, then more detail in relation to the standard.

Engaging in this self-evaluation process, enables a provider or training programme to reflect and ultimately have a clearer understanding of its position in the world of dementia care and how best to care for those individuals with dementia. This can be undertaken by assessing its strengths and weaknesses, links with research in the area of dementia and educational programmes nationally and internationally and becoming aware of any constraints that may exist in terms of delivery of dementia care. The process is also designed to assist providers and training programmes to conclude on the overall effectiveness of its training.

The evaluation report summarises the outcome of the internal reflective/self-assessment process in line with ADI standards and therefore will form the basis for the review.

The onus is on the provider/training programme to present information that will:

* Contextualise the provider/training programme within the local/national environment
* Establish a starting point and a balanced evaluation to be tested by the Global Review Panel
* Present an evidence-based narrative focusing on the ADI standards and criteria
* Include key data, additional information and supporting documentation provided as appendices

The length of report is dependent on the type of accreditation. If ADI is accrediting an institution/provider and training programmes offered by the provider then it is anticipated that the report will be more detailed, will require a wider evidence base, and additional information and supporting materials – approximately 25/30 pages, plus additional information and data in appendices.

Where ADI is accrediting a ‘stand-alone’ programme, then the report will likely be shorter, approximately 15/20 pages, adhering to the same format as described above for the accreditation of provider and programmes.

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**ADI Global Review Panel (GRP)**

The ADI Global Review Panel is composed of representatives from Alzheimer’s Disease organisations, and dementia care organisations across the globe, and are key personnel in the area of dementia care and also education programmes for dementia care. Members of the GRP will be appointed by the ADI CEO and ADI Board.

Normally members would receive an evaluation report from the provide/training body seeking accreditation, approximately one month in advance of a review visit. This allows panel members to read the report and prepare adequately and be familiar with the contents of the report, which in turn will form the basis for assessment of standards and analysis against the ADI standards during the accreditation visit.

The ADI board will formally approve revisions and updates to accreditation standards as advised by the global review panel, following input, consultation and proposals received from key personnel working in the area of dementia care and dementia care education.

**Global Review Panel (GRP) Report**

The GRP report sets out the final assessment of the provider/training programme against the ADI standards, together with its recommendation to the ADI board. It should reflect the consensus opinion of all panel members. The recommendation will be for 4-year accreditation, 2-year accreditation, or no accreditation.

The final GRP report is normally presented to the next ADI board meeting for ratification.

When the recommendation of the GRP is for non-accreditation, the provider/training body has the option to withdraw its application for accreditation, in which case no formal decision will be taken by the ADI board.

A member of the panel is nominated to write the report setting out the team’s assessment of the provider/training programme against the ADI standards and its recommendation regarding accreditation. Care should be taken to ensure clarity of outcomes of the accreditation visit, which should include commendations, recommendations and possibly conditions. The report should fully explain how and why standards have been rated. The report should also detail the reasons that led the team to make its recommendation on accreditation or non-accreditation.

The report should also provide suggestions that will be helpful for the provider in planning its future development.

A draft report with the recommendation will be sent to the provider/training programme for a check on factual accuracy, errors or omissions. Should any be identified, these will be noted and corrected by the Chair of the GRP. The final version of the report, will be returned to the organisation for final approval/agreement.

The final GRP report will then be presented to the ADI board for the final decision on accreditation.

**Continuous Improvement following Accreditation (CPD)**

The process of institutional development and quality improvement does not come to an end with the achievement of accreditation. All accredited providers, trainers, trainees within the ADI system will be required to actively pursue a development plan/CPD agreed with ADI.

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**Appendix 1: Accreditation of the *Provider***

**Appendix 2: Accreditation of Train the Trainer Programme**

**Appendix 3: Accreditation of Health Care Professional Training**

**Appendix 4: Accreditation of Domestic Care Worker Training**

**Appendix 5: Evidence to be provided with evaluation reports**

**Context**

* History of Provider and current context
* History of ‘stand-alone’ programme
* Organisation Chart showing reporting lines (if applicable)
* Chart showing the Governance structure (if applicable)

**Programmes**

* A description of the training programme used when recruiting trainees
* A list of professional bodies/health care programmes associated with the training programme
* A list of modules taught and module descriptors

**Trainees/Trainers**

* A list of the those delivering the training indicating their academic and/or professional background and training and qualifications
* A table listing funds/donations/sponsorship received from organisations/charities in support of the training over the last 3 years.
* A list of trainees and their CVs indicating their professional and training qualifications.
* Number of participants on each training programmes

**Training Programme materials**

* Training programme prospectus, brochures and marketing materials
* Copies of training course materials to include induction materials, handouts, slides other/additional resources, evaluation forms and assessment
* Ethics/ Responsibility: Brief description of policies in these areas and how they are incorporated into training programmes

**Finance**

* Budgetary information - financial accounts (income statements/ with the breakdown of costs /revenue/sources of funding)
* The number of training days allocated for each training programme

**Appendix 6: Template for Evaluation Report**

**Executive Summary**

**Context**

**Detailed description of adherence to all standards and criteria**

**Additional information**

**Conclusion**

**Attach relevant tables, appendices, evidence list**

**Appendix 7: Template for Global Review Panel Report**

**Name of Provider:**

**Location:**

**Date of review:**

**List GRP members:**

**List and summarise outcomes of meetings held during the review and provide a list of attendees at each meeting:**

**Describe overall quality of evaluation report and supporting evidence**

**Conduct of the review meeting(s)**

**Outcome of the review**

**Describe overall outcome of review**

**Commendations:**

**Recommendation:**

**Conditions:**

**Appendix 8: Global Review Panel Scoring Sheet**

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| --- | --- | --- | --- | --- | --- |
| Standard No | Criteria for assessment | Above Standard | Meets Standard | Below Standard | N/A |
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**Overall comment:**

**Completed by:**

**Date:**

**Appendix 9: Glossary**

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| Accreditation Standards Document | A document listing the standards that should be adhered to/met in order to be accredited by ADI. Each standard will have a set of criteria for assessment (criteria that need to be met in order to reach the standard). |
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| Evidence List | Evidence ie information/data/ that will need to be provided in support of adherence to each standard. |
| Evaluation Report | In advance of accreditation, the organisation being accredited (the provider) will be required to submit a report, evaluating the provider against the ADI prescribed standards. This will also be required for the training programmes under direct management of a provider and also for a ‘stand-alone’ training programme |
| Templates to be completed | Forms and templates will be provided and completed as part of the accreditation process |
| Global Review Panel (GRP) | Membership and terms of reference will be confirmed by ADI. Guidance will also be provided for panel members, i.e, personnel involved in determining accreditation. Guidance /templates will also be provided to assist the REP with drafting their accreditation report/recommendations |
| ADI Board | The board will formally grant accreditation, based on the findings and official report from the Global Review Panel. |
| Eligibility Request | Formal request to ADI by a provider or stand-alone training body/ programme, seeking to be considered for ADI accreditation. |
| Continuous Improvement/Annual updates/CPD | Process to maintain accreditation |
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