

Quality Standards

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For the purposes of this Contract, existing General Civil Contract (“GCC”) holders must comply with the Specialist Quality Mark (“SQM”) in full and the Additional Requirements and Definitions for Telephone Services (“ARDTS”) - unless/until they are abolished or replaced by the Commission, in which case GCC holders must comply with whatever replaces the SQM and ARDTS in their entirety.

Both existing GCC holders and Providers without a GCC must comply with the Quality Standards set out in Annex 11 (which contain the most relevant extracts from the SQM and ARDTS for the provision of Telephone Advice).

“Specialist Quality Mark” or “SQM” means the Commission’s existing quality assurance standard for GCC holders operating at the “Specialist” level. A “Specialist” service is defined as one providing complex legal advice in specific areas of law, including representation at court (where permitted).

“Additional Requirements and Definitions for Telephone Services” or “ARDTS” are the additional parts of the Specialist Quality Mark that set the standard for current (i.e. pre-December 2006) CLS Direct Specialist Telephone Advice Providers.

Note: in the Quality Standards you will see “requirements” under each heading. These are the mandatory requirements that Providers must meet. The text below each requirement expands on the requirement. They are mandatory where the word **“must”** appears in bold type. Where the word *“note”* appears in italics, the text is meant as guidance only; it is not mandatory, but you should note its content.

1. Signposting and referral

Purpose: To ensure that individuals receive advice from an appropriate alternative service provider whenever your organisation cannot help them, either where you cannot help them initially before any legal advice has been given (i.e. signposting), or where you cannot help them further in a current matter where a client relationship has already been established (i.e. referral).

1.1. Staff knowledge about when to use signposting and referral

Requirement: Members of staff know when to use signposting and referral.

- Staff **must** be able to demonstrate how they identify when to signpost and when to refer. See notes below for examples.
- The need for signposting will usually arise when the individual first provides information about the type of legal problem they have and you realise they require a service that your organisation cannot provide. Often this will be when they make their first contact with you to seek help, though sometimes it may become apparent only after an initial diagnostic interview.
- Although it is not a requirement for you to decide which alternative provider they should see or to offer assistance in making arrangements for them, you are likely to consider this appropriate in certain circumstances.
- The requirement for referral arises only where you have an established client relationship in a current matter. Good referral practice means that you will usually identify the need for, and make, a referral before you reach the point where you cannot offer further help.
- In the case of referrals (unlike signposting) you are expected to make arrangements for the client to see someone from the new organisation and you will need to meet minimum requirements (see 1.2 below) about information provided to both the client and the new organisation.
- For Telephone Advice services this includes a consideration of when a face-to-face service may be more appropriate.
- Staff in Telephone Advice services **must** be able to demonstrate how they assess whether a face-to-face service may be more appropriate for clients than a Telephone Advice service, and signpost or refer appropriately.
- Telephone advice is not suitable for all clients. Unsuitable clients can be split into two groups: those unable to fully understand the advice that is given over the telephone; and those with an issue so complex that it is very difficult to discern the facts of the case and take proper instructions over the telephone – usually this would be due to the amount of paperwork involved.
- The former group includes people with learning difficulties, very severe language issues or even mental health problems. Such clients need a level of support and

assistance that may be very difficult to offer over the phone at a long distance. However, a number of clients with such problems have been advised over the telephone with the support of other professionals such as social workers, residential care staff or other, local advice workers. With such support, it is possible for these types of client to be advised over the phone.

- Where a client has an extremely complex case, Providers may decide that it is more appropriate for the client to see someone face to face, who can work through the paperwork with them and get clear instructions. It can often be difficult for clients to describe the documents they have been sent, or to explain their exact circumstances, and it may be impractical for a very large quantity of documents to be sent to the Caseworker by post. In some cases, Caseworkers may feel that a client is not telling them the full facts of the case, and in these circumstances Caseworkers may feel that a face-to-face service is needed to ask further questions and see the client's reactions.
- If a Provider has both a telephone and a face-to-face service (a GCC), the signpost may be internal. That is, a referral may be made from the Provider's telephone service to their face-to-face service provided the client's home address postcode is within their bid zone. (See also Annex 10 on 'ineligible clients and referrals').

1.2. A procedure for conducting signposting and referral

Requirement: A procedure and process(es) for conducting signposting and referral exist and are in effective operation.
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Signposting

- For signposting - your procedure **must** confirm that, as a minimum, you will signpost any individual whom your organisation is unable to help. Signposting means that you **must** do at least one of the following options:
 - Provide access to the CLS/CDS Directory (www.clsdirect.org.uk) and offer assistance to guide the client through it. If the organisation does not have internet access then they **must** make the details of www.clsdirect.org.uk available.
 - Provide a list of local (or specialist) organisations that you have produced by area of law, or provide your own recommendation.
- It is good practice to provide direct assistance wherever possible.

Referral

- For referrals – your procedure must include, as a minimum, the practical steps to be taken to identify appropriate service providers.
- The process you adopt for referrals (usually documented in your procedure) **must** ensure that in all instances:
 - The client is told what role your organisation will take and what service(s) they should expect from the new service provider.
 - Any feedback that is later given (by the client) on the service provided by the new service provider is recorded and reviewed.

- Information about advice or assistance already given (and any relevant documentation) is forwarded to the new service provider.
 - Any cost implications identified are discussed with the client (i.e. as a minimum this means explaining the relevant charging information shown in the CLS/CDS Directory) and noted on file.
- It is probably rare for a Telephone Advice service to take responsibility for contacting the other service on behalf of a client, i.e. making a referral, but where this happens costs information **must** be discussed with the client and noted on file. This includes cases where the referral is to a telephone service that charges clients above the rate for a national call.
 - Situations where you may not be able to assist would include those where telephone communication was not appropriate given the nature of the client or their case.
 - Where the organisation is unable to provide a service to people because of communication difficulties, those people **must** be signposted to another service. Where there is no suitable alternative service, records **must** be kept and made available to the Commission (see 1.3 below).
 - *Note* the organisation may wish to consider having emergency numbers on their out-of-hours answerphone message if relevant for the client group, e.g. the Samaritans or Women's Aid.
 - If a Caseworker becomes aware that a case will require representation, there will be a need to refer to a face-to-face adviser who can offer this service. Providers should work on the principle that where representation is necessary, referral is made as early on as possible to avoid the wasteful situation where a Telephone Advice service works on the case, and then after referral the new adviser must acquaint themselves with the case and take further instructions from the client. This is not a good service from the client's point of view.
 - Occasionally, it may prove impossible to make a referral, and in such situations, Telephone Advice services will need to work to support clients as much as possible within the remit of the service. For example, where a client must attend a hearing related to housing or debt, Providers will try as much as possible to equip the client to attend the hearing alone. This may involve advising on the completion of court forms, drafting statements and helping the client understand what will happen at the hearing and what information they must provide.

1.3. Maintaining and reviewing referral records and data

Requirement: Records of referrals are maintained (including records of all instances where no suitable service provider could be found), and reviewed at least annually.

- You **must** have a process (usually documented in your procedure) to ensure that:
 - Records for all referrals identify, as a minimum, the client or case; who made the referral; the matter type; to whom the client was referred; and the reason for the referral (e.g. related to the scope of the matter type, to case capacity or to the limits of the Caseworker's competence).

- Records are kept every time a suitable service provider could not be found when the need for a referral had been identified, and these records include the subject matter and what (if anything) was done to progress the client's case further.

1.4. Ensuring that your information is up to date

Requirement: Access to the CLS/CDS Directory is available, and there is a process to ensure that details about alternative service providers are kept up to date.

- Access to the CLS/CDS Directory **must** be available and **must** contain correct information about your organisation (or steps **must** have been taken to correct errors).
- The CLS/CDS Directory is accessible either via the Community Legal Service Direct website (www.clsdirect.org.uk) or via the Community Legal Service Direct national helpline (0845 345 4 345).
- You **must** demonstrate that you have access to current details - i.e. telephone number(s), type(s) of service offered, opening times, charging information, languages offered and disabled access availability - for any alternative service providers used (i.e. ones not in the CLS/CDS Directory).

2. Professional indemnity insurance

Purpose: It is important that organisations meet requirements concerning indemnity insurance.

Requirement: The organisation meets relevant requirements concerning indemnity insurance set by its recognised representative body and is indemnified against loss of up to £1 million in each and every claim.

- For solicitor organisations, current professional indemnity insurance **must** exist in accordance with section 37 of the Solicitors Act 1974 and **must** comply with current Solicitors' Indemnity Insurance Rules (as evidenced by indemnity insurance that complies with minimum terms and conditions and, where appropriate, a current practising certificate).
- Non-solicitor organisations **must** comply with any minimum terms and conditions set by their recognised representative body, and **must** in any event provide, if requested, a certificate(s) of indemnity insurance showing continuous cover since the Contract commenced, of up to £1 million in each and every claim.
- Services directly provided by a local authority or other public body **must** be able (if requested) to provide evidence that they are indemnified against loss of up to £1 million in each and every claim. The Commission will note that indemnity may not necessarily be provided by insurance and that where it is provided by guarantee to meet any such claim, this may be evident from the status of the funder (i.e. not require further evidence).

3. Recruitment and equal opportunities for staff

Purpose: To ensure that everyone's contribution to the service is recognised and their potential is realised, without discrimination.

3.1. Non-discrimination in the selection, treatment and behaviour of staff

Requirement: A written equal opportunities policy is in place and available to all staff, covering the selection, treatment (including promotion) and behaviour of staff, which precludes discrimination on the grounds of race, colour, ethnic or national origins, sex, marital status or sexual orientation, disability, age or religion or belief.

- Your policy must cover the behaviour of staff towards one another, and it must outline the action to be taken if any breaches occur.
- In respect of action to be taken if any breaches occur, this can be documented either in the policy, or in a separate grievance procedure to which your policy makes reference (where that procedure is applicable to all members of staff and where they know it is applicable to them).
- You may adopt an existing model policy (e.g. by The Law Society or Citizens Advice), but will need to include additional grounds and extend the scope, in order to meet our minimum requirements.

3.2. Operating an open recruitment process

Requirement: An open recruitment process is in operation.

- For your recruitment process to be considered "open", you must be able to demonstrate that for each available permanent vacancy, the job is offered to the most suitable individual, on the basis of an objective and consistent assessment against requirements that you set relating to the role's key tasks and responsibilities as well as any relevant personal attributes that you seek.
- All short listed candidates (as a minimum) must be able to obtain feedback from assessment (if they request it), with assessment records being kept for all applicants and candidates (whether shortlisted or not) for at least 12 months.

4. Induction, appraisal and training

Purpose: If your service is to meet its potential, with clients given a quality service, attention must be given to staff development.

Providers will be responsible for ensuring that any new trainee Caseworkers receive appropriate training to ensure that they have sufficient knowledge and expertise to take calls from CLS Direct and advise clients. In addition, Providers will need to ensure that all Caseworkers receive further training as necessary during the Contract Term to keep them up to date with legal developments.

4.1. Induction

Requirement: An induction process exists for people who join the organisation.

- Induction **must** begin within two months of joining (unless justifiable reasons have been recorded), and the process **must** cover all of the areas listed below:
 - The organisation's aims.
 - The management/staff structure and where the new post fits into it.
 - The recruit's role and the work of their department or team.
 - The organisation's policies on non-discrimination, quality, customer care and complaints.
 - The office procedures manual and/or other work instructions/processes relevant to the post.
 - Terms and conditions of employment, and welfare and safety matters.
 - Telephone skills training. This **must** include:
 - Communicating on the telephone, including listening and responding.
 - Understanding the nature of dealing with enquiries on the telephone.
 - Beginning and ending calls.
 - Structuring a telephone interview.
 - Handling difficult calls, such as silent calls, distressed callers or abusive calls.
- Records confirming induction (content and date(s)) for each individual **must** be kept.
- These records may be kept on individuals' personal files (i.e. not necessarily in a central file).
- For new staff that have recent experience of telephone advice their induction should include an assessment of their telephone skills. The assessment **must** cover each of the elements above and the subsequent training should be tailored to the individual's needs.
- An organisation **must** have a policy on dealing with communication difficulties (e.g. language difficulties and people with disabilities).
- Training may be provided internally or externally.

4.2. Performance review and feedback

Requirement: Performance appraisal of all members of staff takes place, and is undertaken at least annually.

- Annual appraisals **must** be conducted for all members of staff (including partners, managers and external Supervisors) other than with the Commission's agreement.
- Appraisal records **must** detail existing and future objectives and be signed by both parties.

- These records may be kept on individuals' personal files (i.e. not necessarily in a central file).

4.3. Individual training and development plans

Requirement: Individual training and development plans are produced, and are reviewed at least annually, and the review is recorded.

- Plans **must** include any training needs and/or development opportunities identified:
 - During appraisals, file reviews and supervisory sessions.
 - From business or service reviews.
 - As a result of recognising that a required skill is not available in the organisation.
- The plans **must** outline what is to be achieved (i.e. aim), how it is to be achieved (i.e. method), and over what timescale.
- Assessment of training needs and development opportunities **must** cover organisational, managerial and/or legal competence, as necessary.
- Training and development plans and records of review may be kept on individuals' personal files (i.e. not necessarily in a central file). The relevant information may be retained as part of documents kept on appraisal.
- Different skills are needed to elicit information and give help over the telephone than when working face to face. Training **must** be appropriate for the needs of the organisation and **must** specifically cover telephone skills.
- Training should build upon the telephone skills given at induction. Some of the issues that training could cover in depth include:
 - Communicating on the telephone, including listening and responding.
 - Understanding the nature of dealing with enquiries on the telephone.
 - Beginning and ending calls.
 - Structuring a telephone interview.
 - Handling difficult calls, such as silent calls, distressed callers or abusive calls.
 - Considering issues relating to the organisation's policies such as the call-handling system, confidentiality, signposting and referrals, complaints and user feedback, and use of information resources that are particularly relevant because of the method of service delivery.
 - Methods of supervising other staff (for Supervisors).
- Training may be provided internally or externally.
- Caseworkers should be given training so they are aware of the expectations of them when communication is difficult (e.g. dealing with people with language difficulties and people with disabilities).

4.4. Training records

Requirement: All training is recorded.

- Training records **must** include the dates of external and in-house training courses attended (or given), the course titles, the names of course providers, and, where qualifying for Continuing Professional Development (CPD) hours, the hours awarded **must** also be recorded.
- Where additional or alternative criteria apply (for courses or for non-course training respectively) details **must** be documented in order to qualify towards meeting the supervisor training requirements (see 5.4).
- Training records may be kept on individuals' personal files (i.e. not necessarily in a central file).

5. Supervisors

Purpose: To ensure that Supervisors are in place with the requisite skills and experience to act as mentors to the members of staff they supervise, and to underpin the delivery of quality legal work for the client.

5.1. Named category Supervisors

Requirement: A named Supervisor is available to supervise Caseworkers in each category of law.

- Where more than one Supervisor covers work in a category of law, documentation **must** show which individuals each supervises, and outline any specific responsibilities.
- The Commission **must** be sent details (in writing and within 28 calendar days) whenever a Supervisor leaves or is changed, including the name and date of leaving of the outgoing Supervisor and the name of the new person, their date of appointment and how they qualify as a Supervisor, or outlining satisfactory arrangements to recruit and steps taken to control quality of work in the interim.

External Supervisors (from other organisations)

- External Supervisors may be authorised at the Commission's discretion. In order to be considered, the individual **must** meet 5.2 and 5.3 in full, their role **must** be formalised by a contract, and supervisory arrangements **must** be documented in detail. They **must** be included in the staff structure and their performance **must** be appraised (see 4.2).
- The Commission will also have regard for the experience of staff being supervised, and will expect each typically to receive two hours' supervision per week, some or all of which is on a one-to-one basis. In accordance with requirement 5.5 external Supervisors can supervise only a limited number of Caseworkers (i.e. three).
- Finally, external Supervisors **must** be able to demonstrate that the arrangement will not be detrimental to supervisory duties they carry out for any other organisation.

Accessibility

- The Supervisor **must** be present in the office for sufficient time to demonstrate effective supervision (see 6.2), and **must** be able to demonstrate control over the quality of work for the rest of the time (e.g. by scheduling specific supervisory sessions, by delegating correspondence checking to a deputy, or by being accessible by telephone or e-mail).

Deputy Supervisors

- A deputy Supervisor (who may not meet all of the requirements at 5.2 and 5.3) can be named and can carry out functions usually performed by the Supervisor, under their supervision (i.e. the Supervisor **must** demonstrate that they maintain overall responsibility). Deputy Supervisors **must** be denoted as such in the staff structure and they **must** have a training and development plan (4.3) that is specifically designed to provide the skills and experience necessary for them to be able to meet all of the Supervisor requirements in the future (e.g. by setting a date by which they will apply for panel membership or complete an NVQ in supervisory skills). A deputy may also act as a temporary Supervisor in the Supervisor's absence, and in such instances you need not justify the nomination nor carry out an appraisal after ten days.

Temporary Supervisors

- A temporary Supervisor (who may not meet all of the requirements at 5.2 and 5.3) can be nominated to cover periods of absence or sickness, but you **must** be able to explain the grounds on which that person was nominated, and a performance appraisal **must** be carried out (within 28 calendar days) should the period of cover extend beyond ten consecutive working days.
- Delegation to a temporary Supervisor **must** not extend beyond four weeks continuously, or eight weeks in any calendar year, without the authority of the Commission.
- Temporary supervisory cover or the use of a deputy Supervisor may be particularly relevant depending on how the telephone service is run and organised (e.g. a 24 hour service).

5.2. Supervisors' legal competence

Requirement: Each Supervisor meets the relevant category-specific legal competence standard, as set out in Annex A .

Supervisors' legal competence standard

Category-specific standards in Annex A

- Where category-specific standards are given in Annex A, these **must** be met in full (subject to the exemption below).
- Exemptions from meeting the standard can be made in extremely rare cases, and are entirely at the discretion of the Commission.

Where Annex A requires a portfolio

- A portfolio **must** be supplied for each Supervisor, and cases to which you have referred (as evidence of meeting the requirements) **must** be available at the time of request/ on an audit (unless they are retained by another organisation, when summary notes about each case will be required). In addition to the portfolio, case involvement (in the relevant category of law) by the Supervisor **must** consistently be maintained at the minimum level specified in Annex A (usually 350 hours per year), and, on application, the Supervisor **must** be able to demonstrate past case involvement at the same level for the last three years, if full-time, or the same total hours (usually 1050 hours) over five years, if part-time.

5.3. Supervisory skills

Requirement: Each Supervisor (including sole practitioners) meets *one* of the following supervisory skills standards:

- (a) Assessed as working at Level 3 or higher (within the NVQ framework) in relevant elements of the national standards;
or
- (b) Training covering key supervisory skills completed in the 12 months immediately preceding the commencement of the Contract;
or
- (c) Able to demonstrate experience as an effective supervisor (covering supervision of all of the work being done in the department) of at least one full time member of staff (or equivalent) for at least one year in the last five years;
and
- (d) Undertaken training in giving assistance and advice over the telephone.

5.4. Supervisors' legal training

Requirement: Training records show that Supervisors maintain and extend technical legal knowledge to a minimum level of six CPD hours (or equivalent) per year, and that this part of their training relates directly (or can be applied directly) to the area of law being supervised.

- Supervisors (including non-solicitor Supervisors) **must** demonstrate that they have spent a minimum total of six CPD hours or equivalent per year on one or more of the following:
 - Attending training courses that qualify for CPD hours (i.e. CPD-accredited courses or those approved by an Investors in People (IiP) organisation), although non-interactive training (e.g. video) cannot exceed four of the six hours required (and qualifies only where consideration of the issues is additional and documented).
 - Attending training courses that do not qualify for CPD hours, but only where they can be justified on grounds that CPD training was not readily available, or that the alternative was more suitable, and only where training lasts for two hours or longer and is supported by course material.
 - Delivering training courses (externally or in-house), but only where supported by course material, and only for a maximum of three of the six hours required.

- Discussions of technical legal issues within regional or national practitioner associations, but only where supported by evidence of what was discussed and when (e.g. dated handouts or notes of cases/issues discussed).
 - Publications by the Supervisor, but only where written for other practitioners, promoting best practice (i.e. not comment or editorial), and published in an externally edited publication form, and then only to a maximum of four of the six hours required (with the hours equivalent agreed with the Commission).
- Details of qualifying training, including (as applicable) type, title, provider, CPD accreditation status, date, duration and any other condition required to justify it as qualifying training, **must** be documented and stored on Supervisors' personal files or on central files.
 - Where a Supervisor has been absent for a period in excess of three months (e.g. owing to sickness or maternity leave), requirement 5.4 is suspended for that period of time (though maintenance of legal knowledge **must** be demonstrated on return).

5.5. Conditions for supervision

Requirement: There are arrangements (relating to time spent supervising and numbers supervised) to ensure that each Supervisor is able to conduct their role effectively.

- You **must** be able to demonstrate that time is designated for supervision and you **must** be able to justify the number of Caseworkers supervised by each Supervisor.
- Where an external Supervisor is in place (see 5.1), they **must not** supervise more than three Caseworkers, and where the Caseworkers being supervised individually or collectively have case involvement at the level specified for the relevant category in Annex A (i.e. usually 350 hours per year), there **must** be a plan for one of the three to meet the Supervisor standards (at 5.2 and 5.3) within three years. Exceptions will only be made where the arrangement is a short-term measure to cover extended leave or unexpected departure of a qualified Supervisor (where a permanent replacement **must** be found (or trained) within 12 months).

6. Operation of the supervisory role

Purpose: To ensure that Caseworkers are properly supported to deliver a quality service, and that their professional knowledge and skills are being developed continuously.

6.1. Case allocation

Requirement: Processes must be in place to ensure that Caseworkers are allocated cases according to the role they are required to fulfil and on the basis of their skills, competence and capacity.

- Supervisors **must** be able to demonstrate that Caseworkers are allocated only work that is appropriate for their role, and that it falls within their limits, in terms of skills, experience and available time.
- It is not a requirement that Supervisors allocate work on a day-to-day basis, but where they do not, you **must** be able to demonstrate how work is allocated so that it incorporates the Supervisor's assessments/reviews.
- Section 11.3 within these Quality Standards should also be consulted with regard to allowing Caseworkers sufficient time between calls to make a record of the advice given.
- Caseworkers' skills, competence and capacity can be tested by the demands of a Telephone Advice service. The culture of an organisation is important in allowing Caseworkers to decide when to take a break and encouraging Caseworkers to ask for support where they have had a particularly long or difficult call. Staffing levels and opening hours must be structured with reference to health and safety requirements (e.g. having more than one Caseworker able to take calls at any one time, managing the length of shifts, and considering issues relating to workspace and VDUs etc). This should ensure that Caseworkers are not asked to work beyond their capacity.

6.2. Systems of supervision

Requirement: Effective systems of supervision exist that are tailored to the skills and competence of individual members of staff/ Caseworkers.

- Arrangements for supervision **must** be tailored to each member of staff/ Caseworker according to their knowledge, skills and experience.
- Supervisors **must** be able to demonstrate control over the quality of work produced by the staff/ Caseworker they supervise, and **must** demonstrate how they ensure that staff skills and knowledge are being developed continuously through supervision.
- There is provision for deputy Supervisors (see 5.1) to conduct some case supervision. Where this happens, the Commission may require evidence that delegation has been properly managed and that the permanent Supervisor has continued to retain overall responsibility at all times.

6.3. Limits of individual competence and referral

Requirement: All members of staff/ Caseworkers know their own limits and are aware of the need to inform their Supervisor if a case is beyond them.

- Staff/ Caseworkers **must** be able to demonstrate referral of cases to their Supervisor (or elsewhere, including externally, if they are the Supervisor), or explain the point at which they would refer a case that had reached the limit of their competence. This embodies the Solicitors' Practice Rules (Rule 13), and applies equally to non-solicitors.
- Exceptions **must** be made on a case-by-case basis, only where referral is not possible due to the specific circumstances of the client (e.g. their mental state), the urgency of the case, or the lack of availability of a specialist to whom to refer.

- Where exceptional circumstances apply, the decision **must** be made with the approval of the Supervisor, and a written record of the circumstances, justifying the decision and giving the steps taken to overcome the lack of competence, **must** be provided on the file.

6.4. Access to reference materials

Requirement: There is ready access to current relevant legal reference materials.

- Current legal reference materials (including any specified for the relevant category of law in Annex A) **must** be available.
- You **must** be able to demonstrate how materials are kept up to date and made available to staff.

6.5. Updating legal information to staff

Requirement: A process exists for giving timely information to staff about changes in law, practice and procedure that are pertinent to the service they deliver.

- Supervisors **must** demonstrate how they become aware of relevant changes in legislation, practice and procedure, and then how they make sure that the knowledge of the Caseworkers they supervise is also kept up to date.

7. Caseworkers' competence

Purpose: To ensure that Caseworkers undertake legal training and have professional qualifications or regular involvement with the law, to support the concept of at least baseline legal competence in all areas of work conducted.

7.1. Training requirements for Caseworkers

Requirement: Training records show that, in each 12-month period, every Caseworker receives a minimum of six hours' training, of which 50% relates directly to the relevant category of law.

- All training should qualify for CPD hours (i.e. be CPD-accredited or approved by an IiP organisation), and any training that does not must be justified on the following grounds:
 - CPD-qualifying training was not available (usually owing to geographical location or subject matter).
 - CPD-qualifying training was not desirable (usually because an individual in your organisation is qualified to deliver training in the subject area or because training that was more appropriate to your needs was available from a non-CPD accredited source).

- To qualify towards the hours required, courses that are not CPD accredited (including in-house courses and seminars) must meet the following requirements:
 - Sessions last at least 30 minutes and a record of the title and purpose are made where sessions last between 30 minutes and one hour.
 - Supporting course material is available for all courses lasting longer than one hour.
- Non-interactive training (e.g. correspondence courses or training by video) should qualify for CPD hours and must include a documented discussion with the Supervisor (and ideally with other Caseworkers) of the issues raised (or review of exercises completed).
- Where an individual has been absent for a period in excess of three months (e.g. owing to sickness or maternity leave), requirement 7.1 is suspended for the period of absence.

7.2 Minimum hours

Requirement: All Caseworkers conduct a minimum of 12 hours' Casework per week (or equivalent).

- For the purpose of meeting the minimum number of hours, 'Casework' can include any case involvement as defined in the relevant supervisor standard and self-declaration form (at Annex A), as well as time being trained or supervised, but not time spent in ordinary (non-legal) team meetings.
- All qualifying Casework must be subject to supervision that meets the requirements of Section 6.

8. Client confidentiality

Purpose: To ensure the confidence of clients, it is essential that services be provided in a private and confidential manner.

8.1. A confidentiality procedure

Requirement: A confidentiality procedure covers all information given to the organisation about the client and their case. The effects of telephone technology on confidentiality need to be considered in developing your confidentiality policy.

- You **must** have a procedure that is understood by all staff in the organisation who have access to case information (i.e. not only Caseworkers). It **must** include circumstances in which a breach of the duty of confidentiality should be considered and the process that **must** be followed at that point.
- Where confidentiality might be a particular issue (including, for example, where more than one organisation shares the same premises, where you act for different parties (e.g. co-defendants) in the same matter, or immediately following a merger with another organisation), your procedure **must** include guidance specifically on how confidentiality will be maintained in those circumstances.

- If you adopt an existing confidentiality procedure, provided it meets all of the requirements given here, you need only document this fact and ensure that staff know what the procedure contains and how to access it (i.e. you need not repeat the procedure yourself).
- Note that legislation requires the protection of clients' data by you and also by anyone with whom you share it, for example, costs draftsmen or experts.
- The following effects of telephone technology on confidentiality **must** be considered, and your approach outlined in your confidentiality procedure:
 - Callers' numbers must not be identified where the service is provided on an anonymous basis.
 - You must obtain agreement for returning clients' calls (this must then be noted on the client's file).
 - You **must** check with clients as to whether you can reveal who you are to anyone else who answers the telephone when calling a client back, and whether you can leave a message on the client's answerphone.
 - *Note* that a commonsense view should be taken regarding obtaining a client's agreement before returning a call. For example, where a client has left a number on an answerphone or included it in a letter requesting information, this will be taken as agreement for the call to be returned. Once Caseworkers have checked that they can call clients, this permission will be considered to be ongoing unless the client states otherwise.
 - The service **must** block its number in outgoing calls or provide reasons for not doing so (e.g. not relevant for call types).
 - *Note* that many clients use telephone services for their anonymity. It is good practice for the service to block its own number in outgoing calls, particularly where the Provider is dealing with sensitive issues and/or vulnerable client groups. The reason for this is to prevent other people from dialling 1471 and discovering that the client has called the Provider. However, for some services, this may not be relevant.
 - Clients **must** be made aware when there is the possibility of "listening in" or the recording of conversations for the purposes of supervision or training, so that clients can have the opportunity to opt out of the process or choose not to continue with the call.
 - *Note* that some services use "listening in" or the recording of conversations for supervision or training purposes. To make clients aware when this is a possibility an automated message could be used. Some services inform clients of this possibility only when the call is actually listened in to.
 - Telephone services **must** have systems to ensure that confidential information held on client records is only discussed after establishing the identity of the caller.
 - If the service has a mechanism for identifying callers' numbers, you **must** demonstrate that it is only revealed to Caseworkers on a "need to know" basis. Where the number is used to link the call to a client's records on a computer database, you **must** ensure they have established the caller's identity before revealing any information.

- For the purposes of monitoring where calls are coming from, only the first part of the telephone number needs to be identified. Where the caller does not wish to give their name, Providers may wish to consider giving callers a reference number so that their records can be accessed if they call again.
- It is important to recognise that callers may not always be able to discuss their enquiry fully because of their situation, and it may be more appropriate for them to call back or for the Provider to return their call at a different time.

8.2. Privacy

Requirement: Arrangements are in place to ensure privacy in meetings with clients.

- You **must** be able demonstrate to the Commission that that you have facilities (or that you make efforts) to discuss matters with the client in a private location.
- For Telephone Advice services, ‘meetings’ includes all interactions with the client, including the retrieval of messages from an answerphone.

9. File management

Purpose: To ensure that cases are properly managed and controlled, both overall (from an organisational perspective) and individually (so that they are acted upon appropriately and punctually).

9.1. File lists

Requirement: A file management system is in place, producing detailed lists of open and closed cases.

- A list of all files for work conducted within any part of your Telephone Advice **must** be made available to the Commission before each audit, and on request. As a minimum, the list(s) **must** identify the file reference, Caseworker, date opened and, where applicable, date closed. All open files and, as a minimum, all files closed in the last 12 months **must** be included.
- You must also include on your file list(s) details concerning any “tolerance” work undertaken.
- You **must** be able to produce to the auditor or the Commission, on request, any file listed (see 9.2(b) below, regarding access to files).

9.2. File management procedure(s)

Requirement: Documented procedures are effective in:

- (a) Identifying potential conflicts of interest.
- (b) Locating files and tracing documents, correspondence and other items relating to any matter that is open or has been closed for less than six years.
- (c) Maintaining a backup record of key dates.

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|-----|--|
| (d) | Recording solicitor undertakings (their authorisation and monitoring, including discharge) given on behalf of the organisation. |
| (e) | Monitoring files for inactivity at pre-determined intervals. |
| (f) | Identifying relevant matters (when acting for a client in a number of matters), and linking files (where more than one file is relevant to the client's case). |

Conflict of interest

- Your procedure **must** identify the process you follow and it **must** contain details about how to deal with specific circumstances that are likely to occur. You **must** also have evidence confirming the date(s) on which the conflict of interest check(s) was completed.

Locating files and tracing contents

- Your procedure **must** allow you to access files (at least those containing correspondence) from your on-site filing system, or from archive for files closed up to six years ago.

Backup recording of key dates

- You **must** document your definition of “key dates”, which, as a minimum, **must** include litigation limitation dates and court/tribunal hearing dates. Your procedure(s) **must** outline the backup system Caseworkers use to ensure that they are alerted (other than by their own diaries) to the relevant key dates, as well as identifying who is responsible for recording and monitoring key dates records, and how often this is done.

Recording, authorising and monitoring solicitor undertakings

- Solicitor organisations **must** either have a procedure or procedures identifying who is authorised to give which type(s) of undertaking, how they are to be recorded, and how they will be monitored or, alternatively, all Caseworkers **must** be aware that no undertakings are to be given.

Monitoring files for inactivity

- Your procedure(s) **must** outline the process and identify how frequently reviews will take place. You **must** justify any file-monitoring interval longer than three months.

Identifying relevant matters and linking files

- Your procedure **must** define “relevant matters”, and outline how they are to be identified on files, as well as outlining the process by which all files concerning the same matters are linked.

9.3. Case files are logical and orderly

Requirement: Case files are presented in an orderly and logical manner, and key information is readily apparent to someone other than the person who normally has conduct of the case.
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- As a minimum, key dates, undertakings and any funding limitations **must** be shown together in a prominent place on the file (i.e. on the outside or on the flysheet/inside cover of a paper file, or in a summary section of a computerised file), and the case status or latest action **must** be evident from the file. Documents **must** be stored securely and correspondence **must** be filed in chronological order.

10. File review

Purpose: An independent review of casework enables organisations to monitor the quality of the advice and service being provided, as well as allowing early intervention where concerns are raised, and enabling training and development needs to be quickly identified and acted upon.

10.1. File review processes and procedures

Requirement: For each Caseworker:

- (a) The number of cases to be reviewed in each category of law, and the frequency, and method of review (unless all reviews are file content only) has been documented and can be demonstrated to have been determined according to their experience, expertise and quality of work (subject to any minimum requirements specified in Annex A).
- (b) The sample of work reviewed can be demonstrated to be representative of their overall caseload.
- (c) Review findings are communicated in accordance with a (written) procedure.
- (d) Corrective action is completed within a reasonable timescale and to the satisfaction of the reviewer in accordance with a (written) procedure.

(a) Numbers, frequency and method

You **must** document the number of files to be reviewed and the frequency, and the method(s) of review, for each Caseworker (to whom cases have been allocated) and you **must** be able to justify these to the Commission (including its auditor) on the basis of their experience, expertise and on any findings that have implications for the quality of their work (e.g. previous file reviews). While review frequency must be justified (as above), it will not ordinarily be possible to justify file reviews that are less frequent than every three months.

You are required to include “tolerance work” in your file review arrangements.

(b) Representative samples

You **must** be able to demonstrate that the files selected for review reflect the range of work conducted by each individual over the period of a year. You are likely to have a process to ensure that this happens and may want to document category or case classifications to be covered, alongside the numbers of files to be reviewed and the method to be used (see (a) above), where the individual covers a wide range of work (although it is not a requirement to do so).

(c) Communicating review findings

Your procedure **must** outline how the individual is to become aware that a file has been reviewed, how the review findings (including any corrective action identified) will be communicated, and within what timescales. You may want to have different processes and/or timescales for reviews in which corrective action is identified, as opposed to those where it is not.

(d) Reviewing corrective action

Your procedure **must** set out the process you use to ensure that corrective action has been completed to the satisfaction of the reviewer, and within the timescale agreed (and that the timescale for completion and for review of corrective action can be justified to the auditor in terms of the significance of error, the risk posed to you, the client or a funder, and the urgency required).

10.2. Process management

Requirement: The review process is managed by the category Supervisor.

The category Supervisor **must** be able to demonstrate that file review processes and procedures are followed, and that they are aware of the status of reviews and all findings, including any reviews not carried out by them personally and findings from periodic monitoring (see 10.6).

10.3. File reviewers

Requirement: All reviews are carried out by a suitably qualified individual.

- All reviews (other than for Supervisors, of their own work) **must** be carried out by one of the category Supervisors, or the category Supervisor, other than where one of the following applies:
 - Reviews by a temporary Supervisor (see 5.1) may occur for short holiday periods and in exceptional circumstances (where the conditions for temporary supervisors will apply).
 - Reviews have been delegated to deputy Supervisors (see 5.1) with the prior authority of the Commission, unless the individual also meets 5.2 in full (i.e. the legal competence requirements for Supervisors) in which case prior authority is not required.
 - Procedural checks (only) have been delegated to other members of staff.
 - Prior authority has been granted (by the Commission) to allow someone else to conduct routine or specific reviews (to a maximum of 50% of files to be reviewed).

10.4. Review (and any corrective action) is evident on file

Requirement: Conduct of a file review (and details of any corrective action to be taken) is evident from the case file.

- Files that have been reviewed **must** contain a note which, as a minimum, confirms the date of review and the identification of the reviewer. Where corrective action was identified the note **must** also include details of the action to be taken and the timescale within which it must be completed. *Note* that it may

also be appropriate to identify the person whose work is being reviewed where more than one person has conducted work on the file.

10.5. Review records

Requirement: A comprehensive record of findings is produced for each file review.

- Records **must** be kept together (centrally and/or on the individuals' personal files) and **must** provide all the following detail for each review:
 - Key file review information, including:
 - File reference.
 - Date of review.
 - Category of law (or case classification).
 - Caseworker and reviewer identification.
 - Method.
 - A note which confirms that each of the following has been checked and found satisfactory, or details of any adverse findings in respect of:
 - Quality of legal advice given.
 - Action proposed or taken.
 - Adherence to organisational procedures.
 - Evidence about corrective action (i.e. was it required or was a training need identified, and, in either case, a summary of the problem or scope for improvement, the action proposed and subsequent confirmation of completion).

10.6. Monitoring File Review

Requirement: Records of file reviews are monitored at least annually, with action taken to improve performance where negative trends are identified.

- As a minimum you **must** show that all records are reviewed at least once a year to identify recurring or emerging trends in performance. *Note* that this can be the performance of individuals, of departments of the organisation as a whole, or any combination, at your discretion.

10.7. File review form

Requirement: The recommended file review form will be used in undertaking file reviews.

- The form that we suggest you use in undertaking file reviews is available in **Annex B**. This form is designed to obtain feedback on all areas involved in running a file. You may use a different form if you wish, provided you capture the same information on it. The reviewer should give each section a score of 1 – 5 (or X) based on the following marking scheme:

- 1 – Excellent
- 2 – Competence plus / good
- 3 – Threshold competence
- 4 – Not competent / poor
- 5 – Non-performance / very poor
- X – Insufficient information to make a judgement

Based on the scores given to each section an overall score (using the same marking scheme) would then be given to each file.

- The suggested form has been designed to reflect the criteria used when conducting Peer Reviews. It is to be expected that Providers using this system will gain an early indication of their likely Peer Review result.
- You **must** report the outcome of these file reviews as part of your Monthly Performance Reports.

11. Running a case

Purpose:

At the outset: To make sure that clients are provided with information about the service they will receive (and what to do if they are not satisfied with that service), and to confirm, where appropriate, the basis on which you propose to proceed with their case, including initial costs advice.

Progress of the case: To make sure that, throughout the case, clients are aware of what action is being undertaken on their behalf, and so that they are informed of progress, costs (including costs to date, the overall costs estimate and any potential liability), and of any significant changes to other information confirmed at the outset of the case or since.

At the end of the case: To make sure that the client has confirmation, at the conclusion of the case, about what happened, what further action may be taken or may be necessary, and to account for any outstanding money or original documents.

11.1. Recording and offering confirmation of basic information

Requirement: Work practices show that in all cases of one-off advice the Caseworker records and, unless one of the specified exemptions applies, offers written confirmation of:

- (a) The requirements or instructions of the client.
- (b) The advice given and, where appropriate, action to be taken by the organisation.
- (c) The name and status of the person dealing with the matter and whom to approach should the client be dissatisfied with the service provided.
- (d) Information given and received about methods of case payment and/or case funding.

- The information listed at (a)–(d) **must** be recorded in **all** instances (save only for where the client is given a diagnostic interview solely for the purpose of signposting, when written confirmation is also not required). *Note* that this includes one-off advice (including one-off telephone advice and Level 1 advice for NfP organisations that have a contract with the Commission), as well as any other short pieces of work, whether or not a file is opened.
- In addition to recording the information listed as (a)–(d) (in all instances), you **must** also offer to provide confirmation in writing, save for when one of the following exemptions applies:

- o Where you can justify that to do so would be prejudicial to the case (e.g. where the client is detained and so confidentiality of written material may be an issue).
 - o Where advice has been given by telephone (although you should note that this exemption does not extend beyond one-off advice).
- Where a file is subsequently opened (see 11.2 below), unless exceptional circumstances apply (also see 11.2 below), the information covered in this requirement (11.1) **must** be confirmed to the client in writing (i.e. not only offered).
- Confirmation in writing may take a number of different forms and may not all be provided in one document (e.g. follow-up letter, a contemporaneous duplicate copy of key information taken and advice given, a business card, a leaflet on your complaints procedure or a standard introductory letter).
- At 11.1(b) - Advice and/or action to be taken **must** be tailored to the client's needs (i.e. information sheets will not suffice unless they directly relate to the client's specific circumstances). You **must** also include advice on any limits (if there are any) on your willingness or ability to act (e.g. organisations that are unable to represent in court).
- At 11.1 (d) - Unless the client has been advised that you will not be making a charge in this case (e.g. in pro bono cases or where the service is local authority or charity funded), or that the case will be funded by a form of legal aid where the client is not required to make a contribution and can have no potential liability (see 11.1 (c) below), you **must** show that methods (and timing) of payment have been discussed with the client, and that the Caseworker has considered, as appropriate:
 - o Whether the client may be eligible for legal aid (other than non-contributory legal aid with no potential liability).
 - o Whether the client's liability for their own costs may be covered by insurance.
 - o Whether the client's liability for another party's costs may be covered by pre-purchased insurance and, if not, whether it would be advisable for those costs to be covered by after-the-event insurance (after-the-event insurance being considered where a conditional fee or contingency fee arrangement is proposed and pre-purchased insurance is not in place).
 - o Whether the client's liability for costs (including the costs of another party) may be paid by someone else (e.g. an employer or trade union).
- 11.1(b) - Services will need to consider how they obtain authorisation from clients to act on their behalf. For example, telephone technology allows three-way calls, so the Caseworker can negotiate with a third party and involve the client in the telephone call.
- 11.1 (d) - For all telephone services the client must be advised at the outset where the client will be charged above the rate for a national call, including premium rate services. Premium rate services are those numbers that have '090' dialling codes; they will normally be shown on a telephone bill as 'premium rate call' or 'high premium rate service'. Where this is the case:

- Information about the cost per minute and, where possible, the likely length of the call **must** be given at the beginning of the call and be displayed prominently on any publicity material and given clearly on audio promotional material.
 - Clients **must** be informed where the advice is available elsewhere from a service that does not charge above the rate for a national call.
 - Premium rate services **must** also comply with the Independent Committee for the Supervision of Standards of Telephone Information Services (ICSTIS) Code of Practice.
- Note that further details of the ICSTIS Code of Practice are available on the ICSTIS website (www.icstis.org.uk).

11.2. Recording and agreeing further information and confirmation in writing

Requirement: Work practices show that wherever a file is opened, unless exceptional circumstances apply, the Caseworker confirms the above records (11.1 (a)-(d)) in writing to the client at the earliest opportunity, together with the following:

- (a) The name of the individual with whom, and how, the client should raise any problem concerning the service provided.
- (b) Key dates in the matter.
- (c) Advance costs information, including, as applicable: likely overall costs, the organisation's charges/fees, cost-benefit and risk, and any potential liability (if legally aided, in contentious (and potentially contentious) matters and for any third party costs in non-contentious matters).
- (d) Further costs information (applicable where 11.2 (c) applies), including the arrangements for updating costs information, and any reasonably foreseeable payments that the client may have to make to the organisation or a third party.

- For this purpose, a file is "opened" where advice is given (or expected to be given) or work is undertaken (or is planned to be undertaken) on the client's behalf beyond one-off advice. This requirement therefore excludes all instances of one-off only advice following an initial interview where instructions were taken, or following an attendance at a police station or in court (including police station advice by telephone). The definition has nothing to do with whether a file (or a file record) is physically created or not.
- Where it is not possible to provide the client with confirmation of all the information at the outset (i.e. immediately following initial instructions), you **must** provide what information is available and justify (to the client and to the satisfaction of the auditor) the interval for providing the remainder.
- "Exceptional circumstances" (in which some or all of the information need not be confirmed to the client in writing) are those where the client expressly asks not to be informed in writing, where it would not be in their interest (e.g. there is evidence that it would be prejudicial to the client's case or would endanger their well-being) or where it would be inappropriate (e.g. in every case for a regular client for whom repetitive work is done and where the relevant information (which remains current) has already been given). All exceptions **must** be considered on a case-by-case basis (i.e. you cannot apply the exception to all cases of a certain type).

- The reason for considering that exceptional circumstances apply **must** be justified on the file, and a record of the required information must still be made, or be available (though it need not be confirmed in writing).
- At 11.2 (c) - You **must** provide a likely overall costs estimate at the outset, other than:
 - o Where the client has already been advised that you will not be making a charge in this case.
 - o In civil cases where there can be no potential liability for costs (i.e. certain legal aid funded cases including legal help (other than where the statutory charge applies), non-means/non-merits tested cases (public law/childcare), Child Abduction and Custody Act 1985 cases, and registration of certain foreign orders and judgement proceedings).
- *Note* that the definition above means that it will not be usual for non-solicitor NfP organisations to have to meet this requirement (11.2 (c)).
- At 11.2 (c) – Where the requirement applies (see exceptions above), likely overall costs **must** include any disbursements envisaged and VAT; they **must** be appropriate to the individual case (including agreeing a fixed fee, giving a maximum cost or a forecast within a range of costs, but not giving a blanket estimate for the type of case). Where you cannot provide an accurate assessment of overall costs at the outset, you **must** explain this to the client, and give them an idea of your best estimate of overall costs, as well as giving them an accurate assessment of costs to the next stage. Costs discussed here relate only to those likely to be incurred as a result of services provided by or through your organisation (i.e. you are not expected to cover the likely costs of another organisation, e.g. if the case were to be referred).
- Charges at 11.2 (c) - other than in legal aid cases or cases where the overall costs are fixed, you **must** explain how the client's costs will be calculated. If hourly rates apply this **must** be confirmed, together with the rate.
- At 11.2 (c) – In civil legal aid cases, where the requirements apply (see exceptions above), you **must** explain to the legally aided client their potential liability for their own costs and those of any other party, including:
 - o The effect of the statutory charge (if it might apply), why it might apply and the likely amount.
 - o The client's obligation to pay any contribution assessed and the consequences of not doing so.
 - o The effect of revocation of a legal aid certificate.
 - o The fact that the client may still be ordered by the court to contribute to the opponent's costs if the case is lost (even though their own costs are covered by legal aid).
 - o The fact that, even if the client wins, the opponent may not be ordered to pay or be capable of paying the full amount of the client's costs.
- At 11.2 (c) – In civil cases for privately paying clients, where the requirements apply (see exceptions above), you **must** explain to the client their potential liability for their own costs and for those of any other party, including:

- o The fact that the client will be responsible for paying the bill in full, regardless of any order for costs made against the opponent.
 - o The probability that the client will have to pay the opponent's costs as well as their own if the case is lost.
 - o The fact that, even if the client wins, the opponent may not be ordered to pay or be capable of paying the full amount of the client's costs.
 - o The fact that, if the opponent is legally aided, the client may not recover costs, even if they win.
- At 11.2 (c) – In civil cases where there are potential liabilities for third party costs in non-contentious matters you **must** explain to the client any liability they may have for the payment of the costs of a third party, and, where appropriate, you should obtain a firm figure or agree a cap to a third party's costs.

11.3. Allowing time for maintaining client records

Requirement: Sufficient time is given in between calls to enable Caseworkers to create, update and maintain client records.

- Advice records **must** be completed as soon as possible after the call to ensure that they are accurate. Caseworkers **must** complete records at the end of a shift, as a minimum, and must demonstrate how they recall details of the enquiry if there is a gap between taking the call and writing up the details (this also relates to 6.1).
- *Note* the advice given is more likely to rely upon a client's description or interpretation of their situation (e.g. a determination letter from the Benefits Agency, a stamp in a passport) rather than the Caseworker being able to see supporting documents for confirmation. For this reason, notes may need to be more comprehensive than for face-to-face services where this supporting information is easily available and kept on file.

11.4. Updating issues and case progress

Requirement: Issues raised in the case and any subsequent changes and proposed action are explained to the client, and progress generally (or reasons for lack of progress) is confirmed in writing to the client (unless exceptional circumstances apply), at appropriate stages, but not less than every six months.

- *Note* that "appropriate stages" (for updating information to clients) are likely to include landmarks in any pre-action protocol and key dates advised to the client (including meetings with counsel or experts, and hearings), as well as following the return of opinions and reports, or when a previously agreed timescale needs to change (owing to unforeseen delay). Updates at regular intervals should only be used as a backstop where no appropriate stage has been reached in the interim.
- *Note* that "exceptional circumstances" (in which some or all of the information need not be confirmed in writing) are the same as those given in 11.2.
- As at 11.2 (case and costs advice at the outset), wherever you consider that exceptional circumstances apply, your reasons **must** be justified on the file, and a record of the required information **must** still be made or be available (though it need not be confirmed to the client in writing).

11.5. Confirming information at the end of the case

Requirement: At the end of the case the client receives written confirmation, unless exceptional circumstances apply, of:

- (a) The outcome of the case, any further action the client is required to take in the matter and what, if anything, you will do next.
- (b) The arrangements for storage and retrieval of papers and other items retained and where appropriate:
- (c) An account to the client for any outstanding money.
- (d) Return to the client of original documents and other property belonging to the client (except for items that are, by agreement, to be stored by the organisation).
- (e) Information about whether the matter should be reviewed in future and, if so, when.

- Note that you do not need to apply this requirement to cases that do not progress beyond one-off advice (see 11.1) unless you consider it a matter of best practice to do so, and, “exceptional circumstances” (in which some or all of the information need not be confirmed in writing) are the same as those given in 11.2 (see definition).
- As at 11.2 (initial case and costs advice) and at 11.4 (updating issues and case progress), wherever you consider that exceptional circumstances apply, your reasons **must** be justified on the file, and a record of the required information **must** still be made or be available (though it need not be confirmed to the client in writing).
- Case outcome (at 11.5 (a)) – You **must** either confirm that you are ceasing to act and closing the case (e.g. where you receive no further instructions), or confirm the result of the case including any necessary explanation of terms and consequences (e.g. the meaning of terms such as “decree nisi” or what might happen if the client doesn’t “keep the peace”).
- Storage and retrieval of case papers (at 11.5 (b)) – You **must** confirm what you are keeping and tell the client how long their case papers (including copy documents) will be stored, what costs (if any) would be involved to retrieve them, and what steps they would need to take to do this at any point.
- Outstanding money (at 11.5(c)) – You **must** reconcile all accounts at the end of the case.
- Original documents (at 11.5 (d)) – You **must** either return these to the client or confirm arrangements for safekeeping (including, as a minimum, storage duration and how the client can retrieve them at any point).

12. Root cause analysis

Requirement: Emerging trends in case data are analysed in the form of root cause analysis and, where appropriate, suggestions are made to remedy any problems at source.

- You **must** perform some analysis of the case data captured by the Case Management System in the form of root cause analysis. This would involve reporting on any emerging trends and, where appropriate, making suggestions that aim to change the cause of the problem at its source. For example, you may be receiving a number of calls in the housing category of law that are due to the failure of a particular local authority to pay housing benefit in accordance with the correct procedures. In this instance, the recommended cause of action would be to contact the local authority to remedy the situation.
- *Note* that the requirement for this analysis, and the volume of it, will depend on the types and volumes of calls received in these particular areas.

13. Client feedback questionnaires

Requirement: Results of client feedback questionnaires provided by the Commission will be considered and action taken where necessary.

- CLS Direct will survey a sample of its clients on a regular basis. The outcomes will be made available to Providers for them to consider and take action as appropriate.

14. Use of approved suppliers

Purpose: To ensure that quality is maintained where any part of the service is to be delivered by another supplier (e.g. by counsel or by an expert).

14.1 Non-discrimination when instructing suppliers

Requirement: A written non-discrimination policy is in place and is available to all Caseworkers, covering the instruction of counsel or other experts, and precluding discrimination on the grounds of race, colour, ethnic or national origins, sex, marital status or sexual orientation, disability, age or religion or belief.

- Your policy **must** outline the action to be taken if any breaches occur.
- You must take reasonable steps to ensure that the supplier complies with the Race Relations Act 1976 and also as far as possible, the Commission for Racial Equality's Employment code of practice. See:
- www.homeoffice.gov.uk/docs/racerel1.html
www.cre.gov.uk/gdpract/employ_cop.html.
- You may adopt an existing model policy (e.g. by The Law Society or Citizens Advice), but may need to include additional grounds in order to meet our minimum requirements.

14.2 Selection of suppliers

Requirement: Suppliers are selected on the basis of objective assessment, other than in exceptional cases.

- Other than in exceptional circumstances, for all suppliers used, you **must** be able to demonstrate *one* of the following:
 - The supplier's details appeared in a register of approved suppliers that you created and there is evidence of the criteria (including, at least, quality of service, cost or value for money, speed of response and expertise, or the fact that they too have the Commission's Quality Mark) against which they were assessed before inclusion.
 - You used a supplier recommended to you by another organisation, but only where you can justify this on the basis that the organisation has already applied objective selection criteria (including, at least, quality of service, cost or value for money, speed of response and expertise).
 - The supplier also holds the Commission's Quality Mark (e.g. Barristers' Quality Mark).
 - The supplier had not been used previously, you had good reason for wanting to instruct them, and you have subsequently assessed their performance for inclusion (or otherwise) in your list of approved suppliers.
- "Exceptional circumstances" are those where you are required to use a new supplier on a one-off occasion (e.g. because of the nature of the type of report you need) or where a brief is passed on to a new barrister within chambers (e.g. owing to urgency). Where this happens, you must make a note of the circumstances on the file.

14.3 Evaluation of suppliers

Requirement: An evaluation is undertaken for all performances observed (e.g. in conference or court) and for all opinions and reports received, and any adverse findings are recorded so that Caseworkers who want to instruct a supplier in the future, and barristers who hold a Quality Mark, are aware of any relevant issue(s).

- You **must** check all opinions and reports to ensure that your instructions were met, and **must** either confirm that this is the case, or detail any adverse findings (usually in a central register).
- Adverse findings **must** be recorded and stored in such a way that they are obvious to any other Caseworker who may consider selecting the supplier in the future. *Note* that where you do not hold a central register (in which such findings can be stored), you will probably need to have a file of adverse findings and be able to demonstrate that this is checked by all Caseworkers before they select a supplier.
- Adverse findings for barristers who hold a Quality Mark must also be sent to the individual barrister concerned, other than in exceptional circumstances. *Note* that barristers holding the Quality Mark are also required to provide you (the instructing Caseworker) with any adverse feedback and that ideally you will choose to send favourable findings as well as adverse ones.
- Where you rely on using a supplier who has been recommended by another organisation, you must provide them with an evaluation of the service

received in every instance. *Note* that this does not include suppliers who are selected on the basis of information listed in the CLS/CDS Directory.

14.4 Information to the client and client consultation

Requirement: The client is consulted about the use (and where appropriate about the selection) of suppliers, and is advised of the name and status of the individual, for what purpose they are being instructed, how long they might take to respond, and, where disbursements are to be paid by the client, the cost involved.

- *Note* that the client may want to be involved in the selection of a supplier and may have particular views about who is instructed (see 14.1 if the client's instructions may result in a breach of your non-discrimination policy).
- *Note* also that the information set out in the requirement needs to be given to the client even where the Caseworker considers that it is not appropriate to consult them about actual selection. This is a likely scenario where the client's response would be irrational, but should only be applied where there are no cost implications for the client.

14.5 Content of instructions

Requirement: Instructions to the supplier are clear, accurate and comprehensive.

- Instructions **must** précis the facts in the case and identify issues as they are perceived, detail and attach relevant documents, and include instructions on what is to be provided and how. Arrangements for the payment of fees **must** be covered (with instructions or provided separately) and instructions **must** alert the supplier if a response is required within a certain timeframe (e.g. in accordance with an agreement or due to a pending limitation period or a court hearing).

ANNEX A - Family-specific requirements

Introduction

1. Detailed below are the requirements for the Family area of law.
 - The details of some of the requirements (e.g. those relating to legal competence for Supervisors) are set out in the self-declaration form that follow in this Annex. This details the requirements and **must** be completed. You may also be asked to complete a self-declaration form each time a Supervisor changes.
 - Existing Supervisors **must** meet the relevant requirements (including those detailed in this Annex) at all times, and must demonstrate that this is the case when required by the Commission.

How to apply the case involvement requirements

- Direct (documented) supervision is defined so that the Supervisor is effectively managing the case, e.g. making decisions on the case and directing a Caseworker in terms of tactics and strategies within the case. This will usually, but not necessarily, be on a one-to-one basis.



SUPERVISOR STANDARD AND SELF DECLARATION FORM

- Use for **Family** only
- You should photocopy this page as required and keep on record a completed copy for each supervisor.

Details of organisation/supervisor applying			
Organisation's name: Organisation's supplier number: Supervisor's name: Offices supervised:			
D3.2a Legal Competence Standard for Supervisors			
i)	Panel membership requirement		Give date of admittance and provide documentary proof of membership
a)	Current membership of The Law Society's Family Panel or Current membership of The Law Society's Children Panel or Current membership of the Solicitors Family Law Association Panel		 <hr/> <hr/> <hr/>
ii)	Case Involvement (at 350 hours in the previous 12 months)	Minimum/Maximum hours allowed	Hours completed in the previous 12 months
a)	Personal casework Direct (documented) supervision	Total minimum of 235 hours (of which personal casework cannot make up less than 115 hours)	
b)	File Review (including face-to-face)	Maximum 60 hours (i.e. approx. 50% of 115 hours)	

c)	External training delivery (CPD-accredited)	Maximum 115 hours	
d)	Documented research and the production of publications	Maximum 115 hours	
e)	Other supervision	Maximum 115 hours	
Full time <input type="checkbox"/>		Part time <input type="checkbox"/>	
Other requirements (as detailed in the standard)		Details	
D3.4	Legal Training. Please provide information to show how you met the legal training requirement for supervisors (at D3.4) in the last 12 months		
D4.5	Updating Legal Information Please summarise how you have become aware of changes in legislation and case law (as required at D4.5). If you rely on subscription to a specialist journal you should provide the title(s)		
Declaration			
I declare that the information provided is accurate to the best of my knowledge.			
Signed:			
Dated: <i>signed and dated by the supervisor named above</i>			

Notes:
Supervisors in solicitor agencies in the N/P sector **must** meet the panel membership requirement.

ANNEX B – File Review Form

LEGAL/QUALITY REVIEW OF SPECIALIST TELEPHONE ADVICE FILES

Caseworker:	Date of review:
Supervisor reviewer:	Review method (face-to-face / paper):
Client name:	Reference:
Category of law:	Case type:
Case complexity / difficulty:	

Key

1 = excellent	2 = competence plus/good	3 = threshold competence
4 = not competent/poor judgement	5 = non-performance/very poor	X = insufficient information to make a judgement

Summary information

1. Outcome of the case?	
2. Value for money in relation to service to client and use of public funds?	
3. Where ethical issues arise, were they dealt with appropriately?	

OVERALL SCORE

Legal corrective action required

Date due:	Date completed:	Supervisor sign-off:

Procedural corrective action required

Date due:	Date completed:	Supervisor sign-off:

Follow up supervision required / training needs identified		
Date due:		Supervisor sign-off:

A. The file	<i>Score</i>
1. How effective is the composition of the file?	
2. How appropriate is the level of information recorded? <ul style="list-style-type: none"> a. When taking initial instructions b. Undertaking casework 	
3. How appropriate was the management of the case throughout?	
4. Was all work / time justified on the file?	
Corrective action:	
Comments:	

B. Client care	<i>Score</i>
1. How fully has the Caseworker recorded: <ul style="list-style-type: none"> a. The client's full instructions b. The advice given c. The next steps or action to be taken 	
2. How fully has the Caseworker confirmed the following in writing: <ul style="list-style-type: none"> a. The client's full instructions b. The advice given c. The next steps or action to be taken 	
3. Was the client contacted within expected timeframes?	
4. Are there appropriate, full and legible notes of all consultations with the client?	
5. Could another Caseworker pick up the file and proceed with the case?	
Corrective action:	
Comments:	

C. Communication	<i>Score</i>
1. How appropriate were the Caseworker's communication and client-handling skills?	
2. How appropriately was the client informed of: <ul style="list-style-type: none"> a. The merits (or not) of their case? b. All developments (including conclusion) 	
3. How appropriate was the Caseworker's communication with others – e.g. any third party or the other side?	

4. How timely was any communication / letters etc?	
5. How well does the Caseworker appear to have understood the client's problem?	
Corrective action:	
Comments:	

D. Information and fact-gathering	<i>Score</i>
1. How effective was the Caseworker in seeking relevant information from the client?	
2. How effective was the Caseworker in seeking relevant information from any other relevant parties?	
3. How effective was the Caseworker in seeking relevant information from others?	
Corrective action:	
Comments:	

E. Advice and assistance	Score
1. How good was the advice? Was it legally correct?	
2. How appropriate was the advice to the client's instructions?	
3. How comprehensive was the advice?	
4. Was the advice given in time / at the right time?	
4. How appropriate was the action taken?	
Corrective action:	
Comments:	

F. The work/ assistance	Score
1. Was it appropriate for this matter to proceed as telephone only advice?	
2. How effective was the work done in achieving the client's (reasonable) objectives?	
3. What was the impact of the Caseworker on the outcome achieved for the client?	
4. Was the client prejudiced in any way by the work done or not done?	
5. Was all work done that should reasonably have been done?	
6. Where necessary did the Caseworker consider / advise on / act on an effective referral?	
Corrective action:	
Comments:	

G. Efficiency	Score
1. How efficiently was the work carried out?	
2. Were any disbursements incurred appropriate?	
Corrective action:	
Comments:	