

Accredited SMART Assessors Standards of Practice

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Accredited SMART Assessors Standards of Practice

1. Overview

An accredited SMART assessor will have met specific standards through the accreditation process. Once the assessor has reached the accreditation standards, there are certain criteria which need to be fulfilled to ensure that the high caliber of SMART assessment is maintained.

The Accredited SMART Assessors Standards of Practice will be displayed on the following websites: www.rhn.org.uk (Royal Hospital for Neuro-disability) and www.gteconsultants.com (Gill-Thwaites & Elliott Consultants Ltd). This will ensure that the Lawyers, Case Manager, Care Commissioners, Lead Physicians, Families and anyone involved in the client's care will have a clear understanding of the expected quality and detail of the SMART assessment, report and treatment intervention. It is the accredited SMART assessor's responsibility to maintain their accreditation.

Failure to meet these standards on the part of the accredited SMART assessor could contravene the individual's professional code of conduct and result in the potential withdrawal of their accreditation as a SMART assessor.

It is recognised that the SMART assessment and SMART report are used for a range of purposes and settings with a wide spectrum of service resources. It is assumed that the accredited SMART assessor will use their clinical reasoning to clearly justify if there are situations which require specific additions to the SMART format, and for transparency, these should be clearly documented within the report. The SMART standards are to be adhered to in addition to the Health and Care Professions Council (HCPC) or profession-specific standards.

2. Accredited SMART Assessors

The accredited SMART assessor will:

- 2.1. Ensure that their SMART **accreditation is up to date** while using SMART as an assessment tool.
- 2.2. Guarantee that **contact information is up to date** on the SMART assessors' database so that they can be kept informed of any SMART developments.
- 2.3. Ensure that any **reports produced are current**, including all new SMART developments and standards.
- 2.4. **Apply their full SMART accreditation number to all SMART reports**, intervention plan and management strategy and other relevant documents. Where they are in the process of becoming accredited, this must be fully displayed on the report.
- 2.5. Not refer to any assessment or intervention plan and management strategy as SMART unless the **full SMART, following the standardised process, has been completed**.
- 2.6. Ensure that they have an **up-to-date knowledge of research** underpinning the assessment and intervention with an individual with a Prolonged Disorder of Consciousness.
- 2.7. Be **fully conversant** with the current **Royal College of Physicians National Clinical Guidelines for Prolonged Disorders of Consciousness**.

3. SMART Assessment Required Components

To ensure a complete SMART assessment is conducted, the accredited SMART assessor will:

- 3.1 Complete **INV 1 SMART SPEC per Session**
- 3.2. Conduct a full **SMART Behavioural Observation Assessment INV 2**
- 3.. Conduct a comprehensive **SMART Sensory Assessment INV 3** including all the appropriate techniques.
- 3.4. Interview all relevant family, team and carers, where possible, for full completion of the **SMART Informs INV 5**. Where a direct interview is not possible, the assessor should discuss

observation of responses by telephone. In rare circumstances, the assessor will provide the **SMART Informs INV 5** forms and review feedback. The inclusion of family/carers/team observations should be clearly indicated in the SMART report with a rationale provided for the method of data collection used.

3.5 Complete the Client Personal Preferences **Appendix 1 in the SMART report template.**

3.6. Conduct SMART Formal Observations of any significant responses reported by the family, team and/or carers. Where this is not possible, the accredited SMART assessor must identify the observation of these responses as a matter of priority in the SMART treatment programme or SMART recommendations within the SMART report, as applicable to the setting.

4. SMART Report

To ensure a comprehensive report, the accredited SMART assessor will produce a SMART report using the current SMART report template S12, with all sections and Appendices 1-6 completed in full:

The appendices are:

1. Client Personal Preferences
3. SMART SPEC Audit
4. SMART Behavioural Observation Summary
5. SMART FORMAL Assessment Summary
6. SMART INFORMS summary

Other optional, but **recommended item**:

- SMART Behavioural Observation Graphs.

5. SMART Intervention Plan and Management Strategy Review

The accredited SMART assessor will ensure timely and frequent reviews/monitoring programme with clear, measurable and patient-specific goals and clearly define future assessment/reviews required and define appropriate periods.

6. Failure to Comply with SMART Standards

The accredited SMART assessor will be expected to comply with these standards to maintain the high level of specialist practice required when using this assessment. Failure to do so will result in the following stages of action:

6.1. A revised version will be requested when any SMART report or interventions do not meet the standards.

6.2. The changes will need to be addressed within two months of receipt of the summary of changes required.

6.3. Any further reports/interventions, which have not met the standards, will result in the assessor's name being removed from the SMART website and a new portfolio will need to be submitted.

6.4. The assessor will no longer be authorised to use the SMART assessment if they are not accredited.