

Checklist High Quality Practitioners and Organisations

Introduction

This list of characteristics of High Quality Practitioners and Organisations is taken from the RPI Quality Framework, the complete version of which is available at https://www.restorativepracticesireland.ie/wp-content/uploads/2021/11/CDI-RPI-QA-Framework-web-2-1.pdf.

A list of potential barriers to achieving consistent quality, also taken from the Quality Framework, is included.

High-quality practitioners

Restorative practitioners who provide a consistently high-quality level of service are likely to do most or all of the following:

- undertake appropriate training from recognised providers;
- be aware of, understand and believe in restorative values and principles;
- use restorative approaches in their interactions with others, in the workplace and in everyday situations;
- commit to meeting standards that enshrine these values and principles;
- commit to codes of ethics and codes of practice, where relevant;
- display key values and standards in their place of work;
- build on their initial training by engaging in continuing professional development through a variety of formal and informal methods;
- actively learn from practice through self-reflection, de-briefing with colleagues and feedback from clients;
- be open to independent observation and feedback;
- keep adequate records of their use of restorative practice;
- use checklists to provide structure for reviewing their practice.

High-quality organisations

Organisations that provide restorative services of a consistently high quality or seek to embrace restorative principles in their operations are likely to do most or all of the following:

- select staff who have the potential to deliver a high-quality service, support staff to do so and work restoratively with staff who are not meeting standards;
- provide access to appropriate training for staff and encourage their participation;
- be aware of, understand and commit to restorative values and principles at all levels in the organisation, including senior management;
- use restorative approaches in their internal operations as well as with external clients;
- commit publicly to meeting standards that enshrine restorative values and principles;
- commit publicly to codes of ethics and codes of practice, where relevant;
- have a clear policy on the use of restorative practices and embed restorative practices in all their policies;
- display key values and standards in workplaces;
- facilitate and encourage staff to build on their initial training through continuing professional development and learning from practice;
- provide support and supervision for practitioners;
- carry out periodic independent evaluations and share findings;
- review their organisation from time to time as regards penetration of a restorative ethos:
- keep adequate records of their use of restorative practices and make appropriate information easily accessible by third parties.

Potential barriers

Potential barriers to achieving consistent quality in restorative practice include:

- inadequate access to training opportunities, especially as regards continuing professional development;
- inadequate supervision and support;
- insufficient provision for learning from practice;
- failure on the part of funders or senior management to understand and safeguard the
 essentials of restorative practice, such as adequate time for preparation prior to
 encounters and for dialogue within the restorative events;
- lack of visible active support for quality standards;
- lack of a coherent system of practice oversight;
- pressure to meet unrealistic output targets, such as numbers of cases processed;
- pressure to carry out restorative events within unrealistic timescales;
- pressure to use restorative approaches in unsuitable cases or situations;
- inadequate resourcing;
- failure to keep adequate records and unwillingness to share information.