



Llywodraeth Cynulliad Cymru
Welsh Assembly Government

DRAFT

Domiciliary Care

**NATIONAL MINIMUM STANDARDS FOR DOMICILIARY CARE
AGENCIES IN WALES**

CARE STANDARDS ACT 2000

Domiciliary Care

A statement of National Minimum Standards applicable to domiciliary care agencies made by the National Assembly for Wales under the powers conferred by section 23(1) of the Care Standards Act 2000.

This statement is applicable to domiciliary care agencies as defined by the Domiciliary Care Agencies (Wales) Regulations 2004 and will be operational from 1 March 2004.

This statement is accompanied for explanatory purposes only by an introduction.

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Introduction

The Glossary of Terms (Appendix A) in the National Minimum Standards also applies to this Introduction.

This document sets out the National Minimum Standards for domiciliary care agencies. They form the criteria by which the Care Standards Inspectorate in Wales (“CSIW”) will determine whether the agency provides personal care to the required standard. The purpose of these minimum standards is to ensure the quality of personal care and support which people receive whilst living in their own home in the community.

These standards establish the minimum required; i.e. they state a standard of service provision below which an agency providing personal care for people living in their own home must not fall.

Whilst broad in scope, these Standards acknowledge the unique and complex needs of individuals and the additional specific knowledge and skills required in order to deliver a service that is tailored to the needs of each person. These Standards will be applied to agencies providing personal care to the wide range of people who need care and support whilst living in their own home, including:-

- older people
- people with physical disabilities
- people with sensory loss including dual sensory impairment
- people with mental health problems
- people with learning disabilities
- children and their families
- personal or family carers

Care workers may be directly providing the care themselves but they are more likely to be providing the care jointly with the person needing assistance, encouraging them to do as much as possible for themselves in order to maintain their independence and physical ability. Care workers will be providing support and assistance to people with a range of disabilities, helping them to maximise their own potential and independence. It is important that agencies and care workers who are providing domiciliary care for children and their families take note of the content of *Working Together to Safeguard Children* – a guide to inter-agency working to safeguard and promote the welfare of children (National Assembly for Wales, 2000).

With the emphasis on caring for people with complex health and personal care needs living in their own home instead of in residential or nursing homes or long stay hospitals, the provision of domiciliary care services is evolving rapidly and reflects changes at the interface between health and social care.

Who will be regulated?

“Domiciliary care agency” is defined in section 4(3) of the Care Standards Act 2000 (CSA). It means an undertaking (including the exercise of functions of a public authority, such as a local authority or NHS Trust) which consists of or includes arranging the provision of personal care in their own homes for persons who by reason of illness, infirmity or disability are unable to provide it for themselves without assistance. The provision of care within supported housing or living schemes may also fall within the definition, unless the scheme is registered as a care home under the CSA.

The Domiciliary Care Agencies (Wales) Regulations 2004 exclude some undertakings from this general description. The first exception is an undertaking carried on solely by an individual who does not employ anyone else for the purposes of the undertaking and who is not him or herself employed by an agency to carry on the undertaking and cares for fewer than 4 people. The purpose of this exception is to remove very small scale arrangements for the provision of personal care to persons in their own homes from the obligation to register under the CSA.

The Regulations also exclude from certain Regulations domiciliary care agencies that are ‘employment agencies’ which solely act as introducers of workers employed by a user. Therefore, the following standards will NOT apply to those agencies:

Standards 4, 5, 6.2 only, 6.3 only, 7.3 only, 10.5 only, 10.9 only, 10.10 only, 11, 12, 13, 14, 15, 16, 18, 19, 20, 21, 24.3 only, 24.4 only, Appendix B bullet point 6, 11 and 13 only, and all of Appendix E.

Persons carrying on or managing a domiciliary care agency will need to register with the CSIW because not being registered constitutes an offence under section 11 of the CSA. If separate persons are responsible for, on the one hand, carrying on (providing) an agency and, on the other, managing it, then both are required to be registered in respect of the agency. The Regulations apply to persons who are registered in respect of an agency and, amongst other things, require the registered persons to be ‘fit’ to perform their duties.

Where an agency operates from more than one branch each branch is treated as a separate agency for the purposes of the CSA. This means each person carrying on or managing a branch will have to register and each branch will be inspected.

Definition of Personal Care

An essential element of the meaning of domiciliary care agency is the provision of personal care. The CSA does not include a definition of "personal care" (except that regulations may be made excluding prescribed activities from personal care). It is the Assembly’s view that its meaning includes:

- (a) assistance with bodily functions such as feeding, bathing, walking, and toileting
- (b) care which falls just short of assistance with bodily functions, but still involving physical and intimate touching

In relation to personal care, the requirement under the CSA for registration as a care home is only triggered where personal care is provided and, in addition, where the most intensive kind of personal care (a) is available, when such assistance is required.

The two intensive kinds of personal care mentioned in (a) and (b) will be likely to trigger the requirement under the Care Standards Act for registration in respect of a domiciliary care agency, although other kinds of personal care and support may also be provided by such an agency.

However, non-physical care may also fall within the meaning of 'personal care' and trigger the requirement for registration in respect of a domiciliary care agency in certain circumstances. Case law under the Registered Homes Act 1984 provides a guide to the circumstances in which, under the CSA, non-physical care may amount to 'personal care' (although it should be recognised that this is not binding case law for the purposes of the CSA). In *Harrison v Cornwall County Council* it was held that personal care 'embraces' care in many forms 'emotional or psychiatric as well as physical'. In *R v Allerdale Housing Benefit Review Board* it was held by the High Court that the term 'personal care' in the 1984 Act, whilst embracing other forms of care, did not extend to 'general counselling and support services'.

Whilst the question whether non-physical care amounts to 'personal care' in individual cases will be one of fact and degree, the following points should be considered. In applying the provisions of the Care Standards Act regard should also be had to the principal purpose of this part of the legislation, namely to improve the protection afforded to vulnerable people receiving care in their own homes. The points are:

- (i) Whether the care that is provided is directed towards needs of a personal nature. Where that is the case it is more likely to be the case that 'personal care' is being provided;
- (ii) The closeness of the caring relationship between the person cared for and the person providing care.

By way of example it is likely that 'personal care' is being provided where there is a package of care, that entails checking, prompting and/or ongoing supervision delivered either by somebody calling regularly - or on a 24 hour, 7 day a week basis - to the home of an individual suffering with dementia or having learning disabilities to: check the individual knows night/day time; to ensure that they get out of bed, are eating, keeping warm, taking medication; to assist in the management of continence and to ensure the person does not become disorientated/ inappropriately wander.

The following activities are likely to constitute general counselling and support and therefore likely to fall outside the definition of personal care:

- assistance with maintaining security of a dwelling;
- assistance with maintaining the safety of a dwelling (for example arranging servicing of appliances; advice on using appliances);
- helping a person comply with the terms of an agreement under which premises are occupied (for example help with budgeting and benefits); certain resettlement activities necessary to enable a person to move on to more independent accommodation;
- and general ‘good neighbour’ tasks such as running errands.

Another consideration that guides thinking as to whether it is likely that personal care is being provided is the existence of a service delivery plan.

If the requirement to register in respect of a domiciliary care agency is to be triggered the next limb of the definition of ‘domiciliary care agency’ will need to be satisfied. That is that the personal care must be provided to a person who by reason of illness, infirmity or disability (which includes persons with a mental disorder) is unable to provide that care for themselves without assistance. Therefore if the care is provided to a person merely by reason of their dependency on alcohol or drugs (which is not such as to amount to an illness, infirmity or disability) liability to register does not arise. This differs from the ‘definition’ of care home in that that includes amongst the types of care that are relevant for registration purposes the provision of care to persons who are or have been dependent on alcohol or drugs.

Certain types of non-physical care cannot be described as care of a type that a person is unable to provide for themselves without assistance. The nature of the type of personal care that is relevant for the purposes of domiciliary care registration must be something (i.e. some form of action or activity within the meaning of personal care) which the domiciliary care worker assists the service user to do or perform. This will include checking to see if the service user has done some particular activity and then either prompting the service user to do it, assisting the service user to do it or doing it for the service user. Emotional support is not something which the service user could be assisted to provide for himself. Thus, an agency exclusively providing encouragement and emotional support would not be liable to registration

The Regulatory Context

The Standards will be taken into account:

- (a) by the CSIW when making decisions under the CSA and, in particular, when determining whether agencies are making adequate arrangements for the provision of personal care, meeting the needs of service users and otherwise being conducted in accordance with the requirements of, and under, the CSA (“the regulatory requirements”)

- (b) by a justice of the peace when considering proceedings for the making of an order under section 20 of the CSA (for example, cancelling the registration of a person who is the registered provider of a domiciliary care agency)
- (c) on an appeal against such a decision or order; and
- (d) in criminal proceedings for offences under the **Domiciliary Care Agencies (Wales) Regulations 2004 (“the Regulations”)**.

An example of the relationship between the Regulations and the Standards is as follows. Regulation 14(4)(c) says “The registered person shall, for the purpose of providing personal care to service users, so far as is practicable...encourage and enable them to make decisions with respect to such personal care.” When considering whether or not this requirement is met CSIW will take into account Standard 9.3 which says “Care workers carry out tasks *with* the service user, not *for* them, minimising the intervention and supporting service users to take risks, as set out in the service delivery plan and not endangering health and safety.”

For explanatory purposes only, the Standards identify the regulation or regulations to which they particularly relate.

Structure

The Standards are grouped under five key topics and the outcome for service users is identified in relation to each theme.

The topics are:-

- User focussed services (Standards 1-5)
- Personal care (Standards 6 – 10)
- Protection (Standards 11 – 16)
- Managers and staff (Standards 17 – 21)
- Organisation and running of the business (Standards 22 – 27).

The Standards, which have been designed to achieve the outcomes, are qualitative – they provide a tool for judging the quality of care and support provided for service users. They are also measurable. Regulators will look for evidence that the Standards are being achieved and a good quality of life enjoyed by service users through:-

- discussions with service users and their carers, families and friends, care staff, managers, and others
- observation of daily life in the home of the person receiving care and in the office of the agency providing the service

- scrutiny of written policies, procedures, and records.

The involvement of lay assessors in inspections will help ensure a focus on outcomes for, and quality of life of, service users.

The following cross-cutting themes underpin the drafting of the National Minimum Standards for the provision of domiciliary care services:-

- **Focus on service users.** ‘Building for the Future’ (National Assembly for Wales,1999) called for Standards that focus on the key areas that most affect the quality of life experienced by service users. The process for developing the Standards, and recent research, confirm the importance of this emphasis on results for service users. In applying the Standards, inspectors will look for evidence that the personal care is provided in such a way that it achieves positive outcomes for, and the active participation of, service users.
- **Fitness for purpose.** The regulatory powers provided by the CSA are designed to ensure that agencies providing personal domiciliary care and the managers and care staff it employs are “fit for their purpose”. In applying the Standards, inspectors will look for evidence that the agency is successful in achieving its stated aims and objectives.
- **Comprehensiveness.** The provision of domiciliary care to any one service user is made up of a range of separate but often related activities and services which will vary from person to person according to their needs. In applying the Standards, inspectors will consider how the total care package provided contributes to the overall personal and health care needs and preferences of service users, and how the agency collaborates with other services / professionals to maximise independence and ensure the individual’s inclusion in the community.
- **Meeting assessed needs.** In applying the Standards, inspectors will look for evidence that the care provided meets the assessed needs of service users, and that individuals’ changing needs continue to be met. There should be a reassessment of need on an annual basis or more frequently if necessary. Inspectors will also wish to see evidence that staff are able to be flexible to meet the changing needs and requirements of service users on a short term or temporary basis.
- **Quality services.** The Assembly’s modernising agenda, including the new regulatory framework, aims to ensure “greater assurance of quality services...rather than having to live with second best”. In applying the Standards, inspectors will seek evidence of a commitment to continuous improvement, quality services and support, which assure a good quality of life and health for service users and which contributes to them maintaining their independence.
- **Quality workforce.** Competent, well-trained managers and staff are fundamental to achieving good quality care for service users. The Care

Council for Wales is developing a Qualification Framework for care workers, including induction competencies and foundation programmes. In applying the Standards, inspectors will look for evidence that registered managers and staff achieve the National Training Organisation requirements.

Context and Purpose

These Standards, and the regulatory framework within which they operate, should be viewed in the context of the Assembly's overall policy objectives for supporting people in their own home. These objectives emphasise the need to maintain and promote independence wherever possible, through rehabilitation and community support. A variety of specialist provision will be required to help achieve these objectives. The provision of high quality personal care to people living in their own homes will be the foundation of much of the specialist provision.

These Standards have been prepared in response to extensive consultation and are realistic, proportionate, fair and transparent. They aim to ensure the protection of service users and safeguard and promote the health, welfare and quality of life of people living in their own home.

The Introduction does not form part of the National Minimum Standards.

NATIONAL MINIMUM STANDARDS FOR DOMICILIARY CARE AGENCIES IN WALES

This document sets out National Minimum Standards applicable to domiciliary care agencies (“agencies”) in Wales. It is issued by the National Assembly for Wales under section 23 of the Care Standards Act 2000 (“CSA”). The Standards will be kept under review by the National Assembly and amended if it thinks appropriate.

This statement is published on [date]

USER FOCUSED SERVICES

Introduction to Standards 1 – 5

The needs of the service user lie at the heart of the provision of personal care. Service users need to be kept informed and enabled to make choices concerning their care, and participate in the process, thereby maintaining their independence. The service should be managed and provided at all times in a way which meets the individual needs of the person receiving care, as specified in their care plan and service delivery plan, and respects the rights, privacy and dignity of the individual.

Where the provision of personal domiciliary care is commissioned by the local authority, a three way working relationship should be developed with the local authority and the agency providing personal care working in partnership to most effectively meet the needs of the person requiring care.

In order to ensure that service users and/or their carers, relatives or representatives are able to make informed choices concerning their care, they should be provided with a range of information that is up to date and is available in an appropriate language or format. A number of documents are required. Each has its own particular purpose.

Each agency providing domiciliary care should produce a guide for service users with a statement of purpose, setting out its aims and objectives, the range of services it offers and outlines the terms and conditions on which it does so. In this way services users, their relatives or representatives can make a fully informed choice about whether or not the agency is suitable and able to meet the individual's particular needs. A copy of the most recent inspection report should also be made available. The statement of purpose will enable inspectors to assess how far the agency's claims are being fulfilled.

INFORMATION

OUTCOME:

Current and potential service users and their relatives or representatives are provided with and have access to comprehensive information, so that they can make informed decisions on whether the agency is able to meet their specific care needs.

STANDARD 1 (See regulation 4 (statement of purpose) and 5 (service user's guide))

- 1.1 There is a service user's guide for current and prospective service users, their carers and their relatives. The guide contains up to date information on the agency setting out the aims, objectives, philosophy of care and parameters of the service provided, including terms and conditions. Also, the certificate of registration is prominently displayed**

at all times in the agency premises so as to be easily seen in accordance with the Section 28(1) of the Care Standards Act.

- 1.2 The service user's guide is written in plain language. It should be in a format appropriate for the service user (e.g. where appropriate large print, braille). The guide should also be in the preferred language of the service user. The service user's guide includes or describes:-
- the address and contact number for the principal office of the agency and the local branch (if more than one office)
 - the geographical area covered
 - range and level of care services provided, including specialist services
 - people for whom the service is provided
 - relevant qualifications and experience of the registered persons and staff
 - an overview of the process for the delivery of care and support from initial referral, through needs and risk assessment and development of the service delivery plan to review the care and reassessment of need
 - key terms and conditions
 - the representation and complaints procedure
 - the quality assurance process
 - specific information on key policies and procedures
 - how to contact the local office of the CSIW, social services and NHS bodies
 - hours of operation
 - details of insurance cover
- 1.3 The service user's guide provides information on where to obtain further information including:
- a copy of the most recent inspection report
 - detailed information on policies and procedures
 - the outcome of the annual Quality Assurance (QA) process (see Standard 27.5)
 - the outcome of surveys of the views of service users, their carers and their families of the agency and the service it provides.

- 1.4 The service user's guide and other information is dated, reviewed at least annually and updated as necessary.

A NEEDS ASSESSMENT

OUTCOME:

The service delivery requirements of service users are individually assessed before they are offered a domiciliary care service

STANDARD 2 (See regulation 14 (arrangements for the provision of personal care))

- 2.1 **A needs assessment regarding new service users is undertaken, prior to the provision of a domiciliary care service (or within 2 working days in exceptional circumstances), by people who are trained to do so, using appropriate methods of communication so that the service users, their carers and their representatives, are fully involved. Reasonable steps are taken to acquire adequate information to inform the process.**
- 2.2 Where a relevant assessment has been undertaken by a local authority or NHS body, it is, with the service user's consent, obtained.
- 2.3 For individuals who are self-funding a needs assessment is undertaken (appropriate to the level of support requested) in the individual's own home, by a person competent and trained for the task, covering the delivery of the services agreed. Issues that may arise include:
- personal care and physical well-being
 - family involvement and other personal and social contacts
 - sight, hearing and communication
 - continence
 - mobility, dexterity and the need for disability equipment
 - mental health and cognition
 - medication requirements
 - personal safety and risk
 - specific condition-related needs and specialist input
 - dietary requirements and preferences (if appropriate)
 - social interests, religious and cultural needs (if appropriate)
 - preferred method of communication
 - method of payment.

- 2.4 Information from the needs assessment is provided in writing to care workers so that they are aware of any special needs, the activities they are required to undertake and the outcomes to be achieved.
- 2.5 When a service is provided at short notice or in a crisis, and a needs assessment has not been undertaken, the person providing the service is trained and able to undertake an initial contact assessment if required.
- 2.6 Procedures are in place to enable care workers to report changes to the care needs and circumstances of service users so that a service reassessment can be undertaken if necessary.

MEETING NEEDS

OUTCOME:

The agency has the skills and competence required to meet the care needs of the service user.

STANDARD 3 (See regulations 13 (conduct of agency), 14 (arrangements for the provision of personal care), 15 (fitness of workers) and 16 (staffing))

- 3.1 **The agency is able to demonstrate its capacity to meet the needs (including specialist needs) of individuals accepted by the agency.**
- 3.2 Staff individually and collectively have the skills and experience to deliver the services and care which the agency states in its Statement of Purpose and service user's guide (see Standard 1.2) that it can provide. The skills and experience of care staff are matched to the care needs of each service user and they are able to communicate effectively with the service user using the individual's preferred method of communication.
- 3.3 All specialised services offered (and identified in the Statement of Purpose and service user's guide) are demonstrably based on current good practice and reflect relevant specialist and clinical guidance. This includes specialist services for people with dementia, mental health problems, sensory impairment, physical disabilities, learning disabilities, substance misuse, intermediate or respite care.
- 3.4 When services are provided for specific minority ethnic communities, social/cultural or religious groups their particular requirements and preferences are identified, understood and entered into the service delivery plan. (see Standard 7).

SERVICE DELIVERY PLAN

OUTCOME:

The care needs, wishes, preferences and outcomes for each individual service user are incorporated in their service delivery plan.

STANDARD 4 (See regulation 14 (arrangements for the provision of personal care))

- 4.1 **A service delivery plan for the provision of the care is developed and agreed with each service user, which provides the basis for the care to be delivered.**
- 4.2 The plan sets out in detail the action that will be taken by care workers to meet the assessed needs, including specialist needs and communication requirements, and identifies areas of flexibility to enable the service user to maximise their potential and maintain their independence. (see Standards 6 & 9)
- 4.3 The plan is drawn up with the involvement of the service user and their carer, whenever possible, or their representative on their behalf, their relatives and friends and any other professional as appropriate and takes into account the service user's wishes and preferences in relation to the way in which the care is provided and their own chosen lifestyle.
- 4.4 The plan establishes individualised procedures for service users in relation to the taking of risks in daily living and for those service users who are likely to be aggressive, abusive or cause harm or self-harm, focussing on positive behaviour. (See Standards 9.8,12 and 14.6)
- 4.5 The information and detail provided in the plan is appropriate for the complexity of the service to be provided.
- 4.6 The plan is reviewed as changes in circumstances require but at least annually with the service user, their carer, their relatives, friends and significant professionals or at the request of the service user, their carer or their representative or if there has been a change in their care needs and/or circumstances of the service user or their carer. The plan is updated, agreed changes are recorded and actioned.
- 4.7 The plan is signed by the service user or representative on their behalf and is available in a language and format that the service user can understand. The plan is held by the service user unless there are clear and recorded reasons not to do so.

TERMS AND CONDITIONS

OUTCOME:

Each service user has information as to the terms and conditions for the provision of care from the agency.

STANDARD 5 (See regulation 18 (provision of information to service users))

- 5.1 Each service user is issued with a statement of terms and conditions under which the care is provided by the agency before the service begins.**
- 5.2 The statement of terms and conditions specifies, unless in the service user's guide or care plan, the:
- name, address and telephone number of agency
 - contact number for out of hours and details of how to access the service
 - contact number for the office of regular care workers and their manager
 - areas of activity care workers will and will not undertake and the degree of flexibility in the provision of personal care including the expectations of service users
 - circumstances in which the service may be cancelled or withdrawn including temporary cancellation by the service user
 - fees payable for the service, and by whom (if self-funding)
 - rights and responsibilities of both parties (including insurance) and liability if there is a breach of terms and conditions or any damage occurring in the home
 - arrangements for monitoring and review of needs and for updating the needs assessment (see Standard 2) and the individual service delivery plan (see Standard 7)
 - process for assuring the quality of the service, monitoring and supervision of staff
 - supplies and/or equipment to be made available by the service user and by the agency
 - respective responsibilities of the service user and of the agency in relation to health and safety matters
 - arrangements to cover holidays, sickness

- keyholding and other arrangements agreed for entering or leaving the home (see Standard 15).
- 5.3 The service user and/or their relatives or representatives and the agency each has a copy of the statement of terms and conditions, in accessible formats, which is signed by the service user (or named representative on their behalf) and the registered manager.

PERSONAL CARE

Introduction to Standards 6- 10

The principles on which the philosophy of care of the provider agency is based must be ones which ensure that all service users, their relatives and representatives are treated with respect, the service user's dignity is preserved at all times and their right to privacy is always observed. The test of whether these principles are put into practice or not will be a matter for each person's own judgement: care workers should put themselves in the place of people receiving care and ask themselves:-

- how am I treated by care workers when they are bathing me and helping me dress?
- how do they speak to me?
- am I consulted in matters to do with my own care and am I able to make choices?
- are my wishes respected?
- are my views taken into account?

Fundamentally care workers should 'treat others as you would wish to be treated yourself'.

Providing a service based on the needs of the service user also means ensuring that care workers have the flexibility to vary the care provided to meet changing needs on a day to day basis. For example, if the need is to assist the service user to get up, washed and dressed and give them breakfast, the care worker must be able to respond flexibly and appropriately if on one occasion the service user feels unwell and wants to remain in bed.

Research into the views of service users about their personal care has identified that the continuity of care worker is extremely important. Service users and their carers or relatives need to feel comfortable, relaxed and secure with the care workers they are inviting into their home. They want to have care workers they can get to know and who are reliable, dependable and arrive and depart at the time expected. Service users and their carers or relatives also want to know in advance if there is to be any change in their care worker so they can be prepared.

The purpose of the provision of personal care to people who are living in their own home is to sustain and whenever possible improve their independence. As well as ensuring their involvement in all decisions relating to their care this also means involving them and supporting them to assist in the care activities themselves rather than increasing dependence by taking over and doing everything for them.

The provision of personal care for people who live in their own homes is changing. The interface between health and personal care is becoming very blurred. Meeting the Assembly's agenda on intermediate care, maintaining independence and partnership working will further emphasise the important interface between health care professionals and personal social care. As the health and care needs of people living in their own home become more complex, so care workers come under pressure to undertake increasingly complex health related activities. This should never happen 'by default' but only with the written agreement of all parties and when the care worker has received the appropriate and necessary training. Clarity in the roles, if any, in relation to medication and other health related activities is therefore essential.

CONFIDENTIALITY

OUTCOME:

The personal information of service users and their relatives or representatives is handled appropriately and personal confidences are respected.

STANDARD 6 (See regulation 20 (records) and Standard 16 (Records kept in the service user's home))

- 6.1 **Staff respect information about service users or their representatives that is confidential and handle such information in accordance with the Data Protection Act 1998 and the agency's written policies and procedures are in the best interests of the service user.**
- 6.2 Service users have summaries of the agency's policies and procedures on confidentiality which specifies the circumstances under which confidentiality may be breached and includes the process for dealing with inappropriate breaches of confidentiality.
- 6.3 Care workers know when information given to them in confidence must be shared with their manager and other social/health care agencies and act in accordance with policies and procedures. (See Standard 25)
- 6.4 The principles of confidentiality are observed in discussion with colleagues and line managers, particularly when undertaking training or group supervision sessions.
- 6.5 Suitable provision is made for the safe and confidential storage of service user records and information including the provision of lockable filing cabinets and the shielding of computer screens from general view when displaying personal data.

RESPONSIVE SERVICES

OUTCOME:

Service users receive a flexible, consistent and reliable personal care service.

STANDARD 7 (See regulations 14 (arrangements for the provision of personal care) and 16 (staffing))

- 7.1 **The agency is reliable and dependable and is able to respond flexibly to the needs and preferences of service users which arise on a day to day basis, and services are provided in a way that meets the outcomes identified from the needs assessment.**
- 7.2 Staff arrive at the service user's home within the time band specified and perform the tasks specified in the service delivery plan.
- 7.3 The agency ensures that there is continuity in relation to the care worker(s) who provide the service to each service user.
- 7.4 Care workers are only changed for legitimate reasons for example:
- the care worker is sick, on holiday, undertaking training or has left the agency
 - if the service requirements change and the care worker does not have the necessary skills, physical capacity or specialist training
 - the care worker is unavailable for additional hours or changed times
 - if the service user requests a change of care worker for legitimate reasons
 - if a non-professional relationship has developed between the service user and the care worker
 - a personality clash between the service user and the care worker
 - to provide relief for care staff working in stressful situations
 - to protect care workers from abuse or discrimination.
- 7.5 Service users and their relatives or representatives are consulted in advance whenever possible and involved in the decision about the change of care worker. New care workers are introduced to the service user by a representative of the agency.
- 7.6 Service users and their relatives and/or representatives are kept fully informed on issues relating to the service user's care.

PRIVACY AND DIGNITY

OUTCOME:

Service users feel that they are treated with respect and dignity, are valued as people and their right to privacy is upheld.

STANDARD 8 (See regulations 14 (arrangements for the provision of personal care) and 16 (staffing) and Standard 9 (Autonomy and Independence))

- 8.1 **Personal care is provided in a way which maintains and respects the privacy, dignity and lifestyle of the person receiving care at all times with particular regard to assisting with:**
- **dressing and undressing**
 - **bathing, washing, shaving, oral hygiene**
 - **toilet and continence requirements**
 - **medication requirements and other health related activities**
 - **moving, handling and positioning**
 - **eating and meals**
 - **handling personal possessions and documents**
 - **entering the home, room, bathroom or toilet.**
- 8.2 Personal care is provided in the least intrusive way.
- 8.3 Service users, their carers, relatives and representatives are treated with courtesy at all times.
- 8.4 Service users are addressed by the name they prefer.
- 8.5 Care workers are sensitive and responsive to the race, culture, language, religion, age, disability, gender and sexuality of the people receiving care, their relatives and representatives.

AUTONOMY AND INDEPENDENCE

OUTCOME:

Service users are assisted to make their own decisions and control their own lives and are supported in maximising their independence in accordance with their service delivery plan.

STANDARD 9 (See regulations 14 (arrangements for the provision of personal care) and 16 (staffing))

- 9.1 **Managers and care workers enable service users to make decisions in relation to their own lives, providing information, assistance, and support where needed in accordance with their service delivery plan.**
- 9.2 Service users are encouraged, enabled and empowered to control their day to day personal finances unless prevented from doing so by severe mental incapacity or disability. (see Standard 13.5)
- 9.3 Care workers carry out tasks *with* the service user, not *for* them, minimising the intervention and supporting service users to take risks, as set out in the service delivery plan and not endangering health and safety. (see Standards 7 & 12)
- 9.4 When caring for children, opportunity is taken to enable them to participate in the activity and to develop through learning and playing, and to protect them from abuse or harm.
- 9.5 Service users and their relatives and representatives are kept fully informed about the service they receive and are provided with information in an appropriate format.
- 9.6 Agencies work to provide service users with a service in their preferred language or form of communication
- 9.7 Service users or their relatives or representatives (with permission of the service user) are able to see the service user's personal files kept in the premises of the agency in accordance with the Data Protection Act 1998 and are informed in writing that these files may be reviewed as part of the inspection and process. (see Standard 24)
- 9.8 Limitations on a service user's chosen lifestyle or human rights to prevent self-harm or self-neglect, or abuse or harm to others, are made only in the service user's best interest, consistent with the agency's responsibilities in law. The limitations are recorded in full within the risk assessment and the plan for managing the risks (see Standard 12) and entered into the service delivery plan (Standard 4). Service users and their relatives or representatives are informed about independent advocacy services.

MEDICATION AND HEALTH RELATED ACTIVITIES

OUTCOME:

The agency's policies and procedures on medication and health related activities protect service users and assist them to maintain responsibility for their own medication and to remain in their own home.

STANDARD 10 (See regulation 14 (arrangements for the provision of personal care))

- 10.1 **There is a clear, written policy and procedure which is adhered to by staff and which identifies parameters and circumstances for assisting with medication and health related tasks and identifies the limits to assistance and tasks which may not be undertaken without specialist training.**
- 10.2 The policy includes procedures for the storage, ordering, administration and disposal of medication - including the procedures for obtaining prescriptions and dispensed medicines, the purchase and use of over the counter medication, and for recording information.
- 10.3 Staff only provide assistance with taking medication, administering medication or undertake other health related tasks, when they have received the appropriate training and are assessed as competent. In addition such assistance must be:
- with the informed consent of the service user or their carer, relative or representative who may give consent on the user's behalf
 - requested on the service delivery plan by a named assessor (except for over the counter medication)
 - with agreement of the care workers' line manager, and not contrary to the agency's policy.
- 10.4 Assistance with medication and other health related activities is identified in the care plan (except for over the counter medication) (Standard 2) and forms part of the risk assessment (Standard 12).
- 10.5 The policy and procedures for medication and health related activities are developed and agreed on a multi-agency, multi-disciplinary basis, taking into account all the clinical risks that could impact on the safety of the service user, the agency and health provider's accountability and responsibilities. In addition this process should include a suitably qualified pharmacist in relation to medication.
- 10.6 Medication should at all times be stored in a safe, secure place but accessible to the service user if appropriate. If not appropriate, then their carer, relatives, other personal carers, health professionals and domiciliary care staff should be made aware of storage and access arrangements.

- 10.7 Care workers follow the agency's procedures for reporting concerns, responding to incidents and seeking guidance in relation to both medication and health related activities. All action taken should be documented and, where appropriate, reported to the relevant health professional(s).
- 10.8 All information relating to assistance with medication or health related activities is documented in the appropriate records in the patient's home or agency file. This must include details relating to dosage, time and any assistance given. Any advice given to the patient or relatives to see or call a health care professional is recorded. The record is signed and dated by both the service user (where possible) and the care worker.
- 10.9 Where packages of care may be provided on a multi-agency basis, policies and procedures on medication and health related activities are agreed and followed. The key worker, usually a health care professional from one agency who visits on a regular basis, takes the responsibility for leading on medication and health related activities in the delivery of a package of care to individual service users.
- 10.10 The functions undertaken by staff under the agency's policies and procedures for medication and health related activities are covered by the employers insurance policy.

PROTECTION

Introduction to Standards 11 – 15

Health and Safety

The health and safety of service users and care workers is a major issue of concern in the provision of domiciliary care. Despite the requirements of legislation, accidents occur all too frequently. Failure to observe health and safety requirements is a major cause of long term illness among staff. Training on all aspects of health and safety is essential to ensure that staff are able to respond appropriately and work in a safe manner.

Before commencing the provision of care in a new home, to comply with the requirements of legislation a detailed risk assessment must be made by the agency providing the service of the risks associated with the delivery of the service. This assessment must be undertaken by someone who is trained for the purpose. This may be the manager or it may be an experienced care worker. The risk assessment must be comprehensive and include, where appropriate, the risks associated with assisting with medication as well as any risks associated with travelling to and from the home of the service user, particularly late at night.

A separate assessment must be undertaken of the risks associated with moving, handling and positioning. It is important that care strategies are devised in relation to assisting people with disabilities to move, which are acceptable to the person concerned and are also safe for the care workers involved. Guidance on manual handling from the Health and Safety Executive has been revised and updated in 2002.

The service user should also retain responsibilities in relation to the health and safety of the environment in which they live and not place people visiting the home at risk. All the risks identified must therefore be discussed in full with the service user, their carers, relatives or representative, the care worker and their line manager, and a CSIW Inspector if necessary. A plan to manage the identified risks must be compiled and agreed by all parties. The plan should include review and reassessment of the risks.

Protection of the person from abuse or exploitation

The general public is aware of the effects of child abuse; far less publicity is given to adult and elder abuse and many people, even those employed in providing care to adults are still relatively unaware of the existence of abuse and its effects. Care workers need to be aware that abuse does not have to be extreme or obvious. It can be unintentional, insidious and the cumulative result of on-going bad practice. No agency that is concerned with maintaining standards in the provision of professional care services can afford to ignore any form of abuse which affects the well being of the people for whom they are responsible.

Agencies play an important role in the lives of people for whom they arrange personal care. It is the care workers who have a key role in recognising and

protecting people from abuse. They have a responsibility to the people for whom they provide the care service to minimise both the likelihood of abusive situations occurring and the effects that abuse can have, and to contribute to monitoring anyone who may be considered to be 'at risk.'

It is essential that care is taken in all financial transactions undertaken on behalf of the service user and a full written record kept to safeguard both the service user and the care worker and to ensure no misunderstandings occur. For similar reasons managers and care workers must never seek to profit from the care they provide to service users by the acceptance of gifts or bequests.

The safety of service users is very important and for this reason care must be taken when entering or leaving the premises of people receiving care. This includes the need to carry and show proper identification at all times.

SAFE WORKING PRACTICES

OUTCOME:

The health, safety and welfare of service users and care workers is promoted and protected.

STANDARD 11 (See regulations 13 (conduct of agency) and 14 (arrangements for the provision of personal care))

11.1 The agency has systems and procedures in place to comply with the requirements of the Health and Safety legislation including (where appropriate):-

- **Management of Health and Safety at Work Regulations 1999 (Management Regulations)**
- **Manual Handling Operations Regulations 1992**
- **Control of Substances Hazardous to Health Regulations**
- **Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR)**
- **Lifting Operations and Lifting Equipment Regulations 1998**
- **Provision and Use of Work Equipment Regulations 1998**
- **Personal Protective Equipment at Work (1992)**
- **Health and Safety at Work etc Act 1974**
- **Food Safety Act 1990**
- **Working Time Regulations 1998**

11.2 The agency has a comprehensive health and safety policy, and written procedures for health and safety management defining:-

- individual and organisational responsibilities for health & safety matters
- responsibilities and arrangements for risk assessment under the requirements of the Management of Health and Safety at Work Regulations 1999
- arrangements to implement safe systems of work to safeguard the welfare of service users, staff and others involved in the provision of domiciliary care, taking into account the findings of the risk assessments
- procedures to be followed when safe systems of work identified as necessary to safeguard the service user, staff and others involved in the provision of domiciliary care, cannot be implemented
- responsibility and procedure for reporting and investigating accidents and dangerous occurrences including those specified under RIDDOR for both service user and staff
- reporting procedure to follow when either a service user or a member of staff has a known transmittable disease or infection
- the provision and wearing of protective clothing
- procedures for managing threats, violence or aggression to staff
- content of training on health and safety to be given to care workers (see Standard 19)
- lone working. The risk of lone working must be assessed and agencies should develop and implement policies which protect both the service user and lone worker
- measures to protect staff travelling to and from the homes of service users including advice on:-
 - not carrying large sums of money or medicines late at night
 - working in pairs
 - use of beepers/pagers
 - use of mobile telephones
 - car insurance for business use.

11.3 One or more competent persons are appointed to assist the agency in complying with their health and safety duties and responsibilities including:

- identifying hazards and assessing risks
 - preparing health and safety policy statements
 - introducing risk control measures
 - providing adequate training and refresher training
- 11.4 All organisational records relating to health and safety matters are accurate and kept up to date. (see Standard 24)

RISK ASSESSMENT

OUTCOME:

The risk of accidents and harm happening to service users and staff in the provision of the personal care is minimised.

STANDARD 12 (See regulation 13 (conduct of agency))

- 12.1 **An assessment is undertaken, by an appropriately trained and qualified person, of the potential risks to service users and staff associated with delivering the service user's package of care (including, where appropriate, the risks associated with assisting with medication and other health related activities) before the care worker commences work and is updated annually or more frequently if necessary.**
- 12.2 The risk assessment includes an assessment of the risks for service users in maintaining their independence and daily living within the home. (See Standard 7)
- 12.3 The risk assessment is appropriate to the needs of the individual service user and the views of the service user, their carer and their relatives are taken into account.
- 12.4 A separate moving, handling and positioning risk assessment is undertaken by a member of staff who is trained for the purpose, whenever staff are required to help a user with any manual handling task, as required under the Manual Handling Operations Regulations 1992.
- 12.5 A comprehensive plan to manage the risks to workers, including manual handling, moving, and positioning and the risks to service users, is drawn up in consultation with the service user, their carer, their relatives or representatives, included in the service delivery plan and kept in the home of the service user for staff to refer to. A copy is also placed on the personal file kept in the agency. The risk management plan is implemented and reviewed annually or more frequently if necessary.
- 12.6 A procedure is in place for reporting new risks which arise including defective appliances, equipment, fixtures or security of the premises.

- 12.7 Where pressure of time does not allow a risk assessment to be undertaken prior to provision of the care or support, only staff who are both trained to undertake risk assessments and competent to provide the care likely to be required are assigned to emergency situations.
- 12.8 When a need is identified, sufficient numbers of people who are fully trained in current safe handling techniques and the equipment to be used, are always involved in the provision of care from the moving, handling and positioning assessment.
- 12.9 The name and contact number of the agency responsible for providing and maintaining any equipment under the Manual Handling Regulations and Lifting Operations and Lifting Equipment Regulations is recorded on the risk assessment.
- 12.10 The moving, handling and positioning equipment is in a safe condition to use, inspections by the manufacturers have taken place on time and if necessary the organisation providing the equipment is reminded that a maintenance check is due.
- 12.11 A responsible and competent person is on call and contactable at all times when care workers are on duty.

FINANCIAL PROTECTION

OUTCOME:

The money and property of service users is protected at all times whilst providing the care service.

STANDARD 13 (See regulations 13 (conduct of agency) and 14 (arrangements for the provision of personal care))

- 13.1 The agency ensures that there is a policy and procedures are in place for staff concerning the safe handling and storage of service users' money and property. The policy and procedures take account of "Protection of Vulnerable Adults from Financial Abuse: In Safe Hands" (National Assembly for Wales, 2003) and cover:
- payment for the service/ service user's contribution (if appropriate)
 - payment of bills
 - shopping
 - collection of pensions, other benefits or cash
 - safeguarding the property of service users whilst undertaking the care tasks

- security of cards and PIN numbers
- reporting the loss or damage to property whilst providing the care

and guidance on:

- not accepting gifts or cash
- using loyalty cards belonging to the service user
- not making personal use of the service user's property eg telephone
- not involving the service user in gambling syndicates (national lottery, football pools)
- not borrowing or lending money
- not selling or disposing of goods belonging to the service user, their relatives or representatives
- not selling goods or services to the service user
- not incurring a liability on behalf of the service user
- not taking responsibility for looking after any valuable on behalf of the service user.

13.2 The agency's policies and practices regarding service users' wills and bequests preclude the involvement of any staff or members of their family in the making of or benefiting from service users' wills or soliciting any other form of bequest or legacy or acting as witness or executor or being involved in any way with any other legal document.

13.3 There is a policy and procedure for the investigation of allegations of financial irregularities and the involvement of police, social services and professional bodies.

13.4 The amount and purpose of all financial transactions undertaken on behalf of the service user, including shopping and the collection of pensions, other benefits or cash is recorded appropriately on the visit record held in the service user's home (see Standard 16) and signed and dated by the care worker and by the service user, if able to do so, or their carer, relatives or representatives on their behalf.

13.5 Where service users are unable to take responsibility for the management of their own finances, this is recorded on the risk assessment and action taken to minimise the risk of financial abuse. (See Standard 12.2)

13.6 Where support and tuition are provided, the reasons for and the manner of support are documented and reviewed.

PROTECTION OF THE PERSON

OUTCOME:

Service users are protected from abuse, neglect and self-harm.

STANDARD 14 (See regulations 13 (conduct of agency), 14 (arrangements for the provision of personal care) and 16 (staffing))

- 14.1 **Service users are safeguarded, in accordance with written policies and procedures (which take into account “In Safe Hands, Implementing Adult Protection Procedures in Wales” (National Assembly for Wales, 2000)), from any form of abuse or exploitation including physical, financial, psychological, sexual abuse, neglect, discriminatory abuse or self-harm or inhuman or degrading treatment through deliberate intent, negligence or ignorance. All staff working with children and their families have copies of the local authority child protection procedures (Standard 14.2) and are fully conversant with the agency’s policy and procedure.**
- 14.2 The agency has robust procedures for responding to suspicion or evidence of abuse or neglect (including whistle blowing) to ensure the safety and protection of service users and the procedures reflect local and national policies and procedures.
- 14.3 All allegations and incidents of abuse are followed up promptly and the details and action taken recorded in a special record/file kept for the purpose and on the personal file of the service user.
- 14.4 Physical and verbal aggression by a service user, their carer, their relatives or friends is responded to appropriately. Physical intervention is only used as a last resort, in accordance with National Assembly for Wales guidance, protects the rights and best interests of the service user, including people with special needs and is the minimum necessary consistent with safety. (see Standards 7.4 and 12)
- 14.5 Training on prevention of abuse is given to all staff within 6 months of employment and is updated regularly.
- 14.6 In accordance with the Protection of Children Act 1999 or the Care Standards Act 2000, staff who have acted in a way which may lead to their inclusion in the lists of persons who are unsuitable to work with children or vulnerable adults are referred to the Secretary of State for Health for consideration as to their inclusion on those lists.

SECURITY OF THE SERVICE USER'S HOME

OUTCOME:

Service users are protected and are safe and secure in their home.

STANDARD 15 (See regulations 13 (conduct of agency) and 14 (arrangements for the provision of personal care))

- 15.1 **Care workers ensure the security and safety of the home and the service user at all times when providing personal care.**
- 15.2 Clear protocols are in place in relation to entering the homes of service users.
- 15.3 Identity cards are provided for all care staff entering the home of the service user.
- 15.4 For people with special communication requirements, there are clear and agreed ways of identifying care staff from the agency.
- 15.5 Staff do not take any unauthorised person (including children and pets) into the service user's home without permission of the service user, their relatives or representatives and the manager of the service.

RECORDS KEPT IN THE SERVICE USER'S HOME

OUTCOME:

The health, rights and best interests of service users are safeguarded by maintaining a record of key events and activities undertaken through delivery of service.

STANDARD 16

- 16.1 **With the service user's consent, care workers record on records kept in the service user's home, the time and date of every visit to the home, activities taken in line with the service delivery plan and any variations from it. Where employed by the agency, live-in care workers complete the record as set out in the service delivery plan. Records include (where appropriate):**
 - assistance with medication including time and dosage on a special medication chart (see Standard 10)
 - other requests for assistance with medication and action taken (see Standard 10)
 - financial transactions undertaken on behalf of, or support given to, the service user (see Standard 13)

- details of any changes in the user's circumstances, health, physical condition, care needs
 - any accident, however minor, to the service user and/or care worker
 - any other untoward incidents
 - any other information which would assist the next health or social care worker to ensure consistency in the provision of care.
- 16.2 Service users and their relatives or representatives are informed (if duly authorised) about what is written on the record and on request have access to copies of it.
- 16.3 All written records kept by the agency are legible, factual, signed and dated by the person making the record, and kept in a safe place in the home, as agreed with the service user and their carer, relatives or representative.
- 16.4 Any service user or their carer, relative or representative on his or her behalf, refusing to have records kept in the service user's home, is requested to confirm the refusal and a record of this is kept on the user's personal file in the agency.

MANAGERS AND STAFF

Introduction to Standards 17 – 21

Service users and their carers and families have very high expectations of domiciliary care. The work places considerable responsibility on all care workers who work, predominantly on their own, in other people's own homes and in unsupervised settings. The quality of the care provided to service users will directly reflect the calibre of staff employed and their level of competence. It is therefore essential that the people who are recruited to undertake the work are suitable and able to demonstrate their competence for the work they are employed to undertake. This also means ensuring staff at all levels have opportunities to develop and receive the training necessary.

As the care needs of people living at home become increasingly complex and as more people are discharged early from hospital, so there is a commensurate increase in the need for specialist training to meet the particular care needs of people with certain conditions. Training must also consider the needs of family and other carers.

The quality of care provided is strongly influenced by the calibre of the managers of the service. It is therefore important that they are also able to demonstrate their management competence and their ability to perform their responsibilities effectively. One of these responsibilities is the regular supervision and appraisal of staff, particularly essential for care staff who work daily in unsupervised work settings. Unfortunately things do go wrong from time to time, and to deal with these situations it is necessary to have an effective disciplinary and grievance procedure. A Staff Handbook issued to all staff helps to ensure that they know what is expected of them and what they should do in certain critical situations. It is also important that it is realised that the application of the Standards applies equally to the engagement of temporary or agency staff.

RECRUITMENT AND SELECTION

OUTCOME:

The well-being, health and security of service users is protected by the agency's policies and procedures on recruitment and selection of staff.

STANDARD 17 (See regulations 15 (fitness of workers) and 16 (staffing))

- 17.1 There is a rigorous recruitment and selection procedure which meets the requirements of legislation, equal opportunities and anti-discriminatory practice and ensures the protection of the service user and their relatives or representatives.**
- 17.2 Care workers working directly with service users alone are at least age 18; the registered manager of the agency is at least age 21.

- 17.3 Two written references are obtained before making an appointment, one of which should normally be from the immediate past employer and are followed up by a telephone call prior to confirmation of employment. Any gaps in the employment record are explored and accounted for.
- 17.4 New staff and volunteers are confirmed in post only following completion of satisfactory checks.
- 17.5 Checks on the suitability of temporary staff may be undertaken by an employment or recruitment agency on behalf of the provider agency, provided that the checks comply with the requirements of these Standards.
- 17.6 All staff, including temporary workers and volunteers, are provided with a written contract or notice specifying the terms and conditions under which they are engaged, including the need to comply with the Care Council for Wales Code of Conduct.

REQUIREMENTS OF THE JOB

OUTCOME:

Service users benefit from clarity of staff roles and responsibilities.

STANDARD 18 (See regulations 16 (staffing) and 17 (staff handbook and code of conduct))

- 18.1 **All managers and staff are provided with a written job description person and work specification, identifying their responsibilities and accountabilities and with copies of the agency's Staff Handbook and grievance and disciplinary procedure. Staff are required to adhere to the Care Council for Wales Code of Conduct.**
- 18.2 The person specification includes the personal qualities required to undertake the work and the appropriate attitudes to be adopted.
- 18.3 Activities which should not be undertaken by care workers are also identified.
- 18.4 Person and work specifications are developed with reference to the relevant National Occupational Standards.
- 18.5 All staff (including temporary workers) are issued with the agency's Staff Handbook and agree to adhere to the Code of Conduct (Appendix B).
- 18.6 Staff are required to notify their employer of any new criminal convictions.
- 18.7 An immediate investigation is undertaken on any allegations or incidents of misconduct and appropriate disciplinary action taken as necessary.

- 18.8 A record is kept of all disciplinary incidents and details entered in the personal file of the member of staff concerned.

DEVELOPMENT AND TRAINING

OUTCOME:

Staff are appropriately trained to assess, monitor, meet and review the personal care needs of service users.

STANDARD 19 (See regulation 16 (staffing))

- 19.1 **The agency has a staff development and training programme which ensures staff are able to fulfil the aims of the agency and meets the assessed and changing needs of service users, their carers, their relatives and representatives. The programme is reviewed annually.**
- 19.2 All care workers and managers commence a structured induction programme on the first day of their employment, and are assessed by the end of their twelfth week in employment. The programme takes account of the guidance on induction published by the Care Council for Wales as the Social Care Induction Framework.
- 19.3 Each new member of staff undertakes a training needs analysis on completion of the induction period (to be linked to the personal development plan (see Standard 25)). This is incorporated into the agency's staff training and development plan.
- 19.4 All staff are provided with the required training on health and safety including moving, handling, and positioning. Topics to be covered may be found in appendix C. (See Standard 11)
- 19.5 Specialist advice, induction, training and information is provided for care workers working with specific client groups and/or medical conditions by someone who is professionally qualified to do so (Appendix D).
- 19.6 Within the whole staff group there is the range of skills and competence required to work with and meet the needs of individual service users. (See Standard 3)
- 19.7 Managers or supervisors of care workers providing specialist care services have knowledge and understanding of the specialisms for which they are responsible.
- 19.8 The agency has financial resources allocated, plans and operational procedures, to achieve and monitor the requirements for ongoing workforce training and qualification.
- 19.9 The need for refresher and updating training is identified at least annually during staff appraisal (see Standard 21) and incorporated into the agency's staff development and training programme.

QUALIFICATIONS

OUTCOME:

The personal care of service users is provided by qualified and competent staff.

STANDARD 20 (See regulation 16 (staffing))

- 20.1 **All staff including Managers are competent and trained to undertake the activities for which they are employed and responsible.**
- 20.2 All care workers delivering personal care who do not already hold a relevant qualification as listed as the recommended occupational qualification in the Care Council for Wales Qualification Framework are provided with learning and development (as identified by Standard 19.1) which requires them to work towards such a qualification.
- 20.3 By 1 July 2009 50% of all care workers hold a qualification as listed as the recommended occupational qualification in the Care Council for Wales Qualification Framework.
- 20.4 By 1 July 2009 all Managers employed before 1 April 2004 must hold the qualification as listed as the recommended occupational qualification in the Care Council for Wales Qualification Framework. Those managers first employed after 31 March 2004 hold a qualification as listed as the recommended occupational qualification in the Care Council for Wales Qualification Framework within 3 years of the commencement of their employment.
- 20.5 Records of training and development undertaken and the outcome are kept on a central development file and on individual personnel files.
- 20.6 The Manager undertakes periodic training to update knowledge, skills and competence to manage the agency.

SUPERVISION AND APPRAISAL

OUTCOME:

Staff are supervised and performance is appraised regularly.

STANDARD 21 (See regulation 16 (staffing))

- 21.1 All staff including managers receive regular supervision and have their standard of practice appraised annually.
- 21.2 All staff meet formally on a one to one basis with their line manager at least once every three months to discuss their work and written records shall be kept on the content and outcome of each meeting. (See Standard 27.3)

- 21.3 With the consent of the service user, supervision should incorporate direct observation of the care worker providing care to a service user with whom they regularly work.
- 21.4 Regular meetings are also held at least quarterly with peers and/or other team members.
- 21.5 All staff have an annual appraisal of their overall standard of performance and identification of training and development needs and a copy of the appraisal is placed on the personnel file of each member of staff. The appraisal should normally be undertaken by the line manager or their manager, except in exceptional circumstances.
- 21.6 Managers and supervisors receive training in supervision skills and undertaking performance appraisal.

ORGANISATION AND RUNNING OF THE BUSINESS

Introduction to Standards 22 – 27

It is essential that the providers of domiciliary care agencies operate from a sound business basis in order to ensure that they are able to meet the needs of service users efficiently and effectively, able to provide the user focus identified in Standards 1 - 16 and able to meet the requirements of the Regulations in light of these Standards.

This means that the infrastructure of the business must be sound, operating from premises that are suitable and equipped for the purpose. A business or operational plan is required to ensure that there is strategic planning for the on-going operation and stability of the business. The management structure of the agency must be appropriate for the effective management of a dispersed workforce working in stressful and responsible situations, primarily on their own in other people's own home. The ratio of managers to staff must reflect this and the complexity of the care needs of service users i.e. the more complex the level of need the higher the ratio should be of supervisors to staff. All staff must have clarity about their areas of responsibility.

Complaints and Quality Assurance

The delivery of effective personal care services to people living in their own home requires a clear infrastructure which identifies each stage of the process of service delivery and provides policies and procedures which support practice.

The delivery of the service must be supported by continuous monitoring and evaluation. Each agency will be required to have a robust mechanism in place for ensuring the quality of the services it is providing and taking the action necessary if the service falls below the Standards identified.

Each agency is also required to have a robust and transparent system in place to enable service users and/or their relatives or representatives, to make a formal complaint about the service and for the complaint to be investigated promptly and any necessary action taken. It should be remembered that the majority of people who receive care in their own home are extremely reluctant to complain, even when they have very valid reasons to do so, for fear that the service may be taken away from them. For this reason it is important that the process for making a complaint is accessible, transparent and straightforward. The process should include the giving of compliments as well as making complaints so that the whole process is seen and experienced by service users as positive and constructive and not negative and punitive.

BUSINESS PREMISES, MANAGEMENT AND PLANNING

OUTCOME:

Service users receive a consistent, well managed and planned service.

STANDARD 22 (See regulations 16 (staffing), 24 (fitness of premises) and 26 (financial position))

- 22.1 **The business operates from permanent premises and there is a management structure in place, including clear lines of accountability, which enables the agency to deliver services effectively on a day to day basis, in accordance with the agency's business plan.**
- 22.2 The service is managed and provided from sound and permanent premises which are suitable for the purpose, provide a safe working environment for staff and include the provision of private space for confidential meetings.
- 22.3 The premises are located appropriately for the management and provision of domiciliary care to service users.
- 22.4 The premises contain the equipment and resources necessary for the efficient and effective management of the service.
- 22.5 The management structure reflects the size of the agency, nature of care provided and the volume and complexity of the care provided.
- 22.6 There is adequate and appropriately skilled staff cover for the operation and management of the agency.

FINANCIAL PROCEDURES

OUTCOME:

The continuity of the service provided to service users is safeguarded by the accounting and financial procedures of the agency.

STANDARD 23 (See regulation 26 (financial position))

- 23.1 **Sound accounting and other financial procedures are adopted to ensure the effective and efficient running of the business and its continued financial viability.**
- 23.2 Systems are in place to accurately calculate charges for the service, to submit invoices regularly and to identify and follow-up any late payment.
- 23.3 Where audited accounts are not available, annual accounts are completed by a qualified accountant for the purpose of regulation and inspection.

- 23.4 Insurance cover is sufficient to protect the agency's assets and liabilities, including the agency's legal liabilities to employees and third parties to a limit of indemnity commensurate with the level and extent of activities undertaken.

RECORD KEEPING

OUTCOME:

The rights and best interests of service users are safeguarded by the agency keeping accurate and up-to-date records.

STANDARD 24 (See regulation 20 (records))

- 24.1 **The agency maintains all the records required for the protection of service users and the efficient running of the agency for the length of time required by the Regulations.**
- 24.2 All records are secure, up to date and in good order and are prepared, maintained and used in accordance with the Data Protection Act 1998 and other statutory requirements and are kept for the requisite length of time.
- 24.3 Consistent and standard personal data is kept on all service users being cared for by the agency. (See appendix E)
- 24.4 Service users, their carers or their representatives have access, in accordance with the Data Protection Act 1998 and other legal requirements, to their records and information about them held by the agency and are facilitated in obtaining access when necessary. (See Standard 9)

POLICIES AND PROCEDURES

OUTCOME:

The service user's rights, health, and best interests are safeguarded by robust policies and procedures which are consistently implemented and constantly monitored by the agency.

STANDARD 25 (See regulations 4 (statement of purpose), 16 (staffing), 17 (staff handbook and code of conduct) and 23 (review of quality of service provision))

- 25.1 **The agency implements a clear set of policies and procedures, formally approved by the registered provider, to support practice and meet the requirements of legislation, which are dated and monitored as part of the quality assurance process. The policies and procedures are reviewed and amended annually or more frequently if necessary. (See appendix F).**
- 25.2 Staff understand and have access to up-to-date copies of all policies, procedures and codes of practice, and service users and their representatives

or carers have access to relevant information on the policies and procedures and other documents in appropriate formats.

COMPLAINTS AND COMPLIMENTS

OUTCOME:

Service users and their relatives or representatives are confident that their complaints will be listened to, taken seriously and acted upon.

STANDARD 26 (See regulations 14 (arrangements for the provision of personal care) and 23 (review of quality of service provision))

- 26.1 There is an easily understood, well publicised and accessible procedure to enable service users and their relatives or representatives to make a complaint or compliment and for complaints to be investigated.**
- 26.2 The procedure includes the stages and timescales for the process.
- 26.3 Positive action is taken to encourage, enable and empower service users and their relatives or representatives to use the complaints and compliments procedure including access to appropriate interpretation and methods of communication.
- 26.4 All complaints are acknowledged in an appropriate form and the investigation commenced within the period specified in the information given to users.
- 26.5 Service users and their relatives or representatives are kept informed at each and every stage of the investigatory process and are given information on the procedure for considering complaints and for referring a complaint to the regional office of the Care Standards Inspectorate for Wales and/or the authority commissioning the service.
- 26.6 A record is kept of all complaints and compliments including details of the investigation and action taken; this record is also kept on the personal file of the service user kept in the agency and on the care worker's personnel record.
- 26.7 There is a system in place to analyse and identify any pattern of complaints.

QUALITY ASSURANCE

OUTCOME:

The service is run in the best interests of its service users.

STANDARD 27 (See regulations 16 (staffing) and 23 (review of quality of service provision))

- 27.1 There is an effective system for Quality Assurance (QA) based on the outcomes for service users, in which standards and indicators to be achieved are clearly defined and monitored on a continuous basis by care workers and their line managers.**
- 27.2 The Regulations, these Standards and other relevant service standards and indicators e.g. National Occupational Standards and indicators for the Performance Assessment Framework, are incorporated into the QA system.
- 27.3 There is a process and a procedure for consulting with service users and their carers about the care service on a regular basis and assuring quality and monitoring performance.
- 27.4 Care workers know the standard of service they are required to provide and monitor and meet the standard on a continuous basis.
- 27.5 The outcome from the QA process is published annually and made available to service users and their relatives or representatives, all stakeholders in the agency and to the CSIW in appropriate formats e.g. large print, braille, and, wherever possible, in the preferred language of the recipient.
- 27.6 Standards and the QA process are reviewed and revised as necessary, but at least on an annual basis.

Appendices

A GLOSSARY OF TERMS

Abuse

Single or repeated act or lack of appropriate action occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person including physical, emotional, verbal, financial, sexual, racial abuse, neglect and abuse through the misapplication of drugs.

Carer

A person who provides substantial care for a relative, friend or neighbour who is unable to manage at home without help because of sickness, age or disability.

Care Management

A system for organising the management and delivery of care services to vulnerable adults by local authority social services departments, and by Community Psychiatric Nurses, psychiatrists and other NHS personnel under Community Psychiatric Arrangements for people with mental health problems. The system involves assessing needs, care planning, organisation of care packages, monitoring and review, and close involvement with service users and carers.

Care Manager

The person responsible for undertaking the assessment of need, developing and co-ordinating the service delivery plan, for monitoring its progress and for staying in regular contact with the service user and their carer and everyone involved.

Care Plan

A written statement, regularly updated, and agreed by all parties, setting out the health and social care and support that a service user requires in order to achieve specific outcomes and meet the particular needs of the service user.

Care Worker

A person who works on either a paid or a voluntary basis for an agency which provides personal domiciliary care services to people who live in their own homes

Commissioning

The process of specifying, securing and monitoring services to meet individuals' needs. Commissioning is more commonly used to describe the strategic, long-term process, by which this takes place as opposed to the short-term, operational purchasing process. Statutory guidance exists under section 7 of the Local Authority Social Services Act 1970: "Promoting Partnership in Care – Commissioning across Health and Social Services".

CSA

The Care Standards Act 2000

CSIW

Care Standards Inspectorate for Wales

Intermediate care

A short period (normally no longer than six weeks) of intensive rehabilitation and treatment to enable service users to return home following (or to avoid) hospitalisation, or to prevent admission to long term residential care.

The Manager

Where the registered provider is also the manager, this term means that person. In other cases it means the registered manager. The registered manager, in relation to an agency, means a person who is registered under Part II of the Act as the manager of the agency.

Outcome

The end result of the service provided by a care provider to a service user, which can be used to measure the effectiveness of the service.

Physical intervention

A method of responding to violence or aggressive behaviour which involves a degree of direct physical force to limit or restrict movement or mobility.

Policy

An operational statement of intent which helps staff make sound decisions and take actions which are legal, consistent with the aims of the service, and in the best interests of service users and their carers.

Procedure

The steps taken to fulfil a policy.

Registered Person

Either the registered provider or, if a different person, the registered manager.

The Regulations

The Domiciliary Care Agencies (Wales) Regulations 2004

Representative

A person acting on behalf of a service user who may be a relative, friend or carer.

Service Delivery Plan

A written plan which specifies how the service user's needs are to be met by the provision of personal care in terms of tasks, activities and outcomes. The service delivery plan is consistent with any care plan prepared by a local authority for the service user.

Service User

Person who is receiving the domiciliary care service.

Terms and Conditions

Written statement describing the service to be provided, the basis on which it is to be provided, the rights and responsibilities of both the service user and the service provider, and including the service delivery plan.

Volunteer

People working without pay or for expenses only.

B CONTENT OF THE STAFF HANDBOOK (Standard 18.5)

The Staff Handbook covers:-

- compliance with the philosophy of care (privacy, dignity, maintaining independence)
- confidentiality of information
- limits of responsibility
- provision of non-discriminatory practice
- receiving sexual or racial harassment
- health and safety
- moving and handling
- prevention of any form of abuse
- dealing with accidents & emergencies
- handling and administering medicines
- handling money and financial matters on behalf of a service user
- acceptance of gifts and legacies
- dress code,
- use of protective clothing
- protocols and procedures for entering and leaving the service user's home
- personal safety and out of hours working
- not smoking, drinking alcohol or taking illegal substances whilst on duty
- ways in which staff and managers may raise concerns about the management and provision of the service including disclosure of bad practice
- maintaining accurate records
- other relevant policies and procedures.

C CONTENT OF HEALTH AND SAFETY TRAINING (Standard 19.4)

Health and safety issues are covered in the induction programme including: -

- clear statement of responsibilities of care staff and employer
- guidance on appropriate clothing and footwear
- procedure for reporting and recording accidents to service users and care staff
- dealing with violent incidents (or potential incidents) and challenging behaviour
- personal safety and violence prevention towards staff
- dealing with sexual and/or racial harassment
- control of substances hazardous to health
- moving, positioning and handling
- first aid (as appropriate to the agency's service user)
- basic hygiene and infection control including dealing with bodily fluids and incontinence management
- food preparation, storage and hygiene
- policy and parameters of responsibility in relation to administering of, and providing assistance with, medication
- notification of transmittable diseases and implications for confidentiality, protection etc
- wearing and use of protective clothing
- risk assessment including common hazards in the home
- maintaining privacy and respect when using equipment e.g. hoists
- health and safety implications for people with special needs
- dealing with pets, pests and infestation
- reporting of concerns or faulty equipment
- the rights of service users to take risks
- action to take in an emergency situation (as appropriate to the agency's service user)

D TOPICS REQUIRING SPECIALIST TRAINING AND ADVICE (Standard 19.5)

Specialist training would normally be expected for working with, for example:-

- people from ethnic minority communities and/or religious groups
- children and their families
- people with communication needs
- people with sensory loss
- people with dual sensory impairment
- older people with complex health and care needs
- people with a terminal illness
- people who have had a stroke
- people who have learning disabilities
- people with mental health problems including people subject to Guardianship and Supervision Orders under the Mental Health Act
- people with infectious or contagious diseases
- people with dementia
- people with challenging behaviours.

E DATA KEPT ON ALL SERVICE USERS (Standard 24.3)

- name, address, date of birth, telephone no.
- preferred form of address
- name, address, telephone no. of next of kin and main carer or person closest to user
- name, address, telephone no. of GP
- name, address, telephone no. of person & agency providing care
- name, address, telephone no. of care manager or other person responsible for arranging the provision of care (if applicable)
- date of commencement of the service
- date of termination of service – if known
- record of original assessment of need
- date of review/reassessment of service
- outcomes to be achieved for the service user by providing the care.
- detail of the care activities and service to be provided
- detail of the risk assessment including manual handling and any particular requirements arising from it
- any particular or special needs
- medication plan (if appropriate)
- other health care issues if known
- involvement of service user or carer in the provision and direction of their care
- carer work programme
- the length of time records should be kept for the following is:
 - 80 years – Records relating to children
 - 40 years – Employment records
 - 7 years – Accounts and financial transactions
 - 3 years – Interviews of applicants for posts who are subsequently employed
 - 6 months – Interviews of applicants who are not subsequently employed.

F POLICIES AND PROCEDURES OF THE AGENCY (Standard 25.1)

The policies and procedures encompass the following areas:-

- statement of purpose and aims and objectives of the agency
- conditions of engagement including travel expenses, insurance etc
- form of staff contracts & job descriptions
- range of activities undertaken – and limits of responsibility
- personal safety whilst at work
- standards for quality assurance
- confidentiality of information
- provision of non-discriminatory practice
- equal opportunities, sexual or racial harassment
- health and safety
- moving and handling
- dealing with accidents & emergencies
- disclosure of abuse and bad practice
- data protection and subject access to information
- assisting with medication
- handling money and financial matters on behalf of a service user
- maintaining the records in the home
- acceptance of gifts and legacies
- dealing with violence & aggression
- entering & leaving a service user's home
- safe keeping of keys
- complaints & compliments
- discipline and grievance
- training and staff development
- recruitment and selection procedure
- sickness absence

PROPOSED CHANGES TO THE DOMICILIARY CARE AGENCIES (WALES) REGULATIONS

Explanatory note

Paragraph no.	Proposed change	Reason for change	Effect of change
2	Add “An undertaking is also excluded if it is an individual who arranges personal care to fewer than four service users or to the extent of which it arranges personal care in pursuance of the National Health Service Act 1977.	To accurately reflect the revised content of Regulation 3.	Makes the exclusion of an undertaking which is an individual who arranges personal care to fewer than four service users or the extent to which it arranges personal care in pursuance with the National Health Service Act 1977 clear in the explanatory note.
6	Delete “Chapter 1 of”, substitute reference to “worn” with “produced” and delete “and the visiting of an agency by its registered provider (regulation 24)”	To reflect changes which have been made to the content or numbering of the regulations.	Provides an accurate read across between the contents of the ‘explanatory note’ and the changes proposed to the regulations.
7, 8 and 9 (now para 7)	Merge into a new paragraph 7 which begins with the text “Part III also” and results in the deletion of reference to “chapter 2 of” in paragraph 7, “chapter 3 of” in paragraph 8 and “chapter 4 of” in paragraph 9. Also, substitute reference in paragraph 7 to “regulation 25” with “regulation 24”,	Reference to chapters 2, 3 and 4 within Part III of the regulations has been removed to make the presentation of this Part consistent with other Parts. The other changes proposed reflect changes which have been made to the content or numbering of the regulations.	Provides an accurate read across between the contents of the ‘explanatory note’ and the changes proposed to the regulations.

	substitute reference to “regulation 26” in paragraph 8 with reference to “regulation 25” and delete “and the keeping of a register of interests” in paragraph 8.		
10 (now para 8)	Substitute references to “regulation 32” with “regulation 31”, “regulation 33” with “regulation 32”, “regulation 34” with “regulation 33”, “regulation 36” with “regulations 34 and 35” and “regulation 37” with “regulations 36 and 37”.	To reflect changes which have been made to the numbering of the regulations.	Provides an accurate read across between the contents of the ‘explanatory note’ and the changes proposed to the regulations.

Part I – General

Regulation	Proposed change	Reason for change	Effect of change
Reg 1 Name, commencement and application	1(1) Change “1 st July 2003” to “1 st December 2003”.	To reflect Wales’ timetable arrangements.	Will result in Regulations being commenced on 1 December 2003.
Reg 2 Interpretation	2(1) Add definition of “direct service provider”.	To clarify the term “direct service provider”.	Defines a “direct service provider” as a provider who supplies a domiciliary care worker who is employed by and who acts for and under the control of the provider.

	<p>2(1) Amend definition of an “organisation”.</p> <p>2(1) Amend definition of “domiciliary care worker”.</p> <p>2(3) Change to “In these Regulations</p>	<p>To improve clarity.</p> <p>To add clarity to the term “domiciliary care worker”.</p> <p>To add clarity to the terms “employed”</p>	<p>For the purpose of these Regs, “an organisation means a body corporate” rather than the previous definition which was “organisation means a body corporate, or any unincorporated association other than a partnership”.</p> <p>Provides a clearer definition of a “domiciliary care worker” as a person who:</p> <ul style="list-style-type: none"> a) is employed by the agency to act for, and under the control of, another person; and b) is introduced by an agency to a service user for employment by him, or c) is employed by a direct service provider, to provide personal care in the homes of and for persons who by reason of illness, infirmity or disability are unable to provide it for themselves without assistance. <p>Provides a clearer definition of</p>
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	the terms “employed” and “employment” include employment under a contract of service or a contract for services, or otherwise than under a contract and whether or not for payment”.	and “employment” within the context of the Regs.	“employed” and “employment”.
Reg 3 Excepted undertakings and application to employment agencies and businesses	3(1)(aiv) Add new point. 3(1)© Add new point. 3(2) & 3(3) Add new points.	To capture individual providers who provide domiciliary care services to four people or more. To except organisations from the regulations which are only involved in the commissioning of services from domiciliary care agencies. To avoid placing an unnecessary burden on organisations which supply domiciliary care workers, rather than directly providing domiciliary care services.	Excepts domiciliary care agencies, which provide services to fewer than four users, rather than all individual providers. Excepts organisations from the regulations which are only involved in the commissioning of services from domiciliary care agencies. Excepts domiciliary care agencies to the extent to which they are employment agencies or from the provisions of Reg 13 (Conduct of agency), Reg 14 (Arrangements for the provision of personal care), Reg 16 (Staffing), Reg 17 (Staff handbook and code of conduct), and Reg 19 (Identification of workers).

<p>Reg 4</p> <p>Statement of purpose</p>	<p>4(1)© Move previous text to 4(1)(d) and add new point.</p> <p>4(3), 4(3)(a) and 4(3)(b) Remove all text.</p>	<p>To provide greater clarity in relation to the intentions and scale of agencies' operations.</p> <p>The 'registered person' is, in any case, required to comply with all provisions of the regulations and the conditions in force in relation to the organisation of the registered person under Part II of the Act.</p>	<p>Adds a requirement to include text relating to the number and scale of contracts or other arrangements under which the agency provides services within a statement of purpose</p> <p>None in practice.</p>
<p>Reg 5</p> <p>Service user's guide</p>	<p>5(1)(b) Add "a description of" before "the geographical area".</p> <p>5(1) Add a new points ©(ii), (d), (e), (f), (g), (h) and (l).</p>	<p>To clarify that the service user's guide must include a description of the geographical area.</p> <p>To improve information made available to service users within the service user's guide.</p>	<p>Clarifies the intention of this provision.</p> <p>Adds a requirement for the service user's guide to also include:</p> <ul style="list-style-type: none"> • An outline of the circumstances in which the agency may cease to provide services to a service user, arrangements for cancellation of the supply of a domiciliary care workers by the service user

	<p>5(3) Delete section.</p>	<p>As it is proposed that the service user's guide should be expanded by adding</p>	<p>or the agency and requirements in relation to time sheets as part of the terms and conditions.</p> <ul style="list-style-type: none"> • A summary of the agency's complaints procedure. • Details of how the service user may contact the registered person, or a person nominated to act on his behalf, at all times during the period for which personal care is being provided. • Details of arrangements which will apply during the sickness or other absence of domiciliary care workers. • Details of arrangements for service users to express their views about the service provided. • A description of the process established by the agency for monitoring and reviewing the quality of service being provided. <p>Removes the requirement for a</p>
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		additional requirements at 5(1), it is not felt necessary for service users to also receive a copy of any agreements made between local authorities and agencies.	registered person to supply a service user with a copy of any agreement which specifies the arrangements made between a local authority and the agency for the provision of personal care.
Reg 6 Review of statement of purpose and service user's guide	6(1)(a) Substitute "keep under review and, subject to compliance with paragraph (2)" with "at intervals not exceeding one year and in consultation with service users, review and"..... Also, substitute "the content of the" with "the" 6(1)(b) Delete requirement to notify "the Commission" of changes to the statement of purpose and service user's guide to a requirement to notify "the appropriate office of the National Assembly within 28 days".	A requirement to keep the service user's guide under review without indicating specifying the frequency with which this should be done is felt to be ambiguous and difficult for CSIW to measure. To make reference to the appropriate body in Wales, rather than in England, and to add a timescale a 28 days for notification.	Places a requirement an agency to review its statement of purpose and service user's guide at intervals not exceeding one year, rather than a requirement to keep these documents under review. Places this requirement in Wales' context and adds a timescale of 28 days for notifying changes made to a statement of purpose or service user's guide.
Reg 7 Agency documents	No changes proposed.		

Part II – Registered persons

Regulation	Proposed change	Reason for change	Effect of change
<p>Reg 8</p> <p>Fitness of registered provider</p>	<p>8(2)(a) Change to: “(a) if an individual who carries on an agency: (i) otherwise than in partnership with others and satisfies the requirements of paragraph (3) or (ii) in partnership with others and he and each of the partners satisfies the requirements set out in paragraph (3), or”</p> <p>8(2)(b) Substitute reference to “Commission” with “National Assembly”, change one of the roles that could be fulfilled by the “responsible person” to a “senior officer” of the agency rather than an “officer” of the agency and place a requirement that the “responsible individual” must be someone responsible “for the management of the agency” rather than “supervising the management of the agency”.</p> <p>8(3)(a) Delete “to carry on or (as the case may be) be responsible for supervising the management of the</p>	<p>Previous wording did not extend to a requirement for partners to meet the requirements set out in 8(3) in order to be fit to carry on an agency.</p> <p>To place this section within Wales’ context and to ensure that the “responsible individual” is someone who is sufficiently senior and who takes responsibility for the agency’s activities.</p> <p>This is duplicates a description of the “responsible individual’s” role which has already been provided in 8(2)(b).</p>	<p>When an agency is carried on by a partnership, all partners will need to meet the requirements in 8(3) in order to be considered fit to do so.</p> <p>Ensures that this section is placed within Wales’ context and that the “responsible individual” is someone senior and who is accountable for an agency’s activities.</p> <p>None in practice.</p>

	agency”. 8(3)(b) Delete “supervising”.	To ensure that the responsible individual is someone who is physically and mentally fit to take responsibility for managing an agency, rather than supervising the management of an agency.	Ensures that the responsible individual is someone who is physically and mentally fo actually manage an agency.
Reg 9 Appointment of manager	9(1)(bii) Add new point to read: “carries on the agency in partnership”. 9(3) Delete reference to “Commission” and insert “National Assembly”. 9(5) Insert after...satisfactory information in respect of each of the matters listed in Schedule 2 is available in relation to him“and has been provided to the National Assembly”....., and before,except that.....	To require the registered provider to appoint an individual to manage the agency where an agency is carried on in partnership. To reflect the context in Wales. To place a requirement on registered providers to notify the National Assembly of who will be in charge of the agency it is open for business and he is absent from the premises.	Will ensure that an appointed individual manages an agency, where an agency is carried on as a partnership, to provide clear accountability for day to day activities. Places this section within Wales’ context. Will enable the National Assembly to contact a person in charge of the agency at anytime when it is open for business.
Reg 10 Fitness of	10(2) Delete “suitable” before integrity..... and delete “to manage the agency” aftercharacter in	To make 10(2a) more concise and to consider the agency’s size when assessing the fitness of a manager.	The size of the agency must be taken account of when assessing the fitness of a

manager	10(2a). Also, add “and size” after ...nature....at 10(2b)		manger.
Reg 11 Registered person – general requirements and training	11(2) Delete.....”or (as the case may be) be responsible for supervising the management of”.... 11(3) Add new point. 11(4) Add “expertise” after ...to ensure that he has....	This is duplicates of a description of the “responsible individual’s” role which has already been provided in 8(2)(b). To ensure that one person undertakes training as required in 8(2) where an agency is carried out by individuals in partnership. To create a requirement for training, which is undertaken by registered managers, to focus on ensuring that it results in developing expertise as well as experience and necessary skills.	No effect in practice. Where an agency is carried out by individuals in partnership, one individual will be required to undertake the required training. Will result in training for registered managers being focused, among other things, on the development of expertise.
Reg 12 Notification of offences	No changes proposed.		

Part III – Conduct of domiciliary care agencies

Regulation	Proposed change	Reason for change	Effect of change
Reg 13 Conduct of	No changes proposed.		

agency			
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<p>Reg 14</p> <p>Arrangements for the provision of personal care</p>	<p>14 Substitute references throughout to “the care plan” with “the service delivery plan”.</p> <p>14(1) Amend toafter consultation with the service user, “or if consultation with the service user is not practicable, after consultation with a person acting on behalf of the service user, prepare a written plan (the service delivery plan) which shall”.</p> <p>14(1a) Add new point.</p>	<p>To make terminology consistent with that used in practice.</p> <p>To place a requirement to consult with a person acting on behalf of a service user, about the service delivery plan, if it is not practicable to consult with the service user.</p> <p>To require that service delivery plans are consistent with any plan for the care of service users which have been prepared by local authorities.</p>	<p>Reference will be made to “the service delivery plan”, rather than “the care plan”, which is consistent with terminology used in practice.</p> <p>A person acting on behalf of a service user will be consulted by the registered person about the service delivery plan if it is not practicable to consult the service user.</p> <p>Will ensure that all service delivery plans are consistent with any plans which have been developed by local authorities for the care of service users.</p>
<p>Reg 15</p> <p>Fitness of workers</p>	<p>15(2) Move previous text to 15(3) and add new point.</p>	<p>To ensure that information and documentation is obtained in respect all people who may be required to visit a service user’s home.</p>	<p>Places a requirement on a registered person to obtain information and documentation, as specified in paragraphs 1 to 6 and 9 of Schedule 3, in respect of a person who is not a domiciliary care worker but who otherwise is required for the purpose of</p>

	15(4) Add new point.	To postpone the requirement for registered providers to obtain an enhanced criminal record certificate for existing staff until 31 October 2004 to allow adequate time for the applications to be submitted to the Criminal Records Bureau and for checks to be processed.	the agency to visit a service user in their home. Allows providers until 31 October 2004 to obtain enhanced criminal record certificates in respect of a worker who has been supplied by or worked for the agency any time during the period from 1 June 2003 to 31 May 2004.
Reg 16 Staffing	16(1d) Substitute “any period of the day in which a person” with “any time when a person is” 16(1e) Delete section. 16(2d) Delete “which may raise doubt as to whether the personal care to be provided by the staff member would be in accordance with the requirement of regulation 13.	To clarify the meaning of the sentence. It was felt to be unreasonable for agencies not to be able to employ workers on a temporary basis. To ensure that staff are required to notify the registered person if convicted of any offence, rather than staff themselves deciding whether or not it raise doubt about whether or not they should provide personal care.	None in practice. Allow agencies to employ workers on a temporary basis. Places a requirement on staff to notify a registered person of if convicted of any criminal offence.

Reg 17 Staff handbook and code of conduct	No changes proposed.		
Reg 18 Provision of information to service users	<p>18(1) Insert after...shall ensure that....."before personal care is provided".....and before.....a service user is.....</p> <p>18(1a) Change to "the name of each domiciliary care worker who is to provide personal care"</p>	<p>To ensure that the information at 18(1a) and 18(1b) is provided to service users before personal care commences.</p> <p>To improve clarity and it is felt that it is not reasonable for service users to be able to contact a domiciliary care worker at all times as this would include periods outside of working hours.</p>	<p>Will ensure that a service user knows the name of the domiciliary care worker and is able to contact the registered person from the outset.</p> <p>May result in service users not being able to directly contact care workers at all times.</p>
Reg 19 Identification of workers	19 Substitute....."attending on a service user for the purpose of the provision of personal care he must wear identification showing his name, the name of the agency and a recent photograph" with....."providing personal care to a service user he must present the service user with identification showing his name, a recent photograph of himself and the name of the agency".	A requirement to wear identification whilst providing personal care could have Health and Safety implications.	Registered persons will need to ensure that domiciliary care workers present service users with the required identification whilst providing personal care, rather than actually wearing the required identification.
Reg 20	20(1a) Delete.....and in accordance	This makes reference to rules of law	None in practice.

Records	<p>with any rule of law applicable to the information contained within them.</p> <p>20(1b) Delete....”at the agency premises”.....and substitute reference to “Commission” with “National Assembly”.</p> <p>20(2) Substitute reference to “service user’s plan” with reference to “service delivery plan”</p> <p>20(3) Delete section.</p>	<p>which agencies will, in any case, have to comply with.</p> <p>As some records will be correctly kept in a service user’s home, this is not considered to be a reasonable requirement. Also, this section needed to be placed within Wales’ context.</p> <p>To align terminology with that which is used in practice.</p> <p>This is thought to be impractical when, for example, the premises is shared with another undertaking which is also providing care services – e.g. a care home or nurses agency. Also, there is a problem with defining what is meant by “kept separate”.</p>	<p>Whilst records must be available for inspection at all times, it will not be a requirement for those records to be kept at the agency’s premises.</p> <p>Makes terminology used within this section consistent with that used in practice.</p> <p>Removes the requirement for records to be kept separate where an agency shares premises with another undertaking.</p>
<p>Reg 21</p> <p>Complaints</p>	<p>21(1) Insert “written” after ...shall establish a... and before...procedure...Also, insert “or on behalf of” after....to the registered person by..... and before....a service user.</p>	<p>To ensure that the complaints procedure is documented in writing and to require that the procedure will also need to deal with complaints made on behalf of service users, as well as by service users.</p>	<p>Will ensure that complaints procedures are documented in writing and that complaints made on behalf of service users, as well as by service users, are considered in accordance with those complaints procedures.</p>

	21(7) Substitute reference to “Commission” with “National Assembly”.	To place this section within Wales’ context.	Ensures that this section is placed within Wales’ context.
Reg 22 Staff views as to conduct of agency	22(2) Substitute “and” with “or”.	It was felt that staff may be reluctant to notify the National Assembly of their views relating to the conduct of the agency if they also have to notify the registered person.	Enables staff to inform either the registered person or the National Assembly, rather than having to inform both, of their views on the conduct of the agency.
Reg 23 Review of quality of service provision	23 (1) Insert “the service and” after.....at appropriate intervals the quality of.....and before.....personal care which the	To place a requirement on the registered person to introduce and maintain a system for reviewing the quality of the general service provided in addition to just the personal care aspects of the service.	Will ensure that registered persons have systems in place to review all aspects of services provided at appropriate intervals.
Reg 24 Visits by registered provider	Delete regulation.	The regulation was thought to place unreasonable pressures on the time of registered persons. Also, it was felt that other aspects of the regulations provide adequate provision for quality assurance and the regulation was considered more appropriate for care homes, as the emphasis in this context would be on the Agency’s premises rather than in service users homes where care is being provided.	Will remove a requirement for registered persons, who do not manage agencies, to visit and inspect agencies’ premises in a prescribed way.

<p>Reg 25 (now Reg: 24)</p> <p>Fitness of premises</p>	<p>Amend text to read: “The registered person shall not use the agency premises for the purposes of an agency unless they are suitable for the purpose of achieving the aims and objectives set out in the statement of purpose”.</p> <p>25(3) Remove section.</p>	<p>The detailed requirements set out previously were seen as unnecessary for domiciliary care agencies as services are provided in users’ homes.</p> <p>To remove text which had no practical benefit in the context of this regime.</p>	<p>Will require registered persons not to use premises of an agency unless they are suitable for the purpose of delivering it aims and objectives, rather than setting out detailed requirements.</p> <p>None in practice.</p>
<p>Reg 26 (now Reg: 25)</p> <p>Financial position</p>	<p>26(1) Substitute reference to “care home” with reference to “agency”.</p> <p>26(2) Insert “from time to time” afteras it may require.....and before.....in order to consider.....</p> <p>26(2b, c and d) Remove sections</p> <p>26(3) Remove section.</p>	<p>To place this section within the correct context.</p> <p>To indicate that certain additional information to that listed in 2a and 2b may be required by the National Assembly from time to time in order to consider the financial viability of an agency.</p> <p>Some of the documents would be unavailable to new providers and documents could, where appropriate, be requested by the National Assembly in accordance with the general requirement of 26(2).</p> <p>A provider would have to fulfil these</p>	<p>Places this section within the context of domiciliary care agencies.</p> <p>Clarifies that certain information may be required from time to time in order for the National Assembly to assess financial viability, in addition to those documents required routinely.</p> <p>Avoids a requirement for finance related documents to be provided which may sometimes be unavailable or unnecessary.</p> <p>None in practice.</p>

	26(4) Delete “and regulation 27”.	requirements in order to satisfy the requirement already set out in 26(2a) Deletion of Reg 27 (Register of interests) has been proposed.	None as a direct result.
Reg 27 Register of interests	Delete regulation.	This was considered unnecessary in light of the information which will be collected by the CSIW during the registration process.	Remove the requirement for the registered person to maintain a register of interests for completion by the registered manager and the registered provider in the prescribed way.
Reg 28 (now Reg: 26) Notification of incidents	28(3) Change to: “Any oral notification given in accordance with this regulation shall be confirmed in writing within 48 hours”.	To improve clarity and to place and to require written notification is given within 48 hours.	Ensures that written notification of an incident is provided to the Assembly within 48 hours.

<p>Reg 29 (now Reg: 27)</p> <p>Notice of absence</p>	<p>29(2e) Insert “or nominated” afterperson appointed....and before...in accordance....</p> <p>29(3) Substitute “is to arise” with “arises”.</p>	<p>To ensure that the name, address and qualifications of any person nominated in accordance with regulation 9 are provided.</p> <p>To improve clarity.</p>	<p>Ensures that the Assembly is advised of the name, address and qualifications of any person nominated, in addition to a person appointed, in accordance with regulation.</p> <p>None in practice.</p>
<p>Reg 30 (now Reg 28)</p> <p>Notice of changes</p>	<p>No changes proposed.</p>		
<p>Reg 31</p> <p>Appointment of liquidators etc</p>	<p>Delete regulation.</p>	<p>Rules surrounding liquidation are covered in other legislation and contact with the National Assembly, which is considered appropriate, are covered elsewhere in the Regs.</p>	<p>Avoids duplication with other aspects of these regulations and with other legislation in the event of an agency being bankrupted or liquidated.</p>
<p>Additional Reg (Reg 29)</p> <p>Death of registered person</p>	<p>Add additional Reg to cover action to be taken if a registered person dies and to allow for the continuation of a service in such an event.</p>	<p>To ensure that the National Assembly is notified of the death of any registered person and that an agency can still lawfully continue to provide services for a designated period in such an event.</p>	<p>Will ensure that the National Assembly is notified of the death of any registered person and that services can continue to be lawfully provided in such circumstances.</p>

Part IV – Miscellaneous

Regulation	Proposed change	Reason for change	Effect of change
Reg 32 (now Reg 30) Compliance with regulations	No changes proposed.		
Reg 33 (now Reg 31) Offences	33(1) Change to: "A contravention or failure to comply with regulations 4 to 7 and 12 to 28 shall be an offence. 33(2) Delete",and for this purpose, references in paragraphs (2) and (3) to a registered person shall be taken to include such a person.	To reflect amended numbering structure which has emerged from changes elsewhere. Text considered unnecessary as it aims to specify what would apply anyway.	None in practice. None in practice.
Reg 34 Modification of registration in respect of certain employment agencies and employment businesses	Delete regulation.	The inclusion of sections 2(2) and 2(3) has eliminated the need for a separate regulation to deal with the contexts of employment agencies and employment businesses.	None in practice.
Reg 35 (now Reg 32)	No changes proposed.		

Specification of appropriate offices			
Reg 36 (now Reg 33) Application for registration	Add text which outlines a registration protocol for domiciliary care agencies by amending the Social Care and Independent Health Care (Wales) Regulations 2002.	To establish a protocol for registration with the CSIW.	Results in the establishment of a protocol for domiciliary care agencies to register with the CSIW.
Reg 37 (now Reg 34) Registration fees	Add text to establish a fees framework for domiciliary care agencies by amending the Social Care and Independent Health Care (Fees) (Wales) Regulations 2002.	To establish a fees framework which applies when registering/whilst registered with the CSIW.	Results in the establishment of a fees framework which applies when domiciliary care agencies are registering, or are registered, with the CSIW. Add concessions for small providers
Reg 38 (now Reg 35) Transitional provisions	Add text to outline arrangements for existing providers who will be required to register as a result of these Regs coming into force.	To ensure that clarity is provided in relation to the registration requirements for existing providers which aim to result in such providers being registered in a timescale which is reasonable for them to comply with.	Will place a requirement on existing agencies to register with the CSIW within three months of these Regs being commenced.

Schedule 1 – Information to be included in the statement of purpose

Section	Proposed change	Reason for change	Effect of change
1	Delete"by persons in an unincorporated association"...	The term "unincorporated association" is thought to be ambiguous and would,	Will remove ambiguity surrounding the term

		in any case, be captured by the term “an organisation” which is included in this section.	“unincorporated association”.
6	Substitute reference to “nurse” with reference to “domiciliary care worker”.	To place this section within the context of domiciliary care services.	Places this section within the context of domiciliary care agencies.
8	Substitute reference to “personal care workers” with reference to “domiciliary care workers”.	To ensure that arrangements are made which will apply during the absence of all domiciliary care workers, including administrative staff.	Will ensure that arrangements are detailed which will apply in the absence of all domiciliary care workers, rather than just those workers who deliver personal care.
15	Substitute reference to “regulation 29” with reference to “regulation 27”.	To reflect the revised numbering structure which has resulted from changes made elsewhere.	None in practice.
Additional section 17	Add text which states: “The management structure of the agency”.	To add a requirement for the statement of purpose to include details of an agency’s management structure.	Will result in statements of purpose including agencies’ management structures.

Schedule 2 – Information required in respect of registered providers and managers of an agency and persons nominated to deputise for a registered person

Section	Proposed change	Reason for change	Effect of change
3	Change to: “Either:- a) where the certificate is required for a purpose relating to section 115(5) (ea) of the Police Act	To place a requirement for an enhanced criminal record certificate to be possessed in respect of those persons covered by this schedule.	Will make it a requirement for an enhanced criminal record certificate to be possessed in respect of those persons covered by this schedule,

<p>5</p>	<p>1997(a) registration under Part II of the Care Standards Act 2000, or the position falls within section 115(3) or (4) of that Act, an enhanced criminal record certificate issued under section 115 of that Act, or</p> <p>b) in any other case, a criminal record certificate issued under section 113 of that Act, including, where applicable, the matters specified in section 113(3A) or 115(6A) of that Act and once they are in force, section 113(3C)(a) and (b) or section 115(6B)(a) and (b) of that Act”.</p> <p>Substitute “”, as far as reasonably practicable, of the reason why he ceased to work in that position” with “of the reason why the employment or position ended except where the National Assembly has determined that all reasonable steps have been taken to obtain such verification but it is not available”.</p>	<p>Previous wording would make it possible for agencies to have decided that it was not practicable to obtain verification about the reason why registered person previously ceased to fulfil a position which involved working with children or vulnerable adults.</p>	<p>rather than a standard criminal record certificate.</p> <p>It will only be possible for verification about why a registered person ceased to fulfil a position which involved working with children or vulnerable adults not to be obtained if the National Assembly has determined that all reasonable steps have been taken to obtain such verification.</p>
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Schedule 3 – Information and documentation to be available in respect of domiciliary care workers

Section	Proposed change	Reason for change	Effect of change
4	Change to: “Either:- a) where the position falls within section 115(3) or (4) of the Police Act 1997, an enhanced criminal record certificate issued under section 115 of that Act, or b) in any other case, a criminal record certificate issued under section 113 of that Act, including, where applicable, the matters specified in section 113(3A) or 115(6A) of that Act and, once they are in force, section 113(3C)(a) and (b) or section 115(6B)(a) and (b) of that Act”.	To place a requirement for an enhanced criminal record certificate to be possessed in respect of domiciliary care workers.	Will make it a requirement for an enhanced criminal record certificate to be possessed in respect of domiciliary care workers, rather than a standard criminal record certificate.
5	Insert: “Where the person has worked at any time within the period of five years before being employed by the agency,....before....two written references.....	To remove a requirement to obtain two written references where a person has not worked within the period of five years before being employed by the agency on the basis that such a requirement may not be possible to comply with.	Will remove the requirement to obtain two written references when employing a domiciliary care worker, where the person has not worked within the five years before being employment by an agency.
6	Substitute “”, as far as reasonably practicable, of the reason why he ceased to work in that position” with	Previous wording would make it possible for agencies to have decided that it was not practicable to obtain	It will only be possible for verification about why a registered person ceased to

	“of the reason why the employment or position ended except where the National Assembly has determined that all reasonable steps have been taken to obtain such verification but it is not available”.	verification about the reason why registered person previously ceased to fulfil a position which involved working with children or vulnerable adults.	fulfil a position which involved working with children or vulnerable adults not to be obtained if the National Assembly has determined that all reasonable steps have been taken to obtain such verification.
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Schedule 4 – Records to be maintained for inspection

Section	Proposed change	Reason for change	Effect of change
Financial records			
	No changes proposed.		
Other records			
1	Substitute reference to “Commission” with “National Assembly”.	To place this section within Wales’ context.	Places this section within Wales’ context.
4	Substitute reference to “care plan” with “service delivery plan”, and substitute “devised” with “prepared”.	To make terminology consistent with that used in practice.	Aligns terminology used in this section with that used in practice.

Standard	Proposed change	Reason for change	Effect of change
Throughout NMS	References to Welsh Assembly Government changed to National Assembly for Wales.	Legal advice – formal documents should use the latter.	Makes terminology consistent with legal advice.
Throughout NMS	Where appropriate add in references to ‘carers’.	To recognise the integral role that carers play and the service they provide in the care of a service user. This is balanced with legal advice that the regulations only refer to provision of a service to a ‘service user’ and therefore references to ‘carers’ in the Standards can not seek to extend this.	Recognises provision of a holistic service for the service user and the role that carer’s play in this is acknowledged and respected.
Throughout NMS	Where appropriate, remove “and support” from care and support workers/staff.	To remove ambiguity surrounding what a support worker is as the NMS simply cover all workers providing care.	Removes ambiguity.
Throughout NMS	Standardise references to ‘care workers’ and ‘staff’.	To ensure that the relevant staff are captured by the Standards where appropriate, differentiating between those Standards which are specific to personal care and those which are not.	The term ‘care workers’ is used where the Standard refers specifically to personal care. The term ‘staff’ is used where the Standard refers more broadly to the work of the agency.
Throughout NMS	Where appropriate, replace the word ‘organisation’ with ‘agency’	Legal advice	Where used, this term specifically refers to a domiciliary care agency.

Standard	Proposed change	Reason for change	Effect of change
Throughout NMS	Remove “personal domiciliary care” and replace with “domiciliary care”	Consistency of terminology, making distinction between ‘domiciliary care’ and ‘personal care’.	Consistent terminology.
Throughout NMS	Re-ordering of standards: Standard 7 becomes Standard 4 Standard 4 becomes Standard 5 Standard 5 becomes Standard 6 Standard 6 becomes Standard 7	To make a clear distinction between those Standards which are ‘active’ and those which are ‘inactive’.	Order of Standards reflects care management process.
Statement:	<p>(Para 1) Replace ‘the Minister for Health and Social Services of the Welsh Assembly Government’ with ‘the National Assembly for Wales’</p> <p>(Para 2) Replace ‘as defined by section 4 of the Care Standards Act 2000 from [1st July 2003]’ with ‘as defined by the Domiciliary Care Agencies (Wales) Regulations 2004’.</p> <p>(Para 2) Commencement date from 1 January 2004 to 1 March 2004.</p>	<p>Legal advice</p> <p>Legal advice</p> <p>To reflect Wales’ timetable arrangements.</p>	<p>Correct terminology for compliance.</p> <p>Cross reference to the associated regulations.</p> <p>Postponed commencement date.</p>
<u>Introduction:</u>	Remove first paragraph “This document sets out National Minimum Standards applicable to domiciliary care agencies,...” and insert at start of Standards instead.	To make clear demarcation between what is and is not part of the Standards.	Makes clear demarcation between Introduction and Standards.

Standard	Proposed change	Reason for change	Effect of change
Who will be regulated?	<p>(Para 1) Insert reference to Appendix A (Glossary of Terms).</p> <p>(Paras 2 & 3) Insert introductory paragraphs as per English Standards</p> <p>(Para 2) Add “and cares for fewer than 4 people”</p> <p>(Para 3) Add paragraph</p> <p>(Para 5) Remove “(which are discussed further in the next section)”</p>	<p>To clarify the meaning of terminology used in this section e.g. ‘manager’.</p> <p>To set the scene for the Introduction to the Standards.</p> <p>To reflect amendment to Regulation 3(1) i.e. to capture individuals who provide domiciliary care services to four people or more.</p> <p>To reflect amendment to Regulation 3(2) i.e. to clarify the exemption from some Standards for ‘employment agencies’ and to list those particular Standards.</p> <p>No longer refers to next section.</p>	<p>Provides reference point for terms used in Introduction.</p> <p>Provides background information and an explanation of the purpose of the Standards.</p> <p>Excepts agencies providing domiciliary care services to fewer than four users, rather than excepting all sole providers.</p> <p>Employment agencies which solely introduce workers to be employed by a service user are exempted from some Standards. Employment businesses which engage workers to work under the day to day control of the service user, but retain ongoing contractual control of the worker remain captured by all Standards.</p> <p>None in practice.</p>

Standard	Proposed change	Reason for change	Effect of change
Definition of Personal Care	Substantial addition of text based on section 7 guidance ‘Clarification of the Registration Requirements for Supported Housing & Extra Care Schemes under the Care Standards Act 2000’.	To clarify the Assembly’s position on the definition of personal care, to capture supported housing settings (in particular those which have de-registered as care homes)	The majority of supported housing settings will be captured by the regime where personal care, which may include some aspects of non-physical care, is provided in the person’s own home.
The Regulatory Context	<p>(Para 1) redrafted text replaces the first, second and fifth paragraphs from the consultation draft.</p> <p>(Para 2) Remove “and to be enforceable through the relevant regulations”</p> <p>(Para 2) Replace “the requirements are being met” with “the Standards are being achieved”</p>	<p>Make more concise, improve clarity.</p> <p>Retain content of paragraph but make more concise.</p> <p>Improve clarity.</p>	<p>Improves clarity.</p> <p>None in practice.</p> <p>Improves clarity.</p>
Structure	<p>Replace “regulators” with “inspectors”</p> <p>(Focus on service users) Add “National Assembly for Wales, 1999”</p>	<p>To improve consistency and refer to the individual who will be working on professional judgement.</p> <p>Correctly reference ‘Building for the Future’.</p>	<p>Refers to the individual who will be working on professional judgement.</p> <p>Improves clarity.</p>

Standard	Proposed change	Reason for change	Effect of change
Context and Purpose	<p>(Quality workforce) Remove “The Training Organisation for Personal Social Services is developing National Occupational Standards” and replace with “The Care Council for Wales is developing a Qualification Framework”</p> <p>Add statement “The Introduction does not form part of the National Minimum Standards”</p>	<p>To reflect different training arrangements in Wales</p> <p>To make clear demarcation between what is and what is not part of the Standards.</p>	<p>Refers agencies and staff to the Care Council for Wales’ Qualification Framework.</p> <p>Makes clear demarcation between what is and what is not part of the Standards.</p>
National Minimum Standards for Domiciliary Care Agencies in Wales	Insertion of paragraph “This document sets out National Minimum Standards applicable to domiciliary care agencies...”	To introduce the Standards and the legislative framework under which they are issued.	Improves clarity.
<u>User Focussed Services</u> Introduction to Standards 1 - 5	<p>(Para 1) Insert “..and service delivery plan...”</p> <p>(Paras 5 & 6) Remove and place in Introduction to Standards 6-10: Personal Care</p>	<p>Make reference to other care management document. in which service user needs are specified.</p> <p>Paragraphs refer to Standards that have been moved to ‘Personal Care’ section.</p>	<p>Refers to all relevant care management documents.</p> <p>None in practice.</p>
<u>Standard 1:</u>	1.1 Replace ‘The registered person produces’ with ‘There is’.	Provide clarity on the role of the service user’s guide	Removes responsibility for production of the service user’s

Standard	Proposed change	Reason for change	Effect of change
Information	<p>1.1 Replace 'Guide' with 'service user's guide'.</p> <p>1.2 Rephrase first sentence.</p> <p>1.2 Add 'or describes' after 'includes'</p> <p>1.2 (Point 6) 'service user plan' replaced by 'service delivery plan'</p> <p>1.2 (Point 7) Remove 'contract'</p> <p>1.2 (Point 8) Add the word 'representation'.</p> <p>1.2 (Point 11) Remove 'Care Standards Inspectorate for Wales'</p>	<p>As above</p> <p>To clarify the onus on the agency to provide copies of the service user's guide in the appropriate format for the service user and preferred language of the service user.</p> <p>To clarify what the service user's guide is expected to detail.</p> <p>To make terminology consistent with that used in practice.</p> <p>To distinguish 'terms and conditions' of service provision from 'employment contract'.</p> <p>To ensure that a process is described for pursuing informal concerns.</p> <p>To avoid unnecessary wording.</p>	<p>guide from solely the registered person.</p> <p>Increases clarity.</p> <p>Increases clarity.</p> <p>Increases clarity.</p> <p>Consistency with that used in practice.</p> <p>Improves clarity.</p> <p>Ensures that the service user's guide includes an informal process for pursuing concerns.</p> <p>Makes more concise.</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>1.3 Add bullet point on the outcome of the quality assurance process.</p> <p>1.4 Remove 'The registered person ensures that'</p>	<p>To make reference to quality assurance process in service user's guide.</p> <p>Unnecessary as registered person is responsible for this anyway.</p>	<p>Outcome of the annual quality assurance process will be made readily available to service users.</p> <p>None in practice.</p>
<p>Standard 2: A Needs Assessment</p>	<p>Change title from "Service Delivery Assessment" to "A Needs Assessment" and reflect change throughout Standard</p> <p>Outcome Remove 'and their personal or family carers when appropriate'.</p> <p>2.1 Replace 'totally involved' with 'fully involved'.</p> <p>2.1 Add the sentence 'Reasonable steps should be taken to acquire adequate information to inform the process'.</p> <p>2.2 Remove "The manager ensures that a service delivery assessment is undertaken and obtains a summary of the needs assessment".</p>	<p>To reflect terminology used in care planning.</p> <p>Standards apply to provision of personal care to service users only.</p> <p>To improve clarity.</p> <p>To bring in line with and reiterate the advice of the section 7 commissioning guidance (Promoting Partnership in Care).</p> <p>Sentence no longer relevant following the redefining of 'service delivery assessment' as 'needs assessment'.</p>	<p>Consistency with terminology used in practice.</p> <p>Removes inappropriate wording.</p> <p>Improves clarity of what is required in practice.</p> <p>Provides for a more informed needs assessment.</p> <p>None in practice.</p>

Standard	Proposed change	Reason for change	Effect of change
	2.5 Add 'and a needs assessment has not been undertaken'.	To improve clarity of what is intended.	Improves clarity.
Standard 3: Meeting Needs	<p>Outcome Remove 'Service users and their relatives and representatives know that' from the start; remove 'providing the personal care service'; and add 'of the service user' at the end.</p> <p>3.1 Replace 'The registered person' with 'The agency'</p> <p>3.3 Remove 'problems' from 'substance misuse problems'</p> <p>3.4 Replace 'service user plan' with 'service delivery plan'</p>	<p>Previous wording would not have been measurable in practice.</p> <p>Clarify where responsibility lies for demonstrating capacity of the agency.</p> <p>To remove unnecessary wording.</p> <p>To make a clear distinction between this document and the 'service user guide'.</p>	<p>Aligns wording with intended outcome.</p> <p>Improves clarity.</p> <p>Makes more concise.</p> <p>Improves clarity.</p>
Standard 4: Service Delivery Plan (old Standard 7)	<p>Title renamed from 'Service User Plan' to 'Service Delivery Plan'. New terminology reflected throughout Standard.</p> <p>Outcome Replace 'personal goals' with 'outcomes'</p>	<p>To make a clear distinction between this document and the 'service user's guide'.</p> <p>Make more specific the care related nature of the goals of the service user.</p>	<p>Improves clarity.</p> <p>Improves clarity.</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>Outcome Replace ‘recorded’ with ‘incorporated’</p> <p>4.1 (old 7.1) Change ‘personal plan’ to ‘service delivery plan’ and terminate sentence after ‘care to be delivered’.</p> <p>4.3 (old 7.3) Remove end of sentence: “ – as long as it conforms to legal requirements...”</p>	<p>To improve clarity.</p> <p>Clarify the document being referred to. Rest of sentence removed as a glossary adds further definition.</p> <p>To remove unnecessary wording.</p>	<p>Improves clarity</p> <p>Glossary to be referred to for further definition of service delivery plan.</p> <p>Makes more concise.</p>
<p>Standard 5: Terms and Conditions (old Standard 4)</p>	<p>Change title from ‘Contract’ to ‘Terms and Conditions’</p> <p>Outcome Replace ‘a written individual service contract or statement of’ with ‘information as to’</p> <p>5.1 (old 4.1) Remove ‘a written contract (if self-funding)’.</p>	<p>No contract exists between the agency and the service user where care has been commissioned by a local authority or health body. In such circumstances the contract is usually lengthy and covers many issues in which a user would not be interested or involved and would not cover the issues laid out in this Standard.</p> <p>To focus on outcome rather than the process.</p> <p>Unnecessary to distinguish between self-funders and others. A statement of</p>	<p>Clarifies document being referred to and its contents.</p> <p>Aligns wording with intended outcome.</p> <p>None in practice.</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>5.1 (old 4.1) Replace ‘within seven days of commencement of the service’ with ‘before the service begins.</p> <p>5.2 Remove ‘contract or’ and ‘between the service user and the service provider’</p> <p>5.2 (Point 4) Add to sentence ‘...including the expectations of service users’.</p> <p>5.3 Replace ‘contract or’ with ‘statement of’</p>	<p>terms and conditions applies as a contract to both.</p> <p>The contract should be in place before care is provided.</p> <p>Removes unnecessary wording.</p> <p>To address the issues that can arise surrounding the expectations of the care worker and those of the service user regarding the areas of activity that will or will not be undertaken.</p> <p>Consistency of terminology.</p>	<p>Clear boundaries are established to minimise room for miscommunication and failed expectations.</p> <p>None in practice.</p> <p>Removes ambiguity.</p> <p>Ensures wording is consistent with that used elsewhere.</p>
<p><u>Personal Care:</u> Introduction to Standards 6-10</p>	<p>(Paras 2 & 3) Inserted from Intro to Standards 1-5.</p> <p>(Last Para) Remove ‘a confusion of role between health care professionals and personal social care’ and replace with ‘will further emphasise the important interface</p>	<p>To reflect re-ordering of standards.</p> <p>Removes previous drafting error.</p>	<p>‘Personal Care’ Intro refers to those Standards moved to within this section.</p> <p>Aligns wording with intent to emphasise the important interface between health and social care staff.</p>

Standard	Proposed change	Reason for change	Effect of change
	between health care professionals and personal social care’.		
<p>Standard 6: Confidentiality (old Standard 5)</p>	<p>Outcome Remove ‘service users...etc <i>know</i> that their.....’</p> <p>6.3 (old 5.3) Add to sentence ‘...and act in accordance with policies and procedures (See Standard 25)’.</p>	<p>The desired outcome is not that the service user and others <i>know</i> something, but that something is actually achieved.</p> <p>The desired outcome is not just that the care worker knows something but that they also act upon that knowledge.</p>	<p>Directly states that personal information is handled appropriately and that confidentiality is respected.</p> <p>Align wording with intended effect.</p>
<p>Standard 7: Responsive Services (old Standard 6)</p>	<p>7.1 (old 6.1) Replace ‘Staff’ with ‘The agency’ and change the tense of rest of paragraph to reflect this change</p> <p>7.2 (old 6.2) Add ‘service user’s home’ and replace ‘work for the full amount of time allocated’ with ‘perform the tasks specified in the care plan.’</p> <p>(old 6.3) Item removed entirely</p> <p>7.4 (old 6.5) Remove ‘or support’ in 1st sentence and in 1st, 3rd and 5th bullet points.</p>	<p>The onus should be on the agency to ensure that services are provided satisfactorily.</p> <p>To clarify the reference to home as that of a service user and to make more specific the activities expected of the member of staff whilst allowing some flexibility in timescale.</p> <p>To remove a requirement which is already adequately dealt with through the care plan.</p> <p>To improve clarity.</p>	<p>Ensures that services delivered are as intended in the service delivery plan.</p> <p>Aligns wording with the overall aim of delivering what is set out in the care plan.</p> <p>None in practice.</p> <p>Improves clarity.</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>7.4 (old 6.5) A bullet point six added: ‘a personality clash between the service user and the care or support worker’.</p> <p>7.5 (old 6.6) Replace ‘ by the manager’ with ‘by a representative of the agency’</p> <p>7.6 (old 6.7) Insert ‘and’ after ‘Service users’. Replace ‘to their care, at all times’ with to the service users care’.</p>	<p>To encompass personality clash as a legitimate reason for a change of care worker.</p> <p>It will not always be possible or practical for the manager to undertake such introductions.</p> <p>To clarify the care being referenced and draw attention the contractual guidelines that will affect this item (e.g. confidentiality)</p>	<p>Adds personality clash as a legitimate reason for changing a care worker.</p> <p>Removes request for the manager to always introduce new care workers.</p> <p>Ensures that relatives and/or representatives are also always informed.</p>
<p>Standard 8: Privacy and Dignity</p>	<p>Outcome Add ‘dignity, are’ after ‘treated with respect and’</p> <p>Add ‘and Standard 9 (autonomy and Independence)’.</p> <p>8.1 Remove ‘and support’</p> <p>8.1 (Point 5) Replace ‘manual handling’ with ‘moving, handling and positioning’.</p>	<p>To make consistent with title of Standard.</p> <p>To cross-reference with other associated Standard.</p> <p>To refer consistently to ‘personal care’, the definition for which is discussed in the Introduction to the Standards.</p> <p>To make terminology consistent with that used in practice.</p>	<p>Improves consistency.</p> <p>Draws out link between both Standards.</p> <p>Clarifies care being referred to.</p> <p>Makes terminology consistent with that used in practice.</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>8.2 Replace ‘care and support’ with ‘Personal care’.</p> <p>8.4 Remove ‘at all times’</p>	<p>To refer consistently to ‘personal care’, the definition for which is discussed in the Introduction to the Standards.</p> <p>To remove ambiguity.</p>	<p>Clarifies care being referred to.</p> <p>Improves clarity.</p>
<p><u>Standard 9:</u> Autonomy and Independence</p>	<p>Outcome add ‘in accordance with the Service Delivery Plan’ at the end, and replace ‘maintaining’ with ‘maximising’.</p> <p>9.1 add ‘in accordance with the Service Delivery Plan’ at the end.</p> <p>9.2 Replace ‘personal finances’ with ‘day to day personal finances’.</p> <p>9.3 reference made to the Service Delivery Plan</p> <p>9.6 Replace ‘workers communicate with service users in their first, or</p>	<p>To refer the focus back to that contracted and agreed upon.</p> <p>As above.</p> <p>To clarify the nature of the personal finances being referred to.</p> <p>See comments re. ‘outcome’.</p> <p>To remove what may be an unreasonable request in some</p>	<p>Ensures that service users and care workers do not come under pressure to take additional steps that are not outlined in their Service Delivery Plan.</p> <p>As above.</p> <p>Ensures that staff do not become involved in the personal finances of a service user such as ownership of their home etc.</p> <p>See comments re. ‘outcome’.</p> <p>Requires agencies to work towards communicating in a</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>where agreed, preferred language' with 'agencies work to provide service users with a service in their preferred language of communication'.</p> <p>9.7 Replace 'their personal files' with 'service user's personal files'</p> <p>9.8 Add Standard 9.9 to end of 9.8, up to and including 'independent advocacy services.'</p>	<p>circumstances.</p> <p>Clarify the personal files being referred to.</p> <p>To remove unnecessary wording and make more concise.</p>	<p>preferred language rather than having to do so immediately.</p> <p>Improves clarity.</p> <p>Makes more concise.</p>
<p>Standard 10: Medication and Health Related Activities</p>	<p>Outcome Remove 'even if they are unable to administer their medication themselves'</p> <p>10.1 Remove 'The registered person ensures'</p> <p>10.2 remove 'should' and 'if required'. Expand upon definition of procedures.</p> <p>10.3 replace 'or administer' with ', administering'.</p> <p>10.3 Replace 'when it is within their competence; they have received any necessary specialist training and it is:-' with 'when they have received</p>	<p>Substantial changes have been made to Standard 10 to improve the emphasis on health related activities.</p>	<p>Better coverage of health related issues.</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>the appropriate training and are assessed as competent. In addition such assistance must be:'</p> <p>10.3 (bullet point 2) add to end of sentence (except for over-the-counter medication)'</p> <p>10.3 (bullet points 3 and 4) Merge bullet points together</p> <p>10.4 Remove 'and is detailed in the service user plan (Standard 7)' and insert at end of sentence 'except for over the counter medication)</p> <p>Insert new 10.5 Detail development process of policy and procedures</p> <p>10.6 (old 10.5) Remove 'Care and support staff'.</p> <p>10.7 (old 10.6) Add 'in relation to both medication and health related activities. All action taken should be documented and, where appropriate, reported to the relevant health professional(s).'</p> <p>10.8 (old 10.7) Redrafted</p>		

Standard	Proposed change	Reason for change	Effect of change
	<p>10.9 (old 10.8) 'Where delivery of the care package involves multiple agencies, including health care a policy on...' replaced by 'Where packages of care may be provided on a multi-agency basis, policies and procedures on...'. 10.9 (old 10.8) 'A key worker, generally' replaced by 'The key worker, usually' 10.9 (old 10.8) replace 'is identified as responsible for taking the lead on medication' with 'takes the responsibility for leading on medication and health related activities in the delivery of a package of care to individual service users.' 10.9 (old 10.8) Remove 'Care and support workers retain responsibility for their own actions in accordance with policy'. Remove old 10.9 10.10 Replace 'medicines policy' with</p>		

Standard	Proposed change	Reason for change	Effect of change
	'policies and procedures for medication and health related activities'		
<p><u>Protection:</u></p> <p>Introduction to Standards 11 – 15</p>	<p>Para 1 Replace 'both service users and home care and support workers'. Remove 'personal'. Remove 'home care' and 'home care and support'.</p> <p>Para 4 Replace 'also retains' with 'should also retain', and change tense to suit.</p> <p>Para 6 Replace 'that home care and support workers plays' with 'the agency plays'.</p> <p>Para 7 replace 'For similar reasons home care or support workers' with 'For similar reasons, managers and care workers'</p>		
<p><u>Standard 11:</u></p> <p>Safe Working Practices</p>	<p>11.1 Remove 'The registered person ensures that'</p> <p>11.1 Add the caveat 'where appropriate' and additionally list: Personal Protective Equipment at Work 1992; Working Time Directive.</p>	<p>To remove unnecessary wording.</p> <p>To recognise that not all bull points apply in all cases and to add reference to other important legislation.</p>	<p>None in practice.</p> <p>Improve effectiveness</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>11.2 (new bullet point 5) Insert bullet point ‘drawing the service user’s attention to the respective responsibilities of the service user and agency in relation to health and safety’.</p> <p>11.2 (bullet point 9) add ‘or aggression’</p> <p>11.2 (bullet point 10) remove reference to Appendix D.</p> <p>11.2 (bullet point 11) Add a bullet point on lone working</p> <p>11.2 (bullet point 12) Bullet point transferred from 12.11</p> <p>11.3 Remove reference to ‘registered person’ specifically appointing persons.</p>	<p>To ensure that all stakeholders are aware of responsibilities.</p> <p>To add clarity.</p> <p>Reference to Appendix no longer relevant.</p> <p>To include lone working on H&S policy.</p> <p>To improve presentation.</p> <p>To remove unnecessary wording.</p>	<p>Service users are prompted to consider their health and safety responsibilities by the agency.</p> <p>Includes procedure for handling aggression in policy.</p> <p>None in practice.</p> <p>Ensures that lone working issues are covered in policy.</p> <p>Improves presentation.</p> <p>None in practice.</p>
<p>Standard 12: Risk Assessment</p>	<p>12.1 Remove ‘The registered person ensures that’ and replace with ‘by an appropriately trained and qualified person’</p>	<p>Allow latitude for other staff to be trained and applied for the purpose of risk assessments.</p>	<p>Ensures that a risk assessment is carried out by an appropriately trained and qualified person and not, necessarily, the registered</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>12.3 Remove 'The manner in which'</p> <p>12.4 Remove 'The registered person ensures that'</p> <p>12.4 & 12.5 Replace manual handling references with 'moving, handling and positioning'.</p> <p>12.8 Remove 'Two people fully trained' and replace with 'Sufficient numbers of people fully trained'</p> <p>12.10 Remove 'The registered person'. Also remove 'manual handling' and replace with 'moving, handling and positioning'.</p> <p>12.10 'is reminded' inserted after 'equipment'</p> <p>12.11 Remove this item and move list of bullet points to Standard 11.2</p>	<p>To remove unnecessary wording.</p> <p>As 12.1</p> <p>To make terminology consistent with that used in practice.</p> <p>To remove unnecessary rigidity.</p> <p>As before.</p> <p>To improve clarity.</p> <p>To improve presentation.</p>	<p>person.</p> <p>Makes point more concise.</p> <p>As 12.1</p> <p>Makes terminology consistent with that used in practice.</p> <p>Removes unnecessary rigidity.</p> <p>As before.</p> <p>Improves clarity.</p> <p>Improves presentation.</p>
<u>Standard 13:</u>	13.1 Replace 'registered person' with 'agency'	To remove unnecessary rigidity.	Removes unnecessary rigidity.

Standard	Proposed change	Reason for change	Effect of change
Financial Protection	<p>13.1 Insert 'and storage' after 'safe handling'</p> <p>13.1 Add reference to 'Protection of Vulnerable Adults From Financial Abuse: In Safe Hands (National Assembly for Wales, 2003)</p> <p>13.1 (bullet point 4) add 'other benefits or cash'.</p> <p>13.1 Insert bullet point 6 'security of cards and PIN numbers'</p> <p>13.1 Remove 'and guidance on NOT' and instead prefix relevant bullet points with 'not'.</p> <p>13.1 Remove final bullet point 'taking any unauthorised person...'</p> <p>13.3 Remove 'registered person'</p> <p>13.4 Insert 'other benefits or cash' after 'the collection of pensions'</p>	<p>To add clarity.</p> <p>To cross reference with other relevant publication.</p> <p>Adds clarity.</p> <p>As above.</p> <p>To improve presentation and clarity.</p> <p>Place in more appropriate Standard (15)</p> <p>Remove unnecessary wording.</p> <p>To add clarity.</p>	<p>Clarifies that 'storage' as well as 'handling' of service user's money must be accounted for in agency policy.</p> <p>Makes link with more detailed generic requirements.</p> <p>Adds clarity on content of agency policy.</p> <p>As above.</p> <p>Improves presentation and clarity.</p> <p>Included in Standard 15 instead.</p> <p>None in practice.</p> <p>Adds clarity.</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>13.6 Remove item entirely</p> <p>New 13.6 Insert 'Where support and tuition are provided, the reasons for and the manner of support are documented and reviewed'.</p>	<p>There is no 'Register of Interests, which was a requirement under the now removed Regulation 27, and therefore nothing to hang this Standard on.</p> <p>To further protect those most vulnerable service users where support and tuition on financial matters is provided.</p>	<p>None as a direct result.</p> <p>Will require such support and tuition be recorded.</p>
<p><u>Standard 14:</u> Protection of the Person</p>	<p>14.1 Insert reference to "In Safe Hands, Implementing Adult Protection Procedures in Wales, 2000"</p> <p>14.1 Add following to end of para 'All staff working with children and their families have copies of the local authority child protection procedures (Standard 14.2) and are fully conversant with the agency's policies and procedures.'</p> <p>14.2 Remove 'The registered person'. Also remove 'including the involvement of the Police and the passing on concerns to the CSIW in accordance with the Public Interest Disclosure Act 1998' but incorporate</p>	<p>As 13.1</p> <p>To further clarify procedures when working with children.</p> <p>To remove unnecessary wording.</p>	<p>As 13.1</p> <p>Staff working with children will be fully conversant with the agency's and local authority's child protection procedures.</p> <p>None in practice.</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>'local and national policies and procedures'</p> <p>14.4 Remove item entirely</p> <p>14.5 (new 14.4) Refer item back to 14.2.</p> <p>14.7 (new 14.6) Replace 'and is updated every two years' with 'and is updated regularly'.</p> <p>14.8 (new 14.7) Reconfigure sentence</p>	<p>To remove reference to specific group in generic Standards</p> <p>To improve clarity.</p> <p>To remove unnecessary rigidity.</p> <p>To improve presentation.</p>	<p>Retains generic application.</p> <p>None in practice.</p> <p>Removes unnecessary rigidity.</p> <p>Improves presentation.</p>
<p><u>Standard 15:</u></p> <p>Security of the Service User's Home</p>	<p>15.2 & 15.3 Remove listings</p> <p>15.5 (new para) 'Staff do not take any unauthorised person (including children and pets) into the service user's home without permission...'</p>	<p>In accordance with earlier decision to remove listings with are not exhaustive.</p> <p>Moved from Standard 13.</p>	<p>Makes more concise.</p> <p>None in practice.</p>
<p><u>Standard 16:</u></p> <p>Records Kept in the Service User's Home</p>	<p>Outcome Replace 'in the home in relation to the provision of personal care' with 'through delivery of service'.</p>	<p>To add clarity.</p>	<p>Adds clarity.</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>16.1 Replace ‘the service provided and any significant occurrence’ with ‘activities taken in line with the service delivery plan and any variations from it’</p> <p>16.1 Replace reference’s to ‘user’ with ‘service user’ and substitute ‘complete the record on a daily basis with ‘complete the record as set out in the service delivery plan’.</p> <p>16.1 (Point 3) Change ‘on behalf of the service’ to ‘on behalf of support given to the service user.’</p> <p>16.2 Add ‘on request’...have access to copies of it.</p> <p>16.3 Supplement with all written records ‘kept by the agency’ are legible, factual, signed and dated ‘by the person making the record’...</p> <p>16.4 Remove entirely</p> <p>16.5 (new 16.4) Replace ‘is</p>	<p>To clarify what is to be recorded.</p> <p>To place focus on requirements in service delivery plan.</p> <p>To improve clarity.</p> <p>To improve clarity.</p> <p>To remove a confusing and potentially problematic provision.</p> <p>To remove a provision which may</p>	<p>Adds clarity.</p> <p>Place focus on service delivery plan.</p> <p>Improves clarity.</p> <p>Improves clarity.</p> <p>Removes a provision which would cause potential difficulties.</p> <p>Makes requirement more</p>

Standard	Proposed change	Reason for change	Effect of change
	requested to sign and date a statement confirming...’ with ‘is requested to confirm the refusal and a record of this is kept on the user’s personal file in the agency’.	cause difficulties in practice.	effective in practice.
<p><u>Standard 17:</u></p> <p>Recruitment and Selection</p>	<p>17.2 Remove entirely</p> <p>17.2 ‘Care workers working directly with service users alone are at least age 18, the registered manager of the agency is at least 21.’</p> <p>17.3 Add ‘and accounted for’ to the end of sentence.</p> <p>17.4 Remove list of checks made.</p> <p>17.6 Replace “new staff” with “all staff” . Replace “comply with the agencies Staff Handbook and the agency’s policies and procedures” with “comply with the Care Council for Wales Code of Conduct”.</p>	<p>Already covered by 17.1</p> <p>To bring in line with previous legislation and prevent those who are under 18 from working one-on-one unsupervised with service users.</p> <p>To improve clarity.</p> <p>More practical for the Care Council for Wales to form part of the worker’s terms and conditions (rather than being incorporated in a staff handbook).</p>	<p>None in practice.</p> <p>Places age restriction on unsupervised work for those under 18.</p> <p>Improves clarity.</p> <p>Links requirement with national Standards.</p>
<p><u>Standard 18:</u></p> <p>Requirements of the Job</p>	<p>Add reference to Regulation 17 (staff handbook and code of conduct).</p> <p>18.1 Add sentence “Staff are required</p>	<p>To make link with national Standards.</p>	<p>Makes appropriate link with</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>to adhere to the Care Council for Wales Code of Conduct”</p> <p>18.5 Replace entirely with “All staff (including temporary workers) are issued with the agency’s Staff Handbook and sign up to the Code of Conduct (Appendix B)”</p> <p>18.6 Conclude sentence after ‘any new criminal convictions’ and remove rest of item.</p>	<p>As above.</p> <p>To remove ambiguity surrounding when it is appropriate to mention criminal convictions.</p>	<p>national Standards.</p> <p>As above.</p> <p>Improves clarity.</p>
<p>Standard 19: Development and Training</p>	<p>Outcome Rewrite as ‘Staff are appropriately trained to assess, monitor, meet and review the personal care needs of service users’</p> <p>19.1 Remove ‘The registered person ensures’ and reference to “the Training Organisation for Personal Social Services workforce training targets”.</p> <p>19.2 Reconfigure to state that “all care staff and managers commence a structured induction programme”, and incorporate timescales “on the first day of their employment and are</p>	<p>This Standard has been substantially re-written to place the requirements within the context of national requirements and policies.</p>	

Standard	Proposed change	Reason for change	Effect of change
	<p>assessed by the end of their twelfth week in employment”. Remove reference to “Training Organisation for Personal Social Services induction Standards” and replace with “The programme takes account of the guidance on induction published by the Care Council for Wales as the Social Care Induction Framework”.</p> <p>19.3 Remove entirely as 19.2 covers.</p> <p>19.3 (old 19.4) Remove ‘or probationary period’. Insert (to be linked to the personal development plan (see Standard 25)’ after ‘induction period’</p> <p>19.4 (old 19.5) Replace ref to “manual handling with “moving, handling and positioning”.</p> <p>19.4 (old 19.5) Change ref from Appendix D to Appendix C.</p> <p>19.5 (old 19.6) Amend first sentence to “Specialist advice, induction, training ...is provided where there are specific service user needs, for care</p>		

Standard	Proposed change	Reason for change	Effect of change
	<p>workers working with..."etc.</p> <p>19.5 (old 19.6) Remove ref to Appendix E (list of areas of specialist training need).</p> <p>19.8 (new) add 'ongoing' before 'workforce'</p>		
<p><u>Standard 20:</u> Qualifications</p>	<p>20.1 Add: All staff "including managers" in the organisation...</p> <p>20.2 Remove "newly appointed care or support workers" and replace with "all care workers". Replace "who do not already hold a NVQ in Care Level 2 or 3..."etc. with "who do not already hold a relevant qualification as listed as the recommended occupational qualification in the Care Council for Wales Qualification Framework should be provided with learning and development opportunities (as identified by Standard 19.1) which allows them to work towards such a qualification".</p> <p>20.3 Remove entirely</p>	<p>See comments re. Standard 19.</p>	

Standard	Proposed change	Reason for change	Effect of change
	<p>20.4 (new 20.3) Replace “1 July 2007” with “1 July 2009” and move to start of sentence. Replace “50% of all care arranged by the agency is to be delivered by workers holding...” with “50% of all care workers hold...”. Replace “a NVQ mentioned in 20.2, or equivalent” with “a qualification as listed as the recommended occupational qualification in the Care Council for Wales Qualification Framework”.</p> <p>20.5 (new 20.4) Replace deadline for managers already in place from “3 years from the date of commencement of application of these Standards” to “By 1 July 2009” and place at start of sentence. Redefine “a manager who is employed at the commencement of the application of these Standards” as “all Managers employed before 1st April 2004”. Change the requirement from “should hold a nationally recognised management qualification equivalent to NVQ level 4 in management” to “must hold the qualification as listed as the</p>		

Standard	Proposed change	Reason for change	Effect of change
	<p>recommended occupational qualification in the Care Council for Wales Qualification Framework”. Redefine “A Manager employed after the commencement of these Standards” as “Those managers employed after the 31 March 2004”. Replace “should obtain a qualification” with “must hold a qualification as listed as the recommended occupational qualification in the Care Council for Wales Qualification Framework”. Retain deadline of within three years of commencing employment for this group.</p> <p>20.7 (now 20.6) replace ‘shall undertake periodic management training’ with ‘undertakes periodic training’</p>		
<p>Standard 21: Supervision</p>	<p>Title Change to ‘Supervision and Appraisal’.</p> <p>Outcome Remove “Service users know and benefit from having”.</p> <p>21.1 Amend “All care and support</p>	<p>To improve clarity.</p> <p>To remove unnecessary wording.</p> <p>To ensure that managers are included.</p>	<p>Improves clarity.</p> <p>Makes more concise.</p> <p>Ensures that this covers</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>staff" to "All staff including managers".</p> <p>21.3 Replace "at least one of these meetings should incorporate direct observation" with "supervision should incorporate direct observation".</p> <p>21.5 Replace 'care or support worker' with 'member of staff'.</p>	To improve clarity.	<p>managers.</p> <p>Improves clarity.</p>
<p><u>Organisation And Running of the Business</u></p> <p>Introduction to Standards 22-27</p>	<p>Para 2: Replace "All staff must also be engaged on a contractual basis with clarity about their areas of responsibility" with "All staff must have clarity about their areas of responsibility".</p> <p>Para 2 Replace 'lower' with 'higher' and 'managers' with 'supervisors'</p> <p>Para 5 add 'and transparent' after 'robust'</p>	<p>To improve clarity.</p> <p>Corrects drafting error.</p>	<p>Improves clarity.</p> <p>Corrects drafting error.</p>
<p><u>Standard 22:</u></p> <p>Business Premises, Management and Planning</p>	<p>22.2 Remove 'and designated' from "permanent premises which are suitable and designated for the purpose".</p> <p>22.4 Remove list of equipment and</p>	<p>To remove unnecessary wording.</p> <p>To remove unnecessary detail.</p>	<p>None in practice.</p> <p>Makes more concise.</p>

Standard	Proposed change	Reason for change	Effect of change
	<p>resources</p> <p>22.5 Add “nature of care provided”.</p> <p>22.6 Replace “there is an adequate covering the operation of the agency” with “there is adequate and appropriately skilled staff cover for the operation and management of the agency”.</p>	<p>To ensure that the nature of care being provided is considered when designing management structure.</p> <p>To amend drafting error.</p>	<p>Improves appropriateness of management structure.</p> <p>Aligns wording with intended effect.</p>
<p>Standard 23: Financial Procedures</p>	<p>23.1 Remove reference to “The registered person”.</p>	<p>To place emphasis on agency rather than registered person.</p>	<p>Removes unnecessary rigidity.</p>
<p>Standard 24: Record Keeping</p>	<p>24.1 Remove list of records</p> <p>24.3 Reference to Appendix F changed to Appendix E</p>	<p>To avoid unnecessary detail.</p> <p>To correct reference.</p>	<p>Avoids duplication between Standards and guidance.</p> <p>Aligns reference with appropriate Appendix.</p>
<p>Standard 25: Policies and Procedures</p>	<p>25.1 After ‘policies and procedures’ add ‘formerly approved by the registered provider’</p> <p>25.1 reference to Appendix G</p>	<p>As 24.3</p>	

Standard	Proposed change	Reason for change	Effect of change
	changed to Appendix F		
<p>Standard 26:</p> <p>Complaints and Compliments</p>	<p>26.1 Remove reference to “the registered person”.</p> <p>26.5 Remove “at any stage of they so wish” from end of sentence.</p>	<p>To remove unnecessary rigidity.</p> <p>To remove unnecessary wording.</p>	<p>Removes unnecessary rigidity.</p> <p>None in practice.</p>
<p>Standard 27:</p> <p>Quality Assurance</p>	<p>27.3 Remove list of QA and performance monitoring indicators</p> <p>27.5 Replace “circulated to” with “made available to”. Add requirement for copies to made available “in appropriate formats e.g. large print, Braille, and wherever possible, in the preferred language of the recipient”.</p>	<p>As 24.1</p> <p>To remove unreasonable distribution requirement and to improve accessibility.</p>	<p>As 24.1</p> <p>Places emphasis on providing for service users needs.</p>
<p>Appendix A:</p> <p>Glossary</p>	<p>Care Assessment renamed “Needs Assessment”</p> <p>Add definition of Carer (as defined in the Carers assessment leaflet).</p> <p>Add definition of Commissioning</p> <p>Replace “Service User Plan” with “Service Delivery Plan”.</p>	<p>Appendices have been amended to incorporate the group’s suggested changes.</p>	

Standard	Proposed change	Reason for change	Effect of change
Appendix D:	Remove entirely		
Appendix F: (new Appendix E)	<p>Last bullet point to read “The length of time records should be kept include:” and is supplemented with the same bullet points as are in the English version.</p> <p>Also insert bullet point “carer work programme”.</p>		
Appendix G: (new Appendix F)	Add Bullet Point “recruitment and selection procedure”.		