



Minimum Quality Standards for Day Time Support for Older Peoples and People with Dementia

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Contents

Introduction	2
Glossary of terms that will be used in this Standard	3
Standards	4
<i>Standard 1 - Informing and Deciding</i>	<i>4</i>
<i>Standard 2 - Assessment of Need and Service User Plan.....</i>	<i>4</i>
<i>Standard 3 - Contract/Agreement.....</i>	<i>5</i>
<i>Standard 4 - Activities</i>	<i>5</i>
<i>Standard 5 - Environment</i>	<i>6</i>
<i>Standard 6 - Management and Staffing.....</i>	<i>7</i>
<i>Standard 7 – Safeguarding</i>	<i>9</i>
<i>Standard 8 – Complaints.....</i>	<i>9</i>
<i>Standard 9 – Policies and Procedures</i>	<i>10</i>
<i>Standard 10 - Quality and Improvement.....</i>	<i>10</i>
Appendix 1 Policies that wil be required	11

Introduction

Day time support service for older people and people with dementia ("Services") offer a wide and diverse range of supports including social interactions, healthy meals, activities, personal care support such as hairdressing and bathing, exercise classes and these can be provided in a variety of settings. The Services are an important resource to improve people's wellbeing, reduce loneliness and isolation, provide respite for carers and prevent or delay the need for more intensive health and social care support for those using the service.

Services do not include care at home but can be provided within a residential care home as well as in specialised centres and other community centres.

Services support is defined as an establishment where one or more of the following services are provided for more than four hours during the day:

- Personal care or personal support with or without practical assistance;
- Reablement activities;
- Respite; and/or
- Therapeutic activities.

It does not include Luncheon Clubs, Shared Lives and befriending services.

Services can help a wide range of people, from those who need support with very complex needs to those where time limited support is needed at different points in their lives.

A principal aim of the Services is to encourage people to remain active members of the community.

The standards described (Minimum Quality Standards) in this document is what each individual person can expect from the Service Provider and focus on the quality of life that the person using the service actually experiences. They reflect an approach to care and support that will meet each individual's preferred lifestyle; they embrace the following values:

- **Privacy** - A right to have privacy and property respected and to receive the time, the space and the facilities they need. To be free from intrusion as long as it is safe for the person and for others using the service.
- **Dignity** - A right to be treated with dignity and respect at all times; and enjoy a full range of social relationships.
- **Choice** - A right to make informed choices, whilst recognising the rights of others to do the same. To know about the range of choices and get help to fully understand the options and choose the one that is right for the individual.
- **Safety** - A right to feel safe and secure in all aspects of life but not to be over protected. To be free from exploitation and abuse.
- **Fulfilment** - A right to live an independent life, rich in purpose and meaning and personal fulfilment; to have the opportunity to achieve all that can be achieved; to make full use of the resources that are available to make the most of life.
- **Equality and diversity** - A right to be valued for ethnic background, language and culture; to be able to express sexuality and have that respected; to be free from bullying, harassment and discrimination and to be able to complain without fear of victimisation.

Glossary of terms that will be used in this Standard

- Definitions otherwise not defined here will have the same definition as given in the Provider's List agreement.
- Disclosure and Barring Service (DBS): A DBS replaces the Criminal Records Bureau (CRB) and Independent Safeguarding Authority (ISA). A DBS helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including adults.
- Personal Plan: also known as: Care Plan, Plan of Care, Support Plan. Is the document that contains the Service User's personal details and instructs the reader of the Personal Plan about how to deliver services that are tailored to that Service User's needs. The Service Provider is responsible for completing the personal plan.
- Physical Intervention: Used by staff to manage, restrain or stop people from harming themselves or others.
- Risk Assessments: Written documents that form part of the Service Provider's safety strategies. They can be personal, environmental or generic. Risks are identified and plans set in place to minimise those risks.
- Safeguarding: Sometimes called Adult Protection makes provision for and maps out the obligations and responsibilities on the Service Provider and the Service Provider's Personnel staff at the service to keep people safe and follow agreed procedures where abuse is suspected or alleged.

Standards

Standard 1 - Informing and Deciding

Outcome – A prospective Service Users has all the information needed to help make an informed decision about whether or not to use the Services.

The Service Provider must have in place a Statement of Purpose which describes the overall aims, objectives and philosophy of the Services it provides. The information must be updated regularly to ensure accuracy.

A Service User guide or handbook must be available which contains information about the Service Provider's Service and:

- A summary of the Statement of Purpose;
- The location and description of the Services;
- The types of activities and Services provided;
- The fees or charges payable and required payment method for Services, facilities or activities;
- Any transport provided and associated cost;
- The general terms of attendance and any trial period and its review timescale. This can include notice periods for holidays and absences;
- The Service User's rights and responsibilities whilst using the Services and the consequences of not complying with the same;
- How to apply for a placement / referral process.

The Service Provider must offer simple and clear pricing information for Service Users to avoid a hidden cost scenario.

The Service User must be able to visit the Service prior to them, or their named representative, signing a contract between the Service User and the Service Provider.

The Service Provider has an obligation to notify in advance the Authority of all Change and ensure the information regarding the Service Provider Services on the Authority's website/web portal is up to date and correct at all times.

Standard 2 - Assessment of Need and the Personal Plan

Outcome – Each Service User must have an assessment of their needs and Personal Plan with regard to the Service provided

The Service Provider must undertake an assessment of each Service User's needs and Personal Plan prior to offering a place to ensure their needs can be met by the provision ('Assessment').

The Service User, their family and other professionals (as appropriate) must be involved in the Assessment process.

The Assessment must be recorded with the Service User (wherever possible) to create the Personal Plan. For the purposes of a Care Managed Service User the Personal Plan must reflect the individual's Care and Support Plan completed by the Authority.

Each Service Provider must have in place a comprehensive Support Plan for each Service User which is reviewed and updated every six months, or earlier if where the needs of a Service User change.

The Service User must be involved in creating their Support Plan. Where the Service User chooses not to be involved, or is unable to, this must be recorded and family or other professionals must be involved.

The Service User plan must identify all areas of support to be met by the Services and how this is to be achieved. It must include information and decisions about:

- What they prefer to be called
- Any specialist equipment required or food preferences and how this will be provided
- Any communication needs and how these will be met
- Who should be involved in the Support Plan reviews
- Any risk assessments including those around mobility, behaviour and health conditions.

Standard 3 - Contract/Agreement

Outcome – Each Service User must have a contract/agreement detailing the Services to be provided.

Each Service User must be provided with an individual written contract/agreement which sets out:

- The services and facilities provided to the Service User
- The start date and the sessions/days of attendance
- Transport arrangements (where applicable)
- Any fees or charges payable and the arrangements for paying these
- The arrangement for reviewing the contract/agreement
- The period of notice required to terminate the contract/agreement including clear communication and exit plan.

The contract/agreement must be presented in a format and language suitable for the Service User and is signed and dated by the Service User and the manager of the Service. Where the Service User is unable or chooses not to sign this must be recorded and where appropriate signed by anyone legally acting on their behalf.

The contract/agreement must be in place prior to the Service User starting the Services.

The Service User must be given at least 28 days written notice of all changes to the contract/agreement including where there is to be a Change and these must be agreed in writing by the service user or their chosen representative. The Service User must be given the option to cancel their contract/agreement if they do not agree to the changes within this time period without penalty.

The Service User must be given at least 28 days advance notice of any increase or variation in the fees or charges. The Service User must be given the option to cancel their contract/agreement if they do not agree to the changes within this time period.

Standard 4 – Activities

Outcome – The Services provide a structured programme of varied activities and events related to its statement of purpose.

The programme must provide opportunities for both group and individual activities. It must be flexible and allow for Service User choice.

The types of activities offered must be diverse and varied, engaging, purposeful, enjoyable, age and culturally appropriate and promote well-being. All activities must be resourced appropriately.

Activities, in-house, day trips and community based must be provided in an appropriate setting and facilitate community inclusion. The duration of the activities must take account of the needs and abilities of the Service Users participating.

Service Users must be enabled to participate in the activities of their choice by the provision of equipment, aids and support from staff or others.

The Service Provider must indicate to the Service Users if it offers personal care supports including hairdressing, assisted bathing and other personal care such as cutting nails and chiropody.

Where an activity is provided by a third party contracted in to do so, the Service Provider must:

- Obtain evidence from the third party and monitor the activity to confirm that the third party has the necessary skills to provide the activity.
- The Service Provider must inform the third party about any changed needs of Service Users prior to the activity commencing.
- There must be a system in place to receive timely feedback from the third party providing the activity.

The programme of activities must be displayed in a suitable format and in an appropriate location so that Service Users know what is scheduled. This must be displayed at least a week in advance.

Standard 5 - Environment and transport

Outcome – the environment and transport must be safe, well maintained and sustainable to meet the needs of the Service Users.

The Service should be welcoming in character, where Service Users can spend a tranquil and enjoyable day. The facility must be spacious yet secure to allow Service Users to walk around in safety.

The grounds and the outside of the building must be well-maintained and where possible are not identifiable in a way that stigmatises people as a user of the Services.

The building and its fittings must help maintain and increase people's independence.

For Services supporting people with dementia, the environment needs to be dementia friendly with consideration given to appropriate access, floor finishing, furnishings and lighting. The Service Provider will be expected to meet the requirements outlined in the dementia friendly environment checklist which can be found at:

http://www.dementiaaction.org.uk/assets/0000/4336/dementia_friendly_environments_checklist.pdf

The Service Provider's premises must be kept clean, well maintained and in a suitable state of repair and decoration.

The Service Provider's premises must have a written Fire Risk Assessment that is compliant with Fire Safety guidance and instructions.

Records must confirm that weekly alarm tests, monthly firefighting equipment (including emergency lighting) checks, and fire drills are carried out at least twice per annum.

The Service Provider must have the appropriate Public, Employer and Professional Liability Insurance and the certificates must be prominently displayed.

The Service Provider's Services will include a range of appropriate recreational and craft equipment inside the building and wherever possible the grounds around the Service Provider's premises will be used for outdoor activities. Service Users will be supported in accessing what they need to engage in such activities.

Furniture, fittings and any equipment or mobility aids in areas accessed by Service Users must be positioned to take into account the mobility and overall needs of the Service Users including those with sensory impairments.

Catering areas must comply with Food Safety legislation at all times and staff handling food must be suitably trained. Catering must be registered with the Department of Environment, Food and Agriculture (DEFA) as a food business.

The Service Provider's premises must have separate toilets for ambulant males and females and at least one wheelchair accessible unisex toilet (where appropriate). These facilities must be clearly marked and have suitable hand washing and drying facilities to meet infection control guidance. They must be lockable and where appropriate have an override option.

Vehicles used as part of the Services must be maintained and regularly checked. All Service Provider's Personnel that drive vehicles must have their driving licences checked and details recorded on a regular basis (minimum annually). Appropriate insurances must be in place.

There must be adequate facilities for Service Provider's Personnel and Service Users to store their personal items including lockable storage facilities.

Standard 6 – Service Provider's Personnel (incl. management and staffing)

Outcome – Good quality support and care must be provided by the Service Provider's Personnel whose professional training, qualifications and expertise enables them to meet the Service Users' needs.

There must be policies and procedures in place which cover all requirements that apply to the type of Service being provided –appendix 1 lists required policies and procedures.

Service Provider Personnel must be such to ensure requirements are determined by the needs of the Service Users and over time the staffing arrangements should provide sufficient flexibility to enable adjustments to respond to changing need. Service Provider Personnel levels must be determined by the following factors, including:-

- the number and level of dependency of Service Users
- whether Service Users require moving and physical assistance support
- whether Service Users require special assistance due to behaviour/functional ability
- how the layout and design of the building facilitates staff support Service Users
- hours allocated for social, recreational and cultural activities.

The Service Provider will have adequate staffing levels to support the needs of the people in their care at all times. Service Providers need to display their average staffing levels on the website and within the premises.

Staff providing support and care must have the knowledge and skills to care for Service Users attending the Services; all new staff must be supported to develop the essential knowledge and skills as part of a planned training programme.

Staff, managers and volunteers are recruited and selected through a process which includes as a minimum:

- Application form
- Taking up 2 references (one of whom should be the last/current employer)
- Enhanced DBS checks – these must be renewed for all staff a minimum of every 3 years unless the update service has been selected
- Evidence of all checks are recorded and retained in line with Data Protection Legislation.

Volunteers must be familiar with the Service Provider's policies and procedures and receive all relevant training to help them support the Services provided.

Service Provider Personnel must be provided with a clear definition of their roles and responsibilities (job description etc.). Contracts of employment and/or terms and conditions of employment detail their employment obligations. There must be clear lines of accountability within the team.

Successful applicants are employed with an agreed induction/probation period which consists of regular 1-1 meetings with their line manager. A written induction programme is in place and is followed and signed off by supervisor and inductee.

Duty rotas must demonstrate that there are sufficient numbers of staff in various roles to meet Service Users' care and support needs and these take into consideration the layout of the building, activities being undertaken and any risks identified.

There must be a strategy for staff development and an effective training plan for all staff which are regularly reviewed as part of ongoing supervision arrangements. There must be an effective system in place for supervising staff practice. There must be formal 1-1 supervision at least 4 times a year; supplemented by other forms of supervision such as team meetings and group discussions. Appropriate records must be kept, including staff/group meeting minutes and a record of the discussions following a formal 1-1 supervision.

Staff must be fully conversant with the service's fire policies and procedures and ensure that people using the service know what to do in the event of fire. Notices and signs must be clearly sited and are legible. Staff must be trained in fire safety as soon after their appointment as is reasonably practicable and within three months.

The manager must take an active approach to managing risk which results in safe systems of work, safe practice, safe premises and an awareness of danger, liability and responsibility; these areas will be discussed with each person in relation to their personal plan. Risk assessments must be recorded and reviewed regularly.

There must be written policy and procedures in regard to the conditions under which physical interventions may be used, and staff must be fully trained and supported in the use of such interventions. If it is necessary to use physical interventions this will be written into the Service User's Personal Plan and records kept of any incidents that involve physical intervention. All persons must be supported appropriately after any episode of physical intervention.

If medicines are being administered by the staff, those responsible for administration must be knowledgeable and trained to do so. Current best practice guidance must be followed. Staff must be fully aware of the provider's systems for the giving of medication. Staff must know how to store and administer medication safely and in the way that suits the person best. A lockable storage facility must be available. Staff administering medication must be regularly monitored as part of their supervision regime; assessed around competency to administer annually and refresher training must be provided as necessary.

Whenever staff are involved in a financial transaction with a person attending to receive Services, this must be carefully recorded using systems and processes that are in accordance with the provider's policy and procedure.

Standard 7 – Safeguarding

Outcome – Service users must be safeguarded from abuse.

Written procedures for safeguarding vulnerable adults must be in accordance with Lancashire Adult Safeguarding Board guidelines

Procedures must detail safeguarding arrangements within the service and identify named and appropriately trained members of staff with whom concerns should be discussed.

The procedures for safeguarding vulnerable adults must be included in the induction programme for staff. The training must include as a minimum:

- Types of abuse
- Signs and symptoms of abuse
- Recognising abuse
- How to report abuse
- Knowledge of company policies and procedures
- Awareness of local multi – agency policy and procedure

All staff must attend appropriate safeguarding training and undertake a refresher every 3 years.

A written record must be kept of all safeguarding concerns and this must include details of the investigation, the outcome and action taken by the day time supports setting.

Employers must refer someone to the DBS if they are:

- Dismissed because they harmed a vulnerable person
- Dismissed or removed from working in a regulated activity because they may have harmed a vulnerable person otherwise
- Or were planning to dismiss them for either of these reasons, but the person resigned first

<https://www.gov.uk/government/collections/dbs-referrals-guidance--2>

A daily attendance register must be maintained which includes the arrival and departure time of Service Users and the Service Provider's Personnel.

Standard 8 – Complaints

Outcome – All complaints must be treated seriously and responded to promptly and effectively.

The Service Provider must operate a complaints procedure which meets the requirements of their complaints policy.

The complaints procedure must include a step by step guide to making a complaint and the timescales involved. The procedure must also include information of independent advocacy services.

A copy of the Complaints Policy and Procedure must be provided to Services Users and be displayed within the service (where appropriate in accessible format).

Written records of complaints must be kept and these must contain details of all communications with the complainant, the results of any investigations, outcomes and the action taken.

Standard 9 – Policies and Procedures

Outcome – The Service must have policies and procedures in place which ensure the quality of care and services.

The policies and procedures listed in Appendix 1 must be in place to ensure the service is run safely and in accordance with legislation and good practice.

All policies and procedures must be reviewed regularly (a minimum of every 3 years) and the review date must be clearly recorded.

All policies and procedures must be available for Service User and Service Provider's Personnel.

Standard 10 - Quality and Improvement

Outcome – The Services Provider must have systems in place to assess the quality of the Service and makes provision for improvement and development.

The Service Provider must have formal quality assurance systems in place and must use a range of tools to measure the quality of the service provided. This must include:

- The number and type of complaints received and any learning from these;
- Comments and compliments about the service from a range of stakeholders;
- Accident and incident reports;
- Observations of those who use the service;
- Views of staff and volunteers working at the service

The Service Provider will actively encourage feedback from Service Users about the quality of the service each month. The outcomes of the feedback should be displayed and positive action taken.

The Service Provider must produce an annual report which includes provider report, case studies, lists the success and challenges of the service and a written development/improvement plan based on the outcomes of the quality assessment exercise. This plan must be displayed and available to all.

The Service Provider will have annual review (this could be on site or a desktop review) with the Authority which will include a review of service against quality standards

The Service Provider must have in place systems to check and monitor staff activity to ensure compliance with the terms and conditions of their employment and the services policy and procedural requirements.

All records and documents must be maintained in good order, be legible, kept up to date and stored securely in line with Data Protection Legislation.

Appendix 1

Access to records	Recruitment and Selection
Accidents and incidents	Referral
Assessment, support planning and review	Risk management
Assessment of risk in the day time supports setting	Reporting incidents
Communication	Safeguarding
Complaints (must be prominently displayed)	Security of the day time supports setting
Confidentiality	Sickness
Capacity	Smoking
COSHH	Visitors
Disciplinary	Volunteers
Exclusion	Whistle blowing
Equality	
Fire	
First Aid	
Gifts to staff and donations to the service	
Health and Safety	
Induction and Training	
Infection Control	
Maintenance of equipment, plant, premises, ground and vehicles	
Management of keys	
Management of medicines – including administering or assisting with medication	
Management of records	
Managing aggression and behaviours which challenge the setting	
Menu planning	
Missing service users	
Moving and Handling	
Notifications to Registration and Inspection Unit	
Outings	
Planning and reviewing programmes and activities	
Quality improvement	
Record management (including retention)	