Adult Day Care

Minimum Standards

Registration & Inspection Unit

April 2017

Department of Health and Social Care
Rhyenn Slaynt as Kiarail y Theay
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**Introduction**

Adult day care can be provided in a variety of settings and is an important resource that offers both respite for carers and social interaction for those using the service. Day care 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.

The Regulation of Care Act 2013 is the primary legislation on the Isle of Man which governs the regulation of adult day care. It defines an adult day care centre 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
- Rehabilitation
- Respite; or
- Therapeutic activities

It does not include luncheon clubs and befriending services.

Day care 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 day care service is to encourage people to remain active members of the community.

These standards describe 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 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

**Advocate:** A person who represents the service recipient as if they were that person speaking. It is their job to ascertain the feelings, wishes, views of the person and make them known.

**Capacity and best interest decisions:** Having mental capacity means the ability to make decisions or to take actions affecting daily life. A person is unable to make a particular decision if they cannot do one or more of the following:

- Understand information given to them
- Retain the information long enough to be able to make the decision
- Weigh up the information available to make the decision
- Communicate their decision - this could be by talking, sign language, or muscle movements e.g. blinking etc.

Best interest decisions when a person has been assessed as lacking capacity then any action taken, or any decisions made for, on behalf of that person, must be made in their best interest.

**Disclosure and Barring (DBS):** A scheme that replaces Police checks and supplies checks on people working in the Health and Social Care sector.

**Notifications:**

1. They must notify R&I no later than 24 hours from the occurrence of:

(a) the death of any service recipient at the care service and the circumstances of the death;
(b) the outbreak of any notifiable disease (within the meaning of Part II of the Public Health Act 1990) at the care service;
(c) the serious injury or illness of any service recipient at the care service;
(d) the suffering of serious harm of any service recipient at the care service;
(e) any event at the care service affecting the well-being of any service recipient;
(f) any unexplained absence of a service recipient from a care service;
(g) any serious incident necessitating calling the police to the care service;
(h) the making of any allegation that a service recipient has committed an offence;
(i) any theft, burglary, fire or accident at the care service; and
(j) any serious staffing issues for example conduct of a member of staff at a care service that may be such that they may not be a suitable person to be involved in the care of service recipients;
(k) staffing levels;
(l) a near miss.

**Personal Plan:** Also known as: Care Plan; Plan of Care; Support Plan, Person Centred, is the document that contains an individual personal details and instructs the reader of the plan about how to deliver services that are tailored to that individual needs.

**Physical Intervention:** Used by staff to manage, restrain or stop people from harming themselves or others.
**Registered Manager:** Is the person in day to day charge of the setting. The manager may be the same person as the responsible person if that provider is an individual and in limited circumstances may also be the same person as the responsible person of a corporate body. If not the same person, the manager will be recruited by the registered provider but will be registered by the Department and must meet the registration criteria set out in the Regulation of Care Act 2013, the Registration of Care (Registration) Regulations 2013 and in these Standards. A manager must have appropriate qualifications and experience.

**Responsible person:** A person deemed suitable to provide a care service. They may be the registered provider or the registered manager. Each registered person has responsibility for ensuring that the requirements of the Act, Regulations and Standards are met. A company, committee or other group may be the registered person and they will be required to nominate a responsible person to speak on their behalf. The responsible person also has to be vetted by the Department and has specific obligations within the Regulation of Care Act 2013 and Regulation of Care (Care Services) Regulations 2013.

**Risk Assessments:** Written documents that form part of the service'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 lays obligations and responsibilities on the registered persons and the staff at the service to keep people safe and follow agreed procedures where abuse is suspected or alleged.
Standards

Standard 1 Informing and Deciding

<table>
<thead>
<tr>
<th>Outcome – Prospective users of the Day service have all the information needed to help make a decision about using the service.</th>
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</table>

1.1 The service must have in place a Statement of Purpose about the Adult Day Care Service. This describes the overall aims, objectives and philosophy of the service and includes the relevant information from the list set out in Schedule 3 of the Registration Regulations. The information must be updated regularly to ensure accuracy.

1.2 A service user guide or handbook must be available which contains information about the Care Service and:

- A summary of the Statement of Purpose
- The location and description of the service
- The types of activities provided
- The fees or charges payable and required payment method for services, facilities or activities
- Any transport provided and cost occurred
- The general terms of attendance at the Day Care service and any trial period and its review timescale
- The service user’s rights and responsibilities whilst using the service and the consequences of breaching these
- The referral process

1.3 The service user must be enabled to visit the Day Service prior to them, or their named representative, signing a contract.

Standard 2 Assessment of Need

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<tr>
<th>Outcome – Each service user must have an up to date assessment of their needs with regard to the service provided</th>
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2.1 The Adult Day Care Service must undertake an assessment of the individual service user’s needs prior to offering a place to ensure their needs can be met by the provision.

2.2 The service user, their family and other professionals (as appropriate) must be involved in the assessment process.

2.3 The assessment must be recorded and with the service user (wherever possible) utilised to create the individual care support plan.
Standard 3 Contract/Agreement

**Outcome – Each service user must have a contract/agreement detailing the services to be provided.**

3.1 Each service user must be provided with an individual written contract/agreement which sets out:

- The care 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

3.2 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.

3.3 The contract/agreement must be in place prior to the service user starting at the Adult Day Care Service. If this is not possible it must be in place within the first five days of attending.

3.4 Where practicable the service user must be given written notice of all changes to the contract/agreement and these are agreed in writing by the service user.

3.5 The service user must be given at least 28 days advance notice of any increase or variation in the fees or charges.

Standard 4 Service User Plan

**Outcome – Each service user must have an up to date comprehensive care support plan.**

4.1 The Adult Care Service must have in place a comprehensive care support plan for each service user.

4.2 The service user must be involved in creating their care 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.

4.3 The service user plan must identify all areas of support to be met by the Adult Day Care Service and how this is to be achieved. It must include information and decisions about:

- What they prefer to be called
- Any specialist equipment required and how this will be provided
- Any communication needs and how these will be met
- Who should be involved in the care plan reviews
- Any risk assessments
4.4 The service user plan must be reviewed regularly with the individual. The review dates must be recorded (a minimum of annually or when a change is identified).

4.5 The service user or anyone legally acting on their behalf must sign their care plan and have access to a copy of the plan. Where this is not achievable the reasons must be recorded.

**Standard 5 Activities**

| Outcome – The day care service must offer a structured programme of varied activities and events related to its statement of purpose. |

5.1 The programme must provide opportunities for both group and individual activities. It must be flexible and allow for service user choice.

5.2 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.

5.3 Activities, both in-house and community based must be provided in the most appropriate setting and facilitate community inclusion. The duration of the activities must take account of the needs and abilities of the service users participating.

5.4 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.

5.5 Where an activity is provided by a person contracted in to do so, the registered manager must:

- Obtain evidence from the person and monitor the activity to confirm that the person has the necessary skills to provide the activity.
- Staff must inform the person 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 person providing the activity.

5.6 The programme of activities must be displayed in a suitable format and in an appropriate location so that service users know what is scheduled.

**Standard 6 Environment**

| Outcome – The Environment must be safe, well maintained and remain suitable. |

6.1 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 day care services.

6.2 The design of the building and its fittings must help maintain and increase people’s independence.
6.3 The premises must be kept clean, well maintained and in a suitable state of repair and decoration.

6.4 The Adult Day Care Centre must have a written Fire Risk Assessment that is compliant with the Isle of Man Fire Safety guidance and instructions.

6.5 Staff must be fully conversant with the services fire policies and procedures and ensure that people using the service know what do in the event of fire. Notices and signs must be clearly sited and are legible.

6.6 Staff must be trained in fire safety as soon after their appointment as is reasonably practicable and within three months.

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

6.8 The provider must have the appropriate Public and Employer Liability Insurance and the certificates must be prominently displayed.

6.9 The Electricity at Work Regulations 1989 must be complied with. A certificate of conformity/safety must be available. Portable Electrical Appliance tests must be carried out and recorded a minimum of every 2 years.

6.10 Regulation of water temperatures and design solutions to control the risk of exposure to Legionella micro-organisms (water stored in tanks at 60 degrees c) and risk from hot water temperatures (not exceeding 44 degrees C for baths and 41 degrees C for showers and wash hand basins) must be carried out in keeping with requirements and guidance and recorded (Water Supply (Water Fittings) Regulations 1999).

6.11 There is a range of appropriate recreational and craft equipment inside the building and that wherever possible the grounds around the building will be used for outdoor activities. People will be supported in accessing what they need to engage in such activities.

6.12 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.

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

6.14 The 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.
6.15 Rooms used for the day service must allow for a minimum of 4.5 square metres per service user (3 square metres for computer suites). Where services users have complex needs the minimum is 7.5 square metres per service user.

6.16 Vehicles used as part of the day care service must be maintained and regularly checked. All staff that drive vehicles must have their driving licences checked and details recorded on a regular basis (minimum annually). Appropriate insurances must be in place.

6.17 There must be adequate facilities for the staff and service users to store their personal items and at least one office.

**Standard 7 Management and Staffing**

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<tr>
<th>Outcome – Good quality support and care must be provided by management and staff whose professional training, qualifications and expertise enables them to meet the service users’ needs.</th>
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7.1 There must be policies and procedures in place which cover all requirements that apply to the type of service being provided – see appendix for list of required policies and procedures.

7.2 The registered manager must be qualified to:

- QCF level 5 Diploma in Leadership for Health and Social Care and Children and Young People Services or equivalent.

*From 1st April 2018 managers will not be registered unless they have gained or are in the process of gaining the QCF level 5 in Leadership for Health and Social Care and Children and Young people Services, or equivalent.*

7.3 There must be clear lines of accountability within the team. People forming part of the management team and deputising for the registered manager must be appropriately qualified to QCF level 3 or equivalent.

7.4 Staff providing support and care must have the knowledge and skills to care for people attending the service; all new staff must be supported to develop the essential knowledge and skills as part of a planned training programme. The programme contains a commitment to have 50% of its care/support staff trained to QCF (Quality Care Framework) Diploma level 2/3 standards in health and social care or equivalent. The training programme must make provision for refresher training to take place.

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

- Application form
- Taking up 2 references (one of whom should be the last/current employer)
- Social services suitability checks
- Enhanced DBS checks – These must be renewed for all staff a minimum of every 3 years unless the update service has been selected
7.6 Volunteers who work in the day care service must be familiar with its policies and procedures and receive all relevant training to help them support the day care service.

7.7 Staff 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.

7.8 Successful applicants are employed under a minimum 3 month induction/probation period which consists of regular 1-1 meetings within their line manager. A written induction programme is in place and is followed and signed off by supervisor and inductee.

Included with each employee's induction programme there must be evidence that the care certificate standards (skills for care), or equivalent have been considered and used appropriately.

7.9 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.

7.10 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.

7.11 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.

7.12 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 personal plan and records kept of any incidents that involve physical intervention. All persons must be supported appropriately after any episode of physical intervention.

7.13 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. 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.

7.14 Whenever staff are involved in a financial transaction with a person attending the day care

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service, this must be carefully recorded using systems and processes that are in accordance with the provider’s policy and procedure.

**Standard 8 – Safeguarding**

<table>
<thead>
<tr>
<th>Outcome – Service users must be safeguarded from abuse.</th>
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<tbody>
<tr>
<td>8.1 Written procedures for safeguarding vulnerable adults must be in accordance with the Isle of Man Safeguarding procedures. <a href="http://www.isleofmanscb.im/professionals_additional_guidance_and_procedures.html">http://www.isleofmanscb.im/professionals_additional_guidance_and_procedures.html</a></td>
</tr>
<tr>
<td>8.2 Procedures must detail safeguarding liaison arrangements within the service and identify named and appropriately trained members of staff with whom concerns should be discussed.</td>
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<tr>
<td>8.3 The procedures for safeguarding vulnerable adults must be included in the induction programme for staff. All staff must attend appropriate safeguarding training and undertake a refresher every 3 years.</td>
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<tr>
<td>8.4 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 care setting.</td>
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<tr>
<td>8.5 Employers must refer someone to the Disclosure and Barring Service if they are:</td>
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<tr>
<td>- Dismissed because they harmed a vulnerable person</td>
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<tr>
<td>- Dismissed or removed from working in a regulated activity because they may have harmed a vulnerable person otherwise</td>
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<tr>
<td>- Or were planning to dismiss them for either of these reasons, but the person resigned first</td>
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<td>8.6 A daily attendance register must be maintained which includes the arrival and departure time of service users and staff.</td>
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**Standard 9 – Complaints**

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<tr>
<th>Outcome – All complaints must be treated seriously and responded to promptly and effectively.</th>
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<tbody>
<tr>
<td>9.1 The day care service must operate a complaints procedure which meets the requirements of their complaints policy.</td>
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<tr>
<td>9.2 The complaints procedure must include a step by step guide to making a complaint, the timescales involved, an outline of the role and function of the Registration and Inspection Unit in dealing with regulated services and the contact details for the Registration and Inspection Unit. The procedure must also include information of independent advocacy services.</td>
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<tr>
<td>9.3 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).</td>
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</table>
9.4 Written records of complaints must be kept and these must contain details of all communications with the complainant, the results of any investigations and the action taken.

**Standard 10 – Policies and Procedures**

<table>
<thead>
<tr>
<th>Outcome – The service must have policies and procedures in place which ensure the quality of care and services.</th>
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<tr>
<td>10.1 The policies and procedures as listed in Appendix 1 must be in place to ensure the service is run safely and in accordance with legislation and good practice.</td>
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<tr>
<td>10.2 All policies and procedures must be reviewed regularly (a minimum of every 3 years) and the review date must be clearly recorded.</td>
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<tr>
<td>10.3 All policies and procedures must be available for staff and service users.</td>
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**Standard 11 Quality and Improvement**

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<tr>
<th>Outcome – The service must have systems in place to assess the quality of the service and makes provision for improvement and development.</th>
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<tr>
<td>11.1 The Adult Day Care Centre must have formal quality assurance systems in place and the registered person must use a range of tools to measure the quality of the service provided. This must include:</td>
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<td>• the number and type of complaints received and any learning from these;</td>
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<td>• comments and compliments about the service from a range of stakeholders;</td>
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<tr>
<td>• accident and incident reports;</td>
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<td>• observations of those who use the service;</td>
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<td>• views of staff and volunteers working at the service;</td>
</tr>
<tr>
<td>11.2 The Adult Day Care Centre must produce an annual report which lists the success 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.</td>
</tr>
<tr>
<td>11.3 The registered person 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.</td>
</tr>
<tr>
<td>11.4 All records and documents must be maintained in good order, be legible, kept up to date and stored securely in line with data protection.</td>
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Appendix 1

Access to records
Accidents and incidents
Assessment, care planning and review
Assessment of risk in the day care setting
Communication
Complaints (must be prominently displayed)
Confidentiality
Capacity
COSHH
Disciplinary
Exclusion
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)
Recruitment and Selection
Referral
Risk management
Reporting incidents
Safeguarding (including procedures to be followed when an allegation is made against staff or the registered person)
Security of the day care setting
Sickness
Smoking
Visitors
Volunteers
Whistle blowing
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