

Cardiff Council Social Services



Service Specification for the Provision of Personal Domiciliary Care and Sessional Support for Children and Young People in Cardiff

This document should be read in conjunction with:

Delivery of Children's Domiciliary Care Terms and Conditions

Part 1 – Introduction

1.1 Introduction and Background

- 1.1.2 Cardiff Council is committed to supporting children and young people with additional needs to remain and be supported within their Family Home as long as it is safe and practicable to do so.
- 1.1.3 Domiciliary Care, often referred to as Care at Home, supports those with assessed needs to receive care and support delivered within their home environment. The support provided by domiciliary care workers can include household tasks, personal care and providing support and respite for carers and family members.
- 1.1.4 Since 2014, Domiciliary Care for Adults has been commissioned via an Accredited Provider List (APL), which is akin to a Dynamic Purchasing System. Domiciliary Care and sessional support for children and their families provided by Domiciliary Care agencies has previously been commissioned outside of this arrangement. However, going forward, it is intended that domiciliary care and sessional support for children, young people and their families will be commissioned and monitored via a new Dynamic Purchasing System (DPS) which covers both adults and children and young people's care and support.
- 1.1.5 This service specification describes the service that will be provided by all providers on the new Cardiff DPS for local children, young people and their families, and will outline the minimal expectation on all Providers and how this will be monitored

1.2 Vision

- 1.2.2 Cardiff Council has worked with existing providers to co-produce a **vision**, outlining what both the Council and providers wish to achieve through the delivery of domiciliary care in the city of Cardiff. The intention of the **vision** is that all decisions made in relation to the future commissioning of domiciliary care are aligned with what key stakeholders hope to achieve for individuals who receive care at home. The **vision** provides a mechanism to ensure everyone is working towards the same outcomes, and is as follows:

We will identify preventative measures and where necessary develop solutions that enable those in need of care and support, and their families, to be safe and as independent as possible. This will include steps to support people to live within their local community, as close as possible to home, family and friends where appropriate.

1.3 Service Values and Principles

1.3.2 Domiciliary Care and sessional support provision will allow children, young people and families of assessed need to easily access care and support at home that offers a person centered package and takes the needs of the whole person and family into consideration. Provision will focus on identifying and building on the family's strengths and resources to support sustainable positive impacts on the young person and their family.

1.3.3 The provision of domiciliary care and sessional support will:

- Support children and young people to be safely and effectively supported within their own home, supporting a de-escalation of future needs.
- Contribute to helping families achieve their outcomes by focusing on strength based practice
- Promote independence, social inclusion and overall wellbeing
- Consider the needs, views and wishes of the individuals receiving care, and their families, meaning care is, where possible, co-produced.
- Safeguard individuals by protecting them from harm, abuse and/or neglect
- Deliver care that is flexible to the changing needs and wishes of the individual and their family
- Offer best value for the City of Cardiff, whilst ensuring long term stability of the sector

1.4 Cardiff – A Local Context

1.4.2 Cardiff Council is committed to the delivery of its **Capital Ambition** to support individuals to live fulfilled, independent lives within their communities, of which this new model supports. This will be achieved in partnership with statutory, voluntary and community sector partners, as well as local communities, in order to make a difference.

1.4.3 Cardiff Children's Services Strategy (2019-2022) sets out the local strategic context in which Children's Services operate in Cardiff. The vision of this strategy highlights the 'Think Family' approach which looks at the family as a whole and co-ordinates support across public services, tailored to each family's needs and strengths. The new commissioning model for domiciliary care and sessional support for children and young people will feed into this approach.

1.4.4 Within this strategy, Children's Service have set themselves 25 key challenges. The following will be supported via the new DPS:

- **The Child and young person's voice is heard**
- **Partnership with parents is always evident**
- **Partners are clear about thresholds and the duties placed on Children's Services**

- **Manage and reduce the increasing demand on Social Services**
- **Manage the increasing complexity of cases and caseloads**
- **Safely reduce the rising number of children and young people looked after**

1.4.5 Cardiff Council currently commissions approximately 130 packages of domiciliary care at any one time with 7 independent sector care providers. Please note, this figure does not include any Direct Payment arrangements as this is secured via an alternative mechanism. Domiciliary Care and Sessional Support for children and young people is primarily commissioned for children supported by the Child Health and Disability (CHAD) team. It is the intention of the new DPS to expand this offer to other children, young people and families supported by Children's Services, such as those identified as on 'the edge of care'. As such, it is expected the level of commissioning for children and young people will increase over the length of the new DPS.

1.4.6 A local ambition of Cardiff Children's Services is to open an Interventions Hub which will provide Social Work teams with a skilled, holistic, in-house intervention workforce which will work with identified families as early as possible to prevent escalation of needs and concern. The hub will be flexible and operate outside of normal working hours. It is anticipated that this hub will be open when the new DPS for Domiciliary Care and Sessional Support goes live. It is anticipated that any child, young person / family referred to receive Domiciliary Care / Sessional Support from Children's Services will be referred to and be supported by the Interventions Hub in the first instance. However, if long term or additional support is identified via a comprehensive assessment process, a referral will be made to a funding panel to approve tendering such support to the external Domiciliary Care and Sessional Support market.

1.4.7 Domiciliary Care and Sessional Support for children, young people and families are generally commissioned on the following basis:

- Ongoing, long term support
- One – off support
- Term Time Only
- School Holidays Only
- Overnight Support

1.5 Welsh Context – The Law

1.5.2 The two main pieces of legislation that are reflected in this service specification are the Social Services and Well-being (Wales) Act 2014, and the Well-being of Future Generations (Wales) Act 2015.

1.5.3 **The Social Services and Well-being (Wales) Act 2014**

The Act imposes duties on local authorities, health boards and Welsh ministers that requires them to work to promote the well-being of those who need care and support, or carers who need support.

The Social Services and Well-being (Wales) Act 2014 outlines key duties to ensure:

- People have control over what support they need, making decisions about their care and support as an equal partner.
- New proportionate assessment focuses on the individual
- Carers have an equal right to assessment
- Easy access to information and advice is available to all
- Powers to safeguard people are stronger
- A preventative approach to meeting care and support needs is practised
- Local authorities and health boards come together in new statutory partnerships to drive integration, innovation and service change

The principles of the Act are:

- To support people who have care and support needs to achieve well-being.
- People are at the heart of the new system by giving them an equal say in the support they receive.
- Partnership and co-operation drive service delivery.
- Services will promote the prevention of escalating need and the right help is available at the right time.

The Social Services and Well-Being (Wales) Act 2014 is a landmark piece of legislation for social care in Wales it became law in 2014 and came into force on 6 April 2016. It modernises and brings together different pieces of social care law.

This new legal framework consists of three elements – the **Act** itself, which is already in place; the **Regulations**, which provide greater detail about the requirements of the Act; and the **Codes of Practice**, which give practical guidance about how it should be implemented. The Act covers **adults** (people aged 18 or over), **children** (people under the age of 18) and **carers** (adults or children who provide or intend to provide care and support).

The Act consists of 11 parts, is built on five principles and defines the people it affects. It is useful to think of these as the '3 Ps':

- People it affects
- Parts within the Act
- Principles throughout the Act



1.5.4 The Regulation and Inspection of Social Care (Wales) Act

1.5.5 The Regulations and Inspection of Social Care (Wales) Act (often referred to as RISCA) became law on 18 January 2016.

1.5.6 The act aims to build on the Social Services and Wellbeing Act and places the quality of services and improvement at the heart of regulation. The act aims to strengthen protection for those who need it, and creates a regulatory system that is centered around people who need care and support, and the social care workforce.

1.5.7 RISCA introduced the following main changes to Social Care practice in Wales:

- Establishing Social Care Wales
- Regulation of the social care workforce
- Regulation of social care service providers
- New approach to the inspection of local authorities and how they report
- Requirements for local authorities and Welsh Ministers in terms of market stability and oversight

1.5.8 The following five principles underpin RISCA:

- Reflecting the changes brought about by the Social Services and Wellbeing (Wales) Act 2014
- Putting people at the centre of their care and support
- Development a coherent and consistent Welsh approach
- Responding quickly and effectively to new models of service and any concerns over the quality of care and support

1.5.9 **The Well-being of Future Generations (Wales) Act 2015**

1.5.10 The Well-being of Future Generations (Wales) Act came into force on 1 April 2016, and focuses on improving the social, economic, environmental and cultural well-being of Wales. The aim of the Act is to help create a Wales that we all want to live in, now and in the future

1.5.11 The Act identifies seven well-being goals ('the goals') which provide a shared vision for public bodies to work towards. The seven goals are as follows:

- A prosperous Wales
- A Resilient Wales
- A Healthier Wales
- A more Equal Wales
- A Wales of Cohesive Communities
- A Wales of vibrant culture and thriving Welsh Language
- A globally responsible Wales

1.5.12 The Act also places a duty on Public bodies (including Local Authorities and Local Health Boards) to make sure that when making their decisions they take into account the impact they could have on people living their lives in Wales in the future.

The Act requires them to:

- Work together better
- Involve people reflecting the diversity of our communities
- Look to the long term as well as focusing on the now
Take action to try and stop problems getting worse – or even stop them happening

1.5.13 Further information about the Act can be found at <https://www.futuregenerationswales.about-us/future-generations-act/>

1.5.14 **Ethical Employment**

1.5.15 The 'Ethical Employment in Supply Chains' Code of Practice was launched in 2017 by the Welsh Government. It aims to support the development of more ethical supply chains delivering contracts for the Welsh Public sector. All organisations are encouraged to sign up to the Code and businesses in public sector supply chains are expected to adopt it. The Code is to ensure that workers in public sector supply chains are employed ethically and in compliance with both the letter and spirit of UK, EU and international laws. The Code has

12 commitments which cover issues shown in the diagram.



1.6 Welsh Language

- 1.6.2 During the Contract and the provision of the Services, all Providers shall comply with the requirements of the Authority's Welsh Language Scheme; and the Welsh Language (Wales) Measure 2011 and in so far as it relates to the provision of Public Services.
- 1.6.3 The Providers must adhere to the principles of the Welsh Government's 'More than Just Words' strategy. Ensuring the safety, dignity and respect of Welsh speakers is at the heart of providing health and social services in Welsh. It is not just about complying with legal requirements and maintaining professional standards; it is also about improving the quality of care and meeting the language need of people and providing good public services that focus on the individual. More than just words...., the Welsh Government's original strategic framework for Welsh language services in health, social services and social care, launched in 2012, has led to a number of improvements which helped ensure Welsh speakers receive health, social services and social care services in their first language. This has been achieved by making the best use of the existing skills and resources across our NHS and social services. The Strategy and related follow-on strategic frameworks support a greater level of recognition among service providers that the use of the Welsh language is not just a matter of choice but also a matter of need.
- 1.6.4 Where a Service User has indicated a preference to receive information and provision of their care through the medium of Welsh, it must be demonstrated that every effort has been made to meet that need.

- 1.6.5 Staff training should include language sensitivity and its impact on care delivery, with particular reference to the Welsh Government's 'More than Just Words' strategy.

Part 2 – Service Delivery

2.1 Overall aim and purpose of the provision

2.1.1 The Provider(s) will assist the Council to meet its statutory obligations to people with assessed support needs, to ensure they are protected and have access to appropriate social care through the provision of a good quality care and support service

2.1.2 In delivering services to the residents of Cardiff, Providers must be able to demonstrate that they comply with the following principles:

- Supporting young people and families to live in a safe and loving home environment
- Support the delivery of SMART outcomes as identified in the child/ young person care plan
- Respecting children/families and their way of life, particularly with regard to ethnic, religious and cultural matters;
- Involving children/families in all decisions which affect the delivery of services and be responsive to their informed choices and wishes;
- Accepting a wide range of home conditions, subject to risk assessment;
- Maintaining and developing children, young people /families dignity in all situations;
- Taking account of family members of the children within the boundary of the Care and support plan;
- Giving assistance in a safe, practical, reliable manner and in ways acceptable to children/families which maintains families in control of the manner of the delivery of their care, as appropriate;
- Maintaining and supporting current care and support networks;
- Maintaining and enhancing children/families confidentiality;

- Avoiding any discriminatory practices, which includes age, disability, gender, language, race, religion and sexual orientation;
- Complying with relevant equality legislation.
- Observing Welsh Government Guidance in relation to Covid -19 to appropriately safeguard individuals receiving care and the Care Workers who provide care and support.

2.2 General Provisions

2.2.1 Providers on the Cardiff Domiciliary Care DPS (Children's Lot) will be required to support and provide care for at least one of the following population groups.

- Children and young people with disabilities (under 18 years)
- Children, young people and families known to Children's Social Services (children to be under 18 years)

2.2.2 The Providers will work collaboratively with a range of partners and stakeholders including the Council's Social Workers, the Council's Contracts Officers, and a range of health providers. The Providers should work constructively with these partners for the benefit of the people who use the service.

2.2.3 The Providers will ensure that all appropriate employees are fully trained to support children, young people and their families with a variety of care and support needs. Staff should also be aware of relevant legislation, understanding the local services, processes, procedures and opportunities to ensure effective outcomes for those who receive the care and support service.

2.2.4 The Providers will ensure that the Service delivers person focussed practical and emotional support. The Providers must ensure that the service works collaboratively with each family within the remit of the care and support plan to best meet their needs, which is updated as they progress and which is based on their Assessment.

2.2.5 The service provided must meet outcomes specified within the Care / Outcomes Plans including any health care guidance and must respond to the individuals needs as assessed by the Social Worker. However, in order for individuals to live as independently and a fulfilled life as is possible the service is to be person centred and outcome focused. Families must be fully involved in how the service is provided on a day-to-day basis.

2.2.6 The Providers will be required to work closely with the Social Workers and if applicable, health teams and/or the Interventions Hub, to ensure the delivery of

any identified opportunities that will benefit the children and families at home or in the community.

2.2.7 The Providers are required to ensure that families are proactively supported in accessing their local community Hubs and the Dewis Cymru website whereby they are in a position to access services or information such as:

- Independent financial and budgeting advice
- Getting to know the community they live in and meet people who are living in their community
- Joining in with community groups that may feed in to individuals chosen personal activities or lifestyle interests etc.
- Accessing local/new services
- Finding out about local events

2.2.8 It is a local ambition that families are appropriately linked into networks of family, friends and local services to get the right support they need, and at the right time. This will reduce the likelihood of long term reliance on public services, and empowers families to sustain the outcomes achieved independently. Domiciliary Care agencies on the Cardiff DPS will contribute to this ambition via delivery in line with this model and service specification.

2.3 Core Requirements of Service Delivery

2.3.1 All Care and Support delivered by Domiciliary Care Services on the Cardiff DPS will be directed by the eligible needs identified via a Social Worker assessment, and the associated Care and Support Plan. A Pen Picture and a document outlining the expected outcomes of this package will be shared with potential providers when a tender opportunity is advertised so Providers can ensure and evidence how they can meet the identified need of each child, young person and their family.

2.3.2 Care Services

The services to be delivered through the contract comprise of:

- Personal Care Services
- Non-Personal Care Support Services
- Night Care Services
- Services to Carers

Tasks for the above services would include but not be confined to those listed in **Appendix A**

2.3.3 Children/ young people with disabilities (under 18 years)

The service outcomes and key activities for this group is listed below. Please note, this is an indication of the type of activities agencies on the DPS will be expected to deliver, and is not exhaustive.

Service impacts and outcomes	Key Activities and Support
Maintain or reduce children and young people's needs and support families overall	<ul style="list-style-type: none"> • Support with school holidays, after school clubs, respite for families • Personal care – washing and getting children ready for school, taking children to school and back • Helping to embed routines • Support with meals and preparation • House work • Identify and support access to groups and activities for children and their siblings • Support to manage behavioural and emotional needs of children/young people • Support individuals / families to access / attend appointments as required to support their wellbeing • Enhancing and supporting children, young people and families to be linked in and supported in their local communities • Support long term, sustainable change and support in families
Maintain children and young people's needs and support families	
Crisis response for behavioural issues that help stabilise and provide short term care and support	

2.3.4 Children, young people and Families known to Children's Social Services (children under 18 years)

The service outcomes and key activities for this group is listed below. Please note, this is an indication of the type of activities agencies on the DPS will be expected to deliver, and is not exhaustive.

Service impacts and outcomes	Key Activities and Support
Maintenance requirements to enable families to stabilise for a period of time enabling children/young people to remain at home	<ul style="list-style-type: none"> • Domestic Support within the Home • Respite support via trips out and activity based sessions linked with community groups and offer • Budget management for families • Family support with routines • Meal preparation and nutrition • House work • Support to manage behavioural and emotional needs of children/young people • Support individuals / families to access / attend appointments as required to support their wellbeing • Enhancing and supporting children, young people and families to be linked in and supported in their local
Keeping individuals safe and stable	
Providing practical skills in the home	

	communities <ul style="list-style-type: none"> • Support long term, sustainable change and support in families
--	--

2.4 Strength Based Approach / Signs of Safety Model

2.4.1 The Council is implementing a strength based approach to all aspects of its social work practice and decision making, and this will be reflected within the service delivery and contractual arrangements with Domiciliary Care providers on the Cardiff Domiciliary Care DPS.

2.4.2 In Children's Services, this approach is embedded within the Signs of Safety Model which asks the following questions:

- What are we worried about?
- What's working well?
- What needs to happen?

2.4.3 Strengths-based practice is a collaborative process between the person supported by services and those supporting them, allowing them to work together to determine an outcome that draws on the person's strengths and assets.

2.4.4 As such, it concerns itself principally with the quality of the relationship that develops between those providing and those being supported, as well as the elements that the person seeking support brings to the process.

2.4.5 Working in a collaborative way promotes the opportunity for individuals to be co-producers of services and support rather than solely consumers of those services

2.4.6 A strengths-based approach to care, support and inclusion allows professionals to look first at what people can do with their skills and their resources and what can the people around them do in their relationships and their communities. Families need to be seen as more than just their care needs – they need to be experts and in charge of their own lives. This model considers what a young person / family can do, their available networks of support and what is available to them within the community in which they live to support positive and long term stability.

2.4.7 The Council Practitioners and Provider Care Workers will work in collaboration with individuals to establish and acknowledge the capacity, skills, knowledge, network and potential of both the individual and the local community. This will form the basis of the Assessments and Care and Support Plan for each individual receiving care from a Domiciliary Care agency.

2.5 Key Partners and Partnership Working

- 2.5.1 In order to deliver a holistic and strength based approach to service user needs and agreed outcomes, effective partnership relationships and links with other services and groups must be in place and utilised.
- 2.5.2 Key partnership working will be demonstrated with a wide range of services and groups. The providers will be expected to build links and professional relationships with the following as a minimum, and within the specific localities they deliver care:
- GP surgeries and other health colleagues, including continuing care
 - Community groups such as local churches, support groups, clubs and support offers
 - Third sector providers that meet the needs of the children / young people / families / carers
- 2.5.3 All Providers must have excellent working relationships with Cardiff Council, both via the Contracts Officers and with the Social Work teams the services are based in.
- 2.5.4 In addition, the Children's Services Interventions Hub (anticipated to be open by the time the Domiciliary Care DPS goes live), and associated referral panel will be a key partner of Domiciliary Care agencies and there must be effective working relationships between the teams including, but not limited to:
- Receipt and discussion of referrals and successful service agreements
 - Warm handovers between Social Workers / Staff at the Interventions Hub and the external Provider to support efficient and safe transfer of care between the teams
 - Collaborative care plan creation, including the service user, as per the Tripartite Conversation detailed in **section 2.7.4**
- 2.5.5 Cardiff Council will host quarterly Provider Forums for all Domiciliary Care agencies on the DPS. The aim of the forums is to update the sector on any relevant information, research, legislation that impacts service delivery as well as an opportunity for feedback or queries for both the Council and Providers. It is also an opportunity for the Council and Providers to work in collaboration regarding overall service development.
- 2.5.6 Providers on the Cardiff Domiciliary Care DPS are expected to attend these forums. Frequent non-attendance of such forums will be raised within provider performance arrangements via the Contracts team.

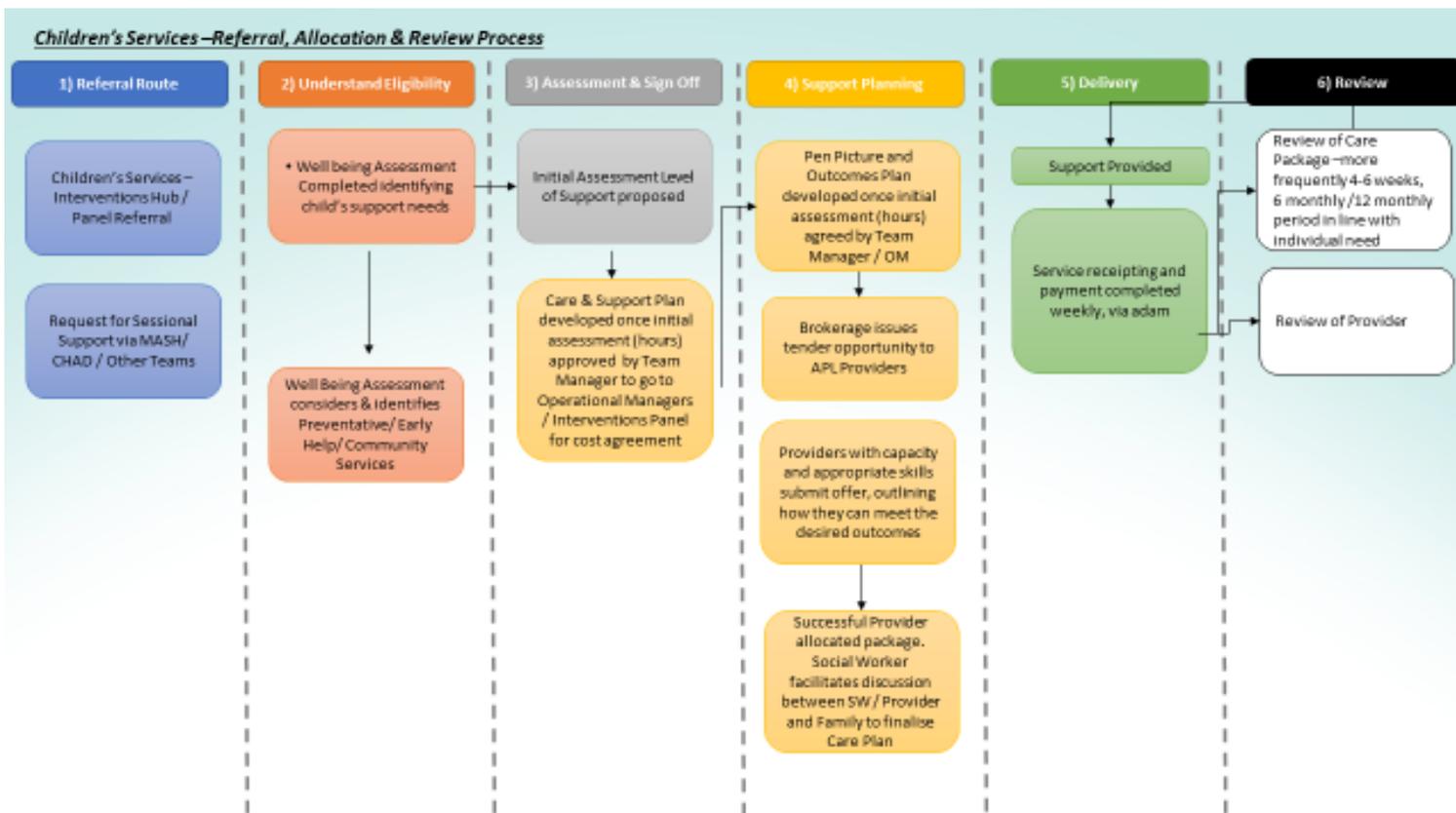
2.5.7 Providers are expected to respond to any communication requested by the Council that may support service development, including any questionnaires or surveys.

2.5.8 Providers must also have effective working relationships with the Cardiff and Vale University Health Board

2.5.9 The Dewis Cymru website is an online platform which details a range of information regarding health and social care based services for adults and children across Wales. Providers on the Cardiff Domiciliary Care DPS must be detailed on this website and ensure that details of service delivery are kept up to date and relevant. This must be reviewed by Domiciliary Care management on at least an annual basis.

2.6 Service Delivery Journey

2.6.1 The below diagram outlines the new model of delivery for Domiciliary Care and Sessional Support for children and young people . The following sections of the specification will take each section and outline further detail for potential



providers.

2.7 Referral Route for Packages of Care

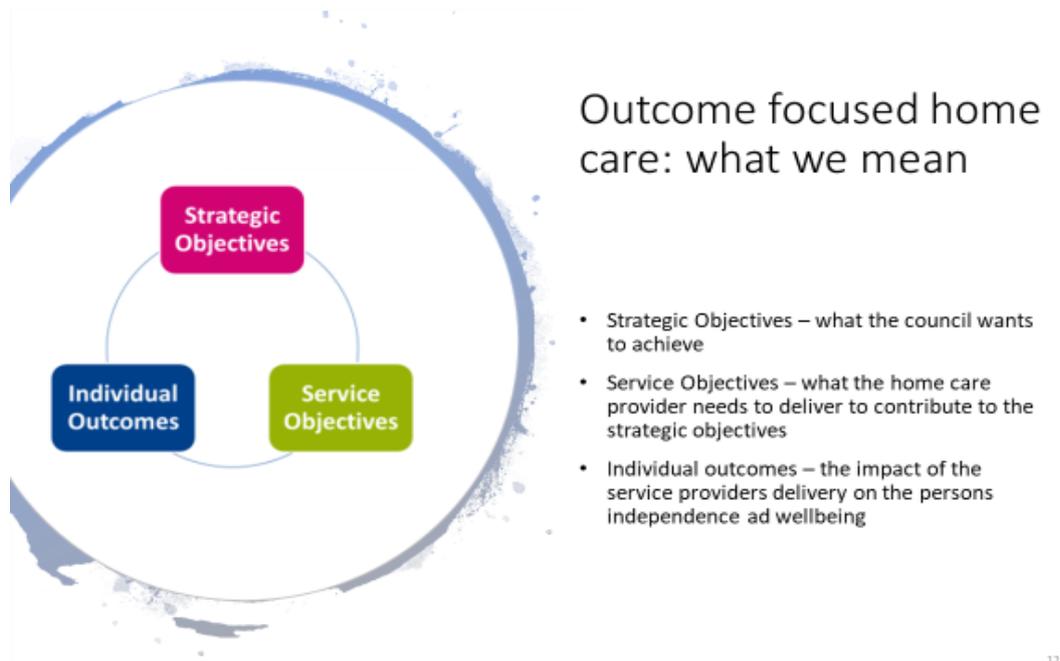
- 2.7.1 Following the completion of an individualised needs assessment by Cardiff Council Social Work team, senior management will review and approve if the care required will be best met by an externally commissioned Provider.
- 2.7.2 If the referral is coming via the Interventions Hub, the request for the care to be met by a commissioned provider will be presented for approval at a funding panel. It is more likely referrals for the 'Children's and Families known to Children's Social Services' will be made this way, whereas referrals from the CHAD team may still be approved on an individual basis via the Operational Manager.
- 2.7.3 Individuals/families with an identified and eligible need for domiciliary care/sessional support will then be referred to Cardiff Council's Brokerage team to advertise the requirement via the *adam* platform.
- 2.7.4 Following the award of a package of care to a provider based on the above criteria, the successful Provider will be invited to a multiagency meeting with the individual and Cardiff Council Social Work team for a 'tripartite conversation'. This conversation will review the initial Support Plan, and allow the Successful Provider and the individual who will receive the care to contribute to the final and agreed plan which will meet the individual's eligible needs. This tripartite conversation would ideally occur face to face, but there may be circumstances where this is required to happen remotely (e.g. impact of the COVID 19 pandemic). This tripartite conversation must occur within 5 – 10 working days of the contract award to the successful provider. The introduction of the Tripartite Conversation will be included in the overall implementation plan for the new model and will be rolled out over the first 6 month period of the contract.

2.8 Review

- 2.8.1 As per the regulations, the care and support plan must be reviewed by the Provider as and when required, but at least every three months.
- 2.8.2 If the provider believes changes are required to the care and support being delivered outside of the planned reviews, this must be approved by Children's Services prior to adjusting service delivery. This must be recorded in writing by the Provider to the Case Manager, followed by a multi-agency meeting to discuss the care delivery ahead of any planned review date. A Change Order will be submitted via the *adam HTT Ltd* system. Only on receipt of a change order can a Provider adjust service delivery.
- 2.8.3 If additional support is required immediately and out of hours, the Provider is required to contact Cardiff Council's Emergency Duty Team at the earliest opportunity to request this.

Part 3 – Outcomes

3.1 Outcomes



3.1.1 An outcome can be described as the impact a service has on the person. Outcome focused services are fundamentally person centred in approach, recognising that each person is unique and will have different needs and requirements. Cardiff Council has identified a range of outcomes to be achieved in the delivery of the domiciliary care and support services, to support people to take greater control of their lives and live as independently as possible, for as long as possible. Whilst not all are relevant to each care and support package, those relating to and identifying with the person's needs (and documented in their care and support plan), will be the basis on which the effectiveness of the service will be determined. The implementation of this specification must contribute to the following generic outcomes for people, which are also those, sought through the SSWB (Wales) Act 2014 Outcomes Framework and which Care Inspectorate Wales will be inspecting and registering Providers against.

3.1.2 Outcomes will be identified through the child's initial and ongoing care and support wellbeing assessments and plans. Outcomes specified within the care plan will be met and must respond to the individuals needs as assessed by the Social Worker.

3.1.3 Individualised and person centred outcomes, as outlined on individual care plans, will be monitored at the regular review meetings with Cardiff Social Services. This will demonstrate that Providers are meeting the individual needs of the children and families as identified by the assessment.

3.1.4 The following over-arching impacts and outcomes are expected to be observed for children and families receiving Domiciliary Care and Session Support, where relevant to their individual circumstances and assessed need (in addition to the specific outcomes outlined in the care plan):

1. For families to have the support they need to maintain their family unit and build on their skills and resilience e.g. can include practical, social and emotional skills and resilience
2. Children and young people are empowered to build on and develop their skills for everyday living
3. Children and young people are able to meet other likeminded children and young people and improve their socialisation levels, as required
4. Family's needs and reliance on Social Services are de-escalated
5. Family / carers build skills to manage behavioural and emotional needs of their children
6. Long term, and sustainable change and support is evidenced in family units

3.1.5 The following wellbeing outcomes are also expected for individuals receiving Domiciliary Care:

Population Groups	High Level Outcomes	Service outcomes/ impacts
Domiciliary Care for Children with Disabilities	<ul style="list-style-type: none"> ✓ Living independently, reducing the requirement for Social Service support and involvement ✓ Staying in their own home where appropriate ✓ Being safe and living in secure accommodation and strong support networks ✓ Living within their communities ✓ Promotion of self-care and management 	<ul style="list-style-type: none"> • Crisis response behavioural issues the need to stabilise and provide short term care and support • Share knowledge and develop skills • Carer's / family members feel supported offered any required level of respite • Maintain children's needs and support families
Sessional Support for children, young people and families supported by Children Social Services	<ul style="list-style-type: none"> ✓ Individuals supported in their recovery to live meaningful lives with or without symptoms of their conditions 	<ul style="list-style-type: none"> • Maintenance requirements to enable families stabilising for a period of time to be able to enable children to stay

Population Groups	High Level Outcomes	Service outcomes/ impacts
	<ul style="list-style-type: none"> ✓ Positively managing challenging behaviour ✓ Having a Healthy & Positive Lifestyle ✓ Being a positively engaged citizen ✓ Socialising, forming meaningful relationships, friendships & connections ✓ Engaging and connecting families, friends and communities to reduce social isolation ✓ Accessing, Engaging & Maintaining education/ employment 	<p>at home and support out of hours</p> <ul style="list-style-type: none"> • Providing skills and support for family members • Carer's / family members feel supported and offered any required level of respite • Keeping individuals safe and stable

3.1.6 A Provider's ability to meet the above service level and individual level impact and outcomes will be monitored routinely via the Contract Monitoring Processes and Provider Quality Score processes as outlined in **Part 7**.

Part 4 – Safeguarding

4.1 General Provisions

4.1.1 All Providers on the Cardiff Domiciliary Care DPS must work to protect and promote the health, safety and wellbeing of individuals in receipt of care and support, to ensure they have a good understanding of personal safety issues. This will include:

- Being safe at home and in the community
- Personal relationships
- Knowing who they can trust
- Awareness and advice of Alcohol Misuse
- Awareness and advice of Substance Misuse
- Not harming themselves
- Managing their worries and fears
- Awareness and advice on the safe use of information technology and social networking forums
- All employees of the Organisation and those (with capacity) who use it

will have an awareness of the Prevent Agenda and how to report concerns.

- 4.1.2 The Providers must ensure that individuals are protected from abuse, neglect and self-harm. If there are any concerns regarding potential and/or suspected abuse or if there is an allegation of abuse, it must be reported to a line manager and the Council's Safeguarding Team using the Inter Agency Referral MARF immediately. For out of hours Providers must report to the Emergency Duty Team.
- 4.1.3 The Provider must at all times use the All Wales Safeguarding Procedures, Part 7 (Safeguarding) of the Social Services and Well-being (Wales) Act 2014 and any other relevant future legislation and/or guidance.
- 4.1.4 The person will be safeguarded from neglect, abuse and harm and will know that any concerns will be listened to and acted upon promptly.
- 4.1.5 All individuals will:
- Protected against deliberate abuse and neglect, with the Providers responding promptly to the sharing of any concerns
 - Know who to report safeguarding concerns to and issues regarding their care and support
 - Know that concerns are taken seriously and addressed through the appropriate channels
 - Live safely in their own home/community
 - Know that home security isn't compromised by the service
 - Feel that specific issues relating to equality and diversity have been managed appropriately
 - Be supported to develop good communication skills and be enabled to have a voice regarding any concerns, discrimination and/or harassment
 - Feel that their dignity, privacy and respect is maintained and safeguarded at all times
- 4.1.6 All providers must have in place a Safeguarding policy and procedure, which sets out its approach to safeguarding individuals. The Safeguarding policy will be aligned with, and make reference to, the Council's Corporate Safeguarding Policy. The current Corporate Safeguarding Policy is available in **Appendix B**
- 4.1.7 The Providers will identify a Safeguarding Lead to oversee training of staff and to oversee and monitor the response to any safeguarding concerns or allegations. The provider must ensure there is a clear arrangement in place in the event of the named Safeguarding Lead being unavailable.
- 4.1.8 In all cases of initial contact, where any Provider has reason to believe an individual is in danger, at risk, or that there are adult/child protection, safeguarding or overriding public safety concerns, the Police must be contacted immediately.
- 4.1.9 All providers will protect individuals from avoidable harm by ensuring

appropriate safeguarding referrals are made in accordance with the Council's Corporate Safeguarding policy and procedures.

4.1.10 In addition to providers' statutory requirements, all safeguarding issues will be reported to the Council and recorded on the person's Risk Management Plan and Support Plan as a minimum and reported to the person's social worker within 24 hours.

4.2 Notification of Significant Events

4.2.1 The Providers will immediately notify CIW and the local authority in the event of a death, serious illness or hospital admission of an Individual using the service.

4.2.2 The Provider shall record in writing any major or serious incident that occurs and report the incident to the Council's Contract Manager within a 24 hour period and if appropriate report it using the Council's safeguarding procedures.

By serious incident this includes (but is not limited to):

- Physical harm to a person, member of staff or member of the public;
- Safeguarding concerns;
- Fire-setting;
- Outbreak of serious infection or disease;
- Antisocial behaviour affecting other tenants or members of the public.

4.2.3 The Providers will notify the local authority within a 24-hour period of any incident that means an Individual, in receipt of care and support, may be excluded from a service.

4.2.4 The Providers will notify the local authority within a 24-hour period of other incidents or changes of circumstances that may affect the safety or well-being of the Individual.

4.2.5 The Providers will notify the local authority within a 24-hour period in the event an Individual has requested cancellation of the Service or has ceased to reside at their usual premises for any reason.

4.2.6 The Providers will notify CIW immediately and the local authority within a 24-hour period of any notifiable infectious disease as defined in the Public Health (Control of Disease) Act 1984 or the Public Health (Infectious Diseases) Regulations 1988.

4.2.7 The Providers will notify the local authority within a 24-hour period of any safeguarding issue, which has arisen with an Individual in the service.

4.2.8 The Providers will notify the local authority within a 24-hour period of the termination or suspension of services to the appropriate contact of the local authority who will then inform the respective area assessment and care management team.

- 4.2.9 The Providers will have written procedures for dealing with situations when an Individual, who is in receipt of care and support, is missing. This procedure shall be approved by the local authority, and fully understood by all care workers.
- 4.2.10 The Providers will ensure that care workers are fully aware of procedures to protect the wellbeing of Individuals, who are in receipt of care and support, in the event of an emergency involving for example, water, gas and electricity. Emergency procedures must allow for immediate action by care worker's to bring the situation safely under control.
- 4.2.11 The Provider must ensure there are arrangements are in place for reporting and debriefing following incidents of use of restraint as directed by the Positive Behaviour Support Plan (PBS) for Children's Services
- 4.2.12 The Providers must have its own internal guidelines for staff setting out that:
- It is the responsibility of all staff to act on any suspicion or evidence of abuse or neglect and to pass their information to the responsible person
 - Whistleblowers will receive support and protection in accordance with the Act

4.3 Staff Conduct

- 4.3.1.1 The Providers shall ensure that all staff sign up to the principles, outcomes and standards defined in this service specification and that their conduct is appropriate at all times.
- 4.3.1.2 Social Care Wales expects social care workers, to meet the **Code of Professional Practice for Social Care** and may take action if registered workers fail to do so. As an employer of social care workers, Providers are expected to take account of the Code in making decisions about the conduct of their staff. Social Care Wales maintains the Register of Social Care Workers (the Register). The Code is the primary document setting out the standards for conduct and practice. It also forms part of the wider package of legislation, practice standards and employers' policies and procedures that social care workers must meet. Registered social care workers are required to comply with the Code. However, Providers are expected to ensure that all its staff follow the Code whether they are registered or working towards registration as it is relevant to all social care workers as it sets clear standards of the conduct and practice expected of the social care profession in Wales
- 4.3.1.3 The Providers will ensure that staff focus all of their attention on the people who use the service and the delivery of the service – care workers **shall not:**
- Treat the people who use the service 'like just another number' or

make assumptions about them

- Be impatient, fail to listen to what an Individual has to say, or talk down to an Individual
- Make commitments to individuals that they cannot keep
- Be distracted through reading, watching television, using mobile/smart phones or any other media, unless it is part of an agreed activity to support an Individual
- Ignore an Individual or the activity that they are supporting
- Be rude or disrespectful to any person using the service, partner professionals, or any other stakeholder
- Talk about an Individual, who is in the room/earshot, to others as if they are not present
- Have 'favourites' or treat those who use the service unfairly
- Exceed professional boundaries in their relationship with the individual or parent / carer (e.g. sharing personal information, being overfamiliar etc.)
- Promise confidentiality to the individual or the parent/carer where it is the responsibility / duty of the carer to share particular information.

4.3.1.4 The Provider will have a written policy for investigating allegations of misconduct by any staff, and for any subsequent action that may be required.

4.3.1.5 Any allegations of misconduct by a member of staff, which come to the attention of the Provider, will be reported immediately to the authorised representative and the relevant manager. A report on any such investigation, including any actions taken as a result, is to be submitted to the Local Authority, for oversight and involvement as required via the Professionals Concerns Process. The reporting of an incident will not necessarily preclude criminal proceedings taking place. CIW must also be updated.

4.3.1.6 The Providers will have a policy on the non-acceptance of gratuities, gifts or legacies which may be token in nature, offered to any employee or persons empowered, by the Provider or Cardiff Council, to provide care and support including paid and unpaid personnel

4.3.1.7 The Provider must ensure there is an organisational Code of Conduct that care workers are aware of and adhere to at all times.

4.3.1.8 Safeguarding training is to take place prior to the commencement of delivery of Services by an individual employee, and is to take place annually thereafter throughout the duration of employment under this contract.

4.3.1.9 Awareness of the Wales Safeguarding Procedures App and how to download it and use it must be incorporated into staff induction programmes.

4.3.1.10 The Providers must hold regular team meetings and safeguarding must be a standing item on the agenda, regular updates and reminders must be given at these meetings.

4.3.1.11 The Providers must ensure that information about the duty to report safeguarding concerns are readily available to staff at all times.

4.4 Policies and Procedures

4.4.1 The Providers must put in place and monitor policies and procedures to respond to allegations of harm, neglect or abuse. This includes ensuring that workers have knowledge about signs of harm, neglect or abuse, be aware of their duty to report these, and know the action they should take.

4.4.2 The Providers must have policies and systems in place for workers and people to raise concerns about any matter which might have a negative effect on the delivery of the Services and take adequate action to respond to concerns.

4.4.3 There must be a clear policy and procedure for:

- Complaints and service user communication;
- Professional boundaries – setting out clearly the expectations regarding appropriate behaviour and relationships between staff and service users;
- Whistleblowing - including clear and well publicised procedures for dealing with allegations of abuse by staff made by colleagues or other professionals.
- Medicines Policy, which must be aligned and taking into account the Cardiff Council Medicines Management Policy This policy is currently in draft, but will be based on the Vale of Glamorgan Draft Medicines Policy outlined in **Appendix C**

4.5 Whistleblowing

4.5.1 The Public Interest Disclosure Act 1998 provides for the protection of people using a service who make certain disclosures of information in the public interest and to allow such people to bring action in respect of victimisation following such a disclosure. The Provider must have its own internal guidelines for staff setting out that:

- It is the responsibility of all staff to act on any suspicion, evidence of abuse or neglect and to pass their information on to the responsible person
- Whistleblowers will receive support and protection in accordance with The Public Interest Disclosure **Act** 1998.

Part 5 – Staffing and Management

5.1 Recruitment and Selection

5.1.1 All providers on Cardiff's Domiciliary Care DPS must have a safe recruitment policy and procedure which meets the following requirements and are in line with relevant employment legislation. Evidence of such a policy and/or procedure will be mandatory and part of the accreditation and enrolment of provider's onto the DPS.

5.1.2 All providers on Cardiff's Domiciliary Care DPS must:

- Have a safe recruitment and selection policy that covers as a minimum; advertising, shortlisting, interview panel, assessment, offers of employment, equal opportunities policy and exemptions, ex-offenders, references, criminal records and probationary periods;
- Selects staff using a process which is open and reflects equality of opportunity and includes taking up the following references and checks prior to employment start:
 - Disclosure and Barring Service and Independent Safeguarding Authority;
 - Original formal proof of identity;
 - Previous employer's reference (x2);
- Ensure that proper procedures are in place to address any potential risk from employees and that decision making on recruitment is fully documented and retained;
- Have appropriate job descriptions and person specifications for all staff involved in the delivery of this contract, detailing their role and the expectations;
- Ensure equality of opportunity is recognised and encouraged through the job description and person specification with positive action to encourage applications from under-represented groups;
- Involve customers / individuals receiving care in the recruitment and selection of staff where possible.

5.1.3 The Providers must recognise that people accessing services are vulnerable and that risk should always be minimised when recruiting. Enhanced Disclosure and Barring Service checks must always be carried out when recruiting; the Provider must not rely on previously issued DBS.

5.1.4 Disclosure and Barring Service checks must be repeated every three years to ensure that they are current and ensure such checks are compliant with the law.

5.1.5 The Providers must have sound recruitment and selection policies in place that minimise risk and promote safeguarding. The Provider will ensure that workers involved in the recruitment process are Safer Recruitment trained.

5.1.6 The Providers must take up at least 2 references from current and former employers. At least one reference must be from the candidates' current or most recent employer.

5.1.7 The Providers must ensure that all service elements cover the following:

- Comply with the requirements of the Transfer of Undertakings Protection of Employment Regulations 2006 (TUPE) in relation to relevant transfers, as and if relevant.
- Employ sufficient in number, competent care workers to deliver the services as described in this service specification and for the hours of delivery the Provider has committed to with the Council. Please refer to **Section 2**
- Provide adequate cover of support staff, to ensure that the service continues to be delivered at an acceptable level in the event of personal emergencies, sickness and leave i.e. all areas of the specification must be met, although there may be short delays in service delivery. The local authority must be notified at any time where delays are likely to take place.
- The Provider is to deploy care workers appropriately in order to ensure the assessed care and support needs and all planned and agreed outcomes will be met.
- Ensure the staff employed are knowledgeable, skilled, empowered and motivated, are appropriately qualified and trained in accordance with the Social Care Wales requirements and the National Minimum Standards to deliver the service. See **section 5.2** for more information.
- Develop robust organisational policies and procedures on recruitment and selection of care workers, which protect the well-being, security and the health and safety of the people who use the service.
- The Providers will provide senior management sufficient in numbers to ensure that all care workers are adequately supervised and properly instructed to perform their duties. Staff will receive a minimum of one to one supervision session every 3 months in line with Regulatory requirements but ideally this will be more frequent and an annual appraisal.
- The Providers will ensure care workers are able to access support from a supervisor as required.

5.2 Staffing Requirements

5.2.1 As per CIW registration requirements, all Providers will have an allocated Responsible Individual and Registered Manager for the service they deliver.

5.2.2 It is the Providers' responsibility to ensure there is an adequately sized and

qualified staff team to manage the number of hours of service delivery the Service has been commissioned to provide.

- 5.2.3 The Providers are required to maintain a stable core team of staff as much as possible, but is expected to provide additional staff for peaks of demand. Maintaining an identifiable team whilst using staff efficiently to reduce downtime will be a key requirement of the Providers. It is expected that there will be cover arrangements to account for the annual leave and sickness leave of staff members. It is essential that the Provider maintains consistency of the staff employed to work with individuals who are in receipt of care and support.
- 5.2.4 The Provider must ensure that all staff have the required skills to meet the care and support needs, in addition to supporting with the outcomes outlined on a Positive Behavioural Support Plan for children and young people. Training and adequate staffing arrangements must be identified to meet the requirements of any Positive Behavioural Support Plan must be in place prior to commencing any care delivery with the child / young person or family.
- 5.2.5 As much as possible, Providers will work to ensure consistency of care workers for individuals receiving care and support at their home or in the community.
- 5.2.6 The Providers will ensure that there is a senior member of staff / managers available at all times of service delivery to manage the staff team and ensure there is effective service delivery at all times.
- 5.2.7 The amount of care and support required will vary between individuals and at different times with the same individual. This shall be determined in the individuals care and support plan. The Providers will respond to these different needs within their staffing arrangements and produce sufficient staffing arrangements that will be available 24 hours per day to ensure the effective provision of service as identified in the Care and Support Plan
- 5.2.8 The Providers will have management cover arrangements in place for when the manager is not available.
- 5.2.9 Providers must ensure that all staff (including all permanent, temporary or agency staff and volunteers) responsible for delivering support and care have the experience, knowledge, skills and training appropriate for the delivery of Domiciliary Care. This includes minimum qualifications as follows:
- 5.2.10 For the delivery of Domiciliary Care to children and young people, the following qualifications are required, as per Social Care Wales requirements:
- **For the Registered Manager** – City and Guild Level 5 Leadership and Management of Health and Social Care: Practice (or City and Guilds Level 4 Preparing for Leadership and Management in Health and Social Care and evidence of enrolment on the Level 5 qualification)
 - For Care Workers – City and Guilds Level 2 Health and Social Care: Core **plus** City and Guilds Leave 3 Health and Social Care: Practice (Children and Young People)

- 5.2.11 Service regulations require that ‘the service provider must at all times ensure a sufficient number of suitably qualified, trained, skilled, competent and experienced staff deployed to work at the service’
- 5.2.12 If a Domiciliary Care agency is working with both adults and children, it is the agency’s responsibility to make sure the Manager has undertaken the appropriate qualification units for adults and children, and that they have the knowledge, understanding and skills required for that role.
- 5.2.13 As of 1 April 2020, all individual care workers (including deputy domiciliary managers, domiciliary service co-ordinators, senior care workers and care workers) employed by a Domiciliary Care must be registered with Social Care Wales. Any new employees must ensure they are registered within the first 6 months of employment. The Manager must also be registered as such with Social Care Wales, as per The Regulated Services (Service Providers and Responsible Individuals (Wales) (Amendment) Regulations 2019 that came into force on 1 April 2019.

5.3 Induction and Training

- 5.3.1 It is the responsibility of the service provider to make sure that everyone working at the service receives an induction that is appropriate to their role, including management. This induction is to be robust and accessible to prepare them for new and changing roles and responsibilities.
- 5.3.2 [The All Wales Induction Framework for Health and Social Care \(AWIF\)](#) is a framework for social care workers and healthcare care workers. It covers care and support for adults, children and young people. It provides a structure for a common induction in health and social care across Wales and outlines the knowledge and skills new workers need to gain in the first 6 months of their employment.
- 5.3.3 All new managers will receive the ‘Social Care Manager’ – practice guidance for social care managers registered with Social Care Wales as part of their induction, along with the ‘Code of Practice for Social Care Employers’.
- 5.3.4 The Providers must ensure that all staff members have an induction programme which must fully cover safeguarding policy and procedures. A signed and dated record of staff inductions must be held on their file, with training records.
- 5.3.5 The Providers will have a staff Induction policy/process that is completed by all new care workers within four weeks of commencing employment. Satisfactory completion of the Induction will be recorded in the staff-training file.
- 5.3.6 The Providers will provide in-service training for care workers that will cover all aspects of their personal responsibilities and role. The Provider will ensure that

all training is undertaken by staff at external training locations and will only be provided in the home of an individual, who is in receipt of care and support, when it is specific to the location of their home and is an essential part of the training. The Provider will ensure adequate staffing levels are provided to cover staff to undertake training.

5.3.7 The induction training package must include but is not limited to training on:

- Manual Handling Training to be undertaken by a certified trainer;
- Anti-Discriminative Practice (which includes relevant equality legislation);
- First Aid;
- Medication Management;
- Basic Personal Care;
- Health and Safety;
- Risk Management, with full training given to those doing risk assessments;
- Control of Infectious Diseases and Infection Control Procedures;
- Standards of Conduct;
- Wales Safeguarding Procedures, both for adults and children;
- Record Keeping
- Confidentiality and Information Governance (including the impact of the General Data Protection Regulations, GDPR)
- Managing aggression or behaviours that challenge;
- Personal safety;
- Food hygiene;

5.3.8 The Induction must be comprehensive and detailed so staff are competent in the following areas as an absolute minimum prior to the delivery of care:

- Staff are made aware of any potential known risk to themselves or others whilst undertaking duties associated with their employment.
- Staff are able to report any concerns regarding risks to themselves or the people in receipt of care to the Provider and the Social Services Team
- Staff are trained in moving and handling techniques and the use of any equipment used to help people.
- Staff are made aware of issues relating to dealing with aggressive and or behaviour that challenges and receive appropriate training.
- Staff and managers work to the agreed Safeguarding of Vulnerable Adults and Children procedures and receive appropriate training.
- Staff are aware of emergency situation guidelines and are provided with appropriate training including arrangements in the event of a fire.
- All staff are made aware of possible risks of infection to themselves and others when providing personal care to individuals and are provided with appropriate training.
- Staff are aware of the contact number of a manager out of office hours.
- All staff are aware of the organisations Policies and Procedures including:
 - Disciplinary Policy and Procedures;
 - Managing confidentiality and the right of a service user to see their

- own personal records;
- Local Complaints Procedure;
- Code of conduct for the service
- The use of own vehicles for transporting service users and the associated insurance requirements
- Guidance around professional boundaries

5.3.9 All staff will receive an induction pack and manual containing information on the organisation's aims, policies and service principles, together with the procedures and guidelines relevant to their role.

5.3.10 Each new member of staff must receive a formal induction session with their manager or other appropriate person to go through the written information contained in the induction pack and their understanding needs to be confirmed by signature;

5.3.11 The manager or appropriate person must record that induction sessions have taken place, indicating their satisfaction with the worker's awareness of the organisation's service principles, contract requirements, policies and procedures in relation to his or her role as a worker prior to the worker commencing their duties. Follow up sessions must be arranged if necessary.

5.3.12 The Provider is expected to work in partnership with the Council in the provision of induction training and comply with models of best practice. Induction training will need to emphasise the distinctive elements of providing a care and support service to a group of people who are living with complex needs.

5.3.13 The Provider is required to issue detailed Health and Safety Policy statement in compliance with the Health and Safety at Work Act Etc. 1974 Section 2(3) (Section 2 of the HSW Act deals with employers' duties, and states: "It shall be the duty of all employers to ensure, so far as is reasonably practicable, the health safety and welfare of all their employees whilst they are at work).

5.3.14 Section 3 requires the employer to ensure that people not employed, but who could be affected by his operation, are not placed at risk. The public, customers, visitors or Providers attending the site might need training or supervision to minimise the risk to their health and safety while on site, or relevant personal protective equipment (PPE), along with training on how to use it correctly, may need to be provided.

5.3.15 All care staff should be employed for a probationary period of at least 3 months after commencement of employment. After such probationary period, employers must assess the employee formally to ensure they are suitable for the work and role of employment.

5.4 Overall Training Requirements

5.4.1.1 In recognising the value of the workforce and supporting the development of the workforce, the Provider will be responsible to ensure all care workers are in receipt of regular and appropriate training. All training will be valid,

accredited where possible and evidenced based. Where required, training will be updated within the timescales of the training programme.

- 5.4.1.2 The Provider shall provide sufficiently trained appropriately qualified and competent staff as outlined above to meet this service specification, having regard to the number, age, gender, abilities and needs of the people who use the service.
- 5.4.1.3 The people using the service can be assured they are in receipt of a service that is being provided by a workforce who are experienced, knowledgeable and skilled to a level that is relevant to their identified needs.
- 5.4.1.4 All training will emphasise the need to maximise the potential for people who are in receipt of care and support, to learn new or maintain personal care skills. No staff member will use specialist equipment or carry out procedures, including moving and handling of people, without first receiving appropriate training and being deemed competent to use such equipment by an appropriately trained person;
- 5.4.1.5 When the local authority has provided equipment and guidance for the moving and handling of an Individual, supervisory care workers must ensure the information is cascaded to all other care workers and ensure they are competent in its use.
- 5.4.1.6 Each staff member, including managers, must receive an annual appraisal of their training needs and have a maintained training record;
- 5.4.1.7 The Provider must have a training strategy with defined aims and objectives, identified methods of training for each staff group, including managers, and evidence of staff participation with training activities.
- 5.4.1.8 The Provider will provide specialist advice, training and information to care workers, who work with people who are living with physical and/or medical conditions, by someone who is occupationally qualified to do so;
- 5.4.1.9 Care workers must receive specific training on medication management and administration (as required) which must be regularly reviewed and updated
- 5.4.1.10 Training must include as a minimum but not limited to:

Training:	Information:
Adult and Child Protection including any relevant safeguarding issues e.g. domestic abuse	Training is available via the local authority and should be provided to all staff without exception.

Manual Handling – All Wales Passport	Staff must attend the “All Wales Manual Handling Passport” no later than two months of starting work.
Basic Food Hygiene (Level 1)	Any staff involved in preparing, managing, storing or disposing of food and/or food waste must attend this training prior to completing such tasks.
Control of Substance Hazardous to Health (COSHH)	All staff should be trained in COSHH, as good practice and as a basic health and safety requirement.
Reporting of Injuries, Disease and Dangerous Occurrences Regulations (RIDDOR)	All staff should be trained in RIDDOR, as good practice and as a basic health and safety requirement.
First Aid	All staff should be trained in emergency first aid, as a minimum requirement (i.e. Heartstart) as good practice and as a basic health and safety requirement.
Job Based Competencies	<p>This will include the following:-</p> <ul style="list-style-type: none"> • Personal Care • Infection Control • Equality and Diversity • Electronic Time Monitoring Systems • Telecare and Telehealth • Keysafe Operation • Wheelchair Operation • Reporting Procedures • Medication Training – Medicines Management and Administration • Handling Service Users’ Finances • Fire Training • General Data Protection Regulation • Mental Capacity Assessment and Best Interest Decisions • Deprivation of Liberty
Other Training (specific to Service Users – not an exhaustive list)	<p>This may include the following:-</p> <ul style="list-style-type: none"> • Complex Behaviours • Challenging behaviours • Dementia Awareness • Epilepsy Awareness • Sensory Impairment Awareness • Diabetes and other serious Health Conditions

	<ul style="list-style-type: none"> • Mental Health Awareness • Basic Substance Misuse Awareness • Brain Injury • Domestic Abuse Awareness • Wound Care • Autism Awareness • PECS awareness • Motivational Interviewing
Other Training (not an exhaustive list)	<p>This may include the following:-</p> <ul style="list-style-type: none"> • Role of the NHS • Social Care values • Complaints • Risk Assessment • Equality and Diversity Awareness • Strength Based Approach to Care • Person Centred Care Planning

5.4.1.11 A record of all formal/informal training, including support worker training plans/records, certificates and qualifications will be monitored on an annual basis and kept by the Provider. These records will be submitted to the local authority on request

5.4.1.12 The Providers must ensure that its workforce has a broad knowledge base and professional training that is targeted to the needs of older people and regularly reviewed. To achieve this the Providers must ensure that:

- There is an organisation wide training strategy detailing how training needs are assessed and training planned and delivered in line with the organisation's aims and objectives and the requirements of this contract.
- There is an up to date Training Plan for each member of staff which highlights mandatory and discretionary training for each role involved with the delivery of the personal domiciliary care and support service.
- Staff undergo a review of training needs at least annually and have an individual profile and training plan.
- Staff are given opportunities for personal development and are positively encouraged to take part, this should include opportunities to study for and gain mandatory and vocational nationally recognised care and support qualifications.
- Staff training includes language sensitivity and its impact on service delivery, with particular reference to the Welsh Government's 'More than Just Words' strategy which seeks to ensure that Welsh language speakers receive health, social services and social care services in their first language.

- 5.4.1.13 The Providers must ensure continuing professional development for its employees, to ensure that their knowledge is up to date and any gaps in training are addressed. The Provider should ensure employees receive refresher training as and when it's needed.
- 5.4.1.14 The Providers must provide their workforce development plan to the Council through the contract management arrangements, working with the Council to prepare staff for any emerging issues.
- 5.4.1.15 The Providers should hold and record (minute) formal team meetings, with identified actions and goals to be completed by named individuals.
- 5.4.1.16 Providers are able to access Cardiff Council's social care workforce training and development unit who administer the provision of training supported by the 'Social Care Workforce Development Partnership' (SCWDP) Grant. The team provide a range of training courses both online or classroom based in various locations across the City.

5.5 Equality and Diversity

- 5.5.1 Cardiff Council is a culturally diverse council and the Services commissioned must be culturally sensitive. The Providers must have an Equality and Diversity Policy and must provide a copy to the Authority upon request. The policy must cover the ways in which the Providers will promote equality of opportunity and prevent discrimination in relation to those protected characteristics outlined in the Equality Act 2010:
- Age
 - Disability
 - Gender reassignment
 - Marriage and civil partnership
 - Pregnancy and maternity
 - Race
 - Religion or belief
 - Sex
 - Sexual orientation

The providers will ensure, at a minimum, the following good practice is followed:

- Ensure that their staff have a knowledge and understanding of the vulnerabilities and social needs of the people they support and care for;
- Ensure that staff have the skills to meet the individual needs of people, including communication skills, knowledge of cultural customs and racial, gender and disabilities awareness;
- Provide staff training on the full range of equalities issues;
- Deliver services equally to those whose first language is not English. For the most frequently spoken languages the Providers should seek to directly employ staff with language skills. Where staff with the

necessary language skills are not available, the Providers should employ translators on an ad-hoc basis.

- Be able to produce materials that recognise a range of language and communication needs e.g. for groups whose literacy levels are low, whose first language is not English and for those for whom written material may be problematic
- The Providers will make available to People who use the Service a copy of its Equality and Diversity Policy at commencement of the service. Likewise, a copy will be made available for staff at commencement of employment.

5.6 Supervision of the workforce

5.6.1 All providers on the Cardiff Domiciliary Care DPS must ensure that all staff have regular supervision appropriate for their role within the service and maintain evidence of staff supervision and support, including audits of service user records and outcomes and regular observations of service delivery.

5.6.2 Formal supervision must be offered by the employee's line manager ideally on a 4-6 weekly basis (however a minimum of 3 monthly is acceptable, as per RISCA requirements), and can be externally resourced as required. Supervision sessions should cover at the very minimum:

- Wellbeing
- Overview and reflective practice on service delivery
- Development requests and training requirements

5.6.3 All members of staff must receive an annual appraisal at the very minimum

5.7 Use of Agency Workers

5.7.1 The use of agency workers will be kept to a minimum in order to maintain a stable and consistent approach to service provision.

5.7.2 Where agency workers are used, the Providers must ensure that the appropriate checks have been made, they have the skills and experience to deliver the service effectively and safely and the induction is carried out prior to employment. The Providers will meet the entire expense of an agency worker. Agency / Relief workers will need to read key documents relating to the individual's care e.g. care and treatment plan prior to delivering that care unsupervised.

5.7.3 Providers will also ensure that adequate service is maintained and that planned handovers are undertaken and recorded appropriately.

5.8 Staff Records

5.8.1 You will ensure that there is a record for each staff member containing:

- Name, address, date of birth and telephone number
- Qualifications and experience
- Name, address and telephone number of next of kin
- Proof of identity, including a recent photograph
- A copy of the person's birth certificate and passport (if any)
- Details of any criminal offences: – of which the person has been convicted, including details of any convictions which are spent within the meaning of section 1 of the Rehabilitation of Offenders Act 1974 and which may be disclosed by virtue of the Rehabilitation of Offenders (Exceptions) Order 1975; or in respect of which he has been cautioned by a constable and, which at the time the caution was given, he admitted.
- An enhanced DBS disclosure and checks obtained in line with regulation and guidance.
- Two references, including a reference relating to the last period of employment of not less than three months duration, which involved work with children or vulnerable adults.(unless there is no previous employer)
- Where the person has previously worked in a position, which involved work with children or vulnerable adults, verification, so far as reasonably practicable, of the reason why he/she ceased to work in that position.
- Evidence of a satisfactory knowledge of the English language, where the person's qualifications obtained are outside the United Kingdom.
- Documentary evidence of any relevant qualifications and training.
- A full employment history, together with a satisfactory written explanation of any gaps in employment and details of any current employment other than for the purposes of the agency.
- A statement by the registered Provider, or the registered manager, as the case may be, that the person is fit, both mentally and physically, for the purposes of the work, which he is to perform.
- The dates on which the person commences and ceases to be so employed
- The position the person holds at the service, the work he or she performs and the number of hours for which he or she is employed each week.
- With specific reference to moving and handling all care workers must be fit enough to use and operate equipment and able to adopt safe working postures as required. All workers must be made aware of the requirements for safe practice as stated in the All Wales Manual Handling Passport procedures.
- A completed application form for all care workers
- All staff is issued with a job description and a contract of employment.
- Details of any professional indemnity insurance.
- The Providers will provide, in writing, to all care workers a copy of their position relating to annual leave, sickness, maternity/paternity arrangements, grievance, disciplinary procedures and other similar schemes.

- Records of all disciplinary action and any other records in relation to the person's employment.

5.9 Uniform

5.9.1 Providers to ensure that the workforce dresses appropriately for service delivery as part of their Code of Conduct Policy. This may include a specific uniform but this is at the discretion of individual providers.

5.9.2 Providers will ensure that all staff are aware of the possible risks of infection to themselves or others when providing personal care to service users

5.9.3 In line with this, Providers must ensure they have access to and make available to staff as required the following minimal personal protective equipment (PPE):

- Disposable Gloves
- Aprons
- Medical face masks
- Face Shields
- Sanitising Gel

5.9.4 During a pandemic (e.g. the COVID 19 pandemic), all Providers must follow local guidance relating to the mandatory wearing of PPE when delivering care on behalf of the Local Authority.

5.9.5 Providers must ensure all care workers are issued with a personalised identification badge or card, which contains a photo of the care worker, the Provider's name and logo, address and telephone number.

5.9.6 The ID badge must be worn or clearly displaced at all times when the care worker is on duty

5.9.7 The ID badges must have an expiry date, and they must be systems in place to renew the badges or recall these when employment ends.

5.10 Business Continuity

5.10.1 Providers on the Cardiff Domiciliary Care DPS are required to have Business Continuity Plans in place that, at the very least, considers how the service will manage in the following circumstances:

- Significant reduction in workforce that impacts the service's ability to provide the packages of care commissioned
- IT failure including virus attack

- Severe weather conditions (e.g. flooding or snow) or other local issues (e.g. Section 60 notices) that may disrupt the delivery of care
- Interruption to Energy Supply
- Fire Risk
- Pandemic

5.10.2 Where concerns or issues lead to an irretrievable breakdown of an individual service provision, the Provider must inform the Contracting Authority in writing without delay, detailing the reasons for the breakdown and any action taken to achieve a resolution. Following of review of the circumstances and in agreement with the responsible Social Worker, the Council may agree a termination period for an individual package of care, in very exceptional circumstances.

5.11 Record Keeping

5.11.1 People who are in receipt of care and support, must know that information about them is handled appropriately and that their confidentiality is assured. The Providers must ensure, with the agreement of individuals, that there is a suitable safe place for the storage and safe keeping of the individual's files and any other confidential information that needs to be held.

5.11.2 Families / Carers will be provided with a written statement explaining:

- their right of access to their own personal records. Each Person must have the same rights of access to personal information held on files kept by the Provider as would apply to files kept by Children's Services.
- their right to complain and a procedure for doing so. This must include assurance that their service will not be jeopardised if a complaint is made;
- their right to have personal information treated confidentially;
- their right to request a change of care provider

5.11.3 Records kept on individuals will be available to the Person on request.

5.11.4 Each individual receiving care and support has in place a set of records that are factual, legible, dated, signed and kept in a safe place as agreed with the individual, which include:

- All relevant assessments
- Care and Support Plan with agreed care outcomes;
- Any reviews of Care and Support Plans
- Risk assessments and risk management plans;
- Detail of all care provider, including daily records or records of specific care interventions
- Details of any identified changes in an individual's behaviour that is

viewed as untoward or unusual.

- Medication records (if appropriate);
- Details of any special dietary needs and/or medical treatment required;
- Daily participation records that identify in detail the support activities and services provided that identify and confirm particular outcomes have been met and any new personal achievements made;
- Details of changes in an individual's personal circumstances, care and support needs or health condition.
- Correspondence, reports and records in relation to additional support provided by other partner organisations, including Children's Services

5.11.5 These records are monitored on an ongoing basis, by the Provider for accurate completion and then filed appropriately. A senior care worker will check on a monthly basis and address any issues of relevance and accuracy.

5.11.6 Records on individuals must only contain verifiable and factual information. Language used should be respectful of the individual and their carer. The source and direct observations by care workers must be recorded.

5.11.7 Where possible the Providers will seek to meet the linguistic requirements of individuals in receipt of care and support and comply with the Welsh Language (Wales) Measure 2011 and this will be reflected within their written records.

5.11.8 The Providers must ensure that there is a confidential personal file for each person who is in receipt of care and support. All matters relating to individuals must be recorded in this file. Arrangements for access to personal files should ensure that staff and the individual are able to gain access as and when required or as appropriate.

5.11.9 Individual personal files must contain the following information:

- Name, date of birth and telephone Number of the individual
- Preferred form of address.
- Name, address, telephone number of next of kin, or any other person authorised to act on his/her behalf;
- If an individual is subject to guardianship, Name, Address and Telephone Number of the guardian
- Name, address, telephone number of GP.
- Name, address and telephone number to the Social Work Team and any other professionals involved in the care and support of the individual
- Records requested by other professionals that inform the care and support plan and the positive behaviour support plans;
- Records relating to medical history, treatments, welfare and conduct, progress reports, educational needs/achievements and any other relevant information pertaining to significant events that has affected individuals.
- Completed accident forms.

- Date of commencement of the service.
- The contract between the Provider and the Individual specifying the agreed terms of their care and support.
- Date of termination of service.
- Record of the original care and support assessment of need.
- Date of Review/Reassessment of Service.
- Achieved outcomes for the individual's through the provision of support.
- Individual staff support schedules/work programme (as appropriate).
- Record of Hospital Admissions/Discharges
- Records of any complaints both formal and Informal made by an individual using the service or made by their NOK/representative, with a record of response/agreed actions Subject to MHA or MCA restrictions, including review and end dates.

5.11.9.1 In addition to the individual's personal record, the following information must also be kept and maintained as required by legislation:

- All accident/incident report forms affecting an Individual and written procedures to be followed in the event of an accident;
- A written procedure to be followed in the event of an individual going missing;
- Food record sheets;
- Handover documents that inform on duty support staff – to maintain consistency with service provision.
- Incident debriefing records
- A written medication policy and procedure that has been agreed with the local authority and will not be altered without agreement of both parties, is to be followed, by support staff, with reference to assisting an individual with the administration and management of their medication as appropriate to an individual's recorded needs, capacity/skill level.
- A record of all financial transactions undertaken

5.11.9.2 Minimum data/information collection as part of routine contract monitoring is outlined in **Section 7**, however, Cardiff Council reserves the right to request additional data as and when required to inform the development and delivery of the contract and is a mandatory requirement of the provider to ensure timely provision following any request from the Council.

5.11.9.3 All Providers must be aligned with **Schedule 2 – Records to be kept in respect of regulated services (Part 1)** of The Regulated Services (Service Provider and Responsible Individuals) (Wales) Regulations 2017.

5.12 Information Sharing

5.12.1 The Providers will offer a confidential service but will operate to information

sharing protocols agreed by the Council, in line with legal responsibilities under the General Data Protection Regulation 2018 (Data Protection Act 1998) and local Safeguarding Procedures.

5.12.2 The Providers will work within the Cardiff Council's Data Processing Agreement and any supporting information sharing memorandums of agreements needed. All information sharing shall be governed by these protocols Cardiff Council is defined as the data controller for any individual placement contract in place with a Domiciliary Care provider.

5.12.3 The Providers will ensure that all relevant staff shall have secure email addresses and appropriate access arrangements to sensitive information.

5.12.4 The Providers will ensure that all information shared with the Contract Manager and other services external to the service, is shared in line with data protection protocols and via a method of secure transmission.

Part 6 – Partnership Working & Co-Production

6.1 Health Funding or Continuing Health Care

6.1.1 If applicable, where an individual is subject to 'Health Funding' or 'Continuing Care', such individual will be separately funded by Cardiff Council and Cardiff and Vale University Health Board.

6.2 Co-production

6.2.1 There is an expectation that providers will adopt co-productive approaches in designing and delivering the care and support to deliver individual's outcomes and will also involve them in any evaluation and review of the service.

6.2.2 Cardiff Council understand Co-production as:

Delivering public services in an equal and reciprocal relationship between professionals, people using services, their families and their neighbours. Where activities are co-produced in this way, both services and neighbourhoods become far more effective agents of change.

6.2.3 The Council's focus will be on a model of support that promotes individualism, 'choice, voice and control', independence and progression and of critical importance is how this can be demonstrated by Service Providers.

6.3 Added Value and Community Benefits

- 6.3.1 The Providers are expected to deliver added value. This should only relate to value added to the delivery of this contract and should not refer to other services delivered or funded from elsewhere.
- 6.3.2 It is proposed that this added value should focus on individuals being integrated into the community.
- 6.3.3 Delivery of community benefits will be part of the contract delivery

6.4 Social value

- 6.4.1 Providers will be required to demonstrate how fulfilment of this contract will contribute to wider social value initiatives within Cardiff Council.
- 6.4.2 The Public Services (Social Value) Act 2012 requires us to consider more widely the economic, environmental and social benefits of service procurement. For example, how the Service itself will contribute to local employment and how employment and volunteering opportunities will be made available to people to help them gain experience and confidence.
- 6.4.3 The Council has adopted the Cardiff Council Socially Responsible Procurement Policy, which brings together a number of different legislative requirements, policy initiatives and aspirations into a single coherent framework underpinned by six key priorities:
- Local Training and Employment
 - Think Cardiff First
 - Partners in Communities
 - Green and Sustainable
 - Ethical Employment
 - Promoting the Wellbeing of Young People and Vulnerable Adults

The aim of this policy is to ensure that the Council maximises the social, economic, environmental and cultural wellbeing that it delivers through its procurement activity. The Council wants to work with organisations who share our values around promoting social value and fair work practices.

Part 7 – Performance Management

7.1 Contract

- 7.1.1 The Providers on the Cardiff Domiciliary Care DPS agrees to work with and under the direction of the local authority Contracts Team to report on the agreed

performance measures from the start date that the Provider begins the delivery of service.

7.1.2 The Providers must be proactive in reporting any issues to the Social Work and Contracts Team affecting either the quantity or quality of anticipated outcomes or outputs in an honest and timely manner throughout the duration of the contract.

7.1.3 The Provider must submit such documents, records and information as is required and allow the Council to consult directly with any employees or staff in connection with the provision of the services as is considered necessary, subject to the requirements of the General Data Protection Regulations (GDPR).

7.2 Contract monitoring

7.2.1 The Providers must participate in the ongoing monitoring and evaluation of the service provision in a consultative manner with the Council (including the collection of management information and other data as required)

7.2.2 All providers will be monitored, reviewed and evaluated by the local authority which will align with the six Council's Corporate themes:

- Supplier Performance (Which will include overall service impact and outcomes)
- Quality Compliance
- Cost Compliance
- User Experience
- Risk Management
- Social Value

7.2.3 The Contracts Team will undertake quality benchmarking on a regular basis in order to quality assess providers and evidence outcomes by individual agencies for local people.

7.2.4 A Provider Quality Score Card (PQS Card) will be used to collate, monitor and analyse Provider performance on a quarterly basis.

7.2.5 The analysis of this score care will provide a Provider Quality Score for each agency, which will link into the individual contract award criteria for securing a package of care.

7.2.6 It is currently proposed that the Contract Monitoring / Provider Quality Score Care will review the following elements of care delivery:

- **Supplier Performance**
 - Case manager feedback and questionnaires
 - Evidence of delivery in line with service user outcomes
 - Overall Service Level Impact and Outcomes for each Service,

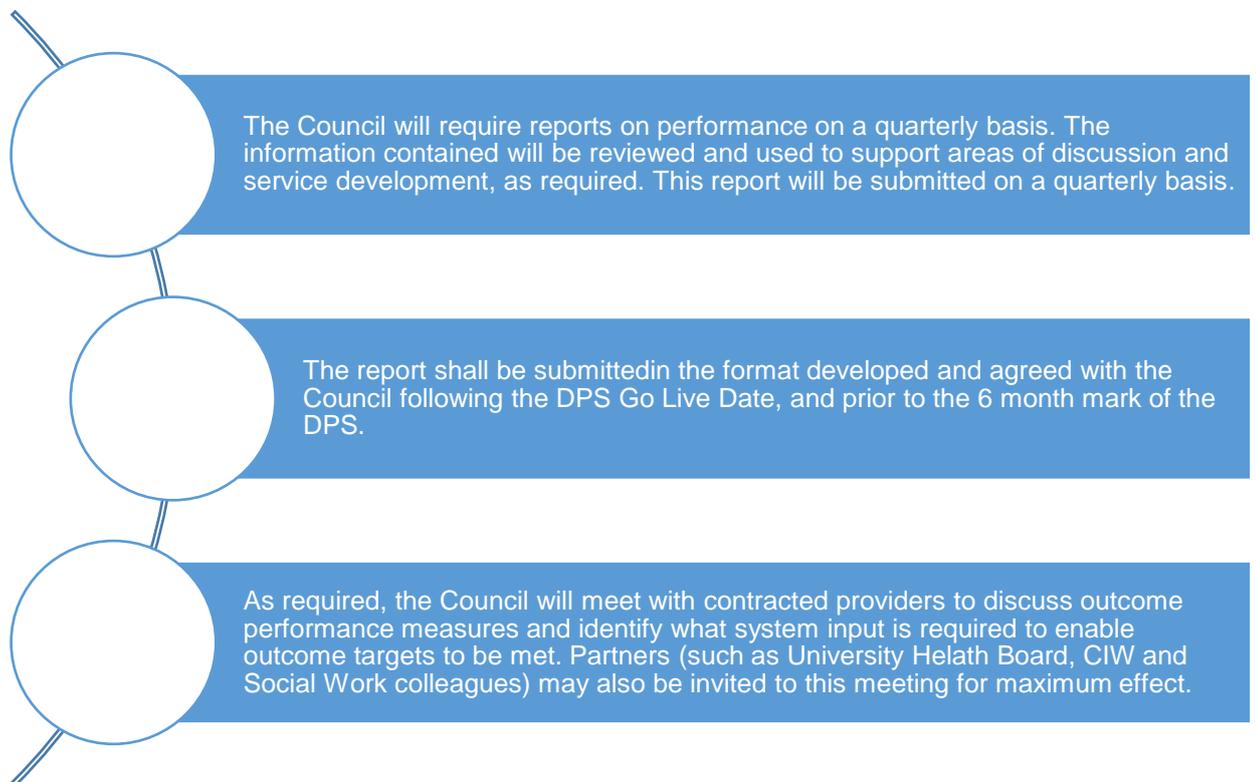
which may include monitoring of outcomes outlined as an example in point 7.2.7

- **User Experience**
 - Service user feedback
 - Case Studies provided by Providers demonstrating person centred outcomes 'Magic Moment' (not scored but collected)
- **Quality Compliance**
 - Staff Training Records
 - Staff Performance Reviews
 - Staff feedback questionnaires
 - Case Retention
 - Audits / visits from Cardiff Contracts Team
 - Responsible Individual 6 monthly Quality of Care Reviews and reports on quarterly Regulation 73 Visits
 - Involvement in the Cardiff Escalating Concerns Process
- **Cost Compliance**
 - Accuracy and timeliness of Service Receipting
- **Safeguarding and Risk Management**
 - No and nature. of safeguarding incidents raised
 - Insurance Levels
 - CIW Registration
 - Social Care Wales Registration
 - D&B / DUNS Risk Rating / Profit and Loss
 - DBS / Health and Safety Records
- **Social Value**
 - Staff Retention Levels
 - Local Employment Opportunities
 - Cardiff Commitment Opportunities

7.2.7 Providers are expected to deliver on a number of key performance measures. This information will be collected from Providers on quarterly basis, based on all packages of care commissioned (rather than on an individual basis). Finalisation of the KPIs will be discussed and agreed in collaboration with the Sector but the table below represents an example of the type of KPIs expected to be monitored and delivered:

Outcome	Expected Performance
The person will require no further assistance after two weeks of help	90% of people require no further help
The person will require no further assistance after six weeks of help	66% of people require no further help
The person will require no further assistance within 12 months of receiving help	10% of people require no further help
The person will be assisted to remain in their own home	95% of people remain in their own homes

7.2.8 The overall contract monitoring process is illustrated in the below image:



7.2.9 In addition, the Contracts Team will visit all providers twice a year at the very minimum to complete an audit check of service delivery. The level and frequency of monitoring visits may differ regarding the Provider's assessed risk level of the service, and any additional information received. The visits can be both announced and unannounced.

7.2.10 It is intended that any new providers (i.e. Providers not already delivering Domiciliary Care on behalf of the Council) will receive a monitoring visit as soon as possible

7.1 Quality Assurance

7.1.1 The following data will be drawn up into a Quality Assurance Report, the format will be agreed with the Council on commencement of the contract. Information will include the following:

Key Measure	Evidence Strand – bullet point/ frequency
<ul style="list-style-type: none"> • Risks to people’s health, safety and welfare are assessed and management plans in place. • Sufficient staffing levels • Safe recruitment of staff DBS & references. • Appropriate training • safeguarding • Disaster / emergency Planning and Business Continuity Planning • Business viability 	<ul style="list-style-type: none"> ✓ Number of safeguarding referrals broken down by number made by the provider (demonstrating compliance with Duty to Report) and number made concerning the Provider’s care delivery. ✓ Number of complaints / concerns raised ✓ Notification of any referrals to the Disclosure and Baring Service, when a referral is made. ✓ Contract Monitoring visits to check files of Service Users and Staff ✓ Companies Policies and procedures ✓ Providers annual filed Company accounts ✓ Insurance Schedules and Certificates
<ul style="list-style-type: none"> • Good assessments including focus on outcomes • DoLs Training • Mental Capacity Act Awareness 	<ul style="list-style-type: none"> ✓ Contract monitoring visits ✓ Quarterly Service User Reviews ✓ Training matrix ✓ Service User reviews ✓ Quality Assurance
<ul style="list-style-type: none"> • Outcome focused care planning working in partnership with individuals. • Quarterly Service User reviews. 	<ul style="list-style-type: none"> ✓ Annual Performance Review meetings ✓ Service Review meetings. ✓ Service User feedback, ✓ Quality Assurance
<ul style="list-style-type: none"> • To implement support as soon as possible. • To adapt to the evolving needs of individuals. 	<ul style="list-style-type: none"> ✓ Time from initial request to commencement of care / adjustment to support. ✓ Service Delivery Plans ✓ Quarterly Reviews ✓ Quality Assurance
<ul style="list-style-type: none"> • Effective management. • Good staff retention • Effective induction • ongoing training and development, supervisions, appraisals • Regular team meetings 	<ul style="list-style-type: none"> • Competent Qualified Manager QCF 5 or equivalent. • Contract Monitoring • Induction • Training • Policies & Procedures • Staff meetings • Staff quality assurance • Self Assessment • RISCA Registration and Training

- 7.1.2 **Annual Performance Review** -The purpose of the annual review is to ensure that Providers are meeting all elements of the contract and that the correct processes are in place in which to do this. Providers and other professionals involved will be expected to participate in these meetings. All meetings will be recorded and copies of the minutes distributed amongst all attendees. The outcome of these meetings will help with the decision making process where the Council is considering an extension to the contract under the agreed terms
- 7.1.3 **People's Involvement and Satisfaction** - The Provider will actively seek the views of all people who use the service and their families / carers through a variety of mechanisms such as routine satisfaction surveys and interviews as part of the ongoing Service Review/Evaluation process.
- 7.1.4 The Provider will capture the views of people and ensure that they are used to inform service improvement. Details of how their views have informed the Services should be fed back to the people and reported at contract management meetings with the Council.
- 7.1.5 The Provider will comply with requirements for capturing people's feedback to inform quarterly and half-yearly performance and outcomes monitoring.
- 7.1.6 **Compliments and Complaints** -The Provider will ensure that individuals and/or their families, friends or advocates know how and to whom to complain. A copy of the Provider's complaints policy and procedures should be given and explained to the individuals who use the service and, when appropriate, their representative in an appropriate language/format, including information for raising a complaint with Care Inspectorate Wales (CIW) or Cardiff Council at any stage should the complainant wish to do so. The Provider will inform all complainants that Cardiff Council's complaints procedures may also be implemented.

Complaint Contact Details:

Care Inspectorate Wales (CIW)

Address:

Rhydycar Business Park,
Merthyr Tydfil
CF48 1UZ

Tel Phone: 0300 790 0126

E-mail: CIW@gov.wales

Cardiff Council

The Complaints Team
Room 412 County Hall
Atlantic Wharf, Cardiff
CF10 4UW

Tel Phone: 029 2087 3891

Via our website www.cardiff.gov.uk

- 7.1.6.1 The Providers will ensure that issues/concerns raised by the people who

use the service, their friends/family or representatives and what actions have been taken are recorded.

- 7.1.6.2 The Providers will ensure that individuals feel listened to when complaining about or complimenting the service, or when suggesting improvements, including minor changes to accommodate day-to-day changing needs.
- 7.1.6.3 The Providers will ensure individuals have access to an independent advocate either as it is felt necessary or via request by the Individual or other relative stakeholders.
- 7.1.6.4 The Providers will have in place procedures for responding to allegations or complaints raised against care workers
- 7.1.6.5 The providers will record and report to the Contracts and Service Development Team, on all compliments and complaints received and report on this as part of the Quarterly reporting. Providers will report on their responses to complaints and on any counter responses. Providers will clearly track and report on the progression, resolve/ closure of complaints. Unresolved complaints must be reported quarterly and carried over from previous quarters, as appropriate.

7.2 Regulations and Minimum Standards

- 7.2.1 The following is a list of the minimum standards and regulations all Domiciliary Care Agencies must comply with, by law.

[Regulation and Inspection of Social Care \(Wales\) Act 2016](#)

[The Regulated Services \(Registration\) \(Wales\) Regulations 2017](#)

[The Regulated Services \(Service Providers and Responsible Individuals\) \(Wales\) Regulations 2017](#)

[Statutory guidance for service providers and responsible individuals of care home and domiciliary support services \(External link\)](#)

[The Regulated Services \(Annual Returns\) \(Wales\) Regulations 2017](#)

[The Regulated Services \(Annual Returns and Registration\) \(Amended\) Regulations 2019](#)

[The Regulated Services \(Penalty Notices\) \(Wales\) Regulations 2019](#)

Appendix A – Elements of Care

Elements of the services to be provided will include, but not be confined to:

Element of Service:	Tasks:
Personal Care	<p>Assistance with :-</p> <ul style="list-style-type: none"> • Getting in and out of bed. • Transfer to chair/toilet/wheelchair. • Use of hoists and other equipment to assist with transfers. • Undressing and dressing. • Bathing, showering and washing, using equipment where required. • Oral hygiene - teeth/dentures. • Toileting. • Hair care. • Shaving/facial care. • General grooming tasks. • Visual and hearing aids. • Putting on appliances with appropriate training, for example, leg callipers, artificial limbs, splints and surgical stockings. • Apply creams and topical lotions. <p>Any other tasks required within the care and support plan.</p>
Non-Personal Care Domestic Support	<ul style="list-style-type: none"> • Domestic chores around the home including cleaning • Making and changing the bed. • Support with household tasks to encourage independence • Assistance with setting and using heating systems. • Shopping/assistance with shopping • Assistance with accessing the community and social interaction. • Transporting/assistance with transporting. • The disposal of household waste. • Preparing and lighting fires. • Cleaning of internal windows. • Highlight faults in the home which could cause a risk and report the issues accordingly.
Nutritional	<ul style="list-style-type: none"> • Support with meal preparation

	<ul style="list-style-type: none"> • Support with managing nutrition/meal planning. • Assistance with eating/drinking. • Help monitoring food and fluid intake. • Support with managing food hygiene. • Assistance with managing storage and disposal of food and food waste.
Financial (Planning and Management)	<ul style="list-style-type: none"> • Assist with ensuring bills are paid, as required • Management and filing of correspondence.
Emotional Support	<ul style="list-style-type: none"> • Support to access the local community to reduce social isolation • Support to access the local community to engage in opportunities to encourage independence • Access to after school clubs, other community offer • Providing respite and support for families and carers • Transport to and from positive activities • Support with overall Positive Behavioural Support Plans • Helping to embed routines • Referral to Social Services for liaison with appropriate agencies, where required. • Support for regulation of emotions
Medical Support	<ul style="list-style-type: none"> • Collection of prescriptions. • Management of medication in the home (storage and recording). • Assistance with making or attending appointments. • Assistance with calling the doctor or any medical services. • Support the use of medication. • Administration of medication, including corresponding documentation and recording. • Disposal of medication.

	<ul style="list-style-type: none"> • Management of specific medical conditions as detailed in the care and support plan.
Services to Carers	<ul style="list-style-type: none"> • Preparation of meals or refreshments. • Offering companionship; • Carrying out tasks necessary to the overall support offered to the cared for person, which will support the carer.
Night Services	<ul style="list-style-type: none"> • Sitting service. • Night visiting. <p>Any duty detailed in the local authority's Care or Support Plan and the provider's Service Delivery Plan which includes all the identified services in this Specification.</p>

Appendix B –Cardiff Council Corporate Safeguarding Policy



Cardiff Council -
Corporate Safeguarding

Appendix C- Medication Policy for Vale of Glamorgan (draft)



Medication Policy
Final Version.docx