

# Inspection framework for adult placement

Mae'r ddogfen yma hefyd ar gael yn Gymraeg.  
This document is also available in Welsh.

## Introduction

This inspection framework applies to adult placement services.

It is based upon the principles set out within the Social Services & Well-being (Wales) Act 2014 (“the 2014 Act”) and the Regulation and Inspection of Social Care (Wales) Act 2016 and specifically created using the Adult Placement Services (Service Providers and Responsible Individuals) (Wales) Regulations 2019 (“the 2019 Regulations”) and the associated statutory guidance.

### Rights based approach

This inspection framework takes into account our commitment to promoting and upholding the rights of people who use care and support services. This includes, but is not limited to the rights of people set out in the following legal frameworks:

- The Human Rights Act 1998<sup>1</sup>
- The Equality Act 2010<sup>2</sup>
- The United Nations Convention on the Rights of Persons with Disabilities<sup>3</sup>
- The United Nations Principles for Older Persons
- The Mental Capacity Act 2005<sup>4</sup>
- The Deprivation of Liberty Safeguards (DoLS)<sup>5</sup>.
- The Welsh Language Standards<sup>6</sup>

Further information on our commitment to upholding human rights within our regulatory and inspection work is set out on our website<sup>7</sup>. Further information on our rights based approach to inspection is also set out in our Code of Practice for Inspection of Regulated Services<sup>8</sup>.

### Well-being and inspection

Our approach to inspection takes account of the principles of the 2014 Act and the legal definition of “well-being”.

The primary focus of the inspection is consideration of the national well-being outcomes. The framework supports inspectors to consider evidence for how the service is enabling the people it supports to achieve their well-being outcomes

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1 [www.equalityhumanrights.com/en/human-rights/human-rights-act](http://www.equalityhumanrights.com/en/human-rights/human-rights-act)

2 [www.gov.uk/guidance/equality-act-2010-guidanc](http://www.gov.uk/guidance/equality-act-2010-guidanc)

3 <https://www.equalityhumanrights.com/en/our-human-rights-work/monitoring-and-promoting-un-treaties/un-convention-rights-persons-disabilities>

4 [www.legislation.gov.uk/ukpga/2005/9/contents](http://www.legislation.gov.uk/ukpga/2005/9/contents)

5 [Due to be replaced by Liberty Protection Safeguards](#)

6 [www.legislation.gov.uk/wsi/2015/996/schedule/1/made](http://www.legislation.gov.uk/wsi/2015/996/schedule/1/made)

7 <https://qweddill.gov.wales/docs/cssiw/general/170309humanrightsen.pdf>

8 [https://careinspectorate.wales/sites/default/files/2019-02/190211-code-of-practice-1-en\\_0.pdf](https://careinspectorate.wales/sites/default/files/2019-02/190211-code-of-practice-1-en_0.pdf)

This inspection framework maps the 2019 Regulations and associated statutory guidance under the three themes of 'Care and Support', 'Leadership and Management' and the 'Environment'.

We believe that the extent to which people's well-being outcomes are achieved will be underpinned by the effectiveness of arrangements in place by regulated service providers in the themes of 'Care and Support', 'Leadership and Management' and 'Environment'.

Where outcomes for people are poor we need to explore the reasons that lie behind this through the lines of enquiry in the framework.

Inspectors will undertake their inspections considering and reporting on our inspection themes of 'Well-being', 'Care and Support', 'Leadership and Management', and 'Environment'.

What well-being means	National well - being Outcomes	C&S	L&M	ENV
1. Securing rights and entitlements Also for adults: Control over day-to-day life	<ul style="list-style-type: none"> <li>I know and understand what care, support and opportunities are available and use these to help me achieve my well-being.</li> <li>I can access the right information, when I need it, in the way I want it and use this to manage and improve my well-being.</li> <li>I am treated with dignity and respect and treat others the same.</li> <li>My voice is heard and listened to.</li> <li>My individual circumstances are considered.</li> <li>I speak for myself and contribute to the decisions that affect my life, or have someone who can do it for me.</li> </ul>	1-4	5-7 9-11 16	17
2. Physical and mental health and emotional wellbeing. Also for children: Physical, intellectual, emotional, social and behaviour development	<ul style="list-style-type: none"> <li>I am healthy and active and do things to keep myself healthy.</li> <li>I am happy and do the things that make me happy.</li> <li>I get the right care and support, as early as possible.</li> </ul>	1-4	5-11 16	
3. Protection from abuse and neglect	<ul style="list-style-type: none"> <li>I am safe and protected from abuse and neglect.</li> <li>I am supported to protect the people that matter to me from abuse and neglect.</li> <li>I am informed about how to make my concerns known.</li> </ul>	1-4	5-9 11-16	17
4. Education, training and recreation	<ul style="list-style-type: none"> <li>I can learn and develop to my full potential.</li> <li>I do the things that matter to me.</li> </ul>	1, 2	5-7 10, 11, 13, 16	
5. Domestic, family and personal relationships	<ul style="list-style-type: none"> <li>I belong.</li> <li>I contribute to and enjoy safe and healthy relationships</li> </ul>	1,2, 4	5-7 9, 11-12, 16	
6. Contribution made to society	<ul style="list-style-type: none"> <li>I engage and make a contribution to my community.</li> <li>I feel valued in society</li> </ul>	1,2	11, 16	
7. Social and economic well-being. Also for adults: Participation in work	<ul style="list-style-type: none"> <li>I contribute towards my social life and can be with the people that I choose.</li> <li>I do not live in poverty.</li> <li>I am supported to work.</li> <li>I get the help I need to grow up and be independent.</li> <li>I get care and support through the Welsh language if I want it.</li> </ul>	1,2	5-7 10,11, 13, 16	17

8. Suitability of living accommodation	• I live in a home that best supports me to achieve my well-being.	1-3	5-7, 10, 13, 16	17
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### Care and Support

Area of Assessment		Line of enquiry	Page Number
1	Suitability of the service	<b>Line of Enquiry 1:</b> The extent to which a service provider considers a wide range of views and information, to confirm that the service is able to meet individual's needs and support people to achieve their personal outcomes. <b>(Regulation 10)</b>	<b>8-9</b>
2	Development and review of the personal plan	<b>Line of Enquiry 2:</b> The extent to which individuals feel confident that service providers have an accurate and up to date plan for how their care is to be provided in order to meet their needs. <b>(Regulation 13-15)</b>	<b>10-11</b>
3	Standards of care and support	<b>Line of Enquiry 3:</b> The extent to which individuals are provided with care and support through a service designed in consultation with the individual and which considers their personal wishes, aspirations and outcomes and any risks and specialist needs which inform their care and support. <b>(Regulation 17-20)</b>	<b>12-14</b>
4	Safeguarding	<b>Line of Enquiry 5:</b> The extent to which service providers have in place mechanisms to safeguard vulnerable individuals to whom care and support is provided. <b>(Regulation 21-22 and 24-25)</b>	<b>15-17</b>

## Leadership and Management

	Area of Assessment	Line of enquiry	Page Number
5	Overall governance	<b>Line of Enquiry 1:</b> The extent to which the service provider has governance arrangements in place to support the smooth operation of the service and ensures there is a sound basis for providing high quality care and support for individuals using the service and to support them to achieve their personal outcomes. <b>(Regulation 2, 5/6 and 8)</b>	<b>18-20</b>
6	Statement of purpose	<b>Line of Enquiry 2:</b> The extent to which the service is provided in accordance with the statement of purpose. <b>(Regulation 3)</b>	<b>21</b>
7	Quality assurance	<b>Line of Enquiry 3:</b> The extent to which arrangements are in place for the effective oversight of the service, through ongoing quality assurance processes that review standards of care and compliance with regulations and that information and views obtained are used for the continued development and improvement of the service. <b>(Regulation 4, 45, 52-55 and 58-60)</b>	<b>22-26</b>
8	Financial sustainability	<b>Line of Enquiry 4:</b> The extent to which the service provider has oversight of financial arrangements and investment in the service so that it is financially sustainable and supports people to be safe and achieve their personal outcomes. <b>(Regulation 7)</b>	<b>27</b>
9	Culture	<b>Line of Enquiry 5:</b> The extent to which the service provider operates a culture of openness, honesty and candour at all levels and ensures potential conflicts of interests are managed in an open way. <b>(Regulation 9, 42, 62)</b>	<b>28</b>
10	Information	<b>Line of Enquiry 6:</b> The extent to which individuals have access to information about the service to enable them to have a clear understanding of service provision and records relating to how the service is delivered are accurate, accessible and available to individual's and their representative. <b>(Regulation 16, 40, 57)</b>	<b>29-30</b>

11	Staffing	<b>Line of Enquiry 7:</b> The extent to which individuals and adult placement carers are supported by a service that provides appropriate numbers of staff who are suitably fit and have the knowledge, competency, skills and qualifications to provide the service which helps achieve the individual's personal outcomes. <b>(Regulation 27-32, 46-51)</b>	<b>31-36</b>
12	Whistleblowing	<b>Line of Enquiry 8:</b> The extent to which people working at the service are supported to raise concerns about the service through whistleblowing procedures. <b>(Regulation 44, 61)</b>	<b>37-38</b>
13	Managing individual's money	<b>Line of Enquiry 9:</b> The extent to which Individuals are supported to manage their money. <b>(Regulation 23)</b>	<b>39</b>
14	Notifications	<b>Line of Enquiry 10:</b> The extent to which relevant regulatory bodies and statutory agencies are notified where there are concerns and significant events affecting individuals. <b>(Regulation 41, 63)</b>	<b>40</b>
15	Complaints	<b>Line of Enquiry 11:</b> The extent to which the service promotes an accessible complaints policy and procedure and demonstrates learning from complaints to improve the service. <b>(Regulation 43, 56)</b>	<b>41-42</b>
16	Adult placement carers	<b>Line of Enquiry 12:</b> The extent to which adult placement carers are supported effectively by service providers in order that they can meet the care and support needs of individual's placed with them. <b>(Regulation 11-12 and 33-36)</b>	<b>43-46</b>



## Environment

	Area of Assessment	Line of enquiry	Page Number
17	Overall Environment	<b>Line of Enquiry 1:</b> The extent to which service providers ensure that individual's care and support is provided in a location and environment and, where relevant, with any facilities and equipment that promotes achievement of their personal outcomes. <b>(Regulation 37-39)</b>	<b>47</b>

**Line of Enquiry 1:** The extent to which a service provider considers a wide range of views and information, to confirm that the service is able to meet individual's needs and support people to achieve their personal outcomes. (**Regulation 10**)

***What good looks like***

***Statutory Guidance - Regulation 10 - Suitability of the service***

- Service providers have in place a policy and procedures on placements and commencement of the service. This includes but is not limited to:
  - arrangements for confirming that the service can or cannot support the individual to achieve their personal outcomes;
  - a process to match individuals with an adult placement carer for compatibility;
  - who will be consulted as part of the process;
  - the information to be considered;
  - the assessment processes (including for emergency admissions) where a care and support plan is not available and who will undertake the assessment;
  - the circumstances where a service will not be provided;
  - opportunities to visit / stay with the adult placement carers and other members of the household; and
  - the arrangements for commencing the service.
- A summary of the matching and placement procedure is included in the statement of purpose and the service provider's written guide to the service (see regulation 16).
- Before agreeing to provide a service the service provider makes an informed decision as to whether or not they can meet the individual's care and support needs. In making this decision the service provider:
  - takes into account the requirements set out within regulation 10(3);
  - consults with the individual and the placing authority (if applicable) to determine what matters to the individual;
  - considers any existing care and support plan;
  - considers any risks to the individual, the adult placement carer, members of the adult placement carer's family, anyone else living in the household in an adult placement arrangement, and staff; and
  - obtains information relating to the individual's specialist needs and requirements in order to confirm these can be met.
- Information obtained is sufficient to enable smooth transition for the individual to the adult placement.
- Proper consideration is taken to ensure the individual is matched with a suitable adult placement carer, and consideration is given to the potential impact of the placement on the individual, the adult placement carers and members of the adult placement carer's family.

- People making these decisions on behalf of the service provider have sufficient responsibility and authority within the organisation to be able to decide whether the service can meet the individual's needs.
- The individual is able to visit and to stay in the adult placement carer's home on a trial basis before making a decision to be placed. The length of any trial visit is proportionate to the length of placement (short break or long stay) expected. Any trial visit enables the individual to:
  - meet other members of the adult placement carer's household; and
  - see the home, the room which the individual would occupy, and the local community.
- Where an individual does not have an existing care and support plan - for example individuals who are self-funding their care - an assessment is undertaken prior to agreeing to provide a service, in line with regulation 10(4).
- Where it is necessary for the service provider to conduct its own assessment of the individual, the provider assessment identifies:
  - the individual's personal outcomes;
  - the care and support needed to support the individual to achieve their personal outcomes;
  - their personal preferences (taking into account any religious beliefs) in how these can be achieved; and
  - any risks to the individual's well-being or risks to the well-being of other members of the household and how these will be mitigated.
- Any assessment undertaken is completed in consultation with the individual and/or their representative.
- Where the adult placement service is undertaking its own assessment of the individual, it ensures staff have the right skills and knowledge to do so, in line with regulation 10(5).
- Where a placement is made on an emergency basis, every effort should be made to secure as much information as possible (including relevant assessments) prior to placement and to ensure that the service can meet the individual's needs.

**Line of Enquiry 2:** The extent to which individuals feel confident that service providers have an accurate and up to date plan for how their care is to be provided in order to meet their needs. **(Regulation 13-15)**

***What good looks like***

***Statutory Guidance - Regulation 13 - Personal plan***

- When a decision is made that the service provider can meet an individual's care and support needs through an adult placement an initial personal plan is developed, co-produced with the individual, the adult placement carers, the placing authority (if applicable) and any representative (if appropriate) **before** the individual is placed with the adult placement carer.
- In the case of an emergency, the initial personal plan will be in place within 24 hours of the individual being placed with the adult placement carer.
- The initial personal plan is reviewed and updated during the first 7 days of commencement of service.
- The personal plan will set out:
  - the actions required to meet the individual's well-being, care and support needs on a day to day basis. This includes the details of their care needs (including self-medication), their personal preferences and routines for how this will be provided but is not a daily schedule of activities;
  - how the individual will be supported to achieve their personal outcomes;
  - how the individual's wishes, aspirations and religious beliefs will be supported;
  - steps to identify risks to the individual's well-being and how this will be managed;
  - steps to support positive risk taking;
  - steps to maintain, re-able and/or achieve independence.
- When a personal plan is being revised it is co-produced with the individual, the adult placement carers, the placing authority (if applicable) and any representative (if appropriate).
- A copy of the personal plan is provided to the individual receiving the service and the adult placement carer, in a language and format appropriate to the individual's needs, age and level of understanding.
- Individuals, adult placement carers, the placing authority (if applicable) and any representatives (if appropriate) are informed about how they can access the personal plan.

***Statutory Guidance - Regulation 14 - Review of personal plan***

- The personal plan is kept under review and is amended to reflect changes in the individual's care and support needs and

personal outcomes.

- The plan is reviewed every three months or sooner, if there is a change in the individual's needs, and in line with any reviews undertaken by the placing authority (if applicable).
- Reviews are undertaken involving the individual and, where appropriate, with the agreement of the individual, any representative.
- Reviews are proportionate to meet the needs of the individual and the length of placement planned / already undertaken. Reviews are undertaken in a non-formalised / formalised setting depending on the needs of the individual.
- Reviews take into account the information recorded by the adult placement carer relating to the individual achieving their personal outcomes. Where this differs significantly from any commissioning body's assessment and care and support plan, the relevant commissioner is notified.

***Statutory Guidance - Regulation 15 - Records of personal plans***

- A copy of the personal plan is provided in a format and language appropriate to the individual's needs.
- Individuals, the adult placement carers, the placing authority (if applicable) and any representatives are informed about how they can access the personal plan.

**Line of Enquiry 3:** The extent to which individuals are provided with care and support through a service designed in consultation with the individual and which considers their personal wishes, aspirations and outcome of any risk and specialist needs which inform their care and support. (Regulation 17-20)

*What good looks like*

**Statutory Guidance - Regulation 17 – Standards of care and support – overarching requirements**

- The service provider has arrangements in place to ensure care and support is provided to the individual in line with the individual's personal plan and the individual placement agreement, and the service provider's statement of purpose.
- The service provider's expectations as to the standards of care and support that an adult placement carer must provide to an individual placed with them are clearly set out in the statement of purpose.
- Achievement of the individual's personal outcomes is supported by policies and procedures of the service provider.
- Service providers ensure the service is responsive and proactive in identifying and mitigating risks, and in supporting positive risk-taking and independence where it has been determined this is appropriate.
- Adult placement carers are supported to seek medical advice and other professional help for an individual (where appropriate). Where necessary, the service provider makes referrals to the placing authority in a timely manner.
- Adult placement carers are supported, through supervision and training, to ensure they can provide high quality care and support to meet the individual's care and support needs and to enable them to achieve their personal outcomes. This includes, but is not limited to:
  - recognising signs of abuse
  - positive behavioural support
  - basic first aid; and
  - health promotion
- Service providers ensure that the support they provide enables adult placement carers to provide good quality care and support for the individuals placed with them in relation to their:
  - physical, mental and emotional well-being;
  - cultural, religious, social or spiritual needs;
  - educational, training and recreation needs;
  - family and personal relationships;

- ability to control their everyday life and where relevant participation in work;
- intellectual, emotional and behavioural development;
- rights and entitlements; and
- protection from abuse and neglect.
- Adult placement carers are supported to enable the individual to be as independent as possible, including support for self-care such as self-medication.
- Adult placement carers receive appropriate training to understand behaviours and adopt strategies to support individuals with their behaviours to achieve positive well-being and outcomes.
- Adult placement carers are supported to assist the individual to be healthy and active.
- Where appropriate, service providers support adult placement carers to ensure individuals receive relevant health checks and are provided support to access ongoing reviews.
- Service providers support adult placement carers to ensure that any aids are appropriately maintained so they may be used effectively.

***Statutory Guidance - Regulation 18 - Information***

- Service providers support adult placement carers to ensure individuals can participate in care planning and reviews during their placement and make decisions about the way care and support is provided to them.
- Service providers ensure adult placement carers receive the information they need to provide care and support for the individual on a day to day basis in accordance with the personal plan.
- Service providers have arrangements in place to enable individuals to understand the information provided to them.

***Statutory Guidance - Regulation 19 - Language and communication***

- Service providers have arrangements in place to support the adult placement carers with an individual's specific communication and language needs in line with the statement of purpose. Where necessary this will include putting measures in place to ensure that the individual can communicate meaningfully. This includes:
  - any training or support, where appropriate, to communicate with the individual in their language of need and/or choice; and
  - access, where appropriate, to additional means of communication such as Picture Exchange Communication System (PECS), Treatment and Education of Autistic and related Communication Handicapped Children (TEACCH), Makaton and British Sign Language.
- Service providers identify an individual's communication needs as part of their determination as to whether the service can meet

their needs.

- Individuals and adult placement carers can understand staff when they communicate with them.
- Service providers deliver or work towards actively offering a service in the Welsh language to individuals or adult placement carers whose first language is Welsh.

***Statutory Guidance - Regulation 20 - Respect and Sensitivity***

- Service providers ensure individuals are aware of their rights and entitlements under the law, and under equality and diversity policies held by the service provider
- Service providers support adult placement carers to ensure that an individual is:
  - listened to, and communicated with, in a courteous and respectful manner with their care and support being the main focus of the adult placement carer's attention; and
  - treated with respect and feels valued.
- Individuals and adult placement carers are encouraged to contribute their views, if they choose to, on the way in which the service is run.



**Line of Enquiry 4:** The extent to which service providers have in place mechanisms to safeguard vulnerable individuals to whom they provide care and support. (Regulation 21-22 and 24-25)

*What good looks like*

**Statutory Guidance - Regulation 21 – Safeguarding - Overarching Requirement**

- When they begin the placement, individuals and their representatives are given information about safeguarding, how to raise a concern and what support is available to enable them to do so.
- Staff and adult placement carers can access up to date safeguarding policies and procedures.
- Staff and adult placement carers receive training relevant to their role to enable them to understand their responsibility to safeguard and protect vulnerable individuals. This includes both internal and local safeguarding arrangements including how to raise a concern (whistleblowing).
- Staff training is ongoing at regular intervals in line with local safeguarding recommendations.
- Staff are aware of their individual responsibilities for raising concerns to ensure the safety and well-being of individuals.
- Service providers make provision to support staff raising safeguarding concerns (whistleblowing).
- Service providers work in partnership with other relevant professionals and agencies to assist and manage risks to individuals and to participate in the safeguarding process.
- Records of safeguarding referrals and outcomes are maintained to enable oversight and scrutiny of safeguarding within the service. Protection of vulnerable individuals must be overseen by the manager and responsible individual and within the governance structure, with arrangements made for oversight at board level.
- Service providers ensure outcomes arising from any safeguarding referral are communicated to the individual in a method appropriate to their age and level of understanding taking into account their specific condition and/or any communication needs. This is also communicated to any representatives (if appropriate).

**Statutory Guidance - Regulation 22 - Policies and Procedures**

- There is an up to date safeguarding policy and procedures in place.
- Safeguarding policies and procedures are aligned to current legislation, national guidance and local adult safeguarding procedures.
- The safeguarding policy and procedures include the individual roles and responsibilities of staff and others working at the service, in identifying, receiving and reporting allegations of abuse, neglect or improper treatment or suspected abuse, neglect or improper treatment. This will include instruction for staff on actions to be taken and mechanisms for referral to the placing

authority and other relevant partners and agencies.

- The safeguarding policy and procedures include the role and responsibilities of adult placement carers in relation to allegations or disclosures of abuse or improper treatment or suspected abuse or improper treatment by any individual in the adult placement carer's household. This will include how to report such allegations or disclosures to the service provider, placing authority (where applicable) and other relevant partners and agencies.
- Service providers ensure individuals are informed of their right to access independent professional advocacy services.

***Statutory Guidance - Regulation 24 – The appropriate use of control and restraint***

- Service providers have a policy and procedures in place on the appropriate use of control and restraint. This sets out:
  - the requirement on adult placement carers for any use of control or restraint to adhere to current national guidance and legislation; and
  - The requirement for training in any methods of control or restraint to be undertaken prior to the use of any such control or restraint.
- Service providers ensure a positive and constructive approach is adopted by adult placement carers to support an individual's behaviour. Any approach to support the individual's behaviour is consistent with:
  - meeting the individual's needs for care and support; and
  - the well-being of other family members for whom care and support is provided.
- Staff and adult placement carers are aware of, understand and follow the policy and procedures on the appropriate use of control and restraint.
- Adult placement carers receive behavioural support training that is relevant to their role to make sure any control or restraint practices are only used proactively and when absolutely necessary, in line with current national guidance.
- Staff and adult placement carers are kept up to date on the policy and procedures in line with any changes to guidance and legislation.
- Service providers ensure arrangements are in place so that whenever adult placement carers are using forms of control or restraint, providers are able to check that it:
  - is used as part of a proactive approach to behavioural support;
  - is proportionate to the risk of harm and the seriousness of that harm to the individual placed by the service or another person;
  - takes account of the assessment of the individual's needs and their capacity to consent to such treatment; and
  - follows current legislation and guidance.
- Service providers regularly monitor and review the approach to, and use of, control or restraint used by adult placement carers

and report on this within their governance framework. This includes:

- the details of the incident and actions taken in response; and
- sufficient detail to enable analysis and review of the individual's care and support needs as well as to inform wider review of service provision.
- Service providers have arrangements in place to ensure incidents of control and restraint are recorded and reported to them by adult placement carers to the service provider within 24hrs.
- Records of the use of control and restraint are reviewed and reported upon within the quality of care review.

***Statutory Guidance - Regulation 25 – Deprivation of Liberty***

- Service providers act at all times in accordance with the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards as well as the Code of Practice to the Mental Capacity Act 2005 and supplementary Code of Practice for Deprivation of Liberty Safeguards.
- Staff and, where relevant, adult placement carers are trained at appropriate intervals and in line with any changes to legislation and guidance to understand their responsibility under the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards.

**Line of Enquiry 5:** The extent to which the service provider has governance arrangements in place to support the smooth operation of the service and ensures there is a sound basis for providing high quality care and support for individuals using the service and to support them to achieve their personal outcomes. **(Regulation 2, 5/6 and 8)**

**What good looks like**

**Statutory Guidance - Regulation 2 - Requirements in relation to the provision of the service**

- Service providers have clear arrangements for the oversight and governance of the service in order to establish, develop and embed a culture which ensures that the best possible outcomes are achieved for individuals and adult placement carers using the service and to meet the requirements of the Regulations. This includes but is not limited to:
  - policies and procedures to achieve the aims of the statement of purpose and to place individuals and adult placement carers at the centre of the service;
  - systems for matching compatible individuals with adult placement carers; systems for assessment, care planning, monitoring and review which support evidence-based practice and enable individuals and adult placement carers to achieve the individual's personal outcomes;
  - processes to ensure care and support is delivered consistently and reliably;
  - safe staffing arrangements, underpinned by professional development, to support adult placement carers using the service to meet the care and support needs of individuals;
  - quality and audit systems to review progress and inform the development of the service;
  - a proactive approach to equal opportunities and diversity; and
  - suitable and accessible premises, facilities and equipment.

**Statutory Guidance - Regulation 5/6 - Requirements in relation to the responsible individual**

- Service providers have systems and processes in place for regular formal discussion with, and support for, the responsible individual.
- Service providers support the responsible individual to undertake training which enables them to carry out their role effectively and to meet the aims of the service as outlined in the statement of purpose and in line with practice guidance recommended by SCW. Training for responsible individuals includes that which covers:
  - legislative framework and requirements;
  - specific duties of a responsible individual;

- service performance and quality management; and
- shaping service culture, etc.
- Where a responsible individual has failed to fulfil their role the service provider notifies the service regulator of any action taken and, where relevant, advises on the arrangements to designate a replacement.
- If there is no responsible individual or the responsible individual is unable to fulfil their duties for any reason, for example they are absent from their role due to illness, the service provider ensures that the responsibility for oversight of the management of the service, as set out in Parts 12 to 16 of the Regulations, is still being met under alternative arrangements.

*[Where the service provider is an individual]*

- The responsible individual undertakes training which enables them to carry out their role effectively and to meet the aims of the service as outlined in the statement of purpose and in line with practice guidance recommended by SCW. Training includes that which covers:
  - legislative framework and requirements;
  - specific duties of a responsible individual;
  - service performance and quality management; and
  - shaping service culture etc
- If the responsible individual is unable to fulfil their duties for any reason, for example they are absent from their role due to illness, the responsible individual ensures alternative arrangements are put in place to ensure the requirements in regulation 6(3) are met.

***Statutory Guidance - Regulation 8 - Requirements to provide the service in accordance with policies and procedures***

- Service providers have the policies and procedures in place as required by the Regulations.
- Policies and procedures are proportionate to the service being provided in accordance with the statement of purpose. Where applicable, policies and procedures take into account the needs of other members of the adult placement carer's household.
- Service providers ensure policies and procedures reflect arrangements for short-term breaks for individuals, where these are provided by the service provider.
- Policies and procedures:
  - are aligned to any current legislation and national guidance;
  - provide guidance for staff to ensure that services are provided in line with the statement of purpose; and
  - set out requirements to inform individuals, adult placement carers and any representatives about how the service is provided.
- Policies, procedures and practices are reviewed and updated in light of changes to practice, changing legislation and best

practice recommendations.

- Staff, individuals and adult placement carers using the service have the opportunity to be involved in developing policies and procedures.
- Where changes are made to the statement of purpose the policies and procedures are reviewed and updated to reflect the changes.
- Service providers ensure staff have access to, and knowledge and understanding of, the policies and procedures which support them in their role in achieving the best possible outcomes for individuals.
- All policies and procedures are available on request to the individuals and adult placement carers who use the service, any representatives and, where appropriate, relevant placing authorities.
- Policies and procedures are in a format accessible to the individual and adult placement carers and support is provided to assist their understanding of these.
- Systems for monitoring and improvement include those which ensure the service is being run in accordance with the policies and procedures.

**Line of Enquiry 6:** The extent to which the service is provided in accordance with the statement of purpose. **(Regulation 3)**

### What good looks like

#### **Statutory Guidance - Regulation 3 - Statement of Purpose**

- The statement of purpose is fundamental to the service. It should:
  - accurately describe the services provided, including any arrangements for short break provision;
  - state where and how these services will be provided; and
  - state the arrangements to support the delivery of the services.
- It must include the information set out in The Regulated Services (Registration) (Wales) Regulations 2017.
- In preparing a statement of purpose, the service provider takes into account any statement of purpose guidance provided by the service regulator.
- Service providers review and update the statement of purpose at least annually or earlier if changes are being made to the service provided.
- Where there is an intention to change the service being provided, the statement of purpose is updated to reflect the change. The provider notifies those persons set out in regulation 3(6) at least 28 days prior to the changes being made. An example of this includes changes to the normal staffing arrangements or levels as set out in the existing statement of purpose.
- Where there is an intention to change the service being provided with immediate effect, i.e. within the 28 days notification period (required by regulation 6(3)), for example in response to an urgent request, the service provider:
  - notifies the service regulator immediately (and where practicable, prior to implementing the change); and
  - updates the statement of purpose to reflect the change without delay and provides a copy to the service regulator.
- Where a change to the statement of purpose is proposed, the service provider satisfies the service regulator of their ability to provide the services proposed by, for example, providing additional information or receiving a visit from the service regulator to the service (where appropriate).
- Where the statement of purpose is updated a record is kept of the version and date of amendment.
- A copy of the statement of purpose is readily available to those listed in regulation 3(6).

**Line of Enquiry 7:** The extent to which arrangements are in place for the effective oversight of the service, through ongoing quality assurance processes that review standards of care and compliance with regulations and that information and views obtained are used for the continued development and improvement of the service. **(Regulation 4, 45, 52-55 and 58-60)**

### What good looks like

#### **Statutory Guidance - Regulation 4 - Requirements in relation to monitoring and improvement**

- Service providers have systems and processes in place to monitor, review and improve the quality of the service. This will include identifying:
  - who is responsible for ensuring this is done;
  - how this will be done;
  - how often this takes place; and
  - arrangements for the responsible individual to report to the service provider.
- The outcome of any review is analysed and reviewed by people with the appropriate knowledge, skills and competence to understand its significance and take action to secure improvement. Service providers seek professional/expert advice as needed and in a timely manner to help secure improvements.
- Service providers can demonstrate how they have:
  - analysed and responded to the information gathered; and
  - used the information to make improvements.
- Service providers monitor progress against plans to improve the quality and safety of services, and take appropriate action immediately where progress is not achieved as expected.
- The systems and processes are continually reviewed to make sure they enable the service provider to identify where the quality of services are being, or may be, compromised and to enable an appropriate timely response.
- As part of the quality review process, service providers:
  - encourage feedback;
  - regularly seek the views of adult placement carers and individuals about the quality of care and support in placements;
  - are able to demonstrate they have done this and provide an analysis of the feedback they have received; and
  - review the quality of premises at which placements are made.
- The methods used to engage with and gain the views of those listed in regulation 4(2) using the service are appropriate to their



age, level of understanding and take into account any specific condition and/or any communication needs.

- Information collated through quality and audit systems is used to develop the review of quality of care review report in line with regulation 59(4).

***Statutory Guidance - Regulation 45 - Supervision of management of the service***

- The responsible individual follows the service provider's prescribed systems and processes to enable proper oversight of the management, quality, safety and effectiveness of the service. This includes, but is not limited to, ensuring the service:
  - focuses on the needs of the individual and supports the adult placement carer;
  - listens to individuals and the adult placement carers;
  - responds positively to any concerns or complaints;
  - does not place individuals or adult placement carers at unnecessary risk;
  - achieves best possible outcomes for individuals and the adult placement carers;
  - fulfils the statement of purpose; and
  - has sufficient numbers of staff who are trained, competent and skilled to undertake their role.
- The responsible individual has systems in place to review and assess the way in which the manager implements actions from the findings of internal quality assurance and external inspection reports, within required timescales.
- There are clear lines of accountability, delegation and responsibility set out in writing between the responsible individual and the manager (unless the manager is also the responsible individual).
- Arrangements are in place for the manager to have direct access to the responsible individual in addition to the opportunity to meet formally as part of the responsible individual's quality reviews (unless the manager is also the responsible individual).
- Arrangements are in place to ensure that the manager is supported by supervision and training, and has opportunities to gain skills for professional development that will support them in their role.

***Statutory Guidance - Regulation 52 - Visits***

- The responsible individual visits the service in person to monitor the performance of the service in relation to its statement of purpose and to inform the quality of care review. The visit includes the following:
  - talking to, with consent and in private, a sample of individuals using the service, any representatives, adult placement carers and staff; and
  - inspecting the premises of the service provider, a selection of records of events and any complaints records.
- The responsible individual ensures systems are in place to provide evidence that visits are logged and documented.

### ***Statutory Guidance - Regulation 53 - Oversight of adequacy of resources***

- The responsible individual ensures that systems and processes are in place which enable them to collate information about the service and any areas that may need closer observation/consideration and/or improvement. This includes, but is not limited to:
  - staff turnover;
  - staff sickness levels;
  - complaints;
  - safeguarding issues;
  - inspection reports by the service regulator; and
  - inspection outcomes and/or reports from other relevant agencies, i.e. Health and Safety Executive (HSE) and fire service.
- The responsible individual has suitable arrangements in place to alert the service provider immediately where the service is:
  - not complying with policies and procedures;
  - failing or unable to address issues raised in inspection reports; and
  - being provided in a way which is contrary to the statement of purpose.

### ***Statutory Guidance - Regulation 54 - Other reports to the service provider***

- The responsible individual ensures suitable arrangements are in place to report to the service provider in line with the requirements of regulations 54 and 59.
- The responsible individual has a system in place to submit reports to the service provider that accurately reflect overall service quality and performance. This includes arrangements for the responsible individual to feed back and communicate any urgent matters requiring immediate action. This includes, but is not limited to:
  - sudden or unexplained death of individuals using the service or adult placement carers;
  - natural disaster;
  - financial irregularities;
  - significant outbreak of infection;
  - significant concerns raised by the service regulator or commissioners; and
  - any event, which affects staff availability.

### ***Statutory Guidance - Regulation 55 - Engagement with individuals and others***

- The responsible individual has suitable arrangements in place to enable feedback on all aspects of service provision and ensure that these arrangements are accessible to, and take into account the views of, all those listed under regulation 55(1).
- The responsible individual ensures the methods used to engage with and gain the views of individuals and the adult placement carers using the service are appropriate to their age, level of understanding and take into account any specific condition or

communication needs.

- The responsible individual has positive relationships with, and is accessible to, people outside the service. This includes but is not limited to:
  - The individual and/or their representative;
  - adult placement carers;
  - commissioning authorities;
  - regulators; and
  - professional bodies.

***Statutory Guidance - Regulation 58 - Duty to ensure policies and procedures are up to date***

- The responsible individual ensures suitable arrangements are in place to review policies and procedures, set out in regulation 8, in line with these regulations.
- The responsible individual ensures suitable arrangements are in place to ensure staff and adult placement carers have access to, and knowledge and understanding of, the policies and procedures which support them in their role in achieving the best possible outcomes for individuals.

***Statutory Guidance - Regulation 59 - Quality of care review***

- The responsible individual has suitable arrangements in place to assess, monitor and improve the quality and safety of the service. This includes, but is not limited to:
  - the collation and analysis of feedback from those listed under regulation 55(1);
  - the collation and analysis of feedback on the care and support provided to an individual in a placement;
  - issues and lessons learned in the analysis of complaints and safeguarding matters;
  - issues arising from monitoring the adequacy and quality of adult placement premises;
  - patterns and trends identified through the analysis of notifications, safeguarding matters, whistleblowing concerns and complaints;
  - the outcome of any inspection reports from the service regulator;
  - the outcome of visits to monitor the service by the responsible individual; and
  - audits of records.
- The responsible individual ensures that the audit systems and processes for monitoring and reviewing the service give assurance that a high quality service is provided, which achieves the best possible outcomes for individuals.
- The responsible individual has suitable arrangements in place to ensure systems and processes are continually reviewed to enable the responsible individual to identify where the quality and/or safety of services is being, or may be, compromised, and to

respond appropriately without delay.

- The responsible individual has suitable arrangements in place to ensure all feedback is acknowledged, recorded and responded to as appropriate.
- The responsible individual has suitable arrangements in place to ensure areas of learning from complaints, safeguarding and whistleblowing are shared with staff to improve the service and encourage safe, compassionate care practices.
- The responsible individual ensures areas of learning are analysed and that recommendations are made to the service provider as to how and where the quality and safety of service can be improved. The report, which includes the information that has informed it (relating to those areas set out above) will inform or form part of the statement of compliance to be included in the service provider's annual return.

***Statutory Guidance - Regulation 60 - Statement of compliance with the requirements as to standards of care and support***

- The responsible individual has prepared and is accountable for the quality and accuracy of the information provided in the statement of compliance and service provider's annual return.

**Line of Enquiry 8:** The extent to which the service provider has oversight of financial arrangements and investment in the service so that it is financially sustainable and supports people to be safe and achieve their personal outcomes. **(Regulation 7)**

**What good looks like**

***Statutory Guidance - Regulation 7 – Requirements in relation to the financial sustainability of the service***

- Systems are in place to ensure financial planning, budget monitoring and financial control is carried out effectively.
- Systems are in place to ensure financial stability and consumer protection in line with any national guidance and financial regulations.
- Service providers have the financial resources needed to provide, and continue to provide, the services described in the statement of purpose and in order to meet the requirements of the Regulations.
- Service providers have appropriate insurance and suitable indemnity arrangements in place to cover potential liabilities arising from death, injury, or other causes, loss or damage to property, and other financial risks.
- Where audited accounts are not available, annual accounts are completed by a qualified accountant for the purpose of regulation and inspection.
- The accounts demonstrate that the service is financially viable and likely to have sufficient funding to continue to fulfil service delivery as set out in its statement of purpose.
- The service provider ensures prompt payments are made to adult placement carers for any allowances or expenses agreed, which cover the costs of providing care and support to an individual.
- The service provider ensures adult placement carers understand the financial or other support available to them.

**Line of Enquiry 9:** The extent to which the service provider operates a culture of openness, honesty and candour at all levels and ensures potential conflicts of interests are managed in an open way. **(Regulation 9, 42, 62)**

**What good looks like**

**Statutory Guidance - Regulation 9 - Duty of Candour (service provider)**

- Service providers have policies and procedures in place to support a culture of openness and transparency, and ensure that all staff are aware of and follow them. These policies and procedures are in line with, and take account of, SCW guidance on the professional duty of candour for social care professionals registered with SCW.
- Service providers promote a culture of candour that includes:
  - being open and honest when engaging with those listed in regulation 9 (a)–(d);
  - providing information about incidents which happen and the outcome of any investigations that have taken place; and
  - offering an apology for what has happened, where it is appropriate to do so.
- Service providers take action to prevent and appropriately address bullying, victimisation and/or harassment in relation to the duty of candour, and investigate any instances where a board member, responsible individual a member of staff or any other person may have obstructed another in exercising their duty of candour.
- Service providers have a system in place to identify and deal with possible breaches of the duty of candour by staff who are professionally registered, including the obstruction of another in their professional duty of candour. Action is taken to address such breaches includes, where appropriate, a referral to the professional regulator or other relevant body.

**Statutory Guidance - Regulation 42 - Conflict of interest**

- Service providers maintain appropriate systems and take all reasonable steps to make sure actual or perceived conflicts of interests are identified, prevented and recorded in an open way.

**Statutory Guidance - Regulation 62 - Duty Candour (Responsible Individual)**

- The responsible individual acts in an open and transparent way, also ensuring suitable arrangements are in place to endure compliance with the requirements of regulation 62.

**Line of Enquiry 10:** The extent to which individuals have access to information about the service to enable them to have a clear understanding of service provision and records relating to how the service is delivered are accurate, accessible and available to individual's and their representative. **(Regulation 16, 40, 57)**

### What good looks like

#### **Statutory Guidance - Regulation 16 – Information about the service**

- A written guide is available to those listed in regulation 16(2)(c)-(e), which provides information about the service.
- The guide is in plain language and in a format that reflects the needs, age and level of understanding of those for whom the service is intended. The guide is made available in formats and media accessible and appropriate to the audience. For example, preferred and appropriate language, large print, audio, computerised, visual aids. When required it is explained in the individual's or adult placement carer's preferred method of communication.
- Where required, individuals or adult placement carers are supported to understand the contents of the guide and what it means for them.
- The guide sets out the areas required by regulation 16(3) and in addition includes the following:
  - arrangements for introducing the individual to the adult placement carer;
  - the ethos, culture and priorities of the adult placement service including a summary of the statement of purpose;
  - the adult placement carer's role in the inspection process by the service regulator;
  - how to access the most recent inspection report completed by the service regulator;
  - key staff who will be supporting the individual and adult placement carers;
  - how to contact the responsible individual;
  - arrangements for safeguarding and whistleblowing;
  - the complaints procedure and how to make a complaint;
  - contact details and role of the Public Service Ombudsman for Wales and service regulator;
  - access to, and support to access, relevant advocacy services and other agencies or services, such as primary healthcare services (GP; dentist; optometrist, pharmacist, chiropodist, hospital visits); transport;
  - access to, and support to access, relevant digital communication devices and/or assistive technology;
  - arrangements for contributing views and participation in the running of the service;
  - terms and conditions including circumstances in which the placement may cease to be provided and notice periods;
  - information about the support available to adult placement carers from the service provider; and

- how individuals or adult placement carers can access their own records.

***Statutory Guidance - Regulation 40 - Records***

- There is a policy and procedures for the recording and management of case records.
- Staff are aware of the policy and have a clear understanding of the procedures for recording and managing records. This includes training in information security and action to be taken where personal information is compromised.
- Adult placement carers are aware of the policy and procedures for recording and managing records. Adult placement carers understand what information they need to pass to the service provider about the individual.
- Service providers maintain all the records required for the protection of individuals and the effective running of the service as specified by Schedule 2 of the Regulations.
- All records are secure, up to date and in good order. They are prepared, maintained and used in accordance with data protection legislation and other statutory requirements.
- Records are stored securely including electronic records which are password protected.
- Individuals, adult placement carers, and staff are given access to any records and information about them held by service providers in accordance with current legal requirements.

***Statutory Guidance - Regulation 57 - Duty to ensure there are systems in place for keeping of records***

- Where records are stored electronically, they are secure and staff have individual access codes which provide a clear audit trail which shows who has made any entries and amendments.



**Line of Enquiry 11:** The extent to which individuals and adult placement carers are supported by a service that provides appropriate numbers of staff who are suitably fit and have the knowledge, competency, skills and qualifications to provide the service which helps achieve the individual's personal outcomes. **(Regulation 27-32, 46-51)**

### What good looks like

#### **Statutory Guidance - Regulation 27 - Staffing - Overarching requirements**

- Service providers have a demonstrable, measurable and systematic approach to determining the number of staff and range of skills/qualifications required for the reliable provision of support to meet the needs of individuals and adult placement carers using the service. This considers, but is not limited to:
  - the statement of purpose;
  - the care and support needs of the individual; and
  - supporting and supervising adult placement carers in providing care and support to an individual.
- Staffing levels and skill mix are reviewed continuously and adapted to respond to the changing needs of the service.
- Arrangements are in place to cover staff sickness or absence to ensure individuals and adult placement carers are supported appropriately.
- There are procedures to follow in the case of an emergency that make sure sufficient and suitable staff are deployed to cover both the emergency and the routine work of the service.

#### **Statutory Guidance - Regulation 28 - Fitness of staff**

- Service providers have rigorous selection and vetting systems in place to enable them to make a decision on the appointment or rejection of all staff and volunteer applicants. This includes the information set out in Schedule 1 of the Regulations. This also includes checking the veracity of references and employment.
- Where agency staff are deployed service providers ensure that they are subject to the same checks as permanently employed staff and have evidence to demonstrate that the checks have been undertaken. This may include confirmation and checklists supplied by any agency, where sufficiently reliable and robust.
- Positive consideration is given to involving individuals using the service, any representatives and adult placement carers in the recruitment of new staff.
- Service providers have a process in place to check that staff have appropriate and current registration with a professional

regulator where required or, where applicable, an accredited voluntary register.

- Having considered all the information available, service providers will determine whether the individual has the necessary skills, qualifications and good character to undertake the role for which they are employed/deployed.
- Where staff (including volunteers) no longer meet the required fitness criteria set out in regulation 28(2), service providers take appropriate and timely action to ensure that individuals are not placed at risk. For example this may include:
  - coaching and mentoring;
  - providing additional training and supervision; and
  - the use of disciplinary procedures.
- Service providers ensure staff comply with the requirements of their professional codes of practice and, where appropriate, providers make referrals to the relevant professional bodies for staff whose fitness to practise is brought into question.
- Where there are concerns that a member of staff has abused an individual or placed an individual at risk of abuse, the Disclosure and Barring Service and any relevant professional registration body are notified by the service provider without delay.

#### ***Statutory Guidance - Regulation 29 - Supporting and developing staff***

- Service providers ensure they have an induction programme that equips all new staff (including volunteers) to be confident in their roles and practice and enables them to make a positive contribution to the well-being of individuals using the service.
- Social care workers complete the relevant induction programme required by SCW within the defined timescales alongside any service-specific induction programmes.
- Staff have access to copies of any relevant codes of professional practice and practice guidance, including, any issued by SCW. The standards specified in these codes and practice guidance are actively promoted.
- Where agency staff are deployed an introduction to the service is provided which includes, but is not limited to:
  - the statement of purpose;
  - core policies and procedures; and
  - management and supervision arrangements.
- Staff receive supervision in their role to help them reflect on their practice and to make sure their professional competence is maintained. This includes feedback about their performance from individuals and adult placement carers using the service.
- Staff meet for one to one supervision with their line manager or equivalent officer, or a more senior member of staff, no less than quarterly.
- All staff have an annual appraisal which provides feedback on their performance and identifies areas for training and development in order to support them in their role.

- Additional training, learning and development needs of individual staff members are identified within the first month of employment and reviewed through the supervision and appraisal process.
- Staff are supported to undertake training, learning and development to enable them to fulfil the requirements of their role and meet the needs of individuals using the service and adult placement carers.
- Service providers undertake an annual (or more frequently if required) training needs analysis to ensure that staff have the relevant skills and competence to meet the needs of individuals in accordance with the statement of purpose for the service.
- Service providers maintain a written record of all training and supervision undertaken, or to be undertaken, by staff.
- Service providers support all staff to complete, where appropriate:
  - core training
  - necessary qualification that would enable them to continue to perform their role;
  - training and activities required for continuing professional development;
  - other training deemed appropriate by the service provider;
  - core and specialist training for their role identified by SCW.

***Statutory Guidance - Regulation 30 - Compliance with employer's code of practice***

- Service providers have a clear understanding of their role and responsibilities in relation to the Code of Practice for Employers of Social Care Staff (SCW publication) and/or other codes of practice applicable to employers which may be issued by SCW from time to time.

***Statutory Guidance - Regulation 31 - Information for staff***

- Service providers compile and make available information for staff in line with the statement of purpose. This includes information about the following matters:
  - the ethos and culture of the service;
  - the conduct expected of staff or others working at the service;
  - the roles and responsibilities of staff and others working at the service;
  - the policies and procedures of the service;
  - record keeping requirements;
  - confidentiality and data protection requirements;
  - disciplinary procedures;
  - arrangements for reporting concerns; and
  - arrangements for lone working.

- Service providers ensure staff have access to and understand up-to-date copies of all relevant policies, procedures and codes of practice. Service providers ensure staff have read these during the induction period and test staff members' ongoing understanding through supervision and performance reviews.
- Service providers ensure staff undertake their duties in line with the requirements of the policies and procedures.
- All staff are provided with a written job description which states clearly their responsibilities, the duties currently expected of them and their line of accountability.
- Regular staff meetings take place (a minimum of six meetings per year), the issues discussed are recorded and appropriate actions are taken as a result.

***Statutory Guidance - Regulation 32 - Disciplinary procedures***

- Service providers have a disciplinary procedure, in line with employment law, to deal with employee performance and conduct. This includes:
  - information about what is acceptable and unacceptable behaviour and what action will be taken if there are concerns about staff behaviour; and
  - the arrangements for a member of staff to be suspended (or transferred to other duties) pending the investigation of any allegation of serious misconduct, including allegations of abuse or serious concerns relating to the safety or well-being of individuals.
- Where the service provider is undertaking disciplinary action against any employee and the employee leaves prior to the completion of the disciplinary process, consideration is given to whether a referral to the police, Disclosure and Barring Service, SCW or any other professional body is appropriate
- Where a volunteer's fitness to practise is in question, due to any alleged misconduct/lack of capability of a concerning nature, the service provider takes appropriate and timely action. For example this may include:
  - providing additional training and supervision;
  - termination of volunteer arrangements; and
  - referral to the Disclosure and Barring Service or police, where appropriate.
- Service providers ensure staff are aware of and understand the relevant disciplinary procedures and grievance procedures.
- A written report of any disciplinary investigations and action taken is kept on the employee's file in line with employment and data protection legislation.

***Statutory Guidance - Regulation 46 - Duty to appoint a manager***

- The responsible individual ensures a manager who is registered with SCW (subject to regulation 28 (2)(e)) is appointed and in

place to manage the delivery of the service on a day to day basis for each place at, from, or in relation to which services are provided.

- The responsible individual takes responsibility and accountability for the appointment of the manager regardless of whether they are directly involved in the recruitment process.
- The responsible individual is assured that the person appointed as the manager for the service has the appropriate knowledge, skills and competence to manage the service safely and in accordance with the requirements of the Regulations.
- The responsible individual demonstrates that the appointment of the manager has been undertaken with due diligence and in line with the requirements of regulation 28(fitness of staff).
- Where a manager is absent for a period more than three months, the service provider ensures there is an appropriately qualified, experienced and competent manager, registered with SCW (subject of regulation 28 (2)(e)), in place to manage the service.

***Statutory Guidance - Regulation 47 - Fitness requirements for appointment of manager***

- The responsible individual has suitable arrangements in place to ensure the manager is fit and is capable of running the service in line with its statement of purpose. This includes ensuring:
  - the manager is appropriately qualified;
  - the manager is registered with SCW (subject to regulation 28(2)(e));
  - the manager is experienced in managing care services and in the provision of the type of care being provided; and
  - the vetting of prospective managers includes the relevant checks required by regulations to assure the responsible individual that the person is fit and able to work with vulnerable individuals.

***Statutory Guidance - Regulation 48 - Restrictions on appointing manager for more than one service***

- Where a manager is appointed to manage more than one service, this is agreed in advance with the service regulator.

***Statutory Guidance - Regulation 49/50 - Duty to report the appointment of manager to service provider and the workforce and service regulators***

- The responsible individual has suitable arrangements in place to:
  - inform the service provider of the details of the appointment of the manager;
  - provide the information specified by the Regulations concerning the individual; and
  - notify the service regulator and SCW when a new manager is appointed.

***Statutory Guidance - Regulation 51 - Arrangements when manager is absent***

- The responsible individual has structures in place which ensure that where the manager is not available or is absent for any reason there is an effective and competent deputising system to provide leadership on a day-to-day basis which:
  - continues to provide support to the adult placement carer and/or the individual placed with the adult placement carer;
  - maintains the safety, quality and effectiveness of the service;
  - ensures minimal disruption to the individual using the service and the adult placement carers
  - ensures compliance with the Regulations; and
  - maintains staff professional development.
- Where the manager, registered with SCW (subject to regulation 28(2)(e)), is unavailable or absent for any reason for more than 28 days the responsible individual will inform the service regulator in writing and without delay of the reason for the absence and the arrangements for cover.

**Line of Enquiry 12:** The extent to which people working at the service are supported to raise concerns about the service through whistleblowing procedures. **(Regulation 44, 61)**

**What good looks like****Statutory Guidance - Regulation 44 - Whistleblowing**

- There is an accessible whistleblowing policy in place. This includes:
  - the procedure for raising a concern;
  - the safeguards in place for staff or adult placement carers who raise a concern; and
  - how concerns will be investigated.
- Staff and adult placement carers are aware of, and have had training in, how to raise concerns and there are mechanisms and support available to enable them to do this.
- Where practicable consent should be gained to the disclosure of the details of a concern, where necessary, to enable effective investigation to take place.
- Confidentiality is maintained during the investigation process unless there are professional or statutory obligations which would not make this possible, such as those in relation to safeguarding.
- Individuals and adult placement carers do not suffer victimisation or any other disadvantage as a result of making their concerns known.
- All allegations and incidents of abuse are followed up promptly in line with the service provider's safeguarding policy and procedures and local safeguarding arrangements.
- Systems are in place to make sure that all concerns are considered without delay in line with the service provider's safeguarding policy and procedures. This includes:
  - undertaking a review to establish the level of investigation and immediate action required, including referral to appropriate authorities for investigation (this may include seeking advice from the service regulator or local authority safeguarding staff);
  - where areas for improvement or service failures are identified, acting upon these without delay; and
  - ensuring staff and others involved in the investigation understand the processes relating to safeguarding and responding to concerns.
- Records of concerns are maintained and monitored to identify trends and areas of risk which may require pre-emptive action. Actions taken as a response to whistleblowing are subject to reporting within governance arrangements.

**Statutory Guidance - Regulation 61 - Support for staff raising concerns**

- The responsible individual ensures suitable arrangements are in place for:
  - staff to be aware of and understand the whistleblowing policy;
  - staff to understand there is zero tolerance for poor care or failure to safeguard the well-being of adults;
  - ensuring staff are encouraged and supported to report issues; and
  - ensuring staff understand that concerns are welcomed and sought out, not ignored.



**Line of Enquiry 13:** The extent to which individuals are supported to manage their money. **(Regulation 23)**

**What good looks like**

***Statutory Guidance - Regulation 23 - Supporting individuals to manage their money***

- Policy and procedures set out arrangements for adult placement carers to support individuals to manage their money. This includes:
  - how individuals are encouraged and supported to handle their own financial affairs as they wish/where possible;
  - how individuals will be supported, including opening and managing individual bank accounts, budgeting and making spending decisions, where appropriate; and
  - how individuals are supported to understand and manage any associated risks.
- Adult placement carers are supported with arrangements to enable individuals to access independent support and advice (including advocacy) concerning their financial affairs.
- Staff or others working at the service or adult placement carers involved with the service do not act as agents (to act on behalf of the individual) for the individual unless they have the lawful authority to do so.

**Line of Enquiry 14:** The extent to which relevant regulatory bodies and statutory agencies are notified where there are concerns and significant events affecting individuals. **(Regulation 41, 63)**

**What good looks like**

***Statutory Guidance - Regulation 41 – Notifications (service provider)***

- Service providers have appropriate arrangements in place for the notification of the events listed Schedule 3 of the Regulations to be made to the service regulator.
- Notifications are made without delay, usually within 24 hours of the event occurring.

***Statutory Guidance - Regulation 63 – Notifications (responsible individual)***

- The responsible individual has suitable arrangements in place to notify the service regulator of events specified in Schedule 4 of the Regulations

**Line of Enquiry 15:** The extent to which the service promotes an accessible complaints policy and procedure and demonstrates learning from complaints to improve the service. **(Regulation 43, 56)**

### What good looks like

#### ***Statutory Guidance - Regulation 43 - Complaints policy and procedure***

- There is a complaints policy in place. This includes details of the procedures as set out in regulation 43.
- Service providers have an accessible complaints policy which includes, where appropriate, the use of an informal resolution stage and explains:
  - who can make a complaint and in relation to what;
  - who to approach to discuss a concern/complaint;
  - how individuals and adult placement carers can be supported to make a complaint;
  - information about accessing independent advocacy, where available;
  - how complaints will be dealt with; and
  - the stages and timescales for the process.
- The policy is in an easy to read format, well publicised, readily available and accessible to individuals using the service, any representative and adult placement carers.
- Information about other avenues for complaint is included to support complainants if they are not satisfied with the service provider's action. For example, information about the complaints procedure of the placing authority and the Public Services Ombudsman for Wales.
- Individuals and adult placement carers are able to make their complaint in writing or verbally to staff and these should be acknowledged unless complaints are made anonymously.
- Staff are aware of the complaints policy and procedure and understand how to respond appropriately to complaints.
- Service providers ensure any representation or complaint is confirmed, addressed promptly and the complainant is kept informed of progress.
- A written report is provided to the complainant setting out the outcome of the complaint and any action to be taken.
- Consent is obtained and confidentiality maintained during the complaints process unless there are professional or statutory obligations which would not make this possible, such as those in relation to safeguarding.
- Providers ensure any complaint is acknowledged, addressed promptly and the complainant is kept informed of progress, unless the complaints are made anonymously
- Wherever practicable consent should be gained to the disclosure of the details of a complaint, where necessary, to enable investigation to take place.

- Confidentiality is maintained during the complaints process unless there are professional or statutory obligations which would not make this possible, such as those in relation to safeguarding.
- Individuals and adult placement carers do not suffer victimisation or any other disadvantage as a result of making complaints.
- Systems are in place to make sure that all complaints are investigated in accordance with the timescales set out in the service provider's complaints policy. This includes:
  - undertaking a review to establish the level of investigation and immediate action required, including whether there is a requirement for a referral to appropriate authorities for investigation. This may include the service regulator or local authority safeguarding teams; and
  - where areas for improvement or service failures are identified, acting upon these immediately.
- Staff and others involved in the investigation of complaints have the right level of knowledge and skill to do this. They understand the service provider's complaints process and are knowledgeable about any current related guidance.
- Records of complaints are maintained and monitored to identify trends and areas of risk which may require pre-emptive action.
- Actions taken in response to complaints are reported on as part of the governance arrangements for the service.

***Statutory Guidance - Regulation 56 - Duty to ensure there are systems in place to record incidents and complaints***

- The responsible individual ensures there are suitable arrangements in place for the recording of the matters set out in regulation 56.
- The responsible individual has systems and processes in place to ensure that any records made are legible, accurate and kept securely.

**Line of Enquiry 16:** The extent to which adult placement carers are supported effectively by service providers in order that they can meet the care and support needs of individual's placed with them. **(Regulation 11-12 and 33-36)**

**What good looks like**

**Statutory Guidance - Regulation 11 – Carer agreement**

- The service provider and adult placement carers have an agreed carer agreement in place, which would cover all individuals placed with the carer.
- This carer agreement includes, but is not limited to, the following:
  - the respective roles and responsibilities of the service provider and adult placement carers;
  - the policies and procedures an adult placement carer must act in accordance with;
  - the arrangements that the service provider will put in place to assess and review the premises, facilities and equipment to be used by the adult placement carer in providing care and support in a possible adult placement;
  - any requirements to support an individual to access treatment, advice or any other services from a health care or other professional;
  - the arrangements for the safe storage and administration of medicines (where applicable);
  - the arrangements to support individuals to manage their money;
  - information about the costs payable by the service provider to the adult placement carers; and
  - information relating to termination of the carer agreement.
- Service providers have effective arrangements in place to monitor and review the obligations placed upon adult placement carers as set out in the carer agreement.
- Service providers have effective arrangements in place to ensure adult placement carers take action to comply with the carer agreement where it is identified they are not currently doing so.
- Service providers have arrangements in place to ensure the termination of a carer agreement is undertaken in a timely and effective manner. Where a proposed termination affects an existing placement of an individual, the service provider consults with the relevant placing authority.
- Where appropriate, service providers ensure adult placement carers have the opportunity to respond to any concerns the service provider may have regarding their fitness to be an adult placement carer, prior to any decision to terminate a placement.

### **Statutory Guidance - Regulation 12 – Individual placement agreement**

- The adult placement carer and relevant individual using the service are given a copy of the agreement with:
  - the information which details the service to be provided;
  - information about the costs payable by the individual and any other costs covered by the placing authority;
  - terms and conditions of the placement including the room to be occupied, housekeeping expectations (including any agreed rules for the individual to follow), termination of contracts, notice period, etc; and
  - a list of the service provider's key policies and procedures and the requirements for all parties to adhere to them.
- Where individuals are paying for their own care in full or partially they or their representatives are provided with a written contract. This includes:
  - terms and conditions;
  - fees, including top ups or any late payment fees;
  - arrangements and timescales for notifying individuals of contractual changes; and
  - arrangements for how payments are to be made.
- Where a personal plan has been revised to take account of any changing care and support needs of the individual, the individual placement agreement is reviewed and, where appropriate, amended accordingly.
- The service provider has arrangements in place to review the individual placement agreement in accordance with regulation 12(7). Any review is undertaken involving the individual, the adult placement carers and, where appropriate, with the agreement of the individual, any representative.
- Service providers have effective arrangements in place to monitor and review the obligations placed upon adult placement carers as set out in the individual placement agreement.
- Service providers have effective arrangements in place to ensure adult placement carers take action to comply with the individual placement agreement where it is identified they are not currently doing so.
- Service providers have arrangements in place to ensure the termination of an individual's placement is undertaken in a timely and effective manner.
- Where appropriate, service providers ensure adult placement carers have the opportunity to respond to any concerns the service provider may have regarding the suitability of the placement (including any care and support provided to an individual placed with them), prior to any decision to terminate a placement.
- Adult placement carers and individuals are supported when the placement comes to an end, both when this is planned or in an emergency.

***Statutory Guidance - Regulation 33 - Recruitment and training of adult placement carers***

- Service providers have policies and procedures for recruiting and training adult placement carers to meet the needs of individuals for whom it aims to provide a service.
- Service providers ensure those who are interested in becoming adult placement carers are treated fairly, without prejudice, openly and with respect. Enquiries are dealt with courteously and efficiently by staff who have the necessary knowledge and skills.
- Prospective adult placement carers are provided with timely and relevant information following their initial enquiry and are kept informed about the progress of any subsequent recruitment process.
- The recruitment process is set out clearly to prospective adult placement carers, including:
  - the qualities, skills or aptitudes being sought or to be achieved;
  - the standards to be applied in the assessment;
  - the stages and content of the selection process and the possible timescales involved; and
  - the information to be given to applicants.
- Service providers ensure adult placement carers who have been recruited by the service receive training in line with these Regulations in order to meet the care and support needs of any individuals placed with them.
- Service providers ensure adult placement carers receive the training necessary to enable them to provide care and support to any individual placed with them in accordance with the individual's personal plan. Specific areas of training are set out in these Regulations.
- Service providers ensure any training provided (induction, ongoing or otherwise), to adult placement carers is in line with national guidance.
- Service providers have arrangements in place to monitor and review the training provided to adult placement carers and their ability to provide high quality support and care. This feeds into the Quality of Care review.

***Statutory Guidance - Regulation 34 – Effective relationships***

- Service providers have arrangements in place to supervise the adult placement carer and the individual that has been placed with them.
- Service providers support adult placement carers to develop and maintain a positive relationship with the individual placed with them.

***Statutory Guidance - Regulation 35 – Support and information for adult placement carers***

- Service providers ensure adult placement carers receive the support and information necessary to enable them to provide care

and support to an individual placed with them in accordance with the individual's personal plan. Specific areas of support and information are set out in these Regulations

- Service providers have arrangements in place to monitor and review the support and information provided to adult placement carers. This feeds into the quality of care review.
- Service providers ensure adult placement carers receive induction training which includes, but is not limited to:
  - the statement of purpose; and
  - core policies and procedures.
- Adult placement carers receive feedback, where available, during or following completion of any placement.
- Adult placement carers are supported to undertake relevant training to enable them to fulfil the requirements of their role.
- Service providers ensure adult placement carers are aware of the support available to them during any allegations / complaints made against them.
- Service providers have arrangements in place to support adult placement carers outside of standard office hours, and adult placement carers are familiar these arrangements.

***Statutory Guidance - Regulation 36 – Fitness of adult placement carers***

- Service providers have rigorous selection and vetting systems in place to enable them to make a decision on the approval of a person to be an adult placement carer. This includes the information set out in schedule 1 of the Regulations.
- Having considered all the information available service providers should determine whether the person being considered to be an adult placement carer has the necessary skills, experience and character to undertake the role of an adult placement carer.
- Where an adult placement carer no longer meets the required fitness criteria set out in regulation 36(2), service providers take appropriate and timely action in line with regulation 36(7) to ensure that individuals are not placed at risk. For example this may include providing additional training and supervision.
- Where there are concerns that an adult placement carer has abused an individual or placed an individual at risk of abuse, the Disclosure and Barring Service are notified by the service provider without delay.

**Environment – Overall Environment**

**Related Regulation: 37, 38, 39**

**Line of Enquiry 17:** The extent to which service providers ensure that individual's care and support is provided in a location and environment and, where relevant, with any facilities and equipment that promotes achievement of their personal outcomes. **(Regulation 37-39)**



## What good looks like

### **Statutory Guidance - Regulation 37 – Overarching requirement**

- The location, design and size of the premises are suitable for the service as described in the statement of purpose.

### **Statutory Guidance - Regulation 38 – Adequacy of premises (service provider)**

- Service providers have a suitable space within the premises, such as a shared meeting room, to provide privacy for the supervision of staff.
- Records are stored securely in line with legislative requirements.

### **Statutory Guidance - Regulation 39 – Premises, facilities and equipment (adult placement carer)**

- Service providers have arrangements in place to monitor the premises, facilities and equipment used by adult placement carers in providing care and support to an individual placed with them.
- Service providers ensure that adult placement carers' premises are suitable for the placement; accessible, safe and well-maintained, and meet the individual's care and support needs in a comfortable and homely way. This includes ensuring premises are comfortable, clean and provide sufficient and suitable light, and heat and ventilation is accessible.
- Adult placement carers' premises have suitable access to local amenities, local transport and relevant support services, to suit the needs of the individual.
- Adult placement carers' premises are fully accessible to individuals who are wheelchair users, where relevant. This includes level access into the home and wide doorways into communal areas, the individual's room, any bathing and toilet facilities and any other spaces to which wheelchair users have access.