Care and Social Services Inspectorate Wales

Application to register a Domiciliary Care Agency

Notes for applicants

1. Purpose

1.1 These notes for applicants are relevant to individuals, organisations and local authorities that wish to apply to be registered to carry on or manage a domiciliary care agency. It is important that the applicant fully understands their obligations and responsibilities under the regulations. Where an application is from an organisation, a ‘responsible individual’ must be nominated for registration purposes who is either a director, a company secretary, or any other responsible officer meeting the requirements in Regulation 8 of the Domiciliary Care Agencies (Wales) Regulations 2004. It is important that the responsible individual has been made fully aware of the role and responsibility undertaken when making an application on behalf of an organisation.

This document is intended to provide guidance in the process of submitting your application. It also gives details of the information you are required to provide in accordance with the Regulations and gives you ideas of possible evidence that you may wish to use in your application in order to meet the required National Minimum Standards (see Appendix A). This is not an exhaustive or prescriptive list and we would encourage providers to submit other areas of related best practice. It should be noted that it is the Regulations and not the Standards against which your application will be measured.

1.2 We hope that these notes will assist you in:

- understanding what you need to think about before applying for registration
- beginning to understand what the Regulations and National Minimum Standards are intended to achieve and the part they play in the registration process.

1.3 When you have read these notes and the other documents provided we hope you will have an outline of:

- what needs to happen before you will be ready to lodge your application
- what we will do when we get your application and
- what we are looking for

1.4 Arranging domiciliary care for vulnerable individuals carries considerable responsibilities and may result in such individuals being placed at risk. Therefore,
great care needs to be taken to check that everything is as it should be before an agency is registered. Apart from certain exceptions, to carry on or manage a domiciliary care agency without being registered is a criminal offence. This process must be completed before an agency is permitted to operate.

1.5 The process is necessarily detailed. We therefore want you to know that the information you provide, including your personal details, is treated with care and, other than when the law allows, will not be disclosed outside of the Welsh Government. We also want you to know that inspectors will work with you to make sure everything is done as well as it can be. The most important part of our work is to see that potentially vulnerable people get high quality services and our aim in commenting on your proposals is to help you to meet the requirements of the Act, the Regulations and the National Minimum Standards.

1.6 Achieving registration is a detailed process on the part of both the applicant and CSSIW. Properly approached, it serves to establish a sound basis for the longer-term regulatory relationship.

2. Why am I required to register?
2.1 CSSIW has regulatory responsibility under the Care Standards Act 2000 and regulations made under it. The purpose of such regulation is to:

- make sure that you are suitable to carry on this responsibility,
- check that you have the knowledge and resources needed to provide and sustain a good quality of service,
- ensure that you will engage and support staff with the appropriate qualifications, experience, knowledge and skills to meet the needs of the users of the service you intend to provide,
- check that any premises you use as an office are suitable for the purpose,
- ensure that the way you go about running your service is satisfactory
- check that the records which must be kept are satisfactory and will, in future, help us to check the quality of the service you are providing.

2.2 The following sections take each of these points in turn.

3. How do we set about deciding if you are a suitable person?
3.1 We will seek to do this through the information collected in the application form and associated documentation.

- We will check that you are who you say you are, by the checking of your birth or marriage certificate, passport and any other relevant documents.
- We will look into your background. We will undertake checks with the Disclosure and Barring Service (DBS) and take up personal, professional and financial references.
- We will check that you are physically and mentally fit to carry on or be responsible for supervising the management of the domiciliary care agency. We will send a copy to your doctor of any medical history you may provide to us and also ask the doctor for his/her comments. Sometimes we need to contact further specialists but we would always discuss this with you first.
Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended) says that, for most purposes, after a fixed time people no longer have to declare their convictions.

YOU SHOULD NOTE THAT THIS DOES NOT APPLY TO YOUR APPLICATION TO BE REGISTERED TO CARRY ON OR MANAGE A DOMICILIARY CARE AGENCY

3.2 This is important because if you or any other applicant has any convictions or cautions, we will need to make a judgement about whether the material revealed by the DBS certificate renders you unsuitable to act in the capacity for which you are applying. We will carefully consider the nature of the offence, how old you were at the time, your personal circumstances then and now and the chances of this affecting your suitability to be involved in the organisation of care services to vulnerable people. It is possible to approve applications in some situations where offences have been committed.

3.3 If someone is dishonest in order to obtain registration, they are unlikely to be considered a suitable person.

3.4 You, as the person carrying on the agency, will be responsible for screening all your staff to the required standard. In order to do this you will need to be registered with the Disclosure and Barring Service. They can be contacted at either, DBS Registration Team, PO Box 110 Liverpool L69 3JD, Information Line 0870 90 90 811 or the DBS website. Registration with the DBS is likely to take some weeks and – if you have not already done so - you should apply for registration as soon as you have decided to begin to prepare your CSSIW application. Alternatively a number of umbrella bodies are applying for DBS registration and will be able to undertake these checks on your behalf.

3.5 CSSIW may at any time require you to demonstrate that you have checked all staff backgrounds to the required standard.

4. How will we check on your knowledge and resources?

4.1 As you will appreciate, there are Standards set for the experience, qualifications, knowledge and skills registered providers and any staff must have. We will seek to satisfy ourselves that you meet these Standards through the information provided in both parts of your application form and in a formal interview.

- We will ask you to provide a full record of what you have done since leaving school. This will include any periods of study, unpaid work and qualifications you have undertaken.
- We may check with previous employers as necessary, even if you have not given them as referees, to establish what relevant skills and experience you have.
- We will look at any training courses you have attended and, where necessary, check on the detail of what was studied. Where any qualifications are involved we will want to see your certificates and may check details with the body that awarded them.
- If you decide not to take day to day control yourself you may employ a manager to undertake this task or you may lack the required experience and
qualifications to undertake this role. If so, the manager will be required to submit an application and will be subject to the same checks as you.

- Some of this checking will be done through an interview. This process will be completed before a formal decision is made about whether you are to be registered and what, if any, conditions might apply to your registration.

5. **How will we ensure you engage and support staff with the appropriate qualifications, experience, knowledge and skills?**

5.1 The range and numbers of staff needed along with the relevant qualifications, experience, knowledge and skills will be dependent upon the nature and size of agency you intend to provide. You will need to evidence that your staff have the appropriate skills to provide services for each of the client groups you have identified in your application. As with registered managers, Standards set out in general terms what these must be. You will need to discuss the particular staffing proposals for your agency with the inspector.

6. **How will we go about checking the premises?**

6.1 We will satisfy ourselves as to the suitability of premises by considering the information supplied in the application form and making a visit or visits to the building you intend to use:

- We will check to see that you have sufficient control over the premises you intend to use to ensure that staff and others with a proper interest can have access during normal office hours.
- We will check that the premises and any records you keep – whether on an IT system or otherwise are secure.
- We will check that the premises are properly equipped.
- We will check that the proposed premises and contents are adequately insured.
- We will check your lease arrangements or ownership of the premises.

7. **How will we check your proposed way of working?**

7.1 We will look carefully in Part 2 of the application form at what you tell us you will do to meet the National Minimum Standards. We will use the formal “Fit Person” interview or interviews to discuss any of your answers where we feel we do not have enough information to make a decision.

- We will look at your proposed means of meeting each of the Regulations and Standards.
- We will examine your proposals to assess whether the information you have supplied adequately upholds the Statement of Purpose.
- We will look in detail at how you intend to assess and select and prepare staff and the records you intend to keep.
- We will look at the way in which you intend to assess and introduce care workers to the individuals who are in receipt of personal care.
- We will examine the documents and information you intend to supply to service users and carers and how you intend to use them.
- We will carefully assess the suitability of the policies you intend to use.
- We will consider how you intend to keep the records you are required to keep.
- We will look at how you intend to use your time and that of staff and at the range of opportunities you intend to provide for service users and carers.
• We will wish to understand how you will manage, monitor and control the quality of all aspects of the service you provide.

8. **Next steps**

8.1 We suggest that you now take a close look at the relevant Regulations and National Minimum Standards. The Domiciliary Care Agencies (Wales) Regulations 2004 and the matching Standards can be accessed through the CSSIW website at: [www.cssiw.org.uk](http://www.cssiw.org.uk)

8.2 For ‘employment agencies’ which solely act as introducers of workers employed by a user, the following regulations and standards will NOT apply: Regulations 13, 14, 16, 17 and 19 and Standards 4, 5, 6.2 only, 6.3 only, 7.3 only, 10.5 only, 10.9 only, 10.10 only, 11, 12, 13, 14, 15, 16, 18, 19, 20, 21, 24.3 only, 24.4 only, Appendix B bullet point 6, 11 and 13 only, and all of Appendix E.

8.3 Once you have done this, we hope that the structure, purpose and requirements of the attached application forms, namely Part 1 for an application for an individual or an organisation, 1A (Manager), Part 2 (evidence of ability to meet Standards), Disclosure and Barring Service check and Medical declaration and financial enquiry will all become clearer. Where the application is from an organisation, checks will be carried out on the responsible individual and additional information about the organisation will be required.

8.4 Should you have any questions at this stage about the requirements and process, we would be glad to discuss these. You should however note that it is for you to prepare and structure your application and you may wish to obtain advice from your own independent sources. It is up to you to demonstrate that you will be able to meet – and continue to meet - the requirements of the Regulations and Standards. The onus is on you to provide evidence for this purpose. It would clearly be inappropriate for CSSIW to become involved in advising on the detailed nature of your business decisions, choices and risks.

9. **Conclusion**

9.1 As you can see the process is detailed and involves initial investment of time and resources. Nonetheless we believe, that the process of preparing for and securing registration provides an opportunity to lay a sound foundation for the future regulatory relationship between registered providers and CSSIW.

9.2 We will endeavour to do all we can to make the process and requirements clear and the basis of the regulatory process transparent. We hope that you will find this to be the case and look forward to working with you if you decide to proceed.
Appendix A

The schedule below provides the kind of information which may wish to submit along with your application to evidence how you intend to meet the Regulations and National Minimum Standards. **These are merely examples.** You may consider different information to be more appropriate and use other examples of good practice from your agency that best reflects the way in which your organisation proposes to meet the minimum requirements. We welcome this approach. This format is designed to promote innovation and creativity in the approach to regulation of a domiciliary care agency.

**NB:** Where supporting evidence is in bold it has a format that is specified by regulation and therefore you are required to submit these documents as part of your application.

**STANDARD 1 - INFORMATION**

- Provide your Statement of Purpose
- Service Users' Guide to include written service user information about the agency and the service it provides
- Proposals for seeking service user views on;
  - the quality of service and how it will be incorporated into the service user guide
  - how will you keep service users, their carers and relatives or representatives fully informed on issues relating to their care?

**STANDARD 2 – NEEDS ASSESSMENT**

- Details of the needs assessment documentation and system in place including;
  - training provided to the person carrying out the needs assessment
  - how the needs assessment/reassessment system fully involves the service users, their carers and representatives
- Needs assessment document which will be used with individuals who are not referred through statutory agencies

**STANDARD 3 – MEETING NEEDS**

- Details of staff skill mix assessed as required to deliver care, including staffing requirements for communicating with people with a range of communication difficulties, the needs of specific minority groups and continuity of care
- A description of how the agency will deal with the range of policies and procedures in place to prevent service users from being placed at risk of harm or abuse
### STANDARD 4 – SERVICE DELIVERY PLAN

- Details of the procedure for drawing up service user plans with the involvement of the service user, relatives, friends and any other appropriate professionals
- Copy of the proposed document to be used as the service delivery plan and details of review procedure and documentation
- Description of risk assessment and management procedures for service users and how this aspect will be recorded in the service delivery plan

### STANDARD 5 – TERMS AND CONDITIONS

- A copy of the agency’s standard statement of terms and conditions under which care is provided by the agency as outlined in Standard 5.2 in an appropriate and accessible format

### STANDARD 6 - CONFIDENTIALITY

- Copy of the policy on confidentiality including the information to be provided to service users
- Evidence from staff contract of employment/disciplinary procedures of how confidentiality issues are to be managed including how breaches will be dealt with
- How will you ensure that individual service user information and records are accurate, secure, confidential and compliant with the Data Protection Act and describe the circumstances where information must be shared with the manager

### STANDARD 7 – RESPONSIVE SERVICES

- Details of how the agency ensures that there is continuity in relation to the care worker(s) who provide a flexible needs-led service including;
  - how changes in care workers are handled
  - service users and their relatives will be kept up to date on issues relating to service users’ ongoing care
- Description of monitoring arrangements to ensure care workers undertake tasks specified in the service delivery plan, arrive within timebands and remain for specified lengths of time

### STANDARD 8 – PRIVACY AND DIGNITY

- Copy of agency’s policy on how the needs of ethnic minorities will be met
- Information on the provision of personal care including details of any training provided to staff
- How will privacy and dignity be met?
## STANDARD 9 - AUTONOMY AND INDEPENDENCE

- Policy on access of service user’s personal files by service users, their relatives or representatives.
- how will the agency ensure service users are enabled and empowered to meet their full potential including opportunities available for children to participate in appropriate activities through learning and play

## STANDARD 10 – MEDICATION AND HEALTH RELATED ACTIVITIES

- A copy of the policy and procedures identifying parameters and circumstances for assisting with medication and health related tasks within a risk management framework including:
  - training provided to staff, reporting concerns or seek additional guidance in relation to medication and health-related activities
  - system for recording the receipt, storage, administration and disposal of all medicines, including over-the-counter medicines
  - arrangements for the assessment and review of service users condition and reporting to the relevant health professionals

## STANDARD 11 – SAFE WORKING PRACTICES

- Copy of the health and safety policy including:
  - how do you ensure the environment is safe for staff?
  - risk assessment on the property and equipment in which the service is to be provided

## STANDARD 12 – RISK ASSESSMENT

- Copy of policy on risk assessment and risk management for service users
  - details of how you comply with the relevant safety legislation
  - how are safe working practices such as moving, handling and positioning items, first aid and infection control covered in induction and ongoing training programmes
- What arrangements are in place for reporting risks which arise including appliances, equipment, fixtures or security of the premises
- Details of staff who are fully trained in current safe handling techniques and the equipment to be used
STANDARD 13 – FINANCIAL PROTECTION

- Policy and procedure on safe handling and storage of service users’ money and property including:
  - procedure for the investigation of allegations of financial irregularities
  - how do you minimise financial abuse?
- Record of how all financial transactions will be recorded and signed for in service user’s home

STANDARD 14 – PROTECTION OF THE PERSON

- Notification of incidents
- Process by which each staff member will have access to up to date copies of relevant policies and procedures e.g. local authority child and adult protection procedure
- Copy of the policy and procedure of the agency for dealing with allegations of abuse in line with CSSIW’s all Wales procedure. To include notification processes, timescales and possible actions
- Details of relevant training on prevention of abuse including the procedure for dealing with physical and/or verbal aggression by service user’s
- How to deal with whistle-blowing

STANDARD 15 – SECURITY OF THE SERVICE USER’S HOME

- Sample of identity cards issued to care workers
- Details of policy and procedure on entering and leaving the homes of service users

STANDARD 16 – RECORDS KEPT IN THE SERVICE USER’S HOME

- Details of the procedure for storage and maintenance of records in service user’s home
- Record sheets to be kept in the service user’s home to include details in Standard 16.1
- Arrangements for service users to have access to what is written about them

STANDARD 17 – RECRUITMENT AND SELECTION

- Copies of the recruitment policy and procedures, to include procedure for obtaining references, DBS checks, checking of Protection of Children and Vulnerable Adults lists and accessing NMC/Care Council registers including:
  - the equal opportunities policy
  - the agency’s standard contracts of employment
- Procedure for recruitment and selection of agency staff and volunteers
### STANDARD 18 – REQUIREMENTS OF THE JOB

- A copy of the staff handbook and grievance and disciplinary procedure
- Copies of written job descriptions, person and work specifications for all employees with reference to the relevant National Occupational Standards
- Details of lines of accountability within the service and with any external management
- Details of the plan for the manager to undertake periodic training and development and to maintain and update knowledge, skills and competence

### STANDARD 19 – DEVELOPMENT AND TRAINING

- A copy of the agency's staff development and training and induction programme including:
  - the arrangements for its annual revision
  - content of induction training, process for registering unqualified staff for the relevant award

### STANDARD 20 – QUALIFICATIONS

- Schedule of all care workers and their managers outlining qualifications and those currently working towards qualification as listed in the Care Council for Wales’ Qualification Framework
- A copy of the staff training and development plan including details of how qualification targets will be met

### STANDARD 21 – SUPERVISION AND APPRAISAL

- Details of staff appraisal policy and procedure, including appraisal of manager
- Details of individual staff supervision policy; to include timescales and content of supervision and details of supervision of manager
- Copies of minutes of meetings, agendas and attendance sheets
- Details of how performance management and review is handled
- Identify mechanisms for dealing with poor or incompetent practice

### STANDARD 22 – BUSINESS PREMISES, MANAGEMENT AND PLANNING

- Copy of Business and Financial Plan
- Outline the management structure, including external management, management skills and qualifications, and lines of accountability to support the volume and complexity of the care provided
- Copy of office floor plan of the agency’s business premises
STANDARD 23 – FINANCIAL PROCEDURES

- Provide a copy of the last two years’ accounts
- Scale of fees and charges
- Details of adequate insurance cover for the premises and liability for the agency
- Details of adequate insurance cover against interruption of the operation of the agency

STANDARD 24 – RECORD KEEPING

- Records required by regulation 20 are maintained, up to date and accurate
- Details of storage of records and retention periods
- Identify contingencies for effective back-ups of electronically-held records
- Describe how individuals are enabled to access case file information and how this affects your approach to recording information

STANDARD 25 – POLICIES AND PROCEDURES

- Copy of all policies and procedures including:
  - how each staff member and service user will have access to up to date copies of all policies, procedures and codes of practice
- Details of the arrangements for all policies, procedures, to be monitored, reviewed and amended as necessary

STANDARD 26 – COMPLAINTS AND COMPLIMENTS

- A copy of the service user guide to include a description of the role of Care and Social Services Inspectorate Wales in relation to complaints and how it will be informed
- Copies of the agency’s complaints policy and procedure including stages and timescales and in an appropriate format
- Detail the arrangements for training on complaints for administrative and managerial staff
- Outline the proposals for incorporating the outcome of complaints where necessary in the service user guide
### STANDARD 27 – QUALITY ASSURANCE

- Details of the process of continuous self-monitoring and improvement and arrangements for the internal audit
- Policy and procedure for an annual Quality Assurance process
- Description of the process for updating policies, procedures and practice in light of changing legislation and good practice guidance
- Details of how service users can be informed about CSSIW inspections
- Evidence of how any review conducted has improved the quality of service delivery
- Details of how the views of key stakeholders are gathered, including staff, service users and their families, friends and other professionals