

Guidelines
Social Regulatory Standards

Day Centre Services for Persons with Disability

FOREWORD



**ANTHONY
AGIUS DECELIS**

**PARLIAMENTARY
SECRETARY**

**FOR PERSONS WITH
DISABILITY AND
ACTIVE AGEING**

The interests, abilities, and potential of an individual vary from person to person. The path we take to achieve our potential also differs. This is true also of people with disability, who have different opportunities to unlock their potential to reach their goals.

Thus, we offer different initiatives and services which offer a variety of programmes for people with disability, like residential services, respite, job coaching programmes and training to join the workforce, as well as Day Centre Services.

Day Centre Services in our country provide various benefits to over 350 people. These centres offer different educational and social activities to attendees, which promote participation, social inclusion and strengthening of individual talents.

Thanks to these Social Regulatory Standards and Guidelines, we will continue to improve the quality of the services for beneficiaries which are offered in these centres, while also establishing standards regarding the quality of new centres in the eventuality of further investment in this sector by both the private sector and NGOs.

The quality of life of every individual, including persons with disability and their families, is at the centre of our politics. Consequently, these Social Regulatory Standards for Day Centres for People with Disabilities will ensure that service providers offer high quality services with the requirements needed by persons with disability while offering educational programmes to people who make use of the services.

Such services are of great importance for this Government; who is investing fully in this Authority to not only create these Standards, but also oversee them and ensure that every party involved is responsible for the quality of the service being offered.

In my role as the Parliamentary Secretary for Persons with Disability and Active Ageing, I push forward the priorities of persons with disability, their families and carers, and all the people who in some way or another have a role to play in this sector. Therefore, I look forward to future positive experiences to persons with disability offered by these services.



**MATTHEW
VELLA**

**CHIEF EXECUTIVE
OFFICER**

**SOCIAL CARE
STANDARDS
AUTHORITY**

After the Social Care Standards Authority officially launched two sets of Social Regulatory Standards for Persons with Disability; one for the Residential Services and another for Respite Services, the need for Standards focused on Day Centres for People with Disability was felt.

During the last months, this Authority held meetings with various professionals, persons attending the day centres, and their relatives. This process helped the Authority understand the need for new standards in this sector. It is important to highlight that these Standards are not only proposing new Guidelines, but also offer a vision for Day Centre Services to be in the coming years.

The Social Regulatory Standards are based on the principles of individuality, respect, dignity and participation. These Standards will noticeably change the mentality regarding the Day Centre Services; that these are not centres where people with disability go to spend their days, but Centres that offer the best environment where people with disability are able to unlock their abilities and achieve their aspirations.

Through the public consultation, the Authority understood the need for a larger emphasis on vocational training, life skills training, as well as the direct involvement of persons with disability in the personal support programme. With this aim in mind, the Authority worked on these points in order to better help the persons who attend these centres achieve a socially independent life, as well as assisting persons who want to enter the workforce by offering them the help they need.

One can praise the great work done by different professionals as well as the great interest shown by the persons attending these centres, and their parents' determination. Therefore, the Authority couldn't not develop Standards which continued to build upon the work that was and is still being done, while looking ahead with ambition to truly achieve the potential these Day Centres have. The Authority is presenting clear Guidelines to the people running the Day Centre Services and the professionals who work within regarding the importance of the direct participation of persons with disabilities when decisions are taken. Great emphasis is being placed on the quality of the services. Throughout the following months and years, the

Authority will be monitoring the sector to ensure that these Standards are being implemented in practice and are not contained within paper. In line with what was done in previous months, the aim of this monitoring is to guide the service providers, be available to persons with disability who receive these services, and listen to the parents and relatives of these persons with disability.

For the first time in the history of social welfare in Malta, the entire sector of persons with disability is regulated through Social Regulatory Standards which are enforced by Legal Notices. These regulations do not mean more bureaucracy; they are regulations which put persons with disability and their relatives at the heart of all the work being done in this sector. Thanks to these Standards we are also ensuring that the rights of persons with disability are respected while maximising their aspirations to live an independent life.

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PRINCIPLES ON WHICH THE STANDARDS AND GUIDELINES ARE BASED:

These Social Regulatory Standards and the accompanying Guidelines acknowledge that the services have to be accessible and appropriate for all those that require them, and attention should be paid to the needs and concerns related to one's sex, age, race/ethnic origin, religion/belief, sexual orientation, gender identity, gender expression and sex characteristics. These reflect the clients' rights for a positive experience when they receive a service. These should help clients retain and increase their independence, and assume an active role in the decisions on what contributes towards a better quality of life.

The Standards and accompanying Quality and Performance Indicators are based on the principles of dignity, privacy, the right to choose, security, the right for the clients to realise their potential, equality, individuality and diversity.

Dignity

The clients' right to:

- be treated with dignity and respect at all times;
- enjoy appropriate social relations.

Privacy

The clients' right to:

- have their privacy and property respected;
- be free from undue interference.

Choice

The clients' right to:

- have informed choices, while acknowledging the right of others to choose in the same manner;
- be aware of all that they can choose from;
- obtain assistance to understand well all options available to them and select the one that is the best for them.

Security

The clients' right to:

- feel secure in all aspects of their life including health and a good lifestyle;
- enjoy security but without being overprotected;
- be free from exploitation and abuse.

Realising potential

The clients' right to have the opportunity to:

- attain as much as they can and wish;
- engage in meaningful and purposeful activities;
- live their life in the manner that suits them best.

Equality, individuality and diversity

The clients' right to:

- move towards an independent life, with a sense of direction and with the opportunity to fulfil their wishes;
- have their ethnicity, race, language, culture, sexual orientation, gender identity and beliefs respected;
- be respected and treated as individuals;
- be treated on an equal footing with others and have somebody to provide them with assistance in an environment free from bullying, harassment, abuse and discrimination;
- complain without fear of confrontation or retribution.

GLOSSARY

- “Challenging behaviour”** means behaviour exhibited by clients that is triggered by intrinsic or extrinsic factors and has the potential to cause physical or psychological harm to the clients themselves or other persons around them.
- “Civil rights”** means rights conferred on persons by the laws of Malta.
- “Client”** means a person with disability aged eighteen or over who enters into an agreement with a service provider to make use of services offered by the day centre. Clients may nominate person/s to be kept informed about the clients’ personal affairs and take decisions or act on the clients’ behalf. With the exception of client personal financial transactions, such persons cannot be part of the management or staff of the service provider. Clients may also be assigned a guardian by the Guardianship Board in which case certain decisions are taken by the guardian as per Majority, Guardianship, Interdiction and Incapacitation Act No. XXIV of 2012.
- “Competent person”** means a person who is recognised as capable and/or authorised to undertake specific activities in line with applicable national legislation, standards or directives issued by the applicable authorities.
- “Day Centre”** means the premises that has been purposely built, or adapted to provide planned care and support for persons with disability during the day time.

“Day Centre Services”

means the services that support and safeguard the wellbeing of persons with disability outside of their residence and during the day. These services focus and are adapted to meet the client’s needs, abilities and preferences.

“Holistic assessment”

means the process in which staff identifies the needs and aspirations of the clients in relation to their health, personal, emotional, spiritual and psychological care, protection and social networking, family support and what services should be delivered to satisfy these needs and aspirations.

“Management”

means a person or persons who act on behalf of the service provider to provide leadership to staff and to oversee and control the proper functioning of the services offered to persons with disability.

“Performance indicator”

means an active descriptor of what service providers need to do to ensure service outputs that support the quality indicators.

“Personal support programme”

means a document that is planned and developed with the direct participation of the clients and includes a holistic assessment of the clients that specifies how the clients’ needs and aspirations are going to be met as well as the resources required by the clients whilst using the Day Centre Service.

“Person with disability”

means a person who has prolonged physical, mental, intellectual or sensory problems that when these relate with various obstacles can interfere from fully and effectively participating in society on equal basis as others, as defined in Article 1 of the United Nations Convention on the Rights of Persons with Disabilities.

“Policies and procedures”	means documents released by management that regulate how the day service should operate.
“Prospective client”	means a person with disability aged eighteen or over who is considering whether to enter into an agreement with a service provider to use the day service and make use of services offered by the service provider.
“Quality indicator”	means a statement that sets out the requirements to achieve compliance with a standard.
“SCSA”	means Social Care Standards Authority as established by virtue of Article 5 of the Social Care Standards Authority Act (Cap. 582).
“Service provider”	means a person who, or organisation that operates a day centre and provides associated services to persons with disability.
“Staff”	means a person engaged by the service provider wherein one of the person’s responsibilities is to provide client support or care, irrespective of whether or how the person is compensated.

STANDARD 1:

CLIENTS' RIGHTS

STANDARD STATEMENT:

This Standard promotes rights that assure dignity and respect whilst preventing discrimination.

QUALITY INDICATORS

1. The service provider makes sure that the clients' privacy is respected and that they are not subjected to unnecessary intrusion.
2. The service provider makes sure that clients are treated equally with respect and dignity.
3. The service provider supports clients to express themselves.

QUALITY INDICATOR 1

1.0 Quality Indicator: The service provider makes sure that the clients' privacy is respected and that they are not subjected to unnecessary intrusion.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 1.1 The management and staff provide a private space where clients can speak with them in a private and confidential manner.
- 1.2 The management and staff provide a private space where clients may see health or social care professionals in such a way that respects the clients' privacy.
- 1.3 The management provides clients with adequate accessible lockable space where the clients can keep their personal belongings.
- 1.4 The management and staff provide a private space where clients can use the telephone/mobile.
- 1.5 The management and staff provide internet access in designated areas for clients to use the internet to access electronic mail and interacting on social media.

QUALITY INDICATOR 2

2.0 Quality Indicator: The service provider makes sure that clients are treated equally with respect and dignity.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 2.1 The management and staff communicate with clients in an appropriate manner.
- 2.2 The staff uses established procedures to help clients to understand their rights and responsibilities regarding equal opportunities.
- 2.3 The staff gives the necessary support for clients to enjoy their civil rights.
- 2.4 The staff informs clients when new persons start using the Day Centre Services or when new members of staff or students start working at the day centre.
- 2.5 The management draws up policies and procedures that staff practises so that clients are not discriminated against on the basis of sex and family responsibilities, sexual orientation, age, race/ethnic origin, religion/belief and gender identity, gender expression and sex characteristics, language or disability.
- 2.6 The staff records and the management investigates all allegations of discrimination that come to the staff's attention.
- 2.7 The staff respects clients' routine, preferences and any cultural needs that they have in relation to their personal care.
- 2.8 The staff does not exclude clients from activities because of their challenging behaviour as long as there is no risk of psychological harm or injury to the clients or other persons taking part.
- 2.9 The staff makes sure that their routine is adapted to meet the needs of the client and does not negatively affects the client's activities.

QUALITY INDICATOR 3

3.0 Quality Indicator: The service provider supports clients to express themselves.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 3.1 The staff lists the clients' preferred means of communication in their personal support programme.
- 3.2 The staff uses means of communication that meet the clients' needs.
- 3.3 The management and staff make the necessary arrangements for clients to express their opinions in Maltese or in English or to communicate with management and staff in a format that they prefer.
- 3.4 The management and staff help the clients identify and celebrate special events.
- 3.5 The management and staff make clients aware that they have the right to nominate persons, who are not part of the staff or management of the residence, to act or take decisions on their behalf and/or to be informed about their welfare.

STANDARD 2:

PERSONAL SUPPORT PROGRAMME

STANDARD STATEMENT:

This Standard promotes the development, implementation and review of the personal support programme with individual clients to establish the care and support required and set objectives to meet the clients' needs and aspirations.

QUALITY INDICATORS:

1. The service provider draws up the personal support programme upon a holistic assessment of the clients and with the direct participation of the clients.
2. The service provider makes sure that the staff supports and empowers clients to achieve objectives identified in the personal support programme.
3. The service provider makes sure that the personal support programme is reviewed regularly and updated as the clients' requirements change.

QUALITY INDICATOR 1

1.0 Quality Indicator: The service provider draws up the personal support programme upon a holistic assessment of the clients and with the direct participation of the clients.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 1.1 The multidisciplinary team helps the clients to participate directly during the assessment as well as gives clients the necessary guidance and help to follow the advice given to them.
- 1.2 The multidisciplinary team includes the following in its assessment results:
 - 1.2.1 The needs and wishes of the clients and the support they need to address these, including equipment, modifications, as well as other services;
 - 1.2.2 The clients' personal care requirements;
 - 1.2.3 The service of a social worker, if required;
 - 1.2.4 The health requirements by the clients;
 - 1.2.5 The behavioural support needed, if required;
 - 1.2.6 Food preferences, allergies and intolerances of the clients;
 - 1.2.7 The needs of the clients to be able to communicate in a comfortable manner.
- 1.3 The multidisciplinary team presents the assessment report to the clients in an accessible format and explains the report to the clients verbally or in a way that they understand.

QUALITY INDICATOR 2

2.0 Quality Indicator: The service provider makes sure that the staff supports and empowers clients to achieve objectives identified in the personal support programme.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 2.1 The staff supports the clients to attain the objectives described in the personal support programme.
- 2.2 The staff encourages the clients to use their abilities and develop new ones through different appropriate activities.
- 2.3 The staff informs the clients that any lack of agreement regarding the kind and level of support they receive is recorded in the personal support programme.

QUALITY INDICATOR 3

3.0 Quality Indicator: The service provider makes sure that the personal support programme is reviewed regularly and updated as the clients' requirements change.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 3.1 The multidisciplinary team reviews the personal support programme at least once a year or when the clients' needs change or when the clients request a review.
- 3.2 The staff informs the clients that when the requirements of the clients change the staff will notify the management.
- 3.3 The management assigns a staff member to the clients to regularly discuss with the clients the progress made in line with the objectives set in the personal support programme.

STANDARD 3:

PARTICIPATION AND DECISION MAKING

STANDARD STATEMENT:

This Standard promotes active participation of clients in receiving Day Centre Services and advocates and respects client's decisions and feedback.

QUALITY INDICATORS:

1. The service provider assists the prospective clients in taking a decision on whether to use the Day Centre Service or not.
2. The service provider makes sure that the clients are given enough time when they need to take a decision.
3. The service provider respects the decisions taken by the clients and actively supports the clients when taking decisions.
4. The service provider encourages the clients to actively take part in planning and participating in social and leisure activities.
5. The service provider makes sure that the clients have the opportunity to review and give feedback on the Day Centre Services.
6. The service provider deals promptly and effectively with situations causing concerns and complaints.
7. The service provider respects the choices of the clients regarding nutrition and eating routines.

QUALITY INDICATOR 1

1.0 Quality Indicator: The service provider assists the prospective clients in taking a decision on whether to use the Day Centre Service or not.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 1.1 The management gives prospective clients time to decide and the opportunity to change their mind and choose not to use the Day Centre Service.
- 1.2 The management gives prospective clients the opportunity to visit the day centre in a planned manner, for at least one time. During this visit, the prospective clients may be assisted by two persons whom they trust.
- 1.3 The management gives prospective clients and the persons assisting them, the opportunity to discuss the services with current clients, the management and the staff, so that prospective clients may evaluate whether they wish to use the Day Centre Service.
- 1.4 The management encourages prospective clients to be involved in all the meetings related to their starting to make use of the Day Centre Services.

QUALITY INDICATOR 2

2.0 Quality Indicator: The service provider makes sure that the clients are given enough time when they need to take a decision.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 2.1 The management and the staff give clients enough time to reflect upon their choices, feelings and opinions and do not pressure them to decide in any way.
- 2.2 The management and staff record and follow the clients' decisions on who has the right to know and to access their personal things.
- 2.3 The staff helps the clients to understand their financial rights, benefits, allowances and money management at the clients' request.
- 2.4 The staff provides financial literacy training to clients at the clients' request.

QUALITY INDICATOR 3

3.0 Quality Indicator: The service provider respects the decisions taken by the clients and actively supports the clients when taking decisions.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 3.1 The management and staff recognise and follow through with decisions that clients take, as long as these do not create discomfort, inconvenience, risk or involve disrespect for others.
- 3.2 The staff explains to the clients the different options they may have when using any of the Day Centre Services.
- 3.3 The management makes arrangement for the clients to be assisted to talk to a trusted independent person or professional to help them act according to their choices, when the clients request such assistance.
- 3.4 The staff meets with the clients and discusses their needs and options before clients give their consent to any particular service.
- 3.5 The staff recognises and follows through on the clients' decision on their appearance. When required, the staff may guide the clients in a sensitive manner.

QUALITY INDICATOR 4

4.0 Quality Indicator: The service provider encourages the clients to actively take part in planning and participating in social and leisure activities.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 4.1 The staff involves clients:
 - 4.1.1 In the everyday life of the Day Centre Service;
 - 4.1.2 In the choice of provisions;
 - 4.1.3 In planning activities.
- 4.2 The staff consults clients about outings with other persons, so that clients do not feel uncomfortable with a group.
- 4.3 The staff gives clients the opportunity to participate in activities which meet their preferences and abilities and which facilitate social inclusion.
- 4.4 The staff encourages clients to maintain a healthy lifestyle by participating in physical activities both inside and outside the day centre.

QUALITY INDICATOR 5

5.0 Quality Indicator: The service provider makes sure that the clients have the opportunity to review and give feedback on the Day Centre Services.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 5.1 The staff helps clients determine the frequency and timings of reviews and other meetings about the services delivered to them.
- 5.2 The management makes arrangements for clients to contribute in monitoring the quality of support and services provided.
- 5.3 The management makes arrangement for clients to contribute in the development of plans for the Day Centre Services.

QUALITY INDICATOR 6

6.0 Quality Indicator: The service provider deals promptly and effectively with situations causing concerns and complaints.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 6.1 The management and staff actively develop a culture where clients freely discuss any concerns that they have with the staff or the management, who will do their best to improve the situation.
- 6.2 The staff gives clients the necessary support in case of disagreement with another person including a member of staff. If the clients wish to have other competent persons to help them express their opinions, the staff provides the clients with information regarding the former.
- 6.3 The management deals promptly and effectively with situations of concern and complaints, and provides complete information regarding what action is taken as a result of the complaint lodged.
- 6.4 The management informs clients that they can access information kept about them and contest it if they feel it is misleading.

QUALITY INDICATOR 7

7.0 Quality Indicator: The service provider respects the choices of the clients regarding nutrition and eating routines.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 7.1 The staff provides clients with a varied menu which reflects their preferences and dietary requirements, and takes into account their allergies and intolerances.
- 7.2 The staff, with the involvement of the client (when possible), makes a snack and a hot or cold drink (including with thickeners if required) available whenever clients wish unless there is a medical assessment which indicates that the clients need to control or limit their intake.
- 7.3 The staff facilitates clients' ability to access the menu.
- 7.4 The staff helps clients choose to be assisted in the cooking of their own food or to cook their own food.
- 7.5 The staff encourages clients to:
 - 7.5.1 Dine with other clients however they may choose;
 - 7.5.2 To eat at a time that is more convenient for them;
 - 7.5.3 Privately unless this creates an inconvenience to the other clients.
- 7.6 The staff facilitates clients' access to potable water at no additional cost.

STANDARD 4:

PROTECTION AND SAFEGUARDING

STANDARD STATEMENT:

This Standard promotes the physical, emotional and mental wellbeing as well as the safety of the clients.

QUALITY INDICATORS:

1. The service provider makes sure that competent persons carry out an evaluation of hazards and risks within the day centre.
2. The service provider makes sure that the clients are safe by undertaking individualised risk assessments.
3. The service provider makes sure that the clients' personal belongings are held securely.
4. The service provider makes sure that the clients are protected and safeguarded from harassment, abuse and discrimination.
5. The service provider makes sure that the clients' private space is respected.
6. The service provider makes sure that the clients are provided with nutritionally balanced meals according to their dietary and health requirements.
7. The service provider makes sure that the clients are supported in taking care of their holistic wellbeing.
8. The service provider supports and where necessary assists the clients to receive the medication they require in a safe manner.

QUALITY INDICATOR 1

1.0 Quality Indicator: The service provider makes sure that competent persons carry out an evaluation of hazards and risks within the day centre.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 1.1 The management engages a competent person to evaluate hazards within the day centre and risks associated with its intended use at least once every two years or whenever there is a situation that may change risk levels.
- 1.2 The management equips the day centre with the necessary measures to ensure clients' safety and that of others.
- 1.3 Emergency services can easily access the location of the day centre.
- 1.4 The management takes out a comprehensive insurance policy for the day centre and its operations.

QUALITY INDICATOR 2

2.0 Quality Indicator: The service provider ensures the safety of the clients by undertaking individualised risk assessments.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 2.1 The staff involves clients in the evaluation of their own risk.
- 2.2 The staff verbally explains to clients the personal risk assessment report and gives a copy of the report in a format that is accessible to them.
- 2.3 The management establishes procedures that ensure clients' safety where visitors are concerned.
- 2.4 The staff consults with clients regarding visits to the day centre by professionals, regulatory bodies or the public, and protects all clients from unwanted attention.
- 2.5 The staff uses only authorised measures for the clients' own security or for the security of others.
- 2.6 The staff does its utmost to predict and prevent situations that may trigger challenging behaviours.
- 2.7 The staff only uses restraint as a last resort and in the most dignified manner possible when protecting clients or others.
- 2.8 The staff records all accidents or incidents including episodes of restraint and always informs the management who investigates the case accordingly. Where required, management adapts the service to safeguard the safety of the clients as well as of others.
- 2.9 The staff supports clients in a sensitive manner and seeks specialised help if necessary when clients present signs or show intention of self-harm.

QUALITY INDICATOR 3

3.0 Quality Indicator: The service provider makes sure that the clients' personal belongings are held securely.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 3.1 The staff makes certain that clients' personal belongings are not used by other persons unless the clients indicate otherwise.
- 3.2 The staff makes sure that when holding clients' personal belonging, the clients know where these are held.
- 3.3 The management and staff document every financial transaction they make on the clients' behalf so that it can be traced.
- 3.4 The staff assists the clients where necessary in operating the clients' personal equipment.

QUALITY INDICATOR 4

4.0 Quality Indicator: The service provider makes sure that the clients are protected and safeguarded from harassment, abuse and discrimination.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 4.1 The management and staff make clients aware that they can report cases of harassment, abuse or discrimination to the management or to the Social Care Standards Authority or to the Commission for the Rights of Persons with Disability.
- 4.2 The management responds effectively to reports of harassment, abuse or discrimination whilst safeguarding all clients.
- 4.3 The staff provides clients with personal and intimate care, in a sensitive and dignified manner.
- 4.4 When the staff accompanies clients during activities outside the day centre, the staff makes sure that s/he is not identified differently from the clients, for example by wearing a uniform.

QUALITY INDICATOR 5

5.0 Quality Indicator: The service provider makes sure that the clients' private space is respected.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 5.1 The staff helps clients understand that sexual expressions take place only in private and in appropriate places.
- 5.2 The clients know which spaces in the day centre are identified as public or private.
- 5.3 The staff knocks on the toilet and the bathroom door, and waits for the clients to indicate that s/he may enter, unless there is a perceived overriding emergency.
- 5.4 The management restricts the use of cameras, including CCTV, to the entry ways, passages, lifts and stairs for security and safety reasons only and do not disrupt the clients' everyday personal life.
- 5.5 The management and staff make sure that clients have the opportunity to spend time alone in an adequate space when they so wish.

QUALITY INDICATOR 6

6.0 Quality Indicator: The service provider makes sure that the clients are provided with nutritionally balanced meals according to their dietary and health requirements.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 6.1 The staff provides clients with meals that are nutritionally balanced for their dietary requirements and in quantities and quality that are best suited to them.
- 6.2 The management refers clients to the competent health care professional when clients show difficulty in being able to eat or drink on their own.
- 6.3 The staff implements any recommendations of competent persons regarding alternative methods of assisting clients who show difficulties in being able to eat or drink on their own.

QUALITY INDICATOR 7

7.0 Quality Indicator: The service provider makes sure that the clients are supported in taking care of their holistic wellbeing.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 7.1 The management explains to clients the availability of preventative health care programmes irrespective of whether these are run by the service provider or not.
- 7.2 The staff makes arrangements for the clients to be assessed by healthcare professionals and administers first aid if required when the clients become unwell, or their physical, mental or emotional health deteriorates.

QUALITY INDICATOR 8

8.0 Quality Indicator: The service provider supports and where necessary assists the clients to receive the medication they require in a safe manner.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 8.1 The management complies with relevant legislation when assuming responsibility for keeping the clients' medicine, supplements and medication.
- 8.2 The management follows legal procedures for the safe disposal of medicine, supplements and medication and items related to their consumption.
- 8.3 The staff documents the administration of the medicine, supplements and medication on a treatment card or chart.
- 8.4 The staff records every health episode and reports these to the medical professionals involved in the treatment of the clients.
- 8.5 The staff supports the clients in seeking medical advice in case of sudden changes, concerns regarding medicines, supplements, medication or presenting conditions.
- 8.6 The staff monitors the clients' medicine, supplements and medication and the conditions for which they were prescribed.
- 8.7 The staff respects the clients' decision to prepare, administer and keep their medicine, supplements and medication unless the personal support programme and/or the medical record indicates that the clients are unable to do so safely.
- 8.8 The staff provides suitable and easily accessible lockable storage space which is for the clients' sole use when clients handle their own medicine, supplements and medication.



STANDARD 5:

SERVICE PROVISION

STANDARD STATEMENT:

This Standard promotes formal client access and use of services that meet the needs and wishes of the clients.

QUALITY INDICATORS:

1. The service provider and clients enter into a written agreement covering the conditions and costs of the services and care offered.
2. The service provider offers services in key areas to the clients.

QUALITY INDICATOR 1

1.0 Quality Indicator: The service provider and clients enter into a written agreement covering the conditions and costs of the services and care offered.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 1.1 The management gives prospective clients a comprehensive document regarding all financial costs related to clients' use of the Day Centre Services offered.
- 1.2 The management gives prospective clients a comprehensive document regarding the clients' rights and responsibilities of using the Day Centre Services.
- 1.3 The management makes sure that the agreement is signed by those involved and includes:
 - 1.3.1 The date when the agreement is concluded;
 - 1.3.2 The date from when the clients start using the day service;
 - 1.3.3 If applicable, the period of time that the agreement is valid for.
- 1.4 The management concludes the agreement with the clients before or on the day that the clients start using the day service.
- 1.5 The management verbally explains the content of all documents to the clients.
- 1.6 The management gives copies of all documents to the clients in a format that is easily accessible for them.

QUALITY INDICATOR 2

2.0 Quality Indicator: The service provider offers services in key areas to the clients.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 2.1 The staff regularly carries out psycho-educational programmes according to the clients' needs.
- 2.2 The staff regularly carries out mental, physical and emotional wellbeing programmes according to the clients' needs.
- 2.3 The management makes arrangements for a suitable transport service for clients from their place of residence to the day centre and back when clients request this.
- 2.4 The management has a contingency plan in the event that the day centre closes temporarily.
- 2.5 The management has a contingency plan through which the staff covers and supports alternative communication in case of breakdown of equipment or other emergency.
- 2.6 The staff assists the clients in accessing alternative care or support in the event that their needs cannot be met by the day service.



STANDARD 6:

SERVICE QUALITY MANAGEMENT

STANDARD STATEMENT:

This Standard promotes service management based on continuous improvement of service operations and staff development.

QUALITY INDICATORS:

1. The service provider implements management strategies to continuously improve service delivery to the clients.
2. The service provider implements transparent recruitment strategies and plans for the continuous development of staff.

QUALITY INDICATOR 1

1.0 Quality Indicator: The service provider implements management strategies to continuously improve service delivery to the clients.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 1.1 The management develops a manual of procedures that defines how staff interacts with the clients. It is easy to understand and use by those needing to refer to it. The management regularly reviews and updates the manual as needed.
- 1.2 The staff performs its work according to the Code of Ethics and Practice of their profession and the Code of Ethics drawn up by the management of the Day Centre Service.
- 1.3 The management regularly organises and records staff supervision.
- 1.4 The management implements a quality improvement system, based on the evaluation of the day centre's services and feedback from the clients.
- 1.5 The management maintains direct contact with the clients at least once every six months.
- 1.6 The management implements an efficient system for keeping and sharing information according to legal requirements.

QUALITY INDICATOR 2

2.0 Quality Indicator: The service provider carries out transparent recruitment strategies and plans for the continuous development of staff.

PERFORMANCE INDICATORS:

The service provider makes sure that:

- 2.1 The management selects and assigns staff to specific tasks after a thorough recruitment process which includes:
 - 2.1.1 Verification of identity;
 - 2.1.2 Verification of qualifications and/or experience;
 - 2.1.3 Verification of conduct certificate;
 - 2.1.4 Registration in professional registers.
- 2.2 The management has a procedure for the continuous professional development and ongoing training of all staff, in order for them to employ methods that reflect updated knowledge and best practice in their field. This training includes but is not exclusive to:
 - 2.2.1 Adequate operating procedures ensuring that staff avoid stereotypes and biases related to the sexual orientation, age, race/ethnic origin, religion/belief and gender identity, or language of the clients when delivering services;
 - 2.2.2 Disability equality training;
 - 2.2.3 Moving and handling clients safely;
 - 2.2.4 Valid certification in food handling for staff responsible for handling food;
 - 2.2.5 Valid first aid certification;
 - 2.2.6 Action to be taken in an emergency and how to handle a fire emergency.

ANNEX I: MANUAL OF POLICIES AND PROCEDURES

The management develops comprehensive policies and procedures that cover all areas of the Day Centre Service. The below is a non-exhaustive list of policies and procedures that should be included in the manual.

1.0 OPERATIONAL POLICIES AND PROCEDURES

- 1.1 Confidentiality policy
- 1.2 Data Protection policy
 - 1.2.1 Record keeping and access to records
 - 1.2.2 Incident reports
- 1.3 Entrance and eligibility
- 1.4 Admission and termination
- 1.5 Initial and subsequent assessments
- 1.6 Welcoming new clients
- 1.7 Termination
- 1.8 Personal support programme
 - 1.8.1 Reviews
 - 1.8.2 Health and wellbeing
- 1.9 Behaviour management
 - 1.9.2 Dealing with challenging behaviour
 - 1.9.2 Restraint
- 1.10 Allegations of abuse in care
- 1.11 Allegations of bullying in care
- 1.12 Equality
- 1.13 Complaints procedure
- 1.14 Spot checks and monitoring
- 1.15 Financial and money management

2.0 STAFF

- 2.1 Staff professional behaviour towards clients and co-workers
- 2.2 Supervision policy
- 2.3 Support group

- 2.4 Recruitment
 - 2.4.1 Employment contract
 - 2.4.2 Job descriptions
- 2.5 Performance appraisals
- 2.6 Training and development
- 2.7 Staff meetings
- 2.8 Complaints by staff
- 2.9 Harassment policy
- 2.10 Staff handover
- 2.11 Staff ratios
- 2.12 House keeping

3.0 HEALTH & SAFETY

- 3.1 Injuries
- 3.2 Administration of medicine
- 3.3 Manual Handling Procedures
- 3.4 Self-evaluation of service
- 3.5 Evaluation and management of risk

4.0 EMERGENCY PROCEDURES

- 4.1 First aid
- 4.2 Emergency management and evacuation
- 4.3 Fire management
- 4.4 Medical emergency

5.0 HOUSE PROCEDURES

- 5.1 Common areas
- 5.2 Accessibility to personal property
- 5.3 Mobile phones, the internet and electronic media
- 5.4 Absent without permission
- 5.5 Entering and exiting the day centre
- 5.6 Visitors
- 5.7 Transportation
- 5.8 Maintenance and certification of house equipment
- 5.9 Pets
- 5.10 Food preparation and handling

ANNEX II: INFORMATION FOR PROSPECTIVE CLIENTS ON THE PHYSICAL ENVIRONMENT AND SERVICES OFFERED

The management gives prospective clients accurate information regarding the physical environment of the day centre as well as the services offered and includes, but is not limited to, the following information:

1. The locality where the day centre is situated, the centre's surroundings, the physical structure and the design of the day centre.
2. A description of the facilities and common spaces.
3. The maximum number of clients that can use the Day Centre Services at a given time.
4. The mission statement, objectives and values governing the service.
5. The organisational structure of the day centre.
6. All the services which the day centre offers.
7. Information on the advantages, disadvantages and the challenges that the Day Centre Service may have.
8. How the Day Centre Service is suitable for clients who require change.
9. Activities in which the clients may participate.
10. Local events, facilities and activities that the clients can take part in.
11. The clients' possibility of being assisted to talk to a trusted independent or professional representative.
12. The clients' possibility of participating in inspections that are carried out by the SCSA.

ANNEX III: INFORMATION FOR PROSPECTIVE CLIENTS ON THE RIGHTS AND RESPONSIBILITIES OF USING THE SERVICE

The management gives the prospective clients a comprehensive document regarding rights and responsibilities of using the service. The management explains the content of this document to clients verbally and makes it available to the clients in a format that is accessible to them. The information in this document includes, but is not limited to the following:

1. The general rights and responsibilities of the clients.
2. The right of the clients to access other services of their choice offered by other entities or individuals.
3. The right of the clients to be informed as soon as possible if the day centre is closing down because of an emergency.
4. The right of the clients to be informed at least six months before the planned closure of the day centre if the closure exceeds five days.
5. Regulations regarding clients' access to the premises, activities, staff and management.
6. Regulations regarding the participation of the clients in everyday life and activities.
7. Regulations and consequences of unacceptable behaviour by the clients (behaviour that relates to the disability of the clients is not considered "unacceptable" unless it puts the clients or others at risk).
8. The responsibilities of the clients towards the other clients and staff.
9. Information regarding whether there are animals in the day centre.
10. Information whether pets may be kept and what type of animals may be kept (a guide dog is always permitted) as well as the responsibilities of the clients.

ANNEX IV:

INFORMATION FOR PROSPECTIVE CLIENTS ON THE FINANCIAL COSTS OF USING THE SERVICE

The management gives the prospective clients a comprehensive document regarding the financial costs of using the service. The management explains the content of this document to clients verbally and makes it available to the clients in a format that is accessible to them. The information in this document includes, but is not limited to the following:

1. Information regarding the basic fee and which services are covered by the said fee.
2. Other services that may be given against an additional specified fee.
3. When and how payment for services is affected.
4. Whether there exist circumstances when money is refunded.
5. What arrangements will be made should the private funds of the clients run out or become insufficient.
6. The right of the clients to be informed at least two months in advance about any increase or variation in the fee/s or any changes in the method of payment or to whom this is due.
7. Services provided outside normal hours of service against an additional payment (this payment will be specified).
8. Any penalties for late or non-payments (if applicable).

ANNEX V: WRITTEN AGREEMENT BETWEEN THE SERVICE PROVIDER AND THE CLIENT TO ACCESS THE DAY CENTRE AND USE ITS SERVICES

The management makes sure that before clients start using the services of the day centre, the service provider and the client enter into a written agreement that governs the access to and use of the Day Centre Services. The management explains the content of this document to clients verbally and makes it available to the clients in a format that is accessible to them. This agreement includes, but is not limited to the following:

1. A description of the different services that are available to the clients.
2. The legal rights of the clients to use the services.
3. The right of the clients to be given any document in a format that is accessible to them.
4. The right of the clients to consent any changes to the agreement after it is signed.
5. The right of the clients to stop using the day service and the conditions that may apply including the notice period that the clients have to give to the management.
6. The conditions under which the service provider may terminate the agreement and the assistance that the management/staff gives to the clients in such a scenario.
7. The assistance provided by the management/staff to the clients in order to access alternative services if the service provider cannot continue to meet the needs of the clients.
8. The right of the clients to be provided with documentation regarding their personal support programme which shows the care and support they received from the service when the service is terminated.
9. Information about how the clients' personal information can be disseminated legally, limits of confidentiality and the duty to report abuse or risk to self or others.

ANNEX VI:

RECORD OF

THE PERSONAL SUPPORT PROGRAMME

The management makes sure that the personal support programme is recorded and includes but is not limited to the following information:

1. The name of the staff member who is assigned to the clients in order to support them in the development of the personal support programme.
2. A note on how the clients prefer to be addressed at all times.
3. The details of persons who are nominated by the clients to represent and/or take decisions on their behalf and/or be kept informed of the services being availed of.
4. The details of the person/s who are nominated by the clients to be contacted in cases of emergency.
5. Notes on information and decisions agreed upon by the parties involved.
6. A report on the assessment of the client's level of independence in various activities.
7. A report on the assessment of the clients' strengths and limitations.
8. A report on the assessment of the individual needs of the clients.
9. A report on whether the clients will benefit from educational opportunities within the community, training (including vocational training) and work.
10. A report on the support that the clients need in order to achieve life aspirations.

ANNEX VII: USEFUL REFERENCE MATERIAL

- The United Nations Convention on the Rights of Persons with Disabilities (2006)
- The Social Care Standards Authority Act No. XV of 2018
- Food Safety Act No. XIV of 2002
- OHS Authority Act No. XXVII of 2000
- Equality for Men and Women Act No. I of 2003
- Majority, Guardianship, Interdiction and Incapacitation Act No. XXIV of 2012
- Data Protection Act No. XX of 2018

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