

DRAFT NATIONAL MINIMUM DAY SERVICE/OPPORTUNITIES STANDARDS

January 2007

DAY SERVICE STANDARDS

INTRODUCTION

This draft set of standards has arisen from a series of 18 regional workshops, sponsored by the Department of Health, on re-configuring day opportunities. These standards reflect what was reported as current good practice around the country and an idealised model of day opportunities that can be used to plan, develop, review and/or commission services.

These standards are designed as a baseline to which all day services/opportunities should aspire, although the extent to which they are applicable would need to be determined locally. In this sense the document is aspirational and should enable realistic targets to be set that can be achieved within a defined period of time. For example we would regard that a Day Care Service should meet all the requirements of an individual plan, whilst a drop-in activity-based or referral service might only need to have basic information such as name, date of birth, next of kin etc.

The standards do not contain specific regulatory standards such as space requirements, staffing ratios etc as these are subject to ongoing discussion with the regulatory body. However, these standards have proved to be beneficial to providers of day services in their contractual negotiations with commissioners; similarly for commissioners in setting out service specifications.

The standards have been drafted to meet the needs of all adult client groups and will, when finalised, be accompanied by an audit tool and developmental workbook. Whilst it is recognised that a significant proportion of day services is building based, it is our view that the principles enshrined in these standards could, in the main, be applied to many of the newer, non-building based types of day services/opportunities.

These standards recognise the change of emphasis for day services/opportunities in that they should not automatically be viewed as a service for life, but as a stepping stone to independence. It is therefore vitally important that day services are clear as to what they offer, who is eligible and appropriate, and what outcomes can be achieved. All measurements in this document are from a user's perspective which should be regularly sought and independently validated as part of the overall monitoring of the day service.

The next stage is a national consultation on these draft standards, following which the final version will be published. It is recommended that local economies, in consultation with users and carers, use the final version as a baseline to review their current strategic approach to day opportunities. (*Supporting documents such as Day Service Strategy Checklist are available from SCP Consult if required.*)

In the drafting of these documents we are grateful for the help given by many members of the Department of Health Commissioning Learning & Improvement Network Regional Day Services Re-configuration workshops. In particular

- Scottish Executive – Draft National Care Standards
- Southwark Day Opportunities for Older People- Quality Standards 2005 -2008
- Standards in Day Care Services : Age Concern

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THE DAY SERVICE PROCESS**Standard 1: Information:**

Day Services will have an accessible introductory information pack for potential service users, comprising basic information from the list below, and will also ensure that the following information is in place and available on request to the service user and their representative.

- 1.1 Statement of Purpose: aims of the service, philosophy of care, who the service is for, support for carers and the cultural and social needs catered for.
- 1.2 Current service/business plan.
- 1.3 Staff Handbook, code of conduct dealing with issues such as gifts gratuities etc.
- 1.4 Any relevant Inspection reports.
- 1.5 Public Liability Insurance certificate.
- 1.6 Statement of service users' rights to self-determination and responsibilities, and consequences of unacceptable behaviour.
- 1.7 Qualification and experience of the Manager and staff, and staffing numbers.
- 1.8 Service Provision: type of service, facilities, opening hours, range of activities, number of places, transport arrangements, if necessary.
- 1.9 Procedures/arrangements if the service comes under new management, emergency temporary closure, service reduction or permanent closure.
- 1.10 Charges: what they are and to whom they are payable.
- 1.11 List of policies and procedures, available on request, including:
 - Accidents & Incidents
 - Bullying/harassment
 - Carers Support
 - Complaints/Compliments & Comments
 - Confidentiality/Data Protection
 - Dealing with Violence / Restraint
 - Equalities
 - Exclusions
 - Fair Access to Care
 - Fairer Charging
 - Fire
 - Food Hygiene
 - Health & Safety
 - Medication / self-medication
 - Next of kin/emergency contact
 - Personal Relationships & Sexuality
 - Protection of Vulnerable Adults
 - Recording
 - Risk assessment & management
 - Safer Handling Safer Handling
 - Security Arrangements
 - Smoking
 - Transport
 - User Involvement
 - Whistle Blowing

Measurement:

Potential service users (and their carers/families) receive all the necessary information to make informed decisions about using the service, and fully understand their rights and responsibilities whilst using the service.

Standard 2: Physical Environment

The physical environment will be accessible, safe, pleasant and conducive to promoting independence and autonomy for users.

- 2.1 The grounds and outside of the environment are not identifiable in a way that stigmatises the people who attend, and promotes integration and inclusion.
- 2.2 The premises are fully compliant with requirements under the Disability Discrimination Act.
- 2.3 The design of the premises and fittings will help service users to maintain and increase their independence.
- 2.4 The premises will comprise appropriate rooms/spaces for group and individual activities.
- 2.5 The premises comply with current fire regulations, health and safety requirements, and environmental health regulations.
- 2.6 The premises are kept clean, hygienic, comfortable and warm.
- 2.7 A range of recreational equipment will be available, and where practicable, full use will be made of the grounds around the building.
- 2.8 The provider has the necessary insurance for employees, public liability, building and contents.
- 2.9 Service users will have access to secure storage facilities for their belongings.
- 2.10 All notices and signage will be in an appropriate format to meet the communication needs of individual service users.
- 2.11 Service users are able to come and go, and move around the premises as they please, with arrangements in place for their safety and well-being, as identified in their individual plan.
- 2.12 All appropriate security measures will be in place; any “locked door” policy must only be considered when all other measures have proved unsuccessful. This policy must be agreed by service users, senior management and the appropriate regulatory body, and reviewed at least every 6 months.

Measurement:

Service users are satisfied that the day service environment is pleasant, clean, comfortable and safe, and allows them to be as independent as possible.

Standard 3: Staffing

The provider will ensure that there are sufficient trained staff to deliver the stated aims of the service.

- 3.1 Staffing arrangements will be sufficient to meet the individual social, occupational and physical care needs of users, and the overall needs of the service.
- 3.2 All staff will be appointed and regularly appraised against an identified and agreed set of core competencies for the service.
- 3.3 All staff, including volunteers, will be subject to Criminal Record Bureau (CRB) checks.
- 3.4 The managers of the service will hold appropriate qualifications (NVQ Level 4?), and all staff will be trained to an agreed standard, appropriate to the level of service provision, such as NVQ Level ? standard, or equivalent, within an agreed period of time after commencement in post.

- 3.5 Volunteers will be recruited according to the skills and ability they have to perform the required tasks, will receive a full induction to the service, and training will be offered to address any skills shortfall.
- 3.6 Staff will receive regular training to carry out all aspects of their role, including:
- Administration of medication
 - Communication skills
 - Dealing with Violence & Aggression
 - Equalities/Diversity Awareness
 - First Aid
 - Food Hygiene Food Hygiene
 - Health and Safety
 - Protection of Vulnerable Adults
 - Providing Personal Care
 - Risk Assessment & Management
 - Providing Personal Care
 - Understanding Long-term Conditions
 - Safer Handling
- 3.7 The ethnicity of the staff team will be broadly reflective of the local community.
- 3.8 The gender of the staff team will be appropriate to provide same sex intimate personal care.

Measurement

Service Users are satisfied that there are sufficient staff to competently meet their daily and developmental requirements

Standard 4: Pre-joining Arrangements

The provider will ensure that potential service users are given every opportunity to find out about the service in order to make informed decisions about using the service.

- 4.1 The referring agency will provide an individual assessment of need and desired outcomes for potential service users.
- 4.2 The provider has a prompt and efficient system for responding to referrals, including emergency referrals
- 4.3 Prompt contact is made with the person referred, and their carer or representative as appropriate, to introduce a named member of staff and arrange an initial meeting
- 4.4 The person referred has the opportunity to visit the service with his/her family/friends or carer, as many times as required within an agreed period of time, and is given the opportunity to speak to staff and other people using the service
- 4.5 The provider will ensure that pre-joining arrangements fully comply with agreed transition plans

Measurement:

Service users are confident that they have received the information and support they need to make their decision about joining the service.

Standard 5: Planned Introduction

The provider will ensure that the service user's experience is welcoming and supportive when joining day services.

- 5.1 During the agreed trial period, every opportunity will be given to the user to discuss their needs and requirements with named member of staff, and a written individual plan will be drawn up based on outcomes that reflect their aspirations, needs and choices.
- 5.2 The individual plan will also outline the views and needs of carers. If these views and needs conflict with those of the service user, the user's wishes will take precedence, wherever possible.
- 5.3 At the end of the trial period, a review meeting will be held to confirm attendance (or not), and finalise the individual plan.
- 5.4 Service users will have a copy of the written individual plan, signed by themselves (or their carer or appointee) and the relevant manager
- 5.5 The individual plan will clearly define the service to be provided to meet the assessed needs, including:
 - How the health and social care needs will be met
 - How intimate physical care will be provided, and by whom
 - How cultural and spiritual needs will be met
 - How social and community engagement needs will be met
 - Any specialist equipment needed
 - Any special communication needs
 - Who should be involved in care reviews
 - Arrangements for taking medication
 - Special dietary needs/preferences
 - An independent person or advocate to contact if the person wishes to make a complaint or raise a concern
 - How the person wishes to be addressed
 - Next of kin and emergency contact numbers
 - Risk assessment
 - Named keyworker
- 5.6 The outcomes of contract/agreement/care plan are reviewed every six months (or at any time if circumstances change), involving those people agreed by the service user to attend

Measurement:

Service user are satisfied that their experience of joining the service was well-planned and positive, and the agreed outcomes are being achieved.

Standard 6: Moving On

The provider will ensure that any move on from the service is a positive experience for the service user.

- 6.1 The need or wish to move on from the service will be regularly reviewed and agreed with the service user, from the outset.
- 6.2 Preparing for the move will be properly planned and discussed with the service user, their carers/family if appropriate, and/or their representative/advocate, and staff from the new service, if applicable.

- 6.3 A transition plan will be agreed which will include arrangements for visiting the new service, and a copy provided for the service user and their carer, if appropriate.
- 6.4 The transition plan will ensure that arrangements can be made for the service user to maintain friendships after their move, where practicable.
- 6.5 The service user's records for the new service will be updated, agreed with the service user and passed to the new service if appropriate and agreed by the service user.
- 6.6 If the service user is asked to leave the service because it can no longer meet assessed needs or because of unacceptable behaviour, as per the Exclusion Policy, their right to complain or appeal the decision must be fully explained and supported.

Measurement:

Service users are confident that their move on from the service, for whatever reason, is a positive and supported experience

PERSON-CENTRED SERVICE DELIVERY**Standard 7: Choice**

The provider will ensure that service users have control of decisions about their life and the services they receive, and have access to resources to help carry out their decisions, to meet the outcomes agreed in their individual plan.

- 7.1 Service users will have access to trained, independent advocates, in line with the appropriate advocacy guidance.
- 7.2 Service users will be enabled to understand all the information and the implications of choices.
- 7.3 Service users will have control over reviews and other meetings about their welfare.
- 7.4 Service users will be able to choose the activities they would like to be involved in, with support if needed.
- 7.5 Service users will have time to consider choices without undue pressure.
- 7.6 Service users should be able to move freely around the premises, provided arrangements for their safety are in place.
- 7.7 If a service user is unable to take part in any activity, the reasons for this will be fully discussed with them.
- 7.8 Service users should be offered the choice of same gender personal care, wherever possible. Where not possible, this must be fully explained and discussed at the introductory meeting, and recorded on the individual plan.

Measurement

Service users are confident that they are fully supported to exercise control over their lives in all aspects of the day service

Standard 8: Respect & Dignity

The provider will ensure that service users are treated with dignity and respect at all times.

- 8.1 No service will exclude anyone on the grounds of race, religion, ethnicity or sexual orientation.

- 8.2 Service users will be treated with due respect to their race, culture, religion, disability, age, gender and sexual preference, and will not experience any form of discrimination.
- 8.3 Service users will be called by their preferred name or title at all times.
- 8.4 Service users will be treated politely at all times.
- 8.5 Service users will have their rights and responsibilities within the service explained to them in a way that they understand.
- 8.6 Service users will be helped with intimate physical care and treatment, sensitively, discreetly and in a way that maintains their dignity.
- 8.7 Service users will have the right to same gender intimate physical care. Any non-compliance with this must be discussed and agreed with the service users and recorded in the individual plan.
- 8.8 Service users will be made aware of their responsibility to treat others with respect and dignity.

Measurement

Service users are confident that they are treated with dignity and that their individuality is respected in all aspects of the day service.

Standard 9: Privacy

The provider will ensure that all appropriate measures are taken to maintain service users' privacy, in line with the Data Protection Act, Freedom of Information Act, the Mental Capacity Bill, and the organisation's confidentiality policy.

- 9.1 Service users will be made aware of the need to hold records of their individual information, and the appropriate processes for accessing them.
- 9.2 Service users will be able to see for themselves that records are kept confidential and secure, and access to them will only be permitted in controlled circumstances.
- 9.3 Permission will be needed from service users to share confidential information about them, unless existing legislation or guidance states otherwise.
- 9.4 Service users will have the right to receive a copy of any information held about them in the provider's files, provided that this does not breach third party or legislative guidelines.
- 9.5 Service users will be able to discuss their needs in confidence and privacy with a member of staff if they wish to.
- 9.6 Service users can be confident that staff will not speak publicly about them unless it has been agreed with the user beforehand.
- 9.7 Discussions about a service user's personal care and other sensitive matters must be held in private.

Measurement

Service users are confident that their right to privacy is respected and maintained in all aspects of the day service

Standard 10: Safety & Risk

The provider will recognise service users' right to take risks in order to extend opportunities, and will ensure that service users are able to choose the risks they want to take and be given support to understand the full implications of their choices, in line with the Mental Capacity Bill.

- 10.1 The provider will meet their duty of care by ensuring that the services are safe and working practices minimise risk, including off-site activities.
- 10.2 Service users will be fully involved in formal risk assessments for everyday day services activities, carried out by trained staff, offering a balance between individual needs and preferences and the needs of other users and staff.
- 10.3 Service users will be given a copy of their risk assessment report.
- 10.4 Service users will receive guidance and support to use the service and facilities safely.
- 10.5 Service users will be assisted in understanding the possible consequences for themselves and others of their choices, and be supported to take responsibility for their actions, and decisions recorded.
- 10.6 Every effort will be made to ensure that service users do not experience any form of bullying, harassment, or any other form of abuse.
- 10.7 Any concerns must be reported through the Safeguarding Vulnerable Adults (POVA) arrangements.
- 10.8 Staff will record and investigate any accidents or incidents (including any episodes of restraint), telling carers/family, if the service user wishes.
- 10.9 If service users' behaviour needs to be restrained, trained staff will use de-escalation methods, or if these are unsuccessful, minimum physical restraint, ensuring users are treated with dignity and respect.
- 10.10 Staff will not use restraint for their own or other people's safety unless law permits and even then restraint will not be used until and unless other interventions have failed.
- 10.11 There will be an appropriate level of staffing at all times to ensure safety
- 10.12 The service will have a whistle-blowing policy in place

Measurement

Service users feel safe at the day service, and they and their representative fully understand their rights and responsibilities in making choices as to the activities they undertake

Standard 11: Social and Occupational Needs

The provider will ensure that service users' social and occupational needs are identified and addressed.

- 11.1 Service users will be encouraged and supported to develop and maintain existing friendships and relationships and to develop, should they wish, new friendships and relationships in the day service.
- 11.2 Service users will be encouraged and supported to access social opportunities in the community.
- 11.3 Outings and events will be organised in a way that does not stigmatise those attending.
- 11.4 Service users will be supported to access advice on welfare benefits to ensure they are receiving their full entitlement.

Measurement

Service users are confident that the day service meets their social needs as defined in their individual plan.

Standard 12: Healthcare Needs

The provider will ensure that users' healthcare needs are addressed, where possible, and support is offered in accessing the full range of healthcare services as identified in their individual plan.

- 12.1 Providers will make every effort to ensure that, wherever possible, service users will not be excluded from a day service because of healthcare needs.
- 12.2 If they are not already registered, service users will be supported to register with a GP, dentist and optician.
- 12.3 Any community healthcare input received by service users such as physiotherapy, chiropody, dietary advice, hearing and vision clinics will continue during their attendance at the centre, in a way that respects their dignity and privacy.
- 12.4 Staff will discuss any concerns they may have about service users' health and well-being with the user before involving any other agency or carer/family member. If these concerns indicate any potential abuse of the service user then these must be reported through the Safeguarding Vulnerable Adults arrangements.
- 12.5 Staff will inform and encourage service users to access preventative healthcare such as screening, immunisation and regular check ups.
- 12.6 Service users will be encouraged to access advice and services to prevent falls and accidents, in line with the local Falls Strategy.
- 12.7 Staff will ensure that arrangements are in place for service users' to take any necessary medication in a way that respects their dignity and privacy and complies with the organisation's medication policy.
- 12.8 Staff will contact healthcare professionals on service users' behalf, if requested to do so.

Measurement

Service users are confident that their health and well-being are addressed by the day service as defined in their individual plan.

Standard 13: Religious/Cultural/Spiritual Needs

The provider will ensure that service users' cultural and spiritual needs, as identified in their individual plan, are respected.

- 13.1 Staff will be properly informed about the implications of cultural and religious beliefs or faiths.
- 13.2 Staff will support service users to take part in religious, cultural and spiritual activities, and to keep in touch with their faith communities.
- 13.3 Special arrangements will be made for dietary and personal care needs in keeping with religious/cultural beliefs and practices
- 13.4 Service users will be given the opportunity and support to keep in touch with their faith communities
- 13.5 The needs of users from black and minority ethnic communities will be understood and catered for

Measurement

Service users are confident that their religious, cultural and spiritual needs are respected and supported by the day service.

Standard 14: Communication Needs

The provider will ensure services, aids and equipment are available to assist service users' communication, as identified in their individual plan.

- 14.1 Service users' plans will contain a record of any communication needs, and these are regularly assessed and reviewed.
- 14.2 Service users will be supported to communicate at the speed and in the style they wish.
- 14.3 Service users will be supported to prepare for important events and have time to communicate their feelings, views and answers.
- 14.4 Service users will be supported to access and use specialist individual communication aids as prescribed.
- 14.5 Providers will ensure that where possible, appropriate general communication aids and equipment are available to service users.
- 14.6 Service users with communication needs will be supported by their named worker or a trained communication support worker including trained interpreters.
- 14.7 Service users will be able to ask family, friends or others to help staff in listening and understanding their views. When a service user wishes to discuss concerns about their current circumstances or future needs, an independent interpreter should be available, if required.
- 14.8 Staff should seek to use language and expressions that are readily understandable and appropriate to service users.

Measurement

Service users are confident that they are not marginalised in any aspect of the day service because of communication needs as defined in their individual plan.

Standard 15: Dietary Needs

The provider will ensure that a varied and nutritional range of meals (where provided), snacks and drinks are available, including any special dietary, cultural and religious requirements, and that these are well-prepared, properly cooked and well-presented.

- 15.1 Service users dietary requirements and preferences will be discussed and recorded in their plan.
- 15.2 Menus will reflect the preferences, cultural and medical needs of service users, promote healthy eating, and be regularly reviewed and varied.
- 15.3 Menus will be nutritionally balanced and in line with current knowledge and good practice.
- 15.4 All food and drink will be prepared and served in line with current food hygiene standards.
- 15.5 Service users will be offered assistance in monitoring intake of food and drink, if required.
- 15.6 Specialist crockery and cutlery will be available for service users who require them.
- 15.7 Staff assistance with eating and drinking will be offered discreetly in a manner that respects users' dignity.

Measurement

Service users are satisfied that the food and drink they receive are of a high standard and appropriate to their needs and preference as defined in their individual plan.

SERVICE USER INVOLVEMENT

Standard 16: Contributing to the running and development of service.

The provider will ensure that service users are given every opportunity to be involved in, and influence the running and development of the service.

- 16.1 Service users will be given the opportunity and appropriate support and training to take part in the day to day management of the service. This may include:
 - Daily running of the service, including transport
 - Recruiting and selecting staff
 - Choosing supplies and suppliers
 - Planning activities
 - Monitoring the quality of care
 - Developing plans for future services
- 16.2 Service users will be consulted about organised visits to the service by professionals, councillors or members of the public.
- 16.3 Service users will be consulted about any outings or events organised by the service
- 16.4 Service users will be supported to resolve any conflict arising with another service user or member of staff

Measurement

Service users are confident that they are fully involved in the organisation and development of the day service.

Standard 17: Views on Service

The provider will ensure that the views of service users are regularly sought, and that their views are taken into account in any service or policy development.

- 17.1 Service users will be fully informed and understand their right to compliment, make comment, or complain about the service, and will know how to use the formal Complaints Procedure and complaints to the Care Commission.
- 17.2 Service users will be able to freely discuss any concerns they have about the service they receive with their named worker or any member of the management team.
- 17.3 The views of service users' independent representatives, advocates or advocacy group, will be sought and taken into account in service or policy development.
- 17.4 Service users' concerns and complaints will be dealt with quickly and sympathetically, and feedback will be given as to the outcome of the concern or complaint.
- 17.5 Regular customer satisfaction surveys will be undertaken with the service users and the outcomes reported back to them.
- 17.6 If preferred, service users may give their views anonymously, and the implications of this should be clearly explained to them.

Measurement

Service users are confident that their concerns or complaints are taken seriously and acted upon, and that they can influence the development of the service.

Standard 18: Community Engagement

The provider will ensure that service users are given every opportunity to access community activities and services.

- 18.1 Service users will be encouraged to view the service as part of the local community, not separate to it.
- 18.2 Service users will be encouraged to foster and maintain friendships and networks within and outside of the day service.
- 18.3 Service users will be given every opportunity to access other community activities and services.
- 18.4 Service users will be encouraged and enabled to use public transport, as appropriate.
- 18.5 External agencies, groups and individuals will be sought to offer activities within the service, as service users wish.
- 18.6 Service users will be consulted about organised outings/events.
- 18.7 The Provider will ensure that there are processes established to consult with the wider community to identify current issues and future needs.
- 18.8 The Provider will liaise with other local services and groups to identify opportunities for joint working and development for the benefit of service users.

Measurement

Service users are confident that they are encouraged and supported to use other community facilities as they wish.

Standard 19: Transport

The provider will ensure that transport arrangements meet the needs and requirements of service users, as identified in their individual plan, and serve the purposes of the day service.

- 19.1 Service users will be encouraged and enabled to use public transport as appropriate.
- 19.2 Service transport will not stigmatise service users by the type of vehicle used or by vehicle signage.
- 19.3 Service transport will be reliable, punctual and flexible to meet service user's requirements and will avoid planned excessive journey times.
- 19.4 All service transport will fully comply with contractual requirements, be accessible and fit for purpose.
- 19.5 All service transport will be fitted with appropriate seat belts for every seat and, where necessary, wheelchair clamps.
- 19.6 All service transport will have adequate driver/escort arrangements, and drivers and escorts will be given training to respond appropriately to individual service user's support requirements, as identified in their individual plan.
- 19.7 All service transport staff should be regarded as part of the overall service staffing, and therefore, subject to the same standards of behaviour as outlined.

Standard 20: Record-keeping

The provider will ensure that the service has record-keeping policies and practice in place that protect the rights of service users and any third parties, in line with the Data Protection Act, Freedom of Information Act and any other relevant regulatory requirements.

- 20.1 Service users will be made aware of all policies and procedures relating to record-keeping, confidentiality and access to information.
- 20.2 Staff will adhere to these policies and procedures when recording and maintaining information on service users.
- 20.3 Written records should be kept to a minimum, providing information that is necessary for contact and the overall health and well-being of service users, with their agreement.
- 20.4 Written records should use appropriate and accessible language, and be regularly checked and updated.
- 20.5 Service users should be made aware of their right to access information held about them, and supported to do so if they wish.