



Plain English Summary of Home-Support Regulations

This is a plain English summary of the draft regulations (June 2022) for providers of Home Support Services outlining the main measures. For full details of the legal provisions please consult the draft regulations.

Introduction

A new law is being introduced which will require home support providers to get a license to operate from HIQA (the Health Information and Quality Authority). The new law is called the Health (Amendment) Licensing of Professional Home Support Providers Bill. These regulations will go alongside the new law and set out the minimum requirements needed to get a license. They apply to home support services provided by public, private and not-for-profit companies and organisations to people aged 18 years or older. These services have not been regulated before now.

Home support covers assistance with a wide range of activities that can help a person live at home if they are ill, frail or disabled. This can include help with washing, dressing, getting around, social activities and essential household tasks.

People working in home support are sometimes called home helps, carers, personal assistants and community-based healthcare support assistants. In the regulations they are called home-support workers.

Service providers who provide home support will have to meet the minimum requirements set out in these regulations to get a license. It will be an offence to operate without a license.

The regulations **do not** apply to:

- Home support services for people aged under 18;
- Support provided by family or friends;



- Unpaid services;
- A direct employment relationship between an individual home support worker and one service-user;
- Services provided exclusively by registered healthcare professionals (e.g. nurses).

A guidance document will also be published to help home support providers with the licensing process. and they should also consult HIQA's National Standards.

Definitions

This section provides legal definitions of important terms used in the regulations, including:

Home-support is personal care and practical assistance with a wide range of activities that can help a person live at home if they are ill, frail or disabled. This can include:

- Physical assistance with mobility, dressing, washing and meals;
- Making sure someone remembers to take their medicine properly;
- Help with day-to-day activities such as cooking, shopping, housework;
- Exercise and social activities inside and outside the home;
- Emotional support and encouragement; and
- Personal assistance.

Home refers to a permanent private dwelling, but does not include nursing homes.

Service-user is an adult aged 18 or over who uses home support services.

Specified person is someone who may get and give information and attend meetings on behalf of the service-user. They can be a family member.

Supporting person is someone who is legally authorised to communicate or (help) make decisions on a service-user's behalf.



The full list of legal definitions is provided on pages 4-6 of the regulations document.

Main sections

The Regulations cover four main areas: service-delivery; staffing; corporate governance and corporate oversight. These are explained in more detail below.

Service-delivery. Sections 3 to 10

This covers the basic rules for how home-support providers should operate.

This includes

3. Statement of Purpose. Home-support providers must have a clear written statement of purpose listing the type of services they offer and the target service-users. They must review this every year and get approval for any changes from HIQA. They must make it easily available on their website, electronically and by hard copy.

4. Principles of Service-Delivery. Home-support providers must publish a charter that states the quality of service and person-centred behaviours service-users can expect. This must reflect HIQA quality standards.

5. Contract between Service-User and Service Provider. Before entering a contract, the service provider must give the service-user their statement of purpose and charter of service delivery and ensure that the service-user's needs are assessed. The written contract must include:

- contact details for the service outside office hours;
- the number of hours of home support;
- arrangements for key holding and type of service delivered;
- the circumstances in which service may be ended or suspended;
- responsibilities for health and safety, insurance and damages;
- arrangements for reviewing the service-user's personal support plan;



- the complaints procedure;
- holiday and sickness arrangements; and
- fees for the service and details of what happens if these are not paid.

The service-user and the service provider should both sign and hold copies of the contract. The service can only be cancelled at short notice if it is no longer needed, or if there is a significant health and safety risk to the service-user or the worker. The service provider must inform the service-user about this.

The service provider must give 3 months' notice to the service-user if they want to cancel the service or increase the fee. The HSE must also be informed if it commissioned the service.

6. Needs Assessment and Personal Support Plan. Home support providers must make sure that the needs of the service-user have been assessed by a health professional. They must draw up a personal support plan explaining in detail what services they will provide after talking to the service-user or a representative about their wishes. They must have a policy explaining how a needs assessment and personal support plan are carried out.

- Times of attendance should be agreed with the service-user.
- Home support workers must complete and sign a record of service at the end of every period worked, including any change from the plan.
- The service provider must make sure that the personal support plan is reviewed at least once a year or more frequently if individual needs change.
- A copy of the plan should be kept at the service-user's home and be accessible to the home support worker and health professionals involved in care.



7. Management of records.

Home support providers should keep records of changes to the service-user's home support needs, as well as details of any specified person or supporting person, and their public health nurse and GP. The records should be good enough to allow another service provider give effective care. The service provider must also keep written or electronic records of all home-support visits, and any accident or injury to the service-user or worker during a visit.

The service-user must be given access to their own records and the worker must be able to access them. If the records cannot be stored in the home, other arrangements should be made for updating them. After the home support service finishes, the records should be transferred to the service provider's custody. Details of what records must be kept are set out in Schedule 4 of the regulations.

8. Service Provision. Home support workers should visit a service-user's home at the agreed times as far as possible, and any changes should be agreed and recorded in the personal support plan. Service providers should try to ensure the same worker visits a service-user and have a policy about when a different home-support worker may visit, with advance warning to the service-user if possible. They should have plans for what happens if a worker does not attend.

9. Medication Management Support. Home support providers must have a clear written policy on how they will assist service-users with medicines. This includes:

- procedures for getting prescriptions and medicines;



- procedures for handling medicines such as taking tablets out of packets;
- procedures for reminding and checking that service-users take medicines properly and reporting of errors or near-misses; and
- safe handling and storage of medicines.

Home support workers must be given training in safe medicine management. Details of a service-user's needs for medicine support should be included in their personal plan and they or their supporting person must give signed consent. The worker must raise any concerns about how medicine is being managed and the service provider must check the policy is followed.

10. Safeguarding and Protection of the Service-User. Home support providers must have policies and procedures for keeping service-users safe and secure during visits, including:

- management of home entry, keys and emergency plan;
- use of identity cards and any other means of identification needed;
- procedures to identify where service-users are at risk of abuse;
- a safeguarding policy for home-support workers and appropriate training;
- the service-user must be given contact details for advocacy and support services;
- the service provider must have a procedure for reporting abuse concerns to the relevant authorities; and
- the service provider may **not** be named to benefit from the service-user's pension or other sources of finance.

Staffing. Sections 11 to 13

This covers staffing requirements including how staff are recruited, trained and supervised, as well as main terms and conditions of employment.



11. Staffing. Service providers must have enough qualified home-support workers to meet the needs of service-users. They must ensure that accurate records are kept of visits to service-users' homes. They may **not** assign a worker to provide paid care to a member of their immediate family. All workers must:

- be able to communicate effectively with the service-user;
- have Garda vetting and international police clearance (if needed);
- be given a tamper-proof identify card with their photo on it. This should be renewed at least every 24 months and returned when an employee leaves.

12. Qualifications, Training and Development: The service provider must ensure home support workers are competent, skilled, experienced and qualified enough to carry out their duties and meet the needs of each service-user.

- Home support workers must have completed two QQI Level 5 core educational modules (or higher qualification) in health and social care. (QQI is the Irish system for recognising educational qualifications, see www.qqi.ie).
- Home support workers must have completed at least a full QQI Level 5 qualification in health and social care within 3 years of starting employment. Those employed on or before 1st January 2022 have 5 years to get this qualification.
- Each worker must get suitable induction training outlined in Schedule 3. New workers must get at least 20 hours training including at least 5 hours of practical training.
- Workers caring for service-users with dementia must have completed a recognised education programme in dementia care.



- The service provider must keep an up-to-date record of the qualifications and training of all staff.

13. Supervision of Staff. Home support workers must get the supervision and mentoring they need to carry out their duties properly. Inexperienced workers must be supervised and shadowed for at least the first 20 hours with service-users before working alone.

Corporate governance: Sections 14 to 16

This covers requirements for clear management and annual reporting. It includes:

14. Management of the Service. The service provider must have systems in place to make sure it complies with the regulations. It must:

- monitor the quality of the home support service provided;
- assess and reduce risks to service-users and others during home-support;
- keep accurate up-to-date records of the service to each service-user as well as of staff and management;
- seek feedback from service-users and others to improve the service;
- have clear management structures to show who's responsible for what. Managers must be skilled and experienced enough to do their jobs;
- give the service-user contact details of the manager responsible for their home-support worker; and
- display all required certificates and licences on its website and have suitable insurance cover in place.



15. Reporting data to Regulator. The service provider must produce an annual report no later than March 1st each year. This must include details for the previous year of staff numbers and grades, recruitment and turnover; number of service-users and hours of home support provided; service-user feedback; complaints received and the status of these.

16. Financial procedures. Service providers must provide written itemised invoices and receipts of fees and keep records of amounts paid. Fees shall not be increased more than once in any 12-month period. The service provider must give the service-user (or representative) 3 months written notice of any fee changes.

Corporate oversight. Sections 17 to 21

This covers policies and procedures home-support providers must have in place.

17. Policies and Procedures. Service providers must publish written policies and procedures listed in Schedule 2 of the regulations. These must be dated, monitored and reviewed at least every 3 years, and updated as necessary.

18. Complaints Procedure. The service provider must give the service-user a written or electronic document explaining how to make a complaint. If required, the service provider must help a service-user make a complaint, including providing access to interpretation or communication assistance. They must also consider matters raised by a service-user's specified or supporting person, family member, GP (or similar) or organisation providing support to them. The service provider must:

- investigate every complaint and correct any failure it finds;



- keep a record of the complaint and investigation;
- complaints about a risk to the health or safety of the service-user must be reported immediately to the appropriate authorities.
- complaints must be analysed to learn how the service can be improved.

19. Infection Prevention and Control. The service provider must have an effective infection prevention and control policy. Each worker must be trained in procedures such as hand hygiene and safe use of personal protective equipment (PPE). The provider must have adequate supplies of PPE, and a plan for managing its service during an outbreak of infection.

20. Health and Safety. Each home support worker must have appropriate training in moving and handling, first aid, falls prevention, food safety, safeguarding and fire safety. The service provider must record any incident that occurs during service delivery and notify the appropriate authorities within 3 working days.

The service provider must carry out a risk assessment of the service-user's home before the first home-support visit. If home-support is urgent, this must be done within 7 days of the first visit. The service provider must keep a record of this. They must also have a system for giving staff urgent messages and safety alerts.

21. Governance Management and Quality Assurance. The service provider must have systems in place to maintain and improve the quality of service. They must:

- keep a record of all efforts to improve quality and provide annual details of these to service-users, HIQA and on their website;



- have a process to get feedback from service-users within 3 months of starting a service and at least once a year after that;
- have risk management policies in place; and
- have a plan for maintaining essential services in an emergency.

Schedules

Schedules 1 to 6 contain further details about the policies, documents, records and training home-support providers must have, and about the roles of a ‘supporting person’ and a ‘specified person’ in interactions between the service-provider and the service-user.

Schedule 1. This contains details about what should be in the Statement of Purpose.

Schedule 2. This lists policies and procedures the home-support provider should have.

Schedule 3. This gives details of what should be covered in Induction Training for home-support workers. Training should be tailored to meet the needs of individual service-users.

Schedule 4. This lists the records about staff and complaints that must be kept and made available for inspection.

Schedule 5. This explains the role of a ‘supporting person’ who is legally authorised to communicate or (help) make decisions on behalf of the service-user.

Schedule 6. This explains the role of a ‘specified person’ who can be nominated by the service-user to get and give information and attend meetings with the service provider. This person may be a family member.



This Plain English Summary was written by the Department of Health with the assistance of the Institute of Public Health (IPH).



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