

Admission Policy - Responsive Care Providers

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0.1	March 2006	Care Planning in Care Homes and Day Centres for Older People	
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0.6	May 2014	Reformatted document, amended title to Care Planning in care homes and created separate documents for other Provider Services. Substantial updates following consultation with Service Manager Adult Social Care Provider Services, care home Unit Managers and Service Improvement Team Updates to ownership to reflect current service structure	
0.7	October 2018	Amended title to <i>Admission Policy Responsive Care Providers</i> . Updates to ownership to reflect current service structure. Substantial updates to reflect current protocols and practice. Care planning process removed to a separate procedure	CKell
1.8	September 2021	Amended process due to Covid-19 and changes to admission in care homes to include assessment by Admission and Engagement Manager.	SR



Related Documents

Reference	Title	Tier
	Whistleblowing Policy and Procedure	
	Person Centred Care and Support Planning Policy V 1.2 January 2021	
	Deprivation of Liberty Safeguards application and authorisation protocols	
	Berkshire Safeguarding Adults policies and procedures	
	NHS South of England Unified DNACPR Adult Policy	

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1. Purpose

- 1.1. This policy and procedure is to support West Berkshire Council Officers, operating in Responsive Care Providers Services, to make decisions about admission. That might be admission to day opportunity provision or a residential/nursing placement in one of the care homes.

2. Applicability

- 2.1. All care homes and resource centres.

3. Roles and Responsibilities

- 3.1. The **Service Manager Responsive Care Providers** is responsible for reviewing and updating the procedures within timescales and ensuring that an up to date version of the procedure is available for all staff within Responsive Care Providers.
- 3.2. The **Senior Leadership Team** led by the **Admission and Engagement Manager** are responsible for ensuring procedures of admission are properly complied with and that staff meet their responsibilities. That decisions of admission are made in a fair and equitable manner and consistent with the criteria for each service.
- 3.3. They are also responsible for ensuring that staff are adequately apprised of this policy and procedure.
- 3.4. They are also responsible for ensuring that all aspects of admission meet the requirements of the Care Quality Commission (CQC). This will apply irrespective of the services regulatory status.
- 3.5. **Care Managers** are responsible for providing the care homes with all relevant documentation including care assessments, review assessments and advanced decisions.

4. Standards and Principles

- 4.1. All admissions must comply with the minimum requirements of the CQC 'Essential standards of quality and safety'¹ to ensure compliance with section 9 regulations of the Health and Social Care Act 2008.

General standards / principles

- 4.2. Each service has a set of criteria which influence all admission decisions. Those criteria can be provided on request and alongside the Statement of Purpose for Responsive Care Providers, gives clarity about the services offered and for whom those services are suitable.

¹ https://www.cqc.org.uk/sites/default/files/documents/quick_guide_to_the_essential_standards.doc

- 4.3. All service users wishing to access a Responsive Care Provider service should have an assessment of need provided by the Social Worker / Occupational Therapist or Care Manager before a service can commence. Without this assessment, which may be the case for those who wish to fund a placement privately, a service cannot be started without consultation and agreement with the Registered/Unit Manager.
- 4.4. An assessment of capacity under the Mental Capacity Act 2005² where appropriate should also be completed by the Social Worker / Occupational Therapist or Care Manager and included.
- 4.5. If any of the above documents have not been provided, the service should request the documentation from the Care Manager. Alternatively the Senior Leadership Team can access the information from the electronic system Care Director. (All coordinators, Senior and Duty Staff have the ability to access Care Director.) For those who self-fund and may not be known to Adult Social Care, a discussion should take place with care management in the first instance.
- 4.6. The Senior Leadership Team should carry out a visit in the person's own home, hospital etc. in order to assess whether the service can meet the needs of the service user before there is an agreement that the care home will admit the individual or the Resource Centre can provide a service. At assessment, consent for potential placements will be sought. Where feasible, the service user or their relative should be signing to agree the provision of service.
- 4.7. The relevant Senior Leadership Team must ensure, at all times, that current legislation and West Berkshire Council policies and procedures are followed e.g. equal opportunities, diversity, data protection, health and safety etc.
- 4.8. In most cases a trial period will be arranged. This will enable the service user, their family and the service to decide if the setting can properly meet presenting need. This will be discussed in more detail at the point of assessment and placement offer.

5. Mental Capacity Act 2005

- 5.1. The 'Mental Capacity Act Procedures' describe the processes in place within West Berkshire Council for assessing the capacity of, and supporting service users to make relevant decisions and must be followed. These procedures can be found on the intranet; Social Care Online Policy System (SCOPS)
- 5.2. Capacity forms a substantive part of the admission process and must be established for each decision.
- 5.3. The principles of the Act must be followed in any assessment of or decision about a service user's capacity.
- 5.4. Staff are required to complete relevant mental capacity act training to support them in fulfilling this aspect of their role.

² <http://www.legislation.gov.uk/ukpga/2005/9/contents>

- 5.5. Where a service user is unable to express their views / decisions due to sensory loss or cognitive impairment for example, or has been assessed as lacking capacity; the person undertaking the admissions assessment should ensure an appropriate advocate (normally a family member or a professional advocate) is part of the process.

6. Deprivation of Liberty Safeguards (DoLS) – residential/nursing homes only

- 6.1. If it is anticipated that any admission to a care home will give rise to a potential deprivation of liberty, 'The Deprivation of Liberty Safeguards (DoLS) Inter-Agency Policy and Procedures'³ must be followed and an application submitted at the earliest opportunity.
- 6.2. Where staff have concerns that an existing service user may be being deprived of their liberty these must be raised with the Senior Leadership Team and Service Manager Adult Social Care Provider Services in their absence, without delay.

7. Consent to Care

- 7.1. Outcome 2 of the CQC Guidance: 'Essential standards of quality and safety' requires care homes to have suitable arrangements in place for obtaining and acting in accordance with the consent of service users in relation to the care and treatment provided for them.
- 7.2. Assessment for admission should include a discussion around consent and that consent for the proposed care and/or treatment is obtained. Consent should be documented as part of the admission process.
- 7.3. Consent should not be assumed. Staff should always check with service users that they are happy about the care before providing it.
- 7.4. In care homes, the use of the booklet 'All About Me' is the main source of finding out about service users' likes and dislikes, lifestyle choices etc. and gaining consent. Information gathered from the booklet should inform the care plan and will commence post assessment but sometimes pre admission.

8. Advance Decisions and Advance Statements

- 8.1. The wishes of a service user regarding resuscitation should be made in a written advance decision and the care home will not accept these instructions in any other format. This may also include a Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) lilac form / RESPECT form. It should be possible to obtain this during the admission process.
- 8.2. The existence of an advanced decision can also be recorded in the 'pre-admission' booklet used in the care homes.
- 8.3. All services will take into account any wishes included in an advance statement when drawing up the care plan in accordance with the definition above.

³ [The Deprivation of Liberty Safeguards \(DoLS\) Inter-Agency Policy and Procedures](#)

8.4. Further information on this topic can be found on the Age UK website where a factsheet can be downloaded⁴.

9. Pre-admission Information

9.1. All people accessing services, including care homes, will be provided with an Information Pack that includes some or all of the following, dependent upon the service being accessed:

- Service User Guide
- Information to Residents
- 'All About Me'
- Terms and Conditions
- Charging information
- Comments and Complaints Leaflet
- Safeguarding leaflet
- Information about attending hospital
- Care plan paperwork
- Various forms
- Covid-19 testing
- Covid-19 vaccination status

10. All About Me - residential/nursing homes

10.1. A booklet entitled 'All About Me' will be given to all service users and carers / families of people who have been formally offered and accepted a place in a care home. Where the service user has no family/significant people, the key worker will be asked to spend time with the resident completing the booklet as best as they can

10.2. The purpose of the booklet is to provide information about the service user's likes, dislikes, wishes, preferences, life history and wishes regarding 'end of life' care. In general terms the booklet covers areas that would be included in an advance statement.

10.3. The booklet will be completed by the service user / carer / family as part of the admission process and will help staff when completing the care plan and assisting the new service user to settle into their new home.

10.4. The information provided in 'All About Me' will then be transferred into the care plan during the development of the plan in the first six weeks.

11. Nutritional Screening

11.1. For any admission to a residential/nursing home an assessment of an individual's nutritional status will be made. This assessment will be completed utilising the MUST – Malnutrition Universal Screening Tool.

11.2. A MUST score gives a snapshot of a person's nutritional status and may be repeated routinely if required and particularly where there are concerns about a person's weight and nutritional intake.

⁴ <https://www.ageuk.org.uk/information-advice/money-legal/legal-issues/advance-decisions/>

12. Procedures – Residential/Nursing admissions

Trial Period – six weeks

- 12.1. The first six weeks of moving into a care home are treated as a trial period, and provides an opportunity for the person to settle in and for discussions to take place with staff and other people to determine whether the care provided is meeting their needs and whether the service is able to meet their needs.

The day of admission and the first six weeks after admission

- 12.2. The Senior Leadership Team will appoint a “named person” (not necessarily the keyworker) to meet with the service user on their first day and help them to settle in. The named person will assist the service user to settle into their new home by:
- Giving information specific to the home.
 - Showing the service user around the home, introducing them to other service users and staff.
 - Explaining basic home safety, fire alarms, exits, evacuation procedures and what to do if the alarm bell rings, and how to use the call system.
- 12.3. The assessment and support plan provided by the Care Manager will provide basic information about the service user that will be incorporated into the care plan.
- 12.4. Within the first few days of admission (before the end of week one) the named person will arrange to spend time with the service user to discuss and explain how care is planned and managed within the service.
- 12.5. The named person will liaise with the key worker (if they are different) and others as appropriate to form a picture of the service user and their needs which will help to form the care plan. This should include going through ‘All About Me’ pre-admission booklet that will provide valuable information about the service user’s chosen lifestyle.
- 12.6. The named person will ensure that the catering and housekeeping staff (as appropriate) meet with the service user to discuss domestic arrangements that will be included in the relevant section of the care plan.
- 12.7. During the first six weeks the care plan will be developed with the service user and must be regularly reviewed and updated to ensure that the needs of the service user are being met. **A fully completed care plan must be in place within the six week period.**

13. Reviews

Six week review of the placement

- 13.1. It is the responsibility of the admitting Care Manager to arrange a review of the trial period. The purpose of the review is to gain the views of the service user, staff, family and other relevant people as to the appropriateness of the placement.
- 13.2. Where the Registered/Unit Manager has concerns about the appropriateness of the placement, these should be raised with the Care Manager / Team Manager at an early stage. A range of alternative options should be discussed rather than waiting for the six week review to raise concerns.

13.3. The Care Manager is responsible for writing up the review and circulating it, along with a revised support plan, to all attendees.

Monthly reviews

13.4. All service users' residing within a care home or in a full residential placement with APSL must have their care plans formally reviewed on a monthly basis to ensure that they are up to date, hold relevant information and are fully completed.

13.5. It should be noted that every quarter, all care plans within the care home must be reviewed by the Senior Leadership Team.

13.6. Those reviews may be less frequent within other services but should be reviewed at least 6 times per year. Need may dictate an earlier review.

Annual reviews

13.14 The annual review would normally be carried out by a Care Manager as this is a review of the placement to ensure that there are no unresolved issues and that the placement is still appropriate.

14. Respite care

14.1. All West Berkshire Council care homes provide respite care for periods of one or two weeks normally.

14.2. Care Managers are required to provide the same information for respite service users as they would for a potential permanent service user and the same CQC regulations apply.

14.3. However, it is noted respite can be booked some way in advance and the care manager may not be aware of any changes in resident need in between the booking process and attendance. Senior Leadership Team must ensure they check either with the individual, the family, GP and/or any care provider about current presentation and need a week before respite is due to commence.

14.4. Wherever possible the care plan should be completed for respite service users in the same way as for permanent service users. However, it may not be possible to complete all sections of the care plan with the same level of detail within the limited time frame. For example – it would not be expected to develop the life history section.

14.5. Where service users are booked for repeat stays the care plan should be added to in the same way as it would be if the person was a permanent service user. In these cases families are also sent a questionnaire to complete before the service user's arrival for their respite stay.

14.6. The care plan should be checked at the commencement of each stay to ensure that the content is up to date and relevant – amending where appropriate.

15. Resource Centre procedures

- 15.1. The process is not dissimilar to the residential/nursing placements as described above.
- 15.2. All potential service users will have had an opportunity to have a trial day at the service before deciding whether to take a place at the service.
- 15.3. The Senior Leadership Team will appoint a “named person” (not necessarily the keyworker) to meet with the service user on their first day and help them to settle in. The named person will assist the service user to settle into the service by:
 - Giving information specific to the service.
 - Showing the service user around the home, introducing them to other service users and staff.
 - Explaining basic safety, fire alarms, exits, evacuation procedures and what to do if the alarm bell rings, and how to use the call system.
- 15.4. The assessment and support plan provided by the Care Manager will provide basic information about the service user that will be incorporated into the care plan.
- 15.5. Within the first few days of admission, timing will depend on how many days per week the service user attends, the named person will arrange to spend time with the service user to discuss and explain how care is planned and managed within the service.
- 15.6. The named person will liaise with the key worker (if they are different) and others as appropriate to form a picture of the service user and their needs which will help to inform the care plan.
- 15.7. During the first six weeks the care plan will be developed with the service user and must be regularly reviewed and updated to ensure that the needs of the service user are being met. **A fully completed care plan must be in place within the six week period.**
- 15.8. Reviews will be undertaken at 6 weeks and again at 12 months, or sooner if required. Care plans are to be reviewed at least 2 monthly. More frequently if need dictates.

16. Shared Lives procedures

- 16.1. Shared Lives have their own set of policies and procedures for admission to service. This is because they have both residential, day and respite opportunities which differ from the services identified above and require a different approach.

Appendix 1 - Admission Process for Resource Centres

ADMISSION PROCESS FOR RESOURCE CENTRES (Phoenix Resource Centre, Hungerford Resource Centre and Greenfield House Resource Centre)

Commissioned and Private Customers

Customers can access the resource centre if they are commissioned by West Berkshire Care Management teams or by another local authority or if they are privately funded.

Care Managers, Social Care Practitioners, families or carers must always contact the Resource Centre Manager – to check if a place is available/service is suitable before going to panel for funding.

A taster session will be offered free of charge for day service/transport – the potential Customer/Client will need confirm local arrangements for lunch.

Resource Centre Manager to identify/confirm if funding has been agreed or if the Care Manager, Social Care Practitioner has been to panel for funding.

Resource Centre Manager to check what funding is in place for services, and which parts of the service are commissioned and which are paid for privately (if any)

West Berkshire Council funded customers - once funding has been agreed the Care Manager or Social Care Practitioner will contact the Resource Centre Manager informing them that funding has been agreed. The Resource Centre Manager may arrange to visit the customer at home to carry out an assessment prior to the customer starting his or her day service, and this will depend on the individual's needs.

Other Local Authority funded customers - once funding has been agreed the CM will contact the Resource Centre Manager informing them that funding has been agreed. The Resource Centre Manager should confirm the payment procedure. The Resource Centre Manager may arrange to visit the customer at home to carry out an assessment prior to the customer starting his or her day service, and this will depend on the individual's needs.

Privately funded customers - family member makes contact with the Resource Centre Manager regarding the day service. The Resource Centre Manager should check if they have had any assessment by Social Services and confirm that they will be paying privately. The Resource Centre Manager may arrange to visit the customer at home to carry out an assessment prior to the customer starting his or her day service, and this will depend on the individual's needs.

Actions to be done prior to customer starting Day/Outreach Service

	Y	N	Comments	Date	Signature
Home Assessment					
Information about service given to customer/family – i.e. brochure					
Assessment of how to get the customer in and out of home					
Cancellation notice /who to contact at day services					
Activity/link worker identified					
All staff informed of customers health and mobility issues					
Gather information about any care agencies involved, or other services accessed					
Manager to assess mobility needs, identify what equipment should be brought in with the customer					
Link worker to set up Care Plan					
Transport team informed of customer details					
Transport risk assessment completed					
All About Me, vital information forms left for completion					

	Y	N	Comments	Date	Signature
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Explanation of community activities – and how to pay for them					
How to pay for meals/refreshments and cost.					
Core customer hours					
Transport arrangements					

Actions to be completed on first day of attendance

	Y	N	Comments	Date	Signature
Link worker/Manager to meet on arrival on first day.					
Customer introduced to link worker					
Customer introduced to other staff					
Activity room shown to Customer					
Complete vital information sheet					
Arrange to take a photo of the customer for the care plan					
All risk assessments completed					
Complete all other paperwork- see care plan format					

**Appendix 2 - Terms of Contract for customers/clients who have a service within
West Berkshire, commissioned or privately funded**



Phoenix Resource Centre, Hungerford Resource Centre, Greenfield House Resource
Centre

**WEST BERKSHIRE COUNCIL
COMMUNITY SERVICES, ADULT & SOCIAL CARE
Responsive Care Providers**

**Terms of Contract for customers/clients who have a
service within West Berkshire, commissioned or
privately funded.**

Day/Outreach service for Pan Disability Service,
Terminology- Learning Disability (LD), Physical Disability
(PD) and older people with Frailty and Dementia (F&D)

Terms of Service Agreement

This Agreement is made on the between West Berkshire Council and:

Insert Name of customer/client (DOB :.....)

The Day/Outreach Service will be provided in accordance with the Customer/Client Care Plan. The Day/Outreach Service will be provided at:

(Phoenix Resource Centre, Hungerford Resource Centre, Greenfield House Resource Centre, include relevant address of day service)

Your service at your Resource Centre will commence onunless agreed differently by the Care Manager and, until such times as either party terminates it in accordance with the Contract, will continue thereafter.

The daily cost for your day/outreach Service is per day. This will be payable either by you or your family whether you have a commissioned service or if you fund your service privately. Your Care Manager/Social Care Practitioner will organise a financial assessment for you. Following a financial assessment you may only need to pay a contribution to the cost of your care. Please note that meals are always charged at full cost and are not included in a funded package of care.

The Resource Centre agrees to provide to the Customer/Client a Day/Outreach Service during the continuance of this Agreement, as detailed in the Customer/Client Care Plan.

You or your family member/appointee should only sign this Agreement if you have read and understood it and agree to abide by its conditions. (Your service will not start if the agreement is not signed)

STATEMENT OF TERMS AND CONDITIONS

Customers/Clients who have a service in WBC Resource Centres

These Terms of Service refers to all Resource Centres owned and operated by West Berkshire Council as follows:

Greenfield House Resource Centre, High View, Calcot, Reading, Berkshire RG31 4XD
Hungerford Resource Centre, Ramsbury Drive, Hungerford, Berkshire RG17 0EE
Phoenix Resource Centre, Newtown Road, Newbury, Berkshire RG14 7EB

INTRODUCTION

This Agreement sets out the general terms and conditions for your day/outreach service at a West Berkshire Council Resource Centre or service offered to a customer/client in the community. This Agreement may, from time to time, be amended which may be necessary if circumstances change. You will normally be given 2 months' notice of any changes; although in exceptional circumstances a shorter period of notice may be given.

The terms and conditions are based on values that are designed to ensure your safety, and to safeguard and promote your health and wellbeing and quality of life. Our core values are Respectfulness, Inclusiveness, Compassion and Empowerment.

The Service provided by our Resource Centres aims to enhance your existing abilities, while ensuring that you have the right to respect, privacy, dignity, choices, and social interaction.

CANCELLATIONS

To cancel and leave the service, a month's notice is needed.

For scheduled appointments, holidays or any other planned absences two weeks' notice is needed. Your place will be held open for you for two weeks. Your place will be held open for a further 2 weeks i.e. for long term sickness, access to respite due to personal circumstances. After the 4 week period if you are unable to return to the day centre, your service will be cancelled.

If your circumstances change following cancellation of your day service and you wish to return to the centre, then you/your care manager will need to make a new referral for a day service.

Please note that if insufficient notice is given the day service charge will still apply.

For unplanned absences i.e. sudden illness or hospital admission please give as much notice as possible. All Resource Centres have answerphones. In these exceptional circumstances the Resource Centre Manager may apply discretion to the charge for services.

The service does not operate on public holidays or weekends

If we have to cancel your service we aim to give you as much notice as possible, and will inform you by letter of any planned closures.

In exceptional circumstances i.e. severe weather conditions, unable to access Resource Centre etc. we will contact you as soon as possible on the day and inform you or your representative of the closure.

Where we cancel the service you will not be charged.

BEHAVIOURS

If a customer/client continues to display behaviour that may put other customers/staff at risk and we have put all measures in place to manage or support the Customer/Client with this behaviour and after these measures have failed, the Resource Centre manager will seek funding for additional staff support i.e. 1:1 funded support, if this is not feasible and the client/customers continues to cause risk to others then the service will be withdrawn forthwith and all involved will be informed.

FEES PAYABLE, BY WHOM AND WHEN

You will be billed four weekly for your day/outreach service, this will be a month in arrears.

The daily cost for your day service is shown on the signature page and is the standard cost that is set out by West Berkshire Council, please note that there are different rates for West Berkshire Council customers/other local authority customers- see price list for cost variance. The financial assessment organised out by your Care Manager/Social Care Practitioner will state the cost of your service (s) and how much you will contribute to this cost. Please note you may be assessed as paying full cost for your services. Please note that meals are always charged at full cost in addition to your day service/transport cost.

The Council usually reviews its day/outreach service fees annually. Customers/clients are then notified of changes in the fees that come into effect on 1st April each year.

YOUR RIGHTS AND OBLIGATIONS

Customers/Clients that have a service at a Resource Centre run by the council will have the following rights and obligations:

Your Rights

To be involved in making decisions about your day service and individual care plan, a review of your service will be carried out 4 to 6 weeks following you starting your day service, after that you will then have an annual review which will be completed by your designated Care Manager/ Social Care Practitioner and the Resource Centre Manager.

Your Obligations

To accept that your Care Manager/Social Care Practitioner will arrange for a full assessment of your needs and a financial assessment that will determine the level of payment that you need to make towards the cost of your service.

To treat other customers/client and members of staff with respect, and not to cause anxiety or distress through discriminatory comments or offensive language.

Not to intentionally hurt or assault other Customers/Clients or members of staff.

If for any reason you do not comply with the terms of this Agreement then we have the right to terminate this Agreement. If we make this decision, after consultation with you or your relative/appointee, we will give you reasonable written notice that you will no longer be able to access your day service.

Signatures of customer/clients or his or her appointee:
Signature for West Berkshire Council Resource Centre Manager
Date
Print Name.....
Care Manager/Social Care Practitioner /Authorised Signatory
Date:
Print Name.....
Signature for Customer/Client or family
Date.....
Print Name.....