

<b>Subject:</b>	Transfer of Care from a Short Term Bed		
<b>Date of Meeting:</b>	22 <sup>nd</sup> October 2012		
<b>Report of:</b>	Director of Adult Social Services/Lead Commissioner Adult Social Services		
<b>Contact Officer:</b>	name:	Jane MacDonald	Tel: 29-5038
	email:	jane.macdonald@brighton-hove.gov.uk	
<b>Ward(s) affected:</b>	All		

### FOR GENERAL RELEASE

#### 1. SUMMARY AND POLICY CONTEXT:

1.1 Short term beds are funded by both the council and NHS. The Transfer of Care from a Short Term Bed policy seeks to give clarity to the situation when a person is in a short term bed that no longer meets their assessed need. It also seeks to make the process fair so all cases are resolved using the same principles that are captured in one policy. See Appendix One for The Transfer of Care from a Short Term Bed policy

1.2 There are significant occasions when people staying in short term beds stay longer than they need. The Transfer of Care from a Short Term bed policy aims to tighten up procedures to ensure people move through the service in a timely way. It is not intended that the policy is used for 'Active Transfer of Care (eviction)' except in rare and extreme cases. The policy is intended to ensure that everyone working in with short term bed services closely adhere to the same procedures that are applied consistently across all services.

#### 2. RECOMMENDATIONS:

2.1 That the Board agree to the Transfer of Care from a Short Term bed policy and the implementation thereof.

**(Note: The recommendation above was agreed by the Adult Care & Health Committee held on 24<sup>th</sup> September 2012).**

#### 3 RELEVANT BACKGROUND INFORMATION

3.1 With the growth of Community Short Term Service beds it is crucial that there is efficient use of these (expensive) beds to ensure that the risk of 'blocking' is minimised and people are facilitated to move out of hospital in a timely way. This policy can also be used for other short term beds in the city to ensure a consistency of approach. Well managed short term beds help militate against beds else where in the system becoming 'blocked.'

3.2 It is intended that the Transfer of Care from a Short Term bed policy links with other local policy and protocol. This includes the refresh of the BSUH Choice policy and documentation from Sussex Community NHS.

3.3 This Policy covers:  
Community Short Term beds  
Transitional Beds  
Respite beds  
Crisis beds

(Note: this list is not exhaustive and may change)

3.4 One of the key parts of the policy is guidance on how the process should be managed when a service user refuses to move. This may result in an active transfer care which is eviction from the short term service. It is expected that this occurs very infrequently. On the rare occasion it does occur, the policy will ensure that service user is moved according to their assessed needs. This could be to their own home with or without services or to a further service that can meet their assessed needs.

3.5 If a person needs a care home it is important to note that they may have much more choice regarding which care home they will live in, after they have moved out of a short term bed.

3.6 It is at this stage that they will be offered up to three longer stay placements that will meet their assessed need and they will be supported to move if that is their choice. This may mean the service user moves on to another residential placement in the short term, before a longer stay placement can be identified to meet their needs.

#### **4. COMMUNITY ENGAGEMENT AND CONSULTATION**

4.1 To date the draft policy has been shared with the Short Term Services working group (Commissioners in Health and Social Care and Providers) and the Transfers of Care working group which consist of both assessment and provider practitioners in Adult Social. Both the LINK steering group and the LINK research group have commented on the draft policy and it has been amended in light of the suggestions made.

#### **5. FINANCIAL & OTHER IMPLICATIONS:**

##### Financial Implications:

5.1 The implementation of the Transfer of Care from Short Term bed policy will support the achievement of Value for Money through Personalisation.

*Finance Officer Consulted:*

*Name Anne Silley*

*Date: 03/09/12*

##### Legal Implications:

5.2 It is essential that recipients of services from the Local Authority are treated on a fair and equitable basis; the Policy recommended in this Report seeks to achieve such equity, fairness and transparency across provision in the City. There are no additional or specific legal or Human Rights Act implications arising from this Report.

Equalities Implications:

5.3 An EIA has been completed.

Sustainability Implications:

5.4 There are no specific sustainability implications.

Crime & Disorder Implications:

5.5 There are no specific crime and disorder implications.

Risk and Opportunity Management Implications:

5.6 There is a small risk that a person refuses to move from a Short Term bed. This is mitigated by clear information that the bed is 'short term.' The policy states, *'The message that the service is time-limited must be reinforced and delivered consistently throughout a person's stay. All professionals have a responsibility for doing this, including the manager of the home, staff working directly with the service user, care managers and allied professionals. .... Information should also be given to them in writing. This must be signed within two days of arrival in a short term service. The care manager (or other professional) giving the information must record that the service user or their advocate has been given the information. They also have a responsibility to ensure that it has been understood, due regard must be taken with regard to capacity and language needs.'*

Public Health Implications:

5.7 The policy seeks to ensure that people move through Short Term beds in a timely way thus making them available for those who need them.

Corporate / Citywide Implications:

5.8 Priority on Corporate Plan - Tackling Inequality - This policy seeks to ensure that processes are fair so all cases are resolved using the same principle in one policy.

**6. EVALUATION OF ALTERNATIVE OPTION:**

6.1 There is the option not to introduce this policy. This would leave the status quo which could result in people not moving through the service in a timely way, beds may become 'blocked' and the service would not have capacity to manage those who need a bed.

**7. REASONS FOR REPORT RECOMMENDATIONS**

7.1 The main reason for the recommendation is a tightening of policy to ensure people move through short term bed in a timely way.

## **SUPPORTING DOCUMENTATION**

### **Appendix One**

#### **Transfer of Care from a Short Term Service bed**

##### **1. Scope**

- 1.1 The Transfer of Care from a Short Term Service bed policy intends to give clarity to situations where a person is in a short term service bed that no longer meets their 'assessed need'. Assessed need is what the Council has identified an individual as having and which the Council has a duty to meet with the provision of care and/or other services as they fall within the Council's Fair Access to Care eligibility criteria. Short term means up to a maximum of six weeks, but it is more usually about 21 days.
- 1.2 This policy gives guidance on how the process should be managed when a service user refuses to move. This may result in an active transfer care which is eviction from the short term service. The service user is then moved according to their assessed\* needs. This could be to their own home with or without services or to a further service that can meet their assessed needs.
- 1.3 This policy is only used as a last resort; professionals must work with service users in short term beds to enable them to move on in a timely manner.
- 1.4 This policy applies to all Brighton and Hove City Council short term beds, joint Health and Social Care Short Term beds and beds supplied on behalf of Brighton and Hove City Council or jointly by Brighton and Hove Health and Social Care.
- 1.5 This includes:
  - Community Short Term beds
  - Transitional Beds
  - Respite beds
  - Crisis beds
  - (Note: this list is not exhaustive and may change)

##### **2. Principles of good practice**

- 2.1 Professionals must treat everyone as an individual and in a person centred way. Assisting and supporting a person move through the Short Term Service bed must be firmly but sensitively managed. Professionals must be mindful that a person's needs might change throughout the process. It may be a period of change for a person that can be stressful for them, their family and friends.

### 3. Key legislation and local policy

Key National Legislation	Local Guidelines
LAC (DH)(2009)1: Transforming Adult Social Care	Process for Escalation of Sussex Community Trust (Brighton and Hove) Delayed Transfers of Care awaiting Social Care Support 2011
Mental Capacity Act 2005 Deprivation of Liberty Safeguards	Choice on Transfer of Care Policy TCP 212 BSUH
The Community Care (Delayed Discharges etc.) Act 2003	Sussex Multi-Agency Policy & Procedures for Safeguarding Adults at Risk
The Care Standards Act 2000	FACS (Fair Access to Care)
	Brighton and Hove City Council Escalation Policy 2012

### 4. Admission

- 4.1 The professional referring the person to a short term bed must make the service user aware that it is short term service. It must be recorded that the service user has had this information and that it has been understood.
- 4.2 Information should also be given to them in writing (see Important Information for short Term Service users – Appendix One). This must be signed within two days of arrival in a short term service. The care manager (or other professional) giving the information must record that the service user or their advocate has been given the information. They also have a responsibility to ensure that it has been understood, due regard must be taken with regard to capacity and language needs.

### 5. Giving messages and recording

- 5.1 The message that the service is time-limited must be reinforced and delivered consistently throughout a person's stay. All professionals have a responsibility for doing this, including the manager of the home, staff working directly with the service user, care managers and allied professionals.
- 5.2 Everyone coming into a short term bed must have an introductory meeting with their care manager or allied professional and a representative of the home. This is the opportunity to explain the aims and objectives of the placement and to reiterate and record that the service user is aware that the placement is short term.
- 5.3 The length of time someone stays in a short term service bed is dependent on his or her individual need. They should be given an idea of the expected move on date within the first two days of their stay. This should be reviewed at least weekly. These meetings should be attended by those involved in the transfer of care planning and recorded.
- 5.4 If a person no longer needs short term service bed they must be moved on, either home with or without services or to a further service that can meet their assessed needs.

5.6 It is important that any issues that concern the service user's capacity are fully investigated and the service user and their family/friends supported. Mental health professionals must be involved as appropriate.

## **6. Usual procedure (including the Escalation Policy)**

6.1 Every person in a short term service bed will have a Placement Planner. This document clearly defines the intended outcomes from the placement and sets out the sequence of tasks and activities to be completed to achieve these outcomes. Each task and activity has a named worker who has responsibility for completion and each has a timescale attached to it.

6.2 The Placement Planner must be completed within the first two days of admission. A discussion must take place between the care manager, senior care officer (or similar), care home manager and allied professionals about the outcomes expected for each person staying in a bed. The Placement Planner must be completed accordingly and shared with the service user.

6.3 The Escalation Policy is the set of procedures that govern a person's timely move through the services and specific when a situation must be 'escalated' to a more senior manager. It is the responsibility of the Residential Unit Manager (or delegated manager) to monitor the escalation process and ensure that people move through the service in a timely way. Where there are difficulties escalation discussions will take place between the Residential Unit Manager (or delegated manager) and Operation Manager (assessment). These will ensure that a person moves through the services in a timely way.

6.4 People whose care is funded by Brighton & Hove will be expected to move to somewhere that can meet their needs. This may be a person's own home with a care package or a care home. Privately funded service users can make their own decision regarding move on plans. No one will have the option to stay in a short term service bed when it no longer meets their assessed needs.

6.5 If a person in a Short term bed is thought to need an assessment for Continuing Health Care, this assessment must take place without delay. If the person is assessed as needing Continuing Health Care further decisions will be made on an individual basis.

## **7. Choice**

7.1 If the person is returning home, the assessment must identify the support that is required and this must be place prior to a person returning home

7.2 If a publically funded person is moving to a long-term care home the care provided must meet their assessed needs and choice must be considered wherever possible. The service user and their family or friends are encouraged to view a home, prior to moving there. This must happen in a timely way, it is expected that it is usually within two days. If this is not possible, then the manager of the home (or their delegate) should visit them. This is a statutory requirement of Care Standards Act 2000.

7.3 If after visiting the home or meeting the manager, the service user declines the offer of a placement, the reasons for doing so must be clear. Where possible, changes should be negotiated to make the service suitable.

- 7.4 It is important to note that the person may have more choices regarding the care home after they have moved out of a short term bed – see below
- 7.5 If a longer term care home placement is needed it will usually be a single room, in a registered home managed by an approved provider. This may not necessarily be a room within Brighton and Hove. If a shared room is acceptable, this should be noted in a person's assessment.
- 7.6 Once a person has moved they will be continue to be reviewed. It is at this stage that they will be offered up to three longer stay placements that will meet their assessed need and they will be supported to move if this is their choice.
- 7.7 In general, it is expected that the process of moving to a longer term service works relatively smoothly. Most issues can be resolved through the usual processes of good communication from all those involved. This must include the service user, their representatives, staff working in the service, the assessment team, allied professionals and related services.
- 7.8 If a person is returning home, a care package must be in place and if needed, and their home should be able to meet their needs. If a person insists on returning home before they are advised to do so, they must be made fully aware of the risks. Processes to manage these must be explored and recorded. The care manager is responsible for doing this.

## **8. Disputes**

- 8.1 Whenever a person is refusing to move out of a short term service bed that no longer meets their needs, the reasons for this must be given by the service user and if possible the situation should be resolved informally.
- 8.2 All professionals including registered managers and general managers must be kept informed of what action is being taken throughout the process. Legal advice must be sought as appropriate.
- 8.3 If there are protracted difficulties in resolving the move, the service user must be made aware that the service initially identified for them may be lost e.g. a longer stay place in a specific care home may be allocated to someone else.
- 8.4 The service user and their advocate must be informed that they may be charged the cost of the placement from the date when it no longer meets their needs. This cost will be determined on a case by case basis and agreed by Director Adult Social Services/Lead Commissioner for People Adult Social Care. This must be recorded.
- 8.5 Throughout any dispute, support must be provided for the person using the service. The use of an advocate must be considered and the service user must be made aware of the complaints procedure.

## **9. Model letters**

- 9.1 Each decision must be made on a case-by-case basis. Model letters are included as Appendix Two. These may need to be adapted to ensure that the person receiving them or their advocate understands them.

9.2 The decision to issue the first letter is with the Service Manager; Residential Services Adult Social Care (Provider) and it should have their signature. The decision to issue the second letter is with the Director of Adult Social Care and it should have their signature.

9.3 Letters must be written must be in a style that is accessible to the person involved. The care manager should normally issue the letter by hand and ensure that the person receiving it, and/or their advocate understands the content. This may involve reading the letter. It might also be helpful to send a copy of the letter to a family member or friend. All actions must be recorded.

## **10. Active transfer of care (eviction)**

10.1 The service user and their advocate must be aware that if the placement no longer meets their needs they will have to move. It will be made very clear to the service user that they will be expected to leave and they have no legal rights to remain

10.2 A risk assessment must be completed and it must be shared with the service user and signed. This will include details of support following the transfer.

10.3 Transport to move the service user will be arranged and assistance will be offered. The service user and their family/friends will be advised of the arrangements.

10.4 Any active transfer of care (eviction) must be handled very carefully and the service user involved must be well supported.

10.5 If the procedure has been followed and an active transfer of care is imminent and the service user refuses to comply with the arrangement, under no circumstances should it be affected by physical means. Legal advice must be sought.

10.6 Frontline staff also must be supported throughout the process. When there is an active transfer of care the service manager will be present at the care home.

## **11. Following an active transfer of care**

11.1 When a service user moves, the care management will be reallocated to the appropriate assessment team.

11.2 Following the dispute the service user will enter the reviewing system. They are likely to need support, and professionals working with them and their friends and family need to be aware and sensitive to this.

## **APPENDIX ONE**

### **Important Information for Short Term Service users**

#### **Welcome**

- Welcome to a short term bed. We hope you enjoy your stay with us and feel better when you move to another location which may be returning home or on to a care home. Short term means up to a maximum of six weeks, but it is more usually about 21 days
- Short term beds are in high demand and many are used to help people move out of hospital and make space for new arrivals.
- It is in your interest to move to a place that better suits your assessed needs\* when you are ready to do so, you will be helped to do this.
- All short term beds are short term – there is no option to stay long term in this bed.

#### **Choice**

- If you are looking for a long stay care home place and you receive public funding this is what happens:
  - When the short term service no longer meets your assessed needs you will have to move. It may be to your own home or a care home approved by the Council and one which meets your assessed needs.
  - If it is to a care home, every effort will be made to accommodate your choice. Once you have moved you will continue to be reviewed. It is at this stage you will be offered up to three longer stay placements that meet your assessed need. You are not obliged to look at all 3 care home places and they may not all be available immediately or at the same time.
  - If you do choose to move to another care home you will be supported to do so. For further information see the Council's Transfer of Care from a Short Term Service bed policy.

#### **Sign and keep a copy**

It is important that you understand this information. That is why we are asking you to sign this copy

Your name and/or friend/family member if needed (printed):

.....

Signature (s): .....

Date: .....

Person giving you this information: (please print name): .....

Please keep your copy in a safe place

\*Assessed need is what the Council has identified an individual as having and which the Council has a duty to meet with the provision of care and/or other services as they fall within the Council's Fair Access to Care eligibility criteria. It is your needs as assessed by Council care managers and other professionals as appropriate.

**APPENDIX TWO**

**Model letter one**

Date:  
Phone: (01273) 295030  
e-mail: **To be completed**@brighton-hove.gov.uk

[client name]  
[carefirst number]

Dear Mr/Mrs/Ms .....

Transfer of care from a Short Term Service bed

I understand that you have now been living in a short term bed at.....  
..... and you were assessed as ready to transfer  
on.....

You have seen and signed the Important Information for Short Term Service users and been kept up to date with your move on plans.

As you are aware this is a short term bed and you will have to move to make the bed available for others whose needs are greater.

The cost to you is £..... per week from .....

Arrangements have be made for you to move to  
.....  
.....

I understand that the date for you to move is .....

Yours sincerely,

Service Manager (Provider)  
Adult Social Care  
**Brighton & Hove City Council**

Service Manager  
(Assessment)  
Adult Social Care  
**Brighton & Hove City Council**

**Model letter two**

Date:  
Phone: (01273) 295030  
e-mail: **To be completed**@brighton-hove.gov.uk

[client name]  
[carefirst number]

Dear Mr/Mrs/Ms .....

Transfer of care from a Short Term Service bed

I understand that you have now been living in a short term bed at ..... for ....(number) weeks.

You have seen and signed the Important Information for Short Term Service users and been kept up to date with your move on plans.

As you are aware this is a short term bed and you will have to move to make the bed available for others whose needs are greater.

The cost to you is £..... per week from .....

Arrangements have be made for you to move to .....  
.....

I understand that the date for you to move is .....

Please do understand that you can not stay at .....

If the planed move does not take place we will have no option but to take further action under the Transfer of care from a Short Term Service bed

Yours sincerely,

Director Adult Social Services/Lead Commissioner for People  
Adult Social Care  
**Brighton & Hove City Council**