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Policy for admission to Restorative Care Care/Short Stay Care		

Title of Guideline: Policy Admission to Respite/Short Stay Care		
Description of the Policy: This Policy has been developed for the staff in The Village		
Residence.		
Ratification Details:		
Developed by: The Village Residence	Date Developed: Sept 2023	
Developed By: Nursing Department.	Date Approved: Awaiting Approval and	
	sign off	
Implementation Date: Octobe 2023	Review Date: Sep 2024 or sooner if	
	required in line with HPSC Guidelines.	
Policy Reference Number:	No. of Pages 8	
Status of the Policy: Final		

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It is the person in charge's responsibility to ensure the staffing levels and skills mix meet the dependency needs of people living within all households at all times in each of the five houses.

The person in charge will review staffing levels and skills mix regularly and change them as and when necessary to meet the assessed needs of residents within the centre along with the Clinical Nurse Manager in each of the households.

There is a registered nurse on duty twenty four hours per day. A nurse is allocated to a number of residents each day. This is referred to as the key worker system. Primary nursing is the main model of nursing provided, and individual nurses are responsible for the assessment, planning, implementation and evaluation of nursing care, and the formulation of a residents own care plan. In addition each nurse is supported by care assistant staff, home maker staff, hygiene staff, activities, recreational and occupational facilitators, grounds personnel and catering staff.

Each nurse on each change of shift is responsible to act as a key worker for a set number of residents. Nursing staff ensure there is an individualised resident care plan is in place for all residents, and is based on individualised assessed needs. This care plan is devised and reviewed in co-operation with relatives and the resident themselves.

The person in charge receives referrals for use of the centre for Respite Services from the Home Support Office for Louth applicants and from Meath Respite Services who are based in Beau ford House Navan for east Meath applicants. No admission to Respite can proceed unless there is an up to date prescription issued within the previous four weeks by a Medical Doctor. A pre admission assessment for residents requiring Respite Care is undertaken by the referral source using a Common Summary Assessment Record, Clinical Nurse Manager or Person In Charge will do a pre admission assessment (over the phone) using BASOLL pre admission assessment form and the Person in Charge and the Clinical Nurse Manager will make a decision on whether the needs of the resident can be met within the facility as currently exists.

Respite care is a key support service for people with dementia and their carers, and Carers express high levels of satisfaction with respite care. Respite can be defined as "Any formal

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service with the purpose of providing a break from the usual routine for the person with dementia and/or their carer". There are two aspects of this definition worth considering. One is a break from usual routine. Traditionally respite services were granted based on when the service had a bed. In addition beds have been granted for one to two weeks at a time. However this may not always be what the person with dementia requires, particularly being away from their own home for a week at a time. This can be very disorientating both on admission to a residential centre and also as has been reported by relatives can be very disorientating on the days post discharge.

The second aspect of this is that respite provides a break from the usual routine for the carer. The carer's life often becomes restricted and determined by the act of caring; they may reduce or give up employment, restrict time with friends and family and sacrifice their own pursuits and hobbies. Caring for a person with dementia is complex and demanding; whilst carers generally report a greater number of physical health problems and worse overall health, carers of people with dementia are also at increased risk of psychological ill health. Factors associated with increased carer burden are objective (relating to the tasks or activities of caring) and subjective (representing how the carer feels about their role). Increased risk of institutionalisation of the cared for person is also associated with a wide range of demographic factors, such as the relationship to the cared for person, and psychosocial factors such as problem behaviours in the person with dementia.

Informal carers are by in large mostly family members. Carers can include both men and women, and statistically there are as many men in caring roles as there are females. Caring duties by a family member or a neighbour can be 24 hours per day, seven days a week. Lack of a break from caring duties for a relative can have a detrimental effect on the carer, both physically and mentally. This change in routine could be having a place of safety for a day, a few days or even a drop in service as well as the traditional model of weekly/fortnightly Respite Services.

Restorative care benefits older people with dementia who want to live independently, healthily and safely at home, but where short stay care may assist in facilitating this. Restorative care has numerous benefits, including reducing caregiver burden, improving functional abilities of

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residents, alleviating pain, anxiety, and responsive behaviour, as well as increasing participation in physical activities. Restorative care also facilitates the assessment of the residents multidisciplinary care plan.

Application and Referral for Respite Services to The Village Residence.

Respite services and short stay services offer stimulation and activity to the person in a safe, friendly environment and an invaluable break to families and carers. This is a Louth and East Meath respite service and is open to older people with Dementia and nursing/social care needs living anywhere in the Louth/East Meath Catchment Area.

The centre provides respite on a weekly or two weekly periods or short stay care if required.

How to Access the Service

An application is being made to the Health Information and Quality Authority to provide sixty beds in total in a residential type setting for older people in the Village Residence and The Village St. Mary's. Thirty of these beds are specifically for those living with dementia. Fifty five beds can be used for extended care and the remainder can be used for respite/or short stay Care. The designated centre is all on the ground floor. It is made up of two buildings side by side – St Mary's (Meadowview and Sunnyside) and The Village Residence (Butterfly Cottage, Red Robin Cottage and Forget-Me-Not Cottage).

Referral Process.

All prospective residents currently must reside in the Louth/East Meath area. A Nursing assessment must be completed by Home Support office for Louth applications. Lorraine Anderson is the contact Person for East Meath applications. If any referrals/phone call received from PHN, OPICT team or any other sources, those applications will be redirected to Home support or Lorraine Anderson, depends on application source. They use the current Common Summary Assessment Record application form. This form must contain the demographic details of the resident, and an assessment of the individual's cognitive status

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and their functional status as well as their social background and levels of support currently available in the community.

This must also be accompanied by a written medical assessment by the person's General Practitioner or Geriatrician. An up to date prescription must accompany the resident on admission. No admissions can be accepted unless a prescription accompanies them. This is solely for Residents safety and the safety of staff administering medications to residents.

The referral is sent to the Person in Charge of the Designated Centre.

Contact is made with the referring discipline and any clarifications or queries are sought.

The Person in Charge will make a determination based on the pre admission assessment whether the referred residents needs, can be met within the Centre.

Once a decision is made that the persons needs can be met, and that the criteria for admission is satisfied, then the Person in Charge will contact the referring discipline outlining the date that the person being referred can be admitted to the Designated Centre.

The Person in Charge will assure that the rationale for admission is clear and understood.

The Person in Charge must be satisfied that the resident and or representative has consented to being admitted to the Centre.

The Person in Charge must be satisfied that all admission information, Medical and Nursing and allied health professional reconciliation discharge documents are available in order to ensure safe transfer of the resident to the Centre.

- All residents on admission will have a repeat assessment of their physical, social and cognitive ability on admission to the Unit as well as a personal fire risk assessment in relation to fire.
- A personal evacuation egress plan (PEEP) will be undertaken with the resident.
- Each new resident will have a familiarisation orientation period in relation to fire safety.
 PLEASE NOTE.

On the day of admission or transfer to the residential care facility, Clinical Nurse Manager or nursing staff must liaise with the resident themselves/and/or their family prior to arrival, to ensure there are no issues since the previous assessment.

As a public service we will attempt to accommodate older people with a variety of care needs

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for a short stay only. Sometimes these needs may be great. We will do everything we can to accommodate those needs but there may be occasions where our services are just not able to meet those needs. In circumstances like this we will communicate with other public/private/voluntary services in order to ensure the person's needs are met in an area most appropriate for that person. We will do this in conjunction with all stakeholders through the Co-ordinator of Services for Older People Louth Local Health Office Area.

There may be circumstances where an individual older person may despite full plans to facilitate an assisted discharge home, may not reach their potential to be safely discharged. In these circumstances we will co-ordinate nursing home supports through Nursing Homes support Grants for that individual and assist them in being admitted to their nursing home of choice in another centre. This will only be undertaken if a next of kin is contented and consents to same. If there are issues that no next of kin or representative exists, then we will facilitate legal services for the older person with dementia to assist them.

The Short Stay Services may in certain circumstances admit older people with their consent who are at a high risk in the community where they have immediate safety issues, and who on individual assessment and review would otherwise be admitted as a social admission to the acute service as a place of safety. The Person in Charge for the Centre is contactable- for information about the service and the admissions process any such potential residents will require the public health nurse in their area who will carry out a needs assessment.

In circumstances like this.

A referral form must be completed by the public health nurse and forwarded to the Home Support office in Louth for Louth applications and to Lorraine Anderson for east Meath Applications, those applications then forwarded to Person in Charge. The public health nurse must complete all documentation required before an urgent admission can be granted. Please note, to comply with National Quality Standards the medical report in the referral form and the medication prescription for those who have prescribed medications must be completed by a GP before a service can be provided. The General Practitioner must complete the documentation entitled "Application for Admission" form. As part of our commitment to providing person-centered care we also ask that each resident has a completed social profile also completed by the public health nurse.

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- The application must be submitted on form Louth Community Care Area Common Single Assessment Record, CSARS, Application Form.
- The completed form should include full biographical details of the person making the application and must also be signed by the person for whom the application is being made for.
- It is essential that the abbreviated mental test score is completed in full and scored.
- It is essential that the Activities of Daily Living level of need and ability section is completed and scored.
- The section on current care arrangements must be completed.
- The section on social profile can be completed on fourth page of application

The referral form is available from the public health nurse in the area where the person lives.

Completed forms must be delivered or posted or brought by the Referral source to the attention of the person in charge:

Once a referral has been received, all documentation will be checked to ensure all information has been received. Application forms that are not fully completed cannot be accepted and will be returned to the Referral source. In addition further information required will be sourced from the family/resident or referral source if it is deemed necessary for decision making.

The Person in Charge in conjunction with the Nurse Manager and Liaison referral person will organise a date for admission. Once the date has been arranged, the person will be informed of their admission date.

References

Ovretveit, J. (1998) - Evaluating health interventions: an introduction to evaluation of health treatments, services, policies and organizational interventions / John Ovretveit. Buckingham: Open University Press, 1998.

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