

Day Offer Referral and Assessment Guidelines


Care and Support

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Day Offer Referral and Assessment Guidelines

Directorate:	Social Care, Health, and Housing (SCHH)		
Division & Service:	Adult Social Care: Care and Support Service		
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This document is not controlled when printed.

It is the responsibility of every individual to ensure that they are working to the most current version of this document.

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1. Introduction

- 1.1. The aim of these guideline is to ensure that people, their family/carers, Care Managers and other associated professionals have a clear understanding of the referral and assessment process in respect of accessing the Day Offer.
- 1.2. The Day Offer primarily operates from or is linked to one of three main sites.
 - Townsend Centre in Houghton Regis
 - Biggleswade Centre in Biggleswade
 - COG Leighton Buzzard
 - Silsoe Horticultural Centre in Silsoe
 - Virtual Offer

The offer

- 1.3. The focus of the offer is twofold (made of two parts) the wellbeing of the person and their personal progression.
 - **Wellbeing** - maintaining and improving both physical and psychological health and wellbeing.
 - **Progression** - developing greater independence and self-reliance.

Virtual Offer

- 1.4. An integral part of the offer is the virtual offer that operates primarily online, running three sessions a day five days a week. The referral process for the virtual offer is more nuanced.
- 1.5. In the first instance care managers should contact the team on oda@centralbedfordshire.gov.uk If the person is known to the day service/offer then it will be a very simple process of arranging for them to access the virtual offer.
- 1.6. The impending employment offer though linked to the Day Offer will have a stand-alone referral process.

2. Referral process

- 2.1. All referrals are made through care managers.
- 2.2. If a family/carer or person approaches the day service directly, the staff team will support them to liaise with:
 - The First Response Team if they are not known / not in receipt of services.
 - The respective Care Management team /Care Manager / Locality worker if they are known / are in receipt of other services.
- 2.3. All referrals come via care managers as eligibility for the services is established by them.

- 2.4. If the person is deemed eligible the care manager will complete / forward a care and support assessment to the relevant Day Service Manager. This assessment can be sent prior to or after the initial visit by the person and their family/ carer.
- 2.5. The Day Service Manager or designated Senior Day Care Officer will then contact the person / family/carer to arrange for them to visit the service. They will also update the referring Care Manager regarding the visit.
- 2.6. The purpose of this visit is for the person with the support of their family/ carer if appropriate to be able to make an informed decision whether they wish to use the service and take part in the offer. It is important to remember that this invite should not be interpreted as an offer of a placement at the day service / offer.

3. Assessment

- 3.1. If after the visit the person wishes to attend the day service/offer and the care and support assessment has been received from care manager, a representative of the day service team will contact the person and their family/carer to arrange a date, time and place to meet.
- 3.2. The meeting will be used to gather as much information about the person and the care and support they need and how they like it to be provided. The type of topics covered will include:
 - Persons' history.
 - Why they would like to take part in the day offer.
 - What they hope to achieve if they use the day offer.
 - How long they see themselves accessing the service/offer for.
 - Family and other people important to them
 - Health – their needs and who supports them.
 - Medication – what they take, why and how.
 - Mobility- How they get about and what equipment they need.
 - Behaviours, physio plans, manual handling assessments, other support needs.
 - Eating and drinking – likes, dislikes, allergy's, specialist dietary requirements, dietician plans.
 - Personal Care – how much support they need.
 - Routine
- 3.3. The assessment visit will take approximately one hour. As much information as possible will be gathered at this time, this will ensure that the person proposing to access the day offer is offered appropriate care and support, and that staff are clear about what that support is. It may be necessary on occasions to arrange more than one referral visit.
- 3.4. The Day Service Manager will update the referring care manager re the assessment.

4. Completing the profile

- 4.1. Once all the information has been gathered the day service team will complete an initial support plan and a one-page profile based on the person's aspirations, care and support needs which will then be shared with the person and their family carer if appropriate.
- 4.2. As part of the assessment process, it is likely that the person is offered taster sessions within the day centre/offer. It is important to remember that this invite should not be interpreted as an offer of a placement.
- 4.3. It is at this stage that the Day Service Manager can make a clear decision around offering the person a place.
- 4.4. The Day Service Manager will update the referring care manager regarding the profile.

5. Outcomes

- 5.1. There are four possible outcomes:
 1. Yes, the day centre / offer can support the person and offer a placement.
 2. Yes, the day centre / offer can support the person however currently there is no capacity.
 3. Yes, day centre / offer can support the person if specific resources are put in place / adjustments made. (Examples being review of staffing resources or specialised equipment)
 4. No, the day centre / offer cannot meet the care and support needs of the person.
- 5.2. The outcome in the first instance will be discussed with the care manager.
- 5.3. If the outcome is either 2 or 3 the Day Service Manager and the care manager will work together to consider potential solutions.
- 5.4. If the outcome is 4 then the Day Service Manager will fully debrief the care manager on the reasons why.
- 5.5. The Care Manager will inform the person and the family/carers of the outcome.
- 5.6. If the person requires transport to and from the day offer then Care Manager will make these arrangements.

6. Fees and Charges

- 6.1. The daily cost of the offer, including transport if required is available in SharePoint, (to access the information in SharePoint search Fees and Charges in the search bar).

7. Monitoring and Reporting Arrangements

7.1. The implementation of this guideline will be monitored by managers via regular audits and supervision. The results of these audits will be reported to Operations Manager, the Head of Service and during managers meetings.

7.2. This policy supports the Care Quality Commission (CQC) Assurance Key Areas and Statements below:

Key question:	Quality statements we will use to assess quality
Safe	<p>Learning culture</p> <p>We have a proactive and positive culture of safety based on openness and honesty, in which concerns about safety are listened to, safety events are investigated and reported thoroughly, and lessons are learnt to continually identify and embed good practices.</p> <p>Safeguarding</p> <p>We collaborate with people to understand what being safe means to them as well as with our partners on the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm, and neglect. We make sure we share concerns quickly and appropriately.</p> <p>Safe environments</p> <p>We detect and control potential risks in the care environment. We make sure that the equipment, facilities, and technology support the delivery of safe care.</p> <p>Safe and effective staffing</p> <p>We make sure there are enough qualified, skilled, and experienced people, who receive effective support, supervision, and development. They work together effectively to provide safe care that meets people's individual needs.</p> <p>Infection prevention and control</p> <p>We assess and manage the risk of infection. We detect and control the risk of it spreading and share any concerns with appropriate agencies promptly.</p>
Effective	<p>Assessing needs</p> <p>We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing, and communication needs with them.</p> <p>Consent to care and treatment</p> <p>We tell people about their rights around consent and respect these when we deliver person-centred care and treatment.</p>

Caring	<p>Treating people as individuals We treat people as individuals and make sure their care, support and treatment meets their needs and preferences. We take account of their strengths, abilities, aspirations, culture and unique backgrounds and protected characteristics.</p> <p>Independence, choice and control We promote people's independence, so they know their rights and have choice and control over their own care, treatment, and wellbeing.</p> <p>Responding to people's immediate needs We listen to and understand people's needs, views and wishes. We respond to these in that moment and will act to minimise any discomfort, concern, or distress.</p>
Responsive	<p>Person-centred care We make sure people are at the centre of their care and treatment choices and we decide, in partnership with them, how to respond to any relevant changes in their needs.</p> <p>Equity in access We make sure that everyone can access the care, support, and treatment they need when they need it.</p>
Well-led	<p>Governance, management, and sustainability We have clear responsibilities, roles, systems of accountability and good governance. We use these to manage and deliver good quality, sustainable care, treatment, and support. We act on the best information about risk, performance, and outcomes, and we share this securely with others when appropriate.</p>

8. Evaluation and Review

- 8.1. This guideline will be reviewed 2 yearly. In addition, the guidelines will be amended when new procedures are introduced.