

HUNTINGDONSHIRE PRIMARY CARE TRUST

INTERMEDIATE CARE TEAM

**CROWN GARDENS
SHELTERED HOUSING SCHEME**

OPERATIONAL POLICY

JANUARY 2003

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1 INTRODUCTION

- 1.1** Crown Gardens is a sheltered housing scheme consisting of 29 flats, in the village of Alconbury. It is owned and operated by the local Registered Social Landlord (RSL) Hunts Housing Partnership.
- 1.2** Huntingdonshire Primary Care Trust (PCT) lease studio flats within the scheme as an Intermediate Care facility plus one flat as an office and night service base.
- 1.3** This accommodation comprises bedsit / studio flats which the RSL had difficulty renting out to long term tenants. The PCT therefore took the opportunity to take on the lease of these to provide a much needed step down facility to ease pressures within the acute hospital.
- 1.4** The service is part of the PCT's Intermediate Care Team, based at Hinchingsbrooke Hospital and should be viewed as a rehabilitation resource within that team, and is managed by the Intermediate Care team on a day to day basis.
- 1.5** The service is used for patients who are ready to leave hospital but are unable to be discharged for a variety of reasons. These may include:
 - ◆ People who need complex adaptations to their home which may take time to be completed.
 - ◆ People who are unable to return to their current accommodation as their needs have changed. Time spent in sheltered housing enables them to consider options for their future.
 - ◆ People who need rehabilitation to build their confidence and independence in a more sheltered, domestic environment, with 24hr cover.
 - ◆ People perceived as being on the borderline of needing residential care but may not have considered the option of warden controlled accommodation.
 - ◆ People awaiting complex domiciliary care packages.
- 1.6** The service may also be accessed as a 'step up' facility as part of the Intermediate Care Team's role in admission avoidance.
- 1.7** There is no charge made to patients who are placed there as the service is viewed as an alternative to waiting in an acute hospital bed. The PCT therefore funds the scheme in terms of rent, staffing, housekeeping, facilities etc. There is no specific time limit on length of stay in Crown Gardens but the team aims at 6 weeks maximum, in line with the NSF for Older People.

2 REFERRAL AND ASSESSMENT PROCESS

- 2.1** Patients are referred to the Intermediate Care Team, by phone or liaison on the wards. Referrals may be received from any member of the Multidisciplinary Team (MDT). Referral information is recorded, by ICT staff on the Intermediate Care Front Sheet. This initial information should be as complete as possible so that an initial assessment can be made as to the patient's suitability for either domicillary intermediate care support, or placement at Crown Gardens.
- 2.2** The patient will be visited by one of the Intermediate Care Practitioners. One member of the team will be identified as the key contact for Crown Gardens referrals, but in her absence, any member of the team can complete the assessment.
- 2.3** The assessment is not intended to be a formal, standardized process but more a judgement made by a senior practitioner, in liaison with the patient, their carers and members of the MDT, and based on the criteria outlined at 1.5 and following completion of a Risk Assessment.
- 2.4** Patients will be given an opportunity to discuss their concerns and thoughts on the proposed transfer to Crown Gardens and will be shown the album of photographs to assist them in their understanding of the service. It is accepted that patients may be anxious about the proposed transfer but every effort should be made to reassure them and keep them informed of the objective of the transfer, the fact that it is a short term placement, when the transfer will take place, how long they might need to stay there and the long term plan.

3 PATIENT DOCUMENTATION

- 3.1** The Intermediate Care Team practitioner will write up the rehabilitation care plan using the standard Intermediate Care Team documentation and will include additional assessments as necessary, eg manual handling risk assessment, Falls Screening Tool, wound chart and catheter assessment. This will be written with the full involvement of the patient, and their carers if necessary. This will subsequently be reviewed by the practitioners, in conjunction with the patient to ensure it remains meaningful and up to date. Reviews will take place at regular intervals depending on patient need.
- 3.2** The departmental Intermediate Care notes will be written up.
- 3.3** The patient's details will be communicated to the HALOS (Huntingdon After Lights Out Service) for their information.
- 3.4** The ICT Practitioner will phone the Alconbury District Nursing team, to inform them of the patient's transfer to Crown Gardens.

4 COMMUNICATION WITH LOCAL GPs

- 4.1 The practitioner responsible for the patient's transfer will contact the GP surgery at Alconbury, to inform them of the proposed transfer. Patients do not need to be formally registered as resident unless it is expected that they may be at Crown Gardens for a longer period of time. If patients require registering, staff need to complete a GMSI form.
- 4.2 The following documents will be faxed to the Alconbury GPs for information:
- ◆ A copy of the patient's pink discharge letter. This is important as the GPs have no background information on the patient and will need this as reference if they are called out.
 - ◆ A copy of the Intermediate Care front sheet.
 - ◆ The Intermediate Care GP letter, with brief description of the ICT intervention and reason for the patient's transfer to Crown Gardens.
 - ◆ Details of 'TTO' medication, clearly indicated on TTO chart. (This may change with new Intermediate Care Medication Policy due Dec 2002.)
- 4.3 The GPs will visit the patient at Crown Gardens if requested by the Intermediate Care staff. In emergencies, patients will be referred to MAU or A&E as appropriate. See also section 10, 'PATIENTS REQUIRING MEDICAL ATTENTION'.
- 4.4 The patient's **own** GP will be sent a copy of the GP letter with it clearly indicated that the patient has been transferred to Crown Gardens for a short stay period and that details of their inpatient stay have been faxed to the Alconbury GPs.
- 4.5 The ICT practitioner will write in the medical notes to request that a copy of the discharge summary is sent to the GP practice at Alconbury, in addition to their own GP receiving a copy.

5 TTO (To Take Out) MEDICATION

- 5.1 Patients will be discharged with a 28 day supply of TTO medication plus the bottom copy of the discharge summary. Intermediate Care Team Practitioners will liaise with the ward staff to ensure that this is carried out.
- 5.2 TTO medication will be written up by a member of the patient's medical team. The ward clinical pharmacist will write up the ICT administration record against which, the ICT staff can record their administration of medication. This is in line with the ICT Medication Policy due Jan 03.

- 5.3** The patient will be given a copy of the medication chart which will be transferred with them to Crown Gardens and kept in the wall cabinet in the bathroom of the patient's designated flat. See also Administration of Medication.

6 TRANSFER TO CROWN GARDENS

- 6.1** The Intermediate Care Practitioner will liaise with the patient, their carers and the ward staff to agree date of transfer to Crown Gardens.
- 6.2** The Intermediate Care Practitioner or ward staff will arrange transport to Crown Gardens. This will be via the Two Shires Ambulance Service but, in the event that this is unavailable or deemed inappropriate, the patient may be transported by two members of the Intermediate Care Team.
- 6.3** The Intermediate Care Team Practitioners will ensure that they, or one of the Crown Gardens assistants, is available to 'meet and greet' the patient when they arrive at Crown Gardens.

7 STAFFING

- 7.1** Intermediate Care Team assistant staff are on site at Crown Gardens throughout the day from 7am to 9pm. These staff are responsible to the Intermediate Care Team Practitioners.
- 7.2** The Intermediate Care Team Practitioner responsible for Crown Gardens.. will visit the site at least once each day to support the staff based there and monitor the patients' progress. The Intermediate Care Team Practitioner is responsible to the Clinical Head for Intermediate Care.
- 7.3** Additional support is provided from the Intermediate Care Team practitioners, one of whom is on call until 7pm each day. Thereafter support is provided by the HALOS service. See point 7.12
- 7.4** A Social Services Home Care assistant is on site throughout the night from 9pm to 7am. The Social Services staff are responsible to the Team Leader for Social Services Home Care, who will liaise closely with the Clinical Head for Intermediate Care for specific issues regarding Crown Gardens.
- 7.5** The Hunts Housing Partnership Scheme Manager is resident on site and responsible for the HHP tenants between the hours of 8.30am and 5pm five days /week. Outside these hours residents contact the on call Scheme Manager. She has no direct responsibility for the Intermediate Care clients, however it is important that there are

good communication links with her and that she is involved in service developments with the Intermediate Care Scheme.

7.6 Roles and Responsibilities of the Rehab Assistant

- i) To register patients on Lifeline Alarm Call system
- ii) To shop for patients using Waitrose ICT account
- iii) To order Home Farm Foods
- iv) To ensure each flat is kept clean and tidy on a daily basis.
- v) To carryout specific rehab and treatment in line with patient's goals
- vi) To fit necessary equipment as instructed by ICT practitioners.
- vii) To supervise patients carrying out personal care activities encouraging the promotion of independence at all times.
- viii) To supervise patients carrying out domestic activities, including meal preparation encouraging the promotion of independence at all times.
- ix) To be responsible for the safety of patients and to report progress or problems to ICT practitioner.
- x) To assist with clerical and admin duties as required.
- xi) To participate in team meetings to promote effective communication.
- xii) To cover for cleaner when off sick, on leave or unavailable for any other reason.
- xiii) To run Full of Beans programme
- xiv) To encourage patients to participate in social activities running within Crown Gardens.
- xv) To monitor when patients medication is running out and arrange repeat prescription from GP.
- xvi) To accompany patients to hospital appointments / GP / dentist / chiropodist etc as necessary.
- xvii) To report incidents using PCT incident forms and procedures.

7.7 Roles and Responsibilities of the Daily Living Assistants

- ◆ As above except for ii), iii), v) and vi).

7.8 Roles and Responsibilities of the Intermediate Care Key Practitioner

- i) Coordination of referrals and transfer to Crown Gardens
- ii) Supervision of Rehab and Daily Living Assistants – including PDRs.
- iii) To monitor staff absence and inform Clinical Head of ICT
- iv) To monitor patients' progress and revise care plans accordingly to ensure discharge from Crown Gardens at optimum time.
- v) Liaison with other agencies as appropriate, eg GP and Social Services

7.9 Roles and Responsibilities of Intermediate Care Team Practitioners

- i) To cover for key practitioner in her absence.

- ii) To provide specific occupational therapy / physiotherapy and nursing intervention as required.

7.10 Roles and Responsibilities of the Social Services Home Care Night Staff

- i) To be present on site throughout the night.
- ii) To arrive in time to receive short handover.
- iii) To follow care plans and carryout care programmes.
- iv) To respond to call line for both PCT patients and HHP residents.
- v) To report any feedback to HALOS service.
- vi) To give short handover to daytime staff.
- vii) To inform HALOS service if member of staff for next shift does not arrive.

7.11 Roles and Responsibilities of the HHP Scheme Manager

- i) To manage the sheltered housing service to ensure that the service meets the needs of residents
- ii) To liaise with PCT staff and address any management issues arising and contribute to the operational policy of the scheme.
- iii) To work in partnership with the PCT staff and other agencies to develop the services to older people, throughout the scheme.

7.12 Roles and Responsibilities of the HALOS night nursing service

- i) To oversee the night service at Crown Gardens and provide support to staff on duty.
- ii) To communicate regularly with the assistant staff at Crown Gardens.
- iii) To assess patients for transfer to Crown Gardens if appropriate.

7.13 Links with District Nursing

- i) During the week, the majority of nursing interventions will be carried out by the Nurse Practitioners from the Intermediate Care Team.
- ii) At weekends, the Intermediate Care Practitioners are only 'on call' and are therefore unable to carryout nursing tasks and will contact the District Nurse on duty for the Huntingdon Patch.

8 HOUSEKEEPING

8.1 Meal Provision

- 8.1.1** Meals will be provided to the patients free of charge, as would be the case if they were in hospital. Patients may chose to purchase their own additional items such as biscuits and sweets.
- 8.1.2** Home Farm Foods frozen meals will be provided as a main midday meal and evening meal. These will be ordered regularly by the Rehab Assistant and delivered on a fortnightly basis. Meals will be stored in the large upright freezer, situated in the cupboard under the back staircase. On a daily basis, patients own fridge / freezer compartments will be topped up so that patients have a choice of meals. (Refer to policy on Food Handling.)
- 8.1.3** When food is transferred from the large freezer to patients' own fridges, the items will be marked with that day's date.
- 8.1.4** On occasions, or as part of a rehabilitation plan, patients may chose to prepare their own meals using fresh ingredients. In this case, individual items of food will be purchased for individual patients using the Waitrose account set up with the PCT.
- 8.1.5** Staff will record in the care plan what meals have been provided to the patients to avoid duplication of meals.
- 8.1.6** The Waitrose account will also be used to purchase breakfast and tea provisions.
- 8.1.7** The patients will be encouraged to prepare their own meals and drinks wherever possible and this will form part of their care or rehabilitation plan.
- 8.1.8** On occasions, meals may be prepared in the communal lounge kitchen, and eaten together as part of social interaction.

8.2 Cleaning

- 8.2.1** The cleaning of the flats is the responsibility of the Intermediate Care assistants on site who will be responsible for daily cleaning and a full clean when patients are discharged from the scheme.
- 8.2.2** The Intermediate Care team will need to employ a dedicated cleaner, in line with Risk Management policies and COSHH guidelines and this will be set up early 2003.
- 8.2.3** Patients' bins will be emptied on a daily basis and placed with the general rubbish collection.

8.3 Laundry

- 8.3.1** Crown Gardens has a communal laundry for use by all the residents and Intermediate Care patients. Intermediate Care will be given access to the laundry at a time to suit the general residents and in consultation with the Scheme Manager.
- 8.3.2** Intermediate Care staff will be responsible for assisting patients to do their own washing where possible or if their family is unable to assist. Personal laundry should be placed in white plastic bags and washed separately from other patients' items.
- 8.3.3** Intermediate Care staff will be responsible for washing bedding once a week, unless bedclothes are soiled in which case they will be washed immediately.

8.4 General Maintenance (furniture / lightbulbs / electricity etc)

- 8.4.1** The Intermediate Care Team staff will be responsible for the general maintenance of the furniture and fittings within each flat. The furniture and fittings are the property of the Intermediate Care Team and should be kept in good working order. Any breakages should be reported to the ICT Lead Practitioner who will liaise with HHP to arrange a maintenance visit. This will be charged to the PCT.
- 8.4.2** The Intermediate Care Team will be responsible for purchasing and changing lightbulbs as required.

9 COMMUNICATIONS

- 9.2** Each flat has a pay phone. The line rental is paid for by the PCT. The numbers of each payphone are kept at the Intermediate Care office base as reference if the patients need to be contacted by phone.
- 9.3** The Intermediate Care Team staff use Flat 5 as an office base within the scheme. This is also the base for the Home Care night staff.
- 9.4** The on site staff have access to a phone/fax and mobile phone.
- 9.5** Each flat has a Lifeline Call system. If the patient requires emergency assistance, they may pull the red cord within the flat or use the pendant. During daytime hours this will be picked up by the Scheme Manager who will alert the ICT staff on site. Out of hours, this will go through to central control who will alert the staff at Crown Gardens via the pager.
- 9.6** If the ICT / Home Care staff are unable to respond, central control will call the Practitioner on call, HALOS team, or emergency services as appropriate.

10 PATIENTS REQUIRING MEDICAL ATTENTION

- 10.2** If a patient is assessed as requiring immediate medical attention, the emergency services may be called by any member of the Intermediate Care Team or Social Services Home Care Team by dialing 999.
- 10.3** If a patient is assessed as needing urgent medical assessment, a direct referral may be made to the Medical Assessment Unit at Hinchingsbrooke Hospital. Transport will be booked directly with Ambulance Control of the East Anglian Ambulance Trust.
- 10.4** If patients require a visit from the GP, or a repeat prescription, the Intermediate Care Team Practitioners will arrange this appointment.

11. INCIDENT REPORTING

- 11.1** Critical incidents and 'near misses' should be reported using the PCT's incident reporting system, indicated on the flow chart - displayed in flat 5.
- 11.2** This procedure is to be followed by both PCT and Social Services Home Care staff. Copies of the PCT's incident forms will be copied to Social Services when an incident has been reported by a member of the Home Care Team.

12 ADMINISTRATION OF MEDICATION

- 12.1** Patients will be discharged from hospital with their own medication discharge summary. This will be kept in the bathroom cabinet of the patient's flat.
- 12.2** For prevention of admission patients, medication details will be clarified with the patient's own GP.
- 12.3** Patients should be encouraged to self medicate but if assistance is required, staff should follow the guidelines within the PCTs ' Intermediate Care Medication Policy' (due Jan 2003) **See also section 5.1 'TTO MEDICATION'**.

13 PROCEDURE IN THE EVENT OF A FIRE

- 13.1** Staff are required to familiarise themselves, and the patients, with the Hunts Housing Partnership procedures (on the back of the door of each flat) and act on them in the event of a fire.
- 13.2** Fire blankets are provided in the kitchens of each flat.

13.3 Members of staff who are in the building when a fire breaks out should stay beyond at least one fire door. This procedure will be reviewed by the PCT's Risk Manager.

14 PATIENTS REQUIRING EQUIPMENT

14.1 The Intermediate Care Team will provide incontinence aids when required.

14.2 Patients may be individually assessed as needing various items of equipment to assist with their rehabilitation whilst at Crown Gardens. Daily Living equipment may be provided from the satellite store within the OT dept at the hospital or may be requested from the Joint Loans Store at Papworth.

14.3 A SOC814 Equipment loan form must be completed on each occasion

14.4 Equipment must be returned to the store once the patient has been transferred from Crown Gardens.

15 TRANSFERS FROM CROWN GARDENS

15.1 The Intermediate Care Team key practitioner will be responsible for reassessing and reviewing patients so that they are discharged from Crown Gardens at the optimum time.

15.2 Ongoing Intermediate Care support will be arranged, if required, in the patient's own home for a short period of time or until a social care package can be arranged, if this is required.

15.3 The ICT key practitioner will be responsible for liaising with the patient's family / carers, GP, District Nurse, Social Services and other members of the Primary Care Team as required.

15.4 Transport will be arranged via Two Shires Ambulance Service.

15.5 Every effort should be made to ensure that patients do not have a delay in their transfer of care eg those awaiting alternative housing or adaptations. It is accepted that this will be unavoidable on occasions and that it is more appropriate that patients wait in a facility such as Crown Gardens rather than in an acute hospital bed. However, staff must ensure that as much as possible can be done to support patients in this position and plan future placement / transfer.

For further information, please contact Diana Mackay on 01480 416281 or Barbara Wallis on 01480 416097.

16 APPENDIX

a) ABBREVIATIONS

RSL	REGISTERED SOCIAL LANDLORD
HHP	HUNTS HOUSING PARTNERSHIP
HUNTS PCT	HUNTINGDONSHIRE PRIMARY CARE TRUST
ICT	INTERMEDIATE CARE TEAM
MDT	MULTIDISCIPLINARY TEAM
HALOS	HUNTINGDON AFTER LIGHTS OUT SERVICE
PDR	PERSONAL DEVELOPMENT REVIEW
OT	OCCUPATIONAL THERAPY

