

**Admissions & Discharge**

**Policy**

**Version 1**

Date 2019

1. **Policy Statement.**

Barróg Healthcare recognizes the need for clear procedures governing Admissions, and Discharges. We aim to support children and adults to make choices about supports and services they require and receive. We are committed to provision of quality services, delivered in a respectful manner, that meet the needs of children and adults. We aim to clearly state the nature and duration of services being offered and procedures for discharge when appropriate.

1a. **Purpose.**

 The purpose of this Policy of Admissions, Transfers and Discharges is to

 provide clear information on how the process takes place within

 Barróg Healthcare’s Adult and Children’s Services

. The Policy ensures that Referral Agencies applying for services receive the

 appropriate information on the criteria/process for admission. The broad

 principles of the policy are there to ensure:

 1. That the services and duration of the services being offered, is

 clear.

 2. That Barróg Healthcare have the resources to

 provide the service that is proposed according to the criteria of the

 funding/referral authority;

 3. That an Assessment of Need for each individual will take place as

 an integral part of the Admissions process to determine level of

 service required. This information will facilitate planning for these

 individuals and future service development and to inform the

 funding authority. This process will be coordinated by the

 admissions Committee.

 4.That each Adult and Child admitted to the Service will have a

 written Individual Care/Placement plan, Risk Assessment, medical history ,household

 agreement(where appropriate), contact/information sheet.

**1b.Scope.**

 This Policy refers to adults/children with intellectual disability, adults/children with mental

 health issues, young people under the care of the Child and Family Agency, and those

 transitioning from the care system to a more independent lifestyle.

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**2.Responsibilities**

The Operations Manager (O.M.) (or a Senior Manager assigned by the O.M.) and the Admissions Committee are responsible for the Admission, or discharge of individuals in their service and must be directly involved in every Admission, or Discharge meeting. The Manager of the Service to which the referral is made will be fully involved in the Admissions/Discharge process

2a**.Procedures and Principles governing Admissions, and Discharges are as follows**:

Each Day, Residential/Respite, Outreach, and Aftercare Service within Barróg Healthcare must have a clear description of whom it serves. This will include an Information Leaflet approved by the Operations Manager.

This may also include a Service user’s Guide, and a Statement of Purpose

where relevant.

Within each discipline, each Service speciﬁes their criteria for individuals

for whom a service may be offered. Consideration is given to:

 • the supports requested by/on behalf of the applicant;

 • the age range of those referred.

 • the nature and degree of presenting issues to be addressed; and,

 • the geographic area served, with attendant accommodation resource implications.

 A referral form setting out the requirements of the individual referred will be

 completed. A request for a service admission will only be considered on receipt of a fully

 completed form, with the accompanying documentation as specified on the form.

2.bThe composition of the Admissions Committee will be:

1. Operations Manager.
2. Service Manager.
3. Service Team Leader.
4. Alternative Service Manager.

A minimum of three persons is required for convening of committee.

The frequency of admissions meetings is decided depending on referrals and is held at least once a year to review waiting lists.

**3.** **Steps for Admissions Process**

 1. General Enquiry/Letter regarding services offered and a possible

admission is received by the C.E.O, or Senior

Manager assigned by the O.M.).

 2. If appropriate, the O.M. will send the Referral Form

to the initial point of contact (and Consent Form

for Sharing Personal information.)

 3. The O.M.will send the completed Referral Form to the relevant

Service Manager which includes a list of the information required by the

Admissions Committee.

 4. The Service Manager will liaise with the referral agency

 and gather the relevant information and reports.

 5. Pre-Admissions meeting held involving all relevant personnel

 (Adults/Family/relevant Staff)

 6. Admissions Meeting : Decisions Made :

- Admitted to service requested.

- Wait Listed for service requested.

- Some element of service requested to be provided.(By negotiation with referral agencies)

7. If the service is deemed suitable, (individual offered or waitlisted for an

element of service) the chair will send a letter of Admission to the source of referral.

8.The Manager will arrange to complete an Individual Service Arrangement with the individual/referring agency. The Manager and assigned team members will arrange a transition to service.

9.A list is given to the relevant Service Manager of the information required

by the Admissions Meeting, and of the sources from which this information is to be obtained.

The information required for consideration by the Admissions Committee

for the Admissions Meeting is sought and reviewed by the Service Manager

and relevant team member of the service to which the application is being made on behalf of the O.M.

Prior to an Admissions Meeting, an Assessment of Need will be carried out. This will include meeting with the individual, if possible, to ascertain their wishes and priorities, and carrying out a Supports Needs Assessment which will give the level of the staffing support required for

each individual. Other information required will depend on the service being applied for- e.g. psychology, social work, discharge from services reports, medical reports; a statement of urgency of need; a report of an assessment visit by a member of the team, and a report of the visit of the applicant and/or his/her family to the service if appropriate/possible.

The Manager will convene a Pre-Admissions Meeting where the relevant information and reports will be presented. The Preadmissions Meeting will :

 •assess the reports and relevant information and define the level of

 staffing support that an individual requires;

 •assess the compatibility of any particular individual with other

 individuals availing of that service-if required.

 •consider any adaptations or particular requirements that may be

 required;

 •consider what package of supports each individual requires to meet

 their needs and wishes;

 •consider the suitability and potential match of each individual to a

 particular service.

 •considering the present level of resources, what services and

 supports can be offered.

 •complete the Admissions Procedures checklist.

 Before the Admissions Committee makes a decision re: offering a

 placement or service, consideration must be given to:

 •the circumstances surrounding the request for admission.

 •the wishes of the individual (where possible) and of his or her family;

 • the appropriateness of the service relative to the needs of the

 individual;

 •the priority attached to the applicant by the referral agents.

 •the availability of resources to meet the needs of the individual, or a

 detailing of the new resources which will be required if the individual

 is to be given a service;

 •The probable impact of the new individual on those already in the

 service, ensuring that the Admissions Meeting takes account of

 existing needs and resources available within the Service;

 •The possible overburdening of the Service’s caseload to an extent

 that dilutes the service beyond the point of usefulness

*The Admissions Committee will consider the information and make a*

*decision whether to offer an individual a place if they are deemed suitable for a particular service. The Service Manager completes the template - Outcome of Admissions Meeting*

*At the end of the Admissions Meeting all copies of reports are collected and shredded.*

*Only the originals are kept on Main file and copies on personal files if relevant.*

The level of service and supports offered will be defined in an Individual

Service Arrangement/Placement Plan with the individual. This plan will also detail the desired outcomes of the intervention offered. If sufficient resources are not available to address all of the elements required by an individual, they will be wait-listed for those particular elements and it will be noted on their Individual Service Arrangement. This will be reviewed quarterly, in conjunction with the Review of each person‘s Individual Care Plan.

All initial Individual Service Arrangements have to be approved and signed

by the O.M. or a Senior Manager assigned by the O.M. Authority to sign

the annual reviews of Arrangement is assigned to the Service Manager

unless there are substantial changes to the terms of the Arrangement

The Assessment of Need and Staffing level may be reviewed if required.

If an individual requires any additional supports or staffing, then the additional supports required will be recorded in their Individual Service arrangement, dependent on discussion and written agreement with the referring agency.

The Team and the Individual will complete a Transition Plan which will set out for the individual, the initial actions required to enable them to be introduced and settled into a Service.

The Information Sharing Consent Form gives permission to seek information and reports from individuals or agencies as may be required by the Admissions Committee

Before allocating a service to a new applicant, the Admissions Committee reviews the existing waiting list of applicants to determine who has the greatest need, if necessary.

Clear channels of written communication must be established with individuals/family member, guardian and any other referring sources regarding admissions, transfers and discharges.

Each Service indicates the kinds of preparatory and follow-up work it undertakes with families/adults/individuals regarding proposed admissions, and discharges. The formal letter from the Director of Services to the individual/family member, guardian and/or referring source, must state,

 (a) the service, which is being offered,

 (b) for how long it is being offered, and

 (c) any services the individual needs which may not be available, or with which they are

 unwilling to engage although identified as desirable.

The adult, family member or the authority accepting the placement must sign an Individual Service Agreement indicating that the type, extent, and duration of service being offered is understood and agreed.

Copies of all correspondence relating to admissions, transfers or discharges are retained on file indefinitely.

**Withdrawal of a service.**

Wherever there is a proposal to withdraw a service for any reason, this is a matter which requires the personal attention of the O.M.and it is a matter which the O.M. needs to discuss in detail at the Admissions Committee Meeting. If withdrawal of a service has wider policy

implications then the matter should be brought to the attention of the

Board of the company. The O.M. and senior management team ***need to seek every***

***opportunity to avoid terminating a service****.* If a service must be terminated, the communication of the ending of the service to the referring agency, child or adult and families concerned must be handled with great sensitivity. Other than when it arises naturally because a person has reached the pre-ordained age limit when a service will cease, it is expected that the discharge of an individual would be an exceptional event. It can arise where an individual presents very high-risk anti-social behaviour.

The Admissions Committee (including the Senior Manager) is responsible for carrying out the various stages in the process that may end in ultimate discharge from the service. The following are the proposed stages of a discharge process, during which the referring agency, individual and his or her family are kept fully informed.

Where an individual’s high-risk anti-social behaviour is known about prior

to admission, the letter of admission, which is sent to the family or guardian, would attach clear conditions to the service being offered and a clear statement that the service may be discontinued where these conditions are not met.

Where appropriate, admission may be for a trial period of specified length with an extension of that trial or full admission being determined by clearly stated conditions. Failure to meet these conditions may lead to suspension or discharge. While in the Service, a detailed record is kept of the person’s behaviour and of all programmes and strategies undertaken on his/her

behalf. For service suspension or discharge to come into effect, the records must show that ***everything possible*** was tried over a reasonable period of time to overcome the problems presenting.

The criteria which determine a person’s discharge from a Service must be detailed along with the procedures followed at such a time.

A verbal warning before witnesses is first given to the adult/child as appropriate and notified to his/her family, guardian or advocate. The reasons for the warning and the consequences if the unacceptable behaviour continues are clearly stated. The Service Manager

gives the verbal warning, which is recorded along with the response of the person warned.

 A written warning is given to the adult/child where appropriate and conveyed to his/her family or advocate, where the verbal warning has proved ineffective. The service manager meets with the family or advocate to discuss the implications of the written warning.

Where high risk anti-social behaviour continues at an unacceptable level, suspension may be invoked. Reasonable notice is given to the adult/child, family, guardian or advocate. Suspension would be for an agreed period of not more than one week as decided by the Admissions Committee. Further suspensions may follow, according to the

Committee’s judgment of what is appropriate. The committee may recommend full discharge from the service when all efforts at remediation have failed and where serious risk continues

to other adults/children, staff, or the general public. Following a meeting with the adult/child, where appropriate, family, guardian or an advocate, a formal letter of discharge is issued by the Director of Services, outlining the salient issues, and the efforts made to maintain the service before discharge became the only option. Relevant parties and agencies are informed of the pending discharge, for example, the Health Service Executive, Gardai, probation services, the Child and Family Agency, the psychiatric services. It is recognized that in exceptional circumstances it may not always be advisable or possible to fulfill every element of the above stages.

Reasons for policy deviations must be noted in writing and signed by the Operations Manager.

In situations where insufficient resources are provided by funding agents in any given year and the Service is unable to provide all of its services, the Service reserves the right to withdraw an element of service or a service to an individual for a given period of time

**Appeals Procedure.**

**In relation to Admissions, or Discharges.**

If an applicant for a service is not satisfied with how the service has responded to their application for a service or their discharge from a service they can choose to appeal the matter. Appeals may be sent, in writing, to the O.M.

The appellant will be sent a written response within 5 working days. This will inform them that their appeal has been received and is receiving attention. A response will be written to the appellant and shall be issued within 14 days of receiving the formal appeal.

The Manager will inform those in the service who need to know of the issue and the outcome. If the appeal to the Director of Services fails, the decision may be appealed in writing to the Board of Barróg Healthcare.

Following the Admissions/Discharge Meeting, formal notification must be made

to the HSE/C.F.A regarding all admissions and discharges. The person responsible in the Service for transmission of this information must be clearly indicated.