Care home liaison service
Operational policy

Older People’s Mental Health Services
Introduction

The following procedures and protocols relate to the operational working and function of the Doncaster care home liaison service. The development of the service in 2006 arose from a needs based assessment that identified a gap in service provision for older people with mental health problems residing in care homes in the Doncaster area.
Ethos
Based on the principles of person centred care, the care home liaison service works in collaboration with patients, carers, GP, primary care and care home managers in the Doncaster area and consults with them in all aspects of care, service delivery and planning.

Service specifications
The care home liaison service is based within the older people’s mental health liaison service at Tickhill Road Hospital in Balby, Doncaster. It is a needs-led borough wide multi-professional service serving adults over the age of 65 years, specialising in the assessment and treatment of people who have moderate to severe mental health needs, residing in registered care homes in the Doncaster area.

The service is made up of the following staff members:

- Consultant psychiatrist
- Senior clinical nurse
- 5 community mental health nurses
- Admin support.

Aims / objectives of the service

- To promote positive practice to maximise clients quality of life using a holistic approach in order to maintain the client in their current setting and achieve an appropriate and effective care plan
- To provide a care home liaison team that will
work in partnership effectively and efficiently with other organisations and sectors within Trust

• To provide rapid access to specialist mental health services where appropriate for patients in care homes who have or are suspected of having a mental health need

• To address the assessment of the needs of the person living in the care home and provide timely assessment and effective, evidence based treatments

• To promote and assist in the maintenance of the highest attainable standards of nursing care in the community

• To give advice on care and ensure timely access to services which will best meet the individuals physical, mental and emotional needs

• Liaise effectively with care home and acute hospital management and staff

• To assist in developing and delivering appropriate educational packages and advice to care home and hospital staff based on best practice and / or individual needs

• To develop and maintain close working relationships with referring agencies and supporting / regulatory bodies such as CQC and social services

• To ensure that the care environment is appropriate to the needs of the service users
• To place service users and carers at the centre of their care, wherever possible involving them in service development and provision

• To liaise with the patient’s GP and primary care team throughout the pathway.

Expected outcomes

• Improved detection of common conditions in residential / care homes

• Assessment, diagnosis and treatment of referred cases in residential / care homes

• Risk assessment and active management of risk in residential / care homes

• Training and education programmes in mental health to improve treatment and care

• Offer advice on mental health patient care

• Respond in an appropriate timely manner

• Raise awareness of mental health in residential / care homes.

Referral pathway

All referrals are taken through the older people’s mental health liaison single point of access.

On receipt of the referral the senior clinical nurse screens all referrals on the same day, informing the referee of the outcome. If the referral is appropriate and other underlying causes for the mental health issue have been eliminated the care home liaison service will contact the care home directly by telephone

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and an appropriate appointment will be made, considering the patients family and carers choice as much as possible. If referrals are received that are inappropriate the senior clinical nurse will contact the referee and the care home giving advice on how to progress.

The senior clinical nurse will however be happy to be contacted and referrals discussed with the referee prior to receipt of the referral form through the single point of access.

**Response times**

The care home liaison service works to the following response times following appropriate screening.

- Emergency referrals will be responded to within 4 hours
- Urgent referrals will be responded to in 2 days
- Routine referrals will be responded to within 14 days.

**Discharge criteria and planning**

Discharge is in line with individual’s care plan.

Patients will be discharged from the service when the appropriate treatment has been undertaken. Discharges will be planned...
appropriately and patients either referred/signposted to an alternative service if required either during or after treatment ensuring continuity of care is maintained.

**Contact details**

- 01302 798467 between the hours of 07.30-17.00 hrs. Monday to Friday Inclusive
- 01302 798037 (Jo Hirst Senior Clinical Nurse) for advice and information
- Out of hours please call 01302 796104 for an answer machine that provides alternative numbers for out of hours.

The service uses a referral form which can be faxed to 01302 794874.

**Complaints Procedure**

The care home liaison service and trust welcomes advice and suggestions about how services may be improves. Many problems can be resolved by talking to the appropriate member of staff in the first instance however if it is cause for a written complaint all correspondence should be addressed to

Chief Executive
Rotherham Doncaster and South Humber NHS Trust
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Tickhill Road
Balby
Doncaster
DN4 8QN
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