## ITOCH Standard Operating Procedure: When to Accept & Admit & using / reviewing Request for Information (RFI) and comments V1.0

#### **1. Procedure overview**

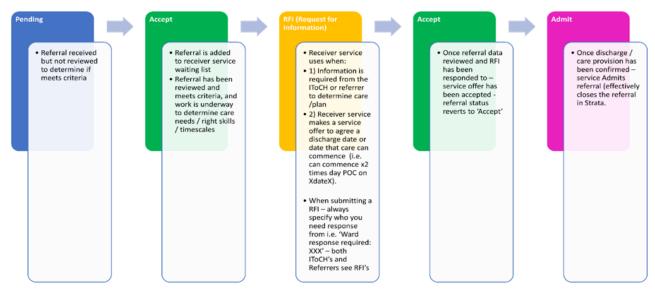
This Standard Operating Procedure (SOP) applies to those services who receive referrals in Strata pathways to deliver care and support, following integrated Transfer of Care Hub (IToCH) triage.

This SOP is supported by training guides for Strata users located on the <u>CITS</u> <u>training portal - Strata</u>.

Receiver services accept ALL referrals unless the service criteria are not met.

The exception is for 2-hour Urgent Crisis Response (UCR) referrals where IToCH will call receiver services to confirm capacity then admit the referral – the IToCH will not send a strata referral to receiver services for a 2-hour UCR, referral details will be added to RiO (see SOP – Managing 2-hour Urgent Crisis Response (UCR))

The general rule is for receiver services to Admit a referral when care or support has started (first contact) – where the referral is a hospital discharge. Other types of referrals may be admitted sooner. Appendix 1 lists specific service line business rules for admitting. IToCH's need to check that this has happened before they can close a referral



### 2. Other (reference documentation)

Strata Service Provider Training Guides CITS training portal - Strata

#### 3. Requirements

Referrers describe needs (not prescribe) in referral.

- **2**ntegrated Transfer of Care Hub (IToCH) triages referrals and determines the outcome with the aim of ensuring person centred and most effective care and support.
- **B**ToCH refers to downstream Strata receiver service(s) even if the service does not have capacity.

Exception – 2-hour Urgent Community Response referrals – where the IToCH will call the receiver service to see if they have capacity to respond and then Admits the referral and adds details to RiO (see Managing UCR's in Strata SOP).

#### 4. Procedure

#### 4.1. When to Accept

Accept referrals as soon as you have confirmed it meets service criteria and are ready to start triaging and sourcing care.

Strata receiver service holds open (Accepted) referrals on waiting list.

The only exception to this is for the Community Hospital Allocation Team (CHAT) who will Accept only when they have matched person to community hospital AND completed the CHAT information questions on the triage tab.

#### 4.2. When to Deny

You can only deny a referral if it does NOT meet your service criteria.

Do not Deny a referral if

- No capacity instead use RFI to inform the IToCH of expected date when care/support could be met.
- Made aware that another service provider will be/is delivering the care/support in this instance, use RFI to inform the IToCH who can cancel the referral to you.
- You receive a referral for someone already on your caseload and care / support requested is already in situ please notify IToCH by creating a comment and Admit it.

Only referrers and IToCH's can cancel referrals to receiver services i.e. the receiving service cannot delete a referral. The referral will remain on their work queue until notified by the referrer/IToCH that referral is no longer needed.

#### 4.3. When to Admit

General rule - Admit referral when the person has been transferred to care setting and care/support has commenced. Appendix 1 details specific service line rules.

### 4.4. When to use Request for Information (RFI)

Strata receiver service will use the RFI to:

- request information needed before care or support can commence
- inform the IToCH and referrer when they can deliver care / support (making the service offer)

#### 4.5. When to add Comments

Comments should be used judiciously and only to provide essential and useful status updates.

Generally, Requests for Information, not comments, should be used where action is required.

As referrals can be seen by many people in different organisations and roles, please use the following format at the start of your comment:

**FAO**: Specify who you want to note the comment e.g. Ward, GP, IToCH, receiver service

**Priority** – Specify Urgent or Routine

**For Information/Action**: Specify whether you require a response. Generally, comments should be used to provide status updates. Consider using Request For Information if action is required.

**My role**: Specify your job title. Your name and timestamp will automatically appear above the comment so does not need to be added.

#### **Comment text follows: XXXX**

Example

FAO: IToCH

Priority: Routine For information My role: IWS Allocated Worker

Assessment complete – Discharge date planned for XDATEX

# 4.6. Reviewing your Accepted referrals for updates and Comments

Receiver services should monitor (recommended daily) their open referrals for any updates or comments from the referrer or IToCH. Updates / comments may include:

- Referrer or IToCH responding to RFI's
- Referral updates added i.e. if another service can provide bridging support short term or additional care / support requests
- Updates re: discharge dates / delays to discharge /change to medically fit status

There may be comments from the IToCH or referrer requesting updates from the receiver service (i.e. if a referral can be Admitted, or requesting confirmation that care / support is scheduled)

**Appendix 1** Strata receiver services rules to Admit (close) referrals for different referral types.

| Receiver<br>Services                               | Hospital Discharge   | Non-urgent routine / Falls<br>Assessment  | ASC Assessment / Carers<br>Assessment   |
|--|--|---|---|
| Community<br>Nursing (inc.<br>Matrons)             | Admit when visit is scheduled on RiO diary and caseload  | Admit when visit is scheduled on RiO diary and caseload                                 | Not applicable  |
| Homefirst  | Admit when person has been discharged from hospital and first seen by service                        | Admit when first seen   | Not applicable  |
| CRT  | Admit when referral is added to RIO caseload   | Admit when referral is added to RIO caseload  | Not applicable  |
| Community<br>Gateway                               | Admit when first seen  | Admit when first seen   | Not applicable  |
| Community<br>Hospital<br>Allocation<br>Team (CHAT) | Admit when CHAT have confirmed that the person has arrived at the matched community hospital.        | Not applicable  | Not applicable  |
| Dementia<br>Liaison Service                        | Admit when person has been discharged from hospital and is in next care setting                      | Not applicable  | Not applicable  |
| STEPS  | Admit when first seen  | Admit when first seen   | Not applicable  |
| IWS  | Hospital Discharge – Allocated worker will<br>ADMIT referral when the person has been<br>discharged. | IWS Admin will Admit once added to<br>Mosaic. It then becomes an IWS Mosaic<br>process. | IWS Admin will Admit ASC<br>Assessment for people in<br>Community once added to MOSAIC<br>and with Access team.<br>IWS Admin will ADMIT Carers<br>Assessment as soon as sent to<br>Carers Service |
| Virtual Wards                                      | Admit when first seen and person has received equipment  | Admit when first seen and person has received equipment                                 | Not applicable  |
| Specialist Falls<br>Service                        | Admit when first seen  | Admit when first seen   | Not applicable  |
| ICB Continuing<br>Health Care                      | Admit when assessment commenced  | Not applicable  | Not applicable  |

#### Online URL: <u>https://elearning.cornwall.nhs.uk/site/kb/article.php?id=386</u>