

Ref: 1916 Version 2

Determining Suitability for a Telephone Review/ Assessment

Date: 15 June 2018

Partners in Care

Document Ratification

This is a controlled document and should not be altered in any way without the express permission of the author or their representative.

Please note this document is only valid from the date approved below, and checks should be made that it is the most up to date version available.

Document title:	Telephone Review and Assessment Policy		
Purpose of document:	To provide guidance and structure around the use and implications of telephone reviews and assessments.		
Date of issue:	15 June 2018	Next review date:	15 June 2021
Version:	2	Last review date:	May 2018
Author:	Deputy Director of Adult Social Care Services		
Directorate:	Professional Practice		
Committee(s) approving the document:	The Care & Clinical Policy Sub Group		
Date approved:	6 June 2018		
Links or overlaps with other policies:	Proportionate Approach to Health and Social Care Choice and Control: Fair Access to Care Services Key Worker Framework Risk Enablement		

	<i>Please select</i>	
	Yes	No
Does this document have training implications? <i>If yes please state:</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Staff should receive training on the use of the scripts developed.		
Does this document have financial implications? <i>If yes please state:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is this document a direct replacement for another? <i>If yes please state which documents are being replaced:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Document Amendment History

Date	Version no.	Amendment summary	Completed by:
22 April 2014	1.1	Feedback from C&CP Group	
1 April 2016	2	Amendments reflect implementation of Care Act 2014	Deputy Director of Adult Social Services
29 April 2016	2	Published on ICON	
15 June 2018	2	Date change	Deputy Director of Adult Social Services

Quality Impact Assessment (QIA)

Who may be affected by this document?	Please select			
	Patient / Service Users	<input checked="" type="checkbox"/>	Visitors / Relatives	<input type="checkbox"/>
	General Public	<input checked="" type="checkbox"/>	Voluntary / Community Groups	<input checked="" type="checkbox"/>
	Trade Unions	<input type="checkbox"/>	GPs	<input type="checkbox"/>
	NHS Organisations	<input type="checkbox"/>	Police	<input type="checkbox"/>
	Councils	<input type="checkbox"/>	Carers	<input checked="" type="checkbox"/>
	Staff	<input type="checkbox"/>	Other Statutory Agencies	<input type="checkbox"/>
	Others (please state):			

Does this document require a service redesign, or substantial amendments to an existing process?	<input type="checkbox"/>
<i>If you answer yes to this question, please complete a full Quality Impact Assessment.</i>	

Are there concerns that the document could adversely impact on people and aspects of the Trust under one of the nine strands of diversity?	Age	<input type="checkbox"/>	Disability	<input type="checkbox"/>
	Gender re-assignment	<input type="checkbox"/>	Marriage and Civil Partnership	<input type="checkbox"/>
	Pregnancy and maternity	<input type="checkbox"/>	Race, including nationality and ethnicity	<input type="checkbox"/>
	Religion or Belief	<input type="checkbox"/>	Sex	<input type="checkbox"/>
	Sexual orientation	<input type="checkbox"/>		

If you answer yes to any of these strands, please complete a full Quality Impact Assessment.

If applicable, what action has been taken to mitigate any concerns?	
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Who have you consulted with in the creation of this document? <i>Note - It may not be sufficient to just speak to other health & social care professionals.</i>	Patients / Service Users	<input checked="" type="checkbox"/>	Visitors / Relatives	<input type="checkbox"/>
	General Public	<input type="checkbox"/>	Voluntary / Community Groups	<input type="checkbox"/>
	Trade Unions	<input type="checkbox"/>	GPs	<input type="checkbox"/>
	NHS Organisations	<input type="checkbox"/>	Police	<input type="checkbox"/>
	Councils	<input checked="" type="checkbox"/>	Carers	<input type="checkbox"/>
	Staff	<input checked="" type="checkbox"/>	Other Statutory Agencies	<input type="checkbox"/>
	Details (please state):			

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1 Introduction

- 1.1 This policy sets out the criteria for Social Care staff to follow when determining the most appropriate format in which a social care review/assessment should be undertaken i.e. over the telephone or face-to-face.

2 Statement/Objective

- 2.1 In line with both national legislation (primarily The Care Act 2014 and The Mental Capacity Act 2005) and local policy, Torbay and South Devon NHS Foundation Trust (TSDFT), hereafter referred to as “the Trust”, seeks to ensure that an appropriate and proportionate response is taken in the delivery of all social care reviews/assessments.
- 2.2 This policy works in conjunction to the *Proportionate Approach to Health and Social Care Policy* in identifying where face-to-face contact would usually be required.

3 Determining Suitability for Telephone Review and Assessment

- 3.1 Face-to-face contact will normally be required where it is deemed to be unsuitable for an individual to have their needs reviewed/assessed over the telephone.
- 3.2 A face-to-face review or assessment will usually be necessary under the following circumstances:
- Where a service user is known to have dementia, confusion or a significant impairment to their mental capacity;
 - Where a service user, by virtue of severe Learning Disabilities, is unable to communicate their needs for his or her self;

- Where an individual is at High Risk in line with the *Proportionate Approach to Health and Social Care Policy* definition;

“Individuals who are in very unstable situations and who are at high risk of harm. There are likely to be Safeguarding Adult concerns, or frequent crises and frequent changes to the support plan to keep the individual safe. There will be an allocated keyworker and face to face contact will normally be required.”

- If there is a substantiated reason for concern that an individual is showing indications of serious self neglect;
- If a service user refuses to have their support needs reviewed/assessed over the telephone and specifically requests face-to-face contact; or
- Due to a severe auditory disability, an individual is unable to converse over the telephone.

4 Roles & Responsibilities

- 4.1 Upon undertaking a telephone review/assessment, the keyworker must ensure that any necessary documentation is completed and outcomes are updated and recorded within PARIS as per the standard process when carrying out a face to face review/assessment. The keyworker must clearly record in the client record that the review/reassessment was undertaken by telephone.
- 4.2 It will be the duty of the Zone Managers to ensure that staff expected to carry out reviews/assessments over the telephone will have been given adequate training.
- 4.3 It is our legal duty to carry out a review of an individual’s care needs at least annually. Prior to undertaking a telephone review/assessment, the service user’s records will be collated (from PARIS, GP records and/or Agency notes) to determine whether or not this format of review/assessment is suitable in line with the guidance set out by this policy.

5 Monitoring, Auditing, Reviewing & Evaluation

- 5.1 The number of appropriate cases that have received a review/assessment over the telephone will be closely monitored and investigated where a face-to-face contact has been delivered in place of this.
- 5.2 Should any additional factors be identified in undertaking the review/assessment deeming it inappropriate to proceed over the telephone, they should be highlighted to and verified by the Practice Supervisor who will raise this with the policy holder. The policy holder will be responsible for making any necessary amendments to this document.

6 Distribution

- 6.1 All staff directly delivering or contributing to the delivery of social care services.

The Mental Capacity Act 2005

The Mental Capacity Act provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to make preparations for a time when they lack capacity in the future. It sets out who can take decisions, in which situations, and how they should go about this. It covers a wide range of decision making from health and welfare decisions to finance and property decisions

Enshrined in the Mental Capacity Act is the principle that people must be assumed to have capacity unless it is established that they do not. This is an important aspect of law that all health and social care practitioners must implement when proposing to undertake any act in connection with care and treatment that requires consent. In circumstances where there is an element of doubt about a person's ability to make a decision due to 'an impairment of or disturbance in the functioning of the mind or brain' the practitioner must implement the Mental Capacity Act.

The legal framework provided by the Mental Capacity Act 2005 is supported by a Code of Practice, which provides guidance and information about how the Act works in practice. The Code of Practice has statutory force which means that health and social care practitioners have a legal duty to have regard to it when working with or caring for adults who may lack capacity to make decisions for themselves.

“The Act is intended to assist and support people who may lack capacity and to discourage anyone who is involved in caring for someone who lacks capacity from being overly restrictive or controlling. It aims to balance an individual's right to make decisions for themselves with their right to be protected from harm if they lack the capacity to make decisions to protect themselves”. (3)

All Trust workers can access the Code of Practice, Mental Capacity Act 2005 Policy, Mental Capacity Act 2005 Practice Guidance, information booklets and all assessment, checklists and Independent Mental Capacity Advocate referral forms on iCare

http://icare/Operations/mental_capacity_act/Pages/default.aspx

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Rapid Equality Impact Assessment *(for use when writing policies and procedures)*

Policy Title (and number)		Determining Suitability for a Telephone review/Assessment			
Policy Author		Deputy Director of Adult Social Services			
Version and Date (of EIA)		V1 01/03/16			
Associated documents (if applicable)		None			
RELEVANCE: Does the aim/purpose of the policy relate to each of the aims of the Public Sector Equality Duty?					
· Eliminate unlawful discrimination or other conduct prohibited by the Equality Act 2010					Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
· Advance equality of opportunity between people from different groups					Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
· Foster good relations between people from different groups					Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
SIGNIFICANCE AND IMPACT: Consider the nature and extent of the impact, not the number of people affected.					
Does the policy affect service users, employees or the wider community? (if no, proceed to sign off)					Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the policy affect service delivery or business processes?					Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the policy relate to an area with known inequalities (deprivation/unemployed/homeless)?					Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
EQUALITY ANALYSIS: How well do people from protected groups fare in relation to the general population?					
<i>PLEASE NOTE: Any 'Yes' answers may trigger a full EIA and must be referred to the equality leads below</i>					
Is it likely that the policy/procedure could treat people from protected groups less favorably than the general population? (see below)					
Age	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Disability	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Sexual Orientation	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Race	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Gender	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Religion/Belief (non)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Gender Reassignment	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Pregnancy/ Maternity	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Marriage/ Civil Partnership	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Is it likely that the policy/procedure could affect particular 'Inclusion Health' groups less favorably than the general population? (substance misuse; teenage mums; carers; travellers; homeless; convictions; social isolation; refugees)					Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Please provide details for each protected group where you have indicated 'Yes'.					
This is to ensure people with disabilities such as Learning Disability and Dementia are assessed properly					
What if any, is the potential for interference with individual human rights? (consider the FREDA principles of Fairness/ Respect/ Equality/ Dignity/ Autonomy)					
NO					
RESEARCH AND CONSULTATION					
What is the reason for writing this policy? (What evidence/legislation is there?)					
To ensure assessment processes are robust					
Who was consulted when drafting this policy/procedure? What were the recommendations/suggestions?					
Staff					
ACTION PLAN: Please list all actions identified to address any impacts					
Action				Person responsible	Completion date
None needed					
AUTHORISATION					
Name of person completing the form	Deputy Director of Adult Social Services		Signature		
Validated by (line manager)	NOT NEEDED		Signature		

Clinical and Non-Clinical Policies – New Data Protection Regulation (NDPR)

Torbay and South Devon NHS Foundation Trust (TSDFT) has a commitment to ensure that all policies and procedures developed act in accordance with all relevant data protection regulations and guidance. This policy has been designed with the EU New Data Protection Regulation (NDPR) in mind and therefore provides the reader with assurance of effective information governance practice.

NDPR intends to strengthen and unify data protection for all persons; consequently, the rights of individuals have changed. It is assured that these rights have been considered throughout the development of this policy.

Furthermore, NDPR requires that the Trust is open and transparent with its personal identifiable processing activities and this has a considerable effect on the way TSDFT holds, uses, and shares personal identifiable data. The most effective way of being open is through data mapping. Data mapping for NDPR was initially undertaken in November 2017 and must be completed on a triannual (every 3 years) basis to maintain compliance. This policy supports the data mapping requirement of the NDPR.

For more information:

- Contact the Data Access and Disclosure Office on dataprotection.tsdf@nhs.net,
- See TSDFT's [Data Protection & Access Policy](#),
- Visit our [GDPR](#) page on ICON.