



## The Police Treatment Centres Clinical Admission Policy

<b>Policy Number:</b>		<b>Responsible Manager:</b>	CEO (Chief Executive Officer)
<b>Date of approval:</b>	<b>Board of Trustees:</b> 21 November 2008 Effective: 1 January 2009 Revised 1 January 2010 13 May 2010 1 January 2011 1 January 2012 <b>Board of Trustees:</b> <b>Approved:</b> 8 May 2014 7 May 2015 Updated 1 January 2016 6 January 2017 6 March 2017 <b>FHRC:</b> 26 April 2018 <b>Board of Trustees:</b> 16 May 2019 <b>Reviewed:</b> 5 October 2020 <b>Updated:</b> 20 January 2022 26 October 2022 7 November 2022 19 December 2023	<b>Policy Review:</b>	Annually, <b>OR</b> , where legislative or other issues prompt an earlier review

### POLICY STATEMENT

1. This policy sets out the clinical admission assessment criteria and process that have been developed so that the Charity understands the circumstances and needs of the applicant for admission and can decide, organise, and schedule appropriate treatment to support the applicant in a return to better health and wellbeing.
2. This policy should be read in conjunction with The Eligibility Policy.

## **PURPOSE**

3. The purpose of this policy is:

- To provide a framework and process to assist clinical decision making in respect of an application for admission for treatment.
- To provide a framework and process for the potential provision of clinical reports following treatment.

## **LEGAL SAFEGUARD**

4. The Treatment Centres, at St Andrews and Castlebrae, are not registered Care Homes within the meaning of the Care Standards Acts of England & Wales, Scotland and Northern Ireland. Our centres are not approved nor capable of providing acute, long term or intermediate care.

5. All decisions on admission or treatment will always be based on the merits of each individual case and admission prioritised on the need for treatment.

## **RESPONSIBILITY FOR THE APPLICATION OF THE POLICY**

6. The responsibility for the application of the policy will be that of the Chief Executive, this can be devolved to the Senior Management Team. The policy has been approved by the Board of Trustees in accordance with the Charity's Articles of Association.

## **CLINICAL CRITERIA**

7. This policy will be applied pragmatically and with sympathetic consideration of all the issues involved in any case.

8. All decisions on admission for treatment will always be based on the individual merits of each case and admission prioritised on the need for treatment. Factors that are considered for admission and ensuring safety for patients to receive intensive treatment include:

- Criteria based upon the 'Activities of Daily Living' (ADL); (Roper, Logan & Tierney),
- Criteria based around patient safety and the use of the Charity's facilities ,
- Optimal post operative/post-secondary and primary care clinical intervention time periods,
- Issues of nursing and personal care in relation to persons who are, or have been:
  - Suffering from an illness
  - Experiencing mental health issues
  - Disabled or infirm
  - Dependent on alcohol and/or drugs

9. The Charity's provision is intended to be by way of short intensive treatment with the aim of helping the individual to make progress in resolving or alleviating a treatable condition.

10. Applications for admission must be supported by evidence of a clinical need that can be addressed by the Clinical Teams of the Charity and a positive demonstrable clinical outcome achieved.

11. No decision will be made in respect of any 'significant and unique' case that will breach the registration requirements of the relevant Care Standards Acts. Any decision in respect of a 'significant and unique case,' will not form a precedent for that individual or any other application for admission.

12. Where the applicant is a 'carer' for a dependant child or dependant adult, sympathetic consideration will be given to attendance in appropriate Centre accommodation whilst the applicant themselves receives treatment. A Companion's Application Form should be completed.

13. At the conclusion of a period of treatment, if the Clinical Team are of the opinion that no further treatment is likely to be beneficial, consideration may be given to not approving a further admission for the same condition as no practical long-term benefit can be achieved through use of our resources.

14. Individuals who make application for admission and who are considered for treatment should:

- Normally be capable of independently undertaking the 'Activities of Daily Living' (ADL) including self-care and self-medication however,
- Where the circumstances of the applicant for admission do not meet this criterion, applications will be assessed as a 'significant and unique' case on its own individual merits in relation to the level of support an individual may need with 'Activities of Daily Living (ADL), self-care and self-medication,
- Account will be taken of the support an individual could provide themselves e.g. accompanied by a 'companion' (i.e., spouse/partner, son/daughter, friend).

15. The Charity's priority as laid down in the Articles of Association, is that serving donors will receive priority for treatment.

16. To be eligible for treatment, the applicant must be a current donor to the charity (or be prepared to pay for treatment as laid down in the Eligibility Policy).

17. There must be evidence that treatment will deliver a positive clinical benefit.

18. All applications for treatment must be submitted on the Charity's current application forms. The most up to date versions can be found on the [PTC website](#).

19. Applications for a further admission should not normally be made until at least 12 months has passed since the last admission period, unless one of the following conditions applies:

- The PTC clinical assessment at the conclusion of that previous admission recommends an earlier admission, OR,
- There is a notable change in the current condition/circumstances which merits an earlier admission, OR,

- A new circumstance or condition has arisen that would prompt the consideration of an earlier admission.

20. Where the PTC clinical assessment at the conclusion of a period of admission recommends no further clinical treatment is necessary for the same condition (particularly after several periods of admissions), consideration may be given to:

- Whether there is an ongoing clinical need for non-physio treatment, OR,
- Not approving a further admission because there is no further practical or long-term benefit that would be achieved through use of the Charity's resources. OR,
- Whether our clinicians are still able to provide advice, or the case is beyond the clinical scope of the Charity.

## **ADMISSIONS**

21. The Charity's Treatment Centres are open for treatment throughout the year excluding the 2-week period encompassing Christmas and New Year. Any closure affecting treatment will be circulated to donors via our website and social media channels.

22. Applicants for residential treatment will receive prior written notice of their admission, their expected date/time of arrival and duration of their treatment programme, generally two weeks for serving and one week for retired donors.

23. For serving donors, with clinical agreement, the residential physiotherapy programme can be split into separate weeks or condensed into a single week depending on the unique clinical case.

24. For all donors, with clinical agreement, the residential physiotherapy programme can be attended as a day patient if the patient lives within an hour radius of either centre and the commute to and from the centre will not exacerbate their issue. (This is ideally for Physiotherapy patients only but will be considered in unique circumstances for the PWP (Psychological Wellbeing Programme).)

25. All patients attending a residential programme require to undergo a nursing assessment prior to commencement of treatment.

26. A Sunday arrival prior to a period of admission, must be requested and agreed in advance. This will normally only be considered based on an applicant's 'significant and unique' personal or travel circumstances.

27. Patients normally vacate their bedroom by 10.30 a.m. on the day of departure.

28. Where an assessment at the conclusion of a residential stay for physiotherapy recommends a readmission (earlier than a gap of 12 months) to optimise the benefits of treatment and this is approved by either the head physiotherapist or HOCS, this further period will normally be from Monday to Friday (four nights' duration).

29. Where the date offered for admission becomes unsuitable for any reason, the applicant should contact the PTC, in writing or by email, at the earliest opportunity to have this rearranged.

30. The PTC recognises that reasons for cancellation are often beyond the control of the individual however, cancellation places an additional pressure on the Charity and depending on the notice, often delays the treatment of others. To reduce the number of requests to change admission dates, the Charity will operate a policy of only allowing applicants to change their dates on **two** occasions after which the booking for treatment will be cancelled and a new application will be required.

31. Applicants are personally responsible for informing the PTC, in writing (email will suffice) of their need to cancel or delay their allocated admission. Where this occurs, we encourage applicants to provide alternative dates within six weeks of the allocated admission.

32. When the next agreed admission date that the PTC can offer is more than 12 weeks since the date of the original application, further enquiries will normally be undertaken to assess the current clinical need to attend for treatment. These further enquiries may include the provision of advice regarding other treatment or activities which could be undertaken in the intervening period before any potential admission.

33. In some cases, where there is an extended period before the next admission date, it may be necessary to require a further application to be submitted with up-to-date information of the current clinical condition and treatment need.

34. Applicants for non-residential (face to face or virtual) outpatient physiotherapy treatment (face to face is at Castlebrae only) will receive prior written notice of their admission, their treatment programme will be a maximum of six appointments unless further sessions are approved by the Head Physiotherapist.

35. A donor cannot reapply for treatment for the same issue within 12 months unless they have had a significant clinical intervention or change to warrant more treatment.

## **APPEALS**

36. An applicant for admission who believes that they have been unfairly treated under this policy, or their representative, should in the first instance raise the matter, normally in writing (including email), with the Chief Executive. Should the matter not be resolved by the Chief Executive, the applicant or their representative, should bring the matter to the attention, normally in writing to the Chair of the Board of Trustees within 30 days of any initial decision to refuse admission for treatment.

## **PROVISION OF CLINICAL REPORT**

37. The Charity will not make any clinical assessment to assess the level of fitness for duty of any individual or their functional capability. This is the legal responsibility of the employer.

38. The Charity will only provide clinical reports in relation to the nature and assessment of the condition of the Patient upon admission; treatment provision then accessed and undertaken, and the outcomes of that treatment e.g., increased mobility, reduced pain etc.

39. At the conclusion of a programme of treatment, a brief clinical report **may** be made available to the individual or, with their consent, to a third party.

## COMPANIONS

40. Where an applicant believes that they will need the support of a Companion to support them during their stay at the PTC, they should discuss their needs with a PTC Clinician prior to applying for treatment to establish if these are achievable. If the PTC Clinician agrees, the applicant should submit a [Companion's Application Form](#) (available on PTC Website).

41. Companion's will be charged a fee set by the Charity to cover the cost of food, utilities etc. This charge must be paid in advance or on the day of admission.

42. Where the Patient or Companion is in receipt of Carer's allowance, they will be exempt from this charge. In 'significant and unique cases' e.g., severe financial hardship, this charge may be waived at the Chief Executive's discretion. Written evidence (including via e-mail) of the significant and unique reason, must be supplied in advance before admission to support the application to waive the Companion's charge.

43. Companions are permitted to use the PTC Gym or Swimming pools during their stay at the Charity's discretion and where safe to do so. The health questionnaire attached to the companion application form must be completed. This will be assessed by the Clinical Team to authorise the use of PTC Gym and/or Swimming Pools. Patient access to these facilities will always be prioritised.

## COTTAGES

44. Each centre has cottages which may be available to assist in accommodating patients who have a family or personal circumstance where 'family' or 'dog friendly' (only at Castlebrae) accommodation would support their ability to attend for treatment e.g. dependant/disabled member of the family.

45. Admission to the cottages should be organised by the applicant with the centre they have applied to attend, or with the admissions team.

46. Stays in the cottages will normally be for one week.

47. Patients using the cottages will be provided with additional information, including that this is normally on a self-catering basis, and they are responsible for any additional cleaning costs or damages caused by misuse.