



## The Police Treatment Centres

# Clinical Admission Criteria & Clinical Reporting Policy

<b>Responsible Manager:</b>		Chief Executive
<b>Issue date:</b>	<b>Board of Trustees: Approved:</b> 21 November 2008. <b>Effective:</b> 1 January 2009 <b>Revised:</b> 1 January 2011 1 January 2012 1 January 2014 <b>Board of Trustees: Approved:</b> 8 May 2014 5 February 2015 FPSC 23 April 2015 <b>Board of Trustees: Approved</b> 16 May 2019 <b>Revised:</b> 13 October 2020	<b>Policy Review:</b> Three years from date of issue, <b>OR</b> , where legislative or other issues prompt an earlier review

### Policy Statement

This policy sets out the clinical admission assessment criteria and process which has 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.

### Purpose

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

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. Consequently, the Centres are not approved nor capable of providing acute, long term or intermediate care.

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 Application of the Policy**

The responsibility for the application of the policy will be that of the Chief Executive. 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 (including email), of the Chairman of the Board of Trustees within 30 days of any initial decision to refuse admission for treatment.

There are several factors to consider in developing a framework to assist in making decisions about admission. These include:

- Criteria based upon the 'Activities of Daily Living' (ADL); (Roper, Logan & Tierney).
- Criteria based around Patient safety and the use of PTC facilities
- 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
- Musculo-skeletal acute and chronic circumstances:
  - Acute: early admission can often be beneficial to treatment outcome
  - Sub-acute: generally, no problem in considering an application for admission
  - Chronic: normally no long term resolution to the condition, there can be varying degrees of success in rehabilitation

## **Clinical Criteria: Admission – General Conditions<sup>1</sup>**

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.

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

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- <sup>1</sup> *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.*
  - *Where the applicant themselves is a 'carer' for a dependent child or dependent adult, sympathetic consideration will be given to attendance in appropriate Centre accommodation whilst the applicant themselves receives treatment. Companions: A Companion's Application Form should be completed.*

At the conclusion of a period of admission at the PTCs, if the opinion of the Clinical Team is that no further treatment is likely to be beneficial for the same condition, particularly after several admissions. Consideration may be given to not approving a further admission as no practical long term benefit can be achieved through use of our resources.

Individuals (see the PTC Eligibility Policy) who make application for admission and who are considered for Physiotherapy, Nursing treatment and support, as either a residential IN-patient or as an OUT-patient should:

- a) Normally be capable of independently undertaking the 'Activities of Daily Living' (ADL) including self-care and self-medication however,
- b). Where the circumstances of the applicant for admission do not meet the criteria of a) above:
  - Each and every application 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' e.g. spouse/partner, son/daughter, friend.

## **Admission Criteria**

### **Overall Principle:**

The Charity's priority as laid down in the Articles of Association, is that Serving Police Officers will receive priority for treatment. The PTC has the discretion, where capacity (occupancy, treatment and financial) allows, to consider applications from retired Police Officers who request admission for treatment.

The definitions of 'Police Officer' and 'Retired Police Officer' are contained within the PTC Eligibility Policy, which is at the beginning of the User Guide. In order to be eligible for treatment, both Serving and Retired Police Officers must be current donors to the charity (or be prepared to pay for treatment as laid down in the PTC Cost and Charges Schedule). There must be evidence that a stay at the PTC will deliver a positive clinical benefit.

### **General Conditions**

All applications for treatment, or to be accompanied by a 'companion', must be submitted on the Charity's current application forms. The most up to date versions can be found on the PTC website ([www.thepolicetreatmentcentres.org](http://www.thepolicetreatmentcentres.org)).

Applications for admission must be supported by evidence of a clinical need that can be addressed by the Charity's treatment programme.

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 significant 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.

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 it appears that there is no further practical or long term benefit that would be achieved through use of the Charity's resources.
- Whether the PTC Clinicians are still able to provide advice on specific cases and questions.

### **General conditions - Periods of Admission**

The Charity's Treatment Centres are open for treatment throughout the year excluding the period in which Christmas and New Year fall. On all other Bank Holidays, the Centres are open for admission and treatment.

Admission to the Centres for treatment will normally be for a one or two week duration although an extended period (normally of a further week) may be advised by a Physiotherapist or Nurse and will be considered where appropriate and balanced against the occupancy levels.

Provision for non-residential treatment as a Day-patient may also be considered in appropriate circumstances e.g. proximity of home address, or temporary residence and travel time to and from either Centre

### **General Conditions – Remote Physiotherapy Outpatients Service:**

Our Remote Outpatient Physiotherapy Appointments give you access to the same high standard of expert advice and treatment with the benefit, flexibility and comfort of carrying this out in your own home.

We can provide up to 6 sessions of remote treatment where necessary, with further sessions at the discretion of the Head Physiotherapist.

### **General conditions - Serving Officers**

The period of admission for a Serving Officer is normally two weeks during which it is considered that the maximum benefit from treatment can be achieved. Admission will normally take place on a Monday although bedrooms may not be ready for occupation before 1200. Treatment assessments may commence from 0930 and where this is the case, Patients should ensure that they arrive at the Centre promptly.

Personal circumstances or duty requirements may mean that a one-week admission for treatment is more beneficial than no admission at all. If so, this will normally be Monday to Friday only (four nights' duration), however, consideration **may** be given to a Sunday admission with arrival after 1430.

Where an assessment at the conclusion of a period of treatment recommends a further (and earlier than a gap of 12 months) admission for treatment to optimise the benefits of treatment, this further period will normally be from Monday to Friday (four nights' duration).

A Sunday arrival prior to a period of admission, will normally only be offered where an individual's 'significant and unique' personal or travel circumstances merit consideration of such. Any requests to this effect should be agreed in advance by the PTC.

Patients must vacate their bedroom by 1030 on the day of departure (lunch may be provided on request before a later departure from the Centre itself).

### **General conditions – Retired Officers**

Retired Officers who apply for admission and who meet the clinical criteria, will normally be offered a one-week period of admission.

The one-week period of admission will normally be:

- Sunday arrival – not before 1430.
- Friday departure - vacating the room by 1030 (lunch may be provided on request before a later departure from the Centre itself).

Retired Officers will be required to attend a nursing assessment on the Sunday of their arrival in order to ensure that they are ready to commence their treatment plan promptly on the following Monday.

A Monday arrival and departure will only be considered where there are 'significant and unique' circumstances present and each case will be considered on its individual merits.

Where an assessment at the conclusion of a period of treatment recommends a further (and earlier than the gap of 12 months) admission for treatment to optimise the benefits of treatment, this further period will normally be Monday to Friday (four nights') duration.

Retired Officers are advised that the priority for treatment at the PTC in line with our Articles of Association, will be for Serving Officers.

Retired Officers' application forms for treatment will be assessed on the basis of what practical and long-term clinical benefit may be achieved through a stay at the PTC. Where there is little evidence that this is achievable, other applications are likely to be rejected or assigned a lower loading priority.

### **Cancellation and Changes of Admission Date**

Following the allocation of an admission date, there may be occasions where this date becomes unsuitable for a number of reasons.

Currently around 40% of all dates offered are changed for variety of reasons causing additional pressure on the resources of the Charity. The PTC recognises that these reasons are often beyond the control of individual Patients. In order to reduce the

number of request to change admission dates, the Charity will operate a policy of only allowing Officers to change their dates on two occasions after which the application for treatment will be cancelled and a new application form will be required. This will assist in reducing the potential loss of treatment opportunities for other applicants and ensure that the PTC runs at full capacity for the wider benefit of all.

Regrettably, not all notice of cancellations are forwarded to the PTC which sometimes means that the first notice of a cancellation is when a patient fails to attend for admission on the allocated date. This results in an unexpected vacancy which, had notice of cancellation been received, could have been allocated to another applicant potentially allowing an earlier admission for that individual.

### **Notification of Cancellation of a Stay at the PTC – Individual Responsibility**

Where Patients are forced to cancel or delay their allocated admission date to the PTC, they are personally responsible for notifying the PTC of this change directly and should seek confirmation from the PTC that their cancellation request has been received and where appropriate re-booked on to an alternative admission date. Individuals are also encouraged to further advise any other dates that they might prefer or wish to avoid over the following 12 weeks when seeking to re-book an admission date.

### **Timeliness of Admission Date**

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.

In some cases, where there is an extended period of time 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. Any multiple cancellations or requests for delayed admission, may be referred back to the Individual's Federation for supporting evidence.

### **Companions**

If a prospective Patient believes that they will need the support of a Companion to support them during their stay at the PTC, they are encouraged to read the relevant section covering Companions in the PTC Clinical Criteria and to then discuss their needs with a PTC Clinician as soon as possible. Following this discussion, the prospective Patient should submit a Companion's Application Form (available on the PTC website).

### **Companion's Charge**

Individuals should be aware that the PTC now levies a Companion Charge of £150 per week to cover the cost of food, utilities etc. 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 the PTC to support the application to waive the Companion's charge.

Individuals should be aware that if they do bring a Companion, they will not be permitted to use the PTC Gym or Swimming pools during their stay, which are exclusively reserved for Patient use.

The Companion's charge must be paid in advance of admission e.g. by cheque or credit card payment.

## **Cottages**

There are cottages at each Centre which may be available to assist in accommodating Patients who have a family or personal circumstance where 'family' accommodation would support their ability to attend for treatment e.g. resident dependant/disabled member of the family:

- Admission will normally be for one week:
  - Monday to Sunday - arrival not before 1430.
  - Sunday departure - vacating the cottage by 1030.

## **Provision of Clinical Reports**

The Charity will not make any clinical assessment against standardised criteria to assess the level of fitness for duty of any individual Police Officer with regard to their functional capability. This is the legal responsibility of the Officer's employer.

The only clinical reports that will be provided by the Charity, will be 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.

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.

**Ends**

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