

1.0 Policy

The Children's Sunshine Home, operating as LauraLynn, Ireland's Children's Hospice (the Service) will ensure that admissions to the service are timely, determined on the basis of fair and transparent criteria and placements are based on written agreements. (HIQA National Standards for Residential Services for Children & Adults with Disability, 2013)

2.0 Scope

2.1 This policy applies to all referrals to the Services Disability Residential Respite Service.

3.0 Definitions

- 3.1 *Admission* - refers to the enrolment of children who meet the eligibility criteria, for the Services Children's Disability Service
- 3.2 *Disability Adult Residential Service* - provides nurse led, high support residential care to 7 adults with profound intellectual and physical disabilities.
- 3.3 *Disability Children's Residential Service* - provides nurse led high support residential care to 3 children with intellectual, physical disabilities and complex care needs
- 3.4 *Disability Children's Respite Service* - provides nurse led, respite care to children with profound multiple learning and physical disabilities and complex healthcare needs
- 3.5 *Routine Respite Breaks*: Routine Respite breaks are planned throughout the year, providing out of home care for the child in order to enable the parents/carer to take a short break, a holiday or a rest.
- 3.6 *Crisis Respite*: Crisis Care is the provision of immediate respite for the child in the event of an emergency within their family where no other care options are available, i.e. main carer becoming unwell..
- 3.7 The *Disability Admission, Discharge and Transfer (ADT) Team* is the decision making body for all referrals. Its membership includes:
 - Consultant Paediatrician/GP
 - Director of Nursing/Person in Charge
 - Clinical Nurse Manager 1 – Children's Disability Service
 - Physiotherapy Manager

4.0 Responsibilities

4.1 This policy is implemented through the Disability Services ADT Team.

5.1 Eligibility Criteria

- 5.1 The Adult Disability Residential Service does not accept referrals for adults over the age of 18 years for residential or respite service.
- 5.2 The Children's Disability Residential Service does not accept referrals for residential care for children.
- 5.3 The Children's Disability Respite Service accepts referrals for respite for children who:
 - Who are aged between 1 and 17 years of age (up to last day of 17th year) - young people referred at 16 years of age and over are considered individually depending on what transition plans for adult services are already in place
 - Have profound learning difficulties, accompanying physical disabilities, complex medical and healthcare needs and may have additional sensory impairments.
 - Who are vulnerable to acute changes in health which necessitates 24-hour care
 - Whose complex needs require them to be managed by a registered nurse (i.e. Gastrostomy Tube Feeding, uncontrolled/unstable Epilepsy, unstable respiratory conditions)
 - Who are registered and supported by a Primary Disability Service

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5.4 The Children's Disability Respite does not accept referrals for children who

- Are independently mobile
- Exhibit behaviours that challenge or put themselves or others at risk
- Children with tracheostomy/artificial airways
- Who require high medical and clinical team support.

6.0 Decision Making Process

6.1 The ADT Team use an interdisciplinary approach to reach all of its decisions.

6.2 The ADT Team will endeavour to use all available and relevant information pertaining to the individual child being referred, to ensure an informed and objective decision.

6.3 If the ADT Team deem it necessary, a home visit may be arranged to allow a member of the team to carry out an assessment to help identify if the child is eligible.

6.4 Opportunities are provided to children and their families to visit the service before making a decision to access respite. (HIQA National Standards for Residential Services for Children & Adults with Disability, 2013)

6.5 All decisions taken by the ADT Team must be contemporaneously updated on Vitro and explained to the family as soon as possible and the decision provided in writing to the family, the referrer, the primary paediatrician and/or G.P and Primary Disability Service.

7.0 Appealing a decision

7.1 Families may appeal against a decision made by the ADT Team.

7.2 An appeal should be made in writing by the family or their nominated professional to the Director of Nursing/Person in Charge stating the reason for the appeal.

7.3 This appeals procedure is separate to the LauraLynn complaints procedure and does not affect the rights of any service user to make a complaint.

7.4 Upon receipt of an appeal, the ADT Team will review the referral again, and will seek to access any additional information to help ensure as objective a decision as possible.

7.5 The decision made by the ADT Team will be final.

8.0 Source of Referrals

8.1 Referrals will be considered from any source with the permission of a person with parental responsibility for the child.

8.2 All referrals must be accompanied by an up to date medical report, MDT Assessment and Care Plan carried out by Primary Service.

8.3 Enquires and referrals can be made directly to the Director of Nursing or Clinical Nurse Manager in the Children's Disability Residential Respite Service

8.4 A referral form must be completed in full before the referral may be processed.

9.0 Timing of Referrals

9.1 All completed referral forms will be discussed at the Monthly ADT Team Meeting.

10.0 Admission to the Children's Disability Respite Service

10.1 Once the child / family have been accepted to the Service for respite;

- Opportunities are provided to the child / family to meet with a member of staff prior to admission, to discuss what admission to respite service will mean and the provisions for admissions and discharges from routine respite.
- Children / Family will be informed about key aspects of the services provided prior to their first respite admission.

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- A contract with the Service, in an accessible format, is signed by the child's family or representative.

11.0 Review of existing services

11.1 Children will have their eligibility for service and care needs reviewed at least once a year or more frequently if a significant change occurs.

12.0 Discharging from Disability Residential Respite Services

12.1 Adult Disability Residential Service:

- The Service currently provides high support residential care to 7 adults with profound intellectual and physical disabilities.
- The 7 adults have security of a permanent home and are not required to leave against their wishes unless there are compelling reasons for the move, National Policy, suitability of accommodation,
- Each adult/their representative is consulted with in advance of any move and has access to an advocate if they wish to object
- The arrangements for the transition of any adult within the residential service to a new residential service will be carried out in consultation with each adult/their representative and all transitions will occur in a timely manner with planned supports in place

12.2 Children's Residential Service

- The Service currently provides high support residential care to three children with profound and multiple learning disabilities and complex healthcare needs.
- The 3 children have security of a permanent home and are not required to leave against their wishes unless there are compelling reasons for the move
- The arrangements for the transition of any child within the residential service or to a new residential setting will be carried out in consultation with children's families and occur in a timely manner with planned supports in place.

12.3 Children's Disability Respite Service

- The decision to discharge the provision of LauraLynn services is the responsibility of the ADT Team.
- Each child's eligibility to the Service will be reviewed annually or more frequently if need indicated.
- Transition planning to adult Disability Services will commence when the child reaches 14 years of age, The Service will work with the child's Primary Service and the CHO Disability Case Manager to ensure the child is prepared for transition to adult service.
- A family may choose to voluntarily withdraw from children's Disability Respite Services and request to be discharged.

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