



DIPS

Doncaster Integrated People Solution

Reablement (Steps and PSU)

Training Guide



Revision History

File Location: SOP Guide for contact referral and SS Assessment

DATE	VERSION	DESCRIPTION	AUTHOR
13/3/19	V0.1	draft	Dave Goldson
14/3/19	V0.2	draft	Dave Goldson
12/11/20	V0.3	final	Dave Goldson

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Contact Assessment Referral

This could be processed by ISAT, RAPT, CDU, Area Teams or SPA workers (for STEPS), or IDT (for PSU).

Sections 1 – 6

(Mandatory fields only needed here)

Section 7 – Actions taken

- request 'Reablement Referral' (**RR**) in Actions Taken, same worker referring to continue **RR** so "assign to self" required. DO NOT FINISH the **CAR** until **Reablement Referral** accepted or declined.

Reablement Referral

Section 1 – Personal details

Section 2 – Referral Details

Input required as below -

Sections

- 1. Personal Details
- 2. Referral Details**
- 3. Completion Details
- 4. Actions Taken

indicates completed section

2. Referral Details

Please provide details of why a Reablement Assessment is required?

Why is a reablement referral required? Are you directing towards STEPS homecare or Positive Step for further assessment? Consider all other routes of support? Detail any support available from family, friends, community? Provide as much information as possible with regards to the person's current situation. How can we enable the person to be as independent as possible? What support is required? What are the health conditions/disabilities/medications impacting on the person's ability to manage daily tasks?

Has the person or their advocate consented to this referral being made?

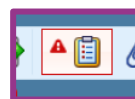
☒ Yes ☐ No ☐ Not asked

What are their views in relation to this referral?

It is important to detail the person's own views in accordance with a strength-based approach

☒ Section completed

Section 3 – Completion details



To refer to STEPS or PSU, click on the clipboard icon and click send to, select 'find' and choose either the virtual worker for Steps Triage or PSU Referrals and send request. If accepting the referral, the triage worker will continue the **RR** and set a Reablement Assessment and Goal Setting (**RAGS**) assigning it to their team. If declining the referral, they click no and explain in the note why it is declined.

Sections

- 1. Personal Details
- 2. Referral Details
- 3. Completion Details**
- 4. Actions Taken

indicates completed section

3. Completion Details

Worker name *

Job title *

Team *

To be completed by the receiving team - is this referral accepted?

☒ Yes ☐ No

Please provide reasons why not

☐ Section completed

They would also click 'completed' in the clipboard icon and explain there too. The workflow would be outlined red in referrer's work tray when the triage worker saves/exits the **RR**. Referrer then have the option of either providing further information if they ask for it, (or if the case has been reassessed), and send again back to triage, or close the RR and return to your **CAR** for a different pathway.

Section 4 – Actions Taken

If Triage worker accepts the referral, they can again assign to their own team when setting the next step – Reablement Assessment and Goal Setting (**RAGS**). Steps/PSU will pick up this subsequent workflow.

Reablement Assessment and Goal Setting

Information and advice

Reablement Assessment and Goal Setting

Section 1 – Personal Details

Section 2 – Current Situation

Information previously input should have pulled through to the first box in this section. Then consider what further information should be recorded. **RAGS** and then the Reablement Review (**RRv**) is the worker record of the person's progress during the time under Steps care or in PSU.

Sections

- 1. Personal Details
- 2. **Current Situation**
- 3. Goals
- 4. Recommendations
- 5. Completion Details
- 6. Actions Taken

indicates completed section

Why is a reablement referral required? Are you directing towards STEPS homecare or Positive Step for further assessment ?
 Consider all other routes of support?
 Detail any support available from family, friends, community?
 Provide as much information as possible with regards to the person's current situation. How can we enable the person to be as independent as possible?
 What support is required?
 What are the health conditions/disabilities/medications impacting on the person's ability to manage daily tasks?

What factor(s) have led to your current situation e.g recent falls, illness, etc?

Further information can be added as applicable that has brought about this situation.

Do you receive any other services e.g home care, day care, etc?

☒ Yes ☐ No

Please provide details

What services are already in place?

Are there any family, friends or carers who give support on a regular basis?

☒ Yes ☐ No

What support do they provide?

Consider what support is already in place?

Ensure the carer is informed of their right to a Carer Assessment

... and lower down in the same section ...

Do you provide support to anyone else?

☐ Yes ☒ No

Brief description of relevant medical history

Input relevant medical history

How do you want to live your life, what do you want to do and achieve and do you think Reablement will help with this? Consider any risks, how they can be reduced and safety maintained.

Input person's wishes and aspirations and particularly about reablement. Include what they can/can't do, and how risks can be

☐ Section completed

Section 3 – Goals

Select option boxes as appropriate on wellness scale and frequency of falls with additional information if relevant?

Sections

1. Personal Details

2. Current Situation

3. Goals

4. Recommendations

5. Completion Details

6. Actions Taken

indicates completed section

3. Goals

Wellness scales

How would you describe your ability to care for yourself?

Help required for the majority of tasks

How would you describe your quality of life?

Poor

Falls

Have you had any falls?

Yes

No

How many times?

Please Select

Additional information

Any additional information regarding falls, such as how they happened, reasons? consequences? impact?

Functional Performance – Mobility

Improvement area	Identified goal	How will this be achieved	Current ability
Add			

Mobility – Evidence of current ability

Record as appropriate

... Lower down in the same section ...

Sections

1. Personal Details

2. Current Situation

3. Goals

4. Recommendations

5. Completion Details

6. Actions Taken

indicates completed section

Functional Performance – Personal Care

Improvement area	Identified goal	How this will be achieved	Current ability
Add			

Personal care – Evidence of current ability

Record as appropriate

Functional Performance – Daily Living Tasks

Improvement area	Identified goal	How this will be achieved	Current ability
Add			

Daily living tasks – Evidence of current ability

Record as appropriate

Equipment Information including equipment already in situ, to be provided or to be purchased

Record as appropriate

Section completed

Section 4 – Recommendations

Section 5 – Completion Details

Section 6 – Actions Taken.

Click on **“assign to me”** if you are the worker continuing the workflow or if not, click **“find”** to find and allocate to STEPS/PSU team or worker.

Then save, finish and continue to next workflow to pick up incoming work – e.g ‘Purchase Services’ and then **RRv** and continue or reallocate as appropriate. In rare cases, you may have to discharge immediately if the person turns out to be unsuitable for the situation, e.g. admission back to hospital is needed or going home. A Supported Self-Assessment is available from this section if needed or if the person is already on the system, an “ongoing annual review” may already be set up.

If the person is known on the system already, either - update the “ongoing review,” if this is current, to note the situation and select **SSA** from the “Actions Taken” and then allocate as appropriate. If you take the former option, the “ongoing review” if it exists would need to be closed. If the latter, then the **RAGS** should be closed appropriately. You only need one SSA.

Purchase Service – Reablement

This step is needed to log the provision and costs of the care you are providing.

Click on 'Start'

Purchase Services – Reablement: Luis Cooper (1416)

Start

Person Summary

Work History

Status

Not Yet Started

ID

Or from here –

Person Summary – Luis Cooper (1416)

Person Details

Summary Case History

Demographic Information

Drag a photo here, or click to locate a photo to upload

Context: Adult

Date of Birth: 15/01/1930 (90 years old)

Address: (Address Type : Main Address)
27 High Road
Balby

Case Status

Open 24/09/2020

Current Work

Generate Contribution (Financial Assessment Virtual Worker)

Purchase Services – Non-Personal Budget (Dave Goldson) Start

Care and Support Plan (Dave Goldson) Resume | Summary

Basic/Non Assessed Services (Adults) (Dave Goldson) Start | Summary

Purchase Services – Reablement (Dave Goldson) Start | Summary

...which will bring you to this –

Adults – Intermediate Care Package

Purchase Services – Reablement : Luis Cooper (1416)

Next actions form

Adults – Intermediate Care Package

Sections

1. Actions Taken

Indicates completed section

1. Actions Taken

Subject Details

Find Subject Find

First Names* Luis

Last Names Cooper

Click on the tab – Adults – Intermediate Care Package... and you come to this –

Purchase Services – Reablement : Luis Cooper (1416)

(0)

Next actions form

Adults – Intermediate Care Package

Provision & Contributions

Service/Element

Element Type

Start Date

End Date

Update 903 Codes

Draft Purchase Orders

Authorisation Tasks

Add Provision

Click on “Add Provision” and you come to this where you click “Adults – Intermediate Care Package”.

Add Service – Choose Service Type

Service Group (select first)

Adults - Intermediate Care Package

...and it brings up a further option in the next box down – click on “Adults – Reablement Services at home” and then “OK” at the bottom right.

Add Service – Choose Service Type

Service Group (select first)

Adults - Intermediate Care Package

Adults - Reablement services at home

Page 10 of 16

Which brings you to this screen –

New Adults – Reablement services at home > Change Standard Settings for Service



[Summary](#)
[Dates](#)
[Purchaser](#)
[Provision](#)
[Budget Codes](#)

Decision date: Start date:
Purchaser Planned end date:
Worker responsible for purchase: Dave Goldson
Purchasing team:
Provision
Supplier:
Budget Codes Budget Codes: Cost Centre –
Nominal – 30J00 PROFESSIONAL SERVICES
Sub Nominal – 3176 OTHER PROFESSIONAL SERVICES
Sub Cost Centre – J3003 65+ LD SUPPORT

Progress through each tab by either clicking on the next tab itself, or by clicking “next” at the bottom right. Add the start date (and end date if known), the purchasing team which is your own team, (click find, type in the first 2 or 3 letters of your team and select appropriately), then which provision you want, and select the appropriate budget code if it hasn’t pulled through, before finally clicking ok at the bottom right.

New Adults – Reablement services at home > Change Standard Settings for Service

[Summary](#)
[Dates](#)
[Purchaser](#)
[Provision](#)
[Budget Codes](#)

Start Date 
Planned End Date 

New Adults – Reablement services at home > Change Standard Settings for Service

[Summary](#)
[Dates](#)
[Purchaser](#)
[Provision](#)
[Budget Codes](#)

Worker Responsible for Purchase [Find](#)
Purchasing Team [Find](#)

New Adults – Reablement services at home > Change Standard Settings for Service

Summary	Dates	Purchaser	Provision	Budget Codes
Supplier				
<div> [None] Age UK Avalon Hayfield Resource Hub Short Term Enablement Programme </div>				

New Adults – Reablement services at home > Change Standard Settings for Service

Summary	Dates	Purchaser	Provision	Budget Codes										
<table border="1"> <thead> <tr> <th>Budget code type</th> <th>Budget code</th> </tr> </thead> <tbody> <tr> <td>Cost Centre</td> <td></td> </tr> <tr> <td>Nominal</td> <td>30J00 PROFESSIONAL SERVICES</td> </tr> <tr> <td>Sub Nominal</td> <td>3176 OTHER PROFESSIONAL SERVICES</td> </tr> <tr> <td>Sub Cost Centre</td> <td>J3003 65+ LD SUPPORT</td> </tr> </tbody> </table>					Budget code type	Budget code	Cost Centre		Nominal	30J00 PROFESSIONAL SERVICES	Sub Nominal	3176 OTHER PROFESSIONAL SERVICES	Sub Cost Centre	J3003 65+ LD SUPPORT
Budget code type	Budget code													
Cost Centre														
Nominal	30J00 PROFESSIONAL SERVICES													
Sub Nominal	3176 OTHER PROFESSIONAL SERVICES													
Sub Cost Centre	J3003 65+ LD SUPPORT													

<< Back	Next >>	OK	Cancel
---------	---------	----	--------

Then click on “Add Element” and select appropriately if single or double carer needed and click “OK”.

Elements in this Service	Start Date	End Date	Status	Change Type	Actions

Change Standard Settings Add Element

OK Cancel

New Adults – Reablement services at home > New Element




Filter the element types list by category

☒ Show element types in this category **Notional Costs** ▼

☐ Show all element types

Element Type
Reablement services at home (in house)
Reablement services at home (in house) double handed care

...which leads to – Click on the time input icon below to add frequency / times of calls.

Elements in this Service	Start Date	End Date	Status	Change Type	Actions
Reablement services at home (in house)	13/11/2020		Occurrences Missing	New	  
No Cost, Uncosted Element					

For example – for one morning call of 30 mins each input as below and click “Add”


Adults – Reablement services at home > Reablement services at home (in house) > Manage Occurrences


Visit Frequency: **Weekly** ▼

Day(s) and periods of Occurrence(s)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Afternoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Night	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>















Duration (format HH:MM) * **00:30**

Start Date * **13/11/2020** 

End Date 

Add **Clear**

Which would add the section below to the bottom of the page.

Proposed or Purchased Adults – Reablement services at home Occurrences						
Occurrence Details	Frequency	Start Date	End Date	Status	Change Type	Actions
Monday Morning for 00:30	Weekly	13/11/2020		Valid	New	 
Tuesday Morning for 00:30	Weekly	13/11/2020		Valid	New	 
Wednesday Morning for 00:30	Weekly	13/11/2020		Valid	New	 
Thursday Morning for 00:30	Weekly	13/11/2020		Valid	New	 
Friday Morning for 00:30	Weekly	13/11/2020		Valid	New	 
Saturday Morning for 00:30	Weekly	13/11/2020		Valid	New	 
Sunday Morning for 00:30	Weekly	13/11/2020		Valid	New	 

Clear Proposal **Save Changes** **Cancel**

Click on “**Save Changes**”, and then “**OK**” on the next page.

Next Actions

Click on the first tab “Next Actions” and add “Update Services” to enable you to finish.

Purchase Services – Reablement : Luis Cooper (1416)

Next actions form Adults – Intermediate Care Package

Sections

- 1. Actions Taken
- Indicates completed section

1. Actions Taken

Subject Details

Find Subject

First Names*

Last Names

Reablement Review

Section 1 - Personal Details

Section 2 – Reablement Review

STEPS or PSU worker to complete details below, the first box lists which week you are reviewing so that more than one **RRv** can be processed.

Sections

- 1. Personal Details
- 2. Reablement Review
- 3. Recommendations
- 4. Completion Details
- 5. Actions Taken
- Indicates completed section

2. Reablement Review

Review Details

Review of week: 5

Is this the final review?

☒ Yes ☐ No

Wellness scales

How would you describe your ability to care for yourself?

How would you describe your quality of life?

Falls

Have you had any falls?

☒ Yes ☐ No

How many times?

Within what period of time?

Additional information

spilt drink and slipped on it.

Telecare

Was a referral to Telecare/Pendant Alarm made at Assessment?

☒ Yes ☐ No

Sections

- 1. Personal Details
- 2. Reablement Review
- 3. Recommendations
- 4. Completion Details
- 5. Actions Taken

Indicates completed section

Functional Performance – Mobility

Improvement area	Identified goal	How this will be achieved	Current ability	Progress
<p>Mobility – Evidence of current ability</p> <p>Improved balance over 5 weeks to become steady enough to hold balance for short periods Improved distance able to mobilise with frame aid to 5M.</p>				

Functional Performance – Personal Care

Improvement area	Identified goal	How this will be achieved	Current ability	Progress
<p>Personal care – Evidence of current ability</p> <p>Improved to be able to wash upper body only</p>				

Functional Performance – Daily Living Tasks

Improvement area	Identified goal	How this will be achieved	Current ability	Progress
<p>Daily living tasks – Evidence of current ability</p>				
<p>Equipment Information including equipment already in situ, to be provided or to be purchased</p>				

☐ Section completed

Section 3 – Recommendations

3. Recommendations

Is reablement ongoing?

☒ Yes ☐ No

Is a supported self-assessment required?

☒ Yes ☐ No

Recommendations and outcomes

It will be if there is a need to 'purchase service' when no care package currently exists,
OR if there is a significant change in need
OR a re-RAS is required to accommodate an increased care package
OR if there is a change in setting e.g. community to residential placement.

Schedule of care and support

Start date 05/06/2019

The person's care preferences

e.g. preferred times of day for care interventions ? vegan/vegetarian ? female / male carers ?
(This is information pulled through from 'goal setting'.)

Schedule of Care and Support

Day of week	Specific day(s)	Part of day	Time critical calls	Care and support requested
<p>Add</p>				

☐ Section completed

This “**add**” option brings up the box below to detail the sort of regime currently already in place WITHIN PSU to give an idea of what homecare package, if any, is likely to be needed.

The screenshot shows a web form titled "Schedule of Care and Support". The form is divided into several sections. A modal window is open, allowing the user to add a new entry to a table. The table has columns: "Day of week", "Specific day(s)", "Part of day", "Time critical calls", and "Care and support requested".

Numbered boxes indicate the following fields:

- 1: "Day of week" dropdown menu (currently set to "Every day").
- 2: "Specific day(s)" text input field.
- 3: "Part of day" dropdown menu (currently set to "AM").
- 4: "Care and support requested" text input field (currently containing "3 calls daily x 1 carer x 30 mins each").
- 5: The "Add", "Add and Close", and "Close" buttons at the bottom of the modal.

Below the modal, the main table is visible with the same headers. At the bottom of the page, there is a "Section completed" checkbox and a "Add" button with a plus icon.

Boxes numbered above -

1. Frequency – e.g. every day, weekdays only, weekends only, specific days
2. Specific days – list which days if selecting this option from box 1
3. Select which part of the day you want that call – AM, Lunch, Tea, PM?
4. Detail basics of care package requested or specifics for what that call is for?
5. Add and close, or if adding second or more calls for that, click "**add**" for each, then click "**close**"

Section 4 – Completion Details

Section 5 – Actions Taken

Set up the (next) **RRv** or **SSA** and assign to self or appropriate PSU team worker to continue. The same PSU worker currently keeps the case to pick up the 'first review of budget' in due course once the person has been at home for a number of weeks. This workflow or a subsequent RRv can then set up the plan for discharge and could lead to a Supported Self-Assessment if required. If a SSA is required this should be sent to the Virtual Worker for the appropriate area team (via the FIND button) and not the area team work folder.