

1.3.1 Admissions Policy & Procedure

Regulations and standards

England

- Regulation 14: The care planning standard
- Guide to the care planning standard
- Regulation 16: Statement of purpose
- Regulation 17: Placement plan for looked after child
- Regulation 41: Notification with respect to children admitted to or leaving the home
<http://www.legislation.gov.uk/ukxi/2015/541/regulation/41/made>

Wales

- Standard 14: Suitability of the service
- Regulation 19: Information about the service
- Regulation 20 : Service agreement
- Regulation 7 Requirements in relation to the Statement of Purpose
- Regulation 15 Personal Plan
- Regulation 16 Review of Personal Plan
- Regulation 18 Provider Assessment

Scope of this chapter

Policy

Bryn Melyn Care admits young people into its homes and supporting services in a number of ways. This policy and procedure aims to provide guidance for how admissions should take place to ensure that best practice and child-centred thinking always inform how we manage and think about admissions.

How we admit a child into our service has a significant impact on the success of the placement for the child. It also sets a benchmark for the standard of care to the rest of the organisation – if the organisation admits a child in a manner that is detrimental to the child this sends a powerful message to the whole organisation about how we conduct ourselves and vice versa. How we admit a child to our services also communicates a strong message to placing authorities about what kind of provider we are.

As a specialist therapeutic childcare provider we therefore take the admissions process very seriously. It is the first step to getting it right for the child for whom we are caring. By getting it right, we can ensure that we do not compromise our standards by external factors or market driven forces and maintain an internal and external reputation of the highest possible standard.

Bryn Melyn Care strives to ensure that each young person we admit into our care can do so in a well-planned way so making all necessary arrangements for the young person to have the least disruption possible. We recognise that an admission into a new placement can be an extremely traumatic and stressful time for them and therefore we should manage it thoughtfully and sensitively.

This chapter was added to the manual in September 2015.

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1. Enquiries & Referrals

Bryn Melyn Care receives both enquiries and referrals from placing authorities looking for a residential childcare placement for a young person. Due to the specialised nature and cost of our service, the majority of our admissions come from specific enquiries; direct referrals to Bryn Melyn Care are relatively few. We log all enquiries and referrals in a central database held by the Director of Operations and the Referrals Manager.

A placing authority looking for the most appropriate provider, often nationally, makes an enquiry to meet the needs of the young person. Local authorities might send an enquiry to a large number of providers either to all specific providers within the appropriate category that have successfully tendered to be on approved lists or for spot purchase as a specialist placement. Not all of the providers will respond and not all of the providers receive a response from the placing authority should they propose a potential placement.

A referral is specifically to Bryn Melyn Care by placing authorities who are seeking our services over and above other providers, or a smaller number of providers who offer similar services.

In both cases, a timely response is required to ensure the best possible chance of a potential placement for the young person in question.

The Referrals Manager receives all enquiries and referrals in the first instance providing an initial response as soon as possible to the placing authority based on vacancies and matching criteria for these vacancies.

1.1 Matching Criteria

All Registered Manager's with a vacancy must submit a set of appropriate matching criteria to the Regional Manager and Referrals Manager. This must contain a clear set of parameters to help identify an appropriately matched young person for that vacancy. The matching criteria must specify the most appropriately matched characteristics of a young person based on:

- Gender;
- Age;
- Personality;
- Risk taking behaviours and complex needs;
- Location of the home;
- Other young person / people in placement;

- Skill sets of the staff team.
- Language of the child i.e If the team are Welsh speaking (The Active Offer)

Matching criteria are not rigid or absolute but provide clear guidance for an appropriate match. Some young people will clearly not be a match; for instance a young person already placed in a home who frequently absents to abuse drugs, would not be an appropriate match for another young person with similar behaviours, particularly if they were considered to be a 'leader' and a strong influence on peers. Similarly, a young person of 16 years of age who has habitually bullied and threatened young children in previous placements causing placement break down we would not place with an 11-year-old child who had previously experienced bullying. However, other matching considerations may not be as clear and need further consideration.

The Registered Manager should produce the matching criteria in consultation with the allocated clinician and the Regional Manager and submitted to the Referrals Manager as soon as a vacancy becomes available, where possible this should be before a vacancy becomes available to allow for prior planning and preparation.

The matching criteria allows for the quickest possible initial response to referrals and enquiries.

The matching criteria must include any specific needs that we could not meet in that home without further consideration, for example, specific mental health needs. There will also be specific needs that we could not meet in any homes in the organisation due to our service delivery. The Clinical Lead will set these out and any referrals and enquiries that fall into this category we do not distribute for further consideration, but advise the referring authority why we are not able to assist.

1.2 Responding to Referrals & Enquiries

(See **Section 2, Referrals Protocol (Timescales)** for summary)

1.2.1 Initial Response

On receipt of a referral or enquiry, the Referrals Manager endeavours to identify any clear indicators for which vacancies may or may not be appropriate. If the Referrals Manager believes that there is a possibility but requires further clarification, they can forward the information to the Director of Operations, Regional Manager, Clinical Team or Registered Manager for consideration. This only happens where there is a potential for ambiguity in relation to the information in the young person's papers and the vacancy matching criteria and warrants further exploration.

Where the matching criteria is not met in any respect for any vacancy the Referrals Manager takes the decision to identify the enquiry or referral as inappropriate, they may require a second opinion from a Regional Manager. By doing so this manages the workload of all those involved in considering referrals and demonstrates the value in setting out matching criteria.

The placements team allocate a unique reference number from the central database before circulating enquiries and referrals enabling all internal professionals to identify the correct referral details more easily. All actions taken in relation to the referral must be emailed with the unique reference number in the title of the email. All emails must include our Business Administrator (Nicole Carter) in the email list to keep all central records up to date until the concluding action of the referral process.

Where a potentially appropriate match is identified, the information will be submitted to the Registered Manager for that vacancy for consideration, ensuring that the Regional Manager is copied in. Ultimately, the Registered Manager of the home will hold the decision about the appropriateness of

the placement. However, there may be occasions where intervention from senior management is required; such as where there is a risk that the Registered Manager may not be considering fully or when the Registered Manager may not be open to considering what is potentially a good match for the vacancy. In these cases, further consultation will take place with the Regional Manager and / or Clinician via telephone, email or in person to reach a final decision about whether to pursue the placement. In all instances, the final decision will remain with the Registered Manager.

However, in order to ensure that we can safely provide clinical services in accordance with the clinical team's professional responsibility, final agreement will be required from the Clinical Lead and/or Allocated Clinician. Information should also be shared with Education prior to a placement being offered.

We have to provide the initial response to a referral or enquiry within the timescales set out by the placing authority, where a response is positive it will be reported to the placing authority as being 'subject to Impact Assessment'. There may be cases where an initial response is required immediately, followed by a more detailed proposal within a set timescale – where this is the case please refer to 'Securing a Placement' section. Where a same day placement is required, please refer to **Section 1.5.2, Emergency / Same-Day Admissions**.

Typically, once an initial response is submitted, the placing authority will either respond positively and request further information about the vacancy (Statement of Purpose, most recent Ofsted or CIW Inspection Report and a fee breakdown) or negatively, that they do not wish to pursue the enquiry or referral any further.

1.3 Securing a Placement

The Referrals Manager will submit the necessary information to the placing authority for consideration of the placement offered. This will include:

- Statement of Purpose;
- Most recent **Ofsted** or **CIW** inspection report;
- Fee breakdown;
- Bryn Melyn Care marketing literature.

The timescales for this process to result in actual confirmation of a placement may vary dependent on how quickly the placement is required and how many other providers are under consideration.

During this time, the Referrals Manager will do what is required to ensure that we provide all information requested, including marketing literature and ensure the development of a relationship of trust and respect with the placing authority.

During this time, the Registered Manager should seek to gather as much information as possible about the young person, through the following avenues:

- Consultation with social worker and other relevant professionals (YOS Worker, Psychologist etc.);
- Consultation with current and / or previous placements;
- Visit to young person if appropriate;
- Collation of all available documentation (risk assessments, **Care Plans**, assessments etc.).

The Registered Manager / Regional Manager must also recognise that they are developing a customer relationship with a key stakeholder and act accordingly.

Following this information gathering process the Registered Manager will be required to complete an Impact Assessment (see **Section 1.4.2, Impact Assessment**) to confirm formally that the placement is suitable and to assess the required staffing ratio (see Staffing Ratio / 2:1 section / Waking Nights). The Registered Manager within the timescales required by the placing authority to secure the placement as communicated to them by the Referrals Manager must complete the impact assessment. No Impact Assessments will be undertaken until the Registered Manager has offered a placement.

1.3.1 Proposals for Placements

There may be occasions when the placing authority requests a more detailed proposal of placement to consider our offer. The content and format of these proposals can vary considerably, as can the timescales for completion.

A proposal for placement can be set out in generic terms for the service offered and is effectively a marketing document - not a care / placement planning process. It is the responsibility of the Referrals Manager to co-ordinate the completion of any proposals required by the placing authority requesting information specific to the referred young person as necessary from care, clinical or education colleagues. Bryn Melyn Care uses its own pro-forma for proposals which relate to the Care/Personal Plan My Life Plan(MLP), all it's related services (Care, Clinical & Education) and its component parts (Clinical Assessment, Consultation, Interventions, Needs Assessment, Risk Profile, Risk Management etc.). In this respect, much of the information will be generic in terms of how we deliver the Care/Personal PlannMLP, but its content will vary in relation to the information provided in referral papers to develop a child-specific proposal based on need.

Where an authority requests a proposal in the pro-forma set by the placing authority, the Referrals Manager will co-ordinate the completion of the proposal and request relevant contributions from Care, Education and Clinical services. All services must ensure they make their contributions in a timely fashion.

Once we have secured the placement, the fee arrangements and staffing ratios must be agreed with the authority in writing. The Referrals Manager will be responsible for organising the contractual agreements between Bryn Melyn Care and the Authority. The Facilities Manager must be contacted by the Registered Manager should any maintenance work be required to prepare the home or room for admission.

There are then several requirements that must be met before a young person can actually be admitted into the home.

1.3.2 Apricity Services

Where the young person requires an Apricity service, the registered manager of the setting, in conjunction with the Apricity education team, will arrange an assessment of the young person needs against their criteria before formalising any proposal. This is to ensure that we can provide the additional services that they may require, an example of which could be SALT or OT.

Following this assessment, a formal proposal will be made with complete costings and a plan for transition. The remainder of the process is as per the SEBD service.

1.4 Pre-Admission Requirements

1.4.1 Pre-Admission Checklist - Statutory

Prior to any admission being agreed the 'Pre-Admission Checklist – Statutory Requirements' (Appendix 1) must be completed by Bryn Melyn Care, this is the responsibility of the Referrals & Marketing Manager and Registered Manager. All statutory items must be in place and any non-statutory items identified on the checklist must be identified as being available and in place or requested or unavailable (i.e. there may be no psychological assessment available). On completion, this should be submitted to the Regional Manager, along with all associated documents for review in placements meeting to ensure the placements process has been followed with the Senior Management team.

1.4.2 Impact Assessment

The Registered Manager must complete an Impact Risk Assessment (Appendix 2) prior to confirming an offer of placement; it also forms an important part of the pre-admission requirements. This details an assessment on how the home and staff team will meet the child's needs and the potential impact of the new placement on the home, the young person, other young people in placement and the community.

The conclusion of the assessment will be to confirm whether the young person is suitable for the placement. If this is the case then the assessment will identify the required staffing ratio (inclusive of waking nights) to meet the young person's needs – the recommended review period for the staffing ratio may be from 2 weeks until further notice.

The assessment must be submitted to the Regional Manager, Referrals Manager and the placing authority within an agreed timescale. The Regional Manager must agree and sign off the Impact Assessment before wider distribution.

1.4.3 Staffing Ratio / 2:1 / Waking Nights

Once an admission to a home is agreed, the necessary staffing ratio will have already been identified as part of the impact assessment. Some young people will be admitted on a long term 2:1 staffing ratio due to their presenting needs and associated risk taking behaviours – this must be agreed in writing by the placing authority prior to admission. More often than not, we will admit a young person into the service on a 2:1 ratio provisionally. Where this is the case, the ratio will be subject to review on a frequent basis. The home manager in consultation with the allocated clinician must make the recommendation for the review period and submit formally using the Agreement to Staffing Ratio Review form (See Appendix 3). The review period must be agreed on admission and must be agreed in writing by:

- Registered Manager;
- Social Worker;
- Regional Manager;
- Placements Team (BMC);
- Commissioning Team (Placing Authority).

Dates for reviewing the staffing ratio will then be agreed between the above parties. At these intervals the associated risk management plan will be provided by the Registered Manager to the Referrals Manager and in consultation with the Regional Manager and Clinician, in the standard format, which

will outline recommendations and rationale staffing ratio requirements based on the assessment of risk.. If after the initial 8 week (there is no 8 week assessment now so this won't necessarily be 8 weeks) period a young person remains on a 2:1 staffing ratio, the care team together with the clinician should consider specific goals which would need to be achieved in order to reduce the staffing ratio. The Goal Based Outcomes process within the Personal/Care Plan MLP should then be followed in order to track changes and provide evidence for decisions around staffing level changes in support of the risk management process.

The agreement and implementation of the above process is a shared responsibility between the Registered Manager, Regional Manager and the Referrals Manager to ensure that risk management plans are completed in a timely fashion and that all parties are aware of their content. However, the Registered Manager must ensure that the risk management plan is completed and submitted on time.

Any communication between the Registered Manager and Social Worker must be communicated by the Registered Manager upwards to Senior Management and the Referrals Manager. Equally, all communication between the Commissioning Team and the Referrals Manager must be communicated to Senior Management and to the Registered Manager.

1.4.4 Integrated Working

On agreement and completion of all pre-admission requirements, the Registered Manager should distribute all relevant information to the Head of Education and the Clinical Lead. This will initiate the development of a 28-day education transition plan and for information to be provided to the relevant clinician to begin working with the team on a consultative basis.

This is no longer part of the admissions process (checked with Heidi)

1.4.6 CAMHS / Mental Health Planning

If a young person has previously had **CAMHS** involvement then requests should be made for relevant letters and / or reports.

If a young person is currently involved with CAMHS then the most recent letter and/ or report should be received prior to accepting admission. If these reports are not available, a telephone call should be made to the CAMHS team to gain further information. The Registered Care Manager or the Allocated Clinician / member of the clinical team can complete this.

Whilst it is the responsibility of the Social Worker to make referrals to Local CAMHS teams and manage transition between services, the Registered Manager (with support from Clinical Team if required) should ensure this is completed in a satisfactory way.

If there are clear mental health problems then all relevant Psychological/ Psychiatric and Forensic Reports should be requested. If these reports are not available a telephone call should be made to the Social Worker/ External Agencies/ current/ past placements/ carers to gain further information. The Registered Care Manager or the Allocated Clinician / member of the clinical team can complete this.

If there is current or recent Inpatient Mental Health (Tier 4) care then serious consideration should be taken about whether the placement is appropriate to meet the needs of the young person. This type of referral will need to be considered in a planned way and an integrated decision reached. Consideration must be given as to whether local services will meet the Psychiatric needs of a young person with serious mental illness or at risk of serious harm to self and/or others. In these cases, consultation with the local CAMHS service must take place by both Bryn Melyn Care and the Local Authority.

1.4.7 Planning Meeting

The Referrals Manager will also set a provisional date for a planning meeting at the home. Ideally this should take place in the first 72 hours of admission, however if this is not logistically possible 5 working days will suffice.

The Registered Manager will be responsible along with the Referrals Manager for ensuring this meeting takes place and is co-ordinated effectively. The Registered Manager should be present along with the Social Worker, Education Representative, Clinical Representative and the Key Worker.

The purpose of the meeting is to:

- Ensure all relevant documentation is on file and signed;
- Communicate plans for education and confirm when 28 day Transition Plan will be sent to Social Worker;
- Communicate Personal/Care Plan My Life Plan process.
- In Wales the Personal Plan needs to be written BEFORE a young person is admitted or within 24 hours if an emergency placement. This needs to be reviewed at 7 days.

Minutes of the meeting should be taken and kept on file at the home, school and clinical services and shared with the Social Worker.

1.5 Types of Admission

1.5.1 Planned Admissions

Ideally, all placements would be planned over a period. Dependent on need this may vary between 1-8 weeks, but a good planned admission might usually be planned over a 4-week period. Planned placements are expected to be medium to long term placements. A checklist for planned admissions will be completed and submitted to the Regional Manager for placement meeting review by the senior management team (Planned Admissions – Checklist see Appendix 5).

1.5.2 Emergency / Same-Day Admissions

(this will depend on their Statement of Purpose) and some homes are equipped and registered for same day or emergency admissions. In most cases, these are solo homes and our two crisis assessment centres. In respect of an emergency / same day placement all the pre-admission requirements must be fulfilled (Appendix 1), however it will be accepted that they may not be as detailed or as comprehensive in content and detail but all statutory requirements must be met. A Personal Plan will need to be in place within 24 hours in Wales, It may be the case that emergency / same day admissions are only short term, as in the case of placements in a crisis assessment centre where the placement will be 12 weeks in duration. A child-centred checklist must also be completed and submitted to Regional Manager for placement meeting review by the senior management team. See Appendix 6 (Same Day Placement – Checklist).

1.6 Admissions Process

There are two aspects to the admissions process. One; to ensure that all statutory and regulatory requirements (Appendices 1 & 7) are met and the other; to ensure that the admissions process is as child-centred as possible to give the young person the best possible opportunity for their placement with Bryn Melyn Care to be successful (Appendices 5 & 6). Some of the content and planning is outlined here:

1.6.1 Preparation & Planning - 1

In preparation for an admission the Registered Manager, over the planning period should:

- Visit the child in their current placement, with a member of the care team. The visit should allow for the young person to be given information about the home, including a written guide, expectations, boundaries and structures of the home and to ask questions or raise concerns. A gift for the young person during the visit may be appropriate;
- Consult with all relevant professionals and the young person about their likes, dislikes, preferences, wishes and needs so as to be able to welcome the young person as effectively as possible into their new home and to help complete a Personal/Care Plan before they are admitted
- Plan a visit or visits to the home for the young person, including for a meal and / or overnight stays;
- Plan for the young person to go on a shared activity with any other young people in the home;
- Ensure the bedroom is fully decorated and all furniture, fixtures and fittings in good condition;
- Provide the young person with the Children's Guide to the home, including photos and information about all the members of the staff team;
- Consult with family members and friends who are involved in the young person's life;
- Arrange a visit by the social worker to the home if this has not already taken place and if appropriate a pre-admission planning meeting (see Planning Meeting).

1.6.2 Preparation and Planning – 2

The Registered Manager will be responsible for completing all parts of the Admissions Procedures Checklist (Appendix 7) in conjunction with the Referrals Manager.

This checklist incorporates all the statutory requirements relevant to the admission, including consent forms and health care.

On completion, this should be submitted to the Regional Manager and the Marketing and Placements team.

1.6.3 On Admission

The home should make the young person's admission as welcoming and as calm as possible. The young person's favourite food and drink should be available, a welcome meal ready to be cooked and a planned activity already agreed with the young person should be arranged if they feel able to.

The plans for the rest of the day should be communicated with the young person, such as meal times, settling times and routines, what each carer at the home will be doing, where and when the activity is and what to expect from the next few days to help alleviate anxiety the young person is feeling.

During the first day, the young person should be provided with information about how the next few weeks of their placement; who they will meet, where they will go and what appointments they have. This should be provided gradually and appropriately so as not to overwhelm them and at a pace, they are comfortable with.

1.7 Post-Admission

1.7.1 Planning Meeting

The social worker should arrange to visit the home within 72 hours or at the most 5 working days. This visit should be planned and communicated with the young person. The visit should also comprise of a planning meeting, this should ensure that:

- An education representative and a clinical representative is present;
- All documents are in place and signed, including LAC documents (including health, Personal Plan, care plan, pathway plan, chronology etc.) Where LAC documents are not available they should be made so with 10 working days;
- All education documents are in place **Personal Education Plan (PEP)**, Statement of Special Needs or Education, Health Care Plan;
- All Bryn Melyn Care consent forms (medical, activity, physical intervention, and smoking if relevant), Care/Personal Plans , (including individual Behavioural Support Plan (IBSP) and risk management plans)
- Family contact arrangements are agreed and signed off (this includes parents, siblings, relatives and friends);
- The 28 day educational transition plan is communicated to the placing authority and the young person, followed by a written version within 5 working days;
- Pre-clinical recommendations are communicated to the placing authority;
- Personal/Care Plans/My Life Planning processes are communicated to the placing authority.

The documents/information above should be taken into account when completing the child's Personal/Care **Plan** including the Individual Behavioural Support Plan (IBSP) The responsibility for the completion of the Personal/Care and Individual Behavioural Support Plan (IBSP) rests with the Registered Manager. This document should be shared with and signed by the child's Social Worker.

It is for the Registered Manager/delegate and social worker to agree whether the Personal/Care Plan has been completed sufficiently to sustain the child until the first Looked after Review.

If there is no agreement, a Personal/Care Plan Review must be convened within 7 days of the placement to enable the plan to be completed satisfactorily. It is a requirement in Wales for the Personal Plan to be reviewed within 7 days.

Subsequent Personal/Care t Plan Reviews must be convened each month until the plan is completed satisfactorily. Any changes due to presenting behaviours should be added within 24 hours.

The detailed arrangements for admitting the child will depend on the circumstances of the case, these arrangements should be made by the Registered Manager in consultation with the child's social worker.

1.7.2 Notification of Placements

Notification of the placement must be sent, by the Social Worker/Placing Authority, to all those consulted and involved in the decision-making process within 5 working days of the placement starting. These notifications are not always carried out, therefore Bryn Melyn Care ensures that all

notifications are made as below, it is the Registered Manager's responsibility to ensure that these have been sent.

Notification must also be sent by Bryn Melyn Care, this is the responsibility of the Referrals Manager.

The following people/agencies must be notified, (where appropriate):

1. The team/unit, within the Placing Authority, responsible for arranging Looked After Reviews, so that the child's first/next Looked After Review can be arranged, normally within 20 days of the child's placement;
2. The Health Trust;
3. The Local Education Authority (must be notified within 10 working days of the placement);
4. The Children's Services Department in the area where the child is placed; these notifications must be made in writing advising of the placement decision and the name and address of the person with whom the child is to be placed;
5. Formal notification to CAMHS;
6. Local Youth Justice Service, designated contact;
7. Local Police Force, designated contact.

1.7.3 Health Care

The Registered Manager of the home must also ensure the following:

- That the child is allocated a Link/Keyworker who will be responsible for promoting the child's healthcare needs and liaising with health care professionals, see **Key/Link worker Responsibilities Procedure**;
- For the child to be registered with a GP (within 10 working days of the placement) and have access to a Dentist in the home's locality (within 20 working days of the placement); see **General Practitioners, Dentists and Opticians Procedures**;
- For a Health Care Assessment to be conducted in relation to the child, before the first Looked after Review; see **Health Care Assessments and Plans Procedures**.

1.7.4 Education

It will be the responsibility of the Head of Education to ensure that a 28 transition plan for the young person to enter into the education setting and 25 hour timetable of education is devised in consultation with the Registered Manager, Clinician and Social Worker. It will also be the responsibility of the Head of Education to communicate this plan to the Registered Manager and Social Worker.

The plan will refer to:

- Education site visits;
- Allocation of designated teacher;
- Visits to the young person in the home setting;
- Relevant education assessments;
- Phased timetable;
- Risk and behaviour management planning.

Please see Admission Policy – Education for complete guidance.

1.7.5 Placement Process Review

To support the maintenance of the highest possible standards of admissions and placement planning the senior management team will conduct a review of every admission to Bryn Melyn Care as part of the weekly placements meetings.

The Regional Manager will bring to the meeting, post-admission, the completed relevant checklists for all admissions and the associated paperwork. The Regional Manager's will also collate feedback from the Registered Manager and if appropriate the social worker of the child, regarding the admissions process.

The process will provide a reflective space regarding an admission and how effectively it has been carried out, where issues arose in the process and what could be improved upon.

See below for summary of referrals protocol / admissions responsibilities summaries.

2. Referrals Protocol (Timescales)

[Click here to view Referrals Protocol \(Timescales\) table.](#)

3. Summary of Roles and Responsibilities - Admissions

Task	Responsible	Comments
Matching Criteria	Registered Manager Regional Manager	Consult with Regional Manager, Clinician. Update provided every Monday morning to Referrals Manager
Referral Database / Allocation of Unique Referral Number	Referrals Manager / Director of Operations	Internal records of enquiries and referrals
Impact Assessment	Registered Manager	Consult with clinician, follow information gathering process, sign off by Regional Manager
Placement Agreement	Integrated Team – Registered Care Manager, Director of Operations, and Clinical Lead	Prior to final confirmation of placement offer
Agreement to Staffing Ratio Review	Referrals Manager	Prior to admission
Placement Proposals	Referrals Manager	Consultation to agree timescales
Pre-Admission Checklist	Referrals Manager	Share on completion with Regional Manager and Registered Manager
Preparation & Planning - 1	Registered Manager	Utilise careteam
Admissions Procedure Checklist	Registered Manager	Share on completion with Regional Manager and Marketing & Placements Team
Planning Meeting	Referrals Manager / Registered Manager	Attendees: Allocated Clinician, Education Representative and Social Worker

Notifications of Admission	Registered Manager and Referrals Manager/Admin	n/a
28 Day Education Transition Plan	Head of Education	H of E to communicate plan within 5 working days to Social Worker and Registered Manager
Staffing Ratio Review Report	Registered Manager	In consultation with clinician and Regional Manager. RM responsible for completion and timely submission

4. Admissions Flowchart

[Click here to view the Admissions Flowchart.](#)

Revision History

Date last updated: May 2020

Date of next review: May 2021

Date of release: May 2020

End