



Joint Transitions Protocol between LPFT and LCC for people aged 65 and over with mental health needs

Version 2.0

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1. Introduction

This protocol addresses the transfer arrangements between Lincolnshire Partnership Foundation Trust (LPFT) and Adult Care services in Lincolnshire County Council (LCC). The standards set in the National Service Framework (NSF) for older people and the National Service Framework for mental health require clarity of agreement between Adult Mental Health Services (LPFT) and Adult Care (AC). Both NSFs outline the requirement for clear protocols for collaboration between LPFT and AC.

The section 75 agreement between LPFT and LCC, section 3.9.2 states:

"LPFT and LCC shall work together through appropriate and agreed transition arrangements to prepare the council to ensure continuity of mental health and social care for service users aged 65 and above who are

in receipt of individual services under these arrangements

and

• will – or likely to require continued care arising from mental health needs on or after becoming the age of 65."

It shall be the responsibility of Adult Care to arrange for the provision of such continuing adult social care for eligible people reaching the age of 65.

2. Principles of Good Practice

A person should not be transferred from one service to another if they would receive a lower standard of care than is already in place.

A person (and their carer) who is being considered for transfer will undergo, a joint review with the person's current LPFT Social Worker and a member of the LCC Review Team to ensure that an appropriate service can be offered.

3. Case Transfer Process

People who reach 65 years of age and who are currently open to a Social Worker in the Adult Mental Health Service will be transferred to the review team in that geographical area 6 months prior to their 65th birthday.

For people who will become 65 in the current financial year, responsibility for funding and case management will transfer to the review team through planned transitional arrangements between the two services.

For those people who reach 65 in the current financial year, the Adult Mental Health Service will make a referral to the review team by requesting Joint Involvement via Mosaic. These notifications will be sent directly to the relevant Review Team Task box requesting a joint review. The purpose of the review is to ensure that there is a current and relevant assessment of need in place.

To ensure a smooth transition this referral will be made within the 6 month period prior to the person's 65th birthday. The review worker will be allocated an Involved Worker status. The Mental Health Worker will retain keyworker responsibility until either the service user's 65th Birthday is reached or all assessments and care planning have been undertaken. Any issues that arise between point of referral and 65th Birthday will be the responsibility of the Mental Health Service keyworker to address before the case is fully transitioned to the LCC Review Team.

The joint review should include the following:

- That the current service is appropriate to meet the needs of the service user and that all of the services continue when the service user transfers to Adult Care.
- If alternative services would be more appropriate to meet the current need.
- The views of the service user and their carer, including their agreement for their care to be transferred to the review team.
- Any outstanding Direct Payment management issues.
- Any outstanding debt arising from unpaid service user contributions. LPFT will remain responsible for any unpaid service user contribution debt accrued up

- to the 65th birthday. Any debt or risk of accruing debt post 65 years will be managed by Adult Care Older People's team.
- If section 117 of the Mental Health Act 1983 applies, this should be reviewed as part of the transfer to ascertain if the service user remains eligible for s117aftercare, or if discharge is appropriate (this can be clarified by the Mental Health Act Office on 01522 597856)

If the review identifies a significant change in need, a new assessment will be required. This will be a joint assessment led by LPFT with the Review Team's involvement. If a change to services is required in order to meet identified outcomes and this leads to an increased or reduced budget, the LPFT practitioner and the review worker should discuss this with their respective Managers. Discussions between Social Work Team Manager from LPFT and the review team Lead Practitioner will be necessary to negotiate and agree commitment to fund increased costs from the Adult Care budget.

If the service provision is unchanged, the Care and Support Plan should indicate the Adult Care Team's budget code from the agreed date, which will either be on the service user's 65th birthday or in extreme circumstances, the date where the referral was received if this is later than their 65th birthday. Where the latter happens, it must be brought to the attention of the Head of Mental Health Services.

If the service user is in a long term residential care or a nursing home placement, the case management and financial responsibility will fall to the team in which the person is placed, and not where they resided prior to entering into long term care.

If the service user is receiving their care via an out of county placement, funding and reviewing responsibility lies with the Adult Care Area Team that corresponds with the LPFT Team with funding responsibility. The request for Joint Involvement will need to identify where the person resided before being placed out of county.

On completion of either the review or the service user's 65th birthday, whichever is latest, the LPFT practitioner will transfer the case to Adult care, and inform the service user and their carer of the case transfer, including details of the Key Team and Key Worker. If there are no changes to the care package following review it is

expected that a future review will be scheduled within 12 months by the LPFT worker.

As LPFT are commissioned to provide services until a service user's 65th birthday, there will be no on-going LPFT social worker involvement following the transfer of the case to Adult Care except in exceptional circumstances that require Head of Service agreement.

As part of partnership working if a case involves complex mental health then LPFT are happy to provide advice and guidance if required.

4. Financial Processes

Before the commencement of each financial year, LPFT will identify the service users who will reach the age of 65 in the coming financial year, and will pass this information on to the finance manager. They will include advance notice of the casework and the possible financial commitment they will have to resume financial responsibility for in that year. These details will be forwarded by the 30th September in the previous year to ensure a smooth transition.

5. Joint Working

Some people may benefit from the support of different agencies at the same time; for example, if they have dual mental health and adult care needs. For reporting purposes, people can only have one Primary Support Reason (PSR) recorded as follows:

- 1. Autism / Aspergers
- 2. Learning Disability Support
- 3. Mental Health Support
- 4. PSR Not Yet established
- 5. Physical Support
- 6. Sensory Support

- 7. Social Support
- 8. Support with Memory and Cognition

The PSR also links in with team and budget codes; for example, LPFT would use the PSR Mental Health Support, whereas Adult Care may use a number of the above.

Example

P has a diagnosis of bi-polar affective disorder and received mental health support from LPFT, so their PSR is mental health and services are funded by that budget. P then has a stroke and receives initial rehabilitation support from the Independent Living Team (ILT) or the Assisted Discharge Stroke Service (ADSS). Following a period of rehabilitation, P still requires support with personal care, so P's PSR may then be for 'Physical Support: Personal Care Support' if that is the primary support need, Adult Care would then joint work the case with LPFT and commission additional support services using this PSR.

6. Responsibilities of LPFT

- To refer people 6 months prior to their 65th birthday to Adult Care via Mosaic direct to the relevant Adult Care Review Team.
- On completion of the joint review, the LPFT practitioner will inform the service
 user and their carer of the case transfer to Adult Care, including details of the
 allocated Key Worker or Key Team. They will advise the date that the changes
 take effect from, either the service user's 65th Birthday, date of review or
 following conclusion of any outstanding LPFT keyworker responsibilities.
- To follow up on any outstanding debt accrued whilst receiving LPFT services.
- LPFT finance team to inform LCC finance team of people who will be 65 in the coming financial year by the 30th September of the previous year.

7. Responsibilities of LCC

- The relevant Review Team to accept referrals for people who will reach the age of 65 years 6 months prior to their 65th birthday. It is accepted that these are scheduled reviews.
- The relevant review team to assign the key team to the area of the residential
 or nursing home if the person is in long term care and not the area in which
 they resided prior to entering into long term care.
- The Review team Lead Practitioner will allocate an appropriate worker within 3 weeks of receipt of request to complete a joint review with the allocated LPFT worker and jointly case manage the transition throughout the transfer to Adult Care.

8. Dispute Resolution Process

Stage 1 - Informal

On identification of any issue or concern, the matter should be discussed informally between the:

- LCC Adult Care Practitioner and the LPFT Practitioner. If this discussion does
 not result in a resolution, the matter should be immediately referred to the
 LCC Adult Care Lead Practitioner and LPFT Social Work Team Manager.
- If this discussion does not result in a resolution the matter should be immediately referred to the LCC Adult Care Area Manager and the LPFT Service Manager.

Stage 2 - Formal

In the absence of an agreement at stage 1, the matter should be referred to the LCC Adult Care Head of Service and LPFT Interim Head of S75 for discussion and resolution.

9. References

Department of Health (1999) National Service Framework for Mental Health.

London: DOH

Department of Health (2001) National Service Framework for Older People.

London: DOH

Health and Social Care Information Centre, Equalities and Classification (Eq-CL)

Framework. www.hscic.gov.uk