**CO-OPERATING WITH OTHER PROVIDERS**

**(Transfers and discharges to other accommodation)**

**Name: Care Stream Limited**

**Policy Statement**

At Care Stream, we are committed to a service which is person-centred with the service user at the core of our activity. As a private provider, there are some business activities which from a commercial perspective cannot be shared. In the interests of openness and clarity, we detail our co-operation mode of employment and when we would share and exchange information.

**Aim of the Policy**

The aim of the policy is to ensure that where there is more than one provider of care and support, all multi agency partners are aware of our commitment to our service users and to assist where possible in a smooth transition of information between multi-agency partners and other providers. To protect the health, welfare, and safety of service users, specifically regarding admission, discharge and transfer arrangements with multi-agency partners, the sharing of information and the appropriate care planning mechanisms need to be in place. These mechanisms should ensure a smooth transition between services.

**Arrangements**

From time-to-time, situations occur where it is important to share information in order to play our part in making a valid contribution to a seamless service for the service user.

Appropriate information should be copied and collated into a file, which is then passed to the appropriate personnel. In order that Care Planning Support is shared in relation to the admission, transfer or discharge of service users and to facilitate any emergency procedures, co-ordination with the minimum distress and anxiety, we will co-operate fully with our multi-agency partners in the exchange of information.

**Information sharing**

We will ensure that any exchange of information will adhere to the Data Protection requirements and will include the following as a minimum:

* Name
* Gender
* Date of Birth
* Address
* Unique Identification Number or Reference Number
* Emergency Contact details
* Any person who acts as representative, advocate, who holds an LPA or equivalent with contact details where available
* Records of care, treatment and support provided up to the date of transfer
* Assessed needs
* Known preferences and any relevant diverse needs
* Previous medical history that is relevant to the service users’ present needs and any relevant GP contact details
* Any infection that needs to be managed
* Any medicines they need to take
* Any allergies they have
* Reason for transferring to the new service
* Any advanced decision and any assessed risk of suicide or homicide or harm to self and others.

The above information should ensure that there are no interruptions to the continuity of care, treatment and support for the service user.

**Emergency Admission to Hospital procedure**

* Where possible, a member of staff will accompany the service user and take with them the information detailed above in an emergency as time is of an essence. It may only be possible to send the minimum which should include the medical history and list of medications.
* As soon as possible, the family, LPA or representative should be informed and given details of the hospital where the service user is being admitted.
* The Registered Manager/Director of Operations must be informed immediately.
* Any CQC notifications should be completed and sent online to CQC.
* If relevant, any RIDDOR notifications must be made.
* If relevant, any accident forms should be completed and signed.
* If, because of the speed of the admission information is not sent with the medical staff or paramedics, this information should be securely transferred as soon as possible.
* It is essential for the Director of Operations to keep in touch with the hospital during the time the service user is in hospital and with the family or LPA as appropriate.
* When the service user returns to the service, the file sent should also be returned and signed for by a member of staff.

**Multi-Agency Working**

Where multi-agency working is involved, we will ascertain the lead responsible for the co-ordination of the care. We are aware of our Civil Emergency Team in our local authority. We have emergency and contingency plans in place which is shared with the relevant authorities. We are aware of the GDPR 2018 regulations and our confidentiality policies and procedures include sharing on a "need to know" basis. The shared information will be appropriate, measured, transferred securely, up to date and relevant. Information is reviewed and updated using the review system.

If information relates to a safeguarding allegation, or disclosure is in the public interest, senior management advice is sought before any information is released to ensure the release is in accordance with relevant legislation and guidance. All staff are made aware of acceptable methods of transferring information and that the information is relevant, factually correct and does not include subjective opinions and can be shared in line with GDPR 2018 regulations and any other relevant guidance.

**Consent**

Where consent cannot be obtained, it is clearly recorded about the reasons and the necessity of sharing the information. Where possible, service users are aware of the information that is being transferred and are provided with a copy when requested.

**Transfer methods**

Where it is not possible for the information to accompany the service user then the information must be transferred in a secure and safe manner. It must be securely wrapped and when using a posting method, a proof of posting must be issued. The information should be receipted at the destination and the signed receipt sent back to the service provider. Where there is particularly sensitive information of a personal nature, our courier service should be used to ensure confidentiality.

**Training**

Staff are familiar with the requirements contained in the individuals support plan and risk assessment and would know where and how to access support and advice and are aware of the type and content of information to be shared.

This policy will be reviewed annually by the Director of Operations.

Signature: Date: