

## 15 Minute Care Episodes

### Review of the guidance for commissioners, staff and partners November 2015

#### 1. Review of the guidance

In April 2015, the Care Act came into force:

- Putting people's health and wellbeing at the centre of health and social care;
- Introducing prevention services;
- Increasing access to good information, advice and guidance; and
- Increasing access to independent advocacy.

In September 2015, guidelines from NICE about delivering homecare were published. These guidelines include recommendations for:

- Ensuring care is person centred;
- Providing information about care and support options;
- Planning and reviewing home care and support;
- Delivering home care including recommendations on length of visits;
- Joint working between health and social care;
- Ensuring safety and safeguarding people using home care services; and
- Recruiting, training and supporting home care services.

#### 2. Introduction

The nature of social care is changing rapidly with a greater emphasis on personalised services and choice. **In the longer term this needs to be supported by a change in commissioning arrangements that result in the delivery of care and support which is truly person centred and outcome focused rather than time and task orientated.**

This guidance has been developed to support staff in establishing good practice in the use of 15 minute care episodes during this transition to more flexible and outcome focused arrangements.

In November 2011 the Equality and Human Rights Commission produced the Close to Home report. This report sets out their specific concerns about human rights in home care for older people and the Commission's recommendations ahead of the Government's White Paper.

### **3. Activities during a 15 minute care episode**

Every episode of domiciliary care is a complex procedure calling for a range of interpersonal skills, understanding and the assessment of an individual's needs.

Within this context there is a place for the use of 15 minute care episodes when they can be used to deliver an appropriate care and support intervention to help a person meet their individual needs and outcomes.

The following guidance is intended to provide a framework in which consistency and good practice is established around the delivery of care within a 15 minute care episode.

#### Core activities

Any care episode (including 15 minute care episodes) will always require the support worker to carry out a number of core activities and individual assessments/requests for care and support must take account of these core activities. These activities include:

- Access to a persons home including greeting and verification of identity;
- Review of support plan and records about the persons current state of wellbeing;
- Enabling the person to express their preferences about the support they wish to receive;
- Risk assess the physical environment and support to be provided;
- Establish verbal or implied consent;
- Safely don, remove and dispose of appropriate personal protective equipment;
- Effective hand washing before and after interventions;
- Provide assistance whilst maintaining the person's dignity, comfort and privacy;
- Record the support provided and the person's current condition;
- Obtain the person's signature on appropriate documentation; and
- Leave the person's home secure.

#### Care and support activities

Specific tasks for a 15 minute care episode should always be determined through a person centred approach and this must be the underlying principle behind all care assessments.

Taking this into consideration the list of activities provided at Appendix A on their own could be considered appropriate for a 15 minute care episode along with the core activities that need to also be completed (as detailed above).

However, where an individual has limitations due to their cognitive and/or physical abilities even some of these activities on their own may not be appropriate within a 15 minute care episode. For example, this could be a person living with dementia or a person with chronic breathing difficulties.

The Close to Home report outlined above refers to some examples of where carers are being rushed and unable to finish activities allocated for a 15 minute care episode. It includes the following example of this from the United Kingdom Home Care Association:

*“A provider outside of London described the care specified by a Council for a 15 minute visit: ‘Prepare food as per service user request; prepare jug of drink; prompt him to drink, eat and take medication; ensure house clean if necessary’. The provider also noted the need to complete the care record within that time.”*

Where more than one care and support activity from those in Appendix A are being considered for a 15 minute care episode there needs to be a realistic assessment of what can be allocated considering the following:

- The core activities that need to be completed;
- Person’s capabilities and their desired outcomes;
- Time required to complete the primary activity from Appendix A; and
- Time available to realistically carry out any further activity from Appendix A whilst maintaining the persons dignity, comfort and privacy.

The NICE guidelines recommend that calls shorter than 30 minutes should only be completed if:

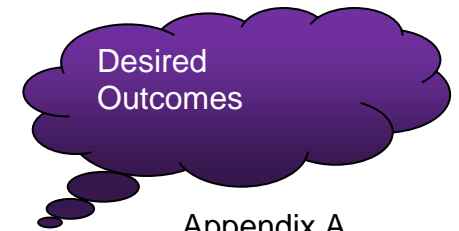
- The home worker is known to the person and;
- The visit is part of a wider package of support and;
- It allows enough time to complete specific, time limited tasks or to check if someone is safe and well.

The following activities are considered inappropriate to be carried out during a 15 minute care episode:

- Bathing;
- Hoisting;
- Encourage and support to eat a prepared meal/drink;
- Assisting to dress / undress;
- Assist to toilet / with toileting; and
- Assist with continence aids including continence pads and catheter care (includes elements of personal care).

#### **4. Communication**

A two-way proactive dialogue and working relationship needs to exist between care management/operational teams and providers. This needs to be built on an open and honest relationship that allows either party to monitor and challenge the appropriateness of the care and support being delivered.



Appendix A

**Care and support activities suitable for consideration in 15 minute episode**

Any one of the tasks below could be considered suitable for a 15 minute care episode in conjunction with the mandatory core activities for all client groups with consideration to cognitive and / or physical abilities.

<b>Core activities (mandatory)</b>	<b>Safely don, remove and dispose of appropriate personal protective equipment</b>	<b>Nutrition</b>	<b>Domestic activities</b>	<b>Medication</b>	<b>Mobility</b>	<b>Personal care activities</b>	<b>Monitoring wellbeing &amp; safety</b>
Greeting and verification	Effective hand washing	Prompt for meal and / or drink	Washing up and tidying kitchen	Prompt for medication	Assist in or out of bed	Prompt for personal hygiene	Social support
Review support plan	Provide assistance whilst maintaining the persons dignity, comfort and privacy	Support to make meal and / or drink	Empty bins	Administer medication	Assist with transfers	Assist with washing	Safety or security check
Allow the person to express preferences	Record the support provided and the persons current condition	Prepare meal and /or drink	Empty and clean commode	Applying creams and lotions	Assist to mobilise around the house	Emptying of catheter bags	Telecare check
Risk assessment of environment	Obtain the persons signature on appropriate documentation		Taking clothes out of washing machine and hanging to dry	Administer eye drops			Telephone check or reassurance call
Obtain consent	Leave the persons home secure						

## Exceptions

- Consideration needs to be given to a person’s cognitive and or physical abilities regardless of their client category, as some of these tasks maybe considered inappropriate as part of a 15 minute episode.
- Where multiple care and support activities are being considered there needs to be a realistic assessment of what can be allocated considering the following:
  - The core activities that need to be completed;
  - Person’s capabilities and their desired outcomes;
  - Time required to complete the primary activity from Appendix A; and
  - Time available to realistically carry out any further activity from Appendix A whilst maintaining the persons dignity, comfort and privacy.

Bathing	Hoisting	Encourage and support to eat a prepared meal/drink	Assisting to dress / undress	Assist to toilet / with toileting	Assist with continence aids including continence pads and catheter care (includes elements of personal care)
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