

Residential Care (WITH & WITHOUT NURSING) - Service Category Overview [A3 Format]

Please see Appendices B & C for more detailed descriptions of the type and level of needs applicable in each category.

Service Category	Residential – low level needs	Residential – medium level needs	Residential – high level needs	Residential – advanced dementia and mental health needs (without nursing)	Nursing	Nursing – advanced dementia and mental health needs	Advanced / Complex Nursing
Number	0	1	2	2a	3	4	5
1. Needs Summary (COC2) ¹	The person <u>will</u> have mainly physical care needs , is likely to require little or no support in many areas of need and is able to cooperate with care where needed. We would expect that in most cases, these needs would be supported at home.	The person <u>will</u> have physical care needs and may also have some cognitive impairment or other mental health care needs.	The person <u>may</u> : <ul style="list-style-type: none"> Have a cognitive impairment and/or <u>middle or later stage dementia</u>² or other mental health care needs, which may include behaviours that require the development of a Positive Behaviour Support Plan, AND/OR Have physical care needs requiring support in several areas of need. 	The person <u>will</u> : <ul style="list-style-type: none"> Have a cognitive impairment and/or be physically frail AND have middle or later stage dementia or other mental health care needs, which may require the development of a Positive Behaviour Support Plan AND have care and support needs which include those outlined in Category 2 (Residential – high level needs) AND require significantly enhanced service inputs to meet the person’s needs and to keep them and others safe 	The person <u>may</u> : <ul style="list-style-type: none"> Have a cognitive impairment and/or be physically frail AND Have care and support needs which include those outlined in Category 2 [Residential – high level needs] AND <u>WILL</u> include a requirement for health care tasks that can: <ol style="list-style-type: none"> only be met in a care home with nursing OR will be <u>most appropriately</u> met in a care home with nursing. OR Have requirement for health care tasks that can: <ol style="list-style-type: none"> only be met in a care home with nursing OR will be <u>most appropriately</u> met in a care home with nursing. 	The person <u>will</u> : <ul style="list-style-type: none"> Have a cognitive impairment and/or be physically frail AND have middle or later stage dementia or other mental health care needs, which may include behaviours that require the development of a Positive Behaviour Support Plan AND have care and support needs which include those outlined in Category 2 [Residential – high level needs] AND Category 3 [Nursing] AND include a requirement for health care tasks that can: <ol style="list-style-type: none"> only be met in a care home with nursing OR will be <u>most appropriately</u> met in a care home with nursing. 	The person <u>may</u> : <ul style="list-style-type: none"> Have a cognitive impairment and/or be physically frail AND have middle or later stage dementia or other mental health care needs, which may include behaviours that require the development of a Positive Behaviour Support Plan AND have care and support needs which include those outlined in Category 2 [Residential – high level needs] AND Category 3 [Nursing] AND include a requirement for health care tasks that can: <ol style="list-style-type: none"> only be met in a care home with nursing OR will be <u>most appropriately</u> met in a care home with nursing, AND require significantly enhanced service inputs to meet the person’s needs and to keep them and others safe. OR Have a requirement for health care tasks that can: <ol style="list-style-type: none"> only be met in a care home with nursing OR will be <u>most appropriately</u> met in a care home with nursing. AND require significantly enhanced service inputs to meet the person’s needs and to keep others safe.

¹ In all cases, service users will be people who are not able to reside in their own homes, whether on a short or long-term basis AND have care and support needs that are prevalent 24/7 and include night-time care needs AND have needs which cannot realistically be met in any other way, for example, through use of Assistive Technology, aids and equipment in their own home and/or because the frequency or unpredictability of the person’s needs, makes support at home non-viable.

² [The progression, signs and stages of dementia | Alzheimer's Society \(alzheimers.org.uk\)](http://www.alzheimers.org.uk)

Service Category	Residential – low level needs	Residential – medium level needs	Residential – high level needs	Residential – advanced dementia and mental health needs (without nursing)	Nursing	Nursing – advanced dementia and mental health needs	Advanced / Complex Nursing
2. Key differences in service requirements	<u>Little or no care and support</u> needed.	<u>Regular</u> care and support needed.	<u>Timely and frequent</u> care and support needed.	<u>Timely and frequent</u> care and support needed.	<u>Timely and frequent</u> health care interventions needed.	<u>Timely and frequent</u> health care interventions needed.	<u>Timely, frequent and sustained</u> health care interventions needed.
					Risks to the person’s health are moderate or high requiring the oversight and monitoring of a Registered Nurse.	Risks to the person’s health are moderate or high requiring the oversight and monitoring of a Registered Nurse.	Risks to the person’s health are high requiring the oversight and monitoring of a Registered Nurse.
	No risks around behaviours and non-compliance with care.	Risks around behaviours and non-compliance with care can be managed within planned interventions.	Risks around behaviours and non-compliance with care may not be manageable solely within planned interventions.	Risks around behaviours and non-compliance with care unlikely be manageable solely within planned interventions and require a prompt and skilled response that may be outside the range of planned interventions.	Risks around behaviours and non-compliance with care can be managed within planned interventions.	Risks around behaviours and non-compliance with care may not be manageable solely within planned interventions.	Risks around behaviours and non-compliance with care may not be manageable solely within planned interventions.
	No risk to the service user or others.	Level of risk to the service user or others is minor .	Level of risk to the service user or others is moderate .	Multiple risks to the service user or others which may be moderate or high and which may not necessarily be reduced by skilled interventions.	Level of risk to the service user or others is minor .	Level of risk to the service user or others is moderate .	Level of risk to the service user or others is moderate .
3. Estimated number / % long term placements per year, area-wide ³	15 (3%)	146	240	44	76	58	57
4. Maximum assumed direct care hours Per Service User Per Week (PRPW)	23.6	25.0	28.6	40	26.8	27.8	40
5. Maximum assumed nursing care hours Per Service User Per Week (PRPW)	N/A	N/A	N/A	N/A	7.9	7.9	15

³ Based on total annual demand for long term placements at Jul-23.