Admission Procedures for Residential Care Homes for People with Disabilities

Guidelines on “Good Practice”

BACKGROUND

The Steering Group on Admission Procedures for Residential Care Homes for People with Disabilities, comprising representatives from the Health and Welfare Bureau, Hospital Authority, non-governmental organizations, parent groups, Hong Kong Council of Social Service and the Social Welfare Department, aims to review the admission criteria and to improve the admission process for different types of residential care homes for people with disabilities. The Steering Group has decided to conduct two surveys in order to gain a better understanding of the current situation. The first survey on assessment mechanism and admission flow currently adopted by residential homes has been completed, while the second survey on client profiles is still underway. Based on the findings of the first survey, the Steering Group has endorsed the following guidelines on “good practice”. Referrers and residential care homes are encouraged to comply with these guidelines as far as possible.

GUIDELINES ON “GOOD PRACTICE”

Application of the guidelines

2. The guidelines apply to both referrers and residential care homes for people with disabilities, with details as follows.

Overall transparency

3. As required under the Service Quality Standards (SQS), agencies should publish information introducing their services, admission/assessment procedure and criteria, rules and regulations, fees and charges, etc. Such information should be user-friendly, e.g. information on the admission/assessment procedure may also contain flow-charts on each step of the process, including actions, timeframe and parties to be involved. While the admission procedures should retain specific details for internal use, those published for public consumption could be more simplified and concise. Copies should be made available to the applicants, referrers, parents, guardians and carers.
Review and updating of referral

4. As stipulated in the Manual of Procedures for the Central Referral System for Rehabilitation Services (CRSRehab), referrers are required to update any change of circumstances that may affect the placement request, such as type of disabilities, type of placement required, location preference, change of caseworker, etc. This will ensure that the placement request is still valid.

Team assessment and rejection cases

5. Assessments should be conducted by a team (e.g. social worker and other professionals) which should be capable of making decisions on acceptance cases. Rejection cases should be handled by a higher-ranking staff. It is noted that marginal cases should have better chances under this two-tier structure. As required under the SQS, criteria and concrete reasons for rejection should be clearly spelt out and made known to the applicants, referrers, parents, guardians and carers, to minimize any hard feelings about rejection. In the case of rejection, agencies should discuss alternative plans with the applicants and their parents/guardians/carers and inform the referrers accordingly. The follow up action rests with the referrers.

Appeal mechanism

6. As required under the SQS, an appeal mechanism should be in place and made known to applicants, referrers, parents, guardians and carers, in particular, where applications are rejected.

Written agreement

7. An agreement specifying the terms and conditions of the placement and services/facilities to be provided should be signed by the agencies and applicants/parents concerned.

Consent forms

8. Various consent/authorization forms (as regards medical care, administration of medication, application of physical restraints, sharing of information, outdoor activities, etc.) should, where appropriate, be signed by applicants/parents/guardians concerned.
Intake check-list

9. A checklist on clients’ self-care abilities should be prepared, including information on personal hygiene, toileting, dressing, feeding, mobility, social skills, etc. Such information will be useful during the intake stage.

Adjustment period

10. NGOs should accept every case referred by the CRSRehab system and admit clients according to their level of disability, however, it is noted that some clients may need more assistance to settle in the new environment.

WAY FORWARD

11. The long-term target is to adopt a unified assessment tool for residential placement.

Social Welfare Department
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