



Adult Social Care and Health

**Referring Clients with Moving
and Handling Needs for
Assessment Review**

Version 4

Version: 4 FOI Status: Public	Referring Clients with Moving and Handling Needs for Assessment and Review	Originally Issued: Nov 2015 Version 4 Issued: May 2023 Review Due: May 2025 Author: Stephanie Huddleston
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This document will be reviewed on a regular basis – if you would like to make any comments, amendments, additions etc, please email ASCH.adultcare.policy@derbyshire.gov.uk

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Introduction

The responsibility for establishing the client's current difficulties and initial visit lie with the care coordinator/care provider. An initial assessment should be undertaken by the care provider which clearly identifies the current difficulty, equipment already in situ, and investigates any alternative solutions prior to a referral for moving/handling.

Care staff should have received appropriate training. The care provider is responsible for advising care staff on correct techniques and implementing an existing personal handling plan.

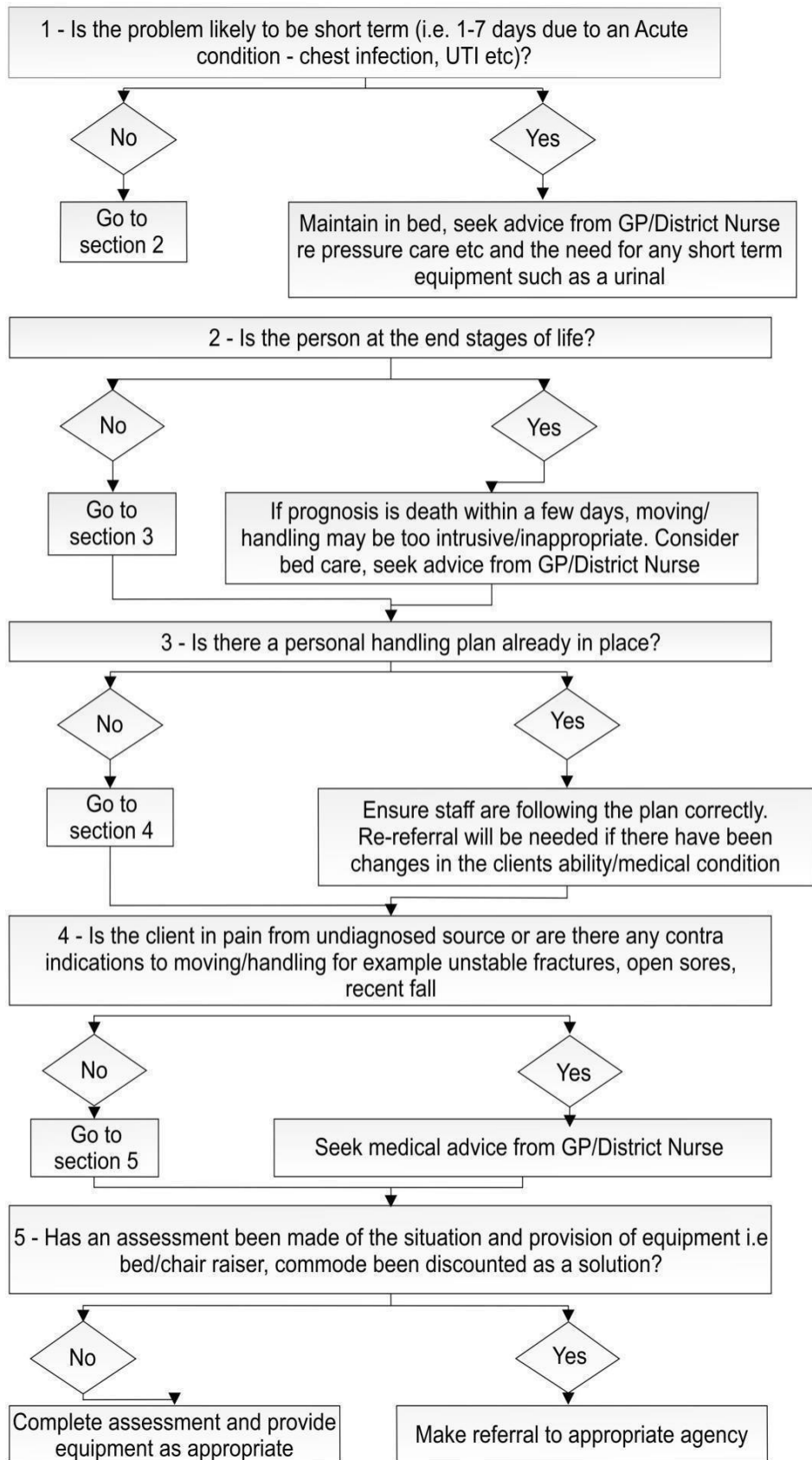
Consideration should be given by the care coordinator/care provider to alternative equipment, within their prescribing and training framework e.g., chair raisers, bed raisers, height adjustable bed, which may resolve the problem, prior to making a referral for specialist input.

Referrals for specialist equipment e.g., bespoke chair, will not be accepted as an appropriate moving/handling referral.

Referrals will be prioritised in accordance with presenting risk. The care coordinator/provider is therefore responsible for interim measures to ensure safety of staff and clients e.g., bed care.

Check if community therapy is required.

See the [Manual Handling Operations Policy & Guidance](#) for further information and support.



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Completing a Moving and Handling Referral

Referrals for clients living in their own homes should be directed to:

Derbyshire Community Health Services (DCHS) - if the person presenting with moving and handling need has rehabilitation potential, and improvement is likely with intensive therapy goals, the referral should be made to DCHS.

If the intervention is likely to avoid admission to residential/nursing home or hospital (including re-admissions, for example, when a discharge has failed), it is important to consider current worker involvement and who would be best placed to intervene, as this is a higher priority and should be referred to the current worker e.g., within Adult Social Care, (if there is a worker involved), or alternatively refer to DCHS via Community Access Point.

DCHS works with individuals' rehabilitation. Rehabilitation is the action of restoring someone to health or normal life through training and therapy. It has a more open-ended time limit and may include the use of activity other than activities of daily living, to improve strength, range of movement or stamina.

OR

Derbyshire County Council (DCC) Adult Social Care Prevention and Personalisation teams - for people who have a progressively deteriorating condition, are variable in their condition or are likely to improve with short-term reablement services.

Please note, not all teams across Derbyshire have an occupational therapy short-term service yet, therefore referrals will need to be discussed on a case-by-case basis with the duty worker.

Adult Social Care works with individuals' reablement. Reablement is a time limited intensive intervention predominantly delivered by social care services. It is a short-term service which specifically aims to help people retain or regain skills, confidence, and ability with personal and domestic activities of daily living and reach their maximum potential for independence. This may mean the person only requires care input from services for a short space of time.

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Roles and Responsibilities

All DCC care home managers and deputy managers (from here on known as assessors), including those working in community support bed settings, should have attended all relevant DCC moving and handling training, including an annual update. They are expected to:

- have reviewed the current personal handling risk assessment (DIAG) and ensured that carers are adhering to the plan
- (if carers are now required to provide some basic hands-on assistance) assess the risks of manual tasks (sit / stand / transfer / bed mobility) from the TILEO (task, individual (carer), load (person / client), environment, other) assessment criteria and complete a personal handling risk assessment (DIAG)

Assessors must also be able to identify why and when the current personal handling risk assessment (DIAG) is not meeting an individuals' needs or those of the carer and either:

- complete a basic assessment with a new personal handling risk assessment (DIAG), which may also include alternative DIAG safe manual methods and / or contract equipment via Medequip within your prescribing responsibilities and authorisation limits

OR

- complete an interim basic personal handling risk assessment (DIAG) which may also include contract equipment via Medequip within your prescribing responsibilities and authorisation limits and then also complete a DIAG referral for personal handling risk assessment e.g., for an OT or other appropriate professional

N.B. basic personal handling risk assessment (DIAG) example – when care is required on the bed using a manual roll method or when a zimmer frame needs to be left accessible for the person to use independently or a Carer needs to assist the person to stand using recognised DIAG safe manual methods.

DIAG Forms

The personal handling risk assessment and environmental risk assessment is now a whole document which should be completed by one person. If this is basic moving and handling the assessor would complete the whole document. If it is more complex and additional equipment is required, the occupational therapist (OT) would complete the whole document.

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Referrals should be made to OT by completing the DIAG referral for personal handling risk assessment document, in the following scenarios:

- there are complex tasks or complex equipment
- new equipment is needed
- unfamiliarity with operations (use of equipment)

Referrals for people living in DCC care homes who require a moving and handling assessment from Adult Social Care occupational therapy /moving and handling assessor should be directed to the area Prevention and Personalisation (P&P) team.

Some private care home managers, but not all, have also attended relevant moving and handling training and are competent in non-complex moving and handling assessments. This should be checked on a case-by-case basis by Adult Social Care when screening referrals.

General advice is that referrals should only be made to DCHS:

- where the person needs a therapist to assess for specialist equipment or nonstandard techniques related to assisting a person to move
- OR**
- the person needs rehab due to change in their function in relation to mobility and transfers

Both constitute an appropriate referral - a personal handling risk assessment and plan will be provided where appropriate to reflect changes in techniques and / or equipment

A clear picture of the situation will need to be given including:

- what has changed
- who is concerned
- have there been changes in medication or client need
- previous steps taken
- access details, etc., for the property as appropriate
- carers contact details including care provider/PA, package of care and schedule (important when coordinating delivery of equipment, as is time for formal carers to be present)
- is it one care call or all calls, is it regular carers
- is there an in-house moving and handling advisor/trainer
- height and weight of client
- functional ability prior to referral
- current medical condition and diagnosis

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- existing equipment in situ/being used
- is there a current moving and handling plan and who was this completed by
- current moving and handling difficulty
- contingency plans put into place
- information/advice from GP or other health professional
- has the client recently been discharged from hospital/rehab/respice
- consideration of mental capacity

It is also important to refer to the Manual Handling Operations Policy & Guidance (particularly Section 7).

MOSAIC Workflow for Referring Clients with Moving & Handling Needs

Making a referral (check for changes but at April 2023, this was the current way to refer)

1. On the person summary screen click “**start**”, then “**new...**” and then select “**referral for personal handling**”
2. NOTE: Please **DO NOT** use the “additional worker referral 2014”
3. A new window will open with a tab called “next actions form”: Ensure section 1 (subject details) displays the correct client
4. Click the “forms and letters” icon and select “DIAG referral for a personal handling risk assess”
5. Complete as much of the form as possible: If any information is not known, reasonable attempts must be made to obtain this, prior to a referral being made
6. Responsibility for obtaining the current moving and handling plan lies with the referrer and this plan must be sent along with the referral
7. Click back into the “next actions form” tab
8. Click the “add” button in the “next actions” section, and then select the “priority” accordingly
9. On the “select action” drop-down box, select “occupational therapy assessment”
10. A further option will now appear: Select the relevant team from the “pass to team” dropdown box (do not select the “moving and handling team”)
11. Add any “notes” if required
12. Click “add and close”

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13. Click the “finish” icon

No further action required by care co-ordinator / area OT regarding a referral.

Author History

Approval and Authorisation History

Name	Job Title	Date
Authored by: Jane Haslam	Principal Staff Development Officer	November 2015
Approved by: Cate Bennet	Senior Practitioner	November 2015
Authorised by: Quality and Compliance Group		November 2015

Change History

Version	Date	Name	Reason
Version 1	November 2015	Jane Haslam	New guidance issued
Version 2	October 2018	Bev Capel	Review
Version 2a	March 2021	Stephanie Huddleston	Review, no major changes
Version 3	January 2022	Stephanie Huddleston	Addition of MOSAIC workflow
Version 4	May 2023	Stephanie Huddleston	Review - changes to referral checklist