

TEMPLATE LETTER 1

Important: Notice to request review of care plan in accordance with Devon County Council Residential and Nursing Home Care Pre-Placement Agreement (version 0.2 18 April 2018) (“Pre-Placement Agreement”)

Provider:

Care Home:

Family Member Name:

ID:

Date of admission to Home:

Individual Contract Date:

Dear Teams,

We are writing to you in relation to the current care plan for [] who is currently residing at [].

[First of all, we would like to express that it has been a delight to support [] who has formed strong relations with the team since []. We understand [] has expressed positive commentary around her stay and would very much like to continue.]

Notwithstanding this, as you are aware we are under a duty to monitor the care plan and corresponding support levels for our residents. A recent review of []’s needs including contemporaneous care records by our Clinical Governance Team have identified that the support requirements for this person have increased significantly beyond the scope of the contracted service provision. Consequently their care needs can no longer be safely met by the current contractual arrangements. *[further detail and evidence to support the position included here]*.

Clause D8.3 of the Pre-Placement Agreement permits us to request a review if the care needs of a service user have changed. If the outcome of the review is that the Individual Contract is amended then the amendment will be backdated to the date at which the review was requested.

As you are aware, paragraph 13.20 of the Care and Support Statutory Guidance places a duty on the local authority to conduct a review if a request for one is made. Local authorities have a duty to “*act promptly after a request has been received*”.

Please accept this letter as a formal request for a review of []’s care needs within 28 days of the date of this letter. If the Individual Contract is amended, then the amendment will be back dated to the date of this letter.¹

Please note we are mindful that certainty and continuity of care is important for this person and all their stakeholders. We wish to stress that it is not our preference to cease supporting this person or to require them to move to another provider. This is particularly so given the fact that this person is settled with us and any disruption to the continuity of care could be highly detrimental to their health and well-being. However as a responsible provider we are mindful of

¹ RWK Note: assumption here that the care needs of the resident have not changed to the extent that their needs are outside of the category of registration held by the home. If this is the case, notice under the Individual Contract will need to be given.

our regulatory and contractual responsibilities and those of the local authority under the Care Act 2014 and its associated statutory guidance.

In accordance with our responsibilities under the Care Act, we have consulted with [] and their representatives ahead of sending this letter. A copy will be provided to them.

We look forward to confirmation of a date for []'s reassessment within 28 days of the date of this letter.

Please kindly acknowledge receipt of this email.

Yours sincerely

Cc: [resident (if capacity), resident's representatives]

Enc: [evidence of assessment]