



ALL WARDS

WARDS AFFECTED

**FORWARD TIMETABLE OF CONSULTATION AND MEETINGS:
CABINET**

2 April 2007

**FAIR ACCESS TO CARE SERVICES
ACCESS, ELIGIBILITY AND PROVISION OF SOCIAL CARE SERVICES**

Report of the Corporate Director, Adults & Housing Department

SUPPORTING INFORMATION

1. Current Arrangements

- 1.1 The City Council has a duty under S47 of the NHS & Community Care Act 1990 to assess people who appear to need community care services, and on the basis of that assessment decide whether it is necessary for the Council to provide services in order to meet identified needs. Since community care arrangements were introduced in 1993 assessments have been differentiated between assessments for services on the one hand and full needs assessments on the other, on the basis of presenting needs.
- 1.2 The difficulty with this approach is that it did not provide consistency in the way people with similar risks to their independence and need for community care services were responded to i.e.:-
- Previous arrangements for differential assessments did not always ensure that an holistic approach was made to assessing a person's needs, risks and circumstances when allocated a service focused assessment;
 - Eligibility criteria for one service area may be tighter than another based on the levels of demand and the availability of resources; it also does not facilitate the development of comparative performance data.
- 1.3 Similarly the lack of a consistent and effective case review policy in adult services has meant that continued eligibility for service provision had not always been determined and some people have continued to receive services after their circumstances have improved and risks have diminished.

2. Principles of the FACS Guidance

- The Council should not operate eligibility criteria for specific types of assessment, but should tailor the assessment to the person's needs and circumstances (these issues will be addressed through the implementation of the Single Assessment Process).
- The Council should make only one eligibility decision with respect to people who have been assessed for community care services i.e. – are they eligible for social care services or not.
- The Council should promote a non-discriminatory approach to assessment and service provision by ensuring eligibility is based on needs and risks to independence, and not, for instance, on age, disability, or service availability.
- The Council should not operate eligibility criteria for different services, but should arrange the most appropriate and cost-effective help by matching services to eligible needs.
- People's presenting needs should be assessed and their eligible needs prioritized according to the risks to their independence in both the short and medium term if support is not provided, taking account of a longer-term preventive view of needs and circumstances.
- People whose needs have critical consequences for their independence and/or safety should be supported ahead of those with needs that have substantial consequences and so on.
- People's needs and circumstances must be reviewed on a regular basis to determine continued eligibility for services and appropriateness of service provision.
- The Council is required to focus resources and other local factors on helping those in greatest immediate or longer-term need, and be prepared to move resources from one budget head to another where necessary.
- The Council is required to review its eligibility criteria on a regular basis, and having determined its criteria it should ensure that services are in place to meet eligible needs.
- The Council should promote a wider community approach to prevention, involving Primary Care Trusts, supporting people and health promotion.

3. The Eligibility Framework

3.1 The eligibility framework has been constructed to enable the types and levels of risk in areas of life, which are central to a person's independence and well being to be identified.

3.2 The levels of risk have been graded into four bands that describe their seriousness of the risk to a person's independence, or other consequences, if needs are not addressed. The four bands specified by the DoH are:

- Critical
- Substantial
- Moderate
- Low

3.3 Priority One: Critical

- life is, or will be threatened
- significant health problems have developed or will develop
- there is, or will be, little or no choice and control over vital aspects of the immediate environment
- serious abuse or neglect has occurred or will occur
- there is, or will be, an inability to carry out vital personal care or domestic routines
- vital involvement in work, education or learning cannot or will not be sustained
- vital social support systems and relationships cannot or will not be sustained
- vital family and other social roles and responsibilities cannot or will not be undertaken.

3.4 Case Example (Critical)

Mrs A has Alzheimer's disease and physical health problems related to her heart condition and incontinence. Mrs A is disorientated in time and place, she requires constant prompting to carry out daily living tasks. Mrs A also requires assistance with all personal care, including toileting needs and all domestic tasks.

Mrs A has no insight so is not aware of, or able to express her own needs. If left alone Mrs A is at risk of wandering, malnutrition, self-neglect and harm from inappropriate use of domestic appliances.

Mr A is the main carer and in addition to this Mrs A receives home care twice daily to assist with personal care and managing her incontinence. Mrs A attends day care once weekly. There are no other family members in Leicestershire. Mr A has had a fall and has been admitted to hospital today.

Mrs A is assessed as having critical risk to independence so has eligible needs. Mrs A has little or no choice or control over vital aspects of the immediate environment; she has an inability to carry out vital personal care or domestic routines. If left in this situation it is likely that serious neglect will occur and life will be threatened.

An urgent assessment is carried out, it is likely that Mrs A would be admitted to respite care in a residential setting.

3.5 Priority Two: Substantial

- there is, or will be, only partial choice and control over the immediate environment
- abuse or neglect has occurred or will occur
- there is, or will be, an inability to carry out the majority of personal care or domestic routines
- involvement in many aspects of work, education or learning cannot or will not be sustained
- the majority of social support systems and relationships cannot or will not be sustained
- the majority of family and other social roles and responsibilities cannot or will not be undertaken.

3.6 Case example (Substantial)

Mrs A has Alzheimer's disease and physical health problems related to her heart condition and incontinence. Mrs A is disorientated in time and place, and requires constant prompting. She also requires assistance with all personal care, including toileting needs and all domestic tasks.

Mrs A has no insight so is not aware of, or able to express her own needs. If left alone Mrs A is at risk of wandering, malnutrition, self-neglect and harm from inappropriate use of domestic appliances.

Mr A is the main carer and in addition to this Mrs A receives home care once daily to assist with personal care and managing her incontinence. Mrs A attends day care once weekly. There are no other family members in Leicestershire.

Mr A has his own health issues and is feeling under a great deal of carer strain. Mrs A's GP has advised him to rest. Mr A requests support to reduce his caring responsibilities thus enabling him to continue to care for his wife.

Mrs A is assessed as having substantial risk to independence so has eligible needs. Although Mrs A's needs are identical to those outlined in the Critical example the support available to her from other sources (husband) is different so her needs are no longer Critical. As support offered Mr A is reducing, Mrs A is at risk of deterioration due to an inability to carry out the majority of personal care or domestic routines. The majority of family and other social roles and responsibilities cannot be maintained due to level of carer strain.

An assessment is carried out and it is likely that the support package would be increased for instance, to include additional home care and day care. A carer assessment would be carried out and carer support offered.

3.7 Priority Three: Moderate

- there is, or will be, an inability to carry out several personal care or domestic routines
- involvement in several aspects of work, education or learning cannot or will not be sustained
- several social support systems and relationships cannot or will not be sustained
- several family and other social roles and responsibilities cannot or will not be undertaken

3.8 Case example (Moderate)

Mr B has a diagnosis of schizophrenia and has had regular hospital admissions as a result. He regularly sees a psychiatrist and has Community Psychiatric Nursing support. Mr B lives alone but has a supportive family network in Leicester.

Mr B is independent with personal care tasks but needs support and prompting with domestic tasks. Mr B's family assist with shopping and budgeting and are happy to continue to do so.

Mr B's CPN has referred him for a community care assessment and has requested support with cleaning and gardening.

Mr B is assessed as having moderate risk to his independence so does not have eligible needs. Although there is an inability to carry out several domestic routines Mr B's other needs are met either independently or by his family. Mr B will be offered advice re-accessing support with gardening and cleaning via the voluntary and private sectors.

3.9 **Priority Four: Low**

- there is, or will be, an inability to carry out one/two personal care or domestic routines
- involvement in one/two aspects of work, education or learning cannot or will not be sustained
- one/two social support systems and relationships cannot or will not be sustained
- one/two family or other social roles and responsibilities cannot or will not be undertaken.

3.10 **Case example (Low)**

Mr B has a diagnosis of schizophrenia and has had regular hospital admissions as a result. He regularly sees a psychiatrist and has Community Psychiatric Nursing support. Mr B lives alone.

Mr B is independent with personal care and domestic tasks. Mr B has a reluctance to allow his family to support him so has tried to manage his own finances. He has struggled with this. As a result he has rent arrears and is at risk of eviction from his local authority flat.

Mr B is assessed as having a low risk to his independence so does not have eligible need. There is an inability to carry out one or two domestic routines. Mr B's family are able and willing to support him but he has continued to decline this support. This has caused a deterioration of one or two family and other social support systems. Mr B does however meet all other needs independently.

Mr B is referred to the appropriate housing support team within the housing department of Leicester City Council.

3.11 The four areas identified by the DoH as being central to maintaining a person's independence are:

- Autonomy
- Health and safety
- Managing personal and other daily routines
- Involvement in family and wider community life

These four factors have been used to construct a framework to identify the risks attached to various needs and circumstances within different areas of independence. The Council's responsibilities are to determine which of these needs and circumstances will be eligible for the provision of social care services in Leicester.

3.12 There are certain parameters, which need to be taken into account:

- the threshold for eligibility can only be set between the levels of risk to independence and not between the areas of independence, i.e. between moderate risk and low risk, for instance, or between moderate risk and substantial risk.
- the Council must provide services to people whom it has assessed as having an eligible need for social care services, i.e. if the Council sets the threshold for eligibility between the Moderate and Low bands, it must ensure that it has the resources to meet the needs identified within the Moderate, Substantial and Critical bands. If it does not it would have to set the threshold higher, say between the Moderate and Substantial bands.
- Where a person has a variety of needs and circumstances, some which are eligible for social care support, and some which are not, the Council is not obliged to meet those needs which fall below the threshold of eligibility, but it may consider it appropriate to do so in certain circumstances for preventative reasons.
- The Council is unable to modify the components of the risk bandings (identified in bold in the framework) as these have been prescribed by the DoH, but the Council can describe the types of needs and circumstances it considers fall within the different levels of risk and areas of independence, and these should be reviewed on a regular basis.

4. The Impact of FACS on Resource Management

- 4.1 The FACS eligibility framework was welcomed as an appropriate and timely instrument to assist the Council in managing its limited resources. The benefits of the framework are in its relevance to adults of all ages and with any disabling condition who approach the Council for social care support, and it provides the Council with a legitimate and transparent means of determining resource allocation and eligibility for service based on the availability of resources.
- 4.2 Although the Council does not operate a formal prioritisation system for case allocations within adult services, the eligibility framework enables new referrals to be prioritised in terms of the perceived risks to a person's independence based on presenting needs; and for assessed needs and circumstances to be prioritised and recorded in terms of risk and eligibility for service provision.
- 4.3 This enables a new set of performance data to be collated appropriately deployed, and the extent to which particular service areas may be over or under provided for, within the parameters of what the Council has determined as eligible need.

- 4.4 Once the Council has determined the level of risk and the types of need that are eligible for social care support, it is the responsibility of social work staff to apply this, and assess the needs and circumstances of individual's to determine the level of risk which these pose to their independence, evaluated against the risks to their autonomy, health and safety, ability to manage daily routines, and involvement in family and community life. They should consider which risks cause serious harm, and which risks may be acceptable or viewed as a natural and healthy part of independent living.
- 4.5 By identifying the risks attached to various needs and circumstances the assessor is able to determine whether the individual has eligible needs for social care services using the eligibility framework. When determining eligibility the assessor must take account of the support that a person may already be receiving from carers, family members, friends and neighbours, and of the risks faced by them in their caring role.
- If, for example, a person is unable to perform several personal care tasks, but can do so with the help of a carer, and the carer is willing and able to continue caring both currently and in the longer-term, then the person should not be perceived as having eligible needs for social care services.
 - If, on the other hand, the caring relationship is close to breakdown, the person's needs would be eligible for social care services, as there would be a critical risk of the person losing their independence and of the carer developing a significant health problem.
- 4.6 Where a person has eligible needs a care plan will be formulated to arrange for the provision of appropriate services tailored to their particular circumstances, and a decision made about the appropriateness of direct payments. Once the Council has decided that it is necessary to provide services to meet a person's eligible needs it is under a duty to provide those services.
- 4.7 Given the current levels of commitments, activity levels and limited availability of resources, it is perceived that the Council would face serious difficulties in providing care services to meet the needs of people whose circumstances have been assessed as presenting a moderate risk to their independence. The appropriate threshold for determining eligibility for social care services is considered to be between the Moderate and Substantial Bands of risk. The implications of this require the Council to provide social care services to any person whose assessed circumstances present a critical or substantial risk to their independence if services are not provided.

5. Impact on Service Users

- 5.1 Generally the Council falls in line with most Local Authorities in establishing the eligibility threshold at 'critical' or 'substantial'. This has meant that those people with a 'moderate' risk to independence have been assisted to seek alternative ways of meeting those needs from other organizations.

6. Monitoring of FACS Performance

6.1 The purpose of eligibility criteria is to support the most effective and efficient use of available resources and to ensure consistency and fairness across the city and across service user groups. It is therefore important that the application of the eligibility criteria is carefully monitored and reviewed on a regular basis.

6.2 The FACS guidance requires the Council to audit and monitor its performance of fair access to care services by:

- gauging the extent to which different groups are referred and following assessment go on to receive services;
- monitoring the quality of the assessment and eligibility decisions of their staff;
- monitor which presenting needs are evaluated as eligible needs and which are not;
- auditing service effectiveness with reference to care plans and reviews;
- Monitoring the timing and frequency of reviews.

6.3 This will be achieved through the performance management and quality systems, which include:

- Fair Access and Quality of Service Users and Carers performance information within National Performance Assessment Framework (PAF)
- Feedback from Carer and Service User Groups
- Customer satisfaction and feedback surveys
- Analysis and evaluation of Complaints and Compliments
- Internal Audit and inspection processes
- Staff supervision and appraisal system
- Information from external inspections and audits such as, Social Services Inspectorate, District Audit and the Best Value Inspectorate
- Equality Impact Assessment Process

7. Reviewing the Eligibility Threshold

7.1 The FACS guidance requires the Council to review its eligibility criteria annually, and it will therefore be possible to adjust this if the resource position changes or a more accurate assessment of the position can be made.

8. Headline Financial and legal Implications

OTHER IMPLICATIONS	YES/NO	PARAGRAPH REFERENCES WITHIN SUPPORTING INFORMATION
Equal Opportunities Policy	Yes	Throughout report
Sustainable and environmental	No	
Crime and disorder	No	
Human Rights Act	Yes	Throughout report
Elderly/People on low income	Yes	Throughout report

9. Background Papers

- Local Authority Social Services Act 1970, Section 7(1)
- Health: Continuing Care: HSC 2001/015: LAC (2001) 18; Section 31: Health Act 1999 Flexibilities
- Children and Families: Children Act 1989 and the “Assessment Framework”
- Carers: “Carers and Disabled Children Act 2000: a Practitioners Guide to Carers Assessments”
- Road Traffic Act 2000
- Rights and Discrimination: Sex Discrimination Act 1975; Disability Discrimination Act 1995; Human Rights Act 1998; Race Relations (Amendment) Act 2000
- Information Collection and Sharing Common Law Duty of Confidentiality; Data Protection Act 1998; Human Rights Act 1998; Caldicott Guidance.
- Report to the Adult & Community Service Scrutiny Committee on 1st November 2006.

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