

Leicester  
City Council

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

**Cabinet**

**9<sup>th</sup> March 2009**

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

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#### **Report of the Service Director, Adults & Housing Department**

#### **1. Purpose of Report**

- 1.1 This report addresses the requirement to determine eligibility for services under the Government's guidance on Fair Access to Care Services (FACS). The guidance was introduced in April 2003. The council is required to reach an annual decision on where to place the threshold that determines eligibility across all adult and older people's social care services.

#### **2. Summary**

- 2.1 The national eligibility framework consists of the following four bands that describe the seriousness of the risk to an individual's independence if their assessed needs for support are not met:-

- Critical
- Substantial
- Moderate
- Low

Details of the content of each band of eligibility, along with case examples, are given in Appendix 4 of this report.

- 2.2 At present, the Department's threshold of eligibility for adult services is placed at 'substantial' and 'critical'.

The banding determines which eligible needs will be met and which will be referred for preventative services and/or signposting.

### **3. Recommendations (or Options)**

- 3.1 Cabinet is recommended to agree that the threshold of eligibility should continue to be placed at 'substantial' and 'critical' as indicated in Appendix 1.

### **4. Report**

#### **4.1. Background information**

- 4.1.1 The FACS guidance was prepared in response to the Gloucestershire judgement in 1997. Previous guidance had stated "criteria of need are matters for local authorities to determine in the light of resources". The view that local authorities could take resources into account when assessing needs and deciding what services to arrange was challenged in a judicial review against Gloucestershire Social Services in 1995.

- 4.1.2 The Department of Health's position was upheld by the House of Lords in 1997, and additional guidance was provided to emphasize that the judgement did not give local authorities a license to take decisions on the basis of resources alone.

It was confirmed that the local authority cannot arbitrarily change the services it arranges merely because its own resource position has changed. The local authority needs to consider what assessed needs it will meet (i.e. what its eligibility criteria will be/and reassess needs against revised criteria.

- 4.1.3 The need for guidance on eligibility criteria for adult social care services was identified in the 1998 White Paper "Modernising Social Services" as different local authorities used different eligibility criteria. This led to considerable variation in access to social care, which in turn led to unfairness. The practice of many local authorities to apply eligibility criteria for both assessment and particular services was seen to be confusing and unnecessary.

- 4.1.4 At the centre of FACS guidance is the principle that local authorities should operate just one eligibility decision for all adults seeking social care support, i.e. should people be helped or not? In carrying out their duties under Section 47 of the NHS and Community Care Act 1990, local authorities should keep assessment in proportion to the individual's needs.

- 4.1.5 To help them determine eligibility, the FACS guidance provides a national framework for local authorities to use when setting their eligibility criteria. It covers how local authorities should carry out assessments and reviews, and support people through these processes. The framework is based on risks that arise from needs associated with various forms of disability, impairment and difficulty, and will keep local authorities focused upon promoting the independence of those seeking their help.

#### **4.2 Current Performance**

4.2.1 Immediately prior to the introduction of the guidance in 2003/04, the Department undertook a large scale staff training programme in order to ensure that workers at all levels were fully informed about the new criteria and were able to apply them appropriately. Training is routinely provided for new employees.

This approach was further supported through the introduction of a new policy and practice guidance document issued to appropriate staff.

4.2.2 Measures have been taken to ensure that the eligibility framework is built into the development of CareFirst (the Department's electronic information system). This is to enable effective performance information to be collated to indicate the extent of risk being addressed, types of needs and the circumstances being provided for.

4.2.3 Information collection systems set up to monitor FACS activity, indicate that in 2007/08, approximately 95% of adult assessments/reviews undertaken have resulted in a new or continued service being provided, i.e. the assessed needs fell within the 'critical' and 'substantial' bands referred to in paragraph 1.2 above, and therefore above the line of eligibility for 2007/08.

4.2.4 The predicted figure for 2008/09 is 94%. This represents a total number of Assessments/Reviews at 'Critical' and 'Substantial' as 7025 out of a total number of Assessments/Reviews at 7441.

### **4.3 National Perspective**

#### ***Inclusion of 'moderate' category***

4.3.1 A recent survey of Local Authorities looked at the setting of eligibility thresholds and noted that the majority trend for eligibility has remained at 'critical' and 'substantial'. Approximately 80% of authorities have taken this position in 2008/09. A further 15% have included the 'moderate' band, whilst only 5% have either included 'low' or moved to 'critical' only.

4.3.2 Only a small number of Local Authorities provide care to those people with 'low' needs with most offering an advice service and information on alternative care providers within their locality.

4.3.3 This picture illustrates that the tension within eligibility criteria is on the boundary between 'moderate' and 'substantial' need, and this is where there seem to be variances between Local Authorities and their social care provision.

4.3.4 It appears that the tension is resolved by ruling that those people with 'moderate' needs will not qualify for services, apart from exceptional circumstances, where the assessment discloses needs which, if not met, are likely to lead to a significant deterioration in their condition within a very short time to 'substantial' or 'critical'.

4.3.5 It does appear from a review of current practice that the provision of 'moderate' care is generally being squeezed, with most Local Authorities that currently provide for this level of need either intending to stop providing this or currently reviewing their criteria around the care being provided to those with 'moderate' needs.

This would support the view that this Department's setting of the threshold at 'substantial' and 'critical' is the norm.

### ***Move to 'critical' only category***

4.3.6 Of 159 Local Authorities, only four are currently offering services at the level of 'Critical only'

4.3.7 Those authorities operating at the level of 'Critical only' have made additional investments of between £750,000 and £1,250,000 in the Voluntary Sector in order to facilitate this move.

4.3.8 The experience of these four authorities together with many others who have considered this option reveals the following.

- Of those in the 'Substantial' band receiving domiciliary care approximately 20/25% would require a move into residential care within three months.

In Leicester this equates to approximately 500 individuals at an approximately extra cost to the Department of £120 per week.

- A further 40% in the substantial band would be reclassified to 'critical' immediately, or within three months since the wording in the criteria states "either is, or will be" at risk.
- It is likely, though more difficult to calculate, that a further 20% would become critical within a 6 – 12 month time frame.

4.3.9 In order to facilitate such a move, a robust reassessment of almost 4000 individuals would need to take place before services could be removed.

Other authorities undertaking, or contemplating undertaking this action, have typically found the cost of backfilling posts etc to be in the region of £200,000 - £400,000.

## **5. Headline Financial and legal Implications**

### **5.1 Financial Implications (Rod Pearson, Head of Finance)**

- i) If Leicester's eligibility threshold continues to be placed at 'substantial' and 'critical' there are no direct financial implications. The cost is currently approximately £32.5m.
- ii) If the threshold were moved to 'critical only' this would result in only minor savings to the Department outlined in 5.1.4.
- iii) If the threshold were extended to include the 'moderate' band, this would result in an additional cost the Department of approximately £5.5m a year.

#### **5.1.2 Financial Impact of moving to 'critical' only**

The net cost, to the council, of providing residential and domiciliary care to service users in the 'substantial' category is in the region of £18m. This must be considered as an illustrative figure as records do not enable a precise analysis of cost between those on substantial and those on critical. The total cost at £32.5m is correct but the allocation of costs between two categories is based on a sampling exercise.

5.1.3 Of the £18m spent on the 'substantial' category, approximately £11.2m is spent on people in residential care. It is unlikely that savings can be made in this area as it is already the council's policy to provide care to people at their homes, rather than in a residential setting, whenever this is possible. Consequently, individuals have only moved into residential care where there was no realistic or safe alternative. This leaves the £6.8m spent on home-care. However, in the main it is this expenditure, which enables them to live at home, and were it to be withdrawn a large number of service users would need to be moved to residential accommodation.

#### 5.1.4 Summary of Projected Financial Impact.

	<b>2009/2010</b>
<b>Potential Revenue Savings</b>	(£6,800,000)
Increased cost resulting from Residential placements = 500 x £120 per week	£3,120,000
Continued cost of individuals reassessed as critical = 800 x £65 per week	£2,704,000
<b>Additional investment Required</b>	
- Reassessment of 4000 Service users	£200,000
- Investment in the Voluntary Sector	£750,000
<b>Net Revenue Savings</b>	<b>£26,000</b>

#### 5.1.5 Financial impact of providing care to those classified as 'moderate'

Following recommendation from last year's Cabinet discussion, work was undertaken to establish the financial effect of such a move.

Analysis of referrals from across the service over a six-month period suggests that approximately 2050 people in a full year, would become eligible for services if the threshold were lowered to include the 'moderate' category.

If the average cost of a care package for these 'new' service users was £50.00 a week then the total increased cost to the Department would be £5.2 million a year. Clearly there would also be additional staffing works involved in dealing with this increased workload (see below).

Potential Revenue costs	2009/2010
2000 additional service users @ £50 a week	£5,200,000
Additional Assessment and Care Planning Staff (x 10 FTE) + (x 1 Sen. Prac.)	£340,000
Additional Admin/Office etc	TBA
<b>Total Increase in Revenue Costs</b>	<b>£5, 540,000</b>

## 5.2 Legal Implications (Cathy Healy, Team Leader, Legal Services, Community Services)

5.2.1 The Community Care Access & Review Service receives approximately 2100 referrals each year, and undertakes formal Community Care Assessments in approximately 35% cases. Those who do not receive full assessments will comprise those who are either seeking a service that the Local Authority does not provide at all (e.g. domestic cleaning) or those whose potential needs are such that they will fall well short of the threshold for service provision (i.e. well below the “substantial” band). In these case the Department will, in consultation with the prospective service user, offer advice/signposting so that their needs might be more readily met. It would involve a disproportionate use of skilled resources to offer statutory assessments in 100% of cases. More importantly the prospective service user would not benefit from undergoing a comprehensive assessment when it is clear that they will not qualify for services. It is felt to be more sensible to properly direct these people to the services/agencies that can meet their needs. Nevertheless, nobody who requests one is denied a statutory assessment.

5.2.2 If the threshold moves to ‘critical only’, in order to comply with legislation, regulations and guidance, including the Human Rights Act 1998, the authority is required to be transparent in ensuring:

- Service users are given sufficient notice of any change in our eligibility criteria for services and how it may affect them
- There is a review/reassessment of all those service users potentially affected
- If services are to be withdrawn as a result of reassessment, service users are fully notified in writing with as much notice as possible and advised as to who to contact with any queries or concerns
- Adequate notice is given to service users before the withdrawal of services to allow them sufficient time to adjust

5.2.3 All other legal issues and implications have been addressed appropriately in the body of the report.

## 6 OTHER IMPLICATIONS

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

## 7. Background Papers

- NHS and community Care Act 1990
- Modernising social services white paper 1998
- Local Authority Social Services Act 1970, Section 7(1)
- Health: Continuing Care: HSC 2001/015: LAC (2001) 18; Section 31: Health Act 1999 Flexibilities
- 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.

## 8. Consultations

## 9. Report Author/Officer to contact:

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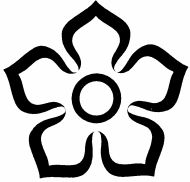
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<b>Key Decision</b>	Yes
<b>Reason</b>	Is significant in terms of its effect on communities living or working in an area comprising more than one ward
<b>Appeared in Forward Plan</b>	Yes
<b>Executive or Council Decision</b>	Executive (Cabinet)

**LEICESTER CITY COUNCIL – ADULTS AND HOUSING DEPARTMENT**  
**ELIGIBILITY CRITERIA FOR COMMUNITY CARE SERVICES**

<b>A S S E S S M E N T  P R O C E S S</b>	<p><b>CRITICAL</b></p> <ul style="list-style-type: none"> <li>• Life is, or will be threatened;</li> <li>• Significant health problems have developed or will develop;</li> <li>• There is, or will be, little or no choice or control over vital aspects of the immediate environment;</li> <li>• Serious abuse or neglect has occurred or will occur;</li> <li>• There is, or will be an inability to carry out vital personal care or domestic routines;</li> <li>• Vital involvement in work, education or learning cannot or will not be sustained;</li> <li>• Vital social support systems and relationships cannot or will not be sustained;</li> <li>• Vital family and other social roles and responsibilities cannot or will not be undertaken.</li> </ul>	<p><b>SUBSTANTIAL</b></p> <ul style="list-style-type: none"> <li>• There is, or will be, only partial choice and control over the immediate environment;</li> <li>• Abuse or neglect has occurred or will occur;</li> <li>• There is, or will be, an inability to carry out the majority of personal care or domestic routines;</li> <li>• Involvement in may aspects of work, education or learning cannot or will not be sustained;</li> <li>• The majority of social support systems and relationships cannot or will not be sustained;</li> <li>• The majority of family and other social roles and responsibilities cannot or will not be undertaken</li> </ul>	<b>T H R E S H O L D  F O R  S E R V I C E S</b>	<p><b>MODERATE</b></p> <ul style="list-style-type: none"> <li>• There is, or will be an inability to carry out several personal care or domestic routines.</li> <li>• Involvement in several aspects of work, education or learning cannot or will not be sustained;</li> <li>• Several social support systems and relationships cannot or will not be sustained;</li> <li>• Several family and other social roles and responsibilities cannot or will not be undertaken.</li> </ul>	<p><b>LOW</b></p> <ul style="list-style-type: none"> <li>• There is, or will be, an inability to carry out one or two personal care or domestic routines;</li> <li>• Involvement in one or two aspects of work, education or learning cannot or will not be sustained;</li> <li>• One or two social support systems and relationships cannot or will not be sustained;</li> <li>• One or two family and other social roles and responsibilities cannot or will not be undertaken.</li> </ul>	<b>A S S E S S M E N T  P R O C E S S</b>
	← <b>ELIGIBLE NEEDS</b> →	← <b>PREVENTATIVE SERVICES, ADVICE, GUIDANCE, REFERRALS TO OTHER AGENCIES</b> →				





Leicester  
City Council

**WARDS AFFECTED  
ALL WARDS**

## **APPENDIX 2**

### **Current Arrangements**

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.

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.

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.

## **APPENDIX 3**

### **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.

## APPENDIX 4

4.1 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.

4.2 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

### 4.3 **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.

### 4.4 **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.**

#### **4.5 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.

#### **4.6 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.***

#### **4.7 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

#### **4.8 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.***

#### **4.9 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.

#### 4.10 **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 section of Leicester City Council.***

4.11 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.

4.12 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.

## **APPENDIX 5**

### **Impact of FACS on Resource Management**

- 5.1 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.
- 5.2 Although the Council does not operate a formal prioritization system for case allocations within adult services, the eligibility framework enables new referrals to be prioritized in terms of the perceived risks to a person's independence based on presenting needs; and for assessed needs and circumstances to be prioritized and recorded in terms of risk and eligibility for service provision.
- 5.3 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.
- 5.4 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.
- 5.5 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 were 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.

5.6 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.

5.7 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.

## **APPENDIX 6**

### **Impact on Service Users**

6.1 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.

## **APPENDIX 7**

### **Monitoring of FACS Performance**

7.1 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.



7.2 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 speed of assessment and subsequent service deliver in accordance with the local Better Care Higher Standards Charter and care management quality standards;
- Monitoring the timing and frequency of reviews.

7.3 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
- Monitoring financial performance against the FACS categories and service targets
- Equality Impact Assessment Process