Assessing and Supporting Your Needs Policy

Communities, Health and Adult Social Care

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## Assessing and Supporting Your Needs Policy

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1. **Policy Statement**

1.1 The aim of the policy is to reflect the provisions relating to care and support from April 2015 as detailed in the Care Act 2014, the Care and Support (Assessment) Regulations 2014, and the Care and Support Statutory Guidance issued by the Department of Health. This policy will be updated in line with any subsequent changes to legislation.

1.2 This policy sets out the framework for assessment and review in Buckinghamshire. It covers the support planning phase and how Buckinghamshire County Council will ensure that it fulfils its duty to meet people’s eligible assessed needs. Broadly, the Council has a duty to assess any adult or carer who appears to have needs for care and support.

1.3 The nature and extent of a person’s needs are identified in the assessment. Not all needs identified in an assessment will be eligible for care arranged by the Council and the Council will provide information and advice about ways of addressing needs.

1.4 The support plan will be developed with the person to work out how to meet their eligible unmet needs. The process of drawing this up will take account of support from family and friends, the personal budget, and other support available.

2. **Aims/Outcomes**

2.1 The process will be person-centred and person-led throughout, involving the person and supporting them to have choice and control.

2.2 The assessment will be an integral part of the person’s journey through the care and support system.

2.3 The assessment will help people understand their strengths and capabilities, and the support available to them in the community and through other networks and services.

2.4 The assessment will always be appropriate and proportionate.
2.5 The aim of the assessment is to identify the needs the person may have and what outcomes they wish to achieve in their day-today-life.

2.5 The assessment will identify a need for care and support.

2.6 If the person is not eligible for services at the time of the assessment, the local authority will consider providing information and advice or other preventative services.

2.7 The purpose of an assessment is to identify an individual’s needs and provide a basis for:

- Determining eligibility for services or other types of support
- Providing information and advice to the individual and targeting prevention services
- Estimating the personal budget required
- Planning support to meet the identified and eligible needs
- Identifying and managing risks in line with the Council’s safeguarding responsibilities
- Working in partnership with health and other organisations, including sharing information

2.8 The assessment process can be initiated in the following situations:

- An approach to the Council by an individual or by a third party acting on their behalf
- A hospital discharge
- The Council, if it becomes aware that a person may be in need of care and support
- If it is apparent that the person requires urgent support, the Council may make immediate provision for care before carrying out a full assessment of the person’s needs.

3 Principles

- Carry out an assessment of anyone who appears to have needs for care and support, regardless of their likely eligibility for Council-funded care or their financial situation.
• Focus the assessment on the person’s needs and how they impact on their wellbeing, and the outcomes they want to achieve.
• Involve the person in the assessment and, where appropriate, their carer or someone else they nominate.
• Provide access to an independent advocate to support the person’s involvement in the assessment if required.
• Consider other things besides care services that can contribute to the desired outcomes (e.g. preventive services, community support, equipment and minor adaptations to the home).
• Use the new national minimum threshold to judge eligibility for publicly funded care and support.
• Decide whether a person’s needs meet the eligibility criteria on the basis of the assessment.
• Signpost people to organisations for support where appropriate.

4 Wellbeing

4.1 Section 1 of the Care Act provides that the Council has a general duty to promote an individual’s wellbeing when carrying out care and support functions.

4.2 This may sometimes be referred to as “the wellbeing principle” because it is a guiding principle that puts wellbeing at the heart of care and support. It applies equally to adults with care and support needs and their carers. In some specific circumstances, it also applies to children, their carers and to young carers when they are subject to transition assessments.

4.3 “Wellbeing” is a broad concept and can be promoted in many ways. How this happens will depend on the person’s circumstances, including their needs, goals and wishes, and how these impact on their wellbeing. Wellbeing is described in the Care Act Guidance as relating to the following areas in particular:

• Personal dignity (including treatment of the individual with respect).
• Physical and mental health and emotional wellbeing.
• Protection from abuse and neglect.
• Control by the individual over day-to-day life (including over care and support provided and the way it is provided).
• Participation in work, education, training or recreation.
• Social and economic wellbeing.
• Domestic, family and personal.
• Suitability of living accommodation.
• An individual’s contribution to society.

4.4 Promoting wellbeing involves actively seeking improvements in the aspects of wellbeing set out above when carrying out a care and support function at any stage of the process, from the provision of information and advice to reviewing a care and support plan. Wellbeing covers an intentionally broad range of the aspects of a person’s life and will encompass a wide variety of specific considerations depending on the individual.

4.5 How the person’s wellbeing is promoted will depend on their circumstances, including their needs, goals and wishes, and how these impact on their wellbeing. There is no set approach as the Council will consider each case on its own merits, considering what the person wants to achieve, and how the action which the Council is taking may affect their wellbeing.

5 Who is entitled to an assessment

5.1 The Council must assess anyone within Buckinghamshire who appears to be in need of care and support. This is regardless of a person’s financial circumstances.

5.2 The Council must assess carers regardless of the level of the carer’s needs for support or the level of the carer’s financial resources or those of the person for whom they care.

6 How the assessment will be carried out

6.1 The assessment should be proportionate to the person’s needs and circumstances. The nature of the assessment will not always be the same for all people and may vary. The assessment will be carried out in various ways, including but not limited to:

• Face-to-face assessment between the person and assessor who will be appropriately trained to carried out the assessment
• Supported self-assessment completed by the person and reviewed by the Council to ensure that it is an accurate reflection of the person’s needs
• An online or phone assessment
- A joint assessment where relevant agencies work together
- A combined assessment where a person’s assessment is combined with a carer’s assessment

7 **The Assessment Process**

7.1 An assessment is carried out to establish whether the person has a need for care and support. The Council will then look at their needs in comparison to the eligibility criteria for care and support and what types of care and support can help to meet those needs. This includes looking at and identifying the impact of the person’s needs on their wellbeing and whether meeting their needs will help them achieve their desired outcomes in their day-to-day-life.

7.2 The Council’s aim is to encourage and help people to remain as independent as possible. The Council may offer help and support in relation to home care, equipment and adaptations and look at a person’s wider support network, including family and friends. If it is not possible for them to stay at home, the Council will help them find an appropriate alternative place to live, such as supported accommodation, residential or nursing home care.

7.3 The person will be supported with decision making and be involved as far as possible in the assessment.

7.4 Throughout the assessment process, the Council will consider if the person has capacity to make specific decisions in accordance with the Mental Capacity Act 2005, including if they need support with their involvement in the process, independent advocacy, the impact on their family, if a carers assessment should be carried out, or if there are any safeguarding concerns. Where there is uncertainty about whether a person has capacity, it will be necessary to carry out an assessment of capacity, in accordance with the principles in the Mental Capacity Act 2005.

7.5 The person will be fully involved with their assessment, which will be coordinated by a member of staff from the Council, a mental health practitioner working within Mental Health Services, or a person from another organisation who has been commissioned by the Council to carry out the assessment. Throughout their assessment they shall be given choice and control over how their needs will be met. The Council will ensure that assistance is available to the person to help them to develop their support plan.
7.6 During the assessment the person may be helped if they wish by a relative, friend, interpreter, or advocate.

7.7 People who help the person, for instance, family, friends or neighbours, whom we will refer to as carers, can also ask for an assessment of their own needs if it appears that they may have any level of needs for support. This is known as a carer's assessment.

7.8 As part of the assessment the Council requires information such as the person’s name and address and a brief description of their circumstances. They will be asked about their general health and their ability to be independent with, for example, cooking, shopping, walking, having a bath or shower, dressing, eating and drinking. They will have the opportunity to talk about any other area of their life which might be causing them concern.

7.9 The discussions may show that the person’s needs can be met by providing them with information and advice.

7.10 The assessment will be confidential and information necessary to arrange services or care will not be passed on to any other agency without the person’s consent.

7.11 If the information the person gives the Council indicates they are at risk of harm, or are a risk to other people, then the information may be shared with statutory agencies for their own safety or that of others.

7.12 Once the assessment is complete and a decision has been made, the Council will write to the person to let them know the outcome.

8 Advocacy

8.1 The Care Act requires the Council to ensure that the person is fully involved in assessments and the development of their support plans. If it appears to the Council that the person is likely to have substantial difficulty in being involved with the assessment, the care and support planning or review process, then the Council will consider if there is anyone appropriate who can support them to be fully involved, for example, a carer, family member or friend. This applies in the following circumstances:
- A needs assessment under section 9 of the Care Act;
- A carer's assessment under section 10;
- The preparation of a care and support plan under section 25;
- A review of care and support plan or support plan under section 27;
- A child's needs assessment under section 58;
- A child’s carer’s assessment under section 60 (therefore some people below 16 years of age);
- A young carer's assessment under section 63;
- Safeguarding under section 68.

8.2 It is expected that an appropriate person will support and represent the person and facilitate their involvement in the assessment, planning or review processes. When considering whether there is an appropriate person (or persons) to provide such support, the Council will have regard to the following considerations:

- The appropriate person cannot be someone who is already providing the person with care or treatment in a professional capacity or on a paid basis for example, their GP, nurse or care and support worker.
- If the person does not wish to be supported by a specific individual, their wishes shall be respected by the Council if they have capacity to consent or are competent to consent. If they are assessed to lack capacity to make that decision then the Council must be satisfied that it is in their best interests to be supported and represented by that individual.
- If the individual only has occasional contact with the person, or there is a conflict of interests, they may not be an appropriate person.

8.3 In general, a person who has substantial difficulty in being involved in their assessment, plan and review, will only become eligible for an advocate where there is no one appropriate to support their involvement. The exceptions are:

- Where the exercising of the assessment or planning function might result in placement in NHS-funded provision either in hospital for a period not exceeding four weeks, or in a care home for a period of eight weeks or more, and the Council considers that it would be in the best interests of the individual to arrange an advocate; or
- Where there is disagreement relating to the person’s role between the Council and the appropriate person whose role it would be to facilitate the person’s involvement, and the Council and the
appropriate person agree that the involvement of an independent advocate would be beneficial.

8.4 The Council will consider whether an advocate is required to facilitate the person’s involvement in the review of their care and support plan. If it is considered appropriate, an advocate will be appointed regardless of whether they were previously involved and may depend on whether:

- The person’s ability to be involved in the process without an advocate has changed.
- The appropriate person previously involved is no longer able to perform that role.
- An advocate should have been involved at the care and support planning stage and was not.
- The requirement to involve an advocate at the care and support planning stage did not exist at that time.

8.5 An independent advocate shall be provided if the person has substantial difficulty in engaging with care and support or safeguarding processes and shall:

- Assist the person to understand their assessment, care and support planning and review and safeguarding processes.
- Assist the person to communicate their views, wishes and feelings to staff who are carrying out an assessment or developing a care or support plan or reviewing an existing care plan, or to communicate their views, wishes and feelings to the staff who are carrying out safeguarding enquiries or reviews.
- Assist the person to understand how their needs can be met by the Council or otherwise
- Assist the person to make decisions about their care and support arrangements.
- Assist the person to understand their rights under the Care Act.
- Assisting the person to challenge a decision or process made by the Council and, where a person cannot challenge the decision even with assistance, then to challenge it on their behalf.

8.6 If the person has an advocate for safeguarding then an advocate shall assist them with the following issues:
• To decide what outcomes/changes they want
• To understand the behaviour of others who are abusive/neglectful
• To understand if their actions may expose them to avoidable abuse or neglect.
• To understand what actions they can take to safeguard themselves.
• To understand what advice and help they can expect from others, including the criminal justice system.
• To understand what parts of the process are completely or partially within their control.
• To explain what help they want to avoid reoccurrence and also to recover from the experience.

9 Different Types of Assessment

9.1 Carers Assessment

A carer, including a young carer, is someone who provides care for another adult. Where it appears that the carer may have any level of needs for support they are entitled to an assessment of their own needs. This applies whether or not the person they care for has eligible needs. The purpose of this assessment is to consider the sustainability of the caring role and the impact of caring upon the carer’s commitments or desire to work or for education. Following an assessment, the Council has a duty to consider whether or not to provide services to the carer.

9.2 Supported Self-assessment

9.2.1 A supported self-assessment is an assessment carried out jointly by the person or their carer and the local authority. Although the person completes the assessment form, the duty to assess their needs and ensuring they are accurate remains with the Council.

9.2.2 The Council can offer a supported self-assessment if the person is able, willing and has capacity to undertake it. If they do not wish to self-assess, then Council must undertake an assessment following one of the other processes.

9.2.3 A supported self-assessment should use the same assessment materials as a face-to-face assessment. Where the person completes the assessment themselves, the Council needs to be satisfied that it is an accurate reflection of the person’s needs, for example, by consulting with other relevant professionals and people who know you, with your consent.
9.2.4 The Council will provide the person with any relevant information it has about them to allow them to complete the assessment and so they have the same information that an assessor would have when undertaking an assessment.

9.2.5 Once the person has completed a self-assessment, the Council will then ensure that it is an accurate and complete reflection of their needs.

9.2.6 In assuring self-assessments, the Council may seek the views of those who are in regular contact with the person, such as their carer or other appropriate people from their support network, and any professional involved in providing care such as a housing support officer, a GP, a treating clinician, a district nurse, a rehabilitation officer or relevant prison staff.

9.2.7 Before sharing any information, the Council will ensure that the person consents to that information being shared. If they lack capacity, information will only be shared where the Council is satisfied that doing so is in their best interests.

9.2.8 If the person has capacity to undertake a self-assessment but experiences substantial difficulty in understanding, retaining and using the relevant information in relation to their self-assessment, the Council may wish to involve their carer or any other member of their family or support network in their self-assessment.

9.2.9 Where the person does not have the support required from a carer or family member who is willing and able to facilitate the person's involvement effectively, and who is acceptable to the Council, the Council will provide an independent advocate to assist them with their self-assessment.

9.2.10 If the person is carrying out a supported self-assessment and requires a specialist, for example people who are deafblind, then the professional leading the assurance process will need to have specific training and expertise relating to their needs.

9.3 Transitions Assessment

9.3.1 Some young people with additional needs will need extra support to do things that are important to them in adult life. The Council works with young people aged 16-25 years who have additional needs and require support to plan and co-ordinate their transition to adulthood.

9.3.2 Transition planning may start when a young person is age 14. If a young person has a Statement of Special Educational Needs, they should have a transition review organised by the school. If they receive help from Children's
Services, and are likely to need help from Adult Services, a member of staff from the Council shall attend any review meetings to find out more.

9.3.3 However, the timing of this assessment will depend on when it is of significant benefit to the young person or carer.

9.3.4 The Council is responsible for contacting the young person or carer to agree timing of the transition assessment, rather than leaving the young person or carer in uncertainty or having to make repeated requests for an assessment.

9.3.5 Transition Assessments should take place at the right time for the young person or carer and at a point when the local authority can be reasonably confident about what the young person’s or carer’s needs for care or support will look like after the young person turns 18.

9.3.6 A member of staff from Adult Social Care will assist with the introduction to any new services and check whether the young person is happy with the new support and services.

9.4 **NHS Continuing Health Care**

9.4.1 NHS Continuing Health Care (“CHC”) is a package of on-going care arranged and funded solely by the NHS for people who are found to have a primary health need and have a complex medical condition and substantial and ongoing care needs as set out in the National Framework for Continuing Health Care.

9.4.2 If the person is eligible for CHC, the NHS is responsible for providing for the individual's assessed care needs.

9.4.3 CHC can be provided in any setting, including a care home, hospice or the person’s home. If a person in a care home is eligible for NHS CHC, the NHS will fund their care home fees, including the cost of accommodation, personal care and health care. If CHC is provided to a person in their own home, the NHS will fund the costs of personal care and health care. It may also include support for carers.

9.4.4 Where it appears to the Council, when carrying out a needs assessment, that the person may be eligible for CHC, the Council will notify the relevant NHS body. If the person has been assessed by the Council and it is considered that they may be eligible for CHC, they will be referred to the relevant Clinical Commissioning Group (“CCG”), if they provide their permission for the referral.
9.5 **S117 Aftercare**

9.5.1 Under section 117 of the Mental Health Act 1983, local authorities, together with Clinical Commissioning Groups, have a joint duty to arrange the provision of mental health after-care services for people who have been detained in hospital for treatment under certain sections of the 1983 Act. After-care services must have both the purposes of “meeting a need arising from or related to the person’s mental disorder” and “reducing the risk of a deterioration of the person’s mental condition and, accordingly, reducing the risk of the person requiring admission to a hospital again for treatment for mental disorder.” The range of services which can be provided is broad.

9.5.2 Services provided under S117 of the Mental Health Act 1983 are only those which are provided or commissioned to meet mental health needs. It applies to patients who have been detained under any of the following sections of the Mental Health Act 1983:

- Section 3 (admission for treatment)
- Section 37 (hospital order made by the Magistrates Court or Crown Court – with or without a Section 41 restriction order)
- Section 45A (hospital direction by the Crown Court in relation to an offender suffering from a psychopathic disorder)
- Section 47 or 48 (transfer directions by the Home Secretary from prison to hospital)

9.5.3 Responsibility for providing aftercare under S117 of the Mental Health Act 1983 lies with the Council’s Social Services and the CCG covering the area in which the patient was ordinarily resident at the time they were detained under a qualifying section of the Mental Health Act 1983 Act.

9.6 **Deprivation of Liberty Safeguards**

9.6.1 People may lack capacity to consent to particular types of treatment or care that others have assessed as being in their best interests. When the Council is arranging someone’s care, due consideration shall be given to the less restrictive option for providing care, in line with the principles in the Mental Capacity Act 2005.

9.6.2 Sometimes a decision made about the person’s accommodation can mean that they are at risk of being deprived of their liberty and it is important that the Council recognises where this is happening or has the potential to occur. If the degree and intensity of the restrictions are so significant that they
amount to a deprivation of liberty, this must be authorised under the Deprivation of Liberty Safeguards under the Mental Capacity Act 2005.

9.6.3 Where restrictions of liberty are unavoidable, professionals and others making decisions on what is in the person’s best interests must be clear and sure of the benefits they will gain from the care and treatment proposed. These benefits should be significantly greater than other treatment and care delivered in an alternative, less restrictive way or setting.

9.6.4 The Deprivation of Liberty Safeguards provide legal protection for vulnerable people who are, or may become, deprived of their liberty within the meaning of Article 5 of the European Court of Human Rights (ECHR) for example, in a Hospital or Care Home. The safeguards exist to provide a proper legal process and suitable protection in those circumstances where a deprivation of liberty appears to be unavoidable.

9.6.5 The Deprivation of Liberty Safeguards (“DoLS”) are in addition to other safeguards in the Mental Capacity Act 2005. This means that decisions made and actions taken, for a person who is subject to a deprivation of liberty authorisation, must fulfil the requirements of the Act in the same way as for any other person.

9.6.6 Any action taken under the Deprivation of Liberty Safeguards must be in line with the principles of the Mental Capacity Act 2005, which are:

- A person must be assumed to have capacity to make a decision unless it is established that they lack the capacity to make that decision.
- A person is not to be treated as unable to make a decision unless all practicable steps to help them to do so have been taken without success.
- A person is not to be treated as unable to make a decision merely because they make an unwise decision.
- An act done or decision made under the Act, for or on behalf of a person who lacks capacity, must be done or made in their best interests.
- Before the act is done or the decision is made, regard must be given to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person’s rights and freedom of action.

9.6.7 For further guidance on mental capacity and best interest decision making please refer to:
• Mental Capacity Act 2005: Deprivation of liberty safeguards - Code of Practice to supplement the main Mental Capacity Act 2005 Code of Practice

10 Safeguarding

10.1 If it appears during an assessment that the person is experiencing, or is at risk of, abuse or neglect the Council will carry out a safeguarding enquiry and decide with them what action, if any, is necessary and by whom.

10.2 The Council’s decision to carry out a safeguarding enquiry does not depend on the person’s eligibility for care and support but is taken wherever there is reasonable cause to think that they are experiencing, or are at risk of experiencing, abuse or neglect. If this is the case, the Council will carry out whatever enquiries it thinks are necessary in order to decide whether any further action is necessary.

10.3 If the person has care and support needs then the Council will continue to carry out a needs assessment and determine whether they have any eligible needs alongside the safeguarding investigation.

10.4 Further information regarding the Council’s safeguarding process can be found in the Council’s Safeguarding Policy.

11 Prisoners

11.1 Section 76 of the Care Act sets out the Council’s responsibilities in relation to care and support for adults in prison, approved premises and bail accommodation, and those released from custody. The Council is responsible for assessing and meeting the social care needs of adult prisoners (not just on discharge from prison but also while in custody) in the following settings:

• Prisons has the same meaning as in section 53(1) of the Prison Act 1952 and 76(11) of the Care Act 2014 (a reference to a prison also includes a
reference to a young offender institution, secure training centre or secure children’s home).

- Approved premises in section 13 of the Offender Management Act 2007 for the supervision and rehabilitation of offenders, and for people on bail.
- Bail accommodation given the meaning in section 1 of the Bail Act 1976.

11.2 Where the Council is made aware that an adult in a custodial setting may have care and support needs, it will carry out an assessment as it would for someone in the community. Someone in a custodial setting will be treated as if they are ordinarily resident in the area where the custodial setting is located for the purposes of the Care Act and for as long as they reside in that prison.

11.3 An adult in a custodial setting will be entitled to the support of an independent advocate in the same circumstances as someone in the community. The Council shall work with custodial managers to aim to ensure there is a sufficient supply of advocates.

11.4 If an adult in a custodial setting refuses a needs assessment, the Council is not required to carry out the assessment, subject to the same conditions as in the community. This does not apply if:

- The person lacks the capacity to refuse and the Council believes that the assessment will be in their best interest; or
- The person is experiencing, or is at risk of, abuse or neglect.

11.5 Direct payments may not be made to people in custodial settings. Individuals in bail accommodation and approved premises who have not yet been convicted are entitled to direct payments, as they would have been whilst in their own homes.

11.6 The right to a choice of accommodation does not apply to those in a custodial setting except when a person is preparing for release or resettlement in the community.

12 Boundary with the NHS

12.1 The Council must carry out an assessment where someone appears to have needs for care and support. If those needs meet the eligibility criteria then the Council has a duty to meet those needs. The Council cannot meet
these needs by providing or arranging services that are the responsibility of the National Health Service ("NHS").

12.2 Section 22 of the Care Act sets out the boundary between local authorities, for the provision of care and support, and the NHS for the provision of health care. If it is the responsibility of the NHS to provide a particular service then this service may not be provided by the Council. In some circumstances, the Council may provide some limited healthcare services as part of a package of care and support but only where the services provided are incidental or ancillary and the service is of a nature that the Council could be expected to provide.

12.3 The NHS is responsible for providing nursing care provided by registered nurses and services that the NHS has to provide because the individual is eligible for NHS Continuing Healthcare.

12.4 NHS Continuing Healthcare is a package of ongoing care that is arranged and funded solely by the NHS outside a hospital setting for persons who are found to have a primary health need. Whether a person has a primary health need is set out in statutory guidelines and determined following an assessment under the National Framework for NHS Continuing Healthcare.

13 Eligibility

13.1 Eligibility to receive services from the Council will be determined on the basis of an assessment and not before an assessment has been carried out, except where the Council is meeting urgent care needs. A person’s assessment will be considered against the eligibility criteria. Once an eligibility determination has been made, and the Council has determined whether it will meet the person’s needs and the person is ordinarily resident in Buckinghamshire, a financial assessment will then be carried out.

13.2 The eligibility criteria describes the areas of eligible needs that will be met by the Council.

13.3 This Eligibility Policy applies to all adults (aged over 18) with different kinds of needs, people with a learning disability, physical disability, mental health need or social care need and carers.
13.4 In considering whether a person has eligible care and support needs the Council will consider if they meet the following criteria:

- Their needs arise from or are related to a physical or mental impairment or illness.
- As a result of their needs they are unable to achieve two or more of the specified outcomes detailed below.
- As a consequence of being unable to achieve these outcomes there is, or there is likely to be, a significant impact on the adult’s wellbeing.

13.5 The specified outcomes in the Eligibility Regulations are (this list is not exhaustive):

- Managing and maintaining nutrition
  This may include whether the person has access to food and drink to maintain nutrition, and they are able to prepare and consume the food and drink.
- Maintaining personal hygiene
  For example, considering the person’s ability to wash themselves and launder their clothes.
- Managing toilet needs
  For example, the Council may consider the person’s ability to access and use a toilet and manage their toilet needs.
- Being appropriately clothed
  For example, the Council may consider the person’s ability to dress and be appropriately dressed, for instance in relation to the weather to maintain their health.
- Being able to make use of their home safely
- Maintaining a habitable home environment
- Developing and maintaining family or other personal relationships
- Accessing and engaging in work, training, education or volunteering
- Making use of necessary facilities or services in the local community including public transport, and recreational facilities or services
- Carrying out any caring responsibilities the has for a child.

13.6 The Council considers whether the person is unable to achieve two or more of the above outcomes if they:

- Are unable to achieve the outcome without assistance
- Are able to achieve it without assistance but doing so causes the adult significant pain, distress or anxiety
• Are able to achieve it without assistance but doing so endangers or is likely to endanger their health or safety or that of others
• Are able to achieve it without assistance but takes significantly longer than would normally be expected.

13.7 The person’s needs may only be eligible where they meet all four of the above conditions (see Appendix 1 for the Eligibility Decision Process).

Eligibility Criteria for Carers

13.8 Carers can be eligible for support whether or not the adult for whom they are providing care has eligible needs. The Council will consider whether the carer’s need for support arises because they are providing care to an adult.

13.9 The eligibility determination is based on the carer’s needs and how these impact on their wellbeing in accordance with the following conditions,

• The carer’s needs arise as a consequence of providing necessary care for an adult.
• The effect of the carer’s needs is that any of the circumstances specified in the Eligibility Regulations apply to the carer.
• As a consequence, there is, or there is likely to be, a significant impact on the carer’s wellbeing.

13.10 The carer must also be providing “necessary” care. For example, if a carer is providing care and support for needs which the person is capable of meeting themselves, the carer may not be providing necessary support. In these circumstances, the Council shall provide information and advice to the person and carer about how the person can use their own strengths or services available in the community to meet their needs.

13.11 The Council will consider whether the carer’s physical or mental health is either deteriorating or is at risk of doing so, or whether the carer is unable to achieve any of the following outcomes and as a result there is, or there is likely to be, a significant impact on their wellbeing:

• Carrying out any caring responsibilities the carer has for a child
• Providing care to other persons for whom the carer provides care
• Maintaining a habitable home environment in the carer’s home (whether or not this is also the home of the person needing care)
• Managing and maintaining nutrition
• Developing and maintaining family or other personal relationships
• Engaging in work, training, education or volunteering
• Making use of necessary facilities or services in the local community, including recreational facilities or services; and
• Engaging in recreational activities

13.12 The Council considers whether the carer is unable to achieve two or more of the above outcomes if they:

• Are unable to achieve the outcome without assistance. For example, where the carer would be unable to achieve an outcome even if assistance were provided, such as being unable to fulfil their parental responsibilities unless they receive support in their caring role.
• Are unable to achieve the outcome without assistance, but doing so causes or is likely to cause them significant pain or distress or anxiety or endangers them. A carer might, for example, be able to care for the person and undertake fulltime employment but, if doing both causes the carer significant distress, the carer may not be considered able to engage in employment.
• Are able to achieve the outcome without assistance but doing so is likely to endanger the health or safety of the carer or any persons or children for whom the carer provides care. A carer might, for example, be able to provide care for their family and deliver necessary care for the person but, where this endangers the person with care and support needs, for example because the person receiving care would have to be left alone while other responsibilities are met, the carer should not be considered able to meet the outcome of caring for their family.

13.13 The Council will also consider whether the carer's needs and their inability to achieve the outcomes above present a significant impact on their wellbeing.

14 After the eligibility determination

14.1 If the Council has determined that a person or a carer has eligible needs, the Council will agree with them which of those needs they would like the Council to meet.

14.2 The Council shall consider the potential support options to meet the person’s needs in order for the Council to determine whether some of those may be services for which the Council makes a charge. Where this is the case, the
Council will carry out a financial assessment. See the Charging Policy for details on financial assessment.

15 Support Planning

15.1 Support planning is the process of working with the person to establish what they would like to achieve and how their eligible needs will be met. This is a written plan summarising their needs, the impact these have, the kinds of services and help required, and within what timescales. Helping a person decide what they want to achieve is an important part of support planning, which also describes the informal help given from friends and family. The support plan will provide a basis for the personal budget required to meet those needs and will set out how the budget will be used.

15.2 The Personal Budget sets out the cost of the person’s care and support and the amount the Council will make available to meet a person’s needs. The Personal Budget can only be used to begin to plan how to spend money to meet the person’s needs that the Council has identified as eligible at the time the budget is allocated.

15.3 If the person agrees with their assessment, a member of staff from Adult Social Care staff or a person from another organisation who has been commissioned by the Council will then write up a personal support plan for them. The support plan helps the Council to establish exactly how the person’s needs will be met and it will detail the services and support required and for how long. It will also detail who will provide their services and support.

15.4 Any services and support offered will be discussed with the person. Together, the Council and the person will decide what the person needs to make it easier to stay in their own home. It is possible that this help may be provided by a number of different people working together. The services may not be provided directly by the Council.

15.5 Support planning is person-centred, which means that the plan is developed with the person and reflects their aspirations, goals and outcomes in meeting their needs. The plan should be agreed with the person wherever possible.

15.6 The support plan will be reviewed after six weeks to make sure everything is working well and it will be subsequently reviewed every twelve months.
15.7 The work carried out to assess the person’s needs will be free of charge. If there is a cost for help and support arranged by the Council this will be explained to the person before this is put into effect. They will be informed about how much they will have to pay towards the cost of their care. They will be given information about charges for services.

15.8 If the person can afford and chooses to pay for their own care, they can make their own choices as to how care is provided. The assessment process will be able to offer them advice on how their needs can be met.

16 Information and Advice

16.1 Section 4 of the Care Act places a duty on local authorities to establish and maintain a service for providing people in its area with information and advice relating to care and support for adults and support for carers. The Council must ensure the availability of information and advice services for all people in its area, regardless of whether or not they have eligible care needs. The Council will also make use of other statutory, voluntary and/or private sector information and advice resources available in the area.

16.2 The Council must also have regard to identifying people who contact them, who may benefit from financial information and advice independent of the Council, and facilitate those people to access it.

16.3 People (carers included) who are likely to need information and advice include, but are not restricted to:

- People wanting to plan for their future care and support needs.
- People who may develop care and support needs, or whose current care and support needs may become greater.
- People who have not presented to local authorities for assessment but are likely to be in need of care and support.
- People who become known to the Council (through referral, including self-referral), at first contact where an assessment of needs is being considered.
- People who are assessed by local authorities as currently being in need of care and support. Advice and information must be offered to these people irrespective of whether they have been assessed as having eligible needs which the local authority must meet
• People whose eligible needs for care and support the local authority is currently meeting
• People whose care and support or support plans are being reviewed
• Family members and carers of adults with care and support needs,
• Adults who are subject to adult safeguarding concerns
• People who may benefit from financial information and advice on matters concerning care and support.
• Care and support staff who provide information and advice as part of their jobs.
• People who pay for their own care (self funders).

16.3 The Council will aim to ensure access to advice and information that is in a clear and accessible format to enable the person to make a decision.

16.4 Where appropriate, the Council will signpost or refer the person to national sources of information and advice where these are recognised as the most useful source. For example, this may include:

• The NHS Choices website. Health A to Z, detailed information on specific health conditions and how/where to access health services [http://www.nhs.uk/Pages/HomePage.aspx](http://www.nhs.uk/Pages/HomePage.aspx)
• Carers Direct – national telephone helpline: Tel 0300 123 1053
• Money Advice Service [https://www.moneyadviseservice.org.uk/](https://www.moneyadviseservice.org.uk/)
• The Care Quality Commission website [http://www.cqc.org.uk/](http://www.cqc.org.uk/)
• The Local Government Ombudsman [www.lgo.org.uk](http://www.lgo.org.uk)
• Consumer websites providing people with information and advice, including on managing their finances well, for example [http://www.which.co.uk/elderly-care](http://www.which.co.uk/elderly-care)
• National charities and advice services for carers, for example [http://www.carersuk.org/](http://www.carersuk.org/) or [http://www.ageuk.org.uk/](http://www.ageuk.org.uk/)
• National resources related to housing, accommodation and housing related support, for example [http://www.firststopcareadvice.org.uk/](http://www.firststopcareadvice.org.uk/) [http://www.foundations.uk.com/home/](http://www.foundations.uk.com/home/)
17 Prevention

17.1 An assessment of an individual’s needs for support offers an opportunity for the Council to identify scope for any early intervention or short term help that might increase the person’s independence or prevent the development of complex support needs.

17.2 The assessment is also an opportunity for the Council to identify how the person’s needs could be reduced, or where escalation could be delayed, and help them improve their wellbeing by providing specific preventative services, or information and advice on other universal services available locally.

18 Reablement

18.1 The purpose of reablement is to maximise people’s long term independence and quality of life and minimise the requirement for ongoing support. It encompasses services for people with declining physical or mental health that support them to:

- Avoid unplanned or unnecessary admission to hospital or residential care;
- Achieve optimum independence
- Self-manage their condition
- Learn or re-learn the skills necessary for daily living

18.2 Reablement is a short term service that is not chargeable up to the first six weeks. It is delivered in a person’s home to help them regain their independence, for example, after an illness or operation. The amount of time the person is in Reablement will be determined by their community care assessment and this may not be for as long as six weeks. A community care assessment does not have to be conducted before a referral for reablement. An assessment must be conducted following reablement if the person still appears to be in need of a social care service.

19 Increasing Independence

19.1 Where needs are identified during assessment, the assessor will consider whether those needs could be reduced through interventions or services that increase the person’s independence or address underlying issues. Likewise,
in planning support to meet eligible needs, the Council will prioritise services and interventions that build the person’s resilience and increase independence.

19.2 The Council is committed to ensuring that the person is able to lead as independent a life as possible. To achieve this, the Council will aim to promote individual progression and enablement through the assessment and support planning processes.

20 Fluctuating Needs

20.1 A person may have needs which are not apparent at the time of the assessment but which have arisen in the past or are likely to arise again in the future. In these circumstances, the Council shall consider a person’s needs over such a period of time that is considered necessary to establish a person’s level of needs and to ensure that all of their needs have been accounted for when eligibility is being determined. If fluctuating needs are apparent, this should also be factored into the person’s or their carer’s care plan, detailing the steps the Council will take to meet their or their carer’s needs in circumstances where they fluctuate.

21 Considering needs met by carers

21.1 The person’s eligibility determination is based on their needs and how these impact on their wellbeing. If they have a carer, consideration of what needs are met by a carer are considered after the eligibility determination and when a care and support plan is prepared. The care being provided by a carer will be taken into account when considering whether the person’s needs must be met.

22 Treatment of non-eligible needs

22.1 If the person has non-eligible needs, the Council will provide information and advice on what can be done to meet or reduce the need and what could be done to prevent or delay the development of needs in the future. Services that may be made available to everyone regardless of eligibility include reablement, and information and advice about alternative sources of support and advice about how to access them.
22.2 If the person has needs that do not meet the Council’s eligibility criteria they may qualify for help from other services, for example, health, housing, benefits, education, training, employment, transport and leisure. Local voluntary services, community groups and networks may also be able to help them.

22.3 Services that are funded and arranged by the NHS fall outside the scope of this policy.

23 Choice of Accommodation

23.1 If the Council is going to meet the person’s needs under sections 18 to 20 of the Care Act by providing or arranging for the provision of accommodation, they may express a preference for particular accommodation.

23.2 This applies if the person has been assessed as needing the following types of accommodation as set out in the Care and Support and After-care (Choice of Accommodation) Regulations 2014:

- Care home accommodation
- Shared lives scheme accommodation
- Supported living accommodation

23.3 The person will be able to choose between different providers of the above type of accommodation provided that:

- The accommodation is suitable in relation to their assessed needs
- To do so would not cost the local authority more than the amount specified in the adult’s personal budget for accommodation of that type;
- The accommodation is available; and
- The provider of the accommodation is willing to enter into a contract with the local authority to provide the care at the rate identified in the person’s personal budget on the local authority’s terms and conditions.

23.4 Whilst the Council shall do everything it can to meet the person’s choice, there may be some cases where a choice cannot be met, for example if the provider does not have capacity to accommodate the person. In such cases,
the Council will set out in writing why it has not been able to meet that choice and should offer suitable alternatives.

24 Review of the Support Plan

24.1 A review is an assessment that looks at the person’s current situation and identifies any changes to their eligible needs and the support required to meet them. An initial review of the planning arrangement will take place after six weeks; then a person’s needs should be reviewed at least annually.

24.2 During a review, all of the person’s needs should be reassessed to identify whether there has been a change in circumstances and whether this requires a change to the type or level of care and support required. The purpose of the review is to:

- Check whether the support plan is achieving the desired outcomes identified against their assessed needs;
- Reassess their needs and circumstances and those of their carer

24.3 Depending upon the person’s circumstances, a self-assessment may be considered as an appropriate means to initiate the review which is then verified by the Council.

24.4 If there is a significant change in circumstances, a review of the person’s eligible needs must be carried out.

25 Equality and Diversity

25.1 The Council is committed to ensuring that no one is treated less favourably because of age, race, ethnicity, religion, gender, sexual orientation, physical or mental impairment, caring responsibilities and political or other personal beliefs.
26 Complaints and Compliments

26.1 The person can let the Council know when things go right or when things go wrong. They can also let the Council know their suggestions of how things could be done better to help the Council improve its services.

26.2 If the person would like to make a complaint or send a compliment they can contact the Council in writing or by telephone using the details below:

Statutory Complaints Officer
Adult Social Care
Buckinghamshire County Council
New County Offices
Walton Street
Aylesbury

Email: socialcarecomplaints@buckscc.gov.uk

Telephone: 01296 382947.
APPENDIX 1 - ELIGIBILITY DECISION PROCESS
An individual is only eligible if they meet all three conditions below:

<table>
<thead>
<tr>
<th>Condition 1</th>
<th>Condition 2</th>
<th>Condition 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>The adult’s needs for care and support arise from, or are related to, a physical or mental impairment or illness and are not caused by other circumstantial factors. This includes if the adult has a condition as a result of physical, mental, sensory, learning or cognitive disabilities or illnesses, substance misuse or brain injury.</td>
<td>As a result of the adult’s needs, the adult is unable* to achieve two or more of the outcomes specified in the regulations.</td>
<td>As a consequence of being unable to achieve these outcomes, there is, or there is likely to be, a significant impact on the adult’s wellbeing**. ‘Wellbeing’ is a broad concept. It is described as relating to the following areas in particular:</td>
</tr>
</tbody>
</table>

| | • Managing and maintaining nutrition | • Personal dignity (including treatment of the individual with respect) |
| | • Maintaining personal hygiene | • Physical and mental health and emotional wellbeing |
| | • Managing toilet needs | • Protection from abuse and neglect |
| | • Being appropriately clothed | • Control by the individual over their day-to-day life (including over care and support provided and the way they are provided) |
| | • Being able to make use of the adult’s home safely | • Participation in work, education, training or recreation |
| | • Maintaining a habitable home environment | • Social and economic wellbeing |
| | • Developing and maintaining family or other personal relationships | • Domestic, family and personal domains |
| | • Accessing and engaging in work, training, education or volunteering | • Suitability of the individual’s living accommodation |
| | • Making use of necessary facilities or services in the local community, including public transport, and recreational facilities or services | • The individual’s contribution to society |
| | • Carrying out any caring responsibilities the adult has for a child. | |
* Condition 2 - being ‘unable’ means:

- unable to achieve the outcome without assistance including prompting
- able to achieve the outcome without assistance, but doing so causes the adult significant pain, distress or anxiety
- able to achieve the outcome without assistance, but doing so endangers or is likely to endanger the H&S of the adult, or of others
- able to achieve the outcome without assistance, but takes significantly longer than would normally be expected

** Condition 3

- There is also no single definition of wellbeing; it will depend on the individual, their circumstances and their priorities
- Wellbeing is a broad concept applying to several areas of life, not only to one or two. Therefore, a clear understanding of the individual’s views is vital to identifying and defining wellbeing in each case
- A ‘significant impact’ may be because:
  - the adult’s needs impact on at least one of the areas of wellbeing in a significant way, or
  - the cumulative effect of the impact on a number of the areas of wellbeing means that they have a significant impact on the adult’s overall wellbeing.
APPENDIX 2 – ELIGIBILITY DECISION PROCESS FOR CARERS

<table>
<thead>
<tr>
<th>Condition 1</th>
<th>Condition 2</th>
<th>Condition 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>The needs arise as a consequence of providing necessary care to an adult</td>
<td>As a result of the carer’s needs, either</td>
<td>As a consequence, there is or is likely to be a significant impact on the carer’s wellbeing, including:</td>
</tr>
</tbody>
</table>

- The carer’s physical; or mental health is, or is at risk of, deteriorating, or
- The carer is unable to achieve any of the following outcomes:
  - Carrying out caring responsibilities the carer has for a child:
  - Providing care to other persons for whom the carer provides care
  - Maintaining a habitable home environment
  - Managing and maintaining nutrition
  - Developing and maintaining family or other significant relationships
  - Accessing and engaging in work, training, education or volunteering
  - Accessing and engaging in work, training, education or volunteering
  - Making use of necessary facilities or services in the local community including recreational
  - Engaging in recreational activities

- Personal dignity (including treatment of the individual with respect)
- Physical and mental health and emotional wellbeing
- Protection from abuse and neglect
- Personal dignity (including treatment of the individual with respect)
- Physical and mental health and emotional wellbeing
- Protection from abuse and neglect
- Control by the individual over day-to-day life (including over care and support provided and the way it is provided)
- Participation in work, education, training or recreation
- Social and economic wellbeing
- Domestic, family and personal relationships
- Suitability of living accommodation
- The individual’s contribution to society
Condition 2 - being ‘unable’ means:

- unable to achieve it without assistance
- is able to achieve it without assistance but doing so causes the carer significant pain, distress or anxiety; or
- is able to achieve it without assistance but doing so endangers or is likely to endanger the health or safety of the carer, or of others.

This replaces the current Fair Access to Care services (FACs) needs and Low, Moderate, Substantial and Critical priorities.

People currently receiving council-arranged care will not have to be reassessed against the Care Act eligibility threshold until their next review. However, any reassessment must be carried out before 1 April 2016.