![C:\Users\XYZ\AppData\Local\Microsoft\Windows\INetCache\IE\ISQHTT4K\Vanamo_Logo[1].png]() **Promise Care Services Ltd**

**ASSESSMENT OF NEED AND ELIGIBILITY**

# Scope

* **Policy Statement**
* Care Act 2014
* Eligibility
* Outcomes
* **The Policy**
* Principles of Care Needs Assessment
* Sources of Information
* Information Gathering
* Physical and Emotional Wellbeing, and Mental Health
* Services Requested
* Passing Information to the Allocated Worker
* Referrals from Social Services Departments
* Emergency Service Provision
* Changes in an Individual’s Care Needs
* Reviews of Care Needs
* **Related Policies**
* **Related Guidance**
* **Training Statement**

# Policy Statement

The Care Act 2014 provides a framework across England, wherein all service users will have the same eligible needs criteria, enabling them to access care no matter where they live.

# Care Act 2014

The importance of the assessment process cannot be overstated within the care and support system. Person-centred throughout, the process must support the person to have choice and control, and involve them at all levels, from discussions to decision-making.

This approach, which local authorities (LAs) have implemented from April 2015, impacts our current LA-funded service users and on new LA-funded service users, as our local authority commissioning partners to start to implement these government changes.

Different types of assessment models will be undertaken but must always be appropriate and proportionate to the situation. Assessment may be face-to-face; a supported self-assessment, using the same tools as face-to-face; an online or telephone assessment; a joint assessment, where relevant agencies work together to avoid multiple assessments; or a combined assessment, where an adult and a carer are completed together. Some of these assessment models are already being used by LAs during COVID-19, when the Coronavirus Act 2020 amended some of the Care Act duties (the Coronavirus Act 2020 came into force under emergency powers in March 2020 and has a limited life of two years.)

The purpose of the assessment is to:

* Identify the person’s needs.
* Assess how they impact their wellbeing and reduce risks.
* Identify the outcomes that the person wants to achieve in their day-to-day life.

LAs will use the assessment to support the decision of whether needs are eligible for funded care and support by the LA or by a provider such as ourselves (who are contracted to deliver services on behalf of the LA).

# Eligibility

The National Eligibility Criteria sets a minimum threshold for adult care and support needs. In considering whether an adult with care and support needs has eligible needs, LAs must consider whether:

* The adult’s needs arise from or are related to, a physical or mental impairment or illness.
* As a result of their needs, the adult is unable to achieve two or more of the specified outcomes (see 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.

# Outcomes

The eligibility regulations set out a range of outcomes. LAs must consider more of these outcomes when determining eligibility:

* Managing and maintaining nutrition.
* Maintaining personal hygiene.
* Managing toilet needs.
* Being appropriately clothed.
* Being able to make use of the 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 any necessary facilities or services in the local community, including public transport and recreational facilities or services.
* Carrying out any caring responsibilities the adult has for a child.

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: this is the third condition that must be met and that LAs must consider. Wellbeing is core to the eligibility criteria.

The definition of wellbeing includes the following aspects:

* Personal dignity.
* 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, and the way it is provided).
* Participation in work, education, training, or recreation.
* Social and economic wellbeing.
* Domestic, family, and personal wellbeing.
* Suitability of living accommodation.
* The individual's contribution to society.

The full guidance on Assessment and Eligibility is in the Care and Support Statutory Guidance updated on 9 May 2016 issued under the Care Act 2014: Chapter 6.

# The Policy

In setting out this policy, the organisation is aware that the changes for LA-funded service users, at times of national emergencies, will bring challenges to us as a provider.

We have set out below how we will manage these changes. We are committed to working collaboratively with our health and LA partners to facilitate and contribute positively as they are implemented.

# Principles of Care Needs Assessment

Needs assessments are only carried out by competent members of staff who have been appropriately trained and who are specifically authorised for this task. Throughout the care needs assessment process, the staff member carrying out the assessment should communicate with and actively involve the prospective service user or their legally appointed representative. It is particularly important to find out the service user’s wishes and feelings and to take them into account; to provide the service user with full information and suitable choices, and to enable and encourage service users to make decisions about their care. We will comply with any special local arrangement for self-assessment by service users.

# Sources of Information

The general expectation is that the service user will give us the necessary information. Where this is not possible the service user’s carer, relative, or their legally-appointed representative becomes the most likely source. In such cases, the service user should, if at all possible, be present while information is gathered and recorded, as an indication that they agree that we should have access to the information and that the information provided to us is true. The staff member carrying out the assessment needs to interview the service user (and carer) either pre-admission or in the setting in which the service will be delivered. A specific appointment should be offered with a named staff member. The staff member should aim to create a warm and relaxed atmosphere for the interview and should allow the prospective service user to demonstrate their abilities, as well as discussing their needs. They should use the time to observe the service user. Within a domiciliary setting, it should be remembered that the service user’s home becomes the staff member’s workplace, so a full environmental risk assessment should be completed, as well as discussing what we have to offer.

Information should be recorded at the time of the interview or as soon as possible afterwards on the care needs assessment form. The staff member should be quite open about recording the information and should show the prospective service user the form if requested.

# Information Gathering

Full and comprehensive care needs assessment or pre-admission form should be completed with the service user and involving their relatives or representatives when requested. Staff need to ensure that consent is able to be given and, where there are capacity concerns, advice should be sought. During a national emergency, such provisions of duty have been amended to ensure that powers can be exercised.

# Physical and Emotional Wellbeing, and Mental Health

We record information about the service user’s health and abilities. It is the task of the staff member carrying out the needs assessment to decide which items are relevant for the service that this organisation is being asked to provide. The form lists a range of possible items for consideration. Although we need as full a picture as possible of the needs of the service user, we do not wish to intrude on the service user’s privacy any more than is necessary, so staff members must use their judgement as to which items on the form have to be completed.

Attention should be taken not to place too great a stress on disabilities. The staff member should emphasise from the outset that a worker will work with the service user (and with the carer, if applicable) and try to support the service user’s independence as far as possible. If there are health issues on which further medical or nursing details are required, the staff member should ask the service user or carer to obtain and pass to us the necessary reports, such as the patient summary record from the GP.

Any written documentation about the service user’s care needs should be appended to the form.

# Services Requested

This information is recorded on the form, detailing the services that this organisation is being requested to supply. At this point, a manager must take the formal decision that we are in a position to provide the requested services, given the details of the care needs assessment or pre-admission form.

# Passing Information to the Allocated Worker

When the manager has decided that we can supply services, identified workers are allocated to the case. We believe that the matching of the worker to the service user is of paramount importance and so due consideration is given to the worker’s availability. When all of the required elements have been agreed the service user will be informed of the staff team that will undertake the service. The worker will be introduced personally to the service user on the commencement of the service. The allocated worker(s) are responsible for reading and understanding the care plan.

# Referrals from Social Services Departments

In cases where a potential service user is referred by a social services department, the manager must obtain a summary of the needs assessment that the social services department has undertaken. A care needs assessment form will be completed using some of and verifying the details provided by the social services department’s care plan or care diary. The summary of the social services needs assessment should be filed with the organisation’s form. We will comply with any special local arrangements for self-assessment by service users.

# Emergency Service Provision

If the organisation has been requested to provide services at short notice or in a crisis, there may not be an opportunity to carry out a full assessment before starting to provide a service. A telephone discussion to ascertain as much information as is possible before the commencement of the service will be recorded and used as the care needs assessment for the first 72 hours of any immediate response on emergency service provision (see Coronavirus Act 2020 as an example). The organisation has a form specifically to record the needs of an immediate response situation. When emergency services are provided, the manager must complete the basic information required and allocate the case to a worker who is competent to undertake an initial contact assessment. In these circumstances, only experienced managers of the service will decide to respond.

Within three working days, the manager will arrange for a full assessment to be carried out and the form to be completed with all relevant details for providing services over a longer term. Where the immediate response is on a short-term basis only, the immediate response form will be used in conjunction with any other details supplied by health or social services to assist in the service delivery. If the service is provided at the request of a social services department, the manager must ensure that the department completes an assessment within two working days and passes the information to us as described above.

# Changes in a Service User’s Care Needs

It is the responsibility of any worker providing service to report to their manager any significant changes in a service user’s needs and circumstances. The manager is responsible for considering whether any change in the service is required as a result of the change in the service user’s needs. If so, the manager should initiate a discussion with the service user or the service user’s carer or representative, if appropriate and with the relevant social services department, if necessary. If the changes to the care plan are of a type not exceeding 2 hours more or less than the agreed care plan this will be deemed to be a temporary change. If the change is to be a permanent one a review will be instigated that will include a variation to the fees and charges.

# Reviews of Care Needs

A minimum standard of an annual review is the mechanism for the organisation to ensure that the needs of the service user are relevant. We will, however, retain the flexibility to initiate a review whenever we feel it is in the service user’s best interests.

Whether or not any specific changes to a service user’s needs and circumstances have been reported, the manager should review the appropriateness of the service provided within six weeks, and at least annually thereafter. Throughout the whole assessment process, great importance should be attached to the service user’s views of their needs and wishes, and service users should be given every encouragement to express themselves. In the LA areas where systems of self-assessment are in place, managers should seek advice from their social services department about the precise implications for their procedures. At the initial assessment of needs visit, a discussion will take place regarding the frequency of reviews. Where social services are involved with the service user, they retain responsibility for the setting up of reviews, however, it should be noted that this organisation reserves the right to initiate a review where there are concerns regarding the care or services provided.

# Related Policies

Accessible information and Communication

Autonomy and Independence

Care and Support Planning

Dignity and Respect

Meeting Needs

Mental Capacity Act 2005

Service user’s Contract

# Related Guidance

Care Act Fact Sheets:

https://www.gov.uk/government/publications/care-act-2014-part-1-factsheets/care-act-factsheets

CQC Regulation 9: Person-centred Care:

https://www.cqc.org.uk/guidance-providers/regulations-enforcement/regulation-9-person-centred-care

NICE Older people with social care needs and multiple long-term conditions [NG 22], published November 2015 and quality statement 2016:

https://www.nice.org.uk/guidance/ng22

Corona Virus Act 2020:

http://www.legislation.gov.uk/ukpga/2020/7/contents/enacted

NICE Older people with learning disabilities:

https://www.nice.org.uk/guidance/ng96

# Training Statement

All staff, during induction, are made aware of the organisation’s policies and procedures, all of which are used for training updates. All policies and procedures are reviewed and amended where necessary, and staff are made aware of any changes. Observations are undertaken to check skills and competencies. Various methods of training are used, including one to one, online, workbook, group meetings, and individual supervisions.

Date Reviewed: May 2023

Person responsible for updating this policy: **IFEYINWA ODOEMENAM**

Next Review Date: May 2024