Care Act – Eligibility Criteria

Cross-Service Workshop
11th February 2015
Purpose of session

• Provide overview of key features of Care Act
• Provide opportunity for focussed discussion on new eligibility criteria (for service users and for carers)
• Test out some case examples to assess their usefulness in developing understanding of criteria
• Generate questions which can support development of training and guidance for staff
• Identify next steps

Post-its available to jot down any questions
Introduction and overview

Care Act 2014
Introduction

- The Care Act received Royal Assent on 14 May 2014
- The Act is in three parts:
  1. Care and support
  2. Care standards
  3. Health
- Part 1 of the Act consolidates and modernises the framework of care and support law:
  - New duties for local authorities
  - New rights for service users and carers
The Care Act 2014 replaces many previous laws

- National Assistance Act 1948
- NHS and Community Care Act 1990
- Community Care (Direct Payments) Act 1996
- Chronically Sick and Disabled Person Act 1970
- Carers (Recognition and Services) Act 1995
Main Duties from April 2015

✓ Promote wellbeing
✓ **Prevent, reduce, delay** onset of care/support needs
✓ Establish and maintain information & advice services
✓ Provide independent advocacy, where appropriate
✓ Shape local market, contingency planning
✓ **New national eligibility criteria – lower??**
✓ **Duty to assess carers – national eligibility criteria**
✓ Universal Deferred Payments Scheme
✓ Personal budgets and direct payments in law
✓ Establish Safeguarding Adults Board – new guidance
✓ Promote integration with NHS and others
Proposals for April 2016

- Introduction of a cap on care costs
- £72k for all adults aged 25 years +
- Free care if eligible needs developed prior to 25 years
- Care Accounts - track progress to cap
- People need to pay own daily living costs
- Increased capital limit to £118,000 where house included

Consultation open – closes 30th March 2015
## The framework of the Act and its statutory guidance

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Changes to assessment, eligibility and financial assessment processes

Person appears to have needs

Assessment

Are their needs eligible?

YES

Deferred payment agreement

Financial assessment

NO (written explanation)

Advice and information
What does this mean for local authorities?

- New duties and responsibilities
- Changes to local systems and processes
- More assessments and support plans
- Responsibilities towards all local people
- Better understanding of self funders and the care market needed
- Training and development of the workforce
- Costs of reforms
- Preparation for reforms needed
Oldham’s Approach

- Using Care Act as key driver for transformation
- Refreshing Adult Social Care Strategy 2015-18
- Linking budget saving, Better Care Fund and Urgent Care Alliance activities
- General compliance by this April – using 15/16 to refine, evaluate, improve and reshape
- Using/adapting national resources and toolkits e.g. deferred payments; communications
- Using/adapting national workforce development resources – developed nationally by Skills for Care, SCIE, LGA
- Collaborating with other NW authorities to share ideas and resources e.g. using regional budget to develop staff training
Progress so far

- Project team in place – workstreams progressing actions
- Impact/demand modelling undertaken; more to do
- Prevention approach agreed – adoption of prevention framework in Care and Support statutory guidance
- Information audit almost complete – updates needed
- New assessment forms under development
- Links with Early Help Offer being made
- Independent advocacy provision mapped – need to identify gaps in sufficiency and ways to increase
- Market position statement published; review of commissioning; outcome-based payments
- Making Safeguarding Personal – more to do
- Approved premises – due to start
Eligibility

Care Act 2014
National eligibility framework

- After completion of the assessment process, the local authority will determine whether the individual has **eligible needs**

- The Act introduces a national eligibility threshold:
  - whether the person has needs due to a physical or mental impairment or illness
  - whether those needs mean that they are unable to achieve two or more specified outcomes
  - as a consequence there is, or is likely to be, a significant impact on their wellbeing

- Local authorities can also decide to meet needs that are not deemed to be eligible if they chose to do so
Eligibility threshold

An adult meets the eligibility criteria:
- Their needs are caused by physical or mental impairment or illness
- As a result of the adult's needs they are unable to achieve two or more specified outcomes
- As a consequence there is or is likely to be a significant impact on the person's well-being

An adult is to be regarded as being unable to achieve an outcome if the adult:
- is unable to achieve it without assistance;
- is able to achieve it without assistance but doing so causes the adult significant pain, distress or anxiety;
- is able to achieve it without assistance but doing so endangers or is likely to endanger the health or safety of the adult, or of others; or
- is able to achieve it without assistance but takes significantly longer than would normally be expected.

The specified outcomes are:
- 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 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
National carers eligibility framework

- After completion of the assessment process, the local authority will determine whether the carer has **eligible needs**
- Carers can be eligible for support in their own right
- The Act introduces a national carers’ eligibility threshold:
  - whether the carer’s needs are due to providing **necessary** care for an adult
  - whether those needs puts the carer’s health at risk or means that they are unable to achieve specified outcomes; **and**
  - as a consequence there is, or is likely to be, a significant impact on their wellbeing
- Local authorities can also decide to meet carers’ needs that are not deemed to be eligible if they chose to do so
A carer meets the eligibility criteria if:
- Their needs are caused by providing necessary care for an adult. As a result:
  - their health is at risk
  - or they are unable to achieve specified outcomes
- As a consequence there is or is likely to be a significant impact on the carer’s well-being

A carer is to be regarded as being unable to achieve an outcome if the carer:
- is unable to achieve it without assistance;
- is able to achieve it without assistance but doing so causes significant pain, distress or anxiety, or is likely to endanger health or safety

The specified outcomes are:
- 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
- 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
- Engaging in recreational activities
Next steps

Assessment
• What are the needs and outcomes the person wants to achieve?

Eligibility determination
• Are the person’s needs eligible?

Met needs
• What needs can be/are being met through non-service provision?

Unmet needs
• Are included in the personal budget