

First contact, identifying needs and assessment



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This document includes extracts from the *Care Act 2014 Statutory Guidance* – the full guidance is available online. [gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance](https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance)



Survey results in this document are taken from an ADASS Carers Policy Network survey completed by 47 local authorities in June-August 2018. Comments and responses are included in this document to indicate the direction of travel in practice since the implementation of the Care Act.

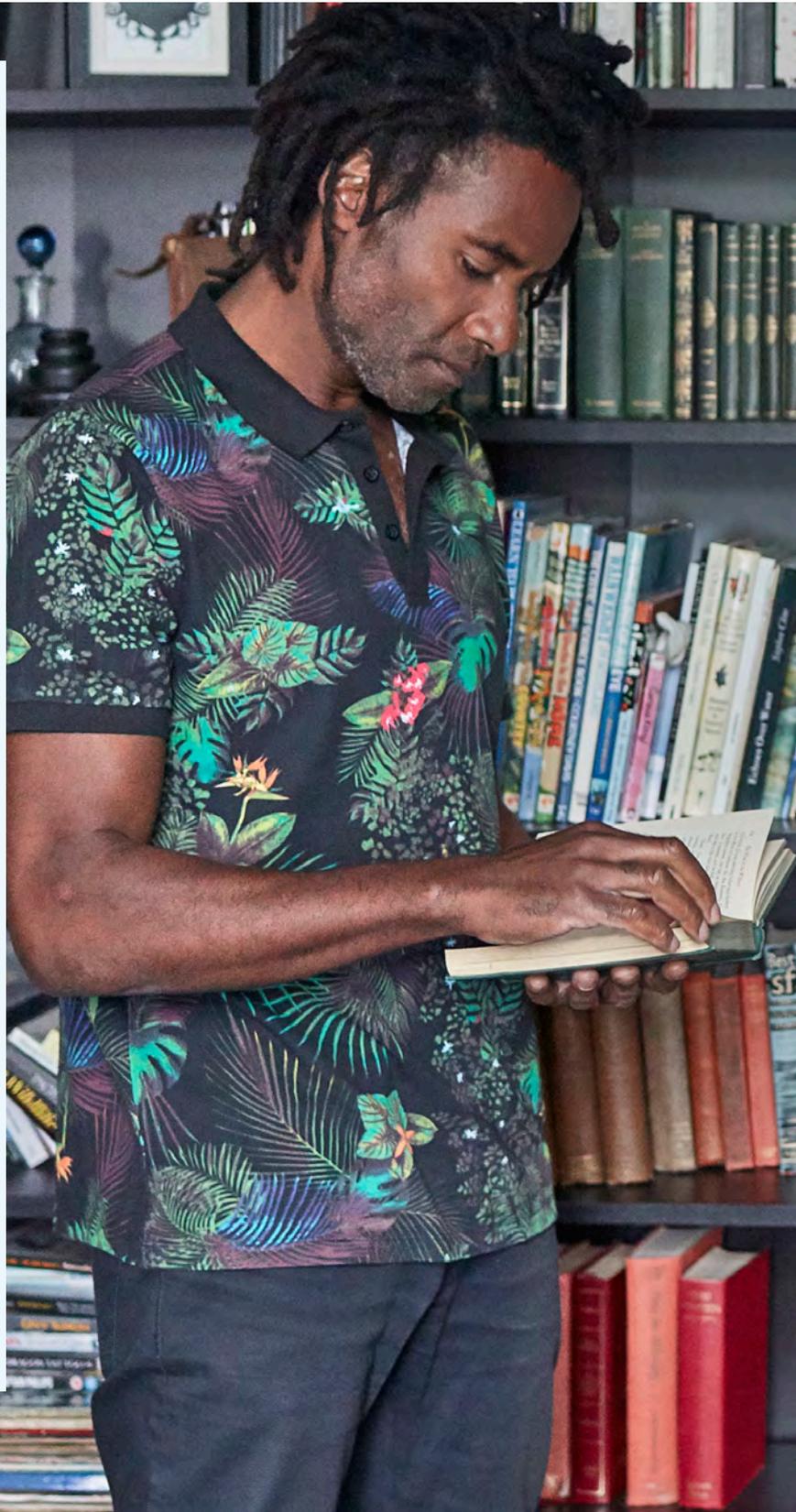
Chapter 2A

Assessment and eligibility

 See chapter 6 of the statutory guidance

Statutory guidance

- 6.16** Where an individual provides or intends to provide care for another adult and it appears that the carer may have any level of needs for support, local authorities must carry out a carer's assessment. Where an adult provides care under contract (eg for employment) or as part of voluntary work, they should not normally be regarded as a carer, and so the local authority would not be required to carry out the assessment.
- 6.17** There may be circumstances where the adult providing care, either under contract or through voluntary work, is also providing care for the same adult outside of those arrangements. In such a circumstance, the local authority must consider whether to carry out a carer's assessment for that part of the care they are not providing on a contractual or voluntary basis. There may also be cases where the person providing care does so as voluntary work or under contract, but the nature of their relationship with the person cared for is such that they ought to be considered as a 'carer' within the scope of the Act. The local authority has the power to carry out an assessment in such cases, if it judges that there is reason to do so.



6.18 Carers' assessments must seek to establish not only the carer's needs for support, but also the sustainability of the caring role itself, which includes both the practical and emotional support the carer provides to the adult. Therefore, where the local authority is carrying out a carer's assessment, it must include in its assessment a consideration of the carer's potential future needs for support. Factored into this must be a consideration of whether the carer is, and will continue to be, able and willing to care for the adult needing care. Some carers may need support in recognising issues around sustainability, and in recognising their own needs. This will allow local authorities to make a realistic evaluation of the carer's present and future needs for support and whether the caring relationship is sustainable. Where appropriate these views should be sought in a separate conversation independent from the adult's needs assessment.

6.19 The carer's assessment must also consider the outcomes that the carer wants to achieve in their daily life, their activities beyond their caring responsibilities, and the impact of caring upon those activities. This includes considering the impact of caring responsibilities on a carer's desire and ability to work and to partake in education, training or recreational activities, such as having time to themselves. This impact should be considered in both a short-term immediate sense but also the impact of caring responsibilities over a longer term, cumulative sense.

What is the national eligibility threshold for carers?

Statutory guidance

6.116 Carers can be eligible for support in their own right. The national eligibility threshold for carers is also set out in the Care and Support (Eligibility Criteria) Regulations 2014. The threshold is based on the impact a carer's needs for support has on their wellbeing.

6.117 In considering whether a carer has eligible needs, local authorities must consider whether:

- the 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; and
- as a consequence of that fact there is, or there is likely to be, a significant impact on the carer's wellbeing.

A carer's needs are only eligible where they meet all three of these conditions.

Whole family approach

Statutory guidance

- 6.65** The intention of the whole family approach is for local authorities to take a holistic view of the person's needs and to identify how the adult's needs for care and support impact on family members or others in their support network.
- 6.66** During the assessment the local authority must consider the impact of the person's needs for care and support on family members or other people the authority may feel appropriate. This will require the authority to identify anyone who may be part of the person's wider network of care and support.
- 6.67** In considering the impact of the person's needs on those around them, the local authority must consider whether or not the provision of any information and advice would be beneficial to those people they have identified. For example, this may include signposting to any support services in the local community.
- 6.68** The local authority must also identify any children who are involved in providing care. The authority may become aware that the child is carrying out a caring role through the assessment of the person needing care or their carer, or informed through family members or at school. Identification of a young carer in the family should result in an offer of a needs assessment for the adult requiring care and support and, where appropriate, the local authority must consider whether the child or young carer should be referred for a young carer's assessment or a needs assessment under the Children Act 1989, or a young carer's assessment under section 63 of the Care Act. Local authorities should ensure that adults' and children's care and support services work together to ensure the assessment is effective – for example by sharing expertise and linking processes.
- 6.69** When carrying out an adult's or carer's assessment, if it appears that a child is involved in providing care the local authority must consider:
- the impact of the person's needs on the young carer's wellbeing, welfare, education and development
 - whether any of the caring responsibilities the young carer is undertaking are inappropriate.
- 6.70** An assessment should take into account the parenting responsibilities of the person as well as the impact of the adult's needs for care and support on the young carer.
- 6.71** Local authorities must also consider whether any of the caring tasks the child is undertaking are inappropriate. They should consider how supporting the adult with needs for care and support can prevent the young carer from undertaking excessive or inappropriate care and support responsibilities. A young carer becomes vulnerable when their caring role risks impacting upon their emotional or physical wellbeing or their prospects in education and life. This might include:
- preventing the young carer from accessing education, for example because the adult's needs for care and support result in the young carer's regular absence from school or impacts upon their learning
 - preventing the young carer from building relationships and friendships
 - impacting upon any other aspect of the young carer's wellbeing.

6.72 Inappropriate caring responsibilities should be considered as anything which is likely to have an impact on the child's health, wellbeing or education, or which can be considered unsuitable in light of the child's circumstances and may include:

- personal care such as bathing and toileting
- carrying out strenuous physical tasks such as lifting
- administering medication
- maintaining the family budget
- emotional support to the adult.

6.73 When a local authority is determining whether the tasks a child carries out are inappropriate, it should also take into account the child's own view wherever appropriate.

The statutory guidance provides further detail about:

- the purpose of needs and carers' assessments; refusal of assessment; first contact and relevant safeguarding, advocacy and capacity duties; supporting the person's involvement in the assessment; taking a preventative approach and looking at a person's strengths
- the importance of appropriate and proportionate assessment, including supporting the person through the process; enabling supported self-assessment; combining assessments and referring to NHS Continuing Healthcare where appropriate
- taking into account the wider picture by considering fluctuating needs and the impact on the whole family
- the importance of having assessors appropriately trained and with the experience and knowledge necessary to carry out the assessment, including specialist assessments for those who are deafblind
- carrying out integrated assessment where a person has other needs, for example where the person also has health as well as care and support needs; keeping records and delegating assessments
- the eligibility framework to ensure that there is clarity and consistency around local authority determinations on eligibility.

Efficient and effective interventions to fulfill these duties

Across the country, there are many excellent examples of how local authorities have approached their assessment and eligibility duties. Key themes include:

- understanding who is best placed to provide assessments within a local area can ensure a **proportionate approach** to carers assessments
- exploring the actual cost of assessments can be used to inform local approaches to **delegating** some or all assessment functions
- using local and national protocols can assist authorities in adopting a ‘no wrong door approach’ ensuring that the needs of **young carers** and their families are met
- **whole family approaches** can be key to maximising the impact of resources and identifying opportunities to support carers
- appropriate protocols between **adults and children’s** services can provide a smooth pathway for assessment and support of identified young carers
- providing and using **assessment tools** which link to the impact of caring on wellbeing: as per the eligibility regulations can assist in ensuring practice is applied consistently
- consideration should be given to **integrated assessments** (for example with Health) where other needs are identified to reduce the need for multiple assessments.



Survey results

When asked about how they conduct carers’ assessments, 63% of respondents said that all statutory carers’ assessments are conducted in house. 20% of respondents contract out assessments including eligibility decisions and 22% take advice from the contracted organisation but make eligibility decisions themselves.

For those who completed assessments in-house, this was likely to be because the council felt it better allowed for a whole family approach to be applied, whereas some who outsourced assessments said that carers in their area wanted a specialist organisation (like a carers’ organisation) to carry them out. Some chose to keep complex assessments in-house and contracted out low-level or less complex assessments.

In areas where some assessments are done in-house and others are contracted out, practices varied as to how they made this distinction. Most often, it was assessments for carers who care for someone who is known to the local authority already which are done in-house whereas carers who were new to the local authority who are assessed externally. However in other local authorities, it was the level of complexity, the presence of a conflict of interest or the need for a second opinion which influenced whether it was completed in house or not. Some areas had developed practices where professionals outside the adult social care team or the commissioned service complete assessments. For example, in some areas staff in the local mental health trust are able to assess adults in receipt of their services.

In general, councils are confident that they are applying the carers eligibility criteria correctly. Examples of practices being used to ensure correct application include:

continued over

Survey results (continued)

- systematically embedding the eligibility criteria into assessment tools allowing assessors to go through the sections one by one
- development of an eligibility matrix
- reviewing eligibility guidance on an annual basis following changes to Care Act guidance.

Practices regarding joint assessments are varied and councils have different ways of ensuring they comply with the Care Act, although most respondents mentioned the importance they place on giving choice to the carer. When the carer requests it or the council feels it is appropriate, councils will offer a separate assessment but many will complete assessments jointly in the first instance to allow this to be done holistically. In some areas, even when a separate assessment is requested, the same person will complete both assessments to ensure that any care and support plans are aligned. Some authorities are looking to develop this area as there are some discrepancies between the experiences of carers who have joint and separate assessments.

Doncaster assessments

In Doncaster, local authority staff in community led support teams complete low level assessments that include assessments for carers. These community teams underpin the adult carer service and seek to identify and support carers by activating a fast response allowing for an early intervention and prevention model to be applied.

Their assessment tool is person centred and outcome focussed and time has been invested in developing staff to aid their carer understanding and approach. This has included staff training sessions, engaging with extended leadership groups to strengthen carer messages, and using carer e-learning packages.

This has been successful in enabling carers to access the support they need quickly and proactively.

Lincolnshire mixed methods approach to assessments

In Lincolnshire, the council has a range of formats for the assessment, appropriate to the presenting need of the carer. A telephone based service is offered alongside a community based service. This mixed methods approach gives carers a choice although more complex cases, young adult carers and end of life carers are routed directly for face to face assessments. Carers enter the service through the call centre, but get support from the community based provider who may be better placed to meet their need. The benefits of this approach are that we are able to help a high volume of carers quickly and can offer a range of talking to carers in ways that will best suit the person. However the telephone offer helps reach all corners of a large rural county, and can reach housebound carers easily and cost effectively, avoiding travel costs.

The council works hard to have a consistent approach as part of their mixed methods offer of carers' assessments. Both providers access the same case management database. The quality assurance system also includes six weekly case review meetings with both providers; regular case led reflective practice sessions; and a single lead practitioner who oversees the quality of all carer assessments and authorises personal budgets.

Whole family approach

The Care Act introduced a number of reforms to the way that care and support for adults with care needs are met. It requires local authorities to adopt a whole system, whole council, whole family approach, coordinating services and support around the person and their family. The intention of the whole family approach is for local authorities to take a holistic view of the person's needs, in the context of their wider support network. The approach must consider both how the adult or their support network or the wider community can contribute towards meeting the outcomes they

want to achieve and whether or how the adult's needs for care and support impacts on family members or others in their support network.

The whole family approaches guide encourages practitioners to think family, the importance of a proportionate approach to assessment and the power to join up assessments.

local.gov.uk/sites/default/files/documents/care-act-and-whole-family-6e1.pdf

The memorandum of understanding which has been developed by the Associations of Directors of Adult Social Services and Children's Services, highlights key principles to ensure that there should be '**no wrong doors**' for young carers and their families. The memorandum commits departments to work together locally, adopting a whole system, whole family approach to providing support for young carers and their families. The principles underpin good practice including the recognising that the presence of a young carer in the family should always constitute an appearance of need and should trigger either an assessment or the offer of an assessment to the person needing care.

londonadass.org.uk/wp-content/uploads/2014/10/No-wrong-doors-final-MOU-March-2015-.pdf

Doncaster Metropolitan Borough council's whole family approach

Doncaster Metropolitan Borough council has continued to deliver their carers assessment function directly and have worked to ensure that their assessment processes are Care Act compliant. The assessment form is based on the principles of a whole family approach with the recognition of multiple caring arrangements and joint assessment. The assessment process embraces the content of the eligibility regulations by focusing on the impact of caring on wellbeing. The purpose is to ensure a consistent approach and identifies other professionals who may be able to contribute to the assessment. Carer identified needs and outcomes form a main part of the assessment form.

doncaster.gov.uk/services/adult-social-care/carersoffer



Survey results

Many councils were confident that they are applying a 'whole family approach' to assessments because of local training, joint working between staff working with adults and young carers and having a 'think family' approach across all work with carers. One council has a prompt within their IT system which reminds practitioners to follow a whole family approach.

Lots of survey respondents said that support planning for young carers is part of a whole family holistic approach involving, for example, a multi-agency family plan and team around the family meetings. For many councils, planning support for young carers following an assessment involves categorising them depending on the level of care they are providing. These categories reflect different levels of support which are provided and can change as the young carers' needs change.

For example in one local authority there are three tiers:

- tier one – young carer is coping and functioning well, requiring low level support
- tier two – young carer experiencing problems relating to their caring role
- tier three – young carer entrenched in their role as primary carer, requiring high levels of support.

Self-assessments



Survey results

Just over half of respondents offer a self-assessment in paper format. This isn't necessarily part of their normal offer to carers but is considered to be a part of being flexible and adaptable.

37% of councils offer an online self-assessment for carers and many are planning to introduce this in the future. Some councils have other online options including screening tools and general contact forms which offer an online route into support.

Liverpool council's self-directed assessments

Liverpool City council's carer assessment process embodies the spirit of the Care Act embracing prevention, reducing impact of the caring role on carers and improving carers' health and wellbeing. What makes Liverpool's approach effective and efficient is that it places a strong emphasis on self-directed assessment.

Referrals can be made by any organisation or carers can self-refer. Once a referral has been made the case is allocated to a carers development worker (CDW) who sends out an information pack and guidance on completing the self-supported assessment. The CDW will complete the form with the carer if that is the carer's request. The self-supported assessment aims to place the carer at the centre of the assessment process. It is not a test to check ability to care and focuses on impact of the caring role as opposed to number of hours or duties undertaken. Once the self-directed assessment is received the CDW will visit the carer to arrange to develop their support plan which has been designed as a tool to assist with prompting conversation between the CDW and the carers about how the carer can best be supported. The *Carers self-supported assessment form* can be found online: forms.liverpool.gov.uk/contour-forms/carers-self-directed-assessment-ext

The guidance can be found here: liverpool.gov.uk/media/2810/carers-self-directed-assessment-guidance-notes2012.pdf

Liverpool has produced a series of documents which demonstrate how services for carers can be delivered effectively and efficiently including a carer's assessment form.

forms.liverpool.gov.uk/contour-forms/carers-self-directed-assessment-ext

Southampton online self-assessment tool

Southampton uses an online electronic self-assessment tool. It is in its second iteration with improvements from the original in 2015. If there are any issues, these can be addressed over the phone. In 2017/18 they had 300 carers complete an assessment this way, which represented 100% of the assessments completed in the area.

southampton.gov.uk/health-social-care/adults/adult-social-care/carers-assessment.aspx

East Sussex online carers assessment form

In East Sussex carers can download the carers assessment form online – there is online guidance on the website alongside the form and contact details for the council and local carers' centre, if help is needed. <https://www.eastsussex.gov.uk/socialcare/carers/assessment>

Assessing young carers



Survey results

One third of respondents said that they outsource young carers assessments to a commissioned service and for some this is the same service as adults, for others it is a specialised young carers service. For those who have kept assessments in house, some have specific youth workers who would complete assessments whereas some say that the assessment would be done by the team who is working with the cared for person.

Some areas are starting to involve schools in the assessment process and one area said that they are hoping that schools will be able to complete young carers' assessments in the future. In another council the initial assessment involves the parent/carer of the young person, but a second stage of the assessment involves seeing the young carer at school so that they have the opportunity to talk away from the cared for person.

MACA-YC18 (Multidimensional assessment of caring activities), PANOC-YC20 (Positive and negative outcomes of caring) and the My star outcomes tool are all popular assessment tools.

Some also mentioned using:

- Saul Becker screening tools
- the same tools as with adults
- an adapted version of the general 'child in need' assessment
- their own tools developed by the council/ young carers service.

60% of respondents are using the 'No wrong doors policy' and many others still apply this approach but don't have the official policy in place. All other respondents were aspiring to have this in place in the future.

"We have a single point of access for Carer Support, one phone number for the whole county, so this enables the right door to be chosen first time and the ping-ponging of referrals is no longer a significant issue."

Survey respondent

Half of councils are currently recording how many of their young carers are not in education, employment or training (NEET) and others acknowledged that this is an area for development.

Further useful resources

Carers UK publishes a guide to carers' assessments which is updated annually. The guide covers a range of areas including assessments, eligibility for support, whole family approach and young carers.

carersuk.org/help-and-advice/practical-support/getting-care-and-support/carers-assessment

Skills for Care published a useful report which contains valuable information from carers about their experiences which can help local authorities consider workforce issues in relation to carers' assessments from the carers' perspective.

skillsforcare.org.uk/Document-library/Skills/Carers/Carersassessments.pdf

Social Care Institute for Excellence (SCIE) has developed a range of resources to support local authority staff, social workers and others involved in assessment and eligibility

scie.org.uk/care-act-2014/assessment-and-eligibility

Chapter 2B

Charging and financial assessment

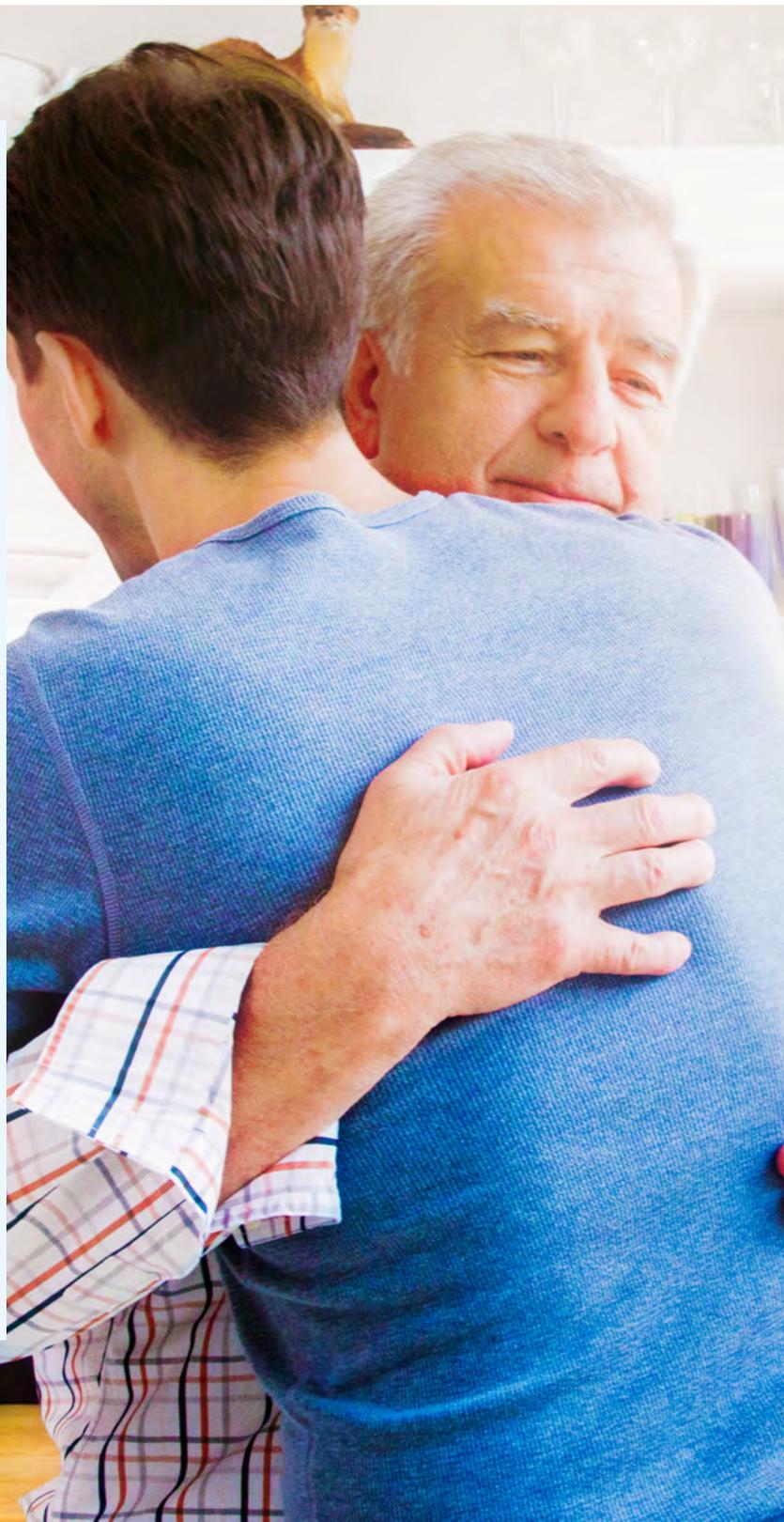
 See chapter 8 of the statutory guidance

Statutory guidance

8.49 Where a carer has eligible support needs of their own, the local authority has a duty, or in some cases a power, to arrange support to meet their needs. Where a local authority is meeting the needs of a carer by providing a service directly to a carer, for example a relaxation class or driving lessons, it has the power to charge the carer. However, a local authority must not charge a carer for care and support provided directly to the person they care for under any circumstances.

8.50 Local authorities are not required to charge a carer for support and indeed in many cases it would be a false economy to do so. When deciding whether to charge, and in determining what an appropriate charge is, a local authority should consider how it wishes to express the way it values carers within its local community as partners in care, and recognise the significant contribution carers make. Carers help to maintain the health and wellbeing of the person they care for, support this person's independence and enable them to stay in their own homes for longer. In many cases of course, carers voluntarily

continued over



meet eligible needs that the local authority would otherwise be required to meet. Local authorities should consider carefully the likely impact of any charges on carers, particularly in terms of their willingness and ability to continue their caring responsibilities. It may be that there are circumstances where a nominal charge may be appropriate, for example to provide for a service which is subsidised but for which the carer may still pay a small charge, such as a gym class. Ultimately, a local authority should ensure that any charges do not negatively impact on a carer's ability to look after their own health and wellbeing and to care effectively and safely.

8.51 While charging carers may be appropriate in some circumstances, it is very unlikely to be efficient to systematically charge carers for meeting their eligible needs. This is because excessive charges are likely to lead to carers refusing support, which in turn will lead to carer breakdown and local authorities having to meet more eligible needs of people currently cared for voluntarily. As an example, work carried out by Surrey county council found that if even 10% of people with care and support needs in families supported by carers presented to the council with eligible needs as a result of carer breakdown, the resulting cost would be three times the current total budget for carer support.

8.52 Local authorities may also wish to consider whether charging is proportionate when light touch carers assessments are undertaken for small scale help. There is a risk that financial assessments might become the most costly part of the process and something that is administratively burdensome.

8.53 Where a local authority takes the decision to charge a carer, it must do so in accordance with the non-residential charging rules. In doing so, it should usually carry out a financial assessment to ensure that any charges are affordable. However, it may be more likely, in the case of a carer, that the carer and the local authority will agree that a full financial assessment would be disproportionate as carers often face significantly lower charges.

8.54 In such cases, a local authority may choose to treat a carer as if a financial assessment has been carried out. When deciding whether or not to undertake a light-touch financial assessment, a local authority should consider both the level of the charge it proposes to make as well as the evidence the person is able to provide that they will be able to afford the charge. They must also inform the person when a light-touch assessment has taken place and make clear from the outset that the person has the right to request a full financial assessment should they so wish.

The statutory guidance provides further detail about:

- common issues for charging
- charging for care and support in a care home
- choice of accommodation when arranging care in a residential setting
- making additional payments for preferred accommodation
- charging for home care and support in a person's own home
- charging for support to carers
- requesting local authority support to meet eligible needs.

Efficient and effective interventions to fulfill these duties

Across the country, there are some examples of how local authorities have approached charging and financial assessment. Key themes include:

- the **economic case for investing** in carers should be underpinned by effective modelling in order to assist authorities in determining their approach to charging
- recognise and value the **important role** that carers play in supporting the sustainability of the current care system.

Local authorities can, and most do, charge for care provided to individuals. However, most authorities do not charge for providing support to carers as they regard this as counterproductive in supporting carers. However, if a local authority does decide to charge a carer then it must carry out a financial assessment to decide whether the carer can afford to pay. In cases where the support to the carer involves providing care to the person being cared for, the law says that the carer cannot be charged.

A short factsheet has been developed for local authorities to use in considering whether to put in place a policy of charging carers. It makes the case that charging would be a false economy because it would lead to increased 'carer breakdown' and the costs of replacing the care provided by those carers would outweigh the income from charging.

local.gov.uk/sites/default/files/documents/economic-case-investment--530.pdf

Examples of cost-benefit analysis

Surrey County council

Surrey County Council Adult Social Care provides support to just over 25,000 people on any given day. It also funds services to over 13,000 carers a year, funded via a Joint Carers' Commissioning Group at a cost of just over £5 million per year. In around 10,000 of these cases, neither the adult service user or carer receive any direct support from Adult Social Care. A cost modelling exercise has been undertaken to look at the

impact of ceasing carers' support and the financial consequence. The model estimates that, if these carers' services were withdrawn, 10,000 of these carers would be left unsupported, and up to 40% could break down within a few months. Not all cared for people would necessarily seek help from the council and not everyone eligible for help would take up services. However, if just 10% were eligible and took up publicly funded services, the model suggests a whole-year cost of over £14.7 million a year for replacing the care provided.

Surrey has also completed a further cost benefit analysis of their support for young carers. Their short paper, produced in collaboration with Ecorys, has demonstrated the estimated benefits from supporting young carers in Surrey. It was estimated that Surrey Young carers potentially avoided the taxpayer spending just under £3 million (£2,736,954) over the course of one year by avoiding young carers becoming Child in Need status. Compared to the costs of delivery of Surrey Young Carers in 2015/16 (£925,767), this leaves a return on investment of almost £3 (£2.96) for every £1 spent on the service.

London Borough of Newham

London Borough of Newham adopted an approach to determine the actual cost of care provided by carers to understand the economic contribution of carers to the social care system. Newham identified the cost of the annual carers allocation to support the continuation of unpaid care (including respite) and demonstrated that from the sample of 35, there was a £110,344 reduction in cost because of the need being met by the carer. This shows that, for every £1 invested in carers, there is a potential equivalent reduction in local authority cost of £5.90 (£4.90 net reduction), therefore illustrating the importance of carers and their role in supporting social care.

 **Survey results**

When asked about charging for carers services, 87% of survey respondents stated that their council doesn't charge carers for services and they have no plans to. The minority who did charge for some services said there are grants available. Some respondents included statements about the value of carers to their local area.

“Carers save the nation and [our council] a great deal of money and most of the support carers receive is typically modest in scale. The cost of undertaking financial assessments would be disproportionately high and would make no economic sense.”

Survey respondent

“In [our council] we recognise and value carers who we see as key partners in the delivery of services. We understand the support they provide is invaluable. Carers are instrumental in helping support a great number of local people and without their support health and social care would be under greater pressure.”

Survey respondent

The ADASS Carers Policy Network would like to thank organisations and individuals who submitted practice examples and supported the development of this document.



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THE FULL EFFICIENT AND EFFECTIVE INTERVENTIONS SERIES OF DOCUMENTS INCLUDES:



General responsibilities and universal services



First contact, identifying needs and assessment



Person-centred care and support planning



Integration and partnership working