Fair Access to Care Services (FACS)

Policy, Eligibility Framework and guidance

December 2013
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1.0 Introduction to the FACS guidance

1.1 Policy Statement

The Department of Social Care is committed to the implementation of the Fair Access to Care Services initiative. It has developed criteria which ensure that adults seeking or using services have access to appropriate, effective and timely help that promotes their independence. Under the Fair Access Framework, adult social care will prioritise and meet people’s assessed needs according to the risks to their independence but will do so in the context of finite resources. The Department acknowledges that decisions about eligibility rely on a proportionate and quality assessment of need.

1.2 Policy Context

The Department of Social Care has a statutory duty to provide social care services and other forms of support to some of the most vulnerable adults in the community.

The need to have a transparent and robust assessment framework is supported by the introduction of the Social Services Act. The Act places a duty on the Department to be clear in the way that it assesses those eligible for support and enables charges to be made for the provision of social care services to meet assessed needs.

In order to be eligible to receive social care services the person or carer must meet the following conditions;

a) Be born on the Island
b) Has been ordinarily resident on the Island throughout the 5 years immediately preceding his or her application for such service or support

c) the person demonstrates his or her ability to pay the Department the full cost of any charges for those services as set out under the Act or prescribed in regulations.

If a person does not meet the above criteria but the Department considers that person is in ‘Grave need’ of social care service or carer support and has no reasonable means of obtaining them other than from the Department, the Department may treat the person as eligible for such services. See appendix 3 for guidance.

Presently assessments are available to those adults with a permanent and substantial disability and those older people with a severe illness, frailty, disability or vulnerability requiring support, advice, information or practical help. Assessments are also available to carers.

1.3 Who is this guide aimed at?

The guide is aimed at anyone undertaking assessments or referrals for or on behalf of the Department of Social Care with adult social care responsibilities including:
• social workers, members of other professions and other staff using FACS to make key decisions about individuals’ and carers’ eligibility for support
• first line managers who are responsible for overseeing the decisions being made in their organisations about people’s eligibility for support
• staff handling complaints and appeals against FACS decisions
• trainers and educators of social work students, newly qualified social workers and those working in social care settings.

People using or seeking services and support, and their carers, parents of disabled children and relatives of others requesting or referred for adult services might wish to use the guide as well as the public information leaflet Adult Services – Fair Access to Care Services.

The guide may also be helpful to other groups with an interest in the FACS system, including: political members, GPs, hospital and other Department of Health staff, staff providing information and advice to people who want to use services, and independent representatives and service providers, managers and workers in the private and voluntary sector.

1.4 What is FACS?

FACS is an eligibility framework for allocating adult social care resources fairly, transparently and consistently. The framework aims to deliver:

Fair (equitable, non-discriminatory and inclusive)
Access (providing the right to services and information at the right time, the right place and appropriate to need)
Care Services (services and information to meet the needs of individuals, carers and communities)

The FACS framework is constructed by four factors that are identified as key to maintaining an individual's independence over time. The factors are:

1. keeping independent (or autonomy),
2. health and safety,
3. management of daily routines,
4. involvement in family and wider community life.

These four factors are of equal importance, no factor taking precedence over another. The purpose of assessment is to determine the impact on an individual if the issues relating to independence are not addressed. These are can be indicated as CRITICAL, SUBSTANTIAL, MODERATE AND LOW.
1.5 Who has the right to an assessment?

A social care assessment is the process by which information is gathered about a person to see if they have a need for community care services.

Undertaking a social care assessment is a statutory duty on the Department and a service in its own right. An assessment is separate from the later decision about the provision of services. It is provided under the Social Services Act which states:

‘If it appears to the Department that the eligible person may be in need of social care services, the Department shall carry out an assessment of those needs in such a manner as it considers appropriate and decide accordingly whether that person is in such need’

This means that an assessment is triggered when:

The individual appears to be a person for whom the Department may provide a social care assessment, for example - they are disabled, elderly or unwell and; The individual’s circumstances may need the provision of social care services.

Carers also have a right to a social care assessment under the Social Services Act which states;

‘If it appears to the Department that —
(a) a person provides, or intends to provide another person with a substantial amount of care on a regular basis; and
(b) that other person is a person for whom the Department may provide or secure the provision of social care services in the community under section 9, the Department shall carry out an assessment of the carer’s ability to provide, or to continue to provide that care in such manner as it considers appropriate.’

Social care services may be provided to individual adults with needs arising from physical, sensory, learning or cognitive disabilities and impairments or from mental health difficulties. The Departments responsibilities to provide such services are set out in the following legislation:

- Social Services Act 2011,
- Parts of the Mental Health Act 1998 that relate to Social Care

Table 1 outlines the four eligibility bands. These are implemented through the assessment process. The bands grade eligibility needs in terms of risk to an
individual's independence and wellbeing and the consequences of their needs not being met.
Table 1: FACS bandings and eligibility criteria for individuals

<table>
<thead>
<tr>
<th>Critical – when:</th>
</tr>
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<tbody>
<tr>
<td>• life is, or will be, threatened; and/or</td>
</tr>
<tr>
<td>• significant health problems have developed or will develop; and/or</td>
</tr>
<tr>
<td>• there is, or will be, little or no choice and control over vital aspects of the immediate environment; and/or</td>
</tr>
<tr>
<td>• serious abuse or neglect has occurred or will occur; and/or</td>
</tr>
<tr>
<td>• there is, or will be, an inability to carry out vital personal care or domestic routines; and/or</td>
</tr>
<tr>
<td>• vital involvement in work, education or learning cannot or will not be sustained; and/or</td>
</tr>
<tr>
<td>• vital social support systems and relationships cannot or will not be sustained; and/or</td>
</tr>
<tr>
<td>• vital family and other social roles and responsibilities cannot or will not be undertaken.</td>
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</tbody>
</table>

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<tr>
<th>Substantial – when:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• there is, or will be, only partial choice and control over the immediate environment; and/or</td>
</tr>
<tr>
<td>• abuse or neglect has occurred or will occur; and/or</td>
</tr>
<tr>
<td>• there is, or will be, an inability to carry out the majority of personal care or domestic routines; and/or</td>
</tr>
<tr>
<td>• involvement in many aspects of work, education or learning cannot or will not be sustained; and/or</td>
</tr>
<tr>
<td>• the majority of social support systems and relationships cannot or will not be sustained; and/or</td>
</tr>
<tr>
<td>• the majority of family and other social roles and responsibilities cannot or will not be undertaken.</td>
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</table>

<table>
<thead>
<tr>
<th>Moderate – when:</th>
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<tbody>
<tr>
<td>• there is, or will be, an inability to carry out several personal care or domestic routines; and/or</td>
</tr>
<tr>
<td>• involvement in several aspects of work, education or learning cannot or will not be sustained; and/or</td>
</tr>
<tr>
<td>• several social support systems and relationships cannot or will not be sustained; and/or</td>
</tr>
<tr>
<td>• several family and other social roles and responsibilities cannot or will not be undertaken.</td>
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</tbody>
</table>
Low – when:

- there is, or will be, an inability to carry out one or two personal care or domestic routines; and/or
- involvement in one or two aspects of work, education or learning cannot or will not be sustained; and/or
- one or two social support systems and relationships cannot or will not be sustained; and/or
- one or two family and other social roles and responsibilities cannot or will not be undertaken

In determining eligibility for individuals, adult services should prioritise needs that have critical consequences for independence ahead of substantial consequences. Similarly, needs that have substantial consequences should be placed before needs with moderate consequences; and so on.

In setting their eligibility the Department has taken account of the following as indicated in figure 1;

- their resources,
- anticipated demand on the adult social care sector
- the need to expand universal service to meet need
- The need to strengthen communities, assist individual choices and prioritising funding for individual complex needs

Figure 1- : Eligibility needs in the context of the Isle of Man
1.6 Setting the eligibility criteria

The eligibility framework in Part 2 includes within it ‘the line of eligibility’ or threshold for social care services. The criteria threshold is set, and can be changed, by the Department following specific recommendations. Criteria will be reviewed annually and changes made as resource allocation shifts.

The adult social care service, will provide an advice, information and sign-posting service to all individuals who make contact, however it will focus its resources (i.e. the provision of services) on those people whose assessed needs fall within the critical, substantial and moderate risk bands. Those people whose assessed needs fall within the low risk band should expect to receive good quality advice and information and a signposting service to other agencies who may be able to offer assistance.

2.0 What does the guidance mean in practice?

This section takes you through the implications of the FACS 2013 guidance for practice at the main stages of the process – initial contact, assessment, support planning and review.

2.1 Initial contact

Responding to the first contact is of critical importance to someone seeking services. The quality of the first contact with individuals can have a major impact on their willingness to engage in the future.

Staff involved in receiving referrals and making initial contact should:

- respond in appropriate ways to a wide range of adults with a diversity of presenting needs
- access relevant up-to-date information about local resources and universal services to support and signpost adults seeking and using services
- access and use information and advice on universal services, early intervention and community-based or specialist resources
- ensure that the approach is welcoming, that the individual’s or family’s presenting needs and concerns have been listened to and taken seriously and at the end, that people are clear about what will happen next
- recognise levels of risk and their implications for urgency of response
- explain the organisation’s procedures for implementing FACS to the individual or family if appropriate
- be aware of presenting needs that may indicate future or escalating difficulties, including any indication of adult protection concerns
- take into account, and make provision for, additional needs arising from restricted capacity or communication difficulties
- consider whether information, advice, advocacy and signposting to universal services, local groups and user-led organisations will enable individuals to
continue to have choice and control in their lives
• accurately record the referral and/or initial contact.

Information and advice is an appropriate response at the initial point of contact where:

• A person does not meet the legal criteria for social care assessment as defined in the Social Service Act 2011.
• The person is clear about what is required and why; their needs are clearly defined and require no further checking and the presenting situation is stable.
• Another agency is better placed to respond to the presenting needs.

2.1.1 Managing risks and safeguarding

There are an increasing number of vulnerable people seeking support from Adult Social Care. This level of vulnerability is likely to increase and practitioners need to be increasingly aware of potential safeguarding issues and the management of risk for those who’s vulnerability may result in harm to the service user.

Two key aspects of risk that need to be addressed in practice are:

1. Adult protection, where staff will need to:

• implement the organisation’s procedures for Adult protection, including joint working agreements with partner agencies
• work with other professionals and agencies to reduce risk and safeguard adults and carers
• respond using the organisation’s procedures to signs and symptoms of possible harm, abuse and neglect
• take appropriate action when there are serious safeguarding concerns, seeking advice from line managers and accessing specialist expertise
• work with children’s services when there is any indication of child protection concerns.

2. Risk assessment and management, where staff will need to:

• implement the organisation’s procedures for risk assessment and management, including joint working agreements with partner agencies
• use agreed approaches to the assessment and management of risks when working in situations of uncertainty and unpredictability
• Where someone is not obviously eligible for services but is in ‘Grave need’, use the available process to determine whether services should be provided
• seek support when risks to be managed are outside own expertise
• when necessary, work within the organisation’s procedures for managing media interest in risk and Adult protection situations.
2.2 Assessment

The purpose of an adult social care assessment is to identify and evaluate an individual's presenting needs and how these needs impose barriers to that person's independence and/or wellbeing. Information derived from an individual's assessment should be used to inform decisions on eligibility.

The common way we refer to a person’s needs are as follows;

‘**presenting needs**’-those issues and problems that are identified when people first contact Social Services. Presenting needs only become what guidance terms ‘**eligible needs**’ when the Department accepts responsibility for them because they fall within the FACS eligibility criteria.

The eligibility framework (or matrix) should be understood as a tool for ‘plotting’ presenting needs to determine which fall within the eligibility criteria. The process of banding needs depends upon professional judgement and the evaluation of assessment information to arrive at an eligibility decision.

When using the matrix professional staff should bear in mind that it is not the individual who is banded. Instead, the individual’s needs are plotted across the four levels of risk. Where a person has both eligible and ineligible needs, there will be no automatic responsibility to provide services to meet all those needs, only the eligible ones.

When completing an assessment staff should:

- work in partnership with people and their carers at all stages of the assessment process
- maximise people’s control over their lives, and prioritise the outcomes they value
- recognise individuals’ and carers’ expert contribution to assessment
- explore solutions that lie within the adult’s own network or through local community resources
- signpost or provide information and advice on support from universal services, other agencies and community resources
- ensure that the scope of the assessment process is proportionate to the need and fit for purpose
- collect sufficient evidence to make a sound judgement about eligibility within the FACS bandings and criteria, agree outcomes, identify and manage risks and address any Adult protection issues.

Eligibility criteria and assessment are closely linked. The eligibility decision is based
on an individual assessment of need and no decision should be made about whether someone is eligible or ineligible for a service without the person first having taken part in the assessment and having had their needs documented.

Decision making about eligibility for services is underpinned by the assessment and there should be an emphasis on a rounded, person-centred approach to assessment, which takes account of an individual's views and wishes and explores both health and social care problems where necessary.

As needs are fully described and explored through the assessment process, the individual and professional should consider and evaluate the risks to independence that result from the needs. This evaluation should take full account of the likely outcome if help were not to be provided. In considering how needs and risks might change over time, assessors should focus on the impact of needs on people’s independence both in the immediate and longer term and consequent risks to independence. The evaluation of risks should focus on the following aspects that are central to an individual’s independence:

1. Autonomy and freedom to make choices;

2. Health and safety including freedom from harm, abuse and neglect and taking wider issues of housing circumstances and community safety into account;

3. The ability to manage personal and other daily routines; and

4. Involvement in family and wider community life including leisure, hobbies, unpaid and paid work, learning and volunteering

Assessment should also be proportionate, which means that where one professional could meet the assessed health and social care needs of an individual, through commissioning appropriate services, they ought to do so. Under certain circumstances this may mean any suitably qualified care professional e.g. Care Manager etc., using the eligibility framework to determine whether a person's assessed social care needs make them eligible, or not, for social care services.

Table 2 – Outlines the bandings in reference to the four area of independence
Table 2 Eligibility Criteria for Social Care Services

<table>
<thead>
<tr>
<th>Risk Banding</th>
<th>Risk Factors which are considered key to the maintenance and promotion of Independence</th>
</tr>
</thead>
<tbody>
<tr>
<td>KEEPING INDEPENDENT/AUTOMONY i.e. physical health/mobility, accommodation</td>
<td>HEALTH &amp; SAFETY i.e. physical health/mobility, emotional and mental health, adult protection</td>
</tr>
<tr>
<td>MANAGING DAILY ROUTINES i.e. personal care, domestic activities, finance</td>
<td>INVOLVEMENT IN FAMILY &amp; WIDER COMMUNITY i.e. leisure/education/employment</td>
</tr>
<tr>
<td>CRITICAL</td>
<td></td>
</tr>
<tr>
<td>There is an immediate risk to the health &amp; safety or survival of the person or others</td>
<td></td>
</tr>
<tr>
<td>Adult Social care will help to arrange an intensive support system where there is an absence or breakdown of carer support</td>
<td></td>
</tr>
<tr>
<td>NOTE: This band describes the sorts of circumstances that make a person eligible for services. It is not an exhaustive list.</td>
<td></td>
</tr>
<tr>
<td>• there is, or will be, little or no choice and control over vital aspects of the immediate environment</td>
<td>• life is, or will be, threatened ELIGIBLE NEED: there is an imminent danger/risk to life through severe neglect or harm to others or to self</td>
</tr>
<tr>
<td>• significant health problems have developed or will develop</td>
<td>• there is, or will be, an inability to carry out vital personal care or domestic routines</td>
</tr>
<tr>
<td>• there is a history of repeated falls within the home</td>
<td>ELIGIBLE NEED: the person has very high levels of dependency and is unable to undertake vital personal care tasks (e.g. toileting, washing, bathing, dressing, eating and drinking) AND vital domestic routines (e.g. laundry, essential shopping, food preparation, hygiene maintenance) over a 24 hour period</td>
</tr>
<tr>
<td>• serious abuse or neglect has occurred or will occur</td>
<td>ELIGIBLE NEED: the person has no capacity, or limited capacity, to manage their financial affairs</td>
</tr>
<tr>
<td>ELIGIBLE NEED: the person lives in an extremely hazardous environment</td>
<td>ELIGIBLE NEED: the person has a severe and enduring mental health problem and a severe episode of illness has occurred or is expected to occur imminently</td>
</tr>
<tr>
<td>ELIGIBLE NEED: the person has complex and unstable health and social care needs, is socially isolated and is unable to gain access to help in an emergency</td>
<td>ELIGIBLE NEED: the person has a chronic medical condition with long term implications for the person’s health</td>
</tr>
<tr>
<td>ELIGIBLE NEED: the person is disorientated in familiar places; has severe memory loss and limited capacity, to make informed choices</td>
<td>ELIGIBLE NEED: the person is unable to self medicate</td>
</tr>
<tr>
<td>ELIGIBLE NEED: the person is unable to mobilise or transfer independently e.g. getting in and out of bed or chair</td>
<td>ELIGIBLE NEED: the person is at imminent risk of losing employment/education or learning placement due to personal care needs or caring role</td>
</tr>
<tr>
<td>ELIGIBLE NEED: serious abuse or neglect has occurred or will occur</td>
<td>• vital social support systems and relationships cannot or will not be sustained</td>
</tr>
<tr>
<td>ELIGIBLE NEED: a disabled parent experiences severe difficulties carrying out essential parent/family responsibilities</td>
<td>ELIGIBLE NEED: the person is unable to participate in most or all community activities that matter to them, placing social supports and relationships at risk of imminent breakdown</td>
</tr>
<tr>
<td>• there is, or will be, an inability to carry out vital personal care or domestic routines</td>
<td>• vital family and other social roles and responsibilities cannot or will not be undertaken</td>
</tr>
<tr>
<td>• there is, or will be, an inability to carry out vital personal care or domestic routines</td>
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<tr>
<td>Risk Banding</td>
<td>Risk Factors which are considered key to the maintenance and promotion of Independence</td>
</tr>
<tr>
<td>--------------</td>
<td>-----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>The words in blue are prescribed by the Department and constitute the eligibility framework.</strong></td>
<td></td>
</tr>
<tr>
<td><strong>KEEPING INDEPENDENT/AUTONOMY</strong> i.e. physical health/mobility, accommodation</td>
<td><strong>HEALTH &amp; SAFETY</strong> i.e. physical health/mobility, emotional and mental health, adult protection</td>
</tr>
<tr>
<td><strong>MANAGING DAILY ROUTINES</strong> i.e. personal care, domestic activities, finance</td>
<td><strong>INVOLVEMENT IN FAMILY &amp; WIDER COMMUNITY</strong> i.e. leisure/education/employment</td>
</tr>
<tr>
<td><strong>SUBSTANTIAL</strong> There is a substantial and high risk to the health and safety or survival of the person or others</td>
<td></td>
</tr>
<tr>
<td>Adult Social care will help to maintain and strengthen a support system enabling a person to keep independent i.e. a focus on rehabilitation and recovery of independent living or mobility etc.</td>
<td></td>
</tr>
<tr>
<td><strong>NOTE:</strong> This band describes the sorts of circumstances that make a person eligible for services. It is not an exhaustive list.</td>
<td></td>
</tr>
</tbody>
</table>

- **ELIGIBLE NEED:** the person's environment is severely restricting their independence or is insecure and the need for major adaptations/alterations has been identified
- **ELIGIBLE NEED:** communication difficulties, cognitive or sensory impairments present significant obstacles to maintaining independent living
- **ELIGIBLE NEED:** the person cannot access essential facilities (e.g. supermarket/shop, post office, GP surgery, hospital) or overcome significant difficulties walking or moving around indoors and outdoors without formal help
- **ELIGIBLE NEED:** the person is disorientated in unfamiliar places; has significant problems with memory and a restricted capacity to make informed choices
- **ELIGIBLE NEED:** there is a likelihood of falling within the home, where prediction of risk is difficult
- **ELIGIBLE NEED:** abuse or neglect has occurred or will occur
- **ELIGIBLE NEED:** the person's lifestyle or behaviour presents a significant risk to the health or safety of the individual or others; such concerns may relate to violence, offending, substance misuse, self-harm and/or neglect
- **ELIGIBLE NEED:** the person has an acute or chronic medical condition which is or may be responsive to medication or other therapeutic intervention
- **ELIGIBLE NEED:** episodes of severe and enduring mental illness occur which results in significant distress to the individual or others
- **ELIGIBLE NEED:** the person will depend upon help to manage some elements of their financial

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- **ELIGIBLE NEED:** the person has an acute or chronic medical condition which is or may be responsive to medication or other therapeutic intervention
- **ELIGIBLE NEED:** episodes of severe and enduring mental illness occur which results in significant distress to the individual or others
- **ELIGIBLE NEED:** the person will depend upon help to manage some elements of their financial

- **ELIGIBLE NEED:** there is, or will be, little only partial choice and control over the immediate environment
- **ELIGIBLE NEED:** the person's environment is severely restricting their independence or is insecure and the need for major adaptations/alterations has been identified
- **ELIGIBLE NEED:** communication difficulties, cognitive or sensory impairments present significant obstacles to maintaining independent living
- **ELIGIBLE NEED:** the person cannot access essential facilities (e.g. supermarket/shop, post office, GP surgery, hospital) or overcome significant difficulties walking or moving around indoors and outdoors without formal help
- **ELIGIBLE NEED:** the person is disorientated in unfamiliar places; has significant problems with memory and a restricted capacity to make informed choices
- **ELIGIBLE NEED:** there is a likelihood of falling within the home, where prediction of risk is difficult
- **ELIGIBLE NEED:** abuse or neglect has occurred or will occur
- **ELIGIBLE NEED:** the person's lifestyle or behaviour presents a significant risk to the health or safety of the individual or others; such concerns may relate to violence, offending, substance misuse, self-harm and/or neglect
- **ELIGIBLE NEED:** the person has an acute or chronic medical condition which is or may be responsive to medication or other therapeutic intervention
- **ELIGIBLE NEED:** episodes of severe and enduring mental illness occur which results in significant distress to the individual or others
- **ELIGIBLE NEED:** the person will depend upon help to manage some elements of their financial

- **ELIGIBLE NEED:** there is, or will be, an inability to carry out the majority of personal care or domestic routines
- **ELIGIBLE NEED:** the person has high levels of dependency requiring daily support and is unable to undertake vital personal care tasks (e.g. toileting, washing, bathing, dressing, eating and drinking) AND vital domestic routines (e.g. laundry, essential shopping, food preparation, hygiene maintenance)
- **ELIGIBLE NEED:** the person requires occupational therapy aids or items of community equipment in order to undertake the majority of personal care or daily living tasks such as toileting, washing, bathing, dressing, eating and drinking
- **ELIGIBLE NEED:** the person will depend upon a significant level of formal help to maintain family and community activities
- **ELIGIBLE NEED:** the person is at high risk of losing employment/education or learning placement due to personal care needs or caring role
- **ELIGIBLE NEED:** the majority of social support systems and relationships cannot or will not be sustained
- **ELIGIBLE NEED:** the person is unable to participate in many community activities that matter to them, placing social supports and relationships at risk of breakdown
- **ELIGIBLE NEED:** the majority of family and other social roles and responsibilities cannot or will not be undertaken
- **ELIGIBLE NEED:** the person will depend upon a significant level of formal help to maintain family and community activities
<table>
<thead>
<tr>
<th>Risk Banding</th>
<th>Risk Factors which are considered key to the maintenance and promotion of Independence</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MODERATE</strong></td>
<td>The words in blue are prescribed by the Department and constitute the eligibility framework.</td>
</tr>
<tr>
<td></td>
<td>Adult Social Care will enable a person to keep independent i.e. a focus on maintaining stability and/or recovery of independent living or mobility etc.</td>
</tr>
<tr>
<td></td>
<td>NOTE: This band describes the sorts of circumstances that make a person eligible for services. It is not an exhaustive list.</td>
</tr>
<tr>
<td></td>
<td>• there is, or will be, minor loss of choice and control over immediate environment</td>
</tr>
<tr>
<td></td>
<td>• health problems present or will present a moderate risk to independence and safety</td>
</tr>
<tr>
<td></td>
<td>• there is, or will be, an inability to carry out several personal care or domestic routines</td>
</tr>
<tr>
<td></td>
<td>• there is predictable risk of the</td>
</tr>
</tbody>
</table>
## Risk Banding

The words in blue are prescribed by Government and constitute the eligibility framework.

### LOW
There is no apparent risk to the health, safety or well-being of the person or others.

Adult Social care are able to offer advice and information that enables the person to help themselves.

Social Services will adopt a preventive approach where needs may significantly worsen for lack of timely help.

**NOTE:** This band describes the sorts of circumstances that make a person ineligible for services. It is not an exhaustive list.

<table>
<thead>
<tr>
<th>KEEPING INDEPENDENT/AUTOMONY i.e. physical health/mobility, accommodation</th>
<th>HEALTH &amp; SAFETY i.e. physical health/mobility, emotional and mental health, adult protection</th>
<th>MANAGING DAILY ROUTINES i.e. personal care, domestic activities, finance</th>
<th>INVOLVEMENT IN FAMILY &amp; WIDER COMMUNITY i.e. leisure/education/employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>• health problems present or will present a low risk to independence and safety INELIGIBLE NEED: the person’s lifestyle or behaviour or an episode of distress does not present a risk at present but may result in a person feeling that they manage less well than they would prefer INELIGIBLE NEED: the person’s ability to problem solve or rationalise may periodically limit independent living but does not impact on their vital needs INELIGIBLE NEED: the person may benefit from information and advice on home safety and accident prevention measures (e.g. to reduce the likelihood of falls, community alarms etc)</td>
<td></td>
<td></td>
<td>• involvement in one or two aspects of work, education or learning cannot or will not be sustained INELIGIBLE NEED: the person is motivated and capable of participating in their chosen activities but is unable to travel independently to their place of work and/or education and/or learning • one or two social support systems and responsibilities cannot or will not be sustained INELIGIBLE NEED: the person has limited information on community and leisure activities • one or two family and other</td>
</tr>
<tr>
<td>social roles and responsibilities cannot or will not be undertaken</td>
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</tr>
</tbody>
</table>
2.2.1 How is the eligibility criteria used within the assessment?

Alternatives to the need for social care assistance must always be explored during the assessment to include the contributions from family / wider community / voluntary sector / other agencies.

A person is only eligible for social care services where needs are identified above the threshold line and where there is no-one else willing / able / appropriate to assist. If needs are identified below the threshold line then information and advice about available services must be given. The emphasis should be to arrange short-term interventions to enable people to be independent where possible.

People’s needs and risks alter over time. Needs will be reviewed to check whether there are eligible needs.

The assessment / review will have identified the interaction between all a person's needs and risks, the individual's views and attitudes towards the risks and the predictability and time frames within which they are likely to occur. This information will inform decision-making about the level of seriousness of the risks in terms of harm or danger and the level of impact to an individual's independence.

2.2.2 How do I Evaluate and Analyse Needs and Risks?

Risk assessment is an integral part of the assessment and review processes and a critical part of determining an individual's eligibility for services.

Alongside identifying the individual's strengths and abilities, the individual and assessor should clarify potential difficulties and possible risks that could lead to increased dependency, harm or danger including risks to carers or other close relationships if needs are not addressed.

Using the assessment / review information practitioners will need to predict how likely the risk is to occur and how quickly it will impact on an individual's independence if it is not addressed. In exploring the interaction between a person’s needs and risks, the person and assessor should consider:

- Instability / unpredictability of needs.
- Intensity of needs and level of distress.
- Number of different needs, how they interact and how the person reacts to the difficulties facing them.
- Impact of external and environmental factors.
- Sustainability of assistance from family, wider community and other agencies.

Whilst these factors can interact in complex ways, some general characteristics are outlined in the following table; Table 3
<table>
<thead>
<tr>
<th>Critical &amp; Substantial risk</th>
<th>Moderate and Low Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Unstable</strong> – Fluctuating needs resulting in changing circumstances which therefore require frequent or regular support or intervention</td>
<td><strong>Stable</strong> – circumstances fairly unchanging and likely to remain so</td>
</tr>
<tr>
<td><strong>Unpredictable</strong> – how the person responds to their circumstances cannot generally be anticipated and therefore requires ongoing assessment and care planning</td>
<td><strong>Predictable</strong> – how the person responds to their circumstances can be anticipated with some certainly</td>
</tr>
<tr>
<td><strong>Complex</strong> – needs are many and various and are likely to interact in unstable or unpredictable ways</td>
<td><strong>Simple</strong> – needs are few, relatively straightforward and are unlikely to change significantly in the foreseeable future</td>
</tr>
</tbody>
</table>

Risk assessments should explore what is an acceptable level of risk; the person's attitude and wishes concerning risk taking and whether the risks are a normal part of independent living or one which cause serious concern. The person and practitioner's views should be recorded on the assessment form. The assessment / review will have identified the interaction between all of a person's presenting needs and risks, the person's views and attitudes towards the risks and the predictability and time frames within which they are likely to occur. This information will inform decision-making, using the matrix, about the level of seriousness of the risks in terms of harm or danger and the level of impact to an individual's independence.

For example, the impact of risks to a person's independence, harm or danger will be influenced by factors such as the individual's housing circumstances and the level of support they receive from others such as carers, family, wider community, other agencies and voluntary organisations, and so on.

A person's situation is unique and the interaction of needs and risks will vary according to each person's situation. Assessors must use their skills to interpret and analyse the assessment / review information and to inform their judgements concerning eligibility. The assessment format will indicate whether a person is unable to do vital/most/many or some of the tasks or has difficulty with one or two activities.

2.3 Support Planning

Following the assessment and evaluation stages the practitioner is required to record and share with the person the plan to meet those eligible needs

The written record of the care plan should include as a minimum:

- A note of the eligible needs and associated risks
- The preferred outcome of service provision
- Contingency plans to manage emergency changes
- Details of services to be provided and any charges the individual is assessed to pay
- Contributions which carers and others are willing to make
• A review date

2.4 Review

This section acknowledges that individual needs are likely to change over time and regular reviews of support plans are considered to be good practice. The review should cover key aspects of the person’s circumstances and the working of the support plan, including changes to outcomes, needs, risks, requirements, finances and coordination arrangements, and scope for widening the contributions the individual is making to family/community life. In some circumstances people’s needs and levels of dependency may reduce or change over time, and they may therefore need less help and support.

Services should only be withdrawn from individuals following a review, including a re-assessment of their needs, where it is safe and practicable to do so. Such withdrawal must be undertaken sensitively and methodically, recognising that some people may have been in receipt of such services for a long period of time.

Staff undertaking reviews must:

• ensure the review process is open and transparent, promotes the participation of individuals and carers, is correctly recorded and conforms to the Departments procedures and interagency agreements
• meet any additional needs for support to participate in reviews, including those arising from a person’s limited capacity or communication difficulties
• recognise signs and symptoms of deterioration because of physical, mental or emotional difficulties
• ensure the record of the review is in an accessible format and language and is compliant with council and interagency agreements
• ensure that individuals, and where appropriate their support networks, have copies of the review, know how to raise any queries or concerns and know when the next review will take place
• promote positive relationships with adults with low and moderate needs to ensure they are able to renew contact before problems reach a crisis.

2.5 Taking a Preventative Approach

The Department is clear that they should target their services on those in greatest need. At the same time we should not neglect people’s presenting needs, which although currently at a low level and so ineligible, may worsen over the short to medium-term for lack of timely help.

Any preventive approach should encourage self-determination, choice and dignity including economic participation for those with a disability of working age. The Adult Social Care Service would describe prevention as the action intended to
prevent or delay loss of independence and to improve quality of life.

Where risks to independence are low, managers and staff must make professional judgements, based on risk assessment, about the need to support people or target groups who are particularly vulnerable. Preventive services should be targeted:

- To provide people with accessible and timely information and advice so that they can find solutions to their own problems wherever possible
- To assist people to regain their independence so that they can undertake as many tasks for themselves without intervention from social services
- To prevent people deteriorating to high levels of dependency and to enable them to continue to live in their own homes
- To improve people’s quality of life by increasing their independence and reducing social isolation
- To diminish the risks of avoidable injuries

2.6 Carers Assessments

The Fair Access framework focuses on vulnerable adults, many of whom will be supported by family members or other carers. Many carers will expect to be involved in the assessment and subsequent decisions made about service provision for those whom they support. The legal entitlement of carers to be involved in the assessment process and their active involvement in the stages of decision-making is taken as read within this policy.

At the point of assessment, no assumptions should be made about the willingness or ability of carer(s) to continue to care in the way that they have in the past. In a similar way the impact which caring responsibilities have on individual carers may differ markedly given their differing circumstances and account will be taken of this.

Table 3: Levels of risk for sustainability of the caring role

<table>
<thead>
<tr>
<th>Critical – when:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• their life may be threatened</td>
</tr>
<tr>
<td>• major health problems have developed or will develop</td>
</tr>
<tr>
<td>• there is, or will be, an extensive loss of autonomy for the carer in decisions about the nature of the tasks they will perform and how much time they will give to their caring</td>
</tr>
<tr>
<td>• there is, or will be, an inability to look after their own domestic needs and other daily routines while sustaining their caring role</td>
</tr>
<tr>
<td>• involvement in employment or other responsibilities is, or will be, at risk</td>
</tr>
<tr>
<td>• many significant social support systems and relationships are, or will be, at risk</td>
</tr>
</tbody>
</table>
Substantial – when:

- significant health problems have or will develop
- there is, or will be, some significant loss of autonomy for the carer in decisions about the nature of the tasks they will perform and how much time they will give to their caring
- there is, or will be, an inability to look after some of their own domestic needs and other daily routines while sustaining their caring role
- involvement in some significant aspects of employment or other responsibilities is, or will be, at risk
- many significant social support systems and relationships are, or will be, at risk

Moderate – when:

- there is, or will be, some loss of autonomy for the carer in decisions about the nature of the tasks they will perform and how much time they will give to their caring
- there is, or will be, some inability to look after some of their own domestic needs and other daily routines while sustaining their caring role
- several social support systems and relationships are or will be at risk

Low – when:

- there is, or will be, some inability to carry out one or two personal tasks while sustaining their caring role
- one or two social support systems and relationships are, or will be, at risk

Staff working with carers will need to:

- implement the Departments commitment to carrying out, carers’ assessments
- explain the Departments bandings for assessing risks to the caring role
- work in partnership with carers during their assessment ensuring, if they wish, they contribute through self-assessment
- identify and assess the sustainability of the support the carers or others in individuals’ networks are able and willing to give in the immediate and longer term
- identify how the caring role impacts on the carer’s employment, education, training or leisure, alternative employment opportunities and wellbeing
- provide, or signpost, relevant, timely, up-to-date information and advice about universal and community resources that support:
  > the caring role
  > the carer’s own needs and wellbeing
- involve carers, when appropriate, in an individual’s FACS assessment
- provide carers with accessible information on how to give feedback, raise issues or make complaints
• work to support and strengthen community-based resources that can be provided as universal services.

When working with young people providing care, staff will need to:

• identify whether anyone under the age of 18 is providing care for the individual
• work with children’s services to:
  > protect carers under 18 from having to provide inappropriate levels of care
  > put in place support to promote young carers’ opportunities to achieve positive outcomes
• provide timely information, advice and support for young people providing care, in ways appropriate to their age and understanding
• plan support for individuals that:
  > does not rely on an inappropriate level of care from a child or young person
  > enables young people providing care to remain and thrive within their family.

2.7 Signposting, Information and advice

Information to assist individuals to make arrangements to meet their own needs can be given at any stage, regardless of whether the person has needs above or below the threshold line for services.

Wherever possible people should be empowered to make arrangements to meet their own needs through the provision of wide ranging information and advice, including that about welfare benefits.

Assessors should either give the information and advice requested or, with the person’s permission, contact another agency to ask them to provide the information and advice requested.

The provision of information, advice and signposting at any stage of the process is important regardless of whether or not people are eligible for publicly funded services. To implement this, staff will need to:

• know how to access the wide-ranging information and advice that might be required in their job role, and share this knowledge with people seeking support
• understand that what is familiar information to them is not necessarily known to people seeking support and their carers, and that information can be harder to take in when facing new or increasing levels of need, uncertainty and anxiety
• encourage and enable individuals to make the most effective use of universal services, in conjunction with their own strengths, capabilities and resources, to live as independently as possible
• avoid screening individuals out too early and ensure adequate signposting to other sources of support
• challenge inappropriate, inaccurate and discriminatory information.
Top Tips

1. An individual seeking or referred for help with a social care need, regardless of their impairment, is entitled to a FACS assessment that is fit for purpose.

2. An individual’s financial situation must not pre-empt or influence the assessment of their social care needs. Eligibility assessment always precedes financial assessment.

3. Assessments and support planning are focused on ways to achieve agreed outcomes, not just driven by needs or impairments.

4. Do not filter individuals out too quickly on too little information. Further investigation may reveal eligible needs behind lower level 'presenting' needs.

5. Think prevention, early intervention, wellbeing and safeguarding: they can prevent or delay needs escalating.

6. Think signposting, information and advice as routes to wider choice, whether or not the individual is likely to be eligible for publicly funded support.

7. Think what the personal preference for the individual would be to promote greater choice and control, and sustain options for carers.

8. Think beyond adult social care services. Suitably adapted housing, smart technology and equipment, improved healthcare, greater benefits take-up and community support can all help to delay or avoid the need for care.

9. Recognise carers and personal and community networks as valued partners in care. Providing support for them is a worthwhile investment.

FAQ’s

Within each of the eligibility bands – critical, substantial, moderate and low – there appears to be a hierarchy of needs with the first mentioned being more important than those mentioned last. Is this the case?

No. There is no hierarchy of needs and related risks within an eligibility band, with the exception of life threatening circumstances in the critical band, e.g. critical risks to independence faced by –

• an older person, who is unable to perform vital personal care tasks, including washing and bathing

• a younger disabled person, who is facing significant obstacles in taking up the education and training that is fundamental to independence and well-being
In each of the bands, there is mention of involvement in work, education or learning, social support systems and relationships and family and other social roles and responsibilities. How can these issues be as important as health and safety, abuse and an inability to carry out daily routines?

For some individuals, threats to their safety, abuse they are suffering or problems they experience with personal care, will be paramount. For others, problems in accessing work and education, difficulties in social support and relationships and difficulties in playing a full part in family and wider community life, can be just as important. All these factors, considered independently, can have profoundly negative effects on well-being and independence and should not be discounted by agencies and professionals. Consideration should also be given to how these factors, if not tackled, can also interact with the effect that their overall impact on an individual’s independence and physical and mental needs may be increased as a result.

In the critical and substantial bands of the eligibility framework there is reference to choice and control. What does it mean and why is it important?

Many service users value their autonomy and dignity and their ability to make informed and independent choices, very highly. Exercising choice and control is not simply about being able to do this or that, it’s the freedom to do things when individuals want and in a way of their choosing, e.g. a disabled mother who lives with her adult son, may be acutely embarrassed when her son helps her with personal care tasks. The son does not recognise his mother’s feelings and, at times, insists that he help her with even fairly intimate tasks. The mother accepts that the help is well-intended and involves no impropriety but, to avoid further embarrassment, the mother increasingly hides her needs from her son and suffers in silence. This could worsen her difficulties, damage her independence and strain family relationships. In this case, the adult services may agree to provide support at suitable times through a female home carer, to not only attend to the mother’s care needs, but also to restore dignity, choice and control to her.

Words such as “critical” and “vital” in the eligibility framework can be subjective. How can we apply these terms objectively and consistently?

Guidance can only go so far and professionals will need to exercise commonsense and judgement when interpreting and applying the various terms of the eligibility framework. To a large extent, the eligibility framework draws on current practice and adult services already work with a variety of terms which cause no difficulties.

Professionals will be very familiar with cases where risks are critical because life is threatened or individuals are at great risk of serious illness or harm. These are described in the “critical” band of the eligibility framework, of the Policy Guidance. When the Guidance says that “vital aspects of a person’s daily life are affected by their needs”, it means that, without help, individuals are at great risk of either losing their independence, possibly
necessitating admission to institutional care, or making very little, damaging or inappropriate contributions to family and wider community life, with serious consequences for the individual and others. Having said that, professionals should continue to recognise that, what may be “vital” to one individual, may not be “vital” to another, as people can react differently to needs and circumstances.

The eligibility framework refers to individuals’ inability to carry out personal or domestic routines. Should this be taken to mean that individuals literally cannot, for example, wash themselves or do housework?

It should not be taken literally. It includes, not only individuals who cannot carry out certain personal or domestic routines, but also individuals who have great difficulty, perhaps even with unskilled assistance, with these routines.

What counts as an eligible need? Is it the person or the need that is eligible for help?

The question and answer lie at the heart of how FACS-based eligibility criteria and related assessments and evaluations of risk, should work. Basically, presenting needs should be explored and evaluated against risks to independence. In doing so, professionals should always bear in mind that needs assessment and risk evaluation rely for their quality on person-centred conversations, with individuals seeking help by competent professionals prepared to exercise their judgement. Frameworks, case examples and the like, can only ever support the exercise of person-centred, competent judgement. Once needs and risks are identified, the risks are then banded as critical, substantial, moderate or low. For an individual, different sets of needs can pose different risks and hence be banded differently. The individual's risks and the band(s) they fall into are then compared to the eligibility criteria.

Through identifying the risks that fall within access criteria, Adult Services should identify eligible needs.

This reflects the Policy intention that Adult Services should identify the needs, which give rise to the eligible risks which, if addressed, will ameliorate, contain or reduce the risks. This identification of eligible needs will depend on competent professionals exercising their judgement. In some situations, professionals will deem it appropriate to address all, or most, needs. In other situations, professionals will consider it appropriate only to address certain needs.

The implication of this interpretation is that –

- only those needs associated with “eligible risks” to independence may be considered for social care support
- however, needs associated with “eligible risks” should only be deemed eligible if, through addressing those risks, they are ameliorated, contained or reduced. The extent to which professionals consider whether risks should be addressed, will rely on good assessments and effective dialogue with individuals and others. The practical consequences of the above interpretation may be shown by the following example:

Mrs Jones cannot perform the majority of personal care or domestic routines, although none are vital to her independence. At the same time, her involvement in one or two support systems cannot be sustained. According to the eligibility framework of the
FACS Policy Guidance, Mrs Jones’ difficulties with personal care and domestic routine fall within the substantial risk band; whilst her support system difficulties fall within the low risk band.

There is another way to think about needs, risks and eligibility. If, among an individual’s needs, there are some needs which, if presented by themselves, would lead to risks that would be placed outside our eligibility criteria, the adult services may consider it unnecessary to address those needs. The adult services would do so where it was sure that the needs in question did not exacerbate or otherwise worsen the other needs to be addressed.

If an individual has several needs, but only some of them fall within the adult services’s eligibility criteria, should we attempt to meet all the needs whether they are eligible or not?

See the answer immediately above. In addition, the FACS Policy Guidance advises that services may be provided to meet some presenting needs as a consequence of, or to facilitate, needs associated with eligible risks being met, e.g. if risks arise for an individual because they cannot wash or bathe independently, it could make sense for care workers to help them dressed after their morning wash and to help them get into their pyjamas after their evening bath. Professionals will need to use their judgement over help they give with dressing and undressing. If an individual is perfectly capable of dressing and undressing themself, or has difficulty but wants to, then it is best that they get on with it. If they have some difficulty and welcomes help, then care workers may feel it best if they assist. As said above, the help that is provided will vary according to circumstances, and common sense should prevail.

Why do the risk factors of the eligibility framework appear to lack precision and present difficulties when put into practice?

Difficulties arise if the risk factors are taken too literally and when implementation relies on prescriptive examples. The risk factors are indicators of the seriousness of problems faced by individuals. The framework places weight on the number of daily routines, aspects of work, education and learning support systems, relationships, family roles and responsibilities that are at risk because, generally speaking, the greater the number, the greater the threat to independence.

The risk factors of the eligibility framework are a sound starting point for evaluating risks. The framework offers four broad types of risk – critical, substantial, moderate and low. Critical risks arise when life is threatened, significant health problems are present or vital aspects of independence are threatened. It should not matter how many aspects of independence are threatened. It will be for professionals to determine, based on their conversations with individuals and taking account of the risks to arise from the person’s needs, whether vital aspects of independence are threatened. On some aspects of daily living there can be consensus over what is vital and what is not, e.g. on a routine basis, it is vital for individuals to get to a toilet or use some other hygienic and private means. However, with regard to other aspects of daily living and involvement in work, education and family life, adult services should bear in mind that, what may be vital for one person, may not be vital for another, e.g. despite advice to the contrary, some individuals would prefer to live in accommodation that is not so clean or eat a less than healthy diet, if this enables them to retain and exercise choice and control over their lives. So a mechanistic approach to defining “vital” and other terms in the Guidance will not always be appropriate.
The “substantial” eligibility band includes indicators of substantial risk to independence. Hence, if a person cannot perform a great many personal care and domestic routines or undertake many aspects of work, education, family life and so on, there is a very high likelihood that her/his independence will be greatly threatened. If any of these threats are to vital aspects of independence, then the individual should be placed in the “critical” band. As the risk factors are indicators, they should not be treated as the final word; for this reason, Adult Services may add to or exemplify the risk factors, but should not remove any.

**Is the Policy Guidance wholly directed at adults with care needs?**

Yes. Furthermore, FACS focuses on eligibility criteria rather than general service matters, including how we organise services for adults. In some cases, the care needs of the parents may be causing difficulties for their children whereas, in other cases, both the parents and their children may have care needs in their own right. It will be important for children and family teams to have agreed policies and protocols with adult teams in the handling of such cases. Similarly, policies and protocols should be agreed between adult services teams for handling eligibility decisions, care management and service delivery, for individuals who cross age boundaries, from youth to adulthood and from working age to old age. As the Policy Guidance says, dramatic and unplanned changes in care co-ordination and service provision can undermine individuals’ independence and confidence.

**What is fair about Fair Access to Care Services?**

The Guidance is fair, as it asks Adult Services to operate just one set of eligibility criteria for all adults who seek social services and to base their eligibility criteria on a standard framework that is built on needs and associated risks to independence.

**How can Adult Services develop preventative services if, as the Guidance says, they must prioritise people in the greatest need?**

Of course Adult Services should target their services to those in greatest need. If a person has low level needs which are predicted to remain low for the foreseeable future, it would be perverse to give this person services, at the expense of someone with greater immediate or developing needs. The FACS Guidance says that Adult Services, when setting their eligibility criteria and determining eligibility in individual cases, should prioritise, not only those in greatest need, but also those whose needs would significantly worsen for the lack of timely help. Adult services will provide advice and signposting through the Adult Services Access Team for individuals whose needs are not eligible for care services.

**Does the Policy Guidance and the particular factors listed in the eligibility framework, lead professionals to look at problems in isolation?**

Hopefully not, as this would represent poor practice. Often, needs interact and the combined impact of specific needs can threaten independence to a greater extent than if each need is operating in isolation. The Policy Guidance addresses the point, by asking professionals to take account of the intensity, instability and predictability of problems on a day-to-day and longer term-basis. It adds that professionals should consider external and environmental factors that may have caused or are exacerbating problems. It advises professionals to take account of the number of problems faced by individuals and how problems interact. In this way, professionals can, for example, explore the impact of poor accommodation, inadequate local facilities and the extent of local work, learning and leisure opportunities on individuals’ physical and mental well-being and independence.
**Should an individual, who has the means to pay for services, still be assessed by Adult Services? Should Adult Services go on to arrange services?**

The carrying out and completion of a care assessment should not be contingent on whether or not an individual can pay for care services, be they provided in a care home or the individual’s own home. With respect to individuals receiving services at home, Adult Services should arrange those services in circumstances when the service user, family or carers are unable to do so. Where an individual is to receive services, which are paid for by DSC and fulfils the eligibility criteria, then Adult Services have a duty to arrange services on his/her behalf.

**Should there be a correlation between the eligibility band of an individual and the scale and cost of services they should receive?**

In practice, there probably is some correlation between the extent of need and the scale and cost of services. However, there will be instances where needs with critical risks can be addressed through low level services or support and instances where needs, with less serious ramifications, require complex or costly services.

**If people with eligible needs have to wait a long time for services, their independence and safety can be threatened. What does the guidance say about waiting for services?**

The guidance says that Adult Services should provide services promptly, once they have agreed to do so. Where waiting is unavoidable, Adult Services should ensure alternative services are in place to maintain support in the interim.

**Is it right that reviews should include a re-assessment of individuals’ needs?**

Yes. Reviews not only comprise a check of service delivery, but also should include a re-assessment of service users’ needs. It makes sense as a review checks eligibility and ensures that services are appropriate to needs and, to do this properly, there has to be a reassessment of those needs. This reassessment will be as full as it needs to be and should be carried out according to the principles that govern first assessment.

**Should Adult Services carry out reviews if it intends to withdraw or reduce services?**

Over time, the care plans of most individuals will need to be adjusted. Where adjustment is minor, there will often be no need for a review (and reassessment of needs) as required by the FACS Policy Guidance. Where significant adjustments are to be made, including the withdrawal of all, or some, services, Adult Services should carry out reviews and satisfy themselves, and the individual concerned, that it is safe and appropriate to do so.

**Is it true that, because of FACS, Adult Services will be able to monitor unmet need without fear of adverse repercussions?**

FACS makes a distinction between “presenting needs” (the needs described by adults seeking social care support or others on their behalf) and “eligible needs” (those needs that are assessed as falling within a adult services’s eligibility criteria and which should be met).
The difference between presenting needs and eligible needs should be monitored and results used to inform service delivery, planning and commissioning.
## Appendix 1
### Matching Eligible Needs to Service - Guidance Table

**Risks to Independence Banding Note:** Each need should be placed in the appropriate risk band. Consider the impact on the person were the need to go unmet – what level of risk would it give rise to?

<table>
<thead>
<tr>
<th>CRITICAL RISKS TO INDEPENDENCE when:</th>
<th>Likely Service Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>• life is, or will be, threatened; and/or</td>
<td>One or more of the following:</td>
</tr>
<tr>
<td>• significant health problems have developed or will develop; and/or</td>
<td>• 24hr care placement</td>
</tr>
<tr>
<td>• there is, or will be, little or no choice and control over vital aspects of the immediate environment; and/or</td>
<td>• intensive domiciliary care</td>
</tr>
<tr>
<td>• serious abuse or neglect has occurred or will occur; and/or</td>
<td>• respite care</td>
</tr>
<tr>
<td>• there is, or will be, an inability to carry out vital personal care or domestic routines; and/or</td>
<td>• day care</td>
</tr>
<tr>
<td>• vital involvement in work, education or learning cannot or will not be sustained; and/or</td>
<td>• support to access work or further education/training</td>
</tr>
<tr>
<td>• vital social support systems and relationships cannot or will not be sustained; and/or</td>
<td>• social rehabilitation services</td>
</tr>
<tr>
<td>• vital family and other social roles and responsibilities cannot or will not be undertaken</td>
<td>• money management/maximising income</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SUBSTANTIAL RISKS TO INDEPENDENCE when:</th>
<th>Likely Service Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>• there is, or will be, only partial choice and control over the immediate environment; and/or</td>
<td>One or more of the following:</td>
</tr>
<tr>
<td>• abuse or neglect has occurred or will occur; and/or</td>
<td>• domiciliary care</td>
</tr>
<tr>
<td>• there is, or will be, an inability to carry out the majority of personal care or domestic routines; and/or</td>
<td>• day care</td>
</tr>
<tr>
<td>• involvement in many aspects of work, education or learning cannot or will not be sustained; and/or</td>
<td>• respite care</td>
</tr>
<tr>
<td>• the majority of social support systems and relationships cannot or will not be sustained; and/or</td>
<td>• support to access work or further education/training</td>
</tr>
<tr>
<td>• the majority of family and other social roles and responsibilities cannot or will not be undertaken.</td>
<td>• social rehabilitation services</td>
</tr>
<tr>
<td></td>
<td>• money management/maximising income</td>
</tr>
<tr>
<td></td>
<td>• adaptations and community equipment</td>
</tr>
<tr>
<td></td>
<td>• advice/signposting to other agencies</td>
</tr>
<tr>
<td></td>
<td>• support to access more suitable accommodation</td>
</tr>
<tr>
<td><strong>Risks to Independence Banding Note:</strong> Each need should be placed in the appropriate risk band. Consider the impact on the person were the need to go unmet – what level of risk would it give rise to?</td>
<td><strong>Likely Service Response</strong></td>
</tr>
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</tbody>
</table>
| **MODERATE RISKS TO INDEPENDENCE** when:  
• There is, or will be, an inability to carry out several personal care or domestic routines; and/or  
• Involvement in several aspects of work, education or learning cannot or will not be sustained; and/or  
• Several social support systems and relationships cannot or will not be sustained; and/or  
• Several family and other social roles and responsibilities cannot or will not be undertaken. | One or more of the following:  
• provision of minor adaptations and community equipment  
• domiciliary care  
• day care  
• support to access work or further education/training  
• respite care  
• social rehabilitation services  
• money management/maximising income  
• advice/signposting to other agencies |
| **LOW RISKS TO INDEPENDENCE** when:  
• There is, or will be, an inability to carry out one/two personal care or domestic routines: and/or  
• Involvement in one/two aspects of work, education or learning cannot or will not be sustained; and/or  
• One/two social support systems and relationships cannot or will not be sustained; and/or  
• One/two family and/or other social roles and responsibilities cannot or will not be undertaken. | Social Services is unlikely to directly provide or purchase care for needs which fall within this band since risks associated with them are considered low. However the person can expect to receive:  
• advice and information  
• signposting to other agencies including independent providers, voluntary or community support services Preventive Approach  
Note: Where risks appear low but in the short to medium term those risks are likely to increase for lack of assistance, leading to deterioration in the health, safety and well-being of the person, support will be made available. |
Appendix 2

FACS Flowchart

Determining Eligibility within the Assessment Process

Referral
Presenting needs/difficulties

Screening
Is person ill, disabled or a carer and appears to be in need of social care services?
Does the person meet the Social Services Act eligibility criteria?

*Evaluate Information
Focus on impact of needs on independence to decide which fall within the criteria.
Are there eligible needs?

*Care Plan
Match eligible needs to services

Complete Assessment

Provide Information & Advice
Signpost to other services/support

Support arranged by self, family, community and/or other agency.

Is the Person in Grave Need?

If service user unhappy – further discussion or formal complaint.

Yes

No

Yes

No

No

No

Monitor

*Review

Eligible needs remain stable.
Confirm care plan.

Eligible needs have significantly changed.
Re-assessment undertaken.

No eligible needs identified after re-assessment. End service.

*See Glossary
Appendix 3
Definition and Process for Grave Need

GUIDELINES ON DECIDING IF A PERSON IS IN GRAVE NEED OF SOCIAL CARE SERVICES OR CARER SUPPORT

These guidelines are for people who do not meet the eligibility criteria as stated in sub clause 6(1) of the Social Services Bill

Clause 6 - Eligibility for Social Care Services and Carer Support

6. (1) A person is eligible to receive social care services or carer support if at the date of the application for such services or support –
   (a) the person has been ordinarily resident in the Island throughout the preceding 5 years; or
   (b) the person demonstrates his or her ability to pay the Department the full cost of any charges for those services prescribed under section 16(1), and, subject to this Act, that person satisfies such further conditions as may be prescribed by regulations.

(2) However, in any case where the Department considers that a person is in grave need of social care services or carer support and has no reasonable means of obtaining them other than from the Department, the Department may treat the person as eligible for such services.

Please note that in all decisions the Department needs to ensure they meet the requirements of the Human Rights Act

The reason for sub clause 6(2) is to ensure that the Department does not breach a person’s rights under the Human Rights Act 2001. The Attorney General’s Chambers have advised that in an extreme case, leaving a needy person without social care could well amount to a breach of Article 3.

Article 3 states “No one shall be subjected to torture or to inhuman or degrading treatment or punishment.” States cannot justify a breach on the basis of availability of resources.

STEP 1:
Establish if the person meets criteria under other Social Care or Health Legislation

The functions of the Department of Social Care in relation to social care services and carer support provided for by the Social Services Act are in addition to the functions of the Department under the Mental Health Act 1998 and the Children and Young Persons Act
2001. Therefore, these Acts need to be referred to in order to establish if a person is covered by a duty or power under these Acts.

**Step 2:**
**Establish if the person meets the criteria for being in “grave need”**

For the purpose of the Social Services Act, grave need is defined as:
"The person being, or in danger of, significant physical, psychological, sexual harm or financial abuse."

**Step 3:**
**Establish if other persons are able to provide care**

Sub clause 6(2) of the Act states:
"However, in any case where the Department considers that a person is in grave need of social care services or carer support and has no reasonable means of obtaining them other than from the Department, the Department may treat the person as eligible for such services."

An in-depth assessment should not take place until it is established that there is no relevant others that can care for the person. Relevant others may mean other authorities outside the Isle of Man. E.g. the person may have residential qualifications in another country. It may, also, refer to a person e.g. a member of the family.

Where people have a link with an authority outside the Isle of Man, it would seem reasonable to provide care just until other arrangements can be made for the person to return to their home state. It would depend on the facts whether it reasonable for them to stay in the Isle of Man.

**Step 4:**
**Undertake a full assessment**

If the person meets the criteria of grave need, than all the legal requirements, policies and procedures in relation to the carrying out of the assessment and the development of a care plan will apply; in the same way as they would to anyone who automatically meet the eligibility criteria.

As with any other case, the Department may temporarily provide or secure the provision of social care services if it considers that the condition of that person is such that those services are required as a matter of urgency, in which case it shall carry out the assessment as soon as practicable.

If a person is determined to require care accommodation then Social Security will take the assessment into account when deciding if it is “exceptionally harsh and oppressive” to deny them benefit to pay for care accommodation.
Step 5:  
Gain approval for assessment and care plan from the decision maker

The final decision for the provision of social care services is the responsibility of the Chief Executive of the Department of Social Care.

The assessor must present the decision maker with the evidence that there are no relevant others who can provide the care, the full assessment, suggested care plan and financial costs.

Appendix 4

| **Adult seeking or using services** | Any individual who has approached or been referred to a social care organisation requesting services or support of any type. |
| **Carers** | Family members, friends or neighbours who support another person with social care needs. |
| **Grave Need** | The person being, or in danger of, significant physical, psychological, sexual harm or financial abuse |
| **Eligibility framework** | These are set out in the framework guidance. The aim is to ensure that there is fair access to services for those adults seeking or using services. The criteria describe in an open and transparent way the evidence of levels of social care need that should be demonstrated during an assessment. |
| **Eligible needs** | These are the social care needs of the individual that fall into the different bands of eligibility. The bandings are: critical, substantial, moderate and low. Those adult with needs that are considered to be moderate and above are eligible for services |
| **Presenting needs** | The full range of issues or problems identified when an individual first contacts, or is referred to the Adult Services Access team. Some or all of them may fall outside the definitions determining eligible needs. |
| **Initial Contact** | The Adult Service Access Team provides a single point of initial contact for the receipt of all referrals for adult social work intervention from the DSC. ASAT will take detailed referrals for the relevant service area to deal with and in so doing, undertake a brief initial assessment of situations in order to accurately identify concerns/risks and responsibilities, if any, for Social Services to respond. This will be undertaken in line with the FACS framework in order to identify the level of presenting need and establish if this meets the threshold criteria for receipt of a service from the Department. |
| **Assessment** | A process to identify and evaluate an individual’s presenting needs |
and how these needs impose barriers to that person’s independence and/or wellbeing.

<table>
<thead>
<tr>
<th><strong>Support Plan</strong></th>
<th>These are the agreed outcomes required to meet eligible needs together with a plan of how those needs are to be met</th>
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<tbody>
<tr>
<td><strong>Review</strong></td>
<td>The review should cover key aspects of the person’s circumstances and the working of the support plan, including changes to outcomes, needs, risks, requirements, finances coordination arrangements and community presence</td>
</tr>
<tr>
<td><strong>Risk</strong></td>
<td>A process to determine the likelihood, frequency and speed at which a person's difficulties could lead to increased dependency, harm or danger, if needs are not addressed.</td>
</tr>
<tr>
<td><strong>Evaluate Information</strong></td>
<td>The process in which practitioners will predict how likely risk is to occur and how quickly it will impact on an individual’s independence if it is not addressed. This will be completed in line with the eligibility framework</td>
</tr>
<tr>
<td><strong>Universal services</strong></td>
<td>These are services that can be assessed by the general population, and include health, education, housing, training, employment, recreation and leisure, transport, community support groups and services provided in the commercial and business sector. Access to these services is not dependent on having been assessed to have eligible social care needs.</td>
</tr>
<tr>
<td><strong>Safeguarding</strong></td>
<td>The process of identifying possible abuse or issues requiring support protection or intervention in line with professional practice or formal process such as the adult protection procedure</td>
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</tbody>
</table>
This document can be provided in large print on request

Adult Services – Fair Access to Care Services
Policy, Eligibility Framework and Guidance
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