



counsel + care 
for older people, their families and carers

guide

Information from Counsel and Care: 70

Assessment and services from your local council in Wales

If you are experiencing difficulties because of a disability, the local council social services department can provide the support or assistance that you need. This system of support and services is known as community care.

This guide explains the community care system in Wales and your right to an assessment and services.

Counsel and Care is the national charity working with older people, their families and carers to get the best care and support. If you have found our service helpful, please consider making a donation or leaving a legacy in your Will. You can arrange either by telephoning 020 7241 8555 or using the secure service on our website www.counselandcare.org.uk.



www.counselandcare.org.uk
ADVICE LINE: 0845 300 7585 (local call rate)

Your donations, legacies and payroll giving enable Counsel and Care to get the best care and support for older people, their families and carers

Counsel and Care is a national charity; however the creation of the Scottish Parliament, and the Welsh and Northern Ireland Assemblies means there are differences in the ways each region cares for and supports older people. The information in this guide applies essentially to Wales although there may be similarities with England, Scotland and Northern Ireland.

We produce a large range of guides which apply to all areas of the United Kingdom. They can be downloaded from www.counselandcare.org.uk/advice-and-information or posted to you by calling our guide orderline on 020 7241 8522.

This guide has the following sections:

1	Community care support services.....	4
2	Obtaining an assessment of needs.....	5
3	If you have been refused an assessment.....	7
4	Delays in assessments.....	8
5	The Unified Assessment.....	9
5.1	Domains (the different areas of your life).....	11
6	What happens at an assessment?.....	16
7	The importance of your care plan.....	18
8	'Fair Access to Care Services'.....	19
9	How to find out about services.....	21
10	Receiving services.....	22
11	Charging for services.....	23
12	The Direct Payments scheme.....	26
13	A review of your needs.....	27
14	Refusing services and other problems.....	28
15	Challenging decisions.....	30
16	Carers' needs.....	31

1 Community care support services

Many older people may need some support to remain independent at home. The local council social services department is responsible for making sure that vulnerable older people and those with disabilities have the support they need. This support might be provided by family or friends. If this is not possible, the local council social services can arrange community care services. Services may be provided directly by the council or arranged through other organisations, for example, private agencies or local voluntary groups. It is also possible to 'employ' your own care and support by using the Direct Payments scheme, where the council can provide you with money for you to spend on services that meet your care needs, rather than providing the services directly (see section 12 of this guide). Housing departments and health authorities may also provide services connected to community care. The collection of support services is sometimes referred to as a care package.

The second phase of the Welsh Assembly's 'Older People's Strategy 2008-13' will focus on continued improvement of the health and wellbeing of older people, and look at new ways of enabling them to stay independent for longer (please see their website for more information wales.gov.uk. N.B. there is no "www." at the beginning of this address).

2 Obtaining an assessment of needs

If you feel you need some assistance to manage your daily needs, you should contact your local council social services department, and ask for an individual assessment of your needs. Other involved people, for example, a relative, carer or friend, can also contact social services and ask for an assessment on your behalf. You can also ask someone else to organise an assessment for you, such as your GP, community nurse, a voluntary worker or advice worker.

Local council social services departments must assess anyone who appears to be in need of a community care service that they provide. If you have a disability, social services have a duty to assess your needs, regardless of whether they provide this service or not. Social services cannot refuse to assess you because you have too much money, as they should not ask you about your finances before they have carried out a full assessment of your needs.

When you contact the local council social services you may be asked some basic questions, such as your age, who your doctor is, your next-of-kin, the state of your health and the difficulties you are having, so it is important to have this information ready. If you are not personally experiencing difficulties, but are caring for someone who does, you are also entitled to an assessment. For more information, see our guide **Carers: what support is available** (guide number 10). Our guides are available to download free of charge from our website: www.counselandcare.org.uk or by leaving a message on our guide

orderline on 020 7241 8522.

Social services departments should, as well as publishing the criteria of the level of needs they can meet, also publish information about the type of assessment that will be carried out based on the Unified Assessment (see section 5 of this guide for further information). Their criteria should give examples of different needs and the level of assessment they may carry out.

3 If you have been refused an assessment

If you are refused an assessment of your needs, it may be because the local council social services department does not feel you are in need of any services that they provide. This may be because the person you spoke to did not ask you the right questions and was not fully aware of your needs. If this happens, it may be helpful to write a letter to social services (remembering to keep a copy) explaining your circumstances in more detail. You can ask your carer, someone who knows you or your GP to send in more information. An advice agency or independent advocate (please see our guide **Independent Advocacy** – guide number 25 - for more details) may be able to assist you to write on your behalf. It may be helpful to ask for a copy of the local council social services criteria for assessment.

If you are still not satisfied with the response from social services, you could consider making a complaint. For more information about doing this, see our guide **Complaints about community care and NHS services in Wales** (guide number 74).

4 Delays in assessments

If you develop a very serious need, or your existing care arrangements have broken down, an urgent assessment of your needs can be arranged by the local council social services. Alternatively, the local council social services can provide you with an emergency care package until they can carry out an assessment.

There is no set policy for the time limit you have to wait for your assessment of need by the local council social services to be carried out. The length of time you wait will depend on your situation. However, good practice guidance states social services departments must undertake an assessment within 'a reasonable time' and many departments will have their own targets for time limits. These should be publicised in the customer charter, or long-term care charter that is available from your local council social services department. If the council fails to meet its own targets, or to assess within a reasonable time, you can complain. (For more information on doing this, see our guide **Complaints about community care and NHS services in Wales** – guide number 74.)

5 The Unified Assessment

The 'Health and Social Care for Adults: Creating a Unified and Fair System for Assessing and Managing Care' policy guidance brought in the Unified Assessment. This means that you can expect to have only one assessment, which will cover both your health and social services needs. It means that people being assessed should not need to have more than one assessment, or repeat the same information to many different people. Some assessments may require help from a wider range of agencies such as housing departments, the Pension Service and disability benefit agencies.

Under the Unified Assessment, skilled and competent staff should carry out your assessment, and contributions from more qualified and specialist professionals should be available if a more detailed assessment is required.

During the Unified Assessment the professionals will discuss your care needs with you to decide what support services you may need to meet your individual needs. Together, you both will look at what you are able to do, your health and disabilities, and your current living and care arrangements. You should be fully involved in the assessment process and able to state your preferences and choices. Your carer, relatives and other professionals, such as a sheltered housing warden or GP may, with your agreement, also be involved. An independent advocate may be able to support you throughout the assessment process (for more information, please see our guide **Independent Advocacy** – guide number 25). The type of assessment you receive will depend on your needs. For example, if you

find it hard to prepare a hot meal, you may be assessed for this by a simple interview, and then provided with Meals on Wheels as a service. Or, if you are having falls, or need a reminder to take your medicine at the right time, you may be assessed as needing services like telecare. This service allows you to raise the alarm should you fall (by pressing a button on a special pendant, or a special wristwatch, or by wearing a fall sensor which will automatically raise the alarm should you fall), or you may receive a phone call from someone who works at a special call centre to remind you to take your medicine.

There are lots of other services that may be available to help you at home. Please see our guide **Help at Home: what may be available in your local area** (guide number 14) for more information.

Such services usually have their own individual assessment, but can form part of a more comprehensive assessment of your needs under a 'multi-disciplinary assessment' or 'comprehensive assessment'

If you have more complex difficulties, you will need a more detailed assessment, sometimes known as a 'comprehensive assessment'. A social worker or care manager should co-ordinate this. They may also contact other people involved in your care, such as a care worker, community nurse, GP or medical specialist.

Occupational therapists and physiotherapists are also often involved to ensure that you can remain as independent as possible with recommended aids, adaptations or exercises; this is called a multi-disciplinary assessment. For more information, please see our guides

Health Difficulties: how to cope with changing needs (guide number 8) and **Help at Home: what may be available in your local area** (guide number 14).

The importance of the detailed individual assessment of need is that all areas of your life (known under the Unified Assessment as 'domains') are looked at. It is important that all of your needs are considered, including any psychological and emotional needs you may have. If you do not feel that your assessment has covered everything, you can ask for a review or re-assessment. If this is refused or you are still not satisfied, you can make a complaint. For more information, see our guide **Complaints about community care and NHS services in Wales** (guide number 74).

5.1 Domains (the different areas of your life)

The different aspects of your life that should be examined during the Unified Assessment are called 'domains' in the guidance to social services and health authorities. These areas of your life are assessed and recorded by the social worker, and will form the basis for deciding what support you should be provided with. It is very important that all domains are covered during the assessment. The following should be considered:

Your perspective

- Problems and issues in your own words
- Your expectations, needs, strengths, coping mechanisms, abilities and motivation, including cultural and social expectations
- Recent life events

- Personal and spiritual fulfilment, and life-style choices
- Advocacy needs

Carer's perspective (if you have one) and need for carer's assessment

- (If you are a carer, and need more information about this part of the assessment, please see our guide **Carers: what support is available** – guide number 10.)

Clinical background

- History of medical conditions and diagnoses
- History of falls
- Medication use and ability to take your medicine properly
- Recent hospital admissions
- Breathing difficulties

Disease prevention

- History of blood pressure monitoring
- Nutrition/current diet/swallowing ability/how much fluid you drink
- Vaccination history
- Drinking and smoking history
- Exercise pattern
- History of screening (such as going to appointments for breast or prostate screenings)

Personal care and physical wellbeing

- Pain

- Oral health
- Footcare
- Skin care, including prevention of pressure areas
- Mobility in and out of the home
- Climbing stairs
- Continence
- Sleeping patterns

Activities of daily living

- Washing
- Bathing
- Grooming (e.g. haircare or shaving)
- Dressing
- Getting to and using toilet
- Transfer in/out of a chair
- Transfer in/out of bed
- Eating and drinking
- Ability to make choices and have control over environment
- Suitable equipment

Senses

- Sight
- Hearing
- Smell
- Taste
- Speech and communication, first/preferred language and understanding

Mental health

- Cognition and dementia
- Mental health, including feeling confused or paranoid, depression, reactions to loss, and other emotional difficulties
- Addictions or substance misuse (for example, tranquillisers or alcohol.)

Relationships

- Social support and network, personal relationships, and involvement in leisure, hobbies, religious groups
- Carer support and strength of caring arrangements
- Ability to care for others where necessary, i.e. partner

Safety

- Abuse and neglect (risk assessment)
- Other aspects of personal safety (risk assessment)
- Public safety/hazards (risk assessment)
- Manual handling assessment for your carer (risk assessment)

Instrumental activities of daily living

- Meal and snack preparation
- Make hot drink
- Heavy housework (cleaning)
- Keeping warm
- Shopping
- Care of the home
- Managing affairs (finances, paperwork)

Immediate environment and resources

- Accommodation (including noise), heating or physical hazards (risk assessment), location and access
- Level and management of finances and need for benefit advice (risk assessment)
- Access to local facilities and services
- Work, education, learning and participating in community activities
- Transport needs.

If you do not feel that your assessment has covered everything that is relevant to your care needs, you can ask for a re-assessment. If this is refused or you are still not satisfied, you could consider making a complaint. For more information, see our guide **Complaints about community care and NHS services in Wales** (guide number 74).

6 What happens at an assessment?

Most types of assessment will be carried out in your own home, normally by social services staff (a social worker or care manager). In some cases, your assessment may be carried out in hospital, in a GP's surgery or in the local council social services office. You can have someone with you during the assessment if you wish, such as a relative, friend or an independent advocate. This may be particularly important if you have communication difficulties. Before the assessment takes place, it may help to write down a list of things you want to talk about, or make notes about the difficulties you face.

The assessment should not cover financial matters, except to ensure you are receiving the correct benefits. You should only be asked about your income or savings if it is agreed that the local council social services are to provide you with support services. Local council social services are able to charge for the provision of services; however, this charge must be 'reasonable' (see section 11).

If your partner, a relative or a friend is caring for you, they should also be involved in the assessment of your needs, and both of you should have the opportunity to discuss any worries you may have. If you have a carer, he or she can also ask for their own assessment of needs so that they can continue caring, but still have involvement in activities outside of this role. For more information, see our guide **Carers: what support is available** (guide number 10).

Remember that your assessment of needs is a chance for you to have your say. It is important to explain how you feel so that your views are included in your care plan. For example, if you want to move into a care home or you want to live in a different part of the country, it is really important to make this clear during the assessment. Explain your reasons why this is important to you (i.e. maintaining family contact).

The person who carries out the assessment should record what you have said about your difficulties and what you are able to do. The local council social services department will use the assessment to decide what support it will offer. If the council decide that you do not meet their eligibility criteria and so they will not be providing you with a service as, you remain entitled to a written statement of these needs following the assessment. If the local council social services are not able to meet your need, they should record that this is an 'unmet need'. This is an important part of the assessment process, so that the council can develop services that do not currently exist.

7 The importance of your Care Plan

If it is decided, following your assessment, that you are either to receive support services provided by the local council social services in your own home, or you are to move into a care home funded by the council social services; you should be given a written care plan or (also known as a personal plan of care) that clearly states your individual needs (which should include your emotional, psychological, cultural, social and spiritual needs, as well as your physical care needs). The care plan should also include details of how you will receive the support you need. If you are provided with a service, the plan should include who will supply this, along with contact details of someone you can contact if you have a problem. Care plans should be agreed between you and the social worker, and should include any concerns you have. If you feel an amendment may be needed, you can discuss with your social worker. Both you and the social worker should sign and date this care plan. You have the right to receive a copy of your individual care plan. If you do not receive a copy, you should ask for one. If you feel that your care plan does not accurately reflect your care needs, you should raise this with the social worker. If issues remain unresolved, you can consider making a complaint. For more information, see our guide **Complaints about community care and NHS services in Wales** (guide number 74).

8 'Fair Access to Care Services'

Each council can set eligibility criteria for the level of services they are able to provide, related to the resources they have available. There is, therefore, variation across the country. However the 'Fair Access to Care Services' guidance, published within the 'Health and Social Care for Adults: Creating a Unified and Fair System for Assessing and Managing Care' by the Welsh Assembly, sets the framework that each council should follow when agreeing their eligibility criteria.

The 'Fair Access to Care Services' guidance suggests four levels of need:

- Critical
- Substantial
- Moderate
- Low.

Due to budgetary constraints, some councils are restricting eligibility for services to people with critical and substantial care needs only. Local councils should prioritise the needs of a person according to the immediate and longer-term risk to the person if their needs were not met. 'Fair Access to Care Services' advises that when assessing the risk, the Social Services department should focus on:

- The autonomy and freedom to make choices
- Health and safety including freedom from harm, abuse and neglect, taking in the wider issues of housing and community
- The ability to manage personal and other daily routines
- The involvement in family and wider community life.

When setting charges, councils must abide by the new Social Care Charges (Wales) Measure 2010, as well as the guidance 'Fairer Charging Policies for Home Care and Other Non-residential Social Services'. This requires councils to ensure that all charges are fair and reasonable and also restricts councils to charging no more than £50 per week for domiciliary care. However, this charge does not include services provided at a flat rate, such as 'meals on wheels'. Please see section 11 for more details.

9 How to find out about services

Under the 'Health and Social Care for Adults: Creating a Unified and Fair System for Assessing and Managing Care' guidance, local councils and health services in Wales should work together to publish coordinated information about the services that are available in your area. Your local council should also be able to give you information on the charges for services and if they are means tested how these are calculated against your own income. The information should be available in a range of languages and accessible formats.

There are a range of services that may be available to you, some will be free, and some will be charged for, depending on your income, savings and capital. These services could include: aids and adaptations; home care; day centres; meals on wheels; respite care; holidays; housing; care homes; telecare or telehealthcare, as well as services from voluntary, charitable and private organisations. For more information about these services, please see our guide **Help at Home: what may be available in your local area** (guide number 14) for more information.

10 Receiving services

Once your needs have been identified in your care plan, it will be decided if all, or some, of your needs will be met in accordance with the 'Fair Access to Care Services' guidance, as explained in section 8 of this guide. Once services have been provided, arrangements should be made to monitor both the effectiveness of the services as well as any changes in your own personal needs. Social Services cannot withdraw or reduce the services you are receiving without carrying out a re-assessment of your needs first.

The services you receive, as stated in your care plan, may be provided by a private or voluntary agency employed by the local council social services. If you are unhappy with the service that you receive, you should complain to social services. If the service is provided by a private or voluntary agency on social services' behalf, you should still direct your concerns to the local council, as they remain responsible for ensuring you receive the services agreed within your care plan.

If you are assessed as not having eligible care needs, you may want to contact Age UK Cymru (tel.: 0800 169 33 99; www.agecymru.org.uk). They can direct you to a local office that may provide voluntary home care services. Alternatively, if you can afford to purchase the care privately, you may wish to contact the UK Home Care Association (UKHCA) (tel.: 020 8288 5291; www.ukhca.co.uk), or see our guide **Home Care Agencies: what to look for** (guide number 15).

11 Charging for services

If you need health services, such as a community nurse, as part of your care plan, these will be provided free of charge. The council social services can charge you for the services they provide. They cannot charge anyone else, such as your partner or somebody that you live with, for the services that you receive.

The local council social services can set their own rules for charging for services at home. However, when setting charges, councils must abide by the new Social Care Charges (Wales) Measure 2010 as well as the guidance 'Fairer Charging Policies for Home Care and Other Non-residential Social Services'. The charges must be reasonable and should not put you in a position of financial difficulty. Further, from 11th April, councils should cap charges for domiciliary care at £50 or less per week. This cap on charges does not include services that have a flat rate charge, such as 'meals on wheels'. Any services set at a flat rate charge that you receive will be charged separately to any capped charge for domiciliary care.

When assessing your contribution, your income should not be reduced to below the appropriate level of Pension Guarantee Credit plus a 'buffer' of 35%. This means that for 2011-12, a single person's income should not be taken lower than **£185.42** a week, which is £137.35, plus an additional 35% on top. A couple should not be taken lower than **£283.09**, which is £209.70, plus an additional 35% on top. In addition to this, as noted above, any charge should not exceed £50 per week.

If savings are taken into account, only your savings and capital which amount to more than the capital limit of £22,500 can be considered. For more information contact an advice agency, such as Counsel and Care (tel.: 0845 300 7585; www.counselandcare.org.uk).

This guidance also says that social services are allowed to take your savings into account when considering what to charge for services. If you have assets of more than £22,500 you may be charged the full rate of £50 per week (or less if your local council has chosen a lesser capped charge) for the services you receive. Some social services departments are more generous and set a capital limit which is higher than £22,500, but they are not allowed to set it any lower than £22,500. Other councils set limits on the amount that they will charge for the services that they provide at less than the £50 per week set out in the Social Care Charges (Wales) Measure 2010.

If you have difficulty paying the charge for services, you can ask that the local council social services consider a reduction. The local council social services cannot withdraw services from you if you refuse to pay the charges, but they are within their right to pursue this debt, if it is established that the charges are 'reasonable'.

Social services should publicise information on their charging policy and how they calculate how much you should pay. You may be entitled to claim a disability benefit such as Disability Living Allowance or Attendance Allowance to help you pay for your support services (see our guide **Disability Benefits: Attendance Allowance and Disability Living Allowance –**

guide number 3 – for more information.).

If the local council takes any disability benefit you receive into account when assessing charges (such as Attendance Allowance), consideration should be given to any other costs which might be incurred as a result of the disability. This could be extra heating and washing costs. If you receive the higher level of Attendance Allowance, or the care element of Disability Living Allowance, but social services only provide services during the day; then only the lower level of Attendance Allowance, or middle rate of the care rate of Disability Living Allowance, should be included in your financial assessment. This is because the higher rates are given in recognition that you may need help day and night, and social services should not take into account the higher rate when they are not providing for these care needs.

If it is identified in your care plan that your needs are too high and complex to be met in your own home and they need to be met in a care home, the government has a different set of guidance to councils on how they should assess your ability to pay towards care home fees. This is known as the Charging for Residential Accommodation Guidance (CRAG). For further information about paying care home fees see our guide **Care Home Fees: paying them in Wales** (guide number 72).

12 The Direct Payments scheme

As an alternative to receiving support which is provided directly by the local council social services or an agency acting on their behalf, you should be offered access to the **Direct Payments** scheme, if you meet the council's eligibility criteria for the scheme and have capital below the upper capital limits (currently £22,500). This is an option whereby you receive payment into a nominated account, which you then use to 'employ' your own care and support that you arrange yourself. The local council social services should provide you with support to arrange these services, as well as advice about your legal responsibilities as an employer or they may be able to provide you with details of a local independent living scheme which specialises in supporting people through the process of the Direct Payments scheme. For more information about this, please see guide **23: Home Care: using Direct Payments and individual budgets**.

13 A review of your needs

If your needs change, or you do not feel that your first assessment took all of your individual needs into account, you can ask for a review or re-assessment from your local council social services. You should try to contact the person who carried out the first assessment, or you can contact the duty social work desk. If they refuse to review your assessment, you can formally request a re-assessment or make a complaint.

Even if you feel nothing has changed, the local council social services should arrange to hold regular reviews of your situation, at least once a year. They should tell you when the review is to be carried out so that you and other related professionals can be involved, as well as your carer or advocacy worker (if you have one or want one).

14 Refusing services and other problems

Government guidance advises local council social services that they must meet your assessed needs if they fall within the eligibility criteria and you have capital under the current limit (£22,500), but that they may consider their budget when deciding how to meet your needs. This means that they may offer you their 'preferred option', which may be the cheapest option. For example, if you need 24-hour care, the local council social services may decide your needs can be met most economically in a residential care home rather than by arranging for you to receive services in your own home, provided that they have taken into account all of your assessed needs and the deprivation to your home life has been balanced against your care needs

If you do not want to go into a care home, the local council social services cannot usually force you to, and you may be able to negotiate a higher level of home care package, as councils are not allowed to limit the provision of home care under a blanket policy. If you stay in your own home you may not receive the level of help from social services that you would like or that make you feel comfortable and safe. You should be able to obtain a review of the original assessment of your needs, and argue that you need to remain in your own home. If the council social services will not increase the level of your care at home, or increase it to the level that meets all of your needs, you may have to sign an agreement to acknowledge that some of your needs are not being met. The council social services should not refuse to provide you with any services at all, but you may have to negotiate with them to agree that unpaid carers will

meet some of your needs or that additional private care will be paid for by you.

If at any time you feel that you are being pressurised to move into a care home against your will, you may wish to seek further advice about your rights in relation to this matter from an advice agency, such as Counsel and Care (tel.: 0845 300 7585; www.counselandcare.org.uk). You may also wish to involve the support of an independent advocate to ensure your wishes are taken into account in any decision. (See our guide **Independent Advocacy** – guide number 25 - for more information.)

You may be offered services that you do not want, for example, you may not want to go to a day centre or have care staff visiting you at home. Discuss your concerns with your social worker or care manager and try to arrange for your needs to be re-assessed and the services changed. You have the right to refuse services, and the council social services cannot force you to receive help.

15 Challenging decisions

If you are not satisfied with your assessment of need, have been refused an assessment, have experienced delays, or are concerned about the quality of services you receive, you can complain using the local council's complaints procedure. For more information, see our guide **Complaints about community care and NHS services in Wales** – guide number 74.

If you need support with making a complaint or communicating with council staff, you may find the support of an independent advocacy service helpful. See our guide **Independent Advocacy** – guide number 25 - for more information.

16 Carers' needs

Social services are required by law to consider the needs of unpaid carers. If you have an unpaid carer (for example, a family member or friend who is supporting you), your carer may wish to request an assessment of their needs in their own right to enable them to be involved in activities outside of their caring role. This could be a 'sit-in' service or day care support for you so that your carer can go to work or attend social events.

A carer's assessment may either be carried out at the same time, or separately, from the assessment for the cared-for person. A carer's assessment may result in extra services for you, and/or additional services for your carer. If the services are for your carer, they may have to pay towards them. For more information, see our guide **Carers: what support may be available** – guide number 10.

Our advice workers can advise on a wide range of issues affecting older people, their relatives and carers. Counsel and Care produce a range of guides which can be downloaded from our website www.counselandcare.org.uk, or requested by calling our guide orderline on 020 7241 8522.

This guide is not a full explanation of the law and is aimed at people over 60.

Counsel and Care
Twyman House
16 Bonny Street
London NW1 9PG

Tel.: **0845 300 7585**

Email: advice@counselandcare.org.uk

Website: www.counselandcare.org.uk

Registered Charity No. 203429 Counsel and Care for the Elderly

We are a member of the Federation of Information and Advice Centres (FIAC)

As a charity we rely on donations

© Counsel and Care April 2011