

Community care assessment

If a person is confused or has dementia and may need support, under the NHS and Community Care Act 1990 their local authority social services department should carry out a community care assessment. This factsheet looks at why you should get a community care assessment, what it will involve, how services will be arranged and how they will be paid for. This information applies in England and Wales. Different arrangements apply in Northern Ireland.

Why request a community care assessment?

The 'community care assessment', also referred to as a 'care assessment' or a 'needs assessment', enables social services to find out what the person's care needs are, and to decide which services could help to meet those needs. This could be care in the person's own home, such as:

- equipment and adaptations
- meals on wheels
- home care
- short break services (respite)
- day care.

Alternatively, it could be that the person's needs would be best met through care in a care home.

The local authority must provide services to meet the needs of the person, if those needs are such that they fall within their eligibility criteria (locally set rules about the level of needs the local authority will meet).

It is not necessary to wait for a diagnosis of dementia before requesting a community care assessment. What matters is that the person needs care or support. The local authority cannot arrange services unless an assessment has taken place.

How is an assessment arranged?

The assessment can be arranged through:

- the person's GP, consultant or another professional making a referral to the local authority for assessment
- the person who is seeking support and care contacting the local authority for an assessment, or another person (such as a friend or relative) doing so on their behalf
- the hospital social worker if the person is in hospital.

What will the assessment involve?

The purpose of the assessment is to find out what the person's needs and circumstances are, and what support they need. It is good practice for individuals and their carers to be fully involved in their own assessments and care planning. The person seeking support should be at the centre of the decision-making process that determines what services they need from the local authority and how their needs will be met. This is referred to as 'personalisation'.

The assessment may include finding out about:

- the person's present living arrangements, and arrangements for care
- the person's health and disabilities, and what they can and cannot do

- the person's worries, and how they want to be supported; this may be giving details of the types of service sought and how they want the support to be arranged
- the concerns of any carers.

It may help to write down any important points before the assessment.

Assessments may involve a professional person who will visit the person and any carer to establish what needs the person has. The person may be asked to complete a questionnaire about their needs, which is often called a 'self-assessment' and can be part of the process of a fuller assessment. People with dementia can be given assistance when filling in self-assessment forms, to ensure that all of their needs are considered.

A single assessment procedure ensures that older people's needs for community care services, health care and any other services, such as housing, will be assessed using just one procedure, although it may be spread over several visits. This should lessen the need for repeat assessments and for the same questions to be asked by different agencies. It should also enable professionals from different backgrounds to get a fuller picture of the person, and to work together closely to ensure that the person receives the best possible care.

Where will the assessment take place?

The assessment is often carried out in the person's home, as this gives a clearer picture of how they are coping and what support they need. If the assessment is arranged elsewhere, it should be somewhere that is convenient for the person being assessed and for their carer.

If the person being assessed is in hospital, the local authority may also arrange for an assessor to visit their home, to get a better idea of their situation before they are discharged.

Who carries out the assessment?

The local authority social services department is responsible for co-ordinating the assessment, but other professionals, such as doctors, nurses or representatives from other agencies or organisations, may also provide information or take part.

The assessment may be completed in one visit or, if there are more complex needs, spread over several weeks.

Carer's assessment

It is important that the local authority considers needs that are already being met or will be met by the carer when making a community care assessment. One way to help ensure this is for the carer to ask for a carer's assessment alongside a community care assessment.

Unpaid carers over the age of 16 are entitled to an assessment of their own needs, if they are providing, or intending to provide, a substantial amount of care on a regular basis. This is based on the following acts:

- **The Carers (Recognition and Support Services) Act 1995** enables carers to request an assessment of their own needs at the same time as the person they are caring for is being assessed. Any service provided under this act is a community care service and the person for whom they care will be responsible for paying for the care, subject to their financial means.
- **The Carers and Disabled Children Act 2000** extends carers' rights so that they can request an assessment of their own needs, irrespective of whether the person they are caring for is being assessed. It also enables local authorities to provide carers with services in their own right, in addition to any services they may be providing for the person being cared for. The carer is financially responsible, subject to their financial means, for services they receive under the 2000 Act. Local authorities cannot take a carer's ability to

pay into account before deciding whether or not to provide a carers service. Carers can ask for a direct payment so that they can arrange the service for themselves (see 'Direct payments and personal budgets' below).

The assessments must consider whether the carer participates, or wishes to participate, in any work, education, training or leisure activity. This recognises that carers should be able to access the same opportunities as those without caring responsibilities.

Eligibility criteria for services

The local authority decides if a person is entitled to receive services by comparing the person's needs with the eligibility criteria that it has set. Each local authority sets its own criteria, so they vary from area to area, but they are required to follow government guidance, *Guidance on eligibility criteria for adult social care, 2010*. The local authority can adopt up to four separate bands of needs, depending on their own financial resources, that reflect the severity of risk to a person's independence if these needs are not met. These are: critical, substantial, moderate and low needs. Due to financial pressures on their resources, most local authorities will only meet critical and substantial needs.

Each local authority should publish its eligibility criteria. Once it has set its criteria, it cannot refuse services or offer less suitable services simply because it is short of resources. However, local authorities do review their criteria at least once a year, and can reduce the level of services they provide. People receiving services must be reassessed against new eligibility criteria to see if they still qualify. This may mean that some people are no longer entitled to the same services that they received before.

Potential problems with arranging an assessment

A person should not be refused an assessment for any of the following reasons:

- The local authority believes the person will not meet its criteria. Most local authorities will filter those approaching them for support, but they must not screen out people without obtaining adequate information. If it can be shown that the person may need services, then an assessment must be carried out. They may refer the person to non-local authority services where appropriate. However, screening on the telephone is not appropriate for people with dementia and it is important for them to have their needs assessed in person.
- They do not have enough staff to carry out an assessment.
- The person has enough income or savings to pay for their own care services.

If the request for an assessment is refused, the person, their carer or relative should write to explain the circumstances in more detail, or they can ask a professional or advice agency to write on their behalf. If they are still unsuccessful, they can make a complaint (see ‘Making a complaint’, below).

Even if an assessment has been agreed, there may be a wait. There are no guidelines on how long people should expect to wait for an assessment, but local authorities should publish their estimated timescales. If the wait seems to be unreasonable, complain to the local authority.

There may be situations in which two local authorities dispute which of them is responsible for a person’s care and this could delay the assessment. Government guidance states that the local authority in which the person is physically present at that time has the responsibility.

What happens next?

Producing a care plan

Once it is decided that the person has eligible needs, the local authority has a duty to provide sufficient support to ensure that these needs are met.

The person who carried out the assessment should write a 'care plan' (this is sometimes called a 'support plan'). This describes which services are to be provided. The person with dementia and their carer should be closely involved in the development of the plan.

The care plan should include:

- the needs that have been identified
- the desired outcomes and how they can be met
- a risk assessment
- a plan for dealing with emergency changes
- the result of the financial assessment
- the support that carers are willing and able to provide
- the support to be provided to meet the assessed needs
- the date that the plan will be reviewed.

The person with dementia, or their carer, should be given a copy of the care or support plan. If they are not, they should ask for one. They should also be given the name of the person responsible for ensuring that services are then provided. That person is often known as a 'care manager'. The care manager can be contacted if there are any difficulties.

People who pay for their care privately can still benefit from a care plan, to help them to make the best use of their resources.

How are services arranged?

The local authority will give the person with dementia or their carer (if they are considered to be a 'suitable person') the option to arrange their own support services (see 'Direct payments and personal budgets' below). Services may be provided directly by the local authority or arranged through other agencies, such as health or housing departments, or voluntary or private organisations.

Some services, such as community nursing, are arranged through the GP, either directly or after discussion with social services.

How long do services take to arrange?

In some cases, the local authority may provide a service straight away. Once it has been agreed that services are needed, the local authority must ensure that these are provided, although there may be a wait whilst they are organised. There should not be excessive delay and if there is likely to be a delay, the local authority may find another way to meet the assessed need until the desired service can be provided.

What are reviews?

People's circumstances change, so the services they receive should be reviewed from time to time. Local authorities do this through 'reviews' - meetings to see whether the person's needs have changed. Care plans should be reviewed within the first three months and then annually, or as needs change.

If there is a change in the situation of the person with dementia or their carer and they feel that they need more help, or different kinds of services, they should contact the local authority, whether or not a regular review is due.

Will I be charged?

Financial assessments

The local authority can charge for the services it arranges. However, only the person receiving the services will be financially assessed. The assessors will ask questions about the person's financial circumstances to see how much, if anything, they can contribute towards the cost of services.

The procedures for charging for care in the person's own home and the amounts charged vary among local authorities, but charges should always be 'reasonable'. Government guidance sets out a broad

framework for the local authority to follow, so the person can afford to receive services and is not pushed into poverty.

The local authority will calculate the cost of the services to be provided (such as home care, meals, transport etc) and then financially assess the person using their own charging policy to see how much the person can contribute to the cost of the services. The local authority must provide a breakdown of how they worked out the charge.

If the person with dementia or their carer thinks that the charge for community care services is unreasonable, or if the person with dementia is unable or unwilling to pay, they should ask the local authority whether it could reduce or waive the charge. A service cannot be discontinued simply because a person is unable to pay.

If the person with dementia needs to move into a care home, the local authority will assess the person's income and savings according to national rules. For further details, see Factsheet 468, Paying care home fees.

Direct payments and personal budgets

Rather than receive services arranged by the local authority, the person or their carer may instead choose to be given a 'direct payment' from the local authority so they can arrange the services themselves. The local authority must be satisfied that the person is willing and able to manage a direct payment, either alone or with assistance (see Factsheet 473, Direct payments).

Direct payments may offer more choice and flexibility but they can be complicated to handle and rules vary from area to area. The local authority must support that person managing a direct payment, which may be through voluntary or charitable services.

If the person lacks the mental capacity to consent to a direct payment, a 'suitable person' can act as an agent, and receive and manage the direct payment on their behalf. The suitable person may be an attorney under a registered LPA or EPA, a court-appointed

deputy, carer, relative or friend. The local authority must be satisfied that the suitable person will act in the best interests of the person with dementia.

A personal budget is an up front allocation of funding to meet the person or carer's eligible needs. The allocation may be:

- retained by the local authority and 'earmarked' for the person's needs
- managed through an individual service fund, which is paid to a third party, such as a care agency
- managed through a user controlled trust, which is run by trustees and spent on the person's behalf
- a direct payment to the person, a carer or suitable person if the person lacks mental capacity.

If the person or their carer decides that they want the local authority to retain their personal budget, they should still be involved in deciding which services should be commissioned to best meet their needs.

Making a complaint

If the person with dementia or their carer has a complaint, it is advisable to try to sort it out with the person they have contact with, such as the assessor or care manager. There may simply have been a failure in communication or a misunderstanding that can be easily rectified. However, if this is not successful, there is a local authority complaints procedure. The local authority will explain how to use this. The complaints procedure might be useful if:

- there are problems arranging an assessment
- there is an unreasonably long wait for an assessment
- the services needed are not provided, or are unsatisfactory.

If the local authority complaints procedure does not resolve the issue either, you can take your complaint to the Local Government Ombudsman (see 'Useful organisations' at the end of this factsheet).

Finding out more

Each local authority has its own assessment procedure and their social services department will publish information on:

- who is eligible for assessment and how to apply
- what kinds of services might be arranged
- how to make representations (speaking about the matter on behalf of the person) and complaints.

Write, phone or call in to your local authority social services department to ask for the appropriate leaflets. The address will be in the phone book under the name of the local authority. Leaflets should also be available at local libraries.

For information about assessments in Northern Ireland, please call the Alzheimer's Society Northern Ireland helpline on 028 9066 4100.

For details of Alzheimer's Society services in your area and information about a wide range of dementia-related topics, visit our website at alzheimers.org.uk

Useful organisations

Local Government Ombudsman

PO Box 4771

Coventry CV4 0EH

T 0300 061 0614

E advice@lgo.org.uk

W www.lgo.org.uk

Independent organisation that investigates complaints about councils and care providers and looks for a resolution.

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Reviewed by: Caroline Bielanska,
Director, Solicitors for the Elderly

Alzheimer’s Society National
Dementia Helpline

England, Wales and Northern Ireland:
0300 222 11 22

9am–5pm Monday–Friday
10am–4pm Saturday–Sunday

alzheimers.org.uk

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