

**REPORT TO:** Health Policy & Performance Board (HPPB)

**DATE:** 8 June 2010

**REPORTING OFFICER:** Strategic Director – Adults & Community

**SUBJECT:** Fair Access To Care Services (FACS) Policy

**WARD(S)** Borough-wide

## **1.0 PURPOSE OF THE REPORT**

To present HPPB with the updated FACS policy (copy attached) in the light of DoH guidance on eligibility entitled “Prioritising need in the context of ‘Putting People First – a whole system approach to eligibility for social care,” published in March 2010.

## **2.0 RECOMMENDATION: That the Board note the contents of the report and associated policy.**

## **3.0 SUPPORTING INFORMATION**

- 3.1 In 2001 the Department of Health published national guidance on FACS. FACS is a framework for determining eligibility for all adult social care services. The framework is based upon the consequences to independence and quality of life of individuals if problems are not addressed and services not provided.
- 3.2 In 2003, the Council’s Executive Board agreed a framework and criteria and indicated that in the context of current resources the eligibility threshold should be set between substantial and moderate in the first instance. This meant that the Council would meet all needs falling within the critical and substantial categories and the needs falling within moderate would be met by appropriate community/preventative services or by the provision of information and advice.
- 3.3 Main Points of The New Guidance: The revised guidance reflects the current responsibility held by local authorities for identifying local priorities and allocating their own resources accordingly. In doing so, it ensures that those individuals who do not meet the eligibility threshold are adequately signposted to alternative sources of support such as: luncheon clubs, befriending, volunteering...etc. Such universal services improve outcomes for the wider population and could help some individuals avoid or delay having to rely on health or social care services for support. If councils base their approach to needs on achieving outcomes rather than providing specific services, then people with similar needs within the same local authority area should expect to receive a similar quality of

outcome.

3.4 This approach requires councils to prioritise their support to individuals in a hierarchical way. Those whose needs have immediate and longer term critical consequences for their independence and safety should be supported ahead of those with needs that have substantial consequences and so on.

3.5 This policy sets out how decisions will be made in Halton about 'what sorts of people with what kinds of needs qualify for what types of services.' Since the publication of the new national guidance, paragraphs 3.4 –3.5 summarise the main aspects of FACS that are the same, those that have changed and those that are either new or enhanced as a result of policy wider developments.

3.7 **What has changed?**

<b>Main Features of FACS 2003 that are changed in FACS 2010</b>	
<u>FACS 2003</u>	<u>FACS 2010</u>
Needs-based assessments and reviews	Outcomes-based assessments and reviews
Preventative approaches	Preventative strategies
Care planning	Personalisation and support planning

3.7 **What's new or enhanced?**

The following changes are in the context of the wider policy stem from recent legislation such as 'Putting People First,' personalisation, service transformation, and public service reform:

- Prevention, early intervention and enablement are to become the norm and are seen as an investment in wellbeing and delaying or preventing needs escalating.
- There is an enhanced focus on:
  - Rights, discrimination and equality as well as social Inclusion.
  - Self-assessment with support if necessary prior to any formal assessment as a way of putting the person seeking support at the heart of the process.
  - Early information on resource, to assist self-directed support, personal budgets and the right to take managed risks.
  - First contact as a critical aspect of assessment and referral

recognising that the first response can determine the quality of future contact saving time and costs on assessment later.

- Promoting community wellbeing and preventive Approaches.
- Transitions to ensure that young people with social care Needs have every opportunity to lead as independent a life as possible and are disadvantaged by the move from children's to adult services.
- Improving information sharing between organisations.
- The five statutory principles of the Mental Capacity Act (MCA Code of Practice (DH, 2007))
- The development and evaluation of the Common Assessment Framework for adults through local authority-led demonstrator sites that run to 2012 and are working to inform improved information sharing between IT systems and across organisational boundaries
- The rights and needs of young carers as children and young people (Carers Act 1995 [Recognition and Services], Carers and Disabled Children Act 2000).
- Reforms introduced in April 2009 to establish a common approach to handling complaints in the NHS and adult social care (DH 2008c).

#### **4.0 POLICY IMPLICATIONS**

- 4.1 In reviewing the Policy we have considered the current practice and service provision and believe that since the framework was introduced in 2003 the Council has invested more funding in Adult Social Care and the Council is still able to provide a range of services within the moderate criteria. However, the Council will always provide critical and substantial services.
- 4.2 Tightening the rules of eligibility to save money runs the risk of ruling ineligible, some who ought to be receiving support. Also, limiting access in this way tends to have only a modest and short-term effect on expenditure.
- 4.3 Clearly, a programme for transforming social care services was required. 'Putting People First' (2007) promoted personalised care coupled with exercising choice, against a background of supportive local communities.
- 4.4 Personalisation beyond those with highest need, places a strong emphasis on prevention, early intervention and support for carers.

- 4.5 The aim of support is two-fold: enabling carers to balance their caring responsibilities with their life outside caring while at the same time enabling the person they are supporting to have full and equal citizenship. Also, children and young people should be protected from inappropriate caring and have the support they require to learn, develop, and thrive, while achieving all 5 outcomes of the 'Every Child Matters' (2003). This requires the support of adult and children's services.

## **5.0 OTHER IMPLICATIONS**

- 5.1 This policy supports the development of innovative services tailored to individual needs and aspirations and focused on outcomes. This will enable people to exercise choice and control over the types of services they want and directly shape the services that are commissioned on their behalf.
- 5.2 A greater focus on prevention, early intervention and support for self-care in line with Halton's policies in these areas.
- 5.3 Shared strategic needs assessment co-produced with local citizens and communities, informing decisions across health, social care and local government. This allows resources to be moved to where investment can have greatest impact on current and future health and well-being needs.

## **6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

### **6.1 *Children & Young People in Halton***

Young people who are moving from Children's to Adults services must have an assessment in accordance with the FACS framework. They and their carers must be advised regarding their eligibility for services when they are in Year 12 at school. A review will take place in Year 13. This is prior to the transfer of care management responsibilities to Adult Services on the young person's 18<sup>th</sup> birthday. This is to ensure continuity and consistency of services.

### **6.2 *Employment, Learning & Skills in Halton***

**Practitioners**: are accountable for highlighting individual learning needs and participating in and contributing to identified learning opportunities.

**Principal & Practice Managers**: are accountable for developing a culture of learning on the job through coaching, team learning opportunities and individual supervision.

**Service Users**: Risks to independence and wellbeing relate to all areas of life and excluding life-threatening circumstances and

safeguarding concerns, there is no hierarchy of needs. Hence, needs relating to social inclusion and participation (education and employment for example) are just as important as those relating to personal care issues.

### 6.3 ***A Healthy Halton***

The concepts of prevention and early intervention can be extended beyond adult social services to include: adapted housing smart technology and equipment, improved health care and joint working, greater benefits take-up and community support that can help delay or avoid the need for care completely.

The overall aim is high quality, cost effective care that offers people choice and control over the care and support they receive. Funding must be sustainable and affordable for individuals and Halton needs to focus beyond the individual to the overall wellbeing of that person's community. This approach recognises that people can be helped in a way that prevents, reduces or delays their need for social care support. There is evidence that interventions can prevent or delay people entering the social care system and therefore produce better outcomes for individuals at a lower overall cost.

### 6.4 ***A Safer Halton***

None identified.

### 6.5 ***Halton's Urban Renewal***

None identified.

## 7.0 **RISK ANALYSIS**

7.1 Halton Borough Council has set its threshold at critical and substantial. However, there may be occasions where a wider view, incorporating low and moderate level services, may be agreed as a preventative approach to reduce the risk of loss of independence. The assessment will have identified the interaction between all of a person's assessed needs and risks, their views and attitudes towards the risks, how likely they are to occur and when. This will inform decision-making around risks in terms of harm or danger and any impact on independence. In this way, an assessment of needs that initially appears to be below the threshold could result in a critical or substantial need being identified.

## 8.0 **EQUALITY AND DIVERSITY ISSUES**

Equality should be integral to the way in which social care is prioritised and delivered, allowing people to enjoy quality of life and to be treated with dignity and respect. This policy supports such

objectives through:

- **Equality of access** to care and support
- **Equality of outcomes** such that people with the same levels of needs within the same council area should expect to achieve similar quality of outcomes
- **Equality of opportunity** such that economic and social barriers have limited or no effect on the application of eligibility criteria, needs analysis or the quality of outcomes.