

Nottingham City Council

Care and Support Policy

(Adults)



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Nottingham
City Council

Care and Support Policy – Adults

Contents

CARE AND SUPPORT POLICY – ADULTS.....	2
Contents	2
1. Introduction	4
1.1. The Care Act 2014	4
1.2. Principles	5
2. Definitions and Abbreviations	6
3. Key Concepts in Decision Making	9
3.1. Substantial Difficulty	9
3.2. Appropriate Individuals who can support citizens and carers	10
3.3. Advocacy	10
3.4. Mental Capacity	10
4. Care and Support Process.....	11
4.1. Contact	11
4.2. Existing Citizens.....	12
4.3. Needs Assessment	12
4.4. Risk	14
5. Eligibility.....	15
6. Care and Support Planning	16
6.1. Duty to Meet Need	16
6.2. The Care and Support Plan.....	16
6.3. Care and Support Plan Content.....	17
6.4. Approval via the Adult Panel Process.....	18
6.5. Reviewing Care and Support Plans.....	19
6.6. Planned Reviews	19
6.7. Unplanned Reviews.....	19
6.8. Community and Placement Reviews.....	20
6.9. Citizens in a custodial setting	20
7. Protection of Property.....	21
8. Brokerage.....	21
9. Carers.....	21
9.1. Support provided by carers.....	21
9.2. Support for carers	22
9.3. Information and Advice.....	22
9.4. Involvement of carers	22

9.5.	Carer’s Assessment	22
9.6.	Carers Eligibility	23
9.7.	Care and Support Plan.....	24
9.8.	Personal Budgets.....	24
9.9.	Personal Budgets for the Carer	25
10.	Appeals	25
10.1.	Right to Appeal.....	25
10.2.	What can be challenged?	25
10.3.	The social care complaints process	25
10.4.	Contacting the Social Care Complaints Service	25

1. Introduction

The purpose of this document is to set out Nottingham City Council's (NCC) approach to implementing care and support for adults with eligible social care needs. The policy has a legal basis in the Care Act 2014¹ and associated guidance. The policy applies to all citizens who come into contact with adult social care services from April 2015, and citizens who have had contact with the Council, but whose needs change.

1.1. The Care Act 2014

The Care Act 2014 is described by Norman Lamb, the Minister for Care and Support,² as 'the most significant reform of care and support in more than 60 years'. The Act reforms the law relating to care and support for adults, introduces new eligibility criteria for social care and gives new duties to local authorities. The key changes made by the Act are:

- A duty to prevent, delay or reduce social care needs
- Extending the right to an assessment to carers
- Extending personal budgets to carers and, from 2016, citizens living in residential care.
- A duty to provide continuity of care between different local authority areas and during the transition to adulthood.
- Reforms to the funding of social care from 2016, including a 'cap' on the amount citizens will be expected to pay for care during their lifetime.
- The option to delegate many functions that previously only the local authority could provide.
- Scope to charge for the cost of providing social care support services.

The guidance accompanying the Act, which was published in October 2014, has legal backing, and local authorities 'must follow it, unless they can demonstrate legally sound reasons for not doing so'.³

¹*The Care Act 2014*, Department of Health, May 2014

² Norman Lamb 15 May 2014 www.gov.uk/government/speeches/care-bill-becomes-care-act-2014

³ Response to the consultation on draft regulations and guidance for implementation of Part 1 of the Care Act 2014 p9

www.gov.uk/government/uploads/system/uploads/attachment_data/file/366047/43374_2902887_Cm_8955_Web_Accessible.pdf

1.2. Principles

The principles behind the Act are:

- Enshrining individual wellbeing as a driving principle.
- Preventing and reducing the needs for care and support.
- Promotion of integration with health provision
- Enhancing and shaping the local market of care providers.
- Putting carers on the same legal footing as the people they care for.

1.2.1. Citizens should be able to participate in their assessment and preparation of their care and support plan, with the support of an independent advocate where necessary.

1.2.2. The definition of wellbeing used in the Care Act is the common use of the word, encompassing many different types of needs of importance to the citizen. The cumulative effect of each outcome that is important to the citizen should be taken into account in determining the overall wellbeing of the citizen.

1.2.3. The principles underlying the development of a care and support plan apply to both carers and citizens. Therefore throughout this policy the expression 'citizen and/or carer' is used to make it clear that the same point applies to both. Where there is a difference in the way in which a point applies to one but not the other, this is made clear in the policy by only referring to the one that it applies to.

2. Definitions and Abbreviations

Advocate: Someone who is independent of the Council who can support a citizen or carer through the care and support or safeguarding process, and who can facilitate communication, explain process and engage in the care and support process on behalf of the citizen to ensure their wishes and needs are represented.

Assessment: The process of finding out if a citizen requires care and support to help them live their day-to-day lives. It applies to both citizens and their carers.

Best Interest Decision: A decision made on behalf of a citizen who lacks mental capacity by a social care practitioner. This is made under the Mental Capacity Act, after an assessment of a citizen's capacity to make a decision under that act.

Brokerage: A system whereby an independent person provides support to the citizen to identify their needs, what resources are available to meet these needs, and provide options to the citizen to meet their needs. This includes options for the management of this support.

Care and Support: The term used in the Care Act to describe the practical, financial and emotional support required to enable citizens to lead their day-to-day lives. It includes assessment, provision of services and allocation of funds to enable citizens to purchase their own care.

Carer: A citizen aged over 18 who provides care for another outside of a contractual or voluntary arrangement. If the citizen is under 18 the term young carer is used instead.

Citizen: A person whose normal residence is within the Nottingham City Council boundary area. . This term is used to refer to an adult who is vulnerable. The vulnerability may be as a result of physical or mental health problems, learning disability, sensory impairment or frailty.

Care Cap: The limit that a citizen will be expected to pay towards their care and support costs over their lifetime. This is set at £72,000 from 2016. Once a citizen has reached this cap, the cost of their care and support will be met by the local authority. This amount excludes accommodation and board costs within residential care. The cap only applies to citizens over retirement age.

Commissioned Service: A service that is not directly delivered by Nottingham City Council, but by an organisation or individual under contract to the City Council for the provision of that service.

Custodial Setting: These are defined in the Care Act as prisons, approved premises, young offender institutions, secure training centres or secure children's homes.

Direct Payment(DP):A sum of money paid direct to a citizen which must be used to pay for their social care support.

Duty: A legal requirement that Nottingham City Council must comply with.

Indicative Personal Budget (IPB):An initial estimate of the cost of providing care and support to a citizen.

Independent Personal Budget: The amount paid by a citizen towards their care and support costs where the care is arranged independently of the local authority but the cost of that care and support is counted by the local authority as contributing towards the 'cap on care'.

Independent Advocate: An individual who is not paid to provide care and support to a citizen but who can represent and support them in the assessment and care planning process.

Indirect Payment(IP): Council provided or commissioned services to the value of all or part of the Personal Budget.

Managed Account: An arrangement whereby a third party manages a Direct Payment on a citizen's behalf.

Nottingham Health and Care Point (NHCP): A joint service between Nottingham City Care Partnership and Nottingham City Council that offers a single point of access to community health and adult social care services.

Personal Assistant (PA):A support worker employed to provide assistance with daily tasks to someone who is unable to carry out these tasks for themselves. PAs are often directly employed by the citizen using a Direct Payment.

Personal Budget (PB): The final amount made available to a citizen to spend on their social care once their support plan has been agreed (whether as a cash sum, or as a virtual budget in terms of services provided)

Personal Health Budget(PHB): A version of Personal Budgets used in the NHS. The aim is to offer choice and control to people (generally those with a long term illness or disability) about how they meet their health care and wellbeing needs.

Social Care Practitioner:An employee within the Adult Social Care directorate of Nottingham City Council who is responsible for the assessment of citizens for social care needs.

Universal Service:A service that is available to all citizens within the Nottingham City Council area, irrespective of their need or eligibility for social care services. They can include clubs, community facilities and advice and information provided by voluntary or statutory organisations.

User Led Organisation (ULO):An organisation run and controlled by people who use support services including disabled people, people who use mental health services, people with learning difficulties and older people, as well as the families and carers of the above.

Well-being Principle:The underlying principle of the Care Act 2014 that care and support services should promote the personal dignity, physical and mental health of citizens and their carers, protect them from abuse and neglect and give them control over day to day life, including participation in work, education or training.

3. Key Concepts in Decision Making

Nottingham City Council (NCC) is committed to ensuring that citizens and carers are placed at the heart of the care and support process, or where there is a safeguarding concern. This is so the Council understands a citizen's needs, outcomes and wellbeing and is therefore able to deliver effective care and support.

3.1. Substantial Difficulty

3.1.1. NCC must form a judgement about whether a citizen or carer has substantial difficulty in being involved of the care and support and safeguarding process. These processes include:

- a needs assessment;
- a carer's assessment;
- the preparation of a care and support plan or support plan;
- a child's needs assessment;
- a child carer's needs assessment;
- the safeguarding process.

3.1.2. Substantial difficulty relates to:

- Understanding the information provided;
- Retaining the information;
- Using or weighing information;
- Communicating views, wishes or feelings;
- the safeguarding process.

3.1.3. In some cases information and advice provided by the social care practitioner or by another service can be sufficient to help a citizen or carer engage in social care processes in which case they will not be identified as having a substantial difficulty. Many people can be supported to understand relevant information, if it is presented appropriately and if time is taken to explain it.

3.2. Appropriate Individuals who can support citizens and carers

3.2.1. Nottingham City Council will consider whether there is an appropriate individual who can facilitate a citizen's involvement in the assessment, care planning or review processes where this is necessary. There are three factors NCC will take into consideration:

- They cannot be someone who is already providing the citizen with care or treatment in a professional capacity or paid basis.
- The citizen's wish not to be supported by that individual should be respected.
- The appropriate individual is expected to support and represent the person and to facilitate their involvement in the process.

3.2.2. It is NCC's decision as to whether a family member or friend can act as an appropriate person to facilitate a citizen's involvement in the assessment, care and support or review process.

3.2.3. Where there is no-one who is able to fill the role of appropriate individual than an independent advocate must be used to support the citizen or carer. The role of the advocate is outlined in the definitions section.

3.3. Advocacy

3.3.1. Some citizens and carers may have difficulties in understanding social care processes and will need support in understanding them or need someone to make decisions on their behalf. Often this role can be undertaken by a friend or relative, but where there is nobody suitable the role can be provided by an independent advocate who does not work for NCC.

3.3.2. Advocacy can be provided if the citizen **lacks mental capacity** or has **substantial difficulty** in being involved or understanding the care and support process.

3.4. Mental Capacity

3.4.1. The Mental Capacity Act 2005 (MCA) is the legal basis of NCC's approach to deciding whether a citizen has the capacity to make a decision for themselves. As the mental capacity of a citizen may fluctuate, each decision is made on a decision-by-decision basis. Where a citizen may have difficulty making a decision, this is not the same as lacking capacity, and therefore supported decision making is different from decisions made on the 'best interests' principle under the act.

- 3.4.2. Where a social care practitioner has concerns about a citizen or carer's capacity as a result of a mental impairment then a formal assessment of capacity under the Mental Capacity Act (MCA) should be carried out.
- 3.4.3. Citizens should not be considered to lack capacity just because they make poor or 'unwise' decisions. Citizens found to be lacking in capacity must be given the same support to engage as those who experience substantial difficulty and any decisions taken on their behalf must be shown to be in their best interests.
- 3.4.4. Where decisions are taken on behalf of someone who lacks capacity, limits to their liberty must be minimised.

4. Care and Support Process

4.1. Contact

- 4.1.1. New Citizens - Access to social care support is usually via the Nottingham Health and Care Point (NHCP). Contact is made via the following routes:
- The 0300 300 3333 telephone number
 - By email at adult.contactteam@nottinghamcity.gov.uk
 - In person through the Adult Contact Team at the Mary Potter Centre.
 - In writing to Adult Social Care, Nottingham Health and Care Point, 2nd Floor Aspect House, Aspect Business Park, Bennerley Road, Bulwell, Nottingham, NG6 8WR.
 - Via the Nottingham City Council website www.nottinghamcity.gov.uk
- 4.1.2. For citizens within a hospital setting, social care practitioners based within the hospital team can make direct referrals on their behalf for social care support. This may involve a joint assessment of need with health colleagues.
- 4.1.3. For citizens who require specialist services, such as mental health, learning disability or sensory services, referrals can be made directly to the relevant team by GP, City Care and Healthcare Trust colleagues for social care support.
- 4.1.4. The NHCP will ask a number of questions to establish whether there is a need for social care, and where this does not appear to be the case, they will signpost the citizen to other services as appropriate. The alternative services recommended may be in-house or provided by external organisations e.g. voluntary sector.
- 4.1.5. If initial screening indicates some level of need for social care, an Initial Contact Record is completed. This records demographic details about the

person being referred; gathers information about any carers or other agencies involved (e.g. health or housing) and describes the reasons for contact. As part of this process, a social care practitioner screens the referral in order to establish risk and urgency.

4.2. Existing Citizens

4.2.1. Citizens who are already receiving social care from NCC will transfer to any new processes introduced under the Care Act when their existing care package is reviewed or if an unscheduled review is required due to an emergency or other change to circumstance. In the case of young people with disabilities who are known to Children's Services, responsibility for their care and support will transfer to Adult Services as part of their transition plan. In all cases, the contact stage can have three outcomes:

1. No further action (social care support not needed).
2. Signposting to universal services within the community
3. Assessment for care and support services
4. Review of existing care and support services.

4.2.2. It should be noted that, beyond establishing some requirement for social care, no decisions are made about eligibility at the contact stage.

4.3. Needs Assessment

4.3.1. Assessment of citizen needs should focus on outcomes and needs identified by the citizen. NCC will carry out an assessment on any citizen who appears to have a need for care and support, regardless of their financial situation or if they are eligible for a service. This assessment will be carried out by an appropriately trained social care practitioner, including specialists where appropriate, who would involve the citizen and anyone else they ask to be involved in the assessment process. This will include any carers who are involved in supporting the citizen. The assessment would be proportionate to the presenting need for social care, and therefore in some cases it may be carried out by telephone or on-line.

4.3.2. Where there are children in the household an assessment should take into account the parenting responsibilities of the citizen as well as the impact on the citizen's needs for care and support on the young carer.

- 4.3.3. The assessor carrying out an assessment on behalf of NCC will provide the citizen with advice and information about what support is available within the community, including preventative services, irrespective of whether they have eligible needs for social care services or not.
- 4.3.4. Where a citizen may lack mental capacity supported decision making will be used to ensure that they are involved in the assessment process. This may involve using an independent advocate. If a citizen refuses an assessment, a social care practitioner may still carry out an assessment using the 'best interests' principles. Where a citizen or carer has substantial difficulty, support will be provided as outlined in section 3.1.
- 4.3.5. Any financial assessment required by NCC may be carried out at the same time as the assessment for care and support, but would not influence the outcome of this assessment.
- 4.3.6. Carers may also be assessed at the same time as the citizen. This can be part of a joint assessment or as a separate carer assessment. The assessment will establish the impact that caring has and the outcomes that a carer wants to achieve. The citizen would only be consulted with the permission of the carer.
- 4.3.7. Where a young carer is identified, NCC will decide whether a young carer should be referred for a young carer's assessment or for a needs assessment. NCC will also consider if any of the caring tasks the young person is undertaking are appropriate, and if the provision of care and support can prevent the young carer from undertaking excessive or inappropriate care and support responsibilities.
- 4.3.8. Both citizens and carers can choose to undertake a self-assessment or supported self-assessment. Where a citizen chose to do this, the assessment would need to be checked by NCC to ensure that the assessment is accurate and complete.
- 4.3.9. Upon completion of an assessment, NCC will provide the citizen, and anyone else they nominate, with a copy of their assessment. This also applies to carers' assessments.
- 4.3.10. At the end of the assessment process, the citizen and their carer's eligibility for social care services will be determined in line with the national eligibility criteria.

4.4. Risk

4.4.1. Nottingham City Council takes a positive approach to risk, in line with the Department of Health's national guidance . The key points of this approach are:

- Balancing the wishes of citizens who use services and NCC's duty of care.
- Empowering citizens and their carers by recognising them as 'experts in their own lives'.
- Managing risks in a way that improves the citizen's quality of life and promotes their independence.
- Making decisions about risk for citizens who lack capacity using the 'best interests' principle.

4.4.2. Social care practitioners use a structured approach to assessing risk through the use of the 'Assessment of Risk' tool. This allows social care practitioners to outline the risk being taken and the rationale for the decisions they have taken. It also helps decisions to be made about managing risks where the citizen's actions put themselves or others at risk. The risk assessment is signed off by a senior practitioner, shared with the citizen and the outcome of it forms part of the citizen's care and support plan.

5. Eligibility

5.1. The national eligibility criteria set a minimum threshold for the provision of services. NCC will use the criteria below when making a judgement about whether a citizen has eligible needs for social care support::

Needs	Outcomes	Wellbeing
<p>The citizen's needs arise from or are related to a physical or mental impairment or illness.</p>	<p>As a result of the needs, the citizen is unable to achieve two or more of the following:</p> <ul style="list-style-type: none"> a) managing and maintaining nutrition; b) maintaining personal hygiene; c) managing toilet needs. d) being appropriately clothed; e) being able to make use of the home safely; f) maintaining a habitable home environment; g) developing and maintaining family and other personal relationships; h) accessing and engaging in work, training, education or volunteering; i) making use of necessary facilities or services in the local community, including public transport and recreational facilities or services; j) Carrying out any caring responsibilities the citizen has for a child, including step-children and grandchildren. 	<p>As a consequence of not being able to achieve these outcomes there is, or likely to be, a significant impact on the citizen's wellbeing, including the following:</p> <ul style="list-style-type: none"> a) personal dignity (including treating the citizen with respect); b) physical and mental health and emotional wellbeing; c) protection from abuse and neglect; d) control by the citizen over day-to-day life (including over care and support provided and the way it is provided); e) participation in work, education, training or recreation; f) social and economic wellbeing; g) domestic, family and personal relationships; h) suitability of living accommodation; i) the citizen's contribution to society.

In this context being unable to achieve these outcomes includes:

- being unable to achieve it without assistance;
- achieving it without assistance would cause pain, distress or anxiety;
- where to achieve it would endanger the citizen or others;
- where the outcome would take significantly longer to achieve than would normally be expected.

5.2. The term 'Significant impact' is used in this policy as it is in the guidance to mean the everyday use of the word, and therefore is subject to professional judgement and interpretation, taking into account what is important to the citizen.

6. Care and Support Planning

6.1. Duty to Meet Need

6.1.1. Nottingham City Council has a duty to meet a citizen or carer's need/s for care and support once it has been determined that a citizen is:

- Ordinarily resident within the Nottingham City area or
- Is of no fixed abode and
- Is eligible for social care support

6.1.2. If following assessment it is decided that the citizen's needs are not eligible for social care services then NCC will write to the citizen and/or carer explaining why. Advice will be provided to the citizen on how they themselves can meet or reduce any needs present and how to prevent any further needs arising. In the case of carers, NCC can deliver a service to reduce a carer's needs even if the citizen is not eligible for care and support to be provided direct to them

6.2. The Care and Support Plan

6.2.1. If following assessment a decision is taken to meet a citizen and/or carer's eligible needs a care and support plan must be prepared. The care and support plan is an agreement between Nottingham City Council and the citizen and/or carer which outlines how need will be met. Plans can relate to either a citizen or a carer or can be completed jointly. They can also be completed collaboratively with third parties (for example with NHS Secondary services).

6.2.2. Whether individual, joint or collaborative, care and support plans must be person centred and person led; the citizen must be encouraged to take an active role in the development of a plan which belongs to them. The social

care practitioner's role is to guide and oversee the plan. The plan must ensure that the needs are met and it achieves outcomes in a way that represents value for money.

6.2.3. If it is identified that a citizen has or will have substantial difficulty in engaging with the care and support planning process then assistance to enable them to do so must be sought (see "Advocacy" section 3.4). Independent advocates must be used where they are required and brokers can aid with supported decision making if necessary. Where a citizen lacks capacity due to a mental disorder formal assessment under the Mental Capacity Act is required.

6.3. Care and Support Plan Content

6.3.1. The planning process and the care and support plan itself should be proportionate to the needs to be met. However, the care and support plan must:

- 1) Record all the needs identified at assessment
- 2) Explain whether and to what extent needs are eligible
- 3) Identify the needs Nottingham City Council will meet and how it will do so.
- 4) Record needs that will be met by others so that these needs are clearly identified, acknowledged and can be planned for as required
- 5) Record outcomes, relating to the citizen, which link to the care and support needs identified during assessment
- 6) Record outcomes for the carer relating to their own needs identified during assessment
- 7) State the personal budget amount if applicable.
- 8) State how much of this Nottingham City Council will contribute
- 9) State how much the citizen will contribute
- 10) State the way, or ways, in which the personal budget will be received by the citizen or carer e.g. commissioned service, indirect payment, direct payment.
- 11) Offer a direct payment in the first instance, and at each stage of the care and support planning process. Where this offer is then taken up, needs that will be met by a direct payment must be clearly stated and the amount and frequency of the direct payments recorded. (see Direct payment policy)
- 12) Record any adult safeguarding concerns
- 13) Record any issues of capacity and note any Deprivation of Liberties required
- 14) Identify a 'Lead Professional' for the care and support plan
- 15) State an anticipated review date and provide information on how to request a review prior to this date (see 'Reviews')

6.3.2. There should be no constraint on how needs are to be met so long as support options requested are reasonable, appropriate and legal. Social care practitioners supporting citizens and carers to complete care and support plans should not restrict choice and impede flexibility. Social care practitioners should remain mindful that the individual is best placed to judge their own wellbeing although this must be balanced with the need to support citizens and carers to seek high quality, sustainable and value for money solutions to their care and support needs. The total cost of the support proposed within the plan should not usually exceed the indicative personal budget nor should it be assumed that spending should be to the limit of the indicative personal budget.

6.4. Approval via the Adult Panel Process

6.4.1. Once complete, care and support plans that incur a cost to NCC require approval by the adult panel. Panel considers plans requesting care and support in line with NCC's financial regulations, which ensures that approval is proportionate to the needs in question.

6.4.2. All reasonable steps will be taken to reach agreement with a citizen and/or carer submitting their own care and support plan to NCC to ensure that the plan meets need, is reasonable, appropriate and legal. Where the adults panel cannot agree a care and support plan, information as to why will be provided to the social care practitioner with advice, guidance and recommendations for resubmission. If overall agreement cannot be reached, the social care practitioner must provide the citizen and/or carer with a written explanation as to why and information must be provided on how an agreement could be reached.

6.4.3. Once the plan has been approved the care and support planning process ends. A copy of the approved version of the care and support plan must be given to the citizen and to any other person they request. It is advisable that the plan is also shared with allied professionals.

6.4.4. The personal budget will now be paid in the ways outlined in the plan and the support identified in the plan will be commissioned. Needs remain unmet until the point at which services to meet those needs actually commence. If a plan contains a Deprivation of Liberty under the Mental Capacity Act then this must be in place before the plan can commence. Implementation will usually be undertaken by the citizen/carer with support from their lead professional where necessary. Although it is recognised that social care practitioners have a significant role in the implementation process.

6.4.5. An anticipated review date will be issued and information provided to the citizen and/or carer about how to request a review earlier than this date.

6.5. Reviewing Care and Support Plans

- 6.5.1. Reviewing intended outcomes detailed in care and support plans is the means by which Nottingham City Council complies with its ongoing responsibility towards people with care and support needs. NCC has a duty to keep all citizens and carers' care and support plans under review 'generally'; that is a duty to ensure a review happens and the plan is updated. This includes citizens placed outside the NCC area.
- 6.5.2. All reviews should be person-centred, outcomes focused, accessible and proportionate to the needs to be met. This means they can be conducted by telephone or face to face. The citizen and their carer must be involved in the review process. The cooperation of other health and care professionals who can contribute to the plan should be sought. Consideration must be given to supplying an independent advocate should the citizen have substantial difficulties in engaging with the review process, as outlined in section 3.1.
- 6.5.3. There are two types of reviews, 'Planned' and 'Unplanned'. These take place in either a community setting or a care setting.

6.6. Planned Reviews

- 6.6.1. A planned review date should be provided to the citizen as part of the care and support planning process. However, planned review dates do not preclude NCC arranging an earlier review if needed. Planned reviews should take place as stated unless an earlier unplanned review is requested by the citizen or NCC.
- 6.6.2. Planned reviews should be proportionate to the circumstances, the value of the personal budget and any risks identified. Planned reviews may lead to a reassessment of need and a revision of care and support. Where a revision is necessary following a planned review NCC will inform the citizen of what this will involve. Where it is necessary an independent advocate must be involved in the revision process.

6.7. Unplanned Reviews

- 6.7.1. Unplanned reviews should take place immediately when there is any evidence that suggests that circumstances have changed in a way that affects the efficacy, appropriateness or content of a care and support plan. Some unplanned reviews will be initiated by NCC. Others will be requested by citizens or by people acting on their behalf.
- 6.7.2. On receipt of a request for a review NCC will consider the request, judge the merits of conducting the review and involve the citizen and carer in this judgement. Reviews should be undertaken unless NCC is satisfied that the

plan is sufficient or the request is frivolous, inaccurate or is a complaint. If a decision is taken not to review a care and support plan written reasons will be provided to the citizen and/or the individual making the request on the citizen's behalf.

6.8. Community and Placement Reviews

6.8.1. Reviews taking place in a community or placement setting are subject to a separate NCC policy. This includes citizens living in shared lives or supported living setting.

6.9. Citizens in a custodial setting

6.9.1. Citizens over 18 who are in custody or a custodial setting and have eligible social care needs have the same right to a care and support plan as those living within a community or residential setting. . If following that assessment they have eligible needs, the necessary services will be provided.

6.9.2. Citizens in custody should be asked who they want involved in the assessment or care planning process, as it might be possible for them to be supported by another prisoner or family member. Where a citizen would have substantial difficulty in being involved in the care and support process, an independent advocate may be needed. This will be provided via standard community provision for those in approved premises, and provided by the prison for those within prison settings. A financial assessment of the citizen will be carried out to determine what, if any, financial contribution they are expected to contribute towards the cost of their care and support. NCC does not have a duty to carry out a carer's assessment for citizens in custody, this includes both someone in custody claiming to be a carer and someone claiming to be a carer of a citizen in custody. Those citizens in custody cannot be offered an option of a direct payment.

6.9.3. Care and support plans for citizens in custody will be reviewed in line with the NCC review policy.

6.9.4. Where a citizen moves to another local authority area or is transferred to another prison, the continuity of care procedures will be followed, which includes sharing the citizen's care and support plan with the receiving local authority. A similar arrangement will be followed for citizens moving into the Nottingham City area.

7. Protection of Property

7.1. NCC has a duty to take all reasonable steps to protect the 'moveable property' of citizens with care and support needs, where:

- They are being cared for away from home in a hospital
- They are admitted to a care home
- There is a risk that the movable property is lost or damaged.
- The citizen cannot arrange to protect their property themselves.

7.2. 'Movable property' includes personal possessions, furniture and pets.

7.3. The citizen must give their consent for social care practitioners to enter the property, and in the case of citizens who lack mental capacity, consent should be provided by a person authorised to give this under the Mental Capacity Act 2005. Where there is no-one authorised to give this consent, the social care practitioner will make a 'best interests' decision.

7.4. NCC can recover any reasonable expenses incurred in discharging this duty from the citizen.

7.5. NCC has a separate 'Protection of Property' policy that sets out how it will discharge its duty under the Care Act.

8. Brokerage

8.1. The NCC approach to brokerage is to offer a wide range of services to citizens.

8.2. The role of brokerage is to offer the citizen assistance in identifying services that would meet the needs identified in their care and support plan. This can include identifying suitable services, community based resources and information relevant to the citizen's needs. It might also include help with recruiting a Personal Assistant.

8.3. Where a citizen has sufficient financial means to pay for their own care, but has eligible social care needs, they are still entitled to use the in-house brokerage service provided by NCC to arrange their care and support. NCC may charge the citizen for providing this service.

9. Carers

9.1. Support provided by carers

9.1.1. Carers are central to providing a broad range of care and support for vulnerable citizens. This can range from round the clock physical and/or emotional care to visits and oversight of health and social care appointments and managing finances. NCC recognises the very significant benefit that carers provide, in improving the quality of life of those that they care for.

9.1.2. Caring can have a huge impact on the physical, emotional and social life of carers and it is therefore important that their needs are considered alongside those of the adult that they are caring for.

9.2. Support for carers

9.2.1. As well as providing direct support for carers, NCC funds a central support hub for carers called Carers First and funds other voluntary sector organisations which also provide services for carers.

9.3. Information and Advice

9.3.1. A broad range of information and advice will be provided for all carers to help them in their caring role. This will include information about:

- a) Voluntary and community services
- b) Understanding health and social care provision
- c) Financial choices
- d) The impact of different health conditions

9.4. Involvement of carers

9.4.1. Where a citizen is being assessed for care and support, the impact on family members should be considered and all carers should be consulted. This includes identifying any children involved in a caring role.

9.5. Carer's Assessment

9.5.1. All unpaid carers who provide or intend to provide care for a any citizen, whether this citizen is eligible or not are entitled to a carer's assessment.

9.5.2. NCC is responsible for providing support to carers who are looking after somebody in Nottingham City even if the carer lives elsewhere. Where a carer lives in Nottingham, but is supporting someone who lives elsewhere, then the carer's assessment should be undertaken by the authority where the person that they are caring for, lives.

9.5.3. A carers' assessments will establish:

- the carer's needs for support
- the ability of the carer to continue to provide support
- whether the carer is and will continue to be, able and willing to care for the citizen needing care.

9.5.4. The assessment will establish the impact that caring has and the outcomes that a carer wants to achieve.

9.5.5. The assessment will decide if the carer is entitled to support.

9.6. Carers Eligibility

9.6.1. To be eligible for support, the care that is provided must be necessary and be likely to have a significant impact on the carer. NCC will use the criteria below when making a judgement about whether a carer has eligible needs for social care support:

Needs	Outcomes	Wellbeing
<p>The carer's needs arise as a consequence of providing necessary care to an adult and the carer is 'unable' to achieve the following.</p>	<p>As a result of the carer's needs, either:</p> <ul style="list-style-type: none"> a) the carer's physical or mental health is, or is at risk of, deteriorating, or b) the carer is unable to achieve any one of the following outcomes: c) carrying out the caring responsibilities that the carer has for a child; d) providing care to other persons for whom the carer provides care; e) maintaining a habitable home environment; f) managing and maintaining nutrition; g) developing and maintaining family or other significant personal relationships; h) accessing and engaging in work, training, education or volunteering; i) making use of necessary facilities or services in the community including recreational facilities or services; j) engaging in recreational activities. 	<p>As a consequence there is, or likely to be, a significant impact on the carer's wellbeing, including;</p> <ul style="list-style-type: none"> a) personal dignity (including treating the carer with respect); b) physical and mental health and emotional wellbeing; c) protection from abuse and neglect; d) control by the carer over day-to-day life (including over care and support provided and the way it is provided); e) participation in work, education, training or recreation; f) social and economic wellbeing; g) domestic, family and personal relationships; h) suitability of living accommodation; i) the carer's contribution to society.

Being unable to achieve one of these outcomes includes:

- being unable to achieve it without assistance;
- achieving it without assistance would cause pain, distress or anxiety;
- where to achieve it would endanger the citizen or others;

9.6.2. Where a carer has substantial difficulty in participating in the assessment process, they are entitled to support from an independent advocate (see section 3.3 Advocacy).

9.6.3. Where a young carer has been identified within the family, a needs assessment should be offered to the citizen, and consideration given to undertaking a young carer's assessment or a needs assessment.

9.6.4. If any of the caring tasks a young carer is undertaking are inappropriate, consideration will be given to how to provide the citizen with care and support to prevent the young carer undertaking excessive or inappropriate care and support.

9.7. Care and Support Plan

9.7.1. Where a carer has eligible needs they are entitled to a care and support plan which will clarify how these needs will be met. Needs can be met in many different ways, and in many cases this will not include the direct provision of services. The care and support plan of the person being looked after and the carer can be combined together. In most cases, carers' needs will be met through; information and advice, use of universal and community services or as part of the personal budget for the person being cared for.

9.7.2. In some cases the carer will be entitled to their own budget.

9.7.3. Care and support plans that require funding need to be approved by the adult panel. Once the plan has been approved the care and support planning process ends. A copy of the approved version of the care and support plan must be given to the citizen and to any other person they request.

9.7.4. An anticipated review date will be issued and information given to the citizen and/or carer about how to request an earlier date for review where circumstances have changed.

9.8. Personal Budgets

9.8.1. A personal budget is the allocation that someone receives to meet their care and support needs. This can be a combination of direct council services, services provided by other organisations which are paid for by the council and a direct payment of money with which a person can buy their own services.

9.8.2. The personal budget for the citizen can include services that will benefit the carer as well as the citizen such as care at home, day activities and respite.

9.9. Personal Budgets for the Carer

9.9.1. In certain circumstances the carer may be entitled to a personal budget. This may occur when the carer's needs cannot be met by other means and the citizen is not in receipt of a personal budget. This could occur because the citizen is not eligible or refuses to accept support from the council.

10. Appeals

10.1. Right to Appeal

10.1.1. Any citizen, and their carer, who has been through the care and support process has the right to challenge and can appeal against the outcome of the process and decisions made by NCC.

10.2. What can be challenged?

- the outcome of the assessment
- the decision about eligibility for care and support
- the indicative amount within the Personal Budget
- the content of the support plan
- the frequency of the review

10.3. The social care complaints process

10.3.1. When the citizen, their carer or advocate, wishes to challenge the outcome of the care and support process, they should follow the NCC Complaints Process. In responding to a complaint made through this process, NCC will:

- Acknowledge complaints it receives within three working days
- Decide on appropriate complaints handling within 10 working days
- Consider the complaint within 60 working days
- Close the complaint within 15 working days of the outcome of stage three.

10.4. Contacting the Social Care Complaints Service

Social Care Complaints
TheClocktower
Eastcroft Depot
London Road
Nottingham
NG2 3AH

Tel:0115 87 65974

Fax:0115 87 61374

Email: socialcarecomplaints@nottinghamcity.gov.uk

- 10.4.1. Complaints about the Social Care Complaints Service itself will be dealt with under the NCC “Have your say” procedure.
- 10.4.2. If the complaint still remains unresolved or outcome is still unsatisfactory to the complainant, they are advised to contact the Local Government Ombudsman