



Adults and Safeguarding Committee

17 February 2020

Title	Care planning procedures
Report of	Councillor Sachin Rajput – Committee Chairman
Wards	All
Status	Public
Urgent	No
Key	No
Enclosures	
Officer Contact Details	James Mass, Director of Adult Social Care james.mass@barnet.gov.uk

Summary

Following the submission of a member's item, this report has been prepared to provide information on the Council's approach to care planning and the identification of need.

Officers Recommendations

1. The Adults and Safeguarding Committee is asked to note the contents of the report.

1. WHY THIS REPORT IS NEEDED

- 1.1 In advance of the committee meeting of 25 November 2019, a member's item as follows was submitted:

I request that the Adults & Safeguarding Committee is provided with details of the procedures and practices used at care planning assessments where care options are discussed with individual social care users, demonstrating how each individual is enabled to exercise choice in their care, and how the identification of need is always free from resource considerations.

- 1.2 This could not be presented to the November meeting due to the pre-election period and so the information requested is being presented to this committee.

2. REASONS FOR RECOMMENDATIONS

- 2.1 This report provides the information requested in the member's item.

Implementation of the Care Act (2014)

- 2.2 Barnet Council took a thorough approach to ensuring that the implementation of the Care Act (2014) was focused on improving positive outcomes for residents as well as being legally compliant. A number of reports and policies were brought to various meetings of this committee in 2014 and 2015 to provide assurance as to the overall approach to implementation and to seek approval for a range of specific policies. This included a report to the meeting of 19 March 2015 entitled "Implementing the Care Act 2014: Eligibility; Carers contributions; Care arrangement fees; Increased demand". The "Council's Assessment & Eligibility Policy for Adults in Need" is set out in the background papers to this report. The policies followed the primary legislation and the associated statutory guidance of the Care Act 2014. Relevant sections of this policy include:

- Where it appears that an adult may have needs for care and support, the Council will assess whether the adult does have needs for care and support and if so, what those needs are. This is regardless of the level of those needs or an adult's financial resources.
- The Council will therefore seek to establish the total extent of needs and take a holistic view of the adult's needs considering their strengths as well as other support that might be available in the community to meet needs. The assessment will identify and capture all care and support needs, including those being met by any care and support being provided by a carer. Consideration will also be given as to how the adult, their support network and the wider community can contribute towards meeting the outcomes the adult wishes to achieve.

- Where any needs for care and support meet the eligibility criteria the Council will then take the following 3 steps: (a) consider what could be done to meet those eligible needs: this means the Council will consider potential support options and whether they may fall within the Council's contributions policy. How needs should be met will be determined by the care and support planning process. (b) ascertain whether the adult wants Barnet Council to meet those needs or whether they wish to arrange alternative services to meet some or all of those needs, and (c) establish where the adult is ordinarily resident: Barnet Council will be responsible for meeting eligible needs for care and support of adults who are ordinarily resident in Barnet.
- 2.3 The Council ensures it adheres to this policy and follows statutory guidance on assessment of care and support needs, determination of eligibility, and care & support planning.

Strength-based practice in adult social care in Barnet

- 2.4 Barnet Council has invested significantly in ensuring a strength-based approach is offered to residents in contact with adult social care. Staff members have all been trained in this approach and there is a quality assurance framework, including independent audit, in place to review practice and ensure this is sustained.
- 2.5 Important aspects of the strength-based approach include:
- In our interactions with people, we will apply a strengths-based approach, meaning that practitioners will work with people to identify their preferred outcomes and the personal resources they have to achieve these outcomes.
 - We will be creative in how we meet an individual's care and support needs through how we commission, support plan and broker.
- 2.6 This approach is closely aligned to delivery of our Care Act responsibilities as detailed in the "Community support update" considered by this Committee on 19 September 2019 (see background papers).

Assessment of need, determination of eligibility and support planning

- 2.7 The assessment of care and support needs includes the following, which must be captured in the assessment record:
- What is important to the person
 - What is working well that the individual wants to ensure remains in place
 - What changes would most improve their well-being or quality of life
 - All their care and support needs
 - Risks, concerns and capacity
 - Details of health conditions, and the home environment

2.8 Under the Care Act 2014 Section 13, all councils in England are required to meet needs at the national threshold described in The Care and Support (Eligibility Criteria) Regulations 2014. The eligibility threshold is based on identifying how an individual's needs affect their ability to achieve relevant desired outcomes, and whether as a consequence this has a significant impact on their wellbeing. The eligibility criteria are considered following the completion of the assessment of needs. The Regulations set out the outcomes used to determine eligibility, as follows:

Outcomes for adults with care and support needs

- Managing and maintaining nutrition
- Maintaining personal hygiene
- Managing toilet needs
- Being appropriately clothed
- Being able to make use of the adult's home safely
- Maintaining a habitable home environment
- Developing and maintaining family or other personal relationships
- Accessing and engaging in work, training, education or volunteering
- Making use of necessary facilities or services in the local community, including public transport, and recreational facilities or services
- Carrying out any caring responsibilities the adult has for a child.

Outcomes for carers with support needs

- Carrying out any caring responsibilities the carer has for a child
- Providing care to other persons for whom the carer provides care
- Maintaining a habitable home environment in the carer's home, whether or not this is also the home of the adult needing care
- Managing and maintaining nutrition
- Developing and maintaining family or other personal relationships
- Engaging in work, training, education or volunteering
- Making use of necessary facilities or services in the local community, including recreational facilities or services
- Engaging in recreational activities.

2.9 Local authorities must promote wellbeing when carrying out any of their care and support functions in respect of a person. This may be referred to as "the wellbeing principle" because it is a guiding principle that puts wellbeing at the heart of care and support. Barnet ensures that wellbeing is reflected in all its assessments of care & support needs and in the determination of eligibility.

2.10 The development of a care and support plan takes place after the completion of the care and support needs assessment, where social care practitioners identify all needs and understand the individual's own network of support; and after the determination of eligibility. In the development of a care and support plan, there will be a discussion of all suitable care and support options that could meet the identified needs.

2.11 The final care and support plan is agreed between the person and the council, and is based on meeting the individual's eligible needs and the agreed outcomes in the support plan.

2.12 The following case studies help to illustrate the approach that is taken to enable individuals to exercise choice in their care, and how the identification of need is undertaken without resource considerations.

2.13

Case study 1 - Mrs K

When Mrs K was first referred to adult social care she had no food in the house and no money available. She was scared, was not allowing anyone in the house, was refusing to accept support from any services and had an infestation of pigeons.

Following a care and support needs assessment, and the development of a care and support plan by Mrs K and her social worker, Mrs K is now warm, well, comfortable, regularly eats and has contact again with family that she had thought were dead. She has access to her money and is beginning to trust people, working through life affairs with her social worker and engaging with services.

This was achieved in part due to a social worker who used empathy and took time to build rapport and find out who Mrs K is and understand her life history. This enabled Mrs K to begin to trust and engage with those that could support her. The social worker used appreciative inquiry (a technique that focuses on strengths), applied the law including the Mental Capacity Act (2005) and the court of protection to support the process.

Mrs K now has an ongoing flexible package of support involving a multi-agency approach, regular professional involvement, and the ability to be flexible with care such as increasing when unwell / following medical procedure has made it possible for her to remain in her own home.

Case study 2 - Mr B

Mr B had eligible needs in relation to maintaining his nutrition and personal hygiene. However, he expressed a clear preference not to have care in the home and for his hygiene needs not to be met by paid carers.

A strength based approach was used in the development of his care and support plan. Mr B has a personal assistant (PA) who supports him to attend the local swimming pool 3 times a week where he swims and then showers. On the way home they go to the local café for something to eat. Mr B feels like 'the man he used to be' – he now gets to do what he loves again. Mr B has his personal care

needs met as he prefers to have a shower at the swimming pool. He also gets out and about in the community and eats well after his swim.

Case study 3 - Mr and Mrs P

Mr and Mrs P had frequent hospital admissions. Following each hospital episode care was arranged to support them both in their home but, despite initially accepting care, Mr P would then cancel it as he didn't like strangers coming into his property. Mr P did most of the practical tasks around the home, but after a fall, he could no longer manage this; meaning that neither Mr nor Mrs P could manage personal care, nutritional needs or maintaining their home. The son reported being at breaking point and felt that he couldn't do anymore. The GP and other health professionals felt that the couple needed residential care to ensure they were getting the care and support they needed and to resolve the situation of Mr P sending carers away.

By looking working with Mr and Mrs P as a couple, and considering what was important to them, the practitioner was able to understand that having a trusting relationship was key to any successful interaction. Mr and Mrs P did not want to move to a care home and so, building on the success of a private cleaner who spent time getting to know them and establishing a relationship with the couple, the worker worked with them to develop a combined care and support plan allowing one person to be there to support them both in the morning, lunchtime and evening whilst also developing a relationship and allowing time for this to happen.

A joint care package is now enabling the couple to minimise the number of people coming into their home, to remain in their home, and allowing them the opportunity to develop a relationship and therefore trust in the person coming in to support them.

Case study 4 - Mr N

Mr N is a young man in his 50's who as a result of two strokes requires support for his personal care, nutrition, maintaining relationships, accessing the community, managing his finances and maintaining his home. He resides with his family who requested a residential placement. Mr N was assessed as not having the mental capacity to decide the most suitable setting to meet his care and support needs.

It is not possible to determine from Mr N how he would like his care and support needs to be met. The social worker therefore has taken the approach of understanding who Mr N was before his strokes, observing him and his interactions now and considering what it would be like for him to move into a residential placement, versus living with family as he always has.

There is now ongoing work with the family to ensure we can put in place the least restrictive option for Mr N. He is a young man who was very independent and active before his stroke. Care and support at home is now being tried to try and maximise Mr N's well-being.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

3.1 N/A

4. POST DECISION IMPLEMENTATION

4.1 N/A

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- Barnet Council's corporate plan 2019-2024 sets out a commitment to supporting residents to live 'happy, healthy, independent lives with the most vulnerable protected'. It also sets out as an objective "supporting our residents who are older, vulnerable or who have disabilities, to remain independent and have a good quality of life". The plan goes on to set out that this will be delivered through:
 - "Opening new Extra Care schemes for people that need additional support to remain living independently
 - Providing enablement services that help people regain or increase their independence
 - Using technology to enhance independence and assist with care
 - Offering support for carers of people with dementia
 - Providing equipment that allows people to stay more independent at home"
- The approach taken to assessment and support planning is in support of this objective.

5.2 Resources (Finance and Value for Money, Procurement, Staffing, IT, Property, Sustainability)

- The total adult social care net budget for 2019/20 is £98.5m of which £79.9m is the budget for the purchasing of care. The Adults and Safeguarding Committee savings programme will enable the council to meet its savings target as set out in the MTFS, to deliver £6m of savings in 19/20 across the total budget.

5.3 Social Value

- N/A

5.4 Legal and Constitutional References

- Whilst a local authority cannot take resources into account in assessing eligible needs, it is settled law that resources can be considered when considering the provision necessary to meet that identified eligible need (Regina v Gloucestershire County Council and Another, Ex Parte Barry: HL 21 Mar 1997).
- Following the Implementation of the Care Act 2014 and the Care and Support Statutory Guidance, there is a clear duty to involve the person in the care planning process, which has to be person centred. All reasonable steps have to be taken to reach agreement on provision, but the care plan does not have to only reflect the subject's choices.
- The statutory guidance (Care and Support Statutory Guidance) refers to keeping the person at the centre of any assessment, as follows:

6.30 Putting the person at the heart of the assessment process is crucial to understanding the person's needs, outcomes and wellbeing, and delivering better care and support. The local authority must involve the person being assessed in the process as they are best placed to judge their own wellbeing. In the case of an adult with care and support needs, the local authority must also involve any carer the person has (which may be more than one carer), and in all cases, the authority must also involve any other person requested. The local authority should have processes in place, and suitably trained staff, to ensure the involvement of these parties, so that their perspective and experience supports a better understanding of the needs, outcomes and wellbeing.

- Section 151 of the Local Government Act 1972 states that: "without prejudice to section 111, every local authority shall make arrangements for the proper administration of their financial affairs and shall secure that one of their officers has responsibility for the administration of those affairs". Section 111 of the Local Government Act 1972, relates to the subsidiary powers of local authorities.
- Local authorities owe a fiduciary duty to council tax payers, which means it must consider the prudent use of resources, including control of expenditure, financial prudence in the short and long term, the need to strike a fair balance between the interests of council tax payers and ratepayers and the community's interest in adequate and efficient services and the need to act in good faith in relation to compliance with statutory duties and exercising statutory powers.
- The Council's Constitution (Article 7 Committees, Forums, Working Groups and Partnerships) sets out the responsibilities of all council Committees.
- The responsibilities of the Adults and Safeguarding Committee include:

- (1) Responsibility for all matters relating to vulnerable adults, adult social care and leisure services.
- (2) Work with partners on the Health and Well Being Board to ensure that social care interventions are effectively and seamlessly joined up with public health and healthcare and promote the Health and Wellbeing Strategy and its associated sub strategies.
- (3) To submit to the Policy and Resources Committee proposals relating to the Committee's budget for the following year in accordance with the budget timetable.
- (4) To make recommendations to Policy and Resources Committee on issues relating to the budget for the Committee, including virements or underspends and overspends on the budget. No decisions which result in amendments to the agreed budget may be made by the Committee unless and until the amendment has been agreed by Policy and Resources Committee.
- (5) To receive reports on relevant performance information and risk on the services under the remit of the Committee.

5.5 Risk Management

- All high cost packages, whether for support in the community or in a residential setting, are approved by an assistant director. This helps provide assurance that appropriate decisions are being taken that are fully compliant with the responsibilities set out in the Care Act.
- The council has an established approach to risk management, which is set out in the Risk Management Framework. Risks associated with the saving proposals will be outlined within the theme committee reports as each proposal is brought forward for the Committee to consider.

5.6 Equalities and Diversity

- Equality and diversity issues are a mandatory consideration in the decision-making of the council. The Equality Act 2010 and the Public-Sector Equality Duty require elected Members to satisfy themselves that equality considerations are integrated into day-to-day business and that all proposals emerging from the business planning process have taken into consideration the impact, if any, on any protected group and what mitigating factors can be put in place.
- The public-sector equality duty is set out in s149 of the Equality Act 2010. A public authority must, in the exercise of its functions, have due regard to the need to:
 - a) Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and
 - c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

- Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:
 - a) Remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
 - b) Take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it; and
 - c) Encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include steps to take account of disabled persons' disabilities.
- Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, the need to:
 - a) Tackle prejudice; and
 - b) Promote understanding.
- The relevant protected characteristics are:
 - Age;
 - Disability;
 - Gender reassignment;
 - Pregnancy and maternity;
 - Race;
 - Religion or belief;
 - Sex; and
 - Sexual orientation.

5.7 Corporate Parenting

- In line with Children and Social Work Act 2017, the council has a duty to consider Corporate Parenting Principles in decision-making across the council. The outcomes and priorities in the refreshed Corporate Plan, Barnet 2024, reflect the council's commitment to the Corporate Parenting duty to ensure the most vulnerable are protected and the needs of children are considered in everything that the council does. Young people in care, and care leavers, who, when aged 18, meet eligibility criteria for adult social care, will be affected by these proposals in the same way as other adults who require support under Care Act (2014) criteria.

5.8 Consultation and Engagement

- Resident consultation was undertaken on the council's implementation of the Care Act

2014 which included information on the approach to assessment and care & support planning.

5.8 **Insight**

5.8.1 N/A

6. **BACKGROUND PAPERS**

6.1 Assessment and Eligibility policy for adults in need
Adults and Safeguarding Committee, 19 March 2015
<http://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=698&MId=7933&Ver=4>

6.2 Delivery Plan 2019/20
Adults and Safeguarding Committee, 18 March 2019
<https://barnet.moderngov.co.uk/documents/s51616/Adults%20and%20Safeguarding%20Delivery%20Plan%202019-20.pdf>