

Adult Social Care Policies and Procedures

REVIEW OF CARE AND SUPPORT PLANS

WARNING! Please note if the review date shown below has passed this procedure may no longer be current and you should check the PPG E Library for the most up to date version

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POLICY VERSION CONTROL

POLICY NAME	Review of Care and Support Plans		
Document Description	This document sets out Lancashire County Council's response to the Care Act duty to ensure that a review of care and support plan occurs and, if required, a revision of the plan or re-assessment following this review process.		
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0.1	15 June	All	Final comments from PPG Strategy Group.

1. POLICY STATEMENT

Ensuring all people with a care and support plan, or support plan have the opportunity to reflect on what is working, what is not working and what might need to change is an important part of the planning process.

Without a system of regular reviews, plans could quickly become out of date, meaning that people are not obtaining the care and support required to meet their needs. Plans may also identify outcomes that the person wants to achieve which are progressive or time limited, so a periodic review is vital to ensure that the plan remains relevant to their goals and aspirations.

This review process – just like the original Care and Support Planning process [LINK] – should be person-centred and outcome-focused at all times, as well as accessible and proportionate to the needs to be met. The process **must** involve the person needing care and support (and their carer where feasible) and consideration **must** be given whether to involve an independent advocate [LINK] as specified in the Care Act. Care plans should not be revised without a thorough review to ascertain if a revision is necessary, and in the best interests of the person – although there may some circumstances where a so-called "Light Touch" is appropriate.

Consideration should also be given to authorising others to conduct a review – this could include the person themselves or carer, a third party (such as a provider) or another professional, with the local authority adopting an assurance and sign-off approach.

The review will help to identify if the person's needs have changed and, can in such circumstances, lead to a reassessment. The review must not be used as a mechanism to arbitrarily reduce the level of a person's personal budget. The review should also consider safeguarding principles and ensure that the person is not at risk of abuse or neglect.

In addition to the duty on the county council to keep plans under review generally, the Care Act places a duty on the local authority to conduct a review if a request for one is made by the adult or a person acting on the adult's behalf. The county council should provide information and advice to people at the planning stage about how to make a request for a review. This process should be accessible and include multiple routes to make a request, such as phone or email.

An initial review should be completed 6-8 weeks after agreement and sign-off of a plan and personal budget so as to ensure that the arrangements are accurate and there are no initial issues. **It is the expectation that the next and subsequent reviews of the plan should be conducted no later than every 12 months.** All reviews should be proportionate to the needs to be met, and the process should not contain any surprises for the person concerned.

This PPG applies to people in need of care and support and carers equally, unless specifically stated. As many of the same principles apply to both care and support planning and reviews, this chapter should be read in conjunction with the county

council's PPG on Care and Support Planning. Links are also provided to the relevant chapters of the Care Act statutory guidance. Please see Section 5 for more information and suggestions for further reading.

Therefore to fulfil its duty under section 27 of the Care Act, the county council will, work with its statutory, voluntary and private sector partners, in order to comply with its duties in regard to the review of care and support plans in a manner that is relevant, coherent, timely and sufficient.

The county council will make all reasonable adjustments to ensure that all disabled people have equal access to participate in the review process and decision making in line with the Equality Act 2010.

The geography and population of Lancashire is diverse and our Adult Social Care Policies and practice will aim to deliver services and supports that are representative of the communities in which we work.

The county council will follow the Care Act and other relevant legislation, policies and guidance to ensure our practice is of high quality and legally compliant. Where our customers or those we come into contact with wish to challenge or raise concerns in regard to our decisions, regarding eligibility the county council's complaints procedures [LINK] will be made available and accessible.

2. KEY DEFINITIONS AND PRINCIPLES APPLICABLE TO THIS POLICY

In many cases, the review and revision of the plan should be intrinsically linked; it should not be possible to decide whether to revise a plan without a thorough review to ascertain if a revision is necessary, and in the best interests of the person. In addition, where a review is being undertaken where a person has a carer, the county council should consider whether the carer's support plan requires reviewing, too.

2.1. Planned review:

The date set with the person during care and support or support planning, or through general monitoring, when their situation will be re-considered as to how effectively care and support is assisting them.

2.2. Unplanned review:

Results from a change in needs or circumstance that the local authority becomes aware of, e.g. a fall or hospital admission and or emergency.

2.3. Requested review:

Where the person with the care and support or support plan, or their carer, family member, advocate or other interested party makes a request that a review is conducted. This may also be as the result of a change in needs or circumstances.

2.4. Light Touch Review:

The very first planned review can be a "Light Touch" review of the support plan six to

eight weeks after the sign-off of a personal budget.

Sometimes there are small changes, often of a temporary nature, where a full review and revision of a plan are not necessary and a "Light Touch" review is appropriate. "Light Touch" reviews can also be used throughout the review process when a change to a plan is required but there has been no change in the level of need (e.g. a change in provider), or when there are small changes in need, at times temporary, which can be accommodated within the established personal budget (e.g. a carer may change the times when they are available to support). In these circumstances, it may not be appropriate for the person to go through a full review and revision of the plan.

The county council, as always, must ensure that any response to a request or need for a "Light Touch" review is proportionate and reasonable.

3. PROCEDURES

The review should be a positive opportunity to take stock and consider if the plan is enabling the person to meet their needs and achieve their aspirations. The process should not be overly complex or bureaucratic.

Where plans are combined with other plans (for example education, health and care plans which are reviewed annually) the Council should be aware of the review arrangements with these other plans and seek to align reviews together. And whatever the timing of the review, it's important to keep in mind that the county council is obliged to keep the plan under review generally. People can also request a review at any time.

The review should cover the following broad elements, which should be communicated to the person before the review process begins:

- Have the person's circumstances and/or care and support or support needs changed?
- What is working in the plan, what is not working, and what might need to change?
- Have the outcomes identified in the plan been achieved or not?
- Does the person have new outcomes they want to meet?
- Could improvements be made to achieve better outcomes?
- Is the person's personal budget enabling them to meet their needs and the outcomes identified in their plan, and
- Is the current method of managing it still the best one for what they want to achieve, e.g. should direct payments be considered?
- Is the personal budget still meeting the sufficiency test?
- Are there any changes in the person's informal and community support networks which might impact negatively or positively on the plan?
- Has there been any changes to the person's needs or circumstances which might mean they are at risk of abuse or neglect?
- Is the person, carer, independent advocate satisfied with the plan?
- Does the Review follow the principles outlined in the Care and Support Planning PPG? [LINK].

In some cases a complete change of the plan may be required, whereas in others minor adjustments may be needed. In either case, the following aspects of care planning should be followed:

- the person's wishes and feelings should be identified as far as possible and they should be supported to be involved
- the revision should be proportionate to the needs to be met
- where the plan was produced in combination with other plans, this should be considered at the revision stage
- the person, carer or person acting on their behalf should be allowed to self-plan in conjunction with the local authority where appropriate
- the development of the revised plan must be made with the involvement of the adult/carer, and any person the adult asks the authority to involve
- any additional elements that were incorporated into the original plan should be replicated in the revised plan where appropriate and agreed by all parties; and
- there needs to be clarity on the sign-off process, especially where the revised plan is prepared by the person and the Council

3.1 Types of review:

A planned review:

This is set at the time of the original care and planning process.

During the planning process, the person and their social worker, or relevant professional may have discussed and decided when to review the plan. This may be valuable to people so that they can anticipate when the review will take place, rather than the review being an unexpected experience. It also personalises care and support, as the person may have a view as to a suitable time for the review to occur.

The first planned review should be an initial 'light touch' review (see above) of the planning arrangements 6-8 weeks after sign-off of the personal budget and plan. Where relevant, this should also be combined with an initial review of direct payment arrangements. This will provide reassurance to all parties that the plan is working as intended, and will help to identify any teething problems.

There are a range of review options available, which include self-review, reviews conducted remotely, or face-to-face reviews with a Social Care worker or other appropriate person or professional: these should be proportional to the circumstances, the value of the personal budget and any risks identified. In all instances, the method of review should be agreed with the person (and carer if appropriate) and all reasonable measures taken to ensure their involvement and the involvement of other people they may identify, including an independent advocate [LINK] where this is required under the Act.

If a person is recorded as having a mental impairment and lacking capacity to make some decisions, then the Social Care worker, other appropriate person or professional should consider carefully when it will be appropriate for the next review to take place.

Where conditions are progressive, and the person's health is deteriorating, reviews may need to be much more frequent. Similarly, where a person has few or no family members or friends involved in supporting them, the risks are higher, and again reviews or monitoring may need to be more frequent.

An unplanned review:

This results from a change in needs or circumstance that the local authority becomes aware of, e.g. a fall or hospital admission and or emergency.

If there is any information or evidence that suggests that circumstances have changed in a way that may affect the efficacy, appropriateness or content of the plan, then the county council's Social Care worker should immediately conduct a review to ascertain whether the plan requires revision, e.g. where a carer is no longer able to provide the same level of care, there is evidence of a deterioration of the person's physical or mental wellbeing or the local authority receives a safeguarding alert. During the review process, the person the plan is intended for, or the person acting on their behalf, should be kept fully involved and informed of what is occurring, the timescales involved and any likely consequences. This will help to alleviate anxiety at a time where things in the person's life may have changed substantially.

A requested review:

When the person with the care and support or support plan, or their carer, family member, advocate or other interested party makes a request that a review is conducted. This may also be as the result of a change in needs or circumstances.

The right to request a review applies not just to the person receiving the care, but to others supporting them or interested in their wellbeing. The Social Care worker should consider the request even if it is not made by the adult or their carer. The request process should be accessible and streamlined, available online, by phone or in writing.

Upon receipt of a request to conduct a review (the opportunity for which should be made clear during the original planning process), the county council's Screening and Initial Assessment Service (SIAS) must consider this and judge the merits of conducting a review. In most cases, it is the expectation that a review should be performed.

However if SIAS or the Assigned worker is reasonably satisfied that the plan remains sufficient, or the request is frivolous, inaccurate or is a complaint, a review does not have to be undertaken.

Where a decision is made not to conduct a review following a request, the Manager should set out the reasons for not accepting the request, in a format accessible for example in writing or braille, to the person, along with details of how to pursue the matter. If the person remains unsatisfied, it may also be prudent for the Manager to set out when the person can expect a scheduled review of their plan.

There will be occasions when a change to a plan is required but there has been no change in the levels of need (e.g. a change of provider). There may also be small

changes in need, at times temporary, which can be accommodated within the established personal budget (e.g. when a carer changes the times when they are available to support). In these circumstances, it is not appropriate for the person to go through a full review and revision of the plan. The appropriate Team will deal with these 'light-touch' requests in a proportionate and reasonable way.

Where a full revision of needs, outcomes and support is necessary, the Social Care worker must work through the assessment and care planning processes as detailed in Assessment of Needs and Care and Support Planning [LINKS]. The assessment process following a review should not start from the beginning of the process but pick up from what is already known about the person and should be proportionate.

Particular attention should be taken if the revisions to the plan proposes increased restraints or restrictions on a person who has not got the capacity to agree them. This may become a Deprivation of Liberty (DOLS), which requires appropriate safeguards to be in place (see the separate PPG document on Independent Mental Capacity Advocacy which includes information on the DOLS process [LINK]).

3.2 How to undertake a review:

Planned Review

- Prior to the planned review date, the Case owner will discuss and agree with the individual who is the most appropriate person to undertake the review and assign the task to them.
- Consideration should be given to the preferred review style, for example, a remote review or face to face.
- The Care and Support Plan will be reviewed/amended and should be proportionate to the circumstances, value of the budget and any identified risks.
- The review may identify:
 - a significant change of need where the change will exceed the established budget
 - no change of need, or a
 - small change of need or circumstances
- If during the review, it is identified that a re-assessment/ re-calculated budget due to significant changes in need is required, then this task should be re-assigned to the most appropriate person.
- Where a decision has been made following a review that a revision is necessary, the Case owner should inform the person, or a person acting on their behalf of the decision and what this will involve. Where the person has substantial difficulty in being actively involved with the review, and where there are no family or friends to help them being engaged, an independent advocate must be involved.
- The Case owner/manager will need to validate the final review outcomes.
- The Case owner should record the review on the agreed systems, identify when next review is to be undertaken and whether the individual has identified who they would prefer to would undertake this.
- In the case where small changes have been made but with no change to the budget then a 'light tough review' should be planned within 6 – 8 weeks.

- If there are no changes then the next planned review date will apply.
- A copy of the agreed care and support plan should be sent out to the person along with an outcome letter following validation.

Unplanned Review

- SIAS/ Hospital Intake/ Assigned worker – will make a decision as to who is the appropriate person to undertake the review and then assign the task to them.
- Review will then be undertaken, involving the individual, carer and any other person requested by the individual. The review should be proportionate to the circumstances, value of the personal budget and any identified risks. It can be via the various modes available e.g. telephone etc. dependent on the overall circumstances.
- Care and Support plan is amended when it is within the actual budget. Send out copy of agreed care and support plan.
- If the needs exceed the estimated budget, this will result in the need for a re-assessment to generate a possible revised budget.

Requested Review

- SIAS/ Hospital Intake/ Assigned worker will make a decision as to who is the appropriate person to undertake the review and then assign the task to them.
- Review will then be undertaken, involving the individual, carer and any other person requested by the individual. The review should be proportionate to the circumstances, value of the personal budget and any identified risks. It can be via the various modes available e.g. telephone etc. dependent on the overall circumstances.
- Care and Support plan is amended when it is within the estimated budget. Send out a copy of agreed care and support plan.
- If the needs exceed the actual budget, this will result in the need for a re-assessment to generate a possible revised budget.
- **If a review is not considered to be required** the reasons for not accepting the request must be set out in a format accessible to the person, along with details of how to pursue the matter if the person remains unsatisfied. In most cases, it would be helpful for this to set out that the county council will continue to monitor the plan to ensure that it remains fit for purpose, and that the decision does not affect the right to make a future request for review. Although not mandatory, it may also be prudent for the local authority to set out when the person can expect a formal review of the plan and to provide details of the county council's complaints procedure.

4. FLOW CHARTS OR DIAGRAMS

Example: Accepting a renewal request

The county council receives an email from a relative of an older person receiving care and support at home. The email provides details that the older person's condition is deteriorating and supplies evidence of recent visits to the GP. The county council therefore decides to review their care and support plan to ensure that it continues to meet the person's needs.

Example: Declining a renewal request

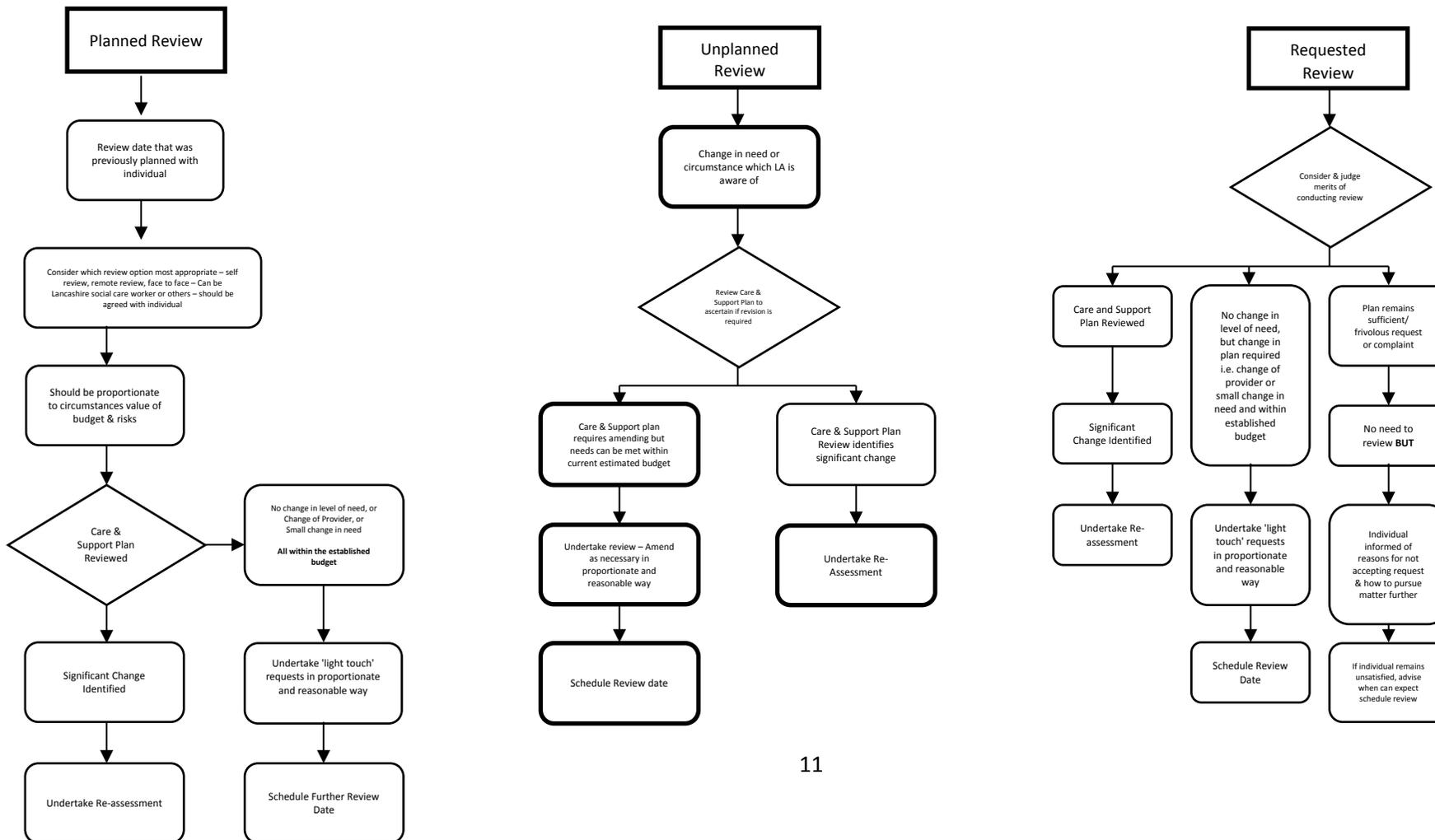
The county council receives a phone call from Mr X. He is angry as he feels that he has needs that have not been identified in his care plan and requests a review of the plan. The county council has on a separate recent occasion reviewed his plan, when it came to the conclusion that no revision was necessary and informed Mr X of the decision and the reasons for it. Therefore, the county council declines the request in this case and provides a written explanation to Mr X, informing him of an anticipated date of when it will be formally reviewing the plan together with information on its complaints procedure.

Consider at EVERY Stage

Consider Possible Complaints Procedure	Mental Capacity	All Forms of Advocacy & Participation Support	Impact on the family and carers
Safeguarding	Strengths – based Approach	Ensuring assessment is proportionate and appropriate	CHC and / or Joint Funded Package

Throughout the process always consider preventative services that can reduce or delay the need for ongoing intervention

Record all activity/ actions at all stages on Case Notes on LAS



5. DOCUMENT HISTORY

RELATED DOCUMENTS	
OTHER RELATED PPG DOCUMENTS	<ul style="list-style-type: none"> • Assessment of Needs • Care and Support Planning • Independent Mental Health Advocacy and Independent Mental Capacity Advocacy • Independent Care Act Advocacy • Information and Advice Policy
LEGISLATION OR OTHER STATUTORY REGULATIONS	<ul style="list-style-type: none"> • Chapter 1 Promoting Wellbeing Statutory Guidance • Chapter 3 Information and advice Statutory Guidance • Chapter 7 Independent advocacy Statutory Guidance • Chapter 10 Care and support planning Statutory Guidance • Chapter 13 Review of Care and support plans Statutory Guidance • Chapters 14 Safeguarding Statutory Guidance • Mental Capacity Act 2005 • Delivering Care and Support Planning Guide • Outcome focused reviews – a practical guide