

# Adult Social Care Policies and Procedures

## ELIGIBILITY CRITERIA FOR CARERS AND CARERS' BUDGETS

**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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## CARER'S ELIGIBILITY CRITERIA AND CARERS BUDGETS

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## POLICY VERSION CONTROL

<b>POLICY NAME</b>	<b>Carer's Eligibility Criteria and Carers Budgets</b>		
<b>Document Description</b>	<b>This document sets out the county council's response to the Care Act 2014 in regard to determining eligibility for care and support for carers and the budgets assigned to that care and support.</b>		
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<b>0.2</b>	<b>July 2017</b>		<b>Re-ordering of Procedures section and additional information, new case studies.</b>

# 1. POLICY STATEMENT

## Eligibility Criteria

Carers can be eligible for support in their own right – whether or not the adult for whom they care for has eligible needs – and the threshold for support is based on the impact their caring role has on their wellbeing.

Establishing whether or not a person has eligible needs is one of the most important decisions under the Care Act. Therefore there is a separate policy in relation to eligibility for carers.

Local authorities **must** ensure that any carer with an appearance of need for support receives a proportionate assessment [LINK] which identifies their level of needs. This applies whether an individual currently provides or intends to provide care for another adult and is irrespective of their financial situation.

When an adult is found to have care and support needs following a carer's assessment [LINK] under section 10 of the Care Act, the county council **must** determine whether those needs are at a level sufficient to meet the "eligibility criteria" under section 13 of the Act. Sections 18 and 20 of the Act set out the duty of local authorities to meet a carer's needs for support which meet the eligibility criteria.

The Care Act specifies a new national minimum threshold for eligibility (Section 13) for **adults** and which are further detailed in [The Care and Support \(Eligibility Criteria\) Regulations 2015](#). Local authorities are **not** able to restrict their eligibility beyond this.

The national eligibility criteria sets a minimum threshold for adult care and support needs which local authorities must meet. All local authorities **must** comply with this national threshold.

Eligible needs are those which meet the eligibility criteria and which a local authority may be required to meet. The 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.

This document deals exclusively with carers. For general service users [?] you can access the county council's Eligibility Criteria PPG [LINK].

Improved clarity around eligibility thresholds supports councils in deciding whether the prior provision of information and advice or preventative services would delay a person from developing needs which meet the eligibility criteria or whether longer-term care and support might be needed. It should also help the carer to think more broadly about what support might be available in the local community or through their support network to meet their needs and support the outcomes they want to achieve.

## Carers' Budgets

The county council **must** have regard to the wellbeing principle [LINK] of the Care Act, as the carer may need a break from caring responsibilities to look after their own

physical/mental health and emotional wellbeing, social and economic wellbeing, and to spend time with other members of the family and personal relationships. Whether or not there is a need for replacement care, carers may need support to help them to look after their own wellbeing.

Everyone whose needs are met by the county council, whether those needs are eligible, or if the authority has chosen to meet other needs, **must** receive a personal budget as part of the care and support plan, or support plan [LINK]. The personal budget is an important tool that gives the person clear information regarding the money that has been allocated to meet the needs identified in the assessment [LINK] and recorded in the plan. An indicative amount should be shared with the person, and anybody else involved, at the start of care and support planning, with the final amount of the personal budget confirmed through this process. The detail of how the personal budget will be used is set out in the care and support plan, or support plan. At all times, the wishes of the carer must be considered and respected. For example, the personal budget should not assume that people are forced to accept specific care options against their will because this is perceived to be the cheapest option.

The personal budget **must** always be an amount sufficient to meet the person's care and support needs, and **must** include the cost to the county council of meeting the person's needs which the **county council is under a duty to meet**, or has exercised its power to do so.

Therefore to fulfil its duty under section 13 of the Care Act, the county council will work with its statutory, voluntary and private sector partners in order to comply with the national threshold relating to care and support for carers 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 eligibility decision 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 will be made available and accessible.

## 2. KEY DEFINITIONS AND PRINCIPLES APPLICABLE TO THIS POLICY

Many of the core aims of the Care Act (particularly its focus on preventing, delaying or reducing the need for care and support) apply equally to individuals **and** their carer's. While this document details the county council's responsibilities around Carer's Eligibility Criteria and Carers Budgets, staff should be aware of other areas of the Act that impact on the role of carers. Where appropriate, we have provided links to relevant Policy, Procedures and Guidelines (PPG) documents and you can consult Section 5 (Document History/Related Documents, page 15) for more information.

### 2.1 Wellbeing

“Wellbeing” is a broad concept under the Act but has particular significance in determining carer's eligibility for support, and it is described as relating to the following areas in particular:

- personal dignity (including treatment of the individual with respect)
- physical and mental health and emotional wellbeing
- protection from abuse and neglect
- control by the individual over day-to-day life (including over care and support provided and the way it is provided)
- participation in work, education, training or recreation
- social and economic wellbeing
- domestic, family and personal
- suitability of living accommodation
- the individual's contribution to society

There is no hierarchy and all should be considered of equal importance when considering “wellbeing” in the round.

### 2.2 Assessment

This is one of the key interactions between the county council and a carer (or indeed the person they care for). The process must be person-centred throughout, involving the carer and supporting them to have choice and control. It starts from when a local authority begins to collect information about the carer, and will be an integral part of the carer's involvement in the care and support system as their needs change. An assessment **must** seek to establish the total extent of needs **before** the local authority considers the carer's eligibility for care and support and what types of care and support can help to meet those needs.

See the separate [Carers Assessment PPG \[LINK\]](#) for more information.

### 2.3 Proportionate

This means that the assessment is only as intrusive as it needs to be to establish an accurate picture of the needs of the carer, regardless of whatever method of assessment is used. This will involve:

- both hearing and understanding the initial presenting problem,
- not taking this at 'face value',
- ensuring any underlying needs are also explored and understood.

## 2.4 Eligibility outcomes

The national eligibility criteria set a minimum threshold for carer support needs which the county council **must** meet. These are the outcomes that the eligibility determination should be based on. All local authorities **must** comply with this national threshold. Councils can also decide to meet needs that are not deemed to be eligible if they chose to do so.

## 2.5 Fluctuating needs

Carers with fluctuating needs may have needs which are not apparent at the time of the assessment, but may have arisen in the past and are likely to arise again in the future. Therefore local authorities **must** consider an individual's need over an appropriate period of time to ensure that all of their needs have been accounted for when the eligibility is being determined. The county council **must** also consider how the carer's needs change as a result of the fluctuation in the needs of the person they are caring for. The level of a carer's need can also fluctuate irrespective of whether the needs of the adult for whom they care, fluctuate.

Where fluctuating needs are apparent, this should also be factored into the care plan, detailing the steps the county council will take to meet needs in circumstances where these fluctuate.

## 2.6 Information and Advice

If a carer is provided with care and support, the county council will provide them with information and advice [LINK] about what can be done to prevent, delay, or reduce their needs as part of their care and support plan or support plan. This should also include consideration of the carer's strengths and the support from other members of the family, friends or the community.

Information and advice will be provided, in an accessible form, about what can be done to prevent, delay, or reduce development of their needs. Where a carer has some needs that are eligible, and also has some other needs that are not deemed to be eligible, the local authority must provide information and advice on services facilities or resources that would contribute to preventing, reducing or delaying the needs which are not eligible, and this should be aligned and be consistent with the care and support plan for the carer.

### 3. PROCEDURES

#### 3.1 Eligibility for carers

The national eligibility threshold for carers is set out in the [Care and Support \(Eligibility Criteria\) Regulations 2015](#). The threshold is based on the impact that a carer's needs for support has on their wellbeing. The determination should be made without consideration of whether or not the adult the carer cares for has eligible needs themselves.

Carers can be eligible for support whether or not the person for whom they care has eligible needs. The eligibility determination must be made based on the carer's needs and how these impact on their wellbeing. We will consider that a carer has **eligible needs** if they **meet the following three criteria**:

1. The needs arise as a consequence of providing necessary care for the person;
2. The effect of the carer's needs is that any of the circumstances specified in the Eligibility Regulations apply to the carer:
  - They are unable to achieve an outcome without assistance;
  - They are able to achieve an outcome without assistance, but doing so causes or is likely to cause significant pain, distress or anxiety or endangers them;
  - They are able to achieve the outcome without assistance but doing so is likely to endanger the health or safety of the carer or any adults or children for whom the carer provides care.
3. As a consequence of that fact there is, or there is likely to be, a significant impact on the carer's wellbeing.

#### 3.2 Interpreting the carers' eligibility criteria

##### **Step 1 - Needs**

The **first condition** is that the carer **must** be providing necessary care. If the carer is providing care and support for needs which the adult is capable of meeting themselves, the carer may not be providing necessary support. In such cases, you should provide information and advice [LINK] to the adult and carer about how the adult can use their own strengths or services available in the community to meet their needs.

##### **Step 2 - Outcomes**

The **second condition** that authorities **must** consider is whether the carer's physical or mental health is either deteriorating or is at risk of doing so, or whether the carer is unable to achieve any of the following outcomes:

- a) **Carrying out any caring responsibilities the carer has for a child** – the county council will consider any parenting or other caring responsibilities the carer has for a child in addition to their caring role for the person. For example, the carer might be a grandparent with caring responsibilities for their grandchildren while the grandchildren's parents are at work.
- b) **Providing care to other persons for whom the carer provides care** – the county council will consider any additional caring responsibilities the carer may have for other adults. For example, a carer may also have caring responsibilities for a parent in addition to caring for the adult with care and support needs.
- c) **Maintaining a habitable home environment** - the county council will consider whether the condition of the carer's home is safe and an appropriate environment to live in and whether it presents a significant risk to the carer's wellbeing. A habitable home should be safe and have essential amenities such as water, electricity and gas.
- d) **Managing and maintaining nutrition** – The county council will consider whether the carer has the time to do essential shopping and to prepare meals for themselves and their family.
- e) **Developing and maintaining family or other significant personal relationships** – the county council will consider whether the carer is in a position where their caring role prevents them from maintaining key relationships with family and friends or from developing new relationships where the carer does not already have other personal relationships.
- f) **Engaging in work, training, education or volunteering** – the county council will consider whether the carer can continue in their job, and contribute to society, apply themselves in education, volunteer to support civil society or have the opportunity to get a job, if they are not in employment.
- g) **Making use of necessary facilities or services in the local community** – the county council will consider whether the carer has an opportunity to make use of the local community's services and facilities and for example consider whether the carer has time to use recreational facilities such as gyms or swimming pools.
- h) **Engaging in recreational activities** – the county council will consider whether the carer has leisure time, for example some free time to read or engage in a hobby.

### **What is the regulatory meaning of "being unable" to achieve outcomes?**

Be aware that "being unable" to achieve outcomes includes circumstances where the carer is:

- Unable to achieve the outcome without assistance. This includes where the carer would be unable to achieve an outcome even if assistance were provided.

A carer might, for example, be unable to fulfill their parental responsibilities unless they receive support in their caring role.

- Able to achieve the outcome without assistance, but doing so causes or is likely to cause significant pain, distress or anxiety. A carer might, for example, be able to care for the adult and undertake fulltime employment, but if doing both causes the carer significant distress, the carer should not be considered able to engage in employment.
- Able to achieve the outcome without assistance but doing so is likely to endanger the health or safety of the carer or any adults or children for whom the carer provides care. A carer might, for example, be able to provide care for their family and deliver necessary care for the adult, but, where this endangers the adult with care and support needs, for example, because the adult receiving care would have to be left alone while other responsibilities are met, the carer should not be considered able to meet the outcome of caring for their family.

### **Do any of the circumstances specified in the Eligibility Regulations apply to the carer?**

You must consider whether the carer is able to achieve these outcomes or if they are unable to achieve any of the outcomes.

When eligibility is being considered we will consider a carer's needs over an appropriate period of time, to ensure that all of their needs have been accounted for, and in recognition that the needs of a person or carer may fluctuate.

The carer will have eligible needs met if they are unable to achieve any of these outcomes and as a result there is, or there is likely to be, a significant impact on their wellbeing.

When the eligibility determination has been made the county council will provide the carer with a copy of their assessment if requested, and a letter stating the eligibility determination.

### **Step 3 – Impact on Wellbeing**

The **third condition** that **must** be met is that the county council **must** consider whether the carer's needs and their inability to achieve the outcomes above present a significant impact on the carer's wellbeing (see paragraph 2.1 on page 4 for a definition of wellbeing under the Care Act).

You should consider whether:

- The carer's needs and inability to achieve the outcomes impact on an area of the carer's wellbeing in a significant way.
- The impact on a number of the areas of wellbeing is such that they have a significant impact on an adult's overall wellbeing (please note that the term "significant" takes its everyday meaning – it is not defined by the Act or its regulations).

**Do the carer's needs and their inability to achieve the outcomes have an important, consequential effect on their daily lives, their independence and their own wellbeing?**

Try to understand the carer's needs in the context of what is important to them. The impact of needs may affect different carers differently, because what is important to the individual's wellbeing may not be the same in all cases. Circumstances which create a significant impact on the wellbeing of one individual may not have the same effect on another.

### 3.3 Carers' Eligibility Decision Process

The following table summarises the steps required when assessing a carers' eligibility:

<p><b>Step 1 – Needs</b></p> <p>The needs arise as a consequence of providing necessary care to an adult, and the carer is 'unable' to achieve the following:</p>
<p><b>Step 2 – Outcomes</b></p> <p>As a result of the carer's needs, either:</p> <ul style="list-style-type: none"> <li>• the carer's physical; or mental health is, or is at risk of, deteriorating</li> <li>• the carer is unable to achieve any of the following outcomes: <ul style="list-style-type: none"> <li>○ carrying out any caring responsibilities the carer has for a child</li> <li>○ providing care to other persons for whom the carer provides care</li> <li>○ maintaining a habitable home environment</li> <li>○ managing and maintaining nutrition</li> <li>○ developing and maintaining family or other significant personal relationships</li> <li>○ accessing and engaging in work, training, education or volunteering</li> <li>○ making use of necessary facilities or services in the local community including recreational facilities or services</li> <li>○ engaging in recreational activities</li> </ul> </li> <li>• control by the individual over day-to-day life (including over care and support provided and the way it is provided)</li> <li>• participation in work, education, training or recreation</li> <li>• social and economic wellbeing</li> <li>• domestic, family and personal relationships</li> <li>• suitability of living accommodation</li> <li>• the individual's contribution to society</li> </ul>
<p><b>Step 3 – Impact on Wellbeing</b></p> <p>As a consequence, there is or is likely to be a significant impact on the carer's wellbeing, including:</p> <ul style="list-style-type: none"> <li>• personal dignity (including treatment of the individual with respect)</li> <li>• physical and mental health and emotional wellbeing</li> <li>• protection from abuse and neglect</li> </ul>

### 3.4 What happens after the eligibility determination?

When the eligibility determination has been made, the county council will provide the carer with support needs with a copy of their decision.

Where the carer is found to *have no eligible needs*, the county council **must** provide information and advice [LINK] on what can be done to meet or reduce the needs (for example what support might be available in the community to help the carer) and what can be done to prevent or delay the development of needs in the future.

If the carer has some eligible needs, the county council **must**:

- Agree with the carer which of their needs they would like the county council to meet. The person may not wish to have support in relation to all their needs – they may, for example, intend to arrange alternative services themselves to meet some needs. Others may not wish for the county council to meet any of their needs, but approach us only for the purposes of determining eligible needs.
- Consider how the county council may meet those needs. This does not replace or pre-empt the care and support planning process [LINK], but is an early consideration of the potential support options, in order to determine whether some of those may be services for which the county council makes a charge. Where that is the case, the county council must carry out a financial assessment [LINK] however, the county council has agreed to waive its powers to financially assess and/or impose charges on carers (please see Policy for Undertaking Assessments and Providing Support for Carers in Lancashire [LINK TO cabinet paper January 2015]).
- Establish whether the carer meets the ordinary residence [LINK] requirement. This applies differently for adults with care and support needs and for carers. In the case of the adult, they must be ordinarily resident in the county council's area. In the case of the carer, the person for whom they care must be ordinarily resident in the county council's area. This is because carers' needs are met by local authorities where the adult with the needs for care and support lives, not the authority where the carer lives. Determining ordinary residence at this stage should not lead to a delay in meeting eligible needs. See the PPG document on Ordinary Residence for more information [LINK].

Following the eligibility determination, if eligible, the carer will receive a personal budget as part of their support plan. It is an important tool that gives people clear information regarding the money that has been allocated to meet the needs identified in their assessment and recorded in their plan.

The county council will share an indicative budget with the carer at the start of the support planning process to help the carer develop the plan and make appropriate choices over how their needs are met, with the final amount of the budget confirmed through this process. The detail of how the budget will be used must be set out in the plan.

The county council will ensure that the personal budget is always a sufficient amount to meet the carer's support needs. The final annual carer budget must only be for the cost of the remaining unmet needs that cannot be met by universal preventative services, such as information and advice [LINK], and/or care and support that is, or will be provided, to the person that they care for, such as respite.

The county council has a consistent method for calculating carer budgets that provides an early indication of the appropriate amount to meet the identified needs at the beginning of the support planning process.

#### 4. CASE STUDIES

These case studies demonstrate examples of how eligibility determinations may be made. The purpose of these case studies is to illustrate eligibility on the basis of significant impact on wellbeing where the carer has needs caused by providing necessary care. Significant impact on wellbeing is personal, so although two people are in similar circumstances, the impact on their wellbeing is different.

##### Case Study 1: Deirdre (not eligible)

###### Step 1 - Needs

Deirdre is 58 and has caring responsibilities for her neighbour with COPD. Deirdre has been coping with her caring responsibilities for 6 years, which include checking in on her neighbour, doing her shopping and cleaning and helping her with the cooking every other day.

Deirdre works 20 hours a week at the local school and she is also helping her daughter by picking up her grandchild after school. Deirdre's son is concerned that she is taking on too much and notices that she is tired. Deirdre's son persuades her to ask the local authority for a carer's assessment.

###### Step 2 – Outcomes

Deirdre enjoys the variety that her working life and caring role provide. She would like to be able to spend more time with her grandchild in the afternoons but recognises that there is a balance between doing this and caring for her neighbour. Deirdre's needs impact on the following outcomes:

- carrying out caring responsibilities the carer has for a child
- engaging in recreational activities

###### Step 3 - Impact on wellbeing

Deirdre's needs are impacting on a few outcomes: Deirdre enjoys her caring responsibility for her grandchild and would like more free time. On the other hand, her caring roles are fulfilling so although Deirdre is tired at the end of the day, her local council does not think her wellbeing is significantly affected.

###### Decision: Not Eligible

The local authority decides that Deirdre is not eligible because her wellbeing is not significantly affected.

**Next actions:** The local authority recognises that Deirdre could do with some advice to help her manage her day so that she can find some time for herself and so she does not get tired. They advise on how she may reduce some of her tasks such as sitting down with her neighbour to order their food shopping online rather than carrying them home. They make contact with a local carers organisation and the local authority makes sure Deirdre is able to access it. The organisation is able to provide additional advice.

### **Case Study 2: Sam (eligible)**

#### **Step 1 - Needs**

Sam is 38 and cares for his mother who has early-stage dementia. Sam's mother has telecare [LINK], but he still checks in on her daily, and does her shopping, cooking and laundry. Sam is a divorced father of two children, who live with him every other week. Sam works fulltime in an IT company and has come forward for an assessment as he is starting to feel unable to cope with his various responsibilities in the weeks when he looks after his children. Sam has made an arrangement with his employer that he can work longer hours on the weeks when the children are with their mother and fewer when he has the children.

#### **Step 2 - Outcomes**

Sam wants to spend more time with his children and, for instance, to be able to free up an hour in the afternoon to help them with their homework so it doesn't have to be done in the evening when the children are tired. Sam's needs impact on the following outcomes:

- carrying out caring responsibilities the carer has for a child
- engaging in recreational activities

#### **Step 3 - Impact on wellbeing**

Sam's responsibilities impact on a few important outcomes. Sam is starting to feel like he is failing as a parent and it affects the relationship he has with his children, his ex-wife, and his mother. He also worries that his ability to stay in work would be in jeopardy unless he receives support. Sam seems quite stressed and anxious.

#### **Decision: Eligible**

The local authority decides that Sam's fluctuating needs are eligible for support, because it perceives that they have a significant impact on his wellbeing. If the local authority supports Sam to maintain his current role, everyone is better off, because Sam can stay in employment, sustain his family relationships and provide security for his mother.

**Next actions:** The local authority gives Sam a direct payment [LINK] which he uses to pay for a care worker to come in for three days every other week to check on his mother and make her a meal. This gives Sam more time to spend with his children, doing homework with them and spending some more relaxed time with them.

The local authority directs Sam to a carers organisation which provides Sam with information about his rights at work and how to speak to his employers.

The following examples demonstrate how a carers budget can be spent:

**Example 1: Conor**

Conor has been caring for his wife, who is in a wheelchair with ME and arthritis, for the last 9 years. He does all the cooking, driving and general household duties for their household. Conor received a personal budget which he requested in the form of a direct payment from his local authority for a laptop to enable him to be in more regular contact through Skype with family in the US. This now enables Conor to stay connected with family he cannot afford to fly and see. This family support helps Connor with his ongoing caring role.

**Example 2: Divya**

Divya has 4 young children and provides care for her father who is nearing the end of his life. Her father receives a direct payment, which he used to pay a family member for a period of time to give his daughter a break from her caring role. Divya received a carers' direct payment, which she uses for her children to attend summer play schemes so that she get some free time to meet with friends and socialise when the family member provides care to her father. This gives Divya regular breaks from caring which are important to the family unit.

## 5. DOCUMENT HISTORY

RELATED DOCUMENTS	
OTHER RELATED PPG DOCUMENTS	<ul style="list-style-type: none"> <li>• Carers' Assessments</li> <li>• Eligibility Criteria</li> <li>• Assessment of Needs</li> <li>• Continuity of Care</li> <li>• Ordinary Residence</li> <li>• Wellbeing</li> <li>• Information &amp; Advice</li> <li>• Care &amp; Support Planning</li> <li>• Financial Assessment and Charging Policy</li> <li>• Direct Payments</li> <li>• Telecare</li> <li>• Respite</li> </ul> <p><b>NB. Links will be inserted as policies are approved and published online.</b></p>
LEGISLATION OR OTHER STATUTORY REGULATIONS	<ul style="list-style-type: none"> <li>• <a href="#">The Care and Support (Eligibility Criteria) Regulations 2015</a></li> <li>• The Care Act 2014 - Part 1 Assessing Needs Section 13</li> <li>• Chapter 1 Promoting Wellbeing Care Act Statutory Guidance</li> <li>• Chapter 6 Assessment and Eligibility Statutory Guidance</li> <li>• Chapter 19 Ordinary residence Statutory Guidance</li> <li>• Chapter 20 Continuity of care Statutory Guidance</li> </ul>