

Social Work Eligibility Criteria and Standard Delivery Timescales Community Care Services

1. INTRODUCTION

- 1.1 In common with many other Social Work Departments across Scotland, Dundee City Council, introduced a prioritisation framework to guide the allocation of resources to those in the greatest need, a number of years ago. This guidance has now been revised in recognition of the new "National Eligibility Criteria and Waiting Times for The Personal and Nursing Care of Older People" issued jointly by the Scottish Government and COSLA on 28th September 2009.
- 1.2 Dundee City Council has also decided to apply the new eligibility framework to all community care groups and not solely to the management of older people's care.
- 1.3 The need for a prioritisation framework was and continues to be a direct response to the increasing gap between assessed need and available resources. There are many reasons why this is an increasing issue for Dundee City Council:
 - The impact of demographic change, such as increase in the population of older people and reduction in the number of younger people living in the City
 - Changes in health care which mean, for example, that many more frail, older people are discharged from hospital with high presenting care needs and many children with significant disabilities are not only surviving infancy where they may not previously have done so, but can expect to live with those conditions throughout adulthood
 - The impact of societal changes such as parental drug and or alcohol misuse
 - Rising public expectations and demand for highly personalised services
 - Pressure on core services.
- 1.4 This prioritisation framework reflects the Council's wish to allocate resources on an equitable basis. This in turn is consistent with the wish of the Scottish Government to see a standardised approach to service eligibility across Scotland.
- 1.5 Dundee City Council's capacity to meet need is and will not be an absolute position. It will vary according to the amount of available resources at any one time, weighed against the amount and type of presenting need. Individual needs change over time and judgements about meeting need are, therefore, made in a constantly changing context. In order to create and deliver the correct balance of service, care and consideration must be applied to ensure that by providing services we are not creating dependencies. For example, an individual's assessed needs may call for the provision of a certain level of services following discharge from hospital, but a different level of service once they are re-established in their own homes. Continual and

effective review arrangements are crucial to good effective management and deployment of resources.

- 1.6 It is also important to recognise that some service delivery interventions are driven by other imperatives, such as statutory responsibilities to a Court Order or an Adult Support and Protection hearing, or local policy decisions to attach resources to designated areas of activity.
- 1.7 This guidance, as previously noted, is not specific to any single care group. It also acknowledges that where the risk element of the assessment of need applies to the independence or safety of the person concerned, that this is more likely to refer to people with community care needs.

2. PRINCIPLE OF INTENSITY OF RISK AND GREATEST NEED

- 2.1 The Council's approach to prioritisation is that access to resources should be determined on the basis of comparative intensity of risk and greatest need and not on any other basis, such as, length of waiting time for services. This is consistent with the National Standards noted in the introduction.
- 2.2 The new guidance establishes 5 categories of risk and they are as follows:
 - Critical Risk
 - Substantial Risk
 - Moderate Risk
 - Low Risk, and
 - No Risk.

It is also important to recognise that risks can be associated with a number of different aspects of life including the following:

- risks relating to neglect or physical or mental health
- risks relating to personal care/domestic routines/home environment
- risks relating to participation in the community life
- risks relating to carers.

For the purposes of this guidance the following definitions have been used to help clarify the 5 categories of risk which have been adopted by the Council:

2.3 Critical Risk (Highest Priority and Greatest Need)

People assessed to be within this category are those who will require the immediate or imminent provision of social care service/s. (refer to point 2.9 for timescale definitions) Without intervention there is a major risks to either or both the individual and their Carer's independence or to their health and wellbeing.

These individuals' will require this immediacy of response because they will be or have for example:

- a major or acute health problem/s which cause life threatening harm or danger to themselves, but not necessarily requiring hospitalisation
- at major risk of serious abuse or neglect including financial abuse and discrimination either having taken place or being strongly suspected. (individual may need protective intervention)

- unable to do manage most vital aspects of personal care
- unable to do the most vital or most aspects of domestic routines
- unable to sustain vital aspects of work/education/learning
- unable to sustain their involvement in vital or most aspects of family life/roles and responsibilities
- unable to sustain their involvement in vital or most aspects of social roles and contacts
- a Carer of major risk of not being able to continue to provide crucial care and support because of their own major physical/mental health difficulties as a result of their caring role.
- at major risk of becoming unnecessarily delayed in hospital waiting on services

For older people who have an assessed need for Personal and Nursing Care Services there should be a standard maximum waiting time of 6 weeks (42 calendar days). Adults under 65 years are also entitled to this.

2.4 **Substantial risk (High Priority but not the highest)**

People assessed to be within this category are those whose needs are marginally less than those in the Highest Priority group. The main difference is rather subtle, in that the impact of the non provision of social care services would result in a significant risk as opposed to major risk to either or both the individual or their Carer's independence or to their health and wellbeing. Again, similar to the above, people in this category may also require the immediate or imminent provision of social care service/s.

These individuals' will be or have for example:

- a significant health problem/s which cause life threatening harm or danger to themselves, but will not necessarily require hospitalisation
- at significant risk of serious abuse or neglect including financial abuse and discrimination either having taken place or being strongly suspected. (individual may need protective intervention)
- unable to carry out many aspects of personal care
- unable to carry out many aspects of domestic routines
- unable to sustain their involvement in many aspects of family life/roles and responsibilities
- unable to sustain their involvement in many aspects of social roles and contacts
- a Carer who is in significant risk of being unable to continue to provide care and support because of their own significant physical/mental health difficulties as a result of their caring role.
- a significant risk of breakdown in the relationship between the individual and their Carer.
- at risk of becoming unnecessarily delayed in hospital waiting on services

2.5 **Moderate Risk (Medium/Preventative Priority)**

People assessed as being within this category are those whose needs present some risks to the individual or their Carer's independence or health and well being. These may call for the provision of some social care services, managed and prioritised on an ongoing basis or they may simply be manageable over the foreseeable future without service but with appropriate arrangements for review.

These individuals' will be or have for example:

- some health problems indicating some risk to independence, but with potential to maintain independence with minimum intervention
- a Vulnerable person where there is a need to raise awareness of the potential risk of abuse. Individual has capacity.
- unable to do vital or some aspects of personal care
- able to manage some domestic activities
- able to manage some aspects of home environment
- unable to manage several aspects of involvement in work/education/learning
- able to manage some aspects of family roles and responsibility
- able to manage some aspects of social roles and contacts
- a Carer who is unable to manage some aspects of the caring/family /domestic/social roles
- relationship maintained, although at times under strain, between service user and carer.

2.6 **Low Risk (Low/Preventative Priority)**

People within this category are those whose assessment of need indicate that there may be some quality of life issues, but a low risk to either the individual or their carer's independence, health and well being. The requirement for the provision of social care services, if any, will be very limited. There may be some need for alternative support or advice. However, arrangements must be made to review and monitor any change in order to plan for the foreseeable future or longer term.

The risks these individuals' have are unlikely to cause major harm of danger to either themselves or others. These individuals' will be or have for example:

- few health problems indicating low risk to independence with the potential to maintain health with minimum intervention - self managed care
- preventative measures including reminders to minimise potential risk of abuse.
- difficulty with one or two aspects of personal care
- able to manage most aspects of basic domestic activities
- able to manage most aspects of home environment
- has difficulty in undertaking one or two aspects of work/education/learning
- able to manage most aspects of family roles and responsibility
- able to manage most aspects of social roles and contacts
- the Carer has difficulty with one or two aspects of their caring/domestic role
- relationship maintained by limiting some aspects of the caring role

2.7 **No Priority (No Risk)**

People within this category are those whose assessment of needs indicates there are no risks identified to independence or health and well being. No further advice, action, information, or services require to be arranged or facilitated. However, referral may be made to other services (eg NHS, Voluntary Organisations, community groups)

2.8 **Using the Framework**

Using these categories will help to support the fair allocation of resources in order that more significant needs, by definition, will receive priority over less significant needs.

The framework recognises that it is the need and not the person that is categorised by priority. In other words, a person may have a mixture of high and low priority needs, but not all needs would necessarily be met straight away. It also recognises that by providing a specific intervention to meet a significant need may in turn have a sort of domino effect, as by addressing one particular need, the intensity of risks in the other assessed areas may change.

Although not explicit it is important to note that preventative approaches such as self managed care arrangements/support can help limit the potential needs for service. Again, it is crucial that there are continual and effective review arrangements to support the management and allocation of resources.

2.9 **Timescales**

Linked to the category of intensity of risks the guidance also sets out four sets of timescales by which services should be in place. These are as follows:

- Immediate - required now or within approximately 1-2 weeks
- Imminent - required within 6 weeks
- Foreseeable Future - required within the next 6 months
- Longer Term - required within the next 12 months or subsequently.

3.0 **Flowchart**

The following flowchart illustrates how the intensity of risk and access to care services is determined using the Standard Eligibility Criteria.

Flowchart



