

# Carer Contact and Assessment Practice Guidance

## Carer right to an assessment

### People Caring for an Adult

A carer (aged 16 or over) has a right to an assessment under the Carers and Disabled Children Act 2000 when:

- ◆ They are providing or intend to provide a substantial amount of care on a regular basis to the person they care for and that person is aged 18 years or over, and
- ◆ Where the council is satisfied that the person cared for is someone for whom it may provide or arrange for the provision of community care services.

This right exists even when the person cared for has refused an assessment or has refused the delivery of community care services following assessment.

**Note: All substantial and regular carers should have access to an assessment. (Anyone who is providing care under contract of employment is excluded.)**

### People with Parental Responsibility Caring for a Disabled Child

- ◆ People with parental responsibility for a disabled child have a right to an assessment under the Carers and Disabled Children Act 2000 when they are providing or intend to provide a substantial amount of care on a regular basis for the child.
- ◆ The local council must take that assessment into account when deciding what services, if any, to provide under S17 of the Children Act 1989.
- ◆ The assessment should be conducted in accordance with the guidance for the National Framework for Assessment.

**Note: All substantial and regular carers should have access to an assessment. (Anyone who is providing care under contract of employment is excluded.)**

How a 'substantial' amount of care is defined will vary according to each individual, their circumstances and their ability to cope with their situation and that of the cared for person. This will need to be determined in relation to such things as time, emotional health, personal care or disruptive behaviour which may require intervention but not hands on care.

## Key Practice Principles

This guidance needs to be read alongside the Differentiated Approach to Care Management Policy, CPA policies (to be revised) and the guidance notes for use of the Devon's National Framework for Assessment documentation.

In addition, Carer Contacts and Assessments must:

- ◆ Listen to carers, value their experience, start with the important issues for them.
- ◆ Focus on the carer's ability to care and to continue caring. It should not assume a carer's willingness to continue to care or to provide the same level of care.
- ◆ Take account of the amount of support available to the carer and who else they may have caring responsibilities for.
- ◆ Recognise that the views of carers and service users may be distinct.
- ◆ Identify what outcomes the carer thinks are important to support them.

## **Outcomes for the carer**

Contacts will either result in the provision of information and advice to the carer or an agreement that an assessment of need is required.

Note: There may be other support groups, information or advice which will be more appropriate or timely for the carer's circumstances. This should be discussed and agreed with them.

Where an assessment is completed the outcomes will be determined by eligibility criteria. The outcomes include:

- ◆ Advice and information including services that the carer can access directly.
- ◆ A change to the service user's care plan, for example, additional breaks.
- ◆ The provision of services direct to the carer.

## **Data Protection Act**

A carer must always be advised of the arrangements for the storage and sharing of information about them, and where more information about this may be obtained.

## **Making Contact**

Where the person cared for has received a recent assessment / review from Social Services, or is in receipt of community care services, they will already have been asked some questions about the people who help to support them. A carer assessment will have been offered and any details recorded on the Assessment / Review form or Care Plan of the person cared for.

Where the cared for person has not had a recent assessment or review and / or has declined one, or the person cared for is not known to Social Services, or does not wish to be identified, the first contact can be made in the following ways:

- ◆ In person, by visit or telephone to the local Social Services office. A Carer Contact Form should be completed, which will outline the care being given, reasons for contacting Social Services, and set out any further actions required.
- ◆ By a G.P or other professional, who can complete Part 1 of a Carer Contact Form and forward it to Social Services on behalf of a carer. The carer should then be contacted in order to discuss their reasons for contacting Social Services, and agree any further actions which may be appropriate.

## The Carer Contact Form (SS91)

The Carer Contact Form is used to gather basic information and determine what further action(s) may be appropriate for a carer's situation, which may include a carer assessment. It must record enough information about the health and situation of the carer and the cared for person and their situation (with their agreement), to determine if the carer is eligible for an assessment and make a decision about what level of care is being provided. The form is divided into four sections:

### Part 1 Carer Details

This section details the basic information about the carer:

- ◆ Core details. All this information is required for input to the system.

### Part 2 Contact details

Some direct questions must be asked about the person cared for as set out on the form:

- ◆ Has the carer discussed this contact with the cared for person.
- ◆ Is the cared for person happy to be identified and for their personal information to be shared.
- ◆ If they are not aware, or not happy to be identified, then their details, including name, must not be taken or recorded.

As this may limit the support or service options available to a carer it is important that this is discussed fully with them. This may include:

- ◆ Talking through with the carer the appropriateness of talking to the person cared for.
- ◆ Ascertaining the views of the carer's GP about whether they meet the substantial and regular requirements.

The carer's reasons for contacting Social Services should be discussed to determine what the impact of caring for someone has on their life. Consideration should be given to:

- ◆ A carer's age, health and normal daily routines. These may include other family commitments, including any present crisis which may affect the ability to provide, or continue to provide care.
- ◆ Whether the carer either provides care for anyone else or receives any other help or support in their caring role.
- ◆ Whether there have been any changes in the carer or person cared for situation, behaviour or how they look after themselves.
- ◆ If the carer carries out any tasks for which they do not feel fully trained or informed such as, moving and handling.
- ◆ The ability or desire to continue to provide care, and at what level.

### **Part 3 Contact check**

This will consist of some brief questions to ensure that a carer has all the basic information they may need about benefits, training or support groups, and to help to clarify what should happen next.

### **Part 4 Action taken**

Not all contacts will result in a carer assessment being undertaken. Sometimes another agency will be able to best provide the kind of help required, and Social Services can help a carer to make contact with them.

Where the outcome of the contact is the need for a carer assessment the guidance set out below must be followed.

Note any differences of opinion regarding the actions to be taken.

## **What is the carer assessment for?**

The carers' assessment is carried out at the request of the carer in order to:

- ◆ Determine what outcomes the carer feels would help them to continue in the caring role and to maintain their own health and wellbeing.
- ◆ Determine whether the carer is eligible for support either from Social Services or other service providers.

## **When to use the Carer Assessment form**

Carers should be asked whether they want an assessment of their needs and if so, whether they want this undertaken jointly with the person they care for or separately. Discussion should take place with the carer about which assessment approach will assist the identification of their needs. Complex situations will normally require separate assessments.

For separate assessments, the Carer Assessment form (SS9) should be used.

For joint assessments:

(People caring for an Adult, including young carers) the care management/CPA assessment forms should be used.

(People with Parental Responsibility Caring for a Disabled Child) the SS(C)6 forms should be used, with the needs of parent/carers being recorded under the 'Parenting Capacity' columns.

## Preparing for the assessment

Wherever possible the allocated worker should discuss the following points with the carer before commencing the assessment:

- ◆ The scope of the assessment, including how it can be undertaken and how decisions are made about outcomes.
- ◆ The venue for the assessment. The carer's own home may not be the preferred setting.
- ◆ The carer's preference regarding the assessment worker; the same worker as the person they care for or someone new to the situation.
- ◆ The time they need to prepare for the assessment in advance including whether they would like someone else present at the assessment.

## Who can assess?

Local Authorities have a duty to carry out carer assessments. This duty may be delegated to other agency staff where there is a protocol/contract in place for this and they are competent to do so. In many situations other agency staff may be better placed to carry out the carer assessment (see also the keyworker protocols for children with special needs, where appropriate).

Where carers self assess, there must always be an assigned worker to support carers in the assessment process.

## Confidentiality

Confidential information given in the contact or assessment may not be shared with the service user, the child or young person without the carer's permission to do so. The carer must receive a written copy of their assessment unless they ask not to. The reason for this must be recorded.

The carer must be made aware that information may be shared with other agencies working with social services to meet any agreed needs unless they ask for it not to

be. They should be informed of any consequences of non-disclosure on the proposed care plan.

## The Carer Assessment Form (SS9)

### How to use the form

The form provides a framework for co-ordinating and recording the assessment process and can be used in one of three ways:

- ◆ Send to the carer for them to prepare for a meeting with the allocated worker. The worker must still discuss with the carer their responses.
- ◆ Send to the carer for them to prepare for telephone contact by the allocated worker.

#### **Note: The worker will need to check if:**

- the carer was unable to answer any sections
- there is a need for a face to face discussion in relation to specific points
- For the assigned worker to take to a meeting to complete with the carer.

**Note: Best practice suggests that for complex situations self assessment cannot replace face to face assessment with a sensitive, well informed practitioner.**

### Pointers to the completion of the Carer Assessment

The detail recorded should reflect the complexity of the situation, be sufficient to understand the carer's needs and assist decisions about outcomes. The need for specialist contributions should be considered.

The first part of the form focuses on the carer's situation and the second part on their role in relation to the person cared for. The need categories should be used to facilitate discussion with the carer about their circumstances and to clarify any points relating to fluctuations, risks and routines.

The comments section may be used to record factors arising from culture, ethnicity, language, faith, sexuality, gender, complex needs and differences of view.

Assessment of risks should be incorporated into the form using the framework set out in the Risk Assessment and Management of Individual Service User Situations (RAMISUS) policy and other related specialist risk assessments defined in RAMISUS.

**Note: Not all need areas will be appropriate to all carers.**

An Assessment process Form (SS1(P)) must be completed to capture the Outcome of a Carer Assessment Event, and move to any subsequent Monitoring Event and Review Activity.

## **Summary of the assessment and the Care Plan/Carer's Plan**

### **People Caring for an Adult**

Where both the service user and carer have received assessments, the outcome of the carer assessment will normally be incorporated into a joint summary. Where the service user/carers has been assessed as eligible for community care services, the carers outcomes should be incorporated into the service user's care plan unless there are confidentiality/protection/major unresolved issues or the person is subject of enhanced Care Programme Approach(CPA) (see below). In these circumstances the Carer Plan (SS9a) may be used.

Where the service user/carers is assessed as not being eligible for community care services, the outcome must be recorded on the assessment forms including information given and contingency arrangements.

Where carers receive a carer assessment, and the person cared for does not want an assessment, the outcome of the assessment should be recorded on the carer assessment form. Where ongoing services are being provided for the carer the Carer Plan should be used.

### **People with Parental Responsibility Caring for a Disabled Child**

Where both the service user and carer have received assessments, the outcome of the carer assessment will normally be incorporated into a joint assessment summary and integrated care plan using the form SS(C)6.

In exceptional circumstances, for example, child protection, confidentiality or conflict of interest, the separate Carer Plan (SS9a) may be used.

## **The Carer Register**

Where it has been indicated that information is required about the Carers Register, for people caring for an adult the worker responsible for completing the form must ensure the relevant information leaflet is sent to the carer.

For people with parental responsibility for a disabled child, the register is maintained by the responsible Primary Care Team on the joint agency IT system. The joint agency team Referrals and Information Co-ordinator will send the relevant information to the carer following registration.

## **Mental Health specific standards**

It is a requirement of the National Service Framework (NSF) for Mental Health that all carers who are caring for someone who is subject to enhanced CPA must:

- ◆ Have been offered and, where they want it, have received a carer assessment and care plan by April 2002.
- ◆ Receive a review of their situation at least annually. The details of this should be agreed and recorded at the care plan stage.

## **Direct Payments**

Consideration about the use of Direct Payments for carers must form part of the planning process. Once the carer's needs have been assessed discussion should follow on the most appropriate way to meet those needs. The level and type of control a carer wants over the arrangements for their care and how services are delivered is critical in determining whether the carer wishes to use Direct Payments (reference Direct Payments Policy).

Carers may choose to have Direct Payments to purchase services that will meet their own assessed needs, instead of receiving services provided or arranged by Local Authorities.

Carers may not have a Direct Payment to buy community care services for the adult they care for.

## **Charges (Not Applicable to Parent carers)**

The department of health will shortly issue Fairer Charging policy guidance which may change our approach. The current situation is:

- ◆ Carers may not be charged for services provided to the people they care for.
- ◆ Cared for people may not be charged for services provided to their carers.
- ◆ If both user and carer are being assessed for a charge for their respective community care services, they may choose to be separately or jointly assessed using the current charging policy.