

APPENDIX 3 – WALK THOUGH OF PROCESS FOR ASSESSMENT OF CARE

Listed below is a walk through of the general process for someone requesting support services from adult social care services. It does not describe the full range of statutory and professional functions as these are listed in Appendix 2 but it does provide details of how these functions are discharged and evidenced.

- Council's internet site has information and advice relating to adult social care.
- People may choose to conduct a basic self-assessment online to identify if they may have needs that the council may meet, and a financial self-assessment to ascertain if they may be entitled to funded social care support from the council.
- People may also access a service directory on line to identify potential support, services and activities in their local area.
- A referral for adult social care support can be made by any person online or by telephone to a central advice and duty team who will log the referral electronically on the council's electronic care record.
- Once a referral is received by the team, it will be considered as to whether the referral can be resolved with information and advice or whether a statutory assessment is required. The outcome will be logged on the system.
- When a referral requires a professional response or a statutory assessment is required, the referral is passed electronically to the appropriate team.
- The Team Manager or Advanced Practitioner will allocate the referral to a member of the team electronically, prioritising need and ensuring it is allocated to a team member with the right professional background and skill set.
- The team member receiving the referral will contact the referrer or the person as appropriate and make arrangements to undertake an assessment visit. They will also contact other professionals involved for any supporting information as appropriate.
- At the assessment visit, the team member will explain the purpose of the visit and gather information from the person, their family and their carers. This is documented electronically as an assessment document on the electronic care record.
- The assessment establishes whether the person is eligible, or not, for funded support from the council. It will also establish any needs that can be met independently. The assessment follows the statutory national eligibility criteria to establish eligibility for support.
- The person will be informed of the outcome of their assessment.
- Where eligible needs are identified and these are to be met by the council, the team member will discuss a range of options with the person and their carer or family members as appropriate.
- Policies exist for assessment and support planning arrangements.
- The team member will discuss the financial implication of receiving services with the person, including any charges and arrangements for financial assessment.
- Where funded services are to be arranged by the council, the team member will complete an electronic support plan.
- If the person's needs or support arrangements are complex, there are processes whereby the team member is supported to ensure that the person is receiving the appropriate intervention. This can be regular supervision, support

and guidance from senior colleagues, case panels, multidisciplinary team meetings/reviews, or allocation panels for certain types of support services.

- The support plan will be considered for authorisation at the appropriate level based on delegation rules for expenditure. The authorisation levels are controlled within the electronic care record so that only those with the appropriate level of authority can approve the support plan costs.
- High cost support packages are authorised at Director or Assistant Director level.
- The team member will confirm the care arrangements with the person and will offer a copy of the assessment and approved support plan.
- An electronic process initiates the financial assessment for the persons contribution towards their care costs, and they are informed of the cost of their care. Calculations for charges follow the statutory guidelines.
- Once the care and support package is set up, the person or their family is usually contacted to ensure that arrangements are satisfactory.
- A review of the support plan arrangements is usually undertaken within 6 weeks of the start of the support services, and usually at least every 12 months following that. The review is primarily to ensure that the arrangements are meeting the assessed needs and to ascertain whether the person's needs have changed.
- All stages of the referral, assessment, support planning, and decision making are recorded electronically. Entries on the electronic care record are attributed to the named worker, are dated and can be audited.
- A person, or their representative, may request a review at any time should there be a change in circumstances.