

National eligibility criteria in the new care and support system in England

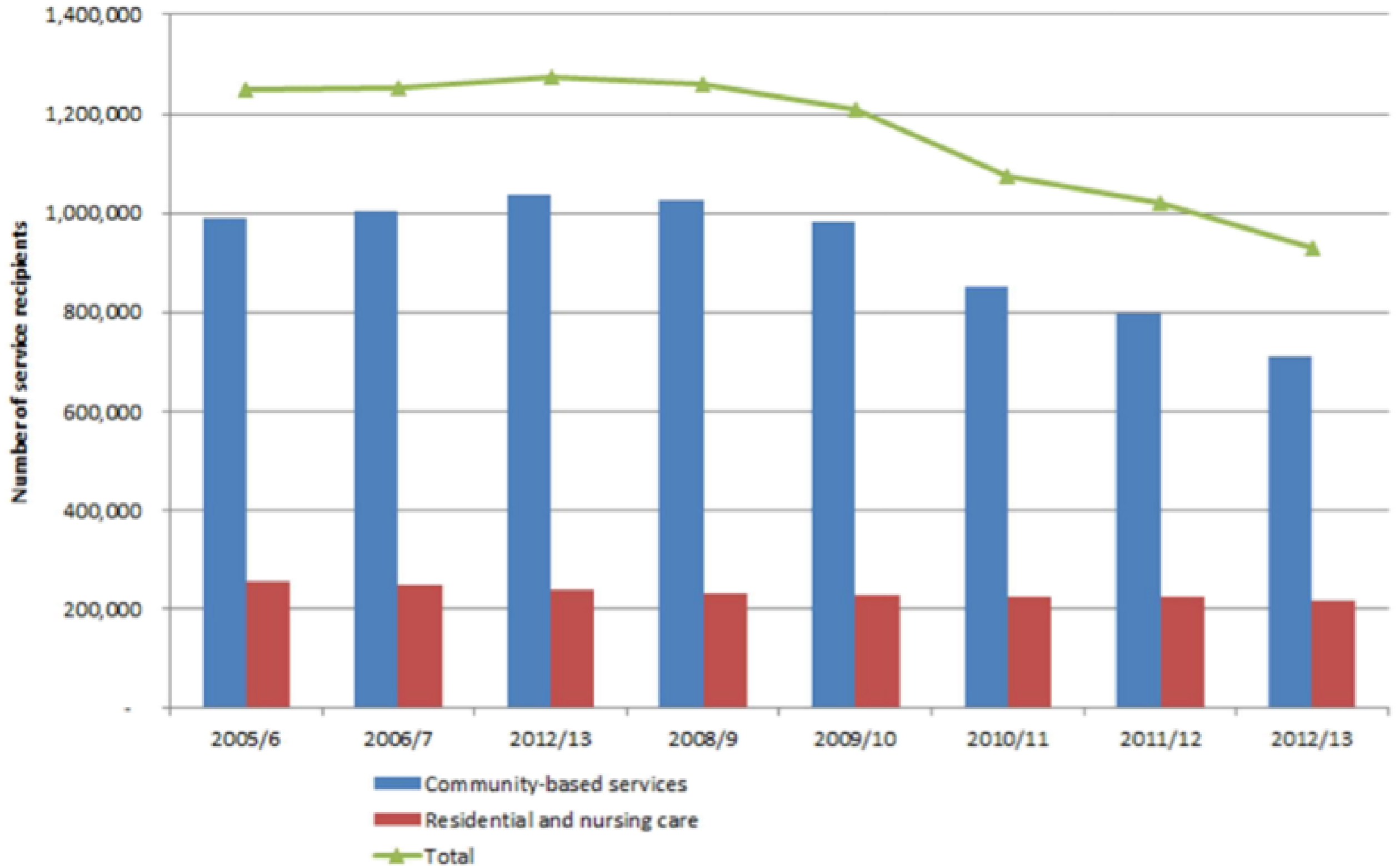
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Aims

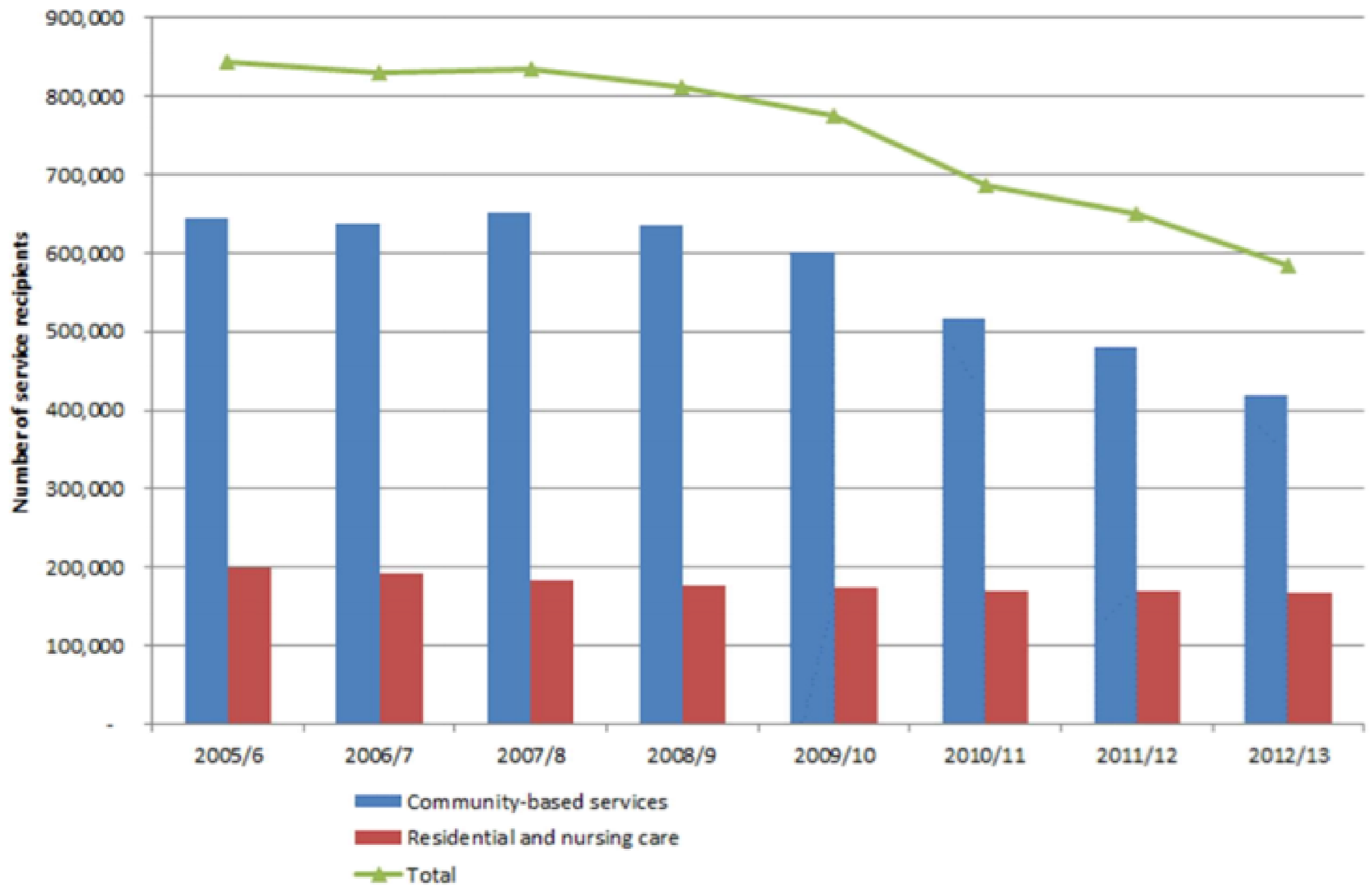
- Brief background about recent developments in social care policy and provision in England
- Evaluation of the process of reform of eligibility to social care in England

recent trends in social care coverage

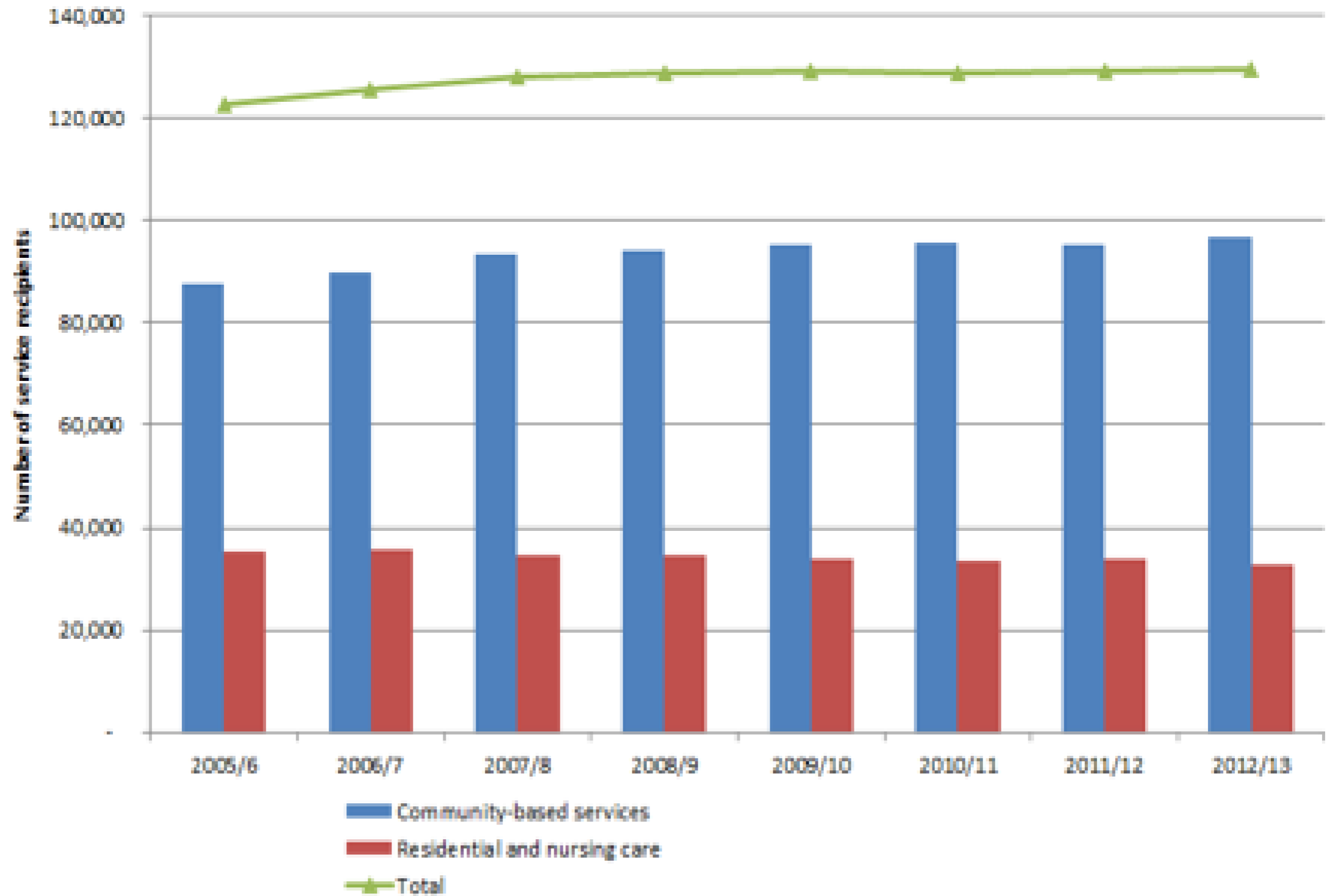
Total service recipients by service type (All client groups)

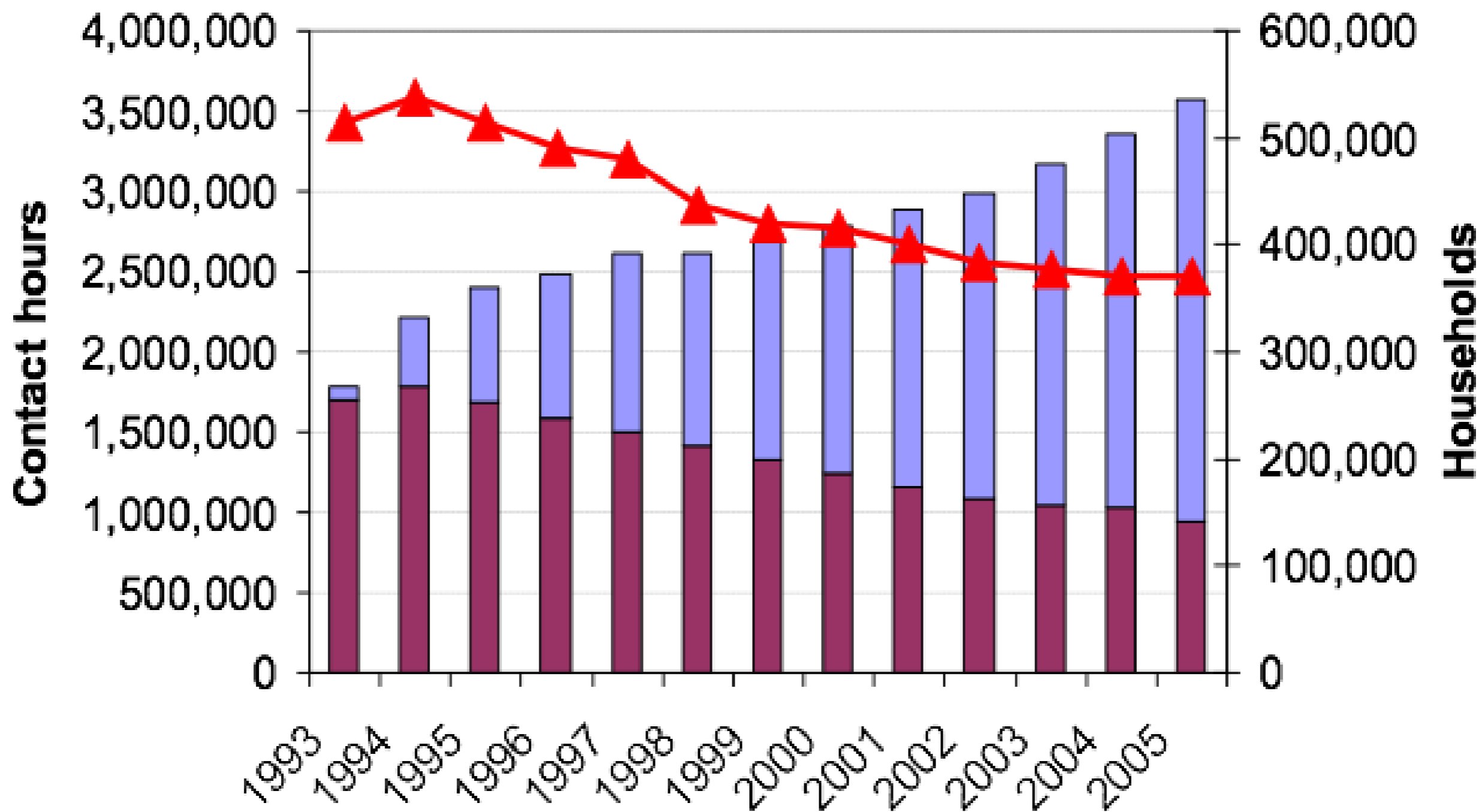


Total service recipients by service type (adults aged 65+)



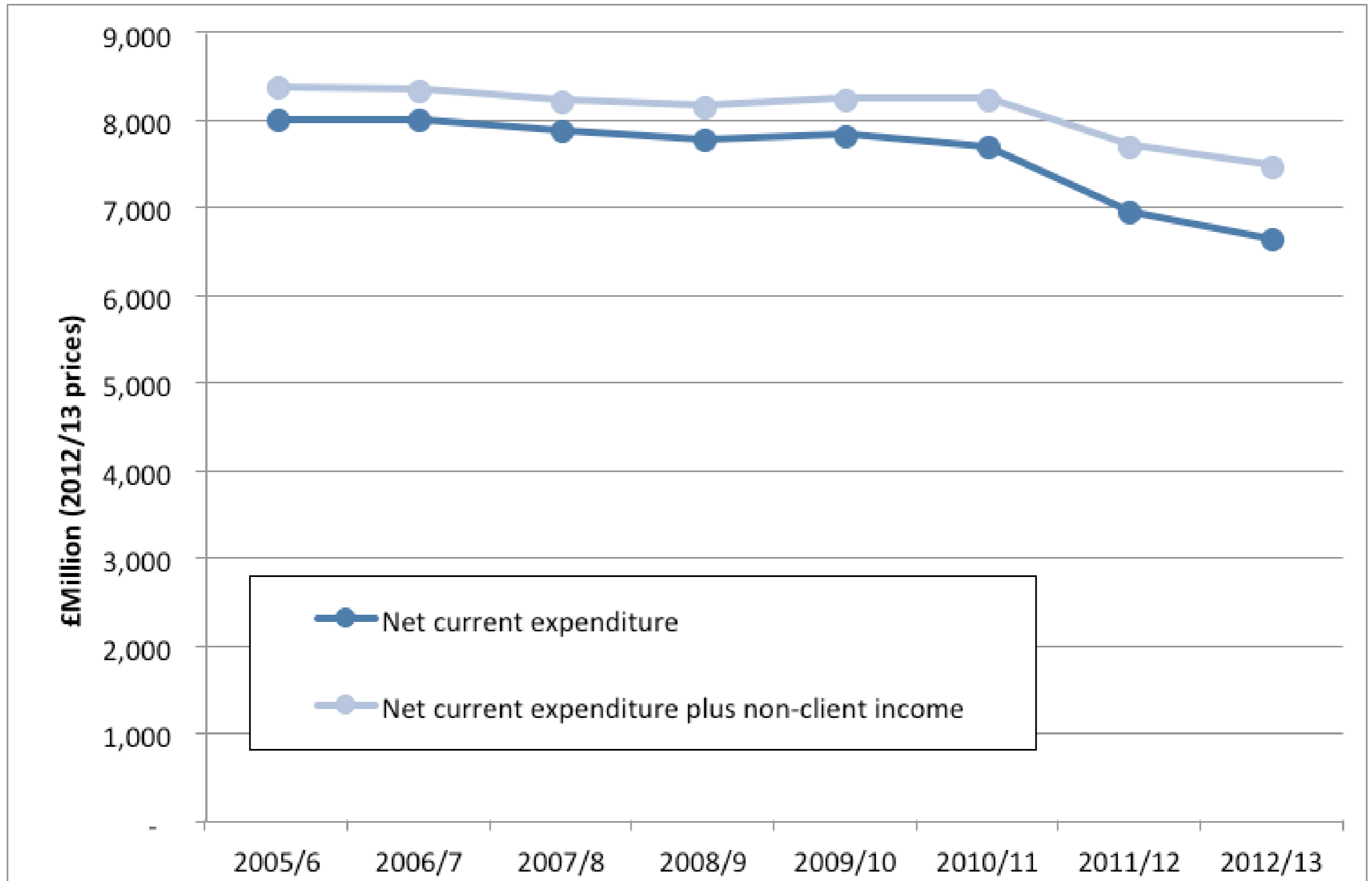
Total service recipients by service type (younger adults with LD)



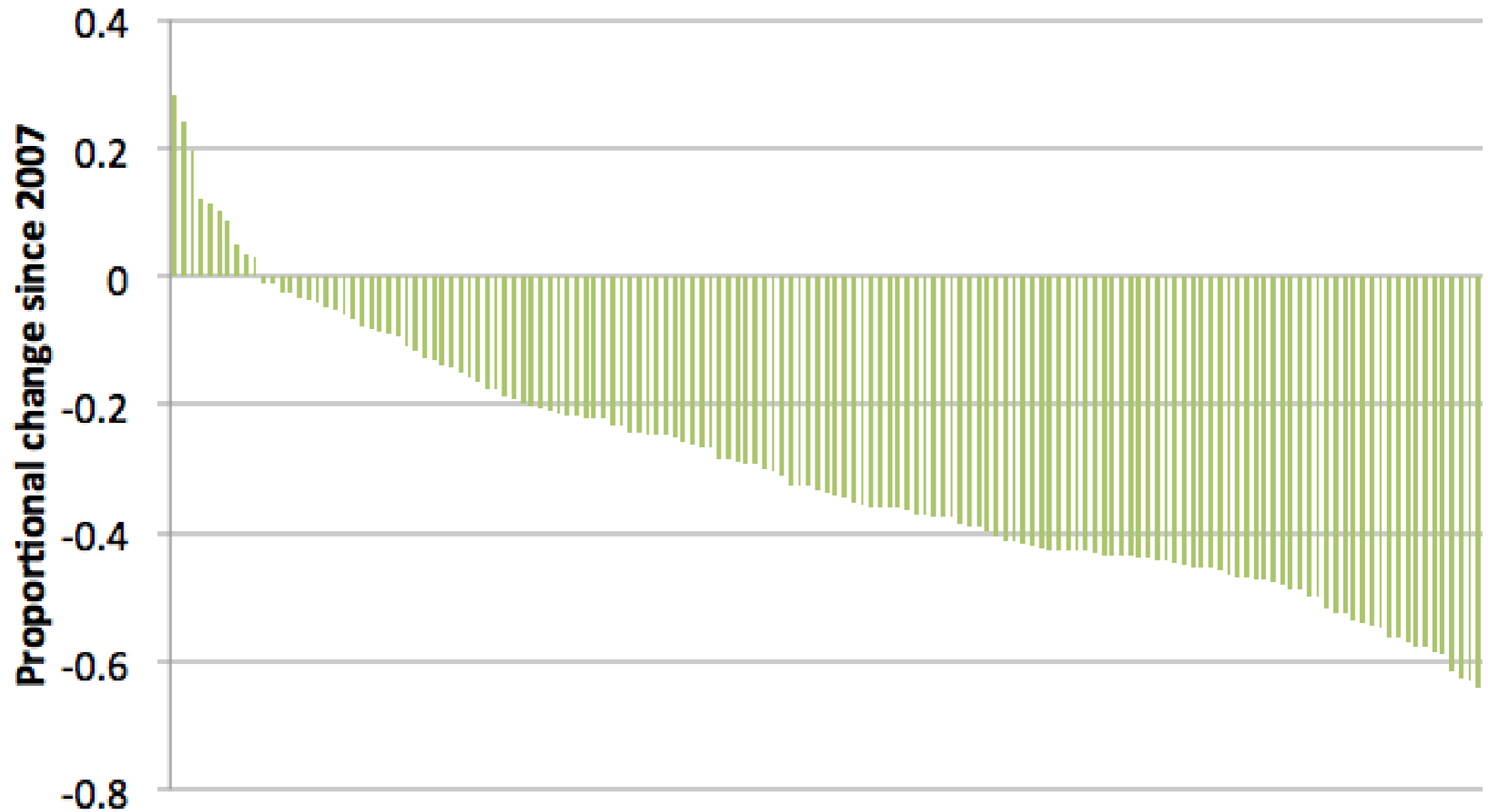


Local authority providers
 Independent sector providers
 Households

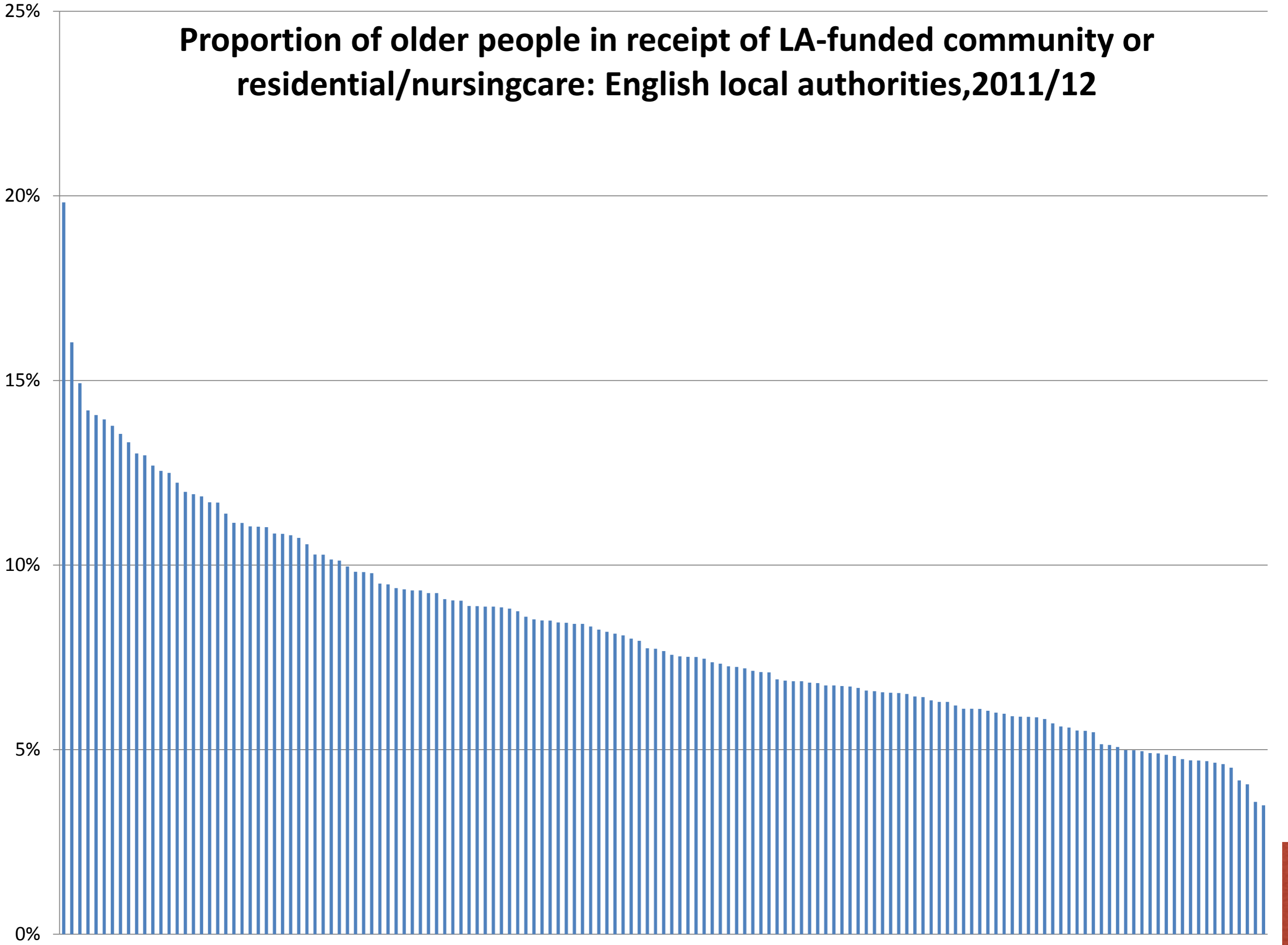
Net current social care expenditure older people



Proportional change in the number of community and residential care users from 2007/8-2012/13: Distribution across English CSSRs (adults aged 65+)



Proportion of older people in receipt of LA-funded community or residential/nursingcare: English local authorities, 2011/12



Need for policy reform?

- Concern about the rate of reductions in eligibility
- Unhappiness about the variability in provision across local areas
- Policy question? How can we achieve a minimum level of coverage across England

The current eligibility framework

- Fair Access to Care
- Local authorities responsible for setting local eligibility thresholds within FACS
- Eligibility criteria set at one of following levels
 - Low needs
 - Moderate needs
 - Substantial needs
 - Critical needs

Critical needs when

- life is, or will be, threatened; and/or
- significant health problems have developed or will develop; and/or
- there is, or will be, little or no choice and control over vital aspects of the immediate environment; and/or
- serious abuse or neglect has occurred or will occur; and/or
- there is, or will be, an inability to carry out vital personal care or domestic routines; and/or
- vital involvement in work, education or learning cannot or will not be sustained; and/or
- vital social support systems and relationships cannot or will not be sustained; and/or
- vital family and other social roles and responsibilities cannot or will not be undertaken.

Substantial – when

- there is, or will be, only partial choice and control over the immediate environment; and/or
- abuse or neglect has occurred or will occur; and/or
- there is, or will be, an inability to carry out the majority of personal care or domestic routines; and/or
- involvement in many aspects of work, education or learning cannot or will not be sustained; and/or
- the majority of social support systems and relationships cannot or will not be sustained; and/or
- the majority of family and other social roles and responsibilities cannot or will not be undertaken.

Moderate needs – when

- there is, or will be, an inability to carry out several personal care or domestic routines; and/or
- involvement in several aspects of work, education or learning cannot or will not be sustained; and/or
- several social support systems and relationships cannot or will not be sustained; and/or
- several family and other social roles and responsibilities cannot or will not be undertaken.

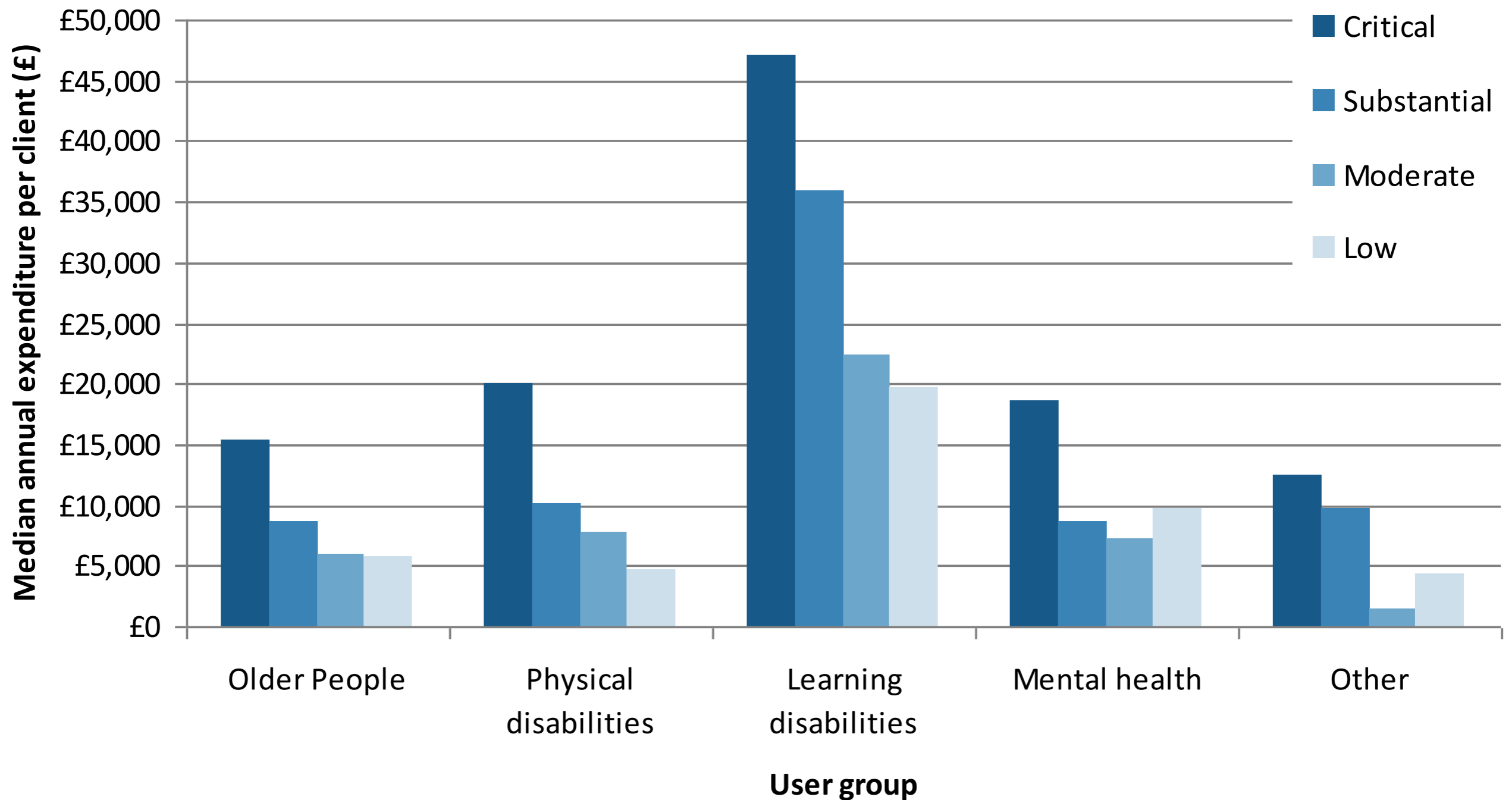
Low needs - when

- there is, or will be, an inability to carry out one or two personal care or domestic routines; and/or
- involvement in one or two aspects of work, education or learning cannot or will not be sustained; and/or
- one or two social support systems and relationships cannot or will not be sustained; and/or
- one or two family and other social roles and responsibilities cannot or will not be undertaken.

The PSSRU eligibility survey

- Part I
 - Identify the allocation of resources across FACS groups
 - Understand the processes used for assessing need and the consistency with which they are implemented
- Part II
 - Identify the relationship between client characteristics, FACS group and eligibility for care

MEDIAN GROSS ANNUAL EXPENDITURE PER CLIENT BY USER AND FACS GROUP



SURVEY PART 2 (Online questionnaire)

- Completed by up to three care managers per user group, per authority (older people, physical disabilities, learning disabilities, mental health)
- Provided 5-6 vignettes per user group, describing combinations of physical needs, informal care support, opportunities to socialise, and risk
- Care managers were asked to estimate
 - The appropriate FACS group for each vignette
 - The likely eligibility for care according to their current eligibility policy

PART 2 (CARE MANAGER) RESPONSES

| | Participated (N) |
|------------------------------|-------------------------|
| Older People | 355 |
| Physical disabilities | 306 |
| Learning disabilities | 189 |
| Mental health | 165 |

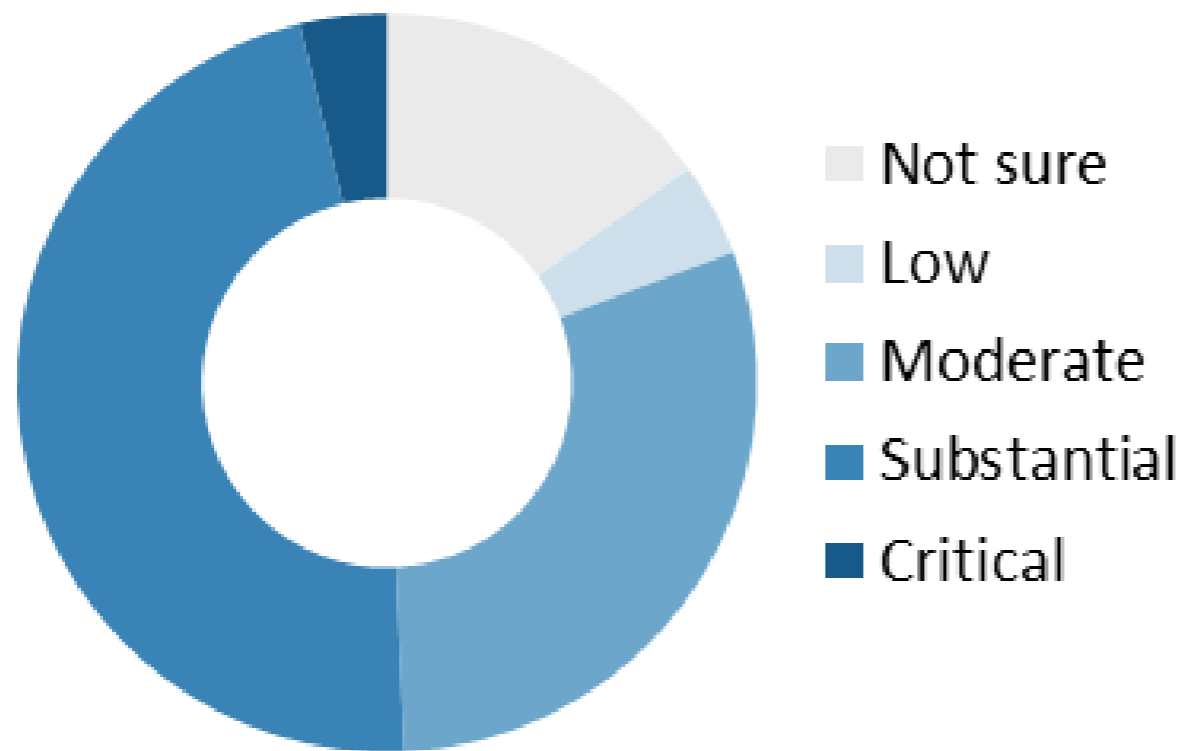
EXAMPLE VIGNETTE (OLDER PEOPLE VIGNETTE 1)

Mrs A, aged 94, lives alone and has recently been discharged from hospital after suffering a fall in the garden. She has a perching stool installed in her bathroom but can no longer bathe without help, and says that she finds it hard getting in and out of bed and going to the toilet although she currently receives no help to do so.

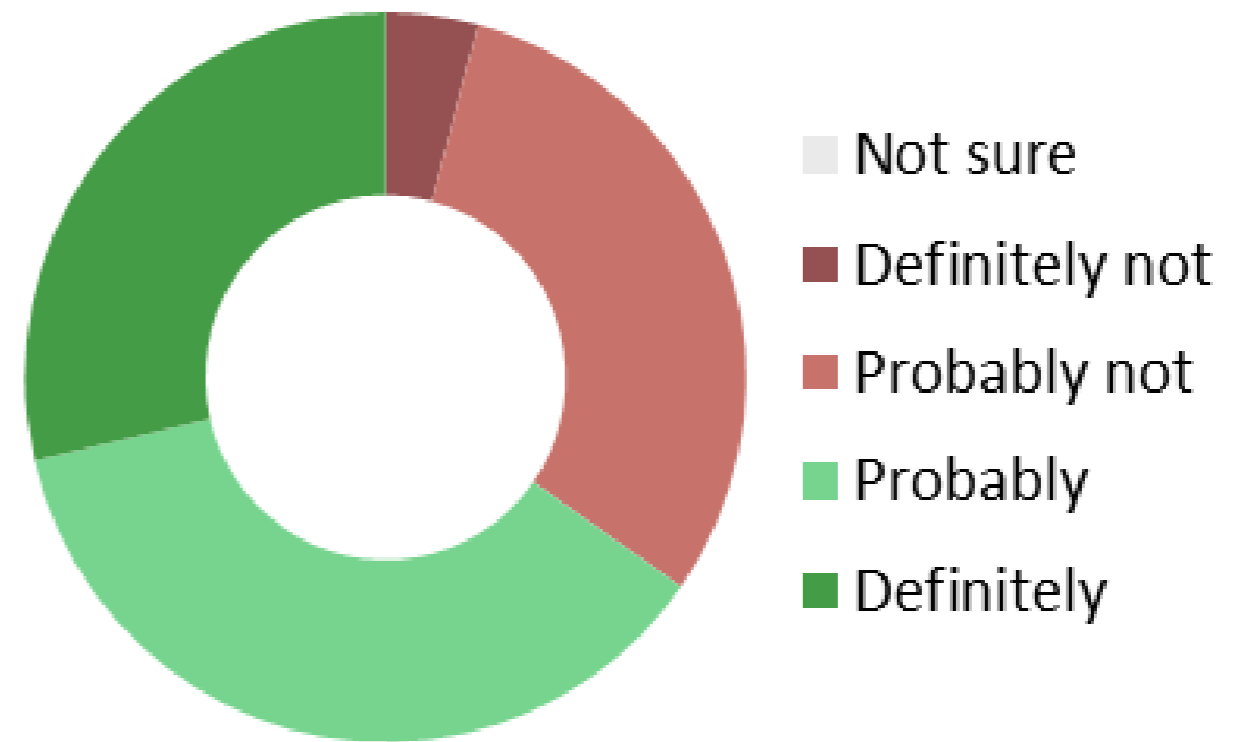
Since Mrs A finds it difficult to walk long distances, a close neighbour has started to help with shopping and comes in every day to check on her, but otherwise she doesn't really get any visitors. She says that she often feels lonely, but has lived in her home since her 40s and doesn't want to move away.

DISTRIBUTION OF RESPONSES TO OLDER PEOPLE VIGNETTE 1

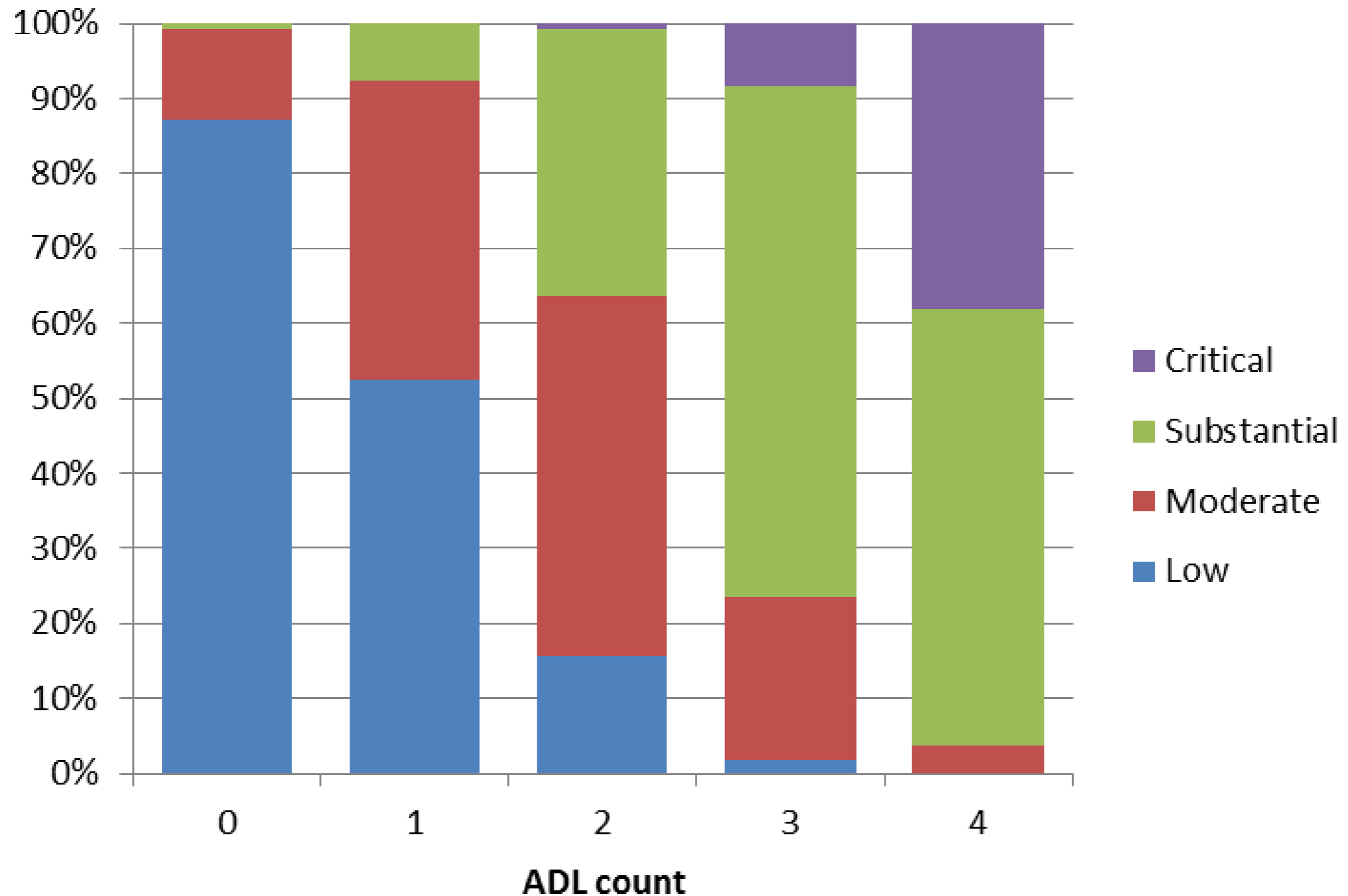
Estimated FACS group



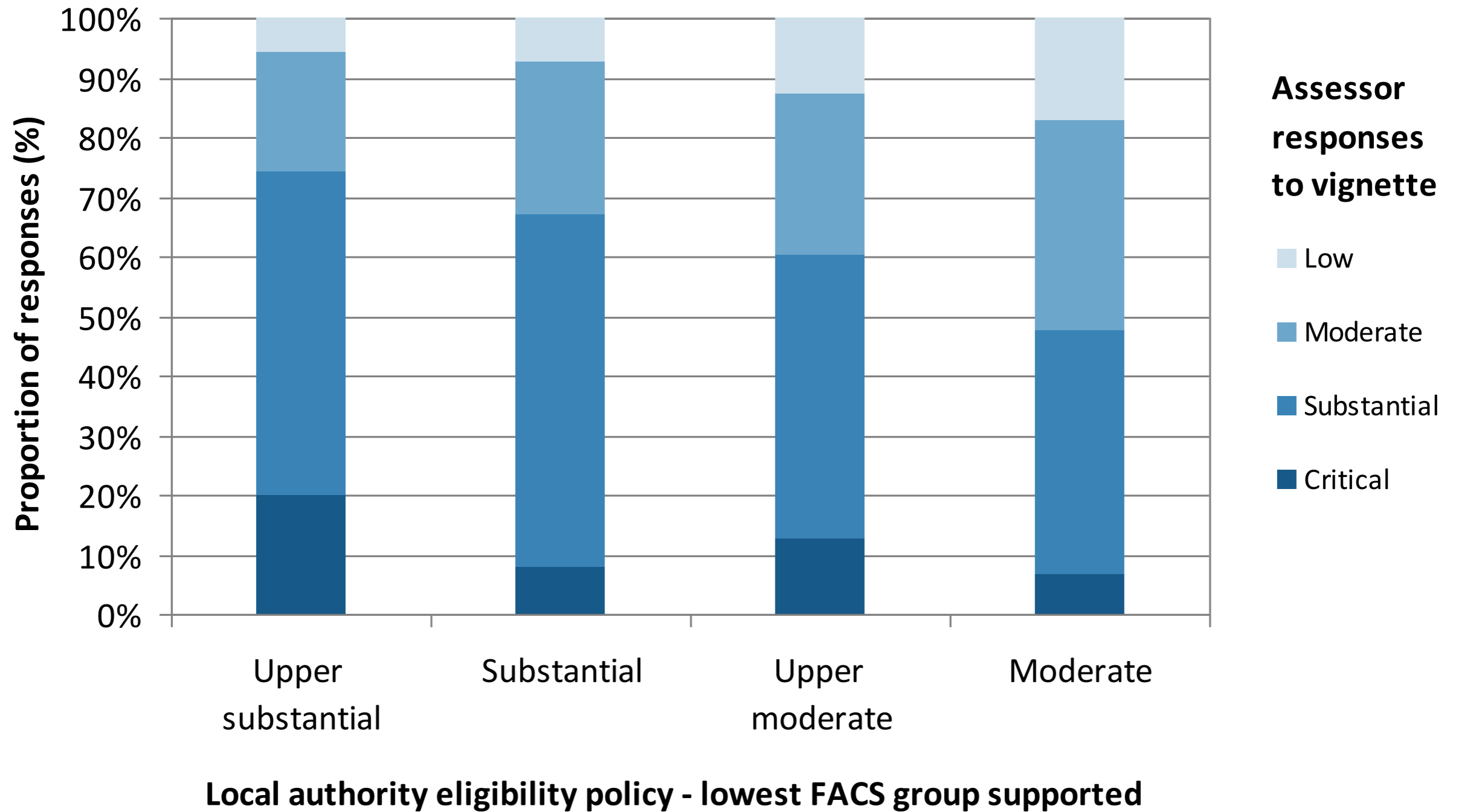
Estimated eligibility



Estimated effect of ADL on FACS classification: older people



DISTRIBUTION OF RESPONSES TO ALL 'OLDER PEOPLE' VIGNETTES BY LOCAL ELIGIBILITY POLICY*



*Chart excludes 'not sure' responses

The use of FACS criteria as a policy tool

- Flexibility vs. transparency
 - Care managers mentioned need for flexibility
 - But warn of dangers of allocation “lottery”
- Setting minimum national eligibility criteria on the basis of FACS
 - Could lead to changes in classification (might have lesser effects than expected)
 - Suggestion of up-coding across LAs
- Use of algorithms to define eligibility criteria
 - More transparent
 - Incomplete information: capturing risk, supervision, informal care
 - “process” rather than “outcomes” focussed

Defining new eligibility criteria

- Development of a national minimum eligibility threshold
- Based on a more algorithmic definition which combines *problems with activities* with *impact on wellbeing*
- **Objectives:**
 - *Increase transparency*
 - *Reduce local variability*
 - *Maintain expenditure unchanged*

Key concepts of draft regulations

Definitions relevant to the draft eligibility criteria

“basic personal care activities” means essential personal care tasks that a person carries out as part of normal daily life including eating and drinking, maintaining personal hygiene, toileting, getting dressed, and taking medication;

“basic household activities” means essential household tasks that a person carries out as part of normal daily life including preparing meals, shopping, cleaning and laundry, and managing household finances.

Key concepts of draft regulations

2. An adult's needs meet the eligibility criteria if those needs are due to a physical or mental impairment or illness and the effect of such needs is that the adult—

- (a) is unable to carry out one or more basic personal care activities and as a consequence there is a significant risk to any aspect of the adult's well-being;
- (b) is unable to carry out one or more basic household activities and as a consequence there is a significant risk to any aspect of the adult's well-being;
- (c) is unable to fully carry out any caring responsibilities the adult has for a child;
- (d) needs support to maintain family or other personal relationships, and a failure to sustain such relationships has or is likely to have a significant impact on the adult's well-being;
- (e) is unable to access and engage in work, training, education or volunteering and as a consequence there is a significant risk to any aspect of the adult's well-being; or
- (f) is unable to access necessary facilities or services in the local community and as a consequence there is a significant risk to any aspect of the adult's well-being.

Key concepts of draft regulations

(2) For the purposes of paragraph (1) an adult is to be regarded as being unable to carry out a task if the adult—

- (a) is unable to complete the task without assistance;
- (b) is able to complete the task without assistance but doing so causes the adult significant pain, distress or anxiety;
- (c) is able to complete the task without assistance but doing so endangers or is likely to endanger the health or safety of the adult, or of others; or
- (d) is able to complete the task without assistance but takes significantly longer than would normally be expected.

Key concepts of draft regulations

(2) “Well-being”, in relation to an individual, means that individual’s well-being so far as relating to any of the following—

- (a) personal dignity (including treatment of the individual with respect);
- (b) physical and mental health and emotional well-being;
- (c) protection from abuse and neglect;
- (d) control by the individual over day-to-day life (including over care and support, or support, provided to the individual and the way in which it is provided);
- (e) participation in work, education, training or recreation;
- (f) social and economic well-being;
- (g) domestic, family and personal relationships;
- (h) suitability of living accommodation;
- (i) the individual’s contribution to society.

Second PSSRU eligibility survey

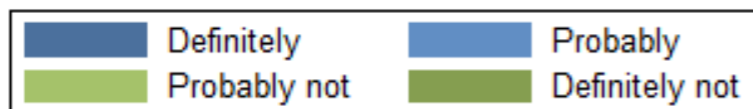
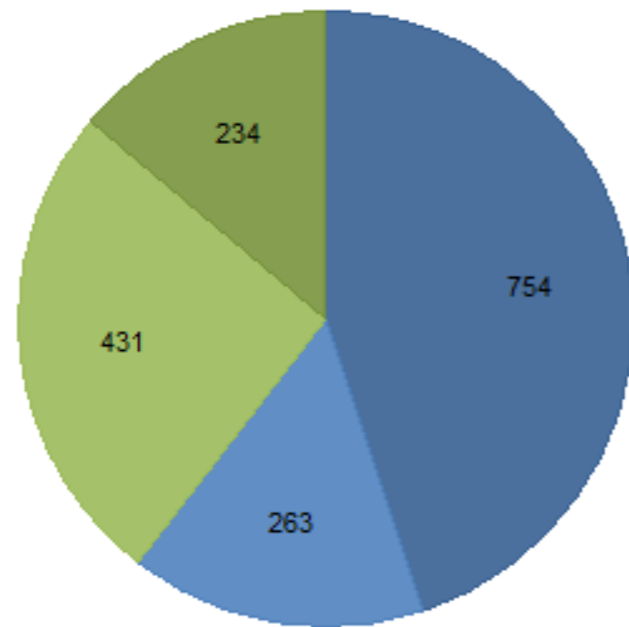
- Based on vignettes for main client groups
- 63 authorities
- Approximately 627 care managers

| FACS eligibility policy | Response rate |
|-------------------------|---------------|
| Critical | 0% |
| Upper substantial | 33% |
| Substantial | 43% |
| Upper moderate | 67% |
| Moderate | 42% |
| Low | 33% |

Increase in eligibility

Estimated eligibility - FACS

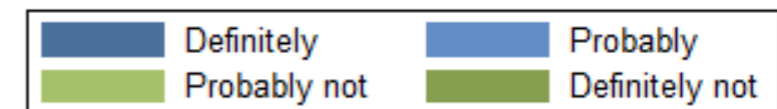
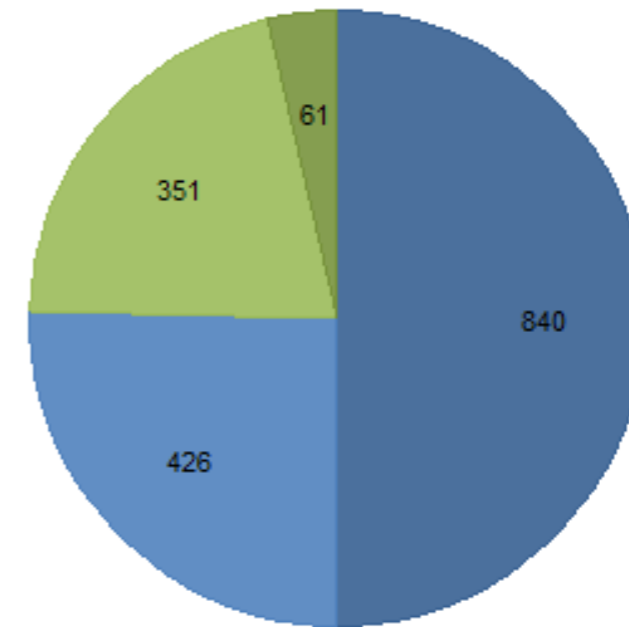
Older people (all vignettes)



Note: excludes responses marked 'unsure'

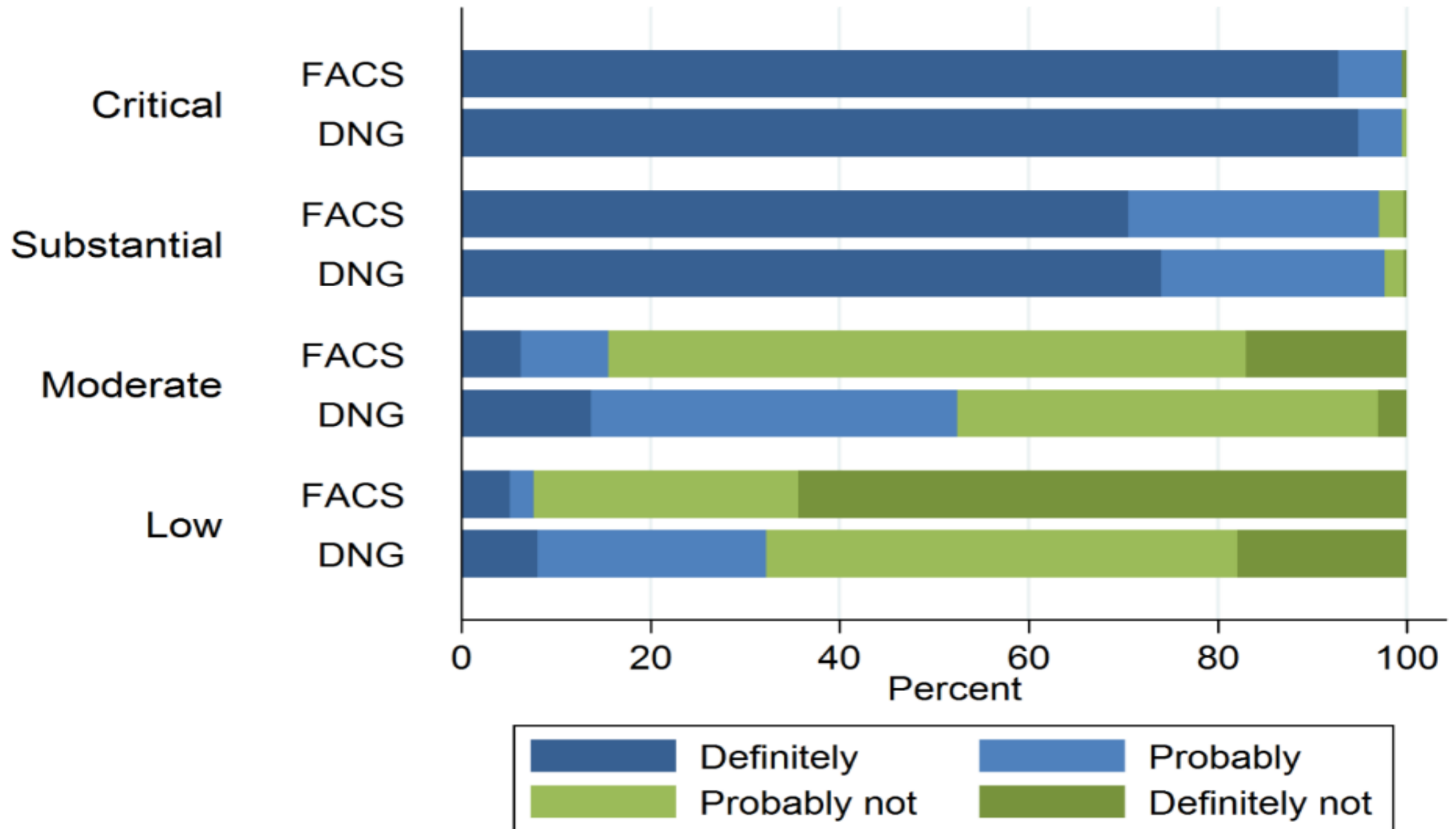
Estimated eligibility - national eligibility

Older people (all vignettes)



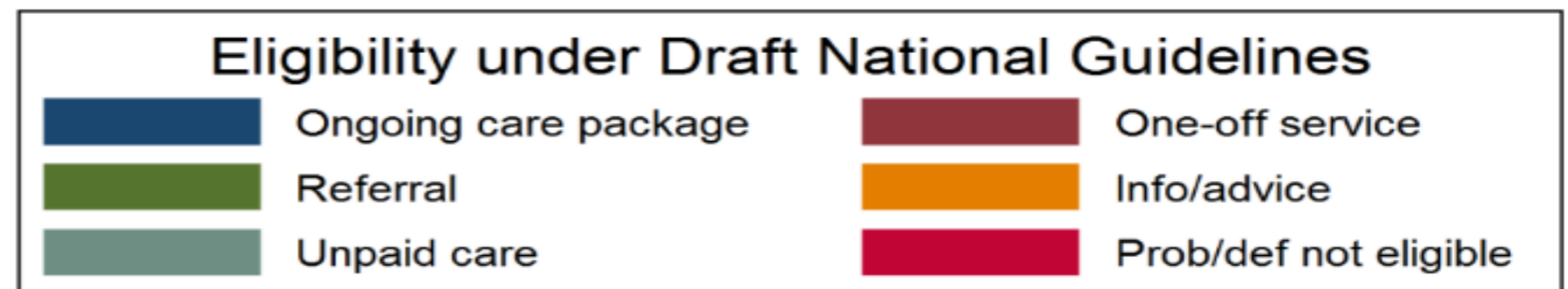
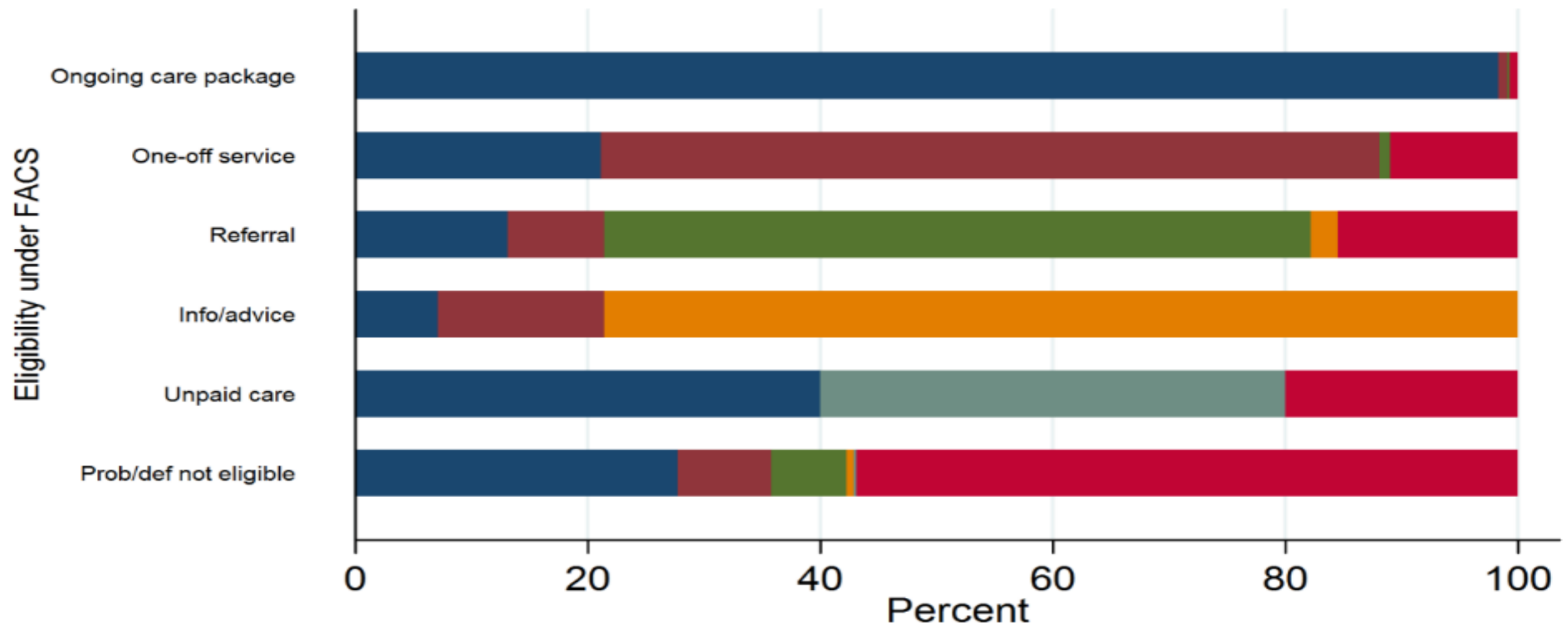
Note: excludes responses marked 'unsure'

Assessed eligibility under FACS and draft minimum eligibility guidelines – older people vignettes



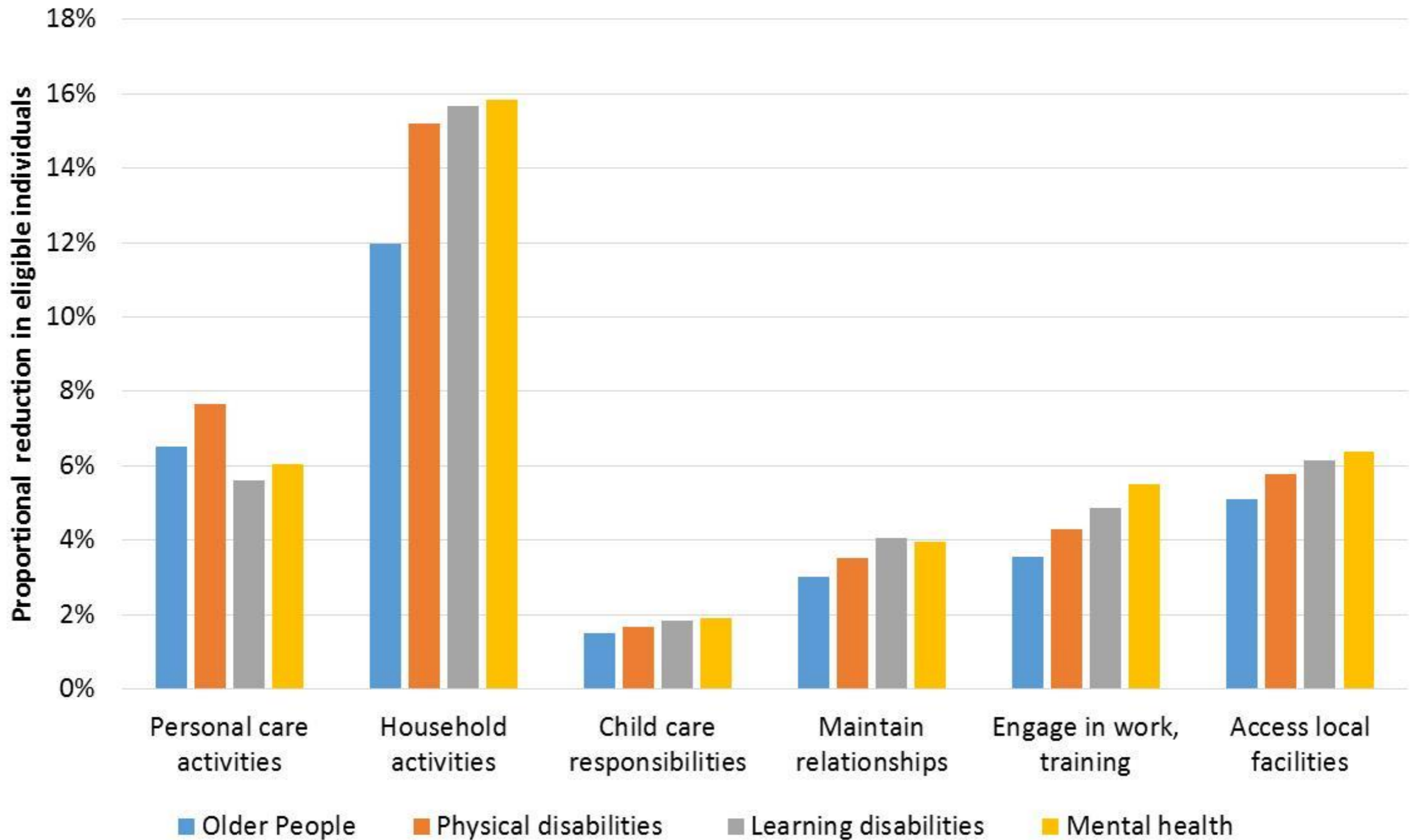
Note: excludes responses marked 'unsure'

Differences in eligibility and support between current FACS system and draft minimum eligibility guidelines – older people vignettes

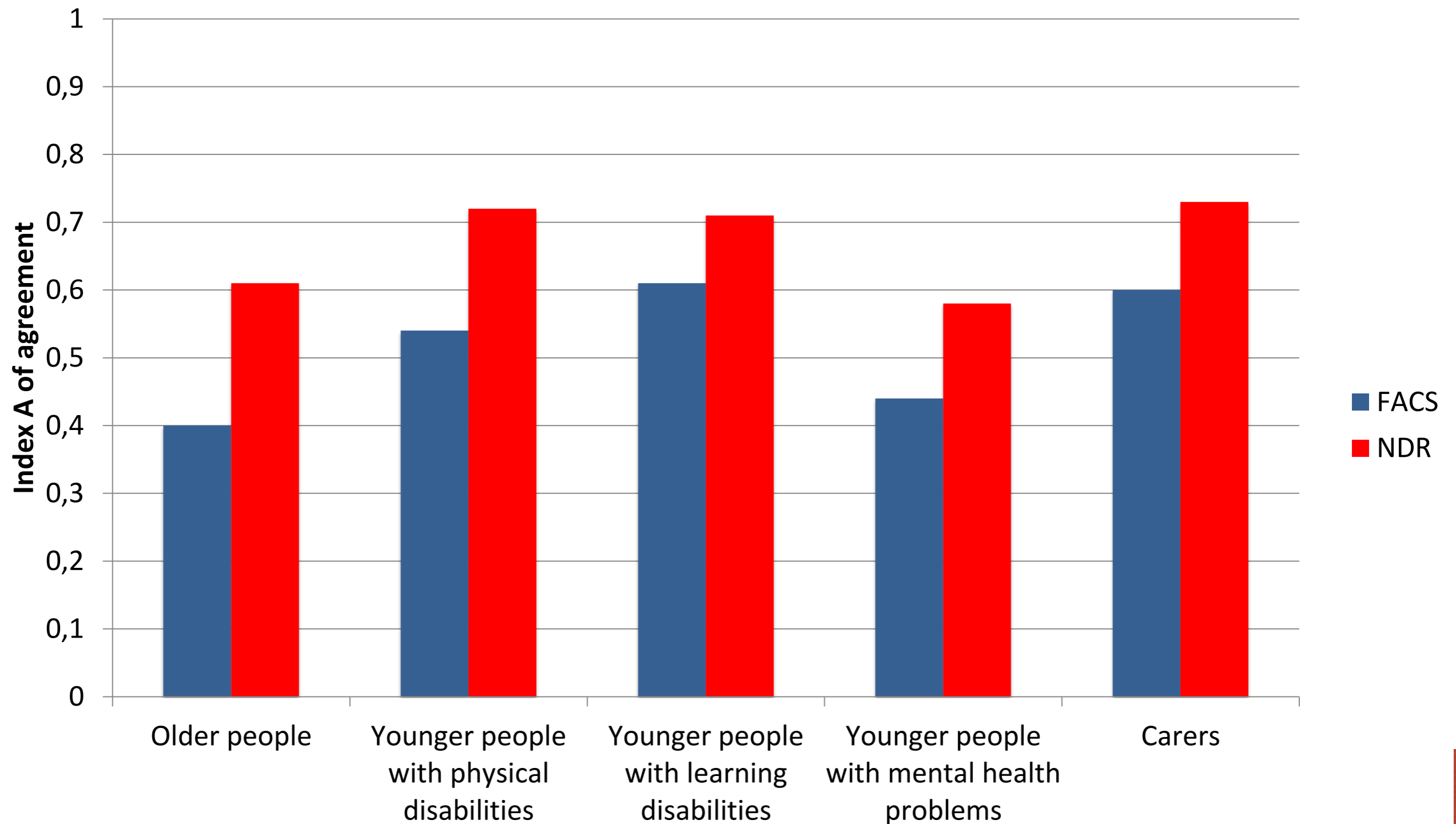


Note: excludes responses marked 'unsure'

Proportional reduction in eligible individuals following removal of individual need clauses in the draft regulations



Change in agreement over eligibility between FACS and draft regulations, by client group



Next phase...

- Government has refined the regulations
 - Use of “some” as requiring 2 or more problems with activities
- New study evaluating new iterations of regulations
 - Real case data (10 cases)
 - 27 authorities
 - 12 care managers
- Challenge: filtering process in place
- Deadline end of July!