







## Information, advice and advocacy workshop

25 March 2015









## **Introductions**









## **Purpose of session**

By the end of the session participants will have a good understanding of:

- Key areas of the Act
- Tower Hamlets policies and practices
- Key changes to procedures & paperwork









# Care Act 2014 – Key Duties





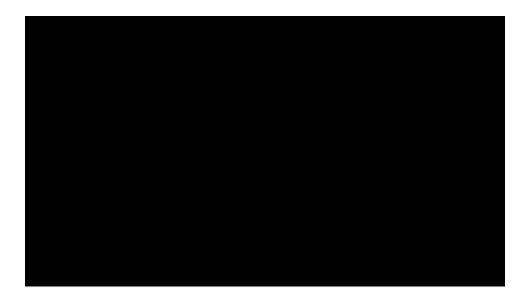




### **Overview of the Care Act**

https://www.youtube.com/watch?v=5UPkskeXd

<u>AA</u>



## The framework of the Act and its statutory guidance

Underpinning principle	General responsibilities and key duties	Key processes
Wellbeing	Prevention	Assessment and eligibility
	Integration, partnerships and transitions	Charging and financial assessment
	Information, advice and advocacy	Care and support planning
	Diversity of provision and market oversight	Personal budgets and direct payments
	Safeguarding	Review







## **General Responsibilities of Local Authorities**

The Care Act places a number of general duties on LA's.

#### These are:

- 1. Promoting individual well being
- 2. Preventing needs for care and support
- Promoting integration of care and support with health services etc.
- 4. Providing information and advice
- 5. Promoting diversity and quality in provision of services







## **Promoting Individual Wellbeing**

#### The Act states that:

- Individual best placed to judge individual's wellbeing
- Individual's views, wishes, feelings, beliefs must be considered
- Individual participating as fully as possible
- Preventing and delaying need for care and support
- Decisions made having regard to all individual's circumstances
- Need to protect from abuse and neglect
- Balance
- Minimum restriction on rights or freedom of actions of individual









#### Definition of wellbeing

- 1.5. "Wellbeing" is a broad concept, 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.









# **Tower Hamlets approach**









#### Team Functions and hand-offs - High Level



Sign-post to other agencies

Provide information about the social care process

Support people with self-directed assessments

#### Out of Borough

Out of borough

#### Hospital

Discharge Assessment Including Carers Assessment

> Short term support

## New cases: adults and their carers portability Person appears Assessment

**Adults Assessment and** 

Intervention

cases



#### Existing cases: adults and their carers Care Act Compliant Re-assessments Hand-off to longer term Scheduled Unscheduled teams when case is stable Urgent support (existing cases) Support Planning Safeguarding Ongoing social work support



#### **Personalised Support**

Provided by a range of good quality & flexible providers delivering for the Individual and family:

> Creative Holistic Flexible Cost effective Preventative





Reablement

Do not hold cases

Telecare / Assistive Technology

Do not hold cases

OT teams

Sight & Hearing Mental Health

**CLDS** 

Comm Health Teams









### **Information sources**

Website

• E-Marketplace

Leaflets









# Eligibility criteria & assessments









## **Eligibility Criteria**

- For people who need support
- Their Carers
- Young Carers







#### **Needs assessments**

 There will be a national eligibility criteria setting a minimum threshold for adult care and support needs which local authorities must meet.. These will be set out in regulations.

Eligible Needs The needs arise from or are related to "a physical or mental impairment or illness"

As a result of the needs, the adult is unable to achieve *two* or more of the listed outcomes

As a consequence there is, or is likely to be, a significant impact on the adult's well-being





#### **Needs assessments**

- Local authorities are required to undertake a needs assessment for an adult who may have needs for care and support
- The duty applies regardless of the authority's view of the level of the person's needs or the level of his financial resources
- The LA must involve the adult, any carer and any person he asks to be involved, or where he lacks capacity, to ask any person who appears interested in his welfare
- Guidance states that the LA is not required to meet any needs being met by a carer who is willing and able to meet them BUT it should record this





### **Specified Outcomes:**

- Nutrition
- Personal hygiene
- Toilet needs
- Clothed
- Safe use of home
- Habitable home environment
- Family or other personal relationships
- Access work / education or volunteering
- Using facilities or services
- Parenting responsibilities









#### Unable to achieve an outcome it:

- Is unable to achieve it without assistance
- Is able to achieve it without assistance but doing so causes the adult significant pain, distress or anxiety
- Is able to achieve it without assistance but doing so endangers or is likely to endanger the health or safety of the adult, or of others
- Is able to achieve it without assistance but takes significantly longer than would normally be expected.









## **Significant impact**

Duties

Powers





# **Safeguarding**





# Safeguarding Within the Care Act

#### Safeguarding focus throughout the act

- (1) '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 wellbeing
- (c) protection from abuse and neglect;
- (2) In exercising a function under this Part in the case of an individual, a local authority must have regard to the following matters:
- (g) the need to protect people from abuse and neglect.





- <u>Physical abuse</u> including assault, hitting, slapping, pushing, misuse of medication, restraint or inappropriate physical sanctions.
- <u>Domestic violence</u> including psychological, physical, sexual, financial, emotional abuse; so called 'honour' based violence.
- Organisational abuse including neglect and poor care practice within an institution or specific care setting such as a hospital or care home, for example, or in relation to care provided in one's own home. This may range from one off incidents to on-going ill-treatment. It can be through neglect or poor professional practice as a result of the structure, policies, processes and practices within an organisation.





- Sexual abuse including rape, indecent exposure, sexual harassment, inappropriate looking or touching, sexual teasing or innuendo, sexual photography, subjection to pornography or witnessing sexual acts, indecent exposure and sexual assault or sexual acts to which the adult has not consented or was pressured into consenting.
- <u>Psychological abuse</u> including emotional abuse, threats of harm or abandonment, deprivation of contact, humiliation, blaming, controlling, intimidation, coercion, harassment, verbal abuse, cyber bullying, isolation or unreasonable and unjustified withdrawal of services or supportive networks.





- <u>Financial or material abuse</u> including theft, fraud, internet scamming, coercion in relation to an adult's financial affairs or arrangements, including in connection with wills, property, inheritance or financial transactions, or the misuse or misappropriation of property, possessions or benefits.
- Modern slavery encompasses slavery, human trafficking, forced labour and domestic servitude. Traffickers and slave masters use whatever means they have at their disposal to coerce, deceive and force individuals into a life of abuse, servitude and inhumane treatment.
- <u>Discriminatory abuse</u> including forms of harassment, slurs or similar treatment; because of race, gender and gender identity, age, disability, sexual orientation or religion.





- Neglect and acts of omission including ignoring medical, emotional or physical care needs, failure to provide access to appropriate health, care and support or educational services, the withholding of the necessities of life, such as medication, adequate nutrition and heating
- <u>Self-neglect</u> this covers a wide range of behaviour neglecting to care for one's personal hygiene, health or surroundings and includes behaviour such as hoarding





# Section 42 Care Act: Enquiry by a Local Authority

- (1)This section applies where a local authority has reasonable cause to suspect that an adult in its area (whether or not ordinarily resident there)—
- (a) has needs for care and support (whether or not the authority is meeting any of those needs),
- (b) is experiencing, or is at risk of, abuse or neglect, and
- (c) as a result of those needs is unable to protect himself or herself against the abuse or neglect or the risk of it.





# Section 42 Care Act: Enquiry by a Local Authority (2)

- 2)The local authority must make (or cause to be made) whatever enquiries it thinks necessary to enable it to decide whether any action should be taken in the adult's case (whether under this Part or otherwise) and, if so, what and by whom.
- Or cause to be made-implications for other agencies as whilst Local Authority retains ultimate responsibility other agencies may take the lead in the investigation.
- No duty to take action-personal approach to safeguarding recognising complexity of safeguarding adults.





# Safeguarding and Carers (1):

Circumstances in which a carer could be involved in a situation that may require a safeguarding response include:

- A carers may witness or speak up about abuse or neglect
- A carer may experience intentional or unintentional neglect from the adult they are trying to support or from professionals and organisations they are in contact with; or
- A carer may unintentionally or intentionally harm or neglect the adult they support on their own or with others.





# Safeguarding and Carers (2):

14.36 - assessment of both the carer and the adult they care for must include consideration of both of their wellbeing.

Professionals involved should make early positive intervention, assessing the situation holistically and seek to ensure protective measures are in place that do not result in a break down of the support network.





## SAFEGUARDING- A MULTI AGENCY RESPONSE

The Care Act recognises that local Authorities cannot safeguard individuals on their own and can only be achieved by effective working together with other agencies.

Make up of SAB's – multiagency- police, LA and health. Guidance recognises role of other agencies in safeguarding including fire and ambulance services, health and social care providers including independent providers, DWP, housing, probation and prison services, GP's, CQC etc.





# **Information Sharing (1):**

#### 14.157 Statutory Guidance

Agencies should draw up a common agreement relating to confidentiality and setting out the principles governing the sharing of information, based on the welfare of the adult or of other potentially affected adults. Any agreement should be consistent with the principles set out in the Caldicott Review published in 2013 ensuring that:

Information only shared on a need to know basis.

Confidentiality must not be confused with secrecy

Informed consent should be obtained but, if this is not possible and other adults are at risk of abuse or neglect, it maybe necessary to override the requirement and;

It is inappropriate for agencies to give assurances of absolute confidentiality in cases where there are concerns about abuse...





# **Information Sharing (2):**

14.58: Where an adult has refused to consent to information being disclosed for these purposes, then practitioners MUST consider whether there is an overriding public interests that would justify information sharing (e.g. because there is a risk that others are at risk of serious harm) and wherever possible, the appropriate Caldicott Guardian should be involved.









# How will this work in practice?







#### **LBTH Signs of Wellbeing and Safety Practice Framework**

- Focuses on individuality of the person and circumstances
- Individual supported to articulate what they would like to achieve
- Framework encourages the individual and professional to identify strengths and assets
- Goal is to achieve succinct assessments with analytical conclusions









## **Case Studies**

Split into four groups - Each group will be given a case study

Think about what information you would provide in each case. Where would you signpost them to?

You have 20 minutes for each case study

What are you Worried About?

TEP ONE: START HERE, BACK AND FORWARDS

What has happened, what have you seen, that makes you worried about this adult?

When you think about what has already happened to \_\_\_\_ what do you think is the worst thing that could happen to \_\_\_\_\_ because of this problem?

Are there things happening in 's life or family that make this problem harder to deal with?

What's Working Well?

What do you like about \_\_\_\_ what are his/her best attributes?

Who are the people that care most about \_\_\_\_? What are the best things about how they care for ?

What would \_\_\_\_ say are the best things about his/her life?

Who would \_\_\_\_ say are the most important people in his/her life? How do they help be well or improve \_\_\_\_ wellbeing?

Has there been times when this problem has been dealt with or was even a little better? How did that happen?

#### What Needs to Happen? STEP THREE

Having thought more about this problem now, what would you need to see that would make you satisfied the situation is at a 10?

What would need to see that would make them say this problem is completely sorted out?

What do you think is the next step that should happen to get this worry sorted out?

On a scale of 0 to 10 where 10 means this problem is sorted out as much as it can be and zero means things are so bad for the adult you need to get professional or other outside help, where do you rate this situation today? (Put different judgment numbers on scale for different people e.g., you, family, friends, doctor etc).









# Case Studies – Feedback to Group









# **Questions and Next Steps**