



Adult Social Care Operations Assessment and Eligibility Policy

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Owner	Heads of Service

Adult Assessment and Eligibility Policy

Contents

1. Introduction	3
2. Scope.....	3
3. Legislation & Key Documents	3
4. Protected characteristics.....	4
5. Definitions	4
6. Approach to Needs and Carer assessments	5
6.1 Preventing reducing or delaying needs	5
6.2 Providing information and advice	6
6.3 Strengths-based and person-centred approach	6
6.4 Strengths-based assessment.....	7
6.5 Purpose of Needs/Carer assessments.....	7
6.6 First contact with the adult	8
6.7 Needs/carer assessments and the wellbeing principle	8
6.8 Safeguarding concerns	9
6.9 Involving third parties	9
6.10 'Substantial difficulty', Appropriate Individuals and Independent Advocates	9
6.11 Mental Capacity.....	10
6.12 Interpretation and Translation.....	10
6.13 Deafblind assessments	10
6.14 NHS Continuing Healthcare.....	11
6.15 Proportionate assessments	11
6.16 Assessment timescales	12
6.17 The 'Whole family approach'	12
6.18 Transition assessments.....	13
7. Eligibility determinations.....	13
7.1 Assessing individual with care and support needs against the eligibility criteria	14
7.2 Assessing carers with support needs against the eligibility criteria.....	14
7.3 Determining eligibility based on the individual's wellbeing	15
7.4 Decisions to meet non-eligible needs.....	15
7.5 Ordinary residence.....	16
7.6 Communicating assessment outcomes.....	16
8. Queries, Issues and Complaints.....	16
9. Performance and Monitoring.....	16

1. Introduction

At the London Borough of Newham we aim to:

- understand the diverse needs of the residents that live within our communities,
- ensure that everybody has access to appropriate advice and information,
- ensure that those who need extra help receive appropriate support.

Under the Care Act 2014, all adults with eligible needs are entitled to receive support from Adult Social Care. In order to determine whether the adult is eligible to receive on-going support from Adult Social Care, we must carry out a -

- Needs Assessment for any adult who appears to have care and support needs;
- Carer's Assessment for any adult providing (or due to provide) carer support who may have support needs.

This Policy has been developed to ensure that ASC operations are compliant with The Care Act 2014 in the undertaking of Needs and Carer assessments, and ensure that assessments:

- have the individual's wellbeing at their heart, are person-centred and are led by the individual as much as possible;
- are appropriate and proportionate;
- are used to determine who is eligible to receive on-going support;
- lay the foundations for eligible individuals to maintain or improve their wellbeing through the achievement of their outcomes.

We will undertake needs assessments of individuals (adults, carers and young carers) using strengths-based practice focusing on the individual's own abilities, strengths, opportunities and potential. This approach maximises independence and will always consider the individual's own strengths and support network (family, friends and community) to assist with meeting identified outcomes prior to/and in addition to using support from the Council.

2. Scope

This policy applies to Newham's Adult Social Care Operational services.

[Other policies, procedures and guidance](#)

3. Legislation & Key Documents

- The Care Act 2014
- The Care and Support (Assessment) Regulations 2014
- The Care and Support (Eligibility Criteria) Regulations 2014
- Care and Support Statutory Guidance Issued under the Care Act 2014

- The Mental Capacity Act 2005
- The Children and Families Act 2014
- The Equalities Act 2010
- The National Framework for NHS Continuing Healthcare and NHS Funded Nursing Care
- Care and Support for Deafblind Children and Adults Policy Guidance

4. Protected characteristics

There are nine protected characteristics in the Equality Act 2010:

- age;
- disability;
- gender reassignment;
- marriage and civil partnership;
- pregnancy and maternity;
- race;
- religion or belief;
- sex;
- sexual orientation.

In Newham, being care experienced is [recognised by the Council](#) as the tenth protected characteristic.

We must ensure that we comply with the requirements of the Equality Act 2010, including the Public Sector Equality Duty, and that we do not discriminate against residents with any of these ten protected characteristics.

5. Definitions

Adult (aged over 18 years) (with care and support needs) means a person with an illness or disability which gives rise to long term care needs.

Carer means a person who provides informal care for an adult with care needs who resides in Newham. It is usually a partner, spouse, civil partner or family member, but may also be a friend or a neighbour. It does not include a care worker providing paid care, or a volunteer.

Young carer is a child who is under 18 years old who provides or intends to provide care for an adult with care and support needs.

Individual is used in the Care Act 2014 to mean both adults with needs and carers (young carers). The term is used in the same way in this policy.

Assessment is a discussion with an individual to help understand their needs and circumstances better.

Carer's assessment is a discussion with a carer to help understand their needs that arise as a result of caring and its impact on their well-being.

Transition assessment is a discussion with a young person or carer, who is under 18 and approaching adulthood, to help understand their needs for care and/or support and any needs that they are likely to have after turning 18.

6. Approach to Needs and Carer assessments

Only suitably trained staff will conduct Needs or Carer Assessments. We may on occasion delegate the assessment function to a trusted third party to conduct.

All staff in contact with the individual during the assessment process will receive suitable training in order to make appropriate judgements about whether to steer the individual in the direction of information and advice services, preventative services, or immediate needs or carer assessments, or specialist assessments, for someone appearing to have dual sensory needs for example.

We are not required to carry out carer assessments for carers who provide care under contract (employment) or as part of voluntary work. If the carer provides care for the individual outside of these arrangements, we will consider whether to conduct a carer assessment; in such instances the carer assessment will assess eligibility to receive support on the basis of the non-contractual and voluntary work elements of the care provided.

6.1 Preventing reducing or delaying needs

In accordance with the Care Act, we identify needs a resident might have that could be reduced, or where escalation of those needs could be delayed, and promote wellbeing through preventative services, information and advice, or other 'universal' services which are available locally, such as [through the Well Newham Directory of Services](#) or [Libraries](#).

If we think a resident may benefit from:

- preventative support (including reablement / mental health enablement)
- information and advice
- universal services
- technology and equipment

Then we may allow the benefits of these activities to be realised first before we assess the need and determine which eligible needs remain unmet.

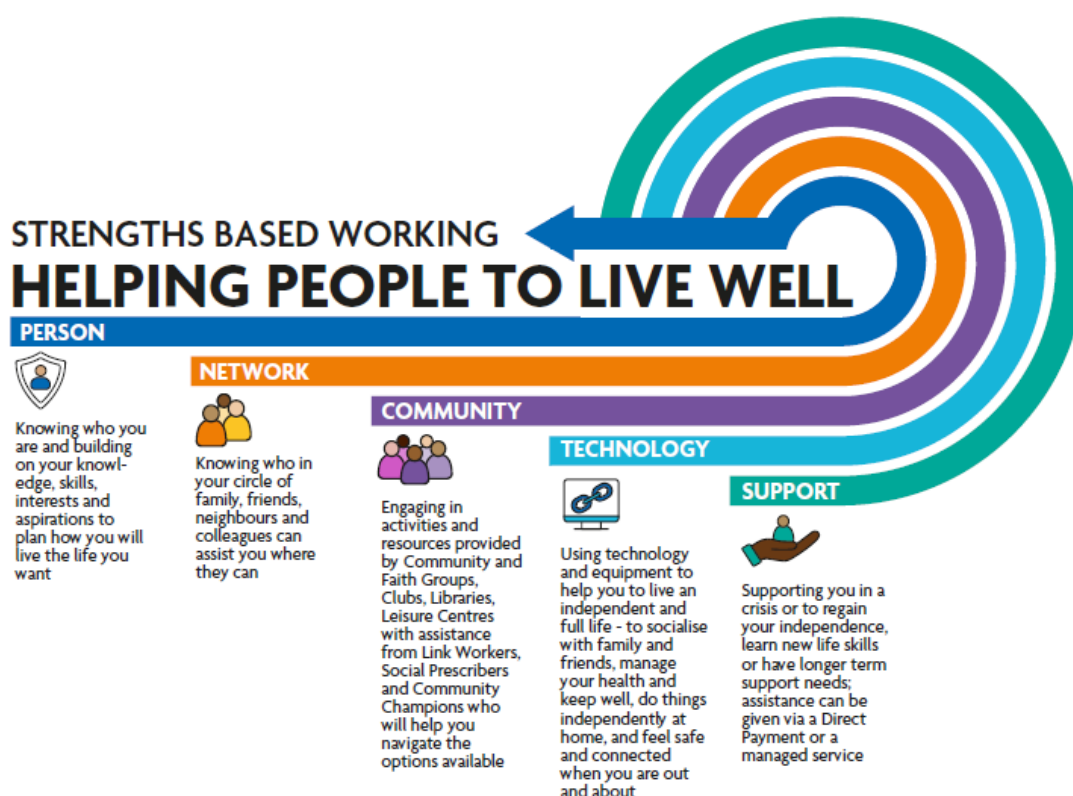
6.2 Providing information and advice

Providing information and advice can help to promote residents' wellbeing by increasing their ability to exercise choice and control, it is also a vital component of preventing or delaying needs for care and support.

The [Equality Act 2010](#) requires us to make reasonable adjustments to ensure that disabled people have equal access to information and advice services. Reasonable adjustments could include the provision of information in accessible formats or with communication support. For those who do not speak English as a first language, [The Language Shop](#) can be engaged to provide translation or interpretation services.

6.3 Strengths-based and person-centred approach

In Newham, we take a strengths-based approach to supporting our residents to live well underpinned by our [Practice Framework](#). Being strengths-based is about working *with* residents to understand their own unique strengths and capabilities, not solely focussing on what residents may be unable to do. The below image summarises the Strengths-Based Approach in Newham:



Being person-centred means we put each individual resident at the centre of our approach; this means we do not make assumptions about what a resident may need, rather we get to know the person and how their needs may affect the outcomes they wish to achieve and their wellbeing, which are different for every person.

6.4 Strengths-based assessment

At the same time as carrying out any assessment, Newham Council must consider what else other than the provision of care and support might assist a resident in meeting the outcomes they want to achieve.

We will consider how a resident's family, friends, neighbours and colleagues can assist them, and whether their cultural and spiritual networks can support them in meeting their needs and building their strengths. We will also look at maximising their welfare benefits and how they might use these to access support.

We will look at what activities and services might be available in the community to support a resident, with the assistance of [Community Neighbourhood Link Workers](#), [Social Prescribing Link Workers](#) and [Community Health Champions](#). We will look at how equipment and technology can help a resident live an independent and full life, manage their health and wellbeing, and remain independent at home, and safe and connected while in their community.

6.5 Purpose of Needs/Carer assessments

Assessments should be used to identify the individual's needs, understand how their needs impact upon their wellbeing, and identify the outcomes that they hope to achieve in order to maintain or improve their wellbeing. Needs and Carer Assessments must not be viewed solely as a gateway to receiving care and support. Needs and Carer Assessments are vital interventions in their own right, and should be used to –

- help the individual understand their situation better;
- highlight opportunities and methods to prevent, reduce or delay the onset of further needs;
- help the individual to recognise their own strengths and support networks;
- help the individual access suitable services and support.

The individual's needs at the time they present to Adult Social Care may not be indicative of their usual need. The assessment must be used to identify the full extent of their needs. We will consider the individual's fluctuating needs, including those that are short term, and those that are medium/long term. Carer's assessments must also consider the sustainability of the caring role itself, and so also consider the carer's future needs.

During the assessment, we will consider what - aside from the provision of care and support - may assist the individual to meet their outcomes; decisions will be based on the individual's strengths and capabilities, and the support available to them from their family/friends and wider community. We will always consider whether it is appropriate before recommending the individual tap into support from family, friends, local support/faith/cultural networks.

6.6 First contact with the adult

Dealing with needs/carer assessment refusals

We are not required to conduct a needs or carer assessment if the individual refuses the assessment (for example they do not feel they need care) as long as they have the capacity to not consent. If it is difficult to engage with a resident, then the [Difficult or Non Engagers Guidance](#) must be followed. Furthermore, if the –

- individual lacks capacity, we will conduct the assessment if we believe it is in their best interests;
- individual's needs or circumstances change we will consider offering an assessment again;
- individual changes their mind at a later date we will carry out the assessment.

Needs/carer assessment

We will conduct a proportionate assessment with any individual who appears to have care and support needs, and any carer who appears to require support. Determination of ordinary residence comes after determination of eligibility, however, if it clear that an individual is ordinarily resident in another council area, we will signpost them to the appropriate council for assessment at the screening stage. *(Note that there is no requirement for a carer to be ordinarily resident in Newham, only the person they care for)*

We will provide the individual with information (in a suitable format, for example in another language or braille if needed) on the assessment process as early as possible in order to enable them to be as involved as possible.

If the individual presents with urgent needs we will act immediately to meet their needs (regardless of the individual's ordinary residence), and inform them that we will continue with the assessment once the immediate need has been met. We will continue with the assessment following the immediate intervention to address the urgent need.

No Recourse to Public Funds (NRPF) is an immigration condition restricting access to public funds, including many mainstream benefits such as welfare and housing. Families and individuals with NRPF may have a right to support from social services because of complex health needs or safeguarding issues, including to avoid children becoming destitute. Please refer to the [NRPF Policy](#) for more details.

6.7 Needs/carer assessments and the wellbeing principle

We will have regard to the following key principles when carrying out our assessment, care and support functions –

The individual:

- concerned is best placed to judge their wellbeing;
- should participate in the process as fully as possible;

- should be – and remain – free from abuse and neglect.

We will:

- consider the individual's views, wishes, feelings and beliefs;
- consider whether and how we can prevent, delay, or reduce needs;
- ensure that decisions take into account all of the individual's circumstances, and will avoid making decisions based on unjustified preconceptions and assumptions;
- ensure that any restriction on the individual's rights or freedom is kept to the minimum necessary;
- strive to achieve a balance between the individual's wellbeing and that of any friends or relatives who are involved for caring for them.

Consideration to the time and location of the assessment and the involvement of other parties can have a big impact on how the individual engages in the process. We will always be mindful of the presenting needs of the individual and adjust the tone / language / approach where required to suit the individual's needs.

6.8 Safeguarding concerns

We will instigate a safeguarding enquiry if the individual presents with – or the assessment uncovers – abuse or neglect risk/concerns. We will continue to assess the individual's needs to determine eligibility for on-going support alongside the safeguarding enquiry so there is no delay in the process of identifying and meeting eligible needs.

For more details on addressing safeguarding concerns, please see the [Adults Safeguarding Guide](#).

6.9 Involving third parties

We will involve/consult any party that the individual requests and consents be involved in the assessment (such as family members, friends, carers). We will also consider the involvement of the carer and other parties involved with the individual (such as GPs, the district nurse, prison staff etc.) in order to provide assurance that the individual's condition and needs have been fully identified and explored.

6.10 'Substantial difficulty', Appropriate Individuals and Independent Advocates

We will consider whether the individual may experience substantial difficulties being involved in the assessment process, for example they have substantial difficulty –

- understanding the information provided;

- retaining the information;
- using/weighing up the information as part of the process of being involved in their assessment;
- communicating their views, wishes or feelings.

If the individual has or will have substantial difficulty being involved in their assessment, care and support plan or review, we will consider whether they have access to an

Appropriate Individual who can facilitate their involvement and represent their wishes. In order to be considered an appropriate individual, the following criteria must be met –

1. The Appropriate Individual cannot already be providing professional and/or paid care or treatment to the individual.
2. The individual must consent to the Appropriate Individual. If the individual does not want a family member, carer, friend to act as an Appropriate Individual we will respect their wishes. If they do not have capacity we will only agree to an Appropriate Individual if we are satisfied that it is in the individual's best interests.
3. The Appropriate Individual is able to support and represent the individual, and facilitate their involvement in the process.

In addition to the above, we will not recommend or appoint an Appropriate Individual who is implicated in a safeguarding enquiry or review. If we decide that it is not suitable to appoint a family member or friend to be the individual's Appropriate Individual, we will clearly communicate our reasons to all the involved parties if it is deemed safe to do so.

We will arrange for an Independent Advocate to support the individual if they have substantial difficulties being involved in the assessment, and if they do not have access to an Appropriate Individual.

6.11 Mental Capacity

If there are concerns that the individual lacks the capacity to make a specific decision we will arrange for a mental capacity assessment to be completed with them. If the individual lacks the capacity to make the said decision, we will consider whether the person has other individuals with legal authority to make decisions on their behalf, for example Lasting Powers of Attorney or Court of Protection Deputies. If not, and the person is 'un-befriended' arrangements will be made for an Independent Mental Capacity Advocate (IMCA). For more information please see the *Advocacy Policy*.

If the individual already has or needs an Independent Advocate, we will support the advocate to provide advocacy across both areas (as opposed to appointing a second advocate) if we are satisfied they have undergone appropriate training.

6.12 Interpretation and Translation

Where there are communication concerns and the individual does not have anyone who we think is appropriate within their own support network to translate for them, we can arrange for a language or specialist interpreter to support with communication.

6.13 Deafblind assessments

Not all individuals with hearing and visual impairments consider themselves deafblind. We will consider the need for expert involvement if there is the appearance of visual and hearing impairments, which combined impact on the individual's ability to communicate, access information, and mobilise. [Further guidance](#).

If the individual is deafblind we will carry out a specialist assessment conducted by a suitably qualified assessor (this may be from a third party organisation for example a Sensory Specialist in Enabled Living Healthcare). We will also involve an interpreter (for example BSL) if necessary, since it is not normally appropriate to use a family member or carer as an interpreter in these particular circumstances.

6.14 NHS Continuing Healthcare

With the individual's consent we will notify the North East London Integrated Care Board (NEL ICB) where it appears that the adult may be eligible for NHS Continuing Healthcare (for example because the individual's primary health needs have arisen as a result of disability, accident or illness). If the NHS assessment of need finds that the individual has a primary health need, the NHS (not Adult Social Care) must meet the individual's health needs and associated care and support needs.

[NHS continuing healthcare - NHS \(www.nhs.uk\)](http://www.nhs.uk)

[NHS Continuing Healthcare checklist](#)

The individual may still be eligible to receive support from the NHS even if they are not eligible to receive NHS Continuing healthcare. We may enter into a joint package of care with the ICB if the individual is assessed as having care and support needs and also healthcare needs.

6.15 Proportionate assessments

Proportionate assessments may take a number of forms:

- we will offer the individual the opportunity to complete a **supported self-assessment** if they are willing and have the capacity to complete it. The assessment can only be completed once we are satisfied it is an accurate and complete reflection of the individual's needs. If the individual requires specialist support (for example they are deafblind) the specialist support provider must provide assurance.
- we can carry out a self-directed assessment:
 - face-to-face;
 - over the phone (at the request of the individual);
 - online.
- we can participate in a **joint assessment** with partner agencies in order to ensure that the individual's overall needs and outcomes are mapped out with the relevant experts, enabling better coordinated care and support. This also reduces the number of assessments that the individual has to participate in;
- we can complete a **combined assessment** (assuming appropriate consent is provided), for example by assessing the individual's needs in conjunction with an assessment of their carer's needs, or their child's needs (alongside our Children Services colleagues).

In conducting the proportionate assessment we will be guided by –

- the individual’s wishes and preferences (for example about how involved they want to be in the process);
- the severity and overall extent of their needs. We may need to conduct a more detailed assessment if the individual has complex needs;
- fluctuating needs. If there is evidence/concerns about needs fluctuating over time, the assessment may need to consider more of the individual’s history in order to understand their future needs;
- considerations around whether the assessment method being considered poses a risk/ challenge to the individual, and subsequently inhibits our ability to recognise their needs (including those needs they do not or are not able to verbalise/make a representation of).

All assessments must aim to identify underlying conditions and associated needs. If a light-touch assessment highlights underlying conditions we will carry out a more detailed assessment in order to ensure that all the individual’s needs are properly mapped out.

6.16 Assessment timescales

Assessments must be carried out over an appropriate and reasonable timescale, taking into consideration the urgency of the individual’s needs, and any fluctuation of needs. The below table provides examples of circumstances which may influence the speed in which the assessment is completed –

Timescale	Circumstances
Short	<ul style="list-style-type: none"> ▪ Early enquiries establish that the individual’s needs are not related to their physical/mental disability or illness and they exhibit high levels of independence/wellbeing. ▪ The individual has complex needs and targeted interventions such as reablement will not help them to manage their needs.
Medium/long	<ul style="list-style-type: none"> ▪ There is a reasonable expectation that targeted interventions (reablement, equipment, adaptations, matched with support networks etc.) will help prevent or reduce the individual’s need to a level where any impact on their wellbeing is limited and manageable. During these interventions we may pause the assessment process in order to gauge the impact of the intervention on the individual’s needs. ▪ In order to properly understand the individual’s needs it is necessary to coordinate a combined and/or joint assessment of their needs. ▪ The individual presents with needs which dictate the pace of the assessment in order to ensure that they can be involved as much as possible (for example mental capacity concerns and/or communication issues require separate assessments and the involvement of independent advocates or specialist interpreters).

6.17 The ‘Whole family approach’

We will consider the impact of the individual’s needs on their family or other members of their support network, and consider whether it would be beneficial for those affected to receive information and advice as part of the prevent, reduce, delay agenda.

If it appears that a child provides care we will consider whether it is appropriate to arrange a needs assessment or a young carer's assessment for the child alongside our Children Services colleagues. During the individual's needs assessment, we will also consider their parenting responsibilities, the impact of the individual's needs on the child's wellbeing, the appropriateness of any care that the child provides, and how the provision of care and support will benefit the child's wellbeing.

6.18 Transition assessments

Where it appears that a child/young person is like to have needs for care and support after turning 18, we must carry out an assessment if we think that it would be of significant benefit to the child/young person. The child/young person must also consent to the assessment if they have capacity or are competent to do so, unless they lack capacity / are not competent to consent and it would also be in the child/young person's best interests to carry out the assessment.

It must include an assessment of:

- The impact on their wellbeing from their needs for care and support when they turn 18
- the outcomes they wish to achieve in day-to-day life
- whether, and if so to what extent, the provision of care and support could contribute to the achievement of those outcomes.

It must involve:

- the child/young person
- the child/young person's parents and any carer that the child/young person has, and
- any person whom the child/young person or a parent or carer of the child/young person requests us to involve.

If a child/young person refuses a child's needs assessment, we must nonetheless carry out the assessment if the child is experiencing, or is at risk of, abuse or neglect.

If we receive a request to carry out a child's assessment from a child/young person or parent/carer and we decline the request, we must give the person who made the request written reasons for the decision, and information and advice about what can be done to prevent or delay the development by the child/young person of needs for care and support in the future.

7. Eligibility determinations

Determinations about eligibility to receive on-going support from Adult Social Care can only be made following the completion of the needs/carer assessment. Assessments must be made against the national eligibility criteria.

7.1 Assessing individual with care and support needs against the eligibility criteria

We will determine whether an individual with care and support needs is eligible to receive ongoing support against the following criteria:

1. their needs arise from or are related to a physical/mental impairment or illness;
2. because of the physical/mental impairment or illness, two or more of the specified outcomes below are:
 - not possible for them to achieve at all without assistance;
 - are possible for them to achieve, however doing so:
 - causes significant pain, distress or anxiety;
 - is likely to endanger their health or safety (or that of others, for example members of their household);
 - takes significantly longer than would normally be expected.

Specified outcomes	
a. managing and maintaining nutrition b. maintaining personal hygiene c. managing toilet needs d. being appropriately clothed e. maintaining a habitable home f. being able to make use of their home safely g. developing and maintaining family/ personal relationships	h. accessing and engaging in work, training, education or volunteering i. making use of facilities/services in the local community including public transport and recreational services/facilities j. carrying out any caring responsibilities the individual has for a child

3. there is (or there is likely to be) a significant impact on their wellbeing as a result of the individual not being able to achieve 2 (or more) outcomes. We should consider whether their inability to achieve the outcomes significantly impacts–
 - on at least one area of their wellbeing (see section 7.3);
 - their wellbeing overall due to its impact on a range of areas effecting their wellbeing (a cumulative effect).

7.2 Assessing carers with support needs against the eligibility criteria

We will determine whether a carer with support needs is eligible to receive ongoing support against the following criteria:

1. their needs arise as a result of providing necessary care for an adult;
2. because of their needs, 1 or more of the specified outcomes below are:
 - not possible for them to achieve at all without assistance;
 - are possible for them to achieve, however doing so:
 - causes significant pain, distress or anxiety;
 - endangers/is likely to endanger their health or safety, or the health and safety of those that they provide care for.

Specified outcomes

- a) Their physical or mental health is (or is at risk of) deteriorating
- b) They are unable to achieve the following outcomes:
 - i) carrying out any caring responsibilities they have for a child;
 - ii) providing care to other persons for whom they provide care;
 - iii) maintaining a habitable home environment;
 - iv) managing and maintaining nutrition;
 - v) developing and maintaining family or other significant personal relationships;
 - vi) accessing and engaging in work, training, education or volunteering;
 - vii) making use of necessary facilities or services in the local community including recreational facilities or services; VIII. engaging in recreational activities

2. there is (or there is likely to be) a significant impact on their wellbeing as a result of the individual not being able to achieve 1 (or more) outcomes. We should consider whether their inability to achieve the outcomes significantly impacts–
- on at least one area of their wellbeing see section 6.3);
 - their wellbeing overall due to its impact on a range of areas effecting their wellbeing (a cumulative effect).

7.3 Determining eligibility based on the individual’s wellbeing

When considering the impact of the individual’s needs upon their wellbeing, we must assess the impact on the following areas of wellbeing:

- 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.

7.4 Decisions to meet non-eligible needs

The individual must meet all three criteria (see sections 7.1 and 7.2) in order to be eligible to receive on- going support from Adult Social Care. However, in some circumstances, we have discretionary powers under the Care Act to meet non-eligible needs and also to meet needs ‘which appear to be urgent’ before making a decision on eligibility. We can also meet needs under Disabled Facility Grant (DFG) legislation, or for those who have [No Recourse to Public Funds](#). We can choose to meet the individual’s non-eligible needs if we believe that we should. Decisions about whether to meet non-eligible needs will be made on a case-by-case basis.

7.5 Ordinary residence

Further information can be found in the [ordinary residence procedures](#) document.

Following an 'eligible' outcome, we will assess the ordinary residence of the individual before determining whether we must provide them with care and/or support. For

- individuals with care and support needs the local authority in which they usually reside is responsible for meeting their eligible needs;
- carers, the local authority in which the cared for person resides is responsible for meeting their eligible needs.

We will use the definition of ordinary residence defined in *Shah v London Borough of Barnet* (1983) to determine ordinary residence for individuals with capacity. Where the individual concerned lacks capacity a best interest decision should be used to determine their ordinary residence

We will work with our local authority partners to determine ordinary residence where it proves problematic. Where ordinary residence is not clear we will take action to meet the individual's urgent needs without prejudice if the person is physically in Newham whilst making efforts to establish ordinary residence.

For examples of ordinary residence scenarios, and for information on resolving ordinary residence disputes with other local authorities see sections 19.42-19.70 of the Department of Health's *Care and Support Statutory Guidance Issued under the Care Act 2014*.

7.6 Communicating assessment outcomes

Following the determination of eligibility, we will provide them with a copy of their needs or carer assessment and inform them of the assessment outcome. Wherever possible information will be shared electronically, if this is not possible, we will send a hard copy. We will also share a copy of the assessment with others at the request of the individual.

8. Queries, Issues and Complaints

In the event that a resident or carer is not satisfied with any aspect of the assessment or eligibility determination or has queries, this should be discussed with the allocated worker in the first instance. Should this not resolve the query / issue, this should then be escalated to the worker's line manager for their view. If at this stage that issue has still not been resolved, a formal complaint can then be raised by the resident or carer.

9. Performance and Monitoring

- Time from the start of the assessment to its completion.
- % of Adults with Care and Support needs/Carers assessed as eligible to receive on-going support.