A community care assessment is an assessment of a person’s care needs. The local health and social care (HSC) trust has a duty to assess the needs of people with dementia who may be in need of support. They also have a duty to provide services to meet these needs. When requested, they must carry out a community care assessment. This is done by staff from the trust’s social services department. If an assessment concludes that services are required, these must be provided.

This factsheet looks at why you should request a community care assessment, what it will involve, how services will be arranged, and how they will be paid for. This information applies in Northern Ireland. Different arrangements apply in England and Wales.

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Community care assessment in Northern Ireland

Why request a community care assessment?

The community care assessment (also referred to as a care assessment or a needs assessment) enables social services staff in HSC trusts to find out what the person’s care needs are. This allows them to then decide which services could help to meet those needs. The services will be provided in the person’s own home, and may include:

- equipment and adaptations
- meals on wheels
- personal care
- short break services (respite)
- day care.

Alternatively, it could be that the person’s needs would be best met through care in a care home.

It is not necessary to wait for a diagnosis of dementia before requesting a community care assessment. The HSC trust cannot arrange services unless an assessment has taken place.

How is an assessment arranged?

The assessment can be arranged through:

- the person’s GP, consultant or another relevant professional making a referral to the local HSC trust for an assessment
- the person who is seeking support and care contacting their local HSC trust for an assessment
- another person (such as a friend or relative) doing so on their behalf
- the hospital social worker if the person is in hospital.
The purpose of the assessment is to find out what the person’s needs and circumstances are, and what support they need. It is good practice for individuals and their carers to be fully involved in their own assessments and care planning.

What will the assessment involve?

The purpose of the assessment is to find out what the person’s needs and circumstances are, and what support they need. It is good practice for individuals and their carers to be fully involved in their own assessments and care planning. They play an important part in working out what services they need from the HSC trust and how their needs can be met. This is called person-centred planning.

The assessment may include finding out about:

- the person’s current living and care arrangements
- the person’s health and disabilities, and what they are and are not able to do
- the person’s concerns, and how they want to be supported; this may include details of the types of service sought and how they want the support to be arranged
- the concerns of any carers.

It may help to write down any important points before the assessment.
Assessments may involve a professional visiting the person and any carer to establish what needs the person has. The person may be asked to complete a questionnaire about their needs, which is often called a ‘self-assessment’. When someone is asked to complete a self-assessment, this should be part of the process of a wider assessment. People with dementia can be given assistance when filling in self-assessment forms, to ensure that all of their needs are considered.

In Northern Ireland, the Single Assessment Tool has been developed for assessing the health and social care needs of older people. This should lessen the need for repeat assessments and for the same questions to be asked by different agencies. It should also enable professionals from different backgrounds to get a fuller picture of the person, and to work together closely to ensure that the person receives the best possible care.

**Where will the assessment take place?**
The assessment is often carried out in the person’s home, as this gives a clearer picture of how they are coping and what support they need. If the assessment is arranged elsewhere, it should be somewhere that is convenient for the person being assessed and for their carer.

If the person being assessed is in hospital, the HSC trust may also arrange for an assessor to visit their home. This allows the assessor to get a better idea of their situation before they are discharged.

**Who carries out the assessment?**
The local HSC trust’s social services department is responsible for co-ordinating the assessment. The assessments may involve other professionals, such as doctors, nurses or representatives from other organisations, who can provide information or take part. Therefore, someone can expect a social worker to co-ordinate and carry out parts of the assessment, but they should not be surprised if another professional were also to assess them. The assessment may be completed in one visit or, if there are more complex needs, spread over several weeks.
Carer’s assessment

Unpaid carers over the age of 16 are entitled to an assessment of their own needs if they are providing, or intend to provide, substantial care on a regular basis. Carers can request an assessment of their own needs, even if the person they are caring for is not being assessed.

It is important that the local HSC trust considers needs that are already being met or will be met by the carer when making a community care assessment. One way to help ensure this is under the Carers and Direct Payments NI Act 2002. This enables carers to request an assessment of their own needs at the same time as the person they are caring for is being assessed. Carers can also ask for a direct payment so that they can arrange the service for themselves (see ‘Direct payments’ below).

The Carer’s Support and Needs Assessment component of the Single Assessment Tool should be used for assessing the needs of carers in all programmes of care. This ensures a standardised approach to assessment regardless of their location across Northern Ireland. The assessments must consider whether the carer participates, or wishes to participate, in any work, education, training or leisure activity. This recognises that carers should be able to access the same opportunities as those without caring responsibilities.

Eligibility criteria for services

The HSC trust decides if a person is entitled to receive services by comparing the person’s needs with eligibility criteria set regionally by the Department of Health, Social Services and Public Safety (DHSSPSNI).

An example of eligibility criteria currently being used are the regional access criteria for domiciliary care. These define four separate bands of need – critical, substantial, moderate and low – which reflect the severity of risk to a person’s independence if these needs are not met. Owing to financial pressures on their resources, HSC trusts will only meet critical and substantial domiciliary (home) care needs.
Potential problems with arranging an assessment
A person should not be refused an assessment for any of the following reasons:

- The local HSC trust believes the person will not meet its criteria. Trusts must not refuse people without obtaining adequate information. If it can be shown that the person may need services, then an assessment must be carried out. They may refer the person to non-HSC trust services where appropriate.

- They do not have enough staff to carry out an assessment.

- The person has enough income or savings to pay for their own care services.

If the request for an assessment is refused, the person, their carer or relative should write to the trust to explain the circumstances in more detail, or they can ask a professional or advice agency to write on their behalf. If they are still unsuccessful, they can make a complaint (see ‘Making a complaint’, below). Even if an assessment has been agreed, there may be a wait. There are no guidelines on how long people should expect to wait for an assessment, but HSC trusts should publish their estimated timescales. If the wait appears unreasonable, the relative or carer should complain to the HSC trust concerned. There may be situations where two HSC trusts dispute which of them is responsible for a person’s care, and this could delay the assessment.

In law, the HSC trust where the person lives at that time has the responsibility.
What happens next?

Producing a care plan

Once it is decided that the person has needs which make them eligible for support, the HSC trust has a duty to provide sufficient support to ensure that these are met.

The person who carried out the assessment should write a ‘care plan’. This describes which services are to be provided. The person with dementia and their carer should be closely involved in the development of the plan.

The care plan should include:

- the needs that have been identified
- the desired outcomes and how they can be met
- a risk assessment
- a plan for dealing with emergency changes
- the result of any financial assessment
- the support that carers are willing and able to provide
- the support to be provided to meet the assessed needs
- the date on which the plan will be reviewed.

The person with dementia and their carer should be given a copy of the care plan. If they are not, they should ask for one. They should also be given the name of the person responsible for ensuring that services are then provided, often known as a care manager. The care manager can be contacted if there are any difficulties. People who pay for their care with their own money can still benefit from a care plan, to help them to make the best use of their resources.
How are services arranged?
The local HSC trust will give the person with dementia or their carer the option to arrange their own support services (see ‘Direct payments and personal budgets’ below). The carer will need to be considered to be a ‘suitable person’ – the local HSC trust has criteria on who this can be. Services may be provided directly by the HSC trust or arranged through other agencies, such as health or housing providers, or voluntary or private organisations.

Some services, such as community nursing, are arranged through the GP, either directly or after discussion with social services.

How long do services take to arrange?
In some cases, the HSC trust may provide a service straight away. Once it has been agreed that services are needed, the HSC trust must ensure that these are provided. However, there may be a wait while they are organised. There should not be excessive delay. If there is likely to be a delay, the HSC trust may find another way to meet the assessed need until the desired service can be provided.

What are reviews?
People’s circumstances change, so the services they receive should be reviewed from time to time. Reviews take place to see whether the person’s needs have changed. Care plans should be reviewed at times or intervals specified in the care plan (for example, within the first six months and then annually), or as needs change. If there is a change in the situation of the person with dementia or their carer, they should contact the local HSC trust, whether or not a regular review is due. They should also contact them if they feel that they need more help, or different kinds of services.
Will I be charged?

Financial assessments

HSC trusts can charge for the services that they arrange. However, charges are not usually made for domiciliary care services, with two notable exceptions. These are the home help scheme (where charges may be made on a means-tested basis) and the provision of meals on wheels (which has a non-means-tested charge). Means testing is where your income and savings are taken into account to determine whether you will need to pay for services. A financial assessment will always be carried out where placement in a care home is required.

When a financial assessment is required, only the person receiving the services will be financially assessed. The HSC trust will calculate the cost of the services to be provided (such as home help, residential care) and then financially assess the person using the regional charging policy to see how much the person can contribute to the cost of the services. The HSC trust must provide a breakdown of how they calculated the charge.

If the person with dementia needs to move into a care home, the local trust will assess the person’s income and savings according to regional rules.

Direct payments

Rather than receiving services arranged by the HSC trust, the person with dementia or their carer may instead choose to be given a ‘direct payment’ from the HSC trust so that they can arrange the services themselves. The local trust must be satisfied that the person is willing and able to manage a direct payment, either alone or with assistance (see factsheet NI431, Direct payments).

Direct payments may offer more choice and flexibility, but they can be complicated. Some people feel reluctant to take on the responsibility of managing their own services. The HSC trust must support the person managing a direct payment, which may be through voluntary or charitable services.
If someone has been able to consent to receiving direct payments but is not able to manage them because they lose the capacity to do so, then the trust may continue to make direct payments. This is only if a suitable person is prepared to handle them instead. This person must be prepared to manage the direct payments and care package on a day-to-day basis on behalf of the person and in their best interests.

Making a complaint

If the person with dementia or their carer has a complaint, it is advisable to try and address it with the person they have contact with, for example the assessor or care manager. There may simply have been a failure in communication or a misunderstanding that can be easily rectified. However, if this is not successful, there is a trust’s complaints procedure. The HSC trust will explain how to use this. The complaints procedure might be useful if:

- there are problems arranging an assessment
- there is an unreasonably long wait for an assessment
- the services needed are not provided, or are unsatisfactory.

If the HSC trust’s complaints procedure does not resolve the issue either, you can take your complaint to the Northern Ireland Ombudsman (see ‘Other useful organisations’ at the end of this factsheet).
Finding out more

Assessment procedures in Northern Ireland are governed by legislation and regional guidance. The DHSSPSNI publishes information on:

- who is eligible for assessment and how to apply
- what kinds of services might be arranged
- how to make representations (speaking about the matter on behalf of the person) and complaints.

Write, phone or call in to your local HSC trust’s social services department to ask for the appropriate leaflets. The address will be in the phone book under the name of the HSC trust. Leaflets may also be available at local libraries.

For details of Alzheimer’s Society services in your area and information about a wide range of dementia-related topics, visit our website at alzheimers.org.uk

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Other useful organisations

**Age NI**
0808 808 7575 (free advice service)
info@ageni.org
www.ageuk.org.uk/northern-ireland

Age NI provides information and advice for older people in Northern Ireland.

**Carers Northern Ireland**
028 9043 9843
info@carersni.org (for general information)
advice@carersni.org (for advice on caring)
www.carersuk.org/northernireland

Carers Northern Ireland provides information and advice to carers about their rights, and how to access support.

**Northern Ireland Ombudsman**
0800 3434 24
nipso@nipso.org.uk
nipso.org.uk

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