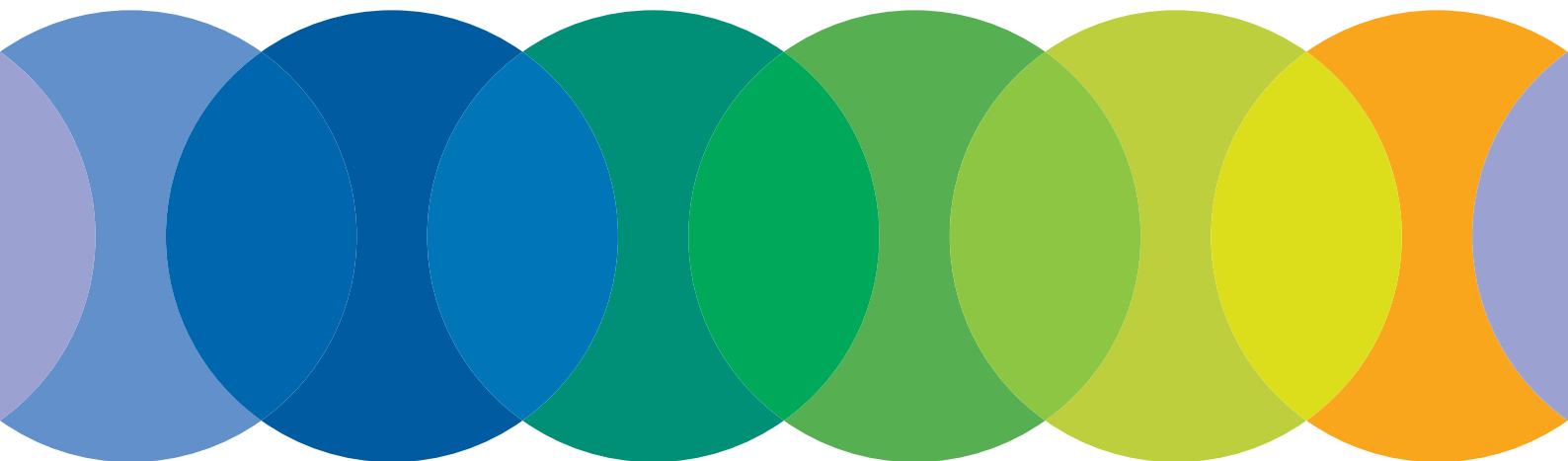


Balancing need:

The relationship between carers' assessment and needs assessment



Balancing need: The relationship between carers' assessment and needs assessment

Introduction

The views, needs and rights of carers are becoming increasingly important. The Care Bill, soon to be passed into law as the Care Act 2014, proposes that 'carers will be recognised in the law in the same way as those they care for' (DH, 2013). Changes in the Care Bill mean that carers who are over 18 and caring for an adult will be entitled to an assessment of their needs for support and the outcomes they wish to achieve.

In addition, where carers meet the relevant local authority eligibility thresholds, they will be directly entitled to support. This increased recognition of, and support for, carers has been a welcome step (Carers UK, 2013b; Carers Trust, 2013). However, important questions arise about how local authorities can implement these new rights in practice.

Recent research on assessment for older people and carers highlighted that, for six social workers across two local authorities in England, a key concern was what to do when an assessment of a carer's needs conflicts with an assessment of a service user's needs. For example, one social worker stated:

"...the [carer] might be saying 'I can't cope with Mum any more, Mum needs to go in a respite placement so I can have a break'. Mum is refusing to go, she won't go to a respite placement, so there's a clash there; how do you manage that?"

Social worker LA1/3 (Webber, 2014)

In this situation the choice of the service user must be respected. For example, a social worker in a different local authority said:

“...what’s really difficult is sitting down and saying [to the carer] ‘yes I understand you’re knackered and you’re really tired but your mum has to make that decision about whether she wants to go into residential care’ and if [Mum’s] sitting there going ‘no, I’m fine’... that’s really hard.”

Social worker LA2/5 (Webber, 2014)

In this situation “often carers will just continue being exhausted” (social worker LA1/2, Webber, 2014). They are offered support but “it’s second best” (social worker LA1/3, Webber, 2014).

Given the importance of this issue to the social workers interviewed, and the changes in the Care Bill which enhance the rights of both carers and service users, this Key Issue explores previous research on carers’ assessments before setting out the changes to legislation and policy proposed in the Care Bill. It then looks in more detail at the ways in which carers’ assessments are being conducted across six local authorities. While this exploration is not a comprehensive guide to assessment practice across England, it:

- > provides examples in order to stimulate debate about how carers’ assessments are conducted
- > highlights benefits to each approach so that other local authorities can consider if these approaches would work in their area
- > emphasises areas to think about within each approach, as there may be difficulties or problems.

The conclusion draws together key ideas for local authorities, managers and practitioners to consider in their future work.

Balancing need: The relationship between carers' assessment and needs assessment

Key messages

- > Research shows that many carers have experienced difficulties with assessment.
Difficulties encountered with assessment include:
 - access
 - recognition of needs
 - privacy
 - consistency
 - resources available for the provision of services.
- > Changes proposed in the Care Bill try to address these problems and put carers on an equal footing with service users. Local authorities will, therefore, need to address the important issue of how to balance the needs of service users with the needs of carers.
- > There are many different types of carers' assessment: simple assessments; joint assessments; and separate carers' assessments conducted by either the same practitioner as the service user, a different practitioner or a third party (usually a carers' organisation). Each of these assessment types has both benefits and disadvantages for carers, service users and local authorities.
- > Where needs conflict, each party requires support and local authority processes could focus on facilitating negotiation. Local authorities, managers and practitioners could also think about services which would be acceptable to a service user but also support the carer.
- > **Local authorities, managers and practitioners will need to carefully consider the following in preparation for new assessment rights under the Bill:**
 - the number of people needing assessments
 - the way assessments are conducted
 - the importance of individual support for carers and service users, but also the importance of the relationships between these parties and a practitioner
 - the practical application of eligibility criteria
 - the provision of services
 - the delegation of duties and assurance by local authorities
 - the new duties in the Care Bill and Children and Families Bill focusing on a whole family approach to assessment.

Key research: Difficulties with carers' assessments

Before the *Carers (Recognition and Services) Act 1995* (CRSA) there was no framework for assessing carers' needs (Ellis, 1993). The CRSA introduced a right for carers to be assessed in conjunction with an assessment of the service user. This right was then extended to a right to a separate assessment in the *Carers and Disabled Children Act 2000* (CDCA) and local authorities had a duty to inform carers of this right following the *Carers (Equal Opportunities) Act 2004* (CEOA).

Research highlights difficulties with carers' assessments under this legislation (for example see Carers UK, 2013). In 2007, Seddon et al found that only 45 per cent of carers in England had received an assessment and the Social Policy Research Unit state that few of the carers they interviewed had had an assessment (SPRU, 2013). This may be due to:

- > carers not being informed of their rights to an assessment (Arksey et al, 2000; Robinson and Williams, 2002; Carers UK, 2003; Audit Commission, 2004)
 - > people viewing themselves as friends, partners or family rather than identifying with the label of carer and so rejecting a 'carer's assessment' (Seddon et al, 2007; Rand and Malley, 2014)
 - > the purpose, outcomes and way in which assessments are conducted not being understood, both by carers and/or practitioners (Banks, 1999; for further discussion see Gillies, 2000).
- Problems have also been found with:
- > **Access**
Carers accessing and finding their way around local authority processes (Rand and Malley, 2014).
 - > **Needs recognition**
Carers' assessments not recognising individual needs (Parry-Jones and Soulsby, 2001; Seddon and Robinson, 2001; RiPfa, 2011; Carers Trust, 2012).
 - > **Privacy**
Lack of privacy in the conduct of assessments. For example, Seddon and Robinson (2001) note that 83 per cent of carers were assessed with the person they care for present.
 - > **Consistency**
That carers are assessed inconsistently not only between local authorities but also *within* different teams (Fruin, 1998; Arksey et al, 2000; Carers Trust, 2012).
 - > **Experience of assessment and review**
Once the assessment is complete it has been found that some carers do not know they have been through an assessment (Seddon and Robinson,

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2001; Seddon et al, 2007) and there have been issues with monitoring and review (Parry-Jones and Soulsby, 2001).

> Outcomes

Many carers see the process as having no outcome (Skills for Care, 2013).

> Available resources

Some local authorities have a fixed rate in place, while others operate Resource Allocation Systems (Carers Trust, 2012).

These difficulties can be seen in recent research carried out by Carers UK and Carers Week (2013). The quotes below highlight the difficulties, worries and problems the carers had with assessment:

"Every year Mum was assessed they just put more work on me. Her additional care package went from around 24 hours per week to around 11 hours. This just added more strain on myself, so I didn't ask for an assessment myself as assessments always ended up cutting any help rather than giving it."

(Carers Week, 2013)

"When I initially requested an assessment...I was told that I could not have one unless social services took on my parents' case...It was only at a later date that I found out via the council website that I was entitled to an assessment in my own right. [I] felt the whole thing was a battle."

(Carers Week, 2013)

"Our care plan was carried out by a trainee, there was a lack of understanding and it was embarrassing to speak honestly on how you were coping and how it affected my relationships, it was a young person who I felt didn't have a clue about life!"

(Carers Week, 2013)

Scourfield (2010) ties practical difficulties with assessment to the possibility that practitioners are struggling to balance the different conceptualisations of carers. He recommends the introduction of separate carers teams to alleviate the confusion faced by

frontline workers over the roles of carers and how to balance them with the needs of service users. Scourfield then emphasises the need for ‘mediation’ in order to address the inevitable adversarial roles this would create between teams.

However, previous research highlights that there may be problems with separating the assessments of carers and service users. For example, it may be difficult to identify the needs of the carer in isolation from the needs of the service user (Seddon and Robinson, 2001). Similarly, Seddon et al (2007) emphasise that ‘there is a danger that the quality and dynamics of [caring] relationships may be lost somewhere between the separate assessments of the two parties involved’ (Seddon et al, 2007).

This research also highlights that the move towards self-assessment (for example tick-box self-assessment forms) is no replacement for face-to-face contact. In contrast to Scourfield’s recommendation that the assessments of carers and service users should be separate, this focus on relationships leads to a more holistic approach to assessments; they should recognise the practical, emotional, psychosocial and temporal aspects of caring (Seddon and Robinson, 2001).

Research conducted by the Social Policy Research Unit explored the perspectives of senior people within

local authorities, frontline staff, service users and carers to look at ‘how current English adult social care practice balances the interests of service users and carers in assessment, planning, ongoing management and reviews of personal budgets, particularly when budget-holders have cognitive or communication impairments’ (SPRU, 2013). Key findings include:

- > Joint assessments of service user and carer needs were being conducted.
- > As service user personal budgets can be reduced if help is given by a carer, some practitioners are ‘selective’ in how they record the role of carers.
- > Service user personal budgets were discussed at the same time as assessments were carried out, meaning there was no time for separate carers’ assessments to feed in to this process.
- > Few carers had had a carers’ assessment and ‘not all’ remembered being offered one.
- > Practitioners were often confused about how to conduct carers’ assessments and how to link these to assessments of service users.
- > Few carers had received a separate grant of their own. Support provided to carers was often a ‘short break’ and this was included in the service user personal budget and support plan.

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The Care Bill: Proposed changes to carers' assessments

The Care Bill changes previous legislation and guidance in a number of important ways:

Area	Previous legislation and guidance	The Care Bill
Access to assessment	Carers had to request an assessment as the local authority did not have a duty to carry one out as soon as a potential need came to their attention. However, the CEOA 2004 s.1 did impose an obligation on the local authority to inform carers of their right to an assessment.	s.10(1) of the Care Bill states that where it appears to a local authority that a carer may have needs for support, the authority must assess whether they do and what those needs are. This applies to both current and future needs. This duty also applies regardless of the level of a carer's needs for support or the financial resources of the carer (s.10(4)(a) and (b)).
Who is entitled to an assessment?	Before a carer was entitled to an assessment they had to show that they provide 'substantial and regular care' (CDCA, 2000 s.1(a)).	Other than carers being unpaid, there are no requirements which must be met before a carer is entitled to an assessment. A 'carer' is defined as 'an adult who provides or intends to provide care for another adult' (s.10(3)) except where this is under a contract or part of voluntary work, unless the local authority thinks this is appropriate (s.10(9) and (10)).

Area	Previous legislation and guidance	The Care Bill
The conduct of assessments	<p>With regards to conducting assessments, practitioners had to ‘take into account the outcomes the cared for person would like to see for themselves and the carer, and the outcomes the carer would like to see for the cared for person as well as for themselves. Understanding these may be crucial in negotiating any conflicts of interest that might arise’ (DH, 2001a).</p> <p>Guidance stated that carers assessments should be conducted in private, away from the person they care for, so that carers can be ‘candid’ about their views (DH, 1996 and DH, 2001a). In addition, ‘during assessment, no assumptions should be made about the level or quality of support available from carers’ (DH, 2010c) and ‘where carers’ services are being provided arrangements for review should be similarly put in place’ (DH, 2010c).</p>	<p>The Care Bill provides a detailed framework for assessment, for example:</p> <ul style="list-style-type: none">> s.1 of the Care Bill creates a general duty for local authorities to promote an individual’s well-being. This includes promoting the well-being of carers during assessment processes and decisions about eligibility.> s.10(5) states that the purpose of a carers’ assessment is to look at whether carers are willing and able to provide care, the impact of their needs for support, the outcomes carers wish to achieve and how support could contribute to those outcomes.> s.10(6) states the assessment must also take into account whether the carer wishes to participate in work, education, training or recreation.> s.10(7) states the local authority must involve the carer when carrying out an assessment, and also any person the carer asks the local authority to involve.> s.12 states that further regulations will be provided which give further details on the conduct of assessments.

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Area	Previous legislation and guidance	The Care Bill
Who can carry out an assessment?	Responsibility for carrying out an assessment could be delegated, but <i>not</i> a decision about eligibility.	Local authorities can now delegate a decision on eligibility to third parties (s.78) as well as the carrying out of an assessment.
Eligibility	Following a carers' assessment there was no duty to provide a service to the carer: 'If the results of a carer's assessment indicate that the carer has needs which pose a risk to the sustainability of their caring role, the local authority has a duty to consider whether or not to provide services to the carer, but...a discretion as to whether or not to provide them' (DH 2010c).	Where carers are assessed as having needs which meet national eligibility criteria, local authorities must consider what can be done to meet those needs (s.13(4)). Local authorities then have a duty to meet those needs (s.20) as long as the service user is ordinarily resident and criteria regarding charging for care are met. The needs of service users and carers moving from one local authority to another are also considered by the Care Bill (DH, 2013c).



These changes are designed to address many of the problems identified by research. They ‘treat carers as equal to the person they care for – putting them at the centre of the law and on the same legal footing’ (DH, 2013b). However, with carers now on an even footing, there are a number of questions raised:

- Q What will be done if there is a conflict between the needs and outcomes for a service user and a carer?**
- Q What are the implications of providing services to a service user and/or carer and how do different charges impact on this (for example a service user may refuse a service they are charged for, even where this supports the carer)?**
- Q If assessments or eligibility decisions are delegated, how are these brought back together with local authority processes?**

Thinking about these questions leads to a discussion of approaches to conducting carers’ assessments.

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Current initiatives: Carers' assessments in six local authorities in England

Research in Practice for Adults partners were asked to answer the following questions:

- 1) How do you (or your organisation) conduct carers' assessments at the moment? What do you think is good about this approach? What do you find difficult or think could be improved?
- 2) What do you (or your organisation) do when a carers' assessment conflicts with a needs assessment (for example the carers' assessment identifies a need for respite services but the service user refuses this option)? What do you think is good about this approach? What do you find difficult or think could be improved?

Responses were received from four local authorities (LA3, LA4, LA5 and LA6). Two third sector organisations which conduct carers' assessments also responded (the Carers Support Centre in LA3 and the Carers Support Centre acting across LA1 and LA2). In further clarification to the initial questions, two local authorities and the Carers Support Centres thought about the effect of assessment processes on the different parties involved (the carer, the service user, the practitioner, the local authority and any third party organisations) and the relationship between these groups.

While not a full survey of current initiatives or good practice, these examples can be used to:

- > stimulate debate about approaches taken to balance carers' assessments with needs assessments
- > highlight areas which some local authorities consider to be working well
- > raise areas to consider in the future.

The focus of this Key Issue is the assessment of over 18s who are caring for someone who is also over 18.

Other important issues for local authorities are the assessment of young carers and parents caring for disabled children:

- > The Carers Trust (2014) provide a summary of the current system for assessment of young carers.
- > The Care Bill s.58-66 makes provision for young carers and parent carers under a section on 'transition for children to adult care and support'.
- > The Children and Families Bill (DfE, 2014) creates new duties to assess both young carers and parent carers (Gove, 2013).

The Care Bill s.12(1)(a) states that the assessment of a service user must 'have regard to the needs of the family'. It is also likely that future regulations will emphasise 'a whole family approach to assessing and supporting adults' (Gove, 2013).

Different types of assessment

Across the local authorities there were a wide range of different assessment ‘types’. A single local authority often uses multiple types of assessment, applying each to different situations:

Local Authority	Simple Assessment	Joint Assessment	Carers’ assessment by the same practitioner as the service user	Carers’ assessment by local authority based carers’ team	Carers’ assessment by third party organisation
LA1	✓	✓	✓		
LA2					✓
LA3		✓	✓		✓
LA4			✓ (currently)		✓ (in future)
LA5		✓		✓	
LA6		✓	✓	✓	

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A simple assessment

A simple assessment is a carers' assessment which may lead to a one-off payment or episode of support from a local authority.

In LA1, carers go through a simple assessment in order to access a one-off payment of up to £500, which is designed to support the carer to have a break. This is only available where both the carer and the service user do not already receive services from the local authority. This assessment can either be conducted by the Integrated Carers' Team within the local authority or by several commissioned agencies (such as the Carers Support Centre). The Integrated Carers' Team Manager reviews the assessments and makes the final decision on whether a one-off payment can be granted to help the carer achieve the break identified in the assessment.

The benefits of this type of assessment include:

- > Taking a preventative approach, so that carers do not develop higher levels of need.
- > Carers with low needs can achieve good outcomes.
- > Carers supporting service users who have refused services benefit greatly.

- > 'There is a lot of evidence that those carers feel recognised and valued by the process and start to take on board the importance of taking time out for themselves' (Carers Support Centre, LA1).

Areas to consider:

- > The Carers Support Centre (LA1) notes that the simple assessment can only lead to a one-off payment, *not* further support from the local authority.
- > Some carers with higher needs (who therefore go through a joint or separate carers' assessment with a local authority practitioner) are offered less than carers with lower needs who go through a simple assessment.

Joint assessment and carers' assessment conducted by the same practitioner as that of the service user

A joint assessment is an assessment of a carer which is conducted at the same time as that of the service user, by the same practitioner and recorded on the same form as the service user's assessment. It is also possible for the practitioner who assesses the service user to conduct a separate carers' assessment; this takes place at a different time to the service user's assessment and is a separate form and process. These two types of assessment are discussed together here as they are conducted by the same person who assesses the service user.

In LA3, carer outcomes and problems are recorded on the service-user assessment form under sections on 'relationships' or 'help provided' as a matter of course (so not necessarily a 'formal' joint assessment, but ensuring that carers' needs are always recognised).

A joint assessment is more commonly used where providing a service for the cared-for person will help the carer as well (for example help to get up in the morning). Carers are also offered a separate carers' assessment. They are asked if they are happy for this to be conducted by the Carers Support Centre (see

section on assessment by third party organisations) or, if not, this can be conducted by the practitioner.

Only LA1 provides *only* these types of assessment to carers. Two local authorities use these types of assessment alongside having a local authority based Carers' Team or Carer Support Team. In LA6, if the service user is not allocated or there is a conflict, a Carers' Assessment Worker from the local authority based Carers' Team can conduct the assessment. In LA5, a joint assessment can be completed, but they have found that the majority of carers are referred to the local authority based Carer Support Team.

The benefits of joint assessments or assessments conducted by the same practitioner as that of the service user include:

- > The carer already knows the practitioner: "I think the reason in my allocated work that I sometimes do the carers' assessment myself is because they have been complex pieces of work and the carer has built up a relationship and prefers not to have to explain things to a new person" (social worker, LA3/1).
- > The practitioner may be best placed to find a compromise between the service user and carer, as they know both people.

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- > A practitioner in this position may be able to better discuss the caring situation with the service user.

- > Practitioners are more aware of carers' needs.

One local authority whose current carers' assessment is conducted by the same practitioner as that of the service user, LA4, is replacing this assessment type with a system where assessments are conducted by a third party. This is due to recognition of the difficulties with one practitioner assessing both the service user and the carer. **Areas to consider include:**

- > A practitioner assessing both parties may be caught up in any conflict between different needs or may side with one party over another.
- > LA4 identifies that 'social workers' focus tends to be on the cared for person', noting that 'with current financial and time pressures, carers may not be prioritised' (social worker, LA4).
- > Support for carers may get stuck at this assessment stage as a practitioner cannot go against a service user's wishes.
- > Those conducting carers' assessments may have different levels of knowledge about how to conduct the assessment and the support available to carers, leading to inconsistency.

Carers' assessment conducted by a local authority based Carers' Team

A separate carers' assessment can also be conducted by a separate practitioner (one who does not assess the service user). LA5 and LA6 both have Carers' Teams located within the local authority who conduct these separate carers' assessments.

LA5 states that, technically, the local authority Carer Support Team should be used where a carer needs a more in-depth assessment or there is a conflict between the carer and service user, but they have found the majority of carers are referred to this separate team. The process focuses on identifying needs for information, signposting, emotional support and other services or support. It is emphasised that this is not a 'shopping list' approach; each assessment is tailored to the individual and family unit, ensuring their situations are recognised and maintaining a focus on choice and control.

In LA6, the Carers' Team conduct assessments where there is no case manager involved with the service user or there are areas of conflict.

The benefits of this approach include:

- > Carers' assessments are given a high priority.

- > ‘Carers’ assessment workers can mentor and support other colleagues to become more skilled in carrying out carers’ assessments and they carry out surgeries within the teams’ (Carers’ Team, LA6).
- > Where a conflict of needs is apparent, both the service user and the carer can be supported. The practitioner for the service user and the practitioner for the carer work together to identify solutions.
- > Carers’ assessments can be dealt with efficiently.

Areas to consider:

- > The carers’ assessment may identify needs of the service user which then have to go back to the social work team.
- > Social care staff can ‘lack the experience or confidence to work with carers, particularly where there is a conflict of needs’ (Carer Support Team, LA5).
- > LA6 in particular notes that the Carers’ Team is only small (three workers to cover the city across all client groups). This presents difficulties for review (which can only be conducted on request, although this is built in to the joint assessment when the service user is reassessed).

Carers’ assessment conducted by a third party organisation

Separate carers’ assessments can also be conducted by third party organisations. Both LA2 and LA3 have commissioned the Carers Support Centre (network partners of the Carers Trust) to conduct carers’ assessments. In LA2 this applies to all assessments for carers. LA3 offer carers the choice between a local authority based assessment and a Carers Support Centre based assessment.

In LA3 the Carers Support Centre have (limited) access to the local authority IT system so that both organisations can see and work from the same assessment. There is a clear flow-chart in place which sets out the process to be followed. The carers’ assessment focuses on identifying stress and was drawn up in consultation with carers and Carers UK. Once the assessment is complete, the Carers Support Centre creates a care plan which is sent to the local authority duty desk and they compare this to the assessment. If no funding is needed this can then be signed off by the practitioner; otherwise a funding request can be sent for authorisation. The Carers Support Centre does the initial assessment but, after this, reviews are conducted by the local authority.

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The benefits of a third party organisation conducting assessments include:

- > A greatly reduced waiting list (LA3).
- > Carers' assessments are conducted for those who would not have contacted a local authority.
- > The organisation is carer-focused and so can provide a more meaningful experience for the carer, both during the assessment and in identifying support.
- > The assessment is entirely focused upon the carer; they obtain specialist advice and can be offered a range of services.
- > Carers have space to discuss what can be an emotional issue.
- > Carers' Services have in-depth local knowledge of services available to carers (LA4 are in the process of introducing this kind of assessment).

Areas to consider include:

- > How to balance service user and carer needs where these conflict (for example a service user may not want respite or may not want to pay for a service).
- > As the Carers Support Centre only conducts the initial assessment and not reviews, there are issues around where to place people who have had an initial assessment but did not require services and whose situation then changes.
- > LA3 identifies issues with self-assessment, including the time to complete and send back forms, along with any follow-up calls needed.
- > Although not raised by those who responded to the questions, there may also be difficulties if the local authority were to disagree with the assessment of a third party organisation.

Dealing with a conflict between the needs of service users and the needs of carers

Where there is a conflict between the needs of the service user and the needs of the carer, LA3, LA6 and the Carers Support Centre for LA2 emphasise that a separate carers' assessment conducted by someone other than the practitioner for the service user is beneficial, as it identifies the needs of carers and ensures that one worker is not caught up in a conflict between the two parties. A separate carers' assessment is crucial in documenting the needs of carers and a separate assessor can support the carer to 'assert their own needs' (Carers Support Centre, LA2). It may also be beneficial to involve an independent advocate for the carer and/or the service user to ensure both parties' needs are discussed and addressed.

A key word noted by LA3 was 'negotiation'. They highlight that the way in which needs are identified separately but are then brought back together is crucial; there needs to be negotiation between the service user, the carer and the practitioners of each in order to find a solution which is acceptable to everyone. LA3 also highlight that any potential risks need to be highlighted to the service user so that they understand any difficulties the carer and they may face in the future.

In relation to this emphasis on negotiation, LA6 highlight the importance of 'spending time with the service user to help them understand the impact for the carer and to look at other ways they could be supported to give the carer a break' (Carers' Team, LA6). They state that approaching the situation from the perspective of the carer is beneficial. One approach they use is to work with a short break service that provides 1:1 training in the home for carers; they find that service users and carers often agree to this and a care worker then comes in to the house to help the carer. This allows the service user to get to know the care worker and, later, they may agree to more support.

A similar approach is to offer 'fictional carers' services' (Clements, 2012). This is particularly useful where the service user refuses an assessment. *Practice Guidance* (DH, 2001) gives the example of Jim, a substantial and regular carer who does all of the laundry for his mother Elsie. Currently, under s.2(3)(a) of the *Carers and Disabled Children Act* (CADCA) 2000, the council could provide a cleaning and laundry service at Elsie's house as a service provided to Jim but delivered to Elsie. The hope would be that Elsie would then agree to her own assessment. Jim would

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be liable for any charge. A service provided to the carer may be delivered to the person being cared for as long as:

- > the service could be a community care service
- > the service user and the carer agree to the service being provided to the carer
- > the services are not of an intimate nature.

A comparable approach is included in the Care Bill:

- > Some or all of a carer's needs for support may be met by provision of support to the service user even if the local authority would not be required to provide services under a separate service user assessment (s.20(7)).
- > If it is not feasible to provide support to the service user, the local authority must identify another way to meet the needs of the carer (s.20(8)).

A key difficulty, highlighted by LA6, arises when practitioners (either a practitioner working with both parties or separate practitioners) do not have the time to spend working with the family; this may mean needs are not recognised or the possible impact on carers cannot be fully explored. This is particularly relevant within a context of shrinking budgets and increasing workloads for practitioners.

Conclusion: Areas to be considered by local authorities, managers and practitioners in the future

The relationship between carers' assessment and needs assessment is complex; local authorities have a number of carers' assessment types, each with benefits and disadvantages for carers, service users and the local authorities themselves. Changes proposed in the Care Bill and the areas to consider about each type of assessment above raise crucial areas for local authorities, managers and practitioners to think about in more detail:

Area	Key points	Possible implications
<p>The number of people who need an assessment</p>	<ul style="list-style-type: none"> > Broader access to assessment (ie no need for carers to request an assessment or to provide substantial and regular care) means a greater number of carers are likely to need assessments. > Similarly, the change in care-funding to a capped-cost model (meaning those who self-fund will need to be assessed) means more carers are likely to be identified and so need an assessment. > The numbers needing an initial assessment will also have to be considered when planning for reviews. 	<ul style="list-style-type: none"> > The numbers of carers and service users needing assessments may mean local authorities have to create new processes in order to identify types of assessment which will be proportionate in different situations. > Increasing numbers of people who need an assessment may also mean greater numbers of staff or delegation to third parties is needed.

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Area	Key points	Possible implications
Conduct of assessments – general	<ul style="list-style-type: none">> The more detailed framework for carers' assessments (for example the duty to promote an individual's well-being; looking at the outcomes carers wish to achieve; and any further guidance or regulations) will have to be incorporated in to assessment processes.> Conduct of carers' assessments is currently inconsistent, as staff have different levels of skill and experience.	<ul style="list-style-type: none">> Local authorities will need to review all types of assessment to ensure they meet relevant duties or guidelines.> Local authorities, managers and practitioners may also need to consider further training to ensure carers' assessments are conducted in the best way possible.
Conduct of assessments – the importance of individual support	<ul style="list-style-type: none">> Where needs do conflict, both the service user and the carer may benefit from individual support and someone to advocate on their behalf.> Carers' organisations offer specialised advice, support and services. They also reach carers who would not approach local authorities.> Practitioners' expertise is valuable, particularly when negotiating and dealing with complex cases.	<ul style="list-style-type: none">> Local authorities need to consider the support available to both carers and service users when conflict arises over care provision.> Processes could be put in place in order to facilitate negotiation between the parties.

Area	Key points	Possible implications
<p>Conduct of assessments – the importance of relationships</p>	<ul style="list-style-type: none"> > There are benefits to a carer having an ongoing relationship with the person conducting the assessment (for example they are more comfortable discussing their needs; see also Webber, 2014). > Practitioners conducting service user assessments need to be able to consider the role of the carer and understand their potential needs when planning support for the service user. > A carers' assessment may identify service user needs. 	<ul style="list-style-type: none"> > Local authorities will need to carefully consider who is undertaking carers' assessments and how these relate to needs assessments. As the service user and carer's needs are likely to be closely intertwined it will be difficult to completely separate out assessments; if separate assessments are conducted it is therefore crucial to look at processes for bringing the two assessments back together. > Practitioners may need to think individually about how they assess both service users and/or carers.
<p>Eligibility</p>	<ul style="list-style-type: none"> > The importance of prevention. > If eligibility decisions are delegated to third parties there is a risk that the system will become very fragmented. 	<ul style="list-style-type: none"> > Where eligibility decisions are delegated alongside assessments, local authorities may want to set out clear guidelines for data-sharing between parties (for example, of care plans). This will need to be incorporated in to assessment processes.

Balancing need: The relationship between carers' assessment and needs assessment

Area	Key points	Possible implications
Provision of services	<ul style="list-style-type: none">> The creation of a duty to meet carers' needs (as long as they meet eligibility criteria) is likely to mean greater provision for carers.> Who is a service being provided to? This is crucial, as it affects who is charged for a service and whether it adds to the care account for the purposes of a cap. It also affects who has control over the service.	<ul style="list-style-type: none">> Local authorities will need to consider the resources available to carers and put clear guidelines in place when deciding who a service is provided to.> If supporting a carer involves providing chargeable care to the service user, the authority must carry out a financial assessment of the service user (as the care would be provided directly to that adult and not to the carer). This should include replacement care which is provided for the disabled person to enable the carer to have a break.> There are currently inconsistencies in how local authorities approach who a service is provided to and, therefore, the charge for such services; these are crucial issues to address.

The changes proposed in the Care Bill ensure carers are put on an even footing with service users, meaning both parties' needs should be recognised and addressed. The way carers' assessments are conducted is likely to affect both the identification of needs and how needs are then balanced when creating a care plan.

While the Care Bill changes the framework and focus of assessment, it is vital that this is accompanied by a change in culture within local authorities to ensure historical issues with the assessment and provision of services for carers are addressed.

This is particularly crucial where the needs of a carer conflict with those of a service user; each party will need individual support, but the relationship between the two must also be recognised so that the needs of both parties can be balanced effectively.

References

- Arksey H et al (2000) *Carers' Needs and the Carers Act: An Evaluation of the Process and Outcomes of Assessment*. University of York: Social Policy Research Unit.
- Audit Commission (2004) *The effectiveness and cost-effectiveness of support services to informal carers of older people*. London: Audit Commission.
- Banks P (1999) *Carer Support: Time for a change of direction? A Policy Discussion Paper*. London: King's Fund.
- Carers Trust (2012) *Progressing Personalisation: A review of personal budgets and direct payments for carers*. Available online: www.carers.org/sites/default/files/progressing_personalisation.pdf
- Carers Trust (2013) *Briefing 2: In depth briefing on the Care Bill*. Available online: www.carers.org/sites/default/files/carers_trust_care_bill_briefing_2_.pdf
- Carers Trust (2014) *Assessment for Young Carers: England*. Available online: professionals.carers.org/young-carers/articles/assessments-for-young-carers-england,3076,PR.html
- Carers UK (2003) *Missed Opportunities: The Impact of New Rights for Carers*. London: Carers UK.
- Carers UK (2013) *Evidence-based planning and delivery of local support for carers: Findings and feedback from a survey of local authority carers' leads in England*. Available online: www.carersuk.org/media/k2/attachments/Evidence_based_planning_and_delivery_of_local_support_for_carers_1.pdf
- Carers UK (2013b) *Care Bill - Second Reading Briefing*. Available online: www.carersuk.org/media/k2/attachments/Care_Bill_-_Second_Reading_Briefing_Dec_2013_1.pdf

Balancing need: The relationship between carers' assessment and needs assessment

Carers UK and Carers Week (2013) Unpublished quotes from engagement with carers for research carried out by Carers UK and Carers Week.

Clements L (2012) *Carers and their Rights: The Law Relating to Carers. 5th Edition.* Carers UK.

Department for Education (DfE) (2014) *Children and Families Bill 2012-2013 to 2013-2014.* Available online: services.parliament.uk/bills/2012-13/childrenandfamilies.html

Department of Health (DH) (1996) *Carers Recognition and Services Act 1995: Policy Guidance and Practice Guidance.* London: DH.

DH (2001) *A Practitioner's Guide to Carers' Assessments under the Carers and Disabled Children Act 2000.* London: DH.

DH (2010) *Prioritising need in the context of Putting People First: A whole system approach to eligibility for social care. Guidance on Eligibility Criteria for Adult Social Care, England 2010.* London: DH.

DH (2013) *Factsheet 8: The Care Bill – The law for carers.* Available online: www.gov.uk/government/uploads/system/uploads/attachment_data/file/268684/Factsheet_8_update__tweak_.pdf

DH (2013b) *The Care Bill explained: Including a response to consultation and pre-legislative scrutiny on the Draft Care and Support Bill.* Available online: www.official-documents.gov.uk/document/cm86/8627/8627.pdf

DH (2013c) *Factsheet 9: The Care Bill - continuity of care when moving between areas.* Available online: www.gov.uk/government/uploads/system/uploads/attachment_data/file/268685/Factsheet_9_update.pdf

Ellis K (1993) *Squaring the circle: User and carer participation in needs assessment.* Joseph Rowntree Foundation.

Fruin D (1998) *A matter of chance for carers? Inspection of local authority support for carers.* London: DH.

Gillies B (2000) 'Acting Up: Role Ambiguity and the legal Recognition of Carers'. *Ageing and Society*, 20(4), pp.429-434.

Gove M (2013) *Children and Families Bill: Young Carers.* Available online: www.gov.uk/government/speeches/children-and-families-bill-young-carers

Parry-Jones B and Soulsby J (2001) 'Needs-led assessment: the challenges and the reality'. *Health & Social Care in the Community*, 9(6), pp.414-428.

Rand S and Malley J (2014) 'Carers' quality of life and experiences of adult social care support in England'. *Health and Social Care in the Community.* First View.

RiPFA (Research in Practice for Adults) (2011) *Working Together, Interim Report.* RiPFA: Dartington.

Robinson C and Williams V (2002) 'Carers of People with Learning Disabilities, and their Experience of the 1995 Carers Act'. *British Journal of Social Work*, 32(2), pp.169-183.

Scourfield P (2010) 'Understanding Why Carers' Assessments Do Not Always Take Place'. *Practice*, 17(1), pp.15-28.

Seddon D et al (2007) 'In their Own Right: Translating the Policy of Carer Assessment into Practice'. *British Journal of Social Work*, 37(8), pp.1335-1352.

Seddon D and Robinson CA (2001) 'Carers of older people with dementia: assessment and the Carers Act'. *Health & Social Care in the Community*, 9(3), pp.151-158.

Key Issues

Skills for Care (2013) *Carers assessments: Workforce development opportunities based on carers experiences - Research with carers and Carers Trust network partners.* Available online: www.skillsforcare.org.uk/Document-library/Skills/Carers/Carersassessments.pdf

SPRU (Social Policy Research Unit) (2013) *Carers and personalisation: What roles do carers play in personalised adult social care? What roles do carers and service users want carers to play?* Available online: sscr.nihr.ac.uk/PDF/SSCRResearchFindings_12_.pdf

Tsegai A and Gamiz R (2013) *Carers Assessment and Outcomes Approaches to Working with Carers: A Joint Project between Midlothian Council and VOCAL Midlothian Carers Centre.* Scotland: CRFR/IRISS. Available online: www.vocal.org.uk/assets/files/downloads/PROP%20Report%202013.pdf

Webber SH (2014) *The Lost Elements of Care: An Ethic of Care and Social Care Assessment for Older People and Carers in England.* Unpublished doctoral thesis: University of Bristol.

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