The Care Act
An introduction

The Care Act became law in 2014 and introduced various changes to the way in which care is delivered. This affects anyone who receives social care funding or services, including residential care and support in the community. The Act aims to give more control to the person receiving care, where possible and should put your views, wishes and aims at the centre of your care planning.

Principles of the Act

The main principle of the Care Act is that we should change our approach to care needs by:

- **‘Preventing’** – act early to stop people from developing social care needs. For example, provide information on local support groups to stop someone needing one-to-one support due to Mental Health concerns.
- **‘Delaying’** – act to make people’s care needs develop as slowly as possible. For example, making changes to their home so they can stay out of expensive residential care for longer.
- **‘Reducing’** - act in a way that lessens people’s needs over time. For example, employment support to make someone more independent.

The idea is to act early with low-level interventions that may mean that you do not reach crisis point and need to access high levels of care. This also means that there should be a real focus on personalisation of care and allowing you to choose what sort of support you would most like and need. If a care plan is written, you should be involved in the process at every stage. All information should also be available in several formats to make it accessible to everyone.

Another main feature is that services will be joined up across education, health and social care. This fits in with new legislation changing Statements and Learning Difficulty Assessments into EHC Plans. All of these services will have to work together to support people with all of their needs.

Eligibility for care

The Act changes the way in which you are assessed, by introducing new national minimum eligibility criteria. If you are eligible for social care, you can choose whether to let the Local Authority control your package and buy in the services you need, or you can request a Personal Budget.

What is a Personal Budget?

Personal Budgets are sums of money agreed by the Local Authority to pay for your eligible social care needs. This budget can be managed in various ways including self-directed support. Self-directed support is a system where you are in control of choosing and paying for services you use, instead of the services being decided by the Local Authority. If you use this system then your Personal Budget will be given to you to buy your services with. You will have a support plan, agreed with the Local Authority, which sets out how you want to live your life and the support you need to achieve your goals.
Concerns about the Act

Funding
The reality is that budgets are being cut and there are less staff available to provide social care support. As such, any changes to social care will need to save money and cut costs. This is a concern for vulnerable people as it is possible that this will affect the level and quality of care.

‘Prevent, delay, reduce’
Preventing, delaying and reducing the need for care has the potential to be a positive step for autistic people, who often need relatively minor supports to gain significant confidence and independence. However, it also risks some people’s needs not being properly recognised and met. For example, information and advice about a local social group may be great for a lonely elderly woman, but may not be enough for a lonely autistic person. If you lack the confidence and skills to engage with that group, then you will not receive the support you need and may lose your confidence entirely.

There may be an unsatisfactory level of understanding of autism
The Act briefly mentions people who have fluctuating needs but their examples do not suggest a full understanding of how differently a person with autism may present on different days and at different times. This shows a basic lack of understanding of autism and how it may affect someone. The criteria for care also do not account for people who need prompting to perform everyday and self-care tasks, which leaves many people with autism vulnerable to neglect and isolation.

The National Minimum Eligibility Criteria may be set too high for most people
The new criteria for access to social care are set quite high and this is a concern for some people. You may be vulnerable or in need of some support but not meet these fairly restricted standards and will therefore struggle to access services.

How well trained are the people delivering the changes?
The Act states: “Local Authorities must ensure assessors have received suitable and up to date training to carry out assessments. They must also have the skills and knowledge to carry out the assessment of specific conditions that they are being asked to assess, for example when assessing and individual who has autism, learning disabilities, mental health problems or dementia.” (Care and Support Statutory Guidance, Chapter 6, p.82) But our concern is that the amount and type of training is not specified. This leaves the issue open to interpretation and may mean that assessors receive only basic training to work with people with complex and hard-to-define needs. This also applies to staff who handle referrals and enquiries. They need to be fully informed about the changes and the effect they may have on you and your experience.
Conclusion

While the aims of these changes are good and allow people more control over their care, some thought needs to be given to the ways in which vulnerable people will be affected. All parties need to understand what is expected of them and more support needs to be given to help people make the most of the new approach.

Useful resources


*Education, Health and Care Plans* - Information sheet produced by Autism West Midlands and available at www.autismwestmidlands.org.uk/helpadvice/downloads