

FAIR ACCESS TO CARE SERVICES POLICY GUIDANCE

COMMENTS OF ASSOCIATION OF DISABLED PROFESSIONALS

1 Interpretation

- 1.1 Given the definition of an assessed need and its juxtaposition with the note that it falls within the council=s eligibility criteria and the reference to the council having the resources to meet the need, there is little need to explain why we lack confidence in the guidance as a means of improving deteriorating local authority services. It seems patently obvious that eligibility criteria must vary with available resources; the former becoming stricter as the latter become scarcer. We cannot agree to this.
- 1.2 While services cannot be delivered regardless of resources, the fact that there is no strict, mandatory legislation governing services means that eligibility criteria can and will be used to ration services.
- 1.3 The guidance is therefore unlikely either to improve matters in individual areas or to decrease the variation in services between areas.

2 Eligibility criteria

- 2.1 As currently drafted, the criteria would not appear to be easily workable.
- 2.2 It is not clear what factors within each of the four framework bands have to be met to merit allocation to one or other of the four bands. Do all the factors have to be met, or just one or two? If the latter, how many and which ones are more important than others?
- 2.3 Each factor ends with a semi-colon except the penultimate in each band which ends in an Aor@. Is this Aor@ intended as a true logical OR?
- 2.4 The word Aand@ appears in a number of factors (eg roles and responsibilities, choice and control, support systems and relationships). Are these Aands@ intended as true logical ANDs?
- 2.5 A number of factors within each of the four framework bands demand overly subjective judgements: eg major or significant health problems, many or some significant or several social support systems and relationships, most or some significant or several or one or two family and social roles and responsibilities. This subjectivity will frustrate efforts to secure uniform application.

2.6 We regret that only some aspects of what could be termed quality of life are included in the criteria. We believe that the quality of life is as important as health and safety. In referring to quality of life we are thinking about such mundane features of daily living as not turning the livingroom into a bedroom, not making adequate heating available only in one room, not putting a commode into the living room, and not making people eat only sandwiches at weekends. In enabling disabled people to manage their daily routines some local authorities introduce these forms of 'help' and, by so doing, destroy their quality of life. The guidance should cover these issues.

3 Resources

3.1 We note para 8, Interpretation, para 13, Setting the eligibility criteria, and para 40, Reviews, of the consultation draft, July 2001:

'In this guidance, 'assessed need' is defined as a set of problems and issues, faced by an individual, for which a council will provide services because the assessed need falls within the council's eligibility criteria and it has the resources to meet the need. 'Eligibility criteria' describe the full range of assessed needs that will be met by councils, having taken resources into account.'

Later, in para 13, it is pointed out that 'Councils should review their eligibility criteria at least annually. If there are major changes in a council's financial position....then they may wish to review their criteria more frequently.'

Finally in para 40 it is noted that reviews should 'help determine users' continued eligibility for support.'

3.2 We note that the overriding aim of the Guidance is to provide greater consistency in the way in which eligibility for adult social care is determined and to make sure that where it has been decided to provide services, people with similar assessed needs should receive services that deliver equivalent outcomes, no matter where they live.

3.3 As the Guidance makes clear that the availability of resources governs the eligibility criteria which in turn determine assessed needs, and as there is no clear statutory duty to provide resources to provide any care services, we believe that this aim will be frustrated.

4 Conclusion

4.1 Although the Guidance provides some useful advice, we believe that, in combination with the forthcoming advice on Fairer Charging Policies for Home Care and other non-residential Social Services, it will lead to no improvement whatsoever in local authority services for adult

disabled people.

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3 October 2001