

DUNDEE CITY COUNCIL

REPORT TO: SOCIAL WORK COMMITTEE – 17 JUNE 2002

**REPORT ON: IMPLEMENTATION OF FREE PERSONAL AND NURSING CARE;
ELIGIBILITY CRITERIA FOR COMMUNITY CARE SERVICES**

REPORT BY: DIRECTOR OF SOCIAL WORK

REPORT NO: 534-2002

1.0 PURPOSE OF REPORT

This report advises the Social Work Committee of the statutory responsibilities of the Local Authority to implement free personal and nursing care. It also seeks approval to introduce eligibility criteria and priorities for access to, and provision of, community care services.

2.0 RECOMMENDATIONS

It is recommended that the Social Work Committee: -

2.1 Notes the new statutory duties that will pass to the Local Authority and the arrangements that have been put in place for free personal and nursing care, as outlined in paras 7.1 to 7.15.

2.2 Approves the introduction of eligibility criteria, as outlined in paras 7.16 to 7.21.

3.0 FINANCIAL IMPLICATIONS

Dundee City Council's indicative allocation of funds from The Scottish Executive for the implementation of Free Personal Care in 2002/03 is £3.018m. This is made up of £1.202m for fees for self funding care home residents and £1.816m to compensate for the reduction in income to the Council and to provide for investment in community care services infrastructure.

As a condition of the allocation from The Scottish Executive the Council will be required to identify separately the expenditure from these additional resources. The information gathered by this monitoring will be used by the Executive to inform future funding arrangements for the policy.

4.0 LOCAL AGENDA 21 IMPLICATIONS

The use of this operational policy and guidance document will help meet the needs of vulnerable individuals within the city.

5.0 EQUAL OPPORTUNITIES IMPLICATIONS

This report takes account of the right of individuals to have fair and equal access to services and resources to optimise their position in the community.

6.0 BACKGROUND

- 6.1 On 1 July 2002 the Scottish Executive is introducing free personal care for individuals aged 65 or over. Free nursing care is also being introduced for Care Home residents of all ages. No payments can be made for nursing care provided in the community as this is already provided free of charge by community district nurses. Local Authorities will be responsible for implementing arrangements and making payments on behalf of the Scottish Executive.
- 6.2 This policy follows recommendations made in the Royal Commission on Long Term Care (Sutherland) Report (1999), the Report of the Chief Nursing Officer for Scotland's Group on Free Nursing Care (2001) and the Fair Care for Older People Report from the Care Development Group (2001).

Definitions of Care

- 6.3 The Scottish Executive issued general definitions of personal care although further work has been required locally to provide clear guidance to staff who will have to separate personal from non-personal care tasks.
- 6.4 In addition, there is close linkage between housing support services, which will be provided through the Supporting People framework from 2003, and some elements of personal care that require consideration.

7.0 WHAT DUNDEE IS DOING

- 7.1 The Local Authority must ensure that all individuals aged 65 or over who receive a service for personal care, will cease to be charged from 1 July 2002. This requires an immediate review of existing service user care packages, estimated to be around 700 individuals.

Services Commissioned from Private or Voluntary Providers

- 7.2 Where the Local Authority commissions services for personal care and these are provided by private or voluntary agencies, the Local Authority will make arrangements for payments to be made to the provider. This may require establishing new contractual arrangements. At present we have contractual arrangements with 4 providers although we purchase care on behalf of individuals from around 10 providers.
- 7.3 Individuals who currently have private arrangements with agencies for personal care (ie. not arranged by the Local Authority) and who wish to apply for a contribution towards this from public funding, will require to have a full needs assessment undertaken by the Local Authority. Private and voluntary agencies estimate that this could be up to a further 150 individuals. Only those individuals assessed as requiring the service will be eligible for payment.

Assessments

- 7.4 It is anticipated that there will be an increase in the demand for personal care services in the community as a result of a shift from informal to formal care. The Care Development Group in their report 'Fair Care for Older People' suggested that there could be a 12% increase in demand for formal services. This has resulted in an increase in requests for new assessments, in addition to the increased reviewing activity that is necessary before 1 July 2002. Additional temporary staff has been appointed to support this increased assessment activity.

- 7.5 Eligibility for free personal and nursing care will be subject to an assessment of need carried out by the Local Authority (with the exception of existing service users and those in care homes at 31 March 2002). Assessments will be carried out in accordance with existing assessment and care management principles incorporating the principles of single shared assessment that will be introduced later this year. The Scottish Executive is currently piloting a national resource use measure (RUM) which, if introduced, will also be used to inform entitlement to free personal and nursing care.
- 7.6 Individuals who were resident in care Homes at 31 March 2002 and who are responsible for paying their own fees will automatically be eligible to claim a contribution towards their personal and nursing care needs.
- 7.7 Individuals who entered Care Homes after 31 March 2002 and who are responsible for paying their own fees, will be required to have a full needs assessment from the Local Authority to determine their eligibility for a contribution towards their personal and nursing care costs from 1 July 2002.

Payments and Contract Mechanisms

- 7.8 Payments (or cessation of charging) will not begin before 1 July 2002, ie. they will not be backdated. From 1 July 2002, payments will only be made once the service is in place.
- 7.9 Individuals in Care Homes who are responsible for paying their own fees may be eligible for a contribution towards personal and nursing care costs. Payments for personal care will be £145 and payments for both personal and nursing care will be £210. This will require contractual arrangements to be put in place between the Local Authority and the Care Home. There are currently 148 individuals in this category.
- 7.10 Payments for personal and nursing care will be made directly to provider agencies or Care Homes, unless individuals opt for a direct payment arrangement in the community. At present, this is not available in Dundee although the Social Work Department has recently appointed two workers to establish direct payment arrangements.
- 7.11 Individuals in the community who have private arrangements with care workers must request that the care worker starts to work for an approved agency or opt for direct payments, in order to receive payments towards personal care.
- 7.12 The Local Authority will continue to use existing contract and payment mechanisms with provider agencies and Care Homes, developing these where necessary, eg. Spot purchase, block contracts. Measures have been taken to ensure that robust recording systems are in place to enable accurate charging for non-personal care services.
- 7.13 The Scottish Executive has described three routes for contractual arrangements in Care Homes and has recommended use of a nationally consistent contract.
- 7.14 The community care guidance is currently being revised and will include information on charging, assessment, and access to services and eligibility criteria. A series of seminars are being held to provide community care staff with the necessary information around free personal and nursing care, single shared assessment and RUM.
- 7.15 It will be necessary to establish baseline figures in order to measure shifts in the balance and volume of care, including cross border placements. The Scottish Executive has suggested templates for providing quarterly returns of the deployment of available resources. Baseline figures will be established at the first return in June.

Eligibility Criteria

- 7.16 The Scottish Executive state that 'Local Authorities will need to have in place agreed eligibility criteria for assessments of need and priorities for the provision of and access to services based on need.' (Circular No. CCD 4/2002).
- 7.17 Eligibility criteria are important as they:
- Make sure that people who have the greatest need and who are most at risk receive services first.
 - Make sure that people are dealt with fairly
 - Make sure that people understand the basis on which decisions are made.
- 7.18 The Social Work Department has produced 'priority of need' categories and eligibility criteria to determine access to, and provision of, community care services.
- 7.19 The categories of need are set out as high, medium or low (Appendix I). Each service area within community care has assigned priority for allocation of resources (Appendix II).
- 7.20 The eligibility criteria will be a useful guide for care management and social work teams in terms of managing the distribution and allocation of resources. The criteria will provide an objective basis for allocating resources according to priority of need.
- 7.21 A high degree of professional judgement will be required in applying the criteria, bearing in mind the complex circumstances of individuals that are often not easy to define. There may be instances where staff will have to apply discretion; nonetheless, the criteria will assist in providing clarity for individuals and staff about the responsibilities of the Community Care Services.

8.0 CONCLUSION

- 8.1 Dundee City Council must introduce free personal and nursing care and this report outlines how this will be implemented across the city.

It is also necessary to have clear eligibility criteria and priorities for access to, and provision of, services based on individuals' needs. This report presents eligibility criteria and priorities that will achieve this outcome.

9.0 CONSULTATION

- 9.1 The Director of Support Services has been consulted in the preparation of this report.
- 9.2 Service users were also consulted widely, including older people, people with physical disabilities, minority ethnic groups and people with learning disabilities.

10.0 BACKGROUND PAPERS

No background papers, as defined by Section 50D of the Local Government (Scotland) Act 1973 (other than any confidential or exempt information), were relied on to any material extent in preparing the above report.

11.0 SIGNATURE

Director of Social Work

Date

31 May 2002

APPENDIX 1

DUNDEE CITY COUNCIL SOCIAL WORK DEPARTMENT COMMUNITY CARE SERVICES

The following categories and accompanying guidelines (opposite page) should be used in conjunction with eligibility criteria to determine priority for access to, and provision of, community care services.

- Priority is given to those who are most at risk and/or in greatest need.
- The following **assessed needs** must be present in order to access community care services. **Note - It is not necessary to meet all of the criteria to be eligible.**
- *May be eligible for specialist schemes eg Combined Care at Home, Early Supported Discharge Scheme, Health & Social Care Partnership, Crisis Support, Orthopaedic Rehabilitation Scheme.

HIGH PRIORITY (serious risk)

1. Person is unable to meet basic needs eg eating, drinking, toileting, maintaining a warm, safe environment, mobility problems (or has carer who requires support to enable these needs to be met).
2. Person requires regular and frequent, or constant, supervision and support.
3. Person requires services to enable safe discharge from hospital.*
4. Current care circumstances are in crisis eg carer admitted to hospital.*
5. Person has acute health crisis, not requiring hospitalisation*.

MEDIUM PRIORITY (moderate risk)

6. Person can meet basic needs but experiences some difficulty or risk.
7. Person requires moderate supervision and support.
8. Person is socially isolated.
9. Person has rehabilitation needs*.

LOW PRIORITY (low or no risk)

10. Person already has support network in place.
11. Person requires minimal support for personal care tasks, eg weekly bathing.
12. Person requires assistance with housework.

GUIDELINES

HIGH PRIORITY (serious risk)

1. This includes shopping for food, preparation/delivery of meals and assistance to eat if required; continence issues including catheter and stoma care; mobilising and transfer to include pressure area care. This priority will also apply where a carer provides the care but requires support and/or regular respite.
2. This includes people who lack insight as a result of eg moderate or severe dementia, cognitive impairment; prone to wandering; danger to self or others eg falls or fires; people at risk of abuse; unable to summon help.
3. Or otherwise would be in category 1 or 2 above; may access Early Supported Discharge Scheme, Orthopaedic Rehabilitation Scheme.
4. Person would then fit category 1 or 2 above; may access Crisis Care Support Team.
5. Again, category 1 or 2 must apply; may access Combined Care At Home.

MEDIUM PRIORITY (moderate risk)

6. Difficulty due to frailty, reduced mobility, physical or mental health problems.
7. For example, person has mild dementia, no wandering or behavioural problems, copes with one or two visits per day from carer.
8. This may be as a result of mental health problems, anxiety, life crisis eg bereavement.
9. Could achieve greater independence with continued support, or could deteriorate without

support, may be eligible to access Health & Social Care Partnership.

LOW PRIORITY (low or no risk)

10. Has good support but could benefit from additional or enhanced support.
11. Manages personal hygiene otherwise eg. stripwash; no continence problems; no skin conditions.
12. Providing no other factors present eg surgery, asthma.

NB

ALL SITUATIONS should be reviewed no later than four weeks following the introduction of services. Where services are provided to facilitate discharge from hospital, there may be an entitlement to free care at home for up to four weeks. (Please refer to Home Care Leaflet and separate guidance for further information on free care at home).

MACKINNON CENTRE RESPITE UNIT

What is respite care?

This service is designed to supply short residential breaks for adults who have a physical disability and/or a progressive illness. Priority for service will be determined by the level of assistance or supervision required for daily living, and whether or not this is supplied by a husband or wife, family member, friend or by paid services.

Level of service available for each priority group

High Priority

- People whose living arrangements would break down without regular breaks.
- People who require planned breaks to help maintain their health or the well-being of their carer.

Medium Priority

- People who require the opportunity for a planned break in order to maintain or promote independence.

Low Priority

- People whose quality of life may be improved by a break.

People who will not qualify

- People whose needs can be met more appropriately by other services or facilities.
- People who require rehabilitation, assessment of health issues or recovery, which is the responsibility of the Health Services.

CARE IN CARE HOMES

What is a care home?

Care in a Care Home is provided for people whose needs are of a nature and intensity throughout the day and night that this cannot be provided by home based support or carers and where the continual skills and support of qualified residential or nursing staff are required.

Level of service available for each priority group

High Priority

- People who have regular, often unpredictable, health, personal, social or emotional care needs requiring a high level of support throughout the day and night.
- People who would be at a high level of risk if continuous intervention, support, re-assurance and supervision was not reliably and regularly available.
- People who have a high level of needs requiring care (including nursing) in a specialist setting where staff have the skills and expertise to meet their needs.

Medium and Low Priority

- People with medium or low priority needs will not be eligible for nursing home care.

PERSONAL ASSISTANCE SCHEME

What is personal assistance scheme?

The Personal Assistance Scheme offers people flexibility and control of their care arrangements by enabling them to recruit, employ and manage their own Personal Assistants. People on the Scheme are in the age group 16-65, have a physical disability or progressive illness and are willing and able to manage the day to day arrangements for any assistance they may require.

Level of service available for each priority group

High Priority

People who need a high level of assistance with the personal, domestic and social aspects of daily living, who wish to live independently in their own homes, who are able to and want to self-manage their own care arrangements and where doing so will enhance their quality of life.

Medium Priority

People who have a moderate to high degree of need for personal assistance and where being in control of their care arrangements will enable them to live independently in their own homes and enhance their quality of life

Low Priority

People who have minimal need for support with personal, domestic and social care needs will not be eligible for the Scheme.

TRANSPORT

High Priority

- People with no other means of transport
- People with disabilities that require constant supervision and possible intervention
- People who are at risk due to communication or cognitive impairments.

Medium Priority

- People who would have difficulty with mobility to and from bus stops.
- People who prioritise the use of their taxi card for essential journeys.
- People who have limited stamina to cope with independent travel and/or multiple bus changes.

Low Priority

- People who can safely access public or private transport.

THE MACKINNON CENTRE

What is the Mackinnon Centre?

The Mackinnon Centre is a skills development centre for adults with physical disability and/or progressive illness. The physical disability may be acquired or congenital. The acquired disability may be static or may be of a progressive nature.

The purpose of the service is to facilitate people to achieve or maintain their optimum level of independence while acquiring the necessary skills, support, and advice to achieve identified aims.

Level of service available for each priority group

High Priority

- People who have recently acquired a physical disability or progressive illness which requires the individual to re-learn old skills in order to recover a measure of independence, quality of life and identity.
- People with a progressive illness where the individual wishes to adapt existing skills and thereby maintain a level of independence, and quality of life.
- People who can clearly identify aims in terms of re-training with a view to employment, re-housing, further education, or independent living.
- People with communication or cognitive impairments who require support and access to an environment which is understanding of their specific needs.
- People who require a level of physical support which would be unavailable in any other existing service.

Medium Priority

- People who require ongoing support to maintain existing skills.
- People who would find it difficult to access existing resources due to physical limitations, cognitive or communication impairment.

Low Priority

- People in supported or nursing accommodation where there is an expectation on the care provider to provide emotional and recreational support.
- People with no communication or cognitive or mobility impairments who could access community resources.

THE ABILITY CENTRE

What is the Ability Centre?

The Ability Centre is a Disabled Living Centre accredited with the Disabled Living Centre in Manchester.

The purpose of the centre is to offer information and advice on practical ways of overcoming a variety of difficulties associated with disability or illness.

The centre has on display a range of products for easier living from eating and drinking equipment to hoists and bathing equipment.

There is an open access policy and the service is available to people with a disability, carers both paid and unpaid and professionals. Although an appointment is not always necessary, it is recommended that contact is made with the centre prior to visiting.

Contact

The Ability Centre

491 Brook Street

Broughty Ferry

Dundee

DD5 4DZ

Tel. 01382 436860

Fax.01382 436859

e-mail abilitycentre@dundeecity.gov.uk

OCCUPATIONAL THERAPY SERVICES

What are Occupational Therapy Services?

The Occupational Therapy Section provides a service to disabled people of all ages. This includes those who are having difficulty due to illness or disability. The service may be delivered in conjunction with other social work or health services. The service will seek to maximise peoples' independence through the provision of advice and assistance or by arranging for the provision of equipment or adaptation based on the individual's assessed need.

Level of service available for each priority group

High Priority - (Where the person's situation is dependent upon immediate support).

People who have a terminal illness.

People who are newly diagnosed or suspected of having a progressive neurological condition.

People who require immediate assistance in order to facilitate discharge from hospital.

People who are having difficulty with essential personal care tasks eg toileting, getting in and out of bed, eating and personal safety issues.

Medium priority - (People who are not at immediate risk, but whose situation would deteriorate without intervention).

People whose conditions are chronic, but not life threatening.

People who are having difficulty with transfers and mobility eg bed, chair, stairs.

People who are unable to bathe or otherwise maintain personal hygiene.

Low priority - (Where there is no risk to the individual, but where assistance or advice would enhance the quality of life).

For example, the reassessment in situations where assistance has already been provided, the provision of additional external rails, assistance with regards to parking.

In certain circumstances Low Priority referrals will be directed to the Ability Centre where they will be provided with a range of advice and assistance with regards to their illness or disability.

DIRECT PAYMENTS

Direct Payments is an arrangement whereby the Department provides individuals with cash to arrange their own services as an alternative to services being arranged by the Department. This option will be available on a limited basis in the near future.

The focus of Direct Payments will be on people who need a high level of assistance with all aspects of their care. They will be people who are able and willing to manage their care (with or without assistance) and where doing so will enhance the quality of their life and will allow them to live independently in their own home.

Additional information will be available to Care Managers and to the public in the near future.

RESPITE CARE

What is respite care?

Respite care services provide relief from the responsibilities of caring for someone. They are designed to help carers continue in their caring role by giving them a break.

They can also provide a change of environment for service users, together with an opportunity to learn more skills and become more independent by being away from home and daily routines.

Different kinds of respite care service may be available:

- in a care home
- in a carer's home
- in your own home

If respite care is being considered, staff will discuss your options with you, depending on your needs and the availability of services.

Level of service available for each priority group

High Priority

If you are given a high priority and are assessed as needing a respite care service, you may receive this service for up to 56 nights each year according to your needs.

Medium Priority

If you are given a medium priority and are assessed as needing a respite care service, you may receive this service for up to 28 nights each year according to your needs.

Low Priority

If you are given a low priority, you will not be eligible for a respite care service.

Category >	HIGH	MEDIUM	LOW
Service			
Nursing Home	+	--	--
Residential Home	+	--	--
Personal care	+	+	+
Housework	+	+	+
Shopping	+	+	+
C/alarm	+	+	--
Meals	+	+	--
Laundry	+	+	+
Day-care	+	+	--
Evening-care	+	+	--
Skills centre	+	+	+
Equipment	+	+	+
Adaptations	+	+	--
Rehabilitation	+	+	--
Transport	+	+	+
Supported accom	+	+	--
Respite	+	+	+
Night care	+	+	--
Special care schemes	+	+	--
Carer's support	+	+	+
Personal.Ass.Sch	+	+	--
Direct payments	+	+	+

+ = eligible

■ = not eligible

HOME CARE SERVICE

What is Community Based Social Care?

Community Social Care staff will adopt methods of care which promote independence and encourage individuals to maintain their skills of daily living and social interaction.

The range of tasks can include:

personal care - personal hygiene, bathing, showering, hair washing, shaving, and oral hygiene.

continence management - assisting with toilet needs, catheter/stoma care (only with nursing support and supervision).

food and diet - assistance with eating and assistance with special diets (unless supporting the maintenance of skills, meals will be delivered from a central facility).

problems of immobility - dealing with the consequences of not being able to move independently.

counselling and support - emotional support and social interaction.

personal assistance - to get up and go to bed, assistance with dressing, transfers which can include using a hoist.

social support - to participate in events of family and community life.

The service can also support groups of individuals who have assessed needs to participate in activities.

Level of service available for each priority group

Our responsibility is to provide services to people in the community who most need help. There is a considerable demand for Home Care Services and, while services are delivered to people with very different levels of need there is a system of prioritisation.

High Priority

The individual is unable to meet their basic needs without care and support. You will have your assessed community social care needs met up to the equivalent cost of maintaining you in a care home which provides nursing care. In exceptional and time limited circumstances, you will have your community social care needs met for up to 168 hours per week.

Medium Priority

The individual can meet their basic needs but experiences some difficulty or risk or has rehabilitation needs. You will have your assessed community care needs met to the equivalent cost of maintaining you in a care home which provides residential care.

Low Priority

The individual already has a support network in place and requires minimal support for personal care tasks. You are unlikely to have had social care needs identified in your assessment, but where these have been identified, you may receive these to the equivalent cost of higher rate attendance allowance.

Community Based Social Care

What is Community Based Social Care?

Community based Social Care is a range of care and support services and tasks carried out in an individual's own home to meet their personal and social care needs.

Overnight Social Care Service

What is Overnight Social Care?

Overnight Social Care is a range of Community based Social Care and support services and tasks carried out in an individual's own home to meet their personal and social care need between 10.00 pm and 8.00 am. *The service is only available for a period of 3 months with possible extension to 6 months while alternative arrangements are made for your overnight care.* This service is specific to those whose care needs have been assessed as crisis or high priority.

Interval Social Care Service

What is Interval Social Care?

Interval Social Care is a range of Community based Social Care and support services and tasks carried out in an individual's own home at various times during the night, when a carer does not need to be present all night. This service is specific to those whose care needs have been assessed as medium to high priority.

Social Care for People with Dementia

What is Social Care for People with Dementia?

Social Care (overnight) for people with dementia, is a range of Community based Social Care and support services with tasks carried out in an individual's own home to meet personal and social care needs. This service is specific to those who have a diagnosis of dementia. This service offers main carers overnight respite for up to 3 nights per week and is accessed by care managers.

This service is available to those with high priority needs.

Social Care Crisis Service

What is Social Care Crisis Service?

The Social Care Crisis team work in collaboration with Care Managers to prioritise support to individuals in their homes during a period of crisis.

To access this service the individual must be known to Care Management for Older People, or Care Management for people with Physical Disabilities. Individuals must be living in the community when the crisis occurs and therefore this service does not accept hospital discharges.

This service is specific to those whose care needs have been assessed as "high priority".

Practical Support Services

What are Practical Support Services?

Practical support services carry out household tasks on the basis of an assessment of the individual's capability to undertake these themselves. The range of tasks include:

Laundry - assistance with laundry (or dealing with the effects of incontinence). The service will wash, dry and iron clothing.

Meals - provision of meals from a central facility to meet dietary and nutritional needs.

Shopping - delivery of essential shopping or escort service to shops.

Housework - maintenance tasks, such as dusting, 'hoovering', bed making, dish washing, cleaning the toilet. This service will not undertake heavy household chores such as changing curtains, putting up blinds. The service will not undertake cleaning to eradicate health hazards.

Household maintenance team - this service will provide 'handyperson' support to undertake essential, minor house maintenance tasks, such as changing curtains, moving items of furniture, minor repairs and decoration, putting up blinds within existing fittings, checking plugs and fuses, providing a risk assessment to household dangers.

Practical support services will be organised in a way, which promotes independence and encourages individuals to maintain their skills of daily living and social interaction.

Level of service available for each priority group

All of the above will be provided following the completion of a full assessment of need, which identifies the individual's priority of need together with an appropriate care plan and risk assessment. This assessment and care plan should identify the overall objective of the provision of Social Care services, the needs, tasks, frequency these are required to be met, methods to be used, skills required and who the key worker or care co-ordinator will be. All services will be the subject of review, which will take account of how effective the care plan has been in meeting the overall objective.

High Priority

Assessed practical support needs will be met as part of the social care provided. The cost of these services will be included in the total cost, up to the equivalent cost of care in a care home which provides nursing care.

Medium Priority

Assessed practical support needs will be met as part of the social care provided. The cost of these services will be included in the total cost, up to the equivalent cost of care in a care home which provides personal care.

Low Priority

Assessed practical support needs in this category will be met subject to the capacity and availability of service.

Community Alarm

What is Community Alarm?

Community Alarm is an electronic call system, which enables an individual to summon assistance when needed. When activated or triggered, the alarm makes an automatic call to a control centre, which is constantly staffed by experienced and trained operators.

The operators will ask questions to help gauge what you need, or, failing any response from you, will arrange for an emergency call out or a visit to assess the situation. The operators are also able to summon emergency services such as, fire, police, ambulance, depending on the circumstances.

Health and Social Care Partnership

What is Health and Social Care Partnership?

Health and Social Care Partnership provides social and nursing care, at home, to vulnerable older people, who would otherwise remain in hospital or be admitted to a care home. It is a collaborative service between Dundee Local Health Care Co-operative, Community Nursing Service and Dundee City Council, Social Work Department. Individuals must be aged 65 years and over, and have nursing or rehabilitation needs. A full assessment will have been carried out by a Care Manager.

High Priority

- People who have regular, often unpredictable health, personal, social or emotional care needs requiring a high level of support throughout the day.
- People who would be at a high level of risk if intermittent intervention, support, reassurance and supervision is not reliably and regularly available.
- People who have a high level of care needs, including nursing, where staff have the skill and experience to met these needs.
- People who have needs relating to a rehabilitation plan.

Medium and low priority

- People with medium and low priority needs are not eligible.

Early Support Discharge for Rehabilitation at Home ORTHOPAEDIC

The aim of this joint initiative between Dundee City Council and Tayside Health Board is to offer a seamless approach to the care and rehabilitation of people at home by offering a secure transition from orthopaedic wards to the individual's home. All service users must be assessed in hospital to ensure they are able to undertake basic living tasks. Social care officers work alongside Physiotherapists and Occupational Therapists as well as Nurses and General Practitioners to ensure people are independent within 28 days of discharge. As the individual becomes more independent, the visits from the social care officers are reviewed and reduced accordingly. This process continues until the person has reached a level of independence at which they will be able to cope alone.

The service is needs led and the main aim is to maximise the individual's potential by offering them flexible support to encourage them to become self sufficient and showing them different approaches to tackling daily living tasks

Priority Medium

Early Support Discharge Scheme

What is Early Support Discharge Scheme?

Early Support Discharge Scheme is a collaborative service between Dundee Local Health Care Co-operative, Community Nursing Service and Dundee City Council Social Work Department. It is available to patients within the Medical Directorate, Accident and Emergency and Short Stay ward, Ninewells Hospital. Following assessment by the co-ordinator, patients who require short-term intensive social care, for up to 10 days to facilitate their discharge may access this service.

High or Medium Priority

Partnership Working

Community based Social Care is also provided in conjunction with other parties, for example: housing and health.

Housing with care

What is Housing with Care?

Housing with care is an alternative to living in a residential or nursing care home. This service allows older people to live in appropriately adapted housing with a full range of support and care services located within the premises. The houses will be linked to call systems for support and monitoring and will also allow the individual to retain as much independence as possible. The full range of Community Social Care services and Home Support services will be available to all tenants who have been assessed as requiring Housing with Care services.

Care and support staff will adopt methods of care, which promote independence and encourage individuals to maintain their skills of daily living and social interaction.

The service will support groups of tenants who have assessed needs to participate in activities to meet their social, emotional and physical needs. The emphasis is on shared group living.

Priority High

Combined Care at Home

What is Combine Care at Home?

Combined Care at Home Service is a collaborative service between Dundee Local Healthcare Co-operative, Community Nursing Service and Dundee City Council, Social Work Department, providing immediate social and nursing care to people who are ill, but whom the General Practitioner has assessed as medically fit to remain at home. In some circumstances this service can be available to those awaiting admission to hospital within the next 10 days.

This service may be available to individuals with mental health problems. However, certain medical conditions may exclude some individuals from this service. Assessment of nursing needs is carried out by the District Nursing Sister and the Service is available for 7 days.

This service is accessed by the General Practitioners or District Nursing Sisters, only.

Priority high

ACCOMMODATION WITH SUPPORT / RESIDENTIAL CARE 16 YEARS - 65 YEARS

What is accommodation with support?

Accommodation and residential care services are provided by both the statutory and voluntary sector for people who have been assessed as requiring 24-hour support and care. This accommodation offers a continuous staff presence providing a safe environment for the resident.

There have been significant changes in the nature and type of supported accommodation available to people. The shift in the balance of care from hospital to the community has led to the development of small-scale community living arrangements, which provide support and care, particularly for people with learning disabilities and mental health problems

The Scottish Commission for the Regulation of Care will monitor the quality of care in all residential settings.

Level of service available for each priority group

High Priority

A person who is eligible for 24 hour personal care, support and supervision, will be unable to care for themselves independently, and cannot be supported to live in their own home through the assistance of informal or formal carers.

The person or others would be at risk without 24-hour support.

For people who have continuing health care needs due to complex combinations of learning disability with mental illness or severe physical disability, eligibility may depend on health care funding.

Medium Priority

A person whose degree of disability is such that there is potential for them to gain appropriate independence according to ability. A person's health and personal care could deteriorate without this support placing them at risk.

Low Priority

Not eligible

DAY CARE / DAY OPPORTUNITIES

What are day care / day opportunities?

The aim of day care/day opportunities is to provide participation in meaningful activities for in accordance with an individual's person centred care plan. The service will help people to access and use community resources.

Day care/day opportunities will support individuals to access mainstream leisure, recreation, supported employment and lifelong learning facilities.

Support and curriculum will be planned on an individual basis and will focus on personal and social development.

In some circumstances, depending on individual need, support may require to be offered in a small group environment.

Level of service available for each priority group

High Priority

Individuals requiring an assessed 5-7 day support package, providing a network of development opportunities, which will enhance a person's quality of life and sustain their individual and residential circumstances.

Medium Priority

Someone who has an existing support network and requires 2-3 days per week to enhance that level of support.

Low Priority

The social work department will provide information and advice on a range of existing community facilities and opportunities available for people e.g. supported employment, further education and leisure activities.

DRUG & ALCOHOL REHABILITATION

What is drug & alcohol rehabilitation?

There are several Drug and Alcohol services in the United Kingdom which offer a rehabilitation service for people who wish to abstain from using drugs or alcohol.

Should you require this service you will be assessed to reduce any mismatch between your needs and the service received.

The residential rehabilitation centres provide group and individual relapse prevention counselling, individual key working, improved skills for daily living, training and vocational experience.

Level of service available for each priority group

High Priority

You will have to be highly motivated to address your drug or alcohol use and have in the past attempted community detoxification and community rehabilitation programmes.

If you take drugs there is also an expectation that you will have reduced your level of drug use to a level that is acceptable by the Rehabilitation Service.

Medium Priority

Not eligible.

Low Priority

Not eligible.