

Falkland Islands Government

Department of Health and Social Services



Eligibility Criteria for all Adult Community Care Services within the Falkland Islands

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Amendment History:

Version	Status	Summary of changes	Date of issue
V0.1	Draft		
V0.2	Draft	Incorporate combined information from Social Services and CST. Ensure Wellbeing Principle and outcomes-based approach are incorporate. Add information about capacity limits in community-based care.	May 2024
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1 Context

The Eligibility Criteria for all Adult Community Care Services within the Falkland Islands Policy details how the Falkland Islands Government will determine eligibility for community support services including community-based care and support, residential care such as Tussac House, and supported living.

The documents will be reviewed on a regular basis, or sooner in light of new guidance or legislation which emerges within the Falkland Islands or United Kingdom.

This policy should be read in conjunction with the following documents:

- Assessment and Safeguarding of Adults Ordinance 2020
- Assessment and Safeguarding of Adults Regulations 2020
- Standards of Care for all Community Care Services within the Falkland Islands
- Assessment of Adults with Need for Care and Support
- Safeguarding Adults in the Falkland Islands - Policy
- Safeguarding Adults in the Falkland Islands – Guidance for Professionals
- Mental Capacity Policy
- Operational Policy for Social Centre based at Tussac House
- Eligibility Criteria for all Adult Community Care Services, Practice Guidance for Professionals

The practice principles underpinning this policy are:

- An individual seeking or referred for assistance with care and support needs, regardless of their difficulty, is entitled to an assessment of eligibility for Adult Community Care Services that is fit, following the *Assessment of Adults with need for Care and Support Policy*.
- An individual's financial situation must not pre-empt or influence the assessment of their care and support needs.
- Assessments and support planning are focused on ways to achieve agreed outcomes.
- Assessments focus on the strengths of the individual and their support networks, so as not to 'take away' from them or their abilities, supporting and promoting individual's independence as far as is appropriate.
- Eligibility must be determined without consideration of what needs are being met by any other carer (family or friends) at that time.
- The eligibility decision lies with the practitioner's professional judgement, with the support of the Community Support Team Manager, but this policy will help to inform that professional judgement.

Throughout this document references to relatives and/ or friends involved in an individual's care are made. However, this could equally refer to an advocate. For more detail on situations where an independent advocate should be arranged refer to the FIG *Assessment of Adults with need for Care and Support Policy*.

2 Scope

The Eligibility Criteria for all Adult Community Care Services within the Falkland - Policy will apply to all adults aged 18 and over, who seek support or assistance from the Community Support Service. All relevant staff should use this policy and subsequent practice guidance document, including all staff working with individuals with needs arising from physical, sensory, learning or cognitive difficulties and needs arising from mental health difficulties. Therefore, this document is relevant to all community care and support settings including;

- Community-based Care and support services
- Residential Care including Tussac House
- Supported Living services
- Day care provision and Social Centre support

This policy should be read and understood by all employees involved in the care and support of adults in the Falkland Islands on behalf of the Falkland Islands Government.

The policy applies to the decision about eligibility criteria for care and support following an appropriate needs assessment.

Where an individual has care and support provision within their care plan agreed by ExCo, that agreement will take precedence over this policy.

3 The Wellbeing Principle

In accordance with the Assessment and Safeguarding of Adults Ordinance 2020 (s5) it is the general duty of the government to promote the individual's well-being.

In exercising this function, the government must have regard to;

- *the importance of beginning with the assumption that the individual is best-placed to judge the individual's well-being*
- *the individual's views, wishes, feelings and beliefs*
- *the importance of preventing or delaying the development of needs for care and support or needs for support and the importance of reducing needs of either kind that already exist*
- *the need to ensure that decisions about the individual are made having regard to all the individual's circumstances (and are not based only on the individual's age or appearance or any condition of the individual's or aspect of the individual's behaviour which might lead others to make unjustified assumptions about the individual's well-being)*

- *the importance of the individual participating as fully as possible in decisions relating to the exercise of the function concerned and being provided with the information and support necessary to enable the individual to participate*
- *the importance of achieving a balance between the individual's wellbeing and that of any friends or relatives who are involved in caring for the individual*
- *the need to protect people from abuse and neglect*
- *the need to ensure that any restriction on the individual's rights or freedom of action that is involved in the exercise of the function is kept to the minimum necessary for achieving the purpose for which the function is being exercised.*

4 Practice Guidance

Before starting a needs assessment, practitioners should ascertain whether an individual appears to be in need of care and support, this may be via means of an individual self-referring to the service, or another service identifying concerns and referring on the individual's behalf.

The first point of contact is fundamental to the provision of a good quality response. The practitioner who provides the first point of contact should ensure that sufficient information is gathered to both identify what the person is requesting, and to ensure that the individual is provided with an appropriate and proportionate response.

Where initial information gathering indicates that the individual does not need care and support, practitioners will consider services which may support the individual and guide them in the right direction.

5 Establishing Eligibility for Adult Community Care Services

5.1 Assessment

The Department of Health and Social Services takes an outcomes-based approach when assessing and determining eligibility for Adult Community Care Services and focusses on what matters to the person and what they would like to achieve. In order to be considered for Adult Community Care Services it is first necessary to complete a Needs Assessment as per the Falkland Islands Government *Assessment of Adults with need for Care and Support Policy*. This assessment will determine the areas in which an individual may benefit from additional support with achieving their optimum outcomes.

The needs assessment should be undertaken proportionate to need and circumstances. As part of the assessment, information about the issues, concerns and support needs of the individual and related circumstances should be established and recorded in line with the *Assessment of Adults with need for Care and Support Policy*.

In carrying out its functions the Department of Health and Social Services will have regard to the principles of involvement, choice, dignity and respect.

The issues, concerns and support needs should be considered on a person-centred basis, recognising both individual need and must not consider the support that the individual's family or support networks are willing and able to provide. This ensures that the entirety of the adult's needs are identified and we can respond appropriately if the carer feels unable or unwilling to carry out some or all of the caring that they were previously providing.

The assessment will also consider 'hidden' needs such as those for people who have specific communication or other sensory needs or people with autism, whose support needs may not be as immediately apparent or as easily understood as those of other client groups.

The assessment will consider all needs but primarily;

- Eating, drinking and maintaining a good diet
- Maintaining personal hygiene
- Being appropriately clothed
- Managing toilet needs
- Being able to make use of the home safely
- Maintaining a habitable home environment
- Developing and maintaining family or other personal relationships
- Accessing and engaging in work, training, education or volunteering
- Making use of necessary facilities or services in the local community including recreational facilities or services
- Carrying out any caring responsibilities the adult has for a child

In order to be considered for the provision of Adult Community Care Services the following three conditions must be met;

1. Do the adult's needs arise from, or are related to, a physical or mental impairment or illness?

This includes conditions such as physical, mental, sensory, learning or cognitive disabilities or illnesses, brain injury.

2. As a result of the adult's needs, the adult is unable to achieve two or more of the specified outcomes?

- a. Managing and maintaining nutrition: *This means considering whether the adult has access to food and drink to maintain nutrition, and that the adult is able to prepare and consume the food or drink.*
- b. Maintain personal hygiene: *Consider, for example, the adult's ability to wash themselves and launder their clothes.*
- c. Managing toilet needs: *Consider the adult's ability to access and use a toilet and manage their toilet needs.*
- d. Being appropriately clothed: *Consider the adult's ability to dress themselves and be appropriately dressed, for instance in relation to weather, to maintain their health.*
- e. Being able to make use of the adult's home safely: *Consider the adult's ability to move around the home safely, which could for example, include getting up steps, using kitchen facilities or accessing the bathroom. This should also include the immediate environment around the home such as access to the property, for example steps leading up to the home.*
- f. Maintaining a habitable home environment: *Consider whether the condition of the adult's home is sufficiently clean and maintained to be safe. A habitable home is safe and has essential amenities. An adult may require support to sustain their*

occupancy of the home and to maintain amenities such as, water, electricity, gas or fuel.

- g. Developing and maintaining family or other personal relationships: *Consider whether the adult is lonely or isolated, either because their needs prevent them from maintaining the personal relationships they have or because their needs prevent them from developing new relationships.*
- h. Accessing and engaging in work, training, education or volunteering: *Consider whether the adult has an opportunity to apply themselves and contribute to society through work, training, education or volunteering, subject to their own wishes in this regard.*
- i. Making use of necessary facilities or services in the community: *Consider the adult's ability to get around the community safely.*
- j. Carrying out any caring responsibilities the adult has for a child: *Consider if the individual holds parental responsibility or guardianship of a child.*

3. As a consequence of being unable to achieve these outcomes there is, or there is likely to be, a significant impact on the adult's wellbeing?

Only adults who meet the above three criteria will be considered for the provision of Adult Community Care Services.

The assessment may identify needs, outcomes and goals which are unable to be met by the Falkland Islands Government and it should be recognised there is no statutory requirement for the Falkland Islands Government to provide social care services.

The Assessment and Safeguarding of Adults Ordinance 2020 lays out the Falkland Island Governments duty to;

- *contribute towards **preventing** or **delaying** the development by adults of needs for care and support;*
- ***reduce** the need for care and support of adults.*

The level of care required to support the person to achieve their desired outcomes whilst **preventing**, **delaying** or **reducing** the need for care and support will be discussed during the assessment process. This discussion will be held between the assessor and the person with care and support needs, or if the person has substantial difficulty in participating within the discussion, friend or relative involved in caring for the individual. (*Assessment and Safeguarding of Adults Ordinance 2020.*)

5.2 Two-stage eligibility determination

On completion of the assessment process a two-stage eligibility determination will be made. The first stage will determine the individual's eligibility to receive Adult Community Care Services with respect to immigration status (5.3). The second stage will then be to determine the eligibility for a defined package of care within Adult Community Care Services (5.4).

5.3 Eligibility to access Adult Community Care Services with respect to immigration status and residency

Adult community care provided by FIG is not charged for. In respect to Tussac House, resident's fees are charged in relation to occupancy and a service charge, which varies according the

exact specification of the accommodation within Tussac House is also applied to cover some of the operational costs associated with running the building e.g. heating, communal cleaning. In effect the service is highly subsidised.

The following groups of people are entitled to receive free Adult Community Care Services and to reside at Tussac House where resident's fees and a service charge is applicable:

Falkland Island Status Holders and Permanent Residency Permit (PRP) holders who have been ordinarily resident in the Islands for the preceding 24 months at the point at which care delivery starts.

The 24-month ordinary residence clause will be waived for individuals that have **not** been ordinarily resident only as a result of receiving medical treatment overseas or being on an education or training course that is recognised by a Falklands Islands employer.

In addition, the 24-month ordinary residence clause may be waived if other exceptional circumstances apply. It is difficult to provide for all possible exceptional circumstance that may apply, therefore if an individual who would otherwise be eligible for Adult Community Care Services, but is deemed non-entitled only on account of the 24-month ordinary residence requirement only they may follow the entitlement determination review process outlined in 6.1 below.

5.4 Eligibility for a defined package of care within Adult Community Care Services

The Falkland Islands Government Department of Health and Social Services has limited resources, including with regards to staffing. It is therefore necessary to ensure fair and equitable allocation of services considering the assessed needs of the individual, *and*, the available resources of the Community Support Services when identifying the demand for social care increase.

When determining eligibility for community-based support a variety of factors will be taken into account. In accordance with the Wellbeing Principle, it will be necessary to consider how services available at that time can support the individual to achieve their desired outcomes whilst taking into account their views, wishes, feelings and beliefs. The assessor will consider risks within the person's life and how these can be minimised through the provision of care and support interventions.

The Community Support Service eligibility threshold is based on identifying how a person's needs affect their ability to achieve relevant outcomes, and how these impact on the individual's wellbeing.

The following provides examples of potential additional risk factors which may affect an individual's eligibility for adult community support services, including frequency and duration of care and support visits;

- The person may not have the cognitive ability to respond to their own needs such as eating or drinking
- The person may have difficulty in remembering to take necessary medication thereby placing their health at significant risk.
- The person may have regular need for nursing support, such as pressure sore management or wound care.
- The person may be in need of palliative care

- The person may not be able to wash themselves independently.
- If the adult needs to reach the toilet more urgently than their mobility allows, they may not be managing their toilet needs in a way that promotes their wellbeing and dignity.
- If the adult cannot put on or fasten their clothes, they are unlikely to be appropriately dressed. If the adult cannot buy cleaning products, or cognitively understand how to operate a washing machine, their clothes and linen may not be properly clean.
- Is the adult able to move around the home safely, including climbing steps if any, using kitchen facilities and accessing the bathroom/toilet?
- Is the adult lonely or isolated? Do their needs prevent them from maintaining or developing relationships with those who they wish to such as family and friends?
- If the adult is unable to leave their home safely, or communicate successfully, or interact with others, they may not be able to access work, training, education or volunteering.
- If the adult has a psychological or emotional wellbeing issue, they may not feel able to interact with others the adult is unable to access information about opportunities available to them, they are unlikely to be able to engage in activities.

Where it is considered that in order to **prevent, delay or reduce** the need for care and support, the person's identified care and support needs can be safely met within their own home, and available adult community support service resources can enable this, community based care and support will be the first option considered. Residential Care may be offered as a first option if it is considered that community support resources are not able to meet the person's identified needs within their own home at that time.

The frequency and duration of community-based care and support visits will be allocated based upon the person's identified unmet outcomes and the availability of resources at that time. The final decision maker for proposed frequency and duration of community-based care and support visits and/or other adult community support services will be made by the assessor, based on the Assessment of Need, where necessary in partnership with the Community Support Manager.

The allocation of Adult Community Care Services is determined at the point of eligibility determination. There may be circumstances in which the level of frequency and duration of visits deemed necessary to meet the person's desired outcomes at home, exceed that of adult community services available. In such cases, further discussion will be held with the individual

and/or friend or relative involved in caring for the individual, outlining the maximum amount of community-based care and support available and what alternative options, such as informal support or residential care, are available to support the individual to achieve their desired outcomes whilst minimising risk.

In light of the resources available at the time of assessment and the availability of the Community Support Service, it may be reasonable that a 'ceiling of care' be in place to accommodate the resources effectively. As mentioned, this will be discussed with the individual and those important to them. It is understood, that should an individual require more care and support than can be provided by the Community Support Service at that particular time, all relevant options will be discussed with the individual and any friends or relatives involved in caring for the individual. Should the individual have capacity to understand these options and the potential risks of not choosing the preferred option, then it will be acknowledged that the individual accepts the potential risks.

In the event that the adult lacks mental capacity to decide upon their care and support arrangements a best interest's decision will need to be reached in accordance with the Falkland Islands Government *Mental Capacity Policy*.

The Community Service will endeavour to follow the guidance from National Institute of Care Excellence (NICE) (*Home Care for older people 2016. Quality Statement 4: Length of home care visits*) around the length of each community visit, as detailed below:

Quality Statement: Older people using home care services have visits of at least 30 minutes except when short visits for specific tasks or checks have been agreed as part of a wider package of support.

Rationale: Home care visits should be long enough to ensure that the person's identified outcomes can be achieved in a way that does not compromise their dignity and wellbeing. There is a risk that visits of less than 30 minutes will be rushed and not meet the person's needs and could compromise safety and dignity. The need to include short visits in a person's care package should therefore be carefully considered and agreed in advance with the older person.

Following from the above statements, it is recommended that the **maximum** amount of care and support that can be provided in an individual's own home and sheltered housing will be as follows:

- 4 daily visits (between 07:30 – 22:00) – a total of 2 hours of care and support
- 2 additional night visits, *if needed* (between 22:00 – 07:30) – a total of 1 hour of care and support
- 2 staff members will be provided, **if needed and appropriate** following assessment, for these visits. The number of staff members required to visit will be determined via the need's assessment and documented rationale in the individual's care plan.

6 Eligibility and entitlement determination review and complaints

6.1 Eligibility determination with respect to immigration status review process

This process can be followed for individuals who are not eligible for Adult Community Care Services **only** as a result of not having been ordinarily resident for the preceding 24-months i.e. they are a Falkland Island Status Holder or hold a Permanent Residency Permit.

The applicant, or a friend or relative involved in caring for the individual of the applicant in cases in which the applicant cannot advocate for themselves, must outline the rationale for their case being exceptional, in writing, to Director of Health and Social Services.

The case will be then considered by a panel of officers consisting of;

- Director of Health and Social Services
- Head of Care Services
- Hospital Manager
- Head of Social Services
- Chief Nursing Officer

A minimum of three officers from the above panel are required to be available to assess each case. The panel must outline their rationale for determining whether or not the circumstances

are exceptional, in writing, to the applicant. A copy of this letter must also be retained in the Directorate's records.

Upon receipt of a request for an entitlement determination appeal every attempt will be made to make a decision with 10 working days. Or, if this is not possible, the applicant will be contacted to explain why this is not possible and outline an alternative timeframe.

If the individual and/or friend or relative involved in caring for the individual remain unhappy regarding the outcome of the Eligibility Determination Review they may contact the Director of Health and Social Services and request an entitlement determination by Executive Council. The Director of Health and Social Services is responsible for collating all relevant evidence and preparing the accompanying paper for submission to Executive Council.

6.2 Eligibility determination review for a defined package of care

When a person and/or their friend or relative involved in caring for the individual disagrees with the decision made about their eligibility for a defined package care and support provision by the Community Support Services, they are entitled to appeal against the decision. This process should be used when an individual has determined to be eligible for Adult Community Care Services with respect to their immigration status, but are unhappy about the defined package of care they have been offered or are being provided.

In the first instance, contact should be made with the Community Support Manager or Head of Care Services who will be able to explain the rationale behind the decision-making process and outcomes offered, and if necessary, review the needs assessment.

The assessment outcome will be subject to regular review. A review should be undertaken as a minimum annually, or in the event of any significant change in the persons care and support needs.

There may be circumstances where changes in the available resources of the Adult Community Support Service necessitate the revision of allocated services provided.

If the person and/or their carer remain unhappy regarding the outcome of the Eligibility Determination Review they should pursue the matter through the Department of Health and

Social Services Complaints Procedure. This can be found via the Reception of the KEMH or via contacting the Healthcare Governance Manager.

7 Review

This policy must be reviewed within one year of the opening of Tussac House. In addition, the eligibility with respect to immigration status must be reviewed if there are any changes within the FIG Housing Policy in respect of eligibility in relation to immigration status, and consideration given whether this policy should also be updated to ensure there is consistent practice across all types of FIG housing stock.