

Adult Social Services and Housing

Choice in Care and Support Practice Guidance



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1. Introduction

An increasing number of people are contacting us to discuss their care and support needs. Some require support to prevent, reduce and delay eligible care needs, some require care and support to meet eligible needs, and others require both. In addition to this many unpaid adult's carers contact us about their support needs.

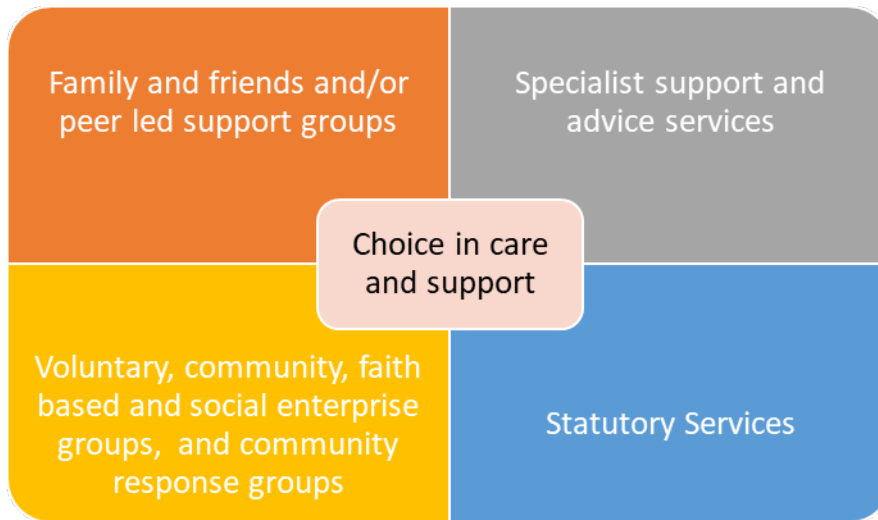
Choice in care and support involves collaborating with people to explore care and support options which may help them to achieve the outcomes which matter to them. When we asked both people who draw on care and support and adult social services staff about choice in care, their answers tended to focus on commissioned care services. They also told us that they sometimes struggle to keep up to date with the range of support options available in the community. These gaps in knowledge may result in people not being able to make fully informed decisions about how their care and support needs are met. Understanding and facilitating choice is a vital component of putting people who draw upon care and support at the centre of fully informed decision making in adult social services.

Our aim is to support people to draw from a range of resources (including carers) to enable them to live well. This might include building on their existing social networks, helping them find and attend support groups and services in the community, commissioning care and support, and/or allocating funding so that they can purchase their own care and support.

This guidance has been written to support adult social care practitioners to operationalise our [Choice in Care and Support Strategy](#).

The guidance can be used by **all** teams supporting people drawing on care and support, and/or carers. It can also be used by the [Care Navigators Service](#) who provide information and advice to people paying for their own care who need help finding support or a care provider.

1.1. Care and support options available in North Somerset



It is essential that we work alongside people to identify a range of information, guidance, support, and care that will;

- reduce, prevent, or delay the development of care and support needs,
- support people whilst they await assessment to help make their situation more manageable, meet a person's eligible care and support needs (where required),
- adapt to a person's changing needs over time, and
- support people in their role as unpaid adult carers,

As adult social care practitioners, we have a vital role in signposting and connecting people to their local communities. We must therefore have a good understanding of the resources which are available in the local community. These may change frequently. When appropriate and proportionate, practitioners are encouraged to spend time supporting people to explore community services which may contribute to someone's care and support plan. This can be done by searching together and talking through what is available. We can search for care and support services in North Somerset using internet search engines such as google, and through:

- [aDoddle](#) – a connected community map focused on supporting people and communities.
- The [North Somerset Online Directory \(NSOD\)](#) – NSOD has been updated and now includes a link to a [Care and Support jargon buster](#). Areas of information and advice on NSOD include:
 - [Help to live at home](#)
 - [Health and wellbeing](#)
 - [Housing Options](#)
 - [Things to do](#)
 - [Travel and transport](#)
 - [Looking after someone](#)
 - [Disabilities](#)
 - [Money matters](#)
 - [Education/ Employment](#)
 - [Emergency](#)
- North Somerset Council's website
 - [Occupational therapy](#)
 - [The provision of equipment and living aids](#)
 - [Help finding equipment for yourself](#)
 - [Wellness service](#)
 - [Handy person service](#)
 - [Day services](#)
 - [Technology enabled care](#)
 - [Support after leaving hospital or if you are in recovery](#)
 - [Connecting lives](#)
 - [Direct payments and personal budgets](#)
 - [Personal assistants](#)
 - [Home care](#)
 - [Residential care](#)
 - [Extra care housing](#)
 - [Sheltered housing](#)

- [Retirement properties](#)
- [Advocacy](#)
- [Support and advice for carers](#)
- [Policies, strategies, and quality assurance](#)
- Our internal Adult Social Care SharePoint (Staff access),
- We can also suggest that people have conversations with voluntary, community, faith, and social enterprise (VCFSE) sector organisations who can provide specific information, advice, and guidance. For example, people aged 50 and over can connect with [Community Connect](#) and [Village agents](#).

Community Connect and Village agents can provide:

- Information and guidance over the phone, face-to-face or by email.
- Tailored support for people over fifty to stay connected and active in their communities.
- Help for people and their community to set up groups and activities that benefit the local area.
- Opportunities to participate and learn a new skill.
- Signposting to local services and agencies.

2. What are the essential elements of choice in care and support?

1. Facilitating and supporting choice is central to what we do.
 - a. It's in the [statutory guidance](#):
 - i. "Giving people choice and control over the support they may need and access to the right information enables people to stay as well as possible, maintain independence and caring roles for longer."
 - b. It's a part of our [choice in care and support strategy](#):
 - i. "For everyone who draws on care and support – no matter their background or circumstances – achieving choice, control and

independence starts with making sure that people are listened to, understood, and get the right care and support, in the right place and at the right time”.

- c. It will be a part of the persons journey project.
2. Choice in care and support is not just about statutory services.
 - a. It's about fully utilising a person's strengths, their support networks, community assets, and statutory services (where appropriate) to support informed decision making about how a person wants to be supported and cared for.
 3. Each person we work alongside is unique. No two people will ever be the same. This means that it is unlikely that two comparable people will ever make the same fully informed decisions.
 4. Having one option does not equate to a choice.

3. How can I help expand choice and facilitate fully informed decisions?

3.1. Adult Social Service Practice Framework

The first step to expanding choice and facilitating fully informed decisions is to embody our [Adult Social Services Practice Framework](#). This involves

- identifying and recognising a person's strengths
- seeing people as unique individuals who play an integral role in their families and communities, each with their own life history, abilities, and aspirations
- actively challenging discrimination in all forms
- understanding people's lived experiences and taking all reasonable steps to make our support accessible and culturally responsive
- recognising that people with care and support needs must be at the heart of decision making. No decisions should be taken without fully involving the person affected in the decision-making process

- ensuring that people have access to the support, advocacy, information and advice they need, in the most appropriate format, to be fully involved in decision making about their care and support
- promote positive risk taking and support individuals to make well-informed and balanced decisions which support their goals, choices and aspirations
- seek to understand and respond to the impact of adversity and trauma on people's lives
- take steps to support people to feel safe enough in their interactions with us to build trust, and to help people overcome any barriers to forming effective relationships
- carefully considering the potential impact of our decisions and interventions on people's human rights and take all reasonable steps to ensure that people's human rights are respected.

3.2. Direct Payments

Greater choice and control over how people's eligible care and support needs are met can be achieved through direct payments (also called a DP). Direct payments are a sum of money we can give to people with eligible care and support needs to pay for care and support. The aim is to give people greater flexibility, more choice, and control over the support they get. When people get a direct payment, they can decide how their needs will be met, by whom, and when (in line with our [Direct Payments Guidance](#)). We should be actively providing people with information and advice about direct payments to ensure they can make informed decisions about their care and support. Information about direct payments can be found on our website - [Direct payments | North Somerset Council](#).

3.3. Work in partnership with people

People want us to:

- Give them, and the people who care about them, clear and accessible information about how their care and support needs can be met.
 - Get to know them and their community.
-

- Support them to make fully informed decisions.
- Expand choice.

In essence, each person who contacts us should receive the right care and support at the right time to suit their needs, preferences, situation, protected characteristics, and/or the level of risk. This will involve a blended approach to intervention including providing meaningful and accessible information and advice, drawing upon care and support from family and friends and neighbours, peer led community groups, specialist support and advice services, the Voluntary, Community, Faith, and Social Enterprise Sector, and where required statutory services.

People who contact Adult Social Services and Housing for support want its practitioners to;

- know about the full range of care and support available in North Somerset, including what support they can access whilst they wait,
- tell them about the full range of care and support available using person centred communication methods,
- find out about the full range of care and support available when you are unsure,
- articulate the full range of care and support, including the pros and cons of the options,
- listen to their ideas and research about what care and support might be helpful to them,
- be open and honest about choice and cost, including the cost to them or their family (such as third-party top ups etc), and how a blended approach which draws upon all available care and support options could improve their outcomes, lower their costs, and support them to achieve their goals,
- be invested in them as a person and their outcomes,
- support them to make fully informed decisions,

- actively expand their choices, and not restrict them. This may involve returning to people with options suggested at the Eligibility Resource Forum (ERF) and/or Supported Living Allocation Forum (SLAF).

4. What about the cost?

The increase in people contacting adult social services for care and support has come amid a climate of increasing pressures on our budgets and workforce. Under the Care Act 2014, we have a legal duty regarding choice of service providers and the consideration of reasonable cost. The Care Act 2014 does not explicitly define "reasonable cost", however there is a requirement for local authorities to ensure that care and support services are provided in a way that is both effective and financially responsible. This does not mean setting arbitrary upper limits on the costs we are willing to pay to meet care and support needs, nor that we will be applying rationing for any reason. However, we must be open and honest about what options are available to meet care and support needs, and what costs people may incur because of the choices they make. This is particularly pertinent should a person wish to choose a more expensive provision than the identified best value option.

We should use a blended approach to promote choice and fully informed decision making, highlighting how blending support from [family, friends](#), community networks, peer led community groups, specialist support and advice services, VCFSE, and where required statutory services, could improve outcomes, support people to reach their goals, and delivers value for money. This does not mean only sharing the cheapest option; but involves highlighting which options deliver the outcomes desired for the best value.

5. Accessible information

All Council documents can be made available in large print, audio, easy read, and other formats. Documents on our website can also be emailed to you as plain text files. Help is also available for people who require Council information in languages

other than English. Please email adultspolicy@n-somerset.gov.uk or ring 01934 888 888.

Appendix 1 – The Choice Checklist

I have enhanced a person's choice in care and support, and am confident that the decisions they have made are fully informed because:

- ✓ I have got to know the person I am supporting. I understand and have a good knowledge of;
 - how their disabilities impact upon their lives
 - how they prefer to be supported
 - their strengths
 - their family life, friendships, and relationships
 - the community they live in
 - how their social and cultural identity and protected characteristics may impact upon them
 - their goals and desired outcomes
 - their views, wishes, values, and beliefs.
- ✓ I have considered and, where appropriate, formally assessed mental capacity where someone has difficulty making decisions relating to their care and support. I have ensured that they have someone appropriate who can represent their views, e.g. a family member, friend or advocate.
- ✓ I have considered short term interventions such as reablement which may support the person to learn or relearn skills which enable them to live more independently for longer.
- ✓ I have considered referring for input from an Occupational Therapist or other therapist.
- ✓ I have actively searched for and fully considered all the care and support options available from family, friends and/or peer led support groups, specialist support and advice services, voluntary, community, faith and

social enterprise groups, community response groups, and statutory services.

- ✓ I have spoken to the person about social isolation and loneliness, and explored how this can be alleviated.
- ✓ I have actively thought about, or sought advice about, Technology Enabled Care (TEC) and other equipment and shared this with the person and their representative (where appropriate to do so).
- ✓ I have spoken to colleagues in my own, and other teams, to ensure I am fully up to date with the services we commission.
- ✓ I have considered whether someone's needs are more appropriately met by or in conjunction with health, including Continuing Health Care or joint funding with health.
- ✓ I have promoted direct payments and personal assistant recruitment with clear guidance.
- ✓ I have given information and advice about what support can be accessed by carers. I have also explained how to ask for a carers assessment.
- ✓ I have shared the person's options with them and with their representative and discussed how they can be utilised to create a person centred and strengths-based care and support plan, which offers value for money.
- ✓ When coproducing the care and support plan, I have reached a clear and defensible professional judgment which is reflected in the assessor's summary, balancing the person's preferences with a reasonable consideration of cost, and potential impact on the person's wellbeing.
- ✓ Where appropriate, we have discussed options with regards to commissioned services and how these can be blended with other types of support.
- ✓ You have explored the benefits of using the care navigator service with self-funders.
- ✓ Where appropriate, I have discussed the persons housing needs with them.

- ✓ I have ensured that all information and advice provided is current, relevant and accessible.
- ✓ I have provided relevant financial information, including relevant charging policies and advice on how benefits such as Personal Independence Payments and Attendance Allowance can be used to meet care and support needs.
- ✓ I have been open, honest and transparent about the limitations on choice, and discussed personal costs and top-ups where someone wants their needs met in a specific way. This includes when the local authority has identified a more cost-effective alternative that achieves the same outcomes.
- ✓ I have fully considered the well-being principle (Care Act 2014 - [promoting an individual's well-being](#)), beginning with the assumption that the individual is best placed to judge their well-being in relation to:
 - personal dignity (including treatment of the individual with respect);
 - physical and mental health and emotional well-being;
 - protection from abuse and neglect;
 - control over day-to-day life (including over care and support, or support, provided to the individual and the way in which it is provided);
 - participation in work, education, training or recreation;
 - social and economic well-being;
 - domestic, family and personal relationships;
 - suitability of living accommodation;
 - the individual's contribution to society.

- ✓ I have utilised the knowledge and skills of colleagues in forums such as ERF and SLAF as an opportunity for reflection and collaboration. I have evidenced how the decisions made in the care and support plan were co-produced, and thus how the decisions made are fully informed. Where forums have identified options that have not yet been explored with the person, I have then shared them with the person to ensure that any decisions made about their care and support is fully informed.
- ✓ My personal and/or professional prejudices have not impacted upon supporting the person to make fully informed decisions about their care and support.