



Glossary of Terms **What some words mean**

Glossary:

Assistive Technology

Any product or service that is designed to maintain or improve someone's independence. Assistive technology includes innovations to assist with communication, monitoring of need/activities equipment for people with a hearing impairment, access for people with a visual impairment, computer access for people with a learning difficulty, and equipment to assist with mobility or personal care. [See also Telecare]

Brokerage

The support and help offered to individuals, to plan and organise their care package support plan. This is carried out by a person, or an organisation known as a 'Support Broker', or as part of care management by staff in Adult Social Care.

Capacity

Mental Capacity is the ability of someone to make decisions. These can range from day-to-day decisions, such as deciding what to wear in the morning, what to eat for breakfast, to extremely serious ones, like moving home or having an operation. People may have difficulties in making some decisions either all or some of the time. This could be because they have a learning disability, dementia, a mental health problem, a brain injury or have had a stroke.

Care Home

A home registered with the Care Quality Commission (CQC) providing nursing and/or personal support, in addition to living accommodation.

Care Package

This is a term used to describe the support organised as part of a support or care plan. This follows an assessment of the individual's needs. The support plan represents the agreement between the individual and the Care Manager on how these needs should be met.

Care Pathway

Care pathways map out the support journey an individual can expect by specifying treatment and support for a given condition based on nationally agreed guidelines, standards and protocols incorporating best practice and evidence-based guidelines. Care pathways are multi-professional, cross organisational boundaries, and can act as a prompt for support. They provide a consistent standard of documentation which also provides the basis for ongoing audit.

Carer (family carer, unpaid carer)

A person providing support who is not employed to do so by an agency or organisation. A carer is often a relative or friend supporting someone at home who is frail, ill or requiring support; the carer can be of any age.

Centre for Independent living (C.I.L.)

The White paper 'Our Health, Our Care, Our Say' states that every local authority should have a centre of independent living in their area by 2010. The Centre for Independent Living will offer support and advice on all aspects of living independently and should be a user led organisation.

Community Care

Support provided to assist people in their day-to-day living.

Community Care Assessment

An assessment conducted by a local authority to determine the level of adult social care support an individual requires. Local authorities are required to conduct such assessments as described

in the National Health Service and Community Care Act 1990 and the Community Care Assessment Directions 2004.

Community Care Network

A health and social care network designed to enable an individual to remain independent and living in their own home.

Co-Production

Co-Production is about working together for more effective social services. It starts from the idea that services are successful only when the people being served are involved.

Court Appointed Deputies

The Mental Capacity Act 2005 provides for a system of court appointed deputies. Deputies are appointed to take decisions on welfare, healthcare and financial matters as authorised by the new Court of Protection but will not be able to refuse consent to life-sustaining treatment.

There are two different types of deputies – one for finance and property, and one for welfare. A person may be both, or either, of these. They will only be appointed if the Court cannot make a one-off decision to resolve the issues.

Critical need

As per by the Fair Access to Care Services (FACS) guidance and the Council's eligibility criteria, a need is deemed critical when:

- Life is, or will be, threatened; and/or
- Significant health problems have developed or will develop; and/or
- There is, or will be, little or no choice and control over vital aspects of the immediate environment; and/or
- Serious abuse or neglect has occurred or will occur; and/or
- There is, or will be, an inability to carry out vital personal care or domestic
- Routines; and/or
- Vital involvement in work, education or learning cannot or will not be sustained; and/or
- Vital social support systems and relationships cannot or will not be sustained; and/or
- Vital family and other social roles and responsibilities cannot or will not be undertaken.

Darlington Direct Payments Support Service

The Darlington Direct Payments Support Service offers advice to individuals about becoming an employer; offering advice on issues such as employment contracts, liability insurance, advertising, interview techniques and completing forms for auditing as well as managing a direct payment.

Direct Payments

A direct payment is a cash payment that Adult Social Care can give to an individual who wants to organise and arrange their own support. Local authorities have a duty to do this following the introduction of the Health and Social Care Act 2001, which became effective from April 2003. The individual first has to meet the eligibility criteria for services under Fair Access to Care Services from the Local Authority. A direct payment creates more flexibility in the provision of care and support services and allows people to have greater choice and control over their lives and to make their own decisions about how their care and support is delivered.

Domiciliary Support

Services provided to people at home to assist them in living independently in the community. These services include meals on wheels, community nursing, domiciliary support, equipment and adaptation.

Eligible needs

Those needs which fall within the Council's eligibility criteria. [See also Eligibility Criteria]

Eligibility criteria

When assessing an individual's support needs, local authorities will take into consideration how serious a risk is to an individual's independence. Eligibility criteria provide the framework for evaluating the level of risk to an individual's independence, and thus provide a structure for determining eligibility for adult social care. Councils must follow the Fair Access to Care Services (FACS) guidance when determining eligibility criteria. The FACS guidance sets four eligibility levels: Critical, Substantial, Moderate and Low. Darlington Borough Council regards needs as being eligible where the risks to a person's independence fall within the Critical, Substantial, Moderate and Low bands.

Eligible Individual

An individual who has been assessed as eligible for support and/or other services as their needs fall within the Council's eligibility criteria.

Enduring Power of Attorney

An Enduring Power of Attorney (EPA) is a legal document that enables an individual to appoint one or more persons (attorney(s)) to manage their financial affairs and property, either now or in the future. To be valid they must have been signed and witnessed prior to 1 October 2007. If the donor of the power has been assessed as lacking capacity the EPA must be registered with the Court of Protection to be valid.

Fair Access to Care Services (FACS)

This is the central basis for our eligibility criteria for adults, to ensure that needs are measured in the same way. It is based on four key areas: health and safety including freedom from abuse and neglect, autonomy and freedom to make choices, the ability to manage personal care and domestic routines, and involvements in family and the wider community. Individuals that fall into the critical, substantial, moderate and low bands are 'eligible for our services'.

Fairer Charging

Guidance on charging individuals who access support for non-residential services. In accordance with Government guidance, the Council is permitted to charge individuals for the use of those services. The guidance makes it clear how the Council approaches the calculation and determination of personal contributions for non-residential services. [See also Non-residential services and Personal Contributions]

Financial Assessment

An assessment of whether an individual has the means to make a financial contribution toward the cost of their support.

Home Care

Support services provided to an individual in their own home by a support worker paid to provide support as part of their employment. Home care is also known as domiciliary care/support.

Impairment

The loss or limitation of physical, mental or sensory function on a long-term or permanent basis.

In control

In Control is an organisation leading the development of self-directed support and individual budgets as the route to independent living. Under the In control programme Individual Budgets are currently being piloted around England with a view to rolling out Individual Budgets on a national basis. Evaluation reports are available from the Department of Health Website.

Independent Living Fund (ILF)

The Independent Living Fund (ILF) is a discretionary Government fund available to individuals to support them to live at home.

Indicative personal budget

This is an indication of what is a fair and reasonable amount of money to meet an individual's social care needs, as determined by the Resource Allocation System. It is the indicative personal budget which allows individuals to plan the support that will deliver the outcomes to best meet their identified needs. An indicative personal budget must be approved before an individual can receive their final Personal Budget. [See also Resource Allocation System and Validation]

Lasting Power of Attorney

The Mental Capacity Act 2005 allows a person with capacity to make a Health and Welfare Lasting Power of Attorney which will only be effective when the person lacks capacity. A person with capacity may also make a Finance and Property Lasting Power of Attorney to be effective either immediately or when they lose capacity. Both Lasting Power of Attorney's must be registered with the Court of Protection when made.

Learning Disability/Learning Difficulty

A learning disability/difficulty affects the way someone learns, communicates or does some everyday things. There are many different types of learning disability. They can be described as mild, moderate or severe.

Long-term care

Support that a person requires over a long period of time. This support can be provided in an individual's home, residential home or nursing home to assist people with their day-to-day living.

Low needs

As determined by the Fair Access to Care Services (FACS) guidance, a need is deemed low when:

- There is, or will be, an inability to carry out one or two personal care or domestic routines; and/or
- Involvement in one or two aspects of work, education or learning cannot or will not be sustained; and/or
- One or two social support systems and relationships cannot or will not be sustained; and/or
- One or two family and other social roles and responsibilities cannot or will not be undertaken.

Moderate needs

As determined by the Fair Access to Care Services (FACS) guidance, a need is deemed moderate when:

- There is, or will be, an inability to carry out several personal care or domestic routines; and/or
- Involvement in several aspects of work, education or learning cannot or will not be sustained; and/or
- Several social support systems and relationships cannot or will not be sustained; and/or
- Several family and other social roles and responsibilities cannot or will not be undertaken.

Non-residential services

Adult social care services that are provided outside of a care home/residential home.

Ongoing support needs

A defined support need that continues over time (that is, it is not short-term), although the intensity of care and support needed may fluctuate.

Outcomes

The changes, benefits or other results that happen as a result of a person having social care support. Outcomes are related to the individual as to what they want to achieve for themselves and these must be recorded in the support plan.

Person Centred Planning

Person Centred Planning is a way of working out what is important to and for the person, now and in the future. Developed in partnership with family and friends, and leading to change. There are different styles of person centred planning, for example Planning Alternative Tomorrows with Hope (PATH), Making Action Plans (MAP) and Essential Lifestyle Planning.

Person Centred Reviews

Person Centred Review is a different way to doing reviews. Using person centred thinking tools and the principles of person centred planning to ensure that everyone is heard, and that there are shared actions with a bias towards inclusion. It fulfils statutory requirements. Information collected at a person centred review could be developed further into a person centred plan.

Person Centred Thinking Tools

There are a number of Person Centred Thinking Tools. Some tools will suit some individuals and will not suit others. Tools include citizenship, relationship circle, communication charts, matching, doughnut, presence to contribution, learning log, dreams, decision matrix, etc.

Personal Budget

Social care funds allocated to an individual service user that can be used to meet their assessed eligible needs, in line with their support plan.

Personal contributions

A contribution by a service user toward the cost of their support, sometimes called financial contribution. Where a person is assessed as having the means to make a financial contribution to the cost of their support, they will be required to contribute. The amount an individual must contribute toward the cost of their support is determined by a financial assessment. [See Financial Assessment]

Personalisation

Refers to the way in which services are tailored to the needs and preferences of service users and carers. The overall vision is that the Government should empower services users and carers to shape their own lives and the services they receive.

Power of Attorney

A legal document allowing someone else to manage another person's affairs, or specific elements of their affairs, on their behalf. If an individual has a physical illness or an accident resulting in physical injury and they would like another individual to look after their affairs, they may create an ordinary power of attorney. An ordinary power of attorney automatically comes to an end should an individual lose their mental capacity.

Presenting Needs

The issues and problems that are identified when an individual contacts, or is referred to, the Council seeking social care support.

Resource Allocation System (RAS)

This is a financial model which links the assessed needs to a monetary value. This model allows the translation of the points score from the Supported Self Assessment Questionnaire to a monetary value which becomes the individual's personal budget allocation to be spent in line with their care and support plan.

Reablement

The use of timely and focused intensive therapy and support in a person's home to improve their choice and quality of life, so that people can maximise their long term independence by enabling them to remain or return to live in their own homes within the community. This approach focuses on reabling people within their homes so they achieve their optimum stable level of independence with the lowest appropriate level of ongoing support/care.

Reasonable risk

Striking a balance between empowering people to make choices, while supporting them to take informed everyday risks.

Rehabilitation

A multidisciplinary process which supports the individual to achieve their maximum potential to function physically, socially and psychologically through support and intervention.

Residential Home

A care home that does not provide nursing care. Under the Care Standards Act 2000, which came into effect in April 2002, all homes, including residential homes, are defined as 'care homes'.

Residential services

Adult social care services that are provided in a care home/residential home.

Respite

Where a carer is assessed as needing a break from caring, respite provides carers with a temporary break from the support they provide by providing service users with additional support services. This may be for very short periods of a few hours or for longer periods of time.

Risk Management

A systematic approach to reducing loss of life, financial loss, loss of staff availability, safety, or loss of reputation.

Self Directed Support

Self Directed Support (SDS) is a way of enabling people to meet their health and social care needs. SDS means individuals and carers with assessed eligible needs are offered a personal budget to spend on meeting their needs. Individuals are supported to choose and organise their support in the way that suits them best. Individuals have the choice of taking their personal budget either as a direct payment, or as Directly Managed Support, or a combination of these two options. The main aim of SDS is to promote independence, health and wellbeing by giving service users more choice and control over planning and managing their support.

Service User

An individual receiving social care support from the Council.

Short break

See Respite

Single Assessment Process (S.A.P.)

This is the way we are sharing assessment information on older people with all the other care agencies (especially Health) that they are involved with.

Social Model of Disability

Under the social model, disability is caused by the society in which people live and is not the 'fault' of an individual disabled person, or an inevitable consequence of their limitations. Disability is the product of the physical, organisational and attitudinal barriers present within society, which lead to discrimination. The removal of discrimination requires a change of approach and thinking in the way in which society is organised.

Substantial need

As per by the Fair Access to Care Services (FACS) guidance, a need is deemed substantial when:

- There is, or will be, only partial choice and control over the immediate environment; and/or
- Abuse or neglect has occurred or will occur; and/or
- There is, or will be, an inability to carry out the majority of personal care or domestic routines; and/or
- Involvement in many aspects of work, education or learning cannot or will not be sustained; and/or

The majority of social support systems and relationships cannot or will not be sustained; and/or the majority of family and other social roles and responsibilities cannot or will not be undertaken.

Support

Assistance provided to individuals to enable them to live with dignity and respect in the community.

Support Broker

This is a person, or a company, commissioned to help to plan and organise the personal budget and support plan with an individual. If the individual chooses to use a specialist support broker they may have to pay for this. However, a broker can also be a family member, a friend, a worker from a voluntary organisation or a Supporting Officer from Adult Social Care. The Support Broker must ensure that the individual is fully involved in the decision making and controls the process of choosing the support plan and its delivery. The Support Broker may not necessarily co-ordinate all aspects of an individual's support but only those aspects with which the individual needs help and support. (See Person Centred Planning Tools)

Supported Self Assessment Questionnaire

The Supported Self Assessment Questionnaire (SSAQ) is used to identify and evaluate an individual's needs in order to deliver an Indicative Personal Budget with enough resources to enable somebody to meet their identified eligible needs. It forms part of the community care assessment, and is the first part of the Resource Allocation System [See Resource Allocation System]

Supporting Officer

General term which could be Social Worker, Care Manager, Care Co-ordinator etc.

Support Plan

A document highlighting how an individual's support needs are to be met. This is drawn up following the assessment process by the Council working in partnership with the individual. The individual will be supported to write their plan themselves. This lets them and those around them consider the 'outcomes' they wish to achieve with their personal budget and how they want to live their life to meet their assessed eligible need/s

Telecare

A subset of Assistive Technology comprising a combination of equipment, monitoring and response designed to help individuals remain independent in their choice of tenure. It includes basic community alarm services able to respond in an emergency and provide regular contact by telephone as well as sensors which detect factors such as falls, flood, fire or gas and trigger a warning to a response centre or family member/carer. Telecare can also provide safety and security by protecting against bogus callers, domestic abuse and burglary. Telecare is also an overarching term for Telehealth and Telemonitoring. Telehealth is the remote monitoring of vital signs; often associated with the monitoring of Chronic Obstructive Pulmonary Disease (COPD) and Chronic Heart Failure (CHF). Telemonitoring is the remote monitoring of activity in a preventative mode which can provide early warning of deterioration, thereby prompting an appropriate response from family or professionals.

Universal Services

Universal Services are local services and support that are important in someone's life, not just those with social care needs. This includes things like Transport, Leisure, Health, Housing, Libraries, Universal information and advice, which are the services that support people to maintain their health and well-being and their citizenship.

Validation

The process by which an individual's support plan, and therefore their indicative personal budget, is agreed or not agreed by the Council.