

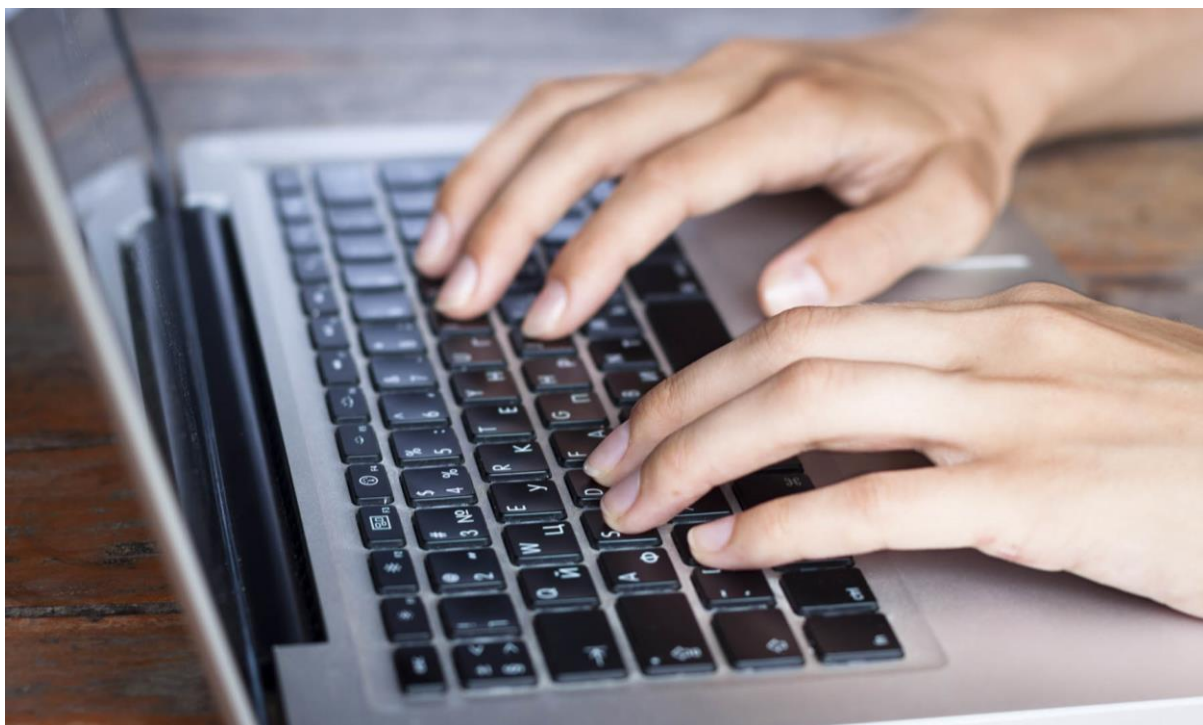
COVID-19: Implementation of Easements

This resource has been prepared for tri.x customers. Its purpose is to support practitioners and managers on the frontline when the local authority has decided to implement some or all of the easements to the Care Act 2014 set out in sections 14 and 15 of the [Coronavirus Act 2020](#).

It provides information about carrying out revised adult care and support duties and functions, and which procedures this is likely to have an impact upon.

Use the Contents list on the following page to find the information you are looking for.

Updated 13.10.20



NOTE: If your local authority is managing to sustain all duties under the Care Act this guidance does not apply.

Key decision makers should see [Care Act easements: guidance for local authorities](#) for guidance on deciding whether/when to apply the easements.

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1. Making Decisions

Local authorities will still be expected to do as much as they can to comply with their powers to meet needs during any period of easement and the duty of care they have towards an individual's risk of serious neglect or harm still remains.

In all cases

When making decisions about whether or not to do something, how to do it or should do it you should apply available ethical frameworks to guide decision-making, supported by the views of lead professionals, collaboration across disciplines and organisations, and the extent of information available in each particular circumstance.

See:

[COVID-19: ethical framework for adult social care](#)

[Responding to Covid-19 framework principles one pager](#)

[Covid-19 Pandemic-Ethical Guidance for Social Workers \(BASW\)](#)

[Social Work England Professional Standards](#)

[Social Work England Professional Standards Guidance](#)

[HCPC Standards of Proficiency for Occupational Therapists](#)

Individuals who may lack capacity

The Coronavirus Act 2020 has not amended any of the duties in or principles of the Mental Capacity Act 2005. As such, if there are concerns that a person may lack capacity these should still be fully applied as part of any decision making process.

See:

[Coronavirus \(COVID-19\): looking after people who lack mental capacity](#)

[Mental Capacity Act \(MCA\) and the COVID-19 crisis-SCIE](#)

[Best Interests Decisions: A COVID-19 Quick Guide](#)

[The Mental Capacity Act 2005 Resource and Practice Toolkit](#)

The duty to meet needs and Human Rights

Under the Coronavirus Act 2020, the duty to meet needs only applies when doing so necessary to avoid a breach of an adult's/carer's Convention rights.

See: [Human Rights Act 1998](#)

2. General Responsibilities of the Care Act

All general responsibilities of the Care Act continue to apply under the easements.

Use the links below for further guidance as required.

[Promoting Individual Wellbeing](#)

[Preventing Needs for Care and Support](#)

[Providing Information and Advice](#)

[Co-operation](#)

[Promoting Integration of Care and Support with Health Services](#)

[Promoting Diversity and Quality in Service Provision](#)

There is a range of guidance to support effective implementation of the general responsibilities during the current pandemic, particularly around the provision of good information and advice. The following list is an example only:

[Supporting people who are isolated or vulnerable during the COVID-19 crisis](#)

[Being a deputy or attorney during the coronavirus outbreak](#)

[COVID-19 help and advice for informal carers](#)

[Coronavirus \(COVID-19\): guidance for people receiving direct payments](#)

[Personal Assistants returning from shielding-TLAP Factsheet](#)

3. Safeguarding & Risk Assessment

Procedures impacted

Adult Safeguarding Procedures

Risk Assessment

Lone Working

Safeguarding

The Coronavirus Act 2020 has not amended any of the duties and responsibilities of the local authority in regards to safeguarding. As such, if there are concerns that a person may be experiencing, or at risk of abuse or neglect concerns must still be raised and enquiries undertaken.

There is recognition that safeguarding during the pandemic is more challenging and Covid-19 specific guidance to support practice has become available;

[Safeguarding adults during the COVID-19 crisis](#)

[Guidance for Safeguarding Adults during Covid-19](#)

Risk Assessment

The BASW ethical guidance for social workers states that any assessment of risk carried out at the current time (including risk to a person/carer or to yourself or a colleague) should include the risk of Covid-19 infection.

4. Referrals and Assessment

Procedures impacted

Deciding the Outcome of a Contact or Referral (all versions)

Actions and Next Steps (all versions)

Preparing to Establish Needs (all versions apart from transition)

The Skilled Conversation

The Skilled Conversation (Adult Carer's Assessments/Carers)

Agreeing Needs and Making a Formal Record (all versions)

The duty to assess needs

Where there is an appearance of need, there remains a duty to establish what those needs are and whether or not there is a requirement to meet them. However, under the easements, this assessment does not have to be a full and comprehensive needs assessment, as set out in sections 9 and 10 of the Care Act.

Prioritising assessments

Needs must be established as soon as possible after a request/referral has been received.

Requests for assessments should be prioritised so that those people with the highest level of need receive support first.

When deciding whether or not a timeframe is reasonable, and how high a person's/carer's needs are, this should be considered in the context of human rights. Under the easements, it of paramount importance that human rights are not jeopardised.

See: [Human Rights Act 1998](#)

At times, it may be challenging to make decisions about priority and available decision making guidance should be used to support this.

See: [Making Decisions.](#)

Effective records of decision making around prioritisation should be kept. This should:

- Include the rationale for the decision/evidence used;
- Demonstrate professional judgement and use of ethical frameworks; and
- Where necessary, record how human rights have been considered.

High risk cases where assessment is delayed should be monitored and re-prioritised should human rights become jeopardised.

Independent Advocacy

There is nothing in the Coronavirus Act 2020 that alters the duty to provide independent advocacy when any care and support process is being carried out and the person lacks capacity or person/carer has substantial difficulty. Advocates may have to carry out their functions remotely, making effective use of technology.

The process of assessment

The government expects each local authority to use a simplified assessment process under the easements. This should ensure that the information gathered is comprehensive enough for a determination about the level and impact of needs on human rights to be made.

If you are unclear about the assessment process being used by your local authority you should seek the support of your line manager or the Principal Social Worker.

The method of assessment

Any decision about the method of assessment should take into account the individual needs and abilities of the person/carer and have regard to the Equality Act 2010 (reasonable adjustments).

Supported self-assessment

If the local authority already uses an appropriate supported self-assessment process (or can adapt it as necessary) it should be promoted, so long as it is accessible to the person/carer (or they have appropriate support).

Other methods

Due to the current measures with regards to social distancing, it is important to be as flexible as possible when considering options.

The government guidance suggests the following possibilities:

- Use of third party/allied professionals to carry out the assessment;
- Use of telephone assessments;
- Use of video technology.

When using video or other technology you should refer to available guidance to ensure this is the most appropriate method and is carried out in the most effective way:

[Digital capabilities for social workers: Ethical considerations](#)

[Guidance on working virtually](#)

[Technology checklist for video calling an adult or carer](#)

Face to face assessment

Face-to-face assessment should still take place when it is necessary, for example to meet communication needs, assess risk or if there are concerns about human rights. During face-to-face visits regard must be given to current guidance on social distancing, shielding and self-isolation.

See: [Appendix 1: Government Guidance Links](#)

Depending on your setting, further guidance about face to face visits can be found in the following documents from BASW. This includes guidance about deciding whether or not a face to face visit is necessary, preparing for a face to face visit, multi-agency visits as well as a host of useful links:

[Professional practice guidance for home visits during Covid-19 Pandemic](#)

[Professional practice guidance for hospital social work with adults during Covid-19](#)

[Deciding who should carry out the assessment](#)

Managers with responsibility for allocation should exercise pragmatism, flexibility and good health and safety practice ([Social Workers Union](#)).

Under the easements, the local authority will not be penalised if the practitioner carrying out an assessment does not have all the necessary skills, knowledge and competence to carry out the assessment in question.

Note: This does not mean that anyone at all can complete an assessment. It means that a practitioner who has a particular area of expertise in one area can carry out an assessment in another where their knowledge may be more limited (e.g. a transition worker can assess an older adult).

Individuals who are deafblind

The local authority is still required to make reasonable adjustments under the Equality Act 2010, so wherever possible should ensure that these assessments are carried out by a practitioner who has specific training and expertise relating to people who are deafblind.

Individuals with Autism

The local authority is still required to make reasonable adjustments under the Equality Act 2010, so wherever possible should ensure that these assessments are carried out by a practitioner who has specific training and expertise relating to people who have Autism.

[Before carrying out the assessment](#)

You should provide information about the assessment process to the person/carers before beginning the assessment.

This should include letting them know in the future, their needs may be reassessed under the Care Act and that, as a result of this, any services that are arranged now may be altered.

Wherever possible, the provision of this information should be in a format that is accessible to the person/carer and/or steps taken to support them to understand it.

Information about financial assessment and charging

Under the easements, the local authority does not have to carry out a financial assessment before providing chargeable services, as set out in section 17 of the Care Act. If this is the case, no up-front charge can be made for those services.

It is important for you to understand the local position because if the local authority is not going to carry out a financial assessment you will need to let the person/carer know that an assessment may be completed retrospectively and charges backdated.

If this information results in a person with capacity declining the service, the local authority is under no legal obligation to provide it. If in the case of a person that lacks capacity, a relevant individual (e.g. a LPA) declines the service, the local authority is under no legal obligation to provide it.

If this results in a carer declining a support service, the local authority is under no obligation to provide it.

The Skilled Conversation

What must be included?

The conversation must gather information about the person's/carer's needs that is sufficient enough for you to make a determination about the level of need and the impact the needs are having on human rights.

Because the general responsibilities of the Care Act still apply the conversation should also consider how needs can be prevented, reduced or delayed and the impact on individual wellbeing. Relevant information and advice about care and support should also be provided when requested, or when it would be beneficial.

Involving the person/carer

It is important that the person/carer to whom the assessment relates is as involved as possible in the process.

This includes thinking about the method of assessment (see above) but also any support they may need during the assessment itself.

The need for advocacy should always be considered, as should any reasonable adjustments that may be required under the Equality Act 2010. This may include the provision of an interpreter.

In the event that human rights become jeopardised whilst measures to promote involvement are being put in place, the local authority will not be penalised if you decide to carry out the assessment with limited or no involvement of the person/carer. This decision should be made in agreement with your line manager or the Principal Social Worker and a record should be made that:

- Includes the rationale for the decision/evidence used;
- Demonstrates professional judgement and use of ethical frameworks;
- Records how human rights have been considered.

Involving others-needs assessment

Unless it will lead to a delay that jeopardises human rights, you should take reasonable steps to involve any informal carer or any other individual the person being assessed has asked you to involve.

The same applies in regards to consultation with someone who has expertise in relation to the person's condition or circumstances (for example a health expert).

Where someone has not been involved a record should be made that:

- Includes the rationale for the decision/evidence used;
- Demonstrates professional judgement and use of ethical frameworks;
- Records how human rights have been considered.

Involving others-carers assessment

Unless it will lead to a delay that jeopardises the carer's human rights, you should take reasonable steps to involve anyone that the carer being assessed has asked you to involve.

Where someone has not been involved a record should be made that:

- Includes the rationale for the decision/evidence used;
- Demonstrates professional judgement and use of ethical frameworks;
- Records how human rights have been considered.

The Impact of needs on others

The assessment process does not need to specifically consider the impact of the person's/carer's needs on other family members. However, if such needs come to light and it is clear that the family member would benefit from an assessment, information or advice this should be provided.

If that family member is a young person or a young carer, any need to make a referral to children's services or raise a safeguarding concern should be considered.

Recording needs

The government expects each local authority to use a simplified system for recording needs under the easements. It does not specify what this should be, and if you are unclear about local requirements you should seek the support of your line manager or the Principal Social Worker (whose responsibility it is to ensure continued effective recording).

The record should include enough information to enable a decision about meeting needs to be made.

After the assessment

The outcome of the assessment and the rationale should be provided to the person/carer. However, under the easements a written record of the assessment does not have to be provided (although if possible should be).

Storing and protecting data

The legal obligation to protect data remains throughout the pandemic. There is information on the website of the Information Commissioners Office to support you with this:

[Data protection and coronavirus: what you need to know](#)

[Data protection and working from home](#)

tri.x has also developed a new procedure: [Storage of Data on Practitioner's Mobile Devices](#)

After the emergency

When the provisions of the Coronavirus Act are suspended the local authority will be required to undertake any relevant assessments that it previously decided not to undertake. These must all be undertaken within a 'reasonable' period taking into account the length of the emergency and the number of deferred assessments.

5. Eligibility

Procedures impacted

Understanding and Applying Eligibility Criteria (all versions)

Communicating the Outcome and Next Steps (all versions)

Establishing eligibility

Under the easements, the Care Act eligibility criteria do not need to be applied for people with care and support needs or carers with support needs.

A need is 'eligible' if meeting it is necessary to avoid a breach of any human right.

These include:

Article 2: Right to life

Article 3: Prohibition of torture

Article 4: Prohibition of slavery and forced labour

Article 5: Right to liberty and security

Article 8: Right to respect for private and family life

Article 10: Freedom of expression

For further information see: [Human Rights Act 1998](#)

Also see: [Making Decisions](#)

Recording eligibility

The government expects each local authority to use a simplified system for recording eligibility under the easements. It does not specify what this should be, and if you are unclear about local requirements you should seek the support of your line manager or the Principal Social Worker (whose responsibility it is to ensure continued effective recording).

As a minimum the record of eligibility should:

- Include the rationale for the decision/evidence used;
- Demonstrate professional judgement and use of ethical frameworks;
- Record how human rights have been considered.

If needs are not eligible

There is nothing in the Coronavirus Act that changes existing powers of the local authority to meet a person's/carers' needs, even when they are not eligible needs.

If the local authority decides not to exercise its power to meet ineligible needs you should inform the person/carer its reasons for not doing so and provide any relevant information and advice about what they can do to prevent, reduce or delay needs for care and support in the future.

High risk cases where should be monitored and re-assessed should human rights became jeopardised.

6. Meeting Needs

Procedures impacted

Requesting a Financial Assessment

Setting an Indicative Budget

Care and Support Planning/Support Planning

Signing Off a Care and Support Plan and Agreeing a Final Personal Budget

Signing Off a Support Plan and Agreeing a Final Personal Budget

Protecting Moveable Property and Belongings

Direct Payments

Arranging Support and Services

The duty to meet needs-care and support

Under the easements Section 18 of the Care Act (when the duty to meet needs applies) has been **withdrawn** by section 4 of the Coronavirus Act 2020.

Under the easements the conditions upon which the local authority **must** meet an adult's needs for care and support are as follows:

- a. The adult is ordinarily resident in the authority's area or is present in its area but of no settled residence,
- b. The authority considers that it is necessary to meet those needs for the purpose of avoiding a breach of the adult's Convention rights (i.e. the need is an eligible need), and
- c. There is no charge under section 14 for meeting the needs or, in so far as there is, condition 1, 2 or 3 is met.

c. There is no charge under section 14 for meeting the needs or, in so far as there is, condition 1, 2 or 3 is met.

- The service to be provided is a non-chargeable service; or
- The service is chargeable and a financial assessment has been carried out; or
- The service is chargeable and the local authority has decided that it will not complete a financial assessment because it is satisfied that the person's financial resources are either too low to make a contribution, or that they are full charge; or
- The service is chargeable and the local authority has decided that it will delay carrying out a financial assessment until another point of time (which it is permitted to decide under the easements).

See: [Financial assessment and charging](#)

The duty to meet needs-carers

Under the easements Section 20 of the Care Act (when the duty to meet carer's needs applies) has been **amended** by section 6 of the Coronavirus Act 2020.

Under the easements the conditions upon which the local authority **must** meet a carer's needs for care and support are as follows:

- a. The adult needing care is ordinarily resident in the authority's area or is present in its area but of no settled residence,
- b. The authority considers that it is necessary to meet those needs for the purpose of avoiding a breach of the carer's Convention rights (i.e. the need is an eligible need), and
- c. In so far as meeting the carers needs involves the provision of support to the carer, there is no charge under section 14 for meeting the needs, or, in so far as there is, condition 1 or 2 is met, and
- d. In so far as meeting the carer's needs involves the provision of care and support to the adult needing care;
 - i. There is no charge under section 14 for meeting the needs and the adult needing care agrees to the needs being met in that way, or
 - ii. In so far as there is a charge, condition 3 or 4 is met.

c. In so far as meeting the carer's needs involves the provision of support to the carer, there is no charge under section 14 for meeting the needs, or, in so far as there is, condition 1 or 2 is met.

- The service to be provided is a non-chargeable service; or
- The service is chargeable and a financial assessment has been carried out; or
- The service is chargeable and the local authority has decided that it will not complete a financial assessment because it is satisfied that the carer's financial resources are either too low to make a contribution, or that they are full charge; or
- The service is chargeable and the local authority has decided that it will delay carrying out a financial assessment until another point of time (which it is permitted to decide under the Coronavirus Act); or
- The service is chargeable and the local authority has decided that it will not complete a financial assessment at all (e.g. if the local policy is as such).

See: [Financial assessment and charging](#)

d. In so far as meeting the carer's needs involves the provision of care and support to the adult needing care;

- i. There is no charge under section 14 for meeting the needs and the adult needing care agrees to the needs being met in that way, or**
- ii. In so far as there is a charge, condition 3 or 4 is met.**
 - The service to be provided is a non-chargeable service; or
 - The service is chargeable and a financial assessment has been carried out; or
 - The service is chargeable and the local authority has decided that it will not complete a financial assessment because it is satisfied that the adult's financial resources are either too low to make a contribution, or that they are full charge; or
 - The service is chargeable and the local authority has decided that it will not comply with the duty to carry out a financial assessment (which it is permitted to decide under the Coronavirus Act).

See: [Financial assessment and charging](#)

Circumstances when the duty does not apply

Individuals with eligible care and support needs

Circumstance 1

The person has capacity and refuses local authority support.

Circumstance 2

The local authority notifies a person with capacity that there may be a charge for meeting their needs and the person subsequently refuses local authority support.

Circumstance 3

When a person lacks capacity, the local authority notifies a relevant person (e.g. a LPA) that there may be a charge for meeting the adult's needs and that person subsequently refused local authority support.

Carers with eligible support needs

Circumstance 1

The carer refuses local authority support.

Circumstance 2

The local authority notifies the carer that there may be a charge for meeting their needs and the carer subsequently refuses local authority support.

Monitoring and further action

If there are concerns that refusing care and support (or support) may lead to unmanageable risk or safeguarding issues the situation should be monitored and normal safeguarding rules still apply.

Indicative personal budgets

The Coronavirus Act 2020 makes no amendments to section 26 of the Care Act (Personal Budget).

However, because the process of recording the assessment is likely to have been different, and Resource Allocation Systems (RAS) that is normally used to provide an indicative budget may not be available.

If this is the case, the local authority should endeavour to create a new system and this should be as non-bureaucratic as possible.

If you are unclear whether or not the local authority is able to provide an indicative budget or the process of doing so you should seek the support of your line manager or the Principal Social Worker.

Note: Even if an indicative budget is not provided a final personal budget must still be set after the Care and Support Planning/Support Planning process has been carried out.

Care and Support/Support Planning

Under the easements Care and Support Plans/Support Plans still have to be completed but do not have to meet the same requirements as they would under the Care Act.

Care and Support Plans

Care and Support Plans developed under the easements must contain sufficient information to enable a service provider to develop their own Care Plan with the person;

This should include the following:

- An overview of the person's wishes and feelings;
- An overview of the outcomes that need to be considered and achieved;
- Information on key aspects of daily living (personal care, nutrition, hydration and medical needs);
- Information on specific needs (communication, mobility, behaviour, cognition and mental health);
- Information on risk (risk assessment);
- Any information relating to safeguarding.

Support Plans

Carer's Support Plans should contain an overview of the carer's wishes and feelings and the outcomes they wish to achieve from any support provided to them.

Where support for a carer is to be provided via a service to the cared for person a Care and Support Plan should also be completed as above.

Involving the person/carers

The process of planning should maintain the values and ethos of the Care Act, in that it should be person-led and person-centred. As such, the person/carers should be as involved as possible in their plan.

This includes thinking about the method of planning (see below) but also any support they may need during the process itself.

The need for advocacy should always be considered, as should any reasonable adjustments that may be required under the Equality Act 2010. This may include the provision of an interpreter.

In the event that human rights become jeopardised whilst measures to promote involvement are being put in place, the local authority will not be penalised if you decide to complete the plan with limited or no involvement of the person/carers. This decision should be made in agreement with your line manager or the Principal Social Worker and a record should be made that:

- Includes the rationale for the decision/evidence used;
- Demonstrates professional judgement and use of ethical frameworks; and
- Records how human rights have been considered.

Involving others

In the case of a Care and Support Plan, unless it will lead to a delay that jeopardises human rights, you should take reasonable steps to involve any informal carer or any other individual the person whose plan it is has asked you to involve.

In the case of a Support Plan, unless it will lead to a delay that jeopardises human rights, you should take reasonable steps to involve any other individual the carer whose plan it is has asked you to involve.

Where someone has not been involved a record should be made that:

- Includes the rationale for the decision/evidence used;
- Demonstrates professional judgement and use of ethical frameworks; and

- Records how human rights have been considered.

The method of planning

The method of Care and Support/Support Planning is likely to be the same as the method of assessment, as this will have already taken into consideration the individual needs and abilities of the person/carer and whether any reasonable adjustments are required under the Equality Act 2010.

See: [The Method of Assessment](#)

Deciding how to meet needs

Wherever possible, decisions about how to meet needs should be made by the person/carer.

You should provide them with relevant information about the services/support available at the time it is required and this should be from a strengths based perspective wherever possible.

If the involvement of the person/carer is limited you should also consider how best to meet their needs with regard for any wishes and feelings, or outcomes they have shared with you during either the assessment or planning process.

Remember: The general requirements of the Care Act still apply so any decision about how best to meet needs must also consider the impact on individual wellbeing, and whether the service/support can prevent, reduce or delay needs.

Also see: [Direct Payments](#)

Also see: [Meeting needs with accommodation](#)

Recording the plan

The government expects each local authority to use a simplified system for recording Care and Support Plans/Support Plans under the easements. It does not specify what this should be, and if you are unclear about local requirements you should seek the support of your line manager or the Principal Social Worker (whose responsibility it is to ensure continued effective recording).

Signing off the plan and agreeing a final personal budget

The Coronavirus Act 2020 makes no amendments to section 26 of the Care Act (Personal Budget). This means that normal rules apply when determining the final personal budget in regards to timeliness, transparency and sufficiency.

Under the easements, the process of signing off a plan and agreeing a final personal budget is likely to be different and should be less administrative. If you are unclear about the process you should seek the support of your line manager or the Principal Social Worker.

Providing copies of the plan

A copy of the plan should be provided to the person/carer for their records.

A copy should also be provided to any service provider responsible for meeting needs in the plan.

Direct Payments

There is nothing in the Coronavirus Act 2020 that prevents a direct payment from being provided in the normal way.

The local authority will not be penalised if, when a direct payment is to be provided, the Care and Support Plan/Support Plan does not set out which needs are to be met with the direct payment or the amount and frequency of the direct payments.

Meeting needs with accommodation (care home, shared lives or supported living)

Preferences for a particular type of accommodation

To maintain the ethos of the Care Act, a person's preferences should be always be considered. The only caveat is if, to do so will lead to a delay in meeting needs that could jeopardise their human rights.

If this is the case, the local authority will not be penalised if it does not take into account the person's preference for a particular type of accommodation.

Top-Ups when arranging preferred accommodation

If an indicative budget has been provided normal rules apply i.e. a third party top up may be payable if the cost of the preferred accommodation is greater than the indicative personal budget and the person's needs can be met within budget elsewhere.

Where there is no indicative budget provided, the local authority can arrange a third party top up when the cost of the preferred accommodation is more than the cost of other suitable and available accommodation.

Protecting moveable property and belongings

The section 47 responsibility of the local authority to take reasonable steps to prevent or mitigate the loss or damage of a person's moveable property and belongings is removed under the easements.

However, if you become aware that the person's property or an object of great sentimental or financial value is at risk you should still attempt to protect it, for example by liaising with a friend or relative or contacting the police or Housing Authority. Where the belonging is a pet, consideration should also be given to any action required under the Animal Welfare Act 2006.

Providing information about financial assessment and charging

Under the easements, the local authority does not have to carry out a financial assessment before providing chargeable services, as set out in section 17 of the Care Act. If this is the case, no up-front charge can be made for those services.

It is important for you to understand the local position because if the local authority is not going to carry out a financial assessment you will need to let the person/carer know that an assessment may be completed retrospectively and charges backdated.

If this information results in a person with capacity declining the service, the local authority is under no legal obligation to provide it. If in the case of a person that lacks capacity, a relevant individual (e.g. a LPA) declines the service, the local authority is under no legal obligation to provide it.

If this results in a carer declining a support service, the local authority is under no obligation to provide it.

Self-Funders experiencing difficulties accessing services

The government's [Action Plan for Social Care](#) is clear that the local authority should offer support to any self-funding individual or their provider if services cannot be maintained due to Covid-19, even if the provider is not one that the local authority already has a contract with.

In the case of residential care this includes supporting people to move into alternative provision when the risk cannot be managed in the place they normally reside.

7. Review/Revision of Plans

Procedures impacted

Legal Requirements of a Care and Support Plan Review and Tools

Legal Requirements of a Support Plan Review and Tools

Preparing to Carry out a Care and Support Plan Review

Preparing to Carry out a Support Plan Review

The Full Review Conversation (all versions)

The Light Touch Review Conversation (all versions)

Actions Following a Care and Support Plan Review

Actions Following a Support Plan Review

Direct Payments

Monitoring plans

High risk cases where should be monitored and action taken to revise the plan should human rights became jeopardised.

The duty to review plans

Under the easements, the local authority does not have to carry out 6 week reviews or annual reviews as it would ordinarily have a duty to do under the Care Act.

However, a proportionate review process should still take place when a request to revise a plan has been made, or the need to do so has been identified through monitoring.

The power to revise plans

There is nothing in the Coronavirus Act that changes existing powers of the local authority to revise a Care and Support Plan (or Support Plan) and, under the easements, this is the way that most amends to existing services will be carried out.

Plans should only be revised when either a proportionate review or a proportionate reassessment has been carried out.

Proportionate review

The purpose of a review is to establish:

- What has changed;
- Whether the person's needs have changed;
- Whether human rights are jeopardised; and
- Whether the Care and Support Plan/Support Plan needs to be revised.

Method of review

At its simplest this may be a short telephone conversation involving the person/carer whose plan it is and any service provider.

It could also be a more comprehensive process, particularly if there is significant risk, a safeguarding concern or the persons/carers circumstances or needs are complex.

Any decision about the method of assessment should take into account the individual needs and abilities of the person/carer and have regard to the Equality Act 2010 (reasonable adjustments).

Due to the current measures with regards to social distancing, it is important to be as flexible as possible when considering options.

The government guidance suggests the following possibilities:

- Use of third party/allied professionals to carry out the review;
- Use of telephone reviews;
- Use of video technology.

When using video or other technology you should refer to available guidance to ensure this is the most appropriate method and is carried out in the most effective way:

[Digital capabilities for social workers: Ethical considerations](#)

[Guidance on working virtually](#)

[Technology checklist for video calling an adult or carer](#)

Face to face review

Face-to-face review should still take place when it is necessary, for example to meet communication needs, assess risk or if there are concerns about human rights. During face-to-face visits regard must be given to current guidance on social distancing, shielding and self-isolation.

See: [Appendix 1: Government Guidance Links](#)

Depending on your setting, further guidance about face to face visits can be found in the following documents from BASW. This includes guidance about deciding whether or not a face to face visit is necessary, preparing for a face to face visit, multi-agency visits as well as a host of useful links:

[Professional practice guidance for home visits during Covid-19 Pandemic](#)

[Professional practice guidance for hospital social work with adults during Covid-19](#)

The outcome of the review and the rationale should be provided to the person/carer. However, under the easements a written record of the review does not have to be provided (although if possible should be).

Proportionate reassessment

When a proportionate review identifies a change in need a proportionate reassessment should take place to confirm that the person/carer's needs are still eligible.

This should be carried out in the same manner as for an initial assessment and build upon information already gathered through proportionate review and any previous assessment to confirm the change in need.

See: [Referral and Assessment](#)

Revising a plan

The process of revising a plan should, wherever possible be the same as the process for preparing a plan.

The values and ethos of the Care Act should be maintained, in that the process should be person-led and person-centred.

See: [Care and Support Planning](#)

Signing off the plan

Under the easements, the process of signing off a revised plan and, where necessary amending a personal budget is likely to be different and should be less administrative. If you are unclear about the process you should seek the support of your line manager or the Principal Social Worker.

Providing copies of the plan

A copy of the revised plan should be provided to the person/carer for their records.

A copy should also be provided to any service provider responsible for meeting needs in the plan.

Direct Payments

Anyone receiving a direct payment should be monitored to make sure they are not experiencing any difficulty accessing the support in their Care and Support Plan. Anyone that is experiencing difficulty should be supported by the local authority.

Anyone employing a personal assistant where personal protective equipment (PPE) is not part of their Care and Support Plan can approach the local authority for support in accessing the PPE required.

Storing and protecting data

The legal obligation to protect data remains throughout the pandemic. There is information on the website of the Information Commissioners Office to support you with this:

[Data protection and coronavirus: what you need to know](#)

[Data protection and working from home](#)

tri.x has also developed a new procedure: [Storage of Data on Practitioners Mobile Devices](#)

8. Transition

Procedures impacted

Deciding Whether to Start Transition

Preparing to Establish Needs (Child's Needs Assessment)

Preparing to Establish Needs of Adult Carers

Preparing to Establish Needs of Young Carers

The Skilled Conversation (all transition versions)

The Transition Plan

Agreeing Needs, Making a Formal Record and Next Steps (all transition versions)

Transition assessments under the Care Act

Under the easements, local authorities are relieved of the duty to complete transition assessments under the Care Act.

If a young person or young carer is soon going to be 18 and is likely to have an appearance of need from this time, monitoring arrangements should be put in place to ensure that a needs assessment is carried out as soon as possible after this time.

See: [Referrals and Assessment](#)

Impact on duties under the Chronically Sick and Disabled Persons Act 1970

If, by the time a young person turns 18, the local authority adult social care has not carried out a proportionate needs assessment and determined whether the duty to meet needs applies they will not be penalised if they do not make interim arrangements for the continuation of services until such time that it is.

This does not mean that a child who has turned 18 should be left without services. It is likely that should this situation occur children's services would have no alternative but to continue provision until the matter is concluded.

Impact on the Children Act 1989

If, by the time a young carer turns 18 (or the cared for child of a parent carer turns 18), local authority adult social care has not carried out a proportionate needs assessment and

determined whether the duty to meet needs applies they will not be penalised if they do not make interim arrangements for the continuation of services until such time that it is.

This does not mean that a young carer who has turned 18 (or a parent carer whose child has turned 18) should be left without services. It is likely that should this situation occur children's services would have no alternative but to continue provision until the matter is concluded.

9. Financial Assessment & Charging

Procedures impacted

Financial Assessment Procedure

Requesting a Financial Assessment

Carrying out a financial assessment

Under the easements, the local authority does not have to carry out a financial assessment before providing chargeable services, as set out in section 17 of the Care Act.

If the local authority decides to carry out a financial assessment normal rules apply.

Note: It is important for you to understand the local position because if the local authority is not going to carry out a financial assessment you will need to let the person/carer know that an assessment may be completed retrospectively and charges backdated (see below).

Charging

If the local authority has not carried out a financial assessment it is **not permitted** to make a charge for any of the services provided.

Under the easements, the local authority is permitted to carry out a retrospective financial assessment at any point (even if services it provided during the easement period have ended) and backdate any subsequent contributions to the date that services began.

10. NHS Continuing Healthcare

Procedures impacted

NHS Continuing Healthcare Procedure

NHS-funded Nursing Care Procedure

Under section 14 of the Coronavirus Act 2020, NHS bodies (CCG's and NHS Trusts) were relieved of their duty to carry out NHS Continuing Healthcare assessments until the end of the emergency period.

However, from 1st September 2020 all assessments, reviews and eligibility decision reviews **in the community** have recommenced.

[Reintroduction of NHS Continuing Healthcare \(NHS CHC\): guidance](#)

The NHS Continuing Healthcare checklist and referral for assessment

In the community

Social care practitioners should complete NHS Continuing Healthcare Checklists and make referrals to the CCG as normal for people living in the community.

In hospital

The NHS Trust remains responsible for the completion of any checklists for people in hospital prior to discharge. However, the duty to do so remains suspended.

NHS-funded Nursing Care

In the community

Following a determination of eligibility for NHS Continuing Healthcare, the CCG should consider NHS-funded Nursing Care eligibility as normal for people living in the community.

In hospital

NHS Trusts only need to consider NHS-funded Nursing Care prior to hospital discharge if it carries out an assessment of eligibility for NHS Continuing Healthcare. However, the duty to do so remains suspended.

11. Hospital Discharge

See also:

[Referral and Assessment](#)

[Eligibility](#)

Changes to notices

Under the easements, section 3 (1) of Schedule 3 (Discharge of Hospital Patients with Care and Support Needs) has been amended by the Coronavirus Act 2020:

The relevant authority, having received an assessment notice must inform the NHS body responsible for the patient:

- a) Whether the patient has needs for care and support
- b) (where applicable) whether the carer has needs for support
- c) Which (if any) of those needs the authority plans to meet, and
- d) How the authority plans to meet those needs.

Changes to D2A

To facilitate swift hospital discharges and reduce the risk of DTOC's the government has provided additional funding to the NHS to meet the cost of any out of hospital interim care needed whilst longer term needs are established.

This includes care in the community but also in a care home.

The local authority is expected to support the NHS in identifying and making suitable discharge arrangements for people, and subsequently in reviewing interim measures and assessing for long term needs.

When providing information to people being discharged it is important to let them know that, following an assessment post-discharge, any long term needs they have may be met by the local authority, and that if so, there may be a charge.

For full guidance on revised D2A requirements see:

[COVID-19 Hospital Discharge Service Guidance](#)

12. Continuity of Care Arrangements

Procedures impacted

Continuity of Care Arrangements

Prisons and Approved Premises

Assessment of need by the second authority

Under the easements, the second authority (the local authority where the person is moving to) does not have to carry out an assessment of need until the person has moved into their area. Neither does it have to carry out any other duty under section 37 of the Care Act in regards to the move.

Note: In the spirit of co-operation under the Care Act, if the second authority is aware of the intended move date, that the person is likely to have an appearance of need and that meeting that need is likely to be necessary to avoid a breach of human rights they should look to put arrangements in place to prioritise the assessment.

Interim arrangements

Under the easements, if the second local authority has not carried out an assessment of need and put services in place for the day of the move, the requirement for them to make interim arrangements to provide services in line with the previous Care and Support Plan does not apply (section 38 of the Care Act).

Note: This does not mean that a person should be left without services by the first local authority. It is likely that should this situation occur they will have no alternative but to continue provision until the matter is concluded.

13. Protecting Moveable Property and Belongings

Procedures impacted

Protecting Moveable Property and Belongings

The section 47 responsibility of the local authority to take reasonable steps to prevent or mitigate the loss or damage of a person's moveable property and belongings when they either move into accommodation (care home, shared lives or supported living) or are admitted to hospital is removed under the easements.

However, if you become aware that the person's property or an object of great sentimental or financial value is at risk you should still attempt to protect it, for example by liaising with a friend or relative or contacting the police or Housing Authority. Where the belonging is a pet, consideration should also be given to any action required under the Animal Welfare Act 2006.

14. End of Life

Procedures impacted

End of Life Procedures and Practice Guidance

The government's [Action Plan for Social Care](#) sets out the expectations in terms of end of life practice, to ensure dignity is respected and promoted during Covid-19. This in general reiterates that good end of life practice should continue.

Visits

“While it has been recommended that care homes limit unnecessary visits, visits at the end of life are important for both the individual and their loved ones and should continue”

[Visitors' Protocol-Care Provider Alliance briefing](#)

[Advance care planning, Power of Attorney etc.](#)

Everyone nearing the end of life should be offered the opportunity and supported, if they wish, to develop advance care plans that make their wishes clear, and to make arrangements to get their affairs in order.

Palliative and end of life care

End of life care, including palliative care, must continue to be planned in a holistic way involving social care, community nursing, general practice, occupational therapy and others. This includes access in people's homes and care homes to professionals and equipment that support this.

Further guidance

[BASW End of Life social work during Covid-19](#)

[Social Work in Multi-Disciplinary and Multi-Agency Contexts during Covid-19](#)

15. No Recourse to Public Funds

Procedures impacted

No Recourse to Public Funds

There are no changes to the core rights of a person with No Resource to Public Funds.

However, the No Recourse to Public Funds Network has produced a helpful factsheet to support practitioners in understanding and navigating some of the challenges in working with this group of people through the pandemic.

[Supporting people with no recourse to public funds during the coronavirus \(Covid-19\) pandemic](#)

16. AHMP

Procedures impacted

AMHP Procedure

A range of guidance has been introduced to support Approved Mental Health Professionals to understand the changes to Mental Health Act legislation, and to carry out their role effectively and safely.

[Information and support for Approved Mental Health Professionals, AHMP Leads and PSW's on the role of the AHMP during the Covid-19 pandemic](#)

[BASW Covid-19 Webinar for AHMP Leads and PSW's](#)

Appendix 1: Government Guidance Links

The following are links to a range of core government guidance.

The full range of COVID-19 government guidance for adult social care can be found at:

[Supporting people with no recourse to public funds during the coronavirus \(Covid-19\) pandemic](#)

[Care Act easements: guidance for local authorities](#)

[Adult Social Care: our COVID-19 winter plan 2020-2021](#)

[Ethical Framework for Adult Social Care](#)

[Visiting care homes during coronavirus](#)

[Coronavirus \(COVID-19\): looking after people who lack mental capacity](#)

[Guidance on shielding and protecting people defined on medical grounds as extremely vulnerable from COVID-19](#)

[Guidance for households with possible coronavirus infection](#)

Visit the **tri.x Resources** area of your procedures, where we have collated a wider range of government guidance for the adult social care sector, as well as bespoke information and resources from a range of sources and for a range of practice areas. These include Court of Protection, informal carers, personal assistants, shared lives, and regulated providers, mental health (including AHMP), commissioning, education and more.....