

# The Principal Social Workers' Top Tips for Proportionality in Assessment & Review 2023

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## Forewords

Lyn Romeo, Chief Social Worker

Never has there been a time when social work has played a more vital role in helping people live the lives they want. As set out in the Care and Support Statutory Guidance ('the CASS guidance') 'The core purpose of adult care and support is to help people to achieve the outcomes that matter to them in their life.' The modern challenge is how local authorities do this in a drastically changed landscape that is increasingly more digital, with reducing budgets and increasing need and complexity.

Covid-19 has massively impacted on the social determinants of health and wellbeing, shifting societal expectation and behaviour and there has been a recent increase in demand on local authorities for support under the Care Act 2014. With no notice, in March 2020, Adult Service departments within local authorities and Trusts around England had to find creative and innovative ways to use technology to continue to engage with and support the people we serve. The approach of digital innovation has afforded many people better choice and control over how they engage with their social worker to best suit their individual circumstances. How do we ensure that these opportunities are not lost in the return to customary practice? How do local authorities and Trusts ensure proportionality in assessment and intervention?

This guide, written in partnership with Principal Social Workers (PSWs) offers a series of top tips and case studies to help practitioners, their local authorities and Trusts considering the positive lessons learned and opportunities from the pandemic to adjust practice in a person-centred way, thinking carefully about how they respond in line with the Care Act 2014 in proportionality and work alongside people (and their carers) who are need of care and support. This is a supplementary guide to the Care Act 2014 and Care and Support Statutory the ('CASS') guidance.<sup>1</sup>

Adult National Principal Social Worker (PSW) Network Leadership Team on behalf of the Network

Quality social work, delivered in a person-centred, anti-racist and anti-discriminatory approach, with a risk-positive, human rights' ethos is the value backbone of our profession. Proportionality must not be used only as a vehicle to deliver financial efficiencies - it is imperative that the right support is provided at the right time, determined in partnership with the person. Our role is to help people live the lives they want. This guide offers the local authorities and trusts some useful considerations to ensure that ethics and values are always the prevalent factors of good care, whilst ensuring value for money.

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<sup>1</sup> This reference guide is subordinate to the CASS Guidance, and where there is any conflict the Statutory Guidance takes precedence.

## Jak Savage, Social Care Consultant

We should seek to innovate and find new ways of working for the way some re-assessments and reviews are carried out, to ensure our practice remains the best practice. We can do this by fostering more opportunities for co-production with those in receipt of support and those who co-facilitate that support at home. This remains a priority to evolve service delivery at a Local Authority level, and we should increase opportunities for consultation with those in receipt of support from all demographics, across all social care.

Better communication and forward planning can help us move away from a 'wait until we get in touch' approach with no idea when a review will take place, towards scheduling an estimated month for a more worry-free experience for the person seeking care.

By explaining what will be asked at a review, explaining what an assessment processes will entail, and widening our participation in activities, we can quell pre-conceived ideas, alleviate stressors, make the process more comfortable, put people at ease, and help them to open up about their circumstances.

Digital innovation has become ever more prevalent in our lives and I for one prefer a digital video review as opposed to a phone call if a home visit cannot be offered. With the right technology and processes in place, I think a 'real-time' system with a lengthy visit may not always be required. I would envisage a future where an app can be used to contact a social worker or to submit answers to review questions prior to a review taking place. I think this could enable a Social Worker or reviewing officer to better meet identified need, and we should innovate to create a wider range of options for keeping in touch.

Provision of support plans post-assessment in a timely manner in a communication method chosen by the individual aid's transparency, affords opportunities for correction and fosters trust between Social Worker and person in need of care and support.

The need for proportionality has never been more relevant. Putting someone through a full review just because a change has been reported or discussed can mean people stop telling us about changes. We should not accept the status quo and struggle on if the only thing holding back improvement is an initial feeling of uneasiness or loss of what we are used to.

Creating resource maps to provide pre-assessment/ review information should be a priority. 'What to expect' and a walk-through diagram of what happens within process can help manage expectations.

## Introduction

The Care Act has flexibility for different types of assessments, and COVID-19 has had a huge impact on practice and Adult Social Care practice in finding new and innovative ways to carry out care and support needs assessments. The first contact with someone in need of care and support, or their representative, is at the beginning of an assessment conversation and there are many routes for this to happen. With increasing need and complexity, this guide offers support in setting out a range of assessment methods, and how best to utilise them.

## What do we mean by proportionality?

The Care Act Statutory Guidance (chapter 6.3) reminds us that... *“an ‘assessment’ must always be appropriate and proportionate. It may come in different formats and can be carried out in various ways...”*

### Proportionality should be person-centred:

- ✓ Personalised assessments will capture the essence of the person, their lived life, their aspirations, and their culture. This is how we can understand what proportionate impacts on a person’s well-being. The person will recognise themselves in the assessment, which is about them as an individual and their personality shines through and goes beyond the initial purpose of the assessment.
- ✓ To act proportionately is to provide the right level of response to suit the needs of the person, the situation, or the level of risk.
- ✓ The person should feel listened to, their views clearly recorded and shared with the person for their views and validation
- ✓ It is an individualised or person-centred response and not a decision based on the needs of an organisation for efficiency benefits.

### Purposeful Flexibility

- ✓ When deciding how to work with someone it is important to choose the right methods for the right situation, and it is best practice to offer someone a choice about how they would like their assessment and in what environment (face-to-face, supported-self assessment or online for example) and consider this in line with professional considerations such as safety
- ✓ Being flexible about your approach to working with someone can enable greater inclusivity and practitioners can be attentive to making reasonable adjustments, adapting their communication style, or considering someone’s cultural preferences (in the broadest possible sense) to enable optimum engagement with the assessment process.
- ✓ People conducting assessments should adopt purposeful flexibility in their own working week whilst meeting the needs of the people they are working alongside. Proportionate does not always mean ‘lighter touch’.
- ✓ Collecting relevant information from other sources in advance of a face-to-face conversation can help prepare for a good quality interaction, and digital

tools can help share relevant information more effectively. Pre-reading system information and the current support plan remains an effective way to gather pre-visit background and will alleviate the need for repetition or 'starting from the beginning.'

### **Choice and safety**

- ✓ Consider whether joint or combined assessments would benefit the person, providing consistency and reducing the need to tell their story more than once.
- ✓ A personalised approach and understanding are key to being able to complete an assessment in the most appropriate manner. Understanding the needs of the individual and how they significantly impact on wellbeing outcomes is key to the depth and breadth of the assessment to be considered.
- ✓ Any choice must be based on an understanding of the individual's needs and aspirations as well as the professional analysis of the social work practitioner. A supportive and honest conversation about the interaction of these two elements will allow for greater choice that is also compliant also with legislation.
- ✓ Safety can be a subjective concept and as such must be reflected upon with the individual to be understood and form part of the assessment. It is important to remember that the belief of services and professionals as to what is safe may not be the same as the individuals and that taking risk is a part of everyday positive lives.

### **Equality, Diversity and Inclusion**

- ✓ Demonstrate that you are considering all aspects of someone's life by ensuring that you ask questions about their ethnicity, sexuality, religious beliefs for example.
- ✓ Consider the timing of your contact, for example whether it is during an important religious day. If you do not ask, a person might assume that these parts of their life are less important. You may miss valuable insights about how someone chooses to live their life, what strengths they have, what is important to them and most importantly how they want to achieve their outcomes.
- ✓ Learn about the whole person so that we can work with them to capitalise on their strengths, be risk positive and enable them to participate in activities that are meaningful to them.

## Principles of a good assessment under the framework of the Care Act 2014

Local Authority practitioner capacity should be deployed as effectively as possible, especially where demand for assessments is high and assessor time is limited, ensuring that Social Worker time focuses on supporting people with more complex needs and circumstances. Ensuring the optimum ratio of qualified staff to other social care staff who are undertaking assessments, care and support planning and reviews will be essential in responding in a timely way to people needing care and support.

Social work assistants, social care assessors and social work apprentices, as well as those staff involved as 'trusted' assessors from third parties should have access to supervision/oversight from regulated professionals who can ensure assessments are of good quality and comply with the Care Act.

A meaningful assessment of a person's needs should always be underpinned by the duty of the Local Authority to promote well-being, with a strong commitment to anti-racist, anti-discriminatory and anti-oppressive practice and human rights. This applies equally to assessment with a person who has care and support needs, with someone who is a carer, or when the Local Authority has formally delegated their assessment duty, for example to an organisation supporting carers, or to an NHS Provider Trust.

The purpose of the needs assessment is to identify personal, desired outcomes, existing needs, and the impact of those needs on the person's individual wellbeing. It is fundamental in the upholding of a person's human rights, and in maintaining or improving their quality of life. Building a relationship with a person, their family and networks, assessors will gather and share information to co-produce a holistic picture of the person's strengths, hopes, feelings and needs. The assessment should enable consideration, judgement and planning around risk and crisis.

You should gather consent from people in need of care and support by discussing the sharing of information at the start of conversations. It would be considered best practice to consider who people in need of care and support would like present, and if they are happy to discuss their needs in their presence, when booking a time for assessment or review.

Pre-reading system information and the current support plan remains an effective way to gather pre-visit background and will alleviate the need for repetition or 'starting from the beginning.'

Assessment can be a therapeutic intervention and 'should not just be seen as a gateway to care and support but should be a critical intervention in its own right' (the 'CASS' guidance, 2023, 6.2). If there is an appearance of need for care and support,

a needs assessment must be carried out<sup>2</sup>, regardless of the individual's financial means. Chapter 6.6 of the 'CASS' guidance states... *'the assessment and eligibility process provides a framework to identify any level of need for care and support so that local authorities can consider how to provide a proportionate response at the right time, based on the individual's needs.'*

The Social Care Institute for Excellence (SCIE) has also highlighted several relevant considerations for ensuring good, purposeful assessments<sup>3</sup>.

## Types of assessment method

There are many methods that can be used to carry out assessments including, but not limited to:

### Face to face

An in-person assessment is a face-to-face assessment with the person with care and support needs, usually in the person's home.

In-person, face-to-face conversations will provide the greatest opportunity for building relationships and verifying information to inform professional judgement around mental capacity, need and risk.

Face-to-face assessments are necessary and appropriate if there are complex needs or safeguarding concerns. As well as developing a fuller understanding of the person's needs, a home visit may be necessary to understand factors relating to suitable support planning. Maintaining an up to date understanding of the Care Act will help ensure face-to-face assessments are proportionate.

### Online self-assessment

An online self-assessment is a process where an individual completes an assessment about their care and support needs online via smartphone, tablet or laptop (or other digital tools) using an online tool or form, and in many cases will be the first point of contact with the local authority.

Both care and support needs assessment and financial assessment can be conducted online in some cases using a variety of digital solutions.

An online self-assessment can be offered as one of several routes into the assessment process. Most self-assessments will require some follow-up action.

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<sup>2</sup> This is the requirement of local authorities under s9 of the Care Act 2014.

Where an adult refuses assessment, the authority is not required to carry out an assessment. However, it must do so if the adult lacks capacity and the local authority thinks it would be in the adult's best interests to do an assessment, or the adult is experiencing, or is at risk of, abuse or neglect. Please see s11 for the full provisions concerning refusal of assessment

<sup>3</sup> [Assessment of needs under the Care Act 2014 | SCIE](#)

When a person approaches a local authority for support, an online self-assessment for local authorities that have a digital offer can be suitable as a first point of contact to allow full assessments to be prioritised according to need.

When considering tech or digital intervention, practitioners must be mindful of digital exclusion and ensure that adjustments are person-centred and appropriate to the situation and presenting need.

### **Supported online self-assessment<sup>4</sup>**

This is where the person is supported by a friend or relative, advocate or other person of their choice to complete an online self-assessment.

Individuals might need to be supported to complete an online self-assessment, for example, by a trusted assessor, an advocate, a family member or voluntary organisation. This could be appropriate where the individual either is not able to access online portals, or to corroborate information provided.

If there are no complexities or inconsistencies the local authority may decide that no further assessment or enquiry is needed.

An LA must find out if an individual who is to be assessed wants a supported self-assessment. If they do and they have the capacity to take part, the LA must facilitate this option.

### **Virtual assessment**

A virtual assessment is an assessment with the person with care and support needs that is completed by virtual means, which could be over the phone or by video call (using the tv, tablet, smartphone or laptop).

A virtual assessment may be proportionate if all of all the following conditions apply: The situation is fairly straightforward; there are no coercion, neglect, or safeguarding concerns; there is a stable internet connection and access to technology; the person has capacity to engage in the assessment, and their communication skills are good.

### **Combined assessments**

Local authorities can combine different assessments of individuals in a single conversation to avoid imposing repetition on people being asked to tell their story on several occasions. This can be an important feature of trauma informed practice.

The individuals whose assessments the LA proposes to combine must give their consent. For example, separate assessments might be preferred if they enable the individual to feel confident to speak freely without another person present, perhaps to avoid discussing traumatic/family events in the past in the presence of a spouse or carer.

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<sup>4</sup> Supported self-assessment is defined in reg 2(1) of the Care and Support (Assessment) Regulations 2014 as '....an assessment carried out jointly by the local authority and the individual to whom it relates'. For the purposes of this document 'Supported online self-assessment' is referring to additional support an individual may need in completing an online self-assessment



Promoting the choice to combine assessments is key to enabling best fit for that individual at that time.

### **Joint assessment with another agency or professional**

People may have needs which can be met by various agencies and service providers. In this event, a local authority may carry out a needs or carer's assessment jointly with another body carrying out any other assessment in relation to the person concerned, provided that person agrees. In doing so, the authority may integrate or align assessment processes to better fit around the needs of the individual.

An integrated approach may involve working together with relevant professionals on a single assessment. It may also include putting processes in place to ensure that the person is referred for other assessments such as an assessment for after-care needs under the Mental Health Act 1983.

### **Trusted/delegated assessment**

This is where a third party, for example another professional, care provider or voluntary organisation carries out the assessment of the person with care and support needs on behalf of the local authority. Section 79 of the Care Act 2014 refers to the LAs powers to delegate some of its functions.

The local authority may decide it is suitable for full assessments to be carried out by a third party with whom there is a clear and explicit agreement, any required accreditation is in place, and where the third-party has no financial interests. In these cases, the LA must be satisfied that those undertaking the assessments on their behalf have suitable skills and understanding.

With consent, it may also be appropriate to make use of a recent assessment that was carried out by a third party for another purpose, to form all or part of the relevant information required, providing it is sufficiently up to date.

Some local authorities delegate to provider NHS Trusts (such as mental health trusts) to carry out their responsibilities for care and support needs assessment.

It should be noted that delegation is not 'absolute': Section 79(6) (of the Care Act 2014) makes clear that anything done or omitted to be done by or in relation to a person authorised under this section in, or in connection with, the exercise or purported exercise of the function to which the authorisation relates is to be treated for all purposes as done or omitted to be done by or in relation to the local authority, (though as subsection (7) makes clear this does not apply for the purposes of any criminal proceedings brought in respect of anything done or omitted to be done by the authorised person).

This means that the delegation of any function does not absolve the local authority from ultimate responsibility for ensuring the function is carried out properly and in accordance with all relevant statutory obligations. The local authority retains ultimate responsibility for the standard of assessments undertaken.

## **Draft checklist for trusted/delegated assessments**

The following checklist may help the local authority govern the delegation of assessments to third party assessors:

- Develop a Memorandum of Understanding that sets out the purpose and scope on any delegated or 'proportionate' assessments, considering the training and competencies required of the delegate assessor
- Make and record individual decisions on matching method to assessment: remember, while an assessment is an intervention in its' own right, it is usually eligibility that is most important to accessing services
- Any 'Risk positive' approach needs setting out: e.g., what other source of information is being used to address-say-home circumstances? Have other professionals made recent in-person assessments that can be used?
- Have a clear prompt to the assessor and any reviewer on professional curiosity: what evidence is there of attempts to look past basic facts?
- Clarify the oversight arrangements for any delegated or proportionate assessments: some form of validation by a Social Worker or Occupational Therapist (OT) and audit arrangements etc.

## **Choosing methods of assessment**

Factors to consider in deciding the right method of assessment or intervention, at the right time include:

- What is right for the person considering levels of autonomy and control, communication needs and ability to use technology.
- Whether the person has an appropriate person to represent or support them, and that this person can remain suitably independent.
- The complexity, concern or urgency of the situation and the local authority intervention required.
- The level of engagement with the local authority by the person and/or their family or friend carers.

## **Mental Capacity and Deprivation of Liberty**

The same flexibility is not allowed for in the application of other legislation. For example, Mental Capacity assessments will always need to be completed in person, and the principles of the Mental Capacity Act 2005 must underpin assessments where there is a proper reason to doubt that the person has the capacity to make the decision in question. Most Deprivation of Liberty Safeguards assessments should be face-to-face in order to, for example, meet any communication needs of the person.

An important principle of the Mental Capacity Act 2005 is that it must be assumed that the person has capacity unless it is established that they lack capacity. Assuming capacity, however, should not be used as a reason for not assessing

capacity in relation to a decision. There should always be an assessment where there are doubts about a person's capacity to make a decision.

### **Case Studies:**

The following case studies give an example of where innovative proportionate methods are beneficial alongside an example where a full face-to-face visit is likely to be required.

#### **Case example of where it could be appropriate for innovative and virtual methods to be used:**

Mr Hassan is an 85-year-old man living at home with his wife, who is his main carer. They have a supportive family network and whilst they do not have smartphones or access to the internet, their daughter does. Mr Hassan has significant social care needs which are largely met by his wife and daughter.

Mr Hassan can make his own decisions and to communicate his needs verbally. He requires support to be able to make use of key areas of his home safely and to be able to access his garden, which is very important to him.

His daughter facilitates a phone assessment using a camera phone and photographs, enabling Mr Hassan to explain his situation and sufficient information to be gathered. Information and advice are provided. Mr Hassan's daughter also takes key measurements, including Mr Hassan's height and of specific areas of the home, which enables a social care worker to provide simple equipment and adaptations.

All Mr Hassan's needs are being met by his family and with the support of his family and no further intervention is required at this time.

#### **Case example of where a face-to-face visit is likely to be required:**

Mrs Gould lives alone. She has been struggling to manage to keep her home clean and to prepare meals. She has some support from a neighbour to walk her dog and with some practical tasks.

Mrs Gould is fiercely independent and has repeatedly declined to give information to social care workers about her situation and has refused assessment and support in the past. The neighbour is now concerned about Mrs Gould's memory - her physical health which seems to be getting worse - and how she is managing on her own. He has also noticed that items are going missing from Mrs Gould's home following visits from one of her friends, which is a cause for concern.

Due to Mrs Gould's previous refusal of assessment, increasing concern about her memory and physical health, and about the potential safeguarding concerns, face to face visits are required to try and begin to establish a rapport with Mrs Gould, understand her reluctance to engage with the local authority, establish the risks and potential risks and her ability to make informed decisions about her situation.

## References:

The Care Act 2014 [Care Act 2014 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2014/22/contents)

Social Care Institute for Excellence [Assessment of needs under the Care Act 2014](#)

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