Introduction

These criteria are intended to be a tool to establish the appropriate level of support in respect of access to services funded and care managed by the CTP (Priority 1 and 2) and those services provided by other means (Priority 3 and 4). The Priorities Framework ensures that there is a continuum of support in place for all service users and their carers. Staff will ensure that the Priorities Framework is used positively to meet assessed needs appropriately. There is a move away from the language of eligibility/qualifying for adult social care services. This is a narrow focus and fails to recognise the support that can be given to help with universal and prevention/well-being needs. All service users will be given an offer of support based on the assessed priority level and this will be subject to periodic review as appropriate. The approach is in line with national guidance and initiatives such as Think Local: Act Personal which emphasises the importance of a personalised and community based approach for everyone, with universal approaches designed for all and targeted support for particular groups.

- Working on an integrated basis with providers and communities.
- Developing and facilitating people to maximise their own capacity and resources.
- Facilitating full engagement of service users, carers and their families/representatives.
- Delivering whole family services to support families.
- Making information and advice universally available to all people to ensure they are supported to make the right decisions about their support.
- Supporting prevention and well-being.
- Providing targeted intervention such as re-ablement to prevent longer term dependence.
- Ensuring people have real choice and control over their support and use of resources, whilst ensuring appropriate risk management and safeguarding of individuals.

<table>
<thead>
<tr>
<th>Key to Framework</th>
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<tbody>
<tr>
<td><strong>Green:</strong> Level of need case managed and funded directly by the CTP.</td>
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<tr>
<td><strong>Blue:</strong> Level of need not case managed or funded directly by the CTP but may receive a contact assessment, support for universal and prevention/well-being needs and full signposting services. Some services may be supported financially by the CTP and other public bodies.</td>
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**PRIORITY 1: PEOPLE WITH COMPLEX NEEDS**

<table>
<thead>
<tr>
<th>Level of Need: Priority 1:</th>
<th>Needs to be met at this level</th>
<th>Evidence of this Need</th>
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<tbody>
<tr>
<td>People with Complex Needs are the most vulnerable in our community and are at imminent risk of harm, neglect or serious deterioration of their health or well being unless prompt help is available from some source.</td>
<td>Being at risk of serious abuse, harm, neglect or self-neglect without outside intervention; Experiencing unstable and unpredictable physical or mental health conditions; Challenging behaviours that cannot be adequately self-managed or managed by informal carers; Having no access to or control over vital aspects of their immediate environment to such a degree that their health, safety or dignity is severely compromised;</td>
<td>❖ Serious abuse, harm or neglect has already occurred. ❖ There are clear grounds to believe that it will occur. ❖ There has been a sudden deterioration in physical or mental health or clear evidence indicates that such deterioration is imminent; ❖ Severe mood disturbance or severe anxiety symptoms that have a major impact on health and well being. ❖ Behaviours that represent a risk to self or others; ❖ Behaviours that constitute a barrier to social inclusion. ❖ People are unable to access or use vital parts of their immediate living environment or to do so represents a risk of fall or accident; ❖ They are unable to meet their needs for warmth, nutrition or access to toilet and washing facilities and this threatens their health and dignity.</td>
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**Impaired Cognition:** which results in impaired understanding and decision making to a degree that represents a high risk to themselves or others;

**Environment:** the person has little or no control of vital aspects of their immediate environment;

**Mobility:** an inability to move around in or to control their immediate living environment resulting in risks to the person’s life, health or well-being.
**Having an inability to carry out essential personal care tasks.**

- The person is unable to carry out vital family or social roles. These are parenting, caring or employment, education and training.

- The person is totally incapable of managing their financial affairs.

- They are unable to summon help in urgent situations and cannot achieve an acceptable level of personal safety.

- Inability to communicate personal needs.

- People are unable to use electrical or gas equipment safely.

- The person is unable to administer vital medication or to carry out personal care tasks such as food preparation, personal hygiene, toileting;

- Any indications of poor diet/hydration;

- Poor hygiene;

- Mismanagement of medication.

- The person cannot provide vital care for a dependent child;

- The person cannot provide vital care for a partner or close family member who also has assessed complex needs;

- The person is unable, because of their complex needs, to access training, education or employment.

- The inability to manage their financial affairs represents a major risk to their independence;

- The continued supply of food, warmth, shelter is at risk;
### What People with Complex Needs can expect:

People with Complex Needs are the highest priority for publicly funded support and their needs will be met before those of any other group. This provision will be of the highest quality achievable, making the most cost effective use of resources. Support plans will be well co-ordinated and integrated closely with health care provision where necessary. People with Complex Needs will have their ongoing care managed by case management teams or mental health services.

In situations where the Criteria in this Framework are met, services will be offered to:

- Prevent the abuse, harm or neglect;
- Help manage the person’s unstable condition if self-management or support by informal carers is not effective or sustainable;
- Prevent the instability leading to admissions to hospital or institutional care and to maintain an acceptable quality of life at home wherever this is safe;
- Meet vital needs relating to warmth, nutrition, personal hygiene and vital medication, provided by the most efficient means available;
- Help with dressing and access to essential facilities around the home;
- Help with communicating vital and urgent needs will be provided by the most efficient means possible so that people are not at risk.

- Serious financial abuse has already occurred or there are clear grounds to believe that it will occur.
### PRIORITY 2: PEOPLE WITH INTERMEDIATE NEEDS

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<th>Level of Need: Priority 2</th>
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|                          | People who have had a recent physical or mental illness, an accident or some other adverse life event causing a loss of functioning and independence but with the motivation and capacity to seek to re-gain realistic independence goals. The areas of functioning affected are:  
   - Ability to protect themselves from abuse, harm or neglect;  
   - Ability to manage mood disturbance or anxiety;  
   - The emergence of challenging behaviour;  
   - Loss of some control of the immediate living environment so that health, safety or dignity are at risk;  
   - Reduced mobility;  
   - An inability to discharge key personal care tasks;  
   - An inability to discharge family and social roles. | ♦ Abuse, harm or neglect has already occurred or there are clear grounds to believe that it may occur and the person has a reduced capacity to protect themselves;  
♦ Mood disturbance or anxiety symptoms that have a significant impact on health and well being and are not currently being self managed;  
♦ Behaviours that represent a risk to self or others or constitute a barrier to social inclusion but are amenable to improvement;  
♦ People need to re-learn how to access or use vital parts of their immediate living environment without risking a fall or accident;  
♦ People need help to re-gain the ability to meet their needs for warmth, nutrition or the ability to access to toilet and washing facilities to prevent a risk to their health and dignity;  
♦ People need to re-learn the capacity to summon help in urgent situations in order to achieve an acceptable level of personal safety;  
♦ A need to re-learn the ability to communicate personal needs; |

People with Intermediate Needs will have suffered a recent, possibly sudden loss of independence and skills as a result of a physical or mental illness, a traumatic accident or the emergence of a disabling condition.

People with Intermediate Needs will be characterised by a capacity and motivation to re-gain or prevent deterioration in their independence through focused and time-limited support designed to restore previous levels of functioning; Without help, people with intermediate needs are at clear risk of deteriorating and developing Complex Needs.
What People with Intermediate Needs can expect:

People with Intermediate Needs are the second priority for publicly funded support. Their care programme will be managed by:

- Case Management;
- A3;
- Mental Health Services;
- or
- Staff from the Intermediate Tier.

People with intermediate needs can expect to agree a programme of training and rehabilitation, with personal care if needed, to seek to regain independence and skills lost as a result of their illness or accident or disabling condition. The programme may be delivered in a variety of settings; residential, day centre, in the community or in people’s own homes. The goals and time-scale will be agreed with the person and reviewed regularly. Goals can include participation in employment and training and family roles such as parenting and caring. The programme will be time limited and goal focused. At the end of the programme, people’s needs will be reviewed and an appropriate offer of ongoing support given, consistent with the level of reassessed need.
### PRIORITY 3: PEOPLE WITH PREVENTION AND WELL BEING NEEDS

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| People with Prevention and Well Being Needs could benefit from specific pieces of practical advice, information or support designed to help them with their daily lives but which do not require professional assessment or ongoing care management. | People with Prevention and Well-being needs will already be experiencing loss of independence and functioning in some aspects of their lives as a result of illness or disability. This could be loss in terms of:  
- Some aspects of personal care;  
- Inability to carry out some domestic tasks;  
- Mobility outside the home;  
- Accessing leisure of social pursuits.  
These may be starting to impair quality of life but do not put people at immediate risk of harm, neglect or abuse or of imminent deterioration in their health. | ✤ Difficulty adjusting to new health or disabling conditions or new social roles and circumstances;  
✦ Difficulty adjusting to bereavement or other loss, such as reducing independence;  
✦ Loss of a partner or relative and inability to carry out some of the tasks they undertook;  
✦ Intermittent episodes of non-acute health problems;  
✦ Difficulty in performing some household and personal care tasks;  
✦ Reducing social boundaries, contacts and community involvement. |

**What People with Prevention and Well Being Needs can expect:**

Following an initial screening process that identifies the level of their needs, People with Prevention and Well Being Needs will be actively signposted to specific services and information within the community based on the problems they are experiencing. These services can be accessed directly by people themselves or their carers. These services will not be funded on an individual basis by the CTP, although the organisations that provide them may be financially supported by public bodies. These services will often be of a practical nature. The progress of individuals will not be case managed, that is overseen and monitored buy a care manager. In the event that their circumstances change, people should contact the CTP in the light of the changes.

Types of services People with Prevention and Well Being Needs may access will be sources of practical support, advice and information that...
are tailored to their specific concerns. These can include:

- Benefits advice and concessions;
- Equipment and assistive technology;
- Employment and training advice;
- Accredited DIY and gardening schemes;
- Private domestic help services;
- Support groups and befriending schemes;
- Hobby and interest groups;
- Luncheon clubs and suppliers of delivered meals and groceries;
- Advice on health and well-being for specific conditions;
- Universal services adapted for the needs of specific vulnerable groups;
- Community safety schemes;
- Sheltered, supported and extra care housing.
### PRIORITY 4: PEOPLE WITH UNIVERSAL NEEDS

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| People with Universal Needs are at risk of losing some functioning in some aspects of their lives as a result of illness or developing disability. This has not yet significantly impaired their quality of life. | People with Universal Needs are at risk of losing independence and functioning in limited aspects of other lives as a result of illness or disability. This could be in terms of:  
- Emerging difficulty in some aspects of personal care;  
- Emerging difficulty in carrying out some domestic tasks;  
- Reducing mobility outside the home;  
- Narrowing leisure of social pursuits.  
These will not yet be significantly impairing quality of life and do not put people at immediate and critical risk of harm, neglect or abuse or of deterioration of their health. | ✤ Worry about new health or disabling conditions or new social roles and circumstances;  
✤ Occasional episodes of non acute health problems;  
✤ Worry about performing some household and personal care tasks;  
✤ Reducing social boundaries, contacts and community involvement.  
✤ None of the above put people at risk of harm, neglect or abuse or of deterioration of their health. |

**What People with Universal needs can expect:**

People with Universal Needs will undergo initial screening that will determine their level of need. If not assessed as Priority 1, 2 or 3 they will be actively signposted to universal services and information within the community. These services will not be funded on an individual basis by the CTP, although the organisations that provide them may be financially supported by public bodies. The progress of individuals will not be case managed and, in the event that their circumstance changing, people should contact the CTP in the light of the changes.

People with Universal Needs will be actively signposted to sources of practical support, advice and information. These can include:

- Transport concessions;  
- Appropriate leisure facilities;  
- Benefits advice and concessions;  
- Adult education opportunities;  
- Employment and training advice;
- Accredited DIY and gardening schemes;
- Private domestic help services;
- Support groups and befriending schemes;
- Hobby and interest groups;
- Luncheon clubs and sources of delivered meals and groceries;
- Advice on health and well-being for specific conditions;
- Universal services adapted for the needs of specific vulnerable groups;
- Community safety schemes;
- Sheltered, supported and extra care housing.

People will be expected to access these services directly and their take up and suitability will not be monitored by case management.