

Provisions of the Act

1.1. Wellbeing and prevention

- Councils will have a duty to consider the physical, mental and emotional wellbeing of the individual needing care.
- Furthermore, there is a duty on councils to provide preventative services to maintain people's health to delay a person's need for care.

1.2. Eligibility

- The Act introduces a nationally set minimum threshold for care making it clear when local authorities will have to provide support to people.

1.3. Information and advice

- Councils must establish and maintain a service for providing people in its area information and advice relating to care and support for adults and carers.
- Councils must deliver the information and advice duties in a strategic manner and have regard for the wellbeing principle and prevention in the provision of information
- Councils must help people to make good financial decisions and provide general financial advice. Where appropriate the Council must signpost people to independent financial advice.

1.4. Carers

- All carers will be entitled to an assessment of need. If a carer is eligible for support for particular needs, they will have a legal right to receive support for those needs, just like the people they care for.

1.5. Independent advocacy

- The Care Act places a duty on the Council to appoint an independent advocate, or identify a suitable 'appropriate person', to support a person throughout their journey through the social care system.

1.6. Personalisation and market shaping

- The Act outlines a person-centred planning process with a duty to involve both the person and their friends and family.
- Personal budgets and direct payments are now enshrined in law giving people choice and control about how their care and support is provided.
- Personalisation is strengthened by giving Councils a role to shape the care and support market in order to guarantee quality and diversity of local services.

1.7. Funding reforms

- A lifetime cap on care costs is introduced following the recommendations of the Dilnot Commission.
- Universal deferred payments will be offered, where certain criteria is met, to prevent people having to sell their homes before their death to pay for their care.
- The upper and lower financial thresholds have changed meaning that more people (i.e those with moderate wealth) will receive a contribution towards their care costs from the state.

1.8. Integration

- There is a general duty on the Council to promote integration with health services and health-related services.
- This is complemented by a more specific provision which links to the Better Care Fund. The Act facilitates the pooling of NHS budgets and allows NHS England to set CCGs integration objectives where it judges levels of integration to be inadequate.

1.9. Transitions

- A transition assessment must be carried out for young people, young carers, and carers of children.
- These new duties directly relate to the provisions in the Children and Families Act which adopts a birth to 25 years approach to planning. However the harmonisation between the two acts is patchy.

1.10. Safeguarding

- Under the Care Act Safeguarding Adults Boards are now statutory. The core membership of the SAB is prescribed in the legislation.
- Partner agencies or persons have a duty to co-operate with the Council on safeguarding matters and to supply information upon request.
- Serious Case Reviews have been given a statutory status in circumstances where there is serious neglect/abuse or death.

1.11. Market oversight and provider failure

- The Care Quality Commission will have the authority to intervene in the commercial affairs of large-scale providers and conduct business sustainability reviews where appropriate.
- Where there is a threat of business failure care and support providers must share commercial information with the Council and regulators so that plans can be made for continuing care.
- In the event of provider failure Councils will have a temporary duty to meet the needs of individuals receiving care from that provider, this duty applies regardless of the person's needs or status.

1.12. Other provisions in the Act relate to regulation and improving standards of care in response to the Francis Report. Further clauses establish Health Education England and the Health Research Authority. These new independent bodies will ensure the NHS has robust and future-proof workforce development plans, and ensure that research is regulated to make it safe and ethical.

1.13. For further information about the core duties within the act, the legislation, as enacted, can be found at this link:

<http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>