**Personal details**

**Name:**

\*\*\*\*\*\*\*\* \*\*\*\*\*\*\*\*

**DOB:** \*\*\*\*\*\*\*\*\*\*\*

**Address:** \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

**Your reference:**

\*\*\*\*\*\*\*\*\*\*\*\*\*

**This is a copy of your self-directed-support assessment. It includes the questionnaire answers you gave us as well as other information gathered as part of the assessment process**

**Background and current situation, including health and mental well being**

**Bristol City Council are required to consider someone's capacity as part of the assessment process**

**Capacity to agree to Assessment:** Yes

**Consent to the Assessment:** Yes

**Capacity to agree to share information:**

Yes



**Consent to share information:** Yes

**Background and current situation, including health and mental well being**

Supporting planning service contacted \*\*\*\*\*\*\*\* \*\*\*\*\*\*\*\* on the 08/03/2016 to advise that Hengrove lodge would like to assess his father for respite care due 06/04/2016, \*\*\*\*\*\*\*\* however advise broker that he wanted a permanent placement.

Following this information an urgent review of Mr \*\*\*\*\*\*\*\*'s care needs was completed. Mr \*\*\*\*\*\*\*\* is a 92 year old man who lives with his son in a privately owned house in the

Shirehampton area of Bristol. Mr \*\*\*\*\*\*\*\* explained he lives downstairs within his son's home and sleeps in his recliner chair in the lounge.

Mr \*\*\*\*\*\*\*\* receives assistance from carers x 4 daily, with further substantial support from his son

\*\*\*\*\*\*\*\*.

Present at the review Mr \*\*\*\*\*\*\*\*\*\*\* \*\*\*\*\*\*\*\*, ( service user ), \*\*\*\*\*\*\*\* \*\*\*\*\*\*\*\*, ( son/carer ), and myself \*\*\*\*\*\*\*\*\*\*\* ( Social Care Practitioner ).

Mr \*\*\*\*\*\*\*\* was supported by his son to answer the questionnaire due to some memory impairment and hearing loss.

This Assessment/Review was completed under the NHS and Community Care Act 1990. It assesses in respect of Bristol City Councils eligibility criteria using the Self Directed Support Questionnaire.

**HEALTH AND MENTAL WELL BEING :** Mr \*\*\*\*\*\*\*\* has previous records of cellulitis in lower legs and does present as having some confusion, but does not have a formal diagnosis of dementia.

Mr \*\*\*\*\*\*\*\*'s heath needs is managed by the taking of medication which is dispensed in a blister pack and prompted by carers and his son.

District nurse visit every 6 weeks to carry out catheter care.

Mr \*\*\*\*\*\*\*\* mobility is poor and is assisted by a walking frame, he is prone to falls and fall quite frequently as advised by \*\*\*\*\*\*\*\*, who reported that his father fell last night 09/03/2016, no injury sustained.

Mr \*\*\*\*\*\*\*\* is aware that \*\*\*\*\*\*\*\* is no longer able to meet his needs at home and is happy for a ECH

placement to be source.

\*\*\*\*\*\*\*\* explained that his father can be difficult at times and sometimes non compliant.

**1. Meeting personal care needs**

**Meeting personal care needs comments**

**Review 10/09/2014 no change:** Mr \*\*\*\*\*\*\*\* is unable to carry out his personal care throughout the day due to his physical health and mobility. \*\*\*\*\*\*\*\* explained that he usually changes the night catheter bag to the day one prior to carers calling, otherwise carers support him with all personal care. Mr \*\*\*\*\*\*\*\* also has a commode.

Mr \*\*\*\*\*\*\*\* explained carers visit every lunchtime and tea time and empty his catheter bag and during the evening visit, ensure the night bag is attached.

**2. Eating and drinking**

**Comments**

**Review 10/03/2016 no change:** \*\*\*\*\*\*\*\* advised his father is able to eat and drink, but has a poor appetite.

\*\*\*\*\*\*\*\* explained that all meals, snacks and drinks are either provided by himself or carers throughout the day as Mr \*\*\*\*\*\*\*\* would not be able to do this independently due to physical health and mobility issues.

**3. Running and maintaining my home**

**Review 10/03/2016 no change:** Mr \*\*\*\*\*\*\*\* advised he is unable to undertake any running or maintaining of the home due to his physical health needs and poor mobility.

\*\*\*\*\*\*\*\* advised that he undertakes shopping, cleaning, cooking and laundry for his father and carers support with preparing snacks and drinks as required, making bed and putting used laundry into machine.

**4. Making decisions and organising my life**

**Review 10/03/2016 no change:** Mr \*\*\*\*\*\*\*\* advised he can make decisions for himself and demonstrated this by accepting that \*\*\*\*\*\*\*\* is no longer able to support him and is happy for an ECH application to be made.

\*\*\*\*\*\*\*\* advised that he supports his father with any decision making or enabling him to carry out his decisions as required.

**5. Keeping myself safe**

**Review 10/03/2016 no change:** \*\*\*\*\*\*\*\* explained that there are smoke alarms fitted in the property. Mr \*\*\*\*\*\*\*\* advised he is at risk of falls and uses a walking frame to mobilize.

Mr \*\*\*\*\*\*\*\* advised he is at risk of falls and \*\*\*\*\*\*\*\* confirmed this and said his father does regularly call out for him during the early hours in the morning to get him to empty or change the catheter bag.

Mr \*\*\*\*\*\*\*\* advised he has a pendant alarm and falls detector.

**6. Being part of my community**

**Review 10/03/2016 no change:** \*\*\*\*\*\*\*\* advised that his father lives in the downstairs of the property and due to poor mobility does not access even the downstairs areas with ease.

There is a downstairs toilet, but this is via a step which he cannot manage, he has a catheter and uses a commode which carers empty and clean for him.

Mr \*\*\*\*\*\*\*\* advised he does not have any visitors except occasional visits from family members.

**7. Having work, learning and other activity opportunities**

**Review 10/03/2016 no change:** Mr \*\*\*\*\*\*\*\* is retired and not involved in work or learning activities.

**8. My role as a parent or carer**

**Review 10/03/2016 no change:** Mr \*\*\*\*\*\*\*\* does not have responsibilities as a parent or carer and does not have any pets.

**9. How my actions may affect myself and others**

\*\*\*\*\*\*\*\* advised that his father can be quite demanding on him and carers as he likes things to be done his way, however, some of this may be due to his hearing impairment whereby he is not fully understanding conversation.

**10. Informal support**

\*\*\*\*\*\*\*\* explained that he works full time shift work, but when he is home he does become his main carer, although carers are visiting to ensure Mr \*\*\*\*\*\*\*\*'s full personal care needs are met.

**11. Family carer and informal support**

**View of informal carer(s) and/or significant others**

\*\*\*\*\*\*\*\* explained that he is no longer able to care for his father the way he did before and that he has spoken with his father and they have both agreed that a ECH placement would best meet his needs.

**Have the carer's needs for support been addressed?:**

**In responding to the carer's needs what best describes the action being taken?:**

Jointly as part of this assessment

Respite Care Services

**12.1 Additional information - Changeable needs**

Not applicable - for use for fluctuating needs only

**12.2 Additional information - Other information**

\*\*\*\*\*\*\*\* further advise that he will continue caring for his father until an ECH placement is found.

**12.3 Additional Information - Any disagreement?**

No

**Risk to Independence**

**HEALTH & SAFETY - Level of Risk =** SUBSTANTIAL

life is, or will be, threatened

serious abuse or neglect has or will occur

significant health problems have or will develop

abuse or neglect has occurred or will occur

**AUTONOMY - Level of Risk =** SUBSTANTIAL

there is, or will be, little or no choice over vital aspects of the immediate environment

vital involvement in work, education or learning cannot or will not be

sustained

Y there is, or will be, only partial choice and control over

the immediate environment

involvement in many aspects of work, education or learning cannot or will not be sustained

involvement in several aspects of work, education or learning cannot or will not be sustained

involvement in one or two aspects of work, education or learning cannot or will not be sustained

**MANAGEMENT OF DAILY ROUTINES - Level of Risk =** SUBSTANTIAL

there is, or will be, an inability to carry out vital personal care, or domestic routines

Y there is, or will be, an inability to carry out the majority of personal care or domestic

routines

there is, or will be, an inability to carry out several personal care or domestic

routines

there is, or will be, an inability to carry out one or two personal

care or domestic routines

**INVOLVEMENT IN FAMILY AND WIDER COMMUNITY LIFE - Level of risk =**

vital social support systems and

relationships cannot, or will

not, be sustained

the majority of social support systems and relationships cannot, or will not, be sustained

several social support systems and relationships cannot, or will

not, be sustained

one or two social support systems and relationships cannot, or will

not, be sustained

vital family and other social roles and responsibilities cannot, or will not, be undertaken

the majority of family and other social roles and responsibilities cannot, or will not, be undertaken

several family and other social roles and responsibilities cannot, or will not, be undertaken

one or two family and other social roles and responsibilities cannot, or will not, be undertaken

**13a. Eligible needs**

**Actions summary:**

Mr \*\*\*\*\*\*\*\* has been assessed under Bristol City Council's eligibility criteria and meets this in relation to:

**HEALTH AND SAFETY Substantial:** Mr \*\*\*\*\*\*\*\* has significant health difficulties that impact on his ability to carry out tasks during the day.

**AUTONOMY Substantial:** Mr \*\*\*\*\*\*\*\* has limited choice and control over his immediate environment due to health difficulties, reduced levels of mobility, and risk of falls.

**MANAGEMENT OF DAILY ROUTINES Substantial:** Mr \*\*\*\*\*\*\*\* needs assistance throughout the day to manage his personal care, prompting medication, empty commode, assist with domestic routines.

**OUTCOME:** Following the review of Mr \*\*\*\*\*\*\*\*'s care needs, new needs identified for ECH

placement following carers breakdown.

Social Care Practitioner to make ECH referral.

**ACTION:** An indicative budget will be reestablished from this assessment/review and a personal budget agreed that will best meet Mr \*\*\*\*\*\*\*\*'s needs.

**13b. Ineligible needs**

**Actions summary:**

Not recorded

**Is the person eligible for support?:** Yes

**14. Signature recording**

**Paper SAQ signed by:**

\*\*\*\*\*\*\*\* \*\*\*\*\*\*\*\*

**Date signed:**

10/03/2016

**How questionnaire was completed:**

By Service User with support from a Health and Social Care worker

**Assessor signature:**

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

**Date:**

10/03/2016

**Manager signature:**

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

**Date:**

11/03/2016

**Service User signature: Date:**