



Economics of
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Research Unit

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Lay Summary

SURVEY OF FAIR ACCESS TO CARE SERVICES (FACS) ASSESSMENT CRITERIA AMONG LOCAL AUTHORITIES IN ENGLAND

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The Fair Access to Care Services (FACS) framework

The Fair Access to Care Services (FACS) framework is an attempt by the Department of Health to make the method of determining access to care services more consistent across the country, by setting out guidelines that define four levels of need. Care managers use these guidelines to assess whether people's needs and risks to independence are critical, substantial, moderate or low. Local councils use these levels to help them decide whether someone is eligible for services, but each council is free to decide where to draw the line between being eligible or not eligible for help. A few councils will only provide services to people with critical needs, while others will include people with substantial, moderate or even low needs too.

Previous research had shown a tendency for councils to tighten their eligibility criteria over time, making it more difficult to access services. It also showed there were inconsistencies as to who was assessed as ineligible, both within and between councils.

According to their websites, four out of five of all councils have now set their eligibility threshold at 'substantial' or above. This indicates that the tightening of eligibility criteria continues.

Aims of the research

This research project aimed to investigate the operation of the current FACS system, in particular:

- To understand how the FACS guidelines are actually used by councils in determining eligibility for services
- To see how resources are distributed across the different needs groups
- To see how care managers allocate different people to the different needs groups defined by FACS, and to see whether they agree in making these ratings, and in deciding whether a person is eligible for services

How the research was done

There were two parts to the research:

1. A survey of councils (79 out of 149 councils responded)
2. A sample of care managers nominated by each council were given 24 brief descriptions of cases and asked to allocate each one to a FACS band, and decided how likely it was that the person described would be eligible for services from their council (640 care managers responded in total)

Results (based on the 79 councils in the survey)

How are FACS guidelines used:

In order to decide who is eligible for services, one in five councils modify the FACS bands by creating additional categories – usually by dividing the ‘substantial’ or ‘moderate’ FACS bands into upper and lower levels.

Most councils (two out of three) set their formal eligibility policies to cover those with critical or substantial needs only.

Although there was evidence that eligibility criteria were tightening, some authorities reported that policy changes were not always applied to people already receiving services.

This means that the full impact of changes would be less evident in the short term.

Councils with less restrictive eligibility thresholds had on average a higher level of deprivation, but did not differ significantly from other councils in relation to population size, region or type of authority.

Approximately one in three (35%) of all service users were assessed as having ‘critical’ needs.

A greater proportion of service users with a learning disability were assessed as having critical needs than other groups (42% were so assessed).

The assessment process

The vast majority of councils used a standard assessment process, and two out of three used the same assessment form for all service user groups.

How are resources distributed?

The FACS banding does not usually determine the amount of resources to be spent on someone’s care. Councils generally use a separate resource allocation system to work this out.

In general, proportionately more money was spent on people with critical needs than others (critical users accounted for 35% of all users but 48% of all expenditure).

For those with critical needs, the median reported expenditure per service user was lowest for older people (£15,483) and highest for people with learning disabilities (£47,860).

Other critical needs groups: Mental health (£19,829); Disabled people of working age (£20,163). Table 8 in the report gives full figures for all FACS bands.

For those with substantial needs, expenditure was again higher for people with learning disabilities (£34,640), but broadly similar for other service user groups (between £9,000 and £10,000).

Care managers rating of case descriptions

Results need careful interpretation because case descriptions cannot realistically reflect individual situations in all their real life complexity. For some of the case descriptions, case managers’ FACS ratings were quite variable, but we cannot be sure that this means they would not judge real cases consistently. However, care managers believed that the process of deciding on FACS bands could often in practice be dependent on the individual worker’s perspective.

For most of the described cases there was a degree of agreement as to the applicable FACS band, or a split between two adjacent FACS bands.

However there were some systematic differences between councils: in councils with tighter eligibility criteria there was a tendency for care managers to allocate the described cases to a higher FACS band.

This would mean that front-line workers could to some extent soften the impact of tightened eligibility criteria by ‘upgrading’ people into a higher FACS category.

Implications for policy

Areas that require investigation

- Differences in the allocation of resources within FACS bands across different user groups: do these reflect ageism, a genuine difference in what is needed to achieve outcomes, or a failure of the FACS banding to reflect resources needed for support?
- What would be needed for FACS to fulfil all the roles that policy makers might intend? For example: providing public information about the needs a council would meet; being a local eligibility assessment tool; being a tool for comparing access to services across different councils; being used to set national minimum eligibility thresholds.
- Are the FACS categories too broad to reflect the actual policies implemented at local level?

Other issues

Policy changes aimed at tightening eligibility criteria might be undermined by front line workers who believed that important needs would not be met.

Full report available at

<http://www.pssru.ac.uk/publication-details.php?id=4196>

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