BRIEF DESCRIPTION OF POLICY:
The Care Act 2014 (s58-66), and the Children and Families Act 2014 create a new comprehensive legislative framework for transition to adulthood. This policy sets out Luton Council’s approach to an effective person centred transition process.

The policies and procedure database holds the most recent and approved version of this policy or guidance. Staff must ensure they are using the most recent guidance.

RELATED REFERENCE DOCUMENTATION:
Care Act 2014 sections 58-66
Children Act 1989 (as amended), sections 17, 17ZH (transition for children to adult care and support) etc.
Children and Families Act 2014, sections 37 (Education, Health and care plan); s96 (Young Carers); s 98 (Arrangement for living with former foster parents after
reaching adulthood – (“Staying put”)

**ASC Policies**
Assessment & Eligibility Framework  
Support Planning Policy  
Direct Payments Policy  
Personal Budgets Policy  
Ordinary Residence Policy

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<tbody>
<tr>
<td>Prepared By</td>
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**Change Record**

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<th>Author</th>
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Summary of changes made to last approved version:


**Equality, Diversity and**

The **Equality Act 2010** seeks equal opportunities in the workplace and in wider society; and prohibits discrimination on the grounds of any of the following protected characteristics in relation to goods, services and employee protection:

- Age
- Disability
- Gender Reassignment
- Race
- Pregnancy/maternity
- Marriage/civil partnership
- Religion and Belief
- Sexual orientation
- Gender

The Equality Act aims, and in particular its General Duties, applies across the Council and to any organisation delivering services on a contractual, commissioned or voluntary basis on behalf of the Council. Although our legal duties relate to equality, our approach in Luton extends to the promotion of community cohesion and social inclusion. Our commitment to social justice goes beyond anti-discrimination to include fairness of treatment, dignity and respect.

**Feedback:**
Our customers expect first class service and we aim to provide it. We therefore welcome feedback about our policies and procedures. If you have any comments about this document please e-mail: RPRComplaints@luton.gov.uk for author or other as agreed.
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Appendix 1 Wellbeing Principle
1. Introduction & Context

1.1 Transition to adult care and support comes at a time when a lot of change can take place in a young person’s life. It can also mean changes to the care and support they receive from education, health and care services, or involvement with new agencies such as those who provide support for housing, employment or further education and training. Effective person-centred transition planning is therefore essential.

1.2 The Care Act 2014 (s58-66), and the Children and Families Act 2014 create a new comprehensive legislative framework for transition to adulthood which provides:

- Focus on personalised, outcome-based approaches
- New focus on carers across both Acts - families transition rather than just the young person

Duties in both Acts are on the Council to have:

- A variety of operating models
- Joined up information and advice service

1.3 In addition, the special educational needs (SEN) reform, introduces a system of support extending from birth to twenty-five years of age.

1.4 The wellbeing of each young person or carer must be taken into account so that assessment and planning is based around the individual needs, wishes, and outcomes which matter to that person. This means that professionals from different agencies, families, friends and the wider community will need to work together in a coordinated manner around each young person or carer.

1.5 The assessment should aid planning that helps to prevent, reduce or delay the development of needs for care or support and identify solutions that do not necessarily involve provision. The information gathered through transition assessment will contribute to the Council’s resource and commissioning plans.

Guiding principles

1.6 The Council’s guiding principles for effective transitions to adulthood are:

- Early planning
- Holistic assessment, planning and review
- Active involvement of young people and their families
- Raising aspirations and focusing on key life chances
- Provision of information and advocacy
- Flexibility in transfer arrangements i.e. arrangements may need to continue over a period of years
- Integrated streamlined assessment and planning processes across all agencies

### 1.7 Definitions

<table>
<thead>
<tr>
<th>Person Described</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Young Person</td>
<td>Person under 18 with care and support needs who are approaching transition, rather than the legal term “child”</td>
</tr>
<tr>
<td>Adult Carer</td>
<td>An Adult carer of a young person preparing for adulthood, this is the equivalent to the term ‘child’s carer in the Act</td>
</tr>
<tr>
<td>Young Carer</td>
<td>A young carer under 18 themselves preparing for adulthood</td>
</tr>
<tr>
<td>Young person or carer</td>
<td>Used as a general term when something applies to all three groups</td>
</tr>
<tr>
<td>Transition assessment</td>
<td>Each group has their own specific transition assessment respectively; a child’s needs assessment, a young carer’s assessment, and a child’s carer’s assessment. The term used in this chapter for all three is ‘transition assessment’.</td>
</tr>
<tr>
<td>Likely need</td>
<td>The duty to conduct a transition assessment applies when someone is likely to have needs for care and support (or support as a carer) under the Care Act when they or the person they care for transitions to the adult system.</td>
</tr>
<tr>
<td>Significant benefit</td>
<td>A transition assessment must be conducted for all those who have likely needs (see above); however the timing of this assessment will depend on when it is of significant benefit to the young person or carer. This will generally be at the point when their needs for care and support as an adult can be predicted reasonably confidently, but will also depend on a range of other factors discussed in the section below “When a transition assessment must be carried out”.</td>
</tr>
</tbody>
</table>

### 1.8

The term Transition to adulthood is not defined in the Care Act; however Skills for care and the College of Social Workers have jointly defined it as:

- Moving on from being a child to becoming an adult
• The transfer to an adult environment where they [young people] may need to consult several different health teams, therapy teams, and adult social care services
• The planned, purposeful movement of adolescents and young adults from child-centred to adult-orientated health care systems as distinct from a single chronological event
• The point at which young people move from children’s to adult services

2. Transition Assessments

2.1 The Care Act introduces new entitlements to a transition assessment. The Council must carry out an assessment for anyone in the three groups below where it is of significant benefit to the young person or carer and they are likely to have care and support needs after turning 18.

2.2 The three groups of people who have a right to a transitional assessment are:

- Young people, under 18, with care and support needs who are approaching transition to adulthood
- Young carers, under 18, who are themselves preparing for adulthood
- Adult carers of a young person who is preparing for adulthood

Type of assessment and Involvement of Children’s Services

2.3 If the assessment is done before the young person turns 18, the assessment will be a child’s needs assessment. When the young person turns 18, Luton Borough Council must decide whether to treat the child’s needs assessment as a needs assessment under the Care Act 2014.

2.4 In deciding whether a new assessment or carer’s assessment is needed, the Council must consider when the child’s needs assessment was carried out, and whether there appears to be any change of circumstances affecting that assessment.

2.5 In order to ensure that services are in place by the young person’s 18th birthday. The transitions virtual team (in line with agreed protocols) will determine which service or professional leads on the assessment.

2.6 If the child’s needs assessment is not treated as a needs assessment (or carer’s assessment), an assessment must be carried out.

2.7 Children’s Services must continue to meet any needs by virtue of their duties under section 17 Children Act 1989, until a young person’s needs
assessment is completed in compliance with section 9 and 10 of the Care Act.] (See 6 below).

**Extension of Children’s Services responsibilities**

2.8 The Children and Families Act 2014 extends the time young people can stay in foster care to the age of 21 years. Arrangements for monitoring staying put arrangements remain with Children’s Services who should notify Adult Social Care if the young person is likely to require adult social care and support (or carer’s support). See 5 below – Co-operation between professionals and 6 below – Continuity of Care etc.

2.9 The Children and Families Act also requires that Education, Health and Care plans (EHC) are carried out for children and young people in need and in care which must include social care provision which they will need; and also the care provision resulting from any learning difficulties and disabilities and in relation to any special educational needs. (See 2.12 below)

**Timing of an Assessment**

2.10 A transition assessment should take place a time that is right for the young person or carer involved and when the Council can be reasonably confident about what the young person or carers’ needs will look like when they turn 18.

2.11 When deciding the right time to assess the following should be used as a guide:

- The stage they have reached at school and any upcoming exams;
- Whether the young person or carer wishes to enter further/higher education or training;
- Whether the young person or carer wishes to get a job when they become a young adult;
- Whether the young person is planning to move out of their parental home into their own accommodation;
- Whether the young person will have care leaver status when they become 18;
- Whether the carer of a young person wishes to remain in or return to employment when the young person leaves full time education;
- The time it may take to carry out an assessment;
- The time it may take to plan and put in place the adult care and support;
- Any relevant family circumstances;
- Any planned medical treatment.
2.12 For young people with Special Educational Needs who have an Education, Health and Care (EHC) plan under the Children and Families Act preparing for adulthood planning begins from age 14, year 9. The transition assessment should build on the EHC plan and be aligned with the annual statutory review of the EHC plan. The Council may continue with the EHC plan until the end of the academic year during which the young person turns 25.

2.13 For care leavers, local authorities should consider using the statutory Pathway Planning process as the opportunity to carry out a transition assessment where appropriate. For young people who do not have an EHC plan, but who already have other plans under children’s legislation, the transition assessment should build on existing information.

**Right to Request an Assessment**

2.14 A young person, a carer, or someone acting on their behalf has the right to request a transitional assessment. The Council must undertake and assessment if it decides that the likely need and significant benefit conditions apply. If the Council decides to refuse an assessment the reason for refusal must be provided in writing and information and advice on what can be done to prevent or delay the development of needs must be provided.

2.15 Where the Council judges that the young person or carer is likely to have needs for care and support after turning 18, but that it is not yet of significant benefit to carry out an assessment, the Council may indicate in the refusal letter when it believes an assessment will be of significant benefit. The onus is on the Council to contact the young person or carer to agree the timing of an assessment.

2.16 If someone who is refused or refuses an assessment but later makes a request for an assessment, the Council must consider whether the likely need or significant benefit conditions apply and if they do then carry out an assessment.

**Requirements of an Assessment**

2.17 The transition assessment should support the young person and their family to plan for the future by providing them with information about what they can expect. The same requirements apply as with any other assessment set out in the Care Act. The assessment process itself must:

- Be person-centred throughout
- ensure that the wellbeing of each young person or carer is taken into account
- Include any other person who the young person or carer wants to involve
- Always be **appropriate and proportionate** to the complexity of the person’s needs

2.18 The process **must establish**:

- Current needs and how these impact on wellbeing
- Whether the young person or carer is likely to have eligible needs when they become 18
- The outcomes the young person or carer wishes to achieve

2.19 Transition assessments for young carer or adult carers must also specifically consider whether a carer:

- Is able to care now and after the child in question turns 18
- Is willing to care now and will continue after 18;
- Works or wishes to do so;
- Is or wishes to participate in education, training or recreation

2.20 The right to a supported self assessment applies, however the Council must ensure that a self assessment would be appropriate.

2.21 Transition assessments should consider the immediate short-term outcomes that a child or carer wants to achieve as well as the medium and longer-term aspirations for their life. Progress towards achieving outcomes should be monitored.

3. **Eligibility**

3.1 After completing the assessment of needs the Council must determine whether any of those needs are eligible. Luton Council complies with the national eligibility criteria, which sets a minimum threshold for adult care and support needs and transparency on what level of need is eligible. The threshold is based on identifying how a person’s needs affect their ability to achieve eligible outcomes, and how this impacts on their wellbeing.

3.2 This is a **three step** process. The Council must consider whether:

1. The adult’s needs arise from or are related to a physical or mental impairment or illness.
2. As a result of the adult’s needs the adult is unable to achieve **two or more** of the specified outcomes
3. As a consequence of being unable to achieve these outcomes there is, or there is likely to be, a significant impact on the adult’s wellbeing.

3.3 The determination of eligibility must be based solely on the adults needs. All of the outcomes set out in the criteria relating to need or wellbeing are of equal importance. Any care provided by a carer or family members should not be taken into account. Support available from carers is considered at the support planning stage.

3.4 An adult’s needs are **only eligible** when they meet **all three** of these conditions.

3.5 Those that are not eligible must be provided with written information and advice on how to reduce, prevent or delay needs. Please see steps following assessment and eligibility determination

**Interpreting the adults eligibility criteria**

3.6 The table below sets out the three steps, the criteria and interpretation as set out in the Care Act Guidance.

<table>
<thead>
<tr>
<th>Step</th>
<th>Criteria</th>
<th>Interpretation from national guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Needs</strong></td>
<td>The adult’s needs arise from or are related to a physical or mental impairment or illness.</td>
<td>Includes physical, mental, sensory, learning or cognitive disabilities or illnesses; substance misuse or brain injury. Judgement is based on the assessment of the adult. A formal diagnosis of the condition is not required. If the answer is no then the Adult is not eligible</td>
</tr>
<tr>
<td><strong>2. Outcome</strong></td>
<td>As a result of the needs, the adult is unable to achieve two or more of the following: a. Managing and maintaining</td>
<td>The outcomes are not to be confused with the desired outcomes that the person identifies that they want to achieve at the beginning of the</td>
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<tr>
<td></td>
<td>nutrition;</td>
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<td></td>
<td>b. Maintaining personal hygiene;</td>
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<td></td>
<td>c. Managing toilet needs;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d. Being appropriately clothed;</td>
<td></td>
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<tr>
<td></td>
<td>e. Maintaining a habitable home environment;</td>
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<td></td>
<td>f. Being able to make use of the home safely;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>g. Developing and maintaining family or other personal relationships;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>h. Engaging in work, training, education or volunteering;</td>
<td></td>
</tr>
<tr>
<td></td>
<td>i. Making use of necessary facilities or services in the local community including public transport and recreational facilities or services;</td>
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<tr>
<td></td>
<td>j. Carrying out any caring responsibilities the adult has for a child.</td>
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</table>

The adult is “unable to achieve” an outcome if:
- they are unable to do so without assistance includes needing to be prompted;
- doing so causes significant pain, distress or anxiety;
- doing so is likely to endanger their health or safety or that of others. Eg putting themselves at risk making a hot cup of tea.
- doing so takes significantly longer than would normally be expected.

If the adult is unable to meet fewer than two needs then they are not Eligible.

### 3. Wellbeing

As a consequence of being unable to achieve two or more outcomes there is or is likely to be a significant impact on the adult’s wellbeing, including the following:

- a. Personal dignity (including treatment of the individual with respect);
- b. Physical and mental health and emotional wellbeing;
- c. Protection from abuse and neglect;
- d. Control by the individual over day-to-day life (including over care and support provided and the way it is provided);
- e. Participation in work,

The Council must consider whether the adult’s needs impact on the nine areas of wellbeing and make a judgment whether:

- The adult’s needs impact on an area of wellbeing in a significant way.
- The cumulative effect of the impact on several areas of wellbeing means that they have a significant effect on the adult’s overall wellbeing.

The Council should consider the impact of the person’s needs in the context of what is important to him or her. What
f. Social and economic wellbeing;
g. Domestic, family and personal relationships;
h. Suitability of living accommodation;
i. The individual’s contribution to society.

is important to one person may not be the same for another.

Please see Luton Council’s **Assessment & Eligibility Framework**

4. **Consent, Capacity & Support**

4.1 The young person or carer must agree to the assessment. Where the young person or carer lacks capacity or is not competent to agree the Council must be satisfied that an assessment is in their best interest.

4.2 Everyone has a right to refuse a transition assessment unless the Council suspect a young person is experiencing or is at risk of abuse or neglect.

4.3 The Council has a duty to provide independent advocacy where experiencing substantial difficulty in understanding the necessary information or in communicating their views, wishes and feeling and there is no other appropriate person to act on their behalf.

4.4 The right of a young person to make decisions is subject to the Mental Capacity Act 2005. For a young person under 16, the Council will need to establish a young person’s competence using the ‘Gillick competence’ test. Where the young person is not competent, a person with parental responsibility will need to be involved in their transition assessment, or an independent advocate provided if there is no one appropriate to act on their behalf (either with or without parental responsibility).

5. **Co-operation between professionals and organisations**

5.1 People with complex needs for care and support may have several professionals involved in their lives and numerous assessments from
multiple organisations. For a successful transition to adult care and support, the young person, their family and professionals need to work together.

5.2 The Care Act places a duty on the Council to cooperate internally and externally with for example GP practices, housing providers and educational institutions to ensure a smooth transition. This includes an explicit requirement that children and adult services must cooperate for the purposes of transition to adult care and support. All relevant partners have a reciprocal duty to cooperate.

5.3 A transition assessment may be combined with any other assessment the Council is carrying out, or may carry out jointly with, or on behalf of another organisation.

5.4 The team manager for transitions will take the lead role in coordinating the assessment process. This will be determined in line with the Transitions to Adult Services Protocol.

6. Continuity of Care after the age of 18

6.1 Looked after children can remain the responsibility of Children’s Services until the age of 25. Luton Council’s Staying Put arrangements can be explored for young people who do not meet the eligibility criteria for adult social care when they turn 18.

6.2 The Council must not allow a gap in care and support when a young person moves from children’s to adult services.

6.3 If adult care and support is not in place on a young person’s 18th birthday when they were previously supported by children’s services and there is no transition assessment, the Council must continue providing services until the relevant steps have been taken.

6.4 These steps are that the Council has conducted a transition assessment and:

- Concludes that the person does not have needs for adult care and support; or
- Concludes that the person does have such needs and begins to meet some or all of them. The Council will not always meet all of a person’s needs – certain needs are sometimes met by carers, wider networks or other organisations; or
- Concludes that the person does have such needs but decides they are not going to meet any of those needs (for instance, because
their needs do not meet the eligibility criteria under the Care Act 2014).

6.5 This provision will continue throughout the assessment process until adult care and support is in place or until assessment indicates that adult care and support does not need to be provided.

6.6 The Children and Families Act and Children Act 1989 (as amended by the Leaving Care Act 2000) enables the Council to continue children’s services beyond 18 and up to 25, for young people with EHC plans if they need longer to complete or consolidate their education and training and achieve the outcomes set out in the plan.

6.7 Under the Care Act if following a transition assessment it is agreed that it is the best decision for the young person to continue to receive children’s services the Council may choose to do so. Operational arrangements are identified within the Transitions’ Protocol.

7. Transition to Higher or Further Education

7.1 Good transition planning should consider whether a person wishes to attend higher or further education, help them identify suitable institutions and once and offer has been accepted the Council consider what support is likely to be necessary and prepare to contact the relevant Higher Education Institution to discuss this support once the person has secured a place. This discussion should, where possible include the person, carer and anyone else they wish to involve.

7.2 Where a young person is intending to move to a higher or further education institution which is out of the area where they were receiving children’s services, the starting assumption is that they will remain the responsibility of the local area which had responsibility for them as a child, or that they remain ordinarily resident in the area where their parents or those with parental responsibility for them live, which could be in the Luton area.

7.3 In some situations, the facts might show that the young person has a settled intention to remain in the new area where he or she has become ordinarily resident if they have little or no connection with the Luton area. The completion of a transition assessment should be undertaken to determine where the young person is ordinarily resident, upon their transition from children’s services to adult care and support. See Annex H8 of the Statutory Guidance 2014. Further, if at the end of their education they do not wish to return to Luton, ordinary residence should be reassessed. The
Council’s **Ordinary Residence Policy** and the Care and Support Statutory Guidance sets out more detail

7.4 Where the person will have a dual location, for instance returning home at weekends and holidays there needs must be met all year round.

8. **Transition from Children’s to Adults Continuous Health Care**

8.1 Clinical Commissioning Groups (CCG) should use the National Framework for NHS Continuing Healthcare and supporting guidance and tools to determine what on-going care services people aged 18 years or over should receive.

8.2 CCGs should ensure that adult NHS continuing healthcare is appropriately represented at all relevant transition planning meetings where the needs of the young person suggests that they are likely to be eligible for CHC. Where they are unable to be represented at meeting consideration will be given to how information will be shared and the teams involvement be agreed.

8.3 The framework sets out best practice for the timing of transition steps as follows:

- Children’s services should identify young people with likely needs for NHS CHC and notify the relevant CCGs when such a young person turns 14;
- There should be a formal referral for adult NHS CHC screening at 16;
- There should be a decision in principle at 17 so that a package of care can be in place once the person turns 18 (or later if agreed more appropriate).

8.4 Where the person is assessed as no longer requiring a CHC package the CCG should continue to participate in the transitions process where there may be identified health needs as well as social care needs.

9. **Steps following Assessment**

9.1 It is important that young people, carers and families understand their likely situation when they reach adulthood and what support they are likely to receive. Clear information about how decisions have been made will therefore be provided.
9.2 For needs that are not eligible the Council must provide information and advice on how those needs can be met and how they can be prevented from getting worse.

10. Disputes

10.1 Any disputes in relation to Transitions to Adulthood will be subject to Luton Borough Council’s statutory complaints procedure.

Legal Framework
Care Act 2014, s58-66
The Care and Support (Children’s Carers) Regulations 2014 (draft)
Carers and Disabled Children Act 2000, s 2
Children and Families Act 2014, Part 3
Children Act 1989, s 17
Children Act 2004, s 10-11
Children (Leaving Care) Act 2000
Chronically Sick and Disabled Persons Act (CSDPA) 1970, s 2
Education Act 1996, s 323
NHS Act 2006, s82

SEND code of practice: 0 to 25:
APPENDIX 1

Wellbeing Principle
The Council has a duty to promote the wellbeing of the individual particularly when carrying out any care and support functions and making decisions in relation to them. The wellbeing principle underpins the whole of the Care Act and its associated regulations and guidance. It applies to adults, carers and, in some circumstances, to children in transition, their carers and to young carers. The wellbeing principle applies equally to people who do not have eligible needs if they come into contact with the care system. Commissioners of new services will also need to incorporate/reflect the wellbeing principle in new services which are developed and commissioned.

Definition
The Care Act recognises that ‘Wellbeing’ is a broad concept and describes it as relating to the following nine areas in particular:
- Personal dignity (including treatment of the individual with respect);
- Physical and mental health and emotional wellbeing;
- Protection from abuse and neglect;
- Control by the individual over day to day life (including over care and/or support provided and the way it is provided);
- Participation in work, education, training or recreation;
- Social and economic wellbeing;
- Domestic, family and personal relationships;
- Suitability of living accommodation;
- The individual's contribution to society.

Promoting wellbeing
Promoting wellbeing means actively seeking improvement in the aspects of wellbeing described above when carrying out a care and support function in relation to an individual. This applies at any stage of the process. It is not always about the Council directly meeting needs, but includes a focus on providing information and advice to delay and prevent needs from developing and support people to live as independently as possible for as long as possible. There is no set approach. Promoting wellbeing will depend on the individual’s needs, goals and wishes. The Council should consider each person’s case on its own merits, based upon what the person wants to achieve and how the Council’s actions will affect their wellbeing.

All the nine aspects of wellbeing are of equal importance. However it is likely that some aspects will be more relevant to one person than another. The Council should adopt a flexible person centred approach that focuses on those aspects that matter most to the person concerned.
In addition to the wellbeing principle, the Care Act sets out a number of other key principles which local authorities must have regard to when carrying out the same activities or functions

<table>
<thead>
<tr>
<th>Key Principle</th>
<th>Interpretation from the Care Act Guidance</th>
</tr>
</thead>
<tbody>
<tr>
<td>The importance of beginning with the assumption that the individual is best placed to judge the individual’s wellbeing;</td>
<td>Building on the principles of the Mental Capacity Act, the local authority should assume that the person themselves knows best their own outcomes, goals and wellbeing and assumptions should not be made.</td>
</tr>
<tr>
<td>The individual’s views, wishes, feelings and beliefs;</td>
<td>Considering the person’s views and wishes is critical to a person-centred system. Where particular views, feelings or beliefs (including religious beliefs) impact on the choices that a person may wish to make about their care, these should be taken into account. This is especially important where a person has expressed views in the past, but no longer has capacity to make decisions themselves.</td>
</tr>
<tr>
<td>The importance of preventing or delaying the development of needs for care and support and the importance of reducing needs that already exist</td>
<td>At every interaction with a person, the Council should consider whether or how the person’s needs could be reduced or other needs could be delayed from arising. Effective interventions at the right time can stop needs from escalating, and help people maintain their independence for longer.</td>
</tr>
<tr>
<td>The need to ensure that decisions are made having regard to all the individual’s circumstances</td>
<td>Decisions should not be based only on their age, appearance, any condition they have or aspects of behaviour which might lead to unjustified assumptions. Local authorities should not make judgments based on preconceptions about the person’s circumstances, but should in every case work to understand their individual needs and goals.</td>
</tr>
<tr>
<td>The importance of the individual participating as fully as possible</td>
<td>By being provided with the information and support necessary to enable the individual to participate. Care and support should be personal, and local authorities should not make decisions</td>
</tr>
<tr>
<td>The importance of achieving a balance between the individual’s wellbeing and that of any friends or relatives who are involved in caring for the individual</td>
<td>People should be considered in the context of their families and support networks, not just as isolated individuals with needs. Local authorities should take into account the impact of an individual’s need on those who support them, and take steps to help others access information or support.</td>
</tr>
<tr>
<td>---</td>
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<tr>
<td>The need to protect people from abuse and neglect</td>
<td>In any activity which a local authority undertakes, it should consider how to ensure that the person is and remains protected from abuse or neglect. This is not confined only to safeguarding issues, but should be a general principle applied in every case.</td>
</tr>
<tr>
<td>The need to ensure that any restriction on the individual’s rights or freedom of action that is involved in the exercise of the function is kept to the minimum necessary for achieving the purpose for which the function is being exercised</td>
<td>Where the local authority has to take actions which restrict rights or freedoms, they should ensure that the course followed is the least restrictive necessary.</td>
</tr>
</tbody>
</table>

Neither these principles nor the requirement to promote wellbeing require the Council to make a specific decision or undertake a particular action. The steps the Council should take will depend entirely on the circumstances of each case, having regard to these principles, for the purpose of setting common expectations for how the Council should approach and engage with people.