





**Block contract** - An agreement between a commissioner (such as a council) and an organisation to provide a service to a number of people, for a fixed amount of time, for a fixed sum of money. The number of people who receive the service may not be fixed, and the exact type of care and support they receive may not be specified. This type of contract is not tailored to people's individual needs.

**Broker/brokerage** - Someone whose job it is to provide the person with advice and information about what services are available in a person's area, so that the person can choose to purchase the care and support that best meets their needs. They can also help the person think about different ways that the person can get support, for example by making arrangements with friends and family. A broker can help the person think about what the person needs, find services, and work out the cost. Local councils, voluntary organisations or private companies can provide brokerage.

**Capacity** - The ability for someone to make their own choices and decisions. In order to do this, the person needs to be able to understand and remember information and communicate clearly - whether verbally or non-verbally - what they have decided. A person may sometimes lack capacity because of a mental health problem, dementia or learning disability.

**Care Act 2014** - A law passed in England in 2014 that sets out what care and support people are entitled to and what local councils have to do. According to the law, councils have to consider a person's wellbeing, assess a person's needs, and help the person get independent financial advice on paying for care and support.

**Care market** - The full range of care and support services that are available in a particular area. This may be the local area covered by a single council, or it may be the whole country. Carer - A person who provides unpaid support to a partner, family member, friend or neighbour who is ill, struggling or disabled and could not manage without this help. This is distinct from a care worker, who is paid to support people.

**Carer's assessment** - If someone is an unpaid carer for a family member or friend, they have the right to discuss with their local council what their own needs are, separate to the needs of the person they care for. This is distinct from a care worker, who is paid to support people.

**Clinical commissioning group (CCG)** - A group of GP practices in a particular area that work together to plan and design health services in that area. Each CCG is given a budget from NHS England to spend on a wide range of services that include hospital care, rehabilitation,



**Direct payment** - Money that is paid to the person (or someone acting on a person's behalf) on a regular basis by their local council so the person can arrange their own support, instead of receiving social care services arranged by the council. Direct payments are available to people who have been assessed as being eligible for council-funded social care. They are not yet available for residential care. This is one type of personal budget.

**Disabled facilities grant (DFG)** - A grant the person might be able to get from their local council in order to make changes to their home because they have a disability. Changes include things like widening doors, adding ramps, or installing a downstairs bathroom. If the person with a disability is an adult, a person's household income and savings will be looked at, and the person may need to pay towards the cost of the work. If the person is under eighteen, the family can get a grant without the parents' income being considered. If the person wants to apply for a DFG, the person should contact a person's local council. This applies to England, Wales, and Northern Ireland, but not Scotland.

**Education, Health and Care Plan** - A legal document for a child or a young person up to the age of twenty-five if they have a disability or special educational needs (SEN). It describes the child or the young person's particular educational, health and social needs, and sets out the support and extra help they should have to meet those needs, and how this will support them to achieve what they want in their life. EHC plans replaced SEN statements on 1 September 2014. EHC plans are developed by the child or the young person's local council, which is responsible for carrying out an education, health and care needs assessment and deciding whether a EHC plan is needed.

**Eligibility** - When a person's needs meet the criteria that allow the person to receive a service.

**Extra care housing** - Similar to sheltered housing, but with additional care and support available for people with illnesses or disabilities who wish to have a home of their own. Extra-care housing may be an option if living alone at home is difficult, but the person does not wish to opt for residential care. It allows the person to have their own home, either rented or bought, with personal care and domestic help readily available.

**Forensic services** - Services for people with a mental disorder who may be a risk to others, or who have been involved in the criminal justice system. Services may be provided in a secure hospital or in the community.

**Functional assessment** - When a care professional looks at what the person is able to do for themselves, and how well the person is able to manage everyday tasks such as dressing themselves, preparing food and looking after their home. They will look at how a person's ability to do these things might have changed as a result of illness or disability.

**Gap analysis** - The process of looking at what exists and what is needed. This can apply to looking at what services are needed for people in a particular area, comparing it with what already exists, and seeing where the gaps are. This enables commissioners to plan for the future.

**Health and Wellbeing Board (HWB)** - Every council area in England has a HWB to bring together local GPs, councillors and managers from the NHS and the council. Their job is to plan how to improve people's health and make health and social care services better in their area. Members of the public have the chance to be involved in the work of their local HWB through a person's local Healthwatch.

**Health inequalities** - Differences in how health different groups of people are, and how easily they are able to get the health care they need. These differences may be affected by things like poverty, housing, and education.

**Hospital passport** - A way of helping someone with communication difficulties or learning disabilities communicate what they need when they are in hospital. It is a document that provides information for hospital staff about the person, including their likes and dislikes, interests, and other things. Many hospitals have their own version for the person to fill in if the person has a hospital stay coming up.

**Improving Access to Psychological Therapies (IAPT)** - A programme to help people with mental health problems such as depression or anxiety get a limited number of sessions of 'talking therapies' through the NHS. The person can refer themselves to this programme online, or a professional can refer the person.

**Inclusion** - Meeting the needs of everyone in a community by taking action to create an environment where everyone feels comfortable, respected, and able to achieve their potential. It means treating people as equals and removing barriers that may stop them participating in an event or activity.

**Independent Mental Capacity Advocate (IMCA)** - An independent person who is knowledgeable about the Mental Capacity Act and people's rights. An IMCA represents someone who does not have capacity to consent to specific decisions, such as whether they should move to a new home or agree to medical treatment. The law says that people over the age of sixteen have the right to receive support from an IMCA if they lack capacity and have no-one else to support or represent them.

**Independent Mental Health Advocate (IMHA)** - A service that should be offered to the person if the person is being treated in hospital or somewhere else under the Mental Health Act. Independent Mental Health Advocates are there to help the person understand a person's legal rights, and to help make a person's views heard. This is different from Independent Mental Capacity Advocate (IMCA), which is for people who are unable to make certain decisions and have no one to support or represent them. But there may be times when someone needs both an IMHA and an IMCA.

**Independent sector** - Organisations that are independent of the NHS, councils and other publicly run bodies. Independent sector organisations may be voluntary and non-profit making, or they may be private organisations that exist to make a profit. The majority of care and support services are provided by the independent sector (even if they are funded by a person's local council). Some health services are also provided by the independent sector, with NHS funding, so that they are free for the person when they use them.

**Individual Service Fund (ISF)** - If the person wants to use a person's personal budget from the council to pay for support (such as home care) from a particular provider, the money can be held by that provider in an Individual Service Fund. The person remains in control of what the money is spent on, but the person does not have the responsibility of managing the budget alone.

**Institutional abuse** - Harm that is caused to people by poor care or support provided by an organisation, caused not just by the actions of individuals but by the way the organisation works (such as their routines or structures). It can happen in care homes, hospitals, schools, and other places.

**Integrated care** - Joined up, coordinated health and social care that is planned and organised around the needs and preferences of the individual, their carer and family. This may also involve integration with other services for example housing.

**Integrated Care System (ICS)** - An organisation that brings together different health and care services, such as a hospital, a clinical commissioning group, a council, an ambulance service, local GPs, local mental health services and other things, in a specific local area. The aim is to work together to make better use of public money and provide better care for people who live in the area.

**Integrated Personalised Commissioning** - A programme that is available in some areas that combines health and social care funding for the person as an individual, if the person has complex needs. It allows the person to decide and plan for themselves how the money should be spent to meet their needs, keep the person well and avoid a crisis.

**Joint commissioning** - When two or more organisations in a local area - usually the NHS and local council - work together to plan services to meet the needs of people who live in the area. Together the commissioners plan what kind of services should be available, who should provide them and how they should be paid for.

**Joint Strategic Needs Assessment (JSNA)** - The process of identifying the future health, care and wellbeing needs of the population in a particular area, and planning services to help meet those needs. This process is led by a person's council, working with the NHS and private and voluntary organisations in their area.

**Key Lines of Inquiry (KLOE)** - This is a term used by the Care Quality Commission and others, to describe the questions it asks when it inspects care homes and other services, to decide how good these services are: Are they safe? Are they effective? Are they caring? Do they meet people's needs? Are they well run?

**Learning difficulty** - A term that refers to the difficulty someone may have with learning and processing new information, such as difficulties with reading, spelling or maths. It is different to a learning disability because the person's underlying intelligence is not affected. The two terms are sometimes used interchangeably, but the distinction between them lies in whether a person's intelligence is impaired.

**Learning Disabilities Mortality Review Programme (LeDeR)** - A national research programme looking at why people with learning disabilities often die at a younger age than other people. LeDeR reports to NHS England on the main causes of these deaths and on how they could be prevented.

**Learning disability** - A term that is used to describe a brain impairment that may make it difficult for someone to communicate, to understand new or complex information, or to learn new skills. The person may need help to manage everyday tasks or live independently. Learning disability starts in childhood and has a lasting effect on a person's development. It can affect people mildly or severely.

**Local offer** - This relates to services for children and young people up to the age of 25 who have special educational needs or a disability. All councils are required to publish a local offer that sets out in a single place what services are available in their area, so that parents and carers can see what exists and how to access it.







**Primary care** - The first point of contact in the health service, usually a person's GP, practice nurse, local pharmacist, dentist, or NHS walk-in centre. Primary care doctors deal with a wide range of health problems. They treat common illnesses, help the person manage long-term conditions and refer the person to a specialist doctor when necessary.

**Procurement** - The process by which organisations such as councils or the NHS find and pay for things such as goods and services, check that the service can genuinely be provided, and make sure that money is well spent.

**Provider** - An organisation that provides services, such as care and support services.

**Quality and Outcomes Framework (QOF)** - A summary of what GP practices should do for patients and what information they should collect. GP practices get extra money for providing specific services that the QOF says they should, such as keeping records of patients' blood pressure and making sure that people in at-risk groups receive things such as flu jabs.

**Quality assurance framework** - A structure for explaining, measuring, and improving the quality of services provided by an organisation. Quality is measured in a variety of ways, including hearing the views and experiences of people who use services.

**Reasonable adjustments** - Changes that public services, buildings and employers have to make to make it possible for people with disabilities to use a service or do a job. These changes include things like adjusting a person's working hours or providing the person with a special piece of equipment to do the job. It is against the law to discriminate against someone because the person has a disability.

**Restraint** - When a person's movements or behaviour are deliberately restricted by someone. Restraint may be used in an emergency, to prevent someone harming themselves or other people. It may also be used in a planned way to prevent someone who is unable to make decisions for themselves causing harm. If restraint is used wrongly, it may be abuse.

**Rights** - What the person is entitled to receive, and how they should be treated, as a citizen. If the person has a disability or mental health problem, is an older person or acts as a carer for someone else, the person has the right to have a person's needs assessed by a person's local council. The person has a right to a service or direct payment if their assessment puts them above the eligibility threshold their local council is using. The person and a person's carers have the right to be consulted about their assessment and about any changes in the services they receive.

**Risk assessment** - An assessment of a person's health, safety, wellbeing, and ability to manage their essential daily routines. The person might also hear the term risk enablement, which means finding a way of managing any risks effectively so that the person can still do the things they want to do, safely.

**Risk management** - The process of working out what situations might be risky for a person's health or wellbeing and taking steps to help reduce or prevent the risk of harm.

**Safeguarding** - The process of ensuring that people at risk are not being abused, neglected, or exploited, and ensuring that people who are deemed 'unsuitable' do not work with them. (If you believe that you or someone you know is being abused, you should let the adult social care department at a person's local council know. They should carry out an investigation and put a protection plan in place if abuse is happening.) Councils have a duty to work with other organisations to protect adults from abuse and neglect. They do this through local safeguarding boards.

**Safeguarding Adult's Board (SAB)** - A formal group set up by a person's council to prevent abuse or neglect of adults in a person's area who have care and support needs, and to make sure that action is taken if abuse occurs. Every area has to have a SAB, which is made up of different professionals from the council, NHS, and police, working together and sharing information. SABs also include representatives from groups that work with older people and people with disabilities.

**Secure hospital** - A hospital that provides care and treatment to people who are deemed to be a danger to themselves or others because of their mental illness and who need to be held securely and prevented from leaving. Most people who stay in a secure hospital have committed a criminal offence while mentally ill or been diagnosed with a mental illness while in prison and cannot be safely supported anywhere else. There are three main categories of secure hospital: high, medium, and low secure.

**Self-directed support** - An approach to social care that puts people at the centre of the support planning process, so that they can make choices about the services they receive. It should help them feel in control of their care, so that it meets their needs as an individual.

**Service specification** - A description given to an organisation that provides a service by the organisation that is paying for the service. The description says what the service should look like, what should be provided to people and what the outcomes should be.

**Shared Lives** - A type of care for people who are unable to live independently or may not wish to live alone, and an alternative to supported living, home care or residential care. Shared Lives

**Specialised commissioning** - The process of planning specialist services for people who have rare or complex conditions. These types of treatment - such as chemotherapy, transplants, or brain surgery - are not available in every local hospital and have to be provided by specialist teams who have the necessary skills and experience. They are planned nationally and regionally by NHS England, not by local commissioning authorities.

**Spot purchase** - When a service is bought by or on behalf of an individual as and when they need it rather than as part of a block purchase. Spot purchases can give people more choice



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