Care and Support Plan

City of Doncaster Council

Personal Details

Name
Barbara Hadden

Address
105
Washington Grove
Bentley
Doncaster
South Yorkshire DN5 9RJ

Age
59

Sex (as per health system)
Female

Ethnicity
Black/Black British

NHS ID
4109644917

Primary Service User Group
Physical Support

GP Details

Name
Barbour

Telephone

Address

Is the person in prison?

○ Yes ◉ No

Consent to information sharing

Depending on your needs we will have to collect information about you. All of the information collected will be used to assess your need for help, advice, support and care. We will then be able to manage and plan services which meet your needs, both now and in the future, to the highest possible standards. We may need to collect and share your information with services that are commissioned by us, your GP, other health services and other organisations or individuals. This is necessary to support your care. Your appointed worker will discuss in more detail how your information may be collected and shared. The UK General Data Protection Regulations give you rights because we hold information about you. For further details about how your information will be used and your data protection rights, please visit our website and read the Adult Social Care privacy notice.

Type

Start date

Agencies (Consent)

Agencies (No consent)

Override (if applicable)

Signed

No image entered

Date

08/01/2026

Do you have any reason to doubt the person's mental capacity in being able to participate fully in this process?

○ Yes ◉ No

Does the person have substantial difficulty in being fully involved in the social care process?

○ Yes ◉ No

☐

Do you have any communication needs?

○ Yes ◉ No

☑ Please confirm that communication needs have been reviewed

Budget Monitoring and Funding Arrangements

Indicative budget based on your needs assessment

Weekly indicative budget £

623.83

Annual indicative budget £

32438.99

Likely client contribution per week £

NHS continuing healthcare funding

Has NHS checklist been completed

◉ Yes ○ No

Was it identified that a Decision Support Tool needed to be completed?

○ Yes ◉ No

S117

Is this a S117 Statement of need?

○ Yes ◉ No

Is this person subject to CPA approach?

○ Yes ○ No

Who is the care co-ordinator?

NHS funded nursing care

Does the person need considering for funded nursing care?

○ Yes ◉ No ○ Don't know

Please provide further information

Care and Support Needs Identified at Assessment

Maintaining personal hygiene

Identified level of need

Help required once daily to maintain personal hygiene

Ability to achieve outcome

Able to achieve without assistance but doing so causes the adult significant pain, distress or anxiety

Significant impact on well-being

Yes

Being appropriately clothed

Identified level of need

Help required once daily to be appropriately clothed

Ability to achieve outcome

Able to achieve without assistance but doing so causes the adult significant pain, distress or anxiety

Significant impact on well-being

Yes

Managing toilet needs

Identified level of need with being appropriately clothed

Help required once daily to manage toilet needs

Ability to achieve outcome

Able to achieve without assistance but doing so causes the adult significant pain, distress or anxiety

Significant impact on well-being

Yes

Being able to use the home safely

Identified level of need

Help required three times daily to make use of the home safely

Ability to achieve outcome

Able to achieve without assistance but doing so causes the adult significant pain, distress or anxiety

Significant impact on well-being

Yes

Managing and maintaining nutrition

Identified level of need

Help required three times daily to manage and maintain nutrition

Ability to achieve outcome

Able to achieve without assistance but doing so causes the adult significant pain, distress or anxiety

Significant impact on well-being

Yes

Maintaining a habitable home environment

Identified level of need

Help required more than once weekly to maintain a habitable home environment

Ability to achieve outcome

Able to achieve without assistance but doing so causes the adult significant pain, distress or anxiety

Significant impact on well-being

Yes

Making use of necessary facilities in the local community

Identified level of need

Help required more than once weekly to make use of necessary facilities in the local community

Ability to achieve outcome

Able to achieve without assistance but doing so endangers or is likely to endanger the health or safety of the person, or of others

Significant impact on well-being

Yes

Developing and maintaining family and other relationships

Identified level of need

No help required to develop and maintain family and other relationships

Ability to achieve outcome

Able to achieve without assistance or significant impact on well-being

Significant impact on well-being

No

Accessing and engaging in work, training, education or volunteering

Identified level of need

Help required three times weekly to access and engage in work, training, education or volunteering

Ability to achieve outcome

Able to achieve without assistance but doing so causes the adult significant pain, distress or anxiety

Significant impact on well-being

Yes

Eligible Needs

Maintaining Personal Hygiene
Being Appropriately Clothed
Managing Toilet Needs
Being able to make use of the Home Safely
Managing and Maintaining Nutrition
Maintaining a Habitable Home Environment
Making use of Necessary Facilities in the Local Community
Accessing and Engaging in Work, Training, Education or Volunteering

Non-eligible needs

Developing and maintaining family or other personal relationships

Non-assessed needs

Carrying out any Caring Responsibilities the Adult has for a Child

Overall eligibility decision

Eligible

Achieving My Outcomes

Are there any other plans for the person that need to be taken into consideration (such as plans of carers or family members, or Education, Health and Care plans)?

◉ Yes ○ No

Please provide details

I am enrolled on a full-time six-year medical degree in Tbilisi, Georgia. This means I spend extended periods abroad (March–July and September–December). When I am overseas, I rely on friends, but this is not consistent or guaranteed. I remain committed to my studies, but my fluctuating health makes it challenging without reliable care arrangements.

Achieving outcomes sections

Maintaining personal hygiene

Outcome	Well-being area	How to achieve	Delivery method	Progress
To maintain independence and dignity.	Personal Dignity	Barbara requires support as and when needed with showering and personal hygiene due to fatigue and reduced energy levels	Direct payment	Not yet started

Outcome	Well-being area	How to achieve	Delivery method	Progress
		when having a 'flare up' . A shower seat has been ordered by OT to reduce falls risk and promote safe bathing.		

Being appropriately clothed

Outcome	Well-being area	How to achieve	Delivery method	Progress
To maintain independence and dignity. To have access to clean laundry.	Personal Dignity	Barbara can dress independently when well. However, during periods of ill health she requires assistance due to fatigue and reduced mobility.	Direct payment	Not yet started

Managing toilet needs

Outcome	Well-being area	How to achieve	Delivery method	Progress
to maintain dignity and independence.	Personal Dignity	Previously Barbara used a commode located in the downstairs bedroom and a bedpan when required due to reduced mobility and fatigue. These arrangements at that time supported her continence needs. Currently, Barbara reports, whilst incontinence may still occur this is only in extreme circumstances. However, she is concerned that her health is badly affected with the	Direct payment	Not yet started

Outcome	Well-being area	How to achieve	Delivery method	Progress
		ongoing stress of financial hardship.		

Being able to use the home safely

Outcome	Well-being area	How to achieve	Delivery method	Progress
To be as independent as possible within her own home.	Control over day to day life	OT has recommended environmental adaptations, including a ramp and grab rails, to reduce falls risk and promote safe access. Barbara has stated "They have also said the ramp is too steep and should not be used by a disabled person. But my house frontage does not allow for extending it. A stairlift was assessed and deemed inappropriate. Barbara also reports that her privately purchased stairlift is not suitable for safe use with her electric wheelchair. Due to fluctuation of symptoms Barbara will require support as and when needed.	Direct payment	Not yet started

Managing and maintaining nutrition

Outcome	Well-being area	How to achieve	Delivery method	Progress
To maintain a structured and healthy diet	Physical and mental health and emotional well-being	The PA supports Barbara with batch cooking, enabling meals to be frozen and reheated independently. This supports nutritional intake, particularly in relation to diabetes management, and promotes financial sustainability. Support is also required with grocery shopping.	Direct payment	Not yet started

Maintaining a habitable home environment

Outcome	Well-being area	How to achieve	Delivery method	Progress
To live in a safe clean habitable home.	Suitability of living accomodation	Barbara requires support to maintain her home environment due to fatigue and limited physical stamina. Tasks include cleaning and general household management.	Direct payment	Not yet started

Making use of necessary facilities in the local community

Outcome	Well-being area	How to achieve	Delivery method	Progress
To be supported to access the community	Social and economic well-being	Barbara requires support to attend appointments, church, and community activities due to fluctuating mobility and energy levels. She uses her electric	Direct payment	Not yet started

Outcome	Well-being area	How to achieve	Delivery method	Progress
		wheelchair for community mobility.		

Accessing and engaging in work, training, education or volunteering

Outcome	Well-being area	How to achieve	Delivery method	Progress
To promote personal progression and contribution to the community	The individual's contribution to society	Barbara is enrolled on a full-time six-year medical degree in Tbilisi, Georgia. This means I spend extended periods abroad (March–July and September–December). When overseas, Barbara relies on friends, but this is not consistent or guaranteed. Barbara remains committed to her studies, but reports her 'fluctuating health makes it challenging without reliable care arrangements'.	Direct payment	Not yet started

Has a Direct Payment been offered?

◉ Yes ○ No

Has the Direct Payment been accepted by the person or their representative?

◉ Yes ○ No

Type of Payment

○ Direct payment (paid to the person) ◉ Managed account (paid to Direct Payment Support Provider) ○ Indirect payment (paid to nominated person or organisation)

Are there any additional costs required with setting up the direct payment?

◉ Yes ○ No

Please provide details

Payroll set up - £49.44
Employers liability Insurance - £122.50

Contingency arrangements in case of absence of unpaid carer/s and/or PA or fluctuating needs

5% contingency to support arrangements in case having to arrange for care agency support in the absence of PA support due to their absence or availability to support.

Barbara's views;

"I do not want a managed account".

"I cannot be forced to have a managed account. A ‘direct payment managed account’ does not exist in any legislation or statutory guidance".

"I have been forced to purchase any care I can afford with my benefits and informal help with the remnants of any loans that received to continue my studies".

"I have incurred significant DREs. I am forced, under duress, to accept a managed account".

"I require the details to be provided but first I require a statement of what rate I am to receive, and In light of significant amount incurred in DREs I require at least twelve weeks of nil contributions until I can speak frankly, face to face with an experienced Senior Financial Assessor that will be needed to sort the DRE’s out".

"I have my DRE’s since December to be repaid by CDC direct to my personal bank account. My bank details will be given at an appropriate time. I will forward a list from 16/06/2023 to 06/04/2026. They have already been paid by my own money".

Achieving My Outcomes - S117

Section not applicable

HIDDEN

Schedule of Care and Support

Preferred Start date

03/07/2026

Start date notes

Start date of DP managed account.

The person's care preferences

Review of direct payment.

30 hours per week

PA hourly rate minimum wage.

17/07/2026 - Change from Direct Payment (paid to the person) to a Managed Account (paid to Direct Payment Support Provider, Purple Zest)

Breakdown of Package -

30 hours per week to be used flexibly, has a team of 5 PA's and will use care agency when PA's are unavailable.

Annual budget £22,888.53 plus 5% contingency = £24,032.96pa

Cost of on-going weekly support £435.68

Hourly Rate of PA support - £14.52ph / PA to be paid national minimum wage £12.71ph.

Barbara's views;

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Schedule of Care and Support

Day of week	Specific day(s)	Part of day	Time critical calls	Care and support requested

Day of week	Specific day(s)	Part of day	Time critical calls	Care and support requested

24 Hour Care

Preferred Start Date

Start Date Notes

Please detail additional 24 Hour Care information

Is there a Third Party Top Up?

○ Yes ◉ No

24 Hour Care End Date

Agreeing your personal budget

Summary of Proposed Services

Service	Description (Type: Placement/ Hours/Days/ Voucher)	Start Date or Preferred Start Date	Weekly £	Annual £
Direct Payment	Managed Account (Purple Zest) 30 hours per week, to be used flexi bly. 5% continge ncy included. Ann ual budget £22,88 8.53 plus 5% cont ingency = £24,03 2.96pa.	03/07/2026	435.68	24032.96
Direct Payment	ONE OFF Payroll set up £49.44	03/07/2026		49.44
Direct Payment	Employers liability Insurance £122.50	03/07/2026		122.5

Total (Agreed Personal Budget) £ 24204.90

Weekly Difference +/- £ 158.35

Annual Difference +/- £ 8234.09

Summary of Informal Support

Type of Support	What support is the carer providing, or support groups/ other services are helping?

Completion Details

This care and support plan was completed

☐ By Phone ☐ Face to Face - Home ☐ Face to Face -Conversation point

☐ Face to Face - Other ☐ Online

Details of all parties involved in completing this care and support plan

Name	Relationship	Job Title (if applicable)	Telephone

Completion Details

Name: Michelle Varley

Job title: Social Worker

Team: North Area Team - Three

Date: 17/07/2026

For Office Use Only

Home Care Offer - 1

To be completed by Brokerage

Offer confirmation - to be completed by Social Care worker

Next Actions

Selected Next Actions

Next Action	Assigned to	Reason
First Review of Care and Support Plan	Michelle Varley	
Purchase Services - Personal Budget	Provider Payments Virtual Worker	