

# Direct Payments and Personalisation

LPCC Information Event on 10th November 2010

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# Direct Payments and Personalisation

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Parent carers informed us over the last year, via our network, through our coffee mornings and conferences, that there was a lot of confusion over the area of Direct Payments and the Personalisation agenda. Having heard that parents were concerned we decided to address this issue by holding an information event.

The following organisations made their information available to parents:-

*Connexions, Buckles Solicitors, Action for Young Carers, Lincolnshire Autistic Society, GDCS, Transitions and Getting a Life, Independent Travel Trainers, Carers Connect, Deaflinks, Carers Partnership, Parent Partnership, Penderels Trust, NDCS, Short Breaks, Rhubarb Theatre and Brick Beat Studios, Steve Robinson-Archery.*

Nigel Shier a member of the LPCC gave a presentation about the work we are involved in at the moment. To find out more please email us at [enquiries@lincolnshireparentcarercouncil.org.uk](mailto:enquiries@lincolnshireparentcarercouncil.org.uk).

We had seven speakers on this most complex of subjects:

- Michelle White, team manager for children with disabilities and the Sensory Impaired Service
- Karen Tipton, Partnership Manager for the Transition Service
- Carol Reding, Direct Payments Development and Coordination Officer
- Kate Thomas, Person Centred Planning Facilitator

- Julie Stubbs, Social Enterprise Advisor with Lincolnshire CDA LTD
- Carol Dean, Connexions Personal Advisor
- Kim Leigh Wolters, Penderels Trust

They each gave presentations about their area of expertise. When reading the presentations please bear in mind that these slides are only the bare bones and the speakers explained what was meant by the slides. However the presentations are illustrated here as they contain information that may be useful to you.

A useful glossary which the LPCC supplied to parents is also included.



Michelle White Team Manager for Children with Disabilities and the Sensory Impaired Service gave the first presentation as follows.

## Direct Payments Children with Disabilities

Michelle White, Team Manager - Sensory Impaired Service/CWD  
10 November 2010



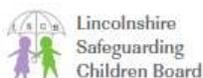
## Direct Payments - Overview

- DP in England are now governed by the 2001 Health and Social Care Act and the Children Act 1989.
- Direct Payments (DP) are a transfer of money from LCC or the Lincolnshire Partnership Foundation Trust (LPFT), to enable people who are eligible for support to buy the support required to meet the outcomes shown on their support/child's plan.



## Direct Payments - Overview

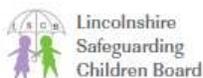
The aim of a Direct Payment is to give more flexibility in how services are provided. By giving individuals money in lieu of social care services, people have greater choice and control over their lives, and are able to make their own decisions about how their care is delivered.



## Direct Payments - Overview

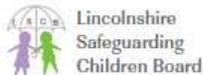
The Council and LPFT have a duty to offer DP for:

- A Community Care service within the meaning of section 46 of the National Health Service and Community care Act 1990;
- A service under section 2 of the Carers and Disabled Children Act 2000;
- **A service that local councils may provide under section 17 of the 1989 Children Act – a child in need**



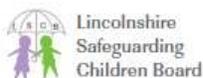
## Direct Payments – Children with Disabilities

- The Council and LPFT have a duty to provide DP to any person that meets the eligibility criteria for support – this includes people who have a parental responsibility for a child with disabilities.
- In all other circumstances, including where DP are paid to someone nominated by the service user, the service user should remain in control, and is accountable for the way in which the direct payments are used. In the case of children who benefit from direct payments, this control will be shared with their parents.



## Needs led assessment

- Identifying need
- Contact Customer Services Centre
- Referral to Social Care, Section 17/Child in Need (1989 Children Act)
- Assessment of need –  
Initial Assessment DoH - Universal services/Extended family/DLA
- Need identified – DP explored as one option of meeting need and achieving outcomes
- Fortnightly management Resource Panel

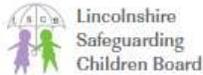


## What can a DP be used for?

The Child's Plan, may include:

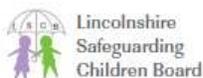
- Personal Care Needs
- Support to daily living activities
- Short term breaks

Once agreed the DP monies can be used flexibly to purchase support that achieves the outcomes of the child's care plan. This will be regularly monitored and reviewed.



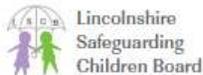
## DP cannot be used for:

- Long term residential care
- Nursing care or medicines
- General groceries
- Utility costs
- Alcohol and tobacco
- Participating or promoting illegal activities
- Equipment that would otherwise be provided by the NHS
- As a substitute for Disabled Facilities Grants.



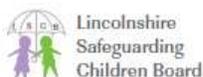
## DP services purchased

- No maximum/minimum limits – based on the eligible social care needs assessment
- Services cannot be bought from the Council
- Services cannot be purchased from a close relative living in the same household\*
- Person with parental responsibility must be satisfied that the person employed is an appropriate person – LCC mandatory CRB checks
- Childcare provided through a school or provider is registered through Ofsted



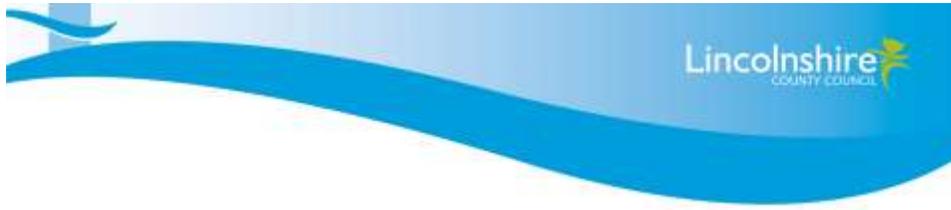
## Monitoring and Review

- DP service provision follows S17 – child in need procedures
- Dependent on the need level of case the Social worker will facilitate:
  - 6 weekly visits to child
  - 12 week review of child's plan/DP review
  - Outcomes measured through review and provision adjusted to suit



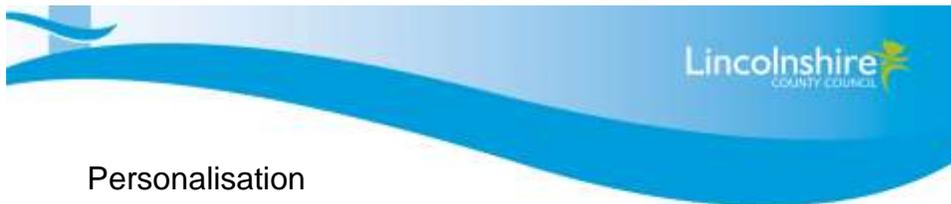
Michelle kindly answered questions from parents at this point.

Karen Tipton who is Partnership Manager from the Transition Service gave a presentation on Personalisation as follows:-



# Personalisation

## Adult Social Care



### Personalisation

- Definition – Person Centred; Individual being central to what happens, when and how. Individuals being in control and having choices
- Why? – Number of Government directives led by Disability groups having a voice, leading to Transforming Social Care in the delivery of services. Moving away from prescriptive traditional services.
- What does it mean for people of Lincolnshire, who are eligible for social care services? – Self Directed Support –More choice, more control, more independence.



## Accessing Adult Social Care

1. Referral to Adult Social Care
2. Community Care Assessment
3. Eligibility Criteria
4. Financial Assessment
5. Resource Allocation
6. Personal Budget
7. Support Plan
8. Review

### 1 Referrals to Adult Social Care

A referral is what we refer to is a formal request for an assessment.

- Customer Service Centre (CSC)
- Anyone can make a referral with consent from the person being referred.
- Information, advice and guidance can also be obtained from the Customer Service Centre.
- Referrals are screened by the CSC; local area teams are informed of referral.
- Area Team allocate a worker to start the assessment process.

## 2 Community Care Assessment

- National Health Service and Community Act (1990)
- Normally resident in Lincolnshire
- 18 years and over
- Have one or more of the following conditions- physical disability; learning disability; sensory impairment; life-limiting illness; mental frailty or disorder.
- Assessment document completed.
- Outcome of assessment – Are you eligible for support; what are the needs; how much money you could have to meet your needs and outcomes.

## 3 Eligibility Criteria

- Eligibility for support follows Government national guidelines.
- 'Fair Access to Care Services' (FACS)
- Four bands – Critical, Substantial, Moderate and Low
- (Currently) In Lincolnshire, if needs are judged to be Critical, Substantial or Moderate, Adult Social Care will be able to help directly. These criteria may change over the next year
- Needs judged to be 'low' using FACS criteria are referred to private and independent sector.
- Information, advice and guidance available at all levels of need.

#### 4 Financial Assessment

- 18 years and above.
- Individual adult is financially assessed, not the carers/parents.
- Means tested – based on income; benefits; savings and disability related expenditure.
- Amount of contribution can vary from 'nil' contribution to the 'full cost' of services.
- Right to refuse to disclose financial assessment – by doing so eligible for full cost of service.

#### 5 Resource Allocation System (RAS)

- Completed alongside Community Care Assessment
- Holistic assessment of individual's day to day needs (FACS) and impact of caring for carers.
- Point system for each area – personal care day and night; communication; eating and drinking; access to local community; risk to self and others.
- Points equate to £'s to allocated for the year for the individual assessed.
- Total RAS amount is inclusive of individual's financial contribution.
- The total RAS amount = Personal Budget.

## 6 Personal Budget

- Is the amount available (outcome of RAS) to spend on the support needed.
- Used to meet agreed outcomes and goals
- Keeping self healthy, safe and well
- Spend on activities that are legal
- Personal Budget can be paid as a Direct Payment (DP rules apply)
- Personal Budget can be used to access directly arranged services by LCC
- Personal Budgets can be used for a mix of both Direct Payment and directly arranged services by LCC

## 7 Support Planning

- What we used to call a 'Care Plan'.
- Document belongs to the individual
- Must be person-centred – what the individual wants.
- Identifies how needs are to be met
- Identifies outcomes for individual
- Details what you want to achieve and the means by which outcomes are to be achieved. Flexibility and creativity encouraged.
- Format of support plan is flexible e.g. paper document; poster; video; audio.
- Includes contingency plan – authorised by ASC Team

## 8 Review

- Support Plan is reviewed initially at 8 weeks, then 3 months, then annually there on.
- What's working – what outcomes are being achieved
- What's not working – what's not being achieved
- Support plan can be amended if no significant change in disability /circumstances
- Re-assessment may be required if significant changes in need occur.

## Personalisation the Benefits

- Person assessed makes the choices – with support
- Move away from one size fits all (traditional services)
- Control
- Flexibility
- Citizenship – being part of local community

Customer feedback so far

- “what I had before allowed me to exist not live”
- “all I want is to have a life like ordinary people, like you, to do the things that you do, the only difference is I need some support in order to do this”
- “I want to make choices about my life, where and when I go out”
- “I can now stay up late on a Friday night to watch a film, before I had to go bed at the same time each night because that’s when my carers came” “I can also have get up later at the weekends”
- “I don’t have to be with people like me now”
- “my son’s personal budget is helping prepare me for when he leaves home”

Customer feed back (cont’d)

- “I don’t have to ring the social worker each time we need to make changes to when we have care”
- “we can plan ahead”

Any questions?

[www.in-control.org.uk](http://www.in-control.org.uk)

Further Information

- [www.lincolnshire.gov.uk](http://www.lincolnshire.gov.uk)
- [www.in-control.org.uk](http://www.in-control.org.uk)
- Transition Stand

## The 7 steps to being



So it looks like I can get £10,000.



Who else can we get to help us do this plan?



We - it looks like a good plan.



We're opening a bank account for Zoe's support money.

## In Control of my support



I can choose how I get my support.



My life's changed - I'm in control.



It's gone well. Let's talk about what's next.

### The 7 steps to being In Control

- 1. Self-assessment** - Can I get money for support? How much?
- 2. Plan support** - I do my own plan. I can get help to do it - as much as I need.
- 3. Agree the plan** - A care manager has to say my plan is OK.
- 4. Manage individual budget** - The money is for my support - I can get it paid to me, or to someone who can look after it for me (a parent, a Trust, an organisation or the care manager).
- 5. Organise support** - I can get help to find and organise my support.
- 6. Live life** - I can use services but I can spend my money on support from people in the community too.
- 7. Review and learn** - I have to show that I use the money properly.

Carol Reding who is Direct Payments Development and Coordination officer gave the next presentation. She explained that Direct Payments are the method in allowing parent carers to buy a service that their disabled child requires and links in with adult Social Care.

Carol explained that there are different types of direct payments.

1. Ongoing payments – usually four weekly paid into a bank account.
2. A single one off payment.

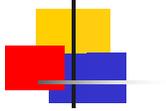
It was stressed that paperwork must be kept and all personal assistants employed by parent carers with the Direct Payment money must have CRB checks for safeguarding purposes.

Support with the Direct Payments system can be obtained through organisations such as Penderels.

For more information Carol suggested a Department of Health publication ‘Guidance on Direct Payments’ November 2009.



Kate Thomas, who is a Person Centred Planning Facilitator gave the next presentation.



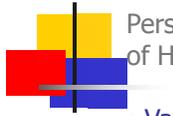
In the UK the government policy 'Putting People First' stated that person centred planning must become mainstream. In 2010 guidance was issued to help councils use person centred thinking and planning to deliver the personalisation agenda.

## What is Person Centred Planning?



- Person centred planning is a process for continual listening and learning, focussing on what is important to someone now and in the future, and acting upon this in alliance with their family and friends.
- There can be a tendency to set 'service related' rather than 'service user' goals. Person centred planning challenges the whole idea of batching people together.





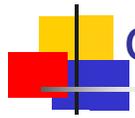
Person Centred Approaches feature in other Department of Health policies and strategies:

- Valuing People Now
- Valuing Employment Now (2009)
- Improving the Life Chances of Disabled People (2005)
- Independence, choice and risk: a guide to best practice in supported decision making (2007)
- Independent Living (2007)
- Growing Up Matters: Better transition planning for young people with complex needs (2007)
- Transition: moving on well (2008)
- Disabled Children and Young People and those with Complex Health Needs
- Personalisation through Person-Centred Planning (2010)



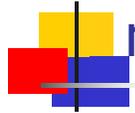
## Who does it apply to?

Person Centred Planning can work for anyone!!



## What does it mean for my child?

Often it is the family members that know the person best. They care about the person in a way that is different from everyone else and they will probably be involved in supporting the individual for the rest of their lives. They often bring huge commitment, energy and knowledge to the table.



## What does Personalisation mean to parents?

- Personalisation is about putting individuals firmly in the driving seat of building a system of care and support that is designed with their full involvement and tailored to meet their own unique needs.
- This is a completely different approach to an historic “one size fits all” system of individuals having to access, and fit into, care and support services that already exist which have been designed and commissioned on their behalf by Local Authorities for example.
- Individuals will receive their own budget and can decide how, who with and where they wish to spend that budget in order to meet their needs and achieve their desired outcomes.
- Whilst there is initial focus on social care and support services, the principles of personalisation are being embedded into a range of other public service areas such as health and education.

## What is Transition?

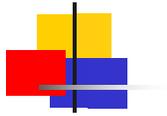
- Transition is an on-going process which takes place across the final years of school and into the early years of whatever comes next.
- The purpose of this planning is to ensure continuity of care, and to make sure that the young person has access to all the information and opportunities that they are entitled to, or want, at a time that is meaningful to them.
- The transition period is shown through research to be a stressful and difficult time, and planning should also aim to reduce anxieties and reassure everyone involved that there is a clear plan for them all to work from.

Transition can be an exciting time of new opportunities, choices and increasing independence. It can also be a time of anxiety and confusion for young people and their families as they move on from familiar people and places into "the unknown".

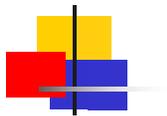
## Person centred reviews



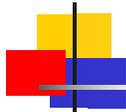
Helen Sanderson Associates



- What we like and admire about...
- What is important to...
- What is important to...for the future
- What...needs to stay healthy and safe
- Issues to resolve/questions to answer
- What is working
- What is not working
- Action Plan



Year 9 is the basis for longer-term decision making and is therefore particularly significant in preparing the pupil's transition to further education, work-based training, higher education and adult life.



# Person Centred Tools

There are many person centred tools that can be used to

- Sorting Important To/For.
- Sorting What's Working/Not Working.
- The Doughnut Sort.
- Matching Staff.
- Relationship Circle.
- Communication Charts.
- Learning Log
- 4+1 Questions.
- One Page Profiles

## WHAT PEOPLE LIKE AND ADMIRE ABOUT ME

**CHEERFUL  
POSITIVE  
GOOD FRIEND  
HONEST  
TRUSTWORTHY  
RELAXED  
AFFECTIONATE  
STRONG WILLED**

**KATE**



## WHAT IS IMPORTANT TO ME

**MUM AND DAD  
SISTERS - ELLEN AND LIZZY  
BROTHER - CHARLIE  
ALL MY FRIENDS  
MY BOYFRIEND GEORGE  
CHOCOLATE  
LISTENING TO MUSIC  
HAVING A SHOWER EVERY MORNING  
CUPS OF TEA (STRONG AND NO SUGAR)  
TALKING TO PEOPLE  
LAUGHING  
SINGING (EVEN THOUGH I'M NOT VERY GOOD AT IT)  
ART AND PHOTOGRAPHY  
DRAWING**

## HOW BEST TO SUPPORT ME

**DON'T TALK TO ME IN THE MORNINGS UNTIL I HAVE HAD MY BREAKFAST OR HAVE SPOKEN TO YOU FIRST - I AM VERY GRUMPY AT THIS TIME**

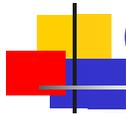
**I LIKE EYE CONTACT WHEN I AM TALKING TO SOMEONE SO I FEEL LISTENED TO**

**MY SHORT TERM MEMORY IS NOT BRILLIANT SO I MAY REPEAT QUESTIONS TO YOU**

**I DO NOT READ VERY FAST SO PLEASE BE PATIENT**

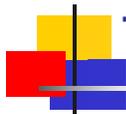
**I LIKE TO HAVE A LAUGH AND BE ABLE TO TALK TO PEOPLE SO PLEASE TALK TO ME REGULARLY**





## Communication Chart

When this is happening	...does this	We think it means	And we should
Someone is trying to tell him something or show him something	Looking off-out the window-not paying attention to the person	Boredom-already heard this, already know this	Be innovative, create new idea, activities, involve a friend
People are talking around him	Screaming out loud	He is frustrated. People aren't talking to him	Go back to the last sentence and tell-directly to him



## Tips

- Be involved at an early age with your child. Find out and share your child's dreams and aspirations with other agencies involved, particularly school.
- Begin Communication Charts and One Page Profiles so these can be shared.
- It is a legal requirement for young people with SEN to have a Transition Plan. This should consider employment, further education, friendships and relationships, health and housing.

Julie Stubbs who is a Social Enterprise Advisor with Lincolnshire CDA Ltd gave the next presentation.



## **Social Enterprise**

**Delivered by**

**Julie Stubbs**



## **What Is Social Enterprise?**

- Social Enterprise is a business trading primarily to achieve social or environmental objectives.

## A Social Enterprise is...

- Owned and run co-operatively – usually by a board of directors (voluntary), a management committee and sometimes via a board of trustees

## Social Enterprises...

- Are driven often by passion and a true belief in their social or environmental aim and impact.

## Social Enterprise

- Leads the way in ethical investment, corporate social responsibility and fair trade.

**Some examples you may recognise.....**



For those unfamiliar with everyday Social enterprises, here are just a few to be found with National 'brand' recognition.



**And some you may not.....**



1. Bridge Farm Links-also offers training in organic horticulture.
2. Tranquility life style centre –offering relaxation and exercise to people that would perhaps find a gym intimidating. Activities provided in an informal setting and are open to all members of the community.
3. Tennis Buddies –creating opportunities for all people to access and experience the values of tennis activities.

Carol Dean who is a Connexions Personal advisor gave the next presentation.

Carol informed us that every school has a personal advisor that will look at what happens when a child leaves school. Even children without a statement should be offered advice before leaving school.

They will also look at funding applications.

The personal advisor should attend at least one of the annual reviews in mainstream schools.

Carol advised parents that if young people in mainstream school need help but do not have a statement to see their Personal Advisor through the Careers Coordinator.



Kim Leigh Wolters from Penderels Trust gave the next presentation and discussed what support Penderels can give to parents and their children.

She stated that referels can be from the Independent Living Advisor allocated to the case or parents can contact them directly.

Penderels can help with costings, how to proceed with employment liability and National Insurance; providing assistance to help you use your Direct Payments.

They can also support you through the interview process and ensure the legal side of employment is covered and help draw up contracts for staff. They will look at CRB checks and help with advertising. They can also help with the Payroll although they do make a charge within the budget.

They also run peer groups around the county.



## LPCC GLOSSARY

Term	Meaning
Advocacy	Help given to people to enable them to express their opinions
Assessment of need	Used to identify an individual's social care and support needs and their eligibility for care and support.
Assistive Technology	Technical equipment that might increase the range of activities and independence or well being of disabled people.
Care Package	A collective name for the service(s) a person can expect to receive following an assessment of need.
Co production	Has emerged as a general description of the process whereby those who use services and carers work alongside professionals in order to make service and outcomes better.
CRB checks	The aim of the Criminal Records Bureau check is to help individuals and organisations in the public, private and voluntary sectors to identify people who may be unsuitable to work with children or other vulnerable members of society.
Direct Payments	Money that is paid to you so that you can arrange your own support.
Direct Provision	If you decide on this, all services are provided by the Local Authority.
FAB	Finance and Benefit team
FACS	Fair access to Care Service guidelines (could be mentioned when you are assessed).
IBNL	Individual Budget Network Lincolnshire (a site to look for brokerage etc)
Individual Budgets & Personal budgets	<p>The money you get to pay for your support and other things in your support plan. The difference between the two is:-</p> <p>A personal budget is money from Social Services</p> <p>An individual Budget is money that could come from several places including social services, the Independent</p>

	<b>Living Fund and Supporting people.</b>
<b>Local Strategic Partnership</b>	<b>Bring together at a local level, the different parts of the public, private, community and voluntary sectors.</b>
<b>Outcomes</b>	<b>Achievable and measurable goals, identified by the person and easy to understand.</b>
<b>Person Centred</b>	<b>To describe a real and recognisable person. It should describe the person accurately and develop a picture of the individual, their likes, dislikes, aspirations, personal and family situation.</b>
<b>Personal assistants</b>	<b>People you choose to work for you and support you in a way that is right for you.</b>
<b>Personalisation</b>	<b>Personalisation means recognising that a person using services is best placed to know what they need and how those needs can be met. It means that people can be responsible for themselves and can make their own decisions but also that they should have information and support to help them do this.</b>
<b>Primary Care</b>	<b>The collective term for all services, which is people's first point of contact with the NHS.</b>
<b>Primary Care Trusts (PCT'S)</b>	<b>Responsible for delivering health care and health improvements to local residents. They commission or directly provide a range of community health services as part of their function.</b>
<b>Resource allocation system (RAS)</b>	<b>This is the Local Authority's way of deciding how much money you get for your support.</b>
<b>Self Directed Support</b>	<b>Support that you decide and control. You control your budget. You can choose what support you want and how to spend your budget</b>
<b>Support Brokerage</b>	<b>Someone who helps you sort out your support. Sometimes they also help with the support plan. A professional broker is someone you pay to do this.</b>
<b>Support Plan</b>	<b>A support plan will say how you will spend your budget to get the life you want. Your Local Authority must agree your plan before you get your support.</b>

## Reasons to join the LPCC network

- you will be able to find out about changes that may affect you and your child
- we will tell you about conferences and consultations
- you will be able to tell us your views about County Council services and the NHS
- we will then ensure that common problems are recognised and addressed
- we will let you know of events like this
- Its free!

## How can I join?

We just need to know your name, contact details, how many children with disabilities and Special Educational needs you have, their gender and year of birth. You can either email, telephone, or write to us below:

**Web:** [www.lincolnshireparentcarercouncil.org.uk](http://www.lincolnshireparentcarercouncil.org.uk)

**Tel:** 0845 33 11 310

**Email:** [enquiries@lincolnshireparentcarercouncil.org.uk](mailto:enquiries@lincolnshireparentcarercouncil.org.uk)

**Mail:** Lincolnshire Parent Carer Council  
PO Box 1183  
Spalding  
PE11 9EE