

Putting **People First**
Transforming Adult Social Care

Making personal budgets work for older people: developing experience



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Introduction

It is vital that older people are able to benefit from personal budgets as these are rolled out. The individual budget pilot evaluation offers very useful insights into the challenges in making this a reality. This paper explores those findings in the context of experiences of the pilot sites and elsewhere. It sets out approaches to develop personal budgets to ensure they are attractive and useful to older people.

Older people's experiences in the Individual Budget Pilots

The Individual Budget Pilot Programme included older people along with other groups of people who use social care. Previous experience with direct payments suggested that there would be significant challenges in making individual budgets work well for older people, particularly given the timescales of the project. The personalised approach of self-directed support represents a profound shift in focus; instead of being passive recipients of services, older people become active participants in their care and support. The experience of implementing individualised funding is less developed for older people than for younger disabled adults. This meant there was less experience to build on for older people and professionals working with them. Experience since the end of the evaluation period, however, offers an increasingly positive picture of authorities responding to this challenge and making sure that older people are not excluded from the benefits of personalisation.

Challenges

The evaluation reports that older people did not benefit across the pilot in the same way as the other groups. They were less likely than others to report higher aspirations as a result of the individual budget process and people in the individual budgets group reported lower psychological well-being. The qualitative interviews suggested that many people and their carers interviewed for the pilot did not want the additional burdens that they associated with planning and managing their own support. This is a very important finding which gives strong clues to what is needed to make individualised funding attractive and useful to older people. The research team offer possible explanations for these findings and ways in which implementation of individual budgets could develop to be of stronger benefit (real and perceived) to older people.

Some sites anticipated these challenges and those working with older people started to develop responses to them during the period of the pilot.

Building on the pilots with older people

As noted, the Individual Budget evaluation reports on the impact of relatively early attempts to introduce personal budgets for older people. The data collection for the pilot ended in December 2007.

263 older people were included in the study, making up 28% of the total sample, and these were randomised into 2 groups – a group of people who were offered an individual budget, and a comparison group who were not. In Summer 2008, the individual budget sites were asked to provide a brief update on their progress. The responses are broadly positive. The people leading implementation in the sites are clearly of the view that obstacles can be overcome with targeted, focussed action. Sites also gave an indication of the number of older people taking up individual budgets (in most sites still on a voluntary basis). Though still at early stage of development, these numbers are rising fast, with at least 1500 personal budgets in place for older people from former Individual Budget Pilot sites reported at Summer 2008. This mirrors the position reported by the In Control membership who identify older people as the largest group currently in receipt of personal budgets.

Key messages from emerging practice in personalisation with older people

The following are some of the consistent messages from in the individual budget sites and others about older people and personalisation:

- Whole system change is important
- Start from the person
- Small things make a difference
- Solutions need to be flexible and individual
- There needs to be choice in how the money is managed
- Good support is essential

Whole system change is important

Evidence from different strands of the evaluation suggests that older people often approach services at a time of crisis when they feel vulnerable or unwell, and find decision-making difficult. This can make it difficult to make plans about the future. Some of the individual budget sites have recognised this and work with people in this situation to stabilise their situation in the short term, allowing them to build up confidence before thinking about what longer term support they need.

In Manchester, as soon as a person rings up social services, assessment begins and there is a much greater focus and investment in prevention. A re-ablement service provides intense support for up to the first 6 weeks. This has resulted in 43% of people having no further care needs after intensive support and 35% having a reduced long term support package. The average package has reduced from 11 hours to 6 hours a week. Council employed home carers have been retrained to provide re-ablement. Using in house staff who will not be providing on-going care means there is less incentive to keep someone dependent on services. People who do need ongoing support get a personal budget: *“older people have liked knowing the amount they have to spend and there have been really innovative ideas developing about how to use this resource”*.

A surprise has been just how many over 80s are accessing the internet and happy to use this within their support.

In Barking and Dagenham they are working with health colleagues to contact people before they reach crisis point. Through their Unique Care project they identify people at risk of hospital admission, using GP records. A joint health and social care team visits people to work out what would keep them well, including providing personal budgets. So far they have worked directly with 400 people, and within this 30 people have had a personal budget. Early data is showing promising signs that this is effective in keeping people out of hospital and improves their quality of life.

. . . I think setting out like this from the beginning has removed some of the preconceptions as to why older people wouldn't want an individual budget or a direct payment. As you can see from (our) numbers older people are still our highest number of individual budget users with the almost all taking a direct payment or a mixture of direct payment and direct provision. The challenges continue to be professional, and public views of older people. We still have our own staff, health, providers, voluntary organisations and carers saying they agree with the principle but not sure if it's right for older people. I think we need to publicise the use of personal budgets by older people much more".

Start from the person

It can be difficult to move away from practices of the traditional care management system, but a change in culture and attitudes is regularly identified as vital to achieving personalised services. As one individual budget site reports:

"We have not found any particular problems with personal budgets for older people, we very much went into the pilot looking at people as people and trying to move away from disability or age labels, I don't mean this to sound in any way a criticism of those that are working with individual groups . . .

The need to support staff to develop person centred thinking, attitudes and approaches is backed up by other analyses. A focussed piece of research in Essex recommends that, along with technical training on new processes, staff training needs to concentrate on attitudes and personal styles in working with older people. Of particular importance are ways to support and empower older people to make decisions about how to use their personal budget.

The IBSEN research highlights the importance of support planning and identifies issues that will need addressing. A criticism of care management has been the relatively low priority accorded to co-design.

Building on person centred approaches, support planning aims to introduce this co-design element, allowing people to determine the outcomes that can best meet their needs and work through how to achieve these. Ways of doing this are early in their development, although the introduction of support planning processes appears to have had a positive impact on outcomes for people.

Good Practice in Support Planning and Brokerage collates learning and best practice so far, from the Individual Budget Pilot Programme and beyond. This individual budget sites continue to progress work in this area, for example:

“We have a Section 64 grant which is held by Age Concern to develop brokerage and we are now looking to establish a Social Enterprise which will take in the existing Direct Payment support service but also do training and other activities for example peer support. This is (hopefully) to be core funded by the council as we are diverting existing funding. We have a number of volunteer planners and we have trained a number of existing posts within the voluntary sector who have an advisory role both in terms of basic awareness and support planning”.

Small things make a difference

Work by initiatives such as the Practicalities and Possibilities project suggest that apparently small things make the difference for older people. This is supported by anecdotal evidence from leaders in the individual budget sites:

“Generally speaking, it seems that for older people and their carers, little changes can have a great impact on quality of life. Unfortunately there are still assumptions that older people don't like changes and prefer to be cared for than involved in their care support. We found that the service users and their support network usually grab the opportunity to tell us what is important to them, very easily. Our experience with various partners highlighted the fact that the way self-directed support is presented ... is key to the uptake of the option”.

Older People's Services and Individual Budgets: Good practice – examples and ideas (CSIP 2007) supports this: 'even for those who decide to retain their conventional care package, the process of undertaking the self assessment and discussing the option of an Individual Budget can make older people feel they matter from the start.'¹

¹ Angela Nicholls. *Older people's Services and Individual Budgets. Good Practice – Examples and Ideas. 2007 CSIP*

Mr B has continued with his existing care package, consisting of conventional home care and day care. But he feels his relationship with the staff providing his services has been transformed, it's now on a more equal footing.

The report goes on to confirm and illustrate further that 'one of the crucial things that sites have found is that, for older people, change does not have to be dramatic, small things can make a difference'.

Solutions need to be flexible and individual

Research with older people in Essex² that consider how they can make personal budgets both attractive and useful to them, illustrates how older people are far from a homogenous group:

"What was notable were the very different individual preferences – the total list of items is long. It became apparent to all participants that what would suit one, would not be acceptable to others. Any system to allocate and use personal budgets must be able to offer very individual and flexible solutions to individual needs..."

This is borne out in experience from individual budget pilot sites:

"In terms of support planning, people have used their individual budgets for a range of different things including: commissioning PAs/agencies to manage personal care/domestic tasks; purchase of respite directly from the provider; respite in the home; day care at home; purchase of mobility scooters; computers and broadband connections (one person has also bought a web cam to aid social interaction and maintain contact with family who live abroad); holidays; transport; days out to specific locations; fishing etc."

This demand for greater choice is likely to increase as confirmed in the Wanless review³ 'Expectations are changing, and the so-called baby-boomers (born 1945–54) are likely to present a cohort of more demanding social care users in the future, strongly objecting to age discrimination and insisting on greater choice and quality.'

June suffers from lung disease, a condition which varies from day to day which impacts greatly on her level of independence at home. She was very isolated, couldn't cope with domestic tasks or any paperwork, couldn't go out without support and was depressed.

² Herbert G. *Personalised Budgets. What Do Older People Want?* May 2008 Essex

³ Wanless *Securing good care for older people – Taking a long term view* 2007 Kings Fund

The only thing she wanted was the company of a mature lady to act as a PA as and when she needed, and who would be willing to drive her around. The agency was commissioned to provide her with a number of hours of support per week that she could use to meet the outcomes of her support plan. A year later, she gets personal care only when her health condition is deteriorating and she feels pretty much in control of her life, is not depressed anymore and has used her support to visit garden centres, combine shopping with a visit to Tesco cafe – and was escorted to the Christmas pantomime. She prepared all necessary documents, went shopping and packed her luggage for a short cruise (gift of her daughter) and has co-ordinated the spring cleaning before the housing association revamped her kitchen! She gets more visits from her daughters because now she has positive things to say, and is not complaining as she used to.

The failure of the market to provide the types of products and services that older people look for has been seen as a contributory factor to maintaining the status quo in older people's services.

Alternatives are often simply not there. In its report of October 2004, **From welfare to well-being – planning for an ageing society** the Joseph Rowntree Foundation proposes that in order to meet the market needs of older people they need to be thought of as consumers:

“Initiatives are needed to address the market failure to meet the demands for the type of products and services that older people want, in order to retain independence, choice and control. More widely, there is a need to educate the private sector about the older people's market and about the type and cost of products and services that older people want to purchase, both as necessities and by choice, to improve quality of life in older age”.⁴

Change in this area is happening. In Manchester the council have reviewed all home care contractors and individual packages. Their new contracts reflect personalisation and providers run localised services (10 districts) with flexible hours. As an example, if Mrs H goes away for a week to her sister's she can cancel her support visits for that week.

⁴ *From welfare to well-being – planning for an ageing society: Summary conclusions of the Joseph Rowntree Foundation Task Group on Housing, Money and Care for Older People (October 2004). Ref 034*
<http://www.jrf.org.uk/knowledge/findings/foundations/034.asp>

On her return she could get extra hours to help with washing, shopping and getting straight again. Because the support worker has a few local streets that they manage they can agree times and changes with the small local group of people they support. Each person knows what their budget is and can use it as they see fit to achieve agreed outcomes.

There needs to be choice in how the money is managed

Personal budgets offer older people options about how the money for their support is managed. They can have accounts managed by the council, direct payments or a combination of both.

Tony wants his personal care needs met through direct provision but opts to use the remainder of his individual budget to purchase assistive technology – an automated door opening system and electronic curtain closers.

The majority of older people are still choosing to take the money as a direct payment. For example in Barking and Dagenham direct payments are currently the preferred mechanism to receive a personal budget for most older people:

“We are experiencing good take up of personal budgets by older persons. Though not one of the primary groups for delivery as part of the two year pilot... we have experienced a marked increase in take up since the end of the pilot, most likely attributed to the Unique Care project. Though it was presumed that this group may seek a deployment option that relinquished a level of budgetary responsibility/money management (for example via Individual Service Funds); Direct Payments are still the preferred deployment option, with 66% of recipients requesting this form of payment.”

This may change as more options become available but it does suggest we need to be very careful before deciding that direct payments cannot be an attractive option for older people.

During the individual budget pilot councils started to develop alternative deployment methods for those who chose not to use a direct payment. One of the pilot sites reports that just over a quarter (28%) of the older people currently in receipt of individual budgets receive these as an Individual Service Fund or managed account. This allows recipients to relinquish the burden of monetary control but still direct their own support.

Another local authority reports that many older people do not want to take the money themselves but want this to be managed through a 'Managed Individual Account'. Their challenge has been to set up robust back office processes to enable this to happen.

Common to all these approaches is the centrality of the support plan as the driving document. The provider is directly accountable to the individual in receipt of services and the local authority can retain a role in monitoring and reviewing the contract if requested by the individual. Contracts are often three-way: individual/provider/local authority.

BaNES approach to individual accounts for homecare.

- **Block and spot contracts for homecare personalised around each individual.**
- **Fortnightly payments made to providers' accounts to cover services agreed in the individual's support plan.**
- **Individual retains flexibility in how these hours of care are deployed.**
- **Individual able to carry over 25% of the sum of a weekly payment into the following month as a contingency fund.**
- **The arrangement requires individual accounting by homecare providers, who are required to submit quarterly information to the council to notify them of the balance in each individual's account.**

More information about deployment options for personal budgets can be found in the Managing the Money section of the Personalisation Toolkit.

Good support is essential

As a number of the examples preceding this show, there is a variety of ways older people can make choices without having to take on responsibilities that they may find burdensome. The importance of providing good support is borne out by feedback from individual budget sites:

"Personal budgets will leave older people in better control of their own provision if suitable advice and help is available to assist them to manage what is provided. Most of our participants would not want to have to negotiate provision with suppliers, be responsible for covering absences or deal with complaints themselves, or have more bureaucracy involved in getting the help they need. If this can be assured, they will welcome having more flexibility and control over what type of help they receive and who it is provided by.

" Our experience (with older people) has been very positive... We have found that the most important thing for older people has been the quality of information and communication. Older people have said that knowing who they need to contact if they get stuck or worried and having faith that those people will return your calls and help you to sort it out makes them feel more confident and capable and they are then more likely to recommend individual budgets to others. We have developed drop ins and a range of people are now more skilled up to advise and support but its important that the advice is consistent so training is important."

This is borne out by CSCI their 2004 report on direct payments⁵ and a 2007 discussion document⁶ which supports the view that older people want to make choices but need sufficient support to do so.

As a previous mining community with strong tradition of community cohesion Barnsley council find that connecting to the whole community and building strong partnerships makes a significant contribution to the well being of older people and the success of self-directed support.

They have increased the advisory resource within the local support service and are planning to offer small grants to other community organisations to offer drop in and advice facilities. Age Concern runs a weekly drop in service that is overseen by a paid support worker and a group of volunteers. Many other community organisations are getting involved in offering support and advice and their support workers can access a training programme free of charge. Types of questions asked are logged so that there is a cycle of learning. They have also worked to include family carers within this support system.

Conclusion

The IBSEN evaluation of the individual budget pilot programme provides a helpful insight into the particular issues that will need addressing to ensure personal budgets work well for older people. Progress being made across the former individual budget pilot sites, and many other councils, gives us some excellent learning about the direction we will need to travel, and possible approaches we will need to take in order to achieve this.

⁵ Commission for Social Care Inspection (2004) *Direct payments: What are the barriers?* London: CSCI.

⁶ Commission for Social Care Inspection *Making Choices: Taking Risks* London CSCI

