Open Agenda

Southwark Council

Healthy Communities Scrutiny Sub-Committee

Tuesday 27 January 2015
7.00 pm
Ground Floor Meeting Room G02A - 160 Tooley Street, London SE1 2QH

Membership	Reserves
Councillor Rebecca Lury (Chair)	Councillor Maisie Anderson
Councillor David Noakes (Vice-Chair)	Councillor Neil Coyle
Councillor Jasmine Ali	Councillor Eliza Mann
Councillor Paul Fleming	Councillor Claire Maugham
Councillor Maria Linforth-Hall	Councillor Johnson Situ
Councillor Kath Whittam	
Councillor Bill Williams	

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Contact Julie Timbrell on 020 7525 0514 or email: julie.timbrell@southwark.gov.uk

Members of the committee are summoned to attend this meeting
Eleanor Kelly
Chief Executive
Date: 19 January 2015

Healthy Communities Scrutiny Sub-Committee

Tuesday 27 January 2015
7.00 pm
Ground Floor Meeting Room G02A - 160 Tooley Street, London SE1 2QH

Order of Business

Item No.	Title	Page No.

PART A - OPEN BUSINESS

1. **APOLOGIES**

2. **NOTIFICATION OF ANY ITEMS OF BUSINESS WHICH THE CHAIR DEEMS URGENT**

   In special circumstances, an item of business may be added to an agenda within five clear working days of the meeting.

3. **DISCLOSURE OF INTERESTS AND DISPENSATIONS**

   Members to declare any interests and dispensations in respect of any item of business to be considered at this meeting.

4. **MINUTES**

   Minutes to follow.

5. **ACCIDENT & EMERGENCY PERFORMANCE**

   Andrew Bland, NHS Southwark Clinical Commissioning Group (CCG) will present on performance of local Accident and Emergency departments. Report to follow.

6. **ANNUAL SAFEGUARDING REPORT**

   Report to follow

Date: 19 January 2015

Personal Budgets: Challenges and Issues for the Voluntary and Community Sector
January 2015

Introduction

Community Action Southwark (CAS) has been carrying out a number of work streams focused on **personalisation**, and how the introduction of personalisation policies has affected the voluntary and community sector (VCS). In particular, we have been examining the impact of the **personal budgets**– both the impact they have had so far, and expectations for the future.

Our work on personalisation spans **adult social care, SEND, and mental health**. We have looked at both personal budgets for social care and personal health budgets. During the course of this research, we have uncovered various issues and challenges that the sector is facing as a result of the introduction of personalisation and personal budgets. We have also received rich feedback on the sector's thoughts on how personal budgets are affecting **service users**.

The VCS is a key provider of health and social care services across the borough, and helps to make up a **diverse marketplace** for health and social care services. Of the 1,125 charities based in Southwark, around 250 – or **22%** – work on health & wellbeing. Therefore, ensuring that the sector adjusts to personal budgets and continues to provide high quality services is **vital** for ensuring that service users are achieving the **best possible outcomes**, and have greatest choice about the services they use.

This document outlines CAS's work to date on personal budgets, the **challenges** and **issues** that we have uncovered, and **three key recommendations** which may help to ease the transition to personal budgets, and make it easier for the VCS to adjust appropriately.

Contents:

1. **Background: CAS'S Work on Personalisation**
2. **Challenges and Issues for the Sector**
3. **Recommendations**

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1. Background: CAS's Work on Personalisation

Understanding and responding to the personalisation agenda has been a strategic aim for CAS over the last two years. Our work in this area started with a **Personalisation Summit** which took place in February 2013; the summit explored issues related to personalisation and looked at ways that cross-sector bodies could work together more effectively to implement it.

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The Personalisation Summit aimed to:

- Identify drivers for and expectations of partnership working
- Establish objectives for partnership working
- Outline obstacles for partnership working
- Create an action plan to meet objectives and overcome obstacles

An **action plan** emerged from this event. Actions to be taken forward included the development of **specific market forums**, the creation of a **peer support network**, and developing **an online directory of services** (an e-marketplace). Whilst some progress has been made with some of the agreed actions, there has been delay with others – for example, we are yet to see an e-marketplace for providers of care services; a tool that would be beneficial for the VCS and service users alike. We explore this in more detail in the recommendations section of this document.

We have also carried out more recent work to examine organisational attitude towards personal budgets. Between 15th July and 29th August 2014, CAS ran a survey focusing on the experiences organisations had had with the personal budgets, and exploring their expectations of personal budgets in the future.

Additionally, CAS has been running a free module (supported by Southwark Clinical Commissioning Group (CCG)) for voluntary and community sector organisations (VCOs) entitled '**Personalisation: Making it Work for You and Your Users'**. Through this module we aim to support the sector to adjust to personalisation through developing skills such as effective unit pricing, full cost recovery, evidencing outcomes, and developing marketing strategies. This module has had the support of both the council and the CCG, and external organisations have attended to provide useful case study examples. As part of our work, we have gathered comments and feedback from attendees.

We have put together the following documents for use by the sector, which may be useful for further reading:

- **Personalisation Briefing**: A briefing which provides information about the history and concept of personalisation
- **Personalisation and SEND Briefing**: Specific information about the introduction of personal budgets for SEND and how this might impact the VCS
- **Results of the 'Just CASKing' Personal Budgets Survey**: Details the concerns that organisations have around personal budgets, and the help that they would like CAS to provide
- **Personalisation Resource Page**: A general resource page containing valuable information about personalisation and its impact on the voluntary sector

CAS has also met with individual VCOs, support planners and council staff to discuss personalisation and the associated issues.

2. Challenges and Issues for the Sector

Our personalisation survey indicated that many VCS organisations have experienced, or expect to experience, **problems** with personalisation and the personal budgets system. **84%** of organisations that responded either had, or anticipated, problems with personal budgets.

Most of the feedback we have received has indicated that problems for the VCS tend to arise when a service user elects to manage their own budget via a **direct payment**. This represents a big change from the previous arrangements, and makes the service user both a **customer** and a **commissioner**. While this is positive in that it results in more choice and control for the service user, it can be difficult for VCS organisations to manage this fundamental change in how their services are bought.

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VCOs now need to deliver their services in a way that cater **directly for service users**, instead of appealing to the local authority. This comes with associated challenges such as changing organisational arrangements, focusing on marketing services to a new audience, and adjusting processes to adapt to new payment arrangements.

We have received the following specific feedback about issues related to personalisation:

- **Organisations have expressed concerns that only a small number of service users seem to have personal budgets, and awareness of personal budgets is low**

Our personalisation survey found that only 20% of respondents had half or more or their service users paying via personal budgets. Additionally, only 13% of organisations had a majority of service users paying with personal budgets, and all of these had an income of £100k or more.

Organisations have expressed concerns that the awareness of the existence of personal budgets, and who is entitled to personal budgets, is too low. Some organisations feel that the suitability of personal budgets for those with severe mental health problems is a growing concern. There was also concern about managing personal budgets for those with acquired brain injury, mental health problems, and dementia.

- **There is concern around eligibility for personal budgets and awareness of eligibility criteria**

Organisations feel that there should be more clarity around eligibility for personal budgets – they are unsure who is eligible, and who is not. They feel that there is a lack of clarity about the implementation of different systems of personal budgets (and the difference between personal budgets for social care, and personal health budgets).

Attendees at our personalisation module have expressed concerns over the outcomes of eligibility panels around personal budgets, which mean service users not having sufficient allocation to meet their support needs; and concern that there are not consistent write ups of decisions made at eligibility panels or written explanation to service users.

There is general concern that care co-ordinators do not have the resources or capacity to work closely with service users, particularly those with mental health support needs, which is more resource intensive

- **Many organisations expect to lose contract or grant money because of personalisation**

Almost half of respondents to our personalisation survey expected to lose some of, or all of, their council or NHS contract or grant as a result of personalisation and personal budgets. Organisations are concerned that the transition to personal budgets means that they will have no guaranteed income. This will create associated issues such as problems managing cash flow, planning future strategy and service development, and retaining high quality staff members. They are also concerned about how preventative work will be funded, as this cannot be paid for through personal budgets.

VCS organisations would like to see clarification over whether 'core' funding will be provided to organisations that are receiving a large proportion of their income through personal budgets.

- **There is concern that personal budgets do not provide enough cash to cover prior levels of support**

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68% of respondents to our personalisation survey said that they thought personal budgets were not enough to cover the previous level of support given to individuals. There is concern that service users have unrealistic expectations about what can and cannot be purchased with a personal budget.

- **Organisations have issues with marketing and cash-flow, and there is high demand for support with implementing personalisation, particularly from small organisations**

There is high demand among smaller organisations for information, training in cash-flow and costing, and marketing. VCOs have also expressed a desire for training in advocacy work, and full training in how the personalisation system works and what to expect for providers and service users. We hope that our personalisation training module is making some headway in addressing some of these issues.

3. Recommendations

CAS appreciates that taking a personalised approach and implementing personal budgets across different service areas is a difficult job. CAS also appreciates that it has been fully supported by the council and the CCG in putting in place measures to help the VCS adjust to personal budgets.

However there are a number of key recommendations CAS would like to make, in order to ensure that the shift towards personal budgets is smooth:

1. **All VCS organisations should be kept fully aware of where they stand with regards to their contract and transition to personal budgets**

We are aware that the council has a policy of providing three months' notice to VCOs if their contract or grant funding is to end. As more service users are awarded personal budgets, it is more important than ever that the move towards personal budgets is gradual and that organisations are kept aware of the shift towards personal budgets, and how this might impact on their grant/contractual arrangements.

2. **Provide more information about personal budgets, particularly around eligibility criteria and the difference between personal budgets for social care, and personal budgets for health**

VCOs would like to see targeted action by the council to raise awareness of personal budgets for service users, and more information about who is eligible. We would suggest more clarity around eligibility criteria and the process for an individual receiving a personal budget, including how long this will take to process. Clarity around eligibility criteria for a social care personal budget is particularly important given introduction of a national eligibility criteria and a move away from FACS as a result of the Care Act.

3. **Establish a clear system for listing providers for adult social care that resembles the Local Offer – the published list for SEND services.**

One of the key recommendations to emerge from our Personalisation Summit was the establishment of an e-marketplace detailing all organisations that could provide services to individuals with personal budgets. This would be an invaluable resource, would make sure that individuals are made aware of the range of services available to them, and would mean that knowledge about the range of VCS services was 'out there' and easy to access. CAS is willing to play a key role in co-ordinating this, and is keen to see it get off the ground.

If you have any **questions** about anything in this document, or want to discuss personal budgets and the VCS in more detail, please contact Rachel Clarkson, Policy Officer at rachel@casouthwark.org.uk

'Just CASking' Personalisation Survey Results

Between 15th July and 29th August 2014, Community Action Southwark (CAS) ran a survey on organisations' **experiences** and **expectations** around **personal budgets**. This was disseminated via our CAScade e-bulletin, website, and two focused emails to voluntary and community organisations. Out of 296 members we received responses from 31 - a response rate of **10.5%.**

Key points

- **Only a small number of service users seem to be using personal budgets.**
  Only 20% of respondents have half or more service users paying via personal budgets. Only 13% (all of which have an income of £100k or more) have a majority doing so.

- **Information and advice is the most common personal budget support service provided by respondents.**
  Several organisations also provide support planning and budget management services.

- **Nearly half of organisations expect to lose contract or grant money because of personalisation.**
  49% of responding organisations expect to lose some of or their entire council or NHS contract or grant as a result of personalisation. Larger organisations (with more than £500k) were more likely to expect this; smaller organisations often had no council/NHS funding to start with.

- **Many organisations already have, or anticipate, problems with personal budgets.**
  Only 16% of organisations, all of which do not have any service users paying by personal budgets, said they do not have or anticipate any problems with the system. Even among those organisations without any service users paying by personal budgets, half anticipate problems in future.

- **Several organisations which expect no decrease in, or never had, council or NHS funding have some service users paying with personal budgets.**
  This might indicate that the system enables users to access new services, and/or that certain organisations receive new revenue streams.

- **A majority of organisations think personal budgets don't provide enough cash to cover prior levels of support.**
  68% of respondents said that personal budgets were not enough to cover the previous level of support given to each individual, and 65% said that not all service users will be supported in future as they are not all eligible for a budget at all.

- **Issues with marketing and cashflow were widespread at 55% and 52% respectively.**
  Other problems noted by more than one organisation included administrative costs, personal budgets not being enough to cover core/back office costs, confusion at the council regarding who is and is not on a personal budget, lack of understanding of the system by the organisation, and confusion and stress for particular client groups.

- **Demand for CAS support around personalisation was high, especially among the smaller organisations.**
  58% of respondents requested representation of concerns to the council/NHS (though some of these might be national issues), 42% wanted detailed information on the shift to personal budgets, 39% training on cashflow/costing/finance issues and 35% training on marketing and publicity. Other training topics suggested were supported employment and budget advocacy work.

1.1 Breakdown of responding organisations by size

Income band	Number of organisations in this income band	% of organisations in this income band
Less than £5k	4	13%
£5K – less than £25k	0	0%
£25k - less than £100k	1	3%
£100k - less than £500k	16	52%
£500k - less than £1million	1	3%
£1million+	7	23%
Don't know	2	7%
TOTAL	**31**	**100%**

Smaller organisations are under-represented, perhaps because they had less capacity to respond or felt this issue was not relevant to them.

1.2 Breakdown of responding organisations by potential personal budget user group

User group	Number of organisations serving this user group	% of organisations serving this user group
Children or young people with special educational needs or disabilities (SEND) and/or their families	10	32%
Adults with social care needs	20	65%
Adults with health conditions	11	35%
People with mental health issues	18	58%
Other (please specify)	5	16%

Note that most organisations serve more than one user group so figures do not total 31. Because of this, it was not meaningful to break down results by the types of service users served by responding organisations.

Personal budgets have been available to **adults with social care needs** for many years, and must be completely implemented by April 2015. At present **94%** of those eligible in Southwark have personal budgets.

From April 2014, **people eligible for NHS Continuing Healthcare** have had the right to request a personal health budget, and they will have the right to have such a budget from October 2014. From April 2015 there will be a further rollout of personal health budgets in the NHS, including to people with mental health issues.

From September 2014, all **families of children with SEND** with an Education, Health & Care Plan should be offered a personal budget.

2. Proportion of organisations' service users paying for services using a personal budget

Proportion of service users	Number of organisations with this proportion of users paying via personal budgets	% of organisations with this proportion of users paying via personal budgets
All	1	3%
Majority	3*	10%
Half	2	7%
Minority	15	48%
None	10	32%
Total	**31**	**100%**

Note that one organisation which ticked 'majority' added "This applies to our home care services, our other universal services are free."

Organisations were asked to include those people paying with a personal budget but through a third party.

Few respondents as yet have a large proportion of service users paying via personal budgets, even though this survey is likely to have attracted more respondents who have experience in this area.

All four of the organisations which had more than half of their service users paying via personal budgets were organisations with **more than £100k income per year**. However, the sample of smaller organisations was small so this may not be entirely representative.

Some organisations explained why the proportion of their service users paying via personal budgets is low:

- One which had no personal budget paying users said they were currently block funded instead but that this would be reviewed soon.
- One which had no personal budget paying users said that this is because they have not been implemented yet for children's services, and in any case personal budgets in principle do not apply to advice services like their own.
- Another with few users paying via personal budgets said that this was because it is 'so difficult' to apply for a personal budget, implying that more people would like to have one if they could.

3. Services provided by organisations to help people with their personal budgets

	Number of organisations currently providing this service	Number of organisations intending to provide this service	Total mentions	% of organisations providing or planning to provide this service
Information and advice	13	7	20	65%
Support planning	7	5	12	39%
Budget management	5	4	9	29%
Advocacy for a budget	5	1	6	19%
Help with legal/financial aspects e.g. employing carers	4	0	4	13%
Employment support	0	2	2	6%
Wrote 'no' or left blank or gave unclear answer	10			32%

Information and advice is the most common service provided (in at least one case as part of a generic advice service), with several organisations also providing **support planning** and **budget management** services.

Two organisations did not tick 'legal/financial support' but wrote in 'employment support', implying that they would provide a more wholistic service around employment issues.

One organisation which provides several services works together with the Social Services team to do this.

4.1 Changes to organisations' funding from the council or NHS as a result of moves towards personal budgets

Changes to council/NHS funding	Number of organisations	% of organisations
Not Applicable - we don't receive any statutory funding	5	16%
No changes expected	8	26%
Contract/grant has decreased/will decrease	6	20%
Contract/grant has ended/will end	9	29%
Don't know	3	10%
Total	**31**	**100%**

Nearly **half** of responding organisations **expect to lose some or their entire council/NHS contract** or grant as a result of personalisation. A quarter do not expect changes, and the remainder either do not receive statutory funding or don't know. One of the 'don't know' responders added that their block funding is under review so there may be reductions soon.

The largest organisations (with more than £500k) were more likely than those with £25k-£500k to have seen a contract decrease or end, and least likely to expect no changes. The smallest organisations (less than £25k) mostly did not receive council/NHS funding in any case.

4.2 Relationship between loss/decrease in contracts and the number of organisations' service users paying via personal budgets

Two of the fifteen organisations with a **contract that has or will end/decrease** do not yet have any service users paying via personal budgets; eleven of the fifteen have only a minority of users paying via personal budgets. However this may be because not all of the contract endings/decreases have yet taken place.

Perhaps encouragingly, however, of the eight organisations which expect no decrease in council funding, five have service users on personal budgets, and of the five which did not have any council funding, two have a minority of service users on personal budgets. This may indicate that personal budgets **enable service users to access services** they would not have done previously, and/or that certain organisations **may receive new revenue streams**, though more research would be needed to confirm this.

5. Problems experienced or anticipated by organisations around personal budgets

- Only five (16%) of organisations said they **do not have or anticipate any problems** with personal budgets, or did not respond. All of these organisations were among those which do not have any service users paying by personal budgets.
- Of the six organisations with half or more of their service users paying by personal budget, five (83%) have **problems already** and one anticipates problems.
- Of the fifteen organisations with a minority of their service users paying by personal budget, eleven (73%) **already have problems** and the rest anticipate problems.
- Even among the ten organisations with no service users currently paying by personal budgets, **five (half) anticipate problems**.

The number of issues raised by each organisation ranges from none to seven. An organisation which raised only on problem stated "We operate as a Managed Account Provider in 99% of the cases which makes it manageable for us."

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Types of problem highlighted:

	Number of organisations experiencing problem	Number of organisations anticipating problem	Total number of organisations experiencing or anticipating problem	% of organisations expecting or anticipating problem
Problems suggested by survey				
Personal budgets not enough to cover the previous level of support to each individual	8	13	21	68%
Some service users not eligible for personal budget so will no longer be supported	12	8	20	65%
Difficulty/lack of experience publicising and marketing services	8	9	17	55%
Cashflow issues	7	9	16	52%
Further problems added by respondents and reflecting their concerns				
Administrative costs	0	2	2	6%
Personal budgets don't cover core/back office costs	2	0	2	6%
Confusion [at/from the council] regarding who is and who isn't on personal budgets	2	0	2	6%
General lack of understanding of the system at the organisation	2	0	2	6%
Confusion/worry for clients	2	0	2	6%
Payment collection difficulties	1	0	1	3%
Difficulty with reconciliation of payments	1	0	1	3%
Impossible to project income	1	0	1	3%
No provision for increasing budgets year on year	0	1	1	3%
Staff conducting assessments are not aware of all service provision on offer	1	0	1	3%
Undermining preventative work and joint working with care coordinators (council suggest they won't pay for 'key-working')	0	1	1	3%
More competition around employment services and personal budget rates differ depending on size of organisation.	1	0	1	3%
"Miss-selling of personal budgets": they cover basic personal care/support, and for the physically disabled, social needs do not have a budget attached.	1	0	1	3%
Don't have/anticipate problems	4			13%
No response	1			3%

Worryingly, 68% of respondents said that personal budgets were not enough to cover the **previous level of** support given to each individual, and 65% said that **not all service users** will be supported in future as they are not all eligible for a budget at all (one organisation specifically noted that they may look for external funds to keep up support).

Issues with **marketing** and **cashflow** were also widespread at 55% and 52% respectively.

Some elaborated on the issues noted:

- Around marketing, the time commitment needed from staff was mentioned as too much.
- One respondent said that it can be hard to collect payments from people who are required to contribute to their costs after assessment, and that VCOs are unable to collect debts.
- One respondent stated that cashflow problems would be alleviated if users could pay up-front, though another found that cashflow was not a problem 'as personal budgets are paid at the beginning of each four-weekly period'. On a slightly contrary note, an organisation concerned about administrative costs said that they would prefer to be paid quarterly not monthly (but that users' parents would struggle with this, as they receive money monthly).
- Difficulties around managing budgets were mentioned for clients with acquired brain injury, mental health problems and dementia.

6. Support from CAS needed by organisations

	% of organisations with less than £25k (4 respondents)	% of organisations with £25k- less than £500k (17 respondents)	% of organisations with £500k+ (8 respondents)	Total number of organisations requesting this support	Total % of organisations requesting this support
Raising concerns with Southwark Council/NHS	50%	59%	50%	**18**	**58%**
Detailed information on the shift to personal budgets	50%	59%	0%	**13**	**42%**
Training on cashflow, costing, finance issues	75%	47%	0%	**12**	**39%**
Training on marketing, publicity	25%	47%	0%	**11**	**35%**
Other training	50%	12%	0%	**4**	**13%**
Wrote 'no' or left blank	25%	6%	50%	**4**	**13%**

Demand for most areas of support around personalisation was high.

The only service requested by organisations with **£500k+** was **representation** to the council/NHS (with 50% of respondents needing this). Thus the high demand among smaller organisations for **information, training in cashflow/costing/finance and marketing** is not fully reflected in the overall statistics, with **finance issues** particularly of concern among the smallest groups.

Some elements of the personal budgets agenda are beyond the council's control but input from the VCS could help improve the application of reforms. Details were given about the **messages organisations wanted represented to the council/NHS**:

- "Challenging their statistics on those eligible and real reduction in money spent on individual's care"
- "The difficulty of personal budgets being used for employment support - the time and money you have to spend before an outcome, in most circumstances."
- "The issue raised above about not knowing who has budgets"
- "CMHTs not informing clients about personal budgets or starting and completing applications"
- "The council were told these problems" [ineligibility of some clients, budgets being insufficient to cover both existing support and overheads, cashflow, marketing, undermining of the preventative agenda] but did not include personal budgets in the consultation on day services "even though they are central to the service's success or failure! It is a tactic to cut these services, without admitting to it. If this was not the case why exclude personal budgets and funding from the consultation?"

Several suggestions were also given about specific **types of training** needed:

- A refresher session on cashflow, costing etc.
- Topical training around this issue e.g. a discussion on supported employment
- Information on how to ensure legally that all people who need a budget get one and that it is the right amount [advocacy work]
- Full training on how the system works and what to expect for providers and service users.

The particular concerns highlighted around the **level of payments being inadequate** to cover previous service levels indicate that CAS should expect to need to assist organisations with fundraising to cover core/overhead costs and/or full cost recovery pricing.

Concerns highlighted about the **lack of eligibility** for services among many existing users and undermining of the preventative agenda reinforce the importance of the work of the Early Action Commission and assisting groups to diversity their funding.

For more information on personalisation, please contact **Rachel Clarkson, Policy Officer** at [E] rachel@casouthwark.org.uk [T] 0207 358 7017.

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HEALTHY COMMUNITIES SCRUTINY SUB-COMMITTEE
MUNICIPAL YEAR 2014-15

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NOTE: Original held by Scrutiny Team; all amendments/queries to Julie Timbrell Tel: 020 7525 0514

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Sarah Willoughby, Stakeholder Relations Manager, KCH FT	1	**Dated:** January 2015	