

SELF-DIRECTED SUPPORT

**Policy
November 2010**

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INFORMATION SHEET

Service area	All Adult Social Care Service Areas
Date effective from	November 2010
Responsible officer(s)	Helen Moir (Divisional Manager, Transformation Team)
Date of review(s)	November 2011
Status: <ul style="list-style-type: none"> • Mandatory (all named staff must adhere to guidance) • Optional (procedures and practice can vary between teams) 	Mandatory
Target audience	Operational Managers and practitioners especially those involved in assessment, support planning, Care Management and review of individuals in relation to Self-directed support in Adult Social Care
Date of committee/SMT decision	Directorate SMT & Date
Related document(s)	<ul style="list-style-type: none"> • Adults & Community Directorate's Business Plan 2010-2013 • Care Management Practice Manual • Adult Services Self-directed support procedures • Direct Payments Procedures and Practice Guidance for Direct Payments (Version 11) • Safeguarding Adults • Mental Capacity Act Overall policy Feb 2010 • Section 117 policy, Mental Health Act 2003 • Deprivation of liberty and mental capacity: guidance note Fair Access to Care Services policy March 21010
Superseded document(s)	Not applicable

Community Impact Review and Assessment completed	TBC
Adult Safeguarding Audit Tool Completed	TBC
File reference	TBC

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1. INTRODUCTION		
1.1	<p>Following the publication of the Green Paper Independence, Wellbeing and Choice, and the subsequent White Paper, Our Health, Our Care, Our Say on the 10th December 2007, the Government issues a policy document Putting People First, In which they announced that self-directed support and personal budgets will be introduced across England as part of the transformation of adult social care to a system of personalised social care.</p> <p>In Halton Borough Council this approach has been used in a pilot; 'PSD live' for people with Physical Disabilities providing the foundation to expand the pilot across all adult social care groups.</p> <p>This policy outlines the principles for achieving the implementation of self-directed support in Halton by balancing choice and risk, rights and responsibilities. It is recognised that, in the right circumstances, risk can be managed so as to promote positive risk taking supported through responsible supported decision-making.</p> <p>Halton Borough Council and its public service delivery partners are committed to the implementation of Self-directed support for all adults entitled to receive social care services.</p>	<p><u>Directorate's vision</u> "To promote effective, affordable, quality services that are accessible, equitable, timely and responsive and to enable individuals and groups in Halton to make informed choices."</p>
1.2	<p>Self-directed support places an emphasis on advocacy, support and enabling people, rather than on financial control and the rationing of access to services.</p>	<p><u>In-Control Vision</u> "Self-directed support is a new system. It's about people being in control of the support they need to live the life they choose."</p>
1.3	<p>It is a way of providing long-term support to adults of 18 years and older who have eligible social care needs. It allows them to know how much funding is available to them in a personal budget, and it enables them to use that budget to develop a Support Plan through which they choose how to meet their own assessed needs in ways that make sense to them and their carer(s).</p>	<p>See In-Control Fact sheet 22 'Money-Resource allocation'</p>
1.4	<p>This document sets out Halton Borough Council's Policy on Self-directed support for individuals and their carers. Central to this Policy is the council's commitment to ensuring that available resources are allocated to individuals in a fair and transparent way, on the basis of assessed eligible needs regardless of impairment, age, gender, or ethnicity and with respect and dignity at all times.</p>	
1.5	<p>Comprehensive information in relation to this policy, and the use and availability of Self-Directed Support, will also be</p>	

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	available in a variety of formats in order to ensure accessibility for all service users, potential service users, carers, staff, and other agencies.	
	Legislation and guidance	
1.6	The initiative for Self-directed support originated from organisations for disabled people pressing for the right for autonomy over their lives and for control over the assistance they needed in order to live independently.	
1.7	<p>Recent legislation has helped to shape this and provide a framework within which self-directed support can develop and move forward. Of particular relevance are the core duties set out in;</p> <p>Human Rights Act (1998) including Article 8 Right to respect for private and family life Article 14 Prohibition of discrimination</p> <p>The Carers (Recognition and Services) Act (1995) Provides for the assessment of the ability of carers to provide care ; and for connected purposes</p> <p>The Data Protection Act Makes provision for the regulation of the processing of information relating to individuals, including the obtaining, holding, using or disclosure of information</p> <p>The Local Government Act 2000 Defines powers of Well-Being</p> <p>Local authorities are obliged by law to make direct payments available to people who are eligible for them and choose to take the money. The Department of Health has published Guidance on Direct Payments (2009) about how the law should be implemented. This Guidance replaces that of 2003 and reflects changes introduced by amendments made to S57 of the Health and Social Care Act 2001 Act. Halton Borough Council is committed to following this guidance as closely as possible</p> <ul style="list-style-type: none"> • Fair Access to Care (FACS) – Guidance (January 2003), this guidance provides councils with a framework for setting their eligibility criteria for adult social care. Implementation was intended to lead to fairer and more consistent eligibility decisions across the country • Fairer Charging Guidance (September 2003) – This guidance is issued under section 7 of the Local Authority Social Services Act 1970. This guidance issued by the Department of Health allows local authorities to design a charging policy within specific guidelines, which includes discretionary elements to be adopted to suit the specific needs of the council 	

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	<p>The Carers (Equal opportunities) Act ensures that carers are able to take up opportunities that people without caring responsibilities often take for granted, such as working.</p> <p>The Mental Capacity Act (2005) The need to apply the Mental Capacity Act features strongly in self-directed support where the individual lacks capacity to manage money and/or the ability to make decisions about their care.</p> <p>Equality Act 2010 (Equality Bill) Places a new Equality Duty on public bodies which brings together the three existing duties, to tackle discrimination and promote equality for race, disability and gender, and extend them to gender reassignment, age, sexual orientation and religion or belief. The Act contains powers to outlaw unjustifiable age discrimination by those providing goods, facilities and services and carrying out public functions.</p>	<p>It is recommended that all support for decision making in relation to self-directed support be in line with statutory principles of the Mental Capacity Act 2005. In summary we can say:</p> <p>If someone has full mental capacity and is able to make their own decisions, then it is essential that they maintain control and that professionals support their decision-making at every stage (Mental Capacity Act 2005).</p>
	Principles and values	
1.8	<p>The Councils priorities in the implementation of Self-directed support is mapped by the aspirations of other key strategies</p> <p>The council is committed to enabling service users to achieve the outcomes contained in the Government's 2008 Local Authority Circular: 'Transforming Social Care'. Individuals will be supported to have the following outcomes:</p> <ul style="list-style-type: none"> • live independently, and have the maximum control possible over life decisions and any required support arrangements • stay healthy and recover quickly from illness • exercise maximum control over their own lives and, where appropriate, the lives of their family members • sustain a family unit that avoids children being required to take on inappropriate caring roles • participate as active citizens, both economically and socially • have the best possible quality of life, irrespective of illness and disability • Retain maximum dignity and respect, whilst minimising undue risk of harm to the individual or to others. 	
1.9	<p>This operational policy uses as its framework the principles developed by the In Control that are required to conduct the Independence, Choice and Risk Management of self-directed support. These principles are:</p> <p>Right to Independent living- <i>"I can get the support I need to</i></p>	<p>In Control (2003) - an Independent social enterprise with charity status who set up a self-directed support</p>

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	<p><i>be an independent citizen</i></p> <p>Right to an individual budget – <i>“I know how much money I can use for my support”</i></p> <p>Right to self determination-<i>“I have the authority, support and representation to make my own decisions”</i></p> <p>Right to flexible funding-<i>“I can use my money flexibly and creatively”</i></p> <p>Accountability and Responsibility principle- <i>“I should tell people how I’ve used my money and anything I’ve learnt”</i></p> <p>Capacity Principle- <i>“Give me enough help but not too much, I’ve got something to contribute too”</i></p>	<p>model-bringing real, sustainable benefits with no increase in costs. Their work has strongly Influenced Government policy including Putting People First.</p> <p>These are the In-Control distilled 7 ethical principles that underpin Self-directed support</p> <p>See more at www.in-control.org.uk</p>
1.10	<p>This policy is written in the context of the Council’s vision for Self-directed support in Adult Services.</p> <ul style="list-style-type: none"> • Transform social care in Halton into a system of self-directed support that puts individuals at the centre of the assessment of their own needs and tailoring support to meet them ensuring better value for money • Develop a culture and the tools to enable individuals to take greater control of their lives and the support they receive so that they can make decisions and manage their own risks • Create a quality driven customer focused and efficient model which enables partners to support adults in need in Halton • Support people to achieve maximum independence, well-being and dignity by reducing the barriers which prevent them from accessing mainstream services including transport, work, housing, leisure and financial services 	<p>Vision is based on <i>Putting People First: A shared vision and commitment to the transformation of adult social care (2007)</i></p>
2. KEY OUTCOMES		
2.1	<p>Adult Services will conduct its business in accordance with the principles and values intrinsic to self-directed support and National Standards set. These will be delivered through the implementation of this policy and will have the following outcomes.</p> <ul style="list-style-type: none"> • Outcome 1 Improved health and emotional well-being: To stay healthy and recover quickly from illness • Outcome 2 Improved quality of life: To have the best possible quality of life, including life with other family members supported in a caring role • Outcome 3 Making a positive contribution: To participate as an active citizen, increasing independence where possible • Outcome 4 Choice and control: To have 	

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	<p>maximum choice and control</p> <ul style="list-style-type: none"> • Outcome 5 Freedom from discrimination: To live free from discrimination or harassment • Outcome 6 Economic well-being: To achieve economic well-being and have access to work and / or benefits as appropriate • Outcome 7 Personal dignity: To keep your personal dignity and be respected by others 	
3. KEY FEATURES OF SELF-DIRECTED SUPPORT		
3.1	Self-directed support will not affect the claiming of benefits and it is not taxable	
3.2	<p>Those approaching the council for adult social care support will know at an early stage:</p> <ul style="list-style-type: none"> • if they are eligible for support • the amount of personal budget that will be available to them to meet their assessed needs (their 'indicative budget') • The level of any financial contribution that they will have to make. 	
3.3	The council has developed a transparent, accurate and reliable tool to calculate an eligible individual's indicative budget following an assessment of their needs – the Resource Allocation System (RAS). Resources will be allocated fairly to individuals on the basis of assessed eligible needs, regardless of gender, age, ethnicity, sexual orientation or impairment. The policy framework that determines the way in which this RAS allocates resources to individuals is set out in a separate document.	See RAS policy and procedure
3.4	<p>Individuals who are eligible for social care will take the lead - if necessary with support from family, friends, or professionals - in:</p> <ul style="list-style-type: none"> • drawing-up their Support Plan, which details what their needs are and what outcomes they wish to achieve in meeting those needs • Deciding whether they want to take full control of their personal budget in arranging for the provision of their own services, or whether they would like to identify a supporter, broker or the Council to manage this on their behalf. 	
3.5	Under the Self-directed support framework, if an adult is deemed to be potentially eligible for support (As determined by an initial assessment under FACS) The Initial Assessment Team (at present First Assessors) will undertake a Supported Assessment Questionnaire (SAQ).	

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	The Individual can then use their Personal Budget to meet their eligible assessed needs in accordance with a validated support plan	
3.6	Facilitation of support services that assist individuals and their carers reach personalised outcomes	
3.7	Facilitation of the development of a market offering individuals access to a choice of services and providers that enable them to benefit from more tailored support.	
3.8	Enabling individuals to have greater choice and control over their support can drive up the quality of support services and promote better use of resources.	
3.9	Prioritising prevention, early intervention and re-ablement promotes greater well-being and independence and can reduce the need for ongoing support.	
4. ELIGIBILITY		
4.1	In determining eligibility for adult social care services, Halton Borough Council adheres to the Government's Fair Access to Care Services guidance. Decisions about who should receive services are based on the assessed risks to the independence of individuals in both the immediate and longer term, if help not to be provided.	Fair Access to Care Services policy: Eligibility for Adult Care Services Revised March 2010
4.2	Risks are classified in four categories – critical, substantial, moderate, and low. Subject to paragraph 5.4 below, individuals in Halton are eligible to receive Self-directed support if risks to their independence are critical, substantial, or moderate. Individuals who face low risks are directed to other organisations and services that may be able to meet their needs.	
4.3	For new enquiries about social care support (other than Mental Health), the contact centre or Initial Assessment Team will assess if the individual is eligible. If not, information and signposting will be offered The Mental Health service will continue to receive referrals through the existing mental health pathway	
4.4	The Specialist Team/ Duty Officer will validate Supported Assessment Questionnaires to confirm level of need	
4.5	Usual judgements about, and response to, crisis will continue to be made. Personal Budgets will not usually be an appropriate response to a crisis situation. The following groups therefore will not be eligible to receive a personal budget: <ul style="list-style-type: none"> • People whose assessed needs require an emergency or crisis intervention. • People whose liberty to arrange their care is restricted by certain Mental Health or Criminal Justice legislation 	

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4.6	<p>Long term care in a care home can be provided under self-directed support, but only if the individual's financial contribution has been assessed under Charging for Residential Assessment Guidelines (CRAG). This is a legal requirement. Additionally, the individuals personal budget, for this purpose, must be accessed through a Council Managed Budget (Virtual budget)</p> <p>Individuals cannot use Direct Payments or a Direct Payment to a Suitable Person to purchase long-term residential or nursing care.</p>	

5. SEVEN STEPS TO SELF-DIRECTED SUPPORT

5.1	<p>The council has adopted a '7 steps' framework for implementing Self-directed support. This framework determines the process that is used by care managers in the local authority to support people to assess their own care needs and utilise available resources to meet them. The model comprises of the following seven components:</p> <ul style="list-style-type: none"> • Setting the indicative budget- The Resource Allocation System (RAS) has been developed locally from a national template and is used to allocate funds to eligible individuals. It matches the validated Supported Assessment Questionnaire to a level of budget based on historical spend in individuals with similar needs. • Planning the support- shows how available funds are to be used to meet identified needs and achieve the person's desired outcomes. • Agreeing the plan- Is the process a budget holding manager uses to agree the release of money for the personal budget. They must be able to see and agree a plan that is robust and meets set criteria. The mechanism for identifying the personal budget and the controls around them will be carefully documented. • Controlling the budget-Releasing the funds to the individual. • Organising the support - The individual chooses who they want to receive the payments, manage their personal budget, and help organise their support. • Living the life- The person gets on and lives their life, using the services they had identified in their Support Plan. • Reviewing the plan – Review arrangements are outcome focussed and take place at an agreed level that is proportionate to the assessed level of risk or triggered by a significant change in circumstances. 	<p>Many local authorities are adopting the in-Control system of self-directed support, which involves a seven step process for self-directed support-Appendix 3 provides a diagram of how the model operates</p> <p>The detail of these steps can be found in the Self-directed support procedures for Resource allocation, support planning and outcome focussed review</p> <p>Aim is that '....people are able to live their own lives as they wish, confident that services are of a high quality, are safe and promote their own individual requirements for independence well-being and dignity' LAC Para 7</p> <p>See Preparing for your Outcome Focussed Review booklet</p> <p>Decision making agreement and the</p>
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		outcome of Risk Enablement Panel will help inform different levels of scrutiny (including that of providers)
6. THE MANAGEMENT OF RISK		
6.1	<p>Self-directed support aims to ensure that people have the opportunity to live more fulfilling lives, and shift the balance of decision making from professionals to individual people with a focus on the outcomes they want to achieve.</p> <p>Individual people need to consider risks they may wish to take in their own lives; the ways in which they will manage them will be addressed during the assessment process and the development of their Support Plan.</p>	.
6.2	<p>Adult Services is sharing the management of risk with those individuals who have the capacity to take responsibility for their own lives. The Council will retain it's obligation to ensure that:</p> <ul style="list-style-type: none"> • Customer's eligible social care needs are being met • Safeguarding duties are full met • It is fulfilling its duty of care and broad statutory obligations • It is fulfilling its responsibility to ensure that public funds are used to enable customers to live independent and full lives 	
6.3	<p>Individuals may wish to do things that the council would previously have been reluctant to support. In enabling individual's to manage risks themselves, the council is committed to the following principles:</p> <ul style="list-style-type: none"> • a person's choice and control over their own lives must be promoted • Recognising that a person is an expert of their own situation • sometimes, a choice involves an element of risk • individual people and their family carers' rights must be promoted • people should understand their responsibilities and the implications of their choices, including the risks involved • it is neither possible nor desirable to eradicate all risk, and attempts to do so often result in a less fulfilling life 	<p>See SCIE report 36 Enabling Risk, ensuring safety :Self-directed support and Personal Budgets</p> <p>Recommends that all support for decision making in relation to self-directed support be in line with statutory principles of the Mental Capacity Act (2005). In summary they say: If someone has full mental capacity and is able to make their own decisions, then it is essential that they maintain control and that professionals support their decision-making at every stage (Mental Capacity Act 2005).</p>

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6.4	An individual who has the mental capacity to make a decision, and chooses voluntarily to live with a level of risk, is entitled to do so. Adult Services will ensure that such risk is fully understood and managed in a context of ensuring that the individual's needs and their best interests are safeguarded	
6.5	If there is an issue of the mental capacity of the individual to take control of their support, the care manager will need to carry out a best interest assessment to decide how self-directed support arrangements will operate. The issue to be addressed is how the person's support should be best controlled. This is not the same as how a personal budget is managed- people who have the capacity to control their support arrangements, but not to manage the financial/ technical details can be offered help with that whilst technically staying in control.	The Care Manager will recommend whether the individual with assistance take control themselves or whether a 'suitable person' who understands and is able to act on the individuals best interests. If neither is possible they may have to recommend an appropriate professional
6.6	This policy on Self-directed support promotes choice and the management of positive risk management, based on proportionality and realism. It is consistent with existing risk guidance, such as Positive Risk Taking, the Care Programme Approach (CPA) and that contained in Safeguarding Adults Interagency Policy, Procedures and Guidance 2010. It is also consistent with professional codes of behaviour and clinical practice guidelines.	Please refer to Positive Risk Taking guidance
6.7	The decision-making involved in the assessment of risk and its management is generally effective in avoiding harmful situations from arising. But it is not infallible. If harm occurs to a service user or others because of their actions, any practitioners, officers or agencies involved in the assessment or management of risk might need to defend the decisions they made and their reasoning.	A defensible decision is one where: -All reasonable steps have been taken to avoid harm -Reliable assessment methods have been used -Information has been collected and thoroughly evaluated -Decisions are recorded and subsequently carried out -Policies and procedures have been followed -Practitioners and their Managers adopt an investigative approach and are proactive -Regular reviews of

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		the decision are undertaken
6.8	To assist staff in delivering a consistent, evidence based approach to proportionate risk management, Adults' Services have provided a supported decision-making tool for staff to support individuals when making decisions with an implication of risk.	See guidance Halton Supported Decision tool In more complex circumstances and/or where there are substantial risk management issues, the Risk Enablement Panel will consider the robustness of the plan and whether amendment is required. In very exceptional circumstances, and on case by case basis the panel or Operational Director may reject the release of the Personal Budgets
6.9	Empowering people to take control of their own care and support can generate a perception of increased risk and adverse consequences, However, in reality there is likely to be a reduced risk because individuals have been consulted about their choices, are actively involved in decision-making and take ownership of, and some pride in, the responsibility for achieving their outcomes. Adult Services has introduced robust support mechanisms and access to independent advice and assistance as an integral part of self-directed support.	
7. CONSTRAINTS ON SPENDING THE BUDGET		
7.1	There are a number of conditions regarding the spending of personal budgets: The budget cannot be used to purchase permanent residential or nursing home care, or more than four weeks' respite in any 12 month period when successive periods of care are less than four weeks apart	
7.2	The budget can only be spent on services and activities that meet assessed social care needs	
7.3	The budget cannot be spent on services or activities that put the individual's health or safety at unacceptable risk, or that involve gambling or illegal activities	
7.4	The budget can only be used to provide support from somebody who lives in the recipient's household if there are specific and justifiable reasons	

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7.5	The budget cannot be used to purchase support that should be met through the person's personal income or welfare benefits, or that should be provided by another statutory body outside of the council (e.g. the NHS)	
8. FINANCIAL ASSESSMENT AND MAKING PAYMENT		
8.1	All individuals who have been identified as potential recipients of Self-directed support will be financially assessed under the council's Fairer Charging Policy in the same way as any other service user/carer. Full details of on how financial contributions are assessed are contained in the council's policy document: 'Fairer Charging for Non-Residential Services', April 2010 and any subsequent Fairer Charging document.	
8.2	Payments will be made in accordance with the council's financial procedures and usually every 4 weeks in advance. The exception to this will be in circumstances where payments are made to a Provider acting as broker on behalf of the individual, when payments will be made gross of the individual's assessed charge, in accordance with the usual financial procedures of the council and net of any client contribution.	
8.3	Payments will commence on a date agreed by all parties, subject to all the necessary paperwork being completed including the Support Plan. There is no provision for the backdating of a Self-directed support personal budget.	
8.4	Halton Borough Council operates a very successful and robust Direct Payments scheme that requires evidence that Individuals utilising Self-directed support comply with financial procedures and processes in relation to the monitoring of their use of their personal budget. For auditing purposes robust records will need to be maintained.	See Direct Payments Procedures and Practice Guidance for Direct Payments (Version 11) Please refer to the Direct Payments procedure detailed at 5.11 and (Appendix 15) include copies of all records, income expenditure record, receipts and timesheets
8.5	Where the individual chooses to manage all or part of the Personal Budget themselves, it will not be regarded as "income" for the purposes of taxation or benefits calculation, as it is relating to a support plan designed to meet identified social care needs.	
9. MONITORING AND REVIEWING THE SUPPORT PLAN		
9.1	Monitoring and review of the Support Plan and the quality of services being provided will be carried out in partnership with service users and their carers.	

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9.2	The Council has a statutory duty to review each individual support needs at least annually. Under Self-directed support the council undertakes a first review after 6 weeks to determine how the Plan is being implemented and whether changes need to be made. Reviews may be undertaken more frequently should this be necessary and this will be agreed and recorded in the Support Plan.	Intensity and frequency of review will be based on the level of risk .E.g. An individual with as high level of personal risk will have frequent and intense levels of review.
9.3	Particular attention will be paid at reviews to the monitoring of any personal budget over-spend/under-spend, as this may indicate an inability to manage the budget effectively or inaccuracies in the assessment of need. If a planned purchase has not happened and is still needed, then funds can be carried over to the next financial year providing it is spent in an agreed time. If, however, a higher level of payment has been made than is required to meet assessed needs, any excess is re-payable to the council.	
9.4	If there has been a significant change regarding an individual's care needs, the individual will be required to complete a new supported-assessment questionnaire and develop a revised Support Plan. Their personal budget will be adjusted if required.	

10. SUSPENSION OR WITHDRAWAL OF SELF-DIRECTED SUPPORT

10.1	<p>The council may suspend or withdraw Self-directed support in certain circumstances. Examples include:</p> <ul style="list-style-type: none"> • Where the council has specified that the recipient may not secure a service from a particular person or organisation, but the recipient continues to employ that person or organisation. The council would be likely to insist that a particular person was not employed where at least one of the following applied: <ul style="list-style-type: none"> – vetting has revealed offences or behaviour which would deem them unsuitable to work with vulnerable adults – the worker was known to child or adult protection agencies and is considered to be a risk – the person is identified by a relevant Government agency (e.g. POVA; POCA) which indicates unsuitability to work with vulnerable adults 	
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	<ul style="list-style-type: none"> • Failure to provide information for the effective monitoring of Self-directed support • Indications that the personal budget is not being utilised appropriately to meet the needs of service users and/or their carers. 	
10.2	In circumstances where the management of a personal budget is withdrawn, the person's individual needs will be re-assessed and a new Support Plan will be implemented to ensure that the person's independence and protection are promoted. This will involve services being provided, purchased or commissioned directly by the Council.	
11. SUPPORT IN VETTING POTENTIAL PROVIDERS OF CARE SERVICES		
11.1	Halton Borough Council is committed to promoting the safety of all vulnerable adults. It will ensure that recipients of Self-directed support are effectively supported in vetting all applicants for care positions, and it will fund Criminal Records Bureau (CRB) checks for personal assistants where they are employed directly by the individual in receipt of a personal budget.	
12. MANAGEMENT AND GOVERNANCE		
12.1	All aspects of Self-directed support will be managed in accordance with relevant Halton Borough Council policies and procedures, and financial regulations. Where an organisation is delivering aspects of Self-directed support on behalf of the council, clear contracts and service level agreements will be drawn up.	
12.2	There is a process for individuals who feel they have not been, or are no longer appropriately assessed.	Details of this process are detailed in the Protocol for Handling Social Care Complaints Comments and Compliments relating to Adults and Community and Children and Young People Directorates
13. PROCEDURES		
13.1	A comprehensive range of procedures has been developed to supplement this policy document and support the implementation of Self-Directed Support. These procedures comply with relevant council policies, and will be updated regularly in accordance with legislation, guidance, and best practice.	

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13.2	Appropriate training is made available to staff and other relevant parties to support effective implementation of this Self-directed support policy.	
14. CONCLUSION		
14.1	<p>This policy acknowledges that the council is implementing “A challenging agenda, which cannot be delivered by social care alone. To achieve this sort of transformation will mean working across the boundaries of social care such as housing, benefits, leisure, transport and health. It will mean working across the sector with partners from independent, voluntary and community organisations to ensure a strategic balance of investment in local services”</p> <p>It is recognised that learning from this experience of implementation will need to be reviewed and amended.</p>	Lac Jan 2008

APPENDIX 1 - SELF-DIRECTED SUPPORT IN ADULT SOCIAL CARE GLOSSARY OF TERMS

Advocate	<p>If you find it hard to speak up for yourself, you can get someone to help you to put your point across. This person is known as an advocate. Advocates will have undergone training, and will have special skills to support you appropriately.</p> <p>Advocates help people to become more aware of their rights, and to exercise these in order to be involved in, and influence, decisions that are made about them. An advocate could be a friend or a relative authorised to act and speak on your behalf, or a professional person who is trained as an advocate.</p>
Assessment of need (see Supported Assessment Questionnaire)	<p>This means finding out what your needs and wants are, and what may help you. Used to identify your social care and support needs and your eligibility for care and support through use of Fair Access to Care Services eligibility criteria. Most assessments are carried out by an assessing practitioner, and will involve you. The Government's Personalisation Agenda is encouraging greater self-assessment.</p>
Brokerage	<p>Someone who helps you arrange the services and support you need. Brokerage is a function designed specifically to help you gain access to the social care and support services they need. If a person is employed specifically to do this they become a 'Broker'.</p>
Broker	<p>Helps you to choose and arrange services for Self-Directed Support.</p>
Care Home	<p>A home registered with the Care Quality Commission (CQC) and providing nursing and/or personal support as well as living accommodation.</p>
Carer	<p>Someone of any age who regularly provides care and support for a relative, friend or neighbour. but is not employed to do so by an agency or other organisation. .</p>
Care Quality Commission	<p>The Care Quality Commission came into being on 1st April 2009. A regulation organisation that makes sure that health and adult social care services – in hospitals, care homes, in people's own homes or elsewhere – is of a high quality and safe. To find out more see www.cqc.org.uk</p>
Care Services Improvement Partnership	<p>An advisory body reporting to the Department of Health which supports positive implementation of care policy at local levels</p> <p>To find out more see www.csip.org.uk</p>
Citizenship	<p>The rights and responsibilities of being part of the community and involved in public life and affairs.</p>
Community Care	<p>Care or support provided by adult social care services, the NHS and other organisations to assist people in their day-to-day living.</p>
Contact centre	<p>The number for you to call if you want to ask questions about social care services, and find out what help you can get. The contact centre will make sure you get the information and services you need.</p>
Continuing Healthcare	<p>This is offered to people who have a primary need for healthcare. This is established after a specialist assessment which is NHS-led, but all the people involved in providing your care will be involved.</p>

Consent	This is a Legal agreement to a choice or action freely made by an individual without coercion, and acceptance of the responsibilities associated with that choice or action. Individuals must be 'mentally capable' of giving consent before it is valid.
Control	Having autonomy and power over your own life and what happens to you, regardless of how much support is needed to put these choices into action.
Critical Need (see Eligibility Criteria)	<p>A need is deemed critical when:</p> <ul style="list-style-type: none"> • life is, or will be threatened; and/or • significant health problems have developed; and/or • there is, or will be, little or no choice and control over vital aspects of the immediate environment; and/or • serious abuse or neglect has occurred or will occur; and/or • there is, or will be, an inability to carry out vital personal care or domestic routines; and/or • vital involvement in work, education or learning cannot or will not be sustained; and/or • vital social support systems and relationships cannot or will not be sustained; and/or <ul style="list-style-type: none"> • Vital family and other social roles and responsibilities cannot or will not be undertaken.
Dignity in Care	<p>Care that promotes and supports persons self respect.</p> <p>Launched in November 2006, the Dignity in Care Campaign aims to put dignity and respect at the heart of care services. With it's ten point charter the campaign aims to The campaign raises awareness, inspires local people to take action; share good practice and give impetus to positive innovation; transform services by supporting people and organisations in providing dignified services; Reward and recognise those people who make a difference and go that extra mile.</p> <p>To find out more see www.dhcarenetworks.org.uk</p>
Direct Payment	<p>Money paid to service users to enable them to arrange and be in control of the services chosen to meet their assessed needs.</p> <p>To find out more see www.dh.gov.uk</p>
Directly Commissioned Services	<p>Services supplied to service users by Halton Borough Council and its partners (with 5 Borough Partnership NHS Trust who are Halton Primary Care Trust, Halton and St Helens Primary Care Trust) who make the arrangements with the supplier or supply the service directly without the individual getting involved in the arrangements.</p> <p>An example is residential care.</p>
Disability	The loss or limitation of opportunities to take part in the normal life of the community as an equal to others due to physical, attitudinal and social barriers that exist in society.
Domiciliary care	Services provided to people at home to assist them to live independently in the community. Includes personal care, meals on wheels, domiciliary care, equipment and adaptation. Previously known as Home Care.

Eligibility Criteria (see Fair Access to Care Services; Critical Need; and Substantial Need)	<p>A part of your assessment to find out whether you can access a care and support service</p> <p>An assessment of an individual's support needs, that takes into consideration how serious a risk is to the individual's independence. By determining level of risk, the criteria provide a structure for determining an individual's eligibility for social care.</p> <p>When determining eligibility criteria, council's follow the Fair Access to Care Services guidance (see below). This is Government guidance to help councils to set out their eligibility criteria for Adult Social Care. Halton has set eligibility at the level of "substantial" and "critical" need.</p>
Empowerment	Having choice and control about how you want to live your life.
Extra Care	<p>Housing schemes with self-contained flats or bungalows, with on-site communal facilities, such as lounges, hairdressers, library services and laundry.</p> <p>Support staff are available 24-hours a day, and all flats have an emergency alarm system. The support provided will meet your individual needs.</p>
Fair Access to Care Services	<p>Social services have its own rules, or eligibility criteria, which we use to decide if you can get a service from us. This is known as Fair Access to Care Services (FACS). The Department of Health gives councils a framework for setting eligibility criteria for adult social care. It aims to achieve fairer and more consistent eligibility decisions across the country.</p> <p>To find out more see www.dh.gov.uk</p>
Fairer Charging for Care Services	<p>Department of Health guidance on how to design '<i>reasonable and fair</i>' charging policies for councils who decide to charge for non-residential services. Seeks to ensure greater consistency in charging policies across the country. To find out more see www.dh.gov.uk</p>
Financial assessment	An assessment of an individual's finances to identify how much they will be expected to contribute to the cost of their care and support services.
General Social Care Council (GSCC)	<p>A national organisation responsible for setting standards of conduct and practice for social care workers and their employers.</p> <p>To find out more see www.gsc.org.uk</p>
in Control	<p>Social enterprise set up to transform the current social care system into a system of Self-Directed Support. It helps people get real choice and control over their lives and is supporting local authorities to deliver Self-Directed Support. There are currently 122 local authority members all working to change their systems. In Control overseas the national 'in Control Total' programme. For more information see www.in-control.org.uk</p>
Independent Living Fund	<p>Charitable trust that administers money provided by the Government to support the cost of disabled people who need substantial assistance to live in the community. For more information see www.ilf.org.uk</p>
Independent sector	All organisations delivering care and support, including a wide range of private companies and voluntary organisations, who are not working for the council or NHS

Indicative budget (see also Resource Allocation System)	The amount of funding that can be made available to meet an individual's social care and support needs. The amount is identified through use of a Resource Allocation System (RAS). This is different from the Personal Budget which is the final agreed amount of funding based on the preparation for their Support Plan. We do not currently have arrangements in place to deal with multiple funding streams. Also the Government in their National Indicator (NI130) are judging councils on their use of Personal budgets and not Individual Budgets. For these reasons we will focus on personal budgets and not the term Individual Budget
Indirect Payment	Money paid to a service user's trust fund. The trustees use this to arrange the services the individual has chosen to meet their assessed needs.
Individual Budget (see also Personal Budget)	<p>Designed to bring about independence and choice for people receiving care or support. It is a transparent allocation of resources incorporating different funding streams including; Council provided Social care services, Independent Living Fund, Supporting People, Disabled Facilities grant, Integrated Community Equipment services and Access to Work</p> <p>A pilot programme involving 13 sites carried out a series of pilots to see if income streams could be wrapped around individuals. The Ibsen Report, an evaluation of the pilots, is available to download from www.dh.gov.uk</p>
Individual Service Fund (ISF)	<p>Used by Halton Borough Council to commission services from a service provider on behalf of individual service users.</p> <p><i>The individual's Personal Budget remains with the Council, but they are as involved as they want to be in the commissioning of services – for example helping to choose an agency or staff member, and deciding on review participants. The service provider's agreement is with the individual but with the Council listed as a third party.</i></p> <p>It is possible to have a mixed agreement, with the individual managing part of their Personal Budget as a Direct Payment, and the rest used as an ISF.</p>
Interpreter	Someone who translates so that you are able to put your point across. An interpreter not only translates languages, but also supports people with sensory impairments, for example, providing sign language services.
Mental capacity	The Mental Capacity Act says "a person must be assumed to have the capacity to make decisions for themselves unless it is established that they lack capacity". This means people must have an assessment of their capacity before decisions can be made on their behalf. To find out more see www.dca.gov.uk/menincap/legis.htm
Our Health, Our Care, Our Say	<p>This is the government document, called a White Paper, which sets a new direction for the whole health and social care system. There will be a major shift in the way in which services are delivered, to make sure they are more personalised, and that they fit into people's busy lives.</p> <p>To find out more see www.dh.gov.uk</p>
Outcome	The changes, benefits or other results that happen as a result of provision of social care and support.
Outcome-based Planning	A way for care managers and others to help individuals to work out what social care support they need. Instead of telling the individual they need a particular service, an outcome is agreed that will help them. An outcome might be something like "get out and see more people" or "stay fit and healthy". Individuals can then work out a Support Plan of how best to reach the outcome

that will help them.

Person-centred Planning

This puts people at the centre of planning for their lives. It is about:

- listening to and learning about what people want from their lives
- helping people to think about what they want now and in the future
- Family, friends, professionals and services working together with the person to make this happen.

Person-centred Planning helps people to think about what they want from their lives, their dreams and wishes, and helps them to feel more confident and good about themselves. It helps the people in their lives work together to solve problems, and helps service providers to understand how they can support people in the way that they want.

Personal Assistant

A support worker employed by an individual using Direct Payments to support them with their social care needs.

Personal Budget

The actual amount of money Adult Social Care will make available to meet a service users social care needs as identified in an assessment. Adult Social Care will undertake an assessment of the Service Users financial circumstances to work out if they should contribute towards their personal budget. The personal budget is confirmed once a support plan has been approved by Adult Social Care. The personal budget can be used to purchase a range of services through a Direct Payment or through services arranged by Adult Social Care – or a combination of the two. The personal budget can be used for community based services and not for care in residential or nursing homes.

Person centred Care planning

This puts people needing support at the centre of planning for their lives. It is based on listening to people to find out what is most important to them and what they want from their lives.

Personal contributions

Contribution by the service user towards the cost of the support they receive. The amount an individual must contribute toward the cost of their support is determined by a financial assessment.

Personalisation (see also Putting People First and Our Care, Our Health, Our Say) Positive Risk Taking

Government led agenda to ensure that every person who receives support, whether provided by statutory services or funded by themselves, will have choice and control over the shape of that support in all care settings.

Allows individuals to take control over their own lives by weighing up the potential benefits and harms of exercising one choice of action over another. Halton's policy is to give people the support they need to take the risks they want and to make informed choices.

Preventative services

Advice, support and practical help so that individuals can continue to live their daily life as normal. The services help prevent people reaching crisis point and help prevent the deterioration of their health or situation.

Primary Care Trust (PCT)

This is a statutory (legal) body responsible for delivering health care to local communities through GPs, community nursing staff and other primary care staff.

Halton Borough Council works in partnership with 5 Borough Partnership NHS Trust who are Halton Primary Care Trust. Halton and St Helens Primary Care Trust www.haltonandsthelenspct.nhs.uk

Putting People First	A shared vision and commitment to the transformation of Adult Social Care. This landmark protocol seeks to set out and support the Government's commitment to independent living for all adults and has a concordat signed by key organisations including: central government; local government; professional leadership; providers and the social care regulator. Putting People First recognises that sustained and meaningful change depends on empowering the people who use services. For a copy of the document and more information see www.dh.gov.uk
Re-ablement services	Short-term help while you recover from a trauma, such as a stroke or bereavement and are finding it hard to manage at home.
Resource Allocation System (RAS) (see also Support Questionnaire)	The system by which money is allocated from available Adult Social Care funding, according to set criteria, to contribute to a service user's Personal Budget. Based on a series of questions individuals are asked in a Supported assessment Questionnaire. The RAS is part of the assessment of need process.
Respect	Objective, unbiased regard for the rights, values, beliefs and property of the individual.
Risk (see also Positive risk taking)	The government's personalisation agenda is about enabling people to manage their own risk through making informed choices.
Risk Enablement Panel (REP)	<p>Risk enablement panel will support, guide and give direction to staff in the event of complex risk situations, where the risk to independence is balanced (with the risk of not 'supporting choice') with high level repercussions, minimised and managed to protect the safety of Service Users and staff.</p> <p>The panel can be called at any stage if there are exceptional circumstances. It is made up of representatives from Social care and health. REP should share decision making in a transparent way.</p> <p>REP Ensures that no individual is left to make a difficult decision and that the Local Authority can demonstrate it has fulfilled its duty of care.</p> <p>REP exists to ensure agreement in risk decision making, and to use resources creatively and flexibly to respond to complex needs. It is also in place to ensure a consistent approach to managing complex risk decision making.</p>
Self-assessment (see also Supported assessment Questionnaire)	The Government's Personalisation Agenda is encouraging greater use of self-assessment where individuals are able to identify their own needs and eligibility for support. Halton is currently implementing a system of supported assessment where the individual is supported to complete the assessment with a Social Care or Health practitioner.
Self-determination (see also Mental Capacity)	An individual's right to make their own decisions with support or representation where needed.
Self-Directed Support	<p>Social care support which service users choose, organise and control (with support if needed) to meet their agreed needs in a way that suits them, using resources available to them to achieve what is important to them.</p> <p>For several years Halton Borough Council has advocated for Self-directed support through the use of Direct Payments. This has been extended to offer people personal budgets and from 4th October 2010 all new Service Users and those undertaking a review will be offered a personal budget for their social care and support.</p>

Substantial Need (see Eligibility Criteria)	<p>A need is deemed substantial when:</p> <ul style="list-style-type: none"> • there is, or will be, only partial choice and control over immediate environment; and/or • abuse or neglect has occurred or will occur; and/or • there is, or will be, an inability to carry out the majority of personal care or domestic routines; and/or • involvement in many aspects of work, education or learning cannot or will not be sustained; and/or • the majority of social support systems and relationships cannot or will not be sustained; and/or • The majority of family and other social roles and responsibilities cannot or will not be undertaken.
Supported Living	<p>Provides people with support to meet their needs and to live as independently as possible within their own homes. This could be as a tenant or within a sheltered housing scheme or in a shared tenancy</p>
Support Plan	<p>The name for the plan that shows how someone's personal budget will be spent. This plan is developed by the Service User (with help if needed) to show how they can use funding from Adult Social Care and other resources to meet their assessed needs. It is agreed by the by the Care Manager and authorised by a senior manager or Risk Enablement panel. The Support Plan describes how the individual plans to use the resources available to them to achieve outcomes that are important to them. An outcome might be something like "get out and see more people" or "go for a walk to stay fit and healthy". Support Plans are owned by the individual, but can be written by the service user, a member of their family, or someone else close to them who knows them well. If it is needed the Care Manager or another third party can provide help.</p> <p>The Service User will be made aware of their indicative amount and have a copy of their supported assessment questionnaire before they start work on their support plan.</p>
Supported assessment Questionnaire (SAQ)	<p>Part of the Resource Allocation System (RAS). Designed as an easy-to-use, user-friendly form that people are able to complete themselves. The questionnaire is divided into sections that ask a series of questions that enable the individual to state what their needs are.</p> <p>The completed Support Questionnaire is verified by the Council and its partners and used to determine the individual's Personal Budget.</p>
Supporting People	<p>Government programme funding housing-related services for vulnerable people which complement existing care services. See www.spkweb.org.uk</p>
Transformation	<p>A move towards a total transformation of social care, which includes changes to systems, processes, structure and culture.</p> <p>The transformation of social care was signalled in the Department of Health's social care Green Paper, <i>Independence, Well-being and Choice</i> (2005), reinforced in the White Paper, <i>Our health, our care, our say: a new direction for community services</i> in 2006 and confirmed in the landmark 'Putting People First' Concordat in December 2007.</p> <p>The Transformation of Social Care is about putting people in control of their social care support, as far as is possible. A major aspect of this in Halton is the introduction of Self-Directed Support and Personal Budgets through the 'in Control Total' programme.</p>

See Local Authority Circular LAC(DH) 2008: 1 Transforming Social Care which can be found at www.dh.gov.uk

Trust Fund

A legally set up body to receive and administer Direct Payments on behalf of a service user. The service user will in effect receive an indirect payment.

Universal services

Services provided for the whole community, including education and health, housing, leisure facilities and transport.

Valuing People

Government policy on how services for people with learning disabilities can be improved so that they can lead as independent a life as possible.

To find out more see www.valuingpeople.gov.uk

**Voluntary and
Community sector**





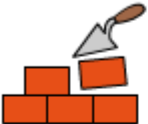


An 'umbrella term' for national or locally run charities and non-charitable non-profit organisations and community groups, to provide help and support to the group of people they exist to serve. They may employ staff or rely on volunteers.

(The voluntary and community sector is also often called the third sector.)

APPENDIX 2 - IN-CONTROL MODEL

Many local authorities are adopting the in-Control system of self-directed support, which involves a seven step process for self-directed support. The person can decide what degree of control they would like to take over their funding and support. They could receive help with the process from family, friends, care managers, independent brokers or others.

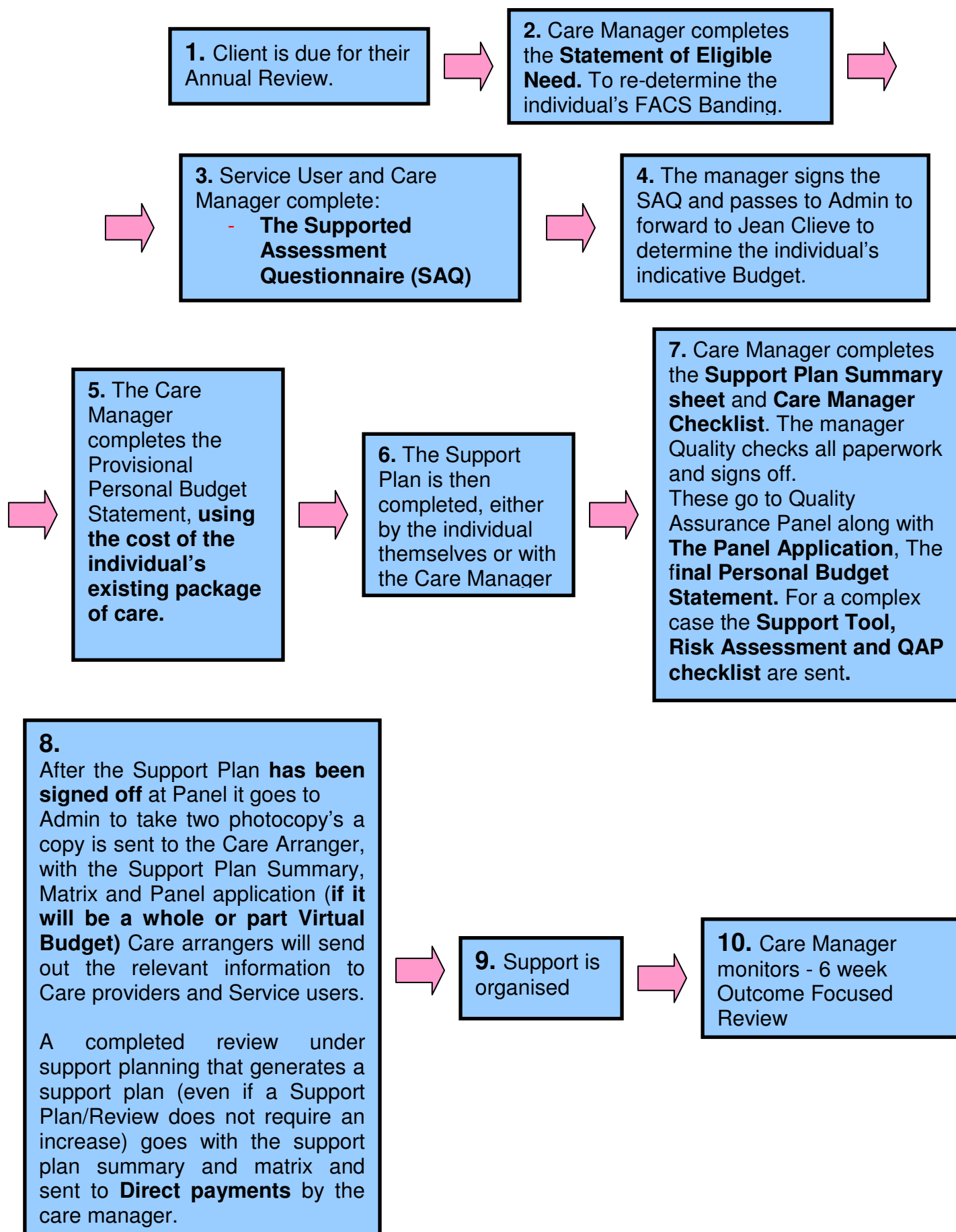
The in-control system for self-directed support

	1. Set personalised budget	The person finds out how much funding they will be entitled to.
	2. Plan support	The person, or family, independent broker or care manager, works out how to best use that money to meet their needs in a way that suits them best.
	3. Agree plan	The person checks out their assessment and support plan with the local authority or any other funding provider.
	4. Manage personalised budget	The person decides on the best way to manage their personalised budget - manage it themselves; have a representative; set up a trust; pay an independent broker; use the care manager; or direct to the service provider.
	5. Organise support	The person organises the housing, help, equipment or other kinds of things they want.
	6. Live life	The person uses that support, in a flexible way with as few restrictions as possible, to live a full life with family and friends in the community.
	7. Review and learn	The person along with care manager checks how things are going and makes changes if needed.

Source: in-Control

APPENDIX 3 - SELF-DIRECTED SUPPORT PATHWAY

SDS PROCESS – Existing Client



Additional Guidance Notes – Existing Clients Process

Refer to **FACS Criteria Sheet** for help with determining FACS banding level

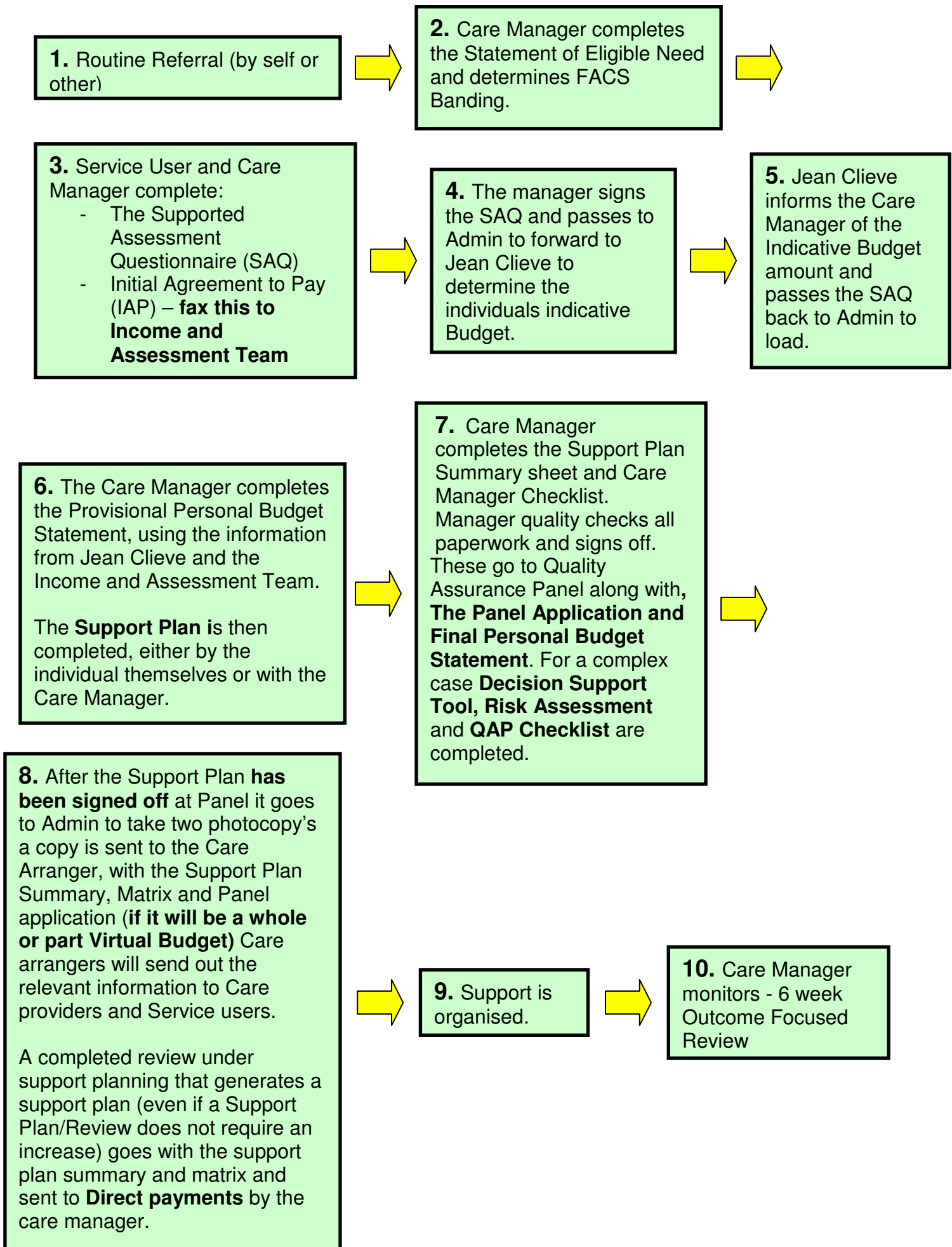
- Refer to the **Supported Assessment Questionnaire Guidance Notes** for full guidance on completing the SAQ.
- Welfare Rights Team – email form to welfare.rights@halton.gov.uk Tel – 01928 704592 (Fairer Charging)
- Currently for existing Clients, the Indicative Budget will be the amount of the existing package of care. The SAQ still requires completing and sending to Jean Clieve.

There are a number of Halton documents available to help with the process of Support Planning:

- What needs to be in a Support Plan? (*Gives detail around the 7 essential criteria*)
- Making Your Support Plan (*Developed to guide the individual through developing their own Support Plan*)
- Guidance Notes for Support Planners (*Advice for Care Managers, e.g. communication techniques*)
- Guidance Notes for completing the Support Plan Summary

Care Managers can also refer to the **Self Directed Support Resource Pack** for hints and tips – a copy of this is held by each Social Care team.

SDS PROCESS – New Client



Additional Guidance Notes – New Clients Process

Refer to **FACS Criteria Sheet** for help with determining FACS banding level

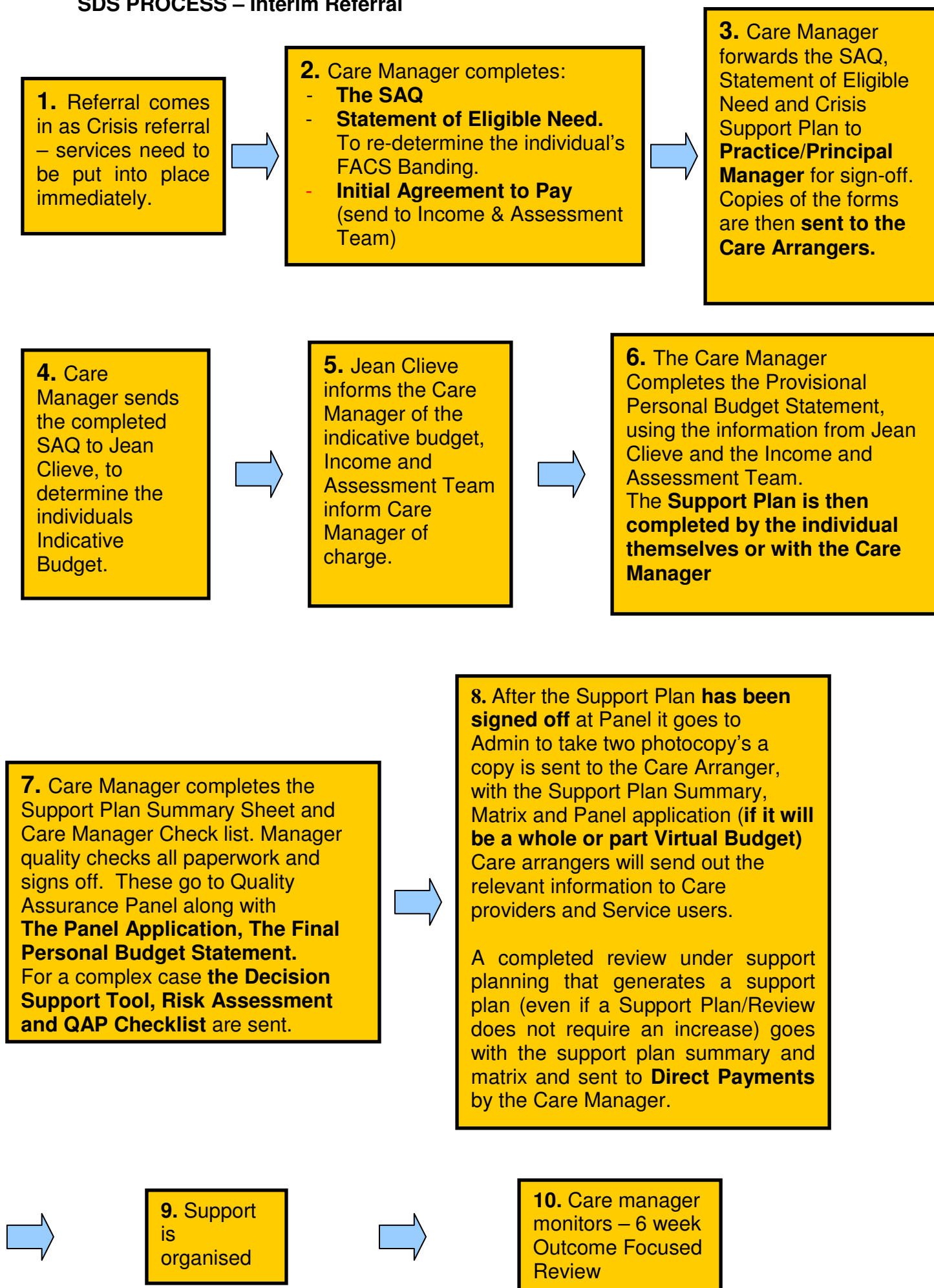
- Refer to the **Supported Assessment Questionnaire Guidance Notes** for full guidance on completing the SAQ.
- Income and Assessment Team: Fax – 0151 471 7308 / Tel – 01928 704328/4319
- Welfare Rights Team – email form to welfare.rights@halton.gov.uk Tel – 01928 704592 (Fairer Charging)

There are a number of Halton documents available to help with the process of Support Planning:

- **What needs to be in a Support Plan?** (*Gives detail around the 7 essential criteria*)
- **Making Your Support Plan** (*Developed to guide the individual through developing their own Support Plan*)
- **Guidance Notes for Support Planners** (*Advice for Care Managers, e.g. communication techniques*)
- **Guidance Notes for completing the Support Plan Summary**

Care Managers can also refer to the **Self Directed Support Resource Pack** for hints and tips – a copy of this is held by each Social Care team.

SDS PROCESS – Interim Referral



Additional Guidance Notes – Interim Referral Process

- Refer to **FACS Criteria Sheet** for help with determining FACS banding level
- The **Interim Support Plan** is a separate document, to be filled out in this instance until a Full Support Plan can be completed
- Refer to the **Supported Assessment Questionnaire Guidance Notes** for full guidance on completing the SAQ.
- Income and Assessment Team: Fax – 0151 471 7308 / Tel – 01928 704328/4319
- Welfare Rights Team – email form to welfare.rights@halton.gov.uk Tel – 01928 704592 (Fairer Charging)

The Crisis Support Plan does not go to Panel – instead it is signed off by Practice/Principal Manager until it is changed to a Full Support Plan (See 7) when it will be required to go to the Quality Assurance Panel.

There are a number of Halton documents available to help with the process of Support Planning:

What needs to be in a Support Plan? (*Gives detail around the 7 essential criteria*)

Making Your Support Plan (*Developed to guide the individual through developing their own Support Plan*)

Guidance Notes for Support Planners (*Advice for Care Managers, e.g. communication techniques*)

Guidance Notes for completing the Support Plan Summary

Care Managers can also refer to the **Self Directed Support Resource Pack** for hints and tips – a copy of this is held by each Social Care team.

APPENDIX 4. PUTTING PEOPLE FIRST IN HALTON

Self Directed Support

MY PERSONAL BUDGET AND HOW I CAN MEET MY ASSESSED ELIGIBLE NEEDS IN HALTON – THE HALTON CHOICE MATRIX

Options	What does it mean?	What choice does it give me?	What control does it give me?	What will I be responsible for?	Who might choose this option?
Services Arranged by Individual					
Direct Payment	You receive your personal budget directly into a bank account which has been set up by you specifically for your payment. This can include an element for a single item or piece of equipment	It gives you choice about how your money is spent, as long as it meets your needs identified in your assessment and agreed in your support plan. It can be used to employ a personal assistant, or purchase support through a service provider. You can club together with other people who want support for the same type of thing to buy support for you all. It is a flexible way of receiving your budget and gives you a wide choice.	You will be able to fully control the provision and delivery of your services to meet your assessed needs flexibly within the boundaries of your agreement and support plan. You can also choose which item you buy to suit your particular needs	While it gives you maximum control you also have the responsibilities that come with managing a budget and becoming an employer if you choose to employ a personal assistant. You will have to agree a contract with a service provider and keep to the terms . You are responsible for researching the cost and appropriateness of any single item and for maintaining it once it is bought. You will also be responsible for monitoring your budget and supplying information to the council on how it has been used.	People who want to arrange services for themselves and are confident in dealing with money management and the employment of their own staff. Also people who want to be in control of choosing their own organisation, personal assistant or service provider.
Representative Payment	A suitable person, usually a close family member or friend manages your money and arranges your service provision and your personal budget will be paid to them.	This gives the same choice as you would get from a Direct Payment except is your suitable person who organises everything provided the services that are chosen meet your assessed needs regardless of your ability to retain the capacity to make the choice to have this method of delivery	Your representative will be able to fully control the provision and delivery of your services through your in order to meet your assessed needs flexibly within the boundaries of your agreement and support plan	While it gives your representative maximum control they will have to be prepared to take on the responsibilities that come with managing a budget and becoming an employer if they choose to employ a personal assistant or contract with a service provider.	People who want to arrange services for themselves but do not have the capacity to consent to a Direct Payment. Instead, they have a suitable person that they can trust to represent them on these matters.
Council Arranged Services					
In House Services/ Commissioned Services	After finding out your personal budget allocation you can choose for the Council to arrange your service provision either in house or by contracting with a provider of services on your behalf	You have some choice about what services or agencies are used to meet your needs and still have choice about how those needs are met in the support plan. However, your choice will be limited to a menu of providers held by the Council.	The Council contracts services on your behalf therefore you could only choose those agencies or services which the Council already commissions or who succeed in becoming commissioned by the Council or in house services.	You will be responsible for assisting with your support plan and you can choose your services from the Council menu but you will not need to worry about money management, contracting or employing people.	May be suitable for people who want some choice about how their services are delivered but do not want responsibility of contracting or employing agencies or staff. It is also an option for people who have fluctuating abilities and may not always have the capacity to manage on a day to day basis
Mixed Package	You can also choose a mixed package of commissioned services AND a direct payment for different elements of your care and support.	You have choice about what elements of your care and support could be through commissioned services but can take some of your personal budget as a direct payment to give you more choice	It gives you a range of choice and control in the delivery of your services	You have more control but also have responsibilities for managing the budget for the elements which you choose as a direct payment.	May be suitable for people who want some control but do not want all of their services to be arranged in this way
Options in Development for Commissioned Services					
Individualised Service Fund	The money is given to a service provider to manage for you.	This allows you to shape the services that you want to receive from a provider without needing to deal with the management of finances yourself. It allows you to tailor a bespoke service with the provider.	Within the provider's services you will have full control and flexibility but you will not be dealing with the management of your budget allocation.	You will not be responsible for contracting with the agency or provider but will be required to agree your service provision to meet your assessed needs and your must sign an agreement that you wish to use this option to meet your assessed needs	This will be appropriate where you want to shape your service provision with a specific provider (usually because you have particularly complex needs) but do not want to deal with the money management or contracting issues.
Indirect Payment	The money is given to a third party – agency, organisation or broker – to manage for you.	You can nominate a third party to receive your personal budget provided you have capacity to do so. You can then direct them as to how you want your budget to be spent to meet your assessed needs.	You will be in control of how you direct your budget to be spent and which services you receive.	You will be responsible for ensuring that your budget is spent to meet your assessed needs by monitoring the third party. The third party will manage the money.	May be an option for people who have limited capacity or fluctuating abilities but would like to nominate a third party organisation to manage the money and assist in selecting their services.