

**PUTTING YOU FIRST**  
**SELF DIRECTED SUPPORT/RESOURCE**  
**ALLOCATION SYSTEM/POLICY AND PROCEDURE**

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## INFORMATION SHEET

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<b>Target audience</b>	Operational Managers and practitioners especially those involved in assessment, support planning, Care Management review and financial procedures for individuals in relation to Self-directed support in Adult Social Care
<b>Date of committee/SMT decision</b>	Directorate SMT & Date
<b>Related document(s)</b>	<ul style="list-style-type: none"> <li>• Adults &amp; Community Directorate's Business Plan 2010-2013</li> <li>• Care Management Practice Manual</li> <li>• Adult Services Self-directed support procedures</li> <li>• Direct Payments Procedures and Practice Guidance for Direct Payments (Version 11)</li> <li>• Safeguarding Adults</li> <li>• Mental Capacity Act Overall policy Feb 2010</li> <li>• Section 117 policy, Mental Health Act 2003</li> <li>• Deprivation of liberty and mental capacity: guidance note</li> <li>• Fair Access to Care Services policy March 21010</li> </ul>
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# Putting You First

## SDS Resource Allocation System RAS Policy and Procedure

	<b>POLICY STATEMENT</b>	<b>Practice</b>
1	<b>INTRODUCTION</b>	
1.1	<p>Halton is transforming its social care services through the implementation of a Self- Directed Support (SDS) model of support provision.</p> <p>Under SDS all people who are eligible for council social care funding will be advised up front of the funds the council will make available for their support. Halton Borough Council (HBC) has a duty to facilitate the provision of social care services to those individuals who qualify under its eligibility criteria. This is defined by the criteria under Fair Access to Care Services (FACS). The threshold for eligibility will be that set from time to time by the authority in line with the Fair Access to Services Guidelines</p> <p>In 2006 the Government initiated an Individual Budgets Pilot Project it encouraged the national development of individual budgets utilising a SDS model. This pilot provided valuable information which was used in Halton to develop a Resource Allocation System (RAS) tailored to meet the specific needs of Halton service users. The RAS was trialled and refined in Halton from late 2009 until November 2010 to ensure that it reflected levels of need appropriately and set the resource allocation at the right level for Halton.</p> <p>The RAS supports the overarching policy objectives of the Governments Putting People First policy which are to promote the independence, health and wellbeing of individuals while improving their choice and control over the support they receive.</p> <p>The RAS is the system by which an <i>indicative</i> personal budget is calculated for eligible Individuals who are exercising their right to SDS. It does so by translating support needs into a resource budget. The purpose of the system is to provide an equitable and transparent way of allocating resources, and is based on a supported assessment of an individual’s support needs, the eligibility of those needs and the availability of resources to meet those needs. Within this process individuals are active partners.</p>	<p><b><u>Directorate’s vision</u></b></p> <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"> <li>-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</li> <li>-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</li> <li>-Create a quality driven customer focused and efficient model which enables partners to support adults in need in Halton</li> <li>-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”</li> </ul>

	<p>Resources will be allocated fairly to individuals on the basis of assessed eligible needs, regardless of gender, age, ethnicity, sexual orientation or impairment.</p> <p>This new system is an opportunity for allowing the individual to have more flexibility about how the money is spent. The Personal Budget can be taken as an in-house provision, commissioned services, or Direct Payments (or any combination) where individuals take their budget as a Direct Payment then they will have greater choice and control in how they spend their money.</p> <p>The emphasis will be on improving outcomes for individuals rather than be prescriptive about what people can spend their money on. People will continue to find ways of achieving outcomes that will challenge our normal perceptions of what is possible and we must remember that a Personal Budget allocation is to be used to meet the eligible social care needs of an individual.</p> <p>The funding included in Personal Budgets is subject to review by the council, which may change as needs increase or decrease.</p>	<p>SDS Policy Nov 2010</p> <p>See Fair Access to Care Services policy: Eligibility for Adult Care Services Revised March 2010</p> <p>The RAS process empowers individuals to be innovators and investors in their own assessment and support. Processes are simpler and easier to use and more efficient, avoiding duplication of tasks and unnecessary time delays</p>
	<b>Legislation and guidance</b>	
1.2	<p>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.</p> <p>The Putting People First Concordat of Government Departments and other stakeholders require the Transformation of Adult Social Care to a system that's approach is personalised. In order to achieve this Transformation the Government has planned a whole system change to one of SDS. Within this system, the Government sees the introduction of Personal Budgets as a key building block to achieve SDS.</p>	Detailed Legislation and guidance context is detailed in Self-Directed Support policy
1.3	<p>The Government, through the Department of Health, sets the strategic direction of adult health and community wellbeing in England and provides the legal and policy framework and funding to local authorities to enable them to operate effective services. While Government sets the strategic direction, it does not have direct responsibility for delivering services. HBC has responsibility for meeting local adult health and community wellbeing needs</p> <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>	

**Human Rights Act (1998)** including  
Article 8 Right to respect for private and family life  
Article 14 Prohibition of discrimination

The **Carers (Recognition and Services) Act (1995)**  
Provides for the assessment of the ability of carers to provide care; and for connected purposes

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

**The Local Government Act 2000**  
Defines powers of Well-Being

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

- Fair Access to Care (FACS) – Guidance (March 2010), 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

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.

**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.

**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.	
	<b>Principles and values</b>	
1.4	<ul style="list-style-type: none"> <li>▪ Ensuring that the Council is meeting the eligible needs of Individuals by modelling the RAS in accordance with the FACS criteria.</li> <li>▪ Providing the Individual with more control in the process of assessing their needs.</li> <li>▪ Allowing available resources to be fairly allocated in a transparent way to individuals on the basis of assessed eligible needs, regardless of gender, age, ethnicity or impairment.</li> <li>▪ Enabling a personalised response to need by providing individuals with an indicative personal budget within which they can plan to meet their assessed eligible needs.</li> <li>▪ Facilitating the Council to monitor and manage the resources available in accordance with its financial and budgetary responsibilities.</li> </ul>	
2	<b>KEY OUTCOMES</b>	
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> <p><b>Outcome 1</b> –The allocation of available resources to be allocated fairly and services delivered, in a consistent and transparent way.</p> <p><b>Outcome 2</b> – To have maximum choice and control</p>	<p>Liberal Democrat Minister for Care Paul Burstow said: "What we're going to be saying is that it's not about spending more money. It's about focusing on what matters. If they want to spend £350 on a laptop and that allows them to reconnect with their friends if they have a disability and have not been able to leave the house – we recognise it's the small things which make a huge difference." The Guardian 21/09/10</p>
3	<b>SCOPE AND EXCLUSIONS</b>	
3.1	In HBC, SDS 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.	
3.2	This policy and procedure applies to all new people accessing Adult Social Care in Halton who have been assessed as eligible to receive services. Individuals in	



	receipt of services prior to the launch date for SDS will be offered RAS at the time of service review. The RAS has been implemented through a controlled programme across all operational services.	
3.3	<p>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:</p> <ul style="list-style-type: none"> <li>• A person who's assessed needs require an emergency or crisis intervention.</li> <li>• People whose liberty to arrange their care is restricted by certain Mental Health or Criminal Justice legislation</li> </ul>	'Personal budgets for everyone eligible for publicly funded adult social care support other than in circumstances where people require emergency access to provision. Lord Darzi's recent NHS next stage review interim report suggested that in the future personal budgets for people with long term conditions could include NHS resources' Putting People First P3
3.4	<p>Direct payments are intended to support independent living and, as such, they cannot be used to pay for adults to live for the long term in residential care. They can be made to enable people to purchase for themselves a short stay in residential care, provided that the stay does not exceed a period of four consecutive weeks in any 12-month period</p> <p>People who are living in care homes may receive direct payments in relation to non-residential care services. For example, they may have temporary access to direct payments to try out independent living arrangements before making a commitment to moving out of their care home. Direct payments can also be used by people living in care homes to take part in day-time activities. This can be particularly empowering for young people in transition.</p> <p>The individual's financial contribution for residential care will be assessed under Charging for Residential Assessment Guidelines (CRAG). This is a legal requirement. Additionally, the individual's personal budget, for this purpose, must be accessed through a Council Managed Budget (Virtual budget).</p>	Individuals needing long term care will follow the self directed support model but will receive a <i>virtual</i> budget
3.5	<p>Personal budgets cannot be used, managed or deployed in a way that is:</p> <ul style="list-style-type: none"> <li>• Illegal;</li> <li>• Spent on services or activities that put the individual's health or safety at unacceptable risk;</li> <li>• Involve gambling or illegal activities; and</li> <li>• 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</li> </ul>	

	<p>outside of the council (e.g. the NHS).</p> <p>Personal Budgets cannot be used to pay for things that their entitled benefits or allowance have been given to purchase. For example, when the individual is awarded High rate mobility allowance and has purchased a mobility car. A Personal Budget cannot be used to help purchase a car, provide repairs to a car or travel costs.</p> <p>Personal Budgets should not pay for things that other sources of income would normally pay for. For example, food bills, utility bills, rent, mortgage repayments, sexual service, cigarettes or alcohol. A Personal Budget should not be used to compensate for the lack of income received by individuals. It should be used to enable individuals to receive support in their home or community.</p>	
3.6	<p>The council has issued a number of policies and practice guidelines that govern the administration of adult health and community wellbeing in Halton, of which this policy and procedure forms a part. These documents complement the policy documents that have been released by central government which set out the guiding principles and objectives to be fulfilled by the model of SDS.</p>	
3.7	<p>This policy and procedure provides the framework for the way in which the RAS will allocate resources to the individual to meet their eligible assessed needs. It includes the pathway, authorisation and guidance on what the financial allocation of a Personal Budget can be spent on.</p> <p>In carrying out their budgetary responsibilities, the managers who operate the RAS do so in accordance with financial procedures and processes as laid down by Halton Borough Council.</p>	
3.8	<p>This document will be reviewed and updated as we gain experience and develop understanding of how Individuals utilise their budgets.</p>	
4	<p><b>PROCEDURE</b></p>	
4.1	<p>The 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 (SAQ) to a level of budget based on historical spend in individuals with similar needs. It comprises of three main components</p> <ul style="list-style-type: none"> <li>• A SAQ that seeks to identify an Individuals support needs and is used in a supportive way as part of the community care assessment;</li> <li>• A points allocation system which translates needs into points to reflect the relative scale of these needs; and</li> <li>• A 'pounds per point' calculation that converts the</li> </ul>	

	points into a sum of money, known as the indicative personal budget.	
4.2	It is the indicative personal budget which allows Individuals to plan the support that will deliver the outcomes to best meet their identified needs. The RAS does not generate an absolute amount. Rather, it provides an indication of the resources an individual may need to meet the cost of addressing their assessed eligible needs. It is the support planning and validation process which determines the final allocation or personal budget.	See the Support Planning procedure and guidance
5	<p><b>ASSESSMENT</b></p> <p>At this stage the individual will take part in an assessment, including those to determine the resources available for support. The assessment process (including the process for carers) determines eligibility and the calculation of an indicative budget amount through the use of the Council's RAS and SAQ.</p>	<p>The Care Management and Assessment process at this stage reflect s the principles of Self-Directed Support</p> <p>The Council is working towards a common assessment process which incorporates resource allocation and self assessment tools which will be aligned with existing or partner tools including Common Assessment Framework, Single Assessment process and CPA and CHC</p>
5.1	<p><b>Initial contact assessment</b></p> <p>The first step is where the person or someone close to them first makes contact with the adult social care team. There are a various channels through which people will make contact.</p> <ul style="list-style-type: none"> <li>• Initial Assessment Team</li> <li>• Contact centre</li> <li>• Duty officer on each operational team</li> <li>• On-line referral requests</li> </ul> <p>The Mental Health service will continue to receive referrals as above and via the traditional Mental Health pathway</p> <ul style="list-style-type: none"> <li>• Single Point of Access</li> <li>• GP</li> <li>• Mental Health professional</li> </ul>	<p>The council's screening process Personal Information Record is based on best practice and bears in mind that almost all adults only approach the social care services for support when they feel they need to. Some individuals at screening will be identified referred to preventative services This will also include processes that trigger referrals or integrate access to other funding systems such as Equipment.</p>

5.2	At the initial contact assessment the first assessor will gather essential information utilising the 'Personal Information Record' and establish whether FACS eligibility applies.	Initial contact assessors are well trained individuals who are part of an operational team or Initial Assessment Team and who have a sound understanding of adult social care  The Personal Information Record
5.3	If the individual is eligible for Social Care the case is referred to the appropriate community team for allocation.	The case is allocated by the practice/principal manager and is recorded on the allocation record
5.4	If FACS eligibility criteria does not apply then individuals will be signposted by the first assessor to preventative services or to low level interventions including re-ablement services.  Referrals to Re-ablement services will continue to be made within existing pathways: <ul style="list-style-type: none"> <li>• Care Manager</li> <li>• Hospital Team</li> <li>• GP</li> </ul>	The Councils is developing comprehensive information in a range of concise, accessible and comprehensive formats. This is being undertaken with the full engagement of third sector partners.  A directory is in the process of development and will be completed by mid 2011
5.5	Re assessment will be completed for known individuals as a result of a change of circumstances and can be completed at any stage after the person has completed a SAQ (or historically a comprehensive assessment)	
5.6	Consistent application of electronic data input and sharing throughout the process will ensure that information is shared effectively within the Council and where appropriate other organisations.	Halton have completed 'to be' process maps to assist in mapping processes throughout the Directorate
5.7	<b>Supported Assessment Questionnaire</b>	
5.8	The purpose of the SAQ is to identify and evaluate an individual's needs in order to deliver an <i>indicative</i> personal budget with enough resources to enable a service user to meet their identified eligible needs. It does so by focusing on the totality of a person's support needs.  The SAQ has 17 domains to help the individual tell us about the areas of their life where they may need help.	Guidance notes have been completed to assist and support practitioners in the understanding and completion of the SAQ document
5.9	In order to ensure equity of resource allocation, there is one	

	SAQ for all Individuals regardless of age or type of need.	
5.10	The SAQ is modelled against the FACS criteria in order to ensure the Council is meeting the eligible needs of service users. When determining the eligibility criteria for Halton, the Council has regard to its resources	
5.11	As the help and support of family members and/or other carers is essential for many people, assessment of the level of support provided by carers is included in the SAQ. Carers' own needs will be assessed separately Carers are entitled to an assessment even if the Individual does not agree to undertake an assessment. This will reflect their needs and separate financial status	
5.12	<p>The SAQ is completed as part of the community care assessment and will need to be agreed by the allocated Care Manager.</p> <p>The SAQ records two viewpoints:</p> <ul style="list-style-type: none"> <li>• Individual</li> <li>• Care Manager</li> </ul> <p>Where a SAQ has been completed by the individual independently of the Care Manager then the allocated Care Manager will need to meet with the individual and complete the SAQ within 14 days of case allocation.</p>	At present the Council provides a supported assessment process but a system is in the process of being developed that will enable the individual to undertake a self-assessment
5.13	The completed SAQ will be forwarded to the service Administration Team for loading onto Carefirst.	
5.14	<p>For the purpose of the pilot and whilst the RAS is being re-calibrated a copy will be forwarded to the Transformation Team where an indicative budget will be established.</p> <p>For individual who already have a traditional care package and whose needs have not changed then the existing budget remains.</p>	A Support Plan must still be undertaken
5.15	<p>Where an individual either:</p> <ul style="list-style-type: none"> <li>• Appears to lack the capacity to assess their own support needs, an assessment under the Mental Capacity Act (2005) will be carried out. The decision maker, if the person is deemed to lack capacity, will also make the decision under the best interests guidance, taking into account the views of all relevant people including family, friends and representatives having regard to s4 MCA and the Code of Practice; or</li> <li>• Has capacity and appears to be in need of a service from HBC but chooses not to participate in the supported assessment.</li> </ul> <p>HBC will continue to exercise its statutory duty under s47 of the National Health Service and Community</p>	

	<p>Care Act 1990 to assess any person within their area who may be in need of support.</p> <p><i>Mental capacity and the SAQ</i></p> <p>Whilst it must be assumed that all adults have capacity to make decisions for them-selves, where there are concerns about an adult's capacity to make specific decisions a formal assessment of capacity will be necessary. The Mental Capacity Act (2005) and the Code of Practice provides the legal framework for acting and making decisions on behalf of those individuals who have been assessed as lacking mental capacity to make particular decisions for themselves. The Council will act in accordance with the provisions in the Mental Capacity Act (2005), the Code of Practice, and the Halton Borough Council Procedure and Guidance when assessing individuals.</p>	
6	<b>POINTS ALLOCATION SYSTEM</b>	
6.1	At this stage the individual is informed about their indicative personal budget allocation in a clear and accessible way. This will enable them to plan their support with the full knowledge of the level of resource available.	The Care Manager informs the individual verbally and also via completion of a Provisional Personal Budget statement
6.2	The point's allocation system translates the needs identified in the SAQ into numerical points. The scale of points awarded for each answer is informed by the Council's eligibility criteria in line with FACS.	
6.3	The points for each answer remain the same regardless of who is completing the SAQ, thus ensuring that Individuals who have the same answer for a particular question will receive the same points in relation to that question. This maintains the equality of the point's allocation system.	
6.4	Some of the domains do not have points attached to them. This is because we need to know the information to support the individuals to plan their support but it may not need to be paid for within the Personal Budget.	See SAQ Guidance notes
	Some of the domains may award a level of points that informs the award of points in another domain; this will prevent duplication of funding.	
6.5	Once the points have been allocated, they are then converted into the indicative personal budget via Annual the 'pounds per point' calculation. The 'Annual pounds per point' rate sets a certain monetary figure for each point scored on the questionnaire. This figure is multiplied by the number of points scored on the questionnaire in order to determine the indicative personal budget.	
6.6	The annual 'pounds per point' rate is based on the cost of meeting eligible support needs, having regard to the	

	available HBC resources. The RAS is linked to the actual cost of providing services that meet those needs, in Halton. Therefore if the cost of providing those services increases or decreases then the price per point and the budget may change.	
6.7	Where an individual's initial allocation includes other funding sources which are yet to be ratified these must be detailed on the Provisional Personal Budget Form. This will need to be presented clearly as it will inform the application of any financial assessed charge.	Ensure that you complete a 'Provisional Personal Budget' form for all new cases. This can be found at (Appendix 1) but the most recent version will be found on the intranet in Self Directed Support
6.8	Once the calculation of the indicative budget has been completed the Provisional Personal Budget statement needs to be completed and a copy forwarded to the individual.	Once the individual has this information they are then in a position to begin there Support Plan.
7	<b>MOVING EXISTING SERVICE USERS TO PERSONAL BUDGETS</b>	
7.1	Cases currently receiving Adult Social Care support receive an annual review from a Care Manager. As part of the review process, individuals will go through the RAS, completing a SAQ and an indicative amount will be established. It will be established whether the individual will continue with the support they currently receive. A Support Plan will need to be completed for all cases that address the individual's outcomes using the indicative amount as a guide.	
8	<b>HOSPITAL DISCHARGES</b>	
8.1	<p>Where an individual is to be discharged from hospital without referral to Re-Ablement services the Care Manger will complete a SAQ. This will produce an indicative budget and an Interim Support Plan will be completed.</p> <p>If the individual is already known to adult social care services and their needs have not changed and no additional funding is required then the additional package can be re-instated. A comprehensive Support Plan would need to be completed within two weeks of the person returning home.</p> <p>Where an individual is to be discharged into the care of re-ablement services then the RAS process can only commence once the person has entered a relatively stable stage. The Re-Ablement service will refer to the appropriate team for case allocation.</p>	<p>See Interim Support Plan document located within Support Planning and review procedure.</p> <p>A comprehensive Support Plan will need to be completed within two weeks of commencement of package.</p>
9	<b>FINANCIAL ASSESSMENT</b>	
9.1	The Care Manager will need to ensure that the individual understands that services under SDS are means tested and a contribution to the cost of service may apply.	Self-Directed Support is based on the principles of transparency and choice. It is important

		that the individual knows what there assessed contribution for service is prior to the completion of their support plan as this may impact on the decisions they make at the next stage – planning their support
9.2	<p>It is important that there is timely referral for Financial assessment.</p> <p>At the first contact visit the Care Manager will ensure that the individual completes an Agreement to Pay form. A copy of the Agreement to Pay form will be forwarded to the Income and Assessment Team along with a request for a financial assessment that will ensure that individuals are fairly charged and accessing their maximum welfare benefit entitlement. The process is:</p> <ul style="list-style-type: none"> <li>• Income and assessment team- Undertake a financial assessment within 5 days that calculates how much the individual can afford to pay</li> <li>• Fairer Charging Assessment- Applies if the individual feels that the charge applied is more than they can afford to pay then this can be reviewed.</li> </ul>	<p>Agreement to Pay form needs to be completed at the initial contact visit by the visiting Care Manager (Appendix 2)</p> <p>In most cases the visiting Income and Assessment officer will be able to tell the individual their contribution straight away. This will be dependent on availability of financial information needed to complete the assessment</p> <p>The individual will also be offered a Welfare benefits check and be supported by the Income and Assessment officer to complete any benefit applications.</p> <p>The Income and Assessment Team are based at Kingsway House</p>
9.3	The Income and Assessment team will advise the individual and the Care Manager of the outcome of the Financial Assessment without delay. This will enable the care manager to complete the Final Personal Budget Statement form.	Final Personal Budget Statement Form (Appendix 3)
9.4	If the individual does not agree with the outcome of the financial assessment then a review will be carried out by a Manager from Adults and Community Services within four weeks of the request and the individual will be given the decision in writing.	See Fairer Charging Policy
10	<b>VALIDATION</b>	
10.1	All needs that have been identified from the assessment,	This must include any



	including the SAQ, will be flagged for the support plan, and in order for the Council to meet its duty, these needs must be met in the support plan in order for the plan, and therefore the budget, to be validated.	associated costs. For Example Support Planning/recruitment/cost/training/account management. -The data for additional costs need to be analysed and fed back into any RAS recalibration processes to increase accuracy of indicative allocations overtime.
10.2	The indicative allocation, the invitation to create a Support Plan with the appropriate amount of help, and a reasonable sign of decision by an authority constitute an assessment, and this is the process by which a Personal Budget is established.	See Positive Risk Taking Guidance
10.3	Where it is clear that the individual's needs will not be determined through the SAQ then the resource allocation will be agreed on completion of a validated Support Plan that clearly details the individuals needs and how they will be met.  This process includes exceptional allocations of funding alongside any 'transitional' or one of payments. This will include agreement regarding whether this allocation is recurring, non-recurring or recurring but reducing.	See Positive Risk Taking Guidance
10.4	Personal budgets of a specific sum can be signed off by the appropriate practice/principal manager	
10.5	Personal Budgets exceeding the sum specified must be signed off by a Risk Enablement Panel	
10.6	Cases of high risk and non agreement will be referred to an Operational Director. The O.D will make a decision within 5 working days of receiving the information. The decision must be recorded in writing and a copy kept on file. The Care Manager must inform the individual of the outcome without delay.	This will be the service Operational Director (O.D) or in their absence Another nominated O.D  A record of the agreement to fund a high cost Personal Budget must be kept on the individuals personal file
11	<b>RISK ENABLEMENT PANEL</b>	
11.1	The role of the Risk Enablement Panel is to approve high cost or complex Support Plans and agree the final Personal Budget as a cost effective way of meeting the individuals social care outcomes or to recommend Support Plans for approval. They will review all new SDS support plans coming through for consideration in the first six months.  The indicative personal budget identified through the RAS must be validated before it can be physically allocated. The	Validation process is detailed in the Support Planning and review procedure and guidance and positive risk taking guidance  Complex may mean costs that are

	panel must ensure that services identified will meet the outcomes within the Support Plan, in an appropriate and safe manner, that any risks identified have been appropriately accounted for and minimised and that services commissioned are required.	inconsistent with expected levels of expenditure or special circumstances.  The Pathway can be found in SDS policy
11.2	The panel will meet on a monthly basis but can be convened on an ad-hoc basis if needed.	
11.3	The Quality Assurance Panel will comprise of: <ul style="list-style-type: none"> <li>• Divisional Manager from appropriate service area who will be Chairperson</li> <li>• Multidisciplinary social care and health staff</li> <li>• Principal Manager from the service area</li> <li>• Specialists depending on service area</li> <li>• Safeguarding representative</li> </ul>	The panel will need to consider SAQ/Support Plan/Exceptional circumstances/relevant information/Decision making tool/Capacity test
11.4	Any administrative support required will be provided by the Administration Support Team with agreement in advance from the appropriate Administration Support Team Manager.	
12	<b>CONTINGENCY FUNDS</b>	
12.1	In order for the Council to meet its duty, every indicative personal budget will include a contingency element that can be used for fluctuations in needs. The use of the contingency will be monitored by the Council to ensure that it is being used for the appropriate purposes.	This rate is currently set at 15% of the final agreed budget.
12.2	Submission of the case to the Risk Enablement Panel is the process by which the individual's budget can be supplemented. This will be determined through the support planning and validation process.	
13	<b>METHODS OF RECEIVING A PERSONAL BUDGET</b>	
	All individuals receiving Adult Social Care will have a Personal Budget. However they can chose the most appropriate way to use it.  The main methods are: <ul style="list-style-type: none"> <li>• Direct Payment – Receiving some or all of their Personal Budget as cash which is held in a separate bank account by the individual</li> <li>• Council can hold the budget for the individual and can commission the support on the individuals behalf</li> <li>• Provider – A third party can hold the budget on the individual's behalf and arrange the support for the individual. This is known as an Individual Service Fund</li> </ul> Brokered Fund –Managed Account or brokerage service	Other methods of receiving a Personal Budget are being explored including Trust Funds held by the individual's circle of support.  See The Halton Personal Budget Choice Matrix (Appendix 4)
14	<b>CHANGE IN PERSONAL CIRCUMSTANCES</b>	
14.1	If a person's needs change fundamentally a review of their support needs can be undertaken via the community care assessment process (including the SAQ), and a new revised indicative personal budget allocated as required.	

	As part of the review/re-assessment there will need to be consideration of how the person's needs will be best met in the future. It may not be possible to pay the full cost of the particular method of purchasing services which the individual may choose, if the individuals needs can be just as well met in ways that cost less. For example we may not pay the charges of a particular agency you prefer if another agency charges less for an adequate service.	
15	<b>EXCEPTIONAL CIRCUMSTANCES</b>	
15.1	Where the RAS identifies high support needs the Council will work with the Individual to find the best solution for their individual needs.	
16	<b>DISPUTES</b>	
16.1	There is a process for individuals who feel that they have not been, or are no longer, appropriately assessed.  Remember that the indicative amount is only a guide. The final amount can increase or decrease once the support plan has been completed and the individuals support needs have been detailed.	Please refer to the Protocol for handling Social Care Complaints Comments and Compliments relating to Adults and Community and Children and Young People Directorates
16.2	If there is a disagreement between the individual and the Care Managers assessment, initially the professional and the individual will discuss and negotiate any differences and try to come to an agreed position.	
16.3	If an agreed position cannot be reached it is ultimately the Care Managers view that will stand. This is because it is the Care Managers legal responsibility and duty to perform the assessment. The SAQ and case notes must however record and detail the differences of opinion.	
16.4	If following negotiations between the Care Manager and the individual, the assessment cannot be agreed and the individual is concerned that their agreed Personal Budget does not truly reflect their unique needs then they should put their concerns in writing to the relevant Principal Manager, who will initially try to resolve the situation. If the areas of disagreement cannot be resolved then the person can make a complaint through the complaints procedure.	
16.5	The Council has a responsibility to ensure that public money is spent and accounted for appropriately. The Council has a robust and flexible policy for auditing cash payments to give greater confidence that Individuals are achieving the best possible outcomes within available resources and those funds are being spent appropriately.	See Direct Payments procedure
16.6	Surplus funds above a specified sum (which takes into account contingency and saving toward a purchase) may be recouped by the Council as under the policy and procedure for Direct Payments.	
16.7	Income collection and debt recovery process remain unchanged and can be found in Debt Recovery Policy	Found in Adult and Community documents
17	<b>REVIEWING AND MONITORING RAS</b>	

17.1	<p>The Council has a statutory duty to review each Individual's and carer's support needs at least annually, and may do so more frequently should this be necessary. The review will be used to ensure that needs are being met and support is appropriate. Frequency of reviews will be agreed and included in the support plan. Individuals and carers are also entitled to request a review of their overall situation in the interim should they wish to do so.</p>	
17.2	<p>In addition, the Council will monitor the overall implementation of the RAS to ensure that it remains equitable and transparent, and allows Individuals to meet their needs within available Council resources. This will include at a minimum:</p> <ul style="list-style-type: none"> <li>• an annual review of the RAS formula to ascertain whether the points allocation and pounds per points rate remain adequate to meet Individuals eligible needs;</li> <li>• and a review takes place as required ensuring that the RAS remains sustainable in light of available Council resources.</li> </ul> <p>The RAS will be recalibrated and improved over time.</p>	

# APPENDIX 1 - PROVISIONAL PERSONAL BUDGET

## Adult Social Care and Health Provisional Personal Budget Statement

*This Provisional Personal Budget statement has been calculated based on the level of support Adult Social Care and Health has identified from your current package of care. It includes all the funding that may be allocated to you from other providers and includes any personal contribution that you may be expected to make and which will be deducted from your Personal Budget.*

This Provisional Personal Budget Statement is for:

<b>Name</b>	
<b>Carefirst no.</b>	

<b>Address:</b>

<b>Funding Body</b>	<b>Annual Amount</b>	<b>Weekly Amount</b>
Halton Borough Council Health & Community - Gross		
Independent Living Fund - Gross		
Access to work		
Supporting People		
Disabilities Facilities Grant - Gross		
Integrated Community Equipment Services		
Continuing Health Care/Joint Funding from PCT		
<b>TOTAL PROVISIONAL BUDGET AVAILABLE</b>		

### Provisional client contributions:

Your provisional client contribution – domiciliary care		
Your provisional client contribution – respite		
Your contribution to Independent Living Fund		
Your contribution to Disabled Facilities Grant		
Your contribution to Telecare		

# APPENDIX 2 - AGREEMENT TO PAY FORM

## Agreement to pay for care services – 2010/2011

IAAGRFF

Client name: \_\_\_\_\_ Care arrangers name \_\_\_\_\_  
\_\_\_\_\_

CareFirst Number:  
\_\_\_\_\_

Address: \_\_\_\_\_ Contact \_\_\_\_\_

Tel.no \_\_\_\_\_

I understand that if I receive care or other services provided by Halton Borough Council I will be asked to complete a financial statement form to assess my contribution towards the cost of such service. The information from this form will determine the amount I will be asked to pay. If this is not completed and returned within four weeks of commencement of service, it will be assumed that I do not wish to be financially assessed and I accept that I will be charged full cost.

**If you do not wish to be financially assessed and understand that you will be charged full cost**

**please sign here** \_\_\_\_\_

## FINANCIAL ASSESSMENTS

### ESTIMATED CHARGE

If you would like to have an estimate of what your charge would be please complete the details below. We will aim to provide you with an estimate within five working days of our receipt of this form. Please note this will only be an **estimated charge**, a full financial assessment would be needed to confirm the correct level of charge that would be made.

National Insurance Number: You \_\_\_\_\_ Your Partner \_\_\_\_\_

Date of Birth: You \_\_\_\_\_ Your Partner \_\_\_\_\_

Do you receive Income Support, Pension Credits or Housing Benefit?

**Yes / No**

If no, please provide further details below:

Income or Benefits you receive and the amounts:

\_\_\_\_\_

—

Bank/Building Society /Investments/Shares balances:

\_\_\_\_\_

—

*I agree that personal and financial information provided to Halton Borough Council or Pension Service/Job Centre Plus/other benefits agency, for the purpose of social care financial assessment or welfare benefit purposes may be disclosed to each other for the purpose of assessing entitlement to any benefits or service charges. I agree that this information may be passed between each of the organisations regularly in the future. I understand that I may withdraw my consent to this disclosure at any time.*

Signed \_\_\_\_\_ Date

\_\_\_\_\_

On behalf of: \_\_\_\_\_

### **Fairer Charging and Welfare Benefits check**

*When we are assessing your ability to pay towards your care package, we offer you the opportunity to have a 'welfare benefits check' to ensure you are claiming all the benefits that you are entitled to.*

*Would you like us to contact you about a 'welfare benefits check'?*

**Yes/ No**

*Would you like more information about Disability Related Expenditure?*

**Yes/No**

### **Quick check for full cost clients**

Do you have savings/assets in excess of £23,250? **Yes/No**

If you answer yes to this, you may be asked to pay full cost.

For permanent residential placements – do you own property with a value in excess of £23,250? **Yes/No**

*If you answer yes to this, you may be asked to pay full cost and may be offered the option of deferred payment, subject to meeting the deferred payment criteria. In this instance you may also decide to fund privately without support from the Local Authority.*

## **Property - a quick guide**

If you receive community-based services, we do not take the value of your main residence into account when working out how much you are asked to pay.

If you receive short term or temporary residential or nursing care, we do not take the value of your main residence into account when working out how much you are asked to pay. We will also take into account ongoing costs for the upkeep of your house.

If you receive permanent residential or nursing care, the property may be taken into account from 12 weeks after your placement became permanent. For the first 12 weeks of your permanent stay, you will be charged but the value of your property will be excluded from our calculation.

If your spouse or partner still lives in your main residence, or other eligible relative who is over the age of 60 or receives disability related benefits, we will not take the value of your main residence into account when working out how much you are asked to pay.

If you receive nursing care, either temporary or permanent, you will be asked to pay towards the cost of the placement less the nursing care component, which is paid by the NHS.

This is only a brief summary and should not be relied upon as a comprehensive guide to the law. Independent advice should be sought if you require guidance relating to your particular circumstances.

## **Services with a standard charge 2010/2011**

The following services have a standard charge that is payable in most cases:

- Meals on Wheels                    £2.88 per meal
- Tea-time packs                    £2.00 per pack
- Transport                            £1.05 per journey (£2.10 return)
- Lifeline                              £5.53 / £6.62 / £8.82 per week depending on level of service

**For further details about anything contained in this letter please contact the  
Income & Assessment Team 01928 704328 or 01928 704319**



# APPENDIX 3 - FINAL PERSONAL BUDGET STATEMENT

## Adult Social Care and Health Personal Budget Statement

*This Personal Budget statement has been calculated based on the level of support Adult Social Care and Health has identified from your support plan. It includes all the funding that may be allocated to you from other providers and includes any personal contribution that you may be expected to make.*

This Personal Budget Statement is for:

<b>Name</b>	
<b>Carefirst no.</b>	

<b>Address:</b>

<b>Funding Body</b>	<b>Annual Amount</b>	<b>Weekly Amount</b>
Halton Borough Council Health & Community – (net of client contribution)		
Your client contribution – domiciliary care		
Your client contribution – respite		
Independent Living Fund – (net of client contribution)		
Your contribution to Independent Living Fund		
Access to work		
Supporting People		
Disabilities Facilities Grant – (net of client contribution)		
Your contribution to Disabled Facilities Grant		
Integrated Community Equipment Services		
Your contribution to Telecare		
Continuing Health Care/Joint Funding from PCT		
<b>TOTAL PERSONAL BUDGET AVAILABLE</b>		

This statement was prepared by \_\_\_\_\_ Date \_\_\_\_\_

**Your contributions to your support**

If your Support Plan indicates that all of your support needs will be commissioned by Halton Borough Council you will receive monthly invoices for your contributions to domiciliary care, respite, transport, telecare and meals where applicable.

If your Support Plan indicates that all or some of your support needs will be commissioned by you via a Direct Payment you can choose whether you want to receive invoices for your contributions to domiciliary care, respite, transport, telecare and meals where applicable, or whether you want to have these costs deducted from your Direct Payment.

I wish to have my client contributions in respite of domiciliary Care, respite, transport, telecare and meals invoiced to me

If you do not tick the above box your contributions will be deducted from your Direct Payments.

**Reviews**

Halton Borough Council will review your support plan annually to ensure that the identified outcomes are being met.

**Changes to your support plan**

Changes that affect the identified outcomes in your support plan, or fundamentally change how support is delivered must be discussed with Halton Borough Council an agreed before being made.

If the need arises, the contingency element of your Personal Budget can be accessed by contacting your social worker / care manager.

**Ending this agreement**

This agreement may be ended by mutual agreement at any point.

A notice period of 4 weeks must be confirmed, in writing, by all parties if the agreement is to end.

Halton Borough Council may end this agreement if there is evidence of the money being used inappropriately.

If you agree with this statement and are willing to accept this financial offer please sign below.

I wish to accept the financial offer shown on this statement.

I accept this financial offer on behalf of the person for whom this Personal Budget statement has been prepared

If you are signing on behalf of the person for whom this Personal Budget statement has been prepared please provide your details

Name		Address
Relationship		

Signed \_\_\_\_\_ Date \_\_\_\_\_

Signed on behalf of Halton Borough Council by \_\_\_\_\_(print name)

Signature \_\_\_\_\_ Date \_\_\_\_\_

# APPENDIX 4 - THE HALTON PERSONAL BUDGET 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?
<b>Services Arranged by Individual</b>					
<b>Direct Payment</b>	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.
<b>Representative Payment</b>	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.
<b>Council Arranged Services</b>					
<b>In House Services/ Commissioned Services</b>	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
<b>Mixed Package</b>	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
<b>Options in Development for Commissioned Services</b>					
<b>Individualised Service Fund</b>	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 you 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.
<b>Indirect Payment</b>	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.