

# Your Support, Your Way.

The story so far of Self Directed Support in the London Borough of Richmond upon Thames









### FOREWORD



The London Borough of Richmond upon Thames is at the forefront of the personalisation of Adult Social Care.

We made an early commitment to empowering, enabling and supporting individuals to exercise choice and control over the care services they receive. Our position, as one of the leading councils in the country in the development of Self Directed Support (SDS) and personalisation is demonstrated by the fact that over 1,200 people (41% of those who are eligible for support from the Council), have had their social care needs assessed using the SDS approach and have been allocated a Personal Budget. We believe this is the highest in London.

Since August 2008 all new people approaching the Council for help, and existing service users undergoing a review of their care and support, have been assessed using the SDS model. We have achieved the 'Putting People First' target of 30% of people receiving a Personal Budget two years ahead of the target date. In addition, 14% of the Adult and Community Services budget is spent on personalised services, making Richmond one of only six authorities nationally spending more than 10%. And we have been assessed by the Care Quality Commission as performing excellently in offering increased choice and control to residents needing support.

However, performance figures alone do not convey the impact personalisation has made on individuals' lives. That is why I am delighted to introduce this report which describes our journey implementing SDS and documents how Personal Budgets are working for our residents. We want to learn from our experiences to date, to ensure that people who need support can access services which offer independence, choice and quality care.

This report clearly shows that SDS is making a big difference to people's lives and that there is more that we can do to ensure everyone needing support benefits from this approach.

I would like to thank all the staff involved in this work, including Council officers, the Richmond Users Independent Living Scheme (RUILS), residents and the Personal Budget holders who have shared their individual experiences of SDS with us.

**Councillor Denise Carr** – Cabinet Member for Adult Services, Health and Housing

### THE NATIONAL CONTEXT

A surprisingly large number of people in our community need some form of help in their day-to day-lives. Almost one and a half million adults in England receive support from the state. They may require help for a number of reasons including: poor mental health, learning and physical disabilities and/or age-related conditions. The kind of help required can cover personal care, managing household affairs and getting out and about safely.

In addition, about six million people offer care and support to their disabled or older family members, often at the expense of their own health and wellbeing. Despite this high level of support from informal carers, approximately £17.5 billion is spent from the public purse on social care services each year.

Nationally, one and a half million people work in social care across some twenty five thousand organisations in the public, private and voluntary sectors. Given this scale, decisions made by the Government and councils impact not just those who currently need support but also their carers and the wider community.

### **Care Quality Commission**

The Care Quality Commission CQC was formed in April 2009 merging three previous regulatory bodies – the Commission for Social Care Inspection (CSCI), the Healthcare Commission and the Mental Health Commission. It is responsible for the registration and assessment of

all providers of health and social care services in England.

CSCI the national body previously responsible for the regulation of social care, regularly published reports demonstrating how the social care system struggled to deliver good outcomes for individuals and their families.

'Time to Care' (published by CSCI in October 2006) and looked at home care services and noted:

Most councils restrict the help they offer to a list of prescribed activities. Care Managers draw up individual care plans that tightly specify both the tasks to be undertaken and the time to be devoted to these tasks.

In one of its last reports entitled 'Cutting the cake fairly' (October 2008), CSCI reviewed the existing arrangements for people accessing state-funded social care and criticised the approach for the following reasons:

- A lack of clarity and transparency
- A lack of fairness
- The continuing influence of service-led, rather than needs-led approaches
- Insularity and fragmentation.

## AMBITIONS FOR SOCIAL GARE

The Government's 2006 White Paper, entitled 'Our Health, Our Care, Our Say' set the strategic direction for the personalisation of services which should be easily accessible, flexible and responsive to local needs. This was followed up in 2008 by 'Putting People First' in which the Department of Health laid out the ambitions for the delivery of personalised health and social care – putting real power in the hands of individuals and their carers; giving real choice and control to the people who know best what support and services they need and how, when and where these should be delivered.

In the London Borough of Richmond upon Thames (LBRUT) there has been a long tradition of working in partnership with people to help them take control of their support arrangements. The Council has been a leading authority in the field of Direct Payments and is now at the forefront of SDS and Personalisation.

In 2008/9 9,600 people living in the borough received some form of state funded social care, and the Council and its partners spent just over £42.5 million on social care.

The evidence in this report provides some early proof that if the Council and its partners stay committed to developing personalised solutions in partnership with individuals, carers and the local community, we can together build sustainable support networks that work well for the people they serve. Our ongoing shared commitment is to strengthen these partnerships and to continue to improve the support we offer.

SDS puts the individual, their family and their community at its core. It is underpinned by the belief that people with health and social care needs and their families have both the capacity and the right to control the support required to live full and active lives. Instead of simply placing a person into an existing service, SDS is designed to allow the person and their family to choose the kind of support they want, making it much more personalised. This is achieved through the best possible information and advice available to all residents, and for those who are eligible for support from the Council, a Personal Budget and individual Support Plan which reflects the personal circumstances, needs and wishes of each individual.

### **In Control** is a social enterprise, a charity and an independent company.

It works in partnership with people and Government, with charities and with commercial companies, to change the social care system in England through the implementation of Self Directed Support. It aims to put people in control of their support and their lives. In Control draws heavily on the voices of disabled people themselves.

In Control has been working with us to help ensure people who need care and support are able to lead full and active lives as members of their communities.

In Control has highlighted the benefits of open and transparent resource allocation and Personal Budgets - innovations which offer the potential for wider welfare reform.

### THE SEVEN STEPS OF SDS:

Richmond Council has been working closely with local people using services and In Control to develop and implement a new approach to social care. This new approach is made up of seven steps:

**Identifying needs** – Through the self assessment questionnaire, with support if required.

### **Establishing the indicative Personal Budget**

– Using the Council's RAS (Resource Allocation System). The RAS is based on the responses from the self-assessment questionnaire and provides an estimate of the funds required. This lets the person know early on how much money is available to fund their support.

Developing a personal Support Plan – This is drawn up by the individual, with help from their family, a care manager or voluntary organisation if required. The plan sets out what support is needed, how it is to be put in place and the outcomes to be achieved through spending the Personal Budget.

Agreeing the Support Plan – The plan has to be agreed by the Council which needs to be assured that it meets the needs identified; that any risks have been clearly addressed; and that it can be delivered within the resources available. At this stage the indicative Personal Budget can be adjusted if necessary.

**Taking control of the Personal Budget** – Once the Personal Budget has been finalised and the Support Plan agreed, choice and control can be exercised through the following options: taking the money as a Direct Payment; arranging for a third party to spend the money and put in place the care (an Individual Service Fund); or leaving the Council to manage the budget and organise the support agreed in the Support Plan.

Organising the support – The individual will be encouraged to take as much control as they can to over choosing and monitoring the support they need and achieving the outcomes in the Support Plan.

Reviewing the process – At least once a year the Council will review the Personal Budget and Support Plan with the individual and their family. This is to ensure it is delivering the care, choice and control envisioned and to identify whether any changes are required.



## BENEFITS OF THIS SEVEN-STEP APPROACH:

- The individual is in control of their own budget, therefore they have a vested interest in ensuring that the money is well spent.
- Each step can be led by the individual with support from their family and drawing on professional support only if needed.
- Professional staff are able to dedicate their time towards those who most need their help.
- As people have control over their money, they are able to choose existing services, or design their own bespoke support and avoid being slotted into services that are not able to meet their unique needs.
- Social Workers/Care Managers are not seen as 'gate keepers' of the public purse (a role that the previous social care system required of them).
- Social Workers/Care Managers are able to form trusting relationships and to help people organise their support plans creatively.
- As resources are allocated on an individual basis, it is easier to ensure that people get resources that match the level of their needs.

### **LOCAL CONTEXT**

### The experience of implementing SDS in Richmond upon Thames

The Council began implementing SDS in Autumn 2007, building on our experience of the benefits of Direct Payments and giving people more control over the support services they required.

Two fundamental principles have guided our approach. These are:

- People with care needs are the experts in how their needs should be met
- We should work in partnership with people to co-design, co-deliver and support the services they require.

Over the last two years we have achieved some real benefits:

- Over 65% of people tell us that Personal Budgets are making a positive difference to their lives.
- Over 1,200 people are now receiving a Personal Budget.
- Local organisations run by people who use services are working with us to provide people with the support they need to take control of their Personal Budgets.
- People coming out of hospital now have access to a reablement service which is helping to maximise their independence.

As part of Richmond Council's implementation of SDS we have undertaken an evaluation of our work to identify good practice, highlight areas for improvement and share our progress with partners. This has been done through listening to the views and experiences of people who have had Personal Budgets and those who have worked with them through the SDS process.

THE EVALUATION

We have used In Control's evaluation framework, (which was developed in partnership with the University of Lancaster) in order to identify how people have spent their Personal Budget, what help they needed to plan their support and what impact having a Personal Budget has had on their lives.

Our partner in SDS – Richmond Users Independent Living Scheme (RUILS) – has undertaken 19 in-depth interviews with people who had a Personal Budget for six months or longer. The interviews were carried out by people who had disabilities themselves and by RUILS staff.

Interviewees were asked to complete a questionnaire covering the SDS process and the impact their Personal Budgets had on various aspects of their lives.

For each section people were asked to indicate their level of satisfaction on a simple three point descriptive scale of: worse, no change, improved.

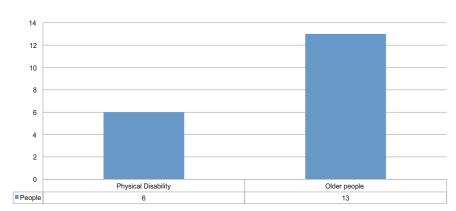
As part of the interviews, there were also a range of open questions, providing an opportunity for the interviewee to talk generally about their experiences of SDS.





## FINDINGS FROM THE EVALUATION

### Who took part:



How people managed their Personal Budget?

People with learning disabilities

evaluation because of the existing

outcomes of SDS for this group

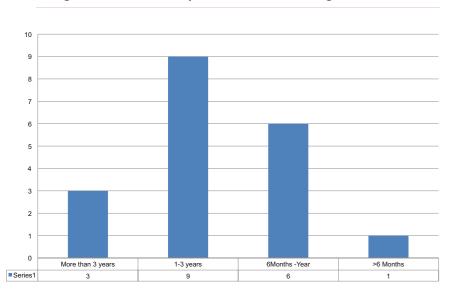
were not included in the

of individuals nationally.

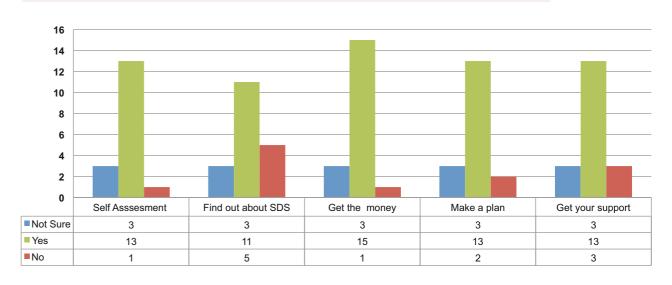
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All 19 participants responded to this question and overall 12 people said they held their personal budget as a Direct Payment, and 7 people had asked the Council to hold their budget. We are committed to ensuring SDS is working for everybody who has a Personal Budget regardless of how their money is managed. A priority for the coming year is to ensure people who ask the Council or a third party to manage their budget and arrange services on their behalf can enjoy similar benefits to those who take their budgets as Direct Payment.

### Length of time in receipt of a Personal Budget:



### How easy was the Self Directed Support process



People were asked to think about their experience of going through the SDS process and respond either: 'yes', 'no' or 'not sure' to the five closed questions about how easy the process was for them.

### Was it easy to:

- Find out about SDS?
- Do the Self Assessment?
- Get control over the money?
- Plan the support you want?
- Get the support you want?

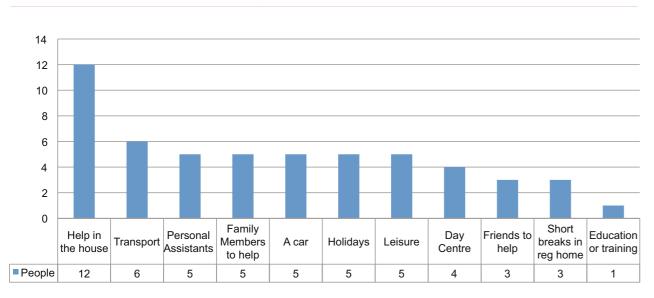
### Results

- Nobody found the whole process difficult.
- Seven people found at least one part of the process difficult.
- Nearly half the group found all parts of the process easy.
- Finding out about SDS was reported as the most difficult part by just a quarter of the group.
- Getting the money was reported as the easiest part of the process by more than three quarters of the group who said this part of the process was easy.
- The Self Assessment, getting the money, making a plan, getting support were all reported as easy by more than two thirds of the group.

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### FINDINGS FROM THE EVALUATION

### How people used their Personal Budget

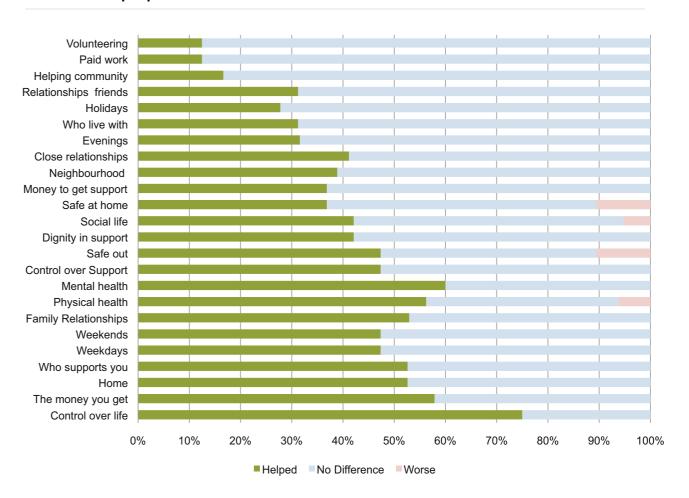


People were asked to identify, from a list, how the money in their Personal Budget had been used. Nearly three quarters of the group used some of their personal budget to pay an individual to help them. Just over a quarter used some of their Personal Budget on traditional social care services (day care or residential home). Over a third used money to get help from people close to them, family of friends. Over half used some of their Personal Budget to get out and about by car or other transport.

### **Outcomes for people**

The questionnaire asked people about different aspects of their lives and the support they get. People were asked to identify for each area whether having a Personal Budget had made things better, made no difference or made things worse. See the table opposite for the issues discussed.

### **Outcomes for people**



Areas of the questionnaire associated with choice and control all scored highly. For example: control over your life, who supports you, control over support, what you on weekends and weekdays.

A notable positive impact was reported on Relationships. Family, Close Relationships, Friends.

The areas looking at making a contribution scored relatively poorly: Volunteering, Paid work, Helping in the community.

Four areas were reported by at least one person as being worse. Feeling safe was reported as worse both in and out of the home by two people. **12** 13

## FINDINGS FROM THE REGULAR MONTHLY REPORT

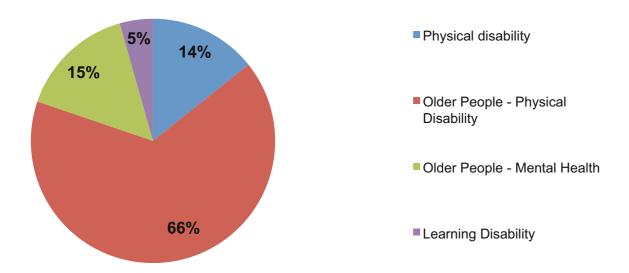
In addition to this one off evaluation the Council has also started a regular monthly monitoring exercise where Quality of Life information is collected from a random selection of people who have taken control of a Personal Budget. This ongoing monitoring exercise started in August 2009 and to date the data has been collected from 90 people.

The Quality of Life monitoring involved asking people with Personal Budgets about the effects it has had on:

- The choice and control over the important things in their lives?
- Helping to get the support they want
- Their mental and physical wellbeing
- Significant relationships (family and friends)
- Capacity to have a social life or participate in leisure activity
- Capacity to undertake paid work
- Whether support is provided in a respectful way
- Quality of Life

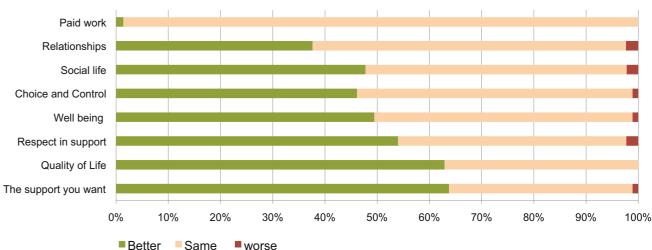
### Who responded to the quality monitoring questionnaire?

Responses have been collected from a wide range of people. The majority were over 70 years of age. The youngest was 19 and the oldest 100.



### OUTCOMES

### Quality of life monitoring



- Four people reported some negative impact.
- Three people reported a negative impact in one area.
- One person reported a negative impact in three areas.
- No-one reported improvements in all eight areas.
- Some people reported improvements in seven out of the eight areas.
- Nearly a third reported improvements in at least six of the eight areas.
- Just over half of the group reported an improvement in at least four of the eight areas.



# ANNA'S STORY\*

Anna, a 31 year old young mother, is a trained teacher and worked full-time in a local school before she left work to have her daughter. She is married and has a physical disability.

She likes to get out to Play Group with her daughter, take her for walks and generally get outand-about to do the normal things people take for granted, for example going to restaurants and to the seaside.

Anna spends her Personal Budget on employing a Personal Assistant, which enables her to get out in the community as well as help to look after her daughter. She also uses the budget to socialise with friends and go swimming, which helps her relax. In addition, Anna has been able to purchase a mobile phone which helps her to feel safe when she is on her own but enables her to stay in contact with friends and family.

RUILS helped Anna to prepare her Support Plan and find a Personal Assistant.

When asked what had been the biggest change in her life, Anna replied:

6 I just feel there is even more potential than what I am actually doing at the moment. But I think my personal budget has given me the freedom to clarify the support I need. I now try and do the normal daily activities that I felt before I just couldn't do.

Before I had the money I felt quite trapped, there were several things I couldn't do. For example, I couldn't even go to mother and baby groups because I needed someone else to carry my daughter when she was a baby or to help me with a pram. Just knowing I can pay for someone to come with me and help me makes a big difference.

Anna was asked what she would tell others about SDS.

6 I would tell them that it can help change the focus of your life from feeling trapped and resentful towards any limitations you might have due to a disability, to being able to see ways to mitigate against any of the problems you might have.

Anna has recently started driving again. This has really impacted on her life and she now feels she has more freedom. In future Anna would like to consider paid work again so that she can financially contribute to her family again as well as meet people socially.

\*A false name was used to protect confidentiality



### Pat and Chris

SDS has enabled us to make decisions and choices

to improve Chris's quality and enjoyment of life. Managing our own budget has given us much more control over how and when we spend the money allocated to us. Many disabled people themselves have had to give up work – carers often have had to leave their own employment to look after that person. This often leads to great financial difficulties.

As a carer, I feel I have more choice and control over the kind of care that Chris is receiving – ensuring that he has the best possible care to suit his changing needs. SDS has also given us more options to reinstate some elements of his social life which would otherwise be lost due to his disability.

### Barbara

How did you find the process when you sat down and did your plan? Did you find the process was easy to handle?

At first I thought it was difficult, but after reading all the papers left with me, I had a clear idea of what needed to be done to get to that point and it's dropped into place.

### Michael

When Michael was asked what he would tell a friend about SDS, using his communications board, he said:

<sup>6</sup> Go for it, it will help you a lot <sub>9</sub>

### Joan

Joan now employs her own Personal Assistant to provide the support she needs. When asked how she found this compared to using an agency she said:

We are able to sort things out in our own time and get things straight. It seems to me with an agency you just get swept off your feet, you haven't got a minute to yourself and you never seem to get things done properly. I have had two or three from the agency come here and none of them were satisfactory.

### CONTINUING THE CONTINUING THE SDS IMPLEMENTATION OF SDS

The results of the RUILS evaluation show that there are areas to improve on as well to celebrate in implementing SDS.

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Improving access to information, advice and advocacy on how to make the most of Personal Budgets is key. Further work on the barriers to people accessing paid employment and volunteering is a priority and developing community networks to support people living alone or feeling isolated continues to be important.

Within the Council we are restructuring our staff teams to better support SDS. A new Access

Team will ensure that all people receive good quality, information, advice and guidance whether they are self-funders or are eligible for support from the Council. The Reablement Service will be extended to cover not only people being discharged from hospital but to all people eligible for support from the Council. Supported Self Assessment, resource allocation, Support Planning and Risk Assessment will be undertaken at the most appropriate level to reduce delays. People's experiences of SDS and value for money will be used to directly inform commissioning decisions.

Following a successful pilot of SDS for people with mental health needs, which clearly demonstrated the advantages, the Council and its partners are currently developing new mental health commissioning strategies for adults and older people which will embrace the SDS approach.

The current economic climate and the pressures on both health and social care budgets in the years ahead mean we will all have to ensure that people needing care and support, and their carers, can access mainstream services in the borough, as well as specialist service provision and support were necessary. We will also be looking to invest in preventative services including assistive technology such as Telecare and Telehealth.

Safeguarding and risk assessment have always played a key part in the assessment and provision of services for adults and older people. SDS offers opportunities and involves changes to the balance of risk, so the Council and it's partners will continue to ensure that prevention, training, supervision, support and effective reporting and responses to issues and concems underpins all our policies and practice.

By March 2011, the Council is committed to ensuring that everyone who needs ongoing support has a Personal Budget.

We will continue to work closely with local residents, the voluntary sector and other partners to ensure the successful implementation of personalised care and support.

### REFLECTIONS AND CONCLUSION

There is no rule book that tells us how to do this and it is really important we talk and work together in an open and honest way to address issues and concerns as they arise.

We have learnt a great deal about what it takes to ensure Personal Budgets are available to people who need support, and we have seen the difference they can make to people's lives. As we look to the future, we know that SDS is and will continue to be at the heart of what we do. Our commitment to learning is vital to the ongoing development of SDS. Joint working with local user-led and voluntary organisations is key to ensuring a range of services and support in the borough as well as working in partnership with local people to ensure we stay on track.

The 'Quality of Life' questions in this report now form part of every person's review so that we can really see how and where people are achieving better outcomes as well as identifying gaps and areas for improvement.

The next challenge for our Adult Social Care services is to build on our work with service providers in delivering more personalised services and to ensure we are taking an active approach to help shape the local market. In addition we need to make sure local people have consistent access to good information, advice and advocacy services to make informed decisions about their support.

We are immensely proud of what has been achieved so far through the implementation of SDS and we hope to build on this during the coming years. We are very grateful to the families and individuals who have worked with us to help us learn from their early experiences.

Whatever the challenges we face we believe that the principle of SDS is now established in the borough and the strong partnership working across the board gives us a solid foundation to move forward.



Cathy Kerr
Director of Adult and
Community Services,
Richmond Council



Cathy Maker Chief Executive, RUILS



Richard Kember Chair of Trustees, RUILS



This report is an account of our work and what we have learnt through implementing SDS in the London Borough of Richmond upon Thames. The findings are not intended to represent the results of an academic study. Rather they are an evaluation of our progress to date and represent what some residents who have been through the process think about their experiences.

### **In Control Partnerships**

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### **In Control Support Centre**

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### **Acknowledgements**

Thank you to all those people who have contributed to this report. Firstly to the volunteers from RUILS - Peter Majongwe, Robert Burgis, Jean Hamilton, Shireen Lam and Debbie Bloud who contacted each interviewee and carried out most of the interviews. Also to Estelle Christmas who picked up the baton to ensure that we were able to learn from as many people as possible.

Secondly to some key individuals: John Waters from In Control and Cathy Maker at RUILS, Martin Cathermole and the Putting People First team for supporting and funding this document.

Most of all, thank you to all the individuals and families who shared their personal stories with us, including the challenges and achievements. Your help has provided the basis for this report and provided us with invaluable information about developing SDS in the borough.

If you would like more information about SDS or want to know how you can get involved please call 0208 831 6436 or email anthony. zysemil@richmond.gov.uk

