

Managed personal budgets

Outline of a research project
funded by the NIHR School
for Social Care Research



Improving the evidence base for
adult social care practice

How can service users who choose not to manage their own personal budgets still be ensured personalised support?

Personal budgets are a way of facilitating the personalisation of social care whereby services are tailored to the user's individual preferences. People can choose to manage their own budgets or use a 'managed personal budget', or a combination of the two. If a person declines to manage their own budget, a local authority care manager or home care provider can do so on their behalf. When this is the case, the person managing the budget, or a specialist support planner, may also help to plan a person's support.

It is important that people using managed personal budgets are not excluded from receiving personalised and flexible support, or from having control over that support, merely because they do not wish to manage their own budgets. Relationships may therefore need to change between service users and the third parties who manage their personal budgets in order to ensure that service users enjoy the choice, control and flexibility that is at the core of the personalisation agenda. Potential conflicts of interests will also need to be addressed.

This project

- will explore factors helping or hindering the delivery of personalised support to service users who opt for managed personal budgets, thereby contributing to the development of good practice.

It aims to

- review innovative practices in local authority commissioning and in the contracts for managed personal budgets, and assess how effectively these changes enable choice, control and flexibility
- examine the roles played by care managers and other support planners as intermediaries in shaping the expectations of personal budget holders and the demands they make on providers
- identify the factors in the behaviour of home care providers that affect their responses to changes in contracts and user demands
- assess how effective new contract and support planning arrangements have been in creating opportunities for choice and control, from the perspective of older personal budget holders.

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WHAT IS THE CONTEXT?

Personal budgets (PBs) provide a mechanism for facilitating self-directed support and thus personalisation of social care services. They can be taken as a cash direct payment; as funds held in a local authority (LA) or a provider account; or a mixture of the two. Where some or all of the PB is held in a LA account, it is known as a 'managed personal budget'. Personal budgets held in provider accounts are known as Individual Service Funds (ISFs).

PBs are being rolled out to all adult social care users in England, but it is expected that many people will prefer some form of managed budget. Older people, especially those without informal carers, often do not want what they perceive to be the burden of managing a budget. Evidence suggests that one in five may choose to deploy their personal budgets as LA-managed budgets. In the interests of equity, it is important that people using LA-managed PBs or ISFs are not excluded from receiving personalised and flexible support, or from having control over that support.

As more people begin to use LA-managed PBs and ISFs, the role of support planners will be central in shaping demand and creating opportunities for choice. A range of people may take on the support planning role:

- where PB holders opt for an ISF, the support planner may be a manager from the provider holding the ISF; the flexibility of timing and use of the ISF will be negotiated between the service user and provider manager.
- for LA-managed PBs, independent organisations that offer advice on self-directed support might be commissioned to act as support planners, or support planners might be LA-based care managers who take on a support planning role.

Across these permutations, there is scope for potential conflicts of interest and/or a lack of commitment to user-directed support, especially given the evidence of some care professionals' scepticism about older people's abilities to manage budgets. Research is needed to explore whether and how the

Key questions for research

- what are local councils doing to enable people whose budgets are managed for them to receive personalised and flexible care?
- what are care managers, providers and other specialist support planners doing to ensure service users receive personalised and flexible care?
- how satisfied are service users with the support they receive and the way support planners help?

relationships between LA care managers, support planners, home care provider managers and service users will need to change in order to afford service users self-directed care within managed PBs.

LA contracts with providers will similarly need to evolve to facilitate choice and control for people using managed PBs. Traditional contractual relationships that seek economies of scale from a relatively small number of providers, combined with care plans that focus on the delivery of specified tasks and visits at specified times, are now at odds with the ethos of self-directed, flexible support. In the new era of personalisation, home care provider managers may instead find themselves involved more directly in developing innovative approaches to outcomes-based support plans, not only for people using ISFs but for those using local authority-managed PBs as well.

HOW WILL THE PROJECT WORK?

The study will focus on LA-managed PBs and ISFs for older people using home care services.

STAGE 1: Selection of study sites

Three Councils with Social Service Responsibilities (CSSRs) will be selected for in-depth analysis. CSSRs will be eligible if they have a large proportion of older people within their populations, FACS eligibility levels of critical or substantial, a large proportion of people using managed PBs, and are known to

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be proactive in facilitating personalisation for people using managed PBs or ISFs. At least one of the councils selected will offer support planning through independent organisations.

STAGE 2: Interviews with commissioning or contracts managers

Semi-structured interviews will take place with one commissioning or contracts manager (as appropriate) in each site. This will investigate whether, how, and why these LAs have changed contracting and monitoring systems to encourage and enable personalisation for managed PB and ISF users. The research will also obtain managers' views on the impact of the changes to date, the perceived barriers to using contracting and monitoring systems to encourage change, and future plans. Examples of contracts between LAs and home care agencies will be requested to illustrate innovative features including mechanisms for encouraging personalisation, incentive schemes, and methods for dealing with financial risk and risks to service user well-being.

STAGE 3: Focus group discussions with care managers and support planners

These focus groups will explore the arrangements for LA-held PBs, ISFs and the working relationships between LA care managers, home care agency managers and service users. More specifically, the discussions will examine topics including: the role of support planning practitioners from local authority or external organisations in facilitating personalisation; how far care managers/independent support planners encourage service users to ask for flexible services and what role they play in helping service users devise personalised plans; and what roles specialist support planning services play in encouraging the flexible use of managed PBs. Where the LA encourages ISFs, the focus groups will also explore the extent to which ISF managers influence the content of the care package/support plan. Using scenarios, participants in each focus group will be asked to develop mock plans to illustrate how they would enable choice and flexibility for service users.

STAGE 4: Interviews with home care agency managers

These interviews will explore a range of issues including: what choice, control and flexibility can be offered by agencies over the timing and duration of visits, and the choice of activities; how far responses to demands for personalised support have impacted on the costs, range or level of services available for service users; and what training and other support is available/required for care workers to respond flexibly to service users' requests.

STAGE 5: Interviews with service users

Semi-structured face-to-face interviews with service users (or carers acting as proxies) will assess how far new contracting arrangements have been successful in creating new opportunities for choice and control, including an exploration of the impact of the 'novelty' (or otherwise) of the process for those who are accustomed to tightly specified care plans; service users' concerns; and their outstanding unmet needs. A total of 30 interviewees, representing the full range of managed PBs and ISFs, will be selected across the three sites.

Data from all five stages will be analysed using the Framework Approach.

Project publications

In addition to peer-reviewed academic papers, a bespoke dissemination package for the project will be developed through the Social Policy Research Unit's information office. In order to access as wide an audience as possible, findings will be distributed using a range of online and paper-based methods, with an emphasis on UK-based social care practitioners.

Social care practitioner networks, such as the UK Home Care Association and the Better Commissioning Network, will also be used to aid dissemination. Verbal dissemination will be through presentations aimed specifically at social care practitioners, for example, the Making Research Count series of seminars and Research in Practice for Adults.

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HOW DOES THE PROJECT FIT THE AIMS OF THE SCHOOL FOR SOCIAL CARE RESEARCH?

The study's findings will provide some of the first research available on managed PBs and ISFs, and will be of direct relevance for LA-based practitioners, other practitioners of social care (including independent support planners and managers of provider organisations) and holders of local authority-managed PBs and ISFs. Overall, the project will inform practice by adding to current knowledge about the most effective ways in which care managers, agency managers and support planners can enable choice and flexibility of social care support for people opting not to manage their own PBs.

This study has relevance across a number of SSCR's research themes: the empowerment of people who use social care – through managed PBs; how best to equip and support practitioners to provide optimum social care – through effective personalisation; what interventions, commissioning and delivery arrangements best achieve social care outcomes – through the most appropriate contractual and other relationships between local authorities, care managers, support planners, providers and service users holding managed PBs.

The Research Team

This study will be carried out by the Social Policy Research Unit (SPRU) at the University of York.

Parvaneh Rabiee, Research Fellow, will be responsible for the collection and analysis of data from support planners and service users. Her research interests include the needs of disabled and older people and their families, and challenges for service providers in responding to those needs. She has been involved in two longitudinal studies: choices adults and older people make about their support in the context of changing circumstances and the longer-term impacts of home care re-ablement services.

Kate Baxter, Research Fellow, will be responsible for the selection of study sites and the collection and analysis of data from commissioning/contracts managers and home care agency managers. Her research interests are in the commissioning and delivery of health and social care services. She has been involved in numerous studies of primary care commissioning.

Caroline Glendinning, Professor of Social Policy, will be responsible for overall guidance and management support to the research team. She has expertise and interests in the development and operation of markets in social care and long-term care, including comparative perspectives and different approaches to outcomes-focused commissioning of home care services in England.

Further information about the NIHR School for Social Care Research is available at www.sscr.nihr.ac.uk

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Personalisation of home care for older people using managed personal budgets

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