Care Services Improvement Partnership CSIP



Increasing the Uptake of Direct Payments

A self-assessment and action planning guide for local councils with social services responsibilities and their partners

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We help to improve services and achieve better outcomes for children and families, adults and older people including those with mental health problems, physical or learning disabilities or people in the criminal justice system. We work with and are funded by



DH INFORMATION READER BOX Policy Estates HR / Workforce Performance Management IM & T Planning Finance Clinical Partnership Working Document Purpose Best Practice Guidance **ROCR Ref:** Gateway Ref: 7579 Increasing the uptake of direct payments: a self-assessment and Title action planning guide for local councils with social services responsibilities and their partners Care Services Improvement Partnership Author 21 Dec 2006 **Publication Date Target Audience** Care Trust CEs, Directors of Social Services & Providers of Mental Health Service **Circulation List** Description This guide will enable local councils and their partners to assess what action is required to make routine access to direct payments a reality. The guide is best used in conjunction with the programme of regional workshops, which CSIP are running between December 2006 and April 2007. Cross Ref N/A N/A Superseded Docs Action Required N/A N/A Timing

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The authors would like to acknowledge the contributions made by the members of the Direct Payment Reference Group and others in developing this document.

Introduction

The White Paper, *Our health, our care, our say: a new direction for community services* presents a challenging agenda for all those involved in the provision of community services. Whilst this guide is based on the duty which local councils have to make direct payments to those people eligible, willing and able (alone or with assistance) to use them, it is intended to be supportive of the steps needed to make the significant changes which local councils and their partners face in taking this new direction.

There is both sufficient evidence of what is needed to make direct payments a standard option within social care services, and a clear policy direction for the improvement and development of community services. This guide combines the two to provide a means for local councils and their partners to ensure that their implementation of direct payments is as effective as possible. It does so by detailing the key activities, and their main components, which support effective implementation, providing local councils with the means to make an assessment of the current situation and the framework to develop a local action plan.

This guide is a starting point, enabling local councils and their partners (including people who use direct payments and carers) to assess what action is required to facilitate routine access to direct payments. It presents a brief outline of what has helped direct payments to work for people, drawn from literature and the experiences of people involved in promoting and implementing direct payments.

It is not a static document, but is open to review and development by all local councils and their partners. Initially this will take place through a series of regional events and locally-based meetings to be held between December 2006 and April 2007. From these will be drawn good practice suggestions and problem solving solutions, and these will be combined to provide a web-based solutions document for use nationally. By this means it is hoped to provide a resource which will enable all councils to benefit from each others experience, drawing on those solutions, or combinations of solutions, which best suit their local circumstances.

In addition to the routine collection of data¹, the CSCI business relationship managers together with CSIP social care leads will support local councils to set their own progress targets and look at how these can be built into local area agreements. Given the low baseline, a significant increase in the data collected in March 2007 compared to March 2006 is anticipated. However, where take-up has not improved as anticipated, or where participating local councils identify particular areas of weakness, we will work with them to identify how best they can be supported to overcome any problems identified.

1 Councils complete numerical and textual information for the CSCI Self Assessment (previously called the Delivery and Improvement Statement).

A further aspect of the wider work on direct payments being undertaken by DH is a review of the current exclusions to receiving direct payments, in order to widen the scope of their use. Extending the scope of direct payments requires changes to primary legislation and such changes will be made as soon as Parliamentary time allows.

Policy

Increasing the uptake of direct payments is an important part of the new direction for community services set out in *Our health, our care, our say*. Direct payments provide an immediate means of increasing the choice and control individuals have over the way in which their needs are met. Larger scale and more flexible use of direct payments will help organisations, professionals and people using services to create more flexibility and choice in services, as well as providing a key mechanism for delivering Individual Budgets in the future.

Since April 2003, local councils have had a duty to make direct payments available to all those people eligible to receive them and who are willing and able (alone or with assistance) to use them.

"We have changed the law so that where there was a power, there is now a duty so that councils must make a direct payment to people who can consent to have them. This means that direct payments should be discussed as a first option with everyone, at each assessment and each review."

Secretary of State for Health (2006) *Our health, our care, our say: a new direction for community services* CM6737 London: Department of Health

It is clear from the wide variations in uptake, both between local council schemes and across the different groups for whom uptake is monitored, that many people are simply not being offered direct payments when they should be. Furthermore, there is evidence that even when direct payments are available, a lack of adequate support or information, or unnecessarily complicated processes are hindering or preventing access.

The direct payments uptake project has been developed in order to support local councils and their partners to overcome these barriers and thus ensure that access to direct payments is a right not a privilege for those eligible to receive them.

"We expect to see the take-up of direct payments grow much further and faster, as the number of people who currently benefit is only a fraction of the number who could."

Secretary of State for Health (2006) *Our health, our care, our say: a new direction for community services* CM6737 London: Department of Health

Practice

Direct Payments arrangements should empower people and help maximise choice and control. They should be an integral part of the way in which needs are met by local councils and partnership agencies across all care groups and service areas. This is not yet the case, and more can be done to bring about the effective implementation of direct payments.

Extensive research has identified many barriers to increasing the uptake of direct payments² from which key activities essential to ensuring that direct payments are implemented successfully can be identified. A recent survey asked local councils and direct payment support organisations what they saw as the most important factors which make for a high or greater take-up of direct payments³. Over a hundred replied.

The most important factor by some way was:

• an effective local support organisation.

The other important factors cited were:

- good training for front line staff
- strong leadership from managers and local politicians
- staff who have a positive attitude toward direct payments
- good support through legislation, policy and guidance; and
- an existing demand for direct payments from those who are eligible.

From the available literature, a number of others can be added, including:

- streamlining of standard practice
- financial and operational procedures that make direct payments accessible
- effective partnership working at commissioning level to ensure adequate resources are available to make direct payments
- recognition that direct payments do not mean increased overall costs, and can increase value for money if implemented cost effectively
- use of family led Independent Living Trusts, and models for third party schemes
- advocacy for potential direct payment users
- involvement of disabled people in direct payment scheme design, implementation and ongoing practice
- equitable access to direct payments, regardless of the 'level' or 'longevity' of need; and
- equity between the level of resourcing of provided services and direct payments for an individual.

² For full list of the documents consulted please see Bibliography

³ Direct Payments Survey: A National Survey of Direct Payments Policy & Practice, 2006, PSSRU, LSE, Davey, Knapp, et al.

About this guide

This guide is designed to be used by local councils in partnership with direct payment users, carers, local support services and organisations of disabled people, and partnership agencies (such as mental health trusts), and wider networks, such as learning disability, mental health, and family carer networks⁴.

It will support local councils and their partners to identify solutions to process, policy and procedural issues, including those relating to direct payment support arrangements, in order to help improve uptake. This in turn will support the promotion of independent living, and a greater personalisation of services.

From the policy and evidence we have identified six areas for assessment and action

- Leadership
- Straightforward systems
- Learning and development
- Communication
- Comprehensive support
- Commissioning

Each of these sections outlines the main issues which need to be addressed and provides a self-assessment and action planning format. It is anticipated that councils will download and adapt this format to suit their requirements.

www.dh.gov.uk/PolicyAndGuidance/OrganisationPolicy/FinanceAndPlanning/Di rectPayments/fs/en

As well as benefitting people who take up direct payments, this work will be very important in preparing the ground in the event of a national roll out of Individual Budgets. The intention is not that IBs replace DPs. Instead, DPs will be one of the mechanisms for delivering IBs which pull together a number of funding streams to create a whole systems approach to care.

4 Local Councils are reminded of the Disability Equality Duty and the legislative requirement to consult widely.



Direct payments should be promoted as a part of standard practice within each local council's social care service, including those provided in partnership with other agencies, such as mental health services.

To achieve this there needs to be a clear strategy for implementing access to direct payments for all those eligible to use them.

Such a strategy will need to:

- be approved by council members, and be led by all senior staff across the council
- include implications for, and actions agreed with, other council departments and key partner agencies, such as PCTs
- detail the actions necessary to ensure full access to direct payments in respect of:
 - service area strategies/planning
 - systems and procedures
 - communications
 - learning and development; and
 - support for staff and people eligible to receive direct payments.
- provide for support service arrangements which cover all 'client groups', and include planned expansion to ensure a comprehensive service as numbers of direct payment recipients increase
- be regularly reviewed by a group of all key stakeholders with particular emphasis on direct payment service users participation in the monitoring and development of the local council scheme
- set and review increasing uptake targets for each 'client group'; and
- provide for arrangements to review success and build on learning.

1. Direct payments are promoted as a part of standard practice within each local council social care service (including those provided in partnership with other agencies, such as mental health services)

Key Statement 1.1: There is a clear strategy for implementing access to direct payments for all those eligible to use them.⁵

		ssessme at extent		Action Comments – If YES, explain how; If PARTLY, state what has and what will be done; if NO,
	Y	Р	Ν	detail what will be done
1.1.1 The strategy has been approved by Members, and is led by all senior staff across the council.				
1.1.2 The strategy includes implications for, and actions agreed with, other council departments and key partner agencies, such as PCTs.				
1.1.3 The strategy details the actions necessary to ensure full access to direct payments in respect of: service area strategies/planning; systems and procedures; communications; training; support to workers and people eligible to receive direct payments.				
1.1.4 Support service arrangements cover all 'client groups', and include expansion plans to ensure a comprehensive service as numbers of DP recipients increase.				
1.1.5 Implementation is regularly reviewed by a group of key stakeholders with particular emphasis on direct payment service user participation in the monitoring and development of the local council scheme				
1.1.6 Uptake targets are set and reviewed for each 'client group'				
1.1.7 Arrangements are in place to review and revise this strategy				

A3 versions of these forms are available for practical purposes and can be downloaded separately.

⁵ This may form part of a broader strategy, alongside Individual Budgets/In Control.

Part2 Straightforward systems

Standard administrative and financial procedures apply equitably and transparently to the process of obtaining social care services, whether through direct payments or provided services, or a combination of both.

Mapping any differences between the access routes for direct payments and provided services will highlight where access, process, practice and procedures can be improved/streamlined to ensure equity in the acquisition of both direct payments and provided services.

A) Access, process, practice and procedures

Direct payments need to be incorporated as a standard option within existing care management⁶ framework. Apart from some additional financial monitoring, the same processes and procedures should apply for all people irrespective of how they choose to meet their needs, either through directly provided services and / or a direct payment.

Improving the Life Chances of Disabled People (PMSU, 2005) indicated that one barrier to direct payments being offered was the focus on 'an assessment for services' instead of 'an assessment of an individual's need(s)'. This had tended to create direct payment systems and arrangements as an extension of provided services, rather than as a means for the individual to determine how best their needs can be met.

The completion of this section should take account of each of the following steps:

- initial contact
- assessment or review of needs
- application of eligibility criteria
- charging process (financial assessment process) where appropriate
- exploration of **care planning options**. This needs to take into account that direct payments are intended to be used flexibly.
- accessible information provided about direct payments
- establish the actual cost(s) of the care plan option(s)

6 Throughout this document, references to care management include the processes as contained in: Care Programme Approach; Assessment of Children in Need and their Families; Single Assessment Process; and Carers' Assessments.

- completion of specialist assessments as required e.g.risk assessments⁷
- application of 'best value' to the care planning options
- transparency provide the information about the actual cost to commission the 'best value' care plan option(s) identified with any financial assessed charges/contribution
- funding application/approval for care plan option(s)
- direct payment or council provided services or a combination of both with the agreed financial resources; and
- review.

Local councils will need to identify and implement a robust and standardised process for access to provided services and direct payments to create equity across provided services/direct payments, and care groups. This process requires consideration of partner agencies and staff involved in integrated assessments, to ensure equitable access. Councils are reminded that direct payments are not an 'either/or' option, and people may wish to choose part direct payment and part provided services. This option should be widely promoted. The right support, advice and information about direct payments is also essential to enable people to choose whether or not a direct payment will be right for all or part of their service provision.

⁷ Local councils will need to take account of the emerging National Approach to Risk Framework and the Supported Decision Tool, to be published in February 2007, when considering standard care management practices in relation to direct payments.

2. Standard and accessible administrative and financial procedures apply equitably and transparently to the process of obtaining direct payments or provided services, or a combination of both

Key Statement 2.1: There is a standard procedure for accessing social care services whether through direct payments or provided services, or a combination of the two.[®]

		ssessme at exten		Action Comments – If YES, explain how; If PARTLY, state what has and what
	Y	Р	Ν	will be done; if NO, detail what will be done
2.1.1 A standardised procedure forms part of the local council's direct payments strategy				
2.1.2 For integrated/partnership services, this procedure has been agreed with partner agencies, such as PCTs				
2.1.3 This service is in place in all service areas/client groups, and is publicly available.				
2.1.4 The effectiveness of this procedure is regularly reviewed with all key partners				
2.1.5 There is a mechanism to ensure that all eligible people are offered the option of a direct payment				
2.1.6 Decisions on eligibility are reached before care planning options are discussed and agreed				

⁸ This should be tested out for each service area/client group, and should include any variations that currently exist in accessing particular types of service.

B) Financial, administrative and audit processes

In some local councils the nature in which direct payment arrangements have evolved has led to overly complex financial and audit systems and in turn onerous direct payment arrangements.

As far as possible, council's financial and audit systems should deliver the greatest flexibility possible for individuals.

Considerations in assessing financial systems include:

- developing a 'light touch' monitoring system which is proportionate
- ensuring that peer support and local (user led)⁹ direct payment support services can provide support, advice and information
- breaking down the barriers and myths that direct payment monies should and must only be used to purchase traditional social care services
- developing systems that both encourage diversity and support the greater personalisation and individualisation of the use of direct payments
- measuring success through outcomes achieved that result in active citizenship and /or individuals self determining how they choose to use their direct payments to meet their needs
- ensuring that any newly developed systems and processes are not perceived as policing mechanisms
- that it is direct payment users who should be active partners in the development of financial and monitoring processes which support and increase the use of direct payments
- proportionate resources are used by local councils to monitor direct payments; and
- the system recognises that learning and making mistakes is an inherent and important part of people having greater control and responsibility.

9 Where user led support services do not exist, local councils should consult with local voluntary or in house support service.

2. Standard and accessible administrative and financial procedures apply equitably and transparently to the process of obtaining direct payments or provided services, or a combination of both

Key Statement 2.2: Financial and audit arrangements are straightforward and the minimum required.

	Assessment To what extent met?			Action Comments – If YES, explain how; If PARTLY state what has and wha will be done; if NO,	
	Y	Р	Ν	detail what will be done	
2.2.1 Financial and audit systems are designed to support the greater individualisation, personalisation and flexibility inherent in the use of direct payments, and are 'easy to use' for direct payments users					
2.2.2 Financial systems accommodate the tasks associated with direct payments as a routine activity e.g. payment/charging, monitoring and claw back processes support the use of direct payments as the system design takes account of these tasks					
2.2.3 The financial and audit system is able to accommodate and support development and expansion					
2.2.4 Audit procedures are proportionate and helpful					
2.2.5 Direct payment users and people who support them are involved in the development, maintenance and ongoing improvement of these systems and processes					

Part3 Learning and development

There is a training strategy designed to ensure that all relevant staff have sufficient knowledge in order for direct payments to be a first option for the meeting of individual's social care needs.

This training and induction programme will clearly describe direct payments as a desired first option for all local citizens eligible for social care. It will thereby play a major part in delivering the cultural change required, to shift the balance of power to disabled people and carers.

A clear learning and development strategy is integral to the success of implementing direct payments and increasing up take. This will need to:

 assess the training requirements of local council staff and relevant partner agencies, such as:

 Direct Payments Finance Staff, Budget Holders, Managers, Members, and Senior Managers, in addition to practitioners and support service staff

- set training objectives, such as
 - Engendering positive staff attitudes towards direct payments
- determine how the identified training requirements will be delivered, and clarify the training required, and in what categories e.g.
 - Induction
 - Awareness
 - E-Learning
 - Introduction to direct payments
 - Using direct payments effectively
 - Refresher courses
 - Surgeries 10
- clear links should be developed between Continuous Professional Development (CPD) and training programmes for direct payments
- identify opportunities for online training, information and ongoing support for local council staff and relevant partner agencies and direct payment support organisations. An example of E-Learning guides produced by Kent County Council can be accessed at: www.kentdp.co.uk/Kcc_Staff/Process_Guide.htm; and
- develop an evaluation strategy
 - The effectiveness of training and induction programmes should be evaluated regularly and improved in response to the ongoing evaluation of training programmes.

10 Local councils may find it useful to operate regular surgeries for operational staff with their local support services, direct payment staff and a finance officer to support the induction and training programmes.

Courses and materials should be developed in partnership with local direct payments support schemes, direct payment recipients, operational staff and direct payment finance staff.

- materials will need to be salient and practically useful. Flowcharts, checklist, process charts and practical information are a valuable resource
- web based materials e-learning materials and/or a direct payment website are another way of supporting the learning and practice of operational staff and managers.

Training should be **delivered in partnership** with local direct payments support schemes, direct payment recipients and relevant partner agencies.

The following should be taken into account:

- reward and incentive schemes are useful to support disabled people/direct payment recipients, to deliver all or part of the training; and
- resources required to deliver a rolling training programmes will need to be identified, both in terms of staffing and finances.

The overall training programme should include:

- an overview of the process, and practice for operational staff
- links between direct payments and independent living¹¹
- reinforcement of the duty to make direct payments to those eligible
- the role direct payments have to support the outcomes set out in 'Our Health, Our Care Our Say' and the Self Assessment Evidence Set (formerly know as the Delivery and Improvement Statement) which will capture evidence of outcome focused performance, for adults, which the Department of Health is working closely with the Commission for Social Care Inspection (CSCI) to develop
- the role of local direct payment support schemes
- the difference between direct payments and provided services
- the direct payment experience opportunities to meet and hear from a direct payment recipient(s)
- case examples; and
- practical exercises to enable participants to express what they feel are the barriers, and then to identify actions to overcome these.

11 Training materials are available from the National Centre for Independent Living at www.ncil.org.uk

3. There is a learning and development strategy designed to ensure that all relevant staff have sufficient knowledge in order for direct payments to be a first option for the meeting of individual's social care needs

Key Statement 3.1: Direct payments training is delivered as part of core training on care management to all assessors and managers, and included in all staff induction and ongoing development programmes.

		ssessme lat extent		Action Comments – If YES, explain how; If PARTLY, state what has and what will be done; if NO,	
	Y	Р	Ν	detail what will be done	
3.1.1 Direct payments are integral to care management training for all staff, including partner agency staff who assess social care needs					
3.1.2 Training is available to all local council and partner agency staff involved in the offering, making or use of direct payments					
3.1.3 Training is available to local council and partner agency staff in a position to provide information on direct payments					
3.1.4 Training is available in a variety of formats, including accessible formats, to meet the needs of those who might access it					
3.1.5 There is a range of training available to meet the differing needs of staff					
3.1.6 Training is developed and delivered in partnership with relevant staff groups, the direct payments support scheme, direct payment recipients and relevant partner agencies					

Part4 Communication

The availability and benefits of direct payments need to be effectively communicated.

Accessible and appropriate information about direct payments is routinely available to all those who might wish to consider and/or use direct payments and others who may support or advise them. Guidance to staff needs to be clear and enabling.

Local councils should consult with all groups of disabled people and carers about what information is useful, in what format(s) and when and how this is made available. Councils will also need to complete a review of all literature and information available to people who are eligible to receive/or who are receiving social care and carers' services.

A communications strategy will be required to ensure that:

- information about direct payments is intrinsic in all literature
- information is accessible, concise and appropriate for all groups of disabled people and their families/carers, ensuring it is available in other languages.
- dedicated and useful direct payment information materials exist
- materials are inclusive of direct payment support scheme information and are useful
- information about how to access peer support and/or direct payment support schemes is clearly available for people to make enquiries or ask for more information
- materials are accessed in a standardised way i.e. provided to everyone at a review and at an initial assessment; and
- comprehensive and accessible information is also available via a website.

Some councils and national organisations have also produced a Video/DVD. One example is the 'breaking barriers' dvd/video available from Equalities National Council, *www.encweb.org.uk/DirectPayment.htm*

Local councils will also need to consult with staff to identify what information and ongoing support and advice will be most useful to enable staff, including those from partner agencies, to be confident and develop positive attitudes about direct payments, ensuring they are offered routinely as a standard option within all social care services.

In consultation with staff, including those from partner agencies, local councils should:

- develop clear and user friendly practical guidance for staff in a number of formats, and ensure this is accessible via a website
- ensure information available to staff sets out;
 - the legal duty of local councils to routinely offer direct payments as a standard option within all social care services and,
 - clearly identifies who is not eligible, as set out in the 2003 regulations
- provide opportunities for staff to build confidence and develop natural support networks, through the introduction of peer support/mentoring and surgeries
- use existing newsletters/or develop one to update staff of changes, improvements and developments, this may include local councils achievements against targets for direct payment uptake and case examples/real stories from staff and or direct payment users
- in partnership with local peer support or direct payment user groups, create opportunities for staff to meet direct payment users and their carers/families; and
- develop direct payments 'champions' in teams or localities.

4. The availability and benefits of direct payments are effectively communicated

Key Statement 1: Accessible and appropriate information about direct payments is routinely available

		ssessme at exten		Action Comments – If YES explain how; If PARTL state what has and wh	
	Y	Р	Ν	will be done; if NO, detail what will be don	
4.1.1 Information is available to people at initial contact, assessment and at review.					
4.1.2 Information to support people who are about to use direct payments is readily available from support schemes.					
4.1.3 Information is available from support schemes to provide ongoing advice and information to people already using direct payments					
4.1.4 Information has been developed in partnership with disabled people, carers and direct payment support schemes					
4.1.5 Information is made available in the full range of accessible formats					
4.1.6 Comprehensive information is available in all languages required by the local population					
4.1.7 The role of the support scheme and contact details are included in all information					

4. The availability and benefits of direct payments are effectively communicated

Key Statement 2: Guidance to local council and partner agency staff is clear and enabling

		ssessme at exten		Action Comments – If YES explain how; If PARTI state what has and wh	
	Υ	Р	Ν	will be done; if NO, detail what will be don	
4.2.1 Guidance to staff is appropriate and accessible to all those who might offer or make direct payments					
4.2.2 Guidance to staff promotes direct payments as a standard option within all social care services					
4.2.3 Guidance to staff clearly states who is not eligible to receive direct payments – as detailed in the 2003 regulations					
4.2.4 Guidance to staff includes details of who to contact for further advice, support/mentoring					
4.2.5 Regular updates are provided to staff, including developments, changes and improvements to the DP scheme					
4.2.6 Opportunities exist for staff to meet with direct payments users and their families					
4.2.7 Direct Payment 'Champions' are available across localities/teams					

Part5 Comprehensive support

The making and use of direct payments is adequately and effectively supported

Cited as one of the most critical factors in the successful implementation of direct payments, support schemes¹² will be integral to your local council's direct payments strategy. These organisations work in partnership with local councils to provide support for prospective or existing direct payment users. Research suggests that support services led by disabled people and carers who themselves use or manage direct payments are particularly effective.

Appropriate investment needs to be made available to develop, support and / or strengthen local direct payment support schemes.

Local councils need to set out how they will:

- continue to support and develop local direct payment support schemes; or
- develop such organisations where none exist.

They will need to consider the financial equity between the resources currently committed to fund and organise provided services vs. the resources invested or required to establish and/or continue to develop direct payment support schemes to support the Government's agenda:

- councils will need to consult widely with existing groups to map what resources and services are already available, what gaps exists and set out a strategy to develop effective direct payment support schemes
- they will need to consider the resources that are currently invested in the commissioning and organisational arrangements to set in place and maintain provided services to explore how similar resources can be made available to finance direct payment support schemes
- commissioning strategies will need to identify how infrastructure costs and ongoing resources invested in provided services can be redistributed in an equitable way between provided services and direct payments; and
- commissioning strategies for support schemes should be careful to ensure that opportunities for greater personalisation of services also include an adequate range of support from local direct payment support schemes. This will ensure that local support schemes will develop and build capacity to serve the needs of the local population. It is especially important to ensure specific groups of people are not disadvantaged, by failing to address this within commissioning strategies for example direct payment support for people from minority communities, or low uptake groups for direct payments.

12 This includes "in house" direct payments support schemes.

5. The making and use of direct payments is adequately and effectively supported

Key Statement 1: Adequate support is available to people to consider and to use direct payments

		sessme at extent		Action Comments – If YES,
				explain how; If PARTLY, state what has and what
	Y	Р	Ν	will be done; if NO, detail what will be done
5.1.1 Support service arrangements cover all 'client groups', and include planned expansion to ensure a comprehensive service as numbers of DP recipients increase.				
5.1.2 The support service(s) is able to provide support to all people wishing to consider or use direct payments especially under represented groups such as B&ME communities and people with mental health difficulties				
5.1.3 Access to peer support or user groups is available for all people using direct payments				
5.1.4 There is a clear link between the further development of support services and increasing the participation of people who use or might use direct payments				
5.1.5 Council and partner agency staff are able to provide information about direct payments and refer people to other sources of support, advice and information to consider further whether to choose direct payments				
5.1.6 Clear guidance is available directing council and partner agencies staff to point(s) of contact and sources of further advice, support and information so staff are aware of who to contact in case of any queries or concerns they have about direct payments				
5.1.7 Commissioning strategies include development of an adequate range of support within local support schemes to serve the needs of the local population.				

Part6 Commissioning

Commissioning activity supports the increasing uptake of direct payments.

The development and adoption of appropriate commissioning strategies is essential to embed these changes in an appreciation of the wider needs of the local population and to ensure that funds are unlocked from "block" contract arrangements and in-house provision and made available for the increased uptake of direct payments.

The Health & Social Care Act 2001, S57, created a duty from April 2003 for local councils to make direct payments to those people who are eligible and who choose to receive them. This duty is a legislative requirement, and adherence to this should be a priority for all local councils

This requirement means that accurately projecting the demand for direct payments overall and within each care group is vital if adequate money is to be available to make direct payments to those who have a right to receive them.

This will involve:

- an increasing transfer of funds from those budget lines that are used to purchase provided services, and/or in-house services to budget lines for direct payments
- moving steadily away from 'traditional' block contracting arrangements and/or developing more creative and flexible arrangements with providers led by user preferences. This could be achieved by developing;
 - cost and volume contracts and framework/call-off contracts which can take account of projected increases of direct payment recipients and avoids scenarios where councils are "double paying" for services.
 - an agreement with providers that where a direct payment recipient chooses to purchase domiciliary care from a provider who has a contractual relationship with the council, the council's agreed contractual prices are adopted; and
- related increasing targets for numbers of people in receipt of direct payments.

Councils will need to do this in one or more **commissioning strategies**. These strategies are often developed for specific client groups, for example disabled people, which may include people with learning difficulties and people with physical and/or sensory impairments. They may also be targeted at specific age groups, for example young people, people of working age or older people. Each such strategy needs to flow from the strategic plan described in section 1 (Leadership); they will need to be aligned, both, one with another, and with the commissioning activity of partner agencies, particularly health and housing.

It is important that councils work with their partner agencies to look at the impact of direct payments on the use of other services, such as health or housing support, and that as use increases this is fully taken into account in the pattern of funding for overall community need.

Supporting People are able to make direct payments, at their discretion, to people who are also receiving community care direct payments.

Commissioners should be fully conversant with the new policy direction for community services and the role of direct payments and individual budgets in shaping the future of care service provision. In doing so, they should have regard to the audit commission publication *Choosing Well: Analysing the costs and benefits of choice in local public services www.audit-commission.gov.uk*. They should also have formal links with people who use direct payments and carers/families in order to fully inform their decisions.

6. Commissioning activity supports the increasing uptake of direct payments

Key Statement 1: A strategy exists to promote flexible commissioning and to ensure that budgets are readily available to support the increased uptake of direct payments

	Assessment To what extent met?			Action Comments – If YES, explain how; If PARTLY, state what has and what
	Y	Р	Ν	will be done; if NO, detail what will be done
6.1.1 There is a mechanism for increasing the amount of money available for direct payments as demand increases across all service areas/client groups				
6.1.2 Commissioning partners are engaged in discussions about the wider impact of direct payments				
6.1.3 Commissioners receive sufficient training and support to ensure that the personalisation of services through a greater use of direct payment/individual budgets is incorporated in all commissioning strategies				
6.1.4 Provider agencies are engaged in discussions about the change from block arrangements to individual funding and new contractual arrangements				
6.1.5 Commissioners have formal contact with people who use direct payments and carers/families				

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