

# Providers Workshop – 7 September 2009

## Summary

### Aim

The aim of the day was to build on the provider event held earlier in the year and discuss an Island-wide approach to personalising care services and support for older and disabled people. It provided updates on issues, enabled providers to explore how they might need to change and how the TSC team could help providers through this change.

Providers themselves wanted to look at and understand several areas, including, amongst others:

- Understanding personalisation – in particular, across the different client groups
- How the funding works
- Transition from block contracts to individually purchased care services and impact of this
- Outcomes for service users
- Support planning
- Provider/voluntary sector development
- Producing a skilled workforce
- Improving communication

There were several presentations which are attached as **Appendix A**. These included background information from NDTi – the event's facilitators, updates from the Local Authority, including support from the Contracts Team, and the All Pay presentation about DOSH cards.

### Breakout Session

Part of the format for the day included a breakout session, during which delegates split into 4 groups to look at: "User Led Organisations", "Micro-provision", "Developing a consortium approach" and "From individual to strategic change". Each group was asked to think about opportunities, challenges, how to deliver these areas and what support they may need to do this.

**Opportunities** ranged from champions emerging who have had a positive experience of PBs, time banks where skills, needs and services are matched up as well as using innovation to deliver services through to sharing information on services or equipment and increased training opportunities.

**Challenges** identified included the difficulties for large organisations to be user-led, safeguarding issues and positive risk enablement, monitoring how effective services are, consistency v flexibility and existing regulations.

**Issues** for organisations were around transition from block to spot contracts, funding, information sharing and capacity building.

It was felt that in terms of **support needed** this primarily involved better communication with more information shared at a local level, setting up a website to include an information database and ascertaining gaps in services. It was also felt that in order to deliver the transformation agenda there would be need to be training for all, a clear timetable for progress, greater service user and carer involvement/co-production and to use information from the pilot as part of the gap analysis process.

### Personalisation Champions

We asked providers to come forward if they were interested in becoming Personalisation Champions and we had a very good response with six providers interested.

Delegates were also asked for ideas on how to deliver and move personalisation forward, with almost 30 being suggested.

As a result of the day, we are going to do a number of things, including:

- Opening up training arranged for public sector staff to include provider's staff to ensure consistent knowledge and understanding around SDS.
- Work with providers to help to facilitate greater service user and carer involvement.
- Support providers to carry out gap analysis through the Council's Contracts Team.

The full feedback from the day is attached as **Appendix B**.



# WELCOME!



## Personalising services & support for older & disabled people on the Isle of Wight

**Working together to make change happen**

**Monday 7<sup>th</sup> September 2009**

**0900 ~ 1600**

**Gurnard Pines, Cowes**

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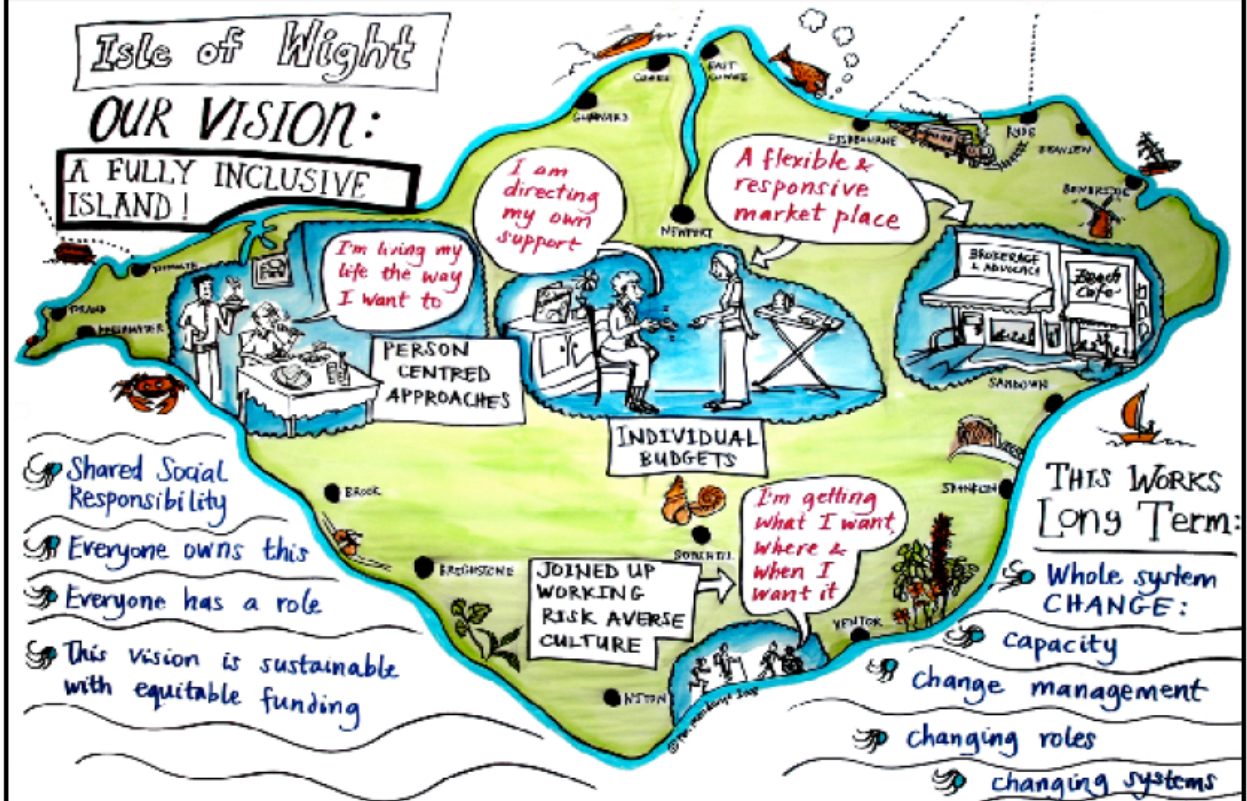
## AIMS OF TODAY

- Bring providers of care services and support together with those leading personalisation developments on IOW to....
  - Update everyone on issues and developments
  - Share lessons and experiences so far
  - Think through what needs to change and how
  - Identify what help and support is needed and how that might be delivered
  - Agree the way forward and next steps

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## ISLE OF WIGHT VISION



National Development Team for inclusion

### Working together to personalise services and support on the Isle of Wight

Monday 7<sup>th</sup> September 2009

Helen Bowers: Director- Older People & Ageing Programme / Cathy  
Smith: NDTi Associate /Project Lead for IOW Programme

[www.ndti.org.uk](http://www.ndti.org.uk)

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## Principles & practices of personalisation

### Fundamental Principles

- Focus on people and their lives, not services
- Promote self management & autonomy
- Offer real choice & control
- Focus on outcomes, not interventions
- Emphasise what people can do, not what they can't
- Promote inclusion & participation in communities

### Practices

- Choice & control over your support
- Upfront allocation of money (resource allocation)
- Choice in how to plan your support and how to use your money with help available to do this (e.g. brokerage)
- Choice of delivery (e.g. direct payments, commissioned services, mixed package, service fund)
- Flexibility to purchase non traditional services
- A responsive and flexible market (e.g. micro & social enterprises)

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## Challenges

- Are you providing services and support that people with a PB would choose to spend their money on?
- Are you ready to respond to (& engage in) a staged reduction in block contracts for specialist, institutional services?
- Can you produce clear, accurate costs and options for individuals in a way that is attractive to them?
- This includes options for ways to spend their budget and pay the organisation
- Are staffing & back office administrative functions sufficiently flexible to manage numerous contracts with individuals?
- Is the organisation ready to market itself directly to people and their family/friends if it needs to?

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## Opportunities

- Are you looking to develop your services to provide community based solutions and supported living?
- Are you wanting to generate new business by offering the best person centred support and services to new entrants and existing users?
- Could you develop or provide "spin-off" services e.g. as large providers with the infrastructure to manage and hold people's budgets on their behalf; to act as brokers; to recruit and manage personal assistants; to diversify and act in different ways to suit the needs and lifestyles of many different groups?
- Are you or could become a user or peer led organisation or partner?





## Learning from Examples

- Review where you are now and co-design your services
- Start by looking at what's working & not working from different perspectives
- What needs to change?
- What needs to be developed that doesn't exist?
- What's working well that needs to be extended?
- Richmond commissioners and providers working together to broaden opportunities and reduce isolation at weekends and evenings
- Oldham network of providers supports organisations through change
- Barnsley third sector consortium Arena provides support planning and brokerage services across different user and carer groups

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## How Ready Are You?

- Deliver person centred support to individuals that promotes inclusion?
  - Support the delivery of above?
  - Transparent, accessible information about costs?
  - Individually accountable?
  - Flexible workforce and infrastructure?
  - Proactive, adaptable, outward looking
1. Ready now & willing to share lessons
  2. On track but lots to do?
  3. Just getting used to the idea but willing to learn & adapt
  4. Unsure & anxious about the future
  5. Don't see the need for change

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## Where Are You?

- Which one are you?
- What information and/or support do you need to get to (1)?
- What can you offer or contribute to local market development?
- What else will help you develop to deliver the IOW (and national policy) vision?

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## Transforming Social Care 2009 – 2011 Personalising and Sustaining Island Social Care for the Future

Gill Vickers  
Interim Head of Social Care



## What is Transforming Social Care (Personalisation)?

- Gives the individual choice and control
- Moves from:

professional assessment /provision of services by the local authority



Supported self-assessment/  
choice of support and providers  
Using personal budget

- Builds on universal services e.g. leisure, employment, education



## Glossary

- **Personalisation** – *from client to citizen, a personalised social care service that fosters independence and dignity to purchase their support*
- **Individual budgets (IBs)** – *Different funding streams brought together into one budget paid to the individual in order to purchase their support*



## Glossary continued..../

- **Personal budgets** - *A single source of funding (originally from social care, but, within pilots, also from health) for an individual*
- **Self-directed support** – *support chosen by the individual to meet the needs they have identified in a way that suits them*



## Glossary 3...../

- **Shared Assessment Questionnaire (SAQ)** – *A questionnaire enabling an individual to assess their own needs supported by a professional*
- **Resource Allocation System (RAS)** - *How a local authority determines the amount of money allocated against needs to form an individual budget*





## Where do we need to get to?

The targets from central government are:

- 15% of all service users\* in receipt of personal budgets by end of March 2010 (approx. 1,000)
- 30% of all service users\* in receipt of personal budgets by end of March 2011 (approx. 2,000)



## Isle of Wight Personal Budgets Pathway



# The Shared Assessment

## 3. Meeting personal care needs

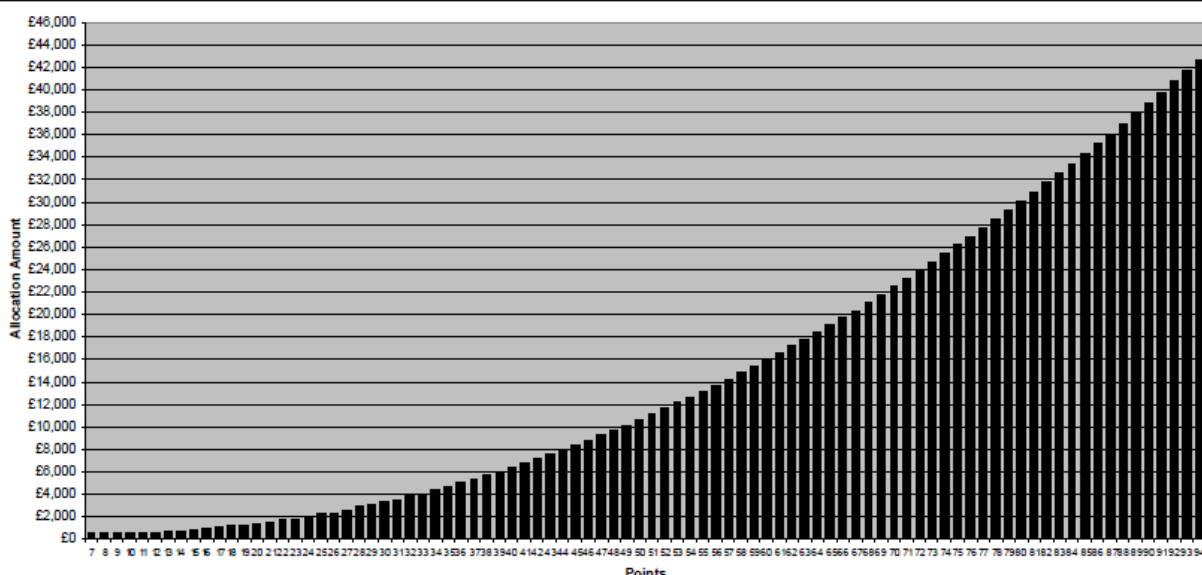
This part is about looking after yourself – things like washing, dressing and personal support needs.

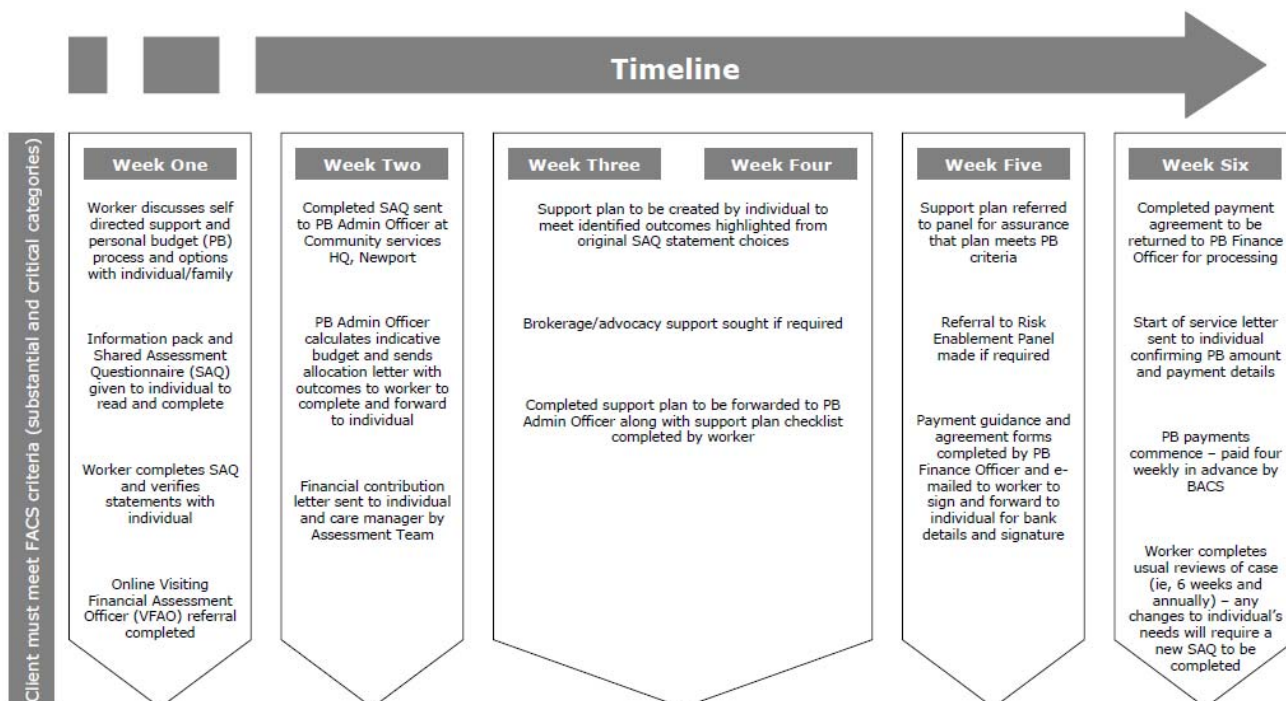
Tick **one** statement that best fits your circumstances:

|    |  | Your view                | Carer's view             | Worker's view            | Final agreement          | Outcome  |
|----|--|--------------------------|--------------------------|--------------------------|--------------------------|--|
| a) | I am fully independent and need no support with this area of my life.                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | To be clean, dressed and maintain my personal hygiene in the way I choose. |
| b) | I need someone to prompt me occasionally with my personal hygiene (e.g. a telephone call).                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| c) | I need occasional physical support with personal care, but not every day (e.g. bathing).                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| d) | I need physical support with some personal care tasks at least once a day (e.g. washing, getting dressed). | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |
| e) | I need physical support with personal care tasks several times every day (e.g. toileting).                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |  |



## Resource Allocation System





## Next steps in the process

- Outcomes letter sent to individual with indicative personal budget allocation.
- Individual to develop a support plan (Info pack has guidance).
- Care Manager to sign off the plan (checklist)
- Panel meeting to review Support Plan.
- Refer to Risk Enablement Panel if required.

## Payment Guidance / Agreement

Payment Guidance contains:

- Rules on how to use the money
- Records to keep
- An outline of how money will be paid and what happens if there are problems.

Payment Agreement contains:

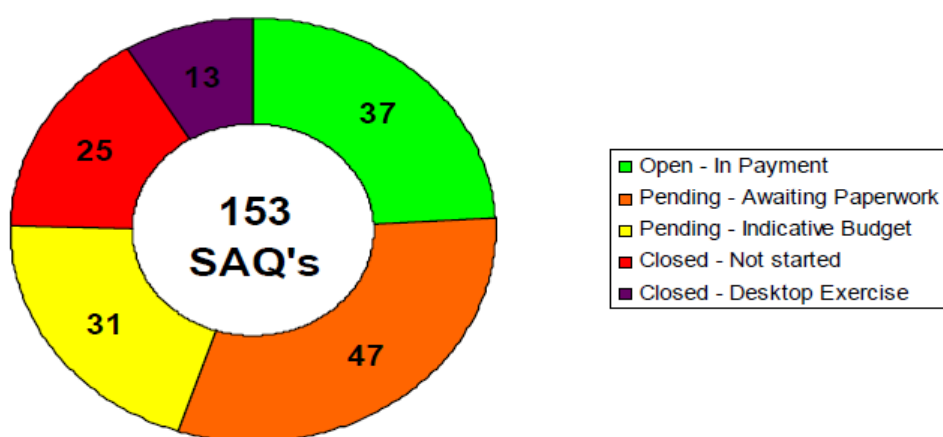
- Signed agreement
- Bank information



## Where we are now

### Personal Budget Progress

Correct as at 2nd September 2009





## Breakdown of cases

| Count of CLIENT NAME             | CLIENT CAT. |    |    |    |    |             |
|----------------------------------|-------------|----|----|----|----|-------------|
| STATUS                           | CHILD       | LD | MH | OP | PD | Grand Total |
| (1) OPEN                         |             | 15 | 5  | 6  | 11 | 37          |
| (2) PENDING - AWAITING PAPERWORK |             | 27 | 2  | 8  | 10 | 47          |
| (3) PENDING - INDICATIVE BUDGET  | 1           | 13 | 7  | 2  | 8  | 31          |
| Grand Total                      | 1           | 55 | 14 | 16 | 29 | 115         |



## Transforming Social Care 2009 – 2011 Personalising and Sustaining Island Social Care for the Future

Gill Vickers  
Interim Head of Social Care



## Ibsen Report from National Pilots

- Mental Health service users - significantly higher quality of life
- Younger disabled people -higher quality of care and more satisfied with the help they received
- People with learning disabilities -greater choice and control and opportunity to build better quality networks



## Older People

- Older people – less likely than other groups to report higher aspirations as a result of the individual budget process
- Those in the IB group reported lower psychological well-being
- Many people and their carers did not want the additional burdens they associated with planning and managing their own support



## Progress report summer 2008

- *Older people liked knowing the amount they have to spend*
- *“There have been really innovative ideas developing about how to use this resource”*
- Over 1500 older people taking IBs at pilot sites



## Cost Comparisons

- IBs cost on average about £280 compared with £300 for standard mainstream services



## Impact on providers

Little or none:

- Where I.B.s are 'virtual budgets' managed by the local authority
- Individuals unable to purchase innovative types of support due to low R.A.S.



## Where I.B.s have led to new demands

Concentrated among home care providers:

- Cleaning
- Transport
- Shopping
- Sitting/company





## Opportunity for new business?

- Day centre provider developed domiciliary care
- Increased client base if flexible – e.g. business trebled amongst people wanting smaller packages of care
- Recruitment and management of employing P.A.s



## Examples of provider responses

- Drama group
- Links with Learning & Skills Council to develop educationally focused service
- Links with telecare and M.o.W. organisations to sub-contract part of potential IB packages



## Common provider concerns for the future

- Demand for short-notice and unplanned care
- Service users may resist re-ablement type support [*mental health providers*]
- Not having different carers (on a rota) may blur professional boundaries
- Forward planning of services without local authority contracts could be difficult
- Mixed views from providers on whether IBs would hinder or benefit recruitment and retention



## More provider concerns

- Non payment of invoices (no real evidence of this to date)
- Individual invoicing – additional burden on providers
- Need for marketing and associated costs



## Working with providers

- Sharon White – Contracts Manager
- Carl Francis – Contracts Officer



## Milestones

- Pilots with independent/3<sup>rd</sup> sector – September 2009:
  - Brokerage
  - Advocacy supporting Personalisation
  - Advice, Information & Guidance
- Series of provider workshops September 2009 – 2010
- Provider training Nov 2009 – March 2010



- Development of Personalisation Champions and media campaign around personal budgets: October – December 2009
- Work for FACE national pilot: October – December 2009
- Implement new FACE Resource Allocation System January 2010



**Isle of Wight**

**OUR VISION:**

**A FULLY INCLUSIVE ISLAND!**

**PERSON CENTRED APPROACHES**

*I'm living my life the way I want to*

**A flexible & responsive market place**

*I am directing my own support*

**INDIVIDUAL BUDGETS**

*I'm getting what I want where & when I want it*

**JOINED UP WORKING. NON RISK AVERSE CULTURE**

**BROKERAGE & ADVOCACY**

**Brewery Cafe**

**THIS WORKS Long Term:**

- Shared Social Responsibility
- Everyone owns this
- Everyone has a role
- This vision is sustainable with equitable funding
- Whole system CHANGE:
- capacity
- change management
- changing roles
- changing systems





# Visualisation

## The Journey



# What's next?

What we aim to do the next.....

Offer support and expertise through the transitional  
period

This includes identifying any relevant training  
requirements for  
providers

Establishing the pathway and paperwork necessary to  
continue on this journey, which will be paramount to  
initialise the framework contract

# Organisation

What we need to know about you.....and your organisation

- To understand its viability, sustainability, logistics
- Individual organisational pressures

This information is necessary so that we can taper individual contracts to business and/or service need

## Next stage

The next stage as a provider .....

- To establish the services you can offer
- Information sharing
- As an organisation this is a great opportunity.....

# What can you expect?

- Regular consultation
- Individual site visits
- Tendering of services
- Follow up events

## Contacts

- Sharon White Contracts Manager
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- Tel: 01983 520600 ext 2204
- Fax: 01983 524330
  
- Carl Francis Consultant/Senior Contracts Officer
- Email: [Carl.Francis@IOW.gov.uk](mailto:Carl.Francis@IOW.gov.uk)
- Tel: 01983 520600 ext:2236
- Fax: 01983 524330



## Prepaid Cards



### An introduction to allpay



- Credentials
  - Independent UK Company established 1996
  - Achieved rapid growth circa 200 staff
  - Operating 1800 payment schemes
  - 5 million cards and 2.3 million active cards
  - Collecting £2.6 Billion per annum
  - Manufacturing over 2 million Swipe cards per annum







## Introduction

### An introduction to allpay



- **Credentials**
  - Sole supply for Ministry of Justice payments
  - Relationships with over 40% of all Local Authorities and over 750 Housing Associations
  - 24dash.com and 24housing Industry press
  - Experience of managing over 36 million payments transactions a year



allpay public

Complete Payments



### An introduction to allpay



- **The payment specialist**
  - Purely concentrate on payments
  - Experts in this field
- **Dedicated service**
  - Knowledgeable account managers & client care advisors
  - Guided every step of the way
- **Unrivalled responsiveness**
  - One-stop shop
  - In-house card production
  - Rapid implementation
  - Tailored solutions
  - Web-based file delivery

Complete Payments





## Complete Payment Solution



- Constantly looking to create new and innovative solutions to meet our customers' needs

Complete Payments



## The Prepaid Card



Individual Budgets work on the principal of increasing individuals' choice and improving outcomes, without increasing the burden on already tight resources.

The efficient way to deliver secure payments

Complete Payments







## Standard Prepaid Card Design



Chip & PIN

Card Number is embossed as a reverse indent allowing for electronic use only



Can be used worldwide in ATMs, point of sale terminals, over the phone and over the internet

Complete Payments



## Back of the Standard Prepaid Card



24 hour website for card activation and enquiries

Magstripe or Chip & Pin



The card validation and verification number (CVV) provides retailers with an additional security check

Complete Payments





## How it works



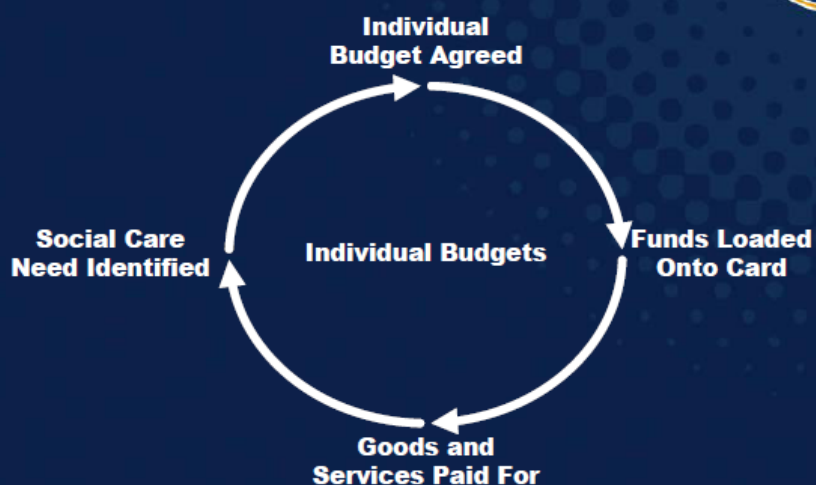
Monies are loaded onto the card automatically



Complete Payments



## Continuous Payment -Prepaid Card

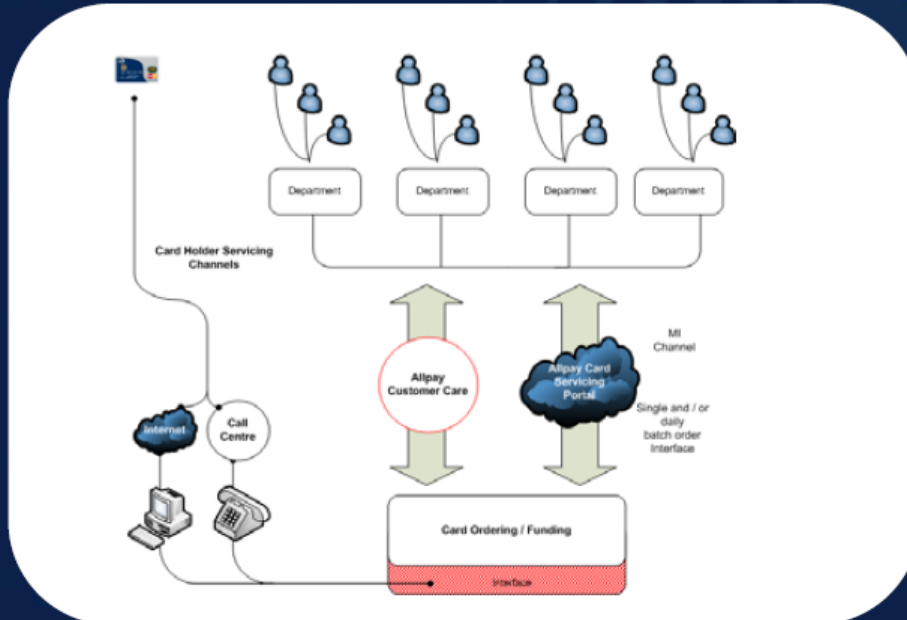


*"Such approaches support the development of creative and cost effective uses of money, and allow local authorities to develop different relationships with individuals who need social care, based on partnership and trust"18 - CIPFA*

Complete Payments

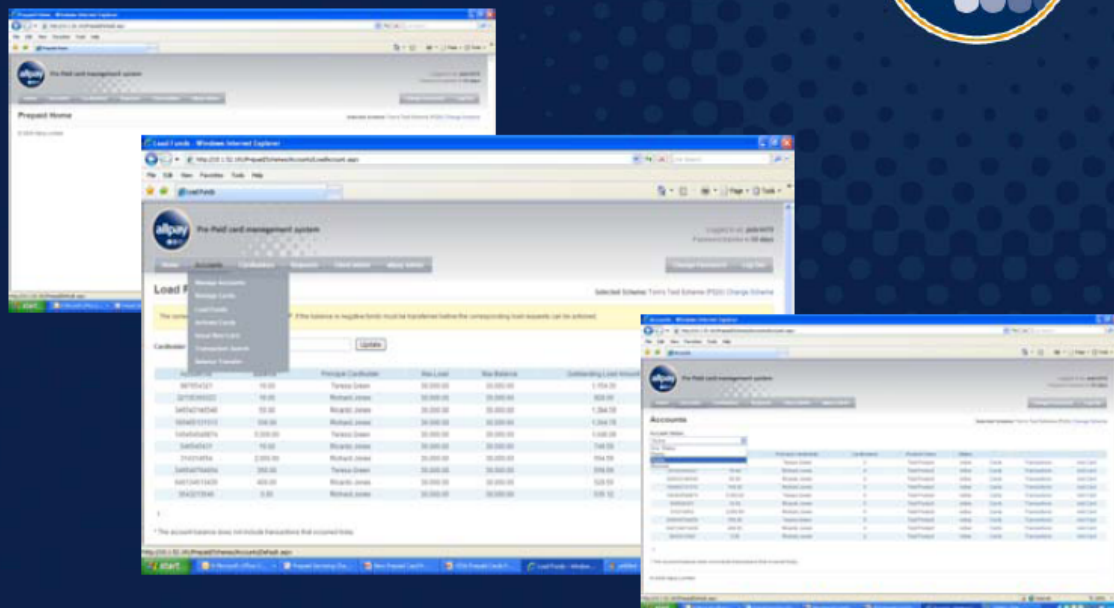


## Card Servicing



Complete Payments

## Card Servicing



Complete Payments



## What are your options?



Complete Payments



## Benefits to you



- Increased efficiency through streamlined processes
- Improved reconciliation
- Improved security of payment resulting in reduced fraud
- Tightened control through detailed reporting
- Tailored solutions to meet your needs
  - Social Services -Youth Card – Travel Card – School Vouchers
- Supports financial inclusion initiatives
- Immediate loading of funds
- Removes cheque cashing / transfer costs

*Analysis of prepaid opportunities for Direct Payments completed by Ticon within a County Council suggested potential staff time savings of up to 135 days per year*

Complete Payments







## Benefits to your customer



- Highly efficient service for faster, hassle free payments
- Wide range of uses - cards can be used to buy goods and services or to withdraw cash
- On average the un-banked individuals pay 8% to cash cheques
- All the benefits and security of a debit card
- Quick and easy access to funds
- Improved financial inclusion through access to banking systems
- No overdraft and no risk of going into debt
- Available to anyone, regardless of financial history or status

Complete Payments



## Benefits



- High on Central Government agenda
- Multiple types of disbursements
  - Benefits
  - Children
  - Unemployment
  - Temporary Assistance
- Low card holder attrition and acquisition costs
- High Point of Sale usage
- High cardholder satisfaction

Complete Payments





## Sample Applications



- Benefit Payments
- Student Payments
- Pension Payments
- Emergency Payments
- Voucher replacement
- Payroll
- Incentives
- Petty Cash
- Re-fund/Compensation
- Foreign Exchange
- Membership cards
- Loans
- Expenses

Complete Payments



## Prepaid Cards





# Providers Workshop – 7 September 2009

## FEEDBACK

### WHAT WANT TO GET OUT OF DAY

- Personalisation and how related to people with MH problems
- Personalisation and how related to older people
- Communication – how to improve this
- How funding works
- Consistency
- Transition and funding – block contracts
- Understanding personalisation
- How service users needs will be met
- Capacity
- Commissioning arrangements
- Partnership working
- Support planning help
- Work for people whose first language isn't English
- Work for people who are deaf
- Provider development
- Support for voluntary sector
- Action plans to make personalisation a reality in each provider
- Outcomes for service users
- Impact of personalisation on carers and people with dementia
- Clarity around funding and points allocation
- Partnership
- Promoting independence
- Skilled workforce
- How and when service users will be consulted
- Partnership working between PCT and IWC
- Impact on small homecare agencies
- Honesty amongst the agencies
- Personalisation impact on people with sever MH problems due to drug abuse
- Want a good understanding of personalisation – clarity and what means for us and our clients

### INITIAL QUESTIONS AFTER PRESENTATIONS

- Length of time to progress from SAQ to IB
- How does IWC intend to fill the gaps? How do we communicate where these provider gaps are?
- Making this happen – visiting the providers – build the relationship (Carl)

## BREAKOUT SESSIONS

### User-led organisations

#### Opportunities:

- Using LINKs as a conduit between service users, providers and commissioners
- Champions will emerge who have experienced positive success of personal budgets

## **Challenges**

- Personal budgets need to demonstrate they are useful and successful way forward
- Sessions similar to today for service users and carers
- Now personal budgets are a state priority, they must continue to be service user driven, not council or provider driven (the origin of the concept comes from service users)
- Difficult for large organisations to be user-led

## **Specific Needs**

- Facilitation for people to pool, personal budgets to buy services
- Importance of “community work” as a catalyst for change
- Local case studies to showcase experiences – both positive and negative
- Being user-led is not cheap and easy – it requires support and facilitation

## **Specific Support Required**

- Expenses for costs of engagement
- Using film/DVDs to share information with service users and carers (who don't want to attend meeting/read documents)

## **Micro-provision**

### **Opportunities for developing this approach**

- Smaller home provision – home share – people with disabilities
- People keep doing what they enjoy
- Holiday from college provision
- Providing a service that the citizen really looks forward to
- Accompanying people to shops, do quality activities
- Time banks – needs/services/skills matched up
- Access to services and information for all citizens (self funding/not cxs)
- Using innovation to deliver services
- Trainees get opportunity to deliver therapies/services – win/win
- Development of personalisation in care homes
- Getting into sharing information on services/equipment between providers

## **Challenges**

- Safeguarding; risk; accountability
- Support to people completing SAQ effectively
- Culture – difficult to understand the concept at present – difficult to react correctly
- Making resources available at the individual level – economics of scale; cover
- Consistency v flexibility
- Keeping track of information/advice – where get it? What do with it?
- Monitoring services and how effective (moving from contracts)
- Billing and invoicing individuals does the citizen understand the process? Are providers set up to take “card” payments?
- Flexibility – affect on hours for staff
- Keeping up with communication links between services, providers and IWC/citizen
- Risk – change to more risk taking to enable innovation
- Health and safety issues for providers?
- Citizens anxious spending their budget properly

## **What needs to happen?**

- Effective advice and support to citizen
- Good quality, trained broker
- Updating and reviewing the SAQ
- Widely available and accessible information data base – website for **ALL**
- A way to capture un-met need from support plans
- Sharing information across providers

- More flexibility/input for providers to deliver choice to citizens
- IWC/PCT may have more difficulties adapting to changes
- **TRUST** non professionals make right choices
- More communications, more information and involvement

### **Challenges**

- Publicise information/advice to providers, citizens, PCT/IWC staff
- Intermediate care clients going home when previously may have stayed in care longer

### **Billing/payment of invoices**

- Not really a problem re sending out invoices
- Q: processes and support for providers where citizens are not paying invoices
- Flexibility in how pay/when, etc
- Need a good broker
- Citizens needs to know what they're paying for and how

### **What information/advice do you need?**

- Knowing what's already available – information site
- Forum – getting together and sharing information/services
- Chat room on web
- Website to post reminder e-mails with links to information/advice website

### **Future meetings**

- Not Mondays
- Event like today – 3 monthly
- Open day for citizens involving all providers
- Care studies that take us through the whole process – make it real and applied to a situation(s)
- User led forum – listening to service users

### **What we need**

- Publicise information at a local level
- Angel Radio – IWC/PCT: do a slot to promote positive messages/information
- Regular summary news sheet
- Transformation newsletter a good idea

**Note: very positive interactive session – thank you**

## **Developing a consortium approach**

### **Definition**

- Two halves synergy

### **How it might work**

- Multiple consortia possibly rather than just one consortium
- Service user groups – consultation
- Tripartite/bilateral working/back office agreements

### **Opportunities**

- Out of hours emergency service – sharing of resources to cover
- Tripartite/bilateral agreement
- Training
- Pilots

### **Challenges**

- Issue regulations – sharing information, ie CQC
- Engagement of service users – best way to do this?
- Sharing information – some providers have concerns around trust/resources in the community

- Issues around the fact that there are different service user groups
- Funding issues – who pays individual budgets – service user choices
- People who aren't stable not being offered services but IBs instead – could cause problems with crisis management
- How do we get through transitional phase?
- Bad press
- Lack of funding
- Funding generally
- Passionate competitiveness (a degree of lack of trust)
- Making time out for providers to enable them to attend events

#### **What needs to happen to address challenges/opportunities**

- Follow-up, sustainability (this has not happened in the past)
- Communication

#### **What information/support do you need**

- Honesty
- Ascertain gaps in service
- Training care managers – what providers need to do
- In past lack of information
- Establishing an interface between service users/providers/LA

#### **What needs to happen – suggestions**

- IBs provide an opportunity to work together to provide best services
- Work consistently
- Develop trust
- Resolve divisions between sectors, eg, residential care/domiciliary care
- Transparency re tenders – provider request (ie, approaching a specific provider to be involved)
- Providers have innovative ideas – need to formalise legislation in order to be able to take ideas forward
- Providers work together – out of hours to cover staff, emergencies, etc
- Future provider meetings (forums) directed by LA – NDTi?

#### **Issues**

- **Punts** - £70k into developing personalisation – not an option for independent and voluntary sector organisations
- **Banks** – difficult for organisations to secure funding
- **Capacity building**
- **Funding** – access to different funding streams

### **From individual to strategic change**

#### **Opportunities**

- Taking on a person centred approach
- Sharing experiences/information
- Individual choices for support
- A greater breadth of services to meet needs
- Using existing PCPs
- Freedom from contractual constraint

#### **Challenges**

- Working in silos at present
- Funding
- Period of transition – a risk
- IW contracts – block/spot – not keeping pace with development
- To be able to work in partnership with IWC

## What next?

- Tapered funding
- More information about transformation that is accessible – particularly brokerage/support
- Transition funding
- Greater partnership
- Develop better links
- Greater involvement with citizens/carers – not tokenistic!
- Existing “intelligence” – pull together from providers and care managers
- Training – to create “a level playing field”
- Building capacity – time, clarity, communication
- **Just let’s get started!!**

## QUESTIONS/CONCERNS

1. How the “money” works:
  - Individually (RAS, support planning, different ways to have and manage your PB)
  - Collectively (for providers, contracts, commissioners)
  - How can person centred planning/reviews help inform future planning/delivery?
2. Working in partnership to take this forward:
  - Statutory sector (PCT, CC, Housing, etc)
  - Voluntary sector
  - Private sector
  - Users and carers
  - Businesses
  - Communities
3. Different/clarity about new roles, responsibilities and accountability:
  - What skills/roles do we need/have?
  - How can we support staff and keep everyone involved, engaged and enthused?
  - Brokers, support planners
4. Working with users, carers, families and the public:
  - New ULO consortium/development
  - Peer support groups and networks
  - Public information/communication
  - Individual support – Island-wide
  - Involve in pilots
5. Meeting and responding to specific needs and aspirations of key “groups”:
  - Older people
  - Mental health support needs
  - Drug and alcohol support needs
  - Dementia
  - Carers/families
  - Young people in transition
6. Provider development and support:
  - Infrastructure
  - Capacity planning
  - Information sharing
  - Action learning/planning for change
  - Person centred planning/training
  - Going from few options to many opportunities
  - Involvement/sharing lessons from IW pilots and elsewhere
  - Marketing and promoting what’s available

## QUESTIONS

- Who has written the first support plans?
- When/how will expressions for pilots go out?
- Can individuals appeal against RAS allocation? How and by whom?
- Is there still going to be a tender for User Led Organisation (ULO) to assist with the transforming social care agenda?
- Carers situations are very volatile and they have to cancel things at short notice – how can small carers support services be sustainable through personal budgets?
- Does the Council panel that moderates or approves IBs have any representation from service users/carers or providers to strengthen/inform decisions?
- Carers UK branch give advice and information to carers – can we join the training currently being given to care managers – we are getting lots of questions we can't answer?
- Information sharing fine until commercial element introduced
- How quickly will the current inequality of resource allocation between client groups be addressed and how?
- How will personal budgets for carers be rolled out when relatively few have an assessment in their own right? Some people are caring for individuals who will not engage with services.
- Are individual budgets transferable across counties – eg, currently funded in residential by Wiltshire – would IoW be responsible for IBs?
- Personalisation for carers – choice or chore? What will happen to those service users and carers who do not want to go down this road?
- If the vision is 30% IBs by 2011 why has any increase of contracts been held back for this current financial year?

## FINAL SESSION

### SUMMARY

#### Practical support

- Clarity around staged reduction in block contracts
- Council to provide providers with baseline checklist to audit themselves against
- Training now – can they do the same training as care managers
- Vision beyond 2011 – what is it – ensure our services are sustainable
- Service user involvement
- External support with change management
- External agency examples/other provider examples
- Can service users be referred for PBs now?

#### Meetings

- When we have an answer to the above
- Half day/themes/carers and users
- Half day session – focussed
- Monthly mid week meeting
- Progress report of where each agency is

#### Practical Support

- Training now! Same as care managers – we have the same questions (how to work in a different way?): Quay Advocacy – understanding the SAQ
- Sharing information/data from the pilots (eg, gap analysis)
- Communication – newsletter helpful
- Clarity re eligibility – charging, the process, timescales
- To supply a holistic flexible service to meet the needs of the individual
- Access to training for all
- Improved communication/information provision
- Help providers to review impact of the changes on staffing/financial viability



- Provide forums to air feedback/questions
- What resources will be available to develop the transition: ie funding – providers prepared to use reserves
- Timetable – not clear
- Clarity on transitional contracting
- Service user involvement
- Market mapping
- More information required on legislative frameworks, eg MCA, DOLs
- Vision beyond 2011 – what it is?
- More communication and include service users in future events
- Access to service users to know what **THEY** really want
- Open access to RAS
- Clarity of staged reductions in block contracts
- Necessary information for business planning and support with this!
- We need an understanding of the eligibility criteria
- We need to be involved in forward planning/partnership working from the start
- Shared/negotiated understanding of the SDS process: eg, when, how
- Understanding of how regulators expect providers to deliver care
- IWC to provide a baseline checklist of “readiness”
- Helping providers to understand their costs
- IWC to seek an economy of scale for pre-paid cards
- Support to transform care and support **FOR PROVIDERS**
- Transition plan – timeline
- Support for handover to different agencies
- Examples from other authorities re how managed change – what’s worked and what hasn’t
- Working together to find out what service users want
- Managing expectation over what personalised budgets can provide
- Training for professionals as what is meant by outcome
- External support to change management processes
- How do we get service users onto personal budgets
- How do we market what we have so care managers/brokers utilise us as an organisation
- What support is or can be offered (PA) service to service users – pilot with **outcomes** to measure success/not
- Timing and communication across local authority to providers (literature/brochures)
- Joint training – providers understanding care management training, etc

### **Future Meetings**

- Yes – different perspectives shared. Meeting for providers – more specific details. Need to meet with SUs/carers – inclusive. ½ day
- End of November 2009 – ½ day – venue somewhere cooler (with windows)
- When we have an answer on the funding
- Next meeting next month (not a Monday or Friday)

### **What do we want to cover?**

- Bring in citizens to get their reaction
- More clarity on funding/contractual arrangements
- Case study on range of scenarios: eg, cash runs out, changes in circumstances
- Presentation re costings
- Examples from other authorities/providers (eg OSEL)

### **How has today gone?**

- Positive start, widespread consultation needed

## IDEAS

1. Users and their organisations should be involved in public sector training, learning and sharing
2. Lessons from today – getting straight into agenda
3. Inform and support adult carers and adults with disabilities who may have issues with IBs or SAQ
4. Help facilitate the involvement of carers and people with dementia in the next stages of the development of PBs – Sue Bennett, Carers UK & Alzheimer's Society
5. Training to properly advise residents and clients
6. Disseminate information through our organisation and help to build infrastructure to help the organisation move forward with personalisation agenda – Susan Graves, Age Concern
7. Get more understanding on the process, timescale and support mechanisms for SDS
8. I am interesting in working towards a “definition” of preventative services that are likely to continue to be core funded into the future – Elaine Garrett, IW RCC
9. Feedback from this meeting also to be given to those that have not turned up, feedback shouldn't just be given to those that have come. We need to get everyone on board with this
10. We want to be a champion – Osel Enterprises (520128)
11. Please use me for development support/coaching/mentoring in support planning (and I know Steph Watkin – PB user – is also very keen to be involved) – Pat Ready, PCP Co-ordinator
12. I can perhaps help making the voice of sometimes excluded individuals and groups heard within IB planning process – Jim Bodle, South Wight Housing Association
13. ULO case studies – Wendy Shone, WRVS
14. Would like to be included in discussion and assessment of individual's capability for people with sensory impairment which is ULO
15. Explore options to change and expand to fill gaps as a provider. Also become involved in pilot schemes to share knowledge and be involved in the front line of transition – Bernice Gray, New Horizons
16. Personalisation champion – would be very interested in attending development and support – The Briars, Greensleeves Homes Trust – [briars@greensleeves.org.uk](mailto:briars@greensleeves.org.uk) – 403777
17. Will service users get real choice of service providers or only those favoured/contracted with the LA – RNHA
18. What is the regulator's view of the personalisation agenda, eg CQC – RNHA
19. To get involved in how to improve mental health services on the Island through more personalisation and in relation to IBs how the process will work with self referrals, etc – Andrew Naylor – Not Just Enterprises
20. Develop and promote an understanding of personalisation with all of our staff. Encourage “bottom up” initiatives from them to ensure support services are individualised with both internal and external services – Maggie Bennett
21. As an organisation concerned exclusively with public engagement in the process of health and social care service development I would hope that we could support commissioners, providers and the LA with service user consultation – Ian Vale, LINKs – 0300 111 0102
22. Consider selecting a number of service users from the same provider organisation to transfer to PBs in order to allow that organisation to pilot PBs. Consulting with each organisation to determine the number that they would like under a pilot – this allows the provider to lean if service users still want the traditional services, whether they need merely changing or whether they are not desirable in the PB world – Sharon White, involvement on Wight Home Care's table
23. Where will the duty of care fall?/Concerns re CRB checks/Who will oversee all going ok – CQC? – Wight Home Care
24. Commitment to partnership working and an open, honest approach
25. Joint training across health, social care, third sector and independent sector
26. We can be pro-active as a company but need to be included in local authority development and training – Di Radcliffe, Wight Home Care
27. Age Concern IoW wishes to be at the forefront of the development of personalisation for older people in partnership with the IW Council and others. Therefore we would be interested to become Personalisation Champions and participate in pilots – Jo Dare