

Personalisation and support brokerage in adult social care – a briefing for advice organisations and services

Note for readers

This briefing, updated in July 2010, is 13 pages in length. Sections 1 and 2 give a brief introduction to the main issues involved if you are short of time – just 2 pages.

If you have more time available, sections 3 to 6 look in greater depth at the changes personalisation and support brokerage will bring, and the main strategic considerations for voluntary advice sector services and organisations.

Section 7 looks at how an AdviceUK member, West of England Centre for Inclusive Living (WECIL), has addressed personalisation and support brokerage in its work.

Sections 8 and 9 give a more detailed glossary of terms, together with links and resources for further reading.

Sections of briefing

- 1 Explaining the key words and terms used in this briefing (page 2)
 - 2 Executive summary (page 3)
 - 3 Background to personalisation and adult social care (pages 4-5)
 - 4 Strategic considerations for the voluntary advice sector (pages 6-7)
 - 5 Skills and knowledge needed to provide support brokerage (pages 8-9)
 - 6 Who might we want to collaborate with? (page 10)
 7. Case Study – How WECIL got involved in personalisation (pages 10-11)
 8. Glossary of terms and phrases (page 12)
 9. Acknowledgements and where to go for further information (page 13)
-

1. Explaining the key words and terms used in this briefing

Personalisation – delivering public services in a way that gives people using that service more choice, responsibility and control in relation to the service they receive.

Voluntary advice sector – registered charities, community groups and social enterprises that provide advice services.

Advice – one-to-one advice tailored to a particular individual's needs.

Adult social care – in the UK this currently covers a wide range of services provided by local authorities and other organisations to enable people to live more independently, either in their own homes or in a residential setting. Services like help with washing, dressing, feeding or assistance in going to the toilet are also included, as are meals-on-wheels and home-help.

Support brokerage – support given to an individual to help them: identify their own support needs; find out what resources and services are available to them; work out what support package will best meet their needs and preferences (given the available resources); organise and manage this support; review and adapt this support over time; and (potentially) identify problems and avenues for help in resolving them. Sometimes described as: *information, advice and advocacy; support services; navigation; care brokerage; and care/support planning*

Assessment – an independent support broker is unable to carry out a formal assessment of need and eligibility for services from a local authority. This would be done by a social work professional or care manager.

Direct payment – a payment made in the place of regular social care provision to an individual who has been assessed as needing support. Following a financial assessment, those eligible can choose to take a direct payment and arrange their own support instead. The money for a direct payment comes from a single funding stream, usually a local authority social services budget.

Individual budget – a term that was used to describe an overall budget for a range of services for a particular individual, not necessarily just related to social care. This concept has moved off the government's agenda following the outcome of the Ibsen report (2008) on individual budget pilots. It may come back on the agenda.

Personal budget – originally only applied to social care funding. It is the funding given to someone after they have been assessed. They can use the budget to get a direct payment or services: managing the money themselves, or having it managed for them. It is the term being used in a pilot programme of *personal health budgets* currently underway in the NHS.

2. Overall summary

Personalisation in the context of public services is about giving individuals the power – and the responsibility – to choose what services they want and control over how they are delivered. A key assumption is that the individual receiving the service is best placed to decide what they need and how those needs can be met. This briefing looks particularly at personalisation in the context of adult social care, but the issues discussed are relevant to the future of any voluntary advice sector organisation whose work links in some way to the delivery of public services.

Individuals are now being encouraged to commission, shape, participate in, manage (and even procure) their own care. Such an approach generates demand for services: services that help people understand whether they can get public funding for the care they need (and how they can challenge such eligibility decisions); but also services to provide support brokerage, as defined in Section 1 above.

Personalisation involves a move away from a model of service delivery (often adopted by the voluntary advice sector) in which clients are advised on their rights and entitlements and helped to realise them. Instead, personalisation favours a model of service delivery in which clients are supported to be informed consumers of that service, or even cast as commissioners and managers of that service.

Local authorities and Primary Care Trusts are increasingly commissioning adult social care support brokerage services through competitive procurement processes. Current contracts focus on providing services for the following target groups and their carers: people with physical disabilities and sensory impairments, older people, people with mental health issues, and people with learning disabilities.

3. Background to personalisation and adult social care

The provision of free and independent advice by the voluntary sector has typically been targeted at those who are most vulnerable or marginalised: people who need help to live independently, those without a job or on a low income, or those from particularly disadvantaged groups and communities. The personalisation agenda is likely to impact the provision of public services to all these groups, and looks likely to retain its significance irrespective of specific policies adopted by the major political parties. To take an example other than adult social care, personalisation is being explored by the NHS through a pilot programme of personal budgets, with most pilot areas now offering personal health budgets for certain services (excluding emergency care and core GP services). The new coalition government [announced at the end of June](#) that a further pilot scheme involving 8 Primary Care Trusts (PCTs) will begin to road test direct payments for personal health budgets. This will allow PCTs to give the money for someone's care directly to them, allowing individuals to decide how, where and from whom they receive their healthcare, in partnership with the local NHS. Previously, personal health budgets could only be held by a Primary Care Trust or third party.

Personalisation is linked with other key drivers for change that face many communities in the UK: an ageing population (people living longer and fewer people being born); changes to retirement and pension provision; increased numbers of people living with long-term health conditions such as dementia; decreasing capacity of many historically-significant support structures (for example, extended family structures); the current recession; government debt and an expected squeeze on public sector spending; and a population increasingly able and willing to assert their rights and demand good value for money.

For adult social care, a list of the main categories of people receiving services would include: people with physical disabilities / sensory impairments; older people; people with mental health issues; and people with learning disabilities. As in other areas of public service delivery, adult social care services are increasingly being commissioned and procured through competitive contracting. Personalisation is a further step along this path, with individual service users now being encouraged to shape, participate in, manage, commission and even procure their own care.

Such an approach generates a need for information, advice, advocacy and support to be available to people with social care needs. This need was recognised by government in *Putting People First (December 2007)*, which talked of "a universal information, advice and advocacy service for people needing services and their carers irrespective of their eligibility for public funding" and describes a "first shop stop, which could be accessed by phone, letter, e-mail, internet or at accessible community locations."

This universal service is not just about eligibility for increasingly stretched public funding and how such eligibility decisions can be challenged; it crucially includes information and advice linked both to the support brokerage process and to the other broad objectives of the **Transforming Social Care agenda**: building social capital and promoting wellbeing; prevention, early intervention and re-ablement; and choice and control through personal budgets and self-directed support.

As the pressure on the adult social care budget increases, eligibility criteria will become increasingly strict. Many people will find that they need social care services to continue to lead independent lives, but will have to cover the costs of this care themselves – as self-funders.

At the time of writing, local authorities have consulted staff directly affected by personalisation (such as in-house social workers that currently plan care for older people as part of their work). By April 2010, local commissioners were expected to have commissioning strategies in place and to have started implementing them. Progress on this appears to be patchy at best. By October 2010, providers (including third sector organisations) are expected to be clear about how they will respond to personal budgets. By this date it is also anticipated that there will be an increased range of services available on which people can spend these budgets, with the majority of adult social care funding being channelled to service users in this way. Again, by October 2010, some local authorities intend that all new referrals for adult social care will result in a personal budget and the option of self-directed support. By April 2011, the aim is for commissioners to have a clear understanding of what services different groups of people want to buy with their personal budgets, with some local authorities intending that, by this date, everyone who gets publicly-funded adult social care will have a personal budget and the option of self-directed support.

4. Strategic considerations for the voluntary advice sector

Issue	Possible impact	Possible action
Existing funding streams for information and advice services from local authorities will be reallocated to support brokerage	Loss of capacity and loss of existing services	Develop and maintain awareness of the priorities and agendas of those who make decisions about current funding streams, particularly those linked to health and social care budgets
How does personalisation and support brokerage fit in to wider needs for advice in your area / amongst the communities you serve?	Danger that provision of support brokerage will not be linked to wider provision of advice by voluntary advice sector	Engage with and develop capacity of local networks in voluntary advice sector; make case for integration of support brokerage in wider advice strategy
"A universal information, advice and advocacy service for people needing services and their carers, irrespective of their eligibility for public funding" may not, in the eyes of your local authority, include the advice service that you provide	Danger that the outcomes and impact of your work in relation to the personalisation agenda may not be recognised	Engage with local authority commissioners to make the case for an overarching advice strategy that recognises the need for a range of diverse services, and values the contributions that each makes – including contributions to the personalisation agenda
Conflicts of interest will arise for organisations providing both advice services and support brokerage services	It is difficult to provide services and challenge funders – and funding allocations for individuals – at the same time	Be rigorous in identifying cases where challenge is appropriate. Ensure that you have sufficient knowledge of community care law and good links to services that can make the necessary challenges. Think through possible conflicts of interest in advance.

Support brokerage services are aimed at older people, carers, those with mental health issues, those with disabilities	Your clients in these categories will see big changes in how social care is delivered to them; they may go elsewhere to get information and advice that you currently provide; Attendance Allowance may be scrapped	Gather information about your work with clients in these categories: find out what impact personalisation will have on them, and whether you need to change; decide whether you want to do support brokerage
How will support brokerage be funded, particularly for those who are not eligible for public funding?	Some local authorities may give individuals vouchers to pay for support brokerage, self-funders may need to pay their way	Make the case for universal access to free, independent advice, including self-funders; consider ways in which you could support them
What resources are available now to make personalisation work?	Local authorities have had a share of the Social Care Reform Grant (£520m) from central government	Most of this money has now been spent, the rest will be being squeezed!
Personalisation favours user-led organisations (ULOs)	If you cannot evidence the involvement of your clients and service users in your organisation's governance, strategy, aims and methods you may lose out	Address issues of user involvement, participation and co-production of services
Funders are looking for integrated provision of services to a range of different target groups; likely to involve collaboration between service providers	Organisations and services outside of these collaborative networks will be left out	Invest in strategic links to organisations working with older people, carers, those with disabilities, those with particular health issues or conditions

5. Skills and knowledge needed to provide support brokerage

Skills – need to be able to:	Knowledge – need to know about:
Understand and interpret legislation and statutory sector practice	Legislation around provision of adult social care, including community care law, FACS, duty of care, direct payments and individual budgets; knowledge of services and practice of local authorities and PCTs
Provide advice, information, advocacy and support to clients and carers on how to be informed consumers/purchasers of services	Law regarding contracts; consumer information/guidance/sources of support for people purchasing care and support services; awareness of boundaries between support brokerage, social welfare advice and financial advice
Research and analyse both client support need and appropriate range of care or support service solutions; support clients and carers in identifying their needs and finding the most appropriate solution and provider; identifying and addressing risks	Health conditions and their likely impact on sufferers; in-depth knowledge of the needs of at least one of the main groups that currently receive social care (for example, knowledge of older people housing options and local supported housing providers); in-depth knowledge of local provision of services
Advising, supporting and empowering clients in arrangements for their own care provision	Legal responsibilities and requirements for self-employment for Personal Assistants; legal responsibilities and duties of employers (such as older person being an employer of their carer) including employment law, taxation, accounting, insurance, health and safety
Jointly producing support plans with clients and carers	What goes into a support plan and how it is developed
Ongoing case management and review	How to implement case management and review systems
Negotiating with third parties, including carers, family members, service providers and social services staff;	Local key players, relevant guidelines and legislation; knowledge of how client can challenge assessment decisions; how

advocating on client's behalf; dealing with conflicts of interest	and when to challenge service providers; the constraints faced by other key players and the reasons behind their behaviour; how to refer effectively to other organisations
Collating, developing and maintaining impartial resources on support services/options available locally	Potential sources of additional income for older people, including welfare benefits, other sources of financial support; financial capability resources; knowledge of local providers of adult social care
Producing information and guidance for clients and carers (on available local services, how to choose services, being an employer, money management)	Other services available to support clients such as carer banks (holiday and sickness cover), financial/money management/payroll services, employer support services for those employing their own carers, advocacy, mediation; local provision of home care services local provision of day care services and leisure/activity opportunities; taxi providers and community transport
Service development, management and reporting including financial management of a brokerage service (potentially including a mix of contracting, grant funding and individual purchasing by different public sector organisations)	How to implement and manage complex management information systems that incorporate financial management of individual budgets (and that can cope with mixed funding streams)
Developing and providing training and support for staff, volunteers, clients and carers	What training needs our staff, volunteers, clients and carers have; what sets of skills and knowledge members of these different groups need to have
Marketing service to self-funder clients, their families and carers	Methods for engaging with people who don't get referred to your services by local authorities or NHS bodies

6. Who might we want to collaborate with?

What kind of organisations might bid for support brokerage contracts? Who might be a support broker? All of the following are likely to be key players in providing support brokerage services in different parts of the country:

In-house – re-badged care managers currently working for local authorities or NHS bodies in Adult Social Care

Hived-off care managers, freelance support brokers, social enterprises, private sector

Centres for Independent Living (CILs), Direct Payment support services

Local Age Concerns and Help the Aged; carers organisations; mental health charities such as Mind and Rethink

Disability charities such as Scope, Leonard Cheshire Disability

Family, friends, community

Organisations currently contracted to deliver [Local Involvement Networks](#)

7. Case Study

How AdviceUK member WECIL got involved in personalisation

West of England Centre for Inclusive Living (WECIL) is a not-for-profit membership organisation, run and controlled by a Management Committee who are all disabled people.

It is based in Bristol and provides a range of services to people in seven local authorities in Avon, Wiltshire and South Wales, tracing its roots to campaigning by disabled people in Bristol in the 1980s. This led to funding in the 1990s: for a paid project worker at a Centre for Independent Living; and for an Independent Living Scheme that provided advice, information and support to disabled people who wanted to live independently – by employing their own Personal Assistants. In 1996 Avon was split into Bath & North East Somerset, Bristol, North Somerset and South Gloucestershire, and WECIL successfully negotiated four separate contracts with these local authorities.

The organisation has always combined two distinct, but complementary strands: community development work, focusing on campaigning and consultation; and specific services for disabled people, provided by the Centre for Independent Living. WECIL's clear focus on being run by and for disabled people, together with its track

record in delivering services, mean that it is well-placed to engage with – and influence – the personalisation agenda.

These core competencies have been strengthened by research projects such as the 'Right Skills, Right Practice' project, undertaken jointly with the City of Bristol College, in which training has been piloted to prepare the social care workforce for the personalisation agenda.

As a user-led organisation (ULO), WECIL is involved in a Department of Health-funded project that aims to find out how such organisations – operated for and by disabled people – can increase their effectiveness. WECIL has also recently been recognised as the development hub for ULOs in Bristol, Bath & North East Somerset, and South Gloucestershire. It will be providing ULOs in these areas with support to develop services that are relevant to the personalisation agenda (such as advice, advocacy, support planning and brokerage).

Current services include:

- A payroll service for direct payment recipients and anyone who employs a personal assistant to work for them
- Direct Payments Support Service giving disabled people control over their local authority funding to promote independent living
- Care Management Advocacy that empowers and supports people with their care management assessment
- Disability Information and Advice Service – a telephone advice and welfare rights service, including assistance with claiming Disability Living Allowance and Attendance Allowance (and associated appeals)
- Disablist Incidents and Crime Education – a project which raises awareness of hate crime against disabled people and encourages the reporting of such crimes
- Listening Partnership – a youth project which provides consultation with the Local Authority and provides the opportunity for young disabled people to meet, develop skills and have fun

For further information about WECIL's work, please visit their website at

<http://www.wecil.co.uk/>

8. Glossary

Self-assessment – individuals discovering and defining their (social care) needs.

Self-directed support – support controlled by the person who receives it.

Resource Allocation System – a system which lets people with social care needs know early and up front how much money they might reasonably expect in their individual (or personal) budget.

Support package – a range of support measures designed to meet a particular individual's needs.

Support plan – a support package as described in a written document, put together by the individual it refers to, with the help of a support broker and other care professionals.

Self-funder – someone who has care and support needs, but is not eligible for public funding to meet those needs.

FACS (eligibility criteria) – eligibility criteria for receiving social care, as published in *Fair Access to Care Services (2002)*.

ULO (User-Led Organisation) – an organisation where the people represented by the organisation, or the people to which a service is provided, have a majority on the Management Committee or Board, and where there is clear accountability to members and/or service users.

9. Acknowledgements and where to go for further information (web links correct as of 27 November 2009)

- This briefing was put together by Dal Warburton and Diarmaid O'Sullivan of AdviceUK
- Thanks go to Mark Tomlinson and Clive Newton of Age Concern (now Age UK) whose support and presentations on 27 October 2009 to the National Advice Sector Development Forum (part of the Working Together for Advice project) were invaluable in putting this briefing together. Thanks also to colleagues at local Age Concerns for feedback. Any mistakes remain our own!
- [Putting People First](#) (published in December 2007)
- [Ibsen Report](#) (21 October 2008)
- [Transforming Adult Social Care: access to information, advice and advocacy](#) – best practice resource for local authorities
- NCVO's [Third Sector Foresight](#) website – for resources to help with strategic planning and identification of key drivers affecting your organisation, including [personalisation](#), [personalisation of care and individual budgets](#) and [bringing markets into public services](#)
- [ACEVO's report on personalisation of public services and what this means for third sector organisations](#)
- [Department of Health Personalisation Network](#) and particularly their section on [Brokerage, Information and Advice](#) [note that this site is under review subject to the new policy agenda of the coalition government]
- [Personal health budgets in the NHS](#) [also under review]
- [Social Care Institute for Excellence](#), particularly their ['at a glance' briefings](#)
- [Institute of Public Care at Oxford Brookes University](#), particularly their work on [Adult Health and Social Care](#)
- Support Brokerage Network <http://www.nationalbrokeragenetwork.org.uk/>
- In Control <http://www.in-control.org.uk/>
- Person Centred Planning
http://www.circlesnetwork.org.uk/what_is_person_centred_planning.htm
<http://www.helensandersonassociates.co.uk/>