PERSONALISATION: RHETORIC TO REALITY
This publication examines the personalisation of public services and explores how it is being implemented and taken forward in adult social care. It reviews current thinking and practice around the concept of personalisation and aims to highlight some of the key emerging issues and implications for the voluntary and community sector and other social care stakeholders.

A number of research studies have been carried out on the implications of personalisation for service users, but there is less evidence on the experiences and implications for frontline voluntary and community organisations and their relationship with statutory commissioners. This report aims to add to the emerging evidence in this area and consider what personalisation might mean for organisations and individuals involved in planning and delivering services.
This publication does not try to cover everything that is happening in the personalisation agenda but aims to highlight some of the main issues emerging from people’s experiences of it. It also recognises that personalisation is an evolving concept and that its implementation at local level is still mostly at an early stage. Indeed, one of the key questions this publication asks is how we can translate the rhetoric of personalisation into a successful reality for service users and communities and ultimately improve their well being and quality of life.

The first article in this publication sets the scene on personalisation. It explains its implementation in adult social care and addresses emerging issues for the voluntary and community sector, other social care stakeholders and for public services as a whole. The second article reviews the implications for frontline voluntary and community organisations and statutory commissioners involved in planning and delivering services and the third article provides some examples of how personalisation is working in practice on the ground.

This report is based on research funded by the ESRC and draws on the views, experiences and perspectives expressed by individuals and organisations involved in the personalisation agenda and interviews with voluntary and community organisations on the ground. It also summarises key existing literature and discussions at workshops and personalisation events.

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This article was written by Jenny Harlock
This first article in the Personalisation: rhetoric to reality series explains the background to the personalisation agenda and reviews its implementation so far in adult social care through the new system of individual and personal budgets. It examines current understanding of the concept of personalisation and addresses some of the emerging issues and implications for the voluntary and community sector, as well as other key stakeholders. It also considers the different roles that voluntary and community organisations can play.

**Personalisation: the process by which state provided services are adapted to meet the needs of the service user. Personalisation is intended to improve outcomes by giving people more choice and control over their support and is part of government’s wider agenda to improve the efficiency and responsiveness of public services.**

**Government’s approach to personalisation can be summarised as ‘the way in which services are tailored to the needs and preferences of citizens. The overall vision is that the state should empower citizens to shape their own lives and the services they receive’.**

In 2007 the government released *Putting People First* which set out a commitment to create more personalised services for users of social care. This agenda was signed by the Department of Health (DoH), the Local Government Association (LGA), the NHS, the Association of Directors of Adult Social Services (ADASS) and five other government departments. It advocates a change in the way that social care services are designed and delivered by giving individuals greater control and influence in shaping the support and services they need. It proposes a system of individual and personal budgets for service users to purchase their own provision and design solutions around their particular circumstances. It also encompasses a shift towards early intervention and prevention.

Personalisation itself is not a new idea and has its origins in the disability and independent living movements of the 1970s and 80s, which have long campaigned for greater choice and control and empowerment for service users. Current thinking and practice around personalisation is very much influenced by these early movements and in particular by the work of In Control, which has pioneered the individual/personal budgets model. Alongside these influences there are a number of other drivers behind government’s agenda for the personalisation of social care services:

**Criticism of prescriptive, top-down services**

The current system has long come under criticism for its top-down approach to service planning and provision with little say for service users over the services they receive and how they receive them. Personalisation is proposed as a means to move away from a one-size-fits-all approach towards provision which meets the individual needs and requirements of users.

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Personalisation: rhetoric to reality

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CONTINUED

Rising expectations of public services
Rising living standards and a growing consumer culture means people expect more from public services, both in terms of quality and convenience. There is also greater cultural diversity, reflected by increasingly diverse needs, which public services must meet.

Pressures on the current system
An ageing population and a growing number of people with severe and complex needs has led to increased pressure and demand on the current social care system and its limited resources. This pressure has intensified with the current economic recession.

TRANSFORMING THE ADULT SOCIAL CARE SYSTEM

Following pilot programmes from 2005 to 2007 in 13 local authorities across England, social service departments are now introducing individual and personal budgets for service users to organise and purchase their own support.

Under this new system service users are given a needs-based indicative budget which they can use to devise their own care plan based on their individual priorities and goals. They can do this with support and advice from a care manager, family and friends, or a specialist independent support brokerage organisation. The plan is then signed off by the local authority, who considers the level of risk and possible adult safeguarding concerns before the money is released. Budgets are flexible and as long as they are spent on legal services and activities that improve quality of life there are few limits on expenditure.

Users can opt to continue receiving their existing provision or commission entirely new services based on their specific needs and preferences, or design a mixture of both. They can also elect for their budget to be managed by the local authority or another appointed individual or organisation on their behalf.

Individual budgets are a needs-based allocation of money to service users that can combine several funding sources, such as social care money, Independent Living and Supporting People funds, Disabled Facilities Grants and Access to Work. Service users can use this money to design and purchase their own support from the public, private or voluntary sectors.

A personal budget is a similar allocation of money to a service user to purchase their support, but it only includes social care funding, not money from other sources.

Direct payments were introduced in 1996 and were pioneered by service users with learning and physical disabilities. They are a cash payment of social care money paid direct to a user in place of social service provisions which they can then spend on support they feel they most need. Individual and personal budgets build on the system of direct payments.

Individual and personal budgets can be deployed and managed in a variety of ways:

• As a cash payment paid directly into a user’s bank account
• As a virtual budget where the council can continue to organise service provisions and manage the budget for a user on their behalf
• As an individual service fund where the money is given to a service provider agency, e.g. a care agency, and the user tells the agency what services they want from them
• By a third party trust where organisations or individuals – often family members or friends – are chosen to administer and manage this money for a user.

The implementation of individual and personal budgets varies widely between local authorities. Different councils are at very different stages of the process. However, all adult social service departments in England are expected to make significant progress in implementation by 2011, with 30% of their service users on personal budgets. A three-year ring-fenced Social Care Reform Grant totalling £520 million was made available to local authorities in 2008 to help them make this transition.

A recent survey by ADASS\(^1\) shows that:

• 19 local authorities (13%) currently have systems in place for allocating individual and personal budgets to all service users.
• A further 51 local authorities (31%) have systems in place for allocating individual and personal budgets to some service users, most frequently people with learning disabilities and physical disabilities.
• On 31 March 2009 almost 93,000 people in England were receiving personal budgets, including direct payments, equating to £681 million of council expenditure. This is expected to rise to 206,000 people by the end of March 2010.

Individual and personal budgets are also being piloted for children and young people and there are currently 60 live individual budgets for children and families in England. These are largely supporting young people with physical or learning disabilities although a few budgets are being used to support transitions for children in care.

The personalisation of adult social care has cross party support and personalisation has the potential to be introduced in other areas of public services. For example in offender rehabilitation and education there are some voucher schemes in place for users to purchase specific services.

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\(^1\) For more information about personal health budgets visit the DoH webpages at http://www.dh.gov.uk/en/Healthcare/Highqualitycareforall/DH_096018


\(^3\) ADASS/LGA (2009) Putting People First: Measuring Progress
There are also plans to introduce personal budgets in health for some services such as mental health, maternity care, and long term conditions and pilot programmes are set to explore the potential of personal health budgets in 68 PCTs over the next few years.\(^6\)

Personalisation will involve wide scale transformation with implications for service users, carers, service providers and local authorities alike. All will need to be actively involved and consulted as personalisation is implemented and engaging with the voluntary and community sector will be a vital part of this process.

**WHAT DOES PERSONALISATION MEAN TO NCVO?**

Personalisation is a way of thinking and working that puts the service user at the centre of public services. It means operating from a bottom-up approach to understand the needs, preferences and aspirations of service users and developing services and solutions around those needs, rather than the needs and preferences of commissioners and providers. Personalisation should not therefore be about operating services in a technically different way - through Individual or Personal Budgets for example – but operating in a way underpinned by distinct values and principles.

In social care this means making sure that service users, with appropriate support, are able to exercise voice and choice in the planning and delivery of their services. It involves working with service users as active participants in planning and commissioning their support, rather than seeing them as passive recipients of services. This approach recognises that service users are best placed to know what will improve their well being and quality of life. It values the skills and expertise that users have and encourages them to be used in planning and delivering public services. It also recognises that service users are citizens as well as consumers of services and can make a contribution to their community. Personalisation should therefore be viewed as a process which goes beyond the end service or product that is delivered. It is about improving the well being and quality of life of service users and communities and this requires a holistic way of thinking.

Individual and personal budgets are therefore just one part of personalisation. Personalisation is a much wider philosophy that is about putting citizens at the heart of public services, enabling them to take greater control over their lives and recognising and valuing the contribution that they can make to their community. As a principle personalisation has the potential to enhance the experience and well being of service users by directly involving them in designing and delivering their support and improving the responsiveness of public services. Many in the voluntary and community sector welcome the principles of personalisation and have long campaigned for person-centred services and greater choice and control for users. However, whether individual and personal budgets will deliver this effectively and improve outcomes for service users and communities is a question that remains to be answered. Personalisation comes with some challenges and health warnings and how it is implemented in practice will be crucial.

**INDIVIDUALISM AND THE COMMUNITY**

There is a danger that treating service users as individuals through personalisation undermines the opportunity for community. It must be recognised that service users are not isolated individuals but are part of a larger community or public. This collectivism is crucial to the concept and nature of public services, which must meet and balance both the collective needs of the community and those of individuals. Public services don’t just provide a private benefit to individual consumers but they are a public good. Public services involve a range of stakeholders including service users, carers, local businesses, voluntary and community groups, local statutory bodies, and the wider community. Too much emphasis on developing highly individualised solutions may undermine the needs and aspirations of these other stakeholders. It may also undermine public support for public services.

Public services rely on collective taxation and the support of the public who contribute. Prioritising individual preferences and solutions may risk eroding this support which could in turn have implications for the future shape and funding of public services. Personalisation is likely to involve a shift away from conventional services and challenge public perception of traditional forms of welfare. Service users may opt to use their budget to fund activities such as attending a football match or buying a pet for example, because these will improve their well being, however it may be more difficult to secure public support for this type of expenditure.

Personalisation should also not undermine the potential for collective voice and influence of services. Indeed it is uncertain how much market influence service users individually will be able to exert. User-led initiatives and mutual organisations can offer users more market power by jointly commissioning and managing services.\(^6\)

They can also help avoid the risk of isolation and loneliness for service users and promote networks of support which are essential to wellbeing.

This raises the question of how commissioning strategies and practices can

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\(^6\) See the third article in this publication for an example of a user-led mutual organisation, Caring Support.

\(^2\) See the second article in this publication for examples of how statutory bodies are steering and shaping personalisation.

be used to support these types of collective initiatives and manage and translate the needs of service users and the wider public. For example strategic commissioning is one way that services can be joined up around both the individual user and communities. Strategic commissioning takes account of the whole needs of a local area and sets the framework for delivering outcomes for the local population.

This approach means that needs can be understood and approached in a joined up, holistic way and that there does not necessarily have to be a trade off between meeting the needs of the community and those of the individual. Commissioning practices like these can also involve and stimulate neighbourhoods and communities and encourage service users to participate locally.

EXERCISING VOICE AND CHOICE

There is no logical argument that citizens should have to make choices. There are instances when choice may not be appropriate, or where choice is not wanted, for example following a personal crisis such as a stay in hospital. There can also be choice overload where service users feel overwhelmed by the options available and so opt out of making choices.

Service users may not always have the motivation, confidence, or capability to make choices unassisted. This is especially true for users of adult social care services who can often be most vulnerable and require more support in making decisions. For example the IBSEN report and Help the Aged/Age Concern suggest that older people may find the process particularly stressful. Knowing which service providers offer the best quality and value for money may also be challenging for some service users who are used to having their support organised for them and raises the question of how best to manage the potential risks to users. This will also have implications for informal carers, who may be involved in assisting users to manage their budget and choose their support.

At the same time there is danger that offering too much choice can lead to unrealistic expectations. This can be avoided by providing clear, honest and fair information to service users about what is achievable. There can also be inequalities in the exercise of choice with users who are better off often having more access to a greater number of services, as well as information, advice and support. It is essential that all service users have access to appropriate support and information when making choices about their service provision and designing their package of care. Appropriate support will also need to be available to carers, family and friends that are involved in this process.

The voluntary and community sector is particularly well placed to offer this kind of support and brokerage. Voluntary and community organisations can help develop appropriate and accessible information for service users about options and services available to them and assist them in understanding their possible choices. Being often based in the community, Voluntary and community organisations (VCOs) tend to have good knowledge about local services, a thorough understanding of local need and often direct experience of specific issues. Besides assisting users in planning provision, VCOs can also act as advocates and help users in accessing services, particularly where they are most vulnerable. These support planning and brokerage functions will be fundamental to the effectiveness of personal budgets.

SUSTAINABILITY AND CREATING EFFECTIVE PERSONALISED SERVICES

Individual and personal budgets will only work if they drive services to improve and respond to the needs of users. Simply giving people individual or personal budgets to spend on services that offer the same types of provision or quality of services will not produce better outcomes for users and communities. Service providers with the support of statutory authorities and commissioners must therefore take the lead in creating effective personalised services that fit the needs and preferences of users and communities.

The Voluntary and community sector (VCS) has a key role to play in developing personalised services where organisations are well placed to do so and where service delivery contributes to the organisation achieving its mission or goal. Indeed in many instances VCOs are already leading in addressing the principles of personalisation and developing user-centred services. Many VCOs already work as niche or specialist providers delivering a wide choice of highly personalised services that other mainstream providers find hard to match. The VCS is also uniquely placed to better support hard-to-reach and disadvantaged groups within a community and offer the specific services that these users require.

Supporting VCS innovation will be a key part of developing personalised services. Operating on the frontline, VCOs are often highly aware of local need and can identify gaps in provision and meet the shortfalls. VCOs are often more nimble than their government and private sector counterparts and can respond in creative ways to develop new types of services and ways of working that meet the needs of users and communities. Many VCOs will welcome the opportunities to approach and

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8 Interview conducted with Help the Aged/Age Concern in May 09
9 See the third article in this publication for an example of a web-based solution, shop4support, aimed at helping service users navigate the social care market
10 The Government published its Green Paper on the shape of the care and support system in England, Shaping the Future of Care Together, on 14 July 2009 and has begun consultations on its proposals for how social care could be funded in the future.
develop services in ways that consider the whole person, in line with their mission. The VCS is therefore well placed to be able to deliver the diversity and scope of provision that personalisation is likely to require. However, the issues of funding and sustainability must be addressed if VCOs are to be able to continue to offer and develop services for users and communities. Government has recognised and worked for the need to build capacity and longer term funding of VCOs in recent years and this progress should not be lost with the introduction of personalisation, especially as contracts for services are shifted from local statutory bodies to individuals. Strategic, long term investment and support for the sector will be vital to ensure that VCOs can continue to represent and deliver change for users and communities. Continuing support for the sector is particularly important in the current uncertain economic climate where resources for public services are tightening and we are faced with changing and fluctuating public needs.

**CONCLUSION**

Personalisation is still evolving in terms of policy, implementation and practice and how we can turn the rhetoric of personalisation into an effective reality is as yet unclear. This is especially true as debates move forward over how social care will be funded in the future\(^2\) and we are faced with a cold financial climate.

The voluntary and community sector has long campaigned for the principles of personalisation and a system which puts the needs of service users and communities at the heart of service planning and delivery. But how personalisation will work in practice and whether individual/personal budgets will deliver improved outcomes and quality of life for users cannot be known at this stage. What is clear is that personalisation presents opportunities and challenges for service users, carers, commissioners and providers alike and all will need to be supported and engaged as the vision for personalisation unfolds.

The next article in the series explores the roles for service providers and commissioners in taking forward personalisation and looks at the implications for frontline voluntary and community sector organisations involved in planning and delivering services.
This article explores the implications for service providers and commissioners of the introduction of individual and personal budgets in social care. It identifies key challenges and opportunities for voluntary and community organisations and commissioners involved in planning and delivering services and considers how they can work together to produce effective personalised services that meet the needs of users and communities.

WHAT ARE THE IMPLICATIONS FOR SERVICE PROVIDERS?

Personalisation and the introduction of personal and individual budgets aim to facilitate a better experience for service users and communities, enabling people to exercise more control over their lives and improve the responsiveness of public services. In order to make this a successful reality voluntary service providers have some key roles to play.

• Building user-focused and responsive services that reflect the needs and wishes of local people
• Developing a skilled and person-centred workforce able to respond flexibly to user needs and preferences

• Adapting systems and processes to meet the requirements of micro-commissioning and purchasing through self-directed funding mechanisms
• Helping users understand and access information on services available and plan their support
• Working with commissioners to give a voice to service users’ need and shape the provision of personalised services

BUILDING USER-FOCUSED RESPONSIVE SERVICES

Personalisation means building and shaping services around the user and taking their needs and wishes as the starting point for informing and developing models of provision. For some providers this will mean a shift away from forms of provision that have traditionally been resource-led or driven by local authority preferences. Personalisation means ensuring that services fit the person, rather than the person fitting the service and making sure that people are not simply slotted into existing services which may not give them the right kind of support for their particular circumstances or meet their needs in the best way.

To develop user-focused and responsive services providers must engage in effective dialogue with users from the start when planning and designing services. This learning should also help improve and transform existing services. Being user-focused is an ongoing process and requires organisations to continually listen and revise their services in response to changes in users’ needs and goals. Integrating tools and systems such as user-led reviews and evaluations can help organisations to better understand and assess how they are meeting users’ need and persistently feed this back into the service. These processes can help organisations identify weaknesses in their provision and suggest positive changes, for example improving the accessibility of their facilities.

1 See the third article in this publication for an example of how two providers, Macintyre and the Opportunities Project are embedding user-focused and person-centred practices throughout their organisations.
Developing user-focused responsive services also requires an outcomes-focused rather than task-oriented or output-based approach to service delivery. One that considers the full scope of people’s needs and how the service can contribute to their overall well-being and quality of life. This means looking beyond the individual service user to how services can benefit and improve outcomes for their carers, families, wider networks of support and the local community.

DEVELOPING A FLEXIBLE, PERSON-CENTRED WORKFORCE

Crucial to achieving more user-focused and responsive services is developing a workforce that can adapt and respond to the new demands of users and that understands the principles of person-centred service provision. This could involve a significant culture change for some providers and staff may have to adjust to new ways of working.

The IBSEN report1 and other emerging evidence suggests that budget holders are expected to want help with a wider range of activities, for example shopping, dog walking, outings and engagement in social activities. Personalisation is also likely to require changes to staff working patterns as users may require support at different times, particularly in areas such as home help and personal care where they may request support later at night or earlier in the morning. Providers will need to integrate greater flexibility in staff timetabling and scheduling and support staff to adapt to and manage changing service demands.

Providers will also need to build systems and processes that allow staff to work in creative ways and have greater flexibility in how they support users to produce the most effective outcomes. In some cases frontline staff may need retraining to develop person-centred skills and approaches where previously their roles have been task-oriented. Care in particular is an area where personal relationships, trust and working with the user to understand their specific circumstances and needs are essential. This means that recruitment of staff might depend not only on holding the necessary skills and experience, but also the right values.

Helen Sanderson Associates suggests that adopting person-centred approaches towards employees and volunteers themselves and building these into line management practices can help embed a culture of person-centred thinking and practice throughout an organisation, for example one-to-ones, team planning, and personal development plans. Developing a user-focused workforce requires not only physical or structural changes to work patterns and processes but a cultural shift. This may take more time to achieve but is essential to producing effective personalised services in the longer term.

MEETING THE CHALLENGES OF MICRO-COMMISSIONING AND MANAGING CHANGE EFFECTIVELY

In the future it is expected that there will be a shift towards micro-commissioning and purchasing of services with the widespread adoption of personal and individual budgets. Many providers welcome the opportunity this presents to expand and develop services for users in line with their needs and preferences. However, this also poses some challenges in terms of costing services, payment processes and provider stability and it is important that providers manage these challenges effectively so that vital services for local people and communities are not lost.

Providers’ internal systems and processes must be geared to handle the more complex administration that payment through individual and personal budgets is likely to require. This may call for more investment in IT systems, administration and back office functions and financial staff. Re-costing services on a unit or individual basis will also be necessary in order to price individual services. It is critical that this costing process reflects the full cost of providing a service, including the support cost to each individual, staffing, overheads and infrastructure costs. Providing a transparent break down of these costs when negotiating a service contract can help users assess the fairness of the price of a service and understand exactly what they are paying for, as well as facilitating a relationship of trust between provider and user.

There are possible financial risks for providers if people use services intermittently, irregularly or withdraw at short notice, for example if a client is admitted to hospital.1 The IBSEN pilots suggest that there may also be issues of late or non-payment by budget holders, although it is uncertain how far this will be a widespread risk in reality. Uncertain uptake poses another challenge to frontline providers. Providers need to be aware that the move towards greater choice and control means there may be a shift in demand for certain types of services, for example a move away from day and residential care as people want to live more independently, and services will need to reflect these changing demands. Even well established services may be subject to some change, as those previously free to users may need to be paid for from personalised budgets or falling demand may increase their cost. However, there is evidence to suggest that changes in demand for services is likely to be gradual rather than dramatic as budget holders continue to purchase similar support to their previous arrangements until they feel more confident and comfortable with the idea of commissioning their own services.2 It is crucial that providers work with service users and develop effective channels of communication to understand and be responsive to these shifting demands as they happen.

While the shift away from bulk commissioning will present significant and new opportunities for small, specialist, niche organisations to engage in service delivery,3

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2 Interview held with Helen Sanderson Associates in June 2009.
4 Interview held with NAAPS in May, 2009.
for others it may pose challenges in terms of stability and funding sustainability. This is especially the case where providers rely mainly on wholesale contracts with local statutory bodies to provide services and/or on referrals from local social services departments for their custom. In some cases contracts will continue to be operated between service providers and local authorities, through for example Virtual Budgets or Individual Service Funds. Here a block contractual arrangement can be effectively divided up into a number of individual support packages. In Control notes that this is an approach that several local authorities are now beginning to use as a move away from traditional congregate services without destabilising an organisation or the local market. It is unlikely that contracts will disappear or change overnight but it is vital that providers start preparing now for these changes and review and assess their current services, systems and costs.

They also need to engage early with local statutory bodies to find out about their strategies for the implementation of personal and individual budgets and work with them to negotiate changes to contracts. There may be opportunities for providers to gain financial and non-financial support from commissioners to assist them in the change process, such as training in accountancy, grants to develop technology systems to assist with administration, or even taking on payroll functions for providers. Proactively seeking these opportunities, approaching and working with commissioners are key tasks for providers to manage change effectively and minimise risk.

The shift away from local authority commissioned services to micro-commissioning means providers will also need to market direct to individual service users. This may present challenges to organisations used to marketing and delivering services according to local authority preferences with little change to service specifications and requirements year on year. Frontline providers may need to invest in and develop more creative marketing strategies and methods, such as DVDs which describe services to potential users or registering with emerging web-based systems for marketing and selling services. Effective marketing is crucial to the success of personalisation to ensure that service users know what services and types of support are available and are able to devise the most effective solution for them.

This also depends on providers being realistic and honest about what they can offer to users. Organisations must have a clear vision for their services and an understanding of what they want to achieve for users. This means thinking about what they are good at and identifying their strengths, for example some organisations may be well placed to expand their services and branch out to a wider pool or range of users, while others may be better placed to use their expertise to offer a more specialist and focused provision. These decisions must be driven by recognising and understanding what will best serve and benefit local people. This means that providers must also position themselves so that they are not simply replicating or duplicating other services. At the same time, where it will benefit local people, providers could identify potential partners and opportunities of joint working. This can help providers offer a better mix of services and also be a valuable vehicle for peer support and shared learning across the sector.

Supporting Service Users and Giving a Voice to Local Need

Identifying and purchasing support can be bewildering or stressful for some service users. Support planning and brokerage are fundamental to the effectiveness of personal and individual budgets as they help users to identify their needs, priorities and goals, understand their choices and devise appropriate solutions. VCOs can play a vital role in enhancing service users’ experience by working with them to draw up support plans. They can also act as brokers, advocates and sources of information about local support mechanisms, help people to find their way round the system and access services that best meet their needs. Through these roles VCOs and providers can help make service users’ voices heard and learn from them about what services work well.

It is vital that providers and commissioners work together to shape the service market based on the learning generated through the support planning process. Providers can use the support planning process to identify shortfalls and gaps in the market and respond accordingly. Commissioners and public bodies are well placed to capture and collate this information and use it to help develop and shape markets of services that meet the full diversity and range of people’s support needs.

What Are The Implications for Statutory Commissioners?

Commissioners and public bodies have a key role to play in taking the vision of personalisation forward and creating the right conditions for it to become a reality.

Key roles for statutory commissioners are:

- Working with providers and service users to shape the market and supporting VCS innovation to stimulate the development of new services that reflect the needs and wishes of users and local people
- Building effective partnerships with providers and supporting them through the transition
- Making information available about services that people need and want
- Developing an outcome-focused approach to commissioning and contracting
- Supporting service users, their families and carers and communities to understand and make the most of the opportunities presented by personalisation

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1 CSIP and In Control 2007 ‘Commissioners and Providers Together: the Citizen at the Centre’ Wythall CSIP and In Control.

2 See the third article in this publication for an example of how voluntary and community organisations are supporting users through brokerage

3 Interview with NAAPS held in July 2009.
Self directed funding mechanisms such as personal and individual budgets are proposed as a means to help people exercise choices and organise support in a way which suits them. However, it must be recognised that individual and personal budgets will not necessarily create the services and support mechanisms that people need and want on their own. This drive must come from commissioners and providers working together to develop and shape a market of provision that reflects the needs and wishes of local people. Shaping the market presents a number of key tasks and challenges for commissioners.

While there is an emphasis on choice, choice cannot be unlimited. For personalisation to work properly there needs to be a sustainable mix of provision which reflects the preferences of local communities. The role of public bodies in facilitating the right mix will be crucial to the success of the personalisation agenda.

Developing effective processes and channels to collect information on local needs and preferences is essential to building effective and sustainable services. Local statutory bodies are well placed to aggregate information on local need and purchasing patterns and communicate it to frontline providers, who can then develop services and tailor provision accordingly. Getting the right mix of services is essential to avoid oversupply, which would threaten the sustainability of providers, and undersupply, which would undermine the choice that this agenda aims to facilitate.

A key task for commissioners is to invest and build capacity in the provider market to develop new services in line with changing demands. There is a view that services will emerge automatically in response to the growing number of people with individual and personal budgets. However, this does not happen easily and providers need information, advice and some certainty before they take the step of setting up a new service.10 Commissioners and providers must work together to build their market intelligence and awareness of local need, and predict how the market and demand for services might change in the future. Meanwhile financial support could also be made available to develop new services. Some councils are using part of their Social Care Reform Grant to stimulate the local market by awarding funds and grants to service providers pioneering and innovating person-centred services.11

As well as supporting innovation and stimulating new services in response to demand, commissioners need to support existing services where they are working well. Balancing investment between new and existing services is important to ensure that people who want to continue receiving their traditional provision are not disadvantaged. This process will also include identifying hard-to-reach organisations which may often fall under the radar of commissioners but who are already providing personalised services and are well placed to play a part in developing, delivering and publicising services as a locally led process.

The success of market shaping depends on building effective partnerships with service providers. This means involving them in decisions whenever possible and creating the conditions whereby all organisations can effectively engage in the process. Existing provider forums and local partnerships can be useful platforms for a continuing dialogue between commissioners and providers and also facilitate opportunities for joint working between providers. Key to building effective partnerships for personalisation is to develop and grow a culture of trust across the provider-commissioner boundary and recognise that dialogue between providers and commissioners must always reflect and be driven by what is in the best interests of people and communities.

Public bodies must be clear about their strategies for developing and implementing personalisation and establish effective channels of communication to share them with providers, service users and other key stakeholders. This means that where there are opportunities to engage and work with commissioners and service users to take forward personalisation providers must be given sufficient notice so that they can participate effectively and be involved in decision making around implementation.

There is particularly a need for information about time scales for the implementation of personal and individual budgets and the scope of their use. Maintaining financial support and funding channels for VCOs is important to help them through the transition. Key areas where organisations are likely to need support are adapting their business models, administration and finance processes to meet the demands of self-directed funding mechanisms and understanding likely changes in demands for services and how their provision is likely to be affected. It is important that local VCOs and all providers are supported through the transition so that the overall range and quality of provision does not suffer.

Commissioners can also use the strengths of the VCs where appropriate to help service users and other stakeholders through the transition. VCOs are often well positioned to provide information and advice to users, their families, carers and wider support circles about the process of transformation and its implications. There is also the potential for new roles and responsibilities for VCOs in training or advising others in services such as support planning, advocacy and brokerage, which will be essential part of the new system of personalisation.

10 NAAPS, 2009 ‘Using Support Planning to Contribute to a Thriving Micro Market’

11 See the third article in this publication for an example of how a local authority has supported the development of a local person-centred service, ‘Partners in Support’
DEVELOPING OUTCOMES BASED COMMISSIONING

Current commissioning strategies and procurement practices are often resource-led and focus on outputs as local authorities are pushed to be transparent, make efficiency savings and reduce transaction costs. Where commissioners continue to play a role in specifying and procuring services there needs to be a shift away from task and output based models towards outcomes-based models which understand and measure the full impact that service providers have. This means not only looking at how a service can meet the needs and improve the well-being of individuals but also recognising and acknowledging their other benefits, such as how they might support the carers and families of service users, improve local employment opportunities, or involve the wider community.

New contractual models are evolving that support this approach. OPM are currently working with 6 local authorities to develop ‘framework contracts’ which incorporate outcomes-based approaches to service delivery and establish principles of person-centred ways of working. Local authorities can then, where appropriate, direct budget holders to the service providers in their framework contract. The framework contract model allows greater flexibility for service providers by agreeing outcomes rather than outputs and promotes quality through competition between providers within the contract. As well as improving outcomes for service users and re-ensuring them of the quality of a service, contractual models like these can support providers in the transition to personalised budgets and promote stability. However, it is important that frameworks are established in a fair way that gives access to all to avoid some providers being locked out of the market.

SUPPORTING SERVICE USERS, FAMILIES AND CARERS TO MAKE PERSONALISATION EFFECTIVE

It is essential that an effective infrastructure of support, advice and information is in place to help service users, their carers and families navigate the new system of personal and individual budgets and make the most of the opportunities presented by personalisation. Commissioners can, where appropriate, invest in these types of support services and make sure that they are accessible to all who need them. However, there are questions over how and when they should best be financed to ensure that information and advice is provided independently and with the genuine interests of service users and communities at heart.

Personalisation will also require investing and commissioning universal services for the whole community such as leisure and transport and services which promote the public good, but which may not be directly purchased by individual budget holders, for example local libraries. These services help people lead fuller lives as citizens and improve quality of life and outcomes for all, not just social care users. Such services are also an integral part of the move towards prevention in personalisation and can help provide for the choice and diversity in how people wish their support needs to be met.

Commissioners need to acknowledge and enhance the role that service users, their families and carers can play in commissioning and make the design, delivery and commissioning of services. This means recognising the expertise, knowledge and skills that people hold and the valuable contribution they can make both to developing effective public services and also as citizens as part of a wider community. It also means that more power and resources need to be shared with users so they are empowered to co-produce solutions to the difficulties they are best placed to know about.

Fostering co-production will involve supporting the development of user-led organisations, new mutuals and cooperatives which can help create better choice for users. Co-production also has the potential to contribute to the regeneration and development of communities by involving local people and harnessing their energy and creativity to produce solutions that meet the needs of the whole community. It can also improve outcomes for users, their families and carers by helping them to develop and sustain relationships, networks and connections with others which are essential to wellbeing.

BALANCING CHOICE AND RISK

A key challenge for commissioners is how to balance choice and risk. Commissioners need to create systems that provide users with the freedom, autonomy and flexibility to exercise their own choice around their support at the same time as safeguarding against potential harm or abuse and ensure quality provision of services. There is a growing number of protection frameworks, such as approved provider lists which can help assure quality of service. Moreover, ensuring that people have access to advocacy, advice and local brokerage services means they can make more informed choices. Part of this process will also involve supporting budget holders, their families and carers to understand their duties, responsibilities and accountabilities as employers to protect against possible pitfalls or liabilities, as well as ensure a better working experience for those employed.

Local authorities and social work professionals may face some challenges in relinquishing some of their traditional control and moving away from a top-down culture towards care planning and support, but doing so is essential if service users are to experience greater autonomy and control over their lives and make the most of the opportunities presented by personalisation.

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12 See SCIE 2009, At a glance 6: Personalisation briefing ‘Implications for Commissioners’ for more on outcomes-based commissioning.
13 Interview with OPM held in June 2009.
14 SCIE 2009, At a glance 6: Personalisation briefing ‘Implications for Commissioners’ London SCIE.
15 For more about co-production see NEF’s 2008 ‘Co-production: a Manifesto for growing the care economy’.
CONCLUSION

Personalisation has the potential to improve outcomes for service users and communities by putting them at the heart of public services and enabling people to take more control over their lives. It is only by working together however that commissioners, service providers, and service users can make this vision a successful reality.

The expansion of self-directed support and funding mechanisms in social care is likely to have significant implications for service providers and commissioners, as well as service users, carers, and communities as a whole, and presents a number of challenges and uncertainties. It is difficult to assess the full effect and impact personalisation will have at this early stage of implementation, but this will no doubt become clearer as personalisation becomes established and entrenched. What is clear however is that this change process offers a real opportunity to improve services for people and communities and the issues and challenges that organisations and commissioners face will be worth the while if service users experience greater well being and quality of life.

The next article in the series explores how personalisation is being implemented in practice and provides some examples of how organisations and service users are responding on the ground.
This section presents some examples of how personalisation is already working in practice. Through a series of short case studies it considers some of the opportunities and challenges presented by personalisation and the introduction of individual and personal budgets. It illustrates how voluntary and community sector organisations and services users are responding on the ground.

EMBEDDING PERSON-CENTRED PRACTICES: MACINTYRE AND THE OPPORTUNITIES PROJECT

The introduction of Personal and Individual budgets is only one aspect of personalisation. Personalisation is a much wider philosophy which involves placing the service user at the centre of a service.

Macintyre and the Opportunities Project are two organisations that have adopted such thinking in their approach to services.

Macintyre is a national charity that provides personalised support, care and learning to approximately 900 adults and children with learning disabilities. Macintyre’s offer includes self directed services, supported living schemes, registered care homes, accredited training schemes and lifelong learning services, as well as residential special schools and a further education college. The Opportunities Project is a micro user-led not for profit company supporting people locally who experience exclusion from everyday life due to physical and/or learning disabilities, and mental health issues. Through its See Me and Hear Me Advocacy services it aims to promote greater control for users over their lives and offers a wide variety of individualised and tailored support. The Opportunities Project is one of the services linked with the Department of Health funded Micro Markets Project which is currently being piloted by NAAPS in Kent and Oldham.

Both Macintyre and the Opportunities Project have been ahead of their time in pioneering personalised approaches and embedding person-centred thinking and practices in their services.

MACINTYRE

Macintyre is an organisation with a long history of promoting person-centred services developed jointly with service users. Established in the 1960s originally to support children with disabilities through individualised learning, Macintyre has evolved to offer a wide variety of learning and supported living services and personalised care based on its belief that everyone should be treated as an individual and has a contribution to make to society. Although it is a large organisation supporting over 900 people through 120 different services, it successfully delivers personalised support to its users and over the years has developed a culture of person-centred thinking and practices amongst its workforce.

Macintyre aspires to be a person-centred organisation and its organisational structure, style of management and approach to its workforce as well as its services all reflect its core values. Staff must demonstrate an understanding of person-centred support in their initial recruitment and this understanding is continually developed.

NAAPS is a UK charity established to represent the interests of all those involved in delivering very small, individualised, community based services. To find out more visit www.naaps.co.uk.
and reinforced through ongoing training, and supervision for individual workers and through feedback from people using the services. Its open culture and deliberately flat organisational structure enables Macintyre to be responsive to individual needs and preferences and continually improve and develop services. It also ensures effective accountability and decision-making and means that senior management remains close to the point of service delivery.

Macintyre’s statement of values stresses the importance of placing an individual at the centre of their service and as such ensures that users are that Macintyre service users are fully involved in decision making around their support. Macintyre was one of the first organisations to adopt person-centred review processes, a user-led evaluation tool developed by Helen Sanderson Associates. Person-centred reviews help Macintyre identify areas for change and improvement and are used regularly in support planning around the individual. Macintyre is now looking at how it can develop and cluster the individual learning from this review process drive further organisational change and generate wider learning around of person-centred approaches and services.

Macintyre is also looking to maximise the opportunities to increase the role of carers, families, volunteers and community groups to complement professional support and create new services to support people who have opted for more control over their own funding. An example of this is the My Way service which aims to support young people who are facing change and making the transition to adulthood. Macintyre works with the individuals, their families and carers and local authorities to find a way of supporting the young people and develop and implement a transition programme based around their individual aspirations, such as support with finding housing or employment.

For Macintyre, personalisation is an attitude or ethos which is about supporting people in a person-centred, holistic way and in whichever form makes most sense for the individual. For some people this might mean the adoption of self-directed funding mechanisms, but this should not be the only goal of personalisation. For Macintyre it is the experience of the person which is key and the real aspiration and challenge of personalisation is about rethinking services in a way that improves outcomes.

**THE OPPORTUNITIES PROJECT**

The Opportunities Project was pioneered by Barbara Denny seven years ago and began life in her dining room with service users and other like-minded people. Then a care manager, Barbara recognised that existing services were failing to adequately support some service users, leaving them increasingly isolated and excluded from everyday life. Both the service users and Barbara shared a vision for a user-directed service that would empower people to make their way through everyday activities and lead the life of their choice by offering personalised and tailored support. Out of this vision grew the Opportunities Project based around two main services, the See Me Service and Hear Me Advocacy Service. These services aim to help people participate and engage in daily living in their community and increase opportunities for independence, social and work activities.

Since it was established the Opportunities Project has evolved to offer a wide range of individualised support through these services, including help with filling in forms, accessing primary healthcare by making and keeping appointments, help with household chores, accessing and taking part in social and leisure activities, and help with employment preparation. Everything that the Opportunities Project does is underpinned by a holistic philosophy that views the service user as a whole person rather than seeing separate problems or needs. This holistic approach particularly aims to support people with multiple needs who struggle to fit into the current silos of social service provision and can sometimes end up being stranded between services.

All services are self-directed in nature and are based around a personalised support plan drawn up with the full involvement of the service user. Service users continue to be actively involved in running the service; they sit on the board of directors and often get involved in certain practical aspects of the service such as developing the website and contributing to the newsletter.

Its foundation in the community means that the Opportunities Project has developed specialised knowledge about local support mechanisms and its small infrastructure means that it can shift and respond easily to meet the needs of its users. Staff at the Opportunities Project appreciate the importance of developing personal relationships to users’ well being and one-to-one working is a fundamental aspect of the Opportunities Project.

In this way the Opportunities Project aspires to be a truly user-led and responsive service and is far along in its thinking and practice around person-centred practices. For the Opportunities Project however the challenge is working in an environment where personalisation is still in its infancy and the opportunities it may present are as yet unclear. This is compounded by a lack of resources and capacity to engage with policy developments at national and local level, a barrier which is faced by many small organisations, who must devote resources to running existing service and a challenge which NAAPS is working to help overcome.

**AHEAD OF THEIR TIME**

In many ways both Macintyre and the Opportunities Project are ahead of their time in promoting and embedding person centred practices and approaches in their services and throughout their organisation. Both should therefore be extremely well placed for the opportunities offered by the
personalisation agenda, although each faces their own challenges. How these challenges present themselves will become clearer as personalisation is established and moves forward, but in the meantime both Macintyre and the Opportunities Project are committed to developing and nurturing their strengths and their doors are open to the possibilities of personalisation.

Further information
To find out more about MacIntyre visit www.macintyrecharity.org or email bill.mumford@macintyrecharity.org
To find out more about the Opportunities Project email Opportunitiespro@btinternet.com

Navigating the Social Care Market: Shop4Support

Shop4support is a web-based solution that aims to help service users, providers and commissioners navigate the social care market. It provides a one-stop-shop for information and access to support services and products available to help meet service users’ needs. Shop4support was pioneered by In Control to help service users make the transition from top-down approaches to service planning towards designing their own solutions and making creative choices about their support. It builds on the concept of online market models in other sectors and aims to develop a retail market for social care, which will help service users make the most effective use of their personalised budgets. Shop4support is a social enterprise owned by In Control and was established with support from the Department of Health and substantial investment from Valueworks, who provide the infrastructure behind shop4support.

Supporting Budget Holders

A key issue for service users embracing self-directed support is knowing where to go and how to find out about the range of services available to help meet their support needs. In Control observed that service users had to gather information on available services through multiple sources in a process that was often confusing and time-consuming. Through shop4support they aim to bring this information together in one place to make the social care market easier to navigate and so encourage and help service users to take more control over their support.

Budget holders can register on the shop4support website to access information about and compare services on offer locally, regionally and nationally and plan their support package. Services on the site range from traditional care services such as domestic help and personal care, to education, lifestyle and leisure activities, to products and equipment that help people live independently. Through an integrated vendor rating system users are able to assess the quality of services and providers are encouraged to list their accreditations and offer reviews and references where possible. This system aims to give users greater confidence in spending their budgets and reassure them of the value for money of a service. Users are able to review feedback about services as well as share their personal experiences and stories through the shop4support online forum, My Life. Budget holders can also choose to purchase services and products through the shop4support online ordering system, which is designed to ease the administration and payment process for budget holders and assist with managing and tracking budget spending.

Benefits for Other Stakeholders

As well as supporting service users to make more effective use of their budgets, web-based solutions like shop4support are one way for service providers to market their services to budget holders and establish a market presence. How to reach potential customers and make budget holders aware of their services is a key issue for providers and online market places such as shop4support can offer a direct channel to service users and access to a much larger potential market.

By automating the payment system shop4support also aims to help providers in tracking and managing their transaction costs and reduce their administrative efforts:

‘The idea is the system will create more efficiencies and savings in terms of administration and overheads for providers and therefore make services cheaper for users, as well as free up time for frontline staff so they can spend more time with the users – which is what they want to be doing’. Caroline Tomlinson.

Local authorities and PCTs can also use shop4support as a tool to inform commissioning and manage local markets of services by allowing commissioners to collate data on spending and identify gaps and shortfalls in provision. A Budget Manager tool has also been developed for local authorities and third party organisations to assist with personalised support planning and purchasing and budget management for their multiple clients.

Next Steps

Shop4support was successfully piloted in 2008 with five local authorities and several service providers and was launched in summer 2009. Service users can already order and purchase products from shop4support and the number of providers registering their services is continually expanding. Local authorities in the North East and West Midlands are already using shop4support to help with personalisation management and it will evolve over the coming months to include further local authorities and PCTs as personalisation rolls out.
Online market models like shop4support are one way to facilitate the creation of a personalised social care market and help service users make the most of the opportunities offered by personalisation.

**Further information**
To find out more visit [www.shop4support.com](http://www.shop4support.com) or contact Caroline Tomlinson at caroline.tomlinson@in-control.org.uk

**WORKING TOGETHER TO DEVELOP PERSONALISED SERVICES: PARTNERS IN SUPPORT AND HERTFORDSHIRE COUNTY COUNCIL**

Key to the success of personalisation is the role of commissioners in supporting the development of personalised services. Partners in Support was established in 2007 through partnership working with Hertfordshire County Council (HCC). Partners in Support is a voluntary organisation providing an intensive support service to people with severe and complex learning disabilities, including people with additional mental health problems and a reputation for challenging traditional services. By offering users a personalised service shaped around their particular support needs and aspirations, Partners in Support aims to enable users to live as independently as possible in their own homes and participate in their local community.

**SETTING UP THE SERVICE**

Partners in Support was pioneered by Martin Nicholas after he recognised that existing services and structures were failing to support some service users with negative consequences. Hertfordshire County Council had also identified a need for more creative and innovative solutions to meet the needs of individuals who were receiving highly expensive provision with poor outcomes.

Drawing on his previous experience at a large learning disability charity and following examples of personalised service models in Scotland and the USA, Martin approached Hertfordshire County Council with a partnership proposal for the development of a local and specialist organisation to provide individually designed services tailored to the specific needs and wishes of users.

Martin drew up a business plan which set out the vision for the organisation, broke down the support costs to each individual service user, projected infrastructure and administration costs and explained how the personalised approach would work in practice.

The business plan proposed a service model that would:

- Directly involve service users and their families and carers in decision making around their support package
- Involve service users in the recruitment of staff and match users with a staff member with whom they could enjoy shared interests and activities and develop a personal relationship
- Ensure a commitment to person-centred values and working practices through careful staff recruitment, an individualised induction programme and further regular training for staff
- Remain locally focused and only support a small number of service users at any one time within organisational capacity

Martin was awarded a two year start-up grant from HCC’s innovation fund to help establish Partners in Support. The grant enabled Martin to maintain and develop an organisational infrastructure until Partners in Support had enough income to be self-sufficient.

**ACHIEVING MORE BY WORKING TOGETHER**

The start-up grant ended this year and Partners in Support is now a self-sustaining organisation. It currently supports 8 service users through Virtual Service funds, which are managed by Hertfordshire County Council and purchase the services on a spot contract basis. Partners in Support has reduced the overall cost of care for users by reducing the need for interventions and hospital admissions and enabled Hertfordshire County Council to make the best possible use of its resources. Most importantly, it has greatly improved the quality of life and outcomes for the people who use the service – including the families, carers and wider support networks of the service users themselves. By working together Partners in Support and Hertfordshire County Council have achieved much more for service users and their local community.

**Further information**
To find out more visit [www.partnersinsupport.org.uk](http://www.partnersinsupport.org.uk), or contact Martin Nicholas at mnicholas@partnersinsupport.org.uk

**USER-ESTABLISHED SERVICES AND MUTUAL RESPONSES TO PERSONALISATION: CARING SUPPORT**

In response to the expansion of direct payments and the personalisation agenda, service users in Croydon have come together to set up their own care provider organisation, Caring Support. Caring Support is a charitable multi stakeholder cooperative organisation established with the support of Co-operatives UK, Mutual Advantage and the Department of Health, together with local investment from Help the Aged and Croydon Council. By developing a cluster-based service and employing a register of trained
homecare and personal care assistants
Caring Support aims to provide users with high quality care and support and enable people to remain living in their own homes for as long as possible.

ESTABLISHING THE SERVICE

Caring Support was pioneered by Monica Ryan and her husband, following previous negative experiences with other care services that failed to provide the kind of high quality personal care and support that Monica and other service users needed; well trained staff were at a premium. They recognised that, while direct payments offered a degree of self directed control as they got older, they were finding it harder to cope with employer responsibilities and complex paper work and had they serious concerns about training and pay of personal care assistants, so they began to search for a more creative solution. Drawing on her experience as a direct payment user and her involvement with the local direct payment user group, Monica saw the opportunity for a new kind of service provider that could be owned and controlled by service users and their carers. In late 2006, following a successful bid by Cooperatives UK, the first pilot was launched to see how the proposed organisation could work and Caring Support was born.

THE COOPERATIVE MODEL

The service itself works on a cluster model based on small groups of service users (no more than 15) matched with personal care assistants who are trained to work in a person-centred way. The cluster model allows close relationships to be developed between users and personal care assistants (pca’s) and means that when their own regular pca is unavailable service users have access to back up from other pca’s in the cluster whom they know and can trust.

Its cooperative structure means that Caring Support is owned and controlled by the service users, their primary unpaid carers, families and friends, and the personal care assistants themselves. All three groups are involved and supported as part of the cooperative principle and members from each group sit on the management committee.

Community is an important aspect of the cooperative ethos and the cluster model aims to foster and encourage circles of mutual support and combat isolation. Indeed, one of the main aims of the organisation is to offer pastoral support to primary informal carers who can often suffer isolation and help them to develop connections with other unpaid primary carers. The cluster model also helps to reduce anxiety and alleviate the administrative and financial pressures of managing personalised budgets and employing personal care assistants.

Obtaining registration as a charitable society for the benefit of the community was important to the legal structure adopted and to the organisation’s ability to fundraise in the future to support its pastoral social aims.

SUPPORTING PERSONAL CARE ASSISTANTS’ CONTINUING PROFESSIONAL DEVELOPMENT

The promotion of caring as a profession is another fundamental aspect of Caring Support’s work. Caring Support has been working to develop a local employment strategy to recruit for its clusters and train its own staff. It has negotiated a partnership with Croydon Adult Learning and Training (CALAT) to recruit for and participate in their Introduction to Work in Care course for those new to the care sector in the south and north of the borough. The introductory course aims to introduce prospective pca’s to care and to Caring Support’s ethos and working practices. The aim is for Caring Support to have a pool of new recruits from the courses and for new pca’s to carry on their professional development through further qualifications and training with CALAT. It is hoped that these courses will raise the profile of caring in the community and support cluster development. By remaining locally focused, Caring Support also hopes to engage with the wider community and develop local investment for the future.

NEXT STEPS

Caring Support has recently been awarded registration with the Care Quality Commission (CQC) following its successful pilot and obtained funding to launch the business officially in Autumn 2009. It has started trading and hopes to increase its membership and the number of working clusters to seven over the next few years. It will also work to expand the number of introduction to care training courses on offer locally.

Caring Support is an example of how service users, primary unpaid carers, friends and supporters and paid personal care assistants can come together collectively in order to make the most of personal budgets and direct payments and support each other through new mutual models.

Further information
To find out more email caringsupport@googlemail.com or telephone 020 8660 7417.

SUPPORTING SERVICE USERS THROUGH BROKERAGE: THE NATIONAL BROKERAGE NETWORK, RUILS AND ASHFORD LEARNING DISABILITY CIC

Brokerage is seen as a crucial component of the move towards Individual and Personal budgets and self-directed support. Brokers have the essential role of ensuring that people can live the life of their choice by helping them to plan and organise any support they need and access a range of services options. However brokerage is a
Personalisation: rhetoric to reality

**PERSONALISATION IN PRACTICE CONTINUED**

Fledgling area and the exact definitions, nature and shape of brokerage are still being worked out. The National Brokerage Network, RUILS and Ashford Learning Disability CIC are three organisations that have been developing brokerage services for users and are all working to develop understanding of how brokerage can support and help people make the most of the opportunities presented by personalisation.

**THE NATIONAL BROKERAGE NETWORK (NBN)**

The National Brokerage Network aims to help develop policy and practice around brokerage and support the development of local brokerage services through its growing network of providers and regional coordinators. The network acts as an information and knowledge exchange and offers guidance and representation to existing and potential brokerage organisations. It is also working to develop quality systems and standards for brokerage and develop best practice through a series of emerging training and accreditation schemes. NBN was established as part of the In-Control initiative for self directed support and its overarching goal is to promote empowerment amongst service users by supporting them to take control over their daily lives and decision making through independent brokerage which is totally user directed.

In order to help meet this goal NBN has forged a hub model of brokerage services and is working to implement this model across the regions. The NBN Hub concept was pioneered by Tony Phillips and aspires to offer a universal service for people in a local area who need support and assistance with any aspect of their lives. It advocates a holistic approach to brokerage and strives to overcome the silos of social service provision to provide information and support in a way which takes account of the whole person and consider the full scope of their needs. Working in a specific locality or region, the NBN Hub aims to serve all members of a community, develop good relationships and provide information about other support services and mechanisms to improve outcomes and well being across the board.

The Hub model is currently being piloted in Essex, where it has already evolved to facilitate other services and activities such as an annual music festival in response to the needs and wishes of local people. It currently hosts a social work student unit and it is now looking at possibilities to include services from other parts of the personalisation jigsaw, for example advice and advocacy services, and to provide other appropriate specialist information such as benefits and housing. NBN is also considering how it can integrate and adopt the principles of IAG (Information, Advice and Guidance) in the Hub model to produce consistent and quality information for users.

**RICHMOND USERS INDEPENDENT LIVING SCHEME (RUILS)**

Richmond Users Independent Living Scheme (RUILS) has pioneered the Richmond Independent Brokerage (RIB) Consortium to offer brokerage services to local people in Richmond. It was established with support from Richmond Council and was commissioned from Richmond Council’s Social Care Reform Grant as part of its commitment to the transformation of adult social care and the development of local user-led services.

RUILS strived to develop a consortium approach which would bring together and build good relationships with local organisations and reflect the full range of people using self directed support, including people with disabilities, older people and those with learning disabilities. RIBS is made up of eleven members and has three lead partners: RUILS, Age Concern, and Advocacy Partners (a learning disability organisation), with RUILS as the lead agency. The service is run by a Development Manager based within RUILS and a Support Planner based in each of the other two organisations. Service users can get support planning from a council care manager, one of RIBS Support Planners or on a do-it-yourself basis with support available, such as help with budgeting or access to peer support networks. By providing a telephone helpline, information packs and signposting, the consortium helps those who want to do more of their care planning themselves to do so.

Through this mixed approach to support brokerage RIBS members and Richmond council are benefitting from better intelligence about the range of provision needed. The consortium approach also means that the level of dialogue between agencies has increased enormously and with it the opportunities to develop new services to meet the needs of users and local people in the future. The RIBS consortium is also planning to extend its offer of brokerage training to other agencies in Richmond and beyond. Its services are universally available to anyone requiring support brokerage.

**ASHFORD LEARNING DISABILITY CIC**

The Ashford Learning Disability CIC aims to support people who have a learning disability to make choices, become independent and integrate with their community. An essential part of this work involves providing a brokerage service to individuals to enable them to exercise choice and control over their support and decision-making around their lives. Ashford Learning Disability CIC grew out of the Ashford Learning Disability Partnership Group 18 months ago and has since been working to develop practice and understanding around brokerage in the local area.

Ashford Learning Disability CIC’s brokerage service includes support to develop a person-centred plan, help with finding local activities and events, with accessing local resources,
and with finding employment and volunteering opportunities. A major part of its brokerage service also involves supporting the parents, families and primary carers of service users to understand and participate in the support planning process. Ashford Learning Disability CIC recognises that the families and especially the parents of young adults and service users can often find their transition to greater independence a challenging time and aims to ease this process.

Since it was established, the Ashford Learning Disability CIC has taken responsibility for the regional coordination of brokers for the National Brokerage Network and been involved in a pilot project with three other local organisations to provide brokerage services in the local area. It also provides brokerage training in line with standards being developed by NBN. This training focuses on understanding the role and function of brokerage, its aims and principles and the practical process of support planning and accessing services.

The training also involves developing a wider understanding and grasp of personalisation and what it means. Indeed, Ashford Learning Disability CIC argue that an understanding of personalisation and person-centred working is fundamental to providing a successful and effective brokerage service.

Ashford Learning Disability CIC provides brokerage services to all individuals, not only those with a learning disability. It also seeks to fund and provide these services on an individual basis rather than through block contracts as it believes that this will help achieve greater independence and control over decision-making for service users. Fundamental to its philosophy around brokerage is that brokers should facilitate choice, not influence it.

**Taking Shape**

Brokerage is still in its early stages but is beginning to take shape and the work of NBN, RUILS and Ashford Learning Disability CIC is helping to achieve a clearer understanding of its roles and functions. Some questions remain however.

What is the best way to go about providing brokerage to ensure an independent service and achieve maximum control for the user? And what should the exact role of local authorities be in providing, supporting and funding brokerage? Precise definitions of brokerage are still emerging and where to draw the lines between brokerage, advice and advocacy is uncertain but the answers to these questions will become clearer as personalisation is established. In the meantime the role of brokerage continues to be explored, experimented and evaluated.

**Further information**

To find out more about the National Brokerage Network visit [nationalbrokeragenetwork.org.uk](http://nationalbrokeragenetwork.org.uk) or contact Andrew.carpenter@nationalbrokeragenetwork.org.uk.

To find out more about RUILS visit [www.ruils.co.uk](http://www.ruils.co.uk).

To find out more about Ashford Learning Disability CIC visit [www.ashfordldcic.co.uk](http://www.ashfordldcic.co.uk) or contact Dave.rawling@ashfordldcic.co.uk.
In-Control – a social enterprise working across the sectors to transform the social care system into one based on user led self-directed support
www.in-control.org.uk

Department of Health
Personalisation web pages
www.dh.gov.uk/en/socialcare/socialcarereform/personalisation

The DH Personalisation Network – providing toolkits and resources for those involved in changing the Adult Social Care system
www.dhcarenetworks.org.uk/personalisation

SCIE (Social Care Institute for Excellence) – developing and transferring knowledge about good practice in personalisation
www.scie.org.uk/adults/personalisation

The IBSEN report – National Evaluation of the Individual Budgets Pilot Project
http://php.york.ac.uk/inst/spru/research/summs/ibsen.php