RHETORIC OR REALITY?

Care personalisation choices for older Londoners
Age Concern London  
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Numbers of personal budgets for older people in London and experiences of local authorities in implementing personalisation by Alison Handford, independent consultant, for Age Concern London. This report is available on request from Age Concern London.

Age Concern London wishes to thank all of the older people, staff from local authorities and staff from London borough Age Concerns who contributed their knowledge and insights to this report.
London’s older people are looking forward to a healthy and active future and many of us will enjoy a happy, healthy old age. However the expected growth in the number of Londoners in older age groups means that inevitably, the need for care and support will remain and increase.

Older people who need care and support in future will rightly expect a high quality of service. They will expect to be in control of the support they receive and expect it to be tailored to their individual wishes and needs. However this has not been the experience to date for many older Londoners who need to use local social care services. Many complaints focus on having to accept a “one size fits all” service, where for example service users often cannot choose what time a carer comes to help with daily tasks.

We may be at a tipping point where the Government’s positive agenda to extend choice and control to older people’s services meets the reality of how many services have been run to date, and the unresolved long-term questions about care funding. An ageing population means that even a standstill budget would reduce the resources for each care service user.

Age Concern London’s research shows that many older people find the idea and reality of personal budgets very challenging. Care and support brokerage, information and advice are vital to make choice and control a practical reality for all older people. Some people may be happy with and wish to keep the type of service they have already. Some new service users with higher support needs may also prefer a type of service which does not require them to take charge of every detail themselves. Others, especially those with the right backup, will explore how they can use the support available to define individual, independent lives.

We want to see a future where every older person who needs to use social care can make a genuine and informed choice about how their needs can be met – whether by actively taking control themselves or by receiving support from others. We want to see a future where care service users have the necessary resources available to them.

I hope that this report can help us take a small step in that direction.

Samantha Mauger
Chief Executive, Age Concern London
Executive Summary

Age Concern London (ACL) has conducted an original piece of research focusing on older people’s issues in relation to personal budgets for social care. Our intention is to help older people, local authorities and voluntary organisations make care personalisation work better so that older people draw the maximum benefit from it. This report is being distributed to local authorities, the NHS, regional government bodies and older people’s organisations across London. ACL would welcome dialogue with all stakeholders on the issues raised by the research.

The research was divided into four key strands:

1. Desk research identified numbers of older people in all London boroughs who have taken up personal budgets as of Summer 2010, based on returns from individual local authorities and information collated on the London Care Placements website https://www.londoncareplacements.gov.uk/?q=content/london-self-directed-support-statistics.

2. Focus groups were conducted with a total of 55 older people across four London boroughs. The sample included older people who: had a personal budget; were in receipt of a direct payment; had previous experience of a care package from social services; and participants who had never received support from social services.

3. Interviews were conducted with a total of 11 Age Concern staff from nine London Boroughs. Participants included local Chief Executives and Managers of Care Services working for Age Concern.

4. Local authorities were approached and interviews were conducted with staff from a total of 9 local authorities to ascertain their views on personalisation and the factors affecting the rollout of personal budgets for older people. Local authorities were at different stages of implementation of personal budgets, with some still in the pilot stage.

The data was analysed and key themes were identified. One of the key themes which featured strongly in all aspects of the research and was fed back by the different groups of stakeholders related to there being a lack of clarity surrounding what a personal budget is and how it should be managed.

Older people felt that a personal budget would provide more choice and control but also asked that adequate support was in place to help them make the most of their personal budget. Many also felt that personal budgets were not suitable for all older people. These points were further developed by staff working for Age Concerns across London. In addition to this there was consensus that the voluntary sector were well placed to provide support with care planning and brokerage.

Local authority staff thought that older service user’s level of understanding of personalised care was an obstacle to extending take-up, and that some older people were reluctant to go down this path for a number of reasons. Local authority staff endorsed the need for provision of advice, information and brokerage, and had a number of concerns around safeguarding and risk management. Employment, particularly of family and friends was seen as a key area of confusion for many service users.

Based on the research and comments from a stakeholder steering group, a range of recommendations have been made.
ACL’s discussions with older people, Local Authority staff and borough Age Concerns have led to some clear recommendations.

ACL’s key recommendations in order that care personalisation can be of most benefit to older people are as follows. We know that good practice is developing in different parts of London and want to see many promising innovations being used more widely.

**Clarity**

Councils and providers should use simple and clear language to show what care personalisation means and how older people can benefit from it.

Different Councils should develop and use a consistent vocabulary on the use of terms like personal budgets or direct payments, choice and control and self directed support.

Councils should actively explain and promote the benefits of older people having choice and control over the support they receive.

**Support**

Councils have a responsibility to invest in advice and information, care brokerage and advocacy services so that older people can exercise choice and control effectively, with full knowledge of suitable services and carers in their area.

Information must be available through a wide variety of channels including face to face and print – the Internet is not enough!

Support and advice need to be tailored to older people’s needs and capacities, not generic.

Support needs to be ongoing while an older person is using a service and this needs to be factored into tenders – an annual assessment by social services is not enough! Support must be provided for older people to manage the financial and employment aspects of a personal budget.

Support to older clients works best when delivered in partnership with the local voluntary sector.

Tenders need to include the cost of the appropriate support and advice to older people.

**Equality and Inclusion**

Information needs to be made accessible to older people from all communities (for example overcoming language barriers) and with all levels of capacity.

Service provision needs to take account of, for example, the wishes and needs of people from particular Black, Asian and Minority Ethnic (BAME) communities or the issues faced by many Lesbian, Gay, Bisexual and Transgender (LGBT) older people when accessing services.

Local authorities need to ensure that their Resource Allocation Systems and assessment procedures do not disadvantage older people in comparison with other users of adult social care. Local authorities should publish equalities monitoring data in relation to social care assessments and resource allocation.

**Quality and Variety**

The aim of switching to personal budgets must be to improve quality, not to reduce cost.

Local authorities have an important role to play in market development and in the standardisation of pricing, to ensure clients are able to access a menu of good quality options at a fair price which is available to all.

All older people must be given a clear and genuine choice of whether to take up a personal budget or to opt for a good quality commissioned service.

Local Authorities should work together to ensure people living on borough boundaries are not disadvantaged and that clients can purchase good services from neighbouring boroughs.
Since the 2007 White Paper “Putting People First” there has been a developing Government agenda to extend choice and control for the users of adult social care services. The idea of “self directed support” where people identify their own needs and priorities has increasingly come to replace the traditional idea that local authority social services should themselves assess the needs of people asking for support, and that officials should decide which services should be provided to meet the assessed needs. This change of approach is being implemented through the development of different forms of managed personal budgets, including direct payments.

While the concept of “self directed support” has been piloted and shown to work with younger disabled adults, the movement to extend choice and control is now increasingly affecting social care for older people.

Age Concern London (ACL) has investigated the situation across London to identify how the move towards personalised older people’s care is developing. This report and the recommendations within it result from dialogue with older people, local authority staff and staff of local Age Concerns. Our recommendations are intended to help older people, local authorities and voluntary organisations make care personalisation work better so that older people draw the maximum benefit from it.

Self directed support and personal budgets – a description

• With self-directed support individuals complete their own assessment of their needs (with family or other support as required) rather than a social worker (care manager) doing this for them. The client should agree the format of this with the local authority (it may be, for example, that an audio taping of requirements is used as a basis, if it is not possible to fill in a paper questionnaire). This forms a support or care plan and identifies the outcomes that the client wants to achieve.

• All clients who receive self directed support are told how much money has been allocated to them to meet their identified social care needs. This is known as a personal budget. Clients then have choice and control over how this personal budget is spent to achieve the desired outcomes identified, by them, in their support plan. How much control an individual wishes to have over their personal budget, will vary according to their ability and willingness to manage the budget.

• Support planning and brokerage services are available to support people with: person-centred planning; finding out what is available and possible; providing information and technical advice; coordinating support and resources; assisting people in managing their budget; and enabling things to happen. These support planning and brokerage arrangements may be provided by the Local Authority or outsourced to an independent provider.

• Clients can choose whether they want someone else (e.g. the Local Authority or local Age Concern) to manage the money for them, in what is called an Individual Service Fund (ISF), or whether they want to receive the money allocated to them to meet their desired outcomes (their personal budget) direct into their bank account.

• If a client wants to manage the money directly they can receive it as a direct payment into their bank account. This type of direct payment differs from a ‘traditional’ direct payment in that it is paid as a result of the client’s own self assessment of their needs, rather than a social services assessment of need. It is also different from traditional direct payments in that it can be used in a ‘creative way’ to meet the identified outcomes. It does not necessarily have to be used to pay for day to day personal care. For example, it might be used to pursue a hobby or to employ a carer to take the client out if that has been identified in the support plan (not all Local Authorities are equally open in the way they interpret this principle).
ACL entirely agrees that older people should be able to choose and control the support they are provided with and decide what the outcomes of that support should be. Many complaints from older people about poor quality care services focus on not being able to control the service: for example having no say in when carers come or what they do.

Concerns exist about what might be the impact on older people and on local services of the switchover to personalised care services. Will some older people find directing their care support too much of a burden? Will the end of block contracts mean that good services have to close for lack of funding? Will personal budgets have any impact on the quality of care available?

Considerable good practice exists to ensure provision of support planning and brokerage to enable older people to navigate the system and it is important to make this type of backup available to all older people using the care system. Local Age Concerns and other voluntary organisations can play a key role in providing support planning and brokerage.

Age Concern London, in partnership with Age Concern Bromley, has developed a toolkit to promote the importance of support planning and brokerage services. The toolkit, funded by London Councils, ‘Support planning and brokerage service for older people: self-directed support’, puts forward the business case for these services and offers advice on how to set up a support planning and brokerage service in your borough (http://www.aclondon.org.uk).

The move towards choice and control has reached older people’s social care just at the time when the economic crisis is starting to lead to major public spending cuts. It is imperative that older people’s social care be safeguarded from spending cuts. The system is already overstretched, need is set to rise with an ageing population and any cuts in the funding available for social care nationally would put vulnerable people at serious risk.

Any funding-driven restriction in access to care services using the Fairer Access to Care Services (FACS) criteria would increasingly mean that those older people receiving local authority support were those with the highest support needs, in the poorest health and those who would find it most difficult to direct their own support. It would also intensify concerns about funding the cost of care brokerage, information and advocacy. In principle, switching to personal budgets should to be cost neutral but it is doubtful whether that will be the case in practice. On the other hand it is likely that some people arranging their own support will find very cost-effective solutions that meet their wishes and needs well.

**FACS**

In 2003 the Government published the National Fair Access to Care Services (FACS) criteria. In 2010 these were revised and the following guidance was produced ‘Prioritising need in the context of Putting People First: A whole system approach to eligibility for social care’ (http://www.dh.gov.uk/publications).

These are guidelines with four bandings of needs, which councils must use to assess whether someone is eligible to receive ongoing social care services, having taken account of council resources.

The bandings describe the seriousness of the threat to independence or other consequences if needs are not addressed. This, alongside carers’ legislation, sets the framework within which everyone is to be considered fairly.

The four bandings of need are:

1. Critical
2. Substantial
3. Moderate
4. Low

In a number of councils services are provided under two FACS bandings or criteria - substantial and critical. These are the two highest levels of needs. Everyone is entitled to a community care assessment of their circumstances and need for care and support. Each individual case is different but the assessment will determine which services are required to meet needs under these criteria.

“I think that broadly all parties are in support of what we are doing. The fundamental question really, is whether there is enough money to deliver it”

Local authority officer, London 2010
The coalition Government has backed the existing target of 30% of adult social care recipients holding a personal budget by April 2011. Age Concern London’s research suggests that in August 2010 between 5,000-6,000 older people (65+) across London were receiving personal budgets (based on returns from individual local authorities and information collated on the London Care Placements website\(^1\)). Only a minority of those receiving a personal budget were receiving direct payments. Differences in definitions and terminology used by different local authorities make it difficult to define this proportion in a satisfactory way. The number receiving a direct payment appeared to vary between 735 and 940 depending on which assumptions are used. The numbers do seem to be increasing quickly, but as a comparison, the total number of older people receiving community-based services in London in 2007-8 was 117,000 (NHS Information Centre\(^2\)).

Some local authorities are just beginning to roll out personal budgets for older people. A number of boroughs report very low numbers of older people on personal budgets so far – in summer 2010 it appeared that there were none at all in some boroughs. So far there is not a clear pattern of which parts of London or which boroughs are furthest ahead.

However all of the local authorities Age Concern London spoke to are committed to moving ahead, the situation is changing very quickly and it is probable that in the near future, far greater numbers of older Londoners will access personal budgets for their social care needs. What have we discovered about the way in which they are being introduced?

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\(^1\)https://www.londoncareplacements.gov.uk/?q=content/london-self-directed-support-statistics


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**Figures for older people 65+ living in London**

- Older people living in London: 890,000
- Older people receiving community based services in London in 2007-8: 117,000 = 13% of older people in London
- Older people holding a personal budget in London: 5,000-6,000 = 4%-5% of older people receiving community based services in London
- Older people receiving a direct payment in London: less than 1000 = 0.9% of older people receiving community based services in London
Age Concern London held focus groups with a total of 55 older people across four London boroughs and Age Concern Redbridge conducted a survey with 70 older people living in the borough. The sample included older people with a range of social care needs and experiences including those who: had a personal budget; were in receipt of a direct payment; had previous experience of a care package from social services; and participants who had never received support from social services.

The sample may not be representative of all older people living in London, but it does highlight some of the key issues for older people. The exact numbers of participants who were in receipt of a personal budget was unclear, in some cases participants were unsure if they were in receipt of a personal budget or not, highlighting the confusion surrounding terminology within care personalisation.

When personal budgets and self-directed support were explained, a number of participants reported they would opt for a personal budget over a traditional care package with social services. However, participants were afraid that this could lead to an extra burden if their health conditions deteriorated and they wanted an opt out clause should they wish to change a care package or return to one fully managed by social services. Participants liked the elements of choice and control associated with personalisation, but there were significant fears around: paperwork; managing finances; employing staff; and whether there would be adequate support in place.

The findings have been summarised into four key themes which are discussed below.

1. Personal budgets give more choice and control.

Participants felt that personal budgets enabled them to exercise more choice and control. By having the option to interview and employ carers, older people reported greater satisfaction with the service and greater continuity in carers and increased reliability. Participants also felt that being able to employ friends and family would result in better value for care.

“I am wary of strangers, I would rather pay for my family or friends to help me” (Older woman from Hammersmith and Fulham).

People did however question what would happen to older people who did not have reliable friends or family to employ. Participants talked about the benefits of being able to stipulate the timings of carers and having increased control over the arrangements.

“You can change the agency as you have the power!” (Older woman from Westminster).

Overall, choice was associated with increased independence.

“Even just having a little bit of independence makes such a difference, having choice gives you independence” (Older man from Hounslow).

2. Personal budgets are difficult to understand and complicated to manage.

All of the participants felt that the language used within care personalisation was difficult to understand. However, those people who were using a personal budget felt that the terminology began to make more sense once they had been using it.

Participants also found the paperwork confusing and in their view there were too many forms to complete. Long and complicated forms were often simply not completed.

Participants said that they needed a lot of support to complete the paperwork and that the level of bureaucracy increased stress levels. Paperwork was reported to ‘stack up’ with age, or if not regularly managed.

“The paperwork piles up when you are ill” (Older man from Redbridge).

Managing the financial aspects of having a personal budget was also thought to involve continuity in carers and increased reliability. Participants also felt that being able to employ friends and family would result in better value for care.

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a lot of work. The accounting procedures were felt to be complicated and working out what tax to pay was perceived to be difficult. The majority of participants said that they would like additional support to manage their finances and the reconciliation process. Participants also discussed the difficulty with having to open up a new bank account for direct payments and concerns were raised for older people who did not have access to internet banking. Some participants were also concerned about the risk of financial abuse from those they entrusted to manage their finances.

Participants discussed fears around liability and having to manage employment law and there were a number of questions raised over ‘who is liable?’ ‘what insurance do I have to get?’ and ‘who will carry out the CRB?’ Participants felt that there was not enough information available to answer these questions.

“What if there is an accident? It is such a minefield” (Older woman from Redbridge).

One concern of participants was having to ‘sack’ an unsatisfactory carer or to negotiate employment terms and conditions. One viewpoint was that social services were avoiding their responsibility by putting this onto older people.

“Can it be that the older people are being pressured into opting for this system in order to relieve social services?” (Older man from Kensington and Chelsea).

Despite choice and control being identified as the most important and valued components of having a personal budget, some participants talked about how it remained difficult to find good carers and that having a personal budget had not necessarily improved the quality of care. Some also said they would like a full list of providers and additional support to help identify suitable carers. (Some social services departments are aware of this and are addressing the issue).

3. Having access to continued support whilst managing personal budgets is vital.

Those who received support from Age Concern acting as a support broker, were very appreciative of the support they had received. Age Concerns were able to explain things in language that was accessible for older people.

“When I don’t understand anything, I just call Age Concern and they help me” (Older man from Westminster).

Many of the participants also had family members who supported them with understanding the processes involved in having a personal budget.

“My son helped me, I couldn’t have coped otherwise” (Older woman from Westminster).

Without a support broker, participants reported they had found it very difficult to access the necessary information to manage their personal budget. A number of participants found the self assessment questionnaire difficult to follow and felt that they needed more ‘expert’ support in assessing their needs. Some also felt guilty asking for support and as a result were less likely to express their true needs.

It was felt important that support was available for dealing with difficult issues and that relying on annual reviews with social services for addressing these issues was insufficient. Participants also wanted to know that social services were available to provide back up support if necessary.

4. Personal budgets are not suitable for all older people.

Participants felt that a personal budget would not be appropriate if the older person was really ill or if they later discovered that it was difficult to manage.

“My state of health and wellbeing would determine whether this is a good thing or not. If I feel well, then yes, if I am not well then it will be a problem” (Older woman from Kensington and Chelsea).

“I would want assurance from the council that if it didn’t work, someone would take over as soon as I can’t manage it” (Older woman from Hammersmith and Fulham).
A total of 11 staff from nine London Boroughs were interviewed. Participants included local Chief Executives and Managers of Care Services. The findings have been summarised into three key themes which are discussed below

1. Older people need continued support for care personalisation to work.

There was a general feeling that care personalisation was being used as an opportunity to cut the cost of care by councils. Whilst older people may be able to meet the cost of their needs at a lower cost than a traditional care package, councils were failing to account for the cost of supporting older people with personal budgets. It was also felt that the money being allocated to older people was not enough to pay for their care and in many circumstances older people or the voluntary sector were expected to pay the difference. There was also a concern that older people may underestimate their needs in the self assessment questionnaire which would lead to not enough money being allocated to meet their support needs.

Age Concern staff stressed the need for local councils to invest in services which support older people with personal budgets. Support should be available to:

- Help older people understand the language of care personalisation.
- Offer information and advice on available services including agencies where you can hire personal assistants, and on monitoring these.
- Complete paperwork especially if English is not the client’s first language.
- Help older people think ‘creatively’ about how they can meet their needs.
- Manage a situation where the older person is not happy with the care they are receiving.
- Deal with issues that arise from a change in circumstances.
- Help older people understand and implement employment law.
- Reconcile accounts.

Without support being available, personal budgets were unlikely to benefit all older people. There was a concern that councils had not fully budgeted for ongoing support to be provided to older people who were in receipt of a personal budget and that spot purchasing of care did not account for the full cost of this support. It was felt that those who were supported by family members were more likely to take up a personal budget, so in order to reach those older people who do not have friends or family members to support them, councils need to invest money in support services.

“Often people taking up a personal budget are those who have people to support them, they are the people that are the winners in this system … if you don’t have that support then making the personal budget work in an imaginative clever way is going to be much more challenging” (Age Concern Staff Member).

Staff were concerned that once the older person’s care plan had been agreed, not enough was being invested in ongoing support and that councils saw the annual review as the only time to address issues. However, waiting to address issues at the annual review fails to take into account that an older person’s needs are likely to change throughout the year and as a result they are likely to need support at different stages throughout the year.

Where care personalisation is working well for older people, the council have invested in the voluntary sector to provide ongoing information and advice, and support with care planning and brokerage. Those Age Concerns who were involved in providing these services felt that care/support planning led to an enhanced understanding of the older person’s needs and that older people were happier with their care plan as they had greater control in ensuring their needs were met in a manner that suited them.
Case study 1

Mrs X came to an Age Concern Westminster (ACW) briefing on Personal Budgets, after the session she requested further information hence we made an appointment to explain Personal Budgets further. Mrs X was not happy with her then care package.

In Mrs X’s own words: ‘My care package of 4 hours from [...name of care agency] had caused me great distress over the years. My carers did could not go shopping at my favourite African Market and could not prepare my indigenous meals due to language/cultural differences. My carers did not turn up when they were supposed to; when they eventually turned up, a shoddy job was done. Every time I got off the phone after complaining to [...name of care agency] I had palpitations, this is why I requested a change’.

Mrs X was supported by her care manager to complete the assessment tool for a Personal Budget known as the Supported Self Assessment Questionnaire (SSAQ). Social Services then allocated a certain amount of money based on her assessed needs using the SSAQ form, this is known as the Resource Allocation System (RAS).

ACW then provided assistance with planning Mrs X’s support known as the support planning process. ACW then presented the plan to the Personal Budget panel to explain and justify the reasoning behind the care package. Mrs X’s care plan was approved. ACW then supported Mrs. X with the process of care brokerage which involves organising, sourcing services, costs and implementing the support plan.

Mrs X was involved in all the stages of the care planning process - she was able to employ someone who spoke the same language, did her shopping and prepared her indigenous meals. ACW will continue to provide information, advice and guidance to Mrs X as well as monitor and manage service breakdowns should they happen.

Case study 2

Mrs C initially rang Age Concern Bromley’s Information & Advice Service to ask for advice concerning a heating issue and also the excessive damp and mould in her house following a leak. The Information & Advice Officer felt that there was further help that they could provide, so referred Mrs C to the Support Planning & Brokerage Service. Mrs C has rheumatoid arthritis and uses a wheelchair outside her home. She is 75 years old. Mrs C was receiving care from an agency twice a day to help her with personal care. This had been arranged by Adult & Community Services.

The Support Planner visited Mrs C at home, and they agreed on a Support Plan which included: providing information on a local lunch club for Caribbean older people in the Borough; a referral for an OT assessment as Mrs C needed some help with equipment and adaptations around the home; a referral to the Borough’s Expert by Experience group as Mrs C wished to have a platform to voice her concerns about gaps in services, in particular the lack of cultural clubs and transport in the area; and a meeting to be arranged with Mrs C’s care agency to discuss some concerns about her care plan and timings issues.

Following on from this Mrs C is much happier with the care she is receiving from her agency. However, she has expressed an interest in Direct Payments and is currently considering this as an option. Mrs C has also had some adaptations made to her home following the referral to the OT, including a ramp outside her front door which makes it easier to get out of the house. Lastly Mrs C has enjoyed participating in the Expert by Experience group.
2. Some councils are not in touch with older people’s needs and the voluntary sector should be involved in providing services to older people.

Age Concern staff felt that it was difficult to get the voices of older people heard and that councils did not always take into consideration issues affecting older people when rolling out care personalisation. They thought that Age Concerns had an important role to play in ensuring that the needs of older people were voiced in care personalisation and felt that councils needed to invest in advocacy so that older people’s needs are represented fairly.

“*The older persons advisory group to the council does not reflect the voice of service users as a very small percentage of older people who sit on that group are in receipt of social care support*” (Age Concern Staff Member).

In most cases Age Concern felt that they were well placed to become the support broker as they know about relevant services in the community and hold a strong commitment to person-centred working with older people. However, in some cases it was felt that councils were not working in a way that promoted partnership working with the voluntary sector and that the tenders did not contain enough money for supporting older people with care personalisation.

“There is a lack of information from the council and coupled with closures to services I am now extremely worried, extremely worried for older people locally, my concern is not about personalisation per se it is about the way it is being implemented here” (Age Concern Staff Member).

Age Concern staff were also concerned that the current financial climate may lead to cuts in their services resulting in less choice of services for older people. In addition to this they were concerned that cuts to block contracts for information and advice, and for day centres, would result in such services having to close. It was felt that spot purchasing for information and advice services and day centres was an unrealistic method of funding and if continued it would threaten the existence of these services.

There is a perception that older people are not given a fair share of money when comparing the allocation of funds to how much younger people receive. According to Age Concern Staff personalisation fails to address this and there was a feeling that once figures begin to emerge over how much money is being allocated to meet older people’s needs, there would be challenges.

“The agenda is very much being set by people with physical disabilities and younger people, older peoples voices are often just drowned out or not heard” (Age Concern Staff Member).

“Once people can see how much money is being allocated there will be challenges as people will see that older people receive less money than younger people with physical disabilities and that will be challengeable…I think it needs to be challenged and we need to have that debate as a society because it suggests that older people are worth less than a younger person” (Age Concern Staff Member).

3. Personal budgets must remain a choice for older people and are not suitable for all older people.

“The main concern for older people is how they will be able to manage a personal budget and whether they will get enough support…most people want to do it in theory but it depends on the person’s support needs as well. You have some older people who are really really vulnerable and they won’t be able to manage a personal budget, so they won’t want to hear about it” (Age Concern Staff Member).

Age Concern staff felt that all older people needed to have a choice over whether they had a personal budget or a more traditional care package where social services managed the care of the older person. It was thought that those who were assessed as ‘moderate need’ would be more likely to take up a personal budget. If this were generally applicable it would have serious implications, since the majority of Local Authorities now fund care only for older people assessed as having “critical or substantial” needs. It was thought that the bureaucracy and paperwork would be too difficult for some older people to manage, especially if they were ill or struggling to manage with daily living including managing their finances.

“If they are re-assured that the process would impact on their quality of life and give them greater control and they are supported through the process with an opt out clause then I think people would go for it” (Age Concern Staff Member).
Local Authority Perspective

Staff from a total of nine local authorities were interviewed, by telephone, to ascertain their views on personalisation and the factors affecting the rollout of personal budgets for older people. Local authorities were at different stages of implementation of personal budgets, with some still in the pilot stage.

Main findings

Local authorities are enthusiastic
Local authorities were enthusiastic about the implementation of personalisation, while cautioning that it represented a significant culture shift in social care. Personal budgets were being promoted by all the local authorities, and were being offered to all new clients requiring social care, with the exception of those requiring residential or nursing care placements.

Factors seen as influencing older people’s willingness to engage with personalisation

Low need
- Not happy with current support package
- Good understanding
- High willingness to engage with personalisation

High need
- Poor understanding
- Happy with current support package
- Low willingness to engage with personalisation

Local authority staff felt that clients’ enthusiasm for personal budgets was closely linked with their level of understanding. There was felt to be a degree of suspicion amongst some older clients, who saw personalisation as a ‘passing fad’ or a way of restricting services or care, for financial reasons. Local authorities, external agencies and the voluntary sector, including local Age Concerns, were regarded as crucial in helping people to see personalisation as an opportunity and a positive change.

Clients’ willingness to engage with personalisation was thought to be linked to their satisfaction with their current service and to their level of need. Where a client was happy with their support it appeared less likely they would want a personal budget. It was suggested that those with relatively modest or very high levels of need were least likely to want a personal budget.

The point was made that many clients who had substantial needs wanted ‘things to be sorted out for them’ and ‘didn’t want the hassle’.

The terminology of personalisation was seen as confusing for clients, particularly those new to social care, and local authorities were using different terms to describe what was essentially the same thing. Local authorities had spent considerable resources developing and disseminating information for clients as well as internally. A combination of media was needed to ensure accessible information was provided to clients. However, knowledge of personalisation was perceived to be good where staff were directly involved with personalisation.

Use of personal budgets

Fewer older people taking personal budgets as direct payments
It appeared that a relatively smaller proportion of older people were taking their personal budget as a Direct Payment than with other client groups. Older people appeared less likely to want to deal with employment of staff and other issues such as tax and even paying invoices – it seemed Individual Service Funds or virtual budgets (i.e. the local authority or a third party managing the money) were more
Developing a credible plan to implement personalisation was identified as one of the first challenges for local authorities. Additionally, developing a Resource Allocation System, and supporting IT and administrative systems were major projects which needed to be completed prior to the large scale roll out of personalisation. This process was slower than hoped in some local authorities and additional expertise (e.g. consultants) was sometimes required and highly valued.

There was consensus that personalisation had impacted substantially on workload, particularly during preparation for implementing and initial roll-out. Local authorities were effectively ‘double running’ (i.e. offering two systems of care – ‘traditional’ social care and personalisation - side by side). It was also felt not possible to ‘do away’ with existing services and that a lot of support was needed from local authorities and other organisations, such as local Age Concerns, to support people in being able to exercise real choice and control.

Factors directly affecting older people

- Safeguarding – who is responsible?
- Quality of services – how to maintain standards?
- Employment by service clients - legal implications
- Market development – are services available? Family and friends?
- Role of carers – managing contracts

Internal challenges for local authorities

- Developing a credible plan to implement personalisation
- Impact on workload – additional expertise required
- Putting in the infrastructure – IT and administrative systems
- Sorting out a Resource Allocation System
- Impact of Government cuts?
Safeguarding
Safeguarding of adults and minimisation of risk was judged to be a major issue for local authorities, as was clarification of duty of care. Most local authorities identified the need to ensure quality of services was maintained, particularly related to homecare. Monitoring was therefore a concern. It was also felt that the role of carers (particularly family and friends) in helping clients manage personal budgets had yet to be clearly defined.

Employment
Employment, particularly of family and friends, was a key area of confusion for many clients and a major issue for local authorities (particularly those with a higher number of clients receiving personal budgets). Providing information and support to help clients deal with the practicalities of acting as an employer, was a complex issue. It was felt there was a need to protect service users from unintentionally breaking employment law. It was noted that some clients were receiving direct payments into their bank account and it was not possible to monitor informal arrangements that clients were making.

Available services
Local authorities were seen to have a role to play in market development and in the standardisation of pricing, to ensure clients were able to access a menu of options at a fair price. As more people took up personal budgets, it was felt clients would become more creative with how to use them and local authorities would be in more of a position to help support people to do that.

Responsibility for choice and control
It was emphasised that local authorities had a responsibility to ensure clients were able to exercise real choice and control with personal budgets and that they were supported in managing these (either directly or through an individual service fund or virtual budget) to ensure that clients’ money was spent to achieve identified outcomes.

“I suppose when we first started the big overriding thing was getting people onto personal budgets. We have seen that that’s not the be all and end all of it. Although it’s helpful for people to see how much money is being spent on their support, actually the most important thing is people having choice in the market and quality services, in order to be able to make those choices (Local authority staff).”

Future funding of social care
Finally, it was acknowledged that while the new coalition government were supportive of personalisation, implementation of this major programme of change coincides with a significant reduction in funding and the impact of this on local authorities was still to be felt. There was concern that the drive to find savings would impact on the personalisation pathway.
For Further Information

If you wish to discuss the issues raised in this report or would like more information, please contact Gordon Deuchars, gdeuchars@aclondon.org.uk or 0207 820 6770.