

Personalised budgets in social care

April 2009

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Competing strands



Commissioning

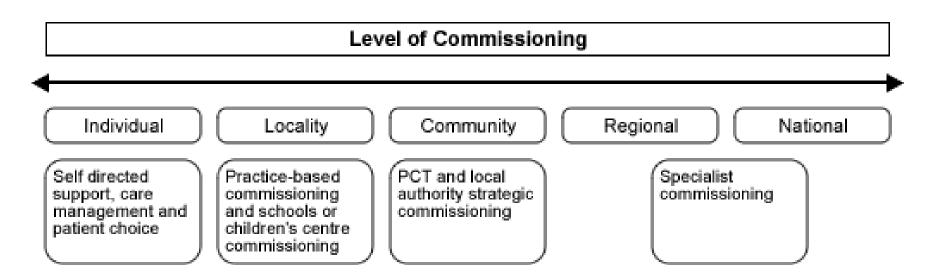
Commissioning is the means to secure the best value for local citizens. It is the process of translating aspirations and need, by specifying and procuring services for the local population, into services for users.

Individual Budgets

A personal health budget helps people to get the services they need to achieve their health outcomes, by letting them take as much control over how money is spent on their care as is appropriate for them.



The continuum of commissioning levels



Benefits of commissioning?



- Understanding long term demand, giving a common perception of the world amongst partners.
- Understanding the best approaches and methods for meeting that demand and hence improving and modernising services to achieve better outcomes.
- Making decisions that are transparent and fair.
- Encouraging innovative service solutions by providers.
- Achieving best value by better configuration of services and increased efficiencies.
- Influencing the market by clarifying the longer term purchasing intentions of the commissioners.

IB Pilot results



- 6 different funding streams
- Individualisation negates volume savings
- Management, co-ordination and monitoring costs increase. Savings illusory.
- Benefit to adults of working age with physical/sensory impairment
- Very stressful for older people and outcomes worse
- Question mark over those with learning disabilities
- Practitioners concern over physical and financial abuse.

Next steps – Pilots 1



- Is there a cultural shift towards personalisation?
- Are there improvements in:
 - quality, health and well-being outcomes and patient experience?
 - care planning?
 - partnerships in care provision and integration of care?
 - understanding of local needs and expectations, and therefore how resources can best be targeted at communities' needs?
- What is the impact on health inequalities?

Next steps – Pilots 2



- What is the impact of personal health budgets on the wider system, including:
 - costs?
 - equity of access and continued availability of services to non-budget holders?
 - staff?
- How and for whom should personal health budgets be implemented, including:
 - are there services and user groups for which this approach is particularly appropriate?
 - are there services where this approach is never appropriate?
 - what criteria should be used when deciding if a personal health budget is the right approach for an individual or a particular service?



Questions?

Where will social care sit in the future?

 Does commissioning create headless chickens?

Is there a better way?

LOCAL SERVICES LOCAL SOLUTIONS



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