

# People Scrutiny Commission

6<sup>th</sup> December 2023



**Report of:** Hugh Evans, Executive Director for Adults and Communities

**Title:** Direct Payments: Update on transformation under the Personalisation Steering Group

**Officer Presenting Report:** Catherine Martin – Transformation and Commissioning Lead – Community Care and Support

## **Recommendation:**

For People Scrutiny Commission to note the report and feedback on the proposals

## **The significant issues in the report are:**

Direct Payments (DPs) remain an Adult Social Care Transformation Priority. Direct Payment numbers in Bristol have decreased over the last three years and currently sit at 22% compared to 26% England Average. A transformation project has been established to understand the root cause, create clear project objectives and measure progress towards objectives and overall all Direct Payments numbers. The project has achieved a number of successes and other proposals are planned for the subsequent 12 months to work towards the strategic aim. Overall progress of the project sits under the governance of the Adult Social Care Transformation Programme.



## 1. Summary

- a. Enabling people who draw upon care and support to have choice and control through a personal budget is a transformation priority in Adult Social Care. Adult Social Care wants to increase the uptake of Direct Payments (DPS) in line with the national average (26%) with an aspiration to exceed this target in future years. A Direct Payment is ‘money given to individuals by social services departments to buy the care and support they have been assessed as needing’<sup>1</sup>. DPs not only offer choice and control but if managed well ‘produces positive outcomes for people across different population groups’<sup>2</sup>. This is because it places the person at the centre of decisions relating to their care and support needs. Historically, Bristol had a higher than average population of DPs users compared to other Local Authorities, supporting a large number of people with complex needs to live in the community. However over the years other Local Authorities have surpassed Bristol’s success. One reason for this is due to Local Authorities thinking about the different ways DPs can be offered to people with lower levels of need. Today Bristol DPs uptake is lower than the national average (22% vs England average of 26% in 21/22<sup>3</sup>) and has been in decline for the last three years.

## 2. Context

- a. To achieve this transformation ambition and embed sustained change, we have created the following objectives in line with Think Local, Act Personal (TLAP) best practice<sup>4</sup>. These objectives were also developed based on analysis of the current way Bristol assesses and supports people to access DPs:
  - i. Simplify and coordinate the Direct Payment process to the benefit of both people who draw upon care and support and practitioners.
  - ii. Improve communication and information about direct payments including addressing cultural and language needs for both people who draw upon care and support and practitioners.
  - iii. Use direct payments to meet a wider range of care and support needs, including specifically introducing them at a lower level of needs (less than 10 hours).
  - iv. Ensure that people who draw upon care and support are provided with the appropriate short and long-term support in order to effectively set up and make best use of their direct payment.
  - v. Ensure that recommendations from the recent Direct Payment audit are considered throughout this work and embedded into any new process / proposals

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<sup>1</sup> [Direct payments: Question 01. What is a direct payment? \(scie.org.uk\)](https://www.scie.org.uk/direct-payments/question-01-what-is-a-direct-payment/)

<sup>2</sup> [Better-Direct-Payments.pdf \(thinklocalactpersonal.org.uk\)](https://www.thinklocalactpersonal.org.uk/better-direct-payments.pdf)

<sup>3</sup> [Measures from the Adult Social Care Outcomes Framework, England, 2021–22 – NHS Digital](https://www.nhs.uk/press-releases/2022/03/16/Measures-from-the-Adult-Social-Care-Outcomes-Framework-England-2021-22-)

<sup>4</sup> [Better-Direct-Payments.pdf \(thinklocalactpersonal.org.uk\)](https://www.thinklocalactpersonal.org.uk/better-direct-payments.pdf)

- vi. Create opportunities for other personalisation options such as individual service funds<sup>5</sup>.
- b. Progress against objectives is reported back to the Adult Social Care transformation programme via the Personalisation Steering Group. The Personalisation Steering Group is a multi-disciplinary group representing different service areas with a stake in increasing the uptake of Direct Payments. It is important to note that the project is operating with no additional transformation investment. Progress against the project is focused on increasing activity (i.e. number of service users) meaning improvements against the uptake target will occur at a slower pace.
- c. The Personalisation Steering Group has achieved the following successes:
- i. **Development of a Direct Payment Support Hub** - Group have managed to secure additional resource for DP specialism to support more social workers seeing DP as a genuine first alternative before domiciliary care and other more traditional forms of care. DP hub practitioners will provide much needed extra practice expertise and enable DP's to be promoted and set up in a more effective and timely way.
  - ii. **Increasing practitioner confidence, knowledge and skills** – Group championed the development of mandatory e-learning for all social work staff including a Direct Payment Café where social care staff have an opportunity to get support and advice on how to support people who draw upon care and support to make use of a Direct Payment.
  - iii. **Increasing the Direct Payment Personal Assistance (PA) rate** - Group championed strategic application of 23/24 uplift to promote the sustainability and growth of the DP market. DP PA rate increased in 2023 from £12.50 to £15 an hour to better support real living wage for self employed carers, stimulate the growth of the PA market thus giving DP recipients more choice, control and options.
  - iv. **Personalisation Lot on the Adult Social Care Single Framework** - Group supported commissioning to create a separate lot on the new ASC single framework dedicated to personalisation. The purpose of this lot is to drive more choice and support an underdevelopment market. The personalisation lot also future proofs BCC to be able to commission further services that may develop to support personalisation – such as new innovations in technology.
  - v. **DP provider reviews pilot** - Group sponsored a test and learn pilot with DP support provider WECIL to explore trusted assessor reviews. This enables DP recipients to have a more timely review, provides a solution where we lack our own resources to do so and is positive action to address our low DP review rate
  - vi. **Improving accessibility by working with communities** – Group supported the development of a DP video for people who draw upon care and support. The aim of the video is to explain what a Direct Payment is, how someone can use it to have more choice and control and your roles and responsibilities. Information and resources are also available in a number of different languages to support the diverse communities of Bristol.
  - vii. **Development of services to support personalisation:** Group championed the development and use of Introductory agencies to support the matching of people needing care support and self-employed people wanting to provide care and

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<sup>5</sup> [Individual Service Funds guide Aug2020 \(skillsforcare.org.uk\)](https://www.skillsforcare.org.uk)

support.

- d. The Personalisation Steering Group aims to achieve the following over the next 12 months and beyond to increase uptake in Direct Payments:
- i. **Tender the Direct Payment Support Contract** – Recommission the Direct Payment Support contract to create an approved supplier list. This will create more choice and diversity for people and to clarify roles and responsibilities between providers, service users and Local Authority
  - ii. **Tender Introductory Agency Contract** – Create an approved suppliers list of Introductory Agencies to enable people to match their care and support needs with a self-employed care and support worker. The approved supplier list will enable us to work with more Introductory Agencies both on a local and national level.
  - iii. **Commission Individual Service Funds Pilot** – Commission a pilot to test and learn how individual service funds can be used to support more people to have greater choice and control of their personal budget. The pilot will focus on disabled people with a learning disability and aligning with the learning disabilities and autism priorities within the commissioning team.
  - iv. **Evaluate the DP provider reviews pilot and embed learning** – Conduct a cost/benefit analysis of the DP provider reviews pilot to ascertain whether there is a business case to embed the approach in practice and whether embedding reviews in our service specifications will improve our DP reviews targets.
  - v. **Collaborate with people with lived expertise on the DP Policy** – Review and refresh the DP policy using co-production principles with people with lived expertise.
  - vi. **Evaluate the impact of the DP Support Hub** – Evaluation on specific metrics including a) increasing practitioners confidence b) DP specific training c) supporting a specific number of DPs to be successful. The findings from the evaluation of the hub will support a business case to extend the funding of the DP support hub posts.
  - vii. **Further embed and improve social work staff knowledge and skills** – Explore opportunities through the education pipeline for newly qualified social work and occupational therapy staff, ensuring that Direct Payment training is front and centre of their training from the beginning.
- e. The project has experienced many opportunities and challenges since inception including:
- i. Opportunities
    1. Range of innovative best practice on personalisation for this project to draw upon.
    2. Corporate buy in to drive improvements in increasing Direct Payments uptake as a project sitting within the Adult Social Care Transformation Programme.
    3. Skilled members of staff with the passion, knowledge and experience to make a difference.
    4. Co-produce the solution with people who draw upon care and support. People who draw upon care and support are experts by their own experience. There are opportunities during the project to embed co-production principles within the different proposals, making use of wider work taking place around co-production within Adult Social Care.
  - ii. Challenges
    1. Internal systems and processes – Often our own systems and processes can hinder success. The project will continue to explore ways to make the

- experience easier for practitioners and people who draw upon care and support
2. Transitions between adults and children’s direct payments – Legislation between Children’s social care and Adult social care differs. This will impact peoples experience as they transition between a Direct Payment provided under children’s social services and adults. Broader work is taking place around transitions in the respective adult and children transformation programme.
  3. Social Care workforce – Availability of personal assistance and services that will support people via a Direct Payment play an integral part in enable people to have choice. The social care workforce, including the recruitment and retention of staff remains a challenge.
- f. Progress against the project objectives will continue to be monitored through the Adult Social Care Transformation Board. It should be noted that despite the variety of achievements and activity planned over the next 12 months, transformation will be challenging, especially without transformation investment. Transformational investment will help accelerate the uptake of Direct Payments and personalisation.

### 3. Policy

The following policies relate to this proposal:

- Adult Social Care Commissioning Strategy<sup>6</sup> - this strategy sets out our Adult Social Care commissioning strategy, including our vision, operating principles and key areas of focus. Operating principles 1 - Targeted , 3 – Co-Produced and 5 - Innovative make explicit commitments to personalisation
- Direct Payments – Policy and Procedure<sup>7</sup> - this policy sets out the responsibilities of Bristol City Council and responsibilities of people who draw upon care and support and unpaid carers to ensure appropriate management of the Direct Payment scheme to maintain adequate levels of care and support which meets eligible needs and outcomes
- Corporate Strategy – Transforming Care under the Health, Care and Wellbeing theme - Support people to be as resilient and independent as possible, developing their assets to live fulfilling lives. When more support is needed, this will be person-centred, offering people choice and control.<sup>8</sup>

### 4. Consultation

#### a)Internal

- a.1. Care Management operational teams

#### b)External

- b.1. Not Applicable

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<sup>6</sup> [Key information for social care providers \(bristol.gov.uk\)](https://www.bristol.gov.uk/key-information-for-social-care-providers)

<sup>7</sup> [Direct payments: Living your life with choice and control \(bristol.gov.uk\)](https://www.bristol.gov.uk/direct-payments-living-your-life-with-choice-and-control)

<sup>8</sup> [Corporate Strategy 2022–27 \(bristol.gov.uk\)](https://www.bristol.gov.uk/corporate-strategy-2022-27)

## 5. Public Sector Equality Duties

- 5a) All proposals within this report take due regard of the Equality Act (2010) and the associated Public Sector Equalities Duties (PSED) . All commissioned contracts make specific reference to the PSED and Equalities questions are asked during the procurement of services which is assessed by the equalities and inclusion team within the council. Adult social care will not contract with providers who are unable to sufficiently demonstrate their knowledge and competency around the Equalities Act (2010). An Equality Impact Assessment (EQIA) has been completed in relation to the recommissioning of the Direct Payment Support Contracts. The key findings from the EQIA are as follows:
- Direct Payments are accessed by a significant number of people from Black and Minoritised communities.
  - 73.4 % of Direct Payment users are of working age (18-64 years)
  - Significant numbers of Direct Payment users live in the more deprived wards of the City.
  - There are gaps in data relating to the protected characteristics of DP users
  - Primary support reason for DP users requiring support are Learning Disability Support (20%), Social Care (16%) and Physical Support (51%)
  - Future proposals will have a positive impact on all citizens as the future contract seeks to address known gaps and issues through the development of future service specification, procurement process and ongoing contract monitoring.
  - Further specific work is needed to understand why black and minoritised communities are overrepresented in the Direct Payments population and what we will need to do in response to this through our commissioning activity.

### Appendices:

**Appendix A:** Equalities Impact Assessment – Direct Payment Support Contract Recommissioning

### Online References:

[Better-Direct-Payments.pdf \(thinklocalactpersonal.org.uk\)Corporate Strategy 2022-27 \(bristol.gov.uk\)](#)

[Direct payments: Question 01. What is a direct payment? \(scie.org.uk\)](#)

[Direct payments: Living your life with choice and control \(bristol.gov.uk\)](#)

[Individual Service Funds guide Aug2020 \(skillsforcare.org.uk\)](#)

[Key information for social care providers \(bristol.gov.uk\)](#)

[Measures from the Adult Social Care Outcomes Framework, England, 2021-22 – NHS Digital](#)  
[People at the Heart of Care: adult social care reform – GOV.UK \(www.gov.uk\)](#)

## LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

### Background Papers:

Equalities Impact Assessment – Direct Payment Support Contract Recommissioning

