



ADULT SOCIAL CARE AND PUBLIC HEALTH COMMITTEE

3 MARCH 2022

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| REPORT TITLE: | DIRECT PAYMENTS REVIEW |
| REPORT OF: | DIRECTOR OF CARE AND HEALTH |

REPORT SUMMARY

This report updates Members on the review of the Direct Payments offer to Wirral residents who are eligible to receive care and support under the Care Act 2014. The report sets out the scope of the project and its key milestones. The aspirations of the project reflect the key priorities of the Wirral Plan and will enable people to live “Active and Healthy Lives” with the right care, at the right time and in the right place.

This affects all wards and is not a key decision.

RECOMMENDATION/S

The Adult Social Care and Public Health Committee is recommended to note the content of this report and the aims of the Direct Payments review to increase the number of packages of care and support provided by way of a Direct Payment.

SUPPORTING INFORMATION

1.0 REASON/S FOR RECOMMENDATION/S

- 1.1 As a Council we are committed to people exercising control over their lives and having the autonomy to make decisions about how they receive their care and support.
- 1.2 Members of the Adults Social care and Public Health Committee have noted the relatively static numbers of people receiving their care and support by way of a Direct Payment and have requested officers to update the Committee on plans to increase the numbers of Direct Payment packages of support.

2.0 OTHER OPTIONS CONSIDERED

- 2.1 It was considered not to review the Direct Payment offer; however, this would not achieve the aim of increasing the take up of the offer of a Direct Payment to meet identified needs.

3.0 BACKGROUND INFORMATION

- 3.1 It is a statutory duty to offer a person a Direct Payment as a cash alternative to a directly commissioned care and support service in most cases.
- 3.2 A Direct Payment can be paid to a person to enable them to employ a personal assistant or to purchase care and support services from a care provider of their choice to provide the care that they have been identified as needing through a Care Act (2014) assessment.
- 3.3 Direct Payments can also be made to carers who have an identified need as a carer.
- 3.4 A person can use their Direct Payment flexibly to meet their assessed needs, in a way that suits them, and in a way that provides them with choice and control over their care arrangements.
- 3.5 People in receipt of a Direct Payment could choose to have their Direct Payment made directly to a care provider or a third party to manage on their behalf.
- 3.6 People may also choose to pool their Direct Payment with other people in receipt of a Direct Payment where they share support with a number of other people and all wish to receive care flexibly from the same care provider.
- 3.7 Direct Payments are a cost-effective way for the Council to meet people's assessed needs and can contribute to a broader range of care options for the community.
- 3.8 Direct Payments are used to pay for goods and services that are identified in a Support Plan that has been agreed between the person and the Council as meeting the person's assessed needs.

- 3.9 The preferred method of payment for Direct Payments is by way of a Pre-Paid Card which provides ease of administration and ease of use by the recipient. Pre-Paid Cards also facilitate an efficient way for the recipient to keep records of expenditure and for the Council to undertake audits of Direct Payments account.
- 3.10 Currently the number of adults in receipt of a Direct Payment is 536. It is the aspiration of the project group to increase this number significantly. Direct payments are not made where the primary need of the service user is a health need or where a person is subject to a drug or alcohol rehabilitation requirement as specified in a community order or suspended sentence order. This low uptake may be for several reasons, which the Direct Payment review will seek to identify.
- 3.11 The breakdown of the current route of payment for Direct Payments for adults is set out below:
- 3.11.1 Individual Service Funds (an arrangement where a local authority transfers the funds agreed for a person's care and support arrangements to an organisation of their choice, so that the person can be in control of how their support is designed and delivered. This can be where a person wishes to pool their Direct Payments with other Direct Payment recipients to share a service provision) - 119
- 3.11.2 Managed Accounts (the Council pays the payroll provider, WIRED, directly so that they can provide the payroll service and pay other associated costs (tax, insurance etc) on behalf of the direct payment recipient, thereby relieving them of the administrative burden of managing the money) - 139
- 3.11.3 Individuals managing their own payment (individuals manage their own payment by opening a separate bank account or using a pre-paid card. The individual retains responsibility for the funds but may need a payroll service. They pay all other associated costs such as tax, insurance which are included in their Direct Payment) - 278.
- 3.12 The intention of the review is to incrementally increase take up over the next 2 years for adults of all ages.
- 3.13 Currently 148 children and young people also manage their support via a Direct Payment.
- 3.14 To increase the number of people accessing a Direct Payment a working group has been established. An analysis of the referral pathway is required as the current process is perceived as lengthy and complex by practitioners and in some cases by people assessed as needing support. A review of training requirements for practitioners will be part of the review process.
- 3.15 Membership of the working group includes representatives from Cheshire and Wirral NHS Partnership Foundation Trust (CWP) and Wirral Community Health and Care NHS Foundation Trust (WCHC), the Council's professional standards lead, the Direct Payment team, Personal Finance Unit and people with lived experience. Together All Are Able have produced a short survey for people with a disability who have received a Direct Payment, the results will inform the review.

- 3.16 The working group will be expanded to include Wellbeing Mentors, (Social Prescribers) from the Primary Care Networks and representatives from the Voluntary, Community and Faith Sector.
- 3.17 A simple step by step guide to Direct Payments (draft) has already been produced and is attached as appendix 1. Frequently Asked Questions (FAQs) have been developed and will continue to evolve (see appendix 2). The questions asked, and their responses will inform the review.
- 3.18 An improved uptake of Direct Payments will contribute towards the Directorate's achievement of its efficiency requirement, as Direct Payments are a cost-effective way to meet needs.
- 3.19 The review will consider the various rates of Direct Payments across Children's and Adult Social Care services, with the intention of simplifying the Direct Payment offer to children and young people.
- 3.20 The review will consider learning from other areas in relation to managing and growing the number of Personal Assistants available to support people through Direct Payments, and how best a database of Personal Assistants can be developed and maintained.
- 3.21 The Direct Payments working group was established in October 2021 and the project scope and membership were agreed.

The key milestones are set out in the table below: -

| Key Milestones | By |
|---|------------|
| Identify the level of increase in Direct Payments expected over the course of the next 2 years. The current activity measure has been converted to a key performance indicator and will measure the level of direct payment take up against the target set. | March 2022 |
| Increase representation of people with lived experience on the group and as champions of Direct Payments | April 2022 |
| Analyse and implement the findings of the Together We are Able survey, including the redesign the Council website as it relates to Direct Payments and all other associated documentation. | March 2022 |
| Establish membership of the multi-agency group tasked with the roll out of the 3 Conversations approach within the hospital-based Integrated Discharge team. | Feb 2022 |
| Increase representation from the third sector, faith sector and the Primary Care Networks on the project group. | March 2022 |
| Increase the number of Direct Payment recipients at the point of hospital discharge. | Ongoing |
| Analyse the referral pathway and implement recommendations | April 2022 |
| Develop the training offer and the knowledge bank. | April 2022 |
| Develop a local offer that finds and supports PAs and supports the DP recipient in their role as an employer. | May 2022 |
| Address current payment anomalies to ensure the sufficiency | April 2022 |

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| requirement of the Care Act is met. | |
| Analyse the impact and efficacy of increasing Direct payment numbers. | June 2022 |
| Scope out what is needed to increase take up of Direct payments for children and young people. | July 2022 |

4.0 FINANCIAL IMPLICATIONS

There are no immediate financial implications, but it is anticipated that on project completion efficiencies may be realised.

5.0 LEGAL IMPLICATIONS

Duty under the care act to offer direct payments, the take up is not as high as we would expect given population size.

6.0 RESOURCE IMPLICATIONS: STAFFING, ICT AND ASSETS

There are no resource implications identified.

7.0 RELEVANT RISKS

There are no risks due to the content or recommendations within this report.

8.0 ENGAGEMENT/CONSULTATION

People with lived experience are members of the project group

9.0 EQUALITY IMPLICATIONS

Increasing the number of people who receive a Direct Payment to meet their care and support needs will offer more choice and control to people and their family carers. Equality Impact Assessments may need to be completed during development of the key milestones from section 3.21 and these will be done where appropriate and at the earliest possible stage.

10.0 ENVIRONMENT AND CLIMATE IMPLICATIONS

There are no climate and environment implications.

11.0 COMMUNITY WEALTH IMPLICATIONS

- 11.1 A proposal is under development with commissioners and Healthy Wirral to engage with people in one of the wards experiencing the highest inequalities encouraging people experiencing worklessness to consider a career in the care sector. It is hoped that this will lead to the increased availability of PAs and staff interested in working in the care sector
- 11.2 Employment opportunities for people experiencing worklessness following the closure of some services covid legacy.

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APPENDICES

Appendix 1 - Draft Step by Step guide to Direct Payments
Appendix 2 - FAQs

BACKGROUND PAPERS

Together We Are Able survey on Direct Payments

SUBJECT HISTORY (last 3 years)

| Council Meeting | Date |
|------------------------|-------------|
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