

Personalisation: Commissioning and delivering transformed support and care

Workshop 1

Residential care, extra care housing and personalisation

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Residential care and extra
care:

Points arising from personalisation

Workshop at SCIE conference

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the personalisation agenda

- Fit with broader choice and reform of public services government agenda –Widespread support across government for increasing user control and empowerment
 - IBs enable individuals to:
 - design their own support
 - decide the nature of services
 - use their budget to suit their needs
 - know what is available
 - Were not available to care home residents

And beyond...

‘As I talk with seniors, what I hear most is that they want to stay in their homes as long as they can. However, too many seniors struggle to afford quality home- and community-based care and, as a result, are forced into institutional care they don’t want, adding to the strain on our Medicaid budget’ (Hillary Rodham Clinton, 2006)

Examples 1

- Resident buys computer to do online shopping
- Instead of using restaurant in housing scheme, pays sister to cook meal
- Pays housing with care provider to provide home care

Examples 2

- Buys batteries and wheels for scooter (storage?)
- Employs male support worker to go for walks and to do DIY together (no CRB) altering bits of the flat

Examples 3

- Buys freezer to save family carer's time from fellow tenant who has mild dementia
- Pays for mobile hair dressing, not unit one
- Uses less home care as saving up for emergencies and holidays, flat getting a bit 'grubby'

Interviews with early Individual Budget recipients

- Positive views about the potential for IBs
 - Improve long-term quality of life by offering choice and control
 - ‘Freedom’ and ‘independence’ associated with IBs
 - More flexible than other forms of support
 - IBs seen as easier to manage than Direct Payments

For housing with care providers and residential care providers

- Practical issues of liability and risk management, data protection (see Housing 21)
- Boundary issues around brokerage, provision and best interests, and NHS funding
- Relationships and their management eg paid family, employed and self employed workers, dual jobs, live in care workers...
- Contingency planning (CRC rural research)
- Transitional arrangements
- Commissioning and decommissioning
- Any more?

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