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Debates in Personalisation  
– the advocates and the  
critics

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Prof. Jon Glasby  
School of Social Policy

# Outline

- Background: the advent of direct payments
- Advantages/barriers
- The advent of personal budgets
- Implications, opportunities and tensions

# 1. Background: the advent of direct payments

*“The potential for the most fundamental reorganisation of welfare for half a century”*

- Cash payments to service users aged 18-65 in lieu of direct service provision
- Extended to include older people, younger people aged 16 and 17, carers and the parents of disabled children
- Now mandatory rather than discretionary

# 1. Background: direct payments

- Illegal under 1948 legislation
- Indirect payments (pioneered by disabled people)
- The Independent Living Fund
- 1990 NHS and Community Care Act
- Lobbying and research by disabled people
- Disabled people involved in implementing direct payments

1. Direct Payments are very simple  
– it's not hard

**Direct Payments = a means to an end  
(of independent living)**

**Choice and control are central**

## 2. Advantages of direct payments

- More responsive services and increased choice and control
- Improved morale and mental/psychological wellbeing
- A more creative use of resources which may sometimes reduce costs, but which certainly ensures better value for money
- A blurring of the boundary between health and social care

## 2. Barriers with direct payments

- Perceived focus on physical impairment
- 'Willing and able'
- Complexity of monitoring arrangements
- Staff attitudes and knowledge
- Political concerns in some authorities:  
    'privatisation by the backdoor'?
- Boundaries with NHS and housing

### 3. Personal budgets

- ❑ Small-scale, bottom-up pilots attempting to deliver better outcomes within current legal/financial framework
- ❑ Key innovation is being clear about the money upfront
- ❑ Decisions that matter made as close as possible to the person they affect (ideally by the person themselves)
- ❑ Strong emphasis on citizenship, social justice and inclusion
- ❑ Very positive initial results and rolled out rapidly by government



### 3. Seven steps to Self-directed Support

- Set PB (using in Control's RAS)
- Plan support – with support as needed
- Agree plan
- Manage PB (currently 6 distinct degrees of control)
- Organise support – complete flexibility
- Live life - people use their PBs to achieve outcomes important to them
- Review and learn

## 4. Implications for social care

*“In the future, all individuals eligible for publicly-funded adult social care will have a personal budget (other than in circumstances where people require emergency access to provision): a clear, upfront allocation of funding to enable them to make informed choices about how best to meet their needs.”*

(Transforming social care 2008 circular)

## 4. Key issues (very brief!)

- Scope to be genuinely needs-led?
- Issue of motives: citizenship v rolling back the boundaries of the welfare state?
- Issue of implementation: risk of ‘zombie personalisation’?
- Is transparency a good or a bad thing?
- How do we balance risk and independence?
- Will the old system recreating itself?
- Spreading to other sectors – a more general way of organising welfare services beyond social care?

# Further information

- Glasby and Littlechild (2015) *Direct payments and personal budgets* (3<sup>rd</sup> ed). The Policy Press (forthcoming)
- Needham, C. and Glasby, J. (eds) (2014) *Debates in personalisation*. The Policy Press

A series of policy papers are also available (free) via:  
<http://www.birmingham.ac.uk/schools/social-policy/departments/health-services-management-centre/work/personalisation.aspx>