



Seminar Briefing – January 2009

The Implications of Personalisation for the Voluntary and Community Sector in Kensington and Chelsea

On 17 December 2008, Kensington and Chelsea Social Council (KCSC) held a seminar on the personalisation agenda and the impact it will have on the local sector here in the borough.

Invited to speak at the seminar were:

- ▶ **Paul Rackham**; Service Manager for Strategic Commissioning and Market Development; from the Royal Borough of Kensington and Chelsea (RBKC)
- ▶ **Jamie Renton**; Director and **Jas Johal**; Independent Support Broker from Action Disability Kensington and Chelsea (ADKC)
- ▶ **Mick Jones**; Service Manager from Vitalise

All speakers were invited to sit on the question panel in addition to Stephen Forbes; Consultant/Interim Service Manager (RBKC).

INTRODUCTION

From 2006 to 2008, Kensington and Chelsea took part in a programme to pilot the use of individual budgets (IBs) for older people, people with physical disabilities and people with learning disabilities. The pilot ended in March 2008 and since that time, the Council has been working to implement individual budgets within the borough. To date four local organisations working with various sections of the community have been commissioned to provide brokerage support for people seeking individual budgets. Another will be coming on stream in the next few months.

The aim of the seminar was to give local voluntary and community organisations the opportunity to extensively explore the potential impact personalisation will have on the voluntary and community sector and to debate ways in which the sector can best support its implementation.

The first speaker for the evening was **Paul Rackham** who spoke about personalisation being deeply rooted in the community development perspective, he emphasised it's person centred approach. The basis for working with the third sector is built on the government's aim to achieve a thriving third sector which is able to adapt to new ways of delivering services and which has the entrepreneurial spirit to do so.

Paul went on to say that RBKC has to find the correct ratio between providing core funding and buying services for and from the voluntary and community sector and they are continuing to work with NHS Kensington and Chelsea on this issue to ensure that VCOs are not destabilised through the process.

Jamie Renton spoke about Personalisation being characterised by 3 key areas: choice, control and independence. Jamie highlighted that:

1. Choice should be informed
2. Control should be supported, and
3. Independence should be voluntary

He then went on to state that there is a culture of cautiousness in the borough regarding the implementation of IBs but there is a growing relationship between the local voluntary and community sector (VCS) and RBKC around personalisation and working with the sector.

Jas Johal spoke of his own experience as an Independent Support Broker and stated that there was a growing interest in the personalisation agenda amongst the VCS compared to when he first came to post. Jas is also involved in RBKC's Independent Network Group currently looking to expand from physical to mental disability.

The network aims to become central informers for the statutory sector. Members look not only at local issues, but also at how they can use their knowledge to inform and influence the statutory sector on wider issues. Jas ended by saying that Personalisation is not about isolation but about community.

In response to the personalisation agenda and the role of VCOs, ADKC has created the voluntary sector working party.

Mick Jones from Vitalise focused on some of the strategic challenges that third sector providers will have to address if they are to deliver individual budget funded services. One such challenge is giving people accurate and appropriate information on the type of services available and in a way that they understand. This means being able to provide a service which give service users equal opportunities regardless of their ethnicity, language, culture, faith, gender etc.

In closing Mick stated that one particular challenge which could affect the VCS is the employment terms and conditions of staff due to services needing to be available at convenient times for service users. This could affect costs and fees. In preparing, Mick suggested that VCOs must develop a robust and comprehensive planning framework if they are to become service providers.

QUESTIONS TO THE PANEL

Promotion of individual budgets

Questions were asked on how information will reach the people who need it as currently there is concern that people are genuinely unaware of what exists at the moment. In particular how the personalisation agenda is being promoted amongst mental health users as well as the black, Asian, minority ethnic and refugee (BAMER) community and what is the current uptake for IBs from mental health users?

Paul Rackham agreed that there was still an enormous amount of personalisation promotion to do in the borough. To date Paul has given a presentation on IBs to a mental health user group in the borough and is doing some awareness raising amongst BAMER groups including a number of forums in 2009 hosted by Migrant Refugee Communities Forum (MRCF).

MRCF have also been funded to do some capacity building and to raise awareness amongst BAMER groups. RBKC is keen to work with the BAMER VCOs to help promote personalisation.

Councillor Mason also added that no-one yet knows how personalisation will work for those with mental health needs as the debate has not yet moved into that arena.

In response both Paul and Stephen Forbes stated that they do not yet know the rate of take up of IBs by mental health users in other boroughs but RBKC will need to start thinking about these types of challenges? There is some basis for this as the Direct Payments scheme in RBKC has included mental health service users for several years.

The role of the voluntary and community sector

Questions to the panel were mainly focused on the range of options open to the VCS to deliver IBs.

Paul responded that the role of ADKC was an example of an appropriate voluntary organisation providing support to a specific section of the community which is important for implementing IBs. The role of Jas as an independent broker providing advice and support to help people find their way around the system was yet another example of the role the sector could play.

RBKC see the VCS playing an important role in the delivery of these types of services and need small scale enterprises to take on the role of local brokers and other areas of the personalisation agenda.

RBKC's planning and implementation of individual budgets

Questions included whether anyone in residential/nursing homes were involved in the Kensington and Chelsea pilot of IBs? Whether assessing the need of the individual will be the role of the council? And what will be the implications for the BAMER community at a local level?

Both Paul and Stephen confirmed that residential/nursing homes were not included in the IB pilot for Kensington and Chelsea and that the pilot worked only with disabled people and older people living in the community. RBKC has taken an evolutionary approach towards implementing IBs as this is the best approach to test what works, why and how.

It was also discussed that organisations may be able to take on the role as a trusted assessor and can carry on the work delegated from the statutory sector. In carrying out assessments, people applying for IBs must demonstrate to the assessor that they meet the statutory eligibility threshold.

RBKC hope that voluntary and community sector organisations will provide relevant services to equalities groups like ADKC. The council hope that one day there will be a network of equalities organisations delivering services for individual budgets.

Further questions queried the role of social workers and the work that is being done to ensure the profession adapts to the new approach to adult social care.

Paul responded that social workers will also be taking people through supported self assessment and that a new workforce strategy is currently being developed on this matter. However it will not be the sole responsibility of social workers to guide people through the personalisation agenda.

CONCLUSION

In bringing the seminar to a close the point was made that the voluntary and community sector must not act like social workers in acting on behalf of people, but instead they should ensure that individuals are empowered to take control.

It was important that IBs are vigorously promoted, to ensure that the local community are aware of the full and wide range of services available.

Throughout implementation of the personalisation agenda appropriate support and understanding is needed, not only on equalities issues but also on issues such as HIV. There are providers of services who are already well respected in certain fields amongst their beneficiaries and it is this respect that will make the implementation of IBs a much smoother operation.