



Personal Health Budgets:

Completing your care and support plan

**Use this booklet as a guide to complete
your care and support Plan**

Leaflet 6 of 6

Contents

- 1. Personal details..... 4
 - Introduction and getting started 4
 - How you communicate and make decisions 4
 - Mental Capacity 5
- 2. All about me 5
 - What you want people to know about you?..... 5
 - What’s important to you? 5
 - What’s important for me? 6
 - What’s working well in my life? What do I want to keep the same? 6
 - What’s not working well in my life? What do you want to change? 6
- 3. The support you need 7
 - a) What are your needs?..... 7
 - b) What are your outcomes - what do I want to achieve? 7
 - c) How will you meet your outcomes?..... 8
 - d) When do you need support? 8
 - e) Staying safe and ensuring people supporting you are safe 9
 - f) Contingency planning 9
 - g) Short breaks..... 10
 - h) Equipment and Assistive Technology 10
 - i) Annual mandatory training/delegated healthcare task training..... 10
 - j) Personal Protective Equipment (PPE) 11
- Designing and organising your support 11
 - What you cannot spend your personal health budget on 11
 - Where to find information 11
 - Employing your own personal assistants 12
 - Direct payment support provider service – help with employment and payroll.. 12

Buying services from providers	12
3. Your personal health budget	12
How will you manage the personal health budget?	12
Financial breakdown of all the costs	12
What if the plan is under or over my budget?	13
Action planning.....	13
Completing and agreeing your care and support plan.....	14
4. Approving the care and support plan.....	14
5. Review of your care and support plan and personal health budget.....	14
Do I have to pay towards my support?	15
Contact Information.....	15

1. Personal details

Introduction and getting started

Personalised care is about giving you choice and control over the way your care is planned and delivered. It is based on 'what matters to you' and your individual strengths and needs. Everyone who has a personal health budget needs a care and support plan, it is a central step in the process of personal health budgets.

Personalised care and support planning is a conversation in which you, or people who know you well, actively participate to decide what's important to you and for you, in relation to your health and well-being needs and within the context of your whole life and family situation. It's important that you are actively involved in writing your care and support plan to ensure it is about you, that it's right for you and reflects the support you need. You will be offered as much, or as little support to complete your care and support plan from your NHS Continuing Healthcare team. If you want to take charge of it yourself this is a step by step guide to the key steps in completing your own care and support plan, following the template of the plan.

Think about who you would like to be involved in your care and support planning. This may be a family member or friend.

The guidance notes take you through each section of the care and support plan.

All the sections can be completed by you, or your Continuing Healthcare worker for you.

In the personal details section record everyone who is involved in your care and support, if someone has Power of Attorney to manage your financial affairs.

How you communicate and make decisions

If you have communication needs, tell us about them here. Tell us how you want to communicate, and how you need people to communicate with you. How do you usually communicate, e.g. verbally, using gestures, pointing, using technology or a mixture of different methods?

You can communicate in different ways; with pictures and /or graphics, photos, or via a audio recording. Use whatever works for you. Please add photos to your plan.

Think about and tell us who you would like to be involved your care and support planning. This may be a family member or friend. If you do not have a family member or friend to help you, we may be able to arrange an advocate who will be able to support you with your care and support planning.

Mental Capacity

The section will be completed by the healthcare worker/nurse coordinator/clinical lead/case manager if a person lacks capacity.

Under the Mental Capacity Act, a person has the right to make their own decisions until they have been assessed as lacking capacity specific to the decision to be made at the time.

For information on the [Mental Capacity Act - NHS \(www.nhs.uk\)](http://www.nhs.uk)

2. All about me

What you want people to know about you?

Give a brief description of your key personal information (medical information, health conditions, allergies, communication needs) that people offering you care and support need to know.

What specific information do people need to know and/or do to support you in the best way possible?

Questions you may want to consider:

- What would make a good day for you and what would make a bad day?
- Do you use any aids or equipment?
- What do you do to stay as healthy as possible?
- What enables you to stay as healthy as possible?
- In the past, what has brought you comfort when you have been distressed?
- If you need information, how would you like it presented it to you?
- How can you be supported to understand the information given to you?
- How you would like your care provided, e.g. routines in a specific way and how you are approached for care to be delivered?
- What are the best and worst times to ask you to decide?
- What makes you stressed, unhappy, or upset and what can people do to help with this?

What's important to you?

This section is a summary of what really matters to you, what is important to you and what others must pay attention to such as:

- Hobbies, passions, and interests, who is important to you
- What makes a 'good day' for you

- Physical and Mental wellbeing

Questions to think about to help you complete it are:

- Tell people what things you must have in your life or in your daily routines.
- What's important to you now and for the future?
- What do you like doing?
- Who are the most important people in your life? How often do you see them and what do you like to do together?
- What are your hobbies, passions, and interests?
- What do you usually do each week that you would miss if you didn't do?
- What do you always do when you first get up in the morning?
- What do you always do before you go to bed?
- In a typical week what would you do with your time?
- What is the best and worst day of the week for you? What happens then and who are you with?
- What makes you feel better when you are unhappy or upset?
- What is your favourite TV programme or film?
- If you had a whole day to do whatever you wanted, where would you like to go? Who would you spend it with? What would you do?

What's important for me?

- Tell people what things you must have in your life or in your daily routines.
- What is important about your health, including your medication, treatments, or equipment?
- What's important to you now and in the future?
- Tell people how you like to be supported, the kind of person you want to be supported by.
- About your routines or ways, you like to have things done.

What's working well in my life? What do I want to keep the same?

Tell people what you are happy with and the things you want to continue and stay the same. This could be the support you already have, the places you go or the people you see. This could also be about your routine, medication, treatments, or equipment.

What's not working well in my life? What do you want to change?

3. The support you need

a) What are your needs?

This will be completed by the healthcare worker/nurse coordinator/clinical lead/case manager

It is a summary of **all** your NHS continuing healthcare needs, which are on your assessment and **all** your on-going care needs: health, wellbeing and social.

If you have health and social care needs that are not captured in your assessment, then you can add them in this section.

b) What are your outcomes - what do I want to achieve?

In this section you need to describe what you aim to achieve through having your NHS continuing healthcare needs met, these are your 'outcomes' and how you will meet them.

The outcomes need to relate to **all** your on-going care needs: health, wellbeing and social.

You need to have at least one outcome for every identified need.

- Think about what you want to achieve and what will help you achieve this?
- What is the 'result' of having the support?
- What are the most important things for you to ensure your outcomes are met?
- How will you know your support is working?
- What support do you need in your life to increase your good days?

Examples of people's outcomes are in the box below:

- ◇ To stay in my own home and do as much as I can for myself
- ◇ To have a shower, feel clean and not be reliant on my daughter
- ◇ To get to the hairdressers once a month
- ◇ To learn to use a computer
- ◇ To make some new friends
- ◇ To give my family a break from supporting me
- ◇ To help at my local library
- ◇ To meet friends for a coffee on a Thursday morning

c) How will you meet your outcomes?

The next step is thinking about how you will achieve your outcomes. When planning it is helpful to think creatively about how your needs can be met. Some of your outcomes may already be achieved through informal support, such as family, from current NHS services or community groups. If this is the case, we want you to record them and how they are met. This is because you are entitled to Continuing Healthcare and the NHS needs to ensure all your needs are being met. Consider your current networks and what else is available in the community that can help you to meet your outcomes. NHS services or other services agreed as part of your care and support plan can also help to achieve your outcomes. The example in the box below demonstrates how Jean met some of her outcomes without the need to use all her indicative budget.

My daughter Anne will continue to support me with keeping my home clean and tidy. She will also take me shopping each week. I have a good neighbour, Ray who will check each day that I am OK. I will continue to go to the weekly gardening group, Ray has said he will drop me off at the church and my friends, Bob and June have said they will bring me home. I will give Ray some fresh vegetables I grow for taking me.

d) When do you need support?

Planning your week with a timetable, based on a 'typical' week, may help you to

work out what support you need and when.

Monday	Morning	Afternoon	Tea	Evening	Night (specify the start and finish times of night)
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e) Staying safe and ensuring people supporting you are safe

How will I stay safe and ensure people supporting me are safe? Think about:

- How can people who support you, keep you safe?
- How can you ensure that you keep people who support you safe?
- Consider any triggers that may increase risk to yourself or people who support you.
- Write down what support, approaches and strategies help you to manage risks and / or take positive risks.

f) Contingency planning

You need to plan for change, if things go wrong or something unexpected happens with your care and support. There may be times when plans don't go as expected so it is important to have a 'back-up' plan. Think about:

- ✓ If anything could go wrong with the support you put in place, what would it be?
- ✓ Does your condition fluctuate, how will you need the support to change?
- ✓ What changes will be needed if you become unwell?
- ✓ How will you get support if your family member/informal carer are unwell?
- ✓ Or if your personal assistant is off sick or on holiday?
- ✓ What plans will you put in place to make sure you have the support you need?

You can add up to 4 weeks of your weekly allocated personal health budget for something going wrong with the care and support you have in place, or if there is an emergency.

What could go wrong?	How likely is this to happen?	What can I or someone else do to help me?	Is contingency funding required? Will this be a direct payment or a notional payment?
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If the care and support plan doesn't work, what alternatives can be tried?

For example: The person will be supported to live at home with live-in carers. If this breaks down, supported living or residential care will be explored.

g) Short breaks

If you have an informal (unpaid) carer or family member or friend providing on-going care and support, they are entitled to have a break.

How will you meet your outcomes when they are having a break? e.g., increased hours from an agency, personal assistant, or staying in a care home.

Record it in this section and how often short breaks will be in place.

h) Equipment and Assistive Technology

Disability related equipment and equipment that assists you to stay independent.

List all equipment and assistive technology that will support you to meet your health and social care needs. For example: a hoist, a hospital bed, sensor mats, eye-gaze, or video monitoring.

i) Annual mandatory training/delegated healthcare task training

If you are employing a personal assistant to meet all or some of your needs, you need to work with the CHC team to ensure they receive all the necessary mandatory training. If you have health care tasks that your employees need to undertake, they must be delegated by a registered health care professional.

Delegated healthcare tasks are the handing over of a health care 'task' such as bowel care, catheter care by a registered health care professional such as a district nurse to your personal assistant. The registered professional is responsible for ensuring relevant training and competencies have been undertaken and that the personal assistant feels confident and competent in undertaking the task delegated to them.

Your employee must be trained in the delegated healthcare task and the person needs to be signed off as competent to complete the task. This is the case for all employees, including where you are employing family members.

You, other personal assistants and / or family members cannot train other personal assistants in relation to delegated healthcare tasks. Training and competency must be by a registered practitioner; Doctor, Nurse, Physiotherapist, Occupational Therapist etc. or arranged with a training agency.

j) Personal Protective Equipment (PPE)

The nurse who assessed your needs is responsible for listing all the personal protective equipment you require to meet safely meet your needs.

Designing and organising your support

What you cannot spend your personal health budget on

Here is a list of things that you cannot use your personal health budget to pay for and should not be included in your support plan:

- ⇒ Gambling
- ⇒ Alcohol and tobacco
- ⇒ Utility bills & rent
- ⇒ Personal debts
- ⇒ Employing close relatives who live in the same house as you
- ⇒ Using care agencies not regulated by the Care Quality commission for personal care
- ⇒ Paying for support that should be provided by another organisation e.g. Local Authority

Where to find information

There are lots of ways to organise your care and support to meet your needs and outcomes. There are web sites that are free to use and designed to be the 'first place to look' for information and support.

If you live in Nottinghamshire County look on:

[Notts Help Yourself](#)

If you live in Nottingham City look on:

[ASKLiON | Ask Lion - Nottingham City Directory](#)

The sites have a directory of personal assistants. You can post a job advert on this page.

The person helping you complete your care and support plan will support you to talk through the options.

Employing your own personal assistants

This offers a lot of control and flexibility in how your care and support is organised and delivered. However, it also comes with responsibilities for managing and employing staff, which includes contingency planning for sickness and holidays. This should not discourage you from considering employing your own staff. With the right support, many people find this very satisfying and gain confidence over time.

Direct payment support provider service – help with employment and payroll

If you are employing staff, the person supporting you with your plan will work with you to agree what level of support you need with: becoming an employer, recruitment, being an employer, DBS checks, payroll, managed accounts and any additional support (information to be taken from the DPSS framework order form).

Buying services from providers

You can buy services from providers such as those providing personal and social care. A home care agency is one example but there are many. If you use a direct payment to buy services there is a greater range and choice available to you, such as smaller providers, who may be able to provide a more personal service than a larger provider.

3. Your personal health budget

How will you manage the personal health budget?

The first step is to decide how you will manage your budget. Are you going to have your personal health budget as a notional, third party or direct payment?

How will you manage the budget?			
How will the budget be managed?	Tick	Who is organising it, including their contact details?	Any other information
Notional budget: this means the care and support will be arranged and paid for by NHS Nottingham and Nottinghamshire. All these costs go in this green section.			
Third Party: the money is paid to a provider, independent to the NHS, who will work with you to organise and arrange your care and support. As well as managing the finances for you.			
Direct Payment: the money will be paid to a specific bank account which you will use to organise the care and support. The preferred NHS Nottingham and Nottinghamshire option is a pre-payment card, you or your representative and the NHS financial department can access and monitor this account.			

Financial breakdown of all the costs

The next step is to complete the financial breakdown of meeting your care and

support needs and achieve your outcomes. This can be complicated, but the person helping you to complete your plan will take the lead on filling in this section.

For the NHS to agree your plan, it needs to be clear what you are going to spend your money on and the costs of the support. This will include:

- ✓ All one-off and up-front costs: Money that will be paid as a one-off payment upfront to get your care and support started or money you need as a one-off to purchase a piece of equipment.
- ✓ The costs of recruiting and employing your own staff
- ✓ The cost of training your staff
- ✓ The costs of buying a service from a provider
- ✓ The cost of equipment, including assistive technology
- ✓ The cost of Personal Protective Equipment
- ✓ The cost of a home care agency
- ✓ The cost of short breaks
- ✓ The costs of your contingency plan

The costs will be recorded as weekly costs in the financial breakdown, and will be split into 3 categories depending on how each part of your support will be arranged:

1. Notional: List all the costs in the green section.
2. Third party: List all the costs in the yellow section.
3. Direct payment: List all the costs in the pink section.

What if the plan is under or over my budget?

You will need to add all your items of support together and compare it to the money you had to begin with as your indicative budget. Where the amount is under or the same as your indicative budget and your support plan is safe and legal, your plan can be sent to your NHS team and be sent to panel for agreement. If you go over the indicative budget, you should consider if there are more cost-effective ways to organise your support.

Where this is not possible or it would not be legal/safe to do so, you should discuss this with your worker. For the NHS to agree your plan, we need to be satisfied that it demonstrates value for money, meets your agreed outcomes, is safe and ensures your wellbeing.

Action planning

Once you have finished your support plan, think about how you will make it happen.

If you decided to employ your own personal assistant, this will mean finding someone to work for you.

Completing and agreeing your care and support plan

It is important that you agree the care and support plan, this section is for you or a person who is leading the planning on your behalf has read and agrees the plan. You need to sign and date it.

4. Approving the care and support plan

Once you have worked on the care and support plan with your Continuing Healthcare worker and agreed to it, the plan will go to NHS Nottingham and Nottinghamshire Personal health budget panel for approval.

5. Review of your care and support plan and personal health budget

The care and support in your care and support plan is agreed for one year, at which point you will have a review and the care and support may change if needed.

We have a duty to review everyone who receives a personal health budget. We will review it within 3 months of it starting and then every 12 months. It can take place by sending you the form to complete yourself, over the telephone or face to face.

The review provides an opportunity to see if:

- You continue to be eligible for support
- the outcomes in your support plan are being met
- the support is working for you
- anything is not working and needs to be changed
- the outcomes are still relevant
- any new outcomes have been identified
- your needs or have changed
- the needs of your carer have changed
- you are satisfied with your support
- you wish to change the way your personal health budget is managed

You may have an earlier review and/or more frequent reviews if:

- If your situation changes before a review, you need to inform us as your care and support plan and personal health budget allocation may need to change.
- You have a short-term personal health budget to regain skills to do things

- yourself
- there is a change to your needs or your circumstances
 - you have complex needs
 - you are at risk

A personal health budget can go up or down, stay the same or will be stopped if you no longer need our support

Do I have to pay towards my support?

No - As with all NHS services, they are free and will not affect your benefits.

Contact Information

Your Case Manager/ Personalised Care Coordinator/ Personal Health Budget Coordinator details
Team:
Name and position:
Contact Details: