Personal Health Budgets

Understanding the implications for staff
Introduction

The Social Partnership Forum\(^1\) and Skills for Health are committed to the principle of creating a more personal health service for patients in the NHS. We have developed this discussion document for staff to highlight some of the key issues surrounding personal health budgets.

The key principles for personal health budgets are set out in *Personal Health Budgets: First Steps*, including their voluntary nature, a commitment to uphold NHS values, and the importance of partnership. Making decisions as close to the individual as possible are an important part of these is also reflected in these principles.

Making personal health budgets effective will depend on staff: those who support and agree the care plans and budgets, those who monitor the use of the budget and conditions of individuals, and those who deliver services. Personal health budgets and personalisation more widely is likely to require a significant cultural change at all levels of the NHS. There may be far reaching changes to the way in which people work. This document addresses these issues and some of their potential effects on staff.

The roles of staff may evolve, with more emphasis placed on supporting patients to make choices and helping to co-ordinate their care. We recognise the importance of engaging and supporting staff, at every stage, to manage this change for the benefit of everyone involved.

At this stage, we are at the beginning of a long journey. There are many questions which are currently unanswered, and this is why the Government is piloting personal health budgets in a number of Primary Care Trusts. A rigorous evaluation programme has been commissioned to assess the impact of the pilots. Throughout the pilots there will be thorough and effective engagement with service users, staff and trade unions.

Nationally, we will be looking to provide advice to those participating in the pilots as they proceed, but many of the questions will be most effectively answered by local organisations exploring personalisation in their areas. Engaging staff, stakeholders and other interested parties will be vital if the pilots are to be effectively evaluated and be successful.

This document has been developed in consultation with the National Social Partnership Forum to set out some key questions for pilot sites to consider, to ensure personalised care can be delivered by a well-paid, well-trained and motivated workforce. It is a starting point for local discussion, outlines some of the main areas where there are likely to be concerns, and provides some further sources of information.

Challenges

Personal health budgets present a range of issues for staff and managers to address.

Some key challenges are:

- ensuring the professional and clinical accountability of staff is maintained
- developing processes to overcome potential conflicts between patients and staff

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\(^1\) The Social Partnership Forum brings together NHS Employers, trade unions and the Department of Health to discuss, debate and involve partners in the development and implementation of the workforce implications of policy.
• ensuring the quality of services to patients and the job security and remuneration of staff are equivalent to those of mainstream NHS services
• developing processes for budget setting and effective care planning
• ensuring that effective support mechanisms are in place for staff working in these areas, for example, through welfare arrangements, health and safety, managerial support and appraisals
• working with stakeholders to ensure that staff concerns are being addressed
• helping patients who act as employers to maintain the highest standards of employment policy and practice
• ensuring staff can engage in continuous professional/personal development
• ensuring staff are paid appropriately (see the section on pay and conditions of service)
• ensuring that health and safety risks and issues are addressed.

Ways forward

There are a number of key themes which the pilots may wish to consider when formulating their ideas, especially when considering the potential impact of personal health budgets on staff. It is expected that discussions on the challenges will take place at local, regional and national level.

Leadership and engagement

High quality leadership will be vital during the personal budgets pilot programme. It will be crucial to engage with local leaders to ensure that all staff involved are fully engaged and able to influence the process and raise any concerns they may have. This will require early engagement with staff and their trade unions, to capture their ideas and to incorporate their contribution to developing personal budgets locally.

The pilots may find it helpful to engage with local and or regional groups, such as Strategic Health Authority workforce development networks or regional Social Partnership Forums. Local professional and trade union representatives may also be helpful partners.

Training and supporting staff

The pilots will need to consider the skills, roles and responsibilities of staff, and identify any training and support they will need. New roles may emerge, focusing on supporting patients rather than directly delivering services, and pilot sites may want to consider whether they need to adapt their teams and processes to encourage new ways of working.

For example, new roles could include:
• care co-ordinators
• personal assistants
• service brokers or advocates.

Both new and existing staff are likely to need training to deliver personal budgets. For example, they may be required to:
• source services and options for patients in their localities
• monitor budgets
• help patients to manage personal assistants
• manage care packages
• discuss the likely costs of care with patients and handle discussions about options within a set budget.

To fulfil these roles successfully, pilot sites will need to identify the key skills required, and support staff to develop them. This could be done in a range of different ways.

Evaluation of personalisation has already been carried out in the social care sector and you may find the following useful:

The common core principles to support self-care jointly developed by Skills for Health and Skills for Care.

The Skills for Health database of National Occupational Standards.

The work on skills for professionals working with carers led by Skills for Care, or the work around the National Advocacy Qualification may also be helpful in setting out some of the core skills needed.

Pilot sites should also ensure that risk management procedures are set up and properly outlined to staff.

Employment Issues

Local pilots will want to consider a number of questions around employment. They should ensure that staff working to deliver personal budgets receive terms of employment that are legal, reasonable and fair. Pilots should ensure that best practice in employment and HR management is followed, and relevant employment legislation is adhered to.

Where staff involved in the pilots are not directly employed by the NHS, pilot sites should ensure that the staff are employed on contracts that are aligned with Agenda for Change terms and conditions.

The pilots may also wish to consider how to ensure that staff not directly employed by the NHS are able to access the NHS pension scheme or an equivalent option.

The Cabinet Office Code of Practice on Workforce Matters suggests that, where staff are transferred to other organisations, they should be “offered membership of a pension scheme which is broadly comparable to the public service pension scheme they are leaving”.² In High Quality Care for All, the NHS made a commitment that where Primary Care Trusts and staff choose to set up social enterprise organisations, “transferred staff can continue to benefit from the NHS Pension Scheme, while they work wholly on NHS funded work”.³

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² Code of Practice on workforce matters in public sector service contracts, (Cabinet Office, 2008) p.2

³ High Quality Care For All (DH, 2008) p. 62.
Pilot sites may want to consider the different ways in which staff, especially those employed outside the NHS, could access support, training and information. They may wish to make connections with NHS HR departments, which could offer advice, information and support. Other useful sources of information could be voluntary sector organisations already engaged with personal care.

Local areas should also consider how to engage their local trade unions and professional organisations, which will be able to provide advice and support.

**Regulation of health professionals delivering personalised care**

Staff should continue to adhere to current regulatory requirements, such as those of the Nursing and Midwifery Council and the Health Professions Council. Pilot sites may want to consider how to develop training and professional development frameworks to ensure that people working to deliver personal health budgets are able to re-validate their qualifications as required.

All staff and organisations will want to know that there is adequate cover in the event that a third party claim is made if something unforeseen happens. In developing arrangements to deliver personal health budgets, it will be vital to consider how such issues will be resolved. Employers will need to have appropriate employer liability and public liability cover in place. Professional staff will need to ensure that they have cover through their employer or, if they are self-employed, their own personal cover.

**What resources are already available?**

There are many sources of information available to inform local debates around the workforce implications of personal health budgets. The list below may be helpful for people wishing to explore these issues further:

**Social Partnership Forum**

- [www.socialpartnershipforum.org](http://www.socialpartnershipforum.org)

**NHS Employers**

- [www.nhsemployers.org](http://www.nhsemployers.org)

**Skills for Health**

- [www.skillsforhealth.org.uk](http://www.skillsforhealth.org.uk)

**Department of Health**
Checklist

Staff and managers may wish to use this list to ensure that they have considered potential issues before they emerge. It is not an exhaustive list, but it may be helpful to highlight some key areas as first steps when developing proposals.

Employment issues

- Have pilots considered the workforce implications of their proposals?
- Have staff and other partners been consulted and involved?
- Is there agreement on staff pay, terms and conditions and pensions arrangements?
- Are personal health budgets reflected in workforce and training plans?
- Are staff suitably registered with professional bodies, and able to revalidate their fitness to practice?
- Whose responsibility will it be to ensure that all health care professionals involved in the delivery of care to a personal health budget holder are kept up to date with developments and involved in decision-making as necessary?

Delivering personal health budgets

- What are the processes in place for resolving differences of opinions between staff and patients on clinical and health care choices?
- What changes will occur to staff jobs under the new arrangements?
- Are the relevant procedures in place to resolve staff grievances and disputes?
- Where can staff get further advice from?
- Do any processes need to be in place to allow trade union representatives to continue their role in providing support for members?
- What is the process for setting the budgets?
- How will any health and safety risks be handled?
- What processes are in place to promote equity between different patients receiving personal health budget, as well as equity between patients with personal health budgets and patients without?
- Will specific arrangements be necessary for vulnerable patients holding budgets?

For more information, please contact the Personal Health Budgets policy team
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