

## Direct payments for healthcare

Changes to the rules about direct payments for healthcare –

What you told us and what we decided to do.



This is an EasyRead version of:

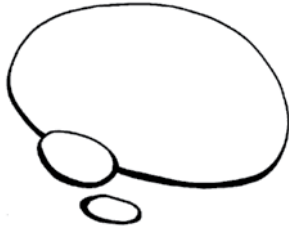
Consultation on Direct Payments for Healthcare.  
Government response.

# Whats in this booklet?



About this booklet

1



How people told us what they think

3



What people told us and what we have changed

6



Deciding who can have a direct payment for healthcare

9



Direct payments for healthcare for children and people who cannot decide for themselves

11



Care planning

13

# Whats in this booklet?



Information, advice and other support 15



Rules about giving direct payments for healthcare 18



New rules about local councils 20



Managing a direct payment for healthcare for another person 22



Rules that we do not want to change 25



A few last words 29



## About this booklet



The Department of Health has written this booklet about **personal health budgets**.



Lots of government plans are about giving people more choice and control and better public services.



One idea is to give people a **personal health budget** and choice about how the money is spent on their healthcare and support.



You can already get a personal budget to pay for social care.



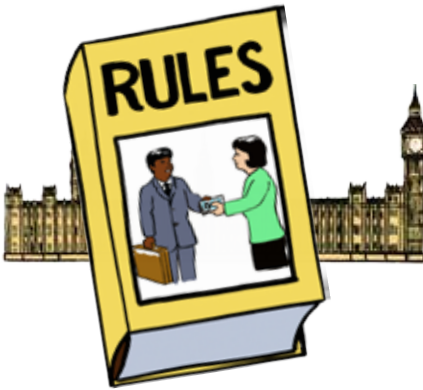
Parliament changed the rules so some people could try **direct payments** to buy and manage their own healthcare and support.



We want to give everyone the choice to have a direct payment for healthcare



Between 1st March and 26th April 2013 we **consulted** (asked people what they thought).



We stuck to the government's rules about consultations and asked about changing things to give everyone the choice to have a direct payment for healthcare.

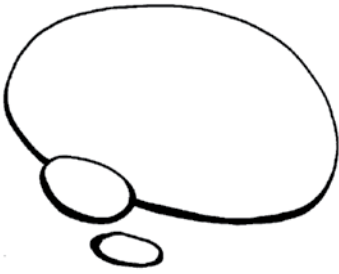
This paper tells you:



- what people said about our ideas to change some rules about personal budgets for healthcare



- what we decided to do.



## How people told us what they think

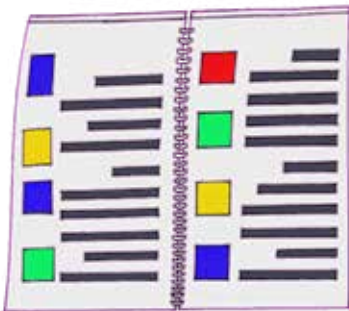
There were lots of different ways for people to tell us what they thought:



- answering questions on our website



- emailing or writing to us



- reading EasyRead information about the changes



- sharing information with groups who often get missed out.

We got 140 replies. These came from:



- organisations like local councils, doctors and other health staff



- organisations that speak for people with different health problems or disabilities



- voluntary and community groups.



- people who use health and social care services



- carers



- NHS staff



- other people who work in health and care services.



We looked at all the things people said and used the ideas to decide about the rules for direct payments for healthcare.





## What people told us and what we have changed

### What people said



Most people said we should change some rules so everyone has the choice of a direct payment for healthcare.



A few people did not agree and said direct payments should only be used for **NHS Continuing Healthcare** (when the NHS pays for healthcare outside hospital for people who need a lot of support with their health).

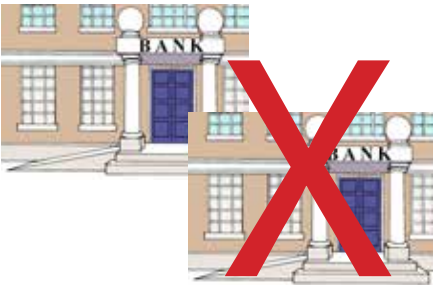


Some people had ideas for other things to put in the rules.

## What we will do



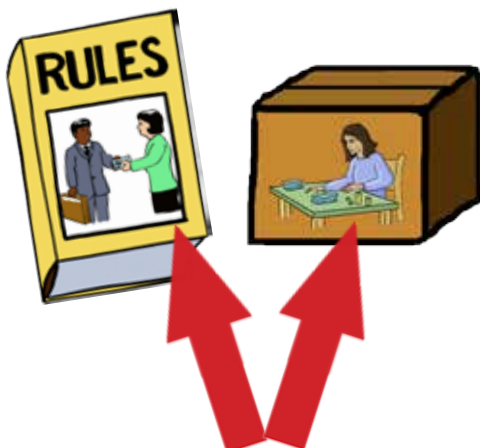
People said we should change some rules to make it easier to get a direct payment for healthcare.



We have changed the rule so people do not need a separate bank account if they get just 1 direct payment for healthcare.



People also said we need to make the rules easier to understand.



We will put some information in the rules and other information in the **personal health budget toolkit** for Doctors and other health staff.



The toolkit is on our website: [www.personalhealthbudgets.england.nhs.uk/Topics/Toolkit/](http://www.personalhealthbudgets.england.nhs.uk/Topics/Toolkit/)



People did not agree about paying a member of the person's family to manage a direct payment for healthcare for them.



We have decided not to change this until we know more about how things work. We can change these rules later if we need to.



# Deciding who can have a direct payment for healthcare

## Question 1



We asked if our ideas are the right things to think about to decide if someone can have a direct payment for healthcare.



Should this be written in the law?

## What people said



Most people agreed a personal health budget should be based on how much support someone needs for their health, not what health problem they have.



This will give people who need the most support the most choice over their health care.



When we tried out direct payments for healthcare this helped us work out how to decide who can get one.



Some people thought we should explain this better.



People agreed local areas should decide who can have a direct payment for healthcare but said things might be better in some areas than others.

## What we will do



We will write a guide to help local areas decide and to make things fair for everyone.



## Direct payments for healthcare for children and people who cannot decide for themselves

### Question 2



We asked if these rules should stay the same but have separate information for each group.



Is there anything else we need to think about for people who cannot decide for themselves?

### What people said



Nearly everyone agreed we should have separate information. Health and care organisations and charities thought this was really important.



Some people were worried that someone who manages a direct payment for healthcare for another person might cheat them or spend the money on the wrong things.



A community group said people might not be able to decide for themselves about one thing or at one time but things can change.

## What we will do



We changed the rules so there is separate information for each group.



The rules and toolkit will say how to keep people safe and check whether they can decide for themselves.



## Care planning

### Question 3



We asked if people agree with the list of things you cannot spend a direct payment on and the other things we would like to include.

### What people said



Most people agreed that direct payments for healthcare are not right for everyone and should not be used for every NHS service.



They said they should be used to help people get care and support in the way that works best for them.





People agreed direct payments for healthcare should not be used for other things like GPs, dentists or emergency care.

### What we will do



We listened to what everyone said and decided to include these things in the rules.

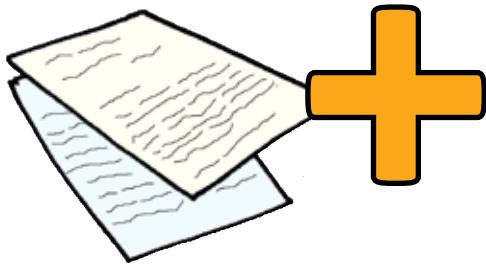


Too many rules will stop people getting the care and support they need but we can add more things to the list if we need to.



# Information, advice and other support

## Question 4



We asked if we should add some things to the list of information, support and advice people can ask for.

## What people said



Most doctors and other health staff, local councils and health and care organisations agreed people should be able to ask for other information.



Only 6 out of every 100 people did not agree.



Because the information can help you decide about a personal health budget, people should not have to ask for it.



The rules say the patient or a person they choose should get the information or advice they need about direct payments.



Some people said the information should be in different formats that everyone can understand. Doctors and other health staff will look at this.



Some people wanted other information about how the budget is worked, how you can spend it and the law about employing staff to help with your care and support.

## What we will do



Doctors and other health staff can add to the list if they want to. The personal health budget toolkit will tell them more about information, support and advice.



People need up to date information about the law and employing staff.



Any information about this must tell people how to contact organisations who know about things like tax and insurance.



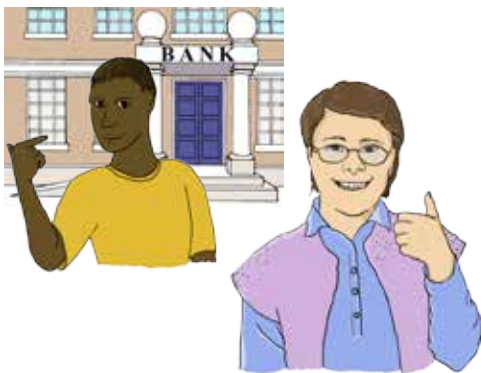
## Having a separate bank account for direct payments for healthcare

### Question 5



We asked if people can use their own bank account if they just get 1 direct payment for healthcare.

### What people said



It takes too much time to set up a separate bank account for just 1 payment and people should be able to use their own bank account for this.



Some people were worried this might be difficult to check.



Everyone agreed the person should be able to show they have spent the money properly.

### **What we will do**



Doctors and other health staff will check that people spend their money properly and can do things like look at receipts.



If someone is not spending the money properly they might not get a direct payment for healthcare in the future or the doctors and other health staff can take the money back.



## New rules about local councils



### Question 6

We asked if local councils should give direct payments for some healthcare as well as social care.



### What people said

Local councils can already give people a direct payment to pay for social care.



Most people think councils should also be able to give people a direct payment for things to help them get and stay healthy.



This is part of the government's plan to give people more choice and control over care and support.



It will be important to know when the local council can get involved and make sure councils and the NHS work well together.



### **What we will do**

Health and social care staff are already working well together in some parts of the country.



We will make sure there is up to date information in the toolkit for doctors and other health staff about training and supporting staff to do this.





## Managing a direct payment for healthcare for another person

### Question 7



We asked if people should be able to pay their friends or family (who live in the same house) to help them manage a large or difficult healthcare budget.



How should we decide when people can do this?



Should it depend on how big the direct payment is?

## What people said



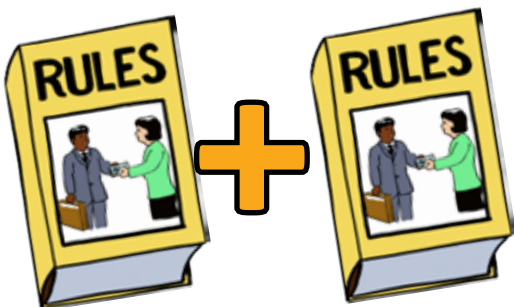
About half the people who answered this question thought the rule should change so someone can pay a friend or family member who lives in the same house.



Other people thought it might be complicated or difficult or the person might not use the money properly.



They also wanted to know who would decide how much the person would pay their friend or family member.



Some people said the rule about paying someone to manage a direct payment for social care should also change if it changes for healthcare.



## What we will do

We have decided not to change this rule.



This means people cannot pay their friends or family (who live in the same house) to help them manage a large or difficult healthcare budget unless there is a very good reason.

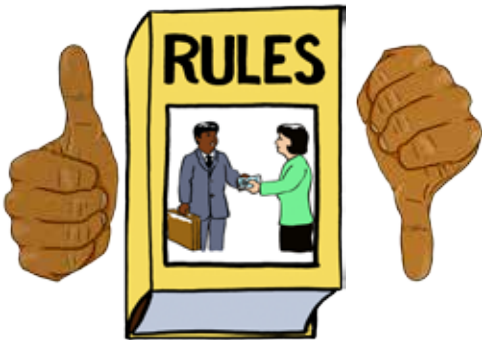


We will look at this again when we know more about what might happen.



## Rules that we do not want to change

### Questions 8, 9 and 10



We wrote a list of rules and asked if they should stay the same.



If not, what should change?



Are there any other things you want to see in the rules?



We must stick to a law called the Equality Act.



Do you think our ideas will mean anyone is treated unfairly?

### What people said



Most people did not want to change these rules.

About 20 out of every 100 people wanted to include more rules about:



- Making things easier to understand



- Working in the way that is best for the person



- Making sure the money is used properly and what happens if it is not



- Being quicker at telling people how much their personal budget is.



A lot of people did not answer the question about treating people fairly.



Most people who did answer think there will not be any problems but said we need to keep checking this.



It is important to make sure people can get information in ways they can understand.

## What we will do



The guide and toolkit have information about a lot of things people think we should include.



We will use what people told us to keep these up to date.



If people get the right information, advice and support, we think personal health budgets can make things better for people who have missed out on good healthcare in the past.



## A few last words



Thank you to everyone who helped us find out what different people think about direct payments for healthcare.



Your ideas will help us write the rules which will be ready before the autumn of 2013.



Personal health budgets should give people more choice and control over their care and support. Direct payments for healthcare will help make this happen.



We know we have a lot to learn about how to make things work well and your ideas will help us.





We will keep working with patients, organisations and the public and would like to hear how you think things are going.



People said direct payments for healthcare will make a big difference for people with a disability or who have a health problem for a long time.



If we take things slowly and keep learning, they will help the NHS give more people the care and support that is right for them.

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