

# The National Personal Health Budget Pilot Programme

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‘NHS Personal Health Budget’ Pilot  
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# NHS Personal Health Budget Pilot Sites

- Hartlepool PCT with Stockton PCT
- Doncaster PCT
- Hull Teaching PCT
- Manchester PCT
- Merseyside (joint bid)
- Stoke on Trent PCT
- Health and Wellbeing Partnership, Birmingham
- Barking and Dagenham PCT
- Havering PCT
- West London PCT
- Dorset PCT
- Norfolk PCT
- NHS Nottingham City
- Northamptonshire Teaching PCT
- Oxfordshire PCT
- Avon, Gloucestershire, Wiltshire and Somerset Cardiac and Stroke Network
- Bedfordshire PCT
- Eastern and Coastal Kent PCT
- Medway PCT
- Torbay Care Trust



# Nottingham's NHS Personal Health Budget Pilot

To explore the use of Personal Health Budgets for:

- Patients with neurological conditions referred to the new Community Neurology Service
- Patients with memory problems referred to the Intermediate Care Service at the Willows
- Patients that become eligible for fully funded NHS Continuing Health Care or joint funded care packages
- Carers of patients receiving a Personal Health Budget



# Nottingham's Department of Health Personal Health Budget Pilot – Objectives

To explore

- patient experience of receiving a personal health budget
- carer experience of the person they care for receiving a personal health budget
- the impact of patients and carers receiving a personal budget on service providers
- the impact of patients and carers receiving a personal budget on the use of health and social care services
- the systems and processes that are required to provide personal health budgets to people with neurological conditions and their carer
- the impact of Personal Health Budgets on health inequalities in Nottingham City

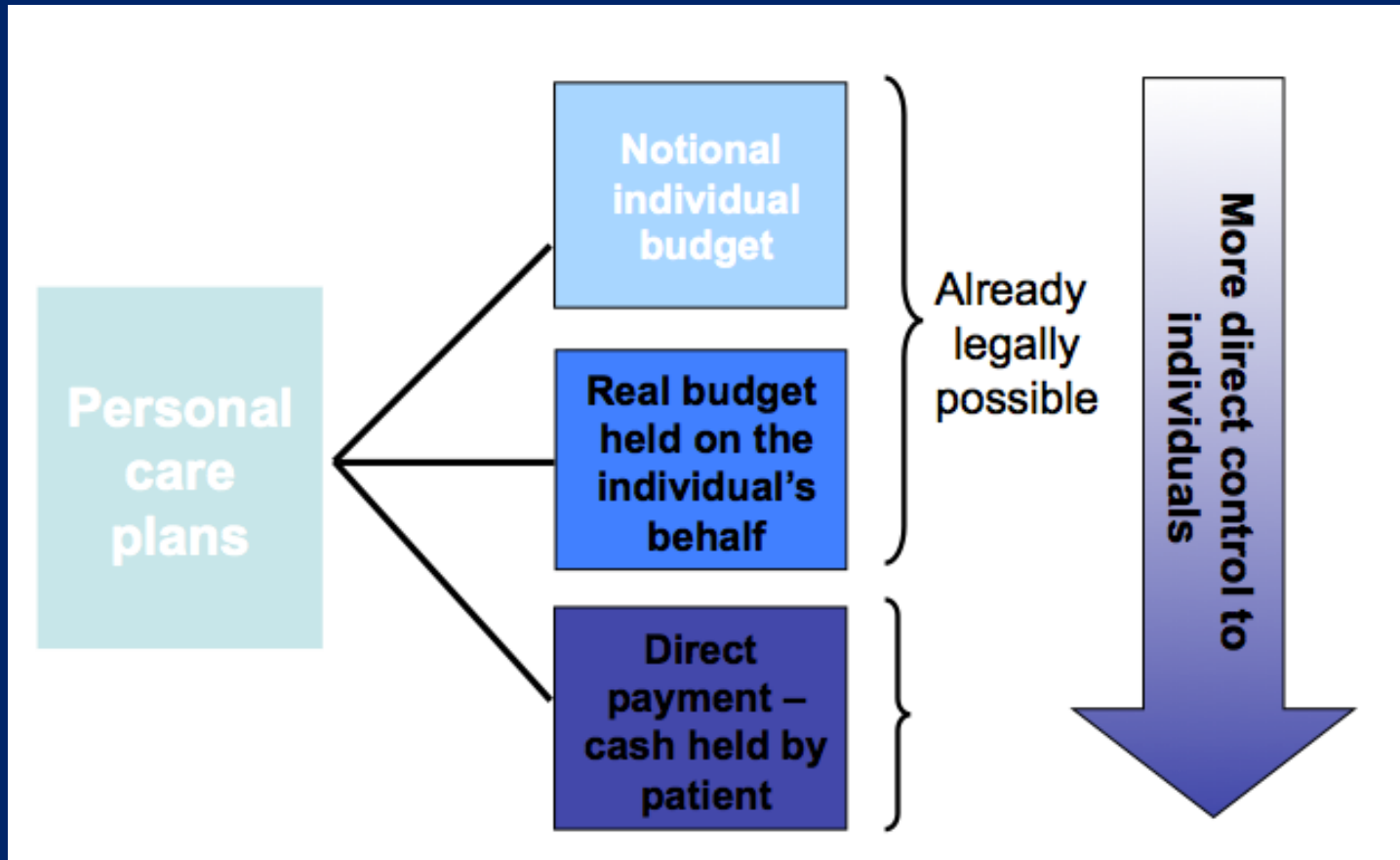


# The National Personal Health Budget Evaluation

- Questionnaires at baseline, 6 and 12 months after consent
- Medical records information
- Analysis of support plans
- Interviews
  - Patients
  - Carers
  - Project Leads
  - Clinicians
  - Care Managers
  - Third Party Budget Holders
  - Service Providers



# Personal Health Budgets – How?



# Personal Health Budgets – What?

- Personal Health Budgets cannot be spent on:
  - emergency care
  - primary medical services
  - alcohol
  - cigarettes
  - gambling
  - debt repayment
  - anything illegal

(Personal Health Budgets: First Steps)



An end to  
health inequalities  
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# Personal Health Budgets – What?

What a Personal Health Budget can be spent on

- Directory of Services to Help You Cope with Neurological Conditions
- Directory of Services to Help You Cope with Memory Problems

Available at:

[www.nottinghamcity-pct.nhs.uk](http://www.nottinghamcity-pct.nhs.uk)



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# Nottingham's Department of Health Personal Health Budget Pilot - Timetable

Activity	Completed by
Staff training and organisational development	April 2010
Developing systems and processes	April 2010 - Evolving as the pilot progresses
Pilot recruitment period	April 2010 – April 2011
Pilot evaluation period (questionnaires and interviews)	April 2010 – April 2012
Final evaluation paper	October 2012



## Early Lessons - 1

- It is essential that health and social care work together to facilitate personalisation
- People want help to develop a support plan and decide how to spend their budget
- Support planning is time consuming if it is done properly
- The culture change to facilitate personalisation in health is huge



## Early Lessons - 2

- It is important to recognise and record risks
- A lot of perceived risks identified at the beginning of the pilot haven't materialised
- The market needs to develop so that people have real choice over what services they buy with their Personal Health Budget



# Key Challenges

- Delivering Personal Health Budgets in a time of financial challenge
- Culture change
- Developing the right systems and processes
- Fluctuating and changing needs
- Market development



# Case Example – Patient 1

## Patient Profile

- Lady aged 29
- Recently diagnosed with MS
- Lives at home with 2 children



# Case Example – Patient 1

## Service Received

Social Care	Health Care
- Home care	-Physiotherapy
	-Bladder Assessment



# Case Example – Patient 1

## Problems and Crises

- Regularly DNAs at the physio
- Is finding it increasingly difficult to get around the house
- Is becoming depressed



# Case Example – Patient 1

How a Personal Health Budget has been used:

- Continued bladder management with the MS nurse
- Joined local gym instead of physio



## Case Example – Patient 2

- Patient Profile
  - 85 year old lady
  - Memory problems
  - Always lived alone
  - Very independent
  - Doesn't like lots of different people visiting her



# Case Example – Patient 2

## Services Received

- None prior to admission to the Intermediate Care Service at the Willows.

# Case Example – Patient 2

## Problems and Crises

- Admitted to the Intermediate Care Service following a stroke
- Cognition deteriorates
- Increasingly reliant on neighbours
- Forgetting to take medication
- Unable to get to medical appointments
- Not coping well living on her own

## Case Example – Patient 2

How a combined Personal Health Budget and individual budget for social care has been used:

- Personal Assistant from an agency
- Training for Personal Assistant to:
  - Better understand memory problems
  - Identify issues early to prevent a crisis



# Case Example – Patient 3

## Patient Profile

- Gentleman with complex and multiple conditions
- Lives at home on his own
- Condition deteriorates
- Assessed as eligible for fully funded NHS Continuing Health Care

## Case Example – Patient 3

### Services Received before NHS Continuing Care Assessment

Social Care	Health Care
<p>Direct payment to pay for:</p> <ul style="list-style-type: none"><li>-2 PAs each doing 63.5 hours p/w costing £7.94 per hour</li><li>-Overnight waking carer doing 56 hours p/w costing £10.57 per hour</li></ul> <p>The current PAs have been in post for 4 years</p>	<p>Health care support to help manage his condition</p>



# Case Example – Patient 3

## Problems and Crises

If the NHS are not able to give patients a healthcare direct payment:

- To move the existing package to NHS funding we could:
  - Use an agency costing £11-15 per hour (although this would result in a change of PA as the current PAs do not want to be employed by an agency)
  - Use 'Home Care Direct' costing £2.20 per hour admin charge + £200 set up fee + cost of CRB checks
- Either of these options result in a huge increase in the cost of the patient's care package for the NHS



## Case Example – Patient 3

### How a Personal Health Budget could be used

- A Healthcare Direct Payment would enable the patient to continue to employ his Personal Assistants.
- There would be no change to his support
- There would be no increase in the cost of the patient's care package for the NHS

## What Next?

- Continue recruiting patients to the pilot
- Explore how to make Personal Health Budgets sustainable for possible future roll out
- Develop ways in which patients can support each other to use their Personal Health Budgets
- Look at ways in which patients can combine their Personal Health Budgets to achieve more cost effective outcomes



If we always do what we've  
always done...

...We'll always get what  
we've always got



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# Any Questions?

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