

**Changing our approach to direct payments for adults**

**(social care, mental health and continuing healthcare)**

Consultation 1st October to 31st December 2020

**Report**



**With help from Healthwatch**



Contents

[Introduction 6](#_Toc62547222)

[Background 6](#_Toc62547223)

[Adults who use direct payments to meet their needs for care/ support: a user profile 6](#_Toc62547224)

[Definitions 7](#_Toc62547225)

[Report Structure and Consultation Approach 8](#_Toc62547226)

[Consultation methodology 8](#_Toc62547227)

[Sample 9](#_Toc62547228)

[How respondents to the consultation identified themselves 10](#_Toc62547229)

[Direct payment recipient responses 10](#_Toc62547230)

[Outcome of Consultation 11](#_Toc62547231)

[Headline Findings 11](#_Toc62547232)

[Headline findings: chart showing direct payment recipient responses 12](#_Toc62547233)

[Findings in detail 12](#_Toc62547234)

[Pie chart showing direct payment recipient responses. 16](#_Toc62547235)

[Question 1e) 16](#_Toc62547236)

[Section Two: direct payment cards 17](#_Toc62547237)

[Pie chart showing direct payment recipient responses 18](#_Toc62547238)

[Direct payment recipients 18](#_Toc62547239)

[Pie chart showing direct payment recipient responses 19](#_Toc62547240)

[Direct payment recipients 19](#_Toc62547241)

[Stakeholders 19](#_Toc62547242)

[Question 2c): do you use online banking (for example to make payments or pay bills)? 20](#_Toc62547243)

[Pie chart showing direct payment recipient responses 20](#_Toc62547244)

[Direct payment recipients 20](#_Toc62547245)

[Stakeholders 20](#_Toc62547246)

[Section three: help with managing direct payments 21](#_Toc62547247)

[Question 3a): do you agree that it is a good idea for us to have a clear agreement with organisation(s) so that everyone who needs it gets consistent, good quality help? 22](#_Toc62547248)

[Pie chart showing direct payment recipient responses 22](#_Toc62547249)

[Direct payment recipients 22](#_Toc62547250)

[Stakeholders 22](#_Toc62547251)

[Additional comments 23](#_Toc62547252)

[Summary 24](#_Toc62547253)

[Appendix One: narrative contributions from respondents 25](#_Toc62547254)

[Question 1a: “my direct payment is important to me because…” 25](#_Toc62547255)

[Question 1a): From your experience, why do you think direct payments are important to people who have them? 27](#_Toc62547256)

[Question 1b): “the best thing about having a direct payment is…” 27](#_Toc62547257)

[Question 1b): From the point of view of those who have direct payments, what do you think is the best thing about having a direct payment? 29](#_Toc62547258)

[Question 1c): “my direct payment would be better if…” 30](#_Toc62547259)

[Question 1c): How could direct payments be better for the people who have them? 31](#_Toc62547260)

[Question 1e) “the most important thing I get from the organisation that helps with my direct payment is..” 31](#_Toc62547261)

[Question 1e): In your experience, what is the most important thing about the help that people get from organisations that support them to manage their direct payments? 33](#_Toc62547262)

[Anything else you want to tell us about direct payments? 33](#_Toc62547263)

[Anything else you want to tell us about direct payments? 36](#_Toc62547264)

[Appendix Two: Equality Act 2010 and connected data 38](#_Toc62547265)

[1. Postcode 38](#_Toc62547266)

[Chart showing direct payment recipient postcodes 38](#_Toc62547267)

[Direct payment recipients (top two responses): 38](#_Toc62547268)

[Stakeholders 38](#_Toc62547269)

[2. Carer status 38](#_Toc62547270)

[Pie chart showing direct payment recipient responses 38](#_Toc62547271)

[Direct payment recipients 38](#_Toc62547272)

[Stakeholders 39](#_Toc62547273)

[3. Age 39](#_Toc62547274)

[Pie chart showing direct payment recipient responses 39](#_Toc62547275)

[Direct payment recipients 39](#_Toc62547276)

[Stakeholders 39](#_Toc62547277)

[4. Gender 40](#_Toc62547278)

[Pie chart showing direct payment recipient responses 40](#_Toc62547279)

[Direct payment recipients 40](#_Toc62547280)

[Stakeholders 40](#_Toc62547281)

[5. Race 41](#_Toc62547282)

[Bar chart showing direct payment recipient responses 41](#_Toc62547283)

[Direct payment recipients 41](#_Toc62547284)

[Stakeholders 41](#_Toc62547285)

[6. Disability 41](#_Toc62547286)

[Bar art showing direct payment recipient responses 41](#_Toc62547287)

[Direct payment recipients 41](#_Toc62547288)

[Stakeholders 42](#_Toc62547289)

[7. Sexuality 42](#_Toc62547290)

[Pie chart showing direct payment recipient responses 42](#_Toc62547291)

[Direct payment recipient 42](#_Toc62547292)

[Stakeholders 42](#_Toc62547293)

[8. Relationship status 43](#_Toc62547294)

[Pie chart showing direct payment recipient responses 43](#_Toc62547295)

[Direct payment recipients 43](#_Toc62547296)

[Stakeholders 43](#_Toc62547297)

[9. Religion 44](#_Toc62547298)

[Pie chart showing direct payment recipient responses 44](#_Toc62547299)

[Direct payment recipients 44](#_Toc62547300)

[Stakeholders 44](#_Toc62547301)

[Some individuals gave additional narrative to describe themselves 45](#_Toc62547302)

[Appendix Three: non-recipient/ stakeholders questionnaire (this appeared online only) 46](#_Toc62547303)

[Introduction 46](#_Toc62547304)

[Section One: about direct payments 46](#_Toc62547305)

[Section Two: our idea on direct payment cards 47](#_Toc62547306)

[Section three: our idea on help with managing direct payments 48](#_Toc62547307)

[What happens next? 49](#_Toc62547308)

[About you/ Equality Act (EQA) data 49](#_Toc62547309)

[Appendix Four: recipient consultation questionnaire (*postal*) 50](#_Toc62547310)

[Questions about your direct payment 55](#_Toc62547311)

[About you 64](#_Toc62547312)

[About you continued 66](#_Toc62547313)

## Introduction

### Background

North East Lincolnshire Council, Clinical Commissioning Group (CCG), Navigo and Focus independent adult social work (“we”) have been considering how we give direct payments to people, and how we help people who have a direct payment. We have been thinking about how we can make improvements.

Up to 360 adults in North East Lincolnshire receive a direct payment from social care, mental health or continuing healthcare. This includes adults who receive a regular or a one-off direct payment.

Following a care assessment, we calculate how much it costs to meet each adult’s eligible needs. The cost of meeting the adult’s needs is called a ‘personal budget’ or ‘personal health budget’ (both are referred to simply as ‘personal budgets’ from now on). The adult may also be asked to contribute to the costs of meeting their social care needs (health care needs are met for free).

Adults can choose to receive their personal budget as a direct payment. In combination with any funds they contribute, adults use their direct payment to pay for the costs of their care/ support. The direct payment may be paid to the adult with needs or to someone else on their behalf. Recipients may get help with using or managing the direct payment.

A public consultation on our approach to direct payments ran from 1st October to 31st December 2020. The primary aim of the consultation was to understand:

* the experiences of direct payment recipients, good and bad
* whether delivery of personal budgets via direct payment card would offer improvements
* whether a direct contractual relationship between the CCG, and organisations that help direct payment recipients, would offer improvements.

The views of direct payment recipients, and wider stakeholders, will shape our approach to direct payments from April 2021 and beyond.

### Adults who use direct payments to meet their needs for care/ support: a user profile

Records held on SystmOne and Controc indicate the following:

1. The largest number of regular direct payment users are younger adults (under 65) with learning disabilities
2. The second largest number of regular direct payment users are younger adults (under 65) with physical disabilities
3. A smaller number of regular direct payment users are older people
4. An even smaller number of regular direct payment users are mental health clients
5. A small number of carers receive direct payments; these are more often one off than regular direct payments.

A majority of regular direct payments are spent on recipients arranging care at home, a significant proportion of which is delivered by privately employed personal assistants (PAs). A smaller number of direct payments are spent on community provision such as services at day care and other social or educational activities.

### Definitions

* Adult means any or all of the following

1. a person aged 18 years or over who has needs for care; or
2. a carer aged 18 years or over who has needs for support, due to caring for a person aged 18 years or over

* Direct payment recipient means any or all of the following

1. an adult who receives their personal budget in the form of a direct payment
2. a suitable or nominated person who receives and/ or manages the direct payment on behalf of the adult

* Representative means any or all of the following

1. a suitable or nominated person who receives and/ or manages the direct payment on behalf of the adult
2. a person who provides the adult with other help relevant to direct payments e.g. acts as their attorney or benefits appointee, or as their informal carer

* Stakeholder means any of the following

1. Any individual not already defined as a direct payment recipient, as above
2. A staff member of a health/ care organisation, an organisation supporting direct payment recipients to manage a direct payment, or an organisation offering services which direct payment recipients may spend their direct payments on
3. A member of the public.

Note: these definitions are somewhat fluid, and individuals may identify themselves in more than one way.

## Report Structure and Consultation Approach

This report includes headline findings for each consultation question posed. Qualitative themes from questionnaire respondents, and from attendees at the online consultation event, are used to illuminate findings where available.

Where results are discussed within the report, percentages are rounded up or down to the nearest one per cent (%). Therefore, occasionally figures may add up to 101% or 99%.

### Consultation methodology

The consultation was designed to be inclusive. A range of methodologies were used to ensure those directly affected by the proposals, as well as stakeholders, were given maximum opportunity to provide their opinion. The approach was as follows:

1. **Direct payment recipients**

Adults who may be directly affected by the proposals were invited to participate in the research primarily via a postal questionnaire. A single, easy read style of questionnaire was utilised for all. The questionnaire was designed by colleagues across the Council, CCG, focus and Navigo. Design support was also provided by the Accessible Information Officer at Care Plus Group.

Care was taken to ensure the questionnaire was written in plain English. Feedback on an initial draft questionnaire was provided by community members and Healthwatch, to ensure accessibility and readability. A copy of the final version of the questionnaire can be found in the appendices.

Around 311 questionnaires were posted to adults who use direct payments or their representatives. In addition, questionnaire recipients were provided with the opportunity to complete the questionnaire online via a dedicated ‘have your say’ page on the CCG website (<https://www.northeastlincolnshireccg.nhs.uk/current-opportunities-to-have-your-say/directpayments/> ).

Due to Covid-19, it was not possible to hold face to face consultation events. The opportunity to attend two virtual events via zoom was offered, on Wednesday 4th November at 1:30pm and Thursday 12th November at 6:30pm. The 4th November event was cancelled due to lack of interest, and the 12th November event proceeded with only two attendees.

1. **Stakeholders**

To understand the opinions of stakeholders, links to the online questionnaire were promoted via Council and CCG media streams (including Facebook and Twitter) and placed on a dedicated page on the CCG’s website. Other organisations such as focus and the Care Plus Group Collaboratives also supported this media activity. The mailing list of the CCG’s membership body ACCORD was also used to raise awareness of the consultation and invite responses online.

Providers supporting direct payment recipients were specifically invited to comment, as were those organisations on which recipients may spend their direct payments.

The questions, accessible via a separate online link, were slightly re-phrased for stakeholders (see Appendix 3). This was to recognise that they were not contributing ‘first-hand’ as a direct payment recipient, but (for example) as a staff member or other professional with valuable observations to share.

1. **Support from Healthwatch**

Within the paper questionnaires, and on the CCG’s dedicated consultation page, Healthwatch contact details were provided for those needing additional support with completion, or questions. Healthwatch also hosted the online event via zoom, and promoted the consultation via their membership. Healthwatch acted as point of contact throughout the consultation period.

As the vast majority of responses were from direct payment recipients, these are the focus of this report, and their responses have been depicted in graph form. The smaller number of stakeholder responses have been referenced, but not depicted in graph form.

### Sample

The vast majority of responses were provided via postal questionnaires. Of the 311 postal questionnaires sent to direct payment recipients or their representative, 64 were returned – a response rate of around 21%. No one who received a postal questionnaire elected to utilise the online questionnaire link instead.

A small number of stakeholders – 12 – responded online.

The table below displays the breakdown of returns by methodology:

|  |  |  |
| --- | --- | --- |
| Methodology | Number | % |
| Postal questionnaire (direct payment recipients) | 64 | 84% |
| Online questionnaire (stakeholders) | 12 | 16% |
| Total | 76 | 100% |

### How respondents to the consultation identified themselves

To help better understand the feedback provided, respondents were asked to choose an option from the table below to best describe the capacity in which they were responding to the consultation.

The table below shows that a majority of responses came from adults who receive care/ support (61%), or from a relative, carer of friend of the adult receiving care/ support (39%).

### Direct payment recipient responses

In addition, those who did not identify themselves as direct payment recipients (i.e. those defined as stakeholders) comprised:

* 58% who work for an organisation connected with giving care/ support
* 17% who are relatives/ carers/ friends of someone who receives care/ support
* 17% other (1 x direct payment recipient living in Lincolnshire; 1 x and financial representative)
* 8% who live in North East Lincolnshire but with no connection to giving care/ support

*These stakeholders are not depicted in the chart above*

A significant number of direct payments are received not by the adult, but by a representative on their behalf. It is clear from the responses to the paper consultations that there was some differences in approach to answering the questionnaire. Some answered the questionnaire entirely as, or as if they were, the adult with needs, some entirely as a representative (often selecting the relative, carer or friend option above), and others as a combination of the adult/ representative. Some identified themselves in multiple ways. It is therefore difficult to create an accurate profile of who gave what answers, for example, whether adults with needs were more or less favourably disposed to a proposal than other cohorts.

Similarly, whilst information regarding the Equality Act 2010’s protected characteristics was sought, it is not always clear whether the responses given relate to the adult with needs or their representative (relative, carer, friend etc). A breakdown of the responses given can be found at Appendix Two.

## Outcome of Consultation

### Headline Findings

Respondents to the consultation were asked to complete a number of general statements in their own words, and to say whether they agreed or disagreed with each of a number of questions. The chart below displays the overall net levels of agreement and disagreement captured for each question.

1. **Direct payment cards**

Amongst recipients, support was low for giving all direct payments using direct payment cards (24%). A a substantial number were opposed to pre-paid cards (51%), or unsure (25%). Alost two thirds of respondents (63%) reported that they have access to a device that they are confident in using to get online; a lower number stated that they use online banking (58%). These results are depicted below.

Amongst stakeholders, there was majority support for giving all direct payments using a direct payment (58%). Stakeholders indicated that in their experience, only around a third (33%) of recipients had access to a device that they would be confident in using to get online. Opinion was divided as to whether in their experience, recipients used internet banking (50% indicated that recipients did use online banking). These results are not depicted below.

1. **An agreement with organisations**

Amongst recipients, support was significant for a clear agreement with organisations who help recipients to manage direct payments (70%). A majority of those who responded were those who receive help from an organisation currently (63%). These results are depicted below.

Amongst stakeholders, support for a clear agreement with organisations who help recipients to manage direct payments was unanimous (100%).These results are not depicted in the following chart.

### Headline findings: chart showing direct payment recipient responses

In addition to postal and online responses, polls were conducted during the online event in which contributors (both were direct payment recipients on behalf of their cared for person) gave their opinions on the proposals. Opinion was equally divided on giving direct payments using direct payment cards (with one respondent agreeing, and one disagreeing). Regarding a clear agreement with organisations who help to manage direct payments, one respondent was in agreement, whilst the other was unsure. These responses are not depicted above.

### Findings in detail

#### **Section One: general experience of direct payments**

This section was designed to understand recipients’ experience of using direct payments, both positive and negative. This section largely focused on qualitative rather than quantitative responses.

Respondents were first asked to complete three sentences in their own words. A summary of the responses to each appears below.

**Question 1a) – the importance of a direct payment**

Respondents were asked to complete the following sentence – “my direct payment is important to me because.”Key themes from recipients included independence, flexibility, choice, and support for carers. These themes were echoed by stakeholders, although in addition, some referred to difficulties or their concerns with direct payments.

Recipient contributors said, in their own words:

* *It allows me greater independence away from my parents*
* *It allows me to remain living in my own home. Without it I would probably be in 24 hour care which [would] have devastating effect on my mental state*
* *Because it’s the only way I can live independently and choose the times when I need help*
* *We can employ our own choice of care assistants instead of who is available from a care agency*
* *My mum in law has dementia. We need a consistent person providing service who becomes familiar to my mum in law. A direct payment is the only real option to achieve this*
* *It enables my daughter to access different activities and enables me to work*
* *Without it I would have no life.*

*Stakeholders said, in their own words:*

* *From working with people who are in receipt of a direct payment the choice and control they have over their own care and support is far greater than if they were to have a commissioned service. Due to being able to employ their own PA's, relationships are formed and quality and continuity of care is often better. Having the knowledge that it is the same care staff working with you to meet needs is very important. Direct Payments can also be used creatively to meet needs and are more personalised*
* *I think a Direct Payment should only be given out as a last resort when there is no other way to fund the relevant care. I see no benefit to giving funds to people directly if there is another way. I hear too many stories of people abusing their payments and as a tax payer i don't want funding wasted in this way.*

**Question 1b) – the best thing about a direct payment**

Respondents were asked to complete the following sentence – “the best thing about having a direct payment is.”Key themes from recipients included enhanced wellbeing, socialisation, control, and continuity of care. These themes were echoed by stakeholders, although again some referred to difficulties with direct payments.

Recipient contributors said, in their own words:

* *Better quality of life*
* *I don't know how I would manage without it*
* *It is so helpful as I could not afford care myself. I try and make do with small number of hours*
* *I am in control of the carers I have and I receive continuity of care which is better for me and less stressful, I know when they are coming and who they are*
* *The freedom of choice. Being able to employ my own carers who due to consistency many agency is unable to provide, my carers understand how to assist me and have in-depth knowledge of myself and my different needs and complexities*
* *My mum in law wouldn’t be able to do anything she does now without the direct payment. When extra care is needed, for example to take her to appointments, we can flex up simply to accommodate it*
* *Having PAs to help me socialise which would otherwise place a nearly intolerable strain on my father who would find it extremely hard to take me and my twin sister to two different places at once.*

*Stakeholder contributors said, in their own words:*

* *Flexibility and more person centred care*
* *In certain circumstances it gives the individual the option to employ a carer of their choice, without going through a care agency. However the risk of abuse is high, especially when a family member is used as a carer. In my particular experience, it is an added stress having to manage the account.*

**Question 1c) – how direct payments could be improved**

Respondents were asked to complete the following sentence – “my direct payment would be better if: ”Key themes from respondents included the desire for direct payments to require less maintenance, provide greater flexibility and be paid at a higher rate. A significant number of the recipient comments reflected the view that direct payments work very well as they are, and “if not broken don’t fix it”. Stakeholder comments were often focused on the complexity and administrative burden, for staff and recipients, that direct payments can create.

Recipient contributors said, in their own words:

* *If it [paid] me the full amount of my care instead of only a fraction of it*
* *I could be allowed to spend my designated amount in my own way best suiting my needs*
* *less assessments and monitoring*
* *I have to prove how the direct payment money has been spent. The statement information I receive from you doesn’t give useful detail; it’s not transparent and changes aren’t explained*
* *I cannot think of any way it could be better than it is now. Receiving and management of DP is excellent as it is now for my daughter and myself*
* *If I knew my direct payment would always be there and that I would not lose my life I have with direct payments if it ever stopped that would be a fantastic reassurance*
* *Every time the service is "improved" we are charged more for less service. When the council itself ran the whole thing there were few glitches really good service.*

*Stakeholder contributors said in the own words:*

* *When direct payments go wrong, they often go very wrong and leads to complex issues which can be difficult to unpick and solve. They can be confusing to the service user or representative to manage and understand*
* *Having to keep less paperwork all year round. Less admin for managing a direct payment. More information provided about how to manage a direct payment. Clear expectations on what money can be spent on.*

**Question 1d) – help to manage direct payments**

Respondents were asked to confirm if they are helped to manage their direct payment by an organisation.

This question was not posed to stakeholders.

### Pie chart showing direct payment recipient responses.

**Direct payment recipients**

• 63% receive help from an organisation to manage their direct payment

• 31% do not receive any such help

• 6% were unsure.

*This question was not posed to stakeholders*

At the online event, one contributor confirmed that he received support from an organisation, and one confirmed that he did not receive any such support. This is not depicted above.

### Question 1e)

Respondents were asked to complete the following sentence – “the most important thing I get from the organisation that helps with my direct payment is”:….. Key themes from recipients reflected concerns that they would not have the time, ability or expertise to manage their direct payment without help. A significant number of the comments received related to the benefits of support with employment related matters such as recruiting and paying PAs (personal assistants). Similarly, stakeholder comments acknowledged the importance of support to manage the complexities of direct payments.

Recipient contributors said, in their own words:

* *Gets done properly. I have never done it before*
* *Assistance with advertising for interviewing carers*
* *My family and I would not be able to manage all that it entails sorting it all out*
* *My mum doesn't have to worry about paying the PAs and mum having to ring the timesheet in all the time as mum has a lot to do for me*
* *I GET TOTAL PEACE OF MIND about staff member wages being paid correctly on time and that their tax and national insurance contributions are made correctly and on time. The service provided gives me less stress as a carer*
* *Accessibility; they are always there and offer a prompt service. Having a one stop shop for payroll, employment/ HR advice etc is very helpful and good value for money.*

*Stakeholder contributors said, in their own words:*

* *The most important thing is taking the burden away of managing an account yourself and reducing the risk of abuse and not fulfilling your legal obligations as an employer. Something my friend had no idea about when he started his getting a Direct payment*
* *They offer employment law advice which can be complex without it. They assist with payroll queries, like tax and NI, this is complex and a requirement of being an employer. They help find a suitable PA by assisting with recruitment.*

### Section Two: direct payment cards

This section was designed to seek views on making direct payments using a direct payment card (also known as a pre-paid card). This means we would pay the adult’s personal budget on to the direct payment card. Adults who share the cost of meeting their social care needs with us would also pay money on to the card, for example, at their local post office or on the internet.

Direct payment cards work a bit like a simple bank account, and have an account number and a sort code. Direct payment recipients can use the card in a similar way to how they might use a credit card or debit card. Recipients can check how much money is on the direct payment card using the internet or with a service a bit like telephone banking.

Recipients can only use the direct payment card to pay for care. Payments for care can be made straight to anyone who has a bank account (by standing order or direct debit). The card can be used to pay for care until the money on it has run out. It will not let the recipient pay out more money than is on the card.

We can pay money to the direct payment card quickly, and stop it being used straight away if there is a problem, or the card is lost. We think direct payment cards will make it easier for us to see how direct payment money is being spent, and to make changes if we are worried that it isn’t being spent on meeting the needs in recipients’ support plans. We also think that cards will make direct payments easier for recipients to manage.

Our idea is to use direct payment cards from April 2021 instead of the way we make direct payments now. This means that from April, anyone who already has a direct payment, and anyone who might have one in future, will get a direct payment card.

Respondents were asked to say whether they agree with the idea, and to offer further information regarding whether they might be likely to have practical difficulties using direct payment cards.

**Question 2a):** **from April 2021, everyone who has a direct payment will be given a direct payment card. Do you agree with this idea?**

Respondents were asked to select yes, no or don’t know in response to this question.

### Pie chart showing direct payment recipient responses

### Direct payment recipients

• 51% disagreed with this idea

• 24% agreed with the idea

• 25% were unsure

*Stakeholders*

• 58% agreed

• 25% disagreed

During the online event, opinion was equally divided: one contributor agreed, and one did not agree, with this idea. This information is not depicted above.

Within the comments box at the rear of the consultation, and at the online event, some respondents offered detail on their concerns with direct payment cards. Key recipient themes evidenced some fear that a card would result in increased responsibility or would not be within their capability to use. Some recipients highlighted the practical inconvenience of having to transfer or recreate existing standing orders etc; others were anxious or unclear about what any change might mean for them. Stakeholders were more positive about direct payment cards; those who gave reasons for favouring such cards indicated that they should be easier to administer than the current system.

Recipient contributors said, in their own words:

* *Would like to leave it as it is as it works for me. Do not want to use online banking do not agree with it*
* *All of my direct payment is used to pay my PAs so I am unsure how a payment card will work with this*
* *My mum has to deal with all money issues. I do not think I would be able to use the card as I am not capable of handing those situations myself*
* *My direct payment goes straight into a separate bank account. From this I am learning to pay my invoices with my mums help. A card will not be suitable for me*
* *I wouldn't want to take responsibility for someone else's money I wouldn't be able to take the pressure mentally knowing I'm the one holding the card to this person's wages or holiday pay*
* *I’m concerned that I would have to move from the current direct payment bank account, and change direct debits which have been set up to pay for care*
* *My family look after everything for me. I don't like strangers and I don't want them knowing my business. I think a card would be more difficult for me as I can't see very well and I easily get confused. I don't like change and the current system works well for me thank you. My carer has filled this in for me as I cannot write. I am already worrying about this.*

*Stakeholder contributors said, in their own words:*

* *Pre Paid cards will reduce the administrative burden for all parties and move away from paper based solutions which will protect individuals and the public purse. Individuals will also be able to report issues and have things dealt with quickly and not have to wait for things to be posted etc. Payments will be relatively instant and it should keep services moving forward*
* *I think prepaid cards would be good as you can upload documents without having to keep them all year round. A prepaid card is not much different to how someone would currently manage their direct payments, you can still access the online banking system, make payments to providers or a PA and upload any documents. This can limit time admin time for the individual so they can concentrate on the care required rather than storing and keeping documents. It can also prevent mis-management early and in turn decrease debt for the individual that can cause distress and impact their mental health and wellbeing.*

**Question 2b): do you have a computer or another way to get online (for example a phone, tablet or iPad) that you are confident about using?**

Respondents were asked to select yes, no or don’t know in response to this question.

### Pie chart showing direct payment recipient responses

### Direct payment recipients

• 63% - have a device that they are confident in using to get online

• 36% reported no such access and/ or confidence

• 2% were unsure how to answer.

### Stakeholders

• 33% considered recipients have a device that they are confident in using to get online

• 33% consider recipients have no such access and/ or confidence

• 33% were unsure

*Not included in the pie chart showing direct payment recipient responses*

At the online event, both contributors confirmed that they have online access.

### Question 2c): do you use online banking (for example to make payments or pay bills)?

Respondents were asked to select yes, no or don’t know in response to this question.

### Pie chart showing direct payment recipient responses

### Direct payment recipients

• 58% use online banking

• 41% - do not use online banking

• 2% were unsure how to answer

### Stakeholders

• 50% considered recipients use online banking

• 33% considered recipients did not use online banking

• 17% were unsure

*Not included in the pie chart showing direct payment recipient responses*

At the online event, both contributors confirmed that they use online banking.

### Section three: help with managing direct payments

Managing a direct payment can be a lot of work. We need to check regularly that direct payments are being spent to meet the needs set out in the adult’s support plan. This means asking them to keep records and receipts for money spent, and provide them to us when asked.

If the direct payment is used to employ someone to meet needs – a personal assistant (PA), for example – this can need even more thought. Employing someone means the recipient has to think about paying wages and holiday pay, for example, and having the right insurance in case something goes wrong.

In North East Lincolnshire there are a number of organisations that recipients can approach for help to manage a direct payment. We have no direct contractual relationship with these organisations. As recipients are not always sure what help they need, at the moment this can mean that they are not clear what to expect, or what the help costs. If there are problems, we can’t get involved because we are not part of the agreement between the recipient and the organisation giving help.

Our idea is that from April 2021, we will have an agreement with organisations that help recipients to manage their direct payment, which is clear about what help people get and what it costs. We want to have an agreement so that all recipients get the same, clear, standard of help and we can support them if things go wrong with it.

If we have an agreement, it might mean that from April 2021, recipients get help from a different organisation than the one they get it from now, and have less choice of organisations than they do now.

Around 250 recipients currently receive help with their direct payment from an organisation.

### Question 3a): do you agree that it is a good idea for us to have a clear agreement with organisation(s) so that everyone who needs it gets consistent, good quality help?

Respondents were asked to select yes, no or don’t know in response to this question.

### Pie chart showing direct payment recipient responses

### Direct payment recipients

• 70% agreed with this idea

• 14% disagreed with the idea

• 16% were unsure how to answer.

### Stakeholders

• 100% agreed with this idea.

*Not included in the pie chart showing direct payment recipient responses*

At the online event, one contributor agreed with this proposal and one was unsure.

The responses to question 1d) indicate that a majority (63%) of recipient responses were from those that have help with their direct payment from an organisation. The support was greatly valued by most of them, with few negative comments. Whilst a sizeable majority of recipients were in favour of a clear agreement with organisations (70%), there were some concerns reflected in the narrative offered, and a number expressed preference for maintaining current arrangements. Stakeholders were unanimously in favour of a clear agreement with organisations

Recipient contributors said, in their own words:

* *In theory [I agree with the idea] but not if it reduces client choice. I’m happy with the current arrangements*
* *Money is paid direct to the third party provider. This gives visibility of spend; [the organisation I use] produce helpful and detailed monthly statements. The system works well and takes away a lot of pressure. I wouldn’t want to see a change*
* *When my daughter was first given a direct payment budget I did manage it myself however I found with my caring roll it was time consuming and a big responsibility to make sure all correct payments for care are being met. I personally do not do internet banking and would prefer [the organisation I use] to continue to be a third party account they are always great in dealing with any issues which arise, they provide excellent support*
* *The organisation [I used] were absolutely incompetent and caused more problems particularly in not paying due care to tax returns on time, wages slips late etc and I had to sort fines from the tax office myself. So I would never use them or similar again. full stop. It’s a good idea to have an agreement with organisations if wanted by individuals and the organisation is competent and keeps to the agreement and is monitored regularly*
* *The organisation I use do very little and it is up to carers to sort everything out. They do not give me relevant, timely information and do not answer emails when my carer sends them asking for information. They didn't get in touch with me during lockdown to update me regarding PA pay and hours etc until my focus worker contacted them. It isn't good enough. I don't feel they support me*
* *[The organisation I use] transfer my wage sheets onto headed paper one a month and charge £400 a year for this service.*

*Stakeholders contributors said, in their own words:*

* *The support providers are an important part of receiving a direct payment, they offer assistant and advise. Having a clear agreement should help with information sharing and working within relevant requirements for managing a direct payment*
* *There are lots of issues with the price and support provider contracts along with the price point for the service of a direct payment. More transparency and joined up approaches is needed to ensure service users receives the best quality service and correct information and advice so they can make informed decisions.*

### Additional comments

Towards the end of the questionnaire a free text box was provided which asked respondents to record any other comments they wanted to make. Many of these reflected the great value of direct payments to those that use them, coupled with much anxiety about the possibility of change. The sample below is indicative of the themes raised by recipients.

Recipient contributors said, in their own words:

* *My direct payments help me to get around, go out etc meet people which is good for me as I get very bored in the house and then can have issues with my behaviour which can get out of control*
* *For some people, the existing system works well. Everyone’s different. Don’t seek a one-size-fits-all solution. I can’t see why change is necessary*
* *I feel the payment card should be optional, as although it would not be beneficial for someone like themselves, it may be for others. “Don’t upset the applecart”. It would be too much paperwork and carers already have enough to do*
* *The current system I use is just perfect for myself and my daughter. Between social services and the agency that manages the financial aspects of providing support to myself (e.g. paying carer, sorting tax and NI payments for my daughter's personal carer). This help has certainly provided my daughter with independence and some control over her life. Direct payments has been an unstressful or nearly totally unstressful way of providing essential support to me and my daughter, in its current form. To change my current situation I am sure will be detrimental to me and my daughter. I feel the equilibrium will be totally disrupted for me and my family, if anything was to change*
* *I am filling in this form as a carer supporting a person in receipt of direct payments for the past 12 years. It is myself who deals with all his financial issues including direct payments. The support we have received for the last 12 years from [health and social care] has been very good. Without this support I'm sure the cost of his care would of been 10 fold and his health would of been damaged beyond repair. I use online banking making payments guided by [the organisation I use]. It is simple, it is monitored and checked on an annual basis. Everything is working well. I do not see any advantages hanging a system that is working very well.*
* *Some of this info sounds good. However why change something that is working? Are you making the people already doing a good job redundant? This can be very worrying for people like me who prefer continuity. Change is NOT always for the best*
* *I have employed personal assistants for my disabled son using direct payments because I am finding it harder to manage his care physically due to my age and my own health problems. I soon realised I had swapped physical exertion for mental exertion in running his direct payment account and being responsible for paying wages etc. Therefore anything you can do to cut down on the stress and workload would be very much appreciated. I can see the advantages for the council of introducing a direct payment card as you will have more control of the money but at present I cannot see that it will make much difference to what I have to do with the present bank account and payment of wages etc*
* *You will only do what you want. The organisations who check financial records need more training. I was told not to bother to keep receipts are they were no longer relevant, so I destroyed. Next year told oh these are needed. At nearly 84 years of age this is all very confusing.*

A full list of comments can be found in Appendix One. The appendix also includes the comments made by stakeholders.

### Summary

1. Direct payments are greatly valued by those who receive them and there is significant Recipient satisfaction with the current approach to direct payments
2. A majority of Recipients are unpersuaded of the benefits of delivering direct payments via direct payment cards
3. A majority are in favour of a clear agreement with organisations who support direct payment recipients. If changes are to be made, in respect of direct payment cards in particular, further work would be required to help Recipients understand how this would be of benefit to them.

## Appendix One: narrative contributions from respondents

All narrative contributions received appear below. This includes those shared

* via paper questionnaires
* via online online questionnaires (recipients and stakeholders)
* at the online consultation event, and
* via email.

Comments are replicated in their entirely, including those already featured in the preceding report. Occasionally some written comments were illegible and have not been included. Some small omissions have also been made to preserve anonymity.

### Question 1a: “my direct payment is important to me because…”

* allows me to get out with my PAs for walks and have a coffee. When able to, get respite care
* it allows me greater independence away from my parents
* flexibility in who and when support is provided
* it provides essential support to me as carer for my daughter who has special needs. Direct payments provides my daughter with support for meeting her needs and promotes her independence
* it helps me not have to take responsibility in having to pay my carers NI and tax its all done for me and I wouldn't want it any other way
* It pays for my PAs who I know I can rely on for my showering needs and they can take me to my clubs etc
* It gives me the flexibility of going out with carers
* without help I could not function properly
* I am my son's appointee. To be honest I would rather the money had been sent direct to his college [ ] so N/A
* It enables my daughter to access different activities and enables me to work
* It pays for PAs to help me stay at home
* I asked [ ] if he can remember what a direct payment is? He replied "me no know - no remember"
* Without it my care needs would mean I would have to go into a care home. I have had 7 heart ops [ ]. Half my bowels removed with cancer. Type 2 diabetes. Crumbling spine. Wheelchair user 100%. All cause great problems.
* Although my payment is well below my current needs it still allows me to live better than I can without
* So I can buy games and films and clothes and toiletries
* It pays for my PA who I know I can rely on for my showering needs and they take me out to clubs etc
* We can employ our own choice of care assistants instead of who is available from a care agency
* I need the help
* It helps to give me the say in who I want to care for me and that is helping me with keeping independent
* It helps me towards paying for my adult learning skills
* It gives me independence and means I can stay living in my own home
* It allows me to have PAs at home to help with my personal care
* It means I can maintain a fairly decent quality of life with the support of my carers
* It allows me to remain living in my own home. Without it I would probably be in 24 hour care which have devastating effect on my mental state
* because its the only way I can live independently and choose the times when I need help
* It helps me lead a better social life and also gives mum a break
* the direct payment my daughter receives helps my husband and I to have a little respite from our caring roll as we also look after elderly relatives
* I get the one off direct payment which I use to pay for my car tax. I am my husband's carer. I need to get shopping done so I can get back to him
* It allows me to access things e.g. [ ] that I wouldn't be able to afford
* I have a carer who takes me out and about. It gives me some independence
* I could not afford the type of care I need without it
* Pays for transport that I can keep contact with my husband
* It helps me to pay towards my care
* It gives us chance to do something different from everyday routine
* I can go out with my PA knowing that they will get paid
* without it I would have no life
* Enables me to have support
* As it help with my payment towards the group I go to
* It gives me freedom and peace of mind about my personal care
* I need money to live
* it gives me freedom to do things I wouldn't otherwise do
* It helps me develop my social skills and personal skills
* I like my carers and its company for me
* I can go to my clubs
* Allows me to keep my independence
* The direct payment is for my daughter who is mentally and physically incapacitated. Without the direct payment, her quality of life would deteriorate. It would cause her significant health problems if she didn’t have it
* The direct payment is for my mum in law; I manage it. My mum in law has dementia. We need a consistent person providing service who becomes familiar to my mum in law. A direct payment is the only real option to achieve this
* 18th
* It pays for my support workers
* It helps my son access the services he uses and needs to help him to learn new things and live in supported living
* My son would not be able to use the services he uses/ needs to help him learn new things. He will also be moving into supported living in the next few months. This wouldn't be possible otherwise
* I can get the care I need
* I'm able to employ a PA who can support all my needs both physically, socially and mentally
* It enables us as a family to have a much needed few hours break from a 24/7 routine of constant care
* [ ] cannot read or write so her mum [illegible] something for her
* It gives us a lot of freedom
* Direct payments allow me to stay independent in my own home with carers who know me best!! More freedom of choice!! A more personal service!!
* It allows us to get the appropriate care
* It allows me to do something I really want to do
* Without DP I would not be able to access social activities. I pay my PA through DPs
* I need help every day to prepare meals and bathe

### Question 1a): From your experience, why do you think direct payments are important to people who have them?

* Yes they need to have direct payments to the people who adult services (social)
* Yes
* Occasionally the individual may have a view that does not match practitioners view of what is important. This is based on the individuals view of what is important in life, bearing in mind everything in the uk and society is based on Christian belief, others may take a different view.
* Because they can choose or there family can choose who how and when they have carers to help
* When direct payments work, they give people more choice and flexibility about how the care they need is delivered. Things that I feel work well are being able to change the timings etc flexibly rather than having timed calls. They often mean a more person centred relationship with the PA (where these are used) which often means that the support can be better delivered and is more efficient and trusted by the service users. I have had direct payment work well where other commissioned options did not work.
* Direct payments are designed to give individuals more choice and control over their care budget, this in turn should enable the person to be more empowered in respect of their care.
* Direct payments give people more control and choice about how their care and support needs are met
* They have a choice of who they have to support them and consistency in their care
* I think a Direct Payment should only be given out as a last resort when there is no other way to fund the relevant care. I see no benefit to giving funds to people directly if there is another way. I hear too many stories of people abusing their payments and as a tax payer i don't want funding wasted in this way.
* From working with people who are in receipt of a direct payment the choice and control they have over their own care and support is far greater than if they were to have a commissioned service. Due to being able to employ their own PA's, relationships are formed and quality and continuity of care care is often better. Having the knowledge that it is the same care staff working with you to meet needs is very important. Direct Payments can also be used creatively to meet needs and are more personalised
* This gives more flexibility in accessing care at home and in the community
* Independent life

### Question 1b): “the best thing about having a direct payment is…”

* independence allowed as a result of the scheme
* being in control of how my daughter wishes to have care needs provided - e.g. who to employ - flexibility of timings and provisions of visits. Giving my daughter her independence and decision making and choice of how, when and whom is her personal carer, not dictated by an agency who provides her care
* It helps me not to have to take responsibility plus being on a IVA makes it easier on my as I don't have to have the responsibility of someone else's money
* having PAs to help me socialise which would otherwise place a nearly impossible strain on my father who would find it extremely difficult to take me and my twin sister to two different places at the same time
* It takes away the stress
* Financial help to pay for PAs/ carers
* I reminded [ ] that the direct payment money pays for his PAs, his placement at college [ ]. Also that it is paid via third party [ ]
* It is so helpful as I could not afford care myself. I try and make do with small number of hours.
* Better quality of life
* I don't know how I would manage without it
* Having PAs to help me socialise which would otherwise place a nearly intolerable strain on my father who would find it extremely hard to take me and my twin sister to two different places at once
* We can employ our own choice of care assistants instead of who is available from a care agency
* Helps me to go out etc. Without this 1 to 1 support I would not be able to go out
* I am in control of the carers I have and I receive continuity of care which is better for me and less stressful, I know when they are coming and who they are
* I am able to be with other special needs adults and have a life
* It helps with cabs and other general expenses that I have to use
* I have [ ] deal with my payments which is brilliant because all I have to do is check my PA's timesheets
* The freedom of choice. Being able to employ my own carers who due to consistency many agency is unable to provide, my carers understand how to assist me and have in-depth knowledge of myself and my different needs and complexities
* Allows me to deal with life with the help of the support
* Control and freedom of choice
* It helps me lead a better social life and also gives mum a break
* It gives my daughter the choice of what she wishes to do with the help of a PA. She also accesses special provision i.e. Linkage, Rock Foundation and Flourish which she loves and helps with independence and skills
* Helps me towards running my car so I can get shopping take husband to the doctors/ hospital
* Allows me to do things
* Being able to afford quality home care and support
* I know the money is there to pay for regular driver/ support worker
* I don’t have to worry about it
* Chance to be different for a change
* Having my two PAs
* Being able to get to places I like and feel safe
* I can choose my own care and not have an agency provide it for me!
* It is easy and it works as it is
* I can employ my daughter who has given up work to care for me
* It gives me friends and a social life I would not have otherwise
* It helps me develop my social skills and personal skills
* I cannot be with him 24/7
* I can get help with my everyday life. Help to prepared my lunch, sometimes dinners, getting out and about like going for a walk, going swimming, getting dressed
* It allows my daughter to have a full/ varied curriculum throughout the week. We can tailor solutions for her physical and mental requirements. The direct payment is used to pay for a PA. Life would otherwise be very restricted without the PA as we [parents] work. The PA has the skills to support and stimulate my daughter
* My mum in law wouldn’t be able to do anything she does now without the direct payment. When extra care is needed, for example to take her to appointments, we can flex up simply to accommodate it
* A direct payment gives more choice and control compared with commissioned services
* The PA helps coordinate my daughter’s care. Money is paid direct to the third party provider. This gives visibility of spend; [the organisation I use] produce helpful and detailed monthly statements. The system works well and takes away a lot of pressure. I wouldn’t want to see a change. If it’s not broken don’t fix it
* 18th
* He wouldn’t be able to access the services without it due to costs
* The cost of service isn't cheap and it helps him [my son] access what is needed
* I am able to be flexible around my care plan
* It enables us as a family to have a much needed few hours break from a 24/7 routine of constant care
* It help me to go to [ ] two day a week and see few friends
* The flexibility and greater control of my care needs when and how/ where I want it! Makes me feel more independent and safe
* It enables choices so we can get the care needed to suit individuals needs
* I can choose what I like
* My parents cant organise my activities which change from time to time
* The money is in a separate account which is used to pay my carers

### Question 1b): From the point of view of those who have direct payments, what do you think is the best thing about having a direct payment?

* yes they need money for help and support
* Direct payments would remove those who forget to pay for their care and avoid social care having to contact those with late or forgotten payments. This would reduce costs.
* Autonomy
* Choice
* Flexibility and more person centred care
* Hiring a PA is cheaper than having a commissioned service.. however [there are] many negatives
* a person receiving a direct payment can use it in the way that best meets their needs
* They have a choice of who they have to support them and consistency in their care
* In certain circumstances it gives the individual the option to employ a carer of their choice, without going through a care agency. However the risk of abuse is high, especially when a family member is used as a carer. In my particular experience, it is an added stress having to manage the account
* Having the knowledge that it is the same care staff working with you to meet needs is very important. Users like the control and freedom to choice their own care staff and form their own care team that works with them and family members
* You can employ and pick your own carer. There is more choice and control and more flexibility than a care agency providing care
* Maintaining independence so can live a life that is worth living

### Question 1c): “my direct payment would be better if…”

* N/a
* I cannot think of any way it could be better than it is now. Receiving and management of DP is excellent as it is now for my daughter and myself
* nothing changes - I don't want paperwork, bills or responsibility. It's too stressful
* Carers my care 24/7 as majority is done by sister unpaid. Especially night
* I asked [ ] if he is happy with how things are, he replied "me no at [my college placement], me no PA, this stupid virus!"
* Every time the service is "improved" we are charged more for less service. When the council itself ran the whole thing there were few glitches really good service
* I could be allowed to spend my designated amount in my own way best suiting my needs
* If it was more
* Paid to carers bank inside of cheques [instead?]
* It didn’t change
* I don't believe it could be better
* This is fine as it is and I have good support from the whole team in administering DP e.g. Council, Navigo, focus etc
* It remained the same
* less assessments and monitoring
* I could be more flexible with it
* We like it as it is. Excellent
* It if was done automatically
* If it me the full amount of my care instead of only a fraction of it
* I find it works as it is. If not broken don't fix it??
* I did not have to collect receipts for regular expenses. I knew clearly what expenses were allowed
* It was left as it is
* Fine as it is - no complaints
* If I knew my direct payment would always be there and that I would not lose my life I have with direct payments if it ever stopped that would be a fantastic reassurance
* I need the support
* I like my direct payment the way it is at the moment. Carers take care of paying my personal assistants and my mother don't have to worry about anything and she knows I am being well looked after when she is at work
* As administrator of the account, I have to prove how the direct payment money has been spent. The payments I receive into the direct payment account are varied. The statement information I receive from you doesn’t give useful detail; it’s not transparent and changes aren’t explained. The remittance advice gives a number/ value but no detail as to why; it’s just “the computer says that”
* 18th
* Just simply keep choices available
* Just simply keep choices available
* It is alright now
* Weekend pay for private carers rejected agency payments!
* Payment advice detailed how it has been calculated
* I’m happy as it is
* There was greater flexibility to use my DP for other events and activities as and when I want to do something. If it is not on my care plan at the moment I can’t do it

### Question 1c): How could direct payments be better for the people who have them?

* Vulnerable adult person
* Would ease the burden on those who have to make their own payments on time.
* Just me sure decision is based on their belief pattern not just what the system expects them to conform to
* Access to a wider range like a PA going on holiday with that person enabling them to broaden there horizons
* When direct payments go wrong, they often go very wrong and leads to complex issues which can be difficult to unpick and solve. They can be confusing to the service user or representative to manage and understand
* They are too restrictive. Support plans have to state what/where/how a direct payment is used, this goes against the ethos of what a direct payment should be. Direct payments are supposed to be handled by the individuals to be in control of their own care, not micro managed by us,. its frankly embarrassing and makes me wonder if [we] have a control problem
* I don't believe that direct payments could be a great deal better; when people understand how they work, they usually hugely benefit from accessing the direct payment
* I don’t know
* I very much like the idea of having a prepaid card instead of receiving funds into a personal bank account. Having read the proposals, this would surely reduce the risk of abuse and wasted funds and i expect people would get into less debt. It seems a no-brainer to me. The only people I can see having objections to this, are people likely to abuse their funding and perhaps people who don't understand what these cards are. The only freedom anyone would lose by having a card, is the freedom to waste their funding
* More knowledge and information about what is involved with being and Employer and more support around queries, payroll and timesheets etc
* Having to keep less paperwork all year round. Less admin for managing a direct payment. More information provided about how to manage a direct payment
* Lower threshold so more people have access or those already receiving them have more support

### Question 1e) “the most important thing I get from the organisation that helps with my direct payment is..”

* my family and I would not be able to manage all that it entails sorting it all out
* Payroll support
* payments are all sorted for me
* I GET TOTAL PEACE OF MIND about staff member wages being paid correctly on time and that their tax and national insurance contributions are made correctly and on time. The service provided gives me less stress as a carer
* the freedom to not worry about making payments and not to worry if there's a problem I can just ring and get it sorted
* it saves my father a lot of time and effort managing my help
* they do all paperwork req'd. I don't want the stress of sorting payments
* They sort the paperwork and admin so I don't have to, however I can contact them if I need to
* Everything is sorted without any stress to us regarding payment, NI contributions, pensions etc. I ([ ]'s mum) would have to sort it out as [ ] is unable to
* They work out PAs/ carers wages so we don't have to
* Please note that prior to the covid 19 pandemic, [ ] was happily attending [college]. He had a PA and he was making full use of all the opportunities that the direct payment provided to best meet his areas of individual need
* If [ ] are included here. they transfer my wage sheets onto headed paper one a month and charge £400 a year for this service
* I don't want a third party only to do wages
* It saves my father a lot of time and effort managing my help
* Assistance with advertising for interviewing carers. also the help with the financial side, carers wages, tax etc
* Gets done properly. I have never done it before
* I am poorly a lot of the time and would be able to sort out the PAs holidays, NA and tax if I had to do it myself
* The produce payslips, calculate tax, inform when tax is due. Very helpful service
* Payroll
* Helps with any problems that occurs
* Confidence that all my care costs and other contributions i.e. PA NI and HMRC are met correctly
* Consistent and reliable
* They help with my flat, cooking, relationships, mum and dad help me with banking
* My mum doesn't have to worry about paying the PAs and mum having to ring the timesheet in all the time as mum has a lot to do for me
* Not a lot!!!
* Managing tax, insurance wages
* I don't have to worry about paying my personal assistants and my mother gets peace of mind that everything is taking care of
* I don’t get help with the direct payment. The agency invoices for care each fortnight
* Accessibility; they are always there and offer a prompt service. They help with my daughter’s PA. Having a one stop shop for payroll, employment/ HR advice etc is very helpful and good value for money
* 18th
* I don't have to worry about tax and insurance and all the things you have to do to make sure your PA is paid on time
* Not having to worry about financial side of things for e.g. payroll
* They help with personal insurances and tax and insurance. I could not deal with the tax side and when I first set direct payments up it did seem complicated but once up and running has been smooth - I don't look forward to any change as I don't deal easily with any change I'm afraid
* Peace of mind
* Working within the employment laws and complying with taxes
* Takes all the worries away from my parents
* It works out pay and tax and provides pay slips, HMRC return dates and amounts and advice if needed

### Question 1e): In your experience, what is the most important thing about the help that people get from organisations that support them to manage their direct payments?

* Yes
* On time
* Reminding those about the importance of payments to be made on time
* Recognition of individuality
* The money side of it is taken care off eg tax etc It is not easy say been a parent with the added worry about doing the books
* Not having to manage payroll themselves
* Payroll support. Many people do not understand the complexities around this area.
* The individualised service. Good communication and support at the time when it is needed. Also, before COViD having a local accessible office was really important for clients
* Not having to worry about employment law, HMRC, wages, insurance etc
* The most important thing is taking the burden away of managing an account yourself and reducing the risk of abuse and not fulfilling your legal oblgiations as an employer. Something my friend had no idea about when he started his getting a Direct payment
* People like to be able to ask for help and have a relationship with staff managing their affairs to build confidence
* They offer employment law advice which can be complex without it. They assist with payroll queries, like tax and NI, this is complex and a requirement of being an employer. They help find a suitable PA by assisting with recruitment
* Reliable

### Anything else you want to tell us about direct payments?

* The current system I use is just perfect for myself and my daughter. Between social services and the agency that manages the financial aspects of providing support to myself (e.g. paying carer, sorting tax and NI payments for my daughter's personal carer). This help has certainly provided my daughter with independence and some control over her life. Direct payments has been an unstressful or nearly totally unstressful way of providing essential support to me and my daughter, in its current form. To change my current
* I wouldn't want to take responsibility for someone else's money I wouldn't be able to take the pressure mentally knowing I'm the one holding the card to this person's wages or holiday pay or their independence so DONT give me a card - of which you want to put in place nk April. I'm on a IVA so legally I can't look after someone else's money as I can't even look after mine. I wish my direct payments to stay as it already is
* Why change something that is working for most people
* Some of this info sounds good. However why change something that is working? Are you making the people already doing a good job redundant? This can be very worrying for people like me who prefer continuity. Change is NOT always for the best
* Unable to do anything myself. I live at home with my sister and have an annex adapted for my needs. I cannot cover 24/7 with my health budget so family do unpaid (especially overnight). My condition has and will deteriorate. I choke regularly and need suction. I attend two days in day care (Cromwell Road) but have to have trained PAs to accompany me. No residential care is suitable and I want (and will) stay at home with my family
* I said "[ ] the people who sort out the money to pay for your PAs/ college might want to change it a bit and maybe use a special card like a bank card, is that ok with you?" [ ] replied "that fine". [ ] does have access to PC and tablet but use these mainly for recreational and learning activities. He does have an online bank account As [ ]'s DWP appointee I have this responsibility. I asked [ ] "do you think it is good to get help for everyone who needs help?" [ ] replied "yes"
* You will only do what you want. Many of us are left with the unenviable position at present of not having our regular carers due to circumstances beyond our control (relative has suspected corona virus). We are not allowed to arrange cover at short notice and pay that person? As no provision whatsoever. Even private services required an interview and signed contract (impossible at short notice!). The organisations who check financial records need more training. I was told not to bother to keep receipts are they were no longer relevant, so I destroyed. Next year told oh these are needed. At nearly 84 years of age this is all very confusing. thank you
* I have employed personal assistants for my disabled son using direct payments because I am finding it harder to manage his care physically due to my age and my own health problems. I soon realised I had swapped physical exertion for mental exertion in running his direct payment account and being responsible for paying wages etc. Therefore anything you can do to cut down on the stress and workload would be very much appreciated. I can see the advantages for the council of introducing a direct payment card as you will have more control of the money but at present I cannot see that it will make much difference to what I have to do with the present bank account and payment of wages etc
* I have never been involved in this. My direct payments help me to get around, go out etc meet people which is good for me as I get very bored in the house and then can have issues with my behaviour which can get out of control
* My direct payment goes straight into a separate bank account. From this I am learning to pay my invoices with my mums help. A card will not be suitable for me
* My family look after everything for me. I don't like strangers and I don't want them knowing my business. I think a card would be more difficult for me as I can't see very well and I easily get confused. I don't like change and the current system works well for me thank you. My carer has filled this in for me as I cannot write. I am already worrying about this
* All of my direct payment is used to pay my PAs so I am unsure how a payment card will work with this
* The organisation [ ] were absolutely incompetent and caused more problems particularly in not paying due care to tax returns on time, wages slips late etc and I had to sort fines from the tax office myself. So I would never use them or similar again. full stop. Its a good idea to have an agreement with organisations if wanted by individuals and the organisation is competent and keeps to the agreement and is monitored regularly. The card could be a good idea expect that on page 6 you state that you can pay onto
* I am filling in this form as a carer supporting a person in receipt of direct payments for the past 12 years. It is myself who deals with all his financial issues including direct payments. the support we have received for the last 12 years from [health and social care] has been very good. Without this support I'm sure the cost of his care would of been 10 fold and his health would of been damaged beyond repair. I use online banking making payments guided by [ ]. It is simple, it is monitored and checked on an annual basis. Everything is working well. I do not see any advantages hanging a system that is working very well.
* When my daughter was first given a direct payment budget I did manage it myself however I found with my caring roll it was time consuming and a big responsibility to make sure all correct payments for care are being met. I personally do not do internet banking and would prefer [ ] to continue to be a third party account they are always great in dealing with any issues which arise, they provide excellent support
* I like to [the?] way the one off direct payments are able to be paid direct into my bank account. It is normally very quick in going into the bank. I am quite happy with the way this is done.
* Reducing number of organisations is [ illegible ] but a card is not useful to my people. Rest of comments are illegible
* The organisation I use do very little and it is up to carers to sort everything out. they do not give me relevant, timely information and do not answer emails when my carer sends them asking for information. they didn't get in touch with me during lockdown to update me regarding PA pay and hours etc until my focus worker contacted them. It isn't good enough. I don't feel they support me
* Would like to leave it as it is as it works for me. Do not want to use online banking do not agree with it.
* As appointee on behalf of [ ] I have filled this form in as he would not understand any of it
* I am more than happy with the way direct payments are working for me at the moment my mum has to deal with all money issues with me and she has a bank account specifically set up for my direct payments to go in to and a direct debit in place for the money to go straight to the organisation that I use, the account is not used for any other purpose and I feel happy and secure that I will have my friends and my social life continually using this method. I do not think I would be able to use the card as I am not capable of handling those situations myself
* For some people, the existing system works well. Everyone’s different. Don’t seek a one-size-fits-all solution. I can’t see why change is necessary
* If there’s already visibility and its working well, what’s the point [of change]? The objective of transparency is already achieved.
* I’m concerned that I would have to move from the current direct payment bank account, and change direct debits which have been set up to pay for care. I wouldn’t use the card for cash; I’d use the online aspects only
* I have online access but I’m concerned others may not have
* In theory [I agree with the idea of a contract with organisations] but not if it reduces client choice. I’m happy with the current arrangements
* 18th
* I think this is a great way forward. We set up a bank account many years ago and set up standing orders so this new way is similar its so easy
* Choices are king! I am looking after the direct payments. My son wouldn't have a clue and doesn't even know what happens behind the scenes. Direct payment card should be optional. I have set everything up perfectly so I would not be happy about this changing. All audits have always been spot on and no mistakes from me. The bank account set up is also separate from my own. This works well. I would not like this change. This is only good for the people who don't have a separate account set up or for those who need extra help by choice. In the past we had an organisation helping when he had a PA. This has now since changed and although it means a bit more work for me, I actually prefer it. Compared to an organisation doing the work I now know what it in the direct payment account unlike before and know what is available for him. I believe an agreement is a good idea but - a big but!- less choice in my experience is not a good thing. Some organisations start well and then it all goes wrong. I have seen this happen to many times so I believe that choices are king. An agreement should be made with any and all but not a small choice set. After all, agreement is an agreement and nothing should change that! I know you are trying to help but it feels like choices are being taken away which doesn't help me
* Choices are king! I am looking after the direct payments. My son wouldn't have a clue and doesn't even know what happens behind the scenes. Direct payment card should be optional. I have set everything up perfectly so I would not be happy about this changing. All audits have always been spot on and no mistakes from me. The bank account set up is also separate from my own. This works well. I would not like this change. This is only good for the people who don't have a separate account set up or for those who need extra help by choice. In the past we had an organisation helping when he had a PA. This has now since changed and although it means a bit more work for me, I actually prefer it. Compared to an organisation doing the work I now know what it in the direct payment account unlike before and know what is available for him. I believe an agreement is a good idea but - a big but!- less choice in my experience is not a good thing. Some organisations start well and then it all goes wrong. I have seen this happen to many times so I believe that choices are king. An agreement should be made with any and all but not a small choice set. After all, agreement is an agreement and nothing should change that! I know you are trying to help but it feels like choices are being taken away which doesn't help me
* I can see [it will be easier for people who don’t have a bank account to have cards] yes. How will you know how [the direct payment] being spent if there is no bank account? We already have a bank account with a card so use the card to access monies to pay for care so how will [direct payment cards] be different? I have written in this form as I’ve moved through it. I hope you can read my concerns in odd places in the questionnaire
* Why change anything as it works for us. As we have just change it over and it has been better for us as we do not have to worry about anything
* My main concerns about the propositions are - part of the ethos of direct payments is choice. This is being eroded, choice of banking is being removed and choice of management reduced. As I manage the direct payment on behalf of my mother in law this system adds additional workload on me. Not only will i need to keep the books as now to ensure sufficient funds are in the account I will also be expected to manage this new payment card account with uploads of invoices. My mother in law will still be audited annually to assess contributions so he proposed regime just moves more activities on to the people whose primary role is the correct care for their loved one
* Direct payment should continue to be paid into my bank so my parents can pay my PA and my day care provider. Having a payment card would complicate matters

### Anything else you want to tell us about direct payments?

* I think it's a great way of making payments on time and reducing costs. Some of those who receives social care are genuinely forgetful and direct debits would reduce the stress of constant reminders from organisations.
* I think using a second party always keeps it simple for the user and no money can be miss spent or miss used
* More control to people who have them, you keep mentioning support plans and yes, support plans need to be clear however, they should not set our specific reasons for a direct payment as they do now as this makes it NO DIFFERENT to a commissioned service, so why bother?
* I was surprised to see 360 people have a Direct Payment. I wonder how many of those people need one. Even where it is helpful, i am not sure there is a benefit of letting people manage it themselves. Prepaid cards seem a great idea. I'm all for it
* Direct payments are a great way of delivering care and support if used correctly. From a users perspective I imagine they find they fairly straightforward unless they get into an employment law issue such as redundancy or payroll queries however; for staff involved in the administration of direct payments it is very labor intensive. The systems are still very manual and processing of payment and auditing accounts is time consuming. There are lots of issues with the price and support provider contracts along with the price point for the service of a direct payment. More transparency and joined up approaches is needed to ensure service users receives the best quality service and correct information and advice so they can make informed decisions. Pre Paid cards will reduce the administrative burden for all parties and move away from paper based solutions which will protect individuals and the public purse. Individuals will also be able to report issues and have things dealt with quickly and not have to wait for things to be posted etc. Payments will be relatively instant and it should keep services moving forward.
* I think prepaid cards would be good as you can upload documents without having to keep them all year round. A prepaid card is not much different to how someone would currently manage their direct payments, you can still access the online banking system, make payments to providers or a PA and upload any documents. This can limit time admin time for the individual so they can concentrate on the care required rather than storing and keeping
* I think it's a great way of making payments on time and reducing costs. Some of those who receives social care are genuinely forgetful and direct debits would reduce the stress of constant reminders from organisations
* I think using a second party always keeps it simple for the user and no money can be miss spent or miss used

## Appendix Two: Equality Act 2010 and connected data

### Postcode

### Chart showing direct payment recipient postcodes

### Direct payment recipients (top two responses):

• DN35 25%

• DN34 13%

### Stakeholders

(top two responses):

• DN32 27%

• DN33 and DN36 18%

*Not included in the chart showing responses by postcode*

### Carer status

### Pie chart showing direct payment recipient responses

### Direct payment recipients

• 42% yes

• 58% no

### Stakeholders

• 27% yes

• 73% no

*Not included in the pie chart showing direct payment recipient responses*

### Age

### Line chart showing direct payment recipient responses

### Direct payment recipients

(top two responses):

• 45-64 36%

• 25-44 30%

### Stakeholders

(top response):

• 25-44 20%

*Not included in the chart showing direct payment recipient responses*

*(PNS = prefer not to say)*

### Gender

### Pie chart showing direct payment recipient responses

### Direct payment recipients

• 63% female

• 35% male

• 2% prefer not to say.

### Stakeholders

• 83% woman

• 17% prefer not to say

*Not included in the pie chart showing direct payment recipient responses*

### Race

### Bar chart showing direct payment recipient responses

### Direct payment recipients

• 97% white British

• 2% white Irish

• 2% other Asian or British Asian.

### Stakeholders

• 100% white British

*Not included in the chart showing direct payment recipient responses.*

### Disability

### Bar art showing direct payment recipient responses

### Direct payment recipients

• 24% learning disability

• 17% physical disability

• 14% wheelchair user

• 11% long standing illness/ condition

• 11% mental health condition

• 7% no disability

• 6% other

• 5% auditory sensory impairment.

• 5% visual sensory impairment

### Stakeholders

• 71% no disability

• 14% physical disability

• 7% wheelchair user

• 7% mental health condition

*Not included in the chart showing direct payment recipient responses.*

### Sexuality

### Pie chart showing direct payment recipient responses

### Direct payment recipient

• 95% straight

• 2% bisexual

• 4% other

### Stakeholders

• 91% straight

• 9% other

*Not included in the pie chart showing direct payment recipient responses*

### Relationship status

### Pie chart showing direct payment recipient responses

### Direct payment recipients

• 54% single

• 28% married

• 8% divorced

• 5% in a relationship (living together)

• 3% widowed

• 2% in a relationship (not living together)

### Stakeholders

• 42% single

• 50% married

• 8% divorced

*Not included in the pie chart showing direct payment recipient responses*

### Religion

### Pie chart showing direct payment recipient responses

### Direct payment recipients

• 76% Christian

• 17% no religion

• 5% other

• 2% Jewish.

### Stakeholders

• 50% Christian

• 42% no religion

• 8% other

*Not included in the pie chart showing direct payment recipient responses*

### Some individuals gave additional narrative to describe themselves

* My disability is one that you can see - and ones that can't be seen, which is where having your medical records updated all the time so that people know is best for all parties
* However hard we try, the workplace does not recognise adult with learning difficulties
* Suffer from Ataxia which is a brain wasting disease. It slowly stops everything from working. At present, can't speak, eat, incontinent, move my limbs. I do understand what is going on but can only communicate by nods. I choke regularly and need suction, cough assist, hoisting and specially adapted equipment. Staff have to be qualified for my care
* I am fortunate to have a very good social worker who actually believes what I tell her. This is a big bonus
* White, English and straight like most of this country
* Am 24 years old. Have cerebral palsy and dyspraxia (?), personality disorder, [unreadable], depression and seeing if I have autism
* Kabuki makeup syndrome
* 18th
* [name of provider] is forcing clients who are exempt to wear face coverings. They stopped both my sons from attending
* [name of provider] is forcing clients who are exempt to wear face coverings. They stopped both my sons from attending

### 

### Appendix Three: non-recipient/ stakeholders questionnaire (this appeared online only)

### Introduction

About 360 adults in North East Lincolnshire have a direct payment. Together, the Council, the CCG, Navigo and focus independent adult social work (“we”) are looking at how we give direct payments to people and how we help people who have a direct payment.

We are thinking about how we could improve the way we make direct payments, and the help that is given to people who have direct payments. This includes people with care needs and carers with support needs. Our ideas relate to adults who have a regular or one-off direct payment from social care, mental health or continuing healthcare.

We would like to know what you think about our ideas for change. The closing date is 31st December 2020. At the end of the consultation we will decide whether to make changes to direct payments. If we decide to make any changes, we will probably make the changes from April 2021.

Healthwatch is helping us with this consultation. Healthwatch is the independent champion for people who use health and care services. Healthwatch listens to what people like about services and what they feel could be better. Healthwatch has the power to make sure those running services hear peoples’ voices.

If you have any questions about this consultation please contact Healthwatch on 01472 361459 or [enquiries@healthwatchnortheastlincolnshire.co.uk](mailto:enquiries@healthwatchnortheastlincolnshire.co.uk)

### Section One: about direct payments

After a person has had a care assessment, we have to work out how much it costs to meet their eligible needs, for example what it costs for them to have care at home.

The cost of meeting the person’s needs is called a ‘personal budget’ or ‘personal health budget’ because it is an amount that is personal to them and their needs. Some people have to contribute to the cost of meeting their social care needs. Health care is free.

When we pay the person’s personal budget or personal health budget to them as a direct payment, they use the money to pay for the costs of meeting their care (along with any money they contribute). Their support plan sets out the care they need.

Direct payments can be made to the person with needs or to someone on their behalf. The person receiving the direct payment might get help to manage it from an organisation.

At the moment about 360 people get a regular or one off direct payment. We are asking all of them for their views, and we would also be interested in hearing wider views from health and care staff, the voluntary sector or members of the public (for example).

General questions about direct payments

1. From your experience, why do you think direct payments are important to people who have them? *Free text box*
2. From the point of view of those who have direct payments, what do you think is the best thing about having a direct payment? *Free text box*
3. How could direct payments be better for the people who have them? *Free text box*
4. In your experience, what is the most important thing about the help that people get from organisations that support them to manage their direct payments? *Free text box*

### Section Two: our idea on direct payment cards

Our idea is to make direct payments using a direct payment card. This means we would pay the person’s personal budget or personal health budget on to the direct payment card. If the person makes a contribution to the costs of meeting their social care needs, they will also pay money onto the card. For example, payments on to the card could be made at a local post office or on the internet.

We think that a direct payment card will be easy for people to use because it works a bit like a simple bank account. It has an account number and a sort code. A direct payment card can be used in a similar way to a credit or debit card. People can check how much money is on the direct payment card using the internet or with a service a bit like telephone banking.

People can use the direct payment card to pay for the cost of their care until the money on it has run out. It can only be used to pay for care. Payments for care can be made to anyone who has a bank account (by standing order or direct debit).

The direct payment card doesn’t let people borrow money, so it won’t let people pay out more money than is on the card. We can pay money on to the card quickly. We can also stop the card being used straight away if there is a problem, or the card is lost.

We think there are lots of reasons why using direct payment cards could be a good idea, including:

1. It will be easier for people, especially if they don’t have a bank account
2. It will be easier for us to see how people’s direct payment money is being spent, and to make changes if we are worried that is isn’t being spent on meeting the person’s needs in their support plan.

Our idea is to use direct payment cards from April 2021 instead of the way we make payments now. This means that from April, anyone who already has a direct payment, and anyone who might have one in future, will get a direct payment card.

Questions about direct payment cards

1. From April 2021, everyone who has a direct payment will be given a direct payment card. Do you agree with this idea? *Y/ N/ DK*
2. In your experience (if relevant), do people receiving direct payments have a computer or another way of getting online (for example a phone, tablet or iPad) that they are confident about using? *Y/ N/ DK*
3. In your experience (if relevant), do people receiving direct payments use online banking? *Y/ N/ DK?*

### Section three: our idea on help with managing direct payments

Managing a direct payment can be a lot of work. We need to check regularly that direct payments are being spent to meet the needs set out in the person’s support plan. This means asking the person to keep records for money spent, and share them with us when asked to do so.

If a direct payment is used to employ someone – a personal assistant, for example – this can need even more thought. Employing someone means the person needs to think about paying wages and holiday pay, for example, and having the right insurance in case something goes wrong.

In North East Lincolnshire there are a number of organisations that offer help to manage a direct payment. People with a direct payment ask one of the organisations to help them. Because people are not always sure what help they need, at the moment this can mean that:

* They are not clear what to expect
* They are not clear what the help costs.

If things go wrong with the help, at the moment we can’t get involved because we are not part of the agreement between the person and the organisation giving help.

Our idea is that from April 2021, we will have an agreement with organisations that help people to manage their direct payment, which is clear about what help people get and what it costs. We want to have an agreement so that:

* Even if people get different amounts of help they will get the same standard of help, at an agreed cost
* If something goes wrong with the help, we can work with the organisations to put things right.

But if we have an agreement, it might mean that from April 2021:

* People get help from a different organisation than they do now
* People have less choice of organisations than they do now.

At the moment about 250 people get help with their direct payment from an organisation.

Question about help with managing a direct payment

1. Do you agree that it is a good idea for us to have a clear agreement with organisation(s) so that everyone who needs it gets consistent, good quality help? *Y/ N/ DK*

Is there anything else you would like to tell us about direct payments? *Free text box*

### What happens next?

At the end of the consultation, we will write a report that shows what people have said. We will use the report to make a decision about direct payments. We will make a decision early in 2021. We will put the decision on this website.

We hope to make changes to how we make direct payments, and the way we work with organisations who help with direct payments, from April 2021. Please tell us your views by 31st December 2020.

If you want help to contribute to the consultation or you want to ask questions about it, contact Healthwatch on 01472 361459 or [enquiries@healtwatchnortheastlincolnshire.co.uk](mailto:enquiries@healtwatchnortheastlincolnshire.co.uk)

### About you/ Equality Act (EQA) data

*(not replicated in full in this appendix; the EQA data can be viewed in full in appendix 4 using the link provided)*

Thank you for completing this consultation

## Appendix Four: recipient consultation questionnaire (*postal*)

The following document has issues with accessibility as it was a printed postal questionnaire (it was sent in the post to people who completed it by hand and returned it. Other accessible ways of contributing were provided). You can view a copy of the consultation document here: <https://www.northeastlincolnshireccg.nhs.uk/data/uploads/direct-payments-documents/direct-payment-consultation-final-for-website.docx>