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Personal Health Budgets

Information for patients, relatives and carers



This leaflet can be provided in other formats
or languages on request

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What is a 'personal health budget'?

In Somerset we offer personal health budgets to people, living in their own homes who are eligible for fully funded NHS Continuing Healthcare.

A personal health budget is an amount of money, paid to you by the NHS, to support your identified healthcare and wellbeing needs. You will be able to use your budget for a range of things to help you meet your goals, including therapies and personal care.

What is the aim of a personal health budget?

The aim of a personal health budget is to give people more choice and control over the money spent on meeting their health and wellbeing needs, in order to help meet their needs in a way that is most appropriate for them. They are one way of helping people to be more involved in discussions and decisions about their care.

What does this mean for me?

People who are eligible for NHS Continuing Healthcare can choose to have a personal health budget. This will give you more say over how your health and wellbeing needs are met.

If you are receiving direct payments through Social Services, you may be able to transfer to personal health budgets with minimal or no disruption to your current arrangements if you become eligible for NHS Continuing Healthcare.

- Household bills, household sundry and food bills
- Repair bills not related to prescribed health equipment
- Anything illegal
- To pay for support or care provided by a close relative living at the same address as the patient, unless in exceptional circumstances

The money cannot be used to part fund treatments alongside a patient's own resources. If a patient, for any reason wanted to purchase additional care privately, this would need to take place separately. However, a patient could use their personal health budget to purchase private services that meet their personal health outcomes, such as a private physiotherapist.

Somerset CCG is entitled to recover any money that is not spent appropriately or has been accrued over time.

Your Continuing Healthcare representative will be able to help you if you have any queries about personal health budgets.

What can your personal health budget be spent on?

Personal Care: this can be provided by a care agency or by employing someone to care for you.

Therapy: agreed therapy that a NHS health professional has recommended as part of a health assessment, will be beneficial to your health and wellbeing.

Respite: as agreed with your Continuing Healthcare representative.

What can't you spend your personal health budget on?

The aim of personal health budgets is to allow you real flexibility in planning the care that you need, however, there are a number of things that you cannot spend your personal health budget on:

- Emergency or acute services, which are already provided by the NHS to everyone in the country without charge
- The vast majority of primary healthcare services (including visits and assessments), as GP's provide a comprehensive registration based service which is free at the point of access
- Gambling, tobacco, alcohol
- Debt repayment
- Flights and hotel bills that are family holiday related as distinct from respite breaks

Will a personal health budget affect my benefits?

Personal health budgets are not a welfare benefit and are not a part of the benefits system. This means they are not taken into account when calculating your benefits entitlement. Personal health budgets are given in order to meet health needs, and cannot be spent for any other reason.

Somerset Clinical Commissioning Group (Somerset CCG) has a duty to ensure that payments are being used for what has been agreed with your Continuing Healthcare representative and documented in your care plan, all spend will be subject to financial audit by the CCG.

Whatever form of personal health budget is used, the assessment and review process for continuing healthcare remains as it is now.

Personal health budgets can be changed by Somerset CCG if care needs change and more or less funds are required to meet your needs. Any alteration in a personal health budget will follow a review of your health needs.

How can a personal health budget be managed?

A personal health budget is based upon a personalised care and support plan. This plan sets out someone's health and wellbeing needs, the outcomes they wish to achieve, the amount of money available and how it will be spent. Once the plan and budget has been agreed, the money in a personal health budget can be managed in three ways or a combination of these:

A Notional Budget - No money changes hands. The personal health budget holder knows how much money is available for their assessed needs and decides together with their NHS team how to spend that money. The NHS is then responsible for holding the money and arranging the agreed care and support.

Third Party Arrangements - An organisation independent of both the person and the NHS commissioner (for example an independent user trust or a voluntary organisation) is responsible for and holds the money on the person's behalf. They then work in partnership with the person and their family to ensure the care they arrange and pay for with the budget meets the agreed outcomes in the care plan.

Direct Payments - The personal health budget holder or their representative has the budget and takes responsibility for purchasing the care and support that you and your Continuing Healthcare representative agree you need. Budget holders must show what the money has been spent on. Direct payments can be managed by a Support and Brokerage Service. NHS Somerset CCG commissions this support for those individuals who feel they may need more direct help to manage their personal health budget. The organisation holds the money in a dedicated account, pays invoices and assists with employment matters such as payroll, pension and PAYE. This is known as a managed account.

How does it work?

The personal health budget is there to support you to continue to have your health and personal care needs met at home with the unpaid care of family, care from an agency or by employing your own care staff. The budget allows for periods of respite care to give your

unpaid family or carer(s) a break. Respite can be agreed as and when required as part of a health needs review.

There are three key steps to meeting health and wellbeing needs under the personal health budget system:

Step 1 - Assessment of care needs

Your Continuing Healthcare representative will ask questions to find out what you need for your health and wellbeing. This is written into an Agreed Health Outcome Plan, which both you and your Continuing Healthcare representative must sign. Your Continuing Healthcare representative will look at your care needs with you and how these needs can be met within the care community. Through this process the needs which you would like to be met through a personal health budget can be identified.

Step 2 - Budget allocation

Your assessed care needs will then be used to calculate an 'indicative budget'. An indicative budget is an estimate of the money needed to meet your health and wellbeing needs.

Step 3 - Support planning and using the budget

Your Continuing Healthcare representative will then work with you and those who support you to decide how best to use the personal health budget to meet your needs. This will include your choice of how care is delivered. This information will be shared with the Support and Brokerage Service who will arrange to visit you to support you to make and cost a Support and Budget Plan.