

# Frequently Asked Questions about Personal Health Budgets

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## What is a personal health budget PHB?

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A personal health budget is an amount of money to support a person's assessed health and wellbeing needs, planned and agreed between the person and their local NHS team. Our vision for personal health budgets is to enable people who frequently use health services to have greater choice, flexibility and control over the health care and support they receive.

You don't have to change the healthcare and support that is working well for you but if there is something that isn't working, or maybe could be delivered in a different way this is a chance to change it.

The budget you receive will be based on your Personal Support Plan, written with support from the healthcare team who knows you well. This plan includes your health and wellbeing goals, sets out your plan for reaching these goals and how you will keep healthy and safe.

The aim is to give you as much control over your healthcare as you wish, to make you feel better, increase your confidence and help you to manage your own condition.

## Am I eligible for a PHB?

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To be eligible for a workable PHB you need to be someone who is using community health and hospital services a lot with needs such as:

- Continuing Health Care
- Children with an Education Health and Care Plan
- Long-term rehabilitation needs
- Long-term health conditions
- Long-term mental health needs
- Learning Disability or Autism and Mental Health needs

# Must I have a personal health budget?

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You don't have to change the healthcare and support that is working well for you but if there is something that isn't working, or maybe could be delivered in a different way this is a chance to change it.

## Where does the money come from?

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There is no additional money but the same money used in new ways. The funding comes from the funding that the Clinical Commissioning Group receives to purchase healthcare for people living in Bury.

## How Is My Budget Worked Out and How Much Money Will I Have?

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Everyone's needs and situations are different and your PHB will be worked out for you. Therefore everyone's personal health budget is likely to be different.

You will be given an indicative budget based on your recent use of health services. With this information you will be able to make an informed decision about whether or not a Personal Health Budget is right for you.

You can then develop your Personal Support Plan based on the amount available. The final amount will be agreed by the PHB Panel.

## How do I receive and manage my budget?

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There are a variety of ways you can receive the money for your PHB

### **Direct Payment**

A direct payment is where the CCG pays money directly to you or your representative. The money will be paid into a bank account set up for this purpose every month. If you have received a direct payment from social care in the past then it may be possible to use the same bank account for your personal health budget. You or your representative will buy and manage your chosen services and will be accountable for showing what the money has been spent on. It is therefore very important to record all your income and expenditure and to keep receipts, invoices and bank statements.

If you choose to employ your own Personal Assistants, you or your representative would be their legal employer. You would need to ensure that you follow employment law, ensure that your Personal Assistants are safe, paid correctly, fully trained and regularly supervised.

Why choose a direct payment?

- With a direct payment you have control over how much you pay for each service you receive;
- You can employ and pay your own Personal Assistants directly;
- Payroll services can be operated by you or your representative, or purchased from a payroll provider;
- You have complete control of all the money coming in and going out of your personal health budget account, according to the rules in the direct payment agreement, to purchase anything that has been agreed in your support plan;
- If you would like help managing your direct payment you can ask for a Managed Account where a provider will manage all the money for you, but you remain the legal employer of any Personal Assistants you hire. The provider will monitor your account and check receipts, invoices and bank statements for you. You will still have control over how the budget is used. The provider will prepare a statement of income and expenditure at your request so that you can see how much money is available in your personal health budget and how it is being spent. You will still be responsible as the employer for any Personal Assistants.
- A Direct Payment Advisor will support you along the way.

### **Notional Budget**

You have more say over what care you get but no money changes hands. You do not have any responsibility for paying for the services you receive. You do not have to manage a bank account, keep invoices or receipts.

You will not be able to employ anyone directly to provide you with care and support; however you can have care provided by a care agency.

All care and support services provided to you outlined in your Personal Support Plan will be purchased by the Clinical Commissioning Group (CCG) on your behalf.

### **Third Party Budget**

A third party budget service is where the CCG pays money directly to an organisation who will manage all financial aspects of your personal health budget and directly employ and manage any Personal Assistants that you choose to work with you on your behalf.

They will receive your personal health budget and make payments on your behalf in a way that has been agreed in your support plan.

The third party will have responsibility for making sure that the invoices are paid on time, that anyone you choose to employ is paid correctly, that their tax and national insurance is paid, that they are trained and appropriately supervised, and will be responsible for handling any human resources issues that may come up with your Personal Assistants.

Why choose a third party budget?

- With a third party budget you will not have the responsibility for sourcing or paying for the services you receive;

- You can still choose your own Personal Assistants but the third party will employ and manage them on your behalf;
- The third party will monitor your account and check receipts, invoices and bank statements for you;
- You will still have control over how the budget is used;
- The third party will work with the CCG to ensure that the money in your budget is being spent appropriately.

The organisation will prepare a statement of income and expenditure at your request so that you can see how much money is available in your personal health budget and how it is being spent.

## How can I use my Personal Health Budget?

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The budget must be spent on meeting the health goals agreed within your Personal Support Plan. You can choose how to use your budget to get the support that is right for you, from the right person, in the right place and at the right time. This may include

- A carer chosen by you who may come from an agency or be employed directly by you.
- Therapy or counselling
- Health equipment
- Ways of improving your lifestyle, such as gym membership or leisure activities.
- Or other ideas that help you reach you goals.

## What Can't You Spend Your Personal Health Budget On?

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The following are not currently available as part of a PHB:-

- GP Services
- Unplanned emergency care
- Surgical procedures
- Vaccination and immunisations
- Screening, health checks and child measurement
- Medication
- Prescription charges or other NHS charges
- Anything illegal
- Alcohol, tobacco, debt repayment

Everything else could be in...but it must be linked to health goals as agreed in your Personal Support Plan.

## Will I be asked to show what I have spent the money on?

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Yes, you are required to keep records of all expenditure. Your personal health budget bank account will be audited. Personal health budgets can only be used as agreed in your personal health budget support plan. The records will be subject to audit arrangements by Tameside and Glossop CCG.

## What Happens If I Underspend or Overspend My Budget If I Am Receiving a Direct Payment?

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Your PHB balance will be regularly audited. If you have underspent your budget, we will work with you to understand why as we want to ensure that you are getting all the care and support that you need. If, for example, you can demonstrate that you have made savings in the provision for your care and you are saving that underspend for something agreed in your support plan, you may be able to keep that surplus in your budget for use later in the year. If you have no agreed plans for, or no need of any surplus that has built up, the money will be returned to the CCG.

If you deliberately misuse your personal health budget the CCG may stop your direct payment and instead commission your care directly or use a third party arrangement.

Just like managing your household finances you will need to work within the amount agreed as your personal health budget. As your plan will be based on the amount of funding available, unless your needs change, you should have sufficient funds within the budget to cover your needs. Contingency funding may be included in your budget in case of emergencies (for example, if your informal carer is unable to look after you for a period of time and you need to employ additional help).

There is always someone to talk to if you have concerns that your budget isn't going to be enough to pay for your care. If your budget is insufficient because your health needs have changed you need to let the Personal Health Budget coordinator know as soon as possible and they will work with you on any necessary revisions to your support plan or budget. You should let the CCG know as soon as possible if your circumstances change.

## Can I Have a Personal Health Budget and a Personal Budget?

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Personal Health Budgets will be provided to meet your health goals. Where you are in receipt of a social care personal budget or are a child with an Education Health and Care Plan we will aim to combine the funding, where possible.

## Can I employ a family member?

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You can't normally use your personal health budget to make direct payments to close family members (see below for a definition of a close family member) or anyone living in the same house. However you may be able to do so if the CCG is satisfied that a service from that person is necessary to meet the needs of the person receiving care, or to promote the welfare of a child for whom direct payments are being made. The CCG will make these judgements on a case by case basis.

Who is a close family member?

A person's close family members are described in the regulations as:

- a) The spouse or civil partner of the person receiving care;
- b) Someone who lives with the person as if their spouse or civil partner;
- c) Their parent or parent-in-law;
- d) Their son or daughter;
- e) Son-in-law or daughter-in-law;
- f) Stepson or stepdaughter;
- g) Brother or sister,
- h) Aunt or uncle;
- i) Grandparent; or
- j) The spouse or civil partners of c) – i), or someone who lives with them as if their spouse or civil partner.

These restrictions are not intended to prevent people from using their direct payments to employ a live-in Personal Assistant, provided that person is not someone who would usually be excluded by the regulations. The restriction applies where the relationship between the two people is primarily personal rather than contractual, for example if the people concerned would be living together in any case.

# How do I apply?

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## **Step 1**

Submit an Expression of Interest form. This asks for information about your health and use of healthcare. You are also asked to give consent for the CCG to work out your indicative health budget. When you have this you can then decide whether or not a PHB is right for you.

## **Step 2**

Submit a Personal Support Plan. This is a detailed plan which describes your health needs, your health goals and plan for achieving them. All support plans will require support from a health professional who knows you well and is in agreement that the plan will support the achievement of your health goals – this is likely to be a Care Coordinator/ Keyworker/Lead Professional or perhaps your GP or Consultant.

When agreed your support plan is the agreement between you and the Clinical Commissioning Group about how you will use your personal health budget to meet your agreed health and wellbeing outcomes (goals).

You can choose to create your support plan:

- On your own (we would recommend talking your plan through with one or more people who know you well);
- With help from your healthcare team
- With help from a Support Broker – these are organisations the CCG has trained to help people write their own plan.

## **Step 3**

The Personal Health Budget Panel will consider your plan and let you know the outcome.

This could be one of the following:-

- Your plan is agreed
- More information is required
- Your plan is not agreed – you will be given feedback about why and have the right to appeal

## **Step 4**

Agree a contract and set up your budget. The CCG team will work with you to finalise your plan and arrange the financial transfers. When this is done you will be in charge of investing your PHB as agreed in your plan.

## **Step 5**

Monitoring and evaluation. At regular intervals you, and the healthcare team working with you, will be asked to provide information on your health outcomes in order to measure how well your PHB is working for you. This will help us learn about what works well and what does not. You will also be required to submit information on all expenditure as per your agreed plan.

## What Happens if My Plan Isn't Working for Me or My Needs Change?

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Your plan should be a living document, and will change as your needs change. If you feel that your plan isn't working for you as well as you'd like, or your needs change, please let your healthcare team or the Personal Health Budget Coordinator know as soon as possible. They will discuss how your budget and plan may be changed to meet your assessed needs and agreed health and wellbeing outcomes.

## What Happens If I Go Into Hospital?

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Your hospital care will not be paid for out of your personal health budget as it is a service that you would normally receive. You must let the Personal Health Budget Coordinator know if you have to go into hospital for any length of time. At your usual audit, any money you haven't spent as a result from your stay in hospital will be discussed and the extra may be reclaimed by the CCG.

## How Long Will It Take to Put a Personal Health Budget in Place?

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We aim to make a decision about your personal health budget in place within 8 to 12 weeks, however we hope to be able to speed up the process when PHBs are established within the CCG.

## Does My Personal Health Budget Have to Fund My Equipment?

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Usually, any equipment that you are assessed as needing will be funded by existing equipment arrangements and will therefore not be funded by your personal health budget. If usual funding streams are not able to provide the equipment you need an exception will be considered and may consider it appropriate to use funds from within your personal health budget for that piece of equipment. These decisions will be made on a case by case basis according to your individual needs and circumstances.



# Can I Have a Product List and How Much Do Services Cost?

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We will not produce a list of all services available that you will be able to spend your personal health budget on as it will be difficult to provide a comprehensive list. Different products and services will be appropriate for different people according to their individual needs. However, through the support planning process, we will be able to provide help and advice about the services that are available to you and their costs.

We will be able to provide information on organisations who can help you develop your personal support plan.

## Where can I get more information?

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Department of Health Website: [www.dh.gov.uk/personalhealthbudgets](http://www.dh.gov.uk/personalhealthbudgets)