The shifting sands
of support planning

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Abstract

Purpose – The aim of this paper is to present a critical analysis of the current issues about support planning within personal budgets (PBs) for disabled and older people.

Design/methodology/approach – The paper is based on data from a round of professional workshops in five local authorities, which represented the first stage of a research study about support planning. Focus group discussions were held with participants from voluntary sector organisations (VSOs), as well as social services participants, and the paper is based on a thematic analysis of those discussions.

Findings – While there was considerable agreement about the desired outcomes for personal budget users, and the ingredients of good support planning, some major concerns were voiced about current constraints. Budgetary cuts were felt to impinge negatively on support planning, and conflicts were identified for social services between the facilitation of PB users' choices, and the need to keep budgets limited. Support planning was often being re-colonised by social services, and VSOs felt that their own role was being curtailed. Some suggestions were made about equalising the power relationships between social services, VSOs and PB users themselves.

Originality/value – These workshops represent five local authority areas which volunteered to take part in research, building on existing good practices in support for PB users. The obstacles they identified are likely to be very general ones, and need to be addressed by strategic solutions at national and local level.

Keywords Support planning, Disability, Voluntary sector, Personal budgets, User-led organizations, Disabilities, Voluntary organizations, Budgets

Paper type Research paper

Introduction

If the primary goal of a personal budget (PB) is to offer "choice and control" to disabled and older people, then the defining stage of a PB process is that of support planning (Sowerby, 2010; Dowson and Greig, 2009). A support plan belongs to the PB user and foregrounds their own agency in taking control in order to purchase or commission the support they need. However, as we have argued elsewhere, in practice the process can be quite fluid and blurred (Williams *et al.*, 2013; also Haswell *et al.*, 2009), and this is acknowledged in some respects in the Department of Health (DH, 2008) guidance. The DH continues to emphasise the multiplicity of

ways in which a support plan can be facilitated, by using community and personal resources; statutory services should be:

> […] working with local voluntary and/or community organisations and experts in user-led organisations, including carer-led organisations, to provide support, advocacy and brokerage services (Department of Health (DH), 2010a, p. 18: 4.8).

It is that multi-agency nature of support planning which leads to questions about integrated working. Not only is an integrated approach required from different funding streams contributing to a budget (Glendinning *et al.*, 2011), but also a coordinated partnership approach is required within the support planning process itself. The primary partners considered in the current paper are the service user (or their family member) who is the "driver" for planning; voluntary sector support, including user-led organisations (ULOs); statutory sector (SS) organisations, primarily social services, but also including specialist health trusts. As Sang (2009) put it:

> Truly integrated care is personalised care, and it is now clear that such integration extends beyond multi-disciplinary team working to a working partnership with carers and citizens themselves: social co-productions (Sang, 2009, p. 35).

For some groups of PB users, whose need for support arises solely from a physical or sensory impairment, the policy notions of "choice and control" are perhaps minimally problematic; with some small guidance, they can in fact write their own support plan and work out what they need. However, in our previous research (Williams and Porter, 2011) it was found that only a small minority of the sample of 80 PB users actually wrote their own support plan without assistance. The greater number did require some facilitation and guidance, and the differentiation of that facilitation role is explored in Williams *et al.* (2013).

It seems that social workers and statutory care managers are having some difficulties in framing their role within the new climate of personalisation (Lymbery, 2012) and that those using services have some strong views about the redistribution of power that is necessary (Leece and Leece, 2011). The PB system should provide drivers towards greater diversification and more "innovation" in social services commissioning (Carr, 2011). However, social workers and care managers, as has been recently seen by the Community Care (2012) survey are still by far the most frequent facilitators of support plans with and for the PB users they serve. The survey revealed that 68 per cent of support plans were written by care managers, rather than by independent brokers or by service users themselves. Evidence from Scotland backs this up. Three pilot sites for self-directed support in Scotland yielded disappointing results, and Mitchell (2012, p. 52) concludes that culture change is needed amongst practitioners, along with strategic user involvement. There are fears in Scotland (Mitchell, 2012) that personalisation is being used as a front for reductions in individual services and budgets, with local authorities still retaining ultimate control, and "micro-managing" budgets. This evidence leads to questions about the status of the support plan, and to what extent it forms or replaces part of the local authority duty to act on an agreed "care plan".

The central quality measure in support planning must be for the PB user to be "in control" of their plan for support, as Carr (2011, p. 42) puts it: "people and their chosen outcomes should shape process and provision". Therefore, the role of ULOs in providing facilitation, stepping back, listening and challenging PB users were explored in Williams and Porter (2011). However, the big question remains: how can social services departments best work with community sources of support, in order to ensure PB users have the best possible chance to make decisions for themselves about their support plan?

The present paper draws on the first stage of a research study carried out for the School for Social Care Research (SSCR), in which the goal is to explore the ways in which support planning is done with particular groups of PB users who have problems in making these decisions for themselves (see Goodwin, 2011; Lymbery, 2012; Williams and Porter, 2011 for discussion of these issues). The central research question here is about the ways in which voluntary sector organisations (VSOs) could work together with social services to enable PB users to have more tailored, less bureaucratic, and more empowering support in constructing their own support plan.

Methodology

The aim of the paper is to present a critical analysis of the current situation in support planning in five English local authorities, from the point of view of statutory staff in social services and health; and voluntary sector staff. The study on which this paper is based set out to examine in depth the support planning practices in five VSOs (two of which were "user-led" or disabled people's organisations). This paper reports on the first round of professional workshops, which were held during the first four to five months of the study, during late 2011 to early 2012, and an additional workshop for social services managers in one of the five areas during July 2012. The sites were chosen to include places where:

(a) a VSO and/or a ULO was involved in assisting PB users with support planning;

(b) particular efforts were made to provide good support to PB users with learning disabilities; mental health problems; older people; and family carers; and

(c) PB users included those from minority ethnic backgrounds.

Our previous work (Williams and Porter, 2011) unpicked some of the key points about ULO being involved in support planning, while the current project goes wider to look at the voluntary sector overall. Although only two of the organisations had the status of a ULO, all of them shared the goal of working within local communities, involving disabled people centrally, and working on a basis of equality. We do not focus here on the differentiated role of ULOs and VSOs, and so, for the purposes of this paper, the term "VSO" should be taken to cover all these different organisations. The goal of the initial workshops was to bring together those working in VSOs with the SS, in order to scope the local issues for PB users; find out more about joint working between SS and VSO; and lay down a framework for the research. All the participants had some role in assisting PB users to develop their support plans. In all, 25 support planners and staff from VSOs attended, and 21 staff from the SS (Table I).

The subsequent workshop in Area 5 had 12 participants, all of whom were managers, commissioners or direct care managers. Some of them worked within the central commissioning services, others were more "hands on" in providing PBs, both for older people and those with mental health support needs.

	VSO	SS	
Area 1	5	4	
Area 2	5	2	**Table I.**
Area 3	5	7	Participants in first round
Area 4	5	4	of professional workshops
Area 5	5	4	about support planning

In all the workshops, discussions were held about what support planning is; the routes followed typically towards a support plan by PB users they knew; their shared vision of an ideal world for PB users; and their knowledge of other community resources in the area. In the first round of workshops, participants then met separately in SS and VSO groups, to discuss the issues and problems they were facing. In most workshops, there was also some discussion about next steps for local practice. All discussions at the workshops were recorded and transcribed, and have been analysed thematically, using NVivo software to assist the organisation of data.

Findings

A shared vision for "choice and control" by PB users

The policy theme of "choice and control" was central to the thinking of both statutory and voluntary sector staff. As one person said, support planning for a PB user should be: "their process, they own it, and we serve them to achieve what they want to achieve" (SS). It was also agreed more than once that PB users could choose to take risks, just like anyone else, thus challenging the paternalism that can characterise social care support (Lymbery, 2012). All workshop participants also looked towards changes that were necessary in the wider community, including accessibility and attitudes. In an ideal world, PB users and their families would enjoy full "respect". In one workshop, people agreed that the goal of PBs should be to eventually make statutory support unnecessary: "In an ideal world people wouldn't need statutory services to lead a normal life" (VSO).

Quality of life, human rights and active citizenship were other key themes. For instance, one participant said that a PB should be:

> Not just like getting someone to come in and feed you and make sure you've had a bath, or something; it's having more than that. More than basics. And about actually contributing. Actually being useful (VSO).

It seemed then that there was general agreement between staff in voluntary sector and statutory services about the outcomes for disabled people in society. Looking at visual maps which were created in each workshop of an "ideal world", participants generally reflected that they only needed somehow to follow current personalisation policy: "there's got to be a closer match between the rhetoric of politics and then what happens on the ground" (SS).

The ingredients of a good support planning process

In trying to match the vision of a personalised world with the reality for PB users, the workshops focused on how to improve support planning and the following features of good support planning were mentioned in the workshops, with broad agreement from all parties in VSOs and SS. In various ways, all of them imply strong, integrated working practices, with the PB user at the centre.

Good support planning should be about "actually enabling people, rather than disabling people" (SS). The support planner should listen, but also challenge PB users to think further about their own lives. It was also felt that taking control of your own support plan can enable people to learn new skills (VSO). That can include creative planning, which eventually saves money: "it's easy to put somebody on a bus to go to and from the day centre every day, but if you put in the travel training then eventually they will be independent. And that costs more initially" (SS).

A good working relationship between support planner and PB user was seen as central to good support planning, and was mentioned in at least three discussions

amongst SS participants. People spoke about "trust" and "positive relationships" as key elements in good support planning, and it was felt in more than one workshop that PB users should have a choice of support planner and of the organisation that assists their plan, implying a partnership approach across a range of commissioned voluntary sector bodies and statutory services.

A holistic approach was also talked about as a central feature, with health and social care needs combined (SS), a wider view of people's lives beyond the PB (VSO). One SS organisation had created a "web" to see what community resources PB users could draw on. In the later SS workshop, it was also felt that a good support plan should encompass all the needs a person has, not just those which are eligible for funding. To some extent, this heralds a preventative approach:

> We should be helping people link in with community services, much more than we do […] I'm talking about lunch and day care, extra care housing being in there, and identifying lots of community places (SS).

From the point of view of PB users, of course, partnership working is only meaningful if they understand the roles of the various partners, and have a reliable source of information. More than one site discussed the need for a "one stop shop". One SS had set up a "resource directory", and another had produced booklets for young people and families at transition. "Another thing for accessible information is working with people that actually know – have a real idea of what services, what choices there are out there" (VSO). Good support planning, it was felt, would be helped by real examples of successful support plans (VSO) and by a firm understanding of the PB process itself, so that PB users would understand their own rights (VSO).

Current constraints in achieving good support planning
The points made by practitioners in both voluntary and SS reflect both the current DH policies and guidelines about support planning, as well as some awareness of key strategies that need to be enacted at local level (such as information directories, and the commissioning of voluntary sector organisations). However, in reality matters were not quite so straightforward, and the workshops also discussed the current problems and constraints which are impeding good practice.

The first, and perhaps most important, set of constraints related to concerns about budgetary cuts. Support planning, carried out well, can be costly in itself, if it is to be sensitive to individuals' needs for a trusted, reliable source of support. A SS participant said: "by the time you get to the support planning stage you've gone through the process, you've met with the service user at least three or four times if not more often. Sometimes people will call you every day with concerns" (SS). However, VSO participants tended to perceive the SP process undertaken by SS as unnecessarily driven by time constraints.

Further, the support plan carries with it an entitlement; therefore, statutory services and care managers can find themselves in conflicted positions, where they are expected both to restrict budgets to individual users, and also to enable them to exercise choice and control. To achieve good support planning, then, it will take a "shift of control": "(Control) has got to shift from the local authority to the individual. Otherwise it just isn't going to work" (VSO). A particular manifestation of these difficulties was the unwillingness of the SS to state indicative budgets. In one area, this point was mostly driven home by VSO participants, who were sometimes having to help with support planning with no idea of what the budget would be: "people don't know their budgets and people won't tell us because it's confidential" (VSO). VSO participants felt that the

financial constraints often backfired on PB users themselves, making them feel guilty about having a PB: "one woman in particular […] feels like she's being treated as a criminal because she can't produce receipts" (VSO).

A result of the general concerns and conflicts about money, according to these professional workshops, was that support planning was being "re-colonised" by social services departments. For instance, it seemed in most areas that support plans were being treated as an official social services document, very much as a care plan was in the past. There were a number of problems with this. One was that the PB user was often "very unaware that they actually have a support plan. Even a person with direct payments, they don't even know they have one" (VSO). There were also said to be increasing limitations on what a PB could be spent on. While many participants (VSOs and SS) were trying to encourage PB users to be flexible, they were frequently told that certain expenses (e.g. travel) were not eligible, and PB users often had their money "clawed back". The result was a general fear about entitlement. "I'm not saying there's no grounds for some accountability, but it feels to me that the idea of giving people money and then trusting them to manage that control appropriately is just that: an idea. And we've not moved forward enough to really give people that control in those arrangements" (SS).

Another way of attempting to save money from the public purse is for private individuals to contribute towards their own care, and to some extent that has always happened. However, that contribution was said to have increased dramatically, causing many PB users to conclude that it was not worthwhile to have support at all. "I find that that is a gigantic barrier, actually. And people saying 'well why do I want a service if I have to for it? I'm on benefits, I shouldn't be paying for this at all'" (SS). A related issue was the attitude of finance departments, said to be "overzealous", and lacking in understanding of disability issues. Instead of PBs being flexible, for instance, users frequently had to repay amounts which had accumulated in their budget, and were worried about what would count as an "eligible" expenditure. One PB user was said to have been "very upset" when sent a letter demanding a re-payment, "because she said 'I just feel like I've got a letter sent from my school to my parents saying how naughty I've been. That's how it felt.' She's a 50-year-old" (VSO).

All of these financial issues meant that twice the amount of work had to go in to supporting PB users, and to help them through the resulting problems: "It's costing the system a lot, because it just means that then you have to go double […] it means putting people who are already under a lot of stress, and it also makes people feel defensive that they've got it wrong" (VSO).

Negative effects on integrated working
During the course of the workshops, participants were given the opportunity to discuss their own opinions and experiences in two separate groups, for VSO and SS participants, while the final workshop, as indicated above, consisted entirely of social services managers. The chance to analyse matters freely revealed some deeper tensions, all of which were threats to the ideal "user-centred" partnership approach to support planning.

First, it was felt that inequities amongst PB users had arisen, since most people required a very active informal support network, family carers or friends, to manage their PB. Those who did not have that support were felt to be disadvantaged in some areas. VSOs often worked with and through family carers, and some knew that they had to encourage carers to fight for their rights: "You kind of have to tell people to kick

off, don't you. Which you don't want to do, but there's almost this, if you kick off a little bit about it, the likelihood is somebody will take it more seriously" (VSO).

Capacity to give support to PB users was said to be very limited within social services. This resulted in PB users being "banked" or "put on team hold" [VSO]. There was a high staff turnover in SS, with many part-time staff. In one area, SS participants themselves complained that they had no office base any longer, but were expected to work largely in isolation. In turn, the lack of support impacted on PB users and their carers, who felt that they could not take on any further responsibility:

> People will say they don't want to do it partly because there isn't enough support around if you think you do want to take that step. Or there's not enough information. So in a different context they might want to do it (VSO).

Attitudes amongst some social services staff were said to be affected adversely by the current climate of cuts. This meant that PB users were seen as "the deserving poor" and that they were not fully trusted to organise their own budget: "it's almost like poor law work house stuff; doing unto people and this is what you're allowed and this is what you can spend it on, and you're naughty if you spend it on something nice" (VSO). Both SS and VSO participants were looking for a general shift in mind-sets, and felt that had not yet arrived. In fact, some felt that things had currently regressed: "There's a definite change this year where there's less creativity. That could be financial, but it could be the system it is. I don't know" (VSO). SS staff themselves were painfully aware of the effect of the system on their own ability to support PB users. They were dependent on panels to approve PBs, and they said that their own ability to act as advocates to PB users was often compromised.

A perverse result of the problems faced by SS was that VSOs were no longer commissioned to support PB users at the support planning stage. "Obviously at the moment, with finances being what they are, local authority would rather use the resources they've got in-house rather than go external" (SS). The seven VSOs represented in the five sites were all essentially in this position. Although they were there to advocate and support PB users, they felt they were brought in "too late", and had to simply pick up the pieces at that stage. One participant from a VSO put the matter very eloquently:

> I think that the service system has appropriated those words (support plan). So now to be a legitimate support planner or a legitimate broker, it has to be sanctioned by the local authority […] We do it, but […] we're in this kind of soupy situation now. When we started that wasn't the case, and we've continued to do what we did before, but actually it feels a bit like we're on the outside now, and we don't know quite how to get in (VSO).

Naturally, the combination of all these factors made it very hard for SS and VSO staff to maintain good team working and trusting relationships with each other. Those who participated in workshops came because they wanted to plan jointly, and to work together, and wanted to find more joint forums for these activities. To some extent, it is hoped that the current research can help to provide those opportunities, and will also be able to signpost some possible solutions.

Conclusion: Support Planning in Practice

The points raised above by professionals arose from professional workshops, which represented the first stage in the research study for the SSCR called "Support Planning in Practice". Because of the shifting nature of support planning, the original research design to capture good practices in voluntary and user-led organisations has not entirely been possible. However, at the time of writing, data has been gathered from

23 PB users, with follow-up visits to discuss outcomes. A further 12 participants from a previous project for the Office for Disability Issues (Williams and Porter, 2011) have also been followed up for a third time, in order to examine in more detail what makes effective support planning in the longer term from the point of view of people with learning disabilities; people using mental health services; older people and family carers who are assisting any of these groups.

When times are hard and budgetary cuts pose a threat, this paper has shown how the reaction of professionals is to pull back into entrenched positions, and to shelter behind bureaucratic rules and processes. However, it is precisely that reaction which is challenged by voluntary sector organisations. Creativity needs good support, but it can also save money. Many professionals would no doubt echo the following sentiment from our workshops:

> I think part of it as well is helping people devise solutions that are within their means. And people's means are getting smaller and smaller and smaller, so brokerage is having to become more and more […] versatile (VSO).

What is needed now is joint working between social services staff, the voluntary sector, and PB users themselves. An integrated approach to support planning will depend on trust between all these parties, and a willingness to step back and share power. Measures suggested in these workshops were joint training between the statutory and voluntary sectors, along with commissioning of VSOs that would ensure their equality of status with social services departments.

This paper has reported on the first stage of a longer study, which has just been completed in March 2013, and will report further on the outcomes and messages from PB users themselves in relation to support planning. The study has taken place during a period of change, and the "shifting sands" of our title are still shifting in 2013. Top-down policy guidance is necessary, but it has to be matched by knowledge about how local authorities are reacting to the pressures of change. In relation to support planning, we need to find out more about how different social services departments are viewing the status of the support plan, and how support plans relate to the statutory duty for care planning. In at least one of our study sites, there was a general awareness that support planning was simply morphing into "care planning", and was losing its individuality and emphasis on the individual voice.

These findings have some key messages for integrated working, which is of essence "person-centred". Further, there is strong evidence from these workshops about the shared values and vision which bind together practitioners in local authorities with those in the voluntary sector. Although acting under different sets of constraints, these two sectors clearly have a common philosophy, which can serve well to promote partnership working. At the time of writing, there is increasing pressure on local authorities to meet targets for budgetary constraints, and so joint work between the statutory and voluntary sectors, and with PB users themselves, will be even more necessary. Successful team work, as discussed in this study, is built on a trusting relationship between all parties, which would avoid the costly processes of disputes, misunderstandings and actions taken by PB users and their advocates. Above all, times of crisis and constraint require some creative thinking to find new solutions, and personalisation has been welcomed by disabled people precisely because it takes account of their own resources, ideas and innovations. This paper has indicated how solutions could be formulated from the bottom up, rather than top down, relying on the creativity and resourcefulness of PB users themselves, their family members and their

allies. Good person-centred preparatory work with PB users can result in better support plans, quality of life and outcomes for disabled people, but only if all parties are prepared to work together. That would perhaps be what Sang (2009) described above as a "social co-production".

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Further reading

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