

# EVIDENCE STORY ONE COVENTRY'S LOCAL EVALUATION OF THE INDIVIDUAL BUDGETS PILOT

## Background/context

Coventry was one of 13 councils across England asked to pilot Individual Budgets for the Department of Health, exploring ways of 'personalizing' social care. The Department of Health commissioned IBSEN (a collaborative between SPRU, PSSRU and SCWFRU) to evaluate Individual Budgets nationally using a Randomized Control Trial methodology to produce robust quantitative national data.

IBSEN were not able to localize their findings. Since Coventry were using an outcomes focused approach where other sites were using Self Assessment Questionnaires and a Resources Allocation system based on work from In Control, we were concerned that specific messages about Coventry's pilot would be lost within broader national data.

We were also concerned that the real experiences of the individual service users and carers taking part in the pilot would be lost within the generalized data being produced by IBSEN. Without this locally generated knowledge, it would not be possible for Coventry to fully understand the impact of Individual Budgets, and so we would not properly understand what implications the pilot had for our future ways of working. We were very clear that we wanted a 'warts and all' picture, so we could learn from things that went well as well as the things that didn't go so well.

#### What the intervention was

Coventry used an open tender process to commission Coventry University to support service users and carers who were taking part in the Individual Budgets Pilot to tell their own stories in ways that suited them, using media that were appropriate to their own individual circumstances.

Two post-graduate students worked with 30 plus service users and carers and supported them to record their experiences as they happened. Some service users made videos, one wrote a blog, others kept diaries and scrap books. Several others used photos and recorded speech to create PowerPoint presentations describing their experiences. Most striking perhaps was the huge jigsaw produced by a group of service users working collaboratively through an art group to represent their experiences of individual budgets.

The evaluation was then presented at two separate events. At the first small event for service users and carers, all the service users and their carers presented their own stories in person in front of each other and a small group of local and national professionals. At the second event, aimed at professionals, people's stories were presented along with a description of the research project from Coventry University.

### What the evidence suggested

As you might expect, the findings were mixed. On the whole, service users, carers and professionals liked the Outcomes Focused Assessment process.

In particular everyone liked the more holistic nature of the assessment, that is able to cover areas such as relationships, education and employment, as well as personal care. Some people described this approach as being about 'possibilities' rather that having a focus on 'problems' as in a needs led assessment. One carer said 'that's the first time I've recognized my brother in an assessment'.

People also felt that the Outcomes Focused Assessment supported the development of constructive relationships based on mutual respect and understanding. In several cases this allowed long term mistrust of the Council to be over come and creative support solutions to be developed that were supported by all parties.

The voice of the service users comes across very clearly in the Outcomes Focused Assessment. In several cases the clarity and integrity of this voice allowed both carers and professionals to support constructive risk taking in ways that they had not previously been willing to do. As one person said, 'The Individual Budget pilot has allowed [my] needs and aspirations to be understood in a way that a traditional assessment would not allow. In the past [my] ability to perform tasks would be the main focus of an assessment and the consequences of doing the task would not be considered.'

Problems with delay and process were still apparent. Some people had to wait for long periods for their support plans to be fully implemented, usually because of problems with being able to buy the type of support they needed, e.g. it can still take a long time to recruit the right PA.

Many people, including professionals, remain confused by all the jargon in social care. Most service users would find it difficult to describe what an Individual Budget is.

The problems of making different funding streams work together remained, particularly for ILF and Access to Work.

Perhaps the following quote captures the findings best:

'the process of getting an IB....has been hard at times .... But having it has helped me to become more independent'

#### Impact of evidence on practice

Social Workers have found that by working closely with colleagues from other backgrounds and using the full range of care management skills the improvement in outcomes has been significant. Perhaps an understanding of how practice has changed is best evidenced using peoples own words.

'To make this work requires more time at the assessment stage. Reviews, however, are much easier as they concentrate on whether the things that were planned have been achieved!' A Social Worker

'It's rewarding to see the progress being made by people over time. Individual Budgets are enabling individuals to gain a level of independence that would previously not have been thought possible' A Social Worker

'When Individual Budgets were first talked about I adopted the ostrich attitude. I put my head in the sand and pretended it had nothing to do with me. I stayed in this position for several months until I finally realised the significance of what Individual Budgets were about. Slowly, it dawned on me that there was the opportunity to be a part of something that would change the way that people are

assessed and offered services. It was time to move from the traditional way of working to something that was more person-centred, to give people and their families the chance to have more say about the services that they are offered and how they would like to be supported.'

'It is early days yet and some people are further along the road than others, but already people are being enabled to live as independently as possible, not just going with the services that happened to be convenient for us as professionals but having a real say.

Is everything perfect? No of course it isn't, but it is improving. The new outcome focused assessments and support plans have taken some getting used to by all of us and there are always improvements that can be made.

Personally, well I'm not the ostrich anymore! There are still things that I don't understand and there always will be, but my commitment to Individual Budgets and the difference that I have seen that they can make to people is wholehearted.' (Community Care Worker)

'Outcomes-focused assessments bring together the two approaches we had before. The person-centred planning coordinator asked people about their dreams and aspirations for their whole lives. The care manager carried out an assessment saying what services we felt people needed, but not in a detailed or personalised way. Outcomes-focused assessments link the two and make planning to achieve the outcomes people value a reality. What is encouraging is that we have had hugely positive feedback (from families) about our Assessments.' (Team Manager)

'The outcomes-focused assessment documentation used in Coventry is excellent. It gives a clear and detailed description of the individual and their needs focusing on outcomes and goals. It's a brilliant template for providers compiling individual person-centre support plans. As a professional, it is the best I have seen.' (Manager from a national provider organisation)