



NHS Partners Network's response to the Department of Health and Social Care & NHS England's consultation on extending legal rights to have for personal health budgets and integrated personal budgets¹

| Key inquiry question | NHSPN member response |
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| Q1a. We are proposing that people who are eligible for both a personal budget and a personal health budget should have the right to an integrated personal budget. Do you agree? | Yes. NHSPN agrees that those people with ongoing social care and NHS needs should have the opportunity to combine budgets and purchase services from a range of providers which meet their needs including, if appropriate, purchasing additional services from the same provider (or another provider) using their own funds in addition to the integrated personal budget. |
| Q1b. We are proposing that any right to an Integrated Personal Budget, should include a right to have a direct payment, if appropriate. Do you agree? | Yes. NHSPN agrees that direct payments support people who have ongoing health and social care needs to take control of the services they receive and to administer them in the way that best meets their needs. Direct payment would facilitate a greater degree of flexibility for individuals, allowing them to purchase services from a range of providers and, if appropriate, 'flex up' support they purchase either by managing their spending throughout the year or by contributing additional funds alongside their integrated personal budget. |
| Q2. We are proposing that a person eligible for Section 117 after-care services under the Mental Health Act 1983 should have a legal right to a personal health budget / integrated personal budget. Do you agree? | Yes. Services required by people of all ages with mental health needs who are eligible for section 117 are available from a range of providers other than community-based NHS mental health services with a number of advantages and disadvantages. The use of a personal budget will allow a greater flexibility in the services purchased, as well as allowing the individual to access additional sessions by complementing the funded care with their own funds to ensure they have the best chance of full recovery. |

¹ <https://consultations.dh.gov.uk/commissioning-integration-and-transformation/extending-rights-to-personalised-budgets/>



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| Q3a. We are proposing that a person of any age under the care of community-based mental health services for a significant period of time should have a legal right to a personal health budget / integrated personal budget. Do you agree? | Yes. Many people who are receiving ongoing community-based mental health support will choose to also seek additional, complimentary treatment from private providers. Offering a personal budget would allow those people who choose to use alternative providers, or who would like to add additional services not funded or provided by the NHS, to do so in order to best meet their own needs. |
| Q3b. What do you feel would constitute a reasonable definition of 'a significant period of time'? | Any treatment which is expected or planned to continue, or has already continued, for more than 12 months. |
| Q3c. We are proposing that any right to a personal health budget for mental health, should include a right to have a direct payment, if appropriate. Do you agree? | Yes. |
| Q4a. We are proposing that people leaving the armed forces who have a requirement for ongoing care through NHS services, (with some exclusions including primary care and pharmaceuticals), should have the right to personal health budgets where appropriate. Do you agree? | Yes. |
| Q4b. We are proposing that any right to a personal health budget for this group, should include a right to have a direct payment, if appropriate. Do you agree? | Yes. |
| Q5a. We are proposing that a person with a learning disability, autism or both with integrated packages of care should have a legal right to an integrated personal budget. Do you agree? | Yes. |



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| Q5b. We are proposing that a person of any age with a learning disability, autism or both with ongoing eligible health needs should have a legal right to a personal health budget / integrated personal budget. Do you agree? | Yes. |
| Q5c. We are proposing that any right to a personal health budget/integrated personal budget, for this group should be a right to have a direct payment, if appropriate. Do you agree? | Yes. |
| Q6a. We are proposing that people who access wheelchair services whose posture and mobility needs impact their wider health and social care needs should have the right to a personal health budget or integrated personal budget. Do you agree? | <p>Yes, in principle. However, it is essential that the provision of ongoing support is considered and that the arrangement of provision for that support is a requirement of receiving the direct payment.</p> <p>There are many cases where users would like to purchase an additional or alternative wheelchair which would require a 'co-payment' arrangement with the use of other funds. However, many of these wheelchairs go unused or are only used for a short time as the local NHS Wheelchair Service does not have the required skills, knowledge and agreements with manufacturers to support the wheelchairs on an ongoing basis to enable the effective use of the funding.</p> |
| Q6b. We are proposing that any right to a personal wheelchair budget should be a right to have a direct payment, if appropriate. Do you agree? | Yes, subject to the caveats above. |
| Q7. Are there any other groups that you believe would benefit from having a 'right to have' a personal health budget and/or integrated personal budget? | Any group receiving ongoing treatment for a condition which is lifelong or will require ongoing support and treatment which will last for more than 12 months. |



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| <p>Incorporating relevant disability benefits Q8. Are there other funding streams that you believe would be beneficial to incorporate into integrated personal budgets?</p> | <p>NHSPN believes that the ability to join up payments for health and social care alongside other payments which are for the same purpose – such as returning someone to work or allowing them to remain in work – is of benefit to the whole of society.</p> <p>NHSPN believes that the services its members provide (outside of the NHS commissioned offering) and the flexibility of a non-commissioned service to meet unique, individual needs – can support people to stay in work and return to work after a break.</p> <p>The use of integrated personal budgets allows individuals with health and social care needs to purchase services which align with their goals and the act of choice will, over time, mean that providers are forced to offer more innovative services and to improve their quality in order to ensure those people with budgets make use of the services they offer.</p> <p>The types of services we see being purchased which support these goals include physiotherapy services and mental health services in particular. We note that these are also areas where individuals quite often purchase additional services privately.</p> <p>We know from feedback and patient research that individuals feel they would make progress more quickly if they had control over the services they had funded by the Government and could integrate them with self-funded services.</p> <p>In the case of specific disability benefits, there are many services which can be developed – either as products, or with an individual – combining the skills of a range of professionals including physiotherapists, counsellors and GPs – to support a return to work and improved self-care skills.</p> |



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| <p>Establishing a right to direct payment in NHS continuing healthcare funded home-care Q9. We are proposing that people who are managing their NHS continuing healthcare funded home care as a personal health budget should have the right to a direct payment, if appropriate. Do you agree?</p> | Yes. |
| <p>Equalities Q10. Do you think any of the proposals set out in this document might have a beneficial or adverse impact on any equality issue- in particular, in relation to any of the groups who share a characteristic that is protected for the purpose of section 149 of the Equality Act 2010?</p> | Not applicable. |