

# ON THE EDGE

Cuts to local authority budgets has seen some service users' direct payments slashed, and left them facing a cliff edge in terms of paying for care, as Richard Shrubb explains

**M**any service users and their families and carers have taken advantage of the personalisation agenda in the past three years to take control of the budget for their care and use direct payments to pay for the care they want. But now many service users and/or their families who administer their payments are having their budgets slashed as local authorities face up to budget cuts - and this could have a significant impact on their care.

For instance, a woman we shall refer to as KB administers a direct payment budget of just over £7,600 a week for her

son, FB, who has challenging behaviour and Kanner's autism. In the latest round of local authority cuts their budget has been slashed by 35% to just over £4,400 a week.

Meanwhile, KB's friend KR administers a £150,000-a-year direct payment for her son in a neighbouring authority, who has the same problems as FB. KR's budget is also being cut by 35%.

A 35% cut is less of a budget reduction than some local authorities are getting under the comprehensive spending review, while care agencies are getting a 25% cut. But for these two families it may mean that they

will be unable to continue looking after their sons - meaning the state will have to take over.

*Learning Disability Today* spoke to John Waters, head of research and evaluation at self-directed support social enterprise In Control. "Because of the way social care is administered in the UK, direct payments are necessarily a postcode lottery," he says. "You could be receiving a 35% cut because your local authority is making cuts to the social care budget to save money, yet the family across the street in the same situation as you may be getting none at all."

(the local authority) seemed to have pre-conceived the budget cuts and reassessed his budget according to those cuts





## Efficiency savings

FB's budget is for 2-1 support, 24 hours a day, seven days a week. He lives in a specially adapted bungalow in a quiet area because neighbours feel intimidated by his behaviour, and this impacts on him. It has to be a one-floor house because of the risks of FB pushing a carer down the stairs.

His family trust, which administers the direct payments, has to pay for recruitment, staff training, accountancy and taxes. When he goes out on an outing he requires 3-1 support. He is 36-years-old and behaves in childlike ways - only where a child pushes an adult in a tantrum little happens; a 36-year-old can hurt them.

KB says that having a direct payment is much cheaper for the public purse. "Before we got the direct payment we cost the state £30,000 a week for 6-1 support - often much more, as in crisis the staffing would increase. This was in the 1990s, and the costs would be much higher given inflation 15 years later."

There is more than anecdotal evidence of the savings that direct payments can bring. A December 2010 research paper by the Social Care Institute for Excellence looked at the efficiency savings made by going from direct state provision to direct payments. 'Personalisation, Productivity and Efficiency' states that; "the direct payment scheme studied represent a substantial improvement over

traditional arrangements from a cost and resource utilisation perspective."

In Control is about to publish a research paper on direct payments among its clients. Waters says; "Overall people are really benefiting from the system by having direct control of the care provided. There is some anxiety though over the size and scale of the cuts."

## Going bust

Indeed, the cuts made to FB's budget mean that his family trust is going to be insolvent, which could mean he has to return to local authority provided care. KB can't understand why the local authority would want to spend more money on providing direct care than they are on the direct payments, even before the cuts. She says; "I asked the reviewing team if they had done a retrospective analysis of the cost of previous care as to the current cost of the direct payment. This was ignored."

"The local authority instituted the budget cuts because they felt that his situation had improved permanently because the provision had, far from of a better word, cured him. You can't cure autism."

KR says the same. "They seemed to have pre-conceived the budget cuts and reassessed his budget according to these cuts, rather than assessing him for his actual needs. If they had done it the other way

round then he would have been assessed at a higher need and thus a higher budget."

Meanwhile, a personal assistant specialist consultant, who did not wish to be named, said that Fair Access to Care Services - the guidance on eligibility criteria for adult social care - is being administered as "having an ambulance at the bottom of the cliff to pick victims up after they have fallen over, where the personalisation agenda was intended to be a fence at the top of the cliff to prevent them falling in the first place."

To continue this metaphor, small expenditure makes big savings; where more people fall through the net, particularly after the cuts, the 'ambulances' will cost a lot more than a 'fence'.

The *Guardian* reported in March on a survey of disabled people in receipt of social care. It found that more than a fifth of respondents said services had been cut back even though their needs had stayed the same. More than half of respondents said they had seen their health suffer as a result of the changes to services. KB and KR also say that has happened to them.

## Fighting for care

KB and KR are now both fighting for their sons' care in court. Both cases have gone to judicial review. Thaug - their sons can get legal aid under the Official Solicitor, the matters cannot because of cuts to the legal aid system.

"My complaint was that they had no right to my views as

FB's family carer in the review process," KB says. "My role as family carer was completely different and separate to that as administrator of his family trust. I am not deemed a 'family carer' and have no voice in court. I can't effectively contest this as I have no representation."

KB's role as administrator of the family trust and managing the overall care provided to her son, rather than actually caring for him with her own hands, has been defined legally as not doing the caring. Matters are ultimately responsible for their children's care, and though as administrator she is effectively doing this, this is not the definition of her role in the eyes of the court.

As a result, morale is low throughout FB's family trust. KB says; "Due to the cuts the staff are in revolt, and their talking about the cuts and impact on their own lives is being noticed by FB."

"Though he doesn't understand that his current existence is under threat, he is picking up on the poor morale. This in turn affects his own behaviour, which is getting worse because of the stress from the cuts impacting on the morale of his carers."

## References

*Guardian* (20.11) How have the cuts affected adult social care March 29 2011.

Carr S (2010) *Personalisation, Productivity and Efficiency*. London: Social Care Institute for Excellence.

## About the author

Richard Sturubb is a freelance journalist.