



It's Changed Things For The Better



Kassa Glaeser, Care Direct Plus Adviser and Direct Payments Champion talks about DP in action.

I generally believe that nobody wants to come through Social Services unless absolutely necessary. Many people feel that some of the services offered are old-fashioned and inflexible. When Direct Payments were first introduced in Devon, I felt it could really change things for the better, so I put myself forward as Direct Payments Champion.

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I started working in Social Services back in 1974 and, after working with all the different adult groups within ACS, I currently work as part of the Assessment and Review team. I complete holistic needs assessments by telephone and look at risks and eligibility for the Adult Physical Disability Team.

I see my role as helping the individual to think 'outside the box'. They should not be restricted to conventional, fixed services, with little choice of who provides these, or where

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and when they are provided. It's important to tailor each care plan to the individual and how they would like their needs met.

I also see my role as promoting more creative thinking to colleagues, as this way of working will make Personalisation so much easier to grasp when it's introduced to the public in the autumn.

The great thing about Direct Payments is that, once you have identified an eligible need, how that need is met is not up to us, but to the individual themselves. We can help individuals to set it up and offer support, but the choice and control is theirs. I love the inventive ways in which the payments can be used, and find it incredibly rewarding helping people take control in this way.

Another reason I like Direct Payments is that the process is so simple, the Direct Payments Team do all the hard work.



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When off-duty, Kass enjoys relaxing with a glass of wine in her summer-house.

Here are some recent examples of how Direct Payments have been used (names have been changed to protect identities).



Paul lost his sight following a bleed behind his eyes. Through rehabilitation and the support of our Sensory Team he learnt how to cope with his personal care but he was isolated.

He talked to us and we reviewed his support. He had always been active before he lost his sight, so we planned the support he needed to get active again. His Personal Budget amount was determined by his support plan. Paul chose to receive part of his Personal Budget through Direct Payments to buy a tandem bicycle, and he employs a friend to take him out.



Margaret, 91, lives alone and constantly telephones her daughter and GP surgery. Her GP referred her to us for possible residential placement. Margaret didn't like the idea of a day centre 'with all those old people.'

When we assessed her needs, we found she was able to care for herself, but was lonely and lacked stimulation. I chatted to her about her hobbies and she said she had always wanted to learn to paint and to have basic cooking classes. Direct Payments are now allowing her to do exactly that.



Steve, 25, is wheelchair-dependant and lives with his parents, who wanted to go on holiday abroad. They asked if they could have some respite care for Steve. He did not want to go into an institutional setting, so Direct Payments helped him to arrange his own holiday. He went to an adventure camp in Cornwall where he enjoyed some fantastic activities such as abseiling and canoeing.

George, 78, was admitted to hospital following a fall. There were concerns about him returning home as he lived on an old farm with no heating or cooking facilities and no accessible toilet.

His GP felt George should move into residential care, but he wanted to go home. With Direct Payments we have rented a portable toilet which was placed outside by his back door and emptied by the rental company every fortnight.

We also arranged for care and repair to mend his Rayburn cooker. He has now been living happily at home for nearly two years since his admission to hospital.