

Personal Brokerage

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What is it?

Personal Brokerage is the process that is being used to encourage the development of innovative care packages by seeking proposals from a wide range of service providers.

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Who is it for?

- Service Users who have complex, unstable and unpredictable needs and risks
- No banded rates
- No Block contracts
- Health and Social Care.

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Why use this method?

- Locally available services
- Providing effective outcomes
- Efficient tendering
- Value for Money

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Service User Benefits

- Wide choice of providers
- Much greater involvement in the commissioning process:
 - Service users will help to write the outcome statement that describes and prioritises their needs and aspirations to potential providers
 - Service users will be involved in assessing a shortlist of providers to identify their preferred choice
- Care packages will be clearly linked to outcomes

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Provider Benefits

- Able to see what types of care packages DCC is looking to commission and can thus inform their business planning process
- Feedback where they are unsuccessful in obtaining new business
- Feedback will also be given at a strategic commissioning level in terms of types of care packages commissioned

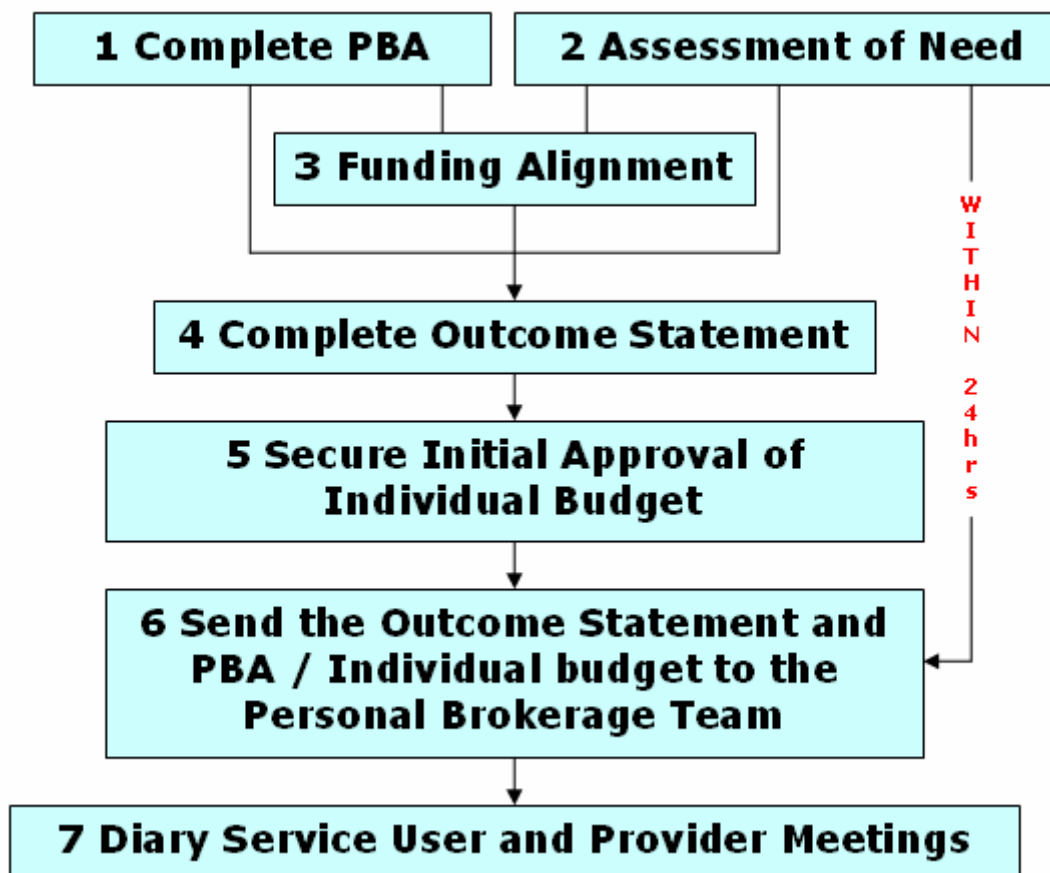
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Care Manager Benefits

- Care packages will be described in terms of desired outcomes rather than inputs
- No longer need to identify suitable providers to deliver a particular care package
- No longer need to negotiate with providers
- More time to work with service users

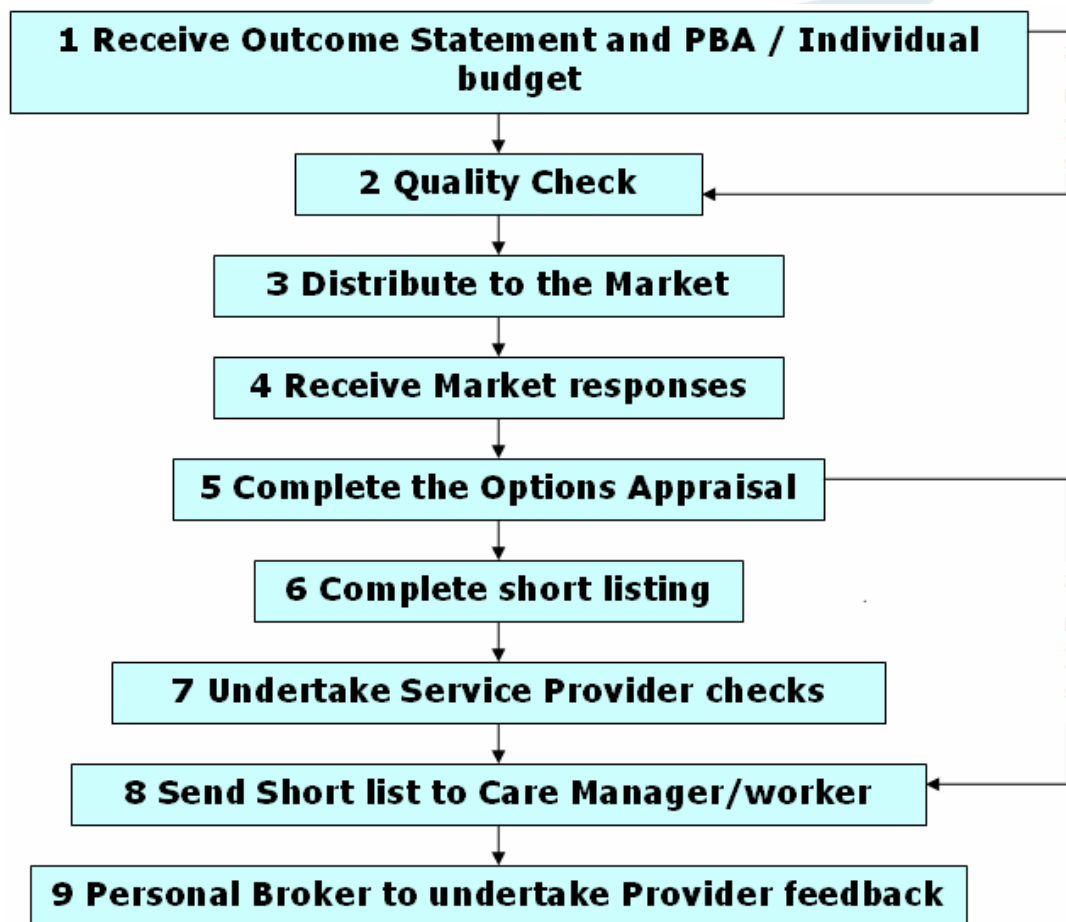
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Process Stage 1



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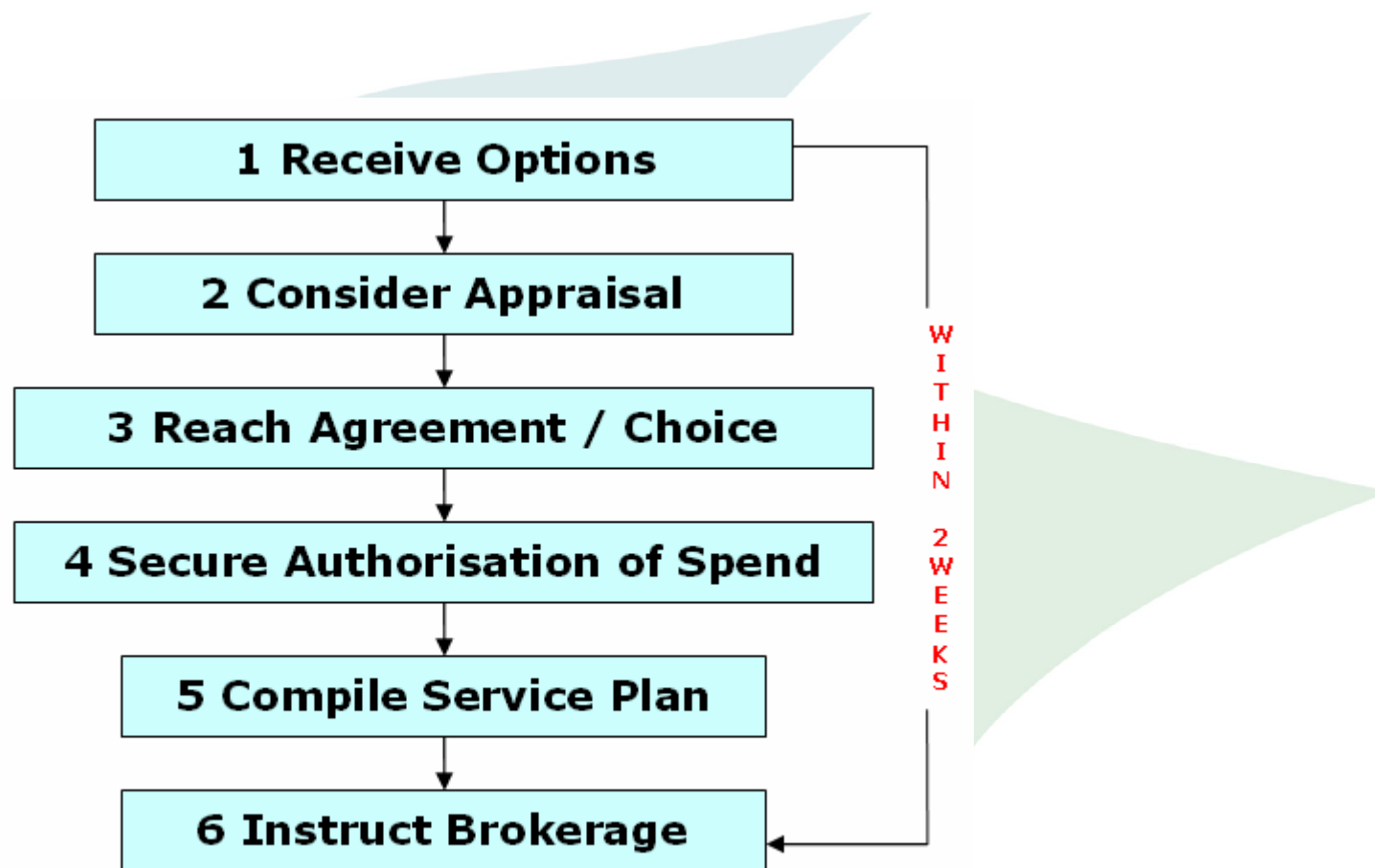
Process Stage 2



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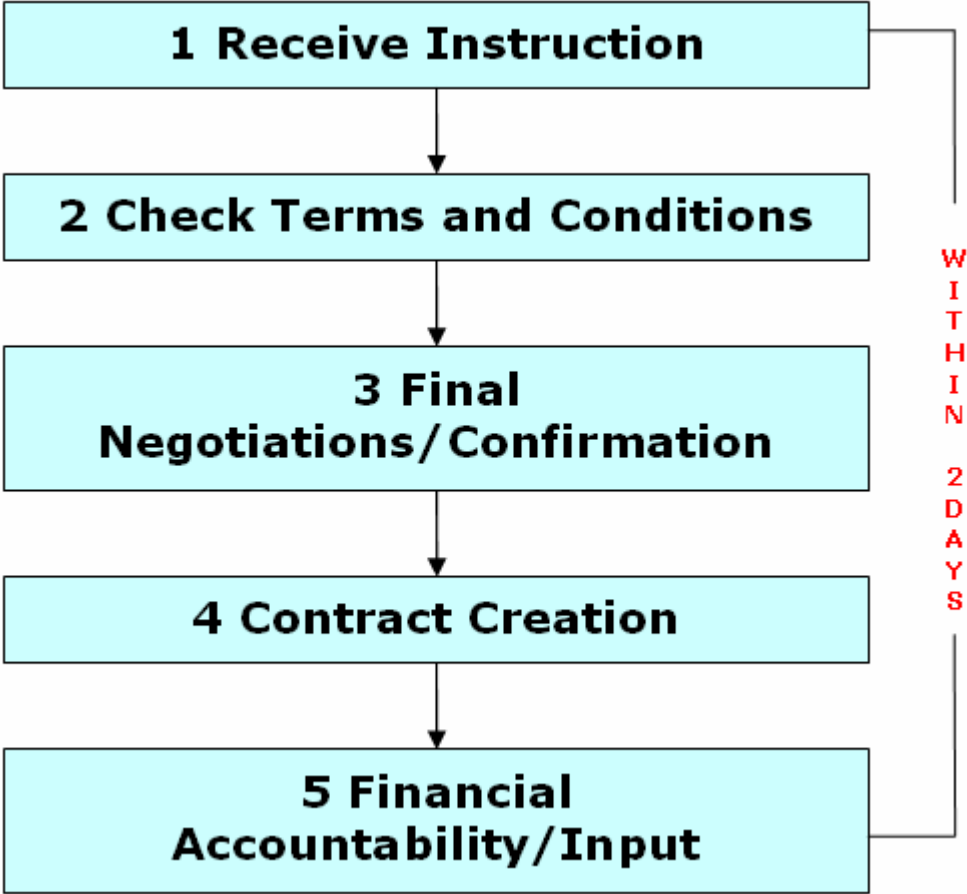
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Process Stage 3



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Process Stage 4



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PBA

- Learning Disability
 - RAS 4
 - Over 1000 service users
 - 70% fit
 - Needs moderating for 30% most complex
- Physical Disability
 - Based upon national RAS best practice
 - Works for most complex
 - Overestimates lower complexity
- Need to merge approaches

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PBA

- Domains
 - Independence
 - Inclusion
 - Choice and Control
 - Safety
 - Caring

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Domain 1: Independence

This domain is about how well you can look after yourself.

Question 1: Personal Needs

This question is about looking after yourself – things like washing, dressing, getting in and out of bed and going to the toilet. It should also include help you may need during the night for example this may be help to reduce anxiety or other mental health problems or to meet personal care needs. Skills of daily living and meeting needs around eating and drinking, day-to-day life and coping in your home for example; shopping, cleaning, cooking, housework, doing your laundry and general home maintenance should also be included.

Section 1: Please tick the appropriate box below that best describes the help that you need for most of the time with your personal needs:

A	I don't need any help with this area of my life	
B	I need reminding to undertake tasks in this area of my life	
C	I need support with tasks in this area of my life	
D	I need someone to do tasks for me in this area of my life	

If you have ticked **C** or **D** above please complete Section 2 otherwise go to Question 2

Question 1, Section 2:						
Area of Care	Please tick to indicate that you need help in this area of your life	Frequency of care required	Please tick the appropriate box for each of the columns below to indicate the frequency that each type of help is needed / available			
			I need care at night	I need 1-1 help in this area	I need 2-1 help in this area	My informal carer does this for me
Getting in/out of Bed		Sometimes				
		Often				
		Always				
Washing and Bathing		Sometimes				
		Often				
		Always				
Dressing		Sometimes				
		Often				
		Always				
Going to the Toilet		Sometimes				
		Often				
		Always				
Eating and Drinking		Sometimes				
		Often				
		Always				

Outcome Statement



Personal Brokerage Service - OUTCOME STATEMENT (ver 7)



CareFirst ID/Reference No:

Type of Case	New Case/Review	CURRENT costs of provision (if applicable)	<input type="text"/>
Is there agreement in place with the Service User to share information and to e-broker their needs?	Yes/No	Please Highlight any restrictions.	<input type="text"/>
Is there a CURRENT Provider?	Yes/No	Name, contact number and email address of CURRENT provider (if applicable)	<input type="text"/>
Has the CURRENT provider been informed that this case is to be e-Brokered?	Yes/No	Name and Contact Numbers (inc mobile) of Worker submitting this form	<input type="text"/>
Geographical Preference	Anywhere in Devon / or area / or Town <small>(Please delete / update as required)</small>	Is the Service User happy with the CURRENT provider?	YES/NO
Has the SERVICE USER any Preferred Provider in mind (this could be the CURRENT Provider)	YES/NO	Name, contact number and email address of PREFERRED Provider (if applicable)	<input type="text"/>

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Outcome Statement

- Domains
 - Personal Care
 - Independence and Autonomy
 - Social Participation
 - Economic Participation
- Maintenance
- Developmental

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Outcome Statement



Personal Care, including Health

Physical well being, Managing Physical and Mental Health, Health Screening / Medication, Emotional well being, Confidence / Self Esteem, Activities of daily living (dressing, washing and eating etc) Personal Hygiene, Exercise and Diet (Keeping Active), Nutrition.

Outcomes required

(Developmental Outcomes to be pre-fixed with a D -)

Weighting

Must have/Must be able to (Maintenance and Developmental Outcomes to be listed separately and Developmental Outcomes should be SMART - Specific, Measurable, Achievable, Realistic and Timed)	For Office Use Only
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How required Outcomes will be met?

(Please include what, when how and frequency)

Please cost Outcomes separately. As a minimum standard you must at least cost the Developmental Outcomes separately.	Indicative Cost per week
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