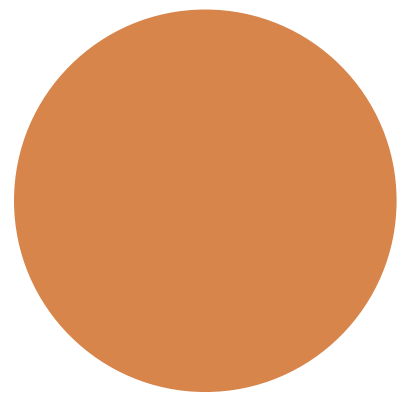
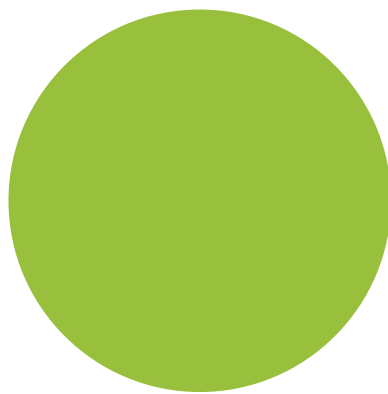
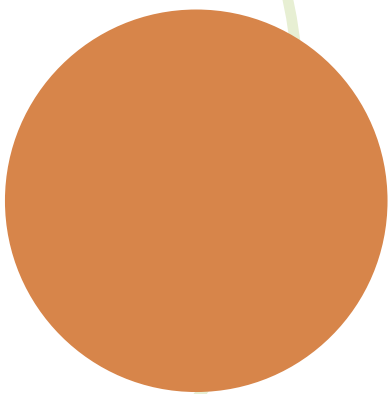


HEALTH CARE Choices

Personal Health Budgets
Communications Toolkit



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1. Welcome to the Personal Health Budgets Toolkit

Our approach in Yorkshire and the Humber is that the services commissioned for people living in the region will support individuals to maximise their own health and wellbeing and to be in greater control of their own care and support. There is a considerable opportunity within the upcoming changes to the NHS to involve individuals more fully in decisions about the care that they need and how this is provided to them. It will be important to build on the lessons learnt from local authorities as they have worked to make social care services more based on the needs of individuals. The development of a personal health budget for NHS care is a major step in changing the relationship between service users and service providers. Personal health budgets are now being piloted in nine of the 15 PCTs in Yorkshire and the Humber, with six PCTs able to make direct payments to patients so that they can directly control their own care; a first in the 60 year history of the NHS. With the message that the NHS is piloting personal budgets to see “how” - and not “whether” - they will be rolled out in 2013. I welcome this new Personal Health Budgets Toolkit. It’s for health and communication professionals who are involved in setting up and promoting Personal Health Budgets. It’s aimed at anyone involved, particularly those who don’t have access to a Communications Team. For those who do have a Communications Team, we hope this toolkit will help facilitate discussions and generate ideas when you liaise with your communications staff.

National research has highlighted that the Personal Health Budgets concept is a complex one to understand- for patients and those in the health sector. Patients may get confused about what they are being promised and what it actually means when it comes to their specific condition and healthcare needs. Health professionals, including GPs, community nurses, therapists and hospital medical and nursing staff too are grappling with the scheme. NHS finance and service managers will also have questions about how to square personal health budgets with existing budgets and planning frameworks.

I hope that this Toolkit helps inform, educate and lift the fog on a complex subject. Different PCTs may focus on different service areas, but we hope you will be able to use this toolkit to personalise your communications to your specific needs and local areas. The Toolkit offers a range of ideas to get you started. It builds on existing good practice developed by the Department of Health and West Midlands PCT (www.dh.gov.uk and www.westmidlands.nhs.uk) and I hope you find this a useful additional resource

I would like to thank all those who have contributed so far and I would welcome your feedback, your personal health care stories and your experiences so that together we can help make the implementation of Personal Health Budgets a success.

I wish you success in all of your communication activities.

Ailsa Claire

**Director of Commissioning Development
Strategic Health Authority -
Yorkshire and Humber**

July 2011

2. Objectives

Before doing any communications work you need to be clear about what your objectives are.

What is the purpose of the communication activity? Is it to:

- Raise awareness amongst health practitioners and stakeholders in a particular geographical location?
- Make sure health practitioners and stakeholders have the information/knowledge/skills to communicate about personal health budgets effectively and consistently with patients?
- Turn staff into advocates and champions for the scheme?
- Recruit an agreed number of patients onto the scheme? (and for this to make sense you will need to know how many patients would be eligible to access Personal Health Budgets)
- Make sure that the benefits of personal health budgets are understood?
- Make it clear who is eligible and who is not eligible for personal health budgets?
- Help patients make the most of their budget?

3. Know your target audience(s)

Before you start any communication activity you need to think about your target audience(s). You need to ask yourself a number of questions, including:

- Where do they live? What's the area like, is it disadvantaged or affluent?
- How old are they?
- Can they read? Are they sighted? Do you need to consider Braille or large print?
- What language do they speak? Does your material need translating/interpreting? Is the language accessible for people with learning disabilities?
- Do they have any particular needs?
- Where can you find them gathered together?
- Where do patients visit in the local area, eg GPs surgeries, supermarkets, sports centres, libraries, community centres, places of worship, health centres etc?
- Can you access them directly or do you need to go through intermediaries e.g. via a patients group? Family and friends?
- Are some audiences more important to you than others?
- What existing communications channels do your target audiences already use?

There are a number of audiences for Personal Health Budgets. Are you interested in all of them or some of them?

They can be divided into two main groups – 1) health sector and stakeholders and 2) patients.

Stakeholders could include the following:

- Key individuals – you may know their names and workplaces
- NHS staff
- NHS trusts
- Department of Health
- Local Councils – and who is it at the local Council that you need to target?
- Third sector organisations e.g. local voluntary/charity organisations
- User-led groups
- Practice based/Clinical Commissioning Groups
- Primary care independent contractors and their staff including general practitioners, dentists, chemists, opticians
- Healthcare trusts
- Yorkshire and Humber Strategic Health Authority
- Members of the public
- Professional groups and provider organisations

Patients could include the following:

- Patients with a particular condition e.g. obesity
- Patients in a named GP's surgery
- Patients in a particular geographic location

Each target group needs to be considered as to where they 'sit' on an influence/interest matrix of achieving your objectives. Where they 'sit' is then used to determine the appropriate communications mix.

		Influence	
		High	Low
Interest	High	User-led groups, the practice manager and GPs in that practice	Patients who are eligible for Personal Health Budgets
	Low	NHS and LA colleagues who may not work directly on implementing Personal Health Budgets	Patients who are not eligible but may be in the future

4. Key messages

You then need to think about what your key messages are. These may be different for different groups.

Think about what your groups need to know in order to achieve your objectives, not just what you might want to tell them.

Always use plain English and avoid using jargon or acronyms.

Be clear about what you want to say – and what you need your audience to understand and do.

Key messages are not necessarily said or written but they inform what you say and write.

You can see how we have used the key messages in the leaflet templates given in section 7.

Here are some messages that you might want to use:

Key Messages

- Personal Health Budgets can lead to greater patient satisfaction, greater efficiency, better use of support services and a more cost-effective use of public money. (stakeholders)
- Results from personal budgets in social care have been very positive. They can make a real difference to people's lives and give them back control of their own condition. (stakeholders)
- In a health setting there are large benefits to be gained from personal health budgets. (stakeholders)
- Patients will work with clinicians in order to decide what treatment will give the best outcome for their individual circumstances. (stakeholders)
- The scheme and the systems that support it are clear, easy to understand and constructed with patients in mind. (stakeholders)
- This scheme is about looking at particular conditions that evidence suggests Personal Health Budgets can support effectively. (stakeholders)
- This is entirely voluntary for patients and nobody will be forced to have a personal health budget. (stakeholders and patients)
- We are not doing this to save money. (stakeholders)
- You will be at the centre of decision-making about your support. There will be no decision about you, without you. (patients)
- You will be given an indicative amount of money and can decide what support is best for you. (patients)
- Personal health budgets are intended to be used for a range of things to meet your needs. This might include therapies, personal care or lifestyle advice. (patients)
- The aim is to make you feel better, increase your confidence and help you manage your own condition. (patients)
- You can come up with your own ideas for how you can get better outcomes for yourself using personal budgets. (patients)
- You have as much choice and control over your health care as you'd like. (patients)
- You will have a wide range of care options to choose from which support your health and wellbeing. (patients)
- You will be given access to the information you want, to make choices about your support. (patients)

- Personal Health Budgets are not always about money, you can also think about the informal support that you may have or want to help meet your health needs. (patients)

Additional messages

- The budget will not give you access to private healthcare services. (patients)
- The budget will not provide you with more services than you currently have. (patients)
- The scheme is voluntary - you don't have to take part. (patients)
- You can choose what care and support you'd like to use to meet your needs. This could mean that you choose a range of different options and providers. (patients)
- It's an amount of money (or services to the equivalent value) that's available from the NHS so that you can make choices about the type of health care and wellbeing support you'd like. (patients)
- This is a new way of choosing and paying for services for those patients who are eligible. A personal health budget makes it clear how much money you and those who support you have available for your health and support needs. This gives you the choice to decide what care will work best for you. (patients)
- You have as much choice and control over your health care as you'd like. You will have a wide range of care options to choose from which support your health and wellbeing. (patients)
- You will be supported to help you develop a plan that's right for you, based on your personal health budget. (patients)
- Having a Personal Health Plan gives you lots of choice. Lots of people have said that being able to choose their own healthcare makes them feel more involved and positive. (patients)
- If there are other things that would make a real difference to your health and wellbeing

then discuss this with ...

(insert relevant contact details here)

Personal Health Budgets can be used for a range of activities, including

- personal exercise equipment
- massage/alternative therapies,
- ways of promoting healthy eating and/or weight loss,
- ways of getting out and meeting other people,
- equipment for leisure activities/hobbies,
- travel expenses to access universal services or to pursue leisure activities,
- purchase of air-conditioning or de-humidifying equipment,
- equipment to improve access around the home. (stakeholders and patients)

Patients can't choose

- emergency or acute services, which are already provided by the NHS to everyone in the country;
- the vast majority of primary healthcare services (including visits and assessments), as GPs provide a comprehensive, registration based service, which is free at the point of access;
- anything illegal;
- gambling;
- debt repayment;
- tobacco;
- alcohol;
- treatments (like medicines) that the NHS would not normally fund because they are not shown to be cost-effective. (stakeholders and patients)

5. Communication tools and techniques

The following section outlines the most frequently used communications techniques for you to consider when pulling together a communications plan. You will need to have identified your objectives (section 2) and target audience (section 3) before deciding which options may work best for you. If available, always get advice from your Communications colleagues before undertaking activities.

A. Branding

Branding is an extremely powerful marketing technique which helps customers recognise a service or product. It helps deliver a consistent and professional message to your patients and stakeholders.

Successful branding enables the customer to recognise the product or service instantly. The brand includes the design, logo, strap line/mission statement, font and colour scheme, which should appear on all your communication materials for Personal Health Budgets.

Personal Health Budgets will benefit from using NHS branding - it is a much trusted brand and adds credibility and professionalism to any initiative.

The NHS and/or other appropriate logos should be used for Personal Health budgets.

The following strap lines also apply:-

- Your Health, Your Choice
- Understanding Personal Health Budgets
- Health Care Choices

B. Advertising

Advertising is one of the more common communications channels.

Advertising appears in a wide range of media - print (newspapers and magazines) and broadcast (TV, radio and internet), outdoor (poster sites, buses).

Costs can vary significantly depending on where you advertise.

You need to think whether advertising is the right medium for your audiences and messages and whether it offers value for money.

So ask yourself the following questions:

- Who is my target audience?
- What do they read/see?
- What do I need them to understand/do?
- How much will it cost?

If you decide to go ahead then make sure that your advert is AIDA. This stands for:

- A Attention** - How will you catch the customers' attention? Ensure your chosen advertising method is as clear and eye-catching as possible
- I Interest** - What information do you need to include in your advertisement to generate interest?
- D Desire** - What will make your advert stand out from the rest? Stimulating desire is the most challenging part of your advertisement. You should outline the key benefits to the customer in order to create a need
- A Action** - Think about what you want your customers to do when they have seen your advertisement and provide them with any tools they may need to do this, eg contact details for more information.

Don't forget to make sure that you use clear, concise language and that you don't use jargon.

Sample Advert

**Your health
Your choice!**

**NHS patients now
have more choice**

about how they buy or access health care and support services such as physiotherapy or home nursing. If you're entitled you can have direct payments or services to the same value to support your healthcare needs.

These are called
**Personal
Health Budgets**

**Don't miss out - contact
to find out more**

Work out all costings before a decision is made - this should include design costs and the cost of advertising in your chosen product. You need to make sure that you ask for a discount on the rate card (list of standard prices).

If you have a Communications Team, remember to ask their advice when thinking about adverts. They will know about key local publications/outdoor sites and may have negotiated discounts with suppliers on behalf of your organisation.

C. Media relations

There are other ways of getting material into the media, rather than advertising.

Media also includes editorial - which you don't pay for.

The first step is to send a media release to the publication, radio, tv or website that you are interested in. This should:

- Contain news; make sure it is something new, not just rehashed old information.
- Give journalists enough basic detail to write a short news story without needing to contact you.
- Include enough information to answer every journalist's key questions, including the who, what, why, where, when and the how.

- Be clear and concise, so the journalist can grasp the details when they read it for the first time.
- Contain the key messages about Personal Health Budgets
- Use concise, clear language to avoid misunderstanding.
- Ideally include a good photo - this can speak a thousand words (When using photos it is essential that you acquire the relevant written permissions from those pictured in the photograph).
- Include a story from someone who has experience of the thing you are talking about and is a member of the target audience.

Media releases are most effective if you use the following format:

- Title - press release (and add the date).
- Headline - sum up the story in up to seven words.
- First paragraph - sum up the most newsworthy aspect of your story.
- Second and third paragraphs - expand on this to explain the story in more detail and answer who, what, where, when, why and explain how.
- Quotes - the next paragraphs should contain a quote from a relevant spokesperson. Always state the name and title of the person being quoted. Always include at least one quote from someone senior in your service.
- Write the word 'ends' at the end of the story to show the journalist this is where the 'for publication' part ends.
- Notes to editors - add any background details such as statistics, web links and contact numbers for further information. Include your contact details here or at the top of the release.
- No more than 2 sides of A4.
- Use double line spacing.

By building good relationships with media contacts, you have an increased chance of having your media release included in a publication. Make sure you keep editors and journalists informed of Personal Health Budgets and the success stories. Remember, using real people's stories helps to bring your press release to life and make what you're talking about feel more real. So you might have a good example of what patients have spent their money on or how someone's life has been improved because of the services they've used eg they are more confident and independent because of attending a social group or having communications aid software for their computer.

D. Promotional material

You may need to produce printed materials for your audiences. This could include leaflets, flyers, posters, letters, information sheets and newsletters.

Deciding on the most effective type of promotional material is crucial to gaining a good response; sometimes more than one of the methods mentioned above can be used in conjunction with one another. For example after sending out information about the service you provide via the post or email, you could follow up with a phone call.

Here are some hints and tips when producing:

Leaflets/flyers

- Cover the benefits of Personal Health Budgets, while still being succinct
- Use photographs or graphics wherever possible (but remember to get relevant written permissions when using photos)
- Remember to include important contact details
- Don't include time specific events on generic leaflets - this will decrease the shelf-life of literature

Posters

- These are good for reinforcing the message in your leaflets/flyers
- Keep simple and ensure same branding (image) as leaflets
- Ensure text and contact details are in large eye-catching text
- A4 posters are more likely to be put up on pin boards in shops/supermarkets/GPs surgeries etc, whereas larger A3/A2 size are better for exhibition stands and for display around your own premises (reception etc)
- Think about where your target audience is likely to see them

Information sheets

- Information sheets can outline all the details stakeholders/partners need to know about Personal Health Budgets.
- You can tailor these for key groups such as primary care independent contractors and their staff including general practitioners, dentists, chemists and opticians.

Newsletters

- These will be more relevant for stakeholders. Include up-to-date information that is relevant and of interest.
- You may want to include details of forthcoming events, photography, good news stories, case studies of patients who use your services etc.
- Points of contact should be made easily accessible so readers know how to get in touch with you should they have questions or need support.
- Newsletters are also a great opportunity to highlight positive stories, which may result in word-of-mouth referrals.

e-bulletins

- e-Bulletins are an electronic newsletter that can be distributed quickly and cheaply via email – make sure stakeholders have subscribed to receive these so they aren't perceived as 'spam' (unwanted email). – they should be eye-catching (not look like standard emails) and contain only short articles with links to further info.

You also need to think about how you will distribute this material e.g. you might want to distribute patient leaflets via local GPs, community centres, libraries, supermarkets, surgeries, dentists or to their home address.

You should also think about existing channels that your audience use, such as lunch clubs, health groups or other social networks which can help spread the word. When doing direct mail (this could be via the post or e-mail) you will need a high quality mailing list and an

effective system of logging any enquiries, interest or referrals - logging enquiries is a good way of building a database.

Printed materials - hints and tips:

- If you need to create a new professional design, a design agency can be commissioned to do this on your behalf. This option will cost more than going direct to a printers, as you are paying for a professional designer to create an image for you. Costs will usually include the agency liaising with the printer on your behalf.
- If you just need a basic design or a re-print, you may want to liaise directly with printers, as most will offer a basic design service.
- Wherever possible, speak to your communications staff before starting any print work. They will probably already have working relationships with designers and printers and will be able to help you source the best value for money providers.
- Remember you can have as many proofs as you want to ensure you are happy with the work before it is signed off to print. However, make sure you provide designers with a clear written brief and ensure that the copy/text you provide is accurate before giving to the printers, as you may get charged extra if you ask for lots of extra changes and proofs that are because of your errors.
- Get as many people as possible to check the proofs from the printers before you approve for print, as it's easy to miss mistakes if only one person has checked a proof.

You may also want to consider telesales – this can be a good channel for targeting those patients who are less likely to respond to written messages. You will need to ensure you have very specific contact details to make use of telesales, so that you only target those patients who are eligible.

E. Briefings and presentations

These are an easy and cost efficient way of communicating with stakeholders and staff- they are not useful for communicating with patients.

You will need to:

- Prepare presentation materials - this could be a powerpoint presentation, handouts, a film etc. For any of these you need to make sure that you address the key messages and benefits of Personal Health Budgets. This can be easily adapted and personalised for different groups.
- Consider events - you can either develop your own tailor made event or piggyback on existing events and activities where you may want to consider having a presence e.g. speaking, having an exhibition stand.
- Hold briefings/workshops/meetings e.g. for staff so they are confident about discussing Personal Health Budgets with patients. These can be specifically organised meetings, events or workshops. Or you could ask to attend existing meetings or events, such as GP practice meetings and PCT staff meetings or team briefs to cascade information to all staff.
- Identify key stakeholders/organisations and attend meetings as a guest/representative or ask them to spread the word.
- Request meetings/presentations with the local partners/groups.
- Keep an eye on the local press for relevant community meetings staff could attend.

F. Events and Open Days

Holding an event or open day is a great way to encourage potential stakeholders and/or patients to meet staff and view services and facilities. From a public/patient point of view, events are a great opportunity to view without having to commit or sign up to Personal Health Budgets.

- Families have the opportunity to meet the staff and have a “taster” of the facilities available
- Provides an opportunity to make services and benefits tangible
- Can be tailored towards any budget - from a simple coffee morning to something more sophisticated
- Excellent PR opportunity - a good way of getting press involved
- Think about asking someone to tell their own Personal Health Budget story - how it worked for them and any benefits. It is always better to hear first hand from someone who has experienced new approaches.

Before making any arrangements, there are a number of things you need to consider prior to organising your event:

- What are my key aims/objectives? Possible objectives might include: to increase the take-up of Personal Health Budgets and, to engage with the community to launch this new approach. Once objectives have been identified, you will have a clearer idea of the type of event required.
- What are your timescales? For larger events you should start planning three to four months prior to the event date. Depending on the type of event, invitations should be sent out approximately two months prior to the event date to give everyone enough notice to attend. Smaller coffee morning type events may only need a month's notice. Always ensure you have allowed enough planning time and preparation prior to advertising and issuing invites.
- The resources available will have implications on the type and size of event you hold, so it is important to consider availability of
 - Budget
 - Staffing
 - Time
 - Space

G. New Media, Websites and Intranet

Lots of organisations are now using websites, intranets and new media such as social networking websites and blogs as a way of communicating their services to current and prospective customers.

These are an excellent way of engaging with stakeholders and patients 24 hours a day. Make sure that you have up to date information on all relevant websites including NHS, PCT and local councils.

The key to using new media is to ensure information is relevant and up to date. You don't have to re-print materials if something changes.

Remember, you need to ensure you have sufficiently trained staff and resources to keep websites up to date and informative so that users keep returning.

The same principles apply when using new media as using other forms of communication.

- Keep messages simple and clear
- Ensure information is easy to find via search browsers – choose keyword phrases which will be used by your audience, not necessarily by you (for example, they most probably won't be searching initially for 'Personal Health Budget' but may look for 'healthcare I choose') and use these phrases within the text on your pages. Also encourage relevant partners to link to your site.
- Remember to follow your branding and re-enforce key messages
- Remember that information tends to be shorter and more focussed on webpages

Social networking sites such as Twitter and Facebook are a very popular, easy and cheap way for organisations to announce new services.

You will need professional expertise when dealing with any of these forms of electronic communications to mitigate against the risk of mis-use. Liaise with your IT professionals to ensure information on your websites/intranet

are monitored and safe from viruses. Check if you already have a policy for communicating on social networking sites. If you don't, you should consider developing one to ensure you stick to your key messages, updates are monitored and checked before being issued and duplication is avoided.

H. Communications on a budget

When considering which tools and techniques to use you will also need to consider your budget and which options are likely to be the most effective and the best value for money. The timescales you have will also be a factor when determining your options. Remember that all communications activities will have a cost attached (ie staff time), and those activities which require print (adverts and promotional materials) are likely to cost more.

Lower cost/shorter timescales

- Briefings and presentations
- Media relations
- Events and open days (if you go for the simple 'coffee morning' type of activity.)
- New media, websites and intranets
- Blogs
- Word of mouth
- e-Bulletins

Higher cost/longer timescales

- Advertising
- Promotional materials

Remember that all printed materials will involve the use of designers and/or printers. This will involve checking proofs and feeding back amends before materials are approved for print – this can turn into quite long production times if a lot of amends are involved. Where possible, you should always get communications professionals involved in this process to avoid costly mistakes.

6. Research and evaluation

You need to evaluate your communications work to assess the degree of success.

The ultimate test is whether you have met your objective e.g. have you recruited 50 patients onto the scheme? Have you made sure that the benefits of Personal Health Budgets are understood?

The former is very stark. The latter - have you made sure that the benefits of Personal Health Budgets are understood - needs some research to be able to answer. You may consider research prior to doing any communications work - on what is the level of understanding or awareness now amongst your target groups and what is the level after your communications work?

You could:

- Run focus groups of patients to assess their level of understanding now
- Run focus groups of stakeholders to assess their level of understanding now
- Develop a simple questionnaire to assess patients'/stakeholders' level of understanding. Keep questionnaires short and simple. Establish what you really need to know, and keep questions direct.
- Check the number of users for your website and how they are accessing it

Overleaf are some sample questions you could use in an initial questionnaire.

To help us improve our service to you, please take a few minutes to complete this short survey

Please respond to each question by circling **yes**, **no** or **don't know**

Have you heard of Personal Health Budgets? **Yes** **No** **Don't know**

Any comments

Do you know what type of services you can have if you're entitled to a Personal Health Budget ? **Yes** **No** **Don't know**

Any comments

Can you remember where you heard about Personal Health Budgets? *[Personalise for your activities eg]*

Leaflet **Advert** **Website** **Event** **Other (please give details)**

Do you know if you are entitled to a Personal Health Budget? **Yes** **No** **Don't know**

Any comments

Would you like to know more about Personal Health Budgets? If so, please complete your details so we can contact you to discuss your needs

Name	Address
Tel	
Email	

Please return this questionnaire to

Thank you for taking the time to help us improve our services.

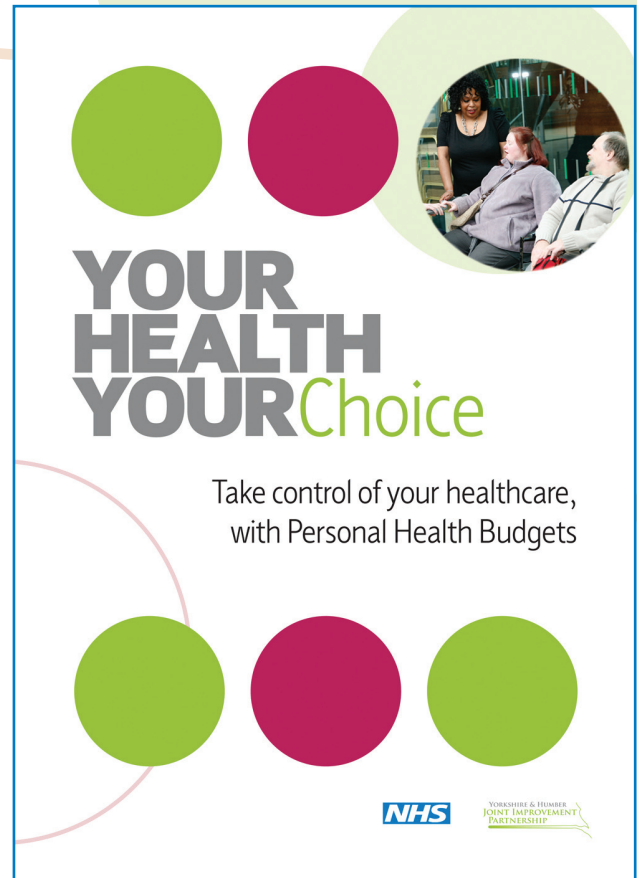
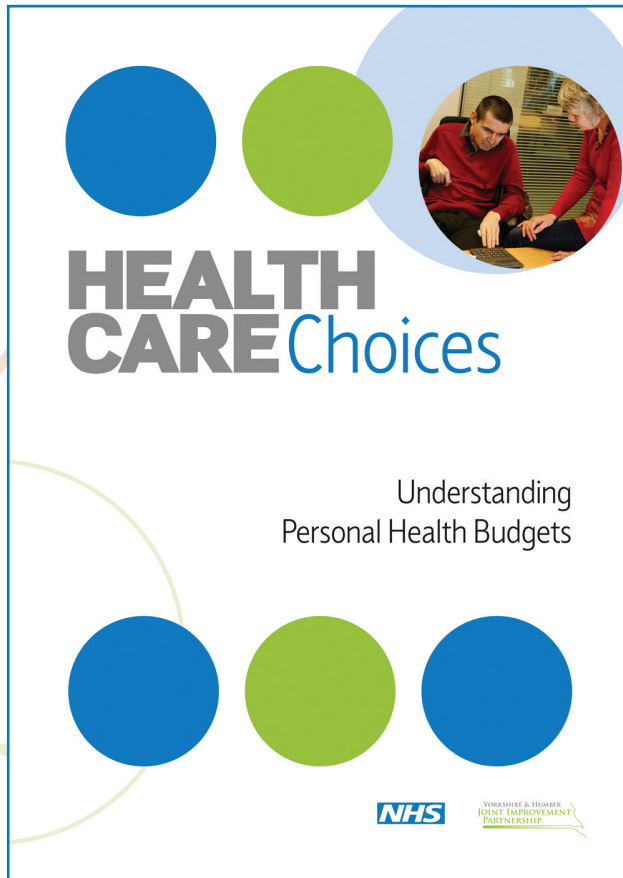
Analysing your research from the information people have given you provides an excellent basis for developing a communications plan. For example, if the choice and flexibility of Personal Health Budgets seems to be the main benefit, focus on this in any advertising and promotion.

People's needs and views are continually changing, so research should be carried out on a regular basis, and continuously updated and assessed.

Ensure the overall effectiveness is evaluated – you may do this by checking how new patients found out about Personal Health Budgets (e.g. via your adverts in the local paper, poster in GP's surgery, a telephone call, a letter etc) and set up systems to log this. Once you have this data you can work out the cost per 'recruit' per channel e.g. you paid £2,000 for an advert and recruited four patients from this advert – cost of advert £500 per recruit.

7. Leaflets templates for stakeholders and patients

The following leaflets are available for you to use with your stakeholders and patients.



Both leaflets can be downloaded from [www.\[insert local website details\]](#)

8. Case Studies/Stories

Using case studies and stories from people who've used Personal Health Budgets is a great way to get your message across about patients from your local area. You should put mechanisms in place for collecting these stories so you can use in your promotional material and press releases. Remember to speak to colleagues who deal with patients to get some ideas about what you could include.

An example of a real story in Sheffield is available as part of this toolkit – Michael and Maureen's Story. You can also find real stories on the Department of Health website at www.personalhealthbudgets.dh.gov.uk/about/stories/

Maureen and Michael Witheford's Story

Maureen Witheford, Michael's wife, tells their story of going through the process of setting up and receiving a Personal Health Budget.

We'd been with an agency since Michael came out of the hospital in 2005. The agency was good but we didn't feel we had control over who was coming into our house. So in August 2008 I started to make enquiries about getting a budget. The issue was that Michael's care package was split between Health and Social care money - the Social part we could have as a direct payment, but not the Health part. The problem was that we had chosen to cherry pick the staff that we wanted, so it wouldn't have worked for me to have some of the funding and the ex agency to have the rest. The social part was 'really easy, we can put it in straight away!' but the Health part took from September to May to get some sort of agreement into place! I was really worried about losing my best carers. At the time health wasn't allowed to pay directly to me. This has changed now as health can give direct payments as long as they have the right permissions from the Department of Health.

The solution we decided on was that there would be an intermediary, which in our case is HFT (formerly known as Home Farm Trust). Health pays HFT the budget every month. I then have to tell HFT the salaries, tax, national insurance, training costs etc. This means I don't actually handle any of the money, I just tell a third party how to allocate it, but obviously I have to account for all of the money to Health at regular intervals, to



make sure that I haven't gone off on holiday to Barbados or anything like that!

Michael is now fully Health funded and we have chosen to have the entire budget spent on PAs and care for Michael. I want Michael to be included in as much outside activity as possible, not just left at home, and the carers we have know Michael's likes and dislikes. We have a wheelchair accessible vehicle and Michael is taken out on a daily basis.

Now that we're receiving a Personal Health Budget we're much more settled. Michael's moods are very changeable and rapid, so an ad hoc carer couldn't look after him - he can be smiling one minute and be very challenging the next. Michael's carers all know his signs and can anticipate and help him work through the mood swings caused by his brain injury.

The Personal Health Budget has also helped us with family emergencies. My Dad died at Christmas and for the two weeks before his death we were at hospital most of the time. Michael's team of carers were very flexible and all rallied round at a very difficult time and Michael was well cared for whilst I was unable to be there.

Taking control of your support is not as bad as some people might think - people are possibly scared but they don't have to handle everything if they don't want to. For our family, I think it's when we're not in control that things start to wobble. We like to have things in our own hands so I've chosen to take on maximum responsibility, but it's not necessary to do everything that I do!

People can have Personal Health Budgets and have as little, or as much, involvement as they want. I've chosen to be the employer and have registered with HMRC. I prepare the salaries myself, but if I wanted to I could employ an agency. The agency would then sort out salaries, training etc., but I would have to pay agency fees associated with those services. I do it all myself so I can allocate more funding to Michael's care but there are a lot of little hiccups along the way that don't occur to you. For example, if you do decide to do everything yourself then you have to arrange employee and public liability insurance (cover starts at around £80). Then there's the CRB checks - individuals cannot apply for CRBs so this had to be done through a third party (in my case A4E). Also, PAs will need up-to-date training but this is available from Sheffield City Council (Brockwood) including safeguarding adults, first aid and epilepsy awareness - there is a lot of help available.

I've done this now for two years and it's the best thing I've done. Michael is very happy with his team and all of the carers are really good with him. I am still in full time employment, and when you have to go to work and leave people in your house for a long period of time you have to build up a rapport with them and we now have a team of seven people who I wouldn't hesitate to leave at home with Michael. I trust them completely. Trust is the big word for me.

