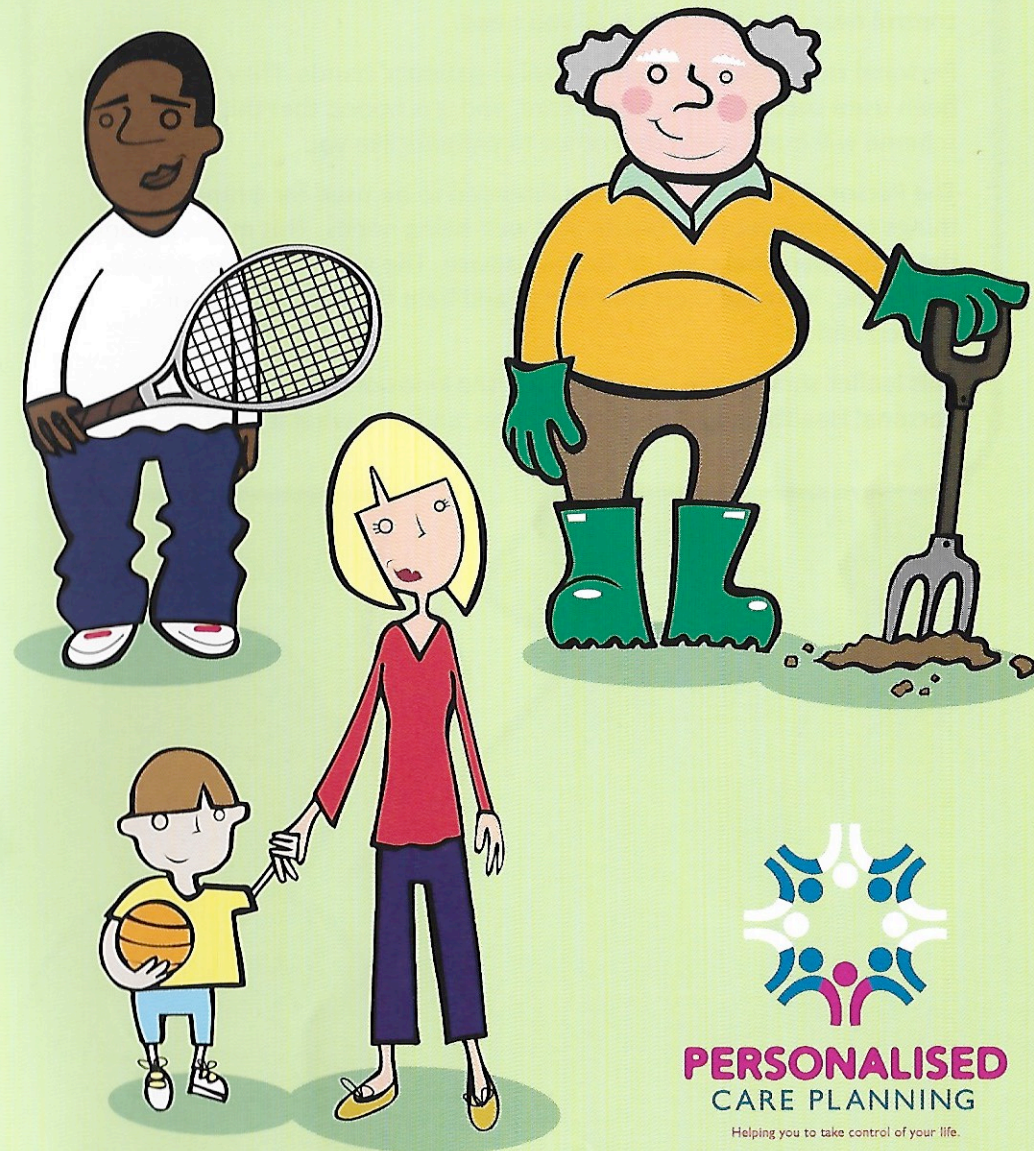
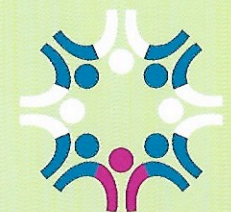


# PERSONAL HEALTH BUDGETS

## What they mean for you



[www.nhslocal.nhs.uk](http://www.nhslocal.nhs.uk)



**PERSONALISED**  
CARE PLANNING

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## INTRODUCTION

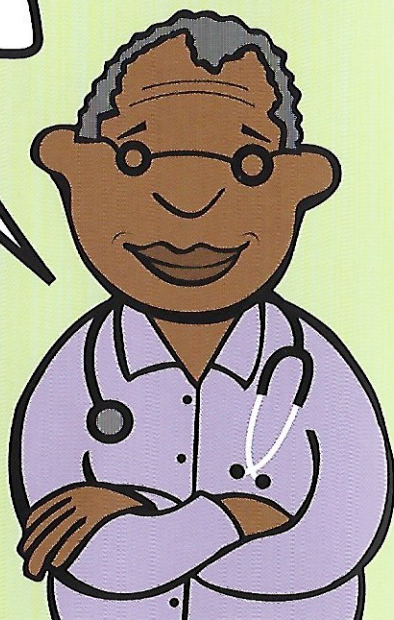
You've received this leaflet because you've chosen to have a **Personal Health Budget** or are considering whether one is right for you.

The idea of the scheme is that patients are given a set amount of money and can decide what care is best for them. The aim is to give you as much control over your healthcare as you need.

Personal Health Budgets put control in patients' hands. They have already been used successfully in social care, and it is hoped that this new scheme will make a real difference to patients like you.

The Personal Health Budgets are intended to be used for a range of things to meet people's health and well-being needs. This might include therapies, personal care, or lifestyle advice. The aim is to make people feel better, increase their confidence and help them manage their own condition.

This leaflet should give you an idea of the kinds of things that your Personal Health Budget can be spent on, and also what it can't.

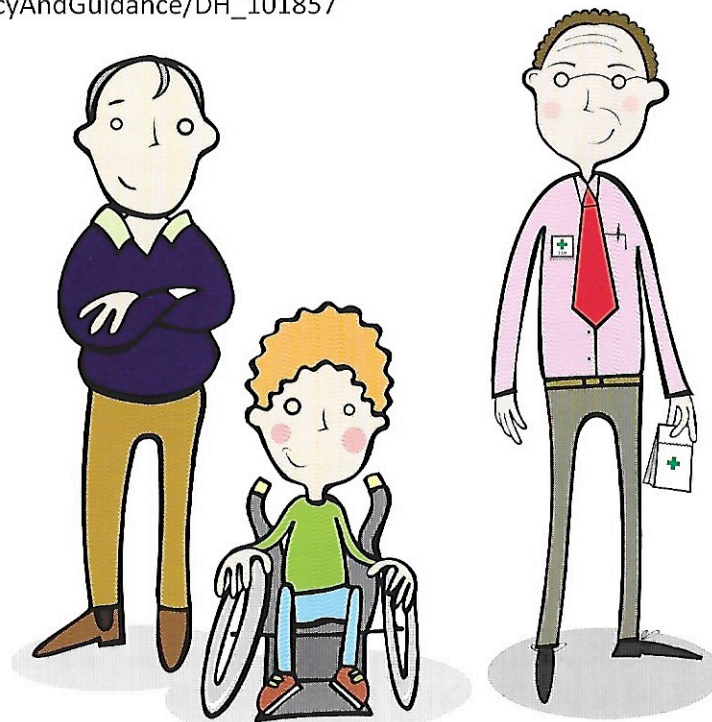


## PERSONAL HEALTH BUDGETS – WHAT DO THEY MEAN?

- You don't have to have a patient budget if you don't want one – it's completely voluntary
- You're not being left on your own – you'll have support when you make your decisions
- There should be clear accountability for the choices made
- No one will ever be denied essential treatment as a result of having a Personal Health Budget
- Having a Personal Health Budget does not entitle someone to more or more expensive services, or to preferential access to NHS services
- There should be good and appropriate use of NHS resource

**You can find out more about Personal Health Budgets here:**

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_101857](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_101857)





## WHAT KINDS OF THINGS COULD I SPEND MY PERSONAL HEALTH BUDGET ON?

- Purchase of personal exercise equipment, e.g. treadmill, exercise bike, bicycle
- Personal Health Trainer
- Massage to improve circulation and pain relief
- Alternative therapies such as aromatherapy for pain relief and relaxation (reduce anxiety)
- Alternative approaches to smoking cessation
- Ways of promoting healthy eating and/or weight loss, e.g. kitchen equipment, bathroom scales, cookery courses, the cost of joining a slimming club
- Ways of getting out and meeting other people. This could include funding leisure activities/hobbies that keep people occupied/stimulated and involve accessing the local community (providing opportunities to socialise)
- Equipment for leisure activities/hobbies (see above), for example art materials, study books or sporting equipment
- Travel expenses to access universal services or to pursue leisure activities (see above)
- Funding to enable you to be accompanied on an activity if you need it
- Purchase of air-conditioning or de-humidifying equipment (for people with breathing difficulties)
- Equipment to improve access around the home, for example ramps to improve access to different parts of the home or garden for wheelchair users

These are meant as examples to give you an idea of what your budget could be spent on. If there's something else that you think would make a real difference to your health and well-being, don't be afraid to raise it with your patient budget lead.

## WHAT YOU CAN'T SPEND YOUR PERSONAL HEALTH BUDGET ON

While the list on the page opposite is very wide-ranging, there are a few things that you can't spend your Personal Health Budget on:

- Emergency or acute services, which are already provided by the NHS to everyone in the country without charge
- 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

The money can't be used to part-fund treatments alongside patients' own resources. If a patient, for any reason wanted to purchase additional care privately, this would need to take place separately.

However, a patient could use their budget to purchase private services that meet their personal health outcomes, e.g. a private physiotherapist.

Your patient budget lead will be able to help you if you have any queries about what your budget can and can't be used for.





# PERSONAL HEALTH BUDGET PATIENT STORY – PATIENT A

**Before PHB:** Prior to receiving a Personal Health Budget, Patient A was suffering from a Hypoxic brain injury as a result of major back surgery. Now she exhibits dementia-like symptoms and unfortunately suffers from a morbid fear of men (this can sometimes include her husband as well).

*Previous care input was provided via CHC funding care agencies. As a result, the family cancelled care provision because of the amount of distress caused by lack of care, bad standards, unreliability and lack of flexibility and untrustworthiness of care staff.*

**Previous SC budget:** £0 always CHC funded due to injury being fault of NHS (awaiting cost of previous CHC package).



**Now:** Patient A now uses the PHB to employ a female neighbour (family friend for 20 years) and daughter to help with personal care and leisure activities.

In terms of improved outcomes, the husband is now supported by additional carers to help Patient A with domestic tasks and leisure activities. They have a familiar friend providing consistent care on a daily basis and this has helped Patient A with her anxieties.

Carers live locally and are available without notice to support Patient A at any time of the day. Due to Patient A's fear of men and times when she does not recognise her husband and becomes highly anxious in his presence, the husband has to occasionally leave the patient alone in the property. Carers can be available immediately to support with this situation and their familiarity with patient's condition and knowledge of how to de-escalate situation is vital.

Patient A's daughter is one of two carers employed. General feeling in the family is good as daughter has been previously suffering with a health condition and had little work experience to gain employment. Her daughter is now employed and contributing to society as well as gaining work experience for a future career, and as a result her family are very proud of this achievement.

The PHB was seen as the perfect opportunity for improved quality of life for Patient A and her family, due to a traditional package through an agency not working out due to agency workers being unreliable and the patient's inability to interact with strangers.

**Current PHB Budget:** £26,089.94 (provided via managed account by The Rowan).





# PERSONAL HEALTH BUDGET PATIENT STORY – PATIENT B

**Before PHB:** Patient B was diagnosed with Multiple Sclerosis in 1970. High personal care needs, tracking hoist, urine infections, high impact on personality, no agencies – had an impact on lifestyle, unpredictable nature of illness – typical CHC, hallucinations due to urine infections. She has swallowing issues, fork-mashed diet and monitoring when eating is required.

Patient B also received 6 weeks respite a year at £375.00 per week minus £150.30 client contribution (also £108.70/week health contribution) as well as PA Support 21 hours PA support a week @ 10.37/hour.

## Previous budget included:

- Social Care £12,672.24
- Service User Contribution £901.80
- Health: £652.20
- **Total: £14,226.24**

*Previously, Patient B employed her husband via a Social Care direct payment, to provide personal care support and day opportunities. Patient B was then assessed as being CHC eligible. Due to not wanting an agency carer Patient B received no funding from social care or health.*



**Current PHB budget:** £12,980.38 fully funded by health (saving for social care of £12,672.24).

**Now:** Now that Patient B receives a PHB, her husband is employed as a PA and provides help with personal care tasks for 19 hours a week however he can now use these hours flexibly as Patient B's health and social needs dictate. Her husband is there to meet night-time needs of turning and toileting which agency carers could not provide and he is also there to support in an emergency.

Due to flexibility of care, the couple can plan their life and have more control, rather than waiting for agency workers to arrive at inappropriate times, with strangers providing personal care. This means that they can have a holiday at a friend's caravan without giving notice to agencies etc. Overall, care is now available as required, at all times of day.

Due to husband's 'wages' patient is benefitting from increased social activities and holidays the couple enjoy together.

*"If we didn't have a PHB, we'd have at least 10 nurse or agency staff visits a week – this is our home and we would feel invaded and would have very little privacy or flexibility to live..."*  
**Carer, Newcastle under Lyme**

*"...The standard of care that the husband provides for his wife, is keeping her as well as she is..."*  
**District Nurse, South Staffordshire PCT**

