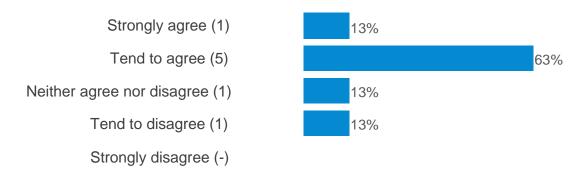
Individual Service Fund Provider Survey - May 2022

The following provides top line summary of the survey based on 8 respondents as at 30 July 2022.

The policy is clear and easy to understand

Please select one option only

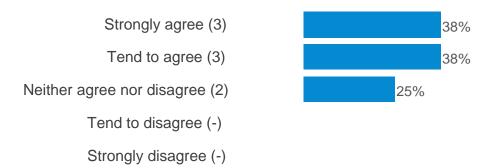


Why do you say this?

- The section which details the way in which a provider would keep detailed records could be expanded. For example, an explanation or example of those detailed records could have been given.
- There is one contradiction section 1. Policy Statement says "An ISF cannot be used for 'shared costs' which are care managed for example shared support in supported living or shared accommodation arrangements" but then in section 2.1 states people can "Commit part of their personal budget via a care managed arrangement to shared costs such as those in a supported living or shared accommodation but want to use the rest of their budget in a flexible way." This is quite confusing perhaps a terminology issue between ISF and personal budget needs to be clear, or if they are one and the same, the wording is contradictory.
- We understand the purpose of ISF is that people can choose who provides the care, this needs to be clear so providers are aware they support the person to recruit the care/support worker. Also would need to include contingency and what happens in this case it may be providers don't have resources to facilitate choice. Also what happens in the event that a client does not require care on short basis e.g. hospital, not clear. Is the hourly rate set by Lancashire CC or will providers to develop hourly rate based on costs. Oversight/support from social workers what will that consist of. Will the 3 day notice period apply (payments).

Individual Service Funds will offer choice for people in their care and support

Please select one option only

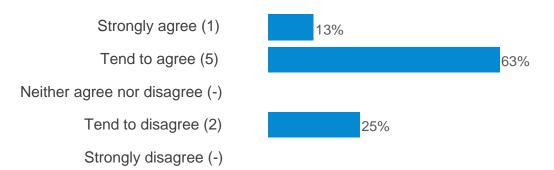


Why do you say this?

- An ISF will give the person greater choice in how they spend their allocation.
- In line with the policy statements flexibility, accounts for more or less support across the weeks, ability to use the fund for different providers depending on the service required etc.
- Agree this is of benefit to clients, the concern is providers being able to deliver and meet client expectations and flexibility with current and ongoing recruitment challenges.

This policy gives clear rules on how a provider should manage an ISF on behalf of the person

Please select one option only

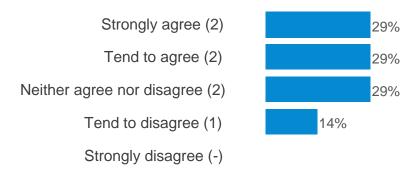


Why do you say this?

- More detail needs to be given on how the provider records spending
- There may need to be more stipulations in the agreement signed between all parties.
- Lack detail: Contingency arrangements in the event that a support worker is unable to provide support Flexibility, to what extent to be clear how and when is this agreed. What is can be used for:
- i.e. 2.2.14 contradicts with para 3 (1). Client contributions where does a client contribution go does that come to provider or Authority? As a provider we would prefer it to go to the Authority. Can family members be paid? Clarity on what is considered as care and support i.e. counselling, activity e.g. swimming can these be included. Liability for providers (client needs are met safely and legally including outsourced services). Re 2.3. Capacity. More details on how the authority sees this working in practice.

The ISF policy states clear benefits for providers

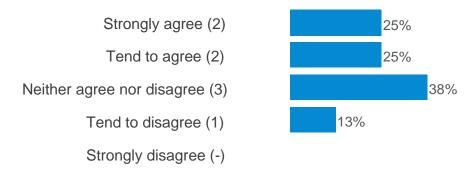
Please select one option only



Why do you say this?

- The provider can work with the individual as a trusted assessor and probably get services quicker / in a person-centred way under this arrangement.
- Providers that offer truly person-centred support should be offering the choice to individuals
 anyway to be support how, when and what people want to do with their lives and support. ISF's
 tend to bring about uncertainty around inflationary increases and therefore increased
 administrative burden to both the provider and the LA.
- Benefits to providers if costs are covered in hourly rate. Can offer tailored services to clients, through enabling people, promoting choice and control. Trusted assessor, more information re what this involves particularly around roles and responsibilities for the Authority and Provider.

If you are a provider, the costs involved in managing an ISF will be a potential barrier to your organisation offering ISF's Please select one option only



Why do you say this?

- Costings have not been worked out therefore unable to give an accurate answer
- We already produce reports, audit trails etc. so I'm hopeful it would be only a tweak to existing systems.
- We already provide a number of ISF's, but the issues of inflationary uplifts over time has caused an additional administrative burden for both the LA and us as the provider.
- The hourly rate would need to take into account operating costs, outsourcing and contingency, with a surplus to support working capital and investment.

What concerns, if any, do you have with this policy?

- More detail needs to be given, For example, a list of what a client can and cannot spend their allocation on. Also, more detail on what records will need to be kept.
- The fact that while I think this is exactly why the council are doing this, we need to ensure it's not just a managed care situation in disguise! if it was, just say it's what it is!
- In addition to what we have set out thus far: Under what circumstances would the Authority consider an ISF or someone who lacked capacity, can this be included in policy? The Policy does not state where the Provider should hold the ISF ie. separate client account or company account? In 2.1. It states that: They (ISF) can be useful for people that: Commit part of their personal budget via care managed arrangements to shared costs such as those in a supported living or shared accommodation but want to use their budget in a flexible way. Yet, in section 1 it states that: 'an ISF cannot be used for 'shared costs' which are care managed e.g., shared supported living. The policy would benefit from setting out the events when a provider may review their hourly rate e.g. annual review, in the event of unforeseen circumstances e.g. fuel increase, change to employment law that impact on terms and conditions therefore costs, increase mileage costs etc. Contingency arrangements benefit from more information with regards to what should be included in contingency.

What do you like most about this policy?

Please type in the box below

- Clear and easy to understand
- Enables people to have more choice and control over their lives.

What do you dislike most about this policy?

- I'm not convinced it won't end up like the ISF arrangements we are already under with people who lack capacity so, it may end up with us being asked to do something different while it still functions in reality exactly like a manged care arrangement.
- Lack of clarity as outlined in the previous sections.

Do you wish to make any other comments about our new policy?

Please type in the box below

No thank you

Are you responding to this proposal as...?

Please select one option only

A care provider that supports people to manage or use their ISF

(4)50% (4)50%

A care provider that currently does not support anyone to manage their ISF

Other (-)