Evaluation of the made to measure pilot: pooling personal budgets first interim report

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Evaluation of the Made to Measure Pilot: Pooling Personal budgets First Interim Report: Research Brief

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Introduction

Made to Measure is a pilot programme to trial a new approach, offering parents of disabled children the opportunity to share information and jointly commission activities by pooling personal budgets. One of the key aims of Made to Measure is to support policy objectives to improve choice and control for families of disabled children (Department for Education, 2011). It is anticipated that the pooling of direct budgets will stimulate the local short breaks market and achieve value for money for families. Two projects have been established in Trafford and Plymouth. These projects will be working alongside parents of disabled children, to develop relationships between parents with similar interests and needs, and to support these parents to pool their personal budgets in order to directly commission the services they would like to use.

The Centre for Child and Family Research (CCFR), at Loughborough University has been commissioned to undertake an evaluation of Made to Measure. This is the first interim report of the evaluation of the Made to Measure pilot programme. The report will present the emerging findings of data collected between August 2013 and January 2014, approximately nine months into the pilot.

Aims and methods

The aim of the evaluation is to evaluate the effectiveness of the Made to Measure pilot to increase the availability of short break services for disabled children and their families, facilitate family involvement in the commissioning of short break services in their locality, and improve the ‘added value’. The evaluation also explores parent’s
views and experience of the pilot programme and the factors that inhibit or facilitate the successful implementation of the pilot.

A mixed method approach has been taken. The methods included:

- Four focus groups consisting of 25 parents of disabled children.
- A mapping exercise of the nature and availability of short break services in each locality.
- Five baseline interviews conducted with the Made to Measure project managers in each locality, short break service commissioners in both localities, and a short breaks’ broker in one locality.

Key findings

Progress to date

- As might be expected, both projects have advanced at different paces. However, it is evident that both projects have made substantive progress in the first nine months of the pilot.
- Both projects have established good links with the hosting local authorities and service providers and have started to develop processes for working together.
- At the time of the data collection, both projects had made good progress toward engaging parents in the pilot.

The wider context

- The evaluation found that the context within which Made to Measure is being implemented is a complex one, with many national and local changes to the delivery of services to families of disabled children being implemented. This complexity has been further compounded by uncertainties relating to budgetary constraints. It is anticipated that implementing a new way of working may be more difficult where the supporting structures to that innovation are in flux.
Some parents expressed a degree of dissatisfaction with personal budgets themselves. Their views and experiences of personalisation per se may influence the extent to which parents wish to engage in Made to Measure.

There was also some evidence to ‘pilot’ fatigue among some focus group participants, who were more reluctant to engage with Made to Measure.

It was evident that both local authorities are committed to the principle of pooling personal budgets. However, all the professionals interviewed acknowledge that the process of pooling and how Made to Measure intersects with wider changes within the sector is still to be clarified.

The short breaks market

Both hosting local authorities provide a range of services for disabled children and their families. In total 68 services were identified in Trafford, and 42 services were identified in Plymouth.

The short breaks market is complex, with considerable variations in the types of services available, the children and young people they seek to support and the range of providers active in the market.

Research carried out by CCFR suggests that local authorities are delivering fewer services. The findings of this evaluation support this view: in total, seven services were provided by the local authority and one was provided by health. The remainder were provided by voluntary and independent providers. This finding suggests that providers are central to improving the short breaks market as a whole and are therefore key stakeholders in Made to Measure.

A number of gaps in the type of provision were highlighted, including afterschool and school holiday activities, services for children with physical disabilities and occasional one off care for, for example, dentist appointments.

In addition to the type of services available, it was evident that other factors, such as transport, the number of staff available at the service, and the skills and knowledge of those staff, are very important factors for parents choosing to access short breaks.

Addressing the ‘wrap around’ factors identified by parents will be central in ensuring that the Made to Measure pilot is able to improve existing services
(as rated by families) through the timeframe of the pilot. Both projects have begun to work towards this aim.

Pooling personal budgets

- Overall the focus group participants were interested in the idea of pooling personal budgets and perceived it to be a useful route to access a better range of services and to exercise more choice and control than presently exercised.
- The projects have already begun to achieve positive outcomes for families, through bringing together parents of disabled children who have been able to share information and provide informal support.
- While pooling personal budgets may be suitable for some families and some services, the evaluation participants noted that careful consideration should be given to when and for whom pooling is appropriate. It will be important to bear in mind that pooling will not be appropriate for all families. Parents engaging in the pilot, but not moving on to pool should not be considered ‘failures’ in all cases. However, it will be important to ensure that families who might benefit from a pooled budget are given all the information and support they need to do so.
- There was some evidence in the focus groups, that those parents who felt better informed, who had previous experience with providers and who felt more confident, were more interested in the engaging with the pilot. It will be important to ensure that the pilot does not produce a ‘virtuous circle’ whereby those parents who already have access to the social and personal resources available to them are those who are primarily engaged in the pilot, at the exclusion of others.
- The focus group participants were also of the view that the pilot would help to improve the quality of services overall, through families ‘voting with their feet’ on the recommendations and experiences of other families.
- Concerns were raised regarding the practical implications of pooling budgets, including how the process would work in reality, how to manage insurance and make the payments.
• Some participants questioned whether pooling those budgets would add an additional layer of process onto an already complex procedure. The need to clarify the additional work required and whether this would be carried out by the parents, the Made to measure facilitators or another party such as a personal assistant was identified.

• It is important to recognise, however, that the pilot is in the early stages. As such, there are still ample opportunities to resolve these practical difficulties and to develop systems and processes that are not prohibitively time consuming for parents or professionals.

Conclusion
While not without its difficulties, the Made to Measure pilot presents parents with a unique opportunity to ensure that the short breaks’ market is sufficient to meet their needs. The ability to shape that market may ensure that parents can spend their budget in the way that will best meet their needs, and therefore, lead to the best outcomes. If the Made to Measure projects are able to respond to the questions about how the pooling process might work in practical terms, Made to Measure has the potential to lead to positive outcomes for disabled children and their families. The extent to which this is achieved will be explored in the next evaluation report.

References
Department for Education (2011a) Support and aspiration: a new approach to special educational needs and disability. London: Department for Education

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