

# Self-Directed Support

**A quick guide  
for practitioners**



Published by Social Work Scotland  
Funded by the Scottish Government  
April 2015

## **Self-directed support**

*“The lives of people who require support are enriched through greater independence, control, and choice that leads to improved or sustained health and wellbeing, and the best outcomes possible.”*

*Self-directed support: A National Strategy for Scotland  
Scottish Government 2010*

# Background

The Social Care (Self-directed Support) Act 2013, which became law on April 1st 2014 is part of a wider programme of public service reform and fundamentally changes the way that we deliver health and social care. Self-directed support reflects the common goals of both current health and social care policy to delivery better outcomes for individuals and communities.

It uses a holistic, person centred approach which gives people who require support greater choice and control over how they receive their support. It's an approach that has its roots in the independent living movement but is recognised as inclusive and empowering for all people who require support.

*"We are people first. The outcomes we want include having power and control, being able to take risks & contribute to society. This means that there needs to be a shift in power away from people who commission & provide services to users and carers..."*

*(User & Carer Panel: Report of the 21st Century Social Work Review: 2006)*

This simple but powerful statement from the User and Carer Panel should sit in the hearts and minds of staff from across the sectors as the justification for change.

In collaboration with other key stakeholders Scottish Government developed the Self-directed Support Strategy to help guide the direction of travel. The aim of the strategy, now supported by the Act is to deliver social care that is fit for the future. For self-directed support to be successful the choices available to individuals are key.

Delivering better outcomes through focused assessment and planning, improved information and advice, and a clear and transparent approach to the allocation of resources are critical.

Individuals are often best placed to say what would make a difference to them, their families or carers. There needs to be a move away from the strict definitions of what can and cannot be funded to achieve social care objectives and a move towards more innovative and creative solutions which support people to achieve agreed outcomes.

# Values

The Act introduces key values and principles into law. It is important to acknowledge these values and principles already underpin best practice and resonate strongly with core values within both the health and social work professions.

Successful implementation of self-directed support will be dependent upon practitioners and organisations keeping these values and principles central to their practice and wider policy development.

## Respect

We need to have regard for the feelings, wishes and rights of others.

## Fairness

It's about fairness to the individual, not the group or society, treating people in a manner that benefits and benefits their individual circumstances.

# Values

## Freedom

People having choices.

## Safety

People feel safe and secure – to enjoy safety but not be overprotected and to be free from exploitation and abuse.

## Independence

People are supported to maximise their potential, focussing on enablement rather than dependency.

# Principles

## Collaboration

The assessment and support planning must be done collaboratively with the person and relevant others.

## Informed choice

People must be provided with information and any reasonable assistance which helps them express a view and make choices on how their support is to be delivered.

## Statutory principles

## Participation & dignity

People should be provided with the help they need to participate in the life of the community and practitioners should facilitate their right to dignity.

## Involvement

People are encouraged to have as much involvement as they wish – in both their assessment and in the provision of any support.

# Practice principles

Practice should also be informed by the following principles:

## **Innovation**

Develop creative solutions together to meet agreed outcomes.

## **Risk Enablement**

People must be supported to feel safe and secure in all aspects of life – to enjoy life but not be overprotected and as far as possible free from exploitation or abuse.

## **Responsibility**

People should be able to take as much control over their support as they wish, and exercise that control in a responsible way.

# Legal duties and powers

The Act enshrines in law a number of key duties that organisations and practitioners must adhere to when engaging with people who require support.

The duties apply to everyone: adults, children, adult carers and young carers.

These new duties are intended to complement existing duties. They do not replace any other duties under other legislative frameworks. Practitioners will therefore have to be aware of all duties and use informed judgement where duties conflict.



## New duties explained

**The general principles of collaboration, informed choice and involvement must be at the heart of the assessment and provision of support.**

### What this means in practice:

You need to work with people, truly involving them in their assessment and support planning and ensuring that they have the right information and assistance to make an informed choice about how they wish their support to be delivered.

**Take reasonable steps to facilitate the person's dignity and participation in the life of the community.**

### What this means in practice:

Being part of your community and being treated with respect is important, you need to make sure that this guides and informs your assessment and the options and support that are offered to people.

**The person must be offered 4 options for receiving their support.**

### What this means in practice:

Once you determine through assessment that a person is eligible for support, you must explain that they have 4 options as to how this support is delivered. You will need to consider how to present this information in a way that the person can understand.



**Explain the nature and effect of all 4 options, provide assistance and signpost to other sources of information and support.**

**What this means in practice:**

You need to explain in a way that is meaningful to the person what the 4 options are. You will need to explain the impact and opportunities of each of the options including how they work and what responsibility and flexibility the person will have under each option.

## **Powers within the Act**

**Power to provide support to carers (of adults) following a carer's assessment**

**What this means in practice:**

You need to consider if the local authority should provide support to the carer. You need to find out what they need, if anything, to continue in their caring role. If you decide that the carer does need funded support, they must be offered support in the same way as the person they care for. The same 4 options and the other duties will apply.

## **The Act also says states:**

Local authorities must take steps to promote the availability of the options.

Local authorities must, in so far as is reasonably practicable, promote a variety of providers and a variety of support.

Access to the options provided under the new Act is of little value if there is a lack of variety in the range of providers or type of support available. Local authorities have a key responsibility to ensure there is a sufficient range of choices available to the person.

# Pathway to support - the professionals role

Reviews are completed in partnership with the person.  
Explore together if the plan is working or needs to be changed.  
Any adjustments to the plan are agreed and arranged.

**Review**

Support arranged and delivered as agreed under chosen option.  
Support plan monitored to ensure plan is working for the person.  
Timescales for reviews are agreed.

**Support**

Agreement reached as to how the plan will meet outcomes.  
Person has chosen how they wish support to be delivered under the 4 options.  
Plans are recorded appropriately.

**Agreeing the final plan**

**Support planning**

Support is planned in a creative and flexible way to meet agreed outcomes.  
Planning includes both funded and natural support.  
Plans identify how risks will be managed and positive risk taking supported.





**I need support**

Person approaches organisation for support.

**First contact**

Listen to the person and explore their situation.

Determine eligibility for further assessment.

If not eligible, offer advice, signpost to community supports and information.

**Eligibility & assessment**

Assessments are outcomes focused and done in collaboration.

All potential assets are explored at a personal, family and community level.

Provide assistance and signpost to information, support and advocacy if appropriate.

Involve the person and keep them informed throughout the process.

Eligibility for funded support from council confirmed.

# Eligibility and resource allocation

## Eligibility

Most local authorities have adopted the eligibility framework agreed by COSLA and the Scottish Government in 2009. This categorises risk into four levels: critical, substantial, moderate and low. Emerging evidence highlights that this eligibility criteria does not fit well with self-directed support.

Further work is being undertaken to consider how to make this fit better. Until this work is complete practitioners and organisations will continue to have the complex task of identifying how outcomes translate into needs and how needs relate to eligibility.

The current eligibility framework categorises risk as being risk to an individual's independence, health or wellbeing. It is important to remember that in these definitions the risks do not refer only to an individual's current independence, health and wellbeing, but also to the risk that they may not be able to gain these outcomes without support.

## Resource allocation

Neither the Act nor the statutory guidance offers a prescribed method of determining how resources should be allocated. It remains up to local authorities to determine which model of resource allocation best fits local need but regardless of whatever system is developed the following key points remain critical:

- Local authorities should have a system of deciding a budget that is fair and transparent to everyone.
- Practitioners should be able to advise people about how much money is available to them under each of the options.
- The amount of money allocated for support should be enough to meet the eligible needs of the person and their agreed outcomes which have been identified through an assessment.
- Before deciding how much money is allocated, the local authority must take into account the view of the practitioner who has worked with the person and agreed the needs and outcomes.

- Resources should be provided flexibly and be personalised around the person, making use of natural networks and with support focussed on personal outcomes.

#### Key points for practitioners:

- Are you clear on local eligibility criteria framework and how this links to assessed needs?
- Are you familiar with the system of allocating resources used within your local authority and confident to explain this to individuals assessed as requiring support?
- Are your assessments focused on outcomes, based on a strengths based approach?
- A person does not always need funded support to meet their outcomes. There are many ways to meet outcomes and you must ensure that you have helped the person explore all sources of support, e.g. community opportunities or natural supports.
- In determining eligibility you must take into account how a person's needs and any risks might change over time, specifically what might happen if no support is put in place.

# Assessment

*"Good conversations lead to good assessments and support planning which remains key to achieving good outcomes"*

*Dumfries & Galloway SDS Communication & Information Group*

Local authorities continue to have a duty to assess under both the Social Work (Scotland) Act 1968 and the Children (Scotland) Act 1995. The Social Care (Self-directed Support) Act 2013 does not replace these duties but seeks to further enhance them by introducing the duty to have regard for the principles of collaboration, informed choice and involvement when undertaking assessment and arranging support.

Assessment presents an opportunity to engage with people and others who are important in their life, reflecting on what matters to them and why. The job of the practitioner is to explore with the person their current situation, existing strengths, abilities, personal resources and any natural networks and supports.

During assessment it is helpful to consider using the Talking Points approach (see below)

When assessing children and families you should link the assessment to the SHANNARI wellbeing indicators:

## Talking Points

Its important to have good conversations around:

Feeling safe



Having things to do



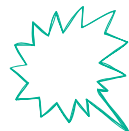
Living where you want/as you want



Staying as well as you can



Being part of your community



Seeing people

# SHANARRI Indicators



HEALTHY



NURTURED



SAFE

ACTIVE



ACHIEVING



RESPECTED

INCLUDED



RESPONSIBLE



The new act also emphasises the importance of assessments and support plans being co-produced. People are often experts in their own lives and we need to work in partnership with them to explore both solutions and risks and agree what will work best for them.

For self-directed support to be successful, all assessments and support plans must focus on outcomes.

#### Key points for practitioners:

- Does the person have a clear understanding of what an assessment is for and what the process is?
- Does the person need assistance to understand the process?
- Has the person been supported as much as possible to express their views?
- Have you explored strengths and assets, existing resources both personal and within family and community networks?
- Have any risks been identified and explored with the person and solutions to minimise or enable risk been considered?
- Is the level of assessment undertaken proportionate to the needs, circumstances and risks presented?
- How have you ensured that the person is as much involved as they wish and how do you evidence the assessment has been co-produced?
- Does the person have an accessible copy of their assessment?



# Support planning

Planning for outcomes focused support requires creativity and innovative thinking to ensure that all the resources which are available are recognised and valued.

These resources should start with the individuals own assets, including their experiences, resilience, their current circumstances and life history, their family and community supports. This information should then be considered alongside the practitioners experience, skills and knowledge of potential supports.

## An effective support plan should:

- Demonstrate a shared understanding and agreement of how the outcomes will be achieved and which resources will be used to achieve them.
- Be written or communicated in a format that makes sense to the person.
- Describe arrangements for what happens if things go wrong or what would happen in a crisis.
- Allow for a sufficient degree of flexibility to make adjustments and respond to changes in the person's life and circumstances.

## Key points for practitioners:

- Have you considered using support planning or person centred tools to ensure the person is involved and encourage creative thinking?
- Does the support plan reflect the involvement of the person and evidence collaborative working?
- Is the person clear about their support plan and how this will be monitored and what to do if they wish to make adjustments?
- Have you explored all alternative supports as well as funded support to ensure maximum opportunities have been used and that the person is not dependant on only funded support to achieve agreed outcomes?
- Is the person clear about what supports will be provided, by whom, when and how?
- Is the person clear about how to raise concerns?
- Is the support right for the person and does it meet the agreed outcomes?
- Have any potential risks been explored, agreed and recorded with everyone involved?
- Does the person need independent advocacy support to help understand the process and express their views?
- Is everyone clear about their role and responsibilities: the person, family, practitioner and provider?

# Risk Enablement

Risk enablement is central to the philosophy of self-directed support.

When we hear the word risk we tend to think of something to be avoided. However risk is part of everyday life for us all.

Enabling risk in social care has no simple answer. No guidance or toolkit can outweigh the skilled judgement of practitioners who understand the balance between protecting individuals who need support while applying the values and principles of self- directed support and promoting greater choice and control.

Effective risk enablement practice is fundamental in achieving the right balance between protection and empowerment.

A collaborative approach to supporting risk is crucial in helping move towards a culture that supports positive risk taking, helps identify where responsibilities lie for supporting and sharing those risks.

Assessing risk remains a highly complex task. It is made even more complex when there are complicated family dynamics, when people are in crisis, or when a person's capacity is impaired.

Supporting positive risk taking should be a key element in support planning.

Evidence suggests that an effective relationship built on trust with the person is required for the practitioner to both enable risk and provide opportunities to detect and prevent harm.

### Key points for practitioners:

- Have you had honest conversations with the person and others that allows for detailed consideration of the risks from everyone's perspective?
- Have you considered how your own values, assumptions and thresholds to risk may impact your practice and decision making around risk enablement?
- Are you familiar with the organisations risk enablement policy?
- If you are concerned about managing risks have you discussed these with your line manager?
- Have you considered all solutions to minimising or supporting risk?
- Have you considered the person's capacity to take decisions about their own risks?
- Do you need to explore intervention under any legal routes to protect the persons safety i.e. Adults with Incapacity Act, Mental Health Care and Treatment Act or Adult Support and Protection.
- Have you reached a shared agreement on risk enablement and is this recorded accurately in the assessment and support plan, detailing who is responsible for supporting agreed risk, monitoring this and what to do if risks increase to an unacceptable level?

# Children and Young People

Our duty of care remains paramount in all work with children and young people and we have to prioritise statutory responsibilities in relation to child protection.



Many interventions under section 22 of the Children (Scotland) Act are time limited. Issues identified are typically addressed through the relationship between the child or young person, their family and the practitioner. The new duties in relation to the values and principles, assessment and support planning should guide these interventions.

It is not the intention that access to the 4 options would be available in these circumstances, but when it is identified that longer term support is required, access to the 4 options should be made available to the child or young person and their family.

The Act should be seen as strengthening our engagement with children, young people and their families including those subject to compulsory measures of care.

Emerging evidence shows that creative, flexible use of budgets at an early stage to prevent, for example a child from being accommodated, may lead to better outcomes and a more efficient use of resources in the longer term.

The Self-directed Support values and principles sit comfortably with **SHANARRI** wellbeing indicators:

  
**Safe - Healthy - Active - Nurturing - Achieving**  
**Respected - Responsible - Included** 

A young person over the age of 16 has the right to make decisions about their support options unless capacity issues have been identified.

Below the age of 16 the person with responsibility for the child “the appropriate person” should be involved in decisions about the child, their assessment and support.

The principles and values underpinning the Act continue to promote best practice already established within children's legislation and policy. Many practices and support models such as signs of safety and family conferencing already exist across Scotland but have not been badged as self-directed support but have clear links to the self-directed support approach.

**Key points for practitioners:**

- Have you explored with the young person and their family what would make the difference to their situation?
- Have you taken time to make sure the young person and their carers understand the options available to them?
- Does the support plan link to the single child plan?
- Have you explored the child or young person's outcomes taking account of the wellbeing indicators?
- Have you considered and explored with the young person and their family any risk or concern about accessing any of the options and in developing the support plan and identified ways to minimise or support positive risk taking?

# The 4 options explained

## Option 1 - Direct payment (DP)

Direct payments have been around for a long time. A person can choose to take a DP to arrange their own support. A person can use their payment to employ personal assistants, purchase equipment or services that will meet agreed outcomes.

Option 1 offers the greatest flexibility but also the greatest responsibility. You need to explain the responsibilities that go along with Option 1, informing of the different support and information available to manage payments, for example signposting to payroll agencies or user-led support organisations.

A person's capacity needs to be considered when exploring option 1. A person may choose to have a 3rd party manage the payment on their behalf but they need to remain in control. If the person lacks capacity, other options need to be explored.

You need to be confident, knowledgeable and able to give accurate information on the risks and responsibilities involved with Option 1 and be familiar with local policy and procedure regarding the monitoring and administration of DP's.

### Local authorities have discretion to refuse a direct payment when:

- There is evidence that a child's safety will be put at risk.
- Where assessments are conducted at an acute crisis point.
- Where a person's safety would be jeopardised.
- When there is a protection order in place under Adult Support & Protection (ASP) and specific concern about the persons safety.

## **Option 2 - Directing the available support**

A person may choose to have someone oversee their support. They should know what their budget is and be able to direct how it is spent but can arrange for a provider agency or the local authority to arrange support or purchase services or goods on their behalf that will help achieve agreed outcomes.

This option should allow for a person to stay in control without the responsibility of managing payments.

A person should be supported to work in partnership with their chosen provider to ensure outcomes are being met.

## **Option 3 - The local authority arranges support on behalf of the person**

A person may decide to let the local authority select and make arrangements for support.

If a person lacks capacity and they have no welfare guardian or power of attorney to represent them or they fail or decline to make a choice then they will automatically receive their support under option 3.

Option 3 is no less valid than any of the other options, there are many reasons why people will choose to have support arranged for them.

Support arrangements should still be flexible and personalised for the person and the person should be included in any decisions as much as they want to be.

## Option 4 – A combination of two or more of the options

This option may be attractive to people who wish to experiment with direct payments for some of their support, to purchase equipment or employ personal assistants for some aspects of care whilst continuing to have the local authority or provider arrange some of their support.

### Local Authority discretion in relation to the 4 options

The duties under the Act do not apply for services or forms of support which are provided in connection:

- With criminal justice orders such as drug treatment and testing orders (DTTO).
- Receiving assistance/services in relation to burial or funerals.

Local authorities may also consider that some forms of support are incapable of being delivered under the 4 options particularly where the nature of support cannot be delivered through option 1 or 2 such as foster care, or when the support is the intervention/relationship with the social worker which cannot be translated into an individual budget.



# Employing family members

Local authorities already have limited discretionary powers to make direct payments to employ family members to undertake specific aspects of care and support in special circumstances, usually around issues of rural remoteness or ethnicity.

The statutory regulations accompanying the Act have increased the scope for employing family members.

This can now be considered where all parties (the person, their family member and the local authority) are in agreement and the family member is capable of meeting the person's needs and where any of the following circumstance apply:

- There is limited choice of service providers who could meet the needs of the person.
- The person has specific communication needs which means it will be difficult for another provider to meet their needs.
- The family member will be available to provide support required by the person at times where other providers could not reasonably be available.
- The intimate nature of the support required makes it preferable to the person that support is provided by a family member.
- The person has religious or cultural beliefs which make the provision of support by a family member preferable.

There are exceptions to the family members rule: local authorities may not agree to it

- If they believe that any of the parties are under undue pressure.
- When the family member is also the welfare guardian or power of attorney.
- If arrangement does not meet the persons needs.
- If it would place the person at an unacceptable risk.

### Key points for practitioners:

- There will be advantages and disadvantages to employing a family member. Have you explored these fully with the person and the family member?
- Paying family members to support someone inevitably changes the nature of their relationship. Have you explored to what extent both parties are comfortable with the proposed arrangements?
- In order to minimise the challenges sometimes associated with employer-employee relationships, have you explored alternative options such as a provider employing the family member to support the person?
- Is there a risk of exploitation and if so have you discussed this with your organisation?
- Have you made it explicit that all parties need to agree to these arrangements and ultimately the decision lies with the local authority?
- If the decision is that it is not appropriate for the family member to become a paid supporter have you explained the reasons for this fully to all parties?

# Monitoring and review

Local authorities have a duty to undertake reviews where support is provided to meet eligible needs and as a response to any significant change in circumstances. Frequency of review will be determined by local policy, level of risk and other factors.

## Monitoring

The monitoring of the support plan is essential. It ensures that the plan is being implemented, provides opportunity for any adjustments to be made and ensures that agreed outcomes are being achieved.

The level of the monitoring should be proportionate to the scale of the support and the complexity of the person's circumstances. Reassure people – its ok to change and adapt the support plan if it's not working.

## Review

The monitoring and review process is as important as the assessment and support planning stage and requires the same principles and approach to be applied.

The supported person and contributors to the plan should be clear about timescales for reviewing the support plan and how to raise concerns or give feedback if the plan is not working.

It should be a goal for many to become less dependent on formal support and where possible more engaged within communities. The monitoring and review process should help explore these possibilities on an ongoing basis.

# Summary

This quick guide has been developed by Social Work Scotland to complement both the statutory guidance and the practitioners guide. It aims to give staff a quick reference point to the key principles and duties that should guide practice.

The Social Care (Self-directed Support) (Scotland) Act 2013 and accompanying regulations have been developed to support the Scottish Governments 10 year strategy to transform the way social care is delivered.

Local arrangements which provide the framework for the delivery of self-directed support may vary considerably: from screening processes, how and when budgets are agreed, the type and range of support available, to the internal systems that are developed to support successful implementation.

Therefore it is not possible to provide a step by step guide but rather a guide that reminds us of the expectations.

This is a ten year strategy which is continually evolving as we learn from what's working well and what's not. It may at times feel uncertain and messy but that is all part of the significant transformational change to the culture, expectation and practice that is required to move towards a much more responsive and flexible social care sector that puts the person at the heart of decision making.

If we required support tomorrow would we want to be able to say how and when that support is delivered? If the answer is yes – we should want that for everyone.

# Links and further reading

## **Self-directed Support: A National Strategy for Scotland 2010**

Scottish Government, November 2010

<http://www.gov.scot/Publications/2010/11/05120810/0>

## **Statutory Guidance to accompany the Social Care (Self-directed Support) (Scotland) Act 2013**

Scottish Government, April 2014

<http://www.gov.scot/Publications/2014/04/5438>

## **Practice guides for practitioners, services users and carers**

<http://guidance.selfdirectedsupportscotland.org.uk>

## **Support Me Support You**

Working together to make SDS happen - online guidance

[www.supportmesupportyou.org](http://www.supportmesupportyou.org)

## **Social Services Knowledge Scotland**

Self-directed support

[www.sskss.org.uk/topics/self-directed-support.aspx](http://www.sskss.org.uk/topics/self-directed-support.aspx)

# Notes

# Notes



Social Work Scotland  
4th Floor  
Hayweight House  
23 Lauriston Street  
Edinburgh  
EH3 9DQ  
0131 281 0853  
[www.socialworkscotland.org](http://www.socialworkscotland.org)