



IMPRESS Social Care and Housing Jargon Buster

IMPRESS is grateful to the Long Term Conditions Delivery Support Team for their help producing this. Each of these terms is included and updated in the [IMPRESS A-Z Jargon Buster](#). The terms are listed here in the sequence that makes for best understanding. They can be found alphabetically online.

Personalisation

Personalisation is the all-encompassing term for the Government's agenda to give people more choice about the care they receive. The system places the service user at the centre of the process and allows them to choose the agencies they use and the manner in which they receive support.

Self-directed support

Self-directed support is the term used for when people choose their services, organise their care and arrange for payments to be made. This is because the individual who requires the service is directing their own care and has choice when it comes to their support.

Individual Budgets

Service users/patients receive an Individual Budget and use this to pay for a variety of services. The individual budget contains funding from several sources, including social services, the Independent Living Fund, Supporting People, Disabled Facilities Grant and Access to Work. It can also be used to purchase equipment if this is needed. Crucially, individual budgets encompass a number of different agencies but are accessed at a single point, making the system easier to navigate for service users compared to the old multi-agency approach.

Personal Budgets

Personal Budgets are similar to Individual Budgets, but are made up solely from social services funding. Personal Budgets are not multi-agency payments, so people would still have to contact other organisations if they receive some level of support from them. People also have a choice as to whether they receive the money as a direct payment, to receive a standard care service, or a mixture of both.

Direct Payments

Direct Payments are means-tested payments made instead of receiving social care. The money received should be enough to meet your care needs. Direct Payments have been available since 1997 and are made to a wide variety of people, including carers, adult service users and people with short-term needs. Direct Payments should not be confused with direct payment; this is the method in which Personal Budgets and Individual Budgets are paid.

Individual Health Budget

IHB's are being piloted at present for participating PCTs. They offer the following budget options to patients

- Notional budget held by commissioner
- Budget managed by a third party on pts behalf e.g care provider, independent user trust
- Direct Payment to service user for health care.

Indirect Payments

Indirect Payments are similar to Direct Payments, but instead of being paid to the individual who needs the service, payments are made to a nominated individual or into a trust. The trustees or nominated people then pay for services on the individual's behalf.

The Resource Allocation System (RAS)

The RAS is designed to be a fair funding system and to allocate money from adult social services. The RAS works against a set of strict guidelines to ensure it remains fair. It relies on a scoring system based on answers given to a series of questions and then places people within a series of funding bands.

Indicative Allowance

The Indicative Allowance is also known as the Gross Individual Budget and is the maximum amount of funding made available to meet an individual's social care support needs. It is worked out through the RAS.

Individual Service Fund

An Individual Service Fund is an individual budget that a service provider manages on behalf of a service user. Payments are made with the understanding that the service provider can deliver what is needed and it meets the criteria set out in the service user's support plan.

Support brokers

Support brokers provide help to people looking for care services. They are at the behest of the service user and provide the technical assistance to put the support package in place. Often they will be work independently from the local authority and will mediate between their client and the authority. Support brokers can be anybody from close friends and family to members of a local charity or voluntary organisation or a social worker.

Care Plan

Care plans bring together all the information about the individual into a single, overarching care plan produced by health and social services. This can be a written document; electronically recorded, e.g as a electronic care plan or recorded in the patient's notes, and be accessible to the patient and all carers, including emergency/urgent care services. Care plans should focus on the aspirations of the patient. These are different from an asthma action plan or a COPD plan, which would be one element of a whole care plan. Some PCTs in England are using care plan templates to capture this information, others are building on existing shared records between health and social care.

LAA

As defined by the government, a local area agreement (LAA):

“Sets out the ‘deal’ between central government and local authorities and their partners to improve the quality of life for local people. As such, the LAA is also a shorter-term delivery mechanism for the Sustainable Community Strategy (SCS)”.

This is how LAAs are described in the current Communities and Local Government statutory guidance to 'Creating Strong, Safe and Prosperous Communities'. From the local government perspective, LAAs are a key feature of a more devolved central and or local settlement. Through these, different localities can channel public resources towards the priorities of their own areas, alongside national outcomes and targets.

LAAs are three-year agreements, developed by local councils with their partners in a local strategic partnership (LSP). Each LAA was negotiated with the Government Office for the region, before being agreed and signed off by the Secretary of State.

Joined-up working

This involves working in partnership with others, whether in the public, private or voluntary sector, in order to identify and solve local problems. The government increasingly regards joined-up working as a means of fostering efficiency, effectiveness and community engagement in the improvement of local government performance.

Benchmarking

A method for councils to work out how well they are doing by comparing their performance with other similar councils, and with performance indicators (PIs). It is also used by PCTs, and various information sources such as the NHS Information Centre now enable statutory organisations to select benchmarking groups and national data sets in health and social care to compare performance.

Best Value

Best value was a local government performance framework introduced into England and Wales by the Local Government Act 1999. The aim of the framework was to promote continuous improvement in local authorities' performance.

Under the framework, English and Welsh councils were required to monitor a set of best value performance indicators (BVPIs), undertake best value reviews of services and cross-cutting themes, prepare performance improvement plans and report on their performance annually.

Subsequent regulations, including statutory instruments and the Local Government and Public Involvement in Health Act 2007, have removed requirements to publish performance indicators (PIs), undertake best value reviews or publish a best value performance plan (BVPP). However, the general duty to make arrangements to secure continuous improvement in the way in which their functions are exercised, having regard to a combination of economy, efficiency and effectiveness, remains.

Comprehensive Area Assessment

From 1 April 2009, Comprehensive Area Assessment (CAA) will assess whether partnerships are achieving their aims for their area. One of the best ways for partnerships to prepare for CAA is to make sure they are doing exactly that – and that they have robust systems in place to demonstrate their achievements. However, there are also a number of tools available to help partnerships become more aware of and prepared for the changes within CAA.

CAA will focus on:

- * joint working between councils and their partners in delivering the area's priorities, as agreed in the local area agreement (LAA) and sustainable community strategies

- * how the quality of people's lives is improved.

Local public organisations will be collectively accountable for the outcomes they deliver for an area. CAA will consider how partnerships are working to address challenges facing communities and deliver better outcomes. It will seek to highlight best practice and innovation, but also identify any barriers to improvement. CAA will also provide information to local people about their local services. This will increase their awareness of the services available to them, empowering them to make better decisions and get value for money. CAA will consist of two assessments: area assessment and organisational assessment.

KLOE

Key Lines of Enquiry (KLOE) are detailed questions that help inspectors inform their inspection judgements. They are used by inspection teams, but they are also published to help audited and inspected bodies with their own assessments.

Procurement

Procurement is the process of acquiring goods and services from third parties. Various policy drivers encourage local authorities to review procurement services and modernise procurement practices to achieve greater efficiencies.

These include:

- * Best value
- * Implementing Electronic Government (IEG)
- * The Office of Government Commerce Gateway programme
- * The annual efficiency statement for each local authority, as outlined in the Spending Review 2004, which identified scope for significant efficiencies in the procurement workstream.

IMPRESS has several resources on [procurement](#) of healthcare in the commissioning pages of its website, including a dos and don'ts section, building on real life NHS experiences.

RIEPs: regional improvement and efficiency partnerships

RIEPs play a key role in supporting councils.

The nine RIEPs were created in April 2008 with a three-year funding package of £185 million from Communities and Local Government. The RIEPs harness the expertise of councils to add new capacity to local government in order to accelerate the drive for greater improvement and efficiency. They build on the successful foundations laid by the former Regional Improvement Partnerships and Regional Centres of Excellence.

Put simply, they help councils deliver the ambitious outcomes, set through local area

agreements (LAAs), by supporting them in their efforts to become more efficient, innovative and engaged with citizens.

The report 'Leading the Way by Working Together' demonstrates that local government has taken responsibility for its own improvement by working together at a local, regional and national level. It celebrates the achievements of the sector, illustrated with a series of recent case studies and is published July 2009.

CQC Care Quality Commission

CQC brings together the independent regulation of health, mental health and adult social care. Before 1 April 2009, this work was carried out by the Healthcare Commission, the Mental Health Act Commission and the Commission for Social Care Inspection. These organisations no longer exist.

CQC's states that its main activities are:

- Registration of health and social care providers to ensure they are meeting essential common quality standards
- Monitoring and inspection of all health and adult social care
- Using our enforcement powers, such as fines and public warnings or closures, if standards are not being met
- Improving health and social care services by undertaking regular reviews of how well those who arrange and provide services locally are performing and special reviews on particular care services, pathways of care or themes where there are particular concerns about quality
- Reporting the outcomes of our work so that people who use services have information about the quality of their local health and adult social care services. It helps those who arrange and provide services to see where improvement is needed and learn from each other about what works best

Equality Impact Assessment

An Equality Impact Assessment (EqIA) is a tool for identifying the potential impact of a council's policies, services and functions on its residents and staff. It can help staff provide and deliver excellent services to residents by making sure that these reflect the needs of the community.

By carrying out EqIAs, a council may also ensure that the services it provides fulfil the requirements of anti-discrimination and equalities legislation.

Housing glossary

ALMO

An ALMO is a company set up to manage and improve council housing stock. It is owned by the local authority but operates under a management agreement between it and the local authority. ALMOs are designed to encourage both the participation of the local community in the management of their homes and the continuous improvement of council housing services. Government funding is provided on the condition that local authorities separate their management and strategic functions. An ALMO must:

- * deliver major repairs and improvements to bring homes up to the Decent Homes Standard
- * collect rents, deal with arrears and debt counselling

- * maintain properties
- * manage lettings and deal with empty properties.

The local authority is still responsible for:

- * the housing strategy
- * housing benefit and rent rebate administration
- * the overall policy on rents.

RSL

Registered Social Landlords are government-funded not-for-profit organisations that provide affordable housing. They include housing associations, trusts and cooperatives. They work with local authorities to provide homes for people meeting the affordable homes criteria. As well as developing land and building homes, RSLs undertake a landlord function by maintaining properties and collecting rent.

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