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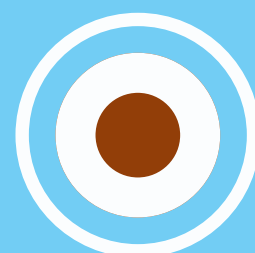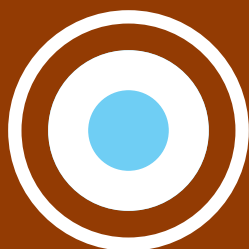
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Personalisation and its implications for work and employment in the voluntary sector

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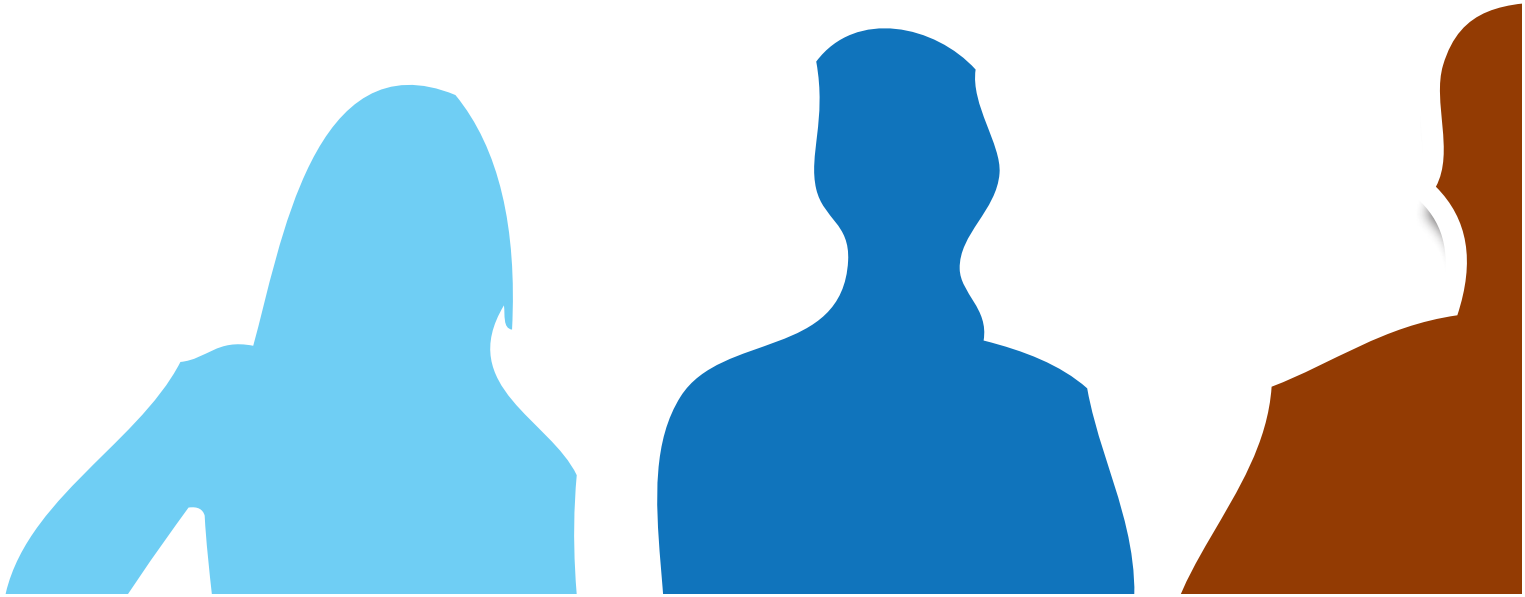
Executive Summary

This report assesses the impact of personalisation on social care, particularly focussing on implications for the workforce. Personalisation is often presented as being transformative in the manner in which it empowers both people who use services and employees. The report considers the latter aspect in particular by assessing some of the workforce implications of personalisation. It reports research drawn from policymakers and three voluntary organisations, with interviews with managers, employees and people who use services.

The main findings from the research are:

- Policymakers were enthusiastic about the potential benefits of personalisation with regard to the opportunities for the independence of people who receive services and enhancement of workforce skills.
- Policymakers feared the impact of public spending cuts and recognised the cultural and operational barriers within local authorities to the implementation of personalisation.
- Policymakers were enthusiastic about the role of the voluntary sector and its workforce in terms of its contribution to delivering personalised services, whilst recognising concerns about skills gaps among employees and the impact of deteriorating terms and conditions of employment on worker morale.
- Management in the three organisations largely embraced the principles of personalisation, whilst also recognising the pressure from local authorities to use the personalisation agenda to cut costs.
- Employees in the main understood the principles of personalisation but revealed limited awareness of the implications for the changes in service budgets.
- Organisations were changing their approach to staff recruitment in order to develop a better fit between the interests of people receiving services and employees delivering them.
- Management anticipated significant changes to the working hours of employees providing personalised services, which was met with a degree of anxiety among some employees.
- Management recognised the need to address skills gaps among employees in areas such as risk enablement, decision-making and community connecting.
- Employees generally welcomed the potential enhancement of their skills through personalisation.
- Job security concerns were apparent among the majority of front-line employees as a consequence of personalisation.
- Organisations were balancing the move towards risk enablement and cutting costs with the need to protect service user and worker health and safety, particularly in relation to managing challenging behavior.
- Personalisation brings with it the potential to fragment pay and conditions away from collective terms towards linking them more closely to the value of individual service budgets.
- People who receive services revealed limited awareness of changes to service budgets, their choices over the service provider, choices over who provides their services and there was limited evidence of empowerment and greater choice.

Introduction

The principles of personalisation are consistently described as central to the future transformation of social care. They represent 'one of the most significant reforms to the welfare state for decades'[1], with potentially far-reaching consequences for voluntary sector organisations. For those working in social care personalisation has equally far reaching consequences with major implications for the workforce. To date, much of the research on workforce issues has tended to focus primarily on social workers. There has been limited research on the experiences of other front line workers and people who use services, especially in voluntary organisations. These issues are the focus of this report. Its objectives are to:

- Identify the functions, skills and behaviours required of workers in order to deliver personalised services.
- Investigate the extent to which the voluntary sector workforce currently exhibits these functions, skills and behaviours.
- Explore the extent to which HR policies and practices, job functions and working practices change as a consequence of personalisation.
- Assess the likely impact on terms and conditions of employment
- Identify what learning is effective when applied in the specific practice of personalised services and whether additional learning is required.

The report is divided into five sections.

Section 1 – Personalisation and its impacts on the workforce presents an overview of personalisation and workforce issues. It firstly outlines the principles of personalisation and how it is operationalised. The report then considers some of the likely employment consequences and emergent issues in terms of HR policies and practice and potential implications for terms and conditions of employment.

Section 2 – The Research presents the approach to data gathering for the report, which encompasses policymakers and case studies in three voluntary organisations, with interviews with managers, employees and people who use services.

Section 3 – Different approaches to personalisation presents a description of the overall approaches to personalisation in the three voluntary organisations.

Section 4 – From policy to practice: operationalising personalisation and its implications for the workforce presents the findings, firstly considering the view of key policymakers before examining how the three voluntary organisations are addressing emergent HR issues.

Section 5 – Conclusions and recommendations presents the implications of the findings and recommendations for policymakers and organisational leaders.

Section 1: Personalisation and its impacts on the workforce

Origins, principles and operationalisation of personalisation

Personalisation embodies notions of self-determination by people who use services rather than the prescriptive services approach where individuals are passive recipients of care. It empowers users to make their own choices about when, how and from whom they receive support. This approach is common to most developed European states, where such services have often been implemented through allowing people to hold and spend their own budgets.

Personalisation originated in the UK as a result of the Community Care (Direct Payments) Act (1996). The Act put in place means tested Direct Payments (DPs), which give people who use services control of their care budget whereby they pay the service provider of their choice directly for social care. Originally for those aged 18-65, since 2000 DPs have also been available to those over 65, carers and people with parental responsibility for disabled children and disabled 16 and 17 year olds. Across the UK the number of people receiving DPs is 58,505.[2]

In Scotland the impetus behind personalisation has a number of origins. For example, the 2006 report, *Changing Lives*, contains an underlying acceptance of the principles of personalisation, which encouraged working with providers from other sectors and building capacity to deliver such services, including that of the workforce.[3] As of 31st March 2010 there were 3,678 DP holders across all Scottish local authorities. The number of people in receipt of DPs has increased by 22 percent from 2008/9. Forty five percent of the people receiving DPs in Scotland have a physical disability; 23 percent a learning disability; the remainder are people with mental health problems and unknown client groups. The value of these payments within Scotland has increased from £2.1m in 2001 to £40.2m in 2010.[4]

The other arm of personalisation in the UK is the Individual Budgets (IBs) scheme, which builds on the experiences of DPs. Dating from 2003 IBs were first developed by the social enterprise, *in Control*. By 2005 the Government announced its support for IBs with the publication of the Green Paper, *Independence, Well-being and Choice*, with subsequent pilots from 2006 in 13 English local authorities.[5] With IBs people who use services are not compelled to be wholly responsible for managing their care, but can direct a local authority to spend the budget they have allocated to them and choose which particular agency should provide it. People who use services can also decide whether their budget is given to them in the form of cash, services or a mixture of both. These budgets can be used to stream a series of separate funding packages rather than one specific fund as under DPs.[6]

Personalisation though is not simply about funding mechanisms. Importantly it also involves alterations to everyday routine practices in care and the organisational culture of service providers. This process means commissioners, service providers and their staff, and/or personal assistants focus much more on an individualised outcomes-focused approach to provision.[7]

Though personalisation has increasingly been seen in very positive and transformative terms there are a number of emergent issues and challenges.[8]

- There are concerns personalisation will be caught up with cuts in public services, where it could be used as a mechanism to cut costs, and the implementation of personalised services themselves could be jeopardised if the provision of training of the workforce is underfunded.
- There are variations in awareness, preparedness, commitment and training of local authority purchasers to the principles of personalisation.
- There is greater complexity in managing the new levels of risk associated with personalised services.
- There are doubts regarding the appropriateness of applying the principles of personalisation equally to all vulnerable groups.

Workforce consequences for the shift to personalisation in the voluntary sector

Voluntary organisations need to ensure there is sufficient capacity within their workforce to deliver on the aspirations of personalisation. This may involve significant changes to aspects of their HR policies and practices and the type of employment relationships they develop with employees.[9] A summary of the key anticipated changes are outlined below.

Recruitment and selection

Personalisation implies alterations in recruitment and selection procedures so that advertised job roles and selection procedures include participation by people who

use services.[10] Whilst some employers already involve people who use services in recruiting for values among new staff, as more and more voluntary sector providers embrace the values of personalisation this issue will remain an on-going challenge.[11]

Changing workforce skills

In recent years, largely through the demands of funding streams such as Supporting People (SP), care work in voluntary organisations has been increasingly routinised and bureaucratised. According to its advocates, personalisation involves a 'win-win' situation between staff and people who use services where the former experience a transformation in workforce skills through greater autonomy and the latter receive a better quality of life:

> *Personalisation should motivate social care staff and social workers in particular. A personalised system needs to work for the staff as well as the clients: it is a collaboration in creating better care. That should make work more satisfying for staff as well as leaving clients happier.*[12]

The range of skills for HR to develop include: social workers increasingly involved in roles that focus on prevention; dealing with multiple agencies; personal advocacy, brokerage, counselling, risk assessment; and supporting people who use services to navigate the type of services they require. Other studies highlight the need to develop multi-skilled workers at all levels to create 'hybrid roles' where they would undertake tasks previously done by other professions concerning issues such as health, housing, leisure and employment. There is a need for agencies to enable workers to get their qualifications quickly to meet these challenges, although it is recognised that there is limited analysis of whether existing qualifications are sufficient to meet the changes.[13]

It is argued that for social workers, in particular, the personalisation agenda has the potential to re-inspire the profession into developing 'creative, person-centred roles', though this cannot happen without a change in mindset.[14] For example, social workers may have to give up some of their power and status in exchange for a better quality of work. There may also be some consequences in terms of the need to redesign their jobs, including further development of para-professionals, such as social work assistants and an expanded role for care workers. A recent evaluation of IBs found that the role of care co-ordinators

and social workers has been 'turned on its head' creating a significant shift in culture for them as professionals.[15] The same evaluation also noted differing views amongst social workers and care co-ordinators on the extent to which the shift to IBs was giving them the chance to rediscover traditional social work core skills or whether their introduction had, in fact, eroded social work skills.

There are concerns in the current economic climate that cost cutting from funders will undermine the capacity of voluntary organisations to provide sufficient resources for training necessary to meet the demands on the workforce. Other concerns over training include doubts over whether there has been sufficient development of how to train workers in personalisation techniques, and what personalisation techniques are. Training gaps also exist with regard to the rationale, processes and practices of personalisation among commissioning and care managers of funding bodies.[16]

Terms and conditions of employment

The funding around personalisation raises concerns about the potential impact on terms and conditions of employment. Studies show that DPs are characterised by cost containment, with estimates of savings of 30-40 per cent for local authorities.[17] Within a context of a deteriorating financial situation 'the budgetary imperatives of coming years may accelerate moves away from widespread deployment of expensive traditional professionals towards greater roles for support staff and non-traditional staff of various kinds'.[18]

There is also a broader question concerning terms and conditions of employment. Voluntary organisations securing contracts through individual budgets may receive financial resources that are smaller than offered through conventional contracts. This means voluntary agencies, constrained by what is affordable within the contract price set by public commissioners, may have to look at either drawing additional funds from their own reserves, fundraising to supplement worker pay or offer inferior employment packages to employees providing personalised services.

Research has revealed concerns about working conditions under DPs. Aspects such as pay, pensions and reasonable working hours are pitted against demands from people who use services for flexibility, autonomy and choice.[19] Employees may also engage in unpaid care work, on top of their contractual responsibilities.

A recent survey of Unison branches in the 13 English local authorities piloting IBs found that the vast majority (90 per cent) believed that personalisation will lead to more administration, lone working, the privatisation of carers' roles and the erosion of conditions of employment. Reflecting these concerns the surveyed branches universally believed that personalisation will have a negative impact on members' job security.[20]

Worker morale and commitment

A recent Department of Health document recognised that:

> *...in developing a more personalised approach, it is essential that frontline staff, managers and other members of the workforce recognise the value of these changes, are actively engaged in designing and developing how it happens, and have the skills to deliver it.*[21]

Research commissioned by Skills for Care found that DP holders, often employing Personal Assistants (PAs) through third sector or private agencies, expressed much higher levels of satisfaction than if the services had been supplied by local authorities. The same research also found that the vast majority (95 per cent) of PAs 'love their work', but were concerned about excessive hours and poor training.[22] There are also concerns that PAs and homecare agency staff have little access to guaranteed holidays, sick pay, pensions and collective bargaining.

Across social care and health 'there is a huge task in enabling existing staff to make a significant journey of change'.[23] This journey will lead to changes in role and job design impacting on the skills required by employees. This journey has not been made easy by some advocates of personalisation generally denigrating the current provision of social care. Worker morale will be detrimentally affected if it is perceived that all of their previous work has been misdirected.[24] Worker morale may also be undermined if they perceive that they experience more of the risks associated with personalisation. One such risk is worker health and safety. Recent court cases pertaining to the use of hoists, for example, have favoured the rights and personal dignity of people who use services as opposed to the interests of workers.[25]

Summary

The personalisation agenda has the potential, and intent, to transform the nature of social care with significant implications for voluntary organisations and their employees. Some view this process as a source of optimism while others express caution against an uncritical view. Personalisation brings major HR challenges, including the potential undermining of professionalism, particularly of social workers; the capacity of voluntary organisations to meet the training demands to transform the workforce; the potential undermining of terms and conditions of employment; the potential undermining of morale and potential dangers to worker health and safety. It is the policy and organisational responses to these challenges that the remainder of the report addresses
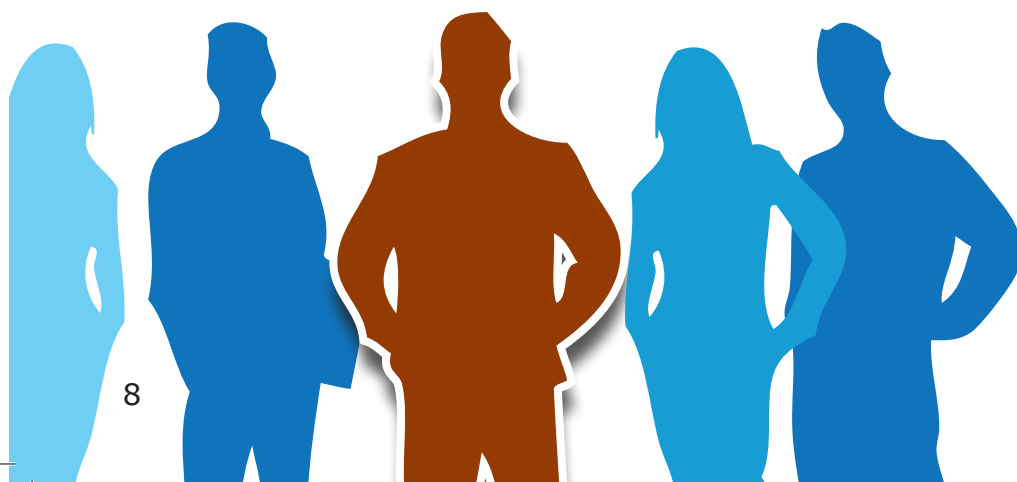
Section 2: The research

The research involved two stages of qualitative data gathering.

The first part consisted of interviews with four key national policymakers (subsequently referred to as Policymakers 1-4) involved in the formulation and implementation of aspects of the personalisation agenda. Interviews were designed to gain an insight into the process of implementing personalisation in Scotland; the issues regarding implementation of that agenda; and an overview of the workforce implications.

The second part of the study was based on research in three voluntary sector organisations, Oakwood, Cedar and Chestnut.[26] Each organisation was chosen on the basis of their different approaches to adopting personalisation. Table 1 provides a profile of each organisation and details of interviewees.

The choice of front line services in each organisation was dictated by whether they operated personalised services. To select the respondents in receipt of services, members of the research team consulted with each participating agency. As far as possible the selection of these respondents for interview operated on the principle of non-exclusion.[27]

Selection began with the issuing of a background letter, with consent form asking for volunteers within the relevant services. Interviewers had experience in working with people with learning disabilities and talked each potential participant through the letter highlighting issues such as confidentiality and their right to stop. Interview schedules were developed in consultation with the Scottish Consortium for Learning Disabilities (SCLD) to develop an informal interview structure to put service user participants at ease.

Table 1: Profile of case study organisations and interview respondents

	Oakwood	Cedar	Chestnut
Service Users	Learning Disabilities	Learning Disabilities	Substance abuse, mental health, learning disabilities, the homeless
Workforce	less than 250	1000+	500
Union recognition	None	Unison	Unite
Managers interviewed	3	2	5
People who use services interviewed	2	2	2
Employees interviewed	4	6	5
Total Interviews	9	10	12

Section 3: Different approaches to personalisation

This section briefly describes the overall approach to personalisation adopted by the three voluntary sector organisations.

Oakwood - A step ahead of the pack

Management at Oakwood enthusiastically embraced personalisation believing its principles matched the organisation's ethos and values, described as:

> *Helping people get a life and not a service … We also wouldn't exclude anybody … Very much about a bespoke, tailored arrangement around each person (Chief Executive).*

Oakwood operated a relatively unique approach to its contracting with local authorities that mimicked the dynamics of IBs, and rejected providing services based on an hourly rate, or block contracts. It pioneered the Individual Service Fund approach in Scotland. Budgets were decided on individual circumstances, accounting for issues such as challenging behaviour, staff training and level of need and after some negotiation, local authorities were then invoiced for an amount per person. The organisation retained a proportion (10 per cent) of each budget to fund emergency provision in case of illness among people who use services and staff.

To encourage independence, Oakwood then embarked on a gradual and tailored programme of unpicking the often 24/7 care packages provided for people.

> *For each individual what you are doing constantly is looking at where they are in terms of taking control of their lives, or who else could be helping them do that (Chief Executive).*

At the same time there was recognition that full independence for all users of services from Oakwood was not possible as some had no family and lacked the capacity to become full employers of PAs.

Despite this approach, management felt that the organisation had some way to go before it achieved fully personalised services. It had in the previous six months appointed a Development Lead to '*think again about personalisation*' (Development Lead) and to attempt to move people who used their services into areas such as employment and developing community connections. Oakwood was also building links through exchanges, guest speakers and trainers with a North American organisation that was seen as a pioneer of personalisation. More recently people with DPs had started coming to Oakwood for the first time; now DPs fund three of its fifty individual services covering eight staff. This move to DPs was viewed positively given that these services were funded more creatively than Oakwood's traditional contracts.

Cedar - A logical and gradual evolution in practice

Cedar provided services to people with learning disabilities. Three years previously, management had identified the then emerging interest in personalised services as the future direction for social services. As a consequence, Cedar recruited a 'personalisation consultant' to analyse what was needed to develop its services and subsequently developed two new senior posts to lead on personalisation. This has been followed by a number of road show events such as conferences and workshops involving people who use services, carers and relatives, local authorities, other voluntary sector organisations and front line staff.

Management identified the personalisation programme as '*the next part of the evolution*' (Head of Personalisation) of a three stage development of its services, these being:

- Phase 1 - supporting people in group homes.
- Phase 2 - facilitating individual tenancies.
- Phase 3 - personalisation and the creation of an environment for greater independence and as close a normal life as possible for people who use services.

For Phase 3, management had established several pilot projects involving eight clients and was anticipating rapid change over the next five years, as one of its main funders was indicating that DPs would be the default option for new service users.

It was also beginning to develop Independent Service Funds where local authorities would be invoiced on behalf of people who use services and the money could only be used for that individual. Cedar would manage the money, but the resource was provided not only for the payment of support, but also to purchase other things according to the individual's choice. It had also established several working and planning groups on personalisation that were management-led, but also included support worker representatives to provide a voice for front line staff.

Chestnut - A tentative return to the past

Chestnut provided services to a wide range of people requiring support including housing support to adults with mental health, alcohol and substance abuse issues. Management expressed a cautious welcome to personalisation as they had concerns over the appropriateness of its principles to certain of their client groups. It was involved in a number of pilot programmes with one of its main funders to provide more individualised budgets to 50 of its 900 service users. Here, the funder was reportedly quite directive in its requirements.

> *It's all based on the personalisation agenda, about outcomes for people, about self directed support, about using terms like 'the people we work for', rather than service users. Changing all the documentation we've got in place reflects that practice (Learning and Development Manager).*

This approach was viewed as a dramatic change compared to the previous situation under the SP funding stream, where there was a strong emphasis on recording hard, reportable tasks related to housing support. In contrast the new regime placed more emphasis on involving people who use services in discussing various qualitative outcomes designed to improve their lives.

> *This is about people being in control, people having support the way they want to be supported with outcomes and achieving goals and moving on. So it can only be a positive thing (Service Manager).*

Respondents felt personalisation was seen as a return to some of the principles of care provided by them pre-SP. To support the change Chestnut created a sub-committee charged with exploring the organisational implications of personalisation. It was also developing a participation strategy for people who use services, and continued funding the role of Learning and Development Manager.

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Section 4: From policy to practice: operationalising personalisation and its implications for the workforce

Personalisation - the policymakers perspective

The policymakers interviewed for this report were passionate advocates of personalisation, but also revealed concerns regarding its implementation; the primary concern being how far personalisation would be associated with cuts in public services.

It could save money actually … and there'll be more of an impetus behind it … what worries me is that it becomes a way of saving money, rather than a way of providing best service (Policymaker 3).

Respondents linked these fears to specific problems with the current commissioning environment, including:

- Poor engagement with people who use services during commissioning and re-tendering exercises.
- The dominance of finance specialists rather than social work specialists in making commissioning and re-tendering decisions.
- Short-term contracts for providers inhibiting the building of relationships with people who use services.

Concerns were also expressed regarding the culture and practices of local authority commissioners that might hinder personalisation, specifically:

- The commitment and training of local authority purchasers in the principles of personalisation.
- The allocation of services based on blocks of hours irrespective of the individual needs of people who use services.
- A reluctance among commissioners to take risks/give up power.
- Funders being wedded to 'hard objectives', rather than 'softer' lifestyle changes associated with personalised services.
- Accepting DPs as a default position to implement personalisation rather than consider other options.
- A disconnection between health and social care professionals.

The role of the voluntary sector

Policymakers were positive about the voluntary sector's contribution to personalisation, noting a number of advantages over public and private providers. Specifically:

- An approach to people who use services that was based on 'whole life', rather than narrow and time limited interventions.
- Stronger participation and consultation mechanisms for people who use services.
- Strength in service delivery in the sub-sectors of children and young people and those with learning disabilities.
- The possession of a more flexible workforce.
- Fewer bureaucratic constraints compared to the public sector.

To maintain this competitive advantage, it was felt voluntary organisations had to continue to evolve. Ideas included voluntary organisations moving to a model of provision that resembled retail outlets that marketed and sold themselves to a multitude of individual service users rather than to local authorities. Several respondents described this as a move to a '*just-in-time*' approach to care, where providers moved away from delivering uniform services, to a situation where they would '*fade in and out of peoples lives*' as and when needed (Policymaker 2).

Policymakers also confirmed the potential benefits for the workforce from personalisation through greater task empowerment. This empowerment would vary, however, because of the variety of need between and within the vulnerable groups served by the sector. It was also hoped that this change in the organisation of care work would be accompanied by a degree of workforce re-skilling, supported by adequate training and development, a more rigorous approach to continuous professional development and adequate supervision.

A key problem, however, remained the resourcing of training and development in the current financial climate.

Training and development - it's one of the things that get cut … If you don't invest in the workforce you are going to hit a wall and can't actually do certain things. Or, we have done things so badly that we are going to have to have a big recovery programme (Policymaker 1).

This issue was of particular concern because the policymakers felt there was a need for more training as parts of the workforce were reportedly reluctant to accept more task empowerment with the associated risks and 'let go' areas of control. This situation stemmed from workers' innate desire to protect people who use services and concerns over the degree of accountability and security as employees/carers if something went wrong.

I think it's difficult for people who have had to learn the bureaucratic process and now are being told, 'that's just out, that's out the door now, you have to do something different' ... I think there is something about more autonomy and taking that autonomy and rising to it and not being frightened of it … and there will be big training issues (Policymaker 3).

Other HR/workforce concerns raised by the policymakers included:

- The possible development of a two-tier workforce with regard to pay and conditions, with specialist multi-skilled employees benefiting, but others caught in a 'race to the bottom'.
- More unsocial hours working.
- Job security issues once staff support an individual to live more or less independently, or a clash of personalities emerges.

Policymaker 2 linked the above issue to the development of '*just-in-time*' care, where the sector's employment relationships would be built around a casualised workforce responding to fluctuations in demand for services leading to compromises over issues such as training and service quality.

I could see a scenario where we end up with a casualised workforce in social care if it is just-in-time purchasing, which is not the best way of delivering a skilled, competent, qualified, rewarded workforce … the SVQ stuff is ok, but it doesn't work so well if you've got a part-time or casualised workforce … a disproportionate amount of money would have to be spent on someone who's on a zero-hours contract to actually get them qualified. So there are tensions at the moment towards personalisation generally, this push towards casualisation, undermining skills development and the resources that you have to put into it (Policymaker 2).

Overall, policymakers did not see the tensions within personalisation between the aspirations of people who use services and workforce issues as a strict 'win-lose' scenario, where gains by the former automatically impinge on the employment rights of the latter. Rather, they recognised the need to balance the interests of both parties in difficult financial circumstances.

Voluntary sector employment and personalisation

This section of the report considers how voluntary organisations are responding to the workforce challenges of personalisation.

Accepting the vision of personalisation - management and employee views

Managers were well aware of the principles of personalisation, which they broadly agreed with. They were also realistic though about how local authorities would link it to cuts in public services, to the possible detriment of its emancipatory aspects. Management in Oakwood, for example, reported how one of its key funders was asking for 7.5 per cent savings for the current financial year. Similarly, a senior manager from Chestnut described how one of their main local authority funders had:

Been very upfront about that they want to reduce service costs and part of doing that will be the implementation of Changing Lives and the personalisation part of it.

Managers also confirmed the lack of training of local authority care managers in the principles of personalisation. In Chestnut, managers reported how within the local authority that was advocating personalisation, there was a clear strategy from the top of the organisation, but it had not filtered down to care managers. The care managers remained risk averse and operated under the old systems of bureaucracy, monitoring and auditing of the SP funding stream.

With the exception of one or two employees, most respondents had little or no understanding of the changes to service budgets under personalisation. After some initial prompting from interviewers employees exhibited more understanding of the principles of personalisation in terms of its impact on the day-to-day provision of services. Employees in Cedar, for example, appeared well versed in the language and ethos of customer service:

They're the customer and we're a retailer and they can pick and choose what they like so they're getting what they want (Support Worker, Cedar).

The awareness of the link between personalisation and cost cutting was not limited to managers, however.

It's a cost cutting exercise as far as the councils are concerned but I think it's up to us to put a positive slant on that because it is giving the guys absolute control over the things they want in their lives (Support Worker, Cedar).

Overall employees felt that the achievement of cost savings, while inevitable, had to be undertaken gradually and in line with the progress of the person using the service towards independence.

Employment implications

Each organisation reported significant changes to their HR policies and practices through personalisation. The following sections provide an overview of these changes, along with employee reactions.

Recruitment and selection

From inception, Oakwood have recruited staff around the person with a rigorous matching process and with full involvement of the person to be supported. Oakwood have also established a focus group to train people supported in interviewing protocols and techniques. They also have a policy of encouraging local recruitment to facilitate the building of community links for people using services.

Cedar were moving away from 'mass recruitment', in order to tailor new staff to the individual user, even to the point of hiring employees who would be prepared to involve the people they work for in their own family lives.
Cedar had also redesigned its recruitment adverts so that they were personalised, with one of the senior management leads noting a typical advert:

X enjoys going to the theatre, football on a Saturday and likes quiet nights by the telly. Would you like to support somebody to live an ordinary life?

Selection events would then be built around observing candidates interact with people using services in social activities. Moreover, this effort to align the interests of staff to service users within Cedar was being extended to the organisation's bank of sessional staff. Chestnut also operated a range of scenario events in their recruitment to ensure 'fit' between employees and users.

Managers in the three organisations, however, reported that the most radical change to recruitment was anticipated to be the type of employment contract offered to new workers - representing a transition to '*just-in-time*' care through part-time, flexi-time and annualised hours contracts. Oakwood have always had variable and casual contracts and offer a 'variable hours contract' for new starts that does not guarantee a specific set pattern of hours for workers in a given week. Cedar was overhauling its computerised HR systems and anticipated that its HR department would be engaged in drafting multiple contracts of employment for new staff that reflected differences in substantive terms and conditions including hours of work.

Changes to working hours

Much of the anticipated changes to employees' working hours under personalisation are encapsulated in the quote below:

Gone are the days of Monday to Friday, nine to five. Somebody with a learning disability wants to go to a nightclub that finishes at two o-clock in the morning, staff have to recognise that it's not just their job now, it's somebody's life (Head of Personalisation, Cedar).

However, managers in all three organisations reported how this was logistically very difficult and expressed concern about managing the tensions with employees' work-life balance.

Employee concerns included problems for those relying on public transport during unsocial hours. Other employees also remarked how demands for greater flexibility would exacerbate existing problems regarding being unable to take proper lunch breaks. Management in Oakwood admitted to tensions around the organisation of sleepovers, because personalisation meant staff faced uncertainty about when they started and finished.

There was also reported anxiety over the growth of fragmented hours, where staff shifts would be split across a working day. One Support Worker from Cedar who was a keen supporter of personalisation stated:

Another big problem that I've seen other staff speak about is when people are spending supported time with their friend … A lot of managers say if someone is going into the cinema for an hour and a half and they don't want you there then you're going to have to occupy yourself. I don't think that's fair for a

member of staff. You shouldn't have to work three hours then go away on your own time not getting paid and having to use extra travel and then come back. So that's one problem I've seen other people get really angry about.

There was also evidence that there were expectations that workers would use their own time to organise events for people using services in order to build community connections, but that this was not universally accepted among the workforce.

A minority of employee respondents felt that the issue of flexible working was the new reality and staff had to get used to it.

I think that some of the staff have had some natural concerns about the security of their jobs and the patterns of work that they're going to do because it might see them doing split shifts and stuff. I don't really think that's a bad thing because it's going to make sure that the people who work in social care are the people who really want to work in social care (Support Worker, Cedar).

Employee skills and training

Management in all organisations confirmed that staff needed to develop into what was termed community enablers or connectors, which could only be achieved if certain skills gaps were addressed. In particular, staff would have to be '*more open minded about what the person can achieve … they're frightened to give them too many challenges*' (Service Manager, Oakwood). There was also recognition of the need for employees to develop sufficient skills to balance the need to offer choice and new options to people receiving services, without imposing or causing anxiety among them. Recognising this issue Oakwood was beginning to redevelop its training in conjunction with several external partners including one from overseas. It had also introduced what it called *The BIGPlan*, where through group and individual facilitation, people using services, families and staff would try to initiate ideas to develop further aspirations for the former. As part of this approach, and reportedly inspired by the *in Control* model, the organisation also increased the frequency of its *Values Training* from quarterly to monthly events.

Within Cedar although management acknowledged staff had a strong value base, they felt there were skills gaps

in terms of their sensitivity to people who use services. It was, therefore, moving to change its induction events/ training to include more awareness events to illustrate potential indignities and invasions of privacy experienced by people who use services. Statutory training such as manual handling and the use of hoists was also being personalised to sensitise workers with regard to how they interact as a staff team, and with people who use services when undertaking such tasks. It was also felt those working within the Finance Department needed training in how to customise financial reports and documentation for those individuals holding their own budgets.

In Chestnut, it was felt that some employees '*follow procedures, but lack that innovation or creativity*' (Learning and Development Manager). Resultantly, the Learning and Development Manager anticipated a significant overhaul in training provision to focus on providing staff with the tools to allow creativity and risk taking, while at the same time being aware of the limits of such risks.

Finally, management in Chestnut and Cedar were in the process of beginning to train staff in the use of new support/personal outcome plans (POPs). In Chestnut, for example, it was anticipated that staff would be able to eventually write new outcome plans in conjunction with people who use services, (including likes and dislikes, goals, changes in lifestyle, timescales and measures).

All respondents though expressed concerns that the current climate of public service cuts threatened training. The Learning and Development Manager of Chestnut reported that the organisation had failed to fill two vacant posts in his Department because of budget reductions. The organisation was also asking staff to commit to funding 50 percent of any formal qualification they were undertaking. It also maintained training by resorting to a strategy of 'robbing Peter to pay Paul', i.e. if a budget from one local authority was in surplus, they would use that to offset deficits in training budgets from other funders. In Oakwood, management now required staff to undertake qualifications for registration in their own time, but continued to pay for these.

Management in Cedar was struggling to retain its commitment to having a training budget equivalent to three per cent of staffing costs, with potentially damaging consequences for service quality.

We're having to cut the percentage of staff training, because they've cut the funding so desperately and we know there's only worse to come … my fear in all of that is that in cutting we're going to affect the quality of the staff we are putting out there as well … The training has been cut, the monitoring of training isn't as good as it used to be (Senior Manager, Cedar).

There were differences and similarities in opinions among employees and managers across the organisations with regard to the above issues of skills acquisition and training.

The majority of employees associated personalisation with a significant increase in job satisfaction and greater sense of achievement as a consequence of the additional opportunities for expressing creativity and autonomy, multi-tasking, community building, and working in partnership with representatives from other professions and statutory authorities associated with personalisation.

> *I think one of the biggest things for me is that we've sort of got permission to think outside the box and be creative whereas before we weren't. We were sort of this is where you are to work and within these confines (Team Leader, Cedar).*

Employees, however, also shared a perception that other staff had simply not yet bought into the idea of personalisation. In Cedar it was anticipated that some staff would feel that personalisation was just the '*current buzz … the latest craze and would ask why are we doing it*?' (Team Leader, Cedar). Again, in Cedar it was felt that morale among Day Centre staff was being undermined by having their work compared unfavourably with personalised services. In Chestnut, a support worker confirmed management's claims regarding anxiety among some workers when he stated '*I think a lot of staff are frightened by it [personalisation]. There's going to have to be a lot of nurturing and encouragement and not trying to jump in too quick.*'

There were differences between management and employee perceptions regarding the issue of training and development and personalisation. Employees in each organisation, showed some appreciation of the resource constraints on training budgets, with a majority reporting favourably with regard to the level of resources and access to training and development opportunities for personalisation.

One disturbing finding, however, was evidence of a perception among several front line employees in each organisation that they did not need to have any additional training to assist them to deliver personalised services. Among some of these respondents this reflected a view that nothing had significantly changed in their working lives beyond completing paper work in a manner that was more accessible to people using services.

> *I don't think we actually need training if we've embraced life then I think that will be enough. Life experiences, that's what we're trying to do, give these people life experiences. It's just we've got to have open minds that's the only thing (Support Worker, Chestnut).*

Performance management

Management respondents anticipated changes to performance management systems as a consequence of personalisation. In Cedar, the Head of Personalisation spoke of the development of a 'customer satisfaction' or 'customer excellence' model where staff focused on delivering on the individual needs of people, rather than generic organisation-wide standards. These service user outcomes would be evaluated for progress during staff supervision and team meetings. The pilots were proving to be popular with staff.

> *It's made our team stronger because everybody sees what's involved and everybody appreciates this is for the benefit of the person. So again I think it's the accountability of people with their actions because it's now like XXX is a customer and you need to make sure she is as satisfied as she needs to be. I think it's good (Support Worker, Cedar).*

In Chestnut there was perceived to be a need for change in the nature of staff supervision that encouraged reflection about progress towards achieving outcomes for those using services. Management respondents did, however, feel that the lack of resources to the sector could, again, undermine these initiatives largely because the managers/team leaders responsible for overseeing them would have insufficient time and resources to fulfil their supervisory roles.

It was also evident across the three organisations that management believed there was a group of employees, albeit quite small, that would not take easily to the changing roles demanded under personalisation. It was equally clear that management were willing to redeploy or manage these employees out of their organisations:

> *It's a shame for staff, particularly in the present climate for anyone to lose their job, but at the end of the day we need to make sure that service users are getting the package that they signed up for and they want (Learning and Development Manager, Chestnut).*

The danger here is that there are a number of factors that are beyond the control of workers in terms of achieving the aims of personalisation. Workers highlighted how much depended on the willingness and ability of people using services to engage in personalisation, because of fluctuations in health for example. Several support workers at Chestnut reported that personalisation was fine for the more independently minded people, but more challenging for others. Another key issue was the general financial climate.

It's the cost of activities and transport to and from is always an issue, as is the associated costs for someone to be supported while going to classes. It's never a blank cheque (Support Worker, Cedar)

Awareness among employees of the need to build more community connections was quite rare. Where employees were aware of the need to build community connections there was also a perception that community building to develop friendships and independence for people who use services represented a significant challenge for the current skills of workers in terms of overcoming apprehension in local communities.

This man I've worked with he's a lovely man and people love meeting him, but the minute you ask them 'would you go and take him out for a run for a few hours?' They say 'Aye, are you coming?' - 'No it's just you'. Then they step back. That's too big a responsibility (Team Leader, Oakwood).

Performance management systems then have to take account of these external factors to ensure fairness for workers that face considerably more complex and demanding performance expectations.

Job insecurity

Management respondents recognised that staff would have job security concerns under personalisation. In Cedar, the senior management felt that as block funding ended and people in possession of IBs and DPs '*shopped around*' this would mean, employees '*will only be as good as the day's work they've done*'. In response to these emerging concerns each organisation emphasised their commitment to redeploy staff were possible, but admitted the scope for such opportunities were currently resource-limited and would be further strained if personalisation spread throughout their organisations.

Again as with the policymakers some respondents revealed concerns regarding the impact of casualisation and insecurity on service quality with insecure workers being reluctant to allow greater independence for people using services to protect their livelihoods.

That's always been an ongoing issue how you work with staff to think your job is not just about supporting this person, it's about enabling them to do as much as they can for themselves. In that sense it is about doing yourself out of a job (Development Lead, Oakwood).

Employees in Oakwood did express such concerns over job security, which arose from two sources. The first came from the introduction of DPs, and the perceived ability of clients to move to other providers. The second related to the 'variable hours contracts', where one worker felt that Oakwood was offering a diminished commitment to redeploy if work with current users of services came to an end.

If everything went pear-shaped then I don't have any come back to say you need to give me x number of hours a week (Support Worker, Oakwood)

Some employees adopted a more philosophical outlook to the implications of personalisation for job security.

You know I believe when we go into this job we should go in to make ourselves redundant. To be successful is to be redundant. I would love if he didn't need me anymore. What an achievement that would be (Team Leader, Oakwood).

Moreover, it is important to highlight how many employees expressed job security concerns that were linked to the broader economic climate, awareness of lost tenders, redeployments and the drive among local authorities to cut costs rather than personalisation.

The team have found it very difficult because I think it's about job cuts. It's about the council saving money. It's about a cost cutting exercise and putting it in a fancy way. The team have really struggled because obviously some of them are the only wage earners (Team Leader, Cedar).

Health and safety

The three organisations were moving towards a culture of risk enablement in order to facilitate greater independence for people using services; the aim being to move away from what was perceived to be the previous culture of over protection through risk assessment. This approach, however, carried its own risks of workers not following proper health and safety procedures under the new personalisation regime.

It's really horrible and annoying, especially when you have risk assessments and things. If I was going to use my cooker I wouldn't risk assess it every time I went along, I'd use my common sense. I think Cedar's moving away from that. Now it's supporting strategies. My health and safety it's not something I even consider. You don't do health and safety checks in your own house and it's not something I do in my work either. I just think it's ridiculous (Support Worker, Cedar).

Other respondents had health and safety concerns related to managing challenging behaviour. Challenging behaviour was felt to stem from several sources. The first of which was from anxiety among people using services about exercising choice and developing more independent lives. This anxiety was seen to originate from people's time within long-stay institutions.

It can be distressing for them [people using services]. It can cause anxiety, it can cause aggression as well because the person just feels out of their depth and they're being asked to do something that they're not able to do (Service Manager, Oakwood).

Another source of anxiety related to the pace of change. Here, several respondents reported how local authority funders had called for cuts in services/hours, without consultation, and this had led to deep anguish among the people they provided services to and a degree of aggression. Organisations reported how they met this challenge through policies on lone working, de-escalation techniques and risk assessments along with continuity of staffing within project teams so that workers would be able to spot the trigger points that prompt challenging behaviour.

There was, however, another side to dealing with challenging behaviour. Some employees reported how providing choice to people using services could reduce incidents. One example in Cedar related to staff having to regularly face challenging behaviour from a client because in the past she was required to attend a Day Centre, leading to verbal outbursts. The introduction of choice for that individual had now led to a reduction in incidents. In addition, in Oakwood it was claimed that one person who had a reputation for challenging behaviour changed once support hours were reduced from a 24/7 model - '*too much support wasn't good for XXX*' (Team Leader).

Pay and conditions

In recent years, Cedar and Chestnut had undergone a series of changes to their pay and conditions as a consequence of the general climate of insecure funding for the voluntary sector. Management in Cedar and Chestnut were unable, however, to provide many insights into how the individualisation of budgets could change pay and conditions in their organisations.

Oakwood did provide insights into how individualised budgets can fragment pay systems. Oakwood's employees were recruited on individual contracts and allowed to work in a maximum of two service teams that were configured around the budgets of people using services. Local authorities over recent years had consistently failed to provide any inflationary uplifts to existing contracts so there had been no cost of living increases. Differences in individual budgets were, therefore, not always a consequence of differences in need, but availability of finance from individual funders.

There was no union recognition or salary scales and management determined pay. Each team's pay, however, differed irrespective of whether workers were at the same grade. This is because management determined pay rates in accordance with the value of the client's individual budget, with employees often receiving different rates of pay across the two teams they worked with.

To achieve a pay increase, staff were encouraged to work on achieving savings through creativity on the annual budget agreed with the person using the service. If successful, and again in agreement with the individual, they could be awarded a £500 bonus increase. For employees who were working with a client whose budget may go into deficit it was unlikely that they would receive any bonus. In these situations often the organisation gave bonus payments from the small reserves that they had. Although the organisation claimed to be open and transparent about these arrangements during the recruitment stage, this was a cause of potential tension in relation to the work-effort bargain.

It's the ones where the stress level is high. They're the ones where the budget is really stretched so they're the ones where people can be earning less. That's not say they haven't been working just as hard, but it's maybe the person they're working for just finds life more difficult and isn't able to achieve that level no matter how hard the team works (Service Manager, Oakwood).

In terms of the attitudes of front line workers in Oakwood, there was evidence of discontent over pay.

I'm getting less paid than staff in other companies. Now I'm here because of the man I support, it's not all about money for me, as long as I can pay my bills I'm happy. But not everyone can be like me... some people need the money ... And from the day this company started that's always been a bone of contention. You go to meetings and it would be 'how much are you getting?' (Team Leader, Oakwood).

It is debatable how far this degree of pay flexibility will or can be extended throughout the voluntary sector as personalisation develops. Dissatisfaction with the prospect of any further cuts in terms and conditions of employment, whether it was associated with personalisation or just the general economic crisis was voiced by employees in Cedar and Chestnut. Respondents emphasised how they operated largely on the continued goodwill of staff despite persistent undermining of terms and conditions. Yet managers were cautious with regard to whether this goodwill would persist if pay and other employment conditions were challenged further given demands facing the workforce.

You are encouraging people to make choices, but predominantly that is going to be provided by social care staff and because of costs that is going to be people coming in at Support Assistant level. You are then expecting them to function at quite a sophisticated level ... That's an awful lot you're expecting off somebody who's on 12 or 13 grand a year (Service Manager, Chestnut)

These concerns were echoed on the front line.

I think it would be much better if people were paid better ... There are a lot of people in this job who will use the low pay as an excuse not to organise things, not to do above and beyond because they

don't get paid enough. So that's a big problem and I think Cedar is probably one of the worst for pay for the amount the staff are supposed to do. We all come in for extra meetings. There's more work and people are more accountable for their work (Support Worker, Cedar).

The perspective of people using services

Overall across the three organisations there was general satisfaction among people using services with the support they received and the workers who provided it. They also indicated participating in a range of social activities including holidays, attending discos, concerts, gardening, cinema, bus journeys and so on. One individual had also requested a move from his current accommodation which his team was trying to facilitate.

At the same time, there was evidence that the principles of personalisation were not, as yet, being fully implemented. There was no indication from people receiving services of any awareness or understanding of the reconfiguration of the budgets to DPs or IBs. Nor did these respondents indicate that they had any choice in what organisation would provide them with services. Lack of choice was also apparent from responses regarding the recruitment of workers who supported those using services. The level of choice appeared to differ across the organisations. In Cedar, for example, a respondent was quite clear that it was solely up to the organisation that supported them regarding who their key worker was. In Chestnut, people using services indicated a lack of continuity among their support team - '*it's different ones each day ... the head one over there chooses them, tells them where to go every day*'. In Oakwood, however, there was evidence that the views of people using services were heard.

I had support from a guy but I didn't get on with him because all he was worried about was himself. I argued with him - he just went and left and never bothered to see if I was alright. He just packed it up ... I just told XXX who I wanted it to be. I said I want Y. Y just went onto the team leader for me. Y has been with me for 12 years now.

At the same time, this appeared to be an illustration of how such decisions had always been made in Oakwood, rather than evidence of a recent and significant increase in choice for people using services.

People using services were satisfied with the level of choice they had over their social activities and discussing these choices with staff. One respondent spoke of more

opportunities to visit Edinburgh; another spoke of the need to save in order to go on holiday; while another with her choice not to visit a Day Centre. However, with the exception of one or two respondents, it was difficult to discern whether this represented any significant change in provision or empowerment of those who received services.

One respondent from Cedar who welcomed a recent expansion in opportunities to do different activities, reported, however, that his enjoyment could be limited because there was generally a lack of time because his Support Worker was only with him between 11.00am and 4.00pm.

It also appeared that the amount of choice exercised over the level of support needed varied. For example, in Chestnut one respondent noted:

I tell them 'I don't need help today' and they go away, or you can say 'I need extra help today'.

While another added:

I have support sometimes in the afternoon. Sometimes I have support in the evening … It's a set timetable … they just decide and tell me how much I've got each day.

Section 5: Conclusion and recommendations

The purpose of this report has been to explore the workforce implications of personalisation in the voluntary sector. It has addressed a series of related questions. The first of these was to identify the functions, skills and behaviours required of workers in order to deliver personalised services, and evaluate the extent to which the voluntary sector workforce currently exhibits them. The research revealed that front line voluntary sector workers face considerable demands on their time through calls for enhanced decision-making, dealing with and taking on the tasks of other professionals, community building and risk enablement skills. Compared to previous approaches to care under SP and other budgets, where there was heavy monitoring of daily routines and organisation of work, this represents a degree of up-skilling and expansion of task empowerment and autonomy for front line care workers. A consensus was apparent across all the groups interviewed that there were groups of workers within the case study organisations that lacked all or some of these new skills.

To overcome these skills gaps and implement the principles of personalisation organisations were in the process of introducing changes to key areas of HR policy and practice including:

- Increasing involvement of people using services in recruitment to match new employees with their interests.
- Developing sensitising training programmes to the principles of personalisation to improve service delivery and encourage the above skills among employees.
- Developing performance management systems that were focused on notions of 'customer satisfaction'.
- Adopting a risk enablement approach to health and safety.

In terms of the impact on job functions, working practices and terms and conditions of employment for employees, changes as a consequence of personalisation were also potentially quite profound. In particular, the pilot projects that were under way in the case studies implied a major reconfiguration of working hours, moving towards casualised, fragmented patterns of work leading to a '*just-in-time*' approach to care. Work was also anticipated to be more insecure as workers are encouraged to build more independence for people using services, and thus reduce their own working hours, with diminished opportunities for redeployment if full independence was achieved. Changes to pay and conditions are as yet unclear, but the example of Oakwood presents an example of fragmentation of pay rates that are aligned specifically to the level of individual budgets that contains little traditional notions of collective terms and conditions.

The final question was concerned with identifying what learning is required when applying personalised services. The research offers a number of lessons with regard to the likely success or otherwise of the above changes to employer HR policies and practices in achieving the aims of personalisation, which can be summarised as:

- The introduction of personalised services is better focusing on the specific needs of the people using services, rather than short-term financial savings.
- There are considerable cultural barriers within local authorities that can possibly stall progress toward personalisation.
- Organisations appear to have some way to go with regard to offering real choice to people using services over who provides them with support.
- Other factors beyond the workplace and outside control of workers, such as the health and attitudes of people using services and engagement by communities can hinder progress towards personalisation.
- The aims of up-skilling the workforce risk being undermined by future limitations regarding insufficient resources for training to the sector.
- There appears to be a gap among a proportion of employees with regard to their existing skills and the level of training needed to achieve personalisation.
- The nurturing of task empowerment, discretion and risk enablement among the workforce to achieve personalisation has to take account of the real concerns of employees with regard to working unsocial hours and job insecurity.
- Organisations need to understand that the issue of managing challenging behaviour in the context of personalisation is complex, and a matter of responding to the individual needs of people using services, within a framework of proper health and safety practice and not focusing overly on cuts in spending.
- The prospect for savings in social care generated by cutting terms and conditions of employment risk undermining employee morale and commitment, and the aims of personalisation.

With these lessons in mind, this report recommends the following:

At the policy level

- Policymakers to develop a campaign promoting the long-term nature of the personalisation agenda, which encourages commissioners and other key stakeholders to put the needs of people using services at the heart of the transformation so that real long-term savings are made to the public purse.
- Joint training/workshops between front line service commissioners in local authorities and the voluntary sector in the principles and practical application of personalisation and the implications for commissioning practice.
- Policymakers, employers and trade unionists to jointly lobby the Scottish Government to protect resources devoted to training the social care workforce to achieve personalisation.
- Refocus existing qualifications and develop new training programmes to upskill staff in the skills required under personalisation.
- Employers and trade unionists to jointly lobby the Scottish Government on issues relating to the protection of worker terms and conditions of employment in voluntary organisations from the onset of personalisation.

At the organisational level

- To enhance the reputation of individual organisations and the sector generally, there needs to be greater reporting and promotion of success stories to central and local government and people who receive services in achieving personalisation.
- Provide capacity building funding for the voluntary sector to encourage further practice development in the principles of personalisation
- Provide funds to build capacity among voluntary sector providers that help them reshape or introduce marketing functions/departments that facilitate the effective marketing of their services to individuals in the community rather than to local authorities.
- Voluntary organisations to further involve people using services in recruitment and day-to-day decisions over which worker or workers support them.

- Performance management systems must be sufficiently tailored to account for the external factors that can influence the success or failure of worker efforts to facilitate personalisation.
- Organisations conduct proper training audits to assess skills gaps and ensure all employees are adequately versed in the necessity of embarking on training to meet the demands on their roles under personalisation.
- Any changes in working hours of existing staff to be undertaken in consultation with employee representatives, including trade unions.
- Joint management/worker consultation on changes to organisational redeployment and redundancy policies.
- Promote a culture of continual organisational learning relating to the health and safety of workers and people using services, including dealing with challenging behaviour in the context of personalisation.

Further areas of research

Finally the report raises as many questions as it offers answers and there are a number of other areas relating to the introduction of personalisation in the voluntary sector and its workforce implications worthy of further research, including:

- The evolution of the voluntary sector-'service user' relationship from provider-'service user' to provider and customer.
- Investigating the growing casualisation of work in the sector through the onset of personalisation, and how this impacts on worker morale.
- Further investigation of how other HR policies, such as absence management, are influenced by the personalisation agenda.
- Union responses to the challenge of personalisation to worker terms and conditions and the implications for their own growth strategies in the sector.
- Longitudinal data gathering concerning the implications for the HR function and its services to organisations embarking on personalisation.
- Exploring the evolving policy links across the UK between personalisation and notions of the 'Big Society' and how this impacts on voluntary sector independence and workforce changes.

References

1   Commission on Personalisation (2009) *Briefing 1: Surveying the Landscape*, available at http://
fullcostrecovery.3wise-dev.com/uploads/files/Briefing%201.pdf, p. 1.
2   Figures for the UK from Samuel, M. (2009) *Direct Payments, Personal Budgets and Individual Budgets* briefing
document for communitycare.co.uk available at http://www.communitycare.co.uk/Articles/2009/04/08/102669/
direct-payments-personal-budgets-and-individual-budgets.htm
3   Ritchie, A and Woodward, R (2009) 'Changing Lives: Critical reflections on the social work change programme
for Scotland', *Critical Social Policy*, 29, 3, 510-532.
4   Figures for Scotland from Scottish Government (2010) *Self-Directed Support (Direct Payments) Scotland 2010*,
(September) Edinburgh: Scottish Government.
5   Department of Health (2005) *Independence, Well-being and Choice*, Norwich: The Stationary Office.
6   Help the Aged (2008) *Personalisation in Social Care*, London: Help the Aged.
7   Rabiee, P, Moran, N and Glendinning, C (2009) 'Individual Budgets: Lessons from Early Users' Experiences',
British Journal of Social Work, 39, 5, 918-935.
8   See for example Lymbery, M (2010) 'A new vision for adult social care? Continuities and change in the care
of older people' *Critical Social Policy*, 30, 5, 5-26., McLaughlin, K (2007) 'Regulation and the Risk in Social Work: The
General Social Care Council and Social Care Register Context', *British Journal of Social Work*, 37, 7, 1263-1277 and
Priestley, M, Jolly, D, Pearson, C, Ridell, S, Barnes, C and Mercer, G (2007) 'Direct Payments and disabled people in the
UK: Supply, demand and devolution', *British Journal of Social Work*, 37, 7, 1189-1204.
9   Social Care Institute for Excellence (2009) *At a Glance 13: Personalisation Briefing: Implications for Voluntary
Sector Service Providers*, available at http://www.scie.org.uk/publications/ataglance/ataglance13.pdf
10   Carr, S and Dittrich, R. (2008) *Personalisation: a Rough Guide*, London: SCIE.
11   Cunningham, I (2010) 'The HR function in purchaser - provider relationships: Insights from the UK Voluntary
Sector ', *Human Resource Management Journal*, 20, 2, 189-205.
12   Leadbetter, C. and Lownsborough, H. (2005) *Personalisation and Participation: The Future of Social Care in
Scotland*, Edinburgh: Demos, p. 36.
13   Carr and Dittrich, op. cit.
14   Carr and Dittrich, op. cit. p. 17
15   Glendinning, C., Challis, D., Fernandez, J. et al. (2008) *Evaluation of the Individual Budgets Pilot Programme*:
Final Report, University of York: Social Policy Research Unit.
16   Lymbery, McLaughlin and Priestley et al., op. cit.
17   Carr and Dittrich, op. cit., Yeandle, S and Stiell, B (2007) "Issues in the Development of the Direct Payments
Scheme for Older People in England", in Ungerson, C and Yeandle, S (Eds) *Cash for Care in Developed Welfare States*,
Palgrave, Basingstoke, Hampshire.
18   Allen, R., Gilbert, P. and Onyett, S. (2009) *Leadership for Personalisation and Social Inclusion in Mental Health*,
London: SCIE, p. 29.
19   Leece, J (2010) 'Paying the piper and calling the tune: Power and the direct payment relationship', *British
Journal of Social Work* 40, 1, 188-206.
20   Unison (2009) *Personalisation of Social Care*, available at http://www.unison.org.uk/localgov/pages_view.
asp?did=5528
21   Department of Health (2008) *Local Authority Circular: LAC (DH) (2008) 1 Transforming Social Care*, available
at http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_082139.pdf
22   Cited in Carr and Dittrich, op. cit.
23   Allen et al., op. cit., p. 28
24   Lymbery, op. cit.
25   Spandler, H (2004) 'Friend or foe? Towards a critical assessment of Direct Payments', *Critical Social Policy*, 24,
2, 187-209.
26   Organisations are represented as pseudonyms
27   This was within the context of Section 51, Part 5 of the Adults with Incapacity (Scotland) Act 2000, which states
that it is not appropriate to carry out research with adults who are unable to give consent for themselves when the
research can be carried out with adults who can give or withhold consent themselves.