

NHS Personal Health Budget Holder Contract Guidance - Easy Read version

PHB Support Services



Explainer / reference guide (read only) for
PHB Support Services Contract.

This document does not need to be signed
and is not a legally binding agreement.





Introduction

1



Section 1. Contract details

3



What is in the contract

3



What the provider must show

4



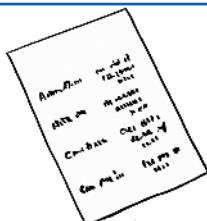
Section 2. The services

6



How we want PHB services to work

7



Service descriptions

10



3A: Training services for PHB employers and personal assistants

11



Ways the provider can help you **11**



3B: Advocacy services **16**



Ways the provider can help you **16**



3C: Recruitment support services
for you as an employer. **23**



Ways the provider can help you **23**



3D: Third party service with
on-going management support **30**



Ways the provider can help you **30**



3E: Brokerage support, information
and guidance **40**



Ways the provider can help you **40**



3F: Employer insurance services **43**



Equality and diversity **45**



Safeguarding **47**



Complaints **49**



You can get help if something goes wrong **50**



Mediation **51**

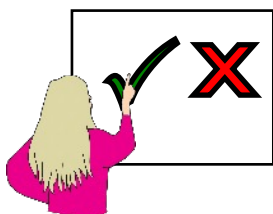


Dispute resolution **54**



If a service suspended

55



Capacity

57



Quality assurance

57



When the service has finished

59



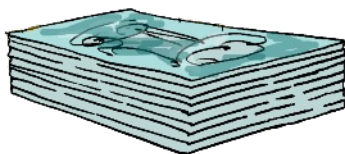
Data protection

60



Section 3. Payment

62



Pricing

62



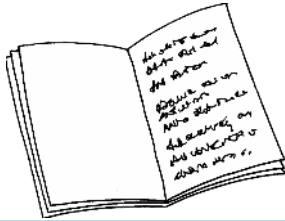
Invoicing and transfer of budget

63



Contract

65



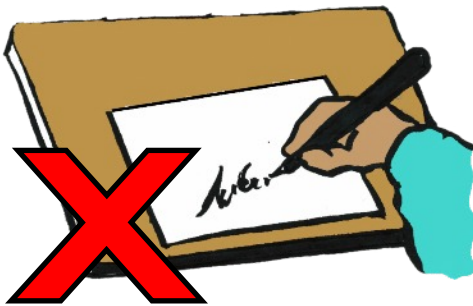
What the words mean

66

Introduction



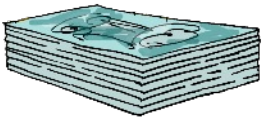
This document will help you to understand what is included in the non-easy read PHB Holder Contract, at the front of this document, which needs to be signed by the PHB Holder.



This document does not need to be signed by the PHB Holder, and is not a legally binding contract.



A **Personal Health Budget** is often called a PHB.



A **PHB** is NHS money you can use to support your health and wellbeing needs such as:

- treatments
- equipment
- personal care.



A PHB lets you to create an individually agreed **Personalised Care and Support Plan** or **PCSP**.

A **Personalised Care and Support Plan** is about what is important to you.



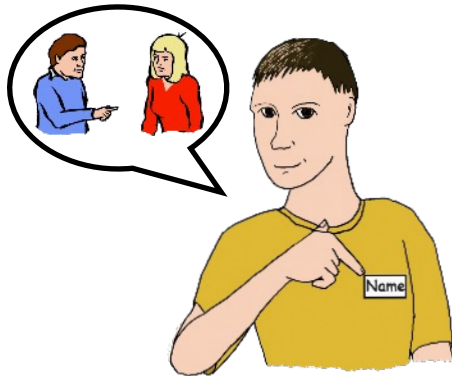
It offers people of all ages greater choice and flexibility over how their assessed health and wellbeing needs are met.

Section 1. Contract details

What is in the contract



A contract tells you how your provider is expected to support you and if there is anything you need to do.



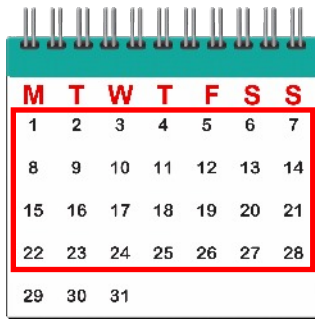
It shows your name and the name of the person you say can help you.



It has the name and address of the provider.



It gives you the name, email and phone number of person signing for the provider.

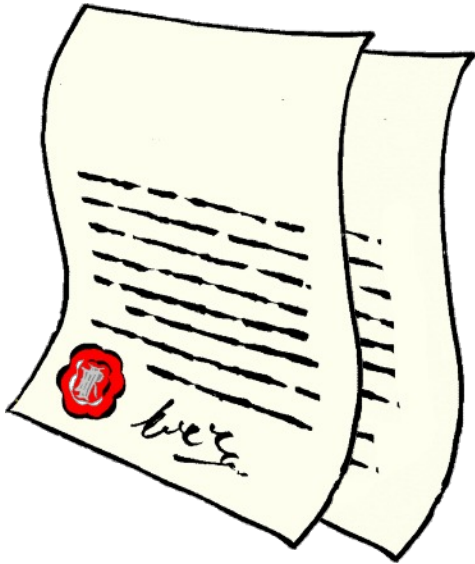


Notice period to end paying for service:
28 days.



What the provider must show

1. Evidence of company registration.
2. Evidence of VAT registration, if required.
3. Evidence of appropriate company insurance documents.
4. Evidence of provider CQC registration. CQC regulate and inspect health and social care providers in England.
5. Evidence of ICO registration.
6. Evidence of ODS registration.



7. Evidence of NHS Data Security and Protection Toolkit (DSPT) registration.
8. Details of sub-contracting arrangements, if needed.



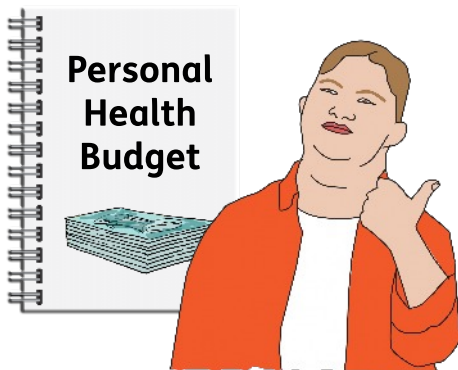
The Glossary of Words for PHB Holder Contract document (Appendix B) explains some of these terms.

Section 2. The services

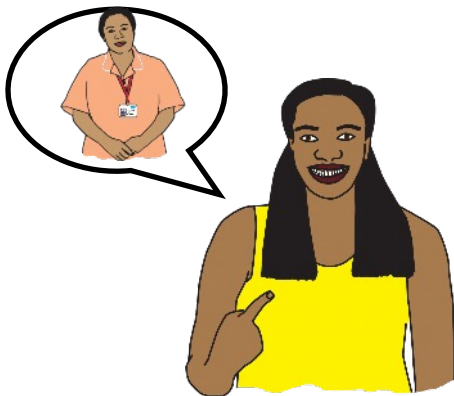


We are the North Central London Integrated Care Board, called NCL ICB for short.

See glossary (Appendix B) to find out more about NCL ICB.



NCL ICB wants providers to deliver a **quality service** to people who have a Personal Health Budget, or PHB.



A quality service means these things:

1. You will choose your provider.



2. You will have more providers to choose from.



3. There will be several providers who can help all ages and all service groups.



4. It will be easy for you to organise your own care and support.



5. You will feel confident about organising your care.

How we want PHB services to work

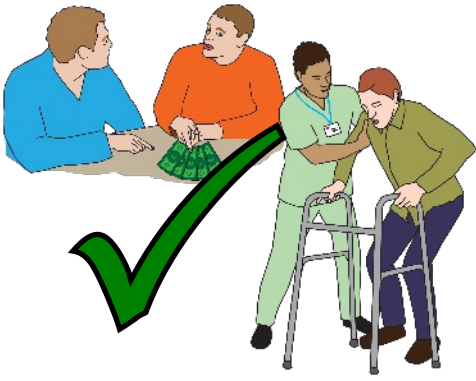
The ICB wants providers to:



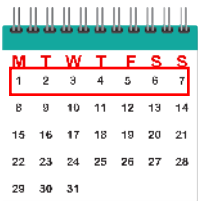
- help us do a good job



- deal with any gaps in the way we work



- help current and new PHB holders manage their budget so they have care that supports their needs.



Providers will deliver a range of one-off and ongoing PHB support services.



We hope providers will help find creative ways to meet your support needs;

- they might involve an advocate who is a person who helps you



- or they might help you understand information through audio, pictures or video.

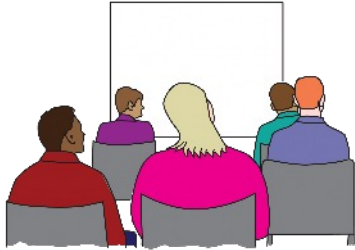


Providers will listen to you using the **Shared Decision Making practice**.

Shared Decision Making means a provider involves you in making decisions about what is important to you and understanding the risks of those decisions.

Service descriptions

We talk about 6 types of PHB Support Service in this document:



3A: Training service for PHB employers and personal assistants.



3B: Advocacy services.



3C: Recruitment support services for PHB employers.



3D: Third party service with on-going management support.



3E: Brokerage support, information and guidance.



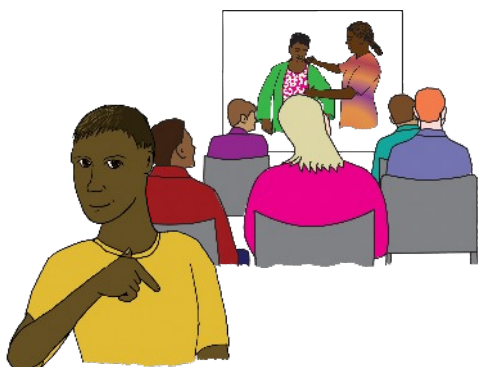
3F: Employer insurance services.

3A: Training services for PHB employers and personal assistants



Ways the provider can help you

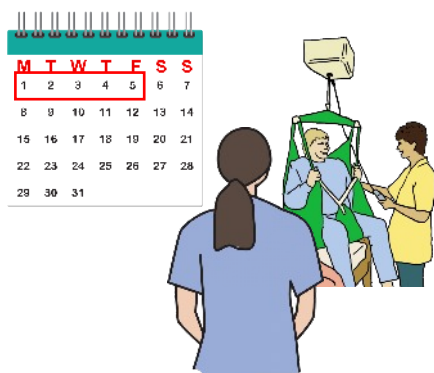
1. The service will provide practical training about healthcare and other care.



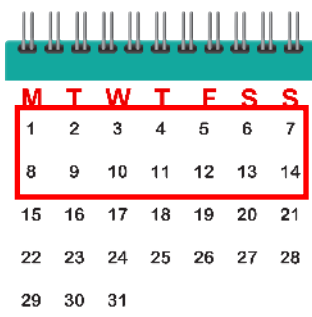
The training will be personalised to your needs.



It may happen face to face in your home or in the community with training equipment.



We want the training service to start working with you within 5 days of the referral.



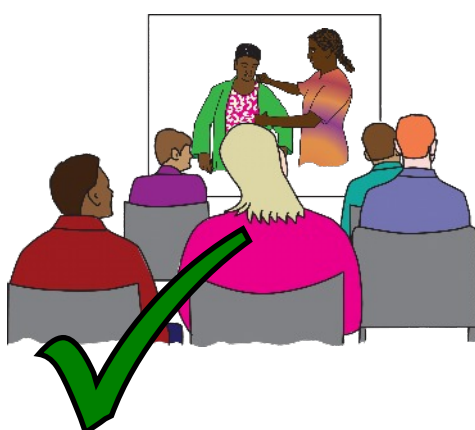
The training you need should be received within two weeks.



There may be some online training as well.



2. The providers will decide how often the training will happen.



The training will be a mixture of **mandatory** and **competency-based** training.

Mandatory is training all PHB Personal Assistants must do.

Competency-based training prepares the Personal Assistants to learn how to meet your needs.

Here are a few examples of the types of training:



- money management – understanding finance as a small employer

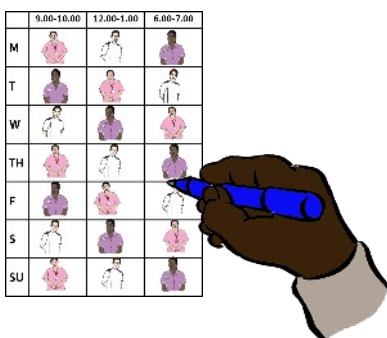


- being a good employer. This may be about:

- how to have safe working boundaries with employees



- how to keep your home safe for people who you employ



- how to make a rota.



- emergency first aid and fire safety



- manual lifting and handling training that suits your needs

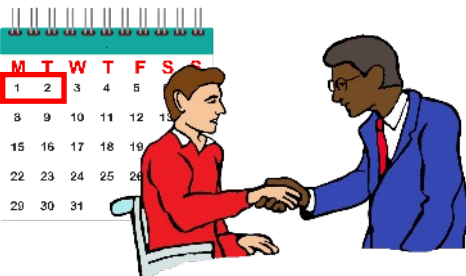


- any other training need to help you manage your PHB.

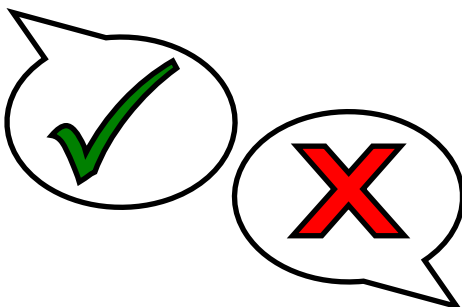


Timelines

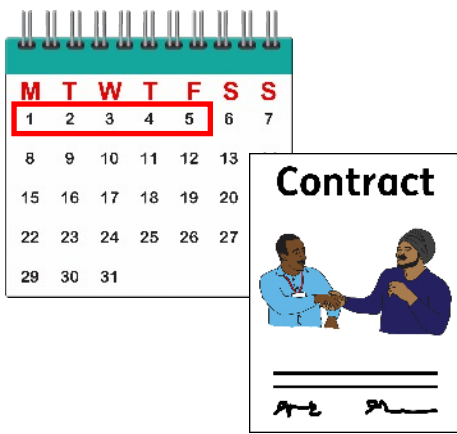
The training provider must contact you within 1 working day of the referral.



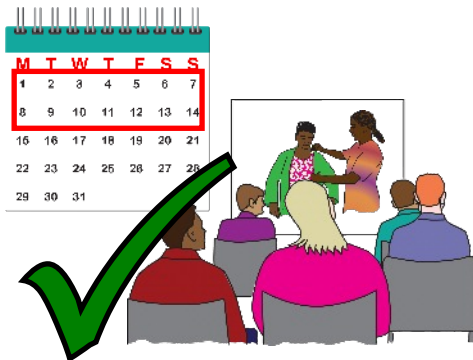
They must meet with you within 2 working days following their first call.



By the end of meeting with you the provider must make decide if they will accept the referral.



They must begin working with you with a signed contract for the delivery of the service within the next 5 working days.



The training must be delivered and completed within 2 weeks.



The case manager will verify this with you at your PHB review.

3B: Advocacy services



Advocacy services support you to put your point of view across and make sure your voice is heard.



Ways the provider can help you

1. An advocate can help you understand the PHB process.



They can help you say how you would like to receive your services.



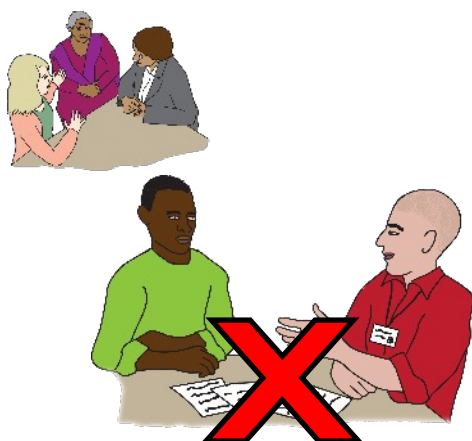
They will explain your choices and how your decisions will affect you.



Advocacy services can help by going to meetings with you, writing letters and helping you find other local services to meet your needs.



Advocacy Services can be delivered on a one to one or in a group.

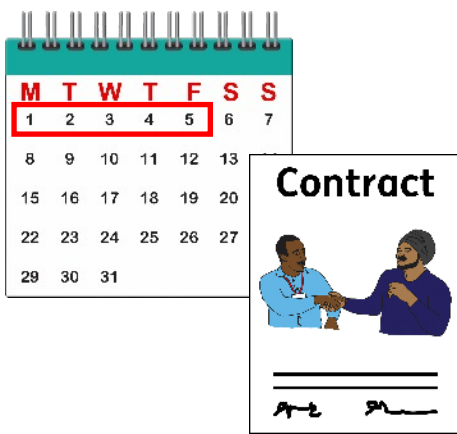


2. The service that provides your advocacy service should not be delivering any other PHB Support Services related to Personalised Care and Support Planning and Brokerage Services and Money Management Services to you.

This avoids a **conflict of interest**.



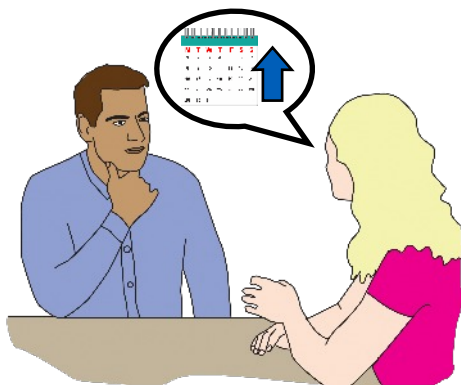
3. When a person first receives a PHB they may need support during the set-up process or at some point during receiving a PHB.



The advocacy service should start working with you within 5 working days of accepting the referral.



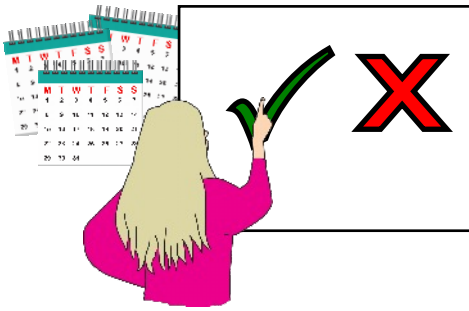
The advocacy service should be completed within 4 to 12 weeks. Some complaint matters may take only a few weeks to sort out but a formal complaint can take up to 12 weeks.



The advocacy service provider can talk to the ICB case manager if they need longer.



4. At the end of the advocacy service you will receive an easy read report explaining what your options were, what was chosen and helpful information for you to remember for the future.



This will support your future decision-making.

5. Types of advocacy



- a. Community advocacy is about an issue.

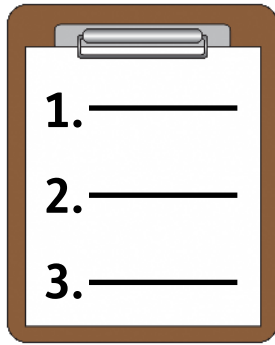
It may not be about your health condition but you need the issue to be sorted out so it won't affect your health outcomes as listed in your Personalised Support and Care Plan.



- b. Advocacy for health conditions and cultural groups.



- c. Peer advocacy from people who can share tips on how to manage a budget related to mental health direct payment/ third party budget/ integrated budget.



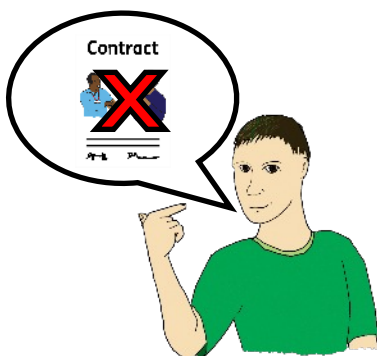
6. There are 3 stages to advocacy services.



Stage 1 is up to 3 meetings (of up to 3 hours) to meet your advocacy provider and share information.

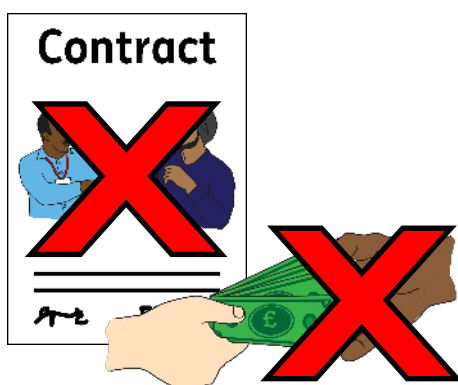


If you and the provider work well together you will move on to stage 2.



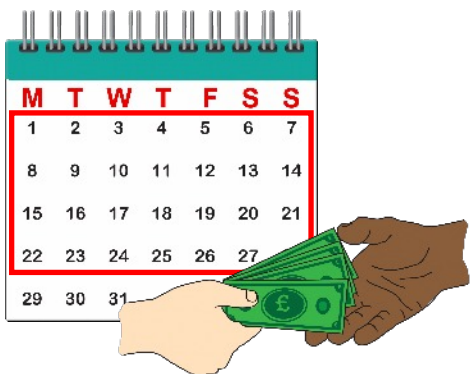
If you are not working well together:

- you can end the contract
- your provider can end the contract. They will not be paid.





In stage 2 you continue to work together.

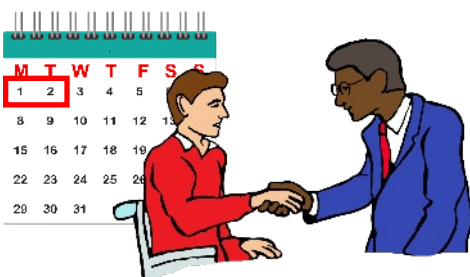


Stage 3 is paying your provider. You must pay your provider within 28 days after you have received the agreed service.

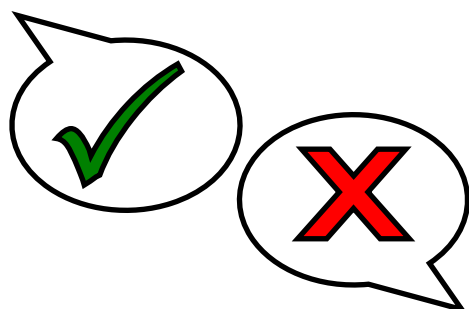


Timelines

The advocacy provider must contact you within 1 working day of the referral.



They must meet with you within 2 working days following their first call.



By the end of meeting with you the provider must decide if they will accept the referral.



They must begin working with you with a signed contract for the delivery of the service within the next 5 working days.



The advocacy service must be delivered and completed within 4 to 12 weeks.



The case manager will verify this with you at your PHB review.

3C: Recruitment support services for you as an employer



You may **recruit** your own people to help you.

Recruit means find and employ workers.



A **recruitment support service** helps you find and employ your workers.



Ways the provider can help you

1. The recruitment support services should start working with you within 5 working days of accepting the referral.



The recruitment of staff should be completed within 6 to 8 weeks.

2. These are the sorts of help the recruitment support service can give you:



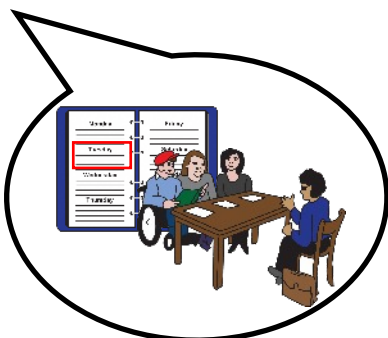
- recruiting of personal assistants and other care and support staff. These may be people you know or new people



- develop a **role description** and **person specification** with the individual. These documents that describe what your worker will do and the skills you want them to have



- advertise the role widely



- organise interviews



- develop interview questions and decide how you will decide if a person suits the role



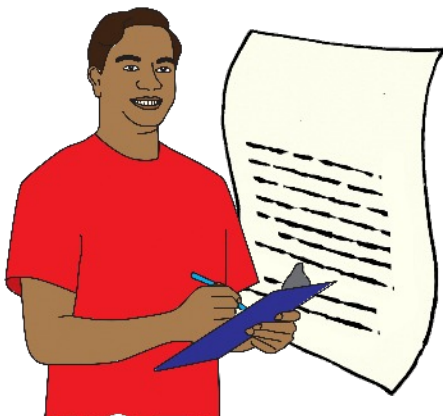
- make a shortlist of people to interview



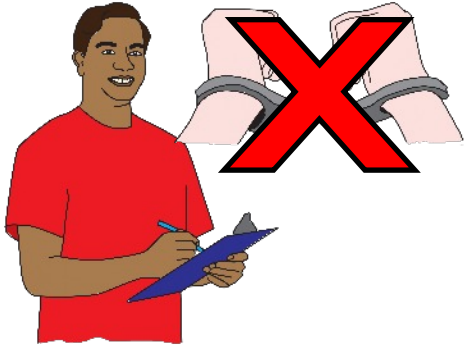
- interview them



- contact people who were not shortlisted and who were unsuccessful at the interview



- check the references of people you may employ



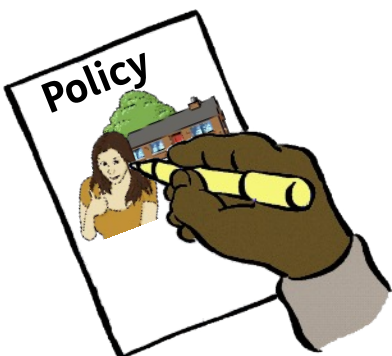
- complete **DBS** checks to check if the person you want to employ has a criminal history



- register the person you select to study the Care Certificate by Skills for Health



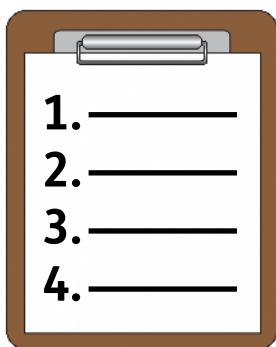
- write a training and induction process for new staff when they begin working with you in your home



- write workplace policies to ensure your home is safe for Personal Assistants to work



- write a contract of employment.



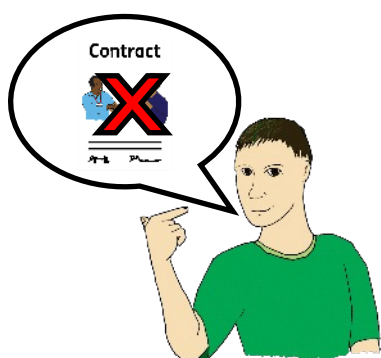
There are 4 stages in the recruitment process.



Stage 1 is up to 3 meetings to meet your recruitment support provider and share information.

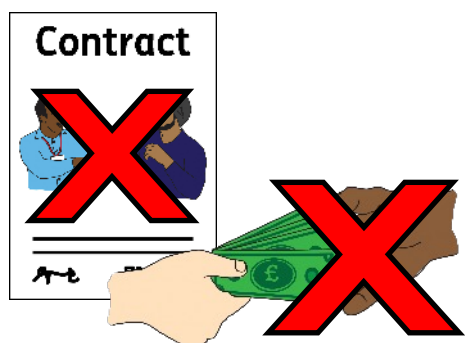


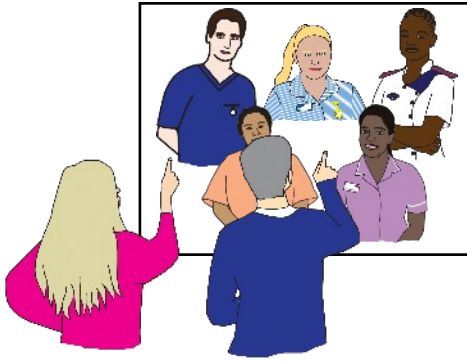
If you and the provider work well together you will move on to stage 2.



If you are not working well together:

- you can end the contract
- your provider can end the contract. They will not be paid.

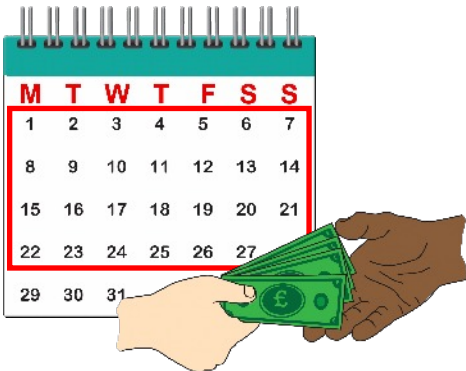




In stage 2 you and the recruitment support provider select your new staff.



In stage 3 you and the recruitment support provider bring new staff onboard.



Stage 4 is paying the recruitment support provider. You must pay your provider within 28 days after the you have received the agreed service.

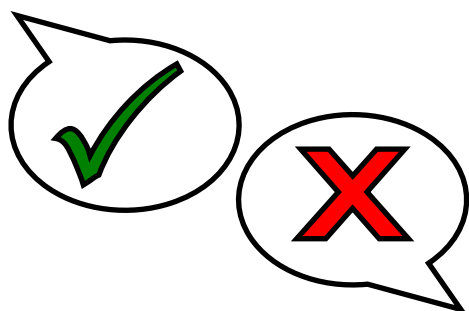


Timelines

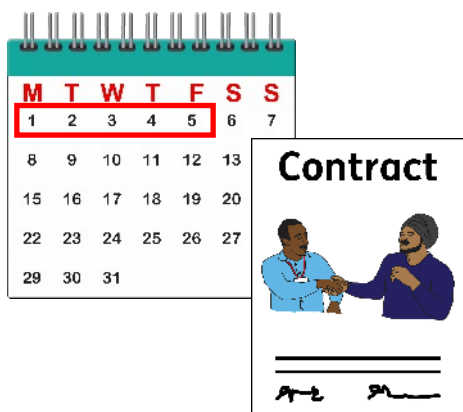
The recruitment support provider must contact you within 1 working day of the referral.



They must meet with you within 2 working days following their first call.



By the end of meeting with you the provider must make decide if they will accept the referral.



They must begin working with you with a signed contract for the delivery of the service within the next 5 working days.



The recruitment support service must be delivered and completed within 6 to 8 weeks.



The case manager will verify this with you at your PHB review.

3D: Third party service with on-going management support



Ways the provider can help you

1. This service is for people who receive a direct payment but are not able to manage the finance or employ support staff.

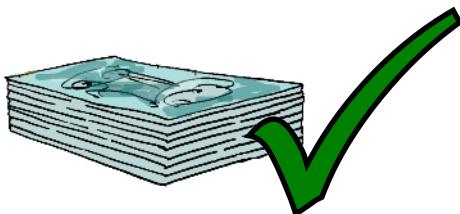


Your provider will hold your direct payment in a safe bank account. They will report to ICB every 3 months.



2. You will have a service that helps you reach your health outcomes:

- as described in your Personalised Care and Support Plan
- that you can afford within your weekly PHB amount.





3. The provider will find staff who will work with your needs and interests.



Staff will help you to lead a lifestyle you would like, so you can achieve your health and wellbeing outcomes.



For example, staff might go with you to sporting activities or on trips. You will need to let them know ahead of time if you want to leave your area or go out very early or late.



4. The provider will be the legal employer of the care and support staff.



This means they will:

- induct and train your staff



- make sure your home is a safe place to work



- ensure all safety equipment and aids are in place and in good working order



- pay your staff, work out PAYE, pension, holiday, and ensure the appropriate insurances are in place.



5. The provider will also:

- work through any issues with you and your staff



- carry out staff appraisals and supervision to make sure staff are doing a good job



- take action if they find staff are not doing their job well.



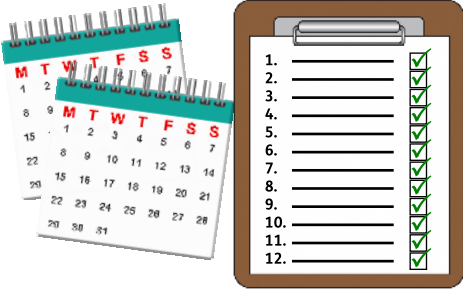
6. The provider will help you manage your PHB and be involved in the individual's review process with the ICB staff.



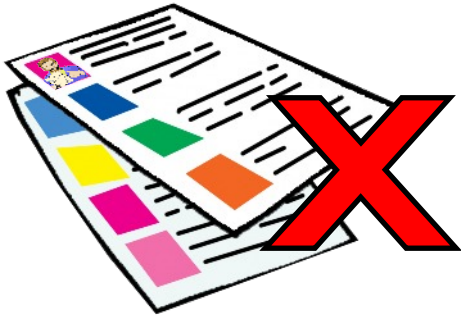
You will always have a say about who works in your home. You can speak up if the arrangement is not working out for you.



The provider must begin working with the individual within 5 working days of accepting the referral.



The service must be set up within 6 to 8 weeks and deliver the following 12 services:



This list is not in easy read and you may need an advocate to help you know what to expect from your provider.



1. Deliver a portable system and process to accept and receive the transfer of individuals already in receipt of a Third-Party Service but managed by another provider.



2. Registered with the Care Quality Commission, if appropriate.



3. A named account manager and case worker are attached to the individual to handle all concerns and issues related to the delivery of care and support.



4. Hold the PHB funds in a secure ring-fenced account and pay all care costs outlined in the Personalised Care and Support Plan.



5. Recruit, employ, supervise, and handle all employee issues as well as complete payroll tasks for care staff.



6. Create workplace policies and complete the necessary risk assessments.



7. Ensure all safety equipment and aids are serviced and are in good working order in the PHB Holder's home.



8. Complete training, induction, and appraisals of staff.



9. Complete the ICB quarterly monitoring, annual contract management reports and attend meetings when necessary.



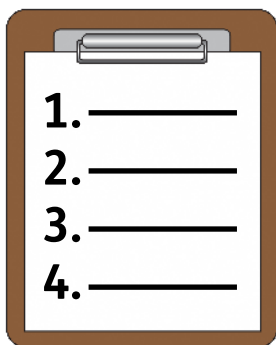
10. Attend and participate in the individual's PHB care package review.



11. Operate a 24 hour flexible and accessible support service for the PHB Holder, so issues and problems can be managed and resolved quickly. This will reduce the risk of care and support break down.



12. Hold milestone meetings with the PHB Holder on a 3, 6, 9 and 12 month basis to ensure that the agreed service is being delivered.



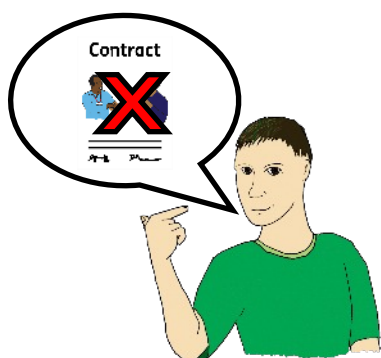
7. There are 4 stages in the third-party service process.



Stage 1 is up to 3 meetings to meet your provider and share information.

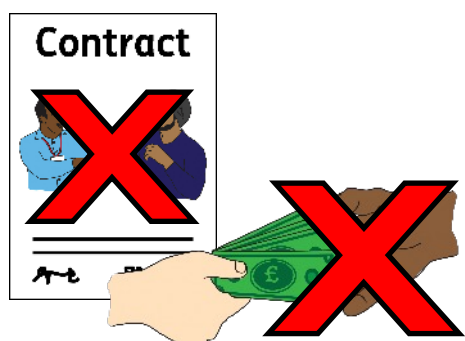


If you and the provider work well together you will move on to stage 2.



If you are not working well together:

- you can end the contract
- your provider can end the contract. They will not be paid.

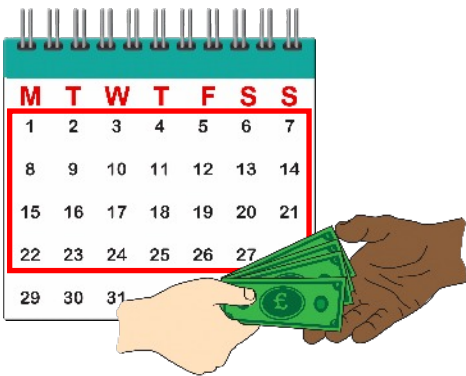




In stage 2 your provider will work with you about selecting your new staff.



In stage 3 you and the provider bring new staff onboard.



Stage 4 is paying the provider. You must pay your provider within 28 days after you have received the agreed service.

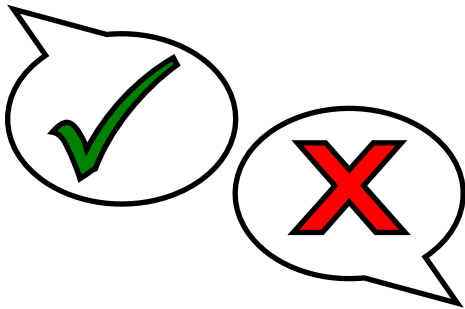


Timelines

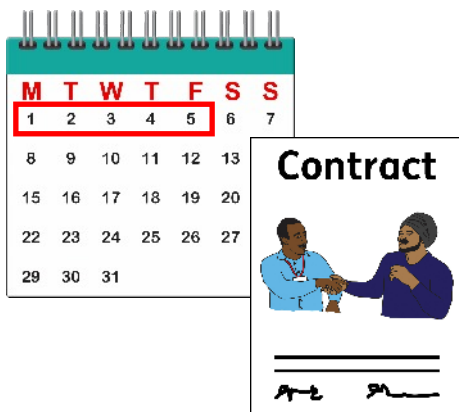
The third-party service provider must contact you within 1 working day of the referral.



They must meet with you within 2 working days following their first call.



By the end of meeting with you the provider must make decide if they will accept the referral.



They must begin working with you with a signed contract for the delivery of the service within the next 5 working days.



The service must be delivered and completed within 6 to 8 weeks.



The case manager will verify this with you at your PHB review.

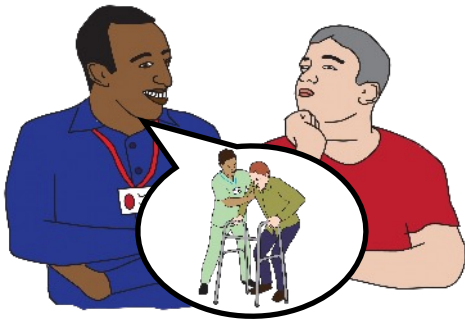
3E: Brokerage support, information and guidance

Ways the provider can help you

The provider can help you in the following ways:



- help to understand what a PHB is and ways manage it



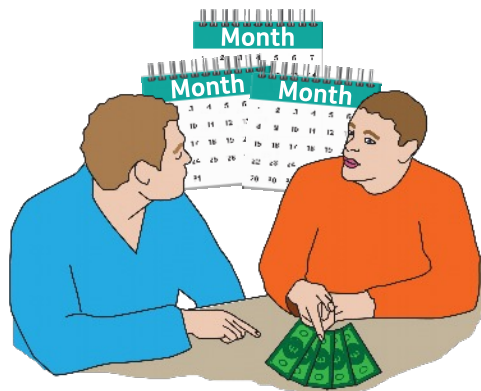
- advice and support about care and support options



- sign-posting to alternative services so you can reach the health and wellbeing outcomes described in your Personalised Care and Support Plan



- broker new care and support agencies for you at short notice within your budget



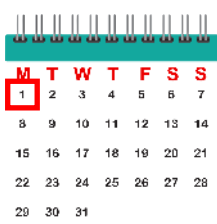
- help you to complete the 3 monthly ICB monitoring if you don't have a Money Management Service.



- help you with PHB Support Service Provider contracts



- offer a 24 hour flexible and accessible support service for you to manage issues with care and support delivery and staffing matters.

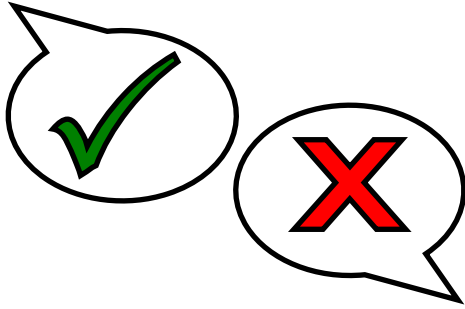


Timelines

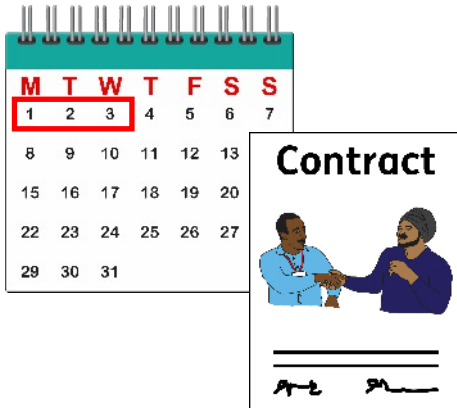
The provider must contact you within 1 working day of the referral.



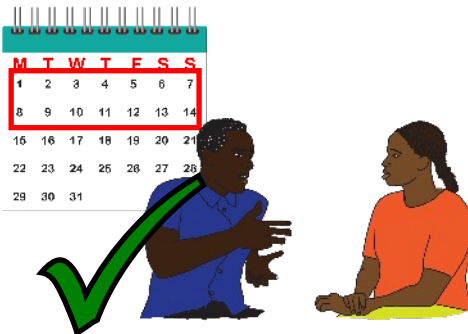
They must meet with you within 1 working day following their first call.



By the end of meeting with you the provider must make decide if they will accept the referral.



By the 3rd working day the provider must begin working with you with a signed contract for the delivery of the service.



The service must be delivered and completed within 2 weeks.



The case manager will verify this with you at your PHB review.

3F: Employer insurance services



1. **Employer insurance service providers ensure that the right type of insurance is in place within 1 working day of referral for the employer and/or their personal assistants.**



Types of employer insurance:

- Employers public liability
- Public liability
- Indemnity to principle
- Redundancy cover and notice payment
- Healthcare task cover
- Negligence by personal assistants
- Legal costs and expenses
- Employment legal advice helpline
- On-line health care related training courses.



Timelines

The insurance service must be delivered and completed within 1 working day.



The case manager will verify this with you at your PHB review.

Equality and diversity

Providers will need to think about the needs of service users with **protected characteristics**. It is against the law to discriminate against anyone because of:

- age
- gender reassignment
- being married or in a civil partnership
- being pregnant
- disability
- race
- religion or belief
- sex
- sexual orientation

These are called protected characteristics.





Providers must make sure their staff do training by Oliver McGowan about learning disability and autism.



We expect everyone to make **reasonable adjustments** for people with learning disabilities.

A **reasonable adjustment** is changing the way we usually do things to make sure that everyone can use our services.



The law says organisations must consider changing the way they do things for disabled people so they have the same opportunities.



Providers must make sure their staff know about and respect the equality and the human rights of other staff, PHB holders, carers and members of the public.



Safeguarding

Safeguarding means protecting groups of **vulnerable** people.



We say that people are **vulnerable** when they have a difficulty and need extra support. This could be a disability, mental health condition or an experience which has made someone feel unsafe.



To safeguard vulnerable people, providers will choose staff using the rules of:

- the Safer Recruitment standards and
- the DBS for all staff who have contact with children and vulnerable adults.

Providers will train their staff using the rules of:



- children's and adults safeguarding intercollegiate guidance and/or
- the Bournemouth National Competency Framework for Safeguarding Adults.



Providers will have clear rules about safeguarding and **whistle blowing**.

Whistle blowing means speaking up if someone you work with is not following the rules. Whistle blowers have a right to protection.



Providers must report safeguarding incidents to the Social Care service where the person lives, and then to the ICB.

Complaints

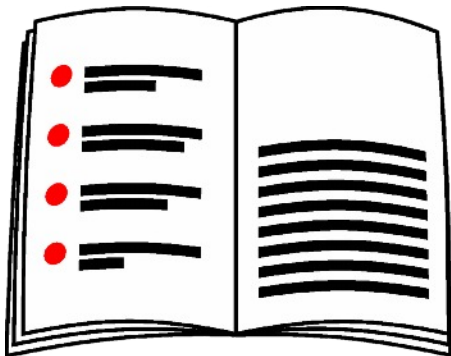


Ways a PHB holder can complain

If you are unhappy with services from your provider please speak to your provider about it first. You have 1 year to talk to your provider about it.

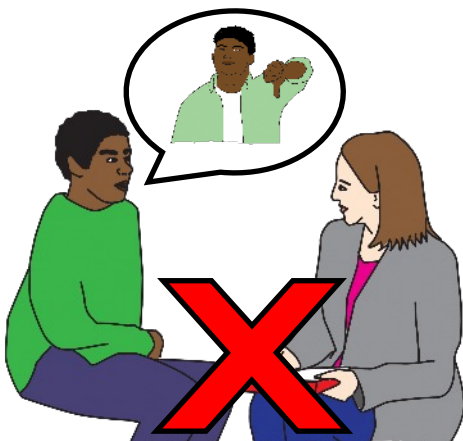


You can ask an advocate to help you with your complaint.



You can find an advocate through the **PHB Support Services Directory**.

The **PHB Support Services Directory** is a list of trusted support service providers for people who have a PHB.



If you cannot sort out your complaint with your provider, put in a formal complaint to the ICB.

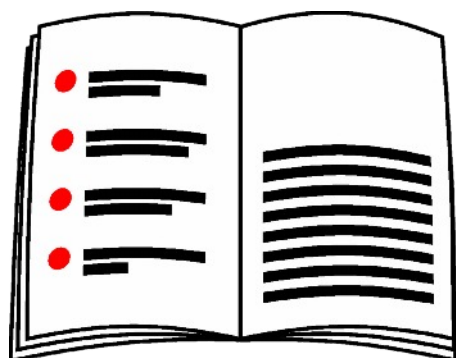


You can get help if something goes wrong

If you think your provider is not following your contract please speak to your provider about it first.



You can pay an advocate to help you with your complaint.



You can find an advocate through the PHB Support Services Directory.



When you meet with your provider they will write a plan called a Back on Track Action Plan.



The plan will say what changes will happen with a timeframe and who is responsible.



It will take up to 5 days for the plan to start.



The plan will give you a review date.



After the review, if you are still unhappy, you can ask the ICB for help.

Mediation



The ICB will set up a meeting called a **mediation meeting**.

At a **mediation meeting** you can talk about your issues and what has happened so far.



People at the meeting will be:

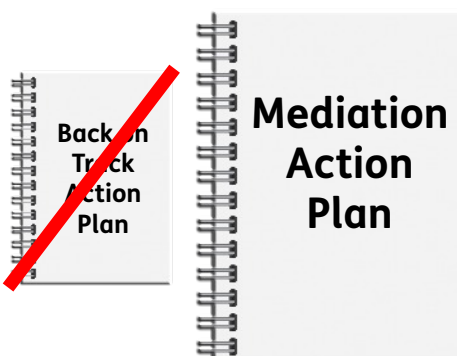
- you
- your advocate or someone speaking for you
- an ICB case manager and the ICB contracts manager
- your provider.



The PHB Holder and the provider will be able to discuss the issues and what progress, has been made.



You will all work out a **Mediation Action Plan**.



The Mediation Action Plan will replace the previous Back on Track Action Plan.



The plan will say what changes will happen with a timeframe and who is responsible.



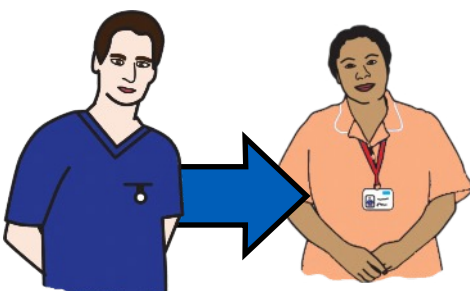
It will take up to 5 days for the plan to start.



The plan will give you a review date.



If you cannot agree on a mediation action plan you will set a date to end services from the provider.



Services will transfer to a new provider.



If you and the provider cannot work things out about the payment the provider can ask for a meeting called a dispute resolution meeting.

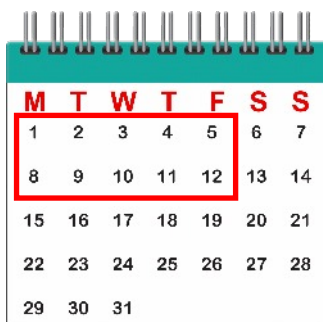


If the ICB is worried about the way a provider is giving services they can take action against the provider. This might stop other PHB Holders working with them.

Dispute resolution



If a provider is not paid or the ICB takes them off the PHB Support Services Directory the provider can ask for a meeting called a dispute resolution meeting.



The meeting must happen within 10 working days.



A senior person from the ICB and a senior contracts manager will look at the facts and decide what to do.



If a service suspended

Suspended means a service is stopped from operating for some time.



The provider will be paid for work they have finished.



They will not be paid while they are not giving a service.



The provider and the ICB will try to keep your services going.



We will tell you that we have suspended your provider.



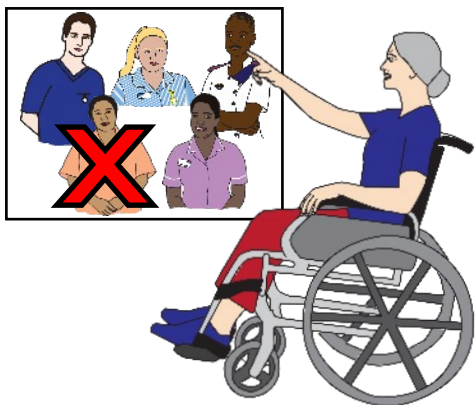
If you are in stage 2 you can keep on working with them or choose another provider.



If you stop working with the provider, they will be paid for up to £440 of the money they are owed. Your Working Together Action Plan and Engagement Log will show how much time the provider has spent with you.

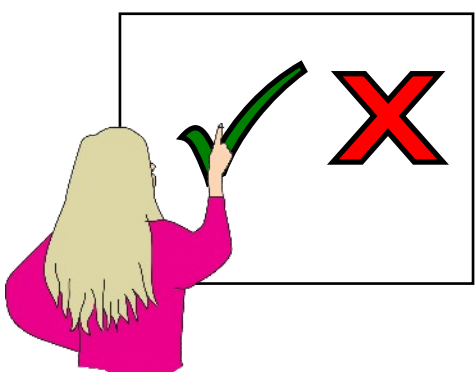


If you are in stage 3 or 4 you must keep on working with your provider. You can only change if there are serious reason.



The ICB will make sure people cannot choose a suspended provider.

Capacity



This contract will work unless you lose **capacity**.

Capacity means you can make decisions by yourself or with help from someone you know. If you lose capacity the ICB will follow these rules: [National Framework for NHS Continuing Healthcare and NHS-funded Nursing Care.](#)



Quality assurance

Quality assurance means checking providers are meeting the standards we ask them to.



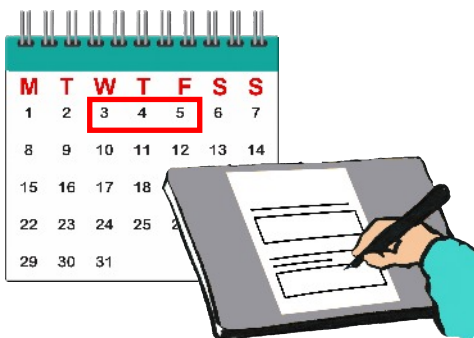
We want you to think about the service you received.



We will ask you and your provider to fill out the Service Delivery Form when the service is set up and when it is delivered.



Your provider will ask you to fill out a satisfaction survey to tell them how you found working with them.



You have 3 to 5 working days to complete the paperwork which the provider will email to the ICB.



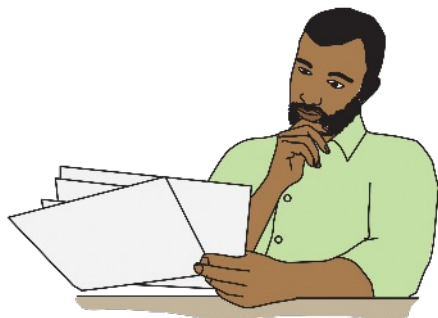
We want your provider to publish the survey on their website.

The ICB may also publish the results on their website.



The provider will email to the case manager:

- checklist for service set-up
- Service Delivery Form.



The case manager will check the papers.



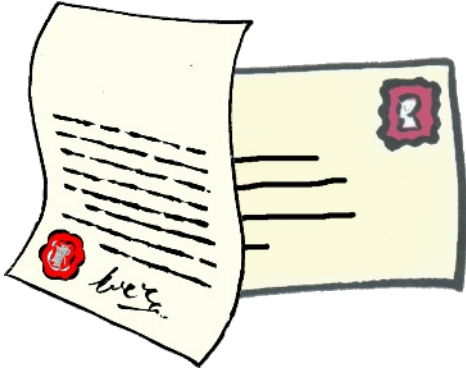
The ICB will send you a quality survey after setting up your PHB. Then another survey every year.

When the service has finished

When the provider has completed their services to you they must:

- tell you the PHB Support Service has been completed

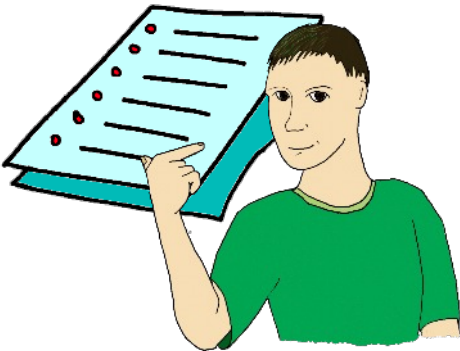




- let NCL ICB know the service has been completed by sending in the record of services provided



- show a record of how they provided a quality service to you.



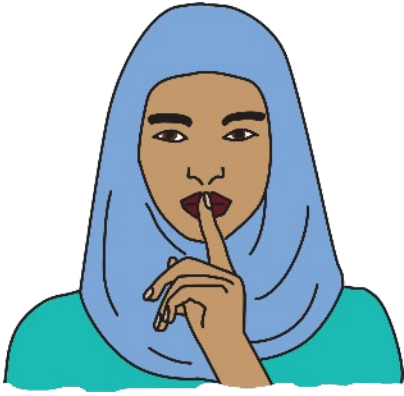
Data protection

We will look after your **data**.

Data is information about you and your services.



The ICB will share information with your provider and you in order to provide your direct care.

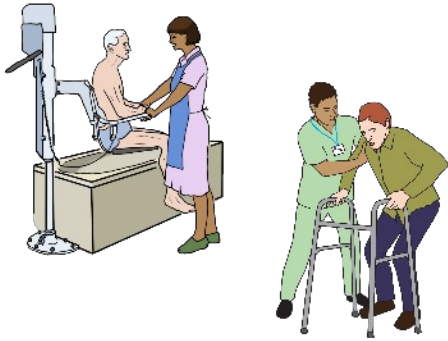


We will keep your data private.

Providers will also keep your data private.

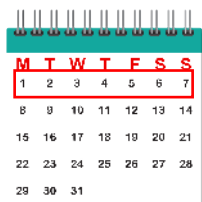
Section 3. Payment

Pricing

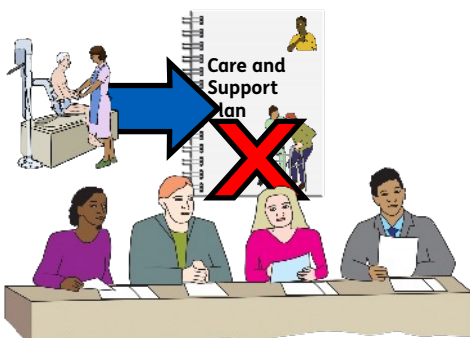


The payment for PHB Support Services will vary depending on:

- the level of support you need
- whether the support is one-off or on-going.



Where you have a PHB and you are using a PHB Support Service for the first time



If the PHB Support Service is not included in your Personalised Care and Support Plan or the cost is higher than your budget, your plan needs to be checked by the ICB PHB Review Panel.



This is to make sure the services meet your assessed needs.

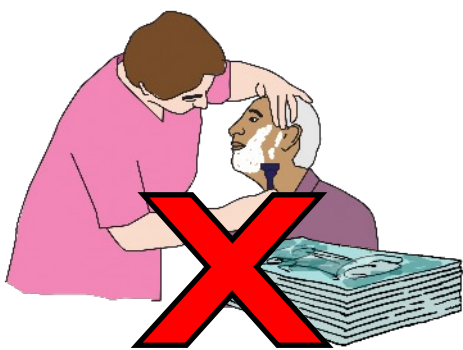


Your plan will not go to the ICB PHB Review Panel if your plan includes the PHB Support Service unless the case manager says it is required.

Invoicing and transfer of budget



You or your Money Management Service will pay your provider as agreed in your Personalised Care and Support Plan.



If your provider has not given you service you can hold on to the payment until the service is delivered.



If the provider is worried about their payment they can ask the case manager for a dispute resolution meeting.



The ICB has a payments system that will pay you or your money management service for your care and support services.

Contract



This Contract records the agreement between the PHB Holder and the Provider



Each Party acknowledges and agrees that it will accept and will be bound by the conditions at the date of this contract and as from time to time updated, amended or replaced.

What the words mean

Back on Track Action Plan is a plan your provider writes after a mediation meeting.

Brokerage means you have someone who can explain your PHB and help you decide which services you can afford in your area.

Capacity means you can make decisions by yourself or with help from someone you know.

Competency-based training prepares a worker to learn how to meet your needs.

Conflict of interest can happen when someone works for more than 1 person or organisation. For example, if you don't agree with something your support service is doing, you need your advocate to stand up for you, not the service.

Contract is a written agreement between you and your provider.

Data is information about you and your services.

The **Directory** is a list of trusted support service providers for people who have a PHB.

Direct payment means you are in charge of your Personal Health Budget.

Disclosure and Barring Service (DBS) is a service that checks if a person has a criminal record. Personal assistants may work with children and vulnerable people. We want to keep children and vulnerable people safe from people with criminal records. A criminal record will not stop a person working but it may mean they can only do some activities.

Mandatory training is training all PHB support workers must do.

Mediation meeting at a mediation meeting you talk about your issues with your provider and what has happened so far.

Mediation Action Plan is a plan that replaces the previous Back on Track Action Plan.

Personal Health Budget or PHB is NHS money you can use to support your health and wellbeing needs such as: treatments, equipment, personal care.

A PHB lets you to create an individually agreed personalised care and support plan.

Personalised Care and Support Plan is about what is important to you.

Protected characteristics it is against the law to discriminate against anyone because of age, gender reassignment, being married or in a civil partnership, being pregnant, disability, race, religion or belief, sex, sexual orientation. These are protected characteristics.

Quality assurance means checking providers are meeting the standards we ask them to.

A quality service means these things:

1. You will have a say about choosing your health provider.
2. You will have more providers to choose from.
3. There will be several providers who can help all ages and all service groups.
4. It will be easy for you to organise your own care and support.
5. You will feel confident about organising your care.

Reasonable adjustment is changing the way we usually do things to make sure that everyone can use our services.

Recruitment support service helps you find and employ your workers.

Role description and **person specification** are documents that describe what your worker will do and the skills you want them to have.

Safeguarding means keeping vulnerable people safe.

Shared Decision Making means a provider involves you in making decisions about what is important to you and understanding the risks of those decisions.

Survey is a list of questions.

Suspended means a service is stopped from operating for some time.

Third-party budget is when you ask someone else to handle the money for you.

Vulnerable. We say that people are vulnerable when they have a difficulty and need extra support. This could be a disability, mental health condition or an experience which has made someone feel unsafe.

Whistle blowing means speaking up if someone you work with is not following the rules.

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