

Using direct payments for Health and Social Care

We want to know what you think



How to use this document



This is an easy read version of 'Health and Social Care (Wales) Act 2025: Legislation on direct payments for health and social care'.



You might need help to read it. Ask someone you know to help you.



Llywodraeth Cymru Welsh Government Where the document says **we**, this means **Welsh Government.** For more information contact:

Email: <u>directpayments@gov.wales</u>



<u>Easy Read Wales</u> made this document into Easy Read using **Photosymbols**. <u>To tell us what you think about this easy read version, click here</u>.

Photosymbols Licence number 403527247

Contents

About this document	4
About direct payments	5
What we want to change	8
Changing the rules for Local He	ealth BoardsS
Ideas for the rules for direct po	yments in health care 10
Changes to social care direct p	ayments36

About this document



We want to change the law for using direct payments in health and social care.



We want to know what you think of these changes.



Your answers will help us to write the final rules and guidance.



Please read this document and answer the questions in the response form.



Please send us your answers by 8 October 2025.

About direct payments



Right now, only people who get social care from their local council can get direct payments.



Direct payments is a way of paying for your social care.



If your council has agreed that you need social care, they must provide you with care and support services.



They will either arrange the services for you, or you can ask for direct payments.



Direct payments is money that your council gives you, instead of providing a service.



You can use direct payments to buy your own care and support. For example, you might pay a care worker or personal assistant.



Direct payments give you more control. You can choose:

- · Who supports you
- How you are supported
- When you get your support



People who get care through **Continuing NHS Healthcare in Wales** cannot get direct payments.



Continuing NHS Healthcare is a package of ongoing care. It is arranged and paid for by the NHS. It is often called **CHC**.



CHC is for people who have care needs which are mostly health related.



You can find out more about CHC on our website: www.gov.wales/continuing-nhs-healthcare-chc-information-booklet-individuals-families-and-carers



We want to change this. We want Local Health Boards to be able to give direct payments to adults using **CHC**.



Many people who move from social care to **CHC** lose choice and control over their care.



This change should make things fairer and more equal for disabled people, and people with serious health issues.

What we want to change

We want:



1. People in Wales to be able to use direct payments for health care. This will start with people who get **CHC**.



2. To make a small change to how direct payments for social care works.

Changing the rules for Local Health Boards



To use direct payments for **CHC**, we need to make new rules and guidance.



The new rules will say how Local Health Boards should manage direct payments.



We will change old sets of rules to let Local Health Boards give direct payments for **CHC**.



People in England have been able to use direct payments for **CHC** since 2014. England has had time to test out the rules and make things work. We have looked at the rules that work in England to help us make rules for Wales.



We will make sure the rules make it easy for people using direct payments for social care, to move to using them for health care.

Ideas for the rules for direct payments in health care

These are rules for:



• Local Health Boards.



• People receiving direct payments.



• People who manage direct payments for you.

Who can get direct payments



The rules will say the person must:

- be an adult
- and consent to get direct payments.

The rules will say Local Health Boards must think about:



- If a direct payment is right for you, based on your situation and health.
- If your health condition can be managed with a direct payment.
- How the health condition affects your daily life.
- If the direct payment helps you have more choice and control.
- How important it is for you to keep your usual care and support.

Direct payments for children



We will focus on the rules for adults, but we will also be making some rules for children. In case we need them in the future.

We think the rules should say children should be able to get direct payments if:



 They get Children and Young People's Continuing Care.



• They have a person who consents to manage direct payments for them.



• Or if a young person is able, they consent themselves to use direct payments.

Direct payments for people and children who lack capacity



There needs to be rules for people who lack capacity.



Lacking capacity means a person cannot make decisions for themselves. Or they cannot communicate their decision.



People who **lack capacity** can have a representative.



A representative is someone who can:

- Make decisions for you.
- Consent to manage direct payments for you.



If a person who **lacks capacity** does not have a representative, the Local Health Board can choose one.

Representatives must:



 Always do what is best for the person when using the direct payment.



• Be responsible for any agreements or contracts made.



• Use the direct payment for care and support written in the care plan.

People who lose capacity, or whose capacity and ability to make decisions changes



We need rules for people who lose the ability to make decisions and consent.

We think in this situation, Local Health Boards should be able to keep paying direct payments if:



- They think the person has lost capacity short term.
- Someone else agrees to manage the money for them a representative.
- The person can take back control when they are able.



If a person gains capacity, we think the Local Health Board should be able to continue to pay a representative if everyone agrees.

Using a nominee when you have capacity

If you **can** make decisions for yourself, you can:



manage direct payments yourself



• or choose a nominee.



For example, you can ask a family member or friend to manage direct payments for you. This is called a nominee.

Your nominee must:



- Agree to manage the money.
- Be responsible for any agreements made using the money.
- Use the money following your care plan.
- Follow the rules.



If you want to stop or change nominee, you must tell the Local Health Board in writing.



The Local Health Board will then check:

if they should stop the payments



or make new plans quickly.

Deciding to make a direct payment



The rules will set out a clear process for deciding when to pay direct payments.



The Local Health Board may discuss the decision with:

- You and anyone you choose to be involved.
- Parents and carers.
- Doctors, nurses, or other health workers.
- Social care workers.
- Anyone else who might have useful information.



The rules will say what information you need to give the Local Heath Board to support their decision. Including information about your health, and the bank account the direct payment should be paid into.



The Local Health Board must be sure you can manage the payment alone or with help.

Deciding to pay a representative



When deciding to pay a direct payment to a representative, the Local Health Board may discuss the decision with:



• Anyone involved with the person from the Court of Protection.





 Anyone named by the person when they had capacity.



The Local Health Board should also think about the person's beliefs, values, wishes, and feelings.

Deciding to pay a nominee



The Local Health Board must make sure the nominee has a criminal record check. This will help make sure the nominee is safe for the person.



A nominee that lives with the person, or a family member or friend helping with care will not need a criminal record check.



We think the rules should state that family members include:

- A husband, wife, or civil partner.
- Someone living like a husband, wife, or civil partner.
- Parent, step parent, or parent-in-law.
- Son, daughter, son-in-law, daughter-in-law, stepson, or stepdaughter.
- Brother or sister.
- Aunt or uncle.
- Grandparent.
- The husband, wife or partner of any of the above.



In all cases the Local Health Board must make sure the person, representative or nominee is able to manage the direct payment.



They may look at whether a person has been able to manage a direct payment in the past.



The Local Health Board must give the decision in writing. If the answer is no, they must say why.

Care and support plans



We plan to include rules around care and support plans.



You will need a care and support plan before getting direct payments.



The plan will show what the direct payment can be used for.

Local health Boards must write a care and support plan that includes:



- The person's health needs.
- The aims and what we want to achieve for the person through care and support .
- What services the person needs.
- How much money is given and when.
- The name of the care co-ordinator.
- Who is responsible for checking and observing each health condition.
- When the first review should be and how it will be done.
- How much notice the Health Board must give if they lower the amount or stop direct payments after a review.

Care coordinator



The care co-ordinator checks your health needs and helps review the payments.



They will work with you and the Local Health Board to manage direct payments and check your health needs are being met.

Managing risks



The Local Health Board must look at any risks that could happen from using direct payments.



Any risks and how to reduce them must be agreed with you or your representative.





Some services cannot be paid for using a direct payment. These services cannot be included in your care and support plan.

We think the following services should not be paid for through direct payments:



- GP services and other basic doctor services.
- NHS charges like going to the dentist or getting your eyes tested.
- Planned operations or surgery.
- Vaccinations or health screening.
- Health checks done in schools, like height and weight checks.
- NHS Health Checks for adults.
- Spending on gambling, alcohol, tobacco, or paying off debts.



The rules should say that people can ask the Health Board why direct payments cannot be used for certain services.

One-off payments



A one-off payment could be possible if they are included in the care and support plan.



We the think the rules should say you can have a one-off payment for 1 item or service.



Or you can have 1 payment for no more than 5 items or services, if that is the only payment you will get from the Health Board in a single year.

Information, advice and other support



The Local Health Board must give support to people getting direct payments.



This help can include information, advice or other support.



The Local Health Board should explain how much money you will get. And how this was worked out.

They should give you advice about:



- How to ask for direct payments.
- How the care and support plan is made.
- The budget and what it can be spent on.



- How to manage the direct payments.
- How to ask for a review.
- When someone might not be allowed to get direct payments anymore.



The Local Health Board could help people who use direct payments to support their staff. Like personal assistants. They could help with training if needed.



The Local Health Board and local council should work together to provide support.

Rules for people who get direct payments

If you get direct payments, you must follow certain rules:



 The money must only be used to buy the care and support listed in the care and support plan.



• The Local Health Board might add extra rules. Such as not using certain care providers.



• You must give the Local Health Board information when asked.



 You must also tell the Local Health Board if your health or situation changes a lot.



• If you buy care from a company, you must check the company is registered and safe.



• The money must go into a bank account approved by the Local Health Board.



• This bank account must only be used for direct payment money. And must be easy to check.



• The Local Health Board can ask for updates to make sure the money is being used properly.

Checking and reviewing direct payments



If your health changes, the Local Health Board will check that the amount of money is still right.



If you don't use all your direct payments, the Local Health Board might give you less money next time.



If they decide to give you less money, they must tell you in writing and explain why.



They must regularly check that the direct payments are being used properly.



They must do a first review within 3 months. Then at least once every year.



If your health changes or there are problems, the Local Health Board must do a new review.



During a review, they will:

- Check your plan.
- Check how the money is used.
- Check if the money still meets your health needs.



You can also ask for a review if you think something needs to change.





• Change your plan.



• Change the amount of money.



• Ask for more information.



If they stop or reduce your money, they must tell you in writing and say why.



You can ask for 1 more review if you don't agree. You must give information to support your case.

Paying back direct payments



Sometimes, you may be asked to pay back some or all of your direct payments.



This could happen if your care plan or life situation has changed a lot.



It may also happen if the money was not used support your care plan says you need.



If the Local Health Board thinks money was used wrongly, they can ask for it back.



You can ask the Local Health Board to look again at the decision to repay the money.



The Local Health Board will write to you about their decision. They may decide not to ask for the money back.

Direct payments may stop if:



- An adult no longer agrees to get direct payments.
- A child or a person who can't make decisions no longer has someone to agree on their behalf.
- The person is no longer getting NHS care.
- The person chosen to get the money is no longer suitable. Or does not want to do it anymore.
- The money is not being used in the way agreed in the care and support plan.
- The Local Health Board thinks something wrong has happened.
- The person's health needs can't be met through direct payments.
- The person receiving care has died.



If payments stop, the Local Health Board must write to people and say why.

Changes to social care direct payments



We want to update the rules about direct payments for social care.



The new rules will help people who can make decisions for themselves but find it hard to manage money.



The new rules will let someone else manage direct payments for you.

For example, you can choose someone else to get the payment if:



• You understand and agree to it, or



• You are a child and understand enough to make a choice.

Local councils will be able to give direct payments to:



• A person you choose (like a family member or friend).



• An organisation you trust to arrange your care.

