

Brokerage & Direct Payment Service

Making it easier
to manage
personal care
budgets

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Direct Payments & Brokerage payment options

Information for providers
on the payment methods
Standing Order, Virtual
Wallet and Pre-paid Card.



Providers Brokerage & Direct Payments

What is a a Direct Payment (DP)?

Buckinghamshire County Council (BCC) is committed to ensuring that DP recipients and carers have choice and control of what, how and when support is delivered to meet their assessed eligible needs.

A DP is a sum of money given to DP recipients and carers by the Council to purchase care outlined in their care plan. It is important for Service Providers to recognise that their contract is with the DP recipient and not the Council.

The cost of care should be agreed at the care planning stage. The budget will then be agreed by the Council for 12 months. If the Service Provider wishes to increase their fees, the process is:

Obligations of Service Provider:

- To inform the DP recipient in writing regarding any proposed changes (giving a notice period - usual length of time is 3 months).
- Receive written confirmation from the DP recipient that any proposed changes have been agreed.

Obligations of the DP recipient:

- The DP recipient agrees to pay the increase in costs directly to the provider.
- Contact BCC on 01296 383204 to request a re-assessment and possible increase in Direct Payment before the end of the notice period. An increase will only be agreed if the DP is within the budget (i.e. does not exceed the commissioned rate). If the new costs are higher than it would cost BCC to provide the service then the DP recipient will be expected to 'top up' the difference from their own personal funds.
- To give notice, effectively ending their contract with the current provider, and to source an alternative provider to deliver their care. The DP recipient can contact BCC's Personalisation Team who can assist in finding a new provider if required.

Obligations of the Council:

- To complete a re-assessment and confirm if there will be an increase in the Direct Payment.

Any additional care required which is to be funded by the DP must be agreed by BCC. A DP recipient can have additional care if required but if this is not agreed following a re-assessment then it must be paid on a private basis directly to the provider.

Client Contribution

Each individual is financially assessed to see whether they have to pay a contribution towards their care costs.

If the DP is the only service the DP recipient receives then they will need to pay their client contribution into their chosen DP account by standing order. If the DP recipient receives other services in addition to their DP, then they will be billed directly every four weeks for their client contribution by BCC.

Client Top Ups

If an individual wishes to purchase their care via a DP and the cost of this care is higher than the cost of BCC's directly provided services, then the DP recipient will be expected to 'top up' the difference from their own personal funds. This top up must also be paid into their chosen DP account via a standing order.



Pre-paid card/Bank accounts. If the DP recipient has either a pre-paid card or bank account then invoices must be sent directly to the DP recipient for payment.



Virtual wallet. Provider responsibilities. If the DP recipient is using the virtual wallet then there is no need to send invoices. The DP recipient will have an account opened on the system and their care schedule entered which details who is providing the care and when.

However, the chosen care provider(s) will need to register onto the system (a link will be sent and guidance and support provided to complete this). The registration includes provider details, fees etc.

Every four weeks the provider will need to log onto the system and confirm the care that they have provided over that period. Once this approval has been submitted the system checks that everything is in order and pays the provider. The system will not allow providers to bill for more care than has been agreed or that there are funds available for.

If a provider does not register or confirm care provided, they will not receive any payments.