

30 September 2014

HEALTHWATCH NORTHAMPTONSHIRE CALLS FOR FAR REACHING IMPROVEMENTS TO HOME CARE SERVICES

Healthwatch Northamptonshire, the local champion for health and social care, has been working in partnership with Northamptonshire County Council on a pilot project to monitor home (domiciliary) care services. The first phase of the pilot involved Healthwatch Volunteers making phone calls to people who receive services from two local domiciliary care providers to find out their views of the service they received.

Volunteers spoke to 76 people in total. 64 people were users of the services and 12 were informal carers or other family members. A report on this first phase has just been produced and the key findings are:

The overwhelming majority (89%) of people were either very satisfied or quite satisfied with the services they received. 88% said they were either very happy or fairly happy with the way care workers treated them.

However, there were considerable concerns about communication and information from the care agencies around staff changes, late changes and lack of consistency to the timing of visits. Half of the people we spoke to said they were hardly ever or never informed of changes to the timings of when the paid care staff visited.

Some carers were worried that people with dementia found frequent changes of

staff difficult to cope with. Others were unhappy about possible security and safety issues if lots of different people went into someone's home. Variations in timing also caused confusion and had an impact on people's quality of life comments received included "10am for carers to get me up is too late and makes me have a very long night", "I would like them to come about 7pm to get me to bed not 5pm" there was particular concern about people with diabetes who needed a regular meal routine to manage their condition.

There was concern and confusion around care planning and reviews of services received. Two thirds of people said they were involved in planning their services, but a quarter of people we spoke to were not involved and 9% didn't know or didn't answer. Comments related to this question included: "yes I was involved in the decisions about level of care", "the plan was set up with very little consultation" and "I did not feel involved". The picture relating to checks about the level of care was slightly worse, with 43% saying yes they were involved, 4% felt partially involved and 40% saying no they were not involved at all. *This raises questions about the lack of a personalised approach to support planning and reviews.*

In response to questions about how much care is received and when care workers came, three quarters of people said some of their visits were 30 minutes, 25% said between 45 minute and an hour and a quarter of people said some of their visits were only 15 minutes long. Both nationally and locally, concern has been expressed about the quality of 15 minute visits to people who may be frail or confused, or to others whose only visitor and person to talk to each day, may be their care worker.

As a result of the findings in this first phase of the pilot, Healthwatch Northamptonshire has made several recommendations for action by the County Council:

- **Improved information and communication when there are changes to rotas and staffing arrangements:** 44 % of people we spoke to reported very poor communication with the care agency in relation to changes of staffing.
- **Greater consistency of care workers:** The people we spoke to said they want the same group of care workers allocated to them so they become familiar with the care staff. Having a constant stream of new people was not acceptable.
- **More involvement in care planning:** People using home care services, and their informal carers/family members, need to be more involved in planning the support they receive from home care services to ensure the needs of the person receiving care come first. Regular reviews of needs are essential as people's care needs will change.
- **Improved recruitment and retention of staff by home care agencies:** To develop a skilled workforce who are motivated to stay in their jobs, training and development, career progression and pay need to be reviewed. Commissioners can set standards through the contract process.
- **Urgent review of 15 minute visits:** There needs to be a serious discussion between the County Council and care agencies about the minimum length of a home care visit.

Sonia Bray, Healthwatch Officer who led the project, said “the next phase of the pilot will involve our volunteers going to community groups, day centres and carer’s groups to have face to face meeting with individuals and small groups of users and carers to hear their views about these vital home care services.”

Commenting on the report, Rosie Newbigging, Chief Executive, said “This very important piece of work which we have delivered in partnership with Northamptonshire County Council, shines a light on how home care services are viewed by the people who need them. It represents a call to action. Home care services will have to expand to meet the needs of the rising numbers of elderly people. There is a growing view that people should be supported to remain in their homes and living as independently as possible for as long as possible, Healthwatch Northamptonshire supports that view. However, this report shows that improvements are required to deliver services that genuinely meet people’s needs.”

1. In recent years a growing number of older people, people with disabilities and long term conditions have been supported to live at home and receive help with personal care and day to day living tasks. This is usually called domiciliary care. There is good evidence that good, timely short term support at home can help to prevent people from going into hospital unnecessarily. It can also make a real difference to people who have been discharged from hospital by providing vital support until they have gained strength, skills and confidence. We have referred to the paid staff providing domiciliary care as “Care Workers”. A “Carer” is anyone who cares, unpaid, for a friend or family member who due to illness, disability, a mental health problem or an addiction cannot cope without their support. All those working with Carers campaign to preserve this term for unpaid carers and encourage others to do the same, to avoid confusion with “care workers or care assistants”