

## DISCUSSIONS ON HOME CARE

December 2016

### Introduction

The Carers Support Centre receives lots of informal feedback from carers about home care services, but very few are received by Local Authorities, for fear of sharing experiences and there being negative consequences. So the Carers Support Centre approached Healthwatch to conduct focus groups with their service users to gather issues anonymously to be shared with both Bristol and South Gloucestershire Local Authorities.

The Carers Support Centre took the lead running the project, arranging focus groups and running workshop sessions at the Carers Rights Day event, with Healthwatch supporting this work.

The full report written by the Carers Support Centre follows the key themes and next steps sections.

### Key themes

1. **Continuity of care.** Carers reported the volume of different care workers visiting means relationships are not able to be formed, and understanding of needs and trust can be an issue.
2. **Dealing with home care brokers.** Carers fed back issues with the brokerage system and local authority where they feel the brokers and local authority are taking decisions based on 'least resistance' rather than based on individual need.
3. **Delivering care based on agreed care plans.** There are experiences of care plans being changed without discussion and agreement with the carer. Carers reported home care not being delivered in the way that is agreed e.g. time being added to tasks and the process for carrying out a task.



4. **Quality of staff training.** Agency training of staff was discussed, particularly with regard to dementia. Carers felt there was a poor level of understanding and knowledge from some care workers of client needs and conditions.
5. **Appropriateness of care workers.** Carers report a lack of choice of care workers e.g. male workers being sent to provide personal care to female clients. This can be uncomfortable for some people, and for some cultures is viewed as inappropriate.
6. **Communication between agencies and service users.** Carers reported difficulties with messages not being passed on, and of not being notified of changes to care plans.

## Next steps

1. Healthwatch and the Carers Support Centre will share the findings with Bristol and South Gloucestershire local authorities and providers. It is hoped that the findings from this reports will inform the commissioning process for community services in South Gloucestershire, and be presented alongside the Council's own home care survey which is currently being produced by The Care Forum.
2. Healthwatch and the Carers Support Centre will continue to monitor feedback on home care to ensure views are heard without fear of reprisal and to monitor change and improvement to services.

## The report

This report amalgamates the feedback received by The Carers Support Centre about home care services in Bristol and South Gloucestershire during November 2016.

Following concerns that had been expressed to individual Carer Support Officers and more generally in support groups, The Carers Support Centre put the following on their website and in Carers News in October 2016:-

“We regularly hear from carers who are dissatisfied with the quality of the home care service they receive. This includes paid care workers arriving late, leaving if they did not know the key safe code without notifying anyone, and carers not being supplied with a rota when requested.



Carers Support Centre met with Healthwatch representatives and raised these issues. Many carers also worry about the consequences of making a complaint. Whilst we acknowledge that we don't always hear about the good work that goes on, there have been enough reports of poor practice to prompt Healthwatch to want to find out more and to hear directly from carers”.

The Carers Support Centre and Healthwatch Bristol jointly held a focus group on 8 November 2016, specifically to look at any issues that carers wished to raise on this subject. At the Carers Rights Day event on 25 November, all the carers that attended were asked, whether or not they or the person they care for were currently receiving home care, to give their views either on their current or past service, or on what they would like to see in a home care service. This was facilitated by Carers Support Centre staff and Healthwatch Bristol and South Gloucestershire.

This feedback is intended for both Local Authorities.

Bristol City Council produced a report for Scrutiny Committee on 21 November on the subject of home care, in which they emphasise in item 4.2:

“We receive very few formal complaints about home care. We know this is because of people's reluctance to complain rather than because things never go wrong.....and when things do go wrong, it is usually due to care:

- a. Not being provided when it should be – too late, too early or not at all
- b. Not being provided to the required standard – where there is a training/competence issue
- c. Being provided by staff the service user is not happy with – this could relate to gender, attitude, personality etc. or regular changes in care staff.”

The findings in this report support these conclusions.

South Gloucestershire Council are consulting until 5 January 2017 on proposals to recommission all community based services, including home care, along the same lines as already exists in Bristol, i.e. buying support from a single lead provider in each geographical area/cluster rather than offering cases to a large number of accredited providers across the county. It is hoped that this report will be helpful in informing the future commissioning of these services.

- The focus group on 8 November was attended by two South Gloucestershire carers and three Bristol carers.



- The Carers Rights Day event on 25 November was attended by 58 carers (28 from South Gloucestershire and 30 from Bristol).
- In addition, three carers contacted the Carers Support Centre separately by email or at face-to-face meetings.

Because of the method of formatting the questions and collecting the feedback, this will be divided into two sections, and where known, will be annotated as Bristol or South Gloucestershire. Because there was a majority of carers at the Carers Rights Day event who had not or did not currently receive a service, we have divided the comments into those from people who receive a service and those who do not.

## **1. Comments received from the focus group on current services**

### Bristol responses

- “I don’t have any confidence in the service including the people who “brokerage” the package. Recently the brokerage team had to do this on my Mum’s behalf (she is 86, Asian and there is a certain need of personal care and I act on her behalf as her English is poor). The team from Bristol City Council offered a male care[worker] and when I stated that it had to be female the brokerage team made me feel uncomfortable and the one who was causing problems. The person on the team stated that because I would not accept a male care[worker] “I was the one leaving mum in a vulnerable position. ....”
- “At present I have a care[worker] who does not do anything remotely what is on the care plan. I have reported this to the company who have said that they would do “spot” checks, speak to the care[worker], monitor etc. but with no luck. I have asked them to get me another with no success. When I am around (care[worker] has been known to ask my Mum if I am around) care plan has been followed but when I am not around it has not been followed.
- Care[workers] not coming on time and I am not informed so I get calls from at work that they have not turned up.....
- I now know why clients do not complain because it has a habit of back firing, especially as the company does not remove that care[worker]. They are already in a vulnerable position. ....
- Importantly, cheap is not always the best option.”

- Mother has dementia and was using Milestones, they had made lots of complaints over the years but they did not know how to change provider. They sent a letter to the mother notifying her that the care was going to stop, which caused mother a lot of anxiety. There were a couple of staff who had got attached to mother and were really good so the situation caused them stress too.
- We agreed to stay with Milestones until the change over time (31 Aug) as I was going away and was assured the care was in place. But actually it turned into two weeks of hideousness and there was 24 hours where mother was not visited or given medication at all. This had a huge impact on mother and she is only now recovering.
- Did call ABC to make a complaint about the lack of care during the changeover and did have someone call back but we have not heard anything since to know how the complaint is being progressed.
- Had wanted to keep one of the workers but was not able to employ them ourselves. Found a company called Right at Home and my mother's usual care workers were also going to start working there so we picked them, but they charged more money so the Council said no. After some battling we now use direct payments and do use them and have managed to keep the care worker my mother liked.
- Being with Right Care is going well but it does cost more and Mother does need a new assessment and more care now, but ABC the brokerage team said it would not be for 12 to 14 weeks.
- A problem we did have was when Sarah was sick and Right at Home sent a replacement but they knew nothing about dementia and weren't very good. A young member of staff came once and asked my mother if she wanted to something to eat, which she said no to, so then didn't get fed. Someone with more experience or better training would have known to not do that and prepare food for her.

## South Gloucestershire responses

- I have been caring for my disabled husband for the past 20 years, he is now 67. I am now finding things harder and I have told social services that I need help to get him up, showered, dressed and have breakfast ready for the day. Then at bedtime to be prepared for bed. I am wondering and almost slightly dreading who will be turning up. I know it will be pot luck because the agency will as all agencies difficulties in recruiting staff and keeping them



mainly due to basic pay, not enough time for the clients and keeping staff because they don't realise you have to be a special caring person to be able to care for vulnerable people and it's the hardest job in the world.

- Of course we did not think we would be in this position, who does and appreciate all the help we have received up to now.
- I realise it all comes down to money and there is only so much to go around, but when I read and hear about money wasted by the government for non-essential reasons I just can't understand MPs and realise that until it affects you then most people are not interested.
- I can't come to the meetings regarding this because we haven't got an agency yet, but I don't think talking about it will ever make any difference I am sorry to say

## General comments from focus group

- Consistency of care workers is key. One Bristol carer talked about her father experiencing 40 different care workers visiting him in one month which was difficult for him.
- One South Glos carer experienced a care agency over charging them by £400. When they tried to challenge S Glos council told them not to bother. The funding came from S Glos finance.
- One South Glos carer experiences of dementia care was useless. They felt care workers often did not have a clue yet the agency would say they have specialised people. A Bristol carer felt this was a continuing issue as dementia is so diverse unless workers are properly trained, not just with a DVD they won't have a proper understanding. B&S care do this and other agencies.
- A Bristol carer's wife broke her femur and was looked after by re-ablement services for 12 weeks. The care plan was agreed with social services and Milestones were cheaper and quicker. They also looked at Mears but they would take longer and were more expensive. So they went with Milestones but was not told about them closing. They heard a lot of the staff had gone to First Call but have already left as they did not like it. They did approach Prestige care, but they do not want to work with Bristol City Council and their pricing is very different. After the closure they went with Mears and the problem the carer thought with Mears is the back office functions. Mears post out the schedule on a Friday so you cannot complain if it is not what you need until Monday and getting messages to the care workers can be really difficult, taking time or not getting feedback. Also this week 15 minutes has been added to each appointment, which makes sense on bath days as that does take time but no one has cleared this with the carer and they haven't signed



anything. 'you don't want to complain but what else can you do?' I only noticed it as I saw the log and signed the time sheet.

- Feels like the brokers take the path of least resistance
- Bristol carer uses B&S to care for mother and the supervisor did not follow the procedure they designed for changing mother's pads. Also there was one occasion where they texted the carer to say they could not get in, when New Cross were being paid to sit with the mother.

## **2. Comments from Carers Rights Day event on current services**

### South Gloucestershire responses

- Some care workers come in, make a cup of tea and then go
- Upsetting cared for person by asking inappropriate questions and having unrealistic expectations on their ability
- New care workers sometimes have no idea on condition of person they were coming in to support
- People afraid of having the care taken away if they complain
- Different care workers coming in and having to get used to one another
- Timing is suitable for the home care worker not the person who needs the care
- Food being prepared and then not put in an accessible place
- Care workers not having enough time to care – probably as they don't get paid for travel time
- THERE ARE SOME REALLY GOOD CARERS OUT THERE AND THEY ARE WORTH THEIR WEIGHT IN GOLD!
- Issues of trust and consistency and culture. A male care worker was assigned to an elderly woman to help her shower which made her very uncomfortable and uneasy. Daughter asked for a female care worker and was told not possible due to service being stretched
- Time keeping, sometimes 2 hours late and sometimes not showing up at all
- Consistency an issue with Dom Care, told only allowed care worker for a certain quota then the care worker needs to be changed to somebody new.

### Bristol responses

- Kumari Care – poor service and time keeping
- Comfort Call – unreliable/compromising dignity of service user (wrong gender, insensitive)



- Customers are frightened to complain or change services – worried about poor treatment
- Not consulting with or listening to the family
- Lack of specialised training
- Key safe not always used – care worker rings bell even though couple have severe mobility problems and can't answer the door
- Travel time not paid between visits
- Lack of person centred care, not valuing client as an individual
- Lack of sensitivity to cultural issues and lack of understanding of other languages
- Timeslots not adhered to, and no communication about delays (can be several hours late)
- Lack of respect for people's homes: not wearing slippers or foot covers, wandering around the house, asking inappropriate personal questions
- Care workers not listening to the carer (cared for has dementia)
- Lack of knowledge, e.g. end of life
- Staff smelling of smoke
- Care workers should be same gender of service user for reasons of dignity
- Lack of consistency of staff
- Care worker didn't check whether meds had been taken – took service user's word for it (has dementia)
- When a service was cancelled, the agency offered to provide the same service at a lower price
- Seems to be a postcode lottery as to quality of service provided

### **3. What would you like to see in a home care service?**

#### Bristol responses

- Tailored to the individual – person centred
- Helping people to get up in the morning first thing, and going to bed last thing at night
- Continuity of care worker
- Sufficient time to talk
- Good bedside manner
- “Friends” rather than “a service”
- Good relationship with the carer
- Good listener
- Support for taking medication
- Older, isolated, lonely people might need longer than half an hour
- Respect for gender, culture and age, not being patronising or condescending





- Trustworthy people
- Good training
- Using phone or technology to check on people, but as a supplement not a substitute

## South Gloucestershire responses

- Continuity of care workers
- Good training, e.g. on manual handling
- Care workers should work in partnership with carers, as part of the care team!
- Punctuality of care workers was mentioned three times.
- Timing to suit carer and service user (flexibility)
- Having a care worker the same gender as the service user
- Good training, e.g. in dementia
- May not always do the things the way the carer does, but should be honest and listen to carers
- Care worker has enough time to do allocated tasks
- Having contact number of the organisation if the care worker doesn't turn up
- Care workers to ensure that rubbish is put in the right place
- Having a consistent care worker – particularly important if cared for has dementia
- Important to have a choice of gender if this is important to the cared for person
- Being sensitive to cultural issues, e.g. English not being first language of care worker
- Ensuring people's needs are fully met, with a clear care plan
- Enough time to provide the right care
- Recognition of impact on carers and cared for having people coming into the home
- Overall apprehensive feeling from the table about in future receiving Dom Care due to the negative stories they hear from others (friends Family etc.)
- A lot of tick box consultations, carers prefer to talk to professionals about their experiences and have conversations about bringing about change
- Providers need to be aware that emotional support is so very important for carers to be able to carry on and give to optimal care for those whom they support.

Carers Support Centre – December 2016

