



## **Domiciliary Care in Halton**

Report published 19<sup>th</sup> December 2016

# **Home Care - Who Cares?**



## Acknowledgements

Healthwatch Halton would like to thank all the people who gave up their time to take part in our survey.

We appreciate the support we have received from Halton Borough Council's Director of Adult Social Care and staff in Halton Borough Council's Quality Assurance Team in ensuring our survey reached as many users of the service as possible.

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# Executive Summary

This report is based on 142 responses from residents of Halton receiving domiciliary care services to a survey carried out by Healthwatch Halton between November 2015 and February 2016. The report also includes other feedback gathered from members of the public during the project.

We gathered demographic information in the survey which showed 59% of respondents were female and 41% male. This is roughly in line with the information supplied by Halton Borough Council of 62% female and 38% male currently receiving domiciliary care.

33% of respondents to our survey were aged over 85, with 44% aged 65 to 85.

78% of respondents considered themselves to have a disability, sensory impairment or long-term illness.

## Key Findings

- People value the service they receive, with over three quarters, (78%) of people surveyed saying they were satisfied with the service provided. But there were instances where care fell well below the standards expected.
- More than 9 out of 10 people (92%) said they were treated with dignity and respect by their care workers.
- Too many short visits - 1 in 4 visits were of 15 minutes or less. Many people raised concerns about rushed visits.
- Concerns were raised over the lack of communication about delayed arrival times and missed visits.
- Continuity - Too many changes in care staff: Many people highlighted a lack of continuity of carers. Never knowing who would be due to turn up. Only 46% said their care worker was usually someone they had met before.
- Initial planning - There is a need for truly independent advice, information and support for service users. Only 30% of people said they were offered independent advice on assessment. There was confusion for many over what Personal Budgets / Direct Payments are.
- Service user first - Service users must be included in planning the Care Plan. 23% either didn't receive support or weren't aware of receiving support.

We made recommendations under 7 themes.

1. **Care Plan suitability**
2. **Poor Communication**
3. **Continuity of care**
4. **Length of visits**
5. **Supervision & Staff Training**
6. **Funding & Care Assessments**
7. **Complaints & Concerns**

The recommendations are listed in full on page 12.

In summary:

- We recommend that care plans are regularly reviewed in line with recently issued guidelines by the National Institute for Health & Care Excellence (NICE) and that the views of service users are paramount in planning and reviewing of care plans.
- We recommend the local authority look to improve monitoring of the continuity of care with a recommendation that care workers are grouped in small teams with a set number of service users to care for. Information on the 'care team' to be included in the care plan. Added to which we recommend a change of focus from 'timed slots' to 'task based' visits.
- We also recommend that care providers build in regular practice based supervision discussion with staff.
- With regards to funding and care assessment we would like to see truly independent information and advice being offered to service users during assessments or reviews.
- Finally, we recommend that information be made available in care plans on how to raise a concern, complaint or give a compliment.



# Introduction

## Healthwatch Halton

Healthwatch Halton is one of 148 local Healthwatch organisations setup throughout England on 1<sup>st</sup> April 2013 under the provisions of the Health & Social Care Act 2012.

Our role is to champion the views and experiences of patients, people using services, carers and the wider public. We act as the consumer voice for the people of Halton on health and social care issues.

We are part of a wider network made up of local Healthwatch, acting as ‘eyes and ears’ on the ground, with Healthwatch England providing representation at a national level.

## Domiciliary Care, what is it?

Most people live independently in their own homes. However if they are frail or have long term care needs, this can be difficult without the help and support of other people and services. Help with personal care and other practical household tasks is called Domiciliary Care.

Domiciliary care is really important because it can mean the difference between someone being able to continue living in their own home and having to move into residential care.

Services provided may range from a 15 minute check to make sure someone has taken their prescribed medicine, through to around the clock 24 hour live in care.

## What is a Personal Budget?

Following an initial assessment, completed by Adult Social Services, it may be agreed that you or the person you’re looking after need some additional support to promote independence, choice and control. A Personal Budget is the amount of money the local authority allocates for this additional support.

This personal budget can be taken as a Direct Payment.

## What is a Direct Payment?

If you need care and support, this had in the past been provided directly from your local authority. Direct payments were introduced to give people more choice and control over how their care and support was arranged, to help them live more independently.

The direct payment is paid to you by the local authority so that you can decide how you want to meet your care and support needs. Many people choose to employ their own personal assistant, although there are many other ways direct payments can be used.

The full control over care and support that direct payments enables is an attractive option for many people. However, some people may be unsure whether they want or could manage a direct payment. In these cases, the local authority can provide you with a mixed package of care.

A mixed package of care may consist of a smaller direct payment, with some care and support arranged by the local authority or a provider. This allows people to try out direct payments, before deciding whether to move to a ‘full’ direct payment.

If someone is assessed as being eligible for support and it's not possible for them to get direct payments or they do not want one, social services must provide care and support directly, or through an individual service fund.

## Domiciliary care - The national picture

In 2014/15, 673,000 people in England were using home care services. An estimated 249 million hours of services were delivered in 2014/15 at a total cost of more than £3.3 billion, (£2.6 billion was expenditure by Local authorities and £623 million by self-funders).<sup>1</sup>

In England, according to estimates by the United Kingdom Home Care Association (UKHCA), 96% of the home care funded by local authorities is delivered by the independent and voluntary sector.

As at 1<sup>st</sup> August 2016, the CQC had 8449 registered locations providing domiciliary care across England.<sup>2</sup>

UKHCA’s ‘The Homecare Deficit 2016’<sup>3</sup> report published in October 2016 details the funding levels for homecare services for older people across the UK. Details of the average prices paid for older people’s homecare across the North West can be seen in figure 1 below.

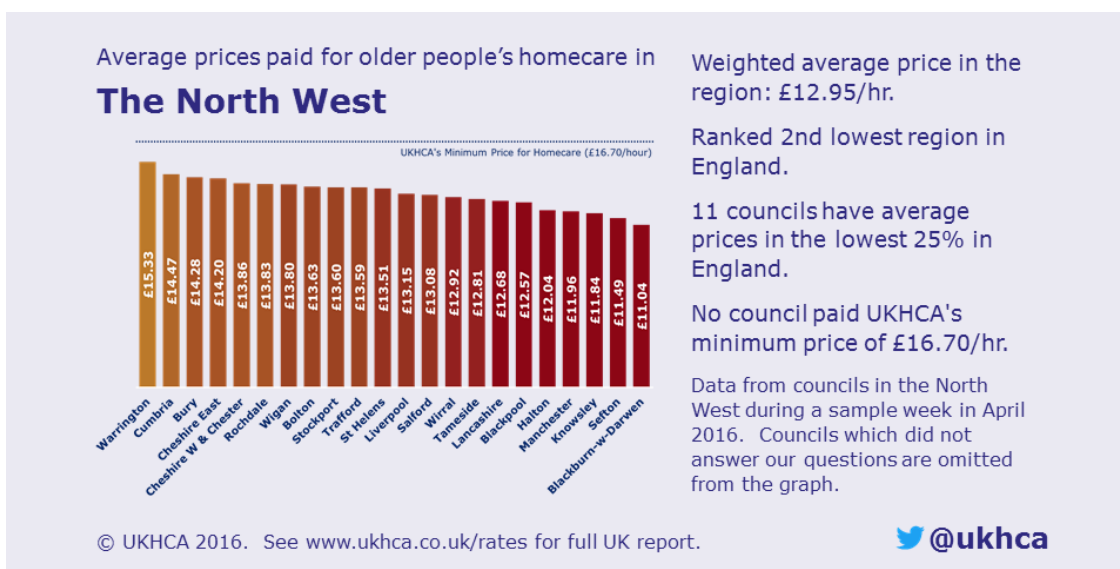


Figure 1 - Average prices paid for older people's homecare

<sup>1</sup> An Overview of the Domiciliary Care Market in the United Kingdom (May 2016), United Kingdom Home Care Association Limited - <http://bit.ly/2bmmlTv>

<sup>2</sup> Care Quality Commission, all services registered as ‘domiciliary care services’. Available from: <http://bit.ly/2aWl4A2>

<sup>3</sup> UKHCA - The Homecare Deficit - [http://www.ukhca.co.uk/pdfs/ukhca\\_homecare\\_deficit\\_2016\\_final.pdf](http://www.ukhca.co.uk/pdfs/ukhca_homecare_deficit_2016_final.pdf)



## The local picture

The contract for domiciliary care services in Halton is commissioned and managed by Halton Borough Council and it is these services that were the focus of our research.

Halton Borough Council have split the borough into four zones and commissioned two providers per zone, covering 40% of hours. The remaining hours are currently spot purchased through providers who meet the required level for the domiciliary care framework.

The service is predominantly for older people, but also covers any adult with a physical or learning disability. Providers are expected to provide a service between the hours of 7.00am and 11.00pm each and every day of the year.

Figures given to Healthwatch Halton by Halton Borough Council show that currently, 6882 hours of domiciliary care are delivered each week, equating to 357,864 per year.

Currently, the domiciliary care contract holders are:

- Carewatch
- Castle Rock Group
- Heron Care
- Home Care Support
- Icare
- Just Care
- Local Solutions
- Premier Care
- Victoria Care

There are three additional providers U5, Comfort Call and SOS Homecare who are spot providers.

The annual spend commissioned for Adult Social Care through private domiciliary care providers amounted to approximately £4.3 million per annum.

The local authority forecast that the amount of care and the overall expenditure is set to rise over the coming years at an estimated rate of between 2-3% per year.

## The aim of our report:

The ‘Care at Home’ project will provide residents an opportunity to have a say about their experiences of Domiciliary services (Home Care Services) in Halton. By listening to the experience and opinions of those involved in the care it will help us see where home care services are doing well, and also highlight what needs to be improved.

We aim to:

- Identify and explore peoples experiences of Domiciliary Care
- Collate views to identify best practice, barriers and gaps in service delivery
- Make recommendations as to how best practice can be shared.

## Why we did what we did and how we did it

### Why we did it

Domiciliary care services (Home Care Services) are a vital part of our local social care services helping to allow service users to continue living at home and remain more independent. There are a growing number of older people in Halton, with the number forecast to increase from 21,100 in 2014 to 26,700 by 2024<sup>4</sup>. Many more people are likely to require some additional support at home, which in turn will add significant pressures on local authority finances.

Nationally, a number of studies and organisations have raised concerns about the quality of home care services, including rushed visits, lack of dignity and respect, low wages, unpaid travel time, unrealistic rotas and the pressures on staff which impacts on service users.

As pointed in the CQC report, ‘*Not just a number - Home care inspection programme*’ in 2013, ‘Home care, like a number of other community-based services, presents a significant challenge in terms of gathering the views of people who use services. It is delivered in people’s own homes behind closed doors to people who are often in vulnerable circumstances, but the care provided is harder to observe than in a hospital ward or care home.’<sup>5</sup>

We believe that Domiciliary Care is one of the most important services available because it supports some of the most vulnerable in our society. Because of this, services need to be caring, flexible and compassionate. As an organisation tasked with gathering the views of people on the services they use, we were concerned that we didn’t have the ‘full picture’ on the quality of home care provided in Halton.

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<sup>4</sup> Halton Borough Profile -

<http://www3.halton.gov.uk/Pages/councildemocracy/pdfs/CensusandStatistics/HaltonSpineChart.pdf>

<sup>5</sup> ‘Not Just a number - Home Care Inspection programme’ - [http://www.cqc.org.uk/sites/default/files/documents/9332-cqc-home\\_care\\_summary-tagged.pdf](http://www.cqc.org.uk/sites/default/files/documents/9332-cqc-home_care_summary-tagged.pdf)

Was it caring, flexible and compassionate? Were service users happy with the support and care they received? From the little feedback we had received, we were hearing contrasting stories. The issue was discussed at a Healthwatch Halton management committee meeting in May 2015 and it was agreed to make a review of local Domiciliary Care services one of our priority issues to look at for the coming year.

### **How we did it.**

Following on from the decision to carry out this piece of work, a ‘task & finish’ group was set up to lead on this project.

The ‘task & finish’ group consisted of Tom Baker, Healthwatch Halton lead on Adult Social Care, Lyn Williams, Healthwatch Halton manager at the time, and Pam Batey, Halton Disability Partnership. Admin support was given by the Healthwatch Halton staff team.

The group met a number of times during the planning period, May to September 2015, to discuss the project, carry out background research and to plan the final survey questions. During this time, the group also reviewed work carried out on domiciliary care services by a number of other local Healthwatch, for research on the different ways of gathering the information required.

A survey was then devised to cover questions relating to:

- Care Plans
- Personal Budgets and Direct Payments
- Assessment of needs and care received
- Home visits
- Quality of service
- Raising concerns

The survey was produced using ‘SNAP’ survey software. This was also used for analysis of the survey and to produce all the data, charts and tables included in this report.

Meetings were then held with Halton Borough Council’s Director of Adult Social Care and Halton Borough Council’s Quality Assurance Team in June and July 2015 to discuss the best way to ensure the survey reached as many users of domiciliary care services with the borough as possible.

Halton Borough Council agreed to mail out the survey, covering leaflet and FREEPOST reply envelope, to a total of 790 people receiving Domiciliary Care in Halton.

In addition, Halton Disability Partnership distributed the survey to a number of their service users. The survey was also promoted via Healthwatch Halton’s website, e-bulletin and social media as well as in the local press.

In total 850 surveys were distributed from November 2015 on. 148 surveys were returned, either by post (135) or completed online (13). Five surveys were excluded due to being returned blank and 1 online survey was duplicated leaving a total of 142 completed surveys.

We also received additional feedback from members of the public on the provision of Domiciliary Care locally.

# Results & Findings

Our report gives a snapshot of the thoughts and views of people receiving home care services in Halton.

Results from the survey show that there is a great deal of good care taking place across our community. The report also highlights that levels of care are still inconsistent, with many people facing continuing difficulties in getting the care and attention they deserve and are entitled to.

## Recommendations & Observations

In June 2016 the National Institute for Health & Care Excellence (NICE) published a new quality standard (QS123)<sup>6</sup> covering home care given to older people in their own homes to meet their assessed social care needs.

Where possible, the recommendations we have made relate to the quality statements within the NICE guidance.

The recommendations and observations below require actions from both our local authority (Halton Borough Council) and the home care service providers.

### 1. Care Plan suitability

- *NICE Quality Standard (QS123) - Statement 1. Older people using home care services have a home care plan that identifies how their personal priorities and outcomes will be met.*
- *NICE Quality Standard (QS123) - Statement 5. Older people using home care services have a review of the outcomes of their home care plan within 6 weeks of starting to use the service and then at least annually.*

Our survey results show that almost 1 in 5 people felt they didn't have a say in what went in their care plan. While the service works for many there are some that feel side-lined in decisions about their own care.

**We recommend** the local authority look to include a quality performance indicator in all new domiciliary care contracts to make sure that service users views are paramount when arranging a care plan.

**We recommend** that local authority look to embed the requirement for a regular review of home care service user needs, and preferences, within all contracts.

**We recommend** that home care providers ensure that care plans are reviewed in line with NICE guidelines, within six weeks of the first care visit, to make sure that service users are happy with the plan.

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<sup>6</sup> <https://www.nice.org.uk/guidance/qs123>

## 2. Poor Communication

- *NICE Quality Standard (QS123) - Statement 2. Older people using home care services have a home care plan that identifies how their home care provider will respond to missed or late visits.*

Survey results show that 54% of people aren't always kept informed of changes to routines etc. Late changes to visit times, or completely missed visits, can cause great stress and inconvenience to the service user and/or their family.

**We recommend** that the local authority look at ways to embed the monitoring of missed and late visits in the quality assurance system in line with NICE guidelines.

It seems that some care providers are better than others at communicating changes to service users and their families. **We suggest** that the local authority work with local home care providers to roll out a good practice guide to be used by all providers.

## 3. Continuity of care

- *NICE Quality Standard (QS123) - Statement 3. Older people using home care services receive care from a consistent team of home care workers who are familiar with their needs.*

In our survey, 54% of people said that the care workers aren't always someone they have met before.

It seems clear that having a small number of carers visiting can help build a close relationship between the service user and carers. This is highly valued by service users.

**We recommend** the local authority look to add a performance indicator to all care provider contracts to monitor the continuity of care.

**We recommend** that domiciliary care providers look at the grouping of care of workers into 'micro' teams with an allocated number of service users per team.

**We recommend** that information should be included in each Care Plan to show the team of care workers allocated to the service user, including photos of carers where possible.

## 4. Length of visits

- *NICE Quality Standard (QS123) - Statement 4. Older people using home care services have visits of at least 30 minutes except when short visits for specific tasks or checks have been agreed as part of a wider package of support.*

25% of people said they had visits of 15 minutes or less. If these visits match the needs of the service user they may be fine, but it seems that it is not always so. We heard anecdotal evidence that Carers can spend half of the visit time doing paper work.

**We recommend** that the focus of care changes from time-slot based visits to task based visits.

## 5. Supervision & Staff Training

- *NICE Quality Standard (QS123) - Statement 6. Home care providers have practice-based supervision discussions with home care workers at least every 3 months.*

We recommend that all care providers adopt NICE guideline No.6 and build in practice-based supervision discussions with staff. We would like to see the local authority include this requirement as part of any contract with local care providers.

## 6. Funding & Care Assessments

When being assessed for care needs, we recommend that service users should receive information and advice from independent organisations, not just from Social Services.

We would like to see the option for Direct Payments to be offered to all service users and where possible, NHS Continuing Health Care to be considered.

We would like to see more information on Direct Payments given upon discharge from hospital. Not everyone wants or needs to be an employer, however they should be given the choice and information to make that decision for themselves.

## 7. Complaints & Concerns

We recommend that information on how to raise a concern, complaint, or give a compliment, should be included in service users care plans, together with details of independent organisations, such as Healthwatch, who can offer support if required.



## Results from the survey

### Q1 Do you or a member of your family/or friend receive care/support from a Care Agency?

142 people said that they or a family member or friend received care or support from a Care Agency.

This report is based on the responses received from these 142 people. Not every question was relevant to or answered by every person. Unless otherwise mentioned the statistics / percentages shown are based on the number of people responding to that question.

## Funding

There seemed to be a little confusion over how care was actually funded. In answer to Q2, 41% of people said their care was funded via a personal budget or direct payments scheme.

31% said their care was self funded.

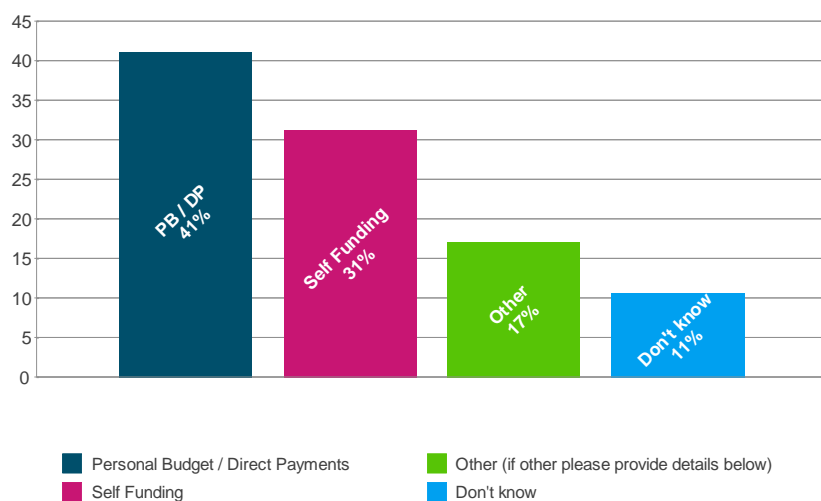
For the 17% who replied 'other' care seemed to be funded via a mix of self funding and direct payments, with a few people receiving NHS Continuing Health Care Payments.

11% of people replied that they didn't know how their care was funded.

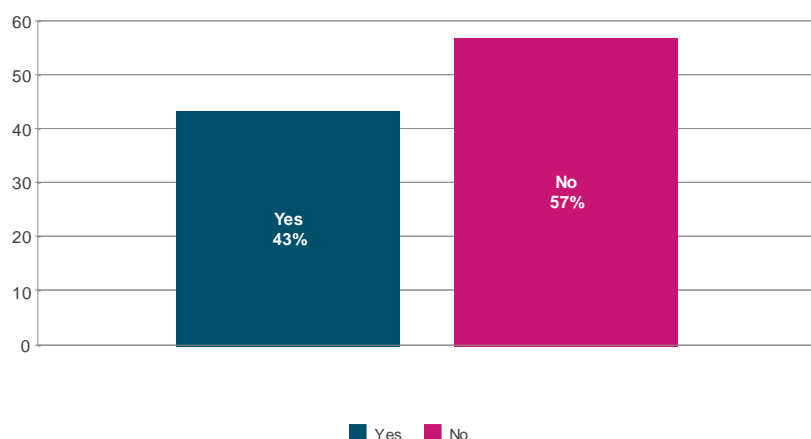
For Q3, 43% of respondents said they were aware they had a personal budget, with the majority 57% stating they didn't know they had a personal budget.

With the implementation of the Care Act, there is now a duty upon councils to produce a care and support plan and offer a personal budget following an assessment to ensure that disabled people and carers' needs are adequately met. For the first time in law, local authorities have a legal obligation to offer personal budgets and conduct a care and

### Q2 How is the care you receive at home funded?

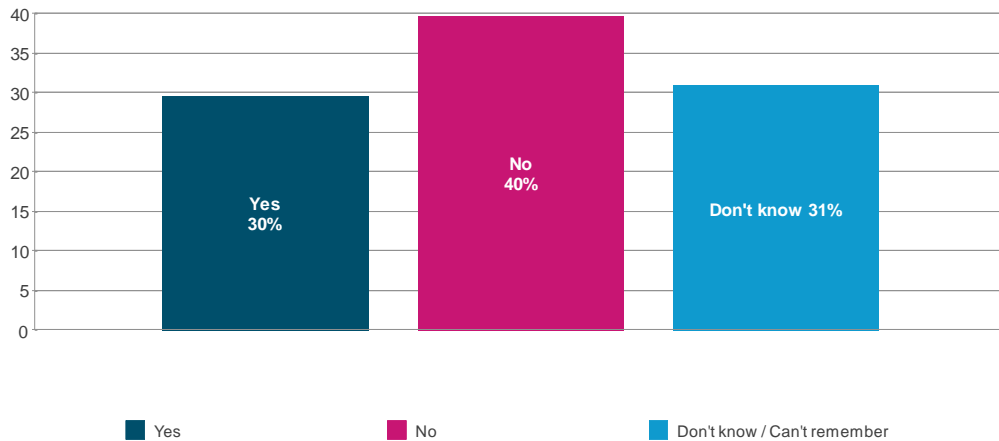


### Q3. Were you aware that you have a personal budget?



support planning that were previously stated only in guidance as part of the Personalization agenda.

**Q4. When you were assessed for your care needs were you offered advice from an independent source**



We were surprised to note that only 30% of respondents to Q4 said they were offered advice from an independent source when they were being assessed.

Of these, the majority said Social Services were their independent source of advice.

We feel it is important that people should be offered truly independent advice to ensure they receive all the help and support they need and are entitled to.

**Q5. Who provides your home care / support?**

We received responses regarding all local care providers on the local authority providers list. The aim of our survey wasn't to single out any particular provider for criticism or praise, rather it was to gather an overview of the experiences of service users across the borough.

It seems apparent though, from responses received, that not every service user is necessarily aware of the name of the actual care provider they use.

A number of people stated that Halton Borough Council Social Services provided their care.

**Q6. Please indicate any of the care services listed below which you receive.**

Analysis % Respondents	
n= number of respondents	(n=134)
Showering or Bathing	59.0%
Dressing	59.0%
Washing	46.3%
Taking Medicines	44.8%
Meals	44.8%
Getting up / Going to bed	41.0%
Shopping	11.9%
Other	11.9%
Sitting Service	5.2%

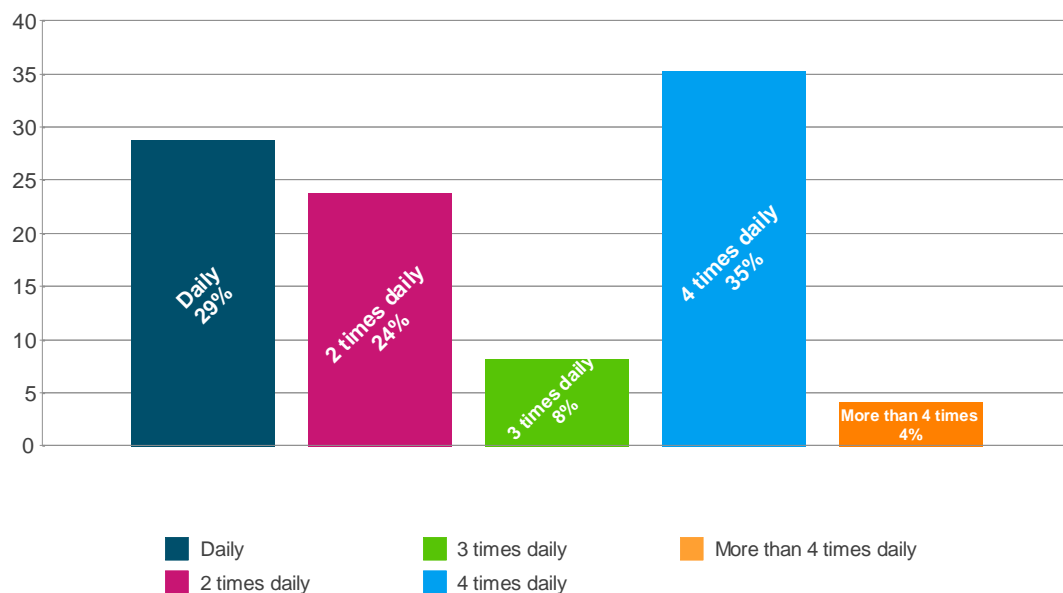
**As can be seen in the table above the 6 most common care services provided were:**

1. Showering/Bathing
2. Dressing
3. Washing
4. Taking Medicines
5. Meals
6. Getting up/going to bed

‘Other services’ mentioned included services such as feeding the dog and general house cleaning.

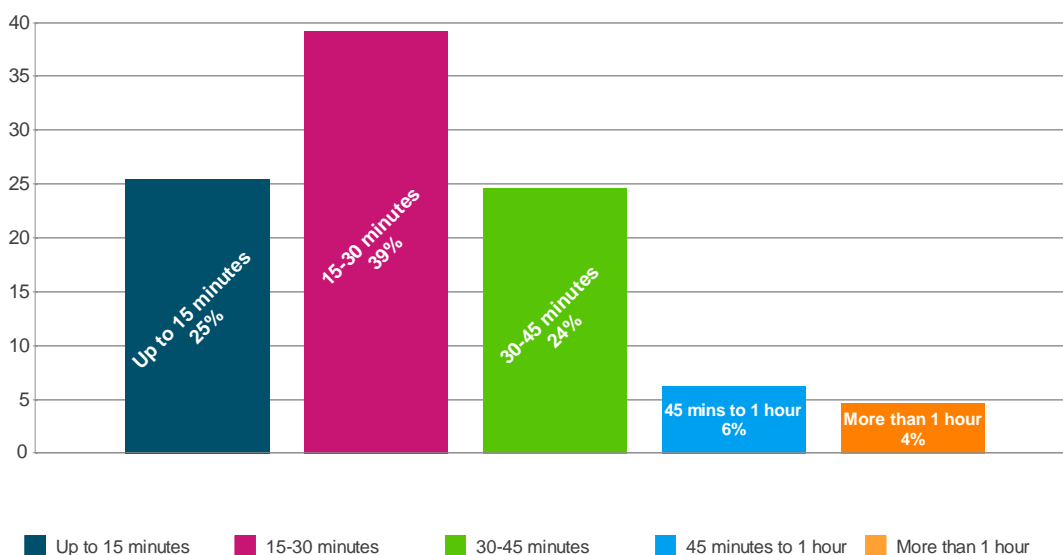
Often care visits are for specific tasks which may struggle to fit easily in to an allocated time slot. We would like to see more consideration given to the commissioning of ‘task based’ visits as opposed to ‘time based’ visits.

### Q7. How often do you receive support from your home care provider



35% of respondents said they received four care visits a day. 29% of people received care once a day, while 24% said they received it twice a day.

### Q8 How long does the care worker stay at each visit?



Overall, 25% of service users stated that they received visits of 15 minutes or less.

When these figures are broken down further, in table 8 below, it can be seen that almost 1 in 3 of the 15 minute visits were the only care visits of the day for that person.

Table 8b	Total	Q8. How long does the care worker stay at each visit?				
		Up to 15 minutes	15-30 minutes	30-45 minutes	45-60 minutes	1 hour +
Respondents	119	32	47	28	7	5
Q7. How often do you receive support from your home care providers						
Daily	34 28.6%	10 31.3%	12 25.5%	7 25.0%	1 14.3%	4 80.0%
2 times daily	29 24.4%	9 28.1%	9 19.1%	8 28.6%	3 42.9%	- -
3 times daily	10 8.4%	4 12.5%	4 8.5%	1 3.6%	- -	1 20.0%
4 times daily	42 35.3%	7 21.9%	21 44.7%	12 42.9%	2 28.6%	- -
More than 4 times daily	4 3.4%	2 6.3%	1 2.1%	- -	1 14.3%	- -

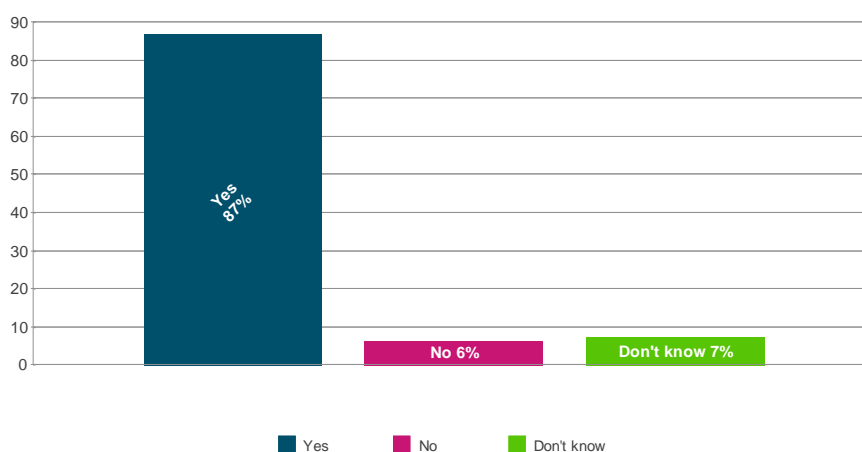
The majority of people stated that length of time the carers attended for matched that on the care plan.

It was still a concern to note that a small percentage of respondents said carers didn't attend for the stated time or sometimes didn't turn up at all.

This is something that we'd like to see the local authority look at in more depth.

We also feel that it shouldn't be left solely to family members or service users to be checking to ensure correct billing for visits.

Q8a Is this the time allocated on the care-plan?



*'Most of the carers are very young and can't wait to go'*

*'Mum has 4 15 minute visits from carers. The family have been informed that the care packages have to be at a time to suit the care providers as opposed to a time to suit Mum & Dad. Social Worker from HBC had told the Mum 'either take it or leave it''*

Q9. Did you decide what help you need from your care worker?	N=132
Yes	80%
No	20%
Q10. Were you given support to say what help you needed?	N=132
Yes	76%
No	16%
Don't know / Can't remember	8%

In response to Q9, 80% of people said they had a say in the decisions. For Q10, 76% said they received support to say what help they needed.

We asked those people who answered 'No' to Q9, 'If No, why not?'

The most common response was that the level of care needed was decided by social services. A few people responded that family made the decisions for them.

While the majority had a say in deciding the help and support they needed, 1 in 5 people still didn't.

We believe:

- The views of **all** service users should be paramount in decisions over their care
- **All** service users should be given the support they need to have a voice on these decisions

We would also like to see plans put in place to ensure all care plans are reviewed in line with NICE guidelines within six weeks of the first care visit to make sure that service users are happy with the plan and they are receiving the help and support they need.

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*'Carers decided what I needed'*

*'Social Worker decided'*

*'My son and daughter have Lasting Power of Attorney'*

*'Person receiving care has Alzheimer's'*

*'I had just broke my hip, had pneumonia and a blood clot. I am 91 and partially blind and deaf.'*

*'My daughter arranged.'*

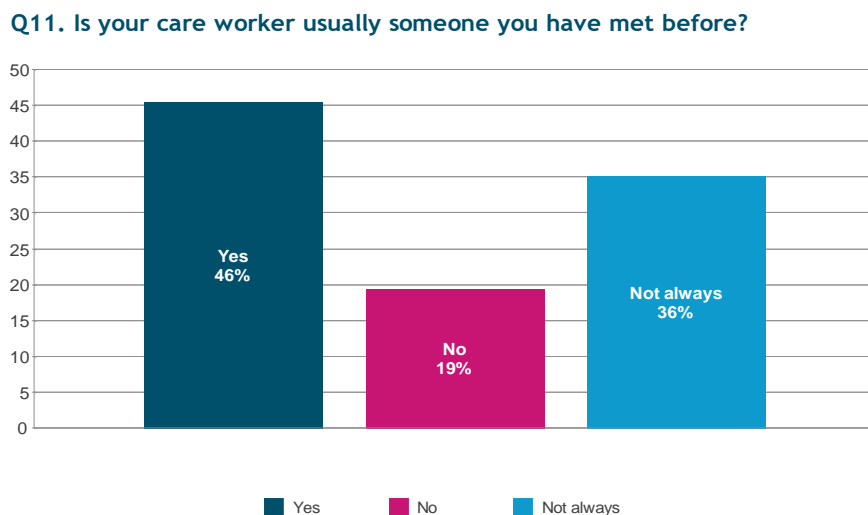
*'Organised by social worker on discharge, very helpful.'*

*'Discussed with RARS and Complex Care and Lifeline'*

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As can be seen in the chart below, for Q11, only 46% of respondents said their care worker was usually someone they had before.



We also heard anecdotal evidence of people having more than 10 different carers visiting within a week. We heard another comment from the family of an 81 year old lady who'd been woken at 8.00am by a male carer she'd never seen before.

This can't be the best way to care for vulnerable and elderly people.

Ideally, we would like to see small teams of care workers being set up by providers with an allocated number of service users per team. At the start of each care plan we'd like to see a page of information giving full contact details of the care provider and the 'team' of care workers allocated to the service user, including photos of carers where possible.

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*'There is no continuity of care. Several different carers are sent each week. There is no key care worker.'*

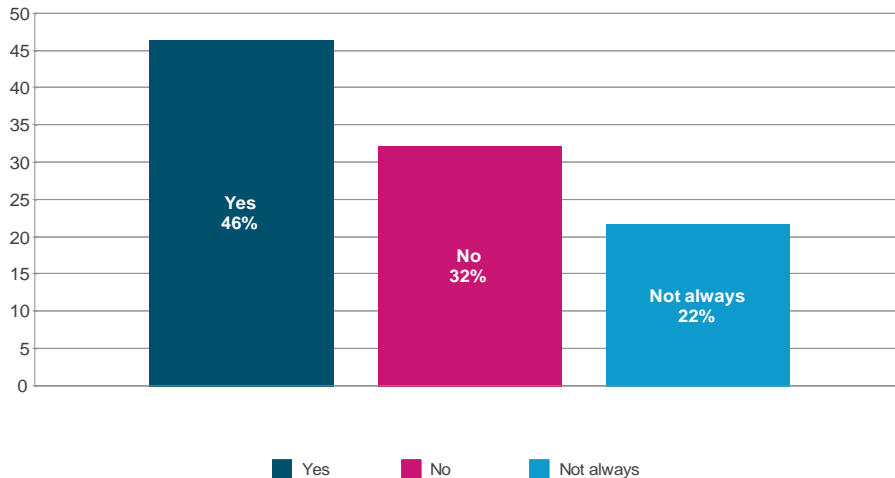
*'Different carers daily which is not ideal as mum has dementia and Alzheimers. No up to date care plan to follow for new carers so things get constantly missed.'*

*'There are too many changes to carers. I have different carers constantly with different skills for care. Some cannot use the hoist.'*

*'The care provider seems to suit themselves'*

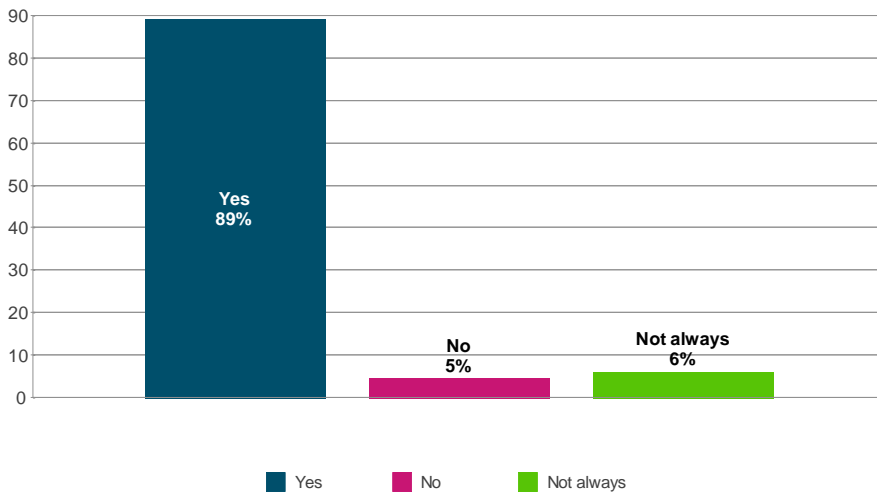
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**Q12. Are you and your carer/family always kept informed of any changes**



46% of people also said they were kept informed of changes by the provider. Of these many stated they received very short notice of changes. We feel there needs to be an improvement in communication with service users and their families. We would suggest the local authority look to monitor the performance of care providers on this issue.

**Q13. Do carers always wear a uniform and carry an identification badge**



The vast majority of care workers wore a uniform and carried identification. A small percentage of respondents said that their care workers didn't show any ID. One service user stated they didn't like uniforms and would prefer them to wear normal clothes.

Q14. Does your care worker always treat you with dignity and respect?	N=133
Yes	92%
Not always	7%
No	1%

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*‘Always. There is quite a bit of good natured teasing.  
We have a lot of laughs’*

*‘All the care workers are very good!’*

*‘The girls are lovely and helpful’*

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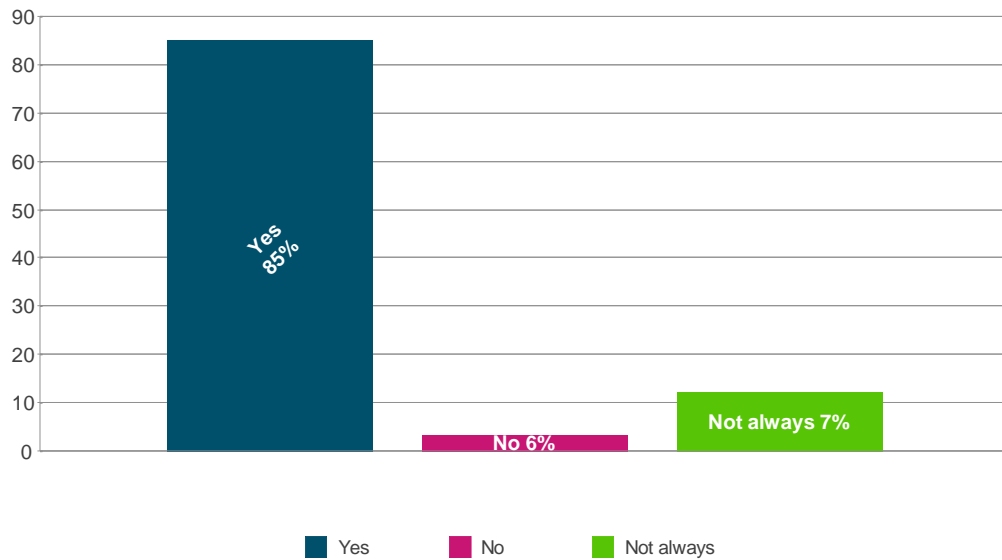
It was pleasing to note that, for Q14, 92% of people said they were always treated with dignity and respect by their care workers.

While this is a very high level of satisfaction already, we see no reason why this shouldn't be at 100%. Being treated with dignity and respect is something that service users shouldn't even have to think about and something that carers should do without a second thought.

Poor treatment included:

- Being given meals without being offered a choice first
- A service user being left with cold water dripping from them following showering while the carer went downstairs and left the house.
- Being rushed
- Being disrespectful

### Q15. Do you feel that your care worker is allocated enough time



We asked if people felt their care worker was allocated enough time to complete all the tasks required. While 85% said 'Yes', the common theme from those who replied 'no or not always', was that the care worker was rushed.

Although as one person responded, 'It depends which agency you are with...'

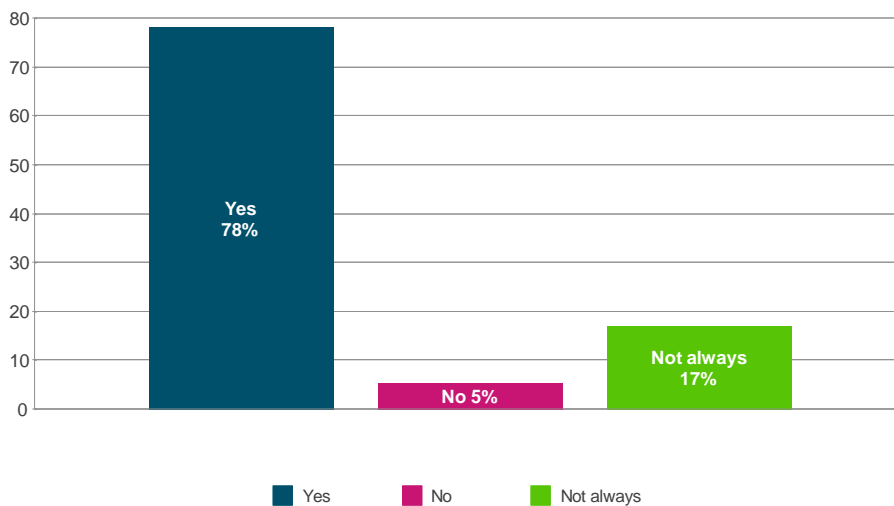
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*The carers are not given enough time to travel between patients/clients so are often late.*

*'The carers often spend half the time actually here doing paper work'*

---

**Q16. Are you satisfied with the standard of care you receive**



As highlighted in the main findings, for Q16, 78% of people said they were satisfied with the standard of care they received. A small percentage of people (5%) stated they were not satisfied with the standard of care they received, while 17% highlighted inconsistent levels of care.

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*‘They do their best always’*

*‘The care I receive is good and the carers are polite and respectful. Most do more than they are required to.’*

*‘Yes and no - don't always come on time and other things.’*

*‘Although we pay for 30 minutes it is very rare the care worker stays for that long.’*

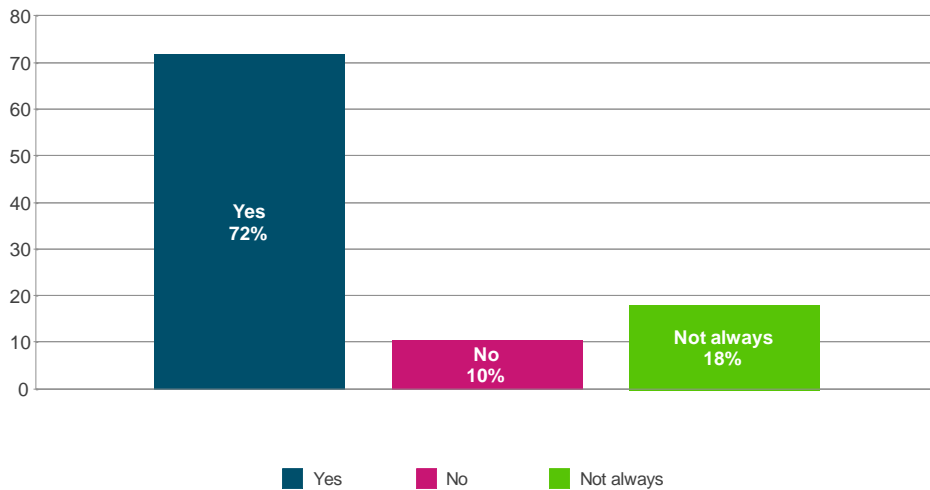
*‘Promised me continuity and then take my regulars away.’*

*‘Don't always do the job right e.g. medication has been missed, soiled clothes have been left around.’*

*‘No continuity of care. Our mother is in her 90's, is virtually blind and deaf, we feel she should have a key worker and not different carers each day’*

---

**Q17. Do you feel that you and your carer/family are listened to when raising concerns?**



While 72% felt that they were listened to if they raised any concerns, there were 10% of people who felt they weren't listened to when they raised concerns, and a further 18% who said their concerns weren't always listened to.

There seemed to be a consistent theme coming across from those people who raised concerns. Complaints were generally listened to, and initially acted upon, but the failures that had caused the initial concern seemed to crop up again after a period of time.

The feedback received could suggest that some Care Providers aren't always taking complaints as seriously as they could.

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*'If we were listened to then xxxx staff wouldn't keep on making the same mistakes. I wouldn't have to keep phoning up saying the same things...'*

*'Yes, I am listened to, but not always sure that it is acted upon.'*

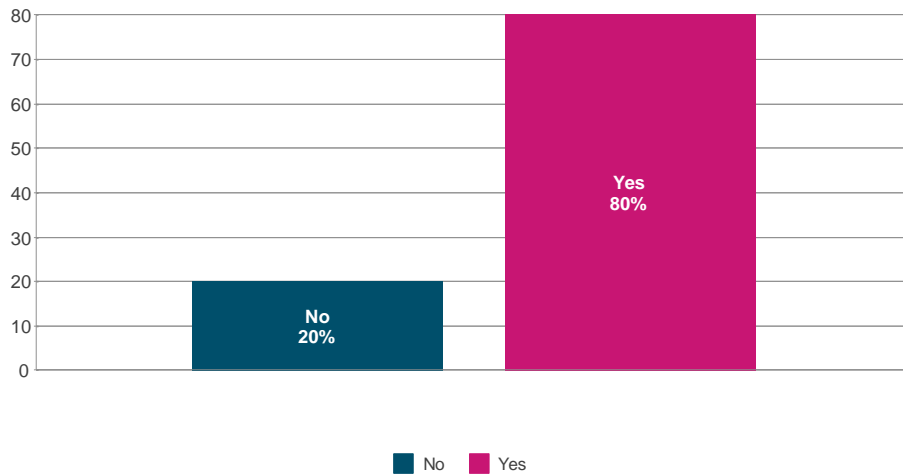
*'xxxx 'supply' carers often change the times of meal time visits. Regardless of asking both mealtime visits to be flagged up as important - as it is the only time mum eats. 18 hours between 5pm visit and brunch time meal at 11.00am.'*

*'xxxx give reasons and apologies for very late calls but this situation continues to occur. Particularly at weekends.'*

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**Q18 Do you know how to make a complaint or compliment regarding services you receive**



80% of people said they did know how to make a complaint about the services they received although many appeared to have reservations as to how effective it was.

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*‘When I made a complaint this was followed by an interview with the manager. This enabled me to explain fully what had happened. It also gave an opportunity to compliment about other staff I felt deserved it.’*

*‘We made complaints to the office but got nowhere, so then we went to social services. Things did then improve, but we are starting to go backwards again.’*

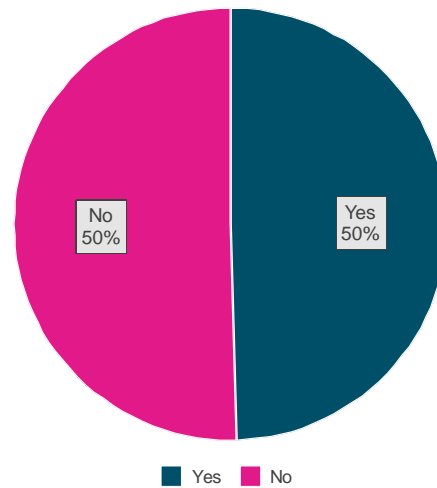
*‘If it hadn’t been for my carer I wouldn’t be here now. Some time later I contacted her employers, to tell them how brilliantly she had behaved. I felt it was received with complete indifference and was never mentioned again!!’*

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We would recommend that details on how to raise a concern, or give a compliment, should be included in the service users care plan, together with details of independent organisations, such as Healthwatch Halton, who can offer support if required.

We understand that sometimes, when a service user is in hospital for an extended period of time, the care plan may need reviewing or updating when they leave hospital. We asked Q19 to gain an idea of how many people receiving domiciliary care may need their care plan reassessed during a year.

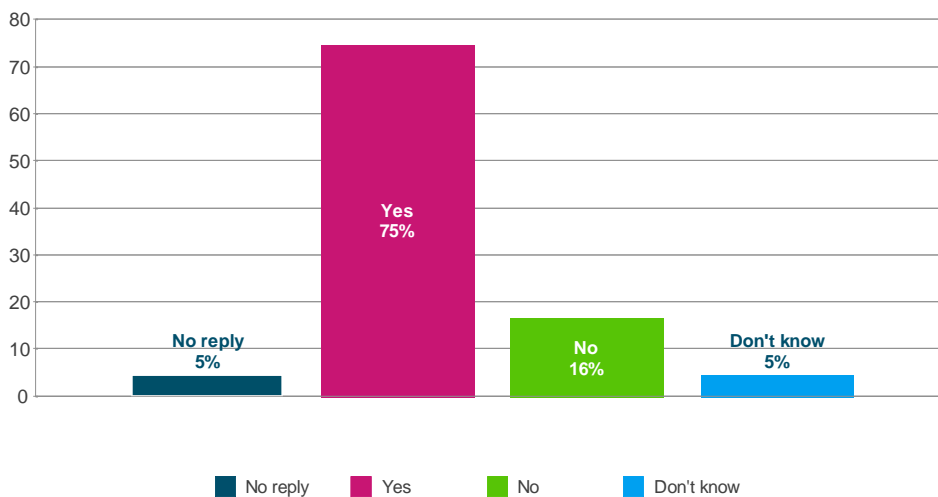
**Q19. Have you been in hospital during the past year?**



Interestingly for Q19 we had a 50/50 split on those who had been in Hospital in the previous 12 months.

We asked those who'd been in hospital if they had been provided with a care package upon discharge. 75% said they had been given a care package.

**Q19b If yes, were you provided with a 'care package' when you were discharged?**




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*'With regards to question 19b, I wasn't provided with a 'care package' by the hospital. I received a limited care package done by a social worker who I feel is a box ticker.'*

*'I was provided with a care package but not completely up to date.'*

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Q20. How long did you receive care/support at home after discharge?	
Over 8 weeks	65%
2 weeks	17%
4 weeks	10%
6 weeks	8%

Q21. If over 6-8 weeks were you given an option to access Direct payments	
Yes	34%
No	66%

As can be seen from the results of Q21, only 34% of people said they were offered an option to access Direct Payments.

With the implementation of the Care Act, there is now a duty upon councils to produce a care and support plan and offer a personal budget following an assessment to ensure that disabled people and carers' needs are adequately met. For the first time in law, local authorities have a legal obligation to offer personal budgets and carry out care and support planning, which were previously stated only in guidance as part of the Personalization agenda.

We would like to see more information on Direct Payments given upon discharge from hospital. Not everyone wants or needs to be an employer, however they should be given the choice and information to make that decision themselves.

## Q22. Any other comments?

Our survey was not aiming to single out any care provider for praise or criticism. We wanted to see the wider picture of domiciliary care across Halton. What comes across from the comments we have received is that all care providers generally gave good care, which is appreciated by service users, but the levels of care aren't always consistent.

We've highlighted a selection of the comments received in the survey below.

### Staff

- Main carer is exceptionally good.
- I have no complaints against any of the carers. I think they do a wonderful job. They work unsocial hours with low pay but they are always cheery and helpful.
- The carers are mostly very good. However, we had a few incidents with catheter (overnight) valves being left open and causing damage to carpet.
- Most of the carers are very young and can't wait to go.
- Some carers are excellent. The level of professionalism varies.

- The carers who visit me are politely friendly and helpful. I feel they work very hard.

### Care plans

- We are still waiting for them to deliver a care plan that the carers can actually follow. New carers are left with no alternative but to ask my mum what they should do etc. This is absurd as she has dementia!!

### Continuity of staff and visiting times

- My mum is 100 years old and the family feel she should have regular carers who she feels confident with.
- There are lots of new faces, it would appear that retention of staff is a problem, however, the long serving staff are excellent and show great caring skills.
- I would prefer the same carers. I get exacerbated at times because I have to keep telling new carers what care my partner needs even down to explaining the mechanics of the hoist.
- Regardless of asking both mealtime visits to be flagged as important - as it is the only time mum eats. 12 hours between 5pm visit and brunch time meal at 11am.
- We are not happy with the standard of service provided in regards to the continuity of staff, they are changed regularly which means routine is not maintained.
- I get really stressed about the timings for dad's visits. I cannot go to work unless I know they have arrived, as dad is anxious. It concerns me, I have thought about cancelling service as poor.
- I've tried to change my mum's teatime slot, many times, 3.30pm is not teatime. I've received no satisfaction ever. We will have to wait for a slot to come empty, my mums care package has been running more than 12 months. No joy, carers coming far too early, then leaving a.s.a.p.
- The problems that occur are in the organisation of the care timings and failure to inform me when carers will be late.
- There is no continuity of care. Carers are not given enough time to travel between appointments so are often late.
- Carers have been arriving after 10.00am which is too late.
- As I am filling this in I am waiting for my dinner call. The time is 17.05, I have had no phone call or any explanation of what is happening i.e. Are they still to arrive & who. This is not a uncommon occurrence yet you will be sure they will charge for it if not told. Last call breakfast 9.30am, 8 hours from breakfast to next call. P.S. I mean lunch call not the teatime call which is 17.30 plus.

### Complaints

- I have given compliments to person concerned and to the agency. I have also complained to agencies, sometimes with some agencies you feel they don't listen

or don't want to. I think a last resort is to complain to social services, but sometimes I have felt helpless. But there are good agencies as well.

- I have had cause to complain but my concerns are dealt with professionally.
- When I phoned and complained about carers not turning up and family have had to come home from work to sort it out, you never get any feedback. Why?
- I have complained to the council office regarding late arrivals which has been invoiced and paid by direct debit. Up to date issue has not been resolved and no refund of payment received.
- Sometimes they make all the right noises, promises etc. but not sincere.
- Numerous complaints made. Often my wishes ignored. On one occasion left with no care for weekend after refusing to have a member of staff who screamed and shouted at me.

Finally, we understand that Halton Borough Council are currently carrying out a review of the provision of domiciliary care services across the borough. We hope that during this review the local authority places service user experience firmly at the centre of its plans.

11<sup>th</sup> November 2016

Healthwatch Halton has statutory powers and responsibilities under the Health and Social Care Act 2012, the Local Healthwatch Regulation 2012 and the Local Healthwatch Organisations Directions 2013 section 5.

Providers and commissioners of health and social care services are required to respond to our requests within 20 working days by:

- Acknowledgement of receipt of the report or recommendation in writing;
- Providing (in writing) an explanation of any action you intend to take in response, or if no action is to be taken, to provide an explanation of why you do not intend to take any action.

Healthwatch Halton are required to report if any providers/commissioners have not provided a response within the required timeframe; this information will be included in our Annual Report.

### **Local Authority Response**

We received the following response to this report from Halton Borough Council's Director of Adult Social Services, Susan Wallace-Bonner.

*'We very much welcome the report from Healthwatch Halton on Domiciliary Care within Halton. The provision of high quality, effective Domiciliary Care services to our local community is a key priority for us and we were very pleased to see the many positive comments highlighted within the report.'*

*However we also acknowledge that there are areas for improvement, identified within the report, which Halton Borough Council, working with our partners and local providers, will be addressing over the coming months. Our aim is to ensure that we provide excellent Domiciliary Care Services within the Borough that not only support people's physical health but will also support people's emotional wellbeing and mental health and lead to improved quality of life.'*

# Appendices

## 1. Domiciliary Care Survey covering leaflet

**6** **healthwatch**  
Halton

### Review of Home Care Services

Healthwatch Halton want you to have your say about your experiences of home care services in Halton. We will listen to your views and make recommendations for change; the council has agreed to take account of what we find out.

Healthwatch is an independent organisation; we give people a stronger voice to influence health and social care. Talking to Healthwatch will help us see where home care services in Halton are doing well, and also highlight what needs to be improved.

**All the information you share with us will be treated with the strictest confidence and made anonymous.**

Healthwatch Halton, St Marie's Lugsdale Road, Widnes, Cheshire WA8 6DB  
Tel: 0300 777 6543  
Email: [enquiries@healthwatchhalton.co.uk](mailto:enquiries@healthwatchhalton.co.uk)

**6** **healthwatch**  
Halton

### Why am I being asked to take part in the review?

- You have been asked to take part because you get home care services from a provider approved by Halton Borough Council. Taking part is voluntary and you can tell us as much or as little as you choose.
- No personal information will be shared. Healthwatch will write a report and we may use anonymous quotes from what people say about their experience.
- Your feedback will not be shared with your home care provider and will not affect the service you receive.

This review will influence changes that we hope will improve services for all service users in the future, but you may not see any immediate change to your service.

We want to make it as easy as possible to take part; you can complete the survey and put it back in the **FREEPOST** envelope provided, or contact Healthwatch on **0300 777 6543** if you prefer to give feedback over the phone or face to face.

Healthwatch Halton  
Freepost RTKC-YEJX-UEXR  
St Marie's  
Lugsdale Road  
Widnes  
Cheshire WA8 6DB

Healthwatch Halton, St Marie's Lugsdale Road, Widnes, Cheshire WA8 6DB  
Tel: 0300 777 6543  
Email: [enquiries@healthwatchhalton.co.uk](mailto:enquiries@healthwatchhalton.co.uk)

## 2. Domiciliary Care Survey

### Care/Support at Home Survey

We would like you to help us by taking a few minutes to give us your views about the home care services you receive.

**This is an anonymous survey and whether you do or do not answer the questions will not affect the services you personally receive.**

By home care services we mean services you receive in your home that are provided by paid workers, not help that you might receive from family members or friends. A home care worker should help you take care of yourself by helping with, for example, bathing, dressing, using the toilet, preparing and eating meals, taking medicines and getting in to and out of bed, shopping, gardening or leisure activities. This could be physical help or simply a prompt or reminder to do things yourself.

**Q1 Do you or a member of your family/or friend receive care/support from a Care Agency?**

Yes, I/They receive care/support from a Care Agency .....   
No .....

**Q2 How is the care you receive at home funded?**

Personal Budget / Direct Payments .....  Self Funding .....   
Other (if other please provide details below) .  Don't know.....

**Q3 Were you aware that you have a personal budget?**

Yes .....   
No .....

**Q4 When you were assessed for your care needs were you offered independent advice/advice from an independent source?**

Yes .....  No .....   
Don't know / Can't remember .....   
If 'Yes' where did you go for independent advice?

**Q5 Who provides your home care/support service?**



**Q6 Please indicate any of the care services listed below which you receive from your home care provider. (Please tick all the services you receive)**

- |                           |                          |                                 |                          |
|---------------------------|--------------------------|---------------------------------|--------------------------|
| Washing.....              | <input type="checkbox"/> | Sitting Service .....           | <input type="checkbox"/> |
| Showering or Bathing..... | <input type="checkbox"/> | Taking Medicines .....          | <input type="checkbox"/> |
| Shopping.....             | <input type="checkbox"/> | Dressing.....                   | <input type="checkbox"/> |
| Meals .....               | <input type="checkbox"/> | Getting up / Going to bed ..... | <input type="checkbox"/> |
| Other .....               | <input type="checkbox"/> |                                 |                          |

Other (please specify)

**Q7 How often do you receive support from your home care provider?**

- |                               |                          |                     |                          |
|-------------------------------|--------------------------|---------------------|--------------------------|
| Daily.....                    | <input type="checkbox"/> | 2 times daily ..... | <input type="checkbox"/> |
| 3 times daily .....           | <input type="checkbox"/> | 4 times daily ..... | <input type="checkbox"/> |
| More than 4 times daily ..... | <input type="checkbox"/> |                     |                          |

**Q8 How long does the care worker stay at each visit?**

- |                       |                          |                            |                          |
|-----------------------|--------------------------|----------------------------|--------------------------|
| Up to 15 minutes..... | <input type="checkbox"/> | 15-30 minutes.....         | <input type="checkbox"/> |
| 30-45 minutes.....    | <input type="checkbox"/> | 45 minutes to 1 hour ..... | <input type="checkbox"/> |
| More than 1 hour..... | <input type="checkbox"/> |                            |                          |

	Yes	No	Don't know
Is this the time allocated on the care-plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q9 Did you decide what help you need from your care worker?**

- |           |                          |         |                          |
|-----------|--------------------------|---------|--------------------------|
| Yes ..... | <input type="checkbox"/> | No..... | <input type="checkbox"/> |
|-----------|--------------------------|---------|--------------------------|

If no, why not?

**Q10 Were you given support to say what help you needed from your care worker?**

- |                                   |                          |         |                          |
|-----------------------------------|--------------------------|---------|--------------------------|
| Yes .....                         | <input type="checkbox"/> | No..... | <input type="checkbox"/> |
| Don't know / Can't remember ..... | <input type="checkbox"/> |         |                          |

**Q11 Is your care worker usually someone you have met before?**

- |                 |                          |         |                          |
|-----------------|--------------------------|---------|--------------------------|
| Yes .....       | <input type="checkbox"/> | No..... | <input type="checkbox"/> |
| Not always..... | <input type="checkbox"/> |         |                          |

If no / not always, why not?

**Q12 Are you and your carer/family always kept informed of any changes to your care workers times, routines etc?**

Yes .....  No .....   
Not always.....

If yes, what notice are you given of any changes to your home care provider?

**Q13 Do carers always wear a uniform and carry an identification card / badge?**

Yes .....  No .....   
Not always.....

If no, why not?

**Q14 Does your care worker always treat you with dignity and respect?**

Yes .....  No .....   
Not always.....

If no / not always, please give examples of where they have not?

**Q15 Do you feel that your care worker is allocated enough time with you in order to complete all of the tasks required?**

Yes .....  No .....   
Not always.....

If no / not always, why not?

**Q16 Are you satisfied with the standard of care you receive from your home care provider?**

Yes .....  No .....   
Not always.....

If no / not always, why not?

**Q17 Do you feel that you and your carer/family are listened to if you have an issue or concern with your care?**

Yes .....  No .....   
Not always.....

If no / not always, why not?

**Q18 Do you know how to make a complaint or compliment regarding services you receive from care workers?**

Yes .....  No.....

If you have made a complaint or given a compliment, please tell us what happened

**Q19 Have you been in hospital during the past year?**

Yes .....  No.....

**Q19b If yes, were you provided with a 'care package' when you were discharged?**

Yes .....  No.....

Don't know.....

**Q20 How long did you receive care/support at home after discharge?**

2 weeks

4 weeks

6 weeks

Over 8 weeks

**Q21 If over 6-8 weeks were you given an option to access Direct Payments?**

Yes .....  No.....

**Q22 Is there anything else you would like to tell us about any aspect of the home care service you receive?**

If you would like support in filling out this form, or if you'd like to discuss any of your comments further, please contact Healthwatch Halton on 0300 777 6543 or email [enquiries@healthwatchhalton.co.uk](mailto:enquiries@healthwatchhalton.co.uk)

## Diversity information

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**Q23** What is your age?

- |               |                          |               |                          |
|---------------|--------------------------|---------------|--------------------------|
| 16 to 24..... | <input type="checkbox"/> | 65 to 75..... | <input type="checkbox"/> |
| 25 to 44..... | <input type="checkbox"/> | 76 to 85..... | <input type="checkbox"/> |
| 45 to 64..... | <input type="checkbox"/> | Over 85 ..... | <input type="checkbox"/> |

**Q24** What is your ethnic origin?

**Q25** What is your gender?

- |                   |                          |                         |                          |
|-------------------|--------------------------|-------------------------|--------------------------|
| Male .....        | <input type="checkbox"/> | Female .....            | <input type="checkbox"/> |
| Transgender ..... | <input type="checkbox"/> | Prefer not to say ..... | <input type="checkbox"/> |

**Q26** What are the 1st 4 digits of your post code?

**Q27** Do you consider yourself to have a disability sensory impairment or long term illness?

- |                         |                          |         |                          |
|-------------------------|--------------------------|---------|--------------------------|
| Yes .....               | <input type="checkbox"/> | No..... | <input type="checkbox"/> |
| Prefer not to say ..... | <input type="checkbox"/> |         |                          |

**Q28** If you have any comments you'd like to make, please record them in the space below:

Thank you for taking the time to complete this questionnaire.



St. Marie's, Lugsdale Road, Widnes, WA8 6DB  
Tel: 0300 777 6543  
Email: [enquiries@healthwatchhalton.co.uk](mailto:enquiries@healthwatchhalton.co.uk)



# your **voice** counts

**We want to hear about the treatment and care you receive from our local health and care services**

Hospitals, GP's, Dentists  
Opticians, Social Care  
Non-emergency services

Whether you've had a positive experience or there is room for improvement, have your say on the Healthwatch Halton website today.

**You can even leave feedback anonymously**



Leave feedback now:  
**[www.healthwatchhalton.co.uk](http://www.healthwatchhalton.co.uk)**

Telephone: 0300 777 6543 Email: [enquiries@healthwatchhalton.co.uk](mailto:enquiries@healthwatchhalton.co.uk)  
Healthwatch Halton, St Maries, Lugsdale Road, Widnes, WA8 6DB

