

**Care at Home**  
**Domiciliary care services from the**  
**patient's point of view**



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# Introduction

Whether it's improving local health and social care services today or helping to shape them for tomorrow, Healthwatch makes sure that local voices influence local services. Not just for people who use them now, but for anyone who might need to in the future.

Healthwatch was created to gather and represent the views of the public. Healthwatch England works at a national level. Local Healthwatch gives citizens and communities a stronger voice to influence and challenge health and social care services in their area.

## Local Healthwatch also:

- represents the views and experiences of people who use services, carers and the public on the Health and Wellbeing Boards set up by local authorities
- provides information and signposting to people about local health and care services, how to access them and how to find their way around the system
- reports concerns about the quality of health and social care services to Healthwatch England, which can then recommend action to the Care Quality Commission.

Every voice counts when it comes to shaping health and social care today or tomorrow. Everything that local Healthwatch does brings the voice and influence of local people to the development and delivery of local services.

People need to feel that Healthwatch belongs to them, reflects them and their community and acts on their behalf. Healthwatch must feel approachable, practical and dynamic.

Healthwatch is accountable to local people, and its work reflects the evidence they gather from local people. Healthwatch is independent from the NHS and local authorities, their priorities and

their messages. We set out own priorities and say what we believe needs to be said.

Since 2013 when we were set up, Healthwatch Hampshire has heard a great deal about people's experiences of care at home services (domiciliary care). Much of this feedback has come from the relatives who care for members of their family in alongside paid-for domiciliary care "packages".


With care at home services to support and care for people in their own homes, they can live independently as long as possible. The population of Hampshire is 1.32 million which has increased by 6.3% since 2001. The percentage of the population which is aged 65 and over has increased by 21% between 2001 and 2011 (Hampshire County Council, 2015). The largest population growth is expected to be people aged 75 and over. This population is forecast to increase by a quarter (25%) over the next 5 years, with 33,000 more people over the age of 75 predicted by 2021.

Hampshire County Council runs social care services throughout the county including residential homes, day centres, community mental health teams and care at home services. They are contacted approximately 95,000 times a year by people asking for advice, information and support on care services. In 2012-2013, Hampshire County Council provided 24,000 adults with long-term social care services (Hampshire County Council, 2015a).



Services that Hampshire County Council offer (via approved providers of care at home





services) are companions, domestic help, gardening, live-in help, meals, night care, nursing care, personal care, shopping, sitting service and transport. In addition to this the care services can be tailored to: dementia, mental health conditions, learning disabilities, old age, physical disabilities, sensory impairments, past or present alcohol dependence, drug dependence and families with children (Hampshire County Council website, 2015).

Healthwatch Hampshire wanted to know more about the experiences of the people who receive these services. We wanted to use these experiences to influence decisions about the services that the County Council commissions in the future, and to influence the organisations that provide care services to do everything they can to meet the needs of people they care for at home.

Healthwatch worked with Hampshire County Council to get a survey to everyone in Hampshire who has care

services at home. Approximately 6,000 surveys were sent out by post, and the survey could also be completed on the Healthwatch website.

*This report gives the findings from the survey and makes recommendations for improving services.*



# Summary

Survey open for six weeks  
(closed 16th December 2016)

887  
responses  
collected

63%  
respondents  
were female



35%  
respondents  
were male



86%  
respondents  
considered  
themselves  
to have a  
disability



From these responses, key  
themes were highlighted...

60% respondents were over 75  
35% respondents were over 85

85%

Analysing data....

## What we heard:

Over 80% were satisfied or very satisfied of the quality of care received

The main concerns are turnover of carers, and timing of visits (both appropriateness and consistency).

Almost half of respondents receive extra support from friends, family or neighbours. 70% of these receive no respite care to give their carers a break; only 2% felt that adequate respite was provided for their informal carers.

52% of respondents are not aware of the advice and information service offered by Hampshire County Council.

70% of respondents did not feel adequately involved in the selection of their care provider.

Around half said that they accepted their arrangements, rather than agreed to them, because of a lack of alternatives.



# Recommendations

These recommendations are based on the views of service users, carers, stakeholder organisations and professionals. They are based on the findings from the survey, conversations with Hampshire County Council and with care providers. The recommendations are summarised below and included in full, with supporting information, on page 37

- Be honest with people who need services about the pressures on health and care services.
- Require staff to give consistent clear communications with service users about who will be providing their care and when.
- Tell service users of changes to carers or timing of their visits.
- Respond quickly to complaints and requests for information - if necessary, a quick acknowledgement with a deadline for a proper reply.
- Consistency of carers is particularly important to some service users (often those with dementia). Providers should identify and prioritise a consistent service to these, to avoid unnecessary anxiety.
- Advertise Hampshire County Council's information and advice service more widely so that more people know about it and use it.
- Involve service users more at in the care assessment so that they are fully informed of the options available and feel involved in choosing the care package including how much, and from which provider.

Advertise carers' assessments more widely, so that informal carers get the support they are entitled to including information, advice, emotional support and respite care.

## Context

With an increasingly ageing population, more people will need to be assessed to identify whether they are eligible to receive domiciliary care services.

In April 2015, Hampshire County Council made changes to the way care at home services are managed for people who meet the council's eligibility criteria (for provision of care at home support) and choose to have their care services arranged by the council. The changes were made because of the Care Act 2014. This Act states what people should be able to get and what councils must do. The local council must have services to meet different people's needs, stop any potential problems to services before they start, have good information to help people choose the right care and support for them, ensure that there are different care and support services in the area and understand the care and support that people need (in other words, they must make an assessment) and how the individual will pay for their care and support.) The Act requires the council to understand what is important to individual and to ensure that the right care and support is delivered. The Council therefore decided to cut the number of different organisations which is contracts to provide care down to 20 which will allow them to better monitor the care they provide and help understand the challenges the care providers face. (Hampshire County Council, 2015).

Many home care providers we spoke to say one of their biggest problems is recruitment and retention of carers.





The Centre for Workforce Intelligence estimates at least two million more carers will be needed by 2025 in England alone to cope with growing demand, in in-home care and care homes. In October 2016, the regulator for England, the Care Quality Commission, warned that adult social care was at a tipping point. The nationwide shortage of carers was stranding many elderly people in hospital, unable to leave. Government figures show there are more than 6,500 people across Britain stuck in an acute hospital bed, despite being well enough to leave. In England, a third of these are waiting for a home care package.

[www.bbc.co.uk/news/uk-39321579](http://www.bbc.co.uk/news/uk-39321579)

## What should people expect of a good home care service?

The National Institute for Health and Care Excellence (NICE) provides national guidance and advice to improve health and social care. Their good practice guidelines say that in a good home care service:

- The care you get should reflect what you want and what you have agreed with the agency.
- The care should take into account what you feel you can do and what you want to be able to do.
- You should feel comfortable around your care workers. They should get to know you and be familiar with your needs including how you like to communicate and your likes and dislikes.
- Your care worker should respect your cultural and religious values (regarding food, for example) and make sure that your needs are met.



- Your care workers should have the right skills to meet your needs. They should be able to support you, for example if you have dementia, are deaf, blind or deafblind, or need help coping with bereavement.
- Your care agency should let you know in advance if a different care worker is coming to visit you.
- You should have a care diary to keep in your home. Home care workers and others who help you at home (like community nurses and physiotherapists) should update it every time they visit.
- You should have a home care plan that describes the care the agency will be providing and is focused on the things that are important to you. If you have specific health problems or disabilities the plan should take these into account. The agency should review the plan with you within six weeks of your first care visit to make sure that you are happy with it. After that, the plan should be reviewed at least once a year. The home care plan should be clear, concise and include information about:



Your health, medicines and pain management.



Skin care and other support to help you stay well.



Keeping you safe.



What will happen if your home care worker is late, or unable to visit you.

Your local council should tell you how you can find information about the care services available in your area. They may suggest some other options, such as:

- Employing a live-in care worker.
- Employing a personal assistant.
- Using telecare.



## Methodology

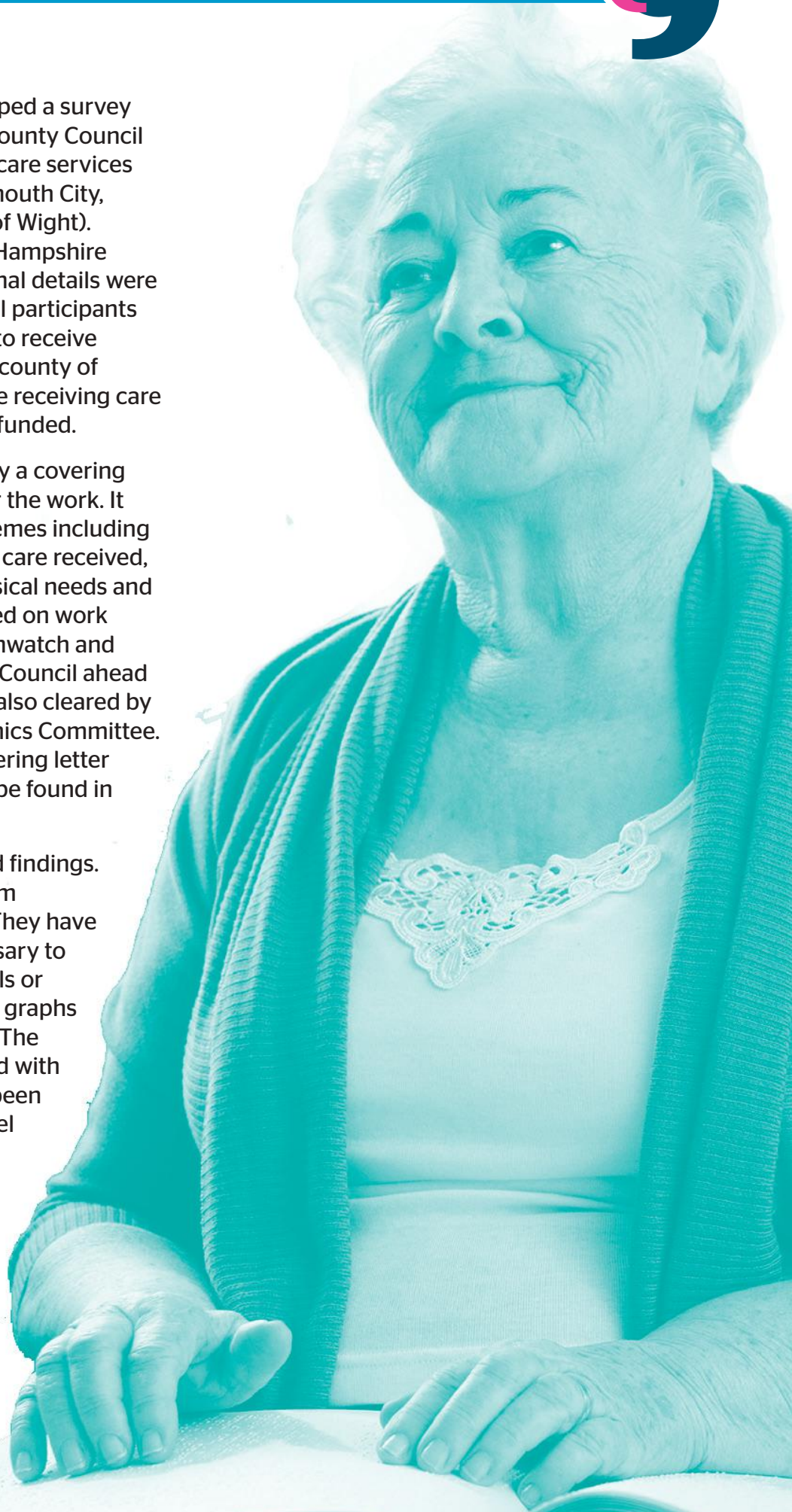
Healthwatch Hampshire developed a survey for distribution by Hampshire County Council to everyone in receipt of home care services in Hampshire (excluding Portsmouth City, Southampton City and the Isle of Wight). Participants were identified by Hampshire County Council and their personal details were not shared with Healthwatch. All participants were receiving or were eligible to receive domiciliary care services in the county of Hampshire. All participants were receiving care whether council-funded or self-funded.

The survey was accompanied by a covering letter explaining the reasons for the work. It asked about a wide range of themes including signposting, social interactions, care received, timings, psychological and physical needs and care plans. The survey was based on work carried out by other local Healthwatch and shared with Hampshire County Council ahead of distribution. The survey was also cleared by Hampshire County Council's Ethics Committee. A full version of the survey, covering letter and detailed methodology can be found in Appendix 1 and 2.

This report gives the results and findings. All quotes are taken directly from responses given in the survey. They have been anonymised where necessary to avoid identification of individuals or care providers. All figures in the graphs are those that gave a response. The number of responses is included with every graph. Some areas have been displayed at District Council level to provide further insight.

Throughout this report the following abbreviations are used for Hampshire County Council District areas:

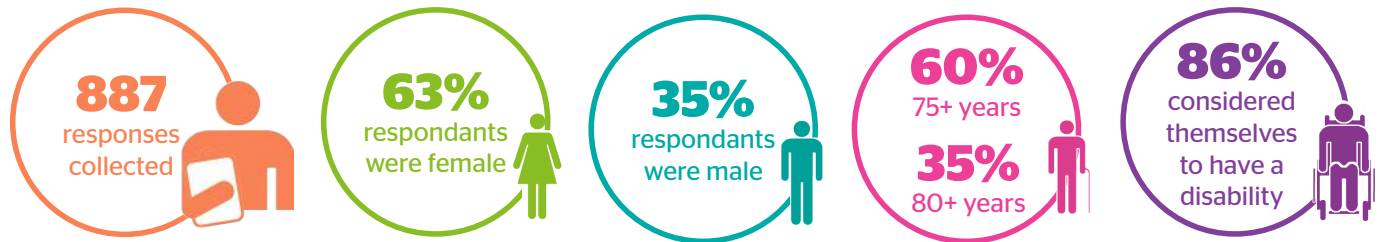
Bstoke = Basingstoke  
EH = East Hampshire  
NF = New Forest  
Soton = Southampton  
TV = Test Valley  
Winch = Winchester





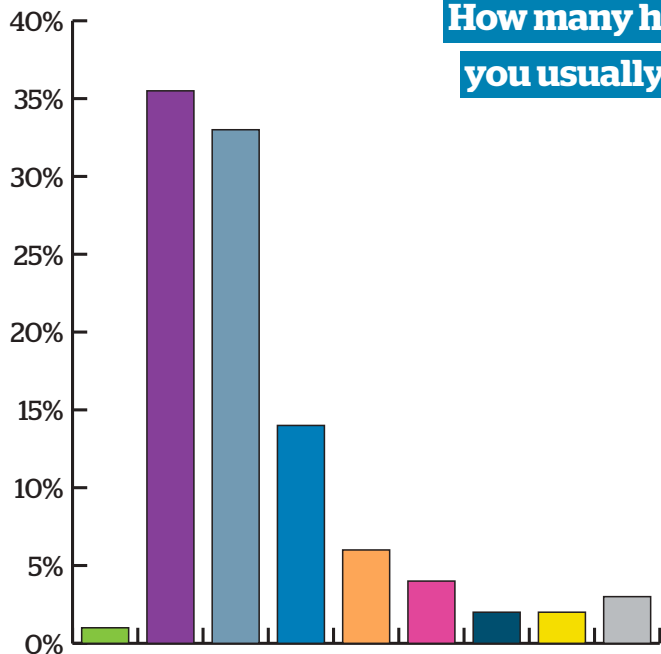
# FEEDBACK AND FINDINGS

## Context:



Although some people in receipt of full-time or live-in care responded, the largest majority of respondents received between one and ten hours of care per week.

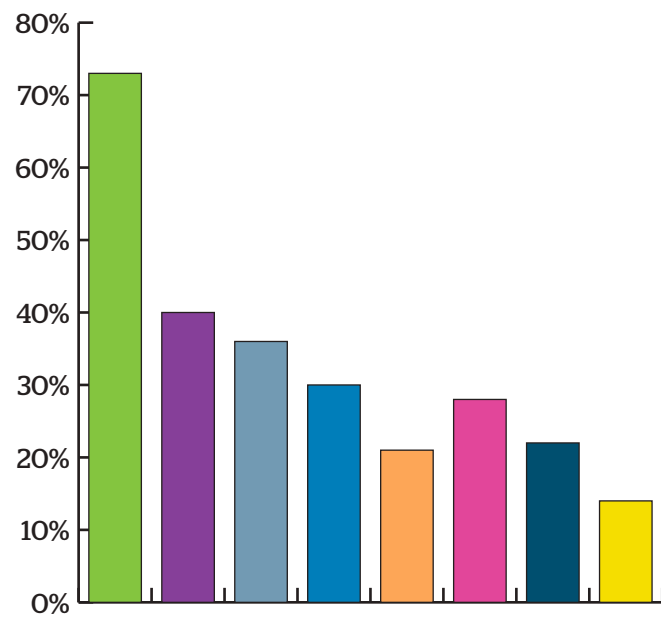
### How many hours of home care do you usually receive each week?



- Less than an hour
- 1-5 hours
- 6-10 hours
- 11-15 hours
- 16-20 hours
- 21-30 hours
- 31-40 hours
- 40+ hours
- Live in/Full-time care

831 responses

### What kind of home care services do you usually receive?

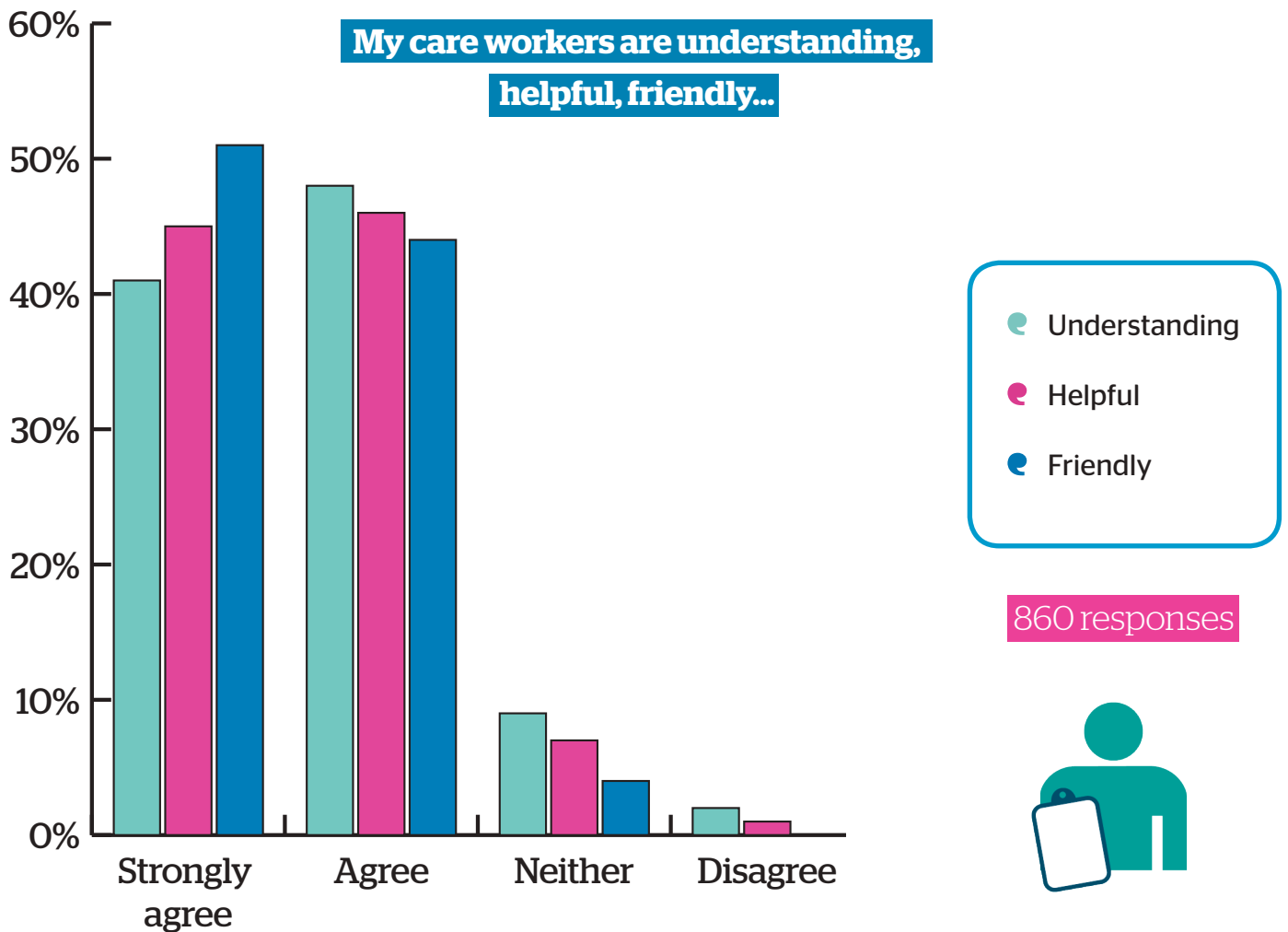


- Personal care
- Meals
- Medication
- Housework
- Bills etc
- Going out
- Correspondence
- Keeping in touch

848 responses

*Personal care was the most common form of support from carers. This would usually include assistance with dressing, feeding, washing and toileting.*

*'Understanding, helpful and friendly'*  
A positive outlook on home care services



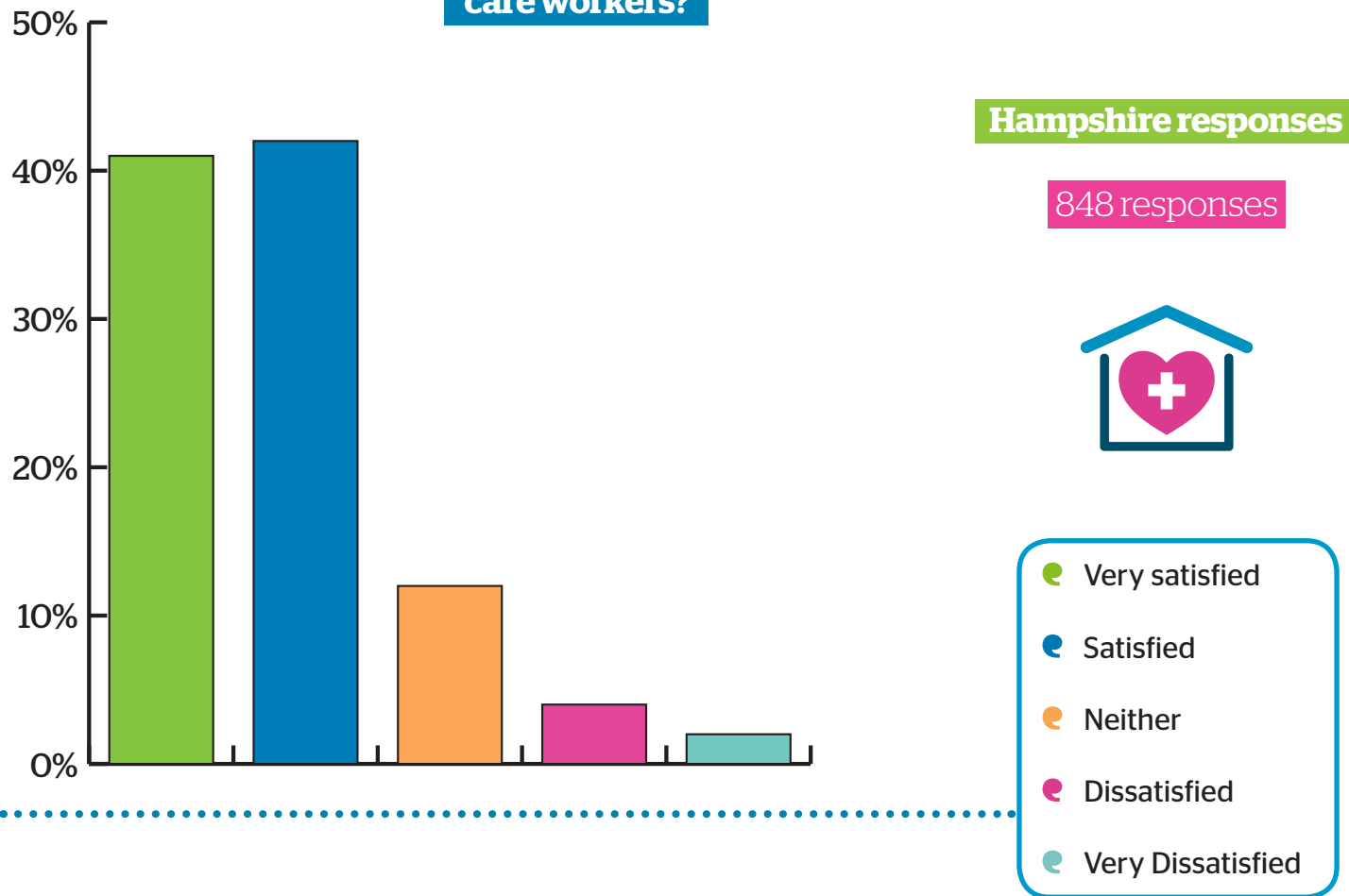
Overwhelmingly respondents reported that they felt their carers were understanding, helpful and friendly.

When people were asked how satisfied they were with the help from care workers, again the response was overwhelmingly positive with over **80%** of respondents answering either satisfied or very satisfied. When the results were split by District Council, the picture was much the same throughout the county, with a small increase in people who weren't satisfied in Hart and Rushmoor. East Hampshire, Havant and Gosport received the most positive responses with almost **90%** saying they were satisfied or very satisfied compared to closer to **70%** in Hart and Rushmoor.





## Overall, how satisfied are you with the help that you receive from your care workers?



The comments from some respondents confirmed this finding. Many people said that their carers were very helpful, caring and experienced:

- We are extremely lucky in that we have a very proficient and experienced carer. She takes only one day off every two weeks. She also does the three-hour sitting service. We are usually able to cancel the morning visit when the carer has a day off.*
- How can you change perfection? Anything I need e.g. a lift to the hospital. I just contact them and they help. So no change.*
- Extremely helpful and pleasant. Helps me to stay in my own home - very important.*
- My care worker is always willing to be flexible. She speaks Chinese, my native language, which is very helpful, and she understands my culture. She is kind and respectful, she is highly experienced and understands symptoms of dementia, which is critically important.*







**Some responses talked about positive experiences with their provider agency:**

- *(Provider) provide me with support to live my life as I please. They support me to live in my own home. My carer is the same one, and I like it that way!*
- *I trust my home care provider - office contract is efficient and concerns are dealt with promptly. I particularly like the fact that the carers are a small team so they can get to know my mother. We are notified weekly of any changes that may occur in care. Care workers are good with medication. We have a fairly regular team of about 6-8 names. The names are provided by post each week with time of visit. Fewer carers in the present company than in previous.*
- *I feel very privileged to have such good service which is a lifeline to me staying in my own home and keeping my independence, and given my family peace of mind.*

**Hampshire County Council staff were also recognised by some respondents as providing a very good service:**

- *I have been receiving wonderful care and this has been organized by a superb Hampshire County Council Care Manager, who has worked tirelessly to respect my wish to be in my own home. My family and I can never thank her enough. She is always there to support us and nothing is too much trouble. My live-in carer is wonderful.*



*'Talk to me!'*

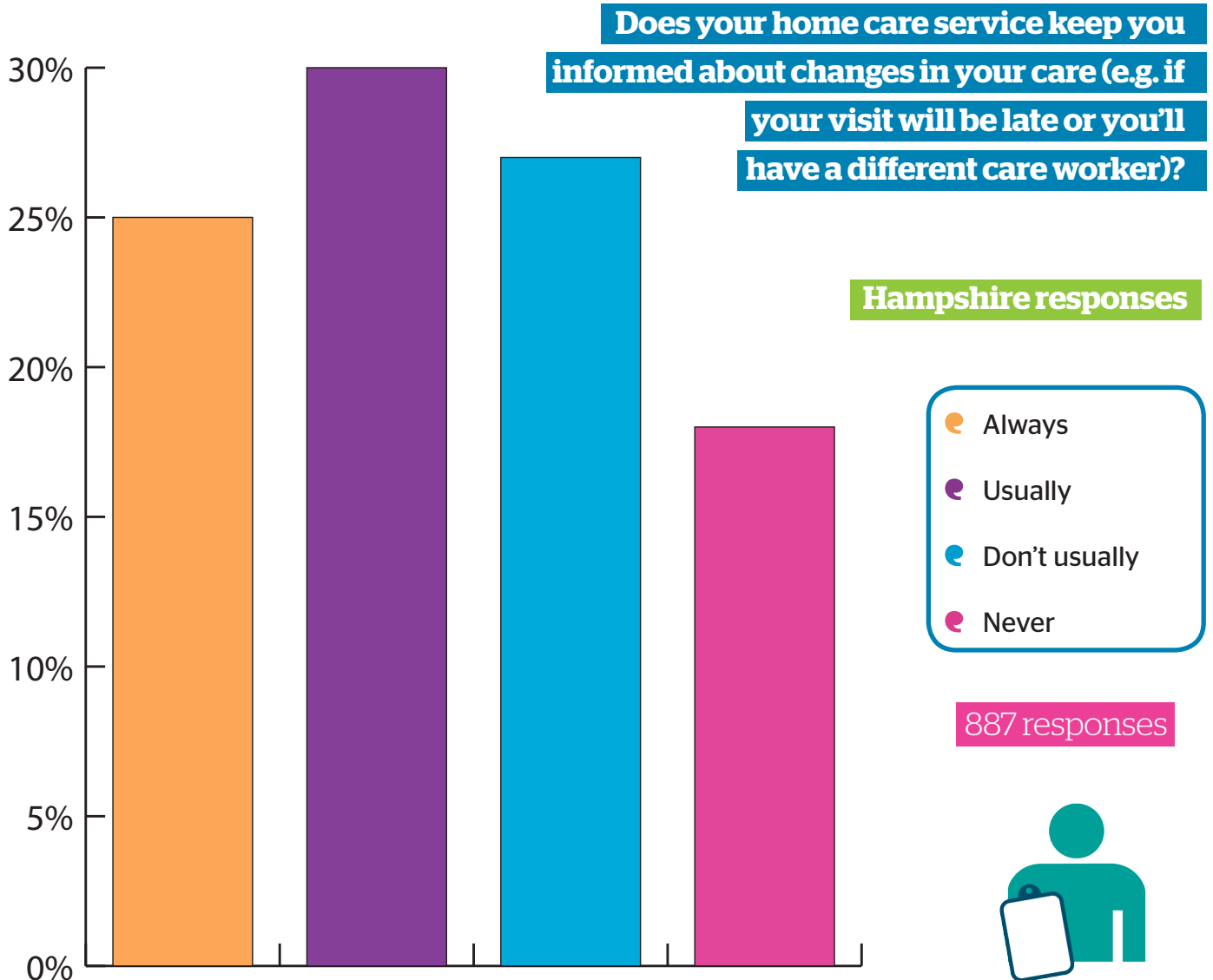
## Communication between service users and providers

NICE guidelines state that:

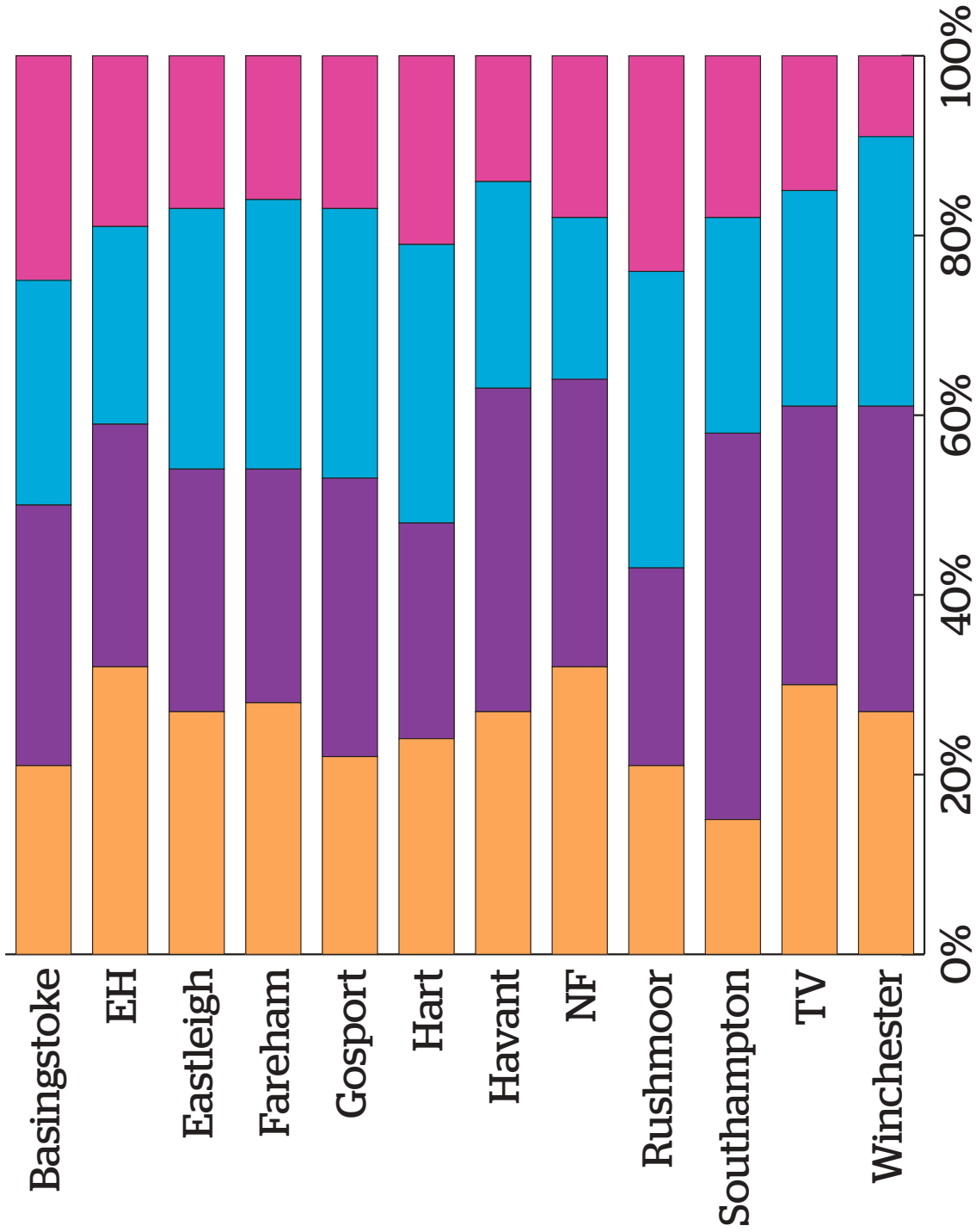
*'Your care agency should let you know in advance if a different care worker is coming to visit you... and your care plan should detail what will happen if your home care worker is late, or unable to visit.'*



The Healthwatch survey specifically asked about this, and found that around half of respondents were either usually or always informed about changes in their care. Over **15%** of respondents reported that they were never informed.



**Does your home care service keep you informed about changes in your care (e.g. if your visit will be late or you'll have a different care worker)?**




**Responses by district**

- Always
- Usually
- Don't usually
- Never

887 responses





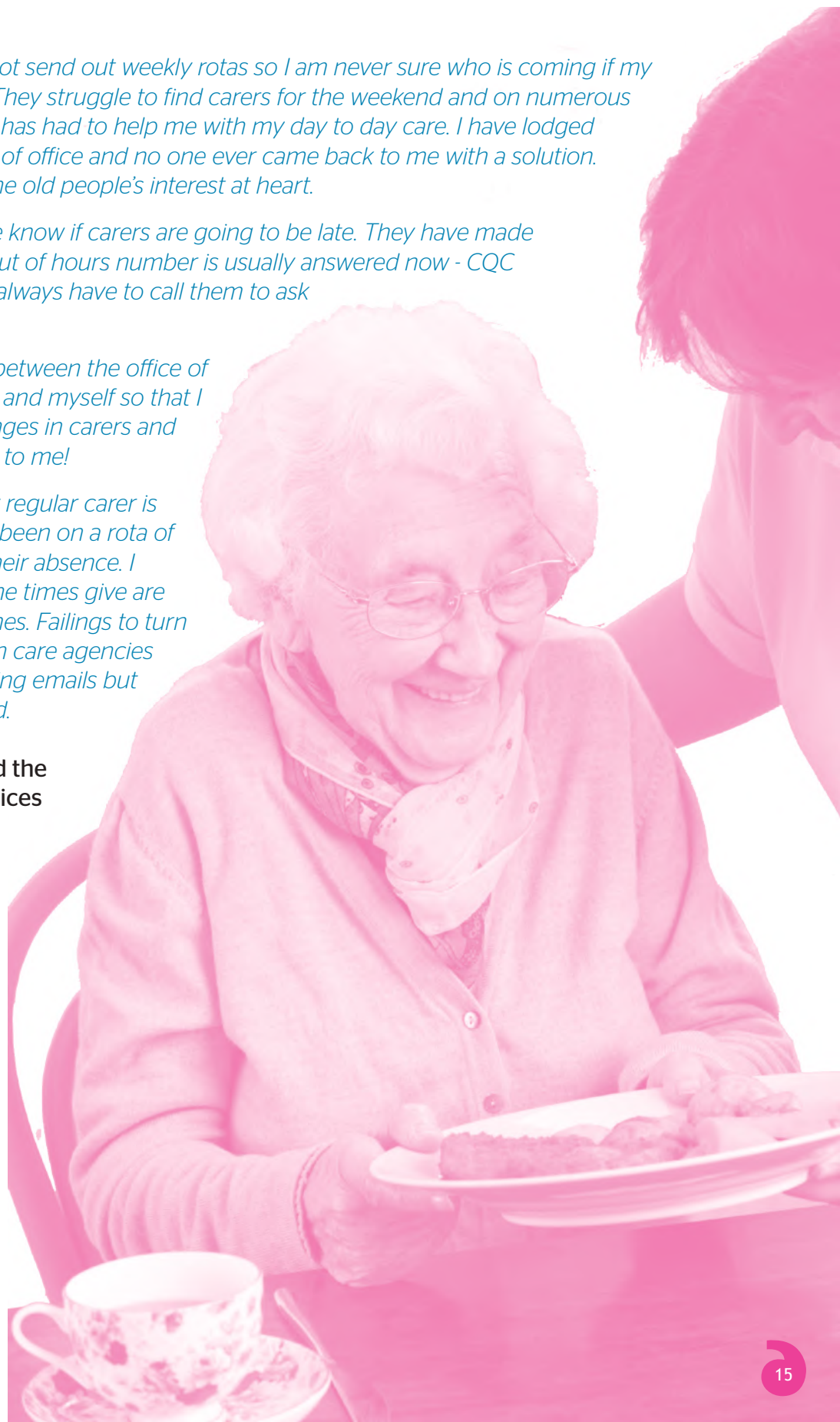


Again, some significant differences can be seen when looking at the results by District. In the New Forest **65%** of respondents said they were always or usually informed of changes to their care; in Rushmoor this dropped to **43%**. This can have a significant effect on someone who may have made plans, or suffer anxiety or stress when changes are made to their planned care arrangements. Several respondents commented on weekly rotas that inform people which carer they should expect and when. Some respondents clearly found this useful as long as they were notified of any changes.

- The care service does not send out weekly rotas so I am never sure who is coming if my usual carer is on leave. They struggle to find carers for the weekend and on numerous occasions my daughter has had to help me with my day to day care. I have lodged complaints to the Head of office and no one ever came back to me with a solution. They just do not have the old people's interest at heart.*
- Communication - let me know if carers are going to be late. They have made improvement and the out of hours number is usually answered now - CQC inspection is pending. I always have to call them to ask why carers are late.*
- Better communication between the office of the home care provider and myself so that I am made aware of changes in carers and their time of arrival. Talk to me!*
- In such cases where my regular carer is on holiday I have never been on a rota of when I shall expect in their absence. I usually have to telephone times given are never accurate sometimes. Failings to turn up. Communication with care agencies is bad. I have tried sending emails but they are never answered.*

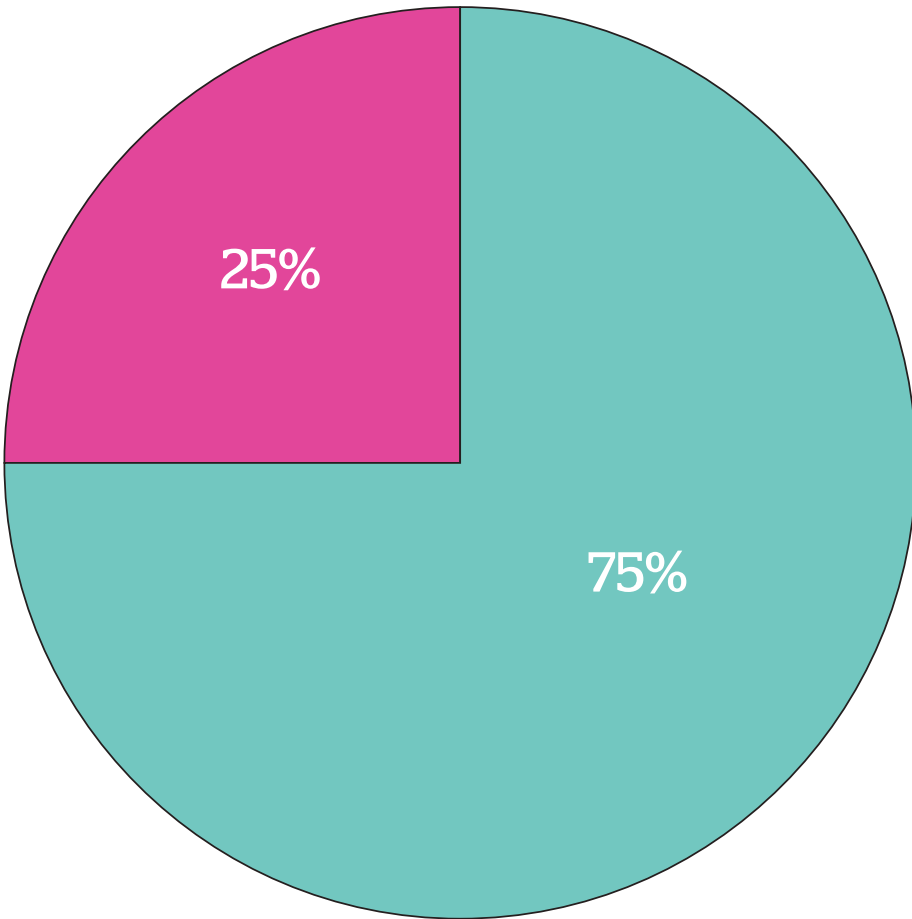
Both the provider of care and the commissioners of these services (Hampshire County Council) are required to monitor the provision and check that recipients of care are satisfied with the care they receive, or see if the care plan is meeting their needs. The majority of respondents recall this happening.

Some comments related to communication more generally, especially on communicating with providers regarding complaints.





**Does anyone contact you from either the care agency or adult services each year to check that you are satisfied with the care that you receive or to see if the care plan set up for you is meeting your needs?**



**Hampshire responses**

● Yes  
● No

**834 responses**



- *When you call the office with a complaint, nothing gets done. My bedtime call gets earlier and earlier.*
- *When you make a complaint, you never get any feedback.*
- *The agency's manager has been very aggressive when complaints were made. She has shouted at my wife on the phone. Her attitude was "put up and shut up". She considered the carers beyond reproach and would always doubt the client. The carers know this and have taken advantage, told lies and got away with it. Apologies were never offered.*

*'I wish that we knew more...'*

## Consistency of carers

It is widely recognized that consistency in the people delivering the home care can be an advantage. NICE guidelines state:

*'You should feel comfortable around your care workers. They should get to know you and be familiar with your needs including how you like to communicate and your likes and dislikes.'*

Some of the feedback indicates that people are not always receiving the consistency they should expect. This can result in confusion, particularly for people with memory problems or dementia. New carers need to be taught the needs of the individual.

- I wish that we knew more and had some consistency with carers and times they arrive. My mum has dementia and needs consistency - she gets fixed on a time and when they don't arrive at that time she calls us. No one from care company advises at any changes.*
- I never know who is coming into my home. Because one of my disabilities is mobility, I cannot show new carers around and I constantly ask for someone who has cared for me to join new carers so they know the procedure. This never happens so I have had to cancel or send for my daughter.*

Healthwatch Hampshire asked if people knew the names of their care workers in order to get a sense of how many people were coming into the homes of people without being known to them. This showed that well over **90%** of respondents knew all or some of their care workers by name. This shows good level of consistency. When viewed at District level, it remains clear that most people know at least some of their care workers by name. In three Districts - Basingstoke and Deane, Eastleigh and Fareham - **100%** of respondents say that they knew all or some of their carers by name.



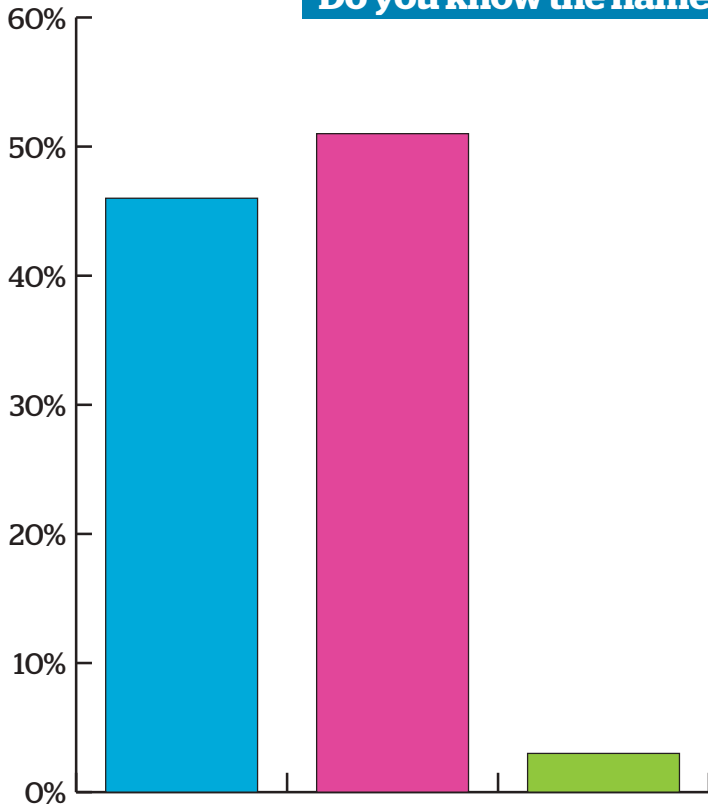




### Do you know the name of your care workers?

#### Hampshire responses

800 responses



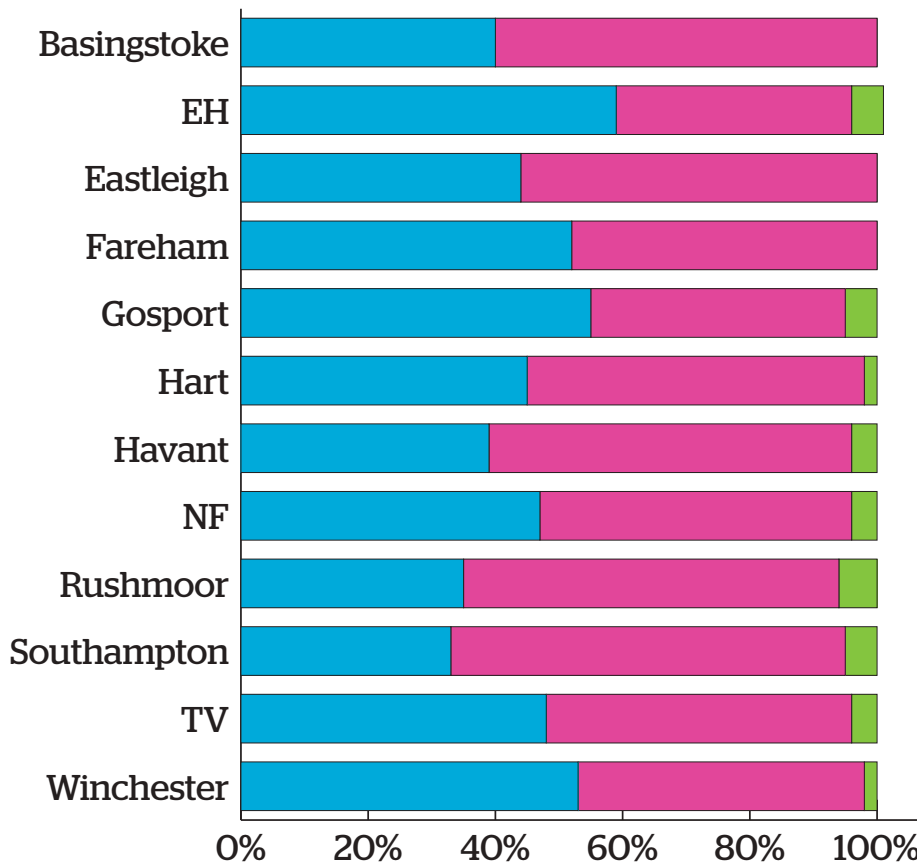
- All of them
- Some of them
- None of them



### Do you know the name of your care workers?

#### Responses by district

800 responses

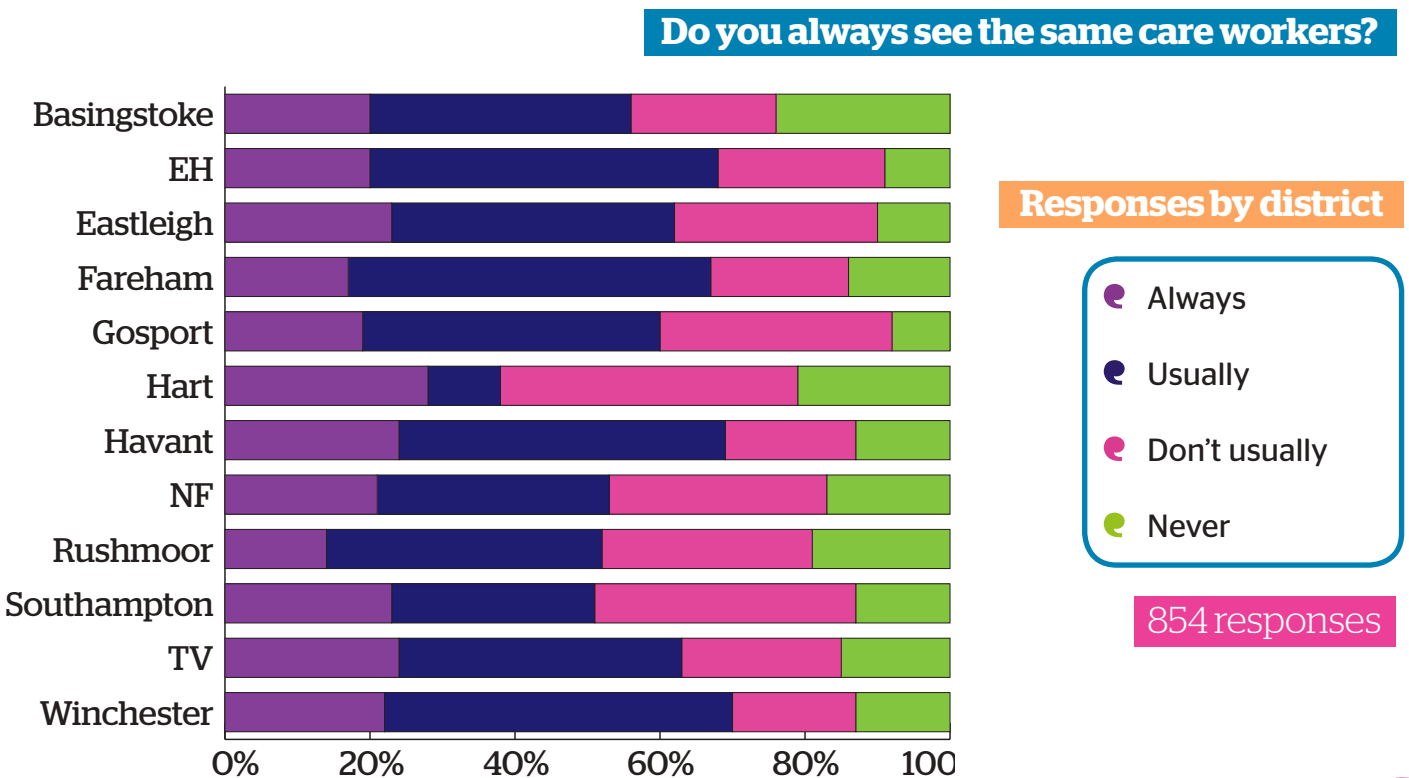
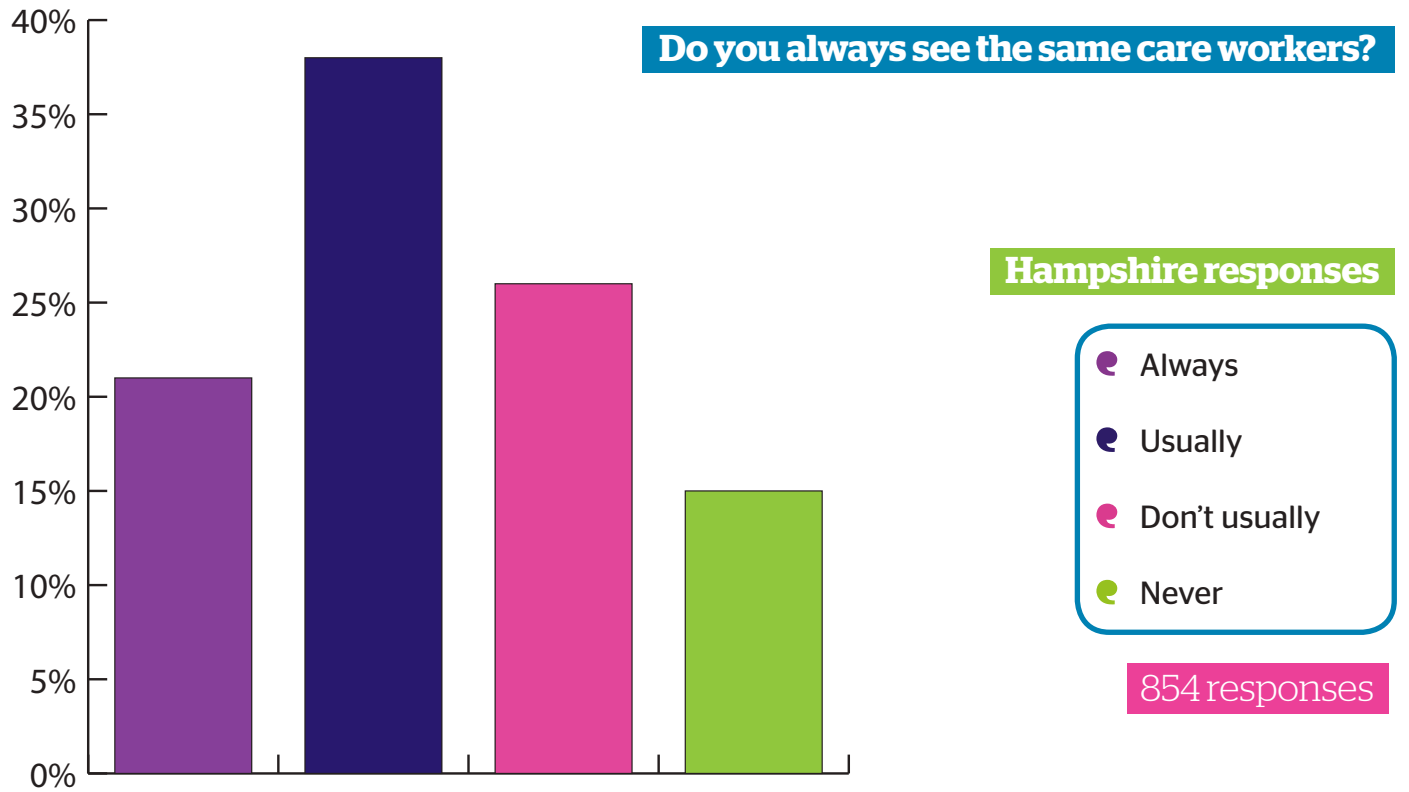


- All of them
- Some of them
- None of them





When asked if they always see the same care workers, the results show more cause for concern. Healthwatch recognise that having more than one carer means that the cared for person is less likely to become too dependent on their care worker. So it would not be expected that people would always see the same care worker; but some consistency would be expected to ensure that carers *'get to know you and be familiar with your needs including how you like to communicate and your likes and dislikes'* as stated in NICE good practice guidelines. Whilst it is positive that almost **60%** of respondents always or usually see the same carers, **26%** of respondents said that they don't usually see the same carers and **15%** said that they never see the same carers.





At a district level, there is a significant disparity. For example, a much higher proportion of respondents in Hart (**62%**) report that they don't usually or never see the same carers when compared to Winchester where only **30%** report the same. Numerous comments raised the issue of inconsistency of carers and the effect on their day to day lives.

- I need to have the same carer each day at approx. the same time. As it is I never know who is going to come and at what time. The times are too irregular and a different carer each day normally.*
- Recently I had a 10-day period with 10 different carers.*
- I have been in the care at home service for about 2.5 years. (provider) is my third provider and I have been with them since 29 June 2015. In that time, I have been visited by 102 different carers, most of them are excellent, some of them attend so regularly that they have become personal friends. My 86-year-old husband is my full-time carer supported by two carers from about 9am - 9.45am, 1pm to 1.30pm and 7pm to 7.30pm each day.*
- They (being the 6 or more different carers I get each week) all tend to care for me in their own way there's little continuity with bed changing, meal prep, and dressing and undressing locations, even though there's a folder with my care plan and notes left on the fridge etc. and they should have notes on their mobile phones. The general problem seems to be too many carers each week and automated individual care messages on their phones which don't get read properly.*



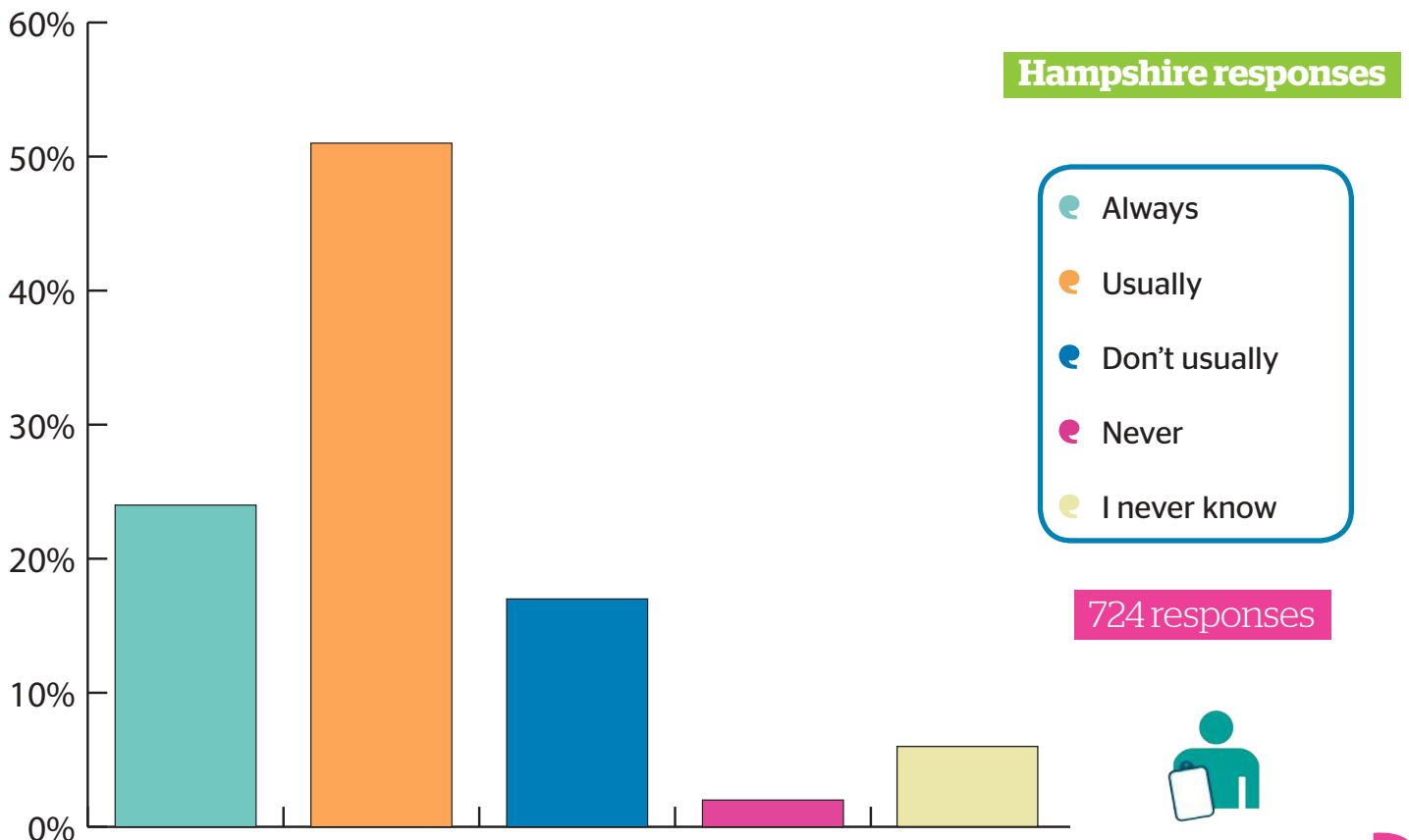


*'Carers all do their best, but...'*  
**Consistency in timings of care visits**

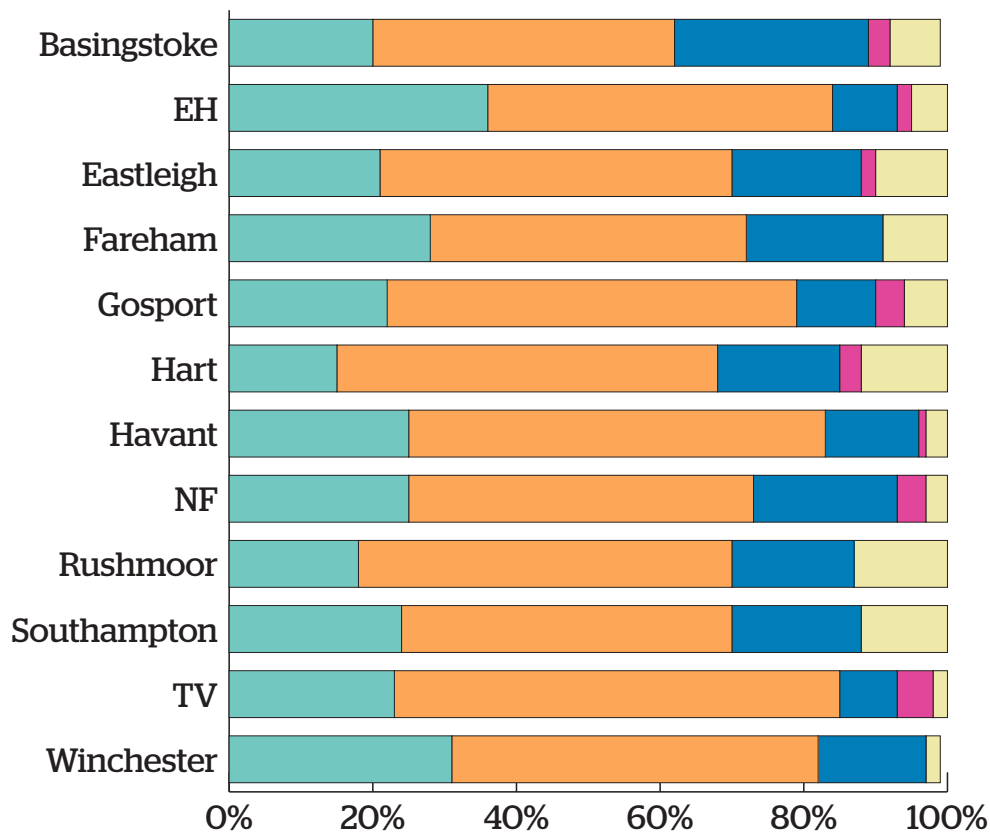
Of all the questions asked in this survey, the timings of visits prompted the most emotional responses. Respondents frequently commented on the effect of inconsistency in timing. Despite a more negative qualitative response, the quantitative data provides a positive picture. **75%** of respondents said that their carers always or usually came at the times agreed in their care plan. At District level, there are disparities. In Test Valley, for example, this figure rose to **86%** while in Basingstoke and Deane consistency of timing dropped to **64%**. In Hart, **16%** of people reported that carers 'never' come at the agreed times or that they 'never know' when they are going to come.

- *Twice in the past two months my evening carer never turned up. I am diabetic, insulin dependent and my insulin is locked away. I have memory loss and the first time it happened I forgot to phone, second time it happened (last week) I called my daughter. On both occasions, the (provider) manager, never phoned to apologise despite complaints from my family.*
- *Carers are often late or do not arrive at all. I am supposed to have a shower every evening but only one carer provides this service for me. most of my carers do not spend the time allotted with me. I am supposed to have 30 minutes each evening but the carers are averaging only 20 minutes. I am paying for this service but I am not getting value for money.*

**Do your care workers come at the times agreed on your care plan?**



## Do your care workers come at the times agreed on your care plan?



Responses by district

- Always
- Usually
- Don't usually
- Never
- I never know

724 responses

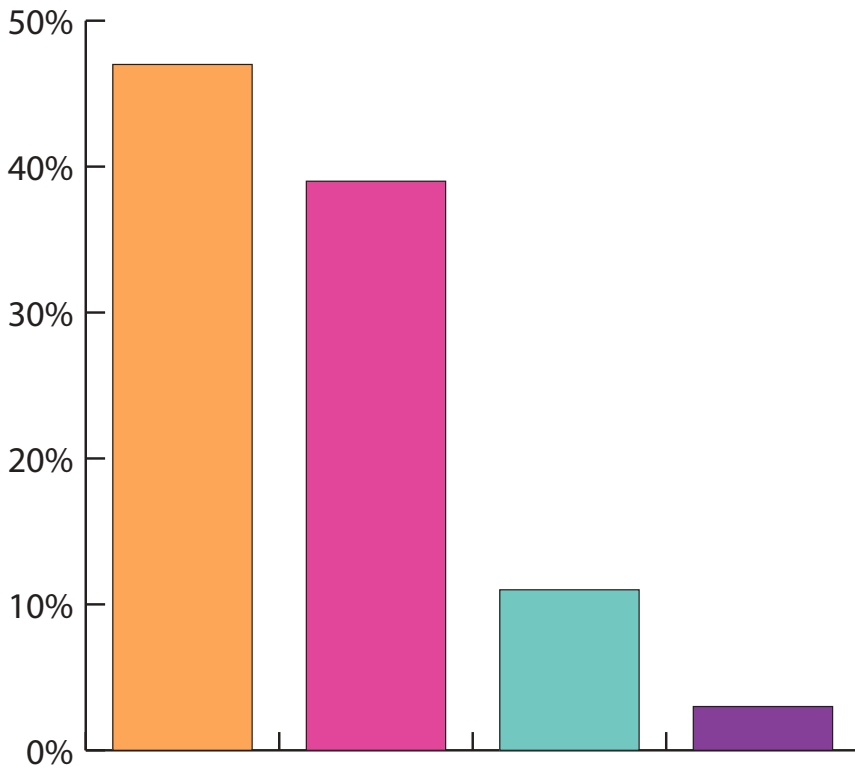
Most respondents reported that their carers spent the time specified in their care plans. **86%** said that carers always or usually spent the agreed time. When asked if carers seemed to be coping with regard to time-keeping, **79%** said yes, with a higher proportion reporting 'usually' than 'always'. A significant minority of **21%** felt that their carers 'don't usually' or 'never' seem to be coping with regard to time keeping. This was reflected in some of the comments, that indicate a management system at fault rather than individual carers.





## Do your care worker(s) spend the agreed time with you as specified by your care plan?

### Hampshire responses



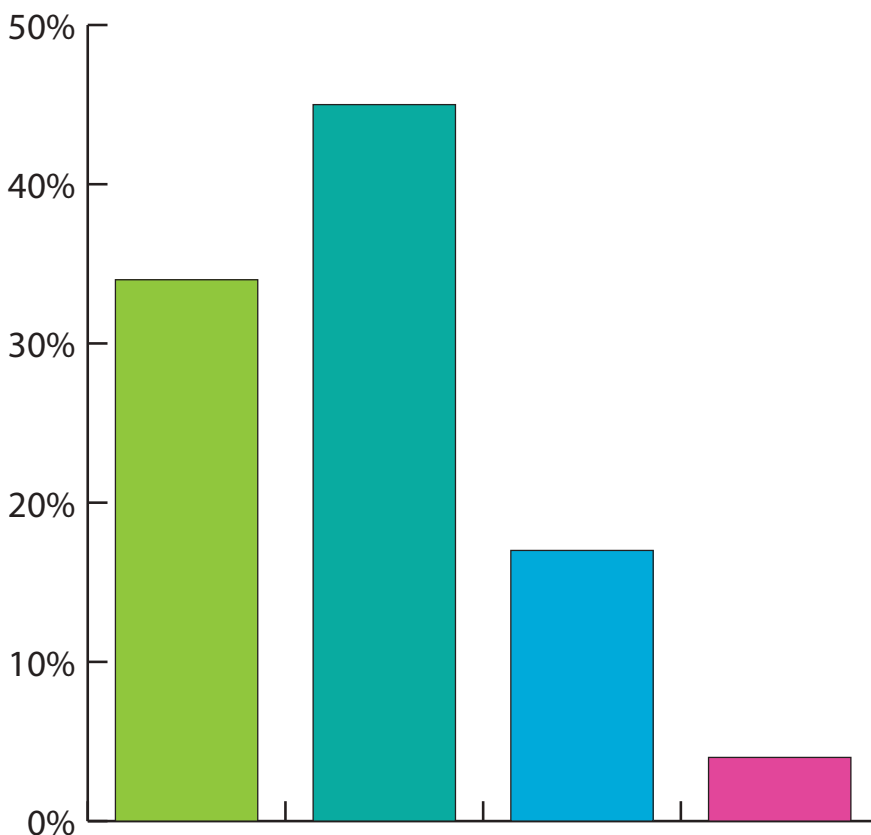
- Always
- Usually
- Don't usually
- Never

839 responses



## Do your care worker(s) seem to be coping, with regard to time-keeping?

### Hampshire responses



- Always
- Usually
- Don't usually
- Never

850 responses







- *Carers are rushed off their feet so can't spend the allotted time with me. Very poor office management who forget I go to a day centre two times a week. It's always weekends that the service falls apart due to staff shortages. I get my morning support from 10.30am, not very helpful when I go out with my family.*
- *Because of my wife's illness, Lewy bodies, she had heavy medication 3 times a day of which I'm instructed it should be taken at regular intervals of the day. However, (provider), changes and re-schedules without notice often (times vary by 2-3 hours) from the supplied schedule. Because of the heavy medication, my wife falls into a deep-sleep and as a result I have to attend my wife carers needs and send the carer away! (It's not the fault of the carer, it's (provider) administrators scheduling). Doctors have instructed to administer my wife's medication on regular basis. I coordinate this with the carers' visits. The irregular timings confuses my daily routine. And breaking my routine at 80+ years is sometimes a problem! I understand the problem is retaining staff and zero hour contracts and carers only being allowed 3 minutes travelling between patients no matter where they are in the County!*

#### **People were concerned about the pressure put on to their care workers:**

- *The girls work very hard and do their best they seem to have very long and not much time to get from house to house.*
- *I feel the carers work hard and do their best with no travelling time allowed and all for very little pay.*
- *I understand the problem is retaining staff and zero hour contracts and carers only being allowed 3 minutes travelling between patients no matter where they are in the County!*
- *Carers all do their best but they are often time pressured - possibly because their travelling time is included in visit time - it's not ideal. The carers and the agency should be reimbursed for their time.*



*'This needs to be looked at and not ignored'*  
**Support for informal carers**

“Carers look after family, partners or friends in need of help because they are ill, frail or have a disability. The care they provide is unpaid””

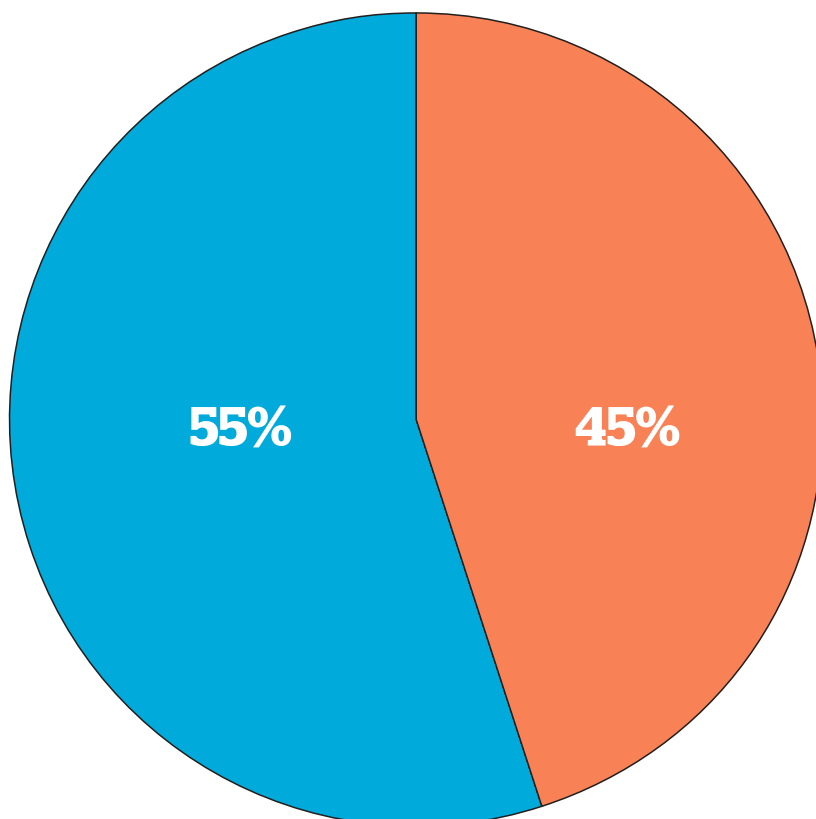
Carers UK



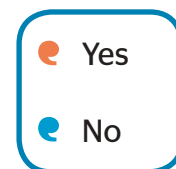
There are over **100,000** people in Hampshire providing unpaid informal care in Hampshire (Carers Together). Although the focus of this project is home care services and care that is provided by professionals, Healthwatch Hampshire felt it was important to understand how much other support people receive. This provides useful contextual information to understand the support that people need.

Almost half of all respondents reported that they received practical help from friends, family or neighbours alongside their paid-for care.

**Do you receive any practical help (for example, dressing or showering) from friends, neighbours or family members?**



**Hampshire responses**



853 responses





Hampshire County Council provide carers assessments for informal carers who feel they may need extra support or respite care while they have a break from caring responsibilities. The carer's assessment aims to find out about the needs of the carer, allowing Hampshire County Council to understand the best way to support people to maintain their own health and wellbeing and balance caring with other aspects of their life. Support offered by Hampshire County Council (but sometimes provided by voluntary sector organisations) may include:

- Short breaks** - ranging for a few hours to meet a friend to residential care 
- Nursing home** placements to allow up to two-week break 
- Direct Payments** for a service to support the carer 
- Emotional support** from other carers or from people who understand such as Carers' Support Workers 
- 
- Help** with household tasks 
- Help** with caring tasks 
- Activities** for the person who is cared for 
- Advice** on Financial benefits 

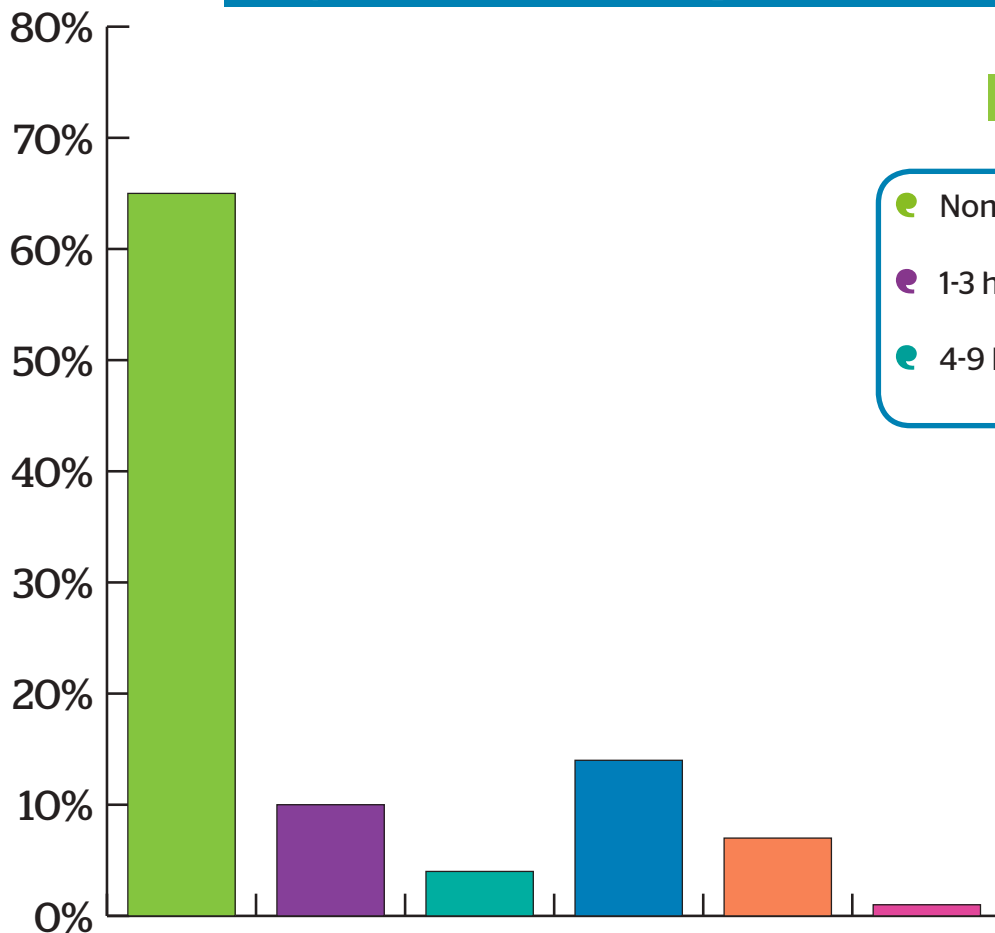
If people said that they did receive extra support from an informal carer, we asked how many hours per month of respite care they received to allow the carer a break. **65%** of respondents reported that their informal carer received no respite at all.



**If 'Yes', how much 'respite' do you receive per month (hours) so that your usual informal help can take some time off?**

**Hampshire responses**

- None
- 1-3 hours
- 4-9 hours
- 10-15 hours
- 16-24 hours
- 25 or more hours



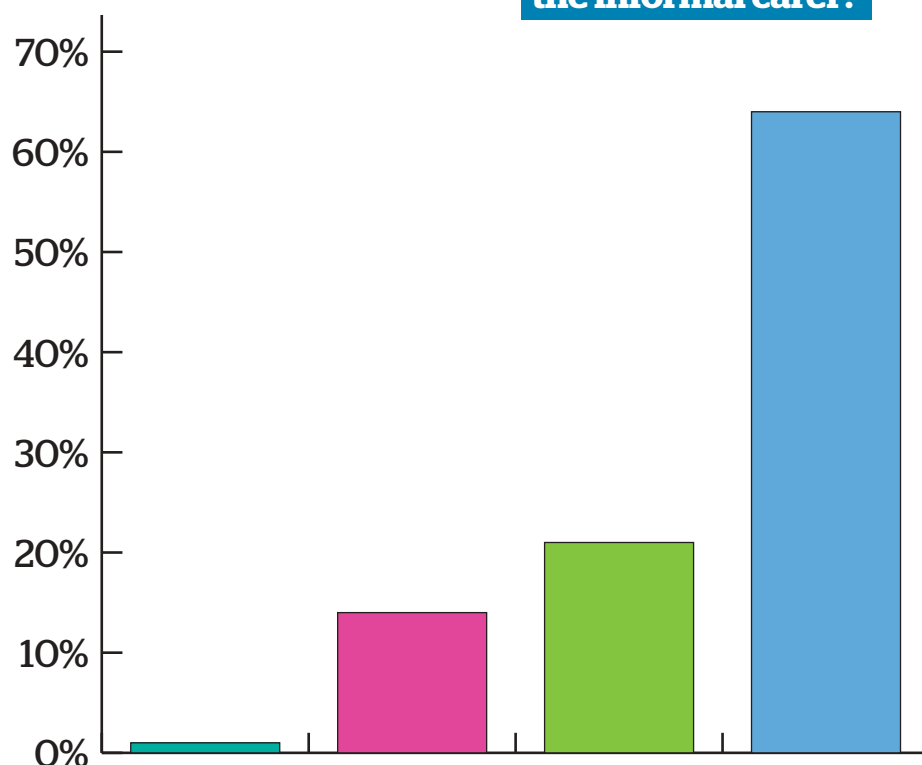
446 responses

Of those that responded to say that their informal carer did receive some respite, only **15%** said they felt this was 'adequate' or 'generous'.

**If you do receive respite funding so that your informal carer can have a break, do you think you get a reasonable amount, in view of the input received from the informal carer?**

**Hampshire responses**

- Generous respite
- Adequate respite
- Inadequate respite
- No respite



515 responses



Figures published by Carers UK show:



**1 in 8 adults**  
(around 6.5 million people) are carers

By 2037, it's anticipated that the number of carers will increase to **9 million**


Every day another **6,000** people take on a caring responsibility - that equals over 2 million people each year.

People providing high levels of care are twice as likely to be permanently sick or disabled.



Carers are estimated to save the economy **£132 billion** per year, an average of **£19,336** per carer.

Over 1.3 million people provide over **50 hours** of care per week



Research suggests that people miss out on vital support because they don't recognise that they have taken on a caring role. For many people, looking after an ill, older or disabled loved one doesn't have a name, it is 'just something you do'. If you do not see yourself as a carer, then you are unlikely to consider asking for a carer's assessment, applying for Carer's Allowance, or seeking advice from others who find themselves in similar circumstances.

The results of this survey suggest that many informal carers are not accessing support to which they may be entitled.

### Supporting Quotes

- *My parents look after all my needs and they need these breaks I don't want to have to argue my point over all time they should be listened to as it is what I want and they know this - This needs to be looked at and not ignored.*
- *I find this survey hard to answer as I am a full-time carer for my father and am disabled myself. I get 3 hours a week 'take a break' hours and am supposed to be able to get Dad into respite care for 2 weeks a year - There is NO respite to be had. After my recent experience, I would say "what care at home service"? I was 999's into hospital with a life-threatening illness my father was left alone at home. I had put in place an Emergency care plan with the princess trust for carers. Friends rang them they could do nothing - Social Services rung they manage to get dad 15 minutes a day care to get him a meal.*

If you provide informal care support and would like more information about support, visit:

[www.hants.gov.uk/socialcareandhealth/adultsocialcare/supportforcarers](http://www.hants.gov.uk/socialcareandhealth/adultsocialcare/supportforcarers)



*'It's a variable minefield'*  
Access to information and advice services

Hampshire County Council has recently launched its new information and advice service as part of changes implemented after the Care Act 2014. This service aims to make sure that people who live in their area:

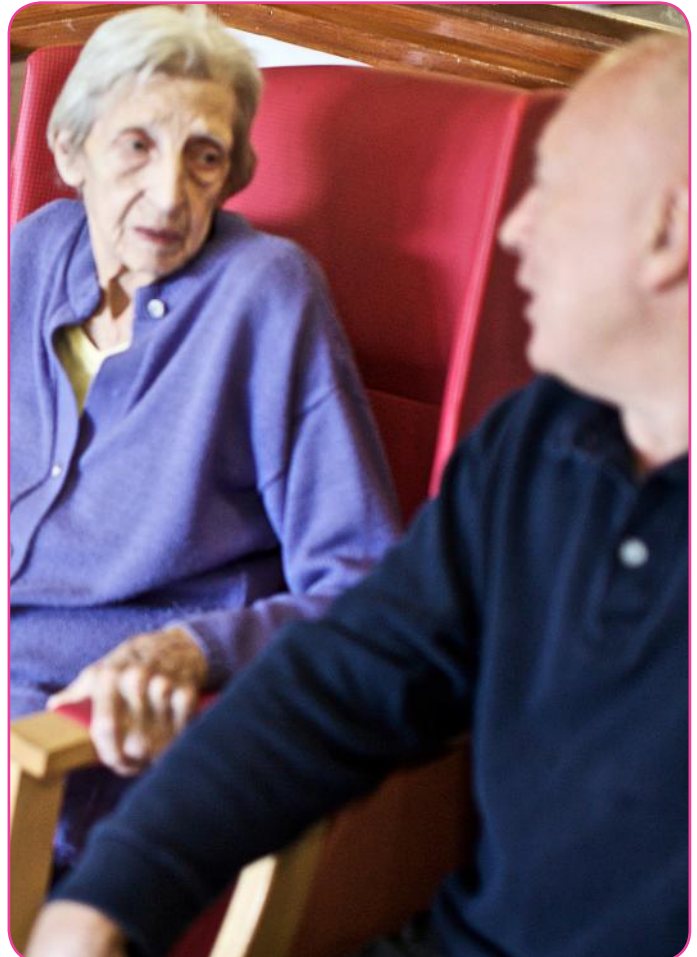
- receive services that prevent their care needs from becoming more serious, or delay the impact of their needs
- can get the information and advice they need to make good decisions about care and support
- have a range of provision of high quality, appropriate services to choose from.

Connect to Support Hampshire is a new online information and advice guide and directory of services for adults with care and support needs who live in Hampshire. The site is intended for all residents who want to find out about local groups, activities and services in the community as well as formal care provision. It is also intended for people who may wish to arrange their own care provision. The website gives practical information about health and wellbeing, managing at home, getting out and about and much more. The site also includes a community directory. Hundreds of local groups, activities and services can help someone in their community, from lunch clubs and exercise classes to voluntary groups that will help with transport and housework. These types of groups could help someone to remain independent and a part of their community. A directory of care providers is also included for someone looking for personal or nursing care provided in their own home, while people looking for a care home or nursing home can search the directory for Care homes.

All care homes and agencies providing personal or nursing care must be registered with the Care Quality Commission (CQC) which monitors and inspects these providers.

Hampshire County Council also has a phone number and email enquiries address and the option of seeing someone face-to-face for enquiries.

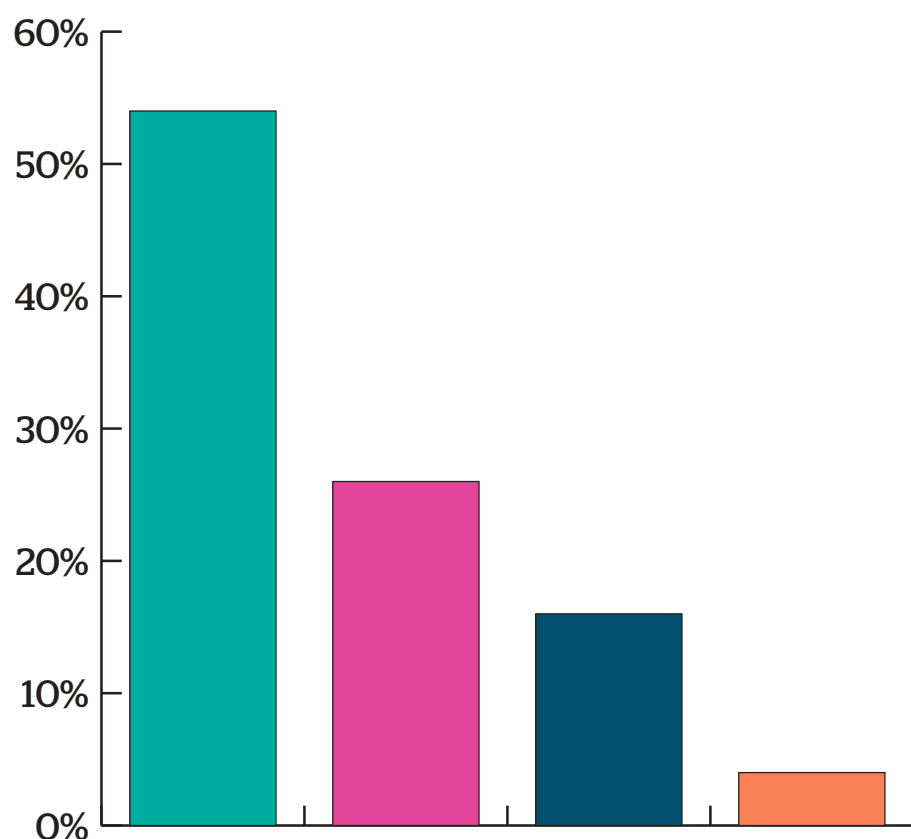
Healthwatch was interested to know if the local community were aware of this service and how helpful they had found it. Of those respondents who had used the service (20%), 16% reported that the service was helpful. The most striking finding was that more than half (54%) were not aware of the service at all.





## Have you used the Advice and Information Service and was it helpful?

### Hampshire responses



- Not aware
- Not used
- Used and found it helpful
- Used and found it not helpful

689 responses



- There must exist many carers like myself looking after their elderly spouse (who is suffering from dementia). It is a variable minefield the information service - but the local council (Hampshire County Council) were very helpful.*
- I, like thousands of others, keep being referred to the WWW site and I CANNOT use the computer programme*
- I did not even know about this service until this survey mentioned it*



## Involvement and Choice

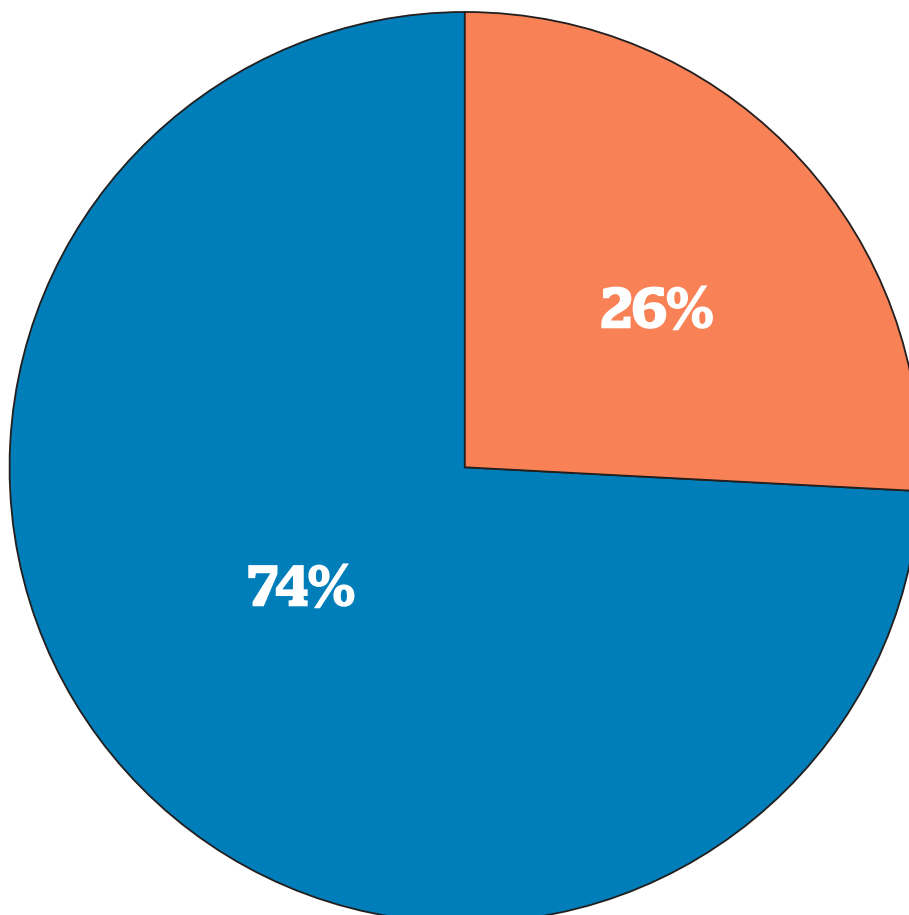
### Service user involvement in choosing providers and amount of care received

Involvement in the process of choosing a provider of your care and the amount of care you receive as an individual is very important. The current process requires the person who believes they may require care at home to contact Hampshire's adult services department to ask for an assessment of their care and support needs. If, through the process of assessment, it is decided that the individual is eligible for homecare services, the local authority may provide or arrange the help themselves. Alternatively, people can arrange their own care, funded by the local authority, through direct payments or a personal budget. (If someone chooses direct payments or a personal budget, or they aren't eligible for local authority help and want to get care privately, it can be arranged in several different ways.)

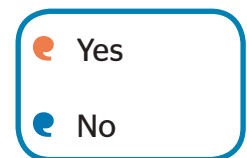
This survey attempted to find out if people feel that there is adequate involvement in the choice of provider and the amount of care agreed on. A worrying **75%** of respondents did not feel adequately involved in the selection of their care provider.



### When you chose a care provider, did you feel adequately involved in the selection process? (if funded by Hampshire County Council)



#### Hampshire responses



686 responses





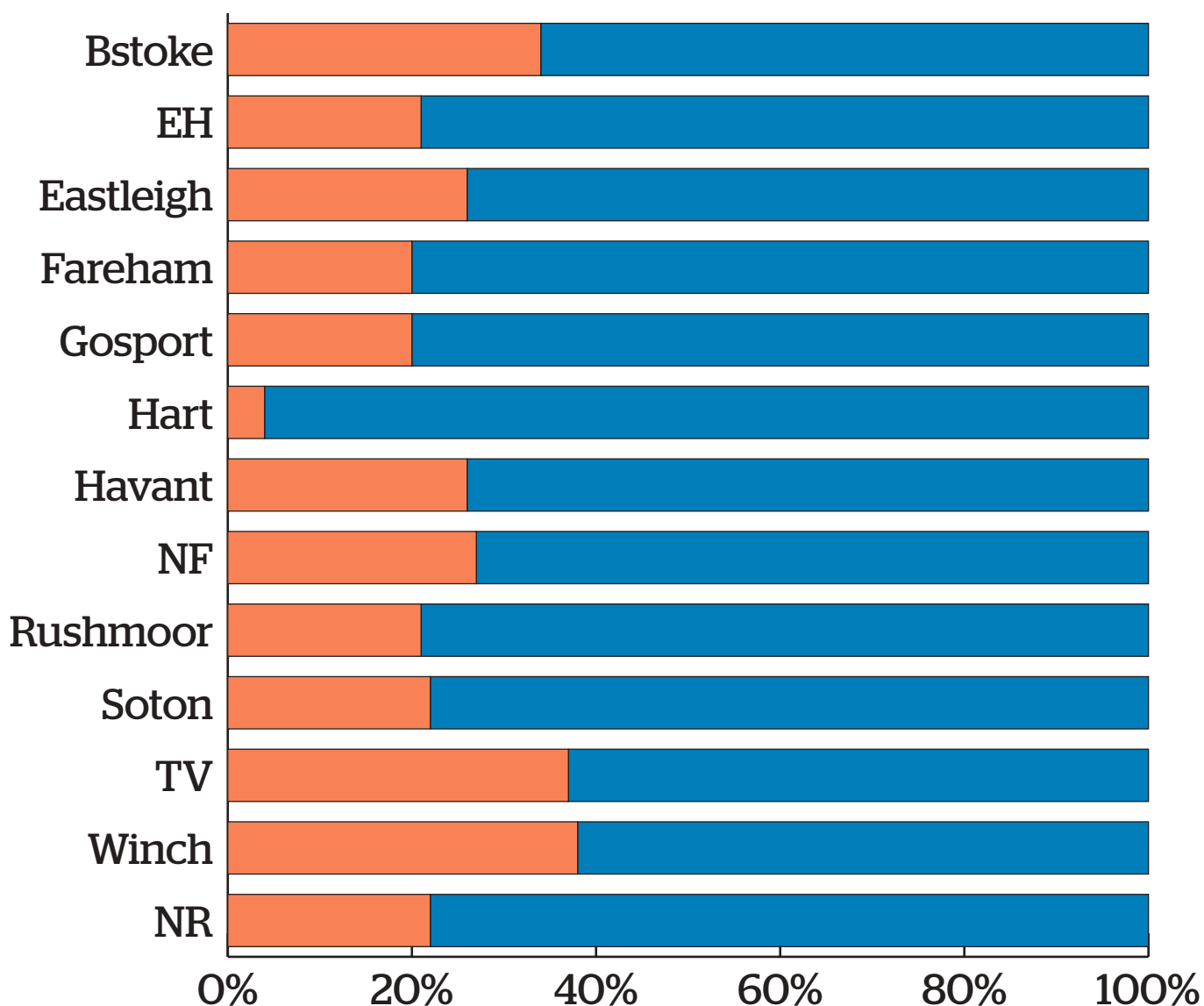
At district level, there were some striking disparities. In Winchester, for example, **38%** of respondents said that they felt involved whilst only **4%** of respondents from Hart felt the same. Given that the process should be the same regardless of where you live, such a difference is a cause of concern.

**When you chose a care provider, did you feel adequately involved in the selection process? (if funded by Hampshire County Council)**

Responses by district

Yes No

686 responses

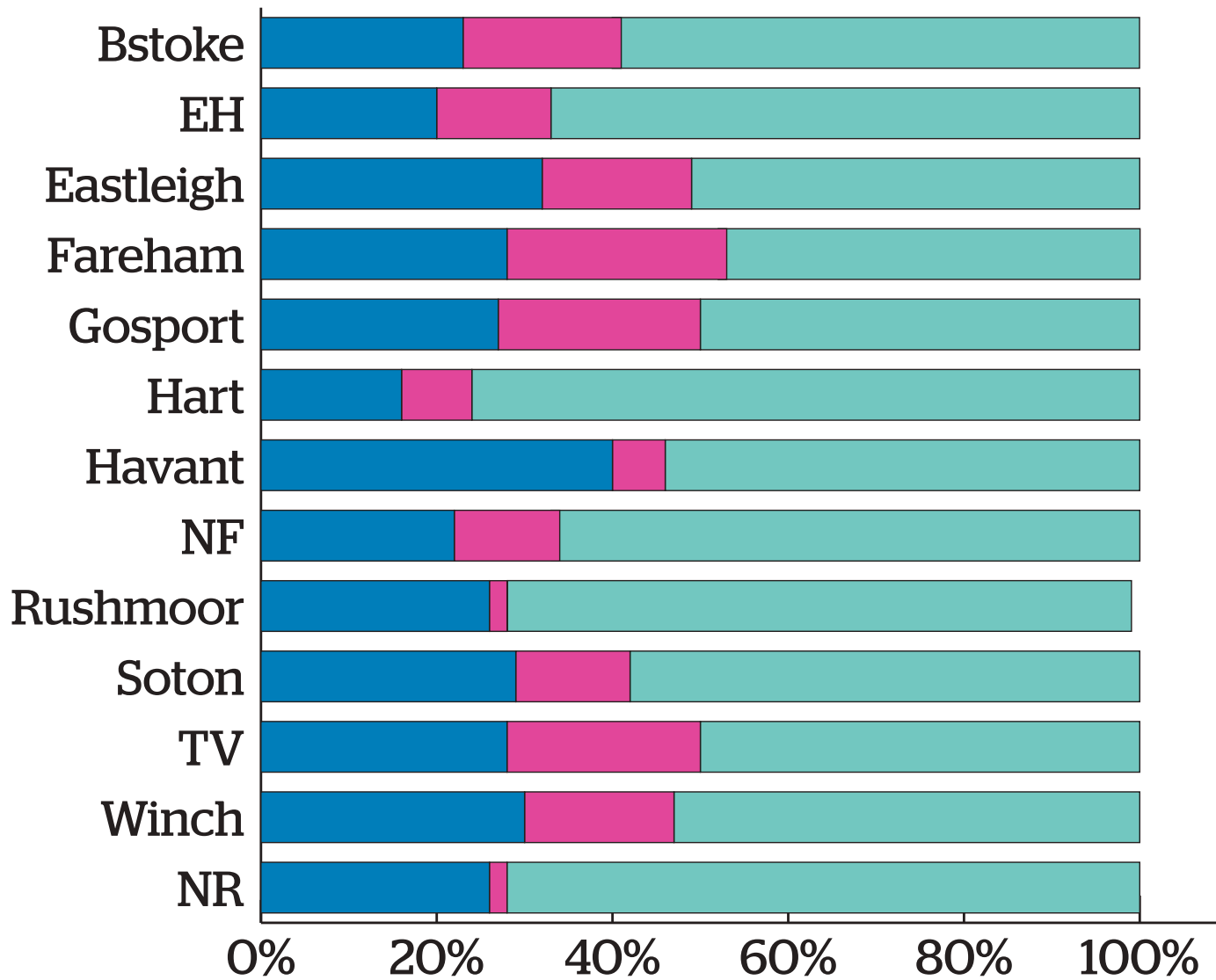


When people who did feel involved in the selection process were asked if the final arrangement was agreed by them, we saw similar differences across the county. High numbers of respondents reported that they felt they had not fully agreed with the final arrangement.



## Of those involved to what extent do you feel that arrangement regarding care provider was agreed by you?

### Responses by district



- Fully agreed
- Agreed in part
- Not agreed

269 responses



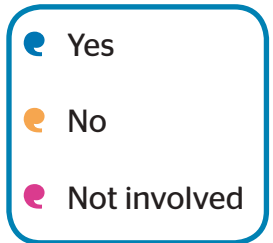
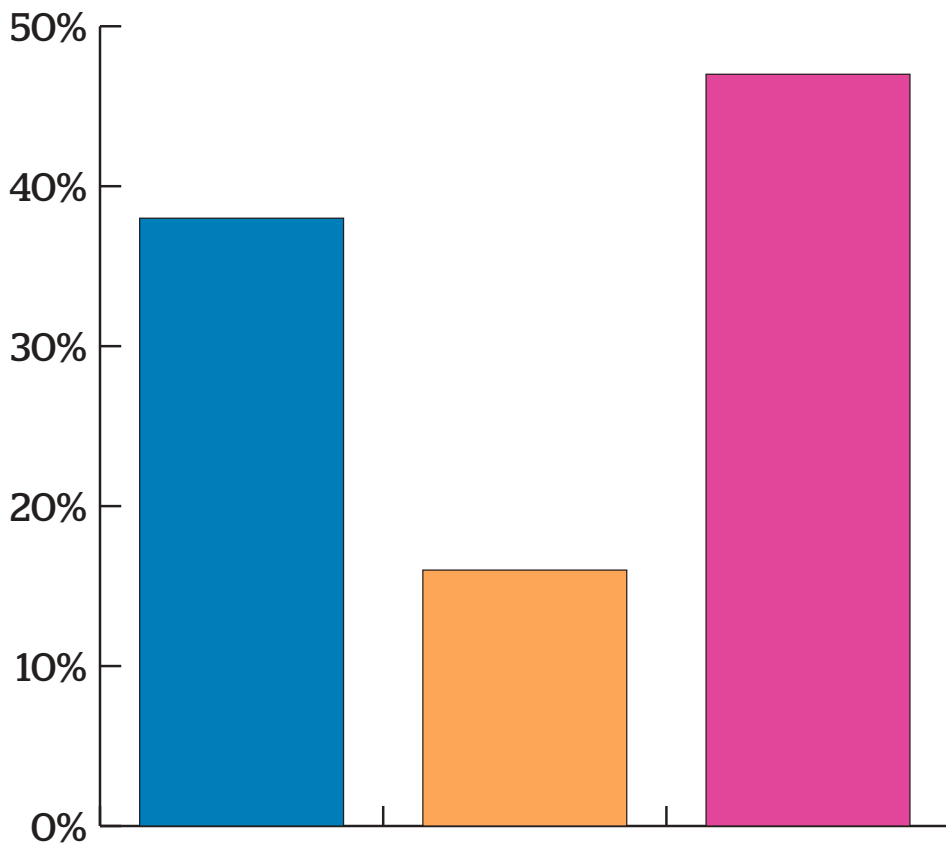
The survey went on to ask whether people **felt that arrangements regarding the amount of care were agreed by them.** Hampshire-wide, **38%** of respondents felt that they had agreed, but **47%** felt that they were not involved at all in the process of agreeing the amount of care to be received.





## Do you feel that arrangements regarding amount of care were agreed by you?

### Hampshire responses



708 responses



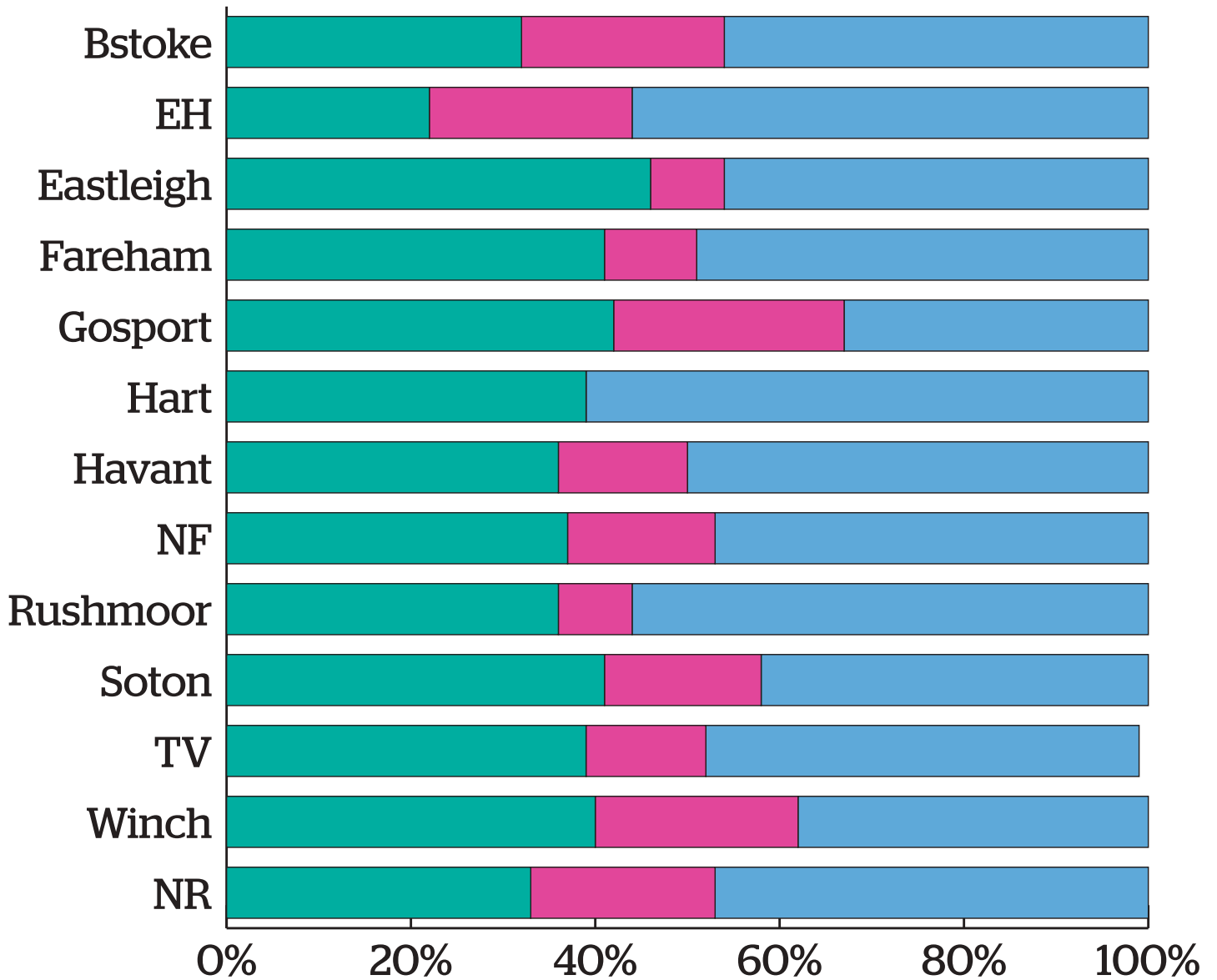
Again, when seen at district level, there were clear differences depending on where people lived. In Gosport, for example, **67%** of respondents felt that the amount of care they receive was either 'fully agreed' or 'agreed in part' whilst in Hart this was only **39%**.





## Of those involved to what extent do you feel that arrangement regarding amount of care was agreed by you?

### Responses by district



- Fully agreed
- Agreed in part
- Not agreed

297 responses



# Recommendations



## Be honest

from with people who need services about the pressures on health and care services

It is important that the public understands the pressure facing local services. The health and care system in this area faces a combination of pressures - rising need for care, rising costs of treatments, fewer staff in key roles, and funding levels which do not keep pace with demand. At the same time, new opportunities are offered by better medicines, new technology, and closer relationships between NHS and social care teams. Health and care services cannot, and will not, remain as they are today. It is important to begin a conversation with the local population about what this will mean in the future.

Require staff to give **clear communications** with service users about who will be providing their care and when

This survey clearly shows that service users value knowing who will be providing their care and when. Some providers in Hampshire already use weekly rotas to inform users of this information; others have decided not to use rotas so that expectations are not raised beyond the capacity of the provider. As there is no consistent approach in Hampshire, we recommend that providers improve consistency and ensure that all service users are informed who will be providing their care and when.

Tell service users of **changes** to carers or timing of their visits

Poor communication between providers and service users was a strong theme throughout this survey, particularly in the comments. Service users widely reported that they were not informed in changes to their carers or the timings of their visits. Whilst it is acknowledged that capacity and resources make it difficult to inform service users of every change, we recommend that service users should be informed of significant changes such as a different carer, or a change in the timing of visits that could directly impact on the service user's plans.

Respond quickly to complaints and requests for information - a quick acknowledgement with a deadline for a proper reply

A common theme from comments was a lack of a timely response to telephone and email enquiries and complaints by service users to providers. Some providers need to be more responsive generally (to both service users and professionals) to create more efficient, dynamic and open culture. Providers should give service users a consistent way to provide feedback to ensure they learn about the good and the bad experiences of their users.



## Advertise

Hampshire County Council's information and advice service more widely so that more people know about it and use it.

This survey highlighted that those who had accessed and used the service had found it helpful but most respondents were not aware of the information and advice services offered by Hampshire County Council. We recommend more widespread advertising of the service by Hampshire County Council and through voluntary sector networks to increase uptake and usage of the service.

## Involve service users

more at in the care assessment so that they are fully informed of the options available

Service users reported that they do not feel adequately involved in the process of agreeing or arranging their care. Whilst it is not always appropriate for people to be fully involved (due to illness, capacity or through choice), it is necessary for those who can and want to be more involved to have that option available. As there are a variety of ways that care could be offered and delivered we recommend that there is more involvement at the assessment stages of the process to ensure people are fully aware and informed of the options available to them and feel more involved in the selection of their care package.

Advertise carers' assessments more widely, so that informal carers get the support they are entitled to including information, advice, emotional support and respite care.

This report highlights the ongoing need for further support for informal carers. We recommend more widespread advertising of carers assessments, by Hampshire County Council and throughout the voluntary sector network to ensure that informal carers get the support they are entitled to including information, advice, emotional health and wellbeing support and respite care.

## Consistency of carers

is particularly important to some service users (often those with dementia).

Providers should identify and prioritise a consistent service to these, to avoid unnecessary anxiety. For people who receive care in their own homes, it is widely recognized that consistency in the people delivering the care can be an advantage. NICE guidelines state that 'you should feel comfortable around your care workers. They should get to know you and be familiar with your needs including how you like to communicate and your likes and dislikes.' Some of the feedback indicates that people are not always receiving the consistency they should expect. This can result in confusion, particularly for people with memory problem or dementia. It also becomes more necessary to familiarise new carers to the needs of the individual. We therefore recommend that in some cases it is appropriate to prioritise a more consistent service for service users who have been identified as more susceptible to stress and anxiety due to dementia, memory loss or other related conditions.



# Looking to the future

## *Commissioner and provider responses*

### **Hampshire County Council response**

The County Council welcomes this comprehensive report by Healthwatch into people's views on the care at home support they receive. It is published at time when the demand for adult social care services in Hampshire has never been higher, particularly for support that enables people to continue living independently in their own homes.

The report is also particularly timely as we review how we work with organisations to commission care at home support across the county, during what is a very challenging time for all involved.

In relation to the findings of the report, the County Council is particularly encouraged to hear that over 80 per cent of those receiving services are satisfied or very satisfied with the quality of their care, and that overwhelmingly, respondents reported that they felt their carers were understanding, helpful and friendly.

Nevertheless, the report also highlights areas where improvements need to be made, for example in relation to the turnover of carers and timing of visits, and we are not complacent about the need for action to address these issues.

We also take particular note of where, as an Authority, we need to do more to ensure the public understand the advice, guidance and support that is available to help them make informed decisions about their care. We also note the need for us to do more to communicate the support that is available to carers whose role is crucial in supporting those who wish to continue living in their own homes.

We are grateful to those providers of care at home services who have worked alongside the Authority to ensure that people continue to receive care of a quality that meets their aspirations, enabling them to make the choice to stay at home for as long as they are able to do so.

Looking forward, we will work with partners to learn from the report and identify actions that can be taken to ensure that those aspects of care provision with which service users and their carers are not so satisfied, are improved. This in turn will help to further drive up standards within an industry where demand for services will continue to grow significantly in the coming years.



**Hampshire**  
County Council

## What next?

Over 850 people shared their experiences, ideas and recommendations about how care at home services could be improved in the future. This feedback, along with this report and our recommendations, has been shared with Hampshire County Council and Hampshire's Care at Home Steering Group. We hope that the findings and recommendations will be recognised and acted upon to improve the experience of people receiving these services.

Healthwatch are ultimately accountable to local people and prioritise the work we do to reflect the intelligence and evidence we have gathered from local people. Our independence from the NHS and local authorities mean that we are not bound to adopt the priorities or messages of those bodies. We always encourage commissioners and providers to carry out their own consultation and engagement to support their decision making processes.

The full report will also be shared with other health and care providers and commissioners to inform their work. This includes Hampshire Hospital NHS Foundation Trust, all of Hampshire's five Clinical Commissioning Groups, the Care Quality Commission and Healthwatch England.

All responses and feedback will be published alongside this report on our website:  
[www.healthwatchhampshire.co.uk](http://www.healthwatchhampshire.co.uk)





# Key Contacts

## **Hampshire County Council information and advice service (Connect 2 Support)**

<https://connectsupport.hants.gov.uk>

General enquiry: [info@hants.gov.uk](mailto:info@hants.gov.uk)

Phone: 0300 555 1375

Post: The Castle, Winchester, SO23 8UJ

## **Healthwatch Hampshire**

[www.healthwatchhampshire.co.uk](http://www.healthwatchhampshire.co.uk)

Phone: 01962 440404

Email: [enquiries@healthwatchhampshire.co.uk](mailto:enquiries@healthwatchhampshire.co.uk)

## **NHS Choices**

[www.nhs.uk](http://www.nhs.uk)

Home Care information:

[www.nhs.uk/Conditions/social-care-and-support-guide](http://www.nhs.uk/Conditions/social-care-and-support-guide)

[/Pages/home-care.aspx](http://www.nhs.uk/Conditions/social-care-and-support-guide/Pages/home-care.aspx)

## **Age UK**

[www.ageuk.org.uk](http://www.ageuk.org.uk)

For information and advice, call 0800 678 1174

For all other enquiries, call 0800 169 8787

## **Carers UK**

[www.carersuk.org](http://www.carersuk.org)

Phone: 0808 808 7777

## **Princess Royal Trust for Carers (Hampshire)**

[www.carercentre.com](http://www.carercentre.com)

Phone: 01264 835246

Email: [info@carercentre.com](mailto:info@carercentre.com)

## **Carers Together (Hampshire)**

Phone: 01794 519495

Email: [admin@carerstogether.org.uk](mailto:admin@carerstogether.org.uk)

## **NICE**

[www.nice.org.uk](http://www.nice.org.uk)

E-mail: [nice@nice.org.uk](mailto:nice@nice.org.uk)

Phone: (0)300 323 0140

Care at Home guidelines:

[www.nice.org.uk/guidance/qs123](http://www.nice.org.uk/guidance/qs123)



# Appendices

## Appendix One: Full methodology and ethical considerations

**Participants** - The participants will be receiving or be eligible to receive domiciliary care services in the county of Hampshire (Excluding Portsmouth City, Southampton City and the Isle of Wight). Participants will be identified through Hampshire County Council. All participants must be receiving either council funded or self-funded care.

### Measures

**Questionnaire for patients** - Online and paper forms asking about signposting, social interactions, care received, timings, psychological and physical needs and care plans.

**Customer Relationship Management Database** - Using patient feedback for the report to establish the questions used in the questionnaire and interviews.

### Procedure


- A report on the CRM will be conducted to establish the current themes of the feedback that Healthwatch Hampshire have received over the past three months.
- The lead researcher will contact the adult services team at Hampshire County Council to discuss the research and to establish domiciliary care agencies and potential participants.
- A questionnaire will be printed and sent by the Hampshire County Council and Healthwatch Hampshire to all patients receiving domiciliary care in Hampshire. The questionnaires will contain the brief but no consent form.
- In addition to this, all participants will receive a debrief explaining why the research was carried out, what will happen to their responses and contact details for the lead researcher, if they have any questions.
- After the data has been analysed and written into a report it will be destroyed for confidentiality reasons.
- The finalised report will be published on Healthwatch Hampshire's website and a copy will be given to the adult services team at Hampshire County Council.

### Ethical considerations

**Recruitment** - Recruitment will be through collaboration with Hampshire County Council who will identify patients and send out the questionnaires with Healthwatch Hampshire's help. It may also be useful to use online social media to promote the questionnaire.

**Research brief** - Participants will be provided with a brief and debrief which will explain what the research involves, what they will be asked to do, timings and how their data will be used and recorded. Participants will also be given the contact details of the lead researcher should they feel that they have any questions or concerns regarding the questionnaire and research.





**Informed consent** - Consent will be assumed for this piece of research. Participants will be receiving both a brief and debrief. There is no perceived harm or potential risks to the participants, however in keeping with good ethical governance, Healthwatch Hampshire will be providing the contact details of the researcher at the beginning and end of the questionnaire. This will include the link to the Healthwatch Hampshire website at the end of the questionnaire; this is so that participants will be able to contact the researcher with any queries throughout the duration of the study. All research by Healthwatch Hampshire is covered by insurance indemnity relating to research, a copy of which can be supplied upon request. Participants will contribute to the data supplied but will not contribute to the analysis as this will be responsibility of the lead researcher. Participants will be able to see a copy of the report on the website and additionally it will be sent to Hampshire County Council.

**Research debrief** - Debrief will explain why the research has been carried out, that their data will remain anonymous and their data will be destroyed once the written report has been finalised. The contact details of the researcher will be provided should any queries, questions, concerns or complaints about the research arise. Participants will be thanked for their time in completing the questionnaire.

**Potential benefits** - It is hoped that by doing this piece of research we will be able to identify recommendations to make a change to domiciliary care services that will benefit both the patients and their care workers.

**Dissemination** - Once the final report has been written it will be made available publicly on Healthwatch Hampshire's website and through Hampshire County Council. Participants can email or phone the lead researcher for an email or large print version.

Freepost RTHH-KGST-ZRBC  
Healthwatch Hampshire  
Westgate Chambers,  
Staple Gardens,  
Winchester,  
Hampshire,  
SO23 8SR

Tel: 01962 857370  
Email: [enquiries@healthwatchhampshire.co.uk](mailto:enquiries@healthwatchhampshire.co.uk)  
Web: [www.healthwatchhampshire.co.uk](http://www.healthwatchhampshire.co.uk)

Hello,

Healthwatch Hampshire is the independent consumer champion for everyone who uses health and social care services in Hampshire. We're asking people who receive care at home to take part in the enclosed survey to tell us what they think about the service they receive - both what is good and what could be improved.

This letter has been sent to you by Hampshire County Council on our behalf. We do not have your name or address. You do not have to reply to this survey, but we would very much appreciate it if you do. Taking part, or choosing not to, will not affect the care you receive. If you like, you can ask a friend or relative to help you complete the questionnaire.


Your individual answers will be treated as confidential: they will not be passed on to your care workers, your social worker or anyone else responsible for providing you with home care or other help. However, if you told us something that indicated you were at serious risk of harm we would need to pass this on to the local council's Safeguarding Team. We would keep you informed of this process.

We will write a report summarising what people have told us and share it with the care agencies and local councils. Our report will not identify any individuals who have taken part. Your feedback can help to improve local services.

You can receive the report from the Healthwatch Hampshire website no later than March 31st 2017 ([www.healthwatchhampshire.co.uk](http://www.healthwatchhampshire.co.uk)). If you would like it in another format please contact us and let us know.

If you would prefer to complete the form online, then the survey is available using the following web address: [www.healthwatchhampshire.co.uk/care-home](http://www.healthwatchhampshire.co.uk/care-home)

If you would prefer to have support in completing the form over the phone, then please contact Healthwatch on the number above and we can arrange a time for someone to assist you.



Once you have completed the survey, please return it to us in the enclosed freepost envelope (no stamp needed) by Friday 16th December 2016.

If you have any questions about the survey, please call us on 01962 857370 or email [enquiries@healthwatchhampshire.co.uk](mailto:enquiries@healthwatchhampshire.co.uk).

Thank you for your time.



Steve Manley  
Manager  
Healthwatch Hampshire



### Healthwatch Hampshire's Care at Home Survey

You are invited to take part in in this survey about your views on domiciliary care services in Hampshire.

The aim is to understand what individuals think about their care at home services through a questionnaire and also to provide recommendations to improve care at home services. The survey will take no longer than 15 minutes to complete and your responses will be used in a Report that will be shared with Hampshire County Council aimed to improve care at home services in Hampshire. The report will be published on our website in early 2017.

Your responses will be treated as confidential. We will not use your name or anything that might identify you in the report. We will safely and securely dispose of the responses once the report is written.

If you tell us anything in relation to abuse or neglect or if someone is at serious risk of harming themselves or others we would share the concern with the local authority safeguarding service.

Please contact our team with any queries you may have at:

[enquiries@healthwatchhampshire.co.uk](mailto:enquiries@healthwatchhampshire.co.uk) or alternatively you can call us on: 01962 857 370.

We have included a pre-paid freepost envelope in which to return your completed survey.

Thank you for taking the time to respond.



**Tick whichever box best describes your situation:**

- You self-fund your care services** (you make the decisions about the care you receive, the provider, and the contract, and you pay for all of your care privately)
- You are a full cost charge payer** (the council arranges your care but sends you an invoice for the full cost, because of your financial means)
- Your care is publicly funded and purchased** (social services pays for at least some of your care and makes the arrangements).

**Do you know the name of your care worker(s)?**

- All of them
- Some of them
- None of them

**Do you have anything in writing that says what your care workers are supposed to do for you (a care plan produced by the provider or a support plan produced by the council)?**

Do you have a Care Plan?

- Yes
- No
- Don't know

Do you have a Support Plan?

- Yes
- No
- Don't know

**How many hours of home care do you usually receive each week?**

**Do you receive any practical help (for example, dressing or showering) from friends, neighbours or family members?**

- Yes
- No



**If the answer is Yes, how much 'respite' do you receive per month or per year, so that your usual informal help can take some time off?  
Please say in the box below**

**If you do receive respite funding so that your informal carer can have a break, do you think you get a reasonable amount, in view of the input received from the informal carer?**

- Generous respite
- Adequate respite
  
- Inadequate respite
- No respite

**What kind of home care services do you usually receive? (Tick all that apply)**

- Help with personal care e.g. taking a bath or getting dressed
- Help to prepare and eat meals
- Help to take medication
- Help with housework
- Help to manage money and paying bills
- Help to go out for e.g. GP appointments or shopping
- Help to make phone calls or write letters
- Help to keep in touch with friends or family e.g. writing letters or social media
- Other (please specify, eg keeping safe (sitting service or chaperoning), companionship, gardening, help with preparation of meals, transport, help with parenting)

**What is the latest time of day that you are able to request a service to be delivered, by your care provider, as far as you are aware?  
Please say in the box below**

**Do you receive formal home care services at night? (ie starting after 10pm? and before 6am)**

- Yes
- No
- Only during my carer's respite weeks

**If you have a problem with your home care or wish to raise a concern with your home care provider, do you know how to do so?**

- Yes
- No

**Overall, how satisfied are you with the help that you receive from your care worker(s) in your own home?**

- I am very satisfied
- I am satisfied
- I am neither satisfied nor dissatisfied
- I am dissatisfied
- I am very dissatisfied

**Does anyone contact you from either the care agency or adult services each year to check that you are satisfied with the care that you receive or to see if the care plan set up for you is meeting your needs?**

- Yes
- No

**Whoever is organising the services, does the care provider check with you or someone of your choosing, whether you are satisfied?**

- Yes
- No

**If you have asked for changes to the help you received in the past year, have those changes been made?**

- Yes
- No
- Not applicable

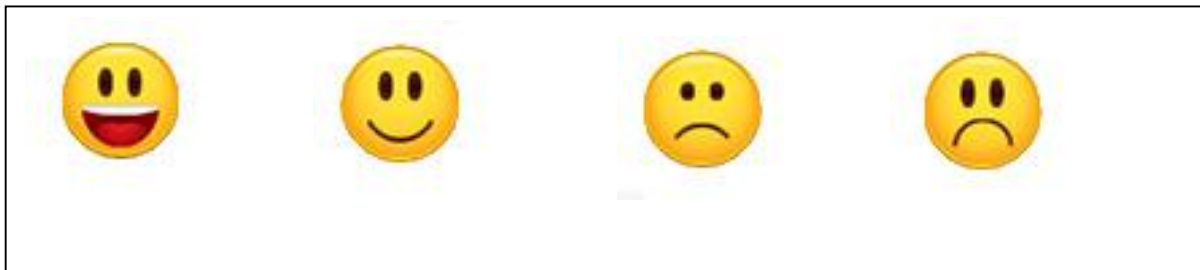
**If you have never asked for any changes; why is that? Please state in the box below**

**If you do have a care plan, please answer this question: Do your care workers come at the times agreed on your care plan?**

**Please tick one box:**

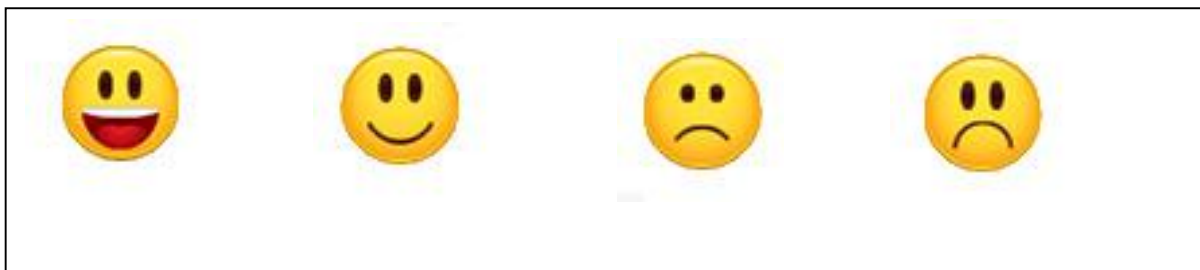
- They always come at the agreed times
- They usually come at the agreed times
- They sometimes come at the agreed times
- They never come at the agreed times
- I never know what time my carer is going to arrive

**Do your care worker(s) spend the agreed time with you as specified by your care plan? Please tick or circle one smiley face:**



A horizontal row of four yellow smiley faces. From left to right: a wide-mouthed happy face, a neutral smile, a sad face with a downward curve, and a very sad face with a downward curve and closed eyes.

**How do your care worker(s) seem to be coping, with regard to time-keeping? Please tick one smiley face:**



A horizontal row of four yellow smiley faces. From left to right: a wide-mouthed happy face, a neutral smile, a sad face with a downward curve, and a very sad face with a downward curve and closed eyes.

**Do you have as many visits from your care workers as you feel you need? (Tick one smiley face)**




A horizontal row of four yellow smiley faces. From left to right: a wide-mouthed happy face, a neutral smile, a sad face with a downward curve, and a very sad face with a downward curve and closed eyes.




**Do you always see the same care worker(s)?**




**Do your care worker(s) do the things that you need done?**



**Are you kept informed, by your home care service about changes in your care? (e.g. if your visit will be late or you'll have a different care worker?)**



**Overall, how do you feel about the way your care workers treat you? (e.g. whether they are understanding and treat you with respect?)  
Please tick one smiley face.**





**Now, please read the following statements and then put a tick next to each statement under the answer which comes closest to the one you want to give.**

	<b>Strongly agree</b>	<b>Agree</b>	<b>Neither agree nor disagree</b>	<b>Disagree</b>	<b>Strongly disagree</b>
My care workers are understanding					
My care workers are helpful					
My care workers are friendly					
As far as I am aware my care workers keep personal details about me to themselves					
My care workers gossip to me about other people					
My care workers are excellent at what they do					
My care workers don't do as much as I would like them to do					
My care workers treat me with respect					

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
My care workers are gentle with me					
My care workers are honest with me					

**If you could change one thing about your care at home service, what would it be? (Please write your answer in this box)**

**Who is your home care provider (if you know)? This question is being asked so that we can understand which service providers are providing excellent care. We will be using this in our written report but your responses will remain anonymous (nobody will know it's you)**



**Please write in this box anything else you would like to tell us about your care at home service.**

**Additional questions ONLY for those who ticked box 2 or box 3 in Q.1 (i.e. for people who are partly or wholly funded for their care and support services through Hampshire’s adult social services department)**

**Which statement applies best to you?**

- I am not aware of the Advice and Information service operated by the council about the social care system
- I am aware of the Advice and Information service operated by the council about the social care system but have not used it
- I have used the Advice and Information system operated by the council and found it
  - Helpful
  - Not helpful

**If you found it not helpful, in your situation, please say why, below**



**If you receive services arranged or even partly funded by social services, do you remember whether anyone has ever discussed whether you might need the help of an independent funded advocate, to support your engagement with assessment and care planning processes?**

- Yes
- No
- Can't recall

**If you receive services arranged or even partly funded by social services, were you provided with written information about facilities in the community for prevention and reduction of need and dependency?**

- Yes
- No
- Can't recall

**If you receive services arranged or even partly funded by social services, were you provided with written reasons for the decision taken on eligibility for funding help, when you were last assessed, as required by the Care Act?**

- Yes
- No
- Can't recall

**If you receive services arranged or even partly funded by social services, were you provided with information about the possibility of taking the personal budget as a Direct Payment so that you could take on the role of purchasing services you preferred, directly?**

- Yes
- No
- Can't recall

**If you receive services arranged or even partly funded by social services, and you receive a Direct Payment with which to purchase the necessary services, do you have a written agreement with the council, setting out the legal obligations of both the council and yourself, with regard to this public money?**

- Yes
- No
- Can't recall

**If you receive services arranged or even partly funded by social services, then when it came to the time to choose a care provider, did you feel adequately involved in the selection process, either by being given a choice, between several regarded as appropriate by the council, or by being given the chance at least to express a preference?**

- Yes
- No

**If you were involved in making a choice, did you think that there was a wide enough spectrum of providers to choose between (whoever ultimately made the final choice)?**

- Yes
- No
- I was not involved in selection

**If you receive services arranged or even partly funded by social services, to what extent do you feel that the finalised arrangements were agreed by you, as opposed to imposed?**

	<b>Fully agreed</b>	<b>Agreed in part</b>	<b>Not agreed, but accepted because of lack of alternative options</b>
<b>As to amount</b>			
<b>As to care provider</b>			

**If you receive services arranged or even partly funded by social services, to what extent do you feel your well-being is being promoted, in accordance with the Care Act?**

- I am not involved with the council for my care arrangements
- I am satisfied that the council is promoting my well-being
- I am reasonably satisfied that the council is promoting my well-being
- I am not satisfied with the extent to which the council is promoting my well-being
- My well-being is not being promoted by the council's role or the care package

**If you receive services arranged or even partly funded by social services, but other agencies such as the NHS or Housing Authority is involved in your care, to what extent do you feel that the council is co-operating successfully with those other agencies so as to avoid duplication, share information appropriately and generally offer a streamlined experience for service users?**

- Not applicable to me, because only social services are needed
- They are co-operating fully and well, most of the time
- They are co-operating reasonably, most of the time
- They are co-operating inadequately, most of the time
- Successful co-operation between agencies is lacking

**Thank you for taking the time to respond to this survey. Please send it to Healthwatch using the enclosed pre-paid freepost envelope.**

**The results will be analysed and published in a report that will be available from Healthwatch Hampshire and will be included on the Healthwatch Hampshire website.**

**[www.healthwatchhampshire.co.uk](http://www.healthwatchhampshire.co.uk)**

**The final report is expected to be published no later than 31 March 2017.**

**What is your gender? (Please tick one box)**

- Male
- Female
- I prefer not to say
- Other (please specify) \_\_\_\_\_

**Which age group do you fit into? (Please tick one box)**

- Under 18
- 18-24
- 23-34
- 35-44
- 45-54
- 55-64
- 65-74
- 75-84
- 85 or over
- I prefer not to say

**Do you consider yourself to have a disability? (Please tick one box)**

- Yes
- No
- I prefer not to say

**To which of these groups do you consider yourself to belong? (Please tick one box)**

- White (British, Irish, Welsh, any other white background)
- Mixed (White and black Caribbean, White and black African, white and Asian, any other mixed background)
- Asian or Asian British (Indian, Pakistani, Bangladeshi, any other Asian background)
- Black or Black British (Caribbean, African or any other black background)
- Chinese
- Arab
- Nepali
- Eastern European
- Gypsy Traveller
- Any other ethnic group
- I prefer not to say

**Please write down the closest town to where you live (this is so that we can compare the care that service providers give across the county). Your responses will remain anonymous (nobody will know who you are).**





**NICE** National Institute for Health and Care Excellence

**FOCUS**

# Better home care for older people

## A quick guide for people who arrange their own home care



80% of people using home care services are over 65 and the number of people funding their own care is expected to grow over the coming years.

You will find this quick guide useful if you are paying for care yourself or receiving direct payments from your local authority.

## What can you expect from a good home care service?



The care you get should reflect **what you want and what you have agreed** with the agency. The care should take into account what you feel you can do and what you want to be able to do.



You should feel comfortable around your care workers. They should **get to know you and be familiar with your needs** including how you like to communicate and your likes and dislikes.



Your care worker should respect your **cultural and religious values** (regarding food, for example) and make sure that your needs are met.



Your care workers should have **the right skills** to meet your needs. They should be able to support you, for example if you have dementia, are deaf, blind or deafblind, or need help coping with bereavement.



Your care agency should let you know in advance if a **different care worker** is coming to visit you.



You should have a **care diary** to keep in your home. Home care workers and others who help you at home (like community nurses and physiotherapists) should update it every time they visit.



You should have a **home care plan** that describes the care the agency will be providing and is focused on the things that are important to you. If you have specific health problems or disabilities the plan should take these into account.



The agency should **review the plan** with you within six weeks of your first care visit to make sure that you are happy with it. After that, the plan should be reviewed at least once a year.

The **home care plan** should be clear and concise and include information about:



Your health, medicines and pain management.



Skin care and other support to help you stay well.



Keeping you safe.



What will happen if your home care worker is late, or unable to visit you.

## Information available to you



Your local council social services department should tell you how you can find information about the care services available in your area. They may also suggest other options, such as:



Employing a live-in care worker.



Employing a personal assistant.



Using telecare.

Find information about home care services in your area by using:

- [Find home care services](#) – NHS Choices
- [Find services in your local authority area](#) – Care Quality Commission
- [Find a homecare agency](#) – United Kingdom Homecare Association



If you have direct payments, your local council social services department should give you the support and information you need to manage your payments effectively.

# What to do if you are not happy with the standard of your home care



**Step 1:** Try an informal approach first. Explain to the agency why you are not happy with your care and what you would like to happen to make it better.



**Step 2:** If this doesn't work, the next step is to make a formal complaint. The agency should have their complaints procedure on their website and in other formats, such as leaflets.



**Step 3:** If you are in receipt of a direct payment and are not satisfied with the agency response, you may be able to complain to your local authority, depending on how the payment is managed. (Check with your local authority.)



**Step 4:** If you are not satisfied with the agency's or local authority's response to your complaint, you can ask the [Local Government Ombudsman](#) to investigate.



**Step 5:** You can also raise your concerns with the [Care Quality Commission \(CQC\)](#). The CQC regulates home care in England.



Making a complaint can be stressful, so you could ask for support from a friend, family member or advocate. You can get information about advocacy from social services.

## Further information

[Home care: delivering personal care and practical support to older people living in their own homes](#) – NICE guideline

[Home care: delivering personal care and practical support to older people living in their own homes – information for the public](#) – NICE

[Home care for older people](#) – NICE quality standard

[How to find the help you need at home](#) – Age UK

[Care services in your home](#) – NHS Choices

[Paying for your own care and support](#) – NHS Choices

[Code of practice for care provider members of UKHCA](#) – United Kingdom Homecare Association

[What can you expect from a good home care agency?](#) – Care Quality Commission

[Care and support jargon buster](#) – Think Local Act Personal

[Shared Lives Plus](#) – The UK network for shared lives and homeshare

This content has been co-produced by NICE and SCIE and is based on NICE's quality standard on home care for older people and guideline on home care

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**Social Care Institute for Excellence** [www.scie.org.uk](http://www.scie.org.uk)





Home care for older people (QS123)

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### List of quality statements

Statement 1. Older people using home care services have a home care plan that identifies how their personal priorities and outcomes will be met.

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.

Statement 3. Older people using home care services receive care from a consistent team of home care workers who are familiar with their needs.

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.

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.

Statement 6. Home care providers have practice-based supervision discussions with home care workers at least every 3 months.



## Appendix Six: Additional research

Research has been investigating how changes to care at home services affects both the patient and their caregivers.

Spiller and Alexander (1993) investigated into the views of domiciliary care with a specific focus on the views between terminally ill patients and their families. It was found that both the patient and their families shared the same views about the support that was provided and where the patient would be most appropriately placed during the last stage of their lives. However, the views were different with regard to the patient's physical and emotional wellbeing. The families did not have a favourable view when it came to emotional wellbeing.

It has been identified that people in the United Kingdom are living longer meaning that the affordability for long term care is challenging with many families now taking on the care responsibility for their relatives because it's seen as a lower public expense than residential and domiciliary care (Glendinning, Schunk & McLaughlin, 1997). This interlinks with The Care Act 2014. The changes that have been made to the care and support an individual receives in England are designed to put the individual in control of the help they receive and any decisions that need to be made will consider their wellbeing and what is important to both the individual and their family to ensure that they remain independent (Department of Health, 2015). However, the financial implications of domiciliary care is not the only factor that impacts on the family's emotional wellbeing. Research has found that that the caregivers attributional style, coping strategies, the relationship to the patient and the levels of support are all factors which can affect emotional wellbeing (Morris, Morris & Britton, 1988). In addition to the research carried out by Morris, Morris and Britton (1988) which is focused on dementia, a study looking at the impact of emotional wellbeing on caregivers caring for stroke survivors (Dennis, O'Rourke, Lewis, Sharpe & Warlow, 1998). A randomised trial was adopted to evaluate a stroke family care worker. 417 patients were identified and 376 were recruited for the study of which 246 had a caregiver. Both the patient and caregivers completed two measures of emotional distress. It was found that emotional distress was common in caregivers, they were more likely to be depressed if the patients were severely dependent or emotionally distressed themselves. Interestingly, female caregivers were more anxious than males but this was not clearly related to the patient's dependency. Therefore, this research indicates that caregivers need to be given more support since they seem to be at a greater risk of poor emotional outcomes. Furthermore, it has been identified that similar emotional outcomes and psychological morbidity have been reported by caregivers who care for the elderly, stroke and also children with severe disabilities (Murphy, Christian & Caplin, 2007).

# Thanks



This work would not have been possible without the support of numerous people who gave up their time to talk to us about their experiences - thank you to everyone who completed the survey and contributed. We would also like to thank all the professionals that we worked with throughout this project. Special thanks go to Hampshire County Council and the Care at Home Steering Group for their support and assistance throughout the project.

We would also like to thank all of the carers, both professional and informal, currently working in Hampshire for their continued dedication to the wellbeing of our local community.

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