

**Care Act 2014:
The impact on people accessing
assessments for social care support in
Wakefield District**

January 2017



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Introduction

Healthwatch Wakefield is an independent organisation that gives local people a voice about their experiences of health and care services. We listen and bring this information together to recommend ways of improving services to the people who plan, buy and deliver them.

The purpose of this project was to gain an understanding of the local impact of reductions in Local Authority funding alongside the implementation of the new requirements of the Care Act 2014. We specifically wanted to look at the provision of information, advice and signposting when people are assessed as not eligible for formal social care support. We wanted to understand people's experiences when accessing the advice and information service provided by Social Care Direct, Wakefield Council's advice and information service, and what ongoing needs or issues they may have following their assessment.

What is the Care Act?

In April 2015 The Care Act 2014 replaced most previous law regarding carers and people being cared for. It outlines the way in which local authorities should carry out carer's assessments and needs assessments; how local authorities should determine who is eligible for support; how local authorities should charge for both residential care and community care; and places new obligations on local authorities.

So, the Care Act 2014 sets out in one place, local authorities' duties in relation to assessing people's needs and their eligibility for publicly funded care and support. Under the Care Act 2014, local authorities must:

- carry out an assessment of anyone who appears to require care and support, regardless of their likely eligibility for state-funded care
- focus the assessment on the person's needs and how they impact on their wellbeing, and the outcomes they want to achieve
- involve the person in the assessment and, where appropriate, their carer or someone else they nominate
- provide access to an independent advocate to support the person's involvement in the assessment if required
- consider other things besides care services that can contribute to the desired outcomes (e.g. preventive services, community support)
- use the new national minimum threshold to judge eligibility for publicly funded care and support.

To view the Act or find factsheets that explain the following, please use the links below.

Factsheet 1: General responsibilities of local authorities

Factsheet 2: Who is entitled to public care and support?

Factsheet 3: Assessing needs and determining eligibility

Factsheet 4: Personalising care and support planning

Factsheet 5: Charging and financial assessments

Factsheet 6: Reforming how people pay for their care and support

Factsheet 7: Protecting adults from abuse or neglect

Factsheet 8: the law for carers

Factsheet 9: Continuity of care when moving between areas

Factsheet 10: Market oversight and provider failure

Factsheet 11: Transition for children to adult care and support

Factsheet 12: Prisoners and people in resident in approved premises

Factsheet 13: Appeals Policy Proposals

Care Act 2014 www.legislation.gov.uk/ukpga/2014/23/contents/enacted

Care Act 2014 Factsheets www.gov.uk/government/publications/care-act-2014-part-1-factsheets

Methodology

In early 2015 Healthwatch Wakefield worked with Wakefield Council and Leeds Beckett University to design the approach. It was decided to take a two stage method; firstly an initial survey of people who contacted Social Care Direct and who were assessed as not eligible for support but still having some needs. The second survey was intended to follow up those individuals around three to six months later, to find out whether the advice, information or signposting had been useful and whether or not they had followed it up.

Healthwatch Wakefield and Leeds Beckett University worked with Social Care Direct, based at Wakefield Council, to agree the best way of identifying the relevant individuals and asking their permission for Healthwatch Wakefield to contact them. It was decided that Social Care Direct staff would offer either a follow up telephone interview with Healthwatch Wakefield or to have a reply paid survey posted out to individuals who were assessed as meeting the criteria for the scope of the work. Healthwatch Wakefield provided Social Care Direct with copies of the survey, covering letters and reply paid envelopes for this purpose. Initially it was expected that numbers would be high; estimates were that around 200 people per month would meet the criteria for the survey.

Points to consider

Despite original estimates of high numbers of people being referred to the initial survey, the numbers in reality were very small. The survey ran for a period of four months in late 2015 but only generated around 20 interviews or completed forms. Given the low level of response, it was thought that it would be better to regroup, work out the approaches with Social Care Direct and run the initial survey again. This was done in the summer of 2016 but again, despite the best efforts of people involved, only generated another small number of responses.

Given the lack of success with the approach, the decision was made to proceed to the second stage of interviews using the information gained from the first two phases of the initial survey.

In most instances therefore, there was a long period of time between the information collation processes of the first and second surveys. Unfortunately, this meant that some participants no longer wanted to participate or could not remember the reason why Healthwatch Wakefield was contacting them, which means that numbers for direct comparison are low.

Who filled in the survey?

Survey One

Total Responses **46**

Person 44% / Carer 56%

Mainly elderly - 39% aged 85 and over; 24% were aged 76 to 85

59% were female

98% were White British

71% have a physical or mobility disability
41% have a long standing illness/health condition
36% have a mental health condition

77% retired

Survey Two

Total Responses **17**

Person 47% / Carer 53%

Mainly elderly - 35% aged 85 and over; 35% were aged 76 to 85

65% were female

94% were White British

Summary findings

Survey One

- The majority of people who participated in this research were elderly, retired and had a disability that was either physical or mobility related.
- Most people had been called by a member of staff, 58%, or had a face to face meeting, 49%.
- Help varied from information provision, referrals for aids and home adjustments, or being told care provision would be required. 50% acted upon the advice given to them.
- Of those people who had not acted upon advice provided, the largest majority felt that their situation, or the process, had come to a standstill.
- 40% felt the service could be improved upon, such as the assessment process, eg the inadequacy of a telephone assessment as opposed to a face to face assessment. Other people said that response times could be improved and that more clarity would help, for example an explanation of the role of the person they are speaking to or the processes involved.
- 62% said they were happy with the service they had received, and comments were recorded about the helpful and professional staff.

Survey Two

- 75% had followed up on the advice given to them by Social Care Direct. However, 50% were still unsure if this advice was what they really needed.
- 67% of respondents felt that their situation had worsened; with a mixed response regarding support needs being met.
- There was a 50/50 split response as to whether clients would contact Social Care Direct again. Some of the people who would not use the service again stated they would approach their GP for help instead.

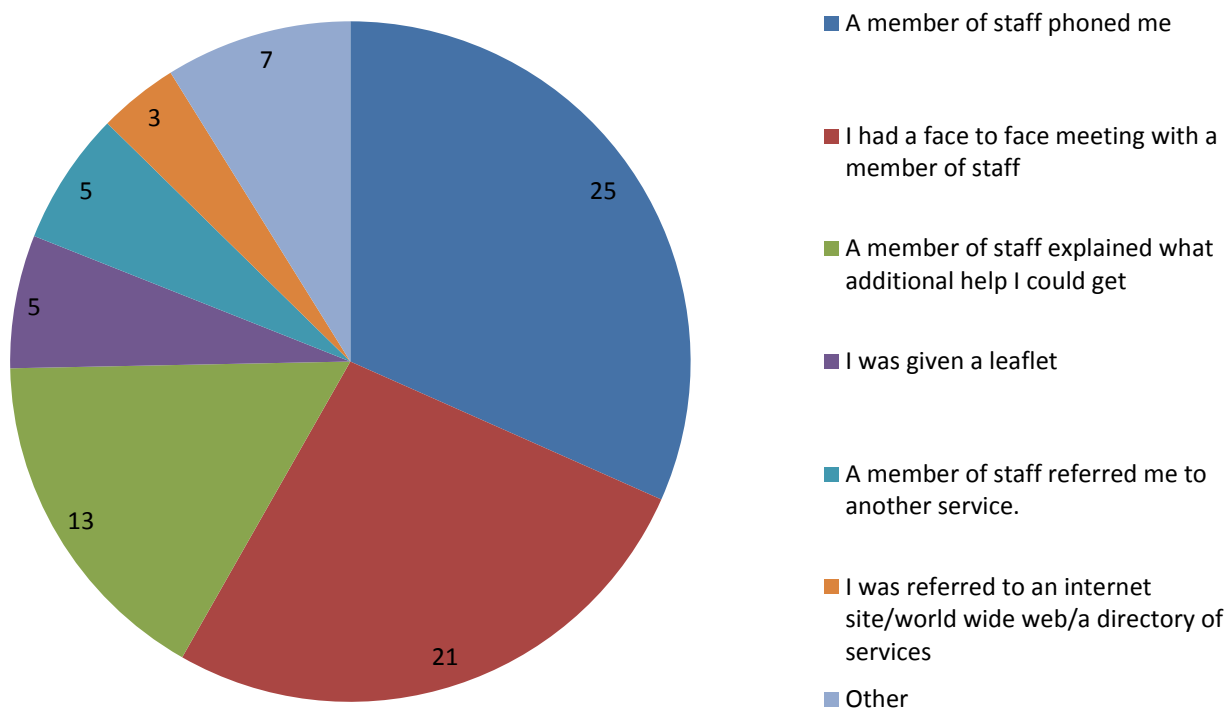
Please note that the low response numbers and other challenges experienced in this work mean that the findings should not be taken as robust and cannot be generalised with confidence.

With the above proviso in mind, it is still possible to see that the responses on the whole show mixed experiences and individual situations seem generally to have worsened rather than improved since their contact with Social Care Direct. We feel that there is still a need to look into this issue further, but that the approach we chose has not been the most effective.

Responses – Survey One

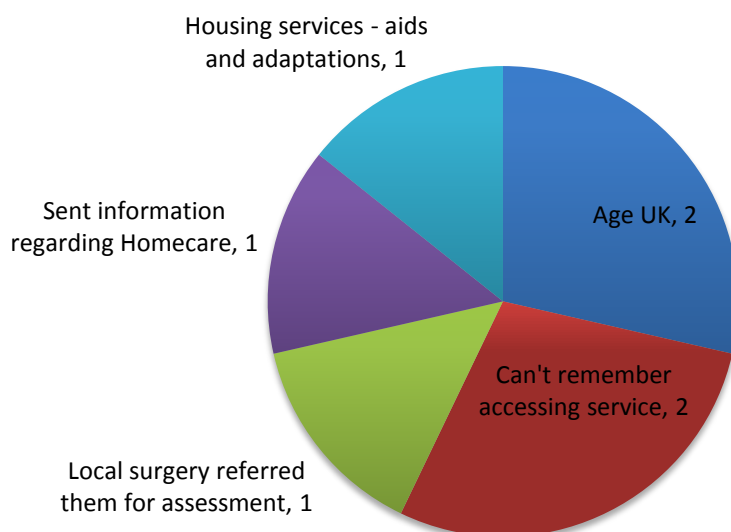
How were you offered advice and information?

43 people responded to this question and were able to tick more than one option



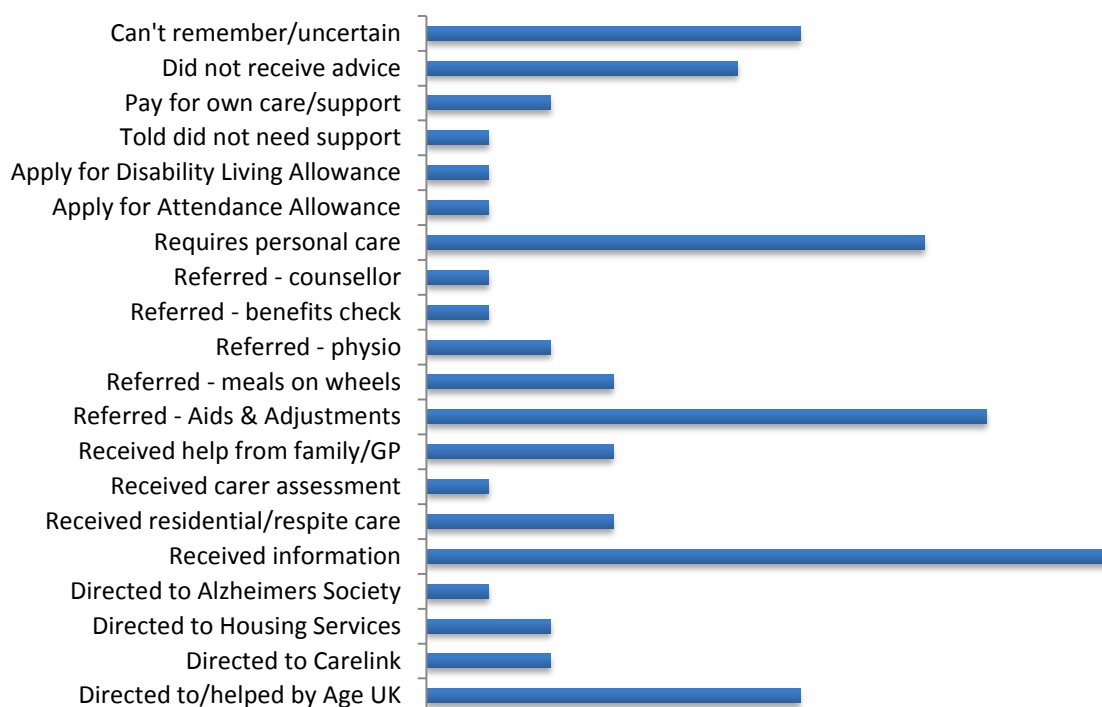
Respondents could tick more than one option and, excluding those who said 'other', eighteen people, 46%, received multiple options from the above list.

Seven people said 'other' which included:



What information and advice did you receive?

44 people replied to this question



Top 3 responses:

- 16% received information
- 13% were referred to Aids and Adjustments
- 12% required personal care

Examples:

"She asked me what additional help and care I needed; also she asked me who looks after my physical and personal needs throughout the day. She also explained about the care that was available."

"Client had been hospitalised and query whether it was safe for her to be at home. Exploring options to support at home or go into residential care. Received appropriate information and got residential care."

"Provided with a care package - carers coming in the morning and a 6 hour "sitter" service (Crossroads), respite for 8 weeks in place (in a care home) "As soon as I asked for help I got a social worker and she is very good."

"Information on aids in the home e.g. walking frame, shower stool. Referred for physio. Advice on all other services available and referral for benefits check."

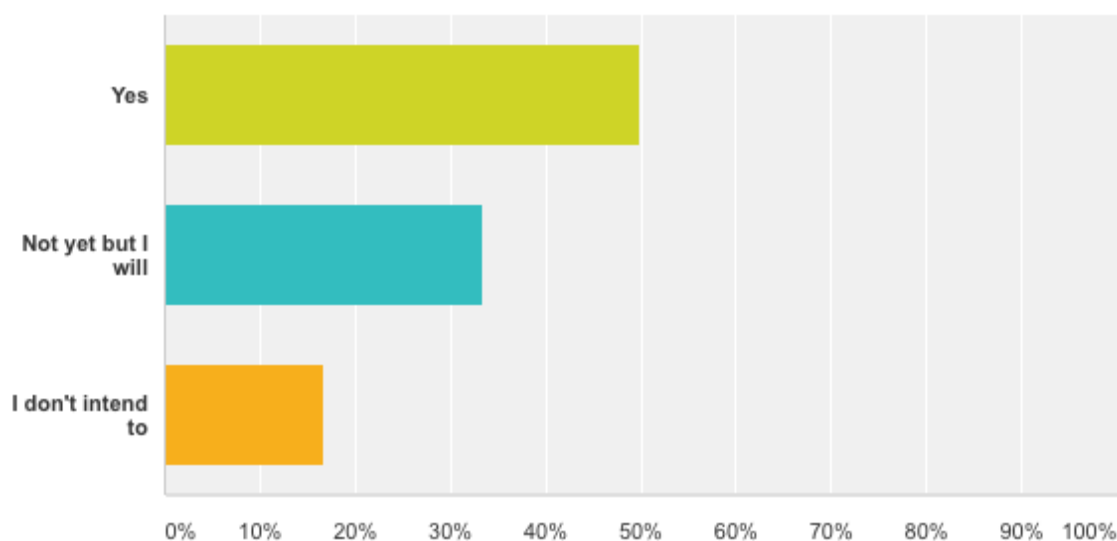
"His wife was assessed by a social worker after a referral from Age UK and was given a toilet frame, commode and her husband purchased a walker for going outside and a Zimmer frame for indoors. While the social worker was there, she assessed the husband and helped him to claim for attendance allowance which he is now receiving. They are also getting some regular contact and support from Age UK."

"Age UK team member excellent. Explained fully and offered help with care. Social services not really helpful. Too much red tape."

A full list of responses can be found in the Appendices.

Have you already acted on this advice?

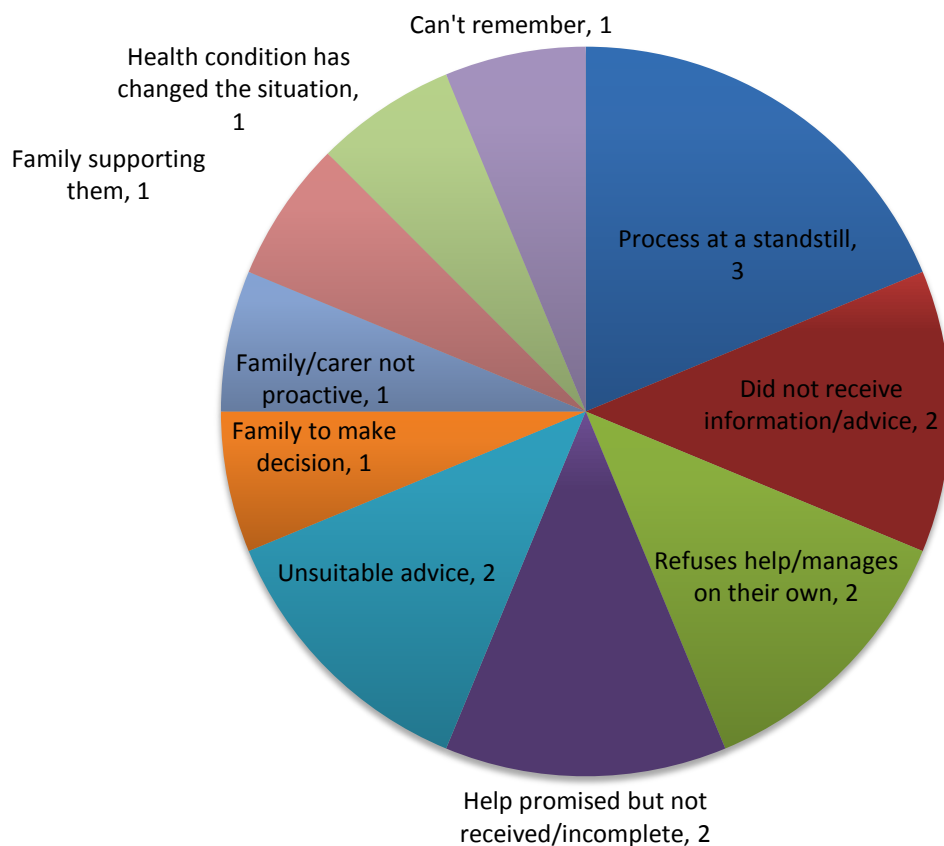
36 people replied to this question



- 50% of respondents had already acted upon the advice given to them

If you do not intend to act on this advice and information, why?

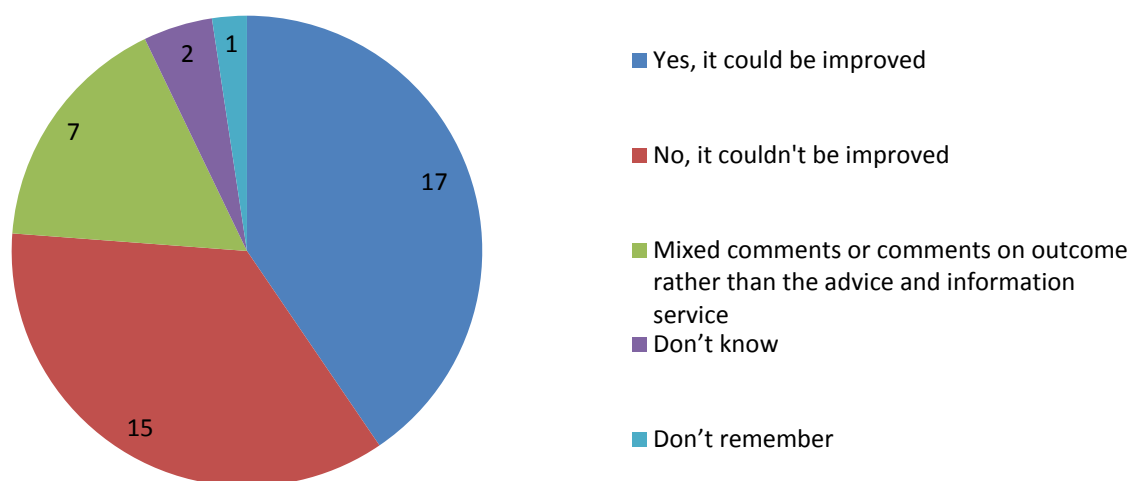
16 people replied to this question



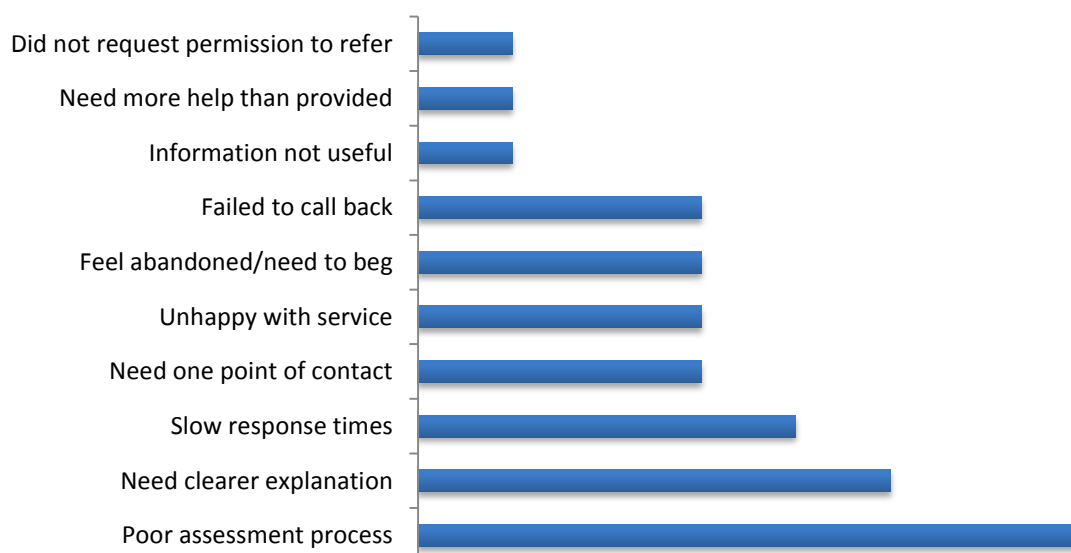
“My mother was admitted to Pinderfields...to treat a chest infection in Jan/ Feb of this year. She was then referred to a hospital based social worker and is now back home. She is being helped by the Reablement Team, to be followed by a care package.”

In your opinion could the advice and information service be improved?

42 people responded to this question



Yes, it could be improved:



"We thought that we could get some support from somewhere, but we feel that we are on our own. We don't feel that mum was 'assessed'; no one came out to see her, so how could they do it over the phone?"

"Social Care Direct could give out timescales for visits."

"Would have been useful if they had called me back. Feel like I am an old man and they don't care. How come I'm still in agony and if I had had my hips done I would not be. Better contact needed."

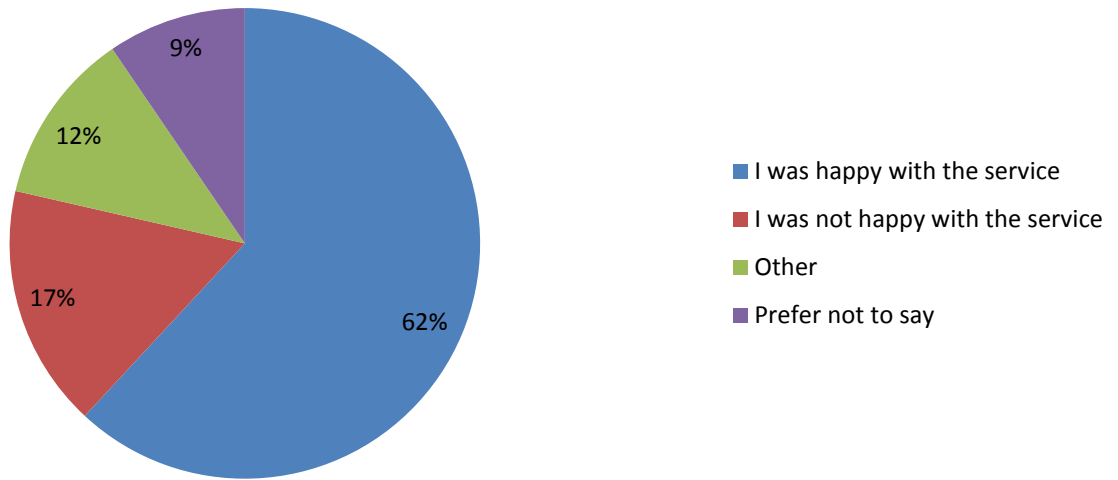
No, it couldn't be improved:

There were a good number of positive comments about the Social Care Direct service staff.

"Everyone I have seen have been extremely helpful, pleasant and friendly and fully explained about the services which could be supplied."

How would you rate the service you received overall?

42 people responded to this question



- **62% said they were happy with the service they received**

Responses – Survey Two

Most respondents, 75%, had remembered contacting Social Care Direct and the same percentage of people had followed up on the information given to them. Two people had informed Healthwatch Wakefield that they had not taken Social Care Direct advice. One person felt that they had not been given any advice or information, and the other said the terminology used was too jargoned.

“I tried to but found their advice unclear and "industrial".”

If advice was followed up, was it what you needed?

Six people responded to this question and their answers provided a mixed review of the Social Care Direct advice. Half were not sure the advice they had been given was what they really needed, but two felt it was ‘just what I needed’.

Since speaking with Social Care Direct, how is your current situation?

Six people replied to this question. No one felt that their situation had improved and four people felt that their situation had worsened.

“It’s only because my mum didn’t like the carers, so she’s ended up moving in with me. It’s not their fault, it’s my mum’s personality.”

“My mum’s condition has got worse and we’ve had to put her into respite care and pay extra to keep her there... social services want to send her home even though carers are not available for six weeks.”

“I’m having to pay for help. My personal situation has improved but I’m financially worse off.”

Do you still have support needs that are not being met?

Eight people replied to this question providing mixed responses of ‘don’t know’ and ‘not sure’, two people said ‘no’ and one said ‘not really’. Two people said ‘Yes, definitely’.

“We’re fine. Whenever we’ve needed something, they help. We’ve got all the equipment we need to look after my mum.”

“I feel this lady needs more help, but if she doesn’t want it, what can I do about it?”

“Mother’s Alzheimer’s is worsening but all they want to do is send her home, when she should be in a care home.”

If you need support in the future, would you contact Social Care Direct again?

When Healthwatch Wakefield asked people if they would contact Social Care Direct should they need support in the future, half replied yes and no respectively. Those people who would not contact the service again provided the following comments:

“I’ll probably contact my GP.”

“The doctor can help.”

“I would deal with the company who I am paying, as I am happy with them.”

“It depends on what happens.”

“They were fine. I contacted them on behalf of my cousin and they were helpful, pointing me in the right direction.”

Appendices

1) Surveys

2) Full responses to:

What information and advice did you receive?

In your opinion could the advice and information service be improved?

YOUR CARE NEEDS ASSESSMENT AND THE ADVICE AND INFORMATION SERVICE

We are asking you for your help in completing this survey because you have been offered an advice and information service following your social care needs assessment by Wakefield Council.

1. Are you the person whose needs were assessed or are you a carer of the person whose needs were assessed?

☐ I am the person	☐ I am the carer
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2. Please provide the following information about the person whose needs were assessed.

Postcode

What is your age?

☐ 16 - 25	☐ 26 - 35	☐ 36 - 45
☐ 46 - 55	☐ 56 - 65	☐ 66 - 75
☐ 76 - 85	☐ 86 +	☐ Prefer not to say

What gender are you?

☐ Female	☐ Male	☐ Prefer not to say
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Transgender - is your gender identity different to the sex you were assumed to be at birth?

☐ Yes	☐ No	☐ Prefer not to say
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What is your ethnic background?

Asian, or Asian British ☐ Chinese ☐ Indian ☐ Pakistani ☐ Other	Black, or Black British ☐ African ☐ Caribbean ☐ Other	Mixed/ multiple Ethnic groups ☐ Asian & White ☐ Black African & White ☐ Black Caribbean & White ☐ Other	White ☐ British ☐ Gypsy/Traveller ☐ Irish ☐ Other	Other ☐ Arab ☐ Other
If any other ethnic background, please state here:			☐ Prefer not to say	

Do you consider yourself to have a disability? Please tick all that apply

Under the Equality Act 2010 a disability is defined as 'a physical, sensory or mental impairment which has, or had a substantial and long term adverse effect on a person's ability to carry out normal day to day activities'.

☐ Long standing illness or health condition e.g. cancer, diabetes, HIV, etc		
☐ Learning disability/difficulty	☐ Mental Health condition	☐ Physical or mobility
☐ Hearing	☐ Visual	☐ Prefer not to say
☐ Other (please state)		

How would you describe your employment status?

3. How were you offered advice and information? Tick as many as apply

☐	A member of staff explained what additional help I could get
☐	A member of staff phoned me
☐	I had a face to face meeting with a member of staff
☐	I was given a leaflet
☐	I was referred to an internet site/world wide web/a directory of services
☐	A member of staff referred me to another service. If so which service:
☐	Other (please state)

5. What information and advice did you receive?

6. Have you already acted on this advice?

☐ Yes	☐ Not yet but I will	☐ I don't intend to
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7. If you do not intend to act on the advice and information you have received please tell us why?

8. In your opinion could the advice and information service be improved?

9. How would you rate the service you received overall?

☐ I was happy with the service	☐ I was not happy with the service	☐ Prefer not to say	☐ Other
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10. We are keen to understand whether the advice you received helped meet your needs. Would you be willing to answer some questions again in 3 months' time? If you are can we telephone you then for a follow up interview?

☐ Yes	☐ No
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If yes, please provide your name and a contact telephone number:

Social Care Direct: Follow-up Survey Questions

1. Can you remember contacting the Social Care Direct service a while ago to ask for some help?

Yes / No (If no, a bit of prompting based on their form)

2. Would you mind telling me whether or not you followed up their advice to? (whatever it was)

Yes I did/ No I didn't

If not, can you tell me why you didn't? (Free text)

If yes, can you tell me whether it was what you needed?

- Just what I needed
- Useful, but not what I really needed
- Not what I needed
- I did not want the support
- Not sure

(Free text)

3. Since you spoke to Social Care Direct, would you say your situation has:

- Improved
- Got worse
- Stayed the same

(Free text)

4. Do you feel that you still have support needs that are not being met?

- Yes, definitely
- To some extent
- Not really
- No
- Not sure / don't know
- Not applicable

5. If your answer was "yes definitely", or "yes to some extent", please explain what you need support with.

Free text

6. If you needed support in the future would you contact Social Care Direct again?

Yes / no

If not, why not? (Free text)

7. Is there anything else you would do instead?

- I would ask a relative/friend for help
- I would go to my GP
- I would contact another organisation – *name of organisation in free text*
- Other (free text)

8. Is there anything else you would like us to know about your experience with Social Care Direct?

Free text

What information and advice did you receive?

1. His wife was assessed by a social worker after a referral from Age UK and was given a toilet frame, commode and her husband purchased a walker for going outside and a Zimmer frame for indoors. While the social worker was there, she assessed the husband and helped him to claim for attendance allowance which he is now receiving. They are also getting some regular contact and support from Age UK.
2. Age UK called me but did not provide any support. They directed me to the Alzheimer's Society who just sent out some leaflets with information about private carers and organisations that mum could have gone to but she doesn't like that kind of thing.
3. "Independent living advice" - I was told that I did not need any support. Not long after, I had to get carers in as I was struggling. Now they come morning and evening - my daughter sorted this out for me - I did not know what to do.
4. Age UK team member excellent. Explained fully and offered help with care. Social services not really helpful. Too much red tape.
5. Information about carers/ care homes and other sources of support but neighbour refuses all help
6. Staff said they would call back to provide some more information and feedback
7. Told that I had too much money in the bank and that I would need to pay for any additional services myself. Client cannot remember being directed to any other services.
8. As above, can't remember accessing service
9. Client had been hospitalised and query whether it was safe for her to be at home. Exploring options to support at home or go into residential care. Received appropriate information and got residential care.
10. Referral to aids and adaptations and housing services
11. Get better locks on doors, bolts, chains, etc.
12. No additional help offered and was advised that would have to pay for any help. Carer felt that they needed more help for client but because they were not on any benefits they were not eligible to get this help.
13. Can't remember
14. Therapy exercises provided - didn't seem helpful. Walking stick Trying to get help to put in walk in shower (son and GP are helping with this)
15. Client was not clear if her dependent actually received an assessment
16. None yet
17. Client not 100% clear about service. Reported that some people came and asked lots of questions. Client didn't feel that she needed the service and was concerned about associations with Fieldhead Hospital "I've lived in Wakefield all my life, so I know what that means"
18. Visit/ assessment from a member of the health and wellbeing team. Given contacts for charitable services e.g. Alzheimer's society, Carelink, housing etc.
19. The client could not recall any specific advice but did say they had specifically asked about a wet room installing in the home and this had been granted. They did however seem confused by their initial telephone assessment saying there were "lots of questions".
20. Client needs everyday personal care. Her daughter asked social care direct for her to be assessed. Client was offered 21 day care, days out, meals etc.
21. Cannot remember
22. List of providers for private help e.g. cleaning. However, the list does not state what services each provider offers. This would help enormously.
23. Wasn't really able to help at this moment in time due to other issues
24. Information about what aids and help were available.
25. Referred to a counsellor Leaflets sent including handyman and Turning Point
26. District nurse/ hospital told them that they needed to get social care in place as soon as possible following

diagnosis of brain tumour in mum. Client contacted social care direct. Spent 30 mins on the phone explaining circumstances. Received call back 3/7 later. Rang back and got through to the call centre. 2-3/7 before anyone responded. Ended up ringing to speak to a manager - didn't end up speaking to one "I'm ringing up asking for help and I'm not getting any". That night a social worker rang up and came out to see me that evening and completed an assessment. From that point on "it was really good" (staff member called Eddie). The re-enablement team got involved, an OT carried out an assessment, carers started. We were also advised that CareLink could help in 1-2 weeks fitting sensors etc. After Eddie came mum went to a care home for respite to cover holiday and family was able to go on holiday. Care home seemed run down - no curtains in the room and a hole in the wall where mirror used to be. Clients were not charged for this service. CareLink fitted sensors to mums house whilst family were on holiday. Problems with this system as it was very sensitive and son kept getting called. Advised by CareLink that they could change it so that he was only called if there was what they considered to be an "emergency". These falls were unusual and mum ended up in hospital following a fall in the bath. Mum still in hospital now and they are saying she now needs 24hr care

27. Provided with a care package - carers coming in the morning and a 6 hour "sitter" service (Crossroads), respite for 8 weeks in place (in a care home) "As soon as I asked for help I got a social worker and she is very good."
28. I wasn't provided with an assessment but was advised to call back. Not useful as I forget things
29. A member of staff referred me on to meals on wheels (RWVS)
30. Advised to contact age UK as mum's problems not severe enough to warrant social care
31. To contact the adaptations team
32. The client could not recall any specific advice but did say they specifically asked for a wet room installing in the home and this has been granted. They did however seem confused by their initial telephone assessment saying there were 'lots of questions'.
33. Client asked for a ramp but thinks the space in his garden is insufficient once the steps have been removed. He was advised this by Social Care Direct.
34. Client needs everyday personal care. Her daughter asked Social Care Direct for her to be assessed. Client was offered 21 day care, days out, meals etc
35. Personal care is requested - dressing, meals, carer required to come into the home. Was advised face to face assessment would take place. The face to face assessment took place 21/10/15. Carer was happy that this service occurred. She was not present at the face to face so will gather information for Healthwatch to call again.
36. Meals on wheels, extra carer
37. Advised to claim DLA, meals on wheels, carers
38. Carers = two needed. The assessment confirmed that two carers were necessary and would be sent in due course.
39. She asked me what additional help and care I needed; also she asked me who looks after my physical and personal needs throughout the day. She also explained about the care that was available.
40. Cannot remember
41. Care option for my mother
42. How to access benefits and home care support through CAB
43. Suggested a few things e.g. pill dispenser and other services
44. I do not recall receiving any advice
45. Somebody is going to come and meet myself and my mother. When?
46. They (2 of them) explained that they would bring me a monkey wrench (or similar) to allow me to take lids off things like mint sauce, HP tomato sauce etc

In your opinion could the advice and information service be improved?

1. Don't think so, it's been very good
2. Yes - we thought that we could get some support from somewhere but we feel that we are on our own. We don't feel that mum was "assessed" - no-one came out to see her so how could they do it over the phone? I felt that they did the best with what they had.
3. Yes
4. Yes. One point of contact. Not passed from one service to another.
5. No
6. Yes, we got some information that we needed but not a lot. Didn't get useful information and no call back.
7. Client feels that in the end he got through to someone (a social worker) who knew what they were doing. Client has the SCD number "in case [he] gets into further difficulties" and feels that he would be able to call them.
8. Wanted general information and advice about any support that may be available for me. Don't think service could be improved really.
9. No information was exactly what was required.
10. No was happy with service.
11. Information was useful
12. Medical consultant advised contact with Macmillan nurses but they said "you don't need us yet". Macmillan nurses came to the hospital 2 weeks before the client died but the carer felt that this input was too late.
13. No felt needs were met. Times of services were not great
14. Not clear about who people were/ what their roles were.
15. Phones not being answered - left messages and no-one getting in touch from hospital SW department. Care for carers - very helpful.
16. Don't know
17. Would prefer to have been asked if wanted to be referred.
18. I was unhappy with the service we received until mum was admitted to hospital - at that point she was picked up by the system and her needs were being addressed.
19. Client felt that both himself and his son could benefit from a wheelchair ramp but fears that this need has been overlooked.
20. Advice and information was excellent, could not be improved upon.
21. Don't remember
22. Professional and courteous staff. Excellent service.
23. Although the telephone call was helpful I feel that a face to face meeting would have been more beneficial for me
24. The service is very good
25. People getting back to you sooner; Lack of consistency with staff contacts; Client had holiday booked before mum's diagnosis and asked about respite. Client advised it would be available if they paid £700-800/ week - more than the cost of their holiday. Assessment could have been more thorough and included assessment of carers needs as he is also carer for 2 small children. Professionals could have been clearer about how long things would take from the start. Having to "beg" before I got help. "You think that when you need it will be there". "District nurse advised me - you need to lay it on thick or you will just get fobbed off." "You expect social services to be busy but I've been led to believe that they will be there for you when you need them Struggle to get respite care in place. Once care was in place things improved. More support earlier to help mum to stay as independent as possible for as long as possible and in her own home before she went into respite
26. Inform clients from the outset about how long things will take, then you are not (as the client) having to chase people up.
27. Would have been useful if they had called me back "feel like I am an old man and they don't care". "How come I'm still in agony and if I had had my hips done I would not be." Better contact needed.
28. The blue badge department refused to renew my blue badge which I got after I had a stroke a few years ago. When my eyesight was affected and I had to give up my car so now on the very rare occasions I am

taken out to the supermarket etc. I have to hang around on my own while whoever took me hunts for a parking spot and I do feel a bit vulnerable at times. No money to be gained by having the card so I can't understand this.

29. It was appropriate
30. Client felt that both himself and his son could benefit from a wheelchair ramp but fears this need has been overlooked.
31. Client was happy with the telephone service. He said Social Care Direct staff member was very clear and helpful. The only way the service could be better is to grant the ramp and respond to his needs.
32. Advice and information was excellent - could not be improved upon.
33. Social Care Direct could give out timescales for visits. Staff were helpful and clear.
34. Very helpful, very informative
35. No - very happy - no waiting time = thorough advice and care
36. Promised 2 carers, service user only had one carer arrive. Received telephone call to say carer service had been reduced. Now this lady will struggle to look after her husband. More care required.
37. Yes
38. Don't remember
39. Yes - I felt the person giving advice was fobbing me off
40. The person should have been visited in order to do a proper assessment. She is 91 years of age with moderate dementia. The doctor at Fieldhead suggested this action to try and get a little help for her in the morning.
41. Yes Yes Yes Far too slow, long winded.
42. Didn't ask much about ADHD/deja vu if at all. This is my major psychological illness or it must be Alzheimer's. Seems strange for them to be coming 4 days before my retirement on 09/12/2015 (a bit suspicious) Nobody seems to know!

Contact us



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