

# Future of Home Care Services



December 2015



# Introduction

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Home care services are of concern for most people as we grow older. We all want to go on living our independent lives for as long as possible but there may come a time when we need help to care for ourselves and/or for other family members. Home care has been a continuing issue and theme of discussion for the Elders Council for many years and we were delighted when the opportunity arose to work in partnership with Newcastle City Council and Healthwatch Newcastle. We were asked to gather the views of people not currently in receipt of home care services about what their expectations might be of a home care service. This report states the findings of an event in which 57 people gave their views.

## Background

It was agreed by the three partners that this event would:

- provide an opportunity for older people to discuss information, guidance and expectations of home care that would enable them to live independently at home
- inform Newcastle City Council's views about commissioning home care services
- inform Elders Council's on-going work on health and social care
- provide Healthwatch Newcastle with views about anticipated need for home care

These objectives were important as the event needed to inform the work of Newcastle City Council in their development of a market position statement on home care and their recommissioning process of providers of home care services in 2016. Healthwatch Newcastle was also carrying out some research on home care as one of their priorities for 2015/16. This piece of work involved gathering the view of people using home care, paid care workers, relatives and social workers. Healthwatch Newcastle also spoke with a number of organisations including providers and commissioners of services. It was therefore timely that the Elders Council were invited to make a contribution to this work in the region, given that we consist of over 2000 older people who are the largest group of users of such services.

Invitations were sent out to the following organisations:

- Age UK Newcastle
- Newcastle Society for Blind People (NSBP)
- Chain Reaction
- Search Project
- Health and Race Equality Forum (HAREF)
- Newcastle Disability Forum
- Wa Hong (formerly South Mountain Chinese Older People's Association)
- Deaflink

The intention was to reach the widest range of adults who might use home care services, not just people over 65. Of those organisations, people attended the event from NSBP, Chain Reaction, HAREF, Wa Hong, Deaflink and the Elders Council itself. The 57 people who attended the event therefore resulted in a rich mix of people from different parts of the city representing a diverse range of backgrounds and including those with physical and sensory impairments.

## **Format**

The event was called *'If I ever need Home Care, this is what I would expect....'* and held in the morning of 3<sup>rd</sup> December in the Bewick Room at the City Library to ensure full accessibility and convenience for as many people as possible. Lunch and light refreshments were provided as well as formal support for those with particular requirements such as language and speech interpretation. The format of the session was designed to give maximum opportunity for the contribution of ideas. Table and chairs were set out to promote small group discussion on the different stages of providing home care such as checking prior knowledge, debating access to services, discussing what a good quality service might look like and what might dissuade people from using a service.

The event was chaired and introduced by a member of the Elders Council Board, Maureen Tinsley. This was followed by a short presentation by the Lead Commissioner from Newcastle City Council on the commissioning of home care services. Afterwards, participants were invited to consider what they would want from services should

they need them. There was a wide range of opinion and experiences applied to answering this question with the help of a few brief scenarios to stimulate discussion. Members of the Elders Council, Healthwatch Newcastle and a worker from the Wa Hong organisation provided the facilitation in seven small discussion groups to ensure everyone had a voice and to promote discussion. They also took notes to feed back key findings that would inform this report. One main point from each group was then presented to all participants before Healthwatch Newcastle and the City Council briefly responded to these points.

# Key Findings

These are provided under each heading of the dialogue that took place

## **Prior knowledge of home care**

Participants were asked what help might be available in a given situation and who might provide this. The overall understanding of home care services varied significantly. Many people assumed the City Council would provide home care, others thought the hospital or nursing services would be available to provide support while others mentioned family and friends would be in a position to help. There was little consensus about where to turn for information but overall there was a majority expectation that either health or social care services would initiate an assessment or support and that advice and information would be forthcoming.

## **Access to services**

Participants were asked how they might go about getting care for help with various activities such as getting up and bathing. Again, knowledge was very varied with many people saying that the hospital, GP or the City Council 'should sort it out'. Key points arising from access were:

- Access to information about supporting services at the time needed (and not just online) is essential.
- Information available should be in a variety of formats and languages with the opportunity for one to one discussion as follow up
- Many people acknowledged that they did not know where to go and how to get help
- Different avenues were mentioned by different people e.g. GP, Age UK, Information NOW, 'Social Services'.
- An understanding of payment for services varied with some people assuming state benefits would cover this while others knew the City Council might help
- Assessment of needs should focus on the whole person – not just on one specific problem. Health and social care should not be separated
- Personalised advice and guidance is needed to find the best way to appropriate – *and affordable* – home care.

## **Expectations of a good home care service**

There was general agreement about what participants would expect from home care such as:

- Assessments and provision of home care should be put into place quickly
- When home care services are arranged, it is desirable to have continued contact with a key worker to coordinate and review progress.
- Home care workers have to be well trained, adequately paid, and able to provide a reliable and trustworthy service.
- Independent living in a home of one's choice is a common aspiration, so services should enable this wherever possible by provision of aids and equipment as well as personal care.
- The ability for care workers to speak one's own language and for food to be culturally specific was mentioned.
- Services should be flexible and regularly reviewed. Should things change, it was important that people are given time and support to look at all the options.
- Good communication between all parties essential.
- Having sufficient time to build up a relationship between the paid care worker and the person needing help. It was important to be treated with dignity and respect and that the social aspect of receiving care was recognised.
- Recognition that a good service involved sufficient time for the work to be carried out.

## **A poor service**

Participants were asked what would stop them using a service and what a poor service might look like. Again there was some consensus about this though inevitably there were different degrees of emphasis.

- Discharge from hospital with no support at home in place – this still happens.
- Most people saw poor communication and lack of coordination as major problems.
- Language barriers and not being listened to.

- A poor attitude to the person or the tasks involved in home care e.g. being very unfriendly, being unkempt, rushing the job, ignoring the person, poor timekeeping.
- Concerns about badly paid care workers or alternatively, a service that was too expensive to afford.
- Inconsistency of care, too many different care workers coming in or poor management of the workforce.
- There were several other concerns that many people may not be able to afford to pay, that the state should help out more, and that there were not enough male care workers or a sufficient ethnic mix.

# Conclusion

There were certain overarching themes that emerged from all the groups and throughout the discussions. Access to information was seen as key but there was little consensus as to where and how this could be obtained. There were significant concerns about whether it would be available at the right time and in the right format. Personalised advice and support was seen as essential – from the starting point of assessment through to the delivery and experience of receiving care. Continuity, consistency and reliability were seen as major considerations alongside continued contact with a key worker. Those who knew of the Community Response and Rehabilitation Team and Reablement Service were very positive of this service and saw it as a model for the future. There was a widespread feeling that independent living in a home of one's choice is a common aspiration, so services should enable this wherever possible by provision of aids and equipment as well as personal care. However most people also recognised that home care workers have to be well trained, adequately paid, and able to provide a reliable and trustworthy service. Overall the main conclusion was that there are 57 varieties of views about home care but only one main brand, and that is person centred care.

However these findings have to be seen in the context of reduced funding for adult social care and, particularly with the current government, a changing relationship between the individual and the state. Although payment for care was not the primary issue under discussion, it was obvious that many participants had an expectation that health or social care would provide for them should they require personal care and support to remain in their own homes. The warnings given recently by sector leaders that funding shortages will result in more unmet need and service failings does not appear to be shared by ordinary people in Newcastle.

## Next Steps

The event revealed wide differences in information and understanding about what is available now, but some common expectations about what is needed in the future. This report will be sent to Newcastle City Council, Healthwatch Newcastle, the Elders Council Board and other participating organisations. However we would like to see the findings disseminated widely and future steps taken to promote a better-informed public. As part of our contribution to enabling this to happen, the Elders Council plans to organise information days on this topic in spring 2016.

# Acknowledgements

This report has been written by members of the Elders Council of Newcastle who were involved in the planning and delivery of the '*If I ever need Home Care, this is what I would expect....*' event. There are too many people to be named in this report but thanks are given to everyone who contributed, particularly to those who facilitated the event itself. Thanks must also go to Angela Jamson and Kathryn Williams from Newcastle City Council, Rachel Head from Healthwatch Newcastle and staff from the Quality of Life Partnership. Without their guidance and support, this event would not have taken place so successfully.



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