

Home care services

Research into the experiences of people
in County Durham

July 2022



About us

Healthwatch County Durham



This report has been produced by Healthwatch County Durham. We are an independent organisation whose aim is to help people get the best out of their local health and social care services, whether it's improving them today or helping to shape them for tomorrow. Everything we say and do is informed by our connections to local people and our expertise is grounded in their experience.

As a statutory watchdog, our role is to ensure that local decision makers put the experiences of people at the heart of their care so that those who buy (commissioners) and provide our services (NHS Trusts, GPs, the voluntary sector and independent providers) can benefit from what people tell us.

The Healthwatch network consists of 152 Healthwatch organisations across each of the local authority areas in England. It also has a national body called Healthwatch England based in London.

For more information about us please see click on this link: [Healthwatch County Durham](#)

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Summary

Investigating people's experiences of home care services was selected by the public as one of their top four priorities when we asked them to help us decide our workplan for 2020/21. We wanted to find out more about:

- What was working well
- How isolated service users felt
- What could be better
- If service-users felt safe at home

As our engagement work coincided with the outbreak of the COVID-19 pandemic we were forced to stop all our face-to-face engagement. We had to rely on people completing the survey for us on-line or by post. We found that given the frailty of the service users and everything else that was going on in people's lives the response was low. However, the people who took the time to respond provided some valuable information.

What came through strongly was that most people valued their care workers. Having friendly people coming into their homes to help them made a real difference. We heard more than once that some of the frustrations were difficulties in speaking to someone in the office and changes being made to care without being told in advance. Loneliness had been an issue for many. Some people told us care workers had been their only contact at times.

Although we feel we cannot give recommendations based on the size of the survey response, we have made some observations for commissioners and service providers to consider and these can be seen later in the report.

More than 3,300 people receive home care support in County Durham



People told us that having home care made them feel safe



Some people said they weren't kept up to date with changes to their care



Having care visits that are long enough to provide the care needed was most important to people



healthwatch
County Durham

Introduction

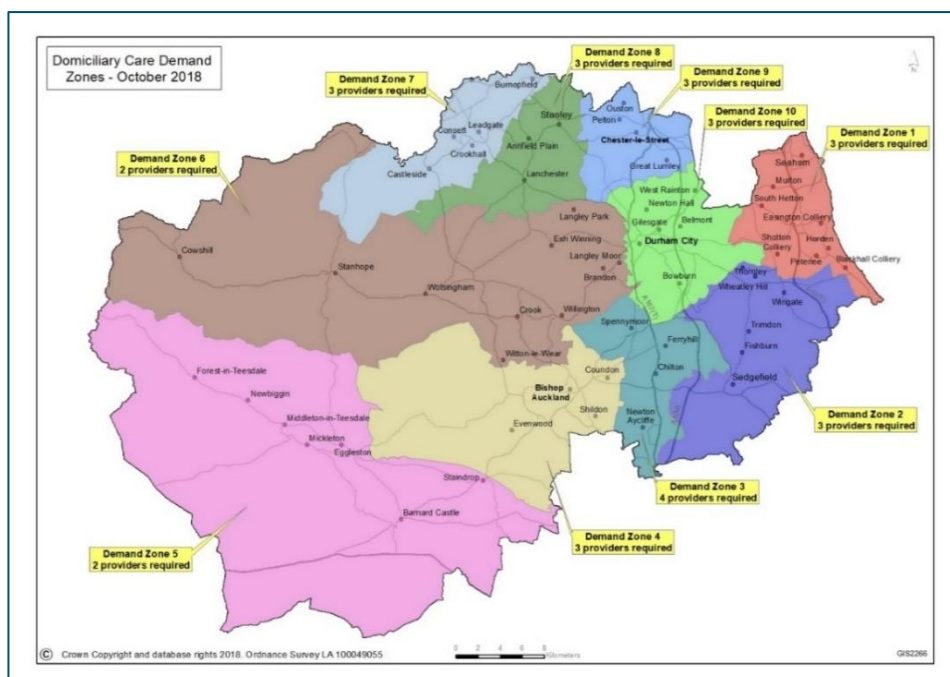
In 2020 Healthwatch asked the public in County Durham what their top priorities were for us to look at in 2020/21. There were seven proposals to prioritise based on intelligence gathered from our signposting work and information provide by partner organisations. Investigating people's experiences of home care services was selected by the public as one of their top four priorities.

According to the 2019 Office of National Statistics (ONS) survey nearly 21% of the population of the County is over the age of 65 yrs. and the prevalence of long-term conditions is above the national average for England, therefore there is high demand for home care services and they are a valuable support to allow people to remain living independently in their home.

According to the Durham County Council (DCC) Market Position Statement 2019-21, estimates suggest that 20% of the older population are mildly lonely and a further 11% are intensely lonely. For County Durham this would mean around 19,000 people aged 65+ are lonely and over 10,000 experiencing intense loneliness.

The current DCC framework for Domiciliary Care (Home care) commenced in April 2019 and consists of 10 providers working across 10 designated geographical zones, with the majority having 3 providers operating in each zone. The council also has a Spot contract which is used when existing providers on the framework cannot provide an individual package of support. The average annual spend on services is £22m, supporting approximately 3,300 service users and delivering approximately 1.45 million hours of support per year. As well as providers under the framework, there are also private providers delivering care across the county. They were also included in the survey.

The map below gives an indication of the zones as they were proposed prior to the new services starting.



Method

To gather views and experience of service users, friends and family we created a survey with help and feedback from DCC and a service user, who also volunteers for Healthwatch County Durham. The survey was:

- Completed by telephoning people who used the service or their family/friends
- Made available on-line
- Sent out in the post
- Delivered by service provider

We wanted to hear about the experiences of people accessing home care support and if the COVID-19 pandemic had any specific impact. This included, things that had worked well and if there was anything that could have been better, as well as finding out about how isolated people had felt. Our initial aim was to have a geographical spread of service users surveyed and to include some large and small support providers. Due to the response this was not possible. We worked with the council producing a letter & questionnaires to be used for the agreed sample of recipients of the service. Due to data protection the council agreed to send out letters to service users on behalf of Healthwatch, to ask them if they would be interested in participating, we made the survey available on-line for any service user or family member to complete. We also approached the care providers directly, including those not on the framework, and asked them to promote the survey with their service users.

Whilst we were disappointed with the response, we could understand this was an extremely difficult time for everyone. We also felt there was probably an element of distrust from people receiving correspondence as there was so much publicity about scams at the time.

The current care providers in the DCC framework and the areas they cover are listed below:

ZONE	PROVIDER
1 Peterlee & Seaham	Embracing Care Comfort Call Supportive
2 Trimdon, Wingate & Sedgfield	Embracing Care Premier Community Care Supportive
3 Spennymoor, Ferryhill & Newton Aycliffe	Dale Care Embracing Care Comfort Call Premier Community Care
4 Bishop Auckland, Coundon	Dale Care Premier Community Care Perfect Care

5 Barnard Castle & Teesdale	Dale Care Embracing Care
6 Crook, Tow Law & Weardale	Dale Care Perfect Care
7 Consett & Burnopfield	Kelly Park Ltd Orchard Home Care Services My Home care
8 Stanley & Lanchester	Dale Care Crescent Home care Kelly Park Ltd
9 Chester le Street & Sacriston	Embracing Care Comfort Call Crescent Home care Ltd
10 Durham City & Bowburn	Premier Community Care Perfect Care Kelly Park Ltd

Demographics

No specific groups were targeted apart from the fact they were all people in receipt of home care support

All the respondents (28) were White British, with 16 woman and 12 men responding. 79% (22) told us they had a disability.

The age ranges of people completing the survey were:

- 35-44 - 1 person
- 45-54 - 4 people
- 55-64 - 5 people
- 65+ - 18 people

Findings



We could not carry out our normal engagement, having face-to-face meetings, however we used other engagement methods to gather views and experience of service-users, families and friends by:

- Creating a survey which was used on-line
- Talking to people on the telephone
- Sending out surveys in the post
- Promoting the survey with home care providers

We received 28 responses to our surveys, and 68% were completed by the person receiving the care, 25% by partner or family member and 7% by a friend or neighbour.

Some of the comments people made in our survey:

It would make things better if there was:

*Better weekend cover
too many last-minute
changes made*

Being lonely:

*I have, but
thankful I have my
carers calling*

The best thing:

*Knowing that I am
seeing a friendly face
every week*

*Some of the carers need to
talk to her more when
they are in, instead of
using mobile phones, she
needs company and
conversation*

*I get on so well
with my carers.
They put a smile
on my face and
cheer me up*

*Carers are responsible
for all my personal
needs, I rely on them.
Having this daily
makes me less anxious*

*I would feel more at ease
knowing who was coming
to care for me. When my
package started, we used
to get paper notes which
was a good guide to me*

One thing that could be improved:

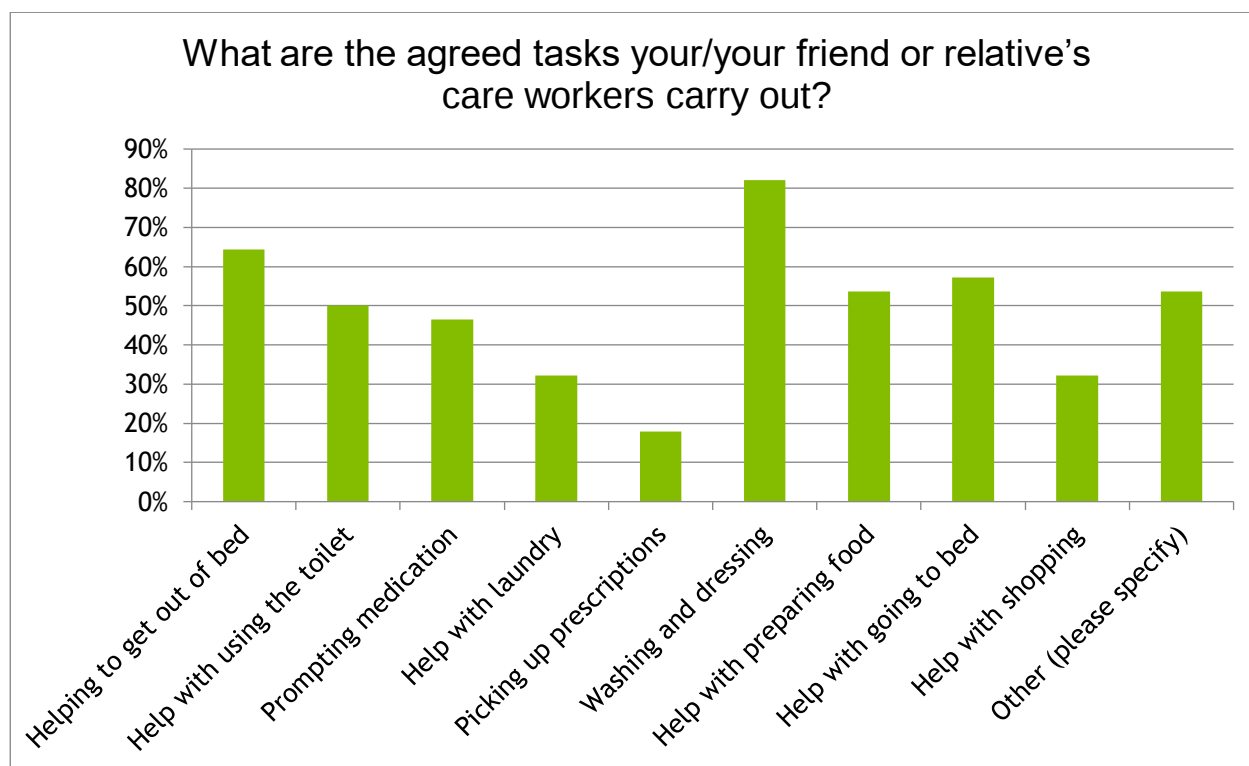
*Answering the phone in the office,
sometimes I'm trying to get through
for hours*

*Loneliness has been the
biggest enemy and I have felt
this at times*

The best thing:

*Putting on the pressure
stockings which I couldn't
do and my wife would
struggle to do*

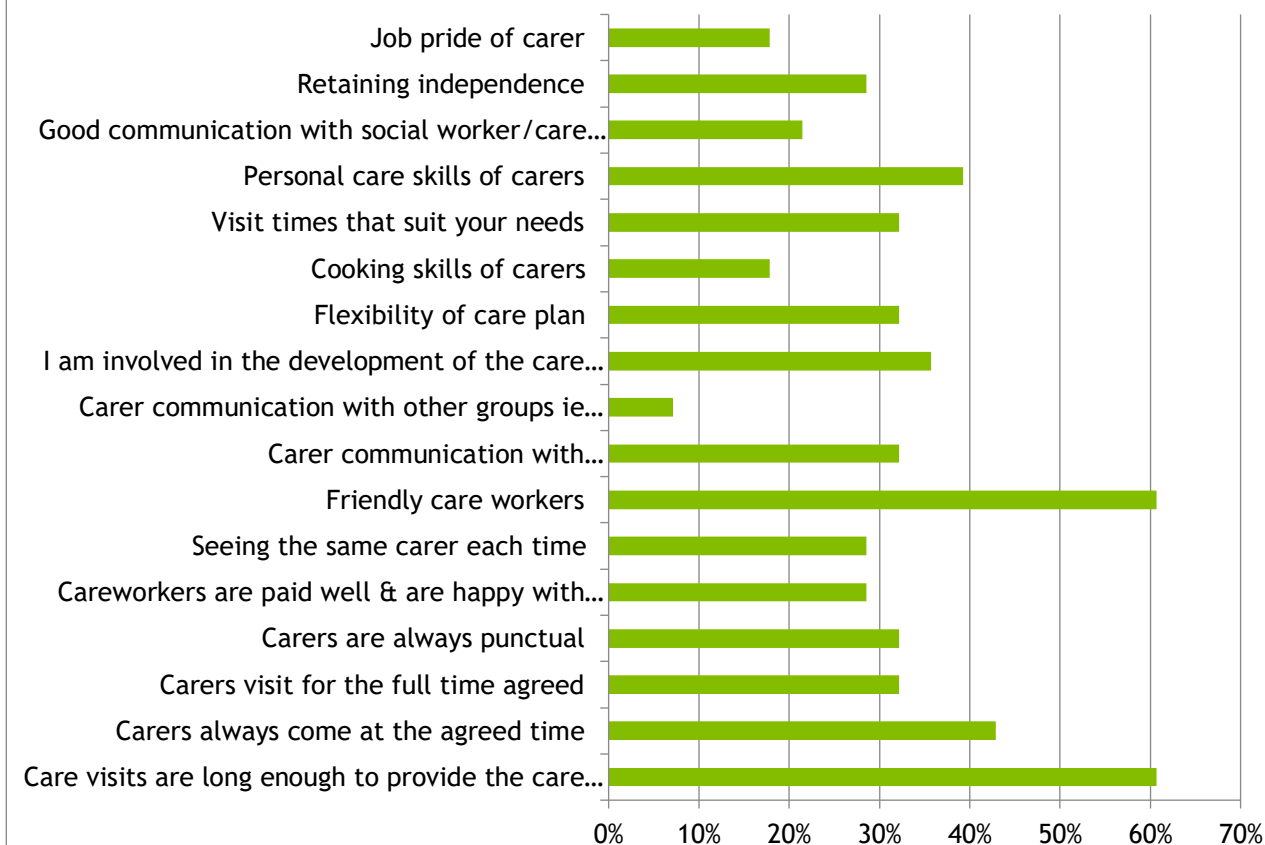
Below is a breakdown of the information provided:



*Other specified: Social time, companionship and use of hoists.

- Most people told us they received care every day of the week.
- The number of visits per day varied from 1 to 6, with 2 to 4 times per day being the most common.
- Most people told us their visit was for 30 minutes and 2 people said their visit was only 15 minutes.
- 79% of people receiving home care had 2 care workers per visit.

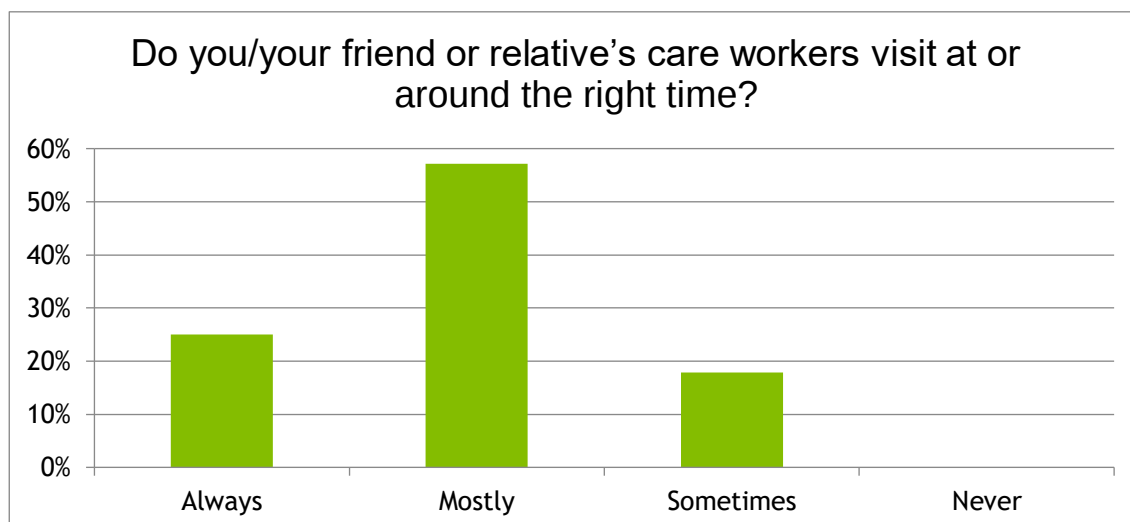
What is most important to you/your friend or relative about your home care? From the following list please tick the top three priorities (N.B. by carer we mean a paid carer and not a relative/friend)



We then asked about whether the things that they had identified as being most important were happening with the support they received. Most reported that their care workers were friendly and kind. Some people told us that their care is better with their regular care workers. Below are some of the comments they made:

- For the most part of delivery, however my care times don't suit my needs re lunch at 11am and bed at 7pm doesn't suit me *
- All my care workers are lovely.
- Current home care enables my father to continue to live with us as part of the family. Seeing the same group of carers enables relationships to be established and avoids confusion. Current team are friendly and kind which are essential.
- Care workers are interested in my daily activities and encourage me in my aims

*DCC advised the times specified would not fall into their contracted time slots for morning, lunchtime or evening calls. This may have been due to the provider doing their best to cover calls.



When we asked if care workers don't always do what is set out in the care plan, please tell us what they don't do and why you/your friend or relative think this is?

Eight people told us carers do what is set out in the care plan and below are the other responses:

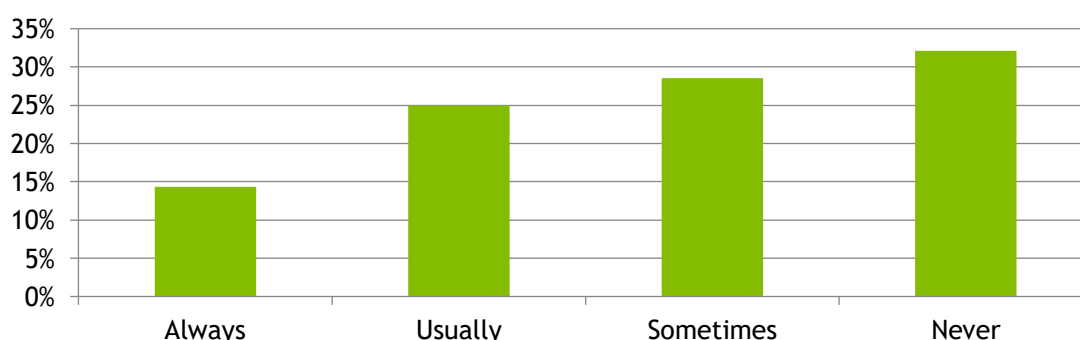
- All my regular carers follow my needs that are outlined on the care plan. However, when new staff come in things may get missed due to not knowing the call as well
- Sometimes things get missed due to the time the carers have re I have cats and rely on carers to change litter trays and feed them. It's important carers are able to do my hair the way I want it on morning calls
- No because I ask when I need things doing
- Unable to shower wife at times as she sometimes doesn't let her (the carer), depends how she feels - a wash is given instead
- Various things. Lack of staff
- Check dates of food, sometimes out of date food is given. Don't know when community nurse will call, no information is left on what has been done

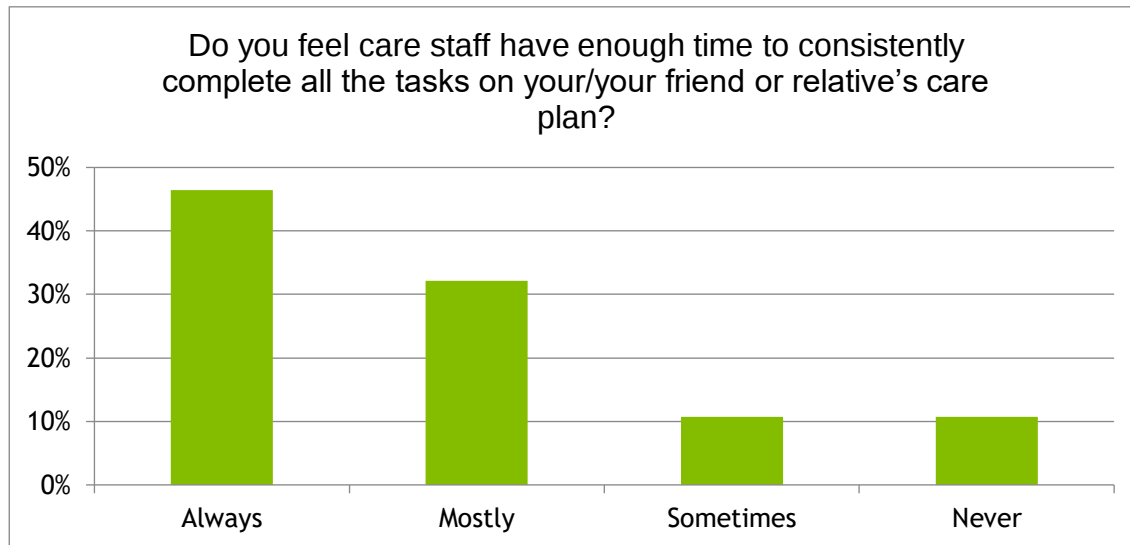
- The regular carers when they have time do more. Replacements do as little as possible
- She is asked to do something else by person being cared for
- They don't properly adhere to the care plan, they don't cook as promised, they don't stay the duration of the call, we don't know why they don't. They don't seem to know the basics of caring, don't have any skills, don't know how to deal with problems, no common sense or integrity. There should be some training in place.
- They were meant to in a morning get him out of bed and take to the toilet, wash him, dress him and bring him downstairs and encourage him to walk from stair lift to his chair and give him his breakfast. At lunchtime they should have taken his rubbish out, they should come in and give him his dinner and sort catheter bag out. His evening call was for him (the carer) to come in and get him out of his chair to his stair lift, take him upstairs and get ready for bed and put him into bed and make sure he was safe and then leave
- They try to get through the call as quickly as possible.
- Mostly - some carers that come do not do the tasks in hand like make the bed, laundry, does not empty urine bottle
- Disappear before asking if I need more help especially in the mornings

We asked. if something happened and you/your friend or relative needed to change your arrangements would your social worker or care provider be flexible?

- 71% of people who responded told us that the social worker or care provider would be always or usually be flexible
- 29% said it would be sometimes or never the case

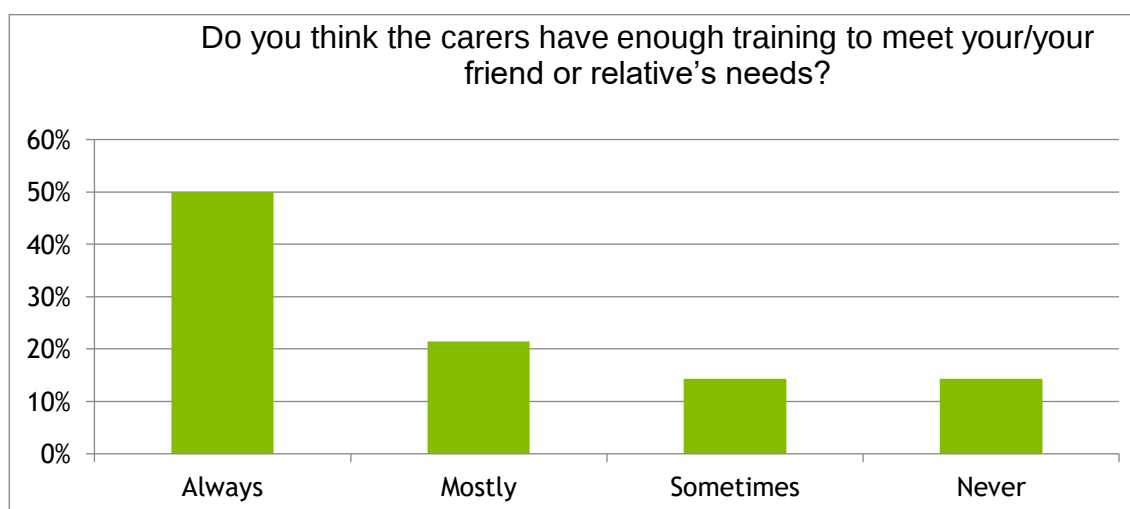
Are you kept informed by your/your friend or relative's home care provider about changes in your care? For example your visit will be late or you'll have a different carer?

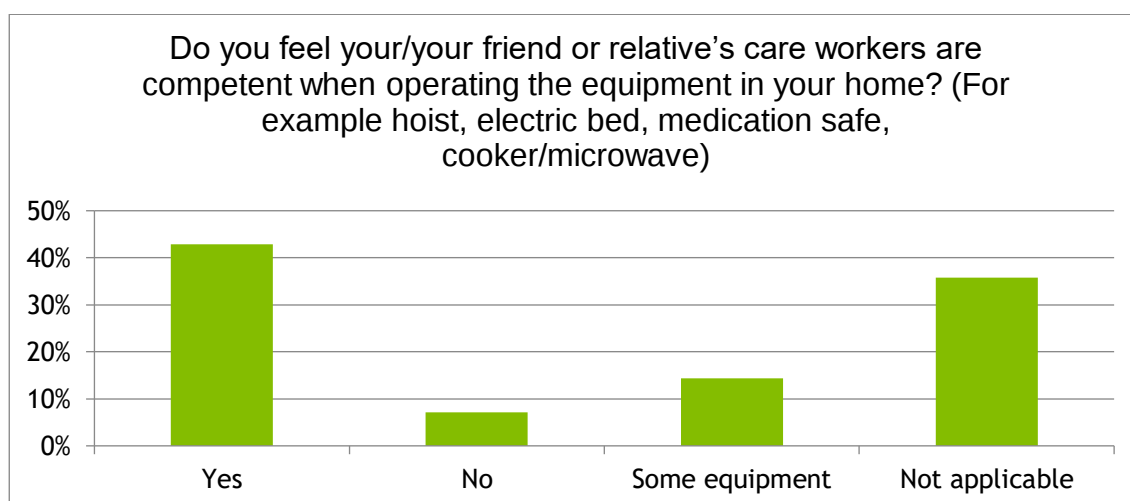
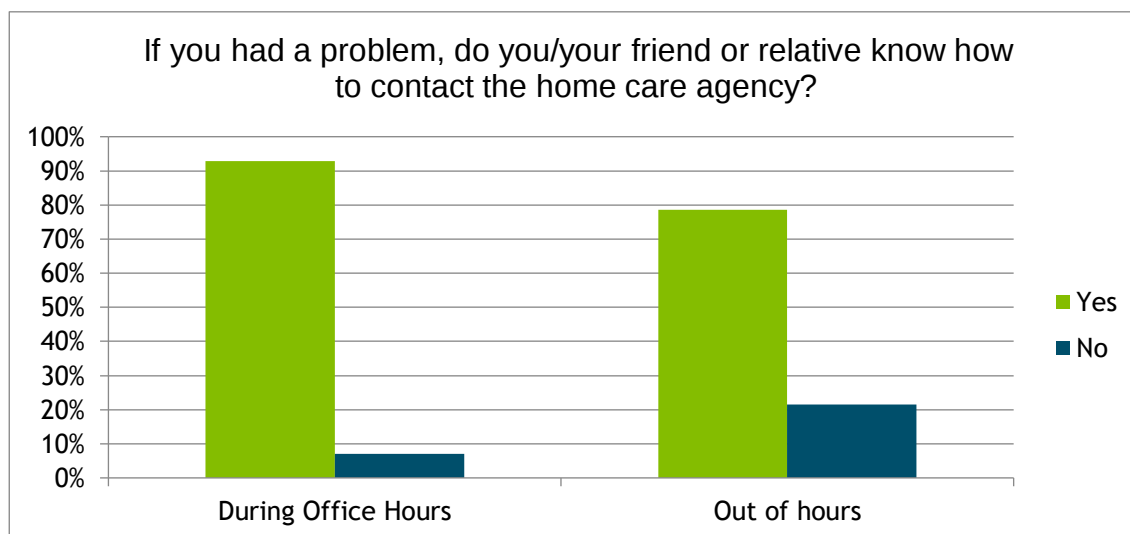




Do you feel care staff have enough time to consistently complete all the tasks on your/your friend or relative's care plan?

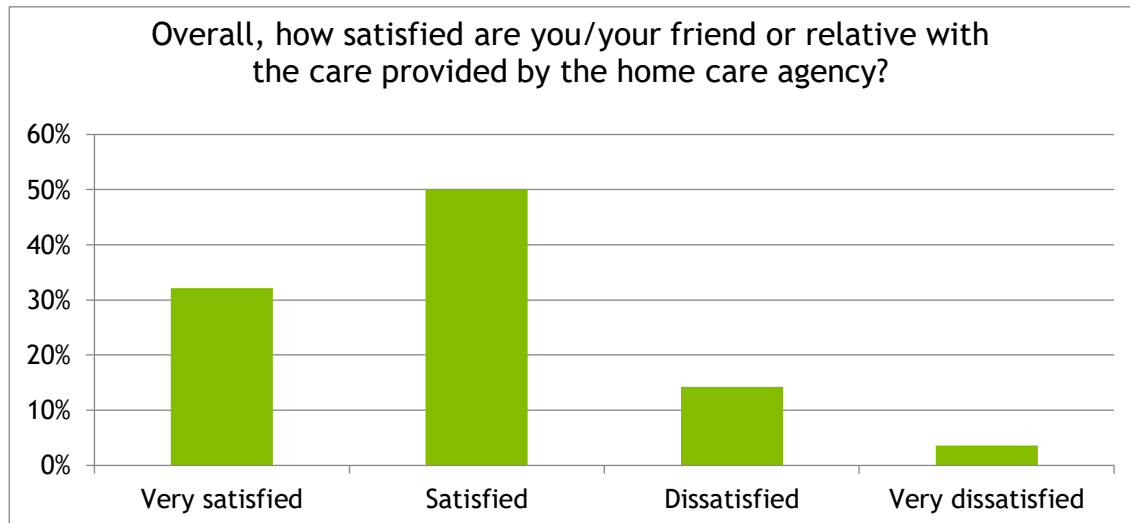
- 75% of people who responded told us the carers always or mostly had time to complete all tasks.
- 25% told us they sometimes or never had time





We asked do you feel your/your friend or relative's care workers wear the right protective equipment to keep you safe (For example facemask, gloves and aprons)

- 82% of people told us they felt the carers always or usually wore the right protective equipment
- 18% said they sometimes did, or they did not know



We asked about how the home care made people feel overall. The most common answer was that the support made them feel safer, along with being happier. However, one person told us it made them stressed, worried and anxious.



We asked if there was anything that would make things better. 10 people did not identify anything and 7 did not respond. Below is a list of the suggestions provided:

- They need to get someone who is paid minimum wage so the phones are always answered
- Having regular rotas for carers instead of constant changes. No office staff to answer the phone
- When my package first started I had regular visits from the office staff, reviews etc. This happens less and less now. Regular visits made me feel like a person and not just a number
- Flexibility is the key as well as good communication amongst care staff. Therefore, care companies should look after their carers, because when care workers arrive demotivated, and exhausted and under-valued it reflects on the care company
- I would like to be informed more if there are going to be changes in my times
- There have been times when I have been ready for social times and carers have not turned up and I have not been informed. Also, this has happened several times. This needs to be improved
- The care I receive is lovely however office is very short staffed don't always answer frequently. The office seems very over stretched that causes problems
- Include help with physical exercises for the very elderly such as chair-based ones. May require further training to achieve this
- Clearer out of hours procedure/support and more time available
- Turn up on time, stick to the agreed times, do the jobs on the care plan, make sure you're handing out the right medication. Show some teamwork, try and send the same carer, smile, chat, be sociable, stay for the duration
- To follow instructions which would be a good place to start. To not lie if you have made an error. Address any concerns. To arrive when you say that you are going arrive. To follow what is written in the care plan
- Better weekend cover too many last-minute changes made

When we asked if one thing could be improved, these are the responses we received:

- I can't think of anything
- To be informed when calls are going to be early or late
- No problems whatsoever with the carers or the office
- I am more than happy with my carers. Have no complaints
- I would feel more at ease knowing who was coming to care for me. When my package started we used to get paper notes which was a good guide to me. They could implement a system where this was possible again
- Everything is working fine. If I have a problem I will ring up and deal with it.
- To be informed when carers are cancelled. Answering the phone in the office sometimes I'm trying to get through for hours
- More office staff
- Enables wife to live more independently

- Cost consistency
- Better administrative support for the care workers
- A little more initiative from some of the carers
- Some of the carers need to talk to her more when they are in instead of using mobile phones. She needs company and conversation
- More time
- The care provider acts on feedback and makes the requested improvements. Help the carers, provide proper training for them and listen (that's to the coordinators in the office who plan back-to-back calls with no travel time). Return calls to your service user
- To turn up at the correct times, keep correct records
- More notification if times are going to be changed
- Carers telephone number if needed to be contacted before they arrived
- Better weekend cover too many last-minute changes made

We asked what was the best thing about the care you receive?

- My carers, they are very sociable I can have a laugh with them and feel safe
- Friendly carers
- Carers are always consistent and helpful and kind
- That I get on so well with my carers. They put a smile on my face and cheer me up
- Carers are responsible for all my personal care needs I rely on carers for all my personal needs getting dressed toileting needs Having this daily makes me less anxious
- Overall, there is no best thing generally the care needs are met in a professional manner
- Having a good relationship with my carers
- Seeing regular care workers and carers being happy, friendly and chatty
- The lovely carers who come and do my calls
- Carer has good rapport with wife and uses this to help her as much as possible, wife trusts her
- Knowing that I am seeing a friendly face every week
- It's professional and caring
- Putting on the pressure stockings which I couldn't do and my wife would struggle to do
- Friendly staff who can cope with the unexpected
- Supportive friendly interactions with people who will show genuine interest in my wellbeing
- Local, same carers every week
- Getting to know each of carers
- Regulars are very good, friendly, honest, reliable & very caring
- Nature of care

- The carers are nice girls despite their lack of training and if they had proper understanding then things would work better
- Bring you peace of mind
- Have some carers that have been coming for a long time

We asked, can you tell us if there was a way of delivering support that did not have such a focus on the time the care worker spends with you/your friend or relative for each visit, instead giving more flexibility to tailor your support while still getting the important tasks done, how do you think you would find this?

- 32% thought it would be better
- 11% thought it would be worse
- 57% did not know

When we asked, can you tell us if you/your friend or relative have experienced more loneliness and isolation since the start of the pandemic? We would like to know how you have managed and if you have received help from any friends/neighbours or organisations to keep in touch and have someone to chat to. Of the people that responded:

- 52% told us they had experienced more loneliness
- 48% told us they had not experienced more loneliness

Some of the comments were:

- I haven't had any problems. My sister phones me all the time
- Definitely, like everybody else
- I have a good family who visit me throughout. I feel I'm isolated more due to my physical needs
- I do experience loneliness however I have a good family and good friends who have been with me during the pandemic
- The pandemic hasn't affected my life it has gone on as usual. Still went out for social time during the pandemic
- Yes, I have but thankful I have my carers calling
- Yes, they suffered from loneliness and isolation but were supported by neighbours and organisations
- My wife and I have had no problems with the pandemic or lockdown we have smart phones so can contact children on WhatsApp

- Lunch clubs have now resumed and this is an essential social activity for my father which he really enjoys. During the lockdown they phoned every week to see how my father was. I know they made hundreds of calls to elderly people
- Having no TV for a few weeks was a major issue with loneliness
- Have a very good friend who has supported me throughout
- Yes, difficult as hard to contact people now
- Very lonely and felt unsupported
- Yes, access was restricted
- Yes, I would have been happy if I could have got out more
- Biggest enemy and have felt this at times



Case Study: “What’s important to me”

*Carl receives support twice a day (morning and early evening) to help him stay independent. He has help with meal preparation and assistance getting dressed. His care provider is one of the contractors on the Durham County Council framework for home care services.

Carl likes his carers; they provide him with good support. He values having carers who he sees regularly, who know him and how he wants to be supported.

He does get frustrated with his care provider. He gets weekly information about who will be supporting him. It’s important for Carl to know who is coming and the time they will be arriving. If there are gaps, he must contact the care company. It’s often difficult to get through & speak to someone during normal office hours, although the phone is answered quicker out of hours.

The timing of the visits in the morning are not too crucial for Carl, but in the evenings, he likes to know what time the care worker will be arriving as he part-prepares his meal. He likes to be able to plan what he needs to do.

Carl used to have a care-log which was kept in his home, but now the carers enter the details an app on their phones. Carl did not know the process for him to access the information and he preferred when there was a paper record kept in his home.

Recently Carl has had two occasions where his discharge from hospital has been delayed because care packages could not be reinstated immediately. Most recently, he was admitted for a week to the University Hospital of North Durham (UHND). At the end of the week (Friday), the hospital decided he was ready for discharge. However, his care provider said they would be unable to resume his care package over the weekend. As the ward needed his bed, they decided Carl would have to be transferred to Shotley Bridge Hospital until his care package could recommence. On Sunday, Carl told the ward that he felt he would be able to return home and would manage until the carers came in on Monday morning. However, the discharge was not possible because patient transport does not operate at a weekend. Although the care Carl received at Shotley Bridge was good, he feels it would have been much better for him and cheaper for the NHS if he could have gone straight home from UHND

*Name changed to protect identity

Conclusions

Some of the key things that came from the survey were:

- How important it was to have friendly care workers and the difference it made to individuals receiving support
- Having the same care workers wherever possible
- Having good communication. Keeping people informed of any changes, such as the times of visits
- Being able to get in touch with the care provider's offices

Recommendations and observations

As the number of people who responded to this survey were small, we feel we cannot make recommendations however, from what people told us we do have the following observations for commissioners and service providers to consider:

- Making sure there is office cover or an effective message recording and call-back/call forwarding system in place would benefit everyone
- We know that staffing is always challenging but wherever possible trying to ensure clients have regular care workers is greatly appreciated by clients
- There is an opportunity to see where existing support services to tackle loneliness and isolation might be utilised to enhance the lives of some of the isolated service users in the community. Ensuring care workers have access to this information could help staff to direct clients to other support
- Sometimes things go wrong and providers should make sure their processes to address issues are speedy and consistent

Responses

From Durham County Council, Adult Social Care:

"The pandemic has had a huge impact on social care services and in particular the domiciliary care (home care) sector. Most of the issues raised appear to be as a result of workforce pressures as providers struggle with high staff turnover and difficulties in recruiting as they compete with other markets such as retail and hospitality. The shortage of staff has been the most challenging it has ever been during this period, and last-minute changes to packages of care have been exacerbated by the necessity for staff to be absent due to covid or the requirement to isolate. We have been monitoring the position regionally and nationally and, while not underestimating the difficulties in Durham or the need to continue to maximise efforts to address these, we are aware that we have still performed relatively well in comparison to similar local authorities when considering the number of individuals waiting for care and feedback on the quality of services. County Durham Care Partnership has responded to

these challenges as follows and it is hoped that the market challenges will continue to see further improvement over the coming months:

- *To assist with recruitment and retention an increased inflationary uplift has been awarded to contracted providers of domiciliary care (home care) services to ensure all carers are paid above the National Living Wage and to compete with other sectors;*
- *Further financial support has been provided as a result of the increase in fuel prices;*
- *The Council's Care Academy is working with providers to assist with the recruitment and training of new carers.*

Domiciliary Care (Home Care) providers are also subject to detailed quality monitoring exercises by commissioners and where standards are not met, providers are issued with an action plan for improvement with specified timescales. Durham County Council has recently completed quality monitoring exercises on all framework providers."

Acknowledgments

We would like to thank:

- The people in County Durham who responded to our survey
- To Carl for sharing his experiences
- Durham County Council
- Home care service providers



Appendix

A copy of the questionnaire can be provided on request.

References

Durham County Council Market Position Statement 2019-21
Durham County Council framework for Domiciliary Care