Domiciliary (Home) Care
Lay Monitoring Project Report
Phase 2: November 2014 - March 2015

Published August 2015
Summary

Between November 2014 and March 2015 Healthwatch Northamptonshire staff and trained volunteers spoke to fifty people individually and in groups around the county, to gather their views and experiences of Domiciliary (Home) Care services.

Methodology

Phase 2 of the pilot project was conducted via face to face interviews with individuals and small groups of service users. This approach was used following the recommendations from the phase 1 report which identified that telephone interviews had been confusing or difficult for some service users to fully communicate their experiences and feelings.

Phase 2 proved more challenging in some aspects, as details of domiciliary home care service users had to be identified by Healthwatch Northamptonshire (HWN) in collaboration with the organisations visited. In phase 1, service user details had been supplied by Northamptonshire County Council (NCC) and two home care agencies.

Voluntary and community organisations including Age UK Northamptonshire, Glamis Hall and The Centre for Independent Living were very supportive in helping to identify service users who received domiciliary home care services.

Key Findings

There were five key concerns identified during phase 2 which were similar to the findings in phase 1:

- consistency of care workers - only 24% (less than a quarter) said they see the same care staff
- ensuring that care agencies enable care staff to arrive at the expected time - 16% said the care workers arrived on time
- lack of coordination between organisations
- lack of information from agencies about the Care Act
- ensuring that care agencies consistently review service user needs - 72% answered yes to their needs being met however it should be 100%.

During the project we spoke to five elderly people with complex and significant needs who told us they had been sent home without care packages in place and no relative or informal carer to support them.

Both phases of the pilot have identified positive experiences as well as areas for improvement. It is hoped that the feedback from users and carers will inform future commissioning and delivery of home care services.
About Healthwatch Northamptonshire

Healthwatch Northamptonshire (HWN) is the local independent consumer champion for health and social care. We are part of a national network of 148 local Healthwatch organisations. Our central role is to be a voice for local people to influence better health and wellbeing and improve the quality of services to meet people’s needs. We will report our findings to health and social care decision makers to improve and influence the quality of care.

Our rights and responsibilities include:

- We have the power to monitor (known as “Enter and View”) health and social care services (with one or two exceptions). Our primary purpose is to find out what patients, service users, carers and the wider public think of health and social care.

- We report our findings of local views and experiences to health and social care decision makers and make the case for improved services where we find there is a need for improvement.

- We strive to be a strong and powerful voice for local people, to influence how services are planned, organised and delivered.

- We aim to be an effective voice rooted in the community. To be that voice, we find out what local people think about health and social care. We research patient, user and carer opinions using lots of different ways of finding out views and experiences. We do this to give local people a voice. We provide information and advice about health and social care services.

- Where we do not feel the views and voices of Healthwatch Northamptonshire and the people who we strive to speak on behalf of, are being heard, we have the option to escalate our concerns and report our evidence to national organisations including Healthwatch England, NHS England and the Care Quality Commission.
Introduction and Background

Domiciliary Home Care is received by approximately 4,500 people across Northamptonshire from paid care workers who provide assistance with washing and dressing, preparing meals and taking medication. Of this total number; 2,614 people accessed their support via Northamptonshire County Council (NCC) Adult Social Care and an estimated 1,886 people purchase a service independently from a number of providers which include:

- Prestige Nursing & Care
- Norton Nurses Wellingborough
- Sevacare (UK) Ltd
- Aide Care
- Homeserve
- Allied Healthcare
- Phoenix Professional Home Care
- Saga
- Abbeyvale
- Universal Care
- Olympus Care
- Leonard Cheshire
- KC Carers (Daventry)
- Direct Health

Domiciliary home care provides people with practical help and support enabling them to live in their own homes for longer. In recent years there has been an increased emphasis on providing short term domiciliary home care support enabling people to avoid admission to a care home or following a period in hospital. This has been key in helping people regain confidence and skills so that they can undertake personal care and other basic daily living tasks which will enable them to be as independent as possible. If longer term support is required, an individual plan is agreed to meet the person’s ongoing personal care and wellbeing needs.

The HWN Social Care Working Group was concerned at the lack of assessment in the quality of domiciliary home care from the point of view of service users and their informal and unpaid carers (i.e. families). The Care Quality Commission (CQC) is the independent regulator of health and social care in England and has a remit to
inspect the quality of domiciliary home care services. However, there are limitations on the CQC’s approach and they cannot go into individual’s homes in the same way they can go into residential and nursing homes to inspect the quality of services.

Due to rising concerns about the lack of monitoring of domiciliary home care services to ensure vulnerable adults receive good quality services which are caring and safe, HWN in partnership with NCC carried out a Phase 1 pilot by making telephone contact with service users of two local care agencies one serving a predominantly rural area and another serving a mixture of urban, semi-rural and rural areas. A summary of Phase 1 of the pilot follows and the full report is available to download from www.healthwatchnorthamptonshire.co.uk for alternative formats please contact the Healthwatch team by ringing 01604 893636 or email enquiries@healthwatchnorthamptonshire.co.uk

**Impact from Phase 1 of the project**

The phase 1 report, published in October 2014, made a number of recommendations including that care staff should have their travel time paid as they travel from service user to service user. We heard from service users that care staff were under pressure to get to the next service user and having travel time paid would reduce this pressure. Nene Clinical Commissioning Group (Nene CCG) agreed to fund NCC to pay travel time from the Health Winter Pressures funding on a pilot basis during the winter of 2014/15. Only some care staff in rural areas now have their travel costs paid.

This will be an issue that HWN will be pursuing with NCC.

**Response from Northamptonshire County Council**

Nene Clinical Commissioning Group funded travel time payments to Northamptonshire County Council contracted providers (countywide) over the winter period 2014/2015 and this ceased at end of April 2015.

However, from the 1st May 2015, Northamptonshire County Council is now funding paid travel time to contracted providers in Northamptonshire’s rural operational zones:

- East Northamptonshire
- Daventry & District
- South Northamptonshire
Survey - Methodology

Delivery of the Project

In phase 1 of the project, interviews were conducted by telephone contact. In addition to finding people not available, there was some reluctance to take part because of the following reasons:

- difficulty with hearing over the telephone and communication problems due to speech impairment and other issues
- confusion and memory problems which included dementia
- suspicion and reluctance to speak with someone unknown to them over the telephone
- annoyance at yet another unsolicited phone call

In order to address the issues, it was agreed that phase 2 would be conducted through face to face interviews.

Survey - Analysis

Responses were received from 50 people in total:

39 were direct users of the service
6 were people who said they were in need of services, but relied on relatives and neighbours
5 were informal, unpaid carers and other family members of someone using the service

As with the first phase of the pilot, the majority of comments about the quality of domiciliary home care in this second phase were positive, particularly about the care staff and the general standard of care. Some service users did not feel they were receiving the level of care agreed within their care plan.
Questionnaire

The questionnaire consisted of 15 questions relating to the services that people received and the domiciliary home care workers who carried out the tasks.

Question 1: How much care do you receive and when do your care workers come? i.e. 30 minutes, 4 times a week)

Responses revealed the following:

- 78% received care every day
- 62% received care more than once a day
- 12% received care between 3 hours and 16 hours per week.
- 46% said their visits were between 45 minutes and an hour

The above figures show the majority of people had different length visits at different times of the day.

Comments from respondents:

- “they come early about 7.30 am for an hour to help me get out of the bath”
- “three times a week to help with bathing/showering”
- “receive 30 minutes in the morning and at lunchtime and then 15 minutes at night”
- “three times a day 1 hour each in the morning/evening/lunchtime”

Question 2: Do your care workers come at times that suit you? (i.e. are you happy with the times and number of visits?)

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<thead>
<tr>
<th></th>
<th>Yes, always</th>
<th>Yes, usually</th>
<th>No, not always</th>
<th>No, never</th>
<th>Don’t know/No answer</th>
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<tr>
<td></td>
<td>26%</td>
<td>40%</td>
<td>18%</td>
<td>4%</td>
<td>12%</td>
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Comments from respondents:

- really good the carers come at times they are supposed to”
- initially I had some issues with timing but now I get them to come on time”
• “don’t feel I have been given any choice”
• “first agency was dreadful no consistency”
• “would prefer my bedtime call to be later”

**Question 3: Do your care workers arrive on time?**

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<th>Yes, always</th>
<th>Yes, usually</th>
<th>No, not always</th>
<th>No, never</th>
<th>Don’t know/ No answer</th>
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<tr>
<td><strong>Percentage</strong></td>
<td>16%</td>
<td>48%</td>
<td>24%</td>
<td>0%</td>
<td>12%</td>
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**Comments from respondents:**

• “sometimes a little late”
• “can set my clock by them”
• “depends on previous service users”
• “some carers at night can be late or early”

**Question 4: Do your care workers spend the full time with you that they are supposed to?**

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<th></th>
<th>Yes, always</th>
<th>Yes, usually</th>
<th>No, not always</th>
<th>No, never</th>
<th>Don’t know/ No Answer</th>
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<tr>
<td><strong>Percentage</strong></td>
<td>36%</td>
<td>40%</td>
<td>10%</td>
<td>2%</td>
<td>12%</td>
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**Comments from respondents:**

• very pleased
• “if necessary they will stay longer to get everything done”
• “it varies and depends on what time they arrive”
• “it depends sometimes if the previous service user has kept them”
• “there are occasions when the agency cannot always cover the full time staff”
**Question 5: Does it seem like care workers are in a rush?**

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<th>Yes, always</th>
<th>Yes, often</th>
<th>Sometimes</th>
<th>No</th>
<th>Don’t know/ No Answer</th>
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<td>8%</td>
<td>10%</td>
<td>38%</td>
<td>32%</td>
<td>12%</td>
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</table>

Comments from respondents:

- “have always been treated very well”
- “no I have a routine which is always followed”
- “just sometimes”
- “some days the staff tend to rush me so I am on time for the bus, but I feel they should work at my pace”

**Question 6: Do your care workers do the things that are set out in your care plan?**

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<thead>
<tr>
<th>Yes, always</th>
<th>Yes, usually</th>
<th>No, not always</th>
<th>No, never</th>
<th>Don’t know/ No Answer</th>
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<tr>
<td>42%</td>
<td>36%</td>
<td>4%</td>
<td>2%</td>
<td>16%</td>
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Comments from respondents:

- “yes but not enough time allocated therefore I worry”
- “sometimes they miss out my foot care”
- “a very flexible arrangement which reflects my diminishing needs”
- “most carers look at the plan before they start”
- “impossible to do all in the care plan within the time”
- “more or less. There are times when I remind them the floor has to be mopped every day and its very important because of the danger of picking up infections”
Question 7: Do you always see the same care workers unless they are on holiday or ill?

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<th></th>
<th>Yes, always</th>
<th>No, but nearly always</th>
<th>No, hardly ever</th>
<th>No, never</th>
<th>Don’t know/ No Answer</th>
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<td></td>
<td>24%</td>
<td>52%</td>
<td>6%</td>
<td>0%</td>
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Comments from respondents:

- “do see the same care workers but the agency changes them without warning or my consent”
- “always changing”
- “evening carers sometimes change”
- “with the first agency there were lots of changes and staff were not experienced. It’s so much better with a new agency fairly consistent”

Question 8: Are you kept informed by your domiciliary home care agency about changes in your care? (i.e. your visit will be late or you’ll have a different carer?)

<table>
<thead>
<tr>
<th></th>
<th>Yes, someone always lets me know about changes</th>
<th>Yes, someone always lets me know about changes</th>
<th>No, they hardly ever let me know about changes</th>
<th>No, they never let me know about changes</th>
<th>Don’t know/ No Answer</th>
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<tr>
<td></td>
<td>16%</td>
<td>38%</td>
<td>12%</td>
<td>8%</td>
<td>26%</td>
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Comments from respondents:

- “they usually let me know about changes”
- “the agency sends the rota on Sunday evening but in reality always starts off on Mondays with a different worker”
- “yes, usually let me know about the changes”
- “carers tell me”
- “they talk to my daughter”
- “the agency don’t communicate very well”
**Question 9:** Are you happy with the way your care workers treat you? (i.e. do they understand you and your needs and treat you with respect and dignity?)

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<thead>
<tr>
<th>Yes, Very Happy</th>
<th>Yes Fairly Happy</th>
<th>No, fairly unhappy</th>
<th>No, very unhappy</th>
<th>Don’t know/No answer</th>
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<tr>
<td>66%</td>
<td>22%</td>
<td>2%</td>
<td>4%</td>
<td>6%</td>
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Comments from respondents:
- “they are patient and cheerful”
- “they talk to you so things are done the way I like”
- “they often ask me what I want and how I want it to be done”
- “occasionally I have had to ask people to leave”
- “they should realise they are a guest in someone’s house”
- “there are times when I feel the care workers do not understand how much my condition affects me”

**Question 10:** Has your home care provider involved you in the planning of your care as much as you would like to be?

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<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Sometimes</th>
<th>Don’t know/No answer</th>
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<tbody>
<tr>
<td>68%</td>
<td>4%</td>
<td>0%</td>
<td>28%</td>
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Comments from respondents:
- “the agency want you to be satisfied so they checked how I like things done and the care worker does a really good job”
- “they fit into my needs not me fitting in with them”
- “over the telephone the agency gave the impression of listening, but in reality they don’t”
- “the manager came round to ask about my requirements and we wrote the plan together”
- “the company sends out satisfaction surveys every so often”
Question 11: Does your domiciliary home care agency meet your medication management needs?

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<th>Yes</th>
<th>Partially</th>
<th>&quot;No&quot;</th>
<th>Don’t know/ No answer</th>
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<tr>
<td></td>
<td>16%</td>
<td>6%</td>
<td>74%</td>
<td>4%</td>
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Comments from respondents:

- “because of the carers limited hours, I don’t always get to take my medication for osteoporosis and I need someone with me while I take it and stay with me”
- “help me with peg feeding” (a procedure for placing a feeding tube directly into the stomach)
- “they prompt me to take my medication”
- “husband gives me my medication”
- “not applicable I self-medicate”
- “managed well, chemist puts it into a dosset box for me”

*A large proportion of the “No” clients looked after their own medication*

Question 12: Has your home care agency checked that the level of care you receive continues to meet your needs?

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<th></th>
<th>Yes</th>
<th>Partially</th>
<th>No</th>
<th>Don’t know/ No answer</th>
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<td></td>
<td>46%</td>
<td>4%</td>
<td>28%</td>
<td>22%</td>
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Comments from respondents:

a) have they had a review? has any action been taken?
- “they know I don’t get enough time but they haven’t done anything to help me get the hours I need”
- “receive a telephone call to check if my needs have changed”

b) If yes, how often do they check?
- “six monthly checks and the last check resulted in receiving more care.”
• “have a review by my care coordinator from Northamptonshire County Council (NCC) every six months”
• “only saw management from the domiciliary home care agency at the beginning and have not seen anyone since”

**Question 13:** Do you feel that the home care you receive meets your needs and helps you to live the way you would like to?

*For example: Are they able to do what they want when they want, such as having meals, going to bed and getting up and going out. Are their cultural needs met (e.g. food requirements)? Are they always as clean as they would like to be? Do they feel safe at home? Do they have as much contact with people as they would like?*

<table>
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<th>Yes</th>
<th>Partially</th>
<th>No</th>
<th>Don’t know/ No answer</th>
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<tr>
<td>72%</td>
<td>12%</td>
<td>4%</td>
<td>12%</td>
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Comments from respondents:

• “no to all of the above. Social care have given me very limited hours. I feel like I’m not allowed to do normal things”
• “feel I have some choices but would like more social activity”
• “feel I was listened to and we worked together on ways to do things”
• “can’t get out by myself and sometimes the carers come out with me for a short walk”
• “although there are some restrictions with timing I feel I am in control of my life and my care plan”
• “I go to Glamis Hall twice a week I like the company”
• “it meets my needs as I have problems with my balance”
• “my life is so limited by my condition I asked to see a hypnotherapist at the hospice but he comes on a different day and I cannot afford the transport there”
• “have a personal assistant to support me using my personal budget”
**Question 14:** Overall, how satisfied are you with the care provided by the home care agency to you in your own home?

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<tr>
<th></th>
<th>Very Satisfied</th>
<th>Quite Satisfied</th>
<th>Neither Satisfied nor Dissatisfied</th>
<th>Quite Dissatisfied</th>
<th>Very Dissatisfied</th>
<th>Don’t know/ No Answer</th>
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<tr>
<td>Percent</td>
<td>48%</td>
<td>32%</td>
<td>0%</td>
<td>2%</td>
<td>4%</td>
<td>14%</td>
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Comments from respondents:
- “they brighten the day”
- “very happy with the situation”
- “satisfied other than the issue of late calls”
- “sometimes they fuss”
- “fine apart from the carer I feel they don’t understand my needs, I have requested a change but it hasn’t happened”
- “we are starting to build a relationship although there is a lack of awareness of my needs to avoid pressure sores”
- “they don’t always see that some of the little things that aren’t important to others are important to me”

**Question 15:** Is there anything else, good or bad that you would like to tell us about your care and support?

The following comments were made:
- “good measure of competence”
- “don’t feel carers should be sent who are not fit or prepared to do the job”
- “feel we should have more information from the agencies”
- “much more wheelchair accessible transport is needed”
- “a very difficult business to manage staff are not paid enough or given enough training”
- “am deaf and don’t always hear what they say, I think they forget”
Recommendations

Recommendations from the phase 1 pilot and responses from Northamptonshire County Council (NCC):

Following the publication of the report in October 2014, Healthwatch Northamptonshire (HWN) received a response from NCC in January 2015 to the recommendations in the report. The recommendations still apply as the findings are similar in phase 2, as they were in phase 1. We require an update from NCC on their progress with the actions they agreed to take forward.

1. HWN recommended that the Information and Communication processes particularly in relation to staff absences and changes needed improvement as we heard about poor communication and a lack of communication from the care agencies in relation to changes of staffing.

   Response from NCC was that there is a need to improve information and communication processes. NCC will work with contracted providers to improve standards of communication between the registered office and service users.

2. HWN recommended that more information is provided for service users and carers about changes in staffing and that changes in staffing should be kept to a minimum.

3. HWN recommended that there should be a review of the support planning and review processes and the greater involvement of users and carers to ensure a more personalised approach.

   Response from NCC was that care management services and providers are engaging with service users and their informal networks to review each package of support to ensure service user needs are being met.
4. HWN recommended that recruitment and retention of care staff required review and investment as recruitment and retention of staff are significant issues, at both a local and national level.

Response from NCC was that they are assisting home care providers to advertise for care workers through the main NCC website and will introduce other initiatives in the future to provide further support.

5. HWN recommended that the level of pay and status of care staff need to be enhanced to attract and retain care staff.

Response from NCC was that the level of pay for care workers may well be a barrier to recruiting and retaining care workers. However, working conditions and the status of care workers are also viewed as significant factors in retaining care workers and in line with this, NCC is encouraging contracted providers to reduce the use of zero hours contracts.

6. Healthwatch Northamptonshire recommended training and ongoing support for care staff particularly as the number of people with more complex needs who are living in the community is increasing.

Response from NCC acknowledged that care worker training is an important determinant to the quality of home care services. NCC is going to work with contracted providers of home care to enhance the training levels of care workers and registered managers.

7. Healthwatch Northamptonshire recommended that there should be a more personalised and enabling approach by care workers, which helps those receiving domiciliary home care to develop confidence, maintain skills and retain independence for longer.

Response from NCC was that enhancing the home care experience for users and carers in terms of care worker consistency is, in large part dependent upon NCC contracting home care providers to improve their ability to recruit and retain care workers in sufficient numbers to meet the demand for services. More effective recruitment and retention for front line home care staff is a key priority for NCC.
8. Healthwatch Northamptonshire recommended that there needed to be a full discussion and review between NCC and care agencies about the minimum length of a home care visit, and whether 15 minute calls are acceptable.

Response from NCC that they do utilise 15 minute care visits in relation to traditionally funded home care support. However, these are only used for non-personal care purposes.

Phase 2 of the Pilot - Recommendations:

In addition to the recommendations in the Phase 1 report published in October 2014, we further recommend that:

1. NCC adopts the UNISON Ethical Care Charter which commits commissioners to key quality standards in relation to the recruitment, retention and working conditions of care staff.

2. NCC specifies core standards for communication about changed care arrangements. Communication from care agencies to service users should be improved with core standards inserted into commissioning arrangements about notifying service users of staff changes and any cancellations of care.

3. NCC specifies standards for care plan review processes between care agencies and service users (and informal carers where appropriate).

4. NCC should ensure a greater level of information in communities about the Care Act 2014 for people who may be eligible for care and support.

5. NCC should consider reviewing paying for travel time for care staff working in all areas of the county.
Conclusion

Phase 2 has been more challenging as the details of each service user were not provided by the domiciliary home care agencies. Phase 1 was a collaborative pilot project between HWN and NCC which involved telephone contact with service users from two local care agencies, one serving a predominantly rural area and the other serving a range of urban, semi-rural and rural areas. The local care agencies provided telephone numbers for their service users and Healthwatch volunteers spoke to them and recorded the results.

Phase 2 differed from the phase 1 pilot project as no information was provided and HWN had to contact the relevant organisations to carry out the survey. This involved contacting voluntary organisations as detailed previously within the report, to draw up a diary of meetings, coffee mornings and club events.

It was also found that due to the increased level of criteria required to qualify for domiciliary care, many people who attended the various organisations events and meetings were not eligible. Those who did qualify were often unable to leave their home because of their disability. HWN was reliant on external organisations to provide the necessary information of those who did qualify and found organisations very helpful in both providing information of events and sending out details of the survey to their clients.

Until recently the eligibility criteria for domiciliary care services was set by individual Local Authorities, but the Care Act 2014 introduced a national minimum threshold for social care. Under the final regulations, adults will be entitled to care and support if their needs are related to a physical or mental impairment and their wellbeing is significantly impacted by their inability to achieve two or more of the ten listed outcomes. During our visits, people commented that they did not know where or how to apply for an assessment.

Whilst this project has concentrated on domiciliary care services being provided to the people of Northamptonshire, it is also very important to note that many more residents within Northamptonshire are being denied domiciliary home care because they apparently do not meet the substantial criteria.
During the group interviews we met elderly people, who had fallen and broken bones, who were then sent home from hospital without any care assistance and no relative at home to care for them.

A few examples are listed below:

- An elderly lady who had had a hip replacement and lived on her own, she was reliant on neighbours.
- An elderly lady who had a pacemaker and who said she needed a little help every day to check that all was well.
- An elderly man who had broken his ankle. His son and daughter came to his house each day to check on him, but they were both working and had to travel a long distance. It would have been helpful to have had someone to call in.
- An older lady wasn’t offered any help when she came out of hospital after breaking her leg. She lived alone.
- A mother who cares for her daughter who has multiple long term conditions and has some assistance from another family member. Mother requested further support and was told that her daughter didn’t meet the criteria to receive domiciliary care.

Phases 1 and 2 of the pilot have identified positive experiences, as well as areas for improvement in domiciliary home care services. It is hoped the feedback from users and carers will be considered and taken into account when future contract specifications are drawn up, ensuring quality services are always delivered.

Healthwatch Northamptonshire (HWN) would like to work with commissioners to develop and implement a strategy for the full involvement of users and carers throughout the commissioning cycle for domiciliary home care services.
Next Steps

- A copy of this report will be published on the Healthwatch Northamptonshire website: [www.healthwatchnorthamptonshire.co.uk](http://www.healthwatchnorthamptonshire.co.uk)

- Healthwatch Northamptonshire will continue to develop proposals to roll out an ongoing programme of lay monitoring of domiciliary home care services across the county, subject to discussion regarding funding with Northamptonshire County Council.
Thanks and Acknowledgements

We would like to thank all those who have been instrumental in enabling this pilot to happen:

- All the people - service users and carers - who gave their time to respond to the questions. These views and experiences will hopefully help shape improved care for the future.
- The voluntary and community sector organisations who invited us into their venues and settings to complete the surveys.
- Healthwatch Northamptonshire staff and volunteers who inputted data from the questionnaires.
- Healthwatch Northamptonshire volunteers involved in both the planning and delivery of both phases of the pilot.
- A special thank you to Moya McVicar who was a great help in planning and organising the project. Sadly, Moya died in April 2015.
Domiciliary Care Users Experience Monitoring Questionnaire

Date of conversation: _____________ Time of conversation: _________________

Location of conversation: _________________________________________________

Interviewer’s name: _____________________________________________________

Agency Name and Operational Zone: ____________________________

Introduction

“Good morning/afternoon. My name is ___________ and I am calling on behalf of Healthwatch Northamptonshire and Northamptonshire County Council to talk to you about the home care services you are receiving. Healthwatch Northamptonshire is an independent consumer champion for everyone who uses health and social care services in our county. Healthwatch will help get people’s views heard in order to ensure that services are designed around the needs of people who use them.

Healthwatch Northamptonshire and Northamptonshire County Council are working together to find out what you think of the care services you receive at home. We would like to ask you some questions and find out what you think. All information you give us will be anonymous and used confidentially. It will not be passed on directly to any care agency and you will not be identifiable.

I have some specific questions to ask you and also want to hear what you have to say about the care and support you receive. Do you have time to talk to me about this?” Y/N

If ‘No’ please ask why:

<table>
<thead>
<tr>
<th>I would like to start by asking you questions about your care and support.</th>
</tr>
</thead>
<tbody>
<tr>
<td>How much care do you receive and when do your care workers come? E.g. 30 minutes, 4 times a week.</td>
</tr>
<tr>
<td>Do your care workers come at times that suit you?</td>
</tr>
<tr>
<td>Comment - e.g. are they happy with the times and number of visits?</td>
</tr>
<tr>
<td></td>
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<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Do your care workers arrive on time?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comment - bear in mind that some users may have two carers coming at the same time who differ in punctuality.</td>
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<td></td>
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<tr>
<td></td>
</tr>
<tr>
<td>Question</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Do your care workers spend the full time with you that they are supposed to?</td>
</tr>
<tr>
<td>Does it seem like your care workers are in a rush?</td>
</tr>
<tr>
<td>Do your care workers do the things that are set out in your care plan (the list of care you agreed with your home care agency)?</td>
</tr>
<tr>
<td>Do you always see the same care workers unless they are on holiday or ill?</td>
</tr>
<tr>
<td>Are you kept informed by your home care agency about changes in your care? (e.g. your visit will be late or you’ll have a different carer)</td>
</tr>
<tr>
<td>Are you happy with the way your care workers treat you? (E.g. do they understand you and your needs and treat you with respect and dignity?)</td>
</tr>
</tbody>
</table>

I would now like to ask you about how your care and support meets your needs.

1. Has your home care provider involved you in the planning of your care as much as you would like to be?
<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Comment - how have they been involved?</strong></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Sometimes</td>
</tr>
<tr>
<td></td>
<td>Don’t know/No answer</td>
</tr>
<tr>
<td><strong>2. Does your home care meet your medication management needs if appropriate?</strong></td>
<td></td>
</tr>
<tr>
<td>Comment</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Partially</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Don’t know/No answer</td>
</tr>
<tr>
<td><strong>3. Has your home care agency checked that the level of care you received continues to meet your needs?</strong></td>
<td></td>
</tr>
<tr>
<td>Comment - Have they had a review? Has any action been taken?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Partially</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Don’t know</td>
</tr>
<tr>
<td>If yes, how often do they check? 6 months, annually, only after the first week of receiving services, etc.</td>
<td></td>
</tr>
<tr>
<td><strong>4. Do you feel that the home care you receive meets your needs and helps you to live the way you would like to?</strong></td>
<td></td>
</tr>
<tr>
<td>E.g. Are they able to do what they want when they want to, such as having meals, going to bed and getting up, going out, etc.? Are their cultural needs met (e.g. food requirements)? Are they always as clean as they would like to be? Do they feel safe at home? Do they have as much contact with people as they would like? Why have they answered the way they have?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Partially</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Don’t know</td>
</tr>
<tr>
<td><strong>5. Overall, how satisfied are you with the care provided by the home care agency to you in your own home?</strong></td>
<td></td>
</tr>
<tr>
<td>Comment</td>
<td>Very satisfied</td>
</tr>
<tr>
<td></td>
<td>Quite satisfied</td>
</tr>
<tr>
<td></td>
<td>Neither satisfied nor dissatisfied</td>
</tr>
<tr>
<td></td>
<td>Quite dissatisfied</td>
</tr>
<tr>
<td></td>
<td>Very dissatisfied</td>
</tr>
<tr>
<td></td>
<td>Don’t know/No answer</td>
</tr>
<tr>
<td><strong>6. Is there anything else, good or bad that you would like to tell us about your care and support?</strong></td>
<td></td>
</tr>
</tbody>
</table>
Comment

Have they raised any concerns about their care to their care workers or home care agency? If so, did they feel listened to and were their concerns addressed?

Do they have any other positive or negative comments about their care workers?

Do they have any suggestions about how their home care agency could improve the service they receive?

### About you (all information you give us is anonymous and confidential).

<table>
<thead>
<tr>
<th>Which age range describes you?</th>
<th>Under 65</th>
<th>65-74</th>
<th>75-84</th>
<th>85 or over</th>
</tr>
</thead>
<tbody>
<tr>
<td>What gender do you consider yourself to be?</td>
<td>Male</td>
<td>Female</td>
<td>Transgender</td>
<td></td>
</tr>
<tr>
<td>7. Which ethnic group do you consider yourself to belong to?</td>
<td>White (British, Irish, any other white background)</td>
<td>Chinese</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mixed (White and Black Caribbean, white and Black African, White and Asian, any other mixed background)</td>
<td>Chinese</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asian or Asian British (Indian, Pakistani, Bangladeshi, any other Asian background)</td>
<td>Chinese</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Black or Black British (Caribbean, African or any other Black background)</td>
<td>Chinese</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Thank you very much for taking part in our survey.
Do you have home care support or do you look after someone who has home care support?

Across Northamptonshire it is estimated that over 4,500 people received care from paid care workers in their own homes last year. This is known as domiciliary care and provides people with practical help and support so that they can continue living in their own homes for longer.

Health and social care decision makers in Northamptonshire are committed to supporting people to live in their homes longer and want to reduce the number of people having to go into hospital or live in residential or nursing homes. The quality of domiciliary care is a very important issue. In the last year, there has been a lot of concern about the quality of this care raised by organisations such as Leonard Cheshire, which campaigned to end 15 minute visits. As the independent champion for health and social care in the county, Healthwatch Northamptonshire (HWN) has been working with Northamptonshire County Council to find out what people who use domiciliary care and their families think about the quality of this essential service.

If you do receive home care support, we would really like to talk to you about your experience of the service. This work is being carried out during January and February 2015.

Please contact Jo Davis
Telephone number: 01604 892422
Email: jodavis@healthwatchnorthamptonshire.co.uk

If you leave me a message on my answerphone or send me an email, I will then contact you. I look forward to hearing from you.

Healthwatch Northamptonshire CIC, The Sunley Conference Centre
Northampton, NN2 7AL Tel: 01604 893636