

SCRUTINY PANEL

2 February 2017

HEMOCARE RECOMMISSIONING - SERVICE USER AND CARER FEEDBACK

Report of the Director for People

Strategic Aim:	Meeting the health and wellbeing needs of the community	
Exempt Information	No	
Cabinet Member(s) Responsible:	Mr R Clifton, Portfolio Holder for Health and Adult Social Care	
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DECISION RECOMMENDATIONS

That the Panel:

1. Notes the content of this report and offer comments.

1 PURPOSE OF THE REPORT

- 1.1 To note the feedback received so far, in relation to the recommissioning of homecare care in Rutland.

2 BACKGROUND AND MAIN CONSIDERATIONS

- 2.1 Scrutiny received a report in July 2016 (Report no:131/2016) setting out details of the extent to which we provide homecare to eligible vulnerable adults in Rutland. The report explained the care, the funding, service user choice and some of the challenges for Rutland. The report also outlined the complexity of providing homecare and noted some of the difficulties which both Rutland County Council and providers face in offering services in the future.
- 2.2 Currently the Council commissions over 58,000 hours of homecare support per year to approximately 80 people. This figure is set to rise in the future due to an ageing population, people living with more complex conditions and people having the choice to remain living at home with appropriate support in place. The Council need to ensure that homecare services are able to meet future demands and are fit for purpose; therefore we are looking at other models for commissioning these services.

2.3 Whilst looking at other models of homecare it is important to understand the views of those that are receiving, and providing, homecare support, such as service users, providers and carers/support workers. There have been 4 areas of feedback obtained since the last scrutiny panel:

2.3.1 **Service user feedback:** 41 service users have been contacted throughout October and November 2016 to discuss home care provided and their view of the service they receive. This was obtained through review meetings and phone conversations with service users and feedback to the commissioning officer.

In addition, an open afternoon was held on 13th January for service users to meet Members and officers to discuss their experiences of care.

2.3.2 **Service user survey:** all service users receiving homecare support as commissioned by RCC were sent a survey on 16th December 2016 asking about specific areas of homecare and their view on this, what improvements/ changes they would like to see and what is important to them in relation to the care and support they receive. This survey has also been placed in the libraries and GP surgeries across Rutland in order for others receiving homecare support to have the opportunity to feedback their views (this applies to those receiving support arranged privately). The closing date for responses to this survey was 20th January 2017.

2.3.3 **Provider event:** providers were invited to a meeting on 1st December 2016 where key areas for improvement in homecare were identified. These included: recruitment and retention of staff, cost of services, local training and the image portrayed of a career in social care.

2.3.4 **Carer feedback:** a questionnaire was given to all providers who have a contract with the Council in order for staff to feedback their view on homecare in Rutland. A total of 38 responses from frontline staff were received but this is currently still open, until 20th January 2017, for other staff working in Rutland to participate.

3 FEEDBACK THEMES

3.1 Standard of care:

3.1.1 Service users felt that support received is not always up to the standard it should be as carers do not always seem well trained or know enough about the service user needs to support properly. Service users and their family felt that further training should be given to improve this, and for the staff to have knowledge of the service user and their needs.

3.1.2 In relation to this carers felt that where they have asked for further training this has not always been supported or provided and there are limited training opportunities within Rutland for them to source sufficient training independently.

3.1.3 Providers stated that they have found it difficult in some cases to source further training opportunities for staff due to the location of training and the time required to attend these whilst still ensuring a sufficient service is provided to service users.

3.2 Consistency of call times:

- 3.2.1 Service users felt that call times should be consistent but this is not always the case and has caused several individuals and their families difficulty when the calls required have been early, late or missed. For people with more complex conditions, such as dementia, it has caused significant issues as this causes confusion to the individual and disruption to their daily routine. Changes to call times can affect the carer and their knowledge as to what support is required or has been completed.
- 3.2.2 Carers noted that the calls they may have can change dramatically on a day to day basis due to covering annual leave or sickness which in turn affects the way in which they can appropriately support an individual if they have no knowledge of their support needs. Due to location of calls this can affect the original call times that staff have been given where there is insufficient travel time between calls, or where a call has taken longer than expected. This can then affect later calls and staff can feel as though they have to rush calls to 'catch up'.
- 3.3 **Consistency of carers:**
- 3.3.1 Service users felt that where they have regular carers they have been able to build positive working relationships and have felt that the level of support received was better due to a carer having knowledge of their needs.
- 3.3.2 Carers advised that they would prefer regular service users to support in order to work more effectively with individuals which would provide them with more stability, less stress and better job satisfaction from being able to build a better relationship with the service user.
- 3.4 **Rate of pay:**
- 3.4.1 Providers stated that the actual cost of care in Rutland to them is around £20 per hour. They state that this would support paying for travel time and more appropriate levels of mileage pay. Providers felt that if new higher rates of pay were introduced this would attract new carers into the profession and assist with retaining current carers.
- 3.4.2 From a carer point of view, some said that within a working week there can be several hours of travel time that are currently not paid for, which in turn affects their commitment to the job. There was also a feeling that due to the hourly rate paid there are difficulties recruiting when other industries pay the same hourly rate with less responsibility, or commitment required, than that of social care work.
- 3.5 **Communication:**
- 3.5.1 Service users felt that in some areas the communication with providers and carers was acceptable but could be improved when it comes to the call times or carers changing and notifying them of this, and when requesting feedback from service users and their families in order to improve the services provided.
- 3.5.2 Carers felt that communication between themselves and the provider was not always to the level it should be, and that they should have more opportunities to be assertive and take initiative when supporting service users in understanding their needs and providing appropriate support.
- 3.5.3 Some service users and staff members have advised that they do not always feel

the provider has listened to them and their concerns nor have they been assured as to how issues raised have been dealt with.

4 CONCLUSION AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS

- 4.1 From the feedback received the future model of domiciliary care in Rutland needs to ensure the following points are considered when re-commissioning domiciliary care:
 - 4.1.1 Consistency of carers and call times: by ensuring call times are consistent reduces anxiety and stress to the service user as they will be aware of when the carer is expected to arrive.
 - 4.1.2 Location of calls and the travel time required for these: potential to improve where carers are working in relation to surrounding packages of care which then reduces travel time required and increases available capacity within the provider services.
 - 4.1.3 Rate of pay for commissioned services: reviewing the rates would impact on how providers to pay workers for their travel time and mileage, which in turn may impact the recruitment and retention of staff.
 - 4.1.4 Sustainability of provision and ensuring capacity to support any new packages of care.
- 4.2 As the new model for delivery of homecare services, and specification, is developed these points, and any additional raised by scrutiny will be taken into consideration

5 BACKGROUND PAPERS

- 5.1 Report 131/2016 Home (Domiciliary) Care tabled at People (Adults & Health) Scrutiny Panel July 2016 sets out background detail on the provision of home care in Rutland.
- 5.2 Minutes of the meeting of the People (Adults & Health) Scrutiny Panel held on Thursday, 22nd September, 2016.

6 APPENDICES

- 6.1 Appendix A: Domiciliary Care Service User and Carer Feedback

A Large Print or Braille Version of this Report is available upon request – Contact 01572 722577.

Appendix A. Domiciliary Care Service User and Carer Feedback