



Care at home external services engagement report

**The experiences of people who receive
a service and their unpaid carers**

June 2021

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1. About the report

This report presents the findings from the care at home engagement survey carried out during May 2021 in support of the commissioning of a new outcome-focused service from a single external provider from 01 November 2021.

The purpose of the survey was to monitor levels of satisfaction with current services and how well the Health and Social Care Standards were being met by providers. It also aimed to improve understanding of the aspects of care that matter most to people through highlighting needs, issues and opportunities for improvement.

The survey was conducted as a postal survey where a paper questionnaire was sent to all persons identified on CareFirst as being in receipt of a care at home service from an externally commissioned provider during week commencing 12 April 2021.

A total of 361 questionnaires were issued and 171 returned, giving a response rate of 47%.

2. Key findings

In terms of assurance that the Health and Social Care Standards are being met by external services, the survey found that:

- 83% experienced high quality care and support that was right for them.
- 75% were involved in decisions about their care and support.
- 90% had confidence in the people who supported and cared for them.
- 71% had confidence in the organisation providing their care and support.

Outcomes:

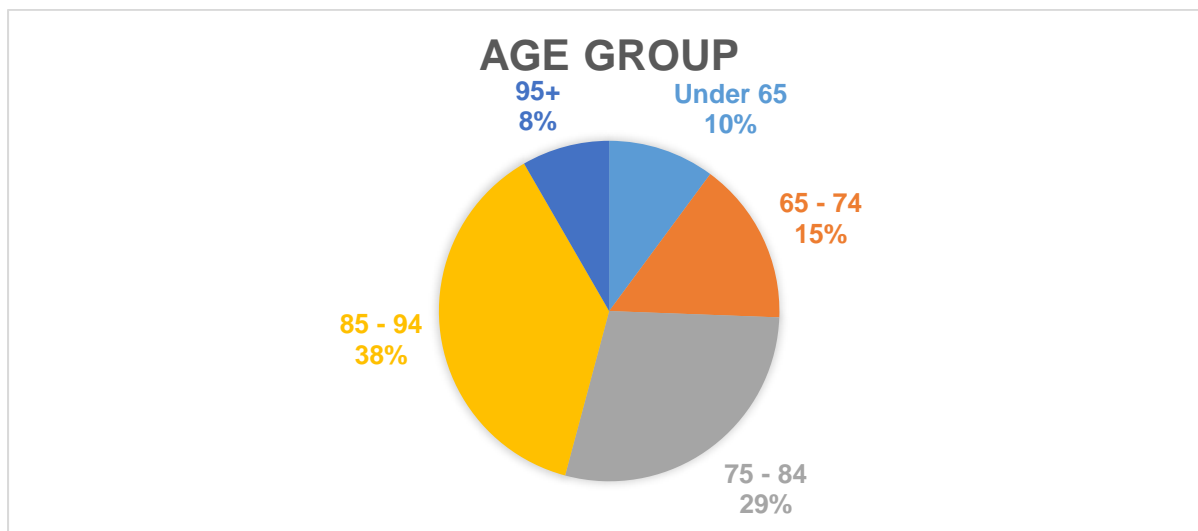
- Almost everyone (95%) indicated they were treated with dignity and respect.
- The vast majority (95%) agreed their service helped them to feel safe at home.
- 88% indicated they felt able to live more independently as a result of the support from their home carers.

Service delivery:

- More than eight in ten respondents (82%) rated the service they received as either very good (42%) or good (40%).
- 89% rated the staff who provide their care and support as very good (57%) or good (32%). Almost three-quarters (74%) of people reported they always or usually saw the same carers
- Less than half (48%) were given a choice of when carers would visit and fewer than a third (29%) had a choice over how long visits would be, however 76% reported their carers always or usually visited at the times they wanted
- 88% said their carers helped them with the things that were most important to them, but almost a quarter (24%) felt carers didn't always have enough time.

3. Who responded

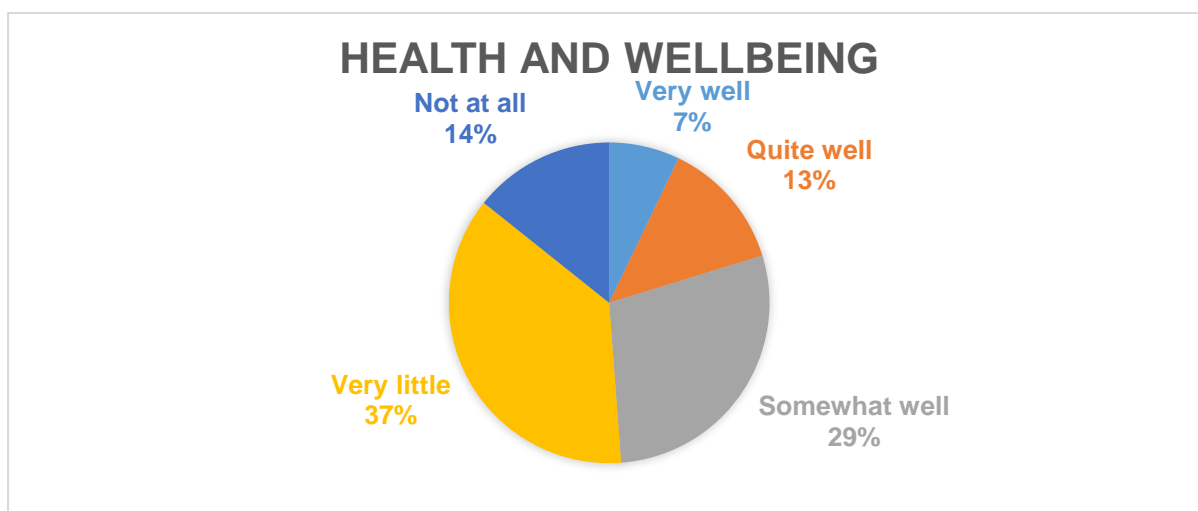
- 171 people
- 40% (67) male, 59% (100) female, 1% (2) preferred not to say.
- 44% (73) were the person receiving the care, 56% (94) were completing the response on their behalf



| Age group | Under 65 | 65 - 74 | 75 - 84 | 85 - 94 | 95+ | Base number |
|-----------|----------|---------|---------|---------|-----|-------------|
| Total | 17 | 26 | 48 | 63 | 14 | 168 |

Health and wellbeing and quality of life

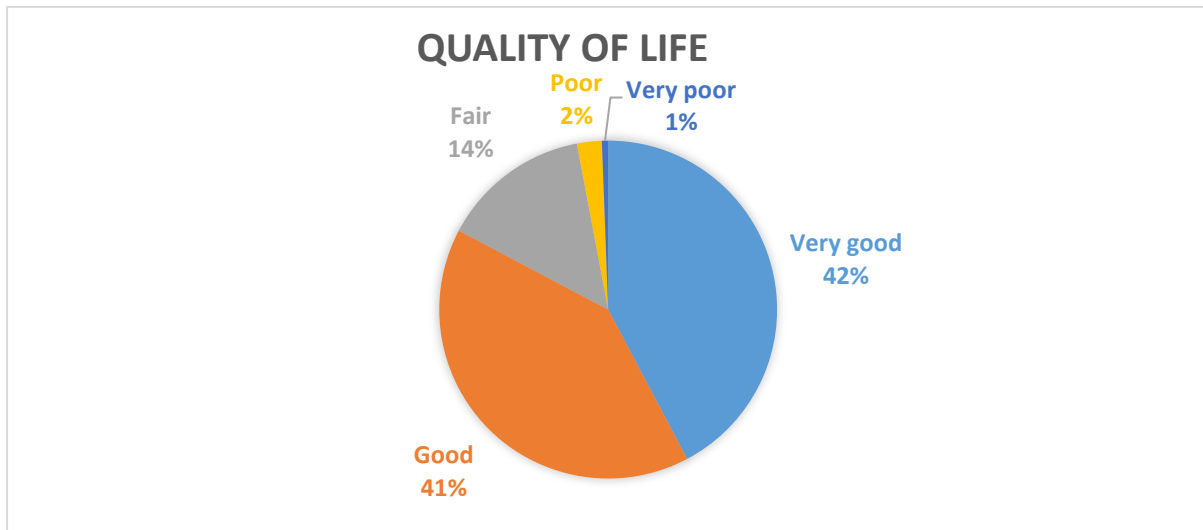
Q: In general, how well are you able to look after your health and wellbeing?



| Answer choices | Very well | Quite well | Somewhat well | Very little | Not at all | Base number |
|----------------|-----------|------------|---------------|-------------|------------|-------------|
| Total | 12 | 22 | 48 | 62 | 24 | 168 |

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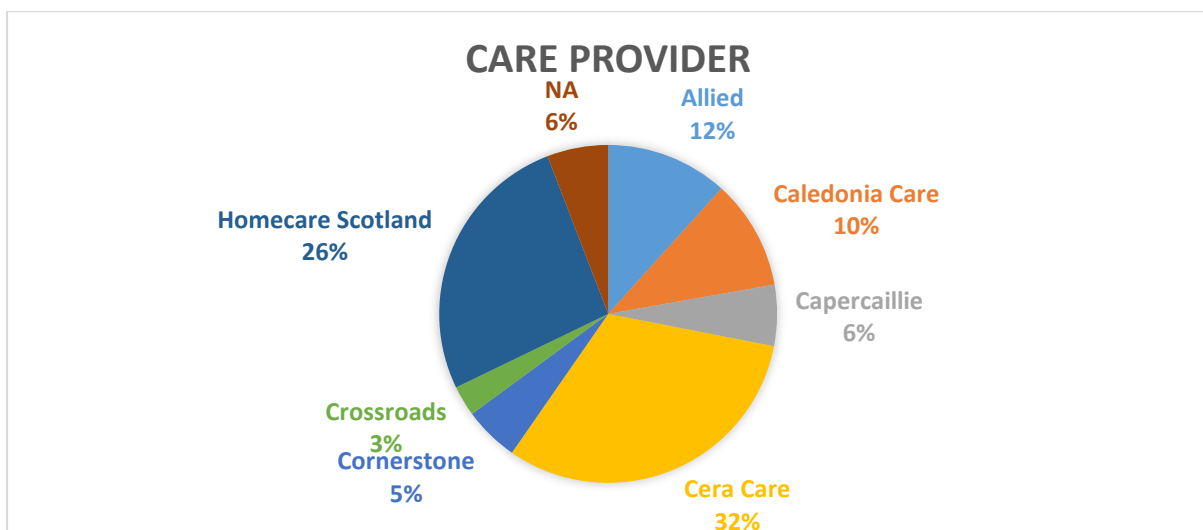
Q: Thinking about the good and bad things that make up your life, how would you rate your quality of life as a whole?



| Answer choices | Very good | Good | Fair | Poor | Very poor | Base number |
|----------------|-----------|------|------|------|-----------|-------------|
| Total | 71 | 68 | 24 | 4 | 1 | 168 |

Care provider

- Almost a third of people (32%) received their service from Cera Care



| Provider | Allied | Caledonia | Capercaillie | Cera | Cornerstone | Crossroads | Homecare Scotland | NA | Base |
|----------|--------|-----------|--------------|------|-------------|------------|-------------------|----|------|
| Total | 20 | 18 | 10 | 54 | 9 | 5 | 45 | 10 | 171 |

4. What people told us about their experiences, needs and aspirations

We asked people a number of open questions to gather feedback on their experiences, needs and aspirations

Q: Looking ahead, what matters most to you about your future care at home service?

People told us they want to continue living independently at home for as long as possible and that care at home was essential to this, particularly as their health declined and their support needs increased. The service helped them to feel safe and also gave reassurance to their families.

“My carers support me so well and adapt to my needs allowing me to remain in my own home.”

“I would like my care at home service to continue and increase as I get older and need more support in being able to live independently in my own home.”

“It makes me feel more secure and safe knowing I have carer arriving as I have had many falls and feel more safe.”

“Carers coming in morning and evening ensures that my family can be informed if there are any problems.”

People want a service they can rely on. Having a consistent team of carers allows positive relationship to form and improves person-centred care. People want to have staff rotas in advance and carers who come at the agreed times. Late and missed visits were a particular issue when medication had to be taken at regular times. Good communication with the provider organisation and between the provider and its own staff was highlighted as being important.

“Having consistency in carers is a huge help as they know him.”

“Carer visits need to be at consistent times. At the moment it varies from 9.30-11.30am. A few occasions it's been PM.”

“The rota weekly sheets should come in time to be useful.”

“Having someone at the carers' office who is approachable when problems arise.”

“There is no way of contacting the carers directly to pass on important information such as about medication. When you phone the office they do not pass information on to the carers at all.”

People told us the carers who support them should be caring, compassionate and skilled to enable good relationships to be formed and to ensure they feel confident that their needs will be met in the right way. Being treated with dignity and respect and being listened to remain important.

“I feel confident with my care team. It helps when I worry about getting frailer. I know my carers are capable and kindly. They don't get paid enough for their skills and hard work.”

“The kindest person in the world is not going to be useful as a Carer unless they are trained properly.”

Looking ahead, people highlighted the need for their support to be flexible, particularly around the times of visits, and responsive to their changing needs with longer or additional visits as required. Increasing care needs should be anticipated.

“Would like care provider to be more flexible and provide care at times that suit me most.”

“What matters, thinking ahead, is having the option to request extra visits when needed at short time without having the long wait for feedback from the social work team.”

Q: What improvements would you like to see?

People want to have a regular team of carers and to know who to expect in order to build trusting relationships. It is important to them that they receive copies of the staffing rotas in advance. This is particularly important to them when their regular carers are on annual leave.

They want to be able to depend on their carers; that they will arrive at or as close as possible to the time they are expected and if there is a change, that this is communicated to them by the provider as soon as possible. Carers attending at the right time was a concern for those who needed to take medication at regular intervals.

“I would like to be informed as to what time and who will be coming in when my regular carers are off.”

“Consistent carers. Carers to be aware of information on care plan.”

“More continuity of care (seeing the same person more regularly). Weekend times all over the place. I would like to see this improve.”

There was a call for better organisation of rotas to reduce the pressure on carers which also impacted on service users.

“Carers have been good. Poor management. Rotas need to be better organised so carers are not rushing off to see next client (often at other side of area).”

People would like to see a more flexible and responsive care at home service. Many told us they would wish to change the times of their visits or to have longer visits. People highlighted improvements they want to their personal care. As their care and support needs increase, reviews need to be more frequent and the service must be able to respond. Care at home services should support unpaid carers as equal and valued partners.

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“Basically more time, especially flexible, negotiable time.”

“More time for each visit as each timed visit does not leave any spare for extras. As I am very frail this would be most helpful.”

It was very important to people that they were listened to.

“More personal power. To see in action what I want, not what others decide I need.”

It would make a difference to people if their carers could do more in terms of meal preparation and housework, or even just more time to keep them company.

For new carers, training was felt to be an area for improvement on how to support people with dementia and in the use of equipment. Carers also need to be able to listen and to treat people with dignity and respect.

“Some carers don’t know how to use some of the equipment they use for the people they care.”

“New carers could be trained longer before doing the job independently.”

“Better medical training, or when to see when it is required. Better training in how to persuade clients if they are unwilling to co-operate (e.g. washing etc.).”

Q: Are there any areas of concern you have?

A significant concern was around medication management.

“Often the carers are running very late and I miss out on my morning tablets. Lately they are so late in the morning that I have to dress myself without getting a wash.”

“Mum being left without medication which has happened on more than one occasion. One week mum wasn’t getting her pain medication until 11am, despite being up for 8am and being in pain.”

“Mix up on meds several times.”

“No pain medication when needed.”

Some concern was expressed over the financial aspects of the recommissioning process and the move to a single external provider. People were worried about a change of provider and whether this would lead to a poorer experience. Many told us that losing their regular carers would be difficult for them.

“My concerns revolve around change just like many other people. It is something I find difficult to come to terms with. Crossroads has supplied my care for 18 years and my Mother’s also before her death.”

“Only concern is my provider changing as this would cause distress.”

“The continuity if the care provided is very important to me as I have a lot of confidence in the carers who provide my care at home service.”

Many of the areas previously highlighted as requiring improvement were mentioned. These included carers running late, variations in the standard of care and poor

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communication, particularly around rotas and which carers to expect and how concerns can be raised and acted on.

“The care given varies by carers - quality control required re how the individual carers are doing.”

“If not usual carers do not carry out my care plan if shower on it. Say mine can do it when they come back.”

“Sometimes when you phone late afternoon to cancel carer or try to speak to someone you don't get a reply as they have switched over phones early to on-call. On call doesn't start till 5pm. I have phoned at back of 4 on a Friday and it's already been switched over so there is no cover.”

Many of the concerns centred on people's declining health, increasing frailty and growing support need. People worried about have their support reduced and their carers being rushed.

Q: Is there anything else you want to tell us?

Many people expressed high levels of satisfaction with their current service and told us much they valued their carers.

“Although initially apprehensive about having carers, the current two ladies attending to my needs have become like friends and a great rapport has been built between us. I have a huge amount of confidence in them both.”

Some respondents detailed issues they have had with the current external providers, including staffing levels, poor communication, poor quality of care and reliability. They called for better training and understanding of people's conditions and a more flexible and responsive service which supports people towards the outcomes they set for themselves.

Full responses made to all the questions are included at the end of the report.

Engagement in the procurement process

The survey was also used as an opportunity to invite people to be more directly involved in specific decisions about who provides the future care at home service.

17 people – a mix of those who receive a service and family members – expressed an interest in participating in a decision-making panel.