



## INDIVIDUALS OVERVIEW AND SCRUTINY SUB-COMMITTEE, 29 NOVEMBER 2017

<b>Subject Heading:</b>	Healthwatch Havering – Work on Domiciliary Care Services
<b>CMT Lead:</b>	Barbara Nicholls
<b>Report Author and contact details:</b>	Ian Buckmaster, Director, Healthwatch Havering 01708 303300 ian.buckmaster@healthwatchhavering.co.uk
<b>Policy context:</b>	The information presented summarises the work undertaken by Healthwatch Havering to scrutinise domiciliary care services in Havering.
<b>Financial summary:</b>	No financial implications of the report itself for either the Council or Healthwatch Havering.

### The subject matter of this report deals with the following Council Objectives

Communities making Havering	<input checked="" type="checkbox"/>
Places making Havering	<input type="checkbox"/>
Opportunities making Havering	<input type="checkbox"/>
Connections making Havering	<input type="checkbox"/>

### SUMMARY

The attached information details the work carried out by Healthwatch Havering to scrutinise Domiciliary Care Services in Havering.

## **RECOMMENDATIONS**

1. That the Sub-Committee considers the information presented by Healthwatch Havering and takes any action it considers appropriate.

## **REPORT DETAIL**

Healthwatch Havering was asked by Adult Social Care (ASC) to undertake a survey of users of Homecare Services commissioned by the Council over the summer period 2017. The interviews were carried out by Healthwatch volunteers, who called at individual's homes (by advance arrangement), though in a small number of cases the interview took the form of a focus group of several interviewees.

42 care service users living mainly in sheltered accommodation provided by the Council's Housing Service were selected and invited to participate. In the event, it proved impossible for Healthwatch to see all of those nominated for a variety of reasons, but 23 interviews were carried out. Although the exercise was not statistically sound in that only a small number of users was canvassed, and those participating were chosen in advance rather than selected randomly from the whole number of service users, it is considered that the results paint a reasonably reliable picture of users' views.

Each user was asked a series of questions (drafted by ASC) about the service they received: the questionnaire is appended to this report. The presentation that will be given at the meeting includes a slide that shows each user's response to the questions – in the matrix on that slide, green represents a Yes answer, amber Sometimes, red No, blue Not Applicable and grey Don't Know.

The first coloured column of the matrix in the presentation attached shows the overall view of all interviewees while the remaining columns show each individual's view. The majority of responses, both individual and overall, indicate a favourable view of the service although there appear to be a few areas where the responses suggest that there is a level of dissatisfaction that requires further thought – these are where the overall response shows as red (*Do new carers introduce themselves*; and *Are you told about social events/activities in your area*), or where there is more than a single individual response in red (*Does your carer adjust room*

*temperature or open windows; Does the agency help change the support you get; and Do you choose when to get up or go to bed).*

The presentation also includes general comments from the volunteers who carried out the interviews, and comments made by service users during the interviews.

The conclusions are that:

- Most service users are satisfied with the service they receive
- Most carers do what users expect of them
- Agencies' administration of the service can sometimes be less than adequate
- Not enough is done to address expressions of dissatisfaction
- There can be communication difficulties between users and carers
- Different agencies offer different services

**IMPLICATIONS AND RISKS**

**Financial implications and risks:** None.

**Legal implications and risks:** None.

**Human Resources implications and risks:** None.

**Equalities implications and risks:** None.

**BACKGROUND PAPERS**

None.