

Adult Social Care Scrutiny Commission
3rd April 2014

Domiciliary Care Review – Response from Media Appeal

Case 1

I have a neighbour who has no family, she is over 80 years old and has been housebound for some years now. Any friends she had have died or are unable to visit. The system that operates in the City at present does not seem to be set up to deal with the situation of someone without friends and relatives to care for them. I understand she pays for carers to attend 2 or 3 times a day but they often end up on my doorstep asking me to help with something which they are not permitted to do themselves. We have tried to help by organising a gardener to do work for our neighbour but although the price was reasonable and had been agreed beforehand she was very slow to pay them. I have been reluctant to help organising any further work for her and feel it would be good if there was someone independent who could act on her behalf to keep her home in order, as she is unable to do this herself.

I have been asked to pick her up if she has fallen as the carers are not allowed to do this on their own. I have been asked to change light bulbs as the carers are not allowed to use the ladder. I have been asked to find a gardener, a plumber, an electrician, supply a multi-socket extension cable to the man who had been asked to move the care line box into another room. Recently she was taken to hospital and I was asked to take some clothes for her as apparently the 3 person ambulance crew who took her into hospital are not permitted to pack a bag for her. I only found out she had been taken into hospital when the hospital staff phoned two days later, one of her main carers also knocked on our door to ask where she was as she hadn't been informed either. I did ask the hospital staff if the carers would have been informed and they told me that this would have happened, clearly it did not happen.

The care staff would like her to go into residential care but the lady concerned has not wanted to move from her home so they are unable to do anything but to continue to care for her there as best they can.

Case 2

I am a working carer for a number of people. Only one of them resides in the City. My mother resides in the City and her experiences of domiciliary care have been mixed. I think it is important to state that my other relatives (who live outside of the City boundary) have had poor experiences of domiciliary care, particularly in relation to commissioned 15 minutes visits. All these type of visits allow is a quick hello, do you want a drink and sandwich?, a medication prompt. Is your personal alarm at hand ? and a note in the care log saying all is well on leaving – that's not quality care.

Currently, my mother employs a personal assistant to provide her with support with her shopping and cleaning and personal care. The individual concerned is reliable and professional and I have no worries that my mother is receiving excellent care whilst I am at work. My mother has developed a rapport with her personal assistant where as previously she was unnerved by the constant changes of new carers.

Previously, she used a company identified via her City Council care management officer. It came to light that the carers employed were stating that they had spent more time with my mother than they actually had and there appeared to be no system check to alert that this financial abuse was taking place. The carers were taking her to shop but doing their own shopping on her time and were constantly on their mobile phones. On one occasion, the carer said she was late as she had been applying for some immigration documentation. The carers notes were incomplete and on reviewing the notes it appeared to me that the notes were copied from those above on a constant basis.

My mother did not raise these issues with me for some time as she felt sorry for the carers who appeared to be vulnerable individuals themselves. We were left feeling that my mother was not being safeguarded and that the carers were being exploited by the company who employed them.

When I contacted the care management team to complain they stated that there had been complaints about the company previously – so why were they still on the list. Where is the initial and continued quality check for commissioned services?

I hope you accept these comments so constructive criticism. Our loved ones deserve the best care possible.