

Making complaints – self-funders continue to be overlooked

Proposals for a new approach to handling complaints made by people using health and social care services hold out little hope that people paying for care provided by the independent sector themselves will get a better deal than at present.

The consultation document published by the Department of Health, *Making Experiences Count*, (to be found on the DH website under 'Consultations') does not even acknowledge the anomalous position that self-funders find themselves in.

The new approach recommended by the document suggests that, in the case of primary and social care, people have two avenues of complaint – to the service provider themselves or to the primary care trust (in the case of health) and to the service provider or the local authority (in the case of social care).

But it completely overlooks the fact that many social care service users – this includes 30 percent of all people in residential care – are not supported by the local authority, have no relationship with the council and have therefore no avenue of redress via the council. The only course of action for these people under the proposed approach

is to complain directly to the organisation providing the service.

Our experience at the R&RA shows only too well just how difficult it is for many people to do this. Relatives calling our advice line frequently tell us of their reluctance to complain to the home. They are afraid of the reaction it may provoke – at worst, fearing that their loved one may be victimised if a complaint is made and may even be evicted. Indeed, many have direct experience of this fear becoming reality.

While it is difficult for anyone – whatever the situation – to complain directly to the person involved, it is particularly difficult for people with relatives in care. Their loved one is likely to be extremely frail and vulnerable and wholly dependent on the goodwill of those whose behaviour is the cause of the complaint. In these circumstances, relatives want, more than anything, a means of voicing their complaints to an external, independent complaints investigator. They do not want to be told to go back to the service provider to air their complaint.

In the meantime, consultation on the document goes on, closing on 17 October.

Why not send in a comment?

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Volunteering in care homes for older people – 'an underused opportunity', conference told

Speakers at the conference organised by the R&RA in July to explore the reasons why there are so few people putting themselves forward to volunteer in care homes for older people told a lively audience what a valuable contribution volunteers could make to the quality of life of residents.

Justin Davis-Smith, Deputy Chief Executive of Volunteering England, in a wide-ranging overview of trends in volunteering, suggested that there could be a mix of reasons why care homes were often overlooked. Potential volunteers might not know what scope there was for them to get involved because they did not know enough about daily life in care homes and the needs of residents. Others might be sceptical about the value of volunteering in privately-run homes without realising what an important contribution they could make to the quality of life of very frail older people.

Consultant geriatrician, Dr Nori Graham, described how older people, especially those living alone or in care homes, were at risk of developing depression which often went unrecognised. The involvement of volunteers

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Over 25 percent of calls to the R&RA Advice Line are concerned with making complaints or are about issues that could well merit complaints being made. So the Department of Health consultation report (see page 1) on introducing a new approach to the handling of complaints is of special interest to me.

Sadly it doesn't look as if it is going to improve the situation for most people. The first worrying indication of this is that it states that it is going to introduce a 'new approach' that will mean a 'culture change' – not a new set of processes. It will involve lots of talking with people responsible for delivering services, seeing people face to face and where the personal approach doesn't work there will be an organisational response.

In my experience, however, people want clear-cut pathways and guarantees about what and when to expect from a complaints procedure. They don't want non-specific commitment to 'talking'.

They also want recourse to an independent ear outside the home. In the serious cases, they do not want to have to go to a senior member of staff or the manager of the home to voice their complaint because they are the people responsible for the regime that has created the problems in the home, and in some cases may be the people actually responsible for direct harm. I often take calls where the caller reports that their loved one has been threatened with eviction once a complaint is raised.

At the moment, one of the things I find most worrying is the fact that the regulator (Commission for Social Care Inspection – CSCI) will not investigate complaints about the treatment of individual residents made by relatives. They advise people to raise the matter with the home (just as the new report recommends). They say that they will only get involved by undertaking an inspection if they suspect regulations are being breached. In fact, in a recent radio programme, *File on Four*, the CSCI spokesperson actually said they were not legally entitled to take up individual complaints.

I had hoped that the report would recommend a clearly defined role for CSCI at an early stage in the complaints process. But no, this isn't going to happen.

It's all very well to tell people they can go to the local council with their complaint, but I don't see any evidence that councils are enthusiastic about following up complaints either. And for self-funders, that possibility doesn't even exist. The local council most likely will never have heard of them, let alone feel they have any responsibility for them.

I hope enough people will ask the Department of Health to think again.

People worry about their relatives in care and to realise that they have no clear or straightforward means of making a complaint if they need to, only makes things worse.

Chris Ardill,
Advice Line Manager
chris.ardill@relres.org

Just to remind you that the Advice Line is here to help you by:

- providing a listening ear when you most need it
- informing you on how to find the care home of your choice
- explaining what to expect from a care home – the National Minimum Standards
- advising you on your rights and obligations with regard to the paying of care home fees, including your entitlements
- informing you about local authorities and the NHS – their duties towards the care of older people
- helping you deal with care concerns or abuse – making a complaint



Do you have a relative in a care home?

Do you worry or feel guilty?

Do you need information?

Or just want to talk?

**The Relatives & Residents Association
Advice Line**

020 7359 8136

Open 9.30am–4.30pm,
Monday–Friday

We are delighted to receive letters from newsletter readers and callers to the Advice Line. Please contact us with views, comments and ideas. We will be pleased to print them.

Thanks for help

Dear Chris,

Thank you and Dr Dalley for your prompt and courteous response to my queries. It meant so much! Please keep up the good work! Thanks.

Anon

About one of our publications

Dear R&RA,

I am writing to say how good your book *Moving Stories* is – so many things in there related to how I feel. Most people think if your relative goes into a care home – end of story – but this is far from the case and all you really want is some understanding of how it is for you too. I do hope many people read it.

Anon



Moving Stories: the impact of admission into a care home on residents' partners by Alison Clarke and Les Bright has been described as 'a timely and important reminder of the emotional and practical difficulties experienced by partners and spouses when the problem of care-home admission presents' in a review in the journal *Ageing & Society*. Copies can be obtained through using the form on page 8 or the R&RA website (www.relres.org).

About our last newsletter

Dear R&RA,

Thank you for the summer 2007 newsletter, which I read with interest. With regard to the article on the vulnerability of care home residents and the human rights campaign, I was astonished to learn that the aim is 'to extend the coverage of the Human Rights Act to cover such residents'. Does this mean that, up until now, people living in private care homes were not included in the Human Rights Act? [Editor's comment: Yes, it does.]

It is comforting to read of good experiences, and I, personally, have come across one residential home in the Newcastle area which was very good indeed. But, sad to say, those places seem to be few and far between.

A neighbour of mine, who visits a friend in a local care home, pointed out to one of the assistants/carers that her friend needed to 'spend a penny'. My neighbour overheard the instruction given by a senior carer to the assistant in question – 'Tell her to do it in her pants – after all, she is wearing pads.' How disgusting! That poor lady, who is suffering from Alzheimer's, was moved into the 'care' home approx. 2 years ago. She was confused, forgetful, but quite mobile. Apparently, she is left sitting in a chair for most of the day, and, consequently, is now unable to walk! I am appalled at such treatment. Presumably, this sort of neglect/abuse is not discovered on routine inspections. Would it not be possible for relatives to be invited to a 'home' when an inspection is due, so that they can draw the attention of the inspector to such matters of grave concern?

Anon

(continued from page 1)

in the daily life of residents could contribute to a home's strategy for combating this.

Representatives from the care home sector, Helen Spiro and Alastair Addison from Nightingale and Julie Lamont from Brendoncare, challenged conventional scepticism about using volunteers in the residential care sector. They described the innovative and successful programmes for volunteer involvement that they had introduced into their homes and encouraged all providers to consider doing similar activities, saying that volunteering really could be a winner.

The audience – a mix of relatives, care providers, activities organisers and care staff – responded enthusiastically to the ideas and schemes described and many of them asked for further information, resolving that they would develop their own plans for volunteer engagement in the future.

The decision to hold the conference came about as a result of the success of the R&RA's publication of a report by Rose Heatley – *Volunteers in Care Homes for Older People: an underused opportunity?* – earlier this year. If you would like to purchase a copy, please see the form on page 8 or order through the R&RA website (www.relres.org).

Positive feedback on the day...

- 'Thank you for a well presented day. Refreshingly simple but to the point and good ideas.'
- 'Fantastic day. Congratulations!'



Two participants enjoy lunch at the conference on volunteering

Keep the standards flying – what standards you have a right to expect from a care home and what to do if the home falls short

One of the most important advances in regulating care homes in the last twenty years was the publication of the National Minimum Standards (NMS) in 2001. Surrounded by debate and controversy ever since, the NMS remain the official benchmark for all providers of care, for managers, staff and inspectors. However, the standards are still regarded as the 'property' of the Commission for Social Care Inspection (CSCI) and all the 'professionals' involved in care homes, rather than being standards that can be used by residents and their relatives to judge whether a home is 'up to standard' or not. (CSCI and NMS are parts of the English system of care home regulation; however, the principles are the same for the rest of the UK.)

Don't leave it to the professionals

I find it worrying that some care homes may not be inspected by CSCI for several years. If the inspectors find that a home is 'excellent' and, from next year, award it three stars, it probably won't be inspected for another three years. A lot can change in one year, let alone three.

Having just read last year's inspection report for a home that CSCI have closed down giving the residents an hour's notice to find alternative accommodation, I have little confidence in the inspectors' ability to judge whether a home is meeting the standards. The last inspection of the home (on 26 October 2006) found that, of the twenty-one standards inspected, seventeen were fully met and four were nearly met.

No, although I'd recommend reading inspection reports, I wouldn't rely on them!

My own experience as a relative further undermined any belief that I had in CSCI's abilities. Although there were several very good staff at the home my father chose, there were one or two who bullied and abused. I alerted the inspectors to this (and, of course, talked to the manager about it), but CSCI were simply ineffectual in investigating the problem, or in 'stamping out bad practice' (their words). CSCI have now – very publicly – stated that they do

not investigate individual complaints (*File on Four*, Radio 4, 18 September 2007).

Similarly, don't rely on what the people who run the home say. Of course, just as there are excellent inspectors, there are also excellent and thoroughly honest care homes. But CSCI are now asking homes to complete a self-assessment, a central component of which is feedback from a quality assurance system in the home. So, if they don't already, your care home will be asking you for regular feedback which they will then send on to CSCI.

Is your home up to standard?

Please see the checklist in the box opposite.

What do you do if your home is not up to standard?

Remember that, however good your home is, things can and do go wrong. A good home will respond quickly (and gratefully) to any complaint, and giving regular compliments about the positive things in the home encourages staff and helps to keep them on the right track.

All homes must have a 'complaints procedure' but you do not *have* to use it. If you feel that it constrains rather than helps you, make your complaint in your own way.

Do keep notes – in your diary or in a notebook – and, if there's something wrong, take action immediately.

When things go wrong

These are the steps to take – in order. If one step doesn't produce an improvement, go on to the next step.

1. Discuss it with a member of staff and/or the manager.
2. Put it in writing.
3. Consult an adviser – such as the R&RA Advice Line (020 7359 8136).
4. Contact the inspector for the home (CSCI).
5. Set out your complaint(s) in full with dates and evidence (from your notes).

Most complaints should be sorted out to your satisfaction with step 1, but always prepare

yourself for the 'long haul'. The clearer and more precise you are, the more likely you are to succeed in insisting that the home meets any and all of their obligations set by the National Minimum Standards.

Your Care Home: are we up to standard? A guide for residents and their families will be obtainable from Counsel and Care (www.counselandcare.org.uk) late in 2007.



John Burton (above) is an R&RA member and writes in a personal capacity.

John's father lived in a care home and he is a carer for his mother. John has also been an inspector, care home manager, and, many years ago, was a resident in a care home (a probation hostel). He is now an independent social care consultant, author and complaints investigator. He is also an advocate for residents and relatives, and a volunteer at a local care home.

jb@johnbrixton.demon.co.uk
www.standardsforpractice.co.uk

Is your home up to standard?

The National Minimum Standards set out what you can expect as a resident (or relative) and what you have a right (yes, a *legal* and contractual right) to demand. This checklist is based on the NMS. The answers to these questions will tell you whether your home is meeting the standards.

1. Choice of home

- 1.1 Were you given the information you needed before you decided to come and live here?
- 1.2 Were your care needs assessed?
- 1.3 Were you offered a visit to the home before coming to live here?

2. Health and personal care

- 2.1 Have you seen your care plan?
- 2.2 Were you involved in making your care plan?
- 2.3 Does your care plan meet your needs?
- 2.4 Do staff follow the instructions in your care plan?
- 2.5 Do the staff treat you properly (privacy and respect)?
- 2.6 Are you content with how your medication is managed?

3. Daily life and social activities

- 3.1 Are there any unnecessary restrictions in the home?
- 3.2 Does the home provide interesting and enjoyable activities and social events?
- 3.3 Is the food good?
- 3.4 Are mealtimes pleasant occasions?

4. Complaints and protection

- 4.1 Have you ever had cause to make a complaint about the home?
- 4.2 If you have made a complaint, was it handled properly?
- 4.3 Have you (or any other resident) been mistreated in any way?

5. Environment

- 5.1 Are the building and garden safe, attractive, accessible and well maintained?
- 5.2 Is your room attractive, comfortable, accessible and CLEAN?
- 5.3 Are there sufficient suitable aids and equipment?
- 5.4 Is the laundry service good and are your clothes looked after?

6. Staffing

- 6.1 Are there sufficient staff on duty to give you the care you need?
- 6.2 Do you think the staff are well enough supported and trained?

7. Management and administration

- 7.1 Does the manager ask you (and listen to you) about your care and the way the home is run?
- 7.2 Are you satisfied with the financial administration of the home and how your own money is managed by the home?

Please feel free to photocopy this checklist.

In this issue we describe some of the work that the Relatives & Residents Association is currently undertaking.

New project – supporting isolated older people in care homes

No one knows precisely how many people living in care homes have no relatives or friends to support them although we have plenty of anecdotal evidence to suggest that it may be a significant number. We also hear stories of residents having little or no contact with their families, even where they exist. We know that the older someone is the less likely they are to have relatives and friends in active contact.

Yet we also know what an important role relatives and friends can play in championing the interests of older people living in residential care and how they can contribute greatly to their quality of life. This raises questions about the potential vulnerability of those without relatives and friends both in terms of their quality of life and in relation to risks of abuse or mistreatment.

In order to explore some of these issues the R&RA has been awarded a Section 64 grant from the Department of Health to undertake a survey of care homes in England in partnership with Brunel University to ascertain the number of residents without kin. Once the number of isolated residents has been established, the project will then go on to develop advocacy strategies and materials to support residents in this situation, working in conjunction with a number of care homes sympathetic to the aims of the project.

Laura Jones has been appointed project officer to take this work forward.
laura.jones@relres.org

A new service with new partners

The R&RA has entered into partnership with five organisations that run care homes for older people. A new phone line, run by the Association, will give help, advice and support to residents, and their friends and relatives, of care homes run by the Partners. The line, which is funded for a year, will also be available to people thinking of moving into their homes.

The five Partners are Anchor Homes, one of the largest providers of care services for older people in England; Abbeyfield Kent; Somerset Care; CLS Care Services, which runs homes in northwest England; and Heart of England Housing and Care which operates in Worcestershire. Between them they own and run nearly 200 homes providing care for almost 8,000 older people. All of the Partners are members of the National Care Forum which represents organisations that are run on a not-for-profit basis and are committed to improving the quality of life of their residents.

Alison Clarke has joined us to run the Partnership Advice Line and will be working closely with Chris Ardill who manages our general advice line. Alison, who has worked previously on an advice line for older people, is co-author of last year's R&RA publication, *Moving Stories* and we are pleased that she has now joined us as a full member of staff.



Although the Partners are paying all of the costs associated with the new advice line and we will report back to them at regular intervals about the number and sorts of calls we are getting, the advice line is completely independent and confidential (as you would expect). The Partner organisations promote the service to their residents and their families and will give information about the line to people who contact them about vacancies.

We expect to get calls on a whole range of subjects, from how to pay the fees of a care home, to what to do if you are concerned about the wellbeing of a resident. Sometimes it may be that the line will simply be there for a resident who needs someone to listen.

We are very excited at this opportunity to work closely with organisations willing to demonstrate their commitment to the wellbeing of their residents in such a practical way and we are proud that the

R&RA has been identified as the organisation best able to provide advice and support to older people in need of care. We will of course provide regular updates on the progress of the new service through our newsletter.

alison.clarke@relres.org

Thinking about... improving practice

'Improving practice' is the theme of a programme of work we have begun working on with some care providers.

Many callers to our advice line express varying degrees of concern about everyday practices in care homes. Sometimes they simply need some reassurance, or an explanation of why something is happening. But on other occasions, armed with the views of a trusted 'friend' they feel capable of making their worries known to the home's manager who then goes on to deal with the matters raised in a wholly satisfactory fashion. That's as it should be – relatives well informed and confident, managers and staff responsive to residents' families. But it is not always like that.

A significant number of calls to the line operated by another voluntary organisation, Action on Elder Abuse (AEA), are about people living in care homes. So, while we don't 'specialise' in abuse, and AEA equally is not a care homes 'specialist', there is a good basis for sharing ideas and working together. When Comic Relief, the organisation behind Red Nose Day – with its imaginative fundraising ideas – made some funds available, to enable a small number of projects to address elder abuse, it seemed logical to work in partnership with AEA.

With thousands of homes, and many hundreds of thousands of staff working in them, we have had to be realistic about what it may be possible to do with a relatively small amount of money and a limited amount of time. Homes also operate under similar constraints of time and money, and so we have had to think carefully about how we will go about this work so as to make a lasting impact. To this end we have set about devising simple, concise briefing materials and methods aimed at raising awareness of the ways in which standards can slip – and what individuals can do to counter this, while also encouraging participants to share examples of good practice.



The topics we have chosen cover some of the most frequent concerns reported to the two organisations' advice lines, and include privacy, mealtimes, continence management and giving personal care. We will soon be testing out the effectiveness of these briefings at short sessions with care staff in a number of homes, taking on board their comments and refining them as necessary to connect with their everyday experience working with residents.

Les Bright, professional adviser to the R&RA, is leading on this work and will provide an update on progress over the coming months. BrightLes@aol.com

Consultancy – collecting residents' views

We have recently taken on a very interesting piece of work from a well-known care provider, keen to find out the extent to which their staff engage with the older people living in their homes.

'Engaging' is a term that translates into:

- Do we ask residents for their views?
- Are the methods we use appropriate to the needs of frail older people?
- Do we take any notice of the views expressed?
- Are we able to demonstrate that we have heard?

This project is still in its early stages but we have already visited seven homes in different parts of England and spoken to a range of residents, staff and managers. While the findings from this work remain confidential for the time being, it has been heartening to see the extent of good practice in this important area.

Whether running a commercial operation, a charitable body or a public service, 'listening to the voices of users' is right at the heart of being successful. Being asked to do work like this gives us opportunities to meet and

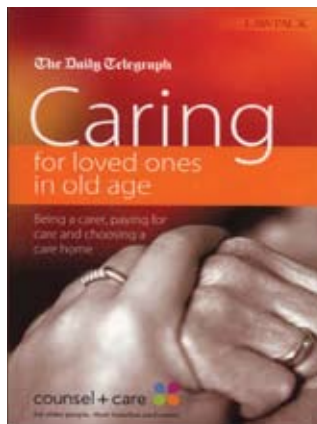
talk with lots of people, while also bringing in much needed funds for the R&RA.

We welcome commissions like this and will be happy to hear from anyone who wants to know more about this aspect of our services.

Contact Gillian Dalley, R&RA chief executive, to discuss ideas, availability and costs. gillian.dalley@relres.org

BOOK REVIEW

New publication for carers gives practical help



Based on its range of accessible and informative factsheets, Counsel and Care's *Caring for Loved Ones in Old Age* is a comprehensive and clear reference guide for carers of older people. It covers financial and practical caring matters with equal clarity and the broad range of subjects shows clearly the many areas of concern facing carers today.

A chapter entitled 'Charitable help for those on a low income' is an acknowledgement that disability, frailty and being a carer are all risk factors for poverty. Information on

flexible working is a reminder that many carers have other responsibilities as well as their caring ones. A chapter dedicated to 'Caring for someone with dementia' covers symptoms, making decisions and finding support.

Counsel and Care has many years' experience advising older people, their friends and relatives on financial considerations so it is no surprise that a large part of the book is devoted to financial information about paying for care at home or in a care home, or how to arrange direct payments – an area where the charity has published work recently. It also identifies some of the areas where problems can arise: the waiting time for an assessment, being denied continuing care funding, if you have concerns or complaints. All sections give practical, straightforward advice.

One of the difficulties in a work of this type – one that sets out to offer comprehensive information on all aspects of caring for an elderly loved one – is that the specific financial or organisational information can change very rapidly so that the book runs the risk of seeming to become quickly outdated. This situation is acknowledged in the section on 'When can I make a decision for the older person?' but consultations on a new complaints procedure and the merging of the Commission for Social Care Inspection and the Healthcare Commission next year show how quickly the care landscape changes. This is a shame as the book's general information on caring or looking for a care home will undoubtedly stand the test of time.

One area that the book doesn't look at in much detail is the reality of living in a care home or having a loved one living in a care home. As last year's R&RA publication, *Moving Stories*, pointed out, the implications for partners in particular when their husband or wife goes into a care home, can be profound.

Counsel and Care, *Caring for Loved Ones in Old Age*
 2007, ISBN 978-1-905261-49-9,
 paperback, £9.99
 Available from good bookshops and the publisher, Lawpack (www.lawpack.co.uk)

Reviewed by Alison Clarke, R&RA Advice Line worker

MEMBERSHIP & ORDERS

Please tick and complete as appropriate:

- Individual membership
(annual subscription £15)
- Corporate membership
(annual subscription £60)
- Booklet Order – *Volunteers in Care Homes for Older People*, £7.50 (£5 for R&RA members) inc. UK p&p
- Booklet Order – *Moving Stories*, £8.00 (£6 for R&RA members) inc. UK p&p
- Donation £.....
- Total Amount:**

Name / Contact:

.....

Organisation (where applicable):

.....

Position (where applicable):

.....

Organisation: Type of Home (if applicable):
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 Voluntary Voluntary
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The Relatives & Residents Association is a company limited by guarantee (no. 2813362) and a registered charity (no. 1020194).

NEW MEMBERS OF STAFF

In the last three months, the R&RA's staff has doubled. We are pleased that our hard work over the past three years has finally paid off and that funders are willing to support an expansion in our work. We can now augment the incredibly valuable work of existing staff and volunteers with newcomers (shown left to right below) Francesca Grandi, our new office manager, Alison Clarke, Partnership Advice Line worker and Laura Jones, Project officer.



Helping out at the R&RA



This issue's 'Helping out at the R&RA' corner features Joy McCarthy, who writes: 'I contacted the R&RA several times while my mother was in care homes. Their advice was always helpful, and when my mother died, I realised I had a lot of knowledge on a subject which was no longer of any use to me. Shortly after I retired, I saw a note in the newsletter asking for volunteers. I work two days a week in the office, dealing with part of the administration. Currently I keep the main databases up to date, and help

with conference organisation. Everyone in the office is extremely friendly. Occasionally I deal with Advice Line calls, and it is very rewarding to help people with problems similar to my own.'

The R&RA is always looking out for volunteers to help in the office (website and desktop publishing in particular!). Please contact us on 020 7359 8148 or info@relres.org for further details.

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