Homecare: making visits matter

Background

A UNISON survey of 1,000 homecare workers was carried out between February and April 2017. The findings highlight the ongoing crisis in the UK’s care system. They reveal that both care workers and those they care for are suffering because official homecare standards are routinely being breached.

The report paints a vivid picture of how elderly and disabled people are ending up lonely, without dignity and with their care needs unmet. This is despite them being desperate for support, says UNISON.

It also highlights how homecare workers are struggling to do their best within a system that increasingly does not allow them to provide skilled and dignified care.

The report comes as councils are cutting social care budgets. They face a £2.6bn funding shortfall, and this has led to an 11 per cent spending reduction in real terms per adult, according to the Institute for Fiscal Studies (IFS). This is for local authorities in England and covers the period 2009/10 to 2015/16.

The Results

The length of homecare visits remain a major concern with more than three in five (63 per cent) respondents only being given 15 minutes – or less – to provide personal care.

Three-quarters (75 per cent) end up rushing and having to compromise the dignity or well-being of those they look after because there’s not enough time to do their job properly. This breaches guidance [[1]](#footnote-1) from the National Institute for Health and Care Excellence (NICE).

Vulnerable people are regularly missing out on basic care as a result, says UNISON. Nearly nine in ten (89 per cent) respondents do not have time for a short chat, even though the person they care for will often see no one else that day.

Three in ten (30 per cent) respondents are so time-poor they are unable to wash, bath or shower the people they care for, and more than half (53 per cent) cannot help them eat or drink. The same proportion (30 per cent) are too rushed to help people to the toilet, even though it might be hours before a care worker returns for a visit.

The people being supported by care staff for include the disabled, those with dementia, stroke patients and others who struggle to communicate. Even people in their nineties are missing out on basic support, with more than three-quarters (77 per cent) of respondents saying they are too rushed to look after this age group properly.

More than a third (36 per cent) of homecare workers say they don’t have enough time because their employers put pressure on them to rush or leave visits early. Two-thirds (67 per cent) are time-short either because they have too many visits in their rota, or cash-strapped councils are not allocating staff (67 per cent) enough time when drawing up care plans.

With staff turnover rates in the industry so high, care workers are often allocated people they’ve never cared for before. NICE guidance states that people receiving support at home should meet their new care workers in advance. This is to ensure continuity of care, that the person looked after feels comfortable and that the worker knows how the service user would like to be supported.

However, more than three-quarters (78 per cent) of respondents said no one had warned the person they were caring for that they would be turning up. Fewer than one in five (18 per cent) of care workers received a formal introduction before they began looking after someone. In addition, more than a quarter (28 per cent) received no supervision when they were starting out in their job.

Training was an issue with many (61 per cent) not shown how to care for people with mental health issues. Others had received no training in how to deal with common but debilitating conditions such as neurological disorders (79 per cent) including Parkinson’s and multiple sclerosis (MS), diabetes (66 per cent), dementia (30 per cent), sensory loss (68 per cent) such as sight or hearing, and physical/learning disabilities (64 per cent).

NICE guidelines also state that homecare workers should be able to recognise and respond to common issues around hydration, nutrition and skincare. However, many had not been trained to support someone who isn’t getting a balanced diet (57 per cent); who isn’t drinking enough (54 per cent); or who has skin sores, infections or tears (47 per cent).

The survey also reveals that homecare workers are poorly supported, paid and valued. Only one in five (20 per cent) respondents said their employer gave them support when someone they have been looking after died. This is despite the fact that many homecare workers support people through their dying days, says UNISON.

More than three in five (63 per cent) are not paid for their travel time, only for the hours they spend caring for people. Yet getting to appointments can take up much of their day, particularly in congested towns and cities, or in rural areas where service users could be many miles apart.

UNISON believes that non-payment of the minimum wage is endemic across the homecare sector. Yet more than half (63 per cent) the care workers who responded cannot tell if they are being paid for all the hours they worked. This is because employers are issuing payslips that are difficult to understand.

The survey finds that the majority of homecare workers have no financial security either. More than half (52 per cent) are on zero-hour contracts, a figure that is even higher (66 per cent) for those working for private firms. Being unemployed on this type of contract can completely disrupt family finances. Staff also feel nervous complaining about any aspect of their job for fear of having hours taken away.

Conclusion

UNISON is calling on the next government to fund the UK care system adequately so millions of vulnerable people can be supported with dignity.

Councils are the main purchaser of care services across the UK. Therefore, a special charter to tackle exploitation is needed which local authorities would sign up to. It would outline minimum standards for how workers – and those they look after – are treated.

UNISON already has an ethical care charter for homecare which complements much of NICE’s guidelines.[[2]](#footnote-2) To date, 29 councils in England, Wales and Scotland have signed up to this. Widespread adoption of this would benefit those needing care and employers by increasing retention rates, says UNISON.

Recruiting and training new care workers is a constant source of expenditure for care firms because of high staff turnover. However, research shows that a charter can benefit both staff and employers. The private companies commissioned by Islington and Southwark councils in London have been able to hold onto more of their staff since adopting UNISON’s charter in 2013. [[3]](#footnote-3)

The introduction of the real living wage by Islington council has also helped reduce staff turnover, which has dropped to less than three per cent from more than 10 per cent over twelve months.

The cross party Select Committee for Communities and Local Government also recently called for a care workers’ charter to tackle the exploitation, and endorsed UNISON’s version.

UNISON’s charter has already shown that taking sensible steps towards the fairer treatment of care workers is better for everyone.

Making Visits Matters shows that care workers must be given the time and support they need to provide dignified care to those who need it.

Action is needed to address the issues highlighted in the report. The government has launched a campaign for workers to challenge their pay, but this does not go far enough. Neither does an inquiry by HM Revenue & Customs (HMRC) into social care companies who do not pay the national minimum wage. It has failed to put an end to exploitation.

Unless more is done then carers and those they look after will continue to be failed by a flawed system, says UNISON.

Quotes from anonymous homecare workers:

*“I prioritise showering, personal care and medication. But once you’ve done all that, there’s often no time left for what they REALLY want. Someone to talk to and make them feel cared about as a person, not as just another job on the rota.”*

*“Many of my clients are lonely, old and usually slow through no fault of their own. It’s awful having to hurry someone who clearly cannot rush. It can mean spending more of my own unpaid time, because I won’t hurry them. So I end up working more hours to catch up.”*

*“Some people would love more social time – loneliness is the biggest problem.”*

1. NICE guidance says homecare contracts **“***should ensure that workers have time to do their job without being rushed or compromising the dignity or wellbeing of the person who uses services.*” [↑](#footnote-ref-1)
2. UNISON’s ethical care charter, November 2012, <http://www.savecarenow.org.uk/ethical-care-charter/> [↑](#footnote-ref-2)
3. Living wage a welcome boost for homecare firms, staff and clients in Islington, Islington Council, November 2015 <http://www.islington.media/r/6221/living_wage_a_welcome_boost_for_homecare_firms__staff_and> [↑](#footnote-ref-3)