Quality in Home Care: Searching for the Holy Grail

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The dawn of a Golden Age?

- The Living Wage
- Care Certificate
- Local Authority Care Act duty to promote diversity and quality in care market
- Technology is universally seen as really helpful
- Princess Charlotte aims to work in home care...
The Servant Problem

• 1881 – 1.25m women in domestic service
• 1891 – 40% female workforce = servants
• Recruitment & retention servant problems, eg After WW1; inter-war
• Solutions: more/scientific ‘management’; better conditions, more appliances, migration, and convincing servants of the dignity of their work.
Comparisons with 1890 & 1920

Great concentration on servant/intermediary/mistress dynamics

Growth of alternatives eg shops, clerical, admin, nursing, factories

Huge stratification – some career progression (Downton 1912) but most servants in households with just 1-2 servants
Post WW11

• Live in servants decline
• Varied casual employment relationships and rights, eg au pair, cleaner, nanny, personal assistants
• Legacies: Guidance on Domiciliary Care and Section 51 of the Health and Safety at Work etc Act (HSWA)
NHS & Community Care Act 1990

- The rise and fall of LA home help service
- The move to contracted out, outsourcing, privatisation... few not for profits take it on
- The growing gap between care commissioning and delivery
- End of planning; ratios; some decline in interest locally
So why is this history of Home Care relevant?

- Tendency to only refer to small epoch of LA Home Help service
- Slightly rose coloured spectacles – lower level needs, much community nursing, free housework, local employment, good terms & conditions (albeit ‘equal’ pay discrimination)
What’s all this got to do with quality?

- Home care (umbrella term) receives public/tax funds
- Home care is seen as the ‘answer’ to potential problems eg hospital prevention, care needs, professional expense, labour market
- Home care is what people want to have + outcomes are positive
Ambivalence

Home help or home nursing?
Women working for women
Location of authority?
Potential for productivity?
Are advantages of the job commensurate with further professionalisation?
Challenge 1: How is home care quality assessed?

- Adult social care outcome framework (ASCOF) – user surveys
- Self-funding market
- CQC same criteria as for other parts of social care – more inspection than realised?

‘We reviewed 6 care plans 3 medication records, 3 staff recruitment files, staffing rotas, QA reports from 2 LAs, accompanied 2 staff on 4 calls...’ extract from a CQC report April 2015
Challenge 2: the quality problems

- Visits too brief
- Lack of continuity of care
- Inexperience
- Rigid care plans
- Zero hours
- Feeling ‘put upon’
- ‘Shaving’ of time for travel etc
- Lack of continuity
Challenge 3: researchers’ small picture

• Economic squeeze contexts – what to measure? What works at what cost?
• Law & policy (PB, H&S, HMRC, migration, Living Wage) changes
• How to describe and evaluate home care contribution? (comparisons)
• What outcomes to measure?
Challenge 4: bigger picture

- A system like OFSTED that focuses on individuals more than employers?
- Regulation and registration?
- Mandatory qualifications?
- Integration?
- Making most of technology & disability friendly housing amid person centred care?

*Investment in the Knotty Problems (‘war on...’)*
The search for the Holy Grail

• Long history of worrying about help in the home
• Similar concerns about care homes and hospitals
• Hugely subjective but technology may help identify what’s valued
• Still moving from ‘Private issues to public concerns’ (CWMills)
Thank you for listening

Disclaimer & Acknowledgements

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