

Concerns from Carers in Brent regarding Direct Payments

To: Philip Porter, Director of Adult Social Care, Brent Council

From: Healthwatch Brent, on behalf of carers in Brent

Date: 16th March 2015

Regarding: **Formal request for clear and transparent answers to carers' questions about Direct Payments.**

Dear Philip Porter,

Concerns have been expressed to Healthwatch Brent regarding direct Payments. These views have been gathered directly and via advisors at Brent Carers Centre. Some of the views we gathered are already summaries of commonly expressed concerns. We have also been told that it has been impossible to get clear, transparent answers from the Council.

Consequently, Healthwatch Brent have summarised these into the set of questions below. Healthwatch Brent requests a formal response to each of these questions. Healthwatch Brent will publish the response on its website and bulletin, and provide a copy to Brent Carers Centre to distribute to carers.

Support to manage Direct Payments and the process

1

Concern: Managing Direct Payments and the process is too complicated for carers.

Quote: "Staff at social services and the finance team are not helpful when carers have difficulties- carers are passed from one person to another with no resolution."

Our question: What is your response to these statements?

2

Concern: Both managed and unmanaged services automatically stop payments if paperwork is not submitted - they should check if there are any problems.

Quote: “Even under the managed service, if you don't submit a time sheet in time, no one rings to see whether you have made it into the obituary pages.”

Our question: Why can't the service check before suspending payments?

Transparency about 'the offer'

3

Concern: Carers are often not aware of the councils direct payments managed service.

Our question: Why is this not made clear for carers? Is this a way of reducing the cost of running the service?

4

Concern: There seem to be different direct payment rates and no explanations on these.

HWB note: It is not clear whether this comment refers to DP rates or rates for paid carers.

Our question: Please clarify any different rates that apply.

5

Concern: Hours given on direct payments do not reflect the needs of the client.

“I need to help the care worker with Mum's morning routine. Social services have allocated a single person hour but it actually requires 2 persons for 2 hours.”

Concern: Carers do not understand about met and unmet needs and how this impacts on the level of support provided by the Council via Direct Payments.

Quote: “There is a complete lack of transparency in how allocations of time are arrived at by assessors. I have asked several assessors to help me to understand how someone who cannot do a single thing for herself is expected to survive on 17.5 hours per week (out of the 84 day time hours that potentially social services will consider helping with).”

Our Question: Please make a clear and transparent statement explaining how people's needs are met, and how this works in practice.

6

Concern: No night care is provided even if clients needs suggest they need assistance during the night.

Quote: "I am covering Mum at night - turning, drinks of water, replacing her breathing mask 6 or more times a night."

Our question: Why is night care not provided in such circumstances? What are the criteria for the provision of night support?

7

Concern: Carers are told that every case is examined individually. However, assessors state they can only recommend a certain amount of hours because they know more won't be agreed.

Quote: "The assessors will tell you that they can only recommend a certain amount of time because they know that more will not be agreed. Yet social services hierarchy will tell you they don't have a ceiling because every case is examined individually."

Our question: How can this be the case when the correct number of hours is the number assessed to meet unmet needs?

8

Concern: Carers are told there is a panel process, but there seems to be no formal process and no right to appeal. Carers can complain but many fearful in case it jeopardises what they already get.

Our question: Please explain the process.

9

Concern: Carers have no idea what they are entitled to.

Our question: Why do you think this might be?

Healthwatch Brent view: HWB gets the impression that there are processes that explain entitlement, but that this is not what happens in practice, in part due to a lack of clear and transparent written material and advice that is free from council influence, and quite possibly from pressure on council staff to reduce the cost of care.

Finding carers

10

Concern: Carers find it difficult to find suitable carers for their families needs. This has been a concern since direct Payments were launched.

Our question: Why do you think this is still a problem?

11

Concern: Carers are concerned that those living in the household are not able to get direct payments for providing the service even when they are most suitable person.

Quote: “A social worker I met in Hertfordshire told me she had simply turned a blind eye to a case where two families had effectively 'swapped' family members as carer workers of record for each other just to get over the meaningless restriction [of not being able to employ family as a carer if they live in the same house].”

Our question: Healthwatch understands that this is a legal issue – please make the reason for this ruling clear.

12

Concern: Carers not made aware of the increase of allocations of 15 minutes per day and no knowledge of how this can be accessed.

Our question: Why is that the case? Is there a concern that making this widely known would increase the cost of support?

Take up of Direct Payments by ethnic groups

13

There seems to be no breakdown of direct payment uptake according to race/diversity. National statistics suggest a lower uptake amongst ethnic minorities.

Our question: Is this the same locally, and if so why?

Respite care

14

Concern: Respite care is supposed to be assessed by individual cases but seems to be 6 weeks maximum. Social services stated they do not have a record of how many cases were extended to or beyond 6 weeks.

Our question: Please clarify the guidance, rules and eligibility.

15

Concern: There is a lack of clarity within social services on how carers respite money can be spent.

Quote: "I spent mine on reflexology therapy which benefits my overall health. However I had a fair old battle to get this agreed and in the end had to go to Phil Porter's predecessor who said it made sense and she couldn't understand why it should be a problem."

Our question: Please provide a statement that clarifies this for carers?

16

Concern: Anecdotal information was passed on about poor respite care, e.g. clients returning home with deteriorating health, bed sores, falls etc. but no details of services were given.

Our question: Has the Council received complaints and/or safeguarding concerns about respite care services?

Final quotes

Quote: "The entire operation is ramshackle to say the least and smacks of a state monopoly bureaucratic paternalistic mentality being very much alive, well and thriving."

Quote: "At a time when the Integrated Care Programme and Whole Systems Integrated Care are meant to be taking centre stage as the way forward, the fear is that carers and service users will be left to fall between the two stools of the CCG and social services with each blaming the other, neither taking responsibility and those in greatest need being abandoned."

With regards, we look forward to your responses,

Ian Niven, Coordinator, Healthwatch Brent, 16/03/15

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