

The following reflects our views on several areas of the immense and complex area of the care home market. There is a wealth of information to be found on our web site <http://www.yourvoicematters.org.uk/> We are enthusiastic to contribute as much as we can to this study and hope our feedback will help bring positive change for a better future for everyone living, visiting or working in care homes.

YOUR VOICE MATTERS PRIORITY

Everyone living in a care home must be afforded the same level of protection, care and support, whether they have a family or not. Systems must be put in place to cover all.

A priority for us is for the Government to establish a new independent body focusing **purely on care homes**. This must be inclusive to avoid signposting people to other organisations. Families and care home staff are often in despair when they want to report concerns. They are also often frightened and upset, but end up being passed around without resolution. This can cause frustration, anger and a reluctance to report concerns in the future, with the feeling 'What's the point? No one ever does anything'.

Our proposal for a new body could include a new Inspection team to replace CQC, with an additional team to replace Healthwatch Right to Enter and View scheme.

We are shocked by the absence of historical data by the CQC. We would like to see the creation of a comprehensive data bank of information on all care homes and those who own/manage them. It is vital to monitor and collate information to identify a potential future crisis, rather than reacting when one happens.

Suggested departments within this new body:

1. Care home inspection Teams
2. Additional Inspection Teams (clinical). In depth inspections and welfare checks on all residents. To complement main inspection team. Would need to be given power to access care notes on all residents in the care home
3. Investigation Team for deal with individual complaints, with case worker allocation & case number
4. Independent panel to hear cases for applications to ban, restrict and evict and offer a right to a fair hearing on a case by case basis
5. Research team to compile and maintain database of historical information on care home providers, including financial
5. Dedicated whistle blower phone line
6. Advocacy service to support families and care home staff. They are currently unheard and unsupported, often becoming a victim themselves
7. Regional groups for families to meet from all care homes in that area, at a neutral venue. Important these groups run by someone with no links to care home providers
8. January 2017 Your Voice Matters proposed to the Government that care home providers should be required to give statutory notice to CQC if they wish to ban, restrict or evict. CQC could pass this information to the new body to add to database of information on providers
9. Advice centre for people looking for care (with real information) A One Stop Shop
10. To work closely with Regulator and share information

CHOOSING A CARE HOME

Families have NO way to know if a care home is what they profess until they have moved their loved one in, despite numerous care home review sites and organisations.

Care homes are a business and should be treated as such. The customer? The resident. The product? Care. Question need to be asked, are they delivering what they are advertising?

Care homes use PR and Marketing companies to help them fill their beds. Timeshare mentality. Fancy packaging to blind and 'con' the unsuspecting public. They know fancy décor, facilities, web sites and brochures cleverly designed will influence choices by families. Consultancies advise them to hold 'feel good' events and invite the media, to attract custom. This results in photographs on social media, the mainstream media and their web sites.

Many members of the general public will not look at historic or current CQC reports, career/financial history of the care home owner or contact campaign groups. Doing this can highlight many things.

Those who work in the sector at Local Authority/NHS level tell families they are not allowed to recommend care homes to families.

Link to our web site: <http://www.yourvoicematters.org.uk/looking-for-a-care-home->

We would like to see:

1. Trading Standards applied to care home advertising (Trade Description Act). Do they deliver what they advertise?
2. If a provider fails to deliver what they profess there must be financial reimbursement and accountability. Care homes are a business, their product is care. There should be consequences for a substandard product.

CARE HOME REVIEWS

Family opinions are personal and that is why review sites **should** be a good resource, to compliment CQC Inspection Reports, a useful tool for families, to make things easier when looking for care for a loved one. Reality is they mislead with inaccurate information. In 2016 CQC reported on how hard it was for families to find useful information. It is hardly surprising.

Review sites alarm us for several reasons:

1. Many families judge good care on what they see, with many not understanding what good care should look like, and what things they should be looking out for to identify failings
2. Reviews are filtered (evidence available of carehome.co.uk email to provider if required)
3. Any site that receives a payment from a provider to register cannot be transparent, vested interests

We have had reports of what appears to be an influx of **carehome.co.uk** review forms appear in [✂] and other care home provider reception areas, placed alongside the Visitor signing in books. It is our understanding that their reviews are scored by VOLUME not quality of care. If a home is failing and they are struggling to fill their beds, they can use this style of review system to defend their failing reputation by stating 'Well, this is what our families think'. It is our belief care homes are using such review systems to defend negative CQC inspections. We have informed Andrea Sutcliffe CQC of this and suggested she should be concerned providers are finding ways to defend their CQC reports.

We would like to see:

1. An end to numerous review sites. One review site only, run by trustworthy operator.

It must be a review site that has no financial connections to the care home providers. It must also be a review site with EVERY care home listed, not only those who pay a subscription.

REGULATION OF CARE HOMES

Many families and care staff are frustrated and disillusioned by the Care Quality Commission (CQC).

Trust in the CQC is broken beyond repair. Nothing CQC say and promise is believed, as it has all been heard before. 'We are not perfect, we need to do more'. Many have and still suffer due to ineffective care home inspections.

Cosy relationships with providers – Conflict of interest

Why is CQC acting as a PR company for care homes? Their job is to regulate.

Is it appropriate the Chief Inspector for Adult Social Care attends and supports care providers PR and social events?

Care Home Open Day. This may have started as a scheme with good intention, but it is being used by failing care homes to 'con' the public into believing what they see on this one day of the year when they pull out all the stops, is the norm. Not it is not. This has become a PR exercise to defend negative press, attract new 'clients' for the future and recruitment.

CQC senior managers attend care homes on this day whilst there is a backlog of care home inspections. I have been raising this for years and spoken to CQC senior managers about it. They do not see our point of view, do not consider this a conflict of interest or a burden on their limited resources.

June 2016 "Over 150 CQC inspectors and other staff members visited participating locations on Care Home Open Day last year, and as the regulator of adult social care, CQC is looking forward to doing it all over again in 2016 where the theme is 'celebration.' "Along with many others, I really enjoyed visiting different care homes during Care Home Open Day last year". Andrea Sutcliffe 27 April 2016

Link to our web site page <http://www.yourvoicematters.org.uk/care-home-open-day>

CQC inspectors and senior managers on occasions do not believe our claims on certain areas of care home failings. We are met with the response that the provider or professional person 'SHOULD BE'. Only when we present the details to back up our claim do CQC believe it. We have told CQC senior managers many times, they must stop ASSUMING providers and health professionals do the right thing, MANY of them do not. We see no sign of this attitude changing.

CQC have worked hard to form close relationships with care home providers to help them improve. They tell us they need to support and encourage improvements. We feel this has had the opposite effect. Providers use this relationship to their own advantage.

CQC allocate a senior manager to corporate providers and rarely take action against them. Why?

Experts by Experience. Campaigners such as Your Voice Matters are not invited to become an Expert by Experience, and those who have asked to join were ignored or declined, told they were 'over qualified'. Yet we assist the CQC more than most with our invaluable insight and knowledge which brings positive outcomes at inspections. We know of others who joined but left, as when they tell the CQC inspectors what they found wrong, it was ignored. Your Voice Matters request to shadow an inspection to help us gain a deeper understanding of the challenges CQC Inspectors face has been repeatedly declined, yet a blogger and others are allowed. CQC know we are vigilant, we are not blinded by the smokescreen they create.

We have repeated to the CQC over several years, our views that families and staff comments should not be quoted in Inspection Reports. They are personal opinion and should be left to the care home review sites. A CQC Report should be a factual document. CQC say is 'brings the report to life'. We do not think a Report should be viewed as a story and quotes concern us, as one person's view can differ significantly to another if interviewed by CQC at the same inspection, and can influence a choice of care home. We have read quotes from people in failing care homes and know that they do NOT reflect reality in that home.

Some families are unhappy privately, but do not tell the truth to CQC at inspections in fear of reprisals. Some do not like to complain and some lie as they do not want a failing care home shut down, leaving them with worry of a care home move.

Personal quotes from families and staff used in CQC Inspection Reports are **dangerously misleading the public.**

CQC inspections are REPORTS on what is seen on the day. They rely too heavily on families and whistleblowing staff to be their eyes and ears. Families and staff should not have this responsibility placed upon them. They can suffer devastating consequences for reporting concerns, with no one to help them in the aftermath. Families can end up banned, have restrictions placed on visits, or their loved one evicted. Many care homes do not want families who will report the reality to the CQC. Care home staff can find themselves named, bullied or even lose their job, which can make finding work in other care homes difficult or even impossible. Link to our web site page on raising concerns
Rights 2 Speak Up 4 Care <http://www.yourvoicematters.org.uk/rights2speakup4care>

CEO of the CQC David Behan's attitude has proven to be an unwelcoming one towards genuine people outside his network who are working hard to improve care. No amount of training or initiatives will change CQC culture if the leadership is not right. Many express concern over CQC Leadership.

Healthwatch. We consider Healthwatch 'Right to Enter and View' an ineffective, money wasting initiative. Many families and staff in care homes feel as disillusioned as we are. Their approach nationally is inconsistent, with each area operating how they choose. We have been shocked by the lack of knowledge of the care home sector and the deep insight needed into the lengths some will go to cover their failings.

[✂]. They do not enhance the CQC Inspection Reports and on occasions they **contradict** them. This misleads and confuses the public who need clear, accurate and reliable sources of information to make informed choices.

We see the same dangerous naivety as we witness with CQC. Healthwatch are another organisation reporting on what they see, not what remains concealed. Their approach will not bring positive long term sustainable solutions.

Healthwatch is not a private company, which makes this even more unacceptable. A waste of Government funds.

What we want to see:

1. New Leadership
2. Remove care homes from CQC and hand over to a new independent body
3. A new body established to include new Inspection Teams and an additional inspection team of clinically trained people (See Your Voice Matter Priority Page 1)
4. Cease Experts by Experience and Healthwatch Right to Enter and View and increase/invest money in care home Inspectors
5. To introduce a more regular inspection regime to focus on a preventative approach, not reactive. 6 months too long to re-inspect a care home rated Inadequate or 12 months for Requires Improvement. Some care homes are allowed to continue to fail over long periods of time without action taken
6. Early first inspection for new registrations
7. Body responsible for Inspections to maintain a distance from providers, other than inspecting their care homes
8. Introduce a new category 'Special Measures' identified by a black dot (currently only identified and easily missed in the small print within actual Report. Does not show up on a CQC web site search on providers. 2016 Andrea Sutcliffe welcomed our proposal and CQC considering rolling it out over ALL services they inspect
9. Cease using quotes from families and staff in inspection reports
10. Cease involvement with Care Home Open Day and other such initiatives
11. Move CQC inspectors to different areas, to avoid close relationships forming with providers
12. Cease paid working partners and replace with a one off payment for organisations to display a submission form to CQC or the new Inspecting body
13. There has been a question mark over the integrity of some Inspectors and we feel office based locations are more appropriate than working from home
14. Inspectors need to be involved with families who have concerns. Meeting them has proven to bring more positive outcomes for families, than if they do not.

RAISING CONCERNS ABOUT CARE

Your Voice Matters have campaigned on this specific issue since 2010. In 2016 we launched Rights 2 Speak Up 4 Care and on 17 January 2017 held our first Parliamentary event to call for changes to legislation. Attendees included the Minister, Shadow Social Care Minister and Andy Burnham MP. See web site <http://www.yourvoicematters.org.uk/rights2speakup4care>

Advocates/families of care home residents are not protected under any Whistleblowing Act, only employees/workers. PIDA does not protect non-employees/non-workers.

Care homes can make false allegations in order to ban, restrict visiting or evict a resident, their sole purpose to protect themselves.

Pro-active, vigilant families are not welcome in MANY care homes. Yet, the CQC rely on them heavily to report concerns.

Care homes known to fabricate records to defend allegations.

CQC often believe the word of the care home or health professional over a family member/advocate/campaign group without evidence. This continues to the present day.

What we want to see:

1. An independent body established who deal with care home concerns ONLY (See Your Voice Matters priority)
2. We have proposed to Government for Statutory Notices from providers to CQC on bans, evictions and restrictions
3. We have proposed to Government that every care home must display their Complaints Procedure in the 'Service User Guide' distributed in every resident's room and communal areas
4. We have proposed to the Government that every care home must display a Guide written for anyone who wishes to raise concerns, included with every Complaints Procedure and Service User Guide
5. For every complaint to be allocated a Log No and recorded on ALL communication
6. For every complainant to have access to a supportive free advocacy service throughout the whole process to conclusion

NUTRITION AND HYDRATION

We know of care homes where food is on the hit list of a way to cut costs to INCREASE profits, not because of hardship.

Build-up drinks are free on prescription and are being inappropriately used, not as a temporary measure, but as a permanent replacement for plated meals. It can be time consuming to assist a resident to eat a plate of food if they have swallowing difficulties. Staff tell us they are not given the time.

Pureed diets have been highlighted as a major issue, poorly presented and limited choice. Staff and families contact us and express their horror at the meals presented to residents. We have also received reports on daily budgets (under 50p a day), with staff taking in food personally for the residents.

What should be a simple task of ensuring someone is offered a drink every hour and recorded on a Fluid chart, seems to be one of the hardest tasks to carry out. This is a HUGE issue for families and causes upset when they raise concerns and it is dismissed, with reassurances drinks are being given, only to find their loved one admitted to hospital with dehydration and placed on IV fluids.

What we want to see:

1. A national consortium to deliver catering supplies to care homes, similar to the previous school meals and hospital contracts. This would ensure consistent quality of food in all care homes
2. A national set menu system, adaptable for regional favourites
3. All care homes to be monitored on style of pureed food choices offered to residents, not only pots of yogurt and custard (if at all)
4. Build up drinks usage recorded at Inspections
5. Research and statistics published into the usage of build-up drinks in care homes

6. If additional inspection team were established, this could include a check on every resident's care notes, assess their needs and report back findings to Inspecting body to gather data. This would highlight any risk of malnutrition and dehydration and prevent it. Government permission would be required to access care notes.

ACTIVITIES

Care homes are paid to offer a service around the clock, 7 days a week.

Families and staff have identified with us a significant change at weekends. Often there is no Manager or Deputy on duty, no Activity co-ordinator and skeleton staff.

Often care homes say this is because it is a time when families are more likely to visit. What happens for those with no family? Also families do not always stay all day when they visit.

Mini buses sit idle in car parks, used for errands. Looks good for when prospective 'clients' visit.

What we want to see:

1. Consistent staffing levels 7 days a week
2. All resources advertised as available at the home, accessible 7 days a week
3. Every care home to have a designated Activities person

CARE HOME NOTES

There have been incidences of notes becoming 'lost', falsified, tampered with, illegible and incomplete.

What we want to see:

1. Computerised care notes, inputted throughout the day in a timely manner
2. Families/advocates given a password to enable them to access their loved ones notes 24 hours a day. This could relieve stress and also prevent notes from being altered/lost
3. Health care professionals, Local Authorities and CQC could also have access to notes to assist them, especially at times of alleged incidents or when resident admitted to hospital for treatment

CCTV SURVEILLANCE

We advocate forms of surveillance that everyone is aware of, not hidden cameras. We already have a cover up culture in care homes, we want openness and transparency.

What we want to see:

1. Cameras in all communal areas
2. Bedrooms/private rooms need monitoring, that is where abuse happens. Dignity must be maintained. Positioning of a camera, other forms of surveillance other than a camera to be considered for these rooms
3. Care homes must not be the installer or be responsible for maintenance, or monitoring/storing of recordings
4. Scrutiny of any supplier of surveillance equipment. Trustworthy source vital with no links to care home sector

FINANCES AND CAREER HISTORY OF CARE HOME OWNERS

Analysis should be done to monitor the movements of care home owners. Some have a history of failing care homes, often resulting in closure.

Care home owners, managers and staff members can move around the circuit of care homes and that can bring good and bad outcomes.

What we want to see:

1. A register of care home staff/owners and their historical employment
2. Finances of care homes researched and regularly monitored. It can predict a disaster ahead!

RELATIVES AND RESIDENTS MEETINGS IN CARE HOMES

These meetings do not achieve their objective. Families complain in private and often there are breakdowns between each other after some voice concerns at meetings. It often has the effect of silencing, not opening up honest conversations to bring positive change.

What we want to see:

1. Group meetings or individual appointments offered for families of all care homes, neutral location
2. Every family to be given details of local meetings included in their Guide to run alongside the Complaints Procedure

GOVERNMENT

The voice of the care home provider is the one consulted, respected and valued by Government.

Care England and the National Care Association speak for the providers. They are influential, but sadly tend to focus on how to finance their members and avoid discussing deep rooted issues that need addressing, especially if it concerns initiatives they are seen to support.

In 2016 it was proven they did not have a true grasp on the situation regards bans, restrictions and evictions and their attitude towards people failed by their members has little empathy.

We need to break the old patterns of thinking to bring radical change. Only by having uncomfortable conversations and accepting reality can we achieve this and create a safer and happier future in elderly care.

2016 was encouraging for Your Voice Matters, with more inclusion of the voice of ordinary people at Government level. We must have a strong voice for care home residents and their families, one independent to the sector, to bring some balance to debates.

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