Care homes market study – summary of responses to the update paper provided by individuals

This document provides a summary of responses from individuals to the care homes market study update paper.

Background

On 14 June 2017, we published an update paper on our care homes market study setting out our findings so far, our future focus, and possible recommendations.

We invited responses to the update paper from interested organisations and individuals, including to a set of key questions relating to the areas of:

1. choosing care homes;
2. complaints and redress;
3. consumer protection;
4. state procurement;
5. investment in future capacity; and
6. funding and staff challenges.

In the update paper, we stated that, for transparency, we would publish an anonymised summary of any responses from individuals that were not for publication.

We have received three responses from individuals to the update paper that are not for publication. Set out below is a summary of the comments they provided in relation to the areas above.

We would like to thank them, and other parties, who took the time to respond to us.

Choosing care homes

Comments from individuals included:

(a) Often people struggle to make decisions about care homes. They may have little time to consider their options and may not have the right information. People need better information and support when choosing care homes.
(b) It can be difficult to find a place in a care home, particularly of a suitable quality, with some care homes not operating waiting lists or providing scope for people to register their interest for future vacancies.

(c) It can be difficult finding out costs of care homes from providers’ websites or by telephoning them. Relatives of prospective care home residents may not be able to visit many care homes to obtain prices when they are also busy caring for them.

(d) It can be difficult obtaining suitable support from local authorities when choosing care homes. There can be delays in receiving local authority assessments of individuals’ care needs.

(e) Brokerage services that seek to match self-funders with care homes are not well established or known, and might not have full coverage of the market and only provide details of some care homes.

(f) The provision of independent personalised advocacy for people when choosing care homes would be helpful. Central government or local authorities could provide a key adviser/coordinator to be a central point of contact for people when choosing care homes.

(g) An independent central website that lists availability, prices and key terms of contracts for care homes would be helpful.

(h) A different funding system for care, integration of health and social care, and a one-stop shop for advice could help people to plan ahead of any care needs arising.

**Complaints and redress**

Comments from individuals included:

(a) There is a need to improve how complaints are handled by care homes. People who complain may find the process complex and slow, staffing changes may obstruct accountability, and so people may not achieve satisfactory redress.

(b) Self-funders would benefit from independent advocacy when raising complaints about care homes.

(c) Model complaints processes and better access to the Ombudsman may be useful but may not address all concerns regarding complaints processes.

(d) Regulators, such as CQC, should play a greater role in relation to complaints, including those relating to commercial matters. Complaints could be considered as part of regulators’ inspections of care homes.
Consumer protection

Comments from individuals included:

(a) The CMA is right to look at unfair contract terms and conditions for care home residents.

(b) Self-regulation, such as voluntary codes of practice for providers, will not be sufficient to address consumer protection concerns.

(c) The quality regulators should help ensure providers comply with consumer law.

(d) More legislative protection may be needed for existing care home residents to address unfair changes to their contract terms and conditions (for example powers to evict residents and to restrict visitors). There may also be a need for more action to tackle unfair notice periods for fee increases and to protect care home residents’ deposits.

State procurement

Comments from individuals included:

(a) The terms of top-up payments may not be clear to many people when choosing care homes. These should be clearer so where people genuinely want to pay more for extra services in a care home they can. Individuals reported instances of being charged compulsory top-ups in relation to NHS Continuing Healthcare (CHC)-funded places.

(b) The differences in price for self-funders and local authority funded care home residents are unfair.

Funding and staff challenges

Comments from individuals included:

(a) There would be merit in establishing an independent body to estimate reasonable free rates. It should advise both local authorities and self-funders.

(b) Local authorities should be more transparent about the amount they pay for care home places and how these rates are calculated.

(c) The challenges of staff recruitment and retention in the care homes sector may result from low wage rates. Enhanced terms and conditions of employment may help to address workforce issues.