

**ISSUES IN COMMISSIONING HOME CARE SERVICES**  
**NATIONAL REPORTS AND THE SITUATION IN LEEDS**  
**REPORT BY LEEDS HOSPITAL ALERT**  
**MAY 2014**

**Introduction**

Leeds Hospital Alert is a local group which campaigns for the best services in health and social care in Leeds. One of the group's aims is to monitor the local provision of health and social care services, sometimes with reference to national developments and standards.

For some while now, Leeds Hospital Alert has been aware of concerns about the home care service delivered by independent / private agencies as contractors on behalf of Leeds City Council.

These concerns have been put into closer focus by nine recent national publications about the commissioning and provision of home care by independent / private agencies. These are:

- Report: Time to Care (Unison)
- Charter for Ethical Care (Unison)
- Report on 15 minute home care visits (Leonard Cheshire Disability)
- Inquiry into Older People and Human Rights – Home Care (Equalities and Human Rights Commission (EHRC))
- Report: National Minimum Wage Compliance in the Social Care Sector (H.M. Revenue and Customs (HMRC))
- Survey: Main Challenges in Home Care (Guardian / Department of Health)
- Top Tips for Directors: Commissioning and Arranging Home Care Services (Association of Directors of Adult Social Services (ADASS))
- Report on zero hours contracts: Zeroing In (The Resolution Foundation)
- I Care About Care campaign, initiated by Citizens UK.

In addition, the Care Quality Commission is due to inspect providers of home care from April 2014 onwards, and has been asked by the Care Services Minister to consider the impact of commissioning practices as part of this enquiry.

A further issue has been the considerable recent media coverage of specific staff terms and conditions of work for home care staff, especially zero hours contracts.

With these developments and publications in mind, Leeds Hospital Alert submitted two Freedom of Information requests to Leeds City Council Adult Social Care, as commissioner of home care. These information requests focussed on the issues raised nationally about the commissioning of home care in the city.

## **Issues in Commissioning Home Care Services: National Perspective**

The issues raised by the national publications listed above fall into two main categories:

- Concerns about the service received by recipients of home care.
- Concerns about the pay and terms and conditions of work for home care workers.

These two issues are of course closely connected. Poor pay and terms and conditions of work for care workers will obviously have a negative impact on the service offered to people.

## **Issues in Commissioning: The Service Received**

These issues include:

- Time length of visits. 60% of local authorities now commission visits of 15 minutes or less, and the proportion of visits lasting 15 minutes or less has risen by 15% nationally over the last 5 years (Leonard Cheshire Disability report). Lack of time to care properly for service recipients features as a major issue for care workers: 79% in the Unison study reported having to rush visits to get to the next one on time. The EHRC report talks about neglect caused by lack of time to carry out key tasks in the care package. “Sufficient time to care” was identified as the most important factor in service delivery by the Guardian / Department of Health survey. One aspect of this is employers timetabling visits with no adequate allowance for time taken to travel between visits. This is known as “call-cutting” and increases the pressure on care workers to cut short time with clients.
- Changes of worker, leading to problems in the relationship with the care recipient, and risks to personal security.
- Disregard for privacy and dignity in the carrying out of personal tasks.
- Little attention paid to choice in the delivery of home care.

## **Issues in Commissioning: Pay, Terms and Conditions of Work**

Issues here were summed up in the Guardian / Department of Health survey as “time, pay and lack of training”. Time has been dealt with above. Pay and lack of training feature in most of the national publications:

- Workers paid less than the National Minimum Wage: 48% of the enquiries carried out by HMRC showed that care workers were being paid less than the National Minimum Wage. Average arrears of pay were £138.
- Travel between visits: 58% of respondents to the Unison enquiry reported that they were not paid for travelling between visits. The Social Care Minister Norman Lamb has described this practice as “intolerable”.
- Training: HMRC expressed concern that workers were not paid for time spent training. 41% of respondents in the Unison survey reported that they were not

given specialist training to deal with specific medical needs, such as dementia or the effects of stroke.

- Deductions from wages for, for example, uniforms, can be another factor in depressing the terms and conditions of work.
- Zero hours contracts: these contracts have been criticised by the Trades Union Congress but are very common in the care sector, with the Social Care Minister Norman Lamb stating that there are 370,000 zero hours contracts in the sector. Frances O’Grady, TUC General Secretary, states that “these contracts are commonly associated with poverty pay, poor terms and conditions, and leave staff vulnerable to exploitation by the bosses”. The recent report by the Resolution Foundation, “Zeroing In”, echoes this. The Foundation’s Deputy Chief Executive, Vidhya Alakeson, writes that the situation with zero hours contracts is urgent and important, and that “the dominance of zero hours contracts raises real questions about the extent to which today’s insecure workforce can deliver care that treats older people with dignity and respect”. Zero hours contracts may also result in the loss of state pension. A recent consultation on zero hours contracts by the online group 38 Degrees produced 36,000 responses and clearly shows the level of concern felt. In Leeds, the Alliance of service experts has discussed zero hours contracts with service commissioners, arguing that it is best to use ethical companies offering good terms and conditions for employees. The government is currently considering proposals to clamp down on abuse of zero hours contracts.

### **National Recommendations for Commissioning**

The EHRC report concludes that the problems identified with home care are not due to individual care workers but are problems arising from the system of care itself. It states that the problems could be resolved if local authorities made more of the opportunities they have to promote and protect care recipients’ human rights through the way home care is commissioned and the way in which home care contracts are procured and monitored.

With this overall recommendation as the basis for improved service, the national publications make the following specific recommendations for commissioners to demand of agencies providing the service:

- Allow sufficient time for care workers to care properly for people: to talk with them and form a relationship. Match the time allocated to the service recipient to their needs.
- Schedule visits so that the worker does not have to rush the time with each service recipient.
- Allocate the same worker to service recipients wherever appropriate.
- Pay care workers for time spent travelling between visits, time spent training and other necessary expenses such as mobile phone costs.
- Pay care workers the National Minimum Wage or preferably the Living Wage.
- Take steps to deal with zero hours contracts (as outlined in the report “Zeroing In”).
- Improve recruitment, training and monitoring of care staff.

- See home care as a skilled career.

### **Leeds City Council Adult Social Care: Response to Freedom of Information Requests**

Freedom of Information requests to Leeds City Council Adult Social Care were based upon the issues raised in the national publications on the commissioning of home care services.

The information provided from these requests gives a picture of how Leeds City Council Adult Social Care's commissioning of home care relates to the national issues discussed above. In providing the information, the Council also referred to the forthcoming Community Home Care Redesign and Commissioning Project, which will review the commissioning of home care services and will be completed in April 2016.

#### Time Length of Visits and Allowing Sufficient Time for Each Client

The Council has not up till now collated information about the number of visits lasting 15 minutes or less. The Council does not have a target for the proportion of visits lasting 15 minutes or less, as clients' needs vary. The Council has now commissioned reviews of all clients receiving 15 minute visits to ensure that the service they receive is sufficient.

Staff are provided with a guide to tasks and timing of visits. Some visits only require 15 minutes – for example, those simply concerned with carrying out one specific task. The Council emphasises that home care is not designed to provide social support, which should come from other sources such as neighbourhood networks. 15 minute visits will be a key issue to be considered in the Community Home Care Redesign and Commissioning Project.

#### Staff Terms and Conditions of Work

- National Minimum Wage and Living Wage: Leeds City Council contract terms require all contractors to be compliant with minimum wage legislation. Councillors have stated that they would like to move towards payment of the Living Wage by contractors, but there are budgetary pressures which will make this very difficult. About half of agencies contracted by the Adult Social Care pay the Living Wage.
- Payment to staff for time spent travelling between visits: the Council does not have information on whether or not all contractor firms do this, but is collecting information as part of the re-commissioning process. Under its current contract terms the Council cannot dictate staff terms and conditions for those firms.
- Payment to staff for time spent training: the Council does not have information on whether or not contractor firms do this but is collecting information as part of the re-commissioning process. Under its current contract terms the Council cannot dictate staff terms and conditions for those firms. The Council encourages contractor firms to provide staff training as essential for quality.

- Zero hours contracts: All contractor firms pay staff on zero hours contracts. The Council has no policy on this. There are some views within home care services that many staff like zero hours contracts. However, some firms are now moving away from zero hours contracts.

### **Leeds City Council Adult Social Care: Community Home Care Redesign and Commissioning Project**

Leeds Adult Social Care is undertaking a major review of the commissioning of home care. The review and implementation of the new contracts (Community Home Care Redesign and Commissioning Project) are due to be completed by March 2016. The review has been set up to respond to changes in commissioning practice and in demand for home care services.

The review will include key issues which cover the many of the national concerns about the service mentioned earlier on in this report:

- 15 minute visits
- Zero rated contracts
- Living wage
- Quality standards
- Outcomes versus Time and Tasks

The review will focus on the outcomes of home care rather than the means of getting to outcomes (for example, the purpose of a visit rather than its time length).

The Council is also looking at involving the concept of social value in its commissioning process. This is a requirement of The Public Services (Social Value) Act 2012. This process could support action to deal with the issues raised in this report.

The review includes extensive consultation with stakeholders and a Homecare Commissioning Advisory Board, chaired by the Executive Lead Member for Adult Social Care. This has representation from service users, provider firms, Adult Social Care staff, the NHS and trade unions and has been established to lead recommendations on the work.

### **Leeds City Council Adult Social Care as Commissioner of Home Care Services**

National publications on the commissioning of home care services make clear the importance of the service commissioning role in ensuring that the problems identified about home care are dealt with. This is especially emphasised by the EHRC and ADASS reports, and forms the basis of Unison's Care Charter for Ethical Care Councils.

On this basis, it would seem from the information collected for this report that there are areas of concern about the commissioning of home care services by Leeds City

Council Adult Social Care Department. Some of these are now being rectified. Areas of concern are:

- Lack of knowledge: the Council states that up till recently it has not known how many visits of 15 minutes or less are provided by its commissioned care firms, or about basic terms and conditions for care staff such as pay for time spent training or time spent travelling between visits. This is now being rectified.
- Inability to require basic good practice in staff terms and conditions of service from commissioned care firms: the Council states that it is unable to require firms to provide good terms and conditions of work such as paying staff for time spent training or travelling between visits. The Council is looking at this as part of re-commissioning.
- Acceptance of questionable terms and conditions of work: zero hours contracts are often regarded as poor employment practice, but the Council appears to accept them for commissioned care firms.

Hopefully the Community Home Care Redesign and Commissioning Project should be expected to consider all these issues and resolve them.

### **Recommendations**

Leeds Hospital Alert welcomes the Community Home Care Redesign and Commissioning Project as an opportunity to consider the situation in Leeds in the light of national concerns about the home care service. Leeds Hospital Alert hopes that through the Project Leeds City Council will consider and agree the following specific recommendations:

1. Leeds City Council should confirm or introduce the recommendations of the recent national enquiries (listed earlier in this report (Pages 3 and 4, above) as commissioning requirements for Leeds. Leeds City Council can also incorporate these recommendations through the concept of social value in commissioning.
2. Many of these recommendations are covered in Unison's Ethical Care Charter (see Appendix to this report). In the document accompanying the Charter, Unison calls on councils to commit to becoming Ethical Care Councils by commissioning home care services which adhere to the Charter. Leeds City Council should sign up to the Charter and be recognised as an Ethical Care Council.
3. In order to carry out these recommendations, Leeds City Council must have full knowledge of the service elements (e.g. details of visits) and staff terms and conditions for contractor firms. Leeds City Council must have the power to require contractor firms to provide staff terms and conditions as detailed in the Unison Ethical Care Charter, and to require them to implement other recommendations from recent national enquiries into the home care service.

## **Appendix: Unison's Ethical Care Charter for the Commissioning of Homecare Services**

### Stage 1

- The starting point for commissioning of visits will be client need and not minutes or tasks. Workers will have the freedom to provide appropriate care and will be given time to talk to their clients.
- The time allocated to visits will match the needs of clients. In general, 15-minute visits will not be used as they undermine the dignity of the clients.
- Homecare workers will be paid for their travel time, their travel costs and other necessary expenses such as mobile phones.
- Visits will be scheduled so that homecare workers are not forced to rush their time with clients or leave their clients early to get to the next one on time.
- Those homecare workers who are eligible must be paid statutory sick pay.

### Stage 2

- Clients will be allocated the same homecare worker(s) wherever possible.
- Zero hour contracts will not be used in place of permanent contracts.
- Providers will have a clear and accountable procedure for following up staff concerns about their clients' wellbeing
- All homecare workers will be regularly trained to the necessary standard to provide a good service (at no cost to themselves and in worktime).
- Homecare workers will be given the opportunity to regularly meet co-workers to share best practice and limit their isolation.

### Stage 3

- All homecare workers will be paid the Living Wage. If council employed homecare workers paid above this rate are outsourced it should be on the basis that the provider is required, and is funded, to maintain these pay levels throughout the contract.
- All homecare workers will be covered by an occupational sick pay scheme to ensure that staff do not feel pressurised to work when they are ill, in order to protect the welfare of their vulnerable clients.