



Recommendations of the Inquiry into Care at Home Autumn 2018, Greater Manchester

“What would it take to help people to have a good life at home for as long as they choose?”



Summary

Between September and October 2018 thirteen participants, all working within or supporting Care at Home services, were invited to take part in sessions of intense deliberation to co-produce a set of recommendations that attempted to answer this question:

“What would it take to help people to have a good life at home for as long as they choose?”

In our highly participatory process members of the Inquiry shared their experiences, heard from expert commentators with lived experience of care at home and then produced a set of compelling recommendations; including reasons why they mattered or the benefits that would flow from adopting them within the delivery of Care at Home.

After the six Inquiry sessions, Shared Future hosted a launch event at the Manchester Mechanics Institute on the 12th December 2018, at which the group’s recommendations were shared and discussed with invited local stakeholders. Members of the Inquiry, commissioners, care providers and stakeholders of all kinds took part.

This report summarises the process, lists the group’s recommendations, and describes what happened at the stakeholder event held in December 2018.

Twelve compelling recommendations for improving Care at Home appear on pages 18 to 20.

Recommendations for Care at Home

What would it take to help people to have a good life at home for as long as they choose?

The participants had been asked, and were reminded of the Inquiry question before finalising their recommendations the question:

Every participant was given an individual alphabetised voting sheet to confidentially choose their top seven recommendations out of the final twelve recommendations.

Due to the highly deliberative and iterative nature of the process it would be unwise to only focus on the top recommendations.

All were considered important by the group, and based on many hours of deliberation. It was stressed to all the participants that every single recommendation would be recorded irrespective of how many votes it might get.

Recommendations are listed in the table below.

[Italics are clarifications added by the facilitators.]

Theme	Recommendation and Detail on the What and the Why	Rank
Funding and Commissioning	<p>Commissioning practices are currently too rigid to accurately reflect a personalised approach.</p> <ul style="list-style-type: none"> • Stop commissioning 'time and task' services, that fuel a one size approach; • Time to build relationships needs funding as it leads to greater independence in the long run; • Co-design/co-production in all tenders; • Investigate other financial models to bring back cash into the <i>[care]</i> sector; • Incentivise providers to facilitate independence outcomes; • <i>[The current model]</i> Stops small or local providers. <i>[We]</i> need a diverse market; • <i>[Move towards an]</i> Approved provider list, meeting the criteria's <i>[describe elsewhere in the recommendations]</i> instead of a preferred provider closed shop. 	1st =

Theme	Recommendation and Detail on the What and the Why	Rank
Informed Choices	<p>Care navigation models to be developed and available from 18+.</p> <ul style="list-style-type: none"> • Information is necessary to enable choices; • Information can be held <i>[delivered]</i> anywhere (e.g. in pubs, community centres and supermarkets); • Believe strongly in a social prescribing model that supports mental, physical and emotional health; • Prescriptions need costs attached to it, so that provider services aren't at risk. <i>[Funding follows the prescription].</i> 	1st =

Theme	Recommendation and Detail on the What and the Why	Rank
Early Intervention and Prevention	<p>Earlier intervention.</p> <ul style="list-style-type: none"> • An earlier investment in prevention services will reduce long term costs. 	2nd =

Theme	Recommendation and Detail on the What and the Why	Rank
Valuing Care Staff	<p>Consider creating a professional body for social care workers, similar to General Medical Council or Nursing Medical Council.</p> <ul style="list-style-type: none"> • Improve morale, improve recruitment and retention; • Maintain regulations and continual professional development; • Workers more valued and respected. 	2nd =

Theme	Recommendation and Detail on the What and the Why	Rank
Accommodation	<p>Suitable, safe, reasonable accommodation for all.</p> <ul style="list-style-type: none"> • To remain independent; • reduces need to move; • More likely to want to remain in home for longer; • Safety [<i>Improves</i>]. 	2nd =

Theme	Recommendation and Detail on the What and the Why	Rank
Transport	<p>Good public transport remains essential to a good life at home.</p> <ul style="list-style-type: none"> • Integrated transport system to support infrastructure; • Improve access; • Reduce cost; • Public transport free at 60 lo London, Scotland and Wales. 	2nd =

Theme	Recommendation and Detail on the What and the Why	Rank
Valuing Care Staff	<p>Improve terms and conditions for the contracts of Social Care Workers, and ensure these meeting legal requirements.</p> <ul style="list-style-type: none"> • Improve recruitment and retention; • Workers feel valued and respected; • providers save money; • Abides by the law!; • Raises status and professionalism of workers. 	2nd =

Theme	Recommendation and Detail on the What and the Why	Rank
Working together	<p>Greater integration of Health, Social Care, Housing, Voluntary Services and service uses, to share information and resources, and [<i>improve</i>] care planning.</p> <ul style="list-style-type: none"> • Information should be managed by the individual rather than the service; • Permission held in a single technological record; • Break down boundaries between services and [<i>reduce</i>] institutional hierarchies; • Move towards one file per person that's owned by them; • Make co-production mandatory in the commissioning cycle. 	2nd =

Theme	Recommendation and Detail on the What and the Why	Rank
Valuing Care Staff	<p>Introduce banding structure for care workers based on experience and qualification.</p> <ul style="list-style-type: none"> • Improve recruitment and retention; • Provides career pathway and opportunities for progression; • Feel more valued and respected. 	3rd =

Theme	Recommendation and Detail on the What and the Why	Rank
What's important	<p>Individualised approach for everyone that incorporates their personal wishes.</p> <ul style="list-style-type: none"> • Everyone has different needs and wishes. 	3rd =

Theme	Recommendation and Detail on the What and the Why	Rank
Technology	<p>Appropriate use of technology to enable people to remain independent, connected and safe.</p> <ul style="list-style-type: none"> • Facetime, Skype and Whatsapp <i>[More use of]</i>; • Voice controlled assistance(echo/alarm); • Assistive technologies/healthcare technology; • Buddy GPs; • Welfare checks. 	3rd =

Theme	Recommendation and Detail on the What and the Why	Rank
Unpaid Support	<p>Recognising and valuing the contribution of unpaid carers.</p> <ul style="list-style-type: none"> • Improve their support work and improve support for their own health and wellbeing; • Prevent burnout and crisis intervention; • Reduce carers own use of health and social care services in the future; • Carers save the system £11bn a year. It will not cope without their support, so they need to be supported. 	4th

The Inquiry into the Challenge of Care at Home

A new model of an Inverted
Citizens' Inquiry

Autumn 2018



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Web: www.sharedfuturecic.org.uk.