



advice and support for older age

**Independent
Age**

Information and advice since the Care Act – how are councils performing?

Qa Research for Independent Age
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1. The Care Act and why we commissioned this research

The Care Act 2014 is a new law. Introduced in England from 1 April 2015, it consolidates all previous legislation on adult social care and support. It places legal duties on local authorities and gives them powers to act when they arrange or deliver support for adults with care needs in their area.

Local authorities have new responsibilities around their provision of information and advice relating to care and support. As of 1 April 2015, councils need to make sure that information is available to all of its residents covering:

- how the social care system works in the area – the types of care services and the providers available locally as well as how to request an assessment of care needs
- how to access services (including housing services and benefits)
- how to raise concerns over the safety or wellbeing of someone with care needs
- how to get independent financial advice (about benefits, household budgets, and regulated financial advice for people thinking about how to pay for care needs now and in the future)
- support available for people caring for a friend or family member.

The aim is to make sure that people can make informed choices about their care and support, and get the right advice early on to stop their support needs getting worse. If there is no good quality information or advice available locally on these issues (e.g. from the council or from a charity), the council must make sure that this gap is filled. The council can provide the information and advice itself or can commission another local organisation to provide it.

At Independent Age, we welcome the introduction of the Care Act and its vision for giving people more choice and control in meeting their care needs. However, the new duties required by the Care Act are being introduced at a time of unprecedented funding pressures for local authorities. We are concerned that local authorities may be struggling to meet these new duties around information and advice.

To get a clear idea of how councils are managing, we commissioned Qa Research to determine whether English local authority websites are providing accurate and up-to-date information and advice on social care that complies with their new duties under the Care Act 2014.

The research comprised three elements:

- a review of all English local authority websites by Qa researchers to assess to what extent they are providing accessible, accurate and up-to-date information across 12 key topic areas
- website testing by older people aged 70+ to assess how easy it was in practice to access the relevant information
- a mystery shopping exercise involving 151 local authorities to see how well they were able to respond to calls enquiring about nine pre-agreed scenarios eg, requesting information specifically for carers; paying for care, etc

This report presents the key findings from the research.

2. Summary of findings

Our research found that some local authorities are not meeting the legal minimum standards set out in the Care Act for the information and advice they provide regarding care and support.

While the majority are providing a minimum level of information and advice through their websites, our researchers found that more than two thirds (70%) were not able to demonstrate that they had sufficient online information in all the areas required by the Care Act.

Only 45 councils out of 152 provided all the online information that is required by legislation.

In terms of information and advice available over the phone:

- just over half of councils (52%) gave a good response to the questions we posed;
- one in three (34%) did not give a satisfactory answer to the question posed by the caller; and
- one in twenty (5%) gave only a partial response.

Furthermore, in nearly a quarter (23%) of cases, it was very difficult to find the relevant number to call on the council website, and in a significant minority of cases (9%), the caller was not able to get through to the council at all.

The research uncovered a number of other issues about councils' telephone provision, including:

- local authority employees seemingly unaware of the changes to care provision required under the Care Act, or suggesting callers should 'look it up online' themselves
- a real mix of quality standards from staff handling calls, with some clearly not experienced enough to provide information on complex topics such as funding care
- local authorities not being clear that care assessments are available regardless of level of need or finances.

We did find some examples of good, comprehensive information being offered in a supportive manner – and there is much that local authorities can learn from these best practice examples. However, until this is the case across the board, many older people will struggle to access the information and advice promised in the Care Act.

We encourage professionals and local authorities to learn from the findings of this research and to ensure they are meeting their legal responsibilities for their online provision and training for those answering calls from the public.

3. Methodology

Website review

One researcher (without expert knowledge of adult social care, or the Care Act) reviewed all 152 English local authority websites. The researcher started at the local authority website homepage and navigated to the relevant content. The use of a website's search function was permitted, but the researcher worked on the principle that the results must still be self-evident and it must be easy to determine their purpose. The findings were cross-checked by another researcher at Qa and by Independent Age and any cases where there was a notable difference in the scores given were discussed and the scores were amended where appropriate.

Independent Age designed a series of 12 questions for the researcher to use to assess the extent to which the local authority appeared to be providing accurate and up to date information and advice that complies with their new duties under the Care Act 2014.

The 12 questions covered the following topics:

1. Website has information on adult social care that is easy to find
2. Website contains information on the Care Act
3. Website explains how the Care Act will change rules on adult social care
4. Information on assessments and eligibility (Care Act requirement 4.1, 4.2ac)
5. Information for carers (Care Act requirement 4.1, 4.2ac)
6. Information and advice on planning for and meeting the cost of future care needs (Care Act requirement 4.1, 4.3i-iii)
7. Information and advice for current care users on paying for care, including accessing Independent Financial Advice (Care Act requirement 4.2d)
8. Information and advice must be accessible and proportionate to the needs of individuals and information on how to access advocacy should be clear (Care Act requirement 4.1, 4.4)
9. The types of support and the choices of providers are explained (Care Act requirement 4.2b)
10. Information on raising an adult safeguarding concern is present (Care Act requirement 4.2e)
11. Links to local groups or support networks
12. Links to national websites or resources on adult social care.

Further detail on each of the 12 areas is included in the Appendices.

Mystery shopping exercise

Following the website review, 151 local authorities were contacted by a mystery caller. The decision was taken not to attempt to make contact with the Scilly Isles as it was felt the population of vulnerable older people would potentially be too small and as such there was a risk that our mystery call could be identified.

Independent Age designed a series of nine scenarios to test, based on the 12 questions tested as part of the website review – a copy of the scenarios can be found in the Appendices. The approach for all scenarios was a caller (from out of the local authority area) calling on behalf of an older relative living in the local authority area. The mystery call also tested other factors such as some basic customer service principles (eg, length of time to answer the call, whether the call was placed on hold and how long for, and the

manner of the call handler). If the mystery caller was unable to speak to someone on the first attempt, they would make a second call and then if this call was unsuccessful they recorded this as a failed call.

As part of this exercise, the research also attempted to make some assessment of the extent to which local authorities were beginning to 'join up' information and advice on care and housing in line with their overall duties to promote individual wellbeing as outlined in The Care Act 2014 statutory guidance on Information and Advice¹, eg, *'local authorities must ensure that the subject matters covered by their information and advice available to people in their areas go much further than a narrow definition of care and support'*. In addition, the guidance states that *'depending on local circumstances, the service should also include, but not be limited to, information and advice on:*

- *available housing and housing-related support options for those with care and support needs*
- *effective treatment and support for health conditions, including Continuing Health Care arrangements*
- *availability and quality of health services*
- *availability of services that may help people remain independent for longer such as home improvement agencies, handyman or maintenance services.*

Finally, the research also considered the extent to which local authorities were providing 'information' or 'advice' in line with the Department of Health's definition:

- *The term 'information' means the communication of knowledge and facts regarding care and support.*
- *'Advice' means helping a person to identify choices and/or providing an opinion or recommendation regarding a course of action in relation to care and support.*

A copy of the recording sheet used for the mystery calls is included in the Appendices.

¹https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/315993/Care-Act-Guidance.pdf

4. Key findings

4.1 Website review

All 152 English local authority (LA) websites were reviewed against the 12 topic areas. The maximum possible score for each local authority was 30. The results are as follows:

- 38 (25%) of local authority websites received a score of 20 or lower
- 65 (43%) scored 21-26
- 49 (32%) scored 27-30.

Topics with the lowest scores, where LA websites were weakest, included:

- paying for future care
- providing information on how to obtain accessible information and advocacy.

The topic area with the highest score was:

- provision of information for carers.

The topic areas are ranked below:

Rank by topic area (scores high to low)

- Information for carers
- Easy to find information on adult social care
- Information on changed rules
- Information on the Care Act/information on assessments and eligibility
- Information for present care users on paying for care and independent financial advice
- Types/choices of providers explained
- How to obtain accessible information and advocacy
- Information in planning and paying for future care.

All local authorities (bar two) had information clearly available on raising safety concerns. This was also the case for links to local support and networks (all different authorities).

Five local authorities did not have any links to Department of Health/national links and resources (three in North East and two in North West).

A total of 45 of the 152 local authorities (30%) appear to be Care Act compliant. We defined this as a local authority receiving a score of two or three (where two means information is present and accurate and three means information is present, accurate and extensive) for all the areas where there are legal requirements in the Care Act that councils must abide by.² These areas are as follows:

- information on assessments and eligibility
- information for carers
- information on planning / paying for future care
- information for present care users on paying for care and independent financial advice
- LA clear on how to obtain accessible info and advocacy
- types/choices of providers explained
- information on raising safety concerns obviously featured.

² The full results of the scoring for all local authorities can be found in the spreadsheet that is available to download alongside this report.

4.2 Website testing by older users

In order to assess the information provided on local authority websites from the perspective of an older person with no expert knowledge or experience of social care, seven website testers aged 70+ (five males and two females) were recruited to test a selection of websites against the following criteria:

1. How easy is it to find information on adult social care and the Care Act?
2. How long did it take you to find this?
3. Is the website accessible? For example, is the text easy to read? Did you notice if large print information leaflets are available?
4. Can you find any information on getting an assessment? Is it clear how you would go about doing this?
5. How easy is it to find information on 'safeguarding' and how to raise an alert?
What this means is, does the website give you information on what to do if you are experiencing abuse or neglect or if you think another adult or older person is.

Eight websites were tested (four had scored 15 or less in the website review and four had scored 27 or more).

The following local authority websites were assessed by our testers.

www.stockton.gov.uk (scored 13 in website review)

www.tameside.gov.uk (scored 15 in website review)

www.portsmouth.gov.uk (scored 13 in website review)

www.halton4gov.uk (scored 12 in website review)

www.barnsley.gov.uk (scored 29 in website review)

www.luton.gov.uk (scored 29 in website review)

www.wakefield.gov.uk (scored 27 in website review)

www.birmingham.gov.uk (scored 27 in website review)

Q1. How easy is it to find information on adult social care and the Care Act?

Generally, our testers found it quite easy to find general information on adult social care and the Care Act, with the exception of Stockton where information on The Care Act was not easy to find – this concurs with our website review findings.

A couple of our testers found information on the Care Act using the website's search function. Some older people might not have the skills to do this.

Q2. How long did it take you to find this?

Overall, our testers found the information in a couple of minutes for most of the websites, apart from Stockton and Halton where it took 10-15 minutes to track down the information (again both websites scored poorly on the web review).

Q3. Is the website accessible? Is the text easy to read? Did you notice if large print information leaflets are available?

In most cases, our testers found the website text easy to read. Although websites varied in terms of the availability of large print leaflets, in fact most of our testers struggled to find any mention of them.

Q4. Can you find information on getting an assessment? Is it clear how you would go about doing this?

Responses from our testers were mixed on this topic. A couple of testers struggled to find any information on Stockton, Tameside and Birmingham. In terms of how to obtain an assessment, for most websites local authorities had just included a number to ring. Some of our testers would have liked more information about what was involved in the assessment process. A good example of information on this was provided by Barnsley, which included a leaflet and video on the assessment process. Luton also had a good step-by-step guide.

Q5. How easy is it to find information on safeguarding and how to raise an alert?

Generally, our testers found that this information was fairly readily available, again a couple found the information was not as readily available on the Stockton website. Tameside was cited as a good example with information on different forms of abuse and how to report.

4.3 Mystery shopper exercise

A total of 151 calls were made to UK local authorities.

The tables overleaf shows how these authorities scored in the website review and includes a summary of the mystery call outcomes. The shading denotes those cases whereby the outcomes of the mystery calling exercise appear to tally with the findings from the web review, (eg, local authorities with scores of 20 or less, who were non-compliant with the key questions, and where our mystery caller did not get a satisfactory response) and conversely, local authorities with scores of 25 or more, who were compliant with the key questions, and where our mystery caller got a satisfactory response.

Local authority	Website review score	Care Act compliant?	Overall did you get a satisfactory response to the question?
Isles of Scilly	10	No	Decided not to call (too small)
Hartlepool	11	No	No
Halton	12	No	No
Walsall	12	No	Yes
North Lincolnshire	13	No	Yes
Stockton on Tees	13	No	No
North East Lincolnshire	13	No	Yes
Portsmouth	13	No	No
City of London	14	No	No
Hillingdon	14	No	Yes
Tameside	15	No	No
Torbay	15	No	Yes
Leicester City	15	No	Partially
Rutland	15	No	Yes
Bury	16	No	No
Stockport	16	No	No
Kingston upon Hull	16	No	Unable to make contact
Tower Hamlets	16	No	Yes
North Somerset	17	No	Yes
Bromley	17	No	Partially
Ealing	17	No	Yes
Stoke	18	No	Partially
Havering	18	No	Yes
Merton	18	No	Yes
Wolverhampton	19	No	Partially
Lambeth	19	No	Partially
Reading	19	No	No
Southampton	19	No	No
Plymouth	19	No	Yes
North Tyneside	20	No	Yes
Manchester	20	No	Unable to make contact
Leicestershire	20	No	No
Northamptonshire	20	No	Yes
Telford & Wrekin	20	No	Yes
Lewisham	20	No	Unable to make contact
Bexley	20	No	Yes
Medway	20	No	No
Blackburn with Darwen	20	No	No
St Helens	21	Yes	Unable to make contact

Sefton	21	No	Yes
Doncaster	21	No	No
Nottingham City	21	No	No
Norfolk	21	No	No
Brent	21	No	No
Harrow	21	No	No
Windsor & Maidenhead	21	No	No
Sandwell	21	No	No
Durham	22	No	No
Gateshead	22	No	Yes
Sheffield	22	No	Yes
Isle of Wight	22	No	Yes
West Berkshire	22	No	Yes
West Sussex	22	Yes	No
Cornwall	22	No	Yes
Dorset	22	No	Unable to make contact
Somerset	22	No	Yes
Swindon	22	No	Unable to make contact
Sunderland	23	Yes	Unable to make contact
Redcar & Cleveland	23	No	Yes
Hertfordshire	23	No	Unable to make contact
Suffolk	23	No	Yes
Greenwich	23	No	Yes
Westminster	23	No	Unable to make contact
Waltham Forest	23	No	Yes
Bath & North East Somerset	23	No	Yes
Gloucestershire	23	No	Yes
Bedford	23	No	Unable to make contact
Middlesbrough	24	No	Yes
Newcastle upon Tyne	24	No	No
Blackpool	24	No	Unable to make contact
Knowsley	24	No	No
Trafford	24	No	No
Warrington	24	No	Unable to make contact
Wigan	24	No	No
Wirral	24	No	No
Calderdale	24	No	No
East Riding of Yorkshire	24	Yes	Yes
Solihull	24	No	Yes
Southend on Sea	24	No	Yes

Islington	24	No	No
Enfield	24	Yes	Yes
Haringey	24	No	Yes
Richmond upon Thames	24	No	No
Bracknell Forest	24	No	Yes
Brighton & Hove	24	No	No
Devon	24	No	Yes
Wiltshire	24	No	No
Dudley	24	No	Yes
York	25	No	Yes
Derby	25	No	Yes
Southwark	25	No	No
Buckinghamshire	25	Yes	No
Surrey	25	No	Yes
Bournemouth	25	No	No
Bristol	25	No	Yes
Poole	25	No	Yes
South Tyneside	26	No	Yes
Rochdale	26	No	Unable to make contact
Worcestershire	26	Yes	Yes
Hammersmith & Fulham	26	Yes	No
Milton Keynes	26	Yes	Yes
Slough	26	No	No
Darlington	26	No	No
Nottinghamshire	27	No	Yes
Northumberland	27	Yes	No
Cheshire West & Chester	27	Yes	Yes
Liverpool	27	Yes	Yes
Oldham	27	Yes	Yes
Leeds	27	Yes	Yes
North Yorkshire	27	No	Yes
Wakefield	27	No	Yes
Birmingham	27	Yes	Yes
Herefordshire	27	Yes	Yes
Shropshire	27	No	Yes
Warwickshire	27	Yes	Yes
Essex	27	Yes	No
Peterborough	27	Yes	Yes
Hackney	27	No	No
Kensington & Chelsea	27	No	No

Croydon	27	Yes	Yes
Hounslow	27	Yes	No
Redbridge	27	No	Yes
East Sussex	27	Yes	Yes
Kent	27	No	Yes
Wokingham	27	Yes	No
South Gloucestershire	28	Yes	Partially
Cumbria	28	Yes	Yes
Lancashire	28	Yes	No
Salford	28	Yes	No
Bradford	28	Yes	Yes
Kirklees	28	Yes	Yes
Derbyshire	28	Yes	Yes
Coventry	28	No	No
Staffordshire	28	Yes	Yes
Central Bedfordshire	28	No	Yes
Wandsworth	28	No	Yes
Kingston upon Thames	28	Yes	Yes
Newham	28	Yes	Yes
Sutton	28	No	No
Hampshire	28	Yes	No
Oxfordshire	28	No	Yes
Bolton	29	Yes	Yes
Barnsley	29	Yes	Yes
Rotherham	29	Yes	Partially
Cambridgeshire	29	Yes	No
Luton	29	Yes	Unable to make contact
Thurrock	29	Yes	No
Camden	29	Yes	No
Barking & Dagenham	29	Yes	Yes
Barnet	29	Yes	Yes
Lincolnshire	29	Yes	Yes
Cheshire East	30	Yes	Yes

Overall response

Overall, 52 local authorities did not give a satisfactory response to the questions posed by our caller. Seven gave a partial response, i.e. some elements of the information were included and some were missing, and 78 authorities gave a good response to our caller's questions.

During the period of the research, on 17 July, the government announced that it would be postponing the introduction of the care cap until 2020. Our caller made 56 calls following this announcement and although not every scenario was specifically seeking information on the care cap, this recent change was only mentioned on a couple of occasions.

Unable to make contact

On 14 occasions (and after two attempts) we were unable to make contact with the relevant department at the council. This tended to be due to being placed on hold for an extended length of time, incorrect telephone numbers, or being redirected to another department where no one was available. Here is a selection of comments made by our caller:

Called twice. On both occasions I was on hold for six mins+ before call was returned to switchboard. Never got through to Adult Social Care.

There were three layers of automated menus before I reached a five minute long recorded message about the Care Act. While this was clear enough, there was not actually the option to speak to an adviser to ask questions – there was only the option to book an assessment.

Was put on hold for 11 minutes, did not manage to speak to a social worker – all busy, advised to call back the following day. No direct line, so will have to go through switchboard again. Called back, this time was on hold for 12 minutes before I got through to a Customer Services Adviser, once again they tried to put me through to Adult Social Care, and failed.

No, number on website turned out to be for children and families, not Adult Social Care. Googled for Town Hall number, asked them to put me through to Adult Social Care, was put back through to Children and Families again.

In 35 cases, our mystery caller found it fairly or extremely difficult to find the telephone number for adult social care on the local authority's website.

Reasons for this included, the number being missing from the website or there being just general customer service numbers with no specific or direct numbers for adult social care. Here is a selection of comments made by our caller:

The website states that the first port of call is the voluntary sector; this is repeated on the answerphone message.

Broken web link for number

Call went through to an individual's answerphone, with a message saying that she would be away from work till 13/04/2015!

Customer service issues

A total of 90 local authorities took longer than 15 seconds to answer the call. There were a few extreme examples, where our caller waited for five minutes, seven minutes and ten minutes for their call to be answered.

Overall, 48 local authorities placed our mystery caller on hold for more than two minutes – this ranged from three to 11 minutes. On 12 occasions our caller was placed on hold for 10 minutes or more. Here is a selection of comments made by our caller:

Had to go through 2 automated menus – waited over 3 mins.

Was put on hold 3 times. Finally spoke to a social worker 10 minutes into call.

Was on hold for 11 minutes plus, then the line was hung up. Was disconnected at 10 minutes on the second call.

No number for ASC on the website. Was put on hold for a total of 9 minutes.

Was on hold for 10 minutes before I gave up. On the second call I made, I was again on hold for more than 10 minutes before I hung up.

Adult Social Care all on a training course today, c/b tomorrow. On second call, was asked if I could call next week as they were so busy.

Encouragingly, our caller noted only seven local authorities where the call handler came across as rude or abrupt. However, on several occasions although the call handler was friendly, the information that they gave was unclear or they appeared to lack confidence in the information they were giving.

Information or advice?

During the mystery call exercise our caller noted whether local authorities were providing information or advice, in line with the Department of Health's definition. In nearly all cases local authorities were providing information only. Several authorities recommended seeking independent financial advice in relation to funding future care.

In a small number of cases, misleading or 'leading' advice was given, i.e. not giving explicit advice but providing information that seemed to direct the caller down a preferred route.

Call handler said that this was not her area of expertise, and did not seem to know who she needed to put me through to. Call handler advised putting all the savings of the client in someone else's name – otherwise all the savings would be taken! Call handler then mentioned housingcare.org, and then read out what it said on the website about the £23,000 financial cap. She did not know about the council paying for care once savings went below the lower limit – even when prompted.

Call handler was pushing very hard for the client to self-fund, although she did say that everyone is entitled to an assessment. She kept stressing the wait time for council services – which could be between 6 and 10 months "but which could be done tomorrow if you are willing to pay". Mentioned Age UK, Wiltshire Farm Foods and a couple of local companies who would rent out stairlifts for £10 per week.

The main themes arising under each area of questioning are outlined in the following sections. The accompanying tables include some positive and negative examples encountered by our caller.

Scenario 1 – Basic information on the Care Act

A total of 26 local authorities were asked about basic information on the Care Act. Our caller was unable to get through to five of them. While 10 gave an unsatisfactory or partial response, 11 gave a good response.

Examples of positive practice	Examples of negative practice
<p>Gave good, practical basic information about the changes, mentioned right to an assessment and a carer's right to a carer's assessment.</p>	<p>Very little information, just talked about equipment and looking on the internet, even when I said that I had, and that I didn't understand it, and asked for information in layman's terms. No real explanation on Care Act.</p>
<p>Adviser suggested looking at council website in first instance, then found a council leaflet which she offered to post out.</p>	<p>Was given no information at all, was just told to go onto the internet and Google The Care Act 2015.</p>
<p>Very comprehensive answer. Call handler covered the basics of the Care Act, she mentioned that it covered carers as well and that they could have a carer's assessment. She mentioned a council booklet called "A guide to independent living", and gave the email address that it could be requested from. The call handler covered the different areas that the council could give help with, such as personal care, medication, equipment and adaptations and domestic care. She also said that everyone is entitled to an assessment.</p>	<p>Call handler did not have any information about the Care Act that she could send out – also said that the way that the Act would be interpreted would depend on each individual council.</p>
<p>Very comprehensive answer from very friendly and reassuring call handler. Explained very clearly the criteria for assessment under the Care Act, including all the ways that the council could help, which also included OT assessment and home adaptations. Stressed that everyone had the right to an assessment, and that they did not have to have the services if they did not want them. Explained clearly the process for a carer's assessment and the rules and process for a financial assessment. Very straightforward, no jargon and very reassuring.</p>	<p>Not very clear – especially on financial details – he did not know what the rules were on savings – only that the client would have to make some contribution to their care.</p>
<p>Friendly and reassuring call handler. Explained clearly the process for both financial and needs assessments. Also explained the ways that the council could help people stay independently in their homes.</p>	<p>Call handler did not have any basic information on the Care Act "It's all on the website, and it depends on individual circumstances" and no information that she could send out.</p>

Scenario 2 – Explanation of the changes in the Care Act

A total of 11 local authorities were asked about the changes that had come into force under the Care Act. Our caller was unable to get through to two authorities, three gave an unsatisfactory response and six gave a good response.

Examples of positive practice	Examples of negative practice
Very friendly and reassuring. Explained very clearly about assessments and how things are changing. Explained clearly about the new criteria for assessment. Very thorough answer in layman's terms with no jargon.	No information was forthcoming. Refused to send out or discuss any information without my name and address and the relative's name and address.
Advised that the rules were still being worked out. Explained assessments, packages of care, direct payments and how the care costs will be worked out from April 2016. Also gave the number of the Older People's Help Desk, who could answer questions on more specific topics on the assessment process.	Very sketchy answer. I asked about charges – didn't pick up on this. I mentioned reablement team – but didn't explain what they were, even though I said I didn't know. Was more concerned about getting parents' permission. I mentioned help with cleaning – which is one of the care outcomes – to be told "we don't cover that."
Covered the fact that eligibility criteria may have changed, so it's important that client reapplies for a new assessment. Had information on the Care Act, which he was happy to send out.	Call handler did not have any basic information on the Care Act. Only information that she could give was to fill in the self-assessment form on the council website and the council would be in touch. Not able to give even basic information about help that could be given.

Scenario 3 – Assessments and eligibility

A total of 15 local authorities were asked about assessments and eligibility. Our caller was unable to get through to one of them, six gave an unsatisfactory or partial response and eight gave a good response.

Examples of positive practice	Examples of negative practice
Clear, basic information – didn't go into any great detail. Enough info for a basic understanding of the process. Mentioned referral via GP.	Ignored prompts of changes in Care Act. Did not mention any changes. Just concentrated on one area (risk of falls) – didn't ask about anything else.
Call handler (not social worker) stated that anyone could have an assessment and took basic details of needs.	No real explanation of the assessment process – even though that was asked for. Was very insistent that the relative's doctor's details were recorded as the referral had to be dealt with by the relative's GP.
Very friendly and reassuring adviser, went through assessment process step by step, with lots of suggestions as to how the council could help. Very thorough answer.	Call handler was very vague about assessment process, or about what help could be given. Could not explain what help might be available, even when heavily prompted. Said that it could take 4-6 weeks for an assessment to be set up.

Joined up information and advice on care and housing

Within scenario three, our mystery caller prompted the call handler for information on housing related support, (eg, home maintenance or handyman schemes) to try and get a sense of whether the local authorities could provide information based on a broader definition of support beyond personal care. Overall, most authorities did not seem to be offering this kind of information proactively, and when prompted, typically they would mention support available from home care agencies, help with home adaptations (eg, grab rails that could be arranged via the council) and other private sector provision, (eg, Wiltshire Farm Foods and stair lift companies).

Some positive examples of this are shown below, but these seemed to be the exception rather than the rule.

Very friendly, reassuring call handler gave a very comprehensive answer. Mentioned assessment process, areas that they could help with, home adaptations, local care agencies. Very easy to understand. Happy to send out information without prompting.

Call handler was friendly, thorough and reassuring; she informed me that everyone had the right to a needs assessment, and that if the client had less than £24,500 of savings, this care would likely be free. In her answer she covered telecare, pill reminder alarms, Wiltshire Farm Foods and a visit by an Occupational Therapist (OT) to look at aids and adaptations. She was going to send out relevant information in the post.

Call handler gave a very comprehensive answer. He covered the upper capital limit for care, the issue of setting up a care account, the process for a needs assessment and financial assessment and the process for selling a property to pay for residential care. He also gave useful information on help that could be given by the community OT team – via a GP referral and via West of England Care and Repair, for housing adaptations and repairs. He also recommended getting independent financial advice from a specialist in the social care field.

A helpful, comprehensive answer. Explained the right to an assessment did not necessarily mean a right to more services. Pointed out that the council, via assessment, could signpost the way to services that might not be provided by the council, but that were provided elsewhere. Mentioned adaptations to homes, but pointed out that the wait to have a grab rail installed could be up to a year if done by the council. Provided details of local charities who could provide help with benefits and property maintenance via their handyman scheme. Mentioned carers' assessments and respite care.

Scenario 4 – Information for carers

Seven local authorities were asked about information for carers. Two gave a partial response, one gave an unsatisfactory response and four gave a good response.

Examples of positive practice	Examples of negative practice
Gave good practical information as to what the council could provide in way of help. This included meals, falls detectors, medication alarms, key safes. No jargon was used, it was all straightforward information.	The adviser did not mention carers' assessments at all. She also asked questions about who was providing and what level of support was being provided already.
Adviser concentrated on help for personal care. She admitted that they did not provide help with meals or provide an emergency call system – but she did signpost to agencies who did. She provided website addresses and phone numbers for several private agencies.	The second call handler was very abrupt - wanted name, address etc before she would pass the call on. Manner of social worker was rather abrupt. He didn't explain the Care Act assessment criteria, but kept going on about medical needs.
Very friendly and reassuring adviser, went through assessment process step by step and covered all the assessment criteria. Very thorough answer.	I had to prompt for information for changes to the law and to assessments. The respondent did not mention carers' assessments, even when prompted.
Call handler explained clearly ways in which help could be given and the process for assessment, both for carers' assessments and briefly for financial assessments.	Only spoke about problems with personal care. When directly asked about other sorts of help, eventually agreed that there were other types of help available. Didn't mention carers' assessments at all.

Scenario 5 – Paying for care in the present

Seven local authorities were asked about paying for care in the present. Two gave a partial response, one an unsatisfactory response, and four gave a good response.

Examples of positive practice	Examples of negative practice
Explained basic information about financial assessments and capital limits. Briefly introduced right to defer selling home to pay for care.	Was adamant that as the relative hadn't had a care package previously, the council would not consider funding a move straight to a home.
Adviser mentioned upper capital limit for care, but did not mention lower capital limit, even though I said that the applicant had less savings than that.	Adviser insistent that applicant would have to sell her house to fund her care. She didn't mention deferral of selling home to pay for care fees. When I asked what the new regulations would be regarding the care cap, she said that they did not know.
Very comprehensive answer on financial implications of the Care Act. Call handler pointed out that the Act is still under review, and that at the moment people have to pay for residential care until the cost reaches £72,000, which includes the cost of their homes and savings. After that amount, the cost is free. Mentioned £23,250 limit on capital and the likely weekly cost of residential care in the locality.	There was no mention of the care cap, until I asked about it. No mention of deferred payments at all. Call handler said that the council would not get involved and do a financial assessment until the care cap was reached.

Scenario 6 – Paying for care in the future

A total of 36 local authorities were asked about paying for care in the future. Our caller was unable to get through to five of these authorities. While 15 gave an unsatisfactory/partial response, 16 gave a good response.

Examples of positive practice	Examples of negative practice
Simple, relevant, clear information about financial assessment, the care cap and capital limits. No jargon. Offered to send information in the post. Very comprehensive answer and it was easy to understand.	Respondent could not help, she only did referrals and didn't know how the rules had changed, and didn't know who to refer me on to – could only suggest looking on the internet.
Very friendly and reassuring. Explained the capital limits and how things are changing. Was clear about upper capital limit for care.	Refused to help without a referral. Advised to look up the Care Act on the internet.
Very helpful. Mentioned both the upper and lower limits for capital limits and the sliding scale of contributions. Stated the upper limit that the council would pay for residential care, and briefly went through process for financial assessment.	No information was given on care cap or capital limits, even when prompted.
Very straightforward, comprehensive answer. Call handler explained process for financial assessment, £23,250 financial limit, £72,000 care cap and that if the client has between £17,000 and £23,250, payments would be on a sliding scale. Very reassuring.	Said that if client had savings higher than the limit, then the client would be self funding and the council would not do a needs assessment until the savings had gone below £23,250. There was also a waiting list for assessment. She said that the care agency or the care home (in respect of residential care) would do their own assessment in cases of self funding.
Friendly, straightforward advice from call handler. Pointed out £23,250 limit on savings and that everyone can request an assessment. Also explained that the property would be taken into account and that the council would fund residential care until the property was sold.	Didn't cover OT assessments and stated that the only care that the council would assess and help with was for people who were having problems with personal hygiene. Any other care would have to be independently organised and paid for.

Scenario 7 – Accessible information, advice and advocacy

Eight local authorities were asked about accessible information, advice and advocacy. Four gave an unsatisfactory response and four gave a satisfactory response.

Examples of positive practice	Examples of negative practice
Call handler had leaflets about 'Adult Social Care' and 'Staying Independent in the Home' in large print and was happy to send those out in the post.	Didn't explain what information she had, just that she had a 'list' of care providers, which wasn't what she was asked. No probing at all from her end.
Asked about visual impairment of the applicant. Advised that the applicant would need a CVI (Certificate of visual impairment) on receipt of which, the council could start to assess how they could help her.	No information about the Care Act or explanation that the assessment was available in large print. No information given as to how to obtain such information when asked.
Call handler was very easy to understand and reassuring. Could provide any council information in large print. Took time to take a clear history of the specific problem so that she could be sure that she was sending out the most suitable information. Explained the assessment process.	No large print leaflets available. Everything is on the website.

Scenario 8 – Types of local care providers

A total of 16 local authorities were asked about the types of local care provision available. Five gave an unsatisfactory response and 11 gave a good response.

Examples of positive practice	Examples of negative practice
Really helpful – gave websites to look at (Careplace + Care Quality Commission, CQC) – also explained in detail other help that could be given (Careline). Very friendly, positive and easy to understand. Explained Care Act even though it hadn't been asked for.	Only suggestion was to go onto the internet. Respondent mentioned two websites – even when I said that I didn't have access to the internet.
Probed well for relative's needs. Gave clear (non jargon) information. Provided list of care agencies and telephone numbers. Also offered other advice on home meal deliveries, attendance allowance etc. Very friendly and reassuring manner.	Council had nothing that could be sent out, the applicant would have to go onto the Council's website for phone numbers of agencies, and she didn't say where on the website to look. When asked about how to choose a good agency, advisor mentioned online reviews, she didn't mention CQC or NHS Choices.
Very comprehensive answer. Explained place on council website where there was a list of care agencies, and how to look at reports of these on the CQC website. Also mentioned £23,000 limit on savings, after which the council could help with costs.	Call handler didn't have any information about local care agencies, only advice was to go on the web and double check with the CQC website.
	Didn't know who monitored agency standards, even when prompted, and didn't know how to check an agency - "all of them have to meet minimum standards", but couldn't say how those standards were decided.
	Could not give out details of local care agencies as it could be seen as promoting one agency over another.

Scenario 9 – Local groups

A total of 25 local authorities were asked about local groups that can provide support. Our caller was unable to get through to one authority, nine gave an unsatisfactory or partial response and 15 gave a good response.

Examples of positive practice	Examples of negative practice
Very friendly and easy to understand, asked where in borough applicant was, mentioned two websites with details of activities and social clubs. Very comprehensive answer.	Not very helpful, I mentioned Age UK etc – they didn't take the cue.
Adviser had a list of activities in the borough for older residents that she could send out.	Had to go and ask a colleague. Came back with the advice to call Age UK (and provided local contact number).
Very friendly and helpful call handler, provided website addresses and telephone numbers for several older persons organisations. Very friendly and reassuring.	Call handler didn't have any information at all about other local groups that could give support or which a client could join. She suggested looking in the local library.
Call handler provided three organisations and numbers who provided social activities for older residents.	Call handler could only take a message and pass it on to the relevant party for them to call back. The call handler had no knowledge of the topic personally, and it was not possible to speak to the relevant party directly.

5. Discussion of mystery shopper exercise

Getting in touch

The research found that it could be quite difficult to find the relevant number on the local authorities' websites. Our caller found it fairly or extremely difficult to find the number in 35 cases (23% of websites).

In some cases, there appeared to be no direct number for Adult Social Care and there were a couple of examples of long automated menus which could be off-putting for some older people.

Our caller spent quite a few long periods on hold (on hold for 10 minutes or more on 12 occasions – 8% of calls made). In some cases, our caller was unable to get through to speak to a real person, i.e. automated messages not offering the option to speak to someone for general advice or answerphone messages.

Calls appeared to be handled by a mix of staff and it was evident that some perhaps were not experienced or informed enough (admin staff) to provide detailed information on complex topics such as funding care. On occasions our caller was advised to 'just look at the website'.

Also, some authorities were quite insistent on taking a lot of personal details about the caller (or the older person being represented) before they would even consider providing some general information on the Care Act. One or two authorities would not give information without a referral or assessment in place.

Overall response

Overall, 78 (52%) of local authorities answered the queries well and there were some very good examples of comprehensive, clear information provided in a supportive manner. The topics covered did overlap to an extent and some of the more helpful authorities did provide extra information to what was being asked for in the call. However, there were also some poor examples of inaccuracy or a reluctance to help.

There were some instances of poor web reviews translating into poor response to queries over the phone and conversely, some local authorities with strong website information also performed well on the mystery call exercise.

However, it was clear that what was being provided was information rather than advice, and there were a couple of examples of inaccurate/bad advice.

In terms of providing joined-up information that went beyond a narrow definition of care, there were some good examples where authorities offered information on help with home maintenance housing adaptations, grab rails, Wiltshire Farm Foods, telecare, pill reminders, and general offers of support to live independently at home for longer. However, these were the exceptions rather than the rule. There were also some examples of a limited 'medical' approach to assessment, with a focus on personal care needs alone.

Providing basic information/explaining changes in relation to the Care Act

On the 30 occasions that we were able to get through to local authorities to ask about these topics, 17 authorities (57%) gave a good response. Assessments, the changes in eligibility criteria and the care cap were mentioned fairly frequently.

It was not always made clear that assessments were available regardless of level of need or finances. Personal budgets, care accounts, and advocacy were also mentioned less frequently.

Assessments and eligibility

On the 14 occasions that we were able to get through to local authorities to ask specifically about assessments and eligibility, eight authorities (57%) gave a good response. There were some good examples of explaining the assessment process, but some authorities were not prepared to talk about what help might be available until needs and or financial assessments were done, and it was not always made clear that the right to assessment was universal.

Information for carers

Generally, the website review found that local authorities performed quite well on this topic, and of the seven calls made, four received a good response. Some quite detailed information on the help available was given, however carers' assessments were not mentioned as frequently as perhaps might have been expected, especially given the fact that our caller was phoning as a carer.

Paying for care

On the 38 occasions that we were able to get through to local authorities to ask specifically about paying for care, 16 authorities (53%) gave a good response. This is probably the most difficult and detailed type of information to have to handle and can also be very worrying for older people and carers.

Upper capital limits were referred to more frequently than lower capital limits and sliding scales. Good responses referred to deferred payments and also referred to other help that was available to enable older people to live independently for longer free. Good responses also referred to free financial advice available via the council and provided information on local care costs.

Responses were variable on the topic of deferred payments and there were a couple of mentions of having to sell homes to pay for care. Responses on the care cap were also variable with some authorities having more of an understanding than others. The proposed capital limits increase was infrequently mentioned.

Accessible info and advocacy

Responses from local authorities were mixed on this topic. Of the eight asked, four gave a good response and four a poor response. Some did not seem to have any accessible information available and there was little mention of advocacy.

Local information

On the 40 occasions that we were able to get through to local authorities to ask specifically about local care provision and other groups that can offer support, 26 authorities (65%) gave a good response. Good responses explained the different types of provision and directed our caller to the Care Quality Commission's website and in a small number of cases provided an explanation of the Care Act and the changes. Good responses also included offers to provide lists of local providers and other local groups and support services. Poorer responses seemed to indicate a lack of awareness of the CQC or were unable to direct our caller to any other sources of local information on care provision or other support services.

6. Appendices

Guidance on website review questions

The following guide was used to help Qa researchers to assess the quality of the web information provided.

Basic information on social care

1. Website has information on adult social care that is easy to find

This question examines how long it takes to find the 'adult social care' information section of the website by navigating from the homepage.

Good performance – click through is present on the local authority website homepage with no scrolling and easy to find within 10 seconds. Being able to find the social care section in less than five seconds is excellent.

Poor performance – hard to find, not straightforward to locate, or absent altogether. Takes more than 10 seconds to locate.

2. Website contains information on the Care Act

This question looks at whether the website contains easy-to-locate information on the Care Act. This may be in the form of linking people to general resources from the Department of Health.

Good performance – ideally, general information on the Care Act should be easy to find on the site (or the adult social care subsection) and gives clear information on the Care Act, explaining its significance and general implications to the general public.

Poor performance – the website has no information on the Care Act available. Or where it is available, it is overly technical, or the implication is that it is relevant to professionals only.

3. Website explains how the Care Act will change rules on adult social care

For those already in the care system, ideally there should be comprehensive information on how the changes implemented as a result of the Care Act may relate to them.

Good performance – The website relates information on the Care Act to those presently in the care system by explaining what will change. This could include information for people as to what to expect when their care is reviewed, and when they can expect any changes to their care (i.e. following a review or reassessment under the new system). Ideally this information isn't limited to mentioning just one or two changes being implemented by the Act such as merely assessment or carers, but explains other areas including rights to deferred payments and the forthcoming introduction of the care cap.

Poor performance – the website has no information on the Care Act available, or what is available does not make it immediately clear how it may affect existing care users.

Care Act requirements for local authorities

4. Information on assessments and eligibility (Care Act requirement 4.1, 4.2a+c³)

Local authorities must offer comprehensive information on assessment and eligibility that should be up-to-date with changes as a result of the Care Act's introduction.

³ References to 'Act Requirement 4.1, 4.2' etc relate to the relevant section of the Care Act 2014: <http://www.legislation.gov.uk/ukpga/2014/23/section/4/enacted>

Good performance – the website explains in simple terms the new criteria for eligibility and how to obtain an assessment. It may also state clearly that carers now fall under the new national eligibility criteria and have extended rights to assessment (and, if found eligible, services). Any use of online self-assessments are presented with information describing precisely what they are assessing, and/or website visitors are offered a way of accessing an alternative form of assessment (i.e. face-to-face or telephone).

Poor performance – assessment information is outdated (with references to FACS, or 'Fair Access to Care Services', or the website directs people to an online self-assessment with limited information as to what this is for). This may indicate a 'gatekeeping' function to the assessment.

5. Information for carers (Care Act requirement 4.1, 4.2a+c)

Local authorities must offer comprehensive information for carers that should be up-to-date with changes as a result of the Care Act's introduction.

Good performance – The website offers easy-to-find information for carers that includes reference to the new right to both assessments and if eligible, services under the new national eligibility criteria. Information on carers' services is comprehensive and references support such as respite, personal budgets, support groups etc.

Poor performance – carers information is present, but outdated. The website is unclear or does not mention the right to an assessment and there may be no reference to the new eligibility criteria.

6. Information and advice on planning for and meeting the cost of future care needs (Care Act requirement 4.1, 4.3i-iii)

As well as offering information and advice about how a person might plan for future care and support needs, local authorities must also ensure financial advice is available for people not in the care system, relating to what they need to consider with regards to potential future care needs. This may include mentioning Independent Financial Advice in this context.

Good performance – website clearly explains in both general and specific terms the importance of planning for meeting future care needs in a way that can be assumed to be focused on those both pre and post retirement. Mentions financial planning specifically, including Independent Financial Advice. Includes links to preventative advice in regards to health, housing etc.

Poor performance – information on planning for future care needs is either absent, or appears to only focus on those with immediate care needs, such as situations where a person is imminently considering a move into residential care and may benefit from Independent Financial Advice.

7. Information and advice for current care users on paying for care, including accessing Independent Financial Advice (Care Act requirement 4.2d)

For those needing to pay for care in the immediate term, local authorities must offer information and advice on how care is funded or paid for. This includes mentioning how to access independent financial advice (both in the general sense and as a specific service) on matters relevant to meeting needs for care and support along with other information on paying for care.

Good performance – comprehensive information and advice is available for people regarding their options for paying for care, including deferred payments. For those who are imminently considering a move into residential care, they are directed to discuss accessing Independent Financial Advice, ideally from a third party organisation such as SOLLA.

Poor performance – information on paying for care for future care users is either absent or limited. References to the importance of accessing Independent Financial Advice (where mentioned) either do not provide additional signposting to advice (such as discussing with a third party such as Society of Later Life Advisers (SOLLA), or limit choice by providing the details of specific financial advisers (without context).

8. Information and advice must be accessible and proportionate to the needs of individuals and information on how to access advocacy should be clear (Care Act requirement 4.1, 4.4)

Local authorities must ensure that people can obtain accessible information and advice where necessary. We also expect that information and advice is easily available on how people can request advocacy where needed. (Advocacy may be featured on local authority websites by itself, or alongside information on assessments or the Mental Capacity Act).

Good performance – The website itself is easy to use/navigate and accessibility options are available to reformat the site to make it more accessible. Information provided in the form of downloads is offered in easy-read format or the website is clear on how people can access information and advice in other formats, including community languages/braille etc. Information and advice on how to access advocacy is also present, either in a standalone section, or in relation to assessment and eligibility information or any information on the Mental Capacity Act and eligibility for advocacy support is explained.

Poor performance – website is hard to navigate, hard to read, does not support accessible functionality. Hard to determine whether information and advice is available in other formats. It is unclear how/whether advocacy is available, and who may be eligible.

9. The types of support and the choice of providers are explained (Care Act requirement 4.2b)

Local authorities must explain the choice and types of support and the choice of providers available locally.

Good performance – the website contains both information and advice on the types of support that people may consider to meet their needs (preventative services, care services, range of accommodation options such as sheltered housing, residential care, nursing care etc). The website also contains information on the range of local providers, potentially in the form of a directory, or external website. Ideally, we would want to see websites containing information on types of support presented alongside choices of providers so people can consider all options before deciding on a course of action. It is important that this is done intelligently, so for example, a standalone directory of care homes is unlikely to support choice if the implications of moving to a care home are not explained in relation to other care settings or forms of support. For this purpose we would expect to see this information presented either together or easily linked.

Poor performance – information and advice on types of support is limited, or poorly explained so that people may be unsure what setting may be most appropriate for their

needs. Sign posting to choices of providers is either absent or presented without context (i.e. a person looking for basic care and support information is directed straight to a directory of providers without context, or being made aware of their right to a care assessment).

10. Information on raising an adult safeguarding concern is present (Care Act requirement 4.2e)

Local authorities must offer information on how people can raise a concern about a vulnerable adult. Websites should provide clear and straightforward information as to how to raise a safeguarding alert and this information should be featured prominently.

Good performance – Safeguarding information and advice is prominently placed on the website; it is easy to find on a top level website page such as the council homepage, or on the main adult social care webpage and how to raise an alert is clear.

Poor performance – Safeguarding information is either not present, or is not easily located. When located it is unclear as to what relevance it is to members of the public and it is unclear whether the public can raise a safeguarding alert and how to do this (i.e. site says that public can raise concerns, but does not provide details of how to do this).

Other

11. Links to local groups or support networks

The local authority website contains links to, or information on local groups or support networks who can provide information and advice, such as local charities, volunteer organisations and user groups.

Good performance – Ideally, we can reasonably say that the council does not appear to see itself as the sole provider of high quality information and advice locally and as such “makes effective use of other high quality statutory, voluntary and/or private sector information and advice resources available to people within their areas.”⁴ This includes linking to local groups and support networks.

Poor performance – The website appears to contain no information on or links to local groups or support networks. Or where it does, it provides limited context (such as just providing a list) so that it is unclear as to why members of the public may wish to contact other organisations.

12. Links to national websites or resources on adult social care

The local authority website links to external national resources on adult social care. In doing so the website contains elements that seek to engage local people with information beyond that which it provides itself (i.e. Department of Health factsheets, Care Act guides or Independent Age website and so on).

Good performance – The local authority website contains links to national resources that could demonstrate the local authority is engaging with best practice (e.g. Think Local Act Personal’s ‘Jargon Buster’⁵).

Poor performance – The local authority does not provide links to external national organisations in relation to adult social care, or where it does, it does so without suitable context – for example through a list of ‘further links.’

⁴ Care Act guidance point 3.14

⁵ <http://www.thinklocalactpersonal.org.uk/Browse/Informationandadvice/CareandSupportJargonBuster>



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