



advice and support for older age

**Independent
Age**

Shining a light on care: helping people make better care home choices

Executive summary



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*For the great work that's
done in care homes,
there are still dark
corners, and it's those
corners that a light
must be shone on.*

”

Former Care Minister,
Alistair Burt MP,
November 2016

Executive summary

“

Instead of thinking, 'Oh my God, I'm going to end up there,' I actually want to think, 'If I do have to go into care, I want to look forward to how fantastic it would be.' ”

Birmingham focus group participant

We rarely hear positive news stories about care homes and yet as more of us live for longer, many of us will live in one. The majority of care homes inspected by the Care Quality Commission (CQC) are rated 'good' or 'outstanding', but that still leaves large numbers of homes – nearly 4,000 – delivering substandard care or struggling to improve.

What's more, nearly half (45%) of British adults describe their overall perceptions of the quality of care in care homes for the elderly as bad¹.

We need to do better than this and aim for higher standards of quality in a market valued at £15.9 billion.

To get to a place where more of us can imagine positively choosing a care home, we believe what needs to change fundamentally, is the quality on offer.

This report highlights why we believe there is a worrying gap in the information currently available to people looking to choose a care home, and what can be done to fill that gap.

¹ Independent Age – Care Homes Poll. ComRes interviewed 2,030 GB adults aged 18+ online between 28th and 30th October 2016. Data were weighted by age, gender, region and socio-economic grade to be representative of all British adults aged 18+.

Main findings

There is a confused picture of safety and quality in care homes in England

- The CQC picture is of persistently variable quality – 2 in 5 (41%) of nursing homes are rated inadequate or require improvement, and a quarter (26%) of care homes are similarly below standard.
- There are big gaps in what the residential care sector knows about quality and how it communicates what it knows. The National Audit Office said it believes the CQC doesn't have access to routine information on adult social care good enough to trigger inspections.
- Public perceptions of care homes can be very negative, driven in part by concerns about the risk of abuse. Just over half (52%) of British adults believe that abuse and neglect in care homes is common².
- There were nearly 40,000 safeguarding risks relating to care homes reported and investigated in England in 2015/16. But this doesn't necessarily provide the full picture of the scale or types of abuse and neglect occurring in residential care.
- There is little hard data on the extent of abuse and neglect, which may lead to the public overestimating it.
- The care homes sector – unlike the NHS – doesn't even have a sector wide staff survey, meaning it misses opportunities to ask staff whether they would recommend the place they work as a place for relatives to receive care or whether they have witnessed neglect and abuse.
- Focus groups we ran highlight how people have very low awareness of existing sources of information on care homes – and when information is available, they often struggle to trust it.
- There are significant gaps in the information care homes directly provide about their own services, according to our mystery shopping survey results. From a sample of 100, 2 in 5 were unable to provide 'good' or 'satisfactory' answers to all of our six basic questions.
- Care rating sites have been criticised in recent years for providing inaccurate or misleading data. Earlier in 2016, an investigation by the Competition and Markets Authority (CMA) found that some rating sites risk distorting the picture presented to site users on care quality.

2 Independent Age – Care Homes Poll. ComRes interviewed 2,030 GB adults aged 18+ online between 28th and 30th October 2016. Data were weighted by age, gender, region and socio-economic grade to be representative of all British adults aged 18+.

- Our research with care professionals, older people and their families, unveiled almost 100 potential components of quality – ranging from how you are greeted on arrival to how many residents are being prescribed antipsychotic medication. Yet these are not routinely captured.
- In summary, we highlight three related issues that act as an obstacle to older people's and their families' efforts to choose a care home that matches all of their criteria for a good quality home:
 - 1** Too many interpretations or versions of quality
 - 2** Lack of consistent and standardised data collection in social care
 - 3** Lack of transparency and easily available information to support care home choice
- This shared view of quality could help the CQC with its own plans to promote a simpler, 'single' view of quality as part of its 2016-21 strategy.
- An improved, streamlined approach to capturing and reporting information on quality in care homes would be in the interests of both older people and care providers.
- This report identifies some basic indicators of safety, such as incidence of pressure ulcers, and details the use of such measures in the United States.
- Based on our research with older people and care experts, we have also developed 10 care home quality indicators to provide everyone looking for information on care homes with more reliable information. This includes whether a home has a registered manager in place, staff turnover, and how the home involves residents and the local community in social activities.
- To satisfy the demand from older people and their families for better guidance when looking for a care home, we are working to test these 10 new care home quality indicators.

A new approach

- What is missing is a shared view of quality that is not overwhelmingly complex, and that reflects not just experts' concerns, but also the concerns of older people, their families and friends.

Recommendations

- The Department of Health should demonstrate the same level of policy leadership on the issue of transparency and reporting performance in social care as it has for the NHS.
- The Care Quality Commission should work with the Department of Health and other stakeholders to agree a single, shared view of safety and quality in care homes and an agreed set of core indicators (a 'minimum data set') to be collected for all homes. This should form the basis of the data required by all commissioners of care home and nursing home services so as to minimise the data provided by homes and reduce duplication and overlap.
- The Competition and Markets Authority (CMA) should conduct a full market review of the care home sector to see whether it is a market that is working well and whether consumers are getting a fair deal, particularly in relation to information on quality and cost.
- The Department of Health should commission a Social Care Staff Survey similar to the NHS Staff Survey. By working with industry bodies they should ensure the survey collects annual data on whether staff would recommend the provider they work for to a family member or friend and whether they have witnessed abuse or harm.
- To reach a position where quality care is the norm for all, the overall care market needs to be sustainable. The government needs to respond to the recent challenge set by the CQC and avoid adult social care reaching a 'tipping point' where quality, funding and capacity continue to deteriorate.



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