

“Choosing and Living in a Care Home”

by Marion Shoard
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Before you even think of choosing a care home, stop! Are you absolutely sure this is the right move? So you may have developed continence difficulties, while severe osteoarthritis may be getting in the way of shopping, washing and dressing. A few such problems can be quite enough to get sons and daughters phoning round nursing homes. Yet the chances are that you will be better off staying in your own home for as long as you can – with help summoned from outside as required. Or, if a son or daughter is willing to help out, they could act as your full or part-time “carer”. If you want to explore the family carer option, get advice from The Princess Royal Trust for Carers, which has local offices (address on page x). If you are interested in securing help in the home (the two options are not of course mutually exclusive), turn to page y.

A key source of support during this process and in finding a care home, if this does turn out to be the best idea, is the social services department of your local authority (or social work department in Scotland and health and social services trust in Northern Ireland). Social services have a legal duty to carry out a “community care assessment”, if you ask for this, or they may offer one after a referral, perhaps from your GP. The assessment will establish the extent of any need for community care services ranging from attendance at a day centre to help with tasks like washing and dressing and using the lavatory.

If the assessment concludes that you need support in a care home, the extent to which social services will subsequently be involved in any care home placement turns largely on your financial position. As explained on page h, if you have savings including the value of your own home that exceed about £20,000, you will be expected to pay the care home fees yourself as a “self-funder” and social services will probably have only limited involvement (although the trusts in Northern Ireland often handle placements, with the resident reimbursing the trust if above the financial threshold). Wherever you live in the UK, if your savings fall below about £20,000, social services will be very much involved and it will be they who become party to the contract with a care home.

Whether you are a pauper or a millionaire, it is still important to get social services involved at the outset. They can provide advice and expertise, as well as a community care assessment. Also, if a later stage you need to turn to them for help with paying the fees, you will know that the type of home you have selected is one they would assess you as needing and thus one in which they may continue to finance you.

Some people think that if social services are to be party to the contract, they will have little say over the choice of home. This is absolutely not the case. Social services will no doubt suggest homes, but you do not have to choose one of these, or even one in their geographical area. The point is that the chosen home has to be able to meet your assessed needs, which is why it is important that the community care assessment establishes these correctly: they might, for instance, include a need to remain in close contact with relatives living in a particular place, which would have obvious implications for the location and type of home. However, if the home you prefer is more expensive than your council considers acceptable, it may ask for a "top-up" to the fees (see page h).

Trawling Possibilities

Whether social services are going to be involved in your care home placement or not, they should provide you with a comprehensive list of possible homes in your area. It is important to approach the choice with an open mind and certainly not to rely on the recommendation of one individual, even a professional like a GP, since he or she may have experience of only one aspect of a home; also, care homes can change quite quickly as staff, including managers, come and go. Voluntary bodies such as The Alzheimer's Society may be able to provide more initial details on homes. Some people seek the help of an agency to find a care home, such as that offered by Care Choices (see page a).

Another useful source of information on care homes is the national agencies which regulate and inspect care homes. You can get information from these by post, telephone or on the internet. Not only do they provide lists, but they also publish the reports of the inspections they have carried out, and it is very well worth while looking at these before you visit a home, since they can inform your questioning. The organizations involved are the Commission for Social Care Inspection (in England), the Care Standards Inspectorate for Wales, the Scottish Commission for the Regulation of Care and Northern Ireland's Health and Personal Social Services Regulation and Improvement Authority. While you are about it, you could also obtain from these organizations the legal framework within which homes operate. This is set down in the national minimum regulations (with which homes have to comply and if they do not can be closed down) and the national minimum standards (compliance with which inspectors will look for when they make their visits and which range from record-keeping to the administration of medication and ensuring that residents can exercise their right to vote). You don't want to find yourself bowled over by what sound like impressive bedroom dimensions only to find that they are no more than the minimum expected by the inspectors.

The 20,000 or so care homes in the UK vary a great deal. There is the distinction between homes providing a minimum of support (what used to be called residential homes) to nursing homes and those specializing in the care of people with particular conditions such as blindness or dementia. Superimposed on this variation is a range of ownership and size, from small family establishments to not-for-profit homes run by charities to large homes owned by corporations. There are no hard-and-fast rules about quality. For instance, do not assume that the most expensive homes are necessarily the best. Research has shown that modestly priced homes are sometimes better, for instance in the amount of time staff spend interacting with residents.

Interviewing the Manager

Armed with your list of possibilities, telephone those which look interesting and make an appointment to look round. During your interview with the manager and subsequent tour of the home, you need to obtain (and should ideally write down) details of many things. As a framework you might care to use the list of questions on page a.

Staff

Clearly, the numbers and type of staff and their training are particularly important. Effective care requires trained staff who have sufficient time to carry out their tasks properly and to chat to residents and help them feel at home. Expect at least half of the home's care assistants to have achieved the basic qualification of NVQ (or Scottish Vocational) level 2. Find out how often the home employs agency staff.

Safety

As you tour the home with the manager, consider safety. Are residents evacuated from the building in the event of a fire? If not, what happens? How long would it take a fire engine to get to the home? Falls present a great danger for elderly people, because they often inflict a lot more damage on the older body than the younger, and older people take longer to get better. What does the home do to minimize the risk of falls? For example, are there enough grab rails? Do you see residents with mobility aids using them properly or are they shuffling round with inadequate equipment and footwear? Are all parts of the complex which residents use well lit? (Older people need a lot more light than younger people to see as well.) The manager ought to be able to explain precisely what steps have been taken in terms of design, day-to-day management, provision of equipment and training of staff to minimize the risk of falling.

Home from Home?

Safety and quality of care differ from quality of life: you can be safe and well cared for yet lonely and bored. Would you (or the relative on whose behalf you are inquiring) fit into the social ambience of the home? What social activities are on offer and how often? Try to meet the home's activities organizer and sit in on at least one of her sessions, observing whether residents are finding them absorbing and whether all residents are included in some way or other. What happens when she goes on holiday? Are there good links with the local community?

Bear in mind that you are being shown round by a sales-person. She will be trying to give you as favourable an impression as possible, perhaps conducting a large part of the interview at the window of the most attractive bedroom offering a fine view. She is also likely to want to conduct the interview at a time when her home is bustling with activity. But you have got to discover what the home would be like to live in for yourself or the person on whose behalf you are inquiring. What would you be doing in the evening, for instance? Would your grandfather, say, really feel at home here? Would he be able to get across what might seem to him acres of floor? Where would he smoke his pipe? Who would he talk to?

What would substitute for his garden-shed environment? You have to assemble all the evidence you can muster to decide whether you (or your relative) would be comfortable, warm, well fed, happy, interested and cared for kindly, expertly and efficiently, day and night.

Profit versus Care

Look for indicators of how a home balances the conflicting demands of making a profit and providing good care, such as the brand of T-bag used and the state of residents' lavatories. If you only glimpse the loos on your tour with the manager, ask to be excused so that you can take in the important details. Obviously they should be scrupulously clean and free of offensive odours; but has the home also gone to the trouble of making them comfortable and pleasant? Look for firm supports to aid residents getting up and down and sufficient space both for the cared-for person and for assistants to help. Bring a thermometer in your pocket or handbag and check that the ambient temperature is at least that recommended for older people of 22°C or 23°C. Finally, is the room nicely decorated and well lit?

Health Matters

Prospective care home residents often have complicated and often multiple medical conditions. No care home, including a nursing home, is going to be in a position to offer all the medical expertise which its residents need. So it is important to make absolutely sure that the home has established easy access to NHS professionals. Quiz the manager on how frequently over the last six months the home has received visits by, say, a physiotherapist, speech and language therapist and Parkinson's disease nurse. Ready access to dentists, opticians and chiropodists is also extraordinarily important.

Sitting and Watching

If a home seems promising, ask to come back on at least one separate occasion to sit by yourself for some time to see what happens. Watch how staff interact with all residents (especially the most vulnerable) on a minute-to-minute basis, whether residents are happy, what they do all day, whether the food portions are adequate and whether seconds are available and so on. If possible, try to sit and watch several times, at different times and on different days of the week. One such visit is essential.

Other Considerations

If the home passes these tests, there are other matters to consider (as well as the fees). Would it be easy to keep your own GP? In which rooms could you smoke? Are religious services held in the home? If you hail from an ethnic minority group, will the home be able to accommodate any special requirements or preferences you may have, for instance, in the area of diet? Can you bring your pet and if so, how will it be managed?

Some relatives, such as spouses, like to visit for several hours every day. Is this going to be acceptable and can they visit in private? Some husbands or wives go into a home with a partner even though their needs for care are less than their spouse's. They will wish to make absolutely sure that the home will provide them with a double room and that they will not be split up.

The Contract

Scrutinize the contract. These vary a good deal and you should go through it very carefully and seek amendments if necessary. (The Office of Fair Trading has published guidance on unfair clauses.) Try to ensure that the contract specifies which room you will occupy and obviously check that you like that room. Do not consider entering the home on a permanent basis without having signed a contract: if you do and problems arise, like an uncalled-for hike in the fees, or a proposal to move you to another bedroom or require you to share, you will have little comeback.

The contract is almost bound to contain some provision for the home to give you notice if it wishes to do so. Residents in care homes do not have the security of tenure afforded to people in rented flats: their status is akin to that of a lodger. Scrutinize carefully the grounds in the contract on which the home could ask you to leave. If in doubt, seek advice from one of the charities listed on page x, such as the Relatives and Residents Association or Counsel and Care, both of which specialize in support for people in care homes.

Coming to a Decision

A trial stay is a good idea: you could see whether you could stay in the home, even if only for a couple of days but ideally longer, to get a feel for the place, day and night; the national minimum standards expect homes to allow this facility. Some people get a sense of a home by staying there first for "respite" care, perhaps while family members who normally look after them, go on holiday. Some people will live in a care home only for respite care, rather than as a permanent residence. They still need to exercise a great deal of care in the choice of home.

Smoothing the Path

One important step is to ensure that everybody is clear about what the home is going to do and what it is not going to do before the new resident moves in. Precisely how a person is going to be cared for should be set out in a care plan (or service user plan). This is a legal requirement on homes and ideally it should detail everything anybody would need to know who had to care for a resident but had no other guidance. Expect to be fully involved in drawing up your care plan and, once you have moved in, in regular reviews. Make sure that it is readily available. Good homes will also wish to be fully briefed before entry about a new resident's background and preferences (for instance, hobbies, activities and favourite TV programmes) as well as their birthday, which he or she might like to see celebrated.

One important area to discuss with a home before you or your relative moves in is how they propose to manage the transition. The new resident is very likely to feel worried and may be physically frail, perhaps recuperating after a fall. It is important that they get as much support as possible. You want to be convinced that the manager will ensure all staff are well briefed about you or your relative before arrival, so that they give him or her a warm welcome.

For example, if your relative is partially sighted but the disability is not apparent, all staff from the gardener to the manager should know, so that they can greet him or her, explain who they are and what they doing. View any suggestion by the manager that family should not visit over the first few days with great suspicion. A good home will provide a spare room for close family to stay over if necessary, so they can proffer plenty of support and share their own expertise and knowledge with staff.

Before you go in, establish with the manger that you will see him or her regularly for a general chat, perhaps monthly. This should be quite separate, and in addition, to reviews of the care plan. This gives you a chance to discuss any worries without presenting them as a formal complaint (unless you wish to do so); some would not in any case consist of complaints but might be a discussion about how your elderly father could make more friends, perhaps by trying new activities or being encouraged to sit with a different group of residents at meal-times.

Show genuine appreciation to the staff. Theirs is not always an easy job and all of us perform better if our efforts are appreciated. Try to attend any special events laid on for relatives and make sure you do not cause unnecessary difficulties for them by not providing sufficient clothing or toiletries. Check before entry on how clothes will be labelled: you do not want to find all your relative's clothes are sent away for labelling while he or she is trying to settle in. Very important: label hearing aids, dentures and spectacles before entry. They do get lost, and life can be very miserable while waiting for replacements.

A good home will ensure that all visitor feel welcome, including young children, and that there is plenty for them to do. Visitors for people with dementia are particularly important, as they can provide the vital one-to-one reassurance of which care homes, with the best will in the world, are unlikely to be able to provide enough all of the time. What is more, the sort of activities in which people with dementia can become absorbed or at least distracted are often easy to pick up, such as playing with large, soft balls, patting dogs, and interacting through dolls.

Complaints

If you have serious concerns about a home, have a look at the home's complaint procedures, which all homes have to provide and a copy of which should have been given to you on entry or beforehand. It is important to tread carefully when raising concerns if you wish to remain in a home, as you don't want relations to turn sour unnecessarily, especially in view of the fragility of your tenure. Chris Ardill, who mans the Relatives and Residents Association's helpline, advises that any concern should first be raised with the manager, rather than with individual staff members, lest the manager should think that you are going behind his or her back. If social services organized your placement, you could contact them early on. If you get nowhere with the manager after two or three attempts, explain to him or her that you feel you have no option but to take matters further. If you contact the national regulatory body, they will ask you whether you wish to lodge a formal complaint. If you do this, the Commission for Social Care Inspection (CSCI) or its equivalent will automatically refer to the home for their views. If you do not want the home to know what you have done and your concern is not urgent, ask CSCI or its equivalent to examine your concern at their next inspection visit; this could be sooner rather than later as they can make unannounced visits at any time. However, if you mention the word "abuse" to CSCI or social services, they should investigate immediately. If you are worried about the possibility of abuse, such as physical harm, contact social services (there will be an out of hours number) or the police without delay.

It may all seem an intimidating business, but it is worth making the effort to ensure you or your relative get the best out of an experience that is often much less satisfactory than it might have been. Get it right and a sojourn in a care home could yet turn out, as it certainly does for some, to be among the happiest experiences of a lifetime.

Marion Shoard is the author of A Survival Guide to Later Life (Robinson, 2004, 640 pages, £9.99)