# HAVE YOUR SAY - Summary

### Review of Domiciliary Care (Home Care) for Older People

Have your say on how domiciliary care, also known as home care, for older people should be provided in Swansea in the future.

This document gives you a summary of the options the Council is considering for redesigning these services in the future.

If you require more details contact .....

### What services are we talking about?

Domiciliary Care (Home Care) is provided to people who still live in their own homes but need additional support to allow them to maintain their independence and quality of life. Anyone at any stage of life could need domiciliary care.

Examples include short-term arrangements to help people regain their confidence and independence, and long-term care providing support and skills to those with ongoing needs.

The services are provided by us, sometimes jointly with the NHS and sometimes by other organisations, which have a contract with us.

### Why is this happening?

We want people across Swansea to live as independently as possible in their own homes because they tell us that this is what they want.

To do this we aim to offer the right support, at the right time and in the right place. But times are changing, with more people needing home care as we live longer, guidance and laws have been updated, and we have a challenging budget too. So we have to ask: "How do our services need to be re-designed, and to be even more effective for those who need help and how would that look?"

### What are the options?

We are letting you know our preferred options so you can have your say on whether they are right. No decisions have yet been made.

We have asked ourselves questions like: Do they get the right results for people? Can we do them? Are they cost effective and can we afford them? Do they help us offer the right support at the right time in the right place? Do they reflect national guidance for good practice?

### Short Term Reablement Service

What is it? Specialist care, usually provided at home for up to six weeks. It helps people regain confidence to do things for themselves by learning or relearning skills necessary for daily living, for example after a fall or hospital stay. Who is it for? People who we believe would most benefit from receiving the service. Options:

**A.** Leave the service as it is

**B.** Redesign it to be as effective as possible. It would be a strong therapy-led provision with good links to community equipment services (eg grab rails etc). It would be offered to those who would benefit most. Fewer people would then need long-term home care.

### Our preferred option is Option B.

## Long Term Domiciliary Care Services

**What is it?** Ongoing support with, for example, eating, drinking, toileting, washing, dressing and medication, in a person's own home.

Who is it for? People whose needs are ongoing or more complex, requiring an intensive package of support over time including those living with dementia. Options:

**A**. Leave the service as it is.

**B.** Redesign the service to promote independence, avoid unnecessary hospital admissions and stays and assist with dementia needs. It may include specialist dementia care with specially trained staff, a rapid response service with out-of-hours community nursing, community equipment, crisis intervention provision and rapid access to carers' respite services.

### Our preferred option is Option B.

## Who should deliver domiciliary care services?

What happens now? Organisations including the Council and specialist private providers now deliver specific home care services based on what they do best. Options:

- **A.** No change except to look afresh at which provider does what and how they can best work together.
- **B.** Every provider works across all areas of the service.
- **C.** Arrange for the Council to deliver all services.
- **D.** Let all services go to organisations outside the Council ending Council delivery

### Our preferred option is Option A

**Why do we prefer this**? We believe it's the option which would cause the least disruption for existing clients, it enables providers to develop the right skills among their staff for their clients, it reduces the risk of people being left without care if the provider shuts down and helps keep costs under control.

### How should home care services be organised?

What happens now? Providers have a contract with the Council to deliver home care anywhere in the county.

### **Options:**

- A Keep it as it is now
- **B** Give contracts to specific providers for specific parts of the county.
- **C** Combine the best of both options i.e. continue county-wide arrangements for complex and reablement clients and give contracts to specific providers for specific parts of the county for all other clients.

### Our preferred option is Option C

We believe combining the best of both will help provide specialist care where needed while also reducing travelling time to increase the amount of time workers have to care and to build stronger relationships within communities.

### Have your say

Please fill in the attached questionnaire to have your say.