



# Northamptonshire Adult Social Services Independent Service User Survey

December 2019





## Contents

Summary.....	3
Key findings .....	4
Recommendations.....	6
Response to recommendations from NASS.....	7
Background.....	8
Method.....	8
What people told us .....	10
Demographics .....	10
First contacting social care services.....	12
Help and support received .....	15
Knowledge of process.....	23
Overall satisfaction and other comments.....	25
Conclusion.....	29
Acknowledgements .....	29
About Healthwatch Northamptonshire .....	30
About Connected Together .....	31
Appendix - Survey questions.....	32
Contact us.....	35



## Summary

Northamptonshire Adult Social Services (NASS) are looking at how they can change the way they provide adult social care to better suit the people who need it. They asked Healthwatch Northamptonshire to carry out a short, independent survey for them to gather the views of service users and carers to inform these changes.

The survey looked at people's experiences of first contacting adult social services and getting help, their experiences of the support they received, knowledge of the processes and people involved and overall satisfaction with the support.

We found that people's experiences have been mixed across all the areas, with some people having had good experiences and others poor experiences. We heard examples of people who would like more care and support as well as from those pleased with the care they receive.

We asked for more details about the difficulty people had faced. People often described experiencing delays in getting care, support or responses and other aspects of communication, such as being able to speak to the right people. Other people wanted more care or particular services and carers in particular seemed to find communication poor and wanted more respite care (two-thirds of respondents were/are carers).



### *Word cloud of additional comments about social care services received.*



## Key findings

Answers to the survey were mixed, with some people having had good experiences and other poor experiences. Some of the issues highlighted, particularly around communications and respite care, seemed to affect carers more than services users.

### First contacting social care services

- Half of those who answered (51%) had known how to contact NCC about social care services when they first needed them and most people (41%) had been referred by a professional or had contacted NCC by telephone (31%).
- Some people (39%) said they had difficulty contacting NCC about social care services, whereas others (44%) did not. Those who had difficulty felt they had been passed around or that it had been difficult to contact the right people, that contacting NCC had been difficult, confusing or time consuming, or that they had not had a timely response.

**"I got bounced around lots of teams with no one wanting to accept the referral."**

### Help and support received

- People's experiences of getting the help they asked for when first contacting social care services were mixed, with the number of people saying they got the help they asked for (39%) almost the same as those who did not (38%). More people currently receiving services (57%) had got the help they asked for than carers (33%). Those who did not get the help they asked for mentioned having to wait, feeling they had not received appropriate or sufficient care, being passed around between people or department, having to fight to get help or struggling with transitioning between services.

**"The wait is too long so it was months before I was assessed."**

- Nearly half (48%) felt that NCC did not help them in a reasonable amount of time (compared to 38% who did). Those currently receiving services (57%) were more satisfied with the amount of time taken than carers (34%). Those who did not feel the time it took to receive help was reasonable said it had taken too long, that it had been difficult to get help from the right people/department, that NCC were not helpful or were disorganised, or that it was difficult to transition to adult services.

**"The process of getting support is so drawn out. As someone new to the system I had no idea of the process so could not prepare information and documentation needed. A guide to how the system works would be useful for families."**

- 43% of people said there were other things that they wanted from social care that they were told were not available or that they could not have, with more carers (59%) saying this was the case than people currently receiving services (26%). People mentioned wanting specific services (such as physiotherapy or occupational therapy, equipment, support with accommodation, help with house tidying, help with finances and transport), more or longer care, and carers in particular wanted respite care. Some people felt unsupported, that their needs were not acted on or their care was changed.



“Access to respite care, not made available to us and yet I understand mum is entitled to six weeks respite.”

- Over half (54%) did not feel they had regular reviews of their care package. Some people told us they had not had a review or had requested one and others how their care changed without having a review. Three people gave positive feedback.

“From the first instance of contacting NASS I have had excellent advice and assistance from [specific person].”

“The social worker had to be reminded of the due dates and repeatedly chased up to agree a time and place.”

## Knowledge of process

- Almost two-thirds of people (64%) were not always aware of what was happening with their request or who was supporting them. This was especially the case for carers (71%).
- Half of people (50%) knew, or had known, the name of their social care worker/s.
- 48% said that everything about their care was explained clearly to them. This was the case for more people currently receiving services (69%) than carers (40%).
- Just over half of people (55%) knew, or had known, who to contact if they needed or wanted further help.

## Overall satisfaction and other comments

- People's overall satisfaction with the support they had received from NCC adult social care was mixed. 30% rated their care as Excellent or Good, whereas 44% rated it as Very poor or Poor.
- Additional comments about the social care services people, or the person they care for, receive were given by 68 people. There were 12 examples of good care. The other comments related to issues with poor communication and lack of information, negative experiences or views of how professionals treated them, staff culture, or a lack of staff, not getting the care or support they needed, problems with processes and external agencies and care not always being person-centred.

“We had lots of contact from [name] at first, which was very helpful. When home care was needed it happened. The patient’s care manager was superb. Helped them get assessed and given a care home. Thank you.”

“Not having a dedicated person to speak to. Use to have contact, no longer able to. Only a team. Sometimes very difficult to get through. NCC needs to help with respite info.”

“There are too many stages to the process and too many separate organisations offering care, especially for those who have been assessed in a hospital environment who are about to return home.”



## Recommendations

The following recommendations are made in response to the feedback summarised in this report and are in line with the recommendations made by the National Institute for Health and Care Excellence (NICE) guidelines for People's experience in adult social care services: improving the experience of care and support for people using adult social care services<sup>1</sup>.

1. Listen to and understand people's needs and ensure care and support is personalised and person-centred, based on these needs. Person-centred care should be understood by all staff.
2. Improve the process for people to follow when contacting adult social care, such as giving people a designated person to contact, and publish an overview of the processes to improve understanding and clarity.
3. Keep people updated with the progress being made when they are waiting for a response, care package or assessment and ensure support and continuity for people transitioning between child and adult services.
4. Be clear with people about what services NASS can or cannot provide and the timescales they can expect.
5. Involve and support carers by listening to them, communicating better with them and supporting them with services such as respite.
6. Communicate with people in a way that is accessible to them, including using British Sign Language interpreters where necessary.
7. Continue to involve service users and carers in service design and improvement.
8. Consider clarifying the complaints process.

<sup>1</sup> People's experience in adult social care services: improving the experience of care and support for people using adult social care services, NICE guideline 86 published February 2018, [www.nice.org.uk/guidance/ng86](http://www.nice.org.uk/guidance/ng86)



## Response to recommendations from NASS

By national standards, we perform well at a relatively low cost. But our staff and people we support tell us we could do better: working with us can be confusing and takes too long, and sometimes we miss opportunities to help people live as independently as they could. We want to fix all this.

This summer we took a thorough look at how we work, helped by an organisation called Newton. We brought together groups of experts from inside and outside our service to look at more than 150 cases to see if there was anything we could have done better in each one. And we crunched through our records to get the fullest picture of how we use our staff and money. The review team also asked front-line staff for improvements.

In almost half the cases we looked at, our groups felt a better decision could have been made. Often, that would have given an individual more independence, while still keeping them safe. We found we make too many decisions without the right information about an individual's situation or what services might be available for them, and without the time to consider everything together. This is partly because staff spend too long on paperwork or sorting out problems with providers. Staff spent just 11% of their time with people we are supporting and their families, compared to half of every day on paperwork.

We want people to live as independently as they can, for as long as they can. Our role is to help people find the support they need from their families and in the community. When they do need formal support provided by the council, we need to ensure our staff have the time, information and skills to make the best decisions, so individuals can live the best, most fulfilling lives they can.

We now need to redesign the way we work to enable our staff to do that. We need to continue working with staff to make the improvements we want to see a reality. There is no solution in a box - we need to try out new ways of working, see if they help, and refine them in light of experience. When we find something definitely makes a positive difference, we will give all our staff the opportunity to benefit from it.

In January 2020 our 'innovation leads' from within our service started working with groups of staff and external experts across particular areas of our service to design and try out new ways of working to address specific things we want to get better at.

This research is helping inform our transformation work as we work hard to make real improvements for everyone who accesses these services, both now and in the future.



## Background

In June 2019 Northamptonshire Adult Social Services (NASS) published its draft discussion document on the NASS Strategy 2019 -22<sup>2</sup>. The strategy looks at making the best use of available resources to keep people in Northamptonshire independent while recognising that NASS is not organised in a way that makes sense to their customers and that they take too long to do some things.

NASS would like to change how it works in order to provide adult social care to better suit the people who need it. This is taking place in the context of a predicted growth in demand for care over the next ten years and reorganisations of the local government structure in Northamptonshire and changes in the way health and care organisations work together in partnership<sup>3</sup>.

NASS commissioned Healthwatch Northamptonshire to engage with NASS customers on areas of the strategy and current service provision to ensure that the voice of service users is heard on service development and improvement to meet both need and expectations.

A survey was jointly developed to capture the views and experiences of current and past (within the last two years) service users and carers living in Northamptonshire.

## Method

### Survey development

Survey questions were designed together with NASS to ask people about their experiences of contacting NASS and obtaining the right care (see Appendix for survey questions).

### Survey distribution

The survey was produced in paper and electronic (online) formats and a Freepost address was given to enable paper surveys to be returned to Healthwatch Northamptonshire free of charge.

The survey was shared by NASS and Healthwatch Northamptonshire as follows:

- NASS/Northamptonshire County Council (NCC) communication channels:
  - NASS Central Business Support Team and NCC Customer Service Centre to promote and share the survey whenever a customer contacted them by phone
  - Published on the NCC Consultation website
  - Advertised on the NASS website landing page
  - Shared with all Olympus Care Service teams to be distributed by email to their customer base

<sup>2</sup> Supporting Adults in Northamptonshire - Our Northamptonshire Adult Social Services Strategy 2019-22 (draft discussion document), [www3.northamptonshire.gov.uk/councilservices/adult-social-care/policies/PublishingImages/Pages/strategies/NASS%20Strategy%202019-22%20%28PDF%201.06MB%29.pdf](http://www3.northamptonshire.gov.uk/councilservices/adult-social-care/policies/PublishingImages/Pages/strategies/NASS%20Strategy%202019-22%20%28PDF%201.06MB%29.pdf)

<sup>3</sup> Northampton Health and Care Partnership, [www.northamptonshirehcp.co.uk](http://www.northamptonshirehcp.co.uk)



- A joint press release was issued
- Healthwatch Northamptonshire website and newsletter
- Healthwatch Northamptonshire volunteers
- Partner organisations were asked to share the survey with their service users and circulation lists, including Northamptonshire Carers, Carers Voice, Age UK Northamptonshire, Mind, CAB, Total Voice Northamptonshire, Nene Valley Community Action
- The online survey was posted on Healthwatch Northamptonshire and NCC social media and shared widely, including by:
  - Northampton General Hospital
  - Age UK Northamptonshire
  - Northamptonshire Association for the Blind
  - Kettering Mind
  - Northamptonshire Healthcare NHS Foundation Trust
  - Northamptonshire Health and Care Partnership
  - Northampton Partnership Homes
  - Macmillan Wellingborough
  - Northampton Events
  - NHS Corby Clinical Commissioning Group
  - Singing4Breathing
  - Northamptonshire Federation of Disability Sport
  - Northamptonshire Sport
  - Daventry District Council
  - Kettering Borough Council
  - Wellingborough Council
  - Workbridge
  - Corby Radio
  - Autism East Midlands
  - Ability Community Transport
  - Northampton Breast Friends
  - Lakeside Healthcare Corby

Social media posts were seen between 4,000 and 5,000 times on both Facebook and Twitter, resulting directly in 45 clicks on the survey link.

## Data analysis

Survey data was looked at overall and broken down by current and past recipient of care and service users and carers to looks for any differences between groups.

Quantitative survey data percentages are given out of those who answered a question.  
Qualitative data and comments have been coded and themed.

## Limitations

The survey was not sent to all service users by post as it was felt that the other avenues of making the survey available were sufficient.



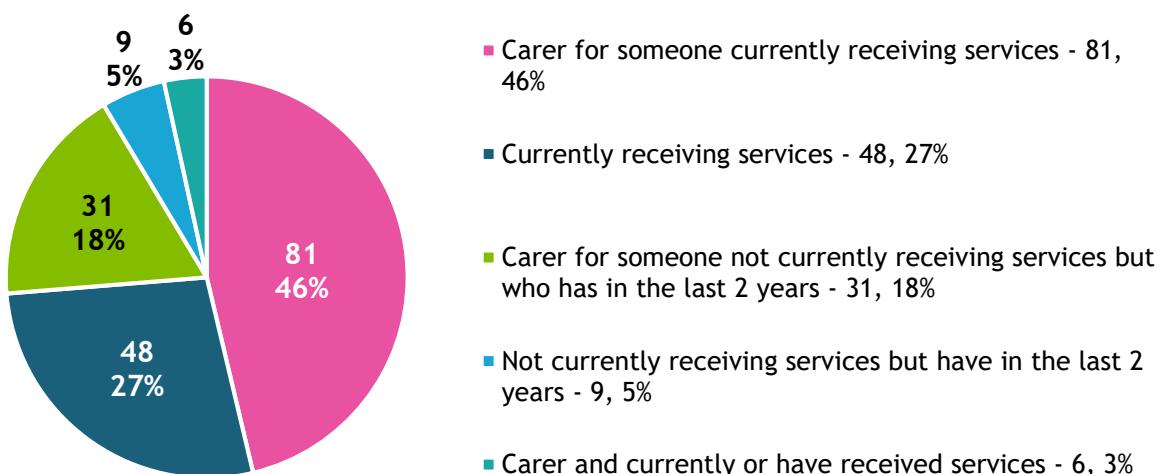
## What people told us

- We received 186 survey responses between mid-September and the end of October. Ten people were not current or previous service users or carers in Northamptonshire and a further 54 only answered the first question (whether they were receiving care or a carer, etc.), leaving 122 people who responded to the rest of the survey.
- All figures given are percentages of the answers received for each question, unless otherwise specified.
- Demographic questions were optional and asked of the person completing the survey (which would be the carer rather than the service user for some categories).

### Demographics

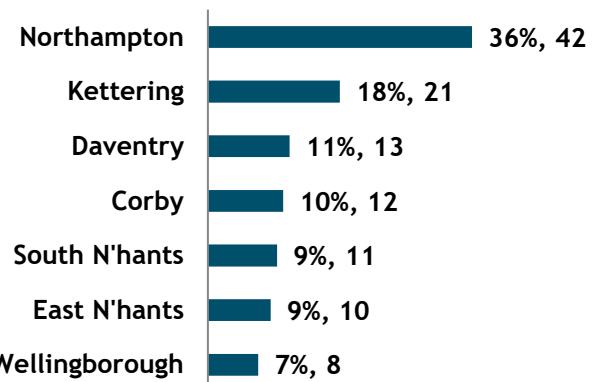
#### Type of respondent

Three-quarters (74%, 129 of 175) of eligible respondents were either currently receiving Adult Social Care services (27%, 48 of 175) or a carer for someone who was (46%, 81 of 175). A further four people were themselves receiving Adult Social Care services (four) or had done previously (two) and were also a carer for someone else. Less than one-quarter (23%) had received care within the last two years, or cared for someone who had, but were not currently.



#### District

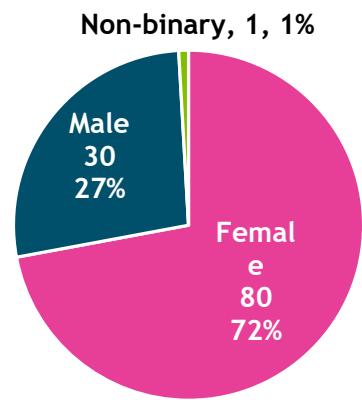
Responses were received from across the county, with just over one-third of respondents (36%, 42 of 117) living in Northampton.





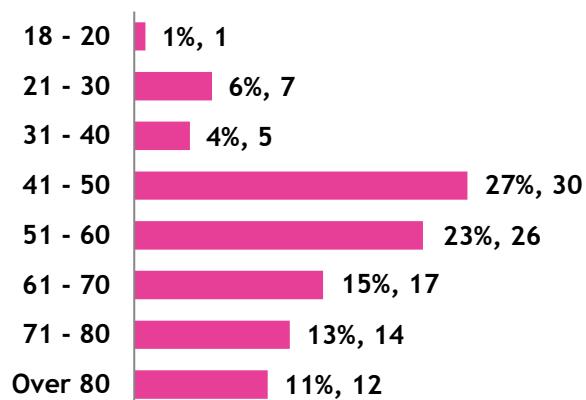
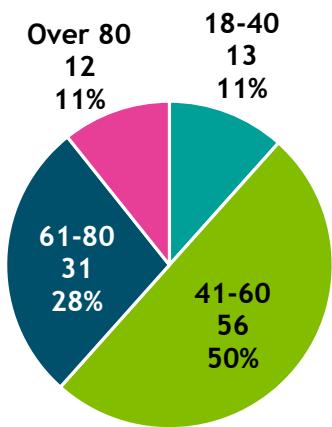
## Gender

Over two-thirds of people who responded (72%, 80 of 111) were female. One person said that this was not the gender they were assigned at birth.



## Age

Half the respondents (50%, 56 of 112) were between the ages of 41 and 60.



## Disability

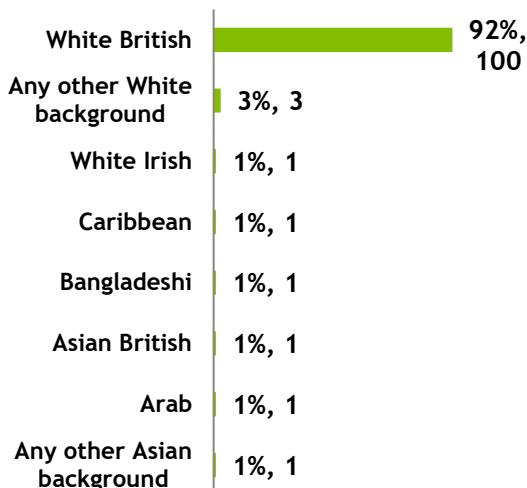
More respondents (61%, 65 of 106) said they had a disability than those who did not (39%, 41 of 106). More details were given by 28 people: 22 had a physical disability, eight a learning disability and four a mental health disability (some were categorised more than once).

## Sexual orientation

98% of those who answered (87 of 89) said they were heterosexual, 21 preferred not to say.

## Ethnicity

92% of those who answered were White British.

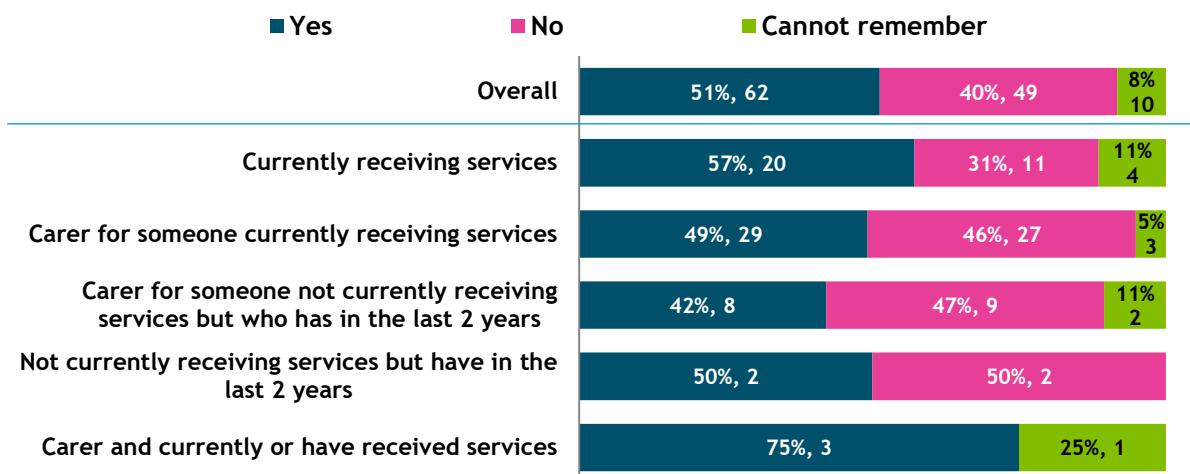




## First contacting social care services

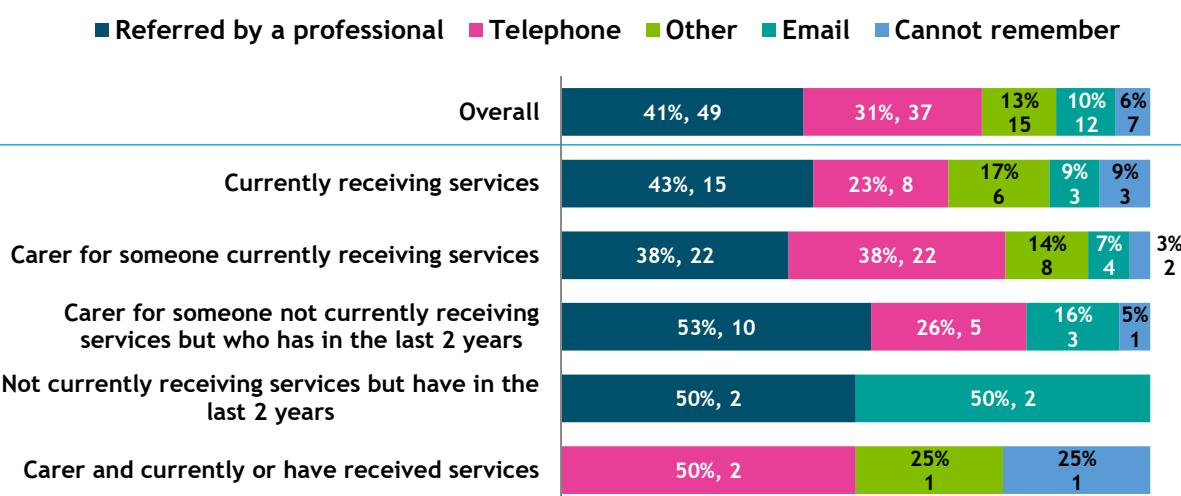
### Knowing how to contact

Only half of those who answered (51%, 62 of 121) had known how to contact NCC about social care services when they first needed them. Slightly more of those currently receiving services knew how to (57%, 20 of 35)<sup>4</sup>.



### Route first contacted

Most people had first contacted NCC about social care services by being referred by a professional (41%, 49 of 120) or by telephone (31%, 37 of 120). First making contact by telephone was slightly more common for carers of someone currently receiving services (38%, 22 of 58)<sup>4</sup>. Most of the other 15 ways of making contact involved professionals, such as a school, parent support worker, through safeguarding, hospital discharge and a GP. Two people mentioned a family member helping them, two had used the website to find out more or self-refer, one person a letter and one person “turned up at their office in tears”. One person said they could not phone because they are deaf.

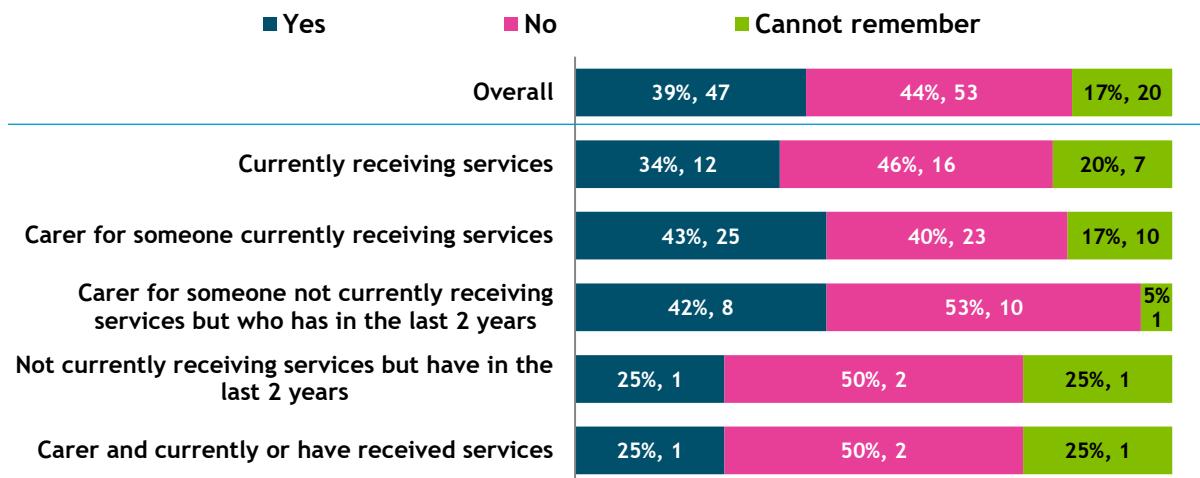


<sup>4</sup> However, there was no statistically significant difference between those currently receiving services and carers of those currently receiving services, Chi-Square test.



## Difficulties contacting

Some people (39%, 47 of 120) said they had difficulty contacting NCC about social care services, whereas others (44%, 53 of 120) did not. Slightly more carers (43%, 25 of 58) reported having difficulty than people receiving care (34%, 12 of 35)<sup>5</sup>.



Those who had difficulty were asked to give more details, which 46 people did. Eleven people commented on how they felt passed around and/or that it was difficult to contact the right people, for example:

**“Was passed from one person to the other, was told that someone would ring me back, but no one did.” - Carer for someone currently receiving services**

**“I was passed from department to department as it was about a young person soon to be turning 18. No department wanted them.” - Carer for someone else and personally receiving services**

**“I got bounced around lots of teams with no one wanting to accept the referral.” - Carer for someone currently receiving services**

**“Passed around from pillar to post by various people. I had a severe problem which was only sorted out by a friend who knew the head of social services and gave me their email. Once I sent an email it was very quickly sorted out, BUT this should not have been the situation, people should do their jobs properly in social care services.” - Not currently receiving services but have in the last two years**

**“I was moved between social care workers without being told this, and my current worker told me that she is moving to another team and has not told me who I should contact in the future.” - Currently receiving services**

**“Seemed to be pushed from pillar to post. My Mother was coming to live with us, and the general response was we can do nothing until she arrives, yet she needed support immediately. I was lucky to get one man who offered to put her on the register so that when she arrived, I could initiate contact immediately. I do appreciate there is a large proportion of the population that is elderly, and the services are strained and to a degree need protecting. I was reasonably well informed but others less confident would have been totally deterred from persisting.” - Carer for someone currently receiving services**

<sup>5</sup> However, there was no statistically significant difference between those currently receiving services and carers of those currently receiving services, Chi-Square test.



A further nine people found the process of contacting NCC difficult, confusing or time consuming and eleven people mentioned a lack of response or a slow response, for example:

“Found it very difficult and time consuming, there doesn’t appear to be any comprehensive or extensive info on the sort of Social Care I was looking for.” - *Carer for someone currently receiving services*

“I found very difficult to find the right person able to deal with my case.” - *Carer for someone currently receiving services*

“It took me time to find out who I should be communicating with, and I work in NCC ... Once I found the right person, they have been really helpful. I still don’t understand what the various departments do though.” - *Carer for someone currently receiving services*

“I could never get hold of the right team or person, so it meant taking up a lot of my time to keep trying.” - *Carer for someone currently receiving services*

“When we were referred by the CATT team [Crisis Assessment and Treatment Team] we were under the impression to NCC. That was not the case, we had to contact them [directly] in my son’s case, and probably many others it was valuable time wasted.” - *Carer for someone currently receiving services*

“The response time is terrible. Referral made and not responded to despite chasing twice for nearly a year.” - *Carer for someone currently receiving services*

“They took a long time to attend to the reported need. Over three weeks and then they asked for further information. Since it was an emergency this was not helpful, and the situation had deteriorated greatly before they acted. The police got involved first.” - *Carer for someone not currently receiving services but have in the last two years*

“Didn’t call me back or ask what I needed help with.” - *Carer for someone not currently receiving services but have in the last two years*

“Phoned too many times regarding respite and who is our social worker. Virtually the whole of this year and still have not received a return call!” - *Carer for someone currently receiving services*

Six people mentioned difficulty with the call centre and would have liked a way to make direct contact with a worker and another six mentioned needing accessible information. Two people would have liked to have a named contact and one felt discriminated against. For example,

“Yes, getting through to the call centre who then direct your query to the appropriate person, then you wait for a phone call. If you miss this call, say driving or otherwise engaged, there is no number for you to ring back, so it gets frustrating being unable to speak or email directly.” - *Carer for someone currently receiving services*

“Call centres does not seem to know the procedure for young adults.” - *Carer for someone currently receiving services*

“No sign language support or easy language explaining plus staff were not deaf aware.” - *Currently receiving services*

“There should be a lot more easy read information.” - *Currently receiving services*

“Have to fill in a form, not an easy way.” - *Carer for someone not currently receiving services but have in the last two years*

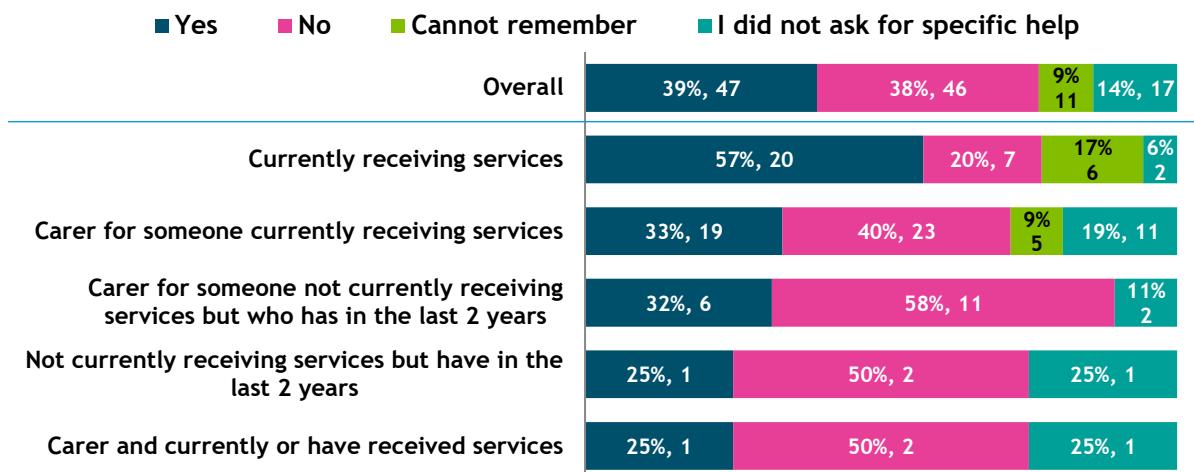
“I need staff support to help me do this should I require.” - *Currently receiving services*



## Help and support received

### Getting the help asked for when first contacting

Experiences were mixed, with the number of people saying they got the help they asked for (39%, 47 of 121) almost the same as those who did not (38%, 46 of 121). More people currently receiving services (57%, 20 of 35) had got the help they asked for than carers (33%, 19 of 58)<sup>6</sup>.



Those who did not get the help they asked for were asked to give more details, which 44 people did. Fourteen people mentioned having to wait to receive help, for example:

“The wait is too long so it was months before I was assessed.” - *Carer for someone currently receiving services*

“Put on waiting list for home assessment. While waiting for months my father had a fall and ended up in hospital for two weeks.” - *Carer for someone not currently receiving services but have in the last two years*

“After five years and a few complaints from me and other professionals I’m still waiting for the right support and the ombudsman to look at the current complaint. Care assessments, care plans and eligibility that should have been adhered to was ignored or took too long. Been waiting for a care plan for over a year.” - *Carer for someone currently receiving services*

“My assets were dropped below the amount at which I could pay for a care home place. It took many months for the council to respond and reach a decision. This left us very anxious about the future.” - *Currently receiving services*

Eight people felt they had not received appropriate or sufficient care, for example:

“No local overnight respite available, shortage of day centre options.” - *Carer for someone currently receiving services*

“Was told that personal care was not provided.” - *Carer for someone not currently receiving services but have in the last two years*

“Needs misunderstood.” - *Carer for someone not currently receiving services but have in the last two years*

<sup>6</sup> Statistically significant difference between those currently receiving services and carers of those currently receiving services, Chi-Square test P<0.05.



“We had been caring for several months for our mother... we struggled to meet her needs 24 hours a day, we requested a visit from Adult Services but the package offered was not sufficient, our relative needed overnight care which was not available. Whilst the social worker was sympathetic, she advised us that the only other option was a care home, this suggestion hit us like a ton of bricks. We looked at the option of moving her in with me, but we needed things putting in place first such as a stair lift but we were told assessments for funding could only be done AFTER she moved in. We were put in an impossible situation - she couldn't move in unless we had a stairlift fitted first plus other mobility aids were needed, despite it being obvious we were told bluntly that she had to be resident at the address before any assessments could be done.” - *Carer for someone currently receiving services*

“My adult sons have autism and we have received no support other than the same form filling and negative response every time. No services available to suit our needs or we do not fall into a category, we are managing too well, if this was the case why did we ring for help every other year for the last nearly 20 years?” - *Carer for someone not currently receiving services but have in the last two years*

Six people again mentioned being passed around between people or department and two issues with transitioning between services, for example:

“I was told Adult services were too busy and was offered no other suggestions other than a phone number they gave me which was a number in WALES....unhelpful staff using jargon I did not understand let alone my elderly relative.” - *Carer for someone currently receiving services*

“Passed between people and didn’t know what had happened or where we were in the queue for an assessment.” - *Carer for someone currently receiving services*

“Appointments were made but were cancelled by Social Services. Then when they were arranged, I never saw the person again and had to start the process again.” - *Currently receiving services*

“No - I was passed from department to department as it was about a young person soon to be turning 18. No department wanted them. I emailed for months ahead of them turning 18 with serious concerns (homelessness and serious mental health issues) but NCC only got involved in the final hours before they turned 18.” - *Carer for someone else and personally receiving services*

Four people mentioned issues to do with members of staff and four how they had to fight to get help or needed the support of others, for example:

“They started to bully and exploit [the] situation when they knew about [my] mental health.” - *Carer for someone not currently receiving services but have in the last two years*

“Six-week care package [was] stopped after 24 hours of discharge. Please don’t be mistaken that the care package was not needed because it was, but that did not seem to be of significance. The staff that did attend spoke to my mother condescendingly and as if she was deaf and stupid, which she is neither of.” - *Carer for someone not currently receiving services but have in the last two years*

“Had to take to ombudsman to overrule council’s decisions.” - *Currently receiving services*

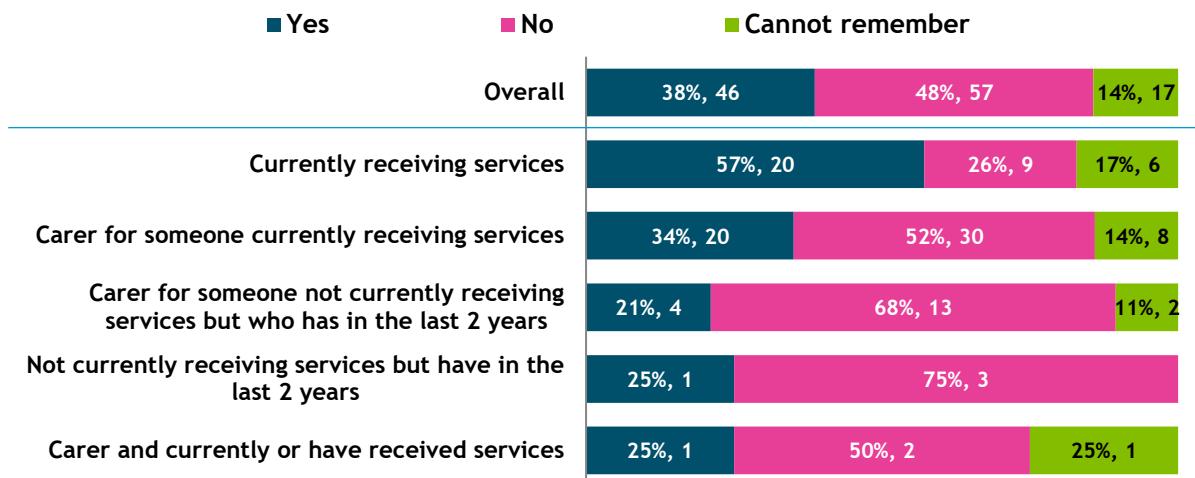
“With support from family and professionals.” - *Currently receiving services*

Five people mentioned having a mixed experience.



## Time taken to receive help

More people, nearly half (48%, 57 of 120), felt that NCC did not help them in a reasonable amount of time than those who did (38%, 46 of 120). Those currently receiving services (57%, 20 of 35) were more satisfied with the amount of time taken than carers (34%, 20 of 58)<sup>7</sup>.



Those who did not feel the time it took to receive help was reasonable were asked to give more details, which 55 people did. Twenty-nine said it had taken too long, with most mentioning it taking months to get help and a few giving reasons why, for example:

“Because you have to go through the help desk you are given a reference number and sometimes it takes too long for them to reply when you are worried about an elderly relative. Also, every time you speak to someone because it is not the same person you have to go through the whole story again.” - *Carer for someone currently receiving services*

“They took a long time to put funds in place so that I could get the care I needed. Luckily, I have a husband who at that time could care for me. I find that this is still happening.” - *Currently receiving services*

“I am still waiting for my mother to be assigned a social worker. Approximately two months.” - *Carer for someone currently receiving services*

“Assessments take far too long, specialised services not always available or close by.” - *Carer for someone currently receiving services*

“Waiting six days for safeguarding concerns.” - *Carer for someone currently receiving services*

“Still currently ongoing and it's been nearly six months. Again, no help given, just left to sort yourself.” - *Carer for someone currently receiving services*

“Took months. Got held up in between brokerage and day service provider.” - *Carer for someone currently receiving services*

“The process of getting support is so drawn out. As someone new to the system I had no idea of the process so could not prepare information and documentation needed. A guide to how the system works would be useful for families. Every stage of the process seemed to take forever just to organise and no two parts could run concurrently which protracted things further.” - *Carer for someone not currently receiving services but have in the last two years*

<sup>7</sup> Statistically significant difference between those currently receiving services and carers of those currently receiving services, Chi-Square test P<0.05.



“It has taken approximately six years for social care to understand and review my care needs and assign a social worker who was consistent.” - *Currently receiving services*

“I had to ask someone to complain on my behalf. People need help when they apply, not in over six months’ time. When you call to ask when you’ll be seen, you just get fobbed off all the time and told you’ve not been allocated yet.” - *Carer for someone currently receiving services*

Others again mentioned how it had been difficult to get help from the right people/department (six) or issues with staffing or dealing with consistent people (five), for example:

“It took a lot of phone calls to find the right person to help us.” - *Carer for someone currently receiving services*

“Constantly putting us off. Wouldn’t entertain us until my daughter actually went into adult services.” - *Carer for someone currently receiving services*

“I had to ask my MP to get involved before my problem was dealt with. The social worker who came out then disappeared for two months, despite me telling her how urgent our situation was.” - *Carer for someone currently receiving services*

“I have a rare progressive condition, which is getting much worse, but no social worker has kept me on the books, as soon as the package is complete they dump you.” - *Currently receiving services*

“My daughter lost her social worker, who suddenly left, she was not replaced and my daughter had no one. She was left hanging, meanwhile her situation worsened and I had to chase help for her. After continuing to chase, we did get a social worker appointed.” - *Carer for someone currently receiving services*

“Short staffing meant people were not free to help.” - *Carer for someone not currently receiving services but have in the last two years*

Four people felt that NCC were not helpful or were disorganised, two again highlighted issues with transition to adult services (see above), two made a complaint or appealed the decision (see above) and two had a mixed experience. Two gave more detailed examples of delays:

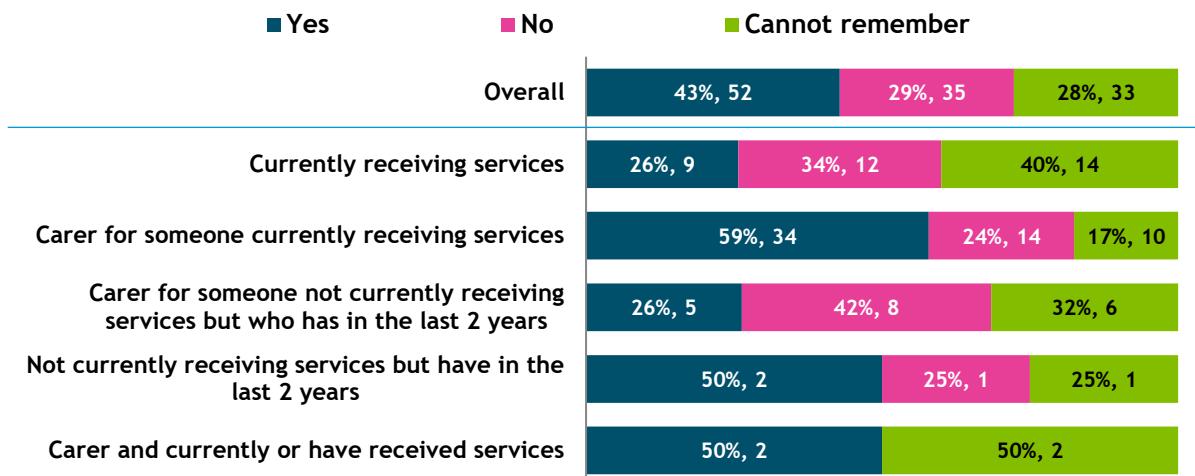
“A hospital bed was eventually provided that was far too small... The trouble it took and the stress associated with getting a bed was ridiculous...” - *Not currently receiving services but have in the last two years*

“Staff are too busy, it’s obvious that they really care and are working extremely hard but they are having to prioritise urgent cases. My mum’s case became urgent and is now dealt with more quickly but the situation wouldn’t have become urgent and high priority if we could have been listened to properly earlier on. The other issue that is not happening quickly are the financial changes - fortunately my mum is able to pay for her own care while the NCC team sort the direct payment out.” - *Carer for someone currently receiving services*



## Access to other support

43% of people (52 of 120) said there were other things that they wanted from social care that they were told were not available or that they could not have, with more carers (59%, 34 of 58) saying this was the case than people currently receiving services (26%, 9 of 35)<sup>8</sup>.



More details of what else was needed or wanted were given by 50 people. Specific services were mentioned by 14 people, including physiotherapy or occupational therapy (two), equipment (two), support with accommodation (two), help with house tidying and/or personal care (two), help with finances (two), transport (two), help with social isolation, health screening, British Sign Language support, better day care centres and access to the Shared Lives scheme<sup>9</sup>. A further eight people wanted respite care. For example:

**“Supported accommodation which was recommended for me by adult social care, but I was later told I was not eligible.” - *Currently receiving services***

**“No resource provided to do paperwork for my mum who can’t move her hands herself to do it, personal financial paperwork shouldn’t be done by family - its private. No resource provided to clear out fridge of mouldy food - told it’s a family responsibility but my mum lives alone independently. Her shopping is done for her, and put into her fridge, her bins are put out for her by carers, so why is moving the food from the fridge to the bin somehow different? The parts that can be on a care plan and the parts that can’t should perhaps be open to wider scrutiny and transparency to make sure they make sense.” - *Carer for someone currently receiving services***

**“Day service providers are poor and not enough for specific needs.” - *Carer for someone currently receiving services***

**“I had asked for my daughter to be referred to Shared Lives. She was turned down for this without anyone from this service even meeting her.” - *Carer for someone currently receiving services***

**“Access to respite care, not made available to us and yet I understand mum is entitled to six weeks respite.” - *Carer for someone currently receiving services***

<sup>8</sup> Statistically significant difference between those currently receiving services and carers of those currently receiving services, Chi-Square test P<0.01.

<sup>9</sup> A scheme that provides adults, who have a range of needs, with full-time and personalised support within the homes of professional carers - [www3.northamptonshire.gov.uk/councilservices/adult-social-care/northamptonshire-shared-lives/Pages/what-is-northamptonshire-shared-lives.aspx](http://www3.northamptonshire.gov.uk/councilservices/adult-social-care/northamptonshire-shared-lives/Pages/what-is-northamptonshire-shared-lives.aspx)



“We have recently experienced respite care being closed and being told that only one other facility for respite care for [relative’s name] was available in the whole of Northamptonshire.” - *Carer for someone currently receiving services*

“Respite care, mum has severe mental health problems and we wanted respite but was told that our local centre could be guaranteed, if she isn’t locally where I can visit her she is likely to have a relapse or further episode of psychosis.” - *Carer for someone currently receiving services*

Nine people wanted more or longer care, and eight did not know or were not told what was available, or mentioned other examples of poor communication or feeling unsupported, for example:

“We cannot have care unless we pay for it as we were responsible and saved a modest amount for our later lives... I now have crushed discs in my neck from trying to heave my husband up and how much longer I can carry on I do not know, then who is going to help him? Not social services.” - *Not currently receiving services but have in the last two years*

“You keep support to the minimum and provide the very basic of services ... even though as Carers we save you millions.” - *Carer for someone currently receiving services*

“Any services at all, we were trying to get help with behavioural and independent living support but denied...” - *Carer for someone not currently receiving services but have in the last two years*

“Totally in the dark about what was available and what was not.” - *Carer for someone not currently receiving services but have in the last two years*

“Was not told about where I could get support as a carer. Was not directed to Age UK about other services they could provide.” - *Carer for someone currently receiving services*

“Yes, if we hadn’t read up on the law in the Health and Social Care Act and The Care Act, we wouldn’t have known that NCC were lying about eligibility and entitlement.” - *Carer for someone currently receiving services*

“I had to ask the questions.” - *Carer for someone else and have personally received services in the last two years*

“We were not told that if we wanted to move our relative nearer family, basically would have to do it ourselves. Very poor communication and no empathy from the professionals.” - *Carer for someone currently receiving services*

“When you finally get an allocated social worker, they don’t answer the phone and if you leave a message they never call back. Waste of time and I felt totally alone and uncared about.” - *Carer for someone currently receiving services*

Five other people felt their needs were not acted on or their care was changed, and five wanted a review of their care or assessment, for example:

“Initially we were told that my daughter could not have help in a certain area. After doing some personal research I realised that that was not true. Our newly appointed social worker has started doing some work around this issue, which we are relieved about.” - *Carer for someone currently receiving services*

“My son was told they would not support him to appointments. They have since changed that but we still do not know to what extent we can get support.” - *Carer for someone currently receiving services*



"My mother of over ninety was discharged from Kettering General Hospital with a fractured pelvis and should have had a care package for six weeks, this was a condition of her discharge after fracturing her hip two days previous. This care package was stopped the following afternoon of her discharge. On another occasion when she had a fall and was admitted, there was an attempt to discharge her to a care home out of her locality without any consultation with her family. On inspection of the home she was being placed in (I would not put a dog in there), it took a threat of legal action for this to be prevented." - *Carer for someone not currently receiving services but have in the last two years*

"A review of my needs - as it was felt I did not need one, but once I had a consistent person they did not believe my care had not been reviewed annually, which it hadn't." - *Currently receiving services*

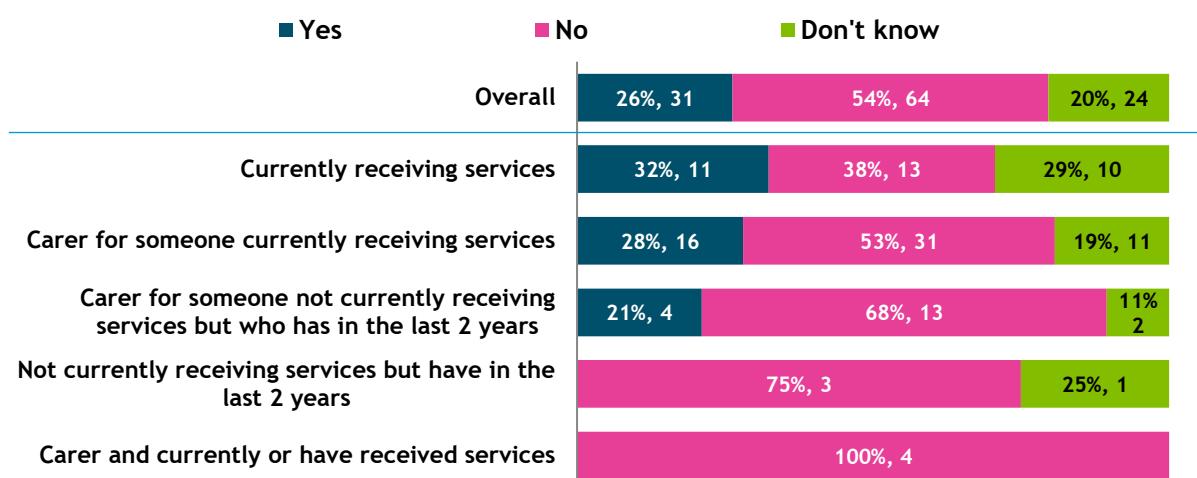
"I wanted an assessment so that I knew what care to pay for. Told the carers would do this but they asked us what care was needed. How did we know? So we had to guess and then keep adding things." - *Carer for someone not currently receiving services but have in the last two years*

"Person centred planning, care plan and thinking out of the box when meeting objectives when using direct budget." - *Carer for someone currently receiving services*

One person wanted direct payments as a carer (which were not possible), one wanted consistency and one was concerned about cuts to services, which caused stress.

### Care package reviews

Over half (54%, 64 of 119) did not feel they had regular reviews of their care package. This was the case for slightly more carers (53%, 31 of 58) than those currently receiving services (38%, 13 of 34)<sup>10</sup>.



More details were given by 41 people (including one person who said this was not applicable to them). Twelve people told us they had not had a review and six that they had requested one, for example:

"I was meant to have a review but never had one from care management." - *Currently receiving services*

<sup>10</sup> However, there was no statistically significant difference between those currently receiving services and carers of those currently receiving services, Chi-Square test.



“My daughter does not have a dedicated care manager we never have reviews.” - *Carer for someone currently receiving services*

“At least six years with the same amount of hours and one PA without a review, despite professional and consultant letters being forwarded highlighting my deterioration.” - *Currently receiving services*

“As far as I know there is no reviews. It is just reviewed when you contacted NCC if you need something else regarding care.” - *Carer for someone currently receiving services*

“If I waited for them to do a yearly review I would still be waiting. I have had to phone and wait for a social worker to be allocated every time I need help.” - *Currently receiving services*

“The social worker had to be reminded of the due dates and repeatedly chased up to agree a time and place.” - *Carer for someone currently receiving services*

“I insisted and it has made a difference, Mum’s initial assessment did not begin to cover her needs.” - *Carer for someone currently receiving services*

“Not unless you ask and then you wait ages or get no reply.” - *Carer for someone currently receiving services*

Five people talked about their care changing without having a review, for example:

“Things were changed without giving due notice allowing for the fact that the person I was caring for was elderly and they needed time to understand what was going on. They became frightened.” - *Carer for someone not currently receiving services but have in the last two years*

“One every year in the past three years, however the last one was falsely called a review when the client was unknown to social worker and cuts were proposed before discussing need.” - *Carer for someone currently receiving services*

“This has been hit and miss over the years. We often experienced care being withdrawn without consultation and then being expected to except whatever’s offered. However, those at the ‘coal face’ so to speak have always tried to help [relative’s name] to settle wherever she has been placed.” - *Carer for someone currently receiving services*

Three people gave positive feedback (although one would still like reviews more often) and three had mixed experiences, for example:

“From the first instance of contacting NASS I have had excellent advice and assistance from [specific person].” - *Currently receiving services*

“Do now as we finally have an amazing care manager! [Name] is worth her weight in gold.” - *Carer for someone currently receiving services*

“These appear to be ever year unless there is a problem it would be good to have them quarterly, so you don’t feel alone.” - *Carer for someone currently receiving services*

“After seeing a case worker at the beginning of the year it was finally implemented in June, one later I had a review of my package and it had only been one or two weeks.” - *Currently receiving services*

Five others commented about specific situations, for example:

“We as carers were not informed of my grandfather’s care as he was deemed to have mental capacity. Despite having memory issues, confusion.” - *Carer for someone currently receiving services*

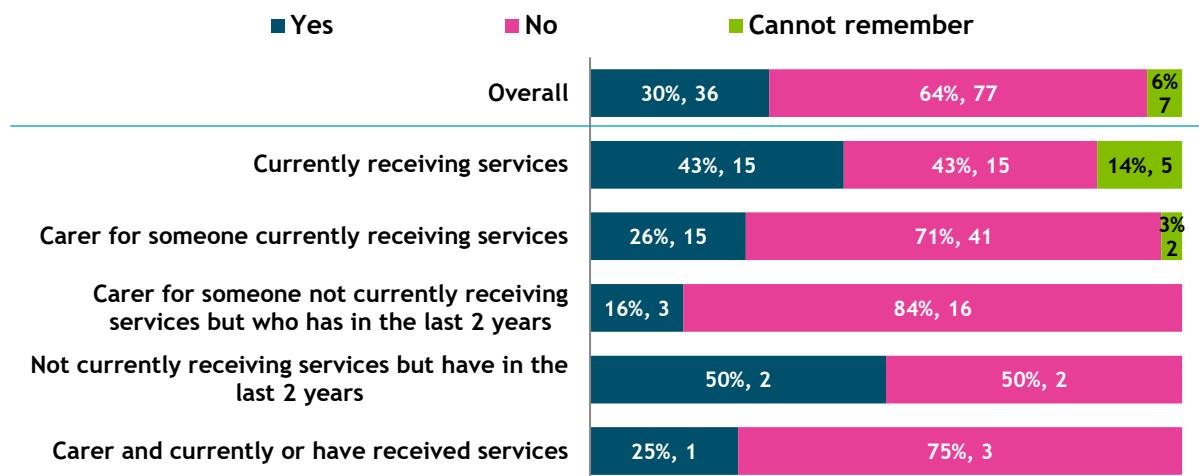


**"Feel their mind was made up and would not listen to family concerns." - Carer for someone currently receiving services**

## Knowledge of process

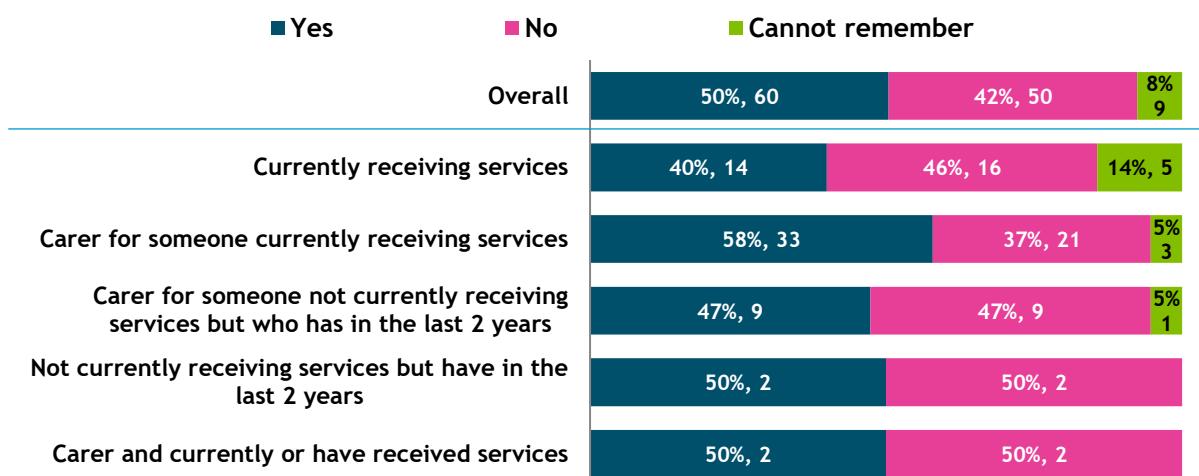
### Awareness with of what was happening

Almost two-thirds of people (64%, 77 of 120) were not always aware of what was happening with their request or who was supporting them. This was especially the case for carers (71%, 41 of 58) compared to people receiving services (43%, 15 or 35)<sup>11</sup>.



### Knowing the social care worker's name

Half of people (50%, 60 of 119) knew, or had known, the name of their social care worker/s.

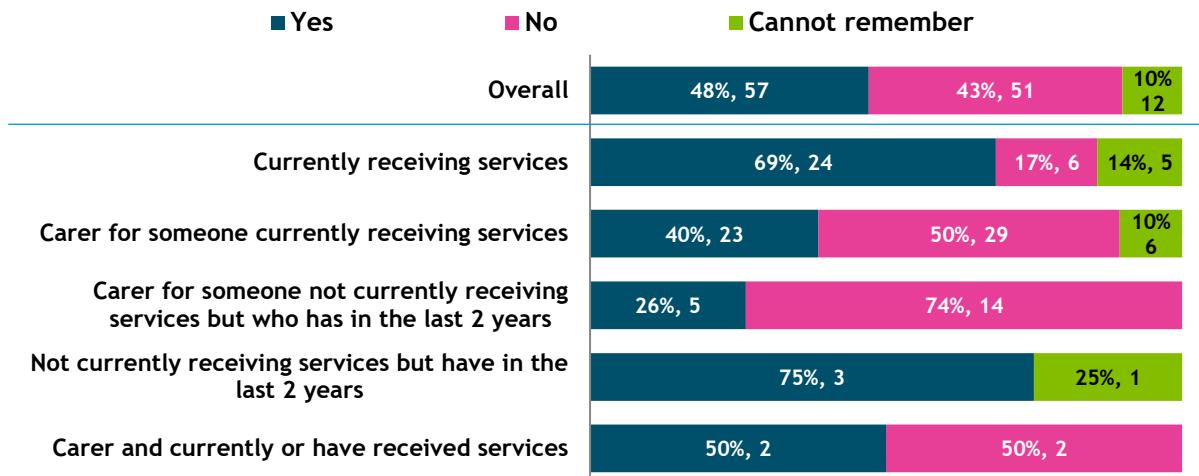


<sup>11</sup> Statistically significant difference between those currently receiving services and carers of those currently receiving services, Chi-Square test P<0.05.



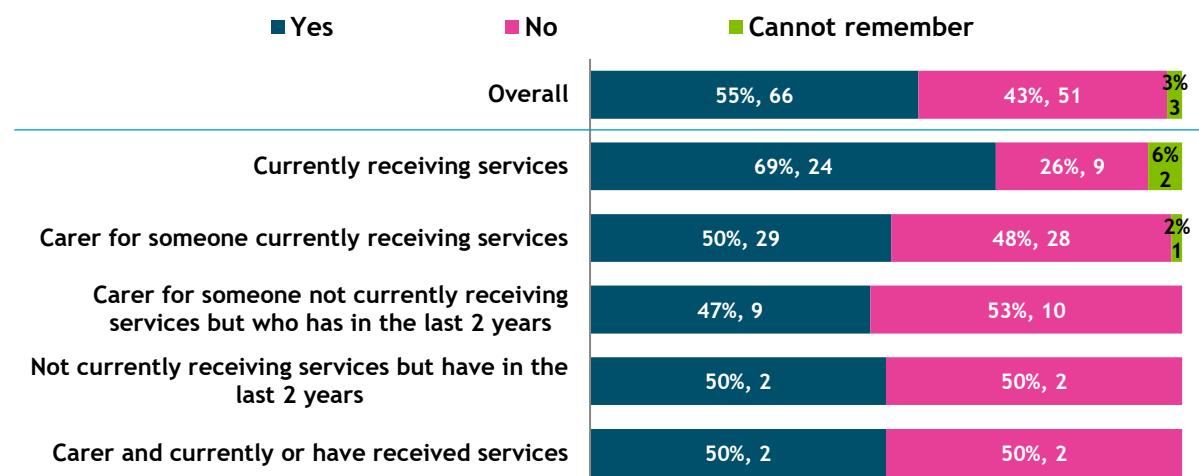
## Explanation of care

There was again a mixed response. Just under half (48%, 57 of 120) said that everything about their care was explained clearly to them. This was the case for more people currently receiving services (69%, 24 of 35) than carers (40%, 23 of 58)<sup>12</sup>.



## Knowing who to contact for further help

Just over half of people (55%, 66 of 120) knew, or had known, who to contact if they needed or wanted further help. This was higher amongst those currently receiving services (69%, 24 of 35) than carers (50%, 29 of 58)<sup>13</sup>.



<sup>12</sup> Statistically significant difference between those currently receiving services and carers of those currently receiving services, Chi-Square test P<0.01.

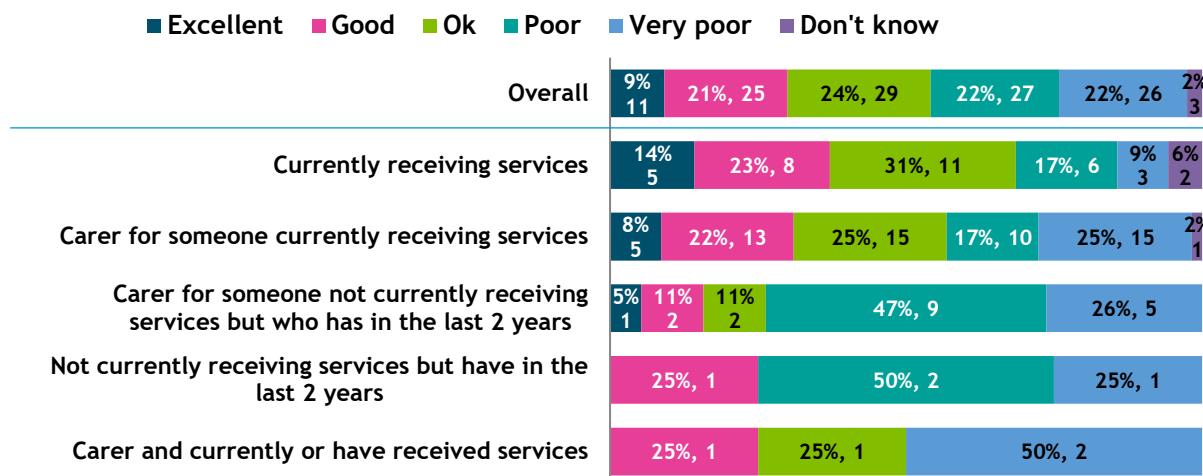
<sup>13</sup> However, there was no statistically significant difference between those currently receiving services and carers of those currently receiving services, Chi-Square test.



## Overall satisfaction and other comments

### Rating of support

People's overall satisfaction with the support they had received from NCC adult social care was mixed. 30% (36 of 121) rated their care as Excellent (9%, 11 of 121) or Good (21%, 25 of 121), whereas 44% (53 of 121) rated it as Very poor (22%, 26 of 121) or Poor (22%, 27 of 121). The ratings were similar for people currently receiving services and carers of those currently receiving services, except more carers rated the care as Very poor (26%, 15 of 58).



### Other comments

When asked if there was anything else people wanted to tell us about the social care services they, or the person they care for, received, 68 people commented.

#### *Good care*

Twelve people highlighted aspects of good care, for example:

“I have found that the service you provide for older persons care services has been very good considering the financial troubles you have to work with.” - *Carer for someone currently receiving services*

“Olympus care both for home care and day services are excellent, as they are very well trained.” - *Currently receiving services*

“My daughter’s care package was agreed years ago, whilst we have not had any reviews we are happy with the provision she has and do not want any changes.” - *Carer for someone currently receiving services*

“We had lots of contact from [name] at first, which was very helpful. When home care was needed it happened. The patient’s care manager was superb. Helped them get assessed and given a care home. Thank you.” - *Currently receiving services*

“I have a good experience, but most families don’t. I know my daughter’s legal rights so am able to be very clear advocate for my daughter needs.” - *Carer for someone currently receiving services*

#### *Poor communication and lack of information*

Issues to do with communication or information were highlighted by 17 people, including not being contacted or having to chase people (four), confusion about which professional/department/service does what (four), not having enough information (three), not



having a dedicated person to contact (two), poor internal communication (two), a lack of accessible information (one) and not being told about changes (one), for example:

“The arrangements and responsibilities of various professionals are very confusing and it’s not clear exactly what the care package is meant to be covering, it’s not clear who is meant to be making decisions on how many carers are needed - is it the OT, the care managers, is a GP involved?” - *Carer for someone currently receiving services*

“Not having a dedicated person to speak to. Use to have contact, no longer able to. Only a team. Sometimes very difficult to get through. NCC needs to help with respite info.” - *Currently receiving services*

“The communication between the departments in NCC were difficult between finance who were sending out bills, the assessment team to do the financial assessment and the actual assessment of care package. There seemed to be non-existent communication between the different parts of the organisation. It meant you received a visit from NCC, told the story and then another bit of correspondence came through at odds with the conversation had in the home.” - *Carer for someone not currently receiving services but have in the last two years*

“The relationship with health and meeting Mum’s health needs took six months to organise.” - *Carer for someone currently receiving services*

“Generally ok but communication is poor, my child is non-verbal and I struggle with day to day information, what she needs, is doing, etc.” - *Carer for someone currently receiving services*

“Need more access for deaf community - BSL videos or interpreters. I’m fed up explaining over and over.” - *Currently receiving services*

#### *Treatment by professionals or a lack of staff*

Eleven people mentioned negative experiences or views of how professionals treated them, staff culture, or a lack of staff, for example:

“NCC’s Mental Health long term team have not shown any improvement, or willingness to improve, since the first assessment in 2012. They have a can’t/won’t/don’t culture that is apparent from the frontline social workers, all the way up to the Director of Adult Social Services... This undermines my cared-for’s health and wellbeing day-in, day-out and has ruined my life and our relationship.” - *Carer for someone currently receiving services*

“[Name] is not happy with the carers and would like to change please. I’ve rung several times but to no avail so far. Although [name] had a stroke his brain is still working well and knows exactly what he wants. Hoping to have a result soon.” - *Currently receiving services*

“Purely that there are not enough people to do the work, and those who are working are overworked and rushed.” - *Carer for someone not currently receiving services but have in the last two years*

“I believe the service has lost empathy, compassion and care. You are treating elderly, frail and the most vulnerable PEOPLE, as problems and not human beings. Your staff are poorly trained and have little insight to the distress their actions cause service users and their families, there is a total lack of respect for the people that they are supposed to be helping. This is hidden under the guise of budget restraints.” - *Carer for someone not currently receiving services but have in the last two years*

“Helpful for many years until very recently when appalled at the social worker’s attitude towards us and her bullying intimidating technique.” - *Carer for someone currently receiving services*



**"The social services need a good overhaul. The standard of the social workers is poor. My last review was partly wrong and took ages to correct."** - *Currently receiving services*

#### *Not getting the care or support needed*

Ten people explained how they did not get the care or support they wanted, six how they had to wait for services, and three about how their services or care had been reduced, for example:

**"In the last ten years at a review I was told I could receive help with the costs of employing a gardener and help in the home of the person I care for. This never happened. I rely more and more on family members to help with domestic chores and keeping the garden tidy. I also need them to take me and the person I care for to all appointments."** - *Carer for someone currently receiving services*

**"NCC has let this person fall through the net for the past four to five years and they are now suffering in their dysfunctional and at times unsafe family home, feeling unwanted and trapped."** - *Carer for someone currently receiving services*

**"Just extremely disappointed with the lack of support and the poor lack of professionalism to listen and feedback to concerned family. Due to lack of funds/budget we feel we are just collateral damage for a very poorly managed service."** - *Carer for someone currently receiving services*

**"Professionals act inappropriate and do not accept responsibility for their lack of basic statutory support. I have been left to support my loved one for over a year and a half now with no support even though they have eligible care needs as the social worker is waiting to find a supported accommodation before the support is in place. I keep asking why we aren't getting any support now. It has affected my physical and mental health and I have been left to deal with really serious risky situations where other professionals have completed safeguarding alerts due to their concerns. I believe my loved one is only alive because of me. We aren't included in all meetings, so our voice goes unheard. It's a right shambles but also very scary as I could be talking about a death very soon."** - *Carer for someone currently receiving services*

**"They knew my daughter was leaving education in July and would need a care package yet did not pick up the case until far too late, which has had a detrimental effect on her and the whole family."** - *Carer for someone currently receiving services*

**"Took too long to input. Didn't get help I really need, left in unsafe conditions, took personal care away and left me to rot on my own. Social Worker did not attend meetings."** - *Not currently receiving services but have in the last two years*

**"Weekly activities have reduced due to shortages of staff. Carers changing all the time, so lack of continuity, which increases anxiety."** - *Carer for someone currently receiving services*

#### *Poor process and external agencies*

Six people felt there were problems with the processes involved and three specifically mentioned issues with the quality of third-party agencies, for example:

**"It must be difficult as you are dealing with so many different people but a clear view of what is expected of your team and the patient. I just feel that with these people the window of when they feel able to engage is small and they need support to fill out forms to manage money and keep house and keep clean to make and get to appointments and to be encouraged by the progress they make. When there is a delay or no progress made that window is lost and the officials can just say they are no longer engaging and we have to start all over again. For the family it takes a lot of work to get them to agree to get help and then it can be so easily be lost."** - *Carer for someone currently receiving services*



“Relative currently in a council run care home, we have only had one review from Adult Services in five years which we requested, the home will do their own reviews, but I believe relatives and residents should have at least yearly reviews from Adult Services, we get no support whatsoever from Adult Services. Another major issue is when residents are admitted to hospital relatives have NO support from Adult Services or the care home who I understand have no obligation to take residents back. There doesn’t appear to be a set criteria with regard to discharges, sometimes they say they need to assess the resident before they can return, this creates problems for the hospital because the resident is then bed blocking until the care home can send someone out which could be several days especially over a weekend. Relatives are left with no support and are at the mercy of the care home this can be a very worrying time especially for the resident who cannot understand why they can’t go back to their familiar surroundings.” - *Carer for someone currently receiving services*

“There are too many stages to the process and too many separate organisations offering care, especially for those who have been assessed in a hospital environment who are about to return home.” - *Carer for someone currently receiving services*

“I recently employed a care agency [name] through the brokerage team. After many ups and downs throughout the months I learnt on Friday they had put my package out to tender, without my or your knowledge I presume. Out of the blue I, my parents and my sister, had cold calls throughout the day to pressure us into them coming round for a review. There even had my email. [The company] shared my family’s information without my permission... [wanted to share details of calls but] told I can’t contact the brokerage team.” - *Currently receiving services*

“The main problem is that care is subcontracted to third parties who cannot afford to supply the calibre of staff that are good enough or reliable enough to provide the care required.” - *Carer for someone not currently receiving services but have in the last two years*

#### *Care not person-centred*

Three people felt that care was not person-centred or there had been a lack of engagement with them, for example:

“I have physical disabilities and mental health conditions and autism, my care is prioritising my physical disabilities and not supporting my mental wellbeing. Unilateral decisions have been made about my care, against my wishes and without seeking the opinions of my family members.” - *Currently receiving services*

“It would be good if I was listened to with regards to my needs. It would be good to have consistent person as a point of contact/to support in co-ordination of meeting my needs. It would be good if the services offered to me met my needs and were not just offered as there is nothing/nobody else. It would be good if NCC stopped telling me there is nothing they can do further because they have not got any money - this is not my fault and does not change the fact that I have a deteriorating condition which limits my abilities and life.” - *Currently receiving services*

#### *Other negative experiences*

Three people felt that the service was not fit for purpose and five mentioned generally negative experiences, for example:

“The service does not take into consideration the stress that is caused to family who have no choice but to become carers. Both me and my husband have had to have sick time from work due to the stress of being carers.” - *Carer for someone currently receiving services*

“A shambles - lack of confidence we were dealt with properly.” - *Carer for someone currently receiving services*



## Conclusion

The feedback received shows that some people have had good experiences and others poor experiences. The difficulties mentioned highlight the need for more clarity for services users about who they should contact and better communications overall as well as more support for carers. We heard examples of people who would like more care and support as well as from those pleased with the care they receive.

A few people felt that care should be more person-centred, and this sentiment could be inferred from other difficult experiences told to us. Personalised and person-centred care was something highlighted in Healthwatch Northamptonshire's recent engagement asking people what matters most to them regarding their health and social care services<sup>14</sup>. The need to support carers and involve them when making decisions about people's care was also voiced.

The areas highlighted for improvement in this report also align with the recommendations made by the National Institute for Health and Care Excellence (NICE) in their guidelines on People's experience in adult social care services: improving the experience of care and support for people using adult social care services<sup>15</sup>. This guideline includes recommendations on:

- providing information
- assessing care and support needs and care planning
- providing care and support
- staff skills and experience
- involving people who use services in service design and improvement

## Acknowledgements

We are very grateful to all those who took the time to share their views and experiences with us. We would especially like to thank all who shared our survey, including:

- NASS/NCC communications, NASS Central Business Support Team, NCC Customer Service Centre and Olympus Care Service teams
- Partner organisations who shared the survey with their service users and circulation lists, including Northamptonshire Carers, Carers Voice, Age UK Northamptonshire, Mind, CAB, Total Voice Northamptonshire, and Nene Valley Community Action
- All the organisations and people who shared the survey on social media.

---

<sup>14</sup> Healthwatch Northamptonshire and NHCP community engagement report: Public views and experiences to inform the NHS Long Term Plan in Northamptonshire, September 2019,  
[www.healthwatchnorthamptonshire.co.uk/LTPengagementreport](http://www.healthwatchnorthamptonshire.co.uk/LTPengagementreport)

<sup>15</sup> People's experience in adult social care services: improving the experience of care and support for people using adult social care services, NICE guideline 86 published February 2018,  
[www.nice.org.uk/guidance/ng86](http://www.nice.org.uk/guidance/ng86)



## About Healthwatch Northamptonshire

Healthwatch Northamptonshire is the local independent consumer champion for health and social care. We are part of a national network of local Healthwatch organisations. Our central role is to be a voice for local people to influence better health and wellbeing and improve the quality of services to meet people's needs. This involves us visiting local services and talking to people about their views and experiences. We share our reports with the NHS and social care, and the Care Quality Commission (CQC) (the inspector and regulator for health and social care), with recommendations for improvement, where required.

Our rights and responsibilities include:

- We have the power to monitor (known as "Enter and View") health and social care services (with one or two exceptions). Our primary purpose is to find out what patients, service users, carers and the wider public think of health and social care.
- We report our findings of local views and experiences to health and social care decision makers and make the case for improved services where we find there is a need for improvement
- We strive to be a strong and powerful voice for local people, to influence how services are planned, organised and delivered.
- We aim to be an effective voice rooted in the community. To be that voice, we find out what local people think about health and social care. We research patient, user and carer opinions using lots of different ways of finding out views and experiences. We do this to give local people a voice. We provide information and advice about health and social care services.

Where we do not feel the views and voices of Healthwatch Northamptonshire and the people who we strive to speak on behalf of, are being heard, we have the option to escalate our concerns and report our evidence to national organisations including Healthwatch England, NHS England and the Care Quality Commission.

Find out more at [www.healthwatchnorthamptonshire.co.uk](http://www.healthwatchnorthamptonshire.co.uk)





## About Connected Together

Connected Together Community Interest Company (CIC) is the legal entity and governing body for Healthwatch Northamptonshire.

The remit of the Connected Together CIC includes:

- Contract compliance
- Legal requirements
- Financial and risk management
- Sustainability and growth
- Agreeing strategy and operations
- Agreeing policies and procedures



Connected Together CIC is a social enterprise and a partnership between the University of Northampton and Voluntary Impact Northamptonshire. It aims to be first for community engagement across the county of Northamptonshire and beyond.

By using our expertise and experience, we can help you in delivering community engagement programmes including workshops, research, surveys, training and more. Contact us to find out how we can help your community.

We welcome ideas and suggestions for projects that benefit Northamptonshire and its community.

Find out more at [www.connectedtogether.co.uk](http://www.connectedtogether.co.uk)





## Appendix - Survey questions

Please answer as many questions as you can based on your experiences of social care services currently or within the last two years. Please only select one answer for each question.

1. Please select the option which applies to you - Are you a Northamptonshire resident who is:

- a. Current receiving Adult Social Care Services? Or
- b. Not currently receiving Adult Social Care Services but have in the last 2 years? Or
- c. A carer for someone currently receiving Northamptonshire Adult Social Care Services? Or
- d. A carer for someone not currently receiving Northamptonshire Adult Social Care Services but who has in the last 2 years? Or
- e. A carer for someone else and personally receiving Adult Social Care Services? Or
- f. A carer for someone else and have personally received Adult Social Care Services in the last 2 years (but not currently)? Or
- g. None of the above (if so, thank you for your interest but please do not complete this survey as the questions do not apply to you)

2. Did you know how to contact Northamptonshire County Council (NCC) about social care services when you first needed them?

- a. Yes
- b. No
- c. Cannot remember

3. How did you first contact NCC about social care services?

- a. Email
- b. Telephone
- c. Referred by a professional
- d. Cannot remember
- e. Other (please tell us how)

4. Did you have any difficulty contacting NCC about social care services?

- a. No
- b. Cannot remember
- c. Yes (if yes, please tell us more)

5. When you first contacted NCC for social care services, did you get the help you asked for?

- a. Yes
- b. Cannot remember
- c. I did not ask for specific help
- d. No (if no, please tell us more)

6. Did you feel that NCC helped you in a reasonable amount of time?

- a. Yes
- b. Cannot remember
- c. No (if no, please tell us more)



7. Were you always aware of what was happening with your request and who was supporting you?
- a. Yes
  - b. No
  - c. Cannot remember
8. Did you/do you know the name of your social care worker/s?
- a. Yes
  - b. No
  - c. Cannot remember
9. Was everything about your care explained clearly to you?
- a. Yes
  - b. No
  - c. Cannot remember
10. Were there other things that you wanted from social care that you were told were not available or you could not have?
- a. No
  - b. Cannot remember
  - c. Yes (if yes, please tell us more)
11. Do you/did you feel that you have had regular reviews of your care package?
- a. Yes
  - b. No
  - c. Don't know
- Please give details
12. If you wanted/needed further help, do you/did you know who to contact?
- a. Yes
  - b. No
  - c. Cannot remember
13. How would you rate the support you have had from NCC adult social care?
- a. Excellent
  - b. Good
  - c. Ok
  - d. Poor
  - e. Very poor
  - f. Don't know
14. Is there anything else you would like to tell us about the social care services you or the person you care for has received?
15. If you would like to sign up to receive the Healthwatch Northamptonshire email newsletter, please give your email address:



To help us know more about who has completed the survey, please answer the following questions. We would like to reassure you that you will remain anonymous and this information will not be used in any way to identify individuals.

16. Please tell us which district you live in:

- |                          |                           |
|--------------------------|---------------------------|
| a. East Northamptonshire | e. Northampton            |
| b. Corby                 | f. South Northamptonshire |
| c. Daventry              | g. Wellingborough         |
| d. Kettering             |                           |

17. What is your gender?

- a. Female
- b. Male
- c. Non-binary
- d. Prefer not to say

18. Is this the gender that was assigned to you at birth?

- a. Yes
- b. No
- c. Prefer not to say

19. What is your age group?

- |                |                      |
|----------------|----------------------|
| a. 18- 20      | f. 61-70 years       |
| b. 21-30 years | g. 71-80 years       |
| c. 31-40 years | h. Over 80 years     |
| d. 41-50 years | i. Prefer not to say |
| e. 51-60 years |                      |

20. Do you have a disability?

- a. Yes (please tell us more about it)
- b. No
- c. Prefer not to say

21. What is your sexual orientation?

- a. Heterosexual/straight
- b. Gay/lesbian
- c. Bisexual
- d. Other (please specify)
- e. Prefer not to say

22. What is your ethnic group?

- |                             |                               |
|-----------------------------|-------------------------------|
| a. African                  | j. Pakistani                  |
| b. Arab                     | k. Roma                       |
| c. Asian British            | l. White British              |
| d. Bangladeshi              | m. Any other White background |
| e. Black British            | n. Any other Black background |
| f. Caribbean                | o. Any other Asian background |
| g. Chinese                  | p. Any other mixed background |
| h. Gypsy or Irish Traveller | q. Prefer not to say          |
| i. Indian                   | r. Other (please tell us)     |



## Contact us

Address: Healthwatch Northamptonshire  
Moulton Park Business Centre  
Redhouse Road  
Northampton  
NN3 6AQ

Phone: 0300 002 0010

Text: 07951 419331

Email: [enquiries@healthwatchnorthamptonshire.co.uk](mailto:enquiries@healthwatchnorthamptonshire.co.uk)

Website: [www.healthwatchnorthamptonshire.co.uk](http://www.healthwatchnorthamptonshire.co.uk)

Facebook: [Healthwatchnorthamptonshire](#)

Twitter: [@HWatchNorthants](#)



We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format please contact us at the address above.

© Copyright Healthwatch Northamptonshire 2019

Part of Connected Together Community Interest Company Registered in England and Wales.  
Company No. 8496240

Email: [hello@connectedtogether.co.uk](mailto:hello@connectedtogether.co.uk)

Facebook: [ConnectedtogetherCIC](#)

Twitter: [@ConnectedCIC](#)

Website: [www.connectedtogether.co.uk](http://www.connectedtogether.co.uk)

