



NO PLACE LIKE HOME

Why live-in homecare is a real alternative to residential care.



The Live-in
Care Hub

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Foreword

Hello and welcome to **No Place Like Home**.

Nearly three quarters of us* want to stay in our own homes as we get older – and we definitely DON'T want to move into residential care. With shocking news stories commonplace, a staggering 97 percent* of people do not want to go into a care home if they become ill or less able to cope. Yet, in these days of fragmented families and frantic lifestyles, we believe many people think being 'shipped off' there may be unavoidable.

This is a tragic misconception. There is another, life-enhancing option: that of live-in care at home. It's the one most people would plump for, given a choice. It is growing in popularity, but people still do not know enough about it as a viable and affordable alternative.

The **aim of this report therefore is to raise awareness of live-in homecare, as well as highlighting concerns facing older people and their families**. It provides the most recent

research into issues affecting our ageing population, as well as vital information about this increasingly popular form of care.

Our **most recent nationwide research** found that 34 per cent of adults of all ages say **dementia** is the condition they are most scared of experiencing in later life – **overtaking cancer as the most feared condition for the 55+ age group**. This is not surprising given the total number of people with dementia in the UK is forecast to increase by 38% over the next 15 years. In this report we detail our findings and highlight how live-in carers are trained to cope with dementia and other conditions. We also share evidence that proves one-to-one care in your own home produces a far better quality of life for the vast majority of people at comparable, often at less, cost.

Moreover the property is retained in the family for the next generation.

The Live-in Homecare Information Hub is a coalition of 13 leading live-in care companies, all providing 24 hour care at home for older people. Our website, www.stayinmyhome.co.uk, was developed as a valuable resource for the general public and healthcare professionals alike.

All Live-in Homecare Information Hub partners belong to the United Kingdom Homecare Association, and we're united in the goal of raising awareness about the high quality of care provided by this unique and very positive alternative to care homes.

Thank you for reading. We hope you find this report informative and valuable.

Dominique Kent, The Good Care Group
Lynda Gardner, Oxford Aunts
Peter Seldon, Consultus Care & Nursing

Founder members, The Live-In Care Hub

**From research conducted by One Poll, July 2014, for live-in care provider Consultus Care*

News: Dementia Overtakes Cancer as UK's Most Feared Illness

Dementia has overtaken cancer as the most feared condition for the 55+ age group - as a result of finally shedding its taboo subject status. Our new research found that 34 per cent of adults of all ages say dementia - a broad category of brain diseases - is the condition they are most scared of experiencing in later life. But while there is increased fear surrounding the subject, 52 per cent admit they feel more comfortable talking about the condition than they did 10 years ago (only a third would have been happy discussing it then).

The Age UK digest, Later Life in the United Kingdom, recently highlighted how loneliness can be a key contributor to Alzheimer's, the most common form of dementia. Those with a high degree of loneliness are twice as likely to develop Alzheimer's as those with a low degree of loneliness.

Symptoms of Dementia

- Memory loss
- Difficulties with language
- Poor judgement
- Failure to recognise people
- Disorientation
- Mood changes
- Delusions and / or hallucinations
- Diminishing ability to perform daily tasks

Dementia: The Facts

The total number of people with dementia in the UK is forecast to increase by 38 per cent over the next 15 years.

By 2037, the number of carers will have to rise to nine million to keep pace with the levels of frail and disabled people. In the future, most people's lives will include at least one episode of caring.

Source: Alzheimer's Society 'Dementia UK' report 2014 (an update of the Dementia UK 2007) report

View from The Hub

For decades, dementia in all its forms was the great unspoken subject - but thanks to people like author Terry Pratchett, who has been very open with his personal experiences of the condition, people are far more willing to talk openly about it. However, while breaking the taboo is leading to more people feeling comfortable about discussing dementia, it means it's overtaken cancer as the biggest fear for the older age group in the UK.

Top Concerns

The breadth of devastation wreaked upon relationships, lifestyles and family finances makes dementia a far greater worry than any other illness. The top concerns, from respondents thinking about parents or elderly relatives are:

- 78% "I would end up resenting them - or feeling angry"
- 72% "We'd have to sell their home to fund care"
- 70% "They might have to go into residential care"
- 69% "My family and/or I wouldn't be able to afford good care for them"
- 65% "It will divide our family or cause relationship problems"



Surprising Findings

In contrast, stroke, which, depending on its severity, is arguably just as debilitating and cruel for sufferers - and is the UK's no. 4 killer - surprisingly, hardly caused concern at all. Only nine per cent cited it saying: 'I might have to look after them and I couldn't or wouldn't want to do this'. Heart disease is the nation's no. 1 killer, but feared by just four per cent.

News: Live-in Homecare – A Positive Solution for Families AND the NHS



The live-in homecare option is not only life-enhancing for the person being cared for, it can also help families and the health service. It offers a very efficient and effective solution to one of the NHS's major issues, that of hospital 'bed blocking' - especially where dementia patients are concerned. In fact, the research shows that more than any other option, people want to be looked after in their own home with high quality care. Over half plumped for this, even though the service is currently little known.



Families Delaying Care – and Floundering with Planning and Finances

Our experts at The Live-in Homecare Hub are deeply concerned that people are blundering into care. "We've noticed that families are leaving care planning later and later and are often at crisis point with a parent or elderly relative before they start looking around and have no time to research the options properly". While people are clearly talking more about dementia (and indeed most illnesses of old age), it appears they don't know what to do – or where to turn when the time comes to exploring care options:



A third would seek advice from their GP



Less than a quarter would talk to any other health professional



60 per cent would discuss it with their family



40 per cent wouldn't talk it through with the person going into care



Six per cent would surf the internet for answers, but wouldn't talk to anyone

One thing is clear - financial planning is essential. Probably the most shocking of all is that with such a significant financial outlay on the horizon, just 1.9% of people spoke to an independent financial advisor (IFA) to research and plan good quality care. They should be qualified in later life advice – not every IFA can do this.

Most respondents think such care charges are either 'between £251 and £500 per week' (21.4%) or 'between £501 and £1,000 per week' (22.5%), although in reality, whether it's for residential care homes - or 24/7 live-in homecare, fees start from about £750 per week for carers and around £1,400 per week for nursing care.

A nationally representative survey of adults was commissioned by The Live-In Homecare Information Hub via market research specialist Censuswide during January 2015. 1,040 over 16 year olds were surveyed.

For further findings, please turn to Research snapshot on page 10.

Staying With Your Pets

It's an emotional and distressing decision facing a growing number of elderly people who are no longer able to look after themselves: what to do with a muchloved pet that is not permitted to join them were they to move into residential care.

We recently commissioned research that found over two million people in Britain know an elderly person who had to have their cat and/or dog put to sleep because they were moving into residential care. Many residential homes and sheltered housing schemes refuse to allow residents to keep pets, causing elderly people real distress. The survey also found 20% say the elderly people they know with pets would refuse to go into care without their pets. Additionally, 18.5% said they knew an elderly person who had to have their cat or dog rehomed.



Margaret's Story

For many people, being able to stay in familiar surroundings whilst retaining independence is really advantageous. Margaret is 83, and she benefited greatly from live-in homecare, which allowed her to stay with her golden retriever, Henry. Margaret's family became concerned in 2012 when she seemed to become more distant and vague. After a fall, she was hospitalised but her one concern was to get back to Henry. Margaret was diagnosed with early stage dementia. It was clear she needed care, support and guidance for her memory impairment. Margaret's family found out about a live-in homecare provider who matched her with her carer Anne. Anne began to build a relationship with Margaret in hospital and managed the transition from hospital to home.

Margaret is now well and supported by two carers, Anne and Olga, she walks Henry regularly and sees friends and neighbours. Carer, Anne says: "Henry has been such a comfort to Margaret over the years that I firmly believe he has been a fundamental influence to her wellbeing and recovery."

Why 'Live-in'?

Live-in homecare is just that: personal carers that live in their client's home, 24 hours a day. It allows people to stay in familiar surroundings with the highest standards of personally tailored, professional care. The service involves support with washing, dressing, cooking, medication, housekeeping and companionship. Many carers and nurses are also trained to cope with particular conditions, such as dementia, stroke, MS, Parkinson's or palliative care.

Evidence proves that one-on-one care produces a far better experience for the vast majority of people. Moving into a residential care home can be unsettling, especially when people move away from friends, a partner or pets. Live-in carers help clients enjoy some of the things in life they once did – like seeing friends or baking. Additionally, live-in fees can compare very favourably with residential homes, especially where couples are looked after together.



The Essentials

Depending on the provider and level of care agreed, core services include: help with mobility and safety, personal care, medication, night time support, shopping, cooking, housework, pet care, admin, trips out, companionship and emotional support. Carers' work doesn't normally cover heavy moving or lifting, constant night care or nursing procedures, although care plans can be reworked to include these where required. They can't witness legal documents, accept gifts, drink alcohol or smoke on a client's premises.

Carers need to be provided with a bedroom, television and internet access. They need time each day to do personal chores, ideally enabling them to leave the premises, and at least eight hours sleep, or extra time off during the day in lieu of lost sleep. Alternative care may be arranged to cover the break, depending on the care required.

Care providers have thorough in-depth matching procedures to ensure both parties are sensitively paired and compatible.

Care options

There are two models of live-in home care: full management and introductory. Choosing one service over the other is a matter of personal choice; one may be more appropriate depending on an individual's personal circumstances and those of their family.

- **Full Management:** the company providing the care employs and trains its carers and oversees all aspects of care. This includes ongoing oversight, reviews and support 24 hours a day for both carers and clients. It suits families with significant other demands on their time.
- **Introductory Care Service:** agencies don't employ carers directly, they are self-employed contractors responsible for their own tax and NI contributions, and are paid directly by clients or their families. This is appropriate for families keen to be closely involved and 'hands-on'.



Our carers

Good carers love what they do. They tend to be people with a special balance of dedication, reliability and compassion combined with sociability, good humour and common sense. Due to the high standards required of carers, Homecare Hub providers typically reject 92-95% of applicants.

Vetting procedures normally include: several rounds of interviews, psychometric testing, aptitude days, formal criminal records checks, overseas police checks, written references, ID and qualification verifications and checking work permit status.

Most care providers offer thorough inductions, ongoing training and skills maintenance for staff. Courses cover safeguarding of vulnerable adults, first aid, nutrition and training on specific conditions. Some providers offer wellbeing training so carers are equipped for the demands of live-in care and many provide full National Diplomas in health and social care. Many mentor carers to maintain the highest standards.

"The United Kingdom Homecare Association (UKHCA) endorses the benefits that live-in homecare services can bring to people's lives, as a way of enabling them to continue to live independently in their own homes."

Bridget Warr, Chief Executive, UKHCA



Di, a retired district nurse, sought live-in care for her 97 year old mother, Betty: "As a Guy's trained nurse, I have exacting standards and I expect care to be excellent. Thanks to the constant care and efficient nursing, my mother has now returned to better health and is well cared for 24/7 by a live-in carer."

"Live-in care is a long established but relatively unknown, growing alternative to residential and nursing care that substantially extends the care choice available to the individual. It allows someone with high levels of need to remain in their own home and community and lead a good quality life in familiar surroundings. I expect live-in care to continue to grow in popularity and to become the high quality first care choice of many people"

Dr. Glen Mason, Director of People, Communities and Local Government, Department of Health



Real Story: Steve

Steve, 88, a retired pilot with dementia, lives with his wife and primary carer, Anne. He had become very easily agitated and attached to Anne, who could barely be left alone. He would become paranoid and aggressive immediately she was out of sight, convinced she was leaving him. His anti-psychotic medication wasn't helping. Anne was burnt out with his 24/7 care - and at breaking point.

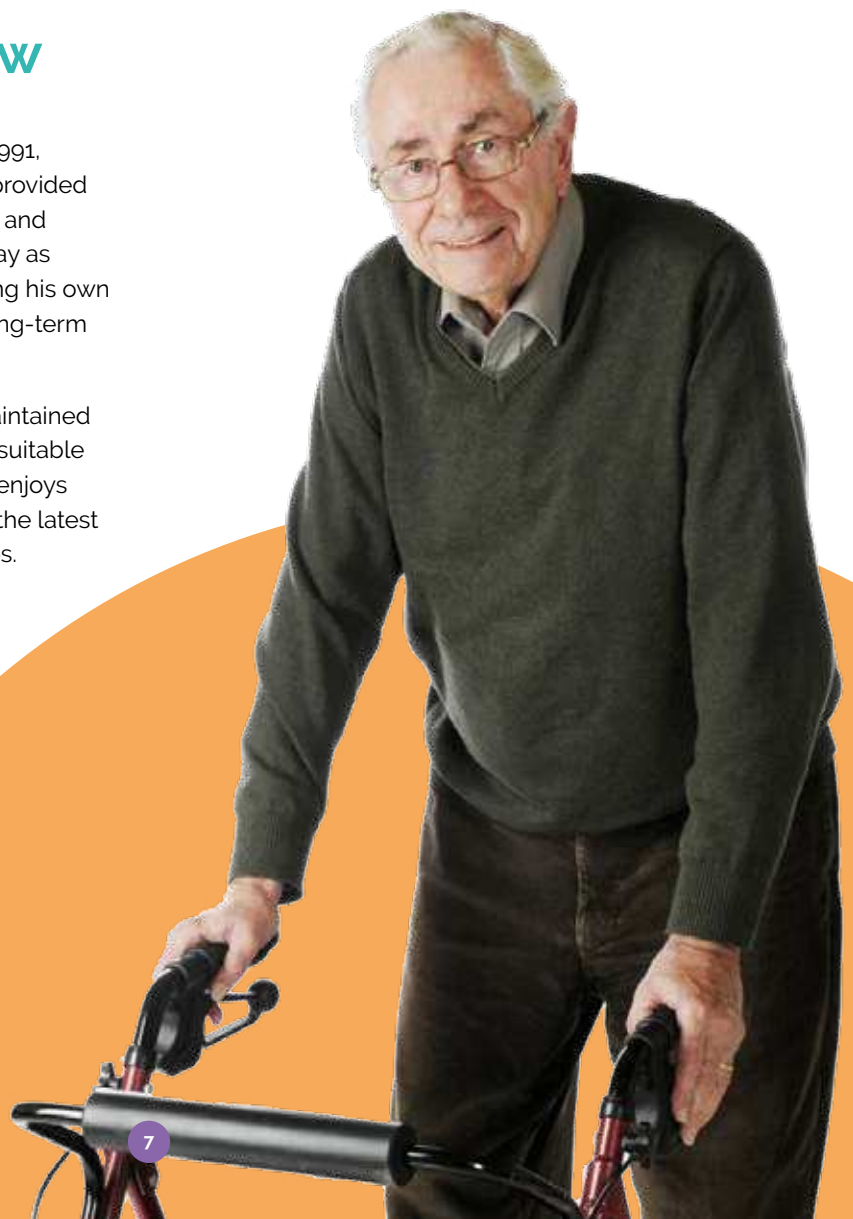
By engaging a live-in carer from The Good Care Group, specially trained in dementia and using ground-breaking techniques, Steve is happy to be at home while Anne takes a break. Anne says: "Live-in care has enabled me to make time for myself, meaning that when I spend time with Steve, I can give him the love, care and attention he deserves."



Real Story: Andrew

When Andrew sustained a head injury in 1991, he needed around the clock live-in care, provided by Oxford Aunts. The past 24 years of care and companionship has enabled Andrew to stay as independent as possible, whilst maintaining his own lifestyle choices. He has built up strong long-term rewarding relationships with his carers.

Importantly, his quality of life has been maintained and he has continued to have a social life suitable for his age and interests - in particular he enjoys meeting friends in his local pub, catching the latest cinema releases and joining activity groups.



Health Professionals

Live-in homecare offers an efficient, effective solution to bed blocking. Carers provide 24/7 care and hospital patients can be discharged when they're declared well enough to leave. They undertake around 85 per cent of nurses' work, meaning live-in home care also significantly mitigates the risk of readmissions. Patients have their own evolving personal care plans and with such ongoing, bespoke attention they are far less likely to suffer from falls, skin conditions, urinary tract infections or other infections which are detected early due to the one-to-one supervision and observation in place.



"Over the years I have recommended, and continue to recommend Consultus Care & Nursing which provides trained, full time live-in carers and nurses to enable elderly folk where possible to stay in their own homes for the rest of their lives in familiar surroundings, where friends and family can visit at any time, and where pets can be retained. In my experience this is the ideal environment for any older person requiring short or long term care."

Dr. Philip Razzell, Senior Partner at The Town Surgery, Sevenoaks, Kent, specialises in medical care of elderly people. He is hospital practitioner in geriatric medicine at Sevenoaks Hospital, and holds a Diploma in Geriatric Medicine (Royal College of Physicians).



Fees and Funding

Fees are dictated by care levels required: companion care with minimal personal care or condition management is understandably less than those who require high-level care, have complicated conditions or challenging behaviour.

The cost of live-in home care is comparable to residential care costs; for couples it's significantly less. In terms of value, live-in care offers far greater levels of one-to-one quality time with clients.

Long-term care can represent a significant ongoing financial outlay, but numerous plans are available to provide funding. Families are firstly advised to think about the 'ideal world' care setting and talk to a

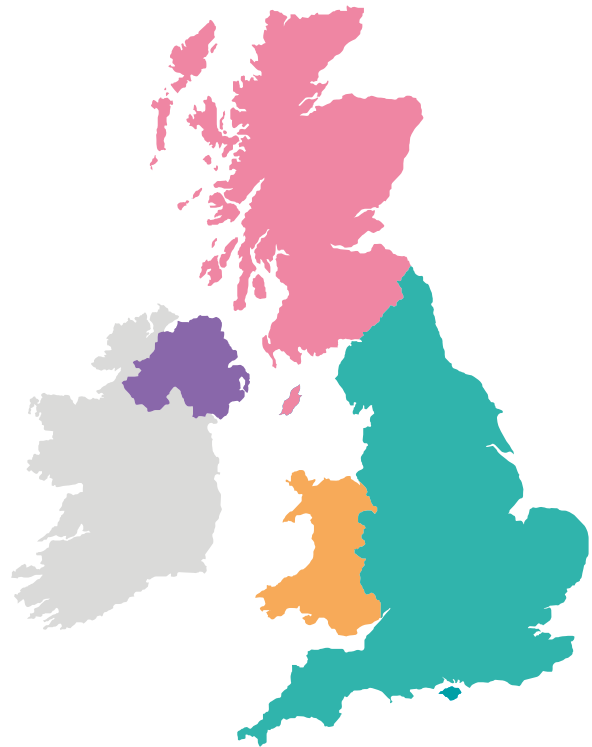
specialist financial advisor dealing with later life care, to discuss options and implications. Each person or family approaches care funding differently so tailored planning is vital.

If full time care is required, and a person's primary need is a health need, all of their care fees could be paid by the NHS through a little-known funding stream called NHS Continuing Healthcare.



Research Snapshot

Our research into the impact that dementia and other issues affecting older people is having also uncovered some interesting findings across geographical locations, sex and age. Here is a snapshot:



Regional Trends

- In the wake of the A&E scandals, only one in five people would be happy to be looked after in hospital. This dropped to just 14.3 per cent in Wales, but increased to 30 per cent in Northern Ireland.
- People most fearful of dementia live in the North West and London
- Londoners in particular do not open up and discuss care for an elderly relative or friend and they are also the most likely to say they haven't thought about care
- Respondents from Northern Ireland have a low fear factor (20%) but are also the least comfortable talking to friends, family or colleagues about dementia.
- People in the North East and South East have a more positive view of the NHS than other regions – they are most likely to discuss later life care options with their GP and are also the happiest regions in the UK to be cared for in hospital
- Fewer than a quarter of people in most UK regions would be happy being looked after in a residential or nursing home



Male and Female Viewpoints



- Women fear dementia more than men (34.7 v 28.2%)
- Women are happier talking about all illnesses than men are

Age Groups

- The over 75s (47.6%) fear dementia most
- Surprisingly, this is closely followed by 16-24 year olds (39.1%) – perhaps because of improved dementia education in schools, media stories or grandparents with dementia.

If you would like a full breakdown of our research findings, please email hello@liveincarehub.co.uk.

The Live-in Care Hub

Members offer full management or introductory care (some offer both options) and are members of the United Kingdom Home Care Association (UKHCA) the national professional association for homecare providers. The Live-in Care Hub is a partnership of the following companies:



- [Access Care](#)
- [Christies Care Ltd](#)
- [Consultus Care and Nursing Ltd](#)
- [EnViva Care Ltd](#)
- [Everycare Eastbourne Ltd](#)
- [Guardian Angel Carers](#)
- [Miracle Workers Agency Ltd](#)
- [Mumby's Homecare](#)
- [Oxford Aunts Care](#)
- [Radis Community Care](#)
- [The Good Care Group Ltd](#)
- [Trinity Homecare Ltd](#)
- [Universal Care Ltd](#)
- [Vanguard Care Ltd](#)



Care to Join Us?

Live-in care can be a wonderful career for the right person; someone who feels passionately that they want to help improve the quality of life for an elderly person. Many strong bonds and friendships have been forged over the years and good carers find the experience deeply rewarding. If you are interested in caring as a career, please visit:

www.liveincarehub.co.uk/become-a-carer



Media

For further media information about The Live-in Care Hub, please contact us: hello@liveincarehub.co.uk or visit www.liveincarehub.co.uk



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