

Factsheet

Getting care services at home

This factsheet explains:

- what to look for when you're choosing home care
- what to expect from it
- how to complain if you're not satisfied with the service you receive.

It will also tell you about temporary laws, known as easements, that might change some care services during the coronavirus (COVID-19) emergency.



Call free on 0800 319 6789

Visit www.independentage.org

About Independent Age

Whatever happens as we get older, we all want to remain independent and live life on our own terms. That's why, as well as offering regular friendly contact and a strong campaigning voice, Independent Age can provide you and your family with clear, free and impartial advice on the issues that matter: care and support, money and benefits, health and mobility.

A charity founded over 150 years ago, we're independent so you can be.

The information in this factsheet applies to England only.

**If you're in Wales, contact Age Cymru
(0800 022 3444, ageuk.org.uk/cymru)
for information and advice.**

**In Scotland, contact Age Scotland
(0800 12 44 222, ageuk.org.uk/scotland).**

**In Northern Ireland, contact Age NI
(0808 808 7575, age.org.uk/northern-ireland).**

In this factsheet, you'll find reference to our other free publications. You can order them by calling **0800 319 6789** or by visiting www.independentage.org/publications

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1. Terms you might encounter

Social care

Help and support services provided to people who need them, for example, because of illness, disability or old age. Social care helps people to carry out everyday tasks, like washing, dressing, and eating or drinking – it doesn't include healthcare. It might be provided at home or in a care home.

Eligibility

In the context of social care, this is your entitlement to receive services based on whether you meet the qualifying criteria.

Means testing

Looking at your finances to work out whether you qualify for financial help from the government or local council. Social care is usually means-tested.

Capital

Wealth in the form of money or items that have a financial value, such as savings, investments and property (buildings and land).

Income

Money received, especially on a regular basis, such as pensions and benefits.

Self-funder

A person who is paying for all their own care themselves (self-funding), rather than getting financial help from the local council.

2. What is home care?

Home care is care provided in your own home by a professional care worker. A home care service can provide a wide variety of support to help you to continue living independently in your own home. For example, you could get help with:

- eating and drinking
- bathing and personal hygiene
- getting in and out of bed
- getting dressed and undressed
- taking medication
- doing your weekly shopping
- getting help to go out, for example, to a lunch club.

You can arrange home care services yourself, or you may be able to get services through your council if you qualify.

If you get home care arranged by your council, the number of visits you have will depend on your individual needs. It may be just an hour or two a week, several hours a day or occasionally live-in care. The home care service may be provided on a temporary, occasional or long-term basis.

Home care agencies employ care workers and arrange for them to visit you to provide care services. If you're arranging care yourself, you can do this through an agency, or by employing care workers directly, though you'll then have responsibilities as an employer (see chapter 6).

Nursing care

Some home care agencies are also registered to provide nursing care to people in their own homes. Nursing care is carried out, planned or supervised by a registered nurse.

Community nursing services, such as district nurses, are also available on the NHS. These are usually arranged through your GP.

3. Who provides home care services?

Home care services are provided by a variety of organisations, individuals and charities.

Some council social services departments still provide home care services directly themselves, but many councils now commission home care agencies (which can be private or voluntary sector organisations) to provide services on their behalf.

If your care is provided as an NHS service, this may also be provided by an agency.

Registered home care services

All home care agencies in England must register with the Care Quality Commission (CQC) (**03000 616161**, [cqc.org.uk](https://www.cqc.org.uk)). The CQC regulates and inspects all home care agencies and will only register agencies that meet its minimum standards.

A registered care agency must not provide or introduce care workers to you if you are going to employ them directly (see chapter 6).

United Kingdom Home Care Association

The United Kingdom Home Care Association (UKHCA) (**020 8661 8188**, [ukhca.co.uk](https://www.ukhca.co.uk)) is a professional membership association for organisations which provide home care and nursing care to people in their own homes.

All members agree to comply with UKHCA's code of practice.

This sets out requirements for:

- standards of care
- the rights of service users
- staffing
- organisational management.

It requires member organisations to provide a high standard of care.
You can see its code of practice at [ukhca.co.uk/codeofpractice.aspx](https://www.ukhca.co.uk/codeofpractice.aspx).

4. Working out what care you need

If you're finding it difficult to manage at home and think you may need some help, then start by contacting your council's adult social services department to ask for a care needs assessment ([gov.uk/find-local-council](https://www.gov.uk/find-local-council)).

What is a care needs assessment?

A care needs assessment works out what care and support you need. A trained care professional will talk to you about any difficulties you have and what kind of support would best meet your needs. They should also consider and discuss with you what impact your care needs are having on your wellbeing. For more information about the care needs assessment, see our factsheet **First steps in getting help with your care needs**.

It may also be useful to ask for an occupational therapist to be involved in a care needs assessment, because they might recommend disability equipment or an adaptation to your home to make life easier. If you're assessed as needing any aids, or minor adaptations that cost up to £1000 to make, social services must provide them free of charge. You may be eligible for a Disabled Facilities Grant to help with the cost of larger adaptations. See our factsheet **Adapting your home to stay independent** to find out more.

Will I need a care needs assessment?

It's a good idea to arrange for social services to assess your needs. Whether you're going to make arrangements directly with a home care agency or care worker, or go through the council, an assessment may help you to explain what type of support you need.



Good to know

You can have someone with you at your assessment to help you explain what your needs are. If you want a friend or relative to be with you, you should let social services know when making the arrangements. If you would have substantial difficulties being involved in your assessment and you don't have anyone to help you, the council must provide an independent advocate. The advocate can help you to express your views and make sure your opinions and wishes are heard. For more information, see our factsheet **Independent advocacy**.

Care needs assessments during the coronavirus emergency

From March 2020, the government introduced temporary laws, called easements, to help local councils during the coronavirus emergency. They allow councils to trigger powers that turn some of their legal duties under the Care Act 2014 into choices.

If triggered, your council can choose how, when and for whom they will carry out care needs assessments. You should still ask for an assessment if you need support, but your council may decide to focus on those with the most urgent needs. However, they must still make sure they are not breaching your human rights by doing so. This means they must find out more about your situation, take appropriate steps and may still have a duty to meet your needs.

Your council must still meet care and support needs wherever possible and can only use these new powers when strictly necessary, for example, because of workforce illness or because they can't meet demand for services. They must still provide information and advice to people with care needs as early as possible.

After the assessment

The council uses the care needs assessment to decide whether any of your care needs qualify for support. If they do, these are known as eligible care needs. Our factsheet **First steps in getting help with your care needs** explains the eligibility criteria. This decision is based on your care needs alone – your finances will be looked at separately in a financial assessment (see chapter 5).

Whether or not you're eligible for support, you should be given a copy of your assessment. Ask if you don't get one.

If you don't qualify, the council must still give you information and advice on how to reduce your needs or prevent them getting worse.

Even if you're paying in full for your own care, the council should arrange your care for you if you would like them to and you ask them. They may charge you a fee for doing this, but they cannot charge for the assessment.



Eligible needs during the coronavirus emergency

If your council has triggered easement powers because of the coronavirus emergency, they may not have a duty to meet your eligible care needs as they would normally. However, they must make sure they aren't breaching your human rights when they decide what help they can give you. They must also explain their decision and give you appropriate information and advice.

For more information on changes to services during the coronavirus emergency, call our Helpline (**0800 319 6789**) or visit our website (independentage.org/covid-19).



Good to know

If you're paying all your care fees yourself, and:

- you lack the mental capacity to make arrangements for your care, and
- there's no one who can make care arrangements for you

then the council must help and they must not charge an arrangement fee.

You can be said to lack mental capacity if you're unable to make a specific decision at the time it needs to be made. For more information, see our factsheet **Managing my affairs if I become ill**.

5. Paying for home care

Help to pay from the council

If your care needs assessment shows that you qualify for support, you may get some help with the cost of your home care services. What you contribute will depend on your income and capital. The council will work this out in a financial assessment.

- If you have capital over £23,250, you will usually be expected to pay the cost in full.
- If you have capital of less than £14,250, you won't need to use it to pay for your care. However, you will probably still have to make a contribution from your income.
- If you have capital, between £14,250 and £23,250, you will have to contribute some money from your capital, as well as making a contribution towards the cost from your income.

The value of the property you are living in as your main or only home will not be counted in the assessment. For more information about the financial assessment, see our factsheet **Getting a financial assessment for care at home**.

If the council is paying for or arranging any of your support, they should work with you to create a care and support plan. This is a written statement setting out:

- what your needs are, and which ones are eligible for support
- how your needs will be met and who will meet them (what type of services or support you will use)
- information and advice on reducing your needs or preventing them developing in future

- which organisations or individuals will be involved in meeting those needs
- how much your personal budget is
- whether any direct payments will be used to meet your needs.

Financial assessments and care plans during the coronavirus emergency

If your council has triggered easement powers (see chapter 4), they can choose when they carry out a financial assessment, and whether they provide you with a care and support plan. They can only do this when it is strictly necessary and must still try to meet needs wherever possible.

These changes might mean:

- your local council can decide to carry out financial assessments at a later date. You may receive care now and be charged for it later. However, you cannot be charged for this care until a financial assessment has been carried out. You should be provided with information and advice about this change when your needs are assessed
- your council may provide you with care and support without a care and support plan being put in place. The plan is usually agreed with you before care is provided. During the emergency period, you may receive home care without this plan. However, the council must document the care that you need and make sure your care provider has appropriate information to arrange your care properly. Routine reviews of existing care plans may not take place as they usually would.

Visit our website (independentage.org/covid-19) for the latest information on care services during the coronavirus emergency.

Personal budgets and direct payments

If you qualify for support, the council should tell you how much money they think is required to meet your care needs – this is called your personal budget. Your personal budget includes both the amount you would have to pay towards your care, and any amount the council should pay as well.

If the council is arranging your care, you must be involved in deciding how this budget is spent. However, you can receive your personal budget in different ways. One option is to receive it as a direct payment – the council gives you the money they will contribute towards your support, so that you can arrange your own services. This can offer greater choice and control – for example, you may want to employ someone you know to provide your care rather than using a home care agency – but it does also mean that you take on greater responsibilities. You must use the direct payment to meet your assessed eligible needs.

Examples of how you could use your direct payment

- To employ someone of your choice to care for you at home at a time that suits you best. This could be a relative who doesn't live with you. You can't use your direct payment to employ your spouse or partner or a relative who lives with you, unless the council agrees that only they can meet your care and support needs.
- To employ someone to help you attend activities outside your home, such as going shopping or attending a lunch club. They are sometimes referred to as a personal assistant (PA).

Instead of direct payments, you could receive your personal budget as:

- a managed account – the council or another independent organisation manages the money for you, but you decide how it is spent
- a user-controlled trust – you make the decisions but three or more trustees manage your money and the practical side of things.

You could also choose to have a combination of these. The council should help you decide on the best option for you.

For more information, see our factsheet **Social care: ways to use your personal budget**.

What can councils charge for home care services?

Your personal budget is the total amount the council thinks your care should cost, including their contribution and yours.

Any charges you're asked to pay must not take your income below the level of the Minimum Income Guarantee (MIG). If you're single and have reached the qualifying age for Pension Credit, the MIG amount for 2020/21 is £189.00 a week. If you're a member of a couple and one or both of you has reached Pension Credit qualifying age, your MIG is £144.30 a week. If you receive a disability benefit or you're a carer, you may receive a higher weekly MIG. The council can choose to set a higher level in other circumstances if they wish.

If you receive any disability benefits, these are usually counted as part of your income in the financial assessment. However, if the council does this, they must take into account any disability-related expenses you have. Before your financial assessment, make a note of all the expenditure you have that is related to your disability, such as special footwear or clothing, additional heating, special dietary needs or maintaining disability equipment.

For more information about the Minimum Income Guarantee and disability-related expenses, see our factsheet **Getting a financial assessment for care at home**.

The council should publish information about their charging policy and must give you a written record of your individual financial assessment.

If you think you've been charged too much for home care, you may wish to challenge that decision (see chapter 9).

Other help to pay for home care: Attendance Allowance and Personal Independence Payment

These are disability benefits granted to people who need regular supervision or help with their personal care. Personal Independence Payment (PIP) also covers mobility needs. These benefits are not means-tested – an award is based solely on your care needs. If you're under State Pension age, you can apply for PIP (**0800 917 2222**, [gov.uk/pip](https://www.gov.uk/pip)). If you've reached State Pension age, you can apply for Attendance Allowance (AA) (**0800 731 0122**, [gov.uk/attendance-allowance](https://www.gov.uk/attendance-allowance)). If you are already receiving Disability Living Allowance (DLA), you cannot make a claim for AA or PIP.

These benefits can be taken into account (apart from the mobility component of PIP and DLA) when the council assesses your income – see our factsheet **Getting a financial assessment for care at home**. You could use any that's left over to pay for additional services.

For more information about these benefits, see our factsheets on disability benefits: **Disability benefits: Attendance Allowance** and **Disability benefits: Personal Independence Payment** and **Disability Living Allowance**.



Benefit assessments during the coronavirus emergency

Until at least 17 June 2020, there will be no face-to-face assessments for benefit applications. This could mean that you have an assessment over the phone, or you could be asked to complete a paper assessment form. Visit our website ([independentage.org/covid-19](https://www.independentage.org/covid-19)) or call our Helpline (**0800 319 6789**) for more information and advice.

6. Finding and choosing home care

Through a home care agency

You will need to think about what kind of agency can best meet your needs, whether you're getting support from the council or arranging your care yourself.

How to find local agencies

Your council's social services department should provide information on home care agencies in your area. They may have a directory of local services on their website. Find your local council at [gov.uk/find-local-council](https://www.gov.uk/find-local-council).

You can contact the Care Quality Commission (CQC) (**03000 616161**, [cqc.org.uk](https://www.cqc.org.uk)) for a list of home care agencies in your area. The CQC inspects care services and can provide you with the latest inspection report for a home care agency.

The United Kingdom Home Care Association (**020 8661 8188**, [ukhca.co.uk](https://www.ukhca.co.uk)) also has a database of member home care agencies. Members must agree to certain quality standards.

Getting the information you need about the agency

If you're arranging your own care, there are several points to consider when choosing a home care agency. All home care agencies must produce a 'statement of purpose' when they apply to the CQC to be registered. This statement explains:

- the aims and objectives of the agency
- the type of services they provide
- who the service is for
- how to contact the agency.

When registering with the CQC, care agencies are also required to provide information about care fees, and explain:

- how they will provide care that takes account of your individual needs and preferences
- how they deliver care services after the initial referral
- their key contract terms and conditions
- their working hours
- their insurance cover
- how they make sure the care they provide is safe
- how to make complaints
- how to contact social services and other relevant care agencies.

You can see the CQC's latest inspection report and ratings for each home care service provider by calling them on **03000 616161** or visiting [cqc.org.uk/what-we-do/services-we-regulate/find-services-offering-care-home](https://www.cqc.org.uk/what-we-do/services-we-regulate/find-services-offering-care-home).

Does the agency have all the right policies and procedures in place?

All good home care agencies should have:

- safeguards and procedures to minimise the risk of any accident to you or their staff
- safeguarding policies and procedures that protect you from abuse, neglect and self-harm
- policies and procedures about how staff handle your money if they buy things or pay bills on your behalf.



Good to know

The CQC has a booklet about what to expect from a good home care agency. Download it from [cqc.org.uk/content/what-can-you-expect-good-home-care-agency](https://www.cqc.org.uk/content/what-can-you-expect-good-home-care-agency) or call them on **0300 323 0200** to order a copy.

The National Institute for Health and Care Excellence (NICE) has a list of six 'quality statements', which can also give you an idea of how your home care should be provided: [nice.org.uk/guidance/qs123/chapter/List-of-quality-statements](https://www.nice.org.uk/guidance/qs123/chapter/List-of-quality-statements).

Have their care workers had Disclosure and Barring Service checks?

When considering which home care agency to choose, you may want to check that the care worker has had a Disclosure and Barring Service (DBS) check. The basic check will show if the care worker has a past criminal record or certain police cautions. You can find out more about DBS checks from the DBS helpline (**0300 0200 190**, [gov.uk/disclosure-barring-service-check](https://www.gov.uk/disclosure-barring-service-check)).

Employing care workers directly

You may want to employ a care worker directly, rather than going through an agency. If you do this, you'll have more control over who cares for you and what they do, but you'll also have legal responsibilities as an employer. Many people find it simpler to arrange care workers through an agency. Contact the United Kingdom Home Care Association (**020 8661 8188**, [ukhca.co.uk](https://www.ukhca.co.uk)) for more information.

Finding a care worker

A local disability organisation or independent living centre may be able to help you find a reliable care worker. Ask your local council about organisations in your area.

Unless you've been recommended a care worker, you'll need to advertise for and interview candidates. When advertising, be clear about all the tasks you want them to do. You may also want to specify skills or qualifications, for example, you may need someone who can drive, or someone with a nursing qualification.

Think about what you want to ask them in advance. Once you've found a possible candidate, ask them for references from previous employers and identification, such as a passport or visa, to prove they can work in the UK.

Your responsibilities

As a new employer, you have to:

- register as an employer (**0300 200 3211**, gov.uk/register-employer)
- get employer's liability insurance (gov.uk/employers-liability-insurance) and public liability insurance
- check your care worker has the right to work in the UK (**0300 123 5434**, gov.uk/check-job-applicant-right-to-work)
- make sure your care worker has had a DBS check – this is a criminal record check (DBS helpline **0300 0200 190**, gov.uk/disclosure-barring-service-check/arranging-checks-as-an-employer)
- decide how much to pay your care worker. If your care worker is under 25, you have to pay them at least the National Minimum Wage. If they are 25 or over, you have to pay them at least the National Living Wage. See gov.uk/national-minimum-wage-rates to see current rates, or contact Acas for more information (Acas helpline **0300 123 1100**, gov.uk/pay-and-work-rights)

- if they live with you, the accommodation you provide can count towards their pay. See [gov.uk/national-minimum-wage-accommodation](https://www.gov.uk/national-minimum-wage-accommodation) or call the Acas helpline (**0300 123 1100**) for more information
- check whether you'll be responsible for deducting tax and National Insurance contributions. A payroll company will be able to help you with wages and deductions, for a fee. Local disability organisations should be able to help you find payroll services. Disability Rights UK has a free personal budgets helpline, which is open Tuesdays and Thursdays from 9.30am to 1.30pm (**0300 995 0404**, [disabilityrightsuk.org](https://www.disabilityrightsuk.org))
- check whether you need to enrol your care worker into a workplace pension scheme (call the Pensions Regulator on **0345 600 1011** or visit [gov.uk/workplace-pensions-employers](https://www.gov.uk/workplace-pensions-employers))
- send details of the job, including terms and conditions, in writing to your care worker. If you're employing them for more than one month, you'll need to provide them with a written statement of employment within two months of the employment start date ([gov.uk/employment-contracts-and-conditions/written-statement-of-employment-particulars](https://www.gov.uk/employment-contracts-and-conditions/written-statement-of-employment-particulars)).

You'll also need to consider health and safety responsibilities, working hours and time off, holiday pay and sick pay.

You may be able to get support to become an employer from Acas (**0300 123 1100**, [acas.org.uk](https://www.acas.org.uk)), including advice on payroll, recruitment, and health and safety.



Good to know

If you're employing someone with your direct payments, there are direct payment support services that can make it easier for you to manage. They could offer payroll services that would handle wages, tax and National Insurance for you. Contact your local authority for details of local organisations ([gov.uk/find-local-council](https://www.gov.uk/find-local-council)).

If you are receiving direct payments to pay for and arrange your care, there is government guidance available to help you stay safe during the coronavirus emergency ([gov.uk/government/publications/coronavirus-covid-19-guidance-for-people-receiving-direct-payments/coronavirus-covid-19-guidance-for-people-receiving-direct-payments](https://www.gov.uk/government/publications/coronavirus-covid-19-guidance-for-people-receiving-direct-payments/coronavirus-covid-19-guidance-for-people-receiving-direct-payments)).

7. Home care agency checklist

Here are a few questions you may wish to ask an agency.

- Can you provide the care I need and meet my personal preferences?
- Have your care workers cared for someone with similar needs to mine?
- How will you choose the most suitable care worker for my needs?
- Is your organisation insured to protect my safety and interests?
- What sort of training do your care workers receive before they start work and during their employment?
- What proportion of your care workers and managers have a recognised qualification in health and social care or management?
- If I'm paying for all my care myself, do you have a standard contract I can read before signing my particular contract?
- If the council is contributing towards my care, can I see a copy of the contract they've signed with the agency?
- How can I contact your agency during the day, outside office hours and in an emergency?
- Will I have the same care worker?
- What happens if my regular care worker is sick or on holiday?
- What charges, if any, will I be expected to pay?
- What services are charged as extras?
- What payment methods are available (for example, cheque or direct debit)?
- Is there a minimum charge if I only need a small amount of care?

- Are there any hidden extras in the prices you quote? (Prices normally include National Insurance contributions, travel expenses and any VAT.)
- How much notice do I have to give if my needs or circumstances change – for example, if I need to go into hospital?
- Can I see a copy of your cancellation policy?

8. When you have chosen your home care agency

Home care agency assessments

A home care agency must carry out its own assessment of your care needs and produce a care plan with you, even if you have a care needs assessment and care and support plan from the council. The agency's care plan must be consistent with the council's assessment and care and support plan, and meet your assessed eligible needs.

You're likely to be asked about things like:

- what tasks you have difficulties with
- whether your family, friends or neighbours are involved in caring for you
- your sight and hearing, and if you have problems communicating
- how you prefer to communicate
- if you have problems with your continence
- if you have mobility problems or need disability equipment
- if you find it difficult getting into or out of your home
- if you have any mental health problems
- if you need help taking medication
- if you're safe living at home, including if you're at risk of falls
- any dietary requirements and preferences you may have
- your social interests, and any religious and cultural needs you may have.

You should also be given the opportunity to ask questions.



To do

You may wish to make a list of things you want to know before you meet the home care agency's assessor. You may also want to ask a family member or carer who understands your needs to be there when you have your assessment.

If you feel you may need independent support at the assessment with the home care agency, you could consider getting an independent advocate to come along to your assessment. For more information see our factsheet **Independent advocacy**.

What you can expect from your chosen home care agency

The agency must comply with certain standards to stay registered with the Care Quality Commission (CQC) (see chapter 3). These mean that you should be able to expect certain standards of care, for example:

- you should be involved in decisions relating to your care
- you should always feel that you are treated with dignity and respect
- your privacy should be properly respected
- medicines should be properly managed
- the agency should have procedures to keep you safe from abuse.

What you can expect from home care staff

These standards should be reflected in the way that care staff treat you, for example:

- knocking/ringing the front door bell and announcing their arrival before entering your home
- bringing an identity card

- knowing where your keys are kept if they are not in your home
- having written and signed agreements to show who keeps a set of keys to your home, or has a key safe access code
- knowing what action to take if your keys are lost or stolen
- keeping any entry codes to your house or building confidential
- knowing what to do if they can't get into your home
- securing doors and windows
- knowing what to do if you've had an accident.



Extra steps during the coronavirus emergency

Your care worker should be given guidance about extra steps they must take to protect you. This could include following hand hygiene guidance and staying away if they show any symptoms of coronavirus. They should wear appropriate personal protective equipment, such as aprons, gloves, fluid-repellent surgical masks and eye protection where necessary. This will also help to protect them if you develop symptoms of coronavirus.

If you want more information on steps you can take to keep yourself safe and well during the coronavirus emergency, visit our website (independentage.org/covid-19).

Timesheets

Some home care staff may have timesheets, to record the amount of time they have spent helping you. If you're asked to sign a timesheet, you should check that the care worker has recorded the length of the visit correctly. It may seem easier to sign the timesheet in advance,

but you may then be charged for a service you did not receive (and it would be hard to prove otherwise). It's best to wait until they've finished before signing their timesheet.

Many home care agencies use an electronic monitoring system, to record when care staff enter and leave your home. This way, they can easily track whether care workers are spending the right amount of time with you without the need for timesheets. The care worker usually needs to call a dedicated phone line and enter a code to show that they have arrived, and do the same when they leave. The care worker may ask to use your phone to do this, but you will not be charged for the calls because they use Freephone numbers.

Paying the home care agency

A home care agency should be able to provide a clear price list for its services. This should state what is included in the basic charge and what you will have to pay extra for. You should receive an itemised invoice charging you for the amount of care you have been provided with in the previous month.

9. What can you do if something goes wrong?



Remember

If you're being mistreated, neglected or taken advantage of by care workers, it's important you speak out to stop it. You have the right to be treated with respect. Contact your local council's adult social care team. You don't have to be receiving care services from your council – anyone can contact them. Read our guide [Staying in control when you're older](#) to find out more.

If you're not happy with the care you're receiving

If you're unhappy with care arranged or paid for by the council, start by trying to raise your concerns informally with a social worker. If you made the arrangements and are paying all your care fees yourself, talk to the manager of the home care agency.

You might consider complaining if:

- your services are delayed or cancelled for no good reason
- the agency gives you inaccurate or incomplete information
- there's a lack of communication about your care services
- the agency makes changes to your care that you haven't agreed to
- your needs are assessed inadequately
- you've been overcharged
- staff behave poorly.

If the council made the arrangements, they will have to hold a formal review of your care and support plan if you make a reasonable request.

You could also use the agency's complaints procedure. All home care agencies must have a complaints procedure and you should be given a copy when you agree to receive a service.

If this doesn't resolve the problem, there are two main ways of trying to resolve disagreements. Your options depend on your situation.

If the council made the arrangements for your care

You can:

- make a formal complaint
- use a solicitor to pursue a legal case.

There is a time limit for using each of these procedures. It's important not to miss it because you're trying to sort things out directly with your social worker. You must make your complaint within 12 months of the problem arising, although it's usually better to start the complaint as soon as possible.

If you decide to pursue a legal case, the time limit is much shorter. If it becomes necessary to start court proceedings, you're likely to need a judicial review. Judicial review proceedings must be started within three months of the date when there were first grounds for a legal challenge. A legal challenge can be expensive and time-consuming, so it's often better to pursue alternative routes before considering a legal challenge.

It's sometimes possible to pursue a late complaint or a late legal challenge.

If you use direct payments or pay your care fees yourself

You may decide to move to a new care agency. Whether or not you do this, you can make a formal complaint to the agency. You can also consider using a solicitor to pursue a legal case (see above).

If you decide you don't want to have a direct payment from the council anymore, the council will become responsible for making arrangements for your care. This should trigger a review of your care and support plan, which will also give you a chance to explain what went wrong and why you don't want to use the care agency again.

The Local Government and Social Care Ombudsman

An alternative to pursuing a legal case is to contact the Local Government and Social Care Ombudsman and ask them to investigate your complaint further (**0300 061 0614**, lgo.org.uk). You can contact the Ombudsman directly once you've complained to your care provider or to the council if they are arranging your care. The Ombudsman will only review your case after you have done this.

More information can be found in our factsheet **Complaints about care and health services**.

Support to make a complaint

You could arrange for an independent advocate to help you with your complaint if you need help to communicate or to have the confidence to make the complaint. See our factsheet **Independent advocacy** or call us on **0800 319 6789**.



To do

Remember to keep copies of any correspondence you send about your complaint for future reference. Make sure you keep a note of the dates that things have happened.

For more information about the options for making a complaint, see our factsheet **Complaints about care and health services**.

10. Checklist

- Get a care needs assessment to work out what your needs are
- Get a financial assessment to work out what you might have to pay for your care
- If you qualify for financial help from the council, decide how you want to manage your personal budget
- Check if you qualify for Attendance Allowance or Personal Independence Payment
- If you're arranging care yourself, get a list of home care agencies from your council, the Care Quality Commission or the United Kingdom Home Care Association
- Check the agency's policies and procedures and that they can meet your care needs, using the checklists in chapters 6 and 7
- Make sure the agency produces an individual care plan with you
- Regularly review the service you're getting to make sure you're happy with it

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