

# Adult social care: Lived experience

Healthwatch Darlington  
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# About Healthwatch Darlington

Healthwatch Darlington is the health and social care champion for people who live and work in the Borough of Darlington. As an independent statutory body, we have the power to make sure NHS leaders and other decision makers listen to people's feedback to improve standards of care.

We use feedback to better understand the challenges facing the NHS and other care providers locally, to make sure people's experiences improve health and care services for everyone.

We are here to listen to the issues that really matter to our local communities and to hear about people's experiences of using health and social care services.

We are entirely independent and impartial, and any information shared with us is confidential.

# Executive summary

Thank you to those who took time to share their experiences of Adult Social Care delivered by Darlington Borough Council

It was reassuring to see positive responses in many areas. In understanding these positive experiences and ensuring they are extended to all who use Adult Social Care, we can ensure Darlington Borough Council delivers an exceptional service to those who need it.

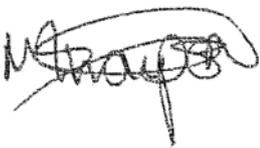
In collaboration with Darlington Borough Council, we focused on getting to know service users, empowering them and supporting their independence, helping them stay safe and service delivery teams working together to deliver an excellent experience.

Our participants told us that when the following criteria were met, they had positive experiences:

- Continuity of workers.
- Good communication, before, during and after visits or assessments.
- Friendly and caring staff who listen and are patient.
- Involvement of family where appropriate.
- Following up: workers doing what they say they would do.

The lack of these criteria led some respondents to have an unsatisfactory experience.

We look forward to working with Darlington Borough Council and their Adult Social Care service and support any further work needed to take this initiative forward.



**Michelle Thompson BEM**  
Chief Executive Officer, Healthwatch Darlington

# Introduction

The Health and Care Act 2022 gives the Care Quality Commissions (CQC) new powers that allow them to provide a meaningful and independent assessment of care at a local authority and integrated care system level.

This will enable the CQC to start to understand the quality of care in a local area or system and provide independent assurance to the public of the quality of care in their area.

Healthwatch Darlington worked in partnership with the Darlington Borough Council (DBC) Adult Social Care Team to undertake research into the lived experience of people who receive input from Adult Social Care.

This is a pilot project to discover what works best for Darlington.

The main objective is to achieve a strengths-based approach aiming to improve the way individuals with care and support needs are assessed and supported by social work and social care services by refocussing interventions away from 'need' and deficits and towards resources and 'strengths'.

The information gathered by Healthwatch Darlington will enable DBC to consider individuals' experiences in the following areas:

- Getting to know you and what's important to you.
- Empowering you and supporting your independence.
- Supporting you and helping you stay safe.
- Working together.
- Rating your overall experience.

When evaluating this project and providing feedback to DBC Adult Social Care Team, Healthwatch Darlington will consider the following:

- Understand any problems with access to social care services, early identification, and improved management.
- Improved information for people and carers regarding social care services
- Strengthen DBC Adult Social Care and Healthwatch Darlington joint working.

# Methodology

The project was delivered between June 2023 and October 2023.

Letters were sent out by Darlington Borough Council Adult Social Care to 537 individuals who had received a social care assessment, offering the opportunity to feed back on their experience of the assessment process. Individuals contacted were asked to contact Adult Social Care via the reply slip or email provided by Friday 2nd June to confirm that they would like to take part and to give consent to pass on their contact details (name, address, telephone number and email address) to Healthwatch Darlington.

37 responses were received, 25 of which (individuals or their family member) confirmed that they were happy for their details to be shared. The contact details of these 25 people were passed on to Healthwatch.

Healthwatch Darlington contacted the service users after permission was granted, undertaking telephone or face to face interviewing between 19th June and 20th October 2023. 5 service users did not take part. They were phoned several times and emailed where appropriate or letters sent but did not respond.

Where individuals required face to face interviews, or communication support to facilitate involvement, this was facilitated by Healthwatch Darlington staff and volunteers in collaboration with the adult service user and those who know them best.

20 surveys were completed.

There were two surveys, both provided as Appendix 1 and Appendix 2 to this report. The two surveys and the questions within them were provided by DBC and were structured to enable aspects of the Health and Social Care Act and CQC requirements to be fulfilled. Questions asked only included those provided by DBC but varied in their delivery according to individual communication needs, as some participants found the questions difficult to understand. They are indicative of the approach to gathering views and the areas to be explored.

Survey 1 had 11 respondents. One of those respondents was confused when questions were being asked and didn't seem sure of who they had seen in Adult Social Care. We did not feel it was appropriate to continue and therefore there were 10 completed surveys.

Survey 2 had 9 respondents. One respondent did not want to complete the survey and just wanted to let us know that the whole process was “shocking”. Therefore, there were 8 completed surveys.

It should be noted that service users were not always able to differentiate who the worker was, sometimes blurring roles of the care worker / care manager / social worker.

## Engagement Method

DBC Adult Social Care Team identified and sought permission from adult service care users and/or carers.

Healthwatch Darlington contacted them as follows:

### Making Contact

- Phone or email – Leave 1 message or text. Maximum of 2 follow up calls or texts.
- Letter – One letter to explain purpose of the interview and asking for contact to arrange a time to meet. Maximum of 2 follow up letters.

### Introduction

- I am [name] from Healthwatch Darlington and we are calling on behalf of Darlington Borough Council.
- We are gathering feedback on your recent contact with Adult Social Care as part of Darlington Borough Council quality checks.
- This is completely voluntary, you don't have to take part, but if you do it will help Darlington Borough Council to improve.
- If you need additional support to take part or communicate, I am happy to adjust how we work – coming to see you or meet with you, or having people who know you well there to support you.
- Would you be willing to be interviewed, and if so, is there any support you need?

See Appendices 1 and 2 for the agreed questions, each survey to be delivered to half the participants.

20 service users were interviewed, with some having support from their carers.

# Survey findings: Summary

## Survey 1: Getting to know you and what's important to you

The majority of participants responded positively that workers took the time to get to know them as a person including their culture and beliefs, what was important to them, and their views and wishes.

Areas of strength were when there was continuity of workers (leading to a good rapport), emotional support, patience, friendliness.

Areas of concern were where there was lack of capacity which service users believed to be the cause of things being agreed but not carried through.

6 of the 10 respondents scored their worker 10 out of 10 (excellent) in this section. All scored 7 or above.

## Survey 1: Empowering you and supporting your independence

It was a mixed response concerning ease of getting in touch with their worker. Most were clear about what would be discussed during meetings or conversations and what would happen afterwards. Most respondents said their worker gave them relevant information or advice in a way that was suitable for them, or put them in touch with people who could, and felt supported to understand their choices and options. Most felt involved in developing their support plan and exploring how their needs could be met.

Only 2 were aware they could have completed an online self-assessment, and only 2 said this would have been a viable option for them.

Whilst the majority was positive, for those who did not have a positive experience, concerns centred around getting in touch with, or getting a response when there was a concern, with a lack of understanding on who had overall responsibility. In addition, using the phone was sometimes a communication barrier, but no other form of communication was offered. Family members were also heavily relied upon, rather than support from the council.

4 of the 10 respondents rated Darlington Borough Council 10 out of 10 (excellent) in this section. All scored 6 or above.

## Survey 1: Rating the overall experience

The areas participants told us could be improved included using adapted paperwork and taking more time, a step-by-step approach to the assessment, rather than rushing through it.

There was a mixed overall experience, with 4 of the 10 respondents rating the overall experience 10 out of 10 (excellent), 1 rated it zero, and 1 rated it just 1 out of 10.

## Survey 2: Supporting you and helping you stay safe

There was a mixed response in terms of workers finding out participants views on the support provided and whether it was meeting their needs, and tailoring support to the individual. Some knew who to contact if they had problems with their care and support, others did not.

Those who were positive said they had a thorough interview and family were included.

Those who were negative had concerns about poor communication such as not being kept up to date with what was happening, or not fully explained to what was happening. Concerns were centred more around the person carrying out the process than the process itself, including lack of continuity of the person they speak to.

All felt safe in their home and their community, but not all knew who to contact if this wasn't the case. There was a mixed response in terms of their worker discussing the suitability of their housing situation and helping them stay safe and independent.

1 of the 8 respondents rated Darlington Borough Council 10 out of 10 (excellent) in this section. 3 scored them zero out of 10.

## Survey 2: Working together

Just over half of respondents told us other professionals were not included in their care. Two quoted financial assessors being brought in. There was a mixed response regarding how well staff involved in their care worked together. Some had no issues, others expressed concern regarding communication between the parties.

6 out of 8 respondents told us they were not offered a Carer's Assessment.

There was also a mixed response concerning signposting to local groups who they could get involved in with things they valued. Some workers did, and some did not, but when they did, it worked well.

Most knew how to contact Adult Social Care if their needs changed. It was a mixed response when asked if the worker did what they said they would do.

2 of the 8 respondents rated Darlington Borough Council 10 out of 10 (excellent) in this section. 1 scored them zero out of 10, whilst 2 scored them 1 out of 10.

## Survey 2: Rating the overall experience

Things participants told us they would like to change included:

- Consistency of workers.
- Social workers undertaking assessments when family members are present.

- Speaking about mental health.
- More timely financial assessments.

1 of the 8 respondents rated their overall experience 10 out of 10 (excellent). 1 scored them zero out of 10, whilst 2 scored them 1 out of 10.

They told us 10 out of 10 would look like:

- Returning emails and phone calls.
- Having a proper social care worker present and listens to you.
- Not having to chase things up.
- Better communication.
- More support and assessing – less reading reams of paperwork.

# Survey responses: full details

## Survey one

10 people completed the survey.

### Getting to know you and what's important to you.

We asked participants if the worker took time to:

- Get to know them as a person and find out what is important to participants.
- Find out about things like background, culture, religious or spiritual beliefs.
- Find out about who is important in the lives of participants and their social connections with family, friends, and neighbours etc.
- Find out whether the participant was in work, education, or volunteering, or interested in doing these things.
- Ask about participants personal strengths and the things which helped them cope.
- Ask about the views and wishes of the participants and what they thought could help.

	What is important to the person	Background, culture, beliefs	Important people and social connections	Work, education, volunteering	Personal strengths	Views and wishes
Yes	10	9	9	7	9	9
No	0	0	1	1	1	1
Don't know	0	1	0	0	0	0
N/a	0	0	0	2	0	0

Comments from those who responded yes to the above questions included:



“Continuity of person so far to date but this could change.”

“By preference would like to attend church but is realistic about the feasibility of it due to time constraints.”

“Very supportive, for example when parent died just before covid.”

“I know my neighbours well and keep in touch with family. Care workers help with this.”

“Very patient in find out what (service user) wanted.”

“Asked about relatives and this was included in the handover from previous social worker.”

“Very good at sorting things out, especially if family support not available.”

“There is not a lot of capacity. Can agree to things but then forgets so has to be repeated. I like continuity of people and carers, and this hasn’t happened since the transfer took so long.”

A couple of participants advised that communication was via a parent.

For a participant who had aphasia and was unable to verbalise their thoughts, an Occupational Therapist and a Speech Therapist were present at the interview.

**We asked participants if they felt the worker understood their experiences.**

		Comments
Yes	9	They have increased practical support as health needs greater now. Worker very friendly talks to me all the time. [Name of worker] knows me well
Mixed	1	Yes and No. Lost the agency we were working with due to the amount of time it took to organise the new care package. They like consistency and like to build a rapport when it took too long to transfer the care staff left and new ones were appointed but still not covering the care package needed getting about half of what should be delivered.

We asked if the assessment felt like a good conversation with the worker.

		Comments
Yes	8	Went through day and hours increased as a result. Can call her things and I know her.
Mixed	2	Good but didn't understand some of the needs as looked after person likes to build a rapport and if they don't get one then they don't want them, this is why it was hard when it took so long, and the usual carers had to leave. At one point there was no care in place at all. I don't know if it did, or it didn't. In the middle.

We asked, on a scale of 1 (poor) to 10 (excellent), overall, how well they thought the worker got to know them as a person and what is important to them.

Score	1 - 6	7	8	9	10
Responses	0	1	1	2	6

### Empowering you and supporting your independence.

We asked participants how easy it had been to get in touch with their worker.

6 responded that it was easy or quite easy. They quoted either using the call button or alarm system in use, social care was very good and would come to visit, or via sending a message.

4 stated it wasn't easy and quoted that it takes days to get a response from email or form filling, no one taking responsibility (social worker says phone agency – agency says phone social worker), and 1 participant said they can't use the phone and answer phone messages were a barrier to them.

We asked participants if they were clear about what would be discussed during their meetings or conversations, and what would happen afterwards.

8 responded positively. One told us they were given a phone number for support.

1 responded negatively and told us they received a call to say a worker was coming and felt "no further forward" after the visit.

1 told us they understood some of it but not all of it.

**We asked participants if the worker gave them relevant information or advice or put them in touch with people who could.**

7 responded positively. One told us they were left with reading materials on care providers.

2 responded negatively. One participant told us the worker was going to, but some things haven't come through and other things took time.

1 told us they already had the information they needed.

**We asked participants if they felt supported to understand the choices and options available and to make decisions.**

7 responded positively. One told us adapted paperwork was used. Another told us staff were not allowed to influence, so a family member helped find suitable things for her parent.

1 responded "partly" due to finance restrictions around the Darlington framework, understanding direct payments and the agreement about what they can be used for, understanding how the payments can be used. Clarity on what they can be used for agreement is not clear.

2 responded negatively. One respondent told us they were not given a choice and were told to go down the PA route, but it took so long that they had to take on an agency.

**We asked if the worker arranged for information to be provided in a way which was suitable for them.**

8 responded positively.

1 told us it was asked for the carer but not the person cared for.

1 responded negatively and told us they preferred information in a letter but were always given information over the phone which they don't understand. The agency told them they do not provide letters and can only provide phone contact.

**We asked if they felt involved in developing their support plan and in exploring how their needs could be met.**

7 respondents said yes and told us that support workers stayed and helped the participant understand or provided a poster with information on.

3 respondents gave a mixed response advising that support information was supplemented by the carer.

**We asked if there anything that was discussed during the assessment that the participant didn't fully understand.**

Comments included:

"Information was given beforehand that her support helped her understand."



“Care worker help and family.”

“Support worker always made sure she understood.”

“Yes, the direct payment and the flexibility of a printed copy of the agreement would also be helpful explaining what can and can’t be done with it.”

“A couple of things, but due to profound hearing loss.”

**We asked if participants were given any information or signposting to read which made what was discussed clearer, and if so if it helped them.**

There was a mixed response with the following comments:



“Six monthly, then yearly. Would ask for an assessment if necessary.”

“Talk it over staff help if don’t understand sister helps too.”

“Not yet comes when needed.”

“Copy of agreement but still not clear.”

“Yes. Prompts and tools were taken for her mother to help her understand.”

“Always has daughters support.”

**We asked if participants understood what would happen next such as a review timeline, further contact, interventions, case closed or offer of a carers assessment etc.**

7 responded positively.

3 responded negatively.

**We asked if participants were aware that they could have completed an online self-assessment.**

2 respondents said yes.

8 respondents said no.

**We followed this up by asking if they had been aware of this option, if they would have used it, and if not, why not.**

2 respondents said yes.

2 respondents were not sure.

6 respondents said no.

We asked on a scale of 1 (poor) to 10 (excellent), overall, how well did they think Darlington Borough Council has supported them to be independent, and in control of decisions about their life.

Score	1 to 5	6	7	8	9	10
Responses	0	2	2	2	0	4

One commented it “was well short of the package that should be delivered might have the possibility of getting another agency involved as first one did not have capacity to cover package.”

### Rating the overall experience

We asked if they could have changed anything about the assessment process, would they have done, such as time, location, method, approach of the person completing the assessment or anything else.

Comments included:



“Sometimes they forget to use adapted paperwork.”

“Don’t think there would be anything wouldn’t change anything.”

“Do things step by step she makes time to talk, and she doesn’t rush.”

“Nothing all good [support worker] very good.”

“No just about information rather than the process.”

“Very pleased with actual assessment but feels this may have been due to first experience. She felt she knew more what to ask this time and what could be on offer. E.g., She had previously bought a relative a wheelchair, but one was provided this time.”

“Done in one day this has been spread over several and still ongoing.”

“Wouldn’t change anything.”

We asked how participants would rate their overall experience of working with Adult Social Care from 1 (poor) to 10 (excellent). We also asked what 10 out of 10 would look like.

Score	1 - 4	5	6	7	8	9	10
Responses	0	1		3	2		4

Comments included:

"As much care as wanted and DBC to pay for it. If planning a day out extra staff needed for cover. Some concerns about her share of payments as support agency changing and finances not sorted. Waiting for adaptations to house as a result of recent assessment."

"Very happy with the service, happy with all services."

"Do things step by step she makes time to talk, and she doesn't rush."

"N/a. Didn't understand the question (people are good who help me)."

"Something more bespoke tailored to the person examples of use of Direct payments, more comprehensive information of the things available. (Other child social worker off sick no one informed them trying to get hold of them leaving messages and calling. No one checking people falling through the gap have a very negative impact on child).

"More continuity in carers standards as individuals differ in how they treat her mother. Teams changed at first and then mother used to what was on offer even though not too happy with service. Carers are not in appropriate time to give meals, medication, get dressed. Catch 22, carers not involved as much as daughter would like but they say they don't need to be there, she feels she is only there because they aren't. Issues raised about capacity. Daughter feels she was told this was done but using past experience does not feel it has. Way capacity was dealt with when mother was going into respite seems to confirm this."

"Everything being perfect not having to chase things up/people up. Having the care in place that has been assess for not half a package."

"Would like to have been listened to. Feels that other people were given priority. Feels she was not saying the right things to be heard. (direct experience of people with less needs getting more and earlier support. At one point rang social worker every week for 10 weeks but got no response Found Age UK extremely helpful

## Survey 2

8 people completed the survey.

### Supporting you and helping you stay safe

We asked if participants workers found out their views about their current support and whether you felt it was meeting their needs.

4 respondents said yes. One commented the full interview lasted about 2 hours and was very thorough. Another commented the interviewee and family were included and discussed service users' needs.

4 responded no. One commented that the service users' needs were not always met, and they were "not happy with the person carrying out the assessment. Care review persons conduct was not good when in my house." Another told us that the service user had been in a care home for seven months following a fall and expected to be there for 6 weeks. Does not appear to have any knowledge of what is going to happen,

**We asked if the council arranged support with them, did they think this is right for you as a person.**

4 said yes.

2 gave a mixed response. One commented "Not entirely. Something is not quite right but can't quite say what it should be. Would like help to make choices." Another commented "Some have been good, others not so much. We have had a different member of staff each time. We have to repeat the story each time."

1 said no, as the service user wanted to be in supported housing.

1 told us the council did not arrange support.

**We asked participants if they felt their worker tailored the support to them as an individual.**

5 said yes. One qualified their response advising "after some thought, think there is a lack of information.

3 said no. One commented "Not really, we rang for help to find the right home but were told to look for ourselves as we were self-funding. Another told us "Concerns raised about pet which has been in kennels whilst this person is in the home. He had no knowledge of which kennels was keeping his dog. The expected kennels was full, so was placed elsewhere but this information was not passed on. The bill had not been paid and the council was supposed to pay towards this." Another said "Self-financing. Was not given any support at all. Family left to research and find care home."

**We asked if participants knew what to do if they had problems with their care and support.**

Responses included:

"Asks housing manager or pharmacy where he picks up his meds daily."

"Yes DBC - No point contacting someone doesn't get back to you."

"I tell the people that come."

"No but I'm not really a complainer. I would possibly ask to speak to a manager at SCD."

One respondent named a couple of names of people who work in the council and had expected a visit from one today before our arrival. No-one was there, he had not been informed of any change to appointment.

Another was not given any information and googled for phone number for health and social care.

**We asked if their worker discussed their current housing and whether it was suitable for them.**

3 said they had.

1 said they had not.

Other responses included:

"Really pleased with flat."

"Steps at the front they were put in for my wife with the grips which help me, I have a wrist band if I need help, I can press for help I've been to the falls clinic."

One told us they had no knowledge of any discussion taking place with them. There had apparently been a meeting recently. Their next of kin was not invited and they had not been informed of what had been discussed.

Another told us the service user was in hospital and due for discharge. Family felt put in a position where they had to look after relative themselves whilst looking for care home.

### **We asked if participants felt safe in their home and in the community.**

All responded positively. Comments included:

"I can lock my own doors and have a key pad for the cares to get in."

"Mostly, depending on dementia symptoms."

"Safe and looked after in care home."

### **We asked participants if they knew who to contact if they felt unsafe or being mistreated.**

2 said no.

2 said family members.

1 told us they felt safe and had no concerns, "I can lock my own doors".

2 said yes but did not explain who.

1 said a manager at home or SCD.

### **We asked how well they thought their worker's input has helped them to stay safe, while also being as independent as possible.**

Comments included:

"Very good I get the help I need the carers help me do jobs I can't do or need doing no trouble with them."

"No issue."

"Newest worker has made some very good comments."

"Very good."

A couple of respondents told us they had no input from their worker.

We asked participants to rate, on a scale of 1-10, where 1 is very poor and 10 is excellent, the overall effectiveness of the support Darlington Borough Council has provided them with

Score	0	1-4	5	6	7	8	9	10
Responses	3	0	1	1	1	1	0	1

One respondent rated DBC nil but told us they would rate their care package as a 9.

## Working together

**We asked if the worker involved other professionals involved in their care while working with participants.**

5 said no.

1 said yes but felt there was no consistency, "communication is poor as we have had a different social worker every time".

1 told us someone had been to see about their finances and stayed for 10 minutes and took financial documents away. This appears to have been arranged by his next of kin and they have not had an update yet.

Another said a financial assessor attended the meeting.

**We asked how well participants thought the staff involved in their care worked together and communicated with each other.**

4 said there were no issues.

1 didn't know.

2 responded negatively and said "poorly, no comms between one to the next", and "non-existent".

1 told us they thought very highly of care provided by their named worker in the home, but care deteriorated when they were not there, and the participant felt forgotten.

**We asked if the worker found out whether any family or friends provided participants with care or support.**

4 said they didn't know if this happened.

2 said yes, "family always there to help and always have been".

1 said "up to a point".

1 said they felt that the family were put in a position to look after patient and as they could do this there was no form of assessment other than hospital.

**We asked if they were offered a Carer's Assessment**

6 said no.

2 said yes. One of those chose to employ privately and did not proceed.

**We asked if family and friends were involved in discussions about their care and support as much as they wanted them to be.**

5 said yes.

3 said no.

**We asked if the worker talk to participants about services and groups in the local area that could support them or enable them to get involved with things they valued.**

4 said yes. One told us they were referred to a Social Prescriber who was very good at signposting and put them in touch with DCCS who have been fabulous. The service user was attending AUKD twice a week, in touch with Alzheimer's Society, Fire Brigade etc.

1 wasn't sure.

3 said no.

**We followed up by asking if the worker had done the above, did participants get enough information and support from the worker to get involved.**

3 said yes. One told us "it was great, attended dementia café, games for the brain etc. [Service user] still attends now. People really help each other and share information about useful services and groups.

1 was not sure.

2 said no.

**We asked if participants knew how to contact Adult Social Care if their needs changed.**

5 said yes, advised they had either literature or contact numbers.

1 told us they would just google it.

2 weren't sure. One told us they don't have a social worker anymore.

**We asked if the worker did what they said they would do.**

3 said yes.

2 said partially.

2 said no. One commented the worker "writes down info but doesn't follow up. Swallowed up with work load." Another told us they were told they would be sent a financial assessment report but have not received one.

**We asked, overall, on a scale of 1-10, where 1 is very poor and 10 is excellent, how would you rate the way in which Darlington Borough Council has worked together with other people and organisations involved in your life?**

Score	0	1	2-3	4	5-6	7	8	9	10
Responses	1	2	0	1	0	1	1	0	2

## Rating the overall experience

We asked if participants could have changed anything about the assessment process, would they have done, for example, the time, location, method, approach of the person completing the assessment, anything else. If yes, what would they have changed?

Spoke about impact of mental health etc and wanting to be 'normal'.

Person completing the assessment to be a social care worker and also come when daughter is present.

Wouldn't change anything.

Difficult on going. Never get any help

Nothing other than the consistency of workers. Original/full assessment was in own home and very extensive.

Nothing to change

States that no assessment has taken place.

Felt brushed aside. Needed help and didn't get it, feel this was due to self-financing, Called for financial assessment in January as funding running low, not conducted until 5 months later after several phone calls. Feels that they washed their hands of situation, Deprivation of Liberty assessment was very good. Patient in hospital unable to look after self. As family could for a short period of time, he was discharged. They are not aware of any social work input.

How would you rate your overall experience of working with Adult Social Care from 1 to 10, where 1 is very poor and 10 is excellent?

Score	N/a	0	1	2-3	4	5-6	7	8	9	10
Responses	1	1	2	0	1	0	1	1	0	1

We asked what 10/10 would look like.

One spoke of living a life without having ADHD, mental health issues, or memory problems.

"People returning emails and phone calls having a proper social care worker present and someone who listens to you."

“More cleaning but costs too much.”

Another provided the following: Not having to chase everything up. Assessment appears very good, but nothing comes out of it. Less than satisfactory. Lack of communication. The service user has worked with the social worker for several years and worries to say anything and does not want to upset them. Lack of communication asking for something and not followed through. They have got to know the social worker and they are nice, but they don't want to upset then when things don't get done.

“An assessment and pairing up of the person to the home, so that the person ends up in the best place for them, regardless of how the place is funded. People need help to decide on the best place for their loved ones without having to read reams of paper.”

“To be listened to. Wheels put in motions. Would like to see pet.”

“Empathy for situation, Interaction and support at each stage, knowledge passed on. Financial assessment was good but no follow up.”

# Conclusion

We are grateful to those who participated in our Adult Social Care: Lived Experiences survey.

There were many positive responses and areas which could be built upon to ensure a positive experience for all including:

- Continuity of workers
- Good communication
- Friendly and caring staff who listen and are patient.
- Involvement of family where appropriate.
- Following up: workers doing what they say they would do.

It was the lack of these points which led some respondents to have an unsatisfactory experience.

# Recommendations

When asking the prescribed survey questions to service users, representatives of Healthwatch Darlington noted that the service users often felt the questions were complicated, and therefore, we were left unsure of whether the information gathered would satisfy what DBC are endeavouring to achieve.

We recommend that we discuss these results and any further planned work in this area with DBC to offer our experience of this demographic.

Working collaboratively with DBC, we can understand required outputs and offer our expertise in gathering insights to enable better outcomes from any future information gathering exercises.

# Response from Darlington Borough Council

*“Darlington Borough Council would like to thank Healthwatch for undertaking this study, and detailed report into the experiences of people and their unpaid carers, who have engaged with us, as well as those who gave their time to contribute and share their feedback.*

*It is recognised that such a small sample will only provide us with a snapshot as to people’s experiences, and following a time of significant pressure as we emerge from the pandemic with increasing demand for support. However, as a service, it is vital that we hear the voices of those we support, and who access our services to understand their experiences, what we do well, and how we can improve. The report highlights a number of areas where we are doing well, but also areas where we can improve, which we will commit to doing so.*

*Since the completion of this study, we have implemented various measures to support the continued improvement of our service and the experience of those engaging with us, as well as identifying further opportunities for improvement within our ongoing transformation plan.*

*We have also taken further lessons as to how we seek feedback and engage with those using our services through the development of our Engagement and Coproduction Strategy to ensure peoples voices are at the forefront of our work.”*

## Next steps

To create next steps for adult social care engagement and CQC compliance, we suggest Darlington Borough Council:

- Review current practices and identify areas for improvement.
- Conduct stakeholder consultations to gather feedback and input.
- Develop a comprehensive engagement strategy that aligns with CQC requirements.
- Implement training programs for staff to ensure compliance with CQC standards.

- Establish regular audits and assessments to monitor progress and identify any gaps.
- Continue to evaluate and adapt the engagement and compliance strategies based on feedback and evolving regulatory requirements.

# Acknowledgements

## Thank you from Healthwatch Darlington

Thank you to those members of the public who took part in our interviews and shared their experiences to help improve services, and our volunteers who supported us with this work.

# Appendix 1: Survey 1 questions

## 1. Getting to know you and what's important to you.

- Did the worker take time to get to know you as a person, and find out what is important to you?
- Did the worker find out about things like your background, culture, religious or spiritual beliefs?
- Did the worker find out about who's important in your life, and your connections with family, friends, and neighbours etc?
- Did your worker find out whether you were in work, education, or volunteering, or interested in doing these things?
- Did the worker ask about your personal strengths/the things which help you cope?
- Did the worker ask about your views/wishes, and what you thought could help?
- Did you feel the worker understood your experiences?
- Did the assessment feel like a good conversation with the worker?

*Overall, on a scale of 1-10, where 1 is very poor and 10 is excellent, how well do you think the worker got to know you as a person, and what is important to you?*

## 2. Empowering you and supporting your independence

- How easy has it been to contact the worker?
- Were you clear about what would be discussed during your meetings or conversations, and what would happen afterwards?
- Did the worker give you relevant information or advice, or put you in touch with people who could?
- Did you feel you supported to understand the choices and options available, and to make decisions?
- Did the worker arrange for information to be provided in a way which is suitable for you?
- Did you feel involved in developing your support plan/exploring how your needs could be met?
- Was there anything that was discussed during your assessment that you didn't fully understand?
- Were you given any information/ signposting to read which made what was discussed clearer? Did this help?
- Do you understand what will happen next? e.g., review timeline/further contact or interventions/ case closed/ offer of a carers assessment offer etc
- Are you aware that you could have completed an online self-assessment?
- If you had been aware of this option, would you have used it? If not, why not?

*Overall, on a scale of 1-10, where 1 is very poor and 10 is excellent, how well do you think Darlington Borough Council has supported you to be independent, and in control of decisions about your life?*

## 3. Rating the overall experience

- If you could have changed anything about the assessment process, would you have done? e.g., the time, location, method, approach of the person completing the assessment, anything else. If yes, what would you have changed?

*How would you rate your overall experience of working with Adult Social Care from 1 to 10, where 1 is very poor and 10 is excellent?*

- What would 10/10 look like?

# Appendix 2: Survey 2 questions

## 1. Supporting you and helping you stay safe

- Did your worker find out your views about your current support and whether you feel it is meeting your needs?
- If the Council arranged support with you, do you think this is right for you as a person?
- Do you feel your worker tailored the support to you as an individual?
- Do you know what to do if you have problems with your care and support?
- Did your worker discuss your current housing and whether it is suitable for you?
- Do you feel safe in your home and in the community?
- Do you know who to contact if you are unsafe, or being mistreated?
- How well do you think your worker's input has helped you to stay safe, while also being as independent as possible?

*Overall, on a scale of 1-10, where 1 is very poor and 10 is excellent, how would you rate the effectiveness of the support Darlington Borough Council has provided you with?*

## 2. Working together

- Did the worker involve other professionals involved in your care while working with you?
- How well do you think the staff involved in your care work together and communicate with each other?
- Did the worker find out whether any family or friends provide you with care or support?
- Did they offer them a Carer's Assessment?
- Were your family and friends involved in discussions about your care and support as much as you wanted them to be?
- Did the worker talk to you about services and groups in the local area that could support you, or enable you to get involved with things you value?
- If so, did you get enough information and support from the worker to get involved?
- Do you know how to contact Adult Social Care if your needs change?
- Did the worker do what they said they would do?

*Overall, on a scale of 1-10, where 1 is very poor and 10 is excellent, how would you rate the way in which Darlington Borough Council has worked together with other people and organisations involved in your life?*

## 3. Rating the overall experience

- If you could have changed anything about the assessment process, would you have done? e.g., the time, location, method, approach of the person completing the assessment, anything else. If yes, what would you have changed?

*How would you rate your overall experience of working with Adult Social Care from 1 to 10, where 1 is very poor and 10 is excellent?*

- What would 10/10 look like?



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