

# **WILTSHIRE CARERS' VOICE**

## **Spring 2009 Survey Results**

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**Please Note**

This report is a representation of the views and perceptions of members of the Carers' Voice panel and in this special case of the Carers receiving the Carers' Support Agencies newsletters in autumn 2008 and is not the representative opinions of all Carers in Wiltshire even though similarities may be present. In order for the results of future questionnaires to be better representative, recruitment of Carers to the Carers' Voice panel is ongoing.

# 1. INTRODUCTION

## 1.1. *Background*

- 1.1.1 Carers can be defined as people looking after or giving help or support to family members, friends, neighbours or others, because of long term physical or mental ill-health or disability, or because of problems associated with old age.
- 1.1.2 The 2001 Census revealed that in England and Wales, there are an estimated 5.2 million people providing **unpaid** care. This equates to 10% of the population. In Wiltshire, the 2001 Census indicated that there are 39,886 Carers, which accounts for 9% of Wiltshire's population.
- 1.1.3 Because voluntary or unpaid Carers provide services that in many cases would need to be provided by other agencies, it is essential to understand more about the needs of Carers and those they care for so that services and support mechanisms are available when needed.
- 1.1.4 In 2002, in recognition of the range of pressures that Carers can face, a new countywide initiative called Carers' Voice was launched. The aim of Carers' Voice is to enable a representative group of Carers to share their views, experiences and perceptions on the services and issues which affect them, in order for agencies to improve their services for the benefit of all Carers.
- 1.1.5 There is a steering group of the Carers' Voice project, which is made up of representatives from Wiltshire Council, Carers' Support Agencies, NHS Wiltshire and Carers themselves. The steering group meets to discuss issues relating to the running of the project, including the questions that will be asked in the surveys to the wider Carers' Voice Panel and to use their experience to provide an interpretation of survey findings.
- 1.1.6 Carers' Voice is only possible because of the time voluntarily given to the project by Carers, both in terms of the Carers who sit on the steering group, and also the respondents to the surveys themselves.
- 1.1.7 This report analyses the results of the eleventh Carers' Voice questionnaire, which was sent out to panellists in the spring of 2009. In addition to sending the survey to just the Carers' Voice panel, the questionnaire was distributed by the Carers Support Agencies in their newsletters. Carers not on the panel were invited to complete the questionnaire and if this proved interesting to them, to become full members of the Carers' Voice panel.

## **1.2. Panel Makeup**

- 1.2.1 The Carers' Voice panel has been established to try and reflect the caring community across Wiltshire and consists of men and women from the age of 18 upwards.
- 1.2.2 It includes Carers of adults and children and of people with a range of caring needs from physical and learning disabilities to mental health needs. Carers' Voice panellists include people who combine caring with paid employment, people who care for a few hours a week and those who care for someone all day and every day (the majority on the panel spend over 40 hours per week on caring tasks).
- 1.2.3 The panel does not however include people who are employed to undertake caring tasks as their profession.
- 1.2.4 Currently over 70% of Carers' Voice panellists are female.
- 1.2.5 Around 70% of Carers' Voice panellists are aged between 45 and 74 and nearly 10% of panellists are aged 75 and over.
- 1.2.6 At the time of mailing this survey, the total number of Carers on the panel stood at 346.

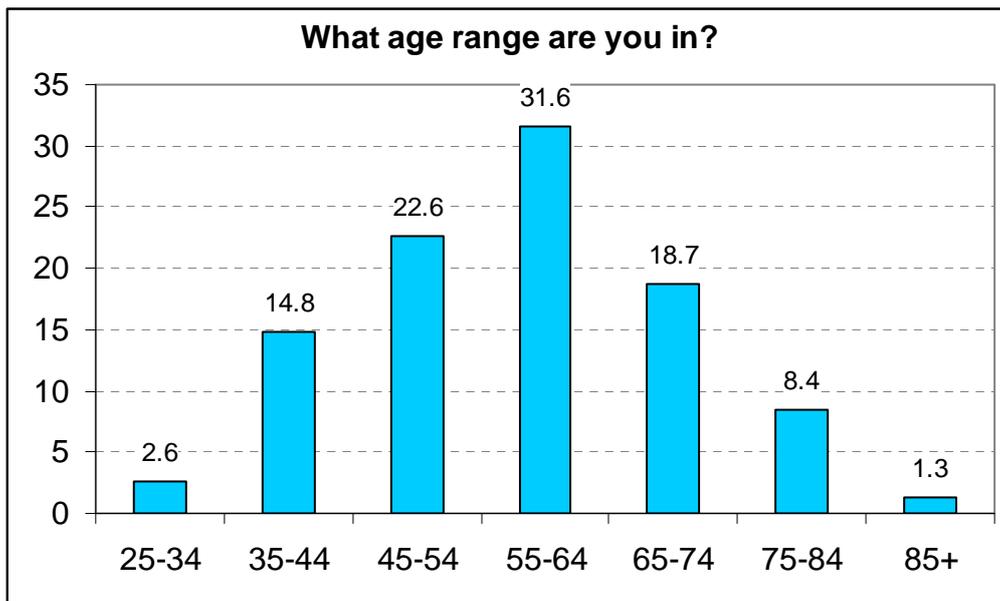
## **1.3. Returns Profile**

- 1.3.1 In a change to the normal distribution methodology, it was agreed by the Steering Group that in addition to sending the survey to the Carers' Voice panel, questionnaires would be distributed via the Carers Support Agencies' newsletters. This would circulate the survey to a further 4,000 Carers in Wiltshire and was intended to both boost the number of responses to this survey and to encourage Carers to join the panel after seeing what filling out the form entails.
- 1.3.2 Panellists were sent the eleventh Carers' Voice questionnaire at the beginning of April, 2009. By June, this questionnaire had achieved a response rate of 46.8%, with 162 questionnaires received from panellists. Given that panellists had around over 8 weeks in which to return the survey, this response rate is slightly lower than that seen for other surveys, some of which had even shorter windows of opportunity to respond
- 1.3.3 A further 451 Carers not currently on the panel also returned completed questionnaires after having received them through the Carers' Support Agencies' newsletters. This brought the total of responses to 613. Although this does make the results more statistically reliable, it does bring other problems. As these respondents are not on the Carers' Voice panel, we do not know who they are or any other details about them. This makes analysis of the

results harder and could restrict detailed analysis (age, gender, location, etc.) to the 162 panellists who responded.

1.3.4 In terms of gender, a higher proportion of Carers' Voice panellists are females, which was reflected in the gender split of all responses to the questionnaire; 27% of respondents to this survey were male, 73% were female.

1.3.5 The chart below shows the age distribution of respondents. The majority of respondents (60%) are aged 55 and over, which reflects the age structure of the panel.



Base: 162

1.3.6 It should be noted that the age recorded for panellists is that recorded at the time of signing up to Carers' Voice, and therefore some respondents may, in reality, have moved across age brackets in the intervening time.

1.3.7 Responses were received from Carers' Voice members across the County. However the greatest proportion of responses was received from panellists living in the old West Wiltshire district; this reflects the make-up of the panel as a whole. The proportion of panellists from each of the four districts is not in line with overall populations. Steps are being undertaken to reduce the disparity in the panel between West Wiltshire and the other districts.

1.3.6 It should be noted that the base size to the questionnaire is a relatively small one, and some questions in this report are only answered by a fairly small proportion of respondents. Therefore results should be treated with caution, especially those where only a minority of respondents have given an answer, or where the response is split up rather than presented in total.

## **1.4. Questionnaire Topics**

1.4.1 The members of the Carers' Voice Steering Group jointly decided upon the questions which appeared in the questionnaire. The questions in the eleventh questionnaire covered the following topics, which were thought timely by members:

- Registering as a Carer at the GP's surgery
- Access to transport and affordability
- Agency care staff
- Discharge policies from different hospitals

## **1.5. Reporting the Results**

1.5.1 In writing this report, the knowledge and experience of the Carers' Voice Steering group has been used to add insight to many of the findings. Their experience has been used to add explanation and background to the results and add to the understanding of what these figures say.

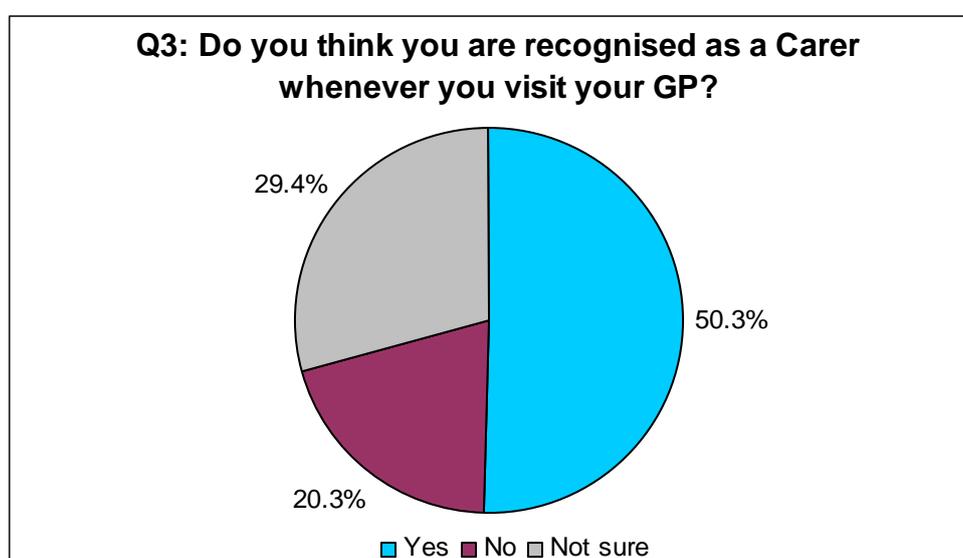
## 2. Results

### 2.1. Registering as a Carer at the GP's

2.1.1. In discussion with the Steering Group, it was noted that Carers often have difficulty in accessing services for themselves or that their GP has no record of them being the carer of the person they look after. This section of questions was designed to look into this issue, assess the standard of registration and find out the level of help which Carers receive.

2.1.2. Carers were first asked to state whether they were registered as a Carer at their GP's surgery. This showed that virtually three quarters or 74.3% of respondents said were registered as being a Carer at their GP's surgery.

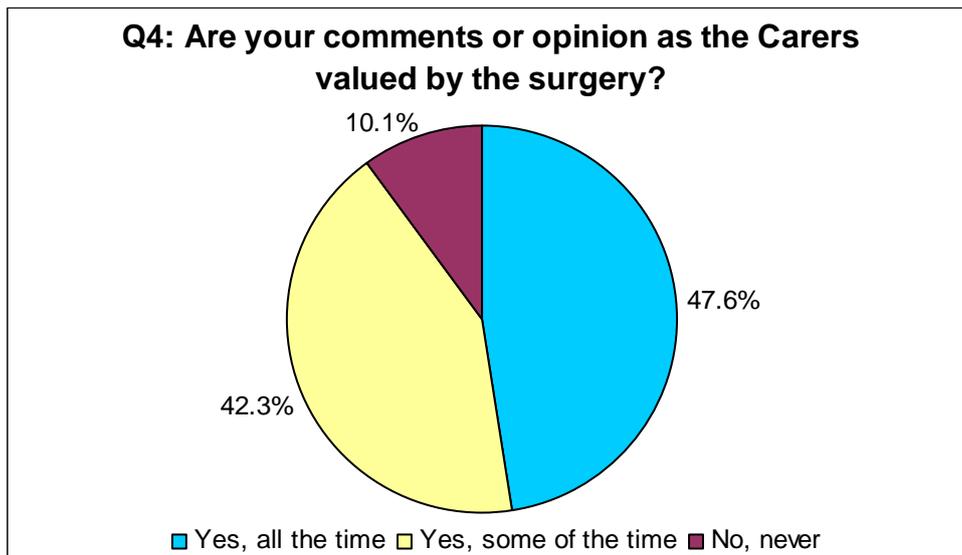
2.1.3. Carers were also asked whether they felt they were actually recognised as a Carer by their GP and treated as such, either by receiving particular treatment or services or being present when the person they care for is given test results, etc. The chart below shows that half say they are recognised, a fifth say they are not, whilst 29.4% "don't know":



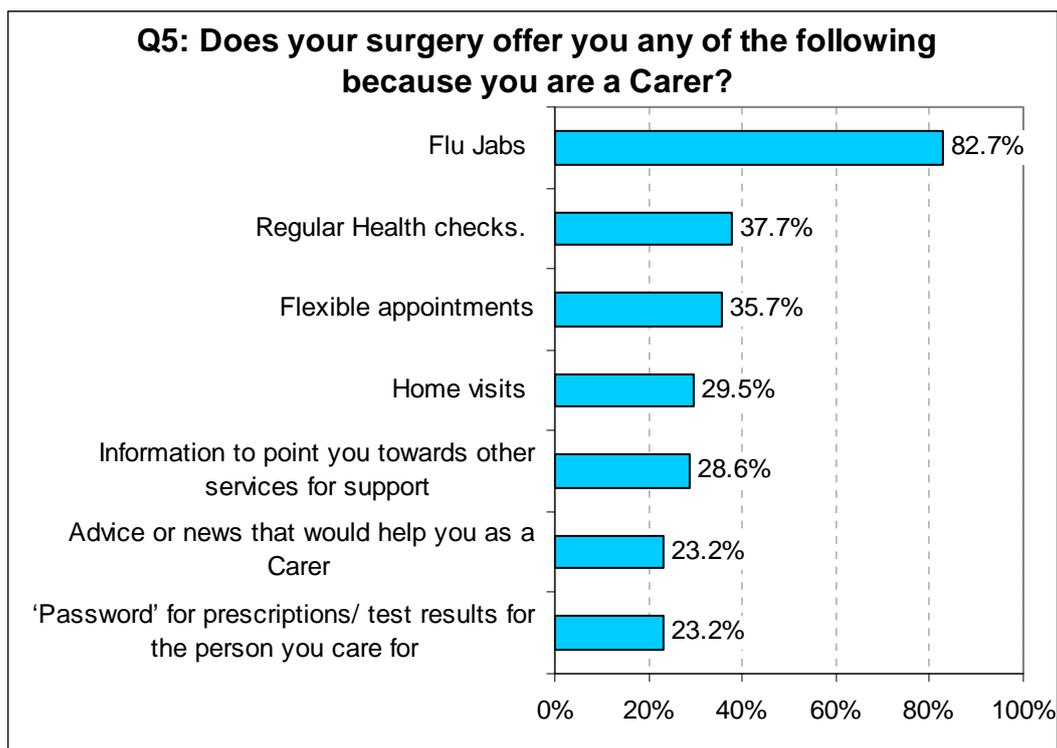
2.1.4. With only half of Carers saying they feel recognised as a Carer by their GP and benefitting from what this involves, there seems to be some way to go to allowing all Carers access to these services.

2.1.5. Also, there is the discrepancy between the proportion who say they are *registered* and those who feel *recognised* as Carers. This shows there must be a number of surgeries that whilst saying they register Carers, then do nothing with this information and do not especially help Carers.

- 2.1.6. The previous question asked panellists to name the GP's surgery they use. From this we are able to analyse those respondents saying "no" they are not recognised as a Carers and see if there are any surgeries that commonly do not recognise Carers. The table in Appendix A shows the surgeries where Carers commonly say they are not recognised. It gives the number of Carers who say they are not recognised as well as this as a proportion of all respondents at that surgery. It shows that in some of the most popular surgeries, up to two thirds of respondents registered there are not recognised as Carers.
- 2.1.7. Following whether Carer felt they were recognised, the next question asked if their comments or opinions were valued. As the Carer, these people may well have valuable insight and experience of looking after the person they care for. This could greatly help GPs in diagnosis or suggesting appropriate treatments, etc. 47.6% of respondents said they their comments were valued all the time at the surgery and a further 42.3% said these comments were valued some of the time. This left 10.1% of respondents saying their comments were never listened to by their surgery:



- 2.1.8. The table in Appendix B lists the surgeries where respondents who answered "no" to question 4 are registered. Again it shows the name of the surgery, the number of respondents saying their opinions are not listened to and this number as a proportion of Carers registered there.
- 2.1.9. By registering as a Carer at the GP's surgery, Carers are due to receive certain extra services that will help in their caring role. Question 5 of the survey asked Carers to state what services they were offered through their surgery. The chart below shows how common these were:

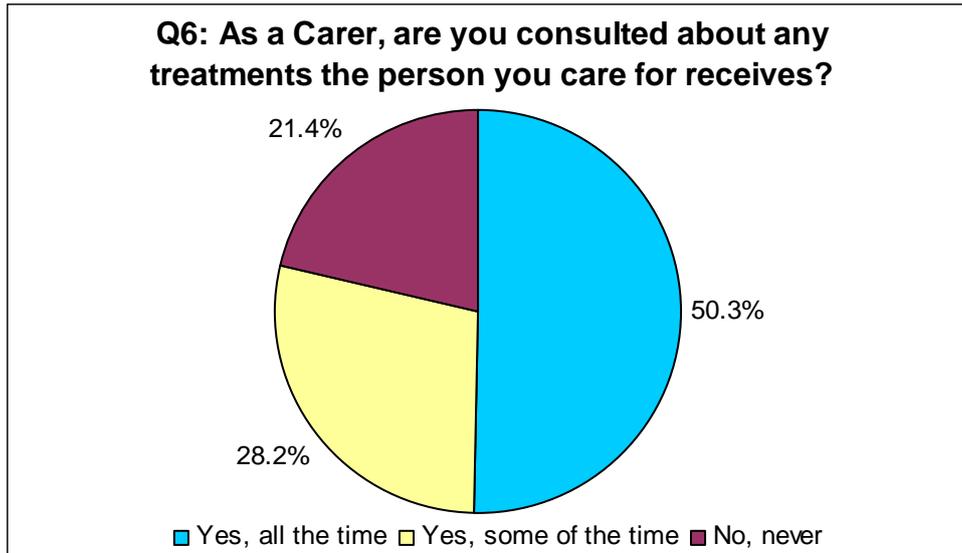


2.1.10. By far the most common service offered is to receive flu jabs, with 83% saying they are offered this. Next is giving Carers regular health checks, followed by allowing them flexible appointments to cope with the demands of caring.

2.1.11. When the Carers' Voice Steering Group saw this result, they felt the level of information and advice (received by 28% and 23% of respondents respectively) to be disappointing. This is something which the Steering Group felt should be boosted, with information regularly updated and actively passed out to Carers, not left to them to find out things for themselves.

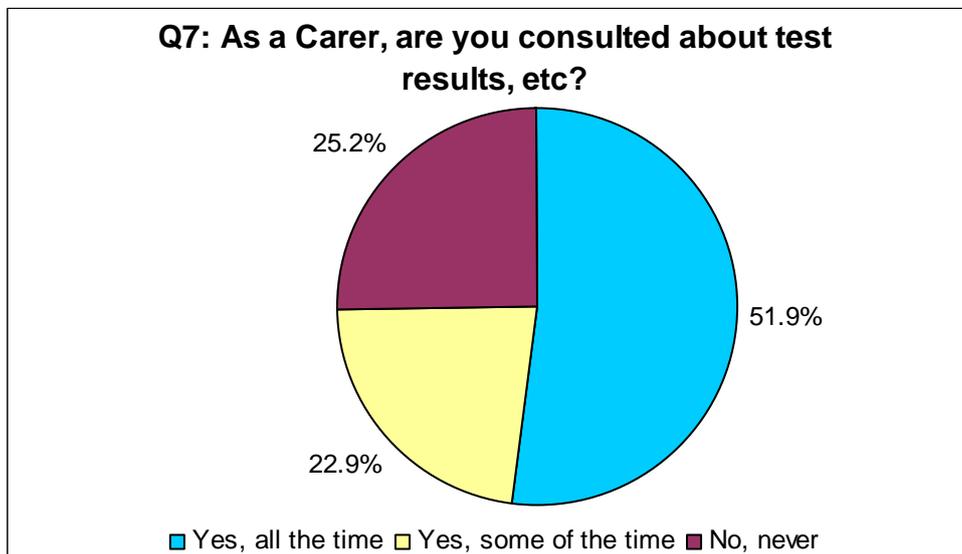
2.1.12. The next two questions follow the theme of question 4. When asked whether they are consulted about any treatments the person they care for may receive half, 50.3%, said they were consulted all the time. This is quite heartening. A further 28.2% said they were consulted some of the time. This left over one fifth, 21.4%, who said they were never consulted on treatments for the person they care for.

2.1.13. At the suggestion of the Steering Group, one reason for this fairly low proportion of Carers being consulted about treatments is that some Carers might not want to be involved.



2.1.14. Following this, question 7 asked whether Carers were consulted about test results or medication for the person they care for. This may be because they care for a child or the person may not be able to comprehend these details or because the Carer is involved in administering these.

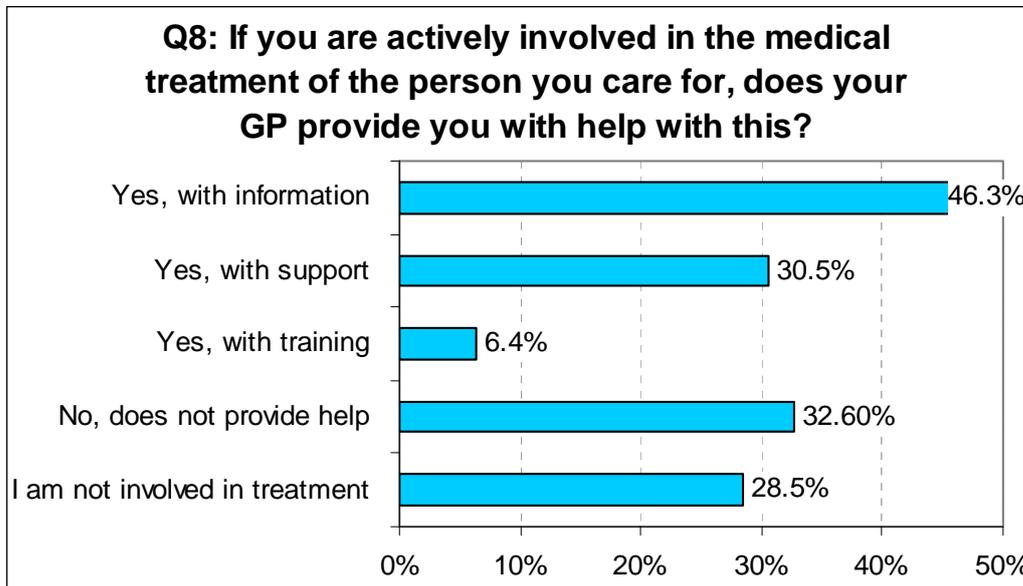
2.1.15. Again, around a half, 51.9%, said they were consulted all the time and 22.9% said “some of the time”. This then left a quarter of respondents, 25.2% who said they were never consulted in these cases.



2.1.16. Again, reasons given for this fairly low proportion of Carers being consulted about test results include not actually wanting to be involved in test results or it may be because the person who is cared for is able to deal with this aspect of their own health.

2.1.17. In the final question in this section, Carers were asked whether they were involved in the medical treatment of the person they care for and if so, what sort practical help they were given by the GP’s surgery.

28.5% said they were not involved in medical treatment. Of the remainder – those who were involved – 32.6% said their surgery did not provide any help. The most common form of help given is help with information, followed by support, then with training:



2.1.18. The Steering Group thought that the proportion of Carers receiving training from their surgery was especially low, given certain aspects of the caring role such as lifting or using specialist pieces of equipment. This was highlighted as an area for improvement.

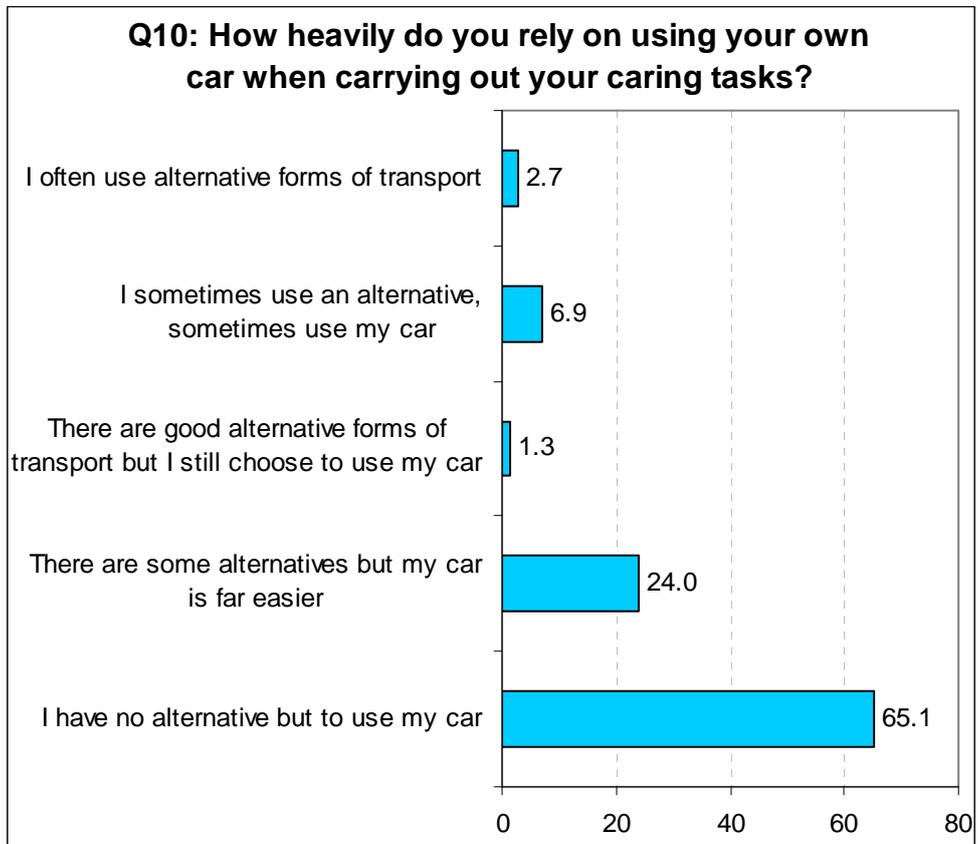
## **2.2. Access to Transport & Affordability**

2.2.1. In light of steering group members' experiences of travelling to various doctor's or hospital appointments, this section of the questionnaire was designed to look at Carers' use of different forms of transport, how convenient they found them in order to get to different locations for different reasons and how affordable they found this method of transport.

2.2.2. When asked, four fifths, 79.2%, of Carers said they drove a car. The following questions looked at car usage and were only to be answered by those who drove.

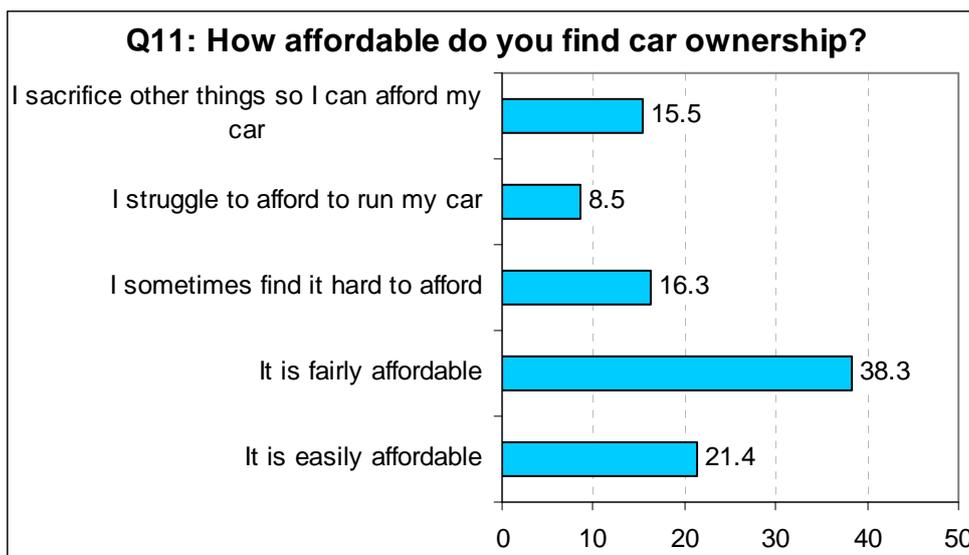
2.2.3. These drivers were asked how heavily they relied on using their car in carrying out their caring tasks and whether any alternative forms of transport were available or using them was possible. The chart below shows that by far the greatest proportion, 65.1%, said that they had no alternative but to use their car. A further 24.0% said that there were alternative forms available but using their car was far easier. Just

6.9% said they sometimes used an alternative form of transport and 2.7% said they often used alternative forms.



2.2.4. Thinking about the rural nature of Wiltshire and the, often, long distances to get to hospital appointments as well as the difficulties in using public transport (getting to station/bus stop; regularity of service; limited choice of destination, etc.) it is not surprising so many Carers rely this heavily on private transport.

2.2.5. The next questions asked how affordable Carers found running their vehicle. Options were provided to try and represent a scale. This is shown below:



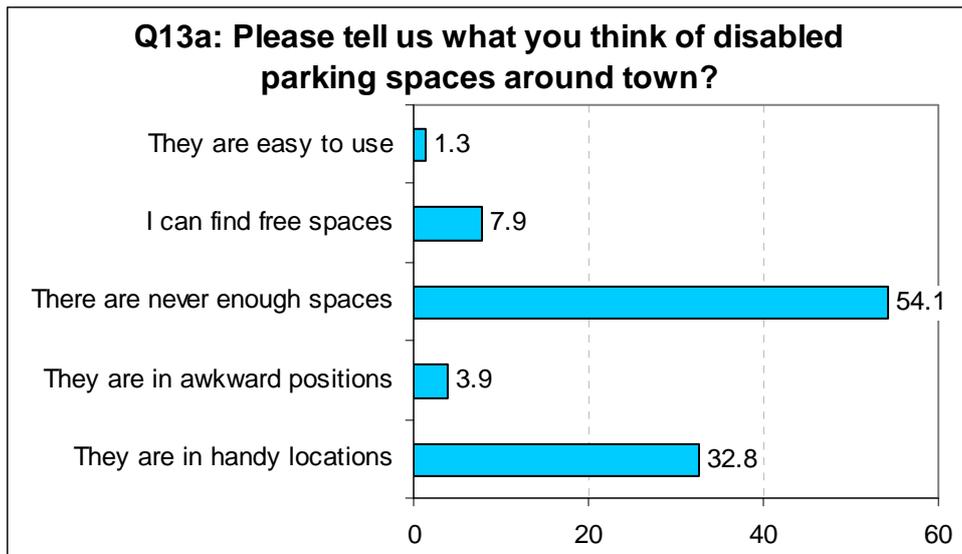
2.2.6. We can see that nearly two thirds of respondents or 59.7% find running their car to be affordable (easily affordable + fairly affordable). 16.3% say they sometimes find their car hard to afford.

2.2.7. Of note is the figure that 8.5% say they struggle to afford their car and that a significant 15.5% say they have to “sacrifice other things so they can afford to run their car”. This last figure is very telling and shows how important it must be for some Carers to keep their car and have it available. With Direct Payments now available along with the ability to use this money to suit Carers’ needs, it may be that Carers who are currently finding transport costs to be a problem use these Direct Payments to ease this situation.

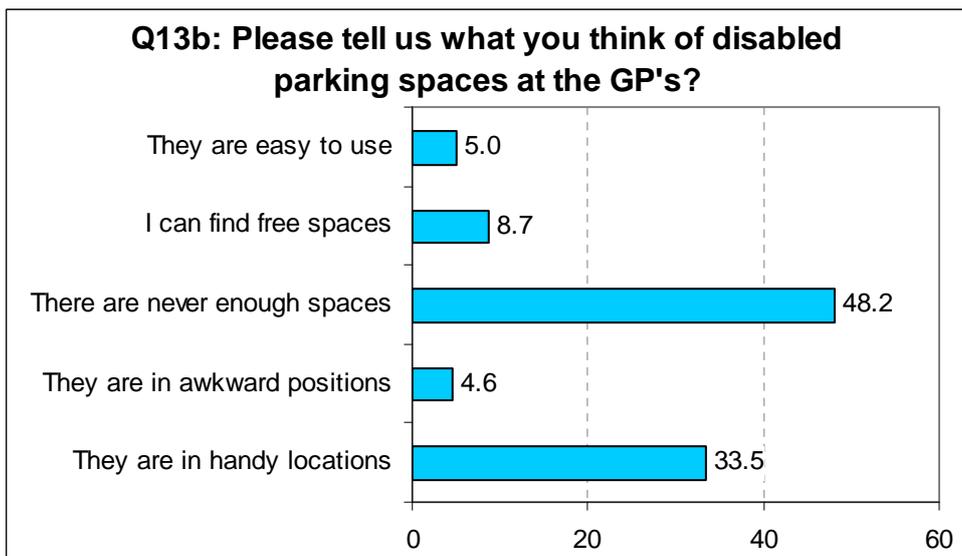
2.2.8. The majority of respondents say they or the person they care for are blue badge holders.

2.2.9. The experiences of members of the steering group led to the next questions being used. They had often found disabled parking spaces to be difficult to use. This question was designed to try and find out Carers’ experiences of using these spaces found in different common locations.

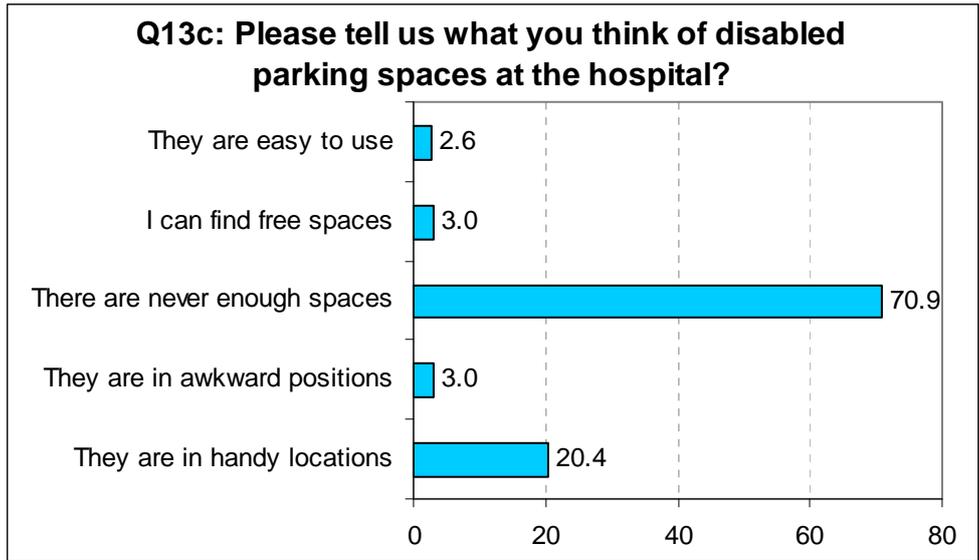
2.2.10. The first part of the question looked at spaces found around town. From the chart below, we see that the majority said that there were never enough spaces, although a third (32.8%) said that the spaces are in handy locations.



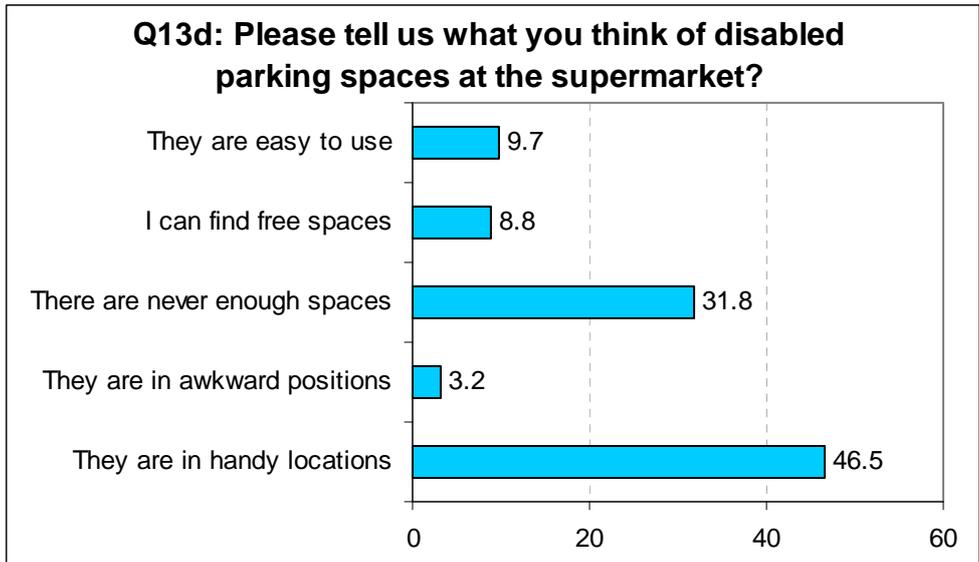
2.2.11. Spaces found at the GP's surgery were next looked at. Again, the greatest proportion told us there not enough spaces found there, although this was a slightly smaller proportion. Likewise, one third of respondents said that these spaces were in handy locations. The other options recorded similar proportions as before.



2.2.12. Thinking about spaces at hospitals, even more Carers than before told us that there were not enough spaces, 70.9% thought this the case in this location. The next most common feeling was again that spaces were in handy locations

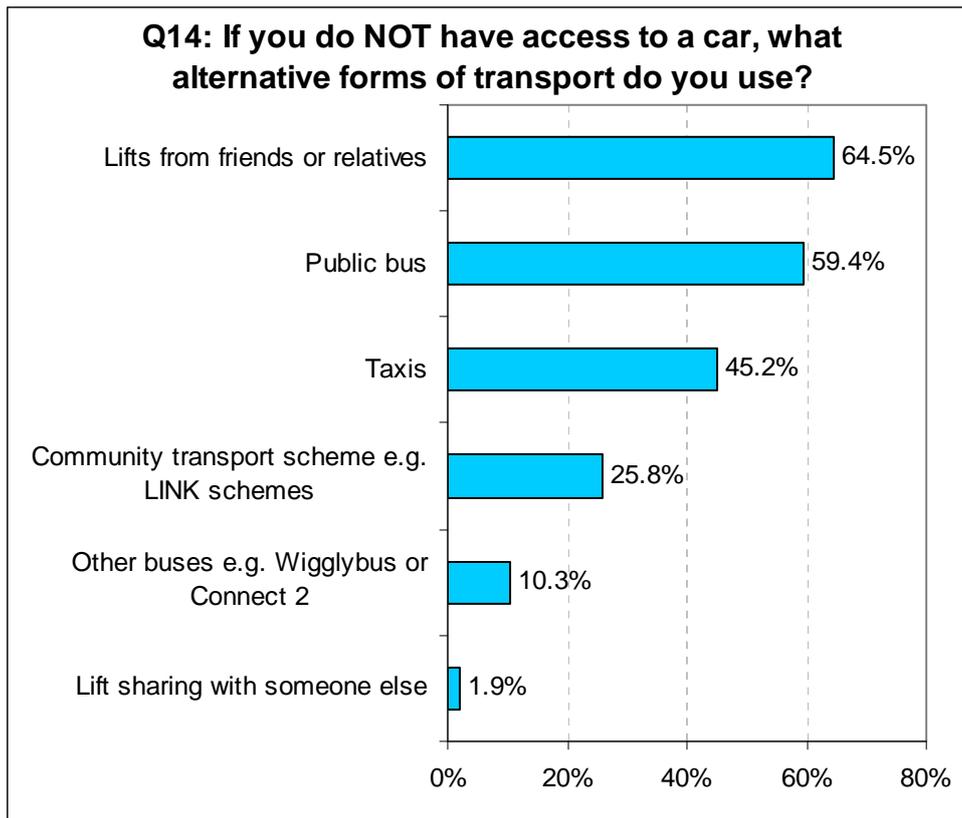


2.2.13. Finally, the spaces at supermarkets were looked at. Supermarkets must provide a greater number of disabled parking spaces as the proportion saying there are never enough has gone down to 31.8%. Now the most common feeling at supermarkets is that the spaces are in handy locations, with 46.5% saying this. The feeling that they are easy to use is strongest at supermarkets.

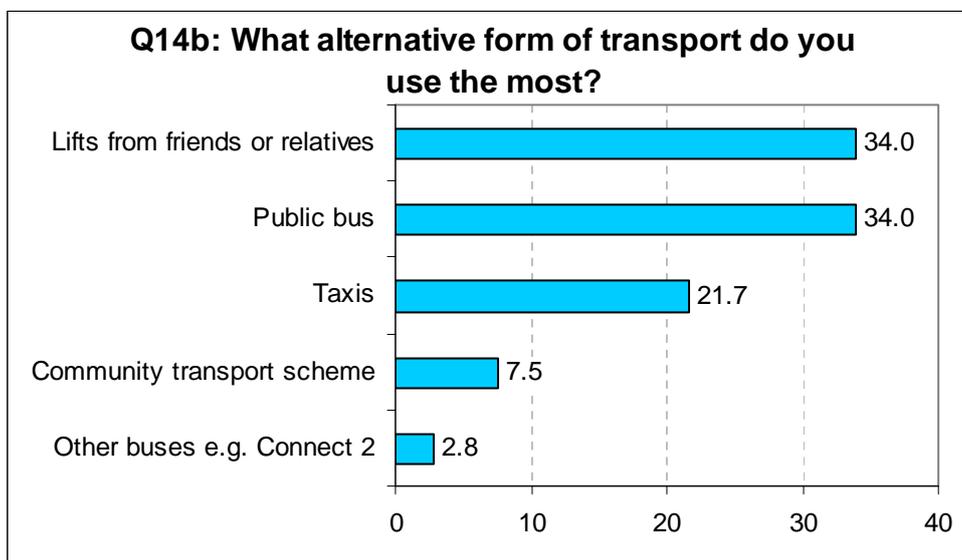


2.2.14. The next question was for those who do not have access to a car. It asked what alternative forms of transport these Carers used. It asked about all forms of transport used and found out the one most commonly used.

2.2.15. It shows that the most common method is to get lifts from friends or family, with 64.5% of (non-car owning) Carers doing this. The bus is the next most common form, with 59.4% of Carers using it. The other forms of transport and how many carers use them are shown below:



2.2.16. The second part to this question asked which from the same list of methods was the one *most used*. This showed a slightly different response:

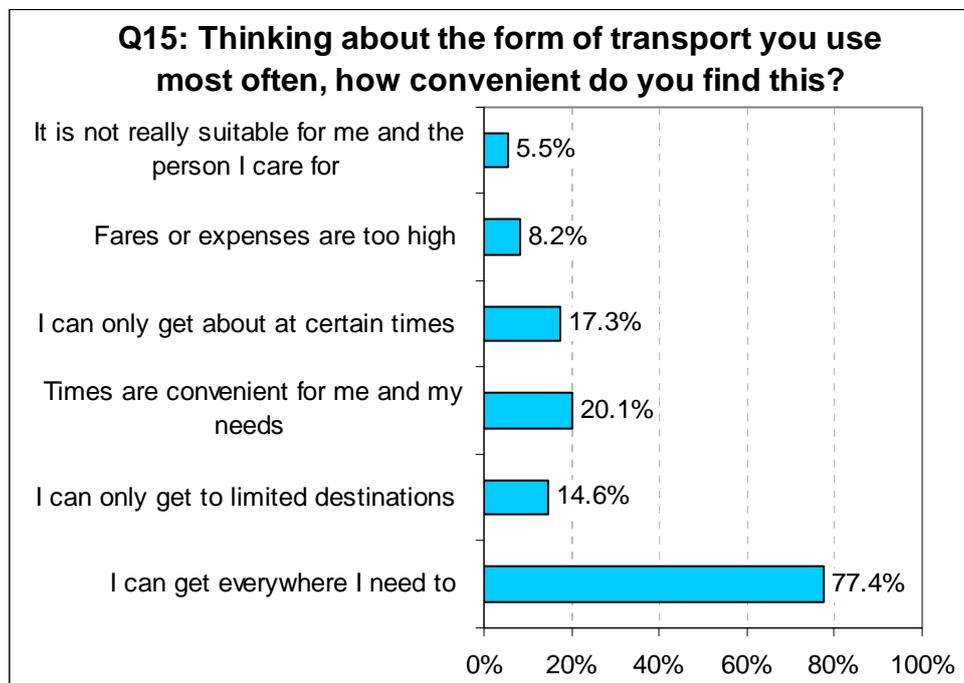


2.2.17. We see that the most common methods of transport taken by Carers without a car are getting lifts from friends or relatives and taking the bus, both with 34.0% of respondents using these. Next comes using taxis, with 21.7% commonly using this.

2.2.18. These results have implications for any funding or subsidies provided to Carers. As well as passes or vouchers to be used on public transport or for taxi journeys, it might also be worth looking at ways of providing cash payments to help out the friends and family who provide these lifts with fuel money. Direct Payments might again be a way of paying for this form of transport, given the flexibility they allow.

2.2.19. The remainder of questions in the section were to be answered by all respondents.

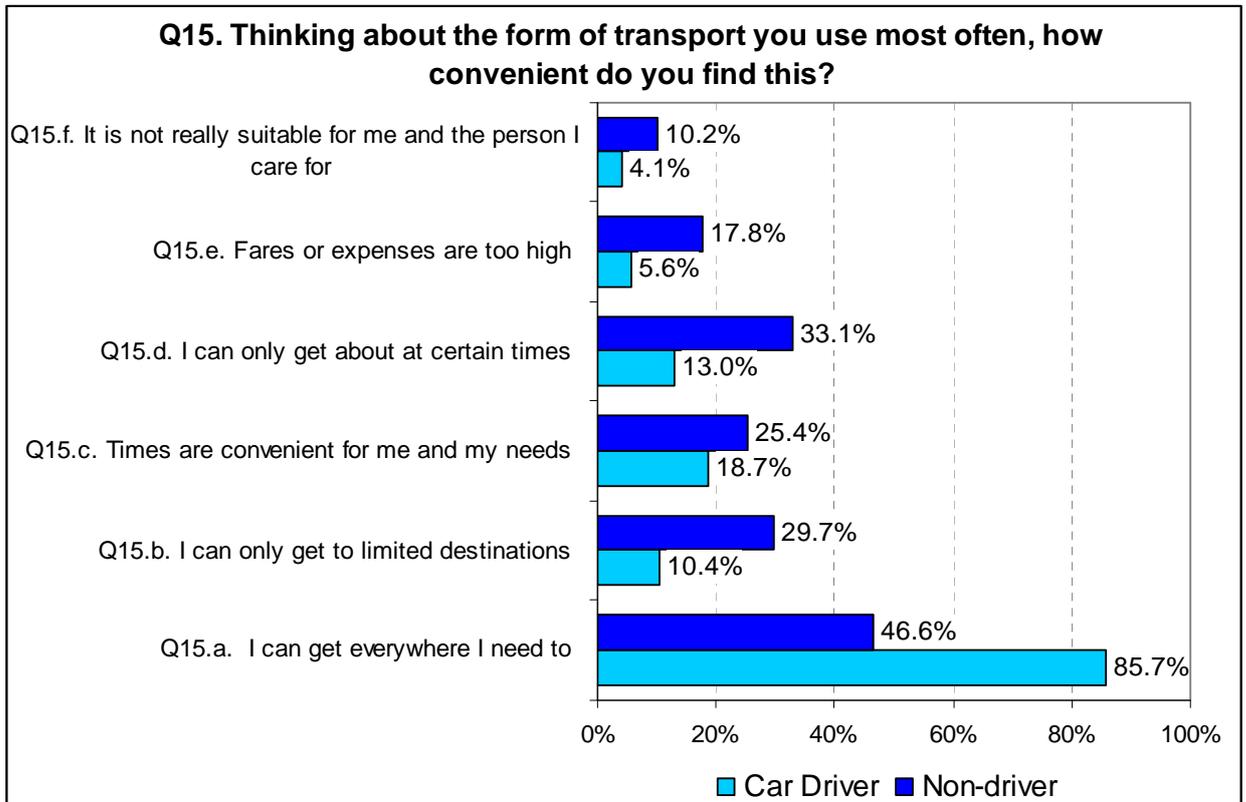
2.2.20. Question 15 asked Carers about the form of transport they use most often and how convenient they find it. Although the options are applicable to car usage, they might be most useful in describing how convenient public transport is. The responses are shown below:



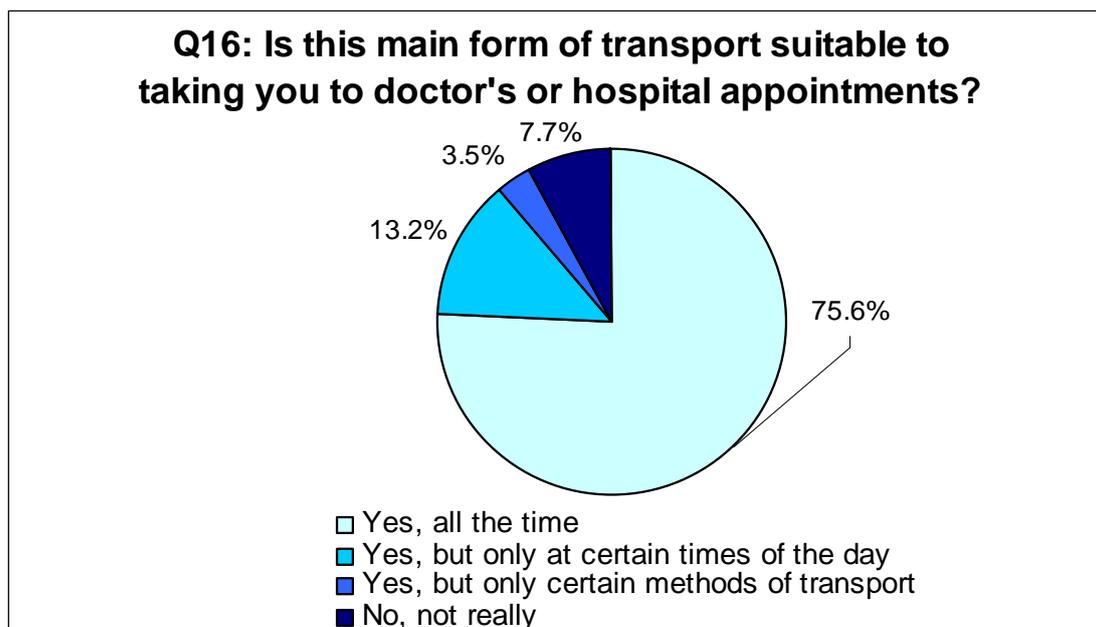
2.2.21. We see that the majority of Carers say they can get everywhere they need to” using their chosen method of transport, with 77.4% saying this. 20.1% say that “times are convenient for their needs”, however 17.3% said they can only get about at certain times of the day. 5.5% of respondents say the form of transport they use most often is “not really suitable for them and the person they care for”.

2.2.22. Breaking the result from this question down into car drivers and non-drivers, we can see differences in the results between these two groups: The clear majority of drivers say they can get everywhere they need to, whilst nearly half of non-drivers say this. Nearly one third of non-drivers (29.7%) say they can only get to limited destination whilst this applies to just 10.4% of car drivers. Time of travel repeats this, with 33.1% of non-drivers saying they “can only get about at certain times” compared to 13.0% of car drivers. Finally, 10.2% of non-drivers

say the method of transport they use most often is not really suitable for them compared to 4.1% of car drivers.



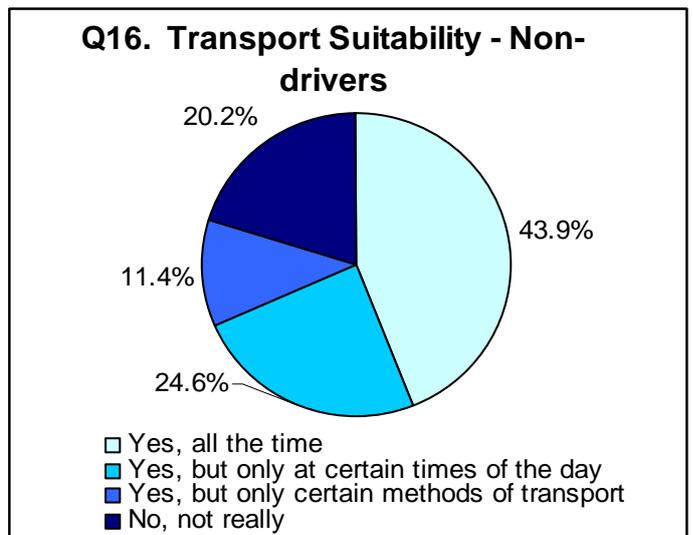
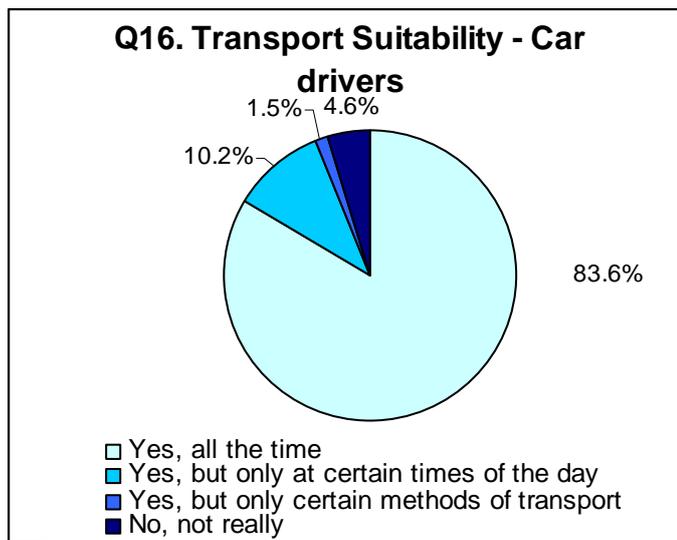
2.2.23. Because this section was concerned with Carers being able to access their GP or hospital appointments, the next question asked whether the main form of transport used, was suitable for these appointments.



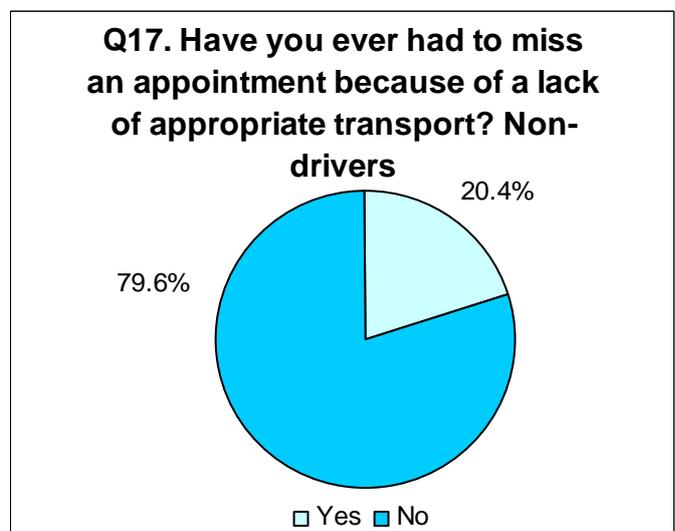
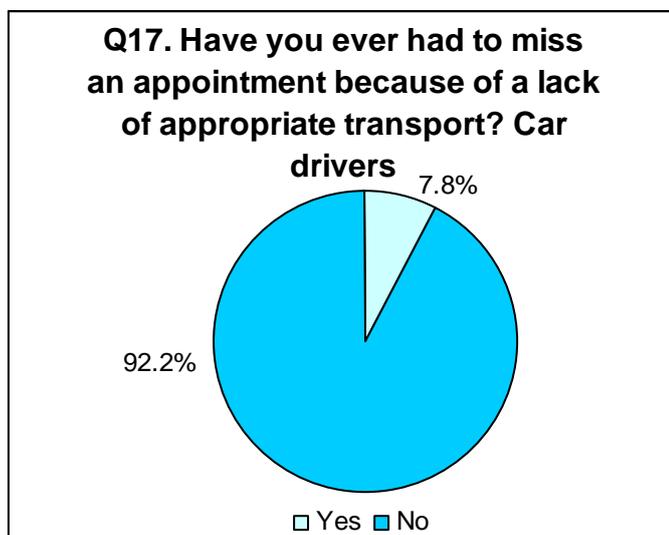
2.2.24. Results show that three quarters of respondents say that their transport is suitable for getting to appointments all the time and 13.2%

say their transport is suitable only at certain times of day. The next option was really intended to be for non-drivers and to show that certain methods of transport they used were suitable whilst others were not. It showed that just 3.5% said that certain methods were not suitable. Finally 7.7% of respondents said that the transport they most commonly used was not really suitable for attending appointments.

2.2.25. Breaking this result down into those who are car drivers and non-drivers shows significant changes. 83.6% of car drivers said this form of transport was suitable all the time compared to 43.9% of non-drivers. Just 4.6% of car drivers say their transport is not really suitable compared to 20.2% of non-drivers.



2.2.26. The next question asked whether respondents had had to miss an appointment because of a lack of appropriate transport. Comparing this between car drivers and non-drivers shows that whereas just 7.8% of car drivers have had to miss an appointment, this figure increases to 20.4% of non-drivers.



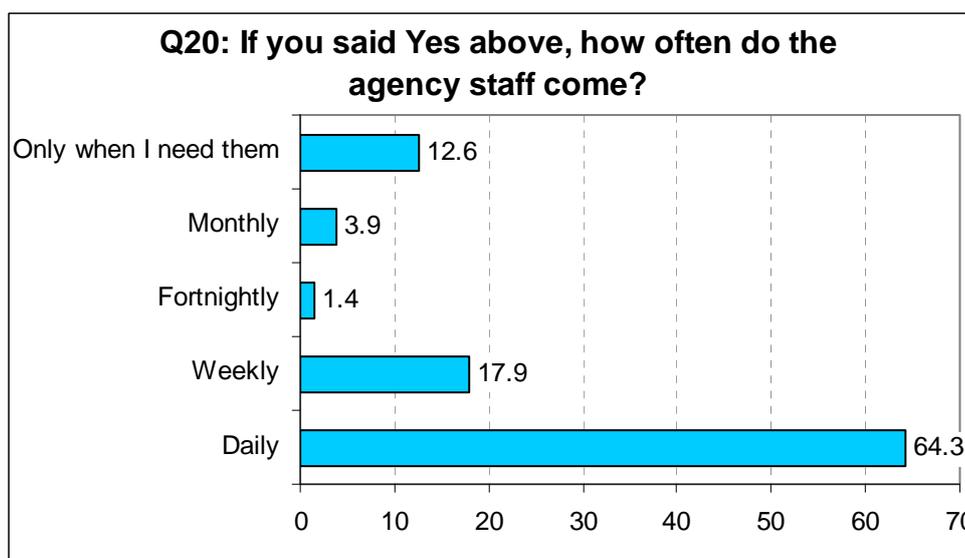
2.2.27. Finally in this section, 55.7% of respondents say they have a concessionary fares card.

### 2.3. Agency Care Staff

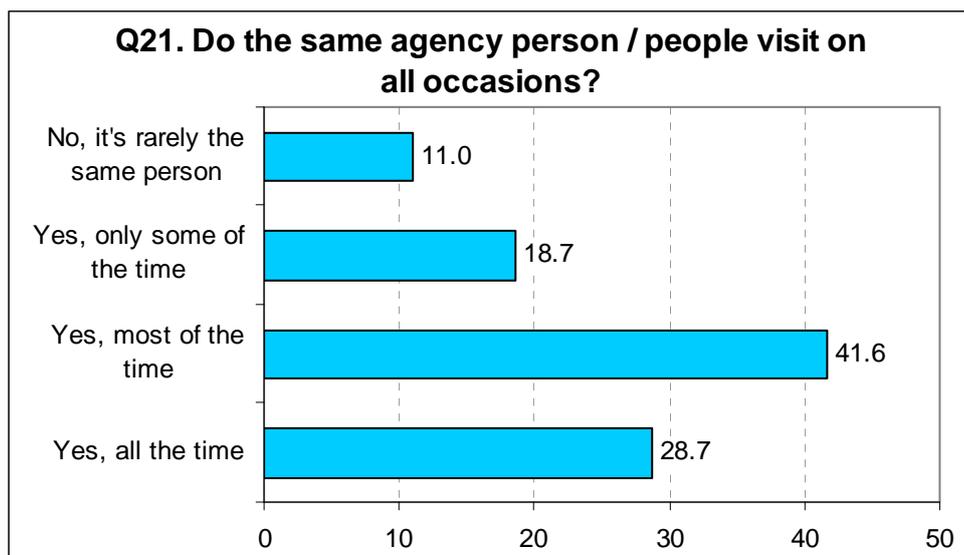
2.3.1. Comments from Steering Group members often point out certain difficulties over the use of agency care staff. These are agency employees who are paid to provide a certain aspect of care as opposed to a Carer who is an *unpaid* family member or friend, etc. This section is intended to look at certain aspects of the services care staff provide and any difficulties that might arise from this.

2.3.2. The first question established whether the respondents used agency staff in their caring role. It showed that 35.3% did use agency staff.

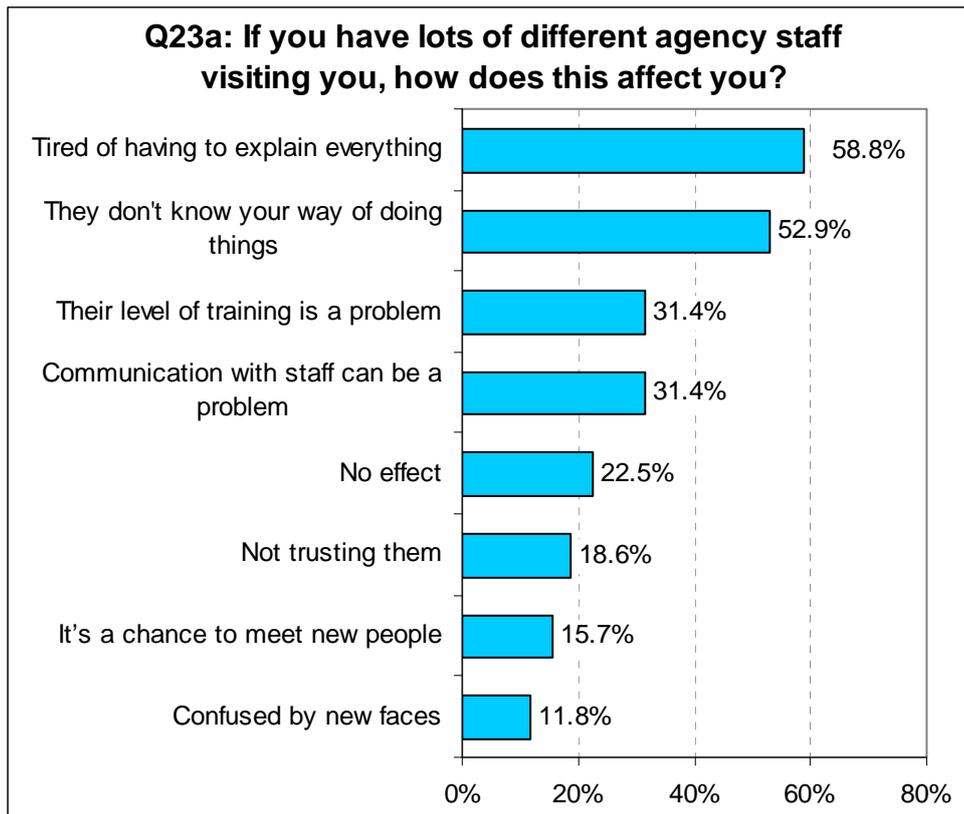
2.3.3. Respondents who said they did use agency staff were asked how often they came. The chart below shows that 64.3% said they have agency staff come every day and a further 18% have staff come weekly. The next most common occurrence is that agency staff come only when needed.



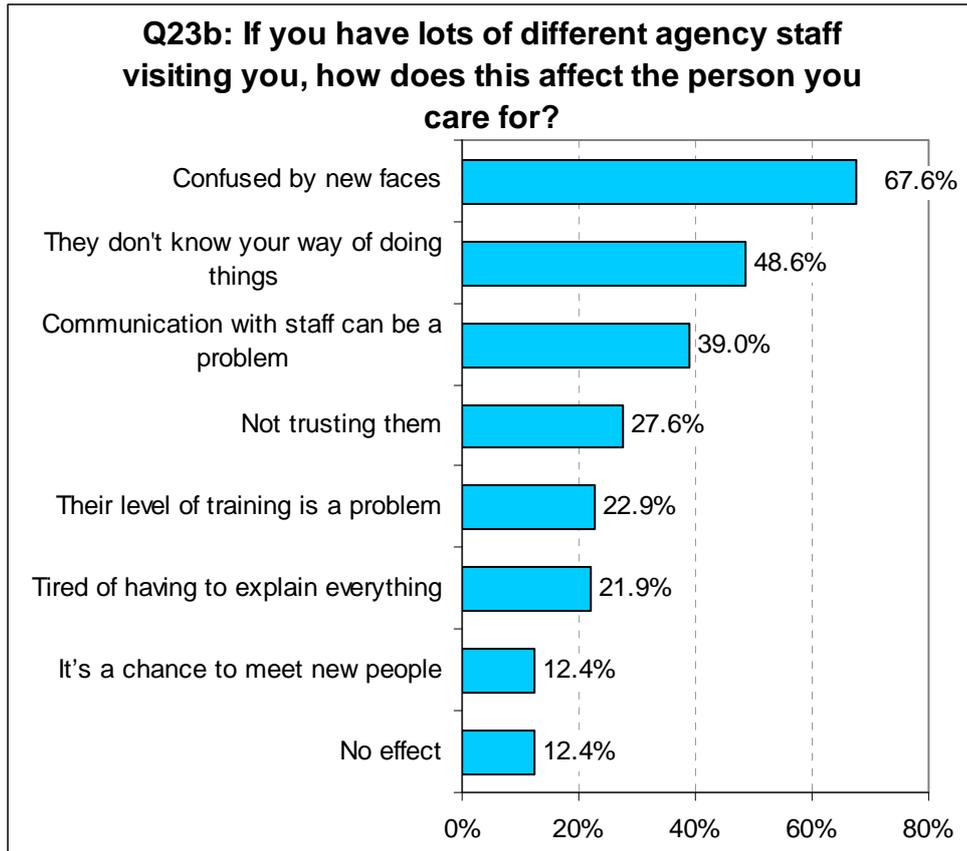
2.3.4. One of the difficulties reported by the steering group is that care agencies sometimes send different staff members each time someone is due to come. Question 21 asked whether the same people visit on all occasions. We see below that in fact over a quarter, 28.7% said the same person comes “all the time” and a further 41.6% said the same person comes “most of the time”.



- 2.3.5. However, this still leaves about one third of respondents saying that it is not often the same person who comes: 18.7% said the same person comes “only some of the time” and 11.1% said “it’s rarely the same person”.
- 2.3.6. This fact is emphasised by the next question, where 44% of respondents said their agency sends lots of different staff.
- 2.3.7. The experience of the steering group indicated that there could be some difficulties posed by a high turn-over of agency staff. The next question tried to look at the effects of high staff turn-over on both the Carer and the cared for person.
- 2.3.8. A number of possible options were suggested that might reflect different situations, both positive and negative and respondents asked to choose all that might affect them.
- 2.3.9. The chart below shows that the most common feeling amongst Carers is that high turn-over makes them “tired of having to explain everything”, with nearly two thirds of respondents or 58.8% saying this. This is tied to the second most commonly chosen option, that they “don’t know your way of doing things”, selected by 52.9%. These issues cover the simple inconvenience of many different staff members coming each time.
- 2.3.10. The next two most common issues are more to do with the actual person who visits. 31.4% of respondents said that as a Carer both the “level of training is a problem” and that “communication with staff is a problem”. With a reported increase in the number of foreign workers in the caring field, the standard of training of these workers and their level of spoken English may be called into question.

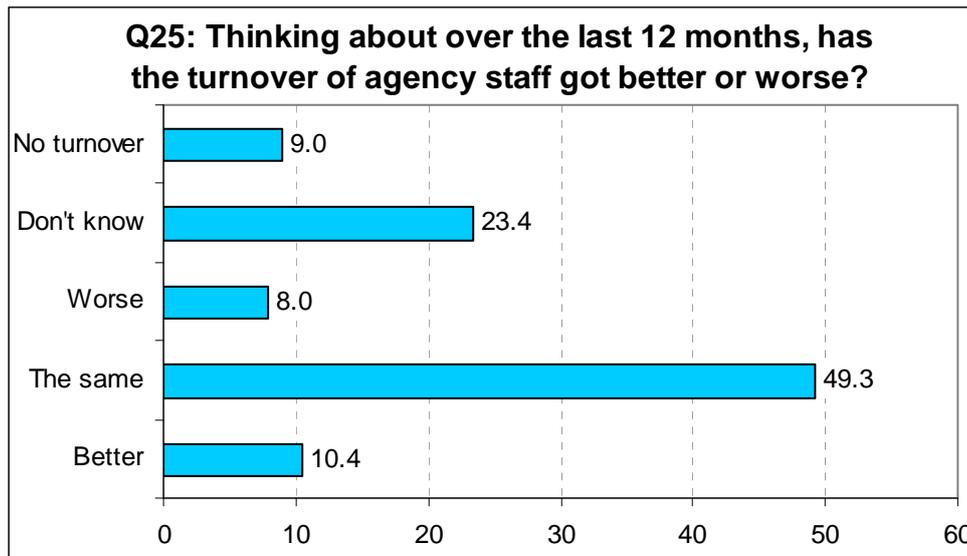


2.3.11. Looking at the responses on behalf of the cared for person shows a slightly different order of these options. Respondents most commonly felt that the person they care for was “confused by the new faces”, with two thirds saying this (67.6%). The next most common feelings are that staff “don’t know your way of doing things” reported by 48.6% and that “communication with staff is a problem” with 39.0% saying this. Over a quarter of respondents or 27.6%, said that “not trusting” the agency staff was an issue for the person they care for.

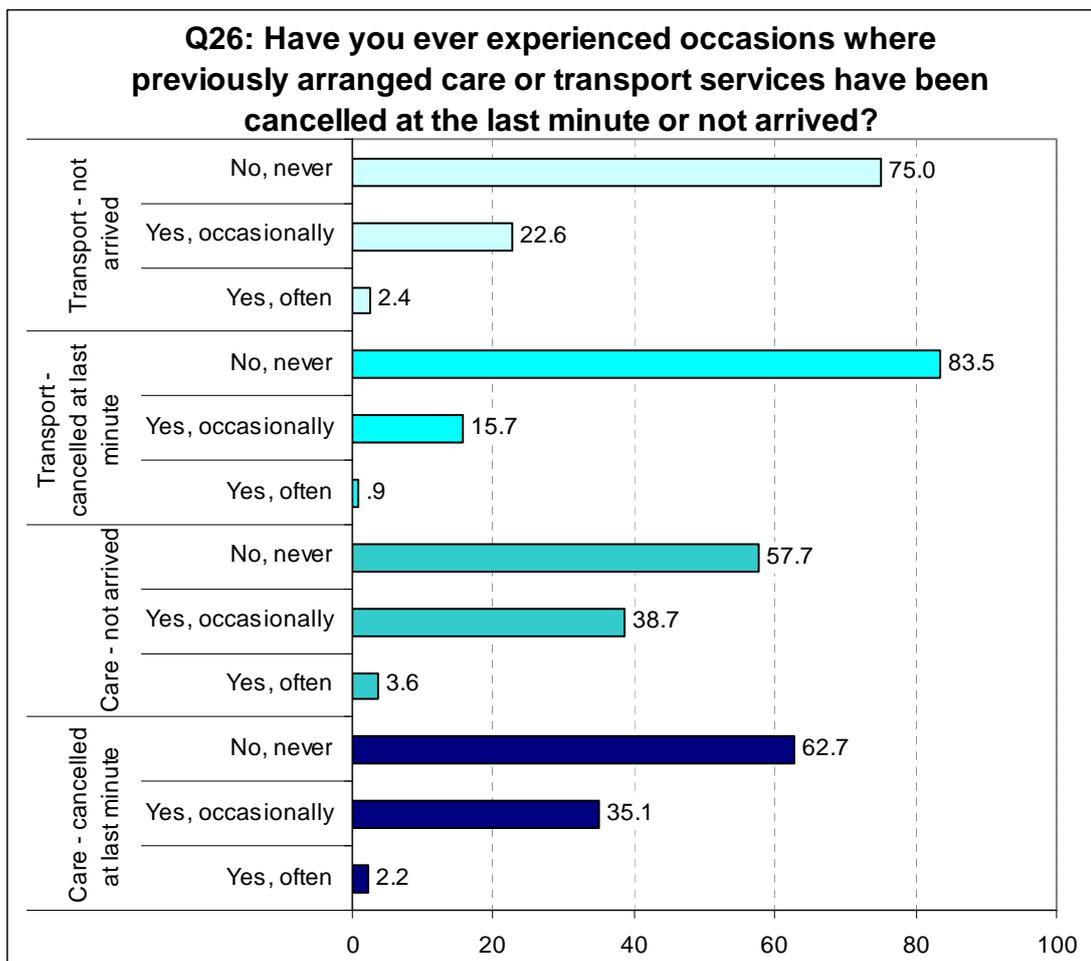


2.3.12. Whilst not necessarily aiming to 'name and shame' different care agencies, question 24 asked respondents to give the name of the care agency that comes to them and give us any comments about their service. Comments from respondents and the name of the agency they tell us they use are given in Appendix E.

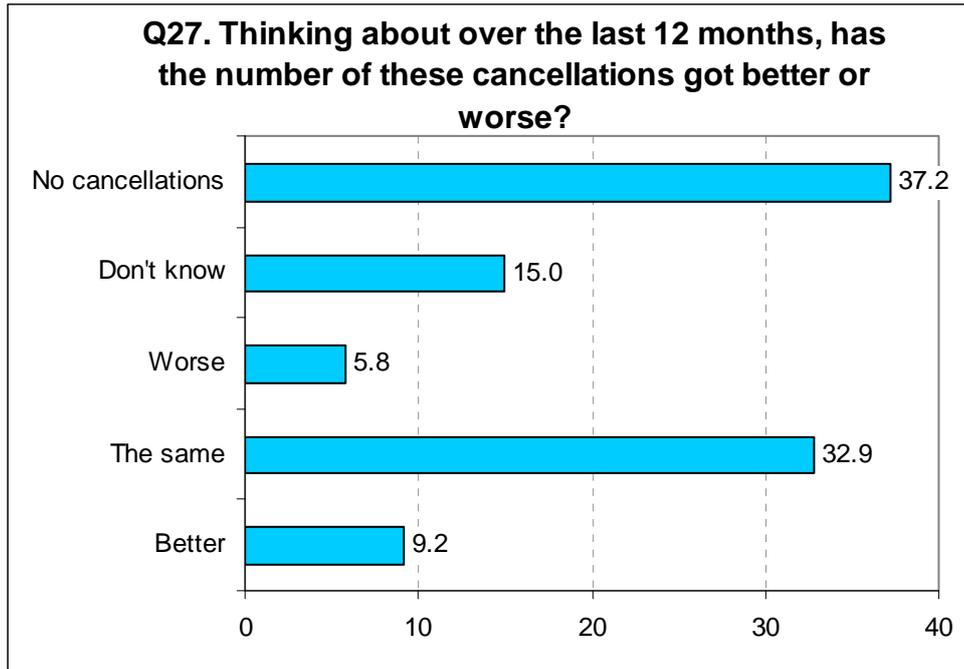
2.3.13. In order to judge how the situation of high staff turn-over may have changed recently, the next question asked whether respondents thought it had got better or worse over the last 12 months. Half, 49.3% said the situation has stayed the same during this time. Similar proportions then said things had got better (10.4%) and gotten worse (8.0%). Nearly a quarter, 23.4%, said they didn't know if the situation had changed.



2.3.14. Following the theme of receiving a poor level of service, the next question asked whether care services or transport that had previously been arranged had ever been cancelled. This question was again in response to experiences from the steering group. The individual charts below show that, on the whole, respondents do not experience these different services being cancelled.

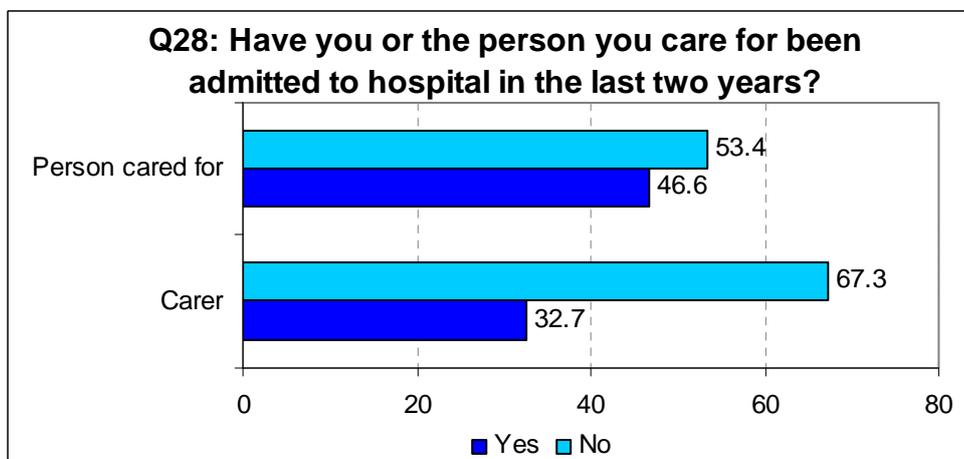


- 2.3.15. Transport seems to be the least affected, with 75.0% of respondents saying it has never not arrived and 83.5% saying it has never been cancelled at the last minute. A further 22.6% said transport had occasionally not arrived and 15.7% said transport was occasionally cancelled at the last minute.
- 2.3.16. Care (from a care agency) was more likely to be affected. 57.7% of respondents said care has never 'not arrived' and 62.7% said that care was never cancelled at the last minute. Fairly large proportions then said that care occasionally did not arrive (38.7%) and that care was occasionally cancelled at the last minute (35.1%).
- 2.3.17. Question 24 asked respondents to name the agency they receive care staff from. With this information we are able to look at the agencies that commonly cancel care staff or they do not arrive.
- 2.3.18. Four respondents said agency care was often cancelled at the last minute. The agencies providing care staff in these cases were reported to be Abicare, Care Choice, Leonard Cheshire and 'Malmesbury'. Respondents then reported that 17 different care agencies had occasionally cancelled care staff. The agencies that seem to have cancelled most often include: Agincare (reported by 6 respondents), Carewatch (5), Somerset Care (5) and Leonard Cheshire (4). A full list of agencies who cancelled care is given in Appendix C.
- 2.3.19. Three respondents said that care staff from an agency often did not arrive. They told us these agencies were Leonard Cheshire, Malmesbury and Somerset Care. Respondents then reported that 18 different care agencies had occasionally sent staff that did not arrive. These were similar to the list above: Agincare (6), Somerset Care (6) and Leonard Cheshire (4). A full list of agencies whose staff did not arrive is given in Appendix D.
- 2.3.20. To try and gauge if this situation has changed, the final question in this section asked if the number of cancellations had got better or worse. Just over one third, 37.2%, said there had been no cancellations in the 12 months respondents were asked about. A further third or 32.9% said the situation remained the same. Encouragingly, more people said things had got better over the last 12 months (9.2%) than said got worse (5.8%).



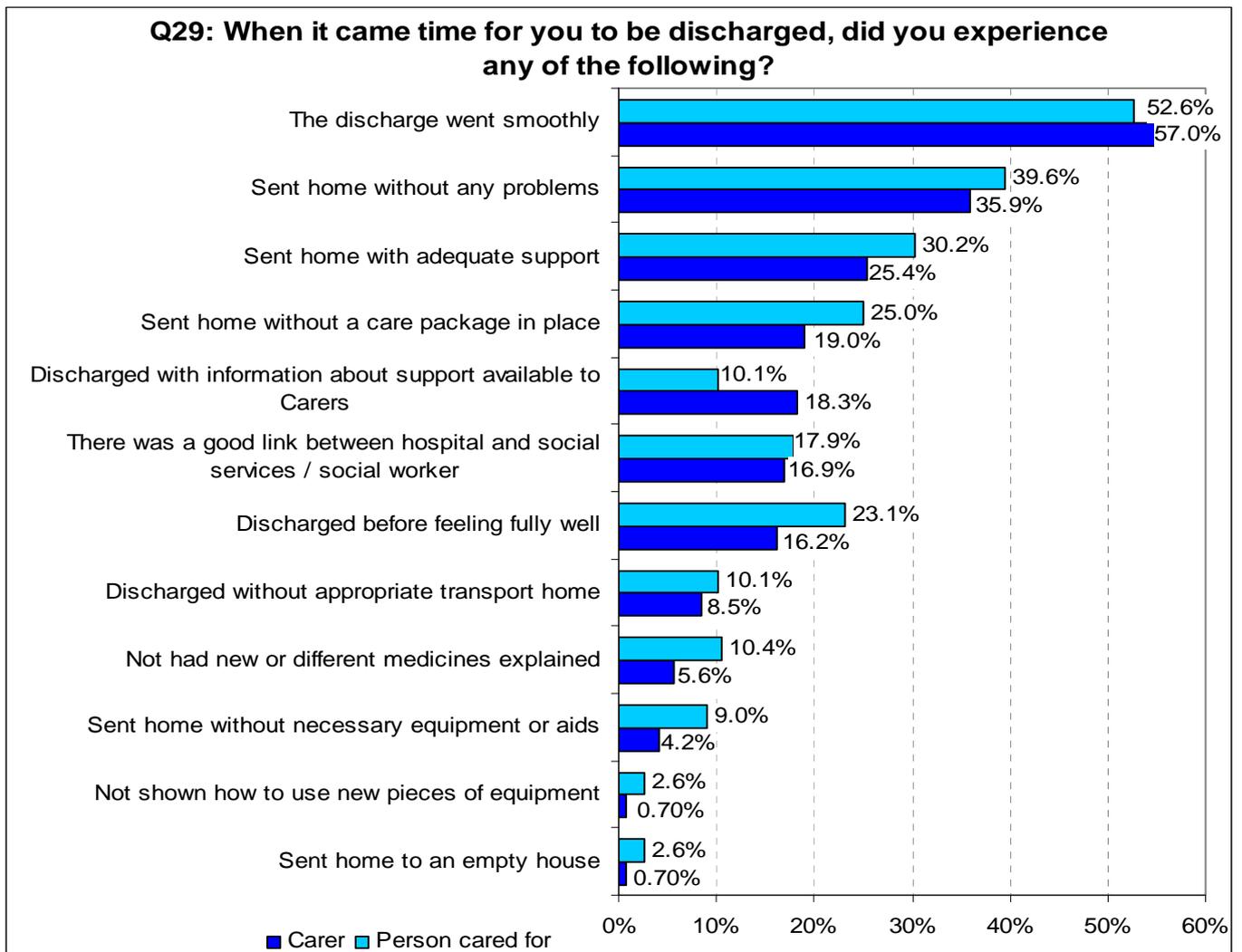
## 2.4. Discharge Policies from Different Hospitals

- 2.4.1. The final section in this questionnaire was again based on the experiences of steering group members where there had been cases of either the Carer or the person who is cared for having been discharged from hospital in situations which were not ideal. This might have been because there was no care package in place, no transport had been arranged or they were sent home too soon.
- 2.4.2. The first question in this section asked Carers if they or the person they care for had been admitted to hospital in the last two years. It showed that a third of Carers had (32.7%) and nearly half of the people cared for had (46.6%).



2.4.3. To try and find out about their experiences of being discharged, respondents were given a range of possible scenarios, both positive and negative and asked whether they or the person they care for had ever experienced any of them.

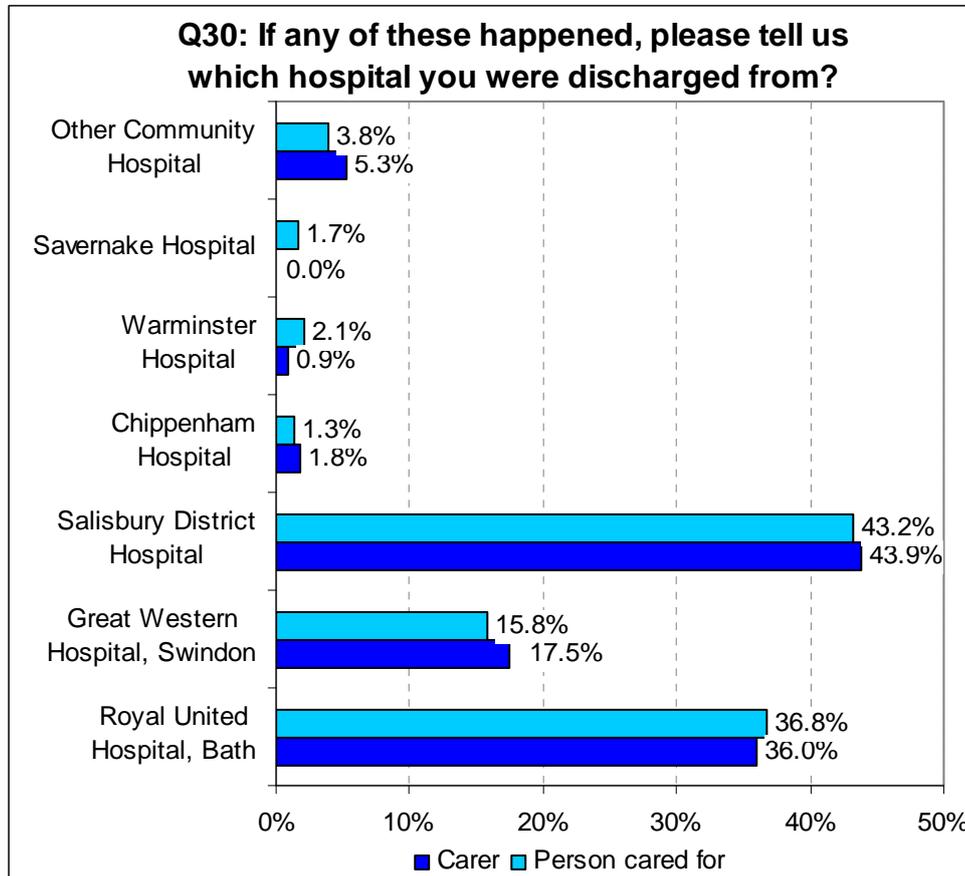
2.4.4. The chart below shows these scenarios and the proportions who had experienced them:



2.4.5. We see that the three most commonly chosen scenarios, for both Carers and the people they care for, were all positive – “the discharge went smoothly”, “sent home without any problems” and “sent home with adequate support”.

2.4.6. The fourth most common scenario, experienced by 19% of Carers and 25% of people cared for was to be “sent home without a care package in place”. This is the most commonly experienced of the negative scenarios.

- 2.4.7. Of the 5 positive scenarios (out of 12) they all appear in the top 6 options.
- 2.4.8. The final question asked Carers to say which hospital they were discharged from if any of these scenarios happened, either to themselves or to the person they care for



- 2.4.9. Unsurprisingly, the hospitals where the majority of people have been discharged from are the three district hospitals that serve Wiltshire. Together, they make up over 95% of hospital discharges. The hospital that people were most commonly discharged from was shown to be Salisbury District Hospital, followed by RUH in Bath and Great Western in Swindon

### **3. CONCLUDING COMMENTS**

- 3.1.1. Carers' Voice is an invaluable method of collecting information about the opinions of Carers living in Wiltshire by providing an insight into the experiences and views of the members of Wiltshire's Carers' Voice Panel.
- 3.1.2. This survey has produced results which will be useful to Wiltshire County Council and Carer Support Organisations in the development of better services for all Carers in the county.
- 3.1.3. The results of this survey should be seen as a way of supporting decision makers by helping them to understand the needs, opinions and priorities of Carers living in Wiltshire.
- 3.1.4. This report will be disseminated among the partner organisations and service providers. Copies will be made available in all of Wiltshire's libraries and an electronic version of this report will be available to download online from the Wiltshire and Swindon Intelligence Network ([www.intelligencenetwork.org.uk](http://www.intelligencenetwork.org.uk)).

## 4. Appendix A.

List of surgeries where respondents who answered “no” to Q3 are registered:

Surgery Name	Number	Proportion	Surgery Name	Number	Proportion
Widbrook Surgery, Trowbridge	7	64%	Abbey View, Shaftesbury	1	33%
Lovemead Surgery Trowbridge	6	29%	Avon Valley Practice, Durrington	1	13%
Eastleigh Surgery, Westbury	5	22%	Bourne Valley, Ludgershall	1	50%
Endless St, Salisbury	4	29%	Box Surgery	1	13%
Hathaway Medical Centre, Chippenham	4	33%	Castle Surgery, Ludgershall	1	20%
Roundstone Surgery, Trowbridge	4	25%	Farmhouse Surgery, Christchurch	1	100%
Avenue Surgery, Warminster	3	13%	George Lane, Marlborough	1	25%
Bradford on Avon Health Centre	3	19%	Grove House Surgery, Salisbury	1	20%
Gifford's, Melksham	3	17%	Patford House, Calne	1	25%
Lodge Surgery, Chippenham	3	38%	Peacemarsh, Gillingham	1	100%
Market Lavington	3	27%	Pewsey Surgery	1	10%
Mere	3	23%	Southbroom, Devizes	1	6%
Adcroft, Trowbridge	2	7%	St Anne's St, Salisbury	1	17%
Barcroft, Amesbury	2	22%	St James' Devizes	1	14%
Beaversbrook, Calne	2	67%	St Mellor, Amesbury	1	33%
Bradford Rd, Trowbridge	2	29%	Porch Surgery, Corsham	1	20%
Castle St, Salisbury	2	67%	Three Swans Surgery, Salisbury	1	25%
Downton Surgery	2	50%	Tinker's Lane, Wootton Bassett	1	17%
Rowden, Chippenham	2	22%	White Horse Surgery, Westbury	1	33%
Spa Surgery, Melksham	2	29%	Wilton Health Centre	1	25%
Whiteparish Surgery	2	29%			

## 5. Appendix B.

List of surgeries where respondents who answered “no” to Q4 are registered:

Surgery Name	Number	Proportion	Surgery Name	Number	Proportion
Eastleigh Surgery, Westbury	4	17%	Avon Valley, Durrington	1	13%
Giffords Surgery, Melksham	4	22%	Beaversbrook, Calne	1	33%
Hathaway Medical Centre, Chippenham	3	25%	Castle St, Salisbury	1	33%
Lovemead Surgery Trowbridge	3	14%	Codford Surgery	1	100%
Market Lavington Surgery	3	27%	Farmhouse Surgery, Christchurch	1	100%
Bradford on Avon Health Centre	2	13%	Lodge Surgery, Chippenham	1	13%
Bradford Rd Surgery, Trowbridge	2	29%	Market Square Surgery, Wilton	1	100%
Endless St, Salisbury	2	14%	New Court Surgery, Wootton Bassett	1	20%
Widbrook, Trowbridge	2	18%	Patford House, Calne	1	25%
Abbey View, Shaftesbury	1	33%	Peacemarsh Surgery, Gillingham	1	100%
Barcroft, Amesbury	1	11%	St Mellor's Amesbury	1	33%
Avenue, Warminster	1	4%			

## 6. Appendix C.

List of Care Agencies which respondents say often or occasionally cancel care at the last minute:

Name of Agency	Care often cancelled	Care occasionally cancelled
Abicare.	1	2
Agincare	0	6
Angel Care Agency (Romsey).	0	1
Carewatch	1	5
Celtic Care	0	1
Elite Care.	0	1
Goldsborough	0	1
Homecare Finder Ltd	0	1
Leonard Cheshire	1	4
Lifeline Homecare & Alzheimers Support	0	1
Malmesbury	1	0
Medico, Southampton	0	1
Mobile Care, Melksham	0	1
Prestige Nursing.	0	1
Prime Care	0	2
Ridgeway Care	0	2
Somerset Care	0	5
Wiltshire Council re-enablement service.	0	1

## 7. Appendix D.

List of Care Agencies which respondents say often or occasionally send staff who do not arrive:

Name of Agency	Care often not arrives	Care occasionally not arrives
Abicare.	0	3
Agincare	0	6
Allied Healthcare	0	2
Carewatch	1	2
Celtic Care	0	1
Complete Care Services	0	1
District Nurses	0	1
Elite Care.	0	1
Goldsborough	0	1
In Situ Care	0	1
Leonard Cheshire	1	4
Malmesbury	1	0
Medico, Southampton	0	1
Prime Care	0	3
Ridgeway Care	0	2
Somerset Care	0	6
Spire Home Care	0	1
Surecare	0	3
Truecare	0	2

## 8. Appendix E.

List of comments from respondents given at Q24 telling us good or bad things about the care agency they use.

Comments	Name of Agency	Positive comment or negative
Abicare people are well briefed, they read notes, check with me if there should be any alterations and always seek confirmation that all is satisfactory.	Abicare	Positive
Abicare, Salisbury. Starting at 8 am but 15 minutes before and 15 after not always accurate. At times arriving at 7.30 am without phoning beforehand - same applies at evening times.	Abicare	Negative
After several different carers appearing - I explained the distress and anxiety this was causing. It has been addressed and we now have 3 reliable carers.	Celtic Care	Positive
Agency have tried hard to find staff to deal with my husband's challenging behaviour. Not always finding people with the right approach.	Somerset Care at Home	Mixed / neutral
Agency staff on the mian are competent & pleasant. Most are liked by the carer and the patient. Sometimes extra trainers are less welcome. They have to come in pairs to be able to lift the patient. Sometimes they do not coincide well.	In Situ Care	Mixed / neutral
Agency staff used at Day Service/Respite confuses my daughter. No consistency & they rely on regular staff yet they are being paid more!!	"Varied"	Negative
Agincare - some staff have no idea how to talk to older people and do not spend enough time making pleasantaries	Agincare	Negative
Agincare - There has recently been a major upheaval resulting in chaos - wrong hours/wrong carers. They don't make enough effort to find and then keep the right carers.	Agincare	Negative
Agincare Ltd: excellent agency.	Agincare	Positive
All staff have been excellent	Care Matters	Positive
Allied Healthcare - happy with service	Allied Healthcare	Positive
Allied Healthcare Group Ltd. Some staff very good and helpful, sometimes staff are late which can cause problems for me as I walk to work and this makes me late.	Allied Healthcare	Mixed / neutral
Alzheimers Society are outstanding and other than the Parkinsons specialist nurse are my only positive suppot. Otherwise people come, go, and never seen again and I forget what they came for!	Alzheimers Society	Mixed / neutral
Alzheimers Society N Wilts is excellent.	Alzheimers Society	Positive
Alzheimers Support are very good. Leonard Cheshire do have a variety of staff who do the basic care but not the cleaning as they were asked to.	Alzheimers Society / Leonard Cheshire	Positive
Arranged for a sitter to enable me to attend a carers course with an agency in Melksham. They let me down badly. Firstly cancelled a visit and two days before the course I had to phone to ask when they would arrive - they were short staffed apparently. Was lucky to get someone at the last minute.	?	Negative
Asks too many questions unrelated to the hours they	Allied Healthcare	Negative

are here.		
Best if same person can remain so as to build relationship with elderly client and become familiar with needs. Many different staff ineffective if client has dementia and unable to describe needs. CSS good. Carewatch too mechanical - don't bathe in emergency xmas day!	Care Support Services / Carewatch	Negative
Both keen to help, preparing me for when things get worse, I think!	Alzheimer's Support	Positive
Care required between 08.30-09.00 often arrive after 09.30.	Complete Care Services	Negative
Carers are v good. Times of care visits are not consistent eg 9-910am 12noon - 1-30 LT 17.00 - 17.55 evening, ie leave on place at the SAME time due at another patient.	Somerset Care	Positive
Carers are very good but the communication from the office sometimes is inadequate.	Leonard Cheshire	Positive
Carers are young and unexperienced. New people turn up, un-used to the job.	Abicare	Negative
Carers well trained, polite and relate well to mother and usually on time.	Leonard Cheshire	Positive
Carewatch - have had consistent reliable staff for several years.	Carewatch	Positive
Carewatch used to come here but the woman started to upset my other sibling whilst here so social worker changed it!	Carewatch	Negative
Caring, well motivated carers, cheeful, helpful office staff.	Mobile Care, Melksham	Positive
Currently have complained to Southampton City Council & have a level 2 investigation underway.	Medico, Southampton	Negative
Don't use them so far.	-	
During my respite break last year, my husband had 24 hour care. On my return I found he had only had 3 hot meals during the 2 weeks I was away. No ironing had been done, all my cupboards and drawers had been gone through and re-arranged. The carer refused to many of the tasks needed and my husband was in an unkempt and dirty state. The condition of my husband and home on my return caused me to be seriously ill and undid all the good of the break.	Allied Healthcare	Negative
During the last two weeks before my husband died, we did have some help for my husband. I do not remember the agency name. This was arranged through social services in Amesbury. However, some of them were 'all of a rush' which upset my husband because he was in pain and could not move quickly. (He had multiple myeloma). Also, the carers would be in and out in 10-15 minutes but still put down either 30 minutes or more on their sheet and this used to irritate me. Some would even come and sa	-	Negative
Entirely satisfied with Tisbury surgery, District Nurse, Consultant at Salisbury for mentally aged patients.	Convivuum Care	Positive
Excellent service - found after 3 months could manage on our own - 3 times a day we reduced to 1 + then nil.	The Beeches(?)	Positive
Excellent service in the past year.	Dorothy House	Positive

Excellent.	Goldsborough Homecare	Positive
Friendly, matey, helpful, we are always very pleased to see them, brilliant.	Somerset Care	Positive
Generally the carers are very good.	Leonard Cheshire	Positive
Generally the same staff visit and are very competent in their work. I and my father would be lost without them, hurrah for carers! They deal with a lot of unsavoury situations and are wonderful!	Elite Care	Positive
Goldsborough. I find the carers good but the office staff are almost completely incompetent. Rotas are wrong, bills are wrong, I have given up dealing with them.	Goldsborough	Mixed / neutral
Happy with staff.	Prime Care	Positive
Have not seen the psychiatric nurse since last September 2008, when the visit was cancelled due to the nurses ill health. Have never been allocated or seen anyone since, except a review at Charter House with the doctor, who informed us that the nurse had since left.	-	Negative
Having been burgled by 'carer' from reputable agency three years ago, who is still in gaol for her crimes, I would never use agency help again.	-	Negative
Hoping to use Beeches Care	-	
I cancel agency care when our regular help is not available. From past experience time of visit is vital if other events follow and this has not been the case always. Other staff also don't know the routine.	Abicare	Negative
I could not manage without them	White Horse	Positive
I could not manage without them, they are wonderful.	White Horse	Positive
I find the Agency Staff very helpful to both of us, and feel that I can go to the shops for an hour and leave things in their very capable hands.	Beeches Home Care	Positive
I get on very well with all of the staff. They are all nice people.	Care at Home	Positive
I have a good rapport with agency, feel I can talk to them about problems. Carehome in charge.	Allies, Devizes	Positive
I have found Alzheimers very helpful. The care my husband receives is excellent.	Alzheimers	Positive
I recently changed the agency I used as the previous one was unreliable and the care was very variable - the new agency is a great improvement.	Infinity Care	Positive
I use Agincare and I find that they listen to requests and points of view and they act on them, plus you feel that they fully understand the problems of a carer.	Agincare	Positive
I use Celtic Care, they try to send the same staff (a range of four staff), I have no complaints but trying to pay for care!	Celtic Care	Positive
I use Home Care Finder Ltd. They can never come times I have requested. Most have no idea how to deal with mum. I don't trust certain ones. Girls are too young to get on with mum.	Home Care Finder.	Negative
I use the 'Beeches' in Malmesbury. Very nice nurses mostly - I find they need training before commencing this type of work, but I expect its difficult with staff turn over.	The Beeches	Positive

I used an Agency in Melksham. There was no flexibility about their timing, I had to have the time THEY paid, not what was best for me or my husband. Different staff everyday, some of whom could barely speak English and one of whom totally disregarded work plan and went through all the drawers in the room. The above is completed for your info. My husband is now in The Paddocks but I thought the information might help in assessing these facilities. The company we used were put in place by PCT - and they were useless.	Somerset Care, Melksham	Negative
I used to use agency staff in the beginning but do not anymore as they were not reliable. Twice I was ready to go out and the carer didn't turn up and when I phoned to enquire I was told she was on her way. A little while after another person rang to say they couldn't provide a carer. On a 3rd occasion when rang to confirm they had a carer booked they said they hadn't so I have found alternative means. I think they find it difficult to provide intermittent carers. If I could give regular days and times I don't think there would be a problem.	Agincare	Negative
In Situ Agency has proved to be excellent since I started using them in June 2004.	Un Situ Care	Positive
INSITU - FIRST CLASS.	In Situ	Positive
It is difficult finding appropriate staff willing to manage a teenaged severely autistic boy. This area of employment is not paid well considering the skills needed and so, therefore, does not attract many as a career in the long term.	use multiple agencies	Mixed / neutral
***** our son attends 3 days. Care Home at Rowde near Devizes.	-	
Leonard Cheshire Care at Home Service on the whole have improved and hopefully will continue to do so. Please be advised that our regular carers are very competent and trustworthy at all times; it is in the regular carers absence, eg holidays and sickness that we get a lot of unknown faces and my husband gets confused through lack of clear communication and I spend all of my time explaining everything.	Leonard Cheshire Care at Home Service	Positive
Leonard Cheshire. Excellent and almost totally reliable.	Leonard Cheshire	Positive
Limited availability - no w/e	Surecare	Negative
More information on agency staff would help me in the future, when I need them.	-	Mixed / neutral
Most agency staff are kind and careful and take interest in the person they are for and myself.	Leonard Cheshire	Positive
Most of the staff are helpful and patient and the office does its best for different arrangements. The very OCCASIONAL bossy carer has a very adverse affect on my husband, becomes angry.	Wiltshire Complete Care	Positive
My daughter goes into respite care with which I am satisfied.	-	Positive
My daughter is visited by the community nurse from Saverlake, they are a wonderful team.	-	Positive
My father had had a stroke and could not move or make himself understood. 3 days before he died, I received a call telling me visits would stop because he was unpleasant!	-	Negative
My husband has had two different agency staff over the last 6-8 weeks. Both are only in their 20's but	Agincare	Mixed / neutral

seem to cope very well, however one is leaving shortly.		
My husband is now in a care home. You have to ask mostly, will tell you if his health is worse. Some staff will tell you more, others you have to ask.	-	Negative
My husband is now in a nursing home. The agency were exceptionally good, mostly on time, experienced and caring.	Care Watch	Positive
My husband is now in care, but when I had carers coming in daily never saw the same person twice, one went through all my drawers. Management denied having received my complaints. Guidelines set out for staff were ignored, or only completed in part.	Somerset Care, Melksham	Negative
My husband just gets used to the carers & then it's all changed.	Ridgeway, Devizes	Negative
My mother has now had to be moved into a residential care home, Merlin Court, Marlborough because her GP assessed she was no longer safe to be left alone at home. The 3 home daily carers plus me could no longer cope with all her needs.	Carewatch, Swindon	Negative
None qualified to manage my son's needs	-	Negative
Not enough training and commonsense	Abbicare	Negative
Not specific to this agency - most staff fail to read written instructions left for them, or do not follow them if they do read them.	Surecare	Negative
Not totally understanding the needs for our child who has complex needs, which can change suddenly.	Care Choice	Negative
Nurse Plus Salisbury are excellent.	Nurse Plus	Positive
On the whole, efficient and pleasant - worker reliable.	Carewatch	Positive
On the whole, efficient and reliable	Carewatch	Positive
On the whole, the carers are wonderful. The lady in the office is not. She constantly doesn't tell us or the staff of changes. She doesn't tell us when people are off sick and her attitude is normally because I am at home, I can do everything.	Leonard Cheshire	Positive
Once the agency proposed sending a male care assistant to bath my mother, who, of the generation who did not even undress in front of her husband would have been devastating. This is unlike hospital or nursing home care where there are other people around and was quite unacceptable to us both - but the agency argued with me. However, my carers support agency sorted it out!	-	Negative
One of the better ones.	Othen Care	Positive
Only past history now!	-	
Othen CAre, Tidworth are absolutely wonderful, caring, kind, patient and efficient.	Othen Care	Positive
Our son has recently returned home from Hampshire. He was in supported living - turnover of staff phenomenal! Now back in County has access to Alabare but slowly finding lack of training/understanding of autism. This would appear to be a problem with many organisations/agencies.	-	Negative
Please note although I am a carer, my Mother lives 200 miles away. In July 09 she will be coming to live with me in Wiltshire. In the meantime, everything is left under control of her carers.	-	

Pretty good.	Mobile Care, Melksham	Positive
Prime Care - very good - same person every morning (except holidays/sickness,) insitu - good - same person 4 evenings - different persons rest of week (mng arranged) Goldsborough Respite Care - good - same person.	use multiple agencies	Positive
Prime Care, Bulford Road - some staff do not know how to make beds, cleaning.	Prime Care	Negative
Primecare very good (love them so). Fountain way are getting now.	Prime Care	Positive
Q19 Re agency staff we use Alzheimers support only.	-	
Restricted availability at times (not regular) requested. Only have two staff in our area (Mere).	Alzeimer's Society	Negative
Ridgeway Care - office staff need training in people skills & caring. The girls who come to the house are great.	Ridgeway Care	Positive
Several agencies I find are not good at getting back to me, particularly if they are unable to provide the care requested!	-	Negative
Some of the carers are excellent (one in particular,) one or two not so good - but despite keep telling the agency they still send them.	Home Care Finder Ltd.	Mixed / neutral
Some staff are very good, some less so - Polish accent is difficult for a deaf person, although their skill is good. My husband reacts badly to an abrupt approach. Wiltshire Complete Care.	Wiltshire Complete Care	Negative
Somerset Care at Home: MOST staff excellent with my dementia suffering, often difficult & bad tempered husband, just occasionally younger carers may, A. assume he's deaf, he's not. B. Ask him to make too many decision. C. let him bully them.	Somerset Care at home	Positive
Somerset Care, Melksham. I am a user as well as carer. They do not collect care reports. When social services ask them for info, it is generally negative and they don't check with main carer. If I have said I don't want help with dressing, the agency does not check with me for a reason, which could be anything from being up half the night with husband, sleep disturbed, leg ulcers, skin soreness on body (not wanting particular carers in shower room). (That goes for the two of us).	Somerset Care, Melksham	Negative
Spine Care has been very good and efficient at all times.	Spine (Spire?) Care	Positive
Staff are very helpful and very caring to my husband, and I certainly could not manage without them.	Spire Homecare	Positive
Surecare have been very good with my mother. She lives 40 mins away and I can't get to her early in the morning, so they get her washed and dressed every day, then take over care for the rest of the day.	Surecare	Positive
The agency - listens and work together although NHS employ agency staff via care home.	Allied	Positive
The agency and staff are excellent - could not be more helpful and accommodating.	Allied Healthcare, Devizes	Positive
The agency changes arrangements but doesn't inform our social worker - and pass our telephone number to staff who in turn pass messages & excuses.	Celtic Care	Negative

The agency I used sent a young person in similar age to my daughter which was ideal for her, as she could relate to her.	Allied Healthcare, Devizes	Positive
The agency staff hardly every wipe the bath out and leave the bathroom tidy after giving client a bath.	Leonard Cheshire	Negative
The care for my mother was good but being main carer for my husband meant coping with two sick people at one time and travelling some 54 miles each weekend.	Clover Unit, GWH	Mixed / neutral
The care package my mother has is very good and the carer's pleasant and efficient.	Somerset Care	Positive
The carer the agency send me is great and gets on well with my father. The main problem is the office staff think they know best and try to send me carers that are not suitable and have to insist on the same person for continuity of care.	Agincare, Chippenham	Positive
The carers are very kind, well trained and caring.	Leonard Cheshire	Positive
The carers are very professional, easy to get on with, Mum is not easy to deal with. Safety is a big issue.	Life Line Home Care	Positive
The carers have been excellent with helping me out with care issues especially if I need to change care time slightly, however, I have found the office staff less supportive and try not to bother them!!	Agincare	Positive
The girls who come to the house are fantastic, but the office staff leave a lot to be desired, badly trained - no people skills.	Ridgeway Care	Positive
The large number of different carers visiting my mother is a HUGE problem. She has Alzheimers and has now given up trying to recognise her carers, as she may have up to 10 or 12 different carers in a week. It is also very hard for me to communicate with carers. I cannot assume they are familiar with my mother, or her needs and have to every day write notes/instructions as they may be visiting for the first time. My mother has NO confidence in the carers and is confused about their visits. Vulnerable people like my mother need CONTINUITY and ROUTINE rather than numerous individuals who do not appear to "care" and are only concerned with doing the specified tasks.	In Situ Care	Negative
The service given by Careline is beyond reproach. The carers all do a splendid job, they are patient, understanding and very thorough both night and morning. There is no doubt they are well trained and very observant as to their patient's condition and the use of medication as the situation may demand, and never in a hurry to move on to their next appointment. I often feel they are acting as if they were tending their own mother - I cannot say more than that.	Careline CC, Warminster	Positive
The staff are always very caring with my mother.	Leonard Cheshire, care at home	Positive
The staff are excellent but overworked. There are always big problems when some staff are sick or on holiday. The remaining staff are very rushed and harrassed.	Prime Care, Durrington	Positive
The staff mostly (ex Zimbrwe) were 90% good, some 100% or more.	Angel Care Agency	Positive
There are 3 visits of 2 staff each visit. Carewatch does 2 visits and Abicare 1. Both are competent. I'm	Carewatch & Abicare	Mixed / neutral

getting fed up with chasing CMHCT to set it all up with Carewatch.		
There have been a lot of problems recently, there is very poor communication & they tell us one thing & then something else happens.	Agincare	Negative
They are very polite and considerate	Spire	Positive
This is an excellent agency, they are punctual, stay the allocated time and are flexible. We change from Sure care in Trowbridge - (they pushed us out actually, among others) all the staff here have NVQ 2/3 they are our friends now.	Care Matters, Warminster	Positive
Tries to ensure the same carer all the time, telephoned if there is a problem with the carer.	Surecare (Wessex)	Positive
True Care - The care staff are on the whole lovely but always have to ask what they are needed to do if they are new. The Organisation (bosses) need to do their job much more efficiently and monitor the situation more closely.	True Care	Positive
Two nurses not very nice to know, very bossy and doing their work very badly! Requested never to see them in our house again. All the other nurses very good and friendly.	District Nurses	Negative
Unreliable. Failure to notify us when agency staff cannot come.	Mobile Care Agency	Negative
Used more than one agency. Initial info is lacking. The agencies treat their clients like service users. Have sacrificed support levels rather than use different staff.	-	Negative
Used to use Abicare, very unreliable - either turned up too early, too late or not at all - never apologetic.	Abicare	Negative
Using a notebook to communicate new info or problems works really well. I also left guidance notes to help if new staff visit. Some really good staff,	Carewatch	Positive
Very good	Life Line	Positive
Very good care from regular carers, who have played a great part in improving my husband's movements and confidence. He is tetraplegic from S.C.I.	Leonard Cheshire	Positive
Very good care, no complaints.	Carewatch, Trowbridge	Positive
Very good record of actively creating a team of REGULAR staff. Take GREAT CARE to match staff to our needs. Cancellations only a few times due to staff sickness - usually arrange replacement staff.	Prestige Nursing	Positive
Very good.	Alzheimer's Support	Positive
Very please with the service we received	Abicare	Positive
Very satisfactory	Agincare	Positive
Was quite satisfied with Carewatch person who came to bath my husband.	Carewatch, Trowbridge	Positive
We are very satisfied with the service we get from Abicare, we have a regular carer from Monday-Friday, a different but regular carer on Saturday and varied carers on Sundays, all of whom we now know.	Abicare	Positive
We find most carers pleasant, well turned out and quite punctual. There could be less office staff and more carers as when you ring the office for anything, you never speak to the same person twice.	Ridgeway	Positive
We get very good help from hospital doctors, nurses	Allied Health Care	Positive

and care staff as my wife is wheel chair bound. M/S and stroke and TS 24 hour care.	Group	
We moved to one person daily because of problems.	Malmesbury	Negative
We only use the Celtic Care agency occasionally at weekends but my Parkinsons is making me very tired and my husband unsafe so we have them more regularly and so ask for the same person each time if she's free. She is a very quick learner and very pleasant.	Celtic Care	Positive
We only used th agency for one week and they then refused to come because we were too far away with no mobile signal.	-	Negative
We use Leonard Cheshire Disability, we have regular carers whom we can trust completely & we work as a team with my tetraplegic husband. Head office is efficient & helpful, a fantastic agency.	Leonard Cheshire	Positive
We used Leonard Cheshire - really good rest of the time but time very restricted & sometimes different carers.	Leonard Cheshire	Positive
We wew very pleased - great help & support. Nice people	Reablement Team	Positive
Well trained, friendly, arrive at the time stated. Willing to help in any way and make the person feel important	Allied Health Care	Positive
Wiltshire Council - re-enablement service - generally good on long term support, good timekeeping, flexibility of my wife's work requirements change - responsible for her needs which she pays for monthly.	Wiltshire Council Reablement Service	Positive