Opening Statement by Allison Metcalfe, founder, HCA & Carers Ireland

Addressing the Capacity Crisis in Home Care by Making Caring a More Attractive Career

Introduction

I wish to thank the Committee for inviting me to provide an overview of the home care sector on behalf of HCA & Carers Ireland. We were established in 2016 and is a platform for Professional Carers and Health Care Assistants to provide support; enable dialogue and share the experiences that they face, everyday, in seeking to provide quality service. This has proved to be an essential platform in combatting the isolation that many Carers feel when working in this sector.

Home Care

In 2011, The Law Commission recommended regulation of homecare and we are happy to see and support movement on this. We firmly believe a sector providing care needs to be regulated by an external body.

Our home care sector is in crisis. Professional carers are leaving the sector every day and with precious few being attracted to replace them. This exodus is reflected in the rising waiting list for home care packages which presently stands at over 5,000 people.

Carers that are working in the sector are used very inefficiently, as they often work with several providers and are covering large geographical areas, resulting in them spending large amounts of their time travelling rather than actually being with the clients.

If we look at the demand that is coming down the tracks, the situation is even more worrying. The recent ERSI report into the future demand for healthcare, predicted an increase of over 50% for home care over the coming 12 years.

These recruitment and retention problems, which both the for-profit and not-for-profit sectors are facing, together with their inability to meet demand, has many serious consequences for people needing care and our health sector in general.

Firstly, the high turnover of carers that providers are experiencing, has serious consequence for the quality of care they provide. Continuity of care is one of the principle tenants of quality home care and if the carers who are going into people are changing every couple of months, no matter how much supervision or governance is in place, the quality of care will be seriously affected.

Secondly, if we don't have capacity in home care, this increases the pressure on our hospitals and results in increased delayed discharges and a huge drain on the health budget. It also pushes more families towards residential care under the Fair Deal Scheme which is generally not their first choice. Most people’s first preference is to continue living independently at home for as long as possible.

The reasons for this severe shortage of carers in the sector are many but the two principle causes are;

Firstly, Poor Employment Conditions

On average, professional carers are paid about €11 per hour for contact time with clients. Many get no payment for travel expenses. This seems like pittance taking into account providers are generally charging €26 per hour for their services. While we understand they
have costs to cover, these kind of margins are excessive and are putting too much money into the pockets of providers owners.

Providers will say that the HSE needs to change how they commission care in order for them to be able to improve carers employment conditions but this is just passing the buck.

If you look at the published accounts of many of these providers, you will see a very high level of returns to their owners in comparison to what they are paying their carers. Needed change has less to do with HSE commissioning and more to do with profit.

**Secondly Little Guarantee of Work**

Most working carers are on what are termed ‘if & when’ type contracts. This means carers have no guarantee of work and no visibility of earnings to allow them live a normal life where they can plan ahead for things like holidays and get mortgages like the rest of society.

These types of contracts enable providers to treat their most important asset, their carers, as a variable cost, to be turned on and off at their whim. With rising waiting lists for home care packages, we know there is no lack of demand or worry about where the next client will come from, so what is the justification for not giving carers guaranteed hour type contracts?

If we are to address this capacity crisis and make caring a more attractive career, what needs to be done?

Firstly, we need to radically improve the employment conditions of carers, principally their pay. This isn’t so much a need to increase funding but rather to ensure that more existing funding goes to frontline workers and not to the company owners. A happy, well-rewarded carer is the best guarantee of quality home care provision. Providers won’t give up their attractive profits easily and so they need to be encouraged to do so. Unfortunately, the recently published HSE homecare tender missed an opportunity to insist on a minimum wage set for carers who are providing HSE funded care. In the absence of this why can’t we have a Joint Labour Committee for homecare that sets and regulates what carers should be paid.

Another way of encouraging providers to treat their carers better would be to give clients choice through the commercial provider or directly employ their own carer using the same state funds in a tax compliant manner?

Providers talk a lot about governance and supervision issues when discussing carers working directly with families, but what they forget to say, is that because of their poor record in retaining carers, their supervisions are done on a different set of carers each time. As I stated previously, continuity of care is perhaps the most important component for delivering quality home care.

Secondly, many carers are limited by our rigid social welfare system and are prevented from taking on more hours for fear of facing a sharp drop in benefits. Why can't we make the system more flexible and move from a system which only looks at the number of days worked, to a total hours based system and also taper the drop off in benefits so that carers are encouraged to take up more work.

Thirdly, carers need to be paid for travel time as well as travel expenses. We need to enact in Irish law, the Europeans court’s ruling in the TYCO case whereby mobile workers with no fixed place of work such as carers, are paid from the moment they leave their home. Carers should also be paid for the wear and tear on their own cars. These changes would encourage care to be delivered locally.
Fourthly, we need to limit the amount of 30-minute visits to those cases where there is a compelling clinical reason. At the moment 30-minute visits are used to spread out the home care budget.

Lastly, we need to fund the training and upskilling of carers. Presently providers don’t pay for carers training. Carers are expected to fund their own training. The State needs to set up a fund to pay for carers who want to upskill and progress their careers. Any fund should not be channelled through the providers but rather directly to carers themselves. Carers need to be able to see a pathway of career progression through upskilling.

In summary, regulation in home care provision is overdue, external monitoring is needed to ensure standards are being met. Caring is to be made a more attractive career, which in turn will allow the sector to participate fully in the overall health sector, the power of providers must be rebalanced versus carers. The best way to do this is for HSE commissioning to truly value frontline workers by ensuring more funds find their way to carers. Offer choice to families regarding carer they receive.