THE PEOPLE'S CARE WATCHDOG: SUPPORTING CHANGE DOCUMENT

Change Targets	Overview of Evident Issues to Date	Solutions to be Explored	Assistance PCW Families Can Provide
Care Homes	Are often run aggressively for profit. Cost savings lead to the neglect and abusive treatment of residents through low staff numbers, lack of adequate training and restrictions on important things like use of incontinence pads, very low food budgets, etc. Often have a very significant lack of clinical expertise and leadership, which leads to very poor care delivery. Majority demonstrate a very significant lack of understanding about the legal frameworks for service delivery, so they break the law and abuse resident's legal rights repeatedly. This is most evident in the ongoing visiting restrictions that so many families are facing. In addition, residents are frequently unlawfully evicted simply because their families have raised concerns about care. Charge self-funding residents far more than local authorities pay for placements.	neglectful cost savings are immediately stopped and a regulatory framework developed that ensures that service delivery expenditure is monitored. Creative, alternative solutions to current care home provision need to be explored, such as community owned care homes. Solutions need to include a commitment to a fair cost for all. Regulation needs to ensure providers can demonstrate clinical expertise and leadership, as well as legal compliance. There needs to be an immediate end to all visiting restrictions, including set visiting times, so families can urgently check that their loved ones are safe and well cared for. An effective and compassionate clinical model for dementia care delivery needs to be developed for care homes. National training standards and pay expectations for carers need to be revised to better reflect the clinical roles carers are fulfilling; as well as to ensure that all staff understand key expectations	We would like to bring our expertise to discussions with Care Quality Commission (CQC), Ministers and the Association for Directors of Adult Social Services (ADASS) to help develop understanding around the regulation and contracting of care homes. Regulation can and must ensure that care providers demonstrate clinical expertise and legal compliance in service-delivery, as well as appropriate care delivery expenditure. PCW want to bring their expertise to work on a feasibility study looking into the idea of community owned care homes and a number of other creative housing and support models. We are also ideally placed to develop a dementia model of care delivery that can be implemented across the care home sector. We are publicly calling for an immediate end to all unlawful visiting restrictions, including set visiting times, so families can urgently check that their loved ones are safe and well cared for. PCW can contribute significant expertise to the development of a national competency framework for care home staff.

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Local Authorities	Are repeatedly breaking laws including the Human Rights Act, Mental Capacity Act (including DoLS) and the Care Act. However, there is no way to hold them to account in real time and stop these legal abuses. Instead of working to support families to be able to keep their loved ones at home, social workers repeatedly tell people that there is no option but to move their loved one into a care home. This is almost always untrue. It doesn't uphold the law and costs the country more money than supporting them at home would. There are many families wanting to bring their loved ones home from care and being wrongly told they can't do this. This is made possible by a sector-wide misuse of Mental Capacity Act legislation. There aren't resources or support for families wanting to keep their loved ones at home. This is urgently needed, as so many families already wish to have their loved one at home. Standards around Safeguarding and DoLS work are extremely poor. They don't follow best practice or the law and are grossly failing vulnerable adults. There is no longer any good practice guidance describing how Safeguarding investigations, only simple enquiries. Social Workers are failing to work to their required professional standards, as set by Social Work England. Local authorities do not acknowledge and work with the legal contractual responsibilities they have for poor service delivery in care homes.	ensure that they fully understand the Mental Capacity Act &	a new Minister for Care Homes. PCW is ideally placed set up and run very effective website information resources and family-to-family support for all the families now wishing to keep their loved ones at home or to bring them home from care. We also believe that Government and Local Authorities need to urgently commit to ensuring that every family who wishes to keep their loved one at home

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Care Quality Commission (CQC)	Is evidently unfit for purpose, with numerous failings, despite being a very expensive service to run (currently funded by care homes). They are self- serving and bureaucratic and have failed repeatedly and publicly to investigate serious concerns raised by staff and families. They have also failed to protect care residents and their legal rights throughout the Covid crisis. Investigation reports have been found to repeatedly not tally with families' feedback to CQC and they rate homes much higher than families would. Currently 84% are rated as good or outstanding but this is at least partially because CQC use care homes ratings to rate their own performance and are ignoring serious incidents to enable them to give higher ratings. Regulations are unwieldy and ineffective and CQC are never held accountable for their failings.	A new system of regulation is urgently needed if we are to tackle the widespread neglect and legal failings occurring in care homes Regulations need revising to become much more meaningful and investigation and inspection processes need to be much more effective, with meaningful resident and family feedback the primary component.	We would like to bring our expertise to discussions with the Ministers responsible for care home regulation to enable a complete overhaul of the regulatory system for care homes. We believe that this work would better sit with Local Authorities and that involvement of PCW families in the development of new regulations would bring the expertise that is needed to address current failings. We would like CQC to commit to an urgent review of how they treat safeguarding, poor care and whistle-blowing alerts and could offer our expertise to discussions around what has gone wrong to date and how they can begin to address obvious failings.
Advocacy Services	The independent status of many is questionable. They are contracted by Local Authorities who they often seem to collude with. Often don't consult with families (despite this being legally required) and frequently appear to exclude them. Workers aren't clear enough about the law to meaningfully protect the legal rights of residents.	Better advocacy service commissioning is needed with outcome measures that ensure independence from the Local Authority and better representation for care home residents through greater involvement of their families. Better training and supervision is needed in Advocacy Services to ensure that workers fully understand legal and best practice expectations and work transparently with families.	We would like to bring our expertise to discussions with the Chief Executives of Advocacy Services to enable them to see how their services are failing our most vulnerable citizens and to discuss how these failings can be addressed. We can also bring our expertise to help with the development of new national guidelines for the commissioning of advocacy services.

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GPs and Trust Doctors	 Have been prescribing end of life medication (particularly Midazolam) without clear clinical justification or patient and family involvement, leading to vast numbers of premature deaths. Have been issuing unlawful DNAR orders, either without involving or with the heavy coercion of patients and families. Repeatedly prescribe psychiatric medication that is dangerous and contraindicated. For years, Government policy has attempted to address this issue but there is no accountability in real time and the prescribing continues. Doctors are diagnosing and prescribing serious medications without seeing patients or talking to their families. Treatments or lack of treatments are being decided after video conversations with care home staff, the majority of whom are not medically trained. Care home residents are being forced to use the GP practice that the care home chooses and many GPs are being paid retainers by care homes, which leads to 	Clinical Commissioning Groups and Health Trusts need to immediately commit to ensuring these illegal practices are stopped and that doctors are held accountable in real time for this malpractice in future. NICE need to immediately revise their guidance around use of Midazolam Clinical Commissioning Groups, the GMC and Health Trusts need to work on reducing dangerous prescribing by: committing to taking action in real time if a doctor is found to be inappropriately prescribing	We would like to bring our expertise to discussions with Health minsters, NHS leaders and NICE to ensure that unlawful end of life policies, practices and prescribing are immediately stopped, along with the issuing of unlawful DNAR orders. We also want to ensure through those discussions that CCGs, Trusts and the GMC now hold doctors who prescribe contraindicated psychiatric medication accountable for this malpractice. We also need to ensure that new guidance is issued requiring doctors to see patients in person and, where appropriate, to talk to families before diagnosing and prescribing serious medications to care home residents. In regards to the malpractices that are coming to light, we also wish to ask for a commitment from the NHS to stopping GPs from accepting
	GPs colluding with care homes and failing to recognise the needs and rights of patients and their families.	Care home residents need to be able to exercise their lawful right to be registered with a GP of their choosing; and the practice of GPs being paid retainers by care providers needs to stop.	retainers from care homes and to ensuring that care home residents are able to exercise their right to be registered with

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Police	Local Police teams are repeatedly failing to investigate serious crimes against vulnerable adults. There seems to be a belief that investigations are simply a Safeguarding duty for the Local Authority, despite the legal expectations of the Care Act.		We would like to bring our expertise to discussions with the Police to secure their commitment to investigating all serious crimes against vulnerable citizens, to ensure that justice is served and perpetrators are prevented from committing further abuses.
Court of Protection	The Court of Protection are not social care experts, so rely on local authority reports to understand key issues. These reports are often very biased and do not reflect legal or best practice expectations. Court procedures favour Local Authorities who can navigate the legal culture of the court and have the resources to do so. Procedures are intimidating, hard to understand and not family friendly. There are now unacceptably long delays to access the Court, which leaves vulnerable citizens in dangerous or inappropriate settings and situations for months and months before their case is heard.	The Court needs to become more aware of wider system issues, to enable them to make better informed rulings. The Court needs to be more mindful of their role in ensuring that the legal requirements of the Human Rights Act and Mental Capacity Act are being upheld by local authorities. The Court process needs to be reviewed to explore what can be done to make proceeding family friendly. The Court need to commit to addressing the problem of unacceptably long delays in accessing the Court.	We would like bring our expertise to discussions with the Court of Protection exploring how the Court can be made more family friendly. We ask them to recognise the difficulties with the current system and ensure Court discussions and rulings reflect an understanding of this, with much greater scrutiny given to reports from Local Authorities and care home providers. We would also like to secure commitment from the Courts to urgently reduce the unacceptably long delays that residents and their families face when trying to access the Court.
Office of the Public Guardian	Work is currently being undertaken to fully understand the difficulties families are experiencing with the OPG	Potential solutions to follow	