

Electronic monitoring in homecare

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Electronic Monitoring in Homecare

- Local authority commissioning of care on a cost competitive basis in the context of budget cuts;
- Increased demand;
- Removal of homecare from public to private sector and legal protection and collective bargaining;
- Predominance of Zero Hours Contracts (ZHCs);
- Requirement for Electronic Monitoring;
- Minute by Minute commissioning of care.

Women's unpaid working Time

- Elimination of so-called 'unproductive' working time;
- Changes in ratio of paid and unpaid working time;
- Episodic paid working time;
- Accommodation of the National Minimum Wage;
- Impact on the quality of care – discretionary care.

Research Methods

- British Academy/Leverhulme small grant;
- Case studies of homecare provision in two neighbouring local authorities (Authority A and Authority B) in the South West of England between 2014 and 2015.
- Analysis of the commissioning process through documentation; sales and publicity material for a large supplier of EM systems;
- 20 interviews with local authority officers involved in the commissioning of homecare services and the quality of care, representatives of the supplier of EM systems; and senior managers or owners of three homecare providers;
- 14 in-depth interviews with homecare workers with experiences of EM.

Zero Hours Contracts

- The ability of providers to deliver contracts based upon local authority set charge-rates depends upon ZHCs;
- ZHCs facilitate the non-payment of travel time between home visits, supervision, training and episodic working time (unpaid waiting time between visits);
- Staff are not (once hourly rates are averaged out over the time they are effectively available to the employer) in reality receiving a NMW (Bessa et al., 2013).

Zero Hours

If we employed care staff on a permanent contract, the rates would be higher ... because it will push up the costs. We pay statutory sick pay, they get holiday pay now, but there's going to be down time - that was the biggest problem that the local authorities had when they provided in-house care. Well the local authorities employed homecare assistants on fixed contracts, fixed hours, so they would work from 8 till 4. They would be busy from 8 till 12 or 2 and then the rest of the day there was nothing else to do, but they were being paid for that time ... the majority of our people that are on zero hours contracts – obviously there's no down time. [Provider, Authority A&B]

Living Wage

- Almost 90 per cent of local authorities across the UK were paying an hourly contractual rate less than £15.74; the minimum price it calculates at which employers can fully comply with NMW obligations (including care workers' travel time) [UKHCA's survey, 2015];
- No London borough was paying an hourly rate sufficient to support the London Living Wage:

Where councils pay an unrealistic price while expecting a Living Wage they run the risk that their providers cease to be economically viable, or that areas such as training and care coordination are sacrificed to increase wages to the required rate. In reality the aspirations of such councils are little more than empty promises to local workers.

Electric Monitoring - rationale

- To improve efficiency and quality assurance in homecare safeguarding both service users and staff;
- Monitors the real-time location of care workers;
- Council's system shows if a visit has been missed or if the homecare worker is late or leaves early;
- Automatic invoicing.

Electric Monitoring - reality

- The supplier promises savings to local authorities, because they pay only for the costs of the *actual* care delivered;
- For local authorities the system offers a three-way analysis of commissioned (purchased) time versus planned (scheduled) time versus actual (delivered) time;
- Providers are paid for the time spent in 'actual care delivered' and are penalised if visits exceed planned or commissioned time;
- Providers or workers cannot override system if they forget to or can't log-in or out;
- Significant savings.

Electric Monitoring - rationale

We've had a cost saving since we've introduced [EM]. What we were doing was we were paying providers on what we commissioned, so if we commissioned 'x' number of hours, they would then be paid for 'x' number of hours, what we now do is we pay providers on what we call actuals, so the actual time they've spent with the service user ... because we were paying too much, because often what was provided wasn't what was commissioned - perhaps the service user's needs changed or whatever and things like that or often it can be the case that they would say to the provider 'I don't want you today because my daughter's here or whatever' - there's a legitimate reason for turning the provider away.

[Commissioning Manager, Authority B]

Minute by Minute commissioning [Authority B]

- The requirement to adopt EM involved a move from a banding system, where workers would be paid to the nearest 15 minutes, to being paid by the minute;
- Squeezing out unproductive labour time;
- Provider overheads and any profit margins have to be recouped from the difference between the hourly charge rate *as delivered* and the hourly wage. Any costs associated with time for training, management, supervision, travel or time between visits has to be paid by providers out of actual contact time.

Minute by Minute commissioning

Well they're saving, if the carers are going in and it's a 30 minute call and they go in for 20 minutes, they only get paid for the 20 minutes. So in a week if that happened, it all adds up doesn't it and if you're doing a lot of calls it's going to add up somewhere along the line isn't it? When you think what has got to come out of that hourly charge rate its frightening – we put in the cost of the manager, the cost of the coordinator or two coordinators, the cost of senior carers, the cost of an office, the cost of the organisation's umbrella - HR all of that – then there's the IT, the EM system, the expenditure on that – that's all got to come out of the £14.20, hourly pay rate – the lowest rate is £7.45, national insurance, pensions –you try and work out the maths because I can't!! The person from the bid team [from the organisation] that was doing it came back to me and said “are you having a laugh?” and I said “no I'm not that is the highest we can bid at”, she said “you just can't do it”. [Provider Authority B]

Electronic Monitoring of Working Time

*'We have had cases where someone has stayed to have a chat – well, the authority aren't going to pay us for you to stay and have a chat with them, that's your time. Log out of your time and then stay and have a chat if you like but you need to go on to your other clients'.
[Provider, Authority B]*

Electronic Monitoring

They said to us, if we went over our time with a service user we wouldn't get paid because that's not the contracted hours. The council won't pay them, so the agency won't pay us. So if we did an extra hour, which happened quite often if somebody had a fall or someone wasn't well and you stay on because it's your duty of care, we wouldn't get paid for that.'

[Care worker, Authority A]

Minute by Minute commissioning

- Homecare workers regarded their 'working time' as the length of time for which they wore their uniform and on this measure, only about half of their working time would qualify for pay under EM on a typical day.
- One reported committing herself to work a 15 hour day and receiving between 5-8 hours pay.
- Another had calculated that the introduction of EM had resulted in a wage drop of £50 a week.

Minute by Minute commissioning

- Correct operation of the telephone system had become a central focus of the homecare job;
- Paid working time did not recognise the fulfilment of tasks in the care plan, let alone the unforeseen circumstances that were a part of homecare and required homecare workers to stay and deal with situations and meant 'you can't just walk out of the door and leave and say 'well, my time is up now, I've got to go!';
- Yet if a homecare worker stayed longer than scheduled they would not be paid.

Minute by Minute commissioning

I think it was introduced supposedly for quality purposes, although my personal opinion is that it doesn't monitor quality, it's finance driven actually. Before we would pay for what we'd commissioned, so [now] we pay for the actual; so if they were there for 29 minutes we pay for 29 minutes. All it does is tells you that somebody turned up, it doesn't tell you what they did. It doesn't talk about the attitude to the way that they provided care, it just tells you that they were in the house for half an hour; they could have been sat there.

[Service Manager, Authority A]

Summary

- EM driven by financial considerations and budgets;
- Increasing proportion of working time unpaid;
- Labour intensification delivered through the commissioning process, which facilitates episodic working time based on contact time through ZHCs;
- These blur the boundaries between paid and unpaid work because it is unclear whether travel time and the 'down' time between visits represent time at work and if it is paid or unpaid;
- ZHCs provide the necessary contractual basis for EM, which in contrast clearly distinguishes between paid and unpaid work, although still demanding availability.

Summary

- In combination ZHC and EM strip so-called 'unproductive' labour from care work;
- The removal of state support for welfare and social care has profound effects upon women's paid care labour and the value of care;
- The reliance of care for the elderly upon the unpaid labour of largely women workers.