



Social Science

From Home Help to Home Care

V/o:

From home help to home care. You will hear home care workers from County Durham and the people they work with talking about home care. The transformation of the home help service into what is now called home care shows how the provision of social care has changed in Britain in the last seventy years. Shirley Madrell, then Anne Collingwood, two home care workers, talking about being a home help back in the 1970's.

Shirley Madrell:

I started as a home help in 1978. You got issued with an overall and a pair of rubber gloves, and a pack of time sheets, and that was your lot. At that particular time you could probably do five to seven fires, to light the fires every morning in the Dales because nobody had central heating. If there was a really dirty house you used to get an extra 5p an hour more, they used to call it 'dirty money', we used to call it 'muck money'.

Anne Collingwood:

When I first started they'd get some really, really dirty houses and maybe four or five of us would be working together. We would much more sociable I think in those days. Years ago when I first started we were 'the ladies that do', 'mother's help', 'the maid', or if we were very unlucky it was 'the scivvy, and the one that'll come and do the floor today if I drop anything'. Nobody bothered about us. We were just sort of left to ourselves.

V/o:

The job of a home help was very different to that of a home care worker today. Their tasks were very different for one thing as Eileen Dixon and Lee Davison explain.

Eileen Dixon:

Some of the home helps used to have one, two hours cleaning time; we're down to fifteen minutes and half an hour now because they don't class that as really necessary. It's the care that they want, and even care's down to fifteen minutes at some point. Fifteen minutes for a lunch I have to do and that is really quite hard. When I first go in I don't like to take over because this is their house, so if I go in somewhere and I see them sat in the chair, I sit beside them or I get down onto my knees a bit and I'll say "hello" and I always introduce myself, and I'll say right, how about if I do you a bit of breakfast – what would you like? I like to get to know how they like it, whether it's strong or weak, if you get over that and you do it right you're on with a winner.

Lee Davidson:

The type of work I do now is basically to enable the client to live a normal life by providing their care needs in their own home which I think is a really good thing. Normally you're only choice would be a residential or nursing home. A lot of my tasks do vary for each client, the basics of shopping and housework, I do a lot of bathing for clients, pop-ins, tea calls, make lunch, take two clients out on separate days in wheelchairs, one to the local town to collect his pension, to do a bit of shopping, and another client to the local park where he's quite happy to go and feed the ducks.

V/o:

Things have changed for service users too, like Joyce Clarke and Chas Jones.

Joyce Clarke:

I have to have my tights put o, on a morning and my clothes put on, they give me my breakfast, and then once a week she cleans through and occasionally she'll do shopping if I

run out of anything. She's really great. What I think about what my parents had to do, you know, they never got anything done for them, they just had to paddle on.

Chas. Jones:

With Multiple Sclerosis it does get worse and it gets out of hand sometimes. What would I do without disability home care workers? I'd not be able to do anything without them really. They're always there on the line. I've had my bungalow redecorated and cooking, do my washing, ironing; you know they do everything for me really.

V/o:

Another difference for home care workers is the way in which they now work with other professionals in people's homes.

Eileen:

We all know the rules and regulations and we have to stand by that. You just have to go in somebody's house and the newspaper hasn't been delivered and you sort of ring the newsagent's up, we sort of go off track a little bit, it's not just basic breakfast. You've got, as I say, eeh just have a look at this bill. I mean I know we're not supposed to. Do you think this might be right, Eileen, it's standing charge from so-and-so. Just sometimes it's just a general talk, isn't it? I would never ever go outside of that.

Anne:

We're not allowed to run their lives for them, we're not allowed to buy them patent medicines if someone wants me to go down to the shop or chemist, or whatever, and buy a box of Lemsips I've got to say no, I'm sorry, because I may not know that person's medical background.

Lee:

The district nurse is often at one of my client's houses to put a catheter and given an enema, well I've assisted in just rolling the client if she's unable to turn herself, then we use the hoist and we transfer from the bed onto the commode while the district nurse is still there.

V/o:

Lee, like Eileen, worked in the private sector before joining Social Services, and the competition between private agencies and the local authority as providers is another significant change.

Lee:

I did enjoy working at the nursing home. I think I gained a lot of experience from there. I was happy with the team I worked with but it was much more of a business which is, I suppose, what the private agencies are, it's all money orientated, and we didn't like the idea of using the elderly as this, you know it just didn't seem right.

Eileen:

The problem is with the private sector you're expected to work early morning and late at night, you don't have lunches and dinners and teas and nights like Social Services, they're just ringing you all the time. You get your permanent list and then you maybe have your ringing up at seven o'clock on a morning, and that might be your day off and they just don't seem to worry about that because somebody hasn't turned up at this call, and they know you maybe look after this lady, and they say well can you go down? So you might be getting out of bed on a Sunday morning for one fifteen minute call.

V/o:

Training is another area that's seen significant change. Home helps often had very little training, but all home care workers today are required to attend a range of specialised courses. For Eileen two courses have proved particularly useful.

Eileen:

For me the most important training we had was the moving and handling course because you just have to do one lift and you have a bad back for the rest of your life, it has to be done

right. And also client confidentiality, it's not so much a course as a chat, but I think this is so important.

V/o:

Home care workers today can sometimes encounter situations where they feel in danger, throwing up new training needs for workers like Anne.

Anne:

We were planning on having some sort of self defence training. If you meet someone who is really violent a smile and a few words may not help, you may need to know how to defend yourself.

Lee:

Since coming to home care I've done my City & Guilds, basic first aid, food hygiene, Aids awareness, HIV, and a manual handling course.

V/o:

The more intimate and personal nature of home care work today also means that home care workers need to be increasingly aware of the sensitivities and preferences of the people they work with.

Eileen:

The first time we ever bathed him I sort of had the towels nice and warm, and I put his underwear on the radiator 'cos of course it was winter last October, November, and had everything nice and warm, and when I put him in the bath I sort of give him a flannel and he was trying to cover up, and I thought that's fair enough and he still does now but even when I bath him and I lift him out, I tend to wrap him straight away with the towel and then give him another towel and he dries himself off. It can be as easy as that because I think naked people are very vulnerable and I would hate that, and I like to keep them like wrapped up and felt as though, you know, there's nobody looking at me, I'm alright.

Chas:

When I'm getting a bath I think for a female to be there it can be embarrassing at times. Some people don't bother, whereas yes I bother. I think that sort of thing when you're getting in the bath is best to have a male round you really, you know what's what.

Lee:

There's a lot more male care workers coming into the job; there's me and one more gentleman. Obviously they try and keep us with the male clients as much as possible for baths and personal care, but saying that I do have quite a majority of ladies as well, some actually prefer the male carers.

V/o:

Home care workers like the home helps before them find that they often form close attachments to the people they work with and this can pose difficulties.

Lee:

I think when you're going in for someone every day you can't help but build up a relationship. You also have to remember that you've got to be professional as well, as not to discuss other clients with them, and more or less stick to what you're there to do. They would have you popping out to buy them a newspaper half of them I think, if they could, it's not advisable to give them your telephone number, not unless you want a 'phone call on a Saturday morning around 7 o'clock to buy a newspaper. With the majority of clients, especially some of the elderly who are housebound, we are the only faces we see going in so obviously you do become attached to the clients which is good because it builds a trust as someone for them to come to and talk to.

Joyce:

This one that comes six days a week she is a friend, you know, she's a real good friend, but I have to go round to other people and share that time out with other people, but I would love her to be here.

Eileen:

You get very attached to the clients through the years 'cos one client now that I've had for twenty years, even now she's like one of the family really. Sometimes you've got to detach yourself a little bit. I did get involved with one family and when things went wrong I cried and it really hurt and that, and I said to myself I would never ever let it get as bad again.

Anne:

You can have some really good relationships as in some people you could treat as your grandmothers, and they can treat you like granddaughters. You can become too close to a client, really you shouldn't, don't let them depend on you too much, don't take away their complete independence.

V/o:

Service users often feel the need to show their gratitude for the help they've had and here again home care workers need to preserve a professional distance as far as possible.

Lee:

They show they're happy with my work by compliments really. We're not allowed to accept gifts, you do feel bad sometimes, usually it's a box of chocolates, we've had times where an elderly person has offered someone a box of chocolates and they've 'phoned the office to check that it was alright, and it has been, but I think it's when it becomes more than that. I did have one old lady offered me a clock which, you know, I had to tell her no, I'm sorry I can't accept this gift and she was really put out, but you know I said look thank you very much, and I really appreciate it, and she just said she'd like to have thanked me for all I do for her. But I said it's my job and you know your praise is enough, that's all I need.

Chas:

I thank him just now and again, you know, probably give him chocolates. I try to get birthdays and I give him birthday cards, whatever they deserve, they are very good workers.

V/o:

Whether home help or home care people continue to appreciate the support they get which enables them to live in their own homes and make choices about their lives. However much the work has changed and despite the trend towards service users paying more for home care, the response to getting help at home continues to sound very much the same.

Joyce:

Well you're not allowed to buy them anything but I'd better not say this, but it's like you do, you just get, you know, a few flowers or something nice, but you're not supposed to do it. But they're great. I can't praise them more than I do.