

**Magna Housing Group Limited**  
**A survey of Careline users**  
**2008**

**Final Report**  
**(February 2008)**

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on behalf of Magna Housing Group Limited**



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# 1. Executive Summary

Magna Careline operates as a not-for-profit organisation offering a monitoring and alarm service for elderly and vulnerable people. Their customers are resident not only in communal establishments, such as housing associations but also in private residences. This report describes the findings of a survey of the private domestic users to assess their satisfaction with the service.

## 1.1 Key findings

- The Careline service has a disproportionately high level of female users (77%), compared to population estimates (52%).
- The average age group is 80-84 years with the largest group of users aged 85-89 years.
- There is statistically a highly significant difference in the ages at which men and women are using Careline, with men using it at a lower age than women.
- About three quarters of respondents live alone and about a third has no family within an hour's journey.
- Fifty-three *per cent* had the service installed to provide peace of mind and 39% because of ill-health or disability.
- The most important reason for respondents having the service is to feel safer in their homes.
- Less than 10% had seen any Magna Careline advertising materials.
- Only a small minority of respondents (9%) stated that they had considered having a Telecare service from any other provider.
- About a third of respondents indicated that they have never pressed the button on the pendant unit or box and a further 172 left the question blank. Unease with this finding is magnified in that of those who have used the system, almost a quarter have not pressed a button in over a year. This suggests that about half of users may not be regularly testing the equipment.
- Only 3% of respondents felt that the operators are impatient with them. This very high level of regard for the service provided by the operators was reflected in the open comments.

- About a quarter of respondents indicated that they sometimes have difficulty in hearing the operator. This is also the main concern of respondents in the open comments.
- Of those respondents, who expressed an opinion, 97% agreed that the service offers good value for money.
- Less than 1% of all respondents disagreed with the statement, 'I am satisfied with the service I receive from Magna Careline'. This high level of satisfaction is reflected in the finding that 95% would recommend the service to a friend.

## **2. Methodology**

### **2.1 The population**

Magna Careline has two groups of private domestic users; the larger consists of those users who are directly invoiced for the service, having either purchased it (180 users) or who rent it (1,804). A second, much smaller group consists of users who have their invoices directed to a third party (103). It was felt that a third party might be less informed about the service and that the user they assisted might be particularly vulnerable and therefore this small group were excluded from the survey. In order to achieve a satisfactory dataset for statistical analysis, a census sample was selected, in which the whole population of 1,984 users were included in the survey.

### **2.2 Ethical considerations**

The participants in this study were known to be vulnerable due to their age and/or disability, therefore very careful consideration was given by the MRG and the management of Magna Careline Limited and Magna Housing Group Limited to the design of the study. Having met three service users in the company of a Careline employee and discussed service provision with the Careline staff, the MRG recommended a postal survey as the most effective and cost-efficient method to obtain the information sought from the user group. A questionnaire containing a smaller number of questions than is usual (only 20) was designed to facilitate completion. A large size font was adopted and extensive consideration was given to the wording of the questions and instructions to avoid confusion or distress to the respondents. The questionnaires were not numbered and respondents were assured of their anonymity in a covering letter. The letter was sent on Careline's headed paper to afford familiarity and respondents were given the telephone number of the Careline staff to call if they had any questions or doubts about the questionnaire. Additionally, it was agreed that Careline staff would visit any user, if necessary to offer reassurance. With these safeguards in place, it was felt that no respondent would be put at risk.

In the event, whilst several telephone calls were made to the Careline staff regarding the survey, they were able to reassure respondents so that no home-visits were required.

## **2.3 Distribution, response and analysis**

All users were sent a questionnaire; a cover letter and a return paid envelope (see Appendix 1). Of the 1,984 questionnaires that were posted, six were returned uncompleted; five were returned because the addressee had died and two because they stated that they do not receive the service. The 1155 completed questionnaires represent a response rate of 58%, which is considerably higher than a similar survey reported in the literature, which had a response rate of 39%. This might reflect not only, a better designed survey instrument but also, the high level of involvement by the users with the service. The results shown are therefore at a 95% confidence level within +/- 3%. (This means, for example, that with the finding that 97% of respondents consider the service good value, we can be confident that were the survey conducted 100 times, on 95 times the finding of good value would fall between 94% and 100%). Each questionnaire was given a unique, sequential, reference number upon receipt; (this is the number shown adjacent to the quotations below). The closed questions were pre-coded and entered into the SPSS statistical package and the two open questions were thematically analysed using NVivo2 software as an analytic tool.

Probably due to the age of the respondents, there is a larger proportion of individual questions left unanswered than is usual with a questionnaire of this type. Therefore the number of respondents missing out a response to the question is important. Accordingly, two percentages may be given in the tables; the first includes the missing responses in the calculation and the second, excludes them (the 'valid percent'). In the text, the 'valid percent' is given, unless otherwise stated.

The two open questions asked for comments about choosing Careline and any general comments about the service. Wherever the following section reports the qualitative data, quotes are provided to demonstrate the source of the finding, because they articulate either the viewpoint of that individual or others as well.

## 3. Research findings

### 3.1 The characteristics of the respondents

#### 3.1.1 Gender

The respondents were predominantly female (77%) and based on the title (Mr., Mrs. or Miss) given in the database of users provided by Careline, this is representative of the gender ratio of the users (Table 1).

	Careline database		Respondents		
	(n)	(%)	(n)	(%)	(Valid %)
Male	485	<b>24.45</b>	253	<b>21.9</b>	22.5
Female	1494	<b>75.30</b>	869	<b>75.2</b>	77.5
Unknown	5	<b>0.25</b>	33	<b>2.9</b>	-
<b>Total</b>	1984	<b>100.00</b>	1155	<b>100.00</b>	100

**Table 1 A comparison of the respondents and all users by gender**

It is notable, however, that a comparison to the estimates of the population aged 55 and above in England and Wales in 2008 (National Statistics Office) in which 52% of this population group are female, suggests that the Careline service has a disproportionately high level of female users.

#### 3.1.2 Age

The average age group is 80-84 years with the modal group, that is the largest group of respondents, aged 85-89 years (Table 2).

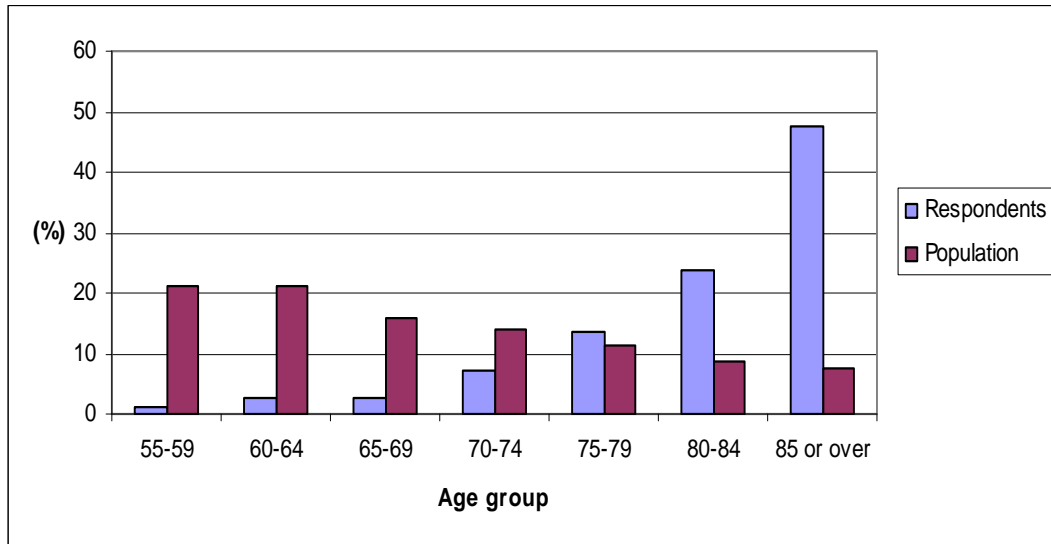
	Male		Female		All respondents	
	(n)	(%)	(n)	(%)	(n)	(%)
54 or under	7	<b>2.8</b>	12	<b>1.4</b>	19	<b>1.7</b>
55-59	7	<b>2.8</b>	5	<b>0.6</b>	12	<b>1.1</b>
60-64	9	<b>3.6</b>	19	<b>2.2</b>	28	<b>2.5</b>
65-69	9	<b>3.6</b>	22	<b>2.5</b>	31	<b>2.7</b>
70-74	29	<b>11.5</b>	51	<b>5.9</b>	83	<b>7.3</b>
75-79	35	<b>13.8</b>	118	<b>13.7</b>	153	<b>13.4</b>
80-84	47	<b>18.6</b>	218	<b>25.2</b>	269	<b>23.6</b>
85-89	67	<b>26.5</b>	241	<b>27.9</b>	316	<b>27.7</b>
90-94	35	<b>13.8</b>	127	<b>14.7</b>	170	<b>14.9</b>
95 or over	8	<b>3.2</b>	51	<b>5.9</b>	59	<b>5.1</b>
<b>Total</b>	253	<b>100</b>	864	<b>100</b>	1140	<b>100%</b>

**Table 2 The ages of respondents**

As could be anticipated, there is a gradual increase in age groups in the proportion of the population having the Careline system up to the late 80's with a gradual decline in proportion thereafter. This no doubt reflects the

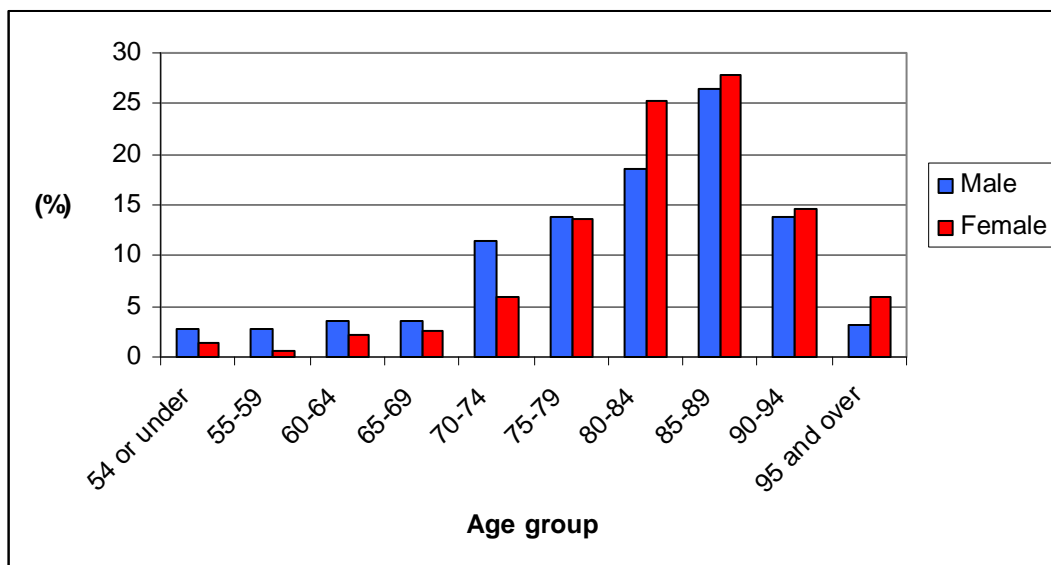
numbers of the very elderly who live in residential care. More useful perhaps, is that the percentage of users in the 75-79 age groups is similar to the population in England and Wales as a whole and in the older age groups considerably exceeds it (Figure 1).

**Figure 1 A comparison between the ages of respondents and the estimated population of England and Wales in 2008 (source: National Statistics Office)**



Furthermore, there is statistically a highly significant difference in the ages at which men and women are using Careline ( $p = 0.001$ ) with men using it at a lower age than women (Figure 2). (A  $p$  value of less than 0.05 is statistically significant and means that the conclusion is right 95% of the time. As  $p = 0.001$  in this example, we can assume that the difference between men and women would be found if the survey was conducted 99.9 times).

**Figure 2 A comparison of the age at which men and women are using the Careline service**



### 3.1.3 Terms of the contract

One hundred and eighty users are shown in the database as having purchased the equipment from Careline. However, in the survey, 193 respondents indicated that they have purchased it. This together with the finding that 206 respondents stated that they 'don't know' about this aspect and 80 respondents left the question blank indicates not only, the low level of knowledge by the users about their contract, but also that these particular responses are an unreliable means of segmenting the users.

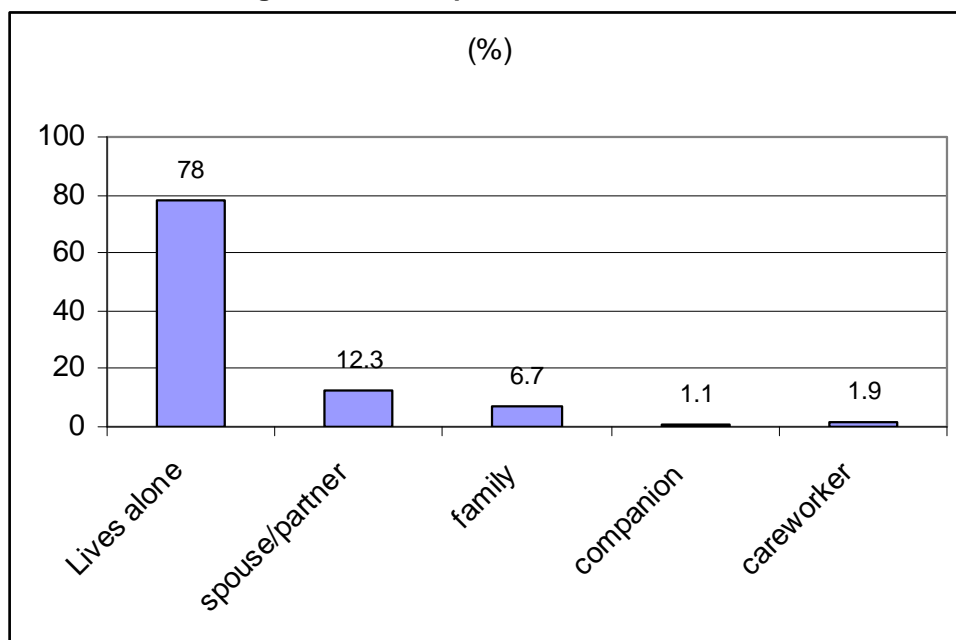
This demonstrates that throughout the findings, consideration must be given to the degree to which a respondent is able to answer the questions, not only because of their age, but also, because many may be completing the survey on the user's behalf. One respondent wrote, for example:

913: *I have completed this survey on behalf of my mother, who if asked at aged 94 would not be able to give a personal answer.*

### 3.2 Support from carers

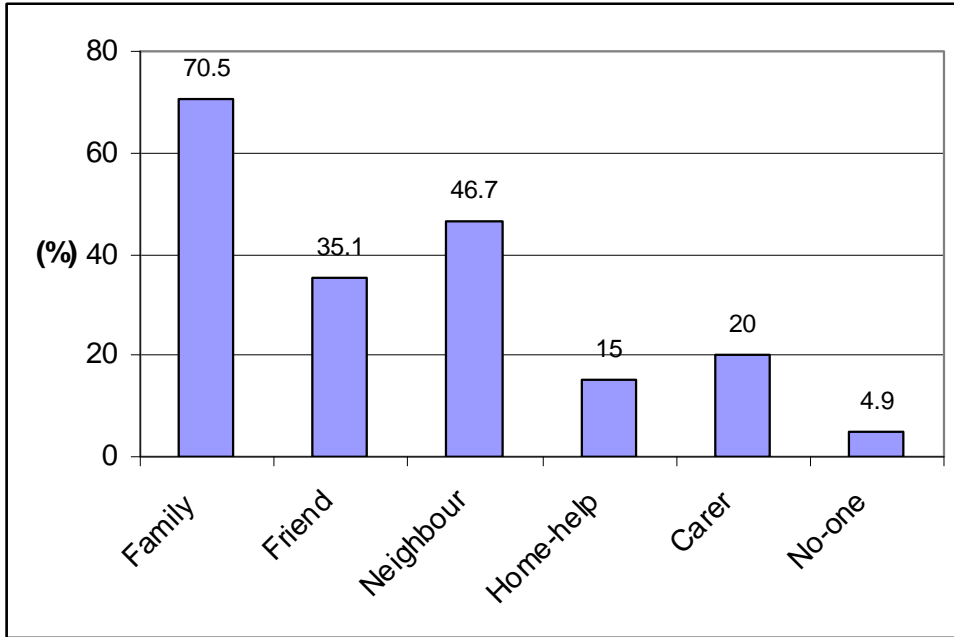
About three quarters of respondents live alone (Figure 3) with a similar proportion having help available from family members. Neighbours and friends are also a source of help to many respondents (Figure 4). Five *per cent* of respondents indicated that they have no-one to help them; this group could particularly benefit from a mobile warden service.

Figure 3 The composition of households



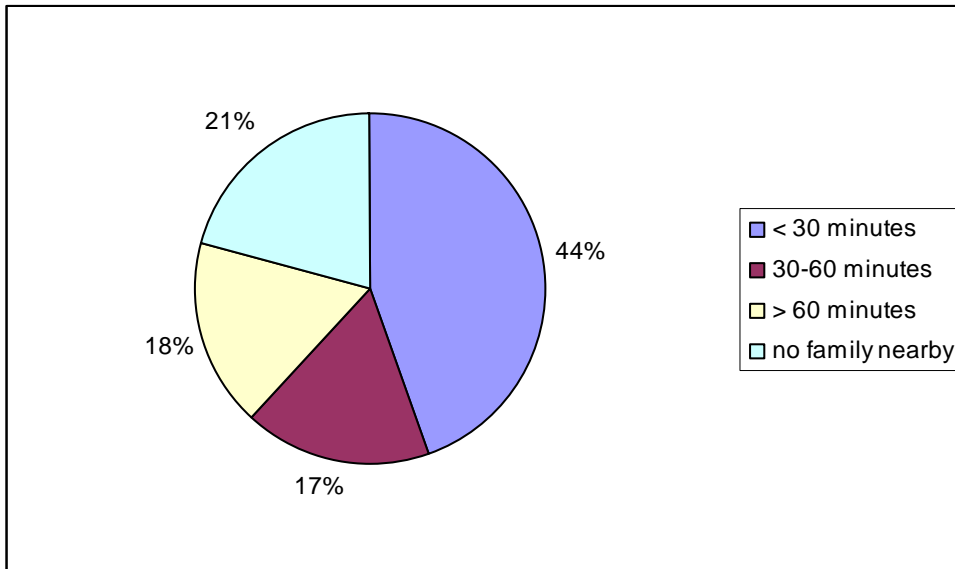


**Figure 4 Sources of help for respondents**



When asked how close their nearest family is to help them, 44% indicated less than an half an hour away (Figure 5). However, over a third of the respondents have no family within an hour's journey of their home.

**Figure 5 The journey time of family to respondents**



### 3.3 Obtaining the Careline service

For a small percentage (8%) of respondents the service was already installed when they moved into their home. For the remainder, 53% had the service installed to provide peace of mind and 39% because of ill-health or disability.

Additionally, data from the open questions shows that for some respondents, having Careline is a condition of their tenancy, for example:

*53: I do not require it myself, but as it is part of my tenancy I am obliged to have it.*

Another wrote:

*177: Careline was put in when the existing communal system broke down completely a number of years ago, when we had an on-site warden here.*

Several respondents referred to how the installation had originally been made for someone they cared for:

*389: It was suggested to my wife by social services as she was very ill at the time, and when she passed away I asked if I could carry on and it was granted.*

Many of the respondents, no doubt prompted by the closed questions, referred to either their own or their family's peace of mind as a reason for installing the system.

*641: Fortunately for me I have not had to use the service so far, but it gives me peace of mind.*

*673: My health is so much improved - my Careline button is something of a luxury in a way, but I always wear it. It gives me a great sense of security, particularly when I am gardening or have to get up in the night!*

*83: My family insisted for their peace of mind as so far away.*

*315: My husband had several falls; therefore I felt the need to get help when unable to lift him when fallen.*

When asked who they thought has peace of mind from the service, respondents overwhelmingly identified themselves (91%), with a large majority (79%) referring to their family. Ten percent identified either their careworker or some other person.

Respondents were asked the most important reason for having the service installed and their main concern was to feel safer in their home (46%). The

remaining issues in order of priority were to be able to stay in their own home (30%); to be able to live independently (18%) and to feel more secure from outsiders in their home (6%). These findings may guide future extension of Telecare provision so that greater emphasis is placed on personal safety devices, for example, fall monitors and those that protect from dangers within the home, rather than those that protect against an external threat, such as bogus caller buttons.

A typical comment was:

130: *Because I live in an isolated place and now a bit wobbly on my feet. If I fell and broke something nobody would know.*

There was no statistically significant difference in the reasons between users by gender, but when the age groups were combined, differences emerged ( $p = 0.000$ ). As Table 4 shows, the younger the user, the more likely they were to want to feel safer in their homes and be able to stay in their homes, whereas, the wish to be able to live independently declined with age. Wanting to feel secure from outsiders was the most important reason for obtaining Careline for a small minority of users of all ages.

(%)	Under 59	60-69	70-79	80-89	90 or over	total
Live independently	37.0	23.9	20.4	16.9	14.5	17.9
Stay in own home	3.7	15.2	25.2	30.4	39.3	29.8
Feel safer in home	55.6	54.3	49.5	47.6	35.0	45.9
Feel more secure	3.7	6.5	4.9	5.1	11.2	6.3

**Table 4 The most important reason for having Careline**

About a third of respondents indicated that they had first heard about Telecare from social services or their occupational therapist and a slightly smaller number had it suggested by a family member. Less than 10% had seen Magna Careline advertising materials, a similar proportion to other unnamed sources.

When the data was again cross-tabulated with the combined age groups, (Table 5) it became apparent that younger users are finding out about the service from professionals in Social Services etc. Word of mouth from family, friends and neighbours has been more influential as the age of the user increases ( $p = 0.000$ ).

(%)	Under 59	60-69	70-79	80-89	90 or over	total
Family	10.7	9.5	25.1	32.7	38.0	30.7
Friend/neighbour	3.6	16.7	16.6	18.8	20.7	18.2
Social services	64.3	40.5	35.2	28.4	28.4	31.2
Magna Careline advertising	10.7	4.8	11.1	10.5	6.7	9.6
Other	10.7	28.6	12.1	9.6	6.3	10.2

**Table 5 Sources of information about Careline by age**

Other professionals have also had an influence:

*25: I was recommended to the service by my GP following a heart operation.*

*688: Careline was suggested to us by Macmillan nurses in Yeovil hospital, when my husband came home for the few weeks before he died.*

Notably, only a small minority of respondents (9%) stated that they had considered having a Telecare service from any other provider.

*768: When I decided to get my mother a careline I did extensive research on various suppliers. Magna Careline definitely had the most positive feedback and I was able to talk to several friends who are with Careline.*

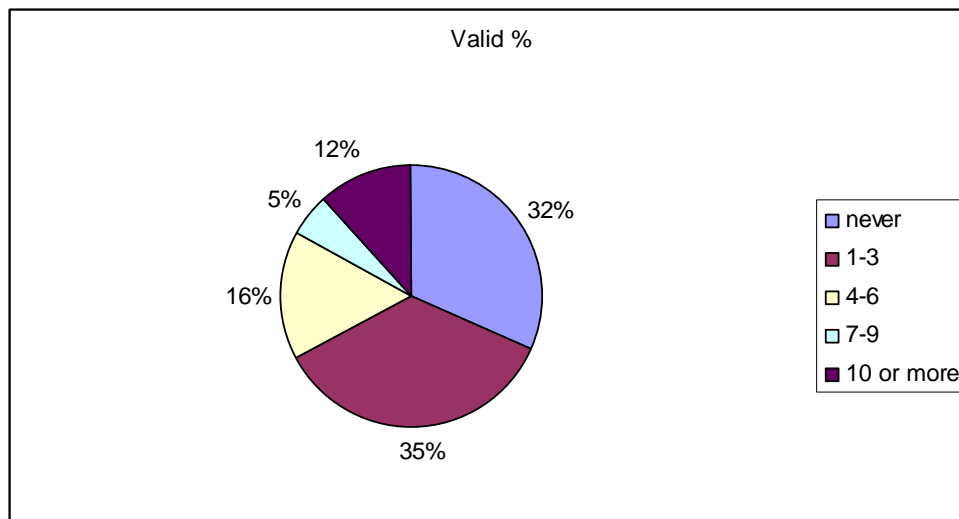
### **3.4 Using the Careline service**

One of the disadvantages of self-completion questionnaires is that despite careful drafting of the questions and instructions, errors in inscription are inevitably made by respondents, especially when the age of the population is as high as in this survey. In this section, 671 respondents ticked that they had at some point, pressed the alarm, but 694 then went on to complete the following question, about how often they had done so and 734 answered the question as to what they pressed. Therefore this data can only provide an indication of trends rather than any certainty.

Perhaps more importantly, over 300 respondents, or about a third, indicated that they have never pressed the button on the pendant unit or box and a further 172 left the question blank (Figure 6). This raises concerns that so many units are not being tested as they should. This unease is magnified in that of those who have used the system, almost a quarter have not used it in over a year. This suggests that about half of users may not be regularly testing the equipment.

*964: I have recently heard one should do a testing regularly - I haven't done so.*

**Figure 6 The number of times that respondents have pressed the pendant or the box**



There were no statistically significant differences in the number of times respondents have used the alarm by gender, age or by the most important reason for having the equipment, suggesting that this is a problem that occurs across user groups.

Furthermore, about a fifth of users (21%), pressed the button on the unit rather than the pendant, again raising concerns as to why they moved to the unit to do so.

*186: Do I have to get to this machine if I need the service - mostly it is in another room?*

A small, but significant minority (13%), pressed the pendant, although they were not wearing it at the time, but this may reflect, that it was beside their bed at night. Crucially, one respondent wrote:

*913: It is not easy to persuade my mother either to wear the pendant at all times when she is in her flat, or for her to understand how to press the alarm in an emergency - only time will tell!*

Only 67% of respondents pressed the pendant which they were wearing - these issues therefore warrant further investigation.

### **3.5 Satisfaction with the service**

Respondents were questioned as to whether they agreed or disagreed with 13 statements referring to service quality. Some sentences were designed to receive agreement whereas others, for example, 'I feel the operators are impatient with me' should have provoked disagreement. A third option of 'don't know' was available. As many respondents did not answer these questions, non-response is also shown in the data in Table 6.

(%)	I agree	I disagree	I don't know	No response
The button is difficult to press	3.0	49.8	4.6	42.6
The operators answer quickly	59.9	4.1	2.9	33.2
I feel the operators are impatient with me	1.3	47.3	2.6	48.8
The operators are efficient	52.3	4.1	3.6	40.0
It is sometimes difficult to hear	12.9	38.5	2.9	45.6
The installation was efficient	86.4	1.3	3.7	8.6
The contract was difficult to understand	5.0	48.6	12.7	33.7
I fully understood all the instructions	66.3	5.5	7.8	20.3
Faulty units are quickly replaced/repared	27.9	1.6	39.7	30.8
I don't know how to complain	12.6	41.6	15.5	30.3
The service is good value for money	68.5	1.8	11.2	18.5
I am satisfied with the service	84.2	0.8	3.5	11.4
I would recommend the service	79.9	0.2	4.3	15.6

**Table 6 Quality of service**

The findings must therefore be considered in the light of the users abilities. As one respondent wrote:

*1153: Questionnaire completed by user's daughter in consultation with user. User has poor short term memory and lack of understanding of the technology.*

### **3.5.1 Ease of pressing the button on the pendant or box**

The charity Ricability assessed community alarm systems including the Lifeline 400/4000 units as used by Careline and rated the ease of using the alarm button as 'average'. Of the respondents who answered this question, only 5% indicated that the button on the pendant or unit is difficult to press. One respondent commented:

*300: I'm glad I have the pendant round my neck as I have just moved from N. Devon where I had the pull cords. I fell at 6 o'clock at night broke my leg in two places and I couldn't reach the pull cords so I lay there all night.*

One possible explanation of why users are not wearing their pendants is provided by this statement:

*889: Very easy to accidentally activate, hence do not wear button very often. The button should be in a recessed shroud with or without a flip-top cover. Because I cause so many accidental alarms it causes problems for neighbours. Button must be re-designed.*

### **3.5.2 The speed of response**

A low level of dissatisfaction was also expressed with the speed with which the operators answer, with only 6% of answers indicating this. A few respondents wrote comments similar to these:

*34: It seems to me that it takes longer now but to get through to the Careline after pressing the button than it did a few years ago. There seems to be more bleeps and 'bobs' before the telephone rings.*

*805: I do not like the wait before being put through. Some providers are almost instantaneous.*

However, there were also satisfied responses:

*191: They answer very quickly and they are always there. I think they are very prompt in replying.*

### **3.5.3 The patience of the operators**

An even higher level of satisfaction was registered with the attitude of the operators, only 3% of respondents felt that the operators are impatient with them. This very high level of regard for the service provided by the operators was reflected in the open comments. It is notable that whilst there were numerous positive statements, there was only one that could be construed as negative:

*1059: To stay longer with us and have a chat.*

Here are just a few of the positive comments:

*133: Have found the voice on the end of the line very friendly and comforting.*

*253: Very pleasant and courteous service.*

*473: The ladies on the Careline are always so kind and caring.*

*507: Have reacted with patience on the few occasions when the button was pressed accidentally (e.g. while dressing.)*

*654: They are a very good service, always polite and never a cross word.*

### 3.5.4 The efficiency of the operators

Almost as high a level of satisfaction was recorded in respect of the operator's ability to deal with calls efficiently. Only 7% were dissatisfied on this point. Example comments included:

*137: A very efficient service having called on it only once. Neighbour, family and ambulance arrived very quickly.*

*329: I have always found the staff very helpful if I'm in trouble and have kept talking to me when I've had a fall until someone arrives.*

### 3.5.5 The sound quality

However, the technology was not rated as highly as the personnel, with about a quarter of respondents indicating that they sometimes have difficulty in hearing the operator. This is the main concern of respondents in the open questions.

*127: I have pressed the button to test the equipment. It is usually easy, but the last time during January 2008 it became obvious that the operator could not hear me clearly. I was in bed at the time, shouting repeatedly.*

*404: Have found the operator could not hear me properly when I pressed the pendant while upstairs. Had to get down to talk properly. Not much use if taken ill upstairs.*

*411: I am disappointed there are rooms in my house where its difficult to hear (either you or me.)*

*900: Both wife and myself are invalids. My wife requires my constant care and am aided in this by social services at Dorchester. My wife spends much time in the bedroom whilst I am in the lounge or kitchen or I am outside. The control is in the lounge. It has never been proved to me that communication between my wife and the service would be possible - she has a quiet voice.*

When Ricability assessed community alarm systems they rated the alarm speech quality of the Tunstall units at normal volume as 'poor', but at maximum volume, 'very good' and so it may be that the finding in this study reflects that units need to be set up to maximum volume, where appropriate.

### 3.5.6 The efficiency of the installation

Ninety-five *per cent* of respondents, who answered the question, agreed that the installation was efficient and some comments also referred to the efficiency of the Careline representative when they obtained the service.



501: *I was very impressed with the Careline representative at our first meeting.*

Nonetheless there was one negative remark:

222: *The people who installed the line didn't know much about electrics and had no extensions on plugs for me!*

### **3.5.7 The clarity of the contract**

Approximately half of the respondents were able to express an opinion on the clarity of the contract. Of these though, almost one in ten thought it was difficult to understand.

One respondent wrote:

870: *I was not told that VAT was extra which I strongly do not agree to. VAT was not explained to me when asking about Careline.*

Another:

914: *When your officer called he only mentioned payment at the end. Until then I had thought the service was free from Social Services.*

### **3.5.8 The clarity of the instructions**

Similarly, only 830 responses were received about the users understanding of the instructions for the system and 64 of these were not confident about having understood the instructions. This absence of understanding is a cause for concern, particularly if some of the comments received are reviewed; for example:

3: *Our unit didn't work in a power cut, even though it worked again the next day. This didn't seem to worry the operator - what if I had fallen during the power cut?*

338: *If there is a power cut or the phone lines are down I am completely cut off. Last year I had no phone for 6 days and no way of contacting anyone. Mobile phones don't work here.*

328: *I sometimes wonder if the service would work well from the garden.*

806: *It would be more reassuring if direct contact to Careline could be made from the pendant*

This, together with the relatively low level of testing of the system highlighted above, suggests that users may need to be better informed of how the system

operates when they obtain it and crucially, are given reminders on a regular basis. The Christmas cards or birthday cards might offer a low cost opportunity to do so.

However, many respondents demonstrated their knowledge of the service:

139: *I have pressed button regularly to test it or to inform when I am going away and when I have returned.*

216: *I test my pendant once a month on the 4th of each month.*

### **3.5.9 The efficiency of repairs**

Ninety-four *per cent* of respondents expressing an opinion agreed that broken or faulty units are quickly repaired or replaced; a statistic supported by the open comments:

79: *Any fault is dealt with promptly.*

141: *Their repair when the equipment failed was very good.*

348: *I have had one or two occasions when my Careline has started ringing in the night, which was very frightening as I had not touched my pendant which I keep on my beside table. However it was dealt with ... and has not happened recently.*

However, several wrote statements similar to this respondent:

203: *I was told at the beginning that I would be regularly contacted to make sure the equipment was working - this did not happen.*

### **3.5.10 The complaints procedure**

Ricability recommends that a good service provider will have a complaints procedure which all users are told about. The survey suggests that only three quarters of respondents know how to complain if there is a problem. The service quality of the complaints procedure was not assessed, but a letter returned with a questionnaire suggests that not all complainants receive an outcome satisfactory to them.

### **3.5.11 Value for money**

Only 70% of respondents expressed an opinion as to the value the service offers in monetary terms. This, together with the low level of contractual awareness suggests that many of the users are assisted by others in their fiscal arrangements.

The qualitative data supports this supposition, for example:

128: *My 8 children did pay for it sharing the amount, which I was against, but they want peace of mind.*

Of those respondents, who expressed an opinion, 97% agreed that the service offers good value for money. Nevertheless, the majority of open comments in relation to the cost of Careline, referred to its expense. Here are some examples:

214: *Its highly priced and keeps increasing too much.*

209: *It is much more expensive than Signpost Careline.*

131: *The cost is ridiculous, as much as a police registered intruder alarm, and for what?*

190: *I still feel and always will feel that to charge £70 for a replacement pendant when the old one was lost, though a defective clasp when out shopping was an imposition.*

One respondent wrote:

210: *A 3 month minimum contract is not ideal if care is needed one month or less. I have had to pay 3 months rent for my Careline when I only needed it for one week.*

Several respondents assessed the cost of the service in relation to their use of it, for example:

682: *It is rather expensive seeing as I don't use it very often.*

However, one wrote:

252: *Careline provides a more economical service than any other that I considered.*

### **3.5.12 Overall satisfaction**

Only 9 respondents (less than one per cent of all respondents) disagreed with the statement, 'I am satisfied with the service I receive from Magna Careline'. This high level of satisfaction is reflected in the finding that 95% of *all* respondents would recommend the service to a friend. Significantly, only two respondents would not recommend the service to a friend. Unfortunately neither gave any indication in the open or closed questions as to the reason behind this.

In all, there were 57 positive comments about the service, so only a few can be cited to demonstrate this high level of satisfaction:

761: *All of the staff on the other end of the line speak clearly with care and deal with me becoming anxious, and are quick to contact my daughter to come to my house and call for an ambulance. Thank you so much for being my lifeline!*

54: *Very happy with this service all round.*

517: *It was the best decision I have ever made. Thank you for your wonderful service.*

115: *I have recommended this service to my friends.*

### **3.6 Additional services**

The open comments reveal further insights, both good and bad, which may merit consideration before extensions are made to the service:

60: *It concerns me that I have only been able to find one key holder - I understand that it is my responsibility.*

108: *In Poole I think my sister has an advantage in that she does not have any key holder other than the service on call.*

288: *I feel they are friendly people and send to me at Christmas and on my birthday, which makes me feel I matter.*

752: *What families can do and what they are willing to do is very different. I appreciate it is an emergency line and must be kept clear. It still leaves me very isolated to other difficulties which are not emergencies. I think more visiting would be mutually advantageous.*

768: *The medicine dispenser is very temperamental and regularly has problems. When pressed, the carousel often moves two spaces, causing confusion to the carers who attend mum. We are now into our second dispenser.*

### **3.7 Suggestions by the respondents for improvements to the service.**

Although respondents were not asked specifically to make suggestions as to how the service could be improved, many did so and a summary is provided here – their feasibility is not considered:

17: *There should be a call from the centre when service is not used for a long time (months)*

99: *Think the box on wall needs modernising.*

415: *I think it would be preferable for Careline to check that the system is working properly rather than expecting the client to do so.*

458: *What about combining Careline alarm with GPS so we can be protected outside of our homes?*

521: *I would suggest clients are contacted if they fail to test on the birthday date each month.*

585: *The plastic knob on the back of the cord is most uncomfortable - could do with a softer material*

662: *I wish the pendant was smaller and not such a long and obvious "string"*

827: *It is only a suggestion - could the cord fasteners be made so that it doesn't touch the spinal bone at the back of the neck? I have carefully loosened the cord going through the alarm and made it so the plastic fasteners is on the side and found it irritated the back of my neck!*

838: *I would like to see a system of reward or similar recognition for long periods of "no claim" such as practiced by many car insurance companies.*

## 4. Conclusion

Overall the findings demonstrate a high level of satisfaction with the Careline service. The survey shows that the operators in particular have been well selected, trained and are extremely effective in their role. Consideration should therefore be given to the extent that any additions to their responsibilities with new services etc. may compromise their ability to offer this high level of service quality.

However, there are some areas, where improvements appear to be required. For example, the results suggest that there is either a lack of understanding of how the pendant and unit work or alternatively, the technology is failing to work appropriately, so that many users are either unaware or unable to make the most of the technology's capabilities.

Furthermore, it would appear that a great many units are not being tested on a regular basis. This needs to be confirmed and if true, should be rectified. Whilst the system is dependent upon the abilities of the users to employ it appropriately, Magna Careline should ensure that it is doing everything it can to minimise the risk to users.

In conclusion this research has not only met Careline's need for a customer satisfaction survey, but has also provided valuable data to enable a better

understanding of the customer base for future marketing events. This marketing will now be able to develop from a strong base of very encouraging support for the service.

## **5. Appendix**

### **Appendix 1**

Questionnaire and cover letter

January 2008

Dear

**CARELINE**

As a valued customer of Magna Careline, I am writing to you today to ask you if you would be kind enough to help us by completing a short survey about your opinions regarding the service that we offer.

The survey is anonymous, so please feel free to tell us about your experience of the service and this will help us to understand how to improve it for you and any future customers.

A stamped addressed envelope is enclosed, and we would appreciate if you could return this to us by Wednesday 23<sup>rd</sup> January 2008. If you have any questions about this survey and would like to speak to someone about it, please call the Careline office on 01305 251642.

Thank you for your help.

Yours sincerely,

A handwritten signature in cursive script, appearing to read 'Emma Jones', is centered on a light yellow rectangular background.

**Emma Jones**  
**Office Services and Careline Operations Manager**

## Magna Careline Telecare Survey, 2008

**Please complete the questionnaire or ask someone to help you.  
 Choose the answer to each question and put a tick in the  
 appropriate box. Once completed please return the questionnaire by  
 Wednesday 23rd of January 2008 in the freepost envelope provided.  
 If you have any questions about this survey, please do not hesitate  
 to contact the Magna Careline staff on 01305 251642.**

- Q1 Are you?**  
 Male .....  Female .....
- Q2 In which age group are you?**  
 54 or under .....  75-79 .....   
 55-59 .....  80-84 .....   
 60-64 .....  85-89 .....   
 65-69 .....  90-94 .....   
 70-74 .....  95 or over .....
- Q3 Who do you live with?**  
 I live alone .....  I live with a friend or  
 I live with my spouse or companion .....   
 partner .....  I live with a careworker .....   
 I live with family .....
- Q4 Which of the following are able to give you help, please tick all that  
 apply**  
 Family .....  Home-help .....   
 Friend .....  Carer .....   
 Neighbour .....  No-one .....
- Q5 How close are your nearest family that can help you?**  
 Less than half an hour away ...  More than an hour away .....   
 About half an hour to one hour  
 away .....  I have no family nearby .....



- Q6 Why did you have the Telecare service installed?**  
It was already here when I moved in, *please go on to question 11*.....   
Ill-health or disability.....   
Peace of mind .....

- Q7 How did you first hear about the Telecare service? Please tick one box only.**  
It was suggested by a family member .....   
It was suggested by a friend/neighbour.....   
It was suggested by social services/my occupational therapist/care worker.....   
I saw some Magna Careline advertising .....   
Other .....

- Q8 Did you consider having a Telecare service from any other provider?**  
Yes .....   
No.....   
I don't know .....

- Q9 Here are some reasons that people have given for having the Telecare service. Which was the most important reason for you? Please tick one box only.**  
I wanted to be able to live independently .....   
I wanted to be able to stay in my own home .....   
I wanted to feel safer in my home .....   
I wanted to feel more secure from outsiders in my home.....

- Q10 If you have any comments about choosing Careline, please write them in here**
-

- Q11 How many times have you pressed the pendant or the box?**
- |  |                          |                        |                          |
|--|--------------------------|------------------------|--------------------------|
| I have never pressed either<br>(please go to question 15)..... | <input type="checkbox"/> | 4-6 .....              | <input type="checkbox"/> |
| 1-3 .....  | <input type="checkbox"/> | 7-9 .....              | <input type="checkbox"/> |
|  |                          | 10 or more times ..... | <input type="checkbox"/> |
- Q12 Please think back to the last time you pressed the pendant or the box, when was this?**
- |                       |                          |
|-----------------------|--------------------------|
| In 2007 or 2008 ..... | <input type="checkbox"/> |
| Before 2007 .....     | <input type="checkbox"/> |
- Q13 When you pressed the alarm, what exactly did you do?**
- |   |                          |
|---|--------------------------|
| I pressed the pendant which I was wearing .....       | <input type="checkbox"/> |
| I pressed the pendant, although it was not on me..... | <input type="checkbox"/> |
| I pressed the button on the box.....                  | <input type="checkbox"/> |
- Q14 Here are some people's experiences of using the service, do you agree or disagree?**
- |  | <i>I agree</i>           | <i>I disagree</i>        | <i>I don't know</i>      |
|--|--------------------------|--------------------------|--------------------------|
| The button on the pendant or box is difficult to press     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The operators answer quickly                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I feel the operators are impatient with me                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| The operators are able to deal with my calls efficiently   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I find that it is sometimes difficult to hear the operator | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- Q15 Who do you think has peace of mind from the service? Please tick all the boxes that apply.**
- |                 |                          |                    |                          |
|-----------------|--------------------------|--------------------|--------------------------|
| I do .....      | <input type="checkbox"/> | My careworker..... | <input type="checkbox"/> |
| My family ..... | <input type="checkbox"/> | Other person ..... | <input type="checkbox"/> |
- Q16 What form of contract do you have for the service?**
- |  |                          |
|--|--------------------------|
| I bought the equipment and pay a monthly service charge.....       | <input type="checkbox"/> |
| I rent the equipment and pay a monthly rental/service charge ..... | <input type="checkbox"/> |
| I don't know .....   | <input type="checkbox"/> |

**Q17** In this question, please show whether you agree or disagree with the following statements.

	<i>I agree</i>	<i>I disagree</i>	<i>I don't know</i>
The installation was efficient	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The contract was difficult to understand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I fully understood all the instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Broken or faulty units are quickly repaired or replaced	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I don't know how to complain if there is a problem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q18** Do you agree or disagree with these statements?

	<i>I agree</i>	<i>I disagree</i>	<i>I don't know</i>
The service offers good value for money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am satisfied with the service I receive from Magna Careline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would recommend the service to a friend	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q19** Do you have any other comments about the Telecare service?

**Q20** If you would be prepared to help with further research for Magna Careline in the future, please write your name and address here.

**Thank you for taking the time to complete this survey. Please return it to us in the freepost envelope provided.**