

Healthwatch Doncaster

Care Home experiences during the Covid-19 pandemic

April 2021

1. Background

From March 2020, the onset of the Covid-19 pandemic posed many challenges to health and social care services, the challenges faced by services were new and had never been experienced previously. Services encountered difficulties that required transformation, innovative and creative ways of working in order to meet the needs of their users.

National and local media focussed on reporting all aspects of the pandemic with particular emphasis on Care Homes. It was evident that Covid-19 that was a serious threat to the residents of Care Homes and that Care Homes had to maintain their safety.

Healthwatch Doncaster facilitate the Patient Stories for the NHS Clinical Commissioning Group (CCG) Governing Body and the focus for the September meeting was local Care Home experiences. The intention was to gather some feedback regarding the lived experiences of Care Home residents and or staff locally and ascertain some learning from the engagement. This was very successful and a brief presentation was delivered at the Doncaster NHS CCG Governing Body however as extensive qualitative feedback was acquired this report has been written to provide more insight to the findings.

2. Methodology

Due to the constraints of the pandemic, Healthwatch Doncaster could not have face to face meetings with the participants and had to consider how this could be approached. With support from NHS Doncaster CCG, we were able to identify a specific Care Home who were willing to participate.

Healthwatch Doncaster had successfully gained other patient stories during the pandemic due to the willingness of participants to use digital platforms to engage in conversations and share their experiences. It was envisaged that this approach might be an option subsequently it was encouraging to hear that staff and many of the residents and relatives had become familiar and proficient in the use of digital platforms and that this could be utilised.

A meeting with the Care Home manager was very productive and facilitated a further meeting with the relatives of residents at their regular scheduled zoom meeting. The Care Home manager and the relatives were very responsive to a request for them to share their experiences over the last few months and the consensus was that they could source a resident who would be happy to do the same.

A zoom meeting was arranged with the Care Home manager and a lengthy discussion was recorded in which she covered a number of topics in relation to the impact of the pandemic on residents, relatives and the staff.

In addition, a zoom recording was completed with a 97-year-old resident and her daughter. This gave the opportunity for the interviewer to build a relationship with the interviewee that would have been a little more difficult to do over a telephone call and facilitated the positive outcomes achieved. An enormous amount of insight was gained into the experiences within the Care Home, the interview with the resident and her daughter was particularly insightful

and emotional as they normally had daily contact and had seen little of each other for the preceding 4 months.

All participants shared what they wanted to talk about with some prompts to gain more detail on some issues. There were common themes which will be evident in the following narrative, however all three interviewees brought a very personal perspective to the discussion. These videos were edited for the purpose of the Governing Body and presented on the 3rd September 2020; this report illustrates the wider discussion that was recorded on the day, the themes and recommendations.

3. Findings

a) What did we hear from the Care Home manager?

This included how the Care Home responded and adapted to the challenges of the Covid - 19 pandemic. The Care Home had chosen to close early on the 12th March 2020 and no longer allow visitors. This had to be communicated to all parties and the implications of these actions had to be considered.

The Care Home had set up a Relatives Committee in 2019, which was attended by about 10 relatives and provided a forum for them to link with the home and be kept up to date. The group were consulted in relation to how this link could be maintained and they agreed with the idea to have regular zoom meetings with relatives. These were very successful and have been attended by 22-29 people every week to keep them informed of changes and developments. The idea to suspend visiting from the 12/03/20 was shared with them at a zoom meeting and the relatives were not surprised by the decision and supported it 100%”

At the time of the decision to suspend visiting to the home staff, residents and relatives did not realise the magnitude of the situation and no one realised that the closure would last so long. The initial reaction was to accept it and get on with it without any real concept of the reality. Whilst many particularly the residents may not have realised the implications of the closure the manager feels that many relatives did consider that they might not see their relative again.

The Care Home staff have supported the relatives to maintain communication with their loved ones and this resulted in many phone calls even late at night so they could utilise new digital platforms to talk to their loved ones. It was evident that this was one of the main ways for them to be connected and they had to be supported by staff to achieve this.

The Care Home manager talked about how she communicated regularly with the residents and relatives to ensure that they knew what was happening. From an early stage, regular Zoom meetings with relatives were scheduled to ensure that they were kept up to date. For those relatives who did not communicate in this way traditional methods to communicate were also used and the Care Home manager reported that she was making lots of telephone call and sending messages. The constant communication was appreciated by relatives and worked well.

Staff supported residents to make phone calls, video calls and write letters to family members and this kept spirits up. iPads were purchased by the home to facilitate more effective communication as the use of mobile phones to interact using different platforms was challenging for many especially those with visual difficulties. Staff supported residents and relatives to utilise new methods of communication and many of them are now proficient.

Healthwatch Doncaster witnessed a 97-year-old utilising zoom to engage with this project and her delight in doing so was inspiring.

Staff were conscious that relatives needed to be kept up to date with changes and developments in the home but more importantly; they were very worried about their relative and what the situation meant for them. For many of them they would normally keep up to date when they visited and this was no longer an option.

It was noted that residents initially “were OK” however, after a few weeks, the impact on them was apparent as their mood and eating and drinking habits changed. Staff needed to respond to the presenting difficulties and were aware that they needed to work very differently to maintain the emotional wellbeing of their residents. They were deployed very differently and delivered activities and entertainment to provide the residents. Frequent visitors were the norm for many of them, some previously had daily visits and when this ceased it was apparent that the void was particularly difficult for them. The Manager explained that residents with a dementia diagnosis required additional support; they demonstrated the effects of the situation through their presentation (mood and manner) and staff provided them with appropriate support and reassurance.

At the end of April it was evident that more was needed, a “Drive through” was organised so that residents could see family and friends and due to the success of this initiative a further one was organised in June. Having experienced the first one in April the residents had something to look forward to when they knew of another one planned for June these both involved about 70 cars, the event was very emotional for everyone involved and some relatives did not want to leave.

In addition, the lovely summer weather facilitated the use of the garden for events such as celebrations of birthdays and a “mock” wedding was organised for a staff member who should have been married in May. The residents were involved on making this a very successful event, contributed to making props, attended following an invitation, and they even dressed for the occasion in appropriate wedding attire.

As well as restrictions for family and friends, services had to be suspended and this included such services as chiropody and hairdresser. The manager had completed hairdressing training years previously and took to doing the resident’s hair on a regular basis. The residents loved this and felt special and the manager enjoyed the quality time with the residents and took her away from the madness, as “it was madness”.

Meeting the health needs of the residents was discussed within the interview, the Care Home Manager spoke about the positive relationship that the home has with the local General Practice and how they provided support, which was enhanced by the use of technology. Many of the staff are SAMI trained (Supporting and Maintaining Independence) this course equips carers with the knowledge and skills base to take baseline observations; gain relevant information for a service user for whom they are going to seek advice for from a Health Care Professional by telephone) and this supported the assessment of patients when health advice was required.

Three residents required hospital admission and unfortunately contracted Covid-19; they were isolated appropriately as an inpatient then again on return to the home. The Care Home manager reported that the “feelings changed in the home” when they knew they had Covid-19. It became real and people were scared and worried particularly staff who were going home to family and elderly relatives.

Whilst the Care Home was closed for routine visits, the Manager explained that those residents who had reached End of Life were allowed visitors. Such visitors had to follow strict Infection, prevention control measures and were restricted to specific areas in the home. The manager explained that she would never deny this access, as she would want this for herself if she were in this position.

The use of personal and protection equipment was mandatory from the onset, staff have dealt with this very well, and they instigated and adopted measures to reduce risks well before the guidance in relation to this was issued. Staff adapted to changing their clothes on arrival and prior to leaving work and a donation of washable bags were issued to staff. Whilst the residents found this different in the first few weeks they soon adapted to it and are “used to it now” Staff helped residents to deal with this with an individual approach as some found it easier to adapt to than others.

It was evident in the press that many Care homes had issues with personal and protective equipment (PPE) and this was confirmed as an issue for this Care Home, not just in relation to access but also in relation to costs, which for some items was far in excess of pre- Covid costs.

The impact on staff was described a “huge” and they responded well to requests and adapted and adopted to new ways of working and behaving in their home lives. They were reported to have been strict with their own lives, following guidance and the manager believes that their actions were “ a big part of our success of not having any Covid in the home” The manager discussed how the workload increased for all the team and for her it involved increased work around risk assessment and business continuity planning and said “everyone has dealt with it amazingly”

The discussion raised additional issues in relation to the emotional “rollercoaster” that everyone had experienced. They experienced many “up’s and down’s and the Care Home manager reported that the “downs” were addressed and “short lived” and that they had experienced” more up’s than down’s” The staff made the residents their focus at all times and she said how she was “proud of the team”

Comments from the Care Home Manager -Residents and relatives

- Early closure was required and was communicated timely to residents and to relatives via zoom.
- Relatives knew closure would happen and were receptive to the early closure
- The impact on residents was recognised early; particularly their mental wellbeing and strategies were put in place to provide stimulation.
- Care Home staff communicated to relatives via phone/text/regular zoom meetings that were received positively.
- Efforts were made to ensure that residents maintained contact with relatives i.e. Relatives supported to send letters/videos recorded/additional telephone contact.
- “Drive ins” were organised to allow residents to see their family members(70 cars accessed the site)

Comments from the Care Home Manager - Staff

- Staff were responsive to the changing needs of the residents particularly around their emotional needs and recognised the impact on the residents and responded appropriately.
- Staff were deployed differently to support residents.
- Staff were responsive to the changes required in working practices to maintain the safety for everyone.
- Staff were responsive to the increased workload, risk assessments that were required and increased communication.
- Staff supported residents and relatives to be digitally connected.

Comments from the Care Home Manager - Health

- A good relationship with the GP and digital connection facilitated the support required for residents.
- Care Home staff being SAMI Trained (Supporting and Maintaining Independence) facilitated appropriate support for health issues.
- Residents were protected from returning patients from hospital with Covid -19 due to a separate isolation area.
- Relatives of patients who were End of Life were given the option to visit with full IPC measures adopted.

Other comments from the Care Home Manager

- Personal Protective Equipment was an issue not just access but the cost, which for some items was far in excess of pre-Covid costs.
- The whole journey has been a rollercoaster for all involved.
- There have been a number of “ups and downs” with more “Ups than downs”
- The residents have been the focus for all the team.
- I am proud of the team.

b) What did we hear from the care home resident?

This interview was particularly emotional for the resident and her daughter, the resident was overjoyed to see her daughter and repeated this throughout the interview adding how much she would like to hold her and hug her.

We talked about the initial decisions to close the home and how she would not be able to see her family and she said how “*this made me feel empty*” and how she had to “*adjust to the situation as everyone had to*”, “*sacrifices had to be made and some had more sacrifices to make than her*”. She talked about what differences the restrictions have made to her life and that “*it could have been much worse*” It was shared that the resident had a feeling of dread at not been able to see her family.

During the discussion, there was reference made to the war years (the resident is 97 years old) and sacrifices that had to be made then, how people said goodbye to others not knowing if they would see them again and “*had to get on with it*” and that she just had to do the same.

The resident reminded us that she could still see her family (although not in person) and could speak to them but this was not the same. The drive in was “a tonic”

It was clear from what was shared that the resident felt she was kept informed by the staff and knew what was happening and what needed to be done.

The resident throughout the interview showed her appreciation for staff, how hard it was for them and how they were doing things like “wearing those horrible masks” and “going to a lot of trouble” just to keep her and the other residents safe. She talked about the receptiveness of staff to her dietary needs and how she can make choices for her meals and staff are willing to be flexible and meet her requests without fuss.

The resident was asked about the call we were having and said that she though zoom was “marvellous” throughout the call she was supported by member of staff.

Comments from a resident

- Throughout the interview, the repeated message was the pleasure and delight in seeing her daughter.
- We have been kept informed, I like to know what is happening as it helps me to adjust myself.
- The Drive in was a tonic.
- It made me feel empty when they told me I could not have visitors.
- I knew I had to adjust because everyone had to; all I had to do was see less of my daughter.
- The resident compared it with the War when they had to say good bye to people not knowing when they would see them again and said we had to get on with it.
- She compared her sacrifice with others stating others had to put up with more unpleasant things than not seeing their family
- All the staff have been great, fantastic -they have to wear those masks and it must be so uncomfortable for them all day.
- Staff have worked very hard to keep us safe and alive we should be grateful.
- Staff have gone to a lot of trouble to keep us safe.
- My life could be worse; all I have to do is see less of my daughter.

c) What did we hear from the family?

The interview was very emotional as this was competed with both mother and daughter on screen and it was evident the impact that Covid -19 has had on both but particularly on the resident. Both talked about having to make sacrifices to stay safe and how sad they have felt at times and were overjoyed to see each other despite this being on a screen.

In relation to the closure of the home, the relative interviewed normally visited, her mother 6 days per week and it was “a big difference” not been able to do this.

Despite this, she described being delighted when the home closed as she thought it was the best way to keep her mother safe. The decision to close the home was prior to any guidance and this was received positively. Realistically she had thoughts that she may not see her mother again, as she knew that if Covid got into the home this would be very serious.

Communication has been crucial to relatives of residents in the home and it was encouraging to hear that relatives have been involved in regular zoom meetings and kept up to date which for this relative “made all the difference” and “I have appreciated being kept informed” Relatives have been asked to participate in decisions and share their views and opinions, it was shared that the *“management have been ahead of the game”*

“Naturally I missed my mum, opportunities to talk/visit were not as frequent as I would have liked however the Drive In was great although emotional” this was considered to be a great idea by all and it was felt that the home were ahead of the game with this idea.

Health issues were discussed and concerns were raised about the physical and emotional wellbeing of her mother. The priority was her mother’s physical health and concerns that she did not contract Covid-19 or become unwell, neither has been the case and it was said that *“the staff have taken great care of her”* and been *“fantastic”*.

In relation to her mother’s emotional wellbeing, it was commented that this has been affected by the lack of stimulation provided by frequent visits and an acceptance that the staff could not fill this void.

In relation to whether things could have been done differently, the following was said: *“I do not think so, I feel confident that if I have a concern I can take it to staff and they will sort it. I have great confidence in the management”*

Comments from the relative

- I knew mum dreaded the thought of not seeing her family.
- I was delighted when the home was closed, I felt that the manager was on top of the issue - I felt that decisions made were to keep her safe.
- Care Home staff communicated to us and this made all the difference.
- Relatives have been consulted and their feelings, views and opinions have been sought.
- I knew that if Covid came into the home it could be very serious.
- I have appreciated being kept informed; the Manager has been ahead of the guidance and focussed on keeping people safe.
- My mother is in the best place, receiving the best care and it makes a difference that I feel confident in the carers.
- Staff have taken great care of my mother, physically she has been very well and she still looks well. All the staff have been fantastic.
- The idea for the “Drive in” was great and it was very emotional.
- I did worry her mental health would deteriorate and it is evident from the conversation that we heard today that the situation has affected her.
- I have great confidence in the management.

4. Themes

This report includes views from the Care Home Manager, a resident and a relative, they shared the issues that were important to them having experienced 4 months of the Covid-19 Pandemic. It was interesting that each of them discussed common issues, which have been identified in the following themes.

- Timely decisions

The Care Home was closed before any National or local guidance to do so and the instigation of the management, this was discussed by all these who contributed to this interview and the decision although very difficult to convey and implement was seen as necessary and positive by all parties. Regular meetings facilitated timely responses to changes to policy and practice and kept people informed

- New roles and responsibilities

The Care Home Manager talked about the many ways that staff had to adopt new ways of working, from wearing of PPE to supporting people to use new digital platforms to communicate with their loved ones. Again, this came through in the discussion with the resident and the relative who spoke about the use of PPE by staff and how staff had been creative in the way they worked to maintain physical and emotional wellbeing i.e. new activities and the Drive In

- Communication

Communication was described as being a priority by the management and both the resident and the relative praised the Care Home for the effective communication throughout this time ensuring that everyone was informed and up to date. Residents and relatives particularly felt that they were involved and could share their views and opinions due to the actions of staff.

- Staff

The Care Home manager praised staff for their receptiveness to adapt to changes in their roles and responsibilities in relation to keeping everyone safe. This was mirrored by the resident and the relative interviewed who spoke highly of the staff and were grateful for all their actions in maintaining the physical and emotional wellbeing of residents.

5. Conclusion

The intention of this engagement was to gather feedback regarding the lived experiences of Care Home residents during the first few months of the Covid-19 pandemic 2020 to present at the CCG Governing Body. The engagement was a success and on completion, it was evident that Healthwatch Doncaster had extensive feedback that could be presented in a report.

The engagement involved feedback from the Care Home manager, a resident and her relative, they were more than willing to share their views and experiences and these led to the themes presented in the main body of the report.

Whilst their feedback has illustrated some practical and more importantly emotional difficulties, the main themes throughout are encouraging and demonstrate the efforts by all to maintain the health and safety primarily of the residents.

It has to be recognised as was stated that there has been some hardship, sacrifices and emotional trauma however, the feedback is overwhelmingly positive and it is clear that the

focus on communicating changes to services, policies and procedures has been a contribution to the outcomes achieved.

What the report has identified is the wider issue for those who have found themselves isolated during the pandemic and may not have had the same support provided to the residents of Care Homes in order to maintain their health and wellbeing.

The Care Home staff in this project made changes to their practices to maintain the health and wellbeing of their residents, ensuring that residents were stimulated and could stay connected to their family and friends. Staff supported both residents and their relatives to utilise digital platforms to facilitate and maintain these links. When necessary any health needs of residents have been supported by digital platforms preventing any unnecessary face to face contacts and afforded the residents continued protection.

The flexibility and creativity of Care Home staff in developing new ways of working, providing different activities and stimulation has supported and maintained the emotional health of residents'

Whilst the residents have been isolated from loved ones this project identified through the views of the participants how maintaining the health and safety of residents has been the priority.

6. Recommendations

This report has helped to understand the experiences of residents in one Care home in Doncaster, whilst that is the case what has been done additionally is identify the wider issues for those residents of Doncaster living in their own homes who have found themselves isolated during the Covid-19 pandemic.

It needs to be recognised that those people who have been or are still isolated in the local community have their own physical and emotional needs that may have been met previously by individuals or services that they now cannot access, struggle to access or do not know how to access.

Technology was a huge asset to the residents of the Care Home and the lack of this for people in the community may be hampering their access to services and connectivity with others, which will subsequently have a negative impact on their health and wellbeing.

Whilst it is not feasible to provide access to technology for all those isolated in the community, the fact that technology made such a difference to the residents in the Care Home needs to be considered. Forward planning needs to recognise this gap and consider how the physical and emotional needs of this group can be supported as the constraints of the pandemic continue.