



The experiences of care home staff during the Covid-19 pandemic

Lancashire

June - July 2020



About Healthwatch	3
Executive Summary	4
Project rationale	5
Methodology	6
Preparation & challenges	7-8
What could have been done differently?	9
Support for staff	10-11
Supporting residents' wellbeing	12-13
Support for residents' families	14
Supporting staff wellbeing	15
Planning for the recovery period	16
Maintaining a quality service	17
How do you feel you are coping?	17
Further comments	18
Conclusion	19
Recommendations and response	20-21
Appendix 1 (<i>covering letter sent to care home managers</i>)	22



About Healthwatch Lancashire

Healthwatch Lancashire (HWL) was established in April 2013 as part of the implementation of the Health and Care Act 2012.

Healthwatch England acts as the national consumer champion for all local Healthwatch organisations, enabling and supporting HWL to bring important issues to the attention of decisions makers nationally.

the views of people who use health and care services in their local area, seeking to ensure that their experiences inform the improvement of services.

HWL are constantly listening, recording and reporting on the views of local people on a wide range of health and care issues, ensuring that people in the county are able to express their views and have a voice in improving their local health and care services.





Executive summary

Healthwatch Lancashire (HWL) in collaboration with Lancashire County Council (LCC) Quality, Contracts and Safeguarding Adults Service, created three surveys. The surveys were designed to provide a 'snapshot' of the experience of people living in, working in and who had relatives in care homes in Lancashire during the pandemic.

The feedback from the surveys will inform quality improvements, identify outstanding needs and improve communication between care homes and families.

This report focuses on the feedback given by staff working in care homes. In total, 86 staff and managers responded to the survey from 46 different care homes.

43% of staff felt they were unprepared for the pandemic with a further 12% not sure. They told us that their main challenges included practical challenges (lack of PPE, not enough staff), keeping residents and staff safe and personal challenges (understanding guidance that was unclear, keeping up morale and providing reassurance.)

Nearly 1/3 felt that, on reflection, nothing could have been done differently. Suggestions for what could have been handled differently included:

- Guidance and information should have been provided sooner.
- Equipment and testing provided sooner.
- More and better support from the government and other agencies.

2/3 staff felt supported during the pandemic. However, some respondents told us that support was limited at the start of lockdown but did improve as time went on. What they feel would help them is an opportunity to share their experiences with others and to have someone to talk through their worries

with.

To support residents' wellbeing, staff have increased both the type and number of activities available, ensured residents were able to contact relatives and friends and kept residents informed of changes and updates.

To support families of residents, staff enabled communication with their relatives, kept them up to date with changes and information and provided reassurance.

To support staff wellbeing, managers kept staff informed, worked together 'pitching in' when they could and provided one to one personal support.

Just over half had made plans for the recovery period. Managers and staff told us that they are proceeding with caution as some attempt to reopen to visits (to some extent.)

96% felt that they managed to maintain a quality service and 86% felt that they are coping really well or okay.

Further comments that were left in response to the survey demonstrated staff's commitment to their job and their appreciation of the teams they worked in during difficult and stressful times. One safeguarding issue was identified as a result of the staff survey and was addressed by HWL and LCC.



Project rationale

As part of our remit to explore and understand the views and experiences of people in Lancashire, Healthwatch Lancashire (HWL) use an approach called 'Enter & View'. This is a method we use specifically to understand the experiences of people living in and working in care homes, as well as the views of residents' relatives and friends.

Due to the Covid-19 pandemic and the subsequent lockdown, HWL were unable to conduct any 'Enter & View' visits in local care homes. Instead, working in collaboration, HWL and Lancashire County Council Quality, Contracts and Safeguarding Adults Service created a series of questions designed to explore how care home staff, residents and relatives of residents were coping during the pandemic. It was agreed that there would be three separate questionnaires, one for care home staff, one for care home residents and one for the family and friends of care home residents.

Analysis of feedback from the surveys will provide both a 'snapshot' of life living in/working in/having a family member in a care home in Lancashire during the pandemic of 2020.

In turn this will:

- Inform short and longer term quality improvements.
- Identify outstanding needs, such as bereavement or mental health support.
- Improve communication between care homes and families.

Responses to this survey suggest that life for all of those involved with care homes may be very different to the 'pandemic life' experienced by most people and that everyone involved is facing and dealing with a multitude of challenges. At the same time we were aware of some amazing examples of great service delivery under tricky conditions. We wanted to hear about these experiences and understand how people have managed (and are continuing) to manage during these unusual and difficult times.



Methodology

A letter explaining the purpose of the surveys, was sent to all care home managers in Lancashire (a copy of the letter is available in Appendix 1).

It was agreed that the three surveys would be presented as part of an online survey distributed to the managers of care homes within Lancashire. Generally the questions would focus on:

- How are staff managing to continue providing a quality service? What are their challenges?
- What is different and the same for residents?
- What challenges are the families of residents facing?

This report concerns the findings from the survey that was given to care home managers and staff.

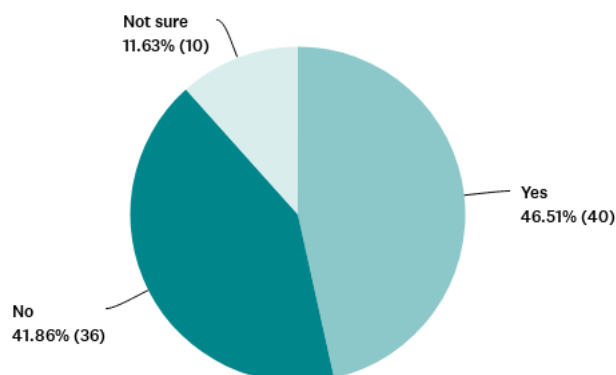
They were asked the following questions:

1. Did you feel sufficiently prepared for the pandemic?
2. What have been the challenges?
3. What could have been done differently?
4. Do you feel sufficiently supported during the pandemic?
5. What do you need to feel supported?
6. How are you supporting residents' wellbeing during the pandemic?
7. How are you supporting residents' families during the pandemic?
8. For managers - how are you supporting your staff's wellbeing?
9. Have you made plans for the recovery period?
10. What plans have you made?
11. Do you feel that overall you have managed to maintain a quality service during the pandemic?
12. How do you feel you are coping?
13. Would you like to tell us more about this?
14. Name of the care home.



Preparation and challenges

Q1 Did you feel sufficiently prepared for the pandemic?



42% of staff that we spoke to said that they did not feel sufficiently prepared for the pandemic, another 12% were unsure.

What have been the challenges?

This was an open question where respondents could leave a comment. The comments have been themed into three categories. The numbers in brackets represent the number of staff who made a comment that fell into that category.

1. Practical challenges

- Lack of PPE, particularly in the early days of the pandemic (22)
- Having to operate with fewer staff (8)
- Difficulties associated with wearing PPE (4)
- Issues around accessing GP services (3)
- Difficulty accessing testing (3)
- Problems with food and other deliveries (2)

"Stock levels of PPE, lockdown of care home not quick enough, emotionally hard to lose residents for families having lost my own relative."

"Initially PPE, reassuring families and supporting reduced staff due to furlough. Anxious Staff. Staff unable to do regular hours due to childcare. Due to own health conditions not been able to help out physically as I would have done usually."

"Getting PPE in the early days, constantly changing advice almost daily, almost impossible to keep up. Pressure to take admissions, lack of testing, fear and uncertainty among staff."



Preparation and challenges - cont.

2. Safety of residents and staff

- Keeping residents safe (16)
- Supporting residents (9)
- Keeping staff safe (6)
- Residents isolated from their families/no visitors (5)
- Reassuring relatives (5)
- Hospitals trying to discharge residents with Covid-19 (4)
- Concern over staff wellbeing and mental health (3)

“No visitors caused stress and upset for the residents. Closing the doors to lock-down became very daunting as what we thought would be only a few weeks, turned into months. “

“Keeping everyone safe. Continually keeping staff morale up and making sure the staff keep themselves safe for work and their families by following government guidelines. We have been staff down not with covid19 but because of COVID 19 shielding and unpaid leave and self isolating because of others in their families so it was hard going for the ones working. It is a big ask asking staff to go nowhere. Also residents and staff have missed seeing their own families.”

3. Personal challenges

- Being given guidance that was unclear (11)
- Keeping up morale, reassuring staff, relatives and residents, keeping everyone informed (10)
- Uncertainty and fear about the future (4)
- Feeling unsupported (4)

“Reducing fear and anxiety while managing the risk and importance of control. Testing, discharges to care homes whilst positive. Promises from government without following through, poor guidance from local authorities. “

“Not having the support from external healthcare agencies and professionals when we had a Covid outbreak at the end of March.”

“Keeping service users occupied/engaged managing expectations when lockdown is relaxed and maintaining staff spirits when it was first announced.”

“Deciphering all the information we have been sent.



What could have been done differently?

1. 26 staff said they felt that there was nothing that could have been done differently and another three respondents told us that they feel they had done their best. Five staff weren't sure about what could have been done differently.

"I feel we have managed this very well. We have a good work team who have really pulled together and ensured the safety of our residents."

2. Clearer guidance and information should have been provided sooner (15)

"Receive the same information from health as LA, been conflicting at times especially at the beginning."

"We should have had earlier guidance and direction. As the Manager/Proprietor I felt like initially I was making it up as I went along."

3. Equipment (including PPE and testing) should have been available and used sooner (12)

4. There should have been more and better support from other agencies and the government (11)

"One clear, concise message from one source."

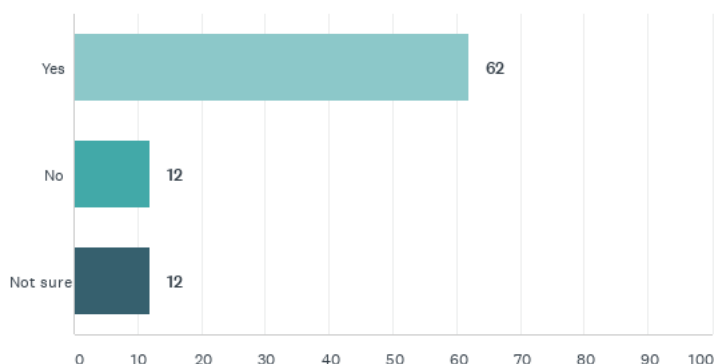
"CQC should have stepped in straight away they should have been telling the government what our needs are."

"We could have been provided with more support from external agencies and healthcare professionals. If some of the residents had been hospitalised they may have had a chance of surviving."



Support for staff

Q4 Do you feel sufficiently supported during the pandemic?



"We are very happy and feel we are not alone as LCC have contacted us daily and just knowing they are there has been very helpful.... Thank you to all at LCC."

72% of respondents told us that they felt sufficiently supported during the pandemic, 14% did not feel supported and another 14% weren't sure.

What do you need to feel supported?

1. The numbers were split almost 50/50 between those who felt they were well supported (15) and those who would have liked to have had more support from other service providers, senior managers, Local Authority, CQC or did not specify (13). Several staff also mentioned that support was limited at the start of the pandemic, but improved as time went on (6).

"I feel at the beginning there was a real lack of support from anywhere and all everybody wanted was data from you but offered very little else. Since then I do feel this improved from an LCC perspective. The daily calls were very reassuring that help was there if needed."

"Yes now but in the beginning LCC also did not have the knowledge or means to support us."

"To be supported better by GPs and district nurses. To have someone we can contact on a one to one basis so we can discuss residents health concerns."

"I feel that LCC have given great support."

"Good management and team work, which we DEFINITELY have."



Support for staff – cont.

2. Being able to share my experiences with others and to have someone to talk to about my experience and the worries I have.

- Staff said that they would like to feel listened to and/or to feel that there was someone they could talk to (9)
- Respondents told us that they would like to be able to share their experiences (2)
- They want to feel appreciated for the work they have done and continue to do (3)
- They would like to feel reassured (2)

“I feel that there are a lot of questions that we need answers to when this is over. How this can be done I am unsure. All I know is that I felt in a lonely place as an owner /manager especially when covid entered the home. At one point I thought I would have to close the doors. I would like to share my experience from day one of the dreaded experience to see if there are areas where I could have done things differently.”

“Being able to talk to your other work colleagues and being listened to and feeling you are not alone in this.”

“On reassuring we are doing OK. More support from the top not just from our office team who are doing a brilliant job, they need more support also.”

“Someone to talk to about how the pressure of trying to keep people alive mixed with constant criticism from others.”

3. Clear information, timely guidance and guidelines and good communication (11)

4. PPE and testing (10)

“Recognition and signposting to PPE as it was a real struggle in the beginning to obtain when all resources were being diverted to the NHS. Easier access to low cost temporary staffing when staff were self isolating, regular checking in on how we were managing not just about whether anyone had coronavirus and we had PPE.”

“Testing of residents and staff. Testing was not available when we had the outbreak despite requests for this to be carried out. Assistance from healthcare professionals to hospitalise residents. Some residents may have pulled through if they had been given the opportunity to go to hospital. We felt we were left on our own.”

5. I don't know, or there is nothing more that could have supported me at this time (8)



Supporting residents' wellbeing

"From lockdown we had weekly meetings with the residents keeping them updated, we continued with social activities in-house with the whole of the care team. At first residents and carers felt like it was a real home from home when the visitors were not allowed in. We were cosy and lived together in a different routine and more of a big family group. I became a hairdresser, chiropodist, main entertainer which brought me closer to the residents. The staff felt this too. However as the weeks went into months there was a feeling of sadness as the virus unfolded and the daily death toll had an impact on the residents, they became frightened that the virus would get hold and have a serious impact on the family as a whole. Lots of reassurance and trying not to watch the TV coverages daily helped. We luckily had an outdoor space in the garden where the residents could get the fresh air and relax. Lots of talking, lots of questions answered, being together held us in strong position with the thought that we will get through this."

We asked care home staff what they had been doing to support their residents' wellbeing during lockdown and the pandemic.

There were three main approaches that most staff took in order to support the residents.

1. Increasing the number and type of activities for residents.

This included a mix of trying to keep the atmosphere and routines as 'normal as possible', by for example continuing to celebrate birthdays. As well as introducing new activities and more frequent activities; hairdressing, games, singing, going outdoors.

Staff have been approaching this as a way to keep residents' spirits up and to try to keep them busy.

"We aim to make things a very much carry on as normal even if this is the new normal. We have introduced tablets so they can still receive skype visits. We have mobile phones to ensure they can speak with loved ones at anytime. We have set up a Facebook group so that family members can leave photo / messages / video and residents have done the same. We the staff are now all very good hairdressers. We had the garden cleared and encouraged fresh air. Increased the activities. We have tried and hopefully succeeded to keep the home as fun as we always do."

"Sing songs, chats, lots of loving tender care also face time with family and friends and a drive by where families can see each other while passing."



Supporting residents' wellbeing – cont.

2. Ensuring residents remain in contact with their family and friends.

Staff used a mix of new technology (such as Skype and Facetime), phone calls, social media and letters to help residents remain in contact with family and friends who could no longer visit. Once restrictions had eased slightly, some care homes enabled window visits and 'drive by's'. There were also end of life personal visits.

"We are ensuring residents communicate with family members. We have begun social distancing outdoor visits between residents and their loved ones."

"We are supporting them making WhatsApp and video calls to their families. We have had our usual activities / stimulation hour and extras. We have made a time table for safe distancing visits from families but they cannot come in the building . We have sent photos and clips to families on the WhatsApp family group we set up with regular updates on guidelines."

3. Providing reassurance

An important role undertaken by care home staff was to provide reassurance to the residents and to spend time with them. Staff also told us that they make an effort to remain positive and cheerful for the residents.

"We are being not just the staff we are also being their family."

"By being upbeat, providing reassurance and having a laugh."

"Trying to do the things that we'd normally do, talking and giving them plenty of reassurance."

4. Keeping residents and relatives informed

This was enabled through weekly residents' meetings, one to one chats, Facebook groups and phone or video contact.

"Lots of activities ensuring all residents have some quality time during the day. Making life fun despite the unprecedented times - not reminding them constantly what is happening outside. REASSURANCE CARE LOVE ATTENTION is very much what we do on a daily basis but it is now more enhanced by the use of Facebook for families and friends to keep in touch and see what we have been doing Skype, FaceTime, window chats/visits, messages, letters, texts to and from loved ones - the list is endless."



Support for residents' families.

Care home staff told us that they have provided support for the family and friends of their residents by:

- Ensuring family and friends can contact their relative, either electronically, via phone, letter, cards or through the window.
- Some care homes also set up Facebook groups.
- Remaining in regular touch with family and friends and keeping them updated on their relative's care and what was happening within the home.
- Offering reassurance that their relative was being well cared for and that staff were doing all they can.

"Keeping them informed-weekly email and updates. Sending photos and video clips. Skype, video calls and phone calls from residents. Acknowledging all their support during these difficult times and thanking them. Asking them to make masks, bags etc to feel useful and to source pedal bins. We have had a large sign made at the entrance thanking them."

"Saying hello during face time calls to show usual staff on site and so they can see full PPE is being worn and letting them know everything is good and all well."

"By listening to their concerns, updating them of their wellbeing via phone. Continuing support plan meetings. Allowing essential end of life visits and face time calls. We have also written letters on behalf of our service users and done Facebook posts."

"I have carried out support plan reviews with residents , their keyworker and family using facetime and telephone. I have completed the monthly newsletter and e-mailed this to all family members to keep them up to date with whatever is happening in the home and what we have planned."



Supporting staff wellbeing

“Staff have been given a space within the care home to 'take a breath' or 'have a wobble' if they are feeling overwhelmed. They receive weekly messages from Management to congratulate and thank them for their excellent work. Staff have been provided with gifts from management and relatives. They are offered supervisions weekly if they choose to chat to manager regarding their feelings and well being. They are all encouraged to ensure they self care and take time to reflect.”

“Its been a very much we're in this together approach and not just words but actions, getting out of the office rolling up the sleeves and joining in . Every time information was received it was passed on . We are very much a close team here and stick together it is one of the homes big strengths . I have also been making sure that all staff have had plenty of rest days and ensured if they have needed a break they got it. Staff were reassured that if they had to isolate they would not lose money.”

Most of the managers included the following approaches in order to support their staff.

Keeping staff informed:

- Regular team meetings.
- Supervisions and one to one meetings.
- Having an “open door” policy.
- Regular updates.

“We have an open door policy for them to come and discuss any issues either with their line manager, or home manager. We have a daily meeting at 11am where any new information is shared. We have designated 'wobble rooms' on each unit that contain information on where they can access help, or just go to have a quiet moment.”

Working together:

- Team work.
- Managers being “hands on”.
- Managers being “available”.

“Being available, door open, walking floor, speaking to staff to see if they have concerns. All staff tested and feel relieved to be negative. Employee recognition, 'gold star award'. Being in early to see and chat to night staff as they can feel alone.”

Providing personal support:

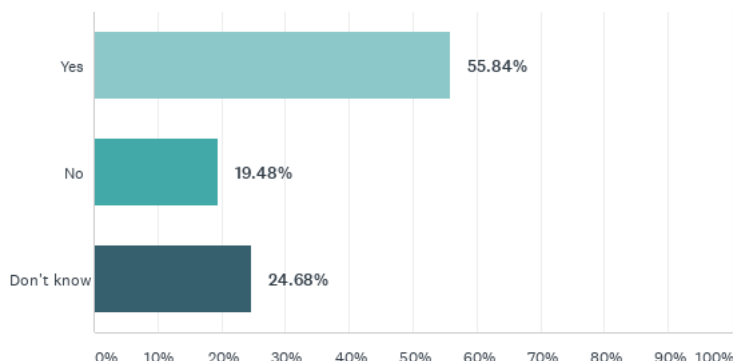
- Taking personal circumstances and needs into account when compiling rotas (for example, childcare.)
- Being there to answer questions and talk through worries.
- Reassurance.
- Time off.
- Showing appreciation.
- Providing mental health support/counselling.

“Always there to talk. Time out if needed. Ringing staff who are off offering therapy. Keeping them up to date as much as we can. Saying thank you and meaning it.”



Planning for the recovery period

Q9 Have you made plans for the recovery period?



Over half of respondents said that they have made plans for the recovery period. 19% said that they haven't, with 25% not sure or don't know. As respondents were a mix of managers and staff, it is reasonable to assume that some staff may not be aware of the recovery plans.

What plans have you made?

Some care home managers and staff are trying to cautiously reopen and try to return to 'normal' as much as is possible, whilst others are very cautious and wary of a possible second wave.

- "A cautious return to normal activity" - this includes restarting garden visits, socially distanced visiting, the return of hairdressers and trips out.
- Ensuring there is good hygiene and infection control - by doing regular deep cleans, providing hand sanitiser and updating the home to deal with future infections.
- Looking at what could have been done differently and better and re-developing in-house policies in line with this.
- Support Plan meetings.
- Appointment times for visitors.
- Asking visitors to complete questionnaires.
- Risk assessments.
- Isolation for new residents.
- Readmitting new residents.
- Testing.

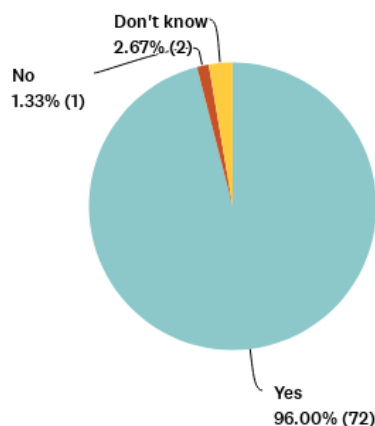
"I don't feel we are in a safe position to do so at this moment in time. We need to be responsible and stay alert. We have discussed a staff party and a residents' party when this is all over in appreciation and relief :)"

"Limit visitors and visits and time spent within the home by appointment only. Social distancing to remain in place. Temperature checks to continue and for visitors as well. Residents to remain in grounds. Special rules for end of life. Visitors to stand in trough before entering building, have their temp taken, health check then request they wash their hands and wear PPE if required."



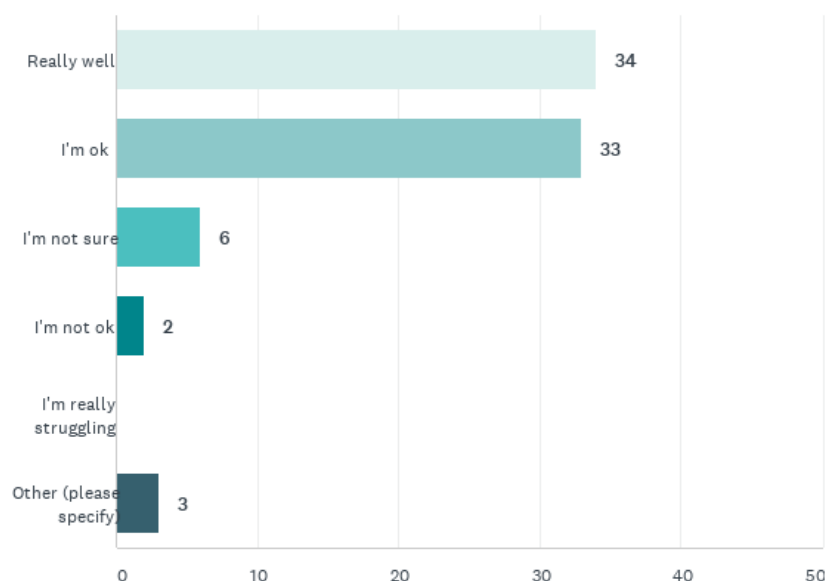
Maintaining a quality service & how do you feel you are coping?

Q11 Do you feel that overall you have managed to maintain a quality service during the pandemic?



96% of respondents felt that they have maintained a quality service within the care home, throughout the pandemic. Only one person said no.

Q12 Do you feel you are coping:



"It is a big jump from really well to I'm ok and I think that as an act of caution really well is tempting fate. So yes we have coped well, the team has pulled together but we have been cautious at every stage of this pandemic and have been reluctant to take anything for granted. This is not over by any means and my worry is that too much relaxing of measures too soon will lead to some level of return of the virus."

86% of staff who completed the survey told us that they feel either really well or were doing ok. Two people said that they are not ok, plus another one said they are not ok under the 'other' category. Nobody said that they were really struggling.



Further comments

Many comments concerned the fantastic work that staff and teams had done and about the support they had given to each other, although some mentioned the overwhelming nature of the pandemic.

"My team have been exceptional, even though they have their own worries they have stuck together and pulled each other through this pandemic. For that I will be eternally grateful."

"We have kept everyone safe during difficult times and this is an achievement."

"Some days are good, but other days you feel the pressure of trying to stay positive all the time for the residents. Even more so when you have children at home its the same - trying to stay positive and keep up with the home life too. It can sometimes feel there is no down time to gather your own individual thoughts."

"Sometimes it can feel overwhelming with home and work."

"I feel at our most vulnerable time we were not supported, all the support came too late after we had gone through our losses."

"While I am coping the role of a manager is very isolating and draining. It is your job to keep the spirits up of everyone while filtering the ever changing guidance knowing that anyone decision you make could be potentially life threatening and constantly feel like you are being judged on your actions with no out let to vent these emotions."

More serious issues were also identified within the comments respondents left, including the following which has been raised as a safeguarding alert by HWL and LCC:

"The first two weeks of the lockdown was so hard, I felt we had been abandoned by the medical profession and government. I found this really hard to deal with. we could not even get someone to come out to do observations on a poorly resident. If we took a poorly resident on telemeds (we use a lap top computer to contact a nurse at Airedale hospital for medical advice) We were told by the nurse to isolate the resident and treat as Covid-19 virus. We knew this was not the virus, it was a chest infection. When I asked for a 2nd opinion I was told " everyone with respiratory problems are to be treated as though they have the virus". In the elderly respiratory problems are main factor with age. GP surgery was phoning up to put DNARCPR in place for residents, sometimes not consulting residents or families. I found this very upsetting, it felt like the GP had got a "get out jail free card" so they don't have to treat the resident. To sum it up, I felt that the residents and staff were abandoned by the government and the health professions."



Conclusion

The survey was sent to 433 care homes in Lancashire. 86 people responded from 46 care homes, giving the survey a response rate of 11%.

Being sufficiently prepared

Only 46% of respondents felt that they were sufficiently prepared to deal with the pandemic. Initial problems accessing PPE at the start caused issues for staff. Having fewer staff available to work, as a result of sickness, isolating or childcare, also created challenges. Respondents also mentioned difficulties accessing GP services and testing.

Staff also had to navigate keeping both themselves, their families and residents safe, whilst explaining and reassuring residents that they were safe. Simultaneously many staff were dealing with their own family and personal challenges including following unclear advice and 'deciphering all the information'.

What could have been done differently?

70% of respondents believe that things could have been done differently. Many told us how proud they are of the people they work with and how they 'really pulled together' but they also highlighted areas that could be improved. These included:

- Clearer guidance.
- Necessary equipment available sooner.
- Improved support from central government and other services and agencies.

Support for staff

Nearly $\frac{3}{4}$ of respondents said that they felt supported during the pandemic. There were mixed reports about the support provided by LCC. Some people had a positive experience and were grateful to LCC for their daily contact, others commented that support was lacking at the start of the pandemic, but did improve.

Staff felt that they would benefit from some personal support, suggestions included opportunities to discuss and share their experiences, having someone to talk to, feeling appreciated and being reassured. Clear and timely information and good communication are also key to supporting staff. Finally, staff told us that having the necessary equipment and access to testing is also needed.

Supporting residents' wellbeing

A second report will be published by HWL looking specifically at the experience of residents' experience of the pandemic and this will provide further insight. From the perspective of care home staff, they told us how hard they worked not only to keep residents safe but also to keep residents' spirits up and provide reassurance. As one respondent said, as they had been isolated from visitors for months 'we are also being their family'. Extra and more activities were provided and staff used technology to ensure residents were able to stay in touch with their families.



Conclusion – cont.

Supporting residents' families

A third report will be produced by HWL that specifically examines the pandemic from the perspective of the families of residents, which will provide further information.

Care home staff used a variety of ways to keep in contact with relatives and family of residents, sharing information, videos, photos and updates. They also gave reassurance that residents were being well looked after and that staff were doing their best to look after them.

Supporting staff wellbeing

The survey asked that only people with responsibility for managing staff completed this question. Care home managers told us that they were conscious of the strain and pressure on their staff. Some provided a 'quiet space' for staff to go to, rewards, treats and recognition. Some offered counselling, one to one meetings, team meetings and an 'open door' policy. Keeping staff informed and trying to accommodate for personal circumstances were other strategies used to support staff wellbeing.

Planning for the recovery period

Just over half of respondents said they had plans for the recovery period. The general tone from responses is one of caution, with staff on a scale from 'cautious' to 'very cautious'. Plans are centred around trying to return to some activities, maintaining hygiene, infection control and organising for visitors. Staff are aware of the risks of 'reopening' too soon and have put measures in place to try and mitigate the risks.

Maintaining a quality service

One person said that they did not feel they were maintaining a quality service, but also told us that they are currently not working (shielding) so it could be that they are answering this question for themselves, rather than as a reflection of the service provided by the care home.

Two people weren't sure whether it was being maintained, everyone else said 'yes'.

How are staff coping?

Most respondents are coping really well or ok. Three people told us that they are not ok and gave a mix of reasons for this:

- They did not feel sufficiently prepared.
- They felt uncertain about what action to take during the pandemic.
- They had suffered the death of a loved one.
- They did not feel supported or were unsure whether they were supported.
- They wanted more and clearer information.
- They wanted more contact with their supervisor.
- They were worried about the future.



Recommendations and response from Lancashire County Council

Most people told us that they are doing ok, there were many positive comments about team working and supporting each other and not every care home struggled to get PPE. People's experience varied over how supported they felt, though most acknowledged that support improved over time. However, some the comments that people left demonstrate the emotional toll that the pandemic has taken. Some respondents told us that they felt "isolated", "overwhelmed" and that support had come "too late".

Based on this, HWL would like to offer the following recommendations:

1. LCC to work with system wide partners to ensure that coordinated, clear and relevant information about COVID 19 and required responses are provided to Care Homes.
2. LCC to provide a support service that will enable care home staff to share their experiences and have someone to talk to about their worries.

Lancashire County Council accepted the findings detailed in this report and responded to the recommendations:

1. Continue to work with partners via the LRF to interpret government guidance for care homes and share pertinent information via regular newsletters, and webinars.
2. Explore how the work with My Home Life can be expanded to continue to offer care homes and other adult social care provision a support service.



Appendix 1: copy of letter sent to care home managers

Dear Colleague,

I'm writing to you today as the Director of your independent local health and social care champion, Healthwatch Lancashire. We are an independent organisation that gathers, explores and amplifies the experiences of people who access health and social care services. We use this information to drive improvements and service design.

One of our key functions is the carrying out of Enter and View visits. This is an opportunity for our staff to get a feel, first hand, for what it's like to live in a particular care home. We do this by undertaking a site visit in which we talk to managers, staff, residents, families and carers about their experiences.

In the context of Covid we have suspended Enter and View visits for the safety of staff and residents.

However we know sharing experiences and being heard is perhaps more important now than ever before.

We realise that life for all those involved with care homes is very different from the norm and that everyone is facing and dealing with many challenges. And we know that there are many fabulous examples of great service delivery under difficult conditions and examples of exciting innovations.

With this in mind, we have agreed with Lancashire County Council (LCC) to create and share three online surveys to find out about how everyone is coping in the current climate. These surveys look at topics such as:

How are managers and staff managing to continue to provide a quality service?

What is different/the same for residents?

What challenges are families facing?

Through the links below, you will see that we have designed separate surveys for managers and staff, one for residents and one for families/carers.

[Family of Residents](#)

[Residents](#)

[Care Home Staff](#)

To share these surveys as far as possible we will be promoting via our social media channels. However, we would also greatly appreciate your support in sharing and completing these surveys. By responding yourself, by circulating this letter and these links as widely as possible amongst the care home staff, residents and families and perhaps also by offering support to those who may need it to respond, you can help us to hear the experiences of care home communities.

Responses will greatly help Lancashire County Council and its partners to better understand your experience of COVID 19; the Council has told us that they are really keen to hear what it has been like and have offered their commitment to using your feedback to help their work now and in the future. Our Research and Data officer will independently analyse the results and provide a report which we anticipate could inform:

- A snapshot of what it's been like managing/living in/having a family member in a care home during COVID 19
- Short and longer term quality improvements
- Outstanding needs - possibly bereavement support, MH support for staff etc.
- Improved communication between homes and families

The surveys will go live on Wednesday 3rd June and you will have until midnight on Sunday 28th June to respond. This is your chance to have your experiences and the experiences of your residents heard. We are aware that Public Health England (PHE) and the Office for National Statistics (ONS) are due to conduct a separate, nationwide study of COVID-19 and care homes. Where the PHE and ONS survey looks to gather national trends, by completing our survey you will help us to understand, specifically, the challenges faced within our county.

The raw data gathered will remain confidential unless there is a need to address a specific safeguarding or quality issue, in which case normal processes will be applied. The final report for LCC will not link themes and/or issues identified to individual homes. However, where innovative and best practice has been highlighted, permission to name the particular home will be agreed with the home prior to the report being finalised.

If you have any questions, or if we can help you in anyway, please contact me or the wider Healthwatch Lancashire team.

Kind regards

Sue Stevenson

Director of Healthwatch Lancashire

Healthwatch Lancashire
Leyland House
Lancashire Business Park
Centurion Way
Leyland
PR26 6TY
Telephone: 015242 39100
Email: info@healthwatchlancashire.co.uk