

Between October – December 2020, we interviewed staff and managers from four Liverpool care homes. We also held a focus group with people who had relatives or other loved ones living in in care home. We will pass feedback from this report on to Liverpool City Council, and other local and national organisations. A full version of the report, and an 11-page summary, is available on our website.

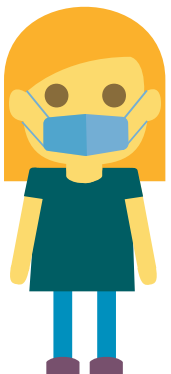
We wanted to:

Find out people's experiences of care homes during the pandemic
Identify areas where support for care homes can be improved
Give people an opportunity to share their views

Our findings

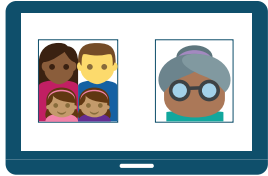


Care Home staff and managers told us:



- Working during the pandemic had been difficult and stressful
- Deaths of care home residents during a COVID-19 outbreak were upsetting, and at times traumatising for staff, as well as for family members and other residents
- Getting adequate and appropriate support when dealing with a COVID-19 outbreak was very difficult in the early weeks and months of the pandemic
- Some homes said they had been offered support by various external agencies, but this had not been delivered at the time of interview
- No dedicated emotional or psychological support was made available to staff, although managers did signpost staff to external support services and organised gifts and treats for staff to boost morale.
- At the start of the pandemic, managers found it difficult to keep on top of guidance issued by multiple agencies. Sometimes guidance for care homes was contradictory.
- Care home staff were expected to verify deaths of residents during a COVID-19 outbreak, even when they had not been trained to do this and were not comfortable doing this.
- Access to PPE had not been a problem, as Liverpool Council had been able to supply PPE quickly to homes experiencing shortages
- COVID-19 testing for staff was working well, and introducing regular tests for staff had boosted morale
- Staff were reassured by testing for residents arriving to a care home from hospital, although some reported that this had not always worked smoothly in practice.
- The wellbeing and mental health of care home residents had been negatively affected by restrictions on visiting, especially residents who previously had frequent family visits.
- Restrictions also limited residents' ability to receive professional hairdressing, have visits with faith leaders, etc, which had a negative impact on their quality of life
- Activities for residents had changed significantly, and homes received little support in ensuring they were able to offer activities for residents. Staff often had to use their own initiative to keep residents occupied and entertained.
- Some homes found it difficult to set up 'virtual' visits for residents', as they did not have good internet connectivity or mobile phone signal
- Facilitating in-person visits with family had challenging aspects, especially in times when care homes were subject to stricter restrictions than the general public
- A number of homes experienced financial difficulties, due to both increased costs and a decrease in funding due to loss of residents

Relatives of residents told us:



- Keeping in touch with relatives in a care home had been difficult
- Video-calls or 'virtual' visits had not been made available to everyone
- Some people did not receive regular or personal updates about how their relative was doing during the pandemic
- Garden and window visits were not always arranged in ways that were convenient or suitable for people or their loved ones
- There were significant differences in the ways that individual care homes communicated with relatives and organised visits
- Prior to the pandemic, people often provided informal care to their relatives in care homes. People wanted this care to be recognised, and were concerned about the impact on their relatives when they could not provide this care
- The pandemic had negatively affected their own wellbeing and mental health,

Our recommendations



- Care homes need:
 - Sustainable funding on a long-term basis
 - Adequate resourcing to provide activities for residents
 - Support to build adequate phone and internet connectivity
- Guidance issued for care homes:
 - during emergency situations guidance should be coherent, joined-up between different agencies, and easy to understand
 - processes for supporting care homes experiencing staffing difficulties and shortages as a result of COVID-19 should be clarified
 - care homes should be supported to safely maintain services and activities that support the quality of life of residents (such as hairdressing services, activities, or support from external faith leaders) when not experiencing a COVID-19 outbreak
 - guidance around the discharge of hospital patients into care homes should be clear
- Care home staff should not be pressured to verify deaths during the pandemic
- Psychological and emotional support should be made available to care home staff locally, and should be resourced appropriately so that staff who wish to access support can do so in a timely manner
- Where support is offered to care homes, clear time frames should be given as to when this can be delivered
- Given the importance of visiting to both residents and their families, relevant local and national authorities must plan to increase the limit on care home visitors as soon as possible and safe
- Communication around care home visits, around changes to visiting guidance and policy, must be communicated clearly and in simple terms
- Where possible, regulations for the public should be more consistent with regulations for care homes, and where there are discrepancies these need to be explained clearly and in simple terms