



Care Home Staff Feedback

What we heard from staff about
working in care homes during
Summer 2020

July to September 2020

Your independent watchdog ensuring people's voices are
at the heart of shaping health and care services in Leeds.

Introduction

Over the period July to September 2020, we ran a survey to find out how care home staff felt things had been going since the pandemic began. We wanted to know what they thought had gone well and what had not gone so well at the care homes where they worked. We also asked them if they had any suggestions about how to make things better now and in the future for care home staff, residents and relatives.

Who gave feedback

We received 117 responses. The breakdown of respondents from each survey is shown below.

- 79 responses from 6 July to 4 August
- 28 responses from 5 to 31 August
- 10 responses from 1 to 16 September

Respondents were asked to state the care home where they worked. They spanned across 50 care homes. These are listed below, with the number of responses from each one. 21 respondents did not wish to tell us where they worked.

Homes with 2 or more respondents:

- Knowle Manor (11 responses)
- Dolphin Manor (10)
- Ashlar House (5)
- Simon Marks Court (5)
- Home Lea House (4 responses)
- Grove Park Residential Care Home (4)
- Neville House (3)
- Morley Manor (3)
- Farfield Drive (3)
- Recovery Hub @ South Leeds (3)
- Manor House Residential Home (2)
- Sunningdale Nursing Home (2)
- Wharfedale House (2)
- House of Light (2)
- Raynel Drive (2)

Homes with 1 respondent:

- Primrose Court
- Halcyon Court Nursing Home
- Spring Gardens
- UBU
- Aire View
- Berkeley Court
- Carr Croft Care Home
- Larchfield
- St Lukes Nursing Home
- Wetherby Manor
- Other (Assisi Place)
- Acacia Court Care Home
- Kingston Nursing Home
- Middleton Park Lodge
- Sabourn Court
- Willowbank Nursing Home
- Sunnyside
- Stone Gables
- Seacroft Green Care Village
- Pennington Court Nursing Home
- Lofthouse Lodge/Grange
- Heathcotes (Morley)
- Hillcrest Residential Care Home
- Headingley Hall
- Ferndale Residential Home
- Donisthorpe Hall Nursing Home
- Champion House Care Home
- Amber Lodge
- Alexander Care Home
- Gledhow Christian Care Home
- Adel Grange
- Daniel Yorath House
- Mount St Joseph
- Redcourt & Grove Care Home
- Spring Gardens

What went well?

Teamwork

Teamwork emerged as a key theme throughout the survey's duration. Just under half our respondents (55 out of 117) said this had been a positive part of their experience. Staff were felt to have gone above and beyond for residents, pulling together as a unit and adapting quickly to deliver quality care, despite the challenging circumstances.

“Staff excelled all expectations. Their care & dedication shone throughout the whole team. Own fears and worries were put to one side to support residents & their loved ones.”

“The care team pulled together so strongly and supported one another. I felt proud to be part of that team.”

Respondents praised their colleagues' efforts in other ways too. Some mentioned the role staff played in not just providing practical care, but supporting residents holistically by, for instance, helping them stay active and keep in touch with families. There were also some observations that care workers had moved swiftly to follow new guidelines to keep service users as safe as possible.

“We have been able to provide a myriad of activities for our residents, this has kept people physically active, mentally stimulated, calm and purposeful”.

“Staff have responded well to the changing condition and have accepted that enhanced working practices are essential to reducing the impact of the virus”.

Practical measures

Another common positive over time was the success of practical measures such as PPE provision and good infection control procedures. Respondents often linked this with a lack of COVID-19 cases in their respective care homes.

It should be noted, however, that references to successful testing were far less prevalent than references to successful provision of PPE.

“Easy access to PPE all the way through, despite changing guidance this was communicated well.”

Many respondents again noted the actions of care workers, stating that their success in following infection procedures impacted on residents' and staff safety.

"We are very fortunate to have stayed free of Covid 19 and I feel that this is down to the staff accepting the changes to the way we work and the systems we put in place"

Support, Guidance and Communication from Management

Good communication was another a common thread. Some respondents felt clear communications were established between managers and staff, with the former proactively keeping in touch with the latter. Some respondents felt management went further than just fulfilling their roles, putting in extra effort to support staff.

"Well organised kept in the loop via our manager and communicating to all staff using a whatsapp group & Skype"

"The organisation have been forward thinking and provided amazing support to us all as staff including care packages of food and loo roll."

There were sometimes references to how external services' communication and support from other organisations had made things better for them.

"Supportive provision from health services"

"Input from infection control team and PPE training. Support from Leeds City Council. Support from Morley Neighbourhood team District Nurses who gave emotional support to staff and physical and emotional support to residents and their families"

Quick Response to the crisis

In some cases, workers felt that the speed of managers' response to the pandemic had been particularly useful.

"Immediate actions when lockdown announced. Traffic light system for managing patients"

"Foresight and initiative from the registered manager, putting infection control measures in place early"

"Manager has been proactive in locking down 3 weeks before the government did"

Other Factors

Other positive elements mentioned by respondents were staff working hard to keep people safe when outbreaks occurred, training and support received from outside external organisations and a minimal loss of life.

4 respondents mentioned that there was nothing positive to note about their experience as a care home member of staff throughout this pandemic.

Digital communications were mentioned only occasionally by respondents, suggesting the benefits they provide were perhaps not experienced consistently across all care homes.

“The care home staff have worked to support residents to maintain communication with their loved ones using a variety of digital technologies”.

What could be better?

Many of the key themes around what went well during the first months of the pandemic also emerged in people’s responses to our question about what didn’t go so well. This suggests that, on the one hand, there was a strong consensus about what was important to care homes during the pandemic, namely staff relations and morale; communications, support and guidance both in-house and from outside agencies; access to PPE, and so on. On the other hand, it appears some homes were more successful than others in meeting these key needs.

However, it should also be noted that one area which received significantly more negative than positive comments was COVID testing.

Low staff morale and stress

A key theme mentioned consistently over time was staff stress and anxiety leading to low morale. Some respondents mentioned negative publicity surrounding the situations in care homes further lowering staff

mood. A lack of acknowledgement and no increase in wages to compensate for their work were also mentioned.

“Negative press about care homes made families, staff and residents more anxious.”

“No support from head office and no extra pay or a bonus.”

Staffing and Support

Issues with staffing levels seemed to compound the feelings of stress and anxiety for respondents and were regularly raised as a common issue. Staff having to self-isolate and take periods off work were discussed. This contributed to staff anxiety as care homes were understaffed and workers felt under pressure to cover shifts and return to work when off for self-isolation periods. This was noted by some to have impacted on the quality of care provided.

“Lots of pressure on the team to cover shifts and increased stress levels due to worry and fear”

“Shortage of staff when many members of staff were infected or in isolation and slight pressure to get back to work”.

Sometimes, respondents noted that they received little to no support from outside organisations. The support they did receive was felt to be delayed or late, impacting again on staff morale and anxieties.

“We were asked to complete advanced care plans for residents by G.P surgeries which was an obvious indication that we would be affected in the care home, yet no provision for a trainer or infection control nurse to come in at the start to help staff understand and reduce infection risks to themselves and residents. Support only given after we had gone through losses in the home.”

“Infection control training support far too late.”

“Little or no support from external agencies local authorities/ safeguarding Leeds, reduced GP direct contact”.

Testing

Another common thread discussed by respondents throughout the survey’s duration was issues with COVID testing. This spanned from issues with getting tests, to patients being sent back from hospital into care homes without being tested, threatening safety in care homes.

Respondents described the testing processes as confusing, with different routes for staff and residents which ultimately created more confusion.

“Testing of the staff has been a nightmare unable to get whole home testing until beginning of August”

“(We were) getting people from hospital that didn't have a covid test.”

“The mixture of different testing routes is unnecessary - staff have one portal, residents with symptoms have another, admissions are a different system and whole home testing is yet another.”

Inconsistent Guidance and Policy

Another theme was inconsistent guidance and policy, which created confusion. Respondents commented on initial delays in receiving information, with some receiving incorrect information about the use of PPE.

“Delays in guidance from the government and regulators being published and unclear guidance that makes it difficult to follow”.

“Initial advice saying we did not need face masks or visors.”

Once guidance was received, many felt it was unclear, with recommendations constantly changing. Some also mentioned feeling overloaded with the amount of information provided. Staff therefore had to keep up with constantly shifting information and priorities, alongside their daily care work. Some noted there was a general feeling of confusion and not knowing what exactly was happening.

“Ever changing guidance was a challenge to keep up with.”

“Too much information that has to be read which says the same thing.”

Other issues

Other key issues (particularly during the survey's opening weeks) were new admissions and balancing families' expectations against guidelines. The emotional wellbeing of residents was also brought up as an issue, as well as the impact of a lack of contact with families and loved ones. Some mentioned challenges and confusion from residents in following the rules

Suggestions for improvement

Quite naturally, many of the respondents' ideas for how care homes' work could be improved tallied with their observations about what wasn't working well. They included:

- Clearer guidance
- More access to COVID testing
- Quicker access to PPE

In terms of improving staff morale, respondents consistently suggested that care home workers ought to be given more recognition. For some people, recognition would include greater respect and status for care workers:

“Some form of nationally recognised award from the Government for services to their country through such a horrific experience [...] clapping each week was a gesture and appreciated but true recognition is required because we are not over this and if there is not any recognition I feel staff will eventually leave this sector.”

“Staff do feel as though they have just been left. Some morale boosting would be helpful, along with recognition about how hard it actually has been”

“Recognition to staff for the complexity of their roles rather than being referred to as unskilled workers”.

“Praise from top to staff”.

For others, an increase in pay would help to bolster morale:

“I think that we need to be paid better and better respected for the work we do”

“Higher wages to keep good staff”

Preparedness and future planning

This was one of the most consistent themes to emerge throughout the survey. Respondents talked about the importance of care homes learning from their experience of the pandemic. They also talked about taking a much more proactive and speedy response which would anticipate problems should a pandemic occur again.

“Better organisation from the start, we knew this was coming so why didn’t everyone act and put procedures in place, we should have locked down a lot earlier, test kits should have been delivered in January and February”

“I feel it’s a case of lessons learned ~we know there is a need to wear PPE we know we have to be more proactive re monitoring”

Particularly towards the start of the survey, people suggested that funding would help care homes to cope better with the pandemic:

“Increase the funding to care for our elderly”

“Funding relief needs to be joined up, not privy to different local authority procedures, and promptly refunded once validated”

Better coordination and relationships across sectors

Particularly in July and the first weeks of August, it was suggested that stronger, more cooperative links between different parts of the health and care system would strengthen care homes’ capacity to respond effectively to the pandemic.

“Hands on support from local authority, CCG and contracts would have made a difference, we just felt abandoned. We need to work together, not “them & us”.”

“Care homes need to be included at the start of any pandemic and risks should be reviewed the same as hospital settings”

“The council to be in contact with the care homes better than this time”

Supporting care homes to welcome relatives

This was a consistent theme throughout the survey’s duration. A number of respondents advocated for greater rights for relatives to visit their loved ones in care homes.

“I would love if families could safely visit for longer. It would mean a lot to people. We could set up table and chairs in the garden and allow families that time”.

“We should slowly reintroduce visiting in slots and continue to keep high standard of infection [control]”.

“For family carers to be given the opportunity to volunteer in care homes to be an extra support”.

Respondents felt that a lack of clear guidance for both care homes and residents’ relatives had made relations between the two more difficult than they needed to be.

“Homes need to receive central guidance on visiting policies - a whole home risk assessment based approach is leading to various solutions at different establishments which is confusing for relatives and friends.”

“Maybe the relatives should listen more when we say no to visits we understand it is not nice but please follow the rules”

Key Learning

We would like to thank all the care home staff who shared their thoughts with us at an extremely busy time. As we look to the future, here are the key learning points from their experiences:

1. There is a real appetite among care home staff for lessons to be learned from the pandemic.

Our challenge as a city: How do we include workers in the learning process as we seek to improve the experiences of people living or working in a care home?

2. The pandemic has taken a toll on care workers' wellbeing and they would benefit from recognition for their hard work and sacrifice.

Our challenge as a city: How do we celebrate our care workers in a way that feels meaningful to them?

3. When managers are able to support their staff, this can significantly boost morale even in very challenging circumstances.

Our challenge as a city: How do we learn from managers who have done this well and make sure that this learning effects real change in every care home in Leeds?

4. Care homes would be able to respond more quickly to crises such as a pandemic if they were better integrated into the health and care system.

Our challenge as a city: What are the barriers preventing care homes from being better integrated into the wider health and care system and how to we remove them?