



Haringey Care Homes in the time of Covid-19

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Haringey care homes in the time of Covid-19

Introduction

In these very challenging times for the social care sector, Healthwatch Haringey wanted to understand and capture the experiences of Haringey care home managers in the time of Covid-19, looking at how well supported they feel and if they are able to access the basics they need to provide a good quality of care to their residents.

We were keen to ensure the experiences of Haringey care home managers and their feedback informed the Haringey Borough Partnership's and the Council's strategy and operational plans around Covid-19, so care homes are well supported to meet the challenges in the months ahead.

We would like to say a big **thank you** to all the care home managers who took time out of their very demanding day to complete our survey for us, and provide us with such rich and detailed data on their experiences as Haringey care home managers in the time of Covid-19.

Executive Summary

We emailed a survey to all care homes in Haringey in June 2020 and got 17 responses - a good mix of settings (nursing homes, older people, mental health and learning disability), and a good mix of large and small care homes. Survey respondents are listed in Appendix A and the care home survey can be found in Appendix B.

Our key findings were:

- **Covid-19.** Around one third of Haringey care homes had had Covid-19 cases amongst their residents and/or staff.
- **Staffing.** Over the last eight weeks some care homes had experienced significant staffing difficulties because of staff absence, but currently this is no longer the case. Some care homes felt staff absence would be an ongoing problem.
- **Testing.** Care homes did have access to Covid-19 tests for staff, but some care homes could not access Covid-19 tests for their residents.
- **PPE (Personal Protective Equipment).** All care homes had been able to provide their staff with sufficient PPE, but some were worried about future supplies of PPE, and the two items most commonly mentioned as being in very short supply were face masks and hand sanitisers.
- **GPs.** GP consultations with care home residents were taking place over the phone or by videocall, and most care homes had had a positive experience with this.

- **Hospital interface.** 45% of care homes said residents coming/returning to their care homes from hospital were still not being tested for Covid-19 before being discharged into their care. Care homes felt hospitals needed to do more work on ensuring good discharge planning and support was in place prior to residents being discharged from hospital.
- **Advice and guidance.** The best source of support was the NHS England webinars. Virtually all the care homes were aware of these webinars, had attended them and made use of them, and were very positive about the information and the knowledge shared. Care homes said they knew where to go for, and how to access, further advice and guidance if they needed it and said there had not been any gaps in the provision of advice and guidance.
- **Satisfaction.** Overall, care homes had excellent experiences of the level of support provided by their parent company and by Haringey Council, and good experiences of the support provided by NCL CCG (North Central London Clinical Commissioning Group), NHS England, the CQC (Care Quality Commission) and the VCS (Voluntary and Community Sector). There were mixed experiences of the support provided by GPs, and some care homes experienced problems with hospitals.
- **Thinking about the next six months.** The support most needed by care homes in the next three months was access to, and provision of PPE; ongoing Covid-19 briefings and information; advice and guidance; support and training; and access to Covid-19 tests for residents both in the care home and on discharge from hospital. In the next four to six months, care home managers would also value forums so they can provide feedback on what went well and lessons learned; further staff training on pandemics; a review of service user fees - now costs of service provision are rising; more funding for more staff, and greater stability.
- **Thinking beyond the next six months.** There are likely to be significant changes to services in the coming months including social distancing; more checks before admitting new residents; and changes to visiting arrangements.
- **Financial sustainability and viability.** 40% of care homes managers were not sure whether their care home would be financially viable beyond the next 12 months. The main threats were identified as vacancies and low occupancy levels; rising costs of PPE and other equipment; rising staff costs; staff leaving due to high risk and low financial reward; and service user fees no longer covering rising costs.

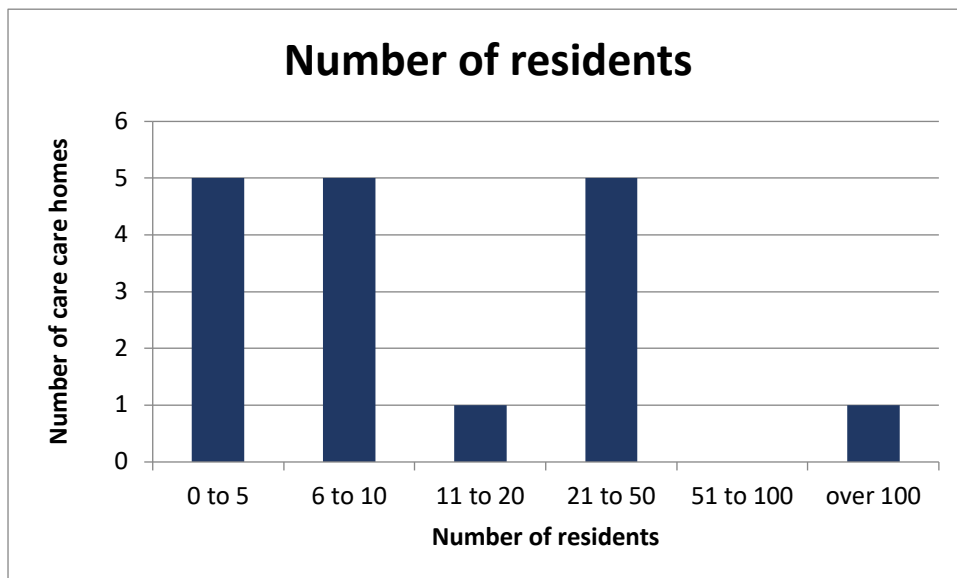
The following sections present the data behind these key findings and explore these issues in more depth.

Findings

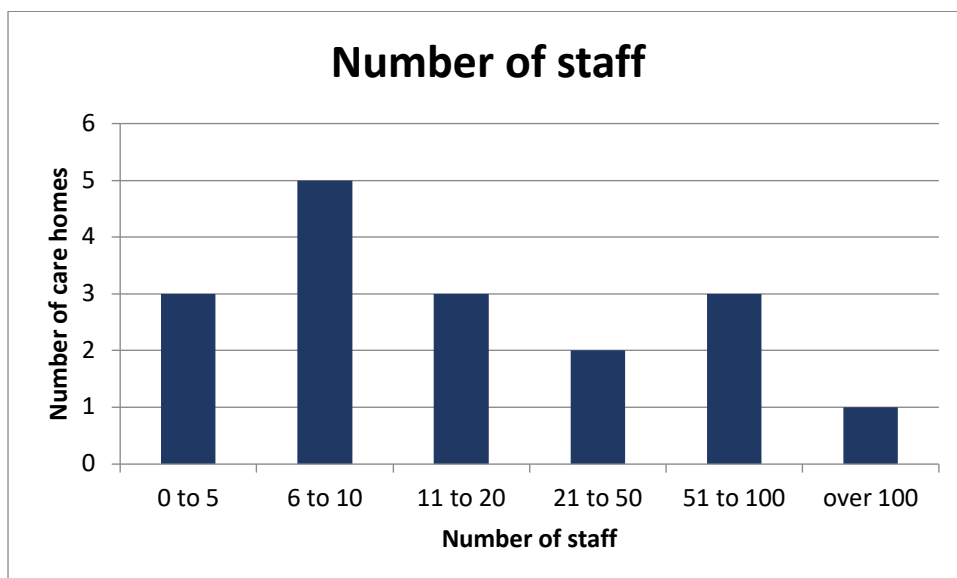
The 17 Haringey care homes who responded to our survey are listed in Appendix A.

We had large and small care homes responding to the survey - the largest had 117 residents and 160 staff, and the smallest two residents and 4 staff.

Number of residents



Number of staff



Covid-19

Around one third of Haringey care homes had had Covid-19 cases amongst their residents and/or staff.

Number of residents who have/have had Covid-19	Number of care homes
0 residents	11
1 to 5 residents	3
6 to 10 residents	2

Number of staff who have/have had Covid-19	Number of care homes
0 staff	10
1 to 5 staff	4
6 to 10 staff	2

Staffing

We asked about the number of staff absent due to the need to self-isolate because they or members of their household had Covid-19 symptoms.

No. of staff absent due to need to self-isolate	Number of care homes
0 staff	4
1 to 5 staff	8
6 to 10 staff	2
Over 10 staff	1

In the last eight weeks, five care homes had experienced significant staffing difficulties because of staff absence, with one care home commenting that at certain times they had had to depend on agency staff.

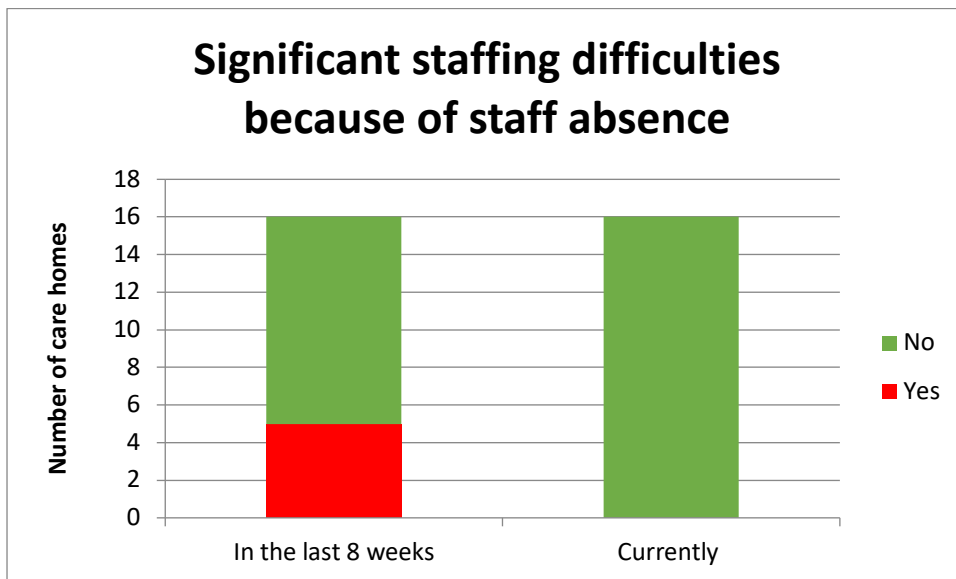
However, **currently** no care homes were experiencing significant staffing difficulties because of staff absence, with one care home commenting the situation had got a lot better.

Only 3 out of 16 care homes thought staff absence would be an ongoing problem.

Of the few who thought staff absence would be an ongoing problem, the plans they had made, and the actions taken to mitigate this included:

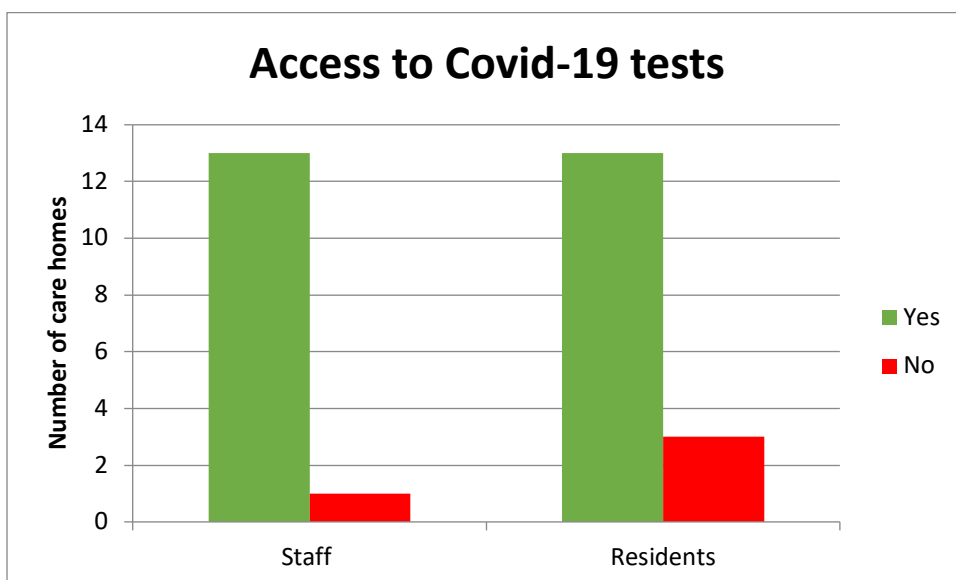
- Using agency staff or bank staff or staff from a pool
- Increasing use of overtime

- Promoting access to Covid-19 tests for staff to minimise incidences of self-isolation
- Recruiting more staff, and
- Suspending annual leave whilst there are ongoing staffing difficulties.



Testing

Most care homes (13 out of 14) said they had access to Covid-19 tests for staff but some care homes (three out of 16) said they could not access Covid-19 tests for their residents.



PPE (Personal Protective Equipment)

All care homes (16 out of 16) said they had been able to provide their staff with sufficient PPE.

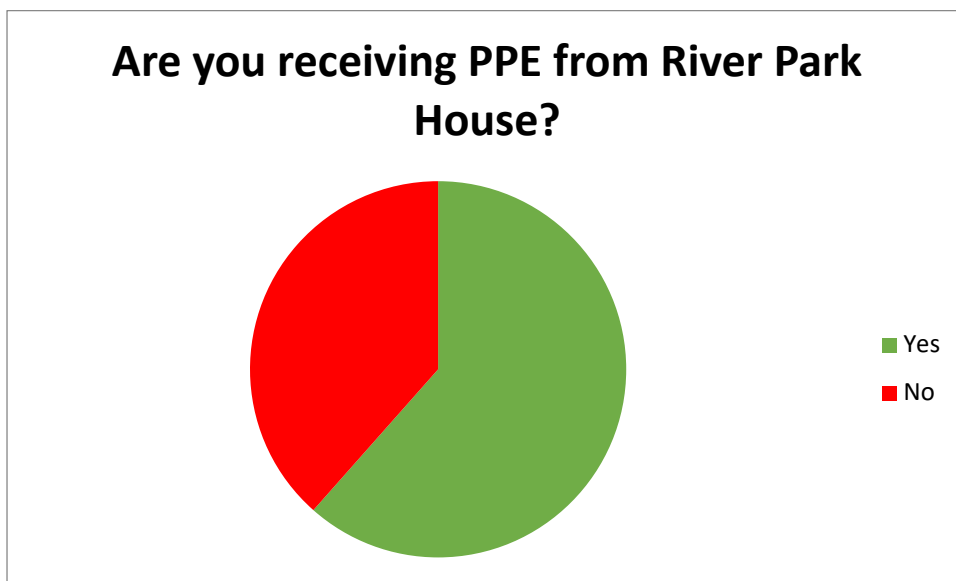
In terms of PPE, there were two particular items consistently mentioned as being in very short supply - face masks (mentioned by five care homes) and hand sanitisers (mentioned by four care homes).

Five out of 16 care homes were worried about future supplies of PPE and running short of PPE going forwards.

Of those who were worried, the plans they had made and the actions they had taken to mitigate this included:

- Identifying additional suppliers and supply chains
- Accessing NHS PPE UK
- Contacting the local authority to access stocks
- Contacting the National Disruption Helpline, and
- Planning ahead and ordering ahead to ensure there is always a good advance level of stock onsite.

Eight out of 13 care homes were receiving PPE from River Park House.



GP services

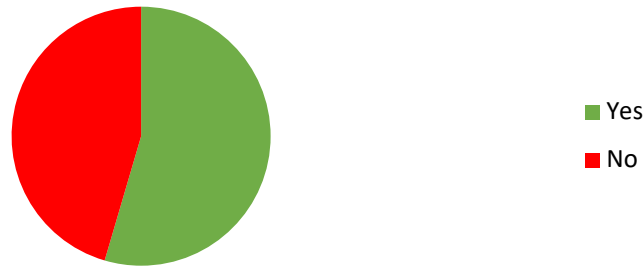
None of the care homes who responded to our survey had GPs still coming into their care homes, and so GP consultations with care home residents were taking place over the phone or by videocall.

Most care homes had had a positive experience, with 13 out of 16 saying they had not encountered any difficulties in accessing GP services for their residents. One care home said long waiting times had been an issue, and two care homes said they had experienced difficulties but did not specify what these were.

Hospital interface

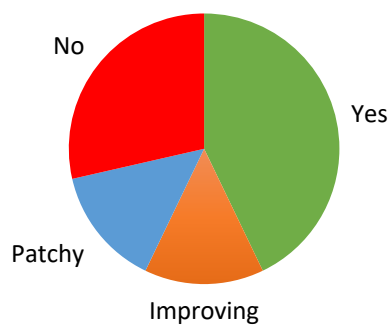
Five of the 11 care homes (45%) who responded to this question said residents coming/returning to their care homes from hospital were still not being tested for Covid-19 before being discharged into their care.

Are residents discharged from hospital now tested for Covid-19 prior to coming/returning to your care home?



In terms of whether good discharge planning and support was in place when residents were coming/returning to care homes from hospital, three care homes responded positively, one care home said this was a lot better now than when the pandemic started, one care home said it was patchy, and two care homes responded negatively.

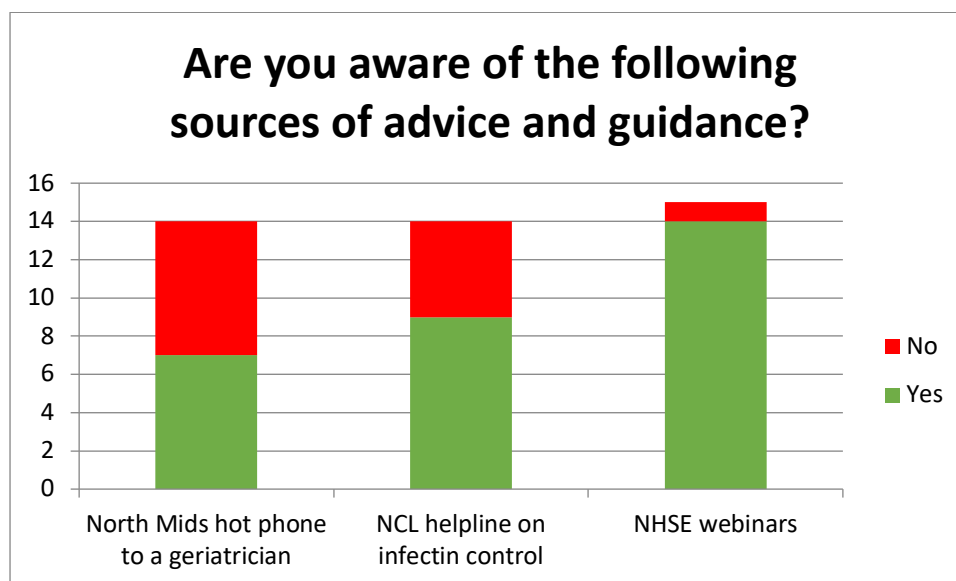
Good discharge planning in place when residents are coming/returning to your care home from hospital?



Advice and guidance

There were differing levels of awareness amongst care homes of the North Middlesex Hospital hot phone to speak to a geriatrician and the North Central London helpline on infection control. Those care homes who were aware of these sources of support had not made use of them, bar one care home.

Virtually all the care homes were aware of the NHS England webinars, had attended them and made use of them, and were very positive about the information and the knowledge shared through these webinars.



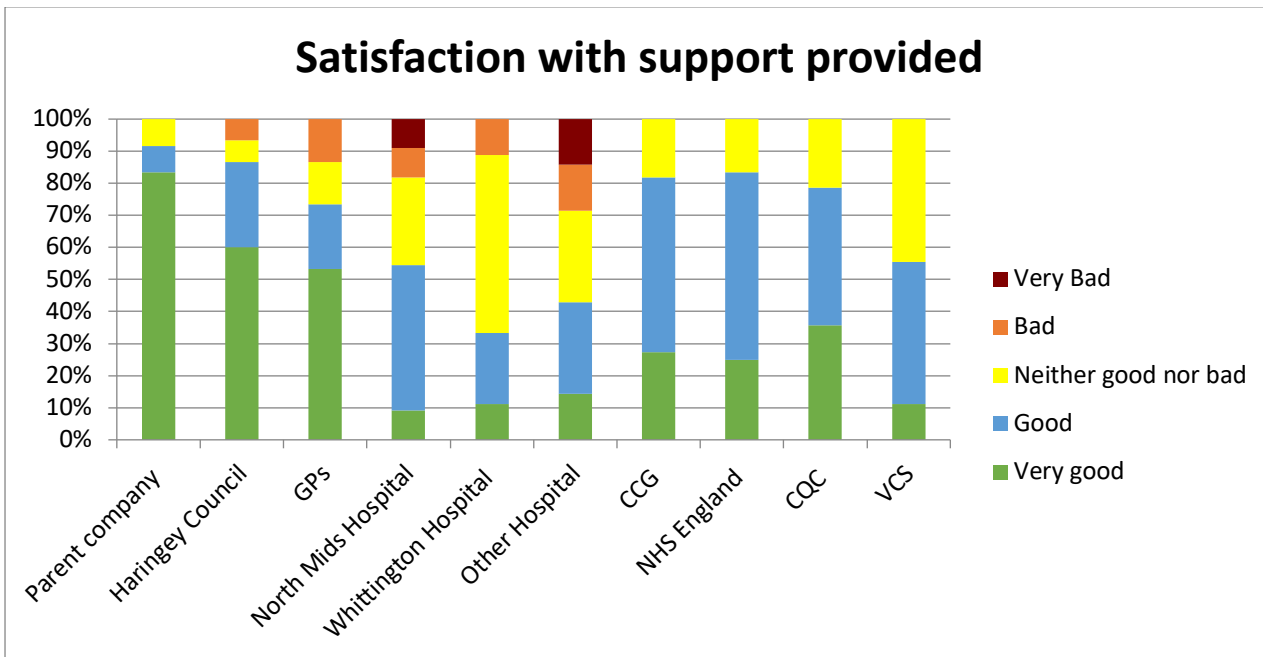
Very encouragingly, all the care homes (15 out of 15) said they knew where to go for, and how to access further advice and guidance if they needed it.

Almost all (13 out of 14) care homes said there had not been any gaps in the provision of advice and guidance, with two care homes specifically commenting on how helpful Haringey Council and the CCG had been in supporting them.

Satisfaction

Rate your experience of the support provided by each of the following organisations:

	Very good	Good	Neither good nor bad	Bad	Very Bad	Not applicable
Parent company	10	1	1	0	0	2
Haringey Council	9	4	1	1	0	0
GPs	8	3	2	2	0	0
North Mid Hospital	1	5	3	1	1	4
Whittington Hospital	1	2	5	1	0	6
Other Hospital	1	2	2	1	1	7
CCG	3	6	2	0	0	3
NHS England	3	7	2	0	0	3
CQC	5	6	3	0	0	1
VCS	1	4	4	0	0	6



Overall, care homes had excellent experiences of the level of support provided by their parent company and by Haringey Council, and good experiences of the support provided by the CCG, NHS England, the CQC and the VCS. There were mixed experiences of the support provided by GPs, and some care homes experienced problems with hospitals.

Thinking about the next six months

We explored what further help and support care homes needed from their Parent Company, the Council, NHS bodies, CQC, VCS etc over the next six months to enable them to provide a good quality of care to their residents.

a) Next three months

The support most needed in the next three months was:

- access to, and provision of, PPE
- ongoing Covid-19 briefings and information
- advice and guidance
- support and training, and
- access to Covid-19 tests for residents both in the care home and on discharge from hospital.

b) Next four to six months

In this later period, as well as the continuing provision of all the support highlighted in the first three months, care home managers would also value:

- forums so they can provide feedback on what went well, and lessons learned
- further staff training on pandemics
- a review of service user fees now costs of service provision are rising
- more funding for more staff, and
- greater stability.

Thinking beyond the next six months

Service changes

Almost all (13 out of 15) care home managers thought their service would have to adapt in the future in the following ways:

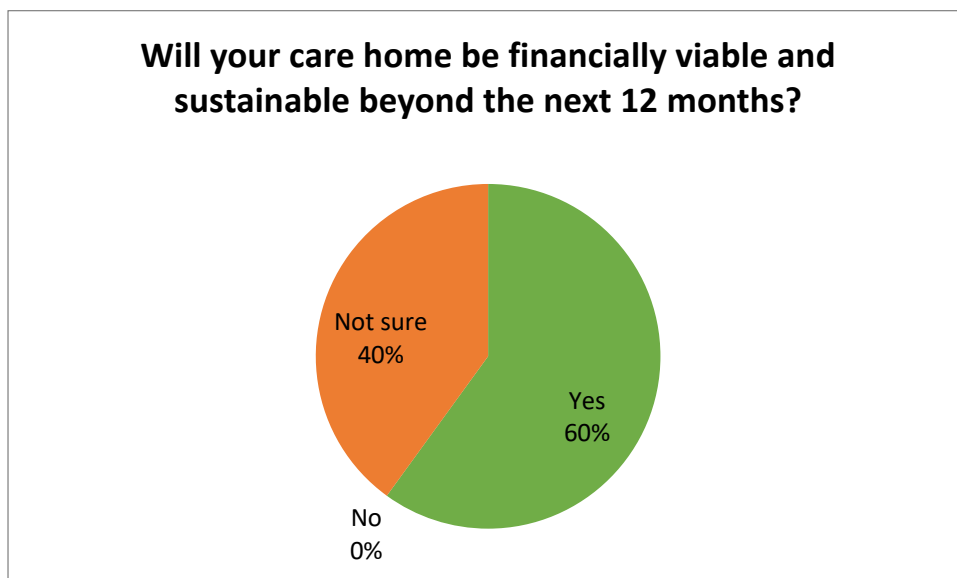
- Ensuring there is always a good supply of PPE in stock onsite
- Tighter infection control
- More frequent cleaning and more emphasis on cleanliness and hygiene
- Social distancing
- Staff training development, especially around IT
- More planning and preparation to deal with future pandemics
- More scrutiny and checks before admitting new residents
- Tighter health and safety standards, and
- Changes to visiting arrangements.

It seems clear that there will be changes to care homes - how they are run and service provision - in the aftermath of Covid-19.

Financial sustainability and viability

Nine out of 15 care home managers felt their care home would be financially viable and sustainable beyond the next 12 months, but six out of 15 (40%) were not sure.

The six care home managers who were not sure whether their care home would be financially viable and sustainable beyond the next 12 months were managing all sizes of care homes (from the largest to the smallest) and represented all the different care settings (nursing home, older people, mental health and learning disability).



For the six care home managers who were not sure about the future financial sustainability of their care home, the main threats to their viability were identified as:

- Vacancies and low occupancy levels due to the aftermath of the virus - both through Covid-19 deaths and the reduced demand for care home places
- Rising costs of PPE
- Rising costs of other equipment
- Rising costs of essentials e.g. food
- Rising staff costs
- Staff leaving due to high risk and low financial reward, and
- Service user fees no longer enough to cover rising costs.

Open question

Finally, we asked care home managers if there was anything else they wanted to tell us about, or feedback to us, and these were their responses:

- Central government grant money is very specific and does not cover money spent to support the care home since late February. It does not allow care homes to support care staff now, unless they are ill. It does not support allowing residents to connect with visitors through different communication channels e.g. smartphones, iPads, laptops. It is not as useful as it could have been because it is so specific in how the money can be used
- Central government did not support the care home sector - there was limited access to Covid-19 tests for staff and residents initially, and residents were discharged from hospital without having to take a Covid-19 test
- Supported living is being ignored even though these settings provide many of the same services as are provided through residential care
- Service user fees need to be uplifted yearly to reflect rising care home costs, and
- Haringey Council has been excellent with providing information, updates, briefing and supplies of PPE.

Conclusion

We would like to say a big **thank you** to all the care home managers who took time out of their very demanding day to complete our survey for us, and provide us with such rich and detailed data on their experiences as Haringey care home managers in the time of Covid-19.

We have collated their responses in this report and are sharing their feedback directly with Haringey Council and its NHS partners so the experiences of Haringey care home managers can inform the Council's strategy and operational plans for dealing with Covid-19 in the months to come.

Appendix A: Survey respondents

17 in total:

Priscilla Wakefield House Nursing Home	Nursing home
The Highgate (partially completed)	Nursing home
The Fer View Residential Care Home	Older people
Spring lane	Older people
The Meadow	Older people
Peregrine House	Older people
Brownlow Residential Care Home	Older people
Earlham House	Mental Health
44 & 60 ChesterfieldGardens N4	Mental Health
Forward support	Mental Health
Choice Support- Endymion Road	Learning disabilities
Unifiedcare ltd	Learning disabilities
Choice Support - Carlingfordford Road	Learning disabilities
Pine House	Learning disabilities
Meridian Walk	Learning disabilities
Bedford Road	Leaning disabilities
HAIL Burghley Road (partially completed)	Learning disabilities

Appendix B: Care home survey

Care homes in the time of Covid-19: Haringey care homes survey

Introduction

In these very challenging times for the social care sector, Healthwatch Haringey wanted to understand and capture the experiences of Haringey care home managers in the time of Covid-19, looking at how well supported they feel and if they are able to access the basics they need to provide a good quality of care to their residents.

We are surveying all care homes in Haringey to ensure their experiences and feedback inform the Borough Partnership's and the Council's strategy and operational plans around Covid-19, so care homes are well supported to meet the challenge of Covid-19 in the months ahead.

We have designed a simple survey to cover the main issues that have been raised directly with us or picked up by the media, and we have provided an open question at the end so you can raise any other issues with us that we have not asked about.

We hope the survey will take less than 15 minutes to complete, and all the information provided will be used to inform the Council's ongoing response to Covid-19.

Name of Care Home:

Number of Residents:

Number of Staff:

Covid-19

1. How many of your residents have/have had Covid-19?
2. How many of your staff have/have had Covid-19?

Staffing

3. How many of your staff have been absent due to the need to self-isolate because they or members of their household have Covid-19 symptoms?
4. Have you encountered significant staffing difficulties because of staff absence?:
 - a) In the last eight weeks
 - b) Currently
5. Do you think staff absence will be an ongoing problem? Y/N
If yes, what plans have you made/action have you taken to mitigate this?

Testing

6. Are your residents able to access tests for Covid-19?
7. Are your staff able to access tests for Covid-19?

PPE

8. Have you been able to provide your staff with sufficient PPE?
9. If there has been a shortage of PPE, does that relate to a particular item of PPE or is it across the board?
10. Are you worried about future supplies of PPE? Ie about running short of PPE?
11. If yes, what plans have you made/action have you taken to mitigate this?
12. Are you receiving PPE from River Park House?

GP services

13. Do GPs still come into your care home?
14. If no, how are GP services delivered to your residents and are you content with the process?
15. Have you encountered any difficulties in accessing GP services for your residents?

Hospital interface

16. Are residents coming/returning to your care home from hospital now tested for Covid-19 before they are discharged into your care?
17. Is good discharge planning and support in place when residents are coming/returning to your care home from hospital?

Advice and guidance

18. Are you aware of the North Mid Hospital hot phone to speak to a geriatrician? Have you used it and what was your experience?
19. Are you aware of the NCL helpline on infection control? Have you used it and what was your experience?
20. Are you aware of the NHSE webinars? Have you attended and what was your experience?
21. Do you know where to go for, and how to access, further advice and guidance if you need it?
22. Have there been any gaps in the provision of advice and guidance? Ie what do you need that you have not received?

Satisfaction

23. Rate your experience of the support provided by each of the following organisations:

Organisation	Very good	Good	Neither good nor bad	Bad	Very Bad	Not applicable
Your parent company						
Haringey Council						
GPs						
North Mid Hospital						

Thank you for sharing your experiences.

We will be collating this information across care homes in Haringey and sharing this feedback directly with Haringey Council to inform the Council's strategy and operational plans for dealing with Covid-19.