



Keeping care home residents connected & engaged during Covid-19

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Background

Healthwatch Wiltshire is the independent champion for people using health and care services in Wiltshire. We listen to what people like about services and what they think could be improved and share their views with those who have the power to make change happen.

During the Covid-19 pandemic care homes have faced considerable challenges and there has understandably been a high focus on preventing the spread of the virus. However, there is also recognition that the wider wellbeing of residents is also very important.

As part of our engagement with local people during the pandemic, we were told of the commitment of care home staff to caring for their residents and the strong relationships they have formed with them, and we received feedback about some of the innovative ways that care homes were keeping their residents in touch.

We wanted to find out more about this and to highlight areas of good practice we found:

What we did

We gathered this information from several sources:

- Responses to our Covid-19 survey about local people's experiences.
- Interviews with care home managers and staff.
- Interviews with relatives of people in care homes.
- Comments and feedback shared by phone or email with our Healthwatch Hub advice and information team.

We looked at all this information and from it, identified a range of ways that care homes were supporting residents to be active and remain connected during the pandemic, that we thought represented good practice and would support residents' wellbeing.

The examples of good practice identified have been gathered from in-depth interviews relating to three different care homes and comments about a further five homes.

What people told us

The challenges

Here are some of the challenges care home staff told us about in keeping residents active and engaged:

- Restrictions to visits to care homes and the impact on residents and their families.
- A need to rapidly introduce the use of technology to support contact, and for the equipment and training required for this both for care homes and relatives.
- Timings of virtual visits: organising evening and weekend supported calls when there may be less staff available to support these.
- Changes associated with ceasing existing arrangements for local community involvement in care homes.
- Changes to activities: the need to rapidly change many of the activities provided, including ceasing 'outside entertainers' coming into homes, and a shift away from group activities to more individual ones.
- Keeping residents occupied who needed to self-isolate.
- Once care home visits were permitted, ensuring that relatives knew how to arrange visits and staff managed the demand for visiting slots with availability.

Initiatives in response to these challenges

Here are some of the examples of good practice we found that sought to overcome these challenges. They concern keeping residents in touch with family and friends, involvement in activities and connection with the wider community.

1. Keeping residents in touch with families and friends

Phone calls

We were told that regular phone calls worked well for many people. Care homes told us that there had been an increase in residents choosing to have their own phone installed in their rooms and that the home had facilitated this. A relative told us that they spoke on the phone every day to their loved one.

Families also told us that being kept informed by phone by care home staff was valued, particularly during the early days of lockdown before other ways of staying connected were put in place.

My mum went into care just as lockdown happened, therefore we were not able to help settle her in. Although normal activities and visits were stopped the care home was great at informing us of what was happening and keeping mum active and well.

Video calls

People spoke of a wide range of video calls that were being used including FaceTime, Zoom, Skype and Microsoft Teams. We were told that these worked well for many people and that seeing the person provided reassurance to both parties that they were well. Visual recognition of a loved one was also helpful for some people who were living with dementia and people with other communication needs.

Care homes told us about the initiatives put in place to ensure that these were available to people who wanted them:

We set up Skype and Zoom calls with residents' friends and families and made sure everyone could have a call at least once a week... We also purchased more iPads.

We are aiming for at least weekly contact so that relatives can feel confident that their loved one is OK. We are doing up 4 or 5 Skype calls a day. We can book in a calendar slot for people.

We found people's families were really appreciative, and we listened to their views, for example by extending the time of the Zoom calls and offering them in the evenings.

We had a Skype call with a lady and her daughter who lives in America which was brilliant. We are promoting this now with people who can't visit often, and this is a regular thing that we can use in the future. We didn't do this much before, so this has helped us progress.

George used to keep in touch regularly by phone anyway and we used FaceTime so we could see each other as I was 'shielding' and so couldn't do any window visits.

Window visits

Care homes told us that they would try and arrange 'window visits' (visits at windows where the visitor doesn't enter the care home) and that these were particularly helpful where residents or their relatives were becoming very upset or anxious and if virtual visits weren't working for them.

Where we have been worried about the welfare of a resident, we have tried to arrange a Skype visit. If that wasn't possible, we have facilitated a visit through a window. We were worried that those involved would want to touch but it has worked well. It has helped residents settle.

Family contact at end of life

The care homes we spoke to said that they were committed to ensuring that residents' families were able to visit where they were at the end of life, and that they put in place arrangements for this to happen safely.

End of life visits have been permitted throughout. For this, visits are by arrangement and relatives wash their hands when they arrive and put on full PPE. Some have just wanted to come to say goodbye and some have stayed with their relatives to be there at the time. We have been able to manage this.

If residents are at the end of their lives, visits can be as often and as long as they wish.

Restarting visits at the end of lockdown

We were told of the arrangements that were made by care homes to restart visits. The homes we spoke to said that it had been important to communicate these plans promptly and clearly to residents' families to avoid anxiety and so that they were clear about the process for visiting. We were told about arrangements for outside visits and, later, inside visits.

We have had a discussion and agreed a date when we feel it's safe to start having family visitors. We have started to make arrangements for this. There will be marquees in the garden and a private area inside the home.

We have purchased a number of internal screens which can be tall or wide and can be used now that families can visit. We are making sure that people who want to visit can come at least once a week for 40 minutes and this is a pre-booked visit and there is a dedicated visiting diary for this. Visitors can enter a visitor's lounge from the outside and don't need to walk through the home. The resident can enter from inside and there is a screen in between. The room is fully sanitized between each visit.

2. Involvement in activities

Care homes told us that another important way of supporting the wellbeing of residents during lockdown was to try to provide activities that residents could be involved in. We were told that although the nature of some of their activities needed to change, it was important to continue to try to provide activities that residents could be involved in.

We were told that large group activities were stopped and there was a greater emphasis on 1-1 activities, and later in small groups. We were told that outside entertainers were not able to come into homes, but several care homes told us that they arranged performances outside the home that could be viewed through the windows and that these were enjoyed by residents.

Our activities have changed as they aren't shared across the units at the home at the moment.

We have continued with activities, for example seated exercises and reminiscence. These were 1-1 initially but we are now able to do them in small groups but socially distanced.

We have concentrated on smaller group activities. We have put up a 'wish tree' on each unit and residents have all been able to put a wish on this. We have been working through these. One resident said she wanted proper fish and chip shop fish and chips, so we arranged for a delivery and gave them to her in paper. Someone wanted to bake a cake and so we arranged for them to do this.

We are having a virtual pet show and bringing in photos of our pets to enter various categories.

We are doing some car park entertainment with entertainers and a barbecue in the car park. We will try to get as many residents out as possible safely and will make sure that others can see it through the window and food may be taken to them.

We have been able to have entertainers outside in a gazebo that residents can watch through the windows. We also had VE day celebrations but socially distanced.

It has helped keep people's mood and morale up.

We have not been able to have our usual hairdresser as she was visiting other clients outside the home and we felt it too much of a risk. However, some of our staff members have been doing this and have developed their hairdressing skills!

3. Staying connected with the wider community

The care homes we heard from said that it was important that they kept in touch with the local community during lockdown. They highlighted that residents found it difficult where they had previously been used to the local community coming into the home and being able to go out in their communities.

We were told how care homes and community members had initiated actions to try and promote a sense of community involvement. Penpal letters were something that several care homes mentioned as being valued by residents as they provided interest and a feeling of being in touch by others.

Care homes also told us that they had received donations from local groups and businesses and that these were appreciated by both residents and the staff group.

One care home told us of a resident who wanted to share their views about going into hospital during the pandemic and how they had supported them to do this. They said that they felt that this was an important way to ensure that care home residents could still have a voice during lockdown.

One of our residents wanted to share their views about going into hospital and advance planning. We supported her to do this. She has been on two radio stations, in about three newspapers explaining her decisions and why she made them.

Although the local community have not been able to visit the home as they may have done previously, we have tried to keep up contact. We've connected with schools and some children have become penpals and residents have enjoyed writing back.

Waitrose and the local supermarkets have donated gifts – we felt that the local community were there for us. Another group supplied face coverings for the staff to use outside of work.

A lady contacted us and said she had some children who wanted to write penpal letters. She started a programme called 'My Best Friend' and this has expanded. We have had many letters from them. One little girl told the residents about her dog, and they now can't wait to meet him. We always make sure a reply gets sent back. It's been great to see the interaction between young and old. We have also had letters from police cadets.

Conclusions & recommendations

It is evident that actions that needed to be taken by care homes to keep their residents as safe as possible had a profound effect on the activities and contact that care home residents would usually experience.

Despite these challenging circumstances, this report identifies lots of good practice and innovation in the way care homes have kept residents active, connected and in touch with people during the Covid-19 pandemic.

It is important to recognise the positive impact of these innovations, and the commitment shown by care home staff to support the wellbeing of residents.

We hope that by sharing this report, different ideas and innovations can be shared and may be adopted by other care homes.

The use of virtual technology to keep people in touch was clearly beneficial to many people and, in some cases, this was used to put people back in touch with relatives who they had not had contact with for some time due to distance. We would recommend that this is something care homes continue in the future where people are unable to visit in person.

Thank you

We are grateful to Wiltshire Care Partnership for sharing information about this project to care homes, and to the care home managers and staff who took the time to speak to us. Thanks to our volunteers who supported us with the interviews. Finally, thanks to the many local people who shared their views and experiences with us at this difficult time.



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