



Virtual Care Home Engagement Project



Report

Beverley Parklands

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Contents

Introduction.....

Methodology.....

Manager section.....

Staff section.....

Relatives section.....

Residents section.....

Conclusion.....

Recommendations.....

Acknowledges.....

Distribution.....

What is Healthwatch?

Healthwatch is the independent champion for people who use health and social care services which exist to make sure that people are at the heart of care.

We listen to what people like about services and what could be improved then share their views with those with the power to make change happen. Helping people find the information they need about services in their area is another of our priorities.

In summary, Healthwatch's main aims are to:

- Help people find out about local care
- Listen to what people think of services
- Help improve the quality of services by letting those running services and the government know what people want from care
- Encourage people running services to involve people in changes to care

Healthwatch Humber Network

Healthwatch North Lincolnshire, North East Lincolnshire, Hull and East Riding have come together to develop the Healthwatch Humber virtual care home engagement project to understand the experiences of residents, families, friends and carers in care homes across the Humber region.

What is Virtual Engagement?

Due to the corona virus pandemic, the nature of engagement has had to shift from the typical physical engagement to online 'virtual' engagement. We did not want to lose the opportunity to engage with care homes in this unprecedented time and wanted to have the voice of the resident heard. This meant that all engagement with Beverley Parklands occurred via online methods. The promotional activity Healthwatch undertook to advertise the enter and view and to gain questionnaire responses, was done via the homes and Healthwatch's social media platforms. When the enter and view took place, all the interviews with staff, residents and the registered manager were completed using online platforms such as Skype and Zoom.

Overview/Background

Beverley Parklands is a 'care home' for individuals aged 50 and over, and is registered with the CQC to provide care for dementia, mental health conditions, old age, physical disability and sensory impairment.

Located in the Market town of Beverley in the East Riding of Yorkshire and is managed by Yorkcare Homes Ltd. There are currently has 64 residents, soon to be 66 and 102 staff, including bank staff. Located over four floors, the Kitchen and laundry are on top floor, this will also eventually be independent living space for around 10 people.

Beverley Parklands is rated outstanding by the CQC.

Methodology

We began engagement with Beverley Parklands on the week commencing the 25th of January 2021. This involved advertising Healthwatch's weeklong 'visit' on all forms of social media and Beverley Parklands Facebook page, making relatives/friends aware that we would be visiting and circulating our questionnaires so that they would have the opportunity to give us their views.

At the same time we informed Beverley Parklands that we would be conducting a virtual engagement with them in two weeks' time. This consisted of a letter for the manager explaining the days and times of the engagement, posters and flyers to distribute to staff and residents, advertising the purpose of our visit, and paper questionnaires and freepost envelopes that could be completed by staff and residents if they chose to.

Staff were then able to contact our volunteer coordinator to book an appointment to discuss their experiences at a mutually convenient time during the week long engagement.

Interview with the Manager

The Registered Manager of Beverley Parklands is Miss Robyn Cross. She has been manager for two years

Outbreak management (including testing)

The home took the decision to close to external visits on 15th March 2020, before the local authority instructed to do so. The residents and families were all well informed of this decision and supported the implementation of these restrictions earlier than the National instructed.

There are three units that are currently operating, pre covid, staff worked between units to provide a diverse staffing team, but each unit is now self contained. It not only consists of the same care team but also domestic and kitchen assistants. Each unit enter and exit the building at different points to avoid a cross over between units to prevent the risk of spreading infection.

Social distancing was implemented throughout the home with the furniture being re-arranged to ensure social distancing as much as possible with regards to the residents. Signage was advertised throughout the home as visual reminders for the staffing teams

and staff breaks were allocated to reduce the level of staff on breaks at any one time. To comply with the unit lockdowns a designated break area was allocated to each unit.

Facial coverings were implemented at Beverley Parklands on 7th April 2020 which was approx. 2 weeks before the instruction came from the local authority.

The local authority has also been very supportive throughout the pandemic with daily support calls, emails and regular provider calls which allows for different providers to openly discuss the measures in place and proposed future measures. The local infection control team have been in regular contact with the home throughout the pandemic to offer advice and guidance and have also been a fundamental tool to utilise when implementing new practice or developing visual prompts for staff such as PPE posters, Donning and Doffing guidance.

Robyn explained that the home tried to further limit the spread of infection in various ways. For instance, the main kitchen is on the top floor of the home, and each floor has its own servery/mini kitchen and their own kitchen assistant. Trolleys are sent down from the main kitchen in the lift and each floor's kitchen assistant then takes the meals to that floor's servery. They have changed one of the downstairs toilets into a donning station. When staff come in they get changed into their tunics and PPE in there. Robyn and her deputy Tracey used to wear office clothes, now they always get changed into tunics, which are safer and more hygienic if they need to cover care on the floor. Robyn and her deputy always cover each other so there is always a Manager available.

An additional cleaning schedule has been devised for high-risk areas that is completed daily by the team. All staff members attend work in their own clothes with freshly laundered uniform in a bag and get changed in the designated changing rooms. All deliveries to the home are sanitised and isolated before going onto a unit to prevent the risk of spreading infection. If a resident test positive for COVID 19 - the residents who have potentially been in close proximity of the positive case are tracked and placed in precautionary isolation for 14 days as an additional measure to prevent the risk of spreading infection.

When looking at the testing element of outbreak control, Robyn explained that staff are undergoing routine testing for covid, having two Lateral Flow Device tests (LFD) and one polymerase chain reaction (PCR) test weekly. The LFD tests take place when the staff attend their shift, and the PCR test are undertaken when staff attend their designated unit and obtain a test supported by a member of the management team. Staff were testing every Wednesday and initially it was taking until the following Monday to obtain the results. This process has improved and results are received by the Friday. The staff sign a document to consent to Robyn receiving an email copy of the results as an additional safeguard. Robyn explains that it has been a concern that it takes 2 days to get the results back but since December they've had lateral flow tests so they can now do lateral flow tests 2 x weekly as well as the swab test on Wednesday as a back up. Other than this issue, Robyn explains that they have not experienced any real difficulties with the testing process. Though Robyn states that it is time consuming in a role that is already extremely demanding.

All staff members have received the antibody test and the results were negative.

In the case that staff members tested positive for the virus, Robyn states that staff members are advised in line with guidance on the length of their isolation period and receive regular welfare calls from a member of the management team throughout the

isolation period to ensure they wellbeing. Staff members are offered the opportunity to take the isolation period as annual leave as oppose to SSP to reduce the worries related with income. Staff members are also offered isolation packs to be delivered to their home addresses which consists of food, drink, toiletries and other essential items.

Positive cases amongst the staffing team are recorded on the capacity tracker which is updated daily and discussed with the local infection control team and local authority. An internal coronavirus update document is updated daily with figures related to infection rates amongst both staff and residents and shared with the head office team for further oversight and support measures if needed.

Residents are also routinely tested for COVID, for the residents who have full capacity and have consented to receive regular tests this is completed every 28 days. Residents who lack capacity, testing is only completed if required and in their best interests. Testing is carried out on the residents by a member of the management team or the unit leads who work on the units.

When asked if there was any difficulties in testing the residents, Robyn stated that testing the residents has not been a pleasant process and with people living with dementia can be a trigger for them to present with behaviours that challenge. Therefore when the residents require testing this is completed by two staff members so one person can complete the test and the other staff member can support the resident and offer reassurances.

Robyn explained that Beverley Parklands had an outbreak on the first floor at the start of the pandemic. Then a couple of other outbreaks of just one or two residents. At Christmas they had an outbreak on the ground floor with 8 people infected. Overall, in total Robyn has had 16 staff members with the virus and 14 residents.

Visiting

The restrictions were communicated to both residents and relatives from a management level whether this be from Robyn or from the head office team. Families are provided with routine regular emails from the operational director which provides the most recent information regarding the pandemic and measures in place to support and safeguard the residents of the home. Any relatives who do not have access to the use of emails are contacted direct by a member of the management team within the home to update them accordingly. Residents are well informed of the changes to practice and most recent updates regarding COVID 19 via a monthly resident's memo which provides them with all the relevant information they require. The memo actively encourages residents to discuss any questions they may have to ensure that they feel supported and well informed. All residents and relatives have responded positively to the measures implemented to protect themselves and their loved ones from COVID 19. Robyn and team have received great support and praise for the management of the virus which continues.

Families are kept well informed via email, telephone calls, social media etc. Each month one resident from each unit is 'resident of the day' and on that day families are contacted to discuss their loved ones care and support or any concerns they may have. Care reviews have been completed with family members via ZOOM etc throughout the pandemic. All families are able to contact the home at any point and all family members receive email updates if they wish to do so. The only time the home would have one point of contact is when they are suffering an outbreak and the managers will ring one family member for

each resident to advise them of the outbreak and ask that they pass on the message to others.

“In light of the previous various visiting restrictions, to maintain social contact with family and friends for our resident group the home implemented a social call appointment system in March 2020 which consists of skype, zoom and Facebook messenger calls. They have also included the homes Facebook page to share pictures of activities, events and share stories throughout the pandemic to allow relatives to view these and feel at ease that their loved ones are happy and safe”

In late summer 2020 they were able to reinstate visiting again.

‘We are the first residential home in the country to develop a safe, air tight visiting area for the residents in order for them to continue their much-missed contact with their loved ones. ‘

The location of the visiting room was considered carefully as this would mean residents and a staff member from another unit entering a different lockdown area therefore with this in mind the visiting room was created in the bedroom nearest to the lift to reduce the travel within the unit.

Shortly after the opening of the visiting room, the home created a ‘safe zone’ in the garden area that is also used to promote contact with loved ones throughout the summer months. Again, the planning of this area was carefully considered and areas of the garden are cornered off to allow a pathway for visitors to use which will not interfere with the pathways used by the residents who access the garden area independently. The visiting area was measured out to provide a 2-metre distance and a fence between the resident and family members.

Looking at how visiting is taking place in light of the various stages of restrictions and the latest national lockdown, Robyn explained that when we went into tier 2 there was a blanket instruction from Government that meant that they couldn’t use their visiting room as it was indoors. However the home contested this and their Local MP supported them and this rule was overturned in a week and visits allowed again. They were able to continue using their visiting room apart from when the home had an outbreak on the ground floor.

There are separate risk assessments for the visiting room, garden visits and another risk assessment for if relatives are coming in for end of life visits.

Wellbeing

Robyn explained that the restrictions imposed had understandably caused an “emotional rollercoaster” at times, however this was recognised by the team and support has been sought to lift their spirits as much as possible. All residents have a coronavirus risk assessment and care plan in place which raises awareness for staff to enable them to identify signs of low mood etc.

Previous to COVID, activities offered in the home were very person- centered and the weekly planner is created in light of any resident feedback. Residents are included in events such as recruitment and polls are completed to obtain feedback and wishes. However, this did have to understandably change somewhat due to restrictions as not everything is available and not all activities can be carried out with social distancing. To comply with the lockdown measures in place, each unit is allocated their individual

activity co-ordinator who provides a person-centred weekly activity planner which is devised based on resident feedback to stimulate the residents as much as possible to reduce the risk of COVID 19 impacting on resident's health. Robyn makes sure everyone is socially distanced and there are activities like chair based balloon tennis, crafts in small groups, armchair exercises etc. The residents also like to get involved with making videos for their Facebook page. The activity and care team have also implemented one to one time into their daily routine to ensure all residents are receiving quality time and contact. Residents have received external support from the local social prescriber and visits have been arranged in the visiting room to allow residents to discuss any concerns they may have confidentially.

Looking at staff wellbeing, Robyn explained that the pandemic has impacted of staff members wellbeing in different ways, with some staff members not suffering any impact and others have struggled with their own anxieties regarding the virus.

“Staff have received routine and any necessary additional office-based supervisions throughout the pandemic to allow them time to sit and discuss any concerns they may have. Staff members considered vulnerable to the virus follow a robust risk assessment to safeguard them from the impact of COVID 19. A member of the management team is on call 7 days per week to allow staff access should they require further advice or support”

Robyn states that the management of a care home has been very demanding throughout the pandemic, with the increased changes to practice and having to imbed the changes to ways of working almost instantly to safeguard residents and staff. Robyn's role has become more demanding due to spending more time working alongside the team and also keeping up to date with her own role and increased number of audits in relation to COVID 19. However, she states that this has also been a very rewarding time to see a staffing team adapt quickly, show bravery and has certainly enhanced teamwork. The team have cared for many residents who have contracted the virus and been considered by health care professional as palliative/end of life due to COVID 19 who have all pulled through and returned to their baseline health and wellbeing. For Robyn this has felt such a reward and really is a testament to the care and support provided by the Home

Changes in care and access to services

Robyn explains that all the residents have been supported to access their usual healthcare services through a mix of virtual and face to face appointments and robust risk assessments are in place to support the continuation of physiotherapy and foot health within the home.

When asked if Robyn experienced any difficulties when obtaining medical appointments, she explained that when they had an outbreak over the Christmas period it took time to contact services regarding the very poorly residents who needed oxygen. Robyn stated that they had one particularly poorly resident who could have gone to hospital but they had capacity and were very clear that they didn't want to go. However, they needed oxygen so they could stay at The Home in accordance with their wishes. Robyn tried to contact the Frailty Team and was on hold for 2 hours so tried the out of hours GP service who just said that they should see the residents own GP in the morning. In the end Robyn called an ambulance to get what the resident needed.

“The Ambulance team also tried the Frailty Team but to no avail so they rang Swinemoor community hospital and there was a brilliant doctor there who helped us”

Despite this difficult experience, Robyn explains that she believes this isn't any services fault, it's just that services are stretched to their limits.

Robyn said that some of their residents were admitted to hospital over the last eight months, and all were tested for COVID-19 before discharge. Robyn states that despite the impact of the pandemic, she did not have any issues with the discharge process and believes that hospitals have tried their very best throughout the pandemic.

Robyn explained that they did not experience any capacity issues over the last eight months.

Support - from LA etc

The support received has been consistent throughout the pandemic and the Local authority and CCG provided additional calls throughout an outbreak, In times of outbreak, guidance of testing has been obtained from the local public health team. The support provided by the head office team with the most up to date information allowed for Robyn to feel prepared for managing and support both residents and staff with facing the pandemic and PPE has never been a cause for concern.

When asked how the support could have been improved, Robyn explained that in the event of an outbreak, the managers are inundated with calls from local authority, public health and infection control teams all asking the same questions which is information that can be found on the capacity tracker. These calls can be lengthy and take the managers away from the continuous oversight required when managing an outbreak. On occasions, Robyn have been contacted the next day and had to review all the information again as the person she had spoken to the day before had to update their spreadsheets or communicated the changes. For outbreak purposes, it would help if all parties had access to a shared data base to reduce the number of calls and continuous repetition of the same information.

Overall Robyn felt as prepared as she could possibly have been in order to support both the residents and staffing team. She explains that this was made a lot easier by the support given to her by the head office team, who have been very informative throughout the pandemic providing not only managers but the staffing teams, families and residents with the most recent information regarding COVID 19. Robyn explains that they were very fortunate that PPE has never been a cause for concern even in the early days of the pandemic as Yorkare Homes were very proactive before cases in England were detected and began the process of ordering in the PPE to store at Head Office in case this was to be required at either home. The team also made contact with suppliers to secure weekly deliveries of all PPE required before the limitations on orders was put into place. A Coronavirus Management policy was devised to support the business continuity throughout the pandemic which has been reviewed and updated accordingly with the changes to working throughout the pandemic. This policy is accessible across the home to allow the staffing team to use this as a tool should they require and all staff read and signed the policy to confirm awareness.

Concluding comments

If there were any practices that she would like to keep 'post COVID', it would be having each unit of the home with its own staffing team, as opposed to staff working amongst all

units. This works better as they get to know the residents on their floor better and so have more insight into residents' needs. Also having staff members who are on call every day of the year has worked well and will keep this as it makes it easier to cover staff absences. Also the increased use of tech like Zoom, Skype and Facebook for relatives to stay in touch with their loved ones has worked well, especially on The Haven Unit. Robyn said that she also noticed the team work has been really excellent throughout Covid. Robyn said she has learnt a lot about the resilience of the residents and staff at Beverley Parklands throughout the last 8 months

“The staff have all supported each other brilliantly, and has been a good team building exercise. I am proud of how quickly the home has adapted and thankful to all the residents and families for their understanding”

Observation

Using a mobile phone(?) volunteer Co-ordinator Caroline and Volunteer Denise were shown around the ground floor of the Home by Alison the Activities Coordinator.

There is a car park at the front of Beverley Parklands. The home is an impressive new building with a good sized parking area at the front and large balcony on the second floor.

In the covered entrance there are wipes, alcohol gel and a machine that can read your temperature. There are clear instructions of what to do before you ring to enter the building. There is also a visitors book to sign.

As you enter the home there is a reception area on the right hand side. The Manager's office is next to this.

On the left of the entrance is a TV lounge.

There is a light airy lounge off the foyer of the building with a bar and an area for residents to sit in. There were also seats in the foyer so that the residents can sit there and see all the comings and goings around them. There is a lift in the foyer. There is another large lounge area further into the ground floor which is usually used for activities as there is less background noise here, making it easier for the residents to hear.

The dining room is large and airy with the tables and chairs set out to allow for social distancing between residents. Alison told us that residents can choose to eat in the dining room or elsewhere. She said they had not had to do more than one sitting as some residents chose to eat in the dining room at lunch time and others in the evening.

There is a notice board on each floor with easy read cards so that the residents can see which activities are on offer that day.

The main kitchen and laundry are upstairs. On each floor there is a servery/mini kitchen and a sluice room where laundry is stored before it is taken up to the top floor.

There are 2 toilets on the ground floor. One of these has been turned into a “donning station” for the staff to get changed into their tunics and PPE when they come in. Next door to the toilets there is a large bathroom with a bath and shower for assisted bathing bath and a toilet.

Near to the lift Alison showed us the visiting room. This room is a converted bedroom with a Perspex wall and an intercom system. This room was chosen as there is an external door for relatives and friends to enter through and a separate entrance for the resident. This room is also near the lift so that residents from the upstairs units can access it more easily.

There are 3 corridors leading off the foyer area, with bedrooms and a staircase at the end of each. In total there are 26 bedrooms on the ground floor. Each has its own en-suite with toilet, basin and shower. Alison said most residents liked a shower but there is also a bath on the ground floor for those who prefer it. All bedrooms have external doors. Some have a little patio area looking out onto the garden at the back.

There is a large garden at the back of the home with a bowling green, raised beds, paved walk ways and areas for sitting. There is also a large pergola at the back of the garden where garden visits take place.

From the garden you can see that the residents on the first floor have a large veranda so that they can come out into the fresh air and see the garden if they are unable to come downstairs.

Alison told us that upstairs there is a street scene with old fashioned shop fronts. There is also a cinema room. They have around 100 films and cinema seats so it is like a proper cinema experience. On the second floor there is a charity shop which is full of things that people have donated to the home. Alison told us that some of the residents liked to go in here to tidy and reorganise the shop.

What did staff say

The staff we spoke to have worked at Home for a variation of time. The shortest being five months and the longest being over three years.

The majority of staff answered that they enjoyed working at Beverley Parklands, citing a positive, friendly and family like working environment and being supported by their fellow staff and management. Staff said they enjoy working with the residents, and like the person centered approach that the home takes to encourage residents to live full and happy lives.

“I’ve been here since it has opened and find it very friendly and very supportive”

“High quality care and not a clinical atmosphere warm and friendly with residents needs tailored to them individually”

“I love the home and the residents. My role is really rewarding and it’s like a big family”

Outbreak management (including testing)

The staff explained that there have been many changes put in place to safeguard both the staffing team and the residents. Some of these include: the home putting in place a hand washing station both covid specific and for general hand washing, the PPE stocks being full and training put in place in order to use it effectively, temperatures taken twice daily, extra sanitizer stations and rigorous cleaning procedures. Posters were also put around the

home to remind staff and residents of the hand washing procedures. Additionally, staff were not to come to work or leave in their uniform and staff using different entrances to other floors in the home.

Staff explained that they were always communicated with and notified about current regulations, receiving regular emails from management explaining changes being put into place

The majority of staff claimed that there were no problems obtaining supplies. Staff mostly agreed that they felt that enough was done in order to make them feel safe and despite the fact that the home had an outbreak, staff still felt safe and supported. This was due to the regular testing, the PPE in place and the management keeping staff up to date with information.

All staff answered that they had been tested for COVID, and six staff members had also received an antibody test. Staff received their COVID tests 2-3 times a week, explaining that the home has all staff tested every Wednesday, and a rapid test done every two shifts that the staff work. None of the staff we spoke to had experienced any problems with the testing.

Staff explained that the procedure if they tested positive for COVID-19 would be to inform the management team as soon as possible and immediately self isolate at home for 10 days to two weeks. For staff that did test positive, management provided Welfare phone calls, food parcels from Yorkare Homes Head Office, and conducted return to work interviews.

Visiting

Staff explained that when they first went into lockdown in February, a month before the national lockdown, and the home implemented restrictions on visiting in line with the government guidance in March 2020. Staff explained that as soon as government guidelines were given, the staff were consistently updated by the management team.

The restrictions put on visiting meant that the resident's loved ones were no longer allowed to enter the home, unless in exceptional circumstances such as end-of-life visits. Visiting could initially only take place in the garden of the home and then later in the purpose-built visiting room. This visiting room features an intercom system and Perspex dividers to separate visitors from residents and the room is sealed off to make it a completely isolated visiting area. Loved ones visiting the home wear PPE to enter the visitor room, and the room must be cleaned in between visits. Any presents/ supplies left for the residents must be fully sanitized and washed.

The home also used virtual methods to keep residents and their loved ones in contact, like the use of iPad's and skype.

Staff explained that they have agreed with the implementation of the restrictions and have thought they were reassuring and necessary to keep everyone safe and protect the residents from the virus. This being said, it has been difficult for staff to see how hard the residents and their families have found being kept apart from their loved ones for such a long time.

Wellbeing

Staff described the main concerns they had during this time. These included the pressure of keeping everyone safe and the worry of bringing the virus home to their families, having less staff to help on shifts so the team often running on empty, having to be alert to the virus and all the restrictions whilst still caring for their residents and having concerns about the residents who are missing their families. Staff similarly explained what affect the outbreak the home experienced as on them. Staff explained that it was a worrying and stressful time with pressure to balance the workload whilst ensuring that the residents needs were still being met.

However, with this being said, the majority of staff said that their views have been listened to throughout this time and agree that they did feel well informed about the changes to practice. Most claimed that they had the support of their fellow colleagues and the management team to help get them through it, for example some staff members explained that because of their own health problems they had to be shielded, and were supported by their colleagues in order to do so.

“There wasn't enough staff on some of the shifts so was running short with extra jobs to do. The staff have been running on empty”

“Isolation from society to protect others whom are vulnerable”

“It has been a difficult year working during the pandemic. This has affected our residents and staff due to reduced time with loved ones”

Support

Staff explained that they had the support of their colleagues, management and senior care team and head office. This came in the form of flexible working, frequent communication and updates, additional training and regular supervisions. Staff were also offered the services of an inhouse counsellor if they felt that they needed any additional support.

The staff summarized their experienced by explaining that they felt that the care home was overall managed very well throughout the pandemic, and despite how difficult it has been for staff and management alike. Through support and hard work they been managing as well as can be expected under the difficult circumstances, whilst still delivering a high standard of care throughout. Staff explained that their experience of working in a care home during this time was difficult, scary, high pressure and tiring but despite these challenges the staff also found their work rewarding and through the hard work and team work the residents and staff were protected and supported throughout

When we asked the staff what could be out in place to improve their experience of working in a care home throughout this time, most staff said that nothing could've been improved and that the home did its very best under extremely difficult circumstances. The few recommendations that were put forward suggest the home to perhaps have some extra sources of outbreak staff to ensure that the home is fully covered, some extra help financially for positively tested staff and better communication between the staff.

What did relatives say?

From the relatives that we spoke to, their family members had lived in Beverley Parklands for varying lengths of time. The longest being over three years and the most recent being six weeks. The relatives we spoke to mostly all said that their family member had a health or cognitive issue, the most common being dementia.

Communication

Most relatives we spoke stated that they were regularly kept up to date on the COVID-19 situation. This typically occurred several times weekly or every few weeks depending on what updates the home had to give or whether the relative needed to be contacted regarding their family member. This is typically by email or in the form of a weekly newsletter, but relatives are also updated via telephone or by text. This communication is normally by the care home manager Robyn, Alison activities coordinator or Yorkare. Some relatives said they were contacted weekly regarding visiting or to arrange video calls with their family member. Also 'resident of the days', where a particular resident is celebrated and their family is contacted.

Visiting and contact

Relatives explained that pre covid, they would typically stay in contact with their relative through regular, in some cases daily, weekly or bi-weekly, visits, telephone contact or taking their loved one on days out. Overall, previously many of the residents and their loved ones would be in some form of contact either daily or several times a week.

When asked when they recall the care home ceasing typical in person visits, relatives mostly answered that it was around the end of February to March 2020. This was mostly communicated to relatives via email and the homes social media page.

Residents said that they were sad, anxious, and concerned about not being to see their family member but were pleased that the home was putting guidance in place and understood that it was an unavoidable and necessary step in order to keep their loved ones safe.

“It was necessary to protect residents, but a real shame it is needed”

“Frustrated for Mum but 100% supportive of the changes to protect the home and staff”

“Welcome change to protect my relative and everyone else”

“Upset and anxious”

Despite these restrictions, all of the relatives we spoke to agreed that they have still been able to have some form of contact with their loved one despite the pandemic. This has been initially done through weekly telephone calls, video calls on platforms like skype, facetime and WhatsApp, social media and window visits using the internal telephone. In the summer, the home facilitated outside visits in the garden with a fenced area to ensure social distancing and then later the ground floor visiting room was devised with strict

hygiene procedures, a sealed Perspex window and microphone system. Unfortunately, this visiting room is currently not in use due to the latest set of restrictions.

Were any limits on any of the various types of contact, relatives explained that there is a booking system, and they have been limited to one 'visit', whether it be window, garden or using the visiting room, per week and a video call per week. For the visits there has been a time limit of twenty minutes, and although there isn't a time limit with the virtual visiting with any scheduled visitor calls staff need to be involved to facilitate this and therefore sometimes contact depended on staff limits. The visiting room also has been dependant on any outbreaks within the home. Relatives agree that the booking system and the limits in place are there to ensure all of the relatives and their loved ones are able to have time with their loved ones equally.

"I have arranged for my mum to stay in her room for her breakfast so I can FaceTime her"

"With a wonderful visiting room and, during the summer, a designated area of the garden. Since the outbreak around Christmas, window visits have been possible"

"We have regular Skype family calls. Parklands are good at arranging this. However sometimes when calls are held in their sitting room it can be noisy during to background noise a d sometimes"

"Immediately set up screened visiting room accessed via external patio doors. Set up FaceTime calls. Regular general updates on social activities posted on Facebook page "

"Mum not good with technology so will sometimes not answer She pauses it or ends mid conversation as she doesn't understand She has difficulty holding ipad"

"The room had screens and relied on a microphone which made it very difficult to hear"

"Yes, one call per week usually. However, we have a special occasion this week and Parklands have arranged for Mum to be able join a call at a non regular time. We are very grateful that Mum is able to join this family celebration"

Relatives overall praised many aspects of the contact they have been allowed with their loved one, particularly the creation and use of the visiting room. This helped to alleviate some of the difficulties they experienced when having a garden visit, as the visiting room has a microphone and speaker system meaning that residents can hear clearly and because it is taking place indoors the visit is not weather dependant.

They did also mention some negatives to the forms of contact they have had to use. Many residents explained that although they understood the need for the limit, having only a twenty minute slot has been difficult for them and has felt at times 'insufficient'.

Additionally window visits have been difficult at times for some relatives due to their loved one having hearing difficulties or adverse weather conditions. Also technology has at times been challenging, some residents have had to use smaller devices like mobile phones where it is often hard to see the image or poor connection has made video calls poor quality or hard to hear. Additionally, the resident may struggle to position the device properly to ensure that their loved one can see them/ see their loved one. Video calls can also be disrupted by any noise in the home environment if not conducted in their room. Furthermore, although many praised the use of the visiting room, some relatives still experienced difficulties as for their loved one the microphone/stereo system was not appropriate perhaps due to hearing difficulties, and some residents said that because of the Perspex dividers their loved one struggle to grasp that their family member was there but still 'out of reach'.

When asked what the home could put in place in order to improve the experience for the relatives and their loved on, some suggestions of improvements were a better sound system for the secure visiting room to ensure that each party can hear each other clearly, a quiet place to be created where the residents can have their video calls and somewhere with a strong WIFI connection to try and stop the previously mentioned difficulties. Also perhaps using other platforms like zoom and teams instead of skype, and training on how to facilitate the video calls or the use of devices other than phones to ensure that the residents can properly see their loved one and vice versa, for instance like a home iPad or laptop. It must be said that many residents explained that there was nothing that could be improved and understood that some difficulties are inevitable due to the nature of these new forms of communication and the difficult conditions the staff are working under

“Overall everything done by the home has been positive and worked well... Mum is hard of hearing and the Audio has been a challenge, I have 2 sisters and 1 brother and coordinating visits has been a challenge but NOT a problem”

“I would say that everything that was put in place worked very well”

“They have all worked well to a point”

“In reality none has worked terribly well for us”

“The appointment system worked well because a schedule was drawn up in advance of the visiting/video call availability so you could book accordingly”

FaceTime doesn't work for mum because she has less than 10% hearing and only in one ear however just seeing her helped put our minds at rest that she was OK

“The care home were constantly looking at ways to improve this & listened to suggestions. i.e. using headphones in addition to the microphone”

“Carer able to stay with mum throughout our visits to help with communication however we realise that at times staffing levels are very stretched”

Activities/Services

Before COVID, residents explained that their loved one would partake in a variation of activities, many of them being 'outings' using the homes mini bus, allowing a small group of residents to have trips out locally, for instance to go see Christmas lights or go on days

out. However due to the restrictions this is no longer possible. Despite this, most of the relatives we spoke to explained that their loved one still had access to some activities during the COVID-19 pandemic as adapted activities have been taking place. These include things such as quizzes, singing, crafts and games, indoor tennis, planting and so on. Many of the relatives we spoke to explained that their family member prefers not to take part in activities, often due to a condition or just personal preference, but state that the homes staff always make sure to ask the resident if they would like to be included and encourage them to do so.

When asked if they believe that their loved one has had access to everything they need, for instance food, drink and toiletries, all of the relatives said that they felt they had, and anything they didn't have been out of the homes control due to the restrictions currently in place, for instance ensuring their loved one had plenty of fresh air and regular haircuts.

The majority of relatives answered that their loved one has had access to any health care service they may have needed throughout the pandemic. This has been in the form of both physical and virtual visits to services such as the GP, opticians, district nurse visits and paramedics attending the home. Several of the relatives we spoke to has had their loved one admitted to hospital during the pandemic, and the relatives explained that the home kept them fully informed and updated at every step of this admission and that COVID tests were done after each stay. In many of the occasions, the resident was discharged on the same day as being admitted to them be cared for within the home.

Wellbeing

We asked the relatives how concerned they have been regarding their loved one's risk of contracting the virus within the care home. All answered that they were obviously extremely concerned from the offset due to the initially unknown nature of the virus. However, all relatives we spoke to stated that despite these concerns, they knew that the home was doing everything within their power to protect their loved ones. When we asked the relatives if they discussed any of these concerns with the home, we received a mixed sentiment- however overall most did not share these worries. For those who did share these concerns, which was many of the relatives we spoke to, relatives explained that the home was prompt, reassuring and understanding, advising them of the procedures in place. The vast majority of relatives answered that they were able to be in contact with the home whenever they needed to.

We also asked relatives if they had shared any other concerns or feedback to the home relating to their loved ones care and most relatives said that they received a positive response from the home. Many of the concerns related to their loved one's health and welfare, and relatives explained that the home has been highly reassuring, arranging extra calls and updates for concerned family members. Additionally, relatives said that the home also gave very prompt updates for any of their relatives in hospital, and most recently regarding the covid vaccination programmes. Many relatives explained that it is sometimes difficult getting through to the homes phone, but all respect that staff are busy especially in the current circumstances.

“Obviously, having heard the horror stories on the media, I was concerned, but knowing the staff and how they were dealing with it all, I was confident that they were as safe there as anywhere”

“At the beginning of the Pandemic, more so. I think Parklands have been excellent in their practice and dealing with the issues”

“Even though they contracted the virus and survived.. still worried. Especially not being able to be there”

“They have been admitted to Hospital and the home have been excellent at communicating with us. Updates on the vaccination have been really positive”

“I often wait a long time to get through on the phone. Each floor should have its own designated phone number so you’re not having to ask for the floor when you eventually get through”

“Positive. Helpful and felt they addressed my concerns”

“I have given feedback throughout the pandemic mainly with consideration to the excellent care they are giving and how well my relative looks”

All relatives we spoke to said that the staff are friendly, helpful, and polite and are satisfied with the care their loved one is receiving, stating that they feel they are well looked after, loved and respected. The relatives we spoke to also praised the safety measures in place and the regular updates and providing person centered high quality care.

“The staff are very helpful with any situation. They have given The resident tremendous support. Indeed the fact that she has not been out since March 2020 and she is still upbeat gives us every assurance”

“They have explained what precautions they are taking and have given me regular updates”

“Obviously I am not there, so I can only offer a limited view - but as I am kept informed by email and text, and I can ring when I want to everything seems to me to be as good as it can be”

“Caring but kept humour and compassion”

“Very personal approach and 100% commitment to the Covid-19 rules and protection”

“When visiting my relative he looks really well, clean and well dressed and above all they seem oblivious to the current pandemic and seems very happy in himself. This is very reassuring that he is being well looked after”

“When the paramedics said they would die because he contracted Covid they, I feel, saved his life with their unrelenting care”

What did residents say?

From the residents that we spoke to, the longest had been there over three years, and the most recent had been a resident around six months.

When asked how they felt about living here, they said they are very well looked after and praise the staff and their fellow residents, and that although it is not 'home' as they had known it, they are happy to be living there. Residents also describe the home as being beautiful and in a well-situated location.

"I'm very happy I chose to live here"

"It's near the road and handy for the shops and the hospitals aren't too far away. It's a good location".

"It's safe, they look after you. they do everything they can to look after you. Do everything they can for you. if you want to be on your own, they will leave you on your own if you want"

"I feel well looked after. Everything is beautiful and clean and there's lovely people. But it's not home"

"I feel like I've given up my life to live here. There's nothing wrong with living here, but I know I couldn't look after myself if I lived at home. We are very well looked after"

Changes to care

Some residents explained that they believe that their care has changed because of the restrictions and that these changes, both to the care and within the home, were communicated to them by staff. However, all the residents agreed that their care needs are being met and the majority stated that they still have been able to make decisions about their own care and feel like their views have been listened to. Most have still had their named carer throughout this period or a combination of carers with their keyworker.

All the residents we spoke to said that they have felt safe against COVID-19 in their home, explaining that staff are very effective at managing the virus and upkeeping the restrictions.

Residents weren't aware of any COVID specific complaints procedures and some residents suggested that there was less of a platform to share their opinions due to COVID however all residents understood who they could speak to if they felt that they had any concerns.

"Yes they're quite good unless they are busy answering an emergency. I just want my daughters. It really upsets me"

"used to have once a week where the boss would ask questions and we could mention any requests and questions. We haven't had any of these meetings since COVID. there has been a lot of comings and goings"

Visiting

Residents explained that there have been various means put in place to ensure that they could still communicate with their family and friends, such as telephone calls, video calls,

window visits, visiting in the garden and most recently using the visitation room. The residents we spoke to explained that although the visiting restrictions have been difficult, the visiting room has made a lot of difference and are happy that the home can now facilitate visiting inside whilst sticking to all the safety guidance. This being said, residents did express still being distressed at not being able to physically touch their family members and friends, and look forward to a time when they can hug and kiss them again.

“I see my daughter through the window, or on the phone. My daughters bought me a mobile phone with earphones so that we can hear each other through the window. There is a visiting room as well with a Perspex wall”

“Did have outside visiting. she rings me. they leave parcels at the desk for me, and if I want anything they leave it at the desk for me. I see them in person once a week. back into the visiting room it was specifically built for visiting and has to be fully cleaned down”

“they changed it from outside to inside. Its funny, seeing them all wrapped up in blankets. Only one visit a week their allowed”

“I miss my daughters a lot. It's all I want to talk to my daughters. They visit a lot but It's not the same as being able to hug and kiss them”

“I have a ground floor room with a balcony. We are going to have fish and chips on my balcony in the summer”

Testing

All residents had been tested for COVID-19 and all explained that they had not experienced any problems with testing. Residents claimed that in the case of getting a positive result, the procedure would be to stay isolated in their room for two weeks and be cared for by staff unless they got worse. Residents who did have to isolate said that they were supported well by the staff and were checked on regularly. One resident we spoke to had to isolate after being accepted into the home as a precaution and was supported whilst doing so.

No residents we spoke to had received an anti-body test.

Most residents knew that their family members/loved ones had also received tests though were unsure how often this takes place. Residents explained that if their family member did obtain a positive test result following a COVID test, that they would have to isolate for ten days.

“I noticed when I rang my bell that the carers did come quickly”

“Yes I had to be gated and the staff checked on me regularly”

Access to services and activities

Most residents we spoke to had still been able to access the services that they have needed throughout the pandemic and none had had their GPs changed because of COVID-19. Some of the residents that we spoke to had recent healthcare appointments. One resident had been taken to the opticians by the staff, and another had the GP come to the home to visit. This resident said that it was a very positive experience and despite this doctor not being the residents usual GP, said they were very happy with the service provided. A few of the residents we spoke to had also attended hospital during the COVID pandemic, mostly for outpatients appointments and described having had a good experience whilst receiving this care.

“The GP came to see me because I have a very chesty cough. She's not my doctor but she was very thorough”

“I had a good experience in hospital”

We also asked residents if they had been able to take part in any activities within the care home throughout the last few months and most answered that they had been able to. However, residents explained that because of the pandemic and restrictions, there has been much fewer activities go on within the home and outings in particular have had to be stopped. This has been difficult for some residents who thrived on outside activities and miss going on daytrips using the homes minibus. This being said, residents explained that there still are activities going on in the home that they can take part in, such as armchair exercises, quizzes and balloon tennis. Residents also explained that if the home can accommodate a particular activity that a resident desire to do, then they will try their hardest to include this on the activity planner if possible.

“I haven't been able to have my daily walk in the community or go to see any live sports matches”

“if there's anything going on, the lady who does entertaining she bends over backwards for us. they did Hogmanay yesterday. If you mention it they will try and they will try and work it for you.”

“I don't seem to bother with the activities in the home anyway. It's because I don't want to. more so since my legs starting to go. I can't get about like walking about, someone has to push me and when they're short staffed there's no one to push me. But I don't feel like I am missing out. They took me yesterday for the garden for 5 mins because I said I needed some fresh air”

Wellbeing

When asking about how their mental and overall wellbeing has been during this period, the residents explained that they have often felt lonely, frustrated, bad tempered and sad. This is mostly due to not being able to properly see their family members, or because they cannot take part in the usual activities as they would like to and struggle with having to stay inside the home. Some residents explain that they try get on with things and adapt a 'war like' spirit, trying to focus on taking each day as it comes. When we asked the residents how they felt about the future, most said they are looking forward to the

warmer months and for restrictions to ease so that they can get back to regular visiting and more outside activities.

“It has been very difficult as grieving for my husband and leaving home”

“I've been a little bad tempered and or frustrated”

“I'm slightly frustrated as I like to have a walk - but I'm Ok- I walk in the garden”

“I really miss my daughters and being able to be with them properly and I cry a lot”

“I have took everything as it comes. It wouldn't be so bad, though it's not like the war as its invisible and so I just let it go”

When asked overall what their experience of living in a care home has been like, the residents explained that overall it has been difficult and frustrating due to the restrictions and lack of normal visits from their loved ones. This being said, the residents understood that everything put in place has been to protect their safety and feel that they have been very well cared for and looked after throughout this time. When asked what the home could put in place in order to improve their experience, most residents answered that nothing could be improved, though some residents expressed the need for activities and entertainment to **centime** and explained that once they can resume their normal outside activities, like outings and walks, they will feel much happier.

Conclusion

Beverley Parklands put in various changes in order to safeguard both the staff and the residents. This included locking down the home before it was mandatory, having teams of staff set to each unit in the home and having specific exits and entrances for these staff, rearranging and adapting the layout of to ensure extra cleaning stations and social distancing, increased hygiene measures and use of PPE and having varied forms of regular testing to ensure accuracy.

We concluded that Beverley Parklands felt fully supported by their fellow colleagues, their senior management team and head office. Although staff explained that it was a difficult and a highly pressured time for them, staff carried on to provide quality and person centred care, supporting each other and working together as a team to get through it. Staff said how proud they were of each other, how the management team was there for them, and despite the challenges they have found the work highly rewarding.

Overall residents had felt their experience was difficult and frustrating due to the restrictions and lack of normal visits from their loved ones. However, they understood that everything put in place has been to protect their safety and feel that they have been very well cared for and looked after throughout this time.

Relatives were satisfied with the care they received throughout the pandemic and stated that the staff are friendly, helpful and polite and are satisfied with the care their loved one is receiving, stating that they feel they are well looked after, loved and respected.

Recommendations

- 1) Create a quiet environment where residents and their families can have their video calls and try and acquire more devices to make it easier for the resident and their family to see each other
- 2) Look into the internet connection- get a booster for above point
- 3) To look into the creation of a central database which can be easily disseminated to all health professional that require it.
- 4) Perhaps converting a second room into another visiting room with outside access to give residents more opportunity to see their loved ones safely.

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Distribution

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