

The Impact of Coronavirus on Enfield Care and Nursing Homes

August-September 2020

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Executive Summary

During August and September 2020, Healthwatch Enfield engaged with local care and nursing home staff, residents, and relatives to hear how the Coronavirus outbreak is impacting them. This followed a period where Enfield Council had put in place regular communication and support with care homes (including support for staff) to ensure that the homes and residents were appropriately supported during the pandemic.

This report sets out the views of staff, residents and relatives, and offers an insight into what worked well and areas where we can improve the experience of residents and relatives and ensure that staff feel supported.

Just under one quarter of the homes we spoke to, had an outbreak of Coronavirus during the first wave (23%). Almost all of the homes that experienced an outbreak reported they have received external support from a wide variety of organisations. Homes told us they were grateful for the support they received but explained they would benefit from this support continuing, especially in the event of a second wave of the virus.

Feedback from staff

Staff reported a range of reasons which they felt contributed to helping them avoid an outbreak of coronavirus in the home. It is clear that care and nursing home staff are working hard, often beyond the call of duty, to keep residents and colleagues safe. For example, staff took personal action such as not using public transport, doing online shopping, not covering shifts in other homes, in an effort to protect home residents and their colleagues.

Two thirds of staff told us they were aware of the interventions available to help care and nursing homes (67%), but feedback about the helpfulness of these interventions were mixed. Feedback about testing was mixed. Staff also noted the disparity they felt between social care staff and NHS staff and felt that this should be addressed so that they receive the same sort of priority access for food shopping as well as a recognition of the key role they play in keeping vulnerable residents safe and secure.

Staff highlighted that they would need continued support with the following moving forward, particularly in the event of a second wave:

1. Continued provision of Personal Protective Equipment (PPE), clear government guidance and reliable access to testing
2. Regular phone calls from Enfield Council (The Council is continuing phone calls on a weekly basis and has never stopped them)

3. Guidance and support to reassure the home they are 'doing the right things'
4. More recognition for care staff, including access to priority shopping hours, priority access to online supermarket delivery slots and access to NHS discounts

Over the period of the pandemic additional support has been provided by a range of agencies including primary care. Feedback from staff reflects a lack of awareness of this support. We recommend:

5. Improved communications within homes to ensure all staff are kept informed
6. Clear guidance on access to GP support and the proposed new IT links to healthcare systems

Feedback from residents and relatives

Although the majority of residents and relatives told us they received information from the home during this time (71%), there were individuals who felt that the information was unclear, generic and/or sporadic and not all residents and relatives were sure if there had been an outbreak in their home.

Almost three quarters of residents and relatives told us they felt they have been given enough support to cope with the impact of Coronavirus on their/their relatives wellbeing (73%) but those who reported not receiving support explained the difficulties they are experiencing with visiting restrictions in place and/or feel their loved ones are not receiving enough support inside the home.

Understandably, most residents and relatives found it difficult with the visiting restrictions in place to help stop the spread of Coronavirus. Although most individuals understood and respected the visiting and other restrictions, those in assisted living accommodation reflected that there should be more flexibility. Almost two thirds of all residents and relatives told us they have been supported by their home to keep in touch with their loved ones, mostly via video calling and/or telephone calls (64%) but it was clear that this was not appropriate for all, especially for those with a hearing impairment or those who had family who worked full time.

Key messages from residents and relatives:

7. There needs to be good and regular communication with residents and relatives. Whilst, some good practice was reported to us, this should be consistent across homes

8. Residents and relatives should be consulted about decisions in relation to restrictions so that there is an opportunity to understand their wider impact

Methodology

During August and September 2020, Healthwatch Enfield contacted all care and nursing homes in Enfield to hear how the Coronavirus outbreak is impacting them. Homes were initially contacted by email, then followed up with a telephone call.

A total of 89 homes in Enfield were contacted, using a directory from the Care Quality Commission website¹ to ensure all homes in the borough were included.

Staff completed a survey either:

- Over the telephone with a Healthwatch member of staff or volunteer, using a semi structured interview technique
- Via an online link
- Via paper copies posted to the home upon request

Simultaneously, the experiences of residents and relatives who have been in/know someone who has been in an Enfield care or nursing home during the Coronavirus outbreak were sought.

Views and opinions were collected via an online survey, promoted via the Healthwatch Enfield newsletter and social media channels and local community groups such as Love Your Doorstep and Enfield Dispatch. The care and nursing homes were also asked to disseminate the survey to their residents and relatives.

Due to the voluntary nature of individuals' participation in the conversations, a standard set of data was developed but a complete set was not collected for each organisation. Therefore, the sample size varies depending on information provided. Not all data will tally due to rounding.

¹ CQC care directory <https://www.cqc.org.uk/files/cqc-care-directory-zip>

Feedback from staff

We heard from 36 staff through our staff care and nursing home survey, from 23 different care and nursing homes in Enfield.

56% of responses were from care homes, 19% from nursing homes, 8% from homes which are both care and nursing homes, 6% from assisted living facilities and 11% from homes which are a mix of care, nursing and/or assisted living.

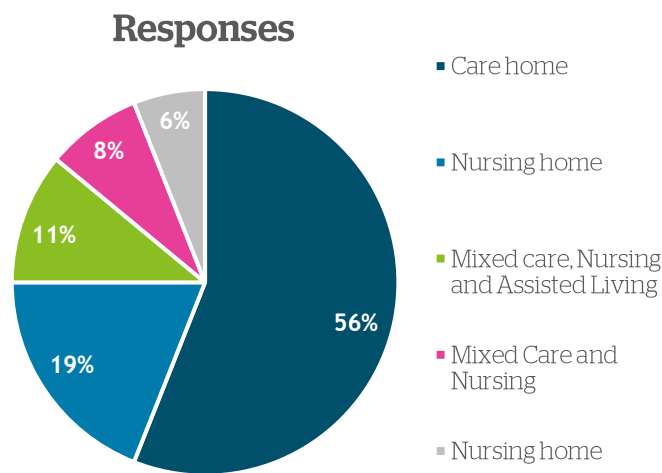


Figure 1: source of responses

Experience of Coronavirus outbreaks in the home and support received

Just under one quarter of care and nursing home staff told us their homes experienced an outbreak of Coronavirus during the first wave of the virus.

Almost all of these homes reported they received external support during the outbreak, from a variety of organisations such as Enfield Council, the local Clinical Commissioning Group (CCG), the homes parent company, the Care Quality Commission (CQC), Public Health England, local GPs and NHS111.

There was mixed feedback about how helpful and/or timely the support received was. Overall, a large proportion of homes indicated that they were grateful for the support they received from Enfield Council to obtain Personal Protective Equipment (PPE), but also told us that they would benefit from this support continuing, especially in the event of a second wave.

‘With PPE - Enfield council - they were brilliant. Have continued to have enough PPE. Was accessing PPE from the council but is now able to order through the portal’

‘Our local Authority team has been great, we have been very supported during this difficult time.’

'The daily phone calls from Enfield were really helpful, they still phone three times a week and I welcome this support. I also welcome equipment provided by the Local Authority - tablets for video calls with families, blood pressure monitors, face shields and infra-red thermometers'

'We did get help from local authorities but we had great difficulties and even now we are beginning to get more help, but we are not sure what the future holds at present. Some help came bit late'

'To manage to help, emergency meeting allocated staff, local authority were in her view useless in helping during this situation'

'It was very difficult to get through to the hospital to get updates on how the residents were doing, although the families kept in close contact and updated the home'

'Our CQC inspector was excellent. We have to submit data for the quarterly monitoring'

'Council have been really helpful. PPE & masks etc - we got it all. CCG community matron & the team were great - assessments in hospitals & complex cases. Answered all our questions. Didn't feel alone & felt we could reach out to them. Staff were scared but we had support'

Factors which contributed to the home experiencing/not experiencing a Coronavirus outbreak

Staff reported a range of reasons which they felt contributed to helping them avoid an outbreak of Coronavirus in the home:

- The understanding of the situation by residents, relatives, and staff
- Staff not using public transport to get to work
- Staff doing online shopping
- Appropriate use of Personal Protective Equipment (PPE)
- Adequate supply of Personal Protective Equipment (PPE)
- Following organisational guidance
- Going into 'lockdown' early
- Acting quickly to stop family visiting
- Staff training on infection prevention and control
- Management having a presence in the homes to support staff
- Regular communication with staff through newsletters
- Not using agency or bank staff
- Staff not covering shifts in other care homes
- Staff changing from outside clothes into their uniforms
- Checking staff temperatures three times a day

Staff also reported a range of reasons which they felt contributed to having an outbreak of Coronavirus in the home in addition to not observing the actions above:

- Staff and residents not being tested
- Government not making things clear to the public and not implementing the lock down as they should

- Hospitals not being honest before discharging clients
- Staff returning to work from holiday
- Residents visiting hospital for treatment
- Residents being vulnerable with underlying health conditions

Awareness of interventions to help care and nursing homes

Two thirds of staff were aware of the interventions available to help care and nursing homes.

Feedback about the helpfulness of these interventions was mixed. Some homes explained they thought it would be useful if they were sent more information directly about the interventions and support available to them. Most homes reported they were able to obtain support with Personal Protective Equipment (PPE) but feedback about testing was mixed. Some homes reported that testing kits ran out quickly and/or they were sent kits which were faulty and could not be used.

I do not think that it made much difference, as basically the care homes were left to manage themselves in the beginning, help had come but bit late as no professionals were coming in and things were done via emails and now virtual. I believe that NHS was given too much credit and the care homes and their staff who even risked their lives to continue working in care homes, knowing the risk'

'We were being provided with testing kits so they could test staff and residents twice weekly, but these ran out two weeks ago and no new ones have been sent. It was helpful to have the test and know that everyone was safe, and they got the results promptly. Similar situation with PPE. Initially we were provided with adequate stocks, but these are running low and nothing has been sent recently apart from some face shields'

'We have been sent supplies of PPE, including face shields. We were sent a box of 50 tests initially but were then told these were faulty and could not be used. We have been sent more tests and at the moment residents are tested once a month and staff once a week. Not aware of any other support'

'We have been sent COVID tests and receive stocks of PPE from the local authority'

'We were all in this together, all on the same platform. It was about compassionate care - all came to help'

Support needed moving forward

1. Continued provision of Personal Protective Equipment (PPE), clear government guidance and reliable access to testing.

The main comments, repeatedly stated were around:

It is really important that we have adequate stocks of PPE and COVID tests during a second outbreak as these were very slow in coming and staff were having to go to the drive-in centres to get tested.

'Organised provision of PPE and clear govt guidance'

'PPE should be available to all care homes and staff- Independent care homes can't get hold of PPE especially in a pandemic. Ongoing testing made available to staff and residents- they say there is no limit on testing but when I asked for more testing - we are made to feel that we are doing something wrong'

'To give more support from the Professionals and give clear guidance, not confusing guidance that the care homes and public know exactly what their roles are to contain the virus'

'We need to be able to have access to testing if any staff feels unwell with any symptoms- we are remaining on lock down until we can be sure all our residents are safe.'

2. Regular phone calls from Enfield Council

Staff agreed that they were grateful for the regular calls from Enfield Council, and they would value having these calls reinstated in the event of a second wave.

'During the height of the pandemic the local authority was ringing them weekly and this was really helpful as they felt supported, were not forgotten and could get advice as needed. They would want these calls to happen again'

'Regular phone contact from the local Authority for support and advice'

It should be noted that the Council is continuing phone calls on a weekly basis and has never stopped them.

3. Guidance and support to reassure the home they are 'doing the right things'

Main themes again repeatedly given:

'Staff are taking responsibility in limiting contact with their love ones to reduce the risk of COVID19 within the care home'

'I will do whatever it takes to keep my clients and staff safe i.e. as being in isolation like a family which is for 14 days'

'Generally happy with the support we are receiving but sometimes feel overwhelmed with the volume of information and guidance being received'

'Would like to know what other care homes are doing and how managing.'

'Would like to have a clinical lead, a nurse in the role who can give advice on standardising care and practice. I feel we are on our own. It would be good to have a chance to talk through how do manage things, like with the extra grant do we build an outdoor building now? What should I tell staff to wear?'

4. More recognition for care staff, including access to priority shopping hours, priority access to online supermarket delivery slots and access to NHS discounts

Many staff spoke to us about the disparity they felt between social care staff and NHS staff. They reported they should be eligible to the same benefits as NHS staff, such as priority shopping hours; the difficulties they had in obtaining

food for their residents whilst online food deliveries were sparse, and supermarkets were restricting the amount of food one could purchase.

In the event of a second wave, staff told us they would benefit from more support in ensuring that they are able to get food shopping for the home.

Food delivery was an issue as no companies were sending and deliveries and also were rationed and was difficult to get all the supplies'

It would be helpful if the supermarkets prioritised delivery slots for care homes as at the beginning of the pandemic it was impossible to get slots and they had to trawl the local shops for food supplies which put staff at additional risk'

'The NHS discounts & deals should be extended to care home staff'

'If the NHS hours in shops could be opened to residential care homes too that would be helpful. Open up the discounts & offers to NHS staff to care home workers too, as they were excluded'

'People should know that care home staff should be acknowledged - and raise awareness about what they do. NHS discounts to be open to care home staff too'

Other support staff reported they would benefit from includes:

- Disinfectant supplies
- Access to flu jabs
- Improved communication from hospitals when residents are admitted
- Doctors re-starting visits to homes for residents' medical needs
- Doctors re-starting visits to homes to verify deaths
- Provision of nursing staff to carry out tests
- *Financial support for staff who need to self-isolate*
- *Training provision for staff*

The two requests for support listed above have already been funded through the infection control funding and should be accessible to staff.

- *Emotional support for staff*

The employee assistance programme has been available for all staff since April 2020, this enables counselling for individuals and families

- *Additional funding to put new measures in place*

Homes have had and continue to have an opportunity to bid for additional funding.

These last comments about the types of support required by staff set against the actual support on offer, reinforce the need for improved communication within homes.

Feedback from residents and relatives

We heard from a total of 15 individuals through our residents and relatives survey. 40% of respondents were residents in a care or nursing home in Enfield and 60% were a relative or friend of someone in an Enfield care or nursing home. The length of stay in the care or nursing home ranged from 16 years to a 'few months' and 87% reported that this was a permanent move.

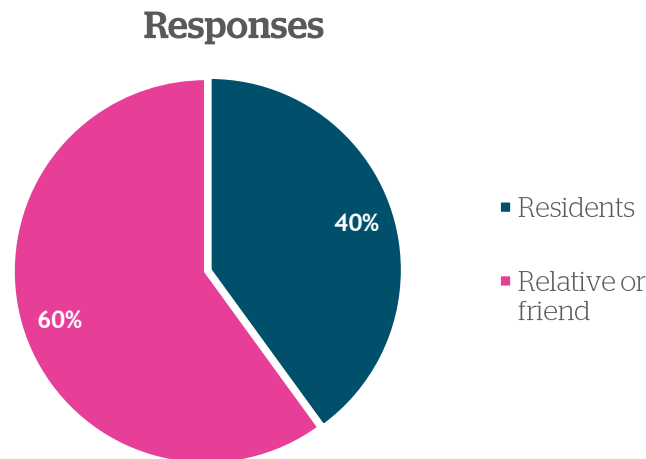


Figure 2: Source of responses

Receiving information about Coronavirus

The majority of individuals reported they had been given information from either staff, management, and/or the home's head office during the outbreak, but some told us they have not received information. Those that received information, reported this was by email or phone.

'Information sent from head office and seems to be applied to all their homes. Not always clear cut'

'Emails from staff managers at the start of the outbreak, then again at lockdown to explain precautions being taken and procedure around visiting/not visiting'

'We have received the occasional call from the Manager'

'No visitors. No other information'

'We have had regular emails from the Director and the Activities Organiser throughout. The home closed its doors well before the official government-imposed lockdown. The communication has been excellent'

'I am not aware of any phone calls or correspondence about Coronavirus, what was in place etc. We have never received any calls from the home about Coronavirus'

'Regular emails were sent with update'

'The information provided to my mother, and to me and my brother, has been very poor and very delayed'

'I have been given information to keep safe and well'

71% of individuals reported that the information they received was helpful and easy to understand. These individuals explained the information was 'clear', 'thorough' and communication was regular.

Individuals who did not find the information helpful and/or easy to understand, explained this was because the information was generic and/or sporadic and was not disseminated to all family members outside the home as requested.

'Very clear and thorough information given about what physical actions were being taken for infection control as well as info after lockdown to explain how visits would be managed (temp checks/masks etc)'

'Communication has been poor. At a time when information was badly needed and rumours abounded as to possible cases in the home, no formal information was forthcoming. I had to phone the home to get confirmation of there being one or more cases there'

'Not a lot of information was given other than to reassure us that my Mother in law was ok. We were unable to speak to her ourselves because she is hard of hearing and we can only communicate with her by using a white board and marker pen. She can speak and respond. The offer of Face Time was therefore useless'

'All correspondence has been thorough and detailed. They have always been open to phone enquiries and as well as by email if relatives need further reassurance (not that we did!)

'The staff have always been kind and helpful when we have approached them. We are proactive in asking and knowing what to ask as we both work in social care and have personal experience also'

'The emails were really regular'

'There have been a handful of letters but most of these have come from head office, the information they have provided has been very general, and they have come very late in the day. My mother, my brother and I, all asked to be on the mailing list. On a couple of occasions, I received an email that my brother didn't receive, and vice versa. All the letters have been very poorly written and very long-winded, so it is difficult to take out key information'

'Staff are very good and explain things in a way in which I understand'

Being kept updated about Coronavirus cases in the home

Half of the residents and relatives reported they were informed if there was/is a Coronavirus outbreak in the home. Some told us they had heard rumours of cases in the home, but this was never confirmed or denied.

'We were not told directly when the government forced the management to reserve 8 beds for the NHS for three months, and forced them to admit any patients from local hospital without testing, with no protective equipment for staff or other residents, but news filtered through'

'Told that all staff and residents were tested for COVID but not been told the results'

'She was in hospital for a week and then we were told she was being sent back to the home (COVID positive). We were unclear and confused as to why this would happen as she was in the last few days of her life and COVID positive! The only communication from the hospital was the phone call saying that they were sending his mother home. We had no call from the Care Home as to why, what they were putting place, time expected to be at Care Home.

There was a special 'COVID team' who were caring for her, but we struggle to understand why the hospital would send a lady end of life, who is in last few days of her life, hasn't eaten for 10 days, is COVID positive back to a Care Home with so many vulnerable elderly residents with Dementia. She died the following day'

I was told that a few people had got corona virus. Unfortunately, my relative was one of them'

Support to cope with the impact of Coronavirus

Almost three quarters of individuals told us they felt they had been given enough support to cope with the impact of Coronavirus on their/their relatives wellbeing. They explained they had been given support to make video calls to relatives and/or felt the home had looked after their relatives well, despite finding it difficult not being able to see them due to visiting restrictions.

'My sister is supported to make calls by video daily to me and other family members'

'I have had the right relatives Skype'

'The home has always been amazing at looking after its residents and we felt absolutely confident in their ability to manage any issues to do with the virus'

'Good to know that my son is kept safe, but hard being kept apart and for him not to be able to spend holidays at home, as he normally would'

'But I found it extremely difficult being unable to see my relative when she was very unwell'

Those who reported not receiving enough support told us they found it difficult with the visiting restrictions in place and felt their loved ones were not receiving enough support to meet their needs. This was specifically relevant to those residing in assisted living accommodation, particularly facilities co-located with a care home.

'As residents of assisted living flats, we cannot go in or out without going through communal areas. This means we have been limited to exercising once a day in the garden, and we have been unable to leave the premises for any reason without self-isolating in our flats for 14 days. We have been able to receive timed half hour slots from family in the garden when weather is fine. Some flexibility has been shown but I feel that it ought to be possible to have timed slots to clear the public area to enable us to visit the pharmacy or cash machine over the road without penalty'

'My mother has not been unwell but being confined to the home and its grounds since mid-March has impacted on her physical health. When she moved in to her flat in the home 4 weeks before lockdown, she was a very fit 92- year old capable to walking long distances and able to cope with the 2 flights of stairs up to her flat. Whilst she has done her best to keep active in her flat and in the grounds the lockdown has taken its toll. Both her ankles are badly swollen, and she tells us she runs out of breath more quickly going up the stairs'

Keeping in touch with relatives and friends outside the home

Overall, almost two thirds of respondents reported that during the Coronavirus outbreak, they felt they were able to keep in touch with their relatives/friends in a way that works for both of them (64%). These individuals explained they/their loved ones were supported to make telephone and/or video calls. However, it was apparent that this was not suitable for all, specifically residents with hearing impairments and relatives with work commitments who are unable to take calls during the working day.

'Facetime, zoom, phone'

'She was supported to make video calls to me daily'

'We keep in touch by telephone on a regular basis'

'They did set up facetime calls, but my grandmother was hard of hearing and could not hear us properly via facetime or on the phone'

'Early on in lockdown the home provided residents with access to laptops so that Skype calls could be made. We were also provided with clear instructions how this would work. I thought it was a great idea'

'Be more available to do video calls outside of core work hours- it can be difficult when I am working to take the calls'

As lockdown eased, some relatives told us they were able to make socially distanced visits to their loved ones in outside spaces around the home but were concerned about how this could continue when the weather changes during winter. Other relatives told us about visiting restrictions still in place and the concerns they had about the isolation their family member was experiencing, in addition to the relatives not being able to 'check-up' on their loved one for reassurance that they are being cared for appropriately. One family member was concerned about their elderly relative not being able to spend 'precious time' with their family and friends, despite their relative living in an independent, assisted living flat.

'We have been isolated from the outside world since March 22nd and this is depressing. The weather has been good, and we have been able to meet in the garden. If the weather changes this will not be possible and no provision has been made for covered outside facilities'

'In the past two weeks the home has arranged for pre-booked visits - outside under a gazebo in the car park. We have been twice. It is very efficiently run, and all precautions have been taken to keep the residents safe. Brilliant'

'My mother is a fully functioning adult who is being prevented from spending time with her family and friends. Shielding is now officially over. People are being encouraged to go back to work. And yet my mother faces the possibility of many more months confined to the home and the grounds. If the home is unable to provide some acceptable compromise, we will have to consider whether it is appropriate for her to stay there'

'As we are unable to get into her room, we can't see how clean or tidy it is. We cannot check that soiled clothes have been hidden and left in drawers. All these things we would normally check on because we needed too. We cannot check on the food that she has been given, how many staff are there and if there are any activities at all. At the beginning of the lockdown we know xxx was kept in her room all the time. This has since changed'

'My mother is in very good health for her 92 and we are very angry that she is now being deprived of the opportunity to spend precious time with her family and friends. Last week two very concerned relatives emailed, separately, the manager of the home and an appropriate person at head office to say that it was inappropriate - and possibly not legal - to prevent these older people who live independently in freehold flats from leading a more normal life with family and friends. They cannot be confined this way for months and months on end'

Getting medical help for non-Coronavirus health problems

20% of individuals reported they/their loved one has been unwell with non-Coronavirus related health problems during this time. Most explained their home did contact their GP and made sure that they got the appropriate treatment. One individual within a sheltered accommodation facility explained that they 'put up' with symptoms because they would have to self-isolate for 14 days following a visit to the doctor.

'Given antibiotics by out of hours GP who turned up 12 hours later at MY request. The staff refused to contact them'

'Only that she has not been to a dentist and she needs to go regularly as she does have problems with keeping her teeth clean due to overcrowding'

'She never got to see any Doctor just over the telephone'

'The care home ensured they liaised with the GP and did all they could to make her comfortable'

'I think under normal circumstances we would have insisted that she see her GP to check out her swollen ankles.'

A few family members/friends told us that they were not kept up to date about their loved one's treatment plan following illness.

'Told that she was fine when I could see that she wasn't and that was on the phone. Ignored my concerns. Told they would not send for an ambulance'

'We were informed but often after the event e.g. she wasn't eating and was being given fortified drinks, but I was not told about this immediately'

Conclusions

Just under one quarter of the homes we spoke to, had an outbreak of Coronavirus during the first wave.

Feedback from staff

Staff reported a range of reasons which they felt contributed to helping them avoid an outbreak of coronavirus in the home. It is clear that care and nursing home staff are working hard, often beyond the call of duty, to keep residents and colleagues safe. For example, staff took personal action such as not using public transport, doing online shopping, not covering shifts in other homes in an effort to protect home residents and their colleagues.

Two thirds of staff told us they were aware of the interventions available to help care and nursing homes (67%), but feedback about the helpfulness of these interventions were mixed. Feedback about testing was also mixed. Staff also noted the disparity they felt between social care staff and NHS staff and felt that this should be addressed so that they receive the same sort of priority access for food shopping as well as a recognition of the key role they play in keeping vulnerable residents safe and secure.

Staff highlighted they would need continued support with the following moving forward, particularly in the event of a second wave:

1. Continued provision of Personal Protective Equipment (PPE), clear government guidance and reliable access to testing
2. Regular phone calls from Enfield Council (The Council is continuing phone calls on a weekly basis and has never stopped them)
3. Guidance and support to reassure the home they are 'doing the right things'
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Over the period of the pandemic, additional support has been provided by a range of agencies including primary care. Feedback from staff reflects a lack of awareness of this support. We recommend:

5. Improved communications within homes to ensure all staff are kept informed
6. Clear guidance on access to GP support and the proposed new IT links to healthcare systems

Feedback from residents and relatives

Although the majority of residents and relatives told us they received information from the home during this time, there were individuals who felt that the information was unclear, generic and/or sporadic and not all residents and relatives were sure if there had been an outbreak in their home.

Most residents and relatives told us they felt they have been given enough support to cope with the impact of Coronavirus on their/their relatives wellbeing but those who reported not receiving support explained the difficulties they are experiencing with visiting restrictions in place and/or feel their loved ones are not receiving enough support inside the home.

Understandably, most residents and relatives found it difficult with the visiting restrictions in place to help stop the spread of Coronavirus. Although most individuals understood and respected the visiting and other restrictions, those in assisted living accommodation reflected that there should be more flexibility. Almost two thirds of all residents and relatives told us they have been supported by their home to keep in touch with their loved ones, mostly via video calling and/or telephone calls (64%) but it was clear that this was not appropriate for all, especially for those with a hearing impairment or those who had family who worked full time. Key messages from residents and relatives:

7. There needs to be good and regular communication with residents and relatives. Whilst, some good practice was reported to us, this should be consistent across homes
8. Residents and relatives should be consulted about decisions in relation to restrictions so that there is an opportunity to understand their wider impact

Acknowledgements

Thank you to all the residents, relatives and staff who took their time to share their experiences with us to enable us to gain an insight into the impact of Coronavirus on care and nursing homes in Enfield. We would also like to thank the Healthwatch Enfield volunteers who dedicated their time, at short notice, to make this project possible.

This report can be made available in alternative formats, such as easy read or large print, and may be available in alternative languages, upon request.

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