



Your voice on health and care services

# **People's experiences of visiting care homes in Oxfordshire since Covid-19 guidelines changed in 2022**



**A report to Oxfordshire County Council and all  
Oxfordshire's care home providers**

**July 2022**

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## Acknowledgements

Healthwatch Oxfordshire are grateful to the people who shared their experiences of visiting or being in a care home in Oxfordshire during the Covid-19 pandemic. We also thank the Oxfordshire Association of Care Providers (OACP) and care home managers who encouraged family and friends of residents to take part in our survey.

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# 1. Background

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In 2020 and 2021, Healthwatch Oxfordshire published three reports exploring staff and residents' experiences in Oxfordshire's care homes during the Covid-19 pandemic.<sup>1</sup> We heard that although care home staff were doing their best to keep everyone safe, family and friends of residents found visiting restrictions challenging, stressful, and upsetting. They also told us about the harmful effects that social isolation had on their loved ones' physical and emotional wellbeing.

Since then, the UK Department of Health and Social Care (DHSC) changed its guidance on care home visiting.<sup>2</sup> An updated version was published in March 2022.<sup>3</sup> Visiting restrictions have now been relaxed and providers are expected to facilitate visits as much as possible, while taking some measures to keep staff and residents safe.

We wanted to know about people's recent experiences of visiting care homes since the guidelines changed.

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## 2. Methods

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Between March and May 2022, we ran a survey asking people in Oxfordshire about their recent experiences of visiting a loved one in a care home.

We developed a survey questionnaire and contacted the Oxfordshire Association of Care Providers (OACP) and other local organisations for help to promote it. We also emailed a link to the online questionnaire to every care home in the county and we took printed copies to nine of them.

Besides asking questions about their individual experiences of the care home, people were asked if they wanted to speak to a member of the Healthwatch Oxfordshire team. One person left details and was contacted by telephone to discuss their views and experiences in more detail.

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<sup>1</sup> See <https://healthwatchoxfordshire.co.uk/our-work/research-reports/>

<sup>2</sup> <https://www.gov.uk/government/publications/visiting-care-homes-during-coronavirus/update-on-policies-for-visiting-arrangements-in-care-homes>

<sup>3</sup> <https://www.gov.uk/government/publications/infection-prevention-and-control-in-adult-social-care-covid-19-supplement/covid-19-supplement-to-the-infection-prevention-and-control-resource-for-adult-social-care>

# 3.Results

Twenty-eight people participated in our survey, sharing their experiences of visiting seventeen different care homes in Oxfordshire. One person was a care home resident while the others were friends and family of residents.

- Fifteen people were aged between 50 and 64 years, eight were 65-79 years, three were aged 80 or over, and two did not tell us their age.
- Twenty were women, six were men, one was non-binary, and one did not say.
- Twenty-five people said they were White British, English, Northern Irish, Scottish, or Welsh, one was White Irish, one was 'any other White background', and one did not say.
- We heard from people in all Oxfordshire districts except South Oxfordshire.

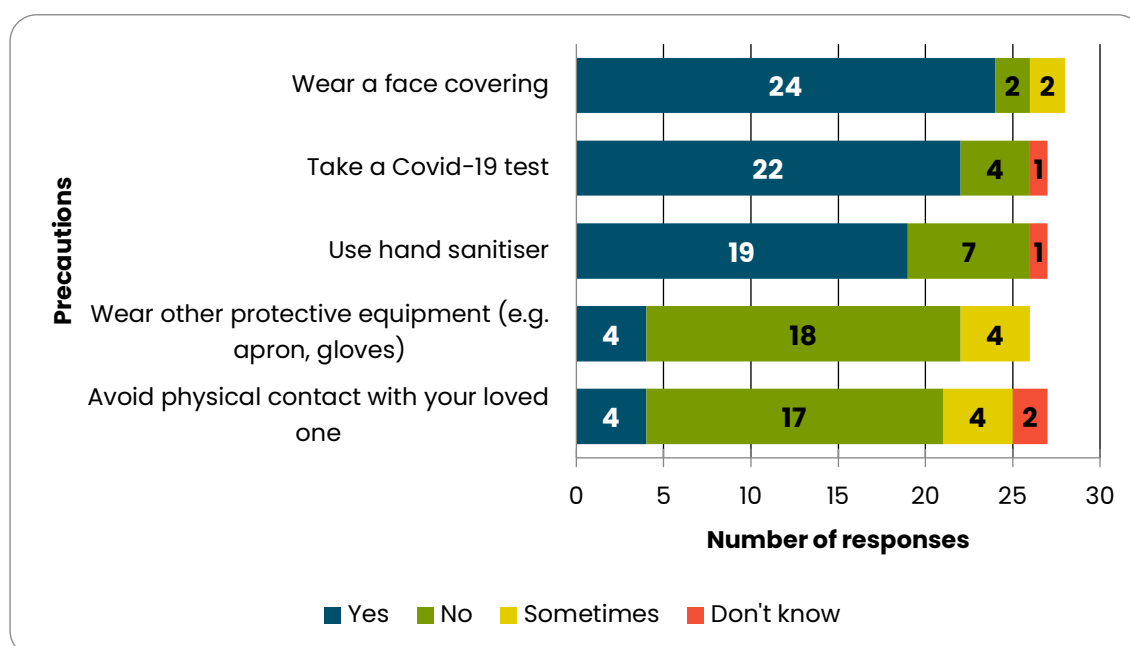
## How often do you visit the care home?

Fourteen people (50%) said they visited once per week, 7 visited more often, and 7 visited less often or at varied times.

## Are you asked to take any precautions when visiting the care home?

We asked people whether the care home staff asked them to follow precautions when visiting (see Figure 1).

**Figure 1. Precautions required by care homes**



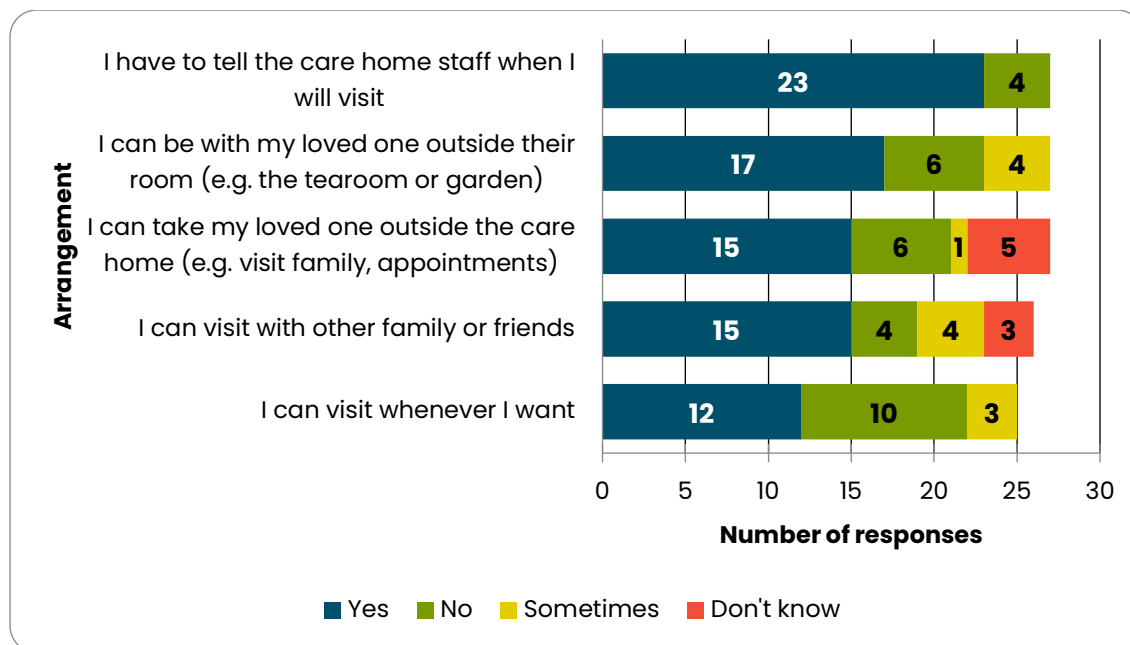
People told us that most care homes continued to require visitors to wear a face covering, show a negative Covid-19 test result, and use hand sanitiser when they

visited. A few people commented that care home staff also asked to check their temperature or gave them a form to fill in before entering.

### How are the visiting arrangements at the care home?

We asked about the arrangements that different care homes had in place to facilitate visits from family and friends. The results are shown in figure 2 below.

**Figure 2. Visiting arrangements in care homes**



Twenty-three people (74%) said they were expected to contact the care home in advance of their visit, while only 12 people (48%) said they could visit whenever they wanted. Some people found having to inform the care home inconvenient and frustrating. As one person said:

*“It can be frustrating to have to book ahead as it means that I can’t call into see him if I am in the locality for other purposes – it has to be specific time and day”.*

In contrast, another person who was able to visit care home whenever they wanted said, *“It’s wonderful now to be able to visit without an appointment”.*

Although care homes appeared to continue having some visiting restrictions, these seem to vary. Some people said that more visitors were allowed in the care home. Seventeen people (63%) said they could spend time with their loved one in communal areas such as in a tearoom or a garden, and fifteen people (56%) could take their loved one outside the care home. However, this suggests that other care homes still restrict where friends and family can spend time with their loved one.

Nine people commented that visiting restrictions had hardly changed or had not changed at all despite the introduction of new government guidelines. One person commented on the impact that ongoing restrictions had on them and their loved one in the care home:

*“Lack of physical contact and very short, strictly enforced, visiting periods are adversely affecting her mental health and causing us distress”.*

The naming of an ‘essential care giver’ was seen as a positive measure because it enabled close family members to visit at all times. However, at least one person in our survey was not told about or given the opportunity to be an essential carer, which meant they were unnecessarily prevented from visiting their loved one.

### **How safe is the care home environment from Covid-19?**

We asked people to tell us how safe the care home felt from Covid-19 infection. The results are shown in table 1 below.

**Table 1. Sense of safety in the care home**

	<b>Number</b>	<b>%</b>
Very safe	16	57%
Fairly safe	10	36%
Not at all safe	2	7%
<b>Total</b>	<b>28</b>	<b>100%</b>

Almost everyone said they either felt very safe (57%) or fairly safe (36%) when visiting the care home. Additional feedback suggested that people felt safe in care homes that continued to use sensible precautions (e.g. testing and face coverings) while also allowing flexible visiting and contact with residents. As one person commented:

*“Precautions are taken with testing and use of face masks. However, there is enough flexibility to be able to have some physical contact e.g. hugging, which is good for the mental wellbeing of both of us”.*

Two people (7%) said they did not feel at all safe – one person felt that the Covid-19 guidelines were confusing or inconsistent although did not specify which

guidelines these were. The other person believed that the use of agency care staff had increased the risk of infection.

### How has communication been from the care home staff?

We asked about aspects of communication between care home staff, residents, and family (see Figure 3).

**Figure 3. Quality of communication from the care home**

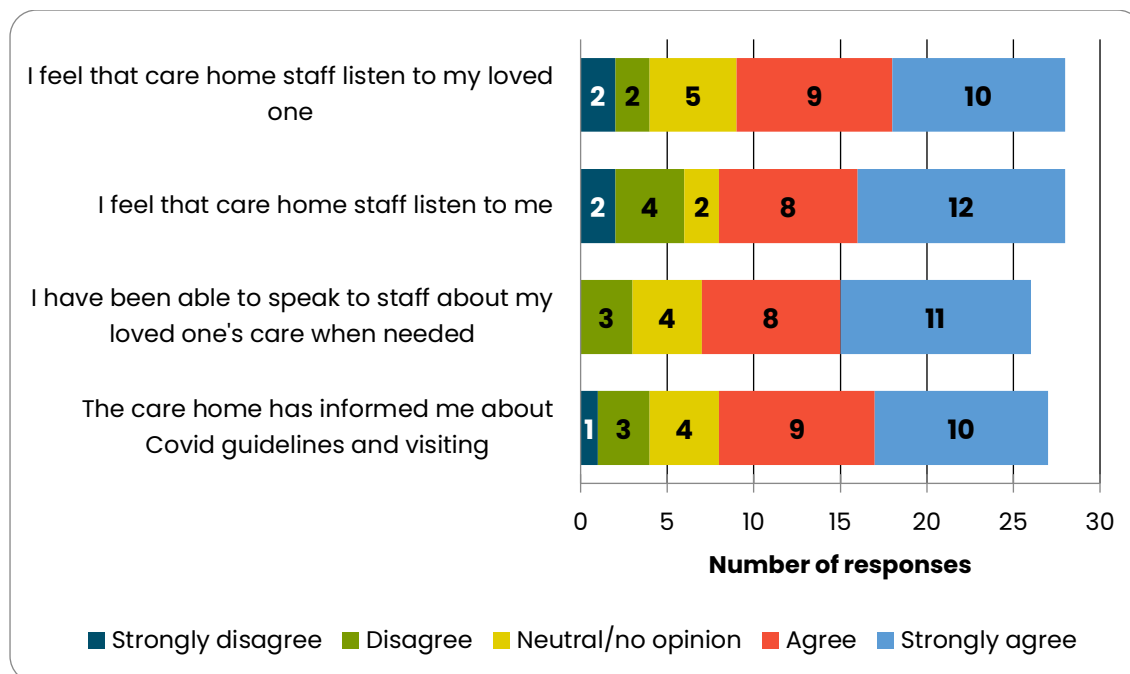


Figure 3 shows that most people felt care home staff listened to them and their loved one. They also said they were satisfied with the quality of communication about their loved one's care and how staff had informed them of changes in guidelines.

*“The care home has always kept me fully updated and have called me on occasions to talk to me Dad if he has been distressed through not seeing me. It was a great help”.*

However, we also heard from other people about poor communication in the care home they visited. Two people felt strongly that care home staff did not listen, one adding that they were made to feel like *“an inconvenience to staff”*. Some other communication problems included:

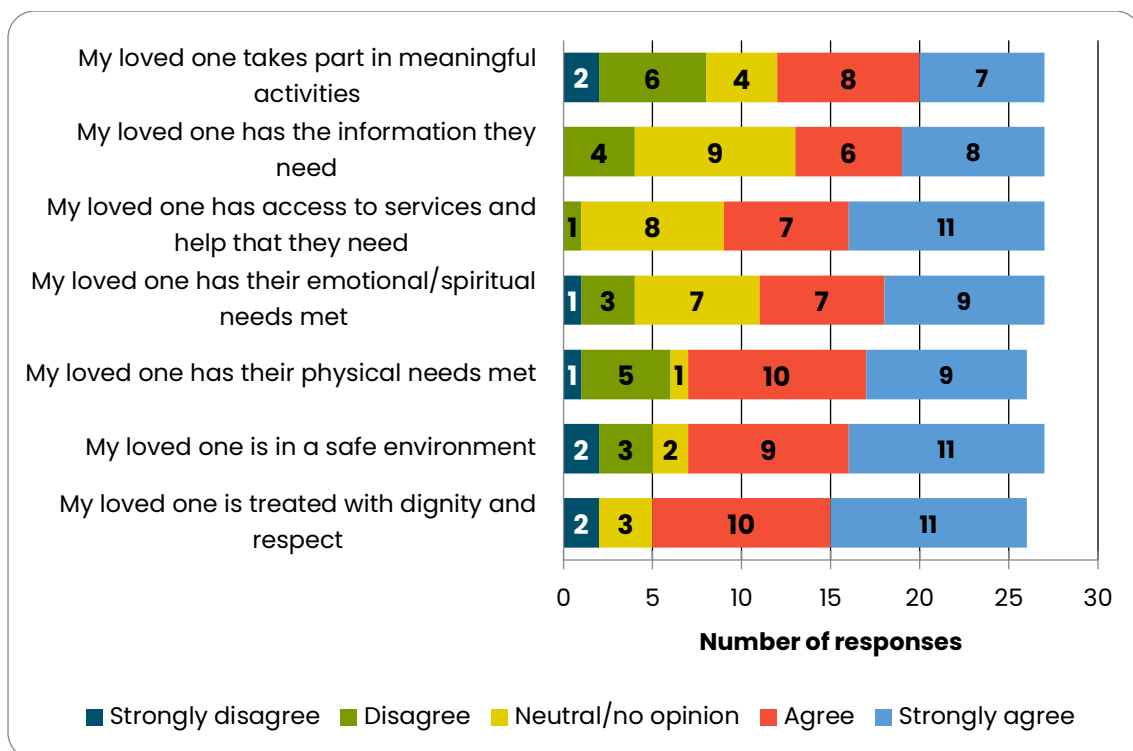
- Difficulty finding information or confusing and unhelpful information about Covid-19 visiting guidelines

- Incomplete or missing information (e.g. not being told a family member could be named as an essential carer)
- Poor or lack of communication to family members about their loved one's wellbeing

### How is your loved one's care in the care home?

We asked for people's opinions about the quality of care their loved one was receiving (see Figure 4 below).

**Figure 4. Quality of care at the care home**



As figure 4 suggests, most people felt their loved one was being treated respectfully, kept safe, and had their physical and emotional needs met. However, several people felt that staff shortages were having a negative impact on the quality of their loved one's care and their overall safety.

### What has the care home done well during the Covid-19 pandemic and what could be improved?

We asked people to tell us what they thought the care home had done well and what could be better. Areas that worked well included those care homes that had kept residents safe and provided high quality care, continuing to organise activities in the care home, and making sure it was safe to visit.



For example, one person said:

*“The care home has provided excellent care and supported me with information about my relative's care and every change in the regulations since admission. They have always done as much as they can to keep as many activities and opportunities open for residents at all times. They have proactively adopted an 'essential care giver' approach i.e. facilitating one regular visitor per resident during outbreaks (this has not always been as easy in other care homes)”.*

*“Nothing could be improved as the care homes carried out all restrictions and guidelines brought in by local and national government”.*

Family members valued good communication and being given up to date information. While this happened in some care homes, it was absent from others:

*“Kept everyone safe and well. Communicated with family and been kind and caring throughout. No sense of being “too busy” - always have time to discuss anything we need to talk about.”*

*“Better communication with families. They should be updating us rather than us having to chase them for information”.*

*“They are working very hard in difficult circumstances but it would be nice if there was more communication with relatives about visiting rules, e.g. a weekly bulletin and notification when things change as it's hard to keep up, with the situation subject to change at short notice due to Covid”.*

Some people were concerned about the impact that staff shortages had on safety and quality of care. One person commented:

*“They had kept it COVID clear for many months but that seems to have gone. Staff are at minimum levels with little time to show any compassion”.*

### **Which care home practices during Covid-19 maintained positive visiting experiences?**

Box 1 below summarises the experiences of one survey participant. It has been selected to highlight how facilitating social interaction while following infection control guidelines can improve the experiences of residents and their visitors.

### Box 1. Example of a positive visiting experience

The person visited their father 2-3 times a week. The care home required visitors to take a Covid-19 test, use hand sanitiser, and wear a face covering. However, visiting arrangements were convenient – visitors were not required to notify the care home in advance, could visit with other people, and were allowed anywhere in the care home.

The person felt that care home staff had followed Covid-19 guidelines and kept residents and visitors as safe as possible:

*“They have followed the rules completely and kept everyone safe and Covid free during the first epidemic. A few cases with the recent version, but nobody really unwell, including my Dad. I never felt he was at any risk”.*

They felt that care home staff had listened to them and their father, and had communicated well about Covid-19 and visiting guidelines:

*“The care home has always kept me fully updated and have called me on occasions to talk to my Dad if he has been distressed through not seeing me. It was a great help”.*

They said the level of care that staff provided to their father was excellent and that his physical and emotional needs were met. The staff organised meaningful activities but residents were given the choice whether to take part:

*“My Dad doesn’t always join in activities but that is his choice. He’s happy to sit and watch a lot of the time. Always plenty going on for residents”.*

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## 4. What next?

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The Covid-19 pandemic has been a hugely difficult time for care home residents, their family and friends, and for staff. The results of this latest survey represent a small number of people and we do not know about the experiences of others or the conditions in other care homes. However, the people who shared their recent experiences told us that:

Most care homes are applying government Covid-19 guidelines to allow more visitors whilst keeping residents and their family members safe.

- We urge care home managers to continue to facilitate safe and flexible visiting for family and friends. Staff are well placed to balance the risks associated with infection with the benefits of positive experiences of meaningful visits and for reducing residents' social isolation. In this sense, it is important to find ways for families to safely spend quality time with their loved ones. All residents should also have the opportunity to take part in meaningful activities.

Areas for improvement at some care homes include communication with residents and family members, and ensuring quality time together during visits. The Care Quality Commission (CQC) require care homes to maintain adequate staffing levels are, and management must ensure compliance.

- Care home staff should ensure that residents and family members are kept up to date with clear, understandable information about the Covid-19 situation in their care home (e.g. potential outbreaks), changes in visiting guidelines, and the reasons why precautions are in place. This might need to be in a simplified format (i.e. not copied verbatim from a government website). Oxfordshire County Council can assist with this process.

These practices are even more important when rates of infection rise or guidelines changes, when the situation becomes more uncertain and confusing.

Healthwatch Oxfordshire seek assurance from Oxfordshire County Council that Public Health and Adult Social Care are liaising with and supporting care home managers to facilitate safe, flexible visiting arrangements in line with current Government guidance.

Healthwatch Oxfordshire will continue to seek the views and experiences of care home residents, their family and friends, as well as care home staff.

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## **5. Response from Oxfordshire County Council**

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We received the following response to our report from Jason Felstead, Quality and Improvement Lead (Interim), on 15 July, 2022:

Oxfordshire County Council has worked closely with care home providers to disseminate guidance and provide support around the pandemic and will continue to do so. The Health and Social Care Bronze cell consists of representatives from OCC, Oxford University Hospitals NHS Foundation Trust, Public Health, Oxford Health NHS

Foundation Trust, Oxfordshire Association of Care Providers, Oxfordshire Care Homes Association as well as individual providers. This group meets fortnightly to discuss issues relating to covid as well as other pressures around the care system. This meeting proved valuable during the height of the pandemic as a place to share information, assess trends around vaccinations and workforce capacity.

The council understands the effect that guidance around visitation has had on residents and their families and that is why the work with the capacity tracker has been so useful. The information shared around outbreaks through this tool allowed the system to target care homes where support was needed and link them with UK Health Security Agency around outbreak management to allow them to reopen as quickly as possible while maintaining safety for the people receiving care. The capacity tracker will remain a tool for providers to share information around workforce pressures as we move forward.

Above all of this the council's Quality Improvement Team work closely with care homes to provide day-to-day support, updates and bulletins. Each home has an assigned officer and the team have an emergency number for providers to contact should they need an urgent response.

**Jason Felstead**

***Quality and Improvement Lead (Interim)***

Oxfordshire County Council