



Visiting Beyond the Pandemic: Reviewing Hertfordshire's Care Homes

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healthwatch
Hertfordshire



Executive Summary

Restrictions and visiting policies in care homes have changed dramatically throughout the pandemic.

Concerns about flexibility of visiting times and lack of clarity about restrictions led us to explore what information was available. We did this by reviewing the information published on care home websites in Hertfordshire around visiting guidance and restrictions.

Eleven of our volunteers audited 135 care home websites. We also ran an online survey and held interviews with residents and their loved ones to explore their views and experiences.

Key findings

20% of care homes had not updated their websites about visiting during the pandemic and had little or no information on Covid-19.

Only **49% of** care home websites had information about the 'Essential Care Giver' role.

Visiting information is usually generic to the Care Home group and might not reflect what is happening in the individual home.

Visiting information was generally easy to find, although websites often used different headings for information about visiting, which could be confusing for loved ones.

There were some excellent examples of what care homes had done to facilitate care home visiting or to support families, such as online booking systems, visitor pods and helplines.

The focus of care homes' website home pages were mainly on providing information to potential new residents rather than existing family and friends.

Using our findings, we produced a number of suggestions for improvement, which aim to help care homes and other care providers across Hertfordshire deliver a positive visiting experience for residents and loved ones.

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About Healthwatch Hertfordshire

Healthwatch Hertfordshire (HwH) represents the views of people in Hertfordshire for health and social care services. We provide an independent consumer voice for evidencing patient and public experiences and gathering local intelligence with the purpose of influencing service improvement across the county. We work with those who commission, deliver and regulate health and social care services to ensure the people's voice is heard and to address gaps in service quality and/or provision.

Background

Throughout the Covid-19 pandemic, strict visiting restrictions were enforced in care homes for the safety of residents. These restrictions have had a considerable impact on residents and their loved ones, including on residents' physical and mental health. When isolation periods continued for many weeks the impact was particularly pronounced for those with dementia, learning disabilities and mental health issues.

Care homes and supporting health and social care organisations have worked hard to prevent and control infections. Actions included entering into isolation periods at times of outbreak and putting strict visiting measurements in place to reduce the risk of Covid-19 spreading throughout the home.

Throughout the pandemic in line with its ever-changing nature restrictions and visiting policies have been revised. In March 2021, government guidance introduced the role of the Essential Care Giver (ECG), which aimed to ensure that every resident could have support and companionship from a loved one. Importantly, ECGs were able to visit under all circumstances, including during periods of self-isolation and outbreak. This change in guidance recognised the vital role loved ones have in ensuring the positive wellbeing of care home residents.

However, there were concerns around what this role meant in practice, as well as concerns around flexibility with visiting.

In April 2022, the guidance changed with a focus on learning to 'live safely with Covid-19'. Visiting restrictions eased and returned mostly to pre-

pandemic policies, except for in times of an outbreak, during which care homes should risk-assess the situation and activate a tailored visiting policy. A clear part of the policy, however, is that a named visitor (this was previously called the 'Essential Care Giver') can visit a loved one in a care home at any point, including during outbreaks.¹ Unlike the Essential Care Giver this person does not have to be a relative and the 'named visitor' role does not have to be the same person each visit.

Until the pandemic, visiting a loved one in a care home was a relatively simple exercise, meaning websites did not have to focus on the different rules and regulations around visiting and tended to concentrate on promotion of the home for prospective residents. As the pandemic progressed, care home websites had to try and keep pace with the changes to keep residents and their loved ones informed.

Due to concerns around flexibility of visiting and the fact that not everybody always has a clear idea of what restrictions are in place, we wanted to establish what information is available on care home websites in Hertfordshire for family and friends around visiting guidance and restrictions.

Why is this work important?

Going forward, there may be further outbreaks that impact care home visiting, whether this be Covid-19 or other infectious diseases such as flu. There has been a lack of consistency in the past, so this work aims to achieve consistent standards across care homes within Hertfordshire and improve visiting experiences.

What we did

Eleven Healthwatch Hertfordshire volunteers helped to audit 135 Hertfordshire care home websites in March 2022 to learn what information

¹ In the event of an outbreak, each resident should be able to have one visitor at a time inside the care home. This visitor does not need to be a family member, and could be a volunteer or befriender.

was available for family and friends about visiting people who live in a residential care or nursing home.

In April 2022, new guidance on visiting care homes was issued. As a result we re-audited 44 care home provider websites which covered the majority of homes in Hertfordshire. This enabled us to find out which care homes had updated their website. (See Appendix A for list of providers we audited).

Alongside the audits, between April – July 2022 we ran an online survey and held interviews with residents of care homes and their loved ones. We wanted to explore how they felt about the restrictions that were in place, and whether they experienced risk-assessed flexibility for visits. In total, we heard from 10 relatives/friends of people in care homes; 6 survey respondents and 4 interviewees.

With the support of the Hertfordshire Care Providers Association (HCPA), we also encouraged care home managers to complete a survey or an interview about their experiences of facilitating visiting to their care homes. In line with the latest guidance we felt this would provide an opportunity to share good practice and understand future challenges.

Despite the offer only one care home manager came forward to be interviewed.

Limitations and learning

Limitations

- At the time of scoping this research, restrictions were still in place on visiting in care homes. New guidance in April 2022 changed this and except during periods of outbreak, completely eased all visiting restrictions. As we only heard from 10 relatives/friends of people in care homes, it is likely that the timing of the survey meant that many people were no longer facing visiting restrictions and in turn, didn't feel the need to share their views and experiences.
- It is possible that engagement with this work would have been stronger had we adopted face-to-face engagement methods.

However, given the infection rate of Covid-19 at the time of engagement, we did not feel that face-to-face contact, with potentially vulnerable people, was appropriate.

Learning

- Despite only hearing from a limited number of respondents, they do highlight particular challenges that were faced around visiting. It is important to take note of the findings in this report, as we approach Autumn and Winter, with a higher likelihood that visiting restrictions may come back into place.

Key Findings

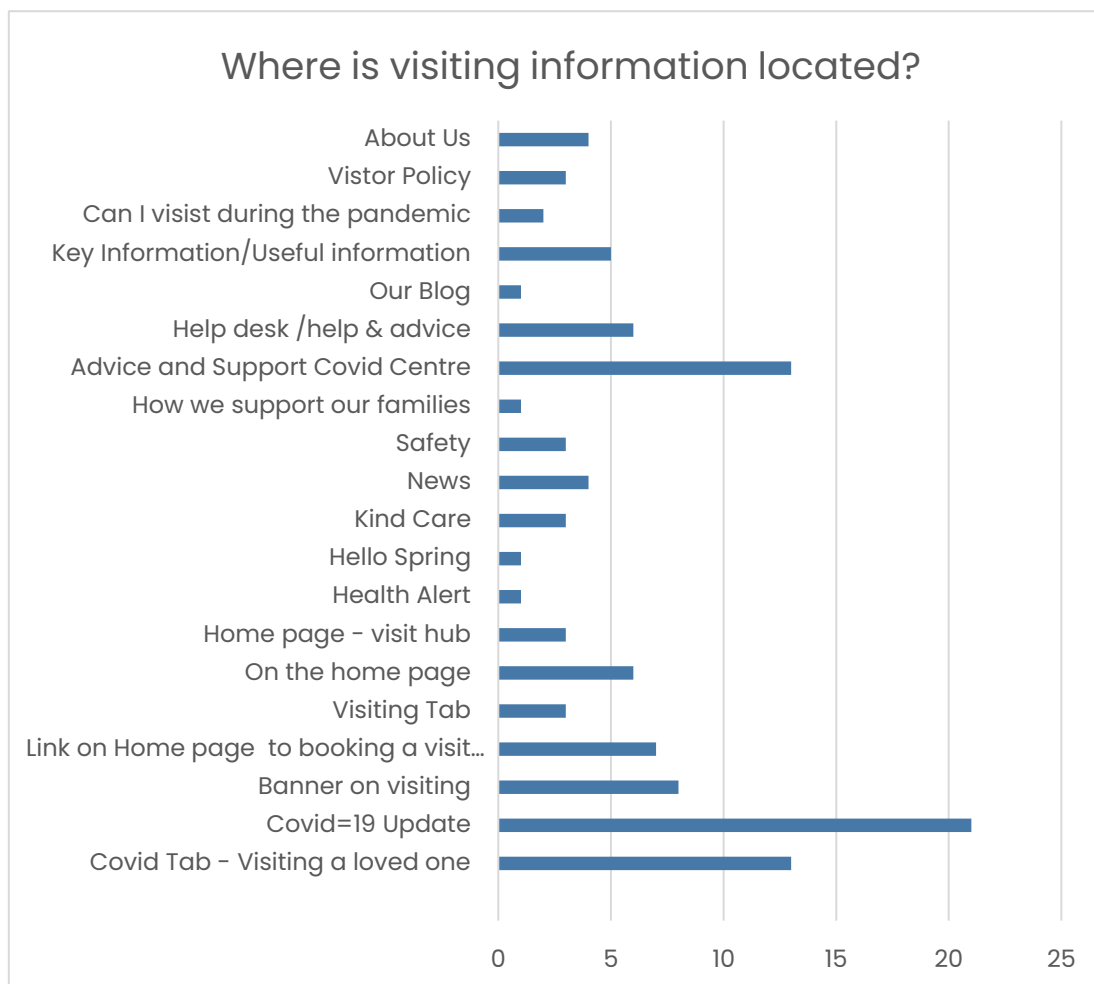
This section presents the key findings from both the audit of care home websites, as well as surveys and interviews with relatives of care home residents.

How easy is it to find visiting information on your care home's website?

Information on visiting a resident appeared in a variety of places on care home websites. The most popular was via a 'Covid-19' or an 'Advice and Support' tab. Homes that are part of a group usually had a link to the company's Covid-19 information. However, this meant that policies in the individual homes may have been different to the advice on the company's website, and in some cases, people were advised to ring the home for further information.

Volunteers generally found that for the care homes that provided information on visiting since the start of the pandemic, 77 of the 135 care homes audited had easily accessible information. However, 27 care homes had not updated their websites at all and provided no Covid-19 information. It is important to note that these homes were following government guidance and infection prevention and control measures, they had just not updated their websites to reflect this.

Visiting information that was harder to find was often under less obvious website tabs such as 'Kind Care', 'News', or 'Health Alert'. For some websites, information under the 'Covid-19' tab could be difficult to find, and volunteers had to navigate through several different pages on the website to find information.



Some care homes had a number of excellent guides for families, not only covering the guidelines but also hints and tips for different circumstances, for example, visiting somebody with dementia. However, volunteers found that these were often hard to find and easily missed.

"This would depend on how a visitor expected the information to be labelled. If you assumed it would relate to COVID restriction, then yes. If, as I was, you were looking for information labelled as 'visiting', then you'd be hunting around longer and might reasonably assume that the outdated information in the 'Key Information Guide' was all there was. I eventually found it under the 'Kind Care' tab, then 'visiting our care homes', and if you are lucky you find the really good relative's visiting guide." (Volunteer auditor)

It is also important for information to be easily readable and accessible. One volunteer commented:

"Bearing in mind that many people using these sites may be more mature in years, they were not easy to read. Print was often small and font very pale colour like grey, lilac and pale blue."

Generally speaking interview and survey respondents found that information on visiting restrictions was not forthcoming. It was often necessary for them to phone the care home and speak to a receptionist to get up to date information. Where care homes were part of a group with an overall policy sometimes we were told that generic emails were passed on with information that did not match local arrangements in place at individual care homes.

"I've got quite friendly with the people that work there. The girls on reception and also the girls that do the caring on the unit. And so I take the opportunity to talk to them. The girls on the units don't tend to know so much because of the communication problems. But those on reception obviously they are sending the emails. So I take the opportunity to talk to them as much as I can just to find out what's going on, generally, and whether it's going to affect me or not."

Is the information provided up to date?

With advice from the government changing monthly, information needed to be updated regularly to keep track of the changes. The majority of care homes had updated their information in January, February or March 2022.

There were 35 websites that didn't publish the date that information was updated, and so it was difficult for volunteers to tell how up to date information was. However, 21 care homes had information on their websites that was clearly out of date.

Following changes to guidance in April 2022 and our re-assessment of the major 44 providers in the June we found that just over half had updated their website to provide information on the new guidelines.

As before, some respondents highlighted that information was not always easy to find, and one respondent talked about how it was outdated.

"The care home have not published their policy on visiting. It still has guidance from March 21 on their door. It's only because I questioned why I couldn't come in that they allowed it to happen. I was never informed about the essential carer status."

Overall there is a mixed picture about visiting information provided by Hertfordshire care homes, with some regularly updating information and others being less likely to do so.

What does visiting look like?

We also explored what visiting itself looks like; whether visitors need to book, whether visits were time-limited and where in the care home people could visit.

Prior to restrictions easing in April, most care home visits had to be booked with a choice of venues, for example, in a resident's room, in a pod or in the garden. Some websites were not very clear about what was on offer and recommended phoning the home to find out more.

This approach probably reflects the different physical layout constraints and safety requirements at each care home. In such cases guidance and decisions about visiting direct from the care home manager was more relevant than generic guidance from head office.

Some homes had made the most of technology and were offering an online booking system for room, pod or garden visits, whilst maintaining the opportunity to book over the phone. One care home manager told us they had:

"Bought a marquee for the garden with a Perspex viewing arrangement and supporting hearing with an 'ear' to enhance hearing."

Again, there appeared to be a lack of consistency about the length of visits. We found that some homes were limiting the time for a visit but for others it was unclear.

Our six survey respondents talked about their visiting experiences during the period May to July 2002. At the time only one of the care homes was in an outbreak which in line with government guidance meant no restrictions apart from mask-wearing in communal areas. Whereas the care home in an outbreak had in place all restrictions including PPE, testing and visiting limits)

Across all respondents, there were mixed reviews on how people felt about restrictions;

- some people felt that measures kept their loved ones safe
- others felt that the restrictions were negatively impacting the wellbeing of their loved ones
- whilst others felt that to continue to keep people safe some of the restrictions should not have been eased in April.

For example, even though mask-wearing is still encouraged, this is not always practiced by everybody visiting a care home. In particular, people felt that they were not involved in the decision-making around visiting and that their loved one's needs and wellbeing were not always taken into account.

"Happy with the care received, but until recently close contact with a loved one was not seen as beneficial. The only aim was to prevent COVID getting into the home...As a family member I have not been able to influence the home to allow me to visit."

"Very difficult in the past not to have proper access to my wife. Risk to other residents was seen as the most important aspect with the rules set. Rights to family life were not recognised at the time."

"Give more time to take views of families into account. The care home rules have not been negotiable."

"I think they really need to consider asking visitors to do lateral flow tests again and to encourage mask wearing, especially with how many people have COVID at the moment...we know it's dangerous and we know they are at risk. I think it would be sensible for them to do that again and it would make us feel more safe too."

Some respondents talked about how this was particularly upsetting when their loved one required additional support, for example, if they had dementia. People told us that due to communication issues short telephone calls were no replacement for visiting and that they were left with no understanding of how their loved one was coping or being cared for.

"I would phone in and they would try and get her to talk. But since she lost the ability to do that, it was not very satisfactory. I continued to do it on a regular basis but of course, it didn't substitute for being able to visit. I was really glad when I was able to get in there again."

"It wasn't a meaningful Zoom call anyway because as I say, she couldn't grasp what was going on I don't think. All I would do is just say hello. I think by that time she couldn't hear or understand anything."

One respondent talked about losing his wife in a care home and being unable to visit.

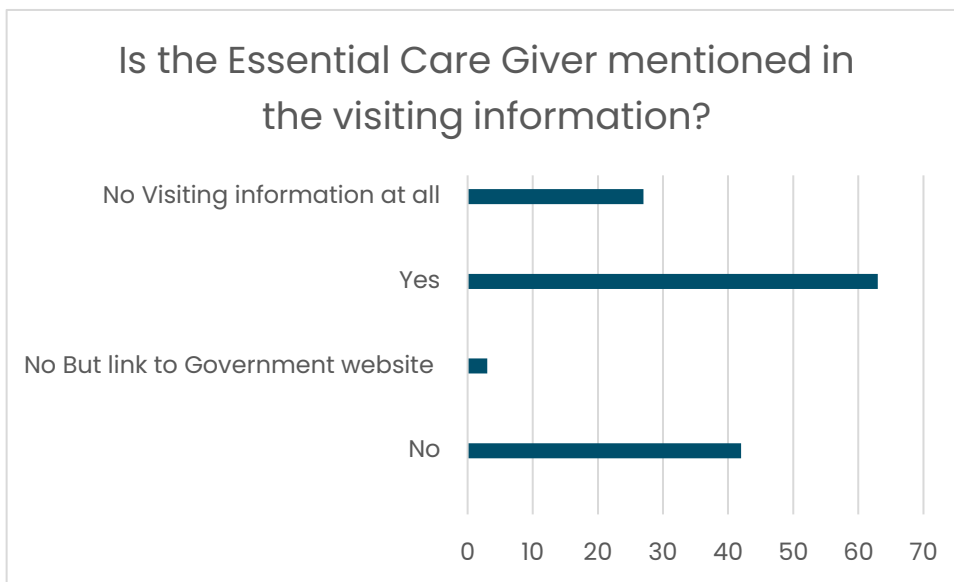
“That was the worst bit, not knowing what was going on. I still think if I had been able to go and see her, I might have seen some signs towards the end that she was fading away. But I’ll never know.”

In December 2021 the Care Quality Commission (CQC) said this about the role of the Essential Care Giver:

We expect providers to follow government guidance on visiting. This clearly sets out that all care home residents can choose to nominate an essential care giver who may visit the home to provide companionship and additional care and support. The essential care giver should be enabled to visit in most circumstances, including if the care home is experiencing an outbreak of COVID-19 infections. Where we have any evidence that this is not happening, we will continue to take action.

In March 2022, 66 of the 135 care homes mentioned the Essential Care Giver (ECG) role. The information published ranged from a link to the government website, a general overview of the role or very detailed information about the expectations of the ECG and a complicated application process. Others had no information on how to become an ECG. However, some websites actively encouraged people to speak to the care home manager about the role.

One care home called the role the ‘Essential visitor’ to make it easier to understand. This care home encouraged people to take up this role, and offered for alternative people to visit if the named person couldn’t visit as planned.



For the re-audit in June, we found that most of the care homes that had updated their information also included information about the ‘named person’ who could visit at all times, including during an outbreak.

Responses from survey respondents and interviewees showed that the role of the ECG/named visitor was not always consistently put into place. For example, 3 survey respondents were able to visit in this role, but 2 were not. Also, 2 survey respondents who visited regularly throughout the pandemic were also unaware of the role of the ECG/named visitor until much later.

“There was an outbreak in November time and no one could visit...I don’t remember there being any measures in place when there was the November outbreak. They tend to call us if Nan is a bit upset or having a moment for us to try and settle her but they didn’t put any plans in place instead of visiting, no.”

Conclusion

The website audit made it clear that many care home providers embraced the challenges presented by the Coronavirus pandemic and were able to provide improved technology and alternative visiting solutions that were both responsive and valued. These included designated visitor pods, iPads, Skype facilities on large screens and a visitor helpline.

Within the limits of infection prevention and control, layout and size of the care home, there was evidence on the websites and from family reviews² that homes tried to enable visiting where possible, and in particular tried to maintain celebrations for important occasions such as birthdays.

Although respondents were mostly grateful to the care homes for the care they provided, and recognised the challenges of Covid-19, they typically felt that measures could not replace face-to-face, close contact and were relieved when they were able to re-enter homes and visit their loved ones regularly.

Infection prevention and control is a key topic for regulators and commissioners for keeping people safe, especially as we 'learn to live safely with Covid-19'. This means that care homes may have been reluctant to ease visiting restrictions, for example allowing unlimited visitors without booking, as this may have compromised good infection prevention and control practices.

The re-audit in June showed that care homes have mainly struck a balance between easing restrictions to a pre-pandemic level and maintaining measures that have been successful for preventing the spread of Covid-19. For example, booking systems remained in place initially for some to safely manage the flow of visitors. Although lateral flow testing has not been required since April 2022, we found that many homes were still requesting visitors to test prior to visiting to protect their loved ones. Some homes went a step further and were prepared to offer free LFTs to visitors. Some respondents were happy to test before visiting, and one respondent told us this should be encouraged for everybody's safety.

In terms of information provided on websites, our volunteers found that larger care home provider websites generally had a dedicated page for each care home, with generic information on visiting. However this was easily missed. In contrast, some of the smaller homes despite providing less information were easier to navigate and felt more approachable.

We found that there were no obvious sections for family and friend visiting, and less than half of the websites provided information on an Essential Care

² Reviews from families can be found on www.carehome.co.uk

Giver role. Where this information was mentioned, it generally wasn't comprehensive.

It is likely that we will get more Covid-19 or flu outbreaks as we approach Autumn and Winter. Visiting must be prioritised and ideally, any changes to visiting policies should be regularly reviewed in consultation with residents, families, carers and workers.

Suggestions for Improvement

Based on the findings presented within this report, we have produced a number of suggestions for improvement³, which aim to help care homes and other care providers across Hertfordshire to provide a positive visiting experience for residents and loved ones.

Communication

1. Care homes should ensure that their websites provide comprehensive information required by residents and their loved ones by:
 - a. Reviewing and updating the content of their website regularly.
 - b. Ensuring that visitor information and guides are easy to find.
 - c. Ensuring that information is well-designed and easy to read, for example, using accessible fonts and colours.
 - d. Ensuring that websites can be accessed and viewed on mobile phones and smart devices.
 - e. Commissioners should encourage care home providers to engage with families, carers and friends in the their website reviews to ensure information is user friendly and fit for purpose. Commissioners should consider building this requirement into contracts and ensuring there are resources in place for it.

2. Care homes should continue to explore social media, such as Facebook and Twitter, as ways for families and friends to keep up to date on restrictions and activities.

³ These are not formal recommendations which required a response from services/providers.

3. In addition to address and telephone information, care homes should obtain the email addresses of family and friends where possible and appropriate so that important changes to visiting can be communicated efficiently and quickly.

Infection Prevention and Control

4. The Hertfordshire and West Essex Integrated Care System should consider providing care homes with additional lateral flow tests when there is an increase in Covid -19 infections in the community so that visitors can be sure they do not have Covid-19.
5. Care homes should continue to remind visitors to wear face masks in communal areas to prevent the spread of infection.

Thank you

We would like to thank all those that supported this work including our volunteers, members of the public and organisations such as Carers in Hertfordshire, Age UK Hertfordshire, Hertfordshire Independent Living Service, Crossroads Care, Alzheimer's UK (Herts and Essex), Hertfordshire Care Providers Association, Hertfordshire County Council, Healthwatch Leeds and Healthwatch Cambridgeshire and Peterborough.

Appendix

A. Care Homes with websites @ 01.03.22

Care Homes with Nursing	55
Residential care (care home only)	80

Care Providers	Number of Homes in Hertfordshire
3a Care (London)Ltd	1
Abbeyfield Member Societies	1
Ambient	1
Avery Healthcare	1
B&M Care Homes	16
Barchester Healthcare	3
Benslow Care Homes	3
Brighterkind	1
Bupa	7
Care UK	2
Carebase Ltd	1
Caring Homes Group	3
Country Court	1
Eleonor Nursing and Social Care Ltd	1
Forest Healthcare	1
Four Seasons Health Care	1
Goldcare Homes	5
Gospel Standard	1
Greensleeves Care	1
Greenswan Consultants Ltd	2

Halycon Care Homes Ltd	2
HC One	3
Healthcare homes	2
High Town Housing Association	1
Lower Green Ltd	1
Maison Moti Ltd	1
Maria Mallaband Care Group	1
MHA	2
Newton Chinneck Ltd	1
Nouvita	1
Oak Cottage Care	1
Quantum Care	19
Ramsey Health Care	1
RNJ Care	1
Runwood Homes	5
Sanctuary Care	1
Signature	4
Sunquest Homes	1
T L C Care	2
The Royal Masonic Benevolent Institution Care Co	1
The Salvation Army	1
Trusted Care - was RMD Care	2
Westgate Healthcare	4
Wilton House Ltd	3
Single Homes	21

B. District Care Homes location (as of 01.03.22)

