

# **Home Care Workers' Views on Infection Prevention and Flu Vaccines**



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# About us

We are an independent voice for the people of Derbyshire. We are here to listen to the experiences of Derbyshire residents and give them a stronger say in influencing how local health and social care services are provided.

## Our mission

We are a strong, independent, and effective champion for people that use health and social care services. We will continue to influence health and care services and seek to improve joined-up care for the people of Derbyshire.

## Our vision

We want to see consumers of health and social care services being put centre stage so that service providers and commissioners listen to what they have to say and use their voices to shape, inform and influence service delivery and design.



# Summary

During September and October 2025, we collected the views of 129 professional (paid) home care workers ('workers') on Infection Prevention (IP) and seasonal influenza (flu) vaccinations.



**IP means helping to stop the spread of germs in places where people receive care. This includes things like washing hands, cleaning properly, and wearing protective gear (like gloves, masks and aprons).**

The survey was done alongside 11 semi-structured interviews.

We advertised the survey on social media and shared it with our contacts working in health and social care, including the voluntary sector.

We also contacted home care providers offering a service in Derbyshire, asking them to advertise the survey to their staff teams.

This was a commissioned (paid for) piece of research that we co-produced with, and was funded by, Public Health at Derbyshire County Council (DCC).

For this project, we wanted to know:

- Whether home care workers feel IP is an important part of their role
- Whether home care workers have had the flu vaccination themselves
- Where home care workers get their information from
- If they face any challenges specific to their role and working environment
- If there are things that could make IP or getting the flu vaccination easier.

## Key information

- We heard from home care workers across the whole of Derbyshire and Derby City
- 56% of workers who completed our survey told us which organisation they worked for. We had feedback from workers working for 19 different organisations.
- We heard from both workers who are new to the profession, and workers who have worked in home care for many years

- It must be remembered that surveys like this attract people who either have very strong opinions or who are passionate about their work. Therefore, the feedback may not be representative of all home care workers.

## Key findings – Infection Prevention

- Paid home care workers responding to our survey were committed to keeping people safe from infection, with 98% saying it was important or very important
- Most workers (87%) were either very confident or extremely confident about their ability to prevent the spread of infection. They explained this by telling us the actions they personally take, such as correctly wearing personal protective equipment (PPE) and maintaining good hand hygiene
- Only one worker told us they were not so confident about preventing the spread of infection in their role. They said that was because they were expected to work when ill
- 12% of workers said they were 'somewhat confident' about their ability to prevent the spread of infection in their role. Their confidence was reduced by their inability to control the actions of others, limited control of the home environment, or difficulties getting a GP appointment to look after their own health
- 97% of workers said they had the right equipment and information to prevent the spread of infections. However, there was some criticism of the quality of the PPE and having to collect supplies from their employers' office at their own cost
- Key motivations for workers taking action to reduce the risk of the spread of infection are to:
  - Protect the vulnerable people they care for from the impact of infections, helping them to remain at home, reduce hospital admissions and maintain quality of life
  - Protecting themselves to stay healthy so they can work and maintain earnings
  - Protect their family, friends, colleagues and community from illness.
- Home care providers are providing their employees with training programmes. A large proportion offer online training courses

- There were several suggestions that face-to-face training would be preferred. Some workers said this would aid learning and they would more likely be paid. However, some said online training was helpful for them.

## Key findings – flu vaccinations

- The home care workers' feelings towards the flu vaccinations were not as positive as IP. However, 75% of workers had the vaccination every, most or some years, or plan to this year
- Those who felt positive about receiving the vaccine identified the benefits of the vaccine in minimising the symptoms of flu and preventing its spread
- Workers who were not positive about the vaccine expressed doubts about the vaccine's ability to protect everyone from flu due to multiple flu strains
- Some workers suggested they didn't need the vaccination because they were fit and healthy
- Many who did not receive the vaccine described having experienced side effects or illness following a previous flu vaccine
- Whilst some workers were unaware of their eligibility (12%), most said it had previously been easy to get the vaccine. They only needed to show their work ID as evidence of eligibility
- Those who had found it more difficult to arrange their flu vaccination highlighted the difficulties with their shift patterns and short notice of rotas, making booking hard. Pharmacies that offered walk-in vaccinations made access easier
- There was a lack of clarity from professionals (GPs and pharmacists) as to whether home care workers are eligible for free NHS flu vaccinations this year
- Some professionals had been told that home care workers were no longer eligible. We shared the website reference with workers so they could show their eligibility as health and social care workers: [Flu vaccine – NHS](#)
- There was no single solution to influence the workers' decisions to have the vaccine. All options listed in our survey were welcomed.

Key things they suggested were:

- Clear information from trusted sources about the vaccine
- Encouragement, training and discussion about the vaccine from their employer

- Flexible or walk-in appointments at pharmacies during paid working time
- Reminders from their GP to book an appointment
- That the flu vaccination should remain free of charge for home care workers.

## Key suggestions

- Ensure that each flu season, GPs and pharmacists are aware of home care worker eligibility for the free NHS flu vaccination
- Provide clear flu vaccination information for home care workers. Information to include workers' eligibility to free vaccinations, the benefits of, and where to get the vaccinations
- Encourage pharmacies to offer walk-in appointments and share locations with home care workers.
- Maintain wider NHS staff and public awareness about how to prevent the spread of infections
- Consider building trust and ongoing relationships with care providers to enable further research with home care workers who are harder to reach
- Encourage providers to offer a mix of online learning and face-to-face training
- Feedback to providers that workers say that more training and regular updates could improve their confidence
- Develop a process for workers to raise concerns about the quality or supply of PPE and raise with Public Health if required.

# Why we did this project

## Working with Public Health at Derbyshire County Council (DCC)

Our role is to listen to people who use health and social care services. We make sure that your feedback is heard by those who make decisions.

Public Health at DCC wanted to know the views of professional home care workers about IP and where they get information about IP from.

They also wanted to know the workers' views on flu vaccination and what might influence their decision about whether to get the flu vaccination.

Feedback about infection prevention and flu vaccinations was gathered to influence:

- Promotion and accessibility to the seasonal flu vaccination programme in Derbyshire
- Information available to paid home care workers about their role in preventing the spread of infections.

# How did we do it?

## **Engaging with professional home care workers in our survey and interviews**

We co-produced a survey and semi-structured interviews with DCC Public Health team, and our volunteers.

The survey was made available in the following ways:

- Online survey link
- Leaflets/posters with QR code to the online survey.

We sent the survey to our local contacts working in social care, health and the voluntary sector.

We worked with a Derbyshire home care provider to help with the wording of our communications to suit home care providers and workers.

The survey was emailed to 240 home care providers as listed in DCC's Derbyshire Care Services Directory in association with Care Choices.

We worked with Derbyshire Carers Association to make the wording of our communications appeal to unpaid carers. Derbyshire Carers Association shared the survey via their own communication channels and their carer support team.

We put the link to our online survey in our E-bulletin and on our website. It was also shared on social media on Facebook, X (formerly Twitter), LinkedIn, Bluesky and Instagram.

One of the survey questions asked workers to give their contact details if they were willing to discuss their views of IP and flu vaccinations further. We were able to offer a telephone interview to everyone who put themselves forward. We used the interview to learn more about their survey answers.

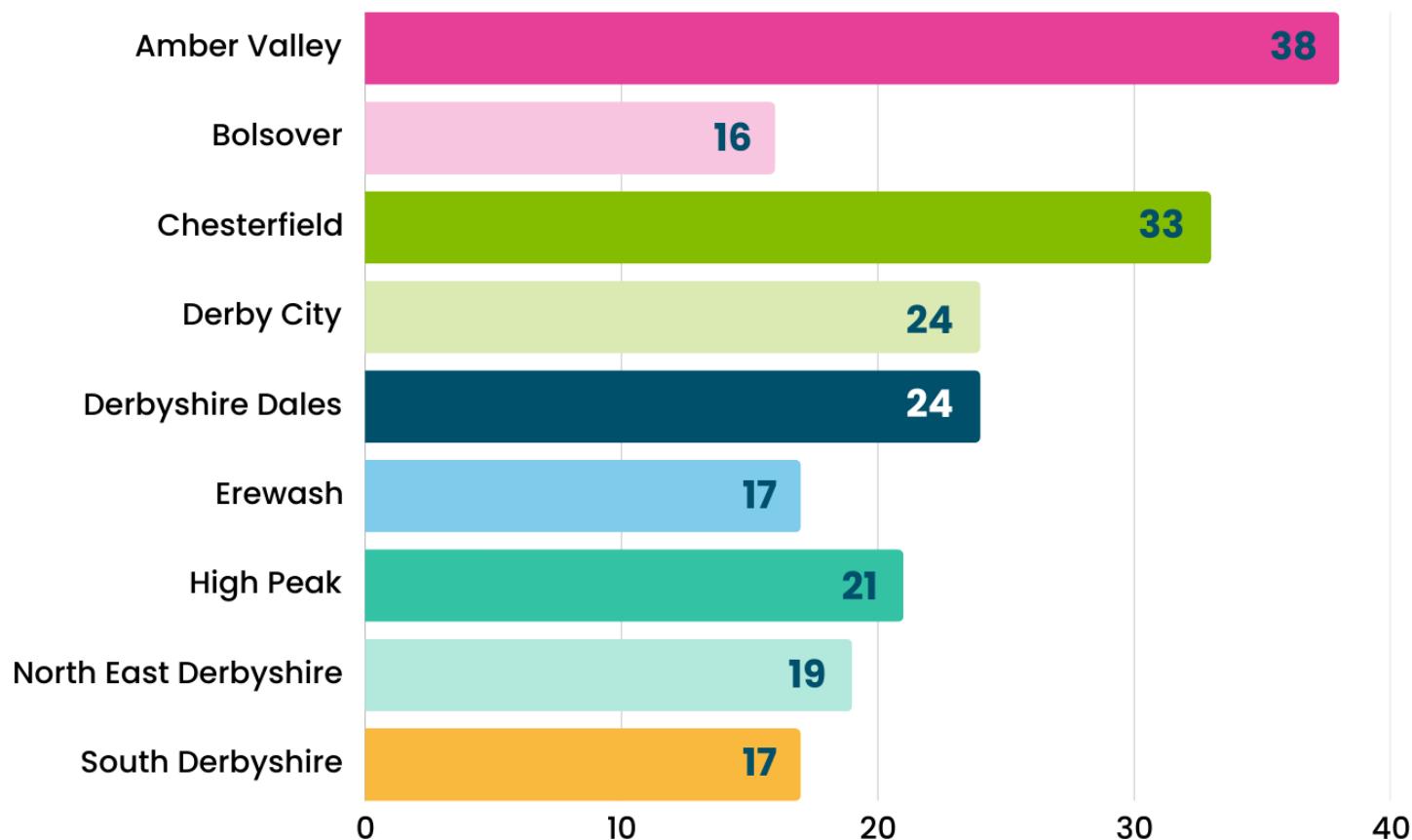
We offered workers completing the survey the option of entering a prize draw for a £25 shopping voucher. All those who spoke to us further in semi-structured interviews were offered a £5 shopping voucher as a token of thanks.

# Who did we hear from?

We heard from 129 paid home care workers.

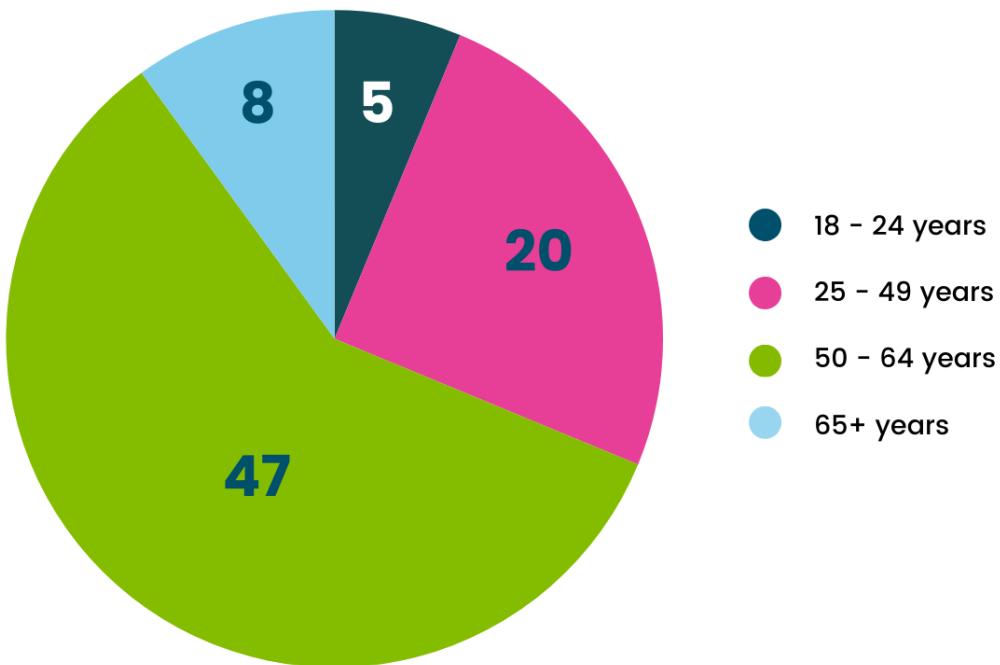
## Areas of Derbyshire workers said they worked in

Home care workers could select multiple areas. We heard from workers who work in every area of Derbyshire, including Derby City:



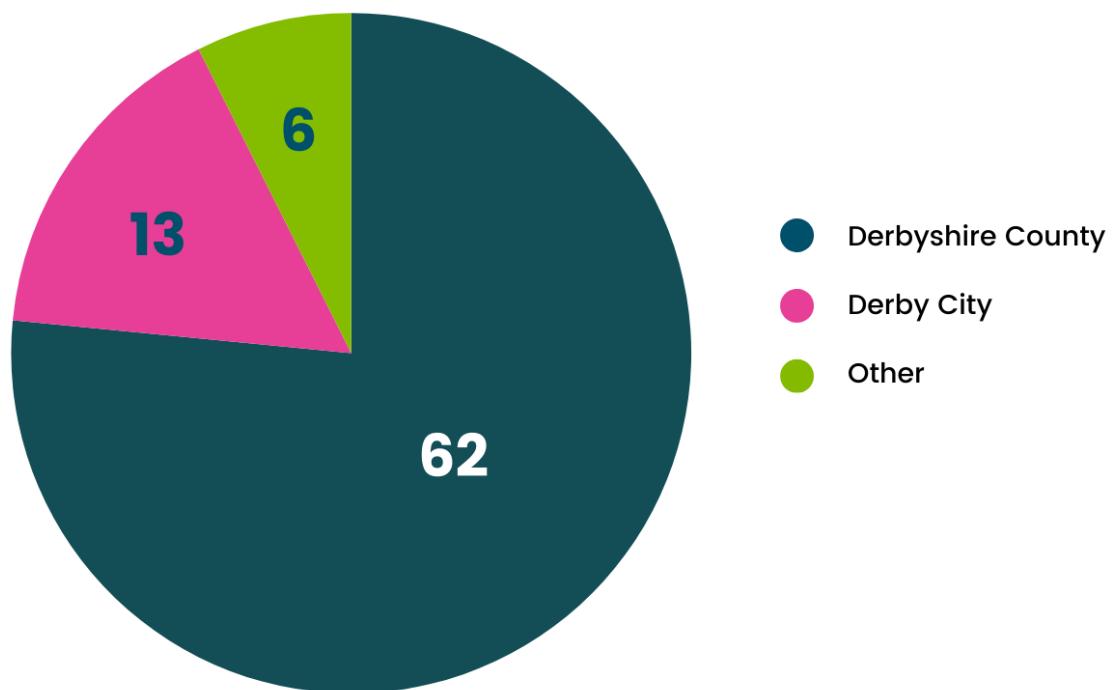
## Age of respondents

This question was optional, and 80 workers told us their age group. 59% were aged 50-64 and 25% were aged 25-49.



## Area where the workers live

We asked the workers to tell us which area they live in. This question was optional, and 81 workers told us where they live.



- 62 workers (77%) lived in Derbyshire County
- 13 workers (16%) lived in Derby City
- Six workers (7%) lived in neighbouring counties. These included Nottinghamshire, Staffordshire, Leicestershire and Greater Manchester.

## Ethnicity

This question was optional, and 80 workers chose to tell us their ethnicity.

Most workers (81%) said they were White British/English/Northern Irish/Scottish or Welsh. This matches the population of the area.

One worker responded 'Other' and said their ethnicity was African.

- Asian/Asian British: Chinese – 1
- Asian/Asian British: Indian – 2
- Asian/Asian British Pakistani – 1
- Black/Black British: African – 4
- Black/Black British: Caribbean – 1
- Black/Black British: Any other Black/Black British background – 1
- White: British/English/Northern Irish/Scottish/Welsh: 65
- White: Any other White background: 4
- Other: 1

Of the 19 workers who said they lived in Derby City or in neighbouring counties nine described themselves as 'Other' than White British/English/Northern Irish or Scottish.

## Home care providers

We gave workers the option of telling us which care provider they work for. As well as allowing us to link the information to a care provider, this also showed that we had heard from workers working for a range of employers.

Of the 73 workers who told us who they worked for, there was a range of 19 different providers, with 36% working for DCC.

# What did people tell us?

## Views about Infection Prevention (IP)

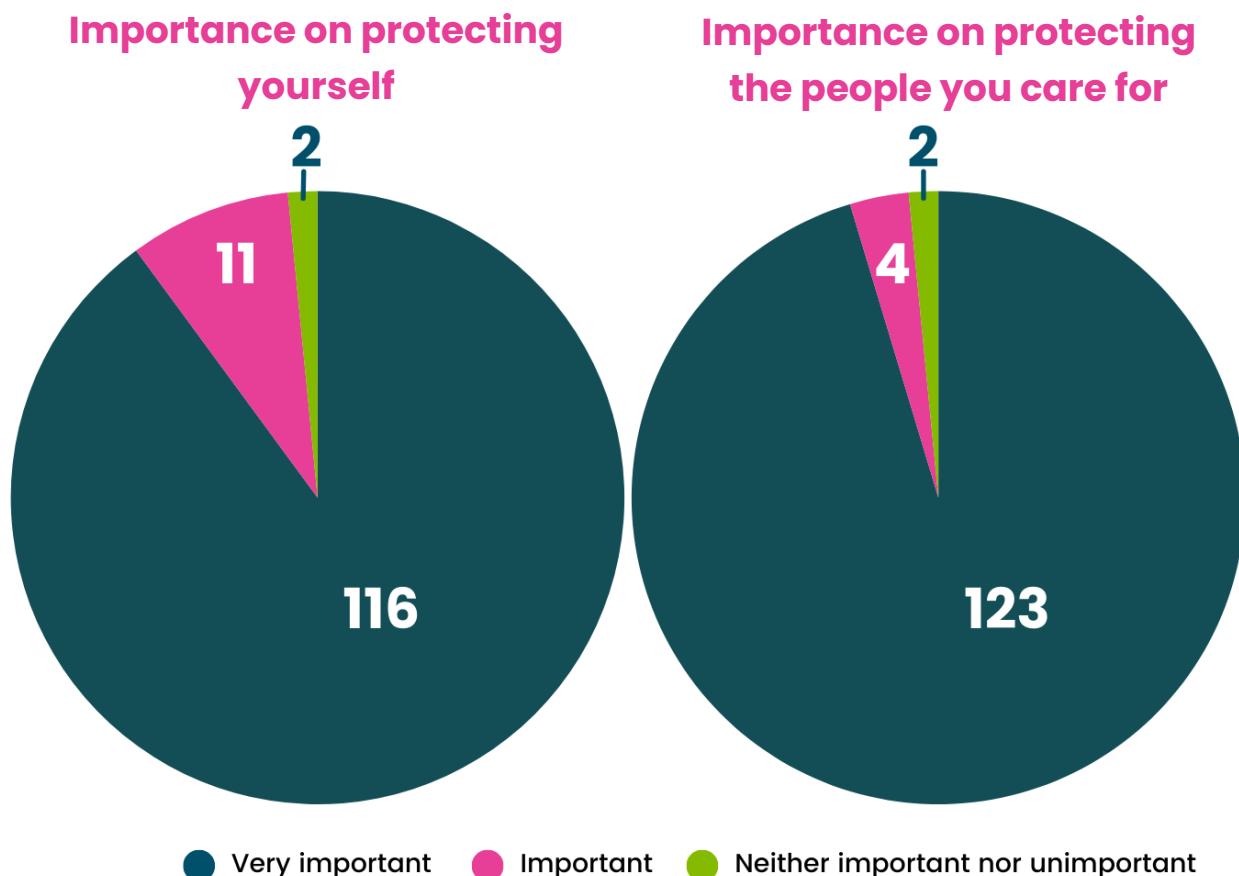
IP means helping to stop the spread of germs in places where people receive care. This includes things like washing hands, cleaning properly, and wearing protective gear (like gloves, masks and aprons).

It also means following safe routines to keep everyone (clients, care workers and visitors) safe and healthy.

The responses from home care workers reflected the high level of understanding of the needs of their clients, the precautions they need to take and the desire to give great care.

## How important is it to protect people from infections at work?

We asked how important it was for the workers to protect themselves against infections. We also asked how important it was to keep those they care for at work safe from infections.



A total of 129 workers answered both questions, and 98% said that protecting/keeping people safe from infection was important or very important.

We asked workers to explain their answer to the importance of protecting themselves, 75 people gave responses. These responses were themed, some responses had more than one theme:

Protection was the most mentioned theme that we identified in the responses. The types of protection mentioned included:

- Protecting the people that the home care workers care for
- Protection for themselves:



“In order to care for someone else I need to be fit and healthy myself first, so I am able to care for them.”



- Protecting their family or friends:



“Important as I have children at home and vulnerable adults within the family that I visit regularly.”



- Protecting colleagues or the wider health team
- Protecting others or the community.

Reducing risk and/or the spread of infection was also mentioned in multiple responses about how important it is to protect people from infections at work.

Staying healthy at work and not wanting to be off work sick and lose earnings was also important to workers.



“I don't want to pass anything to a vulnerable client or my family, which could happen if I become ill, or lose income because of being ill myself.”



“I could not afford to be off work for a long period of time with the possibilities of spreading infections to family.”

We asked workers to explain their answer around the importance of protecting the people they care for at work from infections. A total of 68 workers explained their answer.

Most workers told us about the impact infection has on people who are vulnerable, such as hospitalisation, longer recovery times, reduction in quality of life and the effect on other health conditions.



"I mostly work with the elderly, their immune systems may not be as strong. Recovery period may also be longer especially if they have a health condition."



"Keeping our clients in their own homes as long as possible is very important and doing this safely is important."

In response to this question, workers again raised the importance of protection:



"We work with many vulnerable people who would not cope well with infection prevention hospital admissions."



Reducing the spread of infection was also important to workers:



"What might be minor to me could be severe or even fatal to them."



## **The equipment, information and training provided about preventing the spread of infections**

We asked workers if they had the right things (such as equipment and information) to prevent the spread of infections at work.

129 workers responded to this question:

- 125 workers (97%) said that they did have the right equipment
- Three workers said they didn't have the right equipment. One commented that their employer only provides gloves and no other types of PPE.
- One was unsure, explaining:



"I feel that the aprons we use for adults could be stronger, also the gloves are too flimsy. When doing personal care [the gloves] can tear and then get exposed to infection. Also, I feel the need for stronger shoe protectors."



We asked workers to explain their answers about equipment and information. A total of 60 workers explained their answers.

Responses were themed and some responses had more than one theme. Most workers said they had the right PPE, many gave the examples of gloves, aprons and masks. A few of the workers mentioned shoe protectors, gowns and visors.

Four people said they were concerned about the quality of PPE provided. Two said that the aprons were thin and tore easily, one said masks were out of date and one said shoe protectors needed to be stronger.

A total of 17 staff said they had received training, including IP, with two specific mentions of training on how to use PPE correctly.

- Five workers mentioned specific staff policies and procedures they followed to reduce the spread of infections



"We have policies and procedures at work that we have to adhere to. We also have a care plan to read and refer to of each individual we care for. We are trained and assessed to make certain we understand safe practice when caring. We are all equipped with suitable PPE and instructed on how and when to use."



- Two talked about posters in the workplace covering IP
- One mentioned workplace meetings and ongoing support
- Two were critical of training/information with one saying:



"... not always given the right information."



- A different worker said:

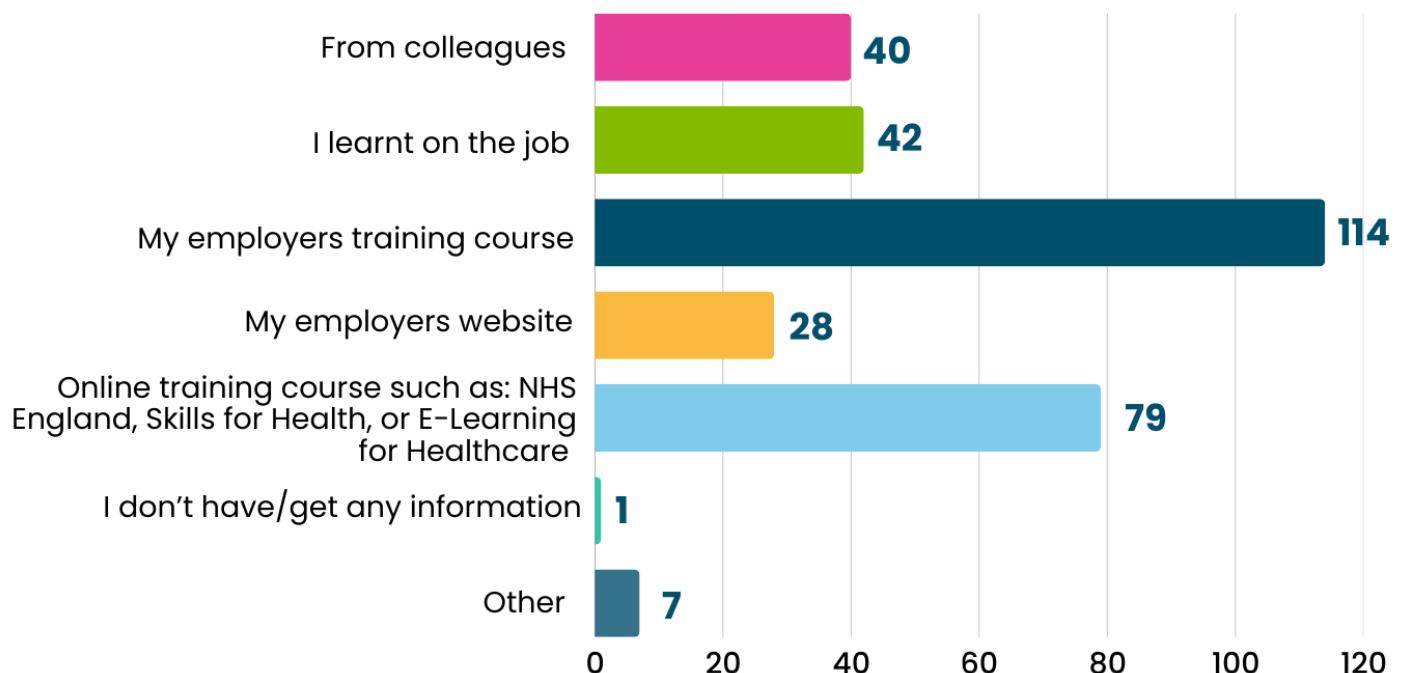


"I was sent to a client with shingles and told, "you should be fine" after explaining that I had never had chicken pox nor the shingles vaccine."



- 11 workers mentioned that they are provided with hand sanitiser
- Three mentioned they are provided with hand washing items such as soap and hand towels
- Two workers mentioned that they were given access to vaccines or that vaccines were arranged for them
- One worker talked about having cleaning supplies provided.

We asked the workers where they got their information about infection prevention from:



Of the workers who said 'Other':

- Three said from previous job experience
- One said through the employer's regular bulletins
- One said from their company handbook.

## The most important parts of preventing the spread of infections at work

We asked the workers what they felt was most important regarding preventing the spread of infections. Responses were themed and some responses had more than one theme:

107 workers responded to the question.

Most workers who answered this question told us that PPE is very important when preventing the spread of infection.

Different types of PPE were mentioned in their responses such as gloves, masks and aprons.

The correct use of PPE. For example, correctly putting on and taking off PPE and the correct disposal of PPE was also mentioned.

6

“... using PPE that's provided and making sure we are well enough to work. We also wear masks if we are suffering symptoms of a cold. We are also trained to wash our hands after every call.”

9

Hygiene and following good general hygiene were also mentioned as being important. These responses mention hand hygiene and washing hands, using hand sanitiser, general hygiene and wearing a clean uniform.

6

“Hand washing before and after carrying out duties, blowing your nose and coughing.”

9

Workers also told us that training is important for preventing the spread of infections at work.

Most workers who told us about training said that it is important to follow policies, procedures and training about IP. This included accurately recording infections when people they care for are unwell.

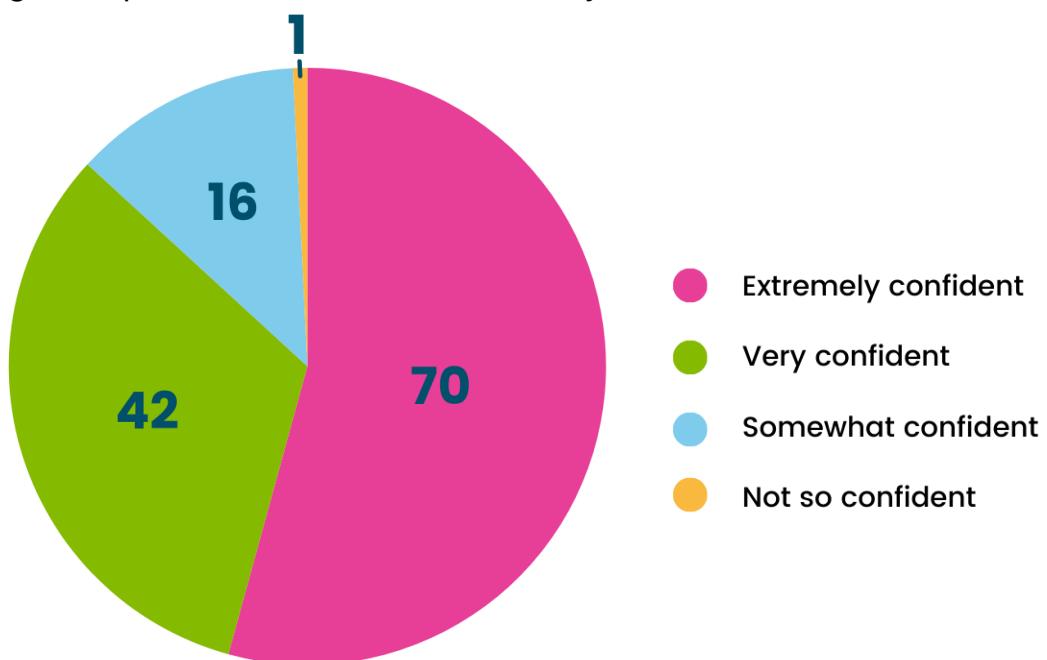
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“Understanding how infections can be spread and having training and the necessary PPE to protect ourselves and others. Support at work to ensure training is up to date and that PPE is always available.”

9

## Confidence levels in preventing the spread of infections

129 workers responded when we asked workers how confident they felt about preventing the spread of infections in their job.



We asked the workers to tell us more about this.

The one who was not so confident said:

6

"If we are ill, we are expected to work."

9

Of the 16 workers who described themselves as somewhat confident, two said their confidence was affected by the colleagues they work with:

6

"To be completely confident, all staff need to be doing everything possible to keep everyone safe."

9

"Situations from colleagues that are not as hygienic as some, by not bagging incontinence wear up properly or even disposing of from client home."

One worker said:

6

"It was due to being unable to access healthcare for myself."

9

Another worker said:

6

"It can or could be more difficult if you have a cough or cold when you're with a client and start coughing and sneezing, or when with your colleagues."

9

Three of the workers who described themselves as somewhat confident, told us that removing all risks are not possible, one worker said:

6

"You can only do as much as possible in people's homes."

9

Of the 42 workers who described themselves as very confident, ten said their confidence was due to the practical steps they take themselves to prevent infections:

6

"I consistently follow hand hygiene procedures, use PPE correctly, and adhere to cleaning and waste disposal protocols. I also stay informed about updates and report any risks promptly."

9

Six workers said their confidence was due to the training and equipment, such as PPE provided by their employer:

6

"I have been given the training to prevent the spread of infections."

"I feel very confident about preventing the spread of infections in my job because I have received thorough training in infection

prevention and control, and have access to the necessary PPE, equipment, and up-to-date guidance.”



Four of the workers who described themselves as very confident said that removing all risks is not possible. They said that they can do their best to lower the risk, where possible, and keep learning about IP:



“It is not always possible to eliminate all chances of getting an infection, but I feel confident that I am able to minimise the risks.”



“[I] can never be 100% confident which is a good thing because it means that I am learning, improving and acknowledging what needs to be done.”

One worker, who selected ‘very confident’, spoke about other visitors coming into the home:



“It is impossible to control others’ actions that visit our clients. For example, other professionals and families.”



Of the 70 workers who described themselves as extremely confident, 19 said their confidence was due to the practical steps they take themselves to prevent infections:



“This is because I practice good hand hygiene by washing my hands regularly, proper use of PPE, ensuring regular cleaning and disinfecting surfaces, promoting ventilation amongst others.”



Ten workers said their confidence was due to the training and equipment, such as PPE, that their employer provided:



“I have always been cautious of it, more so since COVID pandemic and since working in care I have received more training regarding this.”



“We have had intensive training. We have the correct PPE.”

“Very confident, [I] go on regular training to keep us updated.”

We followed this question by asking what would help the workers to feel more confident.

Access to more training, information and regular updates were the most common answers, with over 20 mentions, including:

6

"More awareness, for example newsletters, etc which can be easily passed onto the team."

"Constant reminders in the workplace, for example posters."

"Face-to-face training and not online training."

9

To increase confidence in preventing the spread of infections, responses were separated into four main categories listed below.

<b>Actions by employers</b>	<b>Number of times theme mentioned</b>
Training and information	20
Correct and adequate PPE	8
Communications about client infection/s	6
Equipment such as handwashing	3
Full sick pay	1

<b>Actions by others</b>	<b>Number of times theme mentioned</b>
Colleagues and wider NHS following infection prevention guidance	7
Public/client awareness about infection prevention	5
Colleagues not coming to work when ill	3

<b>Action taken by the employee</b>	<b>Number of times theme mentioned</b>
Experience on the job following training	4
Not coming to work when ill	1

Healthcare system action	Number of times theme mentioned
Access to covid boosters, blood hepatitis injections, shingles guidance	3

The themes in the responses did not vary significantly from those who were more confident to those who were less confident.

Workers who were extremely, very or somewhat confident told us about taking time off work when ill:

6

“Other people taking coughs, colds and temperatures more seriously and if they have symptoms staying at home for a day or two. Some people think they are being a hero attending work whilst ill.”

“If we become ill, and need the time off to recover quickly then full pay would help us buy the necessary medication to help us improve, and be given the right amount of time to recover.”

9

Workers also told us that better PPE would make them feel more confident about preventing the spread of infections. These responses were similar to the responses to the question about workers having everything that they need for IP.

6

“Better aprons, the ones we use are so thin sometimes too short.”

9

“Sanitiser.”

Other responses focused on ways that employers and the wider NHS system can make workers feel more confident about preventing the spread of infection.

Workers made the following suggestions of things that could help them feel more confident:

- Having more time to improve the sanitary conditions in some clients' homes
- All NHS community staff following the same IP routine
- Having information about people with infections before home visits so they can be better prepared.

## Other comments about infection prevention

Participants were given the opportunity to tell us anything else not previously covered in the survey. Some of these comments gave suggestions for improvements, such as:



“To encourage people to wash their hands thoroughly and properly.”



“It would be very helpful if any infections are starting for care homes to be notified earlier so we can try to prevent our clients and ourselves from becoming ill.”

“Wear masks around people infected, inform them about getting the vaccine. Always throw away used tissue in correct bins.”

Other comments were positive about workers feeling supported by their employer and having the information they need about IP:



“I feel well supported by my employer in this respect.”



“I have all the information that is needed.”

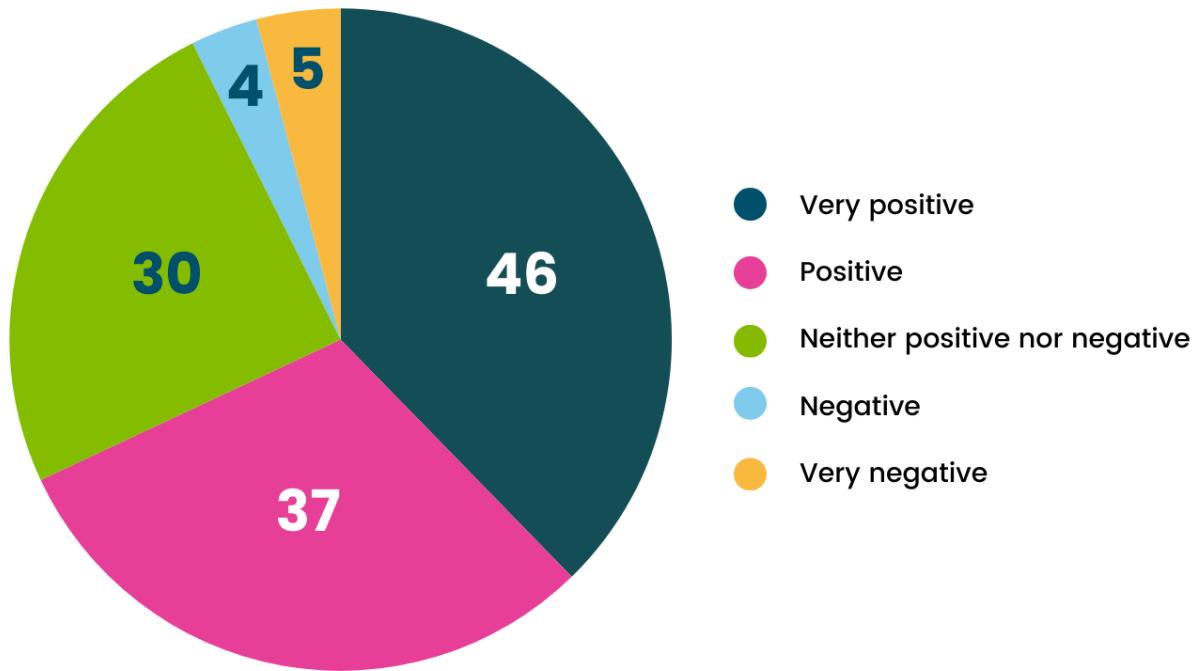
## Views about the seasonal flu vaccination

The seasonal flu vaccination helps to protect against flu. Each year during autumn or early winter, it is offered free of charge on the NHS to people at higher risk of getting seriously ill from flu.

Frontline health and social care workers, including paid home care workers, can get the vaccine on the NHS if their employer does not offer it through their occupational health service.

## How paid home care workers feel about the flu vaccination

We asked workers how positive or negative they felt about the vaccine and asked them to explain their answer. 122 workers responded.



A total of 83 workers felt positive or very positive about the flu vaccine. 43 workers gave explanations which are grouped in themes:

19 workers said that having the vaccine each year showed they were positive or very positive about the vaccine.

18 workers said that they felt positive or very positive because the vaccine protected them from flu or minimised the symptoms of flu:

 “I never had the flu vaccination until I started working in care. I have it not just for myself but for my people, it helps protect us all.” 

Twelve workers pointed out the negative impacts of having flu:

 “I have had flu myself twice and it was debilitating. I was only a teenager the first time and in my 20s the second so, I understand how it can be dangerous for our customers who are elderly.”

“This is because it protects me, individuals and communities from flu which can range from being an unpleasant illness to a life-threatening condition.” 

11 workers were positive or very positive about the vaccines ability to prevent the spread of flu.

Three workers were positive or very positive about the vaccine as they felt it was part of their professional responsibility. One person said:

6

“There is always a niggle in my mind as to how safe these vaccinations really are.”

9

A total of 30 workers felt neither positive nor negative about the flu vaccine. Of these, six workers gave the following explanations:

6

“The vaccine doesn’t protect all variants so may not protect everyone.”

9

“I have never had it but would be willing to have it.”

“I don’t personally have it, but I don’t think it’s bad that people do or don’t.”

“I personally don’t have the flu vaccination but if it helps others especially the vulnerable and elderly.”

“I receive this every year. I do not have many thoughts about it. I receive this for my own and my clients benefit.”

“I feel it’s positive for the older and vulnerable clients.”

9

Of the nine workers who felt very negative or negative about the flu vaccination, six workers gave an explanation for their answer:

Three of these workers told us that they, or a family member, have had the flu vaccination in the past and were unwell or had bad side effects.

One worker told us that they have never had the flu vaccine and,

6

“... would rather not have it at all.”

9

Another worker said that they would not have it as:

6

“there are too many strains of the flu.”

9

One worker told us that they do not have the flu vaccination because:

6

“It is more important to allow your body to produce antibodies which will fight for you.”

9

One worker who felt very negative towards the vaccine said in their additional comments:

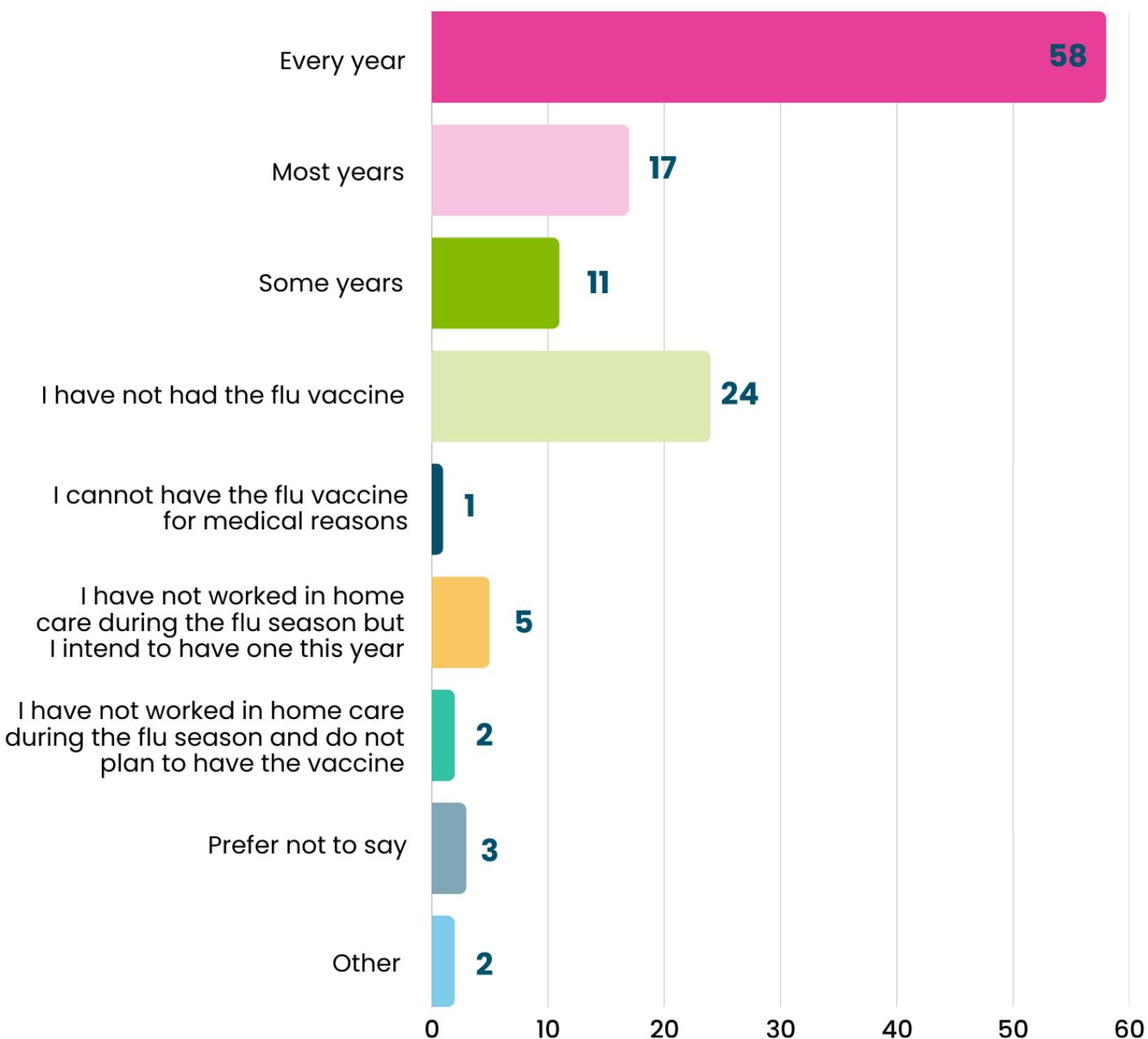
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"I would leave my job if such vaccines became mandatory."

9

## How often home care workers are having the flu vaccine

We asked workers how often they have had the flu vaccine since working in home care, and 122 people answered this question:



26 workers said they have not had the flu vaccine nor do not plan to have it. Of these, 11 told us why they had made this decision:

Two workers spoke about the after-effects from a previous flu vaccine:

6

"Made me very poorly when I was pregnant."

9

6 "It makes me very ill." 9

Seven workers gave a variety of reasons about why they have not or do not plan to have the vaccine:

6 "I don't feel the need to. I am a healthy mid-age person."

"I eat healthily, exercise regularly and trust my own immune system. I am rarely sick."

"... because having a flu injection is pointless at my age, I would rather eat healthily and do sports."

"Never have, never will. It's the flu, practically a cold, it happens every year. I never get it so why do I need a vaccine when it has no effect on me."

"I don't wish to have it."

"Personally, don't think I need it but in future who knows?"

"Just never had, no reason why not."

"Occasionally I have not got around to having it." 9

Two workers were unaware that they could get the vaccine for free and indicated that they would have the vaccine if they were eligible:

6 "I did not qualify for it last year and would have it this year even if I qualify for it and am required to."

"I want to have flu vaccine, but it is expensive as a care worker to purchase it ... I am unaware of any government initiative where I can get a vaccination for discounted price or for free." 9

Six out of the nine workers who previously said they felt negative or very negative about the flu vaccine were the same individuals who do not have, or plan to have, the vaccine.

The other three had received the vaccine in the past but went on to have a bad reaction to the vaccine and now feel negative or very negative towards it.

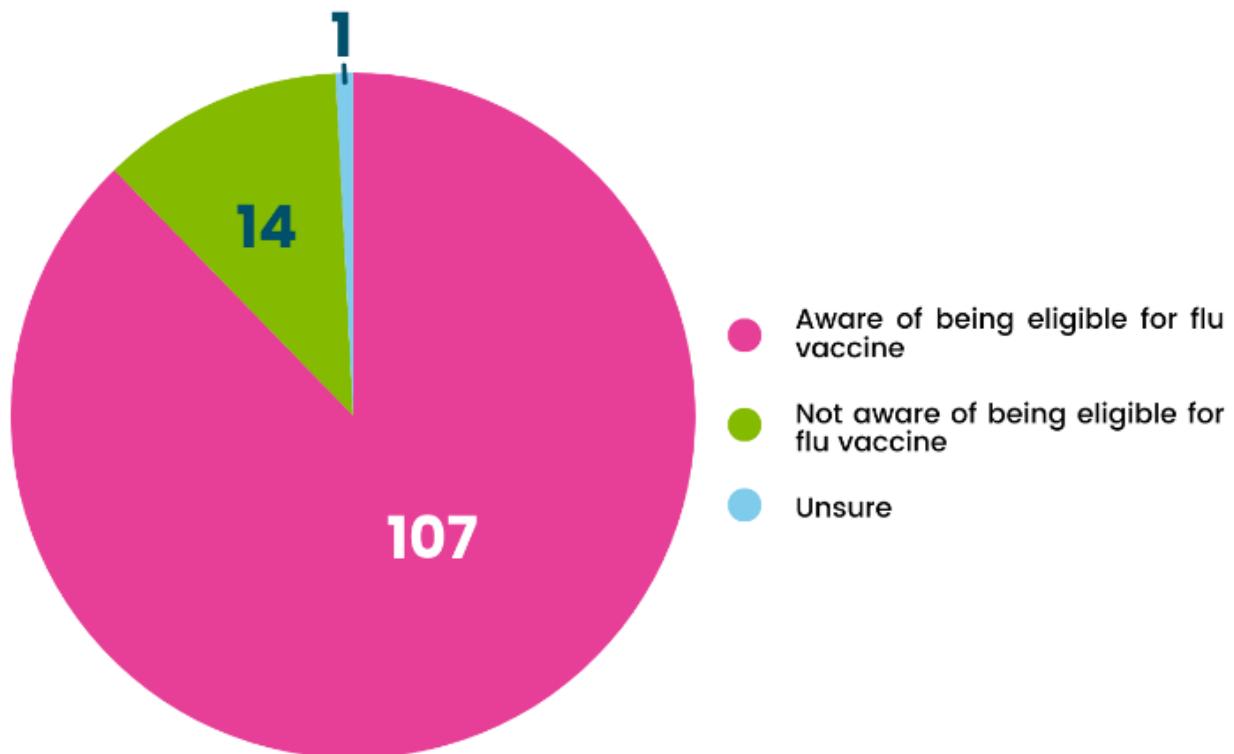
For those workers who have the flu vaccine, 38 explained their decision. Motivations were similar to the reasons given as to why workers were positive towards the vaccination with the top three being:

- 18 workers told us that their decision was based on the vaccine protecting them or others from flu or that it minimised the symptoms of flu
- 11 workers told us that they made the decision because they have had flu before themselves or they know about the effect that flu can have on vulnerable clients
- Six workers told us that their decision was based on the vaccine's ability to prevent the spread of flu.

## Awareness of eligibility for a free NHS flu vaccine

We asked if they were aware that, as a home care worker, they were eligible for a free NHS flu vaccine.

122 workers responded:



15 workers (12%) were unaware or unsure of their eligibility. Of these:

- Five are receiving the flu vaccination
- Six haven't had the vaccination
- Three are new to their roles but intend to have the vaccination
- One is unable to have the vaccination due to medical reasons.

# How easy is it to arrange the flu vaccination for home care workers

We asked if it was easy for workers to arrange their flu vaccination. 122 workers answered this question:

- 84 workers (69%) said 'Yes'
- 13 workers (11%) workers said 'No'
- Two workers explained that working shifts makes arranging a vaccination difficult.



"Shifts change every week, so advance booking is problematic. Sites for vaccination are not always convenient, especially for parking."



- Two workers said it was difficult to arrange with their GP
- 25 workers (20%) said unsure or not applicable as they had not had the flu vaccination.

A total of 33 workers explained their answer.

There was a mix of workers getting the vaccination from a pharmacy or their GP.

Of those receiving the vaccine from their GP, they said it was easy because they received reminders with easy links to book an appointment suitable for them.

Of those saying they went to a pharmacy, they said that the NHS online national booking system was easy, or they phoned their local pharmacy to make an appointment. Three workers said it was easy because their pharmacy offered walk-in vaccinations without an appointment.

Ten workers indicated that it was easy to get their vaccine either from their GP or pharmacist. These workers were eligible for the free NHS flu vaccine due to being in an 'at-risk' group such as, having a long-term health condition, caring for an older or disabled relative, or aged over 65 years.

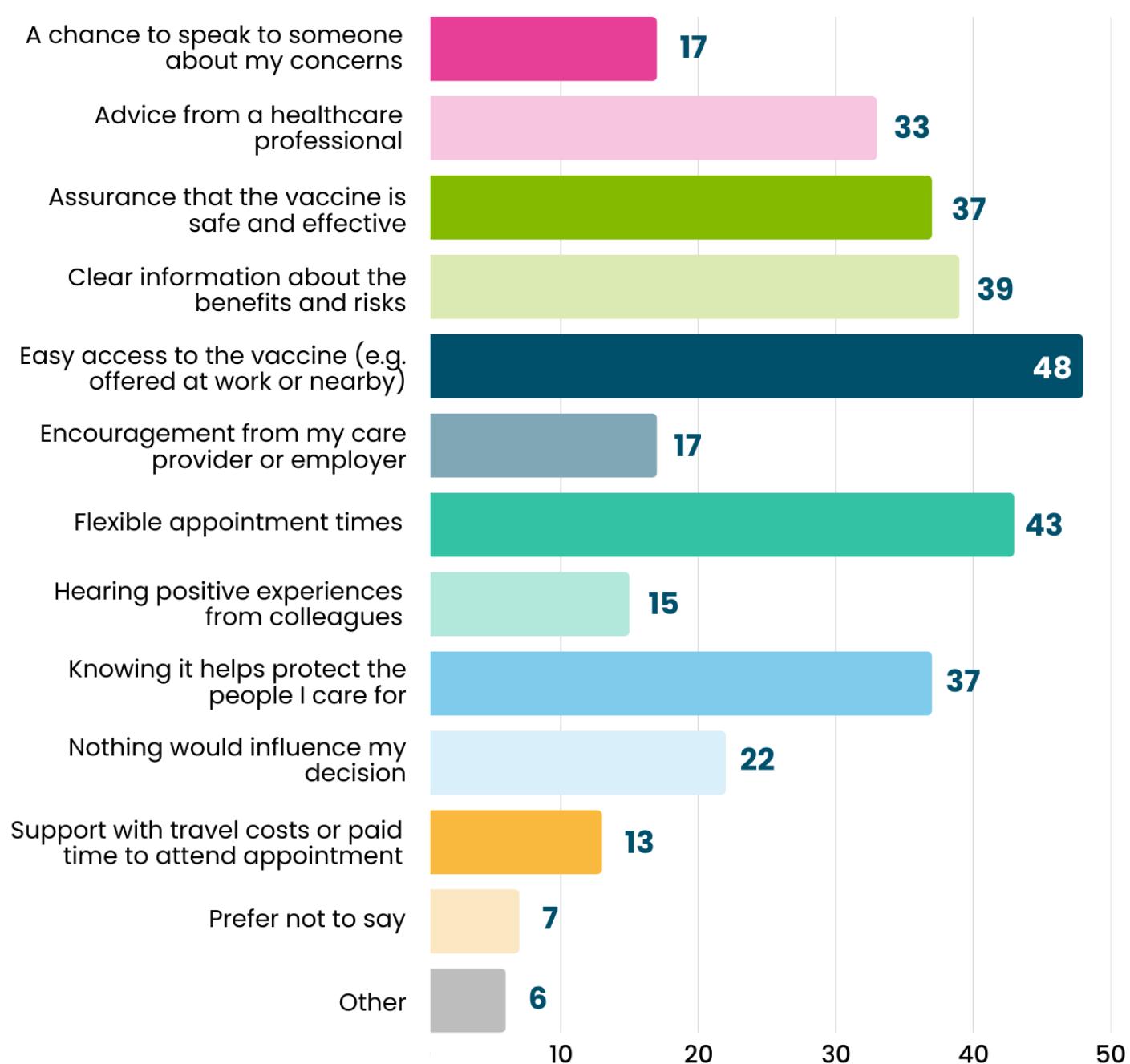
## Things that would help home care workers decide whether to have the flu vaccination

We gave workers an alphabetical list of options to select from. These options were based on the options provided for previous vaccination work that we had carried out.

We have previously spoken to staff working with under 5-year-olds about providing flu vaccination information and also to parents and guardians about baby and toddler vaccinations. The reports from this earlier work can be found here:

- [Report: The views of staff working with under 5-year-olds in providing flu vaccine information](#)
- [Report: The Views of Parents and Guardians on Baby and Toddler Flu Vaccinations](#)

More than one option could be selected, and 122 workers responded.



The top three influences were:

- Easy access to the vaccine (e.g. offered at work or nearby)
- Flexible appointment times
- Clear information about the benefits and risks.

We looked at the responses for those people who felt negative or very negative towards the flu vaccination in the earlier question.

These people had chosen either nothing would influence them, or they preferred not to say.

The six workers who chose 'Other' explained that they didn't need any further help to make their decision.

Of the 26 workers who earlier said they hadn't had, or were not planning to have the vaccine, 12 said that nothing would influence them, or they preferred not to say. The remaining 13 workers selected the following as their top three influences:

- Clear information about the benefits and risks
- Assurance that the vaccine is safe and effective
- Easy access to the vaccine (e.g. offered at work or nearby).

## The interviews

Along with the survey, we did 11 semi-structured interviews over the telephone.

Of the workers we spoke to, the combined working life in care totalled over 200 years, ranging from five months to someone with over 30 years of experience. We spoke to workers who worked across all areas of Derbyshire and Derby City other than South Derbyshire or Bolsover.

Everyone we spoke to lived in either Derbyshire or Derby City. They named four different home care employers. One person chose not to name their employer.

## Feedback about training and information

Whilst all workers received training about IP, satisfaction with the training differed from person to person and across workers working within the same organisation.

Workers told us that IP training was mainly covered in depth at least every three years and many had yearly refreshers. Some workers would like more reminders and prompts about key parts of the training, such as handwashing.

For most of the workers, training was by online learning. This suited some as it fitted around their family life, could be done at their own pace and was suitable for those who don't like classroom environments.

However, some would prefer a mix of in-person and online training so they can ask questions and share real-life examples.

One worker said that their employer offered the use of a computer at their office to complete their training if workers did not have one at home.

Online training for some was unpaid, yet still mandatory. One provider paid workers a one-off amount after their induction to cover training.

The quality of training ranged from, 'comprehensive', 'very good', 'quite good' to 'awful'.

Two workers said that they have learnt either from colleagues or by watching YouTube videos about how to use specialist equipment not covered in their training.

Two workers said that they couldn't remember any content in the IP training about the need for, or the value of, vaccinations.

Some workers have seen managers or other NHS workers not following IP procedures, such as hand washing. It was suggested that frequent refreshers and workplace reminders may help with this.

Some workers told us that they were concerned that IP measures had been slipping since the improvements made during COVID-19.

## **Feedback about time off work due to ill health**

Seven workers said they felt that the culture of their workplace supported time off due to ill health. However, four workers felt that they, or their colleagues, felt pressured to work even when they are ill.

This pressure came from either the negative response from management when reporting sickness, by feeling that they were letting the clients down if unable to work, or the lack of staff to cover sickness.

Most workers are asked to work extra shifts to cover staff sickness.

All employers had a procedure for workers to follow when reporting sickness.

One worker highlighted that they only receive statutory sick pay, which could push some to work when ill.

## **Feedback about when the cared for are unwell or show signs of infection**

All the home care workers we spoke to were able to describe work systems to report clients who are unwell. These systems ranged from folders in the home, electronic apps, daily handover sessions, emails and phone calls to management.

All workers felt comfortable raising concerns about the people they care for. Some said that they get notified to take extra precautions/wear full PPE if a client has an illness/infection.

## **Feedback about supplies of PPE or other equipment for IP**

Overall, the feedback was good about supplies of PPE. Some workers said that since COVID-19 there had been an improvement in supplies of PPE, and they felt supported.

Several workers were unhappy that supplies of PPE had to be collected from their employer's office in their own time and at their own travel cost. For some, this could be a 20-to-30-mile round trip.

Many workers took personal responsibility to wear a mask if they felt unwell or if the client was unwell.

One worker said that masks were not supplied as a standard item of PPE as their employer said they were "not mandatory". Another worker with the same employer said masks were available.

There were a few comments about the quality of items, such as aprons that tear easily.

One worker had suggestions of PPE which would improve IP such as, arm guards to protect their uniforms, soap and paper towels to avoid using the client's own, and shoe protectors rather than shower shoes.

One worker said that the people they care for:



“Feel reassured and are grateful that the staff are wearing full PPE when there are infections.”



## Feedback about challenges specific to their working environment

The home care workers interviewed cared for clients living in the community in their own homes. Some workers worked with clients living in self-contained apartments that provided on-site care and support for residents.

The main challenges identified specific to their role and working environment were:

The differing standards of cleanliness in clients' homes:



“Some have hospital levels of cleanliness; others are more ‘wipe your feet on the way out’.”



“There are times where you think I'll get more germs touching the tap than I will going outside to put some anti-bac on.”

Time available to clean properly especially in homes where the client is doubly incontinent or if there are pets:



“The work that needs to be done far exceeds the time we have to do it; something has to give.”



- Lack of equipment in some clients' homes. One worker said that one client they work with does not use running water, only bottled water heated in a kettle. This means that washing hands, for example, is always more difficult
- Lack of ventilation in heated homes to prevent airborne infections
- Workers keeping their uniform clean between client visits
- The additional challenges of clients with long-term conditions such as dementia
- Colleagues not following IP controls, or their clients they care for not assisting with these where they are able.
- The home care worker's confidence in raising these challenges with their employers varied. Those with more experience felt able to raise their concerns. One person said:



"They [management] are not really interested at the end of the day, if there is a problem, it's up to us to find a way around it, just get the job done."



## Feedback about the seasonal flu vaccine

All workers interviewed regularly had the seasonal flu vaccine. However, one worker had only just become eligible as they are new to care work.

Workers spoke about whether their colleagues were as positive about the flu vaccination as they were:



"It's [flu] talked about between staff, probably less than half of them [colleagues] won't have it."



"I think they are so set in their ways they say things like, 'I'm not having it why should I? I've never had flu before so why do I need the jab?'"

"They are not looking at it from the right perspective; they are looking at it as if we are being asked to get the flu jab because we've got to protect these people. Whereas we are actually getting the flu jab to protect ourselves so we don't pass it to those people."

One worker said that having the flu vaccination was one more step towards building trust with the people they care for.

The workers interviewed were asked whether they received information about being eligible for the vaccine and whether they were encouraged to have the vaccination by their employer.

Many had regular emails from their employer, although one worker said they knew their colleagues did not read them.

Some workers were asked to notify their employers when they had received the vaccination, so it be recorded on their records. One worker had an annual health check form to complete, which asks if they have the seasonal flu vaccine.

However, some workers told us that they received no information or encouragement at all. Some said that flu vaccinations are no longer talked about by management since COVID-19 boosters ceased.

They said that the lack of conversation about the flu vaccine from management will most definitely have an impact on how important other workers view the flu vaccine.

- When asked about what could encourage workers to have the vaccine, or make it easier, the following suggestions were made: Information about the flu vaccine and eligibility to have the vaccine for free on the NHS:
  - Clear information about the vaccines, safety, effectiveness, ingredients, how it works, benefits and consequences without it
  - Information from trusted sources NHS, Public Health team or health professional/GP
  - Information noted above emailed and spoken about/discussed by their employer. Flu vaccination to be covered in more detail in the mandatory training
  - Posters in the community about vaccine information alongside hand washing and wearing masks when unwell
  - Clear information about how to access and book the vaccination, including the NHS online booking system, local pharmacies and the 119-telephone service.
- Three workers suggested that time within paid working hours to have the vaccination could encourage others
- Pharmacies to offer flexible appointments or walk-in appointments to help with shift work difficulties
- All pharmacists to understand the eligibility criteria
- Pharmacies to consider offering vaccines in the workplace, such as those working in self-contained apartments offering on-site care and support for residents
- GPs to flag home care workers on their records so they can send flu vaccination reminders each year
- One worker suggested that the Public Health team should work more closely with all care providers. They want care providers to give clear messages, that all staff can understand, about preventing infections and the flu vaccine.
- One worker suggested the flu vaccination should be mandatory

- One worker said that it was essential that the vaccination remains free of charge for home care workers, with only their work ID required to maintain the levels of uptake
- One worker said that encouragement must be about the workers protecting themselves first and foremost. They suggested that personal stories from clients affected by flu or their families may help to raise the profile of the damaging effects of flu for individuals
- Several workers said that GPs or pharmacists have told them that home care workers aren't eligible for free flu vaccinations this year. (We shared information that they could use to show that home care workers are eligible for free flu vaccinations. We know that this has enabled some workers to get vaccinations).

# Conclusion

## Infection prevention

Paid home care workers surveyed placed high importance on protecting themselves and those they care for from infections.

Their explanation of why it was important to them points to their reasons to take action to prevent the spread of infections.

Key motivations for taking action to reduce the risk of the spread of infection are:

- To protect the vulnerable people they care for from the impact of infections. Therefore, helping them to remain at home, reduce hospital admissions and maintain quality of life
- Protecting themselves to stay healthy to be able to work and maintain earnings
- To protect their family, friends, colleagues and community from illness.

It was positive that 97% of paid home care workers had the right equipment and information to prevent the spread of infections. There was some criticism of the quality of PPE and having to collect supplies from their employer's office at their own cost.

Home care providers are providing their employees with training programmes. A large proportion offer online training courses.

Not everyone was satisfied with the training they received. There were several suggestions that face-to-face training would be preferred. Some said this would aid learning as well as enable their training time to be paid.

The use of PPE and good hygiene practices was the most important aspect of preventing the spread of infections at work. Many workers increased their PPE use by wearing masks if they felt ill, or if the people they cared for were unwell.

This was usually by personal choice or as advised by their employer. One employer asked for masks to be worn for all home visits regardless of any infections.

Communication between management and colleagues about clients being unwell or showing signs of infection was good throughout.

Workers were confident in their ability to prevent the spread of infection. This was mainly due to their ability to take practical steps in their day-to-day work tasks. Their employers' providing correct and adequate PPE helped, alongside regular training and updates about infection prevention.

Those who have less confidence, had concerns about the impact of people's home environment. They described that whilst they could do as much as possible to reduce the spread of infections, others going into the home did not perhaps take as much care as they did.

They wished to see their colleagues and wider NHS health staff follow the IP guidance.

The challenges of home care working present additional difficulties to preventing infections. This includes:

- The cleanliness of clients' homes, and the time given on a call to clean up
- Handwashing facilities
- Ventilation
- Clients' long-term health conditions
- Keeping uniforms clean between visits
- Other people in clients' homes not observing IP.

To increase confidence in preventing the spread of infections, they would like to see action from their employers through:

- The provision of more training and access to information, including face-to-face training
- Newsletters, posters, prompts and regular updates
- Reassurance of the continued provision of correct PPE and equipment could also improve their confidence
- The culture within the workplace to support time off work for when sick was not evident in all organisations with some staff feeling pressured to work when ill.

## Flu vaccination

The feelings towards receiving the seasonal flu vaccination were not as high as the importance of infection prevention. However, 75% of workers had the vaccination every, most or some years, or plan to this year.

Workers who were positive and received the vaccine showed good knowledge and understanding of the negative health impacts for the vulnerable people they care for.

They were able to identify the benefits of the vaccine in minimising the symptoms of flu and preventing its spread.

Workers who were not positive about the vaccine expressed doubts about the vaccine's ability to protect everyone from flu due to multiple flu strains.

Many suggested that, as they were fit and healthy, they did not need the vaccination

Many who did not receive the vaccine described having experienced side effects or illness following a previous flu vaccination

Whilst some workers were unaware of their eligibility (12%), most workers found it easy to get their vaccine and, where necessary, only needed to show their work ID for evidence of their eligibility.

There were some concerns ahead of the research as to whether pharmacies and GP Practices would be asking for letters from employers or payslips to check eligibility status, but no one reported this.

Those who found it more difficult to arrange their flu vaccination highlighted the difficulties with their shift patterns and short notice of rotas to book a vaccine. Pharmacies that offered walk-in vaccinations made access easier.

It is worth noting that if a person presents as a paid home care worker for a flu vaccine but is also eligible as part of an 'at-risk' group, they would be recorded under their 'at-risk' group. Our research was able to identify ten workers who would be recorded in these 'at-risk' groups.

There was no single solution to influence the workers' decision to have the vaccine; all options listed in our survey were welcomed. Key things they suggested were:

- Clear information from trusted sources about the vaccine
- Encouragement, training and discussion about the vaccine from their employer
- Flexible or walk-in appointments at Pharmacies during paid working time
- GP reminders
- That the flu vaccination should remain free of charge for home care workers.

## Suggestions

At this point, it is important to note response bias.

This survey has attracted mainly highly engaged individuals who may have given 'safe' answers that could have produced artificial positive results to some questions.

Those individuals who are perhaps less motivated, feared a lack of anonymity or felt it was not a good use of their time will not have completed the survey.

To reach these individuals, consideration should be given to building trust and ongoing relationships with care providers to encourage further one-to-one interviews or focus groups with home care workers to gain further insight.

## Training, information and equipment to support IP

- Encourage providers to offer a mix of online learning and face-to-face training to engage with staff and check understanding
- Within training or updates, to include the reasons why home care workers take personal action/place such importance on infection prevention. Use their words to motivate others and acknowledge their understanding of the value of their role

- To acknowledge the challenges the home environment presents and discuss real examples and solutions within training
- Feedback to providers that workers say that more training and regular updates could improve their confidence
- Maintain wider NHS staff and public awareness about how to prevent the spread of infections
- Develop a process for workers to raise concerns about the equipment
- Develop a process for workers to raise concerns about the quality or supply of PPE and escalate to Public Health if required.

## Flu vaccine information and delivery

- Ensure each flu season that GPs and pharmacists are aware of home care worker eligibility status for the free NHS flu vaccination
- Tailor clear flu vaccination information for workers. Information to include their eligibility to free vaccinations, its benefits and how to access them
- To encourage pharmacies to offer flexible appointments, such as walk-in appointments, and to share these locations with workers
- Consideration to be given that some workers in 'at risk' groups are also home care workers and their flu vaccination records will only refer to their 'at risk' group.

# What is happening with the feedback?

During the research period, the eligibility of home care workers for the NHS flu vaccination was queried by some pharmacists, GPs and home care workers themselves.

To maximise impact for the seasonal flu vaccination programme in Derbyshire 2025, the research was highlighted in October for action to:

- Derby & Derbyshire Integrated Care Board (DDICB) – Seasonal Vaccination Group
- Derbyshire County Council – Public Health Team.

As a result of raising this, we were assured that a signposting document, which highlighted eligibility, had been shared with home care workers via local authority channels.

The communications from DDICB also state that the flu vaccine is available for health and social care staff and includes a link with information about how to book a vaccination.

We were also assured that a lot of work has already been done with all vaccinating providers to make them aware of the eligibility criteria.

This report has been shared with decision-makers within the Public Health team at DCC and the DDICB.

The data from the survey and interviews will help influence the seasonal flu vaccination programme in Derbyshire, and the information available to paid home care workers about infection prevention.

# Thank you

Healthwatch Derbyshire would like to thank everyone who took part in the survey. We would especially like to thank the people who took the time to talk about their experiences further.

We would like to thank DCC's Public Health team and our volunteers for helping us to produce the survey.

We would also like to thank Derbyshire Carers Association and the Derbyshire home care providers for their help in helping with the wording for communications to unpaid carers and home care providers and workers.

# Disclaimer

The comments outlined in this report should be taken in the context that they are not representative of all paid home care workers within Derbyshire but nevertheless offer useful insight.

It is important to note that the engagement was carried out within a specific time frame and therefore only provides a snapshot of workers' views as shared with Healthwatch staff.

They are the genuine thoughts, feelings, and issues shared with Healthwatch Derbyshire. The data should be used in conjunction with, and to complement, other sources of data that are available.

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