

Notes from care home online forum – 30 September 2022

Participants: 5 attendees and 2 HWN staff members. Hosted by Derry Nugent (DN)

Current experiences of care homes

- One attendee said the rules at her husband's care homes around Covid-19 precautions continue to be relaxed for visitors including not having a need to test or wear masks, however, staff do still wear masks within the home. Her husband's health has deteriorated but she does meet with clinical lead once a month as a result so feels that care is responsive to his situation.
- There was some discussion and questions raised around funding for extra care and continuing healthcare in context of an attendee's relative requiring more intensive 121 support at the care home, this was explained in further detail by DN and another attendee for clarification
- One attendee said the care homes she is aware of are no longer doing video calls for relatives
- One attendee raised that the current management of her late mother's care home is stopping running the home after a number of years and was there concerns around how care homes are coping with increased running costs e.g. for energy. Another attendee mentioned that there are worries from relatives of those in care homes related to increased costs of living and whether this will impact care home fees or additional small charges. Cost of living was also raised in relation to day care services and potential impacts on this. DN agreed that this could be a question for Healthwatch to raise with adult social care on behalf of the group.
- There was some discussion about staff in care homes wearing masks and comparisons to fact that masks are not worn by all staff in hospitals. Unclear if this is public health guidance or individual care home guidance. One attendee acknowledged the concern about staff and residents being kept safe there was also a concern that staff wearing masks can be a problem for residents with cognitive impairment. There was a discussion around the fact it would be helpful if care home providers were better at communicating the reasons for restrictions rather than it simply being represented as a public health decision (when it is not always the case).
- DN led a discussion around HW plans to start up visits into care homes in early 2023 and the background to this. Feedback was received from the group about what it may be beneficial to focus on and two themes that emerged were around communication (with residents and relatives) such as newsletters and residents/relative's meetings and about activities- groups or individual. Attendees mentioned that one of the first things to suffer due to short staffing is activities or a loss of activity coordinators, however, activities needn't be very time consuming or staff intensive, an example given was an ABBA singalong. There was general agreement that activities help residents' wellbeing but also help staff as residents are happier, less bored and needing of staff attention.
- We also discussed ideas within the group as to how to engage with care homes around visits as to the benefits and positives of getting involved such as looking at best practice, being supportive and being a positive employer.
- It was agreed that the forums were a good place to discuss and get ideas about shaping our visits to care homes.
- The group agreed that forums should continue every 3 months. Next date TBC