

**Healthwatch East Sussex Annual Event 22/10/2020 via Zoom**

**Social Care Workshop Notes**

Attended by both members of the public and health or care professionals

**What are you hoping to take away?**

Professionals:

- Keen to hear what issues are the most important to people
- Understand the public & service provider perspective regarding care provision and the usefulness of Covid-19 guidance.

Public/Volunteers:

- Greater understanding & discussion about background issues & pressures facing the sector, including funding.

**What are you hoping to contribute?**

Public/Volunteers:

- To share experience & views from the service user & carer perspective.
- Share ideas & discuss possible solutions.

Professionals:

- Answer Questions
- Offer practical and economic perspective to discussions

**Do you think the awareness of care sector has increased as a result of pandemic?**

Unanimous Yes

**Has this awareness resulted in positive or negative perceptions of social care?** Mixed response. Some yes, some say a mixture of both. Some change from early in pandemic to now.

- It was noted that early in the pandemic, the media showed the sacrifices of social care providers & workers. In more recent weeks, workshop participants have observed a media swing towards reports of people insisting on seeing their relatives. This presents a challenge to providers; the need to protect their residents and staff, but to somehow allow & maintain meaningful contact between residents and their loved ones. How can they enable visits safely?

**What has been the most important lesson from the C-19 pandemic in relation to Social Care?**

- Public awareness of social care has increased, but not matched with understanding of how it is funded and delivered in comparison to NHS services
- Increased awareness of and enquiries to both private home care providers and Adult Social Care regarding live-in care alternative to care homes. This option is and will remain too expensive for Adult Social Care to fund except in the most exceptional circumstances.
- Adult Social Care have included additional measures to allow for Covid-19 into the usual winter plan.

**Positive outcomes of C-19 lockdown**

- Raised the public profile of Social Care and how it differs in structure and funding to NHS.

- Having more general interest in social care keeps the pressure on Government to fund it properly.
- Positive perceptions of commitment by staff - negative perceptions of the level of resources made (PPE etc.) available.
- Care sector is attracting really good quality new people to the team as other work opportunities are decreasing.
- The quality of care provision (reflected in CQC ratings) in East Sussex is high compared to other areas. 310 care homes in East Sussex - none of them have been rated as inadequate.

### **Negative outcomes from C-19 lockdown - Discussion focussed much on the risk v the benefit of total isolation of resident to their family & friends**

- Alzheimer's Society latest report show that dementia deaths during COVID-19 have been disproportionately high
- Visiting has been a huge challenge, it is absolutely vital to support people's well-being, but really difficult to ensure it remains safe for all involved.
- Difficult challenge of having enough staff available to support and facilitate visits.
- Lack of privacy for residents & visitors - a member of staff remains present all the time for duration of visit, or to help with remote technology.
- The above points, together with severe pressure on staff, management & resources could increase the risk of Safeguarding issues. Eg. Unintentional abuse through omission/neglect, de-prioritising of emotional/social or personal care needs of residents (eg oral care, continence, exercise, easing loneliness, sensory deprivation). Also, the more closed and limited any interaction, the fewer chances for external contacts to observe signs of poor wellbeing or incidents of concern.
- Many care homes have had to temporarily close their beds to referrals during the pandemic for a several reasons. E.g. insufficient staff due to sickness or self isolation. This has led to higher levels of under occupancy which puts the business viability of some care providers at risk.
- If people who need residential care are not using it, are their needs being adequately met where they are currently - in their own home for example?
- The age & layout of many care homes are not suitable because they are adapted houses, not purpose built. This can often mean no access to gardens except through the interior of building, which further reduces options for safe visiting.
- Prospective residents and their carers cannot make an adequately informed choice about a care home because of visiting restrictions
- Temporary respite residents were stuck in residential care during lockdown as well as loss of respite beds due to care home lockdown. This caused severe impact on both the respite resident and their carers.
- Poor access to testing prior to admission to care home has raised additional challenges.

### **Overcoming challenges**

- Every Care home has had access to funding to support infection control measures, including visiting arrangements. There are clear rules about what it can & can't be used for. Funds can be used for adaptation of spaces to being C-19 compliant.
- How to overcome and manage public fear of moving to care home? Need for positive media messages.
- Continued pressure needs to be placed on central Government to address the social care funding issue