



## Virtual Engagement Report

Wilton Lodge

December 2020



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## What is Healthwatch?

Healthwatch is the independent champion for people who use health and social care services which exist to make sure that people are at the heart of care. We listen to what people like about services and what could be improved then share their views with those with the power to make change happen. Helping people find the information they need about services in their area is another of our priorities.

In summary, Healthwatch's main aims are to:

- Help people find out about local care.
- Listen to what people think of services.
- Help improve the quality of services by letting those running services and the government know what people want from care.
- Encourage people running services to involve people in changes to care.

## Healthwatch Humber Network

Healthwatch North Lincolnshire, North East Lincolnshire, Hull, and East Riding have joined together to develop the Healthwatch Humber virtual care home engagement project to understand the experiences of residents, families, friends, and carers in care homes across the Humber region.

## What is Virtual Engagement?

Due to the ongoing COVID-19 pandemic, the nature of Healthwatch's activities shifted from physical engagement to online 'virtual' engagement. We did not want to lose the opportunity to engage with care homes in this unprecedented time and wanted to have the voice of the resident heard. This has meant that all engagement with Wilton Lodge occurred via online methods.

The promotional activity Healthwatch undertook to advertise the virtual engagement and to gain questionnaire responses, was done via the homes and Healthwatch's social media platforms. When the engagement took place, all the interviews with staff, residents and the registered manager were completed using online platforms such as Zoom.

## Overview/Background

Wilton Lodge is a residential care home run by the HICA Group, located in the middle of Holderness Road in Hull, within close proximity of Mount Pleasant and East Park.

The care home is a two-story building with bedrooms located on both floors, it has an extensive garden enclosed within the grounds of the home. In total, Wilton Lodge can provide care to 48 residents and is registered to provide residential care services to individuals over the age of 65 and also individuals living with dementia.

The HICA Group is a not-for-profit organisation that provides care and support to older individuals and those with a learning disability across Yorkshire, Lancashire, Humberside, and Lincolnshire. They manage 17 residential care homes, 12 which provide support to older individuals and 5 which supports individual with learning difficulties as well as providing a domiciliary care service across these areas.

Following the most recent Care Quality Commission (CQC) inspection in 2017, Wilton Lodge improved its rating from 'Requires Improvement' to 'Good'.

At the time the Virtual Engagement took place, Wilton Lodge provided care to 47 residents.

## Methodology

Healthwatch undertook research prior to inviting Wilton Lodge to participate in the Virtual Engagement.

We looked at a range of care homes throughout Hull to see what COVID-19 information was displayed on their website and whether it displayed how family and friends can contact residents. We also looked online to understand what social media platforms they had and how family and friends were being kept updated on the residents' wellbeing.

We contacted Wilton Lodge to discuss the virtual engagement in October 2020. The care home agreed to participate and for it to begin on 23<sup>rd</sup> November 2020.

The first week of the virtual engagement was focused on promoting the opportunity to be interviewed by Healthwatch which was extended to staff, residents, family and friends and the following week was when the engagement took place.

We designed promotional materials such as posters and leaflets, sending them to Wilton Lodge along with letters for staff members, residents, family and friends to distribute accordingly.

We contacted the HICA Group to discuss advertising the virtual engagement online. We both regularly shared our Care Home Feedback Survey across different Social Media platforms to explain how family and friends can be involved.

We did receive feedback from two family and friends through the survey but sadly when we contacted them, to invite them to be interviewed, we did not receive any response.

The week-long engagement commenced from Monday 30<sup>th</sup> November 2020. In total 25 people completed the survey, this included the Registered Manager, 11 staff members and 13 residents.

## Interview with the Manager

We arranged to interview Mildred Awino Olweny-Myers who is the Registered Manager at Wilton Lodge and has been in this post for over 5 years.

### Visiting

At the start of the pandemic, Wilton Lodge restricted visitors in the home and only allowed staff members and essential professionals to enter. The visiting restriction changed over time in-line with Government guidance.

As restrictions were reduced and garden visits was allowed, the home had a policy in place where if they experienced more than two positive cases, they would re-introduce restrictions to reduce the risk to staff members, residents and family and friends.

Mildred informed us that they communicated the restrictions by having resident meetings (in small groups) and through one-to-one discussions with residents. They wanted to make sure that residents understood why and what these changes were, as well as to give them the opportunity to ask any questions and to have their concerns heard. She also contacted family and friends by telephone, email and letter and ensured notices clearly visible at the front entrance.

As restrictions eased and garden visits were possible, they provided updates to family and friends on how they could book appointments and the procedures they must follow while visiting residents.

When asked what the response was from family and friends and residents, Mildred told us:

**“Some totally understood why the restrictions were in place and offered to support us wherever they could. We knew everyone was coming from a good place so when we received calls from family and friends to express their dissatisfaction, we listened to them and tried to make sure they were put as much at ease as possible; I completely understand that not seeing their loved one is distressing.**

**Some residents were understandably upset. It was really sad to be honest as some residents’ health declined due to lack of physical contact with family. I feel that is a big part of what keeps them going and is invaluable when it comes to maintaining their spirits.”**

During lockdown, Wilton Lodge was able to maintain communication between residents and their family and friends by using an array of virtual platforms and window visits.

We were told that they had used Zoom, Facetime, WhatsApp, Skype and have bought a large portable interactive tablet-table so residents can see their family and friends on a big screen. They also started a Twitter account and with permission from residents and family and friends they regularly share updates through pictures and videos. These were also sent to family and friends through email where possible.

In summer, they were able to introduce garden visits as they put in place measures to reduce risk as much as possible. The home completes daily risk assessments and has a temperature check at the entrance, which must be used by everyone prior to entering, as well as a COVID declaration, which needs to be signed each time family and friends visit.

There was an appointment system put in place where family and friends could book to see residents on two set days of the week. This was increased to three days and with two family and friends able to visit a resident at the same time prior to the second lockdown.

The only exception was when a resident was at End of Life; the home would allow indoor visits with a nominated person(s), but they had to follow rigid hygiene procedures and was provided with full PPE.

When asked about her concerns around visiting, Mildred told us:

**“We don’t know who the family and friends have been in contact with. On occasion, we had to remind visitors about social distancing and the requirement of wearing PPE correctly.**

**We understand that residents, their family and friends have physical contact needs and think “it’s just one hug” but that single hug could be very detrimental to the resident and the home.”**

Mildred explained to us that although necessary, she is aware the restrictions has had an impact on the resident’s overall health.

**“Residents have been low in mood and have deteriorated; some have avoided sitting near and socialising with other residents. There has also been an increase in incidents; some residents like to go out and travel to places but frustrated that they cannot do that.**

**The restrictions have had an impact on some residents. We’ve found that some residents who didn’t need any support with moving around or during mealtimes prior to the restrictions now require some level of assistance.”**

### Outbreak Management (Including Testing)

Mildred explained to us that HICA had placed a generic continuity plan across all of its homes at the start of the pandemic, which was then adapted to the specifics of each home.

The plan was developed from the bottom-up which Mildred felt really made a difference as it was based on the feedback from ground-level staff members. HICA had set up a generic risk assessment template which each home received to ensure they were aware of the processes they needed to follow.

Mildred told us there were some difficulties in the sector, but she was thankful it did not affect them.

**“There was some panic at the start due to shortage of PPE across the sector with places overstocking on PPE while others found it difficult to source supplies. We were relatively lucky it did not affect us as we sourced new suppliers and some of our resident’s family members knew suppliers so put us in touch. We also received donations of visors from the local community and resident’s family members.”**

Mildred informed us that their trainer had undergone a ‘Train the Trainer’ programme with Infection Control and all staff members have received training specifically around COVID-19. She felt the training was good as it re-enforced the importance of proper procedures around PPE and hygiene.

When asked how she found the process of managing an outbreak, Mildred told us:

**“Not any different from any other really; just scarier and more enhanced. It would have been ideal to have enough staff members so we could dedicate one to each resident, but it was not possible. It has been stressful, on myself and staff members to be honest; but manageable.**

**There has been concerns about ‘what if’s’, but the staff members team have been great. Each home has shared practice with a central team, so we know what’s happened elsewhere and what actions need to be taken or consider reducing risk of spread.”**

Staff members have routine testing at the beginning of each week and we were told there has been no issues around testing. Five staff members confirmed with Mildred that they have had an anti-body test and the results have come back negative.

When asked what measures have been put in place to support staff members who test positive for COVID-19, we were told:



“We were given some leeway from the organisation so where possible we’d move shifts around or grant annual leave so no-one is out of pocket. This was prior to the recent changes so now staff members are paid their full salary if they have tested positive. Staff members who are isolating will receive SSP but can apply to the council for lost wages.

HR keeps in regular contact with staff members who test positive to see how they are feeling and offer any additional support they may need. We have an app which provides information to staff members to ensure they are always up-to-date on what changes have been put in place.”

Residents are tested each month unless there is an outbreak where they are then tested weekly; testing is only done by staff members who have been trained. Mildred told us that there are challenges when testing residents as it is an unpleasant experience and residents with dementia are upset whenever testing is done, as they do not understand what staff members are doing or why they are doing it.

Any positive results are recorded in a log; there are processes in place where staff members know which residents have tested positive however positive results for staff members are kept confidential and stored securely.

Residents who attended hospital were tested before being discharged back to the home. Initially, there were issues where residents were discharged before the home received the results and then needed to contact the hospital to enquire whether it was safe to accept the resident. The home now calls the hospital prior to discharge to make sure the test has been done and the resident is not discharged until they are aware of the results.

### Changes in Care and Access to Services

Wilton Lodge has tried their best to ensure that there are no changes in the care residents receive and that there are a variety of activities still available for the residents to participate in despite not being able to leave the home.

The home has two activity coordinators, one for each floor and have three different activities set on each day. These are placed on a board in the centre of the home so residents can check what is happening on any given day.

Recently, with Hull Fair being cancelled the home created its own Hull Fair with different stalls being set up throughout the home which the residents could go to and get items from. One staff member is a qualified hairdresser so has given pamper sessions to residents.

Residents are checked every hour and are encouraged to go for a walk or to sit with other residents and talk to them to avoid isolation. Residents who test positive are encouraged to isolate in their rooms, where this is not possible in

communal areas. The rooms are decorated with the residents' own belongings to make it as comforting as possible.

Residents have attended all their hospital appointments; GP and Dietitian's have been coming into the home whenever needed or have offered virtual consultations. The home had already planned for every resident to be under one GP surgery, prior to the pandemic and was undergoing consultation with residents and their families. Consent was given and staff members have found it much easier to be able to contact one GP and one clinical lead about their resident's needs.

Mildred informed us that initially the Speech and Language Therapy Service (SALTS) was difficult to access as when it came to issues such as swallowing it was difficult to assess a person experiencing such difficulties via video consultation, However, Mildred told us that this is no longer an issue as they are now able to access these services as normal.

### Wellbeing

Mildred found there was an impact on her own, her staff members and the residents wellbeing since the beginning of the pandemic. For residents, the biggest impact was due to not seeing their family; for herself and her staff members it was the increased work and pressure as well as the concerns they had if COVID-19 came into the home and the potential that they might take it home.

**“It's impacted my wellbeing a bit, I normally leave work and exercise to help de-stress as I am so busy but that's been stopped in this lockdown unfortunately. My faith and singing have helped me massively and I have had a lot of support around me which has kept me going. HICA has offered ongoing support to staff members for mental health.**

**It has been really stressful for staff members; they have been forgetting things as they have been so rushed. We lost staff members as they decided to leave as they were concerned about catching it and not having anyone to look after their children or worried about passing it to other members of their family. We have had some staff members go on sick with stress because they could not cope and then later on came back not because they wanted to but because of financial difficulties. We tried to support them where possible and reassure them”.**

Mildred told us, she wishes to keep what has been put in place to help residents keep in contact with their family and friends and for family and friends to continue to have more involvement in the residents' care. She had found it has made a difference and when asked if there were any other changes made which they want to keep going forward she said:

“We've got a dedicated visiting room which has been made to feel like what the residents living room would be. I definitely feel that we need to continue to use that for visits going forward as it is more homely. We've not communicated as much with family and friends as we do now, and it is really rewarding for us and them, so we'll be taking the extra time to make sure we continue to do it after the pandemic.”

### Support

When asked what support the home had received since the start of the pandemic, Mildred told us that HICA had offered a lot of support to herself and staff members. HICA developed an app which made it easier for staff members to keep up to date as it was regularly updated to reflect current government and organisational guidance.

In terms of support from local services, Mildred told us:

“We got quite a lot, but it was well needed. Hull CCG helped set up a specific GP for residents and we speak to them each week about the resident's wellbeing. It has been a time saver to be honest as we used to have to call different GP's from Monday to Friday.

We also had the Frailty Team which consists of the GP, a Pharmacist, a Nurse, an Optician and Occupational Therapist; they assessed each resident which has made our lives easier as we did not need to call 111 as we could call a dedicated number and we spoke to someone who already knew everything about the resident and their needs.

The Local Authority sent regular information to us and would contact us regularly to make sure we were okay. They set up provider forums where we all got together and would have any new guidelines explained as well as any questions answered. We're also receiving free PPE until March which is a big help.”

The only criticism Mildred shared with us was that she received a lot of calls from different public bodies who were all asking the same questions. It would have been easier for her to speak to one central person, such as someone at the Hull COVID-19 Team and for them to share information with other professionals.

At the end of the interview, we asked Mildred what she had learnt since the start of the pandemic, Mildred told us:

“I've learnt a lot about resilience. We have had to work harder as a team, we have included staff members in discussions and meetings to make sure any questions or concerns are heard. I feel with the more information we've received, the more we've been empowered as we know we have done everything we can to make a difference.”

## Observations

Following the interview with the Registered Manager; we had a virtual tour of Wilton Lodge.

We found that from what we could see the communal areas inside Wilton Lodge were very well kept, clean and spacious. There has been significant thought and consideration put into place in mind of COVID-19 whilst still understanding and meeting the needs of residents; for example, the placement of the furniture was socially distanced throughout the home but done so in a way that supports social interactions between residents.

Signage is clear throughout the home, anyone entering has to use the temperature check machine at the entrance and visitors have to sign a COVID-19 disclosure. PPE stations are kept secure and located throughout the home. A waiting area (for lateral flow test results) has been created and a visitor's bathroom has been set up to ensure there is as little risk as possible to the spread of COVID-19 when facilitating indoor visits in the future.

A dedicated room has been set up just off the reception area to facilitate indoor visits when possible. The room mirrors a living room and is pleasantly decorated; with the décor and furniture being similar to what residents may have had in their own homes.

Mildred explained that the room was designed to be as comforting and homely as possible, the furniture is socially distanced in the room but due to the design it looks completely natural. Mildred went on to say, the purpose of the room is to restrict visitors going into the main environment, to protect the staff and residents but also to provide an alternative environment whereby residents could meet their family and friends in comfort.

The home seemed very calm with staff members dressed in full PPE, we saw staff members interacting with residents whilst they were having their lunch and supporting one resident in the lounge area who was using the interactive tablet-table. The residents seemed to be well kept and cared for. One resident stopped the Registered Manager and spoke to her during the tour; they appeared to be in high spirits.

The home has an activity board which has three activities scheduled in each day. Mildred explained that they always try to ensure that these activities vary to meet the needs of those with different capabilities. If any resident is isolating then carers will complete activities with them in their room.

Mildred told us that they keep a log of what and how many activities residents are involved in and any support they need to participate. Mildred made us aware that

some residents preferred to watch so they make sure there is always space available to do this.

When providing a tour of the garden, we were shown a purpose-built summerhouse which had just been built. It has a Perspex barrier between each entrance so residents can see family and friends safely, regardless of the weather which Mildred thinks will make it much easier for future visits.

“When restrictions eased, we sometimes found it difficult as family would come to visit but as the weather was poor the resident would not want to go outside. When we explained this to some family members, it caused upset as they felt frustrated having to travel such a long distance and felt we were purposely keeping them from seeing their relative. I completely understand why they would be upset but it was hard on myself and my staff members as we’ve worked hard to do the best we can for every resident.”

## What did staff members say?

During the Virtual Engagement, we received feedback from a total of 11 staff members. Their experiences while working at Wilton Lodge ranged from under a year to over 10 years.

We found staff members enjoyed working at Wilton Lodge and they felt their work was rewarding as they were making a difference to the lives of their residents.

**“I enjoy interacting with residents and doing what I can to make them feel comfortable and their days a little better.”**

### Visiting

All staff members confirmed they were aware of visitation restrictions when lockdown began in March 2020. Initially, no visitors were allowed into the home however this was later relaxed in exceptional circumstances, such as when a resident was at End of Life. In such circumstances, a visitor was permitted into the home for 30 minutes by appointment but would be required to follow hygiene procedures and wear full PPE.

Initially, window visits were allowed and when restrictions were eased, garden visits were facilitated by appointment only; with members of staff members being present in the garden for the duration of the visit to ensure social distancing rules were being adhered to.

Staff members told us that they experienced some challenges with residents and family members due to the visiting restrictions. One staff member told us:

**“It’s been horrendous and heart-breaking; some residents were okay with the changes and others really struggled. Some staff members received abuse from residents and families.”**

When asked about their views of the restrictions, we found that staff members were ultimately concerned about the resident’s wellbeing and the impact on them from not being able to see their loved ones.

**“The restrictions were for the residents own safety. It has been hard for families not being able to see them and it has not been good for the wellbeing of residents. I feel some are suffering as they have not been able to see their family.”**

### Outbreak Management (Including Testing)

Wilton lodge had several changes to protect staff members and residents as much as possible. Staff members have to use the temperature check machine at the front door prior to entering the home, follow increased handwashing / sanitising routines with extra sanitiser stations being placed around the building.

Staff members were not allowed to mix between the two floors of the building and when a new food supplier was sourced who were able to deliver supplies, the staff members were not permitted to go to the local shops. All staff members received training on correct PPE usage and additional training on how to change dressings to save professionals having to enter the home, they felt they had adequate supplies of PPE from the very start of the pandemic.

All visits to the home were initially stopped in accordance with Government guidance (including non-essential professionals), activities with residents were socially distanced and only two residents were able to be seated at each table during mealtimes.

All staff members are tested on a weekly basis with one staff member who we interviewed having undergone an anti-body test.

**“We’ve had no issues with testing but it’s not very pleasant. At the beginning the results took two weeks to get back, then results were lost or unclear which was really scary. Testing process is much better now, we get the results in a day.”**

The only issue raised by some staff members was that testing is on set days, and if they were not on shift, they still had to come into work. Occasionally, they were unable to go to work to be tested as they had other personal commitments.

When asked about the process if a staff member tests positive. We were told that staff have to isolate for at least 10 days and will receive their regular pay. Staff members must inform any of their family or friends who they have been in contact with. We were also told that any staff that had tested positive, received regular calls from HICA’s head office throughout their isolation period to check on their wellbeing.

There were cases of COVID-19 in the care home following a hospital discharge; in total it affected four residents and one staff member. Staff members felt confident in the support they had been provided with and felt safe under the circumstances.

**“We are smashing it! It is going really well. We have an excellent team and excellent manager. It’s been stressful at times, but we run a tight ship, staff members are supportive, and this has helped keep us all going.”**

### **Changes in Care and Access to Services**

Throughout the pandemic, the majority of staff members thought their job role had changed to some degree. Some staff members changed their job role completely and others undertook additional tasks, which was above and beyond their role and responsibilities, to help out.

To protect staff members and residents, arrangements were made for staff members to work on the ground or upper floors to prevent any cross-contamination. This also restricted the movement of residents between the floors.

Staff members also told us that the amount of paperwork had increased, and the implementation of new procedures was also an added pressure as they had to understand and adhere to them.

Initially, the home experienced problems obtaining food supplies due to delivery time slots not being available. This was overcome by staff members agreeing to undertake regular shopping trips.

**“There was lots of pressure, this wasn’t helped by people panic buying as deliveries had stopped so we had to go out and buy supplies. We received abuse from people in shops as we were buying a high quantity of items to keep the home going.”**

Despite the majority of staff members feeling that their job role had changed to some degree, they did not feel that this impacted on the quality of care that they provided. However, some staff members felt the changes required were problematic.

**“There were issues with dementia patients as we were having to wear masks and it made it difficult to communicate with some residents and some residents were frightened of all the changes.”**

**“Communication was an issue - some residents respond better to facial expressions, and wearing a mask made this more difficult - not seeing a smiley face and having just a mask wasn’t ideal.”**

### **Wellbeing**

We asked staff members about their own wellbeing and what concerns they had throughout the pandemic. The main responses that we received related to safety, this was in relation to their own families and the wellbeing of the residents.



**“My main concern was catching COVID and bringing it home to my partner or worst still losing my life or loved ones.”**

**“Some residents were really upset as they didn't understand why they couldn't see their family.”**

**“I was worried about all the residents contracting COVID and becoming extremely, even worse was if they passed away.”**

Some staff members commented on additional pressures placed upon them due to staffing levels, having to wear additional PPE throughout the duration of their shift as well as the extra paperwork. Staff members felt that all this added pressure had contributed to them feeling exhausted.

**“Wearing this amount of PPE whilst carrying out caring duties, regardless of the resident, adds to the exhaustion of carrying out an already physically demanding job as it's very hot and uncomfortable.”**

Frequently negative comments were followed by how staff members pulled and worked together. When asked what support they received, one staff member told us.

**“We received regular updates and had an adequate PPE supply. The Manager and staff members supported each other; extra shifts were added. We all pulled together as one big team.”**

## What did friends and family say?

Healthwatch Kingston Upon Hull were unable to interview any of the resident's friends and family for the Virtual Engagement. We did have two family and friends complete our initial Care Home Feedback online survey but when we contacted them to invite them to be interviewed, we sadly did not receive a response.

The feedback from the online surveys were:

**“Wilton lodge have kept us up to date with newsletters”.**

**“The care home has been excellent on cleanliness and clearly care a great deal. As we have to see my father outside and there are currently few facilities to enable this during inclement weather, I have often done 100+ mile round trip for a cancelled visit.”**

## What did residents say?

During the Virtual Engagement, we received feedback from a total of 13 residents. The length of time residents had lived at Wilton Lodge ranged from one month to 5 years.

### Changes to Care

We found that the majority of residents thought their care had not changed whilst restrictions were in place. When asked what changes had been made, we were told:

**“You can’t sit close with friends due to social distancing.”**

**“I don’t feel there has been any changes to my care. I have stayed in my room more but that has been my choice. I have started to eat in the communal dining room where we can now have two people per table. The staff members keep me informed but I do as I am told as I trust the staff members with my wellbeing.”**

**I would like to bath more often as I only take them once a week but do wash myself daily.”**

The majority of residents thought that they were able to make their own decisions and that their views were listened to. More than half of the residents said they had a named carer and five told us that they have had a combination of carers with one resident saying:

**“I am supposed to have a named carer, but I am not sure who that is, everyone seems to look after me.”**

All but one resident felt safe at Wilton Lodge. When we asked why the resident did not feel safe, we found it was not because of anything within the home:

**“It’s just because the virus is killing people.”**

Most of the residents we interviewed were aware of the COVID-19 complaints procedure; with three residents being unsure. Every resident told us however that they knew who they could speak to if they had any concerns.

### Access to Services and Testing

The majority of residents said that they still had access to services when needed and that their GP had not changed. One resident was unsure as they have not needed to see a GP for the past five years.

Four residents had virtual GP appointments during lockdown, the consensus from the residents was that the appointment was not a like-for-like alternative.

**“It was ok, but I found it a bit strange.”**

**“I couldn’t really see the screen, would have been better face-to-face.”**

Four residents informed us that they had attended the hospital during the pandemic. When asked about their experience we were told by one resident:

**“You kept your distance from other people at the hospital. I was kept warm and was given food and drink.”**

Another resident expressed some dissatisfaction on having to visit the hospital.

**“I didn’t want to go but they insisted, I waited ages to come home.”**

Residents informed us that they had been tested for COVID-19; two of which also had an anti-body test. We were told that if they had a positive outcome they would have to isolate and would be supported by staff members. One resident who has had COVID-19 told us:

**“I don’t remember much because I felt very unwell. I was kept in my room and had all of my food and drinks brought to me.”**

Some of the residents told us that their family and friends had been tested for COVID-19 however they were unsure how often they were tested, and some residents were aware that if they tested positive, they would have to isolate.

### **Communication and Visiting**

When speaking to residents about how they kept in contact with family and friends, we were told they maintained contact using a tablet, telephone and through garden and window visits.

**“I have a landline in my room which I use to speak to my daughter. During the summer I saw her in the garden, but she had to wear a mask. My son has recently returned from Spain and I would like to see him. My friend has been doing window visits so I’m hoping my son can also do that.”**

We also asked residents how they feel about the restrictions, not being able to see their friends and family in person and the current ways they can keep in contact.

**“As long as my daughter and son continue to ring me and I can speak to them, I am okay.”**

**“I miss being able to see them physically but got my own telephone.”**

“It’s not very nice as I cannot see them as often. When the weather was cold it would have been nice to be indoors.”

“I couldn’t see my family as much as I would have liked, and I cannot hug my own children.”

“I would rather be at home with my family, but this is the way it has to be. I am keeping my fingers crossed that the vaccination will work out so things can go back to normal.”

### Wellbeing and Activities

We asked residents about their experience of living at Wilton Lodge. Two residents told us that they would have preferred to be in their own home, but the majority of residents had told us they were content.

“I like it, I like seeing other people, so I am not on my own.”

“I’m happy to live here, this is my home.”

We found that most of the residents felt their overall wellbeing had been fine and they did not feel isolated throughout the pandemic, despite the restrictions in place. This was attributed to the service provided by the home and the prospect of the residents seeing their loved ones again, in the near future.

“Overall, it’s been good, it’s just getting used to the restrictions.”

“It’s been good, lots of nice people to converse with, good food and things to do. It’s better than being on my own.”

“I am thankful for everything and count my blessings. My great, great grandson was born at the end of March and I am looking forward to seeing him.”

However, some residents told us that their experience has changed due to the pandemic and current restrictions:

“When I first came here it was good but now, I cannot go out.”

When we asked residents whether there had been changes to their daily activities, the majority of residents did not feel there had been any changes.

“They do try to keep us busy and entertain us. I do keep myself occupied in my room though as I enjoy knitting and doing puzzles.”

There was one resident who enjoyed going out but due to the restrictions this had changed.

“Before we could go on shopping outings, visit places and have trips out, but this has not happened since lockdown. Recently we’ve been able to go out in small groups in the minibus to see the Christmas lights.”

## Conclusion

From the information we have gathered from the manager, staff members and residents as well as our observations it's apparent that a great deal of thought has been put into place to safeguard staff members and residents. Wilton Lodge has worked with other HICA homes (as a collective) by feeding information into HICA about their experiences and this has resulted in a generic risk assessment and action plan being developed for each home to follow.

The home had adequate supplies of PPE from the beginning and resolved the difficulties it had with food deliveries by sourcing a new supplier. It has checks in place from the entrance of the building (temperature check machine); which staff members and visitors must use prior to entering in order to reduce the risk of bringing COVID-19 into the home. If a staff member tests positive, we found that HICA's head office maintains contact with staff members and supports them throughout their isolation period and the home has risk assessments and policies in place to safeguard residents if any test positive.

We recognise that local services worked together to provide support to the home and to the residents. There was significant praise for the simplicity of accessing a single GP and clinical lead for every resident and the support the Frailty Team and the Hull COVID-19 Team offered. The only criticism was in relation to the amount of calls received by the home from multiple public bodies asking the same questions; they suggested it would be easier to feed into one public body and for them to share the information with other professionals.

Multiple forms of communication were implemented to enable residents to stay in contact with their family and friends and when possible, garden visits were introduced. The home was proactive in creating a Twitter account and gaining permission to share pictures and videos of residents to reassure family and friends about their loved one's wellbeing.

Although virtual engagement is possible in the home, it does not come without challenges. During our interviews with residents and when we had a tour of the home, we experienced issues with the Wi-Fi connection which interrupted the engagement from time-to-time. We would consider this to be a significant issue due the importance of virtual communication at this moment in time.

Wilton Lodge has seen the positives of the new methods of communication, by having more frequent conversations with family and friends and having them more involved in the resident's care; this is something they want to keep after the pandemic.

They have already listened to residents and family and friends who experienced difficulties with garden visits due to the poor weather by building a summerhouse.

This offers reassurance that visits can go ahead regardless of the weather while still ensuring social distancing due to a Perspex barrier being in place.

Overwhelmingly there was a consensus that staff members felt supported by management and each other. Communication was found to be satisfactory overall; however, one staff member did inform us that they felt it could have been better by having more team meetings.

There has been an overall impact on staff members wellbeing; we would attribute this to the current situation as the feedback we have received suggests there has been significant efforts from HICA and management to support their staff.

It was clear from our interactions with residents that they are missing physical contact with family and friends however they understand why the restrictions are in place; the impact of this has been noted by the Registered Manager as she already identified that some residents' health has deteriorated since restrictions were put into place.

We can also determine from what we have been told that family and friends have been impacted from the restrictions. As both the registered manager and staff members highlighted that some family and friends have expressed their frustration when garden visits did not go ahead or that they were unable to come into the home to see their loved ones.

We recognise however that the home has done all it can to facilitate contact and that they are already planning for the future by creating a homely space for residents to see family and friends and by providing a comfortable area where visitors can wait for the results for their lateral flow test.



## Recommendations

Whilst engaging with some residents (and having a virtual tour of the home) we found there were a number of times where the signal would drop and in one instance, due to the frustration it caused a resident, we decided it would be best to end the engagement at that time.

We recognise that this is due to the size of the building but feel it would be a reasonable recommendation for HICA to look into procuring some WIFI boosters or looking into a Wi-Fi mesh network for Wilton Lodge, so the wireless signal is efficient throughout the care home.

This recommendation will allow for residents to be able to engage with family and friends virtually with less difficulties which is important to their needs and overall wellbeing.

### Registered Manager's Response:

**“Wi-fi is indeed an issue and is being constantly reviewed, boosters have been put in but I am glad you experienced the same difficulty to support urgency in resolving this.”**

We recognise through our interviews that there has been significant support provided to staff members throughout the pandemic. However, we would recommend that further discussions and meetings take place with staff members (on a one-to-one and / or team basis) to identify what additional support and processes could be implemented, either on an as needed or more permanent basis, to help reduce the additional pressure that are facing.

### Registered Manager's Response:

**“we are having regular team briefing and 1-2-1 one sessions with staff during supervisions/appraisals.”**

As some residents were unsure about the COVID-19 Complaints Procedure, we'd recommend speaking to residents to check their understanding of this and other COVID-19 specific information in case they have any unanswered questions or concerns.

During the virtual tour, we noticed that the Registered Manager and Deputy Manager office spaces had a large number of items (boxes etc) stacked. We highlighted this to the Registered Manager after the tour as we considered it to be a fire hazard. We recommended that these spaces should be decluttered as soon as possible.

### Registered Manager's Response:

“We were struggling for storage space at time of the engagement for our PPE, also this was due to lack of storage space for extra PPE and cleaning products, as we created changing room for staff. We now have a storage space under renovation and using a spare bedroom for the PPE. All these have now been moved.”

When possible, we would also recommend for lateral flow tests to start for family and friends so both they and the residents are able to have that social contact as it is clear through out interactions how important that is to the overall wellbeing of residents.

## Acknowledgements

Healthwatch Kingston Upon Hull would like to thank Wilton Lodge, Mildred the registered manager, all the staff members and residents who participated in this Virtual Engagement and our volunteers for helping us to make this a success.

## Distribution

This report has been distributed to the following:

- Healthwatch England
- Hull Clinical Commissioning Group (CCG)
- Hull City Council
- Care Quality Commission (CQC)
- Wilton Lodge and HICA Group
- Healthwatch bodies within the Humber Network