HEALTH AND WELLBEING BOARD

June 2020

| Title: Mental health and wellbeing of care staff during COVID-19 | |
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| Open Report | For Information |
| Wards Affected: ALL | Key Decision: No |
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Sponsor:

Nathan Singleton, CEO, LifeLine Community Projects

Summary

This report highlights the physical and mental well-being experiences of care home and domiciliary care staff during the COVID-19 pandemic. This evaluation, carried out independently, focuses on the support available to staff through statutory services and other means. Recommendations for improvements and developments form part of the report.

Recommendations

The Health and Wellbeing Board is asked to:

- note the findings in the report
- note the recommendations in the report

Reasons for report

To highlight to the Board the physical and mental wellbeing experiences of care home and domiciliary care staff during pandemic.

1. Introduction and Background

- 1.1 Healthwatch Barking and Dagenham published a report based on the experiences of residents and staff from care homes during the beginning of the pandemic. At the time, the findings showed that overall, residents and their families felt that care home staff provided excellent care for both the health and well-being of their residents during the COVID-19 crisis.
- 1.2 Feedback received from care home staff made it clear that dealing with the unknown factors of the virus, lack of PPE and training, positive cases, death and the strain of additional communication requirements caused them fear. As a result, staff were tired and anxious after dealing with a high-stress situation for several months. The findings made it clear that support was needed for the mental health of staff working in these areas.
- 1.3 The findings from the report formed the basis of undertaking this project. The aim being to talk to care and domiciliary care staff to ascertain what support is available to staff when it comes to mental health and how their mental health and wellbeing

has been impacted. In addition the project would be to explore good practice and where support can be improved.

2. Key findings

- 2.1 Findings from the report show that 90% of staff said their managers and colleagues had treated them very well or well enough in regards to their mental health and wellbeing. Interviews revealed examples of where peer to peer communication and a caring approach by managers, helped staff to cope better during their difficult times. However, it is also evident that different forms of support works for each individual.
- 2.2 Evidence collected from staff shows that peer support has been recognised as a way of coping during the pandemic as well as the key role manager's play in supporting staff wellbeing. Overall employers have tried to support staff as best as they can in exceptionally difficult circumstances. However, it is also apparent from care home and domiciliary staff, that coping with the unknown issues has impacted their mental health and wellbeing.
- 2.3 The report shows 30% of participants found out about mental health and wellbeing services themselves, interestingly they identified themselves as either domiciliary care workers or Personal Assistant (PAs) working either independently or with agencies.
- 2.4 The report shows how COVID-19 has massively affected the daily lives of 60% of those staff that provided Healthwatch with feedback. The interviews carried out with staff, gave an insight into the causes that emerged. Staff reported changes to their routines soon after the first lockdown was implemented. Individuals reported having to work for extended hours, wearing uncomfortable PPE equipment for long periods.
- 2.5 In addition staff reported their personal lives being impacted by changes imposed by government guidance and work related issues such as:
 - having to think about childcare arrangements as schools closed
 - caring for their frail and elderly relatives
 - shopping for food and household goods proved challenging between shifts
- 2.6 Like NHS staff, social care staff are key workers and they were also hit by the circumstances that prevailed with the lockdown, whilst having to continue to work. Some experienced hardships and financial difficulties at this time; piling more worries onto an already fraught situation.
- 2.7 Recommendations within the report are based on the evidence collected from staff covering four themes:
 - Disparity between care services
 - The opportunity to share concerns
 - Support for BAME staff
 - Community resources to support care staff

We have received a positive response from London Borough of Barking and Dagenham to the recommendations made.

3. Consultations (list if any)

- 3.1 The online questionnaire link was sent out to;
 - 99 local domiciliary care providers,
 - 10 nursing and care homes,
 - 11 mental health and learning disability service support providers.
- 3.2 Healthwatch Barking & Dagenham used Twitter and Facebook to send out the link on social

media and made it accessible on the website. 10 staff members agreed to be interviewed.

List any appendices Full report attached

List any background papers used in preparing the report

NONE

NOTE ON KEY DECISIONS

By law, councils have to publish a document detailing "Key Decisions" that are to be taken by the Cabinet, Health and Wellbeing Board, or other committees / persons / bodies that have executive functions.

The document, known as the Forward Plan, is required to be published 28 days before the date that the decisions are to be made. Key decisions are defined as:

- (i) Those that form the **Council's budgetary and policy framework** (this is explained in more detail in the Council's Constitution)
- (ii) Those that involve 'significant' spending or savings
- (iii) Those that have a significant effect on the community

In relation to (ii) above, Barking and Dagenham's **definition of 'significant' is spending** or savings of £200,000 or more that is not already provided for in the Council's Budget (the setting of the Budget is itself a Key Decision).

In relation to (iii) above, Barking and Dagenham has also extended this **definition** so that it relates to **any decision** that is likely to have a **significant impact on one or more ward** (the legislation refers to this aspect only being relevant where the impact is likely to be on two or more wards).

As part of the Council's commitment to open government it has extended the scope of this document (Forward Plan) so that it **includes all known issues, not just "Key Decisions**", that are due to be considered by the decision-making body as far ahead as possible.