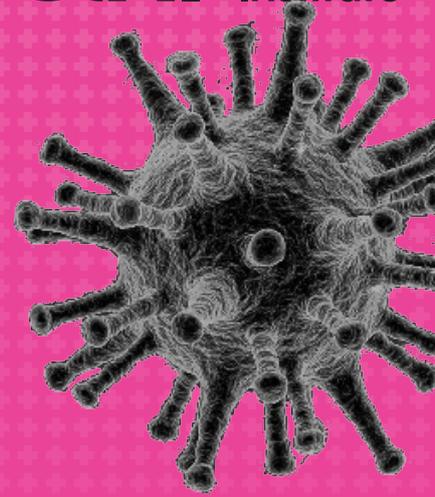


# Community Nursing Covid-19 REFLECTIONS

Reflections from local care homes in Lancashire  
about the new guidance and living with COVID



## Reflection 1

In the first wave of the Pandemic, we ran short of bread, eggs and toilet roll, there were supply issues. All Staff bought in two loaves and eggs each, one for themselves and one for us, so therefore we got by on this basis.

At the beginning of the pandemic, we did not have any masks. I had a supply of dust masks and had to use them for emergencies only. We found a company that made us some material ones, which was not ideal, until we were able to get them through the supply chain.

We lost three residents in the first wave. I was vilified by relatives, who thought we were not doing enough to contain our outbreaks, and I was not allowed to go to a resident's funeral, which broke my heart.

Staffing issues were addressed by the council assisting in funding for agency staff; at one point all our seniors and managers caught COVID. Two seniors covered a 9-day stretch between them. They did long hours to make sure residents were safe; I bought them something as a token for their support, which they gave to the home and residents.

There was some light in the dark times. Community support was overwhelming, we received shampoo and toiletries from a superstore for our residents, and at Eastertime in the first wave we received Easter eggs for the staff and residents.

Through Government grants, I was able to pay for taxis to get staff to work, as they were too anxious to go onto public transport, so I was grateful for that.

*Care Home Manager*

## Reflection 2

We ran out of eggs for our residents because of food chain issues; we went to a local supermarket to buy in bulk and were refused until we sent for the manager; when we told her it was for our residents, we were allowed to purchase them.

*Care Home Manager*

## Reflection 3

I was working as an administrator in the care home, however during the second wave of the Pandemic we were short staffed, so I had to assist in a care role as well. I had previous experience as a carer, but in times of need we had to work as a team.

*Care Home Administrator*

## Reflection 4

Staff worked longer hours, gave up their holidays to keep our residents safe; there were no agency workers available, so [we] had to cope. Those that were available were not vaccinated, so [it] was too risky for the home, so we managed without.

*Residential Care Home Manager*

## Reflection 5

It was a scary time, as we had been told to prepare for shortages of fresh produce, so we looked for alternative suppliers in advance. In fact, it was not food but cleaning products we had difficulty sourcing. I was refused a bulk buy of disinfectant in a shop but argued that there was a need for the products because of the nature of the place I worked. They relented in the end. Our company supplied us with PPE, so there were no issues [there].

In the first wave we lost three residents that did not really have underlying health conditions, but just went quiet, their mental health declined, and they died of asymptomatic COVID. There was no testing available to us and getting anyone assessed medically was a challenge. This was a very hard time for us. We only had one Chef and he was in every day with no time off, so think this type of thing was not considered.

*Care Home Manager*

### **Reflection 6**

The first wave of the Pandemic was horrendous; we lost eight residents; two were at end of life, but it was still a blow. We had no proper PPE we paid £250 for a box of 50 masks, but felt we had no choice. Our usual supplier for bread restricted us to two loaves, how was that supposed to be enough for 40 residents. We changed our supplier. We had staff shortages – no agency was available because they had shortages of staff as well. I did 37 8 am to 8 pm shifts in a row working on the ground. I have medical problems; I was on my knees.

At one point we were given pulse-oximeters, BP machines and thermometers and asked to assess our residents. We had no training on how to use this equipment, even worse we did not know how to interpret it. We were being asked what residents Sats were, how would we have known with no training? Support from the Local Authority came eventually – they began conference calls for support. I was asked for a contingency plan in the middle of everything and did not know what I was being asked to do. Surely this should have been done at the start of the Pandemic and not during everything we were experiencing, it was the last straw.

*Care Home Manager*

### **Reflection 7**

Trying to get our residents medically assessed was challenging, one doctor turned up in a vehicle in full respiratory protection but said he could not see all those who were unwell and left. This broke me.

*Residential Care Home Manager*

### **Reflection 8**

We felt that we were forgotten in the first wave, we felt we had no support for our residents, not enough PPE and no one came when we required medical assistance.

Ambulances were pulled out, I felt we had been put out to pasture and that no-one cared. Our situation was dire, staff fell like flies, for want of some proper protection.

The government should be ashamed of what happened to our sector, we had no voice.

*Care Home Manager*