

# Being more Tigger and less Eeyore post-Covid

Ed Watkinson, a former care home inspector who consults for Quality Compliance Systems, maps out an upbeat post-Covid path for care providers

Most readers will be aware of Winnie the Pooh and the characters Tigger and Eeyore. Over the last six months you will have been overrun with a wide range of guidance, opinion and information from third parties telling you what you need to do to effectively manage the Covid-19 pandemic.

As a result, and with the pressure of managing services through a crisis, it is understandable and expected that you may feel a little 'Eeyore': ground down, pessimistic and a little bit defeated.

However, this article will take a different view and highlight how positive the future could be for the care home sector. I will be unashamedly 'Tigger' about the opportunities that might present themselves in a post-Covid world.

I am not ignoring the legacy issues associated with Covid-19, such as financial insecurity, increased resident vacancy levels or post-traumatic stress that some staff feel after being through such an intense, dramatic and unexpected experience. Yet I want to give an alternative, upbeat and positive roadmap for individual services and social care in general.

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## The perception of social care

Arguably the most important societal change over the last few months has been the increased recognition of the value of social care and the services provided for the nation's most vulnerable people. It could be said that this was only after we shouted from the rooftops about the issues faced and holding the government to account on issues such as PPE and Covid testing.

Yet the change did come, resulting in the weekly 'clap for carers', and ministers and others praising social care and the work being done alongside the NHS. That parity with the NHS needs to be embedded into wider thinking and built on over time so the vital services provided by social care do not return to being an invisible 'crutch' for the NHS.

When I talk to staff in care services, I have lost count of the number of times

I have heard the phrase 'I am just a carer'. That needs to change. You do not hear nurses saying 'I am just a nurse'. Staff need to be encouraged to be proud of the work they do, if you feel tall – you are tall!

Another change that should be taken forward is the reduction in the use of the phrase 'qualified staff'. All staff, whatever their role, are qualified to do their job and the use of that terminology belittles care staff and does not encourage them to be strong, proud and seen as equal.

Every opportunity needs to be taken while the atmosphere is receptive to sell yourselves, build your staff and to be determined, clear and unashamedly proud about the important jobs you do. I can hear you saying that this is easier said than done, and you are right – but if we all do our bit in a small way, big changes can be made.

My longer-term hope is for the attrition between the NHS, local authorities and central government on 'who pays' becomes resigned to history and we use the opportunity presented by Covid-19 to stop kicking the social care can down the road and invest in a 'National Care Service'.

I also believe the pandemic has shown that we need to develop a more coordinated social care voice. In recent

months different organisations such as Care England, National Care Forum and the National Care Association have presented their ideas and opinions. I cannot help thinking that if there was one voice then it would have been louder and more easily heard.

### A giant technological leap forward

It is hard to imagine how services would have managed to maintain their services if the pandemic had happened 15 years ago. How would service have maintained contact with families, maintained health inputs or kept up to date with guidance and policy changes? Things would have got done but there would have been more isolation, less opportunity for sharing information and possibly more damaging outcomes.

Technology during the pandemic has opened many people's eyes to what is possible: Skype calls, Zoom conferences, virtual consultations, apps to share information, up to date policies,

electronic care planning and medication processes, online ordering and reporting and so on.

The opportunities have been multiple and through necessity have shown a lot of organisation a more efficient, more effective way of working. A large number of organisations I have spoken with say they will not going back to old ways of working and are actively seeking out and pushing for more ideas of how technology will support deliver better outcomes.

The pandemic could really be the push that was needed to move care permanently into the 21st century. A handwritten care plan or handover notes, I believe, will soon be seen as antiquated as a typewriter, cassette deck or even iPod.

There is an ever-expanding range of options out there for providers to explore – as can be evidenced by a quick flick through the pages of *The Care Home Environment*. An old argument for not

embracing change is 'the CQC doesn't like electronic systems'. That is no longer the case. If you can demonstrate and show technology improves outcomes for people it should be recognised by them and reflected in your rating.

So, exploration into appropriate technological solutions will be an investment and provide you with the tools to prepare you to effectively manage future disruption to services from either a second wave of Covid-19 or other yet unforeseen issue.

### Recruitment - build on reputation

Staff recruitment in social care at all levels has historically been a challenge, with many services relying on agency to cover shifts and not able to attract regular, permanent staff.

Care staff during the pandemic have really stepped up and gone beyond what was expected of them to ensure the continued delivery of high quality, safe services. Examples include staff camping in the grounds of care homes to limit the spread of Covid-19 while still supporting residents.

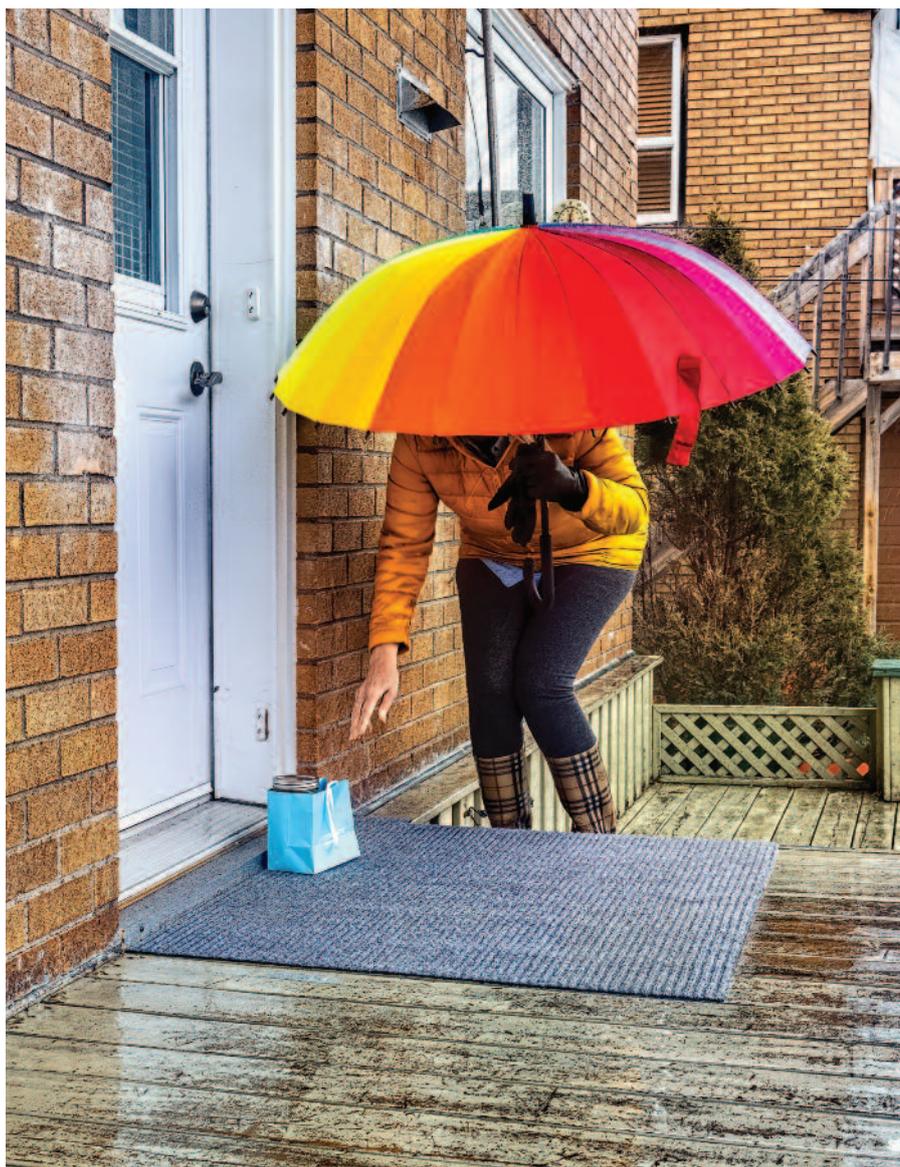
Social care has been seen in a new light as a result of the pandemic: no longer 'just another job' that anyone can do. The skill, dedication, commitment, and compassion shown in all areas of social care has really hit home with the general public, and the esteem that carers are regarded has never been higher. Now is the time to exploit this opportunity, reevaluate your recruitment procedures and develop publicity that reflects what is engaging, positive and rewarding about working in social care.

I realise for the foreseeable future that pay levels in social care are going to limit people coming forward but there is an opportunity to recruit new people into social care with the right core attitudes. People who want to 'put something back' that may not have previously considered it as a career. As a starting point I would suggest recruiting locally using the networks that have been developed through the pandemic.

### Stronger together

The pandemic has forced social care to come together in a way that it has not before. The sometimes protectionist and isolating attitudes of some providers went out of the window with the realisation we were all in this together, and that we need to share ideas, resources and network more effectively.

Historically, social care has been accused of working in silos due to the way services are commissioned, financed





and resourced. In many cases it has been a bit of a fight with services having to be very competitive and using leverage over others to gain an advantage.

It is understandable how businesses undercut each other to survive – it has been a bit of a race to the bottom driven by ever shrinking budgets and fees. Yet there is now an opportunity to change because the pandemic has shown how effective social care can be at working together for the benefit of people using services. Maybe now is the time to work together for the benefit of providers and the wider industry.

Communication is vital to do that, and during the pandemic it was shown how good we can be at it by using Zoom or Microsoft Teams to work remotely and network with people who we may not have historically contacted.

Again, it is about breaking the divide and rule, or us and them mentality and embedding the stronger together idea. From that we can all work better, improve practice and ultimately ensure that services are long lived, profitable and deliver on societal expectations.

### Fail to prepare or prepare to fail

Albert Einstein is reputed to have said insanity is doing the same thing over and over again and expecting different results. If we do not change things, when the next crisis hits us we will end up in the same, totally unavoidable position. The 'Tigger' ideas above will go some way to making future, possibly longer-term changes but doing certain practical things now will make us more resilient almost immediately.

Firstly, review the environment within you service, learn from your experience during Covid-19 and see if any changes

need to be permanently made. It may be advisable to engage with an architect or other specialist to review the flow through you service, where there is most footfall, where there are any pinch points and how the issues can be effectively managed, or whether there needs to be a redesign.

In addition, it would be advisable to invest in hygiene, ensure the appropriate cleaning products are available, and that the cleaning schedules are reviewed so that they are comprehensive, detailed and frequent.

Ensure your business continuity plan has been reviewed, and the issues encountered during the pandemic have been reflected and that there is a clear process defined to be enacted if a second wave hits the care sector.

You should use this opportunity to review stocks of PPE and other materials that were in short supply at the peak of the pandemic and purchase adequate supplies now if necessary. That will help protect staff and residents but will also be a wise move financially as we know that when supply is short, price goes up.

Make sure you have reviewed your regular health and safety audit content and frequency to make sure that you are being proactive in identifying areas of concern. The completion of the audits will also provide you with evidence that you are aware of and, are addressing, concerns. That will be vital to demonstrate to CQC on their next inspection that you are managing issues well.

Take the opportunity to review service-user documentation and make sure that where possible there are advanced care plans in place. It is always better to develop these plans when there is time, and you can actively involve all relevant parties. Also take the opportunity to review or develop individual risk assessments to cover the possible impacts of a second wave of the pandemic.

If you have not already, it may be worth developing links with a trusted agency provider so that - if you need additional staff in the future to cover for staff sickness, self-isolation and so on - you have a ready supply of staff and not relying on agencies that you do not know very well, or whose reputation may not match your expectations.

It is also advisable to understand your staff in more depth so you can prepare for a second wave or other crisis. Do they have dependents? Do they have health concerns that make it that they are more at risk? Do they have to use public

transport to get to work?

All those factors may make it more likely that they may not be available for work when they are needed. Yet if you know the scale of the issues you can plan for it and highlight actions to be taken and reduce potential impact.

You could look at reviewing the training provided at the service, and source additional training now to ensure that all staff are suitably skilled up to meet any second wave. You could also use information from Social Care Institute for Excellence or Skills for Care to boost knowledge and understanding.

I know you have all been through a huge amount, and nobody could have predicted how distressing and difficult 2020 could have been, but I hope that you are able to embrace the future and hope that this article in some small way has helped you be more Tigger and a little less Eeyore.

TCHE



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