Establishing the impact of COVID-19 on the health of domiciliary care workers in Wales: developing a model for UK service planning and carer support

Who is the study about?
Domiciliary care workers (DCW) provide social care to people living in their own homes.

Over 19,000 DCWs employed in the public, private and third sector continued to provide care for people in Wales during the COVID-19 pandemic.

Early evidence suggested an increased risk for DCWs of suffering higher rates of COVID-19 related outcomes, including mortality – but this evidence was mixed.

Who are the OSCAR team and what are they doing?
The OSCAR team funded by UKRI is a partnership between Cardiff University, Swansea University, The SAIL Databank and Public Health Wales.
The study is measuring rates of confirmed COVID-19 infection, mortality, respiratory infections, mental health and other outcomes amongst all registered DCWs in Wales and exploring what may contribute to variation in rates.
The study is using routine health data from the SAIL databank combined with registration data provided via Social Care Wales. We are also interviewing DCWs about their experiences during the pandemic.

What have we found so far?
We have interviewed 24 carers registered as DCWs. We found:

- Registered carers work in a greater variety of roles than expected – including DCWs but also support workers providing care in supported accommodation
- Factors potentially increasing risk of exposure for registered carers included:
  - **PPE** - late provision, difficulties in effective use (for example, interference with communication with client, client resistance), variable guidance and training
  - **Unrestricted presence and behaviour** (eg inadequate social distancing, poor use of PPE) of others in client’s home (eg non-resident family members, directly employed personal assistants, visiting friends)
  - **Employer support** - insufficiently tailored training for DCW environment, variable use of formal risk assessment
  - **Employment role / status** - staff shortages, taking on additional work / roles, need to work rather than take sick leave if required

How will we use this information?
Once available, we will share findings regarding rates of infection and health outcomes and our qualitative findings with a stakeholder group made up of employers, social care regulators, public health organisations, DCWs and their support organisations.

We will agree with them a set of recommendations for practice, policy, employers and DCWs.

We will measure health outcomes occurring from March 2020 and up to February 2021 (short-term) and then to Dec 2021 (long-term).

Find out more?
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