

UK: Elderly will be left to die as coronavirus plunges care sector into crisis

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As Britain recorded its largest increase in deaths from coronavirus in a single day, 684, taking the grim toll to over 3,000, it is the elderly who are most at risk from the pandemic. While more than half of all hospital deaths in England were among those aged 80 and over, the number of those dying in care homes now exceeds 600.

The entire care sector faces a substantial spike in deaths, with little or no contingency measures in place to prevent mass contagion.

Evidence has now emerged that suggests that elderly residents in care and nursing homes are possibly being pressured into agreeing to “do not resuscitate” (DNR) notices. The BBC reports seeing a document circulated by the Brighton and Hove Clinical Commissioning Group, which covers 35 general practices and 98 residential or nursing homes, directing all homes to “check they have resuscitation orders on every patient.” In addition, elderly residents infected with COVID-19 could be refused admission to hospital, with the document stating, “We may therefore recommend that in the event of coronavirus infection, hospital admission is undesirable.”

Throughout the country, there are shortages of personal protective equipment (PPE) and no adequate testing and quarantine protocols exist to protect vulnerable elderly residents and the safety of health-care workers. The Office for National Statistics recently began publishing data on coronavirus-related deaths occurring outside hospitals. It is now estimated that up to a fifth of all COVID-19 deaths in the UK have occurred in care homes, hospices, and individual households. These deaths remain underreported, as many are registered as resulting from chest infections or pneumonia.

A 95-year-old man recently died after being infected

by COVID-19 at the Oaklands Nursing Home in Hove, East Sussex. He tested positive along with two other residents. Several others are critically ill, and a member of staff has been admitted to intensive care. Fifteen out of 20 residents at the home have developed symptoms.

Two people with suspected COVID-19 infections have died at Oak Springs care facility in Liverpool. Three other residents are in hospital, with 48 of the remaining 66 residents as well as 50 staff presenting symptoms.

Similar reports are emerging daily across the country, with the UK trailing Italy and Spain, the deadliest pandemic hotspots in Europe, by just a few weeks. In those countries, care homes have been crippled by mass contagion, double-digit deaths and staffing shortages. Some elderly residents in northern Italy and Madrid were left without care and food for days due to staff absences and impossible working conditions. The military, which belatedly intervened to relieve care homes, found 23 dead in one care home in the Spanish capital, including two nuns who had been providing care. France is also now reporting runaway infections and deaths in care facilities.

MHA, the UK’s largest charitable care provider, told the *Guardian* that care services are already approaching a “breaking point.” More than one in ten of MHA’s several thousand strong workforce at its 220 facilities are unable to work due to self-isolating related to suspected infections, underlying health conditions and needing to care for vulnerable relatives. Care organisations and local authorities have appealed for volunteers.

Many care facilities are reporting acute shortages of hand sanitiser, eye protection, masks and gloves. Staff at the Cumbrae Lodge Care Home in Ayrshire, Scotland—where one patient has already died after

contracting COVID-19—are working without PPE, the *Daily Record* reported. The care home is owned by Four Seasons, one of the largest and most profitable private care providers in the UK. Other care homes have been issued with face masks that have passed their use-by date by four years.

Most residential homes are neither built nor equipped to carry out the effective isolation of infected residents. UK government PPE and isolation protocols for care homes refer only to symptomatic residents, advising otherwise that “no personal protective equipment is required above and beyond normal good hygiene practices.” Yet it has been known for months that COVID-19 is highly infectious in the week prior to the appearance of symptoms as well as in asymptomatic carriers.

Sam Monaghan, chief executive of MHA, told the *Guardian*, “Our people are also working day and night with those who are most vulnerable to coronavirus and we are yet to be included in the testing that is being rolled out for the NHS.”

One MHA worker said, “We are risking our lives. It makes us feel like we are cannon fodder.”

Instead of providing safe working conditions and care services for the elderly, disabled and vulnerable, Boris Johnson’s government has obliterated care standards as part of the Coronavirus Act. The bill, which withdraws key duties under the Care Act, was passed as emergency legislation with next to no debate.

The provision of essential care for the elderly has suffered from years of austerity, cuts in services and shifting the burden from the state onto the individual. According to the *Ferret*, Glasgow’s Health and Social Care Partnership has cut home visits completely for some elderly, sick and disabled people who depend on several home visits per day to help them get dressed, eat and take medication. The organization now only delivers “critical care.” Dr Sally Witcher, chief executive of Inclusion Scotland, warned that “it’s not necessarily the virus that is going to kill people... It’s going to be the absolute failure to provide people with the support they need.”

Amid a surge in coronavirus admissions, the Johnson government has finally made available a paltry £3 billion to the care sector—a mere one percent of the £300 billion sum handed over directly to the banks and big business in response to the pandemic—to support the

NHS in discharging hospital patients to care homes. Several care facilities have publicly refused to accept patients from hospitals, with one manager describing the policy as “madness,” stating that it would expose entire care homes to possible infection.

The dire situation in care has been prepared over decades by successive Conservative and Labour governments. The elderly are forced to sell their homes or run down life savings to fund their own care. Large swathes of the sector have been handed over to private operators, with just 8 percent of the care sector remaining under the control of local government.

A report published last year by the Centre for Health and Public Interest (CHPI) revealed that the largest private care providers—including HC-One, Four Seasons Health Care, Barchester Healthcare, and Care UK, which control around 900 care homes—pocket roughly £1.5 billion in profits from an annual revenue of £15 billion. Many of these companies are owned by offshore hedge funds or private equity groups, which evade paying taxes by utilising thousands of shell companies and an array of shady financial mechanisms.

The deadly crisis enveloping the care sector in the UK and internationally is not the result of a lack of money or resources, but an expression of the bankruptcy of the capitalist system, which subordinates human life to the drive for profit. While immense sums of public money have been funnelled into the stock market to protect the wealth of the ruling class, capitalist governments have uniformly enforced the fascistic rationing of healthcare and protective equipment for the working class.



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