

UK social care driven to the point of collapse by Omicron wave

Stephen Alexander
18 January 2022

Social care services have all but collapsed amid a preventable wave of coronavirus, which the Westminster government and its counterparts in the devolved administrations have allowed to spread uncontrolled through workplaces and the general population.

As recorded daily cases surged to over 200,000 in early January, residential care homes and domiciliary care services have been hit by acute staff shortages, with large numbers infected and forced to self-isolate. The sector is also seeing high rates of long-term sickness due to staff burnout and mental health problems related to the pandemic. Thousands of care workers are leaving the sector for better paid and less stressful jobs at supermarkets and warehouses.

A total of 122 care home operators in England declared a “red alert” due to staffing shortages last week, with 13,500 workers off with COVID. Staff absence rates in some hotspots in the north of the country and parts of London were as high as 22 percent. Similar figures were revealed by a survey of the not-for-profit sector conducted by the National Care Forum (NCF), which found coronavirus-related absences running at 14 percent on top of staff vacancies of 18 percent.

A growing number of care homes have declared COVID outbreaks, forcing them to limit new admissions and visits. In Scotland, where 150 residential care workers are testing positive for coronavirus every day, a third of care home facilities (933) are now restricting visits due to positive cases among staff and residents. The number of care homes declaring emergency outbreak measures—tightly restricting visits to end-of-life scenarios and other emergencies—has quadrupled in a week from 45 to 181.

The ability of the Omicron variant to more effectively evade immunity means COVID-19 deaths have begun to rise again in care homes despite high levels of vaccination. According to the Office for National

Statistics (ONS), 122 residents died of the virus in England and Wales in the week ending January 7—almost double the 65 deaths in the preceding week.

Reports of neglect due to the staffing crisis are widespread as staff shortages mean some residents receive inadequate support for their basic needs such as personal care, drinking and eating.

Yesterday, the *Guardian* reported that one in five homes specialising in dementia care are rated either “requires improvement” or “inadequate” by the Care Quality Commission.

Stephen Chandler, president of the Association of Directors of Adult Social Services, warned “Even before Covid-19 and Omicron, adult social care was struggling with severe funding and workforce challenges... Every day we are rationing care in ways that we never have before... with obvious concerns that this will lead to people becoming isolated and, ultimately, to the loss of lives.”

The situation in domiciliary or home care is equally devastating.

Nearly 9,000 people are presently waiting for home care services across 96 local councils in England, according to a Freedom of Information request by the *Observer*. The number of unmet home care hours has risen from 15,905 in April 2021 to 60,664 in December. Two-thirds of providers are presently refusing new requests from eligible families as they are unable to find staff to fulfil them. Thousands of existing contracts have been handed back to local authorities by private providers, leaving masses of vulnerable individuals and their families without home support for months.

Caroline Abrahams, Age UK’s charity director, told the *Guardian*, “This inevitably means that growing numbers of older and disabled people are going without the care and support they need, and that where unpaid carers are helping their loved ones, they are being forced to do more for longer, unaided and with no chance of a

break.”

“The prospects for anyone who is waiting for care and on their own, without family or other support, are extremely grim”, she continued, “one has to wonder how some of these people are managing to carry on at all.”

How many may have already died due to inadequate home care services is not yet known, but ONS data reveals that there were more than 70,000 excess deaths in private households in England and Wales over the 18 months between March 7, 2020, and September 17, 2021, compared to the previous five years.

The profound dislocation of social care is heightening the already unsustainable pressure on overwhelmed National Health Service (NHS) hospitals. As many as 90 percent of patients eligible for discharge are unable to secure appropriate intermediate or long-term care services, and thus thousands cannot be discharged to residential care or their own homes. This is preventing new hospital admissions and means that the huge backlog of deferred treatments due to the pandemic has continued to grow, reaching an unprecedented 6 million in England alone.

In response, the Conservative government has pursued a range of inadequate measures which will in fact exacerbate the crisis.

These include the relaxation of outbreak management rules for care homes from 28 to 14 days, allowing care homes, as well as hospices, to open to new referrals earlier following a declared outbreak. The government has also reduced the quarantine period for infected people to just five days, which will inevitably lead to people reporting for work in care homes and hospitals while still infectious.

Several NHS trusts are now discharging patients into makeshift care facilities in local hotels. These are being staffed by private healthcare companies, which have poached scarce health workers from Spain, Greece and Africa after the Johnson government belatedly added care workers to the Shortage Occupation List in December. This provides a temporary exception to Britain’s draconian immigration regime, allowing foreign nationals to work in the sector for up to 12 months. It is doubtful, however, whether this will do anything to relieve the severe staffing crisis as most social care providers pay far lower than the income threshold required for entry into the country.

Meanwhile, local authorities are appealing to untrained council workers in “noncritical” services to volunteer to relieve care homes. Criminal record and background

checks have been waived by council chiefs, who have promised only that volunteers will always be supervised by qualified staff members.

There is a growing concern among public health experts that alongside frequent spikes in deaths due to COVID-19, the disintegration of health and social care services will begin to mount up an even greater death toll than the virus itself.

As the *BMJ* (formerly, *British Medical Journal*) reported January 14: “With the current surge of the omicron variant of SARS-CoV-2, we have again acted with too little control, too late. That large parts of the health and care system will be overwhelmed is now inevitable, and in this wave particularly, covid deaths may only be a lesser part of the subsequent avoidable mortality.

“The current overwhelming of the health and care system, and the further disruption to come, as cases and staff absences rise potentially into late January and early February 2022, is now likely to generate more avoidable deaths from non-covid causes than from covid. The risk and reality of this effect is not being clearly communicated in the public domain as part of the UK’s ‘pandemic related mortality’ reporting.”

Like the crisis in the NHS, the calamity unfolding in the social care sector must be laid at the door of the Johnson government and its herd immunity policy, whose actions earlier in the pandemic turned care homes into killing fields. Its Health and Social Care Bill currently going through parliament will meanwhile ensure that poorer pensioners bear a greater cost of their care than the wealthy. The elderly, disabled, and those in need of long-term care are regarded by the ruling elites everywhere as a drain on resources and profits for which the pandemic offers them a remedy—mass death.



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