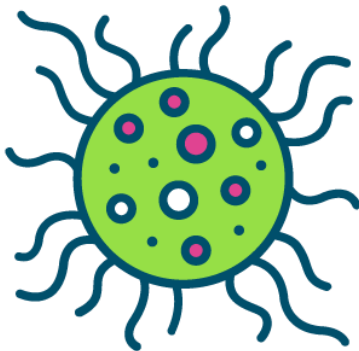
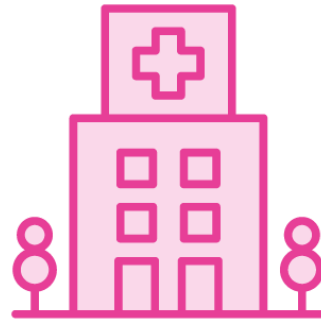


Coronavirus (COVID-19) Pandemic 2020:

What did the people of Telford & Wrekin say?





Contents

Overview	3
Summary of findings	4
About Healthwatch Telford & Wrekin	5
Introduction	6
What we did	7
What we found	10
Conclusion	29
References	31
Appendices	32



Overview

Healthwatch Telford and Wrekin (HWT&W) wanted to gather the views and experiences of local residents who have accessed Health and Social Care Services within Telford & Wrekin (T&W) during the Coronavirus (COVID-19) pandemic. To understand how people's mental health and wellbeing has been affected and identify what has worked well and what could be improved.

Engagement was carried out between May - June 2020, using a survey designed by HWT&W, with a total of **122** respondents. The results from this study revealed what people's main challenges were during the lockdown period and themes were identified within each question, giving us a richer understanding of people's experiences. The majority of respondents have found it difficult to cope during lockdown, people have been affected emotionally and mentally by not being able to go out and socialise with others. Furthermore, many have stated how they felt let down by the government and accessing services had been so much more difficult.



Summary of findings

- Suspending services has left many people without access to appointments or treatment. For those who have conditions/illnesses that require regular treatment, this has had a significant impact on their life. For others, whose appointments had been cancelled some have been offered alternatives such as telephone consultations. However, not everyone has access to digital technology.
- Lockdown brought fear and anxiety for many which has had huge effects on people's emotional wellbeing and mental health. The majority of respondents have struggled with self-isolation, experiencing the difficulties of being unable to see loved ones and friends.
- Communicating with others and finding information about keeping themselves and others safe has been very important. People have used digital technology to stay in regular contact with others outside of their household and have sought guidance from national/government websites.
- Certain groups feel the government have not considered them and their needs, this has applied in particularly to the elderly/vulnerable and Black, Asian and Minority Ethnic (BAME).
- Some services have not kept patients well informed about their introduction of new procedures, following the mass cancellation of face-to-face appointments/consultations.
- Many people felt the government had not acted quickly enough and should have offered guidance and information earlier. Their response to the pandemic was slow and caused a knock-on effect for services such as the National Health Service (NHS) and created mass panic amongst the public.
- Concerns were raised within educational settings, parents worried about exposing their children to the virus.
- Many struggled to obtain necessities such as medical supplies and food shopping. The hysteria amongst the public meant people were 'panic-buying' goods which left many others struggling and services unable to cope with the demand.
- Accessing Dental services was challenging. People requiring treatment at the local Urgent Dental Centre had to contact their own Dental Practice to be assessed and triaged. However, they found their local practice closed.
- In relation to accessing services and support - people would have liked more support from services such as General Practices and Mental Health services.
- Emotional strain and people being told to be mindful of others, put an emotional strain on many people who were unable to see friends or loved ones.
- People who were classed as "vulnerable" should have been identified as such, much sooner because support could have been provided much earlier.
- A lack of testing amongst some groups - issues were raised on how to conduct a test.
- Informal carers had issues obtaining Personal Protective Equipment (PPE).



About Healthwatch Telford and Wrekin?

We are the independent consumer champion/patient voice, created to gather the views of people who live in Telford and Wrekin.

Nationally, Healthwatch England, supports 152 local Healthwatch that cover local Clinical Commissioning Groups and local authorities. We are a small team, consisting of a General Manager; an Information Analyst, Business Support Manager and an Engagement Officer. We are supported by a Board of Directors and a team of volunteers. Our aim is to provide our communities with a stronger voice, to influence and challenge how Health and Social Care Services are provided in T&W. HWT&W routinely gathers the views of residents who use or have access to Health and Social Care Services. Their feedback is analysed to allow HWT&W to provide evidence-based comments to inform the key groups who plan, manage and regulate the service. HWT&W engages with many statutory/voluntary organisations including the Local Authority, Care Quality Commission (CQC), Clinical Commissioning Groups, providers, individuals and groups, to ensure that services are designed and structured to meet the needs of local people. In addition, HWT&W has a responsibility to carry out Enter and View visits to provider services offering health or social care activities.





From March 2020 the UK Government insisted on a nationwide lockdown to tackle the Coronavirus (COVID-19) pandemic. As part of their response to the pandemic the Government instructed that everyone should stay home and stay safe in order to protect lives as well as protecting the NHS. All educational settings were to be closed, as well as other sectors such as the hospitality sector. This included the closure of many businesses, with thousands of people unable to go to work or having to work from home. Inevitably, people have had no social interaction and have had to use digital technology to communicate with others outside of their homes due to social distancing rules. It is suggested that an increase in social isolation and loneliness are factors that can affect people's mental health¹, for example, a study found that greater feelings of isolation was identified amongst older adults because of reduced 'everyday activities' (driving, going to work etc...) and an increase in time spent sitting for long periods². Therefore, it is important that we take care of our mental health in these difficult times.

The Prime Minister addressed the nation stating that the most important thing everyone can do now is to stay safe by staying at home, to achieve this, it was important to identify why/how so many people were infected. ³According to the Office for National Statistics (ONS), in England and Wales between March and April 2020, 90.4% of COVID-19 cases had a pre-existing condition. This indicated that individuals who have a pre-existing condition are susceptible to catching the virus and in response, the Government offered guidance for vulnerable people⁴. Moreover, the last few months Health and Social Care Services have changed rapidly, and praise goes to the many health and care staff, volunteers and support workers who are on the front line. This meant that unless people had an emergency or were classed as a vulnerable person with an appointment, individuals were unable to go to health and care settings such as General Practice Surgeries and Hospitals. In April 2020, the Health and Social Care Secretary told the House of Commons that due to the pandemic reaching its peak the NHS will 'gradually reopen' when it is safe to do so⁵. This was actioned as a response to the peak being reached in the hope that it would protect the NHS.

Digital technology has provided a huge platform for everyone, not only to communicate for social reasons, but to access information, guidance, and updates about Coronavirus (COVID-19). The ever-changing situation has made people rely on resources such as media, national organisation websites and social media, however, it is important that people get the correct information from reliable sources. As a result, the World Health Organization (WHO) launched a 'myth-buster' page to eliminate the risk of misinformation about the pandemic⁶. Therefore, whilst digital technology has many advantages by helping people to connect and stay safe, it also has its disadvantages, by providing the opportunity for instant access to a vast amount of information, not all of which can be attributed to reliable and trusted sources.

Currently, the entire country still faces uncertainty with what the future holds and what our 'new norm' will look like. The purpose of this study is to explore the local residents' experiences of accessing Health and Social Care Services in T&W during the Coronavirus (COVID-19) pandemic.



What we did

Our survey was designed by the HWT&W team, to gather local residents' views and experiences about what they thought was working well during the pandemic and whether improvements could be made. The HWT&W team shared the survey amongst key contacts, Local Authority, Telford Clinical Commissioning Group, Voluntary sector, Community sector, organisations and residents of T&W. We distributed a Coronavirus survey advertising poster and used social media platforms, our website and local press to gather as many respondents as possible.

122 people responded to our survey between May and June 2020. Due to Government guidance we were unable to undertake face-to-face engagement, therefore, we used SurveyMonkey to allow people to complete our survey online.

We received comments through emails, telephone calls and our Feedback Centre. We also received comments from Healthwatch colleagues.



Coronavirus (COVID-19) poster.

Survey questions

Facing new challenges and the impact of the pandemic on accessing medical care

- Q1.** Have you or someone in your household been diagnosed as having Coronavirus (COVID-19)?
- Q2.** Do you or someone in your household fall into any categories which consider you to be high risk from Coronavirus (COVID-19)?
- Q3.** Do you care/support someone who is considered to be at high risk from Coronavirus (COVID-19)?
- Q4.** If you ticked 'yes' to the previous question - what do they think has been the most challenging aspect during the pandemic?
- Q5.** Has the pandemic affected your ability to access healthcare for other conditions? (such as: cancelled appointments, getting prescriptions/medication...)
- Q6.** Have you been delayed in getting any medical treatment from a GP or Hospital (e.g. A&E) for a condition, due to the concerns around Coronavirus (COVID-19)?

The importance of information and communication during lockdown

- Q7.** How easy is it to understand about keeping yourself and others safe?
- Q8.** Information can be found via many resources, where have you found information/advice?
- Q9.** Do you think there is enough support and information available to yourself or others about mental health?

Q10. Do you feel there is any information or guidance that was not accessible/available, that you would have found helpful?

Q11. How important is it for you to stay in contact regularly with others?

Q12. How often are you staying in contact with others?

Q13. Do you find communicating/staying in contact with others has helped you?

Anything else to add?

- Q14.** Overall, do you feel anything could have been done better?
- Q15.** Add any additional comments you would like to make?
- Q16.** Your opportunity to recognise anyone who deserves special praise for their support during the Coronavirus (COVID-19) pandemic



Demographics

Gender

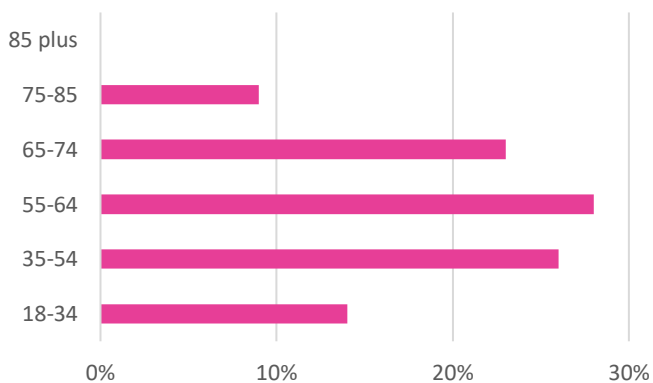


20% of respondents were male.

64% of respondents were female.

16% respondents preferred not to answer this question.

Age



14% of respondents were aged between 18-34 years old.

26% of respondents were aged between 35-54 years old.

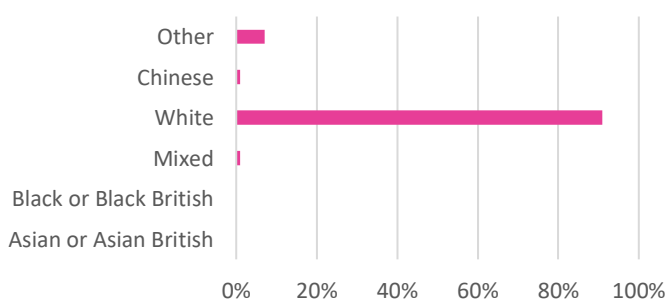
28% of respondents were aged between 55-64 years old.

23% of respondents were aged between 65-74 years old.

9% of respondents were aged between 75-85 years old.

11 respondents preferred not to answer this question.

Ethnicity



91% of respondents were white.

7% of respondents were other (not specified).

1% of respondents were Chinese.

1% of respondents were mixed

15 respondents preferred not to answer this question.

(Further demographics can be found in appendic.1)



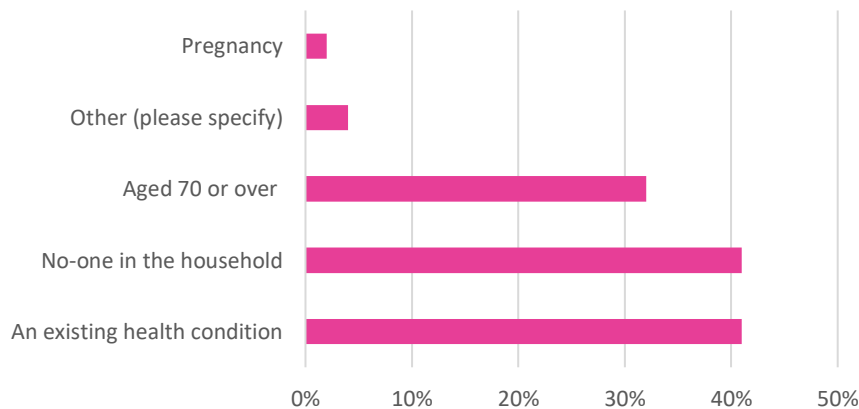
What we found

Facing new challenges and the impact of the pandemic on accessing medical care

Q1. Have you or someone in your household been diagnosed as having Coronavirus (COVID-19)?

Out of **85** respondents only **5%** said that themselves or someone in their household had possibly been diagnosed as having Coronavirus (COVID-19) because they experienced symptoms. Compared with **95%** of respondents who had not experienced symptoms.

Q2. Do you or someone in your household fall into any categories which consider you to be high risk from Coronavirus (COVID-19)? (Tick all that apply)



41% had an existing health condition.

41% stated that neither themselves nor anyone in their household are considered to be high risk.

32% were aged 70 or over.

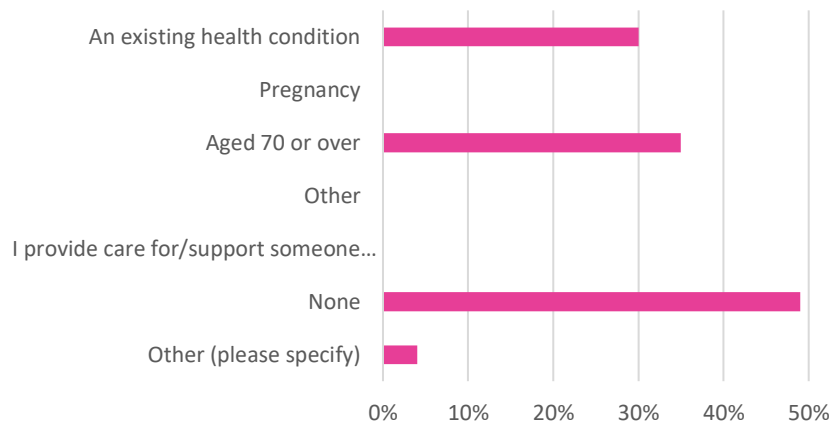
4% stated other (please specify).

2% stated pregnancy.

2 respondents preferred not to answer this question.

(This question allowed respondents to pick more than one answer)

Q3. Do you care/support someone who is considered to be at high risk from Coronavirus (COVID-19)? (Tick all that apply)



49% stated that they did not care/support for anyone who is considered to be at high risk.

35% were aged 70 or over.

30% Provided cared/support for someone who had an existing health condition.

4% said they cared/supported someone considered to be high risk due to a disability (Other please specify).

1 respondent preferred not to answer this question (Other).

(This question allowed respondents to pick more than one answer)

Case study:

“I’ve had care in my home for several years. During the pandemic I’ve been isolating, I’m 88 years old, the family said to protect me and the carer they will FaceTime me and call me by phone. This has gone well sometimes if I remember how to use FaceTime, sometimes I forget. The carer has been a good link between my family, she rings up my daughter when I’m running low of medication, she reads my letters I receive as my sight has deteriorated then rings my daughter if I have any hospital appointments. She checks on my feet as I have diabetes and sometimes, they get infected. The carer rings my friends for me if I cannot remember the number. When she goes off for two-days she briefs the care agency. She has been a life saver during the pandemic and has been the link with the family during this pandemic.”

Q4. If you ticked 'yes' to the previous question - what do they think has been the most challenging aspect during the pandemic?

This question enabled us to hear the views and experiences of individuals who care/support others. We wanted to know whether something significantly impacted their experience and the way they delivered care/support.

We received feedback from **65** respondents and the answers were categorised into **5** groups:

- 1. Social impact of isolation**
- 2. Accessing health care & social care services**
- 3. Government guidance**
- 4. Emotional impact of isolation**
- 5. Black, Asian, and Minority Ethnic (BAME) and agency staff**

Social impact of isolation

This was a major issue for many people. This included not being able to go to the shops, the 'struggle' of having to stay indoors and lack of physical exercise. People said they missed their socialising activities such as exercise classes and their 'normal' daily routine.

"Getting access to exercise classes for our Parkinson's disease support group."

"Staying isolated at home, we are used to going out to work."

Others stated how they missed the close physical contact with others.

"Not seeing my grandchildren apart from virtually no hugs and kisses."

Accessing health care & social care services

For the first few weeks in March 2020 many 'panic buyers' proceeded to stock up on all supermarket essentials and medication, this made accessing necessities and medical provisions incredibly difficult. For some, particularly the elderly or those with certain health conditions, accessing healthcare is extremely important. Many had stated difficulties with accessing treatment or a Health Care Professional, for either new or continued health issues. The pandemic meant that services were suspended which left many isolated and unable to get help, resulting in appointment cancellations, waiting for medical results from tests (which would now be extended). Others were unable to receive their regular medication.

"I am an OAP with asthma and diabetes, I have been unable to access help due to not being on the gov list."

"Doctor surgery giving results."

"Having to cancel social care and cleaner because of infection risk."

Government guidance

When the UK went into lockdown the government published guidance on; how people should stay alert, stay safe and to protect the NHS. The government has set out its plan so we can return to as near to normal as we can, as quickly as we can, but in a way that continues to protect everyone and the NHS. Some have said that the guidance has been confusing and not helpful because of delayed communication, whilst others have found that there is a lack of guidance when it comes to PPE (Personal Protective Equipment) and that the government has not considered individuals with specific needs.

"Having standard procedures."

"Delayed communication to patients about shielding/self-isolation- confusing and not helpful."

Emotional impact of isolation

Many have experienced more stress and upset as the weeks have passed. Being socially isolated can have a huge impact on mental health which some people find more difficult to cope with than others. Respondents have said they felt isolated, tearful and overall the feeling of 'loneliness' was the biggest theme identified.

"Not being able to go out, feeling more isolated as the week goes on, feeling tearful and despondent."

"The lockdown and social isolation is physically and mentally challenging."

BAME and agency staff

Healthcare Professionals work extremely hard to look after patients but in the middle of a pandemic the pressure to meet patients' needs is harder than ever. When working in the community, all staff need to be supported and have an achievable workload. It was highlighted that this is not always the case and certain minorities are not well supported.

One respondent told us:

"Lack of risk assessment for BAME agency workers in community settings and location of calls and unreasonable expectations from agencies."

Although most respondents have shared with us how the virus has negatively impacted them in different ways, 3 respondents told us how they have not faced anything challenging.

"No aspect has been challenging, we are managing very well."

"Nothing especially challenging, we have been through worse."

"It's been fine, no real challenge."

Q5. Has the pandemic affected your ability to access healthcare for other conditions? (such as: cancelled appointments, getting prescriptions/medication...)

The pandemic meant that services had to either continue via virtual networking, such as telephone, video call etc... or they were stopped completely until further guidance. Self-care has always been incredibly important but is even more crucial now due to changes in the accessibility of services. Out of the total (84) respondents who answered this question, nearly half (47%) found it difficult to access healthcare for other conditions.

We received feedback from all respondents and their answers were categorised into 4 groups:

1. Appointment issues
2. Ongoing treatment
3. Alternative appointment methods
4. Fear factor

Appointment issues

The majority of respondents who experienced appointment issues said the pandemic affected their access to a Dentist or Doctor, due to government guidelines regarding face-to-face contact many had their appointments cancelled until further notice. Many of the cancellations were for check-ups and appointments with specialists, this includes operations being postponed.

Also, the reduction of face-to-face contact meant women who had just given birth at the beginning of lockdown have been unable to receive postnatal appointments/meetings with Health Visitors and other Healthcare Professionals.

“Orthodontist and Dental treatments, operation to remove gall bladder and investigation into tumour in my ear all cancelled.”

“Cancelled my orthodontist appointment.”

“Since giving birth during pandemic, appointments for health visitors and midwifery have been reduced. Also been informed that our 6-week postnatal appointment at GP is likely to be merged with my child’s appointment for immunisations to reduce face to face contact.”

Ongoing treatment

As mentioned previously, dental treatment had been one of the biggest issues and some who had already started receiving treatment had to have it postponed. Others found getting repeat prescriptions difficult, which may have been made worse due to people panic-buying in the early weeks of lockdown.

“Ongoing dental work which was halfway through treatment.”

“Very specific on dates for repeat prescriptions.”

“Waiting for test results.”

Alternative appointment methods

For some, appointments were still able to go ahead but were conducted via virtual networking. Depending on the individual’s issue, some were offered their appointment, but it had to be done over the telephone.

“Dental appointment cancelled and GP appointment conducted via telephone.”

“Managed a telephone appt for my husband and myself.”

“A couple of hospital appointments changed to virtual.”



Case study:

“A couple of weeks ago we found ourselves yet again escalating some concerns with the Rheumatoid Arthritis (RA) service. Some of the concerns we escalated to CCG were:

- ◆ The RA Helpline is not being manned on a daily basis
- ◆ Messages being left by patients are not being picked up and patients are waiting days for a response
- ◆ There is no voicemail message on the helpline advising patients of any delay/the likely waiting times
- ◆ There is currently only one Nurse working 1 day a week and the system is clearly under a great deal of pressure
- ◆ Consultants’ letters are not being sent out in a timely manner which would enable the patient’s GP to prepare a prescription for urgent medication”

Q6. Have you been delayed in getting any medical treatment from a GP or Hospital (e.g. A&E) for a condition, due to the concerns around Coronavirus (COVID-19)?

Out of the 83 respondents, 75% said they had not experienced a delay in getting medical treatment from a Doctor or hospital, compared with 24% who did. 1 respondent preferred not to answer this question.

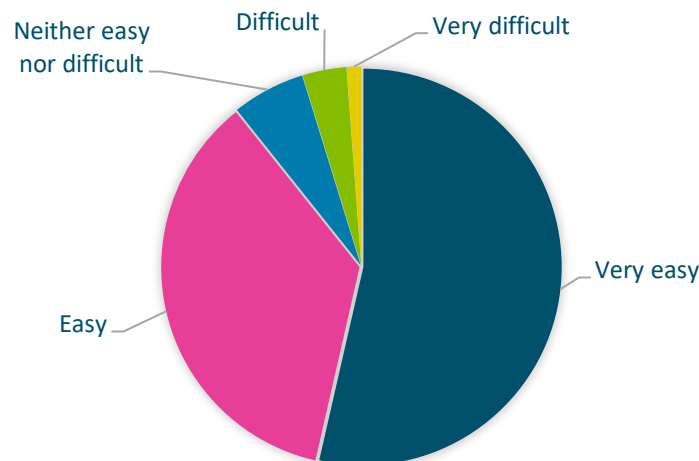
Case study:

“Four top teeth need to be removed as there is 80% bone exposed. The referral was made to the Shrewsbury and Telford Hospital trust by their Dentist and supported by their GP. The patient has long term medical conditions, Addison’s Disease and Diabetes which is uncontrolled.

Due to COVID-19, the patient has been told their treatment is non urgent so the procedure cannot take place. The patient is in severe pain, after 4-weeks of anti-biotics and daily doses of morphine there are still no improvements, the patient is struggling to eat at times. The gentleman explained that their partner’s conditions could get dangerous if this treatment does not go ahead. If they don’t eat much, their diabetes will be uncontrolled, and their Addison’s Disease may become life threatening if left untreated.”

The importance of information and communication

Q7. How easy is it to understand about keeping yourself and others safe?



53% found it very easy to keep themselves and others safe.

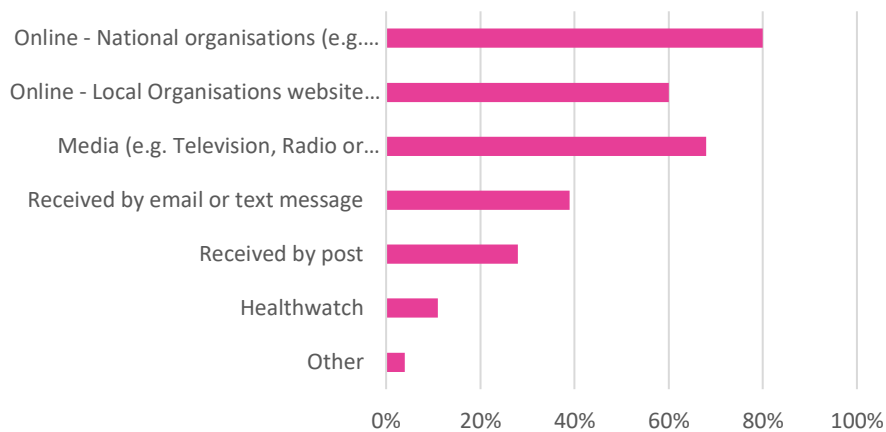
36% said it was easy.

6% felt it was neither easy nor difficult.

4% found it difficult.

1% said it was very difficult.

Q8. Information can be found via many resources, where have you found information/advice? (Tick all that apply)



80% found information on national organisation websites, such as Government or NHS.

68% got information from the media (television, radio or newspaper).

60% used local organisation websites, such as local Council, hospital, voluntary/community organisations.

39% received email or text messages with information.

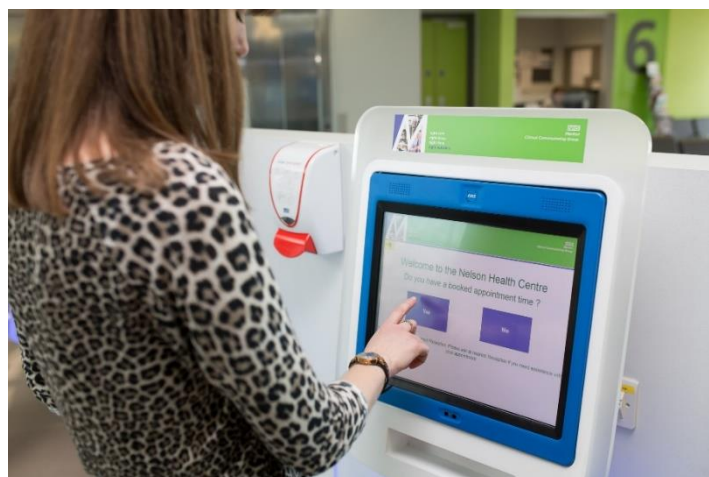
28% received information by post.

11% found information from Healthwatch.

4% used other resources.

2 respondents preferred not to answer this question.

(This question allowed respondents to pick more than one answer)



Q9. Do you think there is enough support and information available to yourself or others about mental health?

We found a relatively equal distribution of opinions across all 3 given answers. Out of all respondents, 34% said they thought there was enough support or information available to support their own and others mental health. Compared to 31% who did not. Whilst 33% did not access support or information for their mental health.

Some people told us about their experiences of accessing mental health support:

“VCSE (Voluntary Community and Social Enterprise) mental health service has still been operating, statutory have not been doing their appointments and so left a gap. This heightened mental health problems to because of the situation.”

“The pressures of working on the front line have triggered anxiety and depression. Everyone is naturally concerned about their own wellbeing. If the 60-66 group were given the option to take their state pension it would be less stress for them, giving those out of work jobs.”

“My school and college have been sending links revolving the topic.”

Others feel people’s mental health is being affected because the subject is being discussed too often and therefore may influence how people cope with the pandemic:

“There is far too much talk about mental health, everyone is jumping on the bandwagon. I don’t agree with it at all.”

Q10. Do you feel there is any information or guidance that was not accessible/available, that you would have found helpful?

We received feedback from 82 respondents and the answers were categorised into 3 groups:

1. Reliable information
2. Supporting people
3. Returning to education

Reliable information

From the beginning of lockdown people were anticipating a response from the government, publicising information and guidance. Out of the 82 that responded to this question 80% said they were able to access the information and guidance they needed.

However, some information and guidance did not cater for all with limited accessibility. Such as, offering alternative formats, clear guidance and information for those looking after people with specific conditions who require specialist care.

“Less confusing info and the truth from the government was essential but not available.”

“Exact date that we can end the self-isolating period.”

“Different languages... not everyone has access to on-line information”

“Specific reference to Parkinson’s from the government.”

Supporting people

For those who have been shielding, some have found it difficult to find support for their mental health and accessing goods (e.g. deliveries). Others felt Healthcare Professionals and other services could have communicated better with patients. Additionally, individuals who needed to support their families required more information to enable them to cope.

“I didn't know who to turn to with feeling tearful and low with being in shielding.”
“GP surgeries could have sent out something to all their patients explaining procedure.”
“Coping strategies, lots of mediation but not much talking services.”
“More information about supporting family.”

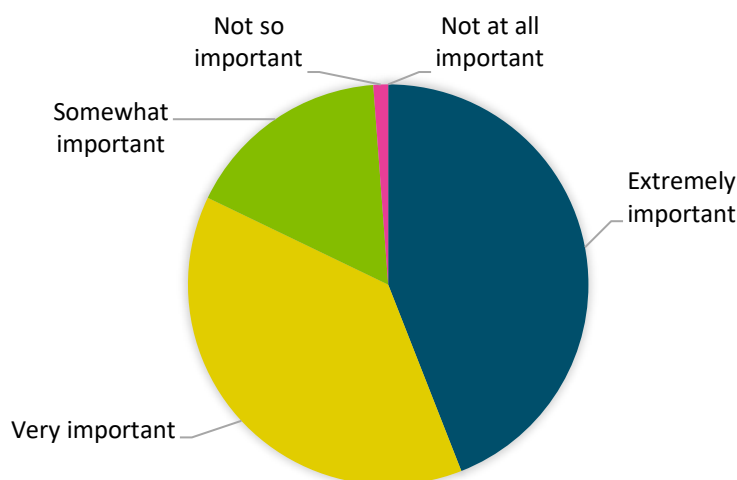
Returning to education

We heard how guidance had caused emotional distress for their children.

“Information on returning to school sooner - caused anxiety whilst schools were trying to understand & implement government guidance - in the interim period my children were anxious & I couldn't answer their questions.”

“Phased return of primary school pupils and no information on how safely they can achieve social distancing with the youngest of the school community returning first. This is a challenging and scary time.”

Q11. How important is it for you to stay in contact regularly with others?



44% considered it is extremely important to stay in regularly contact with others.

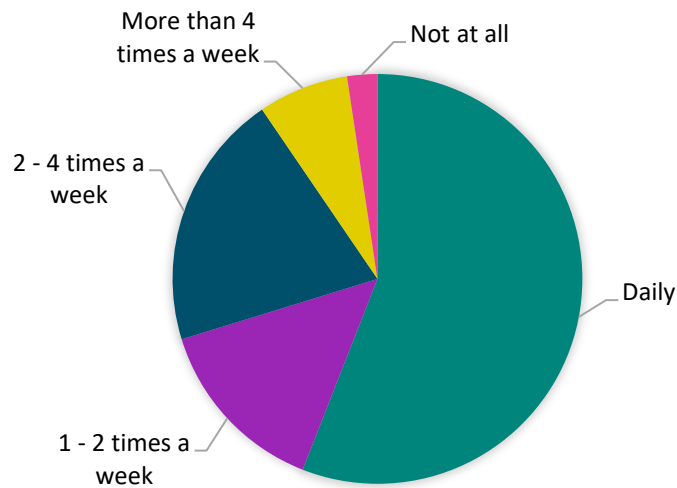
38% thought staying in regular contact with others was very important.

17% felt it somewhat important staying in regular contact with others.

1% said it was not so important.

No respondents (0%) said they thought it was not at all important.

Q12. How often are you staying in contact with others?



Over half (**56%**) of respondents stayed in touch with others daily.

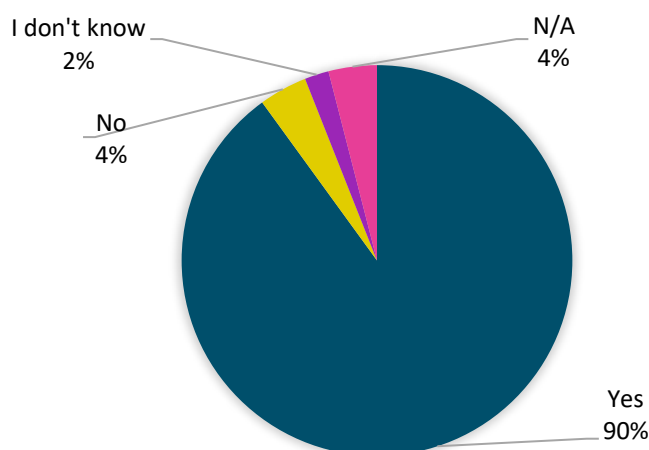
14% stayed in contact with others **1 - 2** times a week.

20% of respondents stayed in touch with others **2 - 4** times a week.

Some people stayed in touch with others more than **4** times a week (**7%**).

Only **2%** said they had no contact with others at all.

Q13. Do you find communicating/staying in contact with others has helped you?



90% felt communicating with others had helped them.

4% who felt it did not help them.

2% did not know if staying in touch with others had helped them.

4% felt this question was not relevant to them (N/A).



Anything else to add?

We wanted to offer respondents a chance to reflect on their experience and give an overall opinion about whether things could be improved. We also wanted to give respondents a chance to tell us anything else that was not covered within the survey.

Q14. Overall, do you feel anything could have been done better?

We received feedback from **83** respondents and the answers were categorised into **7** groups:

1. Government support/guidance
2. Accessing services and support
3. Supporting people
4. Track and trace
5. Supporting the local economy
6. Enforcing lockdown
7. Education

Government support/guidance

In comparison to other countries, people felt that our government should have acted quicker, offering advice and guidance sooner in order to keep people safe from the virus. This includes making people aware that information could be found in various formats such as large text, easy read versions or alternative languages. Furthermore, in the early days leading into lockdown in March 2020, people started to 'panic-buy' food and medical supplies. This 'mass panic' could

have potentially been avoided if there was better/clearer communication from the government from the beginning. The pandemic has put a huge amount of pressure on hospital settings in particular, at a global level, however, some respondents said that if our government had prepared people and industries sooner it would have given the NHS a better chance at tackling the virus and looking after patients who require intensive care.

“The government has badly let down the country on so many levels especially the care sector and the constant flow of commitments which are not met.”

“Clearer guidelines from the government, less panic and confused messages from establishments.”

“A faster and more effective response from the government.”

“There should not of been a lockdown at all. It’s destroyed the economy.”

Accessing services and support

A couple of respondents told us that they would have liked more support from services such as General Practices and Mental Health Services. Some told us how they did not feel they were kept up to date with what services were providing and how they were dealing with the pandemic, others expressed how they had little to no communication.

“More professional support from mental health team.”

“Access for ongoing health conditions should have been continued.”

Supporting people

When it comes to social distancing everyone was told to be mindful of others. This has put a huge emotional strain on many people who have been unable to see friends and loved ones at this difficult time. Also, many have felt that people classed as ‘vulnerable’ should have been identified sooner because support could have been provided sooner and more ‘consistency’ regarding rules was required.

“Allowing family to meet in front gardens with safe distancing.”

“More consistency in the “rules” for self-isolation and distancing.”

One respondent told us about their experience:

“Vulnerable people should have been identified and supported sooner. Our first food package arrived 6 weeks into the lockdown, luckily I had a friend who was prepared to help me once a week with food shopping or we would have been in real trouble.”

Track and trace

We only received a couple of comments from respondents, however, they said that as a country we should have implemented testing sooner like they have done abroad. By not testing people sooner, this meant people had to self-isolate when it was not required.

“Not using already developed track and trace systems developed abroad.”

One respondent told us about their experience:

“My husband and I are both teachers and he had several symptoms after a week of lockdown but there was no testing available unless hospitalised. This meant we had to assume it was the virus and therefore, myself and my son had to self-isolate for 14 days. This meant I could not go into school, impacting on the emergency childcare provision. A test at the time would have confirmed or given the all-clear to work.”

Enforcing lockdown

For a lot of people, lockdown has been incredibly difficult and whilst many have abided by the rules and stayed indoors, others have not. This created uproar with people suggesting that lockdown should have harsher consequences if the rules are broken to deter people from breaking rules. Some have also stated that lockdown should have happened a lot sooner.

“Given the police a lot more powers to prevent people from flouting the rules.”

“They were slow with lockdown at first.”

Education

Across the country all education settings have been affected by the pandemic, such as schools, colleges and universities. Whilst mature students may have been able to plan and organise their education (to some degree) such as those at college or university, many questions remained unanswered for parents of younger children who would require home schooling. This created huge strain amongst many parents who required support and information on what to do and feared their children would miss out on crucial education.

“Schools need to open these children may never make up the lost ground and it will impact the rest of their lives.”

“Schools having guidance before government announcements so they can plan and answer parents’ queries worries.”

Although much of our feedback for people’s overall opinions have addressed issues, we did receive some positive comments.

“I feel the local council and church support for the hungry and the vulnerable has been good.”

“I think the support for the economy has been good.”

“The virus took everyone by surprise so they are doing what they can.”



Q15. Add any additional comments you would like to make

We asked people to provide us with any additional comments so respondents could express an opinion regarding something that had not been addressed within the survey questions. We received additional comments from **47** respondents.

Below is the individual feedback which has been categorised into **7** groups:

1. Government/political responsibility
2. Accessing healthcare and professionals
3. Lack of information/guidance
4. Emotional and behavioural affect from COVID-19
5. Support from Local Authority
6. Lack of testing
7. Discharge from hospital

Government/political responsibility

We had a number of comments in relation to Government and political responsibility, people said:

“The government are totally responsible for the overly high number of deaths in the UK and to say 'so what if a few pensioners die' I will never forgive them.”

“I think the inevitable 'who can we blame' comments that have started are appalling. The government and NHS have done their level best in what are unprecedented circumstances. Anyone who now thinks it's appropriate to finger point and apportion blame should be ashamed.”

“Why does the government mantra of saving lives and jobs only apply to those furloughed. Why have the care homes been treated the same way as the 60-66 age group? No one sees any evidence of the government saving lives only sacrificing them. They have sacrificed NHS staff They have sacrificed 70+ in care homes etc. They have sacrificed 60-66 on frontline enough is enough. We may be the older generation, but we are mum's dads, nans & grandads don't we deserve to live? The mental health impact of their blunders is going to rush through this country. The government need to stop the jargon, stop the daily Covid-19 updates because the figures are fantasy people in the NHS know that better than anyone.”

“Other reason many of us do not want to go on the government's 'death list' is that the info is passed to supermarkets (I have just seen an email from CEO of Sainsbury's) saying he has received a list of vulnerable people from the government) and has identified an extra 450,000 people who need help with shopping... God only knows who else has been handed that list and how many criminals will get their hands on it - making us sitting ducks.”

Accessing healthcare and professionals

We had a number of comments in relation to accessing healthcare and professionals, people told us:

“(media stories) around telling people that the government have instructed hospital staff to decide who has the ventilator and other treatment as priority and who is deprived - elderly people would be on the 'deprived of treatment' list and treatment given to younger, healthier people. That is what you perhaps need to understand, and people are genuinely terrified. Elderly people are anxious and feel cast aside by society because they are old and/or sick.”

“Covid-19 should not have had precedence over other health conditions such as cancer.”

“Thank you for all the hard work. We used (NHS) 111 for my little boy, and they were as professional as ever.”

“Struggled because of urgent surgery being delayed due to Covid-19.”

“The hospital appointment I had yesterday was conducted by telephone, but not before lots of conflicting advice. However, I find the use of the telephone to conduct reviews more beneficial, especially when related to accessing GP services.”

“It has been very easy to get support (including home visits from the GP and community team) for my wife who has developed a new condition that is still being investigated.”

“I found it easier than ever to collect my medication - no crowds in the pharmacy.”

“Health screening has stopped and I was due to have an endoscopy procedure - am not aware when this service might recommence.”

Case study:

“I was left for hours and hours in A&E. Exposure of the Coronavirus would be high in A&E. It would of been even more high for myself as I was pregnant. It was always busy and their social distancing is outrageous in there. No nurses or staff wearing protective equipment.”



Lack of information/guidance

We had a number of comments in relation to lack of information and guidance, people told us:

“Try to remember the older generation who are not online or deaf, hard of hearing who can't use the telephone or blind people. These seem to have been left out in the cold somewhat.”

“Not much info about over 70 & vulnerable after 12 weeks self-isolated - what happens next?”

“More clarity is required from government on information and statistics, I feel sure that the information was deemed to be correct all of the time but cannot help feeling that sometimes this was not the case.”

“More direct help would be nice.”

“When are the vulnerable getting more say during lock down?”

“There has been NO support given by the Redwood Centre at all.”

“When are the vulnerable getting more say during lock down?”

Case study:

“Social services have spoken with my PA and they are refusing to self-isolate. My social worker rang me today asking how I was, I told them I still have symptoms and if my oxygen saturations drop to 92% I have to call for help...despite me informing them they were to self-isolate during two phone calls that day. One was a video call with me wearing a mask while I was in majors dept in PRH and the other following advice of Covid-19 ambulance crew to tell my PA to self-isolate and has not done so. I have no confirmation of this. My social worker also informed me that the care agency my PA works for have been monitoring the situation, so it appears they are allowing staff to work despite being informed to self-isolate. My social worker asked why I am requesting for my PA to be tested, I have explained that for safety of everyone and of their clients my PA needs to be tested. I got told we cannot force them to get tested and that my social worker will call me on Monday to see how I am. I have yet again explained that I am in quarantine and no one coming in while I have symptoms as I am following guidelines. The impression I have is that they are not taking this seriously. I am deeply concerned about this matter.”

Emotional and behavioural affect from COVID-19

We had several comments in relation to emotional and behavioural, people said:

“The fear/anxiety of catching Covid-19 is serious to many and thus limits social interaction, shopping and public interaction.”

“No one worldwide has had experience of such a virus.”

“This is a challenging and scary time. Many of our parents work in local care homes and today's news highlights the difficulties and vast numbers of COVID-19 deaths care homes have had to deal with.”

“If the weather has been dull, damp and miserable then so would our moods. Our resolve to deal with pandemic would have been very different and more damaging.”

Support from Local Authority

We had several comments in relation to support from local authority, people said:

“Local authority support has been very good for people in need. The national schemes such as NHS food parcels have not been good. People missed out, even when registered I had to turn to local authority for help or foodbanks, which have been overwhelmed.”

“My local council have been very good checking on us and making sure we have everything we need.”

“Telford & Wrekin's email information has been excellent. Likewise, the help offered to those in need.”

“I have felt supported by Telford and Wrekin council very informative tweets and maintenance of services especially recycling services.”

Lack of testing

We had several comments in relation to testing, people told us:

“I am in a household of 3, which includes 2 teachers and a healthcare professional. The lack of testing or antibody testing was frustrating. I am now preparing for the phased return of primary school pupils, with no idea how we can safely achieve social distancing with the youngest of our school community returning first.”

“Just to let you know anyone receiving home testing kits are expected to take them to priority posting sites. This to me is worrying as people may think it is safe to go out when having symptoms.”

“Concerns raised that Telford residents are being ‘left behind again’ in terms of testing centres.”

Discharge from hospital

When being discharged from hospital it is important that every patient (and anyone involved in the persons care) is fully informed of what to expect. We have been made aware of breakdowns in communication between patient/family member(s) and hospital, during in the discharge journey. When people are not fully informed and do not have the correct information, this can lead to confusion amongst care companies and stress for the patient/family member(s).

Case study:

“A resident was admitted to the Princess Royal Hospital early this year. Whilst in hospital (the now patient) caught COVID-19 and the next of kin (NOK) was told the resident had a test for COVID-19 on Wednesday and was informed of the result on the Friday. On the Saturday morning the manager of the care home (where the resident lived) rang the NOK to say they would like information on the resident as the hospital hadn’t informed them of their COVID-19 test result. NOK explained that the resident had a positive test for COVID-19 the day before. The manager said they hadn’t been informed of that so they couldn’t accept the resident because it would put their other residents at risk. There was confusion over which care home the resident would be going to, in the end NOK found out via the ward staff the resident had gone to a different care home. Yet again NOK was asked about the individual as no details had been given. The resident has gradually settled into their present surroundings and is finally receiving the level of care they need. A further move now would undeniably have serious consequences, impacting gravely on their fragile mental health and physical condition.”

Q16. Your opportunity to recognise anyone who deserves special praise for their support during the Coronavirus (Covid-19) pandemic

Whilst we have been able to find out what people have found difficult throughout the pandemic, we also wanted to offer people the opportunity to praise those who have helped support them. All feedback is crucial, and it is important that we reflect both the positive and negative experiences. We wanted to demonstrate that even at a time where life has taken a turn down an unexpected and challenging road, that kindness and positivity still shines through.

Altogether we received **39** comments from respondents. Below is the individual feedback which has been categorised into **5** groups:

1. Local Council
2. Voluntary sector
3. Food services
4. NHS staff and other healthcare workers
5. Mixed

Local Council

We had several comments in relation the local council, people said:

"I got my info from the council new letters via email and they were useful."

"Telford & Wrekin community support helpline."

"Newport Mayor & Town Counsellor - provided ongoing support to the local community but particularly to the vulnerable & shielding category."

"My local council have been very good on us and making sure we have everything we need."

Voluntary sector

We had several comments in relation the voluntary sector, people said:

"The Voluntary Sector and not volunteers. But all the services who are classed as third sector - we are still carrying on as normal and doing what we always do whilst being adaptable and flexible to serve our local communities."

*"Holy Trinity Church in Wrockwardine Wood, have organised and delivered a food share on a daily basis throughout the lockdown. Sourcing and collecting food and then making it available to all who need it...Special praise to *** who has opened the church every day for people to access food."*

Food services

We had several comments in relation to food services, people told us:

"Supermarket workers who have kept the shops open without the same recognition, without the same level of protection."

"Anyone who works the front-line helping others everyone deserves praise."

"People providing food."

NHS staff and other healthcare workers

We had many comments around the NHS and other healthcare workers, people said:

"NHS staff who have faced extremely challenging and difficult times, the uncertainty of their"

own safety and then having to return home to their families and keep that side of life going too. Extraordinary times demand extraordinary people and actions to get us through.”

“All the NHS and those that have been on Frontline from day one. Thank you will never be enough, the while Country is indebted to you.”

“A third-party nurse with Parkinson’s experience and their involvement at Shrewsbury. Also, the staff at Shawbirch Medical Practice are working well.”

“Shawbirch GP practice and the community rapid response nurses.”

“All key workers and the backroom staff that support them.”

“I would like to praise the staff at the Women’s and Children’s unit at PRH - who cared for me and my new-born son, also they supported my partner who was able to be there for delivery! (Which I am very grateful for). staff kept me reassured and still were so positive despite pressures.”

“NHS staff both clinical and non-clinical, emergency services.”

“Care home workers.”

*“Registered Nurse *** ** on Ward 17 at PRH, for juggling caring for their young children, elderly father-in-law and patients with COVID-19 in hospital and staying strong and positive throughout it all.”*

Mixed

We also heard comments about other workers and organisations who have provided support during the pandemic, in particular:

“local supermarket workers, delivery drivers, Voluntary and community sector workers, social care staff, volunteers, local council and CCG.”

“Prison officers.”

“NHS, Nurses, Carers, People providing food.”

“Bus drivers, refuse collectors, staff in food shops.”

“Age UK Shropshire Telford & Wrekin.”

“Obviously key workers but also delivery drivers’ postmen.”



(Please note: due to GDPR we have removed any information/details which would make an individual identifiable, however, your feedback/comments have still been reflected)



Conclusion

The pandemic has meant that people have been faced with many challenges. Whilst only a small percentage of people have not struggled with the lockdown, many others have experienced physical, mental, and emotional difficulties. The one aspect people have felt the most difficult to deal with is the lack of social interaction, as people have struggled to adapt to self-isolation and not being able to socialise with loved ones and friends. Lockdown has affected people's mental and emotional wellbeing, bringing fear and anxiety for many. However, regular contact with others via digital technology has been valuable and has helped people to cope.

Digital technology has been used widely when it comes to connecting with people outside of their household and used as a vital resource for gathering information about the pandemic and keeping up to date with guidelines. In order to keep people safe and protected information and guidance must be available for all to access and many were not always aware of the types of information available in a variety of formats. This includes the availability of information/guidance which many felt should have been available earlier. A lot of people have shared their views about the government and how they should have acted quicker in response to the virus, sharing information and supporting people. The lack of continuity and clear information left many in fear and without a full understanding of the 'rules of lockdown'. Feedback showed this has applied in specifically to the elderly/vulnerable and BAME.

With restrictions imposed in-line with government guidelines, accessing healthcare and services has changed dramatically over the last few months. Suspending services has left many people without access to appointment procedures, with alternative options made available, including telephone consultations. Nevertheless, not everyone has access to digital technology. People have continued to self-isolate and practice the importance of selfcare. However, for many others who require treatment from a Healthcare Professional due to an ongoing illness/condition(s) this has significantly impacted their life. Additionally, people felt some services had not kept their patients informed of new procedures and would have liked more support, this included Dental Practices, General Medical Practices and Mental Health Services.

Whilst the option to go shopping has been restricted for people self-isolating, those who have been able to go out have faced difficulties obtaining necessities such as food and medical supplies. This was a result of the lack of guidance from the government and the fact they had not acted as quickly as people would have liked. This created fear amongst many resulting in people 'panic-buying', with supermarkets and pharmacies unable to cope with the demand.

Healthcare services have faced struggles with supply and demand. Feedback showed how Care staff (including those in the community) have encountered issues obtaining PPE, medication and generally looking after patients within hospitals. The NHS has faced a huge fight against the virus

and some people felt that the government should have acted sooner to give the service a fighting chance. Perhaps there are lessons to be learnt as we move forward.

On the other hand, amongst much negativity and distress we were able to highlight community spirit within Telford & Wrekin. People have shown gratitude towards people working on the front line, including hospital staff, supermarket staff, local council and more. This demonstrates how effective communication and teamwork can result in bringing positivity to the community.

To conclude, the pandemic has been an experience like no other. The increased demand on services has been significant but could have been much worse. This survey has helped share people's experiences from a variety of perspectives, reflecting their views and opinions on numerous topics and highlighting their greatest struggles during lockdown.



References

- ¹Leigh-Hunt, N., Bagguley, D., Bash, K., Turner, V., Turnbull, S., Valtorta, N. and Caan, W., 2017. An overview of systematic reviews on the public health consequences of social isolation and loneliness. *Public Health*, 152, pp.157-171.
www.researchgate.net/publication/319687009_An_overview_of_systematic_reviews_on_the_public_health_consequences_of_social_isolation_and_loneliness
- ²Schrepft, S., Jackowska, M., Hamer, M. and Steptoe, A., 2019. Associations between social isolation, loneliness, and objective physical activity in older men and women. *BMC Public Health*, 19(1).
www.researchgate.net/publication/330426851_Associations_between_social_isolation_loneliness_and_objective_physical_activity_in_older_men_and_women
- ³Ons.gov.uk. 2020. *Deaths Involving COVID-19, England And Wales - Office for National Statistics*. [online] Available at:
<<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsinvolvingcovid19englandandwales/deathsoccurringinapril2020>> [Accessed 16 June 2020].
- ⁴GOV.UK. 2020. *COVID-19: Guidance on Shielding And Protecting People Defined On Medical Grounds As Extremely Vulnerable*. [online] Available at:
<<https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>> [Accessed 23 June 2020].
- ⁵Murray, R., Edwards, N. and Dixon, J., 2020. *Delivering Core NHS And Care Services During The Covid-19 Pandemic And Beyond*. [online] The King's Fund. Available at:
<<https://www.kingsfund.org.uk/publications/letter-to-health-and-social-care-select-committee-covid-19>> [Accessed 16 June 2020].
- ⁶Who.int. 2020. *Myth Busters*. [online] Available at:
<<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters>> [Accessed 24 June 2020].

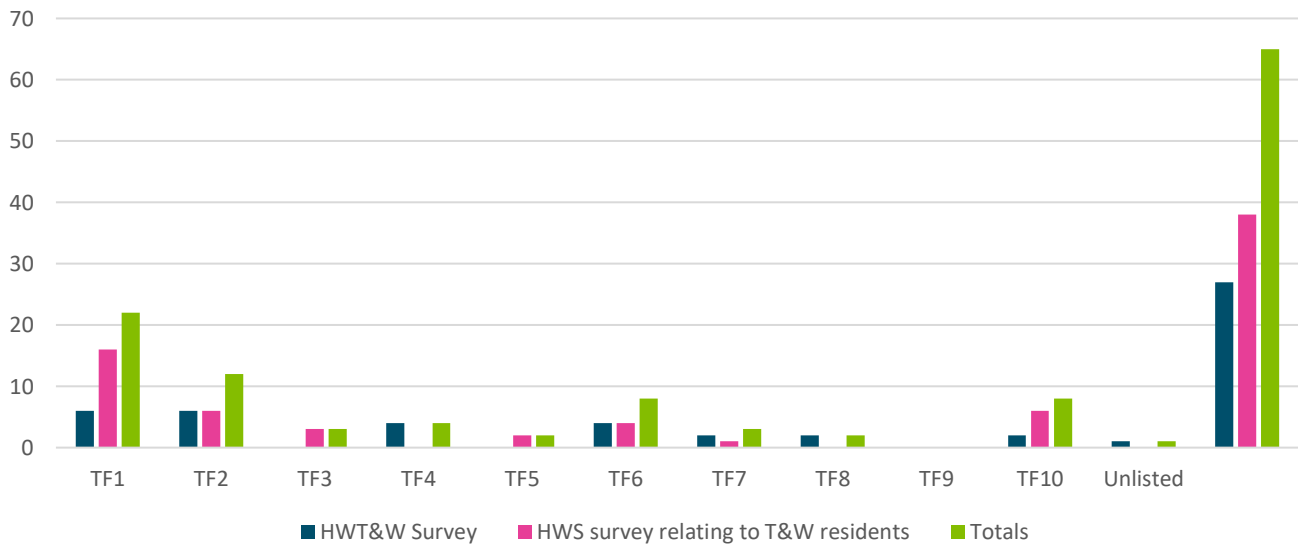


Appendices

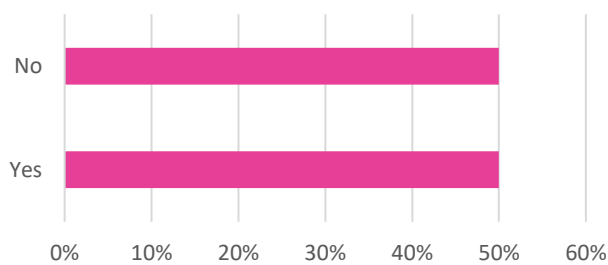
Appendix.1 Demographics

Postcodes of respondents

57 respondents preferred not to answer this question.



Any long-standing illness, disability or infirmity?



50% of those who responded said yes.
50% of those who responded said no.
10 respondents preferred not to answer this question.

Healthwatch Telford and Wrekin

Meeting Point House

Southwater Square

Telford Town Centre

Telford

Shropshire

TF3 4HS

01952 739540

www.healthwatchtelfordandwrekin.co.uk

info@healthwatchtelfordandwrekin.co.uk