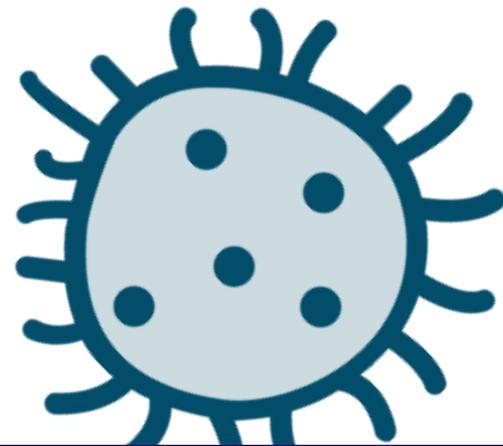
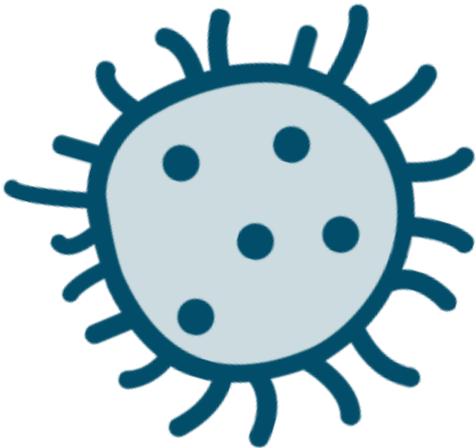


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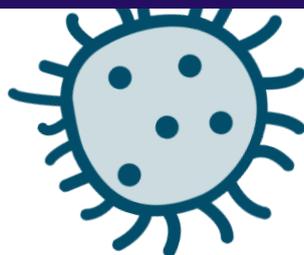
Sunderland



What you told us about COVID-19

Shielded versus the General Population

July 2020



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Executive Summary

In June 2020, Healthwatch Sunderland gathered feedback from 714 respondents, gathering people's general experiences of using health and social care services during the COVID-19 pandemic.

A report 'What you told us about COVID-19' was published sharing the findings. The aim of this report is to understand the experiences of those who advised us they were shielding during March 2020 to June 2020.

The purpose of this report is to share the findings with key health and social care providers and commissioners, to help them identify what is working well and highlight those areas that need to be improved. It should be read in conjunction with the 'What you told us about COVID-19' report.

Key themes and findings

The findings from the survey results have shown that generally people who were shielding had a positive experience of using services during the pandemic. However feedback has also highlighted some of the areas that those shielding haven't rated so well. For the benefit of key service providers and commissioners, the summary given below highlights the main themes and trends of those areas where possible improvements could be made based on survey respondents feedback.

Information and advice

The majority of shielding respondents found it easy to find (79%), understand (74%), act on (75%) and keep up to date (68%) with COVID-19 related information and advice, there were areas where respondents found a lack of clarity in communications and found advice unclear and contradictory. The results are around 5% more favourable in comparison to those of the general population.

Healthcare support

The majority of shielding respondents who used healthcare services rated them as good or excellent (92%), significantly higher than the 49% reported by the general population.

Mental health and wellbeing

Shielding respondents reported a similar impact on their mental wellbeing to the results of the general population.

Keep yourself well

Differences to note between the shielding respondents and general population were in the categories of decreased exercise: 46% of shielders had decreased their exercise levels against 31% of the general population. In contrast, 42% of those shielding reported a weight loss, against only 13% of the general population.

Next steps

The response to our survey has been incredible, we appreciate the time taken by all 714 respondents who shared their experiences with us, including those shielding.

We are sharing that feedback with commissioners and providers via a suite of reports to provide robust information upon which to build future service responses. The other summary reports focus on certain areas or individuals experiences during the pandemic. These are titled;

- Keeping yourself well
- Use of North East Ambulance Service
- Mental health and wellbeing

Comments received from survey respondents on specific services will also be shared with service providers and commissioners where appropriate.

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Introduction

What is Healthwatch Sunderland?

Healthwatch Sunderland is the independent local champion for people who use health and social care services. We're here to make sure that those running services put people at the heart of care.

By speaking to Sunderland residents we aim to understand their needs, experiences and concerns of accessing and using local health and social care services. We can then speak out on their behalf to local service providers, focusing on people's concerns about current services and ensuring they are listened to and addressed by those who are running services.

We encourage and work with local services to involve Sunderland residents in the changes to health and social care provision. The ultimate aim is to get things right for the future, with health and social care services which meet the needs of the local community.



*We champion what matters to you and
work with others
to find ideas that work.*

*We are independent and committed to
making the
biggest difference to you.*



Demographics

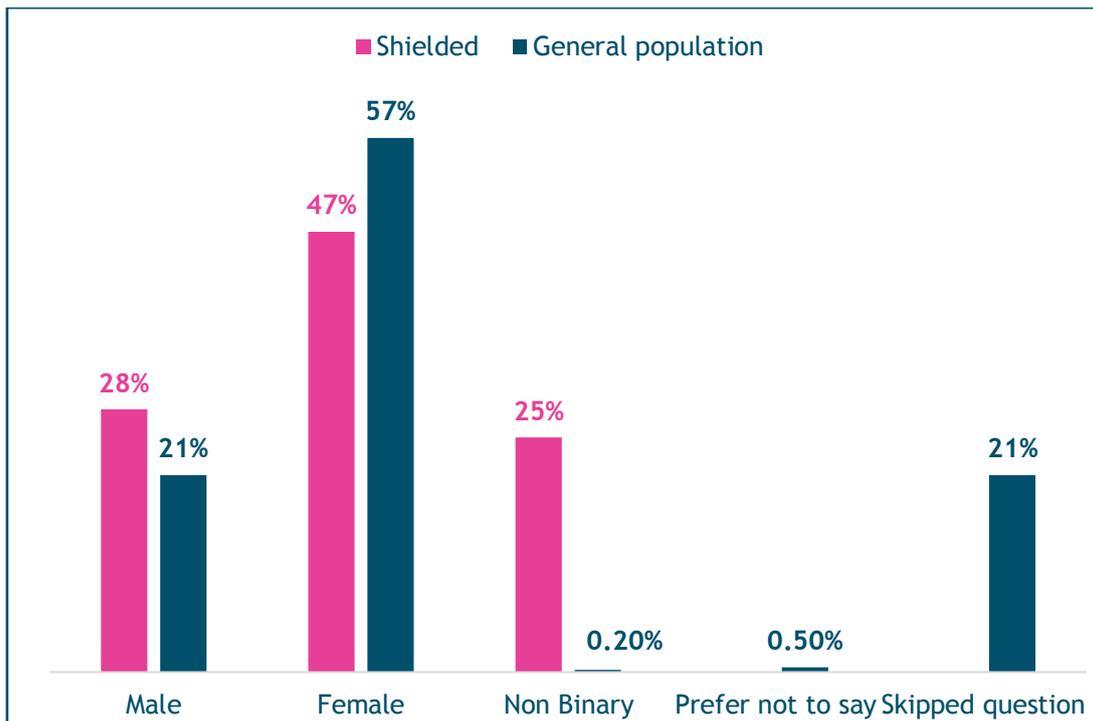
The demographic breakdown of those who completed the survey is given below:

714 survey respondents

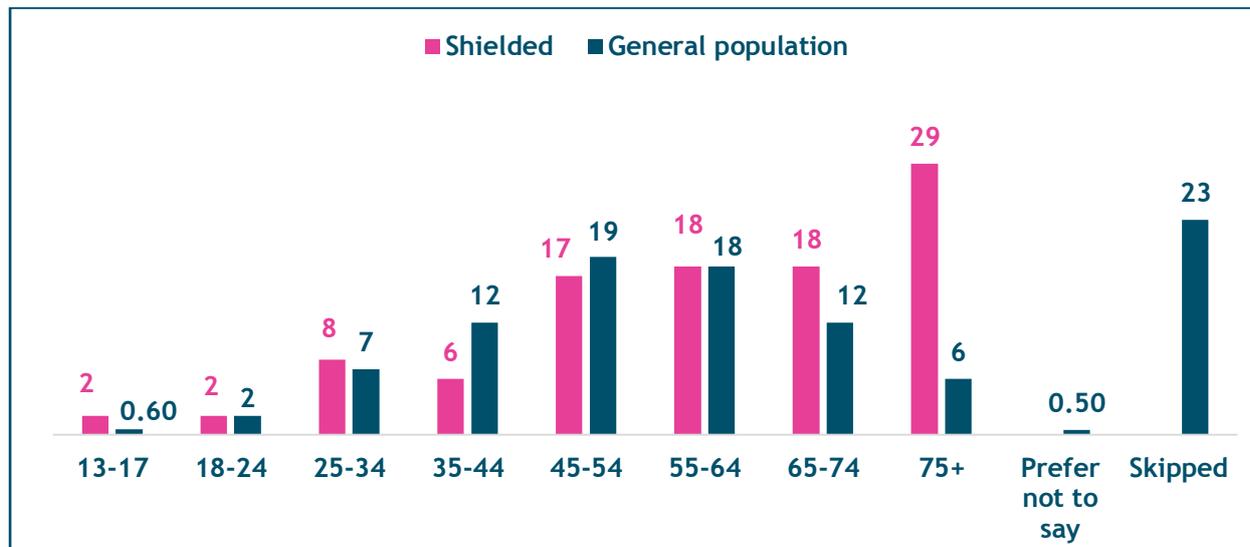


This report will look at the difference in experiences between the 65 people who identified as shielding and the 649 people from the general population.

Gender



Age ranges in percentages



Ethnicity

Respondents were asked to indicate their ethnicity:

Answer Choices	Shielded		General Population	
Asian/Asian British: Bangladeshi	0%	0	1%	9
Asian/Asian British: Any other Asian/Asian British background	0%	0	0.3%	2
Gypsy, Roma or Traveller	0%	0	0.2%	1
Mixed/ Multiple ethnic groups: Asian and White	0%	0	0.5%	3
White: British/English/ Northern Irish/Scottish/Welsh	22%	14	66%	425
White: Irish	0%	0	0.3%	2
White: Any other White background	0%	0	5%	34
Another ethnic background	0%		0.3%	2
I'd prefer not to say	78%	51	1%	9
Skipped question	0%	0	25%	162

Pregnancy

4 people in total stated that they were pregnant at the time of completing the survey. Of these only 1 pregnant person stated that they were shielding.

Findings

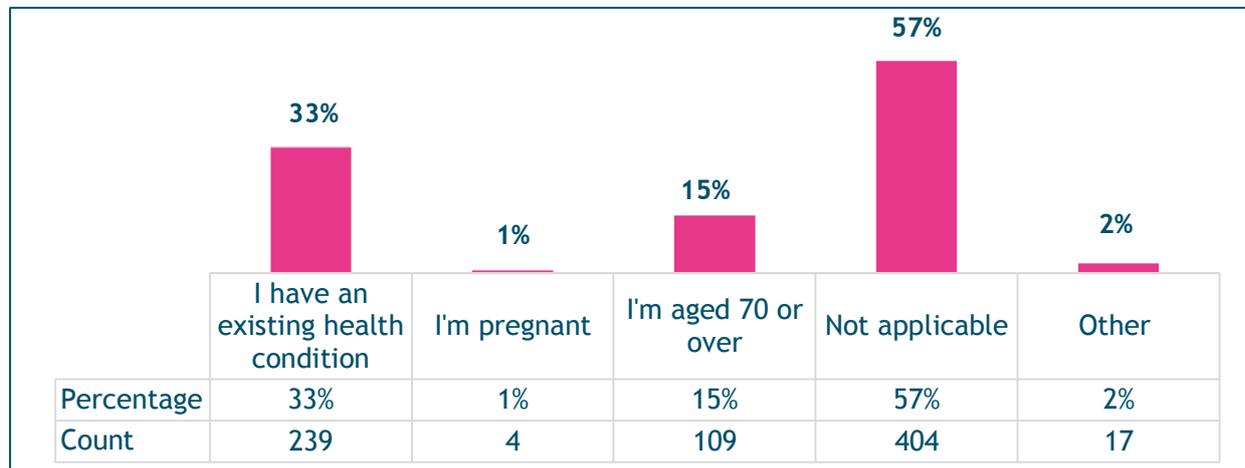
People were asked a series of questions under six main sections, the findings from the survey are given below. In total **714** individuals responded to the survey, however not all respondents answered all of the questions.

Section one findings - Tell us about you

In section one people were asked to provide information about them as an individual.

The shielded versus the general population

All **714** survey respondents, were asked if they have a long term health condition, are pregnant or over the age of 70 and directed to tick all that were relevant. The breakdown of the category/categories they fall into, is given below;



*(Due to people being able to select more than one category the percentages will total more than 100)

Those who answered to say that they fell into at least one of the at risk categories were then directed to a question about shielding. **9%** (65) of these respondents stated they had received a letter or text message advising them to shield. They highlighted which of the following categories they fell into, with several people choosing more than one category:



Existing health condition	62
Pregnant	1
Aged 70+	19

Then those who identified as shielding were asked if they were **caring for one or more people** who fall into one or more of the at risk categories. The breakdown of the category or categories the person they care for falls into, is given below:

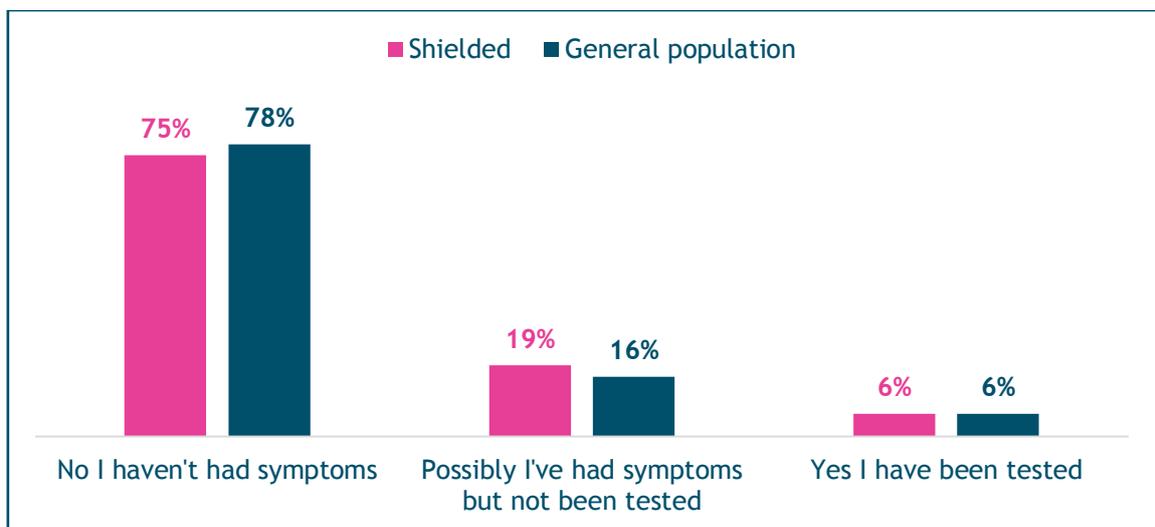


Existing health condition	70
Pregnant	0
Aged 70+	54

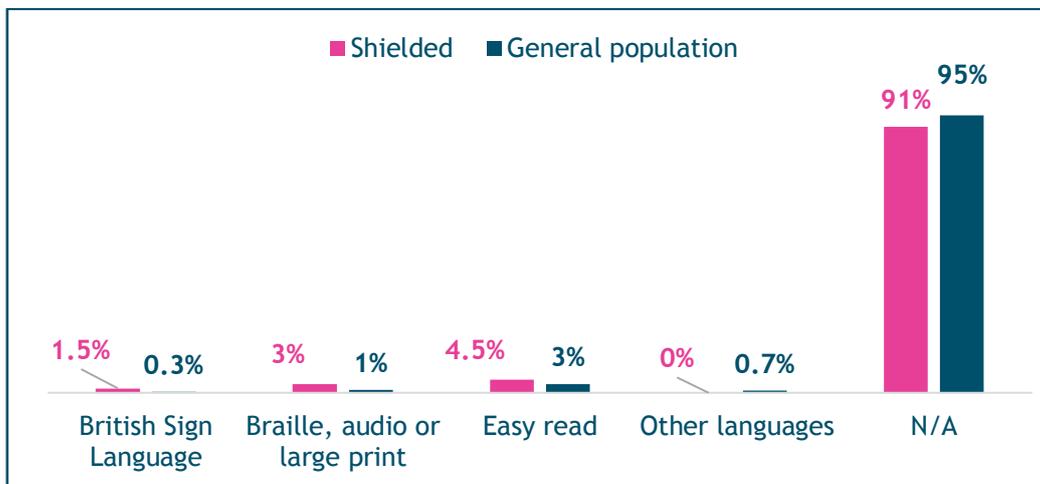
Of those being cared for, **12%** (87) had received a letter advising them to shield.

Have you had COVID-19?

When asked if they have had COVID-19 respondents gave the responses indicated in the graph below, which shows that **6%** have tested positive from both groups of people and a further **19%** of the shielded indicated they could have possibly had COVID-19 compared to **16%** from the general population.

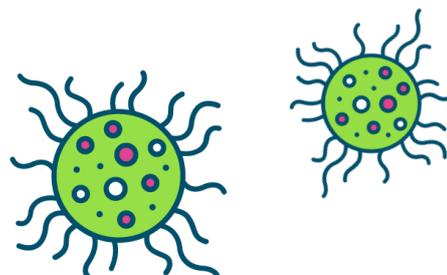


The graph below shows the comparison between those people who were shielding and the general population who needed information in different formats. It shows that the shielded required a wider range of formats than the general population.



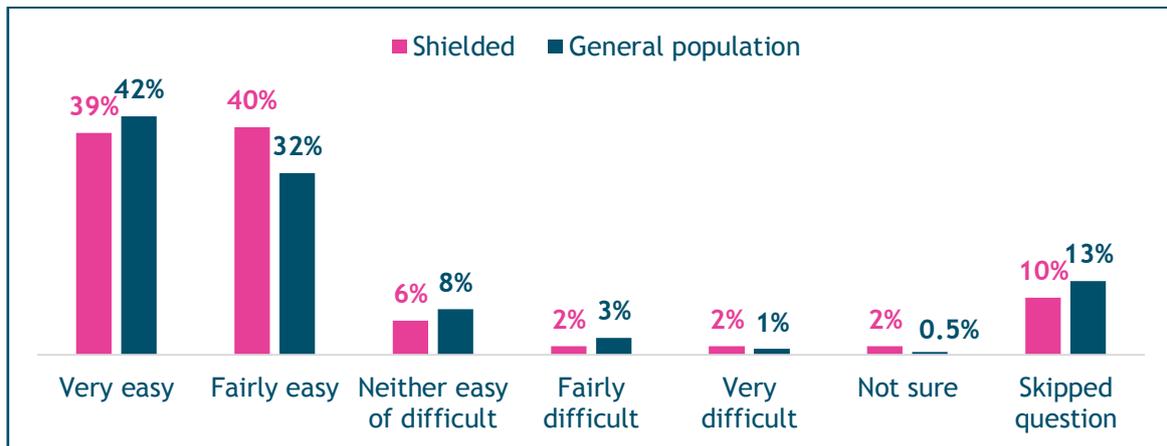
We asked if they were able to find the information in the format required, the responses below show that the majority of people from both groups were able to find the information in a format they needed.

Format	Shielded		General population		
	Yes	No	Yes	No	Skipped
British Sign Language		1	2	1	0
Brail, audio or large print	2	0	5	4	0
Easy read	3	0	15	3	1
Other languages	0	0	3	1	1

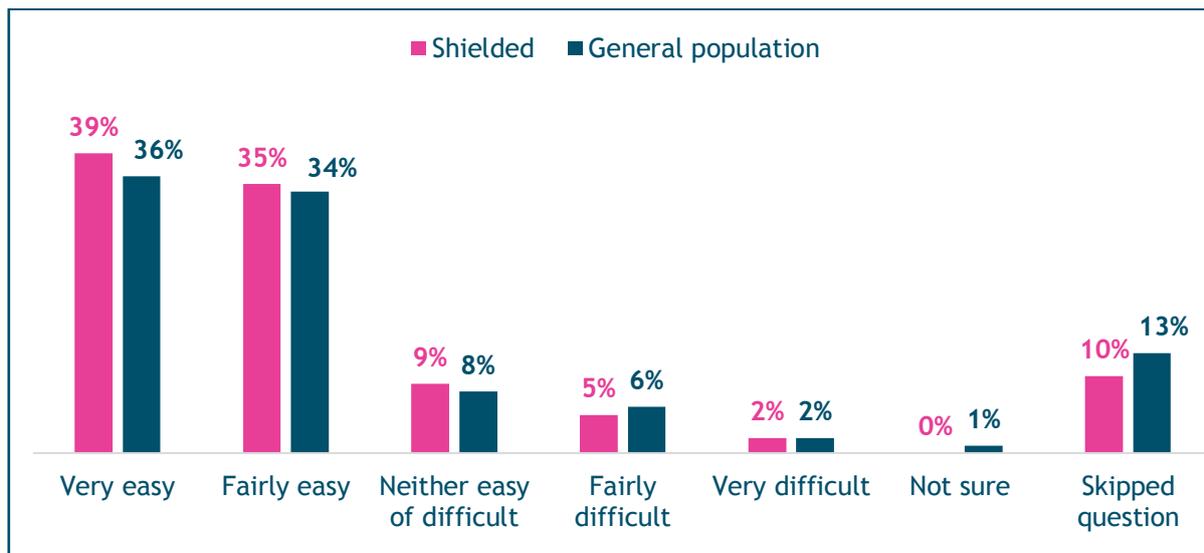


Section two findings - Information and advice

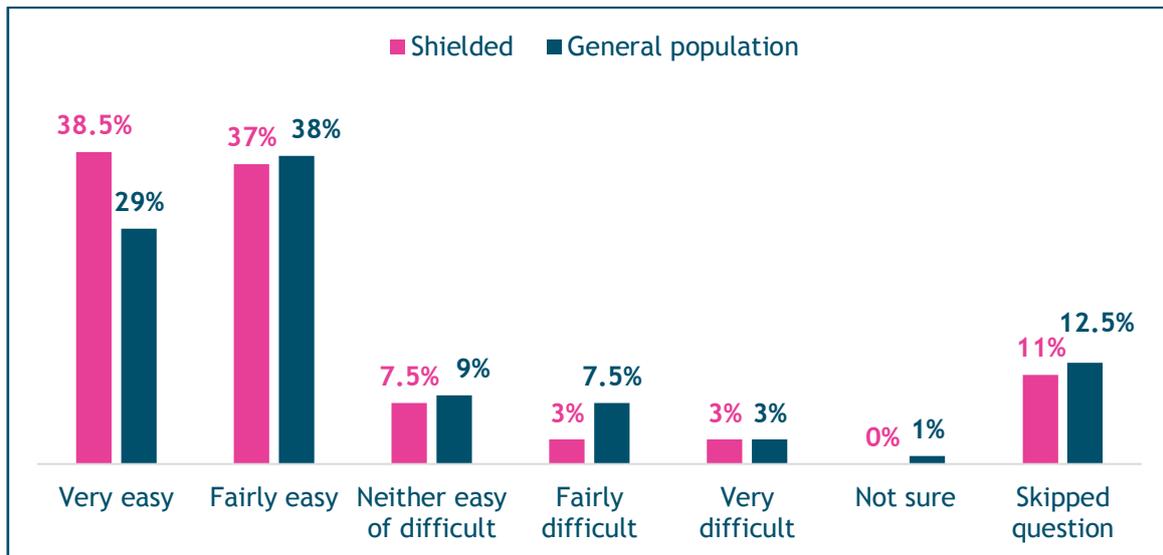
The graph below shows the comparison between responses from the shielded and the general population when we asked how easy they found it to **find** information they needed to keep themselves and others safe during the COVID-19 pandemic. It shows that high percentages of both groups found it either very easy or fairly easy to find the information they needed.



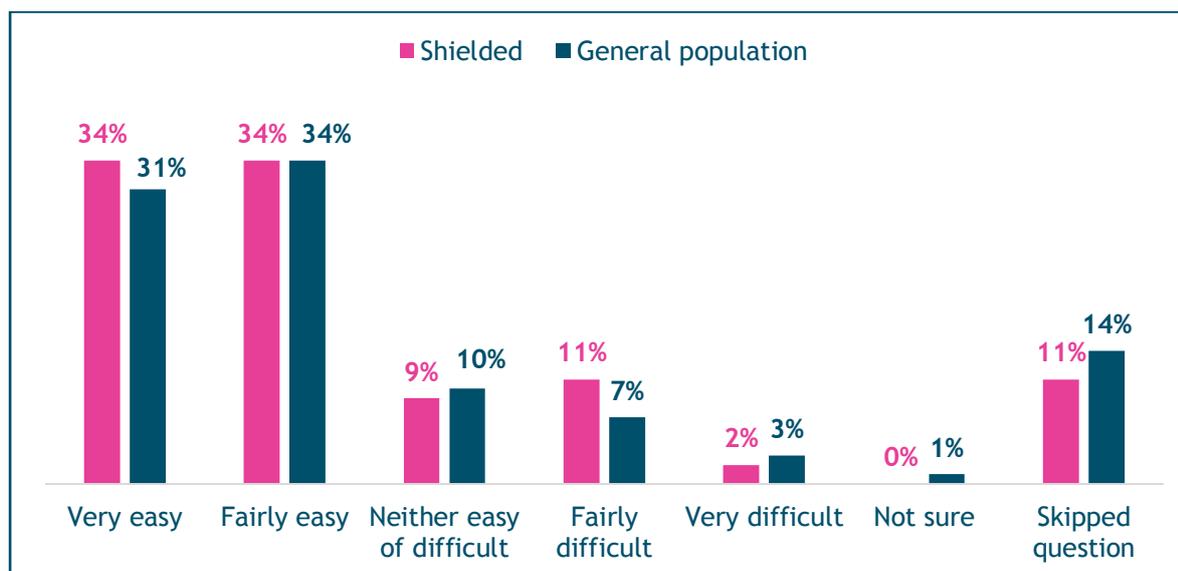
The following graph shows the comparison between responses by the shielded and the general population when we asked how easy they found it to **understand** the information needed to keep themselves and others safe during the COVID-19 pandemic. It shows that a lower number of the general population found the information either very easy or fairly easy to understand (70%) and a higher number of the general population also found the information available fairly difficult or very difficult to understand (8%).



The graph below shows the comparison between responses by the shielded and the general population when we asked how easy they found it to **act on** the information they needed to keep themselves and others safe during the COVID-19 pandemic. It shows that a lower number of the general population found the information either very easy or fairly easy to act on (**67%**) and a higher number of the general population also found the information available fairly or very difficult to act upon (**10.5%**).



The majority of respondents from the shielded and the general population found it easy or fairly easy to **keep up to date** with changes to information about how to keep themselves and others safe during the COVID-19 pandemic. But a higher percentage of the shielded found this either fairly or very difficult (**13%**).



When we asked the people who identified as shielding which topics, if any, they found it difficult to get clear information or advice about. We received the highest number of responses for the following topic areas;

- Clear information around shielding
- Found government information and advice unclear and sometimes contradictory

“I was confused by a letter saying I needed to shield.
GP advised I didn't.”

“How to apply to be tested and where the test centres are actually
located.”

“Knowing what to do once my shielding period of
12 weeks is complete.”

The general population told us the topics they found it difficult to get clear information or advice about. We received the highest number of responses for the following topic areas;

No particular topics (**45%** of respondents)

- Changes to NHS services, including access and cancellation of appointments
- Changes to social services, including equipment services
- Access to GP services, including prescriptions
- Found government information and advice unclear and sometimes contradictory around social distancing, self-isolating and ‘bubbles’
- Whether or not they could see family members
- Whether to shield or not
- COVID-19 testing
- Confusing messages about PPE and when and where to wear it
- Travel

“Visiting my daughter with cancer.”

“Managing my existing health problems with routine appointments being put
on hold.”

“No GP appointments. Hard over phone. No dentists. Consultant
appointments cancelled.”

Respondents told us that they accessed information about COVID-19 from various sources. With the majority of people from both the shielded and the general population relying on TV and the internet, including social media for information. A high number of respondents also told us they relied on friends and family for information.

When we asked the shielded what information or sources of information they found especially helpful, these are the most popular responses:

- TV, daily updates
- All information was useful
- The internet
- NHS and government letters
- Housing manager



“The council offered to do shopping and arranged for my prescriptions to be delivered, I’ve had several phone calls to check I am ok. My nurse and consultant (Freeman hospital) have also been amazing.”

“Receiving daily email has been helpful, however I have found some very contradictory.”

“Originally I was worried about shopping and was pointed to the government food parcel but while these were helpful apart from milk they contained no dairy products or eggs. The bread had been previously frozen which meant it could not be kept.”

When we asked the general population what information or sources of information they found especially helpful, these are the most popular responses:

- None
- Work
- TV, daily updates
- Housing manager
- Government website and other online resources
- Primary care services, such as GP and pharmacy
- Information on social distancing, handwashing and wearing masks
- Healthwatch
- The press



“Daily updates for work and news briefings.”

“Sunderland City Council briefings. Local Authorities were on the ball.”

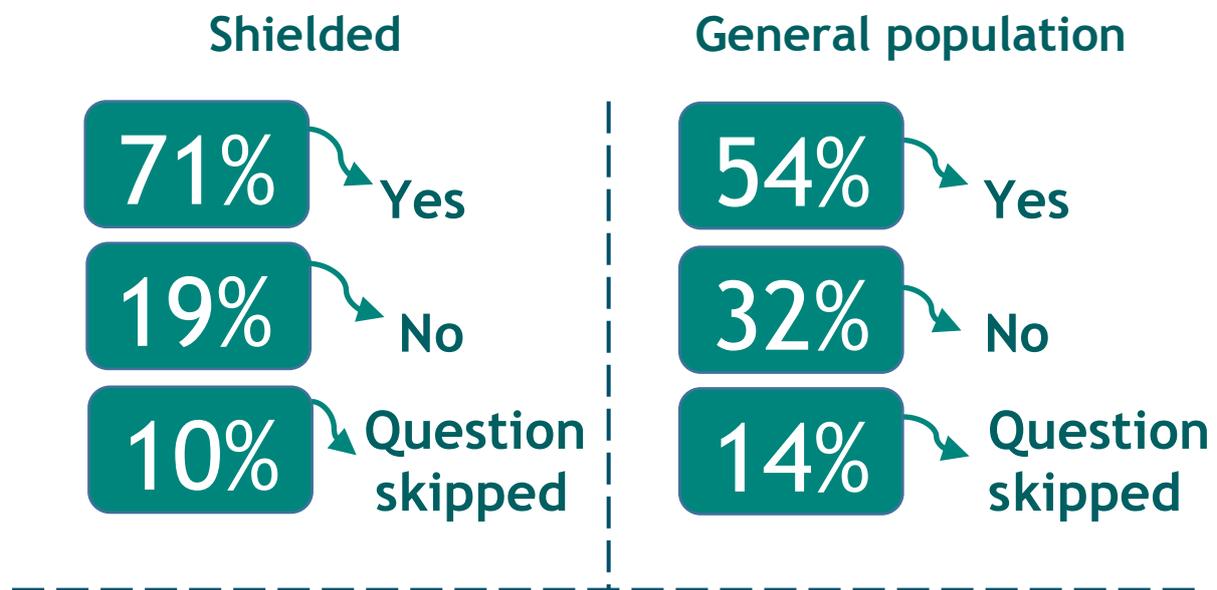
“Inclusion North website, Learning Disability England website and Sunderland People First website - All easy to understand information and resources.”

Section three findings - Healthcare support

People were asked a series of questions around the use of healthcare services, changes they may have experienced to these and levels of satisfaction.

When asked if they or a person they care for used a healthcare service during the COVID-19 pandemic, high percentages of respondents said they did, as indicated in the diagram below, with more of the shielded (**71%**) answering yes to this question. Services used included:

- Pharmacies
- GPs
- 111
- North East Ambulance Service
- Sunderland General Hospital

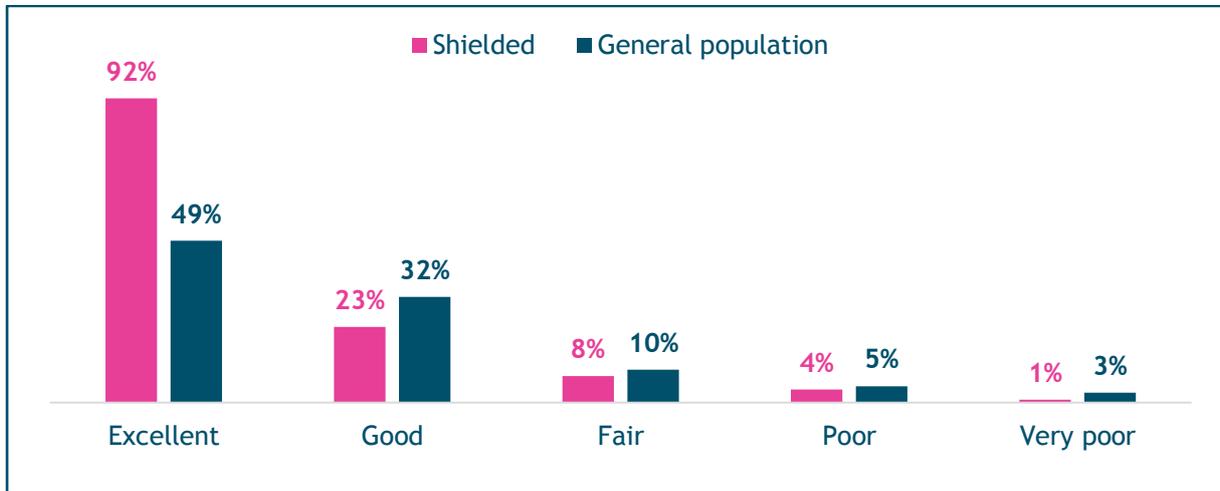


Respondents were invited to name up to three services used and rate each one on a scale from very poor to excellent, based on their experiences.

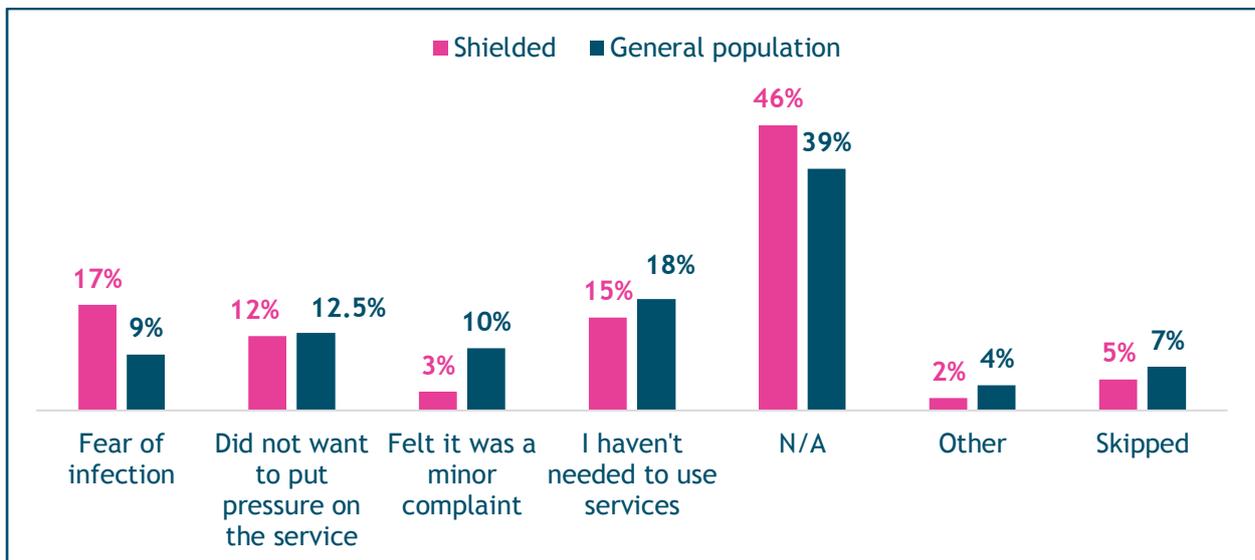
The results of this show that the majority of those from the shielded population who had used a service found the experience to have been either good (**23%**) or excellent (**92%**). We received a total of 93 pieces of feedback from the shielded, with many people giving feedback for more than one service.

Those from the general population who had used a service also found the experience to have been either good (**32%**) or excellent (**49%**). We received a total of **620** pieces of feedback from the general population. With many people giving feedback for more than one service.

The graph below shows the levels of satisfaction which the shielded and general population showed around the services they and the people they care for used during the pandemic:



The graph below gives the comparison between the shielded and the general population when they were asked why they or someone they care for had not accessed healthcare services. Although it shows that high numbers of both populations didn't need services or ticked the N/A response, 29% of the shielded didn't use services as they were either frightened of infection or didn't want to put pressure on services:



Some respondents told us other reasons why they did not access healthcare services, including three people who stated that this was because their appointments had been cancelled. One response was received for the shielding:

“They couldn’t get to see a GP and were advised to attend the Emergency Department.”

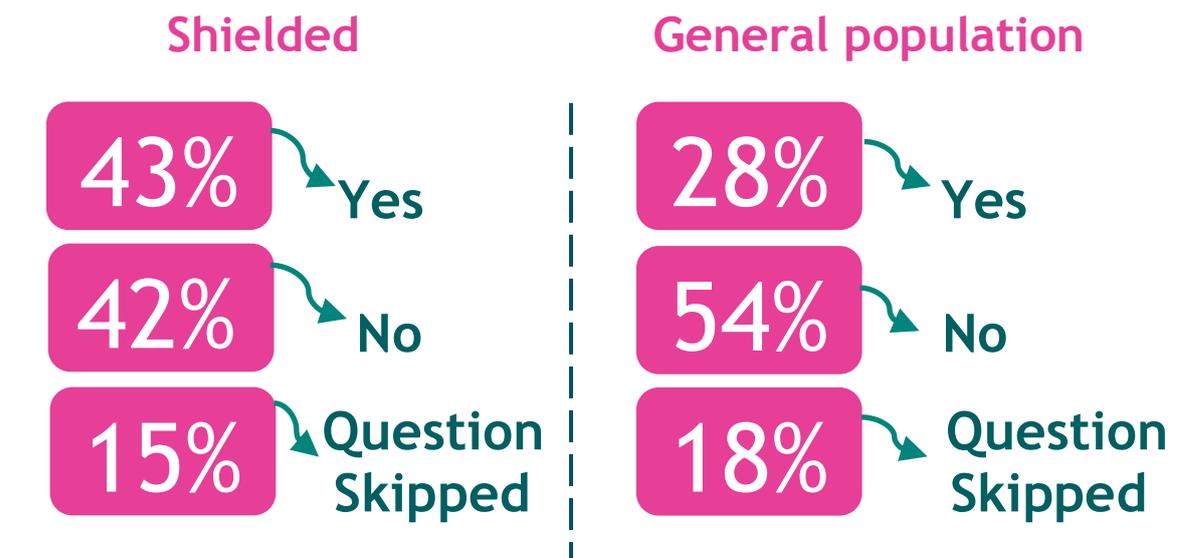
Responses from the general population included:

“Severely disabled daughter was on urgent cancer surgery waiting list when services had to be suspended. I needed a prescription for steroids to control dry, split and bleeding hands from constant hand washing but wouldn’t let anyone go to pay for/collect my prescription so had to do without.”

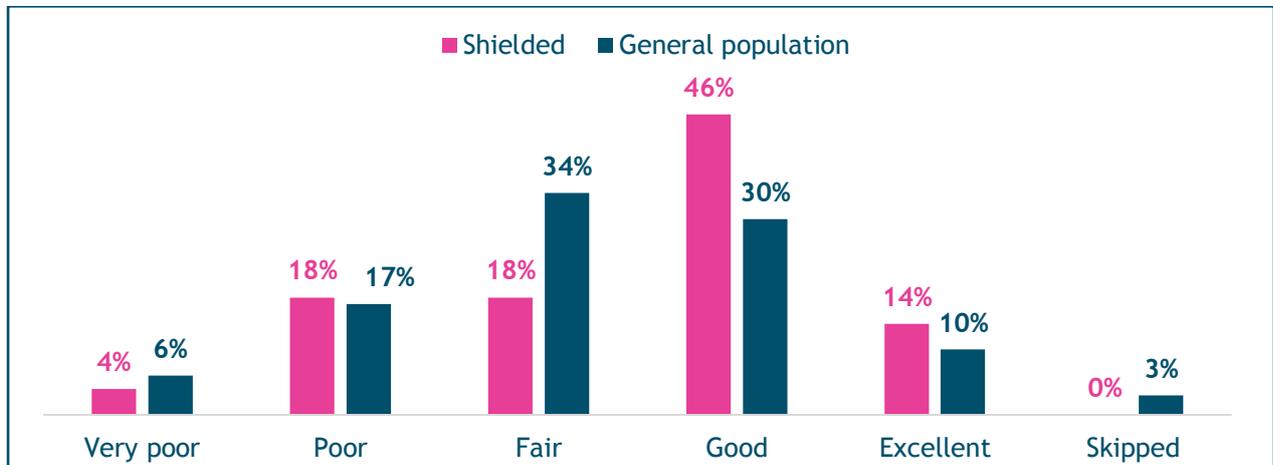
“Having heard from friends/family how difficult it is to access GPs and get an appointment for anything that is not an emergency I didn’t see the point in even trying.”

“I was afraid that if I was ill, how would I deal with it and what burden would it put on my family by knowing I had the virus and they could do nothing. If things had got to a point where I felt much worse I would have accessed services.”

When asked if they or someone they care for has experienced any changes to healthcare services we received the following responses from the two groups, which show that a higher percentage of the shielded (43%) saw changes:



The graph below shows the ratings both groups gave when asked about the communication of these changes, with a total of **40%** of the shielded giving either a very poor, poor or fair rating to the services they used and **57%** of the population giving either a very poor, poor or fair rating for the services they used:



Further feedback comments were collected asking which healthcare services their responses were relating to. Some comments from the shielded included;

“Changing my hospital quarterly haematology appointment to a later date, but arranging for District Nurse to take my blood sample.”

“My autistic son and his anxiety.
We never heard from anyone with how to help him.”

“I was due to have a kidney transplant from a live donor which was deferred during this time. Also the deceased donor list was suspended due to covid which is all understandable, although disappointing as I would now be recovering from a transplant. However the correct precautions were put in place to keep us all safe, I believe.”

Comments from the general population included:

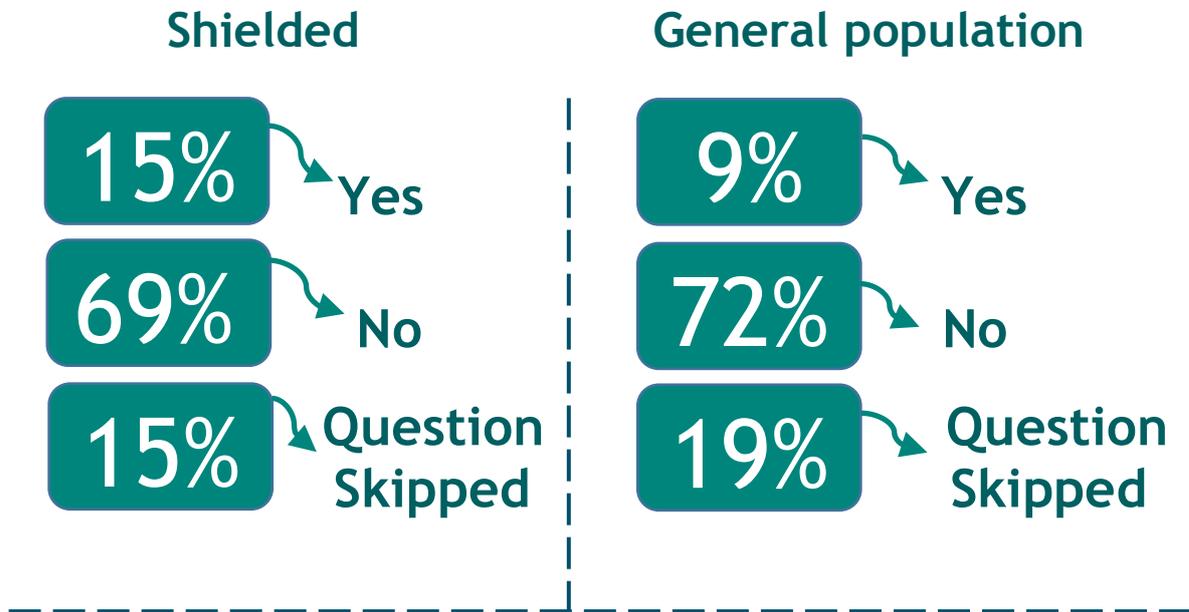
“All - wasn't really told about changes just took it for granted that they were happening.”

“GP for parent - changed medication and this has not been monitored. Concerns for parent around whether working or not, there was no communication from GP.”

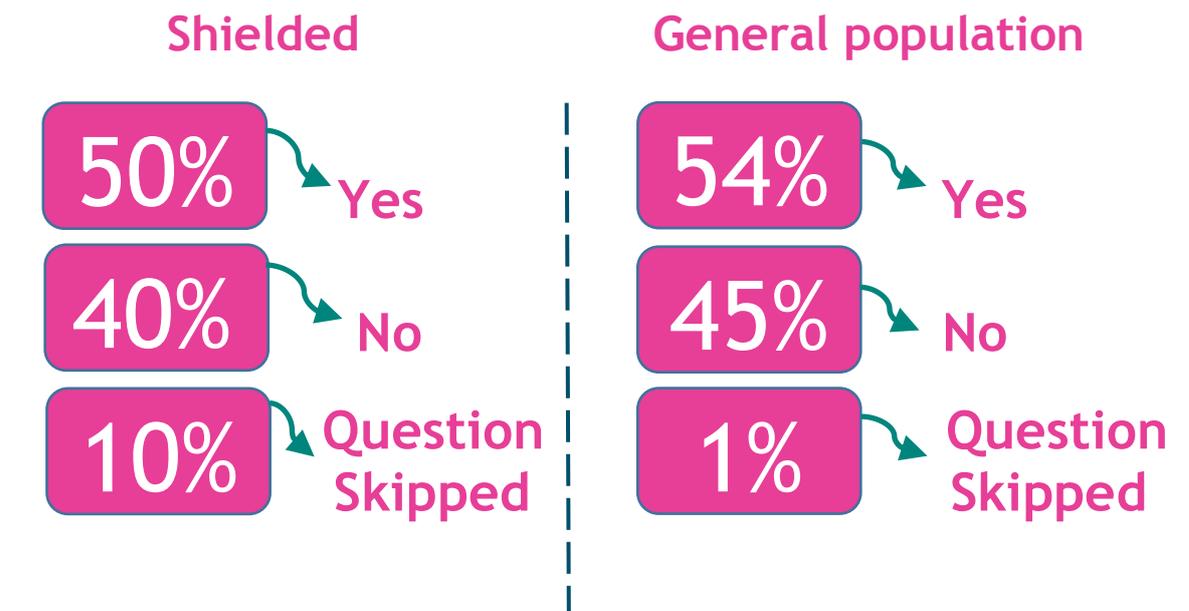
“Sunderland Royal Hospital had to cancel my appointment for minor surgery on 22nd April due to coronavirus. However, it was rescheduled by phone & carried out on 15th June, so I am very pleased with that.”

Section four findings - Social care support

We asked respondents if they or a person they care for receive care or support to carry out daily activities. The diagram below shows how they responded:



For the people who said they or someone they care for receive support (10 people from shielded and 56 from general population) the following diagram depicts whether they have experienced changes to services, with the general population receiving slightly more changes (54%) compare to the shielded (50%):



From those who experienced changes to services, the table below shows how they felt about the communication of those changes. Although only **30** people from the general population told us they had experienced changes, we received **55** ratings about the communication of changes, as people were rating more than one service. Although we received **30** ratings from the general population stating that communication around changes was either good or excellent, we also received **25** ratings from the same group rated communication as fair, poor or very poor:

Rating	Number of people	
	Shielded	General population
Very poor	1	8
Poor	0	3
Fair	3	14
Good	0	24
Excellent	0	6
Skipped	1	0

The majority of responses from both the shielded and the general population were around care in their own home from domiciliary care providers and NHS services.

Some respondents gave comments about their experience of these services:

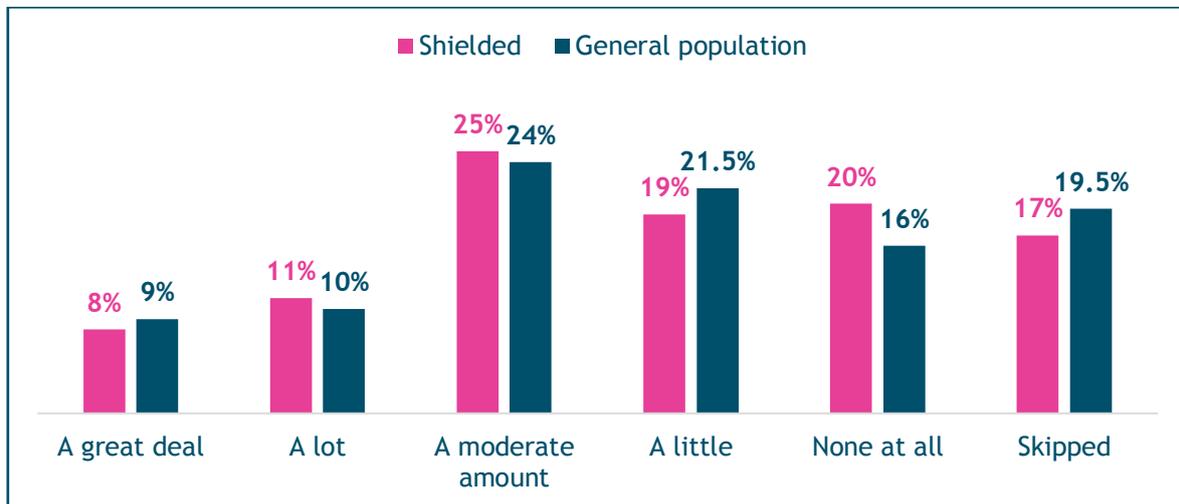
“We made the decision to divide and restructure households and stop carers coming into the house to shield effectively. Children’s disability team have only been in touch to come into the house after 3 weeks to carry out a paperwork review and were shirty when they were denied (no safeguarding issues). They needed to be told what their role was and eventually dropped off a box of gloves weeks later.”

“Carers and visit to my home after I had been in hospital - not impressed at all!”

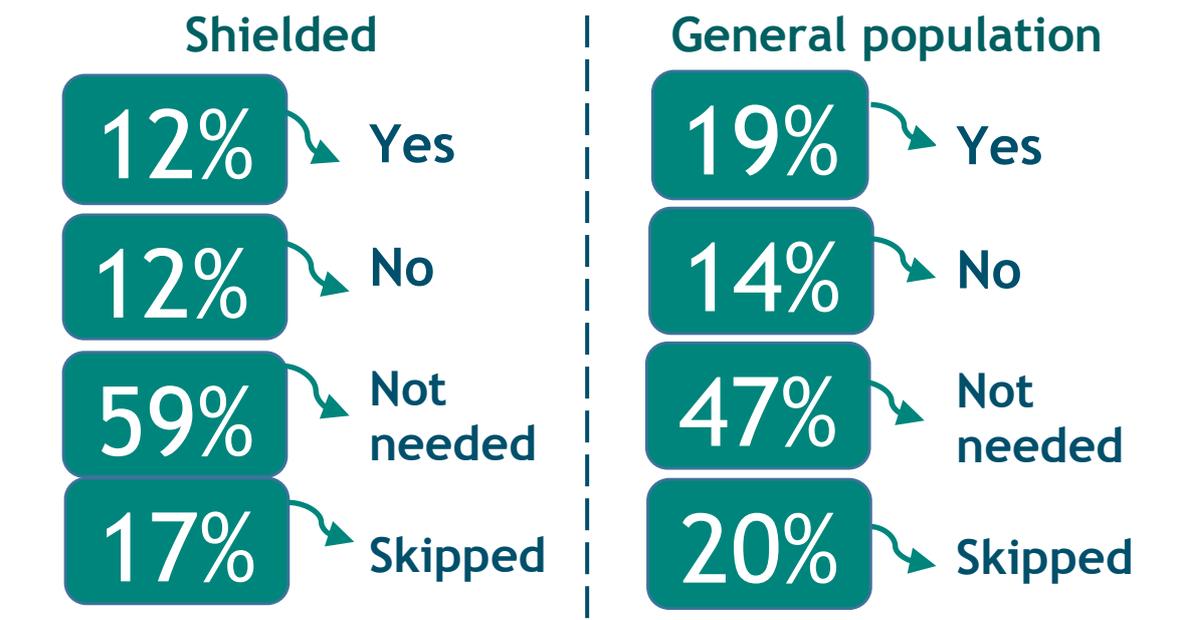
“Hetton Home Care, as the girls make me feel safe - they always wear full personal protective equipment.”

Section five findings - Mental health and wellbeing

We asked respondents how much of an impact the COVID-19 pandemic had on their mental health or wellbeing. The graph below shows the comparison between the shielded and the general population and indicates that **63%** of the shielded and **64.5%** of the general population were effected to some degree:



When asked if they have been able to access support for their mental health or wellbeing during this time, we received the responses shown below. This shows a higher number of the shielded (**59%**) stated that they did not need support, a lower number were able to access support (**12%**), but also a lower number were also unable to access support (**12%**). A total of **99** people who completed our survey could not access the support they needed for their mental health during the pandemic:



The table below shows the comparison between where the **8** shielded who accessed support for their mental health and wellbeing received their support and where the **45** people from the general population received theirs:

Support	Shielded	General population
Family / friends	4	22
Voluntary or Charity organisation	0	6
GP	1	12
Other	4	25

The shielded informed us that they received other support from:

- Gentoo scheme manager
- Sunderland Psychological Wellbeing Service
- Place of work
- Psychotherapy

People from the general population informed us they received other support from:

- Support groups
- Community Mental Health Team x2
- Psychiatrist / Clinical Psychologist x4
- Crisis team x3
- Mental health team in hospital x2
- Supervisor and colleagues and workplace x5
- Mental health services x4
- Their pets
- Phone calls from church
- Their hobbies and interests
- Online meditation exercises
- Online
- Delirium team

We asked the respondents to the survey what has had a positive effect on their mental health during COVID-19. Although some of the people who were shielding stated that there had been nothing, others told us the following;

- Speaking to family and friends
- Exercise
- Cooking
- Time out from work
- Reading
- Home delivery of groceries
- Generally keeping busy with gardening, cleaning and tidying the house

Although some people from the general population also stated that they felt there was nothing that had a positive impact on their mental health during the pandemic, others informed us what had a positive effect on them. These included:

- Work and colleagues and also working from home
- Talking to and spending time with friends, family and neighbours
- Time for hobbies or taking up new ones
- Zoom meetings and online quizzes
- Being able to do more exercise
- Time for cooking and baking
- Social media
- Relaxation and reading
- Less pressure in life
- Their religion
- Visits from carers
- Decorating and cleaning the house
- Walking - with or without a dog

Here are some of the responses we received from people who were shielding:

“Looking after my niece’s dog, kept our minds occupied as she lives in Oxford 280+ miles away and couldn’t get up to pick her up due to Lockdown, which was a blessing in disguise so to speak.”

“Lots of phone calls to family and friends. More time with my cats who keep me amused. Lots of reading and catching up on other things.”

“Less rushing around. Time to review priorities. Keep in touch with family more frequently albeit remotely.”

Here are some of the responses received from people from the general population:

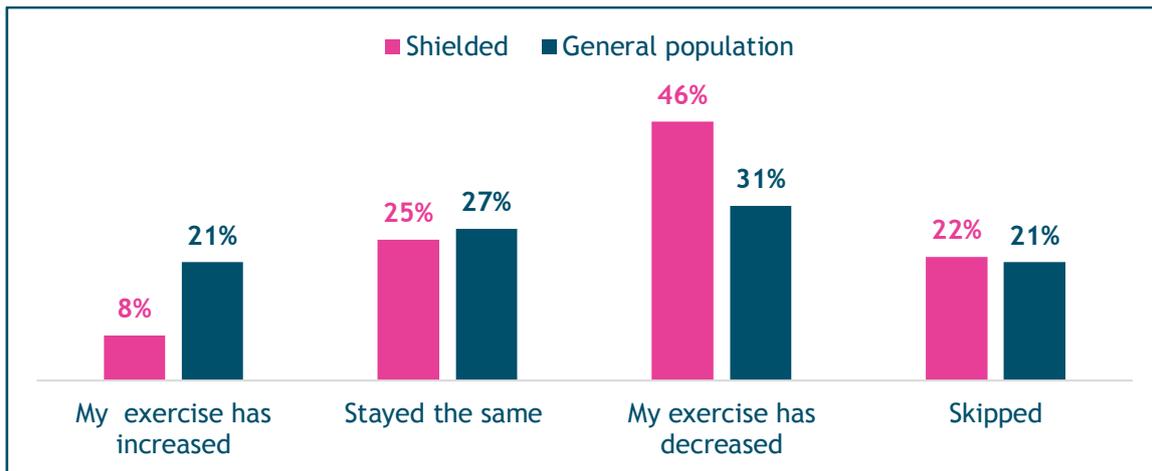
“Enjoyed spending more time at home with husband and pets.”

“Apart from being ill, I’ve loved the peacefulness of my dog walking and the quiet roads. It’s also been good having group chats and quizzes with friends online.”

“Studying has given me something to focus on, to concentrate, act as a distraction and improve my subject knowledge and understanding.”

Section six findings - Keeping yourself well

The survey asked respondents if the pandemic has had an effect on their overall **levels of exercise**. The graph below gives a comparison from the responses of the shielded to the general population and indicates that the shielded had a greater impact with regard to level of exercise, **46%** of whom stating that their exercise levels have decreased. It also shows that where **21%** of the general population increased their levels of exercise, compared with **8%** of the shielded.



Some of the people who were shielding told us that due to their individual health conditions they were not undertaking any exercise. However others were taking part in exercise and here are some of the activities they enjoyed:

- Walking, with or without a dog. Some people walking circuits of their garden or yard area
- Home exercise, including yoga, seated exercise and weight training (some following TV or online sessions)
- Gardening
- Doing jobs around the house
- Playing with the children or dog in the garden
- Dancing

“I am carrying on with the regime started by my Physio with support of my wife.”
(Stroke survivor)

38% of the general population stated that their levels of exercise had decreased due to the pandemic. However, almost half of the general population (**47%**) stated that they had been using walking as their main form of exercise. Some, in sheltered accommodation were walking the corridors or their buildings, other respondents were walking around their gardens if they weren't able to get outside

into their community and others walking their dogs. Other forms of exercise mentioned included:

- Gardening
- Dancing
- Cycling
- Yoga or Zumba, some using online sessions for guidance
- Using weights and doing stretches
- Seated exercise
- Looking after pets, including horses

“Walking, which decreased as had to stay at home.”

“I used to do RPM and Zumba at a gym, plus running. When the pandemic started I switched to just running. Now my Zumba classes are on Zoom so I do more of those, plus I do some running. Therefore I do the same amount in total but in different formats.”

“Jogging - which I have never done before.”

“Only been able to push wheelchair up and down drive, whereas before the pandemic I usually did 5 to 6 hours exercise a week.”

The survey asked respondents if the pandemic has had an effect on their overall **levels of Smoking**, and if they had been smoking more or less. The responses to this question show that out of the **516** people from the general population who answered the survey question **57** (11%) people were smokers. From the **53** people who were shielding who answered this survey question **9** (14%) were smokers which shows a higher percentage than the general population:

The table below shows the comparison between the shielded and general population and reveals that the general population were smoking slightly more than the shielded at **36.8%**, more of the general population were also smoking less at **17.5%**. More of the shielded population (**66.6%**) stated that their smoking remained the same during the pandemic:

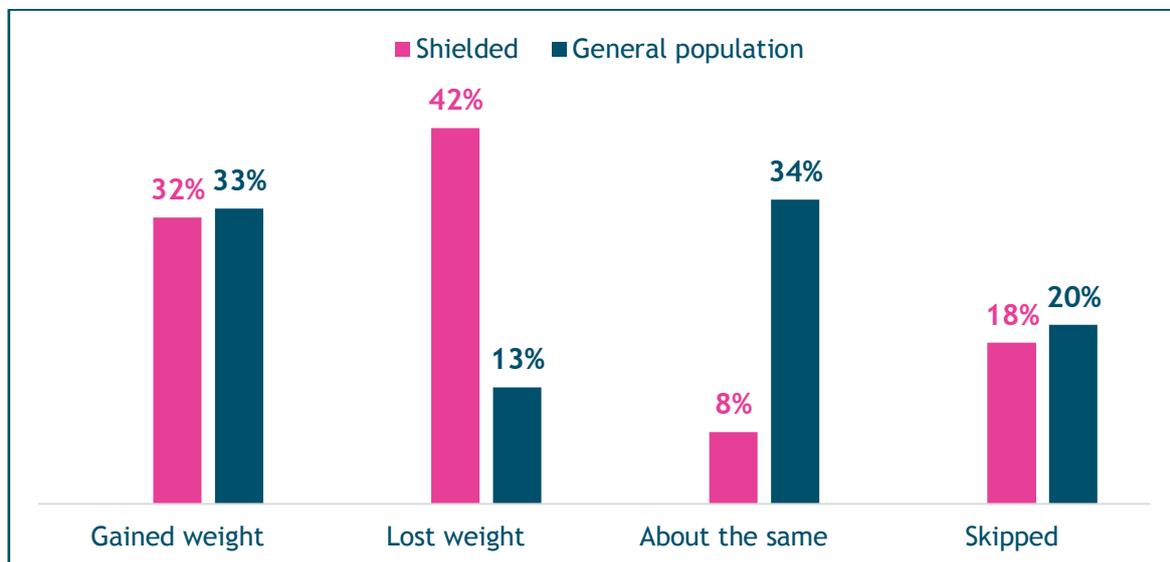
	Shielded (9 smokers)	General population (57 smokers)
Smoked more	33.3% (3)	36.8% (21)
Smoked less	0%	17.5% (10)
Smoked about the same	66.6%(6)	45.7%(26)

The survey then asked respondents if the pandemic has had an effect on their overall **levels of alcohol consumption**. **25** (38.5%) of the shielded indicated that they consumed alcohol during the pandemic and **331** (51%) from the general population indicated that they consumed alcohol during the pandemic.

The graph below shows the comparison between the shielded and general population and indicates that a slightly higher percentage of the shielded (**40%**) consumed more alcohol in comparison to **36%** of the general population:

	Shielded (25 consumed alcohol)	General population (331 consumed alcohol)
Drank more	40% (10)	36% (118)
Drank less	16% (4)	16% (54)
Drank about the same	44% (11)	48% (159)

The survey asked respondents if the pandemic has had an effect on their **weight**. The graph below shows there is a significant difference between the shielded (**42%**) and the general population (**13%**) when we asked if they had lost weight. Whereas **34%** of the general population stated that their weight had stayed the same compared with only **8%** of the shielded population:



Lastly, we asked respondents if they would like to tell us about any aspect of their experience of using health and social care services in the COVID-19 pandemic, here are some of those responses received from the shielded population:

“Being tested positive for COVID-19 I was isolated to my room in my care home which has been difficult.”

“GP and pharmacy have been brilliant. I was phoned about blood donation but didn't feel confident about it being safe for me to go.”

“Very worrying the amount of testing unavailable in maternity care due to COVID. For example, the glucose tolerance test, I needed for gestational diabetes, I could not have due to the pandemic.”

“I was very grateful for the offer of help being offered but declined as I didn't need it. I was told how to get in touch if things changed.”

“I'm missing my brothers and their families. From hospital and GP practice I would like to say a great big thank you.”

Some of the responses received from the general population included:

“Concerned as had no contraception during lockdown as needed updating and felt unable to contact GP. Didn't want to inconvenience them.”

“My 84 year old mother who cares for herself with family helping, has needed occasional doctor's assessment, I feel the pandemic has delayed treatment she may need.”

“Drastic decline in my mental health due to lockdown and not being able to get out and about and see family and friends which would normally keep me well.”

“I have received excellent care!”

“We were struggling to get food due to me being on the vulnerable critical list. Volunteers have really helped with food shopping, someone to talk each week.”

“I love the NHS. It is so important to the nation's health and wellbeing. I really hope it is given more support both financially and emotionally by the whole of society. It has been amazing. Thank you.”

“I have been volunteering - providing a telephone befriending service for AGE UK for a gentleman who lives alone/shielding.”

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