

How is covid-19 impacting on people's access to and experience of health and social care services in Sheffield?

These emerging issues are based on feedback that we have received from individuals, as well as issues that have been brought to us via voluntary and community sector partners. This briefing is intended to be a snapshot of what we are hearing about; we hope that it is of use to services, and commissioners of services, in indicating potential areas of focus.

Background: See previous briefings here

Key issues from 31st July – 21st August 2020:

- **Covid-19 testing** We heard a positive experience from someone who had used a walk-in covid-19 test service in Sheffield. They told us they experienced friendly staff, a fast service, and got their results sooner than expected.
- **Flu vaccines** We heard some confusion around whether flu vaccines would be going ahead, with GP and pharmacy service provision still not up to normal capacity.
- Face coverings This continues to be a topic we're hearing a lot about:
 - Many people have told us they feel unable to wear face coverings for various reasons – from anxiety, to COPD, to sensory impairments.
 - We have heard mixed experiences of people using <u>cards which explain that they find</u> <u>it difficult to wear a face covering</u>. People have expressed concern that many businesses/organisations are unaware of them, and they are not recognised everywhere, leading to people having uncomfortable interactions with staff.
 - One person told us about a negative experience at their pharmacy they said they
 aren't able to wear a face covering due to a sensory impairment, but staff would not
 accept this and would not serve them.
- Impact of waiting for treatment we heard from one person whose surgery was postponed during lockdown. They still have no date for a rescheduled surgery, and their condition has become worse, causing them a great deal of physical and emotional pain. They have reported a lack of communication from services in relation to their care and ongoing need for treatment.
- Mental health respite care We have heard from two people who care for adults with
 complex mental health needs. They have been unable to access the respite care service they
 usually use, and have been told that respite beds will no longer be available to them. They
 were concerned about a lack of communication regarding these changes, and had not been
 told about alternative options for support.
- Social care packages We have continued to hear about people who use direct payments to fund social care packages. Some people are receiving reduced support (eg a phone call instead of support to go out) but are still paying for their full package, and have told us about their confusion and frustration.
- Podiatry services We have heard from the relative of a person with diabetes who is struggling to access podiatry services. His routine appointments have been cancelled for the foreseeable future, but they are worried about deterioration in his feet. He cannot properly access the alternative support available – telephone triage/advice – because of a hearing impairment.