

Your care during Covid

How changes to health and care services have affected people locally



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We are the independent champion for people who use health and social care services in Cambridgeshire and Peterborough.

Our job is to make sure that those who run local health and care services understand and act on what really matters to people.

We listen to what people like about services and what could be improved. And focus on ensuring that people's worries and concerns about current services are addressed.

Introduction

The coronavirus pandemic has caused significant disruption to all our lives. And health and social care services across the country have had to adapt and change to help keep people safe whilst still providing care.

A message from our CEO

“The response to our survey has been amazing. And I want to say a big thank you to the people of Cambridgeshire and Peterborough for taking the time, during very difficult circumstances, to share their stories and trust them to us.

Reading your experiences has been humbling. People’s lives have changed in many ways because of the pandemic and the changes to health and care that followed.

Our survey has shone a light on health inequalities in our area, showing that the most disadvantaged communities have been hit hardest: older people, those with disabilities or long-term conditions and those who are not online.

Your information has already made a difference and been used by the people who plan and deliver services to prepare for the winter and the recovery challenges that lie ahead. They are acting on what you have told us - especially around communications and your worries around hospital safety and how your treatments are going to be progressed.

Meanwhile, local authorities who run social care and support hubs have also welcomed your feedback because it helps them understand and adapt to community needs.”

Sandie Smith
Chief Executive Officer



About our Covid project

We launched our Covid-19 survey on 28 May 2020 to find out how changes to health and care services were affecting you and your loved ones.

As part of the project, we published three briefings about your experiences¹. And shared these with our local NHS and social care partners who had supported us in designing the survey.

The survey ran until 31 August 2020, and in total we heard from 1,131 people about the impact the pandemic has had on their lives.

We listened to the experiences of a wide range of people from across Cambridgeshire and Peterborough.

¹ Find the briefings on our websites at: www.healthwatchpeterborough.co.uk/coronavirus-yourviews or www.healthwatchcambridgeshire.co.uk/coronavirus-yourviews

In particular, those who are most likely to be affected by Covid-19 and changes to services since the pandemic started.

The survey questions and a summary of answers are provided in the supporting information document which is available on our website or on request from our office.

People expressed overwhelming support for health and care professionals and other keyworkers across Cambridgeshire and Peterborough. And were often thankful, even when they themselves had a poor experience of care.

We've been heartened to hear lots of positive experiences of care, for example, many of you have welcomed online and telephone appointments. But sadly, the majority of your experiences were negative, with our most disadvantaged communities hit the hardest.

Those most affected were older people, those with disabilities or long-term conditions and those who are not online.

We found the pandemic had a greater toll on the mental health and wellbeing of carers and people with disabilities or long-term health conditions.

This final report looks in more detail at the experiences people shared, so that the learning from them can help the people planning the local and national response to the pandemic.

Each section contains our narrative and examples of people's experiences. Our learning, aimed at distilling key points and opportunities for the coming months, is summarised on page 24 and is followed by our next steps.

And as we head into winter with Covid -19 still with us, we ask that this learning be used by all partners in health and social care to deliver safe services together.

Who we heard from:

- ⇒ Six in ten people (684) needed to use health services during this period.
- ⇒ More than four in ten people (42%) told us they had a long-term health condition or a disability.
- ⇒ Nearly two in three people (63%) said they or someone they cared for was at risk of serious illness from Covid-19.
- ⇒ More than one in ten people (125) shared an experience of using social care services.



The effect of pausing health and social care services

When health and care services paused due to Covid-19, it created widespread disruption and delays to services. And whilst most people understood the reasons why, it nonetheless led to uncertainty, anxiety, and additional pain for many.

A small number told us they thought it contributed to the premature death of a loved one.

We heard a number of accounts from people whose treatment or care was postponed but they were not informed or were unsure of what would happen next.

People told us they wanted clearer communication about changes to services and what this means for them. And reassurance that there is as robust a programme as possible to continue normal services if Covid levels were to rise again later.

Patient Advice and Liaison Services have been highly valued as a key point of contact.

Cancer treatments

People shared differing experiences of cancer care during the pandemic.

'My eye and bowel cancer conditions have been treated thoroughly at PCH [Peterborough City Hospital] throughout the lockdown.'

'Very concerned about the length of time it has taken for my husband to receive an urgent appointment at Addenbrooke's for a cancer diagnosed at the beginning of lock down.'

'My wife was undergoing chemotherapy for ovarian cancer. This was discontinued...due to an assessment of the risks of continuing treatment during the Covid crisis. She died...probably about three months prematurely because of the discontinuation of treatment due to the Covid crisis.'

Hospital treatments

People told us how they were affected by delays caused by the postponement of hospital appointments and non-emergency treatments.

'My two hip operations were cancelled, I only found out because I rang Addenbrooke's. I didn't have my audiology appointment to fit new specialised hearing aid and haven't heard from audiology. Both of these have affected my physical and mental health.'

'I ended up in hospital for seven days because my outpatient procedure was postponed because of Covid-19.'

GP Services

Whilst GPs remained open throughout the pandemic, they changed how they provided care with many appointments done by telephone or online.

'Needed to talk to or see a doctor. Doctor rang me within 15 minutes. I was able to send photo. Need antibiotics. Prescription sent electronically to pharmacy. Minimum fuss. Better than normal service.'

'I am very concerned that my Dad has missed face to face appointments with his GP and diabetic nurse. He was told to buy his own blood pressure monitor and to keep a check of it on a daily basis. He submitted the results and was told his blood pressure was too low and his medication should be reviewed. However, no appointment was offered.'

Dental treatments

The shutdown of dental services led to a worsening of access to routine high-street NHS dental care.

'...the complete shutdown of dental services (for all but the direst of emergencies) has been a disaster, much worse handled than changes to other medical services. I lost a dental crown in the first week of the lockdown and had to keep it patched up with repeated applications of gutta percha for 12 weeks before I was able to get an appointment with my NHS dentist. Even then, they did nothing but apply a better temporary filling material. As I need an extraction and implant, I will probably be living with an exposed partial tooth for over a year by the time it is finally fixed, with permanent consequences for my jaw structure as well as infection risk.'

'Desperate to get fillings done at dentist as teeth are now in a terrible state.'

Care homes and hospices

We heard difficult experiences from those with loved ones in care homes and hospices.

'My mother was in a nursing home, but sadly passed away in May. Not being able to visit her until the last day of her life was hard and I feel robbed of time with her. I wish it could have been an easy process to bring her home at the beginning of lockdown.'

'Took four days and four 999 call outs to get my dad admitted to hospital. He was discharged from Sue Ryder Hospice despite testing positive and despite having mobility problems and living alone.'

What has worked well and what hasn't

We are worried about increasing health inequalities for those with disabilities. Especially when we hear from people whose needs have not been met under the Accessible Information Standard.

This is a legal standard that says people who have a sensory or learning disability must be given information about their health or care in a format that meets their needs, for example a video call for a hearing impaired person who can not hear well over the telephone.

In addition to this, for those who are not online, there is a real danger that digital exclusion – be it by choice or because they lack the confidence, skills or equipment to go online – will increase health inequalities.

Many services have used technology to communicate effectively with people; these initiatives need to be maintained and increased to benefit more people and ensure better consistency.

There is potential to improve how people look after their own long-term conditions by co-producing more self-care information and support systems.

People told us what has worked or not worked for them during the pandemic.

Appointment preferences

Many health and care appointments moved online or over the telephone. This worked well for some but provided extra challenges for others, such as those with hearing impairments.

'I was diagnosed with a new condition. I got a swift appointment via a video call. It was excellent and possibly better than attending a clinic. As a hearing-impaired person, I think this works better than face to face as the person is always looking at you.'

'Our GP practice implemented a really good system to refer yourself by e-mail, which I found quicker and more effective than the pre-Covid19 provision.'

'I have had terrible experiences with the GP due to speaking on the phone. I have a hearing impediment and wear two hearing aids and rely on lip reading. I had to put the phone down because I was too distressed and couldn't understand. Next time I asked for a video chat, I was told OK, but the GP phoned me and again I couldn't hear.'

'I am now reluctant to seek anymore help from them. I really don't think that they appreciate when stressed and feeling unwell hearing can be even harder than when well. There needs to be more opportunities to be able to speak face to face online if we cannot go to the GP. Now that masks are going to be compulsory in certain places this adds strain to those who need to lip read.'

Communication

Many told us how problems with communication, both locally and nationally, caused them problems.

'I had a text cancelling an ENT (Ear Nose and Throat) appointment then in the following week I had one letter from [North West Anglia [NHS Foundation Trust] and two from Hinchinbrooke informing me of the same. I was also copied in a letter to my GP giving results of my visit to ophthalmics the previous week...but I hadn't had any visit.'

'Most of the information available is small print and the phone numbers at times are hard to find. The start of all information should give the choices - personal phone, phone message, internet, etc.'

'Communication between the social services and the people receiving care in their own home, needs to be addressed urgently.'

'Confusing messages from the government that keep changing have made it hard at times to understand what we should, and shouldn't, be doing.'

Three in ten people told us they had avoided getting help for a health problem.

Long-term health - worsening of conditions

People told us how the pause in treatments affected their long-term health condition.

'My daughter has all her medical care stopped overnight and mental health support stopped overnight. There needs to be a better way of restricting access but not stopping it.'

'Suspension of clinics for a chronic condition, endoscopy and physiotherapy have meant that problems have continued inadequately treated and may be worsening as a result.'

'There still needs to be details of how people can access help, if you were under a service at the start of Covid which has now stopped operating.'

'Lack of physiotherapy service has put my daughter back many months in her recovery and she is now almost immobile again.'

An important issue was raised about communications regarding hospital discharge. Some people supporting loved ones sent home from hospital told us they did not know what care or support was needed.

'I would urge the [hospital] staff to recognise that as no visitors are allowed on the ward relatives can have NO IDEA what treatment the patient needs each day when they are discharged unless special arrangements are made to ensure this information is transmitted - either by district nurses or hospital staff.'



Nearly one in three people told us the pandemic has had a high or significant impact on their mental health and wellbeing.

Mental health - real stories

Nearly one third of people told us that the pandemic has had a high or significant impact on their mental health and wellbeing.

We have all had to adapt our lives to cope with the changes. The pandemic is likely to increase demand and pressure on mental health services now and for some time to come.

More peer support and voluntary sector services are required to provide more contact and help for people.

People with mental health conditions are among our most susceptible groups where changes to life and drops to levels of support can cause serious difficulties. The health care system needs to be able to prioritise people quickly and provide appropriate support.

We heard from people whose mental health care changed during lockdown, and how both this and the additional stresses of pandemic life affected them, with some struggling to access the care they needed.

Getting support

'Before Covid-19 my husband was attending fortnightly sessions with the adult mental health services but now only has access to online worksheets. Due to his eye condition and his brain condition he has difficulty concentrating and with comprehension. He cannot absorb the information to get the help and has been very down and difficult at times.'

'The mental health team said that they could not visit as they would normally do because of Covid-19. We contacted them on a Friday afternoon. Over the weekend five different people called and each time we had to repeat the facts. On the Monday they handed us over to our GP who said there wasn't any treatment they could give.'

'My mother has severe Bipolar and when she really needed to be in hospital, she had to threaten to kill herself. That was the only way she could get some help. The mental health team did not want to know!'

'Having therapist/psychiatric appointments remotely, over a video call it's easier (for me) to hide signs that I'm struggling. I accept there was no way round this and with hindsight I needed to pay more attention to my state of mind.'

One new mum told us:

'I don't feel comfortable talking about it [my mental health]. I've been hoping that the midwife would ask me how I feel but as she hasn't, I haven't brought it up.'



Four in ten people with a disability or long-term health condition said the pandemic had a high or significant effect on their mental health and wellbeing. This compares to two in ten people without a long-term health condition or disability.

Others told us how pre-existing referrals to mental health services were further delayed.

'Our son was referred... before the lockdown...had an email to say we would have an appointment within three weeks. Then he was sent an email to say we had been signed off before they even saw us. Our child has very complex needs and we have been given the run-around by CAMHS in the past and were signed off after one visit and now we were signed off before being seen and told we would have to refer again after the pandemic!!'

'My autism diagnostic has been delayed...waiting list was already over two years' long before the pandemic. My anxiety and ability to leave the house have worsened, especially as I rely on family to take me out and to appointments.'

Whilst some told us that a lack of space at home made private conversations about their mental health difficult, others told us how grateful they were for the support that was there for them or people they cared about.

'I am grateful that my counselling managed to continue over the phone as it's something that is very important to my wellbeing.'

'I had a friend who was clearly having mental health problems... I convinced her to contact her doctor. She admitted she needed help and did so. She got back to me later that day and said she had had a very good conversation with the Nurse Practitioner, and he had ordered medication which she was able to collect the next day. It took some time for her to get back on an even keel but the Nurse Practitioner spoke to her a few times over the next weeks and yesterday for the first time in nine weeks, she has returned to work part-time.'

Where people went for mental health support

397 people told us who they turned to for mental health support.



More than seven in ten (287) spoke to friends and family.



Two in twenty five (33) used a telephone helpline.



More than one in ten (63) turned to a mental health provider.



More than one in ten (44) used an app or website for support.



More than one in ten (49) turned to a voluntary or community group.



50 turned to a different form of support.

People on a lonely journey

Loneliness has affected many of the people who shared their experiences with us, as people navigated care appointments on their own or managed other changes in their lives.

This affected people of all ages, in particular those who had big life changes such as a new baby, or people who were older or managing a complex health condition on their own.

We know that voluntary organisations and community groups continued to provide essential support to people even though they were experiencing huge challenges in doing this. And that people found local community and neighbour support invaluable.

People have told us how technology has helped them to keep in touch where they could not visit in person.

But the impact of isolation, particularly for new families, needs to be well understood and responded to in the future.

Parents to be and new parents

Changes made to partner visiting in maternity hospitals and units to protect parents to be and their babies, made the pregnancy, birth and caring for a newborn lonely for many. And lockdown restrictions made it hard for new parents to get support from family and friends, or parent groups.

'Being pregnant during this time has been so sad and lonely. I have not been able to have my husband with me at any appointments since before my 20 weeks scan and I am now due to have our baby within the next few weeks. It feels I have had to be pregnant on my own as my husband has missed out on so much.'

'I needed physical people to come and help me take care of my newborn whilst I showered/slept etc, but as no one was allowed in the house we had no support.'



'Having had a baby during Covid-19 lockdown, it was hard as almost daily in the last month of my pregnancy things were changing which made this a very scary and anxious time. Even now my baby is three months old, we are still alone no services/ classes for new mums are running.'

'The midwives that I encountered and saw during Covid have all been amazing though, it is a shame that the access to care just isn't the same.'

Another new parent told us:

'I was also impressed that all of my Midwife appointments went ahead in person. I've found it really reassuring seeing my midwife regularly, especially as a first pregnancy.'

People living on their own

We heard many accounts from people living on their own, including those who were shielding which meant they were advised to stay in their homes when virus levels were at their highest.

'This has been and continues to be a very difficult time for me. I live alone and am affected as I have an underlying health condition severe enough that currently I still cannot go out to benefit from any of the relaxation in restrictions ... in essence I am still locked-down.'

'I have relied on the kindness of volunteers for food when online shopping has been impossible and support emotionally from friends and family by phone or online. The information for my condition has been hard to find anywhere as has my "level" of shielding/strict social distancing. I eventually received a letter towards the end of April, if not into May where what to do was made clear.'

And those managing complex health conditions found extra challenges when doing this on their own.

'My prosthetic was due to be renewed just before lockdown and with the prosthetics clinic closing, my leg became unsafe and I fell down the stairs leaving me unable to wear a prosthetic and wheelchair bound. This is difficult as unable to use my right arm and living on my own left me struggling with my independence and daily tasks. Having no friends or family to help this was very difficult until care was put in place.'

'As a transgendered woman in the early stages of transition I have found the self-isolation difficult and depressing.'

One person told us of their family's experience of coping with the loss of a loved one and how this affected family members shielding alone at home.

'As my father required physio prior to lockdown this stopped immediately whilst he was bedridden and therefore his ability to resist reoccurrence of infection worsened and, in my opinion, led to his chest infection. My father died from sepsis during this time. Not seeing him in the hospital and in his care home has been horrendous and guilt ridden. Being told you can't see him on the day he was obviously dying and just waiting for the call and keeping in touch by telephone only with my mother and brother who are both shielding in different homes was the worst day ever.'

Older people facing increased isolation

There's been widespread recognition of the impact isolation has on older people, who are more likely to be living on their own and managing a health condition.

'I run a charity for older people - companionship on a face to face basis taking people out for a couple of hours away from their home...Having a telephone call is all we can do- send a card or knock on the door and wave through the window. But that is not what our "oldies" want or need. They need real contact.'

'Shutting off all care and support for the isolated elderly has been extremely detrimental to their mental health - communicating via technology defeats/exhausts them or they don't have/can't afford the kit.'

People with sensory disabilities

People with sensory disabilities faced additional issues if they lost support with daily activities.

'Visually impaired people like me seem to have been forgotten when it came to help being made available. Voluntary help from Cam Sight had to be stopped because of distancing and so my ability to maintain communications was severely limited. This emphasised the isolation that blindness causes. It was some time before I found a local source of help with shopping. I have relied entirely on family and slowly accessing the invaluable support of the RNIB.'

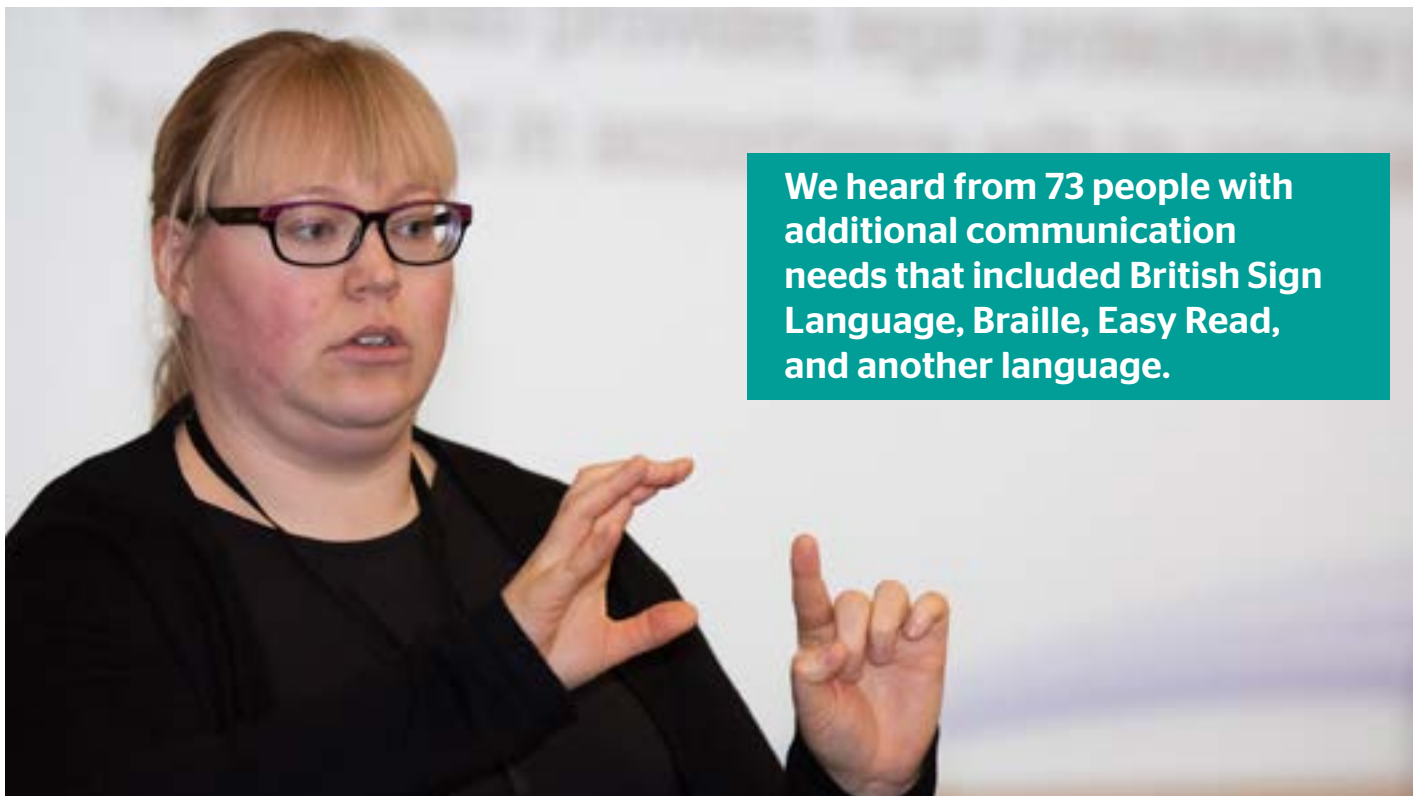
'The biggest problem I have had is that my cataract operation was postponed, my vision is now far worse. I am also quite deaf, so the two things have left me feeling very low during the day when I am on my own.'

'Blind people very often have very different problems from other disabled people, for example a blind person often needs to hold somebody's elbow when shopping, etc. This is now impossible. This situation has a big impact on blind people.'

'My elderly mother who is living independently (her choice) and is bedbound has struggled with the impact of lockdown and friends and family being unable to visit. This also applied to her recent hospitalisation. She is an extremely bright and intelligent woman but has not really understood the effects of Covid-19 and how easily it is spread.'

They went on to add:

'The health professionals, social services and carers have gone the extra mile for her over the last 12 weeks and we remain hugely grateful to them.'



We heard from 73 people with additional communication needs that included British Sign Language, Braille, Easy Read, and another language.



Challenges for carers and families

Covid-19 has made this time harder for nearly everyone. But for those who provide care for a family member or friend, this time has been extremely challenging, particularly when normal care arrangements broke down.

The impact of the disruption to services has meant that families with children or family members who have additional needs have found living during the pandemic even harder.

We have also heard about the negative impact when there has been a lack of communication or information about a loved one in hospital or a care home. It would be good to see measures in place so that no family is left unaware how their loved one is progressing.

Hearing from carers

'As the family carer for two adults it has added enormous pressures without visits, no one telling me where mum's lungs needed the physio, without the normal palliative care visits...district nurses on their advice stopped coming and I took on their leg ulcer care.'

'I definitely feel that my health has really suffered as the unpaid carer but will deal with it when things calm down. Realising hospital meant being on her own and the risk of Covid my mother chose to stay at home at all costs and still does until we have a vaccine...'

'My father-in-law... is extremely vulnerable (over 90 with leukaemia). His regular carer stopped work at the start of lockdown - and there was no-one available to continue his care work, so my partner has become a part-time carer for him (he calls in every day to socially-distantly carry out care duties). I have been extremely anxious with working in a school... that I would be transmitting the virus from school, to my partner (asthmatic and over 60).'

Nearly one in three people told us they were unpaid carers.

Parent carers

There have been challenges for parent carers when their usual support was not available.

'It is a good job our son (49) is living at home and we parents...are reasonably fit and healthy...We will always fill any gaps in care that the support services cannot provide because we are parents and parents put their kids first. We don't stop, even if we are ill.'

'The impact on mental health has been massively underestimated and under addressed during this time. Trying to juggle shifting school times, working requirements, and living every day with children who verbally and physically attack me without being able to get help from my parents or friends has pushed me to my limits. Parents of children with additional needs have been badly affected by this and our struggles are mostly unseen.'

'My disabled daughter does not have access to the usual opportunities she needs to exercise, such as swimming and hydrotherapy. Her scheduled surgery has been postponed and she is suffering from increasing levels of pain.'

'Being lonely for interaction with colleagues and friends has been dreadfully difficult.'

'My child has suffered extremely badly with depression, feeling alone, crying a lot and almost self-harming. It has been a massive challenge for all of the family.'

'I would like to know what would happen if I become sick and cannot provide care for my husband and daughter. I would like access to PPE (personal protective equipment) in case one of us catches the virus as it is impossible to distance when you provide personal care. I feel that unpaid carers have been ignored in this pandemic.'

'Very little support for the first few weeks. I have to care for a disabled young adult family member and his care and support became very onerous because his education was stopped and I felt I had to send all except one social care worker away to reduce the network of possible infection.'

Although, one parent told us:

'Children's Disability Social Care and my son's social worker have been fantastic with providing support through CSS [Community Support Service] workers to take my son out without it having a negative impact on his direct payments.'

Carers with family in hospital and care homes

We heard from carers who struggled with the lack of information when their relative was admitted to hospital.

'What appears to have been universally poor in my experience has been the communication with families who are unable to visit relatives in hospital. I had my father in hospital... and my stepfather in hospital...and was unable to speak to anyone with real information about their progress, plans and treatment. I realise that the importance of confidentiality is paramount, but the emotional needs of families have been overlooked and must not be underestimated.'

'My sister...was taken into hospital at the beginning of lockdown. She...has now been moved to a care home for 'assessment'.

'She is 91 years old, with some dementia, and continually asks why her daughters don't come to see her. Obviously, this is not allowed which is extremely distressing for all of the family.'



Four in ten carers told us the pandemic had a high or significant effect on their mental health and wellbeing.

Pulling together in a time of need

People spoke of how support from their community helped them manage during lockdown, with many volunteering to help family friends and people in their community.

Help with shopping, picking up medications and telephone calls or online socialising were in the highest demand. And people mostly turned to family and friends for support with their mental health and wellbeing.

Community support groups sprang up and provided support until council hubs opened. There was much learning about how to strengthen community networks and there are now opportunities for neighbourhood managers and hub leaders to work together to incorporate improvements into future plans.

Shielding or self-isolating

Some of those shielding or self-isolating commented on the food parcels and other support.

'During this time, we have been supported initially with food parcels until we could arrange a regular supermarket and fresh fruit and veg delivery, a volunteer continues to collect prescription. Without them we would not have been able to comply with gov guidelines so thank them all. We only had the food parcels for a couple of weeks, but they were excellent and had selection of healthy things as well as the treat of biscuits. Every single person who has helped us have been happy to do so and did so with a smile.'

'I've valued the regular calls from the hub because of shielding - very helpful.'

'The volunteer motorcycle volunteer delivery service for medication have been brilliant.'

Others talked about how their local community worked to support them by sharing accurate information.

'An excellent community association in our part of the city kept us informed on a daily basis about everything that was happening. It's so impressive how local groups are able to do this.'

Nearly two in three people said they or someone they cared for was at risk of serious illness from Covid-19.

Who people turned to for help

95 people told us they asked for help from the county or a local district hub. These were set up to help people who were shielding or self-isolating during the pandemic.

People mostly needed help with food supplies, collecting prescriptions, someone to talk to and household tasks.

For those who did not get support from one of the county or local hubs, 501 people, more than half (293) turned to family and friends for support.

- ⇒ One in five (133) relied on shop deliveries for food with four telling us they got food parcels.
- ⇒ A small number (34) told us they got health or social care support.
- ⇒ 16 people, in addition to those getting help from the hubs, told us they relied on deliveries for medication.
- ⇒ One in ten of the people said they did their own shopping for food and other essential supplies.
- ⇒ Unfortunately, we heard from 15 people who didn't get the support that they needed.





Appreciation of health and care workers

Three out of four people who used a health service rated it highly and shared their accounts of what services had done to help them stay safe and get the care they needed. We also had feedback from people using care services.

Some people told us they were worried about telephone and online medical appointments, but found the experience worked well and helped keep them safe. We received many comments about how kind and caring staff were and what was done to reassure them and keep their treatment Covid-secure.

Hospital

'Peterborough City Hospital, thank you so much, have felt very safe, especially during visits to day unit at the Haematology and Oncology unit.'

'I got Covid and very nearly didn't come out. Keep doing what you are doing, you helped me and pulled me back and I'm very grateful that I'm here today, a very scary virus that effects people differently.'

'I had to go to Addenbrooke's for a bowel camera examination. The staff were all amazing. Brilliant.'

Maternity care

'I gave birth to my daughter...during the pandemic. The whole midwifery team have been amazing in such challenging times. They still managed to make me feel as if I was the only lady in their care and other than not being allowed any visitors, they really helped me forget what was going on around me!'

GP care

'My daughter had an eye infection. Extremely impressed with GP. She had a telephone appointment. We were sent a link to upload photos. GP phoned back with a diagnosis and sent prescription electronically to our chemist. Anxious about visiting surgery so this alleviated this.'

'I have had two telephone consultations with Wellside Surgery GP, examination with GP and follow up ultrasound all within the pandemic period. This was for a new medical problem and the care I have received throughout has been excellent and I have been treated with kindness.'

'I was worried about phone appointments with doctors at first as I was worried they wouldn't be able to diagnose me, but my worries were unfounded and they did a brilliant job helping me when I was sick.'

'Annual diabetes check for father was delayed but he got a call last week and has had a face to face visit to the nurse to do blood, weight, feet etc checks. Will have a telephone call from diabetic nurse when results come in. Appt went well & he had no problems.'

'Granta Medical Practice Shelford site was amazing when I had symptoms of Covid kept checking on me by phone and so reassuring. Thank you to all staff they are great!'

Care home

'We have been cared for by very special people. My 99-year-old mother lives in a care home and has received wonderful care.'

Community health care

'My husband has health care at home for his bi-weekly infusion for his blood disorder. The nurses were still able to come as normal. We are extremely grateful for this costly service to save my husband's life.'

'District Nurses have been wonderful - incredibly caring, as they always are but it's particularly appreciated at the moment when they're about the only people who come into the house.'

'My mother's live-in carers have cared for her very well, despite separation from their own families and worries about their welfare.'

Voluntary and community sector support

'My local blind society have been very supportive and keep in regular contact.'

Mental health

'CHUMS have been amazing, helping me deal with my son.'

Who we heard from

Our survey was completed by 1,131 people from across Cambridgeshire and Peterborough.

The highest number of responses came from our largest population areas - with 24% from Peterborough and 23% from Huntingdon. Just under 14% of responses came from South Cambridgeshire and 13% came from Cambridge. Just under 12% of responses came from people in Fenland and 10% from people in East Cambridgeshire.

We heard from people of all ages including 15 people under the age of 18. More than two in ten were between 19 and 44. Four in ten were between 45 and 64. Just over a three in ten were aged 65 or over. Three quarters (76%) of our respondents were women.

4% of people identified as Lesbian, Gay, Bisexual, Queer or Pansexual. Eight people identified as Transgender.

Most people who told us about their ethnicity identified as White British (88%). And just under one person in ten (8.4%) was from a Black, Asian or other minority ethnic community background.

Nearly half (48.5%) of people identified as Christian and one in 20 from different faiths including Muslim, Hindu, Buddhist and Jewish. More than a third (38.4%) did not have any religious belief.

Nearly half (48%) of people said they had a disability or long-term health condition.

Three in ten people said they had caring responsibilities for a family member.





Lessons for all

This report tells the stories of people's lives during the Covid pandemic. These experiences have been gathered together into themed sections. We have identified learning from each section, listed below.

We recommend that the organisations providing and organising health and social care take these learning points into account when planning and delivering services.

- 1.** Communication about changes to services and to people's treatment or care needs to be clear and given at the appropriate time.
- 2.** Increasing health inequalities is a significant concern, especially when people's needs have not been met under the Accessible Information Standard.
- 3.** Many services have used technology effectively to communicate with people. These initiatives need to be maintained and even increased to benefit more people, whilst finding other solutions for people who cannot manage remote consultations.
- 4.** There is a real danger that digital exclusion for those who lack the confidence, skills, internet connection or equipment to get online, will increase health inequalities.
- 5.** Technology has helped people keep in touch where they could not visit in person. It would be good to see measures in place so that in the future no family is left unaware how their loved one is progressing.

- 6.** Voluntary organisations and community groups continued to provide essential support to people even though they were experiencing huge challenges in doing this. And people have also found local community and neighbour support invaluable.
- 7.** Much has been learnt during this time with new ways of working between health and care services, voluntary organisations and councils, all of whom have had to react quickly to support people. This learning needs to be incorporated in order to strengthen community networks and the way we care for our local people.
- 8.** There is potential to improve how people look after their own long-term conditions by co-producing more self-care information and support systems. This means getting people with experience of services involved in developing patient and service user information.
- 9.** The impact of the disruption to services has meant that families with children or family members who have additional needs have found living during the pandemic even harder.
- 10.** The impact of isolation, particularly for new families, needs to be well understood and responded to in the future.



Our next steps

These are the things our Healthwatch will do.

- 1.** We will share the findings in this report with the providers and commissioners of health and social care. And look to see how the learning is taken account in planning and delivery of services.
- 2.** We will work with local experts and the public to improve the quality of conversations regarding their health and care decisions now and in the future.
- 3.** We continue to collect people's feedback about using health and social care services. And will be launching the joint Healthwatch and Care Quality Commission #BecauseWeAllCare campaign locally to find out more about people's experiences of services as the pandemic progresses.
- 4.** In particular, we will be listening to people's experiences of:
 - ⇒ Young people's mental health services
 - ⇒ NHS Dentistry
 - ⇒ Autism services
- 5.** We note the report published on 1 October 2020 following the Parliamentary Health and Social Care Committee inquiry. We will look at the conclusions and recommendations and see how these are responded to at a local level ²

² <https://committees.parliament.uk/committee/81/health-and-social-care-committee/news/119677/mps-say-compelling-case-for-weekly-testing-of-nhs-staff-to-stop-nhs-becoming-a-covidonly-service-in-second-wave/>



How your experiences are helping

Our local health commissioners, the people who plan and pay for most health and social care services in Cambridgeshire and Peterborough, have welcomed your feedback.

Here are some responses to our three Covid briefings published during the summer:

'I would like to sincerely thank Healthwatch for this vital survey work. It is so important that service providers, such as Cambridgeshire County Council and Peterborough City Council, design and deliver services that meet the real needs of our residents, and this survey's results gives us some powerful insights to respond better.'

'This has never been more relevant than now, as we continue to deal with the pandemic and the impacts it is having on communities. One notable point from the survey is the importance of people having good digital connectivity, and the skills to use it, in order to access information and seek help and support, and this is something that we are already working on with colleagues from across the public sector.'

**Adrian Chapman, Service Director: Communities and Partnerships
Peterborough City Council and Cambridgeshire County Council**

'The latest Healthwatch report has helped us, as commissioners of local healthcare services, to better understand people's experiences of healthcare during the COVID-19 pandemic. These insights help us to plan for the future, during the recovery from the first peak of COVID-19 and beyond.'

**Carol Anderson, Chief Nurse
Cambridgeshire and Peterborough Clinical Commissioning Group**

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Registered Community Interest Company No: 08516179

Registered address: 6 Oak Drive, Huntingdon, PE29 7HN

Contact us

The Maple Centre
6 Oak Drive
Huntingdon
PE29 7HN

 0330 355 1285 or text 0752 0635 176

 enquiries@healthwatchcambspboro.co.uk

 www.healthwatchcambridgeshire.co.uk

 www.healthwatchpeterborough.co.uk

