



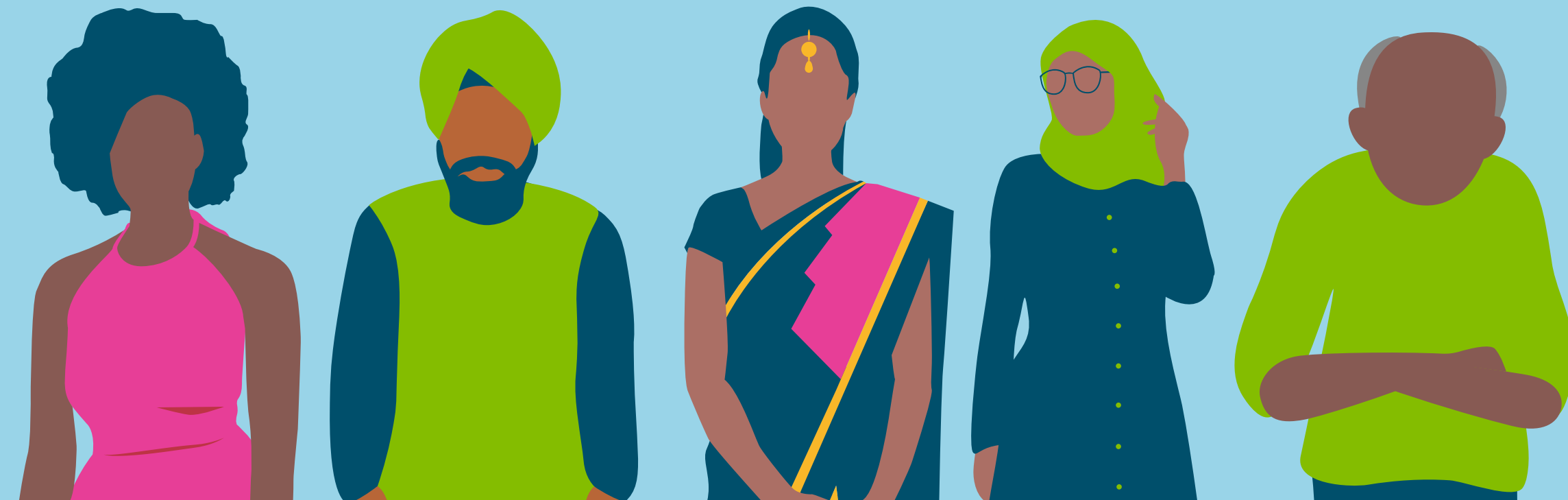
healthwatch

Tower Hamlets

Community Insights

A look at the health and wellbeing of our local communities pre and post Covid-19.

Black, Asian, Minority Ethnic Communities

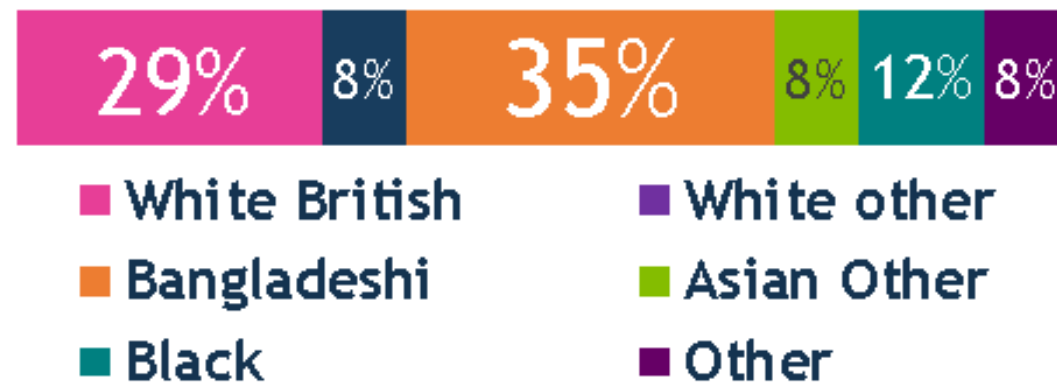




About this project

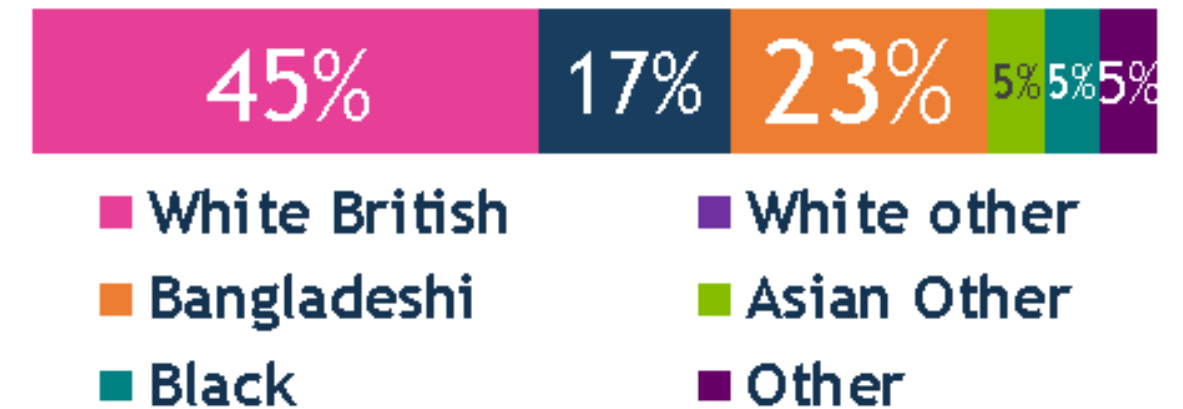
Neighbourhood conversation

In December 2019, we asked local people what makes their neighbourhood a good place to live and how we can support them to live healthier lives. They took part in structured interviews at four locality events in local libraries on the main market days in the area.



COVID-19 engagement

Between March and June 2020, we created a survey to engage with local people on how they stayed healthy and well during the Covid-19 pandemic and their experience with services. It was carried out online and by telephone.





About this project

Mental health conversation

Between February and April 2020, we carried out in-depth interviews and focus groups with people who told us that they are living with a mental health condition.

They told us about their experience of mental health services, as well as about the cultural and spiritual practices they engage with to improve their mental well-being.



Chinese and Vietnamese engagement

In October 2019, we carried out an engagement event with members of the Chinese and Vietnamese community in Tower Hamlets.

We facilitated discussions in small groups, that were then fed back into a larger group discussion, as part of a panel with local stakeholders.





What we have learned



BAME residents we spoke to in December 2019 had a somewhat poorer experience of health and social care services than White British residents; with many reporting long waiting times to access care.



People of Black ethnicities were more likely to be digitally excluded. This may have impacted their experience of accessing health and social care, as well as other services, during the Covid-19 pandemic.



People who speak limited English face systemic complex barriers to accessing GP and other healthcare services. Interpreters are not always available, particularly at short notice.

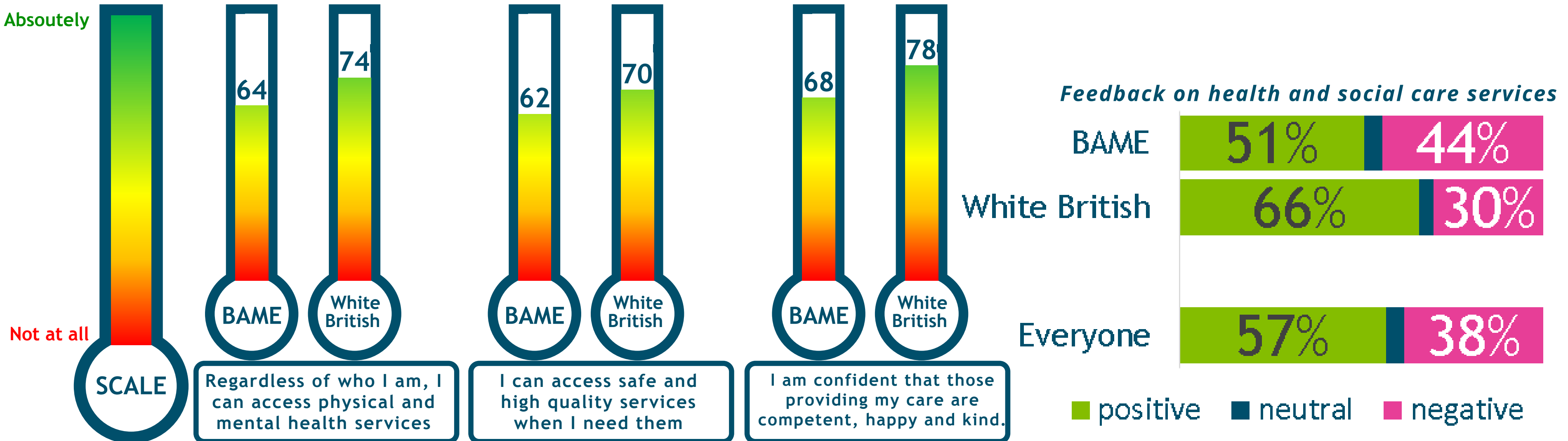


Booking and triage systems in GP surgeries that rely on online symptom checkers, online booking and doctor-led telephone callback triage may increase efficiency and patient satisfaction overall, but they are challenging for patients with a low level of English.



In December 2019, we asked local people to give us feedback on any health and social care services they used.

Overall, the 132 BAME people had a more negative experience of health and social care services than White British people.





What local people are saying

Many of the issues faced by BAME people were not dissimilar from those experienced by the whole population, such as long waiting times for GP appointments and communication issues.



The doctors here are very good and nice. They treat me well, but I feel they need to see my wife in person. She has various issues and should be seen by a doctor rather than having a telephone consultation.

Bangladeshi resident.

The Royal London Hospital used to be good in 2016. I went recently and they were very rude. They are under more pressure because the population has grown and they still have the same staff.

Bangladeshi resident.

The Community Mental Health Team are good, they listen to you, they take notice of you and your illness. Sometimes good, sometimes bad, but you wait for three hours to be seen.

Indian resident.

I've been to the Royal London Hospital with my child. He waited for too long and they didn't take anything seriously.

Bangladeshi resident.

It's very hard to get a GP appointment. I waited for one for two months.

Black Caribbean resident.

I was kept for two weeks in bed until they could sort out my operation.

Black British resident.

My dentist kept me a long time waiting. They're busy all the time.

Bangladeshi resident.

I ended-up needing to have a knee surgery because I spent too long waiting for treatment on the NHS.

Bangladeshi resident.

I had my baby at home and never followed up properly. I missed an appointment at the hospital because I had a cold and couldn't get there.

Somali resident.

I got a referral from the Royal London to St Bart's. My appointment is at 9:30, but it's too far and I don't have much support.

Indian resident.





The language barrier



In some GP surgeries, patients are triaged by the duty doctor via telephone before being offered in-person consultations if needed; normally on the same day they call for an appointment. In the Covid-19 pandemic, an increased number of GP surgeries have adopted this model.

This can be challenging for patients who speak limited English.

Patients may struggle to understand that they need to call at specific times in the morning to be placed on the triage list.

They reach the conclusion that the GP surgery is always too busy and that they can never get an appointment.

Scenario based on discussions with Chinese and Vietnamese residents October 2019 and mental health conversation 2020.



The duty doctor normally calls on the same day. Patients are not told a specific time when the call is due.

Interpreters may not be available on short notice.

For translation, patients depend on family members, who may not live with them or be available with no notice.

The language barrier

Even when they do have access to an interpreter (professional or family), people who speak limited English can face challenges.



Patients who use interpreters are given the same time slots as those fluent in English. As interpreting itself takes time, patients have effectively less time with their doctor. As a combined result of time pressure and cultural barriers, patients may find it harder to communicate with doctors.



Family members find needing to act as on-call informal interpreters stressful.

Patients may feel reluctant discussing sensitive topics such as sexual or mental health in front of family members or people they know acting as interpreters.



Digital exclusion

Between March and July 2020, we have engaged with local people on the impact of the Covid-19 lockdown.



People of Black ethnicities were more likely to be digitally excluded (either through low IT literacy or lack of access to devices).

Digitally excluded people

- Had a poorer experience of GP services during lockdown.
- Felt less empowered to look after their health and wellbeing in the pandemic.
- Found it harder to stay informed about the pandemic.

Increased reliance on telemedicine and online systems may improve access and efficiency overall, but also widen the experience gap.

How do we ensure access to services is fair and equal?



Obstacles to accessing care

What local people are saying

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An issue we face is a lack of clarity and understanding of certain terms and concepts that may be taken for granted by clinical staff, for example, one woman shared that she didn't fully understand what 'hospice' meant and entailed- and she based decisions and her emotional response on this lack of understanding.

Group feedback- Chinese and Vietnamese event.

Accessing preventative and/or emergency care, for example, 'same-day-appointments' at the GP become less accessible, because they may not fully understand why they have to call back in the afternoon, even though they're on the phone with reception in the morning, and then when there aren't afternoon appointments available, they're told to call back the next day, when they probably should be having a conversation about the level of emergency they're experiencing - they cannot have a nuanced conversation about their current state and what the best move for them is. The same for when they are able to speak to the doctor over the phone, their level of English is limiting.

Group feedback- Chinese and Vietnamese event.

*I had to make a GP appointment for my mum a few days ago - it takes forever for them to pick up the phone and when they do they tell you to book online. I have the online details for my mum, dad and youngest brother. My dad still calls for himself and my mum still calls for my youngest brother, but she now just asks me to make her appointments. I then had to cancel it and do it again yesterday. I hate that GPs are moving everything online in a community where lots of people don't speak English - when things go wrong they have to rely on their kids- its just more life admin for me. Everyone else's s**t on top of my s**t.'*

Bangladeshi respondent.

