

Shielding report: experiences and views of people in Devon

Feedback
Report

November
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Introduction

Healthwatch in Devon, Plymouth and Torbay are the independent consumer champion for people using health and care services in Devon. Healthwatch listens to what people like about services and what could be improved and shares those views with those who have the power to make change happen.

This report will cover what local people told us about their experiences of shielding during the Covid-19 lockdown.

Background

Shielding was a policy designed to protect clinically vulnerable people during the Covid-19 pandemic; this included organ transplant recipients, people with severe respiratory conditions and certain types of cancer, and people with compromised or suppressed immune systems.

The guidance, first published by the UK government on 21st March 2020, advised people at the highest risk of death or severe illness due to Covid-19 to stay at home, avoid face-to-face contact, and practice social distancing with people within their household. The guidance was relaxed throughout June and July before being paused on 1st August, with vulnerable people subsequently allowed to leave the house for shopping, work, exercise, or education, if strict social distancing is observed.



Methodology

We created a survey consisting of 13 multiple-choice questions and 12 open-ended questions that allowed respondents to share their experiences of shielding. Due to concerns about the spread of Covid-19, in-person engagement events were not held, and the survey was promoted entirely online.

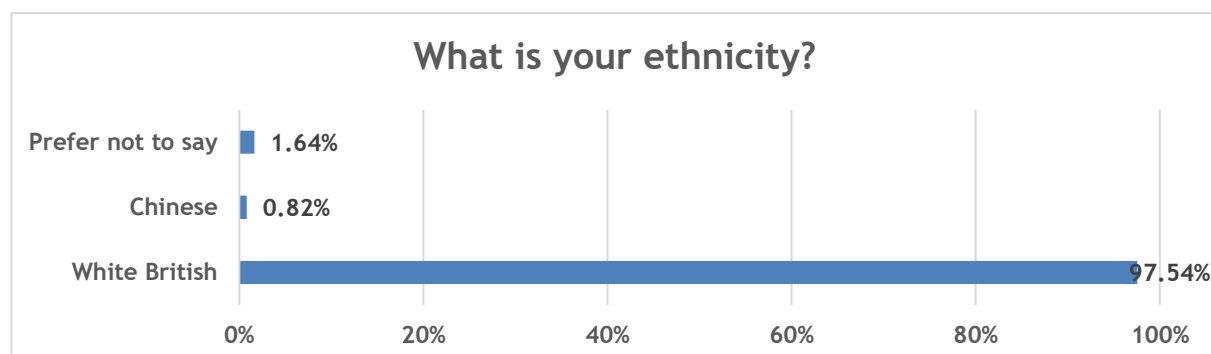
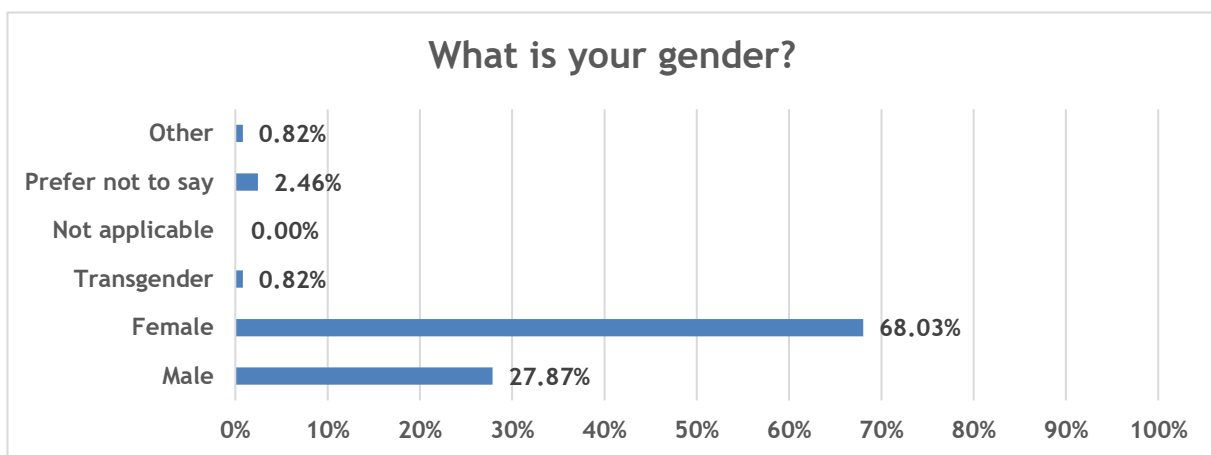
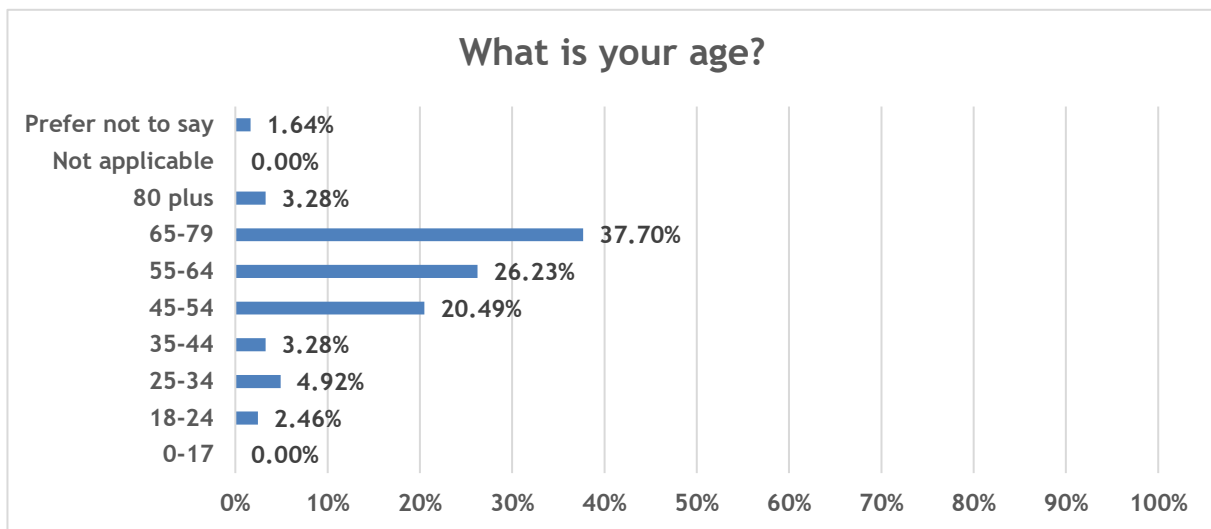
The Healthwatch Devon, Plymouth, and Torbay Facebook pages have a combined 2,345 likes and 2,777 followers and the Twitter pages have a combined 9,079 followers. 69 Facebook posts and 75 Twitter posts were used to publicise the survey between 4 August and 10 September; the posts had a combined reach of 82,918 and received 802 engagements (including link clicks, shares, and likes).

The survey was featured as a news item on the Healthwatch Devon, Plymouth, and Torbay websites, receiving a total of 264 unique page views. Healthwatch Devon, Plymouth, and Torbay also featured a link to the survey in their weekly e-newsletters, which have over 2,000 subscribers.



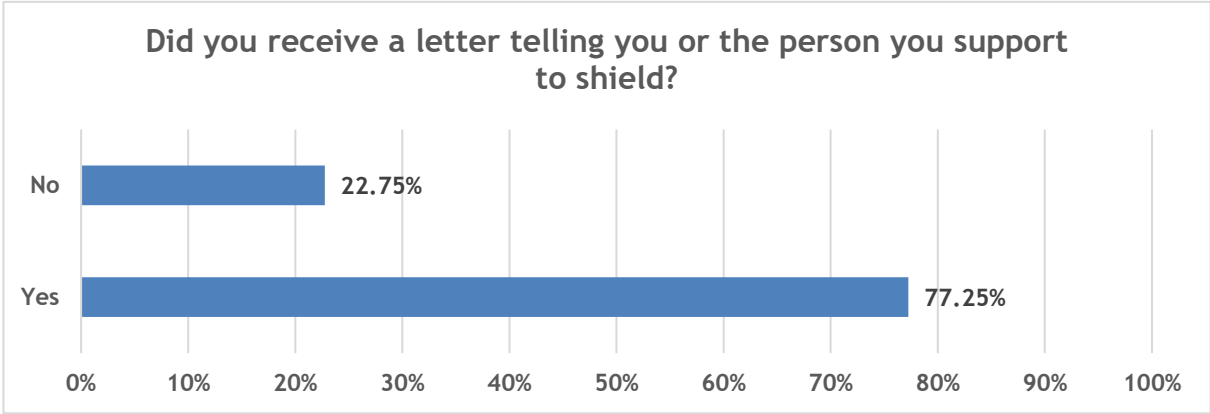
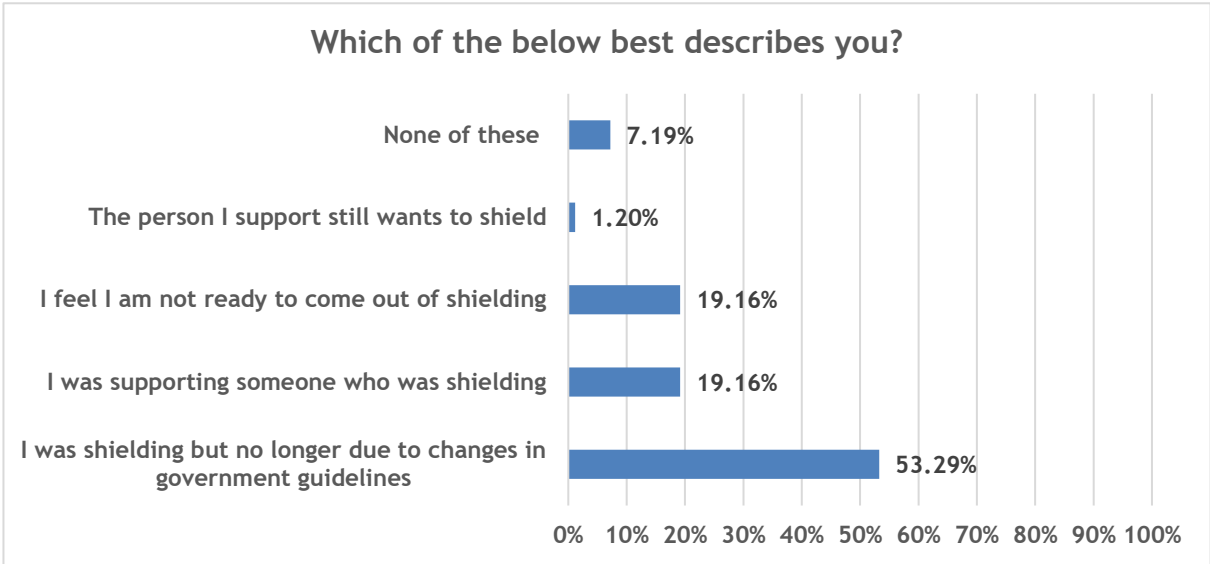
Who we spoke to

170 people filled out the survey between 4 August and 20th September 2020. Over half of the respondents (54.17% or 65 people) lived in the Torbay area, 12.50% (15 people) lived in Plymouth, and a third (33.33% or 40 people) lived in other areas of Devon. 68.03% of respondents (83 people) were female, 97.54% (119 people) were White British, and 67.21% (82 people) were aged 55 or above.





Most of the respondents (53.29% or 89 people) said that they had been shielding but were no longer, due to changes in government guidelines. 19.16% (32 people) said they did not feel ready to come out of shielding, and 19.16% said they supported someone who had been shielding. 77.25% of respondents (129 people) received a letter telling them (or the person they support) to shield and 22.75% (38 people) did not.





Key Findings

Analysis of the survey results identified the following concerns:

- ***Effect on quality of life:*** many respondents struggled with social isolation and loneliness while shielding, which had a negative impact on their mental health. People who had more positive experiences mentioned that social support and virtual contact helped them. Being able to see family and friends after restrictions eased had a positive impact on shielders' mental health.
- ***Using services:*** Many respondents had negative experiences with supermarket delivery and food parcels; several struggled to get delivery slots or said food parcels were inadequate or inappropriate. Mentions of medication delivery and collection were nearly all positive. Some respondents mentioned positive experiences with volunteers and community groups. Some respondents had trouble accessing their usual health and care services, such as blood tests or dental care.
- ***Communication about shielding could be improved:*** nearly a third of respondents said they had not enough or none of the information they needed to help them make decisions about shielding. Over a third of respondents said that none or only some of the information they received about shielding was clear. Additionally, more than half of respondents said they were not aware of new measures put in place to help shielders feel more confident in public.
- ***Concerns about the future:*** many respondents mentioned being anxious or nervous about going out in public after shielding ended. A large majority of respondents said they were concerned or somewhat concerned about the approaching winter.



What people told us

Using services during shielding

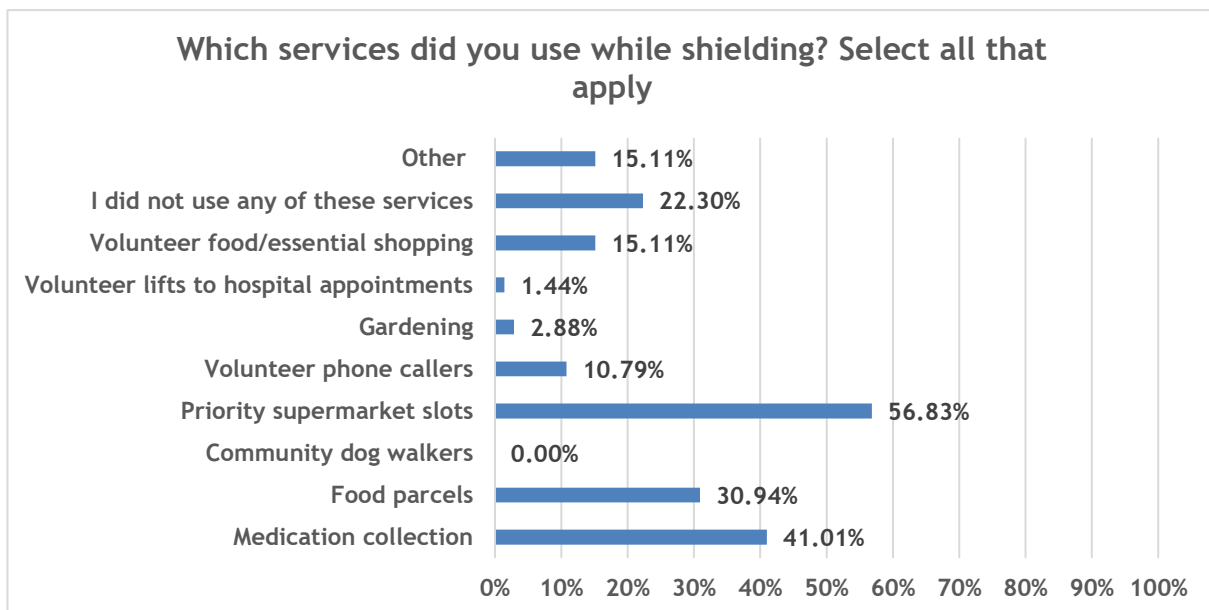
Over half of respondents (56.83% or 79 people) used priority supermarket slots.

41.01% (57 people) used medication collection, 30.94% (43 people) used food parcels, and 24.46% (34 people) used volunteer services for food and essential shopping, phone calls, and lifts to hospital appointments.

22.30% (31 people) said they had not used any services.

A handful of respondents said they didn't receive support or that it was unclear what support was available to them.

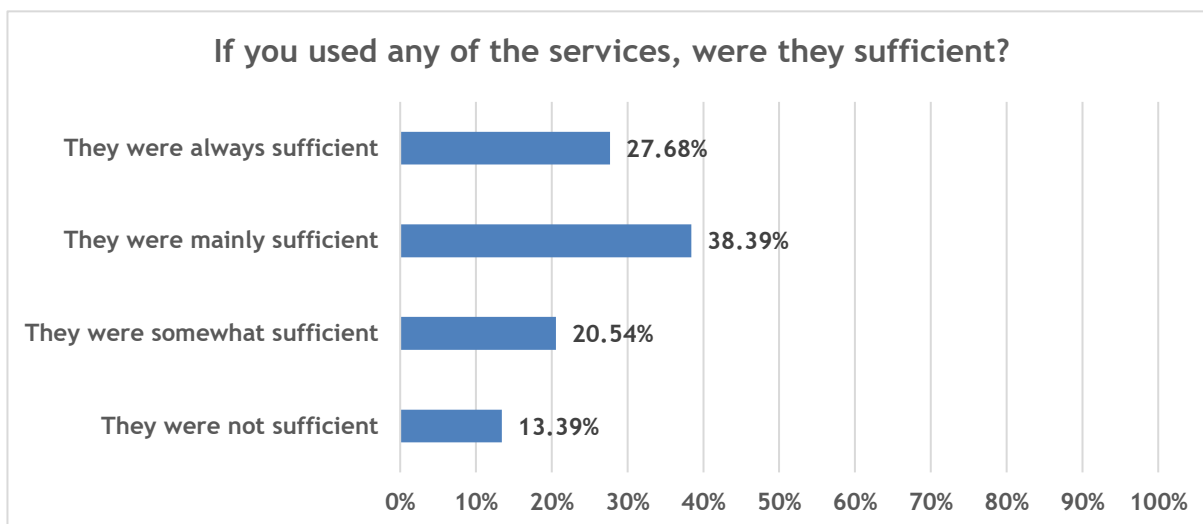
- *“Food parcels would have been great, but my dietary requirements meant I couldn't eat most of it”*





Nearly two-thirds of respondents (66.07% or 74 people) said that the services they used were always or mainly sufficient.

When asked to give more detail, many respondents had issues with food and groceries; for example, not being able to book a supermarket delivery slot, or receiving food parcels that did not meet dietary requirements, had an inappropriate quantity of food, or lacked variety. Responses that mentioned volunteer support or medication delivery and collection were nearly all positive.



When asked if anything could have been done better to prepare or support them for shielding, many respondents said they would have liked better communication.

For example, some respondents said the letter advising them to shield arrived late, and some felt that the government guidance was unclear.

A handful of respondents said they would have liked to have someone checking in on them.

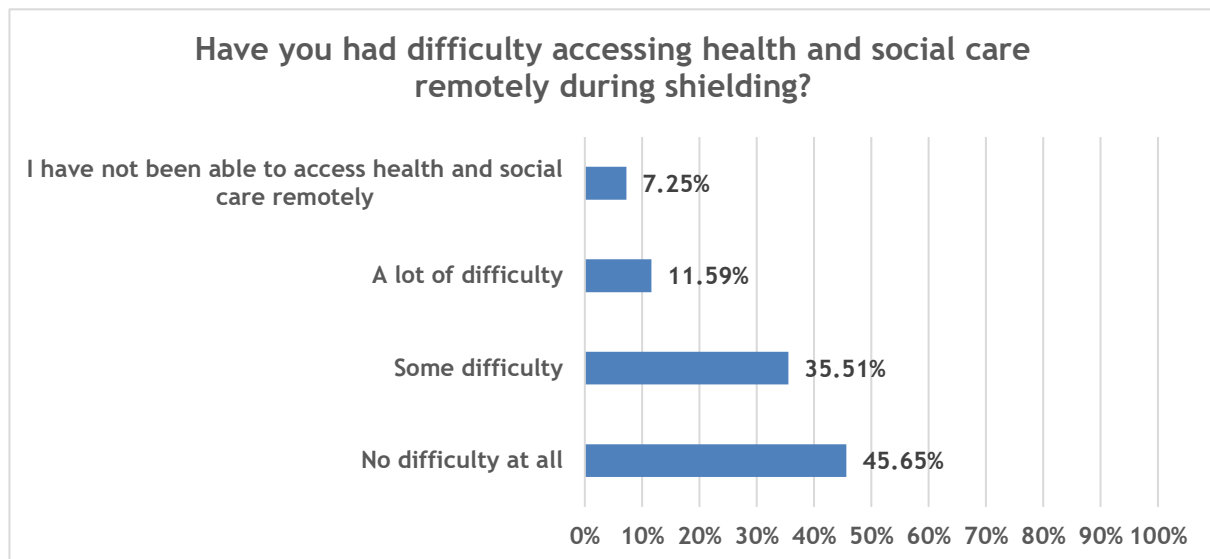
- *“I think I could have been informed of my status earlier in lockdown. I was notified a month into lockdown.”*
- *“In the same week I received a letter to say I could stop shielding, in another I was told I must not stop shielding.”*
- *“It would have been nice for someone to call and ask if I was okay.”*



81.16% of respondents (108 people) said they'd had some or no difficulty accessing health and social care remotely during shielding, while 18.84% (26 people) said they'd had a lot of difficulty or been unable to access services at all. (see graph at top of next page)

Some of those who had difficulty accessing services said they had problems contacting and communicating with their GP surgeries, and some said that they had technical or social difficulties with virtual appointments.

- *“Telephone consultations when you are autistic are challenging.”*
- *“My local surgery has provided good telephone support, but I could really do with real time contact at the moment.”*
- *“To fully engage with online prescription ordering I have to supply a mobile phone number which I do not have. To stand a chance of seeing a doctor I have to e-consult first... I feel vulnerable and unsupported in a way that I never have before.”*

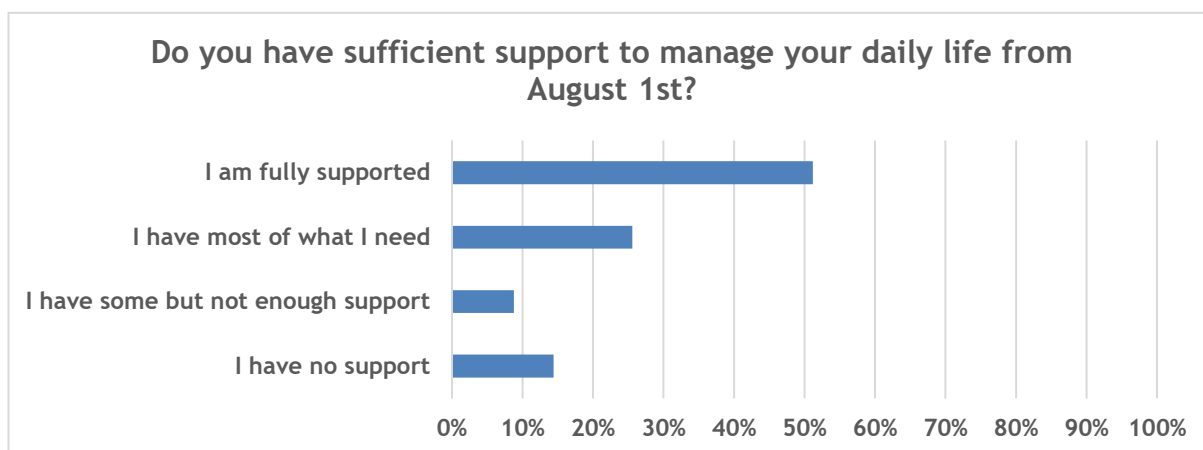




76.80% of respondents (96 people) said they had most or all of the support they needed to manage their daily life after 1st August, while 23.20% of respondents (29 people) said they had not enough or no support.

When asked what support was missing, respondents said they would like support obtaining delivery slots, returning to the workplace, and accessing health and care services.

- *“I have received no support about going back to work.”*



Quality of life

When asked how shielding affected their quality of life, a large number of respondents said that they felt lonely, and that the social isolation had a negative impact on their mental health.

Respondents said they felt anxious, depressed, bored, and fearful. Several respondents said that shielding impacted their physical health.

Those who had positive experiences of shielding said that the support of family and friends, the ability to access outdoor spaces, and being able to communicate virtually helped them.

- *“It has made my existing health conditions worse.”*
- *“Loneliness was the biggest problem because I live alone and no family live near me.”*
- *“Loneliness is the main problem, and boredom, so I’m constantly fighting depression.”*
- *“Being contained in four rooms with no garden has made me put on weight. I became more unhealthy sitting for more time during the day.”*

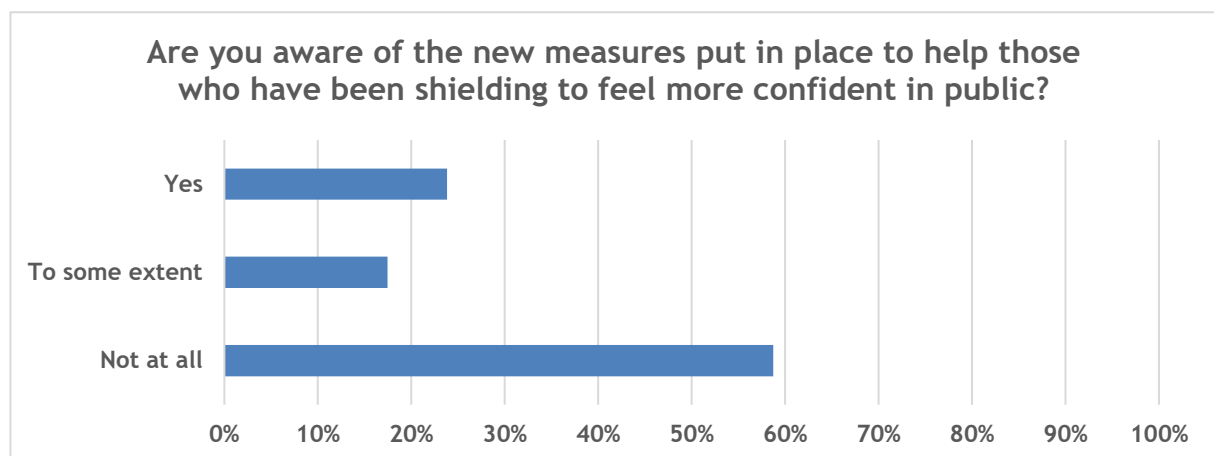
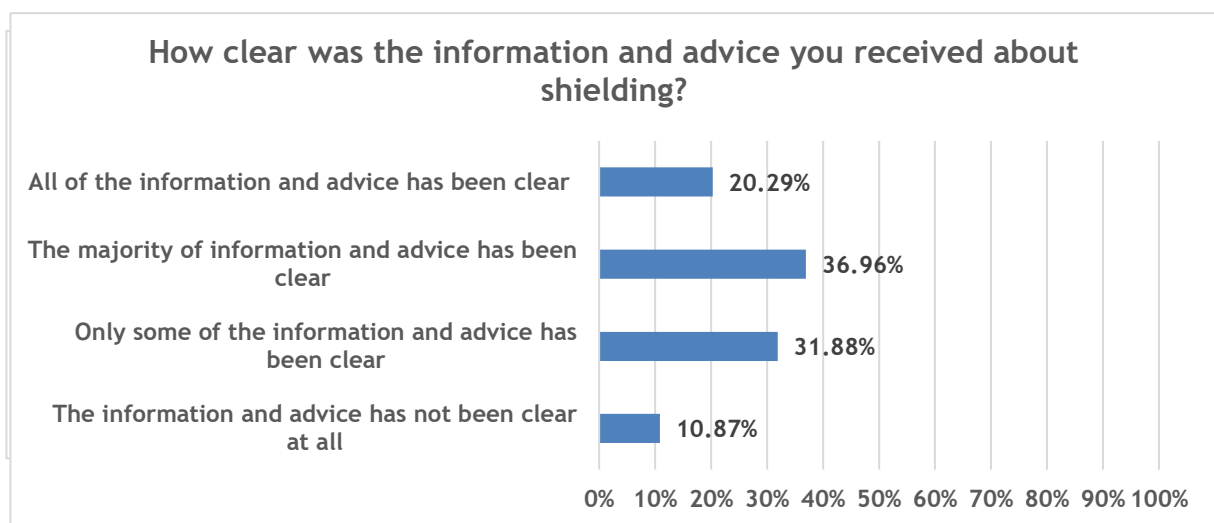


Communication

70.08% of respondents (96 people) said they had all or most of the information they needed to help them make decisions about shielding, while 29.93% of respondents (41 people) said they had not enough or no information.

57.25% of respondents (79 people) said all or most of the information they received about shielding had been clear, while 42.75% of respondents (63 people) said none or only some of the information had been clear.

23.81% of respondents (30 people) said they were aware of new measures to support shielders to feel more confident when out in public. 17.46% of respondents (22 people) said they were aware to some extent, and 58.73% (74 people) said they were not aware at all.





Going out after shielding

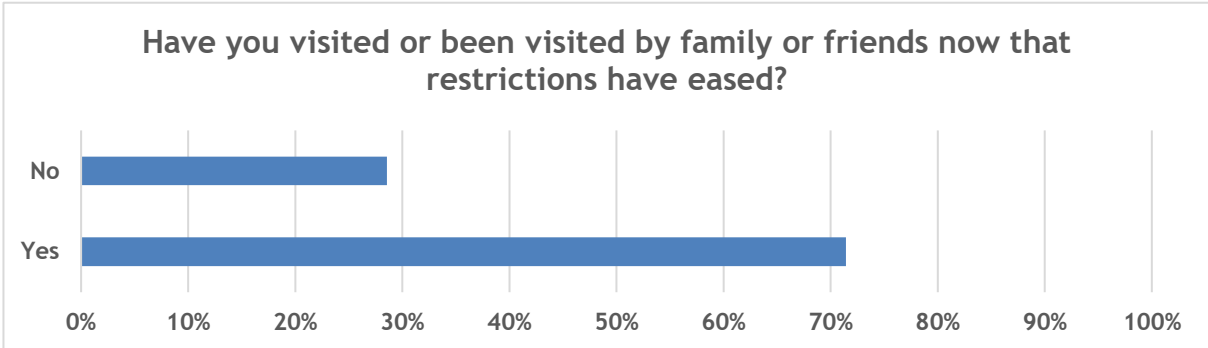
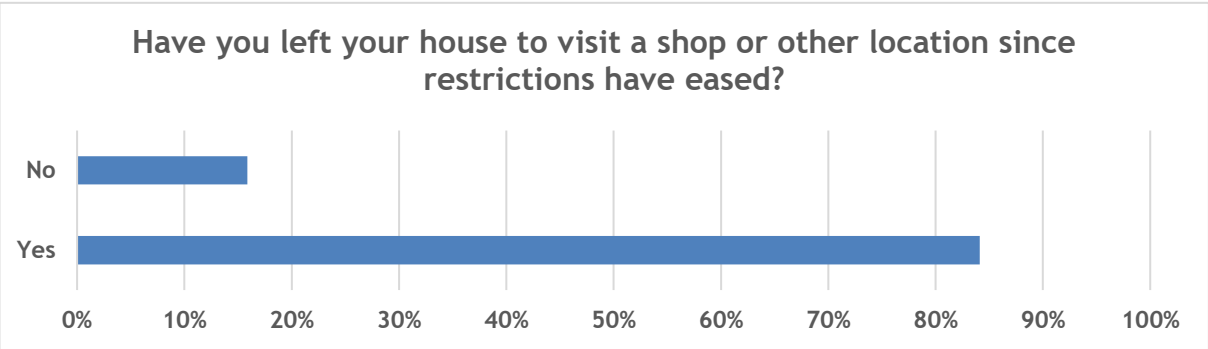
84.13% of respondents (106 people) said they had visited a shop, gym, salon, or similar location since restrictions had eased, and 71.43% of respondents (90 people) said they had visited or been visited by friends or family.

Many respondents said they were anxious, fearful, or uncomfortable about when they first started going out, with several respondents concerned about others not observing social distancing or mask-wearing guidelines.

Respondents who visited or were visited by friends and family said they were cautious to observe social distancing guidelines, like meeting outside, but many said the experience was positive or beneficial for their mental health.

When asked if anything could be done to support those who had not been out, several said that they would feel more comfortable if the public were more compliant with social distancing guidelines, and a number of respondents said they would not feel comfortable meeting until there was a vaccine.

- *“I met a work colleague, socially distanced in her garden. It was good to have a conversation face to face, albeit two metres away.”*
- *“We have visited outside and observed a reasonable distance. I needed to be with people as my lockdown was solitary and I was getting depressed.”*





64.41% of those who had attended GP or hospital appointments travelled using their own car (76 people), 10.17% (12 people) walked, 10.17% (12 people) travelled by taxi, 6.78% (8 people) got a lift from a friend or volunteer, and 2.54% (3 people) used public transport.

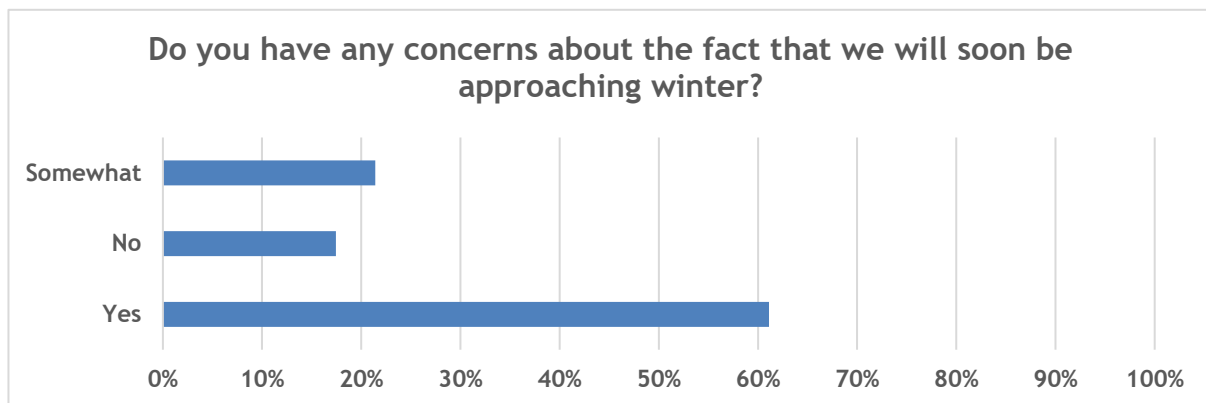
When asked if they had any difficulty travelling to appointments, the handful of respondents who answered said they relied on family support, and some said they struggled due to the long distances they had to travel for their appointment.

Going into winter

82.54% of respondents (104 people) said they were concerned or somewhat concerned about the approaching winter.

When asked to provide more detail, respondents' main concerns were about the prospect of a second lockdown and having to shield again and the prevalence of other winter illnesses (like flu).

- “[I have] concerns that the usual winter flu, added to rising Covid numbers will mean more shielding and pressure on the NHS.”





Considerations/Observations

Shopping for food and essentials was a problem or concern for many people shielding. If shielding is resumed, there should be better support for people who are unable to get grocery delivery slots, like ensuring that food parcels are appropriate and adequate.

Many people shielding struggled with anxiety, loneliness, social isolation, and poor mental health; greater awareness and accessibility of community mental health support could alleviate this if shielding were resumed. Several respondents said it would have been beneficial to have someone 'checking in' on them.

There could be better community support to help people with the use of virtual and online resources; this could make remote health and social care more accessible, or reduce isolation among people who cannot see their friends and family in person.

People who were shielding were positive about medication collection and delivery, with pharmacies and volunteers working well to ensure that patients received their prescriptions. This should be maintained if shielding is resumed.

Communication with people who were shielding could be improved; some people did not receive their shielding letter and were unable to access some services as a result. Some people shielding said they were unaware of what measures and services were available to them and felt that the communications they had received about shielding were unclear or contradictory.



Next steps

As the situation with the COVID-19 pandemic remains fluid with national guidance changing to meet the circumstances we find ourselves in, Healthwatch will continue to monitor public feedback through our contact channels, social media, local and national news to identify themes and issues being raised by the public. Where themes start to develop, we will ensure that the relevant Local Authority Public Health Team and/or NHS Devon Clinical Commissioning Group are made aware of the themes so that appropriate action can be considered where necessary.

Where appropriate Healthwatch will engage the public to provide further evidence around emerging themes, noting the potential time to undertake this engagement against the urgency of the issues being raised.

Healthwatch will also continue to repost, retweet, and publish Local Authority COVID-19 news and statements via our networks to ensure consistency of messaging to the public be it in Devon, Plymouth, or Torbay.

As the situation with COVID-19 develops and noting the current statements by Government and reports in the National media around potential vaccines, there will be a time in the future where a more considered and co-ordinated approach with Local Authorities and NHS Devon CCG around gathering evidence of peoples experiences during the pandemic can be done to provide not only a reflection, but to highlight areas where 'responses could have been better' to help develop plans for the future. Healthwatch Devon, Plymouth & Torbay will look to work with Local Authorities and NHS Devon CCG in this engagement process.

Thank you



Thank you

Healthwatch in Devon, Plymouth, and Torbay would like to thank everyone that took the time to share their views and experiences through the survey.

Contact us

healthwatch Torbay

Room 17
Paignton Library
Great Western Road
Paignton
TQ4 5AG

www.healthwatchtorbay.org.uk
t: 08000 520 029 (Freephone)
e: info@healthwatchtorbay.org.uk
tw: @HWTorbay
fb: facebook.com/HealthwatchTorbay
Registered Charity No: 1153450

healthwatch Devon

Follaton House
Plymouth Road
Totnes
TQ9 5NE

www.healthwatchdevon.co.uk
t: 0800 520 0640 (Freephone)
e: info@healthwatchdevon.co.uk
tw: @HwDevon
fb: facebook.com/healthwatchdevon

healthwatch Plymouth

Jan Cutting Healthy Living Centre
Scott Business Park
Beacon Park Road
Plymouth
PL2 2PQ

www.healthwatchplymouth.co.uk
t: 0800 520 0640 (Freephone)
e: info@healthwatchplymouth.co.uk
tw: @HealthwatchPlym
fb: facebook.com/HealthwatchPlymouth