



# Insight Report

## Exploring the local impact of the COVID-19 pandemic

A focus group with Church Street Library English Speaking  
Group



**Learning from**

**local experiences**

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# Introduction

Since the beginning of the COVID-19 pandemic, Healthwatch Central West London (HWCWL) has been working to reach people in Westminster and Kensington & Chelsea who are under-represented in conversations about health and social care. Through our Small Grant Programme, we have been working with local organisations to conduct focus groups, surveys, and interviews, with local people, to hear about their experiences of accessing health and social care services during this period.

In this report, HWCWL shares the main themes from one focus group. This was held in December 2020 with seven members of the Church Street Library English Speaking Group, a local community group in the City of Westminster. The group provides help, guidance and classes for people who have English as an additional language or who do not speak English.

This report is our latest document sharing local experiences of the COVID-19 pandemic, and it is the fourth detailing conversations on key issues. The questions for this session were adapted from a survey produced by Healthwatch Central West London. Some of the case study quotes in this document have been edited for clarity but have been approved by the participants who shared these views.

Our first three publications in this series are available to view at [www.healthwatchcwl.co.uk](http://www.healthwatchcwl.co.uk)

## Healthwatch Central West London

Healthwatch Central West London is an independent organisation for people who use health and social care services. We deliver the statutory Healthwatch projects in Kensington & Chelsea and Westminster. Through our research and local engagement, we make sure that local people's views are always at the centre of decision making about health and social care.

## We make this happen by

- Listening to what people like about services and what could be improved
- Monitoring how changes in the health care system affect local people
- Helping to improve the quality of services by letting those commissioning, running, and making decisions about services know what people want from care

# Methodology

Our focus groups bring people with similar backgrounds or common experiences together to discuss specific topics of interest. This is a form of qualitative research.

We ask group members about their lived experiences. This could relate to using particular services or living with a particular health condition. We base our questions on what people have already told us through our local engagement on health and care services, or from what we have been told through our surveys.

Listening to what people tell us (the content), helps us see the breadth of their experiences. Noticing how they talk about their experiences (emotive language, for example), helps us to understand more about why people make the choices they make, what they think about the support they receive, and where there might be gaps. It can help us to understand common themes in their experiences or to identify exceptions that might otherwise be missed.

This helps organisations that commission or provide services, such as the NHS or local councils, to better plan, design and run quality services that meet the needs of local people.

## Themes

From the questions relating to the participants' experiences of COVID-19, we have identified some key themes.

Most of these were related to the United Kingdom's vaccination programme, information and communication, services, and the measures implemented in response to the pandemic.

**Concerns about**

**COVID-19 vaccinations**



## Wariness over the safety of the vaccine

This focus group took place in mid-December 2020, just as national attention was turning towards whether the efficacy of COVID-19 vaccines could be trusted. Much of the news coverage at the time focused on the speed with which COVID-19 vaccines were developed.

Some participants expressed wariness over the safety of COVID-19 vaccines. They told us they were worried the vaccines were unsafe because they had been developed so quickly. Other people expressed unease that the Government might make vaccination compulsory.

### What was said...

I used to work as nurse and I am scared of the effectiveness of the vaccine due to it being released short-term.

Can we opt out of it? Is it compulsory?

## Prevalence of misinformation

Participants told us they had seen a large amount of misinformation around both the safety of the vaccine and of wider measures relating to the COVID-19 pandemic. People told us they had seen misinformation about the ingredients of the vaccine and its safety. Participants told us this information was mostly shared on social media and messaging platforms, like Twitter or Whatsapp.

## What was said...

It was easy to get tested but there was misinformation regarding the testing kit.

There have been lots of antivaccine misinformation sent via social media. As long as we are reassured about the ingredients of the vaccine, we will feel more informed to make a decision.

## Trust in the National Health Service (NHS) as a source of information

After discussing the prevalence of misinformation, we asked the participants what sources of information they trust. We wanted to know how participants would like to be told information about the COVID-19 vaccine programme, and where they get their trusted information from.

Many participants told us that NHS resources were the source of information they trust the most. People told us they would prefer to receive information on COVID-19 vaccines from their GP or another healthcare practitioner. One participant told us they double check all information they see on the news with the NHS website.

Participants also told us that faith organisations play an important part in relaying information.



I would like to be told about the vaccine through my GP, the same as for the flu jab. They know who is more vulnerable and have this medical information.

I get information from the NHS website as we trust this website more. We double check any information from the news using the NHS website.

There are so many misconceptions about vaccines. GPs are important to relay information as a recognised authority that we trust. Faith organisations are very important to consult regarding the ingredients of the vaccines, or religious reasons for not taking it. Misconceptions need to be clarified.

**Local experiences of  
the COVID-19 pandemic**



## Importance of community groups and spaces

Participants stressed the importance of community groups and spaces during this period. People told us about the positive impact of community groups they attended, in person or virtually, since the pandemic began. They told us that community groups helped them to combat loneliness and provided a space for them to discuss important issues. People also praised Mahbuba, who organises the Church Street Library English Speaking Group.

### What was said...

I am volunteering at charity shops and the lockdown has made me miss the social contact. I feel more awkward now.

Meeting each other online allowed us to discuss the medical terms/jargon and break it down. We watched videos or discussed terms together, as well as current issues.

I am pleased with everything Mahbuba did for us. I really appreciate the online classes she sorted for our community.

I missed human contact. After a while looking at a screen for hours was difficult, but it was better than not seeing people at all.

## Positive experiences of using health services during this period

Participants told us about their positive experiences of using health services during the pandemic. They told us about the kindness and responsiveness of staff they met, the ease with which they used services, and the speed with which they were seen.

### What was said...

I talked to my GP on the phone. I had a hospital visit which was cancelled, but a specialist doctor called me instead.

I had a positive experience with my GP at Grand Union Health Centre. I got to see doctors immediately and I had around 3-4 appointments during lockdown.

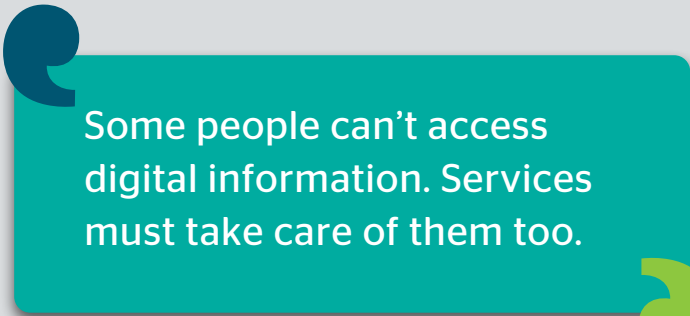
I was pregnant and gave birth during the pandemic, at St Mary's Hospital. The staff were great and kept me comfortable the whole time. I also had consultations and home visits.

On the first day of lockdown, I was referred to a specialist. Health care staff were very kind.

## Accessibility of services

Across our engagement work on COVID-19, the issues of digital exclusion and the accessibility of services have been frequently discussed. We have heard how digital healthcare tools have excluded patients from accessing services. These were issues participants in this focus group raised. People told us it is important that information is available to everyone, not just online. Participants also told us that all information needs to be available in formats accessible to all groups, including those who have English as an additional language, or those who do not speak English.

### What was said...



Some people can't access digital information. Services must take care of them too.



Non-native speakers find it hard to understand what is being offered.



## Conclusion

This report is the latest in a series detailing the results of engagement work HWCWL has carried out, alongside partner organisations, exploring the impact of COVID-19 on groups in the local community. The COVID-19 situation in Kensington & Chelsea and Westminster, and across England as a whole, is constantly developing. The rollout of COVID-19 vaccines is the latest major development.

Our work with the Church Street Library English Speaking Group took place just as national attention was turning towards the efficacy of the newly developed COVID-19 vaccines and its rollout to the Government's top priority groups. As a result, participants in our focus group were particularly keen to have a discussion about the vaccines, their safety, and their rollout.

In general, participants expressed a **wariness over the safety of the vaccines**, as a result of the speed with which they had been developed. They told us about the **prevalence of misinformation** concerning the vaccine and other aspects of COVID-19 mitigation strategies.

It is important that health and social care providers tackle this misinformation, to ensure that vaccine take-up is high across all communities. Health and social care services are in a good position to do this: many participants told us that **the NHS is their most trusted source of news** relating to the pandemic. Ensuring that **accurate information is available and distributed to all** communities in Kensington & Chelsea and Westminster should remain a priority over the coming months.

The **accessibility of health services** remains a pressing issue. Much of our engagement work on COVID-19 has highlighted the complex issue of digital exclusion. People have told us that digital-only systems are not adequate. For many people, these systems are barriers to accessing healthcare. Participants in our Church Street Library community group engagement also highlighted the importance of ensuring services are accessible to those who have English as an additional language, and to those who do not speak English. Particularly during the current pandemic, making sure that all information is widely available and accessible is vital for both public health and for individuals.

As we move into a new phase of measures to contain and treat COVID-19, listening to patients' voices and **learning from their experiences** remains as important as ever. It is vital that the voices of local people are kept central to considerations of new ways of working, and when commissioning and evaluating services. We have heard from local people about their experiences of living through the COVID-19 pandemic, and how they would like the healthcare and support they receive to be improved to help them stay well and safe.

# Appendix

## Questions

As with our public survey, Your Experience Matters, we developed broad questions that could elicit a range of different experiences. These formed the basis of a semi-structured conversation with seven members of Church Street Library community group.

**1. Have you been directly impacted by the COVID-19 outbreak?**

- Did you have to self-isolate either because you had symptoms, because you were asked to shield, or because you are in a vulnerable group?

**2. Since lockdown eased, how was your experience social distancing?**

- Did you feel relaxed or happier?
- Have you visited or got in touch with your family and friends?

**3. Would anyone like to share if they have experienced any changes in their income as a result of the COVID-19 outbreak?**

- Do you know anyone who has had changes to their income?

**4. Did you have to go to the doctor, the hospital, or see another health professional for any ongoing or urgent issue not related to COVID-19?**

- After lockdown eased, did you manage to access your GP appointments more easily or book appointments?

**5. Since the vaccination programme has been introduced, what are your concerns about the vaccine?**

**6. How can your local healthcare services give you more information about the vaccination programme?**

- What would make it easier?

**7. What sources did you use to give you information about the COVID-19 vaccines?**

- What source did you rely on most?

**8. How do you think local services can be improved?**



## Contact Us

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