

Shielding

and the Covid-19 pandemic



Getty images

A Healthwatch Dudley report for
Public Health Dudley

July 2021

Contents

Summary	2
Introduction	4
Shielding conversations	4
What people are saying	5
Emerging themes	16
Recommendations	18
Future conversations	19

Author: Dr Rob Dalziel FRSA

Summary

Shielding and wellbeing

Dudley Council Public Health team approached Healthwatch Dudley for help with getting the views of vulnerable people who had or should have been advised to shield to protect themselves from SARS-CoV-2 infection. A sample of individuals, provided by the council, were contacted, by telephone, to gauge how they felt about their health and wellbeing during the Covid-19 pandemic period. The aim being to better understand what support individuals might need now or in the future to go about their daily lives.

What we found

There are those individuals who feel they get sufficient support with their health and wellbeing from the community, neighbours, friends and family. Others are struggling and are not getting all of the help they need from the community or neighbours, friends and family. At the same time, messages on shielding and the help that was available worked well for some but not all individuals.

Some shielding individuals have been able to work at home or stay employed but on furlough. Others have lost their jobs or are affected by a reduction in their income. There are those who have the technology, equipment and access to the Internet that they need. And those who don't have the technology, equipment, access to the Internet, confidence and skills needed to do things effectively online.

Many shielding individuals are anxious about the ending of the requirement to shield and going out more as well as the relaxation of regulations on how people can meet up, social distancing, and the wearing of masks.

Recommendations

For everyone - but more especially those who struggle - different organisations must work together in an effective, joined-up, and coordinated way to provide support when it is needed.

Help should be available for people who want to do more digitally. Especially those who want access to affordable technology and online services.

Organisations must ensure any information and advice conveys consistent and easily understandable messages on Covid-19 and what support is available to help individuals with day-to-day living. Checks should happen to confirm messages are received.

Strategies and plans need to be in place to support people to remain safe at home or if they are going out more to work or in the places where they live.

Introduction

In March 2020, GPs, in England, were asked to identify clinically vulnerable individuals. Letters were sent out to around 1.3 million people advising them to stay at home and avoid close contact with others. The numbers shielding rose, over time, to 2.2 million individuals by the end of October 2020 and new groups of individuals considered vulnerable on clinical grounds were added.¹

On 1 April 2021, more than 3.79 million clinically extremely vulnerable people in England were informed they no longer needed to shield.² They were sent letters with revised guidance on what to do to reduce their risk and advised to continue to take extra precautions to protect themselves.³

In May 2021, Dudley Council Public Health team approached Healthwatch Dudley for help with getting the views of vulnerable people who had or should have been advised to shield to protect themselves from SARS-CoV-2 infection.⁴

A sample of individuals, provided by the council's Public Health team, were contacted on the telephone, by Healthwatch Dudley staff, to gauge how they felt about their health and wellbeing during the Covid-19 pandemic period. The aim is to improve understanding of what support individuals might need now and in the future.

Shielding conversations

In total, 22 individuals, 9 female and 13 male, talked about their experiences of shielding during the Covid-19 pandemic period or, as happened on three occasions, a partner or carer spoke on their behalf. The conversation questions and prompts were:

¹ Runswick-Cole, K (2021) 'A (brief) history of shielding', <https://www.sheffield.ac.uk/ihuman/news/brief-history-shielding>

² UK Government (2021) 'Shielding advice for the clinically extremely vulnerable to stop from April', <https://www.gov.uk/government/news/shielding-advice-for-the-clinically-extremely-vulnerable-to-stop-from-april>

³ UK Government (2021) 'Guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19', <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19>

⁴ Healthwatch Dudley is your local champion for both health and social care services, <https://healthwatchdudley.co.uk/>

- What challenges have you faced as a result of Covid-19?
- How did you feel about being asked to shield?
- Were you able to shield and what about care or work commitments?
- What worked well for you, what helped and were there any gaps in support?
- Have you been more reliant on technology to communicate, did it help, is it affordable?
- Have your neighbours, local community, pulled together to support each other, and if so what happened and how did it make you feel?
- Was it helpful to receive a call from Dudley Council, and if so how?
- How do you feel about stopping shielding now restrictions are ending and what, if anything, might make things easier for you?
- What can be done differently or better to help people get the best support should we return to a lockdown situation in the future and where you might be asked to shield again?

Everyone called on the telephone had previously been contacted by Dudley Council Public Health team and had given their consent for their telephone contact details to be passed to Healthwatch Dudley. Individuals were informed that their names and any other identifying details would not be used in the report, based on conversations, to be produced for Dudley Council Public Health and published on the Healthwatch Dudley website.

What people are saying

We had conversations that were, on a number of occasions, long and detailed accounts of shielding and people's fears and anxieties during the Covid-19 pandemic period. They provide rich insight on individuals' experiences and the impact of shielding on them and their families and others who care for them.

Broadly, discussions covered the need to just get by and the variation in ability to do this and keep safe and well too. There were lots of examples of individual's struggles with their circumstances at home, isolation and loneliness, and their health and mental wellbeing.

In turn, people told us about their views on shielding, the support they had to stay safe and protect themselves from the virus, digital services and getting online, and the relaxation of restrictions on behaviour and meeting outdoors and indoors.

Getting by and struggles

For some, it was possible, to a varying extent, to get by without too much extra hassle in their lives on top of that caused by the pandemic and shielding. It was a difficult time but they were able, with the help of family and friends, to keep going while staying safe and well looked after.

‘I have not really required anything, we have looked after ourselves and chosen not to take up offers, we have managed okay’ (Brian).

‘[The Covid-19 pandemic] has not been so much of a challenge for me, I have got family and children who can help me’ (Alan).

‘I have a boat nearby, just down the road from where I lives, and spend time on it with my partner, family and friends. I have grown up children who live nearby. I managed to get a shopping delivery okay, I had been doing it before the start of the pandemic’ (Jenny).

‘Being asked to shield didn’t make a lot of difference [to him]’ (Louise on behalf of her partner Richard)

‘I didn’t struggle adjusting to being told to shield. I had to retire, in 2016, for health reasons. I have sarcoidosis which means I have trouble with my lungs and breathing. Lockdown didn’t change anything much for me, apart from the fact that it made my anxiety and depression worse’ (Peter).

‘I have been shielding since the first lockdown. I didn’t feel too bad about having to shield’ (Simon).

For others that we spoke to the Covid-19 pandemic period had been a time of quite harrowing extra anxiety, disruption and hardship in their lives.

They had missed contact with family and friends and not being able to see loved ones in their own homes. Different individual’s talked about financial problems, poor housing conditions, isolation and loneliness, and poor physical and mental health.

‘It has not been easy, believe you me ... it is my mental health and feeling lonely, all sorts of strange feelings can start to creep into your thoughts’ (Tom).

‘I’m struggling financially, it’s the biggest problem I have to deal with ... At one point the MoD had requested an ambulance be sent to my home, since they were worried about my mental state’ (Mike - army veteran).

‘I contacted Citizens Advice, I was worried about my financial situation. [They] were really helpful and organised a Debt Relief Order ... [it] really helped as the worry about not being able to pay bills was adding to my anxiety’ (Jenny)

‘It’s been quite a challenge. I suffer from long-term anxiety and depression. I had a big operation last year. I’ve had both of my vaccinations but I’m still worried because there is still no guarantee that I won’t get Covid’ (Dennis).

‘I was diagnosed with cancer 3 years ago ... I was supposed to be moving and needing repairs done ... there are 14 steps into my accommodation, the occupational therapist says I need to be on a lower floor’ (Neil).

Knowing about shielding

It was often clear why someone should be shielding and they had been contacted and advised to stay at home and avoid close contact with others outside of their immediate household.

They had received a government letter or had had a letter or telephone call from their GP or the council giving them advice on how to stay safe or asking if they needed help with food or medications deliveries.

‘We suddenly got emails from everywhere ... and letters through the door, saying [Richard] was now classed as vulnerable. Only during the second lockdown did we have contact from the council’ (Louise on behalf of her partner Richard).

‘I received several shielding letters from the Government ... Dudley Council [and the] GP. I have arthritis and take Methotrexate which suppresses the immune system and so I was considered vulnerable’ (Harry).

‘We got Government letters through the post telling my husband to shield. My husband is a postman but is shielding and off work. We got text messages and social media updates, the news was on constantly but I could not watch with the anxiety it was causing me’ (Deborah).

‘I’ve had no correspondence from the council on shielding. I did get a letter on shielding from the Government’ (George).

Information and messaging on shielding, though, was not always seen to be as straightforward or as easy to understand as it could be. In some instances there were queries about how the process had been decided and why some individuals were or were not on shielding lists.

‘I was supposed to shield, but did take the dog out for a walk each day, though. I crossed roads to avoid people and was not going to the shops. I thought my husband should also be shielding since he has angina and asthma, he was not asked to. I finished chemotherapy in 2020, it affected my immune system, I’m pretty good otherwise’ (Carol).

‘Things could have been better. We didn’t get any letter [about shielding] until 6 months into the pandemic. My husband has heart disease. I have chronic asthma. My neighbour was receiving [food] parcels, I did not. We had no letter from government. We have had no letters from the council ... I feel a bit neglected, support wise’ (Sally).

‘I have not heard anything from the council. There is a lot of government spin, a lot of lies’ (Neil).

‘I’ve had letters about shielding, the carer will read them for me. My health is not so good. I feel like giving up. I don’t want any injections, it’s all crap to me, I’ve had no vaccinations, I refused’ (Joanne).

Support and what worked well or not

People were, to different degrees, able to find or get support from the community or neighbourhood, where they live, family and friends, the government, the council and voluntary sector organisations, helping with information and advice, food parcels and medications deliveries.

Individuals remarked on what had gone well for them. They mentioned having supportive neighbours or family members living nearby, being able to work at home and retain an income, good finances, helpful information or support from the government or council, and good experiences getting help with their health and care.

‘I have a secure job working in a school and the Covid-19 pandemic and needing to shield has not affected my income, financially things are good and I have a good network of people around me that I can call on for help’ (Helen).

‘I’ve been able to work at home and this has worked well ... I have had no need for extra support outside of my family who have been helping’ (Alan).

‘I had people who were delivering food and medications, the pharmacy worked really well to get me what I needed’ (Tom).

‘The support I’ve had has been really good, from neighbours, the Black Country Foodbank, and I had government food parcels during the first lockdown, with help from a volunteer in my area during the second lockdown’ (George).

‘My husband had a stroke and had to go into hospital, nobody could visit ... Care at the hospital and the nurses were brilliant. The nurses came round with tea and things more than they would normally. It was scary when we were in there [the hospital] we all had to have Covid tests’ (Deborah).

‘I’m ex-army and have had strokes, a neck fracture, and spinal injuries. My disability benefit payments were stopped. The Royal British Legion stepped in to support me with food vouchers and my gas and electricity bills’ (Mike).

‘My mother had a water infection and the GP was really good and let us take mother to the surgery and they organised a chest x-ray and a blood test’ (Jack speaking on behalf of his mother Ellen).

Individuals also remarked on what had not gone well for them. They mentioned not getting letters or telephone calls from the government or council, not knowing about or getting support with shopping, medications or other day-to-day living needs.

In turn, there is job uncertainty, loss of income and difficult finances, fears about going to the GP practice or hospital, and contracting Covid-19, worries over delays to care and treatment, and housing problems or debts.

‘I never received a call asking me if I needed any shopping. I don’t remember getting a call from the council’ (Sarah).

‘Prior to the pandemic, I worked in a nursing home. After being instructed to shield, I was put onto Statutory Sick Pay then furlough. I probably will not be going back to work. I am full of anxiety’ (Jenny).

‘I want to move into a bungalow, the council won’t do repairs. I’m in a council house with four bedrooms and my children are grown up. At the moment the council is not offering nothing. I’m on benefits and paying bedroom tax. The house is too big, it is causing me to be stressed’ (Joanne).

‘I usually have to go to hospital for treatment by infusion every four weeks. I’m under rheumatology and orthopaedics ... I had phone calls instead of face-to-face appointments for my check-ups. However, I missed three appointments because I was too scared to go to the hospital’ (Emma).

‘I’ve got two more lots of chemotherapy to go. Because of the Covid-19 pandemic they [the hospital] could not give it to me now it is planned for October, it’s still ongoing’ (Neil).

Digital services and keeping in touch

Those individuals we spoke to who are able to connect to the Internet at home recounted how it is a valuable way to stay connected with others - in particular family, friends and healthcare services. They had been able to get online shopping slots at supermarkets, order prescriptions, get medications delivered, and health and care help from their GP or hospital staff.

‘We telephoned people and used Zoom. We were in touch for family birthdays, it was fantastic, and we were able to see our niece’s baby, with others from around the world joining in. We saw more of the family by Internet than before we were in the pandemic’ (Carol).

‘I have got an Ipad and Internet at home and use Patient Access to communicate with my GP practice online. I also get shopping deliveries online’ (George).

‘We have face-timed a lot, it is isolating [shielding], it is scary ... Being able to get online at home helped’ (Deborah).

‘I am online at home and go online to get prescriptions and GP appointments’ (Alan).

‘I hadn’t seen my partner since March 2020. We support each other and without him I would go round the twist. He texts me ... we have a video chat on Messenger. I am happy with texting and video chatting for now. I am okay with technology and getting better’ (Jenny).

‘There is Internet connection at home and I’m often online’ (Helen).

Thought must be given, though, to what can or needs to be done to ensure that those who don’t have or cannot easily get access to the Internet at home are not left out or behind. Especially when it comes to getting help with their health and care or other important day-to-day living needs.

Some individuals may not want to use online services whilst others may lack the confidence and skills needed to get the most out of using technology and online services. Consideration needs to be given to how best to help people who do not want to use online services and support others to develop their confidence and digital skills.

‘I am not into computers. I just have the television. I don’t have any digital at home. I have the phone, I’m quite happy with that ... I have a smart phone, but don’t know how to use the video on it. I was asked to send a video of a rash to the GP, but did not know how to do this’ (Tom).

‘I’ve just got a new phone and will be better able to keep in touch with others with it. I’m finding it difficult to afford an Internet connection at home’ (Mike).

Opening up and the vulnerable

As restrictions on how people can meet outdoors and indoors, the wearing of masks and social distancing begin to change most of the vulnerable individuals we talked to told us they are not wanting to relax too much. They remain cautious and, on the whole, wary of going outside of their homes and mixing with others.

Their health conditions mean they continue to be at risk and even after being double vaccinated they feel they must still take care. At the time when we were having our conversations the rates of viral infection were, once again, starting to rise. Most of the vulnerable individuals we talked to remained anxious about being in places where others are gathering, not social distancing and not wearing masks.

‘We don’t want to completely relax yet and go into shops. We don’t want to bring the virus home. We visited our niece at her home, in the garden, and the next day she was positive [for Covid-19], it seems caught from a child at school’ (Carol).

‘I am still isolating at the moment. I’ve had two jabs of the vaccine but I’m still vulnerable’ (Neil).

‘We are still really nervous, anxiety has gone through the roof during the pandemic. So many people lost their lives. We are going out now for our own shopping, masked-up, but do find in shops there is no social distancing. We are only going to places that we need to, we are not drinkers so do not visit pubs, the only other time we go out is for hospital appointments. We would rather be safe than sorry’ (Deborah).

‘I go shopping but nowhere else ... I come home straight away’ (Joanne).

‘I’ve got COPD and am still being careful. I attend the respiratory clinic but have not been out to the shops for over a year. I’ve been indoors that long now the thought of going out doesn’t appeal to me. I have had both shots of the vaccine and feel a bit more comfortable after having them to go out say to see the neighbours’ (George).

‘I’ve got COPD and am still being careful. I attend the respiratory clinic but have not been out to the shops for over a year. I’ve been indoors that long now the thought of going out doesn’t appeal to me. I have had both shots of the vaccine and feel a bit more comfortable after having them to go out say to see the neighbours’ (George).

Emerging themes

Shielding and getting by

- *There are those who feel they get sufficient support* and care from the community around them, neighbours, friends and family. They get the help they need with their day-to-day living. In turn, although there are difficulties, their finances are, on the whole, okay and their wellbeing is too.
- *Others are struggling* on benefits or low incomes. They can’t rely on neighbours, friends or family for help and are experiencing difficulties with their finances, paying bills and dealing with debts. Sometimes poor housing or living conditions make shielding even more of a problem. Many miss face-to-face contact with family and friends and are less able to keep in touch - especially online. All of this can impact on a person’s physical and mental wellbeing.

Shielding messages

- *There are those for whom the communications on shielding work well* - from the government, council, GP or other healthcare professional. They are getting the advice on what help is available locally to help them meet their day-to-day living needs.
- *Sometimes, though, information on shielding did not arrive at all or it arrived late*, and was confusing. Sometimes there was uncertainty about how decisions on who should shield or not were made. Some individuals questioned the quality of the information itself and were wary of government and other official messages on Covid-19 and health risks and hesitant about or not wanting to have the vaccine.

Jobs and finances

- *Some shielding individuals have been able to work at home* or stay employed but on furlough, retaining an income and maintaining a stable or good financial position.
- *Others have suffered job uncertainty or loss*, and are affected by a reduction in or loss of income and difficulties with finances.

Getting online

- *There are those with equipment* in addition to a landline based telephone or mobile phone - desk top, laptop or tablet computers. They are often more able to easily get online at home using a broadband connection. In this way they have been able to get online shopping and medications deliveries or access to their GP practice or hospital. And use online platforms like Microsoft Teams or Zoom to keep in touch with friends and family.

- *Others don't have equipment* and any, or easy, access to online services. Even if they own a mobile phone they don't know how to use many its functions. They either can't or don't want to go online - perhaps lacking confidence or the skills needed to do things. Consequently, they may have been more likely to experience difficulty or delay in getting help with daily living or their health and care during the pandemic period.

Vulnerability and vaccination

- *Many shielding individuals are anxious* and worried about the ending of the requirement to shield and the regulations on how people can gather together inside or outside, social distancing, and the wearing of masks. There can be much anxiety even when someone has had two doses of vaccine - because it may not always protect against infection and illness, which may be severe.

Recommendations

- For everyone - but more especially those who struggle - different organisations must work together in an effective, joined-up, and coordinated way to provide support when it is needed. Many people who are, or have been, shielding are on benefits, a low or reduced income and are having difficulties paying bills or dealing with debt. They are more likely to need help with finances, housing, their physical or mental health, social care, and the effects of isolation and loneliness.
- Help should be available for people who want to do more digitally. Especially those who want to get access to affordable technology, equipment and online services. They might also need help to gain the confidence and skills needed to get the most out of what equipment they have and services online.

- Organisations must ensure information and advice conveys consistent and easily understandable messages - that are factual and help to counter the effects of misinformation. Checks should happen to confirm individuals have received information and messages.
- Strategies and plans need to be in place to support people to remain safe when they start to go out more or return to work. Many individuals are fearful of what changes to or the ending of restrictions on how people can gather together and whether they need to social distance or wear a mask or not will mean for them.

Future conversations

It would be good to have more, and longer, conversations with individuals who have been or are shielding to obtain more detail on what it has been like for them living through the Covid-19 pandemic period. At the same time, increasing the representativeness of the group of people asked to give their views - in particular in terms of their age and ethnicity.

By undertaking conversations at different intervals over a period of time it would be possible to get a developing overview on how individuals' circumstances and situations are changing for better or worse. At some time in the future it will also be possible to meet with people face-to-face when it is convenient and safe to do so.

Healthwatch Dudley
would like to thank all of
the individuals who gave
us their time to talk
about their experiences
shielding during the
Covid-19 pandemic
period.

Healthwatch Dudley

7 Albion Street

Brierley Hill

DY5 3EE

Tel: 03000 111 001

hello@healthwatchdudley.co.uk

www.healthwatchdudley.co.uk