

Croydon vulnerable migrants' experiences of health and care services

28 May 2024

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Executive Summary

Healthwatch Croydon has been commissioned by the Care Quality Commission to explore views and experience of vulnerable migrants to support their work.

We understand vulnerable migrants are waiting to hear decisions on their residency and are staying in accommodation within the borough of Croydon. We wanted to understand their experiences of accessing and using health and care services in Croydon as well as their knowledge of the Care Quality Commission (CQC), who are funding Healthwatch Croydon to undertake this work. The CQC is the independent regulator of health and adult social care in England. They make sure health and social care services provide people with safe, effective, compassionate, high-quality care.

We undertook 12 interviews and 46 surveys with a range of vulnerable migrants from 24 countries as varied as Iran, Afghanistan, Sri Lanka, Cameroon, Honduras and Trinidad and Tobago (*see Summary of activities page 42*). Some are fleeing political or religious persecution, while others domestic violence or gang warfare. All are staying in migrant accommodation in the borough of Croydon seeking refuge until their immigrant status is confirmed. Most had been here less than a year but nearly a third had been here a year or longer.

Our findings

- The vulnerable migrants that we have spoken to have arrived in the UK from a diverse range of countries, with most fleeing political, religious, or ethnic persecution or war. However, some are also fleeing criminal activity such as gang warfare and domestic violence. A small number also came in search of work or study and then were stranded in the UK (*see section 1 page 9*). There was a range of time they had been here from just a few months to over 2 years (*see section 2, page 15*).
- GP services were most heavily used, with Rainbow Health Centre which is a dedicated GP service for homeless and asylum seekers being used the most. Other services included accident and emergency, hospital outpatients, mental health services and dentistry (*see section 3, page 18*).
- Most are happy with the services they have received, (*see section 4, page 20*) particularly with GPs (*see section 5, page 21*) but were less satisfied with services beyond primary care such as waiting for hospital services and specialists and also access to dentistry. There was a sense by some of a lack of understanding about mental health needs and difficulties in accessing the appropriate medication. Those accessing emergency services have long waits (*see section 6, page 26*). Some of these issues are similar to long-term resident experiences, so are not unique to vulnerable migrants.
- Very few vulnerable migrants had heard of the Care Quality Commission with some confusing the organisation with those who manage the building

or support their health needs, rather than quality of care services, (*see section 7, page 31*).

- Most found it easy to register with a GP (*see section 8, page 33*) but most had used Rainbow Health Centre which is dedicated to vulnerable migrants. Very few had heard about Safe Surgeries (*see section 9, page 36*) which is a GP-led initiative to support vulnerable migrants. There were a few that registered successfully at other surgeries (*see section 10, see page 37*).
- Suggested improvements were about accessing services quicker and better understanding of the process of getting care beyond a GP as well as support for mental health issues (*see section 11, page 38*).

Recommendations

For the Care Quality Commission (CQC)

- **State simply what the CQC does:** Almost no vulnerable migrants were aware of the CQC or what it does. It is possible that coming from developing countries there is not an organisation that has a similar power, influence, and remit to ensure quality of health and social care services, like we are able to have in the UK. Therefore, the clear and simple explanation of the role and remit of the CQC is needed, to start the programme of engagement.
- **Work with dedicated partners within specific communities:** Even the relatively small sample of 58 respondents have drawn from 24 countries, simply producing language materials is not enough. The CQC would benefit from finding dedicated engagement partners that work within specific communities and understand not just the language but cultural and societal norms, particularly around raising issues of concern and challenging authority and can effectively translate and interpret the CQC's remit and vision. (*see reflections within the background for more context, see page 8*).
- **Find and engage experts by example and community influencers to help co-design materials and communication messages:** By working with specific vulnerable migrant communities and showing the value the CQC can make to their experience of services, the CQC can recruit experts by example who can help communicate this to their wider community.
- **Show commitment and value their input:** Ensure that once you have the communities on board you are in regular contact and feedback on how their views have changed approaches. By closing the feedback loop, you can ensure continued trust and a feeling of agency.
- **Trust and agency are essential:** It is likely that due to their experiences, they are going to be suspicious of authority, government organisations and opportunities to express their views without risk of harm. The CQC needs to show its neutrality, discretion, and confidentiality, to ensure engagement. Understanding specific cultural and social norms of specific communities will help develop this. By doing so they will support migrants in giving them agency to share their views.
- **Work with GPs:** Nearly all vulnerable migrants will start their pathway to services via GPs. If the CQC is committed to engaging with this population, they need to produce some dedicated material and share this with relevant community organisations. This information should align with the information given by GPs, particularly those signed up as Safe Surgeries.

For the NHS and social care services

- **Dedicated services:** There are clear benefits in having a dedicated GP service for vulnerable migrants on the lines of the Rainbow Health Centre. Close alignment with the accommodation providers in sharing information on how to register and access services has been reflected significantly in the feedback. Basic initiatives like easy registration through links at the hotel and assisted transport to GP and other health locations helps vulnerable migrants engage with the services they need.
- **Managing expectations:** Vulnerable migrants come from a range of different places with varying levels and structures of health services. Some were confused on why they saw a nurse and not a doctor, or that there was a particular pathway to services. Challenges with the health services reflected by the wider population around accident and emergency waits, hospital outpatients and accessing dental services. As they can get registered with a GP relatively easily in Croydon, this can create the expectation of speedy support, but this needs better communication if there are likely delays in treatment.
- **Safe Surgeries also need to be promoted so they are understood by the communities they serve:** Since this initiative ensures a high-quality service specifically for vulnerable migrants, it needs to be better communicated by surgeries and the wider support services. It could be applied as a quality standard for GPs taking on contracts to look after vulnerable migrants.
- **An emphasis on mental health support:** Nearly a third of responses of long-term conditions focused on mental health, not surprising considering the context of why many of the migrants arrived here, fleeing persecution, economic hardship, many with young families and loss of resources, doubled with the uncertainty of a decision on their status in the UK. A dedicated service would help support them and may help reduce the demand for other services.

Background

Healthwatch Croydon were invited to quote for the to undertake work for the Care Quality Commission (CQC) for their '*People's Profile: How people live, access, and use health and social care services*'

In 2021, the CQC published their organisational strategy where they set out their ambitions to deliver smarter regulation driven by people's needs and experiences of care.

This year they published our Public Engagement Strategy which outlines how they will engage with people, their families, carers, and organisations that represent them or act on their behalf.

The work they wanted organisations to carry out with vulnerable migrants in England links with both of their strategies, by providing research based on perceptions of vulnerable migrants and how that might impact their ability to access or receive care.

Objectives:

- To provide CQC with insight on Vulnerable Migrants, building on what they already know and providing a national picture of health and social care areas impacting this group.
- To provide CQC with some insight on how we can best involve these groups in co-designing how CQC does its job.

Healthwatch Croydon welcomed the opportunity to contribute to this project. Croydon has a high and diverse number of migrants living in the borough, due to the positioning of a Home Office HQ Lunar House in Croydon, Brigstock House in Croydon is a dedicated location for housing asylum seekers awaiting support and help.

We have undertaken a number of reports focusing on migrant groups from Asylum seekers see [Asylum seekers health and wellbeing survey \(June 2023\)](#) to those who live in Croydon but have a barrier to services due to language see [Non-English speaking Croydon residents experience of accessing services \(February 2023\)](#).

Through this previous insight, we have found that many of the themes that the CQC have suggested reflect closely to what we are hearing. This project enabled Healthwatch Croydon to explore some of these issues with more detail and with a wider range of vulnerable migrants.

We have worked closely with the Rainbow Health Centre which is dedicated to helps those who are homeless but also includes vulnerable migrants – an illustration of intersectionality between being a vulnerable migrant and not having a place to live, as well as barriers to services including GP registration and the resultant effect on mental and physical health.

Our project involved visiting migrants at the place of their accommodation, and interviewing or sharing the survey with them there, or with their support groups. We also visited the Rainbow Health Centre as well. We asked them through interviews and questionnaires about their needs, experience of services and any challenges and barriers they have had.

The original idea was to compare three different migrant groups experiences and access to services, based on their language and culture. Depending on who is accommodated and who is available these would include migrants from Syria, Eritrea, Afghanistan, Sudan, and Ukraine. We stated that, if we find other relevant vulnerable groups, we will consider those. In a place where over 90 languages are spoken, we may come across other communities that may well be relevant.

In reality, we came across 24 nationalities from a sample of 58.

We delivered a short survey to enable us to hear from the three cohorts' groups of vulnerable migrants feel about services, their concerns, and needs, where they can give their views. This would be tested to ensure it could be easily completed by a diverse number of vulnerable migrants. We received 46 questionnaire responses. All those surveyed would have the option to go into a draw to win a £50 voucher.

Themes for the survey would focus on:

- Where they came from?
- How long they have been here?
- What services they have used?
- What has been easy to use?
- What has been difficult to use?
- What they know about the CQC?
- Demographics: Age, Ethnicity, Religion, Long-Term Conditions, Disability.

See full list of questions in *Appendix, page 52*.

We undertook a further 12 detailed interviews to understand more about their experience and needs. Each person interviewed would receive a £50 voucher. Where relevant we would pay for interpreting services to ensure we can access those where English is not their first language.

The full report details both quantitative and qualitative aspects defined in easy-to-understand findings and recommendations that the CQC can use to support its approach.

Reflections and limitations about the study

- We managed to complete 46 surveys (one more than planned) and 12 interviews (three more than planned).
- All respondents were accessed through the single asylum accommodation of Best Western Queens Hotel Crystal Palace, although some were undertaken at the Rainbow Health Centre in Thornton Heath. This means the likelihood of respondents knowing about Rainbow Health Centre was higher than other possible locations.
- We were surprised at the diversity of asylum seekers in this sample. 24 countries are represented across 58 respondents, reflecting all continents except North America and Oceania. It is difficult to access definitive figures on asylum populations. The original plan of Eritrean, Sudanese and Afghan and Ukrainian asylum figures was based on local information. When discussing this further with our local contacts, it was revealed that the nationality of around half or all Croydon's asylum-seekers are not recorded by the organisation looking after them within the accommodation. There may also be obvious reasons why asylum seeker does not want to share their details when they are not obliged to.
- This therefore make is much more of a challenge to plan communication strategies to engage these groups. The sheer diversity both of location of origin and reason to flee to the UK mean that a series of initiatives around one strategy are required. If the CQC and health services really wish to connect, engage, and involve these communities in their work, they really need to work closely with dedicate local partners and services like Rainbow Health Centre who know and understand their communities well.

Our thanks to all who participated in the survey and interviews and to Rainbow Health Centre staff and the Best Western Queens Hotel Crystal Palace management for enabling access to participants.

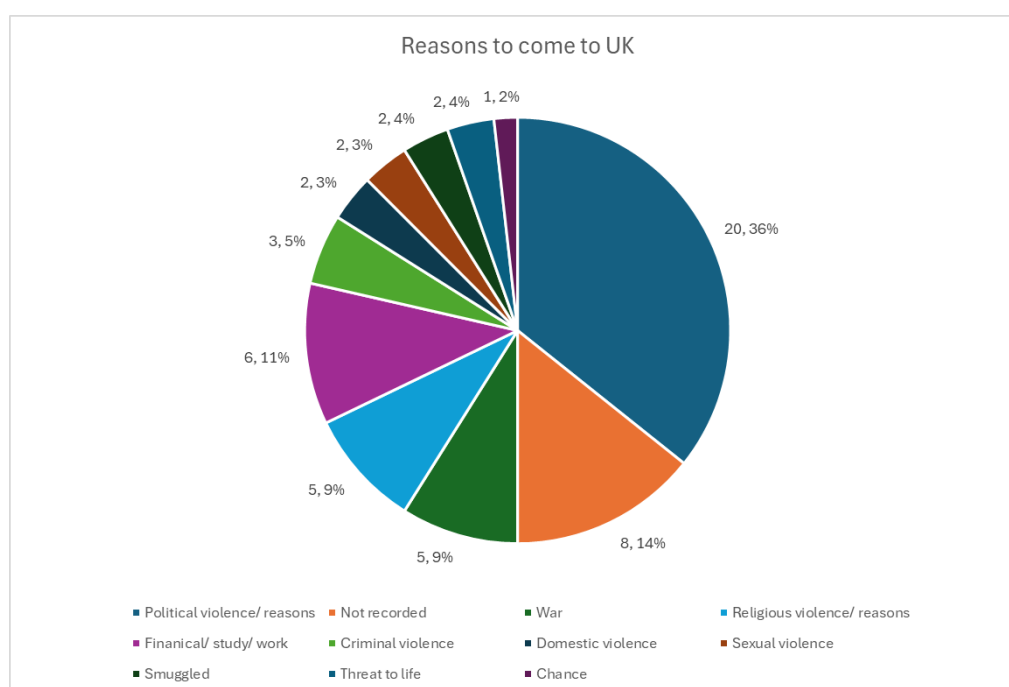
Main findings

Please note that for authenticity the quotes are direct from the survey and have not been edited.

1. Tell us your experience of how and why you arrived in the UK?

- Political violence and war were significant factors, but some came due to religious persecution, or to study or work but then ended stranded here due to circumstances. Some had also fled sexual and domestic violence.

Reason to come to the UK	Interview	Survey	Total
Political violence/ reasons	4	16	20
Not recorded	1	7	8
War		5	5
Religious violence/ reasons	1	4	5
Financial/ study/ work	2	4	6
Criminal violence	1	2	3
Domestic violence	2	0	2
Sexual violence		2	2
Smuggled		2	2
Threat to life	1	1	2
Flight		2	2
Chance		1	1
	12	46	58



Political

- Responses came from people from Afghanistan, Iran and Sri Lanka, Eritrea, Lebanon, and Pakistan.

“We immigrated to UK due to the serious problems that happened to us in Iran.”

“There were Taliban government, It’s very bad situation for us because I have worked with international organisations and it’s a big risk for me.”

“I could not stay in IRAN anymore because racist and my wife's father follow us and kill us.”

“Long time came to the UK, problems in Pakistan, fighting and killing, still situation is bad.”

“I was in the national army in Afghanistan when the taliban came and our system ended. I was in danger of being killed then I came to England.”

“I had to leave my country because of the tailban they were threatening my life and it was life threatening so I had to come here to claim asylum.”

“Due to political problems with the government.”

“So i left Afganistan due to the taliban as there was war there so had to seek asylum.”

“We were running away from the taliban so had to come here to be safe, it is too difficult I'm my country, so had to leave.”

“There was a problem with the police in Sri Lanka so that’s why I had to come here and seek asylum.”

"I was a case worker in Afghanistan in the international office, I had to come here for my safety from the Taliban as they told everyone that woman had to stop working and so I was afraid and had to come here to be safe."

"The same reason they have political unrest and so we are in danger so I had to seek asylum."

"I was receiving messages from British embassy in Lebanon alarming us to leave Lebanon as soon as possible, because I have two daughters they hold British passport ,I applied for visa and applied for asylum since I arrived."

"I was born in 1999, I was born from Eritrea and Ethiopia, there was a war and my father was killed because of the war between the two regions and my mother took me to Ethiopia. I grew up there then my mother died from Breast cancer then I have nobody, then a stranger he found me on the street. And he take me to a childcare centre he told me the manager will look after my expenses but the money did not last. The childcare gave me school that was good then you have to leave, living life was tough I had a dream to be a doctor in breast cancer but I did not get enough schooling score, then I was a engineering school but then there was a war, then the first job I did was a waiter, then I took another another job as tour. I was a part of the Amhara national movement on the side of democracy, the government does not like to do this, some of my friend are in prison so that's when I left the country to save my life."

"Big problems in Iraq."

"My life was in danger in my own country and I escaped illegally and came to the uk."

Criminal violence

- Respondents come from Honduras, Colombia, Kyrgyzstan, Russia, and Trinidad & Tobago.

“To seek asylum for protection for me and my family, had death threats from criminals organisation.”

“For security for me and my two children, to be safe from dangerous people.”

“I want to run away from dangerous people want to be safe for me and my son. I was very strong for my son before I wanted to die.”

“So for the past year from 2023 Nov ladies boyfriend was gunned down, and I saw what happened, I tried go save him because I am a nurse, so I could not do it and everyone left us, after that day the gang leader called for me, asked why she tried save him, was scare of the boyfriend, we are not apart of the gang, gang member was scared of getting a case from the police, he told him I would need to move out of the community, so I found a new community, so now he found him, and he said he found her and started threatening her. I moved again and I was found again , so on the 19 Nov 2023, so they invaded my new home. So I was staying with my cousin here in UK, was staying in exchange for lodging and but I was not good living conditions so then I applied for asylum.”

War

- Responses came from people from Syria, Sudan, Sri Lanka, Afghanistan, and Eritrea.

"I arrive through the airport I got a tourism visa, after i arrived here the situation in Sudan (the war) so I seeked asylum."

"I was asked to join the army and did not want.to (conscription) so I ran away, I have a computer science degree and came here to claim asylum to do something."

"Me and my husband has to leave due to the political status over in our country there was war so we had to leave."

"I had to escape from the taliban same as my friend, woman were in danger so I came here in airplane to be safe from the bombs and guns."

"Because there there was a call for army and I wanted to escape that."

Religious persecution

- Respondents come from Iran, Pakistan, and Afghanistan, both Muslim and Christian.

"We immigrated to UK due to the serious problems that happened to us in Iran."

"Because of some religious threats, we are ahmadi Muslim and the majority don't consider us to be Muslim so our life is threatened."

"My life was in danger and I had no authority over myself to convert to Christian to Islam."

"I was a lawyer, problem in my country for my job for living, I do not have freedom for my religion in my country."

"I arrived here as it was not safe there anymore, especially for children's education and for woman."

Domestic Violence

- Respondents come from St Lucia and Trinidad and Tobago

“A victim of domestic violence so I was made blind as a result and he was in prison and so now we are in fear of our lives”.

“As my mum said mum got brutally attacked by my mum, we ran away for life and ended up here.”

“I have been a victim of domestic abuse, since then I've been running and scared ever since been sleeping rough for many years. I have 40% use or my hand was chopped up by my partner, i took a job out of the area so safer for me, my new partner started ro threaten me and my child, so then I decided to leave the country he has family in the police, I was invited by a friend who lives in the UK, so when I got here I was left stranded.”

Study/ Work

- Respondents come from Cameroon and Iran

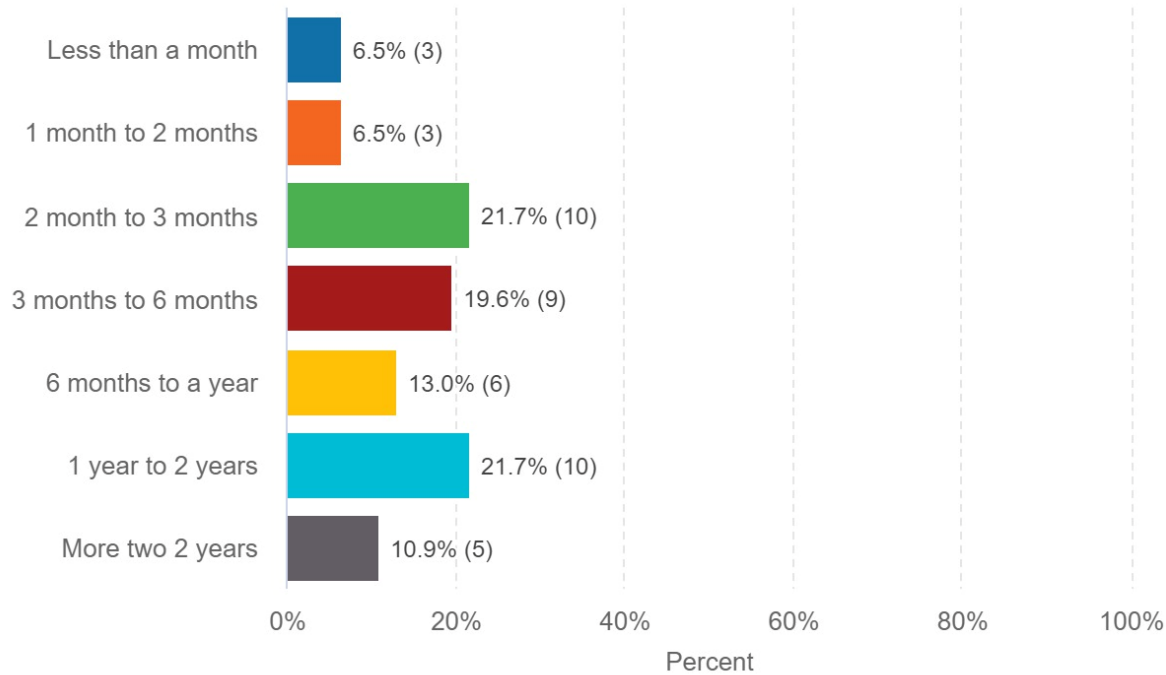
“I had a student visa for studying in the UK/ Was here on a student visa, but I arrived here with a student visa, for university. After that-, actually, I'm a musician. I made songs against my government. After that, my government attacked my home and my family in Iran. Unfortunately, I went to-, asylum seeker/ The government attacked my old home, in my country, and asked many questions, security questions, with my family, and all of my accounts were banned.”

2. How long have you been here?

- There was a range from some who have arrived in recent months. However, a third had been here over a year and more.

Survey:

How long have you been here?



Interviews:

How long have you been here?	
Less than a month	0
1 month to 2 months	3
2 months to 3 months	1
3 months to 6 months	1
6 months to a year	1
1 year to 2 years	4
More two 2 years	2
	12

Interview transcript

Moderator: Tell us of your experiences of how and why you arrived in the UK.

Respondent: I arrived here with a Skilled Worker Visa, but I discovered it when I was already here.

Moderator: Which kind of visa?

Respondent: A Skilled Worker Visa, yes. So, it was done by an agent for me right here, and following this information, he told me I'll have to arrive then, he gave me an address at Wolverhampton where I have to collect my biometric resident permit, BRP, yes. I got it from there and from there I hadn't anywhere to go, I was just lost. New in a new country, I didn't know where to go.

Moderator: How come you were lost after that? What happened?

Respondent: What happened? I came, no accommodation, nobody to welcome me from the airport, it was just from (inaudible 03.46) information from information that I got from passengers, strangers, they had to lead me to Wolverhampton for me to have my document. Then as I got there, as I got that one, frustrated as I was, I had to contact the police and they sent me here. So, my situation, I had to (talking over each other 04.26), and presently I am not a migrant, an asylum seeker.

Moderator: So, did the police tell you to register as an asylum seeker?

Respondent: No, I went to a police station, but I was disappointed.. They told me to go and-, a passer-by sends me to Scotland, Glasgow. I took a bus to Glasgow. I arrived at 5PM there. I also did not know where to go. So, I went to the police station, they struggled to call the charity (inaudible 05.17). The charity (inaudible 05.16) refused to accommodate me there, telling me that with the type of visa I have I can't benefit from their service.

Moderator: What was the name of the charity?

Respondent: I don't know. It was over the phone, the police contacted them. She gave me the number to call them. My phone was down, low battery, so she had to do it for me. She told me that people will contact me, she has given them my number. They sent me somewhere to go and they can charge my phone. So, I went to an area to charge my phone and I was waiting for their call. Around 7PM, they called me, I presented myself, they asked me what type of visa I have. I told them I have Skilled Worker Visa. They said, 'Oh, sorry', they can't help me. They can't help me with the type of visa I have. I had to come back to London.

Moderator: How long have you been living here?

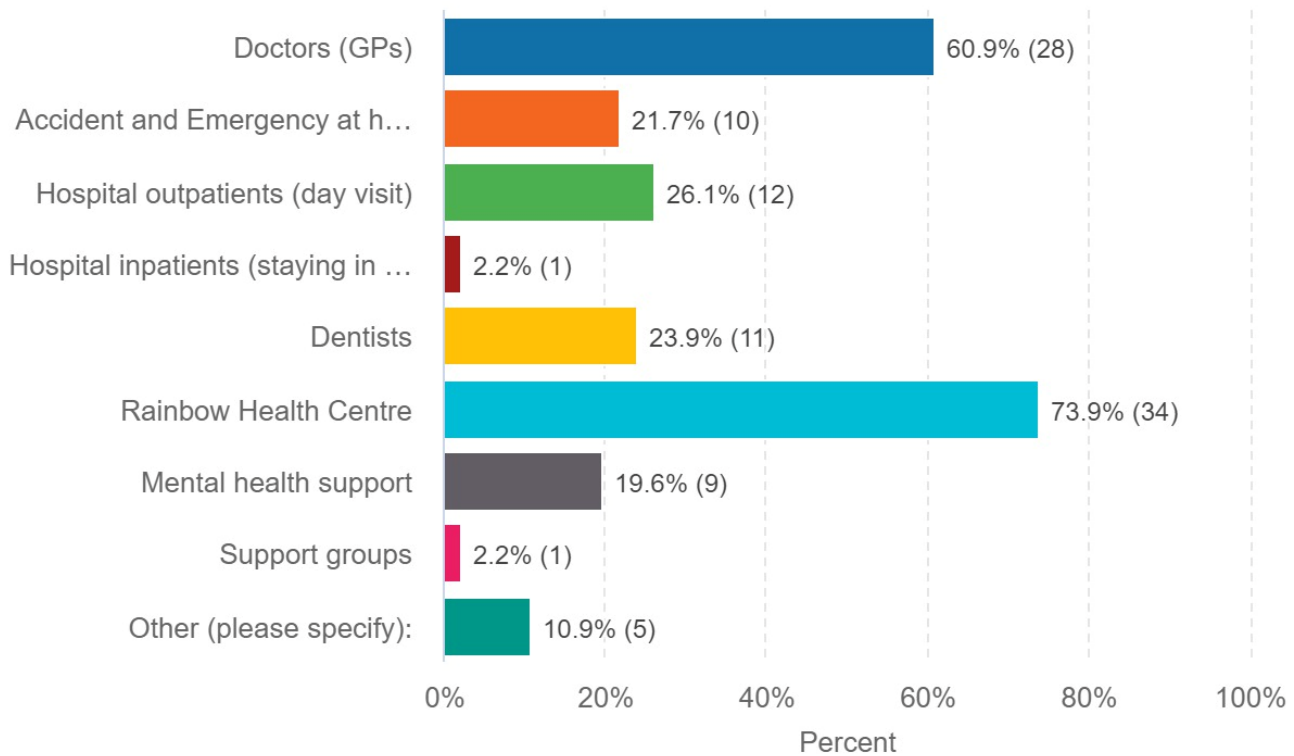
Respondent: 3 months.

3. What services have you used?

- GP services were most heavily used, with Rainbow Health Centre which is a dedicated GP service for homeless and asylum seekers being used the most (*see Appendix, page 51*).
- While many had used GPs more had used Rainbow Health Centre suggesting a lack of knowledge about what general practice means.
- Other services included accident and emergency, hospital outpatients, mental health services and dentistry. Five had used opticians.

Survey

What services have you used?



Other services: three were opticians.

Interviews

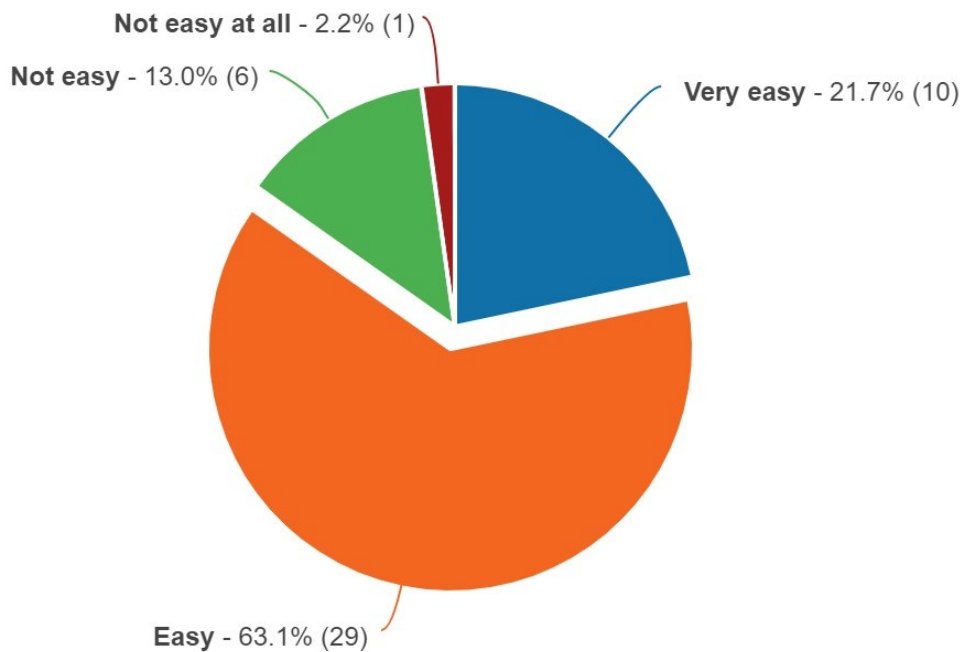
Which services have you used?	
GPs	7
A&E	0
Hospital Outpatients	1
Hospital Inpatients	0
Dentist	4
Rainbow Health Centre	12
Mental Health	1
Support groups	0
Other	2x Opticians

4. How easy has it been to access services?

- Most have found service easy to use, particularly the Rainbow Health Centre and GPs.
- Some had challenges with services beyond GPs.

Survey

How easy has it been to access services you need?



Interviews

How easy has it been to access services you need?	
Very Easy	1
Easy	9
Not Easy	1
Not Easy at all	1

5. What services have been easy to use and why?

- Rainbow Health Centre has been highly commended particularly their strong relationship with the accommodation hotels, enabling access to registration and primary care services, as well as referral to other services.

Rainbow Health Service and GP

"Making an appointment for a doctor is almost easy."

"By calling and shipping on time."

"GP system is easy to use since you can easily book an appointment."

"GP service Good transport system put to our disposal to reach to the GP."

"GP it was easy to use."

"GP for registration."

"Rainbow health centre very easy as I got help to register and we drive there easy."

"I can only buy medicine from stores because GP's response time is very long."

"Doctors easy to use services."

"Because the doctor help me a lot helped. Put my mind at rest and help Me with depression so good service."

"The doctor very good I have depression so hard to sleep need help and doctor help me. Very much feel safe here "

"To be welcomed they investigate me which is good, but I have no got any other service yet other then the GP."

Other services – positive

- Pharmacy, mental health, sexual health, hospital services and opticians were seen positively.

“Pharmacy is close to the GP which is a good approach.”

“The talking therapy was so fast and easy, because immediately they talk to me it was fast, also the sexual clinic for implant was fast.”

“The hospital was a good service and rainbow been good, they communicated well in both places, once you understand them.”

“It works really well.”

“Easy for the both really for hospital and the GP.”

“Because they are doing it very kindly and speaking with us, I had a hand operation and they do a very good service for me at St George’s.”

“Rainbow ans opticians were very easy, they gave me tests and formulated me ans fitted me with glasses.”

“I had my baby by c section at Croydon hospital, good care and priority to Pregnant woman.”

Transport and other support

- Respondents very much appreciated the connection between the hotel and Rainbow Health Centre in setting up appointments and providing transport.

“The hotel organise every for us so it is easier to access.”

“All transactions received by hotel.. So very easy to do our service.”

“GP because the hotel take us by car and bring us back.”

“Transport is good from the hotel, but the appointment it take a long time to get appointments.”

General Negative

“Big problem on my hand break, many services have been offered to me but none have done any practical work.”

“Too easy going back for eye problem no solution.”

“GP is easy but other health services such as emergency hospital services are very difficult and time taking.”

Interview excerpts

Moderator: What services have you used?

Speaker3: Who helped very well?

Moderator: Yes.

Speaker3: (Respondent speaking their own language 07.11).

Speaker2: Yes. (Respondent speaking their own language 07.16).

Speaker3: (Respondent speaking their own language 07.17).

Speaker2: Help with everything .

Speaker3: All of them, they are helping very well.

Moderator: Of course, your baby was born here.

Speaker2: Yes.

Moderator: Did you go with the normal GP or was it Rainbow Health Centre?

Speaker3: (Respondent speaking their own language 07.38).

Speaker2: GP.

Speaker3: Yes. The GP. It was the Rainbow one.

Moderator: How did you register with them?

Speaker3: (Respondent speaking their own language 07.56).

Speaker2: (Respondent speaking their own language 07.57).

Speaker3: When we first came to the hotel they said, 'Do you have anything? Like, any allergies and stuff.' And then, we went to the GP and then we got to register there.

Moderator: The hotel told you how to register?

Speaker3: Yes. The hotel.

Moderator: Or were there people here from Rainbow that helped you?

Speaker3: Yes. The people in the Rainbow, they helped us really well.

Moderator: How happy have you been with Rainbow?

Speaker2: Very happy. The UK is very good. I'm very happy here. Yes. My daughter's very happy. School is very happy. Pupils are very good. (Respondent speaking their own language 08.53).

Speaker3: My mum said, 'I don't think I'm from Iran anymore. I want to be from here.'

Moderator: I'm glad you feel at home.

Speaker3: I feel, like, to stay here forever.

Moderator: Rainbow health service, the GP is good?

Speaker3: Yes. So good.

Speaker2: Yes. Very good.

Speaker3: They are helpful.

Moderator: And you can easily get an appointment?

Speaker2: Yes. Very good.

Speaker3: Yes. When we want an appointment next week they say, 'Come, let's get you an appointment.'

Moderator: Do you need to use interpreting services?

Speaker2: Yes.

Speaker3: (Respondent speaking their own language 09.43).

Speaker2: Yes.

Speaker3: Yes. They're good.

Moderator: And are they good?

Speaker2: Yes.

Speaker3: Yes.

6. What services have been difficult to use and why?

- Emergency services having long waits.
- Access to dentistry.
- Waiting for referrals.
- Difficulties in seeing specialists.
- Need for a translator or interpreter.
- Lack of understanding about mental health needs.
- Difficulties in accessing the appropriate medication.

Ambulance and Accident and Emergency

“999 service is difficult to use because it takes a lot of time for an ambulance to arrive.”

“Hospital emergency because one should wait for five or more hours.”

“The emergency was hard to use we had to stay there more than two/three hours so it was hard to say there so long.”

“Emergency hospital appointment is very stressful and we have to wait for too long.”

“Booking ambulance is really hard because it will takes many hours to come.”

Access to dentistry

"No I think it was easy, maybe take too long time to get see dentist."

"Was good but the dentist was a little far."

"Was hard to access the dentist, as there was no access to a translator and my wife still have a bad problem her teeth and not sure what to do about her teeth she has a deep hole."

Waiting for referrals

"Sometimes take a along time, my husband his foot, nail has some problem have been waiting from dec 23 now th appointment is on March 24 that is a long time, also I've been more then two months have a back disk, and I want to refer to a bone doctor And only paracetamol, I really need to see a back doctor, have asked two appointments to be referred first time dr gave me paracetamol with morphine second time also paracetamol so I want to be referred next time. Also <<physician>> is so helpful with our situation so helpful I have a bad situation for my children they don't eat the food at <<hotel>>, they have lost weight but was told we have a waiting list, dr Hussain wrote a letter for me so he is helpful, the nurse not helpful as there is 700 patients and not helpful, dr <<name>> very helpful."

"The specialists are hard to see so referrals, difficult to get referral ent specialist."

"The gp can't do anything for eye problem, I went to the eye doctor they give me only one paper saying i need glasses but my eyes are still in pain and I am in the basement and it is dark down there and so make my eye problem worse."

"Physio and radiology is hard to get access to."

“Big problem on my hand break, many services have been offered to me but none have done any practical work.”

“Big problem on my hand break, many services have been offered to me but none have done any practical work.”

Mental Health access

“When she is in a bad mood, they meet very late.”

“My heart operation, and I had a nervous breakdown and want to kill myself and did not get help.”

“I have depression and came to the doctor and they did not take care of me and they don't believe me because there are three of us in a very small unit and I have trouble sleeping.”

Access to other services

“The only difficulty is to take a appointment, back home it is the same day appointment, but here it has taken two weeks to get an appointment.”

“It is very difficult to get the right medicine for the disease in question.”

“Get glasses and checkup for dental because I don't have formula and I don't have HC2 form.”

“I can't have access to opticians, because I don't get signal as I'm in a room -2 basement so my me and my daughter needs to see the opticians.”

"I can only buy medicine from stores because GP's response time is very long."

"To access the money."

"To contact home office and migrant help because they make you wait for weeks to reply. And the food is so bad."

Interview Transcript

Moderator: How easy has it been to access services that you need? Very easy, easy, not easy, not easy at all?

Participant 9: I think not easy.

Moderator: Which services have been easy to use?

Participant 9: Compared to my country nothing is easy here because we go to the hospitals or some GPs, you know, in our country and they visit us and they provide necessary things, and something like this. But here, for GPs, the appointment is too long so when we call the GP for an appointment it's about 10 days after, and sometimes our problem will be better or something like this. Or in the hospital we could stay a long time, for example 5 hours or more, for a visit and it's too difficult, especially for us because we have children and it's so hard.

Moderator: Do you mean that you can't stay in the hospital for a long time?

Participant 9: Yes, for example, my husband, who had a problem, he had ops on his bottom in the first days we were here and we went to the hospital, waited, in lots of pain and I think (inaudible 04.41) and we stayed there for 5 hours because of a visit. And after that they said, 'Oh, you should go to another hospital' and, 'We can't do anything here for him.'

And I think they could visit the patients early and if they can't do anything for them or they can't (inaudible 05.18) do something for them they can send them to another centre or something like this. I think these hours are very important for a patient and he was very painful, and I think it's so bad, yes.

Moderator: Because you could only visit for 5 hours?

Participant 9: Yes.

Moderator: But you wanted to visit for longer?

Participant 9: Yes, because a visit, it can be done in a shorter time. Or for surgery, because his surgery wasn't an emergency, for 2 days he was in a hospital with pain and fever, and after 2 days we went to the-, I think, let's see. Yes, I went to visit the management, and something like this, and I told them, 'Please, do something for my husband' and then, after telling and telling and telling, they did the surgery.

Moderator: Which services have been difficult to use and why?

Participant 9: I think having an appointment with an expert, and it takes too long a time. And for dentists it takes too long a time. So everything is about time, you know?

Moderator: The waiting times?

Participant 9: Yes, the waiting time

7. Have you heard of the Care Quality Commission?

- Only one of those surveyed had heard of the Care Quality Commission.
- Only one of those interviewed had heard of it and could explain what it did.

Have you heard of the Care Quality Commission?



“Can't smoke in the room and when the fire goes off leave the room immediately.”

: Yes. Sometimes, some person came here, and gave me some information about that. It's good. Actually, we have some charity-, some charity came here, and supports asylum seekers, for example, to go to sports, go to running. For example, I'm running every Sunday, in the park run. I think this is good for health.”

Interview transcript

Moderator: "Okay. Have you heard of the Care Quality Commission before?"

Respondent: "I read it online."

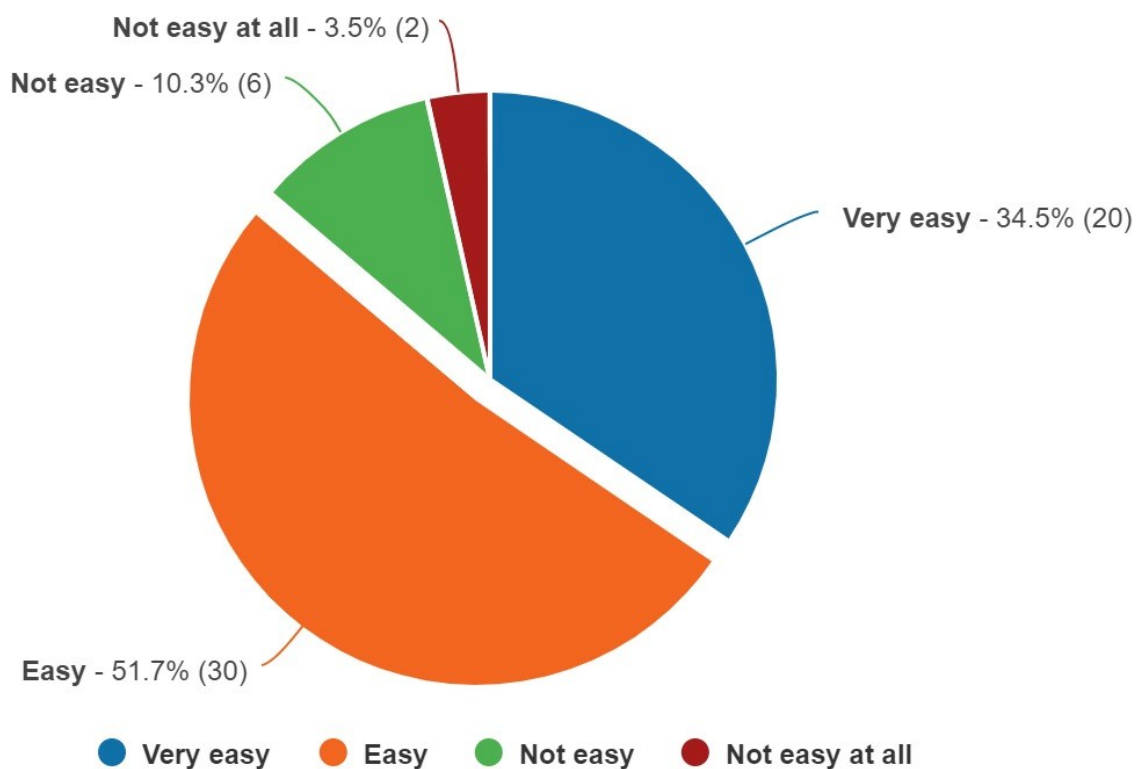
Moderator: "What did you know about them?"

Respondent: "Care Quality Commission is a commission. So, if I'm right, if I've not forgotten, it's a commission that has that goal to know the welfare of a patient, yes, and to keep their data securely. Commission whose goal is to ensure patients welfare and protect their data."

8. Ease to register with a GP and which surgery they registered with.

- Most found it easy or very easy to register, due much to the availability and accessibility of a dedicated GP service in Rainbow Health Centre.
- Some have found it more difficult, but this had been very few.
- It should be noted that nearly all our respondents came via Rainbow Health Centre, so there will be a bias towards this service.
- However, the significant positive response shows the benefit of the dedicated GP service for asylum seekers.

How easy has it been to register with a GP?



How easy is it to register with a GP	Interviewees
Very Easy	4
Easy	7
Not easy	1
Not easy at all	0

Easy due to relationship between hotel and GP

"You can easily book an appointment for you and your children."

"The hotel takes care of that I informed us on the day and time to make it to the GP."

"Because its near me."

"Very easy they have been doing transfer to rainbow so very very easy."

"GP is easy to book."

"As the hotel arrange everything."

"Okay they bring us here so its veru easy, thr hotel organised it for us."

They (the hotel) organise it al for use makes it easy

"Easy to See the doctor no problems for me "

"The social worker in the hotel give us the form to register in the clinic."

"All register did by hotel."

"Because of all the people that are in charge of registration they are very welcoming."

"It's easy."

"The hotel reception do help us."

Transport

"The transport here was really good, they were early so was good."

"They give us transport for it's easy."

"Yes, because we take taxi there so easy."

Translators/ interpreters

"No problems so east always seem to have translators."

Waiting

"You have to be in line for a long time to get an appointment."

"Easy but it takes time."

"Quick appointments."

"Because we tell the hotel reception, they will write down our name, but we still haven't been able to get a GP appointment after a month."

Other issues

"Have to wait for long periods of time."

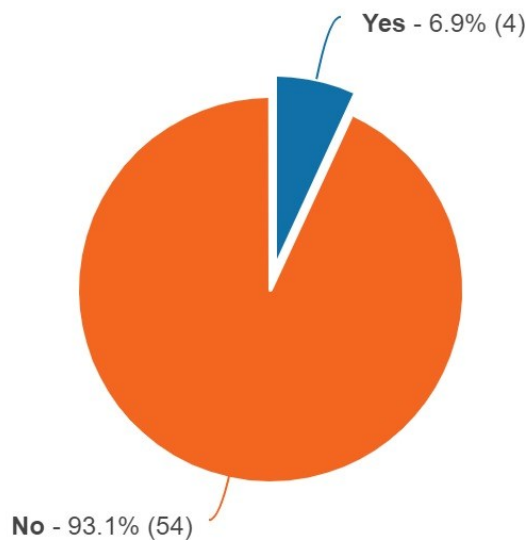
"Because of eye problem."

Interviews -check

9. Safe Surgeries

- Safe Surgeries can be any GP practice which commits to taking steps to tackle the barriers faced by many migrants in accessing healthcare. At a minimum, this means declaring your practice a 'Safe Surgery' for everyone and ensuring that lack of ID or proof of address, immigration status or language are not barriers to patient registration. See more details here: <https://www.doctorsoftheworld.org.uk/safesurgeries/>
- Most had not heard of Safe Surgeries. This may be due many using Rainbow Health Centre, which is already committed to the values of Safe Surgeries, or a lack of knowledge about the scheme.
- None of the interviewees were aware of Safe Surgeries.
- Of those that did they seemed to know informally from the community around them.

Are you aware of Safe Surgeries, where GPs commit to removing the barriers to healthcare access faced by many migrants in vulnerable circumstances?



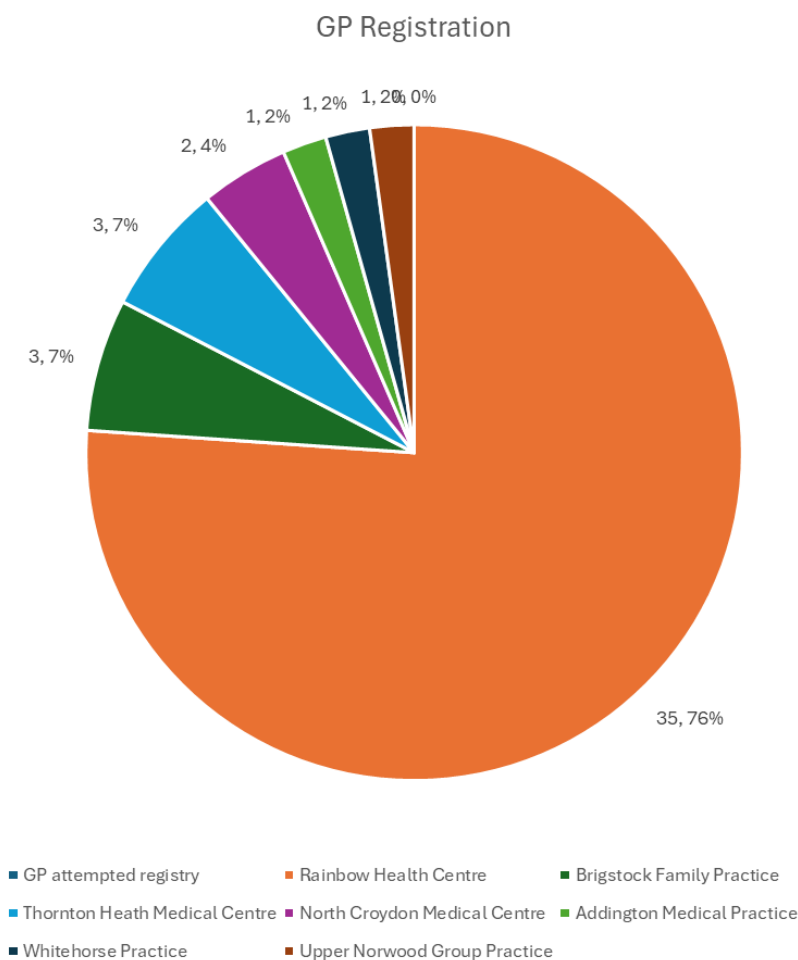
Comments on Safe Surgeries

"Through word of mouth."

"From friends who were here."

10. Which GP did they try to register with?

- Rainbow Health Centre was the surgery most registered, but a quarter did register or try to register with six others and some attempted without success.
- Again, it should be noted the cohort did come mostly from Rainbow Health Centre but does show the benefits of a dedicated GP service for asylum seekers or ability for asylum seekers to join other surgeries.



Registration -	Interviewees
Rainbow Health Centre	9
Thornton Heath Medical Centre	1
None	1

11. What improvement would you like to see to services?

- The key improvements suggested were about referrals and waiting times and response times. Some needed help with interpretation and translation.
- Others had issues concerning with their situation and where they were staying.
- Some felt no improvements were needed at all.

Referral and specialists (including pharmacy)

"It's much to have a specialised doctor in your pocket, ans the only problem is with your gp whatever problem you have whatever pain you have they only give you painkillers."

"I'm really upset, the referral process needs a special doctor, why do I keep getting prescribed paracetamol, I need to solve the problem. I enter emergency to the hospital I was so anxious And there were no beds, they sit me in the wheelchair and there were no beds, other things were no beautiful I was able to enter without id card here you can just enter, this surprise me there were no beds."

"When you see a consultant, takes a long time from seeing the GP to see the consultation."

"Better service to get referral."

"Improve to see a specific for nervous feeling take too long time."

"Hospital out patient services please."

"Increase the number of clinics so that patients can be treated sooner."

"If it's possible when a person send a request for a health issue they should give immediately, I asked the doctor to find out about my kidney pain and I still waiting."

"To find a solution to what is the problem with my eyes, it's is hurting and I don't know what is wrong they only give me glasses."

"Raising the level of pharmaceutical quality."

Response times

"If emergency ambulances could be faster."

"Increase the response time to GP."

"Quicker services more help when it comes to services."

"To make the appointment quicker that's the only thing I think."

Referral and specialists

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"I'm really upset, the referral process needs a special doctor, why do I keep getting prescribed paracetamol, I need to solve the problem. I enter emergency to the hospital I was so anxious And there were no beds, they sit me in the wheelchair and there were no beds, other things were no beautiful I was able to enter without id card here you can just enter, this surprise me there were no beds."

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“If it’s possible when a person send a request for a health issue they should give immediately, I asked the doctor to find out about my kidney pain and I still waiting.”

“To find a solution to what is the problem with my eyes, it’s is hurting and I don’t know what is wrong they only give me glasses.”

“Raising the level of pharmaceutical quality.”

Non-health services

“To be in a single room not with other people.”

“We want a quick decision for the asylum, my mental health is going down I feel like doing suicide I have two small children as I’m unable to work.”

To care about our children , my daughter lost 4 kilos because of the bad food and because I am in the hotel for 10 weeks without any financial support.

Interpreting/ translation

“Sometime they dont understand what we are saying, i need to eat medication and i get hot.”

“They need a translator available at the dentist it makes it easy to access services.”

Summary of activities

a. Country of origin

- Respondents came from a range of countries from Caribbean, Central America, South America, Europe, Africa, Middle East, Indian subcontinent, and South East Asia.

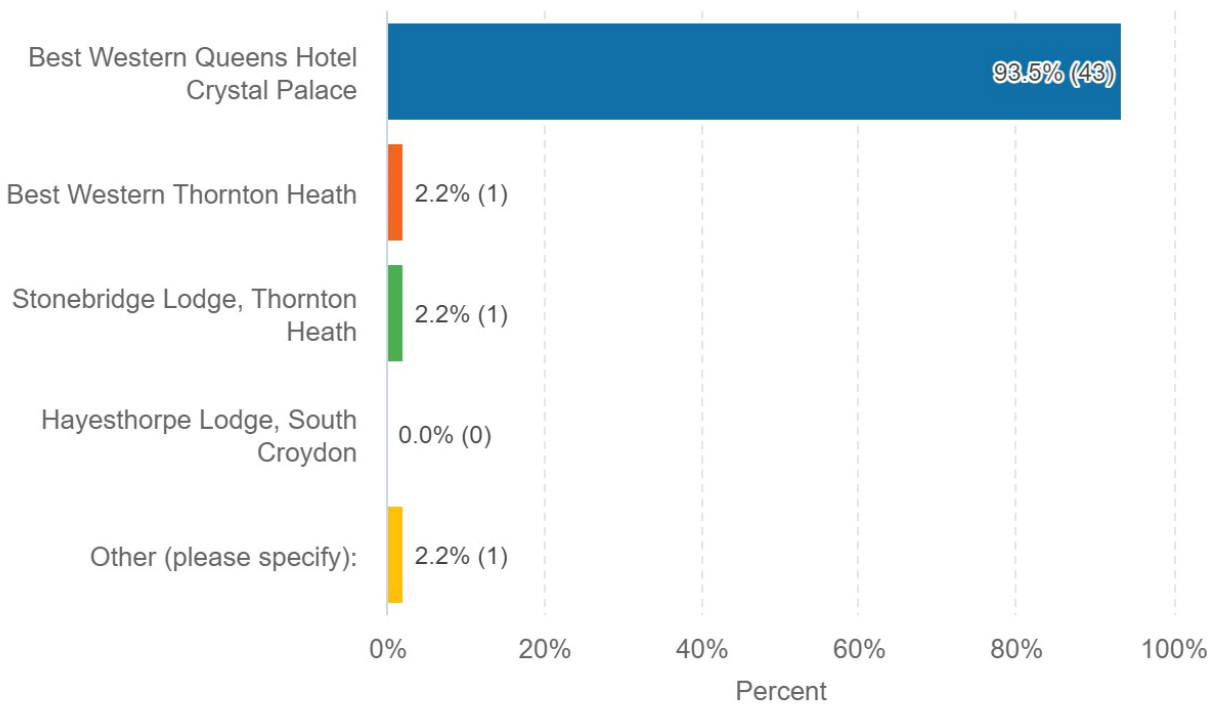
Country	Surveys	Interviews	Total
Iran	9	5	14
Afghanistan	10		10
Sri Lanka	5		5
Pakistan	3		3
Cameroon	2	1	3
St Lucia	0	2	2
Trinidad and Tobago	0	2	2
Malaysia	2		2
Eritrea	2		2
Jamaica	1		1
Colombia	1		1
Iraqi Kurdish	1		1
Honduras	1		1
India	1		1
Kurdistan		1	1
Kyrgyzstan		1	1
Lebanon	1		1
Mauritius	1		1
Nigeria	1		1
Peru	1		1
Sri Lanka	1		1
Sudan	1		1
Syria	1		1
Turkey	1		1
	46	12	58

b. Where did they stay?

- Nearly all stayed at the Best Western Queen’s Hotel Crystal Place.
- The bias of this one location should be considered. We therefore cannot easily explore the difference in experience based on accommodation location. It may be that Rainbow Health Centre had a stronger presence here than at other locations, which may reflect the results. More research at other locations would gain more insight.

Survey:

Where are you currently staying in Croydon?



Interviews:

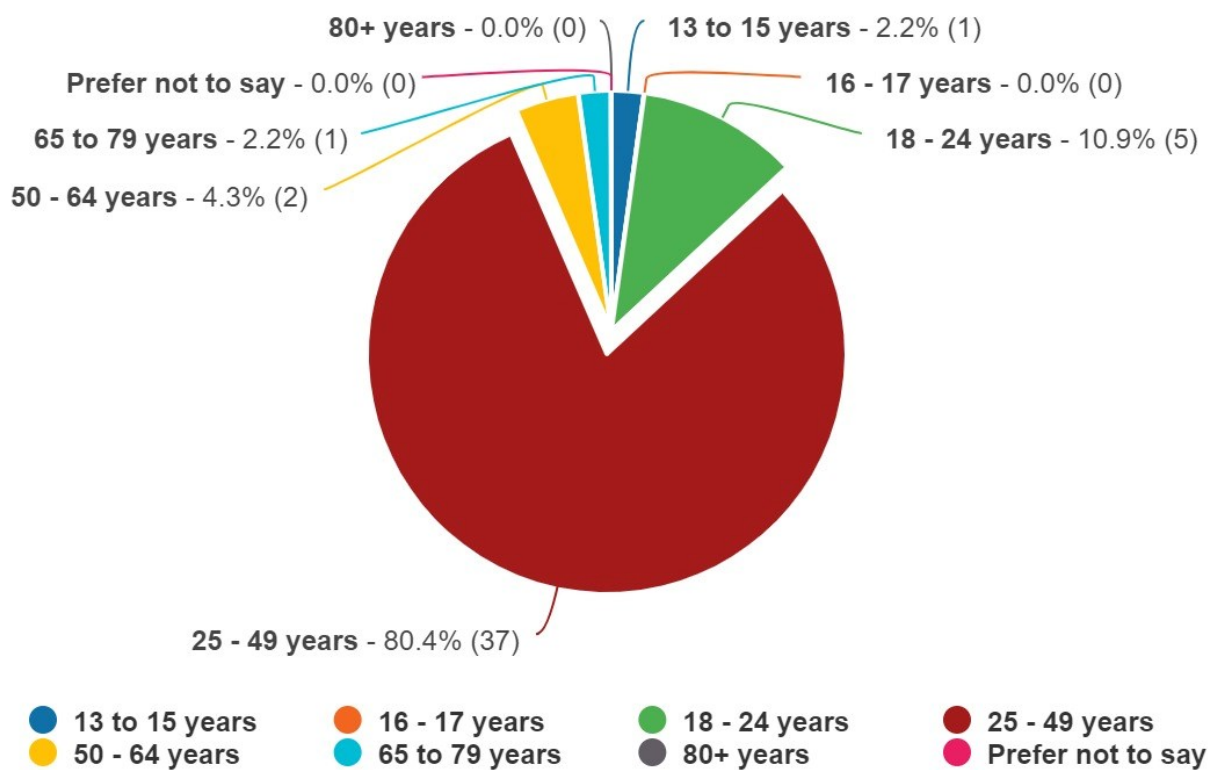
All 12 were residing at Best Western Queen’s Hotel.

c. Age of survey respondents

- Most respondents were 25-49 years old, followed by those 18-24 years. There were relatively few older respondents perhaps reflecting the demographic of asylum seekers.

Survey:

Please tell us your age



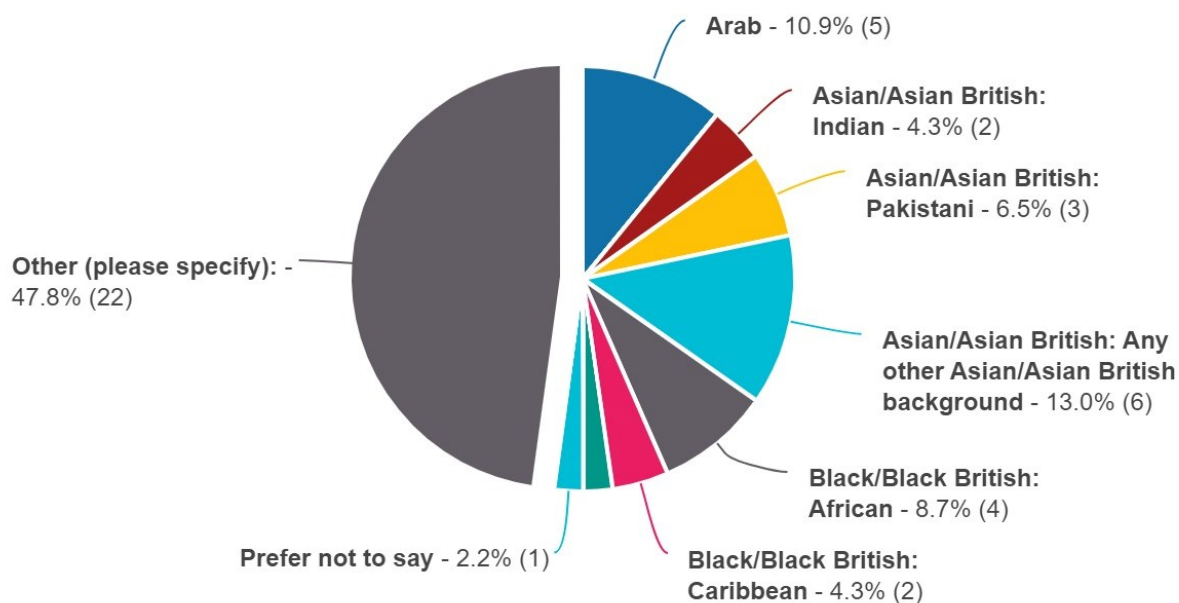
Interviews:

All 12 were 25-49 years.

d. Ethnicity

- A wide range of ethnicities were reflected in the sample, with a leaning toward Afghan, Persian and Kurdish.

Please select your ethnicity



Other Ethnicity	Number
Afghan/ Afghan	7
Persian	3
Latin American 3	3
Sri Lankan	2
Malay	2
Amhara	1
Asian	1
Iranian	1
Kurdish	1
Tamil	1
	22

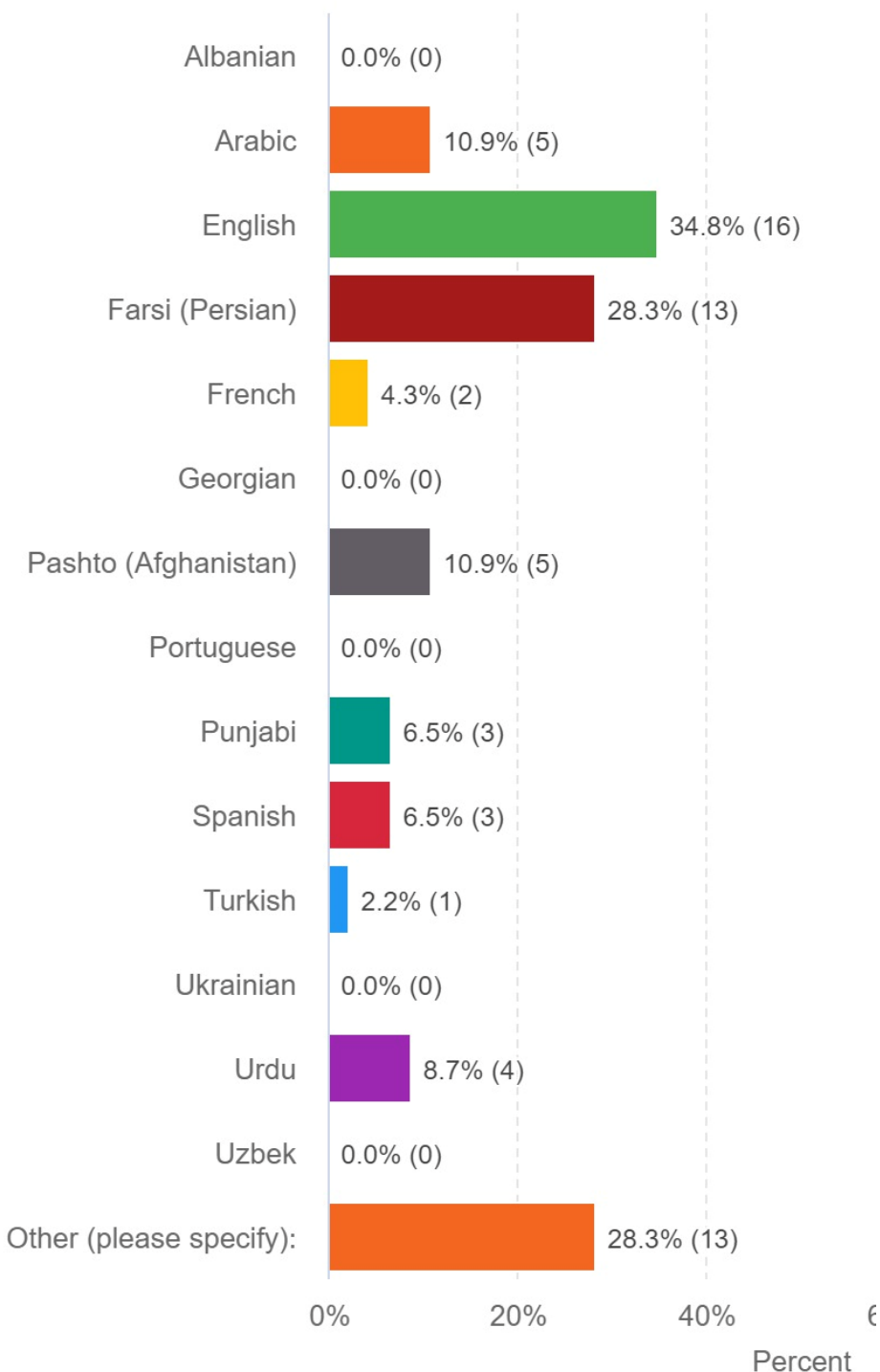
Interview ethnicity (one each)
Asian other
Asian/ Kurdish Iran
Asian/ Kurdish Iraq
Black/Black British: African
Black/Black British: Caribbean
Black/Black British: Caribbean
Black/Black British: Caribbean
Iranian
Kurdish
Kyrgyzstan
Mixed/multiple ethnic groups: Asian and White
Mixed/multiple ethnic groups: Black Caribbean and White
White: Any other White background

e. Languages spoken

- English is still the most common languages but only one in three of the sample. Farsi, Pashto, and Urdu were also represented. Of those that stated others Tamil was the highest, but 23 languages were represented overall, showing a significant diversity even in a sample of 46 respondents,

Survey

Which languages do you speak?



Other Ethnicity	Number
Tamil	3
Malay	2
Sinhala	2
Tigrigina	2
Amharic	1
German	1
Indonesian	1
Kurdish	1
Persian	1
Urdu	1
Yoruba	1
	16

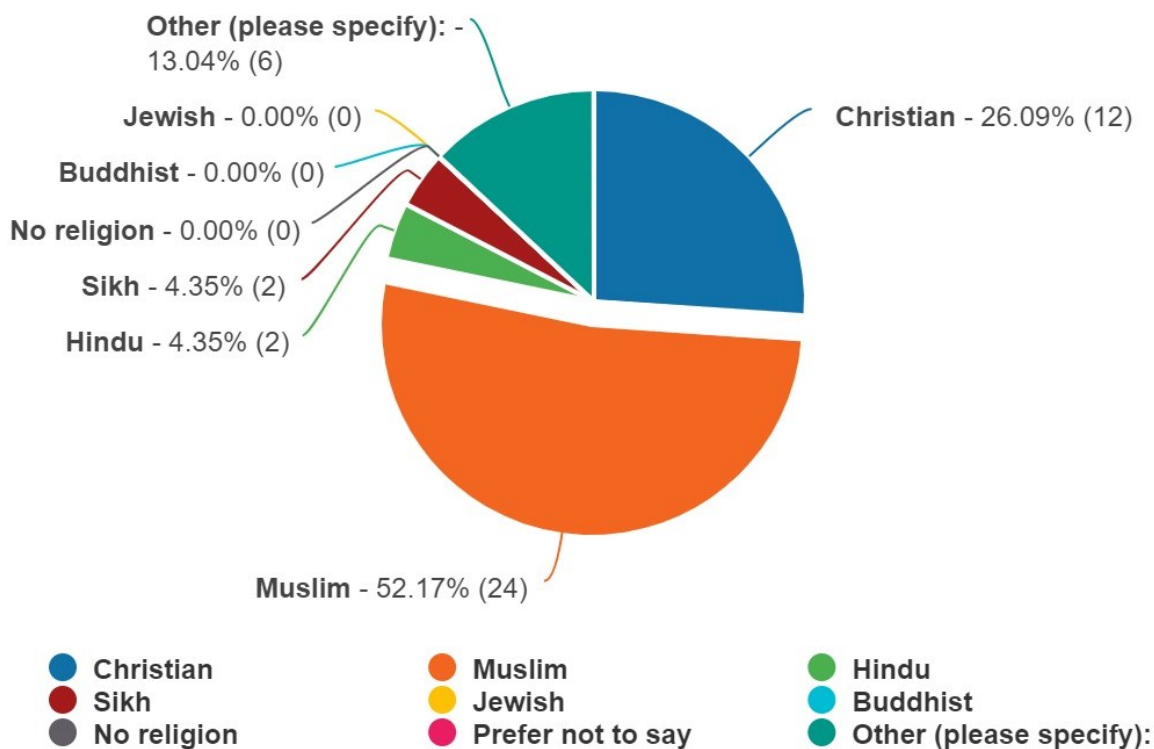
Interview Language	Number
English	8
Farsi	5
French	1
Pashto	1
Kurdish	4
Russian	1
Kyrgyzstan	1
Creole	2
	12

f. Religion or belief

- Most respondents are Christian or Muslim, the six 'Others' described themselves as Protestant, Catholic or 'Christ introduced to me, so I am researching' so are added to with Christian which means around 29% or 18 respondents. Nearly all interviewees were Christian or Muslim.

Survey:

What is your religion or belief?



Interviews:

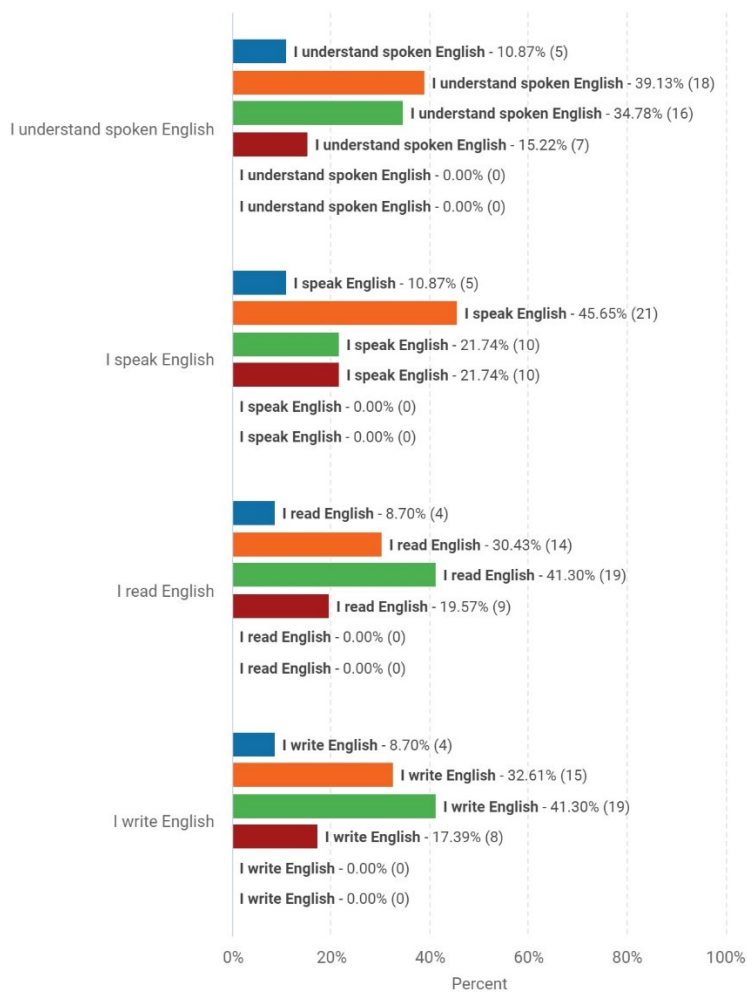
Interview - Religion	Count
Christian	5
Muslim	4
I believe in God	1
Prefer not to say	1
No religion	1

g. Understanding, speaking, reading, and writing English

- Most nearly half could not understand spoken English well, and less 55% felt they could not speak English well. Confidence in reading was higher at 60% and 57% felt they could write English, Numbers for interviewers were slightly higher.

Survey

How well can you understand, speak, read and write English?

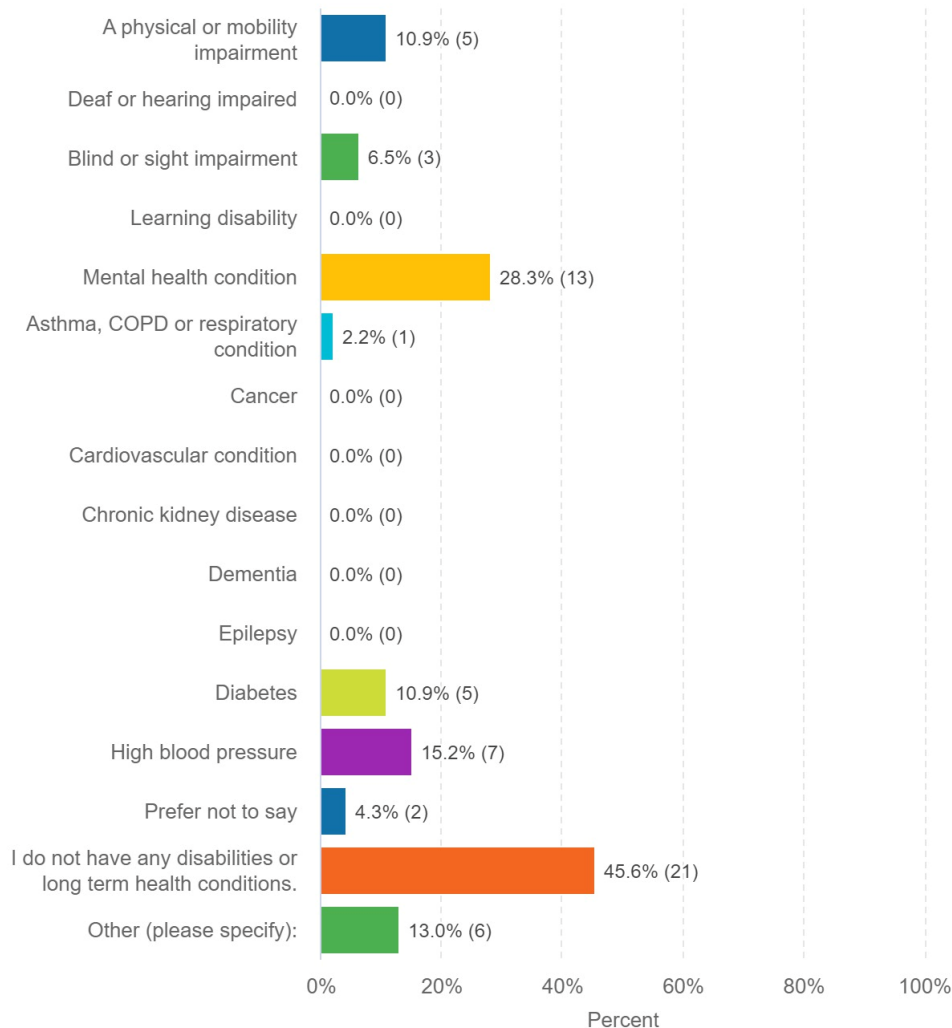


Interviews	Understand	Speak	Read	Write
Very well	5	5	6	4
Well	5	2	3	4
Not well	2	5	4	4
Not well at all	0	0	0	0
Unsure	0	0	0	0
Prefer not to say	0	0	0	0

h. Disabilities and long-term conditions

- Over a third had mental health issues, with some having high blood pressure or a physical or mobility impairment.

Do you have any of the following disabilities or long term health conditions?



Other	
Severe back pain and knee pain	1
Back and knees hurt	1
Lack of iron	1
Fatty liver	1
Not recorded	2

Interview – Disabilities or Long- Term Conditions	
Physical or mobility impairment	5
Blind	2
Asthma	1
Cancer	1
High Blood Pressure	1
Other	1
Anxiety and sleep medication	1
Disabled baby	1
High Cholesterol	1

Comments

“Thank you to Healthwatch Croydon for the work you’ve done in engaging with vulnerable migrants as part of CQC People's Profiles project.

“The report built on what we already knew about vulnerable migrants and has given us further insight into ways they access care, interact with healthcare professionals, and use services depending on their life circumstance.

“We were pleased to see a strong focus on people’s voices and views throughout the report. Healthwatch Croydon understood and delivered the voice of people in this work, which will help us continue to apply people's experiences during regulatory work and in future research or engagement activity we undertake.

“The next steps are already in motion starting with awareness raising and promotion of this work across CQC. We are confident that this work can be applied to different areas of our organisation, and support to build our ability to co-design and involve people, families, and carers from seldom heard communities, in what we say and do as a regulator.”

Ellen Fernandez, Public Engagement and Insight Team, Care Quality Commission

Appendix

i. Rainbow Health Centre

Rainbow Health Centre is a practice which provides tailored support to around 1500 asylum seekers, refugees and people experiencing homelessness within Croydon. The practice offers services such as GP appointments, health checks, mental health referrals and signposting.

The staff at Rainbow Health Centre are dedicated to improving the health and wellbeing of their patients of all ages and go out of their way to ensure they receive appropriate care.

Working to address the inequalities to accessing health and care, the practice offers an inclusive service by providing interpreters for those who do not speak English as their first language, and a transportation service so patients can easily get to and from their appointments.

Rainbow Health Centre has also worked collaboratively with partners including Asian Resource Centre of Croydon, Croydon BME Forum, and Croydon Vision to organise a health event for its patients, bringing services into the community.

Free health checks, sight and dental checks were available for those who came along. The practice also serves a free lunch, and free clothes and toys were kindly bought in by staff and the local community.

Rainbow Health Centre aims to hold more health events for its patients and continues to drive Croydon's ambitions in addressing inequalities to accessing health and care.

<https://www.southwestlondonics.org.uk/news/bringing-health-and-care-to-asylum-seekers-refugees-and-those-experiencing-homelessness-in-croydon/>

ii. Survey questions

1. Introduction and consent

1. We understand vulnerable migrants are waiting to hear decisions on their residency and are staying in accommodation within the borough of Croydon. We want to understand your experiences of accessing and using health and care services in Croydon as well as their knowledge of the Care Quality Commission (CQC), who are funding Healthwatch Croydon to undertake this work. The CQC is the independent regulator of health and adult social care in England. They make sure health and social care services provide people with safe, effective, compassionate, high-quality care.

Consent

I understand that the information I provide will be used for analysing vulnerable migrants' experience of health and social care services inform better service delivery. I have read and understood the study information about the project. I have been able to ask questions about the project, and you have answered my questions to my satisfaction. I voluntarily consent to participate in this project and understand that I can refuse to answer questions. I can withdraw from the study without having to give a reason. I agree that my information can be quoted in your final report, as you will remove any information that would identify me from any of my quotes. I understand that personal information collected about me that can identify me, such as my name or where I live, will not be shared beyond the project team. I give permission for the information I provide to be archived and reused for up to 3 years. I understand that you are collecting information about my healthcare, health conditions, ethnicity, and location because it helps us understand the context of the information and how different groups are affected by using virtual wards and remote monitoring. *

Yes

No

2. From which country have you come from? *

3. Tell us your experience of how and why you arrived in the UK? *

4. How long have you been here? *

Less than a month

1 month to 2 months

2 months to 3 months

3 months to 6 months

6 months to a year

1 year to 2 years

More two 2 years

5. Where are you currently staying in Croydon? *

Best Western Queens Hotel Crystal Palace

Best Western Thornton Heath

Stonebridge Lodge, Thornton Heath

Hayesthorpe Lodge, South Croydon

Other (please specify):

6. What services have you used? *

Doctors (GPs)

Accident and Emergency at hospital

Hospital outpatients (day visit)

Hospital inpatients (staying in overnight)

Dentists

Rainbow Health Centre

Mental health support

Support groups.

Other (please specify):

7. How easy has it been to access services you need? *

Very easy

Easy

Not easy

Not easy at all

8. What services have been easy to use and why? *

9. What services have been difficult to use and why? *

10. Have you heard of the Care Quality Commission? *

Yes

No

If yes, tell us what you know about them.

11. How easy has it been to register with a GP? *

Very easy

Easy

Not easy

Not easy at all

Tell us why.

12. Are you aware of Safe Surgeries, where GPs commit to removing the barriers to healthcare access faced by many migrants in vulnerable circumstances? *

Yes

No

If yes, please say where you heard about this:

13. Which of the following GP practices did you try to register with? *

Addington Medical Practice

Ashburton Park Medical Centre

Auckland Surgery

Auckland Surgery

Birdhurst Medical Practice

Bramley Road Surgery

Brigstock and South Norwood Partnership

Brigstock Family Practice

Broom Road Medical Practice

Broughton Corner Family Medical Practice

Country Park Practice

Denmark Road Surgery
East Croydon Medical Practice
Edridge Road Community Health Centre
Eversley Medical Practice
Fairview Medical Practice
Farley Road Surgery
Friends' Road Medical Practice
Greenside Group Practice
Haling Park Medical Practice
Hartland Way Surgery
Headley Drive Surgery
Keston and The Moorings Medical Practice
Leander Family Practice
London Road Medical Practice
Mersham Medical Centre
Mitchley Avenue Practice
Morland Road Surgery
New Addington Group Practice
Norbury Medical Practice
North Croydon Medical Centre
Old Coulsdon Medical Practice
Parchmore Medical Centre
Parkside Group Practice
Portland Medical Group
Queenhill Medical Practice
Selhurst Medical Centre
Selsdon Park Medical Practice
Shirley Medical Centre
South Norwood Hill Medical Centre
St James' Medical Practice

Stovell House Surgery
Thornton Heath Medical Centre
Thornton Road and Valley Park Surgery
Upper Norwood Group Practice
Violet Lane Medical Practice
Whitehorse Practice
Woodcote Medical Practice
Other (please specify):

14. What improvements would you like to see to services? *

Demographic questions

15. Please tell us your age *

13 to 15 years

16 - 17 years

18 - 24 years

25 - 49 years

50 - 64 years

65 to 79 years

80+ years

Prefer not to say.

16. Please select your ethnicity *

Arab

Asian/Asian British: Bangladeshi

Asian/Asian British: Chinese

Asian/Asian British: Indian
Asian/Asian British: Pakistani
Asian/Asian British: Any other Asian/Asian British background
Black/Black British: African
Black/Black British: Caribbean
Black/Black British: Any other Black/Black British background
Mixed/multiple ethnic groups: Asian and White
Mixed/multiple ethnic groups: Black African and White
Mixed/multiple ethnic groups: Black Caribbean and White
Mixed/multiple ethnic groups: Any other Mixed/Multiple ethnic group
background
White: British/English/Northern Irish/Scottish/Welsh
White: Irish
White: Gypsy, Traveller, or Irish Traveller
White: Roma
White: Any other White background
Prefer not to say.
Other (please specify):

17. Which languages do you speak *

Albanian
Arabic
English
Farsi (Persian)
French
Georgian
Pashto (Afghanistan)
Portuguese
Punjabi

Spanish

Turkish

Ukrainian

Urdu

Uzbek

Other (please specify):

18. How well can you understand, speak, read, and write English? *

Not at all well Not well Well Very well Unsure or don't know Prefer not to say.

I understand spoken English.

I speak English.

I read English.

I write English.

19. What is your religion or belief? *

Christian

Muslim

Hindu

Sikh

Jewish

Buddhist

No religion

Prefer not to say.

Other (please specify):

20. Do you have any of the following disabilities or long-term health conditions? *

A physical or mobility impairment

Deaf or hearing impaired.

Blind or sight impairment

Learning disability

Mental health condition

Asthma, COPD, or respiratory condition

Cancer

Cardiovascular condition

Chronic kidney disease

Dementia

Epilepsy

Diabetes

High blood pressure

Prefer not to say.

I do not have any disabilities or long-term health conditions.

Other (please specify):

21. All those who complete the survey can opt to be placed in a draw to win £50 shopping voucher. To do this we will need to take a name and email address so we can email you the voucher. The winner will be selected and contacted by email by 15 March 2024. Please This will be separated from the survey data before it is analysed, so your responses with anonymous.

Name

Email address.

Thank you for your interest in the survey.

We do need your consent to continue. Do feel free to email: enquiries@healthwatchcroydon.co.uk if there are any questions.

You can see the preview survey here:

<https://www.smartsurvey.co.uk/s/preview/VMCroydon2024/B21E7B0B576D1B81C3F8B8641B25DFw> Window ([smartsurvey.co.uk](https://www.smartsurvey.co.uk))



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