

# What support is needed for people with long term conditions in Sheffield?

On 28<sup>th</sup> February 2025, Healthwatch Sheffield hosted a roundtable conversation with Gill Furniss MP. It was attended by representatives from voluntary sector organisations who support people with long term conditions, and their families and carers:

- Sheffield Association for Spina Bifida and Hydrocephalus (SHASBAH)
- Sheffield ME, Fibromyalgia and Long Covid Group
- Burton Street Foundation
- Diabetes UK Sheffield
- Sheffield Carers Centre
- Healthwatch Sheffield staff sharing insight from members of the public



Discussion focused on the different challenges people with long term conditions and their families face in Sheffield, and what might help to address some of these.

# Specialist clinics and support

Specialist services for people with some long term conditions are missing or minimal. For example, children with spina bifida have a specialist combined clinic at Sheffield Children's Hospital, and can access therapies like hydrotherapy at Ryegate Children's Centre. There is nothing like this for adults with spina bifida – they go to the Spinal Injuries Unit at Northern General Hospital, but this service is not designed for them. They also can't access hydrotherapy at the hospital pool.

The ME Clinic in Sheffield is (like many others in England) based in a mental health trust – indicative of the way that these conditions are viewed. Much of the support focuses on peer support and talking therapies; medical treatments aren't always provided despite there being treatable symptoms as part of the conditions.

Diabetes is a long term condition that does benefit from a great deal of research and funding – however the specialist support and equipment offered to people varies depending on whether they have Type 1 or Type 2 diabetes. There is a stigma related to Type 2 Diabetes, with discussion focussing on lifestyle factors like ultra processed food, rather than support for those who are diagnosed.



Where they exist for long term conditions, specialist nurses are really valued by patients and families for the support they can provide, both in managing symptoms and treatment, and in the wraparound support like knowledge about benefits. Where these have been reduced (for example the spina bifida nurse) they are really missed.

#### Transport

Public transport and taxis can cause problems for people whose long term condition affects their mobility. Booking a wheelchair accessible taxi is extremely difficult – especially as the number of these taxis has reduced in Sheffield since Clean Air Zone changes came into effect and drivers changed their vehicles. Alternative services like Uber have variable pricing – so what should be a £3.50 trip can unexpectedly become £20. If people's travel budget/support is cut, this reduces their ability to access support services and they become isolated. This in turn makes their health worsen. This is especially true for people with a learning disability, who have poorer health outcomes and lower healthy life expectancy than others, and for whom preventative work can help prevent health crises and hospital admissions.

Eligibility criteria for non-emergency patient transport (helping people attend hospital appointments) is changing, which will likely lead to a reduction in the number of people who can access this. There are concerns that this will lead to missed appointments and worse health for vulnerable people.

#### Social care

Getting social care in place for people with long term health conditions is really important – but is often the part of their support that doesn't work well. Many people report that their support is cut when it is reviewed, even if their level of need has remained the same or has gotten higher. Good social care support, and access to activities such as those offered by Burton Street, is important for people's lives, and important for their health.



It was reported that care homes – where many residents have complex health conditions – are also under financial pressure, with some local services unsure whether they would be able to stay open into the next financial year.



There were particular concerns about the care of older diabetic people who use insulin, and might rely on carers at home or in a care home to help them with injections. Inconsistent visit times can lead to problems for people who need this treatment regularly. Care workers are also limited in the ways that they are able to support people with managing their diabetes, for example, not being able to assist within changing Continuous Glucose Monitors.

### **Personal Finances**

Carers allowance is very low, meaning many carers are living in poverty to look after their relatives. The process of applying for benefits is also very complicated – and can seem too difficult for people who are very unwell, or their family carers who are under a lot of strain. Because of this, there are many people who aren't getting the support they are entitled to.

Type 2 Diabetes in particular is interconnected with poverty, deprivation, and health comorbidities. If you already have a health condition, you're more likely to be diagnosed with Type 2. If you have Type 2, you're more likely to develop other conditions. The map of where people have diabetes in Sheffield maps almost exactly onto areas with multiple indices of deprivation.

## National Policy impacting health and care

Small social care organisations, and small to medium charities, report that the increase in employer National Insurance contributions will be difficult (or impossible) for them to manage. Many organisations in Sheffield aren't sure how long they will be able to stay open and provide support. Council funding isn't generally adjusting to cover this uplift – there was a strong sense that this sector was forgotten by government when deciding this change.

Nationally, work has been done on an ME delivery plan which was due in March – but the government has indicated that there's no additional money to support this. People with ME feel that they are the 'poor neighbour' of other long term

health conditions with a lack of commitment to addressing their needs. ME is a condition that disproportionately impacts on women and it was acknowledged that there is a wider issue whereby women's health conditions are less well addressed – this is something which Gill told the group she is committed to working on.

