

COVID-19 Insight Report

With COVID-19 we have had to change the way we work. This has meant that all staff have been working from home since March 2020 and all face-to-face meetings have either been cancelled altogether or have moved on to an online platform.

We saw a drop in members of the public feeding back to us via our usual channels, such as phone calls, emails or social media. With non-urgent treatments being canceled and health and social care services moving to online support as much as possible, we were anticipating a decrease in people sharing their experiences of health and social care.

To make sure we were still hearing from members of the public during COVID-19, we joined forces with [Healthwatch Swindon](#) and [Healthwatch Wiltshire](#) (BSW) and shared a survey across the area. We invited people to let us know their experiences of care during this period, as well as asking an array of other questions, such as how easy did people find getting information about COVID-19 and how the pandemic has impacted their mental health, if at all.

In addition to this [we shared news items on the Advice and Information section of our website](#), on how people could manage aspects of their health and wellbeing, during COVID-19. This ranged from advice on:

- end of life care,
- domestic abuse,
- mental health support
- shielding,
- dental care,
- where to get bereavement support and
- general information on COVID-19

All pages were updated in line with government guidance and everything we have shared during this period has been a mix of national and local news and information.

We also shared regular [local and national news items](#) from the BSW Clinical Commissioning Group, public health information and Healthwatch England messaging consistently across all of media channels.

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COVID-19 Survey

We launched the survey in April and shared this across social media, including our monthly e-bulletin and via three adverts we took out on Facebook, the latter being the most effective way to expand our reach and gather more feedback. In total the three adverts reached **21,274 people** and **827 people** clicked the link to [the article on our website about the survey](#). Our Volunteer Support Officer also shared this in the weekly newsletter going out to volunteers, inviting them to participate and share amongst their networks. In total we received 45 responses, the majority of whom (39/ 89%) identified as female.

Key findings of survey

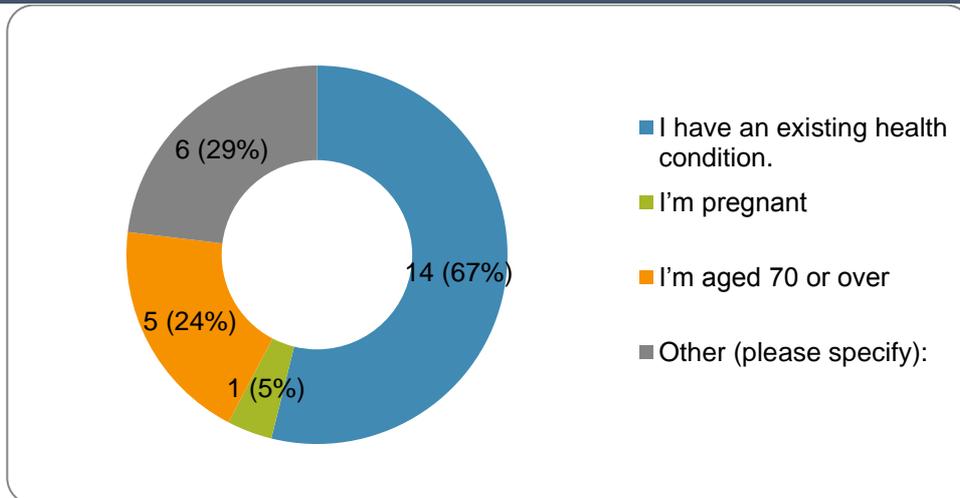
- The majority of people who responded to this survey told us that the COVID-19 pandemic had affected their mental health and wellbeing, with 26 (58%) people saying it has had 'some impact' and 13 (29%) saying that it has had a 'significant impact'.
- A higher proportion of people found getting, understanding, acting on and keeping up-to-date with information about COVID-19 either 'very easy' or 'easy'. The number of people finding it 'difficult' or 'very difficult', however, increased when it came to acting on and keeping up-to-date with changes.
- The topics people found most difficult getting information about were: Changes to the health care services they usually access (e.g. GP practice, pharmacy, hospital outpatient appointments, community nursing visits), testing for COVID-19 and accessing help in their local community (e.g. getting groceries or picking up medication).
- There was positive feedback about phone and video consultations, with most people saying that it had worked well for them and understanding the need for remote consultations.
- Most people were able to access the medication they needed. Nearly half of the respondents found getting their medication 'easy' or 'very easy' versus just over a quarter who found it 'difficult' or 'very difficult'.

What else did we hear?

We asked 43 questions in total and there was an opportunity for respondents to expand on some of the answers they answered in the free text boxes.

Just under half of the respondents (21/ 47%) told us that they considered themselves to be in the high risk category, with this being broken down in the following way:

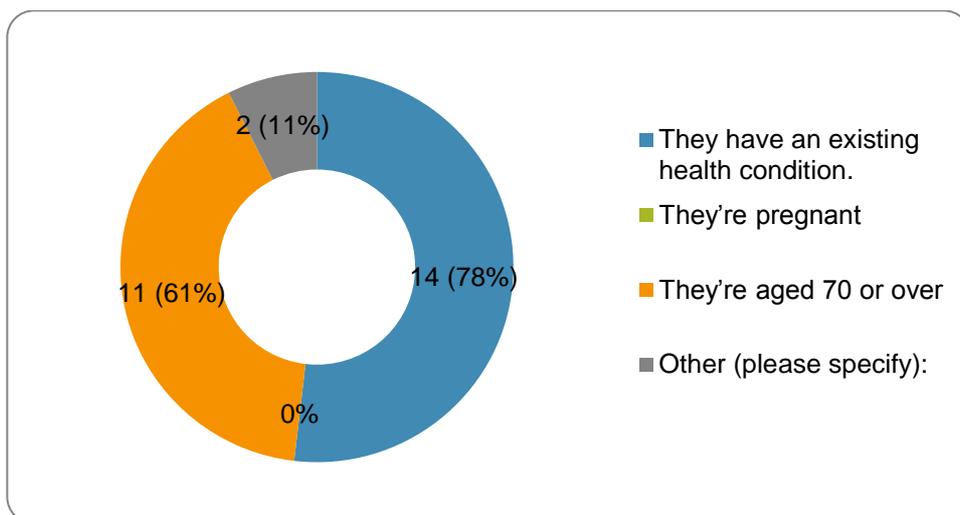
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*Please note that we received 21 responses to the follow up question and respondents were asked to tick all that applied. This is reflected in the above figures.

In the 'other' section some said that they were overweight, had multiple conditions and one respondent told us that they and their family have COVID-19.

Five people told us they had received a letter advising them to shield and 18 people told us that they care for, support or live with someone, or more than one person, who is considered to be at high risk from COVID-19, six of whom who had been advised to shield. The breakdown of this is as follows:



*Please note that we received 18 responses to the follow up question and respondents were asked to tick all that applied. This is reflected in the above figures.

One respondent went on to say:

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“My wife has cancer and Covid-19. Her chemo has been delayed thus her cancer has grown and is causing huge problems.”

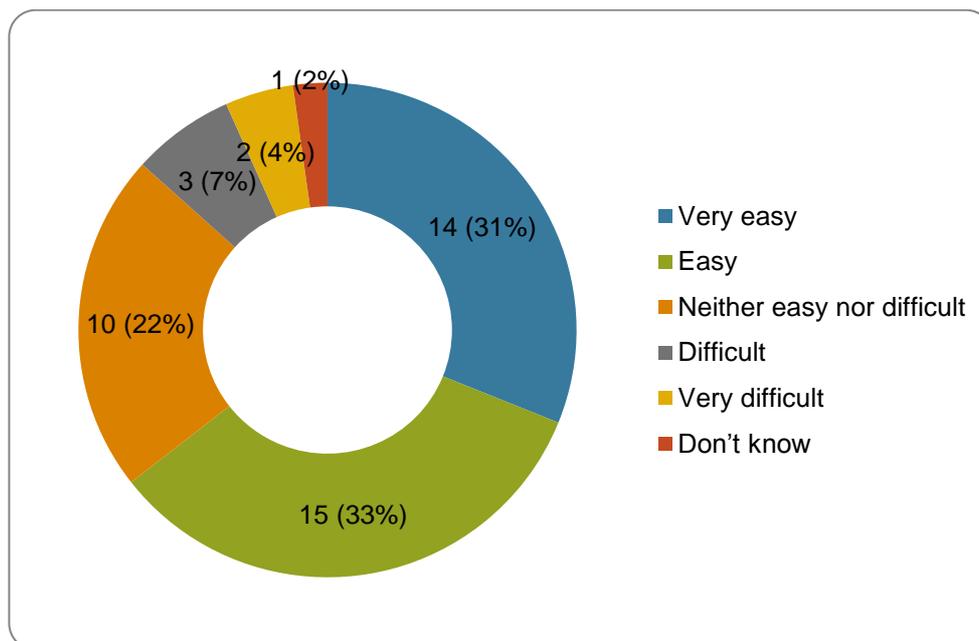
Three people told us that they, or the person they care for or support, have additional communication needs. Two said that they had managed to find information in a format or language that was accessible for the, whilst the other person said they did not. Given the low numbers of people stating they had additional communication needs, we are unable to draw significant conclusions from this data.

Working with or supporting people affected by COVID-19

10 (22%) of people told us that they worked with or supported people affected by the disease. Five people are frontline workers, one is a carer and the rest have been volunteering.

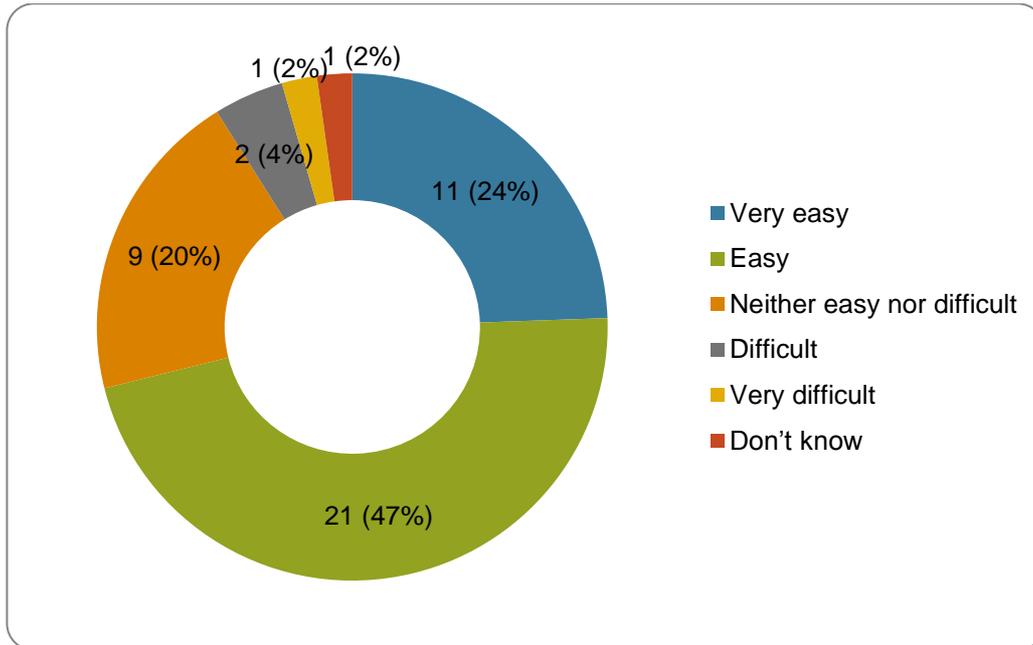
Getting information about COVID-19

How easy have you found it to find the information you need about how to keep yourself and others safe during the COVID-19/coronavirus pandemic?

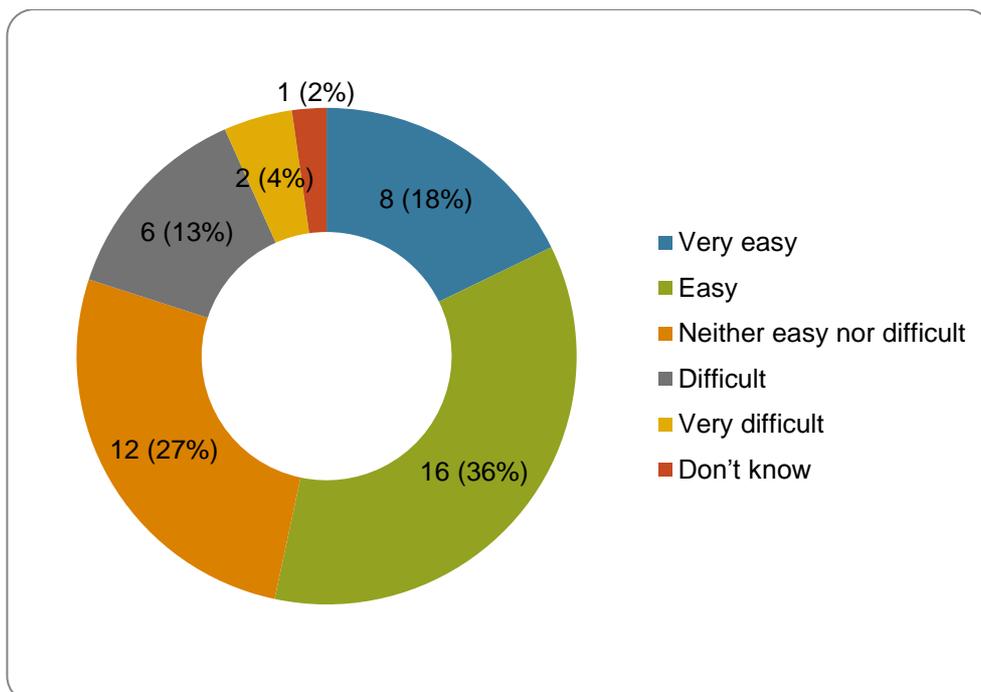


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How easy have you found it to **understand** information about how to keep yourself and others safe during the COVID-19/coronavirus pandemic?

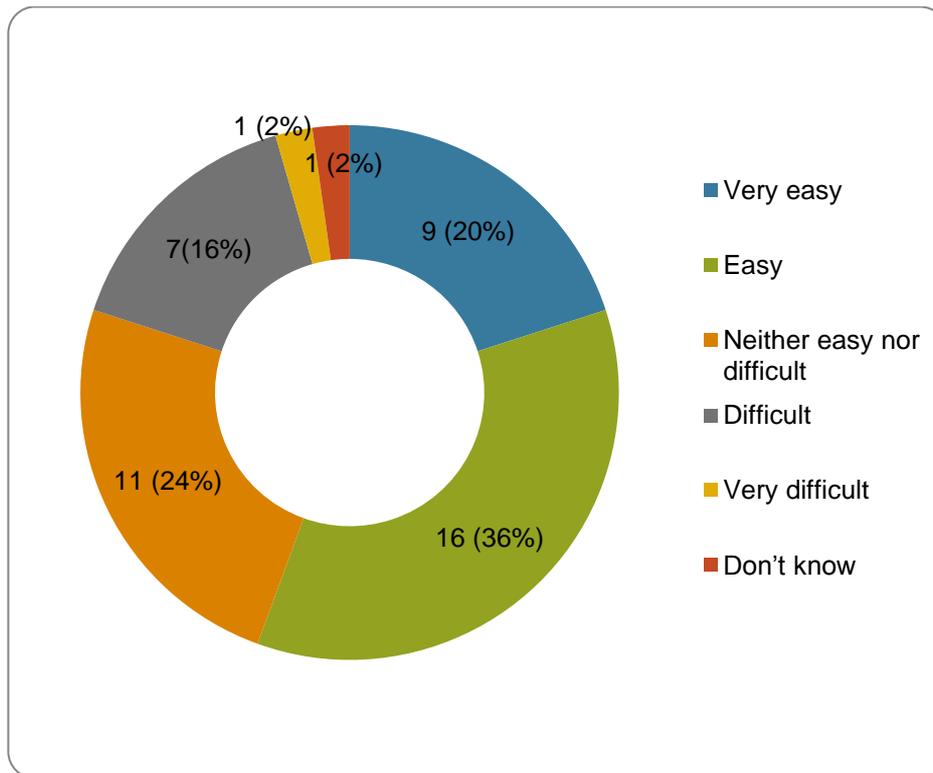


How easy have you found it to **act on** information about how to keep yourself and others safe during the COVID-19/coronavirus pandemic?



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How easy have you found it to keep up to date with the changes to information about how to keep yourself and others safe during the COVID-19/coronavirus pandemic?



When we asked “Which topics, if any, have you found it difficult to get clear information or advice about?”, we heard:

None, I have all the information I need	14%	6
Looking after my physical health	7%	3
Managing existing physical health conditions	16%	7
Changes to the health care services I usually access (e.g. GP practice, pharmacy, hospital outpatient appointments, community nursing visits)	42%	18
Changes to maternity services	2%	1
Accessing repeat prescription medications	14%	6
Looking after my mental health or wellbeing	16%	7
Managing existing mental health conditions	16%	7

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Changes to the social care support I usually access (e.g. care visits at home, residential, nursing or respite care homes)	5%	2
Advice for family carers	7%	3
Advance care planning and end of life care	2%	1
Visiting friends and/or family in hospital or care homes	7%	3
Accessing help in my local community (e.g. getting groceries or picking up medication)	19%	8
How to volunteer in my local community	9%	4
What to do if you think someone in your household has COVID-19/coronavirus	7%	3
Testing for COVID-19/coronavirus	28%	12
Symptoms of COVID-19/coronavirus	5%	2
Shielding people who are at very high risk of severe illness from COVID-19/coronavirus	9%	4
Self-isolation	2%	1
Social distancing	12%	5
Help for people who do not use the internet	12%	5
Other	9%	4

*Please note that respondents had the option of selecting more than one answer so the figures below do not add up to 100%

The findings show that changes to services were, by far, the most difficult area to keep track of changes, with services having to react rapidly to the impact of the pandemic.

Some of the additional comments we received to this question were:

“Information about a suspected covid 19 person going into shock- was not given to us until going to Corona virus doctor in Oldfield Park.”

“Volume of information can be overwhelming”

When asked where people had got their information from the majority of people said online and via a variety of different sources. Again respondents were given the option of selecting more than one answer.

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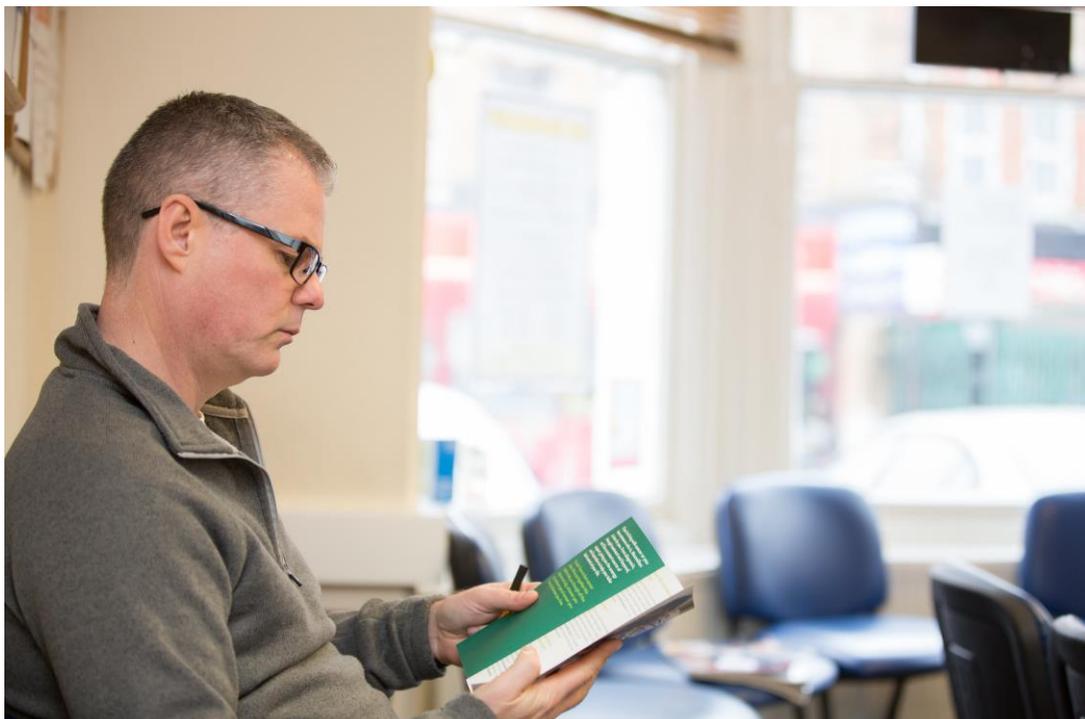
The top source of information for 37 (82%) out of 45 was online, such as the Government and NHS websites.

A breakdown of all sources can be seen below:

Online - national organisations' websites (e.g. Government, NHS)	82%	37
Online - local organisations' websites (e.g. Council, local hospital, voluntary/community organisations)	44%	20
Online - social media	53%	24
Media (e.g. television, radio or newspaper)	64%	29
Received by email or text message	16%	7
Received by post	7%	3
From family or friends	9%	4
Other	7%	3

“Local hospital has been clear on what we should be doing. NHS website and government website with links have been good.”

“Government site as only genuine source”

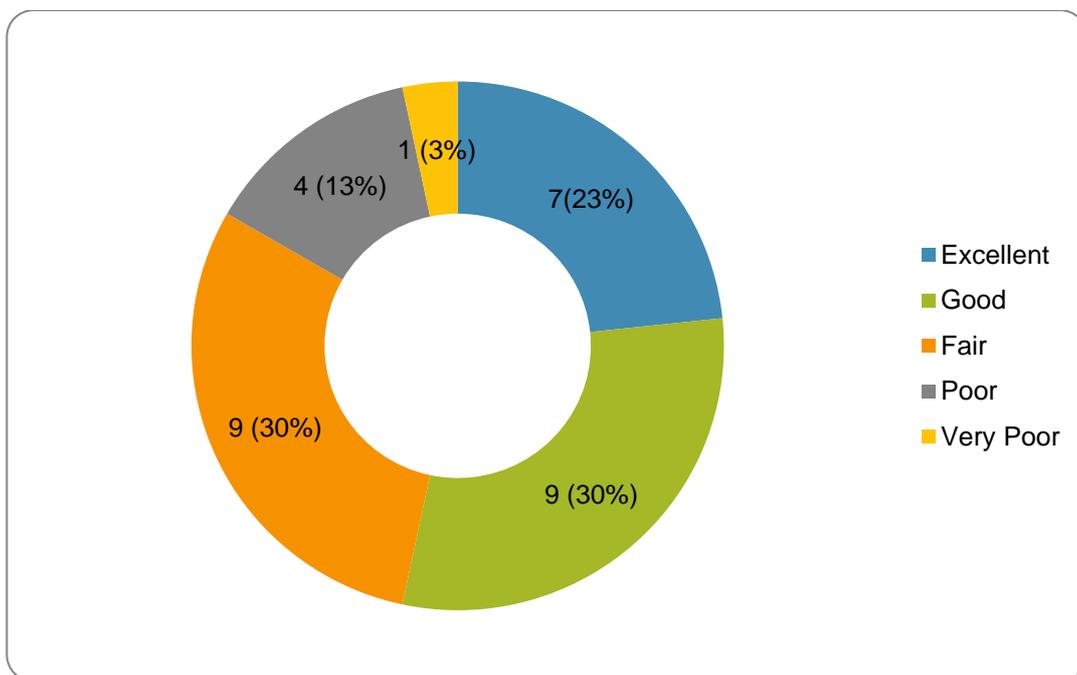


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Using services

30 people told us that since the COVID-19 pandemic began that they, or the person they care for used healthcare services, such as GP or hospitals, with all saying they had experienced changes in care.

When asked how they rated the communication by services we heard:



*Please note that the percentages above are based on the 30 people who responded to this question.

We received 26 additional comments in the free text box, and heard:

“Very clear instructions following a phone call consultation about attending the surgery. Staff very helpful and considerate, showing me what to do at every step. Guiding me to hand wash before going through to the waiting area. Doors opened for me so that I didn’t have to touch handles, nurse very professional and put me at ease in what is an anxious time to have to attend the surgery.”

“Since COVID-19 my daughter has developed two new conditions. We have been to A&E four times and been admitted three times. Treatment in hospital has been good, but no support after discharge. Clinics you are signposted to canceled. OT or physio need to recommend equipment for home use, but service not accessible as new patient. Even though my daughter’s condition should not worsen with no support she was left two days with no feeling in her legs, and Red Cross lent equipment in the end. Her condition should have intensive psychotherapy and physio none available at present so her recovery will take longer.”

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“Appointment cancelled due to dentist self-isolated and now all dentist closed for foreseeable future”

“Communication seemed tiered in terms of priority, well managed and efficient. The system in place was very well organised and informed us clearly.”

“Instead of the walk in and wait clinic, I was able to phone up and a doctor called me back within an hour for an online consultation. I got a next day physio appointment by phone”

“Clear explanation offered on the phone of prescription options and what to do when reining low on regular meds.”

“At the beginning it was a bit confusing and the therapy delayed but after few days everything was clear and smooth”

“My prescription inhaler is not available. I was not informed by my GP or pharmacy and I have been given no information on what to do.”

“Can't make appointment online, so had to phone but wasn't sure when to phone. Then I want sure when I would be phoned back (e.g start and end of virtual surgery). Then I was told prescription would be with pharmacy that day after a certain time but this want true and then I had to phone back again. I need to know what is going to happen and within what timescale or I get stressed.”

“Feel they are making an excuse now by not getting services back to running. I needed the support for my mental health and now my mental health has really slipped”

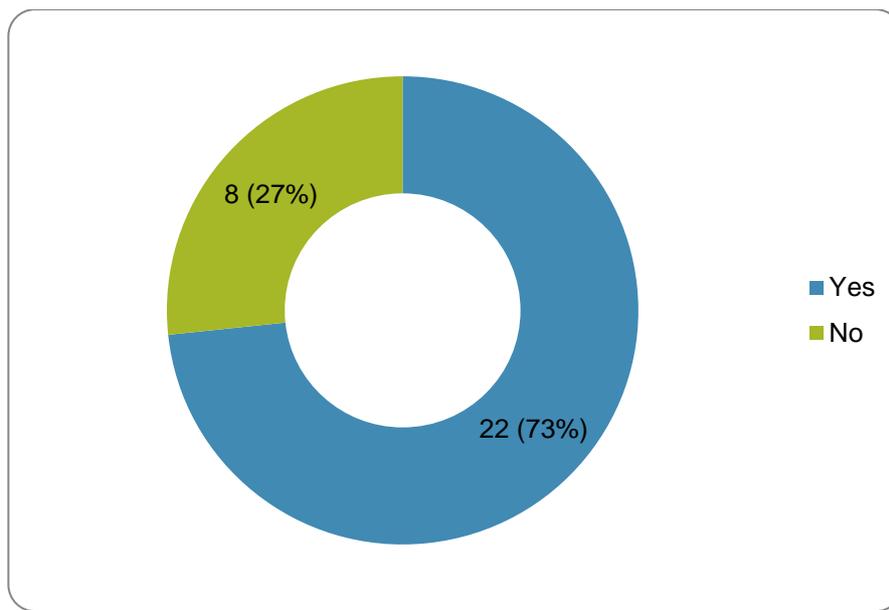
There was a mixture of sentiments with some excellent examples of how services have adapted well to the pandemic, concerns raised about cancelled about appointments and confusing messages for some patients about such things as how to make appointments and medication.



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Telephone consultations

When asked “Have you/ the person you care for been offered a video consultation or telephone appointment instead of a face to face appointment?”, we were told:



*Please note that the percentages above are based on 30 people who responded to this question.

We received 24 additional comments in the free text box about people’s experiences of what video and telephone consultations were like. Some of the comments received were:

“Initial GP surgery phone call before deciding to see me at the surgery.”

“Mental health. Helps my partner but is finding this very difficult.”

“It was a doctor’s appointment following covid. It was quite frustrating as my home phone automatically blocked the call, my mobile doesn’t have good reception in the area. Other than this the appointment, once speaking to a doctor, was very efficiently conducted.”

“The 999 phone/ambulance service has been very good, as has RUH A&E, RAU and Oncology.”

“GP and physio. Physio was a follow up and worked fine over the phone. GP appointment was a bit awkward and I had a lump I wanted him to look at, which was tricky over video but I was reassured that I didn’t need to come in to the surgery.”

“Outpatient appointment. It was strange but quite good”

“All appointments cancelled for my daughter. For separate medical issue we were offered a phone appointment. Would have been nice to be able to have sent in a photo of the injury or have a video consult”

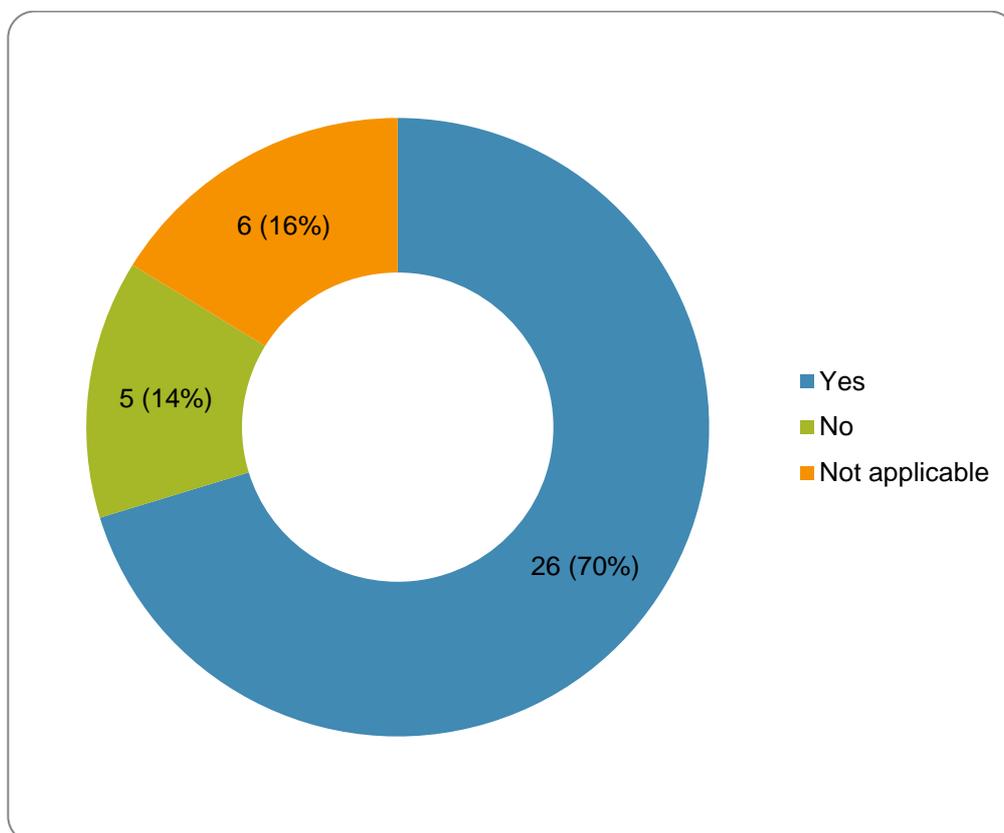
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“Consultation via phone instead of outpatient appointments works fine except he only speaks to husband and not me the carer.”

13 of the comments were about consultations with GPs, and the rest was a mix of services, including physio, mental health, outpatient, RUH, 999 and oncology. Overall the sentiments expressed were of a positive nature, and some people expressing a desire to be seen in person.

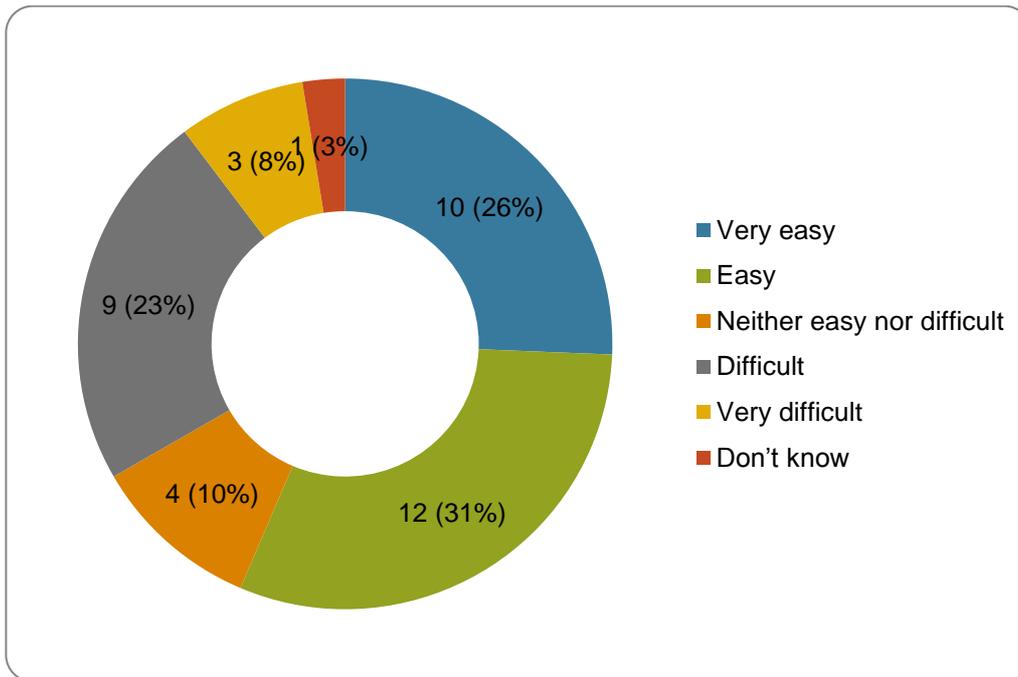
Getting medication

We asked people “Have you/ the person you care for been able to access any medication required?”, 37 people responded to this question and we were told:



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We followed this up by asking people “How easy have you found it to access your/ their medication?”, and we were told:



We received an additional 26 comments in the free text box. Eight were positive, 11 negative, four mixed and three were neutral. We heard:

“One prescription didn't get there when I was told it would and I had to make phone calls which I find difficult. A repeat was unavailable so I had to get a different thing prescribed and a repeat needed changing due to management of condition. More phone call, waiting for unknown time for phone call and not even knowing who it would be or what would happen and then that took multiple visits to pharmacy before it came too. None of this is anyone's fault and everyone is trying so hard in difficult times but I have ASD and anxiety and the combination of phones and not knowing when or what will happen or who is going to phone is stressful.”

“I went straight to the chemist attached to the surgery following my appointment, no one else was in the chemist, one in at a time. My husband is being shielded, and so I haven't been anywhere to help reduce any risk to him, until I had to be seen myself. He managed to get his repeat prescription delivered by a local volunteer.”

“Very difficult as now under consultant the local doctor is inaccessible. Local pharmacy always gets medication wrong and ordering online is not straightforward as always says has to be approved first or need to see doctor even when on repeat.”

“Easy to access but very surprised no employees at chemist were not wearing any masks or PPE.”

“GP sent prescription through to pharmacy electronically. I was able to collect from pharmacy. All staff in pharmacy were wearing PPE.”

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“Phoning the POD number for several days at a time many times every day and not getting [through] to them so medication run out”

“Online ordering from GP worked as usual. A bit of a queue at chemist but to be expected”

Using social care

Six (13%) out of the 45 respondents had used social care services during the pandemic.

Four out of the six people said there had been changes to the service they used as a result of this. When asked “How would you rate the communication received about the changes?”, we were told:

Fair	50%	2
Poor	25%	1
Very Poor	2%	1

We were also told:

“Less staff and carers, more people going without care.”

“Cut their hours, DONT keep you timetables, disorganised”

Support from voluntary groups in B&NES

Four (9%) people out of the 45 respondents had received additional support from local voluntary or support groups. These were all varied:

- COVID voluntary response group for food prescription and delivery
- Westbury Local Council for weekly food essentials. The commentator did not feel that what was received amounted to what was paid
- Bluebell for telephone advice on perinatal mental health
- Eating disorder support group and SWEDA support group for people to talk to

The respondent who had used the COVID voluntary response group felt this was *“Very good, very quick and friendly, just very helpful”*.

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The person who had used the eating disorder support group and SWEDA said they were *“Excellent and consistent”*

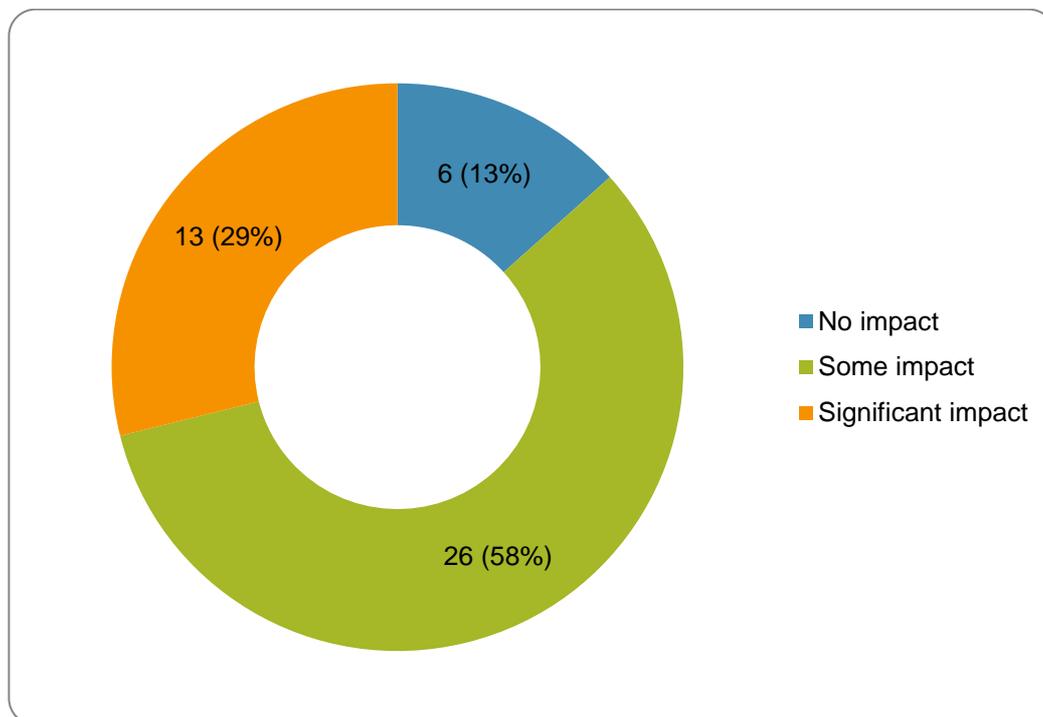
The person’s experience of Westbury Local Council was negative, saying:

“If I had someone else to [do] it for me I would use them out of 3 deliveries only one was about right I also had a [phone] call stating they had other items donated and would get eg shampoo soaps etc etc never received”

It should be noted that this is the above experience of one person and will not reflect the experiences of everybody who has used Westbury Local Council.

Mental Health

We asked people “How much of an impact has the COVID-19/coronavirus pandemic had on your/ their mental health or wellbeing?” and were told:

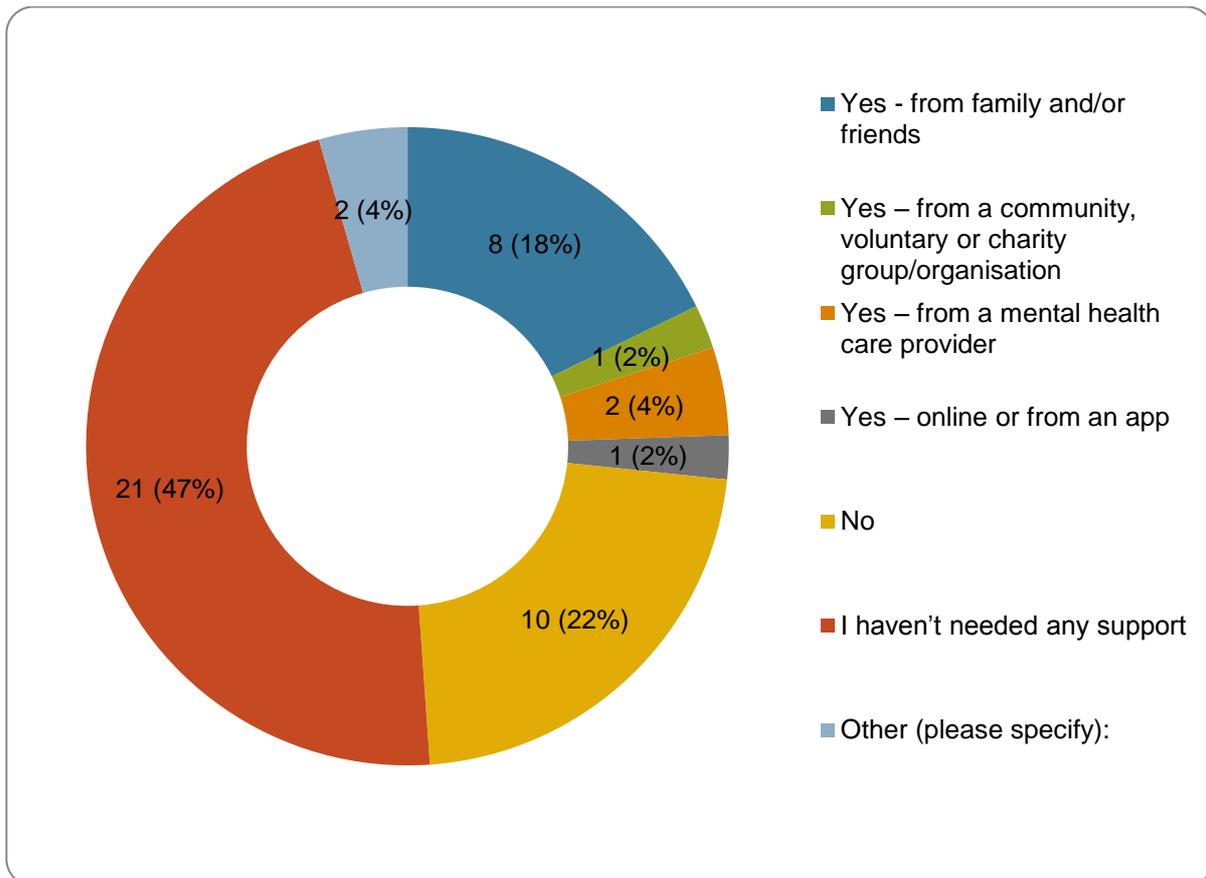


The majority of respondents felt their mental health and/or wellbeing had been impacted by the pandemic in some way.

The ramifications of the pandemic are not fully known at this stage but we are hearing that more people are access mental health services or seeking advice from Citizens Advice Bureau. We will continue to monitor the feedback we get about this closely.

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We went on to ask “Have you been able to access support for your mental health or wellbeing during this time?” and were told:



We received an additional 14 comments about the type of report received. People said:

“Altered medication, also online and using strategies previously planned with mental health care provider”

“I use a mindfulness meditation app and yoga YouTube”

“My friends have been able to understand my problems. Because i am coping organisations have not helped despite making contact.”

“My husband has been very supportive and encouraged me to contact GP”

“Only from my family nothing from my local council no one’s been in touch”

“My appointments have gone onto Skype”

“Regular contact with church community”

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Some of the comments - seven in total - show that friends and family are a great source of support for people. Two of the commentators tried to contact services but at the time of responding to the survey, they had not yet received support. One had completed the survey at the end of April and the other person mid-May. It should be noted that this represents a tiny proportion of the population, so significant conclusions about accessing mental health services cannot be drawn from this data analysis.

What else did we hear?

We received a further 23 comments at the end of the survey when we asked if there was anything else the respondents would like to tell us. A number of concerns were raised within these comments, as well as a deep sense of gratitude towards the NHS and other local services:

“I think local services have responded well in a short period of time. I am aware of the support from Compassionate Communities if I need to access them. Fantastic team.”

“Just that we have appreciated the help that we’ve been given, I know many people have not been happy with the government response, but I think the NHS with the government have done their very best to help in what is an extremely difficult situation. I’m sure there will be learning from this, and hindsight is a wonderful thing.”

“I didn’t know where to find information, who to ask, being a stroke survivor is not considered an issue the DR said.”

“I am on my own with significant health problems and have been left to get on with it. I have groceries delivered by Sainsburys. I am waiting for appointments for my worsening scoliosis, I can hardly walk, I am getting unfit and more depressed every day”

“I feel my partner’s health has been neglected because he’s terminal anyway.”

“I think the fact that so many appointments and testing for people with serious conditions have been cancelled is a serious error. As many deaths will be caused by this as coronavirus and I believe testing should be resumed as normal with video appointments where possible”

“I’d like to thank all NHS staff for their amazing work.”

We have also been hearing from members of the public, who have been contacting Healthwatch via email or phone, asking for help finding an **NHS dentist** in their local area. So far **access to dental care** has been impacted the most since the lockdown has eased. We anticipate that this will be an ongoing issue with less appointments available as services have to make their premises COVID-safe.

Bath Ethnic Minority Senior Citizens Association (BEMSCA)

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The majority of respondents who took part in our survey - 39 (89%) out of 45 - are white British. Following on from the [Public Health England report](#) highlighting the disproportionate impact that COVID-19 has had on people from a Black and Minority Ethnic (BAME) background, Healthwatch England asked the [Healthwatch network to let them know what they had been hearing from their BAME communities across England](#).

We approached Bath Ethnic Minority Senior Citizens Association (BEMSCA) in June to ask them what they had been hearing from their members about the care they had been receiving during the pandemic. They have come back to us with feedback they received from some of their members, which we are putting together into a small report and which we will share once completed.

Conclusion

- For many of the respondents phone and video consultations have worked well. There are clear efficiencies in using technology in carrying out some, if not all appointments. The COVID-19 pandemic has accelerated the digitalisation of services which is a positive for those who are able to access appointments in this way. Consideration needs to be given about how to reach people who are digitally excluded, particularly during a time when most things are being done remotely. As this was an online survey we would not have gathered the views of many, if any, of those people that do not have access to the internet.
- The impact of COVID-19 on people's mental health and wellbeing cannot be understated. We are hearing that mental health services are getting more referrals as the fall-out from the pandemic continues. This situation will need to be closely monitored.
- Communication about changes to services could perhaps have been improved upon. We are aware though that services had to adapt rapidly to the unfolding event and have done their utmost to keep patients informed and safe but this is an area that caused confusion.
- People were able to get information about COVID-19 easily and demonstrates the positive impact that clear and concise public health messages has. For some the messaging became more confusing to navigate and understand as time progressed.

What will we do with this information?

We will share this report with our stakeholders across Bath and North East Somerset including the council, the Clinical Commissioning Group, NHS services and our voluntary sector colleagues, to highlight what has worked well during the pandemic and what could be improved upon.

Thank you

We would like to thank all of the people who took part in this survey to share their views with us.

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Community Pot Projects

Our work to engage with members of the public about their experiences of COVID-19 does not stop here. At the end of April we received nine applications from organisations across B&NES to receive funding to support the development and delivery for new projects. Three out of the nine organisations were focusing specifically on COVID-19.

Bath and north east Somerset Third Sector Group CIO (3SG)

Part of the funding is going towards recruiting a new member of staff to support, train and DBS check the 1,900 volunteers who came forward to support residents at the beginning of the pandemic

Carers Centre

They will be extending their support line as they are anticipating an increase in demand due to COVID-19.

Citizens Advice Bureau

They will be employing a senior manager to support their continued work with the Compassionate Community Hub.

SWALLOW

They will be employing a part-time Community Engagement Officer to support young people with a learning disability to transition back to 'normal life' after being in lockdown.

Because We All Care Campaign

We have joined forces with the Care Quality Commission and have launched [the Because We All Care Campaign](#), encouraging people to keep sharing their experiences and inviting our local stakeholders to support the campaign.

With all but the most urgent inspection of services on hold during COVID-19, it is vital that members of the public continue to share their views about services with us.