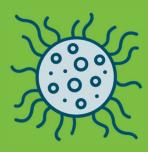
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What are people telling us about COVID-19?

Key messages from our evidence - 20 May 2020





About

This regular briefing aims to provide an update about the COVID-19 related:

- information and advice the public are seeking from Healthwatch,
- experiences people have shared about care.

The following insight is informed by data from 116 local Healthwatch services across England.

Key messages by issue

Community response

- Local Healthwatch continue to signpost people to services for help with getting food and medication deliveries.
- We continue to hear about the effect of the lockdown and loneliness on people's mental health. In particular, we have heard how some autistic people have felt increased anxiety due to being unable to follow their usual routine.
- People have told us that the communication around eligibility for and provision of government food parcels has been unclear. Some of those who have received a food parcel have not been told when to expect the next one - causing them stress as they are unsure about how long these supplies need to last and what will happen next.

Shielded people

- People continue to express confusion about whether they should be shielding. One
 report from Healthwatch Bracknell Forest has raised a concern about the system through
 which people can register online as shielding. In this case, people can access support in
 the first instance, but unless their GP then confirms that they need to shield, the support
 stops. However, there has been no follow-up communication to explain this.
- We are also now starting to hear more questions about what will happen next after the first 12-week shielding period has passed - including for parents who are shielding with children who may soon be expected to go back to school.

Digital divide

We continue to receive mixed feedback about digitalised care. The move to remote
appointments has worked well and been welcomed by some, especially in some of the
more rural areas of the country. However, concerns remain about accessibility for people
with additional communication needs and those not online, and suitability of remote
consultations/assessments for some people, for example, people with learning
disabilities.



Access to services for non-COVID-19 issues

- People continue to tell Healthwatch that they are unsure about what to expect from the
 healthcare services they would usually access and how their needs will be met during this
 time. Our insight suggests there has been a lack of communication about these changes
 in some areas, for example, regarding podiatry and other community-based services.
- Local Healthwatch continue to provide information to people about how to access emergency dental care in their area. We have heard mixed feedback about people's experiences of this care itself:

"I first tried calling my dentist and all local dentists without success. I then called NHS111 and was referred to A&E, which resulted in them giving me strong painkillers that knocked me out for 2 weeks and did not help... I [was then] in touch with my dentist and was given two courses of antibiotics. I was eventually referred for actual treatment to the triage centre yesterday. They referred me to [a local dental practice] and told me to contact the practice directly if I hadn't heard from them, which I did both yesterday and again today... The dental practice said that they haven't received anything as yet but would contact me as soon as they do. They did not fill me with confidence as the conversation was inconsistent and the dental nurse I spoke to advised me to go back to my dentist to be re-referred..."

"I needed emergency dental care as I had been suffering all weekend with toothache and found out from my local Healthwatch newsletter what to do. I called my usual dental practice... The receptionist took all of my details and details of my issues and asked me to email photographs of the affected area through to her. A dentist then called me back within 40 minutes. She offered advice on pain medications and advised that a prescription for antibiotics would be ready at a local practice for me to collect. I was advised that it is my responsibility to follow this issue up with my usual dentist after the coronavirus outbreak and that the [prescription] of antibiotics without being seen is not usual practice. I felt this was a good service under the current restrictions."

Transport

- People continue to tell us about issues surrounding transport to appointments that are going ahead. For those thinking about arranging private transport, the cost of attending one or more hospital appointments (that maybe some distance away) is prohibitively expensive.
- For some of those accessing community transport services, queries continue to be raised about how referrals to these services work, and who is responsible for providing PPE to the volunteers supporting these services. Previous feedback also highlighted people's



concerns that the transport options available to them, including patient transport, could not guarantee enough distancing between users.

Hospital discharge

Whilst until recently we have received limited feedback about hospital discharge, we are
now starting to hear more about this issue. Our evidence so far suggests that in some
cases, discharge to social care has been rushed or not sufficiently organised to meet
people's care needs, and that these problems are further increased by poor
communication from healthcare services to people's next of kin:

"The family were not informed that their relative, who was very ill and experiencing delirium, was being sent home. There was no communication from the doctors throughout their stay in hospital. They were not tested for Covid-19, but then tested positive on readmission 24 hours later... Staff were about to send them to a care home that was not expecting them, before the family intervened."

Praise

 We continue to hear how thankful people are to health and social care professionals when they or their family receive kind, compassionate care. People have shared with us what a difference this can make - especially in difficult and upsetting situations:

My mother was taken to A&E... The doctor taking care of her called me to tell me she almost certainly had Covid-19 and that it was very unlikely she would pull through. He was gentle, kind, caring, honest and clear. He called me back a bit later on a mobile to let me talk her, tell her I loved her and say goodbye. He then made sure that she got back to her care home, where they looked after her, got her into her own bed, and she died very shortly afterwards. The A&E doctor made such a huge difference to this horrific experience and his gentle honesty was appreciated more than I can ever express. What a job."

Talk to us

If you have a question about the contents of this update, please either <u>contact a member of</u> <u>policy or research team</u> or email CV19Enquiries@Healthwatch.co.uk