



Experiences of managing health and social care during the coronavirus pandemic (COVID-19)

Summary

Background:

Healthwatch Wandsworth wanted to find out the experiences of people regarding health and social care services amidst the COVID-19 pandemic. Healthwatch Wandsworth opened a COVID-19 survey in May 2020. The survey was based on Healthwatch England's national survey with some minor adjustments for our local situation.

What we did:

A survey was developed to gather people's experiences of managing their health and care during the coronavirus lockdown; what worked well for local people and what could have been improved, and what needs to be considered as the situation continues to change.

This was an online survey and was promoted widely through contacts and social media.

What we were told:



Some were happy with the information they received, some felt that they had the level of health and care they needed or as could be expected in the situation; for example, some liked using digital methods and some did not experience any particular problems. Many found much needed support from families and their community.

However, a significant number of participants shared experiences of difficulties and concerns, especially carers or people who cared for others. Many people reported that the circumstances had an impact on their mental health. As many organisations closed their doors, people sought information from national or known sources but information was not always clear or easy to find.

Findings and recommendations:



Full findings and recommendations are included later in the report and include a need for:

- Clear information and advice, particularly about health and care support available (including mental health wellbeing). Locally relevant messages should be relevant and 'sharable' within the community.
- New or improved ways of accessing information and services.
- Development of support for carers and those disproportionately impacted by COVID-19.

Background

COVID-19, also commonly referred to as coronavirus, has had a dramatic effect on the way people conduct their lives. Since its emergence in December 2019, COVID-19 has led many people to adapt to new ways of interacting with other people. From 23rd March 2020 a state of 'lockdown' began in the UK to contain the spread of COVID-19. In early May the UK government set out plans to ease the lockdown as it was reported that the peak of infections had passed.

Many services were paused in March as NHS England declared a level 4 incident. The pandemic has been a unique situation that needed services to rapidly change and continue to change rapidly. In response to COVID-19, health and social care services have had to drastically change the support they offer the public and the way they provide care. As the situation evolves the health and care system continue to plan services in response to the virus and in the context of wider measures to contain the virus.

There is an increased need to know what is working well for local people and what can be improved, and what needs to be considered as the situation continues to change. We wanted to hear from people who live in Wandsworth about their views on how local services worked during the coronavirus pandemic. The survey was opened in May 2020 to hear from local people about their experience of health and care services.

What we did

We developed a survey to gather people's experiences based on Healthwatch England's national survey with some minor adjustments for our local situation. We asked questions about experiences of healthcare services and social care services. We also asked participants about their mental health and perceived changes to their mental health during the pandemic. A copy of the survey can be found in Appendix 1.

The survey ran from 7th May 2020 and the survey closed on 23rd July 2020. Due to the coronavirus pandemic it was not possible to take the survey to local community groups and events as we usually would because we stopped all face-to-face work. Instead the survey was promoted in the following ways.

- Via our newsletter, online and by post.
- Direct email to target community groups and other contacts.
- A poster via social media.
- NHS patient and community engagement groups, 'Thinking partners' and the Patient and Public Involvement Reference Group.
- In a press release that focused on our other survey about digital and telephone appointments.

Therefore, the respondents were most likely a self-selected sample rather than a representative sample of Wandsworth residents.

To ensure that the results were able to influence a world that was rapidly changing, we shared our emerging results confidentially with some key decision makers in health and social care and at a strategic level with the Wandsworth Health and Care Board. Findings were also fed back to

Healthwatch England to help them understand what is happening across the country and so that they could inform Central Government departments about the National picture.

What we found

About the people we heard from

In total 136 people responded to the survey. Of the total 28 people completed this survey on behalf of another person considered to be at high risk from COVID-19 due to an existing health condition, with a variety of needs described (21 of these described the person as having an existing health condition and 9 of these said the person was over 70 years old).

The majority of respondents did not consider themselves to be at high risk from COVID-19, approximately two thirds. However, just over half (51.9%) of the people who told us they could be considered at risk, said that they had an existing health condition and 38.5% said they were over 70 years of age, 17.3% said that they were a key worker. Of those who provided an answer to 'other reason', 4 cited asthma and 2 cited diabetes.

As the pandemic progressed, there was evidence that BAME communities are at a higher risk from COVID-19. We added this to our question about whether someone considered they were at risk, but unfortunately it was added too late for us to be able to report data about this.

Of those who reported having received a letter or text advising them to shield (almost a quarter of all respondents, 24%), we received mixed responses when we asked them if they had received enough information and support to shield. A few comments indicated that they had some advice, while a couple of others reported that they had obtained advice directly from television news sources and not letters or information from services. Some respondents felt practical support was lacking, as in the case of a couple caring for a son with special needs. They felt they had the absolute necessities but were not able to access proper supportive equipment or therapy.

Not all respondents completed each question, either by choice or because the question was not relevant to them.

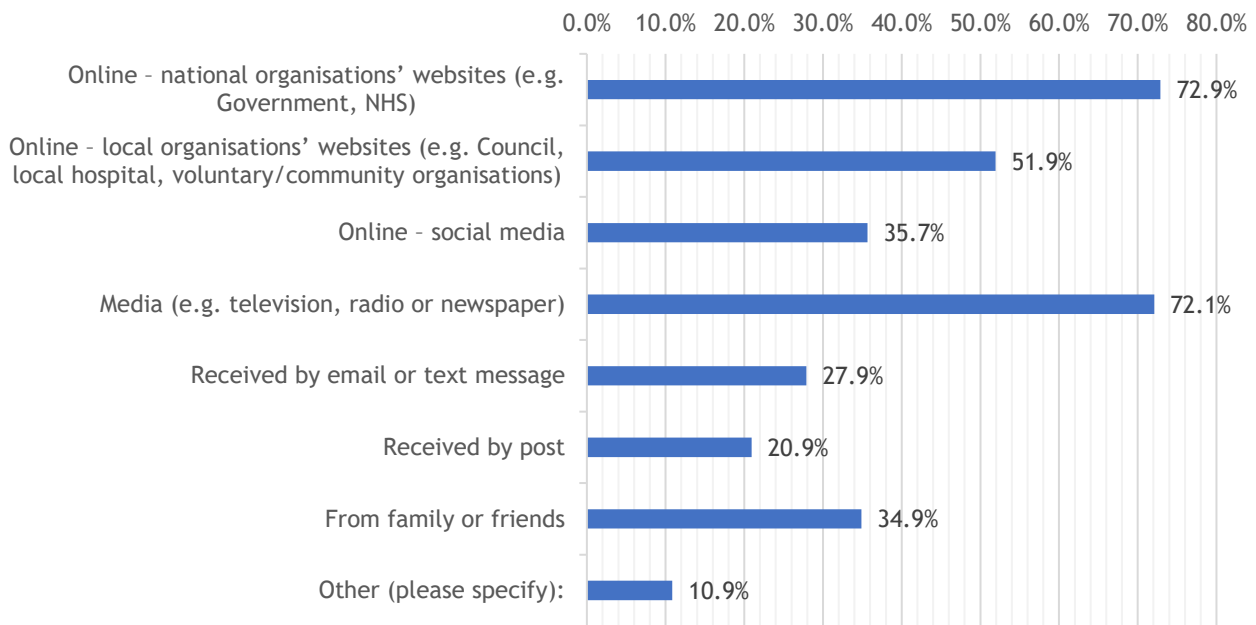
Experiences of information and advice

Finding information

Most respondents were able to find information they needed about how to keep themselves and others safe during the coronavirus pandemic. However, 17 people (13% of people who answered this question) told us that they found it more difficult to locate the COVID-19 information.

People responded that they mostly found information through online sources, from government and local organisations, and from media resources, such as newspapers and television. A number of people also got advice from word of mouth, either from healthcare staff or from family and friends.

Where have you found information or advice about the COVID-19/coronavirus pandemic?



When asked if people had found any specific sources of information that were especially helpful, the following were seen as **most helpful: Wandsworth Council email updates, National organisation websites and National online journalism**. Some people had sought national information relating to their circumstances including Asthma UK, the National Autistic Society or easy read information and videos.

However, a lot of respondents did not find any specific sources especially helpful (122 respondents, 60.7% of the respondents who answered this question). Mentions of inconsistent or ambiguous advice were frequent throughout the survey and one respondent described **“an overload of information”**.

The difficulty of obtaining information without internet access stood out as a theme in what people told us. One respondent said that they had **“created a newsletter to print out for local people who don't have online access as that is the only way to find out things apart from TV”**.

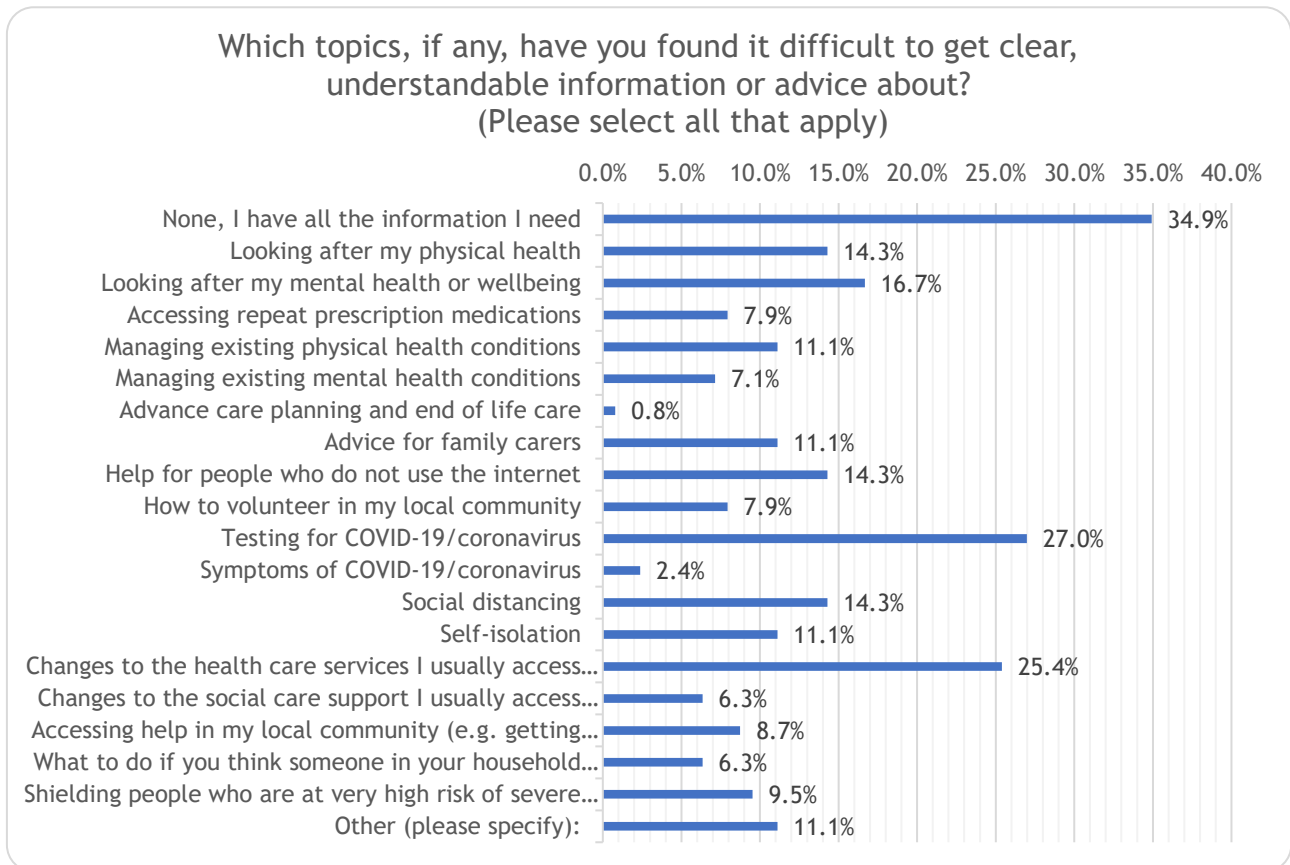
“Government comms shockingly bad. No longer listen. Also no masks or proper info on WHEN & HOW to use them. No proper info on safety of deliveries, how to sanitise, quarantine them. Had to find out all this and teach my mother (who is blind) on the phone. My test arrived with no label and had to be binned. So no confirmation of my own, pretty sure, diagnosis. Told to go to test centre. How? No car and far too weak to walk that far.”

When asked about communication needs, 20 people (15% of all respondents) replied that they required information for specific needs, such as hearing loss or poor vision and learning disabilities or autism. When we asked respondents if they had been able to find information and advice in format's or languages needed, 28 respondents (21%) said that they had.

Understanding information

23 people (17.6% of respondents to this question) said they experienced difficulties understanding information on how to keep themselves and others safe during the pandemic. Difficulties in finding information centred on testing for COVID-19 and changes to access of usual health care services.

The graph below shows the responses of 126 people regarding topics that they thought it was difficult to find understandable information about. The graph shows the percentage of those who selected each topic.



When asked to comment further on these topics, people expressed frustration around incomplete or contradictory advice around effectiveness of wearing facemasks, difficulty in social distancing on pavements and in supermarkets and understanding what is considered a gathering. Some specifically mentioned frustrations about information defining vulnerable groups, measures to prevent catching the virus and lockdown measures.

“The guidance re over 70s has been contradictory. I understood them to be advised to stay at home, but Wandsworth Council made limited provision to support older people in sheltered housing.”

“What to do specifically for more vulnerable but not ‘very vulnerable’ people other than recommendations applicable to all.”

“All the information is out there somewhere if one has the means and inclination to find it but some of it is vague, contradictory and sometimes misleading.”

Acting on information and keeping up-to-date

In addition, people were asked how easy they found it to act on or keep up to date with information. Although the majority of people found that they could **act** on COVID-19 safety information, 25 people (18% of all respondents) told us that it was difficult. The majority of people said that they could **keep up to date** with changes to safety information, 26 (19% of all respondents) told us they had difficulties doing this.

Experiences of healthcare support

127 people responded to our questions about health and care. Over 42.5% of these respondents said **that their healthcare had changed**.

Less than 10% (9.4%) of survey respondents reported that they didn't need to access healthcare services during the coronavirus pandemic.

When asked to rate the communication about the changes and **the majority rated the communications as fair or negatively**.

Over a third, 21 respondents (33.3% of those who answered this question) responded negatively about the communication received about the changes to services, describing it as "Very poor" or "Poor". But, 27 people (42.9%) of survey respondents said the communication received about the changes was "Fair" and 11 respondents (17.5%) thought it was "Good". There were 4 people (6.3%) who thought it was "Excellent".

When asked if their response about communication related to a specific service, over half of those who responded (33 respondents, 54.1%) said that it was, and the majority of people said that they were commenting about; GP appointments (14 respondents, 23%) hospital and outpatient's appointments (11 respondents, 18%). A few comments were left including:

"[The] hospital has been better than GP. It is hard to get through to GP practice. Hospital staff are contactable directly by email with named individuals which has been good. Both cancer care at SGH and hypertension service at St Helier have responded promptly and helpfully."

"Hospital. When my son was admitted to hospital for non-covid reason, despite having a published (since covid) policy of allowing people with LD to have a supporter with them, the carer was refused access into the hospital and I was originally told I would not be allowed in. But, after a couple of phone calls, the message trickled down and I was allowed to come and support my son. It shouldn't have taken that long but they were great once we were all on the same page."

"A hospital clinic - appt was cancelled without notifying me."

Experiences of changes to healthcare appointments

We asked people if the way they get their healthcare changed and 61 respondents answered this question. A change to having phone appointments was mentioned in 39 of the 61 responses, 5 respondents mentioned having online or video appointments.

Opinions on the changes were mixed and a few mentioned particular challenges in caring for others if the usual support wasn't available or if the way appointments happened had changed.

Some respondents experienced faster and easier access to appointments, especially if over the phone, but experience varied and some noted they preferred face to face interaction with healthcare professionals or found additional challenges when appointments were over the phone.

Responses about telephone and online appointments included:

Positive

"I got a telephone appointment with my GP far faster than normal. Same day rather than a two week wait."

"Telephone appointment. The phone call was helpful, clear and next steps clearly explained."

Mixed

"One appointment, by a brilliant hospital consultant, became a phone consult and that was fantastic as it was just as thorough as normal. Others, though, have just been cancelled (some understandably as would not work virtually) and one specialist, from whom my son really needs input, is not even returning calls/emails."

"As the news I received was positive, a phone consultation was entirely appropriate, saved resources and reduced risks of infection. Had I been receiving less positive news, this form of consultation may have seemed less appropriate."

"I ended up having three telephone appointments. Quick and easy. However, it was with three different GPs who did not seem to know my medical history."

Negative

"[My appointments changed to] over the phone and I need face to face contact to understand."

"Moved to telephone consultation which are a bit overwhelming for my son."

"[I] feel the phone services diagnosis is not good, especially for those who have a hidden disability. My children need help. For my 16 and 19-year-old I would have to prompt them. Which is hard for me as they give up as they do not like talking to people on the phone."

"Missed a call from St George's as my phone was on silent and was unable to get back in touch."

"GP phone assessment, blood tests but inaccurate assessment due to no examination."

"Face to face appointment changed to telephone but I wasn't told if they would phone me."

"Usual visit to GP and outpatients suspended abruptly. Contact with original GP transferred to Skype with new GP. Not confidential, given presence of carer holding iPad."

"Difficult to get through on the phone as it takes so long."

“The doctor admitted they would normally have seen me in the surgery. It worked out ok, but I had a reaction to the medication. Normally, I would have gone to my local pharmacy, but I ended up self-diagnosing, then reporting the issue to my doctor's surgery.”

A significant number of people mentioned cancellations or re-arranged appointments (16, 12% of all respondents). For some this was ok, but for others it left them with a gap in their care.

“After a slightly anxious 5 days (including weekend) I had call offering an appointment three days later. This timescale was not unreasonable in the present working conditions.”

“I have received GP appts over the phone as well as my regular hospital outpatient appointment. However my 1st appointment of new referral just into lockdown had to be cancelled and I have to await contact from them.”

“No routine visual, hearing impaired, dental, orthopaedic, neurodisability appointments.”

“Was left with 6 weeks without help to care for my child.”

“Impossible to obtain digital access to request a script.”

“GP appointment in March cancelled by surgery and no alternative date offered.”

“Appointments had to be cancelled with outpatient clinic. Relationship with GP terminated. Transfer to new GP practice delayed continuity and increased anxiety.”

“I go for a check-up every 3 months and take away 3 months' supply of HIV medication - but there was no indication of how they will keep me supplied. I'm worried!!”

When asked to tell us more about how they felt about the changes, 30 people left responses. Interruption to services meant those who answered this question in the survey couldn't access classes or continued healthcare. The experience of these changes was varied, some didn't think there was too much of a problem in the circumstances, other responses suggested people found managing health “stressful” or “isolating”:

“Nobody rang to tell me if the appointments had been cancelled. So I rang to check and was told rudely that it was changed to telephone appointment as if I should know.”

“Left me exhausted and mentally drained caring for a severe learning disability child without help for over 6 weeks although I wasn't well myself.”

“I worry I will not get my 6-monthly hospital appointment which needs to be hands-on”.

“Cancellation of group exercises resulted in becoming less mobile. I am undisciplined and not good about doing exercises by myself.”

Changes in care seemed to have had an impact on carers or people who cared for others:

“I care for my husband who has had coronavirus symptoms. I have called GP, local council and care centre but none were able to provide me with protective clothing that I needed. I have spent all my carers allowance to get the those items. This is very unfair coz I'm a full time unpaid carer.”

“It’s too risky to have our night nurses come into our home, so my husband and I have been sleeping in shifts to care for our son. This isn’t sustainable and we’re incredibly sleep deprived. While the absolute necessities are covered (our pharmacy delivers, our ccns are available via phone, Sainsburys has us on their vulnerable list and we get a grocery delivery once a week) other services have become impossible. He has grown out of all his equipment (standers, walkers, chair, afos, compression suit etc.) which means all the equipment we use so he can be safely supported needs to be adjusted or refitted and hasn’t, making them unsafe to use and leaving him without appropriate support and therapy equipment.

When asked if the message about protecting the NHS discouraged them or their family members from contacting services when they were feeling unwell or had health problems, of those who answered this question, **about a third (37 people, 33.3%) said ‘Yes’ the message about protecting the NHS has discouraged them or their family from contacting services.**

Some felt they didn’t want to “bother” GPs or assumed they’d be too busy. Others said they “don’t feel safe” and some are “fearful” they would catch the virus by accessing services or going to hospital.

“I delayed approaching the surgery for several weeks.”

“I have a few problems but non so severe that I need to take up a doctors time when they are so busy atm [at the minute]”

“I get quite anxious about my health, but wouldn’t want to use NHS services because other people need them more than me.”

“Am feeling ongoing low level malaise, difficulty walking, intermittent breathlessness but feel this will need more than a talk to GP so there’s no point in contacting her.”

“Too frightened to use any service because of the virus.”

“It appears to be more dangerous to go to hospital or the doctor than to go to the park.”

Experiences of social care

The next set of questions were relevant for people who receive social care. Of our respondents 19 people said that they or the person they care for receives social care or support to carry out daily activities.

When we asked if people had experienced a change in this care, 14 people answered that they did. When we asked them to rate the communication about these changes, 40.9% said that the communication was “Very poor” or “Poor”. The same number thought it was “Fair” and 18.1% rated the communication as “Good” or “Excellent”. When we asked people if this rating was in relation to a particular service 12 people said that it did and a variety of services were mentioned, with Wandsworth Social Care services being the most commonly cited.

A few people felt that they hadn’t had communication or support when they needed it:

“They’ve just disappeared, with no communication.”

“Mum in extra care housing very little information given out on shopping required, well being, general communications”

“My husband admitted to hospital but social worker who involved in his care didn't have no information about my husband mental condition. I rather not to talk very much coz I get panic attack remembering this problem.”

A notable theme was cancellation of formal paid carers (some people chose to cancel their carers to help shield vulnerable people). They described the impact:

“Unable to get familiar carers in so very little respite.”

“Respite was cancelled.”

“We decided early on not to risk having our night nurses come in. Several of them also work on wards and have come into contact with covid patients. It's not safe, and we didn't fancy the risk. The downside is now both my husband and I are incredibly sleep deprived and struggling, but it seems like the better/safer option.”

One person shared this positive experience about Treloar College, who provide learning, therapy and care for young disabled people:

“They have been absolutely brilliant. My son has been able to stay there where he is safe and to continue receiving educational input. When he came out of hospital, they isolated him with a dedicated team of carers for 14 days before he went back to his room on the residential house. We could not have coped with our son at home and he would have been at a greater risk of catching the virus as my daughter's school did not close until it had to. While his educational input in the house is not the same as when he was attending class, he would not be having any at home.”

Experiences of mental health and wellbeing

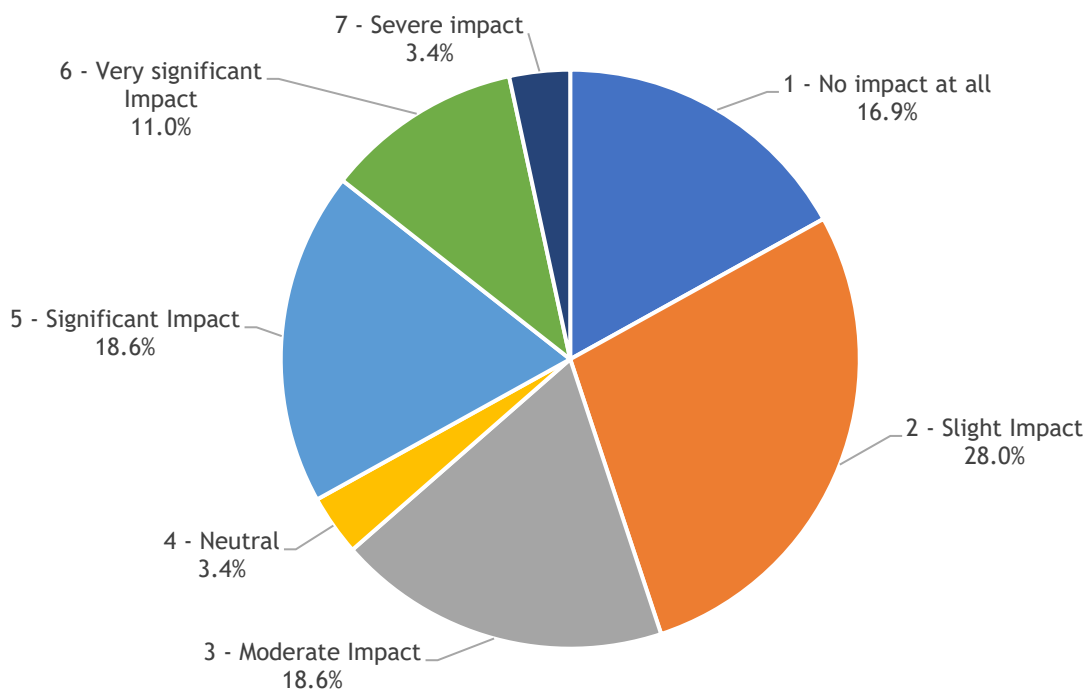
Healthwatch wanted to gauge the impact that the pandemic and the lockdown had on the mental health of local people.

118 people answered this question and as the graph below shows, almost all participants acknowledged that there had been an impact on their mental health.

The highest percentage of survey respondents (28%) said the coronavirus pandemic has had a “Slight Impact” on their mental health and wellbeing of the person they care for.

Notably, almost a third of respondents felt the coronavirus pandemic had a more serious impact on their mental health and wellbeing or that of the person they care for.

How much of an impact has the COVID-19/coronavirus pandemic had on your mental health or wellbeing, or the mental health or wellbeing of the person you care for?



There wasn't a trend to answers about whether changes to a specific service had affected their mental health. However, when we asked people to tell us more about their experiences of the impact of the pandemic on their mental health many mentioned feeling **"anxiety"** and **"isolation"** and **disrupted sleep**.

Some people described anxiety was because of concern that other people aren't socially distancing properly. Other anxieties were linked to more personal issues such as relationship breakdowns and having children at home all the time. Some talked about anxiety due to the uncertainty around the pandemic and how long life would be like this before resuming normal life.

A number of people mentioned that poor communication and unclear information affected their mental health, from trying to find out about how their relatives were doing in care, to Government information and advice.

"The worry about other people not social distancing or understanding the ease of spreading has meant we have stayed home including not exercising outside the home."

"I have health anxiety, so a global pandemic is very triggering for negative thoughts and obsessive worrying. It was much worse at the start of the outbreak, but as lockdown as gone on it has reduced. As I've adjusted to lockdown, I'm concerned about how I will get used to things potentially returning to some sort of normal. At the moment I would not feel comfortable going back to work or meeting with friends and family."

“Two of my daughters have needed support, which they have got from GP. It’s not enough, they need talking therapy, but that is an ongoing problem.”

“I can’t sleep well, I’m most worried about the future as lockdown eases, how many businesses will close, jobs lost, kids suffer from loss of education, relationships break down.”

“Due to the pandemic lock down being unable to attend and support loss of several family members around the globe - added to my own ill health. The feelings of non-closure that will last with him for a long time to come.”

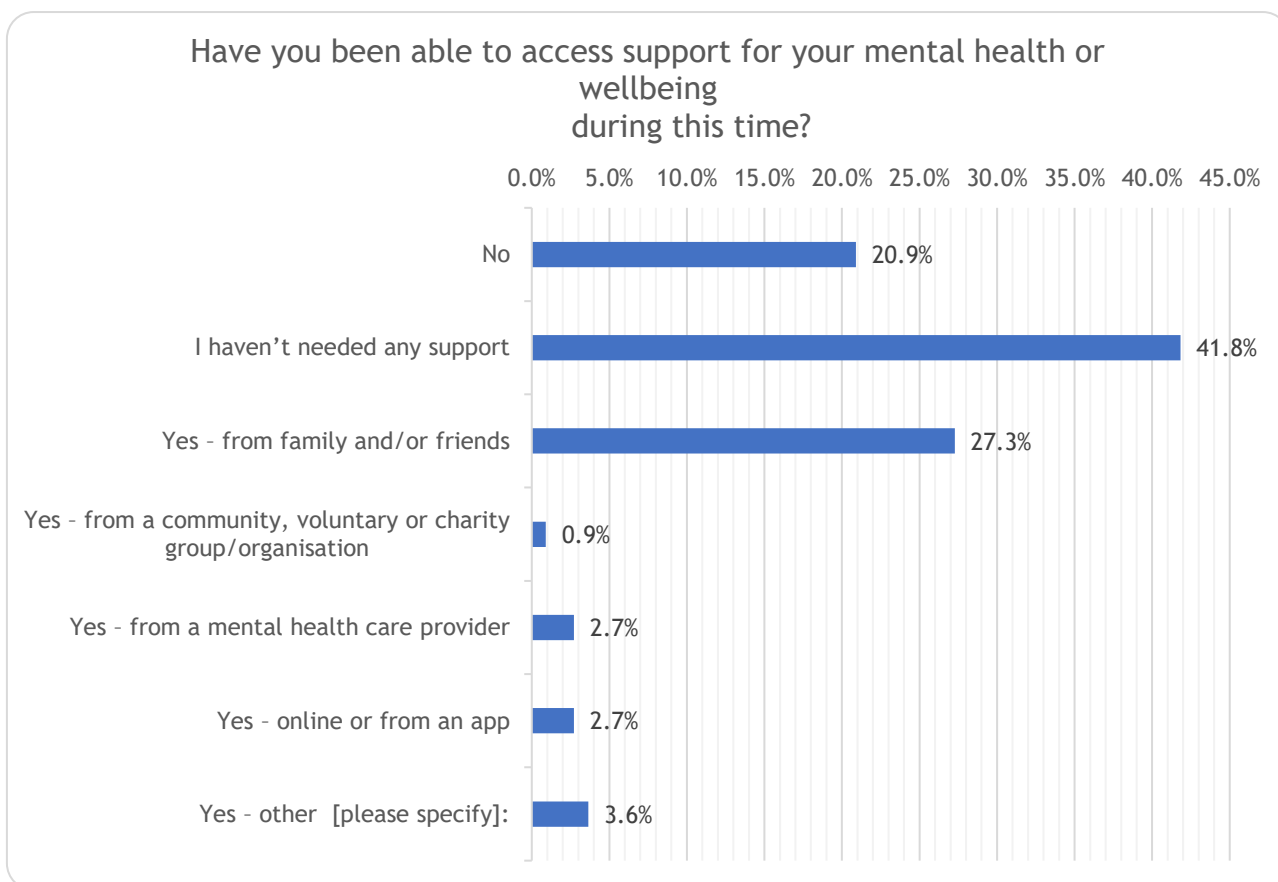
People caring for others reported feeling strain:

“No hands-on physio, SALT, OT, Orthotics face to face assessments. Relentless and exhaustion- providing 24-hour care. Broken night’s sleep providing care.”

A number of people mentioned that if they were able to and felt comfortable to exercise, this had helped their mental health wellbeing.

Access to mental health support

The graph below shows, 40% of people felt that they didn’t need mental health support. Just under 30% of people said they accessed mental health support from family or friends. Relatively few reported being able to access mental health support from other sources.



Just under 3% (2.7%) of survey respondents accessed mental health support from a mental health care provider. Of those who specified an 'other' service, a private therapist, neighbour, phone support and voluntary sector support were mentioned.

When asked to tell us more people's comments highlighted that:

- Some felt they might have wanted more help but didn't seek support for various reasons, some imagined the support would be limited during the pandemic:

"Would like to have psychological telephone support, but in absence of this I am making more use of email to keep in contact with friends."

"Mental health suffered due to relationship breakdown, GPs too overwhelmed to listen, and services offered are extremely limited."

"I was given the details of local mental health support from my GP but haven't explored it because I assumed that there would be a long wait, only short-term options or others would need it more than me."

- Many highlighted they felt fortunate to have support from friends and family and to spend time with loved ones, but this was not the case for everyone:

"I am lucky to live in a care home where friends and staff very supportive."

"Fortunately I have a good community and many online ways of keeping in touch with friends and activities. But too much on line communication is effecting my wellbeing."

"These times are precious. We have more time to do things that we enjoy."

"We live in a tiny apartment. We're not able to speak openly without anyone else hearing, and there is no where/no space to process post session, so it ends up being more of a catalyst of pain than helpful."

Other comments

People were given the opportunity to leave comments on anything else they would like to share. In addition to the themes already mentioned in earlier questions:

- Some survey respondents shared frustration about official guidance and lack of clarity about rules that they did not necessarily agree with.

"Very confusing second phase messaging."

"Government comms shockingly bad. No longer listen. Also no masks or proper info on WHEN & HOW to use them."

"Despite good support systems with friends and community it's becoming important for my good mental health to go out. So this general 70+ lock down is not good for us who know

how to keep well. With at most another 20 years to go with our lives it seems insane to apply this rule.”

“Access to online information has been invaluable. Those who are not connected have struggled, so I’ve spent a lot of time relaying information.”

- Some highlighted positive experiences including:

“Important to put experiences in proportion with many people coping quite well.”

“Quite a few patients have told me that they are happier than they have every been.”

Findings, recommendations and next steps

Below is a summary of the main findings and themes in responses to our survey. As knowledge about COVID-19 continues to change and develop over time, and rules change around what can be done safely, there is a need to continue to adapt and change how health and care is provided. In this light we have made observations and recommendations for next steps:

Information, advice and communication

People found most information online through national news sources, though many mentioned Wandsworth Borough Council emails as useful.

People without internet access, or those who require non-digital communication methods, experienced difficulties finding and keeping up to date on COVID-19 information.

There was some confusion over messages about the virus, safety precautions and new rules the public were asked to follow. People expressed frustration about what they viewed as contradictory messaging on safety guidelines, and it was difficult for some to understand changing messaging and rules.

Testing for COVID-19, changes to access of health care services and looking after physical and mental health were topics people said they had most difficulty finding information about. A significant proportion of respondents described communications about changes to health and care as poor or fair in the circumstances.

As we prepare for a possible second wave of COVID-19 and the upcoming winter flu season, it will be vital to provide people with understandable safety information that they will be able to use in their daily lives.

- People appear to be mainly using national news sources of information, but messages at a national level could be more confusing for people as different localities have different rules, advice and guidance. It will need to be very clear what is relevant for Wandsworth residents. It might be helpful to try to keep safety guidelines and other information streamlined, and if possible complementary to national messages to avoid confusion. There is a danger that people may switch off or stop listening to messages over time.
- Information about the following topics may need to be more clearly communicated: testing for COVID-19, changes to how people can access health care services and how to look after after physical and mental health.
- In particular, clearer and wider communication about changes in health and social care services would be appreciated by many.

Healthcare support

When people were asked about communication with health services, most said that they were commenting on GP appointments or hospital and outpatients' appointments. This would suggest these services are a key source of contact and information for the majority of people.

Some respondents experienced faster and easier access to appointments, especially if over the phone, but experience varied. Some said they preferred face to face interaction with healthcare professionals or found additional challenges when appointments were over the phone.

A significant number of people reported cancelled or re-arranged appointments, which some were able to manage with, others were more concerned. About a third of people said that they had been dissuaded from contacting health services themselves.

There were some notable comments from carers or people looking after children about the added strain and work they felt during lockdown as some services were stopped that would usually support them or the person they care for.

- Information, advice and communication might usefully focus on GP and hospital mechanisms.
- There should be a focus on what may be the right form of communication and appointment for different individuals. And those who may find digital means of accessing services useful should be supported as appropriate.

Based on emerging feedback Healthwatch Wandsworth and NHS Wandsworth have already begun a survey to better understand the use of digital and telephone appointments.

- Health care services will no doubt have to focus on re-arranging appointments. Proactive contact with patients would be beneficial, or alternatively communications to patients could encourage those who may have had a gap in their care to proactively get in touch.
- Information, advice and support for carers should be widely available and promoted. There are likely many more people who will be playing a caring role in the new and evolving situation.

“I feel carers/older people have been overlooked in all this. People complain about being indoors for a few weeks, try being indoors with ill health and caring for a young adult with complex mental/physical health needs and no way out until there is a vaccine....”

Social care support

Social care was relevant to less people answering our survey, yet social care supports some of the most vulnerable people in our community.

There were a few comments throughout the survey that talked about lack of contact or the stopping of services. Almost as many people described communication as ‘Poor’ as those who described it as ‘Fair’.

There was a clear theme about the burden of the situation on carers.

- As possible second waves of the pandemic and longer-term effects of COVID-19 emerge it may be important to prioritise proactive communications and contact with social care service users, perhaps this could be a joined up approach with health care staff.

- Support to help carers and others to carry the burden whilst in lockdown may need to be remote, indeed many carers struggle for time in ‘normal’ circumstances and may benefit from proactive virtual support.
- Where support from people outside of their home is possible, carers will need reassurance of safety precautions.

Mental health and wellbeing

A significant number of people reported that COVID-19 had had a negative impact on their mental health. Many described general anxiety or depression rather than clinically diagnosed mental health conditions.

Most sought help from family and friends rather than formal services, although a large proportion had stated that they didn’t think they needed support.

- It would seem that messages and advice about managing mental health and accessing mental health services could be usefully shaped as ‘social messages’ that can be shared and through peer support.
- Information about availability of more formal support should be complementary to the above. Previously Healthwatch Wandsworth has found that there is a low level of awareness that people can self-refer to Talking Therapies and a reluctance to speak to people about mental health needs.
- *Healthwatch Wandsworth and Voicing Views have started working with Talk Wandsworth NHS services to see how virtual ‘wellbeing workshops’ can be run and relevant to groups in the community during this time.*

Health inequalities

As the coronavirus pandemic developed, it became clear nationally that existing health inequalities had had an impact on health and wellbeing. Unfortunately, at the time of publishing the survey, the extent of this impact had not become clear. Some respondents did highlight how they felt they were disproportionately affected, including carers, people with autism and those from a BAME background but there were no substantial themes through each question.

However, results from our survey and other emerging evidence suggest a need for:

- Focused and informed work to communicate and work with groups in our community who have been disproportionately affected by COVID-19.

Healthwatch Wandsworth has focused on health inequalities over the last 2 years and COVID 19 has brought a new focus to this. Our event in September 2020 will continue to look at progress in tackling health inequalities. Healthwatch Wandsworth has also started looking at barriers to digital and telephone appointments which may disproportionately disbenefit some people in our community.



Share your experiences of Wandsworth health and social care services in response to the Coronavirus Outbreak

About this survey

In response to COVID-19, health and social care services have had to drastically change the support they offer the public. It is therefore important that we understand how these changes are working for people.

This survey is for people who live in Wandsworth to share your views on how local services are working during this time.

Your responses will be kept completely anonymous and will help local health and care services understand what needs there are locally, how their services are working, and where things can be made better.

We will also be feeding back findings to Healthwatch England to help them understand what is happening across the country so that they can help central government departments understand and learn from what is happening from your perspective.

About You

1. **Are you completing this on behalf of someone you support, or more than one person, who is considered to be at high risk from COVID-19/coronavirus?**

- Yes
- No [*please go on to question 2*]

If yes, please tell us why (select all that apply):

- They have an existing health condition
- They're pregnant
- They're aged 70 or over
- Another reason - please specify: _____

Have they received a letter or text advising them to shield?

- Yes
- No

2. **Do you consider yourself to be at high risk from COVID-19/coronavirus?**

- Yes
- No [*please go on to question 3*]

If yes, please tell us why (select all that apply):

- I have an existing health condition
- I'm pregnant
- I'm aged 70 or over
- I am a key worker
- Another reason - please specify: _____

Have you received a letter or text advising you to shield yourself?

- Yes
- No

If yes, do you feel that you are receiving enough information / medical and practical support to enable you to shield sufficiently? Please comment further:

3. **Do you, or does the person you care for/support, have any additional communication needs?**

- Yes
- No [*please go on to question 4*]

If yes, please tell us more (select all that apply):

- I/they use British Sign Language (BSL)
- I/they need information in braille, audio or large print format(s)
- I/they need Easy Read information
- I/they need information in another language(s)
- Other - please specify:

Have you been able to find information and advice in the format(s) or language(s) needed?

- Yes
- No

Information and Advice

4. **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?**

1 – Very Easy	2 - Easy	3 – Neither easy nor difficult	4 - Difficult	5 – Very Difficult	DK – Don't Know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

1 – Very Easy	2 - Easy	3 – Neither easy nor difficult	4 - Difficult	5 – Very Difficult	DK – Don't Know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

1 – Very Easy	2 - Easy	3 – Neither easy nor difficult	4 - Difficult	5 – Very Difficult	DK – Don't Know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. **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?**

1 – Very Easy	2 - Easy	3 – Neither easy nor difficult	4 - Difficult	5 – Very Difficult	DK – Don't Know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. **Which topics, if any, have you found it difficult to get clear, understandable information or advice about?**
(Please select all that apply)

- None, I have all the information I need
- Looking after my physical health
- Looking after my mental health or wellbeing
- Accessing repeat prescription medications
- Managing existing physical health conditions
- Managing existing mental health conditions
- Advance care planning and end of life care
- Advice for family carers
- Self-isolation
- Changes to the health care services I usually access (e.g. GP practice, pharmacy, hospital outpatient appointments, community nursing visits)
- Changes to the social care support I usually access (e.g. care visits at home, residential, nursing or respite care homes)
- Accessing help in my local community (e.g. getting groceries or picking up medication)
- What to do if you think someone in your household has COVID-19/coronavirus
- Shielding people who are at very high risk of severe illness from COVID-19/coronavirus

- Help for people who do not use the internet
- How to volunteer in my local community
- Testing for COVID-19/coronavirus
- Symptoms of COVID-19/coronavirus
- Social distancing

- Other (please specify):

9. **Where have you found information or advice about the COVID-19/coronavirus pandemic?**

(Please select all that apply)

- Online – national organisations’ websites (e.g. Government, NHS)
- Online – local organisations’ websites (e.g. Council, local hospital, voluntary/community organisations)
- Online – social media
- Media (e.g. television, radio or newspaper)
- Received by email or text message
- Received by post
- From family or friends
- Other (please specify):

10. **Have you found any specific information or sources of information especially helpful?**

- Yes
- No [*please go on to question 11*]

If yes, please tell us more – what was it and why was it helpful?:

Your Experience of Care

Healthcare

11. **Have you, or has the person you care for, experienced any changes to your/their healthcare due to the COVID-19/coronavirus pandemic?**

- Yes
- No [*please go on to question 12*]
- I/they haven’t needed any healthcare services

If yes, how would you rate the communication received about the changes?

1 – Very Poor	2 – Poor	3 – Fair	4 – Good	5 – Excellent
•	•	•	•	•

Does this relate to a specific service?

- Yes [please tell us the name of this service - *optional*]:

- No
- Prefer not to say

Have your appointments, and the way you get your healthcare, changed?
(e.g. *have they happened over the phone?*) What is your experience?

Would you like to tell us more about your/their experience of these changes?

Social care support

12. **Do you, or does the person you care for, receive social care or support to carry out daily activities?** (e.g. *having a carer come in, staying in a care home, receiving rehabilitation, etc.*)

- Yes
- No [*please go on to question 13*]

If yes, have you/they experienced any changes to this care due to the COVID-19/coronavirus pandemic?

- Yes
- No

If yes, how would you rate the communication received about the changes?

1 – Very Poor 2 – Poor 3 – Fair 4 – Good 5 – Excellent

Does this relate to a specific service?

- Yes [please tell us the name of this service - *optional*]:

- No
- Prefer not to say

Would you like to tell us more about your/their experience of these changes?

Mental Health and Wellbeing

13. How much of an impact has the COVID-19/coronavirus pandemic had on your mental health or wellbeing, or the mental health or wellbeing of the person you care for?

Scale: 0 (No impact at all) - 7 (Severe impact)

- 1. No impact at all
- 2. Slight Impact
- 3. Moderate Impact
- 4. Neutral
- 5. Significant Impact
- 6. Very significant Impact
- 7. Severe impact

Does this relate to a specific service?

- Yes [please tell us the name of this service - *optional*]:

- No
- Prefer not to say

Would you like to tell us more about your/their experience of the impact?

14. Have you been able to access support for your mental health or wellbeing during this time?

- Yes – from family and/or friends
- Yes – from a community, voluntary or charity group/organisation
- Yes – from a mental health care provider
- Yes – online or from an app
- Yes – other [*please*

specify]: _____

- No
- I haven't needed any support

Would you like to tell us more about this?

Anything else

15. Is there anything else you would like to tell us?

Thank you for taking part!