Covid-19 Patient & Public Experience Surveys

Background and methodology

- In response to Covid- 19, our signposting service received positive feedback relating to NHS staff, but also requests for help in navigating service & policy changes to local health and social care services.

- The public were also raising concerns about the lack of communication and support they were receiving from health and social care services.

- We created 3 surveys to learn about people's experiences. One survey focused on how Covid-19 had affected mental health, one focused on the experiences of those who had been shielding, and the last focused on health and social care more generally.

- The surveys ran from **11th May 2020 to 31st July 2020**.

- They were sent to statutory, voluntary and NHS services across Hertfordshire to share and distribute with their contacts and via their social media channels, which resulted in a huge amount of interest and social media support.

- This support enabled us to speak to 667 people.

The stats

- **269** answered the mental health survey, **239** answered the health and social care survey and **159** completed the shielding survey

- **63%** were aged 18-64 years old and **37%** were aged **65** years or older

- **91%** identified as White British

- **53%** have a long term condition

- **22%** considered themselves to have a disability

- **23%** considered themselves to be a carer

Limitations of the work

- Although there was the option to request the surveys in a different format, all respondents completed the surveys online. This indicates that the respondents not only have access to online technology, but feel competent using it.

- To ensure we hear from those who do not have access to the internet, or do not feel confident using it, we are carrying out a separate piece of research. This will focus on digital exclusion and how Covid-19 has affected those who do not use online technology.

- We are also working with our partners and the learning disability community in Hertfordshire to understand how Covid-19 has affected people with learning disabilities, and what support they have received during this time.

Key findings – overall messages

- People told us how valuable the Council/Herts Help was in providing information, advice and practical support such as food parcels and other essentials. People who were shielding found these services particularly valuable.

- Negative feedback was always with the caveat of understanding services were under a lot of pressure, and admiration for staff.

- Communication from providers was very mixed. Those who were shielding had a much poorer experience regarding this.

Key findings – overall messages

- 80% of people that responded to the MH survey and 55% who responded to the shielding survey noted that Covid-19 had had a negative impact on their mental health. However, this did not necessarily result in accessing mental health support.

- People felt that changes to services such as virtual appointments were positive when this resulted in the appointment being more efficient e.g. reducing travel and waiting times. However, people were keen for technology to not completely replace face to face or being able to speak directly to a clinician.

- People's experiences differed across services – particularly dentistry and HPFT

Changes to services

The respondents that had used health, social care and/or voluntary services at the time of completing the survey, 43% had experienced changes to their care or treatment.

The key changes people noted were:

- Across all services, providers were either cancelling, postponing or moving to online technology to carry out appointments and consultations.

- GP practices to be the most likely to use remote methods to book and carry out appointments

- Hospitals were cancelling or postponing appointments

- Reduced care from social care, and no visitation to loved ones allowed

- Reduced or no support from mental health providers.

Communication

Communication from providers was very mixed. For respondents who rated the communication they received as "good" or "very good" this was because communication was seen as "timely" "ongoing" or "next steps were explained clearly".

- GP practices: 55% (54 out of 99) – Prompt, timely

"Communication was very good. I received an email from the surgery clearly explaining what was happening."

- Hospitals: 55% (54 out of 99) – Clear information, timely

"It was made very clear on all letters and text message reminders I received about my appointments that they would take place over the phone."

- Social care: 51% (8 out of 16) – Next steps were explained clearly

"The care home had written and phoned to explain what actions they had taken to protect residents."

- HPFT: 48% (9 out of 19) – Ongoing, frequent contact

"The Trust kept me informed of any changes on a regular basis."

Communication

- Where people thought communication could have been better from providers, this was around receiving more frequent contact, more clarity and notice, as well as more information about how to contact them during this time.

- Where respondents rated communication as "poor" or "very poor" this was down to little or no contact from providers, causing unnecessary anxiety.

- Respondents who answered the shielding survey had a much poorer experience in terms of communication from their GP practice compared to the general population. This is because they received very little or no contact from their GP about shielding which they found unsupportive and irresponsible. They also noted no follow up conversations with the GP after receiving the standard letter.

- Although people were understanding of the pressures the services were under, they would have appreciated being able to speak to someone to help relieve any uncertainty and anxiety they were feeling.

"Apart from the initial letter I've had no communication."

"I only received a general text from HPFT saying all appointments were cancelled, nothing to say when I will see the psychiatrist or if the appointment will be rearranged."

"The care stopped. There was no communication. That is very bad."

"I should have been informed about cancellations with more notice."

Feedback from signposting – dental services

- Via the survey, there was less feedback on dental services compared to GPs, hospitals, mental health and social care. However, dentistry was one of the strongest themes that came through our signposting function.

- When people contacted us through signposting, they noted:

    - Receiving very little or no communication from their dental practice about when services would reopen, and how to access treatment in the interim.

    - In some cases not being told that their appointment had been cancelled.

    - Not being able to access the dental hubs, due to delays in opening and mixed messages about which ones were open – which couldn't be clarified by the service itself.

    - When services resumed, not being able to register with a dental practice as a NHS patient, largely because of the backlog and high demand.

    - When services resumed, private patients being prioritised over NHS patients.

Access – website and technology

- Across all services, people noted that providers websites did not always have clear information detailing how they were continuing to operate during this time, and who/how to contact the service if they needed to.

"I could not find information on the website. There needed to be more information on what services were still running."

- Across GP practices and hospitals, people valued the use of online technology to continue their treatment and contact with their clinician during this time.

  - People who accessed their GP practice thought the use of online technology was an improvement in terms of getting an appointment, and getting one more quickly.

  - People who accessed their hospital found remote appointments (in part of full) reduced waiting times and travel.

"I had a telephone consultation instead of visiting the hospital – it was actually an improvement!"

Access

However, people still highly valued being able to speak directly with a clinician and having face to face appointments, noting that they would not like all changes to continue post COVID-19. Concerns were particularly raised about the ability to diagnose or 'self diagnose' using remote methods.

"It concerns me that the GP can prescribe medication without actually seeing the person and their condition." "We talked over the phone but I prefer face to face."

Mental Health services & Social Care services:

- In terms of accessing mental health services, people noted the difficultly to engage when having an online appointment with their psychiatrist.
"It has been reliable but harder to engage with than face to face appointments."

- People also found it difficult to access immediate support, particularly from the Out of Hours Service and Single Point of Access.
"There can be very lengthy waits to try and speak to someone on the Out of Hours Service." "SPA was not too bad but it was hard to get through to them."

- Social care - people received good communication but found it difficult to access practical support to address their social care needs.
"No follow up from a visit from an occupational therapist"
"Mixed experience – difficulty in obtaining help."

Feedback from signposting about hospital services

- Our signposting service received feedback about Maternity Services at Lister Hospital and care and communication provided at Watford General Hospital.

- Feedback about Maternity Services at Lister Hospital found that social distancing was not always observed, and staff were not always wearing and/or changing their PPE.

- Feedback about Watford General Hospital found that the care provided in Covid-19 wards was of much higher quality compared to non-Covid wards. Communication to family members was also much more efficient if their loved one was in a non-Covid ward.

Key findings – Mental health

- 80% (207 out of 260) said their mental health had been affected by Covid-19 but only 17% (39 out of 235) accessed support from mental health services. 55% (71 out of 130) of respondents who answered the shielding survey said that shielding had affected their mental health.

- People noted feelings of:
    1. Anxiety and depression
    2. Anxiety about lockdown easements
    3. Isolation and loneliness
    4. Lack of motivation and disrupted routines
    5. Low mood

- People were not aware what mental health services and support is available to help manage their emotional wellbeing. Concerns were raised about mental health services becoming overstretched in response to Covid-19.

- Concerns were raised about the little or no contact from HPFT.

"I have no idea what help if any is available or where and how to get it."

"I am deeply anxious about leaving the house for any reason at all."

"My anxiety is extremely high and I have struggled with depression."

What next?

- Share the findings with partners through the report and holding to account meetings

- Patient and community voices crucial to enable learning

- Impact and experience is different depending on the service - what can be learnt and done differently if there is a second wave? Particularly around communication and pressures on mental health services

- Different groups being affected disproportionately e.g. private vs NHS dental patients & digitally excluded

- Delivering services in new ways "restart" and "Better new" - post COVID-19 use of technology doesn't seem a given, how does the system involve patients to continue its use?

What next?

- Undertaking 2 further pieces of research

  1. Digital exclusion
  2. Learning disabilities

- Publish survey of all Hertfordshire GP websites with specific focus on cancer patients and their carers