

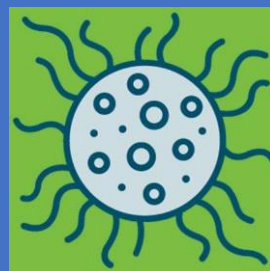


# What are people telling us about COVID-19?

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Key messages from our evidence – Quarter 2 Report

July - September 2020



This report highlights the thematic review of over 300 experiences of Luton residents during the COVID pandemic in Quarter 2 (July August and September 2020).

We have also incorporated thematic differences and commonalities between Q1 (April – June) and Q2 (July – Sept), as well as focusing on seldom heard cohorts of the Luton community, and an outline of particular communities' views from individual reports and engagements in this time (July – Sept 2020). We have also added a case study from an individual who has been digitally excluded throughout the pandemic and how this experience affects the views of those unable to join the online digital communications. This view is from one individual and will be added to an overall report on Digitally Excluded which will be published later in 2020 with further engagements and views of those who cannot use the digital online platforms.

These quarterly reports are records of individual anonymous views from Luton residents, with the aim of informing the health and care system locally, to support ongoing planning of health and care services for people in Luton, for the Health and Wellbeing Board to view the resident views along side provider and commissioner views on services, and with the aim of ensuring these resident views are heard, taken on board and used in service planning commissioning and delivery ongoing.

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## 1. Methodology

Healthwatch Luton have gathered feedback through the 'How are you doing?' campaign, which has asked residents their overall views on health and social care services during the pandemic. We have used an integrated marketing approach across platforms such as social media campaigns, surveys, individual interviews, engagement forums and professional forums to gather feedback from a cross section of Luton residents monthly. All of these feedbacks are moderated, and all reports are reviewed and individually evaluated.

### Source Details

HWL have gathered a further 300 feedbacks in the last three months from Luton residents and professionals between July – September 2020. Since April, we have spoken with or gathered feedback from **over 600 residents** on COVID 19 and its effects on people's experiences on their health and care.

### What happens with the feedback we gather?

All of the feedback we gather is provided anonymously in Brief Summary Feedback reports to providers and commissioners of services in Luton. This helps those providers understand and become aware of how patients are experiencing their services, from an independent perspective. If more than one feedback on a particular service is provided, this becomes a 'theme' and Healthwatch Luton highlight this to the provider, and the provider's commissioner (who pays for that service to run). We also make recommendations to providers and commissioners to help shape the delivery of services based on resident feedback provided.

We take Luton resident feedback to various Board meetings and groups throughout Luton, to raise the profile and voice of Luton resident views. These Boards and groups help shape the delivery and planning of services, and the feedback is integrated into these design plans. We also highlight concerns to Scrutiny (Health and Social Care Review Group) who scrutinise services in Luton and hold services and commissioners to account. In some cases, we escalate feedback to NHS England and other national commissioners of services to ensure thematic reviews are assessed when quality assuring or assessing services.

Monthly, our reports are sent to Healthwatch England who collate our feedback with other local Healthwatch feedback and seek trends to form a national picture which are fed to the Department of Health and Care, as well as to NHS England. We also provide relevant feedback to regulators of services, such as the Care Quality Commission.

## 2. Key Themes in feedback July – Sept Overall

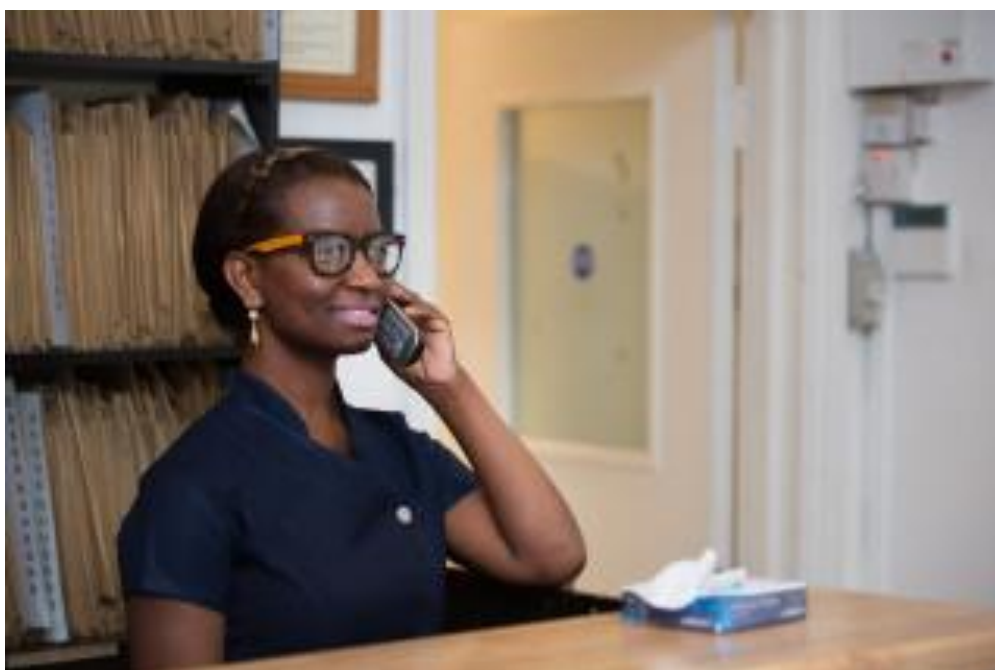
### Overall Themes July – September 2020

The common themes across Quarter 2 of feedback from Luton residents to Healthwatch Luton are:

- Communications to local people
- Communications on testing and rules and guidance – and confusion
- Testing – access and understanding
- Access to services

Overall Communications to residents was the leading concern for people in Luton. Throughout Quarter 2 Luton went through various changes of areas of intervention, concern, and then reverted to national communications. Communications was mainly negative in feedback, but during October (Quarter 3) we are seeing a reduction in negative feedback in communications to the public. People generally felt 'confused' and 'unsure' what actions to take, how to approach testing and adhere to guidance locally.

Access to services is noted both positively and negatively, and across main health and social care services, namely GP access and Hospital services.



### 3. Key Themes in feedback by Month

#### July 2020<sup>1</sup>

In July, Luton became an 'Area of Intervention'<sup>2</sup> which meant Luton was able to community test, initially in LU4, followed by a couple of days later on Saturday 25<sup>th</sup> July in LU1 – LU4. Testing sites were made available and Luton residents were encouraged to test themselves, even asymptotically. There was a good response locally to people using the community testing sites. Healthwatch Luton gathered **56 views** on the pandemic this month.

The main themes from July's report were:

1. Communications
2. Rules and Guidance
3. GP Access
4. Access to all services

#### Communications

Overall people told us they were struggling with the communications sent to them, via the Government as well as local public health messages. The main theme was around 'being timely' and 'not consistent' and it was apparent by moving Luton into an Area of Intervention, that the communications caused many residents 'confusion' and dis-engagement. Healthwatch Luton (HWL) supported the local Public Health messages but there were many people who found online communications ineffective for their elderly family members, or parts of the community that did not use social media.

#### Rules and Guidance

Many residents reported feeling confused by what rules to follow and felt the guidance they were provided was 'muddled' and 'difficult to follow'. The local messages were inconsistent with the national messages during this time, and it was apparent that this confusion was resulting in various people feeling like 'they were just going to do what they thought was best.'

#### GP Access

GP access was reported on both positively and negatively in this month. The positive feedback highlights how people feel they are 'grateful' they can still interact with their GP, and that when they do interact online, they feel 'satisfied' with how the digital appointment has gone. For the negative feedback, people who struggled to use digital appointments felt 'disappointed' by the system, and more people outlined their waiting times to getting through to a doctor or nurse, via the surgery phone lines, was 'worse than before'.

#### Access to all Services

There was a theme of accessing a range of services that appeared in this month's

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<sup>1</sup> <https://www.healthwatchluton.co.uk/wp-content/uploads/2020/09/Covid-19-Feedback-July.pdf>

<sup>2</sup> <https://www.gov.uk/government/publications/spi-b-areas-of-intervention-local-lockdown-measures-to-control-outbreaks-of-covid-19-during-the-national-release-phase-30-july-2020> (prior to the new Tiered system, COVID areas were outlined in areas of intervention, support or concern.

feedback, including the hospital, GP, dental and mental health services. There were also a few feedbacks on testing for COVID 19 sites and access to these sites. Where the feedback was positive, the general overview was that people hoped the ease of access would continue after the pandemic. Where there was negative feedback, people hoped this would be addressed during the pandemic.

July's report also highlighted professionals' views of how they have coped during the pandemic. We spoke to many professionals and wrote a case study report on a community-based nurse. This report highlighted issues such as available support to professionals, or that there was not always the right amount or right sort of PPE available for some professionals to feel safe<sup>3</sup>.



The infographic features a grid of icons representing different roles: a COVID-19 virus, a call center agent, a chef, a businessman, a nurse, a teacher, a cleaner, and a community nurse. The Healthwatch Luton logo is in the top right corner.

# How are you doing?

Gathering feedback from the public and professionals on how they are coping during the COVID 19 pandemic

## Case Study:

The perspective of a community based nurse in Luton

<sup>3</sup> <https://www.healthwatchluton.co.uk/wp-content/uploads/2020/09/Covid-19-Feedback-July.pdf>

## August 2020<sup>4</sup>

August saw Luton remain an 'area of concern'. Locally, asymptomatic testing continued for those who lived, worked or supported individuals in Luton, as well as symptomatic testing. It was noted there was a reduction of positive tests in this month – dropping from just over 6% to around 1.6%, however, Luton still remained the 2<sup>nd</sup> highest in the East of England region for number of confirmed cases of coronavirus. Healthwatch Luton **gathered 91 feedbacks** from residents on the pandemic this month.

The main themes in Luton for August were:

- Communications – not being joined up locally
- Social Isolation
- Dental – access and confusion of private / NHS patients
- Access to services – mainly GP and Hospital Outpatients
- Testing – process, length of time and testing sites locally

### Communications

Some residents felt the changes of Luton moving through areas of intervention/concern led to further confusion on what local residents should or should not be doing. Many people reported to Healthwatch for advice on what the local rules and guidance was and what they could or could not be doing. There was also a concern that most of the communication from local public health or guideline changes came through social media which (positively) was reported as being quick, up to date and helpful, but an overall concern of people who were not on social media or not able to join the local authorities website were not receiving up to date or official updates.

Some organisations felt there was not a 'joined up approach' and many organisations felt they were being left behind in communications.

### Social Isolation

This was a new theme from a few people who contacted us in the month – highlighted their concern on feeling there was not enough support for those who felt socially isolated.

### Dental

Dental feedback increased quite significantly this month in relation to other months, highlighting that those who had attended the dentist or received dental care were positive and happy with the care they received. However, the negative feedback was overwhelming highlighting of NHS patients unable to get appointments, even for significant pain issues, but private patients were able to access more face to face appointments. This was progressed to the Health and Wellbeing Board and across the Healthwatch network – which was highlighted to NHS England, and resulted in dental care being reminded of their contractual arrangements regarding NHS patients.

<sup>4</sup> <https://www.healthwatchluton.co.uk/wp-content/uploads/2020/09/Covid-19-Feedback-August.pdf>



### Access to Services

GP Access remained a high concern for people – who highlighted issues with accessing appointments even online or on the phone. Some digitally excluded residents highlighted concerns on how they were unable to access services. Access to NHS dental care was also an increasing theme this month.



### Testing

Many people reported issues with local testing, in particular about being unsure locally about the process of getting tested (a few commented on being tested once, and feeling no further tests were needed), about the length of time testing took to get results, and some people reported the difficulty in accessing local testing sites (in particular around Bute Street car park entrance and exit routes). Home testing was reported as being quite prompt, although some did report not all home testing kits had all the required items, specifically the right bar codes.

### Engagement Forum: August<sup>5</sup>

Healthwatch Luton began running online engagement forums for the public and professionals regarding gathering general views on health and social care during the pandemic. In August we asked people what was working well, and what was not working so well and what could be improved.

Positive feedback:

- Edwin Lobo was mentioned positively with telephone consultations highlighted
- Luton and Dunstable Hospital, in particular Ward 18 was highlighted as having 'amazing staff' and 'good experience'.
- ELFT was mentioned as having good structures in place with admissions of patients

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<sup>5</sup> <https://www.healthwatchluton.co.uk/wp-content/uploads/2020/09/Covid-19-Engagement-Forum-August.pdf>



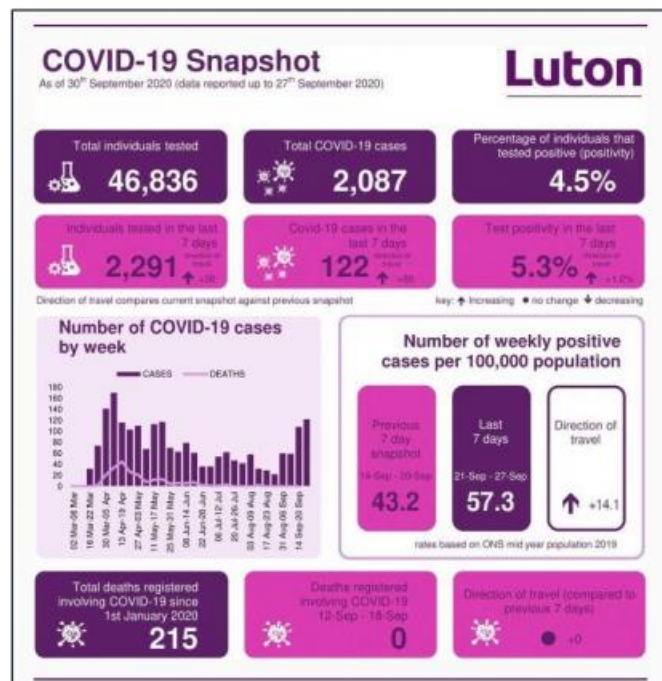
## September 2020<sup>6</sup>

September saw Luton removed from the Government watch list, and communications locally reverted to national communications. Luton was mentioned in Parliament on 30<sup>th</sup> September as being the only town or city, out of 48 who had been placed in measures, to have successfully come out of these extra measures. September also saw a national issue with testing. There were issues with testing capacity and only those symptomatic were asked to be tested. The NHS Track and Trace App was launched this month. Healthwatch Luton continued to support the local public health messages around the 'Rule of 6' which the Government implemented across the country. Healthwatch Luton spoke to **82 residents** on their views during the pandemic this month.

The main themes this month were:

- Enforcement of Guidelines
- Communications
- Access to testing
- Changes to treatment and care
- Access to services

Luton began sharing statistical data with the public in a snapshot platform to inform the public on how Luton was rating in cases, positives and deaths locally.



<sup>6</sup> <https://www.healthwatchluton.co.uk/wp-content/uploads/2020/10/Project-update-Monthly-figures-Sept.pdf>

**Enforcement of Guidelines**

Many people gave feedback around people in Luton not adhering to the national guidelines, and in particular, concern around how guidance was to be enforced. Various people reported having 'lack of trust' in locally being able to ensure people in Luton followed the legal restrictions placed across the country.

**Communications**

With the changes taking place from local interventions back to national communications, many people contacted Healthwatch Luton asking for clarity around communications and guidance to adhere to. This change in focus seemed to cause much confusion locally.

**Access to Testing**

This increased in negative feedback, particularly with the stepped change of moving from asymptomatic testing, to symptomatic only. People felt they were 'unsure' of why this change happened and 'confused' as to what to do.

**Changes to treatment and care**

A few people reported that treatment and care changes were not always outlined or communicated well with patients, that expectations were not always met – and that better communications to patients for changes of appointments to service access could improve patient satisfaction.

**Access to services**

Access continued to be one of the main themes from our feedback this month, particularly around GP access, although as highlighted in August – for those who have had appointments at select GP surgeries, the feedback was positive. For this month, people raised concerns on being able to get through to their GP when needed, as well as hospital referrals and dental access.



#### 4. Specific Engagements in Luton in Q2<sup>7</sup>

Healthwatch Luton acknowledged in their Q1 feedback that they needed to focus on a vaster range of cohorts of people to have a reflective overview of the Luton population. We have integrated our approach to gathering feedback during this time. Our integrated approach has allowed us to speak to people from various backgrounds and cohorts of the community.

**GP Observation Report** This report took place during Q1 with the report available in July 2020 (Q2). This report reviewed GP websites to understand what communications were available to residents through the pandemic, such as appointment information, booking services, and COVID 19 information. This report fed into an East of England Healthwatch network approach also looking at Cancer service information provided, and has been fed back to Healthwatch England to form a national picture.

**Care Home Observation Report<sup>8</sup>** This report used the same methodology as the GP Observation report, reviewing the website communication to the public during the pandemic. The Adult Social Care team were invited to contribute and review the findings of this report, along with the ASC CQC inspector. This report outlined how most care homes in Luton provided consistent and appropriate information during the pandemic, however only 3 out of 37 care home websites highlighted how people could make a compliment, comment or complaint.

**Young People's Views: CAMHS Engagement<sup>9</sup>** Healthwatch spoke to some young people who are currently using the mental health CAMHS team, gathering their views on how health and social care services have affected their care, and how young people have struggled throughout the pandemic. One of the concerns raised was the stigmatization of young people during the pandemic affects how young people access and respond to health and care experiences.

**Mental Health Inpatient Engagement<sup>10</sup>** We ran an Inpatient Engagement Forum with patients currently in the Mental Health Inpatient units in Luton. This is part of a series of Forums we will run throughout the mental health inpatient wards. One of the main points was how most patients felt the staff were being incredibly reactive and supportive to patients during this time but noted how busy the staff are. There were also concerns from patients of not being informed completely of what is available on the ward during the pandemic.

**Engagement Forums: General Health and Care** Healthwatch Luton ran an Engagement Forum which we invited the public to attend to share their general experiences of health

<sup>7</sup> <https://www.healthwatchluton.co.uk/reports-page/reports/> - range of monthly and targeted reports on specific groups

<sup>8</sup> <https://www.healthwatchluton.co.uk/reports-page/reports/> Care Home Report

<sup>9</sup> <https://www.healthwatchluton.co.uk/reports-page/reports/> Targeted Engagement Young People

<sup>10</sup> <https://www.healthwatchluton.co.uk/reports-page/reports/> Mental Health Inpatients

and care during the pandemic. This was attended by a range of people who discussed what had been working, and what was working not so well during the last six months. There were discussions around GP access for some patients, and some concerns around hospital experiences. All of this feedback was collated into our 'How are you doing?' feedback.

**Targeted Interviews and Case Studies: Digitally Excluded** We have run a series of individual interviews with people who are currently digitally excluded, and how they have received communications around health and care during this pandemic. These individual case studies have been published, but the overall report will be completed by working in partnership with various community organisations for more views on how people feel they understand the changes of accessing services whilst not being online, or able to join the online community.



**Targeted Interviews and Case Studies: BAME Community Groups** We also spoke to various (around 24) community organisations specifically supporting the Black, Asian and Minority Ethnic groups in Luton. Many of these organisations were not available due to the pandemic closing many community activities, but since easement of lockdown, have provided anecdotal feedback on how their communities have been accessing health and care services. This feedback was linked into our general 'How are you doing' campaign feedback.

## 5. Comparison from Quarter 1 feedback and Q2 Feedback – commonalities and differences

This Quarter 2 report highlights the thematic views of Luton residents. There are many common themes from our Quarter 1 report, and therefore, these commonalities should be highlighted within the health and care system, to acknowledge the two quarter themes being highlighted by residents on concerns.

### Commonalities:

- **Communications:** With Luton moving through the areas of intervention, concern, back to off the watchlist, to moving to the Government's Tiered system, from Tier 1 to Tier 2 to national lockdown in November, it is no surprise Luton residents are feeling slightly 'confused' by the communications on what to do, how to act, and what rules to follow. Both quarter reports highlight communications to the residents from the health and care system, and local authority has sometimes been 'difficult to follow' or 'hard to know what is right' and has led to some residents disengaging with the system.
- **Access to services:** Both quarter reports highlight Luton resident's issues around accessing health and care services, whether this is around understanding how to access services, struggling to access appointments either online or face to face, or understanding why service access has been amended. Some of these feedbacks are around patient expectations, and this is also around how the system has communicated changes to accessing services and managing patient expectations through this pandemic. There is also a rise in people's concern to accessing services for ongoing long-term condition appointments. There has been an increase in dental access, as well as locally in Luton, a concern during September around accessing blood test appointment (which was related to blood testing nationally).
- **Testing:** For local residents, there was a highlighting concern on how to get tested, testing result waiting times, and understanding when they could or could not get tested. Both Quarter reports highlight issues, shifting from where and why to get tested, to waiting times – and more recently this has been moved to understanding one test does not mean that they are COVID free at all times.

### Differences

- **Mental Health feedback:** In Quarter 1 report Healthwatch highlighted mental health as one of the leading topics people were providing feedback on, whether through the mental health provider, or concerns on general mental health for members of the public not known to the mental health services. In Quarter 2 mental health reduced in feedback (July and August) but began to increase again in September. The theme on mental health also turned more positive in the summer months, around access online or communications.
- **Rules and Guidance:** In Quarter 1 the feedback was mainly around confusion in particular with the rules and guidance, and whilst Quarter 2 also highlighted



confusion, particular around months July August and September, it was apparent in September feedback that with the introduction of the COVID Champion group and the Community Leaders groups linked to local authority communications, there is more understanding from the local population on how to adhere to the rules and guidance sent out to the public.



## 6. Impact of gathering feedback: National and Local

Healthwatch are often asked 'what difference does it make' when we gather residents' views on health and care. During the COVID 19 pandemic, it has never been more important for people to share their experiences of the services they are receiving, to help shape how the health and care landscape begins to be redrawn and designed in response to this pandemic.

Every single feedback we receive helps shape a picture of people's views of the care they receive. As a signposting and information organisation, we respond to individuals and help inform them of the options available to them locally, and nationally.

We also record their feedback, anonymously, to help see 'trends' in people's experiences. This means if more than one person mentions a compliment or concern about a service, we create summary reports for that provider, for the provider to be informed that patients are experiencing their service in a particular way.

If these trends increase, we can escalate to informing the commissioner – the person who pays the service to run. We can inform them of how the patients are experiencing the service they pay for – to help influence how this service is provided.

We also inform trend updates to the Health and Wellbeing Board which oversees all health and care delivery in Luton, as well as inform national bodies of our feedback such as the Care Quality Commission (CQC), Healthwatch England (HWE, who provides a picture to the Department of Health and Social Care), and NHS England as well as many other national regulators or commissioners.



### Examples of Impact:

- **Communications locally during the pandemic:** Healthwatch have raised communication concerns locally and nationally. Locally we feed directly into the local Public Health communications team and have helped to support some of the communications out to the public. We raise individual concerns, and these are acted upon, as well as joining the local COVID Champion group, Community Leader group and COVID-19 Flu Cell communications team.
- **Hospital Discharge:** People raised some concerns locally on how people were rapidly discharged from hospital, and the support available to them on discharge. We raised these views both locally with the local Trust individually, as well as joined the Healthwatch England response to send out surveys locally to gather views, which resulted in the national report, 'Hospital Discharge<sup>11</sup>' during the pandemic – which has been highlighted in the media, presented to the House of Lords, as well as feeding into the HWE meetings with the Department of Health and Social Care. The discharge process is being reviewed.
- **PPE Concerns:** Our discussions with local professionals and their concerns are raised locally, with our contacts within the local system, as well as fed back to the national arena, such as Healthwatch England and NHS England. Again, Healthwatch England took these views and discussed with the DHSC and helped to nationally address the procurement and portal access for PPE.
- **Dental Access:** Locally people raised concerns about not being able to access dental care during the pandemic as an NHS patient. This was raised locally at the Health and Wellbeing Board by the Council Leader, but our local feedback was added to the national response from other local Healthwatch. This led to various meetings with NHSEI and Healthwatch England, which resulted in NHSEI writing to all dental practices in England reminding them of their contractual obligations, ensuring patient access is improved.
- **Digitally Excluded:** Locally people told us they were unable to access services due to not being digitally able or have access to digital tools. This was feedback to Healthwatch England and the local Healthwatch network are also looking into this issue. Locally we continue to gather feedback to ensure we have many eclectic views of people in Luton from many communities, to feed into the national report.
- **Testing concerns:** There was a national issue regarding testing throughout the summer, particularly in August and September – and we raised this locally as well as nationally. Again, this fed into a national picture which was presented to DHSC to ensure patients views were raised during this time.

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<sup>11</sup> <https://www.healthwatch.co.uk/reports-library/hospital-discharge-report>

- **Because we all Care:** We took part in the joined up engagement with the CQC on the 'Because we all care' campaign – asking people for their views on health and social care, which will result in a CQC and Healthwatch England national report to shape planning health and care services.

### 7. Q4 projections (from October current feedback)

Our October monthly report will be available in the next few weeks, but we can see from the feedback already we have over 100 feedbacks on nearly 40 health and care services. The current trends show hospital discharge still being a concern for people in Luton, with mental health feedback increasing this month as well as pharmacy feedback (positive) and GP access (which is more positive than prior months).



### Talk to us

If you would like further information from details of this report please contact [info@healthwatchluton.co.uk](mailto:info@healthwatchluton.co.uk)

If you would like to provide your own feedback on how you are doing during this time please email us on [covid19@healthwatchluton.co.uk](mailto:covid19@healthwatchluton.co.uk) or call 01582 817060.

**We need your experiences to help shape the care you receive.**