

Impact of Coronavirus Survey Report

October 2020



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Introduction

Healthwatch Stoke-on-Trent and Healthwatch Staffordshire, the local independent champions for health and social care worked with Together We're Better including Stoke-on-Trent City Council and Staffordshire County Council on a collaborative piece of work to devise an Impact of Coronavirus survey which asked members of the public about their experiences of health and social care services during the coronavirus pandemic.

Following the global coronavirus outbreak in early 2020 there have been significant measures to obstruct and limit the infection of coronavirus, including a national lockdown and many forms of social distancing for a number of months. Consequently, the required measures have had a considerable impact on individual lifestyles through physical health wellbeing, psychosocial health and financial challenges. Furthermore, coronavirus has led to unfamiliar changes to the way health and social care services provide care. Notable evident changes include postponed appointments, tailored digital appointments, stricter hospital and care home protocols and a challenge to pharmacy medication distribution (Kings Fund, 2020).

In light of these ongoing changes to health and social care services, the Impact of Coronavirus Survey was designed to understand the public experience of using health and social care services during the coronavirus pandemic in consideration of the following four themes: (1) experiences coronavirus (2) access to services (3) mental health (4) digital engagement. All public experiences were used to form constructive ideas and recommendations for the development of local health and social care services in Stoke-on-Trent and Staffordshire.

The survey was live from 13 July 2020 to 13 September 2020. Throughout this period the survey was promoted through social media channels, press releases, websites, e-bulletins and disseminated by local partners and organisations. All responses were collected electronically via Snap Survey due to coronavirus measures prohibiting face to face targeted engagement. In acknowledgment of the many national and regional surveys requiring public engagement, this was considered a predominant barrier to achieving further completed surveys.



What we did



Methodology

Participants

Data sources and inclusion criteria consisted of residents in Stoke-on-Trent or Staffordshire who had relevant experience of using health and social care services within the applicable demographic. Feedback items from residents were required to be based on publicly funded health and social care services as opposed to exclusively private services.

Data Collection

A mixed methods research design was formed to collect all survey responses. Within the survey there were both qualitative and quantitative themed questions. From 13 July 2020 to 13 September 2020 social media channels press releases, our websites, e-bulletins and virtual communication were targeted methods used to promote and share the survey to receive a comprehensive return of completed surveys.

Data Analysis

All survey responses were analysed through a hybrid of descriptive analysis and a form of content analysis. This was because of the diversity within question styles and the objective and subjective output. However, the overriding tool implemented to establish the analysis was grounded through Snap Surveys.

Healthwatch Stoke-on-Trent and Healthwatch Staffordshire are a part of Engaging Communities Solutions (ECS). ECS underpins its research activities by applying the Market Research Society Codes of Conduct, which allows it to demonstrate that it is credible, fair and transparent. ECS is a company partner and accredited by the Market Research Society. To further ensure the quality of the final report, an internal peer review process was initiated to ensure that the report is fit for purpose before submission. Where data is not robust it has been statistically suppressed to prevent disclosure.



What does this tell us



Summary of Findings

Demographics

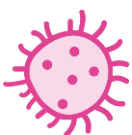
Of the 217 completed surveys the response locations was near a 60:40 split between Stoke-on-Trent and Staffordshire residents. With Stoke-on-Trent responses totalling 41% and Staffordshire totalling 59%. The highest response rate came from the 45 to 64 year old category resulting in 42%, and in conclusion, overall, females returned a leading 72% completion rate.

Experiencing Coronavirus

A significant number (78%) of local residents who completed the Impact of Coronavirus Survey did not have coronavirus. From the 22% who suggested to have a symptom (confirmed or non-confirmed) a common theme was a new or continuous cough. However, it should be noted that 10% of responders proclaimed to have other symptoms but did not declare further details. Therefore, we cannot assume that the symptom of a new or continuous cough is the predominant theme.

Access to Services

There was substantial evidence to suggest that residents of Stoke-on-Trent and Staffordshire did not want to burden health and social care services to seek medical advice or care because of the inundated demands that services were experiencing. As a result, 81% of responders avoided medical advice or care. However, this is not to suggest that residents felt that they could not engage with services because 71% of responders shared that they would feel comfortable in accessing services when or if there was a justifiable need. Therefore, it is clear that avoidance of medical advice or care was simply down to preference rather than



availability. Where residents did choose to access services the most common point of call was a local GP or NHS 111.

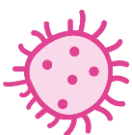
The greater majority of residents (81%) shared the feeling that information on accessing services was clear and concise. It is clear that residents utilised the GOV.UK and NHS websites and television for national sources of coronavirus information. In local geographics social media was widely accepted as a positive provider of coronavirus updates, as Facebook was deemed the fourth most meaningful source for accessing coronavirus information. Noticeably, the vast majority of residents were able to access required information in the correct language and formatting as only 1% of responders suggested that information was not in a suitable language or format. However, further targeted work into local demographics could highlight a contrasting outcome and potentially lower the inclusivity data.

With over 53% of responders having a long term health condition there was substantial feedback to determine their experience. Many responders with a health condition accessed Primary Care Services as a first point of call. Despite this, not all residents had access to the required services for the following themed reasons: cancelled appointments, psychological setbacks and delayed or cancelled services.

In conclusion, there was a growing body of evidence that highlighted positive encounters and a large degree of empathy towards service availability and demand because of clear information and opportunities to schedule appointments. However, it cannot be assumed that all residents had a positive experience as there were a number of negative experiences shared because of a lack of support for long term health conditions and a delay in treatments or appointments.

Impact on Mental Health

Over half of responders suggested that their mental health and wellbeing has been affected by coronavirus. This was largely down to uncertainty within the future, isolation which had



consequential feelings of depression and loneliness and a surge in anxiety because of a change in routine. An inarguable statistic of 79% demonstrated that residents did not receive satisfactory mental health care or support. As a result, it is clear that many responders opted for support from family, friends or even applying self-help techniques. Although, there was a degree of acknowledgment for GP access to acquire mental health support. Considering this, on the whole it is evident that residents did not deem the support provided by mental health service as a positive experience.

Digital Experiences

It is widely accepted that throughout the coronavirus pandemic most health and social care appointments have been undertaken remotely. In agreement with this, our survey tells us that a large number of appointments have also been completed remotely. Furthermore, it is clear that a significant number of responders were willing to engage in virtual appointments and consider this contemporary method of care, with 73% of responders engaging in a form of remote appointment. In light of this, over half of responders had a positive experience of remote appointments. Although, insight into the negative experiences demonstrates that there is a stigma around the meaningfulness of remote appointments. With some residents in agreement that face to face value cannot be replace nor can a diagnosis be accurately determined over a virtual platform. In summary, while there has been great developments and positive working alliance with some patients, it could be argued there is room for development in the remote learning department. It could also be useful to develop and build stronger beliefs on why remote appointments can be so effective and pivotal for the future of health and social care advancements.



Recommendations

To promote a systemwide communications plan continuously. A TWB strategy to demonstrate that it is 'business as usual' and if you need health and social care support please access the same.

Implement targeted communication with long term condition patients to ensure that there is a pathway of support for treatment and care that does not negatively affect their prognosis.

Implement targeted communication with patients who are waiting to be seen to continue to receive timely updates and justification when there are postponements in upcoming appointments.

Local mental health services to review whether patients are receiving the right care in a timely manner.

Local mental health services to improve their patient communications to support accessibility and meet patient need; to identify any barriers and put processes in place to address the issues highlighted.

Where there is possibility to offer a range of appointment types (remote or face to face), ensure that there is a thorough discussion with all patients to confirm that patients are satisfied with the outcome and empathise with the decision.



What we found

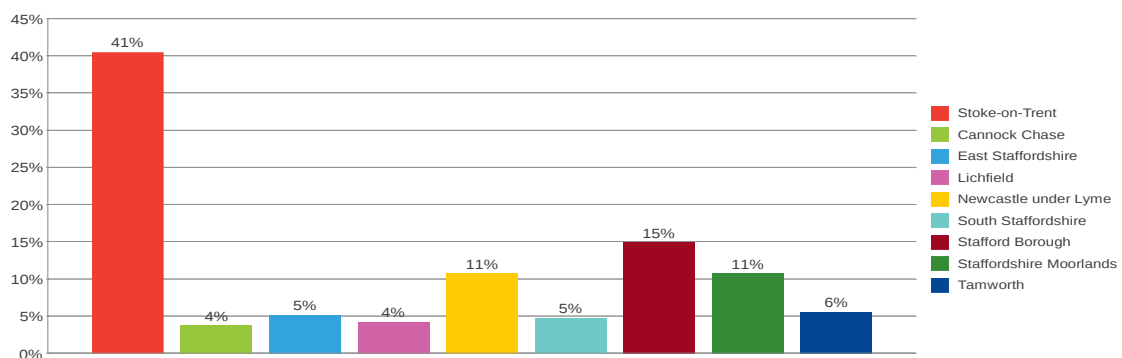


Demographics

Total Responses

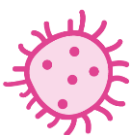
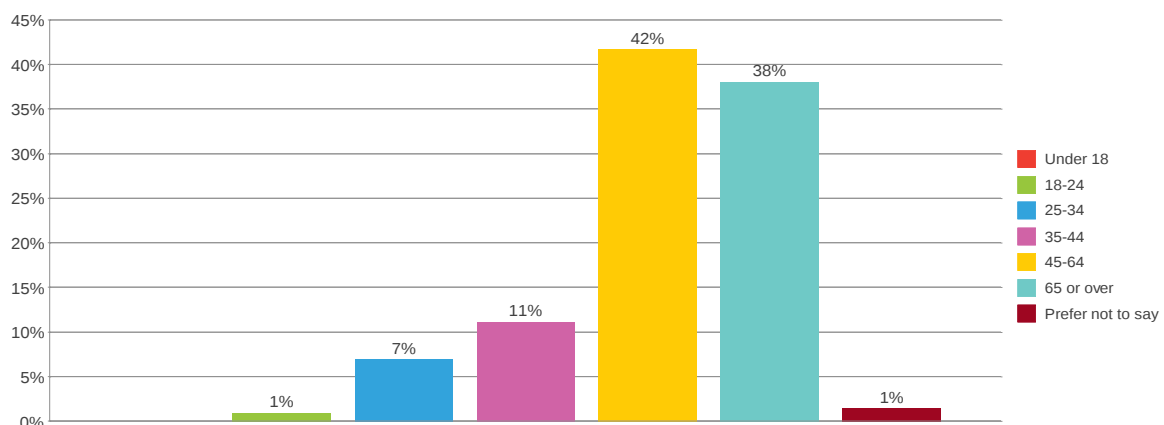
A total of **217 surveys** were completed from 13 July 2020 to 13 September 2020. Of the 217 responses, 41% were from the city of Stoke-on-Trent and 59% were from the Staffordshire districts.

Where do you live?



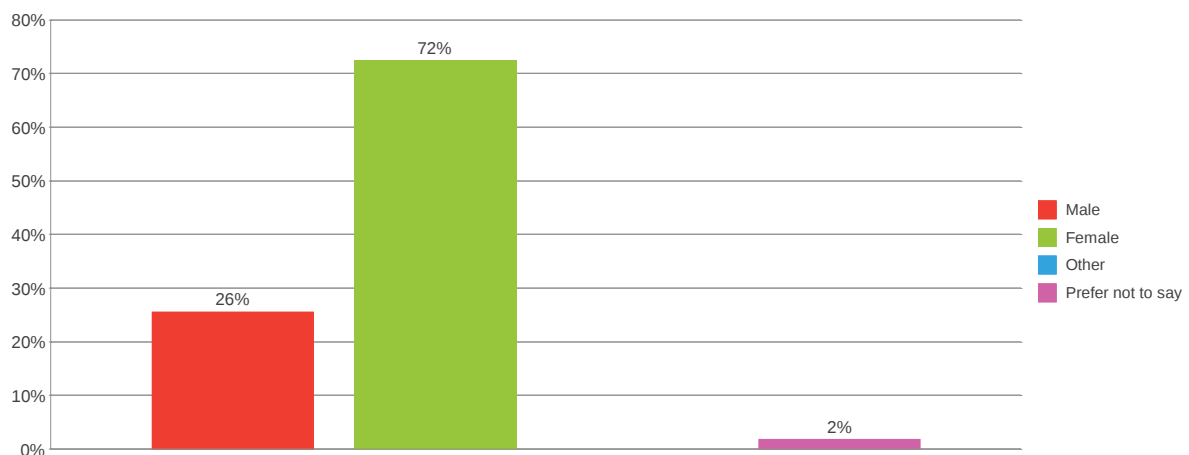
The highest response rate came from the 45 to 64 year old category resulting in **42%**. Whilst the lowest response rate came from the 18 to 24 year old category closing with only **1%**.

What age group are you in?



When exploring **gender identify** there was a clear engagement difference between male and female responders, as the female category outweighed the male category by 46%. 72% identified as female, 26% identified as male and 2% preferred not to say.

What is your gender?



Furthermore, White British was the most frequent **ethnicity** which concluded with 96%. Followed by White Irish and those who preferred not to say totalling the remaining 4%. In regards to **religion** 60% of responders identified with Christianity, 27% deemed to have no religion and the remaining 12% preferred not to say. Insight into the question '**do you consider yourself to have a disability or long term condition**' demonstrated 55% of responders did, 44% did not and 1% preferred not to say.



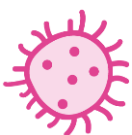
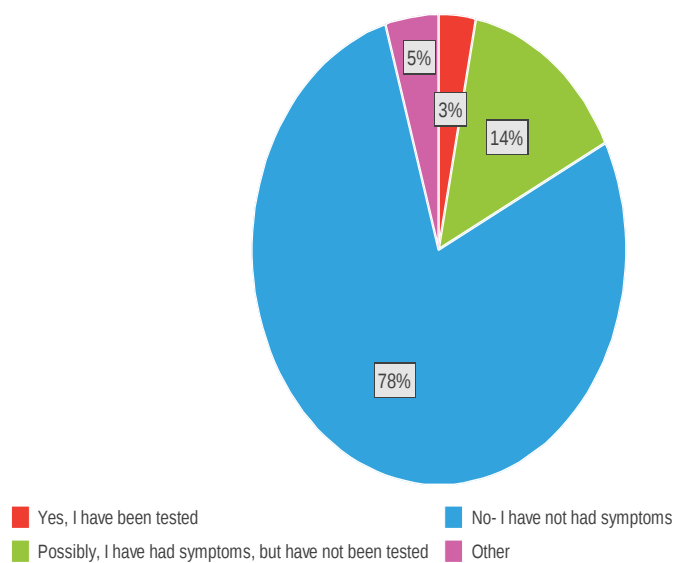
Results in Themes

1.1 Experiencing Coronavirus

There has been a growing number of coronavirus cases in Stoke-on-Trent and Staffordshire with a rise of over 7500 confirmed positive cases as of 3 October 2020. (The Department of Health and Social Care, 2020). Considering this, the experiencing coronavirus section aimed to understand resident experiences and beliefs around experiencing coronavirus symptoms and confirmed or potential cases.

The Impact of Coronavirus Survey identified that **78%** of responders confirmed that they have not had symptoms of coronavirus. In contrast, **3%** of responders had coronavirus with testing and **14%** appeared to experience some symptoms but cannot be confirmed due to not being tested.

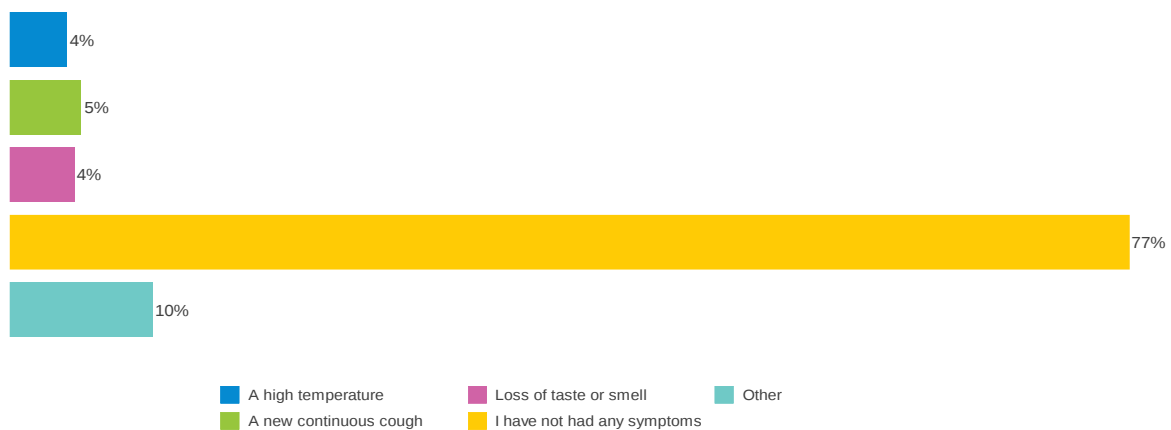
Have you had Coronavirus?



Since the initiation of lockdown in March 2020 **77%** of responders believed they have not experienced coronavirus symptoms. However, of the **23%** that did discover symptoms:

- **5%** had a new continuous cough
- **4%** had a loss of taste or smell
- **4%** had a high temperature
- **10%** expressed that they had other symptoms to the listed options

Have you had any of the following symptoms since lockdown?



It is now widely recognised that the main symptoms of coronavirus are:

- A high temperature – this means you feel hot to touch on your chest or back (you do not need to measure your temperature).
- A new, continuous cough – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual).
- A loss or change to your sense of smell or taste – this means you've noticed you cannot smell or taste anything, or things smell or taste different to normal.

“Most people with coronavirus have at least one of these symptoms.” (NHS, 2020)

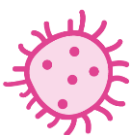
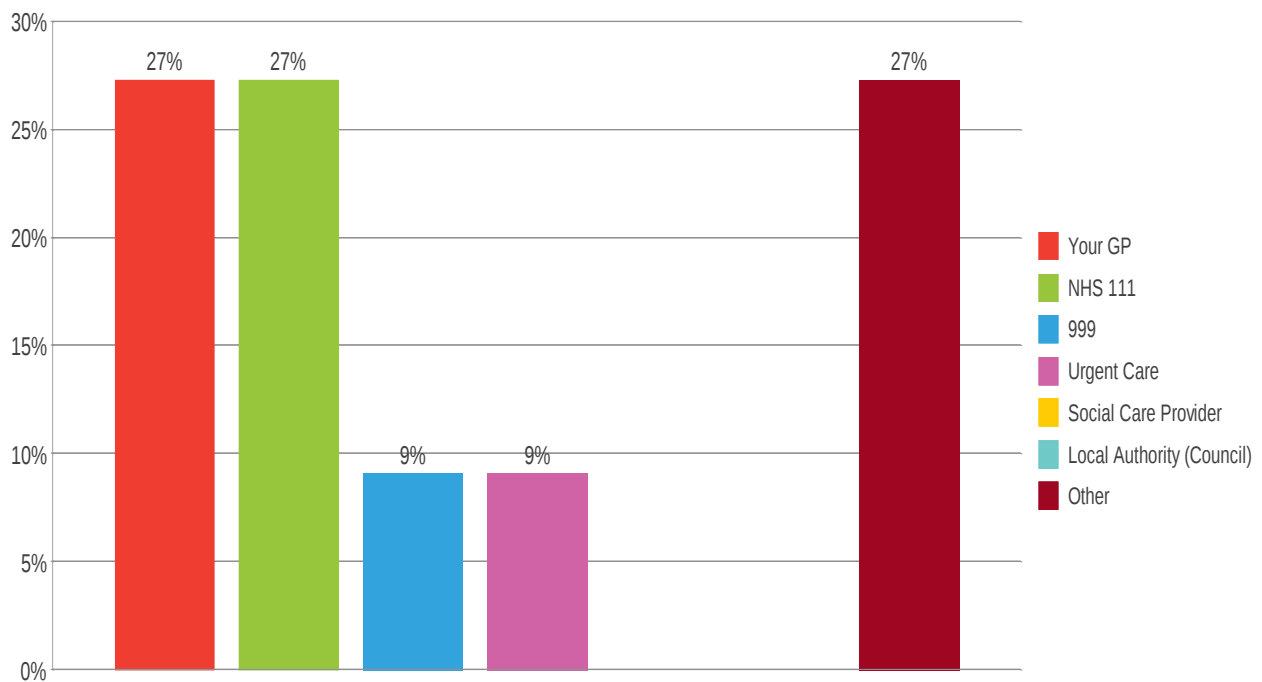


1.2 Access to Services

It can be a challenge to understand what service is most suitable when interpreting and connecting symptoms with an illness or disease. With multiple services on hand to provide treatment and care it is important that the correct service is accessible and offers suitable support. Therefore, the access to services section was designed to understand the public experience when interacting with local service providers. But also, to determine what particular services were contacted and considered a necessary next step.

In response to the question: 'If you think that you may have had coronavirus, did you seek medical advice or care whilst you had symptoms?' **27%** engaged with a GP, **27%** used NHS 111, **9%** dialled 999, **9%** contacted urgent care and **27%** opted for other care.

If yes, which service was it?



“Please provide more feedback on your experiences of accessing NHS or social care services related to coronavirus.”

NHS Feedback

Theme: Uncertain Communication

“Very confusing. My dad was very upset having been told by a nurse at one clinic that he had an appointment at the surgery. He turned up only to be treated rudely by reception staff. He was told to ring them and got cut off twice before being told that there was a prescription for him. He hadn't been told he had an infection. Then he was told the doctor was ringing him the following day, but he hadn't been told this earlier. No joined up thinking, distressing and unhelpful.”

“NHS 111 was very busy indeed - it was towards the end of March, so I understood why. My mental health care coordinator went off sick at this time and it was difficult to get through to the helplines when I felt I needed help. I often gave up and self-harmed.”

“Multiple appointments with local County Hospital rescheduled during lockdown, then switched to phone consultation, and then cancelled by the hospital with no indication when they will take place.”

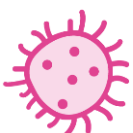
Social Care Feedback

Theme: Temporary Ceased Social Care Services

“My experience was that they didn't want me to do so (use services). It felt very scary to be dealing with it alone. Like no one cared unless you needed hospital treatment.”

“Care was pulled out at the start of lockdown. If it wasn't for my family members, I would be dead. No one from adult social care or the doctors has bothered to get in touch to see if I am ok.”

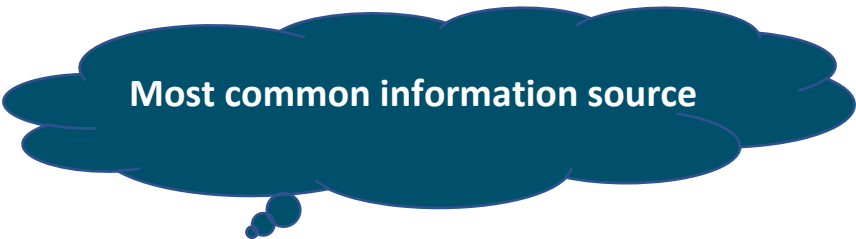
“My son's care package was terminated as he was considered no longer eligible.”



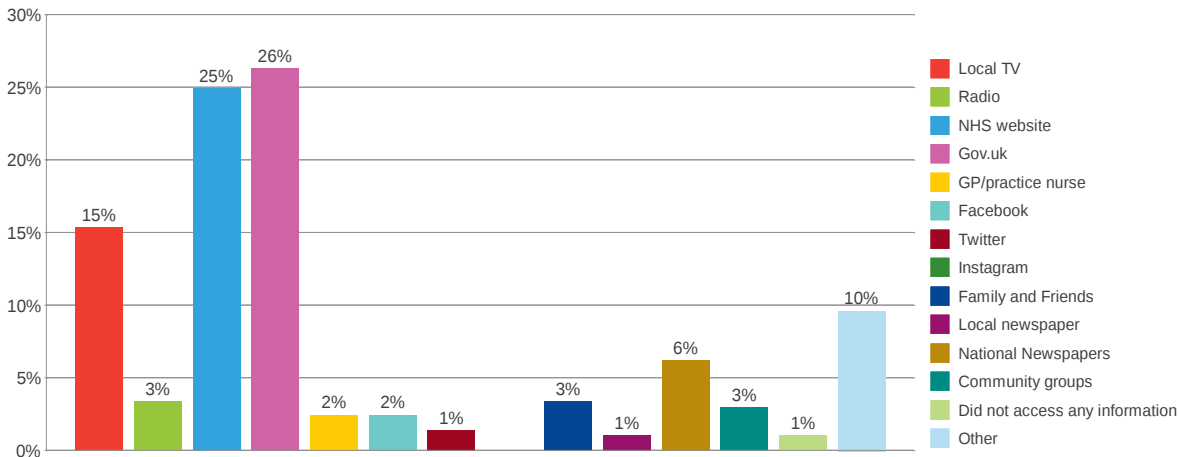
Residents were asked if they found it easy to find clear and understandable information about what to do to keep yourself and others safe during the coronavirus pandemic. With the following outcome:

170 responders deemed information to be clear and understandable.

41 responders suggested it was a challenge to find clear and understandable information.



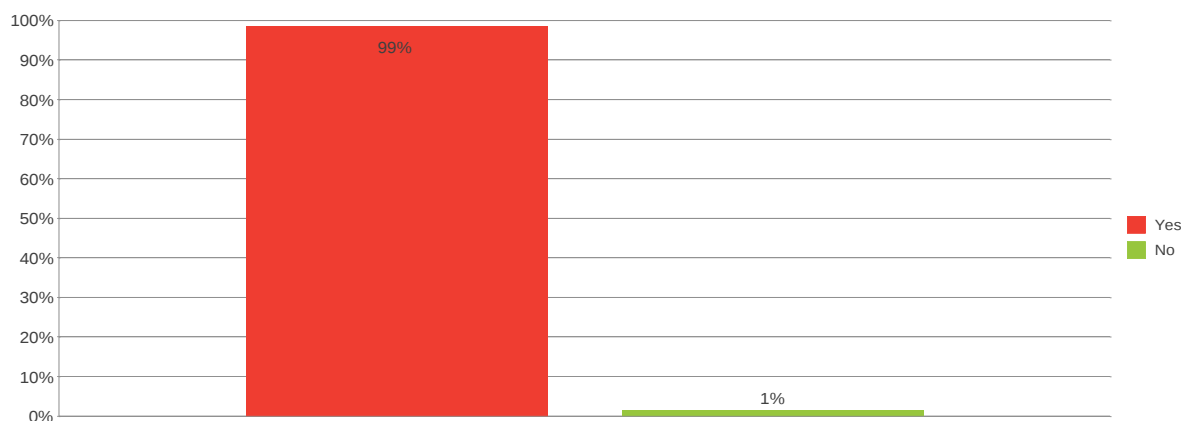
Where did you access information on coronavirus?



Accessible information not only means being able to identify or circulate information online. There are a range of other factors to consider when publishing information for public viewing. Information should be offered in alternate languages, suitable for communication barriers, presentation and layout should be in appropriate sizes and fonts and language should offer simplistic and non-jargon reading. Therefore, the survey attempted to capture and understand the public experience of obtaining each of the inclusivity fields. However, demographics of respondents should be considered when looking at the following figures.

99% of responders were able to access required information in a suitable language, whereas **1%** of responders unfortunately appeared to face a barrier in a language when attempting to access information.

Was the information in the languages/alternative format that you needed?



With many health and social care services being transformed digitally during the coronavirus pandemic and residents urged to only access these services where necessary, there was a sense of public uncertainty with many questions around *what, where and when* to access services not related to coronavirus. However, as a national response to delaying treatment and care, the NHS and other governing bodies reinforced the message of getting help when you need it with the #HelpUsHelpYou campaign. **In response to this matter our survey told us the following:**

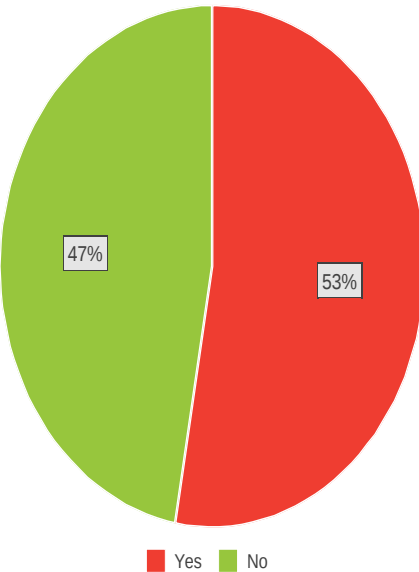
Those who may have needed to access services for non-coronavirus reasons shared a split attitude. As such, **71%** of responders did feel comfortable in accessing non-coronavirus services but the remaining **29%** shared a sense of discomfort in using additional services during the pandemic.

Feelings of discomfort in using services during the pandemic



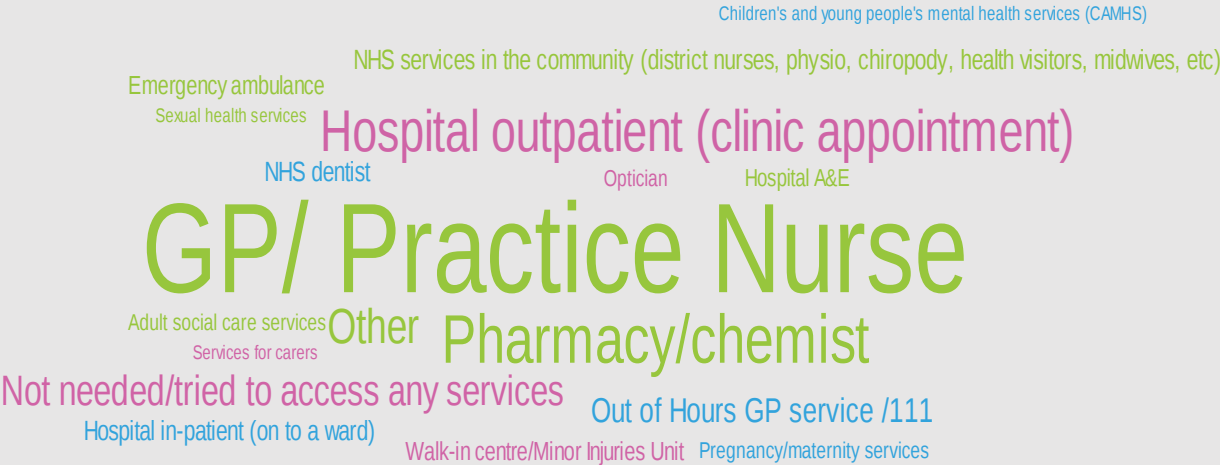
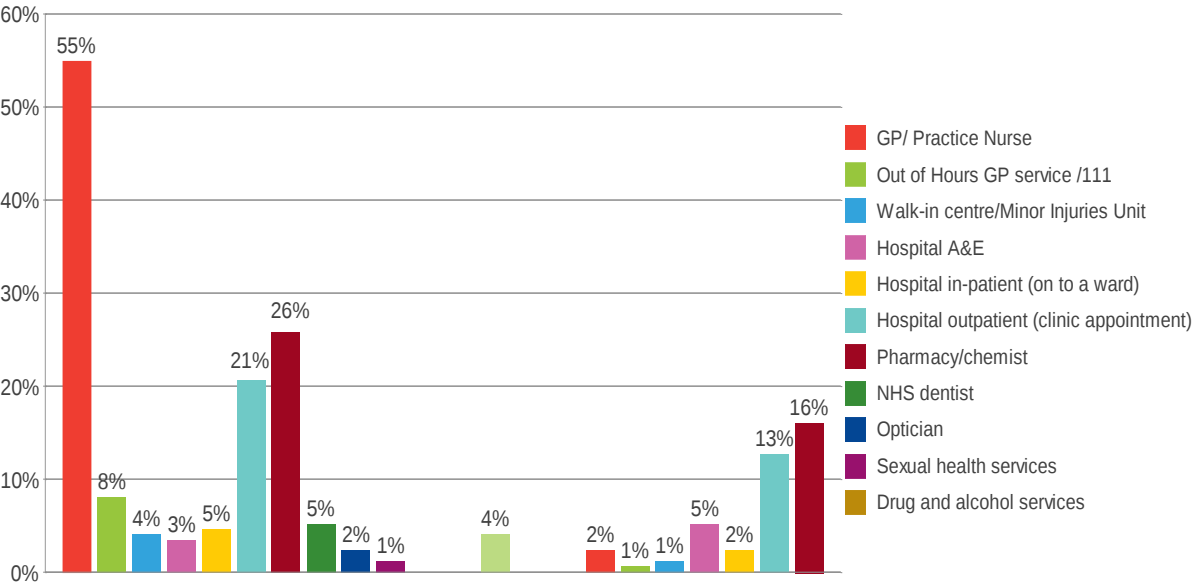
Furthermore, we were keen to understand if residents were able to access specific services who had additional health and social care needs with a long term health condition. Of the 217 responders **53%** declared a long term health condition in contrast to the **47%** who did not have any long term health condition.

Do you have any long term health conditions such as COPD, heart disease or diabetes?



Services accessed in support of a long term health condition

What service did you access for your condition?



However, some residents were unable to access the required services for a long term health condition. For the following reasons:

Theme: Limited Engagement

"Awaiting test results - further tests done but communication by the hospital has been very poor (Burton) despite chasing several times via different routes."

"I have not been able to access my GP for support with my condition since pandemic started."

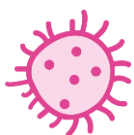
"CAMHS signed off my son as he wouldn't engage via phone (due to his anxiety.)"

Theme: Long Term Waiting Lists

"I eventually access to support my condition after many attempts but still no hospitals appointment. I was told no appointments for 12 months."

"All of the services I desperately needed were postponed or temporarily cancelled."

"My appointment with my consultant has been postponed for 5-months."



**Have
your
say**



1.3 Impact on Mental Health

The coronavirus pandemic has become a global crisis and brought with it an escalating scale of psychological anxieties. Whether this be because of personal circumstance, concern for family, limited financial income or a general sense of uncertainty. Consequently, each of these variables has brought a larger scale of stress, anxiety or depression to many individuals' lives (King's College London, 2020). **On a local scale we were keen to investigate and identify how residents of Stoke-on-Trent and Staffordshire coped with these social and emotional challenges.**



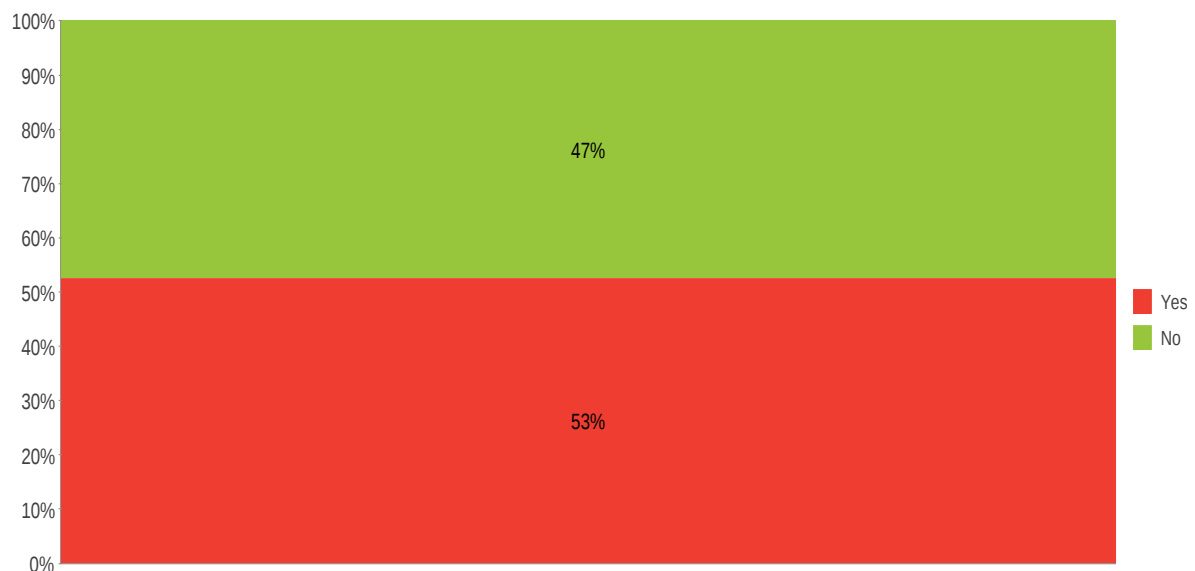
“In public mental health terms, the main psychological impact to date is elevated rates of stress or anxiety. But as new measures and impacts are introduced – especially quarantine and its effects on many people's usual activities, routines or livelihoods – levels of loneliness, depression, harmful alcohol and drug use, and self-harm or suicidal behaviour are also expected to rise” (World Health Organisation, 2020).



53% believed their mental health and wellbeing has been affected.

47% believed their mental health and wellbeing has not been affected.

Has your mental health and wellbeing been affected by the coronavirus pandemic?



With the following statements
resulting in negative mental health
experiences

Theme: Restricted Access To Treatment And Care

"My OCD has become significantly more detrimental to my quality of life. I'm the middle of trying medications out for OCD and I have come off my old medication but not put on a new one because of lockdown. Haven't been reviewed by consultants of physical health conditions despite symptoms worsening."

"General low mood linked to increase in physical pain as all elective surgery has been cancelled - no idea when this will happen again."

"My condition was exacerbated due to fears over catching coronavirus and isolation caused by closure of services."

"Depression, anxiety, low mood - no services accessed."

In light of the 53% of responders that stated that their mental health and wellbeing has been impacted during the coronavirus pandemic, **110 residents** declared that they did not receive appropriate care from mental health services. With **29 residents** acquiring the support required from mental health services.

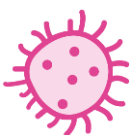
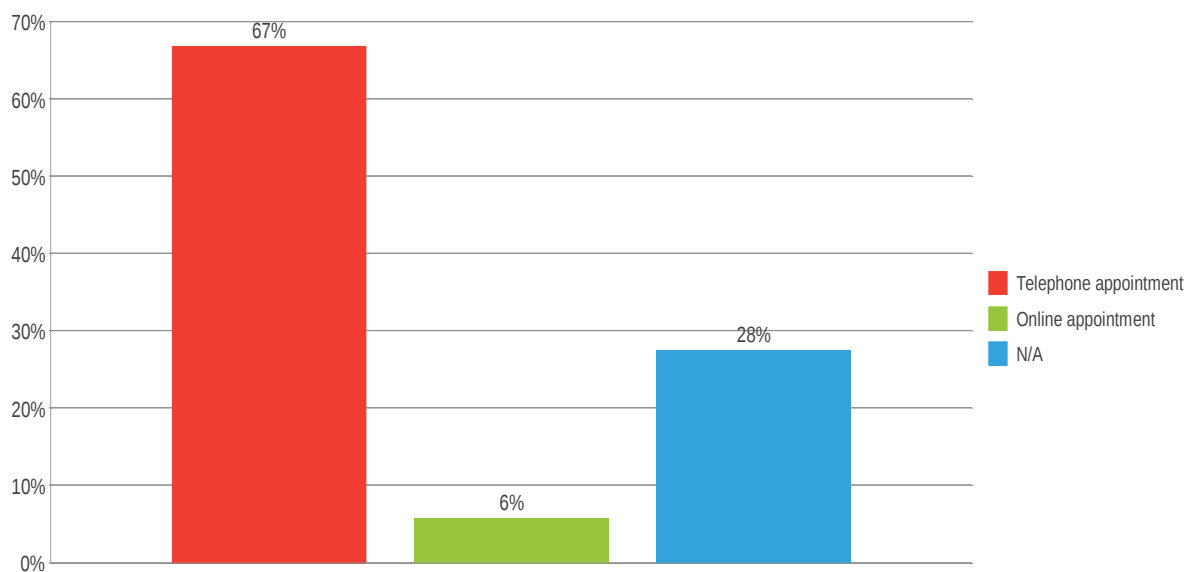


1.4 Digital Experiences

Since the start of the coronavirus pandemic there has been a significant upsurge in the number of hospital and GP consultations being offered via telephone, video calls and email. According to NHS England (2020) prior to coronavirus approximately 95% of GP appointments were completed face-to-face. However, during coronavirus approximately 85% of appointments and consultations have been carried out virtually. Despite services continuing to offer appointments remotely, it is not clear if this is suitable for the residents of Stoke-on-Trent and Staffordshire. Therefore, we aimed to identify virtual experiences offered to local residents over the previous months.

- ❖ **67%** engaged in a telephone appointment
- ❖ **6%** engaged in an online appointment
- ❖ **28%** did not engage in any form of telephone or online appointment

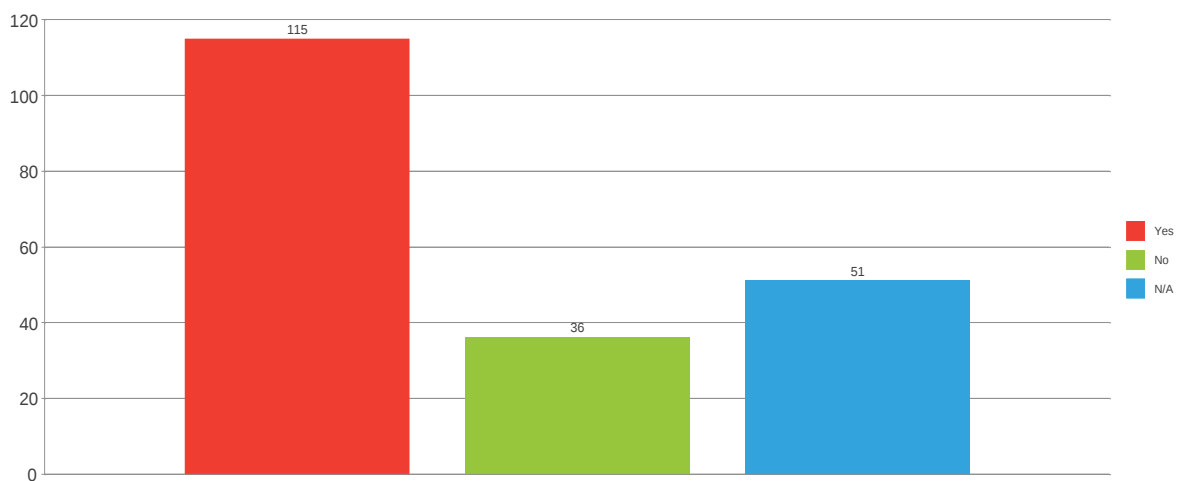
During the pandemic have you had a remote appointment with a health and/or care professional?



In focus of the 73% of responders that had engaged with a form of virtual appointment a vast majority found their appointment helpful. For example, 115 residents associated with a positive experience in comparison to the 36 responders who associated with a negative experience.

- ❖ **115 residents** found their digital appointment helpful
- ❖ **36 residents** did not find their digital appointment helpful

Did you find the remote service helpful?



“What service(s) would you like to continue after the pandemic?”

“I think there is a scope for some video conference calls to be available for consultations which do not require physical examination.”

“I think sometimes online appointments can be more efficient and effective.”

“Talk to GP and nurse without having to go into the surgery.”



“What improvements, if any, could have been made to meet your health and social care health during the pandemic?”

Health Care Improvements

“Access to antibody testing as I have routine blood monitoring. My monitoring was changed from 8 to 12 weeks and my GP was not helpful about giving more methotrexate to cover those 4 extra weeks.”

“A telephone call to discuss reasoning before postponing a desperately needed appointment would have made me feel like I do matter.”

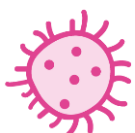
“Better communication between hospitals and doctors, nurses and other agencies.”

Social Care Improvements

“Phone calls to check on those who have had care reduced or stopped to check they are ok.”

“More personalised assessment as opposed to one size fits all.”

“More support and sympathy from care givers for my son.”



“Would you like to tell us anything else about your health and social care experience during the pandemic?”

A Selection Of Comments To Conclude

“Disappointed at the lack of information from hospitals about when or if they will be doing elective surgery such as hip replacements. I have serious hip OA and my hip replacement was due in April. Symptoms are worsening all the time and my quality of life is being badly affected.”

“Hospital at home nurses are incredible. Had proper equipment and gave a diagnosis and aftercare - they were very nice.”

“The care that my father received and still receives from the district nurses has been excellent.”

“Shielding status needs to include people with diabetes as there wasn’t enough support to help us.”

“Only to say well done to the NHS hospitals and local surgeries.”



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Appendix 1

Section 1: All to Answer

- Q1) I understand how my information will be used by Healthwatch Stoke-on-Trent and Healthwatch Staffordshire and consent to taking part in this survey.
- Q2) Where do you live?
- Q3) What is the first part of your postcode?
- Q4) Are you the person receiving care or are you the carer/family member/friend?
- Q5) Have you had coronavirus?
- Q6) Have you had any of the following symptoms since lockdown?
- Q7) If you think that you may have had coronavirus, did you seek medical advice or care whilst you had symptoms?
- Q8) If yes, which of the following services was it?
- Q9) Please provide more feedback on your experiences of accessing NHS or social care related to coronavirus.
- Q10) Have you found it easy to find clear and understandable information about what to do to keep yourself and others safe during the coronavirus pandemic?
- Q11) Where did you access this information?
- Q12) Was the information in the languages/alternative format that you needed?
- Q13) If no, what language/alternative format would it have useful to have?
- Q14) I would feel comfortable accessing health care services for something not related to coronavirus?
- Q15) If no, why not?
- Q16) I would feel comfortable accessing social care services for something not related to coronavirus?
- Q17) If no, why not?



Section 2: Please answer if you have pre-existing conditions/long term health conditions

Q18) Do you have any long term health conditions such as COPD, Heart Disease, Diabetes?

Q19) If yes, please state what condition (s) you have.

Q20) Were you able to access the services that you needed for your condition? Please tick below the services that you accessed.

Q21) If no, what was the main reason for this?

Section 3: All to answer – Mental Health

Q22) Has your mental health and wellbeing been affected by the coronavirus pandemic?

Q23) If yes, please tell us more about this.

Q24) Did you receive the care you needed from mental health services?

Q25) If no, where did you access support?

Section 4: Digital – All to Answer

Q26) What improvements, if any, could have been made in the way that your health and social care needs have been met during the pandemic?

Q27) During the pandemic have you had a remote appointment with a health and/or care professional?

Q28) Did you find the remote service helpful?

Q29) If no, why not?

Q30) If yes, what service would you like to continue after the pandemic?

Q31) Would you like to tell us anything else about your health and care experience during the pandemic?

Q32) What age group are you in?

Q33) Which ethnicity do you identify as?

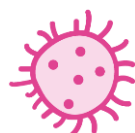
Q34) What is your religion or belief?

Q35) What is your gender?

Q36) Is your gender the same as your gender at birth?

Q37) Do you consider yourself to have a disability or long term condition?

Q38) What is your marital status?

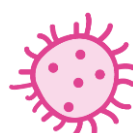


Appendix 2

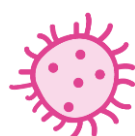
Raw Qualitative Data

Have you had any of the following symptoms since lockdown?
A high temperature
I have not had any symptoms
Other
A new continuous cough
Loss of taste or smell

Please provide more feedback on your experiences of accessing NHS or social care services related to coronavirus.
Admitted to hospital. 8 days treated with anti-biotics and oxygen. Walsall Manor Hospital very good. But discharge did not set up domiciliary care due to it being Easter
good - Dr appointment and advice which led to testing
There are none
N/A
I was admitted to Royal Stoke with pneumonia on Feb28. The 1st Covid patient was also admitted while I was there. I have never been that ill before.
Multiple appointments with local County hospital rescheduled during lockdown, then switched to phone consultation, and then cancelled by the hospital with no indication when they will take place.
I receive weekly Covid19 bulletins which I share with my vulnerable friends and neighbours
Very confusing. My dad was very upset today having been told by a nurse at one clinic that he had an appointment at the surgery. He turned up only to be treated rudely by Reception staff. He was told to ring them got cut off twice before being told that there was a prescription for him. He hadn't been told he had an infection. Then he was told the Dr was ringing him tomorrow, but he hadn't been told this earlier. No joined up thinking, distressing and unhelpful.
GP sent me to hospital where I was admitted for a few days and have been recovering at home even since
GP service was easy to access via phone - however, I suspected tonsillitis for my daughter but was unable to get her reviewed- was presumed it was COVID
N/A
The care that my father received was excellent during his stay in hospital
regular doctor appointments different but felt safe when attending
Did not seek advice because I thought nothing could be done unless my condition became serious
confusing messages 'YES NO' Isolating not sure where /what to do. Am I safe?
prescribed antibiotics for an ear infection over phone without actually seeing the ear
I have accessed GP via phone appointment. My husband is awaiting an operation for a life threatening condition which has been delayed since the start of lockdown

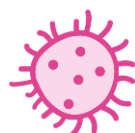


NHS 111 was very busy indeed - it was towards the end of March, so I understood why. My mental health care coordinator went off sick at this time and it was difficult to get through to the helplines when I felt I needed help. I often gave up and self-harmed.
I have had severe asthma attacks during lockdown but have not been able to see my asthma nurse or GP for an examination so have had to cope with telephone calls and prescriptions of steroids, the ear, nose and throat consultant is only able to see me in Sept, my breathing got so bad this week I had to call paramedics who treated me with a nebuliser - something my asthma nurse would do.
Ordered a test, came, did it (negative,) sent it back promptly
My wife was sent a random sample test
I had telephone consultations
N/A
COPD patient received Antibiotics and Steroids continuously over the months of March to June. GP practice continued to prescribe antibiotics and steroids and refused appointment or to provide home visit instead 999 and admission to AMRA at Royal Stoke was needed
I have had no contact at all with either service
Was booked in to have a vasectomy but this has been cancelled.
Initially, not enough was known, so I was hospitalised late in my illness, as 111 said that because I had no fever, I didn't have it - luckily, I did isolate. . Care excellent on day of admission
easy
My experience was - they didn't want me to do so. It felt very scary to be dealing with it alone. Like no one cared unless you needed hospital treatment.
NHS useless left on trolley 14 hrs doctors lockdown council useless was very ill relied on my carer
Social care learning disability team rang on a weekly basis to check our son was ok and we were coping
This is absolutely nothing to do with Q4, but the line of questioning has diverted to something else.
I had to see my GPN for another reason and they didn't tell me not to come into the surgery and that it would be over the phone. I went to the surgery - i felt very embarrassed.
i saw my GP using a video link option, the result of was an urgent referral to plastics which resulted in an urgent biopsy. Whole episode of care was a total of 7 days. thankfully, the biopsy was benign
Over the phone GP consultation and over the phone 111 consultation with a doctor both fab and a ambulance was sent to assess me
I only had phone calls & took a stool sample to new Cross hospital which was negative for food poisoning....but not tested for Covid-19.
hatred towards disabled people
Accessed care via ENT for my son, including overnight hospital stay. Not coronavirus related.
Have not had covid19 tested negative for antibodies
I as sons carer had to chase up support from Greenfield Centre only to find his care coordinator had left 2 months prior just on lockdown. No one contacted me or my son to ask if he was okay or needed support. They expect me as his carer to get in touch which I feel is wrong - it's his care and too much falls on carers
Was told to self-isolate for 7 days, then if still feeling unwell, to isolate for a further 7 days
Following a simple fall at the weekend, I was directed by the RSUH A and E to Haywood Hospital MIU, as it was 'not a serious' injury'. After waiting for more than 4 hours at Haywood, I was told I? had to go back to RSUH A and E as 'they don't treat more complex dislocations. After a further wait of 4.5 hour wait at A & E, my hand dislocation was reset.
Appointments rescheduled...Phone consultation instead of face to face
was diagnosed with Covid 19 and went left on a trolley at royal stoke for 14 and a half hours.
Long delay on telephone when trying to arrange blood test appointment but once arranged, no problem.
Not been able to find out if had virus
none
Following major surgery in 2016 I was left type 1 diabetic with a weakened immune system. I also suffer from mental health issues including anxiety, depression & chronic pain. Stoke City Council contacted me at the beginning of lockdown and provided me with help in getting my weekly prescriptions delivered.



I have not needed to access my local GP during the pandemic. However, I have had a blood test at my local practice, and everything was Covid safe.
No longer able to have blood tests done at Penkridge Medical Practice for hospital appointments, have to travel to County Hospital now just for a quick blood test. Expensive in terms of cost, resultant pollution from car exhaust and danger of catching the virus from a much larger environment.
Very hard to get any answers. GP seem to be refusing to see patients. Had to visit Bradwell hospital clinic for my 2 year old. She had to wait in the car 3 hours whilst Dr decided what to do. Eventually got hospital at home to and cannot recommend them enough
GP Appointments
WE were advised to use website by answerphone message at GP's, the message was don't come here (for anything although if you hung on, they would treat you for other issues)
Care was pulled out at the start of lockdown if it wasn't for family members i would be dead. No one from adult social care or the doctors has bothered to get in touch to see if i am ok
My son's care package was terminated as he was considered no longer eligible
The local GP Service was confused with its own processes, we completed an online symptom diagnostics tool which advised we would receive a telephone consultation. However, after 3 days of waiting we rang the GP surgery only to be advised they weren't even aware there was an online form
VERY LIMITED...LAST RESORT OPTIONS SEEMINGLY
Poor. Only online google advice
Home test
I'm "high-risk" due to aneurysm of Aorta, damaged heart valve plus obstructive airways disease
Routine blood tests difficult
Good and prompt
111 and Covid test centres easy to use

I would feel comfortable accessing social care services for something not related to Coronavirus - If no, why not?
Shielding
Same as above
A relative works as a social carer and the PPE is limited
risk of infection
From what I understand social care has not had the government guidance required to help prevent the virus
Feel they had enough to do
Because I don't feel safe. I am immunosuppressed.
Social care service experience in this area has been dire, so avoid regardless of Covid-19
Contract boundaries between agencies: might take ages to source help
Not enough staff to deal with things properly
Everything seems to be vivid related at the moment
scared
Worry of catching Coronavirus
Worried about transmission in the social care sector
Answered in error. I currently do not need to access social care services
I do not trust the cleanliness
Not applicable
Unable to access services telephone lines busy
Too risky
As above
Too scared of getting Covid-19



hatred towards disabled people
Don't understand the relevance of the question
Feel like I would not be listened too
have had no support coming out of hospital
Worrying that everything seems to be dismissed
As previous statement
Still apprehensive about exposing myself to potential risk of catching Coronavirus through accessing services.
again I think they are under pressure. My mother died during this in a care home (not Covid) & we didn't visit as she would not have been aware & there could be a risk to others
Too difficult to get in touch with and still waiting after two years for rails outside the house so why would i bother
Unsure of stability and safety yet
I would have no confidence that any service might be available. I shall retain my independence for as long as possible.
Not eligible
Would feel unhappy and was bothering people
as above
My son's care package was terminated as he was considered ineligible
Service is pushed to its limits and many of these staff are often off sick too.

Were you able to access the services that you needed for your condition? Please tick below the services that you accessed. If no, what was the main reason for this?

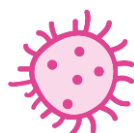
CAMHS signed off my son as he wouldn't engage via phone (due to his anxiety)
No face to face appointment could be made with the nurse
Able to manage my diabetes and obtain all my prescriptions
Service was fine
All other services cancelled
Regular services and appointments cancelled by the local hospital and GP practice.
confusing messages from various GPs
All appointments cancelled
Not available
don't need help
Clinicians moved to Covid
Acute episode of ill health for a family member who is chronically sick and disabled
Cannot make contact with GP surgery due to no-one answering the telephone
Have not received out-patient appointment for eye condition which is now overdue
B12 injections
try not to upset their good will.
severe asthma attack
It cancelled, physio cancelled, hospital appointments not given.
awaiting test results, further tests done but communication by hospital has been very poor (Burton) despite chasing several times via different routes.
I have not been able to access my GP for support with my condition since pandemic started.
Waited weeks for a CT scan, far too long with a cancer diagnosis on having stomach issues GP advised to go to hospital instead of a face to face appointment with them. GPs fob patients off to A&E or walk in departments.
Dental care was simply unavailable and didn't know how to get help.



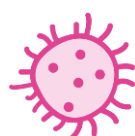
didn't
Told no help available
High risk of contracting coronavirus from health and social care staff
Only had 3 consultants phone me. I will not see any humans as too scared of catching Covid-19
too scared
Not tried to access dentistry although I need to. Not comfortable with accessing services unless emergency
Again, our GP practice was far from helpful
Scared to go near any health people
Chiropody and physiotherapy appointments were cancelled
No clinical check on my condition.
Dental treatment delayed since June 2020
Consultant appointment postponed for 5months.
Had to have a telephone appointment with a Doctor that I did not know. They were as good as they could be in the circumstances, but I don't understand why I could not speak to my GP.
Audiology clinic closed
Couldn't find open dentist
Unable to access services provided by Link Worker as unavailable.
Not ill
All appointments were cancelled by the providers. I have now received part of a routine 6monthly dental check (since when I have lost a filling), but I am aware that I need an eye test and I would like to continue the highly valued preventative care that my GP used to offer.
I was due an outpatient appointment with the consultant at UHNM around march time and received no communication in relation to this. I also can't see a go they will only speak over the phone which when you need them to see something is not very useful. Was also due to have steroid injections in my arms that couldn't go ahead.
see above
all the services I desperately needed were postponed / temporarily cancelled
Eventual access after many attempts but still no hospitals appt was told no appts for 12 months
GP would not see me or my baby.
Hospital appointment due March/April never came through and still not heard anything and GP won't see people just gives poor over the phone service
flu-type symptoms
Ongoing treatment/investigation into continuous water infections
Routine rheumatology monitor
GP surgery not available, closed for most of lockdown, advising patients to call 111

What improvements, if any, could have been made in the way that your health and social care needs have been met during the pandemic?

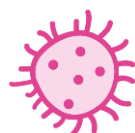
Discharge from hospital should have put six week care package in place. GP support inadequate
Consideration for other health conditions that need care in a timely fashion. Open community hospitals for no coronavirus health needs
Quicker information via letter
Not using all resources on pandemic. There were specialties that have stood idle when there was no need.
All was satisfactory at local surgery on the whole. But phone calls to hosp. Secretary not replied to. Letter over a month to get a reply.
With a long term condition, I feel the need for my regular face to face appointments. A phone call is not enough



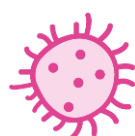
I have not felt disadvantaged during the pandemic
None because I was allowed to cope with the situation
My needs were met very well, and I cannot think this could be improved.
none
information from surgery to inform and reassure patients on access to primary and secondary services
Clear instructions of how to contact during lockdown
none
Provided me with food and a volunteer for prescription collection
The virus cautions for me are common sense. Follow the guideline given by the Health Professionals.
Take no Risks. Wear a mask and gloves when going out etc
Telephone reassurance from Stoke MS department would have helped.
Access to antibody testing as I have routine blood monitoring. My monitoring was changed from 8 to 12 weeks and my GP was not helpful about giving more methotrexate to cover those 4 extra weeks.
Can't think of any. They have done well. Let's not carp
Better information from the GP practice about accessing health care.
more access to hospital consultant
More encouragement to ring GP surgery instead of referring people online
Clear impartial advice from a Government that doesn't contradict itself and ignore scientific advice.
Don't know
Better communication between hospitals and doctors, nurses and other agencies.
The services for babies could have been a bit better and less stressful.
The GP practice Westgate should have been clearer on how to access their services; it was somewhat muddled at times
More joined up thinking. Consistency in approach
N/A
More openness from the Government
None
Knowing who you are talking to and what type of personal when contacting GP
Confidence that non-Covid services were available and safe from infection
I don't think they could
Focus by government/local government on how to support people in their homes safely without adding pressure to unpaid Carers such as family members
none really it was early on in the Pandemic and little was known about the virus (not that we know much more now)
Direct relevant information quickly
GP's need to make face to face appts more accessible to disabled and chronically sick patients
GP's clearly need training re mental health and medication, they haven't got a clue at Beaconside Health Centre.
Contact from my GP surgery
Not sure
none
Communication regarding outstanding appointments
Lack of availability in appointments; no advice given for coping mechanisms during this time
ability to send info i.e. blood pressure and weight by email to doctor
satisfied with services accessed
Not always clear about who to approach
Train care staff in basic H&S
The Government should have taken notice of other countries outbreaks and applied the positives. Should have applied a full 14 day lock down in March, banned all international travel and we would have emerged in a far better healthy and economical country.
THE EXPERTS be more honest with info support and CLEAR directions.
better information regarding those surgeries which have been delayed/cancelled and when they will restart
I don't know as it was completely unprecedented and affected everyone



I do understand that GPs and Nurses have to be careful but prior to the lockdown I was on a journey of trying to get to the bottom of why my asthma is so bad, this is now on hold and I just feel as if I am being given steroid treatment again and again just to keep me going
Being told not to access NHS/services in the early days...left me to fend for myself
We needed to shut down sooner, we needed to have listened to WHO in January, we need more NHS staff, we need to pay them better, we need to actually put the public before the economy the economy can rise from the dead people can't
information where to go if you have got a UTI and where to go if you need a blood test
GP appointment by phone felt rushed
I need podiatry monthly, was told husband has to cut nails (with his essential tremor!). Podiatry needed to be open
More communication, more accessibility, more decisions rather than guidance
direct telephone communication and appointments with the hospital rather than being left dangling and wondering what's happening and i still don't know!
Easier access to services unable to get replies from people.
CT scans should have been timely delays cost lives. Mine was delayed by nearly 12 weeks. GP said go to hospital if you want face to face assistance with symptoms.
Being able to access timely medical care from GP for multiple chest infections during March to June resulting in admission to AMRA
GP and dentists could have seen patients with PPE more effectively instead of trying to treat everything remotely that really needs examination - not related to COVID 19
MHT should have contacted me (They said they would contact me when my CPN was off work) but didn't
I would appreciate clearer information about what routine services ARE available at this time, if any
Updates being more accessible without use of the Internet.
Constructed Aftercare. A nurse to ring me the day after discharge.
A communication to all patient from our GP would have been very helpful
Maybe more call rounds on the phone I only had one at the start and of course it lasted longer
District nurse visit once a week
GP's surgeries need to feel less like no-go areas. I wanted someone to know i had Covid and show just a vague interest in my condition. All the advice was - get on with it and ring an ambulance if you can't breathe. I think it is this which has affected my mental health the most.
I think from a health and social perspective, it has all been handled well
I would have liked prescription for gyms/exercise to be given to those in absolute need
Make it easier for patients to get GP appointments
Being informed via a telephone call, or at least receiving a follow-up call, after receiving initial text. Either by clinic or GP. GP unhelpful when I contacted the surgery and again no follow up.
The referral process for food assistance did not work. I was referred to Staffordshire Cares and the Realise Foundation. One didn't contact me at all and the other took my details that was in April and I am still waiting
Support offered from nowhere - where was the support?
Very difficult time -my sons PA kept in touch and came as soon as it was deemed safer
outdoor shelter provision for inclement weather if unable to wait inside
Regular check-ups with consultants
Keep doors of mental health centre open to give ventilation, stop people touching handles and lifting viruses from the floor by changing the airflow of the building.
Better communication from services to explain changes to service delivery.
The maternity services were inconsistent - some of the care I've received has been absolutely appalling, but one or two practitioners were outstanding
N/A
Better more responsive services, starting with an expert assessment first appointment an unqualified trainee following an off the shelf self-help manual
No
Department of health, 111 advice and .gov had different Covid advice at one point

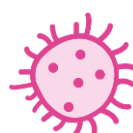


I've not been able to have a blood test. I'd like to put polythene at front window with a hole for arm & have blood test & flu jab & B12 injection that way. I can't see me getting a blood test.
No real issues
No disabled abusing charities
Could have been clearer what available when
Remote services do not work for many things
None needed
Some direct contact might have been nice
None
They could have asked how I was - told me my care coordinator had left and what would happen next.
More information
To have easier access to GP's for telephone appointment and advice on how to get heart rate and blood pressure monitored. My blood pressure is high and my heart races for no apparent reason, I am concerned but of course , it's "just anxiety"
No improvements.
n/a
For mental health centre to contact me regularly because I couldn't access them or add more phone lines
None
offer more support when you are sent home instead of a letter saying the council have had £150 from me having Covid
Should be more people manning the telephones.
None
None - I had excellent service from my GP Practice
I do not know.
I feel being under the CHMT I could have still had some face to face appointments as my counselling was put on hold and had to rely on telephone appointments
Clearer guidance about how to contact a GP directly
Blood test was almost impossible to arrange, several phone calls & several bus trips putting me more at risk! I'm expected to her to Cowbridge from Werrington? My GP should provide blood test or the district nurses
if all patients wore a mask.
All my health needs have been met.
Have access to blood tests required for hospital appointments available from local GP Surgery
People still need to be seen. Elective surgeries still needed to go ahead appointments needed too continue.
A telephone call to discuss before postponing a desperately needed appointment would have made me feel like I do matter.
Access to own Doctors at own Doctors surgery
No speech therapy was provided for my child until July despite his EHCP specifying weekly sessions
Went to a&e with my husband it was a wet day and I had to wait outside in the rain for hours with no update it was horrendous experience I understand why but it could have been so different
Podiatry was done over the phone. Video would have been better
Better communication, there has been a notable absence of this!
My GP said I needed blood tests several weeks ago, but I still do not have a date for this. I do realise the practice is trying to catch up with this service.
Phone calls on those who have had care reduced or stopped to check they are ok
Services we accessed have been fine thanks
More access to health practice
Since I understand that GPs and opticians are working albeit in a very different way, I would have valued some contact to keep me informed as to when I might expect to receive my usual routine care which was cancelled by the provider. It should not be up to me to constantly search Facebook or the internet for information - which is scarce anyway. And I was a professional information service provider and so well able to seek out information for myself. Goodness knows how less able people must be feeling.

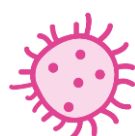


Communication about cancelled or postponed appointments
How to achieve some continuity. Everything on hold so dare not even phone to see if appointments available yet.
GP has now retrain ed surgery staff so the problems we had hopefully won't happen again
None
the government could have prepared and acted properly
some consultants /surgical interventions could have continued
Easier access to virtual mental health support
MORE PERSONALISED ASSESSMENT AS OPPOSED TO 1 SIZE FITS ALL
not rely on over-dependency on Smart technology
GPS to follow up and ensure patients are dealt with appropriately if referred on
Health visitors make weekly calls to new parents
communication about appointments being delayed so don't feel forgotten about. Better access to GP.
none
More support/sympathy from care givers for my son.
N/A
GPs open, they could use screens and PPE like the rest of the country
Put doctors in surgeries on the frontline like everyone else.

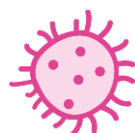
Would you like to tell us anything else about your health and care experience during the pandemic?
My GP deleted items from my repeat prescription without telling me, which meant I was without medication I needed without any way of getting it ,
My daughter is a registered nurse, and she has been supervising me and keeping me informed
Not enough has been done to increase support for those with long term conditions during this time
My GP visited me he was super
Only to say well done to the NHS hospitals and local surgeries
Needed to have a tooth extracted but I needed to wait about 4 weeks for it to be allowed.
No thank you
No
It has been very good
Shielding status needs to include people with diabetes. No-one helped us
The service met my needs. But there are problems such a Trigger Finger in both hands will need attention soon. My Prostate Cancer and my balance will also need to be assessed
Felt neglected and forgotten
Am blessed by living where I do so I can get out and walk in God's countryside. I saw far more cows and sheep than people
My husband fell and broke his wrist, so we were very grateful to have the Minor Injuries unit at Samuel Johnson who were very efficient. He has also been able to access blood tests which were important. Requests for a phone consultation have been more efficient than before lockdown
increased severe angina
Basically unavailable, and we haven't pushed because it takes too much energy and fighting even without Covid-19
No
I am worried that GPs are using the pandemic to avoid face-to-face consultations, and that this has been an opportunity further to promote IT substitutes.
No
Seeing a healthcare professional cannot be adequately swapped for remote services



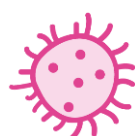
No - but other family members had challenges because of the Covid pandemic
No
An 86 year old with dementia was taken by emergency ambulance to A&E. I could not get through on the phone for 4 hours. When I did get through the staff nurse told me she couldn't discuss anything on the phone. I had to fight my corner to get shy information. The person with dementia was brought home crying, screaming and very frightened, missing the top to her panamas. This is not treating people with dignity or respect.
Lack of dental service
feel its time for services to starts resuming to normal again, after all shops and the leisure industry are now open
My husband has COPD and diabetes and is over 65. No-one has contacted him whomsoever
The care that my father received and still receives from District Nurses has been excellent.
All staff I encountered in GP and pharmacy were kind and reassuring.
Lack of support from family & friends, because of Gov. guidelines, made this period even harder, in addition to lack of visits from nurses for my new born child.
no
feelings of isolation at first, though plenty of contact by phone, Zoom, etc with others, now missing hugs
The biggest problem is the U turn after U turn by the Government. Lack of positive lasting guidance. The virus was/is difficult to deal with, but the guidance from the leadership has been chaotic.
I have a newly diagnosed heart condition and I have concerns as to whether I shall have review appts and further tests I was told I needed.
Loneliness, not required, low on one's own.
The staff did everything they could under the circumstances. Instead of clapping they should be paid properly & more staff employed
My GP practice has been brilliant and has done their best to try to support me
Had a face to face because it was potentially serious and may have needed hospital admission.
Easy to order repeat prescriptions via pharmacy
Mum found the telephone consultation fantastic but elderly aunt with early dementia found it distressing and confusing
My grandfather was dying of pancreatic cancer and wasn't allowed to use any Macmillan services and a result he deteriorated faster and ultimately died because care services weren't given PPE or any reasonable guideline
would be better if could of had an Xray as had a bad knee, well still do and nothing else i.e. medication doesn't work
fracture clinic and physiotherapy were very well organised
The staff at the early pregnancy unit at Royal Stoke Hospital were amazing.
I am very concerned that services will be rationed / privatised and waiting lists will get longer
I was generally pleased with all arrangements. Staff were great.
I think there could have been more flexibility and more support in certain areas
I was doe a telephone appointment on 28th May, didn't take place and when I contacted the department was informed a person had entered on the computer the appointment had taken place. Notified department it had not, was told another one would be made. Still waiting.
i have some seriously concerning symptoms which were being investigated and six months later I'm none the wiser which is appalling.
my mother needs a podiatry appointment ,which apparently, they cannot do routine work even though hospitals and other public services open but they aren't?
There has been no healthcare experience as cannot access
Covid-19 has taken over, it seems to be treated as a priority over cancer and other chronic health conditions
It has been terrible no support from GP and fear of having to go hospital actually happened due to lack of care from primary care
felt unable to access services
My main concern is that you are discharged from hospital, still very poorly with Double pneumonia caused by coronavirus, and no follow up plan



Enjoyed the empty roads
my Achilles tendonitis has got very severe can hardly walk my op got cancelled
Government advice/guidance has been dreadful and left me confused and in limbo.
It has been excellent, second to none.
Had 2 serious bouts of urinary tract infections and had difficulty getting antibiotic medication
Accepting that this has been a difficult time for NHS staff, but to receive a text out of the blue, then being told by the GP to "follow gov guidance" without any reference to my individual circumstances was unhelpful. Routine telephone appt with hospital worked well and I was discharged but I've not received my copy of the letter (GP has) and it wasn't clear regarding the requirement to not shield after all. Having contacted GP, I'm still waiting for clarification from the hospital. This has had a severe impact on my mental and physical health and may have implications for work.
The pharmacy service from Morrison's in Goose Street was woeful. They were downright rude when I asked if they had a delivery service
Yes, no support had to rely on carer putting them at risk NHS uninterested
Very good and efficient
Appointments seem to be better managed at health centres
No
Not at all happy about their safety procedures that sometimes conflict with my own and aren't remotely adequate (such as doors closed and appointments not being the quick in and out promised - lasting up to 15 minutes instead which isn't in and out). Q18 - I have long term conditions but none of those mentioned or anything similar to them. Questions appear to be written for non-autistic people. Q10 - my answer is neither yes nor no.
Very positive experience from UHNMs Royal Stoke site & GP Mansion House Surgery. Thank you
The chronic underfunding of the NHS and social care has become even more apparent. The services have done all they can to manage but the aftermath will be with us for many years to come with poorer services and longer waiting lists.
24 hour monitoring test appointment for A/F cancelled & not yet rescheduled
I am petrified & others must be. There seems to be no accommodating of patients who don't want to risk Covid-19. Why can't I have home visit & put arm through polythene around window to get a blood test?
I had my pre-op cancelled for a routine operation and there's no indication of when my op will go ahead. My symptoms are not life threatening but are impacting on my quality of life.
I had no difficulty getting telephone consultation with the GP. I sent a photo of a skin problem and was referred to a consultant for suspected basal cell carcinoma. my consultant appointment was 2 weeks later. There was no wait at outpatients. they took a biopsy. I had no difficulty getting an appointment with the GP practice nurse to have the stitches removed. luckily, it wasn't raining as I had to wait outside at the GP surgery. Overall, it worked well.
HPs have a hatred towards disabled people because the HCP and NMC encourage it.
GP and one with hospital consultant were all very efficient and whilst didn't always give me the outcome I was looking for, e.g. on one call I needed my ears syringed but was not able to access that service, the other 2 were fine. the outcome of the GP call was successful in that it led to an urgent appointment for a colonoscopy.
Had an appointment at the GP's where I was seen & dealt with professionally in a safe environment son had to wait a long time for an Xray on his knee - mum had to push for an appointment as it was making sons anxiety even worse waiting. Follow up from physio was a lot easier and telephone appointment very good
GP's not interested, too busy?
Good care from GP surgery, prompt referral to hospital dermatology clinic. Excellent treatment at this clinic.
I have coped well. I intend to switch my HIV regimen in the near future and have been able access the information I need. Friends have called round to check I'm alright as have Stoke CC and Pensioners Convention
I was shielded and blood tests were done at home. Hospital rang the day before to tell me who was coming and at what time. Brilliant service
Although I had a great experience by telephone from my GP, there would be occasions when it would be more important to see my GP personally



Nothing to report.
I feel extremely lucky nit to have developed any major health issues as I would not have felt confident, they would have been dealt with. However, my husband had a good experience with raising new health issues and being successfully referred to the hospital for testing.
I have leg ulcer which is usually treated at the ulcer clinic at Cheadle hospital. I am expected to dress it myself. The district nurses drop the dressings off at my home?
Having previously relied on the help of family, 2 major events have affected the support I was previously using. This left me feeling very vulnerable and not really knowing where to turn for help
Nothing to add here.
Hospital at home nurses are incredible. Had proper equipment, gave a diagnosis and aftercare and were nice
Ridiculous not being able to see a Dr
Having use of the private hospitals for Covid19 patients was a wonderful idea, however when appointments were routinely postponed without consult could have resulted in a tragic event. Non Covid patients often feel forgotten about, and Eden is taken sometimes two or three years to get to the bottom of a painful illness, having an appointment effectively cancelled was horrendous. The pain and severity does not reduce because there is a pandemic at the time.
No continuity of care with telephone appointments with different Doctors
Access to a dentist has also been an issue
It has been easier apart from podiatry. The stress of going to hospital/doctors and parking etc was removed.
Pharmacy have been brilliant, text service to let me know my medication was ready has worked well, no problems yet with obtained meds.
I have isolated since March and began to receive my medications by pharmacy delivery. This has been excellent and very reassuring.
No
I feel neglected and abandoned but I am part of the generation which does not call on healthcare professionals for minor ailments and so I have not been in contact with my usual health care providers.
Disappointed at the lack of information from hospitals about when or if they will be doing elective surgery such as hip replacements. I have serious hip OA and my hip replacement was due in April. Symptoms are worsening all the time and my quality of life is being badly affected.
GP surgery fell short of their care of both me and mum. I wrote and spoke to them. GP apologised. Usually they are so good, but since January this year they have given a poor service to both mum and me. They made me feel worthless even that did not consult me regarding mums care.
Health care has been non-existent
Felt responsibility for son's ongoing support fell on us
Very poor. Health visitor team poor and GP access poor.
Had blood tests done at home as I was shielding and had telephone appointments with rheumatoid arthritis consultant
no
All of my experiences have been positive
I've had continuous high nitrites and blood In urine. I've have seen doctor, had bloods done, had ultrasound scan, had flexibly cystoscopy and seen Urologist. The treatment I have received has been second to none
Not being able to see a doctor as they hid away when pharmacists are on the front line is shocking



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