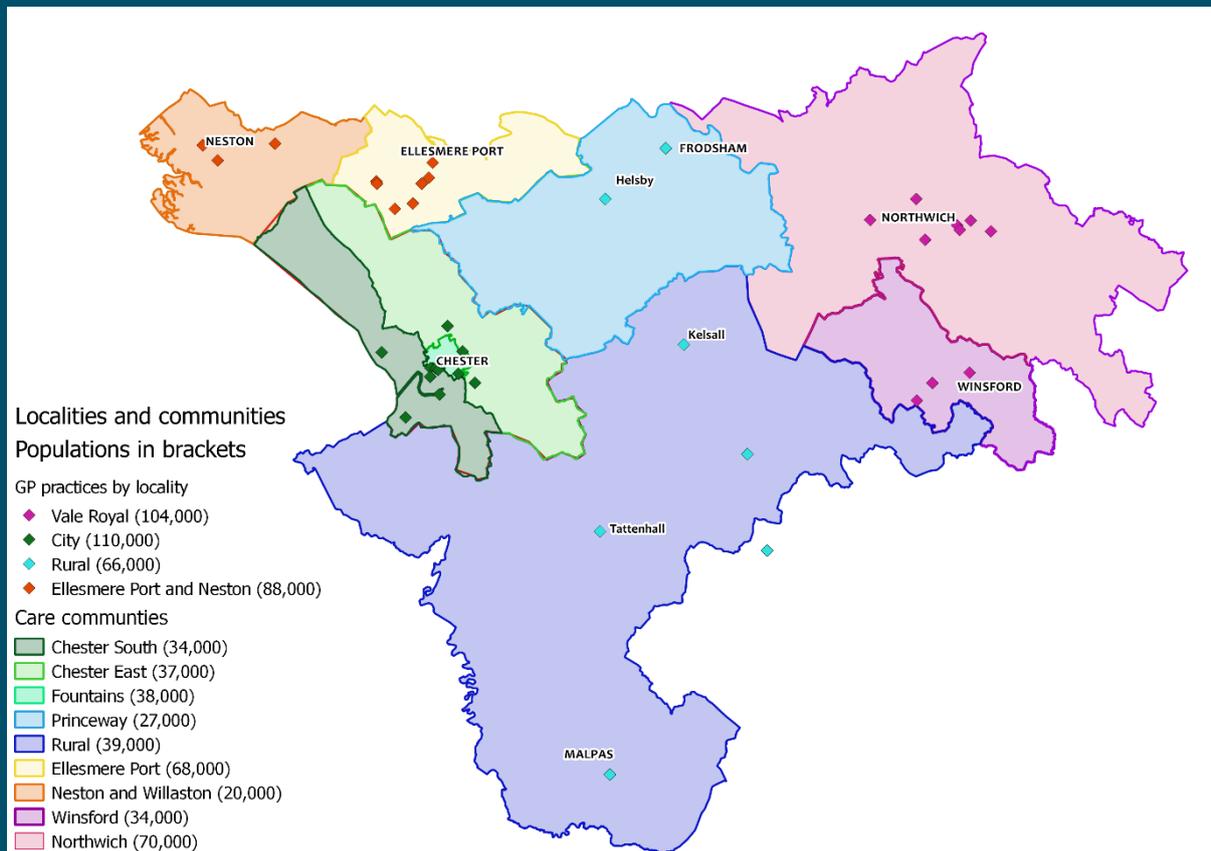


Public Views on Health and Care during the Coronavirus (COVID-19) Pandemic in the Care Communities of

Cheshire West and Chester

October 2020 – March 2021



Introduction

Since the beginning of May 2020, we have been asking Cheshire residents to tell us about their personal experiences during the Coronavirus (COVID-19) pandemic. People shared their views and concerns on a wide range of topics, including health, care, mental health, wellbeing, and wider concerns both now and for the future.

Our initial reports based upon our findings from the *Healthwatch Cheshire Health and Wellbeing During Coronavirus* survey were published earlier in the year, and covered the period between May 2020 and 15th October 2020. Those reports are available to read on our website (www.healthwatchcwac.org.uk). Between 16th October 2020 and 23rd March 2021, Healthwatch Cheshire received a further 349 responses to our survey from local people across Cheshire West and Chester. This follow-up report covers the period up until the anniversary of the first lockdown announcement, and provides further insight into how people have coped during the pandemic, changes that may have occurred in relation to accessing services, and any concerns people have about the current situation and the future.

Across Cheshire, we received 2,430 responses between May 2020 and 23rd March 2021 (1,192 from Cheshire West and Chester), which equates to over 9,000 individual comments. This report focuses on the responses from people in Cheshire West and Chester since October 2020, and compares how they relate to our previous reports covering May to October 2020. This report breaks down the information to a local level, which allows Care Communities to better understand the views and needs of their local population. There are 9 Care Communities in Cheshire West and Chester, which aim to bring together people living, working or involved in an area to improve the health and wellbeing of local residents:

- Chester Central (City Centre)
- Chester East (Christleton, Littleton, Huntington, Boughton, Upton, Hoole, Mollington, Mickle Trafford)
- Chester South (Blacon, Lache, Saughall, Eccleston, Handbridge, Dodleston, Kinnerton)
- Ellesmere Port
- Frodsham, Helsby and Elton
- Neston and Willaston
- Northwich
- Rural (Tarporley, Malpas, Ashton, Farndon, Tattenhall, Kelsall, and Tarvin)
- Winsford.

The findings of this survey help to provide up to date information to partners including Local Authorities, NHS Cheshire Clinical Commissioning Group (CCG), Hospital Trusts, voluntary sector organisations, the Care Quality Commission and Healthwatch England.

What is Healthwatch?

Healthwatch Cheshire, consisting of Healthwatch Cheshire East and Healthwatch Cheshire West, is an independent consumer champion for health and care across Cheshire East and Cheshire West and Chester, forming part of the national network of local Healthwatch across England. Our role is to make sure that those who run health and care services understand and act on what really matters to local people.

Healthwatch Cheshire East and Healthwatch Cheshire West undertake continuous engagement activities with the public to hear about concerns and compliments regarding

health and care services. The information we gather is then analysed so that we can identify and act upon trends and common themes by presenting our findings to decision makers in order to improve the services people use. We also share people's views locally with Healthwatch England who strive to ensure that the government put people at the heart of care nationally.

Overview of Findings

The following provides an overview of the main themes and trends in Cheshire West and Chester, before providing the key findings broken down by each of the 9 Care Communities.

Healthcare



The main theme running through our survey findings is one of people generally satisfied with the healthcare services they are receiving. However, the comments view service changes as better than having services withdrawn as a result of Coronavirus, and do not suggest that current service delivery is preferable to how it was before the pandemic. In most cases, people do not seem to be overly negative or critical about the changes to services, and there is a broad acknowledgement that the situation is difficult to manage and that services are doing the best that they can for people.

- Nearly half of all respondents have reported not feeling comfortable either making, travelling to, or attending appointments, or feel that they would be overburdening healthcare services if they did. (Note this is any medical appointment including GPs, Outpatients, etc.) This was particularly prominent from May-October 2020. However, since October 2020 there are some signs that people are beginning to feel comfortable accessing healthcare again.
- The majority of people are happy to have GP video/telephone appointments dependent on what is it about, but there is still strong sentiment that face-to-face appointments are beneficial. This has been relatively consistent since the beginning of our survey in May 2020.
- As time has gone on, there has been an increased uptake of face-to-face appointments but people have been nervous about attending them. Post-appointment however, many people have noted feeling positive about their experience and safety.
- Issues with prescriptions and medication, particularly with the repeat prescription process have been occurring throughout the pandemic, but as time has gone on these have become far less common.

COVID-19 Vaccinations

Feedback regarding the COVID-19 vaccination process has largely been positive about the vaccination process, volunteers and staff. Some people also had queries as to booking arrangements, priority groups, and when they could access their vaccine. Comments about the process included:

- *“Chester Racecourse, very efficient from start to leaving the door.”*
- *“Last Friday at Ellesmere Port Civic Hall. Long queues because people turned up early. But everyone was friendly and good natured. The vaccination itself wasn't a problem although felt like I'd been hit with a sledgehammer the next day.”*
- *“Ellesmere Port Civic Hall - very well organised, quick, pleasant staff.”*
- *“Chester Racecourse - very efficient service - well organised and no complaints.”*
- *“My first vaccination was at Winsford, no problems. Waiting for second. My husband's was at Crewe, as will his second. No reason why we couldn't book at Northwich, which is nearer and has at least one centre. Booking online as requested gave no option for Northwich. Why?”*
- *“I had quite a severe reaction, but it only lasted a few days. My husband had no adverse reaction.”*
- *“Countess of Chester - well organised.”*
- *“St Columbia's Church, Chester. Appointment on time, socially distanced moving through process, well organised by NHS.”*
- *“My mum in Wirral CCG very well organised. A friend who has milder asthma than I have and also is younger had had their vaccination at Kingsmead; mum has friends with children younger than I am and with no underlying health conditions vaccinated; yet I have not even been contacted and have no idea whether in group 6 or group 8. Seems to be a postcode lottery. Not knowing when appointments will be opened to my age group is a very significant source of stress especially as my mum is due to have a cataract operation and I will need to care for her for a week or so afterwards. Doesn't help to see reports of 30 somethings with no idea why they are being called, or reports of people registering as carers with GP just to get a vaccination.”*
- *“I had them both at the Countess. We had to queue for 2 hours to receive the vaccine but felt lucky that we had it.”*

Mental Health and Wellbeing

- In the most part people generally felt that they were coping well. However, respondents also talked about the stress and anxiety they felt, confusion over national guidance and missing family and friends. As time has gone on, people's anxiety has increased and there has been a greater sense of people feeling 'fed up' since October 2020.
- Stress and confusion over national guidance, along with increased scepticism the longer than pandemic has continued about media reporting and scaremongering.
- Between October and March 2020, people have been conveying that they want to be able to go out and enjoy freedoms, with sentiment that there was no longer a need for such strong restrictions.
- Most people are seeking support from family and friends, but people have also been looking to technology, community organisations and mental health providers. A small amount of people who sought support for their mental health found this online or via an app. This has remained relatively consistent throughout the lifetime of our survey since May 2020.
- Respondents also talked about the importance of family and friends, support from the community and the workplace, exercise and better access to services. This has remained consistent since May 2020.
- People's top future concerns include: the observance of social distancing, and the mental and physical health of themselves and others.



Care



In our previous report covering the period of May to October 2020, people told us that changes to Care services were mainly related to postponements or delays in implementation of care packages or assessment. People also told us about visits from Carers and Personal Assistants being stopped or reduced, leaving people with difficulties in shopping and cleaning and having to rely more upon friends and family for caring support.

Between October 2020 and March 2021, 34 people across Cheshire West and Chester provided responses specifically to the Care section of the survey. Below is a sample of their responses and the richness of views, experience and individual stories they provide. In addition, during December 2020 and January 2021, Healthwatch conducted a separate survey to capture the experiences of residents of care homes and their friends and families, the results of which will be published in a separate report.

Experiences of care during the coronavirus pandemic

We asked people to tell us if their experiences of care had been affected by the coronavirus pandemic. Several people told us that their care had not changed, others told us about forming support bubbles with family members, and others mentioned different carers coming to support them. Below are some of the comments received from people living in sheltered accommodation, supported living, receiving assistance at home from a care worker, receiving support from a personal assistant, and people receiving care at home from family or friends:

- *“No changes. Got used to the system. No problems. Seems better.”*
- *“I only received two visits advising on exercising and correct use of inhalers, etc.”*
- *“No way of knowing if the person providing support to my mother is vaccinated or not, suspect not.”*
- *“Don't use the care. Just have the on-call alarm system which is absolute rubbish.”*
- *“No change, only accessed care after the pandemic started so don't know any different.”*
- *“They have worked generally very well during the lockdown period but they have had difficulty with staffing on occasions.”*
- *“Less frequently.”*
- *“Home care has been stopped and my sons and family are doing all needed so we are all safe.”*
- *“Generally unaffected.”*
- *“My daughter, etc is always at the end of her phone if I need help.”*
- *“Yes, fewer visits because friends were cautious. I had help getting shopping when I couldn't get deliveries. Recovering from surgery did not count towards accessing social services support.”*

- *“I’m working three jobs and co running a support group alongside caring for my autistic son and being autistic myself and my sons mental health issues are being treated as unauthorised by school as they do not recognise mental ill health as a valid reason for being off and require medical evidence in the middle of a pandemic where people aren’t being seen face-to-face.”*
- *“No visits from OT.”*
- *“My son’s personal assistant has been unable to support him during the lockdown.”*
- *“Had no access to my parent in care home.”*
- *“Sometimes it has appeared difficult for them to provide a suitable carer at short notice when the planned carer has had to cry off.”*
- *“Still awaiting a CHC assessment to be carried out since January (last contacted in August).”*
- *“Over the summer we could have garden visits. Visits are currently restricted to one named visitor per resident. Video calls are offered, but there is only one iPad being used which is also used for staff training meaning a call can be booked but isn’t honoured.”*

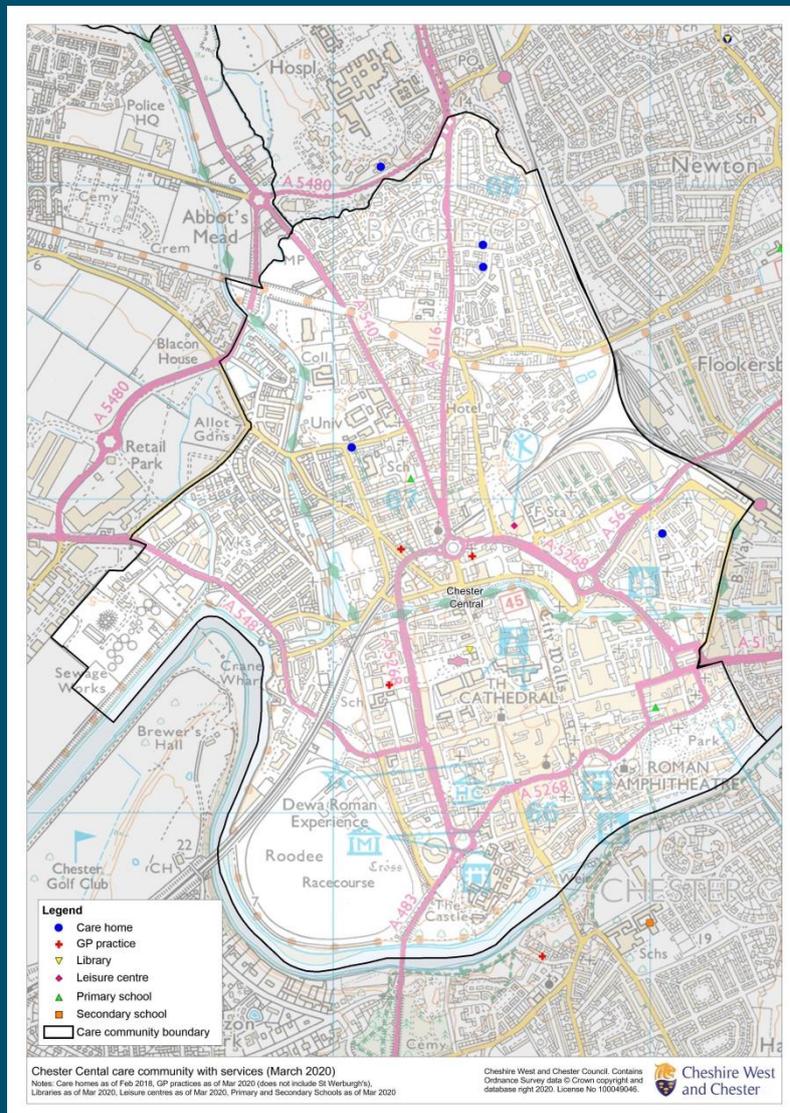
Comments were also received about the communication of updates about COVID-19, guidelines, and changes to care:

- *“Letters etc from Council, medical services and online.”*
- *“Haven’t been in touch once throughout the whole period except when their alarm had a fault and was shrieking for 3 hours from 9.30pm until well after midnight.”*
- *“I don’t want to let anyone into my home because of COVID-19.”*
- *“The manager issues an update whenever the rules are changed.”*
- *“As soon as there is a development, we are informed.”*
- *“When something goes wrong the company will tell us - and if they don’t often our carer present will tell us she has seen a notice asking for care for a certain shift.”*
- *“A newsletter is sent out telling us what is expected from us, but queries to the home about access to video calls go unanswered.”*
- *“There is an assumption that care givers don’t work, and can therefore comply with the home’s timings - this isn’t always possible.”*
- *“The home hasn’t been very responsive or creative in using its facilities to allow visits.”*
- *“The carers won’t speak to me until I ask them.”*

The following breaks down the findings from our survey by each of the 9 Care Communities in Cheshire West and Chester, which are organised as appendices.

Public Views on Health and Care during the Coronavirus (COVID-19) Pandemic in Chester Central

October 2020 - March 2021



Introduction

Between 16th October 2020 and 23rd March 2021, Healthwatch Cheshire received a further 349 responses to our Health, Care and Wellbeing survey from local people across Cheshire West and Chester. Our initial reports based upon our survey findings were published earlier in the year, and covered the period between May 2020 and 15th October 2020. Those reports are available to read on our website (www.healthwatchcwac.org.uk). This follow-up report covers the period up until the anniversary of the first lockdown announcement, and provides further insight into how people have coped during the pandemic, changes that may have occurred in relation to accessing services, and any concerns people have about the current situation and the future.



In total, since our survey began in May 2020, we have received feedback from 82 residents of Chester Central to our Health, Care and Wellbeing survey. This report covers the 37 responses specifically from October to March 2021.

How do you feel about accessing services?

Similarly to the findings in our first report covering May to October 2020, from October to March 2021 people in Chester Central have on the whole remained concerned about overburdening the NHS and difficulties accessing services in the first instance. However, those who have attended appointments have generally had a positive experience:

Concerns about
overburdening
the NHS by
making
appointments

- *“I’ve had routine issues throughout the pandemic that I’ve not contacted my doctor about as I know how busy they are with covid.”*
- *“I’ll contact when absolutely necessary but won’t do so unless an emergency.”*
- *“I feel they are doing a fabulous job considering the extra pressure.”*
- *“I’m happy to attend. The stress comes from trying to access the system. Most things other than covid have taken a back seat in a big way, despite what the government claims.”*
- *“I’ve wanted to see a GP on a number of occasions. Contacted once but it was so negative I didn’t bother.”*
- *“I’m waiting for ENT appointment for ear problem all year.”*
- *“Feel GPs are not as accessible.”*
- *“Everywhere has felt safe, masks required and hand sanitiser readily available, safe distancing marked out.”*
- *“Self-medicate where possible but have attended Countess of Chester for a knee x-ray.”*
- *“Not had any requirements for healthcare services.”*
- *“I like the telephone consultations, very helpful.”*
- *“Had to attend doctors few times and can’t access ENT clinic at hospital suggested all year ear pain deafness chronic sinusitis.”*
- *“Those who have been shielding are still reluctant to attend appointments even when assurances are given. they feel safer at home.”*

Opinions of video or phone appointments

A larger number of respondents have now experienced a healthcare appointment by video or phone call as the pandemic has progressed. When we asked people to tell us more about their experience, in relation to GP and hospital appointments people would be happy continuing to have GP and hospital appointments via this method dependent upon what the appointment was for. This sentiment has remained similar throughout the pandemic. However, the main concern arising from this type of appointment is the lack of a physical examination. Comments include:



People are happy
to use video or
phone
appointments
depending what
it is for

- *“Less risk re Covid-19. Easier and takes less time for both the patient and clinician and leaves Doctors more time for those who may really need it.”*
- *“Surprisingly I felt the health care practitioner had more time for me on the telephone than during a busy clinic. Other benefit was difficult and sometimes expensive journey to hospital.”*
- *“If it’s only a quick consultation its ok. For some stuff you need face-to-face.”*
- *“Rather this than not at all.”*
- *“Don’t have to worry about how to get there, parking is a nightmare in Chester, can take the appointment at home!”*
- *“Unless a physical examination is needed, it is quick and helpful for a number of consultations.”*
- *“Not personal enough and my husband was not properly diagnosed with a torn muscle and to access physiotherapist himself through work.”*
- *“Insufficient body language and eye contact, too hard to communicate about intimate matters. A hugely inferior experience.”*

Have you had any face-to-face medical appointments over the last few months?

As time has progressed more people have been accessing healthcare appointments face-to-face, and are now being accessed more regularly than earlier in the pandemic. The majority of respondents told us about positive experiences of attending clinics and appointments, though a small number did feedback that they felt anxious throughout and found communication limited or difficult:

People found
communication
difficult due to
PPE

- *“It was done in the right way and followed strict COVID-19 regulations.”*
- *“Very anxious. But felt everything was being done to keep safe.”*
- *“Blood samples taken and MRI scan, all perfectly fine and comfortable.”*
- *“Wore a mask throughout which was ok but did limit ease of communication at times.”*
- *“It followed a phone consultation with a GP as a physical examination was needed. It was efficiently managed.”*
“I attended the GP practice for a flu vaccination which was very carefully done with full Covid measures.”
- *“For a routine blood test, it was fine, I ensured that I was sufficiently far away from any other patients. The total number of attendees was kept low, there was enough space to socially distance. Masks were worn, and sanitiser was available.”*

Have you had any issues with prescriptions or medication?

From October, we asked a standalone question in relation to prescriptions as over the summer months people were frequently telling us about issues they had accessing prescriptions and medication. Two-thirds of respondents did not report any issues with medication and prescriptions, similar to figures reported earlier in the pandemic. However, when prompted to share experiences, there was a mixed response in relation to timeliness of delivery of prescriptions and mixed opinions of the online ordering service:



- *“No issues, my prescription was sent electronically to the pharmacy and was collected by my husband. This worked really well.”*
- *“It has had an impact on my prescriptions in that it takes longer now for them to be available and takes longer for my GP to sign them off.”*
- *“Timescale for online repeat prescriptions that used to be completed in 48 hours can now take two plus weeks.”*
- *“Some mix-ups with the pharmacy omitting items. More complicated because the Well pharmacy attached to Garden Lane surgery closed and there were some adjustments changing to Well pharmacy at the Fountains health centre. It seems ok now.”*
- *“I order online and collect from the pharmacy. When I had Covid a regular and due prescription was home delivered.”*

Have you experienced any disruptions to your hospital-based treatment, outpatients appointments, or operations?

Between May and October 2020 almost half of Chester Central respondents had told us about changes to their hospital-based appointments, including being cancelled or delayed. This remained similar between October and March 2021, with people telling us about appointments being cancelled or delayed:

Disruptions to
hospital-based
treatment
including
cancellations
and waits

- *“Appointments cancelled and rescheduled three times.”*
- *“Very difficult to get an ENT outpatient clinic. I have been to emergency appointment for micro suction on ear but still having problems and in pain with ear and face.”*
- *“At the end of 2019 I had a hospital appointment and the department said they would refer me to 'Gastroscopy'. For 8 months this hadn't happened so I contacted the hospital directly who informed me they had no record of such a referral. However, they rectified the matter and I was offered an appointment 2 weeks later.”*
- *“Initially specialist neurological appointments were stopped at the Walton Centre. These are now resuming, but there is a back-log. This will have delayed diagnosis and access to disease modifying drugs in some cases, resulting in a deterioration in symptoms/condition.”*

How Coronavirus has affected people's mental health

We asked people to tell us about the impact that the pandemic has had upon their mental health. There is a general feeling amongst respondents of feeling anxious, unhappy and frustrated with lockdown, and more so as a result of the longevity of lockdown:



Frustration with
continued
national
lockdown
restrictions

- *“I have struggled with not being able to spend much time with my family as we are all very close.”*
- *“I don’t mind working at home but it is hard when you hate where you live. I do feel isolated and I miss hugging my family.”*
- *“I feel saddened and annoyed that our government is not being held to account. Untruthful, incompetent and a very poor example.”*
- *“Just fed up with it all and the lack of cohesive guidance from the government - let the scientists take over, they are far more believable.”*
- *“Impacting on my freedom to travel within the UK but am fully supportive of steps taken restricting this to eradicate virus.”*
- *“I believe that most of the things that keep us healthy and active have been taken away. How a person feels mentally and physically has a huge impact on their immune system. Vitamin D is essential to well-being and being ‘allowed’ to exercise for a limited time has massively impacted on my own mental health and well-being.”*

We asked people to tell us what would help them to maintain or improve their physical or mental wellbeing

A small number of people have been telling us that they don’t require any support with their mental or physical health. As time has progressed people are telling us more about what helps or could help, particularly exercising and being outside and the support of friends and family. This echoes earlier findings, though exercising and being outside is now more prevalent than seeing family and friends. This is likely to be as a result of the longevity of lockdown, particularly through the winter months:

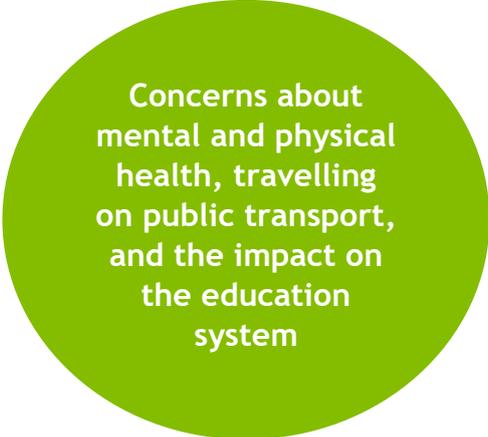


People wanting to see friends and family, and exercise safely outdoors

- *“Access to the gym.”*
- *“Sorted out myself, a lot more exercise and a lot more walking, National Trust grounds help a lot.”*
- *“Being able to socialise more outside, walking more, being able to see friends socially distanced.”*
- *“Being able to see family socially distanced as it’s been such a long time as England vs Wales in March.”*
- *“Not having to constantly clean the house and need a change of scene but aware we cannot!”*
- *“Being able to go swimming, I struggle with back issues and walking isn’t easy for me so I’ve had little to no exercise during lockdown as I couldn’t go for a swim.”*
- *“Sunshine! I’m afraid nothing short of being able to see those I love will truly make things better for me.”*

What are your current concerns about the future impact of the covid-19 pandemic?

Concerns are broadly the same for Chester Central residents as they were throughout the earlier stages of the pandemic. People are concerned about their mental and physical health and that of their friends and family, and being able to see friends and family. As time has gone on however, less people are reporting concerns about social distancing and other people not observing rules in the future, which could in part be due to the ongoing vaccination programme. More people have talked about concerns regarding travelling on public transport, and also the impact of the pandemic on the education system.



Concerns about
mental and physical
health, travelling
on public transport,
and the impact on
the education
system

Healthwatch Cheshire continues to provide up to date information to partners and publish further reports on our websites. You can read our reports on what people across Cheshire have told us about their experiences by visiting our website:

www.healthwatchcheshire.org.uk

You can contact us on:

- **Tel:** 0300 323 0006
- **Email:** info@healthwatchcheshire.org.uk
- **Facebook and Twitter:** @HealthwatchCW and @HealthwatchCE
- **Post:** Healthwatch Cheshire CIC, Sension House, Denton Drive, Northwich, Cheshire, CW9 7LU

Tartan Rug

This is the Tartan Rug for the Chester Central Care Community (Public Health England, 2019). The health profile or ‘tartan rug’ shows how each ward within Cheshire West and Chester compares with all other wards in England across a range of health indicators and outcomes. Although the rug only includes a limited number of indicators, it does provide an overview of local health need and a tool to aid discussions about local priorities. Healthwatch Cheshire used this resource when planning our activity.

Produced by Cheshire West and Chester, Insight and Intelligence team. Version 2 : October 2019

	Period	Value type	Chester Central
1 Total population (MYE 2018)	2018	Number	15,839
2 BME population (Census 2011)	2011	%	13.8
3 Not proficient in English (Census 2011)	2011	%	1.1
4 Population under 16 (MYE 2018)	2018	Number	1,238
5 Population aged 65 and over (MYE 2018)	2018	Number	2,363
6 Income deprivation - English Indices of Deprivation 2015 (%)	2015	%	10.8
7 Child Poverty - English Indices of Deprivation 2015 (%)	2015	%	14.9
8 Child Development at age 5 (%)	2013-2014	%	51.4
9 GCSE Achievement (5A*-C inc. Eng & Maths) (%)	2013-2014	%	55.1
10 Unemployment (%)	2018	%	1.8
11 Long Term Unemployment (Rate/1,000 working age population)	2018	%	1.7
12 Older people living alone (%)	2011	%	46.5
13 Older People in Deprivation - English Indices of Deprivation 2015 (%)	2015	%	21.5
14 Emergency hospital admissions for all causes (SAR)	2011/12-2015/16	SAR	99.3
15 Emergency hospital admissions for CHD (SAR)	2011/12-2015/16	SAR	101.7
16 Emergency hospital admissions for stroke (SAR)	2011/12-2015/16	SAR	95.9
17 Emergency hospital admissions for Myocardial Infarction (heart attack) (SAR)	2011/12-2015/16	SAR	83.1
18 Emergency hospital admissions for Chronic Obstructive Pulmonary Disease (COPD) (SAR)	2011/12-2015/16	SAR	95.4
19 Incidence of all cancer (SIR / per 100)	2011-2015	SIR / per 100	104.5
20 Incidence of breast cancer (SIR / per 100)	2011-2015	SIR / per 100	84.8
21 Incidence of colorectal cancer (SIR / per 100)	2011-2015	SIR / per 100	135.2
22 Incidence of lung cancer (SIR / per 100)	2011-2015	SIR / per 100	124.1
23 Incidence of prostate cancer (SIR / per 100)	2011-2015	SIR / per 100	95.6
24 Hospital stays for self harm (SAR)	2011/12-2015/16	SAR	106.5
25 Hospital stays for alcohol related harm (Narrow definition) (SAR)	2011/12-2015/16	SAR	109.5
26 Hospital stays for alcohol related harm (Broad definition) (SAR)	2011/12-2015/16	SAR	105.1
27 Emergency hospital admissions for hip fracture in 65+ (SAR)	2011/12-2015/16	SAR	122.4
28 Limiting long-term illness or disability (%)	2011	%	14.5
29 Deaths from all causes, all ages (SMR)	2011-2015	SMR	115.9
30 Deaths from all causes, under 75 years (SMR)	2011-2015	SMR	139.0
31 Deaths from all cancer, all ages (SMR)	2011-2015	SMR	102.8
32 Deaths from all cancer, under 75 years (SMR)	2011-2015	SMR	115.6
33 Deaths from circulatory disease, all ages (SMR)	2011-2015	SMR	111.9
34 Deaths from circulatory disease, under 75 years (SMR)	2011-2015	SMR	138.4
35 Deaths from coronary heart disease, all ages (SMR)	2011-2015	SMR	112.6
36 Deaths from stroke, all ages, all persons (SMR)	2011-2015	SMR	105.9
37 Deaths from respiratory diseases, all ages, all persons (SMR)	2011-2015	SMR	160.1
38 Deaths from causes considered preventable (SMR)	2011-2015	SMR	158.4

Abbreviations:

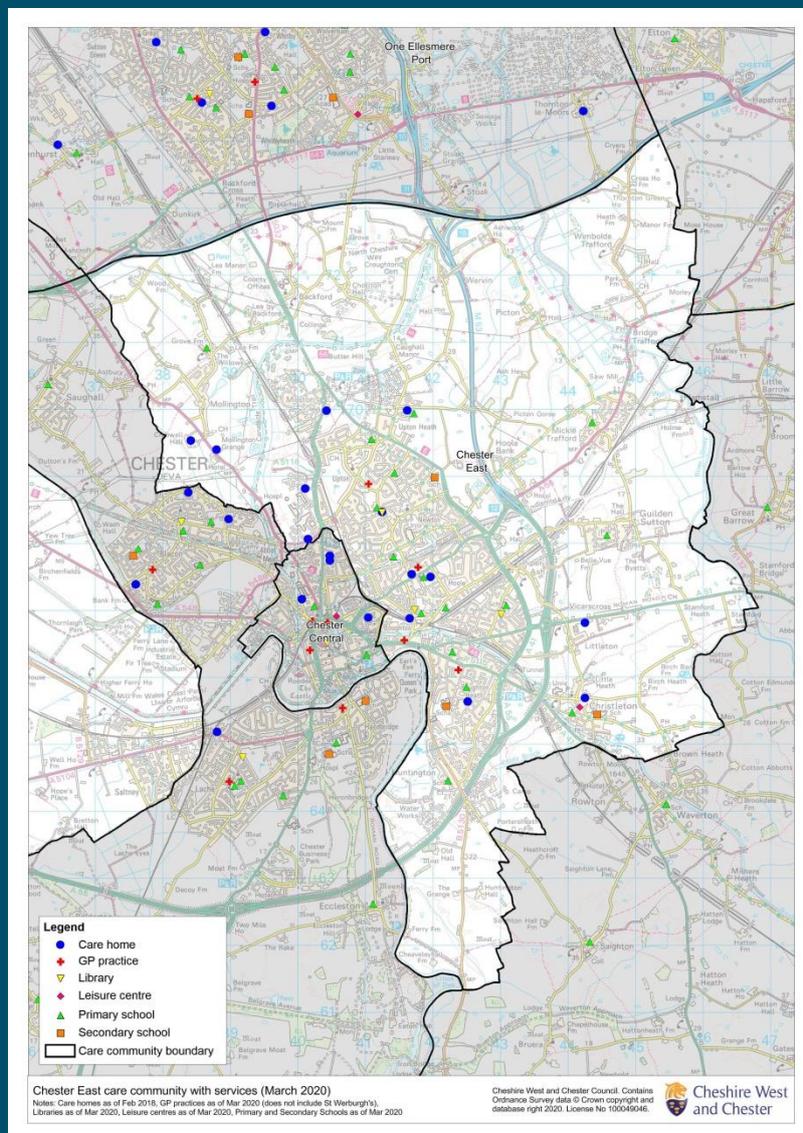
SAR = Standardised Admissions Ratio
SIR = Standardised Incidence Ratio
SMR = Standardised Mortality Ratio

Ratios are calculated by dividing the observed total number of admissions, new cases or deaths in the area by the expected number and multiplying by 100. Expected numbers are calculated by applying age-sex specific death rates for England in 2011-15 to each area's population.

Significantly better than England Not significantly different Significantly worse than England

Public Views on Health and Care during the Coronavirus (COVID-19) Pandemic in Chester East

October 2020 - March 2021



Introduction

Between 16th October 2020 and 23rd March 2021, Healthwatch Cheshire received a further 349 responses to our Health, Care and Wellbeing survey from local people across Cheshire West and Chester. Our initial reports based upon our survey findings were published earlier in the year, and covered the period between May 2020 and 15th October 2020. Those reports are available to read on our website (www.healthwatchcwac.org.uk). This follow-up report covers the period up until the anniversary of the first lockdown announcement, and provides further insight into how people have coped during the pandemic, changes that may have occurred in relation to accessing services, and any concerns people have about the current situation and the future.



In total, since our survey began in May 2020, we have received feedback from 128 residents of Chester East to our Health, Care and Wellbeing survey. This report covers the 40 responses specifically from October to March 2021.

How do you currently feel about accessing services?

Between May and October 2020 there was sentiment that people were concerned about overburdening the NHS by making appointments. Half of Chester East respondents to the survey from October 2020 to March 2021 stated that they felt comfortable accessing healthcare services. However, over a third still feel that they will be overburdening NHS services if they access appointments, and subsequently don't feel comfortable doing this. In turn people have felt uncomfortable contacting services to make an appointment:

Concerns about
overburdening
the NHS by
making
appointments

- *“Understand contact 111 first if A&E required and to phone GP for other issues.”*
- *“GP is quiet the time wasters are no longer there.”*
- *“Unable to get a GP appointment and given advice, on the phone, by a receptionist at the practice.”*
- *“At 83 I have a number of mobility and health problems that make me extremely vulnerable to Covid-19. My carer husband is 87 with a pacemaker and both of us believe it right to accept any appointments and use healthcare services when and as necessary to avoid any medical problems worsening and overburdening the hospital.”*
- *“Generally keeping away from healthcare services due to risk of Covid transmission.”*

Opinions of video or phone appointments

Since our survey commenced there has been an increase in the number of residents who have fed back that they now receive their GP appointments by telephone or video call. The majority of respondents stated they were happy with video or phone appointments continuing in the future for certain appointments. This is a sentiment that has remained throughout the pandemic, and some comments relating to this can be found below. People praise the convenience and accessibility:



- *"I don't have to pay for parking and waste my time waiting in a public space with other people."*
- *"GP able to see more patients."*
- *"Reduces risk of infection to all involved, more convenient, fits in with life, don't have to travel and pay for parking, no waiting."*
- *"Don't mind phone for initial assessment, but do not like this for the actual appointment. I have personally experienced things being missed due to phone consultation, as have members of my family to their detriment."*

However, comments relating to this clearly reflect reservations regarding this for some appointments, particularly in relation to the type of appointment and how appropriate it is to have this over phone or video:

- *"Hospital and dental need to be hands on. GP service fine remotely for ongoing conditions."*
- *"Some form of communication is better than no appointment at all, however, not all medical reasons are appropriately assessed/triaged/diagnosed or treated."*

Have you had any face-to-face medical appointments over the last few months?

As time has progressed more people have been accessing healthcare appointments face-to-face, and are now being accessed more regularly than earlier in the pandemic. From October we included an additional question in our survey in relation to face-to-face medical appointments, so that respondents could feedback in more detail their experiences regarding them. Below are some comments received in relation to face-to-face appointments. Although some respondents reported some nervousness, face-to-face

appointments were generally well received. People reflected that they had felt safe at their appointment and were confident that health and safety measures had been put in place:



**Feeling safe at
face-to-face
medical
appointments**

- *“Had to wait longer than usual to get an appointment, and “pass” a triage call, but fine when actually attending.”*
- *“It was difficult as people wore masks and I am hard of hearing and usually rely on lip reading.”*
- *“Acceptable as my husband always accompanies me to listen and if necessary relay what is said to me and sometimes speak on my behalf. We are used to keeping to the Covid-19 regulations.”*
- *“It was fine. I was the only person in the GP surgery, which felt strange as City Walls is a big practice.”*
- *“A little scary going into the hospital where there didn't seem to be much social distancing in certain areas, e.g. the foyer.”*
- *“Excellent. Full PPE worn by GP, but just a mask by practice nurse.”*

Have you had any issues with prescriptions or medication?

We asked people to share with us if they had had any issues with prescriptions or receiving medication. Two-thirds of respondents from October to March 2021 had not had any issues, which reflects findings from earlier in the pandemic. Comments relating to prescriptions included:



**Majority of
people had no
issues with
prescriptions
and medication**

- *“Non-delivery of prescriptions and delivery of the wrong medicines. Often requested over the phone, the items delivered do not match those requested.”*
- *“Very early on into the pandemic there was some difficulty getting my prescription - supply issue not delivery/pick up.”*

Have you experienced any disruptions to your hospital-based treatment, outpatients appointments, or operations?

From October we asked a standalone question in relation to hospital-based treatment. In our first report one-third of respondents had reported changes to their hospital-based services. Around two-thirds saying they had experienced some disruption, primarily relating to cancelled or delayed appointments. As this question is now standalone, we have received more detail in relation to their experiences, which is reflected in the comments below. Generally, people reported issues with appointments being cancelled and delays in them being rearranged:



Disruptions to hospital-based treatment including cancellations and waits

- *“Cancelled and rescheduled as phone appointment.”*
- *“Mammogram delayed but did happen eventually without issue.”*
- *“I was told that I needed a micro-camera test for my small bowel but that this was not being performed at this time. Instead I was to be reviewed by the GP every 3 months.”*
- *“I am in remission from gynae cancer. My follow-up appointment was cancelled for 5 1/2 months. Luckily my cancer was caught early and although I'm an at-risk category (as the kind of cancer I had normally occurs in much older women) I felt this was too long to wait for a follow-up appointment and it caused me a great deal of stress. I rang the hospital to ask when the cancellation appointment would be re-arranged. If I was told a worst-case scenario, that would have helped but I was told they didn't know when the appointment would be re-arranged. If I had had worrying symptoms however, I would have paid to go private. I know how much pressure the NHS is under. My cancer was caught early. It has been well televised how many, much more dire situations that cancer patients are experiencing right now. Far more life threatening than mine.”*
- *“Needed an echocardiogram. I had to phone the cardiac dept in hospital to chase it. It hadn't arrived from my GP. Rang GP who then sent for it again. 2 weeks later no sign of it. Rang hospital again. It was being triaged. Very stressful and indeed unnecessary for me to have to chase it.”*

How coronavirus has affected people's mental health

Similar to findings earlier in the pandemic, respondents from October to March 2021 report feeling sad about not being able to see family and friends and dealing with feelings of social isolation. As time has passed people are reporting struggling with the longevity of lockdown and a sense of feeling overwhelmed:



People feeling
overwhelmed by
continued national
lockdown
restrictions

- *“People are getting “cabin fever” through lack of social contact and not being able to go out. It has dramatically curtailed entertainment which is important to older people for their mental health.”*
- *“I have a young child and a baby. Not being able to see friends and family in a way that I normally would is starting to take its toll. The Christmas period just exacerbates that further.”*
- *“Isolation. Although I have the relief of a recent all clear result for an ongoing health condition, I live alone and isolation has made me feel very lonely at times. I sometimes feel lonely, but not to the point of deep depression, just a need to be with someone at times but it doesn't really impact my sense of wellbeing for a very long period of time.”*
- *“I feel very well supported by my family, friends and employer. I do feel however, that everyone is affected by the pandemic in some way - this means I sometimes feel overwhelmed and more easily than before.”*
- *“I help care for both my parents, have had to deal with all the medical needs and chasing of appointments and medications, staying overnight, releasing my mum etc, because we have no carer. With mum and dad both being at risk, we didn't feel it would be safe. Dad's dementia moved to advanced right at start of lockdown.”*

We asked people to tell us what would help them to maintain or improve their physical or mental wellbeing

Respondents are telling us about how they have turned to friends and family for support, the importance of exercise, and a need for good access to services and clear provision of information. These thoughts were also reflected in our initial findings. As the pandemic continued, a particular a desire to access space outdoors became prevalent, which may reflect the difference between being in lockdown during the summer and the winter months.



Seeking support from family and friends, and an increased desire for outside activity

- *“Having some kind of normality and being able to access support.”*
- *“Being able to meet my support group in a safe and socially distanced way.”*
- *“Return of indoor gym classes (moved outdoors today, but the cold causes asthma issues).”*
- *“Being able to go back safely to early morning swimming five days a week, the only real exercise I can get because of knee and back problems.”*
- *“I am reasonably happy with my physical and mental wellbeing. The only thing I have missed is face-to-face interaction with friends and family.”*
- *“Walking locally, video/telephone calls family and friends. Maintaining a positive attitude. Keeping busy.”*
- *“A walk every day, looking for the positive each day, talking to one person every day, using social media.”*
- *“Knowing more what’s going on, less last-minute decisions from the Government.”*

What are your current concerns about the future impact of the COVID-19 pandemic?

Between May and October 2020 people from Chester East told us that they were concerned about the mental and physical health of their friends and family. This was similar throughout the winter months where people told us they were concerned that they couldn’t visit or care for their friends for family members.



Concern about mental/physical health of friends and family

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Tartan Rug

This is the Tartan Rug for the Chester East Care Community (Public Health England, 2019). The health profile or ‘tartan rug’ shows how each ward within Cheshire West and Chester compares with all other wards in England across a range of health indicators and outcomes. Although the rug only includes a limited number of indicators, it does provide an overview of local health need and a tool to aid discussions about local priorities. Healthwatch Cheshire used this resource when planning our activity.

Produced by Cheshire West and Chester, Insight and Intelligence team. Version 2 : October 2019

	Period	Value type	Cheshire East
1 Total population (MYE 2018)	2018	Number	48,983
2 BME population (Census 2011)	2011	%	7.9
3 Not proficient in English (Census 2011)	2011	%	0.5
4 Population under 16 (MYE 2018)	2018	Number	9,184
5 Population aged 65 and over (MYE 2018)	2018	Number	10,267
6 Income deprivation - English Indices of Deprivation 2015 (%)	2015	%	8.8
7 Child Poverty - English Indices of Deprivation 2015 (%)	2015	%	9.7
8 Child Development at age 5 (%)	2013-2014	%	66.4
9 GCSE Achievement (5A*-C inc. Eng & Maths) (%)	2013-2014	%	64.2
10 Unemployment (%)	2018	%	1.4
11 Long Term Unemployment (Rate/1,000 working age population)	2018	%	0.9
12 Older people living alone (%)	2011	%	33.4
13 Older People in Deprivation - English Indices of Deprivation 2015 (%)	2015	%	12.1
14 Emergency hospital admissions for all causes (SAR)	2011/12-2015/16	SAR	97.1
15 Emergency hospital admissions for CHD (SAR)	2011/12-2015/16	SAR	109.3
16 Emergency hospital admissions for stroke (SAR)	2011/12-2015/16	SAR	82.8
17 Emergency hospital admissions for Myocardial Infarction (heart attack) (SAR)	2011/12-2015/16	SAR	96.5
18 Emergency hospital admissions for Chronic Obstructive Pulmonary Disease (COPD) (SAR)	2011/12-2015/16	SAR	77.5
19 Incidence of all cancer (SIR / per 100)	2011-2015	SIR / per 100	102.5
20 Incidence of breast cancer (SIR / per 100)	2011-2015	SIR / per 100	113.4
21 Incidence of colorectal cancer (SIR / per 100)	2011-2015	SIR / per 100	118.7
22 Incidence of lung cancer (SIR / per 100)	2011-2015	SIR / per 100	95.0
23 Incidence of prostate cancer (SIR / per 100)	2011-2015	SIR / per 100	111.6
24 Hospital stays for self harm (SAR)	2011/12-2015/16	SAR	93.2
25 Hospital stays for alcohol related harm (Narrow definition) (SAR)	2011/12-2015/16	SAR	91.8
26 Hospital stays for alcohol related harm (Broad definition) (SAR)	2011/12-2015/16	SAR	86.9
27 Emergency hospital admissions for hip fracture in 65+ (SAR)	2011/12-2015/16	SAR	100.6
28 Limiting long-term illness or disability (%)	2011	%	17.0
29 Deaths from all causes, all ages (SMR)	2011-2015	SMR	95.8
30 Deaths from all causes, under 75 years (SMR)	2011-2015	SMR	88.0
31 Deaths from all cancer, all ages (SMR)	2011-2015	SMR	94.3
32 Deaths from all cancer, under 75 years (SMR)	2011-2015	SMR	91.2
33 Deaths from circulatory disease, all ages (SMR)	2011-2015	SMR	87.4
34 Deaths from circulatory disease, under 75 years (SMR)	2011-2015	SMR	71.7
35 Deaths from coronary heart disease, all ages (SMR)	2011-2015	SMR	86.5
36 Deaths from stroke, all ages, all persons (SMR)	2011-2015	SMR	91.6
37 Deaths from respiratory diseases, all ages, all persons (SMR)	2011-2015	SMR	94.9
38 Deaths from causes considered preventable (SMR)	2011-2015	SMR	95.4

Abbreviations:
SAR = Standardised Admissions Ratio
SIR = Standardised Incidence Ratio
SMR = Standardised Mortality Ratio

Ratios are calculated by dividing the observed total number of admissions, new cases or deaths in the area by the expected number and multiplying by 100. Expected numbers are calculated by applying age-sex specific death rates for England in 2011-15 to each area's population.

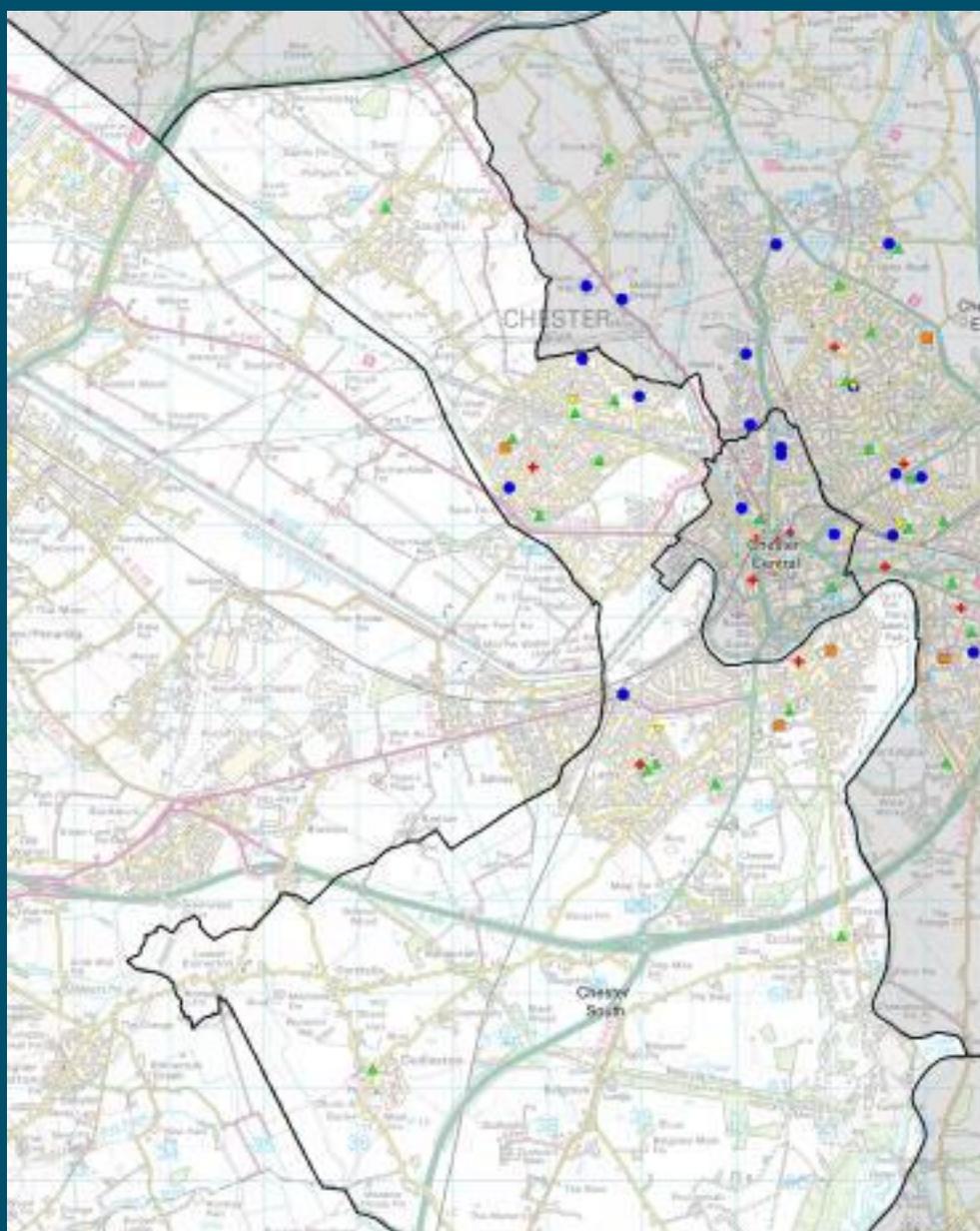
Significantly better than England

Not significantly different

Significantly worse than England

Public Views on Health and Care during the Coronavirus (COVID-19) Pandemic in Chester South

October 2020 - March 2021



Introduction

Between 16th October 2020 and 23rd March 2021, Healthwatch Cheshire received a further 349 responses to our Health, Care and Wellbeing survey from local people across Cheshire West and Chester. Our initial reports based upon our survey findings were published earlier in the year, and covered the period between May 2020 and 15th October 2020. Those reports are available to read on our website (www.healthwatchcwac.org.uk). This follow-up report covers the period up until the anniversary of the first lockdown announcement, and provides further insight into how people have coped during the pandemic, changes that may have occurred in relation to accessing services, and any concerns people have about the current situation and the future.



In total, since our survey began in May 2020, we have received feedback from 89 residents of Chester South to our Health, Care and Wellbeing survey. This report covers the 27 responses specifically from October to March 2021.

How do you feel about accessing services?

Since the findings of our first report covering May to October 2020, from October to March 2021, half of those in Chester South who have responded say they feel fine accessing services at this time. However, there is still some concern and hesitancy about overburdening health services and feeling uncomfortable about attending appointments.

Some people
are
uncomfortable
attending
appointments

- *“I have not called the doctors for things that I normally would do as the pandemic has made me feel that I should only call-in exceptional circumstances.”*
- *“I feel as though I am a nuisance and inconvenience when trying to access appointments.”*
- *“Feel reluctant to access GP due to pressure they are under locally. Concerned about transmission of Covid whilst at any healthcare setting.”*
- *“I have breast cancer so no choice! Lots done by telephone.”*

Opinions of video or phone appointments

A larger number of respondents have now experienced a healthcare appointment by video or phone call as the pandemic has progressed. When we asked people to tell us more about their experience, in relation to GP and hospital appointments a small majority of people would be happy continuing to have GP and hospital appointments via this method dependent upon what the appointment was for. It is fair to note that there are still a significant number of people who don't like appointments being delivered in this way. Most people feel that it is important for a healthcare practitioner to see them face-to-face for follow-up appointments, for physical exams, or treatment such as physio:



Mixed
feelings about
video and
phone
appointments

- *“Some things can't be explained over the phone.”*
- *“I feel there are certain things that can be discussed easily over video call. However, there are physical things that need to be shown at times as a video call just doesn't cut it.”*
- *“Physio appointments over the phone are a waste of time. I also need gynae treatment not a phone call.”*
- *“Prefer video calls, rather than phone calls. Like to see the Doctor or other person.”*
- *“Needs must. We need to access healthcare in the safest most useful way depending on situation.”*
- *“I am hard of hearing and miss some information given to me.”*

Have you had any face-to-face medical appointments over the last few months?

As time has progressed more people have been accessing healthcare appointments face-to-face, and are now being accessed more regularly than earlier in the pandemic (over two-thirds of respondents to this question in Chester South have had a face-to-face appointment). In light of this we asked people to share with us their experiences of this. Most people told us about their experience of face-to-face appointments at hospital, and were generally positive about their experience:



Positivity
about face-
to-face
hospital
appointments

- *“I was required to attend A&E with a severely sprained ankle. It was very quiet and I was seen straight away (in and out within 50 mins) which is amazing for A&E. I had to wear a mask but this experience was actually a positive one.”*
- *“Surgery for abscess on appendix and handled very well. Time in ICU excellent. Time in General ward pretty fine. Staff in both cases first class.”*
- *“A& E followed by surgery. Efficient and good care.”*
- *“Brilliant! Breast Care unit at Countess of Chester Hospital is exemplary.”*
- *“I have only had appointments with cancer care nurses. This is mostly a box ticking exercise. I haven't seen a doctor since last March despite having stage 4 cancer.”*

Have you had any issues with prescriptions or medication?

From October, we asked a standalone question in relation to prescriptions as over the summer months people were frequently telling us about issues they had accessing prescriptions and medication. Almost 85% of respondents from October to March 2021 reported no issues with this. We did ask people to tell us about their experiences, both positive and negative and although no issues have been commented on in the first part of 2021, there were a few issues before Christmas with regards to provision:

Some issues with prescriptions and medication before the New Year

- *“Prescriptions for me have actually been much easier to get as I have had my medication review over the phone the day I have called and they have simply sent my prescription to the pharmacy the same day.”*
- *“I just email the surgery and they send to the pharmacy.”*
- *“I received my prescription but felt uncomfortable about the way I had to collect it.”*
- *“Over the counter pain relief often out of stock.”*

Have you experienced any disruptions to your hospital-based treatment, outpatients appointments, or operations?

Around half of all respondents from October to March 2021 in Chester South had some experience of issues when accessing hospital services. Similarly to earlier in the pandemic, responses ranged from delayed or cancelled appointments to poor communication. However, positive comments in relation to hospital services not being impacted at all were also received:

Disruptions to hospital-based treatment including delays and cancellations

- *“No delays at all. I have had follow up care for my sprained ankle and a physiotherapist was able to send me advice and exercises within a day of calling. This usually doesn't happen in normal times.”*
- *“Follow-up screening at COCH breast care service was not delayed efficient and safe.”*
- *“I have not had my usual hospital appointment or had any correspondence in regard to when it will happen.”*
- *“Delayed due to Covid-19 at COCH. Had telephone appointment with Consultant eventually.”*
- *“I am still waiting to hear about a treatment I need.”*

How Coronavirus has affected people's mental health

We asked people to tell us about the impact that the pandemic has had upon their mental health. There is a general sentiment that people are struggling with the length of lockdown, particularly through the winter months, and people missing family:



Frustration
with continued
national
lockdown
restrictions

- *“This lockdown in the winter months has been a challenge.”*
- *“Up and down depends on various things -the weather - seeing someone -having telephone contact with family.”*
- *“Was doing ok in self but then had (non-Covid related) unexpected death of mother and shortly after a close friend.”*
- *“I am coping with the trauma of Covid and Cancer... as well as can be expected. Christmas is an emotional time. Missing family more this season.”*
- *“I have felt quite isolated and agitated over this year. There have been many challenges and it seems to have delayed everything in my life by a year which is tough on my mental health as I have been looking to move into my own property for a long time now.”*
- *“My mental health has been fine through the pandemic but my son with autism has found it very difficult.”*
- *“Making the most of neighbours and friends passing by or on the telephone.”*
- *“Kept myself busy. Have had support from my sister, who is my 'bubble', with shopping.”*

We asked people to tell us what would help them to maintain or improve their physical or mental wellbeing

We asked people to tell us what would help them to maintain or improve their physical or mental wellbeing. Although exercising and being outdoors have consistently featured as top ways for people to improve their physical and mental wellbeing during the pandemic, this has become even more prevalent as time has gone on, particularly through the winter months, and in particular being able to access outdoor spaces:

People wanting to access outdoor spaces for exercise

- *“Encouragement and ability to go for walks. Free parking by CWaC and other locations (Tatton Park).”*
- *“Stop locking down sports facilities.”*
- *“Being able to go out in the fresh air more and meeting friends. Not possible at the moment.”*
- *“More freedom of movement.”*

People also talked about the importance of hobbies for their mental wellbeing:

- *“Wellbeing days / Mindfulness sessions put on by work.”*
- *“Keeping myself busy, baking, doing jigsaws.”*
- *“I already play golf and have an exercise bike to keep physically fit and I don't suffer from a lack of mental wellbeing.”*

What are your current concerns about the future impact of the Covid-19 pandemic?

A common thread throughout the pandemic has been how much people are missing family and friends. This is still a concern for people as they look forward, as well as worrying about the physical and mental health of friends and family. People are also mindful of their own physical and mental health and how this will be moving forward. Additionally, although people are still concerned about social distancing rules not being observed by others, there is a great mention of concerns about using public transport going forward.

Concerns over family and friends, social distancing and public

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		Period	Value type	Chester South
1	Total population (MYE 2018)	2018	Number	33,115
2	BME population (Census 2011)	2011	%	7.1
3	Not proficient in English (Census 2011)	2011	%	0.5
4	Population under 16 (MYE 2018)	2018	Number	6,321
5	Population aged 65 and over (MYE 2018)	2018	Number	6,910
6	Income deprivation - English Indices of Deprivation 2015 (%)	2015	%	16.4
7	Child Poverty - English Indices of Deprivation 2015 (%)	2015	%	23.0
8	Child Development at age 5 (%)	2013-2014	%	55.3
9	GCSE Achievement (5A*-C inc. Eng & Maths) (%)	2013-2014	%	53.5
10	Unemployment (%)	2018	%	2.2
11	Long Term Unemployment (Rate/1,000 working age population)	2018	%	1.5
12	Older people living alone (%)	2011	%	31.6
13	Older People in Deprivation - English Indices of Deprivation 2015 (%)	2015	%	15.9
14	Emergency hospital admissions for all causes (SAR)	2011/12-2015/16	SAR	114.6
15	Emergency hospital admissions for CHD (SAR)	2011/12-2015/16	SAR	117.2
16	Emergency hospital admissions for stroke (SAR)	2011/12-2015/16	SAR	85.0
17	Emergency hospital admissions for Myocardial infarction (heart attack) (SAR)	2011/12-2015/16	SAR	96.4
18	Emergency hospital admissions for Chronic Obstructive Pulmonary Disease (COPD) (SAR)	2011/12-2015/16	SAR	110.1
19	Incidence of all cancer (SIR / per 100)	2011-2015	SIR / per 100	108.2
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23	Incidence of prostate cancer (SIR / per 100)	2011-2015	SIR / per 100	104.8
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26	Hospital stays for alcohol related harm (Broad definition) (SAR)	2011/12-2015/16	SAR	96.7
27	Emergency hospital admissions for hip fracture in 65+ (SAR)	2011/12-2015/16	SAR	123.1
28	Limiting long-term illness or disability (%)	2011	%	19.4
29	Deaths from all causes, all ages (SMR)	2011-2015	SMR	103.8
30	Deaths from all causes, under 75 years (SMR)	2011-2015	SMR	103.9
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34	Deaths from circulatory disease, under 75 years (SMR)	2011-2015	SMR	98.1
35	Deaths from coronary heart disease, all ages (SMR)	2011-2015	SMR	99.5
36	Deaths from stroke, all ages, all persons (SMR)	2011-2015	SMR	92.0
37	Deaths from respiratory diseases, all ages, all persons (SMR)	2011-2015	SMR	113.6
38	Deaths from causes considered preventable (SMR)	2011-2015	SMR	110.5

Abbreviations:

SAR = Standardised Admissions Ratio

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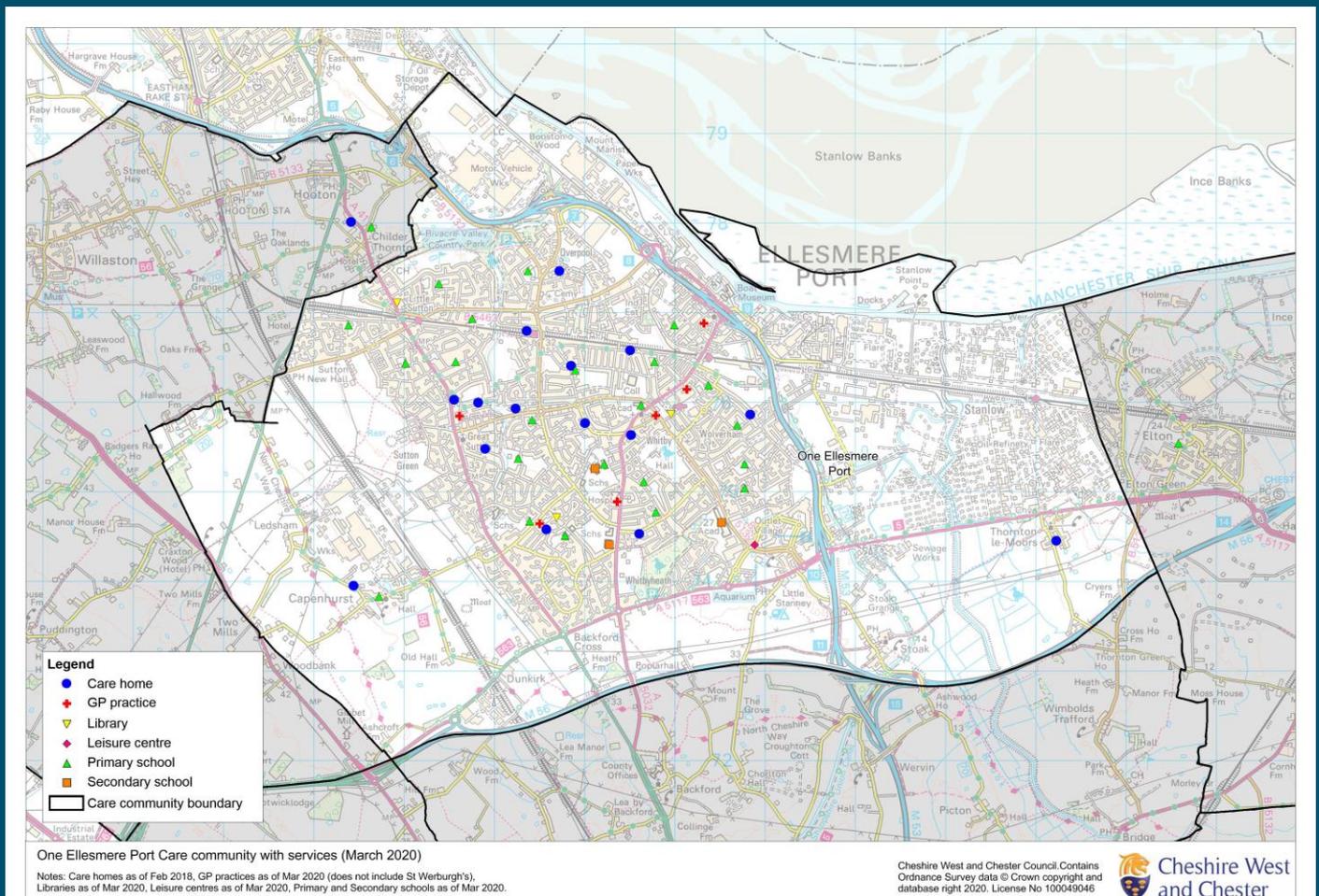
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Public Views on Health and Care during the Coronavirus (COVID-19) Pandemic in Ellesmere Port

October 2020 - March 2021



Introduction

Between 16th October 2020 and 23rd March 2021, Healthwatch Cheshire received a further 349 responses to our Health, Care and Wellbeing survey from local people across Cheshire West and Chester. Our initial reports based upon our survey findings were published earlier in the year, and covered the period between May 2020 and 15th October 2020. Those reports are available to read on our website (www.healthwatchcwac.org.uk). This follow-up report covers the period up until the anniversary of the first lockdown announcement, and provides further insight into how people have coped during the pandemic, changes that may have occurred in relation to accessing services, and any concerns people have about the current situation and the future.



In total, since our survey began in May 2020, we have received feedback from 189 residents of Ellesmere Port to our Health, Care and Wellbeing survey. This report covers the 51 responses specifically from October to March 2021.

How do you feel about accessing services?

Almost half of all respondents from October 2020 onwards stated that they feel comfortable accessing healthcare appointments, which is a significant improvement on the way people felt about accessing services earlier in the pandemic. However, over one-third still feel that they would be overburdening NHS services by accessing appointments, and subsequently don't feel comfortable doing this. We asked people to tell us more about why they have answered in this way and as a result, received a mixed response:

People feeling more comfortable accessing appointments, but still a perception of not wanting to overburden the NHS

- *“Don't want to bother NHS services, when they have so much more important things on their hands.”*
- *“Terrified I will be wasting their time. Also, I am really scared of contracting COVID.”*
- *“My doctor has had a triage system for appointments even before Covid, so nothing has changed in this aspect.”*
- *“I feel quite comfortable going to my GP or hospital if I need to.”*
- *“I trust the NHS to take all necessary precautions.”*
- *“Loving the easy access to phone appointments. Just not at all at ease travelling to and attending hospital appointments even though I am recovering from cancer GP largely inaccessible. Mental Health Care long wait for telephone call and then suitable services not offered.”*
- *“I have attended various appointments at COCH and felt safe.”*

Opinions of video or phone appointments

Around 70% of Ellesmere Port respondents have now experienced a video or phone appointment since October 2020. Three-quarters of whom said that they prefer, or would be happy with appointments continuing in this way for GP appointments. This number was slightly lower for hospital appointments, which is similar to findings from earlier on in the pandemic. There is support for the convenience of appointments being conducted in this way, though still a feeling that there is a limit to what can be achieved unless an appointment is face-to-face:



People are happy to use video or phone appointments depending what it is for, due to convenience

- *“It means I’m not having to be away from work for half a day, the GP in my practice seem to do this well and I’m not trying to get an appointment and waiting days to speak with a clinician, less chance of picking up viral illness’s colds, flu, COVID, from sitting in the waiting room (pre-COVID). Better for environment as I’m not making trips to surgery, hospital etc.”*
- *“I had a lump on my boob, very embarrassing and degrading having to send and take a picture to send to GP, then had to push to be seen for reassurance - not practical in these circumstances.”*
- *“It was totally reliant on my description of the problem, the GP was working from home so couldn’t make appointment to see me anyway, so prescribed me stronger pain killers and then referred me for telephone consult with physio.”*
- *“GP waiting rooms are not healthy places. I am happy with phone appointments which just renew my medication - but obviously sometimes you need a physical examination.”*
- *“I’ve had issues with doctors not phoning me back when promised... Not being able to even get a phone call for days in response and an occasion where I felt I couldn’t get my health issue sorted over the phone. It needed a face-to-face.”*
- *“Sometimes it is better if they can see you face-to-face as some people are not good at explaining their problems via the telephone, also difficult for the hard of hearing or the elderly.”*
- *“It all depends on the type of appointment, obviously you can’t have a thorough examination, but you could say talk about depression or something along those lines.”*
- *“Remote appointments aren’t working for everything; it doesn’t feel so effective and conclusive.”*
- *“Less people at surgery is better for patients and doctors and receptionists.”*

Have you had any face-to-face medical appointments over the last few months?

As time has progressed more people have been accessing healthcare appointments face-to-face, and these are now being accessed more regularly than earlier in the pandemic. 60% of Ellesmere Port respondents since October 2020 have had a face-to-face appointment and the majority of these respondents provided us with some commentary regarding their experiences. People told us about their experiences with their doctor's surgery and with hospital services, with an overall sentiment that they felt safe and comfortable. Respondents used language such as "I felt safe", and "reassuring". In particular, respondents talked about the safety measures and precautions that had been put in place. Of the small number of negative comments, these generally related to poor communication which heightened anxiety:

People
feeling safe
during face-
to-face
appointments

- *"Started as a booked phone appointment but 15 minutes before the call the Doctor called and asked me to go in, the surgery was empty the doctor came to the door took me to the room and did a full and complete examination I left feeling I had been dealt with properly and promptly."*
- *"Brilliant. The procedures in place did give me confidence and everything was calm and reassuring."*
- *"In the hospital where they had the necessary equipment for tests and they were very thorough."*
- *"Doctors, nurses and healthcare assistance were all clear on what I needed to do... e.g. use a specific room, standing instead of sitting where appropriate. Happy to continue doing this."*
- *"It was comfortable and assuring."*
- *"It was fine, no change in service once there, appointment was delayed due to Covid, area visited very restricted and following Covid policy."*
- *"The staff were very particular about taking extra precautions to keep both themselves and the patient safe."*
- *"I feel that staff are incredibly drained and I would think this is because of all the changes that needed to be made to practice and written policies as well as their normal duties, with an underlying worry of catching the virus at work. They are doing an incredible job."*
- *"Overwhelming, I arrived at the hospital and began to panic. The lady on the reception desk was not helpful or understanding at all, I felt like I couldn't breathe and became very panicked."*
- *"Currently in hospital with broken hip communication Countess of Chester hospital is lacking."*
- *"An appointment with a nurse who kept touching her mask then touching me. It was at a practice where the receptionist pulled down her mask every time, she spoke to someone. Not comfortable but would have been fine pre-Covid."*

Have you had any issues with prescriptions or medication?

From October 2020, we asked a standalone question in relation to prescriptions as over the summer months people were frequently telling us about issues they had accessing prescriptions and medication. Almost two-thirds of respondents did not report any issues with medication and prescriptions. However, the majority of comments regarding prescriptions and medication were left by those who had experienced some issues. Many comments throughout the period of October to March 2021 relate to poor communication, timeliness and issues with procedures:



- *“Withdrawal of certain medications and having to chase around looking for a pharmacy that still had some in stock, and only then being prescribed an alternative.”*
- *“Not wearing mask when delivering prescription, extremely vulnerable.”*
- *“Limited quantity on repeat prescriptions, have to order more often.”*
- *“The queues are so long, but there were never so many people at the pharmacy before. Also have neighbours who live alone who had their deliveries stopped which has caused stress.”*
- *“Prescriptions being ordered (and delivered by pharmacy) but I didn't order them, and neither my GP nor the pharmacy say that they placed the order.”*
- *“Miscommunication and misinformation has led to prescriptions not being issued despite being told they were, delays in locum GPs signing them off. Each time I've been left without vital medication for up to 3 days despite requesting in plenty of time. It has been difficult to speak with the correct medically qualified person about the issues with the delayed or missing prescriptions.”*

A number of respondents did tell us about their positive experiences:

- *“The practice and community pharmacy have been as always, I request my prescription and they supply, no problems, and the Doctor calls every year to call me for my bloods bp and a review to see how I am.”*
- *“I used to have terrible problems with my prescriptions, but since I moved to a Pharmacy in Rock Ferry I don't have any issues. They have delivered my prescriptions as well, because I am working from home and am clinically extremely vulnerable.”*
- *“Order online, pharmacy phones me to let me know it's ready.”*

Have you experienced any disruptions to your hospital-based treatment, outpatients appointments, or operations?

Between May and October 2020 over half of Ellesmere Port respondents had told us about changes to their hospital-based appointments, including being cancelled or delayed. We asked people to tell us more about their experiences, which related to cancelled appointments, delays and poor communication:



Disruptions to
hospital-based
treatment
including
cancellations
and waits

- *“I am still waiting for an eye appointment, cancelled in April, and an orthopaedic appointment, referred in September. Fed up with pain and difficulty with activities of living.”*
- *“Reasonably well - I was informed about the cancellation and eventually, (after it became obvious that the pandemic wasn't going away), the hospital wrote to my GP and myself, and I had a follow-up telephone appointment with my GP.”*
- *“Developed complications from MFU surgery which I had in early March. Was refused aftercare by the Countess of Chester Hospital. Left to fend for myself.”*
- *“Removal of contraceptive implant was delayed and then cancelled by Sexual Health Service. Still waiting. Over a year now. Service wants people to wait in for eleven hours for a call back. This is unacceptable and unreasonable.”*
- *“Appointment regarding torn retina initially delayed. Seen several months later and date for surgery given. I took a week's holiday from work to self-isolate. After six days my operation was cancelled because the surgeon was self-isolating. A lady from the appointments line spoke to me and explained and apologised. Still waiting for a new date.”*
- *“Eye appointment at Leighton cancelled in April, still not rearranged.”*
- *“I should have been called for a mammogram but this has not happened.”*
- *“I was due to have a follow-up appointment at the hospital in April but I have still not heard anything about this, I can only assume they are still only carrying out emergency appointments.”*
- *“Still waiting on an MRI Scan.”*
- *“Generally, longer waits all round.”*

How Coronavirus has affected people's mental health

We asked people to tell us about the impact that the pandemic has had upon their mental health. People talk about how they have struggled more as time has gone on and the impact of the longevity of the pandemic. In particular, comments relate to missing friends and family and not being able to give and receive support, concerns about access to services, and increasingly feeling self-isolated:



People missing
their family and
friends and
feeling
increasingly
isolated

- *"I feel saddened that routine health checks were abandoned without any communication from GPs or hospital and that this leads to health complications ahead."*
- *"Very little support for anyone suffering from mental health."*
- *"Fear is out of the ball park fear knowing your family are passing away without you, unable to help families through this difficult time."*
- *"Making me aware how special my family mean to me and to spend many happy times with them."*
- *"Watching family and friends with so much anxiety."*
- *"The main issue is the ability to meet and talk to friends. I am very restricted by my daughter's agoraphobia and anxiety, and the restrictions have reduced my contact with people even more."*
- *"Dislike social isolation."*
- *"As I have said previously; I just wish the Covidiot's would behave themselves and we could be free and back into what would be the normal, as things will not be the same. I have become used to living in this third Lockdown and think it will be difficult to change back to the freedom."*
- *"I am becoming reclusive."*
- *"My children are not able to stay with me for reasons beyond our control at the moment. My mental health has suffered from not only this but having to stay at home 24/7... I was just building my confidence going down town and sitting in the cafe with my little dog who now supports me mentally... then the lockdown happened in March last year... so that's knocked my confidence and caused my anxiety to get out of control... I don't drink alcohol so don't go to pubs to meet people... I just don't know how to get beyond this!"*

We asked people to tell us what would help them to maintain or improve their physical or mental wellbeing.

We asked people to tell us what would help them to maintain or improve their physical or mental wellbeing. Exercise is still playing a huge role in people's mental and physical wellbeing and the importance of re-opening the gyms and getting outside. Social interaction whilst exercising also really lifts people's spirits. People talked about missing being able to travel freely and that travelling/holidays would be good for their wellbeing:

People
valuing
exercise
and social
interaction

- *"I have a caravan in Wales, we as a family usually go every Friday until Sunday afternoon. We go for walks on the beach, this is what makes me feel good. I really miss that."*
- *"Gentle exercise which in the summer I did but I am struggling to find the will in winter when it's cold."*
- *"Opening gyms - these have such a prominent effect on some people's physical and mental state. The issue is that when gyms reopen, not only have people missed out in the meantime, but they have to spend time and invest in catching up with their physical and mental progress."*

What are your current concerns about the future impact of the COVID-19 pandemic?

We asked people to tell us if they had any further concerns when thinking about the future impact of the pandemic. Since October 2020, people's concerns cover a broader range than they did earlier on in the pandemic. As well as still being concerned about others not observing social distancing and worrying about their health and the health of others, people are also talking more about anxieties relating to work and Covid at work, as well as education concerns and money and the economy:

Concerns
growing
about work,
education
and money

- *"Stay positive. Make sure you get out and exercise. Laugh at least once a day."*
- *"Going for walks."*
- *"Walks and trips out for a coffee or shops with the daughter."*
- *"Exercise, church, friends."*
- *"For things to get back to usual and be free to go about my hobbies and meetings friends."*

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Tartan Rug

This is the Tartan Rug for the Ellesmere Port Care Community (Public Health England, 2019). The health profile or ‘tartan rug’ shows how each ward within Cheshire West and Chester compares with all other wards in England across a range of health indicators and outcomes. Although the rug only includes a limited number of indicators, it does provide an overview of local health need and a tool to aid discussions about local priorities. Healthwatch Cheshire used this resource when planning our activity.

Produced by Cheshire West and Chester, Insight and Intelligence team. Version 2 : October 2019

	Period	Value type	One Ellesmere Port
1 Total population (MYE 2018)	2018	Number	61,756
2 BME population (Census 2011)	2011	%	4.8
3 Not proficient in English (Census 2011)	2011	%	0.4
4 Population under 16 (MYE 2018)	2018	Number	11,773
5 Population aged 65 and over (MYE 2018)	2018	Number	11,818
6 Income deprivation - English Indices of Deprivation 2015 (%)	2015	%	16.1
7 Child Poverty - English Indices of Deprivation 2015 (%)	2015	%	21.6
8 Child Development at age 5 (%)	2013-2014	%	62.4
9 GCSE Achievement (5A*-C inc. Eng & Maths) (%)	2013-2014	%	47.5
10 Unemployment (%)	2018	%	2.4
11 Long Term Unemployment (Rate/1,000 working age population)	2018	%	3.2
12 Older people living alone (%)	2011	%	32.1
13 Older People in Deprivation - English Indices of Deprivation 2015 (%)	2015	%	16.3
14 Emergency hospital admissions for all causes (SAR)	2011/12-2015/16	SAR	121.2
15 Emergency hospital admissions for CHD (SAR)	2011/12-2015/16	SAR	137.9
16 Emergency hospital admissions for stroke (SAR)	2011/12-2015/16	SAR	88.7
17 Emergency hospital admissions for Myocardial Infarction (heart attack) (SAR)	2011/12-2015/16	SAR	111.1
18 Emergency hospital admissions for Chronic Obstructive Pulmonary Disease (COPD) (SAR)	2011/12-2015/16	SAR	110.2
19 Incidence of all cancer (SIR / per 100)	2011-2015	SIR / per 100	118.3
20 Incidence of breast cancer (SIR / per 100)	2011-2015	SIR / per 100	119.9
21 Incidence of colorectal cancer (SIR / per 100)	2011-2015	SIR / per 100	123.7
22 Incidence of lung cancer (SIR / per 100)	2011-2015	SIR / per 100	148.4
23 Incidence of prostate cancer (SIR / per 100)	2011-2015	SIR / per 100	103.2
24 Hospital stays for self harm (SAR)	2011/12-2015/16	SAR	116.0
25 Hospital stays for alcohol related harm (Narrow definition) (SAR)	2011/12-2015/16	SAR	107.2
26 Hospital stays for alcohol related harm (Broad definition) (SAR)	2011/12-2015/16	SAR	105.7
27 Emergency hospital admissions for hip fracture in 65+ (SAR)	2011/12-2015/16	SAR	95.7
28 Limiting long-term illness or disability (%)	2011	%	20.0
29 Deaths from all causes, all ages (SMR)	2011-2015	SMR	113.0
30 Deaths from all causes, under 75 years (SMR)	2011-2015	SMR	114.2
31 Deaths from all cancer, all ages (SMR)	2011-2015	SMR	123.1
32 Deaths from all cancer, under 75 years (SMR)	2011-2015	SMR	116.3
33 Deaths from circulatory disease, all ages (SMR)	2011-2015	SMR	97.7
34 Deaths from circulatory disease, under 75 years (SMR)	2011-2015	SMR	103.8
35 Deaths from coronary heart disease, all ages (SMR)	2011-2015	SMR	97.2
36 Deaths from stroke, all ages, all persons (SMR)	2011-2015	SMR	77.0
37 Deaths from respiratory diseases, all ages, all persons (SMR)	2011-2015	SMR	122.2
38 Deaths from causes considered preventable (SMR)	2011-2015	SMR	119.9

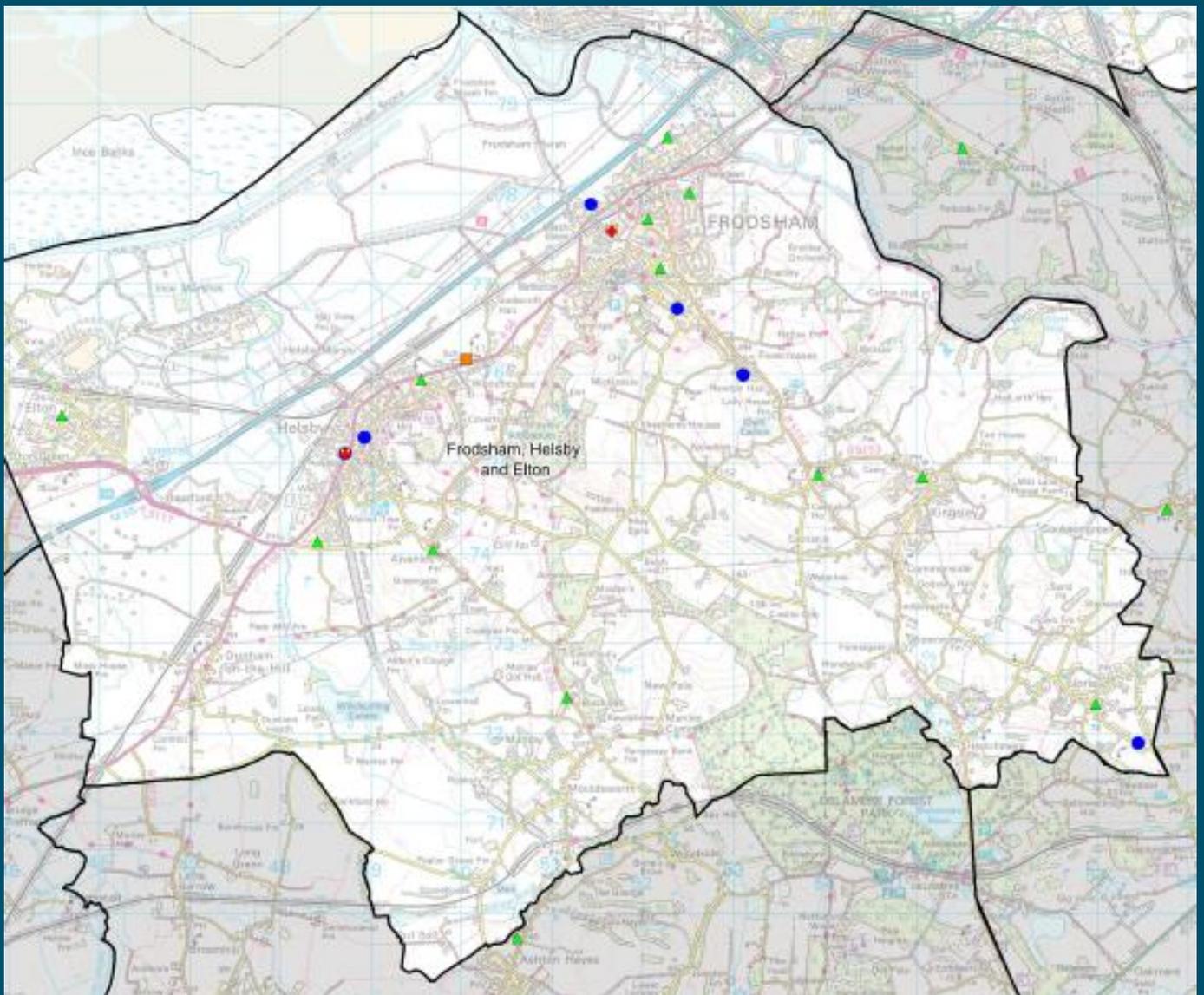
Abbreviations:
SAR = Standardised Admissions Ratio
SIR = Standardised Incidence Ratio
SMR = Standardised Mortality Ratio

Ratios are calculated by dividing the observed total number of admissions, new cases or deaths in the area by the expected number and multiplying by 100. Expected numbers are calculated by applying age-sex specific death rates for England in 2011-15 to each area's population.

Significantly better than England Not significantly different Significantly worse than England

Public Views on Health and Care during the Coronavirus (COVID-19) Pandemic in Frodsham, Helsby and Elton

October 2020 - March 2021



Introduction

Between 16th October 2020 and 23rd March 2021, Healthwatch Cheshire received a further 349 responses to our Health, Care and Wellbeing survey from local people across Cheshire West and Chester. Our initial reports based upon our survey findings were published earlier in the year, and covered the period between May 2020 and 15th October 2020. Those reports are available to read on our website (www.healthwatchcwac.org.uk). This follow-up report covers the period up until the anniversary of the first lockdown announcement, and provides further insight into how people have coped during the pandemic, changes that may have occurred in relation to accessing services, and any concerns people have about the current situation and the future.



In total, since our survey began in May 2020, we have received feedback from 122 residents of Frodsham, Helsby and Elton to our Health, Care and Wellbeing survey. This report covers the 42 responses specifically from October to March 2021.

How do you feel about accessing services?

Although a third of respondents since October have been comfortable accessing services, or have not needed to access services, of those that have, there is still a concern about overburdening NHS services, a sentiment that has run throughout the pandemic. People generally do not feel comfortable about accessing appointments:

People are
concerned
about
overburdening
the NHS

- *“Uncomfortable, as I do not want to take up time of GPs during this time. Still feeling nervous about being inside for things, would need reassurance of the COVID-19 restrictions being in place.”*
- *“I feel that the NHS has been more than stretched to its limits.”*
- *“Have diabetes, so feel safer at home.”*
- *“I occasionally need advice on my prescribed medications and wish there was an easier way to get that information rather than booking a phone call appointment and using up time that the doctor could spend on more important patients.”*
- *“Not sought treatment when unwell but eventually had to but no use over phone as chest infection, ended up going in but think delaying it made it worse.”*

Opinions of video or phone appointments

A larger number of respondents have now experienced a healthcare appointment by video or phone call as the pandemic has progressed, and in Frodsham, Helsby and Elton two-thirds of respondents since October have done so. Although a fifth of respondents since October do not like video and phone appointments, the remaining are happy for these to take place now and going forward, for particular appointments, in line with the general sentiment throughout the pandemic. People like the convenience of appointments this way, though conversely feel that face-to-face appointments are better for follow up and more in-depth appointments. We have asked people to share their experiences of these types of appointments with us:

People are
happy to use
video or phone
appointments
depending what
it is for

- *“It is sometimes unnecessary for an appointment if something can be discussed over the phone. Especially if people are working or at school.”*
- *“It’s easier to organise and attend phone appointments, plus I’d prefer not go to the hospital or GP practice during the pandemic unless it’s necessary.”*
- *“Hearing difficulties.”*
- *“The pandemic has forced changes, not all of them for the better. Assessing some conditions cannot be adequately made via a video/telephone appointment. It’s now a second-class service and not one I would want to see made permanent. For the elderly or those who don’t have access to a computer, a video call is not even a viable option.”*
- *“No point wasting time travelling and hanging around in waiting rooms if I can do it from my study. GP waiting rooms are always sources of infection because ill people go there. (I’m talking generally, not because of COVID-19.) I dislike face-to-face meetings of all kinds.”*
- *“It is harder for the clinician to pick up unspoken clues to a patient’s condition if not face-to-face. It can be harder for the patient to explain without visual clues.”*
- *“I’m autistic, communication is not easy by telephone for certain types of appointments. I’m also not currently able to access physical exercise classes after chemotherapy and am finding things a struggle. Also, the assumption seems to be that all patients are technically able and have the relevant equipment to carry out non face to face appointments easily.”*

Have you had any face-to-face medical appointments over the last few months?

As time has progressed more people have been accessing healthcare appointments face-to-face and in Frodsham, Helsby and Elton 65% of respondents since October have attended a face-to-face appointment. Although there were reports of some initial anxiety and feeling uncomfortable about attending, the majority of people felt that their appointments were handled very well and that health and safety guidelines were followed.

People felt
face-to-face
appointments
were handled
safely

- *“Felt as safe as you can be during this time. Social distancing in waiting area. Staff wore masks. Equipment disinfected between patients.”*
- *“Fine felt very safe and well organised.”*
- *“Still a bit intimidating and not reassuring!”*
- *“Uncomfortable - came in through side door doctors in full PPE - felt embarrassed.”*
- *“At the dentist. It was fine. All the staff including the dentist wore face masks.”*
- *“It was uncomfortable because I couldn't see their faces and also struggled to talk loud/clearly enough for them to hear me with a mask.”*
- *“I've been very happy with them and (in the main) happy with the COVID precautions that have been put in place.*
- *“There were many hurdles to get through before I was offered a face-to-face appointment. The appointment with my GP was fine when eventually it happened.”*

Have you had any issues with prescriptions or medication?

As a separate question we asked people to feed back to us if they have experienced any issues with prescriptions or receiving medication. Three-quarters of Frodsham, Helsby and Elton respondents since October have not had any issues with prescriptions or medication which reflects the general sentiment in Frodsham and Helsby over the past year. There were a small number of comments from people relating to issues, which included:

Most people
had no issues
with their
prescriptions or
medication

- *“I had to start getting prescriptions in the post which can only be requested via email or in person, but when I ask via email, they sometimes forget to send it and I have to chase it down.”*
- *“My meds went out of stock. I order through online pharmacy. GP said meds weren’t out of stock on phone despite pharmacy online saying there were supply issues and GP needed to prescribe alternative. Took a lot to sort out and still did not change prescription until something happened next month. Wasn’t really to do with Covid though... just all the phone stuff made it more difficult to sort.”*
- *“Change of dose for one repeat prescription medication was not discussed with me and I had several phone calls with receptionists and a pharmacist before it was agreed that the GP would review this. This was very frustrating.”*

Have you experienced any disruptions to your hospital-based treatment, outpatients appointments, or operations?

From October we asked a standalone question in relation to hospital-based treatment. We felt that this was important as more people will have been accessing services as time has passed. A third of Frodsham, Helsby and Elton respondents had experienced some disruption accessing hospital-based appointments. The majority of comments related to appointments either being cancelled or delayed (in particular not being informed of new dates):



People have
had
appointments
rescheduled or
cancelled

- *“Physio cancelled, eye appointment cancelled, nothing rescheduled.”*
- *“All physical exercise classes to help with recuperation after chemotherapy are currently online which is not suitable, so this is a problem.”*
- *“Abdominal scan postponed for several weeks at the start of first lockdown.”*
- *“I believe my surgery was delayed by about 6 months due to COVID-19 pandemic. Overall waiting time to surgery was from July 2019 to November 2020. So about 16 months.”*
- *“My operation has been delayed. I found out that routine operations had been cancelled from the media. I rang the hospital and they confirmed this they were working through their list telephoning patients but they hadn’t got to me yet.”*
- *“Hospital appointment postponed and next appointment as phone call.”*

How Coronavirus has affected people's mental health

We asked people to tell us about the impact that the pandemic has had on them. People have commented about the anxiety they feel as the pandemic and lockdown progressed and subsequent rule changes, resulting in a low mood. People are also struggling with the amount of time they haven't been able to see friends and family, leading to a general feeling of sadness and isolation. This is something that has appeared to get worse as the pandemic continued and people became more frustrated, as earlier people had thought they were getting on well.



People
feeling sad
and isolated

- *"The pandemic has affected everyone. The biggest impact on me is not being able to visit my parents and family. I have not hugged them since March 2020."*
- *"I have become more insular, less outgoing."*
- *"Slightly low mood due to inability to meet up with family members - some of whom are also struggling."*
- *"I am very anxious and was living at home, being in residential care staff can provide reassurance I feel safer."*
- *"Things constantly changing and out of my control."*
- *"Fear of making a mistake or of getting something wrong."*
- *"Because we've been moved down 2 tiers in the space of a week from tier 2 to tier 4 and being told to stay at home. I can't cope not seeing my family and close friends and my daughter is an only child and she is also lonely and down because she can't see family and friends."*

We asked people to tell us what would help them to maintain or improve their physical or mental wellbeing.

People told us exercise would help them to improve their wellbeing, including gyms and more informal exercise outdoors. In particular the need to be outdoors was emphasised, which may reflect the winter period of the lockdown and how people may have felt more limited by this, as from May to October people were telling us about how exercise was helping them. People also talked about how community support helped which has increased as the pandemic has continued, and also how being provided with clear information as the situation evolves helps with their mental wellbeing.

People have
found
community
support
helpful

- *“Having drop-in centres to be able to talk to someone other than family.”*
- *“Ability to connect and talk with a group.”*
- *“Being able to go to the gym and swimming pool but they’re closed again.”*
- *“Gyms being allowed to stay open for classes, etc.”*
- *“Regular walks (locally).”*
- *“Yoga/exercise classes.”*
- *“Where do I start? Elect a government who is actually interested in the general wellbeing of the nation.”*
- *“I have been able to be outdoors a lot in the garden or walking in the countryside.”*
- *“The gyms, golf courses and sports centres could remain open as I believe physical fitness is very important for mental health.”*
- *“Availability of small group classes outdoors free, e.g., Nordic walking, senior exercise, guided walking.”*

What are your current concerns about the future impact of the COVID-19 pandemic?

Being unable to visit family and friends and being concerned about their mental and physical wellbeing, has been more prevalent since October 2020 than earlier on in the pandemic. There are still concerns about other people not observing social distancing rules, but less so than previously, perhaps as people have become more adjusted to living through a pandemic. People are also concerned about their own mental and physical health going forward as restrictions begin to loosen.

People are still
concerned
about others
not observing
social
distancing

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		Period	Value type	Frodsham, Helsby and Elton
1	Total population (MYE 2018)	2018	Number	23,419
2	BME population (Census 2011)	2011	%	3.7
3	Not proficient in English (Census 2011)	2011	%	0.1
4	Population under 16 (MYE 2018)	2018	Number	3,876
5	Population aged 65 and over (MYE 2018)	2018	Number	5,921
6	Income deprivation - English Indices of Deprivation 2015 (%)	2015	%	8.0
7	Child Poverty - English Indices of Deprivation 2015 (%)	2015	%	10.3
8	Child Development at age 5 (%)	2013-2014	%	62.3
9	GCSE Achievement (5A*-C inc. Eng & Maths) (%)	2013-2014	%	70.4
10	Unemployment (%)	2018	%	0.9
11	Long Term Unemployment (Rate/1,000 working age population)	2018	%	1.0
12	Older people living alone (%)	2011	%	27.9
13	Older People in Deprivation - English Indices of Deprivation 2015 (%)	2015	%	9.7
14	Emergency hospital admissions for all causes (SAR)	2011/12-2015/16	SAR	83.8
15	Emergency hospital admissions for CHD (SAR)	2011/12-2015/16	SAR	91.0
16	Emergency hospital admissions for stroke (SAR)	2011/12-2015/16	SAR	79.5
17	Emergency hospital admissions for Myocardial Infarction (heart attack) (SAR)	2011/12-2015/16	SAR	88.7
18	Emergency hospital admissions for Chronic Obstructive Pulmonary Disease (COPD) (SAR)	2011/12-2015/16	SAR	48.8
19	Incidence of all cancer (SIR / per 100)	2011-2015	SIR / per 100	104.2
20	Incidence of breast cancer (SIR / per 100)	2011-2015	SIR / per 100	108.3
21	Incidence of colorectal cancer (SIR / per 100)	2011-2015	SIR / per 100	109.0
22	Incidence of lung cancer (SIR / per 100)	2011-2015	SIR / per 100	80.4
23	Incidence of prostate cancer (SIR / per 100)	2011-2015	SIR / per 100	108.6
24	Hospital stays for self harm (SAR)	2011/12-2015/16	SAR	73.4
25	Hospital stays for alcohol related harm (Narrow definition) (SAR)	2011/12-2015/16	SAR	74.8
26	Hospital stays for alcohol related harm (Broad definition) (SAR)	2011/12-2015/16	SAR	74.5
27	Emergency hospital admissions for hip fracture in 65+ (SAR)	2011/12-2015/16	SAR	107.0
28	Limiting long-term illness or disability (%)	2011	%	17.9
29	Deaths from all causes, all ages (SMR)	2011-2015	SMR	94.4
30	Deaths from all causes, under 75 years (SMR)	2011-2015	SMR	88.4
31	Deaths from all cancer, all ages (SMR)	2011-2015	SMR	94.8
32	Deaths from all cancer, under 75 years (SMR)	2011-2015	SMR	93.0
33	Deaths from circulatory disease, all ages (SMR)	2011-2015	SMR	96.0
34	Deaths from circulatory disease, under 75 years (SMR)	2011-2015	SMR	92.9
35	Deaths from coronary heart disease, all ages (SMR)	2011-2015	SMR	82.1
36	Deaths from stroke, all ages, all persons (SMR)	2011-2015	SMR	107.3
37	Deaths from respiratory diseases, all ages, all persons (SMR)	2011-2015	SMR	79.4
38	Deaths from causes considered preventable (SMR)	2011-2015	SMR	91.8

Abbreviations:

SAR = Standardised Admissions Ratio

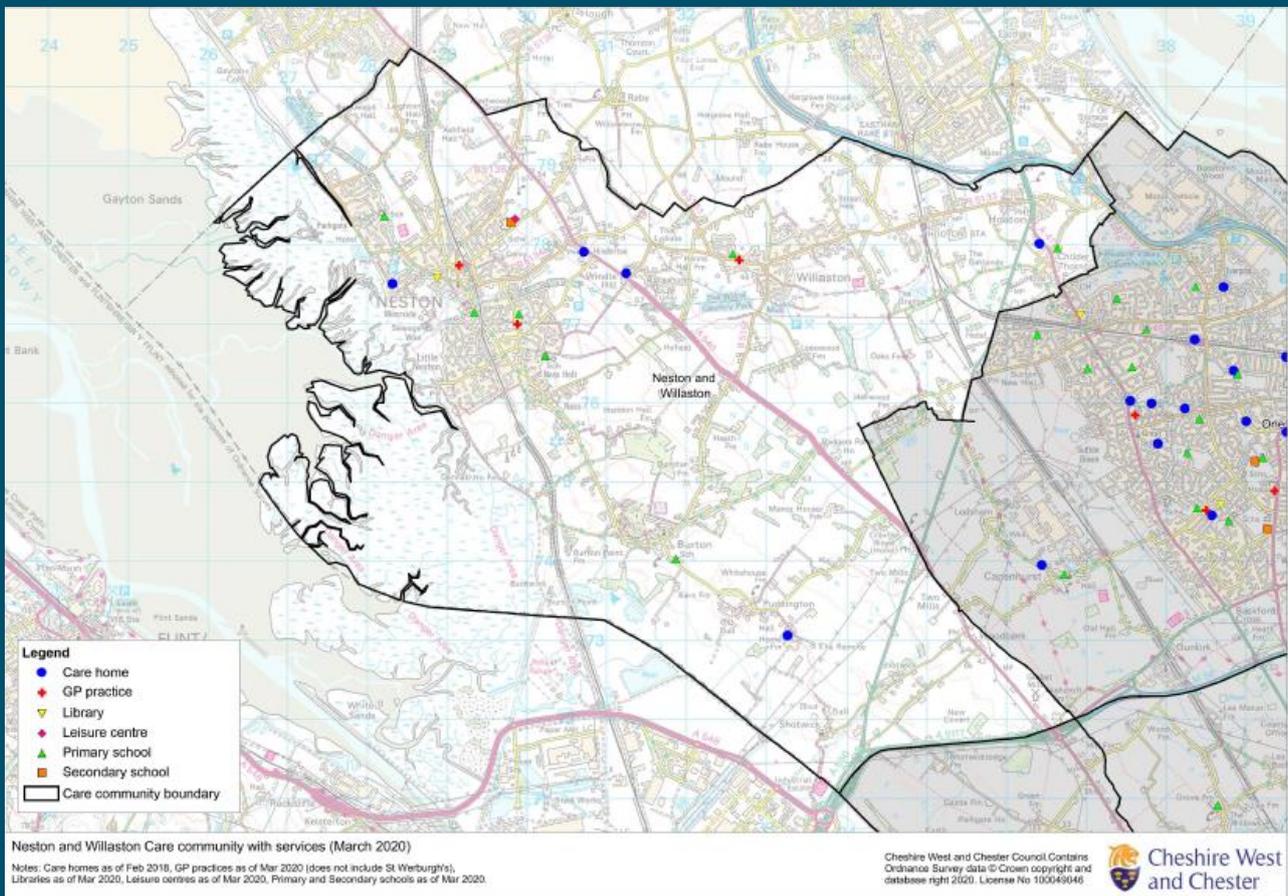
SIR = Standardised Incidence Ratio

SMR = Standardised Mortality Ratio

Ratios are calculated by dividing the observed total number of admissions, new cases or deaths in the area by the expected number and multiplying by 100. Expected numbers are calculated by applying age-sex specific death rates for England in 2011-15 to each area's population.

Significantly better than England
 Not significantly different
 Significantly worse than England

Public Views on Health and Care during the Coronavirus (COVID-19) Pandemic in Neston and Willaston October 2020 – March 2021



Introduction

Between 16th October 2020 and 23rd March 2021, Healthwatch Cheshire received a further 349 responses to our Health, Care and Wellbeing survey from local people across Cheshire West and Chester. Our initial reports based upon our survey findings were published earlier in the year, and covered the period between May 2020 and 15th October 2020. Those reports are available to read on our website (www.healthwatchcwac.org.uk). This follow-up report covers the period up until the anniversary of the first lockdown announcement, and provides further insight into how people have coped during the pandemic, changes that may have occurred in relation to accessing services, and any concerns people have about the current situation and the future.



In total, since our survey began in May 2020, we have received feedback from 97 residents of Neston and Willaston to our Health, Care and Wellbeing survey. This report covers the 35 responses specifically from October to March 2021.

How do you feel about accessing services?

Since our last report people have commented the following about accessing services. Although 40% of Neston residents since October 2020 have stated that they feel comfortable attending appointments, a further third of respondents have said that they have concerns about overburdening the NHS, a sentiment that has remained throughout the pandemic. People are also concerned about making and attending appointments. Comments also relate to perceived miscommunication of messages:

Concerns of overburdening the NHS

- *“Lots of stories in the news about people getting Covid and dying after visiting hospital for health checks or eye appointments, etc. People not keeping their distance in waiting areas, etc.”*
- *“My only problem is that it is taking a minimum of 5 minutes or more to have an answer from my local surgery. That is only after I have been able to get through as most of the time the line is engaged.”*
- *“In pandemic, mixed messages - the NHS is open for business, but it isn't really.”*
- *“There are things I would probably have gone to see the doctor about if it were not for the pandemic. I live in hope that nothing more serious develops.”*
- *“NHS services are overstretched and GP appointments are triaged so you can't see a doctor unless deemed urgent and I have been having regular phone appointments with my GP.”*
- *“I have had no problem getting appointments with doctor though have been warned it may take a long time for hospital referral to come through for a minor health problem.”*

Opinions of video or phone appointments

Around 70% of Neston and Willaston respondents have now experienced a video or phone appointment since October 2020. Around a quarter of respondents do not like receiving their GP appointment in this way, with a slightly lower figure for hospital appointments. However, the other three-quarters are happy with delivery of appointments by video/or phone for certain appointments. Additional comments relating to this topic were mixed; with positive comments relating to convenience and a simpler approach, and other comments pertaining to the value of a face-to-face appointment:



People are happy to use video or phone appointments depending what it is for, due to convenience

- *“Safer, no need to meet face-to-face, or hang around in waiting areas, less risk of contracting Covid. Also, I don’t have access to a car and going to these appointments using public transport is too risky. People don’t social distance properly.”*
- *“More important face-to-face, determine facts accurately.”*
- *“I am hard of hearing and find using the telephone to be very stressful as I can’t hear much that is said despite having two hearing aids.”*
- *“Regarding GP appointments, this is not the same as attending Surgery, but in the present circumstances I fully understand that this necessary.”*
- *“If it’s not actually necessary to visit for treatment. I think the telephone appointments make sense if your problem can be solved by discussion then it saves everyone time and is safer. But occasionally I think phone appointments are a waste of time as I don’t believe Doctors or other health professionals, etc. can diagnose over the phone.”*
- *“Completely antisocial. I have no wish to consult a screen. Healthcare is about face-to-face personal contact and interaction.”*
- *“If able to speak to my regular GP who I know well, I am happy with phone contact, less certain if another GP.”*

Have you had any face-to-face medical appointments over the last few months?

As time has progressed more people have been accessing healthcare appointments face-to-face, and are now being accessed more regularly than earlier in the pandemic. Around 60% of Neston and Willaston respondents since October 2020 have had a face-to-face appointment and the majority of these respondents provided us with some commentary regarding their experiences. People generally found appointments fine, well managed and comfortable, at both the hospital and their GP Practice, though some felt anxious about the experience:



People found
face-to-face
appointments
well managed

- *“A few Urology hospital appointments and one GP appointment: I felt very safe re risk to exposure to COVID-19: availability of masks; temperature checks; hand sanitizer availability; plenty of staff cleaning and wiping down surfaces; GP wearing scrubs; constantly asked questions re symptoms of COVID-19; lots of signage and advice; 'keep left' whilst walking in corridors etc.”*
- *“Normal with my GP except for it being stressful waiting outside for extended periods. In winter weather it will be awful, even worse if you don't have a car to wait in.”*
- *“Had an appointment with female doctor with internal examination. Very quick and told to go to my car and wait for doctor to have a chat on mobile phone. After talking to her with my husband sat in driving seat, I made decisions on the next options for further treatment. Awful experience.”*
- *“I felt quite safe attending appointments for cervical screening and also an eye test.”*
- *“I have felt safe on each occasion. Every effort has been put into minimising risk.”*

Have you had any issues with prescriptions or medication?

Since October 2020, over two-thirds of Neston and Willaston respondents have not experienced any issues in relation to their prescriptions or medication, similar to findings earlier on in the pandemic. Of those who told us more about their experience, there were both positive and negative stories, relating to supply and delivery and communication:



Mixed
experiences
relating to
prescriptions

- *“I use Pharmacy2U for all my prescription medicines and they have been excellent. Everything is delivered that I need.”*
- *“I had a regular, ongoing prescription refused through Patient Access without any explanation. I contacted my GP surgery and they rectified this.”*
- *“Have been a customer of the pharmacy for many years and have not needed their free delivery service. Since Covid really, we needed home delivery so that we could isolate, but was told it was only available if you paid. That works out at over £100 for the two of us. We had to rely on the community helpers to deliver our medicines to us. God bless them.”*
- *“Pharmacy delivers my medication on a 4-weekly basis, and their service is excellent.”*
- *“I have always been able to get all I need from my chemist.”*
- *“Some medications are in short supply. Medicines Manager at GP Practice has helped to find supplies. I do know of neighbours who have been unable to get essential repeat prescriptions.”*
- *“Pharmacy is hopeless, my prescription is dealt with quickly by GP who send it online to the pharmacy who then do nothing with it until I contact them, it appears to sit in a virtual astral void until I either phone them or go in which defeats the principle of social distancing, it can take several days for them to action it after receiving it online. Technology seems to have defeated them.”*

Have you experienced any disruptions to your hospital-based treatment, outpatients appointments, or operations?

Around a quarter of respondents since October 2020 have experienced some issues with disruption to their hospital service. The majority of comments related to this were regarding delays to appointments being rescheduled and long delays between appointments when they eventually have been rescheduled. There is a concern about how this is communicated and a number of people commenting that they have to chase this up:

Disruptions to hospital-based treatment including cancellations and waits

- *“Waited a few months for appointment after being referred by doctor. Telephone appointment only available due to Covid. Follow-up in New Year.”*
- *“Yes, waiting a long time for regular appointment, usually 6m., had been 2 yrs. think something had gone wrong pre Covid, reluctant to ring but after 3 calls I now have an appointment. Dentist check-up delayed c. 6months. I understand the reasons for this.”*
- *“My outpatient appointment at Countess of Chester ophthalmology which was scheduled for May 2020 was cancelled and I haven't yet received another appointment.”*
- *“Appointments are taking a very long time to come through.”*
- *“Given appointments which do not happen. Poor communication is an on-going problem. Services are very stretched with numbers being reduced due to Covid limitations. It is necessary to double check everything but even that doesn't always help.”*
- *“I had a consultation at Chester just before Xmas and was told that I would be seen again in a few weeks. That never happened and when I enquired was told the clinic was closed and no information was available if and when it might re-open. I have had two appointments in the last few days and the consultant commented that he last saw me was over a year ago.”*

How Coronavirus has affected people's mental health

We asked people to tell us about the impact that the pandemic has had on their mental health. We received a mixed response to this question, with a number of comments stating that they felt that their mental health had not been impacted, with a general sentiment of just “getting on with things” and showing resilience. However, conversely, people also talked about worry and anxiety about their health and that of others, and feeling isolated.



Mixed effects
on people's
mental health

- *“I am of the generation that gets on with things. I am responsible for myself and didn't allow the pandemic to get me down. I missed seeing my family but spoke to them regularly.”*
- *“My mental health has neither improved nor deteriorated. There is a constant almost an obsession with trying to tell us that our mental health must have deteriorated. Much of mental health is simply life and life has up and downs and to a large extent I was brought up to basically get on with it and accept there can be setbacks and difficulties in life. It is important obviously that those who require help with their mental health should receive it and be fully aware of how to access services.”*
- *“Feel blessed that I still have my lovely husband after 47 years and still enjoy each other's company even though sometimes he drives me up the wall. We both have a good sense of humour and are both ready to say sorry if needed.”*
- *“Spontaneity has gone out of life. Not able to travel. People have become more ignorant.”*
- *“Felt a bit isolated in lockdown, unable to see friends. Worry about catching the virus and giving it to family members. Worry that other people not being careful enough.”*
- *“Difficult to explain, but living on my own in lockdown for 12 months has been hard, but I am coping fairly well.”*

We asked people to tell us what would help them to maintain or improve their physical or mental wellbeing

We asked people to tell us what would help them to maintain or improve their physical or mental wellbeing. The majority of respondents talked about the importance of exercise and getting outside, walking or gardening. People also mentioned that they would feel better if people stuck to the rules with regards to social distancing and if there were clearer messages with regards to lockdown. This reflects a very similar picture in Neston and Willaston throughout the pandemic:

Concerns about
other people
not observing
social
distancing

- *“My wife and I have started walking more.”*
- *“I enjoyed my daily walks during lockdown.”*
- *“Walking”*
- *“Walking the dog and not having to zoom.”*
- *“Access to my gym.”*
- *“Gardening, walking...”*
- *“Nature, Sport and yoga.”*
- *“I have had a daily walk. I have spent more time outdoors. I have made an effort to see family and friends according to Covid rules.”*
- *“Would feel better if everyone stuck to the rules when out in public.”*
- *“Consistency of messages from government. I do not feel they are acting according to real data and science and I have no confidence in Test & Trace.”*
- *“I certainly do not watch the tv news which is a great help. I don’t read papers and most importantly of all I do not access any kind of social media which I believe is the main cause of any so-called deterioration in the mental health of the population. These strategies keep me sane, content and happy.”*

What are your current concerns about the future impact of the covid-19 pandemic?

Primarily, people have been concerned with not being able to visit with friends and family, and also about the general mental and physical health of themselves and their friends and family. Earlier in the pandemic, the biggest concern for people was around other people not observing social distancing rules. Whilst this is still important to people, being able to see friends and family now dominates. This is likely to be due to the length of lockdown. There is also more of a concern now about travelling on public transport.



People want to be able to see family and friends

- *“Being prevented from travelling for holidays.”*
- *“Just keeping away from people who don't seem to understand the problems!”*

Healthwatch Cheshire continues to provide up to date information to partners and publish further reports on our websites. You can read our reports on what people across Cheshire have told us about their experiences by visiting our website:

www.healthwatchcheshire.org.uk

You can contact us on:

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- **Email:** info@healthwatchcheshire.org.uk
- **Facebook and Twitter:** @HealthwatchCW and @HealthwatchCE
- **Post:** Healthwatch Cheshire CIC, Sension House, Denton Drive, Northwich, Cheshire, CW9 7LU

Tartan Rug

This is the Tartan Rug for the Neston and Willaston Care Community (Public Health England, 2019). The health profile or ‘tartan rug’ shows how each ward within Cheshire West and Chester compares with all other wards in England across a range of health indicators and outcomes. Although the rug only includes a limited number of indicators, it does provide an overview of local health need and a tool to aid discussions about local priorities. Healthwatch Cheshire used this resource when planning our activity.

		Period	Value type	Neston and Willaston
1	Total population (MYE 2018)	2018	Number	20,308
2	BME population (Census 2011)	2011	%	3.8
3	Not proficient in English (Census 2011)	2011	%	0.1
4	Population under 16 (MYE 2018)	2018	Number	2,996
5	Population aged 65 and over (MYE 2018)	2018	Number	5,937
6	Income deprivation - English Indices of Deprivation 2015 (%)	2015	%	9.1
7	Child Poverty - English Indices of Deprivation 2015 (%)	2015	%	11.8
8	Child Development at age 5 (%)	2013-2014	%	63.7
9	GCSE Achievement (5A*-C inc. Eng & Maths) (%)	2013-2014	%	64.2
10	Unemployment (%)	2018	%	1.0
11	Long Term Unemployment (Rate/1,000 working age population)	2018	%	1.3
12	Older people living alone (%)	2011	%	30.0
13	Older People in Deprivation - English Indices of Deprivation 2015 (%)	2015	%	10.0
14	Emergency hospital admissions for all causes (SAR)	2011/12-2015/16	SAR	110.4
15	Emergency hospital admissions for CHD (SAR)	2011/12-2015/16	SAR	97.4
16	Emergency hospital admissions for stroke (SAR)	2011/12-2015/16	SAR	81.0
17	Emergency hospital admissions for Myocardial Infarction (heart attack) (SAR)	2011/12-2015/16	SAR	85.7
18	Emergency hospital admissions for Chronic Obstructive Pulmonary Disease (COPD) (SAR)	2011/12-2015/16	SAR	54.6
19	Incidence of all cancer (SIR / per 100)	2011-2015	SIR / per 100	106.6
20	Incidence of breast cancer (SIR / per 100)	2011-2015	SIR / per 100	115.4
21	Incidence of colorectal cancer (SIR / per 100)	2011-2015	SIR / per 100	94.0
22	Incidence of lung cancer (SIR / per 100)	2011-2015	SIR / per 100	93.1
23	Incidence of prostate cancer (SIR / per 100)	2011-2015	SIR / per 100	116.8
24	Hospital stays for self harm (SAR)	2011/12-2015/16	SAR	78.5
25	Hospital stays for alcohol related harm (Narrow definition) (SAR)	2011/12-2015/16	SAR	84.9
26	Hospital stays for alcohol related harm (Broad definition) (SAR)	2011/12-2015/16	SAR	94.2
27	Emergency hospital admissions for hip fracture in 65+ (SAR)	2011/12-2015/16	SAR	78.3

28	Limiting long-term illness or disability (%)	2011	%	19.5
29	Deaths from all causes, all ages (SMR)	2011-2015	SMR	88.8
30	Deaths from all causes, under 75 years (SMR)	2011-2015	SMR	77.7
31	Deaths from all cancer, all ages (SMR)	2011-2015	SMR	96.5
32	Deaths from all cancer, under 75 years (SMR)	2011-2015	SMR	88.0
33	Deaths from circulatory disease, all ages (SMR)	2011-2015	SMR	82.9
34	Deaths from circulatory disease, under 75 years (SMR)	2011-2015	SMR	71.0
35	Deaths from coronary heart disease, all ages (SMR)	2011-2015	SMR	69.8
36	Deaths from stroke, all ages, all persons (SMR)	2011-2015	SMR	104.8
37	Deaths from respiratory diseases, all ages, all persons (SMR)	2011-2015	SMR	87.0
38	Deaths from causes considered preventable (SMR)	2011-2015	SMR	86.5

Abbreviations:
SAR = Standardised Admissions Ratio
SIR = Standardised Incidence Ratio
SMR = Standardised Mortality Ratio

 Significantly better than England

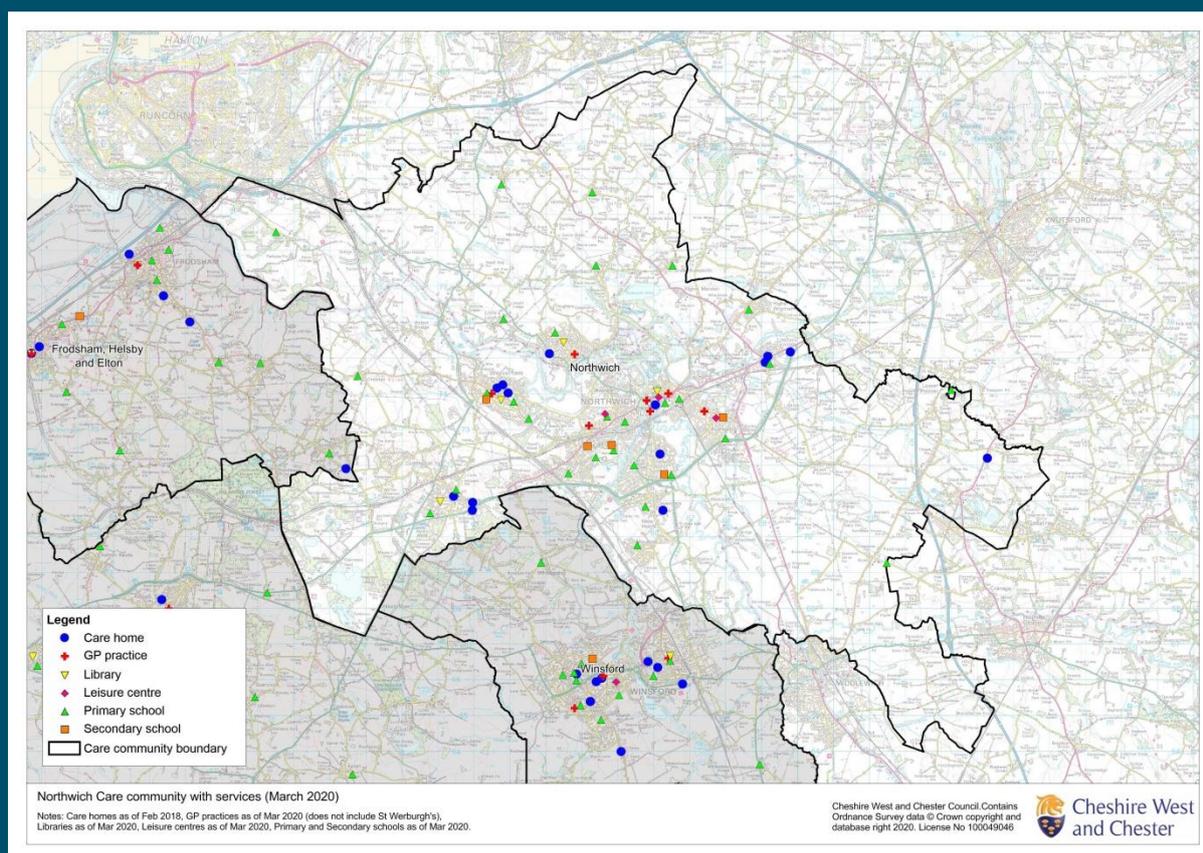
 Not significantly different

 Significantly worse than England

Ratios are calculated by dividing the observed total number of admissions, new cases or deaths in the area by the expected number and multiplying by 100. Expected numbers are calculated by applying age-sex specific death rates for England in 2011-15 to each area's population.

Public Views on Health and Care during the Coronavirus (COVID-19) Pandemic in Northwich

October 2020 – March 2021



Introduction

Between 16th October 2020 and 23rd March 2021, Healthwatch Cheshire received a further 349 responses to our Health, Care and Wellbeing survey from local people across Cheshire West and Chester. Our initial reports based upon our survey findings were published earlier in the year, and covered the period between May 2020 and 15th October 2020. Those reports are available to read on our website (www.healthwatchcwac.org.uk). This follow-up report covers the period up until the anniversary of the first lockdown announcement, and provides further insight into how people have coped during the pandemic, changes that may have occurred in relation to accessing services, and any concerns people have about the current situation and the future.



In total, since our survey began in May 2020, we have received feedback from 255 residents of Northwich to our Health, Care and Wellbeing survey. This report covers the 70 responses specifically from October to March 2021.

How do you feel about accessing services?

Since October 2020, over 40% of Northwich residents have told us that they feel comfortable accessing healthcare services, which is a significantly higher percentage than earlier on in the pandemic. However, there is still a concern about overburdening NHS services, with over one-third of people citing that they were concerned about this. People are also concerned about how they access appointments, phoning or attending surgeries, and feel that this is not an easy process to go through. Of those who did leave positive comments, these related to good experiences when actually accessing healthcare services:



- *“I’ve put off going to my doctor as I feel my problem isn’t urgent at the moment and I can’t access physio or hydrotherapy in any case.”*
- *“Feel nervous attending healthcare setting during pandemic.”*
- *“Needed a blood test and felt very concerned about it as parking is difficult and I have not been going out during the day in town.”*
- *“I have a shy nature so would not be comfortable on the phone and I can’t drive and don’t like public transport because of anxieties.”*
- *“I’m caring for my father who is shielding so I don’t want to do anything that puts me or him at risk.”*
- *“Got to get past receptionist asking what is wrong and they decide what is next.”*
- *“Everyone is treated with suspicion. A little friendliness would go a long way.”*
- *“Never had any problem with contacting the doctor. If I have needed to contact the chemist that has been hard at times but got through in the end.”*
- *“I know all precautions are in place to access healthcare services but only if I really need them.”*
- *“The service has been far more prompt than I expected. Doctors calling when required. It’s a pity the service wasn’t this good before the pandemic.”*
- *“I have spoken to the doctor by telephone, I fine this service to be good, I have my medication delivered so I don’t have to leave my house.”*

Opinions of video or phone appointments

Almost 70% of Northwich respondents have now experienced a healthcare appointment by video or phone call. Since October 2020, around one-fifth of respondents for GP appointments, and a quarter of respondents for hospital appointments, said that they didn't like appointments being delivered in this way, which is consistent with what people have been telling us throughout the pandemic. Of those who were happy with appointments continuing in this way, a number of people talked about their convenience, being easily accessible and having no parking or transport issues. However, there were a number of comments relating to the importance of face-to-face appointments for certain appointments and that this feels more personal, and some mentioned their dislike of technology:



Some people found video or phone appointments more convenient, but others preferred face-to-face

- *"It is not always necessary to have a face-to-face appointment and a video or telephone appointment is enough."*
- *"Means I don't need to take extended time off work."*
- *"Security of not having to access medical buildings due to Covid."*
- *"I've used email via e-consult for one appointment. Local hospitals impossible to park at, GP surgery now closed in my village, almost impossible to park at GP surgeries too. If a doctor needs to examine you then a video or phone call isn't practical and a lot can get missed by phone. If all you're asking for is advice then that's different."*
- *"If I need to see my GP (on rare occasions) I would prefer to see face-to-face appointment."*
- *"Have been using physio service - physio can't assess you very well if can't touch you and see you close up. Appointments feel very impersonal compared to face-to-face."*
- *"Face-to-face is more personal and can explain symptoms to doctor so can see the problem"*
- *"If I was sick, I would like to see the doctor face-to-face. Reviews of medication etc over the phone would be ok."*
- *"Can be much easier - awkward to fit in appts around childcare etc so this can be really helpful. I had a telephone consult regarding neck pain which was difficult as they were asking about my range of movement but clearly couldn't see."*
- *"It is difficult to explain problems and difficult to find somewhere private to conduct the conversation as you are not given a time when you will be called by the doctor. At work, I am not allowed my phone."*
- *"Saves time travelling and waiting in the surgery. Also, less chance of catching anything."*
- *"I am old school. Not good with technology."*

Have you had any face-to-face medical appointments over the last few months?

As time has progressed more people have been accessing healthcare appointments face-to-face. Since October 2020, around two-thirds of Northwich respondents have accessed a healthcare appointment face-to-face. People told us that generally they were happy with the health and safety measures that had been put in place, such as PPE and social distancing. However, many talked about their feelings of anxiety about attending appointment, though the majority felt safe and more relaxed once they attended. A number of people commented on the strangeness of the situation, particularly in relation to GP Practices - for example, having to wait outside to be seen:



Anxiety about attending face-to-face appointments

- *“Stressful due to pandemic, mask wearing, atmosphere.”*
- *“A little scary, trying to get into the doctors is difficult as the doors are locked & you have to shout through a back window to gain access. The waiting room is unpleasant & makes you feel uncomfortable being there due to solitary chairs.”*
- *“GP physical examination. Difficult to obtain and made to feel a little like I shouldn’t be there. From Covid point of view it felt safe enough.”*
- *“Absolutely fine, lots of sanitising, social distancing and masks.”*
- *“Ok I felt really safe and secure everything was spotless and the nurses were superb.”*
- *“The only complaint is that it would have been easier had I been able to be accompanied due to my mobility issues, but I appreciate the impact of Covid-19 and therefore was content to struggle on.”*
- *“I’m hearing impaired so I found it difficult to understand the clinicians when they were wearing masks and visors.”*
- *“It was for my daughter who has special needs and the staff were really good at Northwich infirmary.”*
- *“GP practice at the door of the surgery - unacceptable.”*

Have you had any issues with prescriptions or medication?

Almost three-quarters of respondents since October 2020 have not had any issues with their prescriptions or medication, compared to one-third of people earlier on in the pandemic, demonstrating prescriptions and medication becoming less of an issue for people in Northwich. We asked people to tell us more about their experiences and received a mixed response, with some praising the ordering services and others telling us about problems they have had with this, particularly regarding communication and accessibility.



Mixed
experiences
with accessing
prescriptions

- *“At start of pandemic GP surgery pre-authorized the next month's prescription. I don't order always the same things every month so that didn't work for me. Now prescriptions taking 7 to 10 days to be available from pharmacy once ordered online.”*
- *“Order online and collect from pharmacy as usual.”*
- *“I get a repeat prescription via email. It's easy and efficient.”*
- *“I can get over the counter painkillers easily at present. I know the gap will prescribe stronger medication if I need it.”*
- *“I order them through the app on my phone but only being allowed to get 28 days at a time is unhelpful when I spent months at a time living with my parents to care for them and had to keep coming back to pick up prescriptions from my home pharmacy.”*
- *“Pharmacy very slow at fulfilling prescriptions and item on special order was left unactioned for a week despite it being from an urgent GP appointment. No sense of urgency at pharmacy which left me off work sick for a week and in a lot of pain. This was avoidable had the pharmacy auctioned the prescription more efficiently.”*
- *“Trying to get through to doctors to request repeat prescription. Was in a queue for 40 minutes with a message that kept telling me I was first in the queue. Luckily, I have unlimited calls on my mobile as otherwise I would have been paying a fortune on my landline.”*
- *“My local pharmacist said that my preventer inhaler was out of stock and unavailable. What they didn't add was 'at our one wholesaler' - no nationwide shortage existed. Unfortunately, they issued part of my e-prescription and then just kept saying 'out of stock' for the inhaler. My GP pharmacist was excellent and not only arranged for a paper substitute but advised me how to get a separate inhaler prescription and to ask for the paper version if no inhaler was forthcoming. I've done this twice now - other pharmacies are able to obtain it no problem. I don't think that many people are aware that you can ask for the paper prescription even if it is via an e-prescription. There is still an issue with getting prescriptions delivered in a timely way with the new spoke-and-hub system for some pharmacies - it's taken over three weeks in some cases and the prescription issuing service assumes a few days. The issue there is not with the GP, it is with the pharmacy systems for timely delivery.”*

Have you experienced any disruptions to your hospital-based treatment, outpatients appointments, or operations?

From October 2020, we asked a standalone question in relation to hospital-based treatment due to frequent issues reported earlier in the pandemic of disruption to hospital appointments and treatment. From October 2020, of those who told us about disruption to their treatment there was a general sentiment that although they had to wait for new appointments they understood why and were happy enough to do so. For some there was a feeling of frustration, particularly if they felt that their treatment or appointment was urgent - many felt concerned about appointments being rescheduled with a long delay, and some not yet rescheduled at all. People were also keen to praise the hospital service that they received when attending:

Concerns about hospital appointments and treatment being rescheduled

- *“I had my original appointment cancelled in March due to lockdown. Had two subsequent telephone appointments and although the consultants were friendly it seemed pointless as it was for ears/tinnitus.”*
- *“It wasn’t well managed at all as all respiratory and ophthalmic appointments were cancelled in Jan, Feb, March and June.”*
- *“Had an appointment cancelled, however it was rescheduled for a few months later and understood the reason why.”*
- *“A couple have been cancelled but not urgent ones that I was quite happy not to go because of the current situation.”*
- *“Appointments have been put back but that’s no problem.”*
- *“Managed very well. Very efficient and organised.”*
- *“Hospitals have been great.”*
- *“I was sent for an MRI within 3 weeks - very well managed.”*
- *“Phone calls to find my position on waiting list are just apologetic announcements to say they haven’t started operations yet.”*
- *“Have been waiting for a procedure at Spire Liverpool on the NHS since the beginning of lockdown in March 2020. Handled incredibly poorly in my opinion - I still don’t have any idea when this will happen and have had to chase myself for any updates in relation to my appointment.”*
- *“Not had a spirometer which should have been March 2020 at GP surgery. Not had my rheumatologist referral at hospital should have been April 2020. Not had my melanoma checked should have been in December 2020.”*

How Coronavirus has affected people's mental health

We asked people to tell us about the impact that the pandemic has had on them. Although many commented that they felt fine and didn't feel that their mental health had been unduly affected, many commented on the increasing feeling of loneliness and isolation, and their confusion with the changing rules in relation to tier and lockdown. The longevity of lockdown seems to have had a greater impact on people's ability to cope.



Feelings of
loneliness and
isolation due
to longevity of
lockdown

- *“Cannot cope with anything panic and fear of going out. Now got a nervous tic and struggling with eyesight feel pressure in everything.”*
- *“The shortness of the days and the need to work in doors remotely.”*
- *“My son lives in the USA and I have only seen him and his wife and their new baby when he was 6 weeks old. he is now 16mths. I lost my other son in a car accident so seeing my family helps me with me my wellbeing.”*
- *“Have been unable to work and have been stressed about feeling I have not done my bit.”*
- *“No being able to meet my family members, if I do go out, I worry when I get home, just in case I have picked the virus up. I don't feel like doing anything, I sometimes cry from nothing.”*
- *“Fed up with lockdown and changing of tiers. Can't see anything getting better for a while.”*
- *“Been a tough year and the person I'm caring for has been unwell making things harder. Also moving to tier 3 is making me sad.”*
- *“I live alone at nearly 78yrs old, most family live too far away & I haven't been into town or seen local family/ friends since the beginning of the pandemic. I was able to see my eldest daughter on Xmas Day which broke the monotony for the day.”*
- *“Very little face-to-face contact with anyone outside the family. Was quite a social person and a rarely see people now. All work done online and via Teams. When I do go out I get frustrated at the way people don't move over or make space and that gets to me too.”*
- *“Panic attacks feel close most of the time but come and go in waves. I'm proactive in trying to manage my mental health using 5 ways to wellbeing and I run a group (currently online) who meet once a week for mutual support. We pray together (optional) and bring hobbies to share and talk about. Not being able to see my mum in her care home has had a negative impact on my mental health.”*
- *“Because I live on my own. I have no support bubble and have had to spend Christmas on my own.”*
- *“Due to having Covid I was scared how it would end up and worried for my family as we all tested positive and were poorly.”*

We asked people to tell us what would help them to maintain or improve their physical or mental wellbeing

People told us about the importance of exercise and being outside, and also the importance of being able to connect with family and friends. It was further expressed that people are focused on the situation improving moving forward, particularly with the roll out of the vaccine:

People found exercise and being outside helped their physical and mental health

- *“I take regular exercise, watch my diet, speak to friends, have a supportive husband and children. My job can be stressful so I make sure I take time out when needed.”*
- *“Knowing when I will have a vaccine appt available.”*
- *“Lockdown restrictions to ease when most people have received their vaccines.”*
- *“Better information on when to expect a call for the vaccine, and evidence that this is being managed in the best way possible.”*
- *“All good for me: I have an allotment, my garden, piano lessons and good networks of friends and family via Zoom, FaceTime, etc.”*
- *“Trying to get fresh air, and speaking to people if able, also cut out processed food.”*
- *“Not sure, I ring people to have a chat, I've been doing some knitting. Maybe if you could ring someone if you have a worry, it may sound silly to other people, but to you it's very important.”*
- *“I started walking with the canal and river trust, I forced myself to go in the beginning, it lifted my mental state and spirits, we have arranged to carry on walking as a group after the course finished.”*
- *“I will be increasing my daily exercise while I'm off work over Christmas.”*
- *“Going for walks and starting to jog.”*
- *“Nicer weather, been trying to walk every day.”*
- *“Additional activities for people living on their own and options to meet even if outside.”*
- *“Allowing more home visitors or groups to restart in tier 2 as long as social distancing is in place.”*

What are your current concerns about the future impact of the Covid-19 pandemic?

Primarily, people's concerns tend to focus on the future mental and physical wellbeing of themselves and their friends and family, and also how important it is for them to be able to visit their friends and family. People are also concerned about whether others will observe social distancing rules as times goes on.



People are
concerned
about their
own, and their
family's health

- *“Husband furloughed since March, loss of income. Brother died from COVID in April, father got it and is currently in a care home, I am constantly worried about him and not being able to see him properly.”*
- *“When we have a tickly cough or sneeze we wonder if we may have developed Covid but fortunately nothing seems to develop. Just need everything to get back to normal so we can meet friends from farther afield.”*
- *“All the mixed messages from government. The uncertainty of everything. The absolute stupid notion that everything will go back to normal soon.”*
- *“It's been horrendous because a lot of people don't follow the rules.”*
- *“I am sure I am not the only one, but I am less careful now than I was in the spring.”*
- *“It certainly makes you question things you took for granted. I worry about our future economy and the massive impact that is going to have.”*
- *“100% NHS has concentrated on Corvid all other illnesses have been forgotten.”*
- *“My husband's job is potentially at risk as he works in aviation and has been told redundancies are needed. Finding it increasingly difficult to cope with prolonged working from home with little social interaction outside my household. Travel restrictions and FCO advice are creating difficulties as extended family now living with us and stuck in the house most of the time.”*

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- **Facebook and Twitter:** @HealthwatchCW and @HealthwatchCE
- **Post:** Healthwatch Cheshire CIC, Sension House, Denton Drive, Northwich, Cheshire, CW9 7LU

Tartan Rug

This is the Tartan Rug for the Northwich Care Community (Public Health England, 2019). The health profile or ‘tartan rug’ shows how each ward within Cheshire West and Chester compares with all other wards in England across a range of health indicators and outcomes. Although the rug only includes a limited number of indicators, it does provide an overview of local health need and a tool to aid discussions about local priorities. Healthwatch Cheshire used this resource when planning our activity.

Produced by Cheshire West and Chester, Insight and Intelligence team. Version 2 : October 2019

	Period	Value type	Northwich
1 Total population (MYE 2018)	2018	Number	72,617
2 BME population (Census 2011)	2011	%	4.2
3 Not proficient in English (Census 2011)	2011	%	0.4
4 Population under 16 (MYE 2018)	2018	Number	13,366
5 Population aged 65 and over (MYE 2018)	2018	Number	15,429
6 Income deprivation - English Indices of Deprivation 2015 (%)	2015	%	10.6
7 Child Poverty - English Indices of Deprivation 2015 (%)	2015	%	13.5
8 Child Development at age 5 (%)	2013-2014	%	62.5
9 GCSE Achievement (5A*-C inc. Eng & Maths) (%)	2013-2014	%	63.1
10 Unemployment (%)	2018	%	1.1
11 Long Term Unemployment (Rate/1,000 working age population)	2018	%	0.5
12 Older people living alone (%)	2011	%	28.7
13 Older People in Deprivation - English Indices of Deprivation 2015 (%)	2015	%	11.2
14 Emergency hospital admissions for all causes (SAR)	2011/12-2015/16	SAR	107.6
15 Emergency hospital admissions for CHD (SAR)	2011/12-2015/16	SAR	93.4
16 Emergency hospital admissions for stroke (SAR)	2011/12-2015/16	SAR	100.2
17 Emergency hospital admissions for Myocardial Infarction (heart attack) (SAR)	2011/12-2015/16	SAR	92.2
18 Emergency hospital admissions for Chronic Obstructive Pulmonary Disease (COPD) (SAR)	2011/12-2015/16	SAR	76.3
19 Incidence of all cancer (SIR / per 100)	2011-2015	SIR / per 100	102.3
20 Incidence of breast cancer (SIR / per 100)	2011-2015	SIR / per 100	106.1
21 Incidence of colorectal cancer (SIR / per 100)	2011-2015	SIR / per 100	107.3
22 Incidence of lung cancer (SIR / per 100)	2011-2015	SIR / per 100	102.6
23 Incidence of prostate cancer (SIR / per 100)	2011-2015	SIR / per 100	92.9
24 Hospital stays for self harm (SAR)	2011/12-2015/16	SAR	117.9
25 Hospital stays for alcohol related harm (Narrow definition) (SAR)	2011/12-2015/16	SAR	91.9
26 Hospital stays for alcohol related harm (Broad definition) (SAR)	2011/12-2015/16	SAR	96.7
27 Emergency hospital admissions for hip fracture in 65+ (SAR)	2011/12-2015/16	SAR	90.3
28 Limiting long-term illness or disability (%)	2011	%	18.2
29 Deaths from all causes, all ages (SMR)	2011-2015	SMR	100.1
30 Deaths from all causes, under 75 years (SMR)	2011-2015	SMR	91.9
31 Deaths from all cancer, all ages (SMR)	2011-2015	SMR	98.8
32 Deaths from all cancer, under 75 years (SMR)	2011-2015	SMR	95.3
33 Deaths from circulatory disease, all ages (SMR)	2011-2015	SMR	99.2
34 Deaths from circulatory disease, under 75 years (SMR)	2011-2015	SMR	92.8
35 Deaths from coronary heart disease, all ages (SMR)	2011-2015	SMR	98.6
36 Deaths from stroke, all ages, all persons (SMR)	2011-2015	SMR	101.6
37 Deaths from respiratory diseases, all ages, all persons (SMR)	2011-2015	SMR	103.0
38 Deaths from causes considered preventable (SMR)	2011-2015	SMR	93.3

Abbreviations:

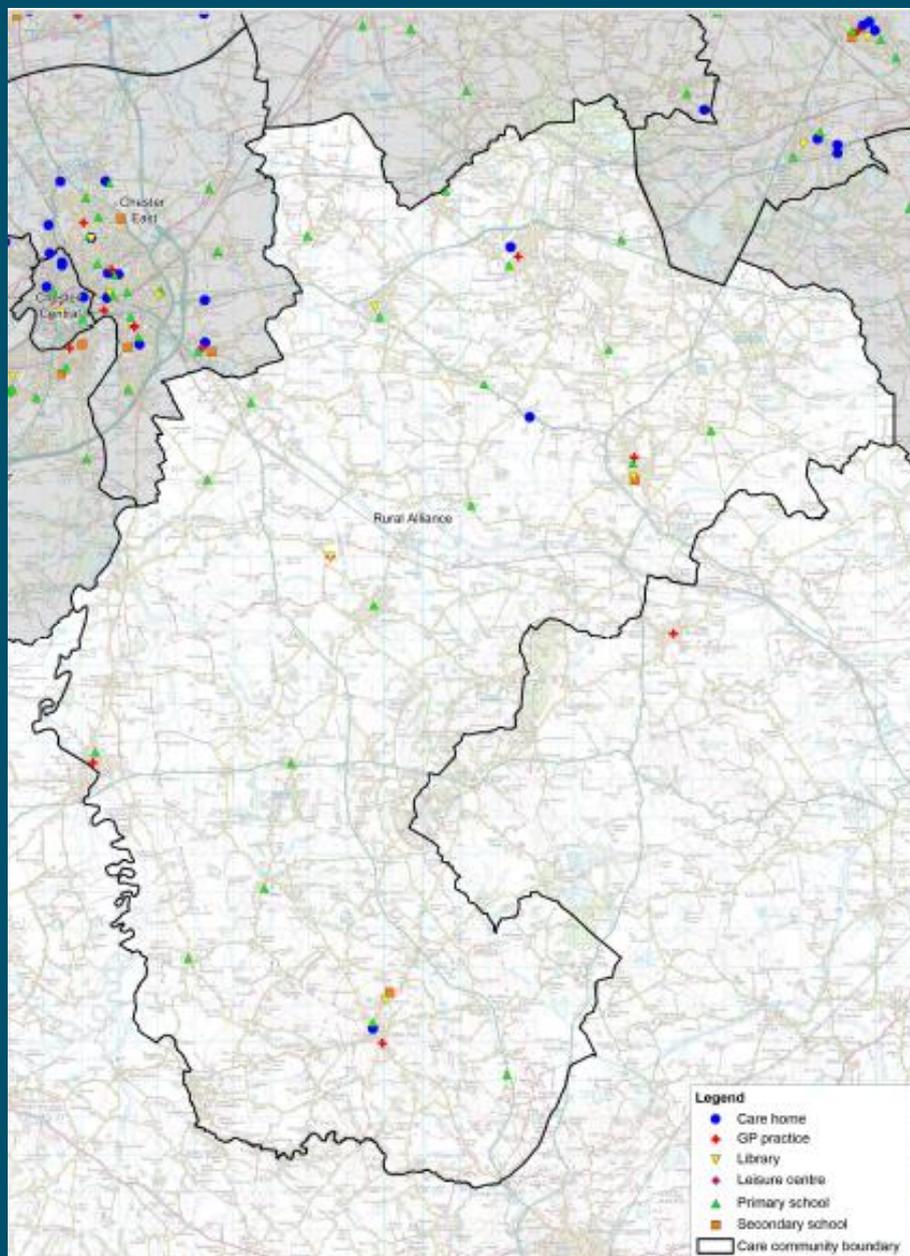
SAR = Standardised Admissions Ratio
SIR = Standardised Incidence Ratio
SMR = Standardised Mortality Ratio

Ratios are calculated by dividing the observed total number of admissions, new cases or deaths in the area by the expected number and multiplying by 100. Expected numbers are calculated by applying age-sex specific death rates for England in 2011-15 to each area's population.

Significantly better than England Not significantly different Significantly worse than England

Public Views on Health and Care during the Coronavirus (COVID-19) Pandemic in the Rural Care Community

October 2020 – March 2021



Introduction

Between 16th October 2020 and 23rd March 2021, Healthwatch Cheshire received a further 349 responses to our Health, Care and Wellbeing survey from local people across Cheshire West and Chester. Our initial reports based upon our survey findings were published earlier in the year, and covered the period between May 2020 and 15th October 2020. Those reports are available to read on our website (www.healthwatchcwac.org.uk). This follow-up report covers the period up until the anniversary of the first lockdown announcement, and provides further insight into how people have coped during the pandemic, changes that may have occurred in relation to accessing services, and any concerns people have about the current situation and the future.



In total, since our survey began in May 2020, we have received feedback from 115 residents of the Rural Care Community (Tarporley, Malpas, Ashton, Farndon, Tattenhall, Kelsall, and Tarvin) to our Health, Care and Wellbeing survey. This report covers the 29 responses specifically from October to March 2021.

How do you feel about accessing services?

Since our last report covering May to October 2020, over half of those who have responded from the Rural area said that they currently didn't have any concerns about accessing services. However, of those who did express some concern, this was generally related to not wanting to overburden healthcare services, and feeling uncomfortable about attending appointments if they did so:

Concern over
not wanting to
overburden
the NHS

- *“The consistent messages and actions reinforce the notion that the NHS has become primarily a COVID-19 response unit, with other services being generally suspended or considerably reduced.”*
- *“I have attended my GP but I need to go again and don't like to hassle them.”*
- *“Feel comfortable contacting GP but wary of attending Countess of Chester for blood tests and screening.”*
- *“I recognise that accessing healthcare services has necessarily changed but I have no problem in adapting to the changed situation so long as ultimately the services I need are still available.”*
- *“I have a few minor concerns that can wait until the excessive demand eases but am happy to use online/telephone services when needed.”*

Opinions of video or phone appointments

A larger number of respondents have now experienced a healthcare appointment by video or phone call. When we asked people to tell us more about this, around 80% of Rural respondents since October 2020 had accessed their healthcare service in this way, a significant increase on the number who had accessed services in this way in the earlier stages of the pandemic. Three-quarters of respondents said that they would be happy continuing with GP appointments in this way in the future and two-thirds would for hospital appointments. Although a number of people told us that they preferred face-to-face appointments and felt that there were some appointments that needed to be delivered in this way, others liked the convenience and felt it was a practical approach to delivering services:



- *“It’s quicker, easier and I hardly ever actually need to see anyone face-to-face since I got into recovery.”*
- *“Not happy travelling and going to hospitals or surgeries.”*
- *“A video phone call would enable the GP to see and hear the patient but he/she would be unable to feel the patients pulse or temperature.”*
- *“Easier. No need to sit in a waiting room with sick people. No travelling. GP surgeries often/usually run late.”*
- *“Important that these online appointments don’t become the default.”*
- *“If you need hospital, it’s because a GP needs you to see someone. How can they assess a lump, see in an ear or text on line?”*
- *“Sometimes it’s necessary for a health care professional to physically see the problem.”*

Have you had any face-to-face medical appointments over the last few months?



As time has progressed more people have been accessing healthcare appointments face-to-face, and are now being accessed more regularly than earlier in the pandemic. Just over half of Rural respondents have attended some form of face-to-face appointment since October 2020. All comments relating to face-to-face appointments were positive, with respondents feeling safe and assured that all precautions had been taken care of:

- *“Good, I was reassured and put at ease.”*
- *“OK but a bit weird with all of the understandable precautions.”*
- *“Flu vaccine at community centre, it was very well run.”*
- *“Felt safe. Health Professional wearing PPE and could see guidelines being followed.”*
- *“Breast screening - I was the only one in and there was a strict one-way system.”*
- *“I had vascular surgery and needed a consultant appointment beforehand, a pre-op assessment and then surgery involving a hospital stay. All absolutely fine, superb staff and brilliantly managed.”*

Have you had any issues with prescriptions or medication?

From October 2020, we asked a standalone question in relation to prescriptions as over the summer months people were frequently telling us about issues they had accessing prescriptions and medication. The majority of respondents to this question since October 2020 have had no issues with prescriptions or obtaining medication, suggesting that processes have improved since the early part of the pandemic. Of those who had experienced problems, their comments all related to an issue that had subsequently been resolved:



- *“I had to ask twice to get two months’ supply of my Thyroxin medication in order to reduce the no of visits made to the pharmacy. This is sorted now and as I will be on the medication for life, it didn’t seem unreasonable to ask for this.”*
- *“Initially being delivered by volunteers but felt concerned by other customers not wearing masks or keeping a safe distance.”*
- *“The discharge letter following my surgery wasn’t initially sent to my GP so the GP had no knowledge of changes needed to my medication. This was quickly sorted out by the hospital when I chased it up.”*

Have you experienced any disruptions to your hospital-based treatment, outpatients appointments, or operations?



From October 2020 we asked a standalone question in relation to hospital-based treatment. We felt that this was important as more people will have been accessing services as time has passed. Around half of those from the Rural area who have accessed hospital-based treatment since October 2020 had experienced some issues with disruption to the service. A common theme relates to appointments being delayed or cancelled and a mixed response to whether appointments have been re-scheduled. Some mention a lack of communication around this, whilst others mention some level of understanding

as to why services are delayed as a result of the pandemic:

- *“Breast clinic cancelled as they had to close down and could not rebook this year as all appointments were either at night when I have no transport or in term time when I am at work.”*
- *“An operation follow-up appointment last March was cancelled; however, I have just received an appointment.”*
- *“I should have had a hospital appointment for breast cancer follow up but had telephone call instead. I also cancelled my mammogram.”*
- *“5/6 months delay to Audiology appointment but I felt this was reasonable in the pandemic.”*
- *“My ophthalmology appointment has been changed 4 times, now supposed to be in February.”*
- *“I had a telephone consult with the mental health team back in March and have not heard anything since. I understand why though 100%.”*
- *“Knee replacement surgery delayed by 3 months.”*

How Coronavirus has affected people's mental health

We asked people to tell us about the impact that the pandemic has had upon their mental health. People from the Rural area are struggling with the longevity of lockdown, with a number commenting that is getting more difficult as time goes on, especially through the winter months. People talk about feeling that this has had a negative impact upon their mental health and that they are struggling more than usual:

- *"I have a husband to share the problems with. I have a comfortable home and the security of a pension. I have a supportive family, some of whom I can see easily when regulations permit. I have friends I can talk to. I have no serious health concerns. But it is not easy and is harder in winter than in spring."*
- *"Feel trapped and separated from family support."*
- *"Being disabled by the knee replacement surgery, has been made more difficult with the restrictions of Covid rules. The whole situation feels very depressing."*
- *"Have not left my home since February except to receive flu vaccine."*
- *"Second wave seems to have brought more anxiety. Really missing not being able to meet close family."*
- *"It's a drag and it's generally depressing."*



Struggles with the longevity of the national lockdown

We asked people to tell us what would help them to maintain or improve their physical or mental wellbeing

People valuing being outside, exercise and social interaction

We asked people to tell us what would help them to maintain or improve their physical or mental wellbeing. Exercise and fresh air dominate people's comments, though many also talk about how they miss more formal exercise opportunities such as going to gyms. Commonly, people also talk about the importance of social connections. As time has passed, the importance of the vaccine is something people reference when talking about what will help to improve their wellbeing:

- *"Access to the gym."*
- *"More exercise and fresh air."*
- *"I've been able to walk my dogs 2 or 3 hours a day. I think this helps a lot with both physical and mental health. I suppose some more contact with others would be nice but that's not happening and anyway I have no desire to expose anybody else to potential danger."*
- *"Being able to meet up with close family."*
- *"The hope of a vaccine has helped me."*
- *"Access to more effective testing especially if asymptomatic to enable me to visit my family out-of-area and reduce the pressure on having a vaccine. Sort out NHS care beyond the COVID. Enable other healthcare providers (such as bodywork practitioners that keep my ageing body pain-free) to contribute to care rather than shutting them down (they often understand and protect their clients better than many retail outlets)."*

What are your current concerns about the future impact of the covid-19 pandemic?

Being able to meet up with family and friends is people's primary concern in relation to thinking to the future, as well as the mental and physical health of their friends and family. People are also concerned about their own mental and physical health, which reflects findings from earlier on in the pandemic. However, there is now a bigger mention of concerns relating to money and the economy:



Concerns over
people's own
mental and
physical health,
and that of friends
and family

- *“The lack of perspective; yes, it's a serious virus but personal steps can be taken to reduce risk. The willingness to shut everything down and "protect the NHS" fails to acknowledge the wider ramifications on mental and physical wellbeing. Once COVID-19 is passed, the NHS will have a massive backlog and burden of care - and then COVID-21 will come around and it'll be "rinse, repeat" all over again.”*

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		Period	Value type	Local Alliance
1	Total population (MYE 2018)	2018	Number	30,025
2	BME population (Census 2011)	2011	%	2.8
3	Not proficient in English (Census 2011)	2011	%	0.1
4	Population under 18 (MYE 2018)	2018	Number	5,404
5	Population aged 65 and over (MYE 2018)	2018	Number	8,214
6	Income deprivation - English Indices of Deprivation 2015 (%)	2015	%	8.5
7	Child Poverty - English Indices of Deprivation 2015 (%)	2015	%	7.4
8	Child Development at age 5 (%)	2013-2014	%	62.4
9	GCSE Achievement (5A*-C inc. Eng & Maths) (%)	2013-2014	%	69.4
10	Unemployment (%)	2018	%	0.8
11	Long Term Unemployment (Rate/1,000 working age population)	2018	%	0.4
12	Older people living alone (%)	2011	%	20.0
13	Older People in Deprivation - English Indices of Deprivation 2015 (%)	2015	%	9.2
14	Emergency hospital admissions for all causes (SAR)	2011/12-2015/16	SAR	74.2
15	Emergency hospital admissions for CHD (SAR)	2011/12-2015/16	SAR	64.4
16	Emergency hospital admissions for stroke (SAR)	2011/12-2015/16	SAR	65.3
17	Emergency hospital admissions for Myocardial Infarction (heart attack) (SAR)	2011/12-2015/16	SAR	71.9
18	Emergency hospital admissions for Chronic Obstructive Pulmonary Disease (COPD) (SAR)	2011/12-2015/16	SAR	32.5
19	Incidence of all cancer (SIR / per 100)	2011-2015	SIR / per 100	62.1
20	Incidence of breast cancer (SIR / per 100)	2011-2015	SIR / per 100	66.7
21	Incidence of colorectal cancer (SIR / per 100)	2011-2015	SIR / per 100	115.2
22	Incidence of lung cancer (SIR / per 100)	2011-2015	SIR / per 100	68.3
23	Incidence of prostate cancer (SIR / per 100)	2011-2015	SIR / per 100	101.0
24	Hospital stays for self harm (SAR)	2011/12-2015/16	SAR	49.8
25	Hospital stays for alcohol related harm (Narrow definition) (SAR)	2011/12-2015/16	SAR	67.5
26	Hospital stays for alcohol related harm (Broad definition) (SAR)	2011/12-2015/16	SAR	62.0
27	Emergency hospital admissions for hip fracture in 65+ (SAR)	2011/12-2015/16	SAR	65.1
28	Limiting long-term illness or disability (%)	2011	%	18.8
29	Deaths from all causes, all ages (SMR)	2011-2015	SMR	79.5
30	Deaths from all causes, under 75 years (SMR)	2011-2015	SMR	67.1
31	Deaths from all cancer, all ages (SMR)	2011-2015	SMR	60.4
32	Deaths from all cancer, under 75 years (SMR)	2011-2015	SMR	79.8
33	Deaths from circulatory disease, all ages (SMR)	2011-2015	SMR	60.3
34	Deaths from circulatory disease, under 75 years (SMR)	2011-2015	SMR	65.8
35	Deaths from coronary heart disease, all ages (SMR)	2011-2015	SMR	70.4
36	Deaths from stroke, all ages, all persons (SMR)	2011-2015	SMR	61.2
37	Deaths from respiratory diseases, all ages, all persons (SMR)	2011-2015	SMR	74.7
38	Deaths from causes considered preventable (SMR)	2011-2015	SMR	72.1

Abbreviations:

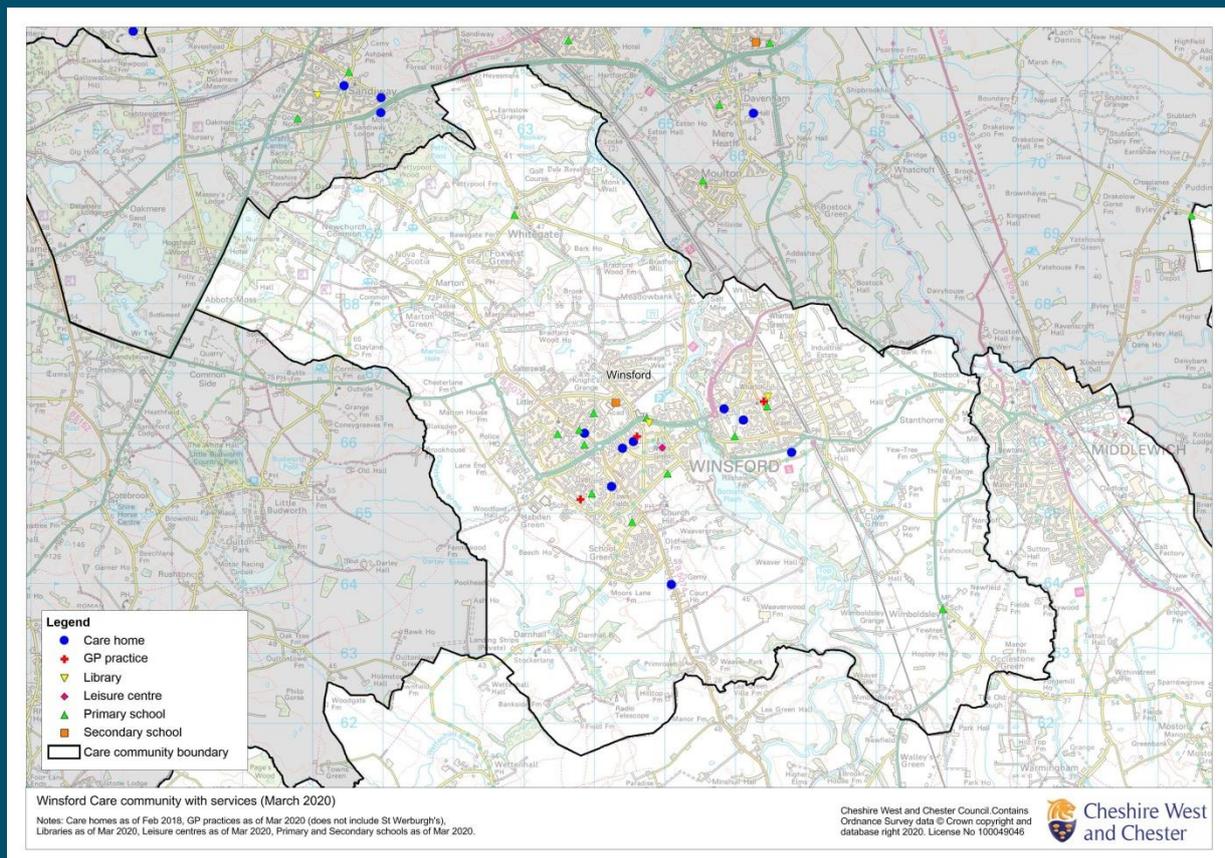
SAR - Standardised Admissions Ratio
SIR - Standardised Incidence Ratio
SMR - Standardised Mortality Ratio

Notes are calculated by dividing the observed total number of admissions, new cases or deaths in the area by the expected number and multiplying by 100. Expected numbers are calculated by applying age sex specific death rates for England in 2011-15 to each area's population.

Significantly better than England Not significantly different Significantly worse than England

Public Views on Health and Care during the Coronavirus (COVID-19) Pandemic in Winsford

October 2020 – March 2021



Introduction

Between 16th October 2020 and 23rd March 2021, Healthwatch Cheshire received a further 349 responses to our Health, Care and Wellbeing survey from local people across Cheshire West and Chester. Our initial reports based upon our survey findings were published earlier in the year, and covered the period between May 2020 and 15th October 2020. Those reports are available to read on our website (www.healthwatchcwac.org.uk). This follow-up report covers the period up until the anniversary of the first lockdown announcement, and provides further insight into how people have coped during the pandemic, changes that may have occurred in relation to accessing services, and any concerns people have about the current situation and the future.



In total, since our survey began in May 2020, we have received feedback from 93 residents of Winsford to our Health, Care and Wellbeing survey. This report covers the 33 responses specifically from October to March 2021.

How do you feel about accessing services?

A common concern raised by people in Winsford throughout the pandemic has been of a perception of not overburdening the NHS by not accessing services. Since October 2020, most people now appear happy to access services in this way and are not concerned about making, attending or travelling to appointments.

Perception of
not wanting to
overburden
the NHS

- *“I feel quite comfortable going to my GP or hospital if I need to.”*
- *“My doctor has had a triage system for appointments even before Covid, so nothing has changed in this aspect.”*
- *“Terrified I will be wasting their time. Also, I am really scared of contracting COVID.”*
- *“On my personal part, I have not needed healthcare services during all of the year but I have had to access services on several occasions on behalf of elderly relatives (mother-in-law and her partner). I am completing this survey on behalf of my step father-in-law.”*
- *“I think the triage in my practice works well, I explain what symptoms I have, then either get a call to explain what to do or as has happened the clinician was concerned and asked me to visit the practice for a hands on examination, this means the right clinician sees the right patients and the wait to see or speak to a clinician is much lessened.”*

Opinions of video or phone appointments

A large number of respondents have now experienced a healthcare appointment by video or phone call. When we asked people to tell us more about this, in relation to GP and hospital appointments people indicated that they would be happy continuing with this for certain appointments; a similar sentiment to throughout the pandemic. However, the main concern arising from this kind of appointment was the lack of a physical examination. Comments include:



People are happy to use video or phone appointments depending what it is for

- *“It all depends on the type of appointment, obviously you can’t have a thorough examination but you could say talk about depression or some sort of thing along those lines.”*
- *“People misunderstand what you are saying on the phone and it’s hard for them to actually tell you what is wrong just by you describing what is wrong.”*
- *“I prefer to see my GP face-to-face but there would be certain things like test results that could be discussed over the phone.”*
- *“It saves the need for travel, waiting around and saves face-to-face appointments for those that really need them.”*
- *“If the problem was something straightforward e.g. water infection, then I would be pleased not to have to go out. However, for a lump or something worrying I would want a physical exam.”*
- *“If the problem was something straightforward e.g. water infection, then I would be pleased not to have to go out. However, for a lump or something worrying I would want a physical exam.”*
- *“If it is more efficient, I do not have any problem with video appts but there are likely to be times when a face-to-face consultation cannot be replaced by a video.”*
- *“Depends on what it’s about. For example, just to talk about a simple issue or discuss results if fine on the phone. Except for the sound quality. Being hard of hearing I have noted sound quality is poor quite often. Staff using speaker phone. Headsets...”*
- *“It means I’m not having to be away from work for half a day, the GP in my practice seem to do this well and I’m not trying to get an appointment and waiting days to speak with a clinician, less chance of picking up viral illnesses colds, flu, COVID, from sitting in the waiting room (pre COVID). Better for environment as I’m not making trips to surgery, hospital etc. Appreciate that on occasion clinician will need to ask for tests, physically examine and need to be on the ball where they need to catch red flags for serious illness, more stress for the clinician but for me it feels better, reassurance where it’s needed and asking me to go to the surgery when needed. Seems so much more efficient.”*

Have you had any face-to-face medical appointments over the last few months?

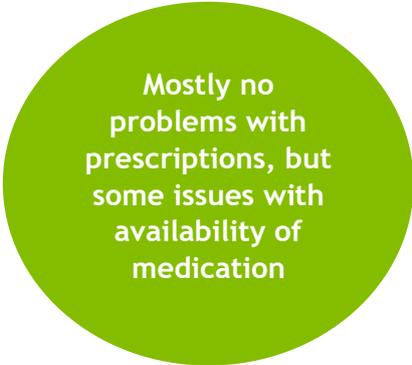
As time has progressed more people have been accessing healthcare appointments face-to-face, and these are now being accessed more regularly than earlier in the pandemic. Since October 2020, over half of our Winsford respondents told us that they hadn't had an appointment in this way. Those that had, talked about how they felt safe and comfortable when accessing face-to-face medical appointments:

People feeling
safe during
face-to-face
appointments

- *"I have just finished a 6-week Day Patient therapy at St Luke's Hospice, as ever they were very kind, thoughtful, patient. The Day Hospice was clean and Covid Compliant, I felt very safe having my treatment there."*
- *"Smear test. They have moved the reception desk to in the foyer, so no unnecessary people in GP surgery. Once in surgery I felt safe, didn't have to wait, dealt with very professionally and with COVID regulations in place. Kept informed at all times of procedure and what to expect. Didn't feel at risk at all."*
- *"I was nervous at first but the staff was calm and kind. It felt safe and clean too. This is both at the breast clinic at Leighton and the doctor's surgery."*
- *"It was with the practice nurse for blood pressure check and bloods. She was abrupt and rude and would not do any routine bloods even though I have them done every year, because of Covid-19."*
- *"Pre-op appointment - extremely stressful and did not like the procedure at all. Mammogram - pretty much the same as usual. A&E visit felt well managed and safe."*
- *"Brilliant. The procedures in place did give me confidence and everything was calm and reassuring."*
- *"Started as a booked phone appointment but 15 minutes before the call the Doctor called and asked me to go in, the surgery was empty the doctor came to the door took me to the room and did a full and complete examination I left feeling I had been dealt with properly and promptly."*
- *"I felt safe. Practice nurse was wearing PPE."*
- *"Fine, well organised."*
- *"As this was in hospital setting (father-in-law taken there by ambulance during lockdown) and I was not present then I cannot comment other than to say that he appears to have received the best of treatment."*
- *"Excellent, I felt very safe."*

Have you had any issues with prescriptions or medication?

Between October 2020 and March 2021, over two-thirds of respondents in Winsford reported not having any issues with medication and prescriptions, similar to figures reported earlier in the pandemic. However, when prompted to share their experiences, there was a mixed response in relation to the availability to medication:



Mostly no
problems with
prescriptions, but
some issues with
availability of
medication

- *“Order online, pharmacy phones me to let me know it’s ready.”*
- *“All my cancer drugs are finetuned to allow me to work, the prescription is sent to pharmacy in Winsford, and only on one occasion in since March I have had all of my drugs on time. The one time I had to wait for one drug for a week, it did cause me some complications, but it resolved itself.”*
- *“These are ordered online and there have been no problems.”*
- *“Unable to get some medication and family standing in long lines for hours to be turned away when they were next because the staff were having lunch! Which put everyone outside at more risk of spreading or catching Covid.”*
- *“Needed medication from hospital but GP couldn't prescribe. 2hrs of phone calls to get what's needed.”*
- *“At the beginning of lockdown, it was extremely difficult to obtain Rx from GP practice and to have them filled in pharmacy. Likely to have been due to lack of experience of practice and pharmacy working in such circumstances and public panic at need for service but on several occasions, I had to queue at both practice and pharmacy for up to one hour.”*
- *“I had to explain to a dentist that they could send my script electronically to a pharmacy... I could not pick it up as I was self-isolating.”*
- *“The practice and community pharmacy have been as always, I request my prescription and they supply, no problems, and the Doctor calls every year to call me for my bloods bp and a review to see how I am.”*

Have you experienced any disruptions to your hospital-based treatment, outpatients appointments, or operations?

Between October 2020 and March 2021, one-third of people told us about appointments being cancelled or delayed due to the impact of the pandemic. People told us they have experienced poor communication in relation to the disruptions to the service:



Disruptions to
hospital-based
treatment
including
cancellations
and waits

- *“All of my Oncology appointments have been my telephone along with my GP appointments. My 3-monthly scans I have had to attend Leighton Hospital for have been on time, but they have had issues getting a canular in due to my veins collapsing but I attended the ICU before my last scan and they put it in for me.”*
- *“Eye appointment at Leighton cancelled in April, still not rearranged.”*
- *“Long wait for gastro appointment.”*
- *“Just cancelled, no follow-up as yet.”*
- *“I should have been called for a mammogram but this has not happened.”*
- *“Knee replacement operation due April/May obviously cancelled, but no communication whatsoever from the hospital. Sudden unexpected pre-op appointment was extremely stressful. Subsequently taken off the list due to poor test results, very uninformative letter received and it was left to my GP a to explain the concerns. Now back on the list and communication this time has been better.”*
- *“Should have had cardiac appointments and cardiac rehab following a heart attack. Did not happen; I felt abandoned but fully understand the reasoning.”*
- *“I was sent a letter via Wythenshawe Hospital of an appointment to attend for my procedure but due to the Royal Mail not delivering my letter in time I could not have the procedure for my bowel incontinence.”*
- *“Longer waiting times.”*
- *“Still waiting on an MRI Scan. Generally longer waits all round.”*

How Coronavirus has affected people's mental health

We asked people to tell us about the impact that the pandemic has had upon their mental health. People talk about how they have struggled more as time has gone on and the impact of the longevity of the pandemic. There is a general feeling amongst respondents that as time goes on there are greater feelings of anxiety, unhappiness and frustration with lockdown.



Frustrations with
the national
lockdown
causing anxiety
and unhappiness

- *"I'm working from home and have lots of communication and interaction from my team over Microsoft Teams so do not feel isolated."*
- *"I have gone back to work and this always helps me to concentrate of other things, so I don't dwell."*
- *"In the past week we have been told we would be in tier 2 rather than fully locked down. So I don't feel any worse than before."*
- *"Although I don't suffer myself with mental health, I feel that during this pandemic it has affected my wellbeing a lot in regards to the employment I am in."*
- *"I am in the best place I have been in a long time due to sorting my relationship out with my partner and my kids and family life just being much better."*
- *"I am afraid that I will catch COVID as I know I would not survive it."*
- *"My ex-husband is suffering severe depression and has been admitted to hospital. I cannot contact him. Also I am not sleeping properly, maybe four hours a night on and off. Since the news of a variant of COVID I am worrying more about getting it even though I have not been in contact with anyone other than the Morrisons delivery driver (at a distance)."*
- *"Because I am so lonely with not only mental health but physical health problems. I do not feel supported at all!"*
- *"It is a bit of a coincidence that my father-in-law's mental health has deteriorated very significantly during the past year. His dementia has advanced very quickly from being able to be responsible for his own (and his partner's) care in Dec 2019 to now being entirely dependent in a care home with a DoL in place."*
- *"Having to isolate for 4th time, can't see family, can't go out. Really do you have to ask this question? The whole country is down."*
- *"Constantly worrying about spreading and contracting the virus, unable to see family and friends, I work, eat, sleep repeat. I've also been very unwell in the summer months with severe mental health issues but was treated well for this."*

We asked people to tell us what would help them to maintain or improve their physical or mental wellbeing

We asked people to tell us what would help them to maintain or improve their physical or mental wellbeing. There are a small number of people telling us that they don't require any support with their mental or physical health, though as time has progressed people are telling us more about what helps or could help, particularly exercising and being outside and the support of friends and family. This echoes earlier findings, though exercising and being outside is now more prevalent a response than seeing family and friends. This is likely to be as a result of the longevity of lockdown, particularly through the winter months:



What are your current concerns about the future impact of the Covid-19 pandemic?

- *“Exercise, church, friends.”*
- *“Friends understanding what it means to live with a lifelong terminal illness, sometimes because I look well and don't moan people put it to the back of their minds and forget.”*
- *“Subsidised gym. Reduced working hours.”*
- *“Gentle exercise which in the summer I did but I am struggling to find the will in winter when it's cold.”*
- *“I have the support from family friends and work colleagues.”*
- *“Going for daily walks and just spending time with the people you live with.”*
- *“Open the gyms back up, and keep them open. Give people a life... not just work... life is like work. Feel like I am being tagged with all these restrictions... even prisons normally allow family to visit.”*
- *“To be able to go out and see places. I don't like the feeling of being kept home for a long time.”*
- *“Seeing my family.”*
- *“Sleep! Also pursuing interests such as genealogy, piano playing, learning to crochet.”*
- *“Headspace on YouTube.”*
- *“More support being accessible.”*
- *“By people stopping spreading it”*
- *“The pandemic being over.”*

Concerns raised by Winsford residents between October 2020 and March 2021 were slightly different to what they were in the earlier stages of the pandemic. Earlier, people were concerned about others not observing social distancing and about money and economic concerns. As time has gone on however, fewer people are reporting concerns about social distancing and not observing rules in the future, which could in part be due to the ongoing vaccination programme. More people have talked about concerns regarding being unable to visit and care for friends and family members and the mental and physical health of others.



Concerns about not being able to visit or care for family and friends, and worries about their mental health

- *“General anxiety around the Covid situation.”*
- *“More worried about Brexit.”*
- *“Lack of support from supermarket regarding Xmas delivery over the holiday the last delivery slot I was able to get is 12th December, next available is end of December. No allowance to carry on for the shielding group.”*
- *“Stay at home.”*
- *“Common sense displayed by members of the public (or lack of it).”*

Healthwatch Cheshire continues to provide up to date information to partners and publish further reports on our websites. You can read our reports on what people across Cheshire have told us about their experiences by visiting our website:

www.healthwatchcheshire.org.uk

You can contact us on:

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Tartan Rug

This is the Tartan Rug for the Winsford Care Community (Public Health England, 2019). The health profile or ‘tartan rug’ shows how each ward within Cheshire West and Chester compares with all other wards in England across a range of health indicators and outcomes. Although the rug only includes a limited number of indicators, it does provide an overview of local health need and a tool to aid discussions about local priorities. Healthwatch Cheshire used this resource when planning our activity

Produced by Cheshire West and Chester, Insight and Intelligence team. Version 2 : October 2019

		Period	Value type	Winsford
1	Total population (MYE 2018)	2018	Number	33,840
2	BME population (Census 2011)	2011	%	4.0
3	Not proficient in English (Census 2011)	2011	%	0.3
4	Population under 16 (MYE 2018)	2018	Number	6,890
5	Population aged 65 and over (MYE 2018)	2018	Number	5,986
6	Income deprivation - English Indices of Deprivation 2015 (%)	2015	%	18.8
7	Child Poverty - English Indices of Deprivation 2015 (%)	2015	%	27.4
8	Child Development at age 5 (%)	2013-2014	%	56.3
9	GCSE Achievement (5A*-C inc. Eng & Maths) (%)	2013-2014	%	47.1
10	Unemployment (%)	2018	%	2.1
11	Long Term Unemployment (Rate/1,000 working age population)	2018	%	1.8
12	Older people living alone (%)	2011	%	30.0
13	Older People in Deprivation - English Indices of Deprivation 2015 (%)	2015	%	18.3
14	Emergency hospital admissions for all causes (SAR)	2011/12-2015/16	SAR	138.7
15	Emergency hospital admissions for CHD (SAR)	2011/12-2015/16	SAR	123.9
16	Emergency hospital admissions for stroke (SAR)	2011/12-2015/16	SAR	122.2
17	Emergency hospital admissions for Myocardial Infarction (heart attack) (SAR)	2011/12-2015/16	SAR	122.8
18	Emergency hospital admissions for Chronic Obstructive Pulmonary Disease (COPD) (SAR)	2011/12-2015/16	SAR	132.7
19	Incidence of all cancer (SIR / per 100)	2011-2015	SIR / per 100	106.2
20	Incidence of breast cancer (SIR / per 100)	2011-2015	SIR / per 100	95.7
21	Incidence of colorectal cancer (SIR / per 100)	2011-2015	SIR / per 100	118.3
22	Incidence of lung cancer (SIR / per 100)	2011-2015	SIR / per 100	139.6
23	Incidence of prostate cancer (SIR / per 100)	2011-2015	SIR / per 100	101.6
24	Hospital stays for self harm (SAR)	2011/12-2015/16	SAR	158.9
25	Hospital stays for alcohol related harm (Narrow definition) (SAR)	2011/12-2015/16	SAR	115.7
26	Hospital stays for mental health (Narrow definition) (SAR)	2011/12-2015/16	SAR	107.7
27	Emergency hospital admissions for hip fracture in 65+ (SAR)	2011/12-2015/16	SAR	101.3
28	Limiting long-term illness or disability (%)	2011	%	20.1
29	Deaths from all causes, all ages (SMR)	2011-2015	SMR	118.8
30	Deaths from all causes, under 75 years (SMR)	2011-2015	SMR	120.7
31	Deaths from all cancer, all ages (SMR)	2011-2015	SMR	114.0
32	Deaths from all cancer, under 75 years (SMR)	2011-2015	SMR	117.1
33	Deaths from circulatory disease, all ages (SMR)	2011-2015	SMR	128.4
34	Deaths from circulatory disease, under 75 years (SMR)	2011-2015	SMR	143.7
35	Deaths from coronary heart disease, all ages (SMR)	2011-2015	SMR	136.9
36	Deaths from stroke, all ages, all persons (SMR)	2011-2015	SMR	132.6
37	Deaths from respiratory diseases, all ages, all persons (SMR)	2011-2015	SMR	127.3
38	Deaths from causes considered preventable (SMR)	2011-2015	SMR	122.9

Abbreviations:
SAR = Standardised Admissions Ratio
SIR = Standardised Incidence Ratio
SMR = Standardised Mortality Ratio

Ratios are calculated by dividing the observed total number of admissions, new cases or deaths in the area by the expected number and multiplying by 100. Expected numbers are calculated by applying age-sex specific death rates for England in 2011-15 to each area's population.

 Significantly better than England

 Not significantly different

 Significantly worse than England