

**Covid - 19 Residents
Survey & Focus Group
Report 2020**

You said we did

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1. Acknowledgements

Healthwatch Rochdale would like to thank everyone who was involved in this piece of work, both professionals and Rochdale residents. Thank you to the professionals who have shared the local survey and focus group information, but a special thank you to all the residents who have taken their time to give their personal feedback on the current situation.

2. Disclaimer

The comments outlined in this report should be taken in the context that they are not representative of all residents/clients and care staff in the Rochdale borough, but nevertheless offer a useful insight. They are the genuine thoughts, feelings and issues that residents/clients and staff have conveyed to Healthwatch Rochdale. The data should be used in conjunction with, and to compliment, other sources of data that are available.

3. About us

Healthwatch Rochdale is an independent voice for the people of the Rochdale borough. We are here to listen to the experiences of Rochdale borough residents and give them a stronger say in influencing how local health and social care services are provided. We listen to what people have to say about their experiences of using health and social care services and feed this information through to those responsible for providing the services. We also ensure services are held to account for how they use this feedback to influence the way services are designed and run.

Healthwatch Rochdale was set up in April 2013 as a result of the Health and Social Care Act 2012 and is part of a network of local Healthwatch organisations covering every local authority across England. The Healthwatch network is supported in its work by Healthwatch England who build a national picture of the issues that matter most to health and social care users and will ensure that this evidence is used to influence those who plan and run services at a national level.

Our Vision

A better health and social care experience for everyone in Rochdale.

Our Mission

We are the independent voice of local people in challenging and influencing health and social care provision in the Rochdale borough

Our Values

- Independent - We are independent and act on behalf of all local people. We challenge and influence those in power.
- Credible - We hold ourselves to the highest standards through openness and transparency.
- Collaborative - We work with others locally, regionally and nationally and we learn from people's experiences.
- Inclusive - We start with local people first
- Responsive - We take what we know and translate it into actions.

4. Rationale

During the global pandemic local residents had to adapt to new ways of living. To prevent the spread of the virus we were all asked to Stay at Home, Save Lives, and Protect the NHS.

Healthwatch Rochdale carried out a survey in partnership with Rochdale Borough Council to understand how our residents were coping with the situation and to gather information about what would make the situation easier to live with in terms of support from public sector services, and also the wider community.

By gathering information about lived experiences we can identify what has worked well and what things might help to build back better and improve lives. This report is an analysis of the consultation.

The survey ran from 22 May to 30 June 2020. The survey was mostly multiple-choice questions with some free text boxes to gather general views about the impact of the

pandemic on health and wellbeing and experience of health and care services. A total of 673 residents completed the survey.

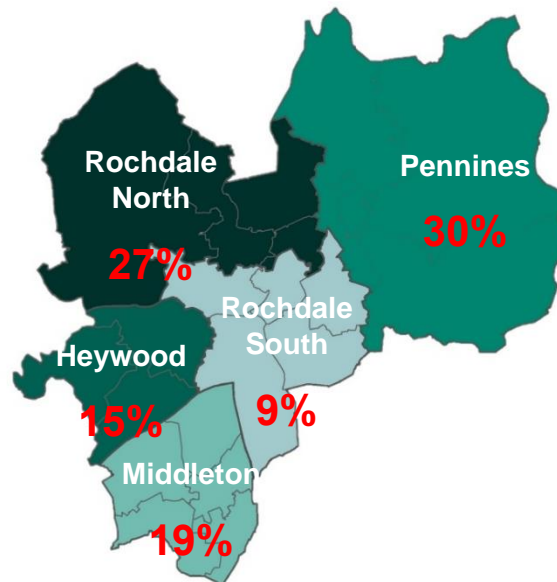
In September, Healthwatch Rochdale ran 17 focus groups to allow residents to share their individual experience. From these focus groups 37 responses were collected and analysed.

Presentation at meetings and #TogetherRochdale

5. Survey Findings

Equality Data

- 673 responses
- 96 interested in taking part in a focus group
- 75% of respondents were female
- 72% of respondents were working age (7% 75+)
- 12% of respondents were BAME
- 8% of respondents were LGBT or Asexual
- 44% of respondents were disabled or LLTI
- 43% of respondents were carers



What the survey tells us

Support

- Half of residents received help getting shopping and phone calls to check they were okay. Other help included pharmacy prescriptions (37%), food parcels (10%), shopping vouchers (7%) and housing support (3%).
- The BAME population required and received more support from GPs and through community voluntary groups than the White British comparator. Also, more received shopping vouchers and phone calls of assurance than White British residents.
- 73% of over 75s reported needing support throughout the pandemic. Very few reported getting any support from the council, GP or community voluntary groups, with the majority receiving support from family or neighbours (help with prescriptions, online shopping and phone calls).

Information and Advice

- The most common access of Information and advice was the media (75%), closely followed by national organisation websites such as NHS or the government.
- The over 75s mainly accessed information and advice through the media (79%), 66% from national websites, and 50% by post. The BAME population mostly accessed information through websites (64%) and the media (59%).

Access to Local Information

- 56% were satisfied with the local information regarding Covid-19
- Most common access to local information was changes to services and how to protect yourself, which was echoed in the over 75 and the BAME populations.
- Of those respondents reporting dissatisfaction, the main reasons include having no help and not receiving any local information. Which was expected to come in the form of leaflets or post delivered to households. The advice received was conflicting and left people confused on how to act.

Mental and Physical Wellbeing

- Mental health suffered the most, with 39% of residents reporting a deterioration, compared to 28% physical health
- Physical - Lack of routine, and the exercise that came with everyday activities stopped due to lockdown led to gaining weight and becoming unfit. Since the weather changed it became more difficult to get out.
- Mental- Working from home pressures, home schooling, uncertainty of the future, unsupported and anxious to leave the house. Depression seems to be a common theme linked to the isolation, and some respondents said that they experienced suicidal thoughts.

Change in Behaviour

- Increased contact with family and friends, with 40% having more social interaction online or via telephone.
- 41% of respondents said that they exercised less.
- 28% of people took the opportunity to do more learning/ hobbies/ activities.
- Healthy eating and drinking alcohol continued as it was.
- Residents sleep has been affected, with 38% losing sleep.

Access to Health and Social Care

- 47% of residents felt that their access to health and care services decreased.
- Change to services were felt within the NHS - many reports of planned treatments, checks and operations being delayed.
- Dentists not operating and GP appointments only going ahead over the phone.
- Parents also expressed worry that children had “nowhere to go”, and this contributed to feeling isolated and anxious.
- 46% of respondents were satisfied with the communication regarding changes to services.

What worked well for residents

- Daily walks, cycling, and online exercise classes.
- Online platforms such as Zoom, Skype, FaceTime, WhatsApp and Facebook have combatted loneliness.
- Supermarkets prioritising the vulnerable and good social distancing measures.
- Remaining positive and encouraging good community spirit, specifically with the unity of the “clap”.
- Remaining in work and having the ability to work from home. Those furloughed were thankful for the 80% pay.
- The weather, keeping busy, doing repairs and home improvements.
- Food vouchers and food parcels received from the council
- Regular updates from the council’s website and social media.
- Access to GPs through phone consultations
- Carers, community support and district nurses that continued to provide care

Residents suggestions - Improvement

- Increased testing, antibody testing and ultimately find a vaccine.
- Relevant accurate messages are delivered to all, by targeting communities and vulnerable groups.
- Help with data/internet costs for families struggling to get online for home schooling and work meetings.
- Enforcing clear rules on social distancing, compulsory face masks in public places, access to hand sanitizer and suggestions on where to buy PPE.
- Mental health services offered to the public and guidance on how to cope at home.
- Support for parents, better services for disabled children.
- Help for people with a life limiting illness and physically disabled, but who the government do not class as clinically vulnerable, so do not qualify for help.
- Support groups and activities for those who don’t use any social media and online skills for the most vulnerable.

Residents suggestions - The future

- Provisions for face masks for those living in poverty
- Calls for tougher policing when breaking Covid-19 rules
- Access to a dentist has been particularly poor, especially when dealing with children or the disabled.
- Difficulty in shopping with children, suggestion of time slots for single parents to shop with younger children
- Criteria for food packages be reassessed as groups of lone vulnerable people were missed.
- Encourage local communities to support one another
- Local updates from councillors were helpful.
- Sharing local stories of Covid-19 patients could help lower anxieties.
- Re-establishing Council run ‘Meals on Wheels’ Services once again to ensure nutritious hot food can be delivered to the Boroughs poor, elderly & vulnerable

6. Recommendations

The below recommendations have been presented and discussed at several strategic meetings across the health and social care system in Rochdale. During all the meetings there was an acknowledgement from statutory partners, (Rochdale Council and Heywood Middleton and Heywood Clinical Commissioning Group), local providers and voluntary and community sector organisations in Rochdale, to work in partnership to tackle the recommendations below.

- Healthwatch Rochdale to increase engagement with young people by establishing a local Youthwatch to enable young people to have a say in shaping local health and care services.
- Healthwatch Rochdale to increase engagement with social housing and care home residents through partnership working with Rochdale Boroughwide Housing and local care home providers
- Healthwatch Rochdale to increase engagement with the BAME Community by working with relevant partner organisations and faith leaders
- For information to be provided in various formats to promote local services - for example, a communication campaign of Our Rochdale Directory to be created and disseminated via the #TogetherRochdale Communications Group
- Increase the distribution of leaflet distribution to share relevant information to those who are digitally excluded
- For local information to be translated into various languages and included on the #TogetherRochdale webpage and disseminated through the #TogetherRochdale Communications Group

7. #TogetherRochdale Response *YOU SAID WE DID*



#TogetherRochdale is a local partnership communications group that exists to bring together voluntary, community, social enterprise, and faith organisations with statutory partners and local providers to ensure there is a consistent partnership approach to communications within the Rochdale borough. #TogetherRochdale works to ensure local communication is effective and meaningful with a wide reach.

The findings from this report were shared with the #TogetherRochdale members to give services and providers the opportunity to communicate to the public any changes that have made and what has been done following these findings.



In response to the findings detailed in this report Healthwatch Rochdale have implemented the following:

Youth

- Begun the process of creating and establishing a Youth Healthwatch to enable young people to share their views and experiences on local health and care services and make sure that young people have a say.
- Will carry out specific pieces of engagement work with young people from October 2020
- Will hold focus groups specifically for young people to share their views and experiences on local health and care services

Social housing and care home residents

- Work in partnership with Rochdale Boroughwide Housing via the #TogetherRochdale group to increase engagement with their tenants
- To arrange a meeting with care home managers to discuss how to best engage with their residents independently

BAME Engagement

- Work with partner organisations to engage with the BAME Community

Signposting Information

- External input - mapping exercise - development of Our Rochdale directory

Communication tools

- Develop the #Together Rochdale communications group to sit as a strategic comms group within the borough.

Mental Health Service Review

- This work is currently being picked up through the building back better work. Healthwatch Rochdale host a monthly mental health forum which gathers service user feedback, this information is formally reported into the local Mental Health Partnership Board

Translated Local information

- Videos created and continue to be developed by Europa and Caring & Sharing with support from Action Together, the videos are hosted on the Healthwatch Rochdale website



Action Together, the Voluntary Community Faith and Social Enterprise Sector, infrastructure organisation in Rochdale Borough is collaborating with communities and public services to address inequalities and support the VCFSE sector. This includes:

Investment in Grassroots

Administering/supporting a number of grants available for communities to help address inequalities:

- Community Response Fund -Equalities Focus
- Places of Worship (and multipurpose Community Buildings) Reopening Fund
- Community Safety Partnerships grants- mentoring and partnership support established for successful applicants

Partnerships and Collaboration with VCFSE:

- Grassroots Gatherings (VCFSE sector network 20-30 orgs - every other Friday)
- #WednesdaysWeekly (Training and information sharing on zoom/YouTube)
- Community and Faith Group (discussion group Tuesdays)
- Food Solutions Network (Food providers collaboration network, fortnightly)
- Economic Support Network (VCFSE orgs that offer economic support, led by Action Together and Citizens Advice)
- Digital Inclusion Discussion group (newly established, linked to the Digital Library Consortium)
- Homelessness Network (led by the Sanctuary Trust and linked to Real Change Rochdale)
- Children Young People and Families network (led by Barnardos)
- Disability Forum (newly established, led by RADDAG)
- Healthwatch Rochdale Forums (newly established, various dates including the development of a Youth Healthwatch Rochdale)

Communication and Engagement

- Engagement Board established as part of Outbreak Plan (member led)
- #TogetherRochdale (cross org comms group every other Tuesday)
- Inclusive Messaging (Co-designing recommendations for inclusive messaging - every other Thursday, led by Healthwatch Rochdale)
- COVID19 Community Engagement - information sharing (Community and Faith leaders and elected members - Wednesdays, led by RBC)
- COVID19 Community Engagement - planning and action (planning group including Public Health, Community Safety, Action Together, Living Well / Street Engagement led by Living Well and community volunteers)

Equalities Assemblies

The Equalities Assembly is a partnership piece of work between Action Together, Rochdale Borough Council and other local organisations including Healthwatch Rochdale. The report has been published [here](#)

The quarterly Assemblies will be a place to listen and learn from each other and provide a focal point for sharing action taken to address inequalities in the Rochdale Borough. These online events bring together the doers and advocates for equality with people who experience inequality and those who support people who experience disadvantage. This includes VCFSE organisations, Public Sector bodies and citizens. Each assembly will explore themes arising from the grassroots of our communities along with insight and intelligence from partners and the latest data.

At the First Equalities Assembly, held in July 2020, 62 participants from local, statutory, and voluntary organisations took part in the discussions around the following 8 conversation topics:

- Covid 19 and South Asian Communities
- Food and Dignity
- Disability and Covid 19
- Covid 19 and Black Communities
- Covid 19, Mental Health and Inequality
- Covid 19 and European Citizens
- Finance and Inequality
- Health and Inequality
- An additional discussion session was held following the Assembly, focused on Age and Covid-19 and was attended by 12 VCFSE and statutory partners



**Heywood, Middleton
and Rochdale**
Clinical Commissioning Group

The Heywood Middleton and Rochdale Clinical Commissioning Group (HMR CCG) have reviewed the Healthwatch Rochdale Covid - 19 Residents survey report about the impact of the pandemic on health and wellbeing and experiences of health and care services.

The CCG acknowledges the level of work put into the survey and particularly in getting 673 local responses.

Overall, the CCG are pleased with the positive responses in the report focussing on the importance of communication and how information was made available for people via the media.

The CCG noted the overall satisfaction with the information provided and how well it was communicated throughout the borough.

The report provides insight into areas to examine such as struggles with isolation, mental health support, access to GP appointments and the ongoing problems with access to dental care which has been a national problem.

The CCG will continue to work with Healthwatch Rochdale and Rochdale Council to deliver clear information and guidance to our local populations through our targeted communications channels.

It is positive to read that respondents are supportive of the safety and precautionary measures in place to reduce anxiety and improve confidence in public services. The CCG would like to take this opportunity to thank Healthwatch Rochdale for their continued support to our population.



The HMR Circle Volunteer Drivers Service hit a 'Lockdown Landmark' as we passed the 1000th trip mark since the start of the Covid 19 lockdown. The 'VDS' has had to repurpose a lot of what it does during this time to help support the Covid 19 response strategy by collecting and delivering prescriptions, doing emergency and standard shopping, distributing information and craft packs as well as being recently able to reintroduce passenger trips to hospital and other medical appointments.



The Healthwatch survey provided a range of interesting and informative findings regarding communications with our residents, in particular around the response to covid-19 in the early weeks and months of the crisis.

While it is important to note that the council is not solely responsible for communicating information about the coronavirus outbreak, it is reassuring that only a small percentage of respondents were dissatisfied with the information they had seen locally. The council has, throughout the pandemic, used a range of channels and techniques to target all age groups and communities, and worked very hard to provide as many people as possible with the information they require.

Since the survey was completed the council and its partners have made further significant efforts to communicate advice and information to residents, particularly hard-to-reach groups. This has included outreach work in the worst-affected areas, mobile advertising, translated materials, use of specialist media, new signage, social distancing materials, appearances on regional and national TV news bulletins, videos, email bulletins, outdoor advertising, leaflets and posters for businesses and targeted social media campaigns. Some of the council's communications work has been cited as examples of best practice by the Cabinet Office and highlighted to local authorities in other areas that have also been particularly hard hit by the pandemic.

Thank you to Healthwatch for undertaking the survey and for sharing some thoughts and opinions around the communication findings.

8. Focus Group Findings

In September, Healthwatch Rochdale ran 17 focus groups to allow residents to share their individual experience. The focus groups were ran via zoom at on varies days and times. Overall 37 Rochdale residents attended the focus groups.

Equalities

- 37 responses
- 53% of respondents were male
- 62% of respondents were aged 18 to 54
- 19% of respondents were BAME
- 8% of respondents were LGBT or Asexual
- 44% of respondents were Disabled or LLTI
- 43% of respondents were carers

Information and Communication

- The majority of respondents received information about Covid-19 via the government letter that was sent out to residents.
- 22% received letters and communication from services on how to continue to use services during lockdown.
- Only 9% sourced information from TV and social media

Information they needed but didn't receive focused around help, including;

- Money
- Making friends online
- Accessing the internet
- Cleaning
- Shopping
- Making appointments
- Reading letters
- Transport
- when services are restarting, including schools.

Residents reported being lonely and needing access to the internet

Worked Well & Improvements

According 37 respondents the following worked well during lockdown: food delivered, helping one another, local and national communication channels, having someone to go to for help, wearing masks, and the Soup Kitchen was very successful and a brilliant support. In order to improve services, it was suggested the following was needed.

- Better access with professionals (doctors and dentists, etc.)
- Free Wi-Fi
- Help to open a bank account, with phone bills and free TV licence
- Improve domestic violence support
- Other services could learn from RCT

- People to talk to (“we are not bad people”)
- Tackle inequalities - ensure that places are as open, diverse, accessible, and inclusive as possible - Poverty action plans.

Access to Children’s Services

- 6 responses referring to services mentioning Children’s Services or stating they were under 18
- All referring to mental health, specifically Rochdale Connections Trust, CAMHS and hospital visit for anxiety.
- Hospital received negative feedback as the respondent received no outcome and was sent home with their child.
- CAMHS appointment was due at the beginning of lockdown and the family are still waiting to hear from the service.
- Rochdale Connections Trust received very positive feedback, continuing the service virtually and staying connected via Zoom.
- Dentist and routine hospital appointments haven’t been accessible which left parents frustrated.

Access to Adult Social Care Services

- 19 responses referred to Adult Social Care Services
- The soup Kitchen, homelessness, food packages, benefits support, and help with reading were some of the support services mentioned in the responses.
- The Soup Kitchen was a great success amongst respondents, many felt it was their only source of support, with “a hot meal and someone to talk to”, being a highlight for many.
- The food parcels delivered to homes were well received.
- A person was given a home after 30 years of being homeless, and a support worker at Awakening Minds helped with letters, bills and benefits.

Access to health services

- 11 responses referring to Healthcare Services.
- All responses refer to prescriptions, doctor or hospital appointments and generally most respondents had positive experiences.
- There were mixed experiences with accessing GPs, some were able to access GP appointments, vaccines, blood tests and regular visits. Whereas others reported not being able to get through on the phone.
- Routine hospital appointments were delayed, and patients were left in pain and waiting for a new appointment or results.
- Two residents reported not being able to access a dentist and being in “bad pain”

9. Recommendations

The below recommendations will be presented to external partners at Rochdale’s Local Care Organisation, Our Rochdale board meeting on 4th November 2020. These recommendations will also be discussed at Healthwatch Rochdale’s Advisory Group meeting in November where further escalation could evolve.

- Short communications survey to be created independently by Healthwatch Rochdale to identify the best way to communicate with the diverse population of the Rochdale borough. Survey to be disseminated through the #TogetherRochdale Communications Group.
- More information to be provided to the general public by providers and statutory partners on changes to local health and care services. Information to be provided via website, social media and #TogetherRochdale Newsletter.
- Based on the results from the Healthwatch Rochdale communications survey, information to be provided in an accessible format based on local needs and requirements. Information to be disseminated via the #TogetherRochdale Communications Group
- For providers and statutory partners to work with the voluntary sector and carry out targeted engagement to enable the digitally excluded to have a voice
- For the #TogetherRochdale Communications Group to work in partnership with the inclusive messaging group to ensure communication is meaningful and accessible to different sectors of the community.
- Healthwatch Rochdale to carry out an independent piece of work to identify variations in the level of service provided by local GPs
- For local health and care services to provide updates to people on waiting lists - even if it is just to confirm they are still on a waiting list as people reported they felt forgotten
- To continue providing local food parcels where required including those who need to isolate due to being Covid - 19 symptomatic
- Dental - to explore the barriers to accessing dentists locally
- Consider which agencies can / are providing support to overcome barriers e.g. opening bank accounts and if they have capacity to meet need
- Consider how people who are digitally excluded due to financial reasons, skill or disability can be supported.

10. Contact Us



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