

## **Staffordshire and Stoke-on-Trent Shadow Integrated Care System Board Response to Healthwatch Coronavirus Survey Report**

**December 2020**

We would like to thank Healthwatch for their robust survey gathering people's experiences when accessing health and care services during the Coronavirus pandemic.

This year has been incredibly challenging for everyone, impacting people's lives at work, socially and in their physical and mental wellbeing.

Health and care staff responded quickly to the pandemic, adapting the way we work to help people stay safe. The NHS has worked hard to maintain essential and urgent services throughout the pandemic. We have had to adapt the way we work, to support social distancing in our wards and clinics and enable our workforce to be in the areas of most need, for example critical care.

This has inevitably led to changes for local people, in particular for more routine care and we recognise this feedback within the Healthwatch report. We would like to thank local people for their support and patience, through what has been the most challenging year for health and care services.

During the summer months, health and care partners reinstated the majority of services and worked hard to tackle a backlog of routine appointments and waiting times. However, we know it will take several years to fully return to the low waiting times that we had before the pandemic.

We acknowledge the findings in the Healthwatch report, alongside the feedback we have received from a range of community groups. We will share the findings on our websites in 2021.

The individual work programmes have considered the following recommendations within the Healthwatch report, and the feedback will inform our ways of working now and in the future.

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

Communications leads from across health and care have worked closely during the pandemic to deliver a sustained campaign through social media and traditional media channels to encourage people to use NHS services and to offer reassurance of the measures taken to ensure the safety of patients. In particular, the campaigns have focused on priority areas including stroke, cancer, maternity and mental health – encouraging people to seek early support for symptoms. We will continue to support these 'Help Us Help You' messages throughout the second wave and beyond, including amplifying the national campaigns at a local level.

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

We recognise that patients who access routine support for long-term health conditions may have been more impacted during this pandemic, with many routine services only offering urgent advice and support. To support GPs and community teams to respond to Coronavirus, many routine services were temporarily paused and guidance was given on how to support patients.

We also recognise that testing capacity – especially for routine blood tests – is a priority for patients. The need for social distancing and additional cleaning has reduced our capacity and led to delays. We have commissioned additional blood services to help reduce waiting times for routine tests.

We also increased capacity within community diabetes teams to increase support and advice by phone. Although we recognise that many welcomed the face-to-face appointments, it was important for people with diabetes to minimise their contact within clinical settings to help stay safe.

Despite the additional measures that were introduced, we recognise the impact this has had on patients. As we continue to work within the social distancing guidance, some services that are associated with high risk of Coronavirus transmission – such as spirometry and endoscopy – will need to remain paused or at significantly reduced capacity. Unfortunately, this will continue to mean long waiting times for patients, which we keep under regular review.

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

In line with national guidance, non-urgent elective care was stood down during the first wave of the pandemic to create additional capacity within the acute hospitals – and this has led to a backlog. We worked with the hospitals to ensure that all essential services – for example stroke – were maintained and had an escalation process for referrals based on clinical urgency.

Nationally, additional capacity within the independent sector hospitals was purchased. This has played an important role in supporting hospitals to maintain essential services, including cancer surgery and chemotherapy. UHNM cancer performance is the best it's been for many years, and amongst the best in the country. However, a side effect of this is that the routine care that the NHS would usually purchase from the independent sector hospitals has had to be postponed.

The hospitals are continuing to monitor GP referrals within the system and regular information is shared with GPs regarding waiting times for diagnostics. Clinicians are reviewing all patients who are on waiting lists to prioritise referrals based on clinical need and length of time waiting. Although we have made some progress on clearing the backlog, we recognise that there are more referrals being made every day which adds to the list, and the impact of social distancing reduces our bed and appointments capacity. We're working hard to reduce the backlog as quickly and safely as possible.

Our hospital trusts are continuing to reassure our patients publicly that services are continuing to operate, under new social distancing requirements. Those patients that have been affected by the impact of the pandemic are being contacted and updated by clinical teams. Anyone waiting for treatment will be contacted as soon as possible, but in the meantime they are encouraged to get in touch with their clinical team if they have any concerns. We will continue to keep under review our communications to help people stay informed and reassured.

**4. Local mental health services to review whether patients are receiving the right care in a timely manner; to improve their patient communications to support accessibility and meet patient need; to identify any barriers and put processes in place to address the issues highlighted.**

We recognise the significant impact the pandemic has had on people's mental health. Our services have had to adapt during this period to offer more virtual appointments rather than face-to-face services – and we recognise the impact this has had on access to services.

We are continuing to offer timely mental health support through 24/7 dedicated helplines. We also want to continue to challenge the stigma around mental health, including our recent 'You are not alone' campaign highlighting the support available. We welcome any support Healthwatch can offer to promote this campaign.

We recognise that a more detailed response to the mental health recommendations is required. This has been prepared by our mental health services and will be shared separately.

**5. Where there is possibility to offer a range of appointment types (remote or face-to-face), ensure that there is a thorough discussion with all patients to confirm satisfaction with the outcome and empathy with the decision.**

Our digital priorities within the NHS Long Term Plan have been accelerated during Coronavirus, with many hospital and primary care consultations now undertaken by phone and video. We worked at pace with a view in the early days of the pandemic to support people to continue to access services – albeit remotely – to keep them safe from harm and reduce unnecessary exposure to the virus.

For many people, these digital tools are welcome – reducing waiting and travel times and supporting easier access to repeat prescriptions. Many of our primary care and hospital departments have used technology for initial triage. This includes patients sending photos or reporting their blood pressure to support initial conversations with clinicians, and means face-to-face appointments are reserved for those who need them. We have invested significantly in the IT infrastructure to support remote working and clinical triage.

However, we recognise these digital tools are not appropriate for everyone – and this is reflected in Healthwatch’s report. Although the initial appointment may be triaged by phone or video, we assure people that anyone who is clinically assessed as needing a face-to-face appointment will be offered one. Anyone who is concerned about their health is encouraged to speak to their GP practice and to feel safe in using GP services. We continually review our digital tools to ensure we are able to see patients in the most appropriate and efficient way.

We would welcome the opportunity for a more detailed conversation with Healthwatch and patient groups, to understand how we can increase the public’s confidence in remote consultations and support an accessible and supportive approach to the use of digital technology in healthcare.

We will continue to work with our services to support effective communications that offer reassurance on the new ways of working and the support available. In addition, we recognise the feedback that communications between services can be further improved. In August we launched the Integrated Care Record locally, which shares information about patients between the various health and social care agencies. This ongoing programme aims to improve communication between these services, including providing quicker access to a patient’s history and test results.

### **Summary**

Despite the challenging environment, we have also seen real examples of innovation and partnership working, which we will want to retain for the future. A good example is our strengthened relationships and joint working with care homes.

We would like to thank everyone for the support and solidarity they have shown to health and care staff this year. We are all keen to return to a sense of normality, but we recognise that this virus will be with us for some time and that we will need to continue to work differently to stay safe.

We are committed to maintaining an open and honest dialogue with the public, and to listen to local people’s experiences as we work hard to provide safe services.