

# Pandemic experiences

**2020 to 2022**

Healthwatch Darlington  
August 2022

# Contents

<b>Contents</b> .....	<b>1</b>
<b>About Healthwatch Darlington</b> .....	<b>2</b>
<b>Executive summary</b> .....	<b>3</b>
<b>Introduction</b> .....	<b>4</b>
<b>Methodology</b> .....	<b>6</b>
<b>Survey findings: Summary</b> .....	<b>7</b>
<b>Survey responses: full details</b> .....	<b>9</b>
<b>Conclusion</b> .....	<b>28</b>
<b>Recommendations</b> .....	<b>28</b>
<b>Responses to our report</b> .....	<b>29</b>
<b>Acknowledgements</b> .....	<b>31</b>
<b>Appendix one: Demographics</b> .....	<b>32</b>
<b>Appendix two: Messages of thanks to services and professionals for their efforts during the pandemic</b> .....	<b>36</b>

# About Healthwatch Darlington

Healthwatch Darlington is the health and social care champion for people who live and work in the Borough of Darlington. As an independent statutory body, we have the power to make sure NHS leaders and other decision makers listen to people's feedback to improve standards of care.

We use feedback to better understand the challenges facing the NHS and other care providers locally, to make sure people's experiences improve health and care services for everyone.

We are here to listen to the issues that really matter to our local communities and to hear about people's experiences of using health and social care services.

We are entirely independent and impartial, and any information shared with us is confidential.

# Executive summary

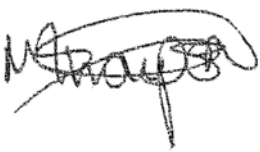
First of all, I would like to express appreciation on behalf of the team at Healthwatch Darlington, to everyone who took part in our surveys and focus groups or took the time to contact us and share their health and care experiences.

Many of you wished to express your gratitude and respect to those in key worker roles throughout the pandemic, and we include your comments in Appendix Two of this report.

Just as importantly you also provided key areas where you hope for focus and improvement in the future. These were:

- Accessibility of existing services and keeping the public up to date with any changes needed through good communication.
- Digital inclusion – that no one is left out because they cannot or do not access online services, or systems that require digital process.
- The ability of carers and loved ones to be present at health and care appointments to provide emotional and practical support to patients.
- The right to choose face to face or online consultations.
- Acknowledgement and solutions of communication barriers, such as wearing masks, when talking to those requiring health and care services.
- Support for ‘Long COVID’.
- Support for mental health.

Due to the pandemic the entire healthcare system was forced to rethink how they could make services accessible to service users whilst keeping our communities safe. Covid did not just affect individuals, it affected everyone and many challenges had to be faced. Moving forward we hope that the close relationships fostered with many different partners within the system such as local authorities, primary care, public health and voluntary and community sector organisations are not lost, but used to improve services for our communities right across the North East and North Cumbria. The emphasis on community centred care will hopefully provide more effective ways of reaching people, improving their health and wellbeing and reducing health inequalities.



**Michelle Thompson BEM**  
**Chief Executive Officer, Healthwatch Darlington**

# Introduction

Healthwatch Darlington wanted to explore the experiences of local people at each stage of the COVID-19 pandemic. This report highlights three important milestones:

- Pre vaccine experiences.
- Vaccine experiences.
- Post vaccine experiences.

## Pre vaccine experiences

Prior to the availability of a vaccine for the COVID-19 pandemic, Healthwatch Darlington sought the views of local people who used specific health and care services:

- Primary care (GP's)
- Hospital services
- Mental health services

Due to lockdown, we gathered the views of local people using an online only survey: 'Healthwatch Darlington's Covid Experience Survey'. The survey was made available to the public on 7th July 2020 and closed on 31<sup>st</sup> October 2020.

In addition to our survey, we engaged service users via online focus groups, email, telephone, and social media messaging, to help us understand the experiences of those using health and care services during the pandemic.

As part of the Hospital Services feedback, we conducted a focus group with representatives of Maternity Voices Partnership (MVP) to share their maternity experiences.

We provided early updates for commissioners and providers who sought to learn from the views of service users which we gathered in Darlington. We also used our hospital services findings to support Healthwatch England and Care Quality Commission's (CQC) national #BecauseWeAllCare campaign.

These views helped to identify what was working well and what might have needed improving. It also helped us to identify emerging trends.

## Vaccine experiences

The first COVID-19 vaccine was approved in the UK on 2<sup>nd</sup> December 2020, with the first vaccine administered on 8<sup>th</sup> December 2020. Other vaccines duly gained approval and the vaccination programme is still ongoing. According to the gov.uk official website, as of 18<sup>th</sup> May 2022, the number of people in the UK vaccinated were as follows:

- **First dose total: 53.4 million people**
- **Second dose total: 49.9 million people**
- **Booster or third dose total: 39.6 million people.**

The vaccination programme for a second booster (fourth dose) is underway to vulnerable groups.

Healthwatch Darlington held a survey between Monday 12th April 2021 to 30th June 2021 to understand local attitudes and perceptions towards vaccines, how well the public understood information about the vaccine programme, and public vaccine experiences.

## Post vaccine experiences

To provide a full picture, following the two pieces of work detailed above, Healthwatch Darlington developed the 'Pandemic Experience Survey 2022' and made it available to members of the public for completion between 2<sup>nd</sup> February 2022 and 24<sup>th</sup> March 2022.

The survey sought to understand changes, if any, in public perception as a result of the pandemic and the vaccination roll out.

This report provides full findings of that survey and summarises the pre vaccine and vaccine roll out findings.

# Methodology

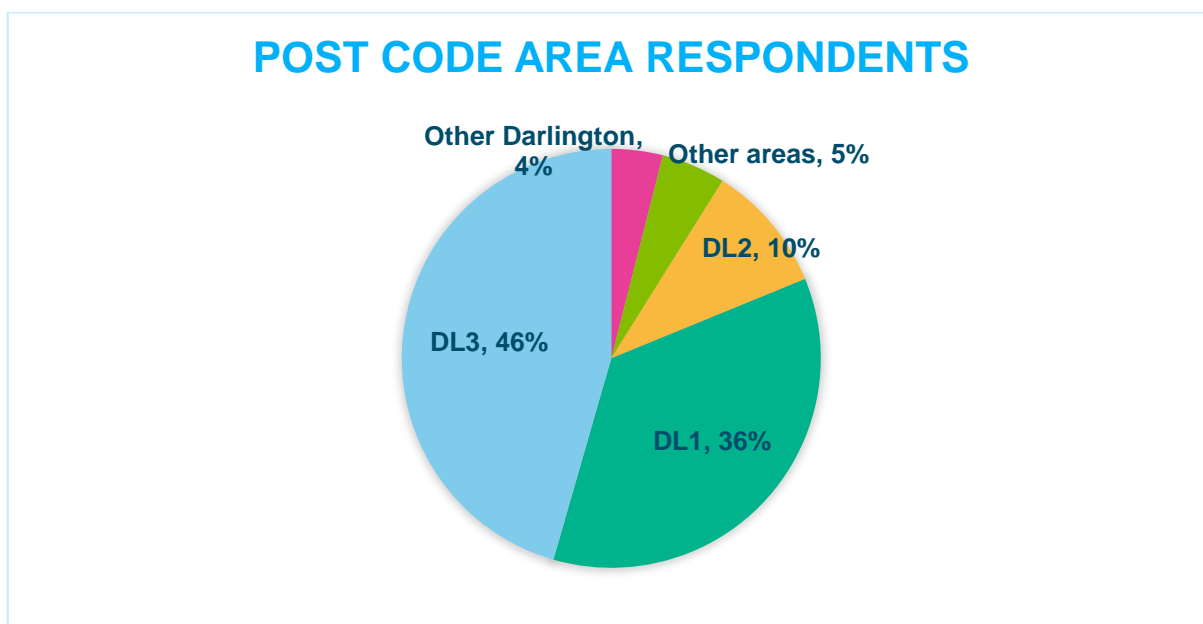
All surveys were developed using a mixed method approach of quantitative and qualitative questions to gather respondents' views.

The final survey 'Pandemic experiences 2022' was available to the public for participation from 2<sup>nd</sup> February 2022 to 24<sup>th</sup> March 2022.

106 respondents completed the survey. Five responded on behalf of a relative, partner or friend they cared for.

## Demographics

Appendix one includes a full breakdown of the demographic profile of people who took part in the 2022 Pandemic Experiences survey. Respondents were residents of the following post code areas.



# Survey findings: Summary

## Pre vaccine experiences

**Primary care experiences:** Results indicated most respondents were happy with their GP service during lockdown (survey closed 31<sup>st</sup> October 2020). Accessibility and digital exclusion were the areas identified as the main cause for concern, particularly for elderly patients and those with a hearing impairment. Participants told us they wanted a choice of face to face or video appointments depending on the reason for a consultation with their healthcare professional.

**Mental health service experiences:** The main theme from participants was choice, **“telephone consultations have their place, but they are impersonal and can feel scripted”**. Those living with anxiety felt that face to face was the preferred option.

Those using the Talking Changes service had varying levels of satisfaction with the service, with some telling us that activities or tools offered were not suitable for the lockdown period.

New and expectant parents who required support for their mental health felt that they didn't fit with existing offerings of 'Talking Changes' or the 'Perinatal Mental Health Service' and felt isolated and unsupported during lockdown.

Participants who required support from the Crisis Team told us they felt this service had been **“unhelpful”** during the pandemic.

It was also highlighted that there was a lack of mental health support for those under the age of ten.

**Hospital services:** There was limited feedback in our surveys and focus groups regarding hospital services, likely due to the prioritisation of care for those with COVID-19 in the early days of the pandemic.

Our focus group with representatives of the Maternity Voice Partnership (MVP) indicated limited access to services. Partners not being able to attend appointments or visit on the post-natal ward were cited as stressful experiences. The inability to be supported by their partner was exacerbated where births were complex and took more than a day.

Whilst we were told care in the Pregnancy Assessment Unit was good, there was a general elevated level of anxiety due to partners not being allowed to be with them.

The loneliness and isolation felt by some new mothers was supported in the community by third sector organisations such as MVP, but they were also limited by lockdown rules, resulting in challenging times for whole families.

## Vaccine experiences

We wanted to understand how well the vaccination programmes had been rolled out in Darlington. Over 500 people took part in our survey. The main findings were as follows.

90% told us the information they received during or after their vaccination appointment was communicated effectively and clearly.

There was general positivity across all age ranges regarding the vaccine. Reasons for not wanting the vaccine amongst the young was they did not feel COVID-19 posed a risk to them, those of middle age were more concerned about accessibility of the vaccine and how far they would have to travel to receive it, whilst older people indicated that only health reasons would prevent them from getting it.



The main reasons for wanting the vaccine amongst all age ranges were broadly similar, with all wanting to primarily protect family and friends and help society in general get back to normal again.

A focus group held with those with lung conditions expressed to us their concerns about future support for long covid.

Our learning disabilities focus group highlighted face coverings being uncomfortable and the pressure felt to wear them resulting in a negative impact on their mental health. They felt their rights were being taken away on the occasions they felt ‘forced’ to wear a face mask rather than their exemption lanyard being acknowledged.

Our focus groups in general highlighted digital exclusion, especially for those who are older, as a concern. Whilst social media and online solutions are acknowledged as helpful, it was hoped that more consideration would be given to those who won’t see information in online formats.

## Post vaccine experiences

106 people took part in our survey, the full results of which are in this report.

In line with our survey during the vaccine rollout, detailed above, the main reasons participants wanted the COVID-19 vaccine was to protect friends and family, themselves, and the vulnerable.

Pfizer was the most common vaccine received by participants for the first and second jab and the booster. Symptoms after each jab were broadly similar and predominantly mild, comprising of aches and pains, flu like symptoms, sore arms, and fatigue.

92% of respondents told us their views about vaccines had not changed during the COVID-19 pandemic.

89% told us it was easy for them to make their booster jab appointment, in line with those who told us in a previous survey they found information about their first and second jabs clearly and effectively communicated.

There was a positive response to a question posed about needing a potential annual COVID-19 jab with 62% saying they would definitely have it and a further 22% probably would.

Over 60% told us communication and information available about the COVID-19 vaccinations had improved as the vaccination programme had progressed. Areas where more could be done included keeping patients up to date with changes to existing services, provision of mental health services, help for people who do not use the internet, accessing repeat prescriptions and COVID-19 testing.

Participants told us that better access, face to face communication, more availability of services were areas that services could improve.

Given the opportunity to express thanks to the health and care professionals throughout the pandemic, many provided words of appreciation which form Appendix 2 in this report.

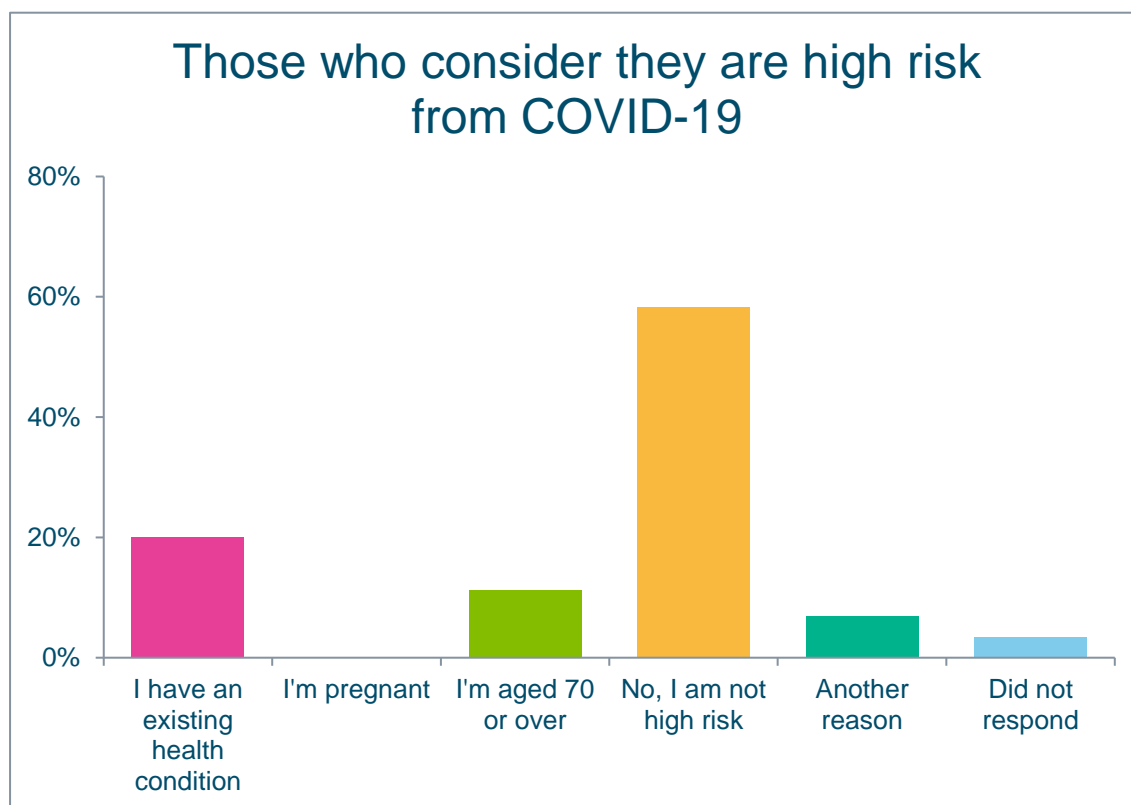
# Survey responses: full details

106 people responded to the survey.

5 of those were completing on behalf of a relative, partner or friend they cared for.

Of those 5, 2 said the person they cared for / supported required information in an Easy Read format.

Respondents advised us whether they considered themselves, or the person they cared for to be at elevated risk from COVID-19. They were able to select more than one reason and responded as per the graph below.



‘Another reason’ included: asthma, learning disability, diabetes, high cholesterol, high blood pressure, taking medication that suppresses the immune system, paraplegic.

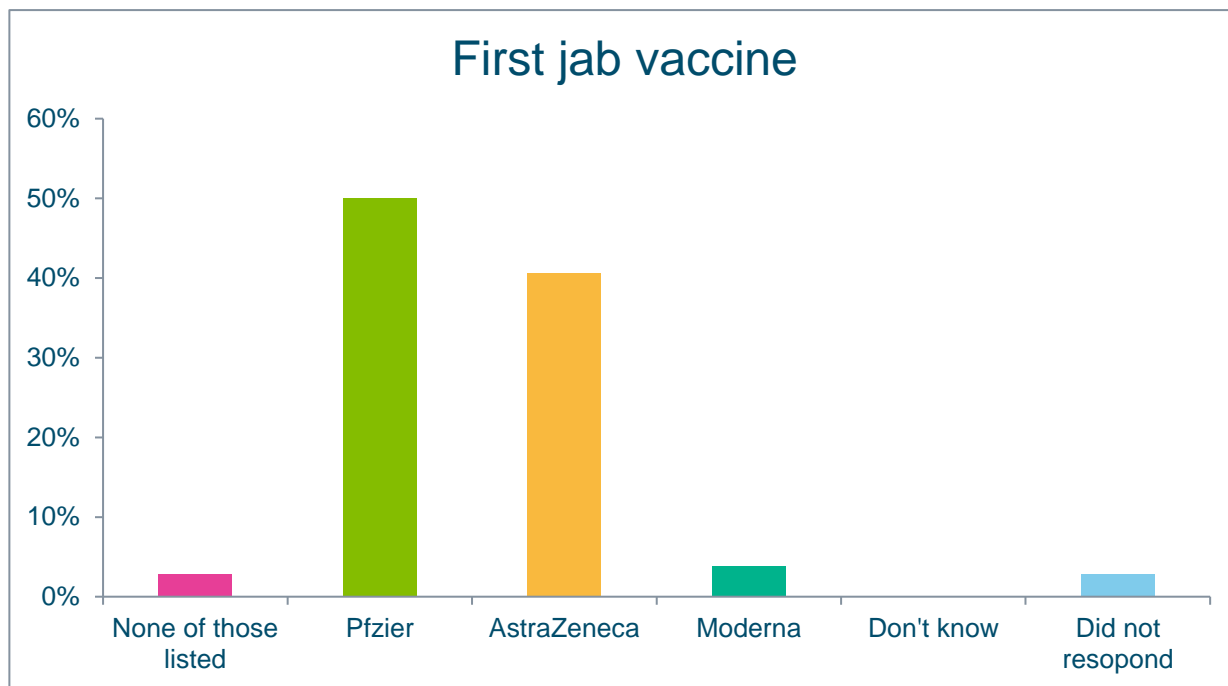
## We asked participants if they had been vaccinated.

Response	Number		Comments
Yes	100	94%	
No	5	5%	<p>“I have weighed up the risks and benefits and decided I don't need it. Vaccinations do not stop transmission or stop vaccinated people from getting Covid.”</p> <p>“Mistrust of info, past experience of severe and repeated respiratory illness following an enforced flu vaccine.”</p> <p>Two respondents advised they were too young.</p>
Did not respond	1	1%	

We asked participants what the main reasons were they wanted the COVID-19 vaccine. In order of popularity, from a provided list which respondents could choose more than one reason, responses were:

Main reasons participants wanted the COVID-19 vaccine	%	Number
To protect my friends and family from getting COVID-19	83%	88
To protect me against getting COVID-19	70%	74
To protect people who are vulnerable/at higher risk of COVID-19	69%	73
It is the responsible thing to do	62%	66
It helps protect the NHS	54%	57
It helped society in general to get back to normal again	39%	41
It helped the economy get going again	26%	28
Government advice/guidance	21%	22
I wanted to visit my older family members at home or in a care home and I needed the vaccine to make sure it is safe for them	20%	21
Medical/healthcare professional e.g., GP, nurse, recommended it	16%	17
It enabled me to get back to work or volunteer	15%	16
Family member/friend recommended it	5%	5
All of the above	11%	12
Don't know/not sure	2%	2
Did not respond	5%	5

We asked participants who had been vaccinated, which vaccine they received for their first jab.



We asked participants if they felt unwell after their first jab, and if they did, to describe their symptoms. 23 respondents told us they did feel unwell.

Their comments included:



“Ache in arm, little tired more than usual.”

“Arm swelled, hot/cold, sleepless.”

“Brief aches and pains.”

“Felt cold, headache.”

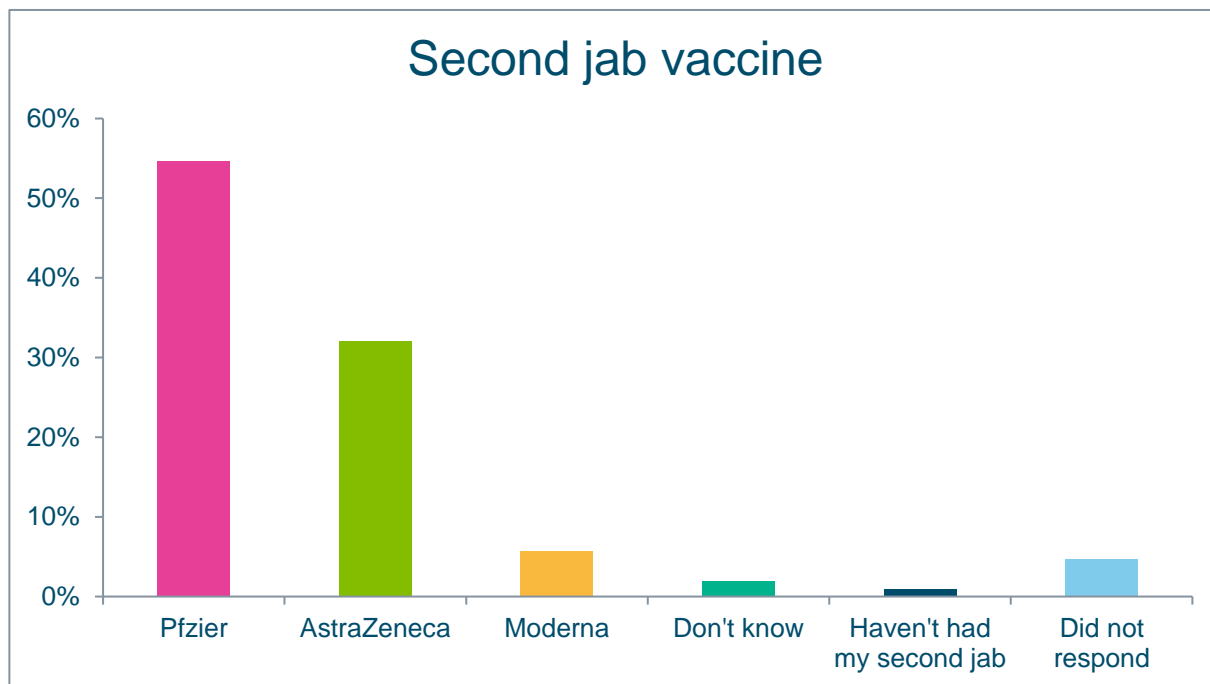
“Flu like symptoms, was quite poorly with chest pains.”

“Had a little bit of itchy skin but that was all, no problems.”

“Sore arm and a bit of a sore head - extra few hours’ sleep sorted it out.”

“Tired, some chills/fever symptoms over the first 24 hours.”

We asked participants who had been vaccinated, which vaccine they received for their second jab.



We asked participants if they felt unwell after their second jab, and if they did, to describe their symptoms. 18 respondents told us they did feel unwell, and their comments included:



“Ache in arm, little tired more than usual.”

“Flu like symptoms.”

“Headache and very painful arm.”

“Muscle ache lethargic.”

“No, other than a little tired on the evening, then fine after that.”

“Stiff arm for a couple of days.”

“Yes. Sickness, headache, chills, temperature, aches and pains, fatigue - I felt horrendous for 24 hours.”

“Yes, I suffered severe migraines and my blood pressure went through the roof. I fainted on day 5 after it and ended up going to hospital for monitoring. It took around 3 weeks for me to go back to normal. I still had the booster and received Moderna. I was ill but not as poorly as I was after my second.”

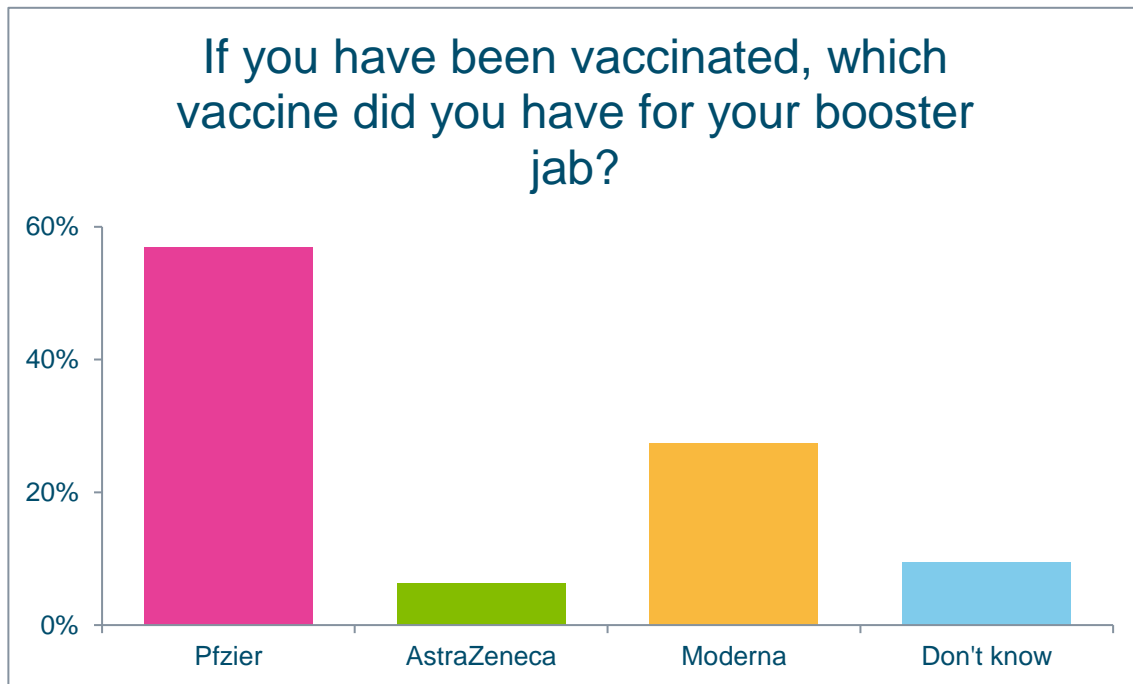
**We asked respondents if they had changed their views on vaccines during the COVID-19 pandemic.**

Response	Number		Comments included
Yes	8	8%	<p>“I have noticed that adverse reactions are being ignored and the news media are not mentioning it.”</p> <p>“I was initially cautious but am not antivax. The emerging evidence of misleading and false information (e.g., vaccines prevent transmission) made me even more resistant. Many people in my immediate family and friends have been fully vaccinated yet have experienced extreme illness from covid - more than some friends who have not been vaccinated. I've had it and was very poorly but no more than previous experience of pneumonia.”</p> <p>“What better insurance can you have.”</p> <p>“Will never have another vaccine again as it aggravated an underlining health condition which shows they just don't know or care enough about it.”</p> <p>“Yes, cause you don't know what's in it.”</p>
No	97	92%	<p>“Always happy to be vaccinated if necessary.”</p> <p>“Always wanted it to protect family.”</p> <p>“I believe in them. It's better than no protection at all.”</p> <p>“I think having the vaccine is the right thing to do, it helps me to stay at work, and protects my family and the NHS.”</p> <p>“It has been forced, I only got mine to go on holiday, all jabs or no jabs should be mandatory.”</p> <p>“Nothing has changed. I wasn't keen on getting the Covid vaccine, but I was desperate for life to return to some normality. My mental health suffered massively during the first lockdown, and I suffer from anxiety now. I am terrified of going into another lockdown and not been able to see my family.”</p>
Did not respond	1	1%	

**We asked participants if they had had their COVID-19 booster jab.**

Response	Number		Comments for reasons for not having the booster jab included
Yes	95	90%	
No	9	8%	“Because I don’t want it.” “Because of side effects and it’s not essential.” “I contracted covid two days before my booster was due, therefore i now have to wait.” “I haven’t had any. People who have had the booster seem to be more susceptible to covid not less.”
Did not respond	2	2%	

**For those who had received their booster jab, we asked them which vaccine they had received.**



We asked participants if they felt unwell after their booster jab, and if they did, to describe their symptoms. 24 respondents said they did feel unwell after their booster jab, their comments included:



“24 hours fluey symptoms.”

“Aches, pains, head ache, flu symptoms.”

“Fatigue for 1-2 days.”

“Headache, cold like symptoms, flashing gold lights in eyes for approximately 3 weeks.”

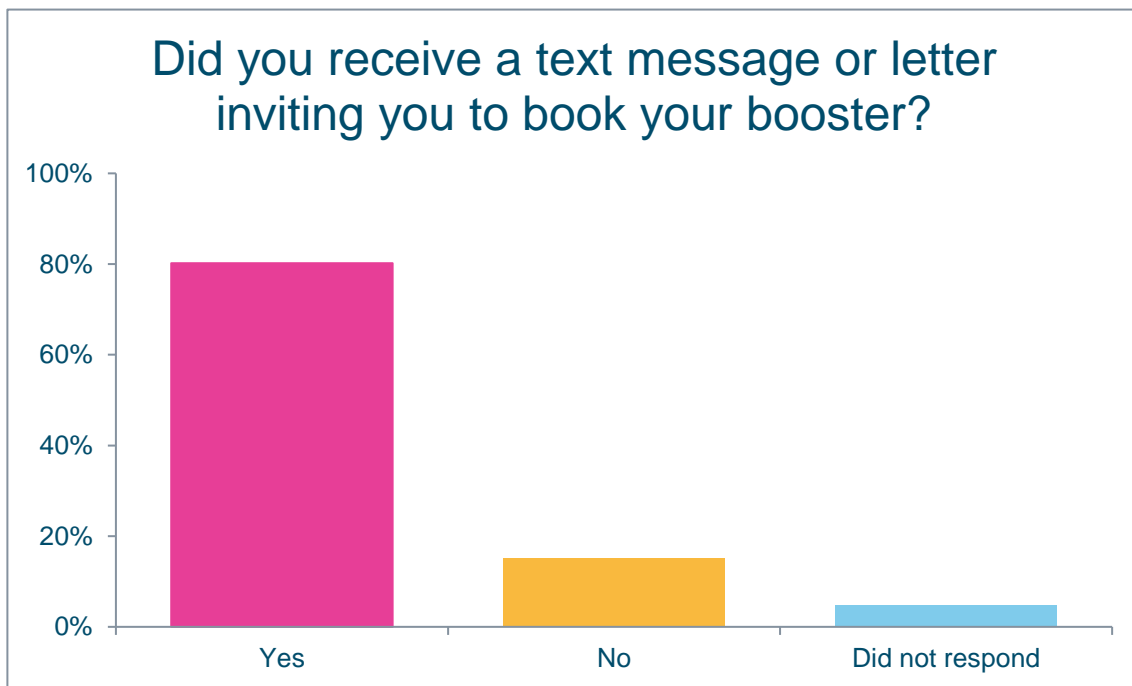
“I was a little unwell with migraines but nowhere near as bad as after my second jab.”

“Painful arm muscle ache lethargy.”

“Very sore arm and raised heart rate,”

“Ached all over, felt worn out, wiped out, very tired, pains in legs, cramps on a night.”

We asked participants if they received a text message or letter inviting them to book their booster.



- 89 respondents told us it was easy to make an appointment for their booster jab.
- 7 told us they did not find it easy to make their booster jab appointment
- 6 did not respond.



### We asked participants where they went to have their booster jab.

They advised us of a wide array of venues including Darlington Arena, Pharmacies, Community Centres, Darlington Exchange, Darlington Memorial Hospital, GP, and the Dolphin Centre.

- **89** respondents advised us they did not have to wait long at their appointment.
- **8** told us they did have a long wait at their booster appointment.

### We asked if participants had encountered any issues at their appointment.

**6** respondents said they had experienced issues at their booster appointment.



“Just thought it unusual not to clean arm before administering jab, but when questioned they said they don’t do it now! Although both jabs, they did?” (Cockerton Pharmacy)

“Long walk from the car park to the building in bad weather.” (Darlington Arena)

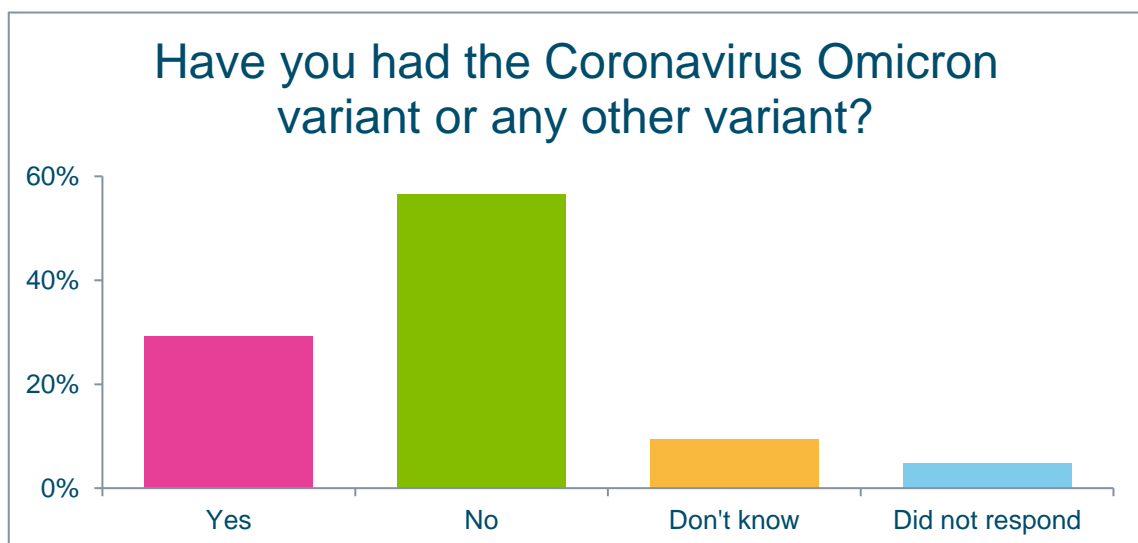
“Shambles of a set up. Mixing bookings with walk ins. Waiting an hour longer than when I was booked in for my appointment.” (Darlington Arena)

“Signage at exit - had to walk along way round the building - no clear signs.” (Old Exchange building, Darlington)

“It was on an evening that I went, and it was dark, I didn't know where it was so felt a bit apprehensive about going. Fortunately, my husband knew where it was as he went there for his, but I thought the lighting was poor outside the building and the signage. There should have been stewards at the entrance to their car park to direct me where to go. I would have felt more reassured and safer when entering and leaving.” (Old Exchange building, Darlington)

“Needed number this was not clear for the first one.” (Dolphin Centre)

### We asked participants if they had the Coronavirus Omicron variant or any other variant.



**We asked those who had it to describe their symptoms. Responses included:**



- “Body aches, headache, loss of taste and smell, tiredness, cough.”
- “Complete loss of smell that lasted for several weeks and only fully returned 6-8 weeks after the initial infection. other than that, a very mild cough.”
- “Cough, loss of smell/taste, feeling unwell and tired.”
- “Coughing, flu symptoms, no energy, unable to eat for several days (vomiting).”

“Fatigue, loss of taste and smell.”

“Flu like symptoms.”

“Headache, cold like symptoms, aches. Then cough and breathlessness.”

“Hoarse voice, sore throat, aching limbs, cough, breathing difficulties, headache.”

“No symptoms - had mild tiredness and headache day 4/5 and then ok.”

“Really bad cough to point of vomiting, headaches, wiped out, exhaustion for several days, very sleepy, ached a lot all over, little out of breath.”

“Sore throat, achy, temperature, exhaustion, cough, aches.”

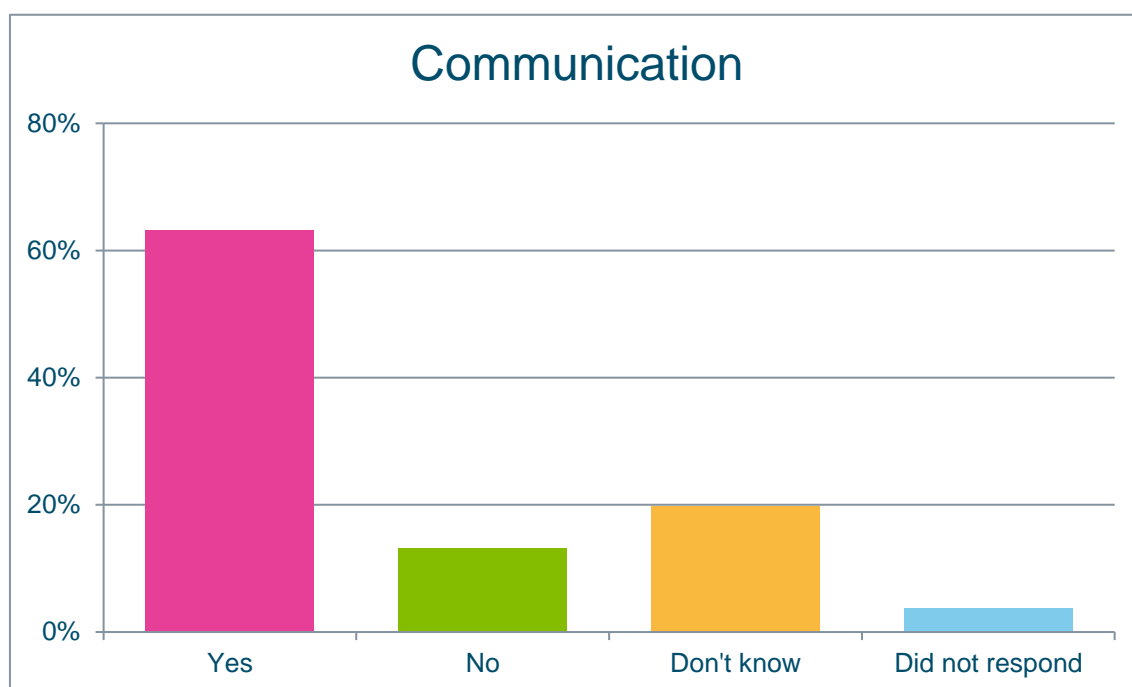
“Mild cold like symptoms.”

**We asked participants if they would be prepared to receive an annual coronavirus vaccination (like the flu jab).**

Response	Number	A representative selection of reasons provided for responses given
Definitely would	65 62%	<p>“I am extremely clinically vulnerable.”</p> <p>“I believe it is prudent to take reasonable precautionary steps to avoid becoming ill and protecting myself, other people and the NHS, and a coronavirus vaccination is no exception.”</p> <p>“I get an annual flu jab and feel getting a Covid jab each winter would be the same in terms of a precaution.”</p> <p>“I think it's a good idea to keep topped up, why go through all these years and throw it away at the end. It can be done with flu jab. If we have to live with all the mutations, we have to do all we can to continue to protect each other.”</p> <p>“I think the virus is with us for the foreseeable future so would like to be protected.”</p> <p>“I would receive any vaccination that could be beneficial. If an annual booster for coronavirus was made available (similar to current offerings of an annual flu jab), I would be prepared to receive one.”</p> <p>“If i felt that poorly with both jabs and booster, i dread to think what i would have been like if i hadn't had them.”</p> <p>“Peace of mind.”</p>

			<p>“Protection for myself and others/population.”</p> <p>Sensible to do so</p> <p>“This virus is not going away any time soon and it will probably change. I would be fine with a 6 monthly booster until it is under control. I do feel that this variant at present is milder than the original.”</p>
Probably would	22	21%	<p>“Depending on risks and levels of virus circulation.”</p> <p>“If it is safe and helpful then i can see no reason not to.”</p> <p>“If it would help slow down the spread and help to work towards eradicating virus.”</p> <p>“It will probably be necessary like the flu jab.”</p> <p>“Would consider the evidence and advice.”</p> <p>“Would need to think about this.”</p>
Definitely would not	7	7%	<p>“Because i would rather fight it out.”</p> <p>“I do not need a vaccine for mild cold which I have 99.7% chance of recovery from.”</p> <p>“Made me too ill. Aggravated an underling health condition.”</p> <p>“They are choosing what jabs are mandatory, it's a red flag for me.”</p>
Probably would not	5	5%	<p>“I would have to wait and see what the situation looked like.”</p> <p>“I would need more information before making an informed choice. I currently do not get the flu jab annually.”</p>
Did not respond	5	5%	

We asked participants if they felt that the communication and information available about the COVID 19 vaccinations and booster had improved as the vaccination programme progressed.



We asked participants which topics, if any, they, or the person they cared for, found it difficult to get clear information or advice about. They were able to select more than one response.

Responses in order of preference are given below.

Response	Number	Percentage
None, I have all the information I need	50	47%
Changes to health care services I usually access (e.g., GP, pharmacy, hospital outpatient appointments)	26	25%
Looking after my mental health	15	14%
Help for people who do not use the internet	15	14%
Accessing repeat prescription medications	8	8%
Testing for COVID-19 / coronavirus	8	8%
Other	8	8%
Shielding people who are at high risk of severe illness	7	7%
Changes to social care services I usually access (e.g., care visits at home, residential, nursing or respite care)	6	6%
Symptoms of Covid-19/coronavirus	6	6%
Self-isolation	6	6%

Looking after my physical health	5	5%
Advice for family / carers	5	5%
What to do if you think someone in your household has Covid-19/coronavirus	4	4%
Social distancing	4	4%
Accessing help in my local community (picking up groceries or medication)	3	3%
Advance care planning and end of life	1	1%

Those who said other explained:

“I am computer literate, but I imagine those less able would have struggled to keep updated.”

“Difficulty with automated messages and answer machine messages from the NHS. No letters just phone calls which I mostly cannot hear.”

“Keeping up to date with changing information.”

“Lack of Dental facilities during lockdown.”

“Mental health support is s\*\*\*\*! Worse for those who have had babies born in lockdown.”

“Omicron has a different set of symptoms but not widely disseminated.”

“There was plenty of advice easily and readily available, but services were not. A leaflet about mental health isn't going to help someone who has poor mental health. My Grandad who was awaiting cancer treatment had clear info that it wasn't going to happen as fast as it should. Information was very easy to find but real support was not.”

“There's no informed consent about vaccines - the risks are not communicated. It's one sided in favour of vaccinating everyone.”

**We asked participants where they, or the person they cared for, found information and advice about the coronavirus pandemic.**

Response	Number		Please tell us if you have found any particular sources of information useful and what these are?
Healthwatch Darlington	21	20%	
Online national organisations (NHS, Government)	71	67%	<p>Government website is always clear regarding advice and details about isolation periods etc.</p> <p>I subscribed to receive daily emails regarding Coronavirus (Covid19) from www.gov.uk. This service has proved invaluable, giving timely, accurate, up to date information and I found it to be a very useful and efficient service.</p> <p>NHS vaccine information has been helpful as have other methods I have used. Except Government advice, it has been all over the place and the most difficult to pin down as to what is actually meant!</p>

			Social media for initial info, then look further into subjects on internet - national organisations.
Online local organisations (Council, hospital, voluntary/community groups)	24	23%	Local council updates
Social media	39	37%	I have had to find information online as the new media is biased, doesn't question anything. There is no balanced view. Social media for initial info, then look further into subjects on internet - national organisations Usually hear something on social media or on TV and then look it up on internet to make sure - Gov. site.
Media (television, radio & newspapers)	59	56%	
Email or text message	24	23%	Text messages to inform vaccine appointments available, health and safety advice - handwashing, face masks, social distancing etc
Letters in the post	15	14%	
From family or friends	7	7%	My Son is a serving Fireman.
Other	4	4%	Computer. Online research.

**We asked participants which NHS or social care service they, or the person they care for, used, contacted, or received during the pandemic. They were able to choose more than one option.**

Response	Number	
Doctor's surgery (GP)	80	75%
Pharmacy	57	54%
Dentist	47	44%
NHS 111 service	21	20%
Accident & Emergency (A&E)	18	17%
Hospital outpatient clinics	17	16%
Musculoskeletal service (MSK)	7	7%

Child & Adolescent Mental Health Service (CAMHS)		
Physiotherapy		
Talking therapies		
District or community nurse visiting your home		
Care home		
Maternity services		
Mental health crisis team	6 or less	6%
Diagnostic screening (outpatients)	for each	or
Help in your home from a care worker	category	less
Adult social care team		
Community rehabilitation team		
Patient transport/North East Ambulance Service		
Older people services (Dementia)		

**We asked participants if there was anything the service, they used could have done differently for them or the person they care for, or anything the service could change. Comments included:**



“Access to a GP, there are things that cannot be identified over the phone, there are things that you need to speak to someone who has the qualifications you need, trust is so important. How do you broach difficult health topics if you don’t feel understood? What do you do when you are not understood, who do you go to? How do you get another appointment because you won’t! Worried about a lot of missed health issues for so many. Almost 2 years now since I or others could access a GP, how can we not expect significant and even deadly consequences?”

“Actually, provide the service. The dentist I'm still waiting for thanks to waiting list is finally Feb 14th. 111 responded to my poorly child and provided antibiotics because our doctor would not see them.”

“Be easy to access and communicate in plain English.”

“Better access to doctor and hospital appointments.”

“Continue to use the E-Consult service in GP surgery alongside face-to-face appointments.”

“Dementia service ground to a complete halt at one point.”

“Easier access to see GP.”

“Face to face GP appointments instead of emails and phone calls.”

“GP needs to improve telephone system, Has taken over 1 hour and multiple attempts to get through. Having to share too much personal information with a receptionist.”

“I have a serious mental health condition that required me to contact the adult crisis team just before lockdown so I think there should have been a phone call to check on my health and if I was ok rather than waiting for my health to deteriorate. Information could have been sent out about coping with my mental health through lockdown that included local support/advice telephone numbers, not everyone has access to the Internet and/or would prefer to speak to a human that just online information. Questions are able to be asked and fears dispersed whereas there was and still so much misinformation about Covid online and on social media that can potentially exacerbate both mental and physical health symptoms. Nobody wants a hospital admission as prevention is key.”

“Make it easier to get an appointment at the GP, they are still reluctant to see people.”

“Maternity care was rubbish in lockdown. Any issues or a long stay, then you feel the effect for a long time to come. Babies born during covid have had mums feel a sense of trauma and that is without the actual birth. There needs to be support available for birth trauma and surely covid and lockdowns should highlight this further.”

“More information on ongoing review appointments which were all cancelled.”

“NHS 111 waiting times over 45 minutes.”

“No - my GP have been great!”

“No, I've been lucky and found the pandemic manageable.”

“No, NHS are excellent.”

“Not locking down GP surgeries and other health organisation. People have not received treatment for foot care when diabetic. people have not received B12 injections for over 2 years. Yet other professions continued and visited Care Home and patients' homes and dealt with issues. so why were some classed as special.”

“The person I cared for has sadly passed away. We struggled to get help from the GP during the pandemic, my father did not like the telephone and no face-to-face appointments available.”

“They are clearly very busy and have no time for basic customer care, common sense and more than basic help. If they could help more initially, I'm sure this would save more time overall for the NHS and stop repeated visits, telephone calls, etc.”

“They needed to use all the same rules.”

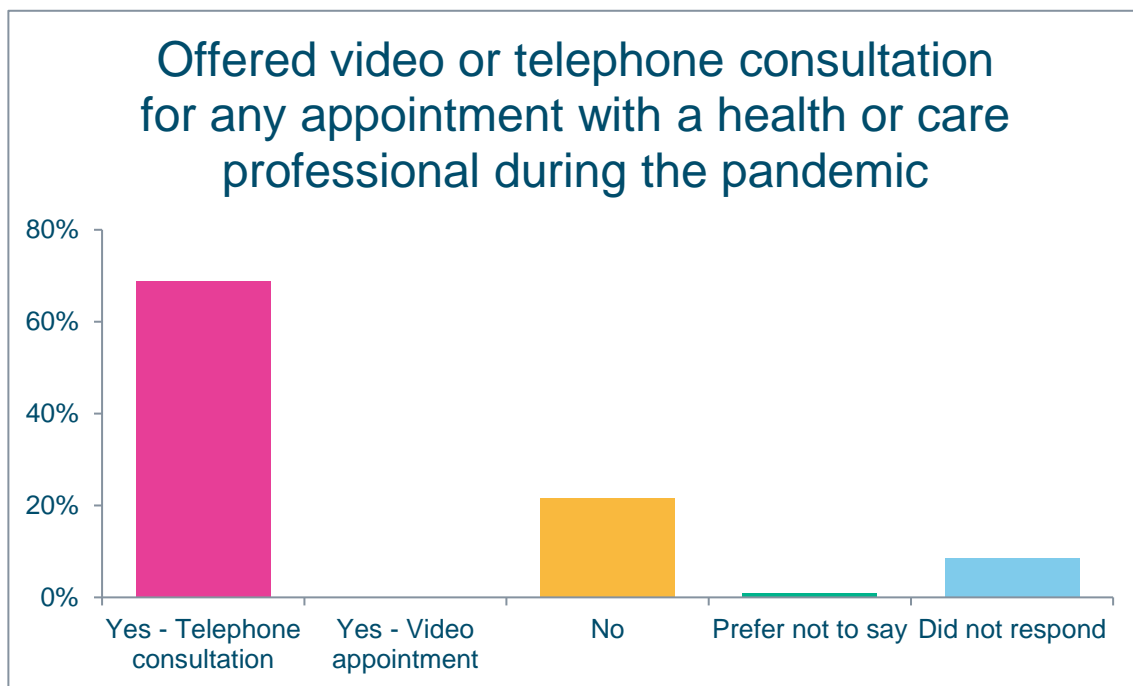
**We asked participants if they or the person they care for hadn't used an NHS or social care services since the pandemic began, to tell us why. 55 participants responded. They could select more than one answer:**

Response	Number
I haven't had any new health problems or needed care	28 51%
I thought my problem could wait until things go back to 'normal'	10 18%
I didn't want to bother health or care services whilst they were busy during the pandemic	9 16%

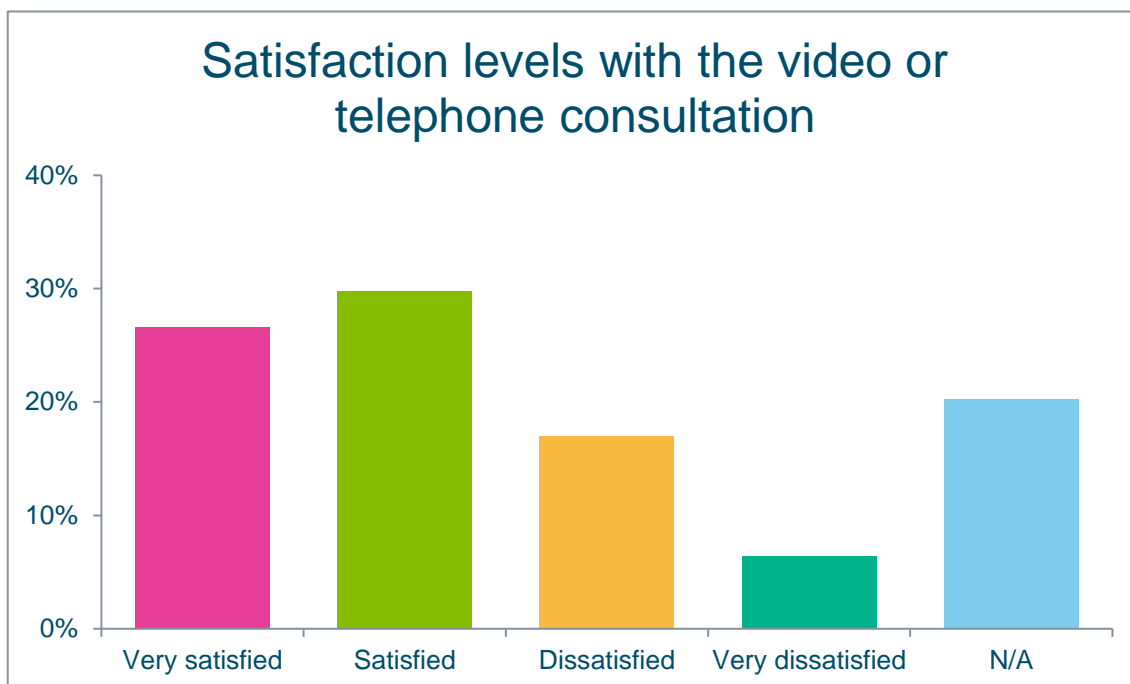


I was worried about catching COVID-19	6	11%
I didn't want to use public transport	1	2%
My appointment was postponed by the NHS or care service due to the pandemic	6	11%
Other	10	18%

We asked participants if they or the person they care for been offered a video or telephone consultation for any appointment with a health or care professional during the pandemic? (e.g., GP, hospital clinic or mental health service).



We asked participants how satisfied they, or the person they care for, were with their video or telephone consultation.



We asked participants if there was anything they would have changed with their video or telephone consultation. Comments included:



“Getting an appointment is very difficult and continues to be so. I object to the fact my surgery even now makes face to face appointment impossible to obtain.”

“An actual appointment where you can explain and show what the issue is, hard to describe some medical problems over the telephone. Then the call is over and thats it.”

“How can you check my lungs in a telephone consultation?”

“I couldn't understand what the GP said as she had a very broad accent. Physical symptoms were missed so I was in pain for longer than necessary.”

“I feel the odd face to face consultation would have been more beneficial than a phone consultation.”

“I think it is very difficult to discuss health problems over the phone.”

“It is very difficult to diagnose a knee injury over the phone.”

“Mental health support by video or phone is not great. You need face to face.”

“Not having a 4 hour time window for the phone call.”

“Nothing great easy service better than attending in person.”

“Prescriptive responsive - questions about personal data taking priority over my obvious distress and crisis. I gave up and called Samaritans.”

“Telephone conversations with CAMHS are difficult to arrange with two parents on one line.”

“Telephone is not the same as in person. They cant see you, pick up body language and often in a telephone its a lot quicker and things can get missed or forgotten.”

“Telephone physiotherapy appointment didn't feel i got treatment.”

“They give no time for the contact just 'this afternoon'. They rang me and I missed the call. They made no further attempt to contact me so I didnt get chance to speak to anyone.”

“This method of communication was not possible as my father did not always understand what people were saying also he was mistrustful of someone he could not see.”

On a sliding scale from ‘No impact at all’ to ‘Very significant impact’, we asked participants to let us know how much of an impact the pandemic had on their mental health, or the person that they care for.

Impact levels	Number	
No impact	20	19%
Some impact	47	44%
Very significant impact	29	27%
Did not respond	9	10%

We asked participants if they, or the person they care for, had been able to access support for their mental health or wellbeing during this time.

Service	Number		Comments about experiences included
Yes, from family and / or friends	38	36%	<p>“During lockdown #1 I desperately didn't want to be here anymore. Family provided support where they could, but it wasn't until lockdown ended that services started to run and even then, it's very much put a piece of paper in front of you.”</p> <p>“In the first lockdown I was considered to be very vulnerable so was shielded. I hadn't realized how bad mentally I was until I was no longer shielding and, thankfully, I had good friends and family to help me overcome my nervousness about going out for the first time after shielding ended.”</p> <p>“MY GP is accessible by online consultation. I have an annual review for my dementia from my GP which is a waste of time but no connection with West Park, probably fortunately.”</p> <p>“Talked to friends and family.”</p> <p>“Weekly walks with friends.”</p>
Yes - from a community, voluntary or charity group/organisation	7	7%	<p>“Being able to see a cheerful smile (mask removed).”</p> <p>“Day care after 15 months of closure.”</p> <p>“Macmillan Bupa Counselling, Talking Changes.”</p> <p>“Parent carer forum Darlington have been brilliant.”</p>
Yes - from a mental health care provider	11	10%	<p>“Health visitors were great, doctor tried hard, talking changes gave me the wrong treatment and perinatal mental health wouldn't see me! I gave in a year ago because there's no MH support pathway for mums.”</p> <p>“Suffered with post-natal depression during pandemic. Received medication via GP.”</p>

			“Used service for NHS workers.”
Yes - online or from an app	7	7%	“Felt scared and anxious. Perhaps could have contacted Mind but felt that they were under huge pressure.” “Joined social media/Facebook groups to ease social isolation.” “Online is a very lengthy process to access.”
No	12	11%	“Trying to live with the rules and regulations has been so difficult. With my husband in a nursing home, I stood on a stool outside his bedroom window for almost 17 months talking through an intercom. It was so hard.”
I have not needed support	38	36%	
Other	3	3%	“Missed my holidays.” “MY GP is accessible by online consultation. I have an annual review for my dementia from my GP which is a waste of time but no connection with West Park, probably fortunately.”
Did not respond	7	7%	

**40 respondents wanted to share any messages of thanks for services and/or health professionals for their efforts during the pandemic. We promised to share these messages with the relevant service and have added them as Appendix 2 to this report.**

# Conclusion.

We are grateful to those who participated in each of our surveys, focus groups, or who provided us with information in other ways.

Before vaccines were available, the concerns of local people were around:

- The ability to access existing services.
- Being excluded from being kept up to date due to lack of access to online services.
- Feeling unsupported when they could not attend appointments with loved ones (primary feedback maternity services).
- Not having a choice of face to face or online consultations.
- Wearing masks and talking to health care professionals wearing masks and the communication barriers this presents.

Once vaccines were available, the concerns expressed above remained:

- The wearing of masks, primarily around communication barriers a mask represents.
- Future ongoing support for existing health needs as well as Long COVID.
- Digital exclusion concerns remained, with hopes expressed that consideration would be given to this obstacle in future service delivery.

Our latest survey in 2022 indicated that in general communications of vaccines and information was good. The areas where more could be done were:

- Keeping people up to date with changes to existing services.
- The provision of mental health support.
- Ensuring digital inclusion.

# Recommendations

- Ensure good communication with the public of any changes to accessibility of existing services.
- Ensure that no one is left out because they cannot or do not access online services, or systems that require digital process.
- Ensure that carers and loved ones are not overlooked as they can provide invaluable emotional and practical support to patients especially in appointments.
- Consider people's needs when conducting face to face or online consultations.
- Acknowledge communication barriers, such as wearing masks, when talking to those requiring health and care services.
- Acknowledge the support needed for 'Long COVID'.
- Acknowledge the support needed for mental health.

# Responses to our report

We sent our report to various commissioners and providers of health and care services in Darlington and although we were disappointed not to receive a response from all, we are pleased to publish the following responses from our local NHS commissioners and our local NHS Foundation Trust:

## **Tees Valley NHS Clinical Commissioning Group (now North East & North Cumbria Integrated Care Board)**

Thanking you for sharing this draft report, highlighting the impact on local people at key points throughout the Covid-19 pandemic.

The report contains a wealth of information around reasoning for having / not having the Covid-19 vaccine, and awareness of concerns that people may have, as well as their likelihood of accepting future vaccines, will help us plan future campaigns. It is important to highlight that vaccine uptake in Darlington has been higher than both the average uptake in the Tees Valley and the average across the North East and North Cumbria.

As we plan for Phase 5 of the Vaccination Programme from September, these insights are very valuable and will allow us to support the residents of Darlington to be informed about receiving a vaccination.

We have reviewed the report's findings and recommendations and have offered our responses below:

- ***Ensure good communication with the public of any changes to accessibility of existing services.***

As an Integrated Care Board, we ensure to highlight changes to service access digitally via our website and social media and will coordinate communications with partners such as Darlington Borough Council, County Durham and Darlington NHS Foundation Trust and local GP Practices to get messages out to local people.

Where there is a possibility that significant changes to NHS service access will be made, we will ensure to engage and, where necessary, formally consult with local people to get their views and experiences on the proposed changes. Formal consultation regarding any service change will be undertaken in accordance with the Health & Social Care Act 2022 and statutory guidance for working in partnership with people and communities as specified by NHS England. [This guidance can be accessed here.](#)

- ***Ensure that no one is left out because they cannot or do not access online services, or systems that require digital process.***

We continue to work with partner organisations across the Tees Valley to avoid digital exclusion. This is a key area of work for our digital teams both locally and across the wider North Cumbria and North East footprint. The traditional access to services will remain in place for the foreseeable future - digital and remote solutions are expected to flourish alongside these but will not replace existing access routes.

- ***Ensure that carers and loved ones are not overlooked as they can provide invaluable emotional and practical support to patients especially in appointments.***

We aim to commission services that are responsive to the needs of carers, recognising the value they bring in supporting those they care for. When completing Equality Impact Assessments to support our work, we consider any potential impact on carers, and we also regularly work with carers and carer support organisations to ensure that they are represented.

- ***Consider people’s needs when conducting face to face or online consultations.***

Whilst the Covid-19 pandemic accelerated developments in virtual appointments, we recognise that they are not always suitable. Face-to-face consultations continued throughout the pandemic (where deemed clinically necessary during lockdowns) and GP Practices across the Tees Valley continue to deliver the majority of their appointments in this format (in June 2022, over 64% of GP appointments in the Tees Valley were face-to-face).

Health professionals should always aim to consider a patient's needs and conduct their consultation in the most appropriate way.

- ***Acknowledge communication barriers, such as wearing masks, when talking to those requiring health and care services.***

Around one in six people in the UK have hearing loss, rising to 71% of those over 70 years old. The General Medical Council (GMC) makes clear that doctors have a duty to communicate ‘in a way that patients understand’. Clear communication is vital for informed consent, patient safety and good patient care.

Wearing a mask can be a barrier to lip reading. A health professional can consider removing their mask to enable lip reading in a low infection risk situation, but this may not always be possible / appropriate.

Tips for communicating with someone who is deaf or has hearing loss have been produced by the Royal College of General Practitioners' Deafness and Hearing Loss Toolkit

- ***Acknowledge the support needed for ‘Long COVID’.***

Post-Covid syndrome is currently one of our priorities - we continue to work with service providers and public health colleagues to promote the support available across the Tees Valley for people with post-Covid syndrome. A summary of the support available is available on our website - <https://nenc-teesvalley.icb.nhs.uk/recovering-from-covid-19/>

- ***Acknowledge the support needed for mental health.***

This report's findings in relation to experiences of mental health services throughout the pandemic will support our ongoing work across the region as part of the Tees Valley Mental Health and Wellbeing Alliance.

Thank you very much for sharing this report with us and we look forward to receiving the next one.

**Mark Pickering**

**Director of Finance**

**North East & North Cumbria Integrated Care Board**

## **County Durham and Darlington NHS Foundation Trust (CDDFT)**

County Durham and Darlington NHS Foundation Trust welcome the findings from the Pandemic Experiences Report (June 2022). This has provided feedback in relation to the experiences at

Darlington Memorial Hospital throughout the pandemic, albeit the majority of the report is aimed at GP services, Mental Health Services and the vaccination programme.

With regards to the experiences of our Maternity patients throughout the pandemic and comments made regarding their pregnancy and delivery experience. It is difficult to know that our new mums did not have the birthing experience we have liked them to have and this is something we are already aware of. Throughout the pandemic there were numerous covid-19 restrictions in place which were driven nationally and was not something that the Trust could have influenced at the time. We are however empathetic at how distressing appointments and their birthing experience would have been impacted as they were alone.

As a Trust we acknowledge the comment is a difficult read but not something that could have been changed or improved at that time. We would like to offer apologies to the new mums who were left feeling they were under supported and would suggest reaching out to their GP in the first instance to consider some support.

We do appreciate all the positive comments that were provided throughout the survey and we would like to share these with the staff at County Durham and Darlington NHS Foundation Trust to celebrate success as the front line staff have worked under extreme circumstances and this will be well received. We would like to thank the responders for this feedback.

# Acknowledgements

## Thank you from Healthwatch Darlington

We would like to thank:

- Everyone who responded to our surveys and shared their experiences to help improve services.
- All those who shared and promoted this piece of work to enable access to a wide range of communities in Darlington
- Our dedicated staff and volunteers
- All organisations that contributed to our work



# Appendix one: Demographics

1. Age category	Participants	
13 - 17 years	0	
18 – 24 years	3	3%
25 – 34 years	13	12%
35 – 44 years	19	18%
45 – 54 years	16	15%
55 – 64 years	22	21%
65 - 74 years	18	17%
75+ years	6	6%
Prefer not to say	1	1%
Did not answer	8	8%

2. Gender	Participants	
Man	21	20%
Woman	77	73%
Non-binary	0	
Other	0	
Prefer not to say	1	1%
Did not respond	7	7%

3. Is your gender different from the sex you were assigned at birth?	Participants	
Yes	7	7%
No	90	85%
Prefer not to say	1	1%
Did not respond	8	8%

4. Ethnic background:	Participants	
Arab	0	
Asian / Asian British: Bangladeshi	0	

<b>Asian / Asian British: Chinese</b>	1	1%
<b>Asian / Asian British: Indian</b>	0	
<b>Asian / Asian British: Pakistani</b>	0	
<b>Asian / Asian British: Any other Asian / Asian British background</b>	0	
<b>Black / Black British: African</b>	0	
<b>Black / Black British: Caribbean</b>	0	
<b>Black / Black British: Any other Black / Black British background</b>	0	
<b>Gypsy, Roma, or Traveller</b>	0	
<b>Mixed / Multiple ethnic groups: Asian and White</b>	0	
<b>Mixed / Multiple ethnic groups: Black African and White</b>	0	
<b>Mixed / Multiple ethnic groups: Black Caribbean and White</b>	1	1%
<b>Mixed / Multiple ethnic groups: Any other Mixed / Multiple ethnic background</b>	0	
<b>White: British / English / Northern Irish / Scottish / Welsh</b>	91	86%
<b>White: Irish</b>	0	
<b>White: Any other White background</b>	5	5%
<b>Another ethnic background</b>	0	
<b>Prefer not to say</b>	1	1%
<b>Did not respond</b>	7	7%

<b>5. Which sexual orientation do you identify with?</b>	<b>Participants</b>	
<b>Asexual</b>	3	3%
<b>Bisexual</b>	1	1%
<b>Gay</b>	0	
<b>Heterosexual / straight</b>	89	84%
<b>Lesbian</b>	1	1%
<b>Pansexual</b>	0	
<b>Other</b>	1	1%
<b>Prefer not to say</b>	2	2%

<b>Did not respond</b>	9	8%
------------------------	---	----

<b>6. Religion or beliefs</b>	<b>Participants</b>	
<b>Buddhist</b>	0	
<b>Christian</b>	51	48%
<b>Hindu</b>	0	
<b>Jewish</b>	0	
<b>Muslim</b>	1	1%
<b>Sikh</b>	0	
<b>No religion</b>	41	39%
<b>Other</b>	3	3%
<b>Prefer not to say</b>	2	2%
<b>Did not respond</b>	8	8%

<b>7. Marital or civil partnership status</b>	<b>Participants</b>	
<b>Single</b>	14	13%
<b>Married</b>	52	49%
<b>In a civil partnership</b>	0	
<b>Separated</b>	2	2%
<b>Divorced / dissolved civil partnership</b>	5	5%
<b>Widowed</b>	6	6%
<b>Co-habiting</b>	17	16%
<b>Other</b>	0	
<b>Prefer not to say</b>	3	3%
<b>Did not respond</b>	7	7%

<b>8. Are you currently pregnant or been pregnant in the last year</b>	<b>Participants</b>	
<b>Yes</b>	0	
<b>No</b>	98	92%
<b>Prefer not to say</b>	1	1%

<b>Did not respond</b>	7	7%
------------------------	---	----

<b>9. Do you consider yourself to be a carer, have a disability or a long-term health condition? (Respondents could select more than one option)</b>	<b>Participants</b>	
<b>Yes - I consider myself to be a carer</b>	19	18%
<b>Yes - I consider myself to have a disability</b>	11	10%
<b>Yes - I consider myself to have a long-term health condition</b>	22	21%
<b>None of the above</b>	55	52%
<b>Prefer not to say</b>	3	3%
<b>Did not respond</b>	8	8%

## Appendix two: Messages of thanks to services and professionals for their efforts during the pandemic



*Absolutely amazed by NHS staff and the risks they endured during the pandemic. Disgraced by the government's decision on a pay raise for thanking NHS staff*

*All NHS staff are excellent and thank you for all your hard work.*

*Appreciate that it has been very difficult for some people*

*Big thank you to all*

*Cancer after care, instead of having to go into hospital they spoke to me over the phone so I could be discharged absolute stars*

*Cheers you all did a cracking job*

*Thank you: Dr Schmitt Orchard Court*

*Everyone has played their part in getting through the pandemic and the efforts of all healthcare professionals are very much appreciated.*

*Everyone in the NHS and all other people working throughout this pandemic - bus drivers, lorry drivers, shop workers, utility workers etc.*

*GPs surgery (Blackett's) have been very helpful. All the staff involved in the full vaccination / booster process have been outstanding and deserves a medal*

*Have felt sorry for professionals working in very difficult circumstances*

*Heroes, the lot of you. 20-30% pay rise and tax me more*

*I had my first baby in lockdown in May 2020 I had to attend alone initially with no assistance up to the top floor of the hospital as nobody was allowed with me (even though i was 5cm by that stage). I had a very quick labour and the support, help and guidance I received from the DMH Maternity ward when I was all alone beyond amazing. I will be forever grateful.*

*I think that the NHS, Social Care, the community and voluntary sector services deserve significant investment and resources plugged into them from central government to acknowledge and reward them for their self-less commitment through Covid. It hasn't gone away and may well be with us for years to come.*

*MHSOP Beech Unit West Park. Continued support throughout the Pandemic above and beyond*

*Social workers worked hard to no recognition*

*My GP Surgery - Orchard Court Darlington, provided excellent communication, support and access to GPs and healthcare professionals*

*Neasham Road Surgery have always been helpful.*

*NHS have done a phenomenal job in tough circumstances*

*Parent carer forum have been amazing*

*Rockcliffe Court Surgery in Hurworth are always excellent. I feel very fortunate to be able to access and use their services. The staff are second to none and provide amazing patient care throughout. they have gone above and beyond during the last few years during the pandemic.*

*Specialist nurse services - speech and language, occupational health, physiotherapy, bladder and bowel services have all been outstanding. They have all been so helpful when we have faced crises during the pandemic. I would give them all a massive pay rise if I was in charge!*

*Thank goodness for the NHS.*

*Thank you for all you do, everyone who turns up for work on a daily basis, supports individuals and community as a whole*

*Thank you to all staff working on the frontline and in the back offices keeping the cogs turning.*

*Thank you to all the services who worked so hard to keep things going at such a difficult time.*

*Thank you to each and every one of you who worked terribly hard to keep and maintain services required. We are so very very grateful to you all. Your commitment, dedication, and loyalty is both admirable and commendable. Thank you from the bottom of my heart.*

*Thanks for everything you do, you deserve the world!*

*Thanks to the tireless work and dedication of our NHS, carers and key workers.*

*The anaesthetists who worked in the maternity unit and one in particular called Peter was absolutely fantastic. He showed empathy and compassion. Also, Holly Graham (health visiting) came out loads for us and she did more for us than anyone else. Also, Father Damon at st Mary's Cockerton for having his compline services online.... I listened to a few and I'm grateful for the work he put in especially when he prayed for me and baby.*

*The care of the District Nursing team was outstanding as was the care of Springfield Healthcare Team*

*The NHS and the voluntary & community sector have worked so hard, and it is truly appreciated and welcomed. The vaccine roll out could not have been more professionally run and such great speed to get everyone protected. Thank you to all who took part in this.*

*The NHS has been doing a wonderful job*

*The NHS have offered an excellent service throughout the pandemic under extremely stress situations. I would like to applaud other key workers especially shop workers who no doubt have had to experience aggression and upset.*

*The NHS staff have worked through incredibly difficult circumstances and now they have the backlog of care, existing pressures and staffing issues to deal with. I have total respect for NHS staff.*

*They all did and are still doing a great job, it's such a shame that they are under so much pressure for so little appreciation from some people.*

*To everyone who was involved with the vaccination process, especially volunteers. It was amazing. The service was very efficient, and everyone was so nice and helpful. It made me remember that there are a lot of good people in the world and that I am proud to be British!!*

*We appreciate the professional and sympathetic approach and actions.*





**healthwatch**  
Darlington

Healthwatch Darlington  
Sterling House  
11 St Cuthbert's Way  
Darlington  
DL1 1GB

[www.healthwatchdarlington.co.uk](http://www.healthwatchdarlington.co.uk)

t: 01325 380145 or 07525 237723 between 09:00 to 16:00 Monday to Friday

e: [info@healthwatchdarlington.co.uk](mailto:info@healthwatchdarlington.co.uk)

🐦 [@healthwatchDton](https://twitter.com/healthwatchDton)

📘 [Facebook.com/HealthwatchDarlington](https://www.facebook.com/HealthwatchDarlington)