North Wales Population Needs Assessment
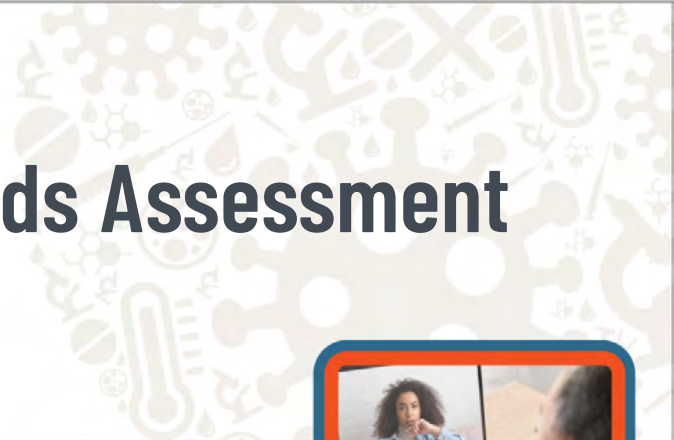
Covid-19 — Rapid Review — October 2020

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NORTH WALES SOCIAL CARE AND WELL-BEING
SERVICES IMPROVEMENT COLLABORATIVE

⌇⌇⌇—Hello

The coronavirus pandemic is affecting all our lives, in many ways.

We are the North Wales Regional Partnership Board (RPB). We aim to improve health and well-being for everyone across our area. In 2017 we did a Population Needs Assessment and set out our plans for the future.

The Welsh Government asked us to review our plans and find out how Covid-19 is impacting services across North Wales.

Finding out what's going on

To make sure we gathered as much information as possible we:
- talked to people across North Wales
- looked at evidence and research
- looked at consultations on the impact of Covid-19
- read interviews and reports.

Some Covid-19 facts

By 6 October 2020 in North Wales there were **6,200** confirmed cases. That's **1,300** for each 100,000 people.

There are been between **427** (confirmed cases) and **574** deaths (with Covid-19 on the death certificate). Cases fell in the summer but are rising again.

(Public Health Wales, 2020).

This rapid review tells you what we've found and our plans for this winter.

The main impacts of Covid-19

The pandemic has:

- **highlighted inequalities**
- **affected people's human rights**
- **allowed more people to work at home**
- **increased virtual meetings**
- **increased the amount of information and messaging going out**
- **shown how adaptable and flexible our workforce are**
- **improved how services work together**
- **increased mental health issues.**

76% of people who had experienced a phone or video consultation found it a positive experience.

> A very good system that should be continued after the pandemic.
>
> Quick and easy. None of the usual lengthy delays waiting in a doctor's surgery.

24% did not have a good experience.

> Not personal, unable to read the person's body language or facial expression.
>
> Very difficult trying to explain to a GP over the phone how I am feeling with multiple symptoms.

Covid-19 and the Welsh language

The Welsh Language Commissioner has raised concerns about:

- the large decrease in activities in Welsh
- people using Welsh less whilst working from home
- online meetings being less bilingual.

There's ongoing research about the impact on the Welsh Language that will help us with our future plans and our More than Words (Mwy na Geiriau) forum is working to address this.

Children and young people

We looked at the impact on:

| children with disabilities and/or illness | children who are care experienced | children in need of care and support | children at risk of becoming looked after | children with emotional and behavioural needs |

Some of our findings:

- children's health services were reduced
- many appointments and surgeries were cancelled
- some children's staff were moved to adult services
- some children with long-term conditions missed therapies
- waiting times for referrals and assessments grew
- speech and language sessions were missed
- some children were more worried
- some children worried less
- some parents found they preferred the online support
- demands on charities increased but incomes have been reduced
- there was a lack of ante-natal, postnatal and home visits for new mums
- children in care felt more isolated and lonely
- face-to-face counselling stopped
- some foster carers found lockdown challenging because of behavioural issues

- other foster carers found the children were more settled
- vulnerable children faced more risks during lockdown
- more families needed to use food banks
- domestic abuse increased during lockdown
- Parentline had four times as many calls
- children at risk were less visible to professionals
- children with mental health issues said their symptoms got worse during lockdown
- waiting lists have increased and there may be delays for assessments and services
- the Children's Commissioner is concerned Covid-19 rules harm children's mental and physical health, and their right to play.

How services have responded

In North Wales:

- welfare calls and checks were made weekly to all placements and foster carers
- looked-after children were given laptops to keep in contact with family and friends and to learn online
- care leavers were given mobile phones if they needed one
- all statutory visits were completed where there was a risk of placement breakdown
- visits to homes with children on the child protection register increased from every 10 days to weekly
- a 'Vulnerable Learners Group' met twice a week during lockdown
- all high-risk children were offered school day care
- moving conferences and reviews online has improved attendance and participation.

Lots of programmes stepped up to support mental health:

- the Early Intervention Prevention Service has continued to help and support young people and families
- consultations have been offered to support families
- Mental Health Services (CAMHS) made Covid-19 resource packs and sent them to everyone on their waiting list
- links were made with the school hubs during lockdown
- the Early Intervention Prevention Service has set up support for primary and secondary schools.

> Before Covid-19 sub teams like GP practices, outpatients, Neurology, Paediatrics and other specialists worked very separately. We didn't know who the other teams where, what their roles were, their names or faces. When the majority of staff in outpatient departments were redeployed into acute services, we became one big team. I think that will make services after coronavirus much more joined up.

How Children's Services' Transformation Programme is dealing with Covid-19

The programme has three themes:

- **Work-stream one** aims to step in early and improve **children's and young people's emotional health, wellbeing and resilience**. This was paused for a while so they can focus on responding to this crisis and emergency planning. They have developed two new programmes: Stay Wise and FRIENDS Resilient.

- **Work-stream two** aims to step in early to support **children at risk of going into care**. The North Wales teams have been affected in different ways. In some areas, staff were sent to help other services during the crisis and progress has slowed. In other areas, services continue as planned.

- **Work-stream three** is a new project aiming to **transform child protection practice**. The pilot project in Gwynedd has had to adapt to new ways of working in response to the crisis.

Organisations kept supporting children and young people with online groups, phone counselling and activity packs.

How staff have responded

Many more children's services staff members are now working from home. Their feedback was mostly positive:

- most found it easier to balance things, especially as schools closed
- many liked that it removed commuting and travel to meetings
- meetings were more focussed
- they had good support from managers who were available by phone and online.

But some staff found it more stressful and lonely. Social workers especially had concerns. They missed the support from peers and opportunities to talk about difficult cases.

> For the paediatric service, it's been a shocker. The redeployment of paediatric therapists has left children with disabilities across the health board without community services.

Unpaid carers

Some of our findings

Many carers said:

- lockdown was difficult
- they struggled with a lack of visiting at hospitals and care homes
- they felt invisible or abandoned
- they lost independence
- they worried about the future, their job, finances and costs
- they felt more stressed
- they've had to care for more hours.

The Covid-19 situation has already increased the number of unpaid carers by **196,000** in Wales by June 2020. **98,000** of them are working as well as caring.

Young carers have asked for:

- more support with wellbeing
- help to stay connected
- breaks
- help to balance caring with education and work
- support to stay fit and healthy.

How services have responded

Carers services have kept providing support by moving online and through distanced working.

Local authorities have been supporting carers by:

- creating Covid-19 support teams
- sharing information about what services are available
- giving emergency funds where needed
- sharing resources with other organisations.

Charities and voluntary organisations have been collecting medication, doing shopping, making video calls and more.

> Suddenly your support network around you who might be family or friends disappear, the local authority may be unable to deliver services into your home, the person you care for is unable to go to a respite or day centre three days a week; you are unable to go to the shops because you're unable to leave your loved one; you are suddenly isolated; alone; your loved one may have died or may be in hospital.

Older people and care homes

Some of our findings:

- the pandemic has had a big impact on the lives of older people
- the risk of dying from Covid-19 increases with age
- some older people were discharged from hospital into care homes before their test results came back
- care homes had to wait a long time for PPE supplies
- at the start of the pandemic there were issues with tests, results and information
- care homes not having visitors had a big effect on residents' mental wellbeing
- staff working in more than one home made infection control harder
- more than half of the over 60s are worried about their wellbeing
- social isolation is causing physical and mental health issues
- some older people have learnt to use online services, but others are missing out.

How services have responded

From the start of the pandemic, services came together and made emergency plans. A health and social care emergency planning group was set up. The health board created a new role of Care Home Cell Leader to support local authorities and area teams.

A new Home First Bureau was set up. It helped hospital patients move back home, to their care home or to a new placement. This included making sure they were Covid negative.

We worked with partners to reduce the burden on care homes by:

- making sure information was shared more easily
- developing a new data-collection and early warning system
- making "one contact a day" calls to care homes.

> The lockdown of the home was so sad because we were having to turn visitors away. Normally they are coming in and out, we know them all and we look after them, they come for dinner with their partners. Then all of a sudden it just stopped and obviously some of them weren't happy about it, they blame you and you felt that you were in the wrong really trying to make them to stop coming in, it was a difficult time.

> You're trying to keep positive for everybody else and as a manager I tried to keep positive for all the staff you know, come on we've got this we're ok you know and inside I'm dying. I think the overwhelming realisation of how much love and protection we have for the residents was there. I used to just dread coming in in the morning because the nights would say oh so and so is coughing and my heart would just sink. We got the virus here in May time, they were the darkest days I've ever had in my career. A lot of the residents we had to test and then we had to ring for the results. On the phone I heard so and so date of birth, so and so positive, and the next one positive, next one positive... it was heart breaking. I was crying on the phone.

Helping people connect

We gave iPads to care homes and hospitals for people to contact friends and families during lockdown.

Anglesey developed an emergency contact centre for services.

Gwynedd set up "Tîm Cymorth Covid-19".

Conwy developed a website with a list of community volunteer groups and businesses.

Denbighshire created a Proactive Calling Team to keep contact during lockdown with people shielding and people aged over 70

Wrexham offered small grants to care homes to help them deal with the crisis.

Social Workers used WhatsApp to check on care homes when they couldn't visit.

Changing how they worked

Many services became more flexible by being available for more hours. Lots of care staff have worked hard and been excellent during the pandemic. Some have made more support visits to older people during lockdown.

A group of social care and support providers came together to talk about Covid-19. They discussed their Strengths, Weaknesses, Opportunities and Threats (SWOT). This will be used to prepare for the future.

Unfortunately, some services had to stop during lockdown like:
- respite and carer breaks
- face-to-face training
- home visits (unless requested by families)
- podiatry and dental visits.

People living with dementia

Some of our findings

Across the UK **26%** of all deaths involving Covid-19 were people with dementia.

Some people with dementia:

- had issues with infection control
- struggled to understand the need to isolate
- found PPE frightening
- struggled to explain what they need
- have been more vulnerable to abuse or neglect.

Some people with early onset dementia:

- found the lack of routine difficult
- felt lonely and vulnerable
- worried about losing skills
- lost confidence.

How services responded

Carers Trust Taith Ni clubs held meetings online instead of home visits.

Alzheimer's Society's Dementia Connect continued to help people with dementia. They have had more requests for support because other services have stopped.

The Community Makers are developing a website and resources to help carers reconnect online.

Many organisations and charities kept supporting people with dementia through the lockdown.

> Isolation and inability to continue with routines affected people with Dementia. Loss of confidence to go out of the home is now evident.

People with health, disability and sensory impairments

Some of our findings:

- death rates for disabled people were **1.9** times higher for men and **2.4** times higher for women
- **1 in 10** disabled people felt unsafe outside their home
- **63%** of disabled people worried they wouldn't get treatment if they got the virus
- many disabled people liked online support and want it to continue
- a few disabled people found using technology difficult and worried about costs
- some people who are hard of hearing found masks made face-to-face contact difficult
- wearing masks over ear hearing aids was difficult for many
- deaf children lost some of their support network
- some people with visual impairments found social distancing difficult
- many people found information difficult to understand during the pandemic.

> It's very frustrating for me sometimes when I go to the shops and people have facemasks on and I can't understand what people are saying to me. I have to ask them please can you remove put it down slightly and they refuse and they're still talking to me. I haven't got a clue what they are saying and it upsets me.

How services responded during the crisis

Health services moved to virtual meetings and phone calls, including GP appointments. Services used Attend Anywhere and eConsult technology to help people contact their GP practice.

The health board set up Covid-19 research teams.

A Health Hack competition was held to find new ways to support people. Ideas included:

- developing a communication aid to use while wearing PPE
- a 'Clear Masks for Communication' project.

Charities and organisations have kept supporting disabled people through lockdown.

People with learning disabilities and autism

Some of our findings:

- Covid-19 has increased inequalities for people with learning disabilities and autism
- people with learning disabilities are at higher risk of infection and can have more severe symptoms
- annual health checks stopped during lockdown
- some people with learning disabilities didn't get shielding letters, others didn't understand them
- families found lockdown challenging without the support and respite they needed
- families were more anxious about the virus, new rules and losing support
- many support groups moved online which has benefitted some but not all
- many support workers were exhausted from covering for people off-sick, self-isolating or furloughed.

How services responded

More services used technology to connect online.

Some areas gave IT equipment to people in residential care and supported living.

Organisations ran online activities like quizzes, bingo, and games. This helped people with learning disabilities have a routine and their carers have a rest.

People with Direct Payments continued to get support.

Forums in Denbighshire and Anglesey helped care providers to connect.

Organisations have given peer support, advice and information to families.

> The changing rules have been confusing and stressful, people with high functioning Autism find it hard to process changes especially when they're brought in fast paced and there has been conflicting information for England and Wales and misinformation on social media.

Mental health needs

Some of our findings:

- mental health issues have grown because of Covid-19
- psychiatrists have seen a **43%** increase in emergency appointments
- **1 in 5** adults had some form of depression during lockdown
- **1 in 5** people in Wales who needed mental health support were unable to get it in lockdown
- more people are using online services like Mind
- Mental Health Wales said **1 in 3** children experienced mental health issues during lockdown
- pregnant and postnatal women had more mental health issues during the pandemic
- some people were drinking more alcohol more often because of stress and anxiety
- lockdown had a big impact on people with eating disorders.

Some people had more mental health issues than others including:

- Black, Asian and Ethnic Minority (BAME) groups
- people worried about money
- people with existing mental health problems
- people with long-term health conditions
- older people.
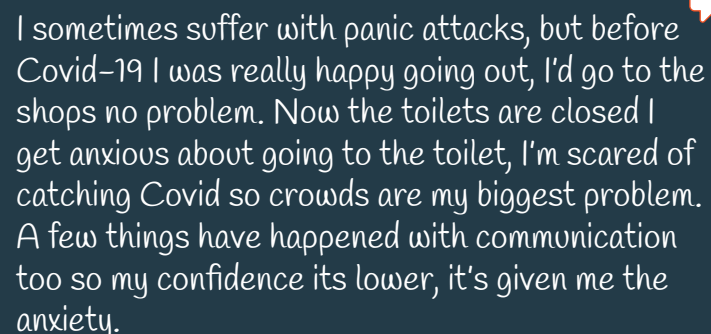
How services responded during the crisis

Conwy Mind set up a Virtual Hub and counselling services.

Anglesey invested an additional £50,000 in the Parabl service to support people's mental health.

ICAN support provided phone support for 700 referrals across North Wales.

Mental health organisations kept delivering one-to-one and group mental health support.

Organisations and community groups set up befriending services to stop loneliness.

I sometimes suffer with panic attacks, but before Covid-19 I was really happy going out, I'd go to the shops no problem. Now the toilets are closed I get anxious about going to the toilet, I'm scared of catching Covid so crowds are my biggest problem. A few things have happened with communication too so my confidence its lower, it's given me the anxiety.

Next steps

This review has shown us our strengths and weaknesses across North Wales. There are some other recommendations to improve support but as we move into winter, we will focus on:

1. **Promoting digital inclusion.** Making sure people who use and provide services have access to technology and have the skills to use it.

2. **Finding inclusive approaches to service redesign.** As services find new ways of working, they need to understand the impacts of both virtual and face-to-face approaches.

3. **Taking a rights-based approach.** As we face future lockdowns, we must reduce the harm caused by them. We must involve service users in developing plans, rules and policies.

Thanks for reading this

You can read the full Rapid Review here:

northwalescollaborative.wales/north-wales-population-assessment/rapid-review/