

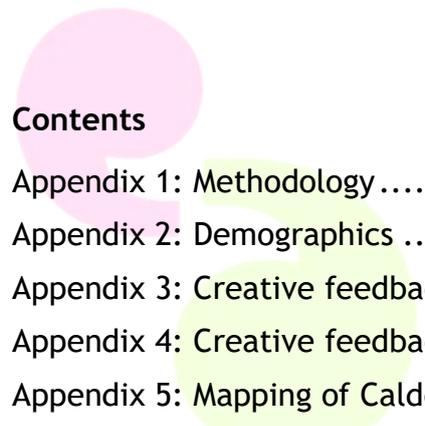


**healthwatch**  
Calderdale

# The health and care experiences of people living in Calderdale during the Covid-19 outbreak - appendices

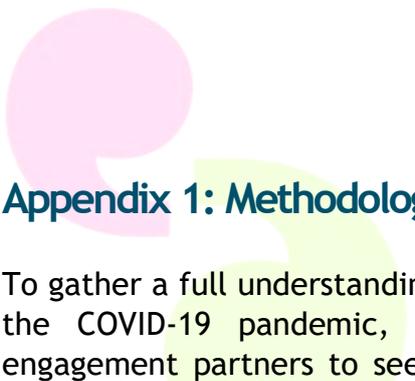
**August 2020**

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## Appendix 1: Methodology

To gather a full understanding of the experience of health and care services during the COVID-19 pandemic, Healthwatch Calderdale worked with a range of engagement partners to seek feedback from residents of Calderdale in different ways. With such a pertinent and current topic up for discussion, we felt it was essential that we offer the opportunity to engage with us in the way that best suits the individual and that we offer the facilitation to do this.

Healthwatch Calderdale was supported by Calderdale Clinical Commissioning Group, through the Calderdale Engagement Network links. This ensured that the engagement did not duplicate work being delivered elsewhere. A range of organisations had an opportunity to contribute and provide resources.

The approaches used were:

### Experience survey

We developed a survey to help us understand how changes to care during the COVID-19 pandemic have impacted members of the public. The survey asked these key questions about individuals' experiences:

- Service(s) used/attempted to use
- Date of contact with service(s)
- If you were not able to access a service, why were you not able to access the service?
- Tell us more about the changes you experienced
- What was good about the service you received or delivered?
- What did not work so well?
- What would have made your experience better?
- Thinking about the changes to your health and care services, are there any changes you would like to become a permanent part of the service in the future
- Tell us more about your mental health during the COVID-19 pandemic

A full equality monitoring form was also conducted as part of the survey. This ensured we gathered a representative sample of views from the public and identified any inequalities to access or delivery of care.

We also created a survey, to ask specific questions to staff working during the Covid-19 pandemic who provided care for the public. The key additional questions were:

- Service(s) where you work
- What is your experience of working for your service during the COVID-19 outbreak?
- Are there any examples of good practice from the COVID-19 outbreak that you would like to share?

The survey has been widely promoted across the Calderdale area. Partners from the Calderdale Engagement Network have shared this through their communication routes including their service users. The online survey link has been publicised on



social media through tailored targeted marketing campaigns. This has encouraged diverse and under-represented groups to complete the survey.

Two Calderdale Engagement Champions (trained and supported by VAC) have been working with particular groups with protected characteristics to assist in completion of the surveys; they have targeted people with disabilities, and people from Calderdale's South Asian communities.

A copy of the survey, the distribution and communication plan, and a list of engagement partners involved in the work can be found at Appendices 7,8 and 9.

### **Capturing stories**

Alongside the survey on the Healthwatch Calderdale website, there is a list of creative ways in which you can share your COVID-19 health and care experiences. Staff designed specific tools to provide ideas for how people could share their stories. For example, a word search and a postcard to your future self. Other requests included sharing artwork, poems and other creative pieces that they have completed at this time.

Some specific resources were designed for children and young people, such as designing your own emoji, or sharing a lyric or sentence with us that was significant in the pandemic.

We also shared a more traditional case study template, in case people wanted to tell a fuller version of their experience, rather than putting it in to the survey. We promoted the opportunity to leave a review of your care experience on our website. We know that some services have adapted in a way that people have really valued, and it's good to be able to share that publicly, along with understanding where people have struggled to get access.

Again, these tools have been promoted through social media and on our website.

### **Working creatively with community groups**

Where we know some communities face additional barriers when sharing feedback about care experiences, we have continued to work creatively with community groups. We have maintained ongoing contact with services such as St Augustine's, who support asylum seekers and refugees. We've reached out to organisations supporting people with learning disabilities to do video call activities. We've used our connections at one of the local Mosques to ask people to share 1 line of their experience with us, in a format of their choice for example, audio recording, in their preferred language. We have also experimented with different digital tools for engagement. For example, a group of around 30 young people linked with us and shared their views using Snapchat

## Appendix 2: Demographics

### Service users and representatives of person needing care

We had a total of 346 responses from services users and representatives of people requiring either NHS or social care during the Covid-19 outbreak. Of these 212 people were service users and the remaining 134 responses were from representatives (family, carer, advocate) of people who had required NHS or social care.

The gender of respondents was as follows:

Gender	Number of participants
Female	159
I describe my gender in another way	2
Male	105
Blank	80
<b>Grand Total</b>	<b>346</b>

Figure 1: Gender of respondents - service users and patient representatives

In terms of age range, respondents comprised the following groups:

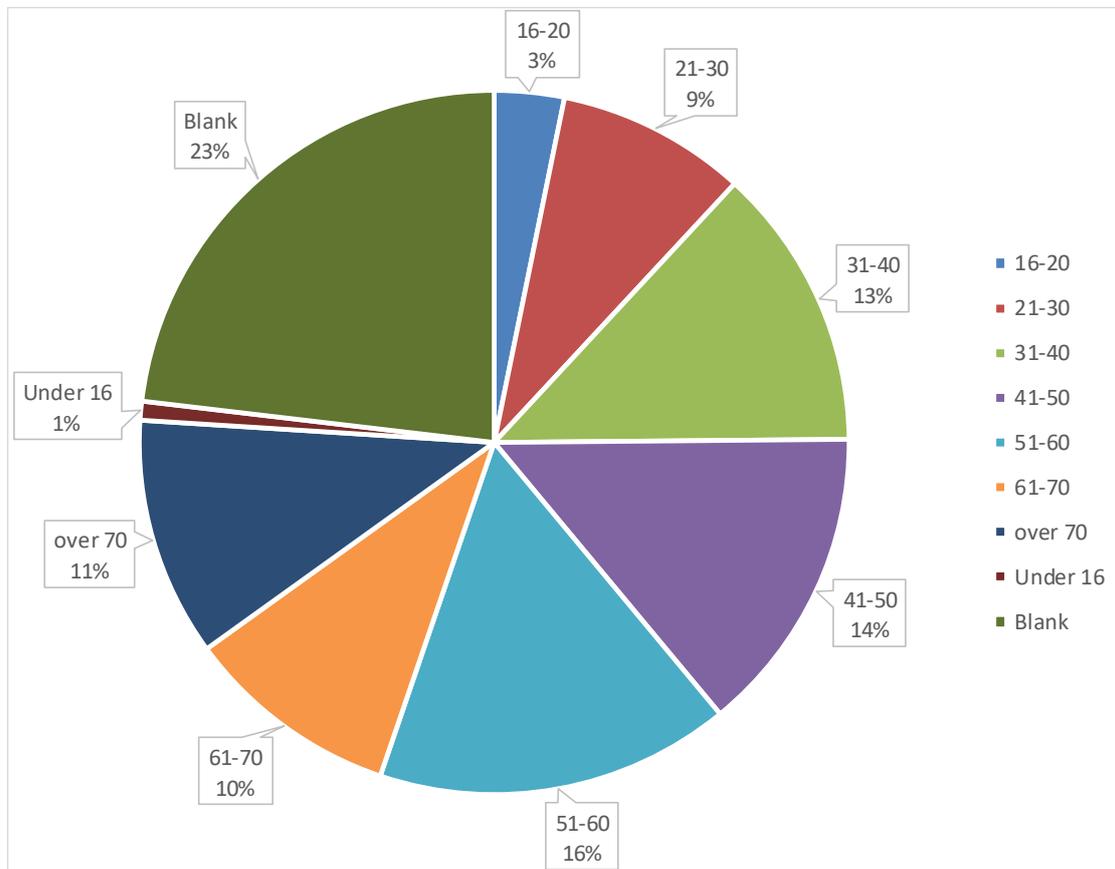


Figure 2: Ages of respondents - service users and patient representatives

Only a small number of the respondents (4%) were children or young people (aged up to 20). It was recognised that the survey was not the most appropriate way of engaging with this group. Therefore, experiences from individuals in this age range were collected by other means (stories, songs, informal chats on social media, pictures, poems, word clouds).

Survey participants came from many areas of Calderdale, though some postcode areas were more widely represented in the data than others:

Postcode area	Number of respondents by postcode area
HD4	1
HD6	24
HX1	63
HX2	57
HX3	83
HX4	11
HX5	18
HX6	15
HX7	15
OL14	29
Blank	30
<b>Grand Total</b>	<b>346</b>

Figure 3: participants by postcode area: service users and representatives

81% of these respondents had needed to contact a health service during the Covid-19 outbreak, whilst only 9% people reported needing to contact care services (social care, residential home, nursing home). 58% people reported problems contacting health and/or care services.

The most frequently contacted services in order of contacts were: General Practitioners (GPs), hospitals, pharmacies and community services (for example district/community nurses, maternity services).

Service name	Number of visits
Adult Social Care	9
Ambulance/111/Urgent care	30
Blank	99
Children's Social Care	1
Community services	39
Dentist	26
Disregarded	11
GP	253
Hospital	83
Mental Health Service	13
Optician	5
Other	2



Pharmacy	82
<b>Grand Total</b>	<b>653</b>

Figure 4: Number of visits per service

The graphs to follow show the number of contacts per month during the Covid-19 outbreak for each service type.

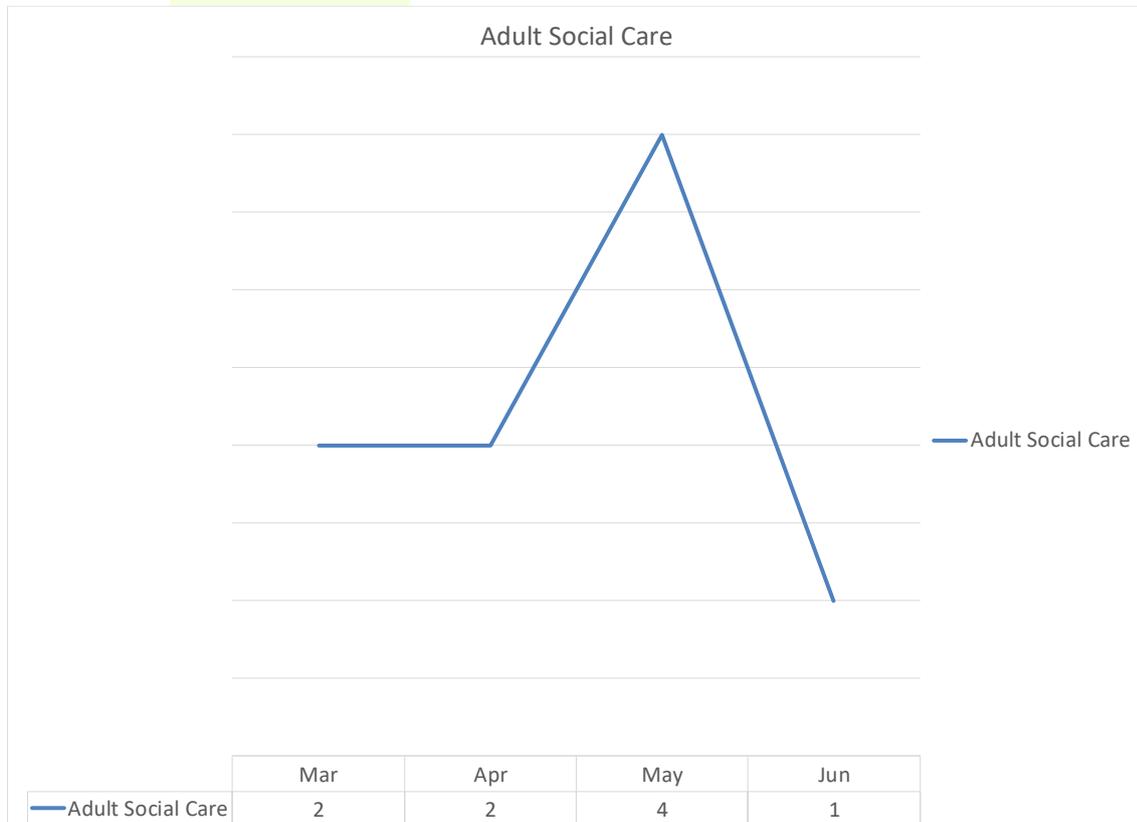


Figure 5: Adult social care contacts

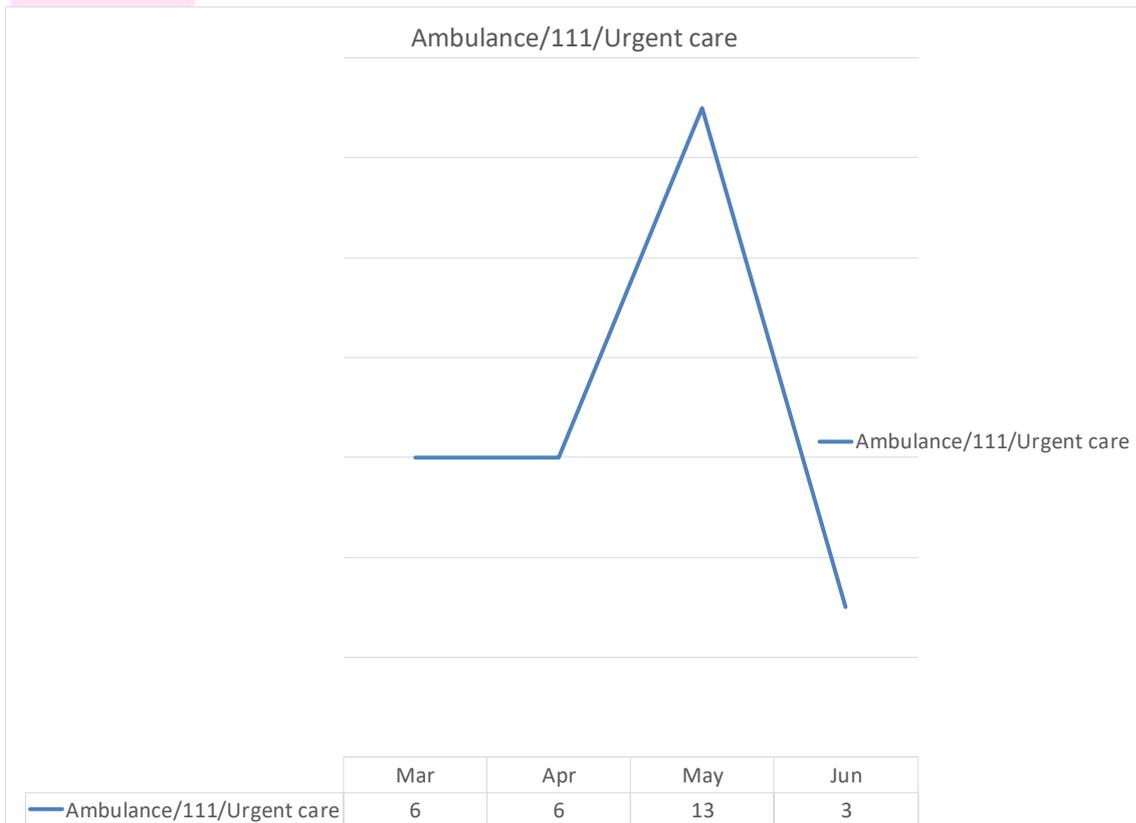


Figure 6: Ambulance/111/Urgent care contacts

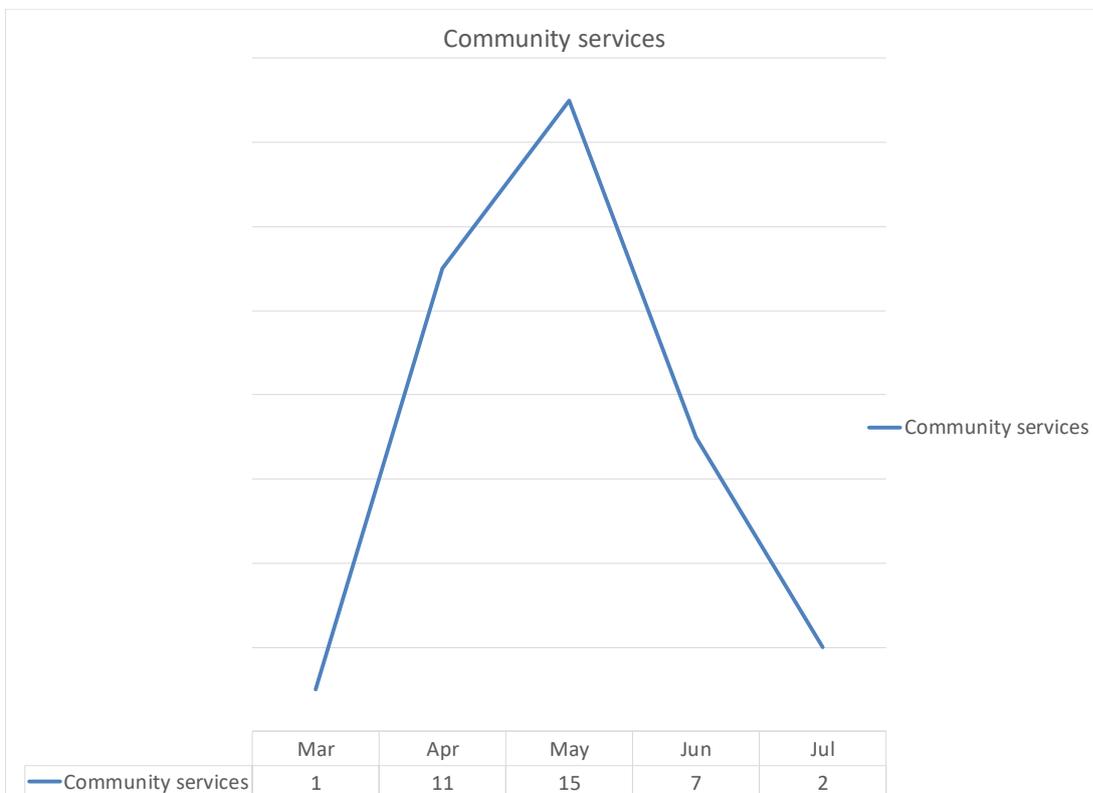


Figure 7: Community services contacts



Figure 8: Dentist contacts

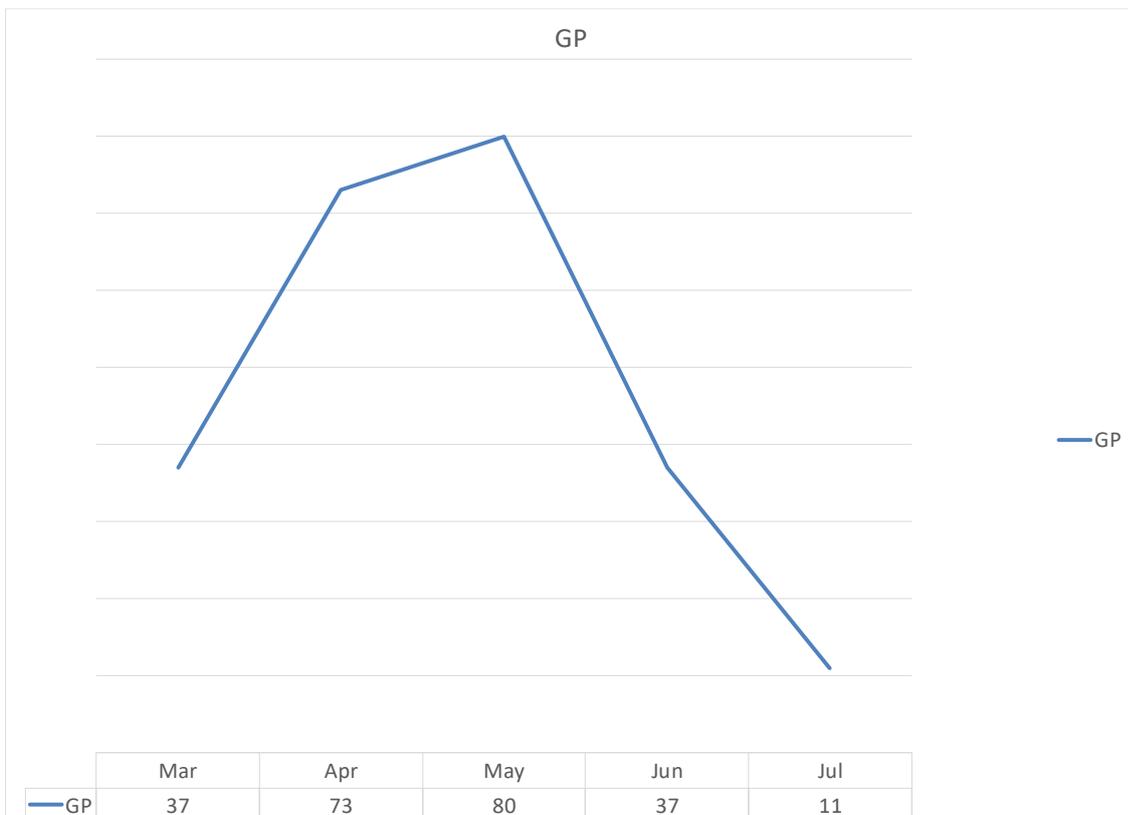


Figure 9: GP contacts

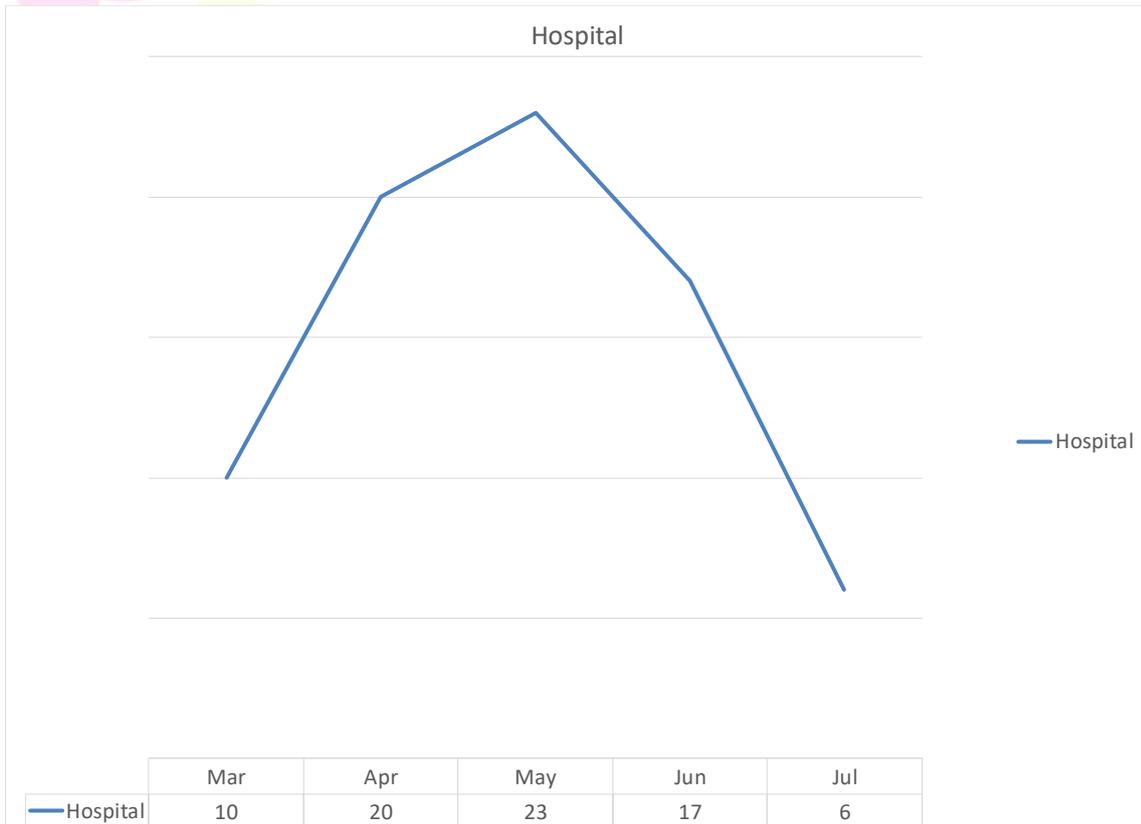


Figure 10: Hospital contacts



Figure 11: Mental health services contacts



Figure 12: Opticians contacts



Figure 13: Pharmacy contacts

Women were far more likely to contact services (61% of total contacts) than men (23% of total contacts) or people who described their gender in other ways (0%). Women accessed adult social care, ambulance/111/urgent care, community services, dentists, GPs, hospitals and pharmacies more frequently in the period than men or people who described their gender in other ways.

Services used	Female	Male	Describe gender in other way	Blank	Grand Total
Adult Social Care	8	1	0	0	9
Ambulance/111/Urgent care	19	7	0	3	29
Blank	9	24	1	54	88
Children's Social Care	0	0	1	0	1
Community services	28	9	0	2	39
Dentist	17	6	0	3	26
Disregarded	9	2	0	0	11
GP	177	60	0	16	253
Hospital	60	11	0	12	83
Mental Health Service	5	8	0	0	13
Optician	1	4	0	0	5
Other	1	1	0	0	2
Pharmacy	54	16	0	12	82
<b>Grand Total</b>	<b>388</b>	<b>149</b>	<b>2</b>	<b>102</b>	<b>641</b>

Figure 14: Service contacts by gender

Men were more likely to access mental health services (61%) and opticians (80%) than women (39% and 20%) respectively and people who described their gender in other ways (0%).

In terms of age, the age range of people who made most overall service contacts were people aged 41 to 50. This group made the highest number of contacts in terms of hospitals and pharmacies. People aged 31-40 made the most community services contacts. This can be explained by the fact that a large number of visits to community services were for maternity related appointments. Those in the age ranges 51-60 made more GP visits than those in other age ranges.

Service	Age range								Blank	Grand Total
	> 16	16-20	21-30	31-40	41-50	51-60	61-70	<70		
Adult Social Care	0	0	1	0	1	1	6	0	0	9
Ambulance/111/Urgent care	0	2		3	8	7	4	2	3	29
Blank	1	2	3	4	5	6	4	8	55	88
Children's Social Care	0	0	0	0	1	0	0	0	0	1
Community services	0	0	9	13	3	6	4	2	2	39
Dentist	0	1	4	1	3	7	4	4	2	26

Disregarded	0	1	0	2	1	4	2	1	0	11
GP	1	24	24	37	43	57	26	25	16	253
Hospital	0	3	3	5	24	17	8	11	12	83
Mental Health Service	0	0	1	4	7	0	1	0	0	13
Optician	0	2	1	1	0	0	1	0	0	5
other	0	0	0	1	0	0	1	0	0	2
Pharmacy	1	2	6	12	24	6	8	11	12	82
<b>Grand Total</b>	<b>3</b>	<b>37</b>	<b>52</b>	<b>83</b>	<b>120</b>	<b>111</b>	<b>69</b>	<b>64</b>	<b>102</b>	<b>641</b>

Figure 15: Service use by age range

There were also differences in how many service contacts were made by people from different ethnic groups. People from white ethnic groups were far more likely than those belonging to other groups to contact GPs, ambulance/111/Urgent Care Centres and hospitals. The table below shows this in detail:



Ethnic group	Asian	Black or Black British: African	Other	Other ethnic groups: Arab	Prefer not to say	White	Blank	Grand Total
<b>Service</b>								
Adult Social Care	1	0	0	0	0	8	0	9
Ambulance/111/Urgent care	3	0	1	0	0	21	4	29
Blank	16	0	0	0	2	15	55	88
Children's Social Care	0	0	0	0	0	1	0	1
Community services	14	0	0	0	0	23	2	39
Dentist	8	0	1	3	0	12	2	26
Disregarded	3	0	0	0	0	8	0	11
GP	40	1	1	0	7	187	17	253
Hospital	4	0	0	0	1	65	13	83
Mental Health Service	4	0	0	4	0	5	0	13
Optician	4	0	0	0	0	1	0	5
Other	0	0	0	0	0	2	0	2
Pharmacy	14	0	0	0	0	56	12	82
<b>Grand Total</b>	<b>111</b>	<b>1</b>	<b>3</b>	<b>7</b>	<b>10</b>	<b>404</b>	<b>105</b>	<b>641</b>

Figure 16: Service access by ethnic group

In terms of place of birth, the majority of respondents were born in the United Kingdom (66%). 10% stated they were born elsewhere, specifically Bangladesh, Kashmir, Nigeria, Pakistan, Poland, Sudan, Sweden, The United Arab Emirates and Zambia.

Place of birth	Number of respondents
United Kingdom	229
Other	36
Prefer not to say	1
Blank	80
<b>Grand Total</b>	<b>346</b>

Figure 17: Place of birth of respondents

As far as religion was concerned, Islam was the most frequently mentioned religion (29% of respondents). 24% of respondents stated they had no religion and 20% of participants stated they were Christian.

Religion	Number of respondents
Islam	99
No religion	82
Christianity (all denominations)	68
Prefer not to say	14
Hinduism	1
Judaism	1
Blank	80
<b>Grand Total</b>	<b>346</b>

Figure 18: Respondents by religion

Of all respondents, 45% were white, 29% were Asian, 6% were other ethnic groups: Arab, 1% were black and 0% were any other ethnic group. 23% of respondents did not answer this question and 2% preferred not to state their ethnic group. These figures are rounded to the nearest whole.

General ethnic group	Specific ethnic group	Number of respondents
<b>White</b>	White: English, Welsh, Scottish, Northern Irish, British	140
	White: Irish	5
	White: Other	12
<b>Asian</b>	Asian or Asian British: Bangladeshi	6
	Asian or Asian British: Chinese	1
	Asian or Asian British: Indian	6

	Asian or Asian British: Pakistani	86
<b>Other ethnic groups: Arab</b>	Other ethnic groups: Arab	2
<b>Black</b>		1
<b>Any other ethnic group</b>	Any other ethnic group	1
<b>Blank</b>		80
<b>Prefer not to say</b>		6
<b>Grand Total</b>		<b>346</b>

Figure 19: Respondents by ethnic group

In terms of disability, 67% of respondents did not consider themselves to be disabled. A total of 31% of respondents stated they were disabled and a further 2% preferred not to say.

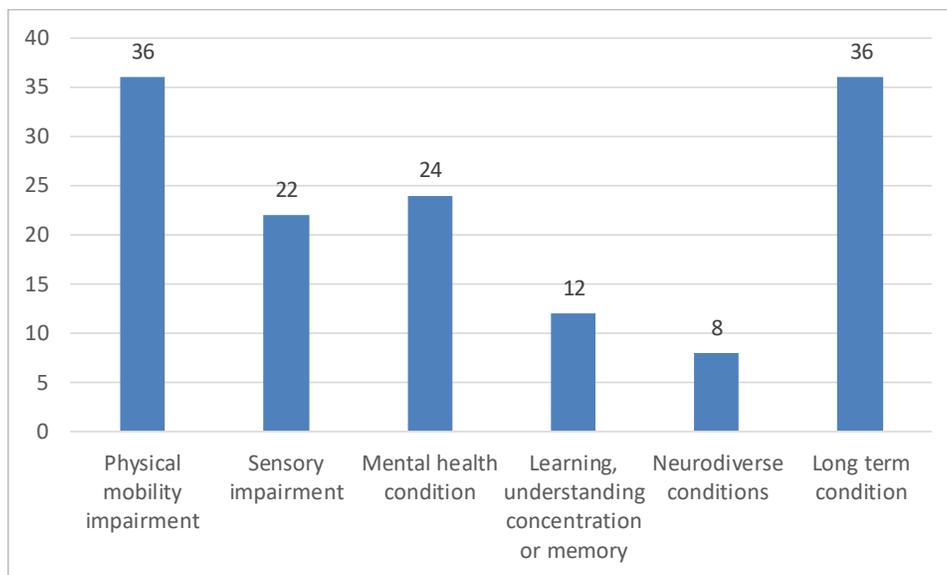


Figure 20: Respondents by disability

With regard to sexuality, respondents categorised themselves as follows. A total of 264 respondents provided an answer to this question.

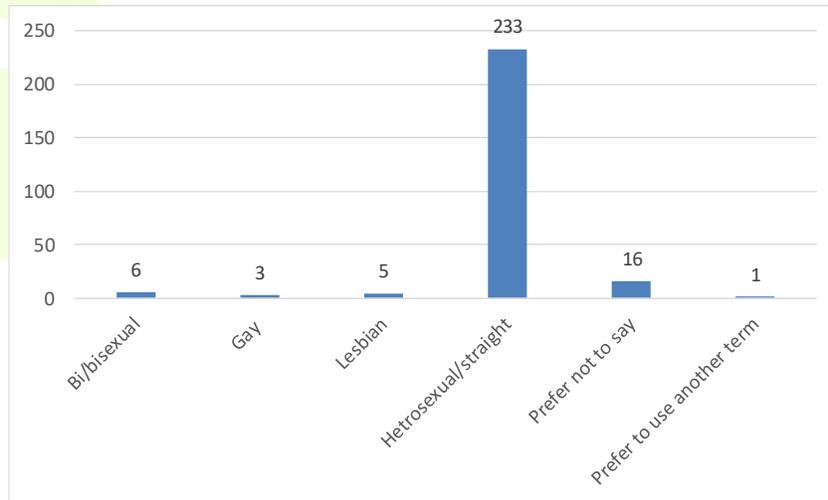


Figure 21: Respondents by sexuality

One person considered themselves to be trans and 4 people preferred not to answer this question.

With regard to carers, 25% of respondents stated they were carers, whilst 51% said they were not carers.

Carer	Number of respondents
Yes	85
No	177
Prefer not to say	4
Blank	80
<b>Grand Total</b>	<b>346</b>

Figure 22: Carers among respondents

A total of 26% of participants stated that they were parents or primary carers to children.

Parent or primary carer	Number of respondents
0-4	34
5-9	18
10-14	25
15-19	12
Not applicable	144
Prefer not to say	9
Blank	104
<b>Grand Total</b>	<b>346</b>

Figure 23: Parents or primary carers to children among respondents

Of the respondents, 3% were pregnant or had given birth in the last six months.

Pregnant	Number of respondents
No	245

Prefer not to say	2
Yes	11
Blank	88
<b>Grand Total</b>	<b>346</b>

Figure 24: Number of respondents who were pregnant/had given birth in last 6 months

In terms of benefits, 27% of respondents stated that they were receiving one of the following types of benefits:

- Universal Credit
- Housing benefit
- Income Support
- Pension Credit Guarantee Credit Element
- Child Tax Credit
- Incapacity Benefit/Employment Support Allowance
- Free School Meals
- Working Tax Credit
- Council Tax Benefit

49% stated that they did not receive the above listed benefits, 0.5% of participants preferred not to answer this question and the remaining respondents left this answer blank.

## Staff

We had a total of 51 responses to the survey from health and care staff working in Calderdale. Three participants did not provide Healthwatch Calderdale with consent to use their data anonymously and to share the project's findings with other organisations. One respondent did not work in Calderdale. These responses have therefore been excluded from the analysis of staff data.

In terms of gender, 29 responses came from female staff members (62%), 7 from male staff (15%) members. A further 11 participants (23%) did not answer this question. Male respondents stated they worked either for the Clinical Commissioning Group (CCG) or Calderdale and Huddersfield NHS Foundation Trust (CHFT). Female respondents worked for a wider range of organisations.

The age ranges of respondents were as follows:

Age range	Number of respondents
21-30	2
31-40	11
41-50	12
51-60	10
61-70	1
over 70	0
Blank	11
<b>Grand Total</b>	<b>47</b>

Figure 25: Age range of staff respondents

Respondents worked in postcodes HX1 to HX7 as well as in HD3. The largest number of respondents came from people working in the HX3 postcode area.

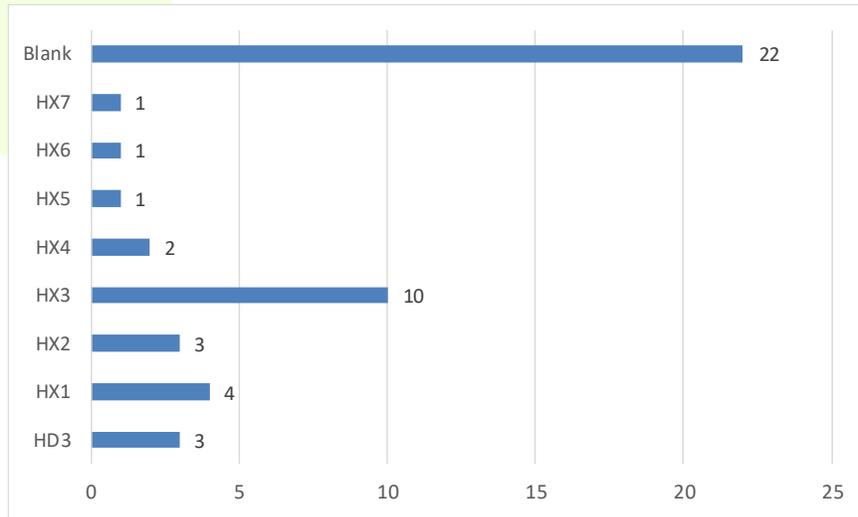


Figure 26: Staff by postcode worked in

CCG staff represented the largest numbers of responses, followed by care home and CHFT staff.

Service name	Number of respondents
Blank	1
Care home	9
CCG	14
CHFT	9
Disregarded	3
GP	4
NHS not specified	1
Primary Care Network	1
social services	1
SWYFT	1
Voluntary sector organisation	3
<b>Grand Total</b>	<b>47</b>

Figure 27: Number of staff respondents per service

The ethnic groupings of the respondents were as follows:

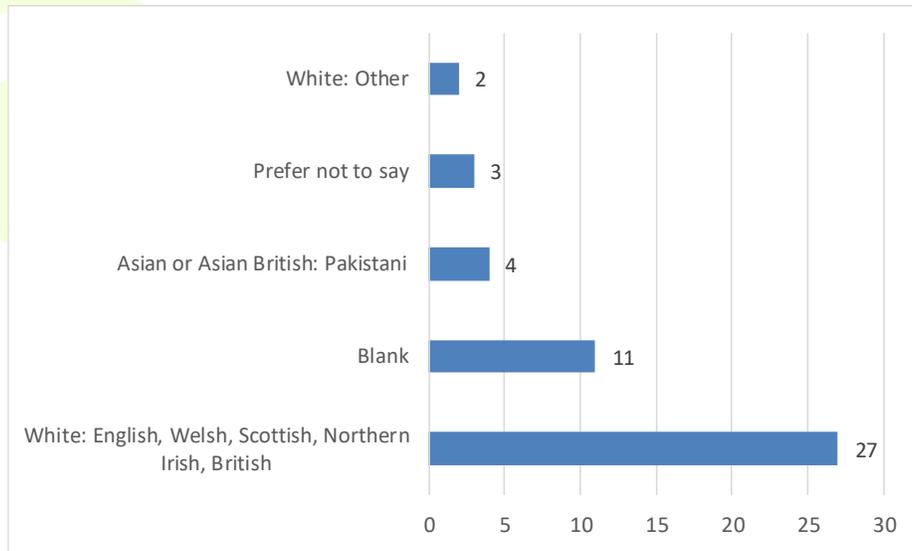


Figure 28: Respondents (staff) by ethnicity

Of these all Asian or Asian British Pakistani respondents were male. The remaining male respondents were White English, Welsh, Northern Irish, British.

Religion	Number of respondents
Buddhism	1
Christianity (all denominations)	17
Islam	4
No religion	9
Other	2
Prefer not to say	1
Sikhism	2
Blank	11
<b>Grand Total</b>	<b>47</b>

Figure 29: Respondents (staff) by religion

A total of 35 respondents were born in the UK (74%), 1 participant was born in Poland (2%) and 11 respondents (23%) declined to answer. These answers are rounded to the nearest whole number. The main religion of respondents was Christianity (36%). 19% of participants said they had no religion. One person (2%) stated their religion as other and specified this to be humanist.

In terms of disability, 4 respondents (11%) stated that they were disabled. Mental health conditions (2 respondents) and neuro diverse conditions (1 respondents) were the only disabilities specified.

With regard to sexuality, most respondents were heterosexual/straight (64%), 6% were lesbian and 2% preferred not to say. 28% of respondents chose not to answer this question. There were no respondents who stated that they considered themselves to be trans.

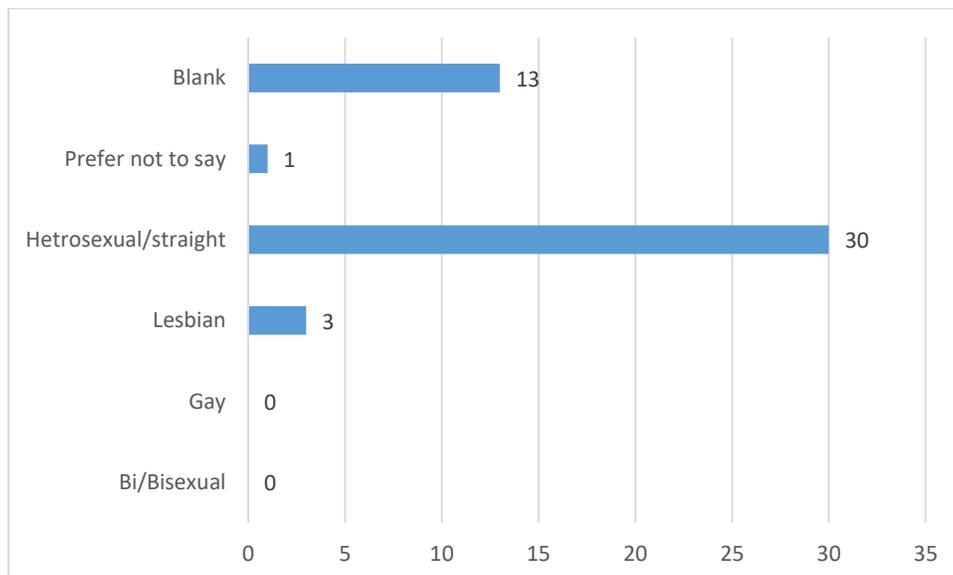


Figure 30: Respondents (staff) by sexuality

A total of 21% of respondents were also carers. 55% stated that they did not provide unpaid care/support to someone who was older, disabled or had a long term condition and 23% of

participants left this answer blank. These answers are rounded to the nearest whole number.

A number of staff respondents were also parents or primary carers to children (30%):

Parent or primary carer	Number of respondents
0-4	2
5-9	2
10-14	6
15-19	4
Not applicable	13
Prefer not to say	3
Blank	17
<b>Grand Total</b>	<b>47</b>

Figure 31: Parent of primary carers among staff respondents

There were no staff members who identified themselves as being pregnant or who had given birth in the last six months. 77% of participants stated they were not pregnant and a further 23% left this answer blank.

15% of respondents were in receipt of one the following benefits Universal Credit, Housing Benefit, Income Support, Pension Credit Guarantee Credit Element, Child Tax Credit, Incapacity Benefit/Employment Support Allowance, Free School Meals, Working Tax Credit. 62% of respondents stated they did not receive these benefits and the remainder (23%) did not indicate whether or not they received benefits.

### Appendix 3: Creative feedback from children

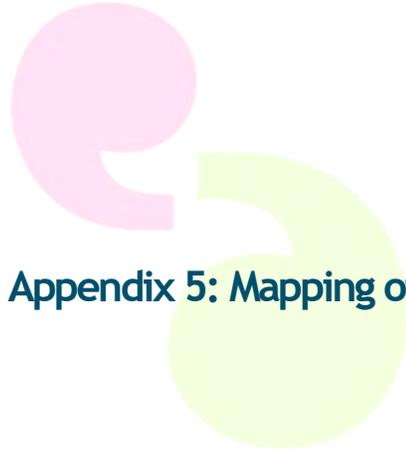


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### Appendix 4: Creative feedback from adults



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## Appendix 5: Mapping of Calderdale engagement work

	Lead organisation delivering engagement	Start date	Completion date	Calderdale only?	Focus of the work	Methods	Key Contact	Happy to share findings?
1	Healthwatch Calderdale (leading a partnership engagement piece for Calderdale, including CCG)	End of May	End of August (break point end of July)	No - also Kirklees	Understanding people's experience of accessing health and care services during the Covid-19 pandemic	Survey - shared widely by Calderdale engagement partners  Story telling resources	Helen Hunter Karen Huntley	Yes
2	Calderdale Council	Late summer		Yes	Calderdale Conversations - focus for the whole council on talking to Calderdale residents to seek their views on how Calderdale recovers, post-Covid, and on the climate emergency	Varied - but likely to be open questions put to members of the public in a variety of ways and settings	Mike Lodge	Yes
3	Calderdale Council - Public Health	April	Ongoing	Yes	Learning about the ways in which your experiences of Covid-19 are different if you are from a	Telephone interviews Group discussions via Zoom Leaflet drop, engaging with	Kate Horne Shebana Sadiq Sail Suleman	Yes

	Lead organisation delivering engagement	Start date	Completion date	Calderdale only?	Focus of the work	Methods	Key Contact	Happy to share findings?
					BAME community, including information about risks, lifestyle, physiology, etc... To work with key businesses and services , deliver key messages , work with faith organisation with colleagues	business, residents key stakeholders, email and telephone		
4	Calderdale Council - Public Health	July		Yes	Engagement work with communities to help us understand how effective Test and Trace can be, whether people will adhere to requests to isolate		Jess March	
5	Calderdale Council - Communities	April	Ongoing	Yes	Meeting is to help coordinate the response	Sowerby Bridge Covid 19 Voluntary	Graham Gibbons	Yes

	Lead organisation delivering engagement	Start date	Completion date	Calderdale only?	Focus of the work	Methods	Key Contact	Happy to share findings?
					between the Council and the voluntary Sector. Meetings started in April and take place every 3-4 weeks and are ongoing.	Sector support meetings - Zoom meetings between the Council and the voluntary sector groups supporting people through the Covid Crisis.		
6	Calderdale Council - Communities	Mid July		Yes	To talk about how Covid 19 has impacted on relationships between groups of people.	Council's Cohesion Team - is supporting the Belong Network with a research project for Covid-19 and Cohesion. This will involve online/ virtual discussion groups	Sail Suleman	
7	Calderdale Council - Communities	August	Ongoing	Yes	The meetings have been on hold due to Covid but are restarting. The boards focus is partnership regeneration	Town Development Boards - Council led - occur regularly every 8 weeks in the main townships.	Graham Gibbons	Yes

	Lead organisation delivering engagement	Start date	Completion date	Calderdale only?	Focus of the work	Methods	Key Contact	Happy to share findings?
					between the Council, businesses and voluntary organisations. Not Covid specifically but encompass a wide variety of projects and local priorities and representation from the community			
8	Calderdale Council - Communities (including Himmat, Halifax Central Initiative)	July	Ongoing	Yes	Supporting employment opportunities with BAME/EU communities, focused particularly on young people	Zoom, face to face (social distancing)	Asif Hussain	Yes
9	Together Housing			No - other areas where Together Housing have properties	Gathering residents' views on how Together Housing has delivered support during Covid-19		Mark Patterson / Linsay Severn	Yes

	Lead organisation delivering engagement	Start date	Completion date	Calderdale only?	Focus of the work	Methods	Key Contact	Happy to share findings?
10	Disability Partnership Calderdale	July	End of August	Yes	Gathering experiences of disabled people whilst out shopping in Calderdale	Survey / comms plan	Julie Stott	Yes
11	South West Yorkshire Partnership NHS Foundation Trust (SWYT)	ASAP	End of August	No - also Wakefield, Kirklees & Barnsley	Experience of using services during COVID19	Online, paper survey, discussion groups	Dawn Pearson	Yes
12	Calderdale and Huddersfield NHS Foundation Trust (CHFT)  1 staff engagement piece 1 public engagement piece	May 2020	Staff survey 31 <sup>st</sup> May  Patient survey 13 <sup>th</sup> July	No - also Huddersfield	To learn from people's experience of delivering (staff) and accessing (patients and public) services during Covid19 and to help us provide 'Business better than usual' as we move forward. In both surveys we asked for ideas of how we should deliver services in the	Internally - We have had a large number of meetings with staff groups across all clinical and non-clinical areas and external partners including CCGs, local authorities etc.  Externally - We published a survey on our website, promoted it on	Internal - Rebecca Sharpe / Nicola Bailey External - Claire Sibbald	Yes

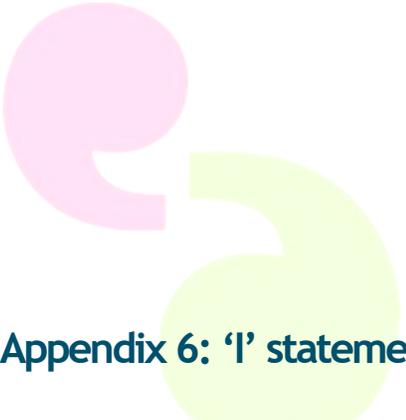
	Lead organisation delivering engagement	Start date	Completion date	Calderdale only?	Focus of the work	Methods	Key Contact	Happy to share findings?
					future as well as requesting feedback on peoples experience.	Facebook and twitter, sent text messages to circa 24,000 patients and emails to 1000 patients, volunteers and Trust members. We also sent the information and link out to several community groups and organisations via both Calderdale and Huddersfield CCGs and Healthwatch also promoted it.		
13	Locala			No - Kirklees predominantly	To learn about people's experiences of accessing Locala services during Covid-19.	"Doing things differently" survey	Emma Dickens	Yes

	Lead organisation delivering engagement	Start date	Completion date	Calderdale only?	Focus of the work	Methods	Key Contact	Happy to share findings?
14	North Halifax Partnership	Will take place over the next few months		Yes	Community listening approach, focused on “reimagining communities”. The focus will be “what make a good life in North Halifax”	Conversations with residents in the area	Tina Burke Rachel Swaby	
15	Upper Valley Test and Trace Community Pilot	Early July		Yes	Understanding more about people’s Covid experience	Survey shared through social media and Upper Valley organisational links	Colin Hutchinson Jenny Shepherd	
16	WomenCentre	Early June	End of August	No - also Kirklees	Women in Lockdown Project capturing the Covid-19 experiences of women, so that these can be used in creative ways, such as dance and poetry	Survey/case study template/online workshops	Emily Druce Emma Townend	
17	VAC (leading a partnership of local VCS	Late summer	By end of 2020	Yes	Under the Health Inequalities Funding bid,	Community reporters approach - sharing stories	Dipika Kaushal Hayley Trowbridge	

	Lead organisation delivering engagement	Start date	Completion date	Calderdale only?	Focus of the work	Methods	Key Contact	Happy to share findings?
	and statutory organisations)				gathering an understanding of how North Halifax and Central Halifax have been impacted by Covid-19 to enable the design of valuable interventions	of lived experience		
18	Voluntary and Community Sector Alliance	Early July	31 <sup>st</sup> July	Yes	Calderdale VCSE Mental Health Impact Survey to establish how voluntary sector organisations are being impacted by changes in people's mental wellbeing and managing themselves	Online survey	Jayne Leech	
19	Maternity Voice Partnership (MVP)	Late July	28 <sup>th</sup> August	No - also Kirklees	Understanding more about women's experience of accessing maternity	Online survey	Anna at Calderdale and Huddersfield MVP	Yes

	Lead organisation delivering engagement	Start date	Completion date	Calderdale only?	Focus of the work	Methods	Key Contact	Happy to share findings?
					services during the Covid-19 pandemic			
20	Harnessing the Power of Communities (West Yorks)	April	End of May	No - across West Yorkshire	Understanding how the delivery of services in the voluntary sector has changed during Covid-19, and how sustainable that is	Survey	Jo-Anne Baker	Yes
21	Autism Engagement (West Yorks)	July	End of August	No - across West Yorkshire	Gathering the views and experiences of people living with Autism through this Covid-19 period, and before	Survey	Shelley Russell	
22	Planned Care (West Yorks)	Late summer		No - across West Yorkshire	Gathering an understanding of how people want to access planned hospital care in the post Covid-19 NHS set up	Mixed methods - still being developed	Christine Hughes / Catherine Thompson	

	Lead organisation delivering engagement	Start date	Completion date	Calderdale only?	Focus of the work	Methods	Key Contact	Happy to share findings?
23	Cancer Research UK		Unknown	No - across the UK	Gathering an understanding of how people receiving cancer treatment, diagnosis and care were impacted by the pandemic	Unknown	Complete report at this <a href="#">link</a>	See report



## Appendix 6: 'I' statements Long Term Plan

- I care about the NHS
- Listen to me
- Care about me and respect me
- See me as a whole person
- Support me to better care for myself and be there for me when I have problems
- Don't keep me waiting
- Encourage and assist me to use digital technology but don't let that replace all human contact
- Share my information with each other and work together to deliver my care
- Understand that if I have a mental health condition, I am typically having a poorer care experience
- Understand that if I am from a BAME community, I typically have less knowledge of upcoming initiatives, technologies and terminologies
- Look after the people who care for me

## Appendix 7: List of partners and places contacted for engagement

- Residents of Calderdale - from young to old
- Health and care workers in Calderdale
- Healthwatch Calderdale
- Calderdale Clinical Commissioning Group
- Calderdale Metropolitan Borough Council
- Calderdale Disability Partnership
- St Augustine Centre
- Lead the Way
- The Stroke Association (Calderdale branch)
- Voluntary Action Calderdale
- Local mosques
- South West Yorkshire Partnership NHS Foundation Trust
- Calderdale and Huddersfield NHS Foundation Trust
- Locala
- St Augustine's Centre
- Lead the Way
- Healthy Minds
- Calderdale NAS
- Specialist Autism Services
- Sisters United
- Wheelchair Enabling Society
- Disability Support Calderdale

- 
- Calderdale Forum 50+
  - Staying Well Calderdale
  - YODA (Young Onset Dementia & Alzheimer's Peer Support Group)
  - Halifax & Calder Valley MS Society
  - Different Strokes Calderdale
  - Brunswick Centre
  - Valley of Sanctuary
  - Halifax Blind Society
  - Calderdale Deaf Association
  - Unique Ways
  - Imagineer
  - Unmasked Mental Health
  - The Hive Halifax
  - Calderdale Carers
  - WAC (Women's Activity Centre)
  - Calderdale Women Centre
  - Alzheimer's Society
  - Andy's Mans Club
  - Memory Lane Café
  - The Artworks
  - Society for Neurodiversity (S4ND)
  - Noah's Ark Centre
  - The Phoenix Shed
  - Calderdale MS Society
  - Living Well Calderdale
  - Calderdale Smartmove
  - Healthy Mums Calderdale
  - Light Up Black and African Heritage Calderdale (Light up Bahc)



## Appendix 8: Survey

Your health and care experiences during the Covid-19 outbreak - Calderdale and Kirklees

We want to hear from people who have needed or worked in health and/or care services during the Covid-19 outbreak, so we've created this survey to ask people for their stories. There are lots of questions on this survey but you'll only be asked some of them, depending on your experiences.

Our job at Healthwatch is simple. We're here to help make health and care work better for everybody. During this challenging time of Covid-19, this role has never been more important.

Healthwatch Calderdale and Healthwatch Kirklees are gathering feedback regarding local people's experiences of accessing and working for health and care services during the Covid-19 outbreak. We are doing this in partnership with Calderdale Clinical Commissioning Group (which plans and buys healthcare services for Calderdale), Calderdale Council and voluntary and community organisations in Calderdale, and we are supported by the North Kirklees and Greater Huddersfield Clinical Commissioning Groups.

If you have made contact with, tried to contact or worked for any health or care services during the Covid-19 outbreak, please fill in our survey. Whatever your experience, we want to hear from you.

Health and care services have had to quickly change the way they work and deliver services in response to Covid-19. Whilst health and care staff are doing everything they can to keep us well during this crisis, there might be things that can be improved. There may also be positive changes to your care.

By filling in this survey you can help services to understand how you feel about the changes made to health and care services and the issues that are affecting you. It's our job to listen to people's experiences, then share their views with those who can do something about it.

We want to ensure that the positives in health and care during the Covid-19 outbreak are not lost and the negatives do not become the norm.

Everything you tell us will be anonymous - but we believe your feedback will help us shape future health and care and make a positive difference.

This survey will be open until 28th August 2020

Thank you!

**\* 1. Consent:**

**I give my consent for Healthwatch Calderdale and Healthwatch Kirklees to use my data anonymously and to share the project's findings with other organisations, such as the Clinical Commissioning Groups and Councils**

Yes

No

**\* 2. Are you**

The person who needed a health and/or care service?

A family member, carer or representative of a person who needed a health and/or care service?

The person who works for the health or care service? Please tell us which service you work for

**3. Which area do you live in?**

Calderdale

Kirklees

What is the first part of your postcode? E.g. HD1, HX6, WF12

4. Which area do you work in?

The purpose of this question is to collect general overarching feedback about services in general rather than to provide specific services with direct feedback.

If you do not wish to answer this question, please leave it blank.

Calderdale

Kirklees

5. What is your experience of working for your service during the Covid-19 outbreak?

6. Are there any examples of good practice from the Covid-19 outbreak that you would like to share?

Yes

No

If you have answered 'yes' to this question, please tell us about the good practice

7. Have you needed to contact any of the following health services during the Covid-19 outbreak?



(Hospitals, GPs, Maternity Services, Dentists, Pharmacies, Opticians, Community Based, Urgent Care Centres, Emergency Care)

Please answer either 'yes' or 'no' to this question by ticking one of the boxes below:

Yes

No

8. Have you needed to contact any of the following care services during the Covid-19 outbreak?



Social Care



Residential Homes



Nursing Homes

(Social Care, Residential Homes, Nursing Homes)

Social care services help, care and protect vulnerable people from harm. They include information and advice services, home care, day care, safeguarding services and short term support services for example to aid recovery after discharge from hospital or for respite.

Please answer either 'yes' or 'no' to this question by ticking one of the boxes below:

Yes

No

9. Please tell us the names of the services you contacted **and** the dates on which you contacted them on. If you can't remember the exact date, just tell us the approximate date.

For example:

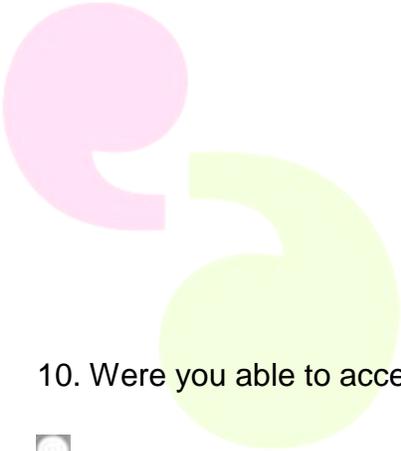
GP: end of March 2020

Hospital: Maternity: early April 2020

Hospital: Pain management service: 1st April 2020

Adult social services: 15th April 2020

Community services: District nurse: from 21st April



10. Were you able to access the service/s?

Yes

No

If no, please tell us why you were not able to access the service

11. The Covid-19 outbreak has resulted in many changes to the way health and social care is delivered. Were any changes made to the service you received or delivered during the Covid-19 outbreak?

Yes (please tell us the name of the service/s below)

No

Don't know

Please tell us:

- the name of the service/s



12. Please tell us more about the changes you experienced, for example what was different? How was it different?

13. What was good about the service you received or delivered and what worked well for you?

14. What did not work so well?

15. What would have made your experience better?

16. Thinking about the changes to your health and care/the service you deliver, that you have experienced during the Covid-19 outbreak, are there any changes you would like to become a permanent part of the service in future?

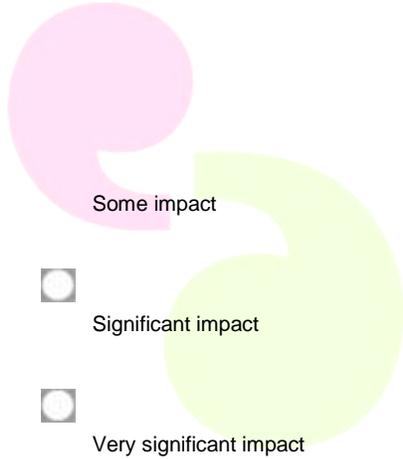
17. Is there anything else you'd like to tell us?

**Your mental health**

We are interested to understand what impact the Covid-19 outbreak has had on your mental health. Whether the effect has been positive or negative, please tell us your experience.

18. To what extent has the COVID-19 outbreak impacted your mental health?

No impact at all



19. If you would like to tell us more about your mental health during the Covid-19 outbreak please do so here

### Some information about you

It's really important to Healthwatch Calderdale, Healthwatch Kirklees and our partners that we try to understand whether certain groups of people with specific characteristics are having similar experiences, so we can tackle any inequalities that we see in the way that health services are provided.

If you feeling comfortable doing so, please answer some or all of the questions in this section.

20. What is your gender?

Male

Female

I describe my gender in another way - please specify in box below

21. How old are you?

Under 16

16-20

21-30

31-40

41-50

51-60

61-70

over 70

22. Which country were you born in?



United Kingdom

Prefer not to say

Other (please specify)

### 23. Do you belong to any religion?

Buddhism

Christianity (all denominations)

Hinduism

Islam

Other (please specify)

Judaism

Sikhism

No religion

Prefer not to say

### 24. What is your ethnic group?

Asian or Asian British: Indian

Asian or Asian British: Pakistani

Asian or Asian British: Bangladeshi

Asian or Asian British: Chinese

Black or Black British: Caribbean

Black or Black British: African



Mixed or multiple ethnic groups: White and Black Caribbean

Mixed or multiple ethnic groups: White and Black African

Mixed or multiple ethnic groups: White and Asian

White: English, Welsh, Scottish, Northern Irish, British

White: Irish

White: Gypsy or Irish Traveller

White: Other

Other ethnic groups: Arab

Any other ethnic group

Prefer not to say

25. Do you consider yourself to be disabled?

Yes

No

Prefer not to say

## 26. Do you have any long-term conditions, impairments

or illnesses? Please tick any that apply

- |                          |   |                          |   |
|--------------------------|---|--------------------------|---|
| <input type="checkbox"/> | Physical mobility impairment (such as using a wheelchair to get around and/or difficulty using your arms) | <input type="checkbox"/> | Neuro diverse conditions (such as autism, ADHD and/or dyslexia)                   |
| <input type="checkbox"/> | Sensory impairment (such as being blind/partially sighted or deaf/hard of hearing)                        | <input type="checkbox"/> | Long-term condition (such as cancer, HIV, diabetes, heart disease, epilepsy etc.) |
| <input type="checkbox"/> | Mental health condition (such as having depression or schizophrenia)                                      | <input type="checkbox"/> | Prefer not to say   |
| <input type="checkbox"/> | Learning, understanding, concentration or memory (such as Down's Syndrome, stroke or head injury)         |                          |   |
| <input type="checkbox"/> | Other (please specify)  |                          |   |

## 27. Are you a carer?

Do you provide unpaid care/support to someone who is older, disabled or has a long-term condition?

- Yes
- No
- Prefer not to say

28. Please select the option that best describes your sexual orientation

Bi/bisexual

Gay

Lesbian

I prefer to use another term (please specify)

Heterosexual/straight

Prefer not to say

29. Do you consider yourself to be a Trans\* person?

\*Trans is an umbrella term used to describe people whose gender is not the same as the sex they were assigned at birth

Yes

No

Prefer not to say

30. Do you/get anyone you live with any of these types of benefits?\*\*

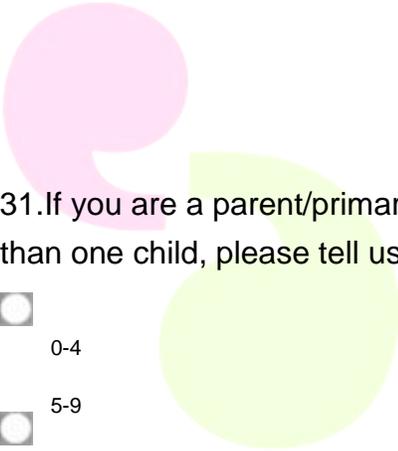
Universal Credit, Housing benefit, Income Support, Pension Credit - Guarantee Credit Element, Child Tax Credit, Incapacity Benefit/Employment Support Allowance, Free School Meals, Working Tax Credit, Council Tax Benefit

\*\*We are asking this question to help us understand if being on the lower income affects experiences of health and care services

Yes

No

Prefer not to say



31. If you are a parent/primary carer of a child or children, how old are they? (If you have more than one child, please tell us your youngest child's age)

0-4

15-19

5-9

Prefer not to say

10-14

Not applicable

32. Are you pregnant or have you given birth in the last six months?

Yes

No

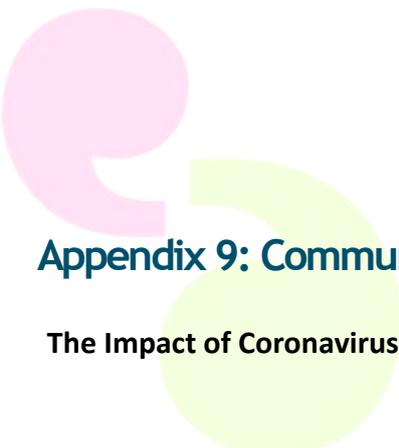
Prefer not to say

Thank you for completing our survey. We really appreciate you taking the time and sharing your experiences.

If you want to know more about what happens as a result of sharing your views with us, visit the Healthwatch websites for Calderdale or Kirklees; we'll share any updates on there.

If you'd like to hear more from us, please head to our contact page on the websites and use our form to request more information.

Visit [www.healthwatchkirklees.co.uk](http://www.healthwatchkirklees.co.uk) or [www.healthwatchcalderdale.co.uk](http://www.healthwatchcalderdale.co.uk)



## Appendix 9: Communications plan

### The Impact of Coronavirus (COVID-19) on the experience of health and care services Communications plan

#### Context

In these times of unprecedented change, brought about by Covid-19 lockdown, to the way people live their lives, and the way that health and social care services are provided, it is essential for our health and care systems to understand how these changes are impacting the people of Calderdale and Kirklees.

It is clear how much good will is being shown by individuals and communities in our local area, and how positively they feel about the efforts that are being made by key workers in health, care, schools, shops, warehouses, and many more. We want to understand what the public wants to celebrate about the people who are serving our population during this pandemic, what changes they have seen that have improved their experience of health and care, and whether there have been concerning or difficult experiences.

The organisations that deliver engagement work with communities in Calderdale and Kirklees have committed to work in collaboration to pull together useful, valuable information about how people's experiences of health and care services have changed during the Covid-19 pandemic. We hope that this will indicate to us what is working well, and where there are challenges, gaps and barriers that are impacting on people's wellbeing.

#### Aim

The overall purpose of the project is to work in partnership with stakeholders across Calderdale and Kirklees, to deliver a co-ordinated set of communication activities to a range of target audiences to gather public experiences of health and care services.

#### Communication principles

All communications and engagement activity carried out by partners will be:

- Accessible and inclusive – to all our audiences
- Clear and concise – allowing messages to be easily understood by all
- Consistent and accountable – to ensure that messages are clear and reliable
- Flexible – ensuring communications and engagement activity follows a variety of formats, tailored to and appropriate for each audience
- Open, honest and transparent – we will be clear from the start of the conversations what aim is, the reasons why and ultimately, how changes could be made
- Targeted – making sure we get messages to the right people and in the right way
- Timely – making sure people are kept updated on a regular basis



- Two-way – we will listen and respond accordingly, providing feedback to audiences on a regular basis

### Objectives

- Engage with the public around their experiences of health and social care in Kirklees and Calderdale at this time
- Capture how communities are working together and supporting one another throughout this time
- Increase brand awareness of Healthwatch Calderdale and Healthwatch Kirklees
- Encourage the public to respond to our survey/resources
- Start conversations and inspire creative user generated content to capture stories of Covid-19 lockdown circumstances

### Strategy

To influence the way that health and care services will be delivered in the future, based upon public voice and experiences.

### Audiences

- General public within Kirklees and Calderdale localities who are using health and care services
- People who are socially isolating
- People who are shielding
- Vulnerable members of our communities
- People with protected characteristics
- Children and young people
- Voluntary and community groups
- Staff from all health and care services including hospital, community and primary care
- MPs and councillors

### Messages and Channels

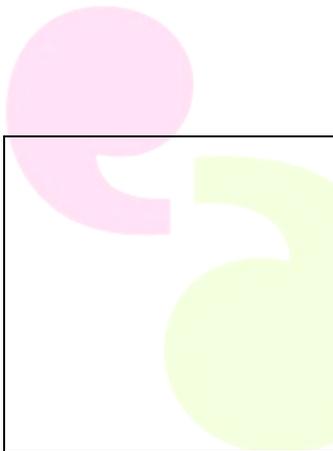
Target Audience	Key messages	Delivery Method
<b>General public who are using health and care services in Calderdale and Kirklees</b>	<ul style="list-style-type: none"> <li>- Say thank you to....</li> <li>- Tell us your experience of xxxxx</li> <li>- If you could talk directly to the NHS what would you say?</li> <li>- If you could talk directly to xxxxx what would you say?</li> </ul>	Raise awareness of the engagement through: <ul style="list-style-type: none"> <li>• Social media channels</li> <li>• Direct messaging via social media *</li> <li>• Paid social media advertising*</li> </ul>



	<ul style="list-style-type: none"> <li>- What are your experiences of the NHS and social care during lockdown?</li> <li>- Answer our survey about the NHS and social care</li> </ul>	<ul style="list-style-type: none"> <li>• Partner websites and newsletters</li> <li>• CCG membership</li> <li>• Third Sector contacts</li> <li>• Outreach groups</li> <li>• Direct with our communities via community representatives at the council</li> <li>• GP practice patient participation groups</li> <li>• Partners to cascade via their networks and partners websites and social media</li> </ul>
<p><b>People who are socially isolating and shielding</b></p>	<ul style="list-style-type: none"> <li>• Say thank you to....</li> <li>• Tell us your experience of xxxxx</li> <li>• If you could talk directly to the NHS what would you say?</li> <li>• If you could talk directly to xxxxx what would you say?</li> <li>• What are your experiences of the NHS and social care during lockdown?</li> </ul>	<ul style="list-style-type: none"> <li>• Send directly to community volunteer groups to request sharing via befriending calls and deliveries</li> <li>• Social media channels</li> <li>• Newspaper</li> <li>• Word of mouth</li> <li>• Shareable postcards to post through doors - direct mail  *</li> <li>• Pharmacy delivery bags</li> </ul>
<p><b>Vulnerable members of communities and people with protected characteristics</b></p>	<ul style="list-style-type: none"> <li>• Say thank you to....</li> <li>• Tell us your experience of xxxxx</li> <li>• If you could talk directly to the NHS what would you say?</li> <li>• If you could talk directly to xxxxx what would you say?</li> <li>• What are your experiences of the NHS and social care during lockdown?</li> <li>• Resources in alternative languages</li> </ul>	<ul style="list-style-type: none"> <li>• Gatekeepers to communities</li> <li>• Social media targeted groups</li> <li>• Religious leaders</li> <li>• Outreach contacts</li> <li>• Enter and view contacts</li> </ul>
<p><b>Children and young people</b></p>	<ul style="list-style-type: none"> <li>• Tag @HWKirklees in your lockdown TikToks</li> </ul>	<ul style="list-style-type: none"> <li>• TikTok</li> <li>• Instagram</li> </ul>



	<ul style="list-style-type: none"> <li>• Complete our family resources about NHS and social care in lockdown</li> <li>• Tell us how your children feel about the NHS and/or social care services in Kirklees/Calderdale</li> <li>• Are you a young carer? Tell us about your NHS and social care experiences throughout lockdown</li> </ul>	<ul style="list-style-type: none"> <li>• Young volunteers</li> <li>• Youth forum contacts to cascade via their usual channels</li> <li>• Email young carers groups</li> <li>•</li> </ul>
<b>Staff and providers</b>	<ul style="list-style-type: none"> <li>• Calling all NHS and social care workers in Kirklees/Calderdale.</li> <li>• Tell us what it is like working throughout this Covid-19 pandemic</li> </ul>	<ul style="list-style-type: none"> <li>• Emails</li> <li>• Staff briefings</li> <li>• Internal bulletins</li> <li>• Staff Intranets</li> <li>• Cascades at meetings through managers</li> <li>• Social media channels</li> </ul>
<b>Voluntary and community groups, key partners and stakeholders</b>	<ul style="list-style-type: none"> <li>• Please share our NHS and social care survey with your contacts</li> </ul>	<ul style="list-style-type: none"> <li>• Outreach contacts via email</li> <li>• Personal discussions</li> <li>• Board organisations email</li> <li>• Targeted social media direct messages</li> <li>• Hard copy surveys</li> </ul>
<b>MPs and local councillors</b>	<ul style="list-style-type: none"> <li>• Say thank you to....</li> <li>• Tell us your experience of xxxxx</li> <li>• If you could talk directly to the NHS what would you say?</li> <li>• If you could talk directly to xxxxx what would you say?</li> <li>• What are your experiences of the</li> </ul>	<ul style="list-style-type: none"> <li>• Email</li> </ul>



	<p>NHS and social care during lockdown?</p> <ul style="list-style-type: none"> <li>• Answer and share our survey about the NHS and social care in Kirklees/Calderdale</li> </ul>	
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### Timeline

Action	Date period
Resource planning and creation	18 <sup>th</sup> – 22 <sup>nd</sup> May 2020
Survey and resources go live	27 <sup>th</sup> May 2020
Social media launch	27 <sup>th</sup> May 2020
Request partners and stakeholders share the information	25 <sup>th</sup> – 29 <sup>th</sup> May 2020
Direct contact on social media followers	27 <sup>th</sup> – 29 <sup>th</sup> May 2020
Ongoing evaluation of social media messages and imagery	1 <sup>st</sup> June - 17 <sup>th</sup> July
Evaluation of survey and specific target audiences required	1 <sup>st</sup> of each month

### Resources required

- Surveys
- Staff video
- Images
- Press release
- Story telling templates / case study templates
- Toolbox for partners including copy for emails, tweets, images, websites, newsletter, internal staff intranet
- Website page with collection of resources
- Email copy for outreach contacts, MPs, Councillors, direct messaging
- Hard copy surveys
- TikTok account creation
- Pharmacy bag leaflet/postcard
- Direct mail – Royal mail £500 per 8,000 homes
- Press release
- Social media advert
- Rio

## Evaluation

Communications channels, messages, survey numbers and audiences will be evaluated on a regular basis, resulting in changes to the communications plan. Full evaluation of the communications plan will be based upon meeting the communications objectives.

Evaluation method	Date / timings
Key messages	Every 2 weeks
Channels	Every 2 weeks
Direct mail/adverts	Timings based upon return on investment
Social media statistics	1 <sup>st</sup> of each month
Survey response numbers	1 <sup>st</sup> each month
Targeted audiences based on survey responses	1 <sup>st</sup> each month
Complete communications statistics	Close of project

## Evaluation of communication objectives

Objective	Evaluation method
- Engage with the public around their experiences of health and social care in Kirklees and Calderdale at this time	- Total number of responses to survey, case studies, storytelling resources returned - Social media statistics
- Capture how communities are working together and supporting one another throughout this time	- Qualitative data analysis
- Increase brand awareness of Healthwatch Calderdale and Healthwatch Kirklees	- Social media analytics - Response to news article
- Start conversations and inspire creative user generated content to capture stories of Covid-19 lockdown circumstances	- Number of user generated content received - Quality of user generated content
- Encourage the public to respond to our survey/resources	- Survey responses - Social media reach and engagement