
South Glamorgan Community Health Council

The Impact of Covid Restrictions on People Receiving Care & Their Families, and Care for People with Long Covid

September 2022



Accessible formats

This report is also available in Welsh.

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Contents

About the CHCs	Pg 3
Executive Summary	Pg 4
Introduction & Background	Pg 7
What we did	Pg 11
Who we are hearing from	Pg 13
What we heard	Pg 14
Learning from what we heard	Pg 37
Thanks	Pg 41
Feedback	Pg 42
Contact details	Pg 43

About the Community Health Councils (CHCs)

CHCs are the independent watchdog of the National Health Service (NHS) within Wales. CHCs encourage and support people to have a voice in the design and delivery of NHS services.

CHCs work with the NHS, inspection and regulatory bodies. CHCs provide an important link between those who plan and deliver NHS services, those who inspect and regulate it and those who use it.

CHCs hear from the public in many different ways. Before the coronavirus pandemic, CHCs regularly visited NHS services to hear from people while they were receiving care and treatment. CHCs also heard from people at local community events, and through community representatives and groups.

Since the coronavirus pandemic, CHCs have focused on engaging with people in different ways.

This includes surveys, apps, videoconferencing and social media to hear from people directly about their views and experiences of NHS services as well as through community groups.

There are 7 CHCs in Wales. Each one represents the “patient and public” voice in a different part of Wales.

Executive Summary

As a result of the Covid-19 pandemic, restrictions were introduced to the way we access health care services across Cardiff & Vale of Glamorgan. In addition, a new condition has been discovered called Long Covid, which has a long-term effect on some patients who have contracted Covid-19.

The CHC recognised the importance of gaining feedback and insight from patients on how restrictions impacted their ability to access healthcare services and what care and treatment is available for those patients suffering from Long Covid.

The CHC received a number of responses to our request for feedback on both the impact of restrictions on people accessing healthcare and their families, and care provided for people with Long Covid.

Overall, it was clear in what we were told that the restrictions introduced had a major negative impact on the population of Cardiff & Vale of Glamorgan when accessing health care services.

It was also made clear to us that for those patients suffering from Long Covid, the majority of respondents felt there was little or no help available to them for their condition.

GP Services

Respondents informed us of the difficulties they faced in accessing GP services due to changes to the way they were able to book appointments. The telephone triage system introduced by all GP services was not welcomed by most patients as they felt this was a barrier to them being able to see a GP face to face, as face to face appointments were only granted to those the GP felt appropriate. This resulted in an inaccurate diagnosis for some patients as they were deemed to not require a face to face appointment at the time of their telephone consultation. Patients also encountered difficulties with the removal of their ability to book appointments in advance, with emergency 'on the day' appointments being the only ones offered.

Respondents also reported on the lack of knowledge of GP's when it came to Long Covid, and the lack of referrals, or the long wait once referred to the Long Covid Rehabilitation Service available in Cardiff & the Vale of Glamorgan.

Hospital Services

Patients reported on the difficulties they faced with regards to cancelled appointments, restrictions with regards to being accompanied to hospital appointments by others and their inability to visit those in hospital for treatment. Disparities in rules with regards to visiting others in Hospital across various Health Board estates in

Cardiff and Vale of Glamorgan was also commented upon.

Poor communication was also a common theme amongst the feedback the CHC received.

Communication with regards to visiting process changes, the condition of inpatients who were not allowed to receive daily visitors and updates with regards to cancelled appointments were all issues mentioned in the responses submitted.

Long Covid Rehabilitation Service

This was noted as a 'life-line' for some patients who were referred to and had accessed this service. For others, they noted very long waits for their initial referral along with very long waits to access the service once referred.

Introduction & Background

The South Glamorgan Community Health Council strives to hear from patients and the public across all demographics, communities, and groups within Cardiff & Vale of Glamorgan.

As well as requesting general feedback from the public on matters concerning their healthcare, the CHC also run specific, targeted campaigns for information and feedback from patients with specific health conditions or disabilities, or on specific services within the NHS, in order to ensure we hear from all groups of society with regards to their healthcare provision.

In this instance, the CHC wanted to hear directly from patients about the impact of Covid-19 restrictions imposed on patients receiving care, and their families. The CHC also asked for feedback from patients suffering from 'Long Covid', on the care that they have received in Cardiff & Vale of Glamorgan.



In March 2020, the Covid-19 pandemic caused unimaginable disruption to all aspects of everyday life, including access to healthcare services.



Government restrictions imposed in response to the pandemic around social distancing, PPE and infection control, as well as increased workforce pressures caused by sickness and self-isolation requirements, resulted in a reduction in capacity of services across the NHS. This in turn has led to increased waiting list numbers and extended delays to diagnostics and treatment for patients within the NHS system.

The CHC recognises the importance of gaining insight into what life was like for patients who were receiving NHS care during this time, and their families.

'Long Covid' is a condition that a number of patients have been left suffering with after contracting Covid-19. Symptoms are wide ranging and felt to a varying degree by different patients. As Covid-19 is a new disease, the CHC felt it is important to gain feedback from patients with 'Long Covid' on the care and treatment that is available to them in Cardiff & the Vale of Glamorgan. All with the intention of making recommendations to Cardiff & Vale University Health Board and Velindre University NHS Trust on how to improve the experience from a patient point of view, if appropriate to do so.

The World Health Organisation defines post Covid-19 condition, or 'Long Covid' in adults as

"occurring in people with a history of probable or confirmed SARS-CoV-2 infection, usually 3 months from the onset of COVID-19, and with symptoms that last for at least 2 months and cannot be explained by an alternative diagnosis."

'Long Covid' in children is defined as

"a condition in which a child or young person has symptoms (at least one of which is a physical symptom) that:

- Have continued or developed after a diagnosis of COVID-19 (confirmed with one or more positive COVID tests)*
- Impact their physical, mental or social wellbeing*
- Are interfering with some aspect of daily living (eg, school, work, home or relationships) and*
- Persist for a minimum duration of 12 weeks after initial testing for COVID-19 (even if symptoms have waxed and waned over that period)"*

Common symptoms of 'Long Covid' include fatigue, shortness of breath, cognitive dysfunction but also others and generally have an impact on everyday functioning.

According to the Office for National Statistics

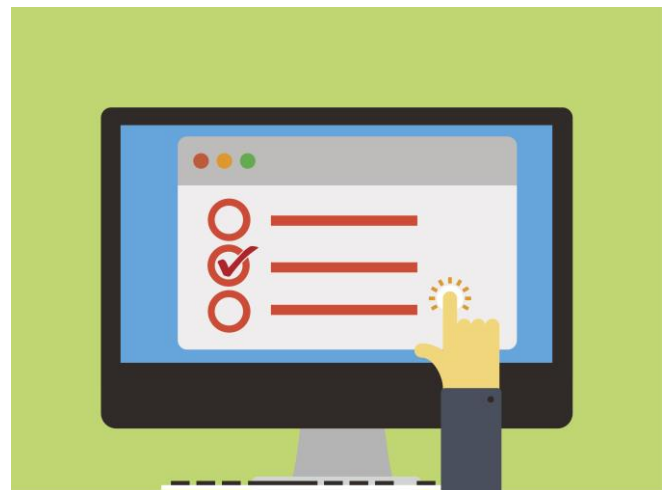
"An estimated 2.0 million people in private households in the UK (3.1% of the population) were experiencing self-reported long COVID as of 31 July 2022. Of those,

over 8 in 10 (83%) reported experiencing long COVID symptoms at least 12 weeks after first having (suspected) COVID-19 and over 4 in 10 (45%) at least one year after. Just over a fifth (22%) reported experiencing symptoms at least two years after their suspected infection.”

What we did

Due to the Covid-19 Pandemic restrictions, the South Glamorgan CHC has been unable to carry out physical scrutiny visits to NHS Services across Cardiff and Vale of Glamorgan as we would under normal circumstances. As a result, we have been required to adapt the way we connect with patients and the public across Cardiff & Vale, in order to gather their views and experiences of accessing NHS Services.

The South Glamorgan CHC devised and published an online feedback form, to gain feedback from patients around their experiences of the impact of Covid-19 restrictions on people receiving care and their families in Cardiff & Vale of Glamorgan.



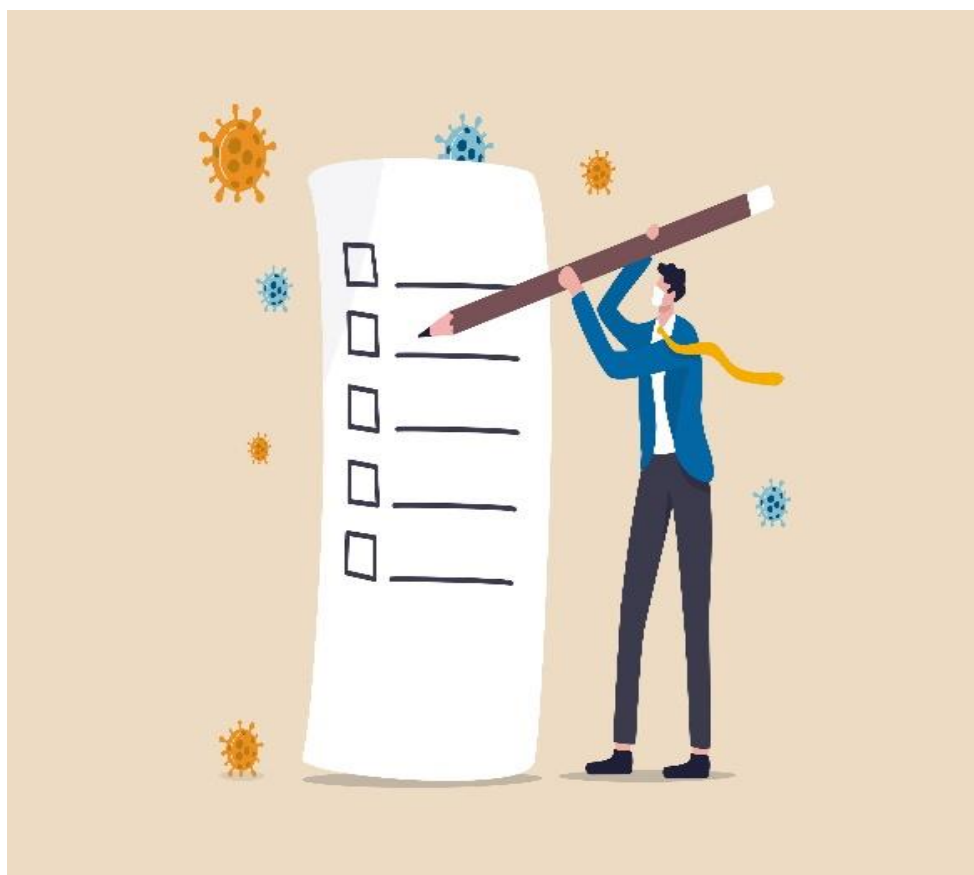
The South Glamorgan CHC also devised and published a separate feedback form, to gain the personal experiences of patients suffering from Long Covid and the care they have received.

The feedback forms were listed on our website and publicised through our Facebook and Twitter social

media channels. Details of the feedback forms were also included within our regular stakeholder briefings.

The feedback forms were available online for completion from 2nd February 2022 to 16th August 2022 in both English and Welsh, and simply asked respondents to provide any feedback they wished to share on both topics.

The public were also invited to contact the CHC via telephone or email if they wished to leave feedback in that manner.



Who we are hearing from

The CHC feedback forms were open to patients who had any experience of the impact of restrictions on people receiving care and their families, or for those who are suffering from Long Covid.

The CHC received a number of completed English online feedback forms relating to the impact of restrictions on people receiving care and their families.

The CHC received a number of feedback forms relating to the Care for people with Long Covid.

In addition the CHC also received feedback from the public via our social media channels, which was recorded and combined with the feedback received via our online forms for the purposes of this report.

We understand that Long Covid is relatively new and can present itself in many ways, therefore it is conceivable that some people may be experiencing symptoms but may not consider themselves as having Long Covid.



What we heard

Impact of Covid-19 Restrictions on People Receiving Care and Their Families

GP Services

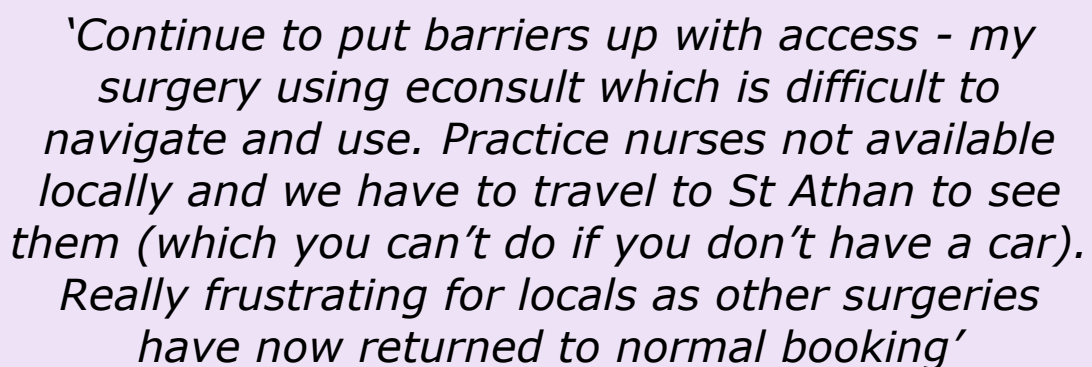
As a result of the Covid-19 pandemic, the way in which the public accessed GP's services changed. Changes such as the introduction of online booking systems, telephone consultations prior to attending face-to-face appointments, video appointments and the inability to simply walk into a GP Practice to obtain an appointment, were changes the public accepted as a necessity due to the unprecedented nature of the challenges faced by the NHS.

Feedback provided by the public demonstrates the difficulties they have faced with regards to GP services as a result of the changes introduced.



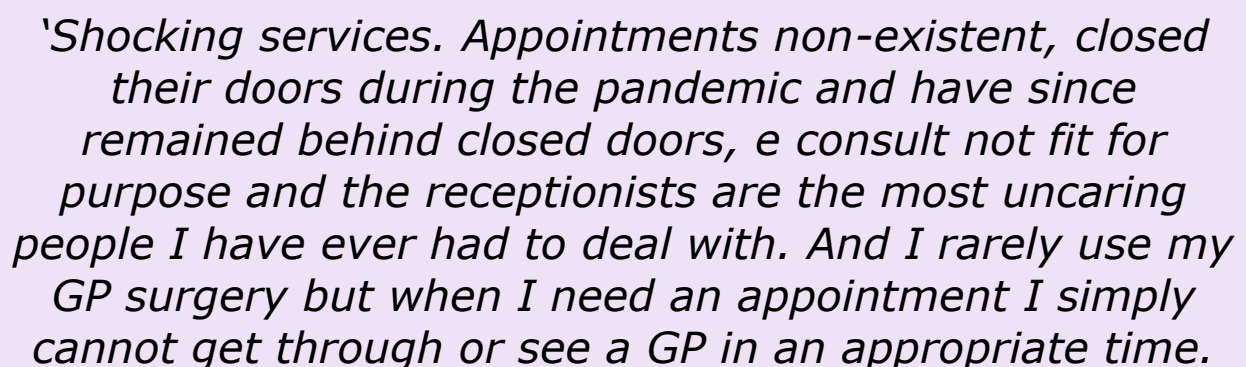
Access to GP services was a theme which ran through the public feedback the CHC received.

It was noted by one respondent that they felt GP services *'continue to put barriers up with access'*. E-consult was said to be *'difficult to navigate and use'*. A lack of availability of Practice nurses locally requiring travel was also reported.



'Continue to put barriers up with access - my surgery using econsult which is difficult to navigate and use. Practice nurses not available locally and we have to travel to St Athan to see them (which you can't do if you don't have a car). Really frustrating for locals as other surgeries have now returned to normal booking'

Another respondent also noted that *'E-Consult not fit for purpose'* and felt that their Practice *'remained behind closed doors'*.



'Shocking services. Appointments non-existent, closed their doors during the pandemic and have since remained behind closed doors, e consult not fit for purpose and the receptionists are the most uncaring people I have ever had to deal with. And I rarely use my GP surgery but when I need an appointment I simply cannot get through or see a GP in an appropriate time.'

Others also cited reception staff in their feedback, with one respondent stating:

"Trying to get past the receptionists has been a nightmare. To be truthful unless its severe I would prefer not to get in touch."

With another providing feedback on a personal positive experience but noting concern over an interaction witnessed between a receptionist and a patient with hearing loss.

'I personally have had a positive experience with my GP practice but whilst there witnessed some worrying/ unhelpful contact with a vulnerable patient. The patient came into the surgery and asked if they could make an appointment to see a GP. The receptionist advised that they had to ring to make the appointment. The patient advised they were hard of hearing, and they couldn't hear the receptionist when they rang so could never make an appointment. The receptionist just responded with "as I said, you need to ring for an appointment". The patient stated again that they were unable to do this but all the receptionists would respond with "well there's nothing I can do about this". I am very concerned that vulnerable patients are not being considered/ looked after. We speak about health and wellbeing but if the patients can't make contact, how can we ensure they are ok. This patient will probably never get to see the GP as it has been made impossible for him to make an appointment. I work for the NHS and was really shocked and concerned about this.'

Others expressed dissatisfaction with the telephone triage system introduced and did not believe it was the most cost-efficient way for the GP Practices to manage appointment bookings.



'It has been extremely difficult to gain face to face with the GP. you would have to have a telephone call which for some explaining on the phone is not easy. It must have taken so much more time first speaking on the phone. Then having a consultation.'

'I understand how hard it has been for Doctors during Covid. I do feel they need to get to a face to face book appointments. I cannot believe by speaking over the phone and then being given an appt time is the most cost-effective way.'

Another respondent reported an inability to book an appointment for a future date, and the need to ring every morning at 8:30am to book an 'on the day' appointment, and the issues this causes for working patients and parents with children in school.



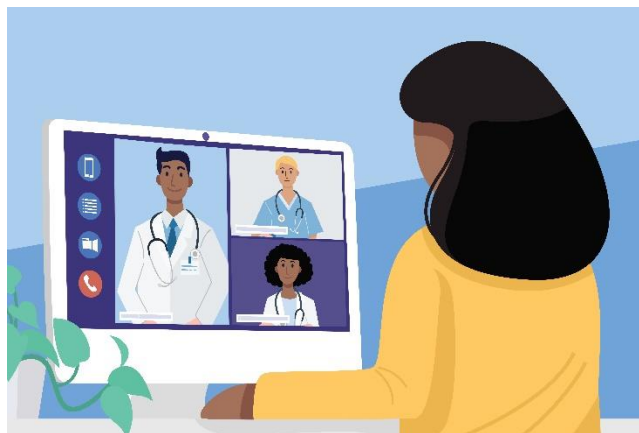
'It's very difficult to get an appointment, they refuse to book an appointment for any future dates, you have to call at 8.30 and try to get an appointment that day, if you are too late then you have to ring again the next day. This is a nightmare if you have to do the school run or on your way to work as you can't call while driving. I've explained this to them several times and they don't seem to care. Why can't they put you on the call list the next day? It doesn't make any sense to me, this system puts people off from getting the help they need.'

Another respondent informed us they felt their daughter had been 'fobbed off' after being directed back and fore between Pharmacy Services and their GP Practice.

'Daughter had a suspected UTI with blood in urine. Was told to go to pharmacy, explained to pharmacist said needed to see GP urgently, called GP back was told to go back to pharmacy, then had to assert myself and explain that she needed to be seen, receptionist reluctantly offered a call back within 24 hours, had to impress the seriousness on her and eventually arranged a call back which we had within 15 minutes, daughter was asked to come down immediately and prescribed antibiotics, what an absolute unnecessary amount of stress placed on a young girl trying to take responsibility for her own personal health, mum had to step in because she was being fobbed off. How many people are sick and suffering because they can't see their gp??? How many people are dying because they have waited too long for treatment and diagnosis????? Not good enough.

Once patients gained an appointment with their Practice, they reported difficulties when required to send pictures to their Practice, or access online resources.

'During the pandemic trying to get a doctors appointment has been terrible. Then when you have a call and the condition need to be seen or looked at, I was left trying to work out how to send photos of the concern. It took me 2 days and a lot of stress to do this. I could never get the video link to work properly.'



The CHC has been informed by patients of incorrect diagnosis they have received following a telephone consultation with their GP.

One respondent described how they were prescribed antibiotics following a telephone consultation with their GP in which they were diagnosed over the phone with a water infection. After a further telephone call to their GP

and another prescription for antibiotics, the patient was required to attend A&E to seek medical attention due to the pain they were suffering, the diagnosis of a water infection was then overturned by Clinicians in A&E.

We have also heard from patients who were unable to receive 'Home Visits' by their GP and District Nursing Services

'During covid my father wasn't able to access any care support. As he was house bound the doctor nor district nurse visited him'

Alongside the issues and concerns reported, there were positive patient experiences shared with the CHC.

'I have been very well looked after during the pandemic, during pregnancy and afterwards. I have easily got appointments in an appropriate time frame and seen face to face whenever it was needed.'



Hospital Services

Government restrictions imposed during the Covid-19 pandemic with regards to infection control and social distancing, meant that changes to access were introduced across Welsh hospitals. Visiting was severely reduced and in the majority of cases stopped completely. Patients attending A&E, Outpatient and Inpatient Services were restricted in terms of whether they could bring others to support them during their attendance.

Cardiff & Vale Health Board introduced a pilot named CAV24/7, which meant patients who wished to attend A&E services could no longer just turn up at the department to be seen. Patients needing to access A&E services were required to call a telephone number first. They would then receive a call back and be triaged, if it was deemed appropriate, they would then be given an appointment time to attend A&E. This was introduced in an attempt to restrict numbers in the department, in order to comply with social distancing measures.

Other Hospital services were operating under massively reduced capacity, meaning appointments for diagnostics and treatment were postponed or cancelled entirely.

Feedback provided by the public captures the frustration felt by patients, family members visitors and carers at the changes introduced, and details the difficulties they faced as a result.



Respondents informed the CHC of the inconsistencies noted across different Hospitals in Cardiff & Vale of Glamorgan with regards to rules for visiting patients.

'There is no consistency around visiting. Llandough is twice a week and opportunity to meet in the cafe with more than one person. St David's [Hospital] is one person once a week.'

One respondent reported how they were not informed by Hospital staff of changes to the rules meaning that visiting was again permitted, resulting in their mother spending weeks with no visitors once they were permitted.

'My elderly mum with dementia was admitted here (UHW) early 2021, she died there a few months later. She was deaf, had dementia, could have no visitors. Didn't know where she was or who she was with and couldn't hear. Within a few months she gave up. The hospital did not bother to tell me when they started to allow visitors so another few weeks of her being lonely went by. Even when she had passed and was in a room on her own, I was not allowed in to see her at the same time as my brother. More could have been done'

Whilst another commented on how the changes introduced would hamper a patients' recovery.

*'No visitors, no trolley service, staff shortages
Very bad for recovery'*

Poor communication was a theme reported by a number of respondents. Family members reported very poor communication from Hospital staff in relation to family members who had been admitted to the Hospital.



'The communication between hospital and family was very sparse during my mother's 7 month admission. We had 3 telephone contacts with Mum and 5 visits. She was unable to operate her mobile phone because she was confused, so we had no contact with her. Contact was only initiated when discharge planning was started after 5 months admission.'

'Restricted visiting has been horrendous when my grandmother with late stage Alzheimer's has been in hospital. Very little contact made from the hospital and not allowed to see her for 4 months. She had no one to advocate for her and ended up being discharged when severely dehydrated and needing an ambulance called to her less than 24 hours later.'

Other respondents informed us of the difficulties they faced in relation to the restrictions introduced around being accompanied or accompanying others to appointments and A&E. With many feeling that vulnerable patients or those with sensory loss were being disadvantaged as a result.

'I feel that the restriction for one adult/guardian to accompany a small child to A & E or in-patient services is inadequate! I attended with my 1 year old son, it is quite a highly stressful, anxious time when you need the support & help to care for the child whilst you are there for a number of hours (waiting!) alone. You cannot go to the toilet when you are there alone, where do I put my 1 year old while I try to go to the toilet or get a drink? He would just hysterically cry if I left him in a strange place on his own in a high barred cot whilst I was gone for a number of minutes! In addition, it's quite hard to concentrate on doctors talking & assessing your child when you are trying to occupy & stop them from crying or trying to crawl everywhere, so it would be VERY helpful to have that extra support person to help with those aspects! I understand there's "covid", however when the person is from the same household I am not quite sure why these restrictions are there as the risk is no greater when everyone is wearing PPE! I feel like you could take a lateral flow test at the door- to rest minds and just have that all important extra support person with you- especially needed with babies & small children (maybe not so much with an older child/teenager that could sit on their own for 2 minutes). I'm greatly disappointed in the NHS as a whole & how they have not moved with the lowering of the restrictions!'

'There are vulnerable people having to attend hospital appointments & A & E's on their own (for example my grandmother), they are unable to hear properly, explain things properly, understand or even remember information properly.... And are going in by themselves into a scary environment! E.G my grandmother had a TIA (mini stroke), was taken to a & e by my grandad & had to go in alone & be assessed- how was she to tell them what happened? What it looked like?? Etc.. my grandad should of been allowed there with her, to tell them all these things & to retain any advice or information given! It's changed for the worse & I really don't see it changing back for the better. It's unfair & the rules are just not relevant to the current issues going on in the world now! It is not a rant, but a hope for a change in services... as it can not go on as it is with a lack of family presence & support for ill & vulnerable people!'

One respondent shared their experience of Maternity Services in University Hospital of Wales (UHW) and explained how they felt the restrictions imposed were 'excessive' and 'made no sense at all' resulting in a very poor patient experience whilst giving birth.

'The restrictions within the maternity ward were excessive at the time I gave birth- 19/12/21. It had a big impact on the whole experience, I attended all appointments except the 12 and 20 week scan alone, this included a lot of consultant appointments. There was a lot of anxiety before giving birth around having to do elements of labour alone and being left shortly after the baby was born. During my labour I was taken to the assessment unit due to bleeding, and although my partner was already with me in the building in the mlu when we arrived at the assessment unit he was turned away despite it being 2am, leaving me to sit alone in a room to be monitored while in labour with unexplained bleeding. The rules at the assessment unit made no sense at all, the rooms are all private rooms and I ended up there a lot, spending worrying moments throughout pregnancy waiting hours and hours to be checked and then left alone in a room which would have been safe to have a partner in was horrendous. I was also covid swabbed during intense active labour which was awful.'



Patients reported that their appointments for various Hospital services had been cancelled as a result of lockdown, with no further information being received on when their cancelled appointment would be re-scheduled. In some cases this has led to an exacerbation of their symptoms and condition.

'Lack of care during covid has left me with difficulties I wouldn't have had I been treated sooner. I waited nearly 2 years for treatment which is now meaning I have a long drawn out process to correct issues that had I been seen earlier would have taken less time to sort.'

Gynaecology- I was due to have a diagnostic laparoscopy for endometriosis in May 2020, it was cancelled and to this day I haven't had any further communication from the hospital regarding appointments or information on a timescale for the surgery.

'Memory clinic have not given my husband any more appointments since lock down'

It was reassuring to note that a number of respondents provided very positive feedback with regards to care they, or family members had received from the Hospital during this time.

'Outstanding treatment throughout except not being able to accompany my wife who is receiving end of life care for her blood tests every other aspect outstanding'

'The care that my mother received at the end of her life was exceptional from the staff on Lakeside 1, University Hospital of Wales.'

'Whilst my son was at Noah's Ark Children's Hospital, he received fantastic care from all staff from A&E, owl ward, Piccu and island ward. He was treated with PIMS-TS in Oct 21. All staff were incredible and arranged for me to stay at Ronald McDonald House whilst he was in hospital so I could be close by at all times. The only issue we had was that I was the only one allowed to be on the ward at all times. My children were not able to come into the ward to visit once he was out of Piccu which was distressing to them.'

Although the overwhelming majority of respondents provided negative feedback with regards to the impact of Covid-19 restrictions on patients receiving care and their families, one respondent felt differently.

They reported how the restrictions in place made them feel much safer, now the restrictions have been lifted, they are worried about their ability to access healthcare services safely.

'I only feel safe attending these sites as there are strict guidelines for everyone about mask wearing, hand-cleansing, and social distancing. As someone already doubly affected by Covid, and Extremely Clinically Vulnerable, it is a concern that "relaxing restrictions" essentially means reducing my ability to safely access things.'





Care for People with Long Covid

The CHC recognises the importance of gaining feedback from patients, family and carers of those who are suffering from 'Long Covid' and the care and treatment available to them in Cardiff & Vale of Glamorgan.

GP Services

GP Services remain the first point of contact for the majority of patients when seeking help for a medical concern or condition.



Feedback provided by the public has again highlighted the difficulties faced by patients when trying to access their GP Practice.

'In my experience there is no care from GPs , you're lucky if u can get through on phone to reception typically u get message you're 30th in line to talk to reception'

Once patients are able to obtain an appointment, they have informed us that there is little help or care their GP is able to offer.

'My gp doesn't seem to be able to help me.'

'I have had long Covid for a long period of time. I was not offered a referral to a Long Covid Clinic at all. My GP was sympathetic but could offer no help.'

'GP not providing any help, the only advice is to rest which is not helpful after 2 years of long covid and a full time job.'

One respondent felt like they had to fight for a diagnosis.

'I've waited and had to stand up for my rights to be listened to as no diagnosis for a year and a half, now finally getting somewhere diagnosed with reflux breathing problems also angina peripheral neuropathy still waiting for respiratory referral'

Another respondent provided feedback on their referral to the 'Long Covid' clinic, noting that the process 'took a long time' and that they had to 'chase' their GP in order to be referred.

'the referral itself took a long time and I had to chase the GP to make the referrals after changing medication and injections for B12'

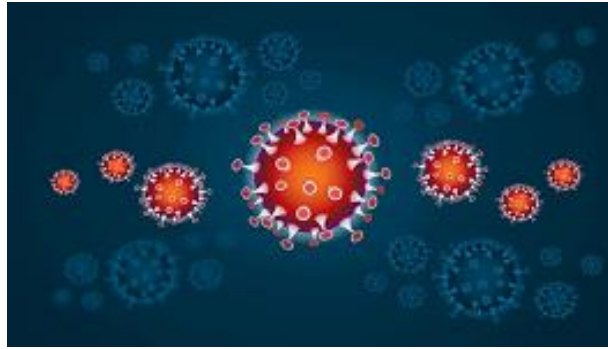
Hospital Services

Patients provided feedback on experiences they had with care for 'Long Covid' from Hospital services.

'Just how little help and support is offered. It's scary and the Dr pass you to hospital specialists. Specialists are doing their best but totally inundated and everyone is on a waiting list. Several occasions my hubby had to go to A&E due to breathing difficulties. There they were understaffed. He shared a trolley area with two others who had tested positive to covid (he had been covid free for several months. This caused extreme anxiety. One visit, he needed to be on a ventilator and they forgot about him. several hours later they apologised and my poor hubby was in a bad way'

'The hospital/covid ward was a terrible experience - it's traumatised me and in still living with long covid now'



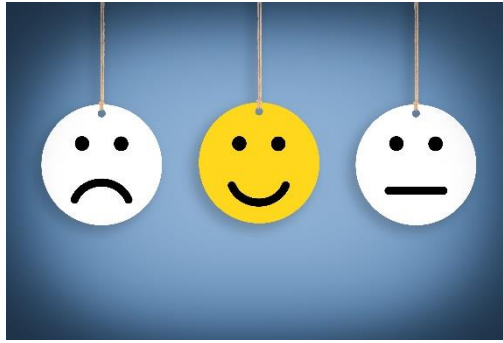


Long Covid Rehabilitation Service

As a result of the discovery of the condition 'Long Covid'. The Long Covid Rehabilitation Service has been established across Wales. In Cardiff & the Vale of Glamorgan, the Long Covid recovery team is a multi-disciplinary team consisting of Occupational Therapy, Physiotherapy, Speech and Language Therapy, Dietetics and Psychology.

According to the Cardiff and Vale University Health Board Keeping Me Well website, the role of the team is:-

"to support a coordinated approach to facilitate a "Your COVID Recovery" programme, which is individualised for people with enduring COVID-19 symptoms (including Long COVID). We will collaborate with existing, established Cardiff and Vale UHB rehabilitation services and third sector support. It will not replace any services, as there is not capacity to offer this."



Patients provided both positive and negative feedback on their experiences with this service.

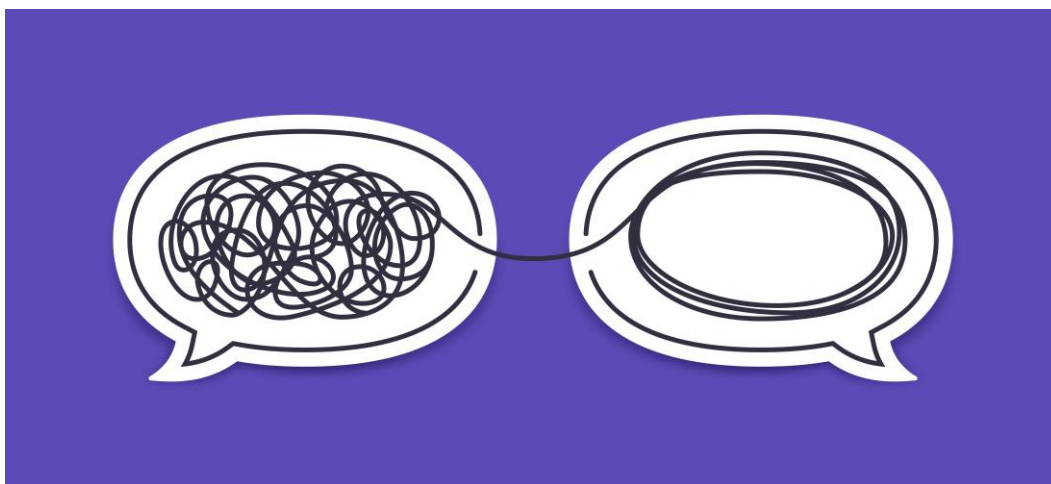
'Referred to long covid clinic rehabilitation about a year and a half now and haven't heard anything from them.'

'once referred, the initial appointment could not take place because the links took me straight to the surveys, the long covid team did get back to me the next day. but the process is taking a long time and it's affecting my work. without confirmation on paper it is long covid, I am in a position with work that I am losing out financially because of sick days and also its a conduct issue with the amount of sick periods.'

'Been taking part in the 6 weeks online rehabilitation for long covid with others who are suffering. This service has been invaluable to me, to be able to go through different areas of long covid with those who have the same issues.'

It was concerning to note that one respondent informed us that their mother is unable to access regular treatment in Hospital due to the travel distances required.

'My mother caught Covid after going into hospital with Sepsis. She was in intensive care for weeks (they phoned us at the time and said she only had about 2hrs to live and for us to say our goodbyes to her?) 😞. Unbelievably she rallied and got better and went on a rehab ward for weeks after that! She was in hospital about x3 months. All this was in the heights of the Covid pandemic! My mother is suffering very badly from long Covid! She was asked if she would like therapy and help at a hospital more than 8 miles away from her, that it's impossible for her to attend as her symptoms are:- Loss of independence, Exhaustion, Unable to walk as she used to, she now has to use a Zimmer frame or if she goes out she uses a mobility scooter (but that's not often), Bad Brain Fog, she gets very chesty due to Asthma and her inability to walk too much is not helping her. As much as she would love the help her inability to attend the hospital on a regular basis has hindered her ability to get well I think? My Mum did everything in her home as my father is also ill. Now my husband does their washing, ironing, gardening, shopping and any other things they may need as he works and I am disabled also, therefore we can't do as much as we would like. If she could have help/therapy at home it would benefit her greatly as travelling to and from a hospital that's not local is impossible for her. She got very depressed about her inability to do what she used to. Thankfully she is here with us which is the main thing but I wish she could have some kind of therapy?



Learning from what we heard

From the feedback the CHC has received, it is clear that patients receiving care and their families in Cardiff & Vale of Glamorgan have been greatly impacted by the Covid restrictions introduced.

The changes introduced to the way in which services are accessed and the reduced capacity of NHS services have greatly affected the respondents who provided feedback to the CHC.

Issues around accessing GP Services in the first instance were highlighted, with patients stating that they feel that GP Services are remaining '*behind closed doors*'. Concerns with regards to diagnosis received following telephone consultations were also noted. Some patients struggled with the technology required to book an appointment, whilst others had issues with technology when submitting additional information to their Practice, a process which would not have been necessary had the patient received a face to face appointment. Other patients were unable to book an appointment for a

future date, requiring them to ring every morning at 8:30am to book an appointment for that day, resulting in multiple phone calls across multiple days in order to book an appointment.

Patients do not believe that the requirement for an initial telephone consultation with their GP followed by a further face to face appointment is the best use of a GP's time, or the most cost-effective way to deal with appointment bookings. It is also less convenient for patients as they are required to be available for two separate consultations instead of one.

It was also disappointing, but not unexpected to hear from patients who were forced to attend A&E to seek medical attention as they could not access a face to face appointment at their GP Practice. This would obviously lead to long waiting time in the A&E department and additional pressures being faced by A&E services .

Patients have also reported confusion with regards to the restrictions in place within Hospital settings. Disparity in regard to visiting rules across different sites within the same Health Board area were highlighted. Elderly, vulnerable or disabled patients are seen as being at a disadvantage if they have to attend Hospital on their own, with no-one to advocate on their behalf.

Communication was also noted to be an issue, communication around hospital visiting rules, communication between Ward staff and families whilst family members were Inpatients, and a lack of communication around cancelled diagnostic and

treatment appointments were all noted by respondents as a concern.

For those patients suffering from Long Covid, feedback provided on the care they have received has been mixed. Some report that their GP is unable to offer any help including a referral to the Long Covid Rehabilitation Services, whilst others who have received a referral have waited 18 months following the referral with no further information being received on their appointment. One patient was unable to access their initial appointment with the Long Covid Rehabilitation Service in the first instance, again, due to issues encountered with the technology required to access his appointment. Whilst another was unable to access any Hospital services offered due to the symptoms of Long Covid they were suffering, and the distance they would be required to travel to access those Hospital services

For patients who are in active treatment with the Long Covid Rehabilitation Services, high praise has been awarded for the service they provide, with it being seen as a life-line by some.

Whilst the public were understanding of the need for restrictions and safeguards to be put in place, there must be a recognition by those who implement and enforce the changes, of the requirement for flexibility within those processes for patients who may require additional support and understanding. For example, those who are suffering from mental health issues, or physical impairments or disabilities that may affect their

ability to conform to these new processes, so they are not disadvantaged when attempting to access Healthcare services.

Patients are understanding of the pressures faced by the NHS and its staff due to the Covid-19 pandemic, but as life begins to return to 'normal' in terms of Covid regulations and restrictions, some patients now report it as being a convenient excuse used by the NHS for any issues encountered or delays faced, and many patients no longer find this acceptable.

Thanks

We thank everyone who took the time to share their views and experiences with us about their health and care services and to share their ideas.

We hope the feedback people have taken time to share influences healthcare services to recognise and value what they do well – and take action where they need to as quickly as they can to make things better.

Feedback

We'd love to hear what you think about this publication, and any suggestions about how we could have improved it, so we can use this to make our future work better.

This report is available in Welsh and English.



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If you write to us in Welsh, we will answer in Welsh. This will not lead to a delay in responding to your correspondence.

We welcome telephone calls in Welsh.

South Glamorgan Community Health Council