

# **Haringey and COVID-19: looking forward at local health and care services**

**Public meeting - 19 November 2020**

**Meeting report**

Published April 2021

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# 1. Introduction

North Central London CCG is committed to engaging with patients and the public in our work to plan and commission health services for residents in Barnet, Camden, Enfield, Haringey and Islington.

Public meetings are an opportunity for the CCG to hear from the local community, inform them about our work and receive important feedback about local health issues and services.

In 2020, the emergence of COVID-19 has significantly impacted the lives of people living in Haringey – not only residents' physical and mental health and wellbeing, but effecting employment, social isolation, housing etc. Communities already experiencing health inequalities have seen these further exacerbated by COVID-19.

This public meeting focused on how we can all work together – the CCG, Haringey Council, health, voluntary and community sector, Healthwatch and local residents – to ensure we are developing the right health and care services for Haringey residents during the pandemic and beyond.

## 1.1 Meeting overview

The Haringey public meeting took place on Thursday 19 November 2020 via online platform Zoom. The meeting was held online to comply with national guidance in place to tackle the spread of COVID-19.

Just over 100 people attended the meeting which comprised a mix of residents, representatives from the voluntary and community sector, who provide various support services for residents, other front-line staff and health and care professionals.

Attendees had the opportunity to discuss the following areas with the CCG's lead commissioners, local GPs and representatives from North Middlesex University Hospital, Whittington Health and Haringey Council:

- Primary care
- Mental health (adults and children)
- Health and care for older residents
- Hospital services
- COVID prevention and outbreak management

Attendees were able to select the workshop of their choice when they registered for the meeting.

This report includes the attendees' feedback from these workshops, as well as an [update on how we have/ will use this feedback](#) to further develop services to meet local people's health and care needs.

## 2. Discussion workshop summary

### 2.1 Primary care workshop

#### Impact of COVID-19 vaccination on 'business as usual' primary care activity

- A big collective undertaking, with complex logistics, to deliver the COVID-19 vaccination programme – with the need to train up staff to administer vaccination
- Vaccination uptake is very important for us all – but there will be lots of work needed to encourage residents to take up the vaccine
- Primary care remains 'open' but residents have experienced cancelled appointments and efforts are needed to inform residents that practices are still available
- CCGs are using private hospital capacity and NCL system (CCG, hospitals, Councils, general practices) are working together to make the best use of all NHS and care capacity
- GPs access to secondary care advice and guidance through digital platforms has been a positive.

#### Impact of digital appointments on access to care

- The move of some outpatient clinics and some primary care appointments to telephone and digital consultations has helped manage NHS workload during the pandemic
- Residents have queries re: confidentiality with regard to online consultations
- Limitations / issues with access raised – people who do not have access to the internet, cannot reach the surgery via telephone, and for whole English is not their first language. Example given of Turkish and Kurdish communities, where English isn't their first language - hard to explain issues over the phone, compared to appointments in person where you can mime to convey issues
- More promotion of translation services (Language Line) and information provision on this by primary care staff needed
- eConsult can be time consuming and difficult to set up, sometimes because of a lack of technology. Work by the CCG and Bridge on accessibility referenced - development of a pop up to inform GPs of patients' needs/ setting up of booths in publicly accessible places for remote consultations).

#### Test and trace: impact on primary care

- Attendees were interested to know why mass testing could not be undertaken by GPs. The capacity for mass testing is not available in primary care. Community testing capacity was highlighted.
- GP capacity has been supported by provision of laptops to GPs self-isolating, allowing them to work from home, and also access for general practice staff to rapid tests at Royal National Orthopaedic Hospital / University College London Hospital

## 2.2 Mental health (adults and children)

### Mental health support for BAME communities

- Attendees raised concerns re: the long-term effect on children and young people's mental health
- Mental health services online cannot be accessed by some residents - because of outdated / a lack of computer equipment or internet access. The CCG confirmed that digital inclusion issues are being considered when commissioning services (including pandemic service changes)
- Need to increase CCG support to grass-roots VCS, who have connections with BAME communities, and to increase VCS involvement in CCG planning
- Need to build up infrastructure in local neighbourhoods where local people can access support
- Access to outdoor spaces and facilities is beneficial for mental wellbeing, but social prescribing needs to be activated. Local organisations are providing second-hand equipment and training on using this.
- CCG's BAME mental health work plan being developed in partnership with Bridge and others – some of this is quite practical, including (mental wellbeing workshops etc.), bereavement counselling in over 30 languages.

### Broader feedback provided in this workshop included:

- Practice capacity is being impacted by COVID-19 but it is important to keep promoting the message that GPs are open during COVID-19
- GPs are making practices safe for people to come in, where necessary and trying to do home visits where it is appropriate
- VCS organisations keen to work with the CCG on helping them to continue to see BAME individuals face to face during the pandemic
- People of African heritage are still very much 'outside the loop' and COVID-19 has pushed them further out
- Questions were raised about the support is available for BAME shielding patients and language barriers – more help needed to access information and apply for support during the pandemic

## 2.3 Health and care for older residents

### Digital exclusion and access to services

- Older people with health conditions are being excluded – isolated elderly people who aren't being contacted need support. Befrienders to flag this but some residents are being missed.
- Concerns shared about older people who have complex co-morbidities, and not being able to access face to face GP appointments
- Older residents need to be contacted regularly VCS have links that can help the CCG and Council to reach these individuals. The importance of social prescribers, and how they should be helping residents to navigate services, discussed

- Question raised re: why practices do not have a traffic light system so they contact at risk people regularly. The issue of difficulty contacting practices when help was needed was raised
- Mental Health – suggestion that Improving Access to Psychological Therapies (IAPT) services be joined up with contacting older people via telephone to offer support.
- Buddy Hub in Haringey talked about the services they offer for befriending, and their interest in working with Council/CCG and system to be part of the solution
- Digital enablement is needed for older people to access some of the things online support put on place during the pandemic

#### Provision of physical activities to residents and supporting residents and grassroots organisations

- CCG-commissioned exercise services, e.g. 12 session program for older residents (RJ Sports therapies) have stopped during the pandemic
- Link between physical activity and mental health – COVID-19 guidance on staying at home and no mixing has meant that residents living in estates have had no access to physical activity or ability to congregate in communal spaces
- Discussions around the need for the CCG to support small grassroots organisations, who are providing really great activities – and not just larger organisations
- Difficulty for people with disabilities to exercise when facilities are closed

#### Guidance and communication

- Info on shielding did not consider that 'one size' advice does not reflect everyone's living situation e.g. a second bathroom/use kitchen separately etc.
- Messaging on shielding was raised as being confusing and language scaring people unnecessarily

#### More integrated approach to care and support – e.g. LGBTQ patients – older patients

- No dedicated support for these groups – recommendation that any strategy being developed takes LGBTQ patients into considerations, especially BAME communities
- Need to engage with these groups and ensure needs are addressed
- One participant informed the group that their organisation had set up dedicated befriending service for older LGBTQ members

## 2.4 Hospital services

### Safety in hospitals during pandemic

- Feedback on hospital safety was generally very positive. Residents were happy with the measures that were put in place expressing that it brought about a sense of safety under the circumstances.

### Communication with patients' families

- Where families are not able to see a relative in hospital during the pandemic, the benefit of having a non-clinical member of staff in place who can communicate/update families on the health and wellbeing of their relative was welcomed
- Feedback shared that not allowing partners to be with women giving birth was particularly stressful

### Remote consultations

- Virtual appointments may make it harder to diagnose conditions, with ear, nose and throat conditions difficult to diagnose effectively virtually or over the phone (a main concern for parents of young children)
- Need to promote awareness that face to face GP appointments remain available for patients that need them

## 2.5 COVID-19 prevention and outbreak management

### Impact of national guidance and track and trace system

- Concerns raised that local residents were not following national guidance (e.g. Tottenham High Street - people are not taking precautions, wearing masks)
- Really important to have effective local community engagement and deliver messaging around COVID-19 prevention guidelines, especially mask wearing – with recommendations that:
  - representatives of local communities are recruited as volunteers to deliver messaging out in the community
  - messages are shared with school children who can relay/ translate to families at home
  - commission small community organisations to make videos of key messages
- Participants queried the effectiveness of the Track and Trace system, and the importance of encouraging people to self-isolate.

### COVID-19 vaccine workforce

- Concern that drive to recruit people to administer vaccine will reduce NHS staff working in other areas and impact on patient care.
- If NHS is focussed on delivering vaccine it is important that other key services are still maintained, for example in primary care.

## 2.6 Questions and answers

Attendees raised questions at the meeting on the following:

- COVID-19 vaccination plans
- Access to primary care
- Flu jab campaign

Please see the following question and answer table for the CCG's responses to these questions. Please note some of these responses were provided by other organisations.

Questions	Responses
<p>How is the CCG planning to administer the COVID-19 vaccination in Haringey?</p>	<p>A strong partnership of councils, NHS organisations, voluntary and community organisations across Barnet, Camden, Enfield, Haringey and Islington, is working closely together to deliver the COVID-19 vaccination programme. The order in which people will be offered the vaccine is based on advice from the <a href="#">Joint Committee on Vaccination and Immunisation (JCVI)</a>.</p> <p>Currently (April 2021), the vaccine is being offered to:</p> <ul style="list-style-type: none"> <li>• people aged 50 and over</li> <li>• people at <a href="#">high risk from coronavirus</a> (clinically extremely vulnerable)</li> <li>• people who live or work in care homes</li> <li>• frontline health and social care workers</li> <li>• people with a condition that puts them at higher risk (clinically vulnerable)</li> <li>• people who are a main carer for someone at high risk from coronavirus</li> </ul> <p>For more information about the COVID-19 vaccine programme in North Central London please visit: <a href="https://northcentrallondonccg.nhs.uk/my-health/covid-19/covid-19-vaccinations-in-north-central-london/">https://northcentrallondonccg.nhs.uk/my-health/covid-19/covid-19-vaccinations-in-north-central-london/</a></p>
<p>GPs have increasingly been asking for photos of conditions rather than face-to-face appointments to diagnose patients, is this sufficient to make a diagnosis?</p>	<p>The COVID-19 pandemic has resulted in us having to deliver services differently, which includes reducing face-to-face GP appointments and providing more online, video and telephone consultations. Sometimes a GP will ask the patient to share a photo of their concern. A good quality photograph can often be very helpful in diagnosing conditions.</p> <p>Although more consultations are happening online/ telephone, patients will continue to be offered face-to-face appointments, where it's deemed clinically necessary.</p>

<p>What is the CCG's approach to increasing the flu vaccine uptake?</p>	<p>This year, in North Central London we have run an extensive communications and engagement campaign around the flu jab. This included promoting the flu jab via our website, social media and printed leaflets, which have been distributed locally. Haringey Council and other local partners and organisations, including Healthwatch and Bridge Renewal Trust have been promoting flu jab messages across their communication platforms too. We have also been engaging with local community groups, particularly groups identified as extremely vulnerable.</p> <p>In addition GP practices have contacted patients who were eligible for a free flu vaccine, via letter, texts and phone to arrange appointments; held out of hours flu jab clinics and offered home-visiting services for housebound patients or individuals who were shielding because of the pandemic.</p>
<p>What is the CCG doing to support BAME communities during the pandemic?</p>	<p>North Central London CCG is committed to tackling and reducing health inequalities, including those experienced by BAME communities, through our commissioning. Evidence has shown that BAME communities in particular have been disproportionately affected by the virus.</p> <p>In Haringey, the CCG is working with the Council, local voluntary and community sector, Healthwatch and other local agencies such as housing to gain a better insight into how Haringey's BAME communities have been affected by the pandemic. We have developed a joint action plan to better support these communities across all our services. This includes:</p> <ul style="list-style-type: none"> <li>• improving signposting to a range of health and support services, such as mental health, welfare and employment and community food support.</li> <li>• particularly focusing on mental health and bereavement support for BAME communities in their native languages</li> <li>• securing extra funding to support digital inclusion and better access to services</li> <li>• extensive work with these communities on COVID prevention and vaccination take-up.</li> </ul>
<p>What training has CCG staff had on unconscious bias?</p>	<p>North Central London CCG has an unwavering commitment to tackling discrimination and inequality as an employer and through our commissioning of health services for our diverse communities. Unconscious bias training is a key part of our training plan for all CCG staff to further embed fairness and equality within our organisation and in our approach to developing services for local people.</p>

<p>Can we see Healthwatch's 'Living during the Lockdown' report?</p>	<p>'Living during the Lockdown' report was produced by Healthwatch Haringey in August 2020 and can be found on their website:  <a href="https://www.healthwatchharingey.org.uk/report/2020-08-19/living-through-lockdown">https://www.healthwatchharingey.org.uk/report/2020-08-19/living-through-lockdown</a></p>
<p>Has the Healthwatch report identified the impact of living through the lockdown on LGBTQI+ communities, especially BAME LGBTQI+ individuals?</p>	<p>The Living through Lockdown report does not highlight issues related to this specific group. However we do have feedback from work we do in other projects, such as Reach and Connect, relating to this specific group.  <b>Response provided by Mike Wilson, Director, Healthwatch Haringey</b></p>
<p>Can we have report back on actions taken from this meeting, and also on digital poverty and access please?</p>	<p>Patient/ resident experience and feedback is extremely valuable in helping us make sure we are planning and commissioning services that meet the needs of the population we serve. North Central London CCG commits to demonstrating how we use resident/ patient feedback to develop local health and care services.</p> <p>This report contains an <a href="#">update on how we have managed to use feedback from this public meeting to improve services.</a></p>
<p>Has the CCG considered administering vitamin D or zinc, especially to older residents?</p>	<p>The CCG is guided by Government, National Institute for Clinical Excellence (NICE) and Public Health England advice on the use of mineral and vitamins supplements and we note that the Government announced on 28 November 2020 that more than 2.5 million vulnerable people across England will be offered free vitamin D supplements for the winter.</p> <p>Evidence of the link of vitamin D to COVID-19 is still being researched with larger scale trials needed. In the meantime, the Secretary of State has asked the National Institute for Health and Care Excellence (NICE) and Public Health England (PHE) to re-review the existing evidence. The government will publish its findings towards the end of the year.  <a href="https://www.gov.uk/government/news/at-risk-groups-to-receive-free-winter-supply-of-vitamin-d">https://www.gov.uk/government/news/at-risk-groups-to-receive-free-winter-supply-of-vitamin-d</a></p> <p>Advice from NICE is zinc supplements should not be given unless there is good evidence of deficiency or in zinc-losing conditions.  <a href="https://bnf.nice.org.uk/treatment-summary/zinc-deficiency.html">https://bnf.nice.org.uk/treatment-summary/zinc-deficiency.html</a></p>

Why weren't guests given the meeting link on the Eventbrite ticket confirmation message after registering?	At the point of initially promoting the public meeting we were still trying to identify which online platform would be the best option to host the event, for both residents and staff. Therefore, we weren't able to share the meeting link at the point of registration.
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### 3. You said, we did

Patient/ resident experience and feedback is extremely valuable in helping us make sure we are planning and commissioning services that meet the needs of the population we serve.

We commit to demonstrating how we use resident/ patient feedback to develop local health and care services.

This section illustrates how we have managed to use feedback from this public meeting to deliver our work.

#### Access and digital inclusion

Access and digital inclusion was a recurring theme across all workshop discussions. A lot of services have had to change the way they are delivered as a result of the COVID-19 pandemic. This includes delivering more services online to reduce the risk of spreading the virus.

You said	We did
It was important that residents understood that primary care was still 'open' to see residents	The CCG, working closely with partners, has continued to promote messages through all available communication channels and has supported our practices in Haringey – to let residents know that they can still see their GP (and that face to face appointments are still available, when appropriate). This has included using the GP text message system to send messages directly to resident mobile phones, as well as promoting messages via community newsletters, local media channels and social media.
More support needed for residents to access services digitally.	The CCG has commissioned an initial equalities review of the impact of moving services and appointments away from face to face to telephone or digital options. The purpose of this assessment is to better understand the potential impact, both positive and negative, on groups with protected characteristics and social inclusion groups.  This will help inform an action plan that will set out the approach in NCL and how this way of delivering care may be adjusted to better meet the needs of the local population, increasing access (and recognising for

	<p>different groups access will have different implications such as knowledge, equipment ongoing costs, environment) and reducing the impact on health inequalities.</p> <p>This will inform an NCL digital inclusion plan across all stakeholders, and include practical guidance about the rollout of digital approaches across all care settings and populations.</p> <p>In Haringey the CCG, in partnership with Haringey Council, BEH, North Middlesex University Hospital, Whittington Health and Healthwatch, have set up a pilot initiative to support and equip residents with the skills and confidence to engage with and use digital resources to access primary, community and secondary healthcare services online. This includes training patients to use their own devices to attend video consultations, and in some instances loaning mobile devices (e.g. smartphones) to residents who have no means of accessing online services otherwise; setting up three community hubs where individuals can have their online consultations privately.</p>
e-Consult should be easier to set up and navigate	<p>We offer patients support with using e-Consult, as part of the digital support service which we commissioned Healthwatch to run for us in Haringey. For example, patients are supported by a volunteer to navigate their practice's website, register and submit an e-Consult form.</p> <p>We are also planning to work with practices to further support patients to use e-Consult, including the e-Consult LITE version. We will extend this offer to care home staff and residents too. We will take the learning from these actions to make the process of accessing digital services as seamless as possible for patients and practices.</p>

## COVID-19 prevention and outbreak management

You said	We did
Have volunteers and representatives from local communities delivering key COVID-19 prevention guidance to local residents	The <a href="#">Community Protect</a> project, funded by Haringey's Public Health team, works with volunteers from local communities in Haringey to deliver key COVID-19 messages and prevention guidance to local residents. Information is provided using a range of different media and in different languages.
Engage with students in schools to help	For the past year, Haringey's Public Health team has worked in close partnership with head teachers from our

<p>communicate and translate key prevention messages to their families at home</p>	<p>local schools, supporting them in their COVID-response. Weekly meetings have been held between Public Health and head teachers where messages about prevention of COVID-19 has been provided to schools. Communication materials, such as letters from the Director of Public Health, have also been distributed via schools to families at key times (e.g. when schools re-opened in June and again in September) which promoted good COVID-behaviour and aimed to address anxieties/concerns held by parents/carers at these times.</p>
<p>Commission small community organisations to make videos of key COVID-19 prevention and safety messages</p>	<p>The CCG and Haringey Council have produced a collection of videos in various languages from GPs and other health professionals, community and faith leaders and local residents promoting how to protect yourself against COVID-19, including being vaccinated against the virus.</p> <p>These videos have been shared with our local networks and across our communication platforms, including social media. You can <a href="#">view some of these videos on Haringey Council's website.</a></p>

## COVID-19 vaccine

<b>You said</b>	<b>We did</b>
<p>Provide information about the vaccine in different languages to reach our diverse communities.</p>	<p>The NHS has produced a range of materials about the COVID-19 vaccine, including leaflets and videos by health professionals translated in various languages. Resources are available on the <a href="#">CCG's website</a>.</p> <p>There is also an animated video explaining how the vaccine works available on Haringey Council's website, along with other video messages in various languages from GPs and other health professionals, community and faith leaders and local residents promoting how to protect yourself against COVID-19, including being vaccinated against the virus. You can <a href="#">view the videos here</a>.</p>
<p>A campaign breaking down the misconceptions on vaccination would be a good idea</p>	<p>The COVID-19 vaccine has been approved as safe, effective and offering the best protection against the virus.</p> <p>NCL CCG has been working very closely with local councils, faith groups and the local voluntary and community sector, to conduct extensive engagement and education on the COVID-19 vaccine with our diverse communities.</p>

	<p>In Haringey, we have hosted several targeted COVID-19 vaccine information and engagement events, aimed at specific communities identified as being particularly vulnerable against the virus and/ or ‘hesitant or reluctant’ about the vaccine. Residents have had the opportunity to find out more about the vaccine, discuss their feelings or concerns and have their questions answered by local clinicians and other health professionals.</p> <p>Since December 2020 over 35 events have been held, including with the BAME communities (Black African, Black Caribbean, Asian, Spanish), Turkish and Kurdish communities, Eastern European communities, for those living in more deprived areas, care home residents, carers and the local homeless population.</p>
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### Support for BAME communities during the pandemic

Evidence has indicated that BAME communities, in particular, have been disproportionately affected by COVID-19 and this was another recurring theme in discussions. In Haringey, the CCG is working with the Council, local voluntary and community sector, Healthwatch and other local agencies such as housing services to gain a better insight into how Haringey’s BAME communities have been affected by the pandemic and how we can address any negative impact effectively.

You said	We did
<p>Information/ services need to be provided in different languages to cater to our diverse population.</p>	<p>The CCG has provided information in various languages on our website about:</p> <ul style="list-style-type: none"> <li>• <a href="#">COVID-19 and the vaccine</a></li> <li>• <a href="#">How to access services for suspected cancer symptoms during the pandemic</a></li> </ul> <p>In primary care, interpretation and translation services are available for patients who speak other languages and require an interpreter (including a British Sign Language interpreter). Patients can arrange to access these services with their GP practice.</p>
<p>More mental health support needed for BAME communities</p>	<p>In Haringey we have expanded access to talking therapies, including bereavement support to BAME communities in various languages.</p> <p>We have commissioned a 24/7 crisis telephone service - 0800 151 0023 – which is available for all ages and communities.</p> <p>Additionally we have delivered a series of mental health awareness workshops with various front-line and community organisations which work closely with BAME</p>

	<p>communities (Black African/ Caribbean, Turkish, Kurdish etc.) to help improve sign-posting for individuals who require mental health support services.</p> <p><a href="#">Visit Haringey Council's website</a> for more information about mental health support in Haringey.</p>
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### **Acknowledgement**

We would like to acknowledge the vital role that community organisations and volunteers have played in supporting residents through this pandemic, which was evident throughout the discussion workshops. We are committed to looking at how we can continue to support and work in partnership with the voluntary and community sector, including grassroots organisations, to develop the right health services for local residents.

We would like to thank the residents and groups in Haringey for their valuable feedback and continued support.