

COVID-19 in North Yorkshire

April - July 2021



September 2021

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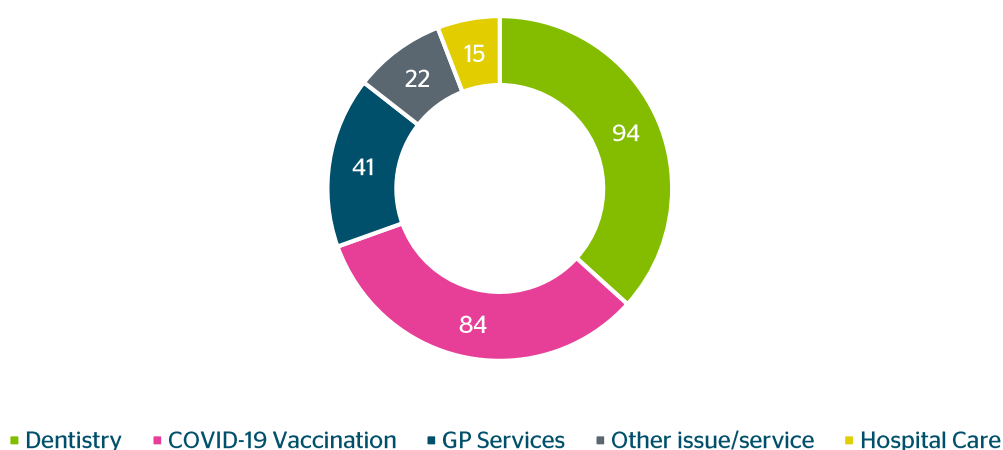
Introduction

We at Healthwatch North Yorkshire, like much of health and social care services, have gone through a shift in the past few months. At the time of our last COVID-19 Briefing we were in the middle of the COVID-19 vaccination programme, the biggest and most successful public health campaign in the nation's history.

Since then, the prominence of COVID-19 as a challenge to health and social care has begun to recede, and lockdown restrictions have now hopefully lifted on a permanent basis. It is now no longer a question of the challenge of COVID-19, but how do we recover from the long-term effects of its impact. This shift has been seen in the nature of the feedback we have been gathering over the past months. In the period of this reporting, 1 April to 31 July 2021, COVID has stopped being the most common issue in our feedback.

We have recorded 521 pieces of public feedback and/or signposting in the four months of April 1st to July 31st, hearing from 544 people.¹ Of this feedback, 243 were responses to our public engagement on NHS dentistry in Scarborough and Robin Hood's Bay, in collaboration with NHS England and NHS Improvement. This work will contribute to the procurement of NHS dentistry for the residents living in these areas. Furthermore, 39 pieces of feedback came from Healthwatch England's survey on attitudes towards the COVID-19 vaccine. As these are part of distinct pieces of research, they are not included in this report.

Volume of public feedback by service area
(April - July, 10+ responses)



As can be seen in the chart above, dentistry has now become our most frequently heard about service area. COVID-19 vaccination has seen a significant reduction in volume since our last report published in May. Going from being a service area with

¹ Due to the nature of feedback gathering and recording, we cannot identify the volume of unique contacts.

222 pieces of feedback, to now only 84². The most prominent area is now dentistry, account for 94 pieces of feedback³, up from 81 in the previous period (December 2020 - March 2021). Due to this shift, our *COVID-19 in North Yorkshire* briefings are going to become 'Pulse Reports' produced quarterly to reflect the wider public voice and feedback on all health and care issues, and not just COVID-19 specific experiences.

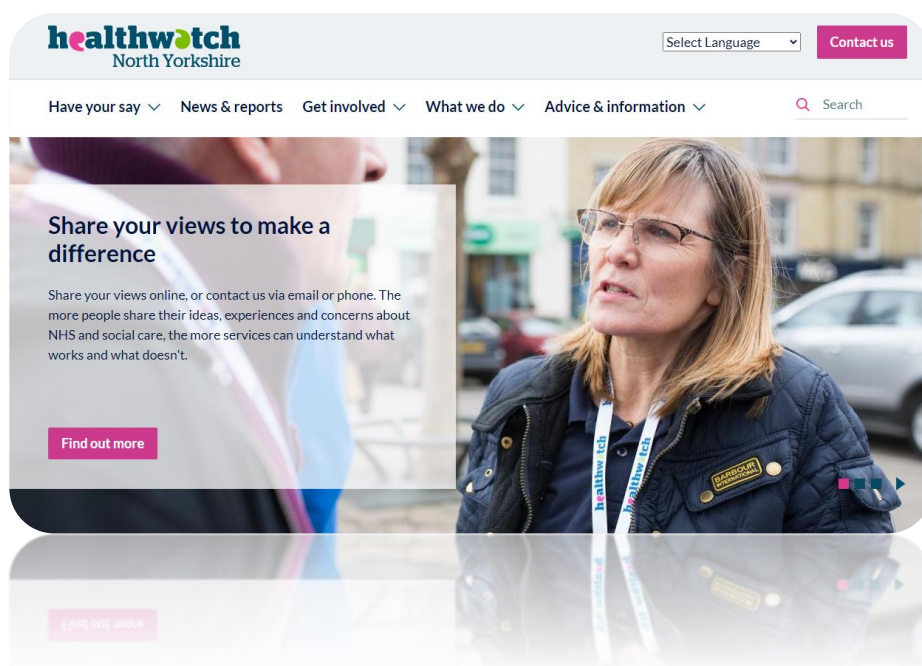
GP services (41) follow dentistry and the vaccination programme, however around one-quarter of these are linked to enquires related to the vaccination programme. Other (22) includes requests for information regarding COVID testing (5), 'fit to travel' certification (3), and other miscellaneous contacts (all once each). Hospital care was raised only 15 times, with mental health support, social care, and pharmacies being raised less than ten times each.

We continue to help and support members of the public and gather their feedback to help inform decision makers (via reports like this one). As part of our on-going improvements in how we achieve our aims, we launched our newly designed website in June. The website has improved space for providing the latest news on health and social care. We are now also able to host our own 'Have your say' survey, where members of the public can leave their feedback quickly and easily.⁴

We have continued to provide information and gather feedback through our phone-line, email, website, and research (including outreach) activities. To support our future 'Pulse Report' we are launching our new regular network surveys. These surveys will bring together feedback from organisations and individuals about the key issues for health and care services across North Yorkshire. Our *Pulse Reports* will give a

snapshot of the positive and negative experiences of people accessing health and care. They will provide a comprehensive picture of issues across time and by district. We expect our first report to be published in October or November 2021.

Making sure we hear from across all of North Yorkshire remains a challenge for us. In nearly one-fifth of cases we are unable to gather which district the member of the public was in or the enquiries/feedback lacked sufficient detail to identify which



² Excluding the 39 pieces of feedback from Healthwatch England.

³ Excluding the 243 pieces of feedback gathered as part of the public engagement on dentistry in collaboration with NHS England and NHS Improvement.

⁴ Healthwatch North Yorkshire. 2021. [Share Your Views](#).

specific service was being used to determine a location. Our efforts to be more representative have seen more equal representation across the districts, however it remains that we hear disproportionately from Harrogate and Scarborough (accounting for around two-thirds of the feedback which we can allocate to a district), whilst Craven is under-represented (at only 4%).

We at Healthwatch North Yorkshire are at the beginning of our revamped engagement strategy to ensure our feedback gathering and/or signposting is more equally spread across the seven districts of North Yorkshire.



Themes from North Yorkshire

Dentistry

Dentistry continues to be a major issue for people in North Yorkshire. In August we published our *NHS Dentistry in North Yorkshire*,⁵ a report that North Yorkshire County Council has called “powerful”. The report built upon the experiences we have been monitoring through these *COVID-19 in North Yorkshire* Briefings where we first identified it as a major issue in our July to November reports.⁶



Our report laid bare the dire situation members of the public in North Yorkshire faced in accessing NHS dentistry. With the onset of the COVID-19 pandemic, all the NHS dental practices closed. As NHS dental practices opened up they were only required to do a fraction of the volume of work they were contracted to do pre-COVID: part of the recognition that dentistry was and is a high risk activity for spreading COVID-19 and therefore there was much greater time required for infection prevention and control.

Initially, NHS dental practices only had to fulfil 20% of their NHS contracts to treat their patient population, with steady increases as prevention control has improved. This has unfortunately created a major backlog of patients waiting to be seen, whilst the funding situation means that there are not enough NHS dentists to meet demand. Currently, the requirement stands at 60%, which will remain in place until September 30th 2021. It is not currently known what will be put in place after this date.

The desperate situation can be found in the following quote, where we were told of one person pulling their own teeth out:

My view on dentistry in Scarborough is that it is virtually non-existent. I am one of the lucky few to have an NHS dentist. He is fantastic, but due to covid, appointment cancelled and no check ups for 18 months. I need a tooth crowned.

My family (7 children and grandchildren) are all on a waiting list for a dentist in Beverley the nearest who would take on NHS on a waiting list. Been waiting nearly two years. Dentists closing and patients left with nothing has caused many of the issues. Only private. Like many the costs of this are prohibitive. A dental plan would help and what many considering, but of course needs teeth to be in tip top condition first.

My son got seen in Beverley at last due to very painful tooth. If he goes by train its about a 6 hour long journey there and back and has to wait outside in cold (covid rules). I take him in car when possible.

My grandson's other nana ended up pulling a tooth out herself as couldn't get help.

The situation is dire. I cant believe this situation has been allowed to get to this stage without government intervention. My partner lives in Egypt and gets better care. Its like a third world country here as far as dental care goes.

⁵ Healthwatch North Yorkshire. 2021. [NHS Dentistry in North Yorkshire: A Review of Public Feedback 2020-2021](#).

⁶ Healthwatch North Yorkshire. 2020. [COVID-19 in North Yorkshire: July - November 2020](#). pp. 22-23

- email, May 2021, 65 to 79 year-old woman, Scarborough (*emphasis added*)

The main themes in our dentistry data this period have been: a lack of NHS dentists (79); distances searched or required to travel (21); costs to access treatment outside of NHS (22); impact on physical and mental health (10); and concern regarding children's oral health (17).

Lack of NHS dentists

People struggling to get registered as an NHS dental patient has dominated our dentistry feedback over the past four months. Of the 94 pieces of dentistry feedback and/or signposting we have record, 84% has been from members of the public unable to access as an NHS patient.

Person rang to complain and to find help to get registered as the NHS patient with some local dentist practice. They said that they are frustrated, had contacted 15 different Dental Practices in Harrogate area, but no one of them are accepting any new dental patients. The person requires some dental works which are not really emergency, so they can't use the option to ring 111. They haven't got any budget to go to a private dentist and they are really upset.

- telephone, May 2021, 25 to 49 year-old man, Harrogate

When we called all 71 dental practices in North Yorkshire listed on NHS Choices website, only two dental practices were currently taking on adult patients. Even these two were very restrictive in eligibility (one, only available for local residents, the other for people who are exempt from paying for NHS dental treatment).

Distance

Members of the public have frequently told us how they are willing to travel large distance to receive NHS dental treatment. However, this can be difficult for many people, especially those who are old or have mobility disabilities.

Person rang with a request of support to find the NHS dentist for their elderly parents (81 & 89), which recently moved into the area to live with their relatives because of the health conditions. Person was in touch with their local dental practices, which currently are not accepting any new NHS patients. Also, there are only 2 dental practices allocated in a distance of 10 miles, any other required traveling, that is very challenging for the parents.

- telephone, April 2021, anonymous, Richmondshire

21 contacts told us of the large distances they had either searched to find an NHS dentist or were required to travel to access one.

We moved from Leeds 3 years ago to Speeton, Filey and haven't been able to find an NHS dentist. We are still travelling over to Castleford for dental appointments (60 miles). My daughter and son in law are now moving here. Today, I've tried once again to find an NHS dentist in Scarborough, Filey and Bridlington, but can't. I've even asked about waiting lists, but none of them keep them.

We suppose we're luckier than some, in that we have an NHS dentist, but a 120+ mile round trip is difficult, especially if we need to return for additional treatment.

- email, July 2021, anonymous, Filey

Having to travel great distances to receive treatment in other areas reduces availability to people living in the distant location. It additionally means that patients

potentially require taking time away from paid employment or need help with care for family (which they may need to pay for). Although not raised in our feedback specifically, there is a financial barrier for being able to travel such distances to receive treatment.

Cost

Cost has been raised as another common issue in out dentistry feedback over the past four months. With not being able to access NHS treatment, people are increasing driven towards private treatment. 22 of out contacts highlighted that they cannot afford to pay the high costs of private treatment.

Caller rang asking for help with finding an NHS dentist. They've been searching, tried 5 or 6 dental practices, upto 30 miles away. Only offered a 3-year waiting list and told there was 600 patients on the waiting list.

Had a temporary filling done as an emergency, quoted £525 for the work to be done fully as a private patient. They can't afford it as they're not working and disabled. £130 just for an initial consultation. They tried calling NHS 111 to ask for help, but was 60th in the queue, so gave up.

- telephone, May 2021, anonymous, Skeeby

In one instance, a member of the public told us they were quoted a bill running in excess of £7,000 due to complex needs (telephone, May 2021, 50 to 64 year-old woman, Ryedale). Maybe people we speak with are often in desperate situations, needing treatment, but without the ability to access it affordably on the NHS. We are starting to see the impact of this on people's health.

Impact on health

One theme that we have been gathering in greater numbers since the last report is people feeding back the physical and mental health impacts of poor dental health. Two contacts told us how they needed dental treatment before beginning or alongside their medical treatment. Others have told us about it is damaging their self-esteem, how it impacts confidence for employability, and is affecting their ability to maintain a healthy diet.

I'm a 22 year-old who needs urgent dental care as I've lost half a front tooth and I cannot find a dentist anywhere to give me a permanent fix without going private and I cannot afford this. I would like the treatment on the NHS but nowhere seems to be taking on an NHS patient.

Any help would be a blessing as this is affecting my mental health drastically.

- email, July 2021, anonymous

Although only accounting for a small proportion of our dentistry feedback, with only 10 cases, this raises a serious issue about the long-term impact a failure of access and affordability to dentistry is causing.

Caller was looking for help. Their two front teeth were crowned 30 years ago, and one has fallen out. Their rest of their teeth are dentures. They've stuck the fallen-out tooth back in with superglue. They're scared it's going to fall out and they swallow it.

They've only been able to eat mashed banana.

They've called 15 dentists over the last 2 days, none will see them. They've called 111, but they've been told they'll only get a call from a dentist to help with pain relief.

They moved to the area from Derbyshire 1.5 years ago, signed up to a waiting list at [dental practice]. Still waiting to be seen. They called them and they said it would still be at least another 6 months before they would be seen.

The caller said it "looks dreadful", and they might have to stop going out of the house. The person is "desperate for help", by their own admission.

- telephone, June 2021, 50 to 64 year-old woman, Sherburn in Elmet

The longer it takes for improvements to be made, the more devastating the damage to people's health it is going to be.

As we have raised previously in our reporting on dentistry, we are concerned about the impact that a lack of NHS dentistry will have on the health of children. We have recorded 17 pieces of dentistry feedback which involves the inability to access treatment for children or pregnant persons.

I have been trying to obtain an NHS dentist for my 10 year old daughter, myself and my husband. The whole of the Ripon/Harrogate/Boroughbridge/Bedale area has no availability for NHS patients. One dentist in Knaresborough said they could add us to a list that had a 3 year wait for an appointment! Another told me that the only way that my daughter could be seen would be if myself and my husband took a private place at a cost of £75 for an initial consultation each! This is disgraceful and holding people to ransom for their children to be able to access basic dental treatment!

Whilst I do not need to see a dentist it is imperative that children have access to NHS dentists whilst growing.

- website feedback, April 2021, anonymous, Harrogate

The situation of NHS dentistry in North Yorkshire is dire, and much needs to be done to improve the health and outcomes for the people of North Yorkshire. In our '*NHS Dentistry in North Yorkshire*' report, we make the following recommendations⁷:

- There needs to be greater availability of NHS dentistry, in terms of increased access and affordability.
- Greater clarity in the information provided about NHS dentistry is needed, including improvements to NHS Choices website.
- Dental practices should proactively explore opportunities to support people's general health, providing advice on diet and lifestyle, and offer, where appropriate, signposting and referrals to other services.
- Current reforms of the way dentistry is commissioned and provided need to be radical and more rapid.

⁷ Healthwatch North Yorkshire. 2021. [NHS Dentistry in North Yorkshire: A Review of Public Feedback 2020-2021](#). p.3

COVID-19 Vaccination Programme

Since our last COVID-19 briefing, the vaccination programme has continued to roll out, and has now entered into its second stage (after expanding beyond the initial 10 priority groups). Many of the issues we highlighted in the previous briefing – anxiety about when, questions of the criteria for the priority groups, and confusion around booking systems and second appointments – have been rectified and responded to where possible. We have still heard about some of these issues in the feedback we have gathered, but their volume and intensity has reduced significantly.

Attended the COVID-19 vaccination centre at the Yorkshire Show Ground. Well signposted, directed by marshals to a parking space who then directed me to Hall 2. Welcomed by a volunteer at the top of the stairs and then directed into the hall. Didn't have to wait long. Another volunteer showed me to a booth. The nurse was friendly and engaging. The injection was painful – well several mls of liquid going into a small space, it was likely to. I was then directed into a hall where I had to wait 15 minutes post injection. Directed by another volunteer out of the hall. An excellent experience.

- survey, May 2021, 50 to 64 year-old woman, Harrogate

North Yorkshire has the third highest vaccination rates in England. With 86.3% of people having received at least one dose, and 75.5% having received two doses (as of 8 August).⁸ It is therefore unsurprising we have not received as much contact over this past four months as in the previous period when we started at zero. Most of the contacts we have received over this period have been requests for information and confusion regarding the booking system.



Booking system and second appointments

The most common inquiry we have received has involved confusion regarding booking appointments (28 recorded contacts), with second appointments concerning 22 of these. This has involved people worried they will miss their second appointment, or confused about how to change the location or date of their second appointment.

One area of difficulty has been providing support to people who had their first vaccine through their GP surgery elsewhere in the country, and were now looking to receive their second vaccine whilst in North Yorkshire.

Caller contacted us to ask for help in trying to arrange to have their second appointment in North Yorkshire, as they are currently travelling. They would like to avoid having to travel to Worcester for second dose. First was arranged with GP, and their GP said should contact someone in local area up here to organise second dose. Caller unable to book through the national system as not the one they had first dose.

- telephone, April 2021, 65 to 79 year-old woman, Bridlington⁹

⁸ Local Government Association. 2021. [COVID-19 Cumulative Vaccinations Local Authority View](#). Accessed: 19 August 2021

⁹ Caller in Bridlington (East Riding of Yorkshire) at the time of the call, but was expecting to be in North Yorkshire at time second dose was due.

Which vaccine

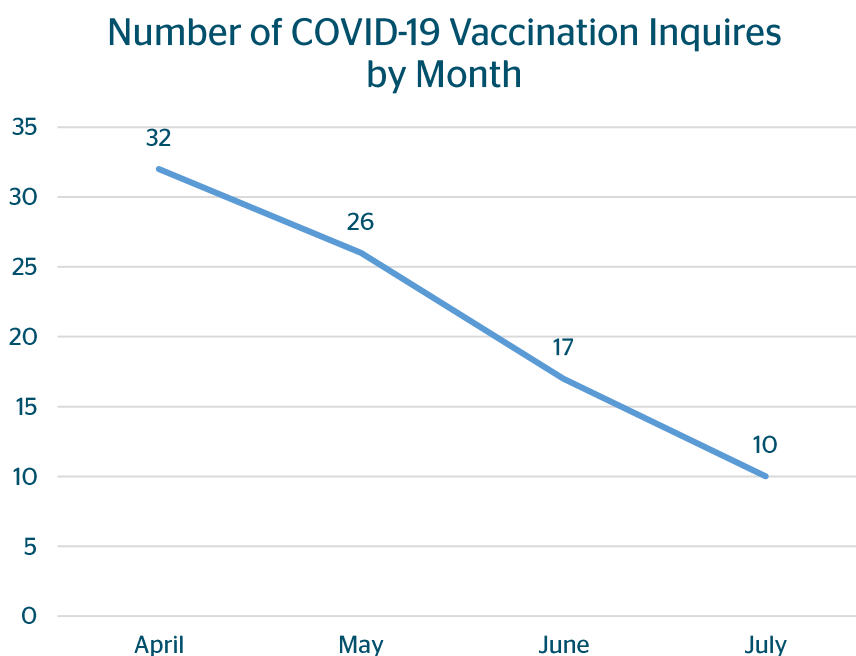
We received 13 contacts from people asking about which vaccines are available at which sites. Previously, this had been caused by people having a preference for either the Pfizer or the AstraZeneca vaccine. Over this four-month period the main motivation for the inquiry was due to the Joint Committee on Vaccination and Immunisation (JCVI) recommending people below a certain age (initially under 30, now under 40) be offered an alternative to AstraZeneca where possible.

Early on after the recommendation from the JCVI, it was unclear that an alternative was being offered to people when making a booking. For example, we received a call from one parent whose son had attended a vaccination site but walked away believing they would only be offered AstraZeneca.

Caller rang to ask how their 30-year old son and fiancé can make sure they get an appointment for a vaccine other than the AstraZeneca. They went to Bradford vaccine centre today, but found out it was the AstraZeneca so they walked away. They tried calling 119, and were told they'd need to contact each location.
- telephone, May 2021, 50 to 64 year-old woman, Wetherby

Fortunately, the NHS vaccination website does now make clear that the locations being offered do provide an alternative.

The great improvement in information provision and the successful delivery of the vaccination programme is contributing to a month-on-month decrease in the number of contacts we receive regarding the vaccination programme.



Hesitancy

We have received a small (3) amount of feedback indicating vaccine hesitancy. Two of these were from people asking to opt-out of receiving notifications inviting them to be vaccinated. Whilst the other contact was not hesitant per se, but had delayed getting

vaccinated due to wanting an alternative to AstraZeneca despite being well above the age when the JCVI recommends an alternative.

Caller rang as they're visiting Yorkshire and want to know how they can find out which vaccines are being delivered at which sites. They're 58, and live in Scotland. They had been invited to get the vaccine by their local GP, but turned it down because they were offered AstraZeneca, and they don't want that one, they want the pfizer. Wanted to know if they could just turn up at a centre and ask, and if they had the one they wanted could they just join the queue with their NHS number.

- telephone, May 2021, 50 to 64 year-old man

Given the high rates for first and second vaccinations, it would appear North Yorkshire has a low rate of vaccine hesitancy. However, there remains around 13% of people who have not yet taken up the offer a first vaccine. It remains important to provide encouragement and understanding to those who are hesitant, and to demonstrate the safety and benefits of the various vaccines.

GP Services

41 pieces of public feedback relate to GP services. Around one-quarter of these involve issues about information regarding the vaccination programme. Main themes include: issues with appointments (11); struggles getting medication and/or diagnoses (9); and unsupportive doctors or other staff (9).

Positive feedback

We received only 4 pieces of positive feedback regarding GP services. Unfortunately, only one was not a pre-amble to a negative comment - e.g. "GPs are by & large very good - if only we could see them when needed i.e. not in 3 weeks' time" (Survey response, July 2021, anonymous).

I was suffering from hypothyroid symptoms (thyroidectomized) but the GP said the bloods were normal and it was all in the mind. So having read a lot and by now really quite ill I bought T3 online and felt better. I was picked up on a blood test the week I took too much T3. I was honest and said I needed T3 and they helped me get it on the NHS and have been brilliant.
- survey reponse, July 2021, anonymous

Negative feedback

We received 13 pieces of negative feedback, just over half (7) of these were in regards to unsupportive doctors or other staff.

I am writing on behalf of my brother who is experiencing problems with GP referral. Due to no help received from his gp regarding his ongoing health problems, he has decided to seek private medical advice which resulted in an arthritis diagnosis. The private clinic has written a letter to his GP asking for him to be referred to a specialist as his health condition is poor and getting worse rapidly with painful muscle spasms and serious problems with joints. His GP fails to proceed with the referral and states they do not understand his test results. Could you please advise how can he get to see a doctor?
- email, April 2021, anonymous

We received eight contacts from members of the public who were seeking help on how to make a formal complaint regarding their GP service.

Medication and diagnosis

Nine pieces of our public feedback has involved struggles collecting medication or receiving the correct diagnosis. At the start of the pandemic, there was much effort put into ensuring people who were shielding were receiving their medication. Pharmacies did deliveries and communities came together to provide support. The feedback we are now gathering could be a potential indicator of problems beginning to emerge.



Person rang to find advice on how they can escalate a complaint regarding the poor services provided by their GP. They said that during the last 1.5 years they have been consistently circulating between their GP and a hospital consultant regarding the process of an accurate diagnosis.

They said: "Any time I am back to my GP from a hospital consultation, my GP keeps saying 'I don't think they are correct' and as a result I am not receiving any therapy or medication. My hospital consultant has examined the area of my concerns and has provided a written summary with a greatly detail explanation. However, my GP is just emotionally reacting, annoyed by the consultant's medical advice, which does not match to their own and keeps delaying any further medical support."

- telephone, July 2021, 65 to 79 year-old man, Harrogate

This issue was also present in the hospital feedback we have received, but not to a large degree (see the next section).

Appointments



We recorded 11 pieces of feedback regarding appointments. These have mainly covered two fronts, either long queues on the phone line or difficulties with speaking with a member of staff.

[...] I tried to ring our doctors to ask but its constantly engaged!

- email, May 2021, anonymous, Harrogate

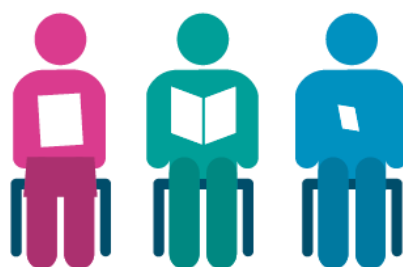
The other main issue we hear from members of the public is regarding long waiting times to get an appointment with their GP.

Person rang and said that they are frustrated because the GP consultation that was booked in advance for 1.5 weeks for their 13 old child this afternoon has been cancelled on short notice. The reception was not able to offer a new appointment for this or next week because they are fully booked. Caller explained that their child is waiting to be seen by an ENT specialist, and the only reason to get this GP appointment was because of nose bleeds. Child was prescribed B4 cream, but unfortunately because it was last prescribed in 2019 and the GP practice can't issue one without a review her child had to endure three-hour nose bleed which was very distressing.

- telephone, June 2021, anonymous, Malton

We are aware of the strain that GP services are under at the current time, and will continue to monitor feedback regarding GP services to identify if further focus is required.

WAITING ROOM



Other Public Feedback

In this final section we cover other feedback that we have received from the public on areas that do not occur frequently enough to justify their own section, but are relevant and important nonetheless.

Hospitals

We received 15 pieces of feedback. There were no prominent themes in this data. Some (3) were positive, some were negative (5, three of which was complaints), two contacts told us of struggles to receive a correct diagnosis.

One person contacted us to share how grateful they are for the dedication of staff during this very difficult period during the COVID-19 pandemic:

I wanted to provide some positive feedback on community physiotherapy. In particular a community physiotherapist called [redacted], who I believe is attached to Friarage Hospital in Northallerton.

Following a 12 week stay in hospital my father was discharged with limited mobility. [The community physiotherapist] was one of the very few professionals who spoke slowly and clearly, looking him in the face and giving him a real chance to hear and process her questions and advice. From day one she encouraged and motivated and instilled belief and confidence.

In addition to her professional skill set she brought a smile and a cheery disposition on every visit that brightened the day even in the depths of winter.

To manage all of this during the most challenging of COVID-19 circumstances is truly outstanding.

- survey, April 2021, 50 to 64 year-old woman, Osmotherley



We also received three pieces of contact from the public about the delivery of stroke services from Scarborough Hospital. These raised concerns about access to treatment, which have now been relocated to regional centres (such as York). However, we have not received feedback from anyone who has been affected by the service changes (either for the good or the bad).

North Yorkshire CCG (Clinical Commissioning Group) has provided written responses to similar concerns following its Annual General Meeting in early July of this year, with a public meeting to be held in October. We at Healthwatch North Yorkshire are helping to ensure concerns from members of the public are heard by North Yorkshire CCG and we will be helping to keep members of the public informed about changes in the area via joint engagement activities between us and North Yorkshire CCG planned for later this autumn.

Social Care

We have received very little (3) public feedback regarding social care in this past four months, but what we have received has been negative. We understand the importance of social care, and highlighted in our last COVID-19 in North Yorkshire briefing that there will be a greater need to support people in navigating their social care needs as we enter the COVID-recovery.

We will soon be publishing our first report of our 'COVID-19 and Care Homes: Lessons from an Unprecedented Time' project. The project looks at how care homes have responded positively as a result of COVID-19, and identifies changes in how care has been delivered during COVID-19 in ways that are worth retaining as we move into the post-pandemic period.

Similarly, due to new legislation coming into place from the 11 November requiring the full vaccination of care home staff and volunteers, we are working with Healthwatch York to survey care homes to understand the impact this new legislation will have on them, their workforce and service delivery. Early results indicate that the care home sector views the new legislation with mixed feelings. Some feel it will have little to no impact (as their staff already fully vaccinated), whilst others are concerned about losing staff, the extra bureaucracy involved in ensuring compliance, and a sense of injustice that the care sector is singled out for this legislation whilst health care workers, such as those working in hospitals, are not mandated to be vaccinated.

Mental Health Support

We recorded only six pieces of contact regarding mental health support in this period. None of it was positive.

Person rang to get advice on how they can escalate a formal complaint about the spectrum of the CAMHS services provided during the last 5 years to their child. They said that since their child was 11 year old they were referred to the CAMHS team and their child unfortunately has been misdiagnosed, and as a result there were a few suicidal attempts.

After that, their child's diagnosis has changed three times per year, however the symptoms were exactly the same. So, they believe that their child still does not have an accurate diagnosis and is probably not receiving the correct medication.

They said that the therapists do not follow-up on changes, and that itself is causing a new trauma for all the family.

- telephone, June 2020, anonymous, Ripon

Whilst we have not received much feedback about mental health support in North Yorkshire, it is an area of concern. We have highlighted the impact of COVID-19 on people's mental health in previous COVID-19 in North Yorkshire briefings, and our intelligence gathering through our involvement with network partners has indicated that this is will be an increasing burden on public health in the future.



Other issue/service

We have recorded 22 miscellaneous pieces of public contact, most of these have only a single instance of service referenced which don't belong to one of our main recording categories (for example, ambulance service). There were no significant themes in this data.

There has been a small grouping of information inquiries relating to COVID-19 services outside of the vaccination programme, such as around COVID-19 testing (5) and 'fit to travel' certification (3). This is a small increase from our previous reporting period, and demonstrate the need to maintain the accessibility of information and that it is up-to-date.

Conclusion



Over six-months on from the start of the COVID-19 vaccination programme, we are seeing the receding importance of COVID-19 on health and social care from the public contacts and feedback that we receive. During the COVID-19 pandemic, health and social care services have been battling against an unprecedented challenge to manage their services and provide the right care for their patients. Now, with COVID-19 vaccinations having reached nearly 90% of the UK population, health and social care services are facing the damage left behind.

The COVID-19 pandemic has exposed some of the frailties of the health and social care system. Dentistry in particular has become increasingly evident as needing reforms in funding as we see the impact of the lack of access and affordability upon members of the public in North Yorkshire (and across England). We are now seeing the damage to physical and mental health that this problem is causing.

GP services, as well as hospital care, mental health services, and social care have all been put under immense strain over the last 18+ months. The NHS hospital waiting list tipped over 500,000 during the pandemic, and estimates suggest it will take years to bring the numbers down to pre-pandemic levels at significant cost.¹⁰ It will be a slow journey until services return to providing care to the same level as before the pandemic.

However, the COVID-19 pandemic has also been a catalyst for motivating improvements. Valuable lessons have been learnt under the motivation of having to do things differently. Our upcoming social care report demonstrates how the social care sector has developed innovative approaches to the delivery of care that are being carried forward after most restrictions are lifted. We also see a greater emphasis towards cooperation, and the movement away from the internal market under the proposed Integrated Case System reforms.



Healthwatch North Yorkshire would like to thank everyone who has contacted us, left feedback, or participated in our research and engagement activities. Our work is supported by the amazing efforts of our volunteers. We will continue to gather feedback and help support patients and the public across North Yorkshire.



¹⁰ Campbell, D., & Duncan, P. 2021. [Fixing NHS Waiting Times Could Cost £40bn. Leaked No 10 Estimates Show](#). The Guardian. [Online]. 10 June. Accessed: 27 August 2021.

healthwatch

North Yorkshire

Healthwatch North Yorkshire is an independent charity commissioned by North Yorkshire County Council to carry out statutory duties.

The Healthwatch Network was established under the Health and Social Care Act 2012 to understand the needs, experiences and concerns of people who use health and social care services and to speak out on their behalf.



Share your views with us

If you have a query about a health and social care service, or need help with where you can go to access further support, get in touch. Don't struggle alone. Healthwatch is here for you.

Website: www.healthwatchnorthyorkshire.co.uk

Telephone: 01904 552687

Email: admin@hwny.co.uk



Find out more about us and the work we do

Website: www.healthwatchnorthyorkshire.co.uk

Twitter: @HealthwatchNY

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