

Health and Social Care Scrutiny Sub-Committee

Background Papers

. Agenda - Part I

12. **System response to the Healthwatch reports on GP and Primary Care Access**
(Pages 3 - 68)

Background papers to the presentation from Healthwatch/National Health Service (NHS).

. Agenda - Part II - Nil

Scan this code for the electronic agenda:



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How are you feeling?

The mental wellbeing of residents in Harrow



A report by Healthwatch Harrow

April 2021

“I'm so much healthier.

Walking has been a fabulous discovery. Every day I've walked the length and breadth of Harrow.

I've lost weight and become fitter. And discovered a love of walking.”

“Appreciate that it is not just formal mental health services which contribute to a person's mental health, it is also clubs like the bowling clubs which contribute hugely to people having a positive outlook on life.”

Local residents

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1. Executive Summary

Healthwatch Harrow has been the residents local voice and consumer champion for health and social care across the London Borough of Harrow since 2013. We remain totally independent and engage with the residents of Harrow and work with various organisations. Our role is to gather intelligence / evidence, to check and challenge service delivery, identify where services need to change and make recommendations to the Clinical Commissioning Group (CCG), Council and other health and social care providers.

This last year has been an extremely difficult year for everyone because of the pandemic. The purpose of our report is to share what Harrow residents are saying to us about their mental wellbeing and how the pandemic has affected them. There are both positive and negative comments in the feedback we have received, but no unexpected surprises.

Due to our limited resources this report is not presented as research, but as a snapshot of our findings, what people are saying to us. We also would like to thank all the residents who engaged in this work and our Healthwatch Volunteers for their dedication, hard work and support.

This is a summary of key themes and issues (see sections 5 for findings in full).

Key Findings

The impact of the pandemic on mental wellbeing, in general life:

- Over two thirds of feedback (70%) is negative in nature.
- By far, relationships and social networks are the largest topic, accounting for over a third of comments (35%).
- Access to activities (16% of comments) and the living environment (14%) are also considered important.
- Respondents from a Black, Asian and Minority Ethnic background, those of later working age (45-64) or with mental health conditions are least likely to give positive feedback.

Themes

- We hear about tense household relationships and frustration at not being able to visit family and friends or to socialise generally.
- While online platforms and support networks have assisted many people, a significantly larger number comment on loneliness and social isolation.
- Those with hobbies and interests are better able to cope than those without.
- The ability to be outdoors, or to exercise is considered 'essential' by many.
- Home working or schooling presents a challenge.
- Job and financial security is also a key cause of concern.

Experience of services:

- Overall sentiment is mixed - with similar volumes of positive and negative feedback.
- Service quality is considered the most important aspect (21% of comments), along with levels of support (20%).
- Service access is also a main topic, with ability to book and register for services accounting for a quarter of comments (26%).
- Younger respondents (25-44) are by some margin the least satisfied with services overall. Those with mental health conditions are also significantly more likely than average to leave negative feedback.
- Those aged 65 and over are clearly most satisfied with services.

Key issues identified

Section 5 provides full details, but the key areas of impact on individuals are summarised below:

- Demanding workloads, working while parenting and the risk of infection at work are prominent causes of stress and worry
- Poverty and anxiety
- Concerns about job security, earnings and living costs are also widely expressed
- Accessing out of hours services is cited as an issue
- Consequences of digital exclusion are raised
- We hear that GP services have offered good levels of support on the whole, however, a range of access related issues are reported - including congested phonelines, complicated or the lack of online services, and delays in diagnosis
- A lack of care following hospitalisation is also reported
- While some people have been successful in obtaining swift dental treatment, a notably larger number report long waiting times, or inability to secure treatment on the NHS.

Conclusion

- The issues of accessing GP Surgeries and Dental Practices were identified in our GP & Dental Access Report produced in January 2021 and Healthwatch

Harrow are monitoring progress against the issues and recommendations made in that report. Please click link below to view the report:
https://www.healthwatchharrow.co.uk/sites/default/files/gp_dental_service_access_in_harrow_january_2021_final.pdf

- The easing of restrictions will certainly improve some of the key issues identified regarding loneliness and isolation, as people will be able to meet with friends and family and be able to take up their hobbies etc.
- The longer-term impact places a greater reliance on support services being available and people being aware of where they can get support. This relates to local community support through Community teams, GP's and the voluntary sector and also through Central and North West London NHS Foundation Trusts (CNWL) who care for people with a wide range of physical and mental health needs.
- **There needs to be greater communication of the support that is available and future commissioning of services needs to meet the increasing demand.**

2. Background

The end of March 2020 saw the country plunged into lockdown because of the Covid-19 pandemic. Although mental health and wellbeing has always affected many, the lack of the usual face to face interaction within the community has had a massive impact amongst all ages. Healthwatch Harrow started to hear more and more cases of the impact on individual's wellbeing.

Covid-19 has impacted the pace at which services progressed during the year 2020 - 2021 and Healthwatch Harrow recognised the need to find out how Harrow residents were feeling and reacting to what was happening externally both globally as well as locally within their communities.

Mental health is such a wide area and there is already a lot of work being undertaken to improve access to support for those suffering from mental health. Therefore, rather than focus on a specific element we took the approach to capture the intensity of peoples' experiences and to ask how the pandemic was affecting their whole life.

At the time we launched our survey, MIND in Harrow also launched a survey. At the time of writing this report these findings have not yet been published.
<https://www.mindinharrow.org.uk>

In addition, there is work in progress to develop a new strategy to address mental health support in Harrow. This work is in progress and has involved the recruitment

of residents with lived experience of mental health who are involved in the co design of new services.

3. Methodology

- Survey produced and launched through January to March 2021 - overlapping with Mental Health Day, asking 4 questions requiring qualitative answers:

Q1. During the pandemic, have relationships with family or friends affected your own mental wellbeing in any way?

Q2. Have any aspects of your daily life during the pandemic, (for example work, schooling, finances), affected your mental wellbeing in any way?

Q3. If you have accessed Mental Health services during the pandemic, please tell us about your experience?

Q4. Do you have any thoughts on what could help to improve your mental wellbeing in the coming months? Is there anything that could be changed, or done better?

- 147 people responded to the survey, the demographics of those who engaged in the survey are shown in Appendix 1
- 9 x 1-hour online sessions were held with Romanian and Somalian community groups and also with the Methodist Friendship Club. The same questions as the survey were asked and the data is incorporated within section 5.

4. Factors to consider

When working on this report, the following factors influenced the findings:

- Face to face sessions could not be held and so the reach of our target audience was limited.
- Our outreach sessions with the Romanian and Somalian groups were accessed through zoom and they provided an interpreter.
- We were unable to capture the views of those residents who cannot engage digitally or virtually.
- Inequalities within the population of Harrow reflected in poverty and IT literacy.
- The demographics from the survey show that the majority of the people who responded were white British. However, our online sessions reached those from seldom heard groups.

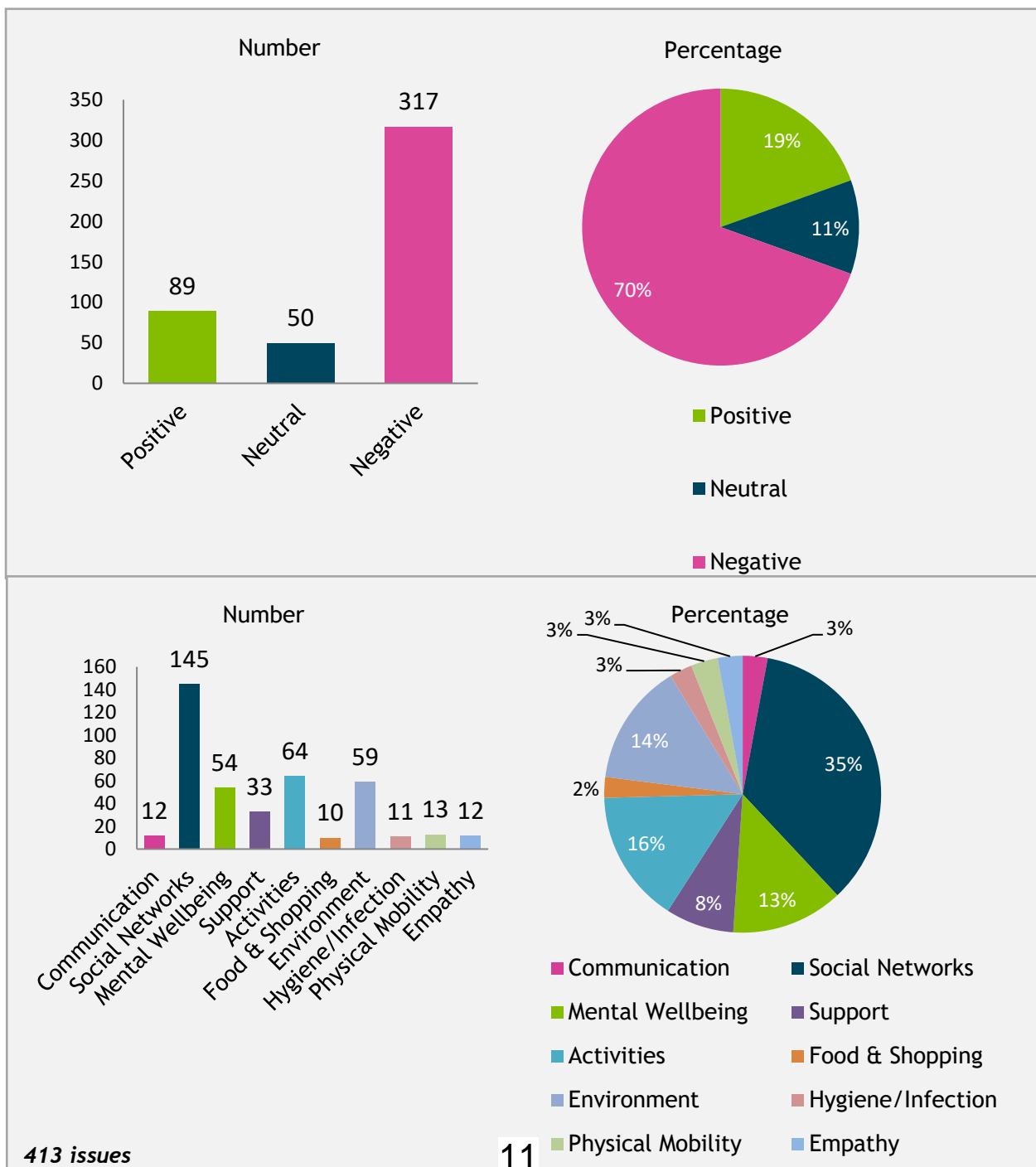
5. Life in General - Survey feedback

This report is based on the feedback of 147 people, who completed the survey during February and March 2021. We asked how the Coronavirus pandemic has affected people's mental wellbeing, looking specifically at relationships, and more generally at life in general - such as work, school, interests and activities.

5.1 General Sentiment

After reviewing feedback, we find that over two thirds of statements about life in general, in connection with mental wellbeing, are negative in nature.

5.1.1 How do people about life in general?



5.2 Household Relationships

While some people enjoy, and benefit from closer household relationships, many complain that being 'stuck at home' has resulted in boredom, frustration and increased irritation.

Parents and carers comment on a lack of support. We also hear that the home environment is not particularly suitable for home-schooling or working.

Selected Comments

Positives

"Having my son with me most days has been a great help."

Negatives

"As husband and wife we are bored at home and nothing much to do. This creates unnecessary talks and arguments between us. There is no motivation to do much inside or outside the house."

"Being stuck at home with the family 24/7 is doing my head in! I crave alone time, but other than walks around boring local parks or streets, I can't escape."

"Greater irritability from being up close."

"At home, on my own, all day every day with toddler. No childcare support as family too vulnerable. No access to any other new mums, first time mums, children."

"The weight of responsibility for shielding and caring for my family has been exhausting and I have wanted to give up."

"We are working from home and kids are homeschooling - it's an impossible situation alongside running the house."

"Homeschooling without equipment is very hard when you have 6 children like I do."

5.3 Family, Friends and Social Networks

Online platforms (such as Zoom and WhatsApp) have enabled families to stay in touch, with retirees and grandparents especially grateful. Support bubbles have also been beneficial - such as ability to walk with a partner.

Those less able to connect with friends and family comment on feeling sad, lonely and isolated, with a 'severe impact' on mental wellbeing in some cases. The inability to visit vulnerable relatives or those at the end of life is also a common cause of

anxiety, while those unable to attend family celebrations or funerals express the upset caused.

Selected Comments

Positives

"I have a close relationship with family and speak regularly on the phone and Zoom meetings. Would really struggle if not for this contact and support as have recently retired."

"Helping my grandson online with homeschooling has helped to make me feel of value."

"My faith, spouse and friends have given me all the support I've needed."

"Have had to make sure I have someone to go for a walk with because I live on my own. I would be sad if I didn't see someone every day."

Negatives

"The lack of social intercourse has severely affected my mental wellbeing."

"Not being able to care for my grandchildren has made me extremely sad."

"Some snatched opportunities in the summer to meet up were very valuable, but we are now feeling low and isolated."

"I miss the physical contact."

"Not being able to have usual meetings with family, friends and colleagues makes us feel down. Zoom meetings have helped."

"I should be locked down with my elderly mother however extended family have moved in with her and stayed through the whole year, meaning that I've been isolated and shielding on my own with very little support and I have been unable to visit my mother. The relationship between me and the extended family has broken down due to these circumstances."

"Definitely worrying about vulnerable people unable to see or help."

"Not being able to visit my dad and check that he is ok is on my mind."

"It's upsetting not to be able to see family and friends particularly for celebrations and mourning deaths."

5.4 Activities and Stimulation

Those with hobbies and routines are best able to cope, and for some, the lockdown has enabled a slower pace of life and a chance to catch up on general interests. While some activities, such as volunteering have been suspended, others including social groups and networks have moved to online platforms.

Selected Comments

Positives

"I have plenty of hobbies, books, music and can keep myself well occupied."

"I've enjoyed the chance to clear things out, get on with gardening and reading, and just do what I want to do when I want to do it."

"Zoom is a wonderful way of communication and is now being widely used in the social groups I belong to; this has certainly made a big difference to my isolation."

"Most of my social life has moved online."

Negatives

"I was doing volunteer work before the lockdown. I hope the situation will soon improve and I can go back and do the volunteer work."

"Appreciate that it is not just formal mental health services which contribute to a person's mental health, it is also clubs like the bowling clubs which contribute hugely to people having a positive outlook on life."

5.5 Environment

For many people the ability to be outdoors or to exercise is important for physical fitness and mental wellbeing and some regard it as 'critical'. The absence of trips, breaks and warmer weather are common causes of fatigue and frustration.

Selected Comments

Positives

"Recognise that being able to get outside every day and walk is critical to everyone."

"I'm so much healthier. Walking has been a fabulous discovery. Every day I've walked the length and breadth of Harrow. I've lost weight and become fitter and discovered a love of walking."

Negatives

"Lack of freedom to exercise and move around outside in Harrow. Causing anxiety."

"Unable to find relaxing and stimulating substitutes for going into London to see exhibitions, have breaks away from home etcetera, so life as a retired person is greatly limited."

"Just waiting for the warmer months to come!"

"It would be nice to see more street cleaners being employed. When your mental health is already low, seeing dumped rubbish and litter in the streets brings it down even further."

5.6 Work

A significant number of people have found working from home to be a challenge - a lack of regular contact with colleagues, distractions and cramped, unsuitable home environments are among the obstacles cited. One person, with 45 years of experience comments on feeling 'overwhelmed and unable to cope' in a home working situation.

Selected Comments

"Working from home has been draining."

"Lack of focus for work. Distractions add to stress."

"Minimal contact from colleagues has left me feeling less valuable to them, even redundant."

"Working from home means I don't see anyone in real life."

"The irregularity of going in or working from home has a negative effect."

"Being trapped at home to face the behaviour of the son and child who let off their pressures of working from home."

"Having been accustomed to a working life in environments surrounded by other colleagues expanding more than 45 years, I am overwhelmed by inability cope with the working from home environment which is crowded by two others also in a similar situation."

"I work remotely from home. I live in a small flat and am shielding so my home and working life is restricted to the flat and it is difficult to maintain my own mental well-being without socialising and being able to get out and do the activities I normally do."

Demanding workloads, working while parenting and the risk of infection at work are prominent causes of stress and worry.

Selected Comments

"I am an ICU (Intensive Care Unit) doctor and the tremendous workload has definitely affected my mental health."

"Challenge of balancing career and toddler has impacted my patience and stress level."

"I found my work life has been more stressful, as I work in a school, it's been quite scary at times going in."

"My wife did a part time job before lockdown. Because of the risk of the virus she left."

Concerns about job security, earnings and living costs are also widely expressed.

Selected Comments

"Worried if I will still have a job."

"Worry about the future and economic effect on jobs for both myself and husband. Suffer from low mood and anxiety."

"Being made redundant and lack of freedom resulting in depression within me and my household."

"I haven't been able to do my part time work as a dog walker and boarder. People are not going to work or on holiday so don't need me. This has affected me financially."

"Financially spending more money as having to have shopping delivered."

"Struggled to work from home which is part of the reason I retired."

5.7 Communication

A need for 'structured, clear and impartial' information is desired. Many people say the mainstream media - with its focus on negative headlines is a key cause of anxiety.

Selected Comments

Positives

"The messages are very clear."

Negatives

"Honest national briefings not political waffling. Professor Van Tam on Channel 4 was very straight and to the point. Let the scientists speak to us unencumbered by politicians."

"Need more structured communication from the government."

"A government strategy shared with us with clear criteria."

"More consistent messages from the government would be helpful. I have also found that restricting listening to the news is beneficial too."

"Hard to stay optimistic. Not watching or reading everything on the news, etc. as finding this really upsetting."

"Yes, stop talking about this so much. There is a lot of auto suggestion going on. More mental health issues are highlighted in the media, more people think they are suffering. Whilst it is clear that there are some people with significant issues, what we need is a more positive message being spread. That will allow Mental Health Services to focus on the much smaller number of genuine cases."

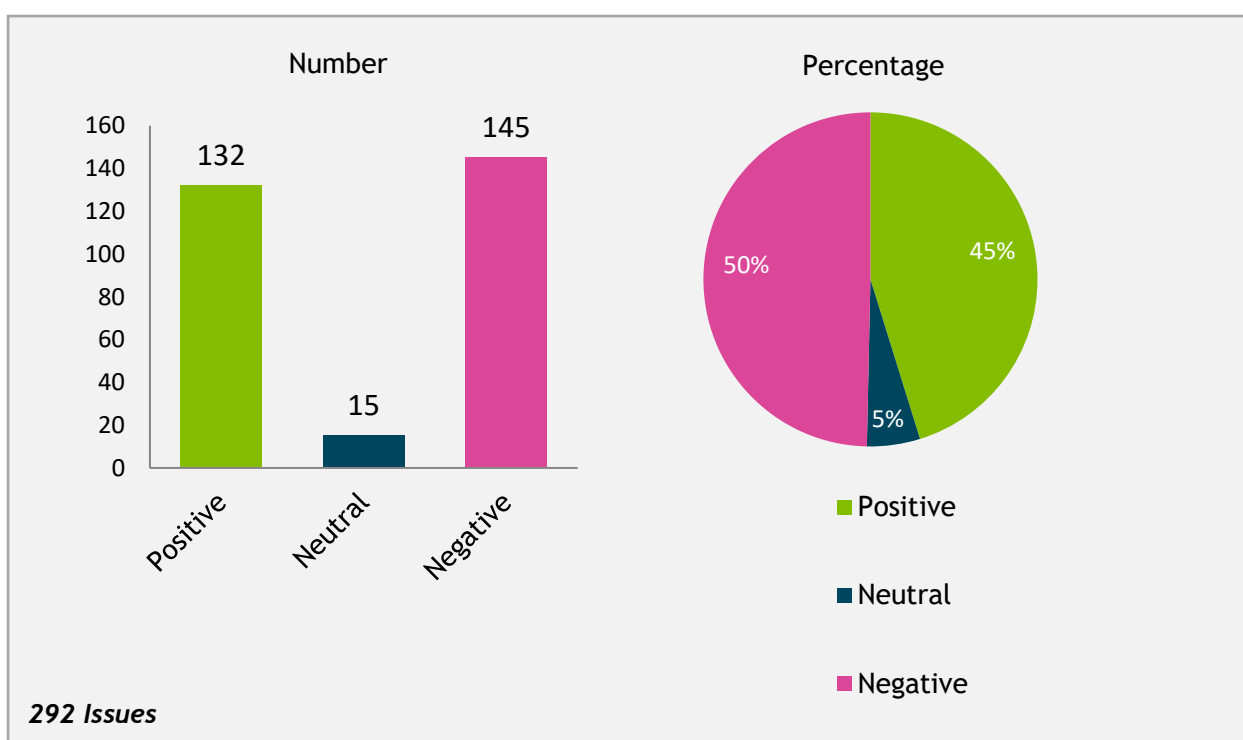
6. Experience of Services

In this section we explore the experience of health, care and community services.

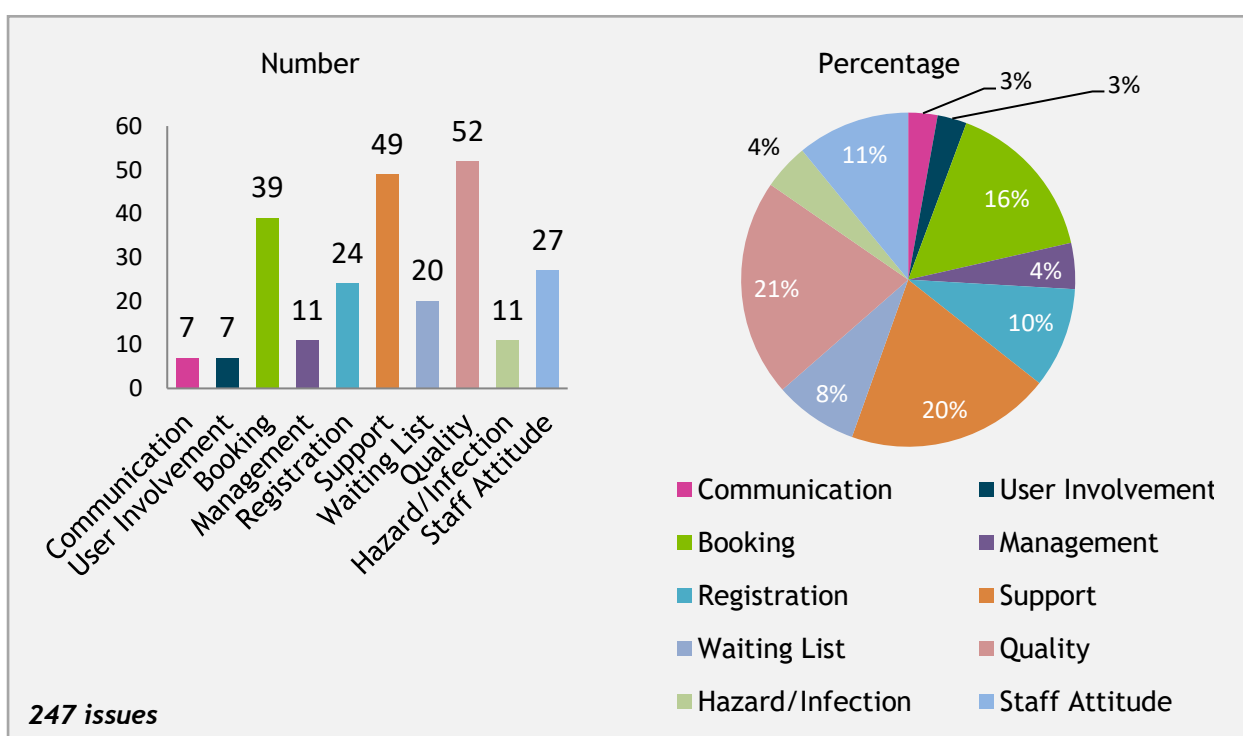
6.1 Services in General

On reviewing feedback, we find that overall sentiment is mixed - with similar volumes of positive and negative experiences.

6.1 1 How do people feel about health and care services?



7.1.2 Top Ten Service Related Topics



At 21%, the quality of treatment or care received is considered most important, along with levels of support (20%). Service access is also a main topic, with ability to book and register for services accounting for a quarter of comments (26%).

We go on to review feedback about individual services.

6.2 Mental Health Services

Talking Therapies and mental health services are reported to be helpful, person centred, consistent and easy to access, however the longer-term effectiveness and impact is questioned by some.

Accessing out of hours services is cited as an issue, and one person says their GP has not provided continuing care following discharge, as indicated at the time. The consequences of digital exclusion are also noted.

Selected Comments

Positives

"I have been seeing a therapist twice a month for some years. My regular contact with her was very helpful."

"Talking Therapies, very kind and listened to me."

"Talking therapies for CBT (Cognitive Behavioural Therapy). It's ok but so brief - 30 mins only - so doesn't really have an impact."

"I have accessed services from my usual mental health team during the pandemic. I am cared for by a small team - my care has been consistent and accessible. The difficulty lies in accessing help out of hours, crisis services in Harrow are terrible and need a complete overhaul."

Negatives

"Had an interaction with counsellor which was less than useful."

"Delays in seeing psychiatrist for regular appointments. Discharged from CMHT (Community Mental Health Team) after 20+ yrs and told the GP would now support me. THEY HAVEN'T. Too busy with Covid. I NEEDED support. In the end I got a call from a pharmacist who did not have my up-to-date info. But he agreed to change my prescription to my instructions."

"I hope that people who live on their own and are not aware of mental health services would be informed of the way they can discuss their health problems. Those who are digitally excluded are suffering in silence."

6.3 GPs

We hear that GP services have offered good levels of support on the whole, however a range of access related issues are reported - including congested phonelines, complicated or the lack of online services, and delays in diagnosis. A lack of care following hospitalisation is also reported.

On visiting services, some people compliment the social distancing and infection control measures, while others are critical.

Selected Comments

Positives

"The surgery has maintained a good service for most other medical problems."

"My GP acted immediately on my cry for help in feeling overwhelmed."

"GPs have been amazing with phone appointments and referring when needed."

"I had great difficulty getting through to the surgery to speak to a doctor especially as I was really unwell. However, once I got through the barrier the GP support very good."

"I do miss the face-to-face consultations and think that this must be much worse for patients who are younger and so do not have a long history of direct contact with our doctors and other staff. Even so, I have been very impressed by the commitment of both my surgery and my dental practice to "keep the show on the road" as best they can in the current circumstances."

"I had cause to attend both GP and Dental services and was impressed by the level of precautions they took."

Negatives

"Contacting a GP, first to arrange a routine blood test and to seek treatment for a very painful hand joint was far more difficult than usual."

"I am concerned that there is no opportunity for video contact with doctors, only telephone contacts."

"GP services have changed to remote access, not always straightforward to access and sometimes illogical."

"Make seeing a doctor accessible. Yesterday I had to use eConsult, 111 then ring doctors before getting a call back and then final a visit to doctors. This is not accessible and a disgrace that it took hours to get seen to. Must be an easier system."

"I find it extremely difficult to contact my GP service over the phone, having been down with Covid last year and in hospital for nearly 50 days I feel there is no follow up from the GP as a courtesy. If you go through so much you would think there should be some form of after care follow up from GP surgery."

"I have been in pain and unable to walk properly for 6 months. It has been very difficult to get a diagnosis due to limitations of access to health service."

"I haven't found my two visits to the doctor's surgery reassuring. No one seemed in control of enforcing distancing, so I had to enforce it."

Feedback suggests a level of hesitancy to attend services - some people are fearful of contracting the virus, while others assume the focus will be on urgent cases, or Covid-19.

Selected Comments

"Skeptical to attend any services."

"I no longer feel comfortable with other people being too close at the surgery for example."

"Haven't accessed the GP for over a year, will have a couple of things I will see them about as soon as is possible - currently I suspect they have their time taken up with urgent cases."

"Medical services are out of reach unless one has Covid."

6.4 Dentists

While some people have been successful in obtaining swift dental treatment, a notably larger number report long waiting times, or inability to secure treatment on the NHS.

Selected Comments

Positives

"Had to be seen by an emergency dentist and the process was very well managed and Covid-secure."

Negatives

"I do hope that soon there will be access to a dentist as you can't do a video call."

“Accessing dentists has been a nightmare!!”

“Long waiting list at dentist, especially with hygienist is also a concern.”

“I do have concerns about Dentists - my son-in law has problems with his teeth and can't find an NHS dentist in the Harrow Area. 111 provided him with numbers to contact, many said no or due to Covid we are only taking on new private patients.”

“The dentist is VERY expensive.”

“I have not visited my overdue dental appointment due to risk.”

6.5 Hospital Services

We hear that routine treatment and referral pathways have not been affected by the pandemic, and that care and medical attention has been ‘very good’.

However, patients also say that follow-up appointments have not been arranged as anticipated. On blood testing, one person regrets it cannot be done at a local clinic.

Selected Comments

Positives

“My oncology support through Mount Vernon has continued throughout the pandemic with only a few adaptations - well done.”

“I was put on the emergency cancer route. This was done in time and expeditiously with no negative outcomes. So in my particular case the NHS was not neglecting non-Covid medical conditions.”

“I was treated for Covid-19 at Northwick Park Hospital, care and medical treatment very good despite the pressure and demand.”

Negatives

“Outpatient follow up appointment didn't come and I felt unable to chase - resulting in health condition deteriorating.”

“Concerned that I will have to go to Northwick Park for a blood test. I have postponed it twice but need one before a telephone appointment I have with the hospital. Seems to be no way to get a blood test more safely.”

6.6 Other Services

We receive praise for community and vaccine services. One new mother regrets a lack of service and peer support.

Selected Comments

Community Services

“The Harrow Covid hub was very helpful and supportive.”

“Harrow local authority communicating well with email updates, but what about the people not getting them.”

“Need a door-to-door library service.”

“Schools have been incredible at providing home learning.”

Covid-19 Vaccine

“Vaccination centre very well organised.”

“I have been so impressed with Harrow's efforts with regard to the vaccination centres. Well done.”

New Mothers/Perinatal

“Need access to support for mums with mental health conditions past the perinatal 12 month old cut off. I'm a first time mum, with a 14 month old and bipolar and I feel like I have been invisible and disappeared from services support.”

7. Impact on Specific Groups

We look closely at age, ethnic background and existing conditions, to establish any findings that may be especially relevant to certain groups.

7.1 General Life, Ratio of Positive Feedback

Black, Asian and Minority Ethnic groups respondents	8%
Aged 45-64	10%
Mental Health Conditions	11%
Aged 25-44	14%
Carers	16%
All respondents (baseline)	19%
White respondents	24%
Disabilities or Long Term Conditions	24%
Aged 65 and Over	27%

On general life, we find that respondents from a Black, Asian and Minority Ethnic background are least likely to give positive feedback.

Those of later working age (45-64) or with mental health conditions are also noticeably disproportionately impacted.

7.2 Services, Ratio of Positive Feedback

Aged 25-44	16%
Mental Health Conditions	32%
Black, Asian and Minority Ethnic groups respondents	40%
Aged 45-64	44%
All respondents (baseline)	45%
Carers	45%
White respondents	48%
Disabilities or Long Term Conditions	49%
Aged 65 and Over	54%

Younger respondents (25-44) are by some margin the least satisfied with services overall. Those with mental health conditions are also significantly less likely than average to leave positive feedback.

8. Glossary of Terms

CBT
CMHT

Cognitive Behavioural Therapy
Community Mental Health Team

9. Distribution and Comment

This report is available to the public and is shared with our statutory and community partners. Accessible formats are available.

If you have any comments on this report or wish to share your views and experiences, please contact us.

Healthwatch Harrow, 3 Jardine House, Harrovia Business Village, Bessborough Road, Harrow, HA1 3EX

Contact us



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www.healthwatchharrow.co.uk



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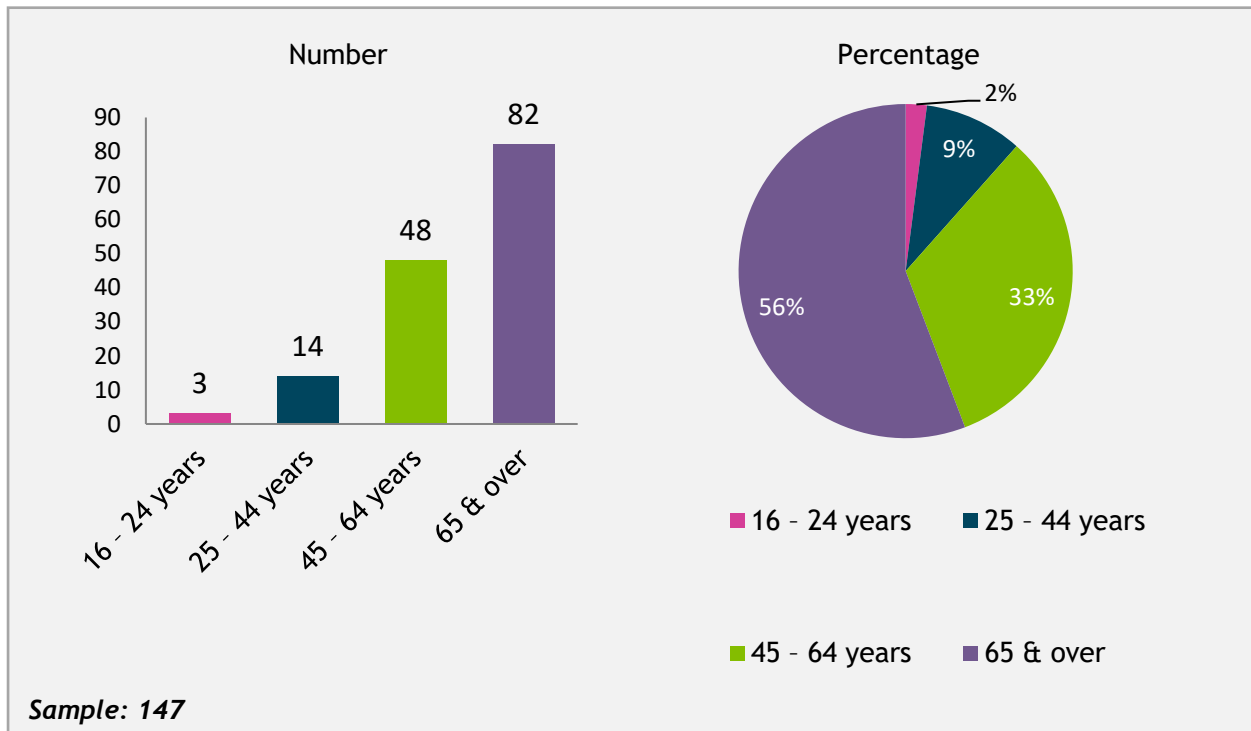


[Healthwatch Harrow](https://www.nextdoor.com/Healthwatch-Harrow)

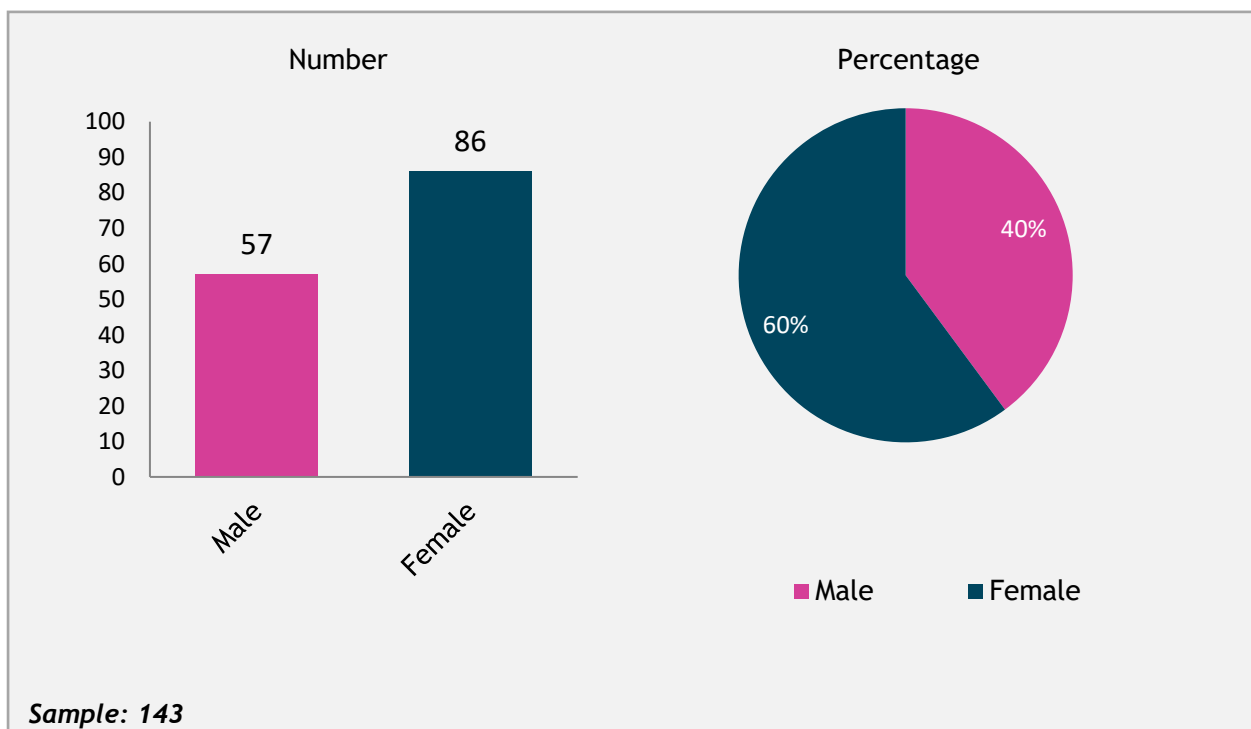
Appendix 1 - Demographics

The demographics of participants are stated as follows.

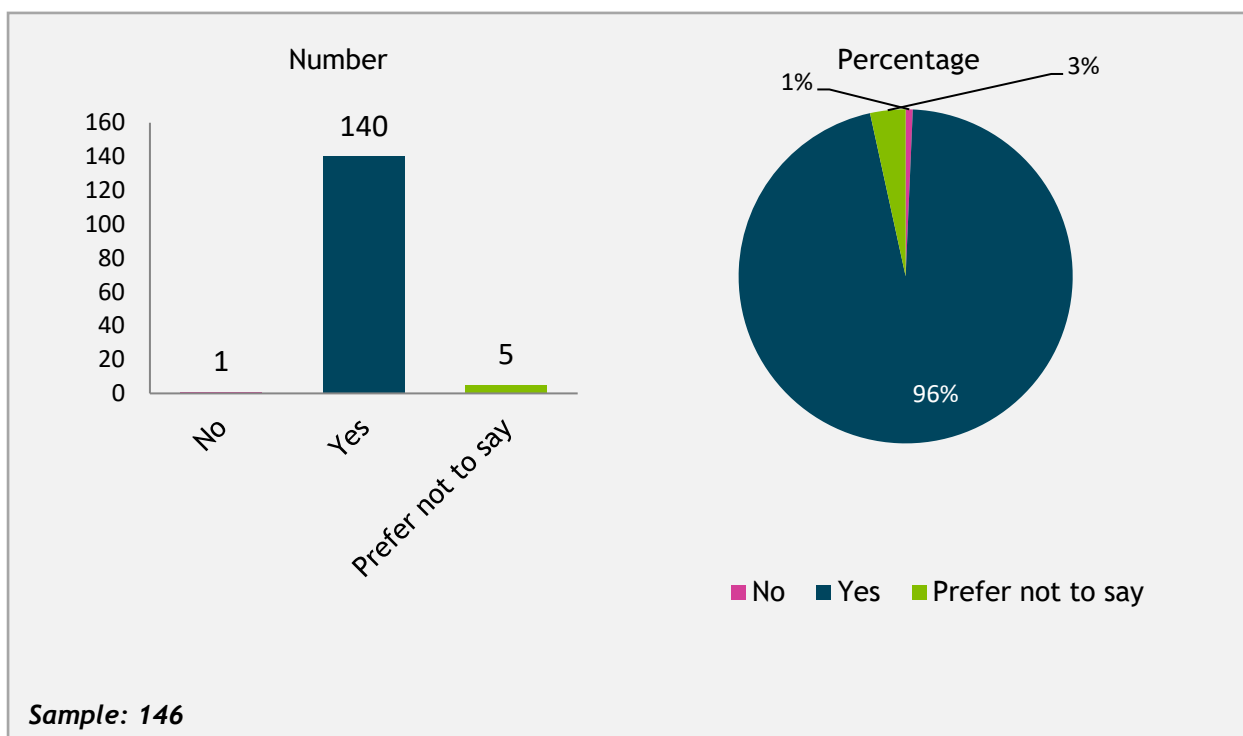
What is your age group?



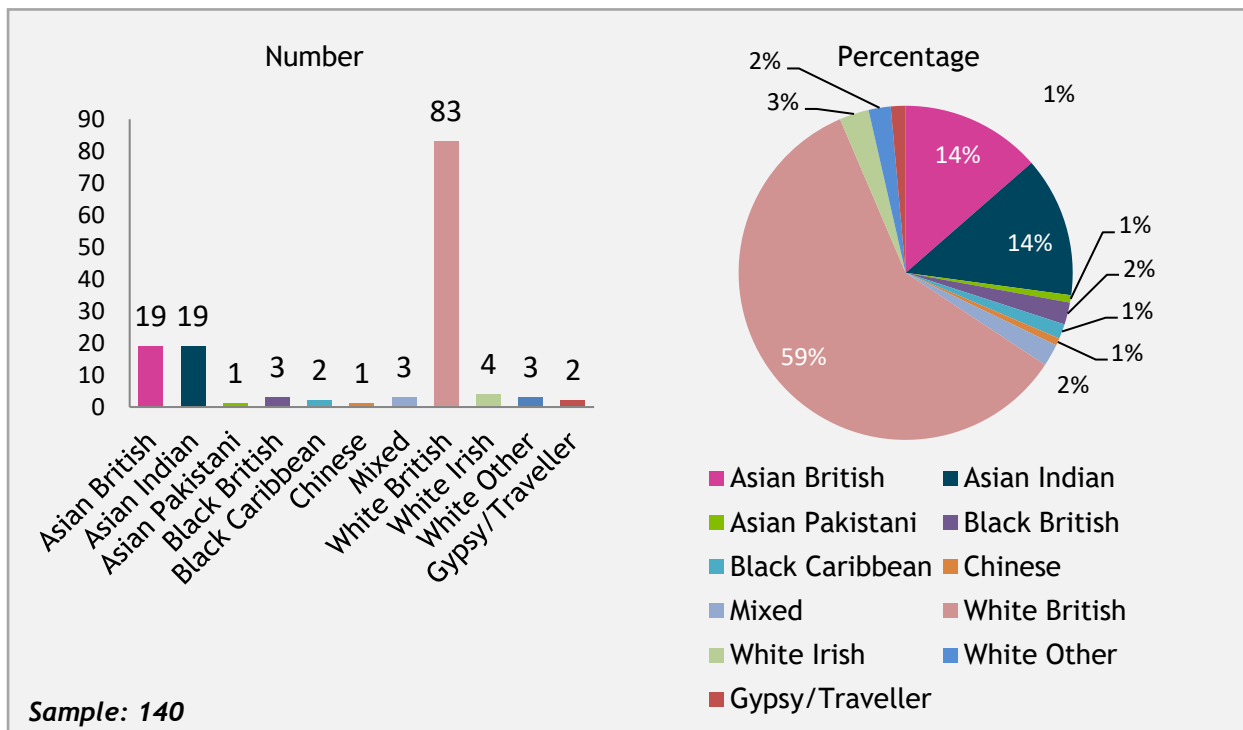
What is your gender?



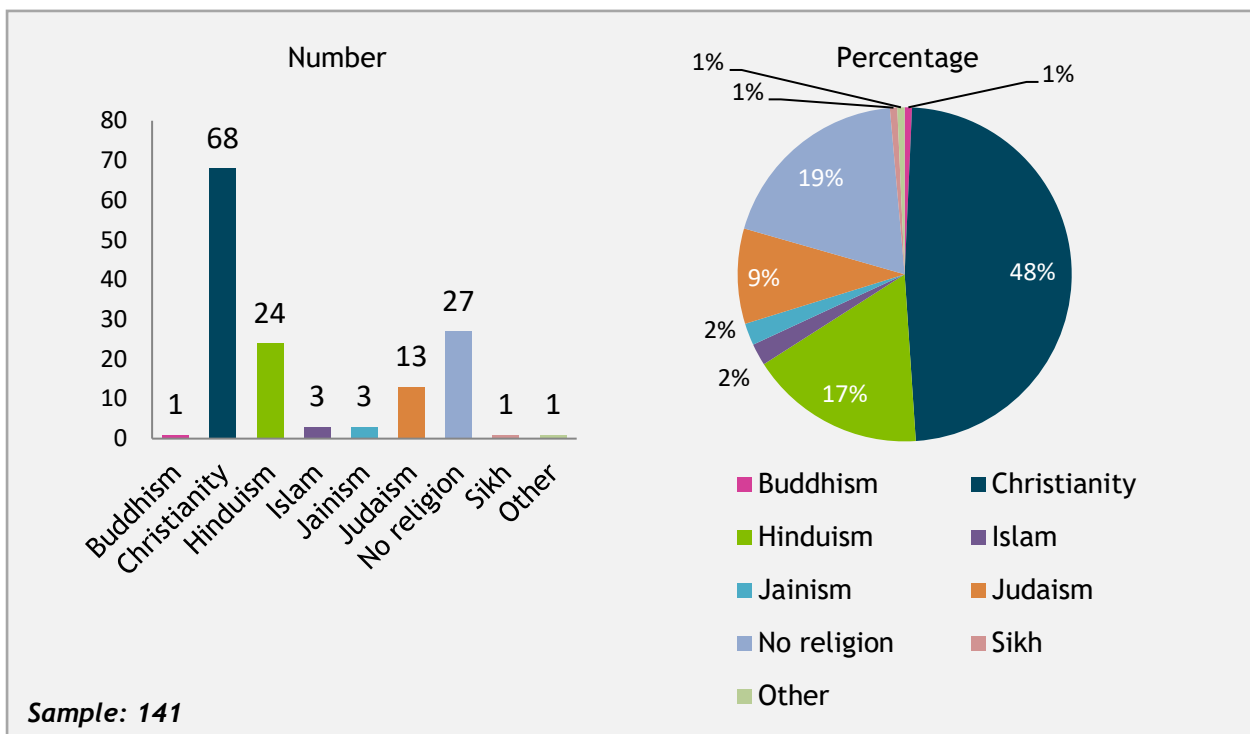
Is your gender identity the same as assigned at birth?



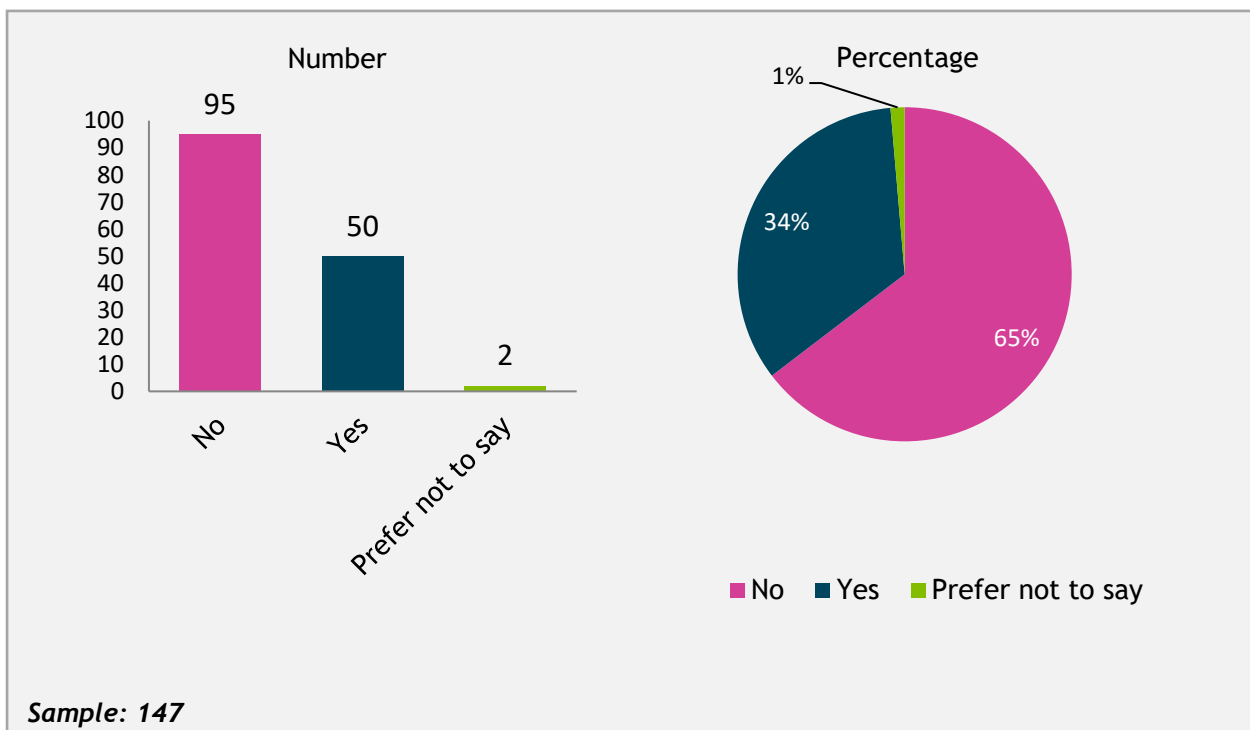
What is your ethnic origin?



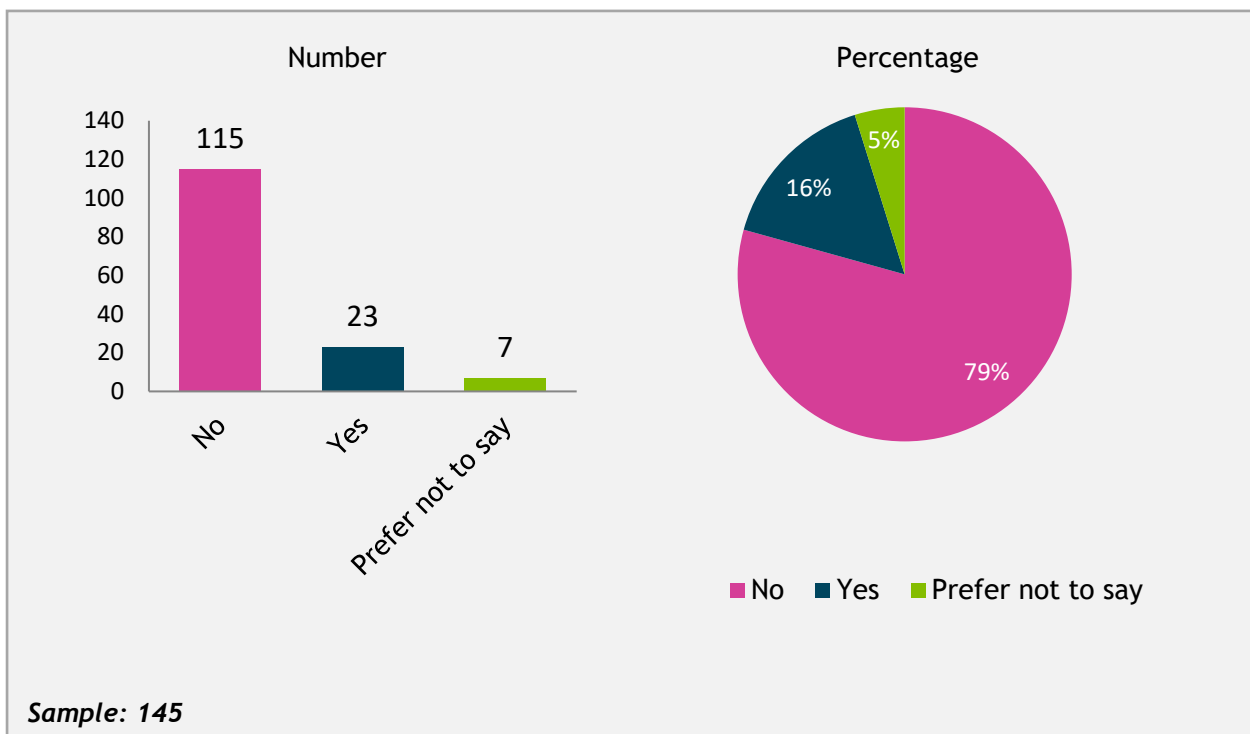
What is your religion?



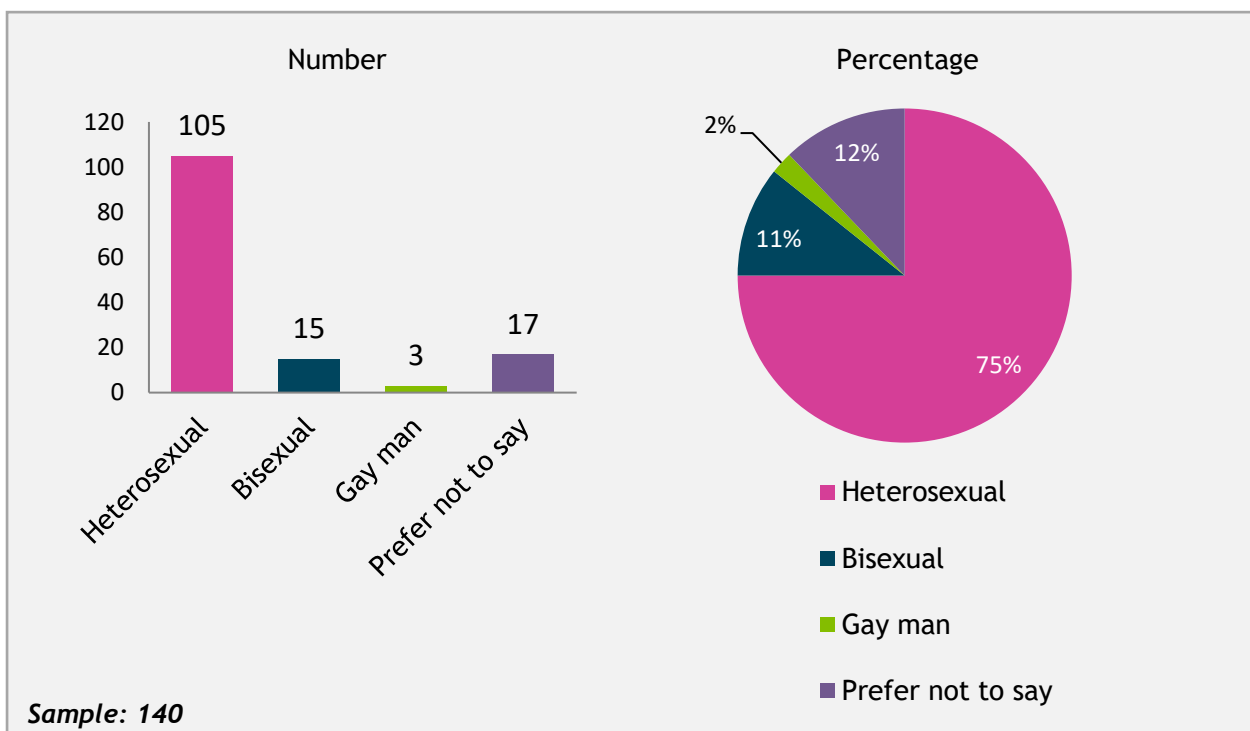
Do you consider yourself to have a disability or long-term condition?



Are you a carer for a vulnerable person?



Sexual orientation - are you?



Appendix 2 Useful Contact Information

Mind in Harrow host the Mental Health Directory, for further information please click <https://www.mindinharrow.org.uk/>

Extract from the Website:

This directory contains listings for organisations and services that can help people in Harrow with many mental health and related issues. You can also download factsheets that give information on a variety of topics. If you find any errors, want to suggest a listing or have any other feedback, please contact Leah Robertson, Mind in Harrow's ICT Worker at l.robertson@mindinharrow.org.uk.

We are constantly updating the directory and hope you will find it helpful. If you would like to get in contact with Mind in Harrow, you can call us Monday to Friday between 9am and 5pm on 020 8426 0929 or email info@mindinharrow.org.uk.

Some examples listed below, for full details of support available please refer to the website.

CNWL Bentley House - 1st Floor 15 - 21 Headstone Drive Harrow and Wealdstone HA3 5QX United Kingdom Telephone: 020 8424 7701	Talking therapies Self- referral Over 18 and registered with a GP CNWL Talking Therapies Harrow 12-14 Station Road Harrow London HA1 2SL United Kingdom Telephone: 020 8515 5015
CNWL Single Point of Access 24hour Emergency Referrals 0800 0234 650 Email: harrow.iapt@nhs.net	Samaritans Call jo@samaritans.org or call 116123
SHOUT Text service in a crisis Text 85258	

“I hadn’t realised how much I would miss contact with friends, since I tend to be quite solitary by nature, but I’m really longing to see my book group and my long-standing friends in person to give them a hug.

I’m lucky to be isolating at home with my husband so I’m not alone, but I miss seeing my four grown up children and grandchildren terribly.”

Local resident

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GP and Dental Service Access in Harrow

A report by Healthwatch Harrow



January 2021

“I was satisfied when I used the online form for a known condition and the doctor called me back.

However, I need to speak to/see a doctor about a new condition and can't book an appointment online and can't get through on the phone.”

Local GP Patient

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1. Executive Summary

Healthwatch Harrow has been the residents local voice and consumer champion for health and social care across the London Borough of Harrow since 2013. We remain totally independent and engage with the residents of Harrow and work with various organisations. Our role is to gather intelligence / evidence, to check and challenge service delivery, identify where services need to change and make recommendations to the Clinical Commissioning Group (CCG), Council and other health and social care providers.

Access to General Practice's (GP's) and Dental Services is an issue that we are increasingly hearing about, which resulted in our undertaking further investigation, the findings of which are included in this report. Section 3 provides the details of our methodology. In summary the findings are based on our survey, mystery patient exercise, trend analysis reports and feedback from residents through our outreach.

This last year has been an extremely difficult year for everyone as a result of the pandemic, particularly those people working within the NHS. We fully recognise the hard work that is being undertaken as we write this report. The purpose of our report is to share what Harrow residents are saying to us. There is general awareness of the issues that need to be addressed. This report is written in the spirit of collaborative working, knowing how hard people are working but also recognising that patients have the right to access services and to clearly understand how they can do this.

Due to our limited resources this report is not presented as research, but as a snapshot of our findings, what people are saying to us, particularly those from the Black, Asian and Minority Ethnic (BAME) Communities, which is the area we are commissioned to focus on. We also would like to thank all the residents who engaged in this work and our Healthwatch Volunteers for their dedication, hard work and support.

Key Findings: Themes

100 people completed the survey during November and December 2020. This is a summary of key themes, issues and our recommendations.

GPs

- Just 16% of respondents have found it 'easy' to obtain an appointment, with 43% finding it 'difficult'.
- Of those experiencing problems, over half (58%) cite telephone, and 42% state online related issues. Around half (48%) could not obtain an appointment at their own practice.
- On contact, the telephone is significantly the most popular method (82%).

- While 70% of respondents are comfortable with telephone booking, just 54% are comfortable with telephone consultations.
- While 51% of respondents are comfortable with online booking, just 34% are comfortable with online (video) consultations.
- 64% of respondents are satisfied with services overall.
- Those with Mental Health conditions, Carers, Black, Asian and Minority Ethnic (BAME) respondents and those of working age are disproportionately impacted, in terms of access, confidence across platforms and overall satisfaction.

Dentists

- A third of respondents (33%) have found it 'easy' to obtain an appointment, with a larger number (44%) finding it 'difficult'.
- 27% have experienced difficulty in obtaining an emergency appointment.
- 63% of respondents are registered with an NHS dentist, however some have recently been de-registered or advised to go private.
- On contact, the telephone is by far the most popular method (95%).
- 86% of respondents are satisfied with services overall.
- Those of working age are least satisfied, or able to access services.
- Local dentists reported that Harrow do not have enough Units of Dental Activity, so run out of their allocation for NHS treatment which means they have to offer treatment at private fees.

Equality Check

When compared with White/White British respondents, we find that those from BAME backgrounds are more likely to:

- Find it difficult to obtain a GP appointment.
- Be registered with an NHS dentist.

And less likely to:

- Be satisfied with the outcome of GP or Dental Services.
- Feel confident to use telephone or online services for GP access.
- Struggle to access a dentist with pain or problems.

Key issues and recommendations

In summarising the key issues and recommendations we would like to highlight the general concerns raised do not relate to the quality of care that people receive, the issues that need to be addressed relate to accessing services.

In addition, there are general concerns around what provision is being made for the increase in population in Central Harrow for example with the Kodak development,

it is unclear what provision is being made to support these emerging communities, which must present a challenge to the current providers.

Our findings show that even during a pandemic, the impact of people's experiences when they need to access health and social care can have a worrying effect on confidence in the system. This can cause mental anguish.

Feedback varies between different GP practices ranging for example from basic customer service standards seeming to slip at GP practices, telephone receptionists being inflexible and not passing messages on whilst others report getting a great service.

It is important to note that our recommendations are Harrow wide and may not relate to all GP practices. For example, there has been some excellent joint working between Healthwatch Harrow, Ridgeway Surgery, CCG and the Romanian community in producing some key information in Romanian, to enable better understanding and access.

Digital access is a known issue across Harrow, we have not included this as a recommendation as there is already a programme of activity to address. However, it would be prudent to monitor the success of this work.

Key Issues:

- GP Telephone systems and online booking systems are not efficient and do not meet the demands / needs of patients needing to contact the surgery.
- Commissioning of NHS Dental Care is not meeting current demand.
- The Black, Asian and Minority Ethnic (BAME) communities are disproportionately affected in accessing services.
- Accessibility is particularly an issue for those patients with language, mental health and learning disabilities.

Recommendations:

1. CCG to work with the Primary Care Networks and Harrow GP surgeries to put in place improved, quicker and more accessible phone and online appointment booking systems to reduce patient waiting times and cancelling appointments, and to review the effectiveness of their GP texting service in reducing missed appointments.
2. NHS England to review the commissioning of NHS Dental Care in Harrow, to ensure commissioning is kept up to date with demand and that the dental contract is fit for purpose. For example, one element is the Units of Dental Activity (UDA'S), as each dental practice is commissioned for a

set number of UDA's and in Harrow this is not meeting the current demand. Please see Healthwatch England report for further information:

<https://www.healthwatch.co.uk/report/2016-11-23/access-nhs-dental-services-what-people-told-local-healthwatch>

3. Primary Care Networks, GP practices and Dental Surgeries to work collaboratively with the Black, Asian and Minority Ethnic (BAME) communities to further understand the issues which are affecting these communities in accessing services e.g. language barriers, lack of digital access etc. and to put a plan of action in place to address these issues.
4. CCG to work with the Primary Care Networks and Harrow GP surgeries to improve accessibility particularly for those patients with language, mental health and learning disabilities.

This report will be shared with all key stakeholders, particularly those who commission the services and with the Harrow Health & Care Executive, Health & Wellbeing Board and the Health & Social Care Scrutiny Sub Committee and NHS England. Healthwatch Harrow will work collaboratively to ensure appropriate action is taken.

2. Background

In 2017 Healthwatch Harrow produced a GP Access report to see this, click the following link: [Healthwatch Harrow GP Access Report June 2017](#)

In this report the following recommendations were made:

1. Ensure Harrow GP surgeries are able to put in place more improved, quicker and easier accessible phone and online appointment booking systems to reduce patient waiting times and cancelling appointments, and to review the effectiveness of their GP texting service in reducing missed appointments.
2. Improve GP accessibility particularly for those patients with language, mental health and learning disabilities.
3. Provide clearly displayed and easy to understand updated information in their surgeries and websites information on translation services, local advocacy services, booking an online appointment, registration and how patients can make a complaint and Healthwatch Harrow information to explain how people can share confidential feedback on their experience, whether good or bad.

4. Create and provide increased public awareness of how to appropriately access and use A&E, Urgent Care, Walk in Centres, NHS 111, 999 information, pharmacy and Harrow Health Help App Now by advertising and providing clear and consistent signposting updated information to patients on GP websites, their out of hours telephone messaging, developing public awareness leaflets and through community outreach awareness workshops to reach all sectors of the Harrow community.
5. Develop and adopt better sharing of good internal standard models of practice and policies at both governance, operational and online levels. Working practices to ensure consistent and good standard of practice around accessibility and recognising that one size does not fit all, and ensure the services are responsive to meet the needs of its different communities of Harrow.

With the onset of lockdown in March 2020 due to Covid 19 there was a shift in how people access their GPs. Feedback from the community prior to Covid 19 showed peoples experiences were varied with some unable to get through to their GP surgeries, since then the level of dissatisfaction has greatly increased, as evidenced through our Trend Analysis Reports.

It is disappointing to see that some of our previous recommendations have not been addressed, please click the following link for our Trend Analysis Report:

[GP Patient Experience, 01.01.20 - 31.12.20.](#)

For more of our reports please visit:

<https://www.healthwatchharrow.co.uk/insight-and-reports.>

There has understandably been a shift in how we access GP Surgeries such as using online platforms for booking appointments and for requesting repeat prescriptions. However, this has exposed the inequalities in Harrow, not all families can afford digital resources. Some patients can only access services by telephone or mail and these are the issues that have been fed back to us.

In addition, we have been increasingly getting more issues raised with us around the difficulties in getting NHS dental appointments, as most dentists had to reduce what was on offer to patients because of the risk of infection and some dentists struggled to find adequate PPE during the first phase of the pandemic.

To gain an insight into the extent of the problem we did some investigative work between November and December to ascertain the extent of these issues, so that we would have evidence to share with stakeholders who influence and commission GP and dental contracts. The findings of this work form this report.

3. Methodology

1. We produced a survey, seeking feedback on GP and Dental access to services, which was shared with all our stakeholders in Harrow. This reached up to 500 people within Harrow by email, through our newsletter and our social media channels. The survey ran for 8 weeks till early January 2021.
2. Our volunteers engaged in a Mystery patient exercise targetted at all 32 GP surgeries in Harrow to identify how easy it was to access the surgery by phone to make an appointment.
3. We held a focus group on dental care held in Quarter 3 which was attended by 20 people. The feedback from this engagement session is included within this report in section 6.
4. We specifically focussed on the harder to reach BAME communities, who traditionally have not got engaged in our online surveys so we could capture their opinions and share their stories.
5. Through our regular outreach sessions with the Somalian and Romanian communities we engaged to share our survey with their members. This included Harrow College who kept it on their intranet for 6 weeks.
6. We also captured intelligence we have recieved through the direct contact we receive through emails and phone calls from the public.

4. Factors to consider

When working on this report, the following factors influenced the findings:

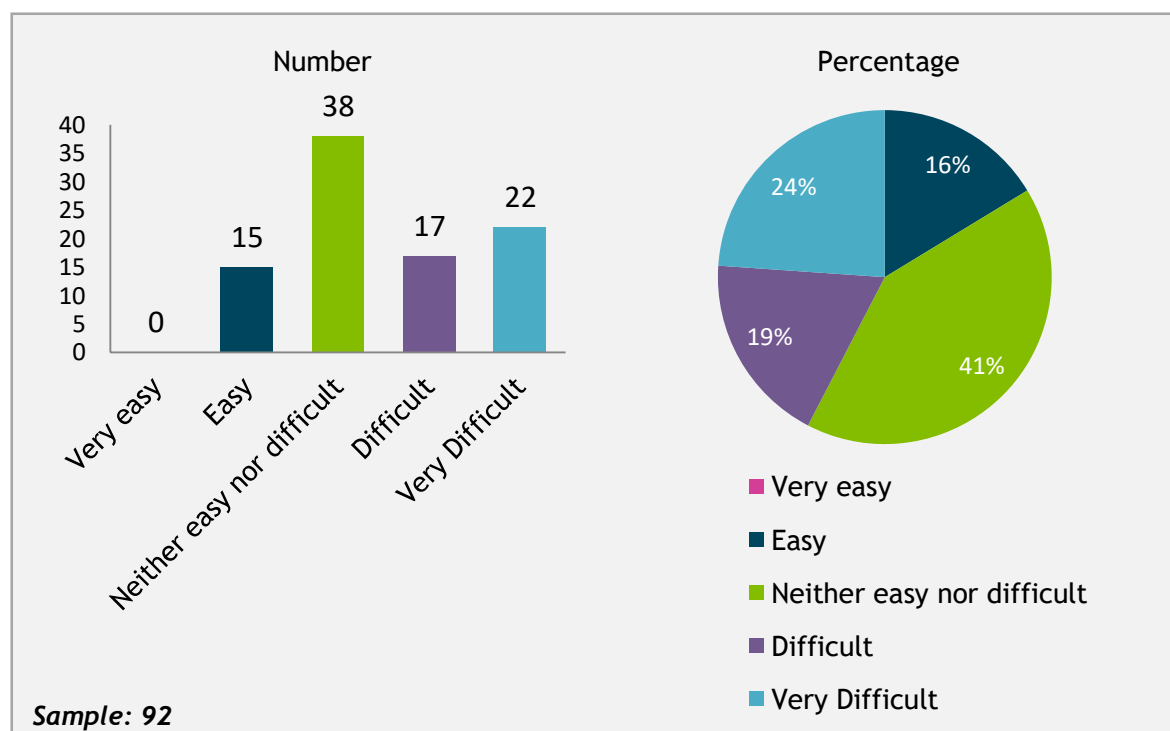
- Face to face sessions could not be held and so the reach of our target audience was limited. Our outreach sessions were accessed through zoom and Microsoft Teams.
- IT literacy meant that some people were unable to feedback and had to rely on others to feedback to us.
- Paper based surveys were discouraged as it was felt during phase 1 of the lockdown that paper could spread the virus.
- Inequalities within the population of Harrow reflected in poverty and IT literacy.

- Diversity of Harrow residents resulted in language barriers and some of the communities were busy supporting the needy and had in some cases also to juggle home schooling.
- The pandemic has meant that everyone is working under pressure and prioritising with limited resources.
- Since GP practices and dentists are private businesses, there is inconsistency in the approach to messaging their patients which impacted on the feedback against specific GP surgeries.

5.GP Services

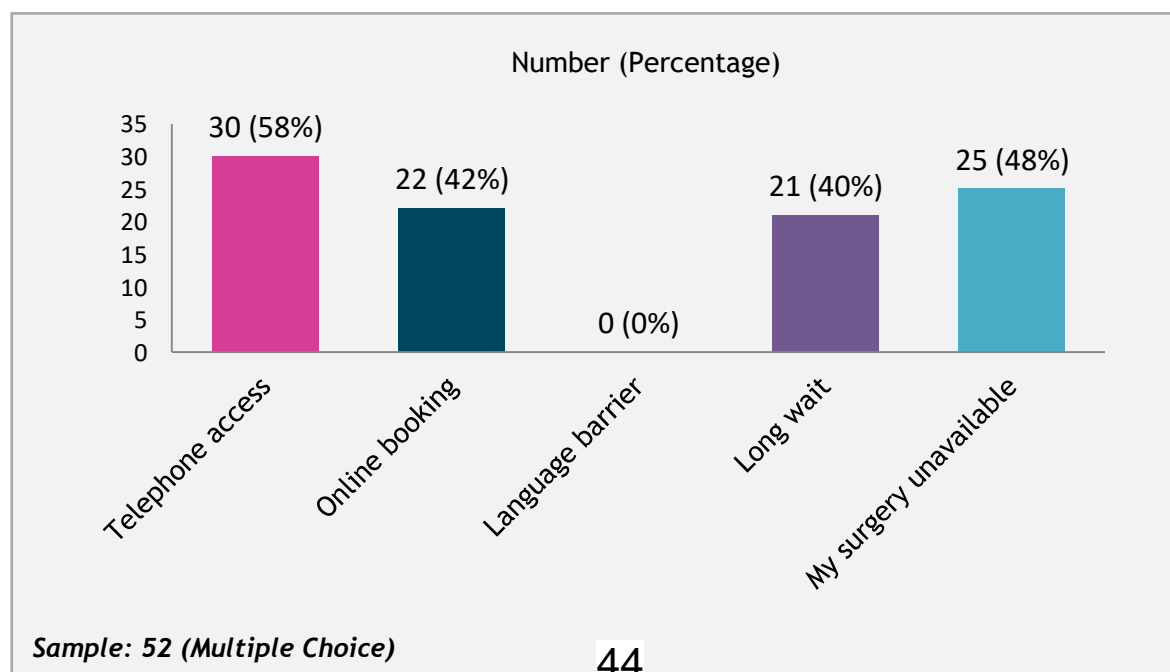
In this section we evaluate feedback around GP access, including ability to get appointments, contact methods and confidence in their use, and overall satisfaction with the experience. We have also included the findings from our mystery patient exercise.

5.1 How easy is it to get an appointment with a GP - since the pandemic (March 2020)?



43% of respondents have found it either 'difficult or very difficult' to obtain an appointment since the pandemic started in March 2020. While 16% found it easy, it is notable that nobody said the experience was 'very easy'.

5.2 If difficult what was the issue?



For those experiencing difficulty with access, over half (58%) cite telephone related issues, while over a third (42%) suggest a problem with online booking. Around half (48%) said appointments were not available at their practice, and 40% experienced long waiting times. Nobody said language has been an issue.

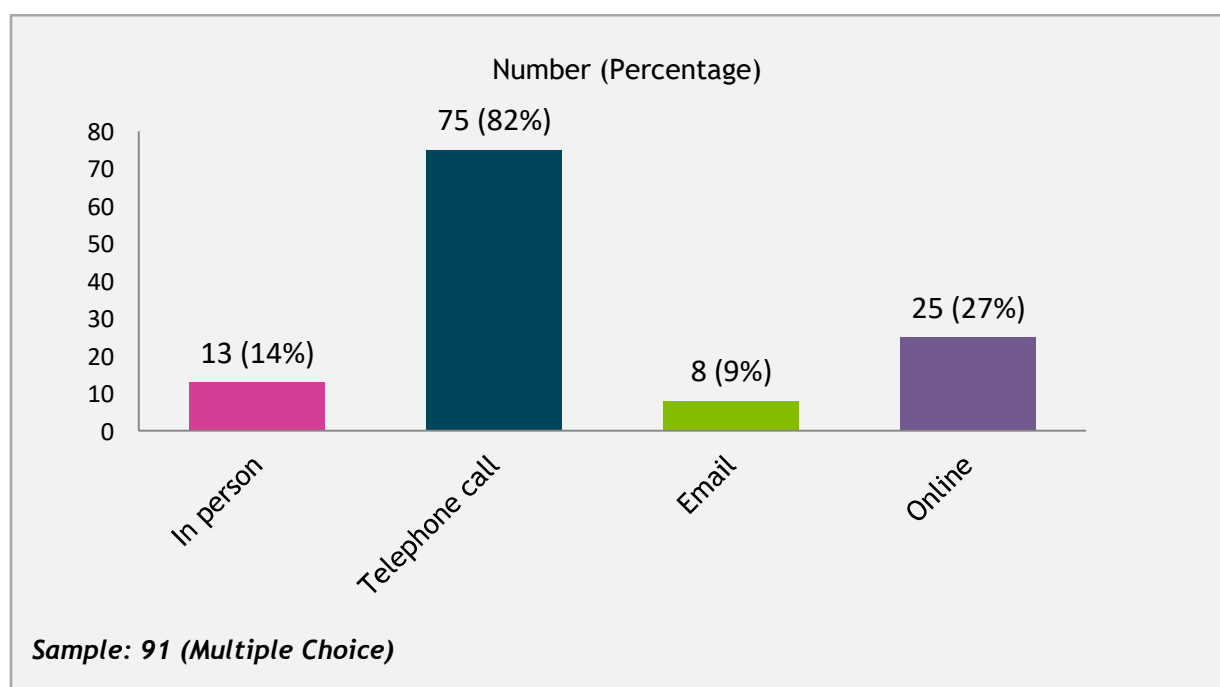
We hear that some patients have experienced difficulty with both the telephone and online systems. It is also reported that online booking does not cover all situations and may be more difficult to use when feeling ill. One person has not been able to access their GP at all in 2020, resulting in difficulties with referrals.

Selected Comments

"I was satisfied when I used the online form for a known condition and the doctor called me back, however I need to speak to/see a doctor about a new condition and can't book an appointment online and can't get through on the phone."

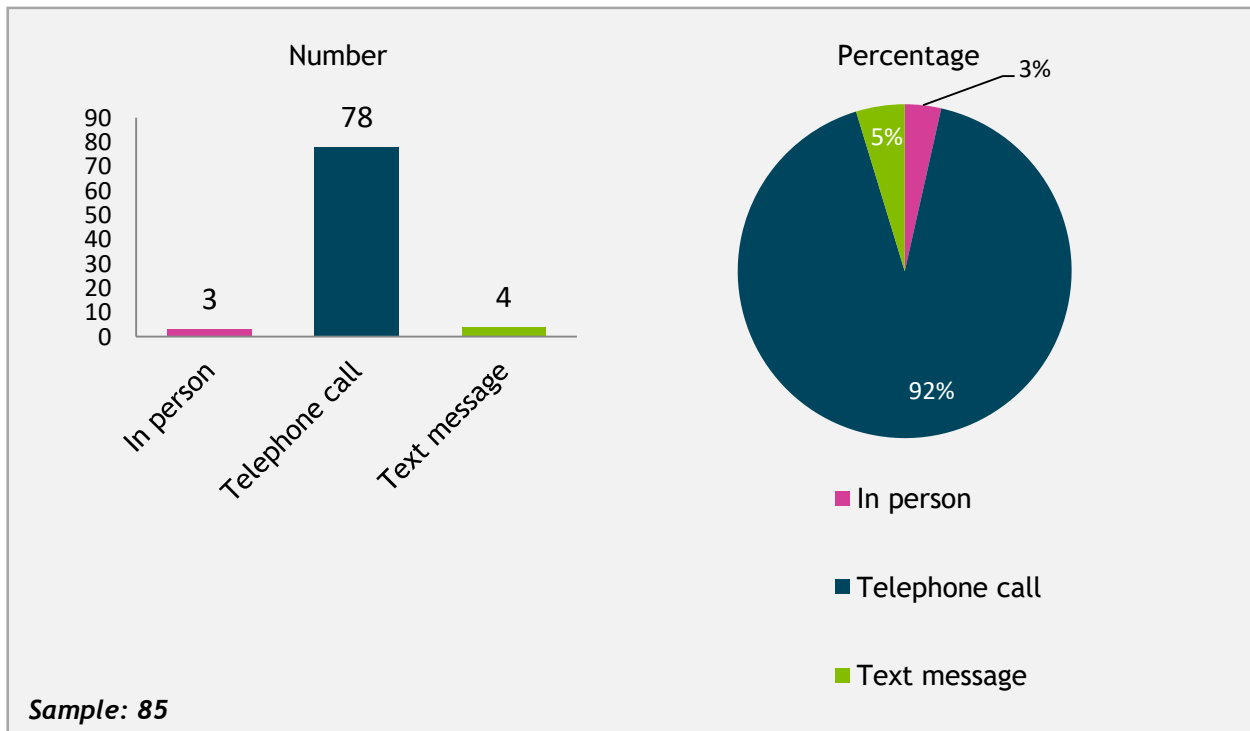
"I had acute stomach pains and continuous vomiting. Phoned my GP practice - recorded message saying go online and fill in loads of forms. Impossible to do when you feel so ill plus the forms did not reflect my symptoms. Phoned again and waited until receptionist answered. Was told that someone would phone me back later that day. Nurse telephoned me and when hearing my symptoms said that I needed to see a doctor (I know, that is why I'm trying to contact you)! Only problem, no appointments. She booked me into the Pinn Medical Centre where I saw a GP who was able to diagnose and prescribe medication. As he was not my GP however, he was unable to refer on for exploratory scans. Said if it got worse, I should go to A&E. As I am shielding this is not a good idea. I have not seen a doctor from my surgery this YEAR. Last time I was also sent to the Pinn Medical Centre. If I could move to that practice I would as mine is shambolic."

5.3 How did you contact your GP Practice during the pandemic (from March 2020)?



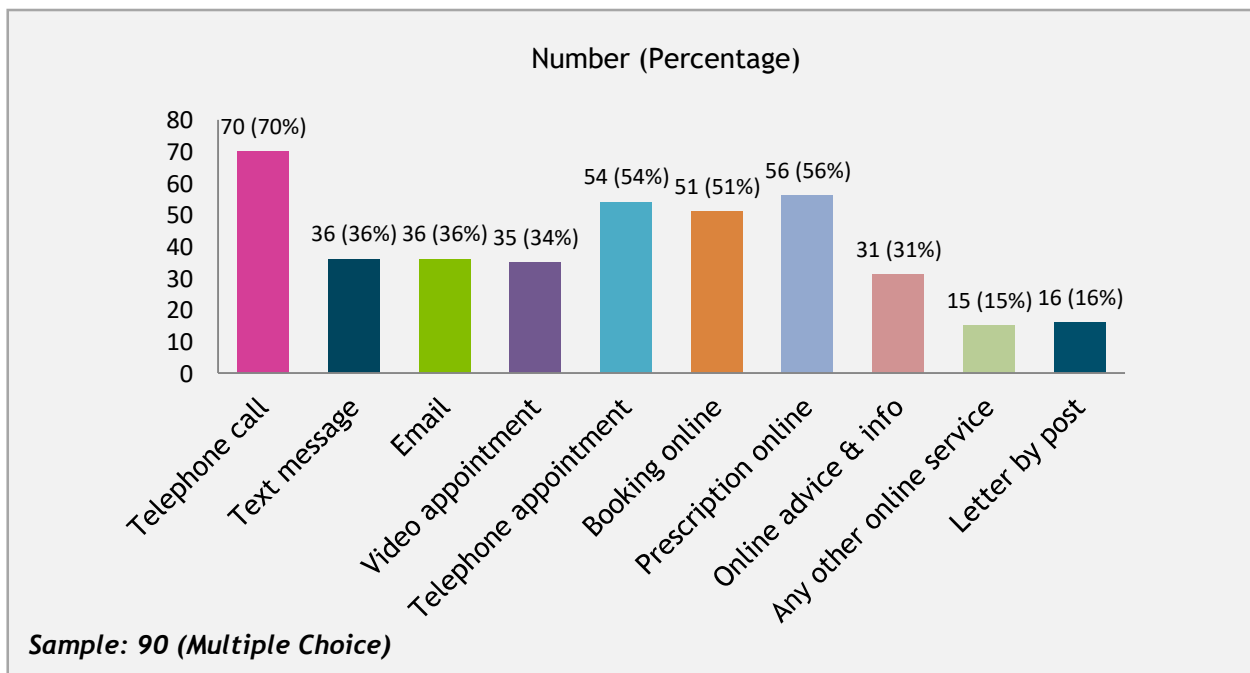
At 82%, the telephone is clearly the most popular method of contact.

5.4 If the GP contacted, you - how did they do this?



The vast majority of those contacted by the GP (92%) received a telephone call.

5.5 Do you feel confident accessing services at your GP by the following methods?



While 70% of respondents are confident with telephone access generally, a lower proportion (54%) are comfortable with telephone consultations/appointments.

56% of respondents feel comfortable with ordering repeat prescriptions online, and 51% are confident to book their appointments electronically. On other online methods including email, video appointments or access to information and advice, confidence is somewhat lower - generally at the 30% level. It is interesting that just 16% of respondents express confidence in postal letters.

When reviewing feedback, we find that some respondents would prefer a video consultation if the GP does not know them. One person who requested this says it is 'generally not available' at their practice and does not suit all platforms (such as desktop computers).

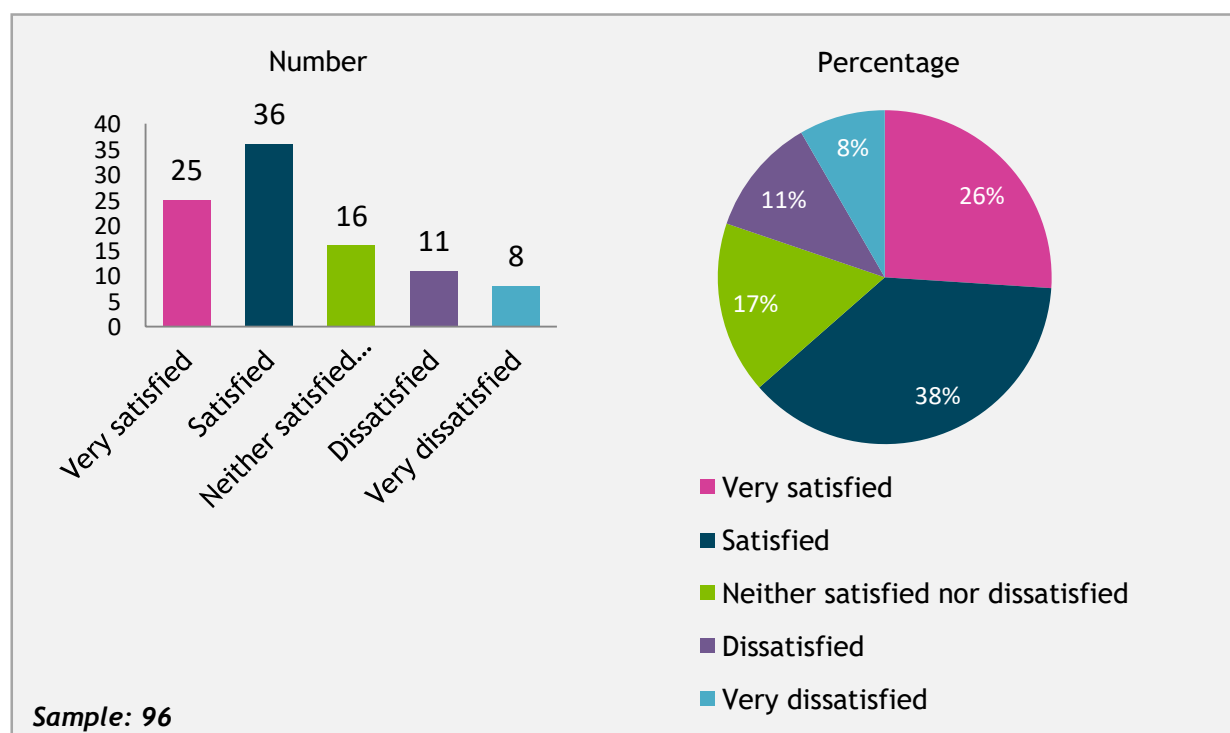
Selected Comments

"Where a face-to-face appointment is not justified in the present circumstances, I think that a video call would feel more personal if I don't already know the particular GP."

"I would like to do video calls with the doctor, but they are generally not available. Last doctor spoken to said they did have a system although she was not familiar with using it and it is only available for smartphones and not desktop PCs, so not possible for us. Reception didn't know any details about the video call system and said it was up to the doctor to arrange."

"Not sure how the online registration system works, too busy to find out - would be good if it could be set up automatically."

5.6 How satisfied were you with the outcome of your contact with the GP practice?



64% of respondents are either 'satisfied or very satisfied' with the outcome of contact with the GP. Around a fifth (19%) are not satisfied.

We receive accounts of good levels of support, with consultations, prescriptions and referrals accommodated for some patients. Others express frustration at not being able to secure appointments (in one case after four attempts), routine tests or results.

Selected Comments

Positives

"When eventually getting an appointment with the GP I managed to get a personal consultation and additional referrals to clinicians and Northwick Park Hospital."

"The surgery triaged the info I'd entered & then called to say doctor would call. Spoke to GP & prescription sent to pharmacy. Was impressed with the process & happy."

Negatives

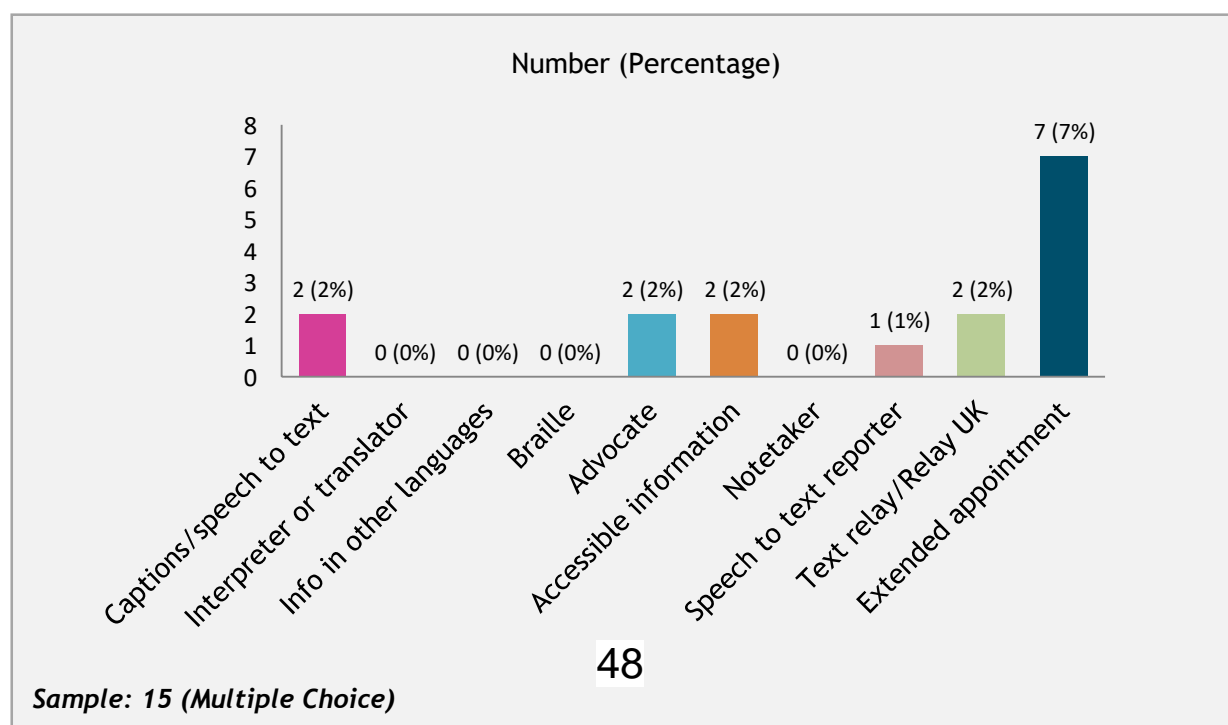
"The surgery has phoned me four times in the last few weeks and told me the doctor would like to see me. I replied that I would like to see a doctor. I was told to wait a moment while she checked the appointments and then I was told there were no appointments. This happened four times and I have to tell someone because it's becoming ridiculous!"

"Not able to talk to GP - receptionist fielding all calls."

"I have undergone a test, but my GP has not contacted me to inform me of my results."

"Have not had a diabetic check since March 2019."

5.7 Do you have access to the following?



Extended appointments are the most common method of providing additional support.

5.8 Impact on Specific Groups

We look closely at age, gender, ethnic background and existing conditions, to establish any findings that may be especially relevant to certain groups.

The following ‘impact scale’ tables highlight all groups which exceed the average (baseline) figure, for key questions.

5.8.1 Found it ‘difficult or very difficult’ to obtain an appointment since the pandemic:

All respondents (baseline)	43%
Carers	44%
Aged 45 - 64 years	45%
Disability/Long Term Conditions	46%
BAME respondents	47%
Mental Health Conditions	50%

5.8.2 'Satisfied or very satisfied' with the outcome of contact:

All respondents (baseline)	64%
Carers	63%
Aged 25 - 44 years	57%
BAME respondents	57%
Aged 45 - 64 years	55%
Mental Health Conditions	25%

We find that those with mental health conditions are least able to successfully obtain appointments and are also least satisfied overall.

Carers, Black, Asian and Minority Ethnic (BAME) respondents and those of working age are also disproportionately impacted, findings suggest.

5.8.3 Feel confident to book appointments by phone:

All respondents (baseline)	70%
Aged 45 - 64 years	67%
Carers	63%
BAME respondents	60%
Mental Health Conditions	25%

5.8.4 Feel confident to book appointments online:

All respondents (baseline)	51%
BAME respondents	50%
Aged 45 - 64 years	45%
Disability/Long Term Conditions	43%
Carers	31%
Mental Health Conditions	25%

5.8.5 Feel confident with a telephone appointment/consultation:

All respondents (baseline)	54%
BAME respondents	50%
Aged 45 - 64 years	45%
Carers	44%
Aged 25 - 44 years	43%
Mental Health Conditions	25%

5.8.6 Feel confident with a video appointment/consultation:

All respondents (baseline)	34%
Aged 45 - 64 years	33%
BAME respondents	30%
Disability/Long Term Conditions	25%
Mental Health Conditions	25%

Carers, BAME respondents and those of working age are least confident in using both telephone and online systems. It is interesting that those aged 65+ are more confident with both methods, compared with younger peers.

When looking at online specifically, those with disabilities/long term conditions are significantly disadvantaged, compared with others.

Those with mental health conditions are notably least confident of all - in both telephone and online access.

5.8.7 Comparison of ethnic groupings:

	BAME %	W/WB %
Found it 'difficult or very difficult' to obtain an appointment	47%	37%
'Satisfied or very satisfied' with the outcome of contact	57%	65%
Feel confident to book appointments by phone	60%	76%
Feel confident to book appointments online	50%	53%
Feel confident with a telephone appointment/consultation	50%	58%
Feel confident with a video appointment/consultation	30%	38%

Compared with White/White British (W/WB) respondents, we find that those from BAME communities are notably less successful in obtaining appointments, and not as satisfied with the outcome of contact.

BAME respondents are also not as confident in using both telephone and online systems.

Mystery Patient Exercise

As part of our work looking at access to GP surgeries, we wanted to understand how easy it was for a patient to get through to their GP surgery particularly as due to the pandemic many services have moved online, which does put those patients who do not have digital access at a disadvantage.

We reviewed the websites of all GP surgeries and then our team of volunteers telephoned each of our 32 practices, to assess how easy it was to get through. The intelligence collated related to the following questions:

Q1 How was the telephone call answered initially?

Q2 How long before you spoke to someone?

Q3 Can you book an appointment by telephone?

Q4: Which online booking system is used?

The key findings from this exercise are:

The greater majority of the GP surgeries - 79% operate using a recorded message, which led to a receptionist then answering to speak to the patient.

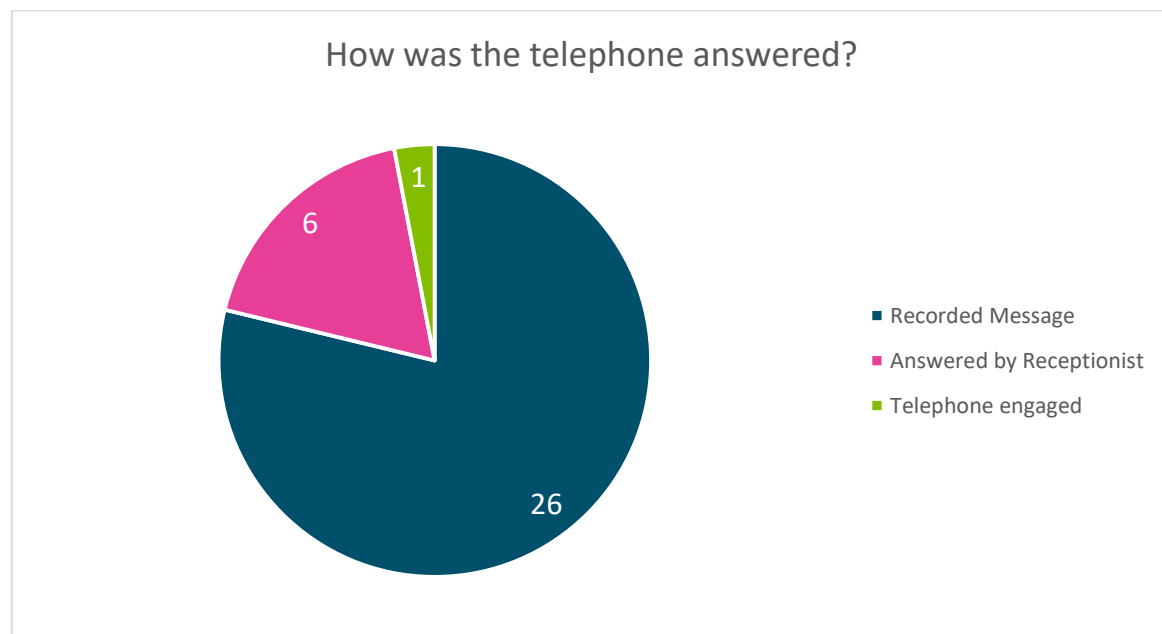
When ringing at a time to get through to a receptionist the majority of calls were picked up within 1 - 5 minutes. It is worth noting that our mystery patient exercise was undertaken by our volunteers who were testing the system to measure ease of reaching a GP through phoning, but they did not have the added pressure or frustration of doing this whilst also potentially feeling particularly unwell.

Q1 How was the telephone call answered initially?

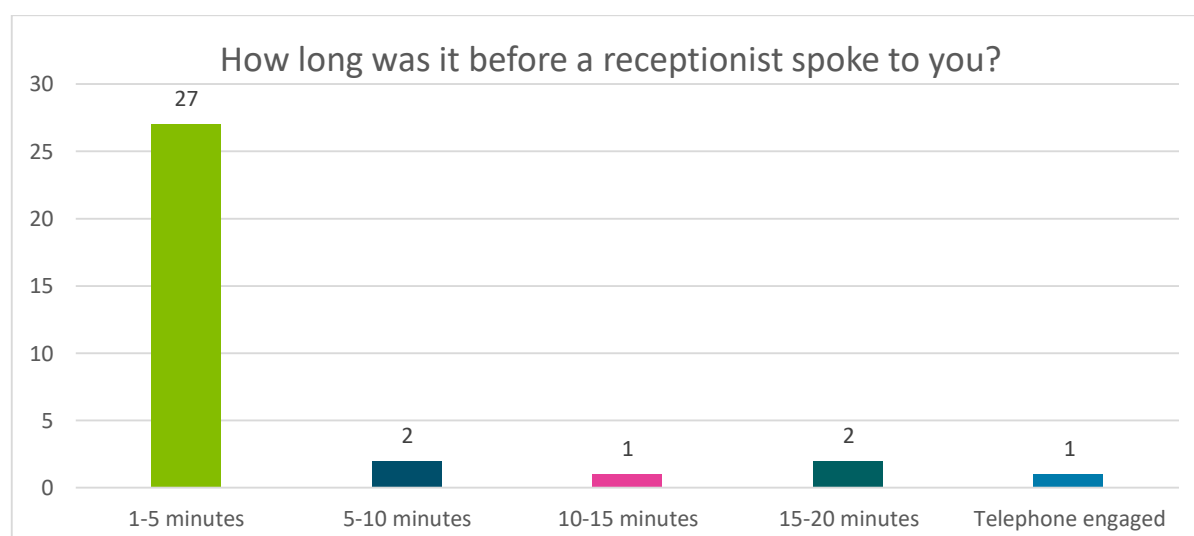
Answerphone/Recorded Message then answered: 26

No Answerphone - straight to receptionist: 6

Engaged and busy lines - 1



Q2. How long before you spoke to someone?



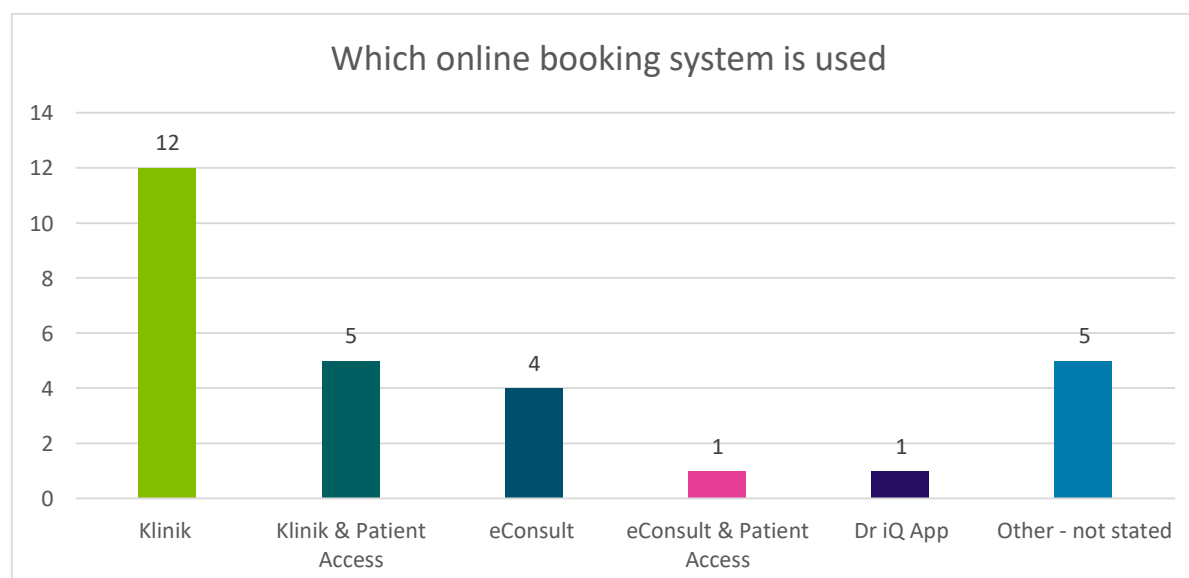
Q3: Can you book an appointment by telephone?

Generally, the majority of surgeries will take telephone bookings - some offer this just for the day's appointments, so if full, patients would need to call back the next day, also the receptionist may book the appointment for you online over the phone.

In some cases, there might not be a telephone booking system, but you book through the receptionist. 25 surgeries confirmed that you can book an appointment by telephone.

Q4: Which online booking system is used?

We found out of the surgeries that we asked, the following confirmed:

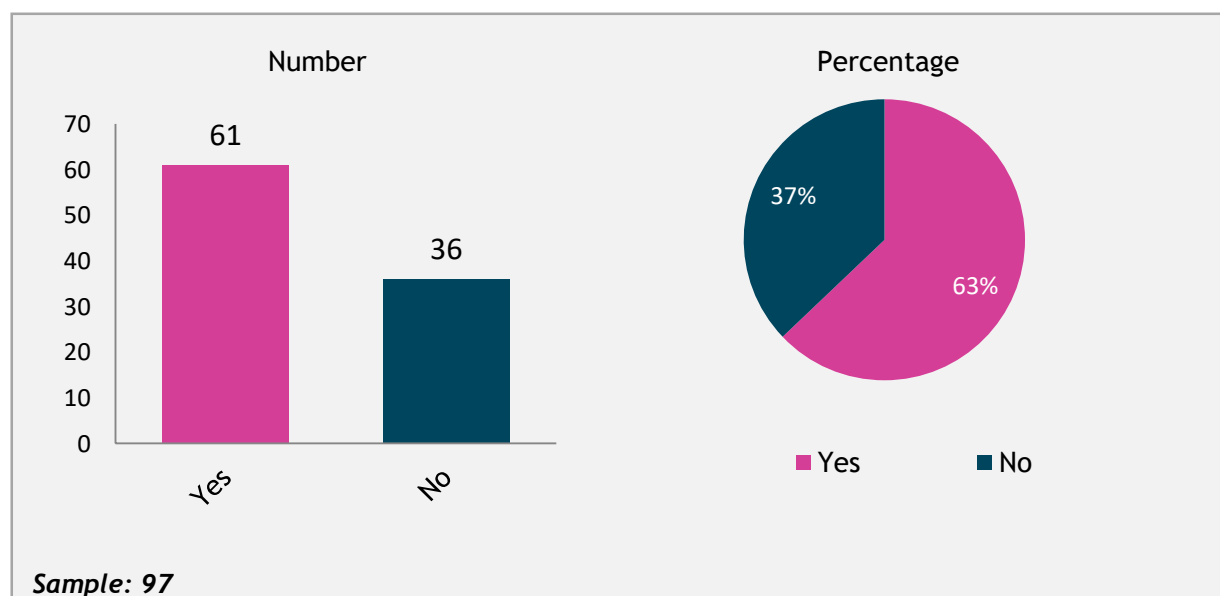


One surgery stated from March 2020 all appointment booking facilities were disabled with telephone booking as the only option.

6. Dentists

In this section we evaluate feedback around dental service access, including registration, ability to get appointments, contact methods and overall satisfaction with the experience.

6.1 Are you registered with an NHS Dentist?



Around two thirds of respondents (63%) are registered with an NHS dentist. Of the 37% who are not, many are registered with private practices.

We hear that some patients have been either de-registered, or advised by their practices to seek private treatment.

Selected Comments

"My usual dentist has said I am no longer registered with them and cannot register as an NHS patient at this time."

"NHS practice has now told me that I have to go private."

"My dentist tells me that they cannot operate to an acceptable standard within the cash limited services they would have to provide on the NHS."

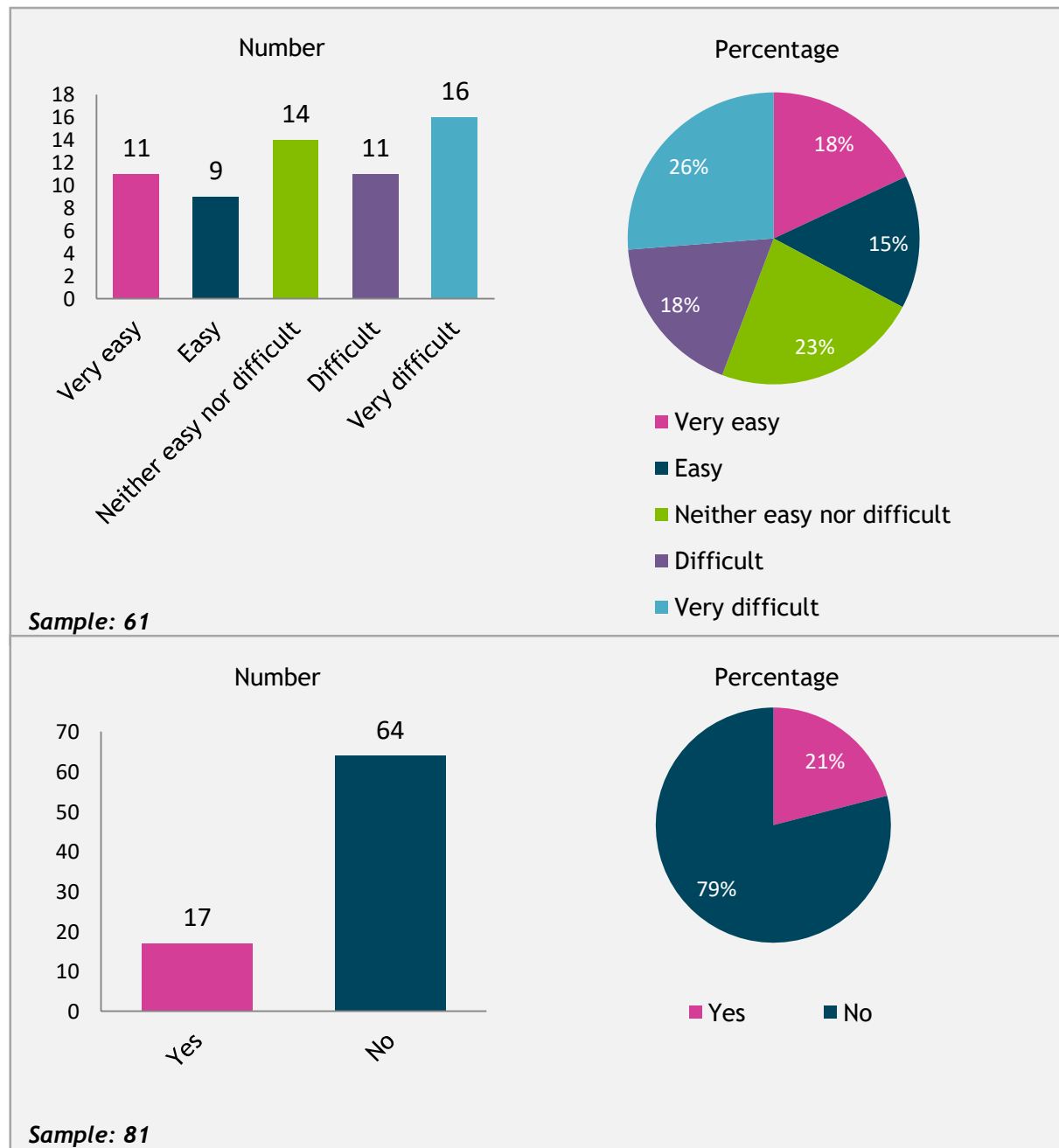
"Difficult to get appointments, they send one letter for check-ups, but no reminders then take you off of their NHS list."

"Trying to get my 2-year-old registered."

“None available, certainly not at convenient times.”

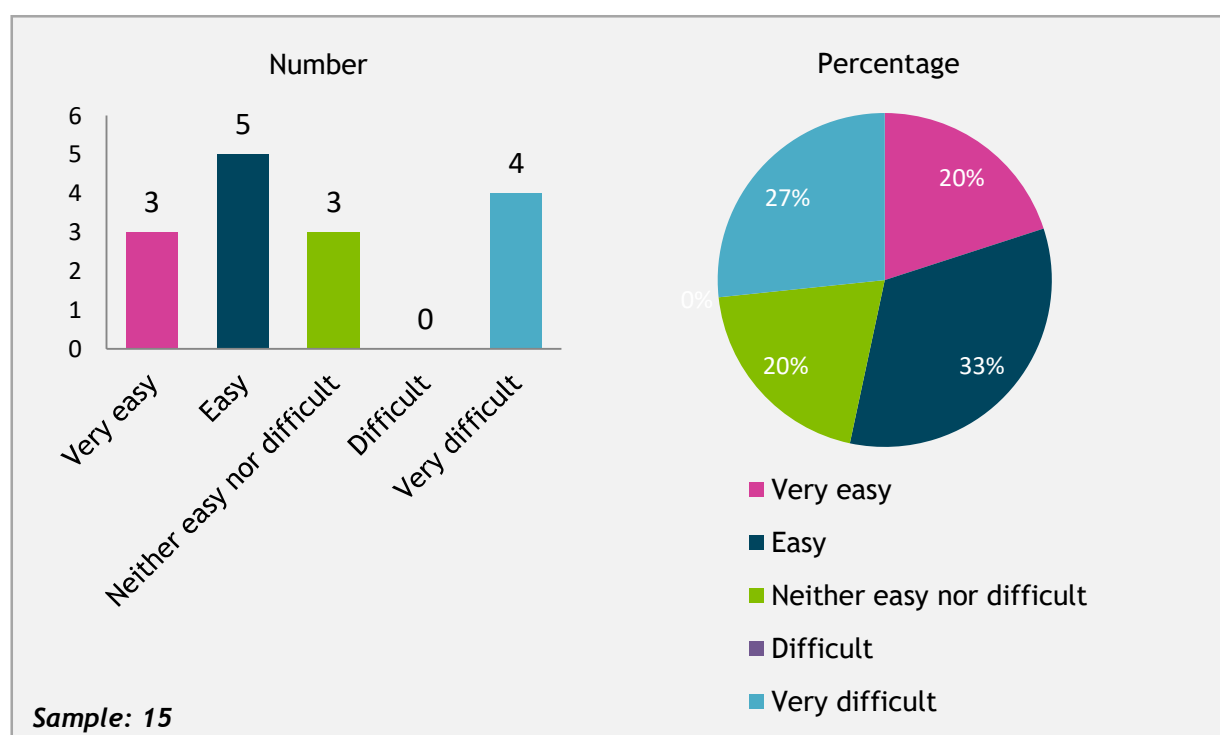
“When we moved to this area many years ago, we were unable to find an NHS dentist. I am now happy with the private dentist I go to, so I don’t want to change to another practice.”

6.2 How easy is it to get an appointment with a Dentist - during the pandemic (from March 2020)?



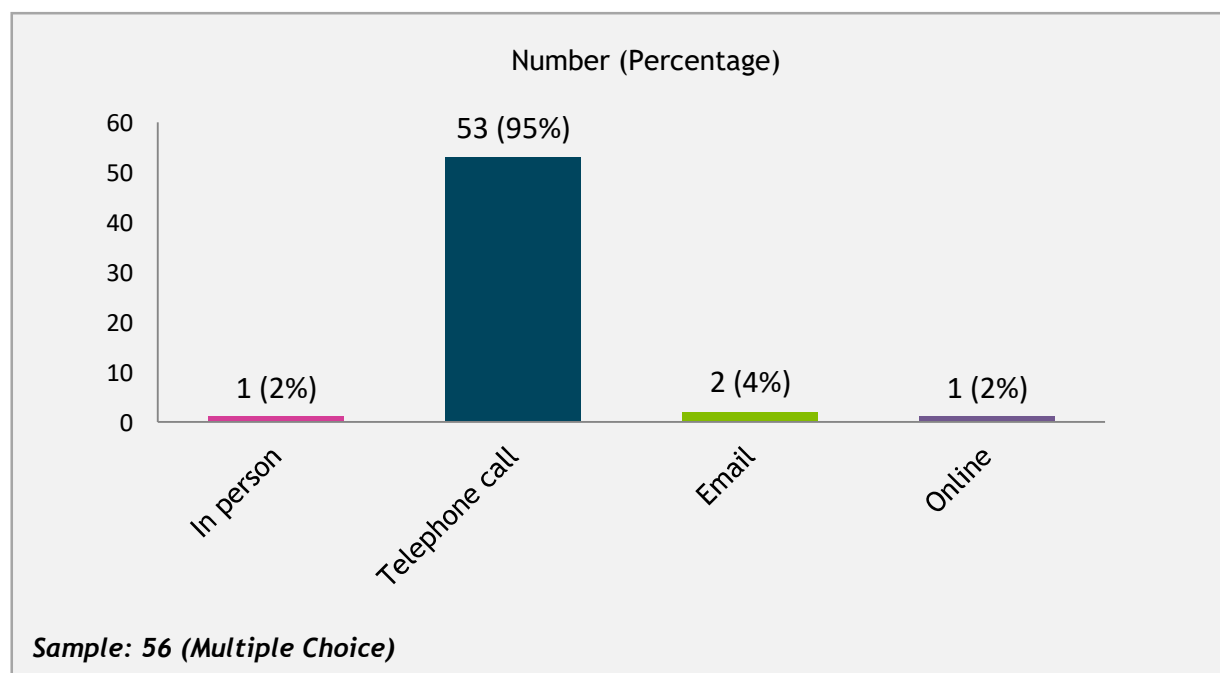
Around a fifth of appointments (21%) were for an emergency.

6.3 If yes, how easy was it to get an emergency appointment with the Dentist?



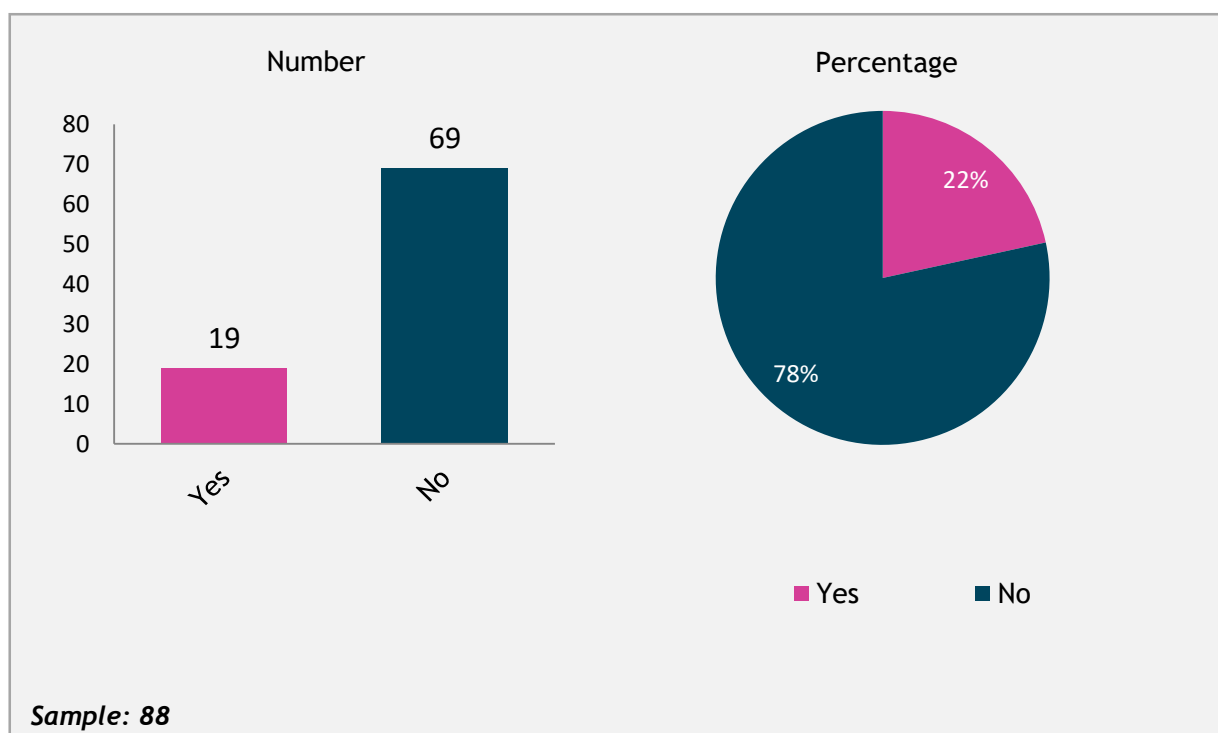
For those with an emergency, over half (53%) found it easy to get an appointment while a sizeable minority (27%) have experienced difficulty.

6.4 How did you make an appointment with your Dentist during the pandemic (from March 2020)?



On booking, the most popular method by far is the telephone.

6.5 Have you struggled to access a dental service with pain or problems in the last 12 months?



Over three quarters of respondents (78%) have not struggled to access services with problems or while in pain. A notable minority (22%) have expressed difficulty.

Experiences highlight waiting times (in one case two months for urgent treatment) and difficulty in obtaining access.

Selected Comments

"In July when I had dental pain there were no appointments available until September."

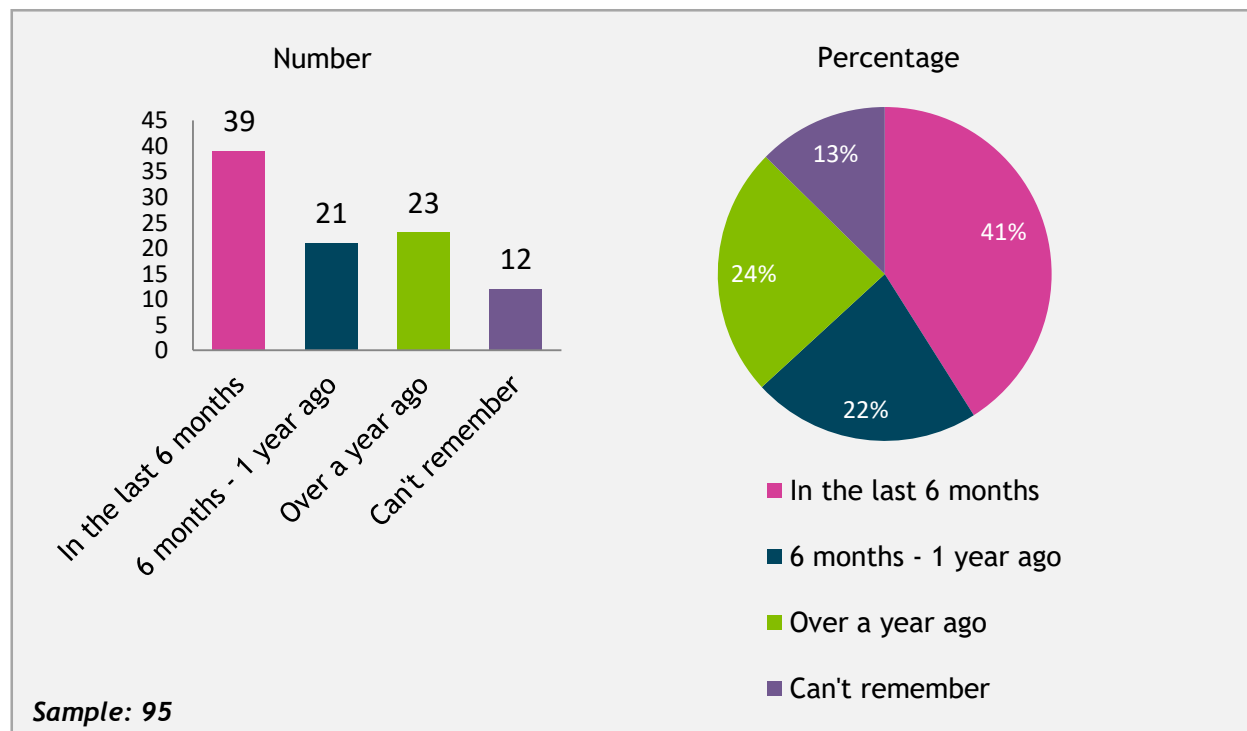
"During pandemic, no appointments available unless established infection."

"I used to go to an orthodontist, but my treatment finished, and I am unable to get access to an NHS dentist."

"We do not have our dentist because of Covid."

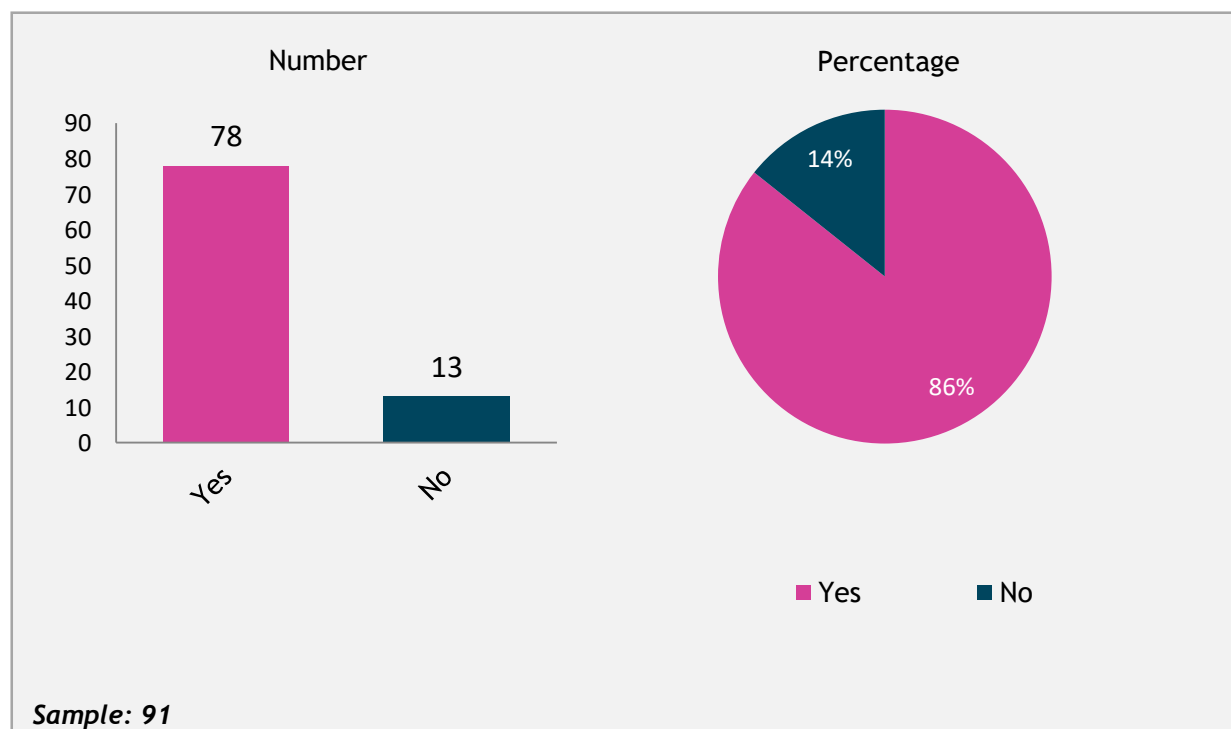
"There were problems for emergency access to dentists because that was the government's request, getting an emergency appointment was either being given antibiotics/tooth out or wait. There were very few dentists confident enough to see patients in the first five months or so since they did not want a patient with the virus and did not want to be in trouble with the department of health. There should have been MORE good dentists available being allowed to see patients."

6.6 When did you last visit the service?



63% of respondents have visited a dentist within the last year, while a quarter (24%) last visited over a year ago.

6.7 Are you pleased with the overall treatment you receive from your dental practice?



The vast majority of respondents (86%) are pleased with the overall treatment received.

We hear that treatment and check-ups have been delayed as a result of the pandemic, a 'cause of concern' for some patients. Waiting times and cost are also cited as issues.

Selected Comments

Positives

"Always able to get an appointment."

"The practice I go to is very helpful and I understand why check-ups were cancelled."

"They provide good advice on dental hygiene and do not appear to do any unnecessary work."

"Because my family paid for me, I'm lucky."

Negatives

"I needed a check-up prior to a hospital appointment. However, during the initial phase of the pandemic, I would not have been able to have treatment as dentists could not use drills. Also, no hygienists were able to give appointments and that is a cause of concern."

"Happy to see a dentist but only an assessment appointment so no treatment could be done. Waiting for the new year to be treated."

"Unable to have a basic check-up."

"They did minimum work and said they would contact me when they are able to do more and have never contacted me."

"Emergency App made by 111. The lady dentist was not confident to pull/remove a dental root! We have to wait 3 months for an app with specialist!!!"

"But it is expensive."

"I had to pay private charges for extraction and treatment."

6.8 Impact on Specific Groups

We look closely at age, gender, ethnic background and existing conditions, to establish any findings that may be especially relevant to certain groups.

The following ‘impact scale’ tables highlight all groups which exceed the average (baseline) figure, for key questions.

6.8.1 Registered with an NHS Dentist:

All respondents (baseline)	63%
Aged 25 - 44 years	57%
White/White British respondents	56%
Aged 65 and over	48%

Those of retirement age, early working age or from a White/White British background are least likely to be registered with an NHS dentist.

6.8.2 Have struggled to access a dental service with pain or problems in the last 12 months:

All respondents (baseline)	22%
Mental Health Conditions	25%
Aged 25 - 44 years	36%

Working aged respondents are most likely to experience difficulty in obtaining appointments for pain or problems.

6.8.3 Pleased with the overall treatment received:

All respondents (baseline)	86%
White/White British respondents	83%
Aged 45 - 64 years	79%
BAME respondents	70%
Aged 25 - 44 years	57%

Those of working age are significantly least pleased with the overall treatment received. BAME respondents are also disproportionately impacted.

6.8.4 Comparison of ethnic groupings:

	BAME %	W/WB %
Registered with an NHS Dentist	73%	56%
Have struggled to access a dental service with pain or problems	17%	20%
Pleased with the overall treatment received	70%	83%

Compared with White/White British (W/WB) respondents, we find that those from BAME communities are significantly more likely to be registered for NHS treatment, and also notably less pleased with the overall service received.

7. Glossary of Terms

BAME
W/WB

Black, Asian and Minority Ethnic
White/White British

8. Distribution and Comment

This report is available to the public and is shared with our statutory and community partners. Accessible formats are available.

If you have any comments on this report or wish to share your views and experiences, please contact us.

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Contact us



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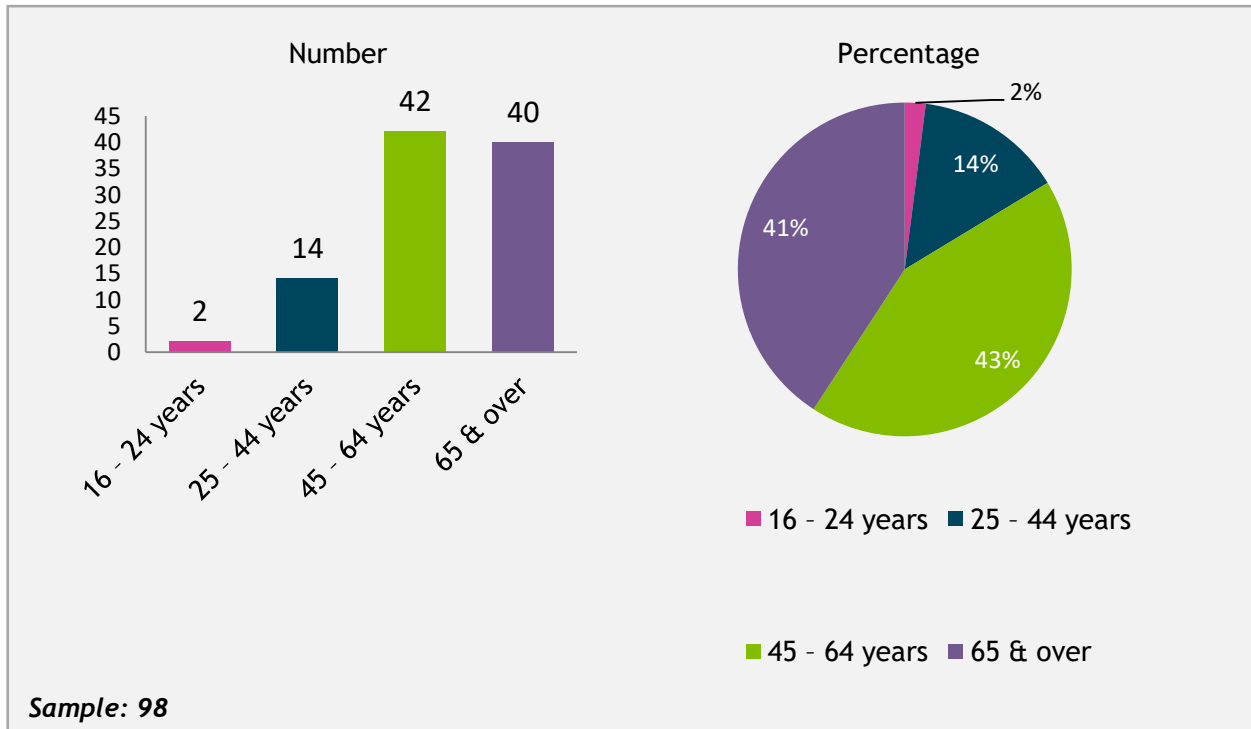


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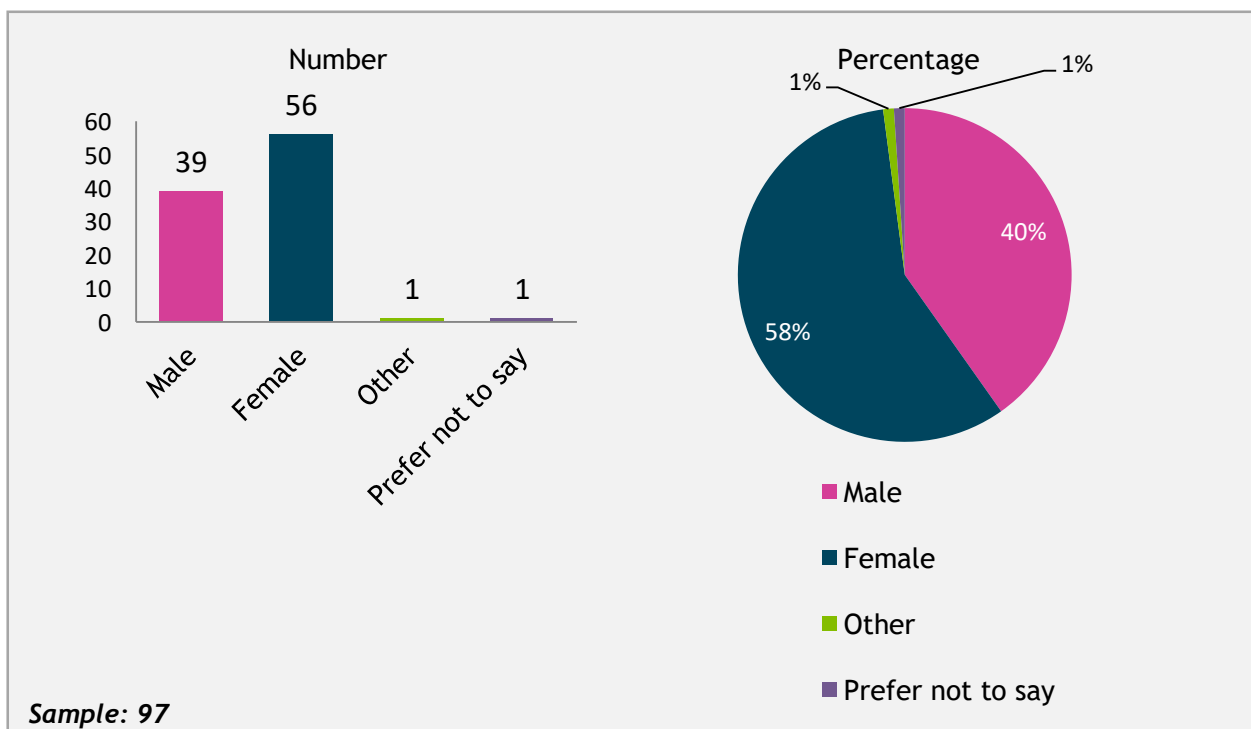
Appendix 1 - Demographics

The demographics of participants are stated as follows.

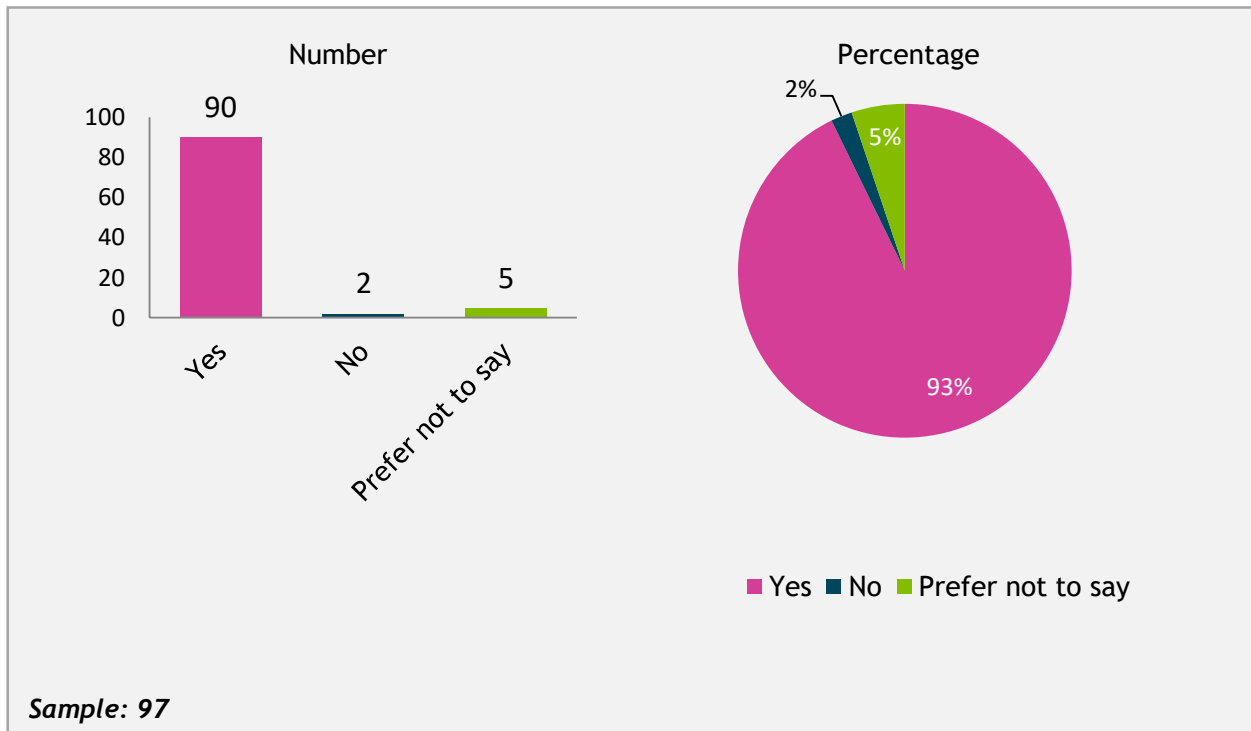
What is your age group?



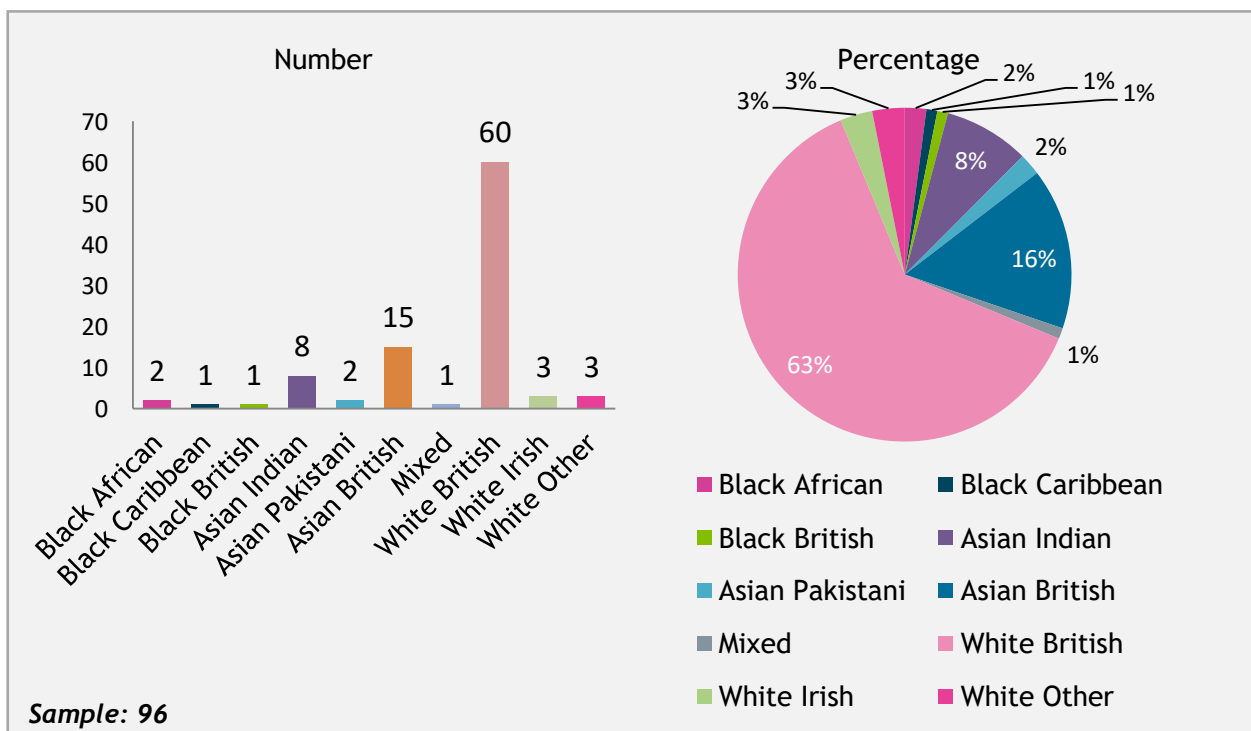
What is your gender?



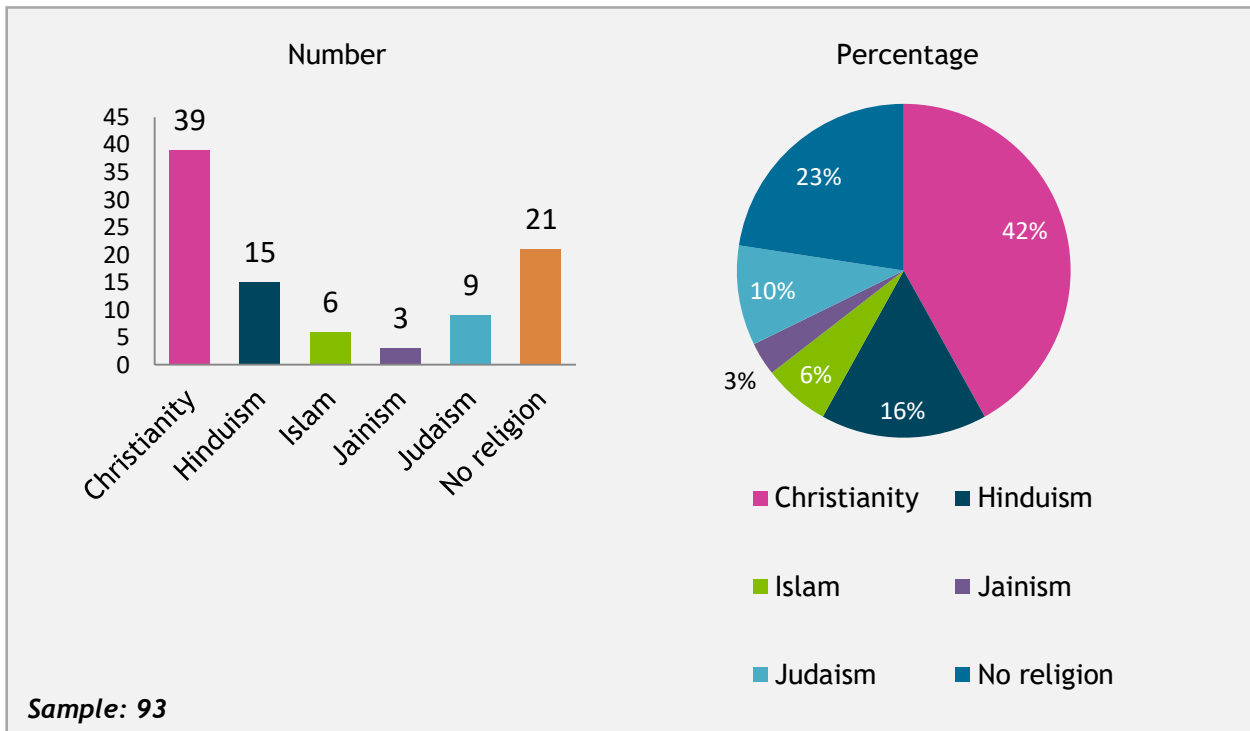
Is your gender identity the same as assigned at birth?



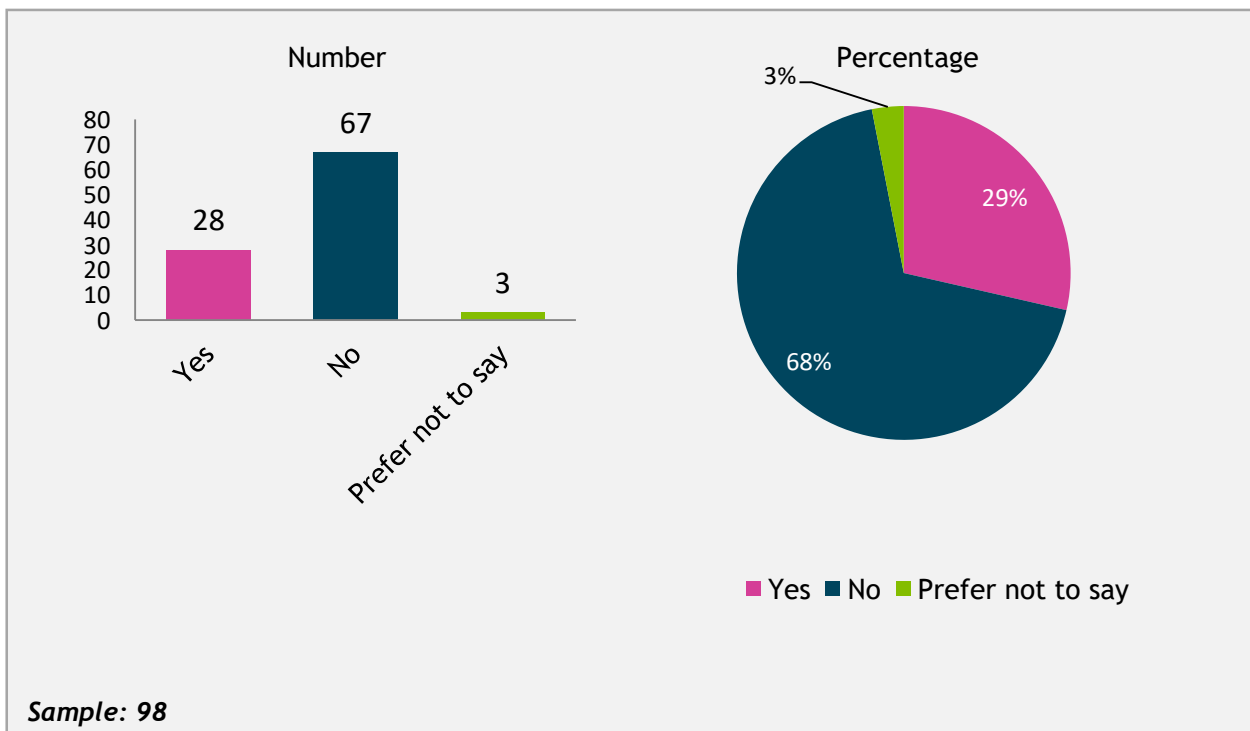
What is your ethnic origin?



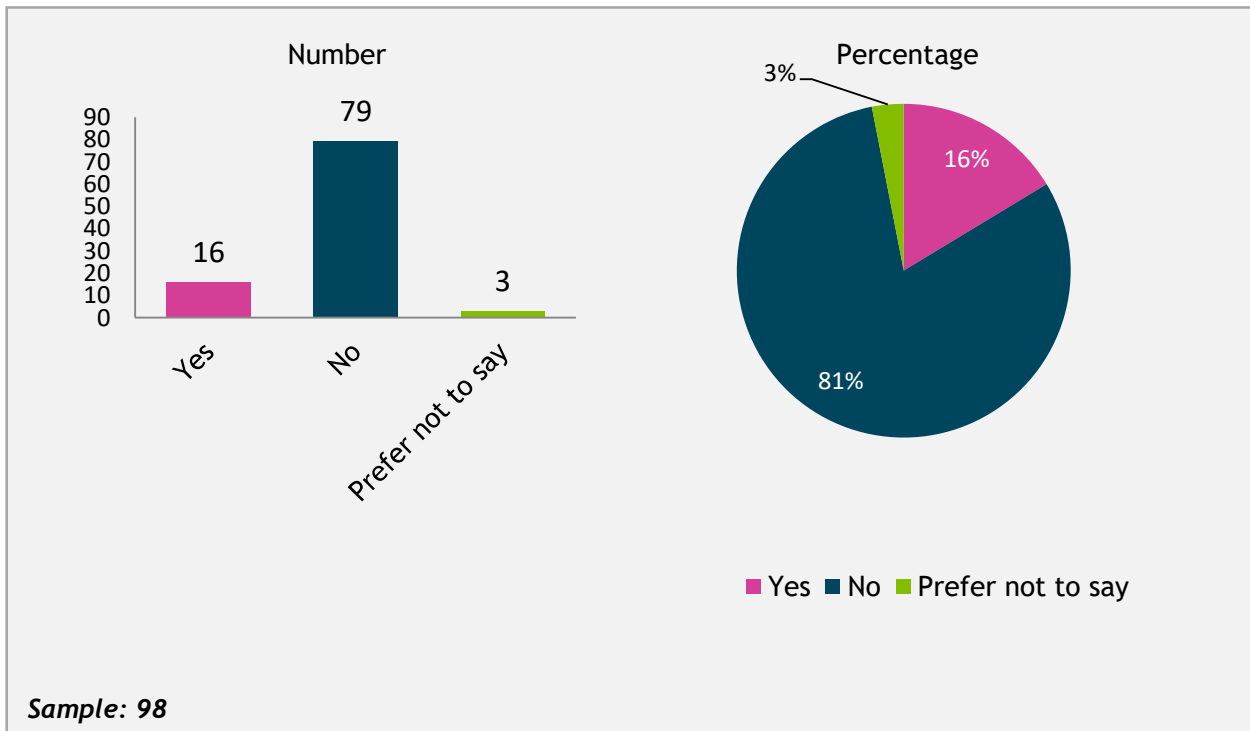
What is your religion?



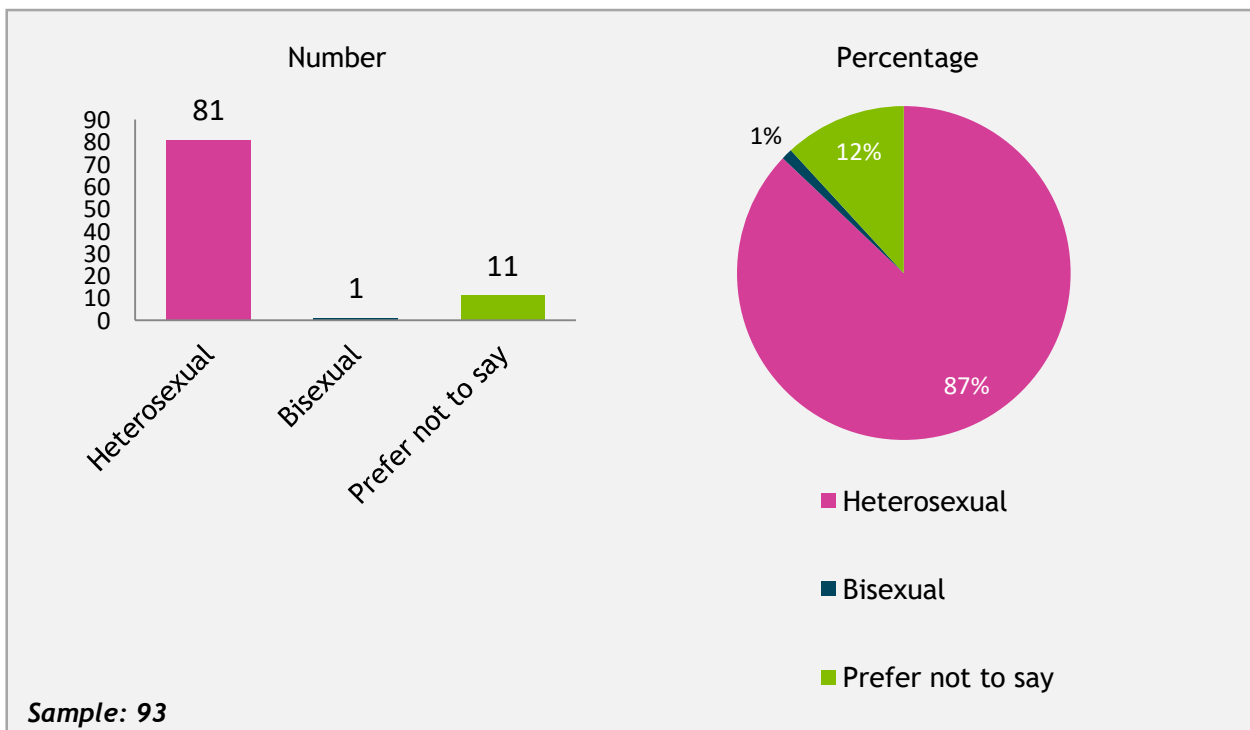
Do you consider yourself to have a disability or long-term condition?



Are you a carer for a vulnerable person?



Sexual orientation - are you?



“The practice I go to is very helpful and I understand why check-ups were cancelled.”

Local Dental Patient

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