

# Joint Programme for Patient, Carer and Public Involvement in COVID Recovery: Attitudes and behaviours telephone survey

**Executive summary**

**October 2021**

*Generously supported by Guy's and St  
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College Hospital Charity*



**Ipsos MORI**



# Executive summary

## Introduction



The **Joint Programme for Patient, Carer and Public Involvement in COVID Recovery** is a collaboration between Guy's and St Thomas' NHS Foundation Trust - including Evelina London Children's Hospital and Royal Brompton and Harefield hospitals - and King's College Hospital NHS Foundation Trust.

The **two-year programme**, generously funded by the Guys' and St Thomas' Charity and supported by King's College Hospital Charity, aims to ensure the views of patients, carers and the public **inform a number of the ongoing service changes** that continue to develop in response to the COVID-19 pandemic.

This report contains the findings from a survey carried out by Ipsos MORI on behalf of the Joint Programme for Patient, Carer and Public Involvement in COVID Recovery. The objectives of the research were to **understand patient, carer and public attitudes and behaviours in relation to accessing care and services during the pandemic**.

Overall, **1,500 participants from across the partners** involved in the programme took part in the survey, which was conducted via telephone in May 2021.

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## Key findings and implications

### Concerns about coronavirus

There remain **high levels of concern about coronavirus** – these worries continue to affect how people feel about using health services. These concerns are evident throughout the results and demonstrate the need to continue to reassure patients, carers and visitors:

- **Experiences of using hospital services face-to-face during the pandemic were largely positive** – the majority (91%) said they felt comfortable using these services.
- Parents and carers, responding on behalf of a child or adult, were less positive (84% and 78% respectively), reflecting **higher levels of concern amongst people with caring responsibilities**.
- The small group who said they **felt uncomfortable using a health service face-to-face** (7% of those that used them) tended to say they felt this way **because they were worried about catching coronavirus**.
- Although only a small proportion (less than 5%), **some participants chose to stay away from services during the pandemic because they were worried about catching coronavirus**.
- The **majority of participants say they would feel comfortable using most services** if they needed to in the future.
- Of those who said they would be uncomfortable using a hospital service face-to-face (37%), the most **common reason for feeling concerned relates to the perceived risk of catching coronavirus** (mentioned by 54% of this group).
- On the whole, participants find the **prospect of staying as an inpatient as the most worrisome** (20% would feel uncomfortable).

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## Key findings and implications continued...

There are implications arising from these continued high levels of concern:

- Communications ought to provide **reassurance about the level of risk and measures that are in place** to keep patients, carers and visitors safe when attending a health service. Findings also suggest a need for staff to be understanding and compassionate, even more so than in usual circumstances.
- However, there is a **small group of very concerned people** who say that **nothing could make them feel comfortable about using a face-to-face service**. While **virtual alternatives** are a useful solution in some cases (see next slide), some patients or carers may choose not to access services when they need to. The programme may wish to consider how to engage with this group to understand whether they will stay away from services in the longer-term.





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## Key findings and implications continued...



### Virtual appointments

Relatively **small numbers of participants had used a virtual appointment** (e.g. online using a smart phone or other device, or by telephone); most via telephone. **Most felt comfortable using a virtual service**; however, some expressed unease or experienced difficulties. For some people, there appears to be distrust, linked to not having a physical examination and a concern that something may get missed.

The survey collected suggestions from some participants as to how to support them to make use of virtual services (and to feel comfortable doing so), including:

- **More information in advance and to have a set time** for the appointment.
- Support to help them **overcome connectivity and communication issues**.

However, it is clear that some people may be left behind if more appointments and services are only provided virtually. **Offering a choice of mode of appointment** or reassuring them that they can be **followed up face-to-face** if necessary will be important for this group.

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## Key findings and implications continued...

### Views on restrictions

Views on restrictions on visitors and carers or family members accompanying patients to appointments were very divided amongst participants – **there was particular disquiet about restrictions on visitors to adult and children inpatients**. Further work is needed to understand how to keep patients and staff safe in a way that is acceptable and seen as proportionate and reasonable.

### Differences in experiences

Survey analysis explored experiences of different population groups. Some groups express particular concerns about coronavirus and using services:

- **Carers consistently show higher levels of concern or unease** – particularly about virtual appointments and staying in hospital as an inpatient.
- **Patients from ethnic minority backgrounds have higher levels of concern, and lower levels of comfort** using services face-to-face (reflecting wider trends we have seen), and virtually.

Any communications will need to be particularly **sensitive to these differences in concern and experiences**. Further work is recommended with these groups to understand how best to design services that meet their needs.

The analysis also explored other differences between groups, such as those based on gender, age and deprivation. Whilst there were some small differences between groups, the data did not show any consistent themes.

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## Programme next steps

The findings from this survey will be disseminated widely for services to consider, respond to and apply in the context of their individual services.

In addition, the Joint Programme will use the findings to inform further patient and public involvement activities related to **three key areas of service transformation**, identified through extensive stakeholder engagement across the partnership:

- **Virtual access to care**
- **Waiting for treatment and self-management**
- **Long COVID**

Patient and public and engagement research specialists are being commissioned to deliver a range of engagement activities to explore these key areas. Each project will consider the survey findings as part of an initial evidence review to inform the scope of work.

