
CONFERENCE ABSTRACT

Health, Wellbeing and the COVID-19 Pandemic in Scotland: People's Experiences and Priorities for the Future

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Introduction

In response to the COVID-19 pandemic, healthcare services in Scotland were rapidly redesigned; services were paused, staff redeployed and new digital technologies introduced. As we consider how healthcare in Scotland can be remobilised, the “People at the Centre” (PATC) project captured:

- People's experience of healthcare services during the pandemic.
- The impact of the pandemic on people's health and wellbeing.
- People's priorities for the future of healthcare in Scotland.

Theory/ Methods

Between September and December 2020, the PATC project engaged with over 1000 individuals and 100 organisations from across Scotland's 32 local authority areas.

People were able to participate by:

- Attending virtual, round table discussions held nationally, locally and with specific population groups such as people with long term conditions and ethnic minority communities.
- Submitting individual feedback via an online survey, postal survey or one to one interview.
- Sharing a Community Resilience or Health Inequality Challenges and Solutions Case Study

Results:

- People have experienced reduced and disrupted access to healthcare services, with a perceived reduction in person centredness, choice and flexibility.
- Some population groups, such as people with long term conditions, unpaid carers, ethnic minority communities and people who live in Care Homes, have been disproportionately impacted.
- The digital delivery of healthcare services has been welcomed, though face to face appointments are still valued.
- Some healthcare services, such as Urgent Care and Pharmacy, have been commended in their response.
- People, communities and the third sector have mobilised to support local need.
- There has been a significant, negative mental health impact.

Discussions:

People spoke about how risks have been balanced during the pandemic, as services have prioritised the response to COVID-19 over non COVID-19 needs, resulting in people losing access to services crucial to their health and wellbeing. People shared feeling disempowered and uncertain, unsure which services were available to them or how to gain access to the health supports they need.

Conclusions:

People emphasised the importance of choice and flexibility in healthcare services. People want to be communicated to in a clear and inclusive way, be involved in identifying the care they need and receive it in a timely manner.

In order to remobilise its healthcare system effectively, Scotland must involve its people and communities as active and equal partners; informing and shaping services which meet their needs and support them to live well.

Lessons Learned:

Equality Monitoring forms had a higher response rate when shared during an engagement activity, rather than as a follow up.

Limitations:

- Engagement activities were predominantly delivered online, therefore limiting the participation of people unable to access digital technologies.
- This project was time limited, precluding some individuals and organisations from participating.

Suggestions for future research:

How can people be effectively involved in authentic co-creation at times of rapid decision making and redesign?

How can healthcare services use digital technologies to increase equity, choice and flexibility, whilst still supporting those without access or desire to use them?