

June 2020

Keeping our Networks Alive Survey Outcomes

In order to understand the impact of COVID-19 pandemic on engagement activities within the adult health and care environment in Surrey, Surrey County Council and Surrey Heartlands Clinical Commissioning Group asked key stakeholders to complete an online survey which took place between 1 and 19 June 2020.

We hoped to gain some insight into what new methods of engagement have been utilised, what have been the most effective and how organisations might do things differently in the future.

Summary of key findings

We had 51 responses from 56 organisations/services. We asked respondents to define their organisation category:

- Disability 15
 - Health/health condition support 14
 - Voluntary, community, faith 14
 - Surrey County Council 5
 - Local council 5
 - Carers 2
 - Veterans 1
-
- 82% have continued to engage with residents on matters unrelated to COVID-19.
 - 71% replied COVID-19 has had a significant impact on their strategic engagement priorities.
 - 75% of residents/groups/networks have responded positively to the new virtual methods of engagement.
 - 39% feel that the new virtual engagement methods are *as effective or more effective* than traditional methods. However, 27% were unsure.
 - The most popular engagement methods during lockdown were:
 - Zoom
 - Email
 - Telephone
 - Website Information
 - Microsoft Teams.
 - 80% plan to continue with these new virtual engagement methods in the future.
 - 60% plan to hold a mix of virtual and physical meetings moving forward, with 9% changing the frequency of physical meetings.

- 30% introduced additional accessible engagement methods during this period.
- 70% have not introduced additional accessible engagement methods.
- 43% of residents/groups/networks have responded positively to new accessible methods of engagement.
- 29% plan to resume their key consultation and engagement activity within the next three months and 27% are unsure as to when they may be able to resume.
- We asked one question: How do you foresee these changes will impact on your organisation/network's ability to engage with local residents?

Please see all comments received below.

1. With supportive and accessible technology - this could be a benefit to all.
2. Our services are person centred and many of them involve close contact or hands on work. We will move back to these services in line with government and SCC advice. We are planning a gradual return to this work and we are modelling how some specialist assessment work can be carried out virtually.
3. People who have digital access will have their voice heard more often, people who are not digitally enabled will be heard less often - we need to make sure that they do still have a voice. It is going to be a tough task to get the balance right between in-person and virtual. Conversely, we are engaging with people who have been excluded from in-person meetings (eg people who are house/bed bound).
4. Some voices will be heard that were not previously (eg those unable to leave home), some will not be heard (those with no digital skills/access) unless we deliver some meetings in-person.
5. Increased ability due to acceptance of new technology as an enabler not a way of avoiding seeing people or avoiding difficult conversations.
6. We will have to work harder to deliver a hybrid model (to make sure everyone has their voice heard).
7. It will help us expand our reach and impact eg engaging with hard to reach carers.
8. During this period we have introduced a new virtual social programme which has attracted new people into the organisation (particularly younger people) - using this programme as a 'front door', we now have a more representative membership to involve in engagement and consultation activities. Many new people who have been virtually attending were people 'left behind' when meetings ran face-to-face (eg they were house or bed bound).

Unfortunately, there is a significant number of people who are still digitally excluded and these voices will not be heard if all engagement activity is virtual so we need to work to develop a hybrid solution. It is likely that this hybrid solution will increase our reach and ensure we hear the most diverse range of voices, but we must also recognise that we will, at times, be delivering activity twice - one reason for this is because we have found that forums tend to work best if they are all in-person or all-virtual (the quality is much poorer when we try to do both of these in one).

9. Having a blend of physical and virtual will enable:-
 - more customers to attend (once they have IT access and skills), as transport issues will be reduced
 - more meetings to be held quickly if there is a specific topic to be discussed across centres
 - the face-to-face meetings will enable slides to be shown more easily - this could be tricky for our customers in a virtual meeting due to concentration issues.
10. Increased reach but, unless we adopt a hybrid model, some voices will not be heard due to digital exclusion.
11. Our group's aims is to hold regular physical meetings, have on-site face-to-face meetings. Meeting new people, those that assist us have a physical present and bring value to the table. To remove the contact would have a detrimental effect on some of the groups mental health well-being. Even though we have facilitated a well-being people need human contact, to feel a longing, connected as well as valued.
12. Virtual meetings would be effective and more efficient, time constructive; no more trying to find a parking space...
13. It will enable us to reach a wider audience.
14. It depends entirely on the groups we are engaging with. Some will respond very well to virtual engagement eg larger charities and statutory partners whereas some will prefer to move back to face-to-face engagement (eg those without easy access to technology and those requiring more physical support).
15. It will enable us to engage with a wider range of people, particularly people who fall into the hard to reach categories.
16. To make our services more accessible.
17. We are concerned that a percentage of our more vulnerable clients will struggle to access our support and will be put off by the absence of direct face to face support. We are also not likely to be able to provide home visits, which were a growing area of need prior to lockdown. We had previously seen the benefit of a face to face service as it was the preferred method of contact and was most likely to better engage clients in taking action. We do not know, at this stage, what impact it will have not to be able to provide this in the same format.
18. Some older people are able to engage virtually but others not so, we will continue to have a mix of methods.
19. We are able to adapt at the moment and due to the current situation isolated families are appreciating any contact. As lockdown eases further this will not be as effective and home visiting will return.
20. I can attend more meetings without having to drive across to the other side of surrey, and waste time commuting to them.
21. These changes have meant engagement with residents from different groups (eg mutual aid groups). By working with these groups we will also (I hope) have access to these individuals and therefore extend our reach into the community.

22. Printed newsletters may become a thing of the past due to the cost, impacting a vulnerable section of our community (those with no or limited online access/skills). Fundraising events like concerts and golf days with lunches are less likely to be supported. There may be more reliance on online events.
23. Should definitely improve things overall - offers more support for those who previously struggled to access services but will still offer the same service for those who want it.
24. We can offer more ways to engage and also share our experience so more people can adopt ways to engage that work for them.
25. Changes will extend and make more flexible our engagement
26. I think it will enhance what we offer but not replace face to face support completely.
27. It will make us more aware of the need to engage with the community and provide us with new more efficient and effective methods to do so, especially if other groups shift to virtual and online meetings.
28. I see that hopefully we will be able to reach more of our community by engaging in virtual technology. Building a community that people can access from home will expand our reach and allow us to hopefully find those who have been isolated previously.
29. It will make it easier to get eyes on someone newly referred who is not able to attend a face to face when our presence will cause heightened anxiety.
30. Will have to work at it harder and ensure inclusivity. Doesn't work for everyone. Need variety.
31. It is very challenging as many of my volunteers are over 70 years old and are also self-isolating during the pandemic. They are phoning clients and a small team actually makes deliveries to clients eg shopping, prescriptions, hearing aid batteries.
32. I feel that it will be very positive, enabling me to engage with more young carers. I can offer both physical meetings and virtual ones too. It means they can have a choice and work out what suits them. They can work the meetings around their caring responsibilities and other commitments such as school/college etc.
33. Local residents will only engage with things that matter to them. This is emphasised by local groups coming together over COVID-19. New ways of communicating are only as good as the info communicated or the importance of what people want you to hear.
34. Improvement in becoming much more available to a wider audience than previously but it will need to be a mix of physical and virtual particularly because some residents have limited access to or ability to use the technology and becoming entirely virtual would disenfranchise them.
35. There is a concern that the absence of face to face services is impacting on the most vulnerable who are not able to access alternative digital platforms.

36. Possible we will go back to the old way have to wait and see.
37. The users of our service need to feel safe - so changes will be incremental and evaluated as we come out of COVID-19.
38. People on low income will not be able to participate and will suffer discrimination. The after effects of this lockdown will cause more debt and poverty as people will lose their jobs.
39. It will help ensure better communication across the board. It may give a viable option for young people when they leave our programmes. It may support our supported living / buddy services to deliver more.
40. It entirely depends on the extent to which residents continue to embrace virtual methods of engagement. We will respond to the needs and priorities of residents.
41. Be more effective with our time so potentially give us more time to engage with the local residents.
42. By using the various engagement methods available more clients can be seen and supported. Much more flexible to client and professional.
43. These changes will enable us to continue our engagement with stakeholders and perhaps widen our networks for individuals who aren't able to attend meetings. We are looking at developing our skills so that we can more effectively work with zoom, the preferred method for our individuals and stakeholders. It will not completely replace direct meetings especially with people with learning disabilities and carers. We are holding our first people with learning disabilities network on 9th July so will ask them how they feel. Our LD Partnership Board meeting in September will look at the use of digital technology. Discussions around the use of digital technology will help the support of the re-launch of the Local Valuing People Groups in the autumn, which have been on pause due to staffing capacity rather than COVID-19.
44. Until we are completely out of lockdown, we will be unable to provide the same amount of training sessions and/or class sizes as we had previously. We will have a backlog of training needs that will need to be met.
45. Until there is a vaccine we think it will be very difficult for us to organise any further activities.
46. We plan to continue to run our twice daily Zoom sessions with our service users while also offering three one to one sessions in the morning and afternoon from our centre (Monday to Friday) with a view to regular reviews of how we can keep increasing our capacity while making sure we can operate safely keeping within Government COVID-19 safety guidelines.

Insight

The unfortunate circumstances of the pandemic and a lockdown situation has catapulted the use of technology and its adoption for communications and engagement activity and provided a lifeline for social contact for many residents who are shielding and/or isolated.

Organisations large and small have had to learn new skills, acquire and install new technology and move to home working over many months. It is clear that when people find themselves in extraordinary situations such as recent events they can adapt pretty well and there are many examples of how new ways of working have opened up opportunities for organisations and residents.

The survey feedback highlights many positive aspects to engaging remotely and using technology. One common theme is how new people have been engaged who were not known to services or engaging prior to the pandemic. There are repeated examples of the positive impact on individuals and reaching more residents, younger residents and people who use services. The appetite for trialling new technology has heightened significantly.

Moving Forward

We now need to harness this new energy and knowledge and apply it to our engagement functions in the future. The survey has found that virtual engagement has proven popular and effective and will play a key part for organisations in the coming months as we safely emerge from lockdown. At the same time, we are mindful that a significant minority of residents are 'digitally excluded' and we therefore need to be innovative in order to ensure they can make their views known.

During this transition period Surrey County Council and the Surrey Heartlands Integrated Care System will continue to plan and implement critical engagement and consultation functions, taking on board the survey's feedback.

As a system, we are focused on restoration and recovery following the Covid-19 crisis and on ensuring that we are positioned to respond efficiently and effectively to any future outbreaks, should they occur in Surrey.

We shall engage and consult with residents using multiple channels and mechanisms but will need to explore how the most effective technology is available, usable and sustainable for our activities with local residents and stakeholders.

We will aim to hold face to face meetings or events where it is appropriate and safe to do so, following the national guidance.