



# **East Sussex County Council, Adult Social Care & Health**

**Experience during Covid-19 lockdown: What can we  
learn from population groups?**

**Executive Summary**

**October 2021**

# EXECUTIVE SUMMARY

Adult Social Care and Health (ASCH) in East Sussex County Council want to improve how they share information with residents about social care and about Covid-19. Activmob were commissioned to speak to people to understand their experiences during the Covid-19 lockdown periods from March 2020. The aim was to speak to people about:

- Their understanding of ASCH and how it works
- Recent experiences of obtaining information and support during this time
- Reflections on what they would like in the future.

Recommendations will inform how future information is prepared and shared with residents.

## Participants and approach

47 people were recruited to share their experiences in in-depth conversations, informed by a Topic Guide. There was **a particular focus on recruiting older people aged 55+, men, and people from ethnic minority backgrounds**, as they have been highlighted as having been disproportionately impacted by Covid-19. Participants included 10 individuals from a range of front-line organisations in East Sussex.

To recruit participants who are 'not known' currently to East Sussex ASCH, Activmob contacted 40 formal and informal 'assets' (places/ voluntary and community organisations/ individuals/ websites etc) to assist with introductions and possible recruitment to take part. A wide range of methods were used to make contact including online searches, emails, calls, Facebook posts and local group searches.

Informal assets used their own communication methods and channels to reach, engage and encourage people to participate including use of their own social media, closed groups, telephone calls or letters and briefing. Some, in particular those supporting people from ethnic minority backgrounds, shared a short online survey to invite people to share their experiences.

A small number of staff from other local authorities outside of East Sussex also shared their observations and lessons learnt in conversations with researchers.

## Key themes and conclusions

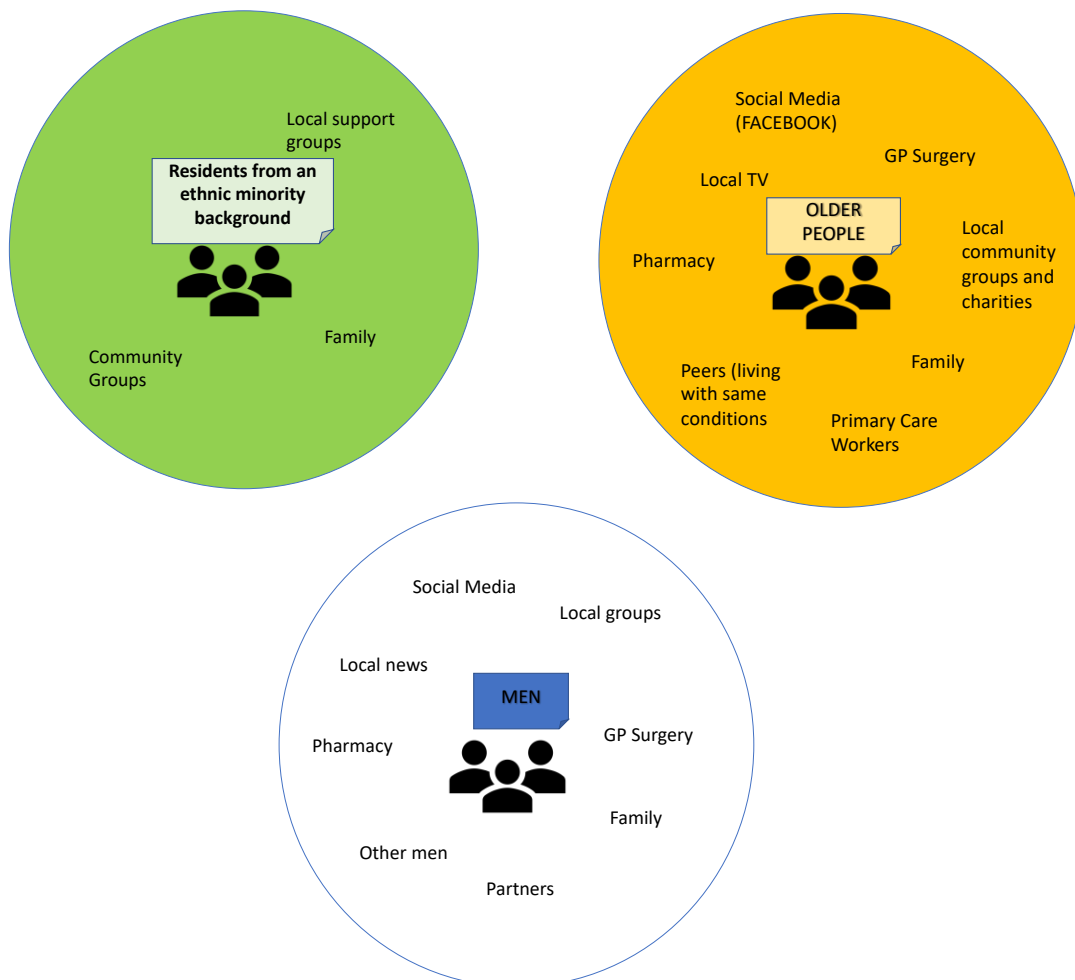
### Residents

The following conclusions are presented from the key themes of the resident interviews:

1. The **level of understanding of what ASCH offer**, how they work, how it is funded, and personal contributions was **low**.

2. **Rehab and re-enablement services** are **recognised** and have **tangible value to people**. People generally believe these services are provided by the NHS and not ASCH.
3. ASCH was **not used or seen as a source of information** regarding the pandemic or local support.
4. During the pandemic people had for the first time started to consider how and where they could get help and support from.
5. Many people were encountering challenges they had never experienced before suggesting the potential of **longer-term mental health and wellbeing issues**.
6. **Local informal assets (people and organisations) stepped up very quickly**, creatively, and pro-actively to meet people's needs.
7. People want to receive general and practical information about support from trusted and local sources such as local shops, pharmacies, and community groups or health professionals where there is an existing relationship.

Participants were asked to think about how they would like to receive general information in the future. The three diagrams below provide a summary of key information and support channels for the priority cohorts.



## Front line workers

From the front-line interviews, key themes included understanding of ASCH and how it works, recent experiences of obtaining information and support, what has worked well, what could improve, and reflections on future communications.

The key conclusions are:

1. All the organisations who took part in the study **adapted quickly** to meet the needs of their local community or client groups.
2. **New individuals and families** were drawing on local support and advice, many for the first time due to the pandemic.
3. Local people and clients have a **low awareness**, understanding and expectations of ASCH.
4. Local organisations and community groups **did not feel informed or connected** with ASCH but saw the potential benefit a stronger relationship could bring for local people.

## Other local authorities

From the interviews with a small number of other local authorities outside of East Sussex, key themes included how they generally communicated with ASCH clients and the wider population before Covid-19, how they adapted, and lessons learnt.

The key lessons learnt are:

1. Setting up a specific online communication hub as soon as possible enabled people to access all information and support in one place.
2. **Partners are key** - specially to ensure clear joint communications.
3. **Do not over rely on digital**. Use other methods such as letter drops, ensuring translation options are provided.
4. There is more empathy from residents about why things must be done in a certain way, and this can enable communication to be more about engagement and not just providing information.
5. General opinion of ASCH has improved over last year, and levels of computer literacy of staff has seen to be improved. Overall, there is a feeling that teams pulled together and made things happen.

## Recommendations

The key recommendations for action are as follows:

1. Capture the **places and people** (including staff) people experiencing health inequalities **trust**.

2. Review internally, the **key messages** the list of trusted assets have regarding ASCH.
3. **Work with trusted assets** as the key direct communication vehicle to communities experiencing health inequalities.
  - Engage to understand what they need to feel confident to mobilise in the future.
  - Review what information they are receiving.
  - Explore creative use of technology.

**Short term recommendations:**

- Develop and implement a programme with trusted assets that adds immediate value to supporting the vulnerable groups identified.
- Cross-reference insights and themes against other recent work undertaken with people from ethnic minority backgrounds.

The full recommendations are set out in detail within the report.