



Healthwatch Lincolnshire

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PE21 8YB

Healthwatch Lincolnshire Patient Experiences for: February 2024

We would like to remind stakeholders that our communications with you emanate from February 2013, when Sir Francis Keogh produced his review of the Mid Staffordshire Enquiry "to Robert Francis. Within this report Keogh cited a number of failings of the system and under the reforms, local Healthwatch is intended to be the local consumer voice with a key role in influencing local services. In both Winterbourne and Mid Staffs the patient voice and the voices of others within the system were not acted upon causing patient suffering and harm, as a local Healthwatch we must continue to raise and challenge the issues raised with us.

This report has been produced by Healthwatch Lincolnshire to highlight the health and care experiences shared with us for the period 1 to 29 February 2024 where 160 comments were raised.

We note that all of these issues are taken at face value and there is sometimes limited detail and context to the feedback, however where a patient or loved one has taken the time to share their views or experiences with us we feel it is important, and indeed we have a duty to share these in the best interest of the health and care system.

- The map points are coloured according to the sentiment
 - Positive - green
 - Negative - red
 - Mixed - orange
 - Neutral - blue
 - Unclear - grey

Prominent areas of interest came under the topics of:

- **Urgent Treatment Centres** - Louth pedestrians unsure where to go at night as lighting very poor, concealed entrance for pedestrians
- Booking allotting times in Urgent Treatment Centres by NHS 111, patient(s) informed should not be given an allotted time
- **Beacon Medical Practice** - lack of appointments, via phone or face to face
- **Horncastle Medical Practice** - AskMyGP being turned off after a few minutes, or all appointments gone on logging on
- **Abbeyview** - unable to get a face to face appointment, new IT system in place, no communication around this to patients
- **NHS Dental** - still an ongoing concern for many patients in Lincolnshire

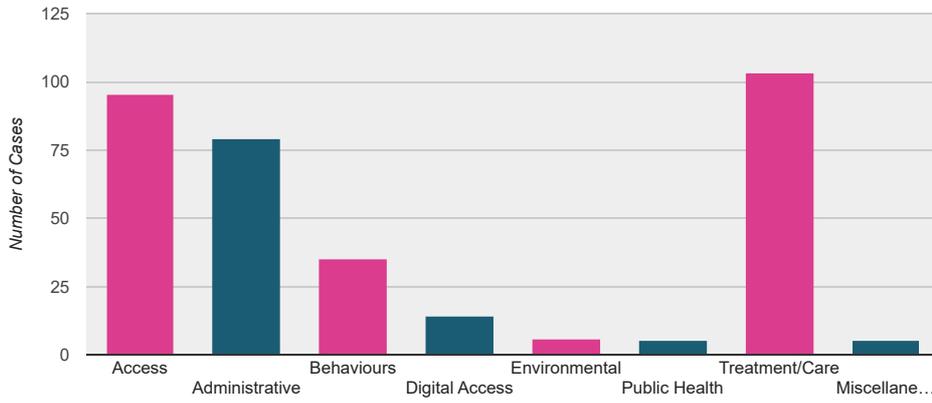
Positive areas:-

- Boots Pharmacy (Skegness)
- Boots Optician (Boston)
- Marisco
- Louth Hospital / ULHT
- Parkside
- Stickney Surgery

Statistics

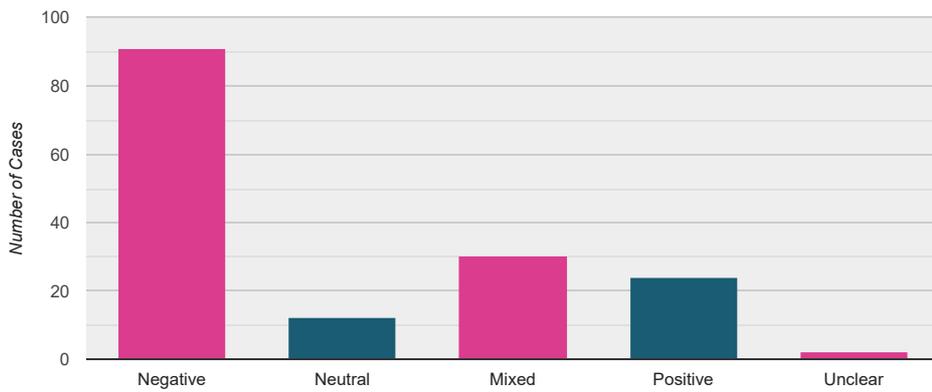
Total cases: 160

Theme Areas



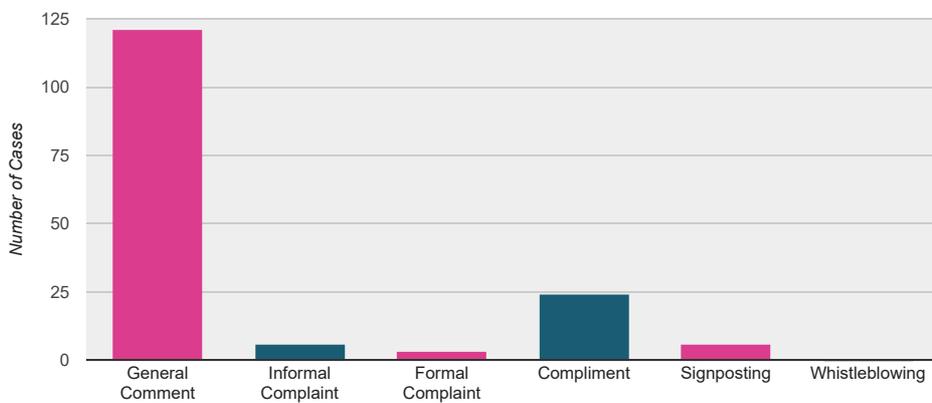
Theme Areas	Cases
Access	95
Administrative	79
Behaviours	35
Digital Access	14
Environmental	6
Public Health	5
Treatment/Care	103
Miscellaneous	5

Sentiments



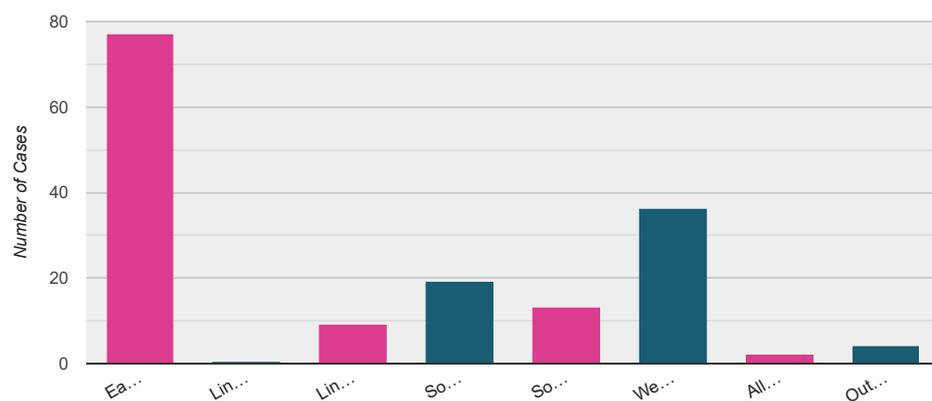
Sentiments	Cases
Negative	91
Neutral	12
Mixed	30
Positive	24
Unclear	2

Case Types



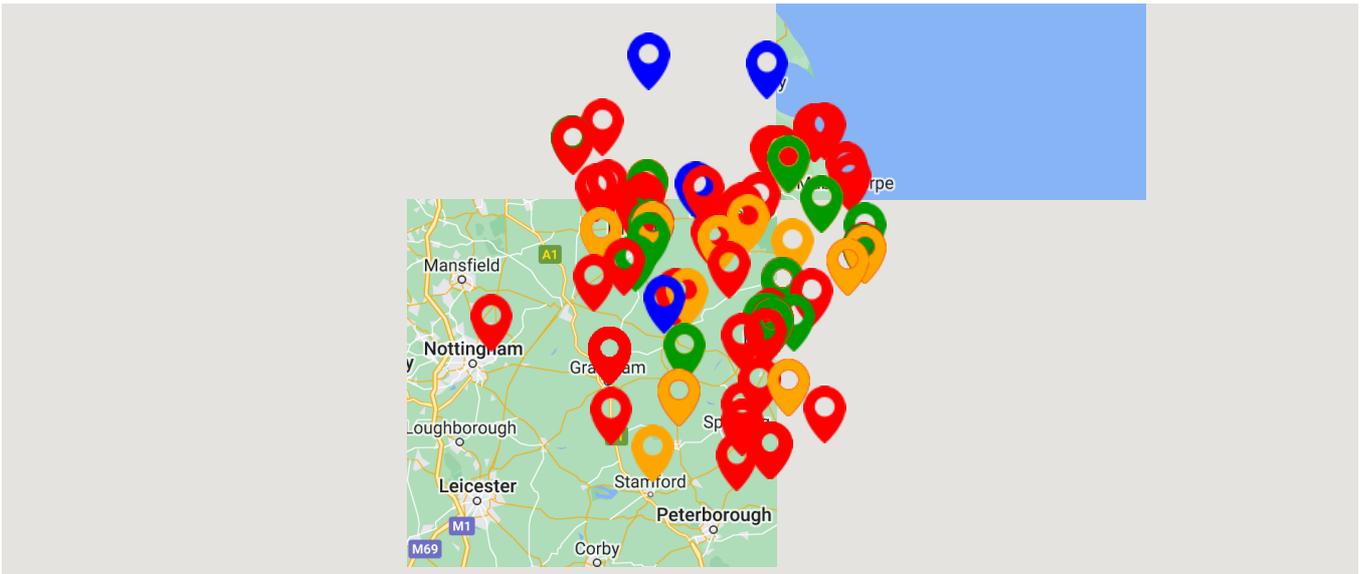
Case Types	Cases
General Comment	121
Informal Complaint	6
Formal Complaint	3
Compliment	24
Signposting	6
Whistleblowing	0

Areas



Areas	Cases
East Locality	77
Lincolnshire CCG	0
Lincolnshire Integrated Care Services (ICS/ICB)	9
South Locality	19
South West Locality	13
West Locality	36
All Areas	2
Out of Area	4

Map



Cases

Community Health Services

Area	Case Details
<p>East Locality x 7</p> <ul style="list-style-type: none"> • 5 x General Comment • 1 x Compliment • 1 x Signposting 	<p>General Comment</p> <ol style="list-style-type: none"> <p>Case 13216 (09-02-2024)</p> <p>PCN: First Coastal</p> <p>Providers: Beacon Medical Practice</p> <p>Patient of Beacon Medical Practice a borderline diabetic, has chronic kidney disease. Notified recently by the GP about this. Concerned that this is another complication to their health and wants to make sure does not want to become diabetic. Has looked on the internet and accessed information about NHS Diabetes prevention. Has been to a group at the Storehouse but only 2 sessions left. Wonders if GP has any services or anything else can do.</p> <p>Notes / Questions</p> <p>Signposted to- Tonic Health, Lincs2advice, Lincolnshire Connect, LiveWell NHS, OneYou</p> <p>Case 13217 (09-02-2024)</p> <p>PCN: First Coastal</p> <p>Providers: Lincolnshire Community Health Services NHS Trust (LCHS)</p> <p>For Information: Lincolnshire Integrated Care Services (ICS/ICB)</p> <p>Patient has lived all their life in Skegness. Feels that there has been a slow reduction in services provided at Skegness Hospital and they have heard that it is closing down. Wards closed, unable to get ecgs or blood tests there. Neighbour tried to get blood tests there this week, unable to. Feels that this is detrimental to the people of Skegness. As nearest other services are at least an hour away.</p>

3. Case 13255 (15-02-2024)

Providers: Lincolnshire Community Health Services NHS Trust (LCHS)

Patient accessed Urgent Treatment Centre, Louth Hospital. Although there is a broad red line in the centre of the road to lead drivers to the Urgent Treatment Centre it is more difficult for pedestrians to follow as lighting is very poor at night. Having almost reached the department there is one lighted entrance visible. This is not the entrance and the department cannot be accessed this way. The entrance, as viewed by a pedestrian, is concealed behind the sign for the department, which faces away from the direction from which pedestrians arrive. Describes experience of care received as very good.

Notes / Questions

No contact details on webform submission.

Healthwatch asks - Can this be looked into please for pedestrians ease of access

Provider Response

NHS property services have advised us that: Regarding Block 45, we have a Capital Plan scheduled for Financial Year 24/25, to deal with re-surfacing and subsequently lining a significant portion of the tarmac area around the Louth Hospital Site - there has been some work on resurfacing conducted adjacent to the UTC but not round the roundabout during last summer. We are also tacking the Main Car Parking area.

There has been a programme of refurbishing lighting for the external lights but again this is incremental.

4. Case 13272 (16-02-2024)

PCN: Boston

Providers: Lincolnshire Community Health Services NHS Trust (LCHS)

Referred to Boston Urgent Treatment Centre by GP. Got there at 3pm, waited for 4 and half hours to see someone. Left the hospital past 11pm. I was a long time at hospital because I had to go onto a ward for some treatment. They were kind to me and gave me food.

Provider Response

Please advise the patient that if they would like any aspects of their care at Boston UTC to be looked into to contact PALS on 0300 123 9553 or LHNT.LincsPALS@nhs.net, and that we are pleased to hear that staff were kind and provided food.

5. Case 13213 (09-02-2024)

PCN: Meridian

Providers: Lincolnshire Integrated Care Services (ICS/ICB), Marsh Medical Practice

I have been given Health Watch Lincolnshire details from the Citizens Advice Bureau they advised that I contact yourselves. I have been in communication with ICB Lincs, LICB Vaccination Programme Team, Lincolnshire Community Health Services, my GP (Marsh Medical Practice, North Somercotes) and CAB with regard to an enquiry that I have raised but it appears that none of these avenues can help me and all lines of communication have come to an end without my enquiry being completed.

I am a patient that is on the 'at risk' list. I understand that I now request free Lateral Flow tests from a participating pharmacy. I understand that the NHS started rolling out letters to 'at risk' patients, from information sent to central NHS database by one's GP. I have never received my letter (other at risk friends I've spoken to have not received one either). The question that I have asked is 'where are the letters generated from'? As I wish to contact them to get a copy of this letter.

ICB told me that many people are asking them the same question, that they have not received a letter and would like to know who to contact. ICB say they do not know where the letters come from and do not know who to contact. Several emails etc going backwards and forwards. ICB say contact GP. GP say nothing to do with them, contact ICB. All communication is at an end, with no answer.

Lincolnshire Community Health Services, told me on 'what does it matter whether you have a COVID test or not, you would still have to go to work should you be positive'

1. I do not work anyway.

2. Why do I have to explain why I want a COVID test.

3. Terrible attitude to my question as to where the NHS letters come from.

Ultimately if I should have had a letter, I would like to get a copy of it. My issue is not which pharmacy to obtain a free one from etc. I understand the procedure there. Can you help?

Notes / Questions

Healthwatch contacted patient to gain consent to share personal information with ICB, LCHS, GP ,vaccination service.

Provider Response

Response from ICB- Thank you for your email. I am currently reviewing this with my colleagues in the ICB, and will come back to you when I have an update.

Further email sent to ICB for response. 20/03/24- Thanks for your email. Claire has been on leave but returns tomorrow, I have just chased our colleagues on this, as I can't see a response, will get back to you asap.

Practice Manager response- Unfortunately, we are unable to shed any light on the origin of where the letters are sent from. It is not something that is generated from Practice level and if we receive any enquiries we would refer them to the ICB as the local commissioner.

17/04/24 ICB response-

Sorry for the delay, I have reviewed with the ICB's vaccination team, and although this does not sit within their remit, they can confirm this information has previously been shared with this patient.

- With regards to the letters that were sent out last year, these were generated nationally by NHS England based on medical coding within GP and hospital records that would identify eligible patients. NHS England stood this service down on 26th June 2023, therefore there is no way to access these letters.
- As you did not receive a letter, you will need to discuss this with either your GP or Hospital Specialist as they will need to confirm eligibility as detailed in the NICE guidance [5 Supporting information on risk factors for progression to severe COVID-19 | Nirmatrelvir plus ritonavir, sotrovimab and tocilizumab for treating COVID-19 | Guidance | NICE](#). The eligibility criteria is different to the previously categorised 'clinically vulnerable' due to this guidance being published last year.
- The [find a pharmacy NHS webpage](#) allows you to look up what treatment and services are provided by specific pharmacies using their postcode. If a pharmacy is signed up, this information should be under 'treatments and services' and then 'screening and test services' and will state 'COVID-19 lateral flow tests (eligible NHS patients)'. The pharmacy may ask you questions about your medical history to confirm you're eligible for free tests. If you have a copy of a letter or email sent to you by the NHS that says you're eligible for COVID-19 treatment, take this with you. Alternatively, a list of medications you are prescribed may help or a recent hospital letter. Further information can be found here [

Compliment

1. Case 13270 (16-02-2024)

Providers: Lincoln County Hospital, Pilgrim Hospital
For Information: Boots Opticians (Boston)

Was referred by Boots Optician and GP first of all to Johnson Hospital they referred me to Boston Pilgrim Hospital Eye Department. Boston then referred me to Lincoln County Hospital where I had an eye operation about 3 weeks ago. I had good care at all of these places.

Provider Response

ULHT response- Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

Signposting

1. Case 13261 (15-02-2024)

Providers: Lincolnshire Special Care Dental Service

I wonder if you can help – a link from LCC’s website brought me to you! I’m a Community Development Officer, working with the Family Hubs in East Lindsey. A parent and toddler group in my area has asked if there is a service where a dentist; or someone from oral health would visit their sessions and speak to parents? I don’t think they mean to look at children’s teeth; but to give advice on routine dental care/tooth brushing and how to get a child registered with a dentist etc. Is there such a thing; and if so, have you any contact details I can pass along?

Notes / Questions

Healthwatch provided contact details for Community Dentistry Service who had given a Powerpoint presentation about children’s oral health in another meeting where they were attending schools etc.

South Locality x 2

- 2 x General Comment

General Comment

1. Case 13283 (19-02-2024)

PCN: South Lincolnshire Rural

Providers: Abbeyview Surgery, Lincolnshire Community Health Services NHS Trust (LCHS), Peterborough and Stamford Hospital

A&E Peterborough Hospital, Spalding clinic(Johnson Hospital), Abbeyview surgery Crowland

On the few occasions I have used the emergency care system the medical aspect has generally been excellent.

On my last visit following an attack by a dog I was seen and assessed very quickly, once I had registered at reception. My wounds were cleaned and anti tetanus injections provided once I again provided my details and I was informed of the risks and an operation that was required.

I was admitted overnight and again had to provide my details! The scheduled operation took place the following morning, as schedule, and I was discharged in the afternoon of the following day. I was told to have the dressing changed every day for the next week or until informed all was ok. I was provided with military quality dressings. On return home my wife noted that my cannula had been left in. A nurse at my local GP removed them and dressed them with disinfectant. My GP was unwilling to change my dressing the following day. I was booked into a small local treatment centre, like a mini hospital. They replaced my dressings but informed me it was not with the level of dressing originally fitted. I was told to "buy" some which I did via my local chemist. They were pretty expensive and had to be replaced daily for a week. I have very little scarring and over all was impressed with the clinical work save for the cannula. The processes of admin were slow and it should not have been necessary to provide all my details 3 times, once obtained it should have travelled with me either electronically or by duplicate paper.

Notes / Questions

No personal details provided

2. Case 13230 (12-02-2024)

PCN: K2 Healthcare Sleaford

Providers: Lincolnshire Community Health Services NHS Trust (LCHS)

Riverdale Clinic - Sleaford

Trying to change appointment for 21st February 2024 due to being in Lincoln Hospital, this is for catheter change may I have some help please.

Notes / Questions

Healthwatch provided a contact number for the Bladder & Bowel service, also PALS

South West Locality x 4

- 4 x General Comment

General Comment

1. Case 13191 (06-02-2024)

Providers: Lincolnshire Community Health Services NHS Trust (LCHS)
For Information: Lincolnshire Integrated Care Services (ICS/ICB)

Grantham Urgent Treatment Centre some confusing messages regarding access to the unit at night are circulating.

Is Walk In possible 24/7 and can patients book slots as an alternative, or, is this their only means of being seen at night?

Notes / Questions

Healthwatch asks - please see questions raised

2. Case 13238 (14-02-2024)

PCN: K2 Healthcare Grantham and Rural

Providers: Lincolnshire Community Health Services NHS Trust (LCHS), St Peters Hill Surgery
St Peters Hill Grantham and Urgent Care at Grantham hospital

GP is extremely hard to contact, have to use AskMyGP service on that morning as no bookable appointments ever. When logging onto the AskMyGP service it is nearly always switched off already as full only 20 minutes after opening. This means that you then cannot book an appointment and have to wait to try again the next day. If you do manage to get through, service is not good. My dependent has mental health issues and the GP advice is just to contact healthy minds. This has months and months of waiting list. Recent call to 111 regarding my other child with a chest infection who had come to the end of their antibiotics at the weekend and chest was no better. I was told by the GP when given them that I MUST get them checked again if by the end of the course they were no better. So called 111 as the weekend. I had to wait 9 and a half hours for a call back from a clinician. I was then booked into Urgent Care for the following day. We had to wait 2hrs at urgent care, not sure what the point of an appointment was. The whole system is a battle.

Notes / Questions

No personal information provided

3. Case 13278 (16-02-2024)

Providers: Lincolnshire Community Health Services NHS Trust (LCHS)

Patient had nasty fall and injured leg, very painful and heard a definite click .Tried to drive but was unable to do this. Leg was very swollen and painful. Patient went to Grantham Urgent Treatment Centre, was seen by clinician, not given x-ray, sent home.

Patient continued to have swollen, painful, leg and unable to weight bear. Went back to Urgent Treatment Centre at Grantham seen by Clinician and found to have fracture in lower leg, strapped up and given follow on treatment in fracture Clinic.

Notes / Questions

No patient details provided

4. Case 13298 (21-02-2024)

PCN: K2 Healthcare Sleaford

Providers: Lincolnshire Community Health Services NHS Trust (LCHS)

I've seen a poster listing events across the county, where people can go to find out more about support for Long COVID. However, if you need a referral you then have to go to your GP. I'm concerned this will fill up GP appointments even more. If you have made the effort to go to the long COVID support day, then can't you get referred from there, or maybe a self referral instead of having to make a GP appointment.

Notes / Questions

No personal details provided.

West Locality x 1

- 1 x General Comment

General Comment

1. Case 13180 (05-02-2024)

Providers: Lincolnshire Community Health Services NHS Trust (LCHS)

Lincoln Urgent Treatment Centre

Went to 111 for advice on minor injury, advised to attend Lincoln County Hospital and booked appointment in. Arrived at allotted time, to be told shouldn't have been allocated appointment as minor injury so would need to wait for a practitioner assessment, this would be several hours. It was obvious just need an X-ray to see if fracture or just tissue damage, why a triage nurse on reception to then wait for a practitioner, to then wait for an X-ray, to then wait for a doctor to look at X-ray. The most inefficient system possible.

Notes / Questions

No details provided

Area	Case Details
<p>East Locality x 48</p> <ul style="list-style-type: none"> • 38 x General Comment • 1 x Formal Complaint • 8 x Compliment • 1 x Signposting 	<p>General Comment</p> <ol style="list-style-type: none"> <p>Case 13257 (15-02-2024)</p> <p>Providers: Alford Dental Care, Integrated Care Board Dental</p> <p>I was a patient when COVID happened I couldn't go as vulnerable and I only ever missed two appointments which I phoned to cancel as was unwell. I also had major surgery as well. I had an emergency appointment for my dentist and I went and was told sorry you haven't been for a while so you are not a patient. I explained but they said sorry I can't give you an appointment and the dentist won't take you back on . Why is that I don't understand, I am disabled I have only ever missed two appointments but rang to cancel.</p> <p>Notes / Questions</p> <p>Healthwatch information- Advised patient to make contact with the Practice Manager at the Dental Practice. If not resolved contact details about how to make a complaint to ICB/ICDB.</p> <p>Case 13216 (09-02-2024)</p> <p>PCN: First Coastal</p> <p>Providers: Beacon Medical Practice</p> <p>Patient of Beacon Medical Practice a borderline diabetic, has chronic kidney disease. Notified recently by the GP about this. Concerned that this is another complication to their health and wants to make sure does not want to become diabetic. Has looked on the internet and accessed information about NHS Diabetes prevention. Has been to a group at the Storehouse but only 2 sessions left. Wonders if GP has any services or anything else can do.</p> <p>Notes / Questions</p> <p>Signposted to- Tonic Health, Lincs2advice, Lincolnshire Connect, LiveWell NHS, OneYou</p> <p>Case 13254 (14-02-2024)</p> <p>PCN: First Coastal</p> <p>Providers: Beacon Medical Practice</p> <p>Patient finding it difficult to get face to face GP appointment , feels unable to explain issues in telephone appointment. Finds that GPs not listening to issues and not helpful. Unable to use online booking service no access to internet or phone with this on. Is dyslexic and finds it difficult to read or write. Has arthritis in feet and knees and does find it difficult to walk uses shopping trolley to help with walking, feels not yet ready for other walking aid. Has had arthritis for the last 4/5 years, difficult to get pain relief that helps from GP. No referral to rheumatology or blood tests, arthritis diagnosed by GP.</p> <p>Did attend jobs fair at Storehouse before talking to Outreach Finding it difficult with benefits as issues with GP not providing fit not to work notes for patient which is affecting benefits received.</p> <p>Notes / Questions</p> <p>Information given and contact details given for CAB Skegness.</p> <p>Contact Practice Manager in first instance to discuss issues at Practice.</p> <p>Case 13330 (27-02-2024)</p> <p>PCN: First Coastal</p> <p>Providers: Beacon Medical Practice</p> <p>Beacon medical practice Skegness, Ingoldmells and Chapel St Leonards</p> <p>Lack of appointments. Reluctance to see patients face to face. Inaccurate records. Poor to non existent communication. No continuity of care. Total lack of confidence from experiences bordering on incompetence.</p> <p>Notes / Questions</p> <p>No patient details provided</p>

5. Case 13295 (20-02-2024)

PCN: Meridian

Providers: East Lindsey Medical Group

I have a chest infection. Myself and my relative both tried phoning the doctors from 8am or before. But after 52 calls still couldn't get in the queue as not enough lines. This was our 4 days of trying. Constant queuing. Finally got through after 9am to be told no appointments and contact Urgent care. Went up to sit and wait at urgent care. When you feel unwell the thought of trying to get any help from the doctors make you feel more stressed and ill. Felt bad to put on the urgent care when it should be a doctor surgery appointment. Was seen within 4hours, got a prescription, that was filled by the chemist promptly. The only bit that met expectations.

Notes / Questions

No patient information provided

6. Case 13304 (22-02-2024)

PCN: Meridian

Providers: East Lindsey Medical Group, Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

Mental health support experience.

Initial contact was GP surgery. Had same day appointment but had told them it was for depression and autism. Saw nurse practitioner who admitted they had to ask mental health practitioner what to ask. They advised me about self referral to Lincolnshire talking therapies. That was 5 months ago. After 1 month I was struggling ,so given sertraline but had to take sick leave soon after due to my mental illness. I'm still on sick leave.

Talking therapies diagnosed generalised anxiety disorder. I was put on waiting list for one to one Cognitive Behaviour (CBT) (there was concern there might also be trauma and autism also present). While waiting for this I was given access to online CBT (silver cloud) without a counsellor. This helped somewhat.

After some appointments with a nurse practitioner, a GP did a repeat prescription check for sertraline (the only contact have had with the GP for mental health,). They were concerned and made me an appointment for the mental health practitioner (MHP). I continued seeing the MHP regularly but got worse, and in December they referred me to the Crisis Team(CRHT) who were excellent with one exception (their psychologist).

The nurses, support workers and psychiatrist were fantastic. It was revealed that I suffered complex trauma and childhood adversity and suggested they would talk to talking therapies and perhaps get me reassessed by Lincolnshire Talking Therapies (LTT)because the talking therapy was very similar to what I was doing with silver cloud. My last but one CRHT appointment was with a psychologist who said I was managing fine and there would be no change to the CBT plan. This triggered me to have a severe episode of distress where I could hardly understand them or speak and felt very suicidal. They eventually managed to get me to ground myself and immediately sent me off to drive home a half hour journey on my own.

Since then I still haven't seen a GP. I've continued seeing the MHP. My mental health has deteriorated. I have constant suicidal thoughts (daily) and have 3 suicide plans which the MHP is aware of. I have 4 times been very close to attempting suicide. The MHP is aware. I have had to contact CRHT once for advice. I have to use Samaritans frequently and SHOUT. I try to use NHS emotional helpline but sometimes give up on hold on the phone after it's been half an hour. This month I had my autism assessment (so only about 6 months wait which I understand is quick) and I am autistic. This month I also started the long awaited CBT only to be discharged and referred to an interface meeting because, as CRHT had already said, until their psychologist disagreed, my anxiety and depression score are too high for that level of intervention to be appropriate, as well as the suicidal ideation. As a result of the interface meeting I am having a phone assessment in 2 weeks with IPBT (integrated place based team) to see if they can help me. I don't think this team have any psychiatrists or psychologists on their team so it looks like I will be having some sort of support without having a diagnosis, despite it being known I have complex trauma.

I am still off work since October. I feel so upset and frustrated that at each stage I have received lower than necessary interventions, wasting time and allowing my mental health to get worse. I have no diagnosis other than the General Anxiety Disorder suggested by Lincolnshire Talking Therapies. My clinical signs and history suggest complex problems but I am after 5 months, unable to work, dangerously near suicide frequently, no diagnosis by a psychiatrist (CRHT say they don't diagnose) and about to have my treatment left in the hands of MHPs and support workers, if they accept me for treatment. I've lost all hope, I've tried everything they've suggested (CBT, meditation, physical exercise, mental stimulation, recovery college sessions, go outdoors in nature). But nothing has helped. My mental health is worse. I now binge watching to prevent me from using alcohol or burning myself to get through this and have 3 suicide plans with the means to do it. I have given up hope and I'm scared.

Notes / Questions

No personal details submitted to enable us to go back to the patient.

7. Case 13334 (28-02-2024)

PCN: Meridian

Providers: East Lindsey Medical Group

Newmarket Rd Louth

I went for my annual check up....but it was the first time since 2019, however my surgery refused to acknowledge that fact

Notes / Questions

No patient information provided

8. Case 13310 (23-02-2024)

Providers: East Midlands Ambulance Service NHS Trust (EMAS), United Lincolnshire Hospitals NHS Trust (ULHT)

After being in bed for 8 days with a UTI (urinary Tract Infection) my 90+ year old relative was deteriorating despite a Doctor visiting and antibiotics. A technician and Paramedic ambulance crew were called by GP in early February and left relative at home. Another crew took them in as emergency the following day, where they had several seizures and had to endure 12 days in hospital. Better access to a GP would no doubt have prevented this awful situation. The hospital staff were very good but understaffed . The whole system is broken from the GP up. Angry & disappointed with what happened !

Notes / Questions

Healthwatch provided information on Hospital PALs; EMAS PALs and ICB information

Provider Response

ULHT response-It is hoped that the author contacted the relevant departments and received a satisfactory response.

9. Case 13273 (16-02-2024)

PCN: Boston

Providers: Greyfriars Surgery

Have to go to GP Surgery every 6 months to have regular blood tests as I am a type 2 diabetic. Apart from these regular appointments , if something else crops up, I don't see anybody. When I ring for an appointment the receptionist will say " tell me your symptoms. I will ask the Doctor." I have a text message saying that they have prescribed me antibiotics. I wish I could see a Doctor.

Notes / Questions

No patient details provided

10. Case 13276 (16-02-2024)

PCN: Boston

Providers: Greyfriars Surgery

Last week I wanted to contact the Surgery. I rang up at 9am and got a recorded message that told me that there were more than 9 people in the queue. I waited one and a quarter hours to get through. Told no appointments left was told that a Doctor would ring me. A Doctor did not ring , so we rang again. A Doctor did ring then, but I felt was rude. It was obvious that they wanted to get the call over as soon as possible. I told the Doctor that I was not happy with the service provided. I have an appointment next week. I have an ongoing problem and I am not happy that I cannot see a Doctor face to face. Very dissatisfied with communication system. Even if you ring up at 8am when the practice opens, you are told that there are 9 in the queue. It is a recorded message. I think that the surgery turn it on and off to please themselves.

11. Case 13219 (09-02-2024)

PCN: First Coastal

Providers: Hawthorn Medical Practice

Individual lives on Blue Anchor caravan site for most of the year was told that they would be unable to register at Hawthorn Medical Practice. Has property and GP registered in Leicester. Does not drive. When needed treatment had to go to the Urgent Treatment Centre, this could have been dealt with at GP Surgery. Discussed Temporary Registration at a GP practice. Will go back to Hawthorn Medical Practice and contact Practice Manager.

Notes / Questions

Signposted to contact Practice Manager in the first instance.

Provider Response

We believe this caravan site to be out of our practice area

12. Case 13187 (05-02-2024)

PCN: East Lindsey

Providers: Horncastle Medical Practice

I was asked by the GP to make an appointment via AskMyGP the following week.

I went online at 0800 when the booking system opened. As I was finishing my request at 0806, as instructed, the appointment system closed as it was full. I was unable to get an appointment. This is the third time in two weeks that this has happened.

Notes / Questions

Healthwatch suggested contacting the Practice Manager

13. Case 13199 (06-02-2024)

PCN: East Lindsey

Providers: Horncastle Medical Practice

I am totally horrified the way people have to go through this AskMyGP system. Both myself and my partner work full time, how can we get an appointment to see the GP we prefer when we can't book a non urgent advanced appointment. We can not take time off work to sit and wait to see if we are successful enough that day to get an appointment ! There should be another way for people that work that pay into the system to get an advantage booking so they can arrange time off work.

Notes / Questions

Healthwatch provided information on Enhanced access and Complaints information provided

14. Case 13208 (07-02-2024)

PCN: East Lindsey

Providers: Horncastle Medical Practice

Patient has had very negative experience in the last 6 months with Horncastle Medical Group Practice. Feels that in the last 6 months care and service provided has got worse. Describes the standard of the GPs and Practice Manager as not good and can't do anything about it. Finds access to GP appointments difficult even if you ring at 08.00am, can't get through, have to have issues written down so that can communicate them. Feels like phone turned off if busy and then switched to online service. No appointments for future dates, no appointments after 6pm because of staff issues. Then signposted to Market Rasen, unable to get there as unable to drive, no bus routes. Works full time in Lincoln. Has had issues with previous misdiagnosis when a scan was misread , Practice said that they made a mistake, patient feels that this is not good enough. Ongoing issues with patients diagnosis of autism disappearing at times from medical records.

Current issues with referral to gastroenterologist at Lincoln County Hospital, following blood test, that was made by a GP that has now retired and now been marked as no further action. Patient has made a complaint to the Practice Manager but they have not responded. Patient also feels that receptionists are blunt and nasty at times. Patient concerned that overheard a meeting between Practice Manager and a patient group saying that practice did not meet standards about phone calls and appointments and online system.

Notes / Questions

Signposted how to make complaint about a GP. LICB feedback centre.

15. Case 13210 (08-02-2024)

PCN: East Lindsey

Providers: Horncastle Medical Practice

Patient wanting to complain about Horncastle Medical Group. They have initiated an AskMyGP service and you can no longer make an appointment to see a Dr. Instead you have to use the AskMyGP service on the day (whether urgent or not!) if you wish to see a Dr.

Patients are told to logon to the system at 8am with their request. By 8:20am the option for consulting a clinician is very often missing from the options available!! Once when I queried this I was told that, allegedly, all the appointments for the day had already gone?? If you try and telephone you are told the same thing, to go online at 8am. For some reason they cannot book an appointment over the telephone. Horncastle is a very big catchment area with more housing resulting in more people. Very often there are only 1 or 2 Drs in the surgery and if there is an emergency there aren't any. In my opinion this new system Horncastle Medical Group have adopted is not fit for purpose and I wish to raise my concerns and complaint.

Notes / Questions

Contact Practice Manager in the first instance to make a complaint. Contact details for ICB to make a complaint.

Provider Response

Response from patient- I have contacted the Practice Manager with regard to my negative experience and they have responded via telephone call where I was able to discuss my concerns. I do agree however that in my opinion the practice as a whole could benefit from much needed improvements and best practice to benefit its patients and provide an acceptable service.

16. Case 13308 (23-02-2024)

PCN: East Lindsey

Providers: Horncastle Medical Practice

When I see the staff at the practice, (Reception staff, doctors, nurse practitioners, nurses) they are excellent. More recently there have been changes to the appointment system. AskMyGP opens at 8am and closes once a certain number of enquiries has been reached. One day, at 8.18 am I was in the middle of a request when the service closed and I was cut off. My hope is that this will improve soon but at the moment it is not an adequate service.

17. Case 13314 (23-02-2024)

PCN: East Lindsey

Providers: Horncastle Medical Practice

Booking appointment. I have a concern re health that has been lasting several weeks. I use "AskMyGP" at 8am but all appointments gone & booking closed (usually the window for booking lasts 6/7minutes). As I work in a nursing home 8am I am usually doing hand over. Hence struggling. I don't feel my condition warrants Urgent Care or A&E.

Notes / Questions

Healthwatch suggested contacting the Practice Manager

18. Case 13182 (05-02-2024)

PCN: East Lindsey

Providers: Integrated Care Board Dental

I can't get an NHS dentist

Notes / Questions

Healthwatch provided NHS 111, NHS Choices and an NHS Dentist stating they were taking on new patients further afield.

19. Case 13193 (06-02-2024)

PCN: Meridian

Providers: Integrated Care Board Dental

I have looked for a NHS dentist for over a year and with a broken tooth went private instead

20. Case 13214 (09-02-2024)

Providers: Integrated Care Board Dental

Getting a dentist.

I rang all the dentists in the Boston, Lincolnshire area yesterday that were supposed to be taking new patients on, only to find none are even though the NHS website say they are. It would be helpful if the websites were up to date.

Notes / Questions

NHS 111 information dentistry. NHS choices information dentists. ICB dental team

21. Case 13194 (06-02-2024)

PCN: Meridian

Providers: James Street Family Practice

I waited 2 weeks for an Health Care Assistant to ring, then the blood test I am due, will take over 1 month to even happen, never mind a result.

22. Case 13209 (07-02-2024)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

A number of prisoners (who are also veterans) from North Sea Camp raised concerns on registering from NHS Services on release from the prison service. Many had not been registered at a local GP Practice for a number of years due to serving their sentences and being moved within the prison service as part of their sentencing - currently now serving the last part of their sentence here in Lincolnshire. Their main concern was the potential of not being able to register and not being accepted by the NHS GP Practice on their release in their local areas. They are concerned about the stigma that being a prisoner might raise and therefore they will have to rely on attending an A&E department for treatment when required.

There were also concerns raised about their medical records, how these will be released and accessed by clinicians in the future. Currently as a prisoner they access NHS services within the community and these appointments are arranged by the prison service and they are escorted to these appointments as and when required as well as accessing medical support at the prison.

If they have been transferred to a prison within Lincolnshire, they have found that they feel that they have to start all over again to access treatment especially for a specialist such as cardiology. They have to wait to be seen by a new team even if they have been on a waiting list elsewhere. This has resulted in tests and diagnostics being repeated as Lincolnshire services do not have access to their results e.g., MRI scans, blood test results, x-rays to name but a few.

Notes / Questions

Signposted to NHS website for up to date information on registering with NHS GP Practice as well as the NHS Yellow Card for people without ID proof to be able to access NHS Services.

23. Case 13213 (09-02-2024)

PCN: Meridian

Providers: Lincolnshire Integrated Care Services (ICS/ICB), Marsh Medical Practice

I have been given Health Watch Lincolnshire details from the Citizens Advice Bureau they advised that I contact yourselves. I have been in communication with ICB Lincs, LICB Vaccination Programme Team, Lincolnshire Community Health Services, my GP (Marsh Medical Practice, North Somercotes) and CAB with regard to an enquiry that I have raised but it appears that none of these avenues can help me and all lines of communication have come to an end without my enquiry being completed.

I am a patient that is on the 'at risk' list. I understand that I now request free Lateral Flow tests from a participating pharmacy. I understand that the NHS started rolling out letters to 'at risk' patients, from information sent to central NHS database by one's GP. I have never received my letter (other at risk friends I've spoken to have not received one either). The question that I have asked is 'where are the letters generated from'? As I wish to contact them to get a copy of this letter.

ICB told me that many people are asking them the same question, that they have not received a letter and would like to know who to contact. ICB say they do not know where the letters come from and do not know who to contact. Several emails etc going backwards and forwards. ICB say contact GP. GP say nothing to do with them, contact ICB. All communication is at an end, with no answer.

Lincolnshire Community Health Services, told me on 'what does it matter whether you have a COVID test or not, you would still have to go to work should you be positive'

1. I do not work anyway.

2. Why do I have to explain why I want a COVID test.

3. Terrible attitude to my question as to where the NHS letters come from.

Ultimately if I should have had a letter, I would like to get a copy of it. My issue is not which pharmacy to obtain a free one from etc. I understand the procedure there. Can you help?

Notes / Questions

Healthwatch contacted patient to gain consent to share personal information with ICB, LCHS, GP ,vaccination service.

Provider Response

Response from ICB- Thank you for your email. I am currently reviewing this with my colleagues in the ICB, and will come back to you when I have an update.

Further email sent to ICB for response. 20/03/24- Thanks for your email. Claire has been on leave but returns tomorrow, I have just chased our colleagues on this, as I can't see a response, will get back to you asap.

Practice Manager response- Unfortunately, we are unable to shed any light on the origin of where the letters are sent from. It is not something that is generated from Practice level and if we receive any enquiries we would refer them to the ICB as the local commissioner.

17/04/24 ICB response-

Sorry for the delay, I have reviewed with the ICB's vaccination team, and although this does not sit within their remit, they can confirm this information has previously been shared with this patient.

- With regards to the letters that were sent out last year, these were generated nationally by NHS England based on medical coding within GP and hospital records that would identify eligible patients. NHS England stood this service down on 26th June 2023, therefore there is no way to access these letters.
- As you did not receive a letter, you will need to discuss this with either your GP or Hospital Specialist as they will need to confirm eligibility as detailed in the NICE guidance [5 Supporting information on risk factors for progression to severe COVID-19 | Nirmatrelvir plus ritonavir, sotrovimab and tocilizumab for treating COVID-19 | Guidance | NICE](#). The eligibility criteria is different to the previously categorised 'clinically vulnerable' due to this guidance being published last year.
- The [find a pharmacy NHS webpage](#) allows you to look up what treatment and services are provided by specific pharmacies using their postcode. If a pharmacy is signed up, this information should be under 'treatments and services' and then 'screening and test services' and will state 'COVID-19 lateral flow tests (eligible NHS patients)'. The pharmacy may ask you questions about your medical history to confirm you're eligible for free tests. If you have a copy of a letter or email sent to you by the NHS that says you're eligible for COVID-19 treatment, take this with you. Alternatively, a list of medications you are prescribed may help or a recent hospital letter. Further information can be found here [[http://Treatments%20for%20COVID-19%20-%20NHS%20\(www.nhs.uk\)Treatments for COVID-19 - NHS \(www.nhs.uk](http://Treatments%20for%20COVID-19%20-%20NHS%20(www.nhs.uk)Treatments for COVID-19 - NHS (www.nhs.uk))]

24. Case 13258 (15-02-2024)

PCN: Solas

Providers: The Old Leake Medical Centre

For Information: Lincolnshire Integrated Care Services (ICS/ICB)

Concerns raised at local community group: Old Leake

The following issues were raised by a number of people within the community who were in attendance:

Access to face to face appointments at the Old Leake GP surgery - there is a real challenge to get through to the surgery. Patients are discouraged to go into the surgery to book appointments and are usually told to phone through or to use the online services. They reported that it is often very difficult to get through on the phone and sometimes this results in a long wait for the call to be answered. Those that are able to use the online services say that often by 8.30 am in the morning the online facility is not working or has been switched off. For those that can use this, once they do get to use it find it straight forward. Some said that they have signed up to the NHS APP and have found this useful to gain access to their medical records and know that they will not use this for urgent answers to concerns.

Questions were asked about what actually are GPs doing in the surgeries as they don't seem to be seeing as many people as they used to face to face.

Many people expressed that they have not been given the option of being seen by someone else at the surgery e.g., nurse appointment

Notes / Questions

Involvement Officer attended a Community Group in Old Leake on 14 Feb 2024 - approximately 60+ people in attendance including local Parish Councillors

25. Case 13289 (19-02-2024)

PCN: Solas

Providers: Pharmacy

For Information: Lincolnshire Integrated Care Services (ICS/ICB)

Concerns raised at local community group: Old Leake. The following issues were raised by a number of people within the community who were in attendance:

Lack of pharmacy in the Old Leake / Wrangle area would this not help the situation? promotion of patients using the pharmacy is great if you can have access to one! Old Leake Surgery has a dispensing service on-site, but would they be able to cope with all the "minor ailments!?"

If patients are being asked to use their Pharmacist for minor conditions, does this information get shared with the GP? Some groups members were concerned that maybe these minor ailments as stand alone conditions are one off, but many might be the signs and symptoms of more serious conditions that might be missed and could result in the person leaving it too long to get treatment for a condition.

Notes / Questions

Involvement Officer attended a Community Group in Old Leake on 14 Feb 2024 - approximately 60+ people in attendance including local Parish Councillors

26. Case 13290 (19-02-2024)

PCN: Solas

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Concerns raised at local community group: Old Leake. The following issues were raised by a number of people within the community who were in attendance:

What is being done about the NHS "time waster" who seem to use so many of the resources and therefore when you are a genuine patient with real needs, it takes so much longer to get to the treatment that you need?

With so much information being put online, the members felt that there was a widening between those that have and those that have not not just an age thing, but access to technology, source of information and access to talking to someone in person, even if that was via a phone? Many people expressed that this is compounding their isolation and therefore creating situations where they are disengaging with services as they felt "what is the point"? They also felt that people who shouted the loudest always appeared to get seen and heard first and little was being done to support the "silent majority".

Lots of confusion over what services were available and how to access them. e.g, Urgent Treatment Centres many thought that this service could only be accessed by being referred by their GP (that causes a barrier as people struggle to get to see a GP) and that it was appointment only.

Members expressed how difficult it was to get a complaint sorted out with so many organisations dealing with it. Why can't there be a one stop shop that you can contact and then you don't have to keep repeating your story over and over. Many had made contact with the MP to raise these issues on their behalf.

Many are concerned that Lincolnshire is not getting enough professionals coming to work here in our county and how is this going to be addressed in the future? What news about the Medical School and recruiting people to come and live and work here.

How is Lincolnshire recovering the monies that our county spend on visitors to our county who use our services? This includes people from within the UK as well as foreign nationals who are not entitled to FREE NHS Treatment. The holiday season is fast approaching and the East Coast attracts a number of people to visit which is welcomed on the one hand to bring funds into our economy but it also increases the impact on local medical and care resources already working under a huge strain.

Notes / Questions

Involvement Officer attended a Community Group in Old Leake on 14 Feb 2024 - approximately 60+ people in attendance including local Parish Councillors

27. Case 13318 (26-02-2024)

PCN: Boston

Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

For Information: Lincolnshire Integrated Care Services (ICS/ICB)

GP services, Dentist, Mental health support

Impossible to get a doctor or dentist appointment in Boston - there are no NHS Adult Dentist practices. Mental Health Care, 5 years still not receiving appropriate help

Notes / Questions

No patient information provided

28. Case 13181 (05-02-2024)

PCN: First Coastal

Providers: Marisco Medical Practice

Marisco - Can't get an appointment, told to ring from 8am then may not get the GP I want

Notes / Questions

Patient informed that if a certain GP is requested appointments may take longer depending on the GP availability

29. Case 13281 (19-02-2024)

PCN: First Coastal

Providers: Marisco Medical Practice

Marisco at Sutton on Sea Lincs, had referred me to Lincoln Hospital for an urgent 2 week review/appointment for possible skin cancer on my back (4 months before I'd been treated for cancer removal on nose). Unable to get a Doctor's appointment by phone or calling into the surgery where I am registered at Mablethorpe Lincs, I had got a bit more forceful and adamantly polite, insisting someone should check me. A nice Nurse at the Sutton on Sea Marisco, 5 mins down the road fitted me in to see them, took photos of my back, where the moles whatever had been bleeding, and sent these by phone somewhere (not sure where)

Notes / Questions

No personal details provided

30. Case 13329 (27-02-2024)

PCN: First Coastal

Providers: Marisco Medical Practice

Parent was registered with Marisco and death certificate provided by Dr, unfortunately all the paperwork was not completed correctly and the Pure Cremations (which is down in Hampshire) is asking for further information before they will go ahead and do a cremation for their parent. This of course is adding to their already heightened stress levels.

Paperwork information that is missing is around parents falls, which I would hope would be on the patient records.

Pure Cremation have contacted the carer again this morning to say until this paperwork is complete, they will not and cannot legally cremate parent, who passed away on 29 January and we are nearly a month after the date.

Carer believes that the Dr is on annual leave, but wasn't too sure, however this has been ongoing for over 3 weeks and having a massive detrimental effect on the carer as they cannot grieve properly until he has been laid to rest.

Notes / Questions

Carer request for Healthwatch to make contact with Practice Manager, no response to date. Carers First going to discuss with Neighbourhood Teams

Provider Response

UPDATE from Carers First 22/4/24 - I have called the person today and they have been very unwell. Parent has finally been laid to rest and their ashes 'came home' 2 weeks ago. Person spoke very highly of the help and support you had given them.

31. Case 13333 (27-02-2024)

PCN: Meridian

Providers: Marsh Medical Practice

The ICB have referred a patient to us as they have been experiencing some small issues, which they hope can be rectified.

About 6 years ago gent had bariatric surgery at Luton & Dunstable Hospital on the NHS. After which they were informed that B12 injections would be required every 3 months for life which they were having, their then GP, due to ongoing symptoms decided that every 2 months B12 injections would be more beneficial to this patient and the symptoms subsided, so it has been ongoing since.

Moving to Lincolnshire 2 years ago, was all going well, but more recently on coming in for their injection was informed by a Nurse that they would wean them off the B12 (supposed to be for life?) and to get out in the sun more! gent asked if read notes (don't have time for that, was the response given!) and B12 was given.

Over the last 6 months or so, gent having difficulties in getting bloods taken for the bariatric clinic (which they require yearly, to ensure the patient is doing well)

This is where there has been some confusion and communication problems -

- booked in at surgery to have done (fasting bloods) Nurse stated couldn't do as needed particular phials, which the surgery do not hold, understandably, so would gent go to Louth - yes of course.
- on arriving at Louth appointment, Nurse refused to do, spoke with their Manager (who would not provide their name to the gent) and said no go back to your GP surgery and the phials will be sent there for tomorrow
- patient booked in at the surgery (Nurse off sick, so another Nurse was allocated) where they stated, I haven't got time for this, phials were sent to the other surgery, so gent was sent back home.

A few days later a letter from the surgery arrived to say zero tolerance due to their behaviour - but no explanation given. Patient is very upset with this, as has done everything they can to get a blood test that the bariatric clinic have requested. Again this is only once a year.

Following day received another letter to say referral to specialist centre for the blood tests - but does not state where, on looking at their medical records - Derby? for a blood test?.

Has asked for Practice Manager to make contact to discuss as very concerned that they have received the first letter and doesn't know what they have done, feels very hurt and has always tried to be polite and totally understands that being abusive is a no no, on any level, so very confused.

Patient would like a face to face meeting to discuss the comments so they can understand, get to the bottom of it and move forward.

Notes / Questions

Patient request to make contact with Practice Manager

Provider Response

I can confirm that we would send a patient a zero tolerance warning following aggressive or abusive behaviour in line with the NHS zero tolerance policy. We do not undertake face to face meetings to discuss zero tolerance issues with patients. As I am sure you can appreciate, this would be potentially confrontational and place staff at risk.

Please also be aware that certain services, such as post bariatric surgery monitoring, are not part of the standard NHS contract and Practice's only provide these supplementary services if they undertake an additional contract (LES) to do so. I can confirm that Marsh does not provide this service and therefore patients are referred elsewhere to receive this ongoing care. B12 injections are provided as clinically indicated and our clinicians are aware that patients who have had bariatric surgery may require lifelong injections. Patients are required to undertake regular blood tests to ensure safe prescribing, in addition to the yearly specialist monitoring.

I can confirm that we will contact the patient again and clarify information previously provided.

UPDATE 8/3/24 - patient still not heard anything from the surgery.

I can confirm that a letter providing further explanation has been sent to the patient which they should have by now. If not, we can provide another copy.

32. Case 13247 (14-02-2024)

PCN: Solas

Providers: Merton Lodge (Alford) GP

Patient finding it difficult to access face to face GP appointments. Finds that telephone appointments are not any good. Does ring at 08.00am for appointment but cannot get through. Does not use the internet. Has had hospital appointments at Boston and Lincoln has been told not eligible for hospital transport. Feels that GP are poor. Reception staff excellent. Would be unlikely to recommend to friends and family. Surroundings clean, comfortable, and accessible.

Notes / Questions

Information given for Community Voluntary car service in Alford/Skegness area. Call Connect Bus service information given.

33. Case 13277 (16-02-2024)

PCN: Boston

Providers: Pilgrim Hospital, The Sidings

Elderly relative was discharged from Pilgrim Hospital Ward 7B just before Christmas. Did not have a paper copy of Discharge letter, prescribed new medication for heart condition. When these tablets had nearly ran out they contacted the GP surgery, got a telephone call back from GP who said that they had not received a Discharge letter from Ward with any information about new medication so unable to prescribe them. Told them to ring Ward for Discharge letter. Relative was very worried about this as running out of this medication so eventually got a face to face appointment. They took the packets of new medication with them, Dr again said no information about medication, relative stated that they needed this medication and not their responsibility to chase discharge letters. New medication added to regular prescription and got them the next day.

Also went to GP for face to face appointment as hearing has deteriorated and current hearing aids not strong enough, finding this distressing as cannot hear anything. Asked to be referred to local Specsavers for NHS audiology assessment of hearing and new digital hearing aids. GP said that they were unable to do this as did not know how to make this referral, and sent them away. Relative was very disappointed and rang the Surgery and asked to speak to the person who deals with referrals in the Surgery. Following this phone call received appointment with Specsavers in a week.

Provider Response

ULHT response- Response from Ward Manager. It is not usual practice to allow a patient to be discharged without a discharge letter having been completed by the parent team, medications checked by two nurses on discharge and a supply of at least a week being supplied on discharge. To discharge a patient home without a discharge letter providing details of all medication, especially new medication would not be deemed as safe practice. Due to recent doctors strikes there have however been a back log of discharge letters still outstanding for which the patient would have had to remain in hospital until such time that the discharge letter could be completed. Realistically there have been delays of weeks to complete discharge letters due to the strikes. There is an immense pressure on providing very sick patients with a hospital in patient stay and to keep patient flow through the hospital. I will look into this incident where one of our patients was allowed to be discharged without a discharge letter and indeed at which date that it was completed in comparison to the date that medications were requested from the GP surgery. Our sincere apology to all concerned for any distress caused by the NHS service and other factors that may have led to this,

34. Case 13183 (05-02-2024)

PCN: Meridian

Providers: Tasburgh Lodge

Challenging to get an appointment no chance over the phone

Notes / Questions

No details provided

35. Case 13215 (09-02-2024)

PCN: Meridian

Providers: Tasburgh Lodge

GP services. Challenging to get an appointment no chance over the phone. Very poor to access help and support needed. Mixed experience of care received.

36. Case 13307 (23-02-2024)

PCN: Meridian

Providers: Tasburgh Lodge

Access to Primary Care is a challenge , using ask my GP is very good, but getting a face to face appointment with a GP is almost impossible. I have not actually seen a GP for over 5 years even though I have experienced several acute respiratory issues . The reception staff can be very offensive , I don't understand why they still wear scrubs and wear masks , customer care is not a skill they seem to have embedded. There are some lovely caring staff but the few challenging staff make communication difficult.

Notes / Questions

Webform submission no contact details.

37. Case 13306 (22-02-2024)

PCN: Solas

Providers: United Lincolnshire Hospitals NHS Trust (ULHT)

For Information: The Old Leake Medical Centre

A patient has contacted Healthwatch as they are having trouble getting results for lung function tests done at Pilgrim over a year ago and a MRI which involved heart studies at Grantham Hospital in October. These are needed by a Consultant that they are seeing at Derby Hospital for weight loss surgery.

Notes / Questions

Patient requested HW contact PALS ULHT and Practice Manager at GP Surgery.

Provider Response

PALS response- Please contact 01205 445584 for the lung function tests and 01522 597929 for the MRI as we are unable to send results.

Update - Getting a phone call from GP this afternoon. Healthwatch in telephone contact with patient telephone numbers given that PALS provided, will discuss further.withh GP.

38. Case 13253 (14-02-2024)

PCN: Solas

Providers: The Surgery Stickney

Please may I make it clear from the start that I am not making a complaint about an individual but the procedure in your surgery that allows this to happen. I am positive that the member of staff's actions were due to their care and empathy in this situation. I saw the surgery nurse practitioner initially mid November 2023. They referred me for 3 appointments, an X-ray, a nerve conduction study and an in surgery MSK appointment.

I was told that when the 3 results were in, they would call me in to discuss the results. I have the NHS app, so knew the results were in the surgery, but I do not know the turn around time from them arriving to being seen by an appropriate person. I phoned and asked for my results and was given a whole morning time slot for the nurse practitioner to phone. This they did, but in the time I walked from the car (Bluetooth) to the house (WiFi), I had missed both calls, both logged on my phones, land and mobile, in the same minute at 08:44. I had little choice but to do school run, but waited in the rest of the morning in case the call was tried again. It was not, so I phoned the surgery and was offered another telephone appointment to give me the test results over 4 weeks later.

I declined as by this time all the test results would have been in and I thought it a better use of everybody's time to just have the appointment to discuss all the tests together. As I mentioned, I have the NHS app, so I knew when all the results were in. It was over Christmas and New Year, so I gave it a few weeks. I had not been contacted to book an appointment, so I phoned the surgery to find out if the results had been read and should I book. The receptionist said that they looked normal. I suggested that from my understanding they were not. They said they would leave a message for the nurse practitioner to see if I needed to see them. As I was cooking dinner, about 5:20, a day or so later, the telephone rang, it was the receptionist. They told me that the Nurse practitioner had said the results were all normal and they didn't need to see me. Again I questioned if the results were normal. This in part as one of the consultant's letters was in 2 paragraphs, the second paragraph started "all the other results were normal". to me, that suggests that the first paragraph contained something that was not normal. Another of the referrals confirmed bursitis, which again I do not believe to be "normal" and the third referral confirmed a bone spur, issues re thumb and osteoarthritis - again which I do not consider to be "normal".

They asked if I wanted to have a telephone appointment with the nurse practitioner who had said everything is normal, and it would be roughly a month before they would have an appointment available. Unless there was a more specific timescale, I cannot avoid school run and was there any point in speaking to someone that had asked someone else to tell me that everything was normal. The receptionist then looked at the tests and told me I had osteoarthritis, that it was common and they had it too. What I needed was to take paracetamol as pain relief and look up the website versus arthritis for tips. My complaint is that this does not appear to be an acceptable way to be diagnosed, medicated and advised. As I initially put, the receptionist was obviously a kind and caring person, who I felt had been left in this position by a system that is most obviously not working. I can find nowhere on online information, either NHS or NICE, that says that when you are diagnosed with arthritis, the receptionist will take on all roles of diagnostics, medicating and in supporting. My concerns are that it is highly likely that this is not an isolated incident, perhaps happening at surgeries across the UK. How much is now slipping through the net?

Notes / Questions

Patient copied Healthwatch into this complaint, original to the Surgery

Formal Complaint

1. Case 13313 (23-02-2024)

PCN: East Lindsey

Providers: Lincolnshire Integrated Care Services (ICS/ICB), The New Coningsby Surgery

Handwritten 17 page letter sent to Healthwatch Lincolnshire. Handwriting difficult to decipher in places. This patient has written to Healthwatch Lincolnshire previously with very similar information. Now requesting that we make a complaint on patients behalf to ICB. Issues and negative experiences go back to 2017. Complex medical, mental health, social problems documented in letter. Patient describes negative experiences with GP and Surgery staff in relation to medical reports in relation to Osteoporosis, pain relief, mobility. Disputes ongoing with Department of Work and Pensions in relation to Disability Living Allowance. Patient asking for another referral to Orthopaedic Consultant from GP but that has not happened to date. Needing pain relief medication , and Vitamin B12 injections. Disputes information on medical records in relation to alcohol use and mental health. Patient states that has written to Victoria Atkins MP and Parliamentary Health Ombudsman. That the Police have also visited them about some of these issues.

Notes / Questions

Healthwatch contacted ICB as requested by patient .

Provider Response

ICB - would write to the patient to gain consent to make contact with the surgery

Compliment

1. Case 13220 (09-02-2024)

PCN: First Coastal

Providers: Beacon Medical Practice

Has recently moved from Nottingham in the last 4 months. Finds GP Practice much better than the one in Nottingham. Finds all staff excellent. No problems with waiting times. Excellent level of care given. Treated with dignity and respect. Felt involved in decisions made about care and everything fully explained. Clean, accessible, comfortable practice. Would be extremely likely to recommend to family and friends.

2. Case 13222 (09-02-2024)

PCN: First Coastal

Providers: Beacon Medical Practice

For Information: East Lincolnshire Area Locality

Has recently moved to the area. Much better than previous GP Practice. All staff friendly and welcoming. Particularly reception staff who are always nice. No problem getting an appointment. Happy with GP and all services. Would highly recommend to a friend or family. Finds in general more activities and warm spaces for the older person in Skegness much easy to access.

3. Case 13270 (16-02-2024)

Providers: Lincoln County Hospital, Pilgrim Hospital

For Information: Boots Opticians (Boston)

Was referred by Boots Optician and GP first of all to Johnson Hospital they referred me to Boston Pilgrim Hospital Eye Department. Boston then referred me to Lincoln County Hospital where I had an eye operation about 3 weeks ago. I had good care at all of these places.

Provider Response

ULHT response- Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

4. Case 13221 (09-02-2024)

PCN: First Coastal

Providers: Boots Pharmacy (Skegness), Pharmacy

Very happy with staff and service received at Boots The Chemist Skegness. No problems encountered with medications.

5. Case 13263 (15-02-2024)

PCN: Boston

Providers: Grantham + District Hospital, Greyfriars Surgery, Lincoln County Hospital, Pilgrim Hospital

Could get an appointment with GP easily and saw Dr face to face. Referred to hospital as had breathing problems, had various tests. Seen at Grantham, Pilgrim and Lincoln Hospitals;. Many tests done and they found lump in my neck. Have had very good care, given information about my condition all along. Very pleased with the care I have received.

Provider Response

Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

6. Case 13311 (23-02-2024)

PCN: First Coastal

Providers: Marisco Medical Practice, United Lincolnshire Hospitals NHS Trust (ULHT)

Louth Hospital; Marisco GP

Two positive experiences shared by patient. First one was finding a breast lump at Christmas. My experience, from speaking to the GP receptionist right through to discharge from the breast surgery team was exemplary. I was treated with such care and understanding by everyone including nurses in clinics, staff in MRI scanners etc, etc. Even if I tried I couldn't find fault.

Second experience was a routine BP check at pharmacy discovered very high BP so the pharmacist referred me back to the GP and within the week I was seen and am now on medication

In my local area so many people moan about the GP service but they have been so good in my experience every time we have needed them.

Notes / Questions

No patient details provided

Provider Response

ULHT response - Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

7. Case 13265 (15-02-2024)

PCN: Boston

Providers: Parkside Surgery, Pilgrim Hospital

Health Professional came to speak to people at Centenary Church Warm Space. I spoke to them to ask if I needed an appointment after speaking to me they told me to ring the Surgery. I spoke to a Dr on the phone and they referred me to hospital for an echocardiogram. But I have been to Parkside for other things, no complaints, feel that I am looked after well. Staff at Cardiology at Pilgrim Hospital were lovely.

Provider Response

ULHT response- Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

8. Case 13271 (16-02-2024)

PCN: Solas

Providers: The Surgery Stickney

I joined this Surgery, about 2 years ago previously down south. I had a general appointment about my heart condition and blood pressure. I am very pleased with this Surgery, because they have sorted out my medication. I have been on inhalers for the last 6 or 7 years, and because of the advice from this Surgery I have been able to come off them. I can always get through to the Surgery, very pleased.

Signposting

1. Case 13299 (21-02-2024)

PCN: East Lindsey

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Patient completed women's health survey and requested information on help with weight loss diet exercise for perimenopause

Notes / Questions

Healthwatch provided One You information or to speak with their GP

Provider Response

Patient update - I'm dealing with it with supplements and gym and exercise and I've joined slimming world so hoping to move forward

Lincolnshire Integrated Care Services (ICS/ICB) x 3

- 3 x General Comment

General Comment

1. Case 13300 (21-02-2024)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Patient completed Menstrual Health Survey and wanting information about menopause when symptoms persist.

2. Case 13252 (14-02-2024)

Providers: Pilgrim Hospital, Vision Express (Boston)

Disability Forum raised

Wheelchair patients finding having assessments at opticians very difficult as they are not able to get close enough to the equipment for the optician to check their eyes (Vision Express Boston and the Eye Clinic at Pilgrim mentioned)

Provider Response

ULHT response - Response from department Sister - We would like to apologise for any difficulties patients have experienced and to reassure you that we are well-equipped to support disabled patients and do all we can to help them and ensure they have the care and treatment they need. Examining patients on a slit lamp is crucial for us to be able to diagnose and treat these patients so that we have all the relevant information in order to provide treatment. We do have a portable slit lamp in the department that the doctors use from time to time for either patients who have disability or young children who do not like the big slit lamp in the department. The information we get with a portable slit lamp is not as comprehensive as the main machine and as such will always try first to accommodate where we can. Please ask patients to not be afraid to raise any concerns or issues with us and to let us know if there is anything we can do differently or any adjustments we could make to assist them during their appointment.

3. Case 13251 (14-02-2024)

Providers: The Sidings

Disability Forum raised

A person being told by their GP that they are "too young" to have a wheelchair and not being given any additional information or support by the GP

Notes / Questions

Healthwatch asks - why would a person be too young?

South Locality x 12

- 11 x General Comment
- 1 x Informal Complaint

General Comment

1. Case 13283 (19-02-2024)

PCN: South Lincolnshire Rural

Providers: Abbeyview Surgery, Lincolnshire Community Health Services NHS Trust (LCHS), Peterborough and Stamford Hospital

A&E Peterborough Hospital, Spalding clinic(Johnson Hospital), Abbeyview surgery Crowland

On the few occasions I have used the emergency care system the medical aspect has generally been excellent.

On my last visit following an attack by a dog I was seen and assessed very quickly, once I had registered at reception. My wounds were cleaned and anti tetanus injections provided once I again provided my details and I was informed of the risks and an operation that was required.

I was admitted overnight and again had to provide my details! The scheduled operation took place the following morning, as schedule, and I was discharged in the afternoon of the following day. I was told to have the dressing changed every day for the next week or until informed all was ok. I was provided with military quality dressings. On return home my wife noted that my cannula had been left in. A nurse at my local GP removed them and dressed them with disinfectant. My GP was unwilling to change my dressing the following day. I was booked into a small local treatment centre, like a mini hospital. They replaced my dressings but informed me it was not with the level of dressing originally fitted. I was told to "buy" some which I did via my local chemist. They were pretty expensive and had to be replaced daily for a week. I have very little scarring and over all was impressed with the clinical work save for the cannula. The processes of admin were slow and it should not have been necessary to provide all my details 3 times, once obtained it should have travelled with me either electronically or by duplicate paper.

Notes / Questions

No personal details provided

2. Case 13317 (26-02-2024)

PCN: South Lincolnshire Rural

Providers: Abbeyview Surgery

Abbey view surgery, Crowland.Can't contact Surgery by phone, long long queues, get cut off repeatedly. Changed computer system now. So that means can't log in to get repeat prescriptions etc .Despite driving to the Surgery there for codes to be given to us. Have now resorted to writing request on paper and putting in their post box. It's totally messed up! I suffer anxiety and this is making me worse as I can't cope with it.

Notes / Questions

Healthwatch suggested contacting the Practice Manager.

3. Case 13320 (26-02-2024)

PCN: South Lincolnshire Rural

Providers: Abbeyview Surgery

Abbey view surgery Crowland - Almost impossible to get face to face appointments

4. Case 13325 (26-02-2024)

PCN: South Lincolnshire Rural

Providers: Abbeyview Surgery

Abbeyview Surgery Crowland. They have recently "moved" to a new IT system at the practice. There has been no communication to patients who use the online services to request repeat prescriptions. After going down to the surgery (I have MS - Multiple Sclerosis, which makes this difficult for me) I was given some codes to access the new portal for this service. The codes did not work and I could not logon. I then went to the surgery a 2nd time to find out about this and was given a second set of codes - again these codes did not work so I could not place an online order for my medication. I have had to now write a letter requesting my medication which I posted through their door over the weekend. (A 3rd trip to the surgery - 30 minute round trip each time) It is impossible to get through to the surgery on the phone so I don't know when I will get my medication. I am running out of medication.

Notes / Questions

Patient request that Healthwatch make contact with the Practice Manager

5. Case 13197 (06-02-2024)

PCN: Spalding

Providers: Beechfield Medical Centre

For Information: NHS 111 Service

My spouse was in a great deal of pain and wanted to talk to someone about increasing their medication to help manage their pain. Spouse spoke to the Surgery at 9.30am who said they were fully booked and spouse was advised to phone 111. They then sent an emergency ambulance. They arrived but of course could not help with medication. This may have been prevented the emergency ambulance from going to an emergency.

Notes / Questions

Healthwatch suggested contacting the Practice Manager.

Healthwatch asks - under these circumstances are pre-bookable appointments available for patients to discuss medications?

6. Case 13226 (12-02-2024)

PCN: South Lincolnshire Rural

Providers: Bourne Galletly Practice Team

Family member recently went to the surgery for travel vaccinations. All vaccinations were free, however there was a charge of £22 for checking medical documents to see what vaccinations had previously been had.

Notes / Questions

Healthwatch suggested putting in writing to the Practice Manager

7. Case 13286 (19-02-2024)

PCN: South Lincolnshire Rural

Providers: Harrington House Care Home Bourne, Lincolnshire County Council - Adult Social Care
For Information: Peterborough and Stamford Hospital

Harrington House Care Home, Bourne, Lincolnshire which was a placement made by the hospital discharging their patient from Peterborough City Hospital.

The strangest thing which happened upon our elderly family member being sent to this care home upon being discharged from hospital was: an employee of the GP practice just up the road rang to inform us a 'respect form' was being done, which included a 'DNR'. None had been done at the hospital, and the care home place was a temporary thing for post-hospital recovery, so doing as formal a thing as a 'DNR' form for someone in active and temporary recovery seems excessive to us. We also couldn't understand why a GP practice up the road was involved at all, and wondered whether our elderly family member had been mistakenly listed as a 'new care home resident' when in fact was only a temporary stayer for 3 or 4 weeks. After googling we further wondered whether the GP Registration had been changed from the home village one, where the person had been registered for decades. We later had it confirmed that the GP Registration had indeed been changed; this was done behind the backs of the family and the person themselves, and without their knowledge or consent. We were told it had only been done as a temporary registration and would revert, but the original GP surgery told us it was in fact a full permanent change which had been done by Bourne. This was in our view a heavy-handed imposition, and it was difficult to get the proper GP Registration put back again to their home village when the person was discharged and needed their medication putting back on the home delivery tray system as it had been before hospital. At first we were told a new registration form had to be filled in, that we'd have to come to GP surgery to do so, 3 or 4 miles away from us, when no such form was done by us when the registration had been forcibly changed in the previous week or so. The original GP surgery did relent in the end and said they'd complete the form, but the person's medication trays have been delayed due to the GP change, which was not of our making and was not our fault, and has left the person with a confusing array of packeted medications not in the dated & timed trays which the risk of confusion was supposed to prevent. We think that GP Registrations should not be changed behind people's backs, and it could have left the person unable to get back on their original GP's books if their numbers were full. We also think that 'Respect Forms' including 'DNR' labels should not be done for people who are not seriously ill and have no condition which might cause them to collapse; being elderly should not be the sole reason to have a 'DNR' imposed upon them.

Notes / Questions

No personal information provided

8. Case 13186 (05-02-2024)

PCN: K2 Healthcare Grantham and Rural

Providers: Integrated Care Board Dental

I can't get an NHS Dentist

Notes / Questions

Healthwatch provided, NHS 111; NHS Choices and an option further afield who stated taking on new NHS Patients

9. Case 13305 (22-02-2024)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

GP & the need for access to a one to one. Locally Gedney Hill and surrounding villages are under stress from getting a face-to-face GP appointment. Suggestions as to a surgery created near to the villages and not using the local roads to surgeries over 6 miles away. The road surfacing as cut access to the Towns and even now we have no access to the A47. roadworks.org shows the roadworks. Can we talk about getting people GP face to face meets and also the future increases in village sizes mean we need a surgery, even if it involves hiring the hall side room & hall a few days of the week, at least those without direct transport can get there. The bookable bus service is not timetabled and no exact time can be made using it.

10. Case 13200 (06-02-2024)

PCN: South Lincolnshire Rural

Providers: Long Sutton Medical Centre

I suffer from agoraphobia and avoidance disorder. I'm autistic and struggle to make phone calls. Therefore I can't make an appointment and been needing one since September. I was told there was no note on re the phone problem! I self manage with the agoraphobia but still don't cope to make phone calls. I run my business online so still don't use the phone, just cant get past it. They were aware at the G P medical centre before and i know it was noted, but the nurse said there wasn't a note on when I last went for a diabetic check.

Notes / Questions

Healthwatch suggested putting in writing to the surgery, or if consent provided Healthwatch would go to the Practice Manager on their behalf

Provider Response

Patient request for Healthwatch to contact Practice Manager

Patient update - I managed to go in yesterday and a private room to discuss with the receptionist. They said they'd now put a marker on the system. I was quite embarrassed to have to discuss it but your prompt reply kicked me into being proactive. Once again thanks.

11. Case 13327 (26-02-2024)

PCN: South Lincolnshire Rural

Providers: Peterborough and Stamford Hospital, The Deepings Practice

The Deeping's Practice, Market Deeping, Lincs. Peterborough District Hospital A&E

I had a deteriorating eye condition which had started mid-November 2023, I had tried to tolerate it by using my usual prescription eye drops. It didn't clear up, I queued at my surgery at 8am on Friday in mid December 23 for an emergency appointment due to red, sore and painful eyes that had been deteriorating due to a flare-up of Sjögren's. I had previously tried to phone but could not get through. Luckily, my spouse was able to take me. All I needed was a prescription for steroid eye drops (which have previously cleared the problem quickly). I had even seen my optician first (and paid) for an eye exam to save a doctor's appointment. All they were able to do was change my glasses for a darker tinted prescription because of my sensitivity to light and give me some eye gel to try). No appointments were available that day so had to go home and wait for phone call which came at 4.15pm. The person I spoke to said they'd tried to call me twice earlier but I didn't answer. That was untrue and I was obviously frustrated with them because my phone was with me all day and no previous calls recorded (yet 2 'failed encounters' show on my medical records. Presumably, these are counted in their monthly figures so therefore very misleading). They could not answer my questions so said they would speak to a GP about eye drops and ring again. They rang back at 5.30pm to say that GP's could not prescribe steroid eye drops. I had wasted a whole day when I could have attended A&E during the day. As it was, I had to go on a very busy Friday night. As I am disabled with other conditions.

I phoned 111 who said they'd booked me an appointment for 9pm. On arrival, reception told me they wished 111 wouldn't tell people that and I just had to wait. After approximately 3 hours I was in agony with my back (Degenerative Disc Disease with Rotational Scoliosis plus Rheumatoid Arthritis, Fibromyalgia, ME/CFS) so I had to go home without even being triaged. I attended again the next day with my electric wheelchair so was more comfortable but even so the wait was extremely painful. At least I was triaged and moved to a quieter corridor to wait for the on-call Ophthalmologist. Unfortunately, my spouse had to leave me to go home to check on our 3 dogs. The Ophthalmologist arrived, pointed at my wheelchair and said, 'can you move that thing? Follow me'. they led me into a room with 3 or 4 small stools on wheels and asked if I could get out of my chair to get over to sit on another stool on wheels, next to them so they could examine my eyes. Having been sitting in the same position for so long, I was very stiff and had to get across the room, bending and holding on to the other stools on wheels. I was not safe. They were huffing, tutting and made it quite clear they were busy, in a hurry and did not want to be there. After a very cursory examination they told me if I had Sjögren's I should be used to my eyes being red, sore and photophobic and should just treat them with my usual drops. They then left. I'm pretty certain I would not have had the same treatment had my spouse been present. I was very angry and upset with my (non)treatment. Even if the doctor had had a long day there was no excuse to treat a patient like that. I was stuck in a side corridor, with no phone signal and unable to open the fire doors from my wheelchair. Luckily, a police officer on the other side of the door heard me and opened the door. With the aid of them and security guards, I was able to manoeuvre through the bodies laying on the waiting room floor, get outside and phone my spouse to come and pick me up.

The only good part about my experience was the kind nurse who moved me into a quieter side corridor. They were so obviously tired and busy because I overheard them say it was the end of their shift but they were kind and cheerful and had empathy.

The consultant I saw was totally the opposite, being disrespectful and rude. Although I think I need a referral to the Eye Clinic (because the only eye I can see with is developing a cataract) I'm worried I might encounter the same person.

It also worries me that things that appear on my medical records, eg 2 x 'failed encounter' are falsely recorded, misleading and are counted in monthly figures. If someone at the surgery called the wrong number, it will be recorded in the surgery records. Those two calls certainly don't appear on my phone records.

Notes / Questions

No patient information provided

Informal Complaint

1. Case 13323 (26-02-2024)

PCN: South Lincolnshire Rural

Providers: Moulton Medical Practice

Moulton medical practice, Moulton, Spalding.

Taken our 15 year old transgender child to speak with their Dr about being referred to Gender identity clinic (fully appreciating there's a long waiting list) asked about the Dr's support in a joint approach of us using private care (researched Gender GP and know that they are used in Lincolnshire with other Dr surgeries) what we asked for was blood tests to be checked through the GP while using Gender GP for testosterone. Dr refused the support and hasn't been supportive in their manner and stated they'd never had the experience with the transgender community and doesn't know what to do!

This has left us and our child without guidance and support. We're nearly a year later and our 16 year has made a serious suicide attempt.

When will the transgender community be supported across the health system!

Notes / Questions

Healthwatch provided information on Practice Manager or ICB complaints. Also some information on transgender support for whole family

Provider Response

This is a complex case, it is being dealt with, we are liaising with the patient and the ICB and NHS England are involved. Will send a copy of the response, which has formulated for the patient's parent, in due course

South West Locality x 3

- 3 x General Comment

General Comment

1. Case 13279 (16-02-2024)

PCN: K2 Healthcare Sleaford

Providers: East Midlands Ambulance Service NHS Trust (EMAS), Lincoln County Hospital, Millview Medical Centre

Patient contacted GP yesterday as swollen painful leg. Seen by Advanced Nurse Practitioner who thought that this might be a deep vein thrombosis, referred for urgent scan at Lincoln County Hospital. Outpatients at Lincoln County Hospital rang patient to say that they have an urgent slot available this afternoon. Patient has no transport did tell Outpatients this, who told them to ring EMAS non urgent transport. They said to the patient they were unable to organise this on the same day of referral. Patient rang the Voluntary car service that they had used in the village unable to take referrals for the same day. Unable to take patients who needed a wheelchair. Patient unable to weight bear as leg swollen and painful, can only walk a few steps with a zimmer frame. Patient needs scan urgently.

Notes / Questions

Information to contact Practice Manager at GP Surgery where diagnosis given. If no adequate resolution ring NHS111 explain that have ? DVT , no transport, painful, swollen, unable to weight bear.

Provider Response

ULHT response. It is hoped that the author spoke to their GP and 111 and received a satisfactory response.

2. Case 13238 (14-02-2024)

PCN: K2 Healthcare Grantham and Rural

Providers: Lincolnshire Community Health Services NHS Trust (LCHS), St Peters Hill Surgery St Peters Hill Grantham and Urgent Care at Grantham hospital

GP is extremely hard to contact, have to use AskMyGP service on that morning as no bookable appointments ever. When logging onto the AskMyGP service it is nearly always switched off already as full only 20 minutes after opening. This means that you then cannot book an appointment and have to wait to try again the next day. If you do manage to get through, service is not good. My dependent has mental health issues and the GP advice is just to contact healthy minds. This has months and months of waiting list. Recent call to 111 regarding my other child with a chest infection who had come to the end of their antibiotics at the weekend and chest was no better. I was told by the GP when given them that I MUST get them checked again if by the end of the course they were no better. So called 111 as the weekend. I had to wait 9 and a half hours for a call back from a clinician. I was then booked into Urgent Care for the following day. We had to wait 2hrs at urgent care, not sure what the point of an appointment was. The whole system is a battle.

Notes / Questions

No personal information provided

3. Case 13190 (06-02-2024)

Providers: Pharmacy

Many councillors in South Kesteven are being approached by patients unable to get their NHS prescriptions fulfilled by local pharmacists.

What drugs are in short supply and what measures are being taken to replace them?

Also relating to pharmacies, can you confirm if it is true there is no longer 24/7 pharmacy cover in Grantham, and if so, what is being done to rectify this?

Notes / Questions

Healthwatch asks - please see questions raised

Provider Response

Response from Community Pharmacy Lincolnshire.

We know that there are many medications in short supply but there is no definitive list available; this is worldwide issue related to the manufacturing of drugs, and in some cases due to a dramatic rise in demand (for example with certain drugs used to manage type 2 diabetes) across the globe. Stock availabilities also change frequently, and different pharmacies may have difficulty obtaining different medications due to factors such as wholesaler access. In most cases, when a medication is not available the pharmacy will do its utmost to obtain supplies, but in some instances the patient will need to contact their GP to ask if an alternative medication can be prescribed.

The Community Pharmacy England (CPE)2023 Pharmacy Pressures Survey found that:

- 92% of pharmacy teams are dealing with medicine supply issues daily, an increase from 67% in the 2022 pressures survey.
- Almost all pharmacy owners (97%) reported significant increases in wholesaler and medicine supply issues.
- And 71% of pharmacy owners reported significant increases in delays in prescriptions being issued.

Pharmacists and their teams are spending disproportionate amounts of time sourcing medicines: in the CPE Pressures Survey 93% of pharmacy owners told us their staff were spending longer than ever before on medicines procurement. Pharmacies sometimes have to deal with deliveries that do not arrive or to manage minimum order surcharges or quotas. These difficult circumstances, which are outside of the pharmacies control, often result in pharmacy staff being on the receiving end of patient frustration, with 84% of pharmacy owners saying they had experienced aggression from patients due to medicine supply issues. When there are supply issues pharmacies also have to spend time explaining the issues and reassuring patients, liaising with prescribers, and in some case putting Serious Shortage Protocols (SSPs) into operation. SSPs can be activated by the Secretary of State as a way of helping to mitigate specific shortages by allowing pharmacies to dispense specific alternatives for patients, and while this is helpful, operationalising them can be complex and time-consuming for pharmacies. Furthermore these SSPs are not in place for all medicines; recent supply issues with medicines used to manage attention deficit hyperactivity disorder (ADHD) could not be subject to an SSP, as most of the affected medicines are controlled drugs.

What is causing medicine supply issues? - Medicines shortages and supply issues can be caused by a variety of factors from manufacturing issues, regulatory problems or distribution issues, to drug recalls, stockpiling or simply increased demand. Multiple drug groups and conditions are affected by supply and pricing issues these include drugs used in diabetes, epilepsy, HRT, and antibiotics used to treat Strep A which experienced a surge in cases at the end of 2022 beginning of 2023. Community Pharmacy England believe wider medicines market problems are being caused by a combination of factors such as Brexit, COVID, war and inflationary pressures. It also seems to be the case that the very low prices of medicines (as driven by effective procurement by pharmacies) in the UK leave our market more susceptible to global market shocks.

The Nuffield Trust considered this in their December 2022 report, noting in particular five causes of issues as: the COVID pandemic, rapidly rising commodity prices, a surge in prescriptions for HRT products, Brexit, and some of the UK's price-setting mechanisms. They conclude: "Unpicking which of these factors may be behind any individual shortage, or any wider spike, is very difficult."

Community Pharmacy England are working with government asking them to take in four key areas:

1. Reform of Serious Shortage Protocols (SSPs)
2. Generic Substitution: Pharmacists should be allowed to supply any equivalent generic medicine against a prescription requesting a brand which may be in short supply
3. Overhaul the concessions system
4. Undertake a strategic review of medicine supply and pricing

We hope the above can help clarify the reasons why your local community pharmacy may have issues obtaining prescription medications, despite significant efforts, and patients may need to go back to your general practitioner to discuss potential changes.

In relation to emergency pharmacy access. The Pharmaceutical Needs Assessment (PNA) considers access requirements for patients to pharmacy services both in and outside of normal working hours, taking into account travel times within a rural county such as Lincolnshire. Based on access and patient demand, the latest PNA did not identify any gaps in the pharmacy provision in the county to

require an out of hours service to be commissioned. Recently due to regulatory changes some previously 100 hour pharmacies have been able to reduce their opening hours to a minimum of 76 hours per week (excluding bank holidays), but there is no requirement for the commissioning of 24-hour pharmacy services. The reduction is due to significant reduction of pharmacy funding over recent years, as well as contractors analysing the patterns for their business; where contractors have reduced hours it's usually because there is very little, if any patient demand at these times and they want to focus their resources in such a way as to support more patients.

West Locality x 18

- 16 x General Comment
- 2 x Compliment

General Comment

1. Case 13303 (22-02-2024)

PCN: APEX

Providers: Birchwood Medical Practice, Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

GP fobs me off with anti-depressants for mental health suggests talking therapies who constantly reject me.

2. Case 13232 (12-02-2024)

PCN: Lincoln Healthcare Partnerships

Providers: Brayford Medical Practice, Lincoln County Hospital

Brayford Medical Practice Lincoln / (neurologist) Lincoln ULHT hospital

I am disabled, I am autistic and ADHD so I struggle to express myself verbally and advocate for myself. I have several chronic health conditions, most are undiagnosed, some are in the referral process. I know I have them from my symptoms and the research I have done on the conditions. My GP wouldn't believe me that I have intracranial hypertension and I had a CSF leak. I'm now in pain every day, I have a disabled 5 year old child. I am the worker in the family as my child's other parent is their carer. I don't know how we will cope financially if the NHS don't help me. Why don't they believe me? I showed the dr video evidence of the CSF leak. The neurologist didn't even listen to me properly and it's hard for me as I've already mentioned. I'm worried it's because I'm a woman and these 2 men are men.

Notes / Questions

No patient information provided

Provider Response

ULHT response -Response from Matron Speciality Medicine - Sorry to hear that you feel that you haven't had a positive experience with Neurology, if you would like to discuss further and receive further support please contact me directly, with contact details and we can discuss further.

3. Case 13284 (19-02-2024)

PCN: Lincoln Healthcare Partnerships

Providers: City Medical Practice (Portland), Lincoln County Hospital

A&E / City Medical GP Practice

Went to Lincoln County Hospital on Christmas Eve. My back had gone into spasm. I struggled to move, breathe and was crying in pain. They gave me morphine and sent me home. Spouse called ambulance Christmas morning as same happened but they wouldn't even look at me because I had been to A&E the day before. Few days later I was wheeled into A&E in a wheelchair as I was still in agony. Gave me painkillers, sent home. Went to sports injury therapist for three sessions at £70 a time. Back easier, but still in pain on one side. Back to doctors and they couldn't understand why they hadn't sent me for a scan or X-ray. GP ordered an X-ray and I had a stress fracture of a rib near my spine. Doc calls me with the results and said there is no treatment will send a prescription for more painkillers. Bye.

Notes / Questions

No personal information provided

Provider Response

ULHT response - Response from Ops service Manager - Thank for your comments. Unfortunately as we have no patient details we are unable to look into this further. However having read the below, I can confirm that this is not the standard of care which we expect to deliver. Please can you provide patient details and consent and we can look into this further and provide a response and feedback to the doctors concerned.

4. Case 13206 (06-02-2024)

PCN: Trent

Providers: Cleveland Surgery

Family member concerned about the care of their parent, has had recurrent Urinary Tract Infections for the past 18 months, given antibiotics several times, has been seen in Scunthorpe Hospital regarding this and only recently informed (by the Hospital) that kidney stones were present and a referral to Urology would be required. Calcium in blood, yet placed on additional calcium medications of ADCAL 4 x daily. Now has been listed for a procedure on neck gland in Sheffield. Incontinence present now as pessary stopped. No medication review during this period. Is currently in severe pain, and is staying with family member as feels to unwell to travel back home. Has already made a formal complaint.

Notes / Questions

Patient request to see if Urology referral had been sent.

Provider Response

ULHT - no referral on system.

Practice - Parent has been seen in Urology last year and discharged. If the symptoms have worsened they need to go on to AskMyGP and put in a request to speak to the GP.

5. Case 13274 (16-02-2024)

PCN: Trent

Providers: Cleveland Surgery

Patient has lost confidence in their GP Surgery following a recent visit to the Doctors for an annual check up as over 75 years old. Felt that they were treated in an abrupt manner by the staff member that was carrying out this appointment. They felt uncomfortable, were not asked to take coat off when weighed, this happened last year, so how would this be correct continuity for their medical records. They quibbled with the patient about where to sit before trying to take their blood pressure. Which made the patient feel anxious, and would not be good before their blood pressure when taken. At this point in the appointment patient felt that it was a waste of time and walked out. When patient rang to rearrange appointment Surgery said that they had tried to ring them, patient disputes this as did not come up on phone. When going to the Surgery for their first flu jab concerned because on record and staff member said that they had flu jab last year.

Notes / Questions

Information given to contact Practice Manager in first instance to resolve issues. ICB feedback Centre information given. Information that can change GP if wishes to do so.

HW contacted Practice Manager as requested by patient.

Provider Response

Practice Managers response- I am sorry the patient has had cause to raise an issue with you. I have looked at the patients notes and their medication was issued on 16th Feb. There was no message sent to me that they would like to speak to me. I will need to look into the issues they have raised and will respond to you when I have spoken to the nurse involved. The nurse only works 2 days per week and is not back until Tuesday.

Patient update - patient running out of medications for blood pressure

Practice - patient needs to raise a order on a 2 week basis until review is completed. Patient informed via online - information shared with the patient.**Practice Manager update-** I have spoken to the nurse who tried to complete an LTC review. The nurse made every effort to encourage them to stay for the appointment, but patient proceeded to exit. Regrettably, as the LTC remains incomplete, the patients medication will continue to be issued every two weeks.

Patient update - Now has prescription sorted out and has bloods organised to be taken at John Coupland Hospital

6. Case 13229 (12-02-2024)

Providers: Treeline Dental Lincoln

For Information: Integrated Care Board Dental

Treeline Dentist, High Street, Lincoln.

My tooth completely broke and fell out of my mouth... I knew that if I got to my dentist quickly, it could be glued back in. They were totally unsympathetic and just said that I had to ring each day and wait for a cancellation.... I asked when my dentist would be available and was told that because of GDPR they couldn't tell me which is absolute nonsense. I couldn't afford the time to just sit and wait and hope for a cancellation, so went to a private dentist and paid £200 for it to be glued back in. I was really distressed but the receptionist was totally disinterested and at the end of the call told me to have a nice day. She had no concept of the distress that losing my front tooth was causing me.

Notes / Questions

No personal information provided

7. Case 13268 (16-02-2024)

Providers: Integrated Care Board Dental

I am unable to find a NHS dentist to register myself and my spouse with, since moving to Lincolnshire at the end of 2022. All dental practices so far have reported on line they are not taking on any NHS patients. I find this ridiculous and frustrating. What would either of us do if we needed urgent dental treatment? If you could advise of a dental practice for new NHS patients please.

Notes / Questions

Information given to ring NHS111 if dental pain and emergency. Link NHS Choices Find A Dentist .

8. Case 13296 (20-02-2024)

PCN: Imp

Providers: Lincolnshire Integrated Care Services (ICS/ICB), Minster Medical Practice

Parent of a 22 year old dependent who is at University in Lincoln, who suffers with depression, anxiety, autistic and doesn't sleep, first time away from home. Has been on Melatonin since the age of 16 as suicidal, this has helped and was originally prescribed by psychiatrist in Surrey, now since moving to University their now GP surgery (Minster Practice), took them off their medications overnight, leaving without, then now weaning off, but no plan as to what then.

Parent and dependent are struggling to get answers - parent commented that if this was done whilst they were on a university non term-time it might be better as they would be at home and not alone and try and work to a plan (if informed what the plan is). Dependent has a social worker who has also contacted the surgery, parent contacted the surgery, no answers are provided.

Parent mentioned the NICE Guidelines - where the surgery responded with - we follow Lincolnshire rules not NICE and won't prescribe the Melatonin after this course has run out.

Feels there is a lack of communication from the surgery. Parent and dependent are now afraid that the suicidal tendencies will reoccur once the medications have stopped. Psychiatrist referral rejected.

Notes / Questions

Parent request for Healthwatch to contact ICB

Provider Response

ICB - Thank you for sharing this concern, I have made contact with parent and will be reviewing this concern with my colleagues.

9. Case 13331 (27-02-2024)

PCN: South Lincoln Healthcare

Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health), The Branston and Heighington Family Practice

Branston Surgery, Lincoln Hospital emergency mental health unit, Lincoln Crisis House

Last year I underwent some severe mental health illness and ended up in crisis. I had been passed from person to person but it was the swift action of my occupational health worker and my regular GP that meant I got the referral I hadn't realise I needed. I ended up in a crisis house for a week after being sent up to the emergency mental health unit. My GP went above and beyond giving me her time and support after I'd received very little support previously. She treated me with respect and kindness as well as sending me to the unit with a written referral as I wasn't in a state to ask for help without this. Following that all of my experiences with the crisis team were positive and supportive and helped get me back on my feet.

Initial referral to Cabourne Court for support wasn't good. The consultant I spoke to didn't listen properly and I felt really uncomfortable which in retrospect led to everything spiralling more. Their contact and miscommunication/lack of communication made what was a difficult time even more challenging.

Notes / Questions

No patient details provided

Provider Response

GP Surgery - Positive experience comments

Mental Health - Mixed experience comments

10. Case 13285 (19-02-2024)

PCN: Imp

Providers: Nettleham Medical Practice

Knew I was ill with a chest infection but was giving a medical practitioner who said I had sinus problems. Not wanting to argue, I went away and tried to self medicate. I became more ill over the next few days. When asking for another appointment and trying to see a doctor this time, their attitude was terrible and once again diagnosed with sinus problems, although a specimen was taken this time, which of course did show a chest infection. Whole waiting for the results I once again asked for an appointment as I was now being sick and having difficulties breathing. I was given an appointment but treated badly by the receptionist ignored by the doctor and eventually left the surgery and not seen. If it was not the fact that my pharmacist believed me and suggested over the counter meds, I would have ended up in hospital. When later receiving a message from the surgery telling me I did have a chest infection and needed antibiotics I checked my file. This file had details written down by the receptionist and the doctor that were not true and I ended up putting a complaint into the surgery. It has been nearly a year since this happened and I now cannot make myself go to the doctors even though I have a long standing illness.

Notes / Questions

No personal information provided

11. Case 13321 (26-02-2024)

PCN: Imp

Providers: Nettleham Medical Practice

Nettleham Medical Practice,

During 2022 I was my parents carer. They were in a wheelchair and suffering with dementia. I herniated a disc in my vertebra and was unable to sit at all. Painful to walking and often I would have to crawl on all fours. I struggled to cope with my mental health at that point and there were some very dark days. I reported to the GP's on a couple of occasions that I needed help both mentally and physically but was ignored. It was only when a dementia nurse checked in with me one day and I told them how I was feeling that they stated I was suffering from "Carers breakdown". The GP's still didn't help but got social services involved and they brought in extra equipment to help me transfer my parent from bed to chair etc. When I look back I realise how close to the edge I became and if that dementia nurse had not phoned that day I wonder if I would have survived. (A family member who lives far away stepped in and paid for an operation on my back in Jan 23).

Notes / Questions

No patient information provided

12. Case 13231 (12-02-2024)

PCN: APEX

Providers: Richmond Medical Centre

Richmond medical centre

Usually staff are very good on triage, only once did they say if you are still on antibiotics Dr won't see you and I just explained that I'd been on them more than once for chest infection plus steroids would they please let the Dr know as I wasn't any better .which they did ..had an appointment that same morning. Took 45 min to get through on phone I avoid Mondays if I can.

Notes / Questions

No patient information provided

13. Case 13337 (28-02-2024)

PCN: APEX

Providers: Richmond Medical Centre

Patient had an MRI done due to neck and spine pain at the end of January. Two weeks later received a text message from surgery, to say bulging disc and a referral to spinal team. Only on the patient checking the NHS App did they read that at the bottom of the report, did it mention accidental find, enlarged thyroid, urgent ultra sound needed. Patient had not been informed of this previously. If they hadn't checked what would have happened? or if a patient had not got access to their medical records would this have been picked up?

Patient contacted the surgery, blood tests needed, these were taken twice at different times, as not enough had been taken. Spoke with a lovely female GP who stated they would put in a 2ww referral. Patient contacted the hospital a few days later, to be informed it had been classed as routine and wouldn't therefore be for a while. Patient spoke with another GP, who stated that they would do it again as urgent but there were new systems and not sure if it would go through, informed patient to check the following day at the hospital.

Patient has checked, and referral is with the hospital. Although felt someone in the surgery should have checked not the patient themselves.

Notes / Questions

Healthwatch provided information on Practice Manager, or ICB and PALs information for the hospital

Provider Response

UPDATE - patient has been to A&E and is now being fast tracked for cancer diagnosis

14. Case 13302 (21-02-2024)

PCN: South Lincoln Healthcare

Providers: The Branston and Heighington Family Practice

Patient is contemplating moving to another GP Practice. Over the past few years their has been a number of concerns, relating to lack of communication. Patient has lost faith and trust in the practice. During COVID surgery had stated they would make a referral to steps to change or social prescribing, patient couldn't quite recall which one, waited 5-6 months and not heard anything, chased with the surgery who stated a referral had not gone in but would do it now. Patient waited another 2 months and chased again, where it was stated that no referral had gone in but would do it now. It was only when speaking with the then Practice Manager that they mentioned to the patient that they could self-refer - which they did straight away, no one had ever mentioned this to them before.

Patient is awaiting a ADHD appointment, has been diagnosed with autism. Referral was put in January 23 and patient not heard anything, informed by the surgery that they would chase as patients aren't allowed to. Still not heard anything.

Patient asked for a referral to One you a few weeks ago, as social prescribers had mentioned this would be a positive thing for them. GP would need to complete the referral as patient wanted to go to a specific place in Lincoln. Patient was informed that it would need signing off by a GP and that they would get it signed off that night, patient felt they needed to chase as with past experience nothing was completed when they said it would be, over the next few days this was the same response as still not signed off, then the GP went on leave. Asked if anyone else could sign it, as only needs to be a clinician not necessarily a GP, so another GP was assigned. a week later patient chased again, where they were informed they would need to come in to sign the form as well and needed some further information, which the patient provided, but why did no-one call them to let them know?

Once form was completed, it was then sent to social prescribers! should go to the address on the form or on website, patient provided this information, now is just waiting to hear from One You.

Patient has also been diagnosed with fibromyalgia, where everything is now classed as this which is causing their health conditions, patient feels that they are not being looked at as a whole, but each condition in silo.

15. Case 13324 (26-02-2024)

PCN: South Lincoln Healthcare

Providers: The Branston and Heighington Family Practice

I am so sorry to bother you again. I'm not sure if you remember I contacted you several times last year regarding my daughters medical records from Branston doctors surgery. Things started to improve but I have hit a brick wall again. Emma Hopkins the previous manager set up a task on my daughters records to send me the records every 12 weeks. That didn't happen and I had to chase it up last time, after a week they did arrive via a nurse I think it was. This time they are late again, I have emailed the surgery and the last person who sent the records and not had a reply in a week. I was wondering if you know the email address of the new manager as I don't have it and haven't been given it.

I feel this is getting silly now, Emma Hopkins had set it up so the secretary would send me them but that hasn't really helped as I'm still having to constantly chase them.

Sorry again to have to come to you, I'm not sure what the best thing regarding this is. I have sent complaints in the past but I never hear back.

Notes / Questions

Patient requested Healthwatch make contact again with the Practice Manager.

Provider Response

I have called and offered proxy access to the parent

Update - Parent contacted Healthwatch again as still not set up and not heard anything

Further update - copies have been sent to the parent.

ICB Response - ICB Quality lead has been in contact with practice manager who advised that they have dealt with the patients query. Patient has practice managers contact details and manager will ensure they have all the information they require as appropriate.

16. Case 13293 (19-02-2024)

PCN: Trent

Providers: Trent Valley Surgery

Trent valley surgery, Saxilby. Although I suspect this practice is commonplace. If there is a logical and understandable reason for it, then if the public knew what it was, that would help, but being asked to be part of something so nonsensical makes it harder for people to comply and causes a great deal of unnecessary anguish and stress, which cannot be good in a health crisis.

I would like to know who the current system of making people call at precisely 8am for an appointment serves? I have no choice but to ring at 8am if I want to see my GP, even if I am happy to wait to be seen next week or even next month!

I feel uncomfortable ringing with a non-emergency problem and getting a same day appointment when I know there will be many who have a genuine and greater need to be seen the same day, but the only choice I have is a same-day appointment. These are understandably in very great demand, so even if I ring at precisely 8am, the seconds it takes to dial often means I will have missed my chance and have to repeat the same call daily. It is difficult for the public to understand who benefits from this system and like me, will assume it's a system designed to discourage people from using the NHS while at the same time, seeing adverts on tv encouraging them to do the opposite!!! Does the NHS want people to check with their GP or not? If they do, then this system has to change.

Notes / Questions

Healthwatch provided Government information

Compliment

	<p>1. Case 13207 (07-02-2024)</p> <p>PCN: South Lincoln Healthcare</p> <p>Providers: Lincoln County Hospital, The Surgery Washingborough</p> <p>I recently had an experience with acid reflux in my stomach and throat. I was taking the drug Omeprazole to combat this. I had been having problems and I was advised by my GP to take a lower dosage than I had been on. At the time my spouse and I had been using our local surgery. We were not happy with the service we had recently been having, so moved to Washingborough Surgery. Where I asked my new surgery to take a look at me, which they did, very promptly, where I was advised to go to hospital to have an endoscopy, just as a precaution. This procedure was carried out successfully and no problems were detected.</p> <p>The point I am making is that from me first visiting my new surgery to having the procedure took about 3 weeks in total. I was amazed by the surgery as to how quickly they were on my case and the hospital appointment followed very quickly. I am just so pleased, happy and reassured that everything was done so quickly. Hats off to the NHS for a very efficient service, in my case anyway. This deserves a big thank you to all concerned. People are quick to criticise and slow to praise, not in my case.</p> <p>Provider Response</p> <p>ULHT response- Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.</p> <p>2. Case 13309 (23-02-2024)</p> <p>PCN: South Lincoln Healthcare</p> <p>Providers: Navenby Cliff Villages Surgery</p> <p>Excellent service provided by the GPs and staff.</p>
<p>Out of Area x 1</p> <ul style="list-style-type: none"> 1 x General Comment 	<p>General Comment</p> <p>1. Case 13204 (06-02-2024)</p> <p>Providers: Out of area</p> <p>Patient is travelling to Cambodia in April of this year and requires travel vaccinations, their surgery are not offering this currently and patient is asking where they can get the vaccines on the NHS in their area.</p> <p>Is there anywhere else offering this on the NHS?</p> <p>Notes / Questions</p> <p>Healthwatch contacted North Lincolnshire Healthwatch to make contact with the patient</p>

Hospital Services

Area	Case Details
<p>East Locality x 23</p> <ul style="list-style-type: none"> 12 x General Comment 11 x Compliment 	<p>General Comment</p>

1. Case 13195 (06-02-2024)

Providers: Lincoln County Hospital
For Information: East Lindsey Medical Group

The following is a very brief summary of catalogue of several months of failures of communication. I have suffered from heart failure since a heart attack 15 years ago. In May last year, my symptoms were worsening. I saw a GP (locum), who fixed a set of tests, to eliminate my heart as the cause of my symptoms. These took 10 weeks to complete, and suggested "urgent cardiac consultation". This did not happen. I followed this up, and had a letter from the Lincoln Heart Centre - "as the patient is asymptomatic, we do not need to see them for 2 years". I made several attempts to get an explanation of this extraordinary letter, but was left with a clear (to me) impression that I was considered to be fussing about nothing. At the end of Nov 23, I made a private appointment with a cardiologist, who changed my drug routine. This has made a big difference to my symptoms and quality of life. (Within a few days of making private appointment, I received an appointment with Lincoln Heart Centre - "as the patient NOW has symptoms"! - their suggestions were exactly the same as those from the private cardiologist. I do not understand how it took 8 months to achieve this change in my drug regimen.

Provider Response

ULHT Response - Do you have any patient details for the following, for investigation please?

Consent gained and information passed onto ULHT

Response - I am sorry that the letters you have received have been confusing and caused you some concern. From our system I can see that you were discharged back to GP 15/8/2016 from cardiology. You were re-referred to cardiology by your GP with a copy of your echo report in June 2023. Professor Alun Roebuck responded to this referral on 17 August 2023 stating that you did not need to be seen but would need a repeat echo in 2 years, this referral was then discharged. Your GP wrote again to Professor Roebuck and Professor Roebuck responded on 9 November 2023, stating that he would see you as your GP had explained that you were symptomatic; Professor Roebuck also referred you to the community heart failure team to look at your medications. Your referral to be seen by Professor Roebuck was cancelled when a copy letter was received from your private appointment in January 2024 which informed us that you had been advised to cancel this as there is not point being seen again.

Unfortunately the wait for NHS appointments is far longer than the we would like. We currently have patients who are waiting 40 weeks to be seen by a cardiology consultant. We are working very hard to streamline our processes and review the description of services for our clinics. The cardiology clinical team are working extra hours to provide extra clinics to reduce the wait for our patients and we are looking at many areas to provide advice to GP colleagues who refer to cardiology to try and alleviate the wait for our patients.

2. Case 13310 (23-02-2024)

Providers: East Midlands Ambulance Service NHS Trust (EMAS), United Lincolnshire Hospitals NHS Trust (ULHT)

After being in bed for 8 days with a UTI (urinary Tract Infection) my 90+ year old relative was deteriorating despite a Doctor visiting and antibiotics. A technician and Paramedic ambulance crew were called by GP in early February and left relative at home. Another crew took them in as emergency the following day, where they had several seizures and had to endure 12 days in hospital. Better access to a GP would no doubt have prevented this awful situation. The hospital staff were very good but understaffed. The whole system is broken from the GP up. Angry & disappointed with what happened!

Notes / Questions

Healthwatch provided information on Hospital PALS; EMAS PALS and ICB information

Provider Response

ULHT response-It is hoped that the author contacted the relevant departments and received a satisfactory response.

3. Case 13224 (12-02-2024)

Providers: Lincoln County Hospital

Patient suffered a stroke last May 2023, was informed on discharge and within the discharge letter that they would be seen in a follow up appointment in 6-8 weeks. Patient left it a while, then made contact with the stroke team, who provided the patient with the Consultants secretaries details and contact number. No response, but a letter did come through the post to say that a telephone consultation would take place last week, at a certain time, patient wrote down all the questions they wanted to raise, but no phone call came. Now doesn't know what to do. Is very thankful of the Stroke ward as they saved the patients life, but the aftercare is needing attention.

Notes / Questions

Healthwatch provided PALS information

Provider Response

ULHT response- It is hoped that the author contacted PALS and received a satisfactory response.

4. Case 13282 (19-02-2024)

PCN: First Coastal

Providers: Lincoln County Hospital

The timing went well with only 10 mins. over appointment time, which was greatly appreciated. Had to sit in the overflow of the snack bar as extremely busy in waiting room. The appointment was for a two week urgent appointment for skin cancer check (again for me) which was excellent. But the staff were making sure to come out of the waiting area and calling for people which was good. Once the care worker called me in though to see the Doctor (who wasn't in the room at that time) she fired questions at me so rapidly that I couldn't cope, and she had to keep ticking boxes then changing the boxes. she said I was so unsure and could I answer the questions correctly without changing my mind. I explained that she was going too fast and that I had two mini strokes in the past, and that I was doing my best and she was confusing me. When the female doctor came in she seemed to take the same attitude as the care worker her assistant, and I felt uncomfortable. It was pointed out that these were Seborrheic Keratoses (I got a pamphlet) and what Doctor had sent me there? giving the distinct impression this was a real time waster of an appointment.

Notes / Questions

No personal details provided

Provider Response

ULHT response - Response from Dermatology Service Manager - Due to the high volume of urgent skin cancer referrals that we receive, the clinics are set up so that the health care assistants bring the patients into the room and complete a short history prior to the review by the dermatology consultant. We apologise that this patient felt rushed and we will feed that back to the team who run the clinic. Response from Matron Dermatology-I'm sorry that this was your experience, I would like you to get in touch directly with some more information if possible so I can get some specifics around this.

5. Case 13290 (19-02-2024)

PCN: Solas

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Concerns raised at local community group: Old Leake. The following issues were raised by a number of people within the community who were in attendance:

What is being done about the NHS "time waster" who seem to use so many of the resources and therefore when you are a genuine patient with real needs, it takes so much longer to get to the treatment that you need?

With so much information being put online, the members felt that there was a widening between those that have and those that have not not just an age thing, but access to technology, source of information and access to talking to someone in person, even if that was via a phone? Many people expressed that this is compounding their isolation and therefore creating situations where they are disengaging with services as they felt "what is the point"? They also felt that people who shouted the loudest always appeared to get seen and heard first and little was being done to support the "silent majority".

Lots of confusion over what services were available and how to access them. e.g. Urgent Treatment Centres many thought that this service could only be accessed by being referred by their GP (that causes a barrier as people struggle to get to see a GP) and that it was appointment only.

Members expressed how difficult it was to get a complaint sorted out with so many organisations dealing with it. Why can't there be a one stop shop that you can contact and then you don't have to keep repeating your story over and over. Many had made contact with the MP to raise these issues on their behalf.

Many are concerned that Lincolnshire is not getting enough professionals coming to work here in our county and how is this going to be addressed in the future? What news about the Medical School and recruiting people to come and live and work here.

How is Lincolnshire recovering the monies that our county spend on visitors to our county who use our services? This includes people from within the UK as well as foreign nationals who are not entitled to FREE NHS Treatment. The holiday season is fast approaching and the East Coast attracts a number of people to visit which is welcomed on the one hand to bring funds into our economy but it also increases the impact on local medical and care resources already working under a huge strain.

Notes / Questions

Involvement Officer attended a Community Group in Old Leake on 14 Feb 2024 - approximately 60+ people in attendance including local Parish Councillors

6. Case 13264 (15-02-2024)

Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health), Pilgrim Hospital
For over a year I have been on a waiting list for the Community Mental Health Team. Had a meeting with my psychiatrist a year ago and put me on waiting list. Also waiting for assessment for ADHD referral 2 years ago. Not happy with the Mental Health Crisis Team they told my friend when they were suicidal to have a cup of tea and a bath. Totally dissatisfied with mental health services in Lincolnshire.

Also waiting for appointment with urologist for MRI result have been waiting since Feb 2023.

Notes / Questions

No contact details provided

Provider Response

ULHT response- Response from Urology Nurse Specialist - unfortunately without patient information I cannot look into this.

7. Case 13256 (15-02-2024)

Providers: Pilgrim Hospital

Patient explained that they were supposed to be part of a heart study via Pilgrim Hospital and is under Derby Hospital for weight loss programme. Patient had a MRI scan done at Grantham Hospital in October / November 2023 and still has not been able to get the results back. The patient does not remember who sent them for the scan. The patient has been in touch with the surgery at Old Leake but they did not have the results on file either. They are finding it challenging to get results as they need these results to be shared with Derby Hospital. They have been waiting for more than 2 years to get an appointment for assessment to get on the waiting list at Derby for the weight reduction programme but this cannot happen until the results of the MRI are released. Derby have already told them that there is a 2 year waiting list once on the list - patient feels that their life is on hold. Is on tablets for their heart and blood pressure and has been told to stay on these until they get the results through. However, when will this happen? This is impacting on their life and is unable to do a number of things to help themselves such as more activities, attending the gym as is concerned about their heart. Would appreciate some help and some answers.

Notes / Questions

Patient contacted would like HW to contact PALS and Practice Manager on their behalf. Verbal consent given to share personal information.

HW contacted PALS and Practice Manager.

8. Case 13267 (16-02-2024)

Providers: Pilgrim Hospital

Hospital outpatients appointments. Having issues due to a possibly critical issue causing problems. Tried to ring the contact numbers supplied with my appointment information for Boston Pilgrim Hospital only to discover that the numbers are not answered. I did ring main switchboard at the hospital only to get cut off twice. Very poor to access help and support needed.

Notes / Questions

No contact details provided

Provider Response

ULHT response- Response from Interim Clinical Service Manager - Please accept my apologies on behalf of ULHT for your poor experience. Unfortunately without the contact telephone numbers provided in your appointment letter it is difficult to provide a comprehensive response, however if you are willing to share the details of your appointment directly with myself or the ULHT PALS team I can investigate further

9. Case 13277 (16-02-2024)

PCN: Boston

Providers: Pilgrim Hospital, The Sidings

Elderly relative was discharged from Pilgrim Hospital Ward 7B just before Christmas. Did not have a paper copy of Discharge letter, prescribed new medication for heart condition. When these tablets had nearly ran out they contacted the GP surgery, got a telephone call back from GP who said that they had not received a Discharge letter from Ward with any information about new medication so unable to prescribe them. Told them to ring Ward for Discharge letter. Relative was very worried about this as running out of this medication so eventually got a face to face appointment. They took the packets of new medication with them , Dr again said no information about medication, relative stated that they needed this medication and not their responsibility to chase discharge letters. New medication added to regular prescription and got them the next day.

Also went to GP for face to face appointment as hearing has deteriorated and current hearing aids not strong enough, finding this distressing as cannot hear anything. Asked to be referred to local Specsavers for NHS audiology assessment of hearing and new digital hearing aids. GP said that they were unable to do this as did not know how to make this referral , and sent them away. Relative was very disappointed and rang the Surgery and asked to speak to the person who deals with referrals in the Surgery. Following this phone call received appointment with Specsavers in a week.

Provider Response

ULHT response- Response from Ward Manager. It is not usual practice to allow a patient to be discharged without a discharge letter having been completed by the parent team, medications checked by two nurses on discharge and a supply of at least a week being supplied on discharge. To discharge a patient home without a discharge letter providing details of all medication, especially new medication would not be deemed as safe practice. Due to recent doctors strikes there have however been a back log of discharge letters still outstanding for which the patient would have had to remain in hospital until such time that the discharge letter could be completed. Realistically there have been delays of weeks to complete discharge letters due to the strikes. There is an immense pressure on providing very sick patients with a hospital in patient stay and to keep patient flow through the hospital. I will look into this incident where one of our patients was allowed to be discharged without a discharge letter and indeed at which date that it was completed in comparison to the date that medications were requested from the GP surgery. Our sincere apology to all concerned for any distress caused by the NHS service and other factors that may have led to this,

10. Case 13280 (19-02-2024)

Providers: Pilgrim Hospital

No compassion, made to sit in crowded waiting area when I'm immunosuppressed.
Had pneumonia? ?Sepsis.

Notes / Questions

No personal information provided

11. Case 13306 (22-02-2024)

PCN: Solas

Providers: United Lincolnshire Hospitals NHS Trust (ULHT)

For Information: The Old Leake Medical Centre

A patient has contacted Healthwatch as they are having trouble getting results for lung function tests done at Pilgrim over a year ago and a MRI which involved heart studies at Grantham Hospital in October. These are needed by a Consultant that they are seeing at Derby Hospital for weight loss surgery.

Notes / Questions

Patient requested HW contact PALS ULHT and Practice Manager at GP Surgery.

Provider Response

PALS response- Please contact 01205 445584 for the lung function tests and 01522 597929 for the MRI as we are unable to send results.

Update - Getting a phone call from GP this afternoon. Healthwatch in telephone contact with patient telephone numbers given that PALS provided, will discuss further.withh GP.

12. Case 13288 (19-02-2024)

PCN: Solas

Providers: United Lincolnshire Hospitals NHS Trust (ULHT)

Concerns raised at local community group: Old Leake. The following issues were raised by a number of people within the community who were in attendance:

Long waits in A&E at Hospital - many described having to wait in excess of 12+ hours recently and describe the "waiting area" like a war zone. Too many people in such a small space and very long waits for medical advice once they had been triaged.

Patient expressed that they were told by a phone consultation that it sounded like they had shingles and that they needed to make their way to A&E at Boston. Patient was feeling very unwell, a neighbour took them to the hospital where they waited more than 15 hours in the waiting room after being triaged. Felt very poorly and very little monitoring of their condition.

Members expressed how many unnecessary people were using the A&E department inappropriately. (mention made of the number of "foreigners queue jumping" and being seen seen before local people). Many drunks coming in and causing issues for the other patients and the staff on a regular basis - what is being done about it.

Why are all services being located in Lincoln Hospital and not being distributed evenly across the county and using all the resources?

How are the Trusts recruiting and retaining staff in Lincolnshire? How is this being addressed especially with the rise in the number of older people within the county?

Notes / Questions

Involvement Officer attended a Community Group in Old Leake on 14 Feb 2024 - approximately 60+ people in attendance including local Parish Councillors

Provider Response

ULHT response - Response from Divisional Nurse ED I am so sorry you had a long wait in ED. At the moment the wait for beds is something we are working on as a system to ensure patients are discharged to enable new patients to get beds and treatment as required.

We do distribute care across the country and this is work we undertake with EMAS.

Care in ED is for everyone and although some patients may look drunk I am unable to discuss patients as you will be aware. I am sorry you feel they may get priority.

We are actively recruiting and we have successfully recruited many nurses and healthcare assistants into our department.

Compliment

1. Case 13270 (16-02-2024)

Providers: Lincoln County Hospital, Pilgrim Hospital

For Information: Boots Opticians (Boston)

Was referred by Boots Optician and GP first of all to Johnson Hospital they referred me to Boston Pilgrim Hospital Eye Department. Boston then referred me to Lincoln County Hospital where I had an eye operation about 3 weeks ago. I had good care at all of these places.

Provider Response

ULHT response- Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

2. Case 13275 (16-02-2024)

Providers: East Midlands Ambulance Service NHS Trust (EMAS), Pilgrim Hospital

After a long initial wait for an ambulance, the Paramedics treated my elderly relative with great care and dignity. On arrival at Pilgrim the relative was seen almost immediately, had several tests, and saw a couple of Doctors. The Doctors again were very kind and explained in full the diagnosis and what was going to happen next. A bed was found in a ward within 6 hours of being admitted in Accident and Emergency.

Provider Response

ULHT response-Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

3. Case 13263 (15-02-2024)

PCN: Boston

Providers: Grantham + District Hospital, Greyfriars Surgery, Lincoln County Hospital, Pilgrim Hospital

Could get an appointment with GP easily and saw Dr face to face. Referred to hospital as had breathing problems, had various tests. Seen at Grantham, Pilgrim and Lincoln Hospitals;. Many tests done and they found lump in my neck. Have had very good care, given information about my condition all along. Very pleased with the care I have received.

Provider Response

Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

4. Case 13322 (26-02-2024)

Providers: Lincoln County Hospital

Routine mammogram Skegness Hospital followed by outpatient at Lincoln breast unit

Routine mammogram, staff were very competent, kind and caring, I was recalled within two weeks and attended Lincoln breast unit as an outpatient. I had two biopsy's and DCIS (Ductal carcinoma in situ) was confirmed. I attended Lincoln hospital for an operation as a day case followed by radiotherapy. All the staff I came into contact with made me feel I was the only person they were caring for, they have a special way of caring for patients. my questions were answered and the nurse made sure I understood every word of their answer. All the team at Lincoln breast unit are very special people

Notes / Questions

No patient information provided

5. Case 13266 (16-02-2024)

Providers: Louth County Hospital, United Lincolnshire Hospitals NHS Trust (ULHT)

Good experience of care at Louth County Hospital , Ophthalmology Outpatients. Excellent professional staff minimal wait good communication.

Provider Response

ULHT response- Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

6. Case 13311 (23-02-2024)

PCN: First Coastal

Providers: Marisco Medical Practice, United Lincolnshire Hospitals NHS Trust (ULHT)

Louth Hospital; Marisco GP

Two positive experiences shared by patient. First one was finding a breast lump at Christmas. My experience, from speaking to the GP receptionist right through to discharge from the breast surgery team was exemplary. I was treated with such care and understanding by everyone including nurses in clinics, staff in MRI scanners etc ,etc. Even if I tried I couldn't find fault.

Second experience was a routine BP check at pharmacy discovered very high BP so the pharmacist referred me back to the GP and within the week I was seen and am now on medication

In my local area so many people moan about the GP service but they have been so good in my experience every time we have needed them.

Notes / Questions

No patient details provided

Provider Response

ULHT response - Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

7. Case 13265 (15-02-2024)

PCN: Boston

Providers: Parkside Surgery, Pilgrim Hospital

Health Professional came to speak to people at Centenary Church Warm Space. I spoke to them to ask if I needed an appointment after speaking to me they told me to ring the Surgery. I spoke to a Dr on the phone and they referred me to hospital for an echocardiogram. But I have been to Parkside for other things , no complaints, feel that I am looked after well. Staff at Cardiology at Pilgrim Hospital were lovely.

Provider Response

ULHT response- Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

8. Case 13205 (07-02-2024)

Providers: Pilgrim Hospital

Telephone contact from an individual who is wanting on behalf of a friend to give a compliment to ULHT CEO and Chair. Their friend had an accident in their garden and they broke their leg badly. They had excellent care at Pilgrim Hospital and from the Orthopaedic Surgeon and wanting to compliment the service and Management of ULHT. Finding it difficult to navigate to do this and make contact with senior management.

Notes / Questions

Healthwatch contacted PALS ULHT as requested to get contact information for senior management. Jennie Negus also contacted .

Responses sent to person who enquired.

Provider Response

Response from PALS- I have shared this with the communication team at the trust who have advised us of the link below that people would use to share compliments.

[Feedback form - United Lincolnshire Hospitals \(ulh.nhs.uk\)](https://ulh.nhs.uk/feedback)

The board is listed on the website: [Meet the board - United Lincolnshire Hospitals \(ulh.nhs.uk\)](https://ulh.nhs.uk/meet-the-board)

Response - for this person and any other enquiries people are welcome to leave feedback via our online feedback form here: [Feedback form - United Lincolnshire Hospitals \(ulh.nhs.uk\)](https://ulh.nhs.uk/feedback) this is always forwarded to the relevant person or department. Or they can email Pals@ulh.nhs.uk who can forward to anyone specific; PALS isn't just for concerns and to be honest they love it when they receive compliments to share .In addition the Trust Secretary can be contacted and can pass questions & feedback directly to Board members:

ULHT response-Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

9. Case 13223 (09-02-2024)

Providers: Pilgrim Hospital

Elderly mother had spent a 2 day stay in hospital following collapsing at home. Called an Ambulance who transported to Pilgrim Hospital. Relative very happy with care received at Pilgrim .

Provider Response

ULHT response- Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

10. Case 13248 (14-02-2024)

PCN: Solas

Providers: Pilgrim Hospital

Was an inpatient on 7b Ward following a heart attack that was diagnosed in Accident and Emergency. Care received was good.

11. Case 13262 (15-02-2024)

Providers: Pilgrim Hospital

Patient had a good experience at routine Mammogram appointment at Pilgrim Hospital. Really efficient, was not kept waiting. Got results very quickly. Told that as patient over 70 would need to get in touch with them to arrange another appointment. Wish I was recalled automatically.

Provider Response

Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

Lincolnshire Integrated Care Services (ICS/ICB) x 1

- 1 x General Comment

General Comment

1. Case 13252 (14-02-2024)

Providers: Pilgrim Hospital, Vision Express (Boston)

Disability Forum raised

Wheelchair patients finding having assessments at opticians very difficult as they are not able to get close enough to the equipment for the optician to check their eyes (Vision Express Boston and the Eye Clinic at Pilgrim mentioned)

Provider Response

ULHT response - Response from department Sister - We would like to apologise for any difficulties patients have experienced and to reassure you that we are well-equipped to support disabled patients and do all we can to help them and ensure they have the care and treatment they need. Examining patients on a slit lamp is crucial for us to be able to diagnose and treat these patients so that we have all the relevant information in order to provide treatment. We do have a portable slit lamp in the department that the doctors use from time to time for either patients who have disability or young children who do not like the big slit lamp in the department. The information we get with a portable slit lamp is not as comprehensive as the main machine and as such will always try first to accommodate where we can. Please ask patients to not be afraid to raise any concerns or issues with us and to let us know if there is anything we can do differently or any adjustments we could make to assist them during their appointment.

South Locality x 7

- 7 x General Comment

General Comment

1. Case 13283 (19-02-2024)

PCN: South Lincolnshire Rural

Providers: Abbeyview Surgery, Lincolnshire Community Health Services NHS Trust (LCHS), Peterborough and Stamford Hospital

A&E Peterborough Hospital, Spalding clinic(Johnson Hospital), Abbeyview surgery Crowland

On the few occasions I have used the emergency care system the medical aspect has generally been excellent.

On my last visit following an attack by a dog I was seen and assessed very quickly, once I had registered at reception. My wounds were cleaned and anti tetanus injections provided once I again provided my details and I was informed of the risks and an operation that was required.

I was admitted overnight and again had to provide my details! The scheduled operation took place the following morning, as schedule, and I was discharged in the afternoon of the following day. I was told to have the dressing changed every day for the next week or until informed all was ok. I was provided with military quality dressings. On return home my wife noted that my cannula had been left in. A nurse at my local GP removed them and dressed them with disinfectant. My GP was unwilling to change my dressing the following day. I was booked into a small local treatment centre, like a mini hospital. They replaced my dressings but informed me it was not with the level of dressing originally fitted. I was told to "buy" some which I did via my local chemist. They were pretty expensive and had to be replaced daily for a week. I have very little scarring and over all was impressed with the clinical work save for the cannula. The processes of admin were slow and it should not have been necessary to provide all my details 3 times, once obtained it should have travelled with me either electronically or by duplicate paper.

Notes / Questions

No personal details provided

2. Case 13203 (06-02-2024)

Providers: Lincolnshire County Council - Children Services

My child has been waiting 2.5 years for help. Suspected ADHD and autism. on verge of being kicked out of school. Risk to themself and others. Violent and dis-regulated daily. Verbally abusive And PDA. Causing infections to themself by their needs eg inserting objects into their body and biting their entire nail off. Broke arm in 4 places in August due to impulsive behaviours. On verge of being excluded from school. Complaints get nowhere. Nobody listening

Notes / Questions

Healthwatch provided information on Liaise; Safeguarding; Social Services;

3. Case 13227 (12-02-2024)

PCN: South Lincolnshire Rural

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Diagnosed with Fibromyalgia, also a lump on parathyroid, after a request to check at GP Surgery, a referral to Endocrinology where the Consultant stated that under NICE guidelines that if calcium levels were normal then shouldn't get any symptoms, patient did have symptoms, and discharged. Patient has started taking calcium supplements where they are now feeling much better, sleeping well and pain free.

Notes / Questions

Patient asks - If a patient is diagnosed with Fibromyalgia are their parathyroid levels checked as a matter of course? blood tests etc

4. Case 13246 (14-02-2024)

Providers: Peterborough and Stamford Hospital

Stroke tests at Peterborough City Hospital

Had a stroke just before Xmas due to a bleed on the brain, couldn't have tests while I was an inpatient as Jnr Dr's strike was on. Had MRI and cardiology tests in January, still waiting for results. This is seriously impacting on my mental health as I don't know what caused the bleed and whether it could happen again. The nurses were very good when I was in, support from stroke team has been good, feedback from Consultant poor

Notes / Questions

Unfortunately no patient details provided

5. Case 13327 (26-02-2024)

PCN: South Lincolnshire Rural

Providers: Peterborough and Stamford Hospital, The Deepings Practice

The Deeping's Practice, Market Deeping, Lincs. Peterborough District Hospital A&E

I had a deteriorating eye condition which had started mid-November 2023, I had tried to tolerate it by using my usual prescription eye drops. It didn't clear up, I queued at my surgery at 8am on Friday in mid December 23 for an emergency appointment due to red, sore and painful eyes that had been deteriorating due to a flare-up of Sjögren's. I had previously tried to phone but could not get through. Luckily, my spouse was able to take me. All I needed was a prescription for steroid eye drops (which have previously cleared the problem quickly). I had even seen my optician first (and paid) for an eye exam to save a doctor's appointment. All they were able to do was change my glasses for a darker tinted prescription because of my sensitivity to light and give me some eye gel to try). No appointments were available that day so had to go home and wait for phone call which came at 4.15pm. The person I spoke to said they'd tried to call me twice earlier but I didn't answer. That was untrue and I was obviously frustrated with them because my phone was with me all day and no previous calls recorded (yet 2 'failed encounters' show on my medical records. Presumably, these are counted in their monthly figures so therefore very misleading). They could not answer my questions so said they would speak to a GP about eye drops and ring again. They rang back at 5.30pm to say that GP's could not prescribe steroid eye drops. I had wasted a whole day when I could have attended A&E during the day. As it was, I had to go on a very busy Friday night. As I am disabled with other conditions.

I phoned 111 who said they'd booked me an appointment for 9pm. On arrival, reception told me they wished 111 wouldn't tell people that and I just had to wait. After approximately 3 hours I was in agony with my back (Degenerative Disc Disease with Rotational Scoliosis plus Rheumatoid Arthritis, Fibromyalgia, ME/CFS) so I had to go home without even being triaged. I attended again the next day with my electric wheelchair so was more comfortable but even so the wait was extremely painful. At least I was triaged and moved to a quieter corridor to wait for the on-call Ophthalmologist.

Unfortunately, my spouse had to leave me to go home to check on our 3 dogs. The Ophthalmologist arrived, pointed at my wheelchair and said, 'can you move that thing? Follow me'. they led me into a room with 3 or 4 small stools on wheels and asked if I could get out of my chair to get over to sit on another stool on wheels, next to them so they could examine my eyes. Having been sitting in the same position for so long, I was very stiff and had to get across the room, bending and holding on to the other stools on wheels. I was not safe. They were huffing, tutting and made it quite clear they were busy, in a hurry and did not want to be there. After a very cursory examination they told me if I had Sjögren's I should be used to my eyes being red, sore and photophobic and should just treat them with my usual drops. They then left. I'm pretty certain I would not have had the same treatment had my spouse been present. I was very angry and upset with my (non)treatment. Even if the doctor had had a long day there was no excuse to treat a patient like that. I was stuck in a side corridor, with no phone signal and unable to open the fire doors from my wheelchair. Luckily, a police officer on the other side of the door heard me and opened the door. With the aid of them and security guards, I was able to manoeuvre through the bodies laying on the waiting room floor, get outside and phone my spouse to come and pick me up.

The only good part about my experience was the kind nurse who moved me into a quieter side corridor. They were so obviously tired and busy because I overheard them say it was the end of their shift but they were kind and cheerful and had empathy.

The consultant I saw was totally the opposite, being disrespectful and rude. Although I think I need a referral to the Eye Clinic (because the only eye I can see with is developing a cataract) I'm worried I might encounter the same person.

It also worries me that things that appear on my medical records, eg 2 x 'failed encounter' are falsely recorded, misleading and are counted in monthly figures. If someone at the surgery called the wrong number, it will be recorded in the surgery records. Those two calls certainly don't appear on my phone records.

Notes / Questions

No patient information provided

6. Case 13336 (28-02-2024)

PCN: Four Counties

Providers: Peterborough and Stamford Hospital

My son is 16, has downs syndrome. He has an EHCP so will be transforming and due a review. He has been discharged from Children's Services. Audiology say he's on the list to be seen, but missed 3 years, his ear is damaged but told we just have to wait.

We use Peterborough services but live in Stamford and activities are all miles away. They are at school in Northamptonshire and want to find some social/sports for them nearer to us when home, wants people of similar age to themselves, not going out with me all the time.

Notes / Questions

Healthwatch provided PALs information for the hospital. Also Connect to support, LPCF information

7. Case 13239 (14-02-2024)

Providers: Queen Elizabeth Hospital Kings Lynn

Queen Elizabeth, Kings Lynn. A&E

There 19 hours with my child, the chairs are so worn they are shaped to peoples behinds. They have no support at the back and after sitting in there for 19 hours we could barely walk. It is difficult to sleep sitting upright with nothing behind your upper back.

Staff were brilliant, it was just super busy and my child was not well enough to be elsewhere, they were able to let child lie down for 30 minutes until someone more poorly came in. It was then back to the chairs which are tortuous. For the first few hours I sat on the floor as there was only enough chair space for the sick, not carers. Bear in mind that extremely sick people were sitting in those chairs for hours, there was no comfort.

Notes / Questions

No personal information provided

South West Locality x 5

- 4 x General Comment
- 1 x Compliment

General Comment

1. Case 13279 (16-02-2024)

PCN: K2 Healthcare Sleaford

Providers: East Midlands Ambulance Service NHS Trust (EMAS), Lincoln County Hospital, Millview Medical Centre

Patient contacted GP yesterday as swollen painful leg. Seen by Advanced Nurse Practitioner who thought that this might be a deep vein thrombosis, referred for urgent scan at Lincoln County Hospital. Outpatients at Lincoln County Hospital rang patient to say that they have an urgent slot available this afternoon. Patient has no transport did tell Outpatients this, who told them to ring EMAS non urgent transport. They said to the patient they were unable to organise this on the same day of referral. Patient rang the Voluntary car service that they had used in the village unable to take referrals for the same day. Unable to take patients who needed a wheelchair. Patient unable to weight bear as leg swollen and painful, can only walk a few steps with a zimmer frame. Patient needs scan urgently.

Notes / Questions

Information to contact Practice Manager at GP Surgery where diagnosis given. If no adequate resolution ring NHS111 explain that have ? DVT , no transport, painful, swollen, unable to weight bear.

Provider Response

ULHT response. It is hoped that the author spoke to their GP and 111 and received a satisfactory response.

2. Case 13211 (09-02-2024)

Providers: Grantham + District Hospital

Hospital outpatients' appointments at Grantham Hospital. Referred in the summer of 2023 for assessment for guided pain relief injections, appointment scheduled for early December 2023 was cancelled without explanation. New appointment issued for March 2024 which has already been cancelled again with no reason. New appointment made for May 2024 so will see if it goes ahead.

Provider Response

Response from General Manager Urology, Trauma & Ortho, Ophthalmology -

I can confirm I have checked and this patients appointment still appears to be in place for 21st May. I would like to offer my sincere apologies for any distress previous cancellations may have caused.

3. Case 13228 (12-02-2024)

PCN: K2 Healthcare Sleaford

Providers: Lincoln County Hospital

Nephrology dept. Consultant was very efficient , changed my meds and said she would see me in 4 months but I have not received an appointment to follow up. Waited a year almost for my first appointment in nephrology. Supposed to have another in four months but four months had past and no appointment. I rang and they said I am on a list

Provider Response

Request to release details - HW asked the patient who consented, information shared with ULHT Update - We have booked this patient an apt for Tuesday 16th April at 10:30. We shall send a first class letter to the patient today confirming this appointment.

ULHT response- Appointment booked for 16th April 10.30. Healthwatch aware.

4. Case 13242 (14-02-2024)

PCN: K2 Healthcare Sleaford

Providers: Lincolnshire County Council - Adult Social Care, Pilgrim Hospital

Patient requested information on where to make a complaint regarding Pilgrim Hospital and a Care Home as they were unhappy with the care provided, also requested advocacy information.

Notes / Questions

Healthwatch provided information on:- Voiceability; ULHT Complaints and CQC, Customer Services for Adult Social Care, Care Home Manager

Provider Response

ULHT response- It is hoped that the patient contacted the provided areas and received a satisfactory response.

Compliment

1. Case 13319 (26-02-2024)

PCN: K2 Healthcare Sleaford

Providers: Lincoln County Hospital, Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

Lincoln County Hospital and steps to change in Sleaford

Had heart attack hospital were great but then suffered mental health breakdown. Had talking therapy which definitely helped.

Notes / Questions

No patient information provided

Provider Response

ULHT response- Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

West Locality x 17

- 9 x General Comment
- 1 x Informal Complaint
- 2 x Formal Complaint
- 5 x Compliment

General Comment

1. Case 13196 (06-02-2024)

Providers: Lincoln County Hospital

For Information: Better Births - Lincolnshire Maternity & Neonatal

I am writing as the one who received the care and treatment when I was in the labour ward.

Last January (40 weeks), I asked the midwife for a membrane sweep because I was so desperate to start labour so I can give birth. I was 2cm when checked. But because of my first pregnancy, (premature and was induced due to oligohydramnios), I was so anxious of the thought that the second one lasted 40weeks and still not getting the active signs of labour.

Come along the night of mid January, I was having bloody discharges and painful contractions which was expected post sweep. I went to maternity to have checked and they gave me paracetamol for pain relief. No monitors attached to check the contractions and baby's heartbeat as they said there was no indication that it needs to. They advised me to go home and monitor for regular contractions. The following day, around 8pm-ish, I went back to the hospital because of painful contractions. I asked them to checked how dilated am I and it was 2cm, slightly thin as per the student midwife (3rd year). Again, they advised me to wait at home until I could no longer bare the pain along with every 3-5 minutes regular contractions as it was still not considered an active labour.

Early dawn 2 days later, I tried myself to sleep at home, but I was really in a lot of pain (worst) and took paracetamol for relief. Unfortunately, it did not help. I rang again the antenatal assessment and told them that I could no longer bare the pain and a lot of blood came out. The midwife advised me to stay for a bit at home since I was still "2cm" if I can, or if I think I should return and to be checked again. I opted to go back.

I could not walk properly due to pain when I went back to labour ward. The midwife told me that they cannot do a vaginal exam since it was just less than "3 hours ago" that they did the exam to minimise infection. They let me stay in the room and one of the student midwife look after me did the labour watch; however, I was not put into the CTG machine to monitor my contractions and baby's heart beat. I did my own contraction timer with the use of an app in my phone.

Around 3-4am, I was screaming and shouting for pain. However, they refused to give me the Entonox (pain relief) since I was "2cm". Considering my face and the contractions which was every 3-4 minutes in my end, they did not do anything. They gave me (Morphine) but it took awhile since there was no available doctor who can prescribe straight away.

The morphine made me calm a little bit but during contractions I can still feel the same pain. I was hoping to have more than the morphine like epidural but then I was just left with so much pain. I told them that I really wanted to push, yet they did not assessed still. I was literally pushing every contractions by then on my own. I was in agony from 4am until morning came.

Around 8am-ish, the incoming midwife (day shift team) did a vaginal exam and found out that I was fully dilated. Finally they gave me the gas and air (Entonox). It did help somehow but because I don't have the energy anymore, my pushing wasn't effective as it should be. The student midwife supported my perineum as I was pushing that time. Unfortunately, it lasted for 3hours or more and I started to spike temperature and my HR was high, I had sepsis. I struggled a lot. They did check my baby's HR, and good thing he had no signs of distress. The staff took the portable scan to check the position of the baby because it took awhile for the baby to come out. Then they found out that his position was in "occiput posterior".

The OB GYNE doctor explained that a trial of forceps delivery might help and if not, they will proceed to caesarean section. I was hesitant of the said assisted delivery because there is no assurance that it will be successful. I asked them what is the successful rate of the said delivery, she answered "50/50". So, I told the doctor to proceed to CS because it's too much already. She explained that since I am already 10cm it is worth trying to proceed with the assisted delivery. I can't really decide at that time because I was so weak and poorly so I agreed with a "thumbs up".

At the theatre, they did what I was told so. Trial of forceps delivery which was unsuccessful as they could not rotate the baby's head. I sustained a 3rd degree laceration and ended up with emergency caesarean section plus 1.1 Litre of blood loss. Baby had a cephalohematoma due to attempted forceps delivery.

After the section, they did repair my laceration from the forceps delivery. I cannot remember all the events post op. I was so poorly and fragile.

As a staff nurse in the hospital, I never expected that would happen to me. It was a traumatic birth experience. It should have been prevented when they reassess me when I return due to severe pain along with regular contractions so I could have a better pain relief and not suffered that much. Even though I was still 2cm, it was my second pregnancy and surely it will progress faster. Also, they should have placed me in a proper CTG machine so they will know the frequency, interval, and duration of my contractions.

Lastly, given my situation at that time the most appropriate thing for a prolonged labour is to do caesarean section straight away since I was so weak at that time. I did understand that they wanted a conservative approach as much as the scenario permits; however, a section would be beneficial. Post-operatively, my recovery period will take awhile as I have a laceration plus a cut in my belly. It is hard to be honest. I wanted to raise an awareness to improve the assessment approach so others cannot experience what I have been through.

Notes / Questions

Healthwatch provided Complaints information.

Provider Response

ULHT response-It is hoped that the author used the information provided and received a satisfactory outcome.

2. Case 13232 (12-02-2024)

PCN: Lincoln Healthcare Partnerships

Providers: Brayford Medical Practice, Lincoln County Hospital

Brayford Medical Practice Lincoln / (neurologist) Lincoln ULHT hospital

I am disabled, I am autistic and ADHD so I struggle to express myself verbally and advocate for myself. I have several chronic health conditions, most are undiagnosed, some are in the referral process. I know I have them from my symptoms and the research I have done on the conditions. My GP wouldn't believe me that I have intracranial hypertension and I had a CSF leak. I'm now in pain every day, I have a disabled 5 year old child. I am the worker in the family as my child's other parent is their carer. I don't know how we will cope financially if the NHS don't help me. Why don't they believe me? I showed the dr video evidence of the CSF leak. The neurologist didn't even listen to me properly and it's hard for me as I've already mentioned. I'm worried it's because I'm a woman and these 2 men are men.

Notes / Questions

No patient information provided

Provider Response

ULHT response -Response from Matron Speciality Medicine - Sorry to hear that you feel that you haven't had a positive experience with Neurology, if you would like to discuss further and receive further support please contact me directly, with contact details and we can discuss further.

3. Case 13284 (19-02-2024)

PCN: Lincoln Healthcare Partnerships

Providers: City Medical Practice (Portland), Lincoln County Hospital

A&E / City Medical GP Practice

Went to Lincoln County Hospital on Christmas Eve. My back had gone into spasm. I struggled to move, breathe and was crying in pain. They gave me morphine and sent me home. Spouse called ambulance Christmas morning as same happened but they wouldn't even look at me because I had been to A&E the day before. Few days later I was wheeled into A&E in a wheelchair as I was still in agony. Gave me painkillers, sent home. Went to sports injury therapist for three sessions at £70 a time. Back easier, but still in pain on one side. Back to doctors and they couldn't understand why they hadn't sent me for a scan or X-ray. GP ordered an X-ray and I had a stress fracture of a rib near my spine. Doc calls me with the results and said there is no treatment will send a prescription for more painkillers. Bye.

Notes / Questions

No personal information provided

Provider Response

ULHT response - Response from Ops service Manager - Thank for your comments. Unfortunately as we have no patient details we are unable to look into this further. However having read the below, I can confirm that this is not the standard of care which we expect to deliver. Please can you provide patient details and consent and we can look into this further and provide a response and feedback to the doctors concerned.

4. Case 13192 (06-02-2024)

PCN: Imp

Providers: Lincoln County Hospital

ENT

It would have been good to have had the ENT consultants listen to me and research the rare syndrome I have which was key for me to have an appropriate level of care.

Notes / Questions

Healthwatch provided PALs information

Provider Response

ULHT - We are sorry you have raised this concern and apologise that the service you received was not of the highest quality. We would need more details to be able to rectify your situation. Would you be able to provide this and we can obtain a second opinion from another consultant with a further appointment?

Patient update - Bless them I don't need a second opinion I sadly have given up on ULHT I have a diagnosis via Kingsmill Mansfield. Hopefully through Clinical Governance /PALS Lincoln ENT and Sleep Clinics are going to be educated about the rare syndrome (it doesn't even appear on NHS diagnosis search engines) My hope and prayer that others who may enter ULHT with the syndrome will be treated with sensitivity and respect as my experience was traumatic to say the least with the poor attitude of the ENT consultants.

5. Case 13201 (06-02-2024)

Providers: Lincoln County Hospital

Spouse received an MRI appointment, they completed the questionnaire and took this with them. When they got there they do the MRI as following detached retinas and cataract surgery they were not sure if any metal was in their eyes. Would have been questionnaire was returned to the provider for this check prior to turning up and wasting not only spouses time but the time of the radiologists, could have been available for another person.

Provider Response

Is it possible to see where the form was sent as the procedures that the patient underwent for their eyes would have been completed in the ODU, which sits within SAL ? The patient should have had a cataract card to carry post-surgery for the lens implant, did they not have that on them?

HW - provided this information and released patient information (with consent) to ULHT, no card was provided to the patient.

Sister from Outpatients contacted patient direct after Healthwatch provided details.

6. Case 13202 (06-02-2024)

PCN: South Lincoln Healthcare

Providers: Lincoln County Hospital

A&E

Patient went to A&E with severe pain in the back region, although not back pain, feels could be bowels or other organs in this area. Projectile vomiting brown fluid. Consultant stated Mental Health and chronic fatigue were the issues, and patient felt they were very rude. Had morphine given and then sent home. No pain medications for over the weekend and no examination or blood tests taken, patient asked for pain killers, to be informed that they do not prescribe pain relief medications in hospital. When the patient asked for another Doctor to look at them, they stated that this was the main Consultant so no this was not possible. Patients pain was a physical pain not mental health. Over the weekend patient made contact with NHS 111 who advised them to go back to A&E, patient did not want to do this after the way they had been treated at the end of last week.

Has seen their GP today and they are looking at making referrals for the patient.

Notes / Questions

Healthwatch suggested contacting PALS

Provider Response

ULHT response-It is hoped that the author contacted PALS and received a satisfactory response.

7. Case 13287 (19-02-2024)

Providers: Lincoln County Hospital

Accident and emergency/minor injury units

Was advised to go to A&E by 111. Waited in A&E for 9.5 hours to see a Dr, after having an ECG for pain in chest which was clear, when I said I would go home, I was asked not to as I needed blood tests. Once I had blood tests 4 hours later, I asked for pain relief . 5 hours later after asking 3 different nurses and I was coughing constantly, could only sit up leaning forward in the chair, which was uncomfortable anyway, I was offered drink and biscuits 3 times. It turned out I had pneumonia.

Notes / Questions

No personal information provided

Provider Response

ULHT response- Response provided by Lincoln UEC Matron - Thank you for your feedback. I apologise for the delay that you experienced whilst in ED. Unfortunately ED is under extreme pressure currently and we are therefore experiencing long waits for patients to be seen. We understand that this is not ideal for patients. I apologise for the length of time that it took for you to receive analgesia. This is not ideal and will be shared with the ED team. ED have recently purchased new high back chairs for our seated majors area as we recognise the previous chairs were not comfortable for long periods of time.

8. Case 13294 (20-02-2024)

Providers: Lincoln County Hospital

Cardiology Lincoln and Lincoln A&E

Was told I'd be waiting 18-30 months for a heart scan so I went private- showed an urgent heart issue- so urgent I was told to get to Lincoln A&E immediately, take a bag and don't drive myself. Arrived at Lincoln A&E and waited 27 hours in there sat in a chair with dozens of others who waited the same length of time.

After two days of being on hospital premises I eventually got a bed in the cardio ward....after two days!

At this point the treatment and support was brilliant! The specialist literally saved my life. The ward staff were brilliant and the consultancy team second to non.

I had my op early August and was told my follow up would be in three months - they gave me a copy of the paperwork with a warning not to lose it because "you know what the NHS is like"

November came and went and I contacted the department to be told my follow up post op had been classified as routine "by someone" Result of that is my follow up after my op is now pencilled in for a telephone call in March! I asked who reclassified my case to routine but was told they couldn't tell me. The feeling your left with, as a patient, is that if my op failed it would be just one of those things. If it was a success then no need to worry! Almost six months will have gone by IF I get to speak to someone and that will be the first follow up since my operation. I literally walked out of Lincoln Hospital after a serious procedure and there had been zero contact since then. How other people cope with that lack of pre and post op support is beyond me. Again, the cardio ward, the specialist and the staff actually supporting the specialist were brilliant, such a shame that getting into Lincoln and post discharge is so dire here in Lincolnshire- for the purposes of context ALL my comments need to be used/acted on not just cherry picking the good one!

An interesting side note- in the late July when I was sat in A&E the place was a bomb site. No cleaning went on, patients left to fend for themselves and people just left in chairs. Communication was literally ZERO. Examples I observed included one patient (late 70s) on their own, in their PJs having to move themselves about on their own- not too bad apart from the fact they had had a thigh height leg amputation. I saw them sat with a bowl of sick trying to catch staff attention- they were 10feet away from the patient. As I got up to go help another patient stepped in first- not only did they help this patient they let the staff know what they thought. This was systematic of my whole experience in A&E over that 27 hours. The following morning however, it all changed and a staff member came on who was bouncing, bubbly, attentive and the whole atmosphere was so different. I pointed out to my spouse the difference and was going to tell the hospital that. I then found out that "the two people" in shirt and ties behind the desk that morning were from QA if not CQC... which made sense because after they left in the afternoon things reverted. I work as a consultant within health and social care and pick up these things as part of my job- if I was an inspector on that day it would have received inadequate in my report.

Notes / Questions

No patient information provided

Provider Response

ULHT response- Response from Divisional Nurse UEC - Thank you for your feedback and I am sorry you had to wait so long for a bed in ED. I know this is not ideal and we have tried to put as many provisions as possible in the emergency department whilst you await your onward care. I am pleased the ward care was brilliant and the rest of your care remained excellent.

9. Case 13335 (28-02-2024)

PCN: Imp

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Only just started to fix the pain problem and was then working on several other areas.. then the second block was delayed by 6-9 months which caused all my pain to come back and undo that work the physio did I think for another 8 week clock in 2022...

Then I was on another long break which massively undone all of the physio work again last year... (I think the original physio Matt company has shut down).

So my case manager found a random local physio where I had a block last year which ran from may-oct approx...

But this physio was no where near as good didn't even get past my pain barrier of fixing the problem and I was complaining to my case manager and the ICB who asked me to keep at it.... But since physio as stopped yet again my problems with pain , flexibility , tightness has come flooding back for a number of reasons but mainly because I've never had a block or my full package of treatment to hopefully fix the issue once and for all...

But where this care package is potentially going to be put in place... this care team are now saying they won't be ready for another 3-4 weeks because the ICB has not kept them in the loop or gave them any notice when they could start from... they have advised me to start small and slowly building things up and see what I can and can't cope with when they mentioned the gym like I've said to them i struggle to walk at the minute because of this problem because it's never been a consistent treatment to sort the issue at hand because of all the dangers/problems I've been left with without these treatment packages... and they said last thing we need is you to have physical problems to restrict me as their would massively lead the care team being restricted on where. They can and can't support me.... (If that makes sense)

I think I new physio will need to be found on the level of the original neuro physio who was showing very promising results..

where I have no idea

And it was organised through the ICB

1-2 times a week to get started and hopefully/slowly push it further forward once a week - once a fortnight etc

Notes / Questions

Healthwatch made contact with PALs at patients request

Provider Response

ICB - I have received confirmation from my colleagues in the Mental Health, Learning Disabilities, Autism & CAMHS team (MHLDA) who have confirmed that the funding for the package has been clinically and financially approved. The request for a new physio would need to be re-referred to the OATS panel for them to consider the request for approval, if deemed clinically appropriate.

Patient update - provided previous paperwork for physiotherapy from sheffield - HW sent these to ICB & who would do the referral to OATS ? Case Worker role?

Informal Complaint

1. Case 13236 (13-02-2024)

Providers: Lincoln County Hospital

I am tired of women, especially neurodivergent women, being treated like their thoughts and feelings don't matter. I am tired of experiencing aged men in suits dismissing real lived experiences that are often painfully traumatic and causing more trauma. This complaint focusses on my experiences, but I have heard many more from my clients that are similar. I recommend you incorporate some a) People skills and compassion training for clinical staff (this should be innate but sadly isn't) and b) Some understanding neurodiversity training that includes it's related physiological conditions and predispositions.

Older staff should also ensure they are keeping up to date with CPD, Dr XXX did not seem to be aware of the available research on intracranial hypertension that I was talking about, which is concerning. Also, some diversity is needed where are the female neurologists? Is this a sexist systemic issue that needs to be addressed?

Please can I request that this letter attached above entitled 'evidence' is placed on my Systemone record and for confirmation of when this is done. I will then make an SAR request to check. I would like my thoughts and feelings and evidence to be documented appropriately.

Notes / Questions

Healthwatch copied into this comment, original sent to Complaints department at ULHT

Provider Response

ULHT response- We have progressed a lot of work in the emergency department around care and comfort and hope the processes we have in place improve the patient care and experience

Formal Complaint

1. Case 13184 (05-02-2024)

PCN: Trent

Providers: Lincoln County Hospital

For Information: Better Births - Lincolnshire Maternity & Neonatal

Patient was overdue for giving birth to their first child, contacted the Maternity Unit in Lincoln County Hospital in the middle of the night as felt something was not right, patient was told to wait at home until things started to progress as only 41 weeks and felt dismissed. Patients parent by the early hours of the morning (3 hours later) just took the patient to Maternity Unit where things progressed, but worse not better. It was only when a Senior Consultant came to see patient that they stated an emergency c-section would be needed and now. During the birth no-one told parent what was happening, once baby born the staff tried to get the mucus out and had some difficulties, should have had a deeper tube as there was faeces in the babies lungs, which was apparent when the c-section took place as belly full of faeces. A scan was performed and as yet not certain what if any kind of damage has been done.

There is an ongoing internal investigation currently, new parent wants answers as it was only as the baby was transferred to another hospital that they saved the life of the baby.

Parent feels there should be an appointment for paediatrics ongoing to keep an eye on baby.

Notes / Questions

Healthwatch provided CQC and PHSO information. Also Consent gained to release details to see if any appointments were in the system - Healthwatch contacted PALS

Provider Response

ULHT response - I have looked on the system and an appointment has been arranged for early April 24 at Lincoln hospital. This was booked on the 02.02.24, so a letter will be received shortly.

Information sent to the parent.

2. Case 13178 (01-02-2024)

Providers: Lincoln County Hospital

Patient contacted Healthwatch wanting to discuss how to proceed with complaint about senior members of staff at Lincoln County Hospital. Has been to ULHT PALS and in the complaints process but feels at a standstill and not moving forward. Patient has multiple, complex medical problems, visits many departments at Lincoln County Hospital, issues go back to 2022. Now has a lipoma on thigh which needs treatment. Patient finding the whole process distressing and that no further forward.

Notes / Questions

Healthwatch - gave information about how to contact ULHT and ICB complaints team. CQC information and contact details. Parliamentary Ombudsman contact details. NHS advocacy contact details.

Provider Response

ULHT response- It is hoped the author contacted the departments provided and received a satisfactory response.

Compliment

1. Case 13185 (05-02-2024)

PCN: Trent

Providers: Coventry hospital

New baby was transferred from Lincoln County Hospital to Coventry University Hospital in the early hours in late December 2023, the parents and extended family feel that only when this hospital took charge and did extensive tests that their child's life was saved. All the family are very grateful for what the hospital staff on Maternity/SCABU Doctors and Nurses that helped to save the baby's life, that is why we have them today. Staff kept the parent(s) informed all the way along.

2. Case 13207 (07-02-2024)

PCN: South Lincoln Healthcare

Providers: Lincoln County Hospital, The Surgery Washingborough

I recently had an experience with acid reflux in my stomach and throat. I was taking the drug Omeprazole to combat this. I had been having problems and I was advised by my GP to take a lower dosage than I had been on. At the time my spouse and I had been using our local surgery. We were not happy with the service we had recently been having, so moved to Washingborough Surgery. Where I asked my new surgery to take a look at me, which they did, very promptly, where I was advised to go to hospital to have an endoscopy, just as a precaution. This procedure was carried out successfully and no problems were detected.

The point I am making is that from me first visiting my new surgery to having the procedure took about 3 weeks in total. I was amazed by the surgery as to how quickly they were on my case and the hospital appointment followed very quickly. I am just so pleased, happy and reassured that everything was done so quickly. Hats off to the NHS for a very efficient service, in my case anyway. This deserves a big thank you to all concerned. People are quick to criticise and slow to praise, not in my case.

Provider Response

ULHT response- Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

3. Case 13241 (14-02-2024)

Providers: Lincoln County Hospital

Lincoln County hospital, X-Ray department.

My GP asked me to go to Hospital for x-rays of my knees and hips. Although was no appointment, I was told to 'turn up', I was in and out within the hour! I had prepared myself for a long wait, very impressed. Fast, friendly service.

Provider Response

ULHT response- Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

4. Case 13243 (14-02-2024)

Providers: Lincoln County Hospital

Shuttleworth Ward - Orthopaedics

Late November I fell and broke my wrist, which required surgery, which I had on 2 December. Finally out of the cast mid January. All through my treatment, the staff in all departments were good and treated me well. It was my left wrist and being left handed has been hard, so only just started writing again.

Provider Response

ULHT response - Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

5. Case 13269 (16-02-2024)

Providers: Lincoln County Hospital, NHS 111 Service

Accident and emergency/minor injury units. NHS 111, Lincoln A&E. I suffered a massive nose bleed, it was coming out so fast I could not keep up. My spouse phoned NHS111, and we were told to go to Lincoln A&E. Experience of help, support and care given was good.

Notes / Questions

No contact information or postcode webform submission.

Provider Response

ULHT response- Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

All Areas x 1

- 1 x Compliment

Compliment

1. Case 13212 (09-02-2024)

Providers: United Lincolnshire Hospitals NHS Trust (ULHT)

Hospital inpatient (day treatment or overnight), Hospital outpatients' appointments. Outstanding. Professional care, I felt the medical and nursing team were there for me and ensured I understood what was happening. Where possible they gave me choices. Urology investigation suite and outpatients in Lincoln, outpatients and day surgery Grantham and Boston.

Provider Response

ULHT response- Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

<p>Out of Area x 2</p> <ul style="list-style-type: none"> • 2 x General Comment 	<p>General Comment</p> <p>1. Case 13240 (14-02-2024)</p> <p>Providers: Diana, Princess of Wales Hospital (Grimsby)</p> <p>Diana Princess of Wales Hospital, Grimsby</p> <p>Following an outpatient appointment it was decided that my 14yr old autistic child with impacted bowels (after repeatedly asking GP for help with constipation for over 18months and being told there was nothing more they could do to help) would be admitted to the ward. However, there were no beds available. The paediatrician contacted the ward for 3 consecutive days, whilst we waited at home but still not an available bed. In the end a different treatment plan was decided to be implemented at home, but the lack of beds caused a lot of unnecessary suffering as well as anxiety around whether they would or wouldn't be going into hospital.</p> <p>Notes / Questions</p> <p>No patient details provided - no GP surgery named</p> <p>2. Case 13260 (15-02-2024)</p> <p>Providers:</p> <p>For Information: Scunthorpe Hospital</p> <p>Hospital Outpatients , Scunthorpe Hospital. I have Hereditary Haemochromatosis which involves blood tests and if the ferritin count is out of range a session of venesection.</p> <p>The department I deal with forgot about me so nobody was keeping a check on my iron levels. Not good for a serious illness. Luckily after contacting my GP he has got me back on their radar !!</p> <p>Notes / Questions</p> <p>Healthwatch Lincolnshire forwarded to correct Healthwatch North Lincolnshire.</p>
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Mental Health and Learning Disabilities

Area	Case Details
<p>East Locality x 5</p> <ul style="list-style-type: none"> • 5 x General Comment 	<p>General Comment</p>

1. Case 13304 (22-02-2024)

PCN: Meridian

Providers: East Lindsey Medical Group, Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

Mental health support experience.

Initial contact was GP surgery. Had same day appointment but had told them it was for depression and autism. Saw nurse practitioner who admitted they had to ask mental health practitioner what to ask. They advised me about self referral to Lincolnshire talking therapies. That was 5 months ago. After 1 month I was struggling ,so given sertraline but had to take sick leave soon after due to my mental illness. I'm still on sick leave.

Talking therapies diagnosed generalised anxiety disorder. I was put on waiting list for one to one Cognitive Behaviour (CBT) (there was concern there might also be trauma and autism also present). While waiting for this I was given access to online CBT (silver cloud) without a counsellor. This helped somewhat.

After some appointments with a nurse practitioner, a GP did a repeat prescription check for sertraline (the only contact have had with the GP for mental health,). They were concerned and made me an appointment for the mental health practitioner (MHP). I continued seeing the MHP regularly but got worse, and in December they referred me to the Crisis Team(CRHT) who were excellent with one exception (their psychologist).

The nurses, support workers and psychiatrist were fantastic. It was revealed that I suffered complex trauma and childhood adversity and suggested they would talk to talking therapies and perhaps get me reassessed by Lincolnshire Talking Therapies (LTT)because the talking therapy was very similar to what I was doing with silver cloud. My last but one CRHT appointment was with a psychologist who said I was managing fine and there would be no change to the CBT plan. This triggered me to have a severe episode of distress where I could hardly understand them or speak and felt very suicidal. They eventually managed to get me to ground myself and immediately sent me off to drive home a half hour journey on my own.

Since then I still haven't seen a GP. I've continued seeing the MHP. My mental health has deteriorated. I have constant suicidal thoughts (daily) and have 3 suicide plans which the MHP is aware of. I have 4 times been very close to attempting suicide. The MHP is aware. I have had to contact CRHT once for advice. I have to use Samaritans frequently and SHOUT. I try to use NHS emotional helpline but sometimes give up on hold on the phone after it's been half an hour. This month I had my autism assessment (so only about 6 months wait which I understand is quick) and I am autistic. This month I also started the long awaited CBT only to be discharged and referred to an interface meeting because, as CRHT had already said, until their psychologist disagreed, my anxiety and depression score are too high for that level of intervention to be appropriate, as well as the suicidal ideation. As a result of the interface meeting I am having a phone assessment in 2 weeks with IPBT (integrated place based team) to see if they can help me. I don't think this team have any psychiatrists or psychologists on their team so it looks like I will be having some sort of support without having a diagnosis, despite it being known I have complex trauma.

I am still off work since October. I feel so upset and frustrated that at each stage I have received lower than necessary interventions, wasting time and allowing my mental health to get worse. I have no diagnosis other than the General Anxiety Disorder suggested by Lincolnshire Talking Therapies. My clinical signs and history suggest complex problems but I am after 5 months, unable to work, dangerously near suicide frequently, no diagnosis by a psychiatrist (CRHT say they don't diagnose) and about to have my treatment left in the hands of MHPs and support workers, if they accept me for treatment. I've lost all hope, I've tried everything they've suggested (CBT, meditation, physical exercise, mental stimulation, recovery college sessions, go outdoors in nature). But nothing has helped. My mental health is worse. I now binge watching to prevent me from using alcohol or burning myself to get through this and have 3 suicide plans with the means to do it. I have given up hope and I'm scared.

Notes / Questions

No personal details submitted to enable us to go back to the patient.

2. Case 13318 (26-02-2024)

PCN: Boston

Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

For Information: Lincolnshire Integrated Care Services (ICS/ICB)

GP services, Dentist, Mental health support

Impossible to get a doctor or dentist appointment in Boston - there are no NHS Adult Dentist practices. Mental Health Care, 5 years still not receiving appropriate help

Notes / Questions

No patient information provided

3. Case 13264 (15-02-2024)

Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health), Pilgrim Hospital
For over a year I have been on a waiting list for the Community Mental Health Team. Had a meeting with my psychiatrist a year ago and put me on waiting list. Also waiting for assessment for ADHD referral 2 years ago. Not happy with the Mental Health Crisis Team they told my friend when they were suicidal to have a cup of tea and a bath. Totally dissatisfied with mental health services in Lincolnshire.

Also waiting for appointment with urologist for MRI result have been waiting since Feb 2023.

Notes / Questions

No contact details provided

Provider Response

ULHT response- Response from Urology Nurse Specialist - unfortunately without patient information I cannot look into this.

4. Case 13312 (23-02-2024)

PCN: First Coastal

Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

The only thing that is poor is the mental health talking therapy service that my spouse has needed. Very poor therapist for CBT and then just discharged because spouse said the sessions hadn't helped them.

5. Case 13326 (26-02-2024)

Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

Patient was left without medication for six weeks yet no help was offered until 19th March.

Notes / Questions

Healthwatch provided PALs information

Provider Response

Patient has been in touch with PALs

Lincolnshire Integrated Care Services (ICS/ICB) x 1

- 1 x General Comment

General Comment

1. Case 13332 (27-02-2024)

Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

Community rehab team / CPN. Community mental health nurse

I have a CPN and a nurse from community rehab team. I'm currently in crisis and self harming and have been for over a week now.

My CPN is now off until 6th March and my nurse from community rehab team has been on the sick 3 weeks

I know things happen and I know sickness cannot be helped but I've been left with almost nothing and the phone calls I have had are from males... (struggle talking at the best of times and new people due to autism but males make that worse they do know this) I had a really bad night last night and still haven't had a call from anyone today

Notes / Questions

Unfortunatley no patient details provided by HWE to go back to this patient to assist

South Locality x 1

- 1 x Informal Complaint

Informal Complaint

1. Case 13225 (12-02-2024)

PCN: Spalding

Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

Person who is supporting a patient and spouse with their ongoing concerns, these apparently have all come to light as the person in LPFT who was supposed to be helping, didn't do what they said they were going to do.

Patient was in crisis and a named support worker said they could help with their financial concerns and took a large pile of all their letters so they could sort it out and would deal with any problems, the spouse was very grateful for this as suffers with dyslexia and unable to read. 15 months later and after a number of people trying to get through to support worker and no response, the person who is helping support the family went to Safeguarding - and now the paperwork has been sent back in a plastic bag, but nothing done in that time period.

No 'breathing space' for financial was put in place and now this has had a great impact on the spouse who is trying to sort (with the support of family friend) out the financial mess they have been left in.

Patient was sectioned a few times during the period of Oct/November 22 - Sept 23, then now placed in a Nursing Home in Spalding for the foreseeable. Spouse is at breaking point as the insurance company/solicitors are hounding for astronomical funds of £27,000, no breathing space was done - which would give them time to get things in place and no financial support was provided. Unable to do this with family support as all the paperwork was with LPFT who stated they would get it sorted.

Also had signed a consent form for LPFT support worker and another one with another named LPFT worker who stated they would support with all aspects of financial elements and liaise with companies etc.

Spouse and named worker both signed and there was a note to say patient verbally agreed (as was too shaky to sign the paperwork) this was dated 8/9/23.

Patient was sectioned and DoLs in place, now on moving to a Nursing home, ? diagnosis of dementia.

Both the person who is supporting the family and the Spouse stated that patient went into crisis due to being harassed by car insurers and solicitors. Has been in contact with Social Worker and their Manager but as it came about due to LPFT they have no remit.

Notes / Questions

Request for Healthwatch to go to PALs

Provider Response

LCHS - I have spoken at length with the person supporting the family today. I have advised them that I will need to discuss what has happened with my manager tomorrow, but the only thing potentially we can look at is the "Breathing Space" form. I told them that I would be in touch again with them next week.

Update - 21/2/24 Just to let you know that we are processing the complaint regarding the letter that LPFT support worker signed about helping with the finances. I have just sent through the paperwork.

2/4/24 - We have had to extend the response date to 08/05/2024, as it is a lot more complex than we originally thought. I have sent a letter today to advise of the extension to the response date.

South West Locality x 1

- 1 x Compliment

Compliment

1. Case 13319 (26-02-2024)

PCN: K2 Healthcare Sleaford

Providers: Lincoln County Hospital, Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

Lincoln County Hospital and steps to change in Sleaford

Had heart attack hospital were great but then suffered mental health breakdown. Had talking therapy which definitely helped.

Notes / Questions

No patient information provided

Provider Response

ULHT response- Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

West Locality x 4

- 4 x General Comment

General Comment

1. Case 13303 (22-02-2024)

PCN: APEX

Providers: Birchwood Medical Practice, Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

GP fobs me off with anti-depressants for mental health suggests talking therapies who constantly reject me.

2. Case 13301 (21-02-2024)

PCN: South Lincoln Healthcare

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

I have been speaking with a lady whose GP surgery (Branston) have made a referral to ADHD 360 - or so they say. The surgery have said that patient is unable to chase and was referred in January 23, this can only be done via the surgery. They mentioned MHLDA team. Patient doesn't know what is happening and how long they will need to wait before an appointment is provided, as it has been over a year now.

Notes / Questions

Patient request to make contact with ICB

3. Case 13316 (26-02-2024)

PCN: South Lincoln Healthcare

Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

Talking therapies Lincolnshire.

Took a month to get a first call back, now told yes I'm quite depressed sit on a waiting list for who knows how long just to get a teams course in CBT. Hardly helping anything really just another reason to feel everything is pretty hopeless.

Notes / Questions

No patient information provided

4. Case 13331 (27-02-2024)

PCN: South Lincoln Healthcare

Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health), The Branston and Heighington Family Practice

Branston Surgery, Lincoln Hospital emergency mental health unit, Lincoln Crisis House

Last year I underwent some severe mental health illness and ended up in crisis. I had been passed from person to person but it was the swift action of my occupational health worker and my regular GP that meant I got the referral I hadn't realise I needed. I ended up in a crisis house for a week after being sent up to the emergency mental health unit. My GP went above and beyond giving me her time and support after I'd received very little support previously. She treated me with respect and kindness as well as sending me to the unit with a written referral as I wasn't in a state to ask for help without this. Following that all of my experiences with the crisis team were positive and supportive and helped get me back on my feet.

Initial referral to Cabourne Court for support wasn't good. The consultant I spoke to didn't listen properly and I felt really uncomfortable which in retrospect led to everything spiralling more. Their contact and miscommunication/lack of communication made what was a difficult time even more challenging.

Notes / Questions

No patient details provided

Provider Response

GP Surgery - Positive experience comments

Mental Health - Mixed experience comments

Patient Transport

Area	Case Details
East Locality x 3 <ul style="list-style-type: none">2 x General Comment1 x Compliment	<p>General Comment</p> <p>1. Case 13291 (19-02-2024)</p> <p>PCN: Solas</p> <p>Providers: East Midlands Ambulance Service NHS Trust (EMAS)</p> <p>Concerns raised at local community group: Old Leake. The following issues were raised by a number of people within the community who were in attendance:</p> <p>Long waits for ambulances for people who have had serious breathing or heart conditions and then waiting a long time in the back of the ambulance once they have been taken to the hospital.</p> <p>Notes / Questions</p> <p>Involvement Officer attended a Community Group in Old Leake on 14 Feb 2024 - approximately 60+ people in attendance including local Parish Councillors</p>

2. Case 13310 (23-02-2024)

Providers: East Midlands Ambulance Service NHS Trust (EMAS), United Lincolnshire Hospitals NHS Trust (ULHT)

After being in bed for 8 days with a UTI (urinary Tract Infection) my 90+ year old relative was deteriorating despite a Doctor visiting and antibiotics. A technician and Paramedic ambulance crew were called by GP in early February and left relative at home. Another crew took them in as emergency the following day, where they had several seizures and had to endure 12 days in hospital. Better access to a GP would no doubt have prevented this awful situation. The hospital staff were very good but understaffed . The whole system is broken from the GP up. Angry & disappointed with what happened !

Notes / Questions

Healthwatch provided information on Hospital PALS; EMAS PALS and ICB information

Provider Response

ULHT response-It is hoped that the author contacted the relevant departments and received a satisfactory response.

Compliment

1. Case 13275 (16-02-2024)

Providers: East Midlands Ambulance Service NHS Trust (EMAS), Pilgrim Hospital

After a long initial wait for an ambulance, the Paramedics treated my elderly relative with great care and dignity. On arrival at Pilgrim the relative was seen almost immediately , had several tests, and saw a couple of Doctors. The Doctors again were very kind and explained in full the diagnosis and what was going to happen next. A bed was found in a ward within 6 hours of being admitted in Accident and Emergency.

Provider Response

ULHT response-Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

Lincolnshire Integrated Care Services (ICS/ICB) x 1

- 1 x Compliment

Compliment

1. Case 13233 (13-02-2024)

Providers: East Midlands Ambulance Service NHS Trust (EMAS)

Child has long term illness, ambulance has been called on few occasions and each time ambulance crews have been very supportive and caring

Notes / Questions

No personal details provided, nor which area of Lincolnshire

South West Locality x 3

- 3 x General Comment

General Comment

1. Case 13188 (06-02-2024)

Providers: East Midlands Ambulance Service NHS Trust (EMAS), Lincolnshire Integrated Care Services (ICS/ICB)

EMAS have not been commissioned to provide transport for patients released from A&E in the early hours. This has been a long standing request of hospital campaigners representing patients without their own transport who otherwise face extraordinary taxi fares to get home safely. Especially those affected by the centralisation of A&E services which have resulted in patients travelling as far as 40 miles to their nearest A&E with virtually no public transport in some areas at night.

Notes / Questions

Healthwatch asks - what is there available for those patients that have been brought in via ambulance services and discharged after hours?

2. Case 13189 (06-02-2024)

Providers: East Midlands Ambulance Service NHS Trust (EMAS), Lincolnshire Integrated Care Services (ICS/ICB)

EMAS

What are the Category 1 emergency ambulance performance figures and there seems to be an absence of any EMAS emergency performance figures relating to the Enhanced UTC replacing the A&E at Grantham.

Notes / Questions

Please see questions raised in body of text

	<p>3. Case 13279 (16-02-2024)</p> <p>PCN: K2 Healthcare Sleaford</p> <p>Providers: East Midlands Ambulance Service NHS Trust (EMAS), Lincoln County Hospital, Millview Medical Centre</p> <p>Patient contacted GP yesterday as swollen painful leg. Seen by Advanced Nurse Practitioner who thought that this might be a deep vein thrombosis, referred for urgent scan at Lincoln County Hospital. Outpatients at Lincoln County Hospital rang patient to say that they have an urgent slot available this afternoon. Patient has no transport did tell Outpatients this, who told them to ring EMAS non urgent transport. They said to the patient they were unable to organise this on the same day of referral. Patient rang the Voluntary car service that they had used in the village unable to take referrals for the same day. Unable to take patients who needed a wheelchair. Patient unable to weight bear as leg swollen and painful, can only walk a few steps with a zimmer frame. Patient needs scan urgently.</p> <p>Notes / Questions</p> <p>Information to contact Practice Manager at GP Surgery where diagnosis given. If no adequate resolution ring NHS111 explain that have ? DVT , no transport, painful, swollen, unable to weight bear.</p> <p>Provider Response</p> <p>ULHT response. It is hoped that the author spoke to their GP and 111 and received a satisfactory response.</p>
<p>Out of Area x 1</p> <ul style="list-style-type: none"> 1 x Signposting 	<p>Signposting</p> <p>1. Case 13198 (06-02-2024)</p> <p>Providers: East Midlands Ambulance Service NHS Trust (EMAS)</p> <p>Can you please cancel my lift please for the hospital I have someone taking me sorry it's short notice</p> <p>Notes / Questions</p> <p>Healthwatch provided contact information on EMAS non Emergency Transport</p>

Social Care Services

Area	Case Details
<p>East Locality x 4</p> <ul style="list-style-type: none"> 2 x General Comment 1 x Informal Complaint 1 x Compliment 	<p>General Comment</p> <p>1. Case 13179 (02-02-2024)</p> <p>Providers: LIBERTAS</p> <p>For Information: Lincolnshire County Council - Adult Social Care</p> <p>Carers first referral to Healthwatch. Carer contacted, home care being provided by Libertas has only just started in the last week. Cared for elderly spouse now bedridden and remains unwell with multiple medical problems. These medical issues were previously misdiagnosed which have led to unnecessary complications with dressings and drainage tubes. Issues with District Nurses changing dressings and Carer having to go to GP and call ambulances about these dressings. Has previously had this problem and has now changed GP practice.</p> <p>Care assessment only recently carried out. Libertas only have sent one person to change bedding and provide personal care needed. When this needs 2 people. Carer has been helping them. Carer found the carers that have been sent very nice. Carer from Libertas also unable to find property even though instructions given to Company which reduced the time spent with client. Manager from Libertas coming this week to assess the situation.</p> <p>Notes / Questions</p> <p>Healthwatch advised carer if issues not resolved following Manager of Libertas assessment to contact Healthwatch.</p> <p>Provider Response</p> <p>Awaiting further assessment by Manager of Libertas next week.</p>

2. Case 13237 (14-02-2024)

PCN: Boston

Providers: Lincolnshire County Council - Children Services

LCC Children Disability Team - Social Care

My child's needs impact on the family units wellbeing, resilience and life chances so I feel can fall into the area of health detriment. As a family we do not get respite or time to recover from our responsibilities - work, school, carers.

We requested a child and family assessment due to my child's needs and the impact on our family unit. Our child, 12 has Down's syndrome (DS) and associated behavioural traits and health conditions. Due to my child's needs we were accessing the community less due to behaviours which was impact us as parent carers (carer burn out) but also siblings who have transcended the interests of our child who enjoys activities of a child much younger. Siblings have developed feelings of resentment as we are unable to complete any community task as a unit without a struggle. As parent carers we both have full time high pressured roles both with flexi agreements in place and don't want to be forced to give up work/ forced to make ends meet with only one earner- we have both worked hard for our careers.

A Social worker was assigned to our case who didn't seek our consent to bring people to our home or consent to conduct an observation (which we were unaware was happening). Consent is a fundamental principle when working with people and I share this to demonstrate from the get go she wasn't working with us.

We felt the social worker dismissed the views of the siblings and us as parent carers. We explained the impact on our marriage (full time employed and full time carers - we've not had time alone in many years). The social worker seemed to be on a mission to evidence my daughters needs were behavioural (both medical and behavioural needs and medical view not sought), that school did not struggle (using a school trip to a role play village as a prime example), and determined we need parenting courses despite also writing in her report she observed me to use PBS (Positive Behaviour Support), (recommended strategy for children with DS). This was delivered to us in a completed assessment and not discussed with us - to us highlighted a lack of understanding of the profile of a young person with Down's syndrome.(DS)

There was no partnership working - we don't have to agree on outcomes but transparency would be good practice I.e., I'd like to recommend xx because. We highlighted behaviours were expected for someone with DS (not due to parenting) and as parents we have been proactive in accessing Down syndrome specific training but as the social worker didn't discuss any of that with us we were unable to tell them about it- when raised with the social worker they were determined to stand by their assessment. We highlighted acknowledging PBS and determining parenting courses is contradictory in itself as we have the correct strategies.

There were lots of issues. We raised a complaint with LCC and after stage one investigation they stood by the assessment and then refused to communicate with us forcing us to make an application with the local ombudsman. Following local ombudsman contact the Complaint escalated to stage 2 but LCC have stopped communicating with us again and so we are a year on from raising the complaint and it is likely we will have to go to the local ombudsman again to get a response and be able to exercise our right to follow the complaint procedure.

It's been a dreadful experience all round - and when you feel you need to raise a complaint and are then ignored this contributes to exhaustion and feelings of being treated unjustly - it amplifies the isolation we already experience as parent carers. It is also a year without help and reduced community access for my child which is what we were seeking support for.

Notes / Questions

Healthwatch provided:- Carers First; CQC; LPCF information

Informal Complaint

1. Case 13259 (15-02-2024)

Providers: Lincolnshire County Council - Adult Social Care

Patient contacted Healthwatch after being directed by SCOPE. They live alone have cerebral palsy and are fully wheelchair bound. They suffer with anxiety and depression and contact the Community Mental Health team when they need to. They take numerous medications and pain relief. They have a Adult Social Worker who unfortunately left before Christmas and to date has not been replaced. They have a Care Plan and Package in place but at present this is not meeting their needs, this is for personal care, giving medication, help with household tasks such as cleaning, laundry and walking the patients dog. 2 carers visit the patient 3 times a day . 45 minutes in the morning, and twice later on in the day for 30 minutes in the week. At the weekend they have an extra 30 minute call by carers.

Town and Country Care service have been the agency providing carers for the last 6/8 months. Initially the Care provided was good and the patient could not fault them. Over the last 2/3 months this has dramatically changed. Patient has felt uncomfortable in the presence of one of the male carers as they are always on their phone, watching videos and taking phone calls when they are supposed to be helping the other carer. Patient not happy that this member of staff is walking their dog they have noticed that they are nasty to the dog, don't listen to patient when they ask to make sure that the back gate is closed when they let the dog out. Neighbours have reported to the patient that when carer seen walking the dog they are not nice to the dog. Their have been incidents when the cupboard where medication for pain relief was not locked by carers, and patient took an overdose of pain medication, a Safeguarding issue was then raised. Issues with Carers being constantly late which means that pain relief not taken on time, so means patient been in pain and had to go to GP for other medication. Other issues with Carers that one carer had fallen asleep on a call. That some carers had turned up in their personal clothes not wearing a uniform which was not appropriate and unhygienic. That one carer had an unsafe manner when helping patient to transfer from wheelchair. That patients flat is not being cleaned or tidied so is now disgusting.

Patient has telephoned and emailed the Care Agency Manager and raised the issues and complaints about carers and needs being unmet that are documented in Care Plan. Reply received was not appropriate and that the patient would have to put up with this.

Patient did contact Adult Social Work Duty Team a few days ago to report these concerns but has not had a reply.

Notes / Questions

Have consent from patient to share personal details with Adult Social Care Lincolnshire County Council so that these issues can be looked into.

HW contacted LCC Adult Social Care Team - advised that someone from Boston Team would contact the patient.

NHS voiceability contact information for Advocacy. CQC contact details provided. National Clinical Homecare Association - contact details given.

Poor Practice Concern and Adult Safeguarding Concern raised with LCC with service users consent. Signposted back to SCOPE if no resolution signposted to CAB Boston - contact details provided.

Provider Response

LCC Adult Safeguarding Response- Unsubstantiated. The concerns will be followed up by Key Worker. 13/03/24 response from LCC - I wanted to extend our thanks for bringing to our attention the recent poor practice concern. It is important to clarify that our capacity to address the concerns directly is limited due to our role as not being the commissioner in cases involving direct payments, in these circumstances the arrangement is directly between the provider and the person themselves. Nevertheless, please be assured that we take your feedback seriously and will utilise it as informative data, as the provider is a subcontractor for one of our Prime Providers in other cases. We will also forward the PPC to the area social work team as they would usually support people who have concerns regarding their direct payments. Should you have any further questions or require additional information, please feel free to reach out. Thank you once again for your understanding and collaboration.

Compliment

1. Case 13222 (09-02-2024)

PCN: First Coastal

Providers: Beacon Medical Practice

For Information: East Lincolnshire Area Locality

Has recently moved to the area. Much better than previous GP Practice. All staff friendly and welcoming. Particularly reception staff who are always nice. No problem getting an appointment. Happy with GP and all services. Would highly recommend to a friend or family. Finds in general more activities and warm spaces for the older person in Skegness much easy to access.

<p>1</p> <ul style="list-style-type: none"> 1 x General Comment 	<p>1. Case 13249 (14-02-2024)</p> <p>Providers: Lincolnshire County Council - Adult Social Care</p> <p>Some residents (or their families) in care homes are being asked to pay an additional charge when the resident has to attend an appointment at a hospital and escorted by a care worker. Is this correct? In what circumstances can the resident or their family be asked to pay for additional services such as escorting to an appointment? Is this the normal or are their times when this happens outside of the care provided for that resident?</p> <p>Notes / Questions</p> <p>This was provide by a Disability Forum, no Care Homes indicated, more a question.</p>
<p>South Locality x 2</p> <ul style="list-style-type: none"> 2 x General Comment 	<p>General Comment</p> <p>1. Case 13286 (19-02-2024)</p> <p>PCN: South Lincolnshire Rural</p> <p>Providers: Harrington House Care Home Bourne, Lincolnshire County Council - Adult Social Care For Information: Peterborough and Stamford Hospital</p> <p>Harrington House Care Home, Bourne, Lincolnshire which was a placement made by the hospital discharging their patient from Peterborough City Hospital.</p> <p>The strangest thing which happened upon our elderly family member being sent to this care home upon being discharged from hospital was: an employee of the GP practice just up the road rang to inform us a 'respect form' was being done, which included a 'DNR'. None had been done at the hospital, and the care home place was a temporary thing for post-hospital recovery, so doing as formal a thing as a 'DNR' form for someone in active and temporary recovery seems excessive to us. We also couldn't understand why a GP practice up the road was involved at all, and wondered whether our elderly family member had been mistakenly listed as a 'new care home resident' when in fact was only a temporary stayer for 3 or 4 weeks. After googling we further wondered whether the GP Registration had been changed from the home village one, where the person had been registered for decades. We later had it confirmed that the GP Registration had indeed been changed; this was done behind the backs of the family and the person themselves, and without their knowledge or consent. We were told it had only been done as a temporary registration and would revert, but the original GP surgery told us it was in fact a full permanent change which had been done by Bourne. This was in our view a heavy-handed imposition, and it was difficult to get the proper GP Registration put back again to their home village when the person was discharged and needed their medication putting back on the home delivery tray system as it had been before hospital. At first we we told a new registration form had to be filled in, that we'd have to come to GP surgery to do so, 3 or 4 miles away from us, when no such form was done by us when the registration had been forcibly changed in the previous week or so. The original GP surgery did relent in the end and said they'd complete the form, but the person's medication trays have been delayed due to the GP change, which was not of our making and was not our fault, and has left the person with a confusing array of packeted medications not in the dated & timed trays which the risk of confusion was supposed to prevent. We think that GP Registrations should not be changed behind people's backs, and it could have left the person unable to get back on their original GP's books if their numbers were full. We also think that 'Respect Forms' including 'DNR' labels should not be done for people who are not seriously ill and have no condition which might cause them to collapse; being elderly should not be the sole reason to have a 'DNR' imposed upon them.</p> <p>Notes / Questions</p> <p>No personal information provided</p> <p>2. Case 13203 (06-02-2024)</p> <p>Providers: Lincolnshire County Council - Children Services</p> <p>My child has been waiting 2.5 years for help. Suspected ADHD and autism. on verge of being kicked out of school. Risk to themself and others. Violent and dis-regulated daily. Verbally abusive And PDA. Causing infections to themself by their needs eg inserting objects into their body and biting their entire nail off. Broke arm in 4 places in August due to impulsive behaviours. On verge of being excluded from school. Complaints get nowhere. Nobody listening</p> <p>Notes / Questions</p> <p>Healthwatch provided information on Liaise; Safeguarding; Social Services;</p>
<p>South West Locality x 2</p> <ul style="list-style-type: none"> 2 x General Comment 	<p>General Comment</p>

1. Case 13242 (14-02-2024)

PCN: K2 Healthcare Sleaford

Providers: Lincolnshire County Council - Adult Social Care, Pilgrim Hospital

Patient requested information on where to make a complaint regarding Pilgrim Hospital and a Care Home as they were unhappy with the care provided, also requested advocacy information.

Notes / Questions

Healthwatch provided information on:- Voiceability; ULHT Complaints and CQC, Customer Services for Adult Social Care, Care Home Manager

Provider Response

ULHT response- It is hoped that the patient contacted the provided areas and received a satisfactory response.

2. Case 13234 (13-02-2024)

PCN: K2 Healthcare Grantham and Rural

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

For Information: Lincolnshire County Council - Children Services

Parent who pays for childcare with Serenity Care Company in Grantham who take 13 year old son out and about whilst single parent is at work, especially during school holidays, so parent can get out to work - this they pay for with their tax credits.

Tax Credits have said as the Company is not registered with OfSTED then they will not pay this money back to the parent who has paid it out.

The company is registered with CQC - should this not be enough to you know? LA won't fund more care but child has 2-1 in place as is non-verbal and has a wheelchair for safe place as has a tendency to run into the roads. Social Worker knew that parent was accessing this company as Local Authority use this company for similar clients, if ok for local authority then why not for tax credit people. Parent has looked for an alternative that is registered with OfSTED but none in the area, who can provide the same provision.

Notes / Questions

Healthwatch provided SCOPE and LPCF

Provider Response

Universal Credit has paid the funds as made in an official error

West Locality x 1

- 1 x General Comment

General Comment

1. Case 13297 (20-02-2024)

PCN: Imp

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Patient has complex support needs, which has been impacting on their day-to-day life. It seems that the ICB have now with the support of their Case Manager (paid privately for by ICB) managed to get funding for this patient.

Care Plan in place, assessment completed for support 5 days a week 3 hours a day. A company has been put in place (Home Instead) ready to support with their needs, and ICB had stated it would be ready to go in January, patient is still in limbo as not heard anything, neither have the home support agency and their life is getting worse on a daily basis.

Patient has emailed Commissioning Manager, but understands is on sick leave, patient, nor Home support agency has not heard from anyone what is happening, has previously been informed that possibly waiting for a box to be ticked for the go ahead. Is there anyone else other than the commissioning manager who can provide this tick in the box so the care can start.

The patient has been going round in circles for over 6 years and is hoping that once this support is in place it is going to have a great impact on their life to enable them to go out and about and some normality.

Patient made contact with ICB on 1st Feb, where it was stated that 2nd Feb it would be actioned - still waiting.

Notes / Questions

Healthwatch made contact with Director of Nursing for ICB

Provider Response

ICB - information passed onto the relevant team.

UPDATE - 21/2/24 - Can this please be looked in to and the costings put on a financial approval. Provider will need notifying once financially approved.

HW - asked for a timeframe

Update 27/2/24 - The package for patient has been clinically and financially approved from 26th February. Yes, the package can start now. patient and care agency are aware.

Area	Case Details
<p>East Locality x 6</p> <ul style="list-style-type: none"> • 1 x General Comment • 2 x Informal Complaint • 1 x Compliment • 2 x Signposting 	<p>General Comment</p> <p>1. Case 13292 (19-02-2024)</p> <p>PCN: Solas</p> <p>Providers: NHS 111 Service</p> <p>Concerns raised at local community group: Old Leake. The following issues were raised by a number of people within the community who were in attendance:</p> <p>Why is NHS111 not directing more people to the Out of Hours Service or to the Urgent Treatment Centres for minor conditions?</p> <p>Notes / Questions</p> <p>Involvement Officer attended a Community Group in Old Leake on 14 Feb 2024 - approximately 60+ people in attendance including local Parish Councillors</p> <p>Informal Complaint</p> <p>1. Case 13244 (14-02-2024)</p> <p>PCN: Meridian</p> <p>Providers: AJM Healthcare, Lincolnshire Integrated Care Services (ICS/ICB)</p> <p>Parent commented on a number of things, but one of the main issues is around a power wheelchair for their disabled child, who is quadriplegic, has spinal cord injuries, dwarfism and a tracheotomy which requires a vent.</p> <p>Parent tells me that child aged 8 has been declined a power wheelchair as they live on a farm! where is it dirty and that the rooms in the house are not big enough to accommodate, and that 'carers can push child in their manual wheelchair and whilst at school!' has been informed that 'can't have a disabled child and live on a farm' which is highly contestable. At present there are no ramps fitted, but will get this done when a power wheelchair is provided.</p> <p>Child uses a power wheelchair at Stoke Manderville Hospital when he is there and gets on very well with it, provides independence and dignity for the young person, who will never be able to walk.</p> <p>Physiotherapist has also suggested that a power wheelchair would be advantageous for child for their independence, where it is my understanding they have written to AJM to this effect.</p> <p>Parent provided information that there is funding put aside for Childs needs, including a power wheelchair. Family feel discriminated against (Equality Act 2010) just because their livelihood is farming, which should not be the case.</p> <p>Notes / Questions</p> <p>Parent request for Healthwatch to ask provider why unable to have a powered wheelchair just because they live on a farm</p> <p>Provider Response</p> <p>No response to date - HW has chased</p> <p>Parent has now received a call to say AJM sending a different assessor to see if Power Wheelchair can be provided.</p> <p>AJM - Our duty therapist is reviewing this case further and will be in touch with child's therapist and physiotherapist in Stoke Mandeville that have been involved in their care for further discussion. I have asked the local team to keep parent updated regarding the plan going forward.</p> <p>2. Case 13245 (14-02-2024)</p> <p>PCN: Meridian</p> <p>Providers: East Lincolnshire Area Locality, Local Authority</p> <p>DWP / HMRC</p> <p>Disabled child 8yrs, is a C1 quadriplegic, has trach on a vent. Has siblings at home aged 18, 16,11 & 2yrs. Parents are livestock/arable farmers.</p> <p>Universal credit refused as they count all farm machinery and animals as assets, yet if they were plumbers or builders they count the tools etc as required for the job, why is it different for the farming community? if they sell their equipment, then they will no longer be able to farm.</p> <p>The last advisor they spoke to said that farming is a hobby!</p> <p>Recently appeared on TV to highlight such issues faced by farmer trying to access benefits. .</p> <p>Universal credit say parent should go out to work, yet when disabled child is at school they regularly get called to collect and the carers as child is doubly incontinent and needs to come home to be bathed and farming is work.</p> <p>Compliment</p>

	<p>1. Case 13222 (09-02-2024)</p> <p>PCN: First Coastal</p> <p>Providers: Beacon Medical Practice</p> <p>For Information: East Lincolnshire Area Locality</p> <p>Has recently moved to the area. Much better than previous GP Practice. All staff friendly and welcoming. Particularly reception staff who are always nice. No problem getting an appointment. Happy with GP and all services. Would highly recommend to a friend or family. Finds in general more activities and warm spaces for the older person in Skegness much easy to access.</p> <p>Signposting</p> <p>1. Case 13218 (09-02-2024)</p> <p>Providers: COMMUNITY SUPPORT SERVICES, Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)</p> <p>Individual had attended Jobs Fair at The Storehouse, Skegness. Accessed Healthwatch Outreach as saw information about Volunteering. Had been told by Jobs Fair that volunteering might be a way back to employment. This individual has spent some time in prison for what they describe as minor offences. Has lived experience of Mental Health issues, and has academic qualifications in psychology and counselling. Enjoys talking to people, interested in mens mental health, and feels that they are articulate and would enjoy the opportunity to move forward with their life. Would like to work for mental health trust eventually. Discussed peer supporters for mens mental health and other opportunities for volunteering.</p> <p>Notes / Questions</p> <p>Healthwatch provided a number of places for volunteer roles</p> <p>2. Case 13299 (21-02-2024)</p> <p>PCN: East Lindsey</p> <p>Providers: Lincolnshire Integrated Care Services (ICS/ICB)</p> <p>Patient completed women's health survey and requested information on help with weight loss diet exercise for perimenopause</p> <p>Notes / Questions</p> <p>Healthwatch provided One You information or to speak with their GP</p> <p>Provider Response</p> <p>Patient update - I'm dealing with it with supplements and gym and exercise and I've joined slimming world so hoping to move forward</p>
<p>Lincolnshire Integrated Care Services (ICS/ICB) x 3</p> <ul style="list-style-type: none"> • 2 x General Comment • 1 x Signposting 	<p>General Comment</p> <p>1. Case 13250 (14-02-2024)</p> <p>Providers: AJM Healthcare</p> <p>Disability Forum raised</p> <ul style="list-style-type: none"> • Waiting list for a wheelchair assessment – group member reported having to wait more than 6 months for an assessment. In the meantime, they has less access to services and has decreased their independence. • Long waiting lists for pressure cushions for a power wheelchair <p>2. Case 13235 (13-02-2024)</p> <p>Providers: NHS 111 Service</p> <p>NHS 111</p> <p>Questions asked were quite leading and the operator had already made their minds up - the worst type of medical assumptions to make. Really could of been using AI as the person was making assumptions at least a computer can not do that - they have not seen it all before</p> <p>Notes / Questions</p> <p>No personal details provided.</p> <p>Signposting</p> <p>1. Case 13328 (26-02-2024)</p> <p>Providers: Lincolnshire Integrated Care Services (ICS/ICB)</p> <p>Patient looking for support groups for Menopause in Lincolnshire.</p> <p>Notes / Questions</p> <p>Healthwatch provided information on support groups in Lincolnshire</p>
<p>South Locality x 2</p>	<p>General Comment</p>

<ul style="list-style-type: none"> 2 x General Comment 	<p>1. Case 13197 (06-02-2024)</p> <p>PCN: Spalding</p> <p>Providers: Beechfield Medical Centre</p> <p>For Information: NHS 111 Service</p> <p>My spouse was in a great deal of pain and wanted to talk to someone about increasing their medication to help manage their pain. Spouse spoke to the Surgery at 9.30am who said they were fully booked and spouse was advised to phone 111. They then sent an emergency ambulance. They arrived but of course could not help with medication. This may have been prevented the emergency ambulance from going to an emergency.</p> <p>Notes / Questions</p> <p>Healthwatch suggested contacting the Practice Manager.</p> <p>Healthwatch asks - under these circumstances are pre-bookable appointments available for patients to discuss medications?</p> <p>2. Case 13336 (28-02-2024)</p> <p>PCN: Four Counties</p> <p>Providers: Peterborough and Stamford Hospital</p> <p>My son is 16, has downs syndrome. He has an EHCP so will be transforming and due a review. He has been discharged from Children's Services. Audiology say he's on the list to be seen, but missed 3 years, his ear is damaged but told we just have to wait.</p> <p>We use Peterborough services but live in Stamford and activities are all miles away. They are at school in Northamptonshire and want to find some social/sports for them nearer to us when home, wants people of similar age to himself, not going out with me all the time.</p> <p>Notes / Questions</p> <p>Healthwatch provided PALs information for the hospital. Also Connect to support, LPCF information</p>
<p>South West Locality x 1</p> <ul style="list-style-type: none"> 1 x General Comment 	<p>General Comment</p> <p>1. Case 13298 (21-02-2024)</p> <p>PCN: K2 Healthcare Sleaford</p> <p>Providers: Lincolnshire Community Health Services NHS Trust (LCHS)</p> <p>I've seen a poster listing events across the county, where people can go to find out more about support for Long COVID. However, if you need a referral you then have to go to your GP. I'm concerned this will fill up GP appointments even more. If you have made the effort to go to the long COVID support day, then can't you get referred from there, or maybe a self referral instead of having to make a GP appointment.</p> <p>Notes / Questions</p> <p>No personal details provided.</p>

Not Specified

Area	Case Details
<p>All Areas x 1</p> <ul style="list-style-type: none"> 1 x Signposting 	<p>Signposting</p> <p>1. Case 13315 (23-02-2024)</p> <p>Providers:</p> <p>For Information: United Lincolnshire Hospitals NHS Trust (ULHT)</p> <p>Patient completed Menstrual Health Survey asking for information about Menopause Specialists</p> <p>Notes / Questions</p> <p>Information on Menopause clinic, menopause support groups provided</p> <p>Provider Response</p> <p>ULHT response -It is hoped that the information provided a satisfactory response.</p>