

Access to Health and Social Care Services in Sheffield

Key issues from February – March 2024

During February– March 2024, we gathered insights from 233 individuals accessing health and care services across Sheffield. A large proportion of responses focused on GP services, highlighting many positive experiences of care but additionally issues were raised relating to accessing appointments. People were concerned about noticeable staff shortages when visiting hospital and we heard about supply issues relating to medication and continence services.

Accessing GP services

Over the past two months, we gathered feedback from 143 people across 33 GP practices within the city. Of these, 91 people expressed satisfaction, praising knowledgeable and helpful staff they had encountered as well as the quality of care and treatment they had received.

We heard mixed perspectives when it came to accessing appointments. 48 individuals shared positive feedback about their booking experiences, commending online systems and triage processes, with some reporting they were able to access a same-day appointment. Many of these patients praised the system's simplicity and were relieved they could bypass lengthy phone queues.

In contrast, 40 individuals reported they had encountered difficulties, primarily associated with lengthy phone queues and limited appointment availability, with some reporting waits of up to six weeks. A small number of patients mentioned they had been offered appointments at other GP practices, sometimes across the city but were unable to attend due to feeling unwell or not being able to travel there. 22 patients reported GP online systems as being inaccessible for them preventing them from accessing appointments online. Four patients told us they were worried about their GP's future transition to online booking systems and the potential challenges it might pose when attempting to secure appointments.



“Used online booking for the first time. Very straightforward. Surgery contacted me by 9.00am with an appointment later that morning.”

“My visit was very helpful, thank you so much!”

“I phoned the doctor 1 minute after lines opened. Said there was 65 in the queue.”

We heard about various issues linked to referrals. Several patients told us they thought they had been referred to other services such as mental health teams or specialist care but later found no referral had actually been made. Some discovered administrative errors had occurred at the point of referral but no follow-up work had been undertaken to resolve these issues. Feedback was also shared relating to instances where individuals felt dismissed and unheard when trying to access referrals. Some had to assert themselves and, in some instances, initiated a formal complaint. Furthermore, we heard of cases where people had been referred to secondary services for treatment but found them unhelpful resulting in them having to wait for an alternative referral elsewhere.

“I thought I had been referred but weeks later only found out by chance when phoning the practice, I hadn’t.”

During their appointment some patients assumed they were speaking with a General Practitioner however later discovered it was in fact a different member of the multidisciplinary team. These patients stated staff should ensure they introduce themselves at the beginning of the appointment to avoid any necessary confusion.



“Pharmacist called as arranged and we had a sensible discussion around any options on my prescriptions.”

Patients expressed frustration relating to frequently seeing different GPs and Locums. Some mentioned they often spent a significant amount of time trying to explain their previous medical history leaving little time to discuss their current concerns.

Mixed feedback was shared relating to medication reviews. Whilst some found them beneficial due to receiving helpful advice and information others described the process as being unhelpful, feeling it was simply a tick box exercise.

Care in hospital

We heard 45 cases of mixed feedback from individual experiences of hospital services. 12 people shared positive stories of the high quality treatment they had received. They highlighted friendly and caring staff were key to feeling comfortable in hospital. Praise was provided for areas such as cardiology, G2, the hand clinic, breast screening, day surgery, A&E and the Acute Medical Unit (AMU).



“I see the same surgeon every time at Sheffield hand clinic and she is the warmest, caring professional.”

A large proportion of inpatients and outpatients stated they had noticed a shortage of staff across departments during their visits. Some of these patients commended staff for trying to overcome the pressures they were

facing to maintain delivering quality care whilst others felt as though staff shortage had impacted on the care they had received.

15 individuals expressed concerns relating to A&E. The primary cause of dissatisfaction was lengthy wait times. For example, one person experienced an 11-hour wait but had to leave without being seen due to childcare issues. Another individual reported waiting for 24 hours in a cubicle bed due to bed shortages on the ward they were being transferred to. A lack of communication was also highlighted as individuals often did not receive updates on their care. Patients noted when trying to raise any concerns, they felt fobbed off or encountered unprofessional attitudes from staff. Furthermore, we heard from people and their families who required attention with personal care. Feedback was shared that they were left in wet or soiled clothing for prolonged periods of time before receiving assistance. Additionally, due to a lack of buzzer access, some individuals with limited mobility were unable to seek assistance when needing to use the toilet.

We heard people may be reluctant to attend A&E because they were worried about the long waiting times. Often people are not aware of Minor Injuries and are not always in a position when unwell to carry out research to find out which service is most appropriate for their needs. They stated more publicity and communication about different services would be helpful to help spread the word.

Feedback relating to medication

Feedback was shared from some people unable to obtain their medication due to shortages. Some were receiving regular updates from their pharmacy to inform them they were still trying to source the medication. They stated how important this communication was to them.

Patients reported on occasions when they had their prescriptions delivered with missing items, they received no explanation as to why. This left them uncertain whether the issue stemmed from medication shortages or another cause. Some of these patients couldn't visit the pharmacy in person or were unable to speak to someone on the phone, so resolving the issue for them was challenging.



“Seen in a&e. Triaged quickly but had to wait for around seven hours to be admitted.”



“We were left alone in cubicles for hours (...) laying in her own mess.”



Mixed views were shared by patients taking specialist medications. Some people who were initially prescribed specialised medicines by a consultant were happy for their GP to take charge as they could order their prescription online which was convenient for them. Other patients expressed a preference for a consultant to continue prescribing their specialised medication. They noted that when their GP had managed the medication, there were frequent attempts to adjust the dosage. These patients felt that their GP's understanding of their condition and the specialised medication was insufficient.



Limited options available for people contacting South Yorkshire Integrated Care Board

We discovered South Yorkshire Integrated Care Board (SYICB) no longer maintain a dedicated switchboard service for public enquiries. Instead, a pre-recorded message directs callers to visit South Yorkshire Integrated Care Board's website. Currently, the only available method of contact for members of the public is via email, which is inaccessible for some. Those who have emailed reported significant delays in receiving responses, particularly from teams handling matters relating to Continuing Healthcare (CHC) and complaints. Upon contacting South Yorkshire Care Board, we were informed that due to a building move they are currently reviewing the telephone service.



Feedback was provided regarding the handling of primary care complaints by the South Yorkshire Integrated Care Board too. Individuals mentioned that this process was frequently delayed due to a backlog of complaints and staff shortages.

Supply issues relating to continence services

We heard in some cases when individuals were discharged from hospital to a temporary care home, they should receive a week's supply of continence pads. However, they typically received only 1 or 2, pads leaving the care home to try and make up the shortfall. Ongoing issues were reported more generally relating to the allocation of continence supplies and the quantities provided. Whilst individuals are given a specific amount to last a 24 hour period, this amount often proves to be insufficient but the current system doesn't seem to have the flexibility to request more.



Pharmacy First

People shared their views about the [Pharmacy First](#) scheme which was launched by the government and NHS England on 31 January 2024. Patients can now get treatment for seven common conditions directly from their local pharmacy, without the need for a GP appointment or prescription. People told us they generally felt positive about the scheme but stated it would be helpful if there was information available about which Sheffield pharmacies were participating in the scheme and how the service could be accessed e.g., virtually, by phone or in person.

“(…) while it says to check on the link there is no link to show which pharmacies are operating the system and if they are how”.

Feedback relating to mental health services.

Feedback was shared relating to certain leaflets that were displayed in a central area of the East Glade waiting room. The leaflets contained “disturbing and upsetting” information about suicide attempts and religious messaging that could potentially cause undue distress to service users, their families, or carers. It was suggested the leaflets should be replaced with more useful information, such as service user feedback surveys, which would be easier to locate and access.



“Ended up having to pay privately to get appropriate mental health support”

Seven people got in touch about the lengthy wait times they were experiencing when trying to access mental health services such as primary mental health teams and recovery services. Individuals expressed concerns about the detrimental impact this was having, and stated interim support available in the meantime was not helpful. A few individuals also stated the strict eligibility criteria in place when trying to access certain mental health services posed a significant barrier. Two people mentioned having to resort to funding private treatment themselves in order to access the necessary support they required.

“The prolonged long wait time for these services makes mental health worse.”

Others said they found the crisis team unhelpful after disclosing they had suicidal thoughts. They didn't get the help they needed and was told they would be contacted at a later date but didn't receive a call. Additionally, we heard from those already accessing support with the recovery team they told us they had received little contact due to staff illness.

Access to NHS dentistry

Four people got in touch this period to access advice around initiating a formal complaint. These were for different reasons – including being ‘deregistered’ from a practice, poor care and treatment, and not providing



reasonable adjustments. Five people requesting help to find a dentist. They had tried calling a few dentists locally but all had lengthy waiting lists in place. One of these people and their family had not managed to see a dentist for four years. We regularly contact dentists across Sheffield to get an accurate picture of which practices are accepting new NHS patients so we can signpost people to them. After we called round in March, we discovered just three practices across the city were able to offer appointments to new adult NHS patients.

“It is so difficult to get a dentist these days, I have been trying for so long to find one”



Impact from our last briefing (Dec-Jan 2024)

Sheffield Teaching Hospitals and Sheffield Health and Social Care Trust have responded to our last briefing, outlining how they plan to address areas for improvement and have made the following comments outlined in blue:

Response from Sheffield Teaching Hospitals

Issues were raised in our last briefing relating to instances where patients attending A&E with physical health issues felt that they were not taken seriously because they had previously sought care at A&E for their mental health. All patients presenting at A&E are assessed and a decision regarding treatment or discharge is made based on their clinical condition and urgency of need, and previous attendances for mental health care should not impact on the assessment of clinical need when being triaged. Anyone who is unhappy about their experience is encouraged to contact PALS (Patient Advice and Liaison Service) on 0114 271 2400 or email sth.pals@nhs.net who will work with the service to resolve the complaint.

When contacting departments issues were raised due to out of date or incorrect numbers being provided. The communications team have added a message to the ward number webpage which states they are currently updating contact numbers and to call switchboard if in doubt to be put through to the right department. Switchboard 0114 2434343 (<https://www.sth.nhs.uk/contact-us/ward-numbers>)

Patients were unable to find a contact number for the Patient Booking Hub online/ experiencing long waits for calls to be answered. Patients are given the correct contact details on their appointment letter which enables them to get direct access to the department or service they are visiting to query or change appointments. This is why there is not one single number for the booking hub on the Trust website. The Patient Booking Hub are also currently recruiting members of staff to expand their team and hope to fill these vacancies as quickly as possible.

Response from Sheffield Health and Social Care Trust

Concerns were shared about the lack of communication between different mental health teams, patients, and the services supporting them. Services will continue to work on internal communications, people are complex and handing over sensitive information can take time to ensure services have a shared understanding of how to best support people's needs. In the Community Teams we are considering how people are able to contact the team.

Issues with the Single Point of Access (SPA) phone line was reported when a service was trying to make a referral. We are sorry that people have had issues with accessing the SPA phone line. We realise that there were some issues with redirection on the phone lines and we have undertaken some additional work to try and address. Thank you for bringing this to our attention, we hope that this has now been resolved.

This summary of key issues is a snapshot of what we are hearing about. We want to reflect the experiences of people who share their stories with us, and we hope that it can help services, and commissioners of services, by indicating potential areas of focus. It is based on:

- Experiences that members of the public share with us through our information and advice service
- Feedback shared by voluntary sector partners who support clients in Sheffield
- Stories shared through Care Opinion, who we've partnered with to provide a feedback-sharing platform

Want to share your own experience? Get in touch

Online: healthwatchsheffield.co.uk

Email: info@healthwatchsheffield.co.uk

Phone: 0114 253 6688

Text or phone: 07415 249657

