



Healthwatch Lincolnshire

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May Patient Experiences 2017

This report has been produced by Healthwatch Lincolnshire to highlight the patient, carer and service user health and care experiences shared with us for the period 1 to 31 May 2017.

During this period we received a total number of 151 experiences, 53 of these have been posted directly to our feedback centre (to read individual comments regarding individual providers please visit www.healthwatchlincolnshire.co.uk and select relevant provider details), with the remaining 98 being contained in this report.

Healthwatch Lincolnshire has consistently over the past 3 years reported concerns raised with us by patients about length of waits to get an appointment with their GP. In May we have again received a number of comments on this subject but the situation appears to be getting worse, 2 examples of the experiences we have received (from different areas of the county) are:

- Patient went to see if they could get an appointment with GP at 7.30am there were 7 people in front of the patient and 40 people behind. Patient did not get an appointment, they wanted some advice about their condition. Couldn't see GP so went to Urgent Care at Skegness Hospital instead to see if they could give advice.
- Patient experienced trying to make an appointment with their GP very difficult. Called at one point 186 times to make an appointment, when reception answered no immediate appointment available.

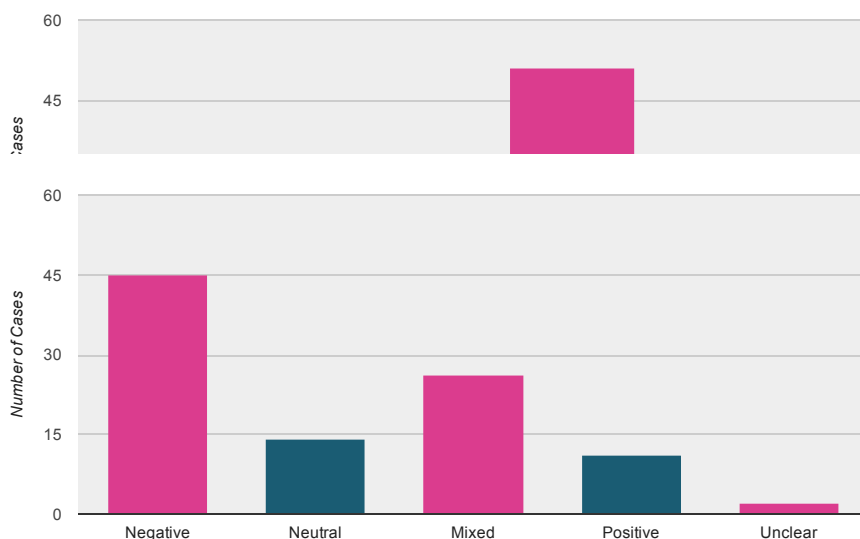
Contained within this report is also some very informative feedback from a service user group with regards to various access issues at Pilgrim Hospital. Learning through user experiences such as this is very useful and maybe something other providers would benefit from.

Statistics

Total cases: 98

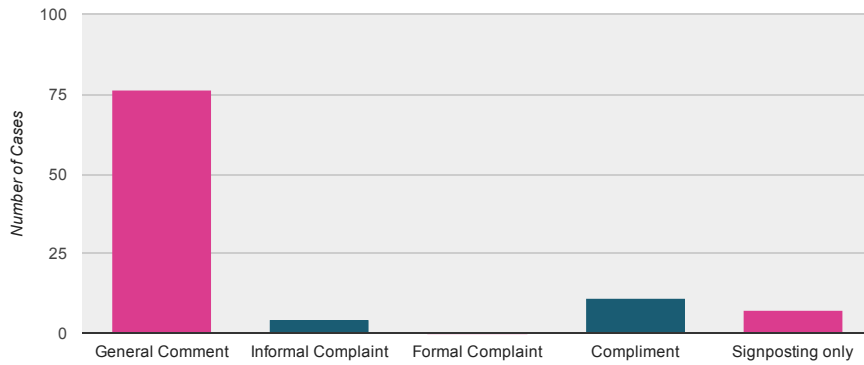
Theme Areas

Theme Areas	Cases
Access	25
Administrative	27
Treatment / Care	51
Rights / Wellbeing	9



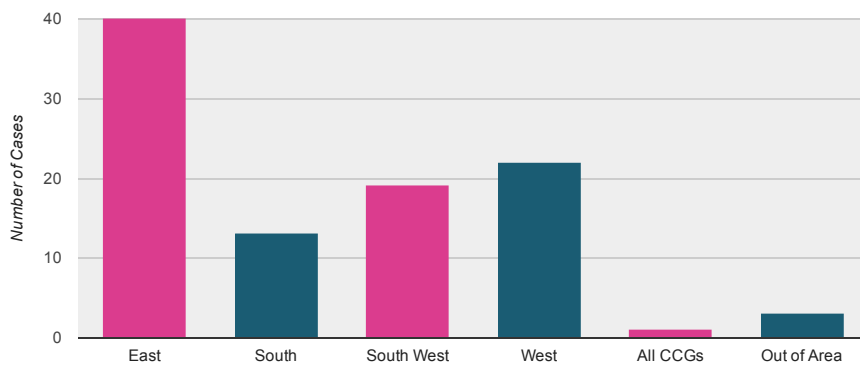
Sentiments	Cases
Negative	45
Neutral	14
Mixed	26
Positive	11
Unclear	2

Case Types



Case Types	Cases
General Comment	76
Informal Complaint	4
Formal Complaint	0
Compliment	11
Signposting only	7

CCGs



CCGs	Cases
East	40
South	13
South West	19
West	22
All CCGs	1
Out of Area	3

<p>East x 2</p> <ul style="list-style-type: none"> 2 x General Comment 	<p>General Comment</p> <ol style="list-style-type: none"> Case 2785 (25-05-2017) Providers: Skegness + District Hospital Skegness Hospital Patient commented that they cannot walk very well or stand. Has a scooter but are unable to take it inside. Hard to get car close enough for their driver so they can try and walk with 2 sticks and hold onto the driver to get to the necessary clinic No details given Q) if disabled, are the patients given access to alternative modes of transport to access clinics easily. Is there any other support that could be offered in advance eg porter to help once arrived? Case 2790 (25-05-2017) Providers: Skegness + District Hospital Skegness Hospital Patient unable to get in to see GP, patient thought they'd suffered with a slight stroke, GP surgery informed patient to go to urgent care centre to get checked out. Unfortunately we have no patient details or which GP surgery this experience relates to.
<p>South x 1</p> <ul style="list-style-type: none"> 1 x General Comment 	<p>General Comment</p> <ol style="list-style-type: none"> Case 2746 (11-05-2017) Providers: Lincolnshire Community Health Services NHS Trust (LCHS) Partner suffers with early onset dementia required physiotherapy for problem with hand. Physio did this at home and discharged afterwards. Partner concerned as unsure why their relative was discharged, physiotherapist at the time informed that they would send a report to the GP, on contacting the surgery a few weeks later surgery had not received the report. HWL - contacted PALS on their behalf to see if a report had been sent to the GP, the physiotherapist had made contact with the surgery and informed them but no report had been written - this has now been sorted. Patient, Carer & Partner were given exercises to do daily. HWL also contacted the GP surgery to ensure that they had received a copy and would be referring onto Johnson hospital for further care as directed by Physio. GP surgery would contact the partner with update. No further action needed.

<p>West x 2</p> <ul style="list-style-type: none"> • 2 x General Comment 	<p>General Comment</p> <ol style="list-style-type: none"> 1. Case 2770 (23-05-2017) Providers: John Coupland Hospital John Coupland Hospital Blood room staff at Hospital very friendly and quick. Midwife appointments can take a long time, after last scan had to wait over 2 hours to see the midwife for a 5 minute appointment. 2. Case 2774 (24-05-2017) Providers: John Coupland Hospital John Coupland Hospital - Blood Clinic/Reception Patient waiting in blood clinic room, took longer than expected. Patient has Parkinson disease and had just started to attend a support group, patient wanted to let them know they would not be attending as running late. Asked reception for contact who said they couldn't do it. Patient found someone else who could assist, who explained the computers were down and that would have been the reason the receptionist were unable to assist. Patient commented if they had been informed of that they would have understood not just that they couldn't help. Feels there is a lack of communication and understanding.
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Primary Care Services

CCG Area	Case Details
<p>East x 7</p> <ul style="list-style-type: none"> • 6 x General Comment • 1 x Signposting only 	<p>General Comment</p> <ol style="list-style-type: none"> 1. Case 2784 (25-05-2017) Providers: Beacon Medical Practice Beacon Medical Practice Patient commented that despite using online and phone booking systems they have been unable to access a GP appointment and have no possibilities of an appointment in the next 2 months. Has visited the surgery but have been informed to go to A&E or contact 999. The possible cause of patients illness was a chest infection which could be easily treated by the GP / Nurse but cannot get an appointment. HWL - advised to make contact with the Practice Manager 2. Case 2788 (25-05-2017) Providers: Beacon Medical Practice Beacon Medical Practice Can't get an appointment, 4 weeks wait. Can go to the surgery at 6am and wait but patient unable to get there. No continuity seeing different GPs, don't always explain medications, do have an annual review. Difficult for partner to hear their name as deaf and music playing during waiting making it hard to hear. Q. Does the surgery offer any additional support for people with disabilities such as sensory impairment to ensure they get the most from each visit? 3. Case 2791 (25-05-2017) Providers: Beacon Medical Practice Beacon Medical Practice Patient went to see if they could get an appointment with GP at 7.30am there were 7 people in front of the patient and 40 people behind. Patient did not get an appointment, wanted some advise on their condition. Couldn't see GP so went to Urgent Care at Skegness hospital instead to see if they could give advise. HWL - on behalf of patients, difficulties getting an appointment seems to be getting worse, the experience this patient has described is very concerning. How can the surgery ensure patients most in need are able to get timely appointments to see a GP? 4. Case 2798 (25-05-2017) Providers: Beacon Medical Practice Beacon Medical Practice Elderly relative concerned as it is very difficult, almost impossible to get an appointment, by phone, in person or on-line. Find it really scary because partner is very ill. Don't want to block up hospital, patient initially had a cold, but as couldn't get in to see GP needed a nebulizer. Patient feels receptionist attitude was less than helpful, just informed them that they would need to stand outside from 7.30am to see if an appointment became available. Understands that the surgery are hoping to get 2 more GPs soon which they hope will make things better. 5. Case 2759 (15-05-2017) Providers: East CCG, Marsh Medical Practice Marsh Medical Practice Elderly patient felt dizzy, collapsed and vomited continually for a while. Patient rang GP surgery, only to be told to contact 111 service. 111 Service did not get back to the patient so a friend called 999.

to be able to contact the service. The service did not get seen to the patient so a friend called 999, still no call back, so friend took the patient to Louth Hospital minor injuries. Whilst there staff were very good, patient was transported to Lincoln for further tests as couldn't be certain if heart attack or stroke. After tests it seemed the patient has labyrinthitis, sent home during the weekend and advised to contact GP if necessary. Patient felt dizzy in the morning, so made contact with the surgery to see if they could book an appointment. Receptionist cut them off during sentence and said 'none this morning' in a rude manner and patient felt they were very dismissive, not offered an appointment with nurse practitioner or allowed the patient to finish their sentence. This was the second time this had happened to this patient. They are not concerned for themselves, but should a patient call and get this kind or reception it may have further consequences.

HWL - feels there maybe some Customer Care training required

6. Case 2763 (18-05-2017)

Providers: The New Coningsby Surgery
New Coningsby Surgery

Parent contacted GP surgery as concerned about small child and wanted to book an appointment. The patient was informed that they were not booking appointments due to the IT equipment being down after Cyber attack, and advised the Parent to take small child to A&E to be seen. It was not an emergency but requested some advise, parent felt their concerns were dismissed. Took child to pharmacist and was offered some good advice, which they followed. A number of patients commented they had tried to get an appointment but were informed to go to A&E by the receptionist on duty.

HWL - Surely this is misuse of A&E as they would be under the same limitations and not an emergency.

Signposting only

1. Case 2726 (02-05-2017)

Providers: NHS England

Resident of East Lincolnshire looking for a dental practice in Horncastle. Gave resident options of closest dental practices.

HWL signposted this patient

South x 7

- 6 x General Comment
- 1 x Signposting only

General Comment

1. Case 2736 (04-05-2017)

Providers: Munro Medical Centre

Patient made contact with GP surgery re having ears syringed. Patient informed this service was no longer available at the surgery and they would need to purchase a kit from the pharmacy themselves. To get this done privately would be at a cost and as a pensioner cannot afford this. Patient feels this should be provided on the NHS.

HWL - have made contact with the GP Practice to ascertain why the patient was not offered a referral to local hospital for ear syringing. Answer received, however due to the incorrect information in the first instance the patient paid privately to have this done.

2. Case 2753 (11-05-2017)

Providers: Munro Medical Centre

Munro Medical Centre

Patient commented that they felt the GP never listened to them, felt had to 'beg' for a referral, suffers with a debilitating condition. Had previously been referred to to rheumatology department and was discharged, felt did not have a satisfactory consultation. Wanted to know if they could be referred for a 2nd opinion. Has written a letter of complaint to the surgery regarding GP.

3. Case 2795 (25-05-2017)

Providers: Munro Medical Centre

Munro Medical Centre

Several patients commented that on suffering with fibromyalgia they feel they do not get the support they need from GP at surgery. Support group has offered to take some information into the surgery for the GPs so they have a better understanding of how it effects patients and their daily lives.

HWL Q) is this something we can facilitate to assist the surgery?

4. Case 2802 (25-05-2017)

Providers: Munro Medical Centre

Munro Medical Centre

Getting in to see a GP is impossible. Better to see Practice Nurse. Practice has got too big and is very busy.

5. Case 2823 (31-05-2017)

Providers: Munro Medical Centre

Munro Medical Centre

Patient commented they very rarely go the the surgery despite having a debilitating condition. Patient stated they always came away in tears feeling worse than when they went in, not valued or understood. The odd member of staff treats you with respect and understanding, but they don't stay

long and leave.

No patient details to enable HWL to follow this up

6. **Case 2796 (25-05-2017)**

Providers: South CCG

Relative unhappy with care parent has received at the Galletly GP surgery. January 17 parent was admitted to Peterborough Hospital on a 999 call. Had a CT Scan – Consultant informed family member that parent had a severe stroke and had previously had a few – when this was questioned the Consultant did back track and say there was no evidence that parent had had a stroke ever. However it was on the computer on their medical notes.

Dr called the relative to inform them to stop a certain medication which they had been on since 2011 to 2017 – which was stroke medication – this is what the patient wants looking into. Parent has mental capacity – family member has interim Power of attorney. Has been to court previously in relation to Power of attorney of 2015 where 4 members of the family stated parent did not have capacity – this has now been resolved. Parent moved surgery now, but feels this needs looking into

HWL - made a referral to POHWER with patient consent

Signposting only

1. **Case 2735 (03-05-2017)**

Providers: NHS England

Patient and family newly moved into the area and are trying to locate an NHS Dentist in Moulton Chapel area.

HWL signposted to possible dental services in area

South West x 7

- 6 x General Comment
- 1 x Compliment

General Comment

1. **Case 2794 (25-05-2017)**

Providers: Ruskington Medical Practice

Ruskington Surgery

Patient went to see GP suffering with arthritis condition. Informed patient to carry on taking the anti inflammatory gel, was hoping to have some further treatment options offered.

HWL - advised patient to contact Practice Manager

2. **Case 2808 (31-05-2017)**

Providers: St Johns Medical Centre

St Johns GP surgery

Long time to get an appointment - week to 2 weeks wait for a GP. Only go when needs to but find it difficult to get access. Happy to see any GP as they are all good, has a regular 6 monthly check to review medication which is good.

3. **Case 2807 (31-05-2017)**

Providers: Swingbridge Surgery

Swingbridge Surgery

Patient went to the surgery with pains. Had blood tests, informed everything ok. However was soon diagnosed with prostate cancer. If you have an emergency appointment they will only look at the one thing - not the overall problems. Patient feels they are just a number.

4. **Case 2820 (31-05-2017)**

Providers: Swingbridge Surgery

Swingbridge Surgery

Can't get an appointment. Had problems with getting pain relief which they require on a regular basis. Problems as they were prescribed by a Nottingham Hospital. Patient thought it was all now electronic so should show up on computer? Had to see the GP first was informed could sit and wait but wasn't informed the GP was running 50 mins late. Find it difficult to get past the receptionist for anything.

No patient details given

5. **Case 2818 (31-05-2017)**

Providers: The Welby Practice

Welby GP Surgery

Patient commented they did not feel the service was very good, however when they see the Nurse Practitioner they find them very good. Feels it is run as a business not for caring for patients.

No Patient details given

6. **Case 2816 (31-05-2017)**

Providers: Vine House

Vine House Surgery

Very difficult to get an appointment. Lots of Nurse Practitioners and see these instead of GP. Difficult to see own GP

Compliment

	<p>1. Case 2806 (31-05-2017) Providers: The Welby Practice Welby GP Surgery</p> <p>The practice has 2 surgeries. Harlaxton they look at everything you need when you go for an appointment. At Bottesford you can see the same GP every time which is great. They care and follow things up if needed. GP phones patient at home and sorted out prescription because they were aware the patient required something different.</p>
<p>West x 5</p> <ul style="list-style-type: none"> 5 x General Comment 	<p>General Comment</p> <p>1. Case 2765 (18-05-2017) Providers: Caskgate Street Surgery Caskgate Surgery</p> <p>Patient made contact with HWL regarding prescriptions and not getting the medications needed in time. They have received a letter from the Doctor saying they will no longer be registered after the 20th May – unsure if this means the surgery or just that particular GP?</p> <p>Patient moved across from Pottergate surgery when it closed. Did not have any problems during the time they were registered with them and doesn't understand why things have all of a sudden changed.</p> <p>Patient is insulin controlled diabetic, doesn't understand why</p> <p>HWL - have made contact with the surgery. Surgery have responded to HWL the patient is no longer registered with the Practice due to patient/GP breakdown. HWL gave patient an alternative GP surgery.</p> <p>2. Case 2768 (23-05-2017) Providers: Caskgate Street Surgery Caskgate Surgery</p> <p>Patient feels very happy with this GP surgery. When computers down patient went in to surgery to book an appointment, they agreed to see the patient then and would upload information onto the system when it was up and running, using paper records in the meantime. If needing to book an appointment it can take 4 - 5 weeks if not urgent. If urgent can see a Nurse and then if required you can see the GP.</p> <p>HWL - on behalf of patients, this approach demonstrates well how services can cope and continue in crisis such as the recent cyber attack many of our services were affected by. We heard many comments from patients with concerns that because computers were down they as patients could not be helped, patients were confused by this as they felt this should not have stopped services from dealing with them as people.</p> <p>3. Case 2773 (24-05-2017) Providers: Cleveland Surgery Cleveland GP</p> <p>Patient found trying to make an appointment very difficult. Called at one point 186 times to make an appointment when answered no appointment available. Needed to speak to GP about procedure as boundaries have moved and patient unable to have the procedure they were expecting.</p> <p>4. Case 2812 (31-05-2017) Providers: The Heath Surgery (Bracebridge Heath) The Heath GP surgery</p> <p>Patient commented they feel once a person gets to a certain age, the level of care changes. GPs attitude is 'what do you expect me to do at your age' so feels the level of care has changed.</p> <p>5. Case 2741 (11-05-2017) Providers: West CCG</p> <p>Patient commented that since there has been changes in the prescription ordering, they have experienced difficulties, taking 10 days or more for prescription to be ready. Patient ordered backup supply of antibiotics, inhalers and BP medication. After 3 months patient finally received medication which wasn't all present.</p>
<p>Out of Area x 1</p> <ul style="list-style-type: none"> 1 x Signposting only 	<p>Signposting only</p> <p>1. Case 2754 (11-05-2017) Providers: NHS England</p> <p>Patient requested information for dental practice in the Wisbech area. NHS choices not updated so difficult to give information to patients.</p> <p>HWL - gave Dentists in the area, if they had any problems to call HW back.</p>

CCG Area	Case Details
<p>East x 23</p> <ul style="list-style-type: none"> • 19 x General Comment • 4 x Compliment 	<p>General Comment</p> <ol style="list-style-type: none"> <p>Case 2783 (25-05-2017) Providers: East CCG, Pilgrim Hospital</p> <p>Patient informed at Skegness Hospital outreach clinic for Pain Management, that they were only allowed to have a maximum of 3 injections. After that people would need to purchase over the counter pain-killers. Patient feels this is a cost savings exercise and understands that hospitals out side of the county are allowing their patients to have more than 3. Patient also commented that the Acupuncture and chiropractic clinics at Pilgrim have now closed.</p> <p>Case 2787 (25-05-2017) Providers: Louth Hospital</p> <p>Louth Hospital - Orthopaedic/Surgical department</p> <p>Patient had procedure cancelled twice at Pilgrim Hospital, given the option of Louth Hospital for procedure. Cancelled again the offered another date - eventually had the procedure on the 4th date. Discharged after 24 hours to home address, lives on their own, extended family work so could not be present. Neighbour popped in once a day. The patient would liked to have spent another 24 hours on the ward to ensure they were ok.</p> <p>Case 2728 (03-05-2017) Providers: Pilgrim Hospital</p> <p>Pilgrim Hospital - Haematology</p> <p>waiting times could be improved, patient had been away overseas and impressed with their services.</p> <p>Case 2729 (03-05-2017) Providers: Pilgrim Hospital</p> <p>Pilgrim Hospital - Cardiology</p> <p>Patient commented they would like a free cup of tea whilst waiting.</p> <p>Case 2730 (03-05-2017) Providers: Pilgrim Hospital</p> <p>Pilgrim Hospital - A&E - Cardiology</p> <p>Admitted via A&E at 7pm, left sat in a wheelchair until 9am the following morning then admitted to a ward. Once on the ward care was very good.</p> <p>HWL on behalf of this patient waiting in a wheelchair 14 hours when they were clearly unwell (so unwell they required a bed), is surely not acceptable.</p> <p>Case 2731 (03-05-2017) Providers: Pilgrim Hospital</p> <p>Pilgrim Hospital - Oncology</p> <p>Staff always helpful, feels the departments do not talk to each other patient was sent to different parts of the hospital and when arriving they were not informed patient was going. Lack of communication in departments.</p> <p>Case 2732 (03-05-2017) Providers: Pilgrim Hospital</p> <p>Pilgrim Hospital - Haematology</p> <p>Delays are a big issue, patient not advised on arrival there would be a wait. Consultants are good, they listen and explain clearly. But high turnover of Consultants lately, so never see the same one twice.</p> <p>Case 2733 (03-05-2017) Providers: Pilgrim Hospital</p> <p>Pilgrim Hospital - maternity</p> <p>Patient commented they felt that patient information should be kept confidential. Recently had a miscarriage, people seemed to find out about this even though they hadn't told people about it, so unsure where the information had leaked from.</p> <p>HWL - advised the patient to contact PALS</p> <p>Case 2734 (03-05-2017) Providers: Pilgrim Hospital</p> <p>Pilgrim Hospital</p> <p>waiting times for results is very stressful, sometimes wait four or five weeks. Patient has phoned for the results which they feel should not have to do. Patient feels that sometimes the Consultant gets the results and no-one informs the patient of results including blood tests. Find car parking at the hospital very expensive and not enough parking spaces. On visiting a family member whilst in hospital 4 times over a period of time amounted to £24</p> <p>Case 2739 (04-05-2017)</p>

Providers: Pilgrim Hospital

Patient informed by GP surgery that they would need to contact MS nurse/specialist themselves to make an appointment. Patient confused as they thought they would require a referral from the GP to the specialist.

HWL - Contacted PALS to see if things had changed. - If the patient is newly diagnosed then they can only have an appointment through a referral process via a GP, if the patient is on-going and has already been through recently then there is the possibility that they can make their own appointment. information passed onto the patient and to make contact with PALS should they feel it necessary. HWL has informed the patient of this fact.

11. Case 2742 (11-05-2017)

Providers: Pilgrim Hospital

Pilgrim Hospital - Haematology

Not enough staff, waiting times been extended over appointment time, saw new Consultant as previous one left. Patient feels the systems require looking into.

12. Case 2762 (16-05-2017)

Providers: Pilgrim Hospital

Pilgrim Hospital

Patient admitted following a second stroke, but recovered from this quite well. However, then contracted Sepsis. Despite continued changes of antibiotic medication, this has not cleared.

Two weeks ago they started the process of discharging patient into a care home. The day before discharge, the patient was still on intravenous antibiotics as the infection still wasn't clear. Patient was discharged to the care home with oral antibiotics. Within 2 days their condition worsened, and a few days later was re-admitted and is now on Ward 6a.

Relative considers this as an unacceptable practice. Patient has been put through a lot of extra pain and discomfort because of the hospital discharge before clear of infection. There are many other things which have gone wrong and we haven't had reasonable explanation about, so at some point the family would like to meet with someone to go through these, but at the moment this is the pressing issue and one which we don't want repeating.

HWL - advised family to make contact with PALS and gave POHWER information.

13. Case 2764 (18-05-2017)

Providers: Pilgrim Hospital

Pilgrim Hospital - Care for the Elderly.

Consultant very thorough each patient given the time allocated, clinic was running 40 minutes behind, but patient understands and appreciates it. Results of recent tests given to the patient. Further tests required but patient aware of the reasons why this is needed. However feel that the Nurses do not keep patients informed when the clinics are running late.

14. Case 2766 (18-05-2017)

Providers: Pilgrim Hospital

Pilgrim Hospital - observations

Car park at front of hospital - In disabled car parking area money into meter the height and visibility was poor for anyone who arriving in a wheel chair or had sight problems. There was no lip where you put money in, so if you dropped the money, if in a wheelchair you would not be able to pick it up from the floor without seeking assistance to retrieve your money

Signage – main car park “Guide Dog Sign” only someone with an assistance dog was told that they could not use this area as the sign said guide dogs only **(there are 7 types of assistance dogs – what awareness training is given to all staff on this matter?)** Signs in area between disabled parking bays and main entrance – faded and too busy – quite confusing to understand

Outside Main Entrance – patients and visitors ignoring the fact that this is a non smoking area. Main patients in their pyjamas carrying oxygen / masks and other equipment outside and smoking in this area and then re entering the hospital **(contamination / cross infection etc issues – how does the Trust deal with these??)**

Main Lifts in Tower Block – 2 out of operation for maintenance (linked probably to the recent fire in the Tower Block) - All lifts are used by everyone – during waiting time here, at one point there were over 50 people queuing up for the lifts including staff, maintenance staff, rubbish and hospital equipment, inpatients transported in beds and wheelchairs (some visibly very poorly!). **What about issues of Infection Control / Contamination? Why is there no designated lifts for inpatients and moving maintenance equipment / rubbish which included materials waste materials around the hospital away from the general public / inpatients?**

Touch Screens – excludes visually impaired patients – no voice control or activation buttons or braille. No anti bacterial washes near the screens. They are placed at far end of the double doors away from the lifts and during my time looking at the surroundings, no one used the washes that were provided. Are they in the right place? All the staff that walked through to use the lifts did not use the washes and therefore no one else did either. Area around their lifts – silver and chrome surround with blue / cream walls – hard for distinction between areas **(blind / partially blind could not distinguish the different areas so have to ask for assistance from someone if they use the lifts).**

Getting around the hospital – if the 2 patients with sight impairment come to the hospital usually try to ask for help from the volunteer at the main reception area. There isn't always someone around and they stressed that a member of the staff on numerous occasions will escort them to the place they need to be. Too many obstacles are left in corridors in the hospital from chairs, trolleys, rubbish and the 2 patients with sight loss have to navigate around a maze of obstacles as they travel around the hospital. On many occasions this has become quite hazardous for them. They usually take the same route through the hospital as they are more familiar with those corridors and can try to anticipate what might be there. However, not everyone is able to do this? ***What is the Trust going to do to ensure patients safety due to mobility or disability issues?***

HWL - themes came from a group of service users.

15. Case 2792 (25-05-2017)

Providers: Pilgrim Hospital

Pilgrim Hospital - Pharmacy

When given a prescription at the hospital it takes hours for it to be made up, cannot go outside of the hospital to get this prescription made up. Only one person on duty at the time the patient was there.

HWL - we receive many comments with regards to unacceptable waits in pharmacy. Delays here can mean the difference of a patient being able to go home in a timely fashion (and continue their recovery period) or sitting for many hours in the hospital. Could more pharmacy staff be on duty to ensure patients are able to have their medication dispensed quickly?

16. Case 2797 (25-05-2017)

Providers: Pilgrim Hospital

Pilgrim Hospital - Pharmacy

Patient on Chemo drugs and needs to collect once a month. Had to wait for over an hour sometimes 1 hour wait in the clinic then 1 hour wait at pharmacy. Now can collect at Lloyds pharmacy however the script has not always been sent through.

no patient details provided

17. Case 2799 (25-05-2017)

Providers: Pilgrim Hospital

Pilgrim Oncology

Cancelled appointments without informing the patient. So went along to the appointment and was informed no medical staff, said a letter had been sent out to cancel the appointment, but patient did not receive anything. Apart from that the service is ok, however patient does have to travel via 2 bus routes to get to the appointments.

No patient details given

18. Case 2814 (31-05-2017)

Providers: Pilgrim Hospital

Pilgrim Hospital - consolidated comments;-

Blue Badge Holders patients relatives using the system to park in disabled bays but the person is not with them (hard to prove I know but on the day of the visit, this was seen to be happening and they were not picking up anyone from the hospital Appointment letters for patients with sight loss or impaired sight – letters are not sent in large print to patients or sent electronically to blind patients that can be read by their software. Patients are not asked what is their preferred format for receiving information in general. Audiology Consultant when deaf / Deaf patients attend appointments the Consultant spends his time looking at the screen on the computer rather than facing the patient – this means that the patient does not HEAR what is being said, and those that LIP READ are not able to lip read because the Consultant does not face the patient

Lack of Nurses trained to assist with paraplegic patients – in general, many patients who are confined to wheelchairs find many staff that they come in contact with do not know how to help / support and assist them in particular when it comes to general well being such as taking them to the toilet. They are often wheeled into a toilet front on and many need to get out of the wheelchair side on, often there isn't enough room to do this next to the toilet. Designers need to take this into account when designing facilities for disabled patients.

2 patients who went through the volunteer training sessions with ULHT over 6 months ago have not been asked to do any volunteering within the Trust. They currently feel that it was a tick box exercise to say that the Trust has got "disabled" people on the list but they are not being used. Both patients have sight loss / or blind.

19. Case 2789 (25-05-2017)

Providers: Skegness + District Hospital

Skegness Hospital - Outreach Vascular

Advice is good and helpful. Always speaks to spouse rather than the patient, which they don;t like as its about me.

Compliment

1. Case 2745 (11-05-2017)

	<p>Providers: Pilgrim Hospital Pilgrim Hospital - Endocrinology</p> <p>Patient commented the Consultant involved them all the way, explained everything in full and wrote a report to GP whilst in the consultation which the patient found extremely efficient. Unfortunately the patient had to wait for 6 months from referral date to get the first appointment.</p> <p>2. Case 2800 (25-05-2017) Providers: Pilgrim Hospital Pilgrim - Haematology</p> <p>Staff do an excellent job in difficult situation. Looked after well and take time with patients, waiting times can be longer.</p> <p>3. Case 2801 (25-05-2017) Providers: Pilgrim Hospital Pilgrim - Chemo</p> <p>Department nice and helpful. Staff lovely, Consultant very kind and helpful.</p> <p>4. Case 2786 (25-05-2017) Providers: Skegness + District Hospital Skegness Hospital - Vascular - outreach clinic</p> <p>Wonderful, always helpful, brilliant care. Assists with dressing and undressing. Scan was quick and efficient.</p>
<p>South West x 8</p> <ul style="list-style-type: none"> • 7 x General Comment • 1 x Compliment 	<p>General Comment</p> <p>1. Case 2751 (11-05-2017) Providers: Grantham + District Hospital, Lincoln County Hospital Grantham / Lincoln Hospital</p> <p>Patient stated they had rectal bleeding had been to Grantham hospital and referred to Lincoln for an urgent procedure, patient concerned as not heard anything and tried to make contact with GP but couldn't get an appointment. Patient requested information to manage the bleeding until procedure date. Patient had made contact with 111 service and was waiting for a call back.</p> <p>HWL - contacted PALS to see if an appointment could be looked into as classed as urgent, and information to be passed onto the patient. PALS have asked the secretary to bring the referral to the consultants attention.</p> <p>2. Case 2780 (25-05-2017) Providers: Grantham + District Hospital Grantham A&E Closure</p> <p>Young child fell off bike, landed awkwardly forcing elbow to bend in wrong direction, snapping the bones which came through the skin. Parent called 999 only to be informed there were no ambulances available and there would be a wait. Young child bleeding quite badly, but as it was after 6pm Grantham A&E was closed. Parent had to take distressed child to Lincoln A&E themselves. Young child then needed to be transferred to QMC for emergency procedure which was undertaken via blue light ambulance. Parent concerned as due to the pain the child was in they were really concentrating on the child rather than the road, so lucky nothing happened on the first journey.</p> <p>3. Case 2782 (25-05-2017) Providers: Grantham + District Hospital</p> <p>Feedback in relation to an urgent referral not being sent to Derby, the cyber-attack should not have effected a fax being sent over as the Orthopaedic Secretary informed the Mother that they were going to fax it over last week after the patients Mother contacted them, to date this has not happened. Mother made contact with hospital again this morning to be informed that the secretary is not in, is someone covering her work? Young patient had to give up part-time job as cannot do this now due to hand problems, cannot play sport and is making them isolated. Injury means they are taking pain killers daily and they are concerned that they have been lost in the system and prolonging the unnecessary agony.</p> <p>HWL - Contacted PALS at Grantham Hospital, then made contact with PALS at Derby Hospital - patient now has an appointment in Derby.</p> <p>4. Case 2809 (31-05-2017) Providers: Grantham + District Hospital Grantham A&E</p> <p>Patient commented they feel the Grantham A&E department should be open all times, not restricted, has no transport so finds it hard if needed to go elsewhere. They are building more houses in the area where a full A&E is needed.</p> <p>5. Case 2810 (31-05-2017) Providers: Grantham + District Hospital Grantham Hospital</p> <p>Parking facilities great. Seen quickly, within 10 mins of appointment time. Patient commented they are not happy of the threat of closure. Have always found staff and Doctors helpful, willing and</p>

caring. Lovely hospital but concerned.

6. **Case 2811 (31-05-2017)**

Providers: Grantham + District Hospital

Grantham Hospital Pain Clinic

Patient commented they find the service excellent, from cleanliness to staff friendliness. Treatment offering patient equipment to try and see if it would help. Now funding withdrawn so no more treatment options available.

7. **Case 2815 (31-05-2017)**

Providers: Grantham + District Hospital

Grantham Urology Department

Patient phoned for an appointment by contacting the Urology Secretary, tried 5 times and couldn't get through. No way of leaving a message, no call divert. Never got to speak with the secretary. Hadn't had the scan at this point so the appointment was not needed until this had taken place. Feels the medical staff are very good its the admin side that let things down.

Compliment

1. **Case 2817 (31-05-2017)**

Providers: Grantham + District Hospital

Grantham Hospital - Emergency Assessment Unit

Patient found this service amazing, fantastic. Went on the day the computers crashed and they were excellent. Doctors took a little longer to come round but can't fault them. GP referred and the staff were aware and waiting for patient on arrival. Good skills from the Doctors they detected the problem and left no stone unturned. Very thorough. Staff were so patient in this situation they were in, very busy and some patients were abusive.

West x 10

- 8 x General Comment
- 1 x Informal Complaint
- 1 x Compliment

General Comment

1. **Case 2744 (11-05-2017)**

Providers: Lincoln County Hospital

Lincoln County Hospital - Paediatrics

Parent concerned autistic child was admitted, Consultant informed parents the child would require an operation, however at point of procedure it was cancelled by an alternative Consultant as not warranted. Plaster placed on green fracture, child was fine with this, however when splint put in place child unhappy with this as 'feels funny' and kept taking it off. No further x-ray taken to confirm if the fracture was in place. Child unable to sleep, cannot do activities and doesn't understand why a plaster cannot be put back on. Arm bent in a funny position.

UPDATE - Parent contacted HWL to say had an appointment at fracture clinic where a plaster had been placed on, child much happier, however they have asked for a 2nd opinion around the arm still being bent out of position, although informed that this will take time to go back to normal. Child much happier.

HWL - Advised parent to contact PALS,

2. **Case 2748 (11-05-2017)**

Providers: Lincoln County Hospital

Lincoln County Hospital - Day Unit

Friend concerned as patient had been discharged from Lincoln County Hospital and on the discharge letter it stated the patient had been admitted to another hospital to have an abdominal procedure, even though the patient informed the Doctor they had not been to this hospital and was in fact waiting for a referral to them, it was still in the patients discharge notes. Patient concerned that this information is incorrect and would be on their medical records. Patient also informed would not be sent home without a bowel movement, this did not happen. No care plan in place as patient lives on their own needs assistance.

HWL - contacted PALS

3. **Case 2758 (12-05-2017)**

Providers: Lincoln County Hospital

Lincoln County Hospital

Patient recently admitted to hospital, found the ward dirty, bed sheets not changed and the standard of nursing poor.

HWL - directed the patient to PALS

4. **Case 2761 (16-05-2017)**

Providers: Lincoln County Hospital

Lincoln County Hospital.

Patient had a procedure in 2014 for removal of gallstones, only after the procedure were they informed that the gall bladder had to be removed, previous to this it was not an option. Consultant informed the patient that they thought 'something had been left inside' however, after a scan nothing was detected. A number of months later the patient passed a 3.1/2 inch long suture. Patient has made a complaint and going through the complaints procedure. Cannot go to the toilet properly and

would like answers if this can be sorted. Patient concerned as could not get through on the phone to cancel complaints meeting due to partner being unwell.

HWL - made contact with POHWER; PALS & Complaints to inform them the patient would not be attending and if it could be re-arranged.

5. **Case 2769 (23-05-2017)**

Providers: Lincoln County Hospital
Lincoln County Hospital - Neurology

Patient has been waiting 6 months for a referral to Sheffield Hospital to come through. Patient feels good Consultants in Lincoln. Has tried to make contact with Sheffield.

No patient details given - will contact HWL if feels they need assistance

6. **Case 2772 (24-05-2017)**

Providers: Lincoln County Hospital
Lincoln County Hospital - Urology

Patient concerned as each time they have been they have seen a different person, it takes half an hour of the appointment time to update the new person on their condition.

7. **Case 2804 (31-05-2017)**

Providers: Lincoln County Hospital
Lincoln Hospital - Cancer

Patient lives close to Grantham, has to travel to other hospitals; Lincoln; Boston and due to their condition finds it difficult sometimes to travel so far. Would prefer to have the treatment at Grantham Hospital.

8. **Case 2813 (31-05-2017)**

Providers: Lincoln County Hospital
Lincoln County Hospital - Nephrology

The Consultant asked patient their age, and then asked how old they thought their kidneys were. Patient unhappy that they felt the Consultant was patronising them.

Informal Complaint

1. **Case 2775 (24-05-2017)**

Providers: Lincoln County Hospital

Patient who has raised some concerns when they had a car accident, went into A&E on early May with Neck / back pain, numb shoulder and tingling. Was informed to take pain killers and sent home, to come back if needed. Following Sunday went back, had an x-ray where it was stated 5 people had looked at the x-ray and found nothing, had physio therapy on the neck/shoulder. Went to Fracture clinic where they sent the patient for a CT scan and it showed 3 x cracked vertebrae C1, C2 and patient couldn't remember the other one. But patient is scared to death now that some damage has been done and it can't be fixed. Patient is now in a collar for 3 months to limit movement - physio moved head quite vigorously prior to CT scan. Patient suffering with chronic migraines, signed off work and is scared to do anything in case there has been any further unnecessary damage. Patient has apt 6 weeks with fracture clinic.

HWL - contacted PALS who called back this comment is now being dealt with by the Complaints Team. HWL - informed the patient that this was the case and the next steps to follow, plus Advocacy service if needed.

Compliment

1. **Case 2757 (11-05-2017)**

Providers: Lincoln County Hospital
Lincoln County Hospital - Endocrinology

Patient felt they were passed from department to department then sent to Sheffield for tests. They would not operate, phoned a Lincoln County Consultant who correctly diagnosed the patient over the phone. On returning home the Consultant had made an appointment for the patient 3 days later via phone call. Tests completed and re-sent to Sheffield for procedure where it was found that the pituitary gland was calcified and could not be operated on. Had radio therapy. if it wasn't for the consultant at Lincoln the patient feels they would not be alive today.

All CCGs x 1

- 1 x Informal Complaint

Informal Complaint

1. **Case 2737 (04-05-2017)**

Providers: East CCG, Lincolnshire South West CCG, South CCG, West CCG
Pain Management services across the county.

Resident of Lincolnshire commented that they wish to complain about the current lack of information about the continuation or not of various pain management treatments. Have been a long term patient of the Department and seen various changes in the provision of treatments from limitations to withdrawal of services entirely, but in each previous case there has been information or even consultations and forums for user groups in advance of a final decision. So far, nothing has

happened this time other than comments from Doctors within the Hospital service stating that the service may well not continue because of withdrawal of funding by the CCG. I was originally warned of this months ago, but last week discovered that there is still no clearer information. Is this correct? What treatments will be withdrawn and when will this be implemented? It is most unsatisfactory that a large number of patients who suffer long term chronic pain are left with no information about this big threat to their quality of life for what may be the rest of their lives. Over many years I have met and spoken with many patients of the Department and have been astounded at the dreadful conditions some of them live with, but who, like myself, have benefited greatly from the regular treatments received. Unless they have made enquiries whilst in the Department it is highly likely that they will have no knowledge of the potential threat to their treatment. How will the patients be treated in future – usually as patients of the Department we are effectively “managed” by the Hospital. Will we all be notified and “returned to the care of our individual GP”? I fully expect that the numbers of patients in Lincolnshire with Mental Health problems will rise substantially if this change goes ahead. We are a very vulnerable group of patients and will suffer greatly without our treatment.

Patient has raised many questions throughout sharing this experience, HWL will update patient with responses once received.

Mental health & Learning Disabilities (LPFT)

CCG Area	Case Details
East x 1 <ul style="list-style-type: none"> 1 x General Comment 	<p>General Comment</p> <p>1. Case 2821 (31-05-2017) Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health), Pilgrim Hospital Pilgrim Hospital - Mental Health Relative contacted HWL as feels that parent has been sectioned illegally. HWL - referred them to CQC</p>
South West x 2 <ul style="list-style-type: none"> 1 x General Comment 1 x Informal Complaint 	<p>General Comment</p> <p>1. Case 2743 (11-05-2017) Providers: Child and Adolescent Mental Health (CAMHS) LPFT CAMHS - Sycamore Centre - Grantham Patient attempted suicide, the crisis team saw patient after a week and started making a plan. Patient felt the crisis team helped and they listened to what they had to say, helping them through this hard time. When moved to 1-1 sessions they felt this didn't work for them and felt they were made to attend mediation when they didn't want to.</p> <p>Informal Complaint</p> <p>1. Case 2779 (25-05-2017) Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health) Very distressed parent with regards to their child. 15yrs old currently under CAMHS however previous Doctor has retired, new Doctor understandably not up to speed, but more concerned with medication than anything. Parents understand this and this is NOT a complaint yet. Child currently diagnosed with ADHD and ? mixed developmental disorder. However the parents are trying to/looking at getting a diagnosis of Autism and believe they may have PDA (Pathological demand avoidance) and possible selective mutism? On speaking to the parent today they (understandably) are under a lot of stress and has been signed off work with depression. Child has started self-harming and has been informed that a paediatric referral will be needed, this was from the CAMHS Doctor the other day. Not sure if this has been done, also was informed by Doctor for diagnosis of autism parents would need to go to GP, GP states not them SENCO, SENCO states not them so parents are now left in limbo and don't know where to go for this. Doctor has now said not needed another appointment for 3 months I am really concerned about the self-harming aspect and have given the parents the Crisis number in case they need it. Child having difficulties in school – however school are being very supportive. Child does not have friends at school or home, which makes them isolated and in turn this effects the parents. HWL - with parents consent - made contact with LPFT as yet not heard anything - in over a week - prompted as parents are under extreme pressure, response received and relayed to parents</p>

Patient Transport

CCG Area	Case Details
East x 2 <ul style="list-style-type: none"> 2 x General Comment 	<p>General Comment</p> <p>1. Case 2738 (04-05-2017)</p>

	<p>Providers: NSL Transport NSL</p> <p>Elderly lady needs transport to Barlborough Treatment Centre on 9th May for 2.45pm. Lady is in severe pain and has hip and spinal problems – also suffers with angina and arthritis – cannot access public transport. Does not drive and has been referred to Barlborough by one of our hospitals as they are unable to treat this lady in Lincolnshire. Lady has to see the spinal specialist – this is not financial but medical need.</p> <p>HWL - contacted NSL as felt this was medical need not financial - however this was still refused.</p> <p>2. Case 2750 (11-05-2017)</p> <p>Providers: NSL Transport</p> <p>NSL - professional contacted NSL for elderly patient and escort, do not drive. Patient recently had a stroke but as the patient was seeing Dermatologist would not provide the transport. Found the person on the end of the phone quite rude.</p>
<p>South x 1</p> <ul style="list-style-type: none"> 1 x General Comment 	<p>General Comment</p> <p>1. Case 2755 (11-05-2017)</p> <p>Providers: NSL Transport NSL</p> <p>Elderly spouse in Care Home and needed transport to Addenbrooks, permanently in a wheelchair cannot transfer. NSL informed the partner that their spouse did not fit within the criteria. Used to get transport, now cannot access it. Requires a specialist vehicle as cannot get out of the wheelchair and requires an escort. Partner willing to sort, but what about those people in the county that do not have this? if anything happened to the partner how would spouse get to their appointments, if they do not fit into the criteria.</p>
<p>West x 3</p> <ul style="list-style-type: none"> 2 x General Comment 1 x Informal Complaint 	<p>General Comment</p> <p>1. Case 2725 (02-05-2017)</p> <p>Providers: East Midlands Ambulance Service NHS Trust (EMAS) EMAS</p> <p>On calling 999 for an ambulance after a colleague had a possible TIA or possible Heart attack, half an hour later still no ambulance, on calling again informed all ambulances were out. Member of public called again and pretended that the major was just coming in to the council offices where the patient currently was. They then said that an ambulance would be with them in a few minutes.</p> <p>2. Case 2776 (24-05-2017)</p> <p>Providers: NSL Transport NSL</p> <p>A patient who had transport in January has now been informed they are not eligible for transport. Elderly patient has lymphodema in both legs, cannot drive, no family close by, uses mobility scooter when outside the house, needs wheelchair when going to clinics if too far away from entrance, does not have mobility allowance, very unstable and lives on their own. Patient is quite distressed that they can no longer access this service for patients.</p> <p>HWL - contacted NSL on behalf of the patient as they were so distressed. Gave NSL all the relevant information, who then made contact with the patients again and transport was granted. Patient feels they have been in distress unnecessarily.</p> <p>Informal Complaint</p> <p>1. Case 2803 (31-05-2017)</p> <p>Providers: NSL Transport NSL</p> <p>Rang NSL to book transport again for my patient for his health appointment to be bluntly told that now they won't transport anybody with mental health issues. I was on the phone for nearly an hour, stating that this is discrimination, to be told that the criteria has now changed. I had only had contact 3 weeks previous which enabled me to make a complaint to you then about the language customer service advisors are using.</p> <p>I spoke to a supervisor who constantly called me 'madam' which is rude in itself, but she stated that if my patient can get in and out of a car unaided then they can catch public transport or a taxi. This is absolutely ridiculous because the reason my patient gets the transport is because they are unable to do that because of high anxiety and paranoia associated with their condition. They have to attend these appointments every 4 weeks because of the medication they are on and now they are not able to get. I then got asked why I couldn't I take them. I am not a taxi service! This patient wants some independence and has used transport for over 2 years with no problems. Now all of a sudden it is an issue.</p> <p>Then, I received a call from another patient who uses NSL transport to see their Consultant Psychiatrist because they live in a village where there is no public transport, nor can get taxis. They were also told they can't have transport now because of the criteria changing, and because it is mental health. So you are now discriminating against people with mental health conditions which is wrong to do. I looked on your website and saw that you do transport people with mental health</p>

conditions so what is the issue now? If it is the criteria then I want to know exactly what the criteria is please, because this appears to change according to the person on the end of the phone. The person attending their Psychiatrist appointment had to cancel because they couldn't get and this was an important appointment. As for 'getting in and out of a car', that is ridiculous because many people who use transport can do this. I would request this be investigated please because I have had to escalate this further and will contact our Equality and Diversity lead because this discrimination will lead to many mental health patients not being able to attend appointments.

This will become an issue for many patients

HWL - forwarded this comment to West CCG who in turn made contact with the provider, with their consent

Social Care Services

CCG Area	Case Details
South x 1 <ul style="list-style-type: none"> 1 x Signposting only 	Signposting only <ol style="list-style-type: none"> Case 2777 (25-05-2017) Providers: South CCG Elderly resident contacted Healthwatch to see if they were getting the correct service provisions, already has a number of services in place. HWL - contacted the Wellbeing service on behalf of the elderly patient with consent to do so, with a request they look at the equipment already in place to see if still ok, and options to access other equipment options - perching stool/raised toilet seat.
South West x 1 <ul style="list-style-type: none"> 1 x General Comment 	General Comment <ol style="list-style-type: none"> Case 2805 (31-05-2017) Providers: Lincolnshire County Council - Adult Social Care Social Care - MS Spouse has Multiple Sclerosis, only ever seen a social worker about 9 years ago. Do not know where to go for support, we have been left to fend for ourselves. Attend local MS Society group. HWL - sent information in post
West x 1 <ul style="list-style-type: none"> 1 x General Comment 	General Comment <ol style="list-style-type: none"> Case 2778 (25-05-2017) Providers: Lincolnshire County Council - Adult Social Care relative raised concerns for elderly Mothers welfare who is currently in a Care Home. Complaint has been made to the care home, however family would like to move Mother to an alternative provider. Mother wants to stay where she is, but family are not happy. Unsure if regular rounds are completed to see Mother who is bed-bound. Resident had an infection where the GP was called out, however the family were not informed only on arrival to visit resident were they told. Social Services feel as resident has capacity then they will not move resident until they themselves have requested this. HWL - contacted Social Services with consent from relative, who feel that there is a breakdown in relationships with the care home and the family, will assist with building this relationship back up.

Other Services

CCG Area	Case Details
East x 5 <ul style="list-style-type: none"> 2 x General Comment 1 x Compliment 2 x Signposting only 	General Comment <ol style="list-style-type: none"> Case 2752 (11-05-2017) Providers: East CCG Patient concerned partial paraplegic, wheelchair bound and were experiencing bowel problems. Had been to Louth hospital previously for anema but was informed could not keep doing this as it would damage the bowel. Patient is under Pinderfields hospital and they have said in time it may come that they will require a colostomy bag - this they don't want. Would like someone to sort out the bowel problem. HWL - made contact with the patients GP surgery, District Nurses and Community Lead to see if anything could be done to help. After advice sourced passed this information onto the patient, who managed to get an appointment with GP and if the medication doesn't work they will look at an alternative by 12/05/17 Case 2781 (25-05-2017) Providers: East CCG NRS - telephone numbers for patients with Lifeline Resident commented that they had received a letter from Lifeline recent to test and it was an 0845

resident commented that they had received a letter from Lifetime pendant to test and it was an 0845 number which incurs charges to the resident? is this correct?

Compliment

1. Case 2727 (03-05-2017)

Providers: East CCG

Patient recovering from a really bad chest infection which lasted over 3 months. Nurse arranged for anti - biotics which worked and patient would like their gratitude sent to the Nurse. Had previously been on different anti-biotics which hadn't worked. Thanks to all the staff that showed concern.

could this be passed to the Nursing Team please

Signposting only

1. Case 2822 (31-05-2017)

Providers: East CCG

Resident requested information around Bereavement counselling for elderly parent

2. Case 2767 (18-05-2017)

Providers: Home care

Relative requested information for elderly person around care in the home. Assistance required for 7 days a week for 1 hour per day, personal care and some shopping.

HWL - provided relative with Home Care providers along with costs

South x 3

- 2 x Compliment
- 1 x Signposting only

Compliment

1. Case 2760 (16-05-2017)

Providers: Stamford Hospital

Stamford Hospital - Occupational Therapy

Patient commented they had an appointment which was a follow up to previous appointments in Peterborough Hospital. Patient found they were seen much quicker, more convenient and saw the same consultant, which was great. This appointment was hugely better than the previous ones.

2. Case 2793 (25-05-2017)

Providers: Stamford Hospital

Stamford Hospital - Cardiology

Patient referred to Stamford hospital after an appointment at Peterborough Hospital was cancelled. On arrival it was easy to find reception and patient was directly appropriately. This was during the period of the computer attack and patient pleasantly surprised that the email they had sent previously had been replied to indicating they should attend their appointment regardless of attack. Seen promptly by the Consultant and was happy with the advice given.

Signposting only

1. Case 2747 (11-05-2017)

Providers: South CCG

Family member looking for respite care for elderly relative who has dementia. Would like a Care Home that has the ability to have respite then if needed in the future and settled to stay in the same home full time. Self pay residents,

HWL - informed them that there might not be the guaranteed opportunity to have respite and full time care in the same home. Sent information around respite in the area of choice for them to follow up if they chose to.

South West x 1

- 1 x General Comment

General Comment

1. Case 2740 (08-05-2017)

Providers: South CCG

Patient commented in the last 15 months they had been in Grantham Hospital for pain relief injections into spine. Patient went recently to see Consultant where they have now been informed that they would be unable to have further injections. The patient has heart failure so is limited at what pain killers they can take. Since having the injections the patient states they are in 80% less pain and has the ability to undertake normal tasks, whereas with no injection tasks are limited and then the patient has to lie down as in so much pain

West x 1

- 1 x General Comment

General Comment

1. Case 2771 (24-05-2017)

Providers: West CCG

Barlborough Clinic

Cancelled patients hip procedure appointment the day before. Informed patient that they needed to reduce their BMI from 40 - 35. Informed the patient that it was the decision of the CCG stating they would not fund the procedure unless BMI 35 or less. Leaving patient crippled, morphine dependant and mobility making it very difficult to lose weight. Patient commented they were unsure where their future lies now as the procedure would help to alleviate the long term problems.

<p>Out of Area x 2</p> <ul style="list-style-type: none">• 1 x General Comment• 1 x Compliment	<p>General Comment</p> <p>1. Case 2819 (31-05-2017)</p> <p>Providers: Woodthorpe Hospital Nottingham Nottingham Woodthorpe Hospital.</p> <p>Patient had pain injection under Pain Management. all went well until 5pm when at home and the patient was in agony. Because private hospital it was closed. Called 111 service who sent patient to Nottingham A&E, kept for 3 hours and only pain killers administered, would have liked to speak with a Doctor.</p> <p>no patient details</p> <p>Q) are patients given information after a procedure on what to do in the event of the hospital being closed?</p> <p>Compliment</p> <p>1. Case 2756 (11-05-2017)</p> <p>Providers: Peterborough & Stamford Hospital Trust (PSHT) [out of county referral] Peterborough & Stamford Hospital</p> <p>Patient could not have wished for better treatment at Peterborough A&E. Doctors, Nurses, Reception staff were excellent, the treatment they received was very good. Cannot thank them enough and to the GP surgery afterwards.</p>
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