

July 2021 Feedback Report



The feedback presented in this report represents 394 responses from the following sources:

- Calls and emails to Healthwatch Greenwich from Greenwich residents and service users
- Meetings between Healthwatch Greenwich and groups of Greenwich service users
- Feedback given by service users at outreach events and activities
- Conversations as seen on social media
- Online reviews of services

COVID-19 Vaccination

Vaccination records

Increasing emphasis on vaccination status to receive a second dose and overseas travel and employment has raised the importance of NHS records in everyday life. Some report vaccination status not being recorded in the NHS database and can't find a way to correct this.

“Got my first vaccine at a drop-in centre in Abbey Wood Park on 1 July but this is still not registered on the NHS website. Therefore, I can't book my second vaccine. There's been no help from 119 or Greenwich Health. How can records go astray like this?”

“I had 2nd dose vaccine at Charlton Athletic Football Club on 6 July. But it does not show in my NHS record which both my GP and 119 [say they] cannot help me with this.”

Walk-in centres

Service users report a lack of standardisation with different walk-in centres operating different policies. As such, some service users are confused about how long to wait between each dose.

“I got mine about 2 weeks ago in Plumstead. Was 5 weeks after the first one”.

“I went today to Morrison's-they insist on 8 weeks. They were turning a guy away who was 7 weeks 5 days”

Covid-19 Testing

Elderly members of the Nepalese community who do not speak English say communication has been lacking. They don't understand the testing programme, and many say they are not confident administering tests themselves. They would prefer to go to a testing centre - but not all of these are local, and those who find travel difficult cannot easily reach them.

Access to healthcare services for people with hearing loss -1

Victor, 25 has total hearing loss. To communicate, Victor uses British Sign Language (BSL). To get an appointment, Victor's interpreter must call his GP practice on his behalf. Victor says it's difficult for deaf people to find and book interpreters that can call practices at 8am to get an appointment.

Victor's BSL interpreter told us the system is a lottery. Few GP practices make reasonable adjustments to enable deaf people to access appointments, *"most surgeries just say ring at 8am and wait on the line for an hour or however long it takes - just like everyone else. No one has considered that deaf people first need to find and then book an interpreter to make the call."*

Since the pandemic, Victor says it has become even harder to access GP appointments, with front desk staff telling his interpreter (who calls on his behalf) that *"econsult is the only way to book appointments."*

Despite requests, Victor's GP practice refuses to offer more than ten minutes, or a double appointment, for his consultation even though the interpretation process takes longer. Recently, needing a referral, his GP handed him a letter for a diagnostic appointment with the words *"deaf and dumb"* written across it. Victor was upset and complained to the practice manager about the inaccurate and inappropriate comment. The practice manager responded, dismissing his concerns, telling Victor the doctor did not know what Victor's *"preferred way of labelling was"* and it was *"no big deal"*, leaving Victor feeling angry, belittled, and not treated with respect.

As a result of his experience, Victor avoids accessing healthcare services as much as possible and hopes that he will never get seriously ill because he does not believe his communication needs will be met or that he will be treated with respect and sensitivity.

Lack of consideration, sensitivity, and reasonable adjustments can also affect the health and wellbeing of other family members. In her early teens, Rose couldn't get the mental health support she needed because her GP needed consent from her deaf parents but just kept sending letters (her parents could not read or respond to) instead of using a BSL interpreter. *"This treatment is horrendous. Why won't anyone listen to us?"*

GP services

Service user feedback continues to show frustration with a lack of access¹, the most common issues being:

- long waiting times on the telephone
- lack of face-to-face appointments with GPs
- not receiving or missing calls after submitting econsult forms

“I have no complaints about my treatment when I’ve finally spoken to and seen a GP. But the difficulties in getting it are painful, frustrating, costly in time and bills. It’s stressful at a time when one is at a low ebb.”

“Even if you call at 8 am sharp don’t expect to speak to anyone quickly. Last attempt at making an appointment I dialled at 8 am, was 11th in the queue and my call was answered 1 hour and 20 minutes later.”

Telephone appointments

Telephone consultations do not work for all. Some service users tell us telephone consultations are inadequate and have led to worsening health conditions. Although patients can request a face-to-face appointment, many find it frustrating that their request can be refused, and they are offered a telephone consultation instead. Some services users perceive this as a lack of care and compassion. Others say it’s “**dangerous**”, and are worried about possible misdiagnosis and say it is playing “**Russian roulette**” with people’s health and wellbeing.

“A doctor at my surgery tried palming my son off with an asthma pump - he’s not even 2 and has never been checked for asthma or had any issues, I refused and demanded a [face to face] appointment. Turns out he has ear infections and needed antibiotics. So my little boy would have been needlessly using a steroid medication whilst his ear infection went untreated.”

¹ These have been highlighted in previous monthly Feedback Reports.

“Telephone appointments led to me getting wrongly diagnosed which led to a nasty infection and a possible miscarriage.”

“After 6 months of back and forth I was still refused treatment on my knee. I was denied a face to face consultation or even an examination on my knee. After paying £300 for a private MRI scan, it turns out I had a tear through the anterior horn of the lateral meniscus with a para meniscal cyst. But yet this wasn't an urgent matter?”

“My daughter's twins were unwell for 8 weeks, her son ended up in hospital with croup. Then became worse again with a chest infection it took her refusing to hang up until they saw them to get them seen. 8 weeks for two young children to suffer, a mum on no sleep with two unwell children and an older child to care for. Think how that made her feel. Not being able to help her children and at her wits end. Honestly it's shocking!”

E-consult

Experience with e-consult continues to be mixed. While many are enjoying the benefits of digital tools, some report the form is too long, they don't always receive a response after submitting the form, or they are frustrated at missing follow-up calls as patients are not routinely told when to expect a call².

“Econsult process is a joke. It's a long and laborious form you must fill in for each request. You're not warned when you'll receive a call and if you miss it, it's impossible to get through to anyone to ask for another call back. They need to improve the system. I am sure it wouldn't be difficult to send a calendar invite or a text message of when patients can expect a call.”

“My repeated e-consult requests have simply been ignored. This has also happened with a separate issue, despite sending the e-consult 'reminder' form to them around 10 times, I have had no response to my request for a

² This has been recorded in our previous monthly reports

prescription prescribed by my consultant. If that's happening to me I wonder how many other e-consult requests are being ignored? I am a reasonably intelligent, capable, English-speaking, middle-aged person. I worry about those less able to engage with GP practices, with this barrier of online and phone triage systems. What if you're at work all day unable to take a call at any time without notice? What if you feel unable to engage over the phone or online?"

Merger of practices

Service users affected by changes or mergers at their GP practice say they want a more proactive process to inform patients of how processes, services, or contracts change. In particular, information sent in multiple efforts directly to service users home address, rather than a one-off letter or putting the onus on service users to try and find information online.

"Eltham Medical Practice was formed at the beginning of 2020 coinciding with the Covid outbreak. Our local surgery in Westmount Road was closed and their telephone systems were barely operating for weeks. As far as I know this surgery is still closed to anyone without an appointment. Patients cared for by the merged practice need to be told what the procedures are now. It's no good assuming everyone is online."

Queen Elizabeth Hospital

Service users continue to tell us they are resorting to hospital services because they can't get the access they want at local GP practices.

"My daughter is 3 years old, had a temperature for 5 days, 4 calls to the doctors and being advised just to keep giving Calpol & Nurofen. Days later prescribed an antibiotic for a chest infection. Took her Queen Elizabeth today to find out she's a horrid case of tonsillitis!"

"They refused to see a friend of mine in person recently and said she sounded fine and symptoms are nothing to worry about. My friend is currently in

hospital as she was critical by the time she went to A&E as the doctors at GP practice told her there was nothing to worry about.”

In-patients and out-patients

Service users visiting diagnostics or admitted as in-patients report excellent treatment and compassionate care.

“NHS at it’s best. Arrived at walk in X-ray this morning around 11, all done and dusted within half an hour, marvellous!”

“The day before my dear Dad died in hospital they allowed us in to say our good byes. The nurses and ward manager were lovely in letting us do that during the current restrictions.”

Waiting times at A&E

For some service users, experience at A&E is poor with service users reporting long waiting times and a lack of care.

“Waited for hours, going back and forth from departments, with little to no communication about what’s happening, how many people waiting, how much longer the wait would be. Considering I got here at 10pm and left at 5am is not what one expects in a state of emergency.”

One service user complained of basic needs not being met while waiting to be seen.

“Was in A&E and was on a chair as could not mobilise, I was begging for water for nearly two hours and needed the toilet, but no one attended to me until a friend of mine arrived and actually took me away...”

Access to healthcare services for people with hearing loss -2

In urgent need of medical attention, Marie went by ambulance to A&E at Queen Elizabeth Hospital. Paramedics assured Marie there would be access to an interpreter at A&E who would allow her to communicate her needs to clinical staff. As Marie feared, at A&E there was no access to a British Sign Language (BSL) interpreter. Marie spent 8 hours in A&E, alone, unable to communicate with the clinical team. Marie was eventually discharged with a piece of paper describing her diagnosis and treatment. Marie cannot read.

Reading is based on spoken language, as a result, deaf people can struggle to read, and many people with hearing loss have limited reading skills. Lack of accessible information in BSL format means that health literacy and knowledge is often low amongst deaf people. Using written instructions and forms is particularly difficult for deaf people with limited reading skills. As most digital information is written, many deaf people have limited digital skills too. Marie says healthcare services have very little deaf awareness, and not all make legally required reasonable adjustments.

The whole experience at A&E was frightening. Marie now has little confidence that her communication needs will be met at Queen Elizabeth Hospital.

Marie's BSL interpreter said that Queen Elizabeth Hospital say they offer an "interpreter on wheels" (a roaming video device that provides interpretation on demand), but she, and her BSL interpreter colleagues, are yet to find a deaf person who has been either offered it or has accessed it. *"Deaf people have stopped going to A&E. It is just traumatic, and they stop going. There is zero access"*

BSL interpreters say deaf service users are often reluctant to attend appointments at Queen Elizabeth Hospital and 'no shows' are high because of poor experience/inability of the hospital to provide a BSL interpreter. *"They think there won't be an interpreter in any case so why should I go. There are different guidelines in different departments of the same hospital-it doesn't make sense."*

Within Queen Elizabeth Hospital, deaf service users describe a wide range of approaches to accessing a BSL interpreter. Procedures often vary from department to department.

- A&E is the poorest example, with deaf service users saying they never get offered a BSL interpreter at A&E.

- The day surgery department told deaf service users they couldn't bring an interpreter with them because of COVID-19 restrictions.

- Cardiology department. Despite full access to patients' medical records containing detailed information on additional needs, a BSL interpreter is only booked if a specific request is made. Deaf service users must book and ask a BSL interpreter to request a BSL interpreter for their future cardiology appointment. If this request is not made in advance - deaf service users are not offered or provided with a BSL interpreter at their next appointment.

- In contrast, the physiotherapy department automatically books a BSL interpreter for deaf patients without the service user requesting this.

Post-Natal Care

Some first-time parents say they aren't getting adequate support post-birth

“We had our two midwife visits at home after the birth, but since then we have only had a phone call with a health visitor who said they would not do any home visits and would next be in touch after 11 months. The children's clinic is also closed because of Covid. This seems wrong to me, because as far as I understand it more regular checks are mandated in England.”

Oxleas NHS Foundation Trust

Sexual Health Clinic

Service users report very positively on interactions with healthcare professionals. However, communication with reception staff is not always polite or helpful.

“Some receptionists either they just hate being in the job, or they see us that attend that clinic as outcast...the way they speak to you! The doctors and nurses are simply amazing... the inhuman receptionists should NOT be trusted to speak to patients.”

Once here, the nurses here are helpful, professional and do very well at their job. On a couple of occasions, I have called up and almost been in tears after ending the phone call with a receptionist. Very patronising and dismissive. Not a great reflection on the service as a whole.

Asma's experience with talking therapy

Asma struggles with her mental health. During the pandemic she reached out for help and referred herself to Time to Talk. After assessment, Asma was offered a short number of sessions over video. Asma felt the level of support provided was inadequate to address her mental health needs. *“There is no option for long-term therapy. I feel my issues are deep-rooted, and I need more than six sessions. It's not possible to open up and set goals with a complete stranger in such a short time.”*

Asma's husband and family were unhappy with her decision to seek help and made it difficult for her to find any privacy to talk to her councillor. *“Privacy was my only issue. I suggested [to the councillor] sessions over the telephone so I could go to a park and talk, but they did not agree”.*

Asma tried to explain the family dynamics to her councillor and how they actively restricted her privacy and access to counselling sessions. Despite this, Asma was discharged when her family made it impossible for her to attend two sessions.

Asma found the sessions she was able to attend useful. She said: *“Because she was from a minority ethnic background, she was better able to understand my culture and context”*. So Asma decided to continue the process with low-cost therapy with a private therapist. *“It put stress on resources financially, but I knew I needed help”*, she says. However, the therapist she found was not helpful. *“He was an older, white man who found it amusing when I confided some things that were culturally specific. Because of this I stopped my therapy midway.”*

Asma understands that services must operate in a Covid-safe way, but *“they should also understand the situation in our homes. Often it is not easy to talk about these things. I feel hopeless. I finally reached an age where I identified I need help, but I have no access to it because the system is not flexible. I wish they would reconsider their decision.”*

Circle MSK

Physiotherapy

Service users continue³ to report phone calls and emails not being answered. This is despite assurance from Circle MSK, following previous feedback from Healthwatch Greenwich, that additional staff have been deployed to take calls and response times have improved.

“If this is the best service that is being offered, I can't imagine what the worst is like.

Given wrong diagnoses & exercises, told incorrect information and impossible to contact appointments line, messages & emails ignored.”

Absence of timely clinical advice and contact from Circle MSK has led some to resort to Dr Google to manage their condition.

My doctor referred me to MSK clinic in May. I rang them, only to find I was 'not on their list'! but they had received the referral. I explained I was worried and how the condition affects my day-to-day life. I purchased a wrist splint and exercise my wrist as per Google, so helping myself, I feel this is a convoluted pathway to go”

Next Steps

We will follow up on all concerns or issues raised. We will work with commissioners, providers, and service users to understand where services are working well and where further development may be needed.

Contact Us

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³ This has been highlighted in multiple reports in the past 6 mths

