

## Insight Bulletin: October 2021

One of the statutory duties of Healthwatch Surrey is to share the experiences of local people with organisations who make decisions about health and social care services. Our monthly Insight Bulletins shine a light on some of the themes we have heard about over the past few months.

The themes highlighted in this month's bulletin are:

- Experiences of good care from the people of Surrey
- Findings from our research into carers' experiences of discharge from hospital
- Delays along the treatment pathway
- Children and families falling between gaps when seeking help for mental health concerns
- Low levels of concern about vaccine availability

If there is a theme you would like to hear more about please contact [Kate.Scribbins@healthwatchesurrey.co.uk](mailto:Kate.Scribbins@healthwatchesurrey.co.uk).

### Praise and Thanks

Despite the current pressures on health and social care and recent negative media focus, we continue to hear praise and thanks for the care that people have received from local providers, including:

*"I am 80 years old. Our surgery has a simple online booking system. At 9.30am, I left a message seeking advice for a stiff thumb joint. Two hours later a doctor phoned me and said he would see me at 2pm the same day, when he diagnosed "trigger thumb" and gave me a steroid injection which has improved it greatly. Excellent service for what I regarded as a very trivial complaint. Thank you NHS."*

*"I fell and fractured my hip and was taken by ambulance to A&E at RSCH. I received the best care. The physio came out every week from Milford hospital to my home and I still am under the care of them. Very good care from both places."*

*“Saw Breast Cancer nurse. Excellent experience. Waited for 20 mins but that was ok. The nurse was helpful and empathetic.”*

## Our latest report – Carers’ experiences of Hospital Discharge

Earlier this year we launched a joint project with Action for Carers exploring the experience of hospital discharges and Discharge to Assess from the perspective of unpaid carers. Our aim was to provide insight that could help optimise the safety and efficiency of the discharge process and ensure that unpaid carers are supported to play their vital role.

Our report “Carers’ Experiences of Hospital Discharge” is now available at <https://www.healthwatchesurrey.co.uk/our-work/reports-and-papers/project-reports/>

While we heard some highly positive experiences of discharges - where carers felt consulted, understood, and confident in taking back care of their loved ones - we also heard many stories of poor communication and carers left feeling confused and in the dark. In some cases, we heard that patients had experienced harm as a result.

Our report makes four recommendations:

- 1. Proactively identify patients who rely on unpaid carers.**  
Recognise that carers may be unregistered/unacknowledged. Record a key contact for every patient and focus communication through that contact.
- 2. Review practices and processes that govern hospital-carer communications.**  
Take the opportunity to develop new, post-Covid strategies that cover all touchpoints.
- 3. Improve carers’ understanding.**  
Explain the process of discharge including who’s who, decision making processes, what they should expect, and what support is available. Use co-design to develop a guide.
- 4. Provide a professional, efficient handover of the patient to the carer.**  
As well as meeting the requirements of the current Policy and Operating Model this handover should be patient/carer-centric with appropriate language and contact information for all relevant providers/services.

We have shared the report with hospitals and with social care and have been invited to meet some providers to discuss our findings in more detail. We will publish the response we receive to the recommendations later this year.

Two patient experience videos have also been created and can be seen through a private link here:

[What good looks like - Healthwatch Surrey Case Study](#)

[Father and family - Healthwatch Surrey Case Study](#)

## Delays along the treatment pathway

Surrey is performing much better than many other areas in terms of waiting times for NHS treatments. However, we continue to hear of the impact of delayed access to a wide range of treatments and services:

*“Various investigations led to the diagnosis of gallstones... he was referred back to the dieticians at RSCH for more conservative management. He says he called the dietician dept this morning but was told he was on a waiting list- he did not say how long he would have to wait.”*

*“She said a liver scan has now been proposed, but that it will be “at least six months” before it happens.”*

*“Client was involved in a road traffic accident 2.5 months ago and she came out of hospital around 6 weeks ago. Now waiting for visits from physio. She is currently bedbound as she cannot walk. Prior to the accident she was fine and fully mobile... Cl is now waiting for a physiotherapist and is concerned as she now feels she wants to move and do more but would like some guidance as to the best way to do this.”*

## Mental Health - CYP and families falling between the gaps

We often hear about long waits for assessments from CAMHS, but we also hear of poor service integration and inflexible approaches that make access to care difficult:

*“With the eating disorder, it is directly linked to Autistic traits but this is not recognised as an eating disorder. He is on the 1st percentile! It is anxiety based, yet he did not meet criteria with the ‘One Stop’. So does he have to*

*present at A&E in crisis to get help? Specialist dietitians lay blame with parents. Feeding clinic won't see me as he has an ASD diagnosis."*

*"Friday we had an appointment at CAMHS and they said to her 'We can do nothing for you. You are not bad enough'. So we were offered to be referred back to 'Learning Space'. My daughter said it left her feeling 'Worthless'. She called an adult suicide hotline in July."*

*"I have applied for an EHCP to get him properly assessed and he is working from home as cannot cope in school. The school is asking me to get him signed off as unfit for school to trigger more support apparently. Spoke to CAMHS and they have told me that they no longer do this. So this leaves us in a dreadful 'no man's land' of the school and Surrey LA requiring medical evidence from the body who have apparently been instructed not to do so!"*

## Hearing less about vaccination rollout this year

This time last year what we were hearing was dominated by vaccinations - firstly the flu jab, then Covid. People were worried and concerned - *I haven't heard about my jab, have I missed out? Can I get one sooner? What if I can't get to the vaccination centre?* - followed by praise and gratitude for the efficiency of the rollout.

This year we have not heard the same volume of concern, the tone has mostly been positive, and where there have been negatives these have mostly been mentioned in passing rather than being the focus of a patient experience:

*"GP - trying to get the flu jab currently but it is difficult to get through."*

*"Very impressed with vaccination roll out, I organised everything at GP."*

*"Been contacted about flu jab but they are very apologetic as they don't know when they can offer at moment due to shortages."*

## About Healthwatch Surrey

### How we share our insight

If we hear a case of concern regarding patient safety we immediately signpost the sharer to the appropriate body and escalate the case with the provider/commissioner.

We share our wider themes with Trusts, CCGs, Surrey County Council, Public Health, CQC, and in various boards and groups across Surrey.

If there is a topic you would like to hear more about, please contact [kate.scribbins@healthwatchesurrey.co.uk](mailto:kate.scribbins@healthwatchesurrey.co.uk)

If you would like to be added to or removed from the distribution list for this Insight Bulletin, please contact [natalie.markall@healthwatchesurrey.co.uk](mailto:natalie.markall@healthwatchesurrey.co.uk)

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