

Insight Bulletin – March 2022

About Healthwatch Surrey

One of the statutory duties of Healthwatch Surrey is to share residents' experiences of health and social care with the people and organisations who make decisions about those services.

This bulletin highlights some of the themes we've been hearing about recently.

Praise and Thanks

We frequently hear from people praising the care they have received. As well as thanks for good outcomes, a consistent theme is how much people value empathy and kindness:

- *"The secretary has been very kind, she saw my anxiety and has said she can email the letter through with a copy of everything that was discussed so that we can look at it together".*
 - *"It was really good here today. The nurse was compassionate full of empathy and really listened, I didn't feel judged at all.."*
 - *"My surgery are good.... I have used video for appointments and the doctor called me when I was unwell via Whatsapp video and reassured me and gave me good advice."*
(Patient with learning disability)
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Our latest survey – what do people waiting for hospital care need to know?

We have launched a survey to hear from:

- People who are **currently waiting for hospital appointments, tests or treatment**
- People who **have had planned hospital appointments, tests or treatment** since January 2021



Please share far and wide!

<https://www.surveymonkey.co.uk/r/HospitalWaits>

Can your patient access the information you are sending them?

Everyone has the right to receive healthcare information in the way that suits them. People have been telling us about their challenges and the impact that can have on their healthcare and wellbeing:

- *My concern is that the appointments system at RSCH seems totally focused on the telephone and makes no allowance for patients with different communication needs. I'm deaf. After several unexpected calls from the same number (which I was unable to answer), I discovered it was the hospital. I assumed they were trying to contact me to make an appointment and had to go via my GP to get them to contact me another way. Having gone through all that, they then phoned me again the day before the appointment. I had no way to know if it was a cancellation or a reminder. Fortunately, I turned up anyway and the appointment was ok but it caused me unnecessary stress.*
- *I'm not happy with my father's GP [East Surrey] it's really distressing for my [83 year old] father, he isn't able to be seen, he doesn't have a computer and he doesn't have good English, he's Italian and language is a barrier for him, especially when he gets worked up. He wants a face to face with the Doctor, he is coming off steroids at the moment and it's been really challenging to get the medication right*

- *The hospital sent me letters about my blood pressure. They don't send me easy read, just their standard letter. I get upset with letters from the hospital sometimes, they sound frightening. I can read them but I need help understanding. Easy read might be more helpful.*
- *I'm not confident in English - when I make an appointment with the GP my husband has to do it. I need help with language and I don't know how to use the internet. My son and my niece also help me when my husband is busy. If the doctor calls me or texts me, I need my husband to translate. There's no privacy. ... I'm alone at home in the day, if I need medical help, I have to wait for my husband to come back."*

Healthwatch England have launched a national campaign "Your Care Your Way" with a survey that we are promoting, aiming to find out how well services are delivering the Accessible Information standard. A link to the survey is [Your Care, Your Way survey - Alternative fomats | Healthwatch](#)

Experiences of death in hospital

While home is the preferred place of death for many, and the number of people able to die at home is growing, nationally around 40% of deaths still take place in hospital.

We have heard how this can be a gentle, caring experience:

- *"My husband recently died...The nurses were just lovely. I was able to be with him as was our son. The hospital managed his death and his family with dignity and respect. The bereavement services are good"*

Unfortunately, we've also heard experiences that have left loved ones distressed and feeling unsupported:

- *"He was taken back to A&E early the next morning. Shortly afterwards, his partner had a call telling her to come to the hospital to say goodbye. She sat with him until she thought he had passed away and called a nurse, who called a doctor. This doctor said, 'I can feel a pulse', and walked off. However, he passed away soon after. His death certificate gives the cause of death as sepsis and coronavirus. The hospital had told his partner that he was coping with the coronavirus and had never mentioned sepsis to her. This sepsis was apparently caused by the cannulas the hospital inserted the month before".*

- *Laura is very distressed at the care and treatment her husband received last year [in hospital].. Laura's husband had serious health issues and was in hospital at the time of his death due to a stroke which led to him being unable to swallow. He had a naso gastric tube in situ through which he was being fed. ...During a meeting with the medical team Laura stated that she had 'Health and Welfare' power of attorney and she wished her husband's feeding by tube to continue. The medical team decided that they would overrule her wishes and the next day when she came to visit no tube was present and her husband died shortly afterwards. Laura wishes to know if the doctors were within their rights to overrule her wishes.*
- *Jane's partner died in Oct 2021. Jane is not happy with the treatment her partner was given. She thinks that they could and should have done more and could have handled it better. Her partner died in what she felt was a storage room off A and E, where it was very cold. He had been given morphine for the pain and antibiotics for an intestine infection. Jane feels the doctor was callous in dealing with them and made it clear he would not live, but did so rudely and without feeling."*

Death is a normal, regular event in hospitals. The means are in place to ensure it is a compassionate, caring experience for the person dying and for their loved ones.

We urge staff to remember that families may have little understanding of the clinical considerations at end of life, and deserve to be treated with humanity and kindness while they are emotionally vulnerable.

Access to GP Complaints Processes

Unsurprisingly, a high proportion of what we hear is about GPs – both good and not so good:

- *Our GP is brilliant . Good availability of appointments and they go above and beyond. ... Chased up hospital appointments and they have helped.*
- *Dr there has a bad attitude. Didn't support me with my mental health or my son when I was trying to get a diagnosis with Autism.*

Inevitably there are times when people want to complain to their GP. GPs must have a procedure that tells patients how their views can be heard.

Recently we have heard from people struggling to access this procedure:

- *I have tried to complain online about this through their complaints system; however, each time I try, a message either telling me the surgery is shut, therefore I can't complain or a message pops up telling me the surgery has closed the forms for today. I feel they are stopping people making complaints. I've tried to speak with the practice manager but always told that they're on holiday, in a meeting or not available.*
- *I wanted to complain about my GP and asked them to give me the complaint form and they refused. They said go to our website and fill in the form there. Or I can email directly to their manager. And gave me her name on paper. When I came home I did not find email address on their website. I called them back and asked about email address and they refused to give that. They then said to do that via postal service.*
- *I went to reception desk and asked for complaint form and this is where the problem begins. There was another lady who along with the receptionist started arguing with me and asked me to leave the place. I insisted that it's my right to complaint and all I am demanding is complaint form and they both refused to give any form. The receptionist lady went back saying she is printing for me, but came back with an empty paper and wrote a name on it and handed that over to me and the other lady said go to our website and the form is there... I told them I need a complaint form which should be given to the patients and asked for complaint procedures.*

Complaint handling can be a burden to GP practices but patients do have a right to complain, clinicians have a duty of candour, complaints are part of the learning loop, and well-handled complaints reduce the risk of patients pursuing a claim.

Recommendation: We recommend all GP surgeries review the accessibility of their complaints procedure and ensure staff, especially receptionists, can give the appropriate information to patients without difficulty.

Healthwatch Surrey Insight

How we gather our insight

We gather feedback through many channels including our agenda-free outbound engagement events, our Helpdesk, website, social media, and local Citizens Advice. We also distribute flyers, advertise, engage with groups through our partners and contacts, and initiate focus groups.

The number of people we hear from and the topics we hear about varies from month to month. Some topics covered may depend on the groups we engage with.

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@healthwatchsurrey.co.uk

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