

Monthly Report

February 2024

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Location of comments:

Location data is mapped using postcodes of services. The map points are coloured according to the sentiment of the comment:

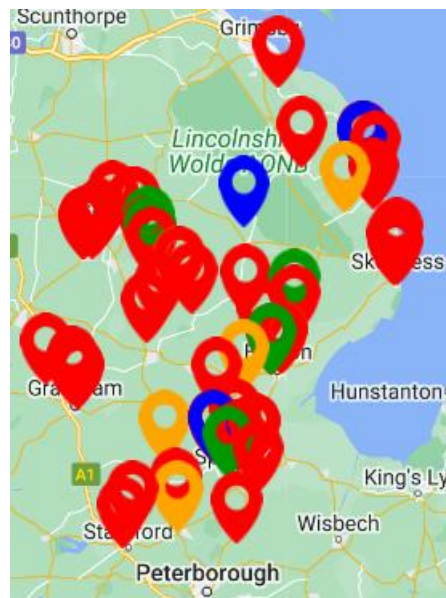
Positive - green

Negative - red

Mixed - orange

Neutral - blue

Unclear - grey



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Overview

Monthly Report

During January 2024 Healthwatch Lincolnshire received **76** patient experiences directly to our Information Signposting Team. This is a summary of the key themes raised by patients, carers and service users during January 2024 about services in Lincolnshire.

For more details you can call us on **01205 820892**
Email: info@healthwatchlincolnshire.co.uk



Overall Sentiment

7% of all comments were **positive**
78% of all comments were **negative**

4% of all comments were **neutral**
11% of all comments were **mixed**

January 2024 – Feedback Service Themes Sentiment



36%

**Hospital Services
(All services)**



46%

GP Services



8%

**Community Health
Services**



3%

**Accident &
Emergency**



3%

Patient Transport



12%

Dentistry



13%

**Mental Health &
Learning
Disabilities**



11%

Social Care

%s total greater than 100% as many comments we receive relate to multiple services

Pharmacy

Missing or changed medications, in some cases due to restrictions, was raised an issue by some this month. Timely access to antivirals for COVID was also a problem for one individual on the east coast.

“Informed 111 that had tested positive for COVID and I am registered to get antiviral meds. Few hours later a doctor called after a lengthy discussion he sent a prescription to Boots Skegness. I called Boots the chemist, to be told they haven't got the meds I needed and I'd have to wait until Monday, by this time the window for taking the meds would be too late to be of any use. I then called 111 again and explained what had happened and they would arrange another doctor to call me. I had a call at 9.35pm and was told if I felt the illness was getting worse to contact the emergency service. Luckily, here we are on Monday, still showing positive on my recent test. But now feeling better than I have for a few days.”

Full time carer for elderly parent has ongoing concerns with Hawthorn Medical Practice and Chemist , Whitworth Chemist , Lumley Road, Skegness. This concerns medication for parents Parkinsons Disease being prescribed at the wrong dose for many years, this was clarified by the Parkinsons Nurse Specialist. Over the Christmas period there have been missing medication for Parkinsons Disease , Madopar, and previously missing warfarin. Carer has contacted both Hawthorn Medical Practice and Chemist but has got no where and feels like they are going round in circles with complaints and nothing has been resolved. Carer did contact Integrated Care Board yesterday to escalate their concern and try and get a resolution. Carer feels that missing medication is unsafe situation and could be harmful to their parent. Has made complaints before and told to move GP Practice. On advice from Carers first carer has raised a Safeguarding concern in relation to missing medication. Does not want parent to go into care home as had previous very bad experience with father and does not want the same thing to happen. Carer feels that NHS and the Care system is failing and care and sorting medication should not be left to unpaid carers.

Patient has negative experience with repeat prescriptions. The pharmacy notify that medication is ready to collect by text service. However this is very hit and miss as to whether it works properly. Often the text service is down. Frustrating for both patients and the Pharmacy staff. Ordering medication online is good and very easy. But the text service needs overhauling as the poor staff in the Pharmacy don't need the extra pressure of the text service continually breaking down.

Community Health Services

Comments shared with us this month about community health services related to diabetes and incontinence care.

One carer raised their concerns for their dependent who had been fitted with a diabetic sensor without the purpose of it or how to use it being explained to them. The dependent is also partially sighted, has dementia and other health needs which means they are unable to read the measurements taken by the sensor. Concerns were raised about the potential harm this could cause. With the consent of the parties involved Healthwatch has raised this issue to the relevant individuals in the system is in the process of being resolved.

Patients carer contacted Healthwatch about raising a concern about the care given by the Community Nurses fitting a diabetic sensor to your elderly relatives arm without explaining to them and carer what it is and how to use it. Putting the sensor in a place on relatives arm where they cannot scan it. Not taken into account that relative is partially sighted, has dementia, Charles Bonnet Syndrome, restricted mobility and unable to see the device given to read the sensor, or the units of insulin on the syringe. They were unable to see the figures on the device or work the device to read their blood sugar. The device also beeped all night kept them awake and worried them. Also issues that with a normal blood sugar machine elderly parent finds this difficult to use. Also issues that elderly parent cannot see the figures on their insulin syringes. Carer worried that may not give themselves the correct dose and cause harm. Issues with other medication about getting tops off medication and seeing packets and confusion about what day it is which may cause them to have too much or too little medication. Carer has contacted Community Nurses Office but nothing has been resolved.

Access to suitable incontinence pads was also flagged as a concern. The pads provided by community health services were not suitable and would have to pay for their own as it would take months for the correct ones to be provided if not.

Family member of elderly parent who is in a care home, bedbound, has previously been in hospital, discharged in November, now incontinent and registered with the Incontinence Team. Family member has been informed by the home that the incontinence pads provided are not suitable and that the family member needs to purchase correct ones, which they have done since November. Has been informed by the care home that it could take 3 months to get the correct ones via the Incontinence Team and would need re-assessing.

NHS Dentistry

Access to NHS dental services continues to be a top concern for many. We continue to hear from patients who have been trying to access NHS dental services in the county for years. The only option available currently appears to be to pay for private treatment. One individual shared the treatment they need will cost them £7000. The majority cannot afford private treatment and this is likely to worsen existing health inequalities.

A carer whose dependent has complex mental health needs shared their struggle of getting a referral to the community dental service. The carer has been passed from service to service, unable to get their dependent referred for the care they need. This issue is in the process of being resolved.

Carer made contact because their spouse, who has Emotionally Unstable Personality Disorder, self harms in numerous ways, one being they pull their teeth out if they hurt or are loose. To the extent that they now only have 2 full teeth and 2 broken teeth. They have trouble eating anything that is not soft. Because of this problem their mental health is suffering badly. They suffer with anxiety badly and most of the time they won't go out of the house because they feel embarrassed. They want dentures, but unfortunately they have a severe phobia of dentists and pass out as soon as they go in the door of a dentist. Spouse is 6 foot 4 and is a large individual to pass out anywhere. They have spoken to several dentists who say they cannot help but one gave me the number of the community dental service. Carer telephoned them and they said we need to be referred by a dentist or doctor. Obviously getting them to the dentist is a problem, and the doctor said they cannot refer as they don't deal with mouths or teeth, even though their spouses mental health is getting worse. They have also been in touch with Single Point of Access who gave them the number for Community Health Service Trust. They advised to ring 111 who only advised getting them into a dentist. The psychiatrist discharged spouse 2 years ago saying that pulling their teeth out was a problem and they couldn't do any more for them. The carer spoke to their carers first contact and they suggested getting in touch with Healthwatch about helping them to try and get them referred to the community dental services. Carer is extremely concerned for their spouses mental health and wellbeing as they are losing weight (even though that is not a bad thing), but it is the consequences on their overall health not just mental health. All they want is a set of dentures and they are not in a position to go private, although that wouldn't help with the anxiety side of things. Sorry if this email is a rant, but carer at the end of their tether as to what to do. They have no support and they feel that they are going round in circles all the time.

"Can't find an NHS dentist in Spalding, and yet another private one has issued letters to their NHS patients saying they're stopping NHS and that if people want to stay with that dentist they will have to pay as private patients. So that adds even more would-be NHS patients to the area, trying to get on an NHS list and finding none. We don't understand why there are none in our area or even in our county! What happens to all the new dentists passing their degree each year. Where do we have to go to get our teeth seen to, fixed. Do we have to wait, will it get better, will that definitely happen? What do we do in the meantime? My spouse has had a private dentist do a scan and x-rays and produced a report saying many teeth must be removed or infection will eat into the bone, quoting £7000. They said the work of previous dentist had this that and the other thing wrong, but we cannot return to that dentist or complain as they stopped working after virtually being closed down by the CQC due to below-standard inspections.

I haven't mistyped that, it was £7000, and that doesn't include anything to replace the teeth so that they can actually eat something for the rest of their life. Adding that in, the total bill is likely to approach one-and-a-half times spouses entire annual state pension. Ludicrous money, out of this world money.

Only has the state pension for income and not enough in savings for that. So they would have to use all of our life savings, and borrow as well. This cannot be! Spouse has paid 50 years of national insurance and should be able to have NHS. I don't know where we are expected by the authorities to go; we have no car so would have to use public transport, and we cannot travel very far in both directions out and back home in the same day due to connections available and last buses or last train times. The NHS website lists the nearest dentist as Nottingham, but we cannot get there in time to even get home again on the same day, let alone have the dental appointment, it's stupid. We don't in any case want to travel on transport due to new COVID infections expanding, we normally shield ourselves by not going out in public, as little as possible.

Nobody is listening; there are no dentists here (Spalding, Lincolnshire)."

Patient contacted Healthwatch on behalf of 5 year old close relative. The family are NHS patients registered at Mydentist at Skegness. The 5 year old was taken to the dentist last week for a check up and their carer was charged £25 . Patient saying that this cannot be right , what if they need further treatment they would be not be able to pay. Surely all childrens teeth are teeth are precious and check ups should be free to make sure they do not need further treatment and that they have healthy teeth.

"My dentist was closed down (they closed the doors and never opened them again) we were not referred to another dentist and as such were not able to access NHS dental. I have looked on the NHS website and rang every dentist on the list in a 50 mile radius and none are taking NHS! I can't afford private treatment, I don't get any benefits and I need a filling, as a filling I had done a few months ago with my old dentist has fallen out. This situation with dentists is awful as many are now only private."

"I am a NHS patient with Mydentist, Algitha Road, Skegness, and have had the last 5 appointments cancelled over the last 3 years. I have an ICD fitted and a large AAA and require regular treatment to stop infection which could be fatal. Yesterday 19th Jan Mydentist phoned and informed me that my Feb appointment is cancelled and no more appointments will be made unless I go private. As a pensioner with my health problems."

Positive Stories

Here are some of the positive experiences shared with us this month.

"Quick access to initial x-ray. There was a long wait to be seen after, but we were told this on booking in. The nurse practitioner we saw was kind, compassionate and knowledgeable. Really pleased with the service."

"Elderly relative admitted to A&E at Pilgrim Hospital by GP with pneumonia and raised erratic heart rate in December 23. Relative was very frightened and anxious about being admitted to hospital as their spouse was an inpatient 6 months later and had a bad experience. They are also very deaf even with hearing aids and still very independent even though very ill. Their elderly spouse accompanied them. They were kept in A&E for nearly 2 days in a rhesus bay as needing to be continually monitored on a heart machine and scoring high for sepsis. A&E was very busy and waiting room and department full. They were treated with kindness and respect, treatments and investigations carried out promptly and acted upon. They were surprised at how good the care and treatment was on A&E, Integrated Assessment Unit, and 7B. They were particularly pleased with the cups of tea, food, and a favourite was the porridge."

Patient attended the Stickney Surgery for a medication review with Practice Nurse. The Nurse was running late with their clinic but the Receptionist informed the patient when they checked in that the clinic was running approximately 10 mins late. Once patient was called in to see the Nurse, they apologised for the delay. The appointment was not rushed and the patient was made to feel at ease. Any questions that the patient asked were responded to in a very positive manner and advice was given that was appropriate for the patient to address their concerns. All follow up procedures were explained.

Healthwatch Lincolnshire Update

NHS Dental Recovery Plan – Our Response

The NHS and the Government have published a plan to recover NHS dentistry setting out a major new focus on prevention and good oral health in young children, and an expansion of dental workforce.

What we think

Over the last few years Healthwatch Lincolnshire have continued to raise concerns on behalf of Lincolnshire people, about NHS dentistry, including providing evidence at the government health select committee which has resulted in the publication of the dental recovery plan.

The proposed dentistry recovery plan is a positive step forward in addressing critical issues in dental care. However, it's essential for dentists to fully embrace the new premium payment system, actively promote appointment availability for new patients, and prioritise those with urgent dental needs to ensure fair and equitable access to NHS dental services.

The increasing cost of living has made dental care less affordable for many, leading to a concerning trend where one in five* individuals are now avoiding dental visits due to financial constraints. This marks a significant increase from one in ten just a year ago, highlighting the urgent need for solutions to make dental care more accessible and affordable for all.

Initiatives aimed at incentivising dentists to work in underserved areas, often referred to as 'dental deserts', and the use of mobile dental vans to reach remote communities are commendable efforts. Additionally, expanding prevention programs for children is crucial for promoting good oral health from a young age.

While these measures are commendable, more transformative strategies are needed to ensure the long-term sustainability of NHS dentistry. One crucial aspect is to make it easier for people to register with a local NHS dentist and receive regular check-ups and preventive care, fostering trust and enabling proactive management of oral health issues.

Ultimately, the goal is for individuals to have easy access to comprehensive dental care, similar to how they would with a local general practitioner (GP), ensuring timely treatment and preventative measures are in place for optimal oral health outcomes."



***Data from a poll of 2008 adults living in England, January, 2024**

Menstrual Health Survey

Our focus for the first quarter of 2024 is menstrual health covering topics such as Endometriosis, Polycystic Ovary Syndrome (PCOS) and Menopause. So far, we've had over 360 responses! A huge thank you to everyone who has taken the time to share their experiences.

If you would like to share your experience as a patient/service user, [please do so here](#).

If you are a professional working in services which support those navigating these conditions and would like to share your thoughts, [please do so here](#).

Both surveys close at the end of March.

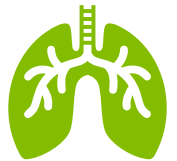
Respiratory Health – Our focus from April – June 2024

As Healthwatch Lincolnshire, we are dedicated to improving the quality of healthcare experiences for individuals. Between April to June, we will be focused on hearing the experiences of those living with respiratory conditions such as asthma and COPD.

We understand the significance of involving those directly affected by these conditions in shaping the services and support available to them. Therefore, we are initiating a collaborative effort to gather insights and perspectives through patient experience surveys.

Are you working with those affected by respiratory conditions? We would like to hear from you! Together, we can work towards creating a more supportive and responsive environment for those managing respiratory conditions in our community.

Additionally, we are keen on learning about any existing work or initiatives already carried out in the community. By understanding past efforts, we can build upon existing knowledge and experiences to further enhance our collective impact.



Contact info@healthwatchlincolnshire.co.uk or call 01205 820 892

Enter and View Activity



The Enter and View visits to Grantham Community Diagnostic Centre (CDC) and Skegness Urgent Treatment Centre have been completed. Thank you to the team of authorized volunteers, the NHS teams and those who shared their views for their support.

The work was part of a project carried out by Healthwatch England and the findings have been shared with them.

Our Enter and View visits to some care homes in Lincolnshire will recommence in February.

Engagement Activity

Our Involvement Officer has been out and about speaking to many different communities and representing the patient voice in different system meetings. This includes:

- Working with the Lincolnshire Traveller Initiative whose support has been invaluable to our project with the Care Quality Commission (CQC),

- Engaging with the Lincolnshire Veteran and Families Network and Family Hubs,
- Attending Quality Review Meetings and the United Lincolnshire Hospital Trust (ULHT) patient panel,
- Workshops on Health Inequalities focusing on Neurodiversity and Autism.

Volunteering

In January our volunteers clocked up 50 hours volunteering – amazing!

- Several Warm Hubs in the county were visited, reaching out to many vulnerable as to the work of HWL and how signposting from HW could assist them with appropriate personal or family issues.
- The Enter and View team were busy visiting Skegness Hospital and Grantham Community Diagnostic Centre. Much positive feedback was obtained, and the NHS staff were very pleased to see the team in action.
- Horncastle Community Centre, in the heart of the town, was visited 3 times as part of the NHS/University of Lincoln REN Project. Again, much information for the survey was obtained from numerous community groups.



A huge thanks to our brilliant volunteers for their invaluable support!

Demographics

In addition to location data, for those who consent, we collect demographic data from the individuals who contact our Information Signposting Officer to ensure we are hearing from a people across all the communities in Lincolnshire.

Demographic	Number of people	Demographic	Number of people
Age		Ethnicity	
0 to 12	1	White: British/English/Northern	18
18 to 24	2	Irish/Scottish/Welsh	
25 to 49	8	White: Irish	1
50 to 64	8	White: Gypsy, Traveller or Irish	1
65 to 79	17	Traveller	
80+	4		
Gender		Carer	7
Male	11	Long term condition	14
Female	30		



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