



Healthwatch Lincolnshire

Rooms 33-35,
The Len Medlock Centre
St George's Road,
BOSTON
Lincolnshire
PE21 8YB

Healthwatch Lincolnshire Patient Experiences for: June 2024

We would like to remind stakeholders that our communications with you emanate from February 2013, when Sir Francis Keogh produced his review of the Mid Staffordshire Enquiry "to Robert Francis. Within this report Keogh cited a number of failings of the system and under the reforms, local Healthwatch is intended to be the local consumer voice with a key role in influencing local services. In both Winterbourne and Mid Staffs the patient voice and the voices of others within the system were not acted upon causing patient suffering and harm, as a local Healthwatch we must continue to raise and challenge the issues raised with us.

This report has been produced by Healthwatch Lincolnshire to highlight the health and care experiences shared with us for the period 1 to 30 June 2024 where 60 comments were raised.

We note that all of these issues are taken at face value and there is sometimes limited detail and context to the feedback, however where a patient or loved one has taken the time to share their views or experiences with us we feel it is important, and indeed we have a duty to share these in the best interest of the health and care system.

- The map points are coloured according to the sentiment
 - Positive - green
 - Negative - red
 - Mixed - orange
 - Neutral - blue
 - Unclear - grey

Prominent areas of interest came under the topics of:

- Access to GP appointments, via phone and online
- Medication delays, prescriptions and delivery
- NRS - Wheelchair services not responding to patients concerns.

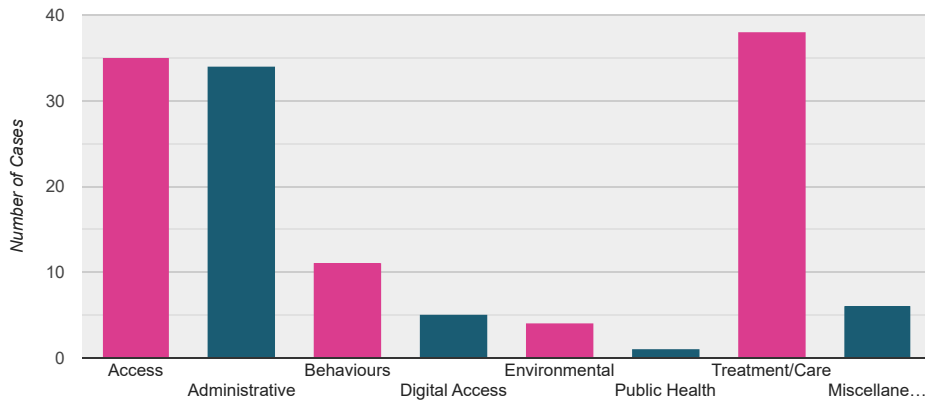
Where we have been for Outreach Clinics in June

- Skegness - Storehouse
- Sutton on Sea - TideTurners Hub
- Spalding - Citizens Advice Unit
- Mablethorpe - Coastal Centre
- Lincoln - Extra Time Hub, LNER Stadium

Statistics

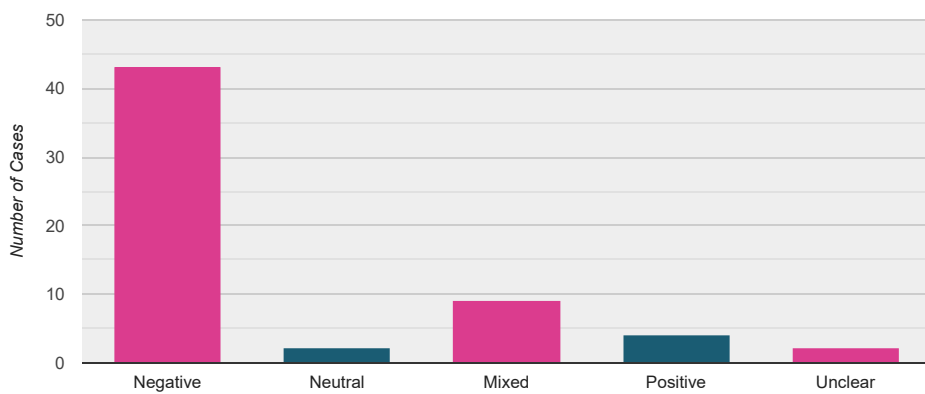
Total cases: 60

Theme Areas



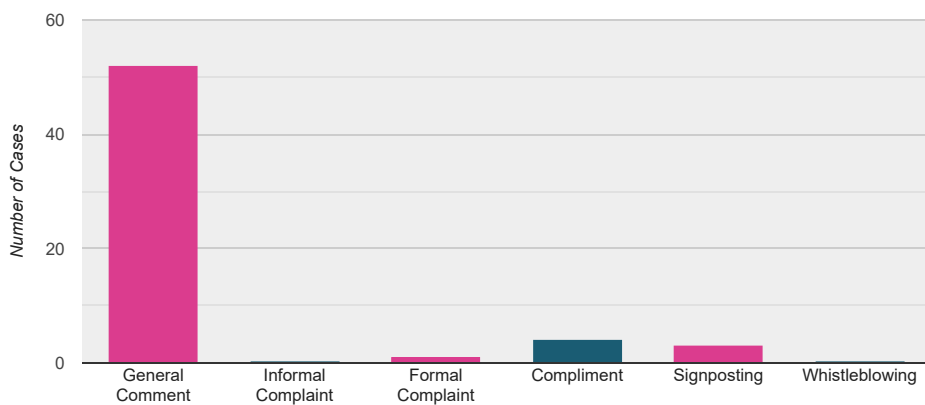
Theme Areas	Cases
Access	35
Administrative	34
Behaviours	11
Digital Access	5
Environmental	4
Public Health	1
Treatment/Care	38
Miscellaneous	6

Sentiments



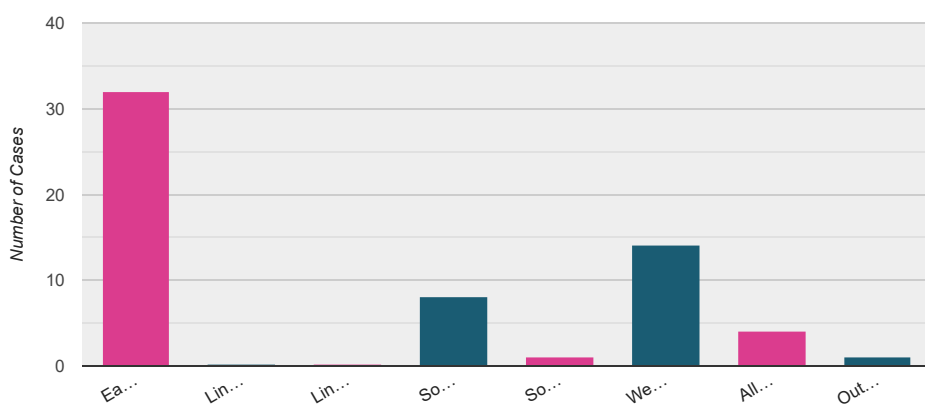
Sentiments	Cases
Negative	43
Neutral	2
Mixed	9
Positive	4
Unclear	2

Case Types



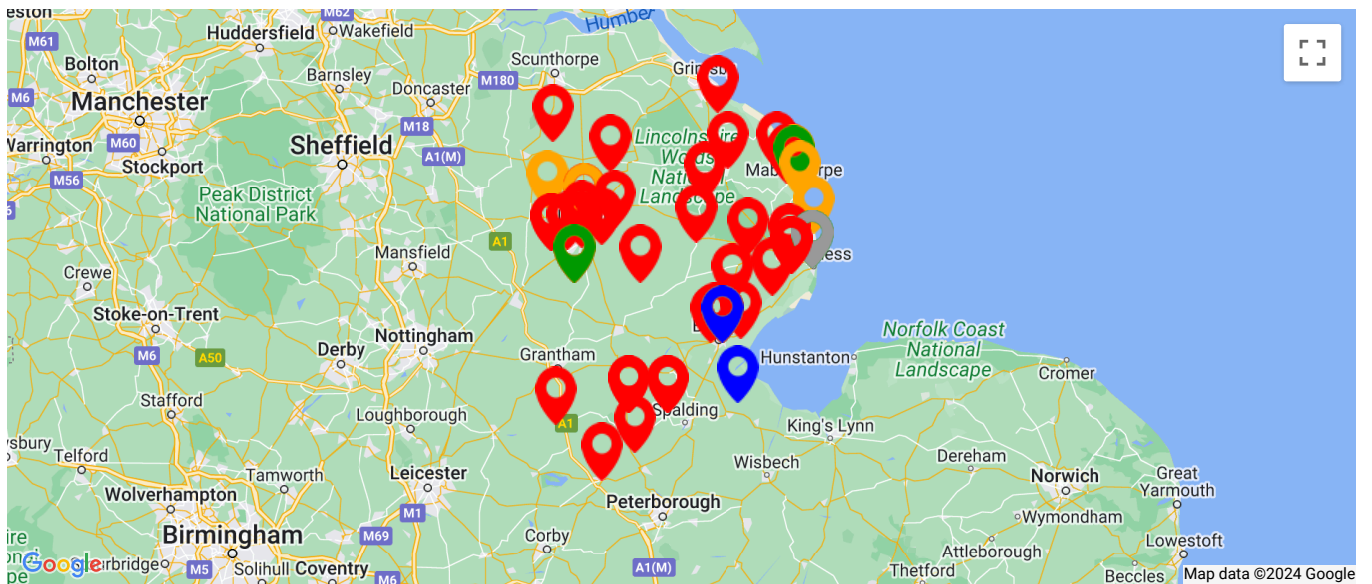
Case Types	Cases
General Comment	52
Informal Complaint	0
Formal Complaint	1
Compliment	4
Signposting	3
Whistleblowing	0

Areas



Areas	Cases
East Locality	32
Lincolnshire CCG	0
Lincolnshire Integrated Care Services (ICS/ICB)	0
South Locality	8
South West Locality	1
West Locality	14
All Areas	4
Out of Area	1

Map



Cases

Community Health Services

Area	Case Details
<p>East Locality x 2</p> <ul style="list-style-type: none"> • 1 x General Comment • 1 x Compliment 	<p>General Comment</p> <p>1. Case 13692 (28-06-2024)</p> <p>Providers: Lincolnshire Integrated Care Services (ICS/ICB), NRS Healthcare</p> <p>I have been waiting since October 2023 for my severely disabled child's replacement headrest from the wheelchair service, my child's has had their headrest for many years, it is now very worn and it is very rough. My child has psoriasis on their head and the headrest cover has made their head sore due to how rough the cover has become. I have made numerous calls regarding the delay and have spoken to, Clinical Lead and many other members of staff, who also worked for the previous company AJM. I have been told it's been ordered, it's not been ordered, it's been lost, waiting for quote, lost the quote etc, etc. I put in a complaint by email on 25th of April and never received a response, today the 27th June I have again spoken to NRS who have now informed me it hasn't actually been ordered and they have no idea why, as the clinical lead should have ordered it. I again explained it will be a year at the beginning of October and still I am no nearer closer to getting the replacement headrest cover for my child. I no longer feel that I am getting anywhere myself at trying to sort this problem and therefore ask for your urgent involvement before I take this matter up with NHS England.</p> <p>The wheelchair service is NRS Healthcare, would you please contact them for my child to get this long awaited matter resolved.</p> <p>Notes / Questions</p> <p>Carer requests that Healthwatch make contact with NRS and Contract Lead. No response to date</p> <p>Provider Response</p> <p>HW have contacted services on several occasions, no response to the parent nor Healthwatch from the services.</p> <p>Compliment</p> <p>1. Case 13674 (19-06-2024)</p> <p>Providers: Lincolnshire Community Health Services NHS Trust (LCHS), Skegness Hospital</p> <p>Took my young 3 year old relative to Urgent Treatment Centre at Skegness last year. Took them to local GP in Skegness but were not registered locally, as visiting relatives in the area, advised to go to Urgent Treatment Centre at Skegness. Young child was unwell, had a temperature and very sleepy. Very happy with the care received at UTC, staff lovely. Child diagnosed with eye infection and a chest infection and treatment given there and then.</p>

<p>South West Locality x 1</p> <ul style="list-style-type: none"> • 1 x General Comment 	<p>General Comment</p> <p>1. Case 13636 (05-06-2024)</p> <p>Providers: Lincolnshire Community Health Services NHS Trust (LCHS)</p> <p>Patient has shared experience and frustration of not being able to get through to the Podiatry service on the number given. This is in relation to trying to cancel a Podiatry appointment when they felt unwell. They were referred to the service urgently by their GP at the end of last week. The Podiatry service had rung twice when patient was asleep and unwell and left a telephone call to ring back. Patient tried to ring back, over a period of 3 hours when they felt unwell and could not get through, phone just rang and rang.. Patient tried to ring The Newlands Health Centre where Podiatry Service is based, unable to get through to anybody, phone just rang and rang. Patient states that this is "unacceptable and outrageous to being given contact phone numbers that are not answered and this is getting worse, and using COVID and lack of staff is an excuse"</p>
<p>West Locality x 3</p> <ul style="list-style-type: none"> • 2 x General Comment • 1 x Compliment 	<p>General Comment</p> <p>1. Case 13693 (28-06-2024)</p> <p>PCN: APEX</p> <p>Providers: Connect Health Services - Pain Management , Richmond Medical Centre</p> <p>Contacted by carer about their spouse who has Parkinson's Disease and Spondylosis of the spine which they get continuous and debilitating pain from. They were referred to MSK service and were seen, but signposted back to the GP for referral to Connect Health for Pain Management. GP referred to Connect Health Pain Management in mid April, GP confirms that referral made and at that time Connect Health sent a text to say that referral had been received and there would be a 2 week wait. Now at the end of June has heard nothing about an appointment.</p> <p>Notes / Questions</p> <p>Patient request for HW to contact Connect Health Pain Management Health Services</p> <p>HW contacted Connect Health- confirmed patient had been referred and had text appointment details to mobile phone number on their system yesterday afternoon.</p> <p>HW contacted patient and advised them to ring Connect Health telephone number given</p> <p>2. Case 13649 (12-06-2024)</p> <p>Providers: Lincolnshire Community Health Services NHS Trust (LCHS)</p> <p>Grandparent is currently being looked after at John Coupland Hospital, following being very ill at Lincoln County hospital, where they were admitted for a broken back. Has since been catheterised because they can no longer urinate by themselves, and has a new infection almost every week, these are being controlled by antibiotics. It has been approximately 5 weeks that they have been staying in the hospital, and was previously at Lincoln hospital for 2 weeks.</p> <p>Today they rang me complaining about a suspected urine infection, however nurses have not been helpful whatsoever, the nurses have told them they "look fine". This is malpractice as the nurses are ignoring a patients concern, are assuming they are healthy because nothing "looks wrong", and aren't applying the values of care, which include meeting patients needs to the best of their ability. My grandparent feels very isolated and is anxious to speak up because they are afraid they will carry on being ignored.</p> <p>Also, upon visiting there were a few things that rang alarm bells for me, for instance we had to go and find a nurse to take grandparent back to the ward from the day room, because after numerous attempts to ring the buzzer, not a single nurse came. When we did find the nurses, all of them were gathered round one place talking and using their mobile phones, no patients were being monitored. I am honestly appalled that nurses, who are supposed to have a duty of care and should prioritise those of ill health, are so careless and unmotivated to help as best they can. I really do understand that those individuals working for the NHS are tired and stressed due to long working hours, and so it is hard to meet everyone's needs and make everyone comfortable all the time, but then it is the higher ups fault and something seriously needs to be done to fix this so that professionals are also able to look after their own wellbeing's so that people like my grandparent aren't being neglected.</p> <p>Notes / Questions</p> <p>Healthwatch provided PALs information so this could be looked into</p> <p>Compliment</p>

1. Case 13687 (27-06-2024)

PCN: Trent

Providers: E.R Dixon (Lincoln) Opticians, SpaMedica Newark

Individual and spouse very happy with the care and treatment received at Spamedica in Newark. Spouse is partially sighted due to macular degeneration and visited Dixons Opticians in Lincoln for eye assessment, needed further treatment and injections, long wait at Lincoln County Hospital, so referred to Spamedica for this. Waited for 2 weeks and received an appointment, seen and injections given, also seen and examined for eye haemorrhages and now having follow up there for Charles Bonnet Syndrome. Has accessed Lincoln and Lindsey Blind Society, has walking cane and cup holder.

Notes / Questions

Signposted to The Macular Society, Lincolnshire Sensory Service, Lincoln and Lindsey Blind Society, Lincoln and Lindsey Blind Society.

Primary Care services

Area	Case Details
<p>East Locality x 18</p> <ul style="list-style-type: none">• 18 x General Comment	<p>General Comment</p> <p>1. Case 13635 (05-06-2024)</p> <p>PCN: Boston</p> <p>Providers: AskChemist, Forbes Rd, Boston, Greyfriars Surgery, Lincolnshire Integrated Care Services (ICS/ICB)</p> <p>Patient experiencing difficulties with Pharmacy and deliveries of repeat medication. This has only been a problem since AskChemist have moved premises to Forbes Rd, Boston. Rang GP as estriol cream ordered by GP late May, due a delivery of this cream yesterday, did not arrive. Tried to get through on both phone numbers that they had for AskChemist, unable to get through. Now have run out of cream.</p> <p>Also issues with other medication, diabetic and has libre sensors delivered. AskChemist remain a week behind with these deliveries which means that they have to go back to pricking fingers and using a machine to check blood sugars which is painful and fingers very numb has had diabetes for 20 years. Insulin dependant diabetic, now not mobile. Also has got other medical problems and medication comes in blister packs, this is not the first time that there has been a problem with getting medication.</p> <p>Notes / Questions</p> <p>Healthwatch contacted Ask Chemist as requested by the patient , consent gained to share information.</p> <p>Provider Response</p> <p>Ask Chemist responded that the reason delivery did not come was because the cream needed was out of stock and that some should come in today and they would endeavour to deliver it tomorrow. HW informed patient.</p>

2. Case 13644 (10-06-2024)

Providers: Beacon Medical Practice

Recently I made a visit to my GP. I felt that the person I saw was not fully engaging and try to brush my concern aside. I explained to them that the right side of my jaw felt lower down than the left side. Also that the right side of my mouth was slightly lower. They put a pair of gloves on to feel my jawline and said things were fine and there was nothing to worry about, didn't seem to think there was a difference, however I know that their definitely is a difference. The person was pleasant. It seemed that they wanted to close the conversation and end the appointment as soon as possible.

When I mention that there was osteoporosis in the family, they said they would refer me for a bone scan. Usually when you visit a practitioner they will give you an indication as to how long it may be before you hear from the scan department. A practitioner would also ask questions. It seems that we were just going through motions. They said that they would have to ask someone about the scan. Surely a practitioner would know whether a scan was the right way forward or not. I am not sure where to go from here as at the beginning of the consultation they said that anything with the jaw was the responsibility of the dentist. I also wanted to discuss an issue that I had visited the surgery for recently concerning a problem with my neck. I wondered if the jaw and the neck issue were connected. I did not feel totally comfortable with them and didn't find it easy to engage. But as I said they weren't unpleasant.

Notes / Questions

Healthwatch provided Practice Manager information

Provider Response

Patient request for Healthwatch to go to Practice Manager.

Patient update 13/6/24 - The surgery contacted me today. She was very good and has arranged a telephone call for a week on Saturday with another practitioner.

3. Case 13678 (21-06-2024)

PCN: First Coastal

Providers: Beacon Medical Practice

Signposted to Healthwatch by Citizens Advice Bureau. Carer contacted Healthwatch as having issues with the GP Practice. Carer is a third party contact on relatives medical records. The GP will not sign exemption form for relatives council tax exemption. Relative has had diagnosis of schizophrenia while in prison in the last 6 months, and receives monthly medication via injection from the Mental Health Team. The Mental Health Team have emailed this information to the practice. Their relative is feeling very overwhelmed by the situation at present. They have always found the practice very helpful previously. They went to the practice yesterday to try and speak to someone but were unsuccessful. They would prefer to discuss this face to face. Does not have email capacity.

Notes / Questions

Patient request to contact Practice Manager on their behalf. Consent given to share personal information. Healthwatch contacted Practice Manager awaiting response.

4. Case 13676 (19-06-2024)

PCN: First Coastal

Providers: Hawthorn Medical Practice

Patient discussed that trying to get appointment at GP difficult. Cannot get through on the phone, does not have access to internet so they have to go and queue at the Medical Centre to see a Doctor.

5. Case 13679 (21-06-2024)

PCN: East Lindsey

Providers: Horncastle Medical Practice

Patient contacted Healthwatch as having issues and negative experiences at GP Practice. Has received a final warning letter from GP Practice, Horncastle Medical Group. This is in relation to patient aggressive, abusive behaviour. Patient has Autism when goes to GP is very anxious, wears sunflower badge. Does not feel listened to or respected at GP since previous GP retired. Feels that a plan needs to be in place at GP which documents on medical records that needs reasonable adjustments made, what their triggers are, what behaviour might happen if triggered, and what to do if this happens. That their preferred method of communication would be talking on the phone or face to face appointments, not texts or emails that cause anxiety.

Notes / Questions

Signposted to NHS Voiceability services and contact information. HW contacted Practice Manager as requested by the patient. Practice responded, meeting to be held with patient, letter to be sent with details.

Patient updated by HW.

Meeting arranged at Horncastle Medical Centre in early August. Patient has been sent a letter with this date and venue and issues to be discussed.

Provider Response

Response from Horncastle Medical Practice-

Thank you for your email regarding the named patient, the person dealing with this is currently on Annual Leave presently and as they were the staff member involved during the latest incident they do not wish to be involved. The following response below went back to the patient on the 12 Jun 2024 via email at the patient's chosen communication preference for a response from the Partners.

Whilst the Partners do appreciate your diagnosis of Autism, following this incident they are not willing to render any apology or appeal the letter. All practice staff deserve to be treated with respect from our patients and the Partners feel that this was not the case during your recent encounter with the Practice Manager, despite a previous letter being sent to yourself regarding unacceptable behaviour to any staff member in the Surgery.

*The NHS has a **zero-tolerance approach** to abuse and violence against its staff. There is no place for aggression, abuse, incivility, or any acts of violence in our society and the Partners maintain this approach at Horncastle Medical Group to all patients registered.*

The Partners have advised that if you wish to discuss your blood results then please submit an Ask My GP during service opening hours 07:45- 09:00 Monday – Friday and an appointment will be arranged once triaged. A warning letter has been issued by the Practice, but at the time of writing this email to you the patient has not been removed from the Practice as we have to date no further incidents. The Partners have agreed to look at a date for a meeting, but due to annual leave etc this is not likely to be Mid July and the patient needs to be aware they will not render an apology nor will they redact the letter. This will purely be to set up a behaviour agreement that the Partners feel needs to be in place to protect staff in the Practice.

Email from Horncastle Medical Group- Thank you for your email. In regards to the Accessible information standards we have already documented communication issues on the patients' records, like we do with all of our other patients registered here at the Practice. We have now taken text messages (marked as dissent). In regards to the patient contacting the Practice for an appointment, they can ring the surgery like all other patients who do not use Ask MY GP for an appointment. This telephone call will still be put on Ask MY GP by the team as all requests are triaged in this manner for all patients no matter what clinical condition, and some patients have proxy's set up on the system for carers/family members to action on their behalf. The patient may wish to set this up with someone. We can send a letter direct to the patient when a date is confirmed, but as advised in the first email this is not going to be until the later part of July as the Partners wish two of them to be present at the meeting due to the past history with this patient. Please advise the patient we will be in touch by letter once we have a confirmed date for the meeting, but again this meeting is not likely to be till the end of July.

Email response from Horncastle Medical Practice- Apologises regarding the time to get back to you with a date for the meeting, but I have been waiting dates for two of the partners to be available. A meeting has now been confirmed for early August 2024 at the practice. Senior Partner and another Partner will both be in attendance and myself. The partners wish to reiterate that this meeting is purely for a behaviour agreement and that no apology will be issued. A letter is being sent to the patient to inform them of the meeting as well.

6. Case 13634 (05-06-2024)

Providers: Lincoln County Hospital, Lincolnshire Integrated Care Services (ICS/ICB)

Experience shared of GP services, Hospital outpatients' appointments, Community Paediatrics at Lincoln County Hospital.

My child aged 10, is currently suffering with tics however we seem to be having a huge fight to be able to get them any support. Their tics are in their face, hands and feet, which may not sound like much but if you imagine your own hands, feet and face muscles constantly restricting, this impacts the rest of the body too, including arms, neck, shoulders and back, so they are in a lot of pain a lot of the time.

I have spoken to three different GP's about this - the first GP referred us to Healthy Minds as they said it is anxiety causing it however this was said without any face to face appointment or even speaking to my child. The second GP said they are unable to do anything and in around about way said we have to just deal with it. I explained this to Healthy Minds but they said the GP should not have said this and so I went back for a second opinion. Healthy Minds even emailed the GP too and demanded a face to face appointment for my child. The third GP actually listened and noticed their tics were particularly strong and painful and so GP put a referral in to the Community Paediatric team, as have my child's SENCO (Special Educational Coordinator) and school class teacher, however I have had a letter from them stating that they do not meet their threshold for help! This is for two reasons - the first they have not given Healthy Minds long enough to work. We had one session with Healthy Minds however they themselves have said this is not something they can help with as this is not anxiety or emotional based, this is physical/ neurological and they emailed their recommendations through, which were sent along with the referral but seemingly ignored.

The second reason was the most outstanding to me - they said Lincolnshire Community Paediatric Service is not commissioned to provide a service to children with Tics and Tourette's and to see our General Practitioner! I am shocked, saddened and angry at this all at once. How, in 2024, are children unable to access help for this in Lincolnshire? Do I have to move to another part of the country to be able to access support for my child? Anyone with an ounce of common sense knows that this is completely unacceptable, the support should be here for them now. The last sentence "please raise this with your GP" was also both dismissive and unhelpful. If they had checked their medical records during the triage procedure, they will have seen I have been doing this since January! Four different professionals have all agreed they need help, why is this being ignored by the Paediatric Team?

My child is in physical pain, the answer is not to pump them full of medicine for the rest of their life and make them deal with it like that. There is support for adults, where is the support for children?

Notes / Questions

Healthwatch signposted to ULHT PALS and LICB to try and get a satisfactory resolution Contact details for Lincolnshire Parent Carer forum given.

Provider Response

It is hoped that the author contacted the relevant departments and received a satisfactory response.

7. Case 13652 (12-06-2024)

PCN: Meridian

Providers: Lincolnshire Integrated Care Services (ICS/ICB), Pharmacy

Patient has chronic pancreatitis for years and has been on Creon Medication, more recently though this particular medication has not been available in Lincolnshire, but can get in other counties, such as Cambridgeshire or Bath that the patient know of at least. Pancreas does not produce enough enzymes which is why this medication is needed. has to get a paper prescription to take out of county every 28 days for this essential medication. GP has suggested contacting Consultant, which the patient has done, but unable to provide any alternative options. If the patient does not get the medications they could end up in hospital, which of course they do not want to do, so will keep travelling to Cambridgeshire to get their medication. Not blaming GP surgery and understands that there are restrictions with certain medications but would like to know why other counties are able to get this medication yet unable to access in Lincolnshire?

Notes / Questions

Healthwatch made contact with Pharmacy lead

Provider Response

Unfortunately, this is an identified national issue for drugs in this class, due to limited availability of active pharmaceutical ingredients and manufacturing constraints to produce the volumes required to meet demand. It has been subject to a recent National Patient Safety Medicines Supply notification alert (see <https://www.cas.mhra.gov.uk/ViewandAcknowledgment/ViewAlert.aspx?AlertID=103253>) and worryingly the supply issues for some brands of this type of medicine may continue until 2026.

The fact that this can be obtained from pharmacies out of the county may be down to several factors, including the current stockholding of that pharmacy (as they may already have had sufficient stock on the shelves), different wholesaler chains being used, or simply coincidence that at the time the pharmacy may have been able to order some of the limited supply within the supply chain from their wholesalers. Sadly, we do also see some pharmacies over ordering and stockpiling some medicines when such shortage notices are issued, which then creates a greater impact on the already fragile supply chain.

There has been clear guidance issues to clinicians within the alert to support patients in the best way possible in what is a difficult situation, and this includes restricting prescribed and supplied quantities, prescribing of alternative treatment options, or considering the use of unlicensed imports. None of these are ideal, but are perhaps a reflexion of the wider issues medicines shortages are causing within the UK, Europe and even globally.

Healthwatch called a number of Pharmacies and found one 14 miles away that potentially could get this medication, patient informed and would make contact.

8. Case 13664 (18-06-2024)

PCN: Solas

Providers: Lincolnshire Integrated Care Services (ICS/ICB), The Spilsby Surgery

Carer for a person they support wished to raise a concern regarding Spilsby Surgery.

The person whom I support has a range of medical conditions including autism, and ADHD. They relocated to the Spilsby area from London and for years they had been prescribed ADHD medication. Since registering at Spilsby Surgery, the surgery refuse to issue the ADHD medication as there is no ADHD specialist in Lincolnshire area and the surgery are refusing a care plan. The persons previous doctors, London based, have reached out to the surgery, however the surgery are continuing to refuse the person their ADHD medication.

This back and forth has been on going since April. The person paid for a referral to be made to ADHD 360 in April, and it appears the referral has still not been completed. They have had to pay for private consultants and psychiatrists to ensure they are able to continue their ADHD medication as without it, they struggle with daily tasks.

The wider concern is, people whom move to the Spilsby area whom have been diagnosed with ADHD, are all of a sudden having their medication stopped and refused. We have tried multiple means and methods with the surgery but they insist they can only work with NHS specialist and cannot work with privately funded ones, although the privately funded ones were previously in the NHS. Further more, there is not a ADHD specialist in Lincolnshire.

The person whom I support wishes to bring the issue to your attention. Currently since April they have spent thousands of pounds on medication, just so they can continue their medication normally prior to relocating to Spilsby.

Any advice/guidance would greatly be appreciated as it is more the people with ADHD whom are suffering.

Notes / Questions

Healthwatch provided ICB and ADHD Lincolnshire support information

9. Case 13669 (18-06-2024)

PCN: First Coastal

Providers: Lincolnshire Integrated Care Services (ICS/ICB), Marisco Medical Practice

Resident of Mablethorpe diagnosed with Autism, no local support groups anymore, previously was a group, but no longer. Resident also commented that there is no specialist in the Surgery for patients with Autism. Has to go to Sheffield for review as nothing in Lincolnshire available. Unable to go to this as caring for parent with Leukaemia .

Notes / Questions

Provided information on another online support group and Carers first. Already registered with Carers First

10. Case 13670 (18-06-2024)

PCN: First Coastal

Providers: Lincolnshire Integrated Care Services (ICS/ICB), Marisco Medical Practice

Marisco patient feels is not fully utilised properly, so many rooms and possibilities that could provide a great source for patients in the Mablethorpe and surrounding areas. The population has grown immensely in the last 30+ years, yet the infrastructure does not get any better for the ever growing population. That being said, patient commented that they are happy with the service the surgery provide as doesn't often need to use it. They seem to be trying their best, and expectations from patients are high. Perhaps if it wasn't such a rush to get on the phones at 8am then it wouldn't cause such a problem.

11. Case 13671 (19-06-2024)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Parent concerns relating to dependent. After years of useless procedures and wasted trips regarding their right knee. The consultant who was dealing with them has now discharged dependent as they are unable to provide further treatment. Dependent has returned to their GP for specialist help and has been informed they failed in finding a department for them. As they have been confined to a wheelchair for over two years due to failed procedures we are now at the end with no treatment available.

My dependent has suffered with Osteochondritis Dissecans of the right knee for 26 years. For seven years was ignored thanks to my ex and the GP at that time. At 18 was referred to Barlborough Hospital to clean the back of the Patella where a hole in the bone was found. Was then passed on to Lincoln Hospital who performed a Mosaicplasti which helped for 10 years then failed, a charitable organisation helped pay towards an alleged specialist in Liecester to deal with dependent, they promised the earth but delivered nothing and after years of trials and tribulations has now decided they can't/won't do anything more which is how we have ended up in this situation. We were also referred to Birmingham which also proved useless.

Notes / Questions

Healthwatch provided ICB information

12. Case 13677 (19-06-2024)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Met individual at The Storehouse who wanted to make a comment that Medical Staff , Doctors, Nurses ,Midwives, other medical professionals do not seem to be aware or trained about the importance of Vitamins, especially Vitamin D3, particularly antenatally, for babies and children. Feels that there needs to be more education in the NHS about alternative therapies, Vitamins, diet and the impact on health, especially prevention of diseases that could be prevented, and the need to go back to basics.

13. Case 13663 (17-06-2024)

PCN: Boston

Providers: Liquorpond Surgery

I have had some ongoing issues with care received from my surgery. Unnecessary blood tests and generally poor service and updates. This has in turn delayed a referral to the hospital.

Notes / Questions

Healthwatch suggested the patient make contact with the Practice Manager to discuss

14. Case 13646 (11-06-2024)

PCN: First Coastal

Providers: Marisco Medical Practice

Patient with a number of medical conditions, including COPD, diverticulitis and gallstones, has recently experienced pain under breast, funny taste in mouth and heart burn, feels unable to get an appointment at surgery on most occasions. Also looking for a gardener to cut back hedging and a cleaner to help out at home.

Notes / Questions

Healthwatch suggested, speaking to their GP or pharmacist, also provided Age UK information

15. Case 13665 (18-06-2024)

PCN: First Coastal

Providers: Marisco Medical Practice

Patient commented that trying to get an appointment is very difficult, when ill trying to get through on the phone is diabolical. Informed to go to A&E @ Grimsby previously and this was during the week as no appointments available. Getting medication is ok just the appointments system is terrible. On one occasion the pharmacist within the surgery convinced patient to call an ambulance, which the patient is very grateful for as they wouldn't have done this if not convinced to do so.

16. Case 13645 (11-06-2024)

PCN: Boston

Providers: The Sidings

Evergreen app where invented for a faster way to contact GP regards any medical issues, for the past few weeks app is offline to request an appointment, when you check service time on the app some days its less than for 5 minutes.

When you actually try to request on longer hours its still offline.

Ringling them up you always are in a queue with more than 40 people waiting to be picked. When they eventually ring back there is no appointment available. When you ask to book in advance even if its in a month time you can't as they don't have schedules for it. Only ring them up every morning hoping to get one. After 3 weeks of trying still unable to get one. As a working full time person its hard to manage this situation as not everyday you got the time to wait for a few hours to be either getting an appointment or let down by again ringling them up next morning.

There should be schedule upfront so all people requesting would get a chance to be seen by doctor.

Notes / Questions

No patient details provided

17. Case 13648 (12-06-2024)

PCN: Boston

Providers: The Sidings

It's impossible to get an appointment at The Sidings GP Practice. I have tried 3 times from 8am to book online. Each time I've been typing what they ask, and then get told I cannot continue as the service is offline. This is ridiculous. It should give people time to actually type what their concern is. I'm a fast typer, so I feel sorry for people with disabilities or who are not tech savy, as I am sure they are even in worse situations.

And when I try I ring, sometimes it has take 80 tries to get through to the main reception and be cut off. Or, if you do get through, to be greeted by a rude receptionist who basically won't listen and says all appointments need to be booked online.

Notes / Questions

Healthwatch signposted to GP Practice Manager in the first instance. How to make a complaint about GP by contacting LICB feedback.

Healthwatch asks - for those patients who are unable to book online what other options are available to them?

18. Case 13689 (27-06-2024)

PCN: Boston

Providers: The Sidings

Patient had chest x-ray 3 weeks ago for persistent cough and chest infection. Has had no results, rang GP Practice today, results are at Practice, advised that GP would contact them within 5 days and give results. Patient concerned as receptionist told them that the chest x-ray looked ok to them.

Receptionists with no medical training unable to give x-ray results?

Notes / Questions

No patient details provided

South Locality x 6

- 6 x General Comment

General Comment

1. Case 13691 (28-06-2024)

PCN: South Lincolnshire Rural

Providers: Boots Pharmacy (Bourne), Bourne Galletly Practice Team

For Information: Pharmacy

It concerns ordering repeat medication which has to be ordered at GP Practice and, when approved, is sent electronically to Boots Pharmacy, where the prescription is filled. On two consecutive occasions, this has not been fulfilled, causing relative to either run out of/nearly run out of medication. My relative is in the late stages of vascular dementia and is now bed-bound and relies totally on home visits from medical professionals as well as the care team I have in place for them.

I order their repeat medication and get any shopping that is required. Recently, my parent has also received two letters from the practice informing them that they are eligible for a Covid vaccination. I wrote a note on the first letter explaining that they would need a home visit for this and posted this in the repeat prescription box in the practice reception. To date, I am not aware that they have been vaccinated. This also happened in the Autumn round of vaccinations. I am no longer able to ask my relative if they have been vaccinated as the information they give me is unreliable, or they are unable to remember. To my knowledge this is also the second time thus far that this has not been carried out. I have looked on the CQC website, but was unable to lodge my complaint there. Could you please advise me the best course of action.

Notes / Questions

Signposted to Practice Manager in the First instance. LICB, CQC, and PHSO contact information given.

Provider Response

Patient responded that they did not want to contact Practice directly as concerned that there would be repercussions about relatives care, but wanted it noted.

HW signposted patient to ICB to ensure home visit by Covid Vaccination Team for home visit for Covid Booster for relative.

2. Case 13637 (05-06-2024)

PCN: Boston

Providers: Greyfriars Surgery, Lincolnshire Integrated Care Services (ICS/ICB), Pharmacy, Qualipharm Ltd Boston West Business Park Sleaford Road Boston (FMQ89), The Sidings

Patient wanting to express negative experiences with local Pharmacy and GP in Boston. Feels worried that due to poor service at Pharmacy and issues that Pharmacy blame GP practice, they feel that their elderly relative will end up being very ill as recently had to ration BP medication so that it lasted over a weekend, as did not get delivery of medication as promised. "Worried that I will find them collapsed on the floor because they have not had their medication ." Also had issues with their own and spouses delivery of medication on time. When they spoke to the Pharmacy Manager they blamed GP Practice. GP Practice stated that Pharmacy sending emails with 30 individual requests for medication, 3 weeks before medication due. GP's were not opening these emails.

3. Case 13667 (18-06-2024)

PCN: South Lincoln Healthcare

Providers: Holbeach Medical Centre

Should a GP surgery provide medical information of a patient who has lost mental capacity to make financial decisions to a relative who is registered as their attorney for Health & Welfare when there is no LPA in place for Health & Welfare?

Notes / Questions

Healthwatch suggested contacting the Practice Manager of their GP Surgery

Provider Response

Response - I will make contact with the Practice Manager and let you know the outcome

4. Case 13690 (27-06-2024)

PCN: Four Counties

Providers: Lakeside Healthcare Stamford (St Mary's and Sheepmarket)

St Mary's surgery, Lakeside Health Care ,Stamford. I used the NHS app to order a repeat prescription. I waited the required period (actually left it longer than that) before trying to collect at my local pharmacy. Only to find they had not been sent. I had to go to the surgery and speak with their pharmacy assistant. They informed me that the prescription had not been actioned and would send it to a GP this afternoon to get it signed and sent across.

I have numerous health conditions and find it extremely difficult and painful to walk. This is not the first time this has happened, probably three times this year. Also the surgery (someone there anyway) in March had not followed what I have requested and just blanket gave me everything on my repeat prescription list including medication I no longer take.

Notes / Questions

Healthwatch suggested contacting the Practice Manager and to update them with medications they are no longer on.

5. Case 13682 (26-06-2024)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

I am contacting you on behalf my friend who has not got legal documents to stay in UK so I can not help them to register GP. Unfortunately they have back pain for about two months now and needs to see a physiotherapy but they need register with a GP first. We are in Bourne

Notes / Questions

Healthwatch provided ICB (PALs); Understanding rights to register with GP services; Temporary GP registration and refugee/immigration access to GP information.

Provider Response

Thank you I will give it a go

6. Case 13684 (26-06-2024)

PCN: Spalding

Providers: Lincolnshire Integrated Care Services (ICS/ICB), Munro Medical Centre

I would like to make an official complaint with regards to the appalling treatment of my poorly parent at the hands of both local doctors surgery's and hospitals.

My parents case has been one of frustrating complexity after 4 years of visits to both private health clinics and NHS A&E Departments at Peterborough, Boston, Cambridge, Norwich, Lincoln and Chesterfield Royal. Paramedics have also attended on numerous occasions, having been called out on 999.

They have had CT/MRI Scans, Blood, Urine and Stool Tests, Dermatologist and Gastro Reports, Ultrasound, with private and NHS Consultants with no specific results to determine what is going on. My parent has also changed their GP Practice over the last few weeks, due to frustrations of not being offered or referred to additional specialist's who may know what their illness is.

Every time a test is carried out, the results come back negative - which I find incredulous, as they are still very unwell.

No treatment has been provided throughout the period and their condition has deteriorated on a monthly basis, with their mobility and "Quality of Life" being seriously impaired.

I have over the past 2-3 years watched them suffer with the following symptoms:

- Distended Bloated Stomach and Abdomen with considerable pain
- All over body rashes with blistering underneath the skin on legs, ankles, feet
- Shin Bone pain
- Muscle wasting
- Very pale complexion
- Watery eyes, blurred vision
- Off balance, disorientation and not being able to get out of bed and walk properly
- Nausea and feeling sick along with headaches
- Trembling hands
- Feeling Weak
- Pain and pressure in the Back/Neck/Spine - (Cervical laminectomy operation in May 2022)

I took my parent in to see Dr at Munro Surgery in Spalding where they have just registered, to have some tests done in late June.

A letter was received today from Munro Surgery Practice, to say that my parent would need further tests and that Urine Samples would be required and to have this done in a 2 week time frame, which is NOT acceptable considering their condition. I spoke to the Practice and I have asked that the Senior Practice Manager contact me to discuss my parent's case directly and to speak with the Dr to get a test completed this week, as we want to know what is going on with my poor parents health.

It just seems that no one is interested, nor has any urgency to determine what the health issue is with my parent.

NHS Lincs seem to be falling apart and appear incapable of providing a decent standard of health care for elderly patients.

Notes / Questions

Healthwatch provided GP Practice Manager and ICB information.

West Locality x 8

- 7 x General Comment
- 1 x Compliment

General Comment

1. Case 13683 (26-06-2024)

PCN: South Lincoln Healthcare

Providers: Brant Road Surgery

Patient suffering with anger issues which is not normal for the patient. Previously, around 4 - 5 years ago had these problems which were related to a hormone imbalance, it is effecting home life and those who live in the same household, causing rifts. Completed AskMyGP yesterday morning, surgery stated someone would be calling back, then received a message at 7.30pm to say will deal with this tomorrow, after waiting in all day. No call has been made as yet and there are a quite a few things needing to be discussed, worried that patient is in considerable pain. Understands Drs are very busy, but feels not being taken seriously.

Notes / Questions

Request for Healthwatch to make contact with Practice Manager

Provider Response

Practice - Although it is the Dr is on a day off today, I have just double checked this with them and they assure me that they will be dealing with the request today. I cannot put an exact time on it.

Patient - been in contact and not going to do anything, very disheartened now.

2. Case 13651 (12-06-2024)

PCN: Trent

Providers: Cleveland Surgery

For some time I have been trying to get rid of a small but growing lesion on my left foot. It has not responded to the "usual" over the counter preparations or my cetra ben cream that I use daily. On reporting my concerns to Cleveland I was advised to purchase some hydrocortisone cream over the counter, So I dutifully plodded off to the pharmacist who after an examination recommended a combined anti-fungal hydrocortisone cream. However this was a prescription only medication so they couldn't sell it to me and had to sell me two separate creams that cost me £10. As a pensioner I have to watch every penny and if Cleveland could have given me a prescription and I would have been entitled to the combination cream free of charge !!!!!

My blood pressure has been excessively high for some time despite increments in my medication and adding other compounds into the mix. I now take Bisoprolol, Doxazosin and Losartan. In order to investigate further I had a blood test mid April and received the almost standard response from Cleveland that the blood test result warranted "no further action". I contacted the surgery and followed it up with an email early May, having heard nothing, reminding them that the blood test was only a first step in investigating my still rising blood pressure. To date I have heard nothing back.

My grandchild, who has been under the psychiatric team and now needs antipsychotics as well as sleep meds has had no end of trouble getting their meds on time as due to their nature they need a prescription every week and sometimes it just hasn't been passed to the pharmacy on time.

Notes / Questions

Healthwatch provided information to contact - GP Surgery Practice Manager

3. Case 13688 (27-06-2024)

PCN: Imp

Providers: Glebe Park Surgery

Individual and spouse finding it difficult to make appointments or see a GP at their Practice. Unable to get through on telephone to make appointment, when they do, no appointments left. Usually go to the Surgery which is nearby and wait in queue to get GP appointment. Do not have access to internet to use online system to make appointments. Spouse is partially sighted, so cannot use technology, relative has to go online and book urgent appointments. Glebe Park Practice is about to move to The Carlton Centre in Lincoln which will make a much longer journey to travel to make appointments. Bus journey to get there difficult and longer.

4. Case 13650 (12-06-2024)

Providers: Integrated Care Board Dental, Treeline Dental Lincoln

Today I visited treeline dental Lincoln. Unfortunately they did not do anything.

As I said to them I have been feeling pain for at least one week but they said me. I can't do anything without Lincoln Cunty Hospital x ray. But they have x-ray on their clinics. Next appointment mid July, I cant wait for more then 1 month.

Notes / Questions

Healthwatch provided Practice Manager information

5. Case 13643 (10-06-2024)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

For Information: Lincolnshire County Council - Adult Social Care, Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health), United Lincolnshire Hospitals NHS Trust (ULHT)

Ladies Luncheon (Lincoln) 6 June 2024

- Bereavement services and access to them in Lincolnshire in a timely manner. Some people finding it very difficult to access the right service at the right time. Those that had a partner looked after by one of the Hospices found access much easier as they were already known to the service and support was offered immediately. (both telephone, 1:1 and group sessions) Macmillan was a bit hit and miss and only telephone support had been offered within the last 12 months.
- GPs offered medication for bereaved loved ones and did not explore any other options e.g., talking therapies. Some were told by the Hospice staff how to self refer into the service which was useful for a couple in the early stage of bereavement especially when unexpected death had occurred. There seemed to be lack of empathy for the surviving spouse.
- Respite care was challenging to find and access. However, those patients who were known to the Hospices, again better support given and access to respite gained much quicker.
- A few had experienced respite care and then circumstances changed that the person was then not able to come home. Difficult times for the person and their family. Lots of guilt felt by the carer and little support given to them at this time. Mixed experiences through contact with adult social care and the care home. Communication was not always good. Important that carers are kept informed of any changes and they can support their loved ones.
- Different experiences in how bad news is delivered to patient / carer especially at palliative or end of life. It depends whether in a hospital setting (most experienced very poor communication) to Hospice, palliative teams very good and very sensitively handled with compassion. Lack of dignity in hospital settings against more personal and private by the Hospice Teams. Those that had experiences with Macmillan nurses directly expressed positive feedback generally.

Notes / Questions

Information given to the group about talking therapies and self referral

Provider Response

Thank you for sharing. Our teams have recently introduced a new training programme called 'Lets Talk Cancer which was developed by the Royal Free Hospital which alongside Breaking Bad News training we hope will upskill all our staff. We would encourage anyone who has had a difficult experience or feels that communication was not as good as it could have been to please raise this with staff so we can address this for them and make improvements.

6. Case 13685 (26-06-2024)

PCN: Imp

Providers: Lindum Medical Practice

Participant at Extra Time Hub at Lincoln City Foundation shared experiences of their GP practice. That they can rarely see a GP. That they suffer from PTSD, depression, asthma, arthritis and hypertension. They get phone consultations which are a waste of time. How can you sort out a chest infection that way? Because of mental health issues finds access to internet difficult and because of this would not use online GP services, face to face would be the preferred method. I feel no one cares and end up on the veterans helpline afterwards as I feel so bad.

Notes / Questions

Signposted to Veteran Charities. Midlands and East Veterans Service (M.E.V. Transition, Intervention and Liaison Service (TILS) contact details given.

Has 24 hour contact details for SPA mental health phone line.

7. Case 13672 (19-06-2024)

PCN: APEX

Providers: Richmond Medical Centre

Trying to pre book a doctors appointment. I'm not happy and not just for myself but for everyone who needs to pre-book appointments due to working in our own work environment that also works with a booking service. How do I get to see the doctor if I can't ring up in the morning because by that morning I'm booked up myself or if I'm lucky I'll have spare appointments that day to work with but the appointment offered to see the GP is not the time I have available?

I rang my GP surgery to ask to book an appointment for another day where I know at this moment in time I could book my time out to go to the doctors to be told I have to ring on the morning. Which is great for people who can be flexible but I, and many others don't have that luxury. That would mean I'm letting people down because I would then have to cancel my own clients which unlike GPs I'm not happy about letting people down.

This system of booking first thing in the morning is not helpful at all. I need to see a doctor and now I can't unless I take a day off work to make me flexible which means losing money as a lot of us are self employed so we get no holiday pay and lose a day's money. So yet again I'm not going to bother with the doctors appointment again that I need because I have bills to pay and children to feed .

This is not acceptable for anyone. We pay out taxes to have this service when needed but yet we can't access it when needed. I'm really not well and really need to see a doctor but I have no options available to me other than A&E which there run off there feet and probably because of this hard to get an appointment with our own GP . We all sick of the COVID excuses now and things need to change...

Notes / Questions

Healthwatch asks: How are patients who work accommodated for access to appointments? Are these patients able to book into extended hours, and how are they informed they should be able to do this?

Compliment

1. Case 13687 (27-06-2024)

PCN: Trent

Providers: E.R Dixon (Lincoln) Opticians, SpaMedica Newark

Individual and spouse very happy with the care and treatment received at Spamedica in Newark. Spouse is partially sighted due to macular degeneration and visited Dixons Opticians in Lincoln for eye assessment, needed further treatment and injections, long wait at Lincoln County Hospital, so referred to Spamedica for this. Waited for 2 weeks and received an appointment, seen and injections given, also seen and examined for eye haemorrhages and now having follow up there for Charles Bonnet Syndrome. Has accessed Lincoln and Lindsey Blind Socieity, has walking cane and cup holder.

Notes / Questions

Signposted to The Macular Society, Lincolnshire Sensory Service, Lincoln and Lindsey Blind Society, Lincoln and Lindsey Blind Society.

All Areas x 3

- 3 x General Comment

General Comment

1. Case 13638 (05-06-2024)

Providers: Integrated Care Board Dental

I am looking for advice around my current situation with my NHS Dentist.

I am currently registered with an NHS Dentist. At my last appointment my dentist informed me they were leaving and I'd have to ring in January 2025 to book my next check up as they currently couldn't book the next appointment as they haven't got a replacement yet. A month has passed and my relative who is registered with the dentist has tried to book their check up and has been told we are no longer registered as they haven't found a replacement. They have said we are now on the NHS waiting list which is 2+ years. They offered the opportunity to sign onto their private scheme.

We have had zero communication about this development, meaning a lot of patients will be unaware of the situation and we have been left confused about where we now stand.

To be unregistered due to a dentist leaving and then put back on the NHS wait list of 2 years plus, leaving us currently we no NHS dentist. All without communication seems some what ethically unacceptable. Are you able to provide any guidance on whether this matter should be raised to the appropriate body.

Notes / Questions

Signposted to NHS Dental Treatments, and LICB feedback Centre.

2. Case 13647 (12-06-2024)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

VoiceAbility Healthy Lives Group

- Annual Health Checks 2023/2024 data shows that 79.8% of Lincolnshire GP Practices have completed them but no information shared on the quality across the county. One Practice on the East coast have done all of theirs by phone! Group felt that this was not acceptable and should show that they have completed them. NHS England target is 75%.
- Are all Practices signed up to it?
- Is it a compulsory part of their service level agreement?
- How is the quality of the Health Check being monitored / reviewed?
- How are Practices making reasonable adjustments to accommodate patients with additional needs?
- What is the overall figure for Lincolnshire on the LD Register that qualify for the Annual Health Check?

Notes / Questions

Please see questions raised within comments

Provider Response

The LD annual health check is an Enhanced service that GP's can sign up to undertake. I am sure you have seen the link below which does set out the quality element. The GP does not have to sign up to all enhanced services, but if they do, they should fulfil all requirements of the contract. The only area that is mandatory is the provision of an LD register, this is a QOF clinical domain. It is possible to do some parts of the LD check over the phone, but there is provision made for a Physical health check examination is carried out, which also includes BP, Weight and were appropriate Blood test. It is also important to ensure that **Reasonable Adjustments** are considered for each individual.

[GP Contract Services: Data Quality Statement - NHS England Digital](#)

[Blood Tests for people with Learning Disabilities \(derbyshirehealthcareft.nhs.uk\)](#)

[The Primary Medical Services \(Directed Enhanced Services\) Directions 2024 \(publishing.service.gov.uk\)](#)

3. Case 13657 (14-06-2024)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Patient rang Healthwatch, 5 weeks 6 days into their pregnancy and spotted blood when they wiped after going to the loo. Has phoned their GP and they say that everything is normal but patient is still worrying and would like some reassurance. Did not find GP helpful. Discussed that if needed any further medical help and did not want to go to GP to access NHS 111, or present at Urgent Treatment Centre or Accident and Emergency. Has referral to Community Midwife team.

Notes / Questions

Signposted to NHS111 if having pain and bleeding. To go back to GP if needing further non emergency assistance. Present at Accident and Emergency, Urgent Treatment Centre if unwell, pain, bleeding in early pregnancy.

Out of Area x 1

- 1 x General Comment

General Comment

1. Case 13673 (19-06-2024)

Providers: Out of area

Patient feeling very frustrated with GP, registered at Thistle Moor, Medical Centre, Peterborough though lives in Spalding. Has had ongoing and prolonged back issues, pain, numbness in legs, not able to lift or carry out sharp movements, feels rubbing and pain of bone on bone rubbing in back. Impacting day to day life and work. Went to GP last October just prescribed pain killers and physiotherapy, this has not helped. Feels that needs further investigations, has had no scans or x-rays, so has no medical diagnosis.

Notes / Questions

Signposted to Healthwatch Peterborough.

Hospital Services

Area	Case Details
East Locality x 8 <ul style="list-style-type: none">• 7 x General Comment	General Comment

- 1 x Compliment

1. Case 13641 (10-06-2024)

PCN: East Lindsey

Providers: Diana, Princess of Wales Hospital (Grimsby)

Carer for elderly spouse who has breathing problems, COPD, Asthma and Bronchitis was previously under Grimsby Hospital but had been discharged. Saw GP as breathing difficulties worsening, only able to walk 5 steps without being out of breathe. GP referred to respiratory at Grimsby Hospital in May 2024 and has been informed in excess of 35 - 40 week wait for an appointment, so has decided to pay privately for this, although not really able to afford.

Notes / Questions

Healthwatch provided PALS information should they need it

2. Case 13634 (05-06-2024)

Providers: Lincoln County Hospital, Lincolnshire Integrated Care Services (ICS/ICB)

Experience shared of GP services, Hospital outpatients' appointments, Community Paediatrics at Lincoln County Hospital.

My child aged 10, is currently suffering with tics however we seem to be having a huge fight to be able to get them any support. Their tics are in their face, hands and feet, which may not sound like much but if you imagine your own hands, feet and face muscles constantly restricting, this impacts the rest of the body too, including arms, neck, shoulders and back, so they are in a lot of pain a lot of the time.

I have spoken to three different GP's about this - the first GP referred us to Healthy Minds as they said it is anxiety causing it however this was said without any face to face appointment or even speaking to my child. The second GP said they are unable to do anything and in around about way said we have to just deal with it. I explained this to Healthy Minds but they said the GP should not have said this and so I went back for a second opinion. Healthy Minds even emailed the GP too and demanded a face to face appointment for my child. The third GP actually listened and noticed their tics were particularly strong and painful and so GP put a referral in to the Community Paediatric team, as have my child's SENCO (Special Educational Coordinator) and school class teacher, however I have had a letter from them stating that they do not meet their threshold for help! This is for two reasons - the first they have not given Healthy Minds long enough to work. We had one session with Healthy Minds however they themselves have said this is not something they can help with as this is not anxiety or emotional based, this is physical/ neurological and they emailed their recommendations through, which were sent along with the referral but seemingly ignored.

The second reason was the most outstanding to me - they said Lincolnshire Community Paediatric Service is not commissioned to provide a service to children with Tics and Tourette's and to see our General Practitioner! I am shocked, saddened and angry at this all at once. How, in 2024, are children unable to access help for this in Lincolnshire? Do I have to move to another part of the country to be able to access support for my child? Anyone with an ounce of common sense knows that this is completely unacceptable, the support should be here for them now. The last sentence "please raise this with your GP" was also both dismissive and unhelpful. If they had checked their medical records during the triage procedure, they will have seen I have been doing this since January! Four different professionals have all agreed they need help, why is this being ignored by the Paediatric Team?

My child is in physical pain, the answer is not to pump them full of medicine for the rest of their life and make them deal with it like that. There is support for adults, where is the support for children?

Notes / Questions

Healthwatch signposted to ULHT PALS and LICB to try and get a satisfactory resolution Contact details for Lincolnshire Parent Carer forum given.

Provider Response

It is hoped that the author contacted the relevant departments and received a satisfactory response.

3. Case 13640 (07-06-2024)

PCN: Boston

Providers: Lincolnshire Community Health Services NHS Trust (LCHS), United Lincolnshire Hospitals NHS Trust (ULHT)

Boston Disability Group issues were raised around diabetic eye screening.

The following concerns were raised:

- Wheelchair users not able to access diabetic eye screening equipment at an appointment as the equipment does not seem to be adapted for those patients who are in a wheelchair and are not able to get out of the chair / need support / do not have a carer or relative with them to support them. Is there equipment that can be accessed for wheelchair users across the Trust?
- Mobile Units are not always suitable for wheelchair users and often the person has to cancel and rebook their appointment if this is sent to them. Is this information shared so that appointments are given to the patient to access the services?
- Do the new CDCs (Community Diagnostic Centres) have equipment that wheelchair users can access for their examinations?

Notes / Questions

Following the meeting contacted ULHT / LCHS Patient Experience team via email. ULHT replied saying that they would take this to the relevant department in relation to the equipment.

Provider Response

22/7 Emailed ophthalmology - we are still waiting their response due to annual leave, will notify as soon as response received.

4. Case 13668 (18-06-2024)

PCN: First Coastal

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Why is Louth Hospital not fully utilised as a proper hospital. Need to travel to Grimsby or Lincoln from outer edges of East of the county, if they are needed. Public transport cannot get you to these hospitals in time as very few and far between, then if you do use public transport you are unable to get back home.

Currently over 12,000 residents in Mablethorpe and Sutton On Sea alone, this is without holiday makers of around 10,000, or the villages in and around, please look at Louth Hospital as a fully utilised hospital again.

5. Case 13671 (19-06-2024)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Parent concerns relating to dependent. After years of useless procedures and wasted trips regarding their right knee. The consultant who was dealing with them has now discharged dependent as they are unable to provide further treatment. Dependent has returned to their GP for specialist help and has been informed they failed in finding a department for them. As they have been confined to a wheelchair for over two years due to failed procedures we are now at the end with no treatment available.

My dependent has suffered with Osteochondritis Dissecans of the right knee for 26 years. For seven years was ignored thanks to my ex and the GP at that time. At 18 was referred to Barlborough Hospital to clean the back of the Patella where a hole in the bone was found. Was then passed on to Lincoln Hospital who performed a Mosaicplasti which helped for 10 years then failed, a charitable organisation helped pay towards an alleged specialist in Liecester to deal with dependent, they promised the earth but delivered nothing and after years of trials and tribulations has now decided they can't/won't do anything more which is how we have ended up in this situation. We were also referred to Birmingham which also proved useless.

Notes / Questions

Healthwatch provided ICB information

6. Case 13677 (19-06-2024)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Met individual at The Storehouse who wanted to make a comment that Medical Staff , Doctors, Nurses ,Midwives, other medical professionals do not seem to be aware or trained about the importance of Vitamins, especially Vitamin D3, particularly antenatally, for babies and children. Feels that there needs to be more education in the NHS about alternative therapies, Vitamins, diet and the impact on health, especially prevention of diseases that could be prevented, and the need to go back to basics.

7. Case 13656 (14-06-2024)

PCN: First Coastal

Providers: Pilgrim Hospital

Parent shared negative experience of being in A&E Department at Pilgrim Hospital with their 14 month old baby in May this year. They took baby there as had a temperature of 42 degrees centigrade. The baby was drowsy, and very grumpy, and had been given paracetamol. On admission parent had been told that this was viral. While waiting for the Doctor went to sit back in waiting room. In the waiting room parent could hear everything that the staff were saying, they were laughing and joking about patients and parents that were waiting to be seen. While waiting parent noticed that baby looked odd, starting to shiver and shake , parent called for staff. Baby then became blue, floppy and began to drool. Parent concerned that it took staff 5 mins to recognise that baby was having a seizure, and give oxygen. Baby was taken away to be resuscitated, parent not allowed to go with them.

Baby and parent stayed on Paediatric Ward at Pilgrim Hospital for 3 days. Baby was sedated, and very drowsy. Parent did not find staff helpful, parent kept saying that it was not only sedation making baby drowsy, projectile vomit is not normal behaviour for their baby, felt baby unwell. Parent wanting baby to have MRI while in hospital to rule out and investigate any further complications, conditions that could be treated. Appointment not until early July has further follow up appointment with Paediatrician mid July. Concerned that a Doctor that they saw on the ward told their baby that "you traumatised me last week" . Feels that this was not professional and surely if you are a Doctor you would be trained to deal with an emergency with a baby.

Parent has not felt able at present to contact PALS about this experience .

Notes / Questions

Signposted PALS at Pilgrim Hospital, LICB

Provider Response

It is hoped that the author contacted PALS and received a satisfactory response.

Compliment

1. Case 13666 (18-06-2024)

PCN: First Coastal

Providers: Pilgrim Hospital

Patient commented when they were taken by ambulance to Pilgrim Hospital in March 2024 the Same Day Emergency Unit was very efficient, brilliant place and what a great facility. All staff were wonderful.

Provider Response

Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

West Locality x 2

- 2 x General Comment

General Comment

1. Case 13653 (12-06-2024)

Providers: Better Births - Lincolnshire Maternity & Neonatal, Lincolnshire County Council - Children Services, Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

Experiences shared by individual who gave birth 5 months ago at Lincoln Maternity Unit. When they were pregnant they intended to breast feed. They breast fed and gave formula top ups for the first 3 months of babies life, now baby exclusively formula fed. They shared that they had an emergency c-section, had pre eclampsia, and were in hospital, on Nettleham Ward for 6 days with their baby following birth. They had problems with their milk supply, and baby had difficulties latching at the breast. They had difficulties expressing colostrum and wished that they had been informed about Antenatal expression of colostrum.

They said that the NHS provided very little information about the realities and coping strategies needed for successful breast feeding. Baby was given formula top ups in hospital. They shared that they had found this initial experience very distressing, baby was very unsettled and did not sleep. They felt physical recovery from c-section difficult and painful. They said that staff on Nettleham Ward were very helpful, and came every time they buzzed, and gave them support to help latch baby to the the breast. They felt very frightened when they were discharged, that there would be nobody at home to be able to confirm that baby was latched correctly at the breast.

They had difficulties at the start of their pregnancy accessing a Community Midwife in their area for an initial appointment and did not have this until they were 4 months pregnant. It was not until they went to PALs that this appointment was arranged. They felt that lack of continuity of care in the Antenatal period and following birth of the baby was one of the worst things . That they had a different Community Midwife at each appointment. Was discharged from the Community Midwife service when Mum and baby were still having difficulties with feeding, physical health and blood pressure were problematic. That there was issues with blood pressure medication being prescribed. That no Health professional physically looked at c-section wound and left this to the patient.

Given no information in Antenatal period about what strategies to use if breast feeding not going well, implications of the way that you birth on milk supply, poor latching technique. Paid for private bump to baby Antenatal Classes, only one session on after you have given birth.

Seen by Health visiting team, baby had lost over 11% of birth weight, still had poor latch. Professionals were unsure if baby had tongue tie eventually diagnosed. Parents paid privately for babies tongue tie to be cut. When baby 3 months old parents were completely burnt out. Unable to sustain breast feeding / pumping, 2 hourly, and unsettled baby who never slept, changed to formula feeding. Referred to Perinatal Mental Health Team as had Post Natal depression. Found this team really helpful had guilt and loss because gave up breast feeding. Nursery Nurse was really supportive in relation to feeding and baby cares.

Feels that some women may not have a choice how they feed their baby. Having breast is best everywhere, even on formula bottles, given to baby in hospital does not help if you feel you are failing your baby. They feel that they had to make formula feeding a lifestyle choice so that they were able to improve their mental health and enjoy being a parent.

Provider Response

Response from Lincolnshire United Hospitals Maternity Unit:

I am so sorry to read of your poor experience. The first few weeks and months with a newborn baby can be very frightening and I am sorry that we were not able to provide the support that you needed.

Continuity is recognised to be extremely beneficial for pregnant women and it is something that we know we need to improve on. We do have 4 continuity teams within Lincolnshire and are working to increase this. I am sorry that in your case we were unable to provide this.

I hope that you and your baby are doing well but please contact us directly if we can be of any further help. If you would find this useful please contact us on PMA@ulh.nhs.uk

Lincolnshire County Councils Children's Health Visiting Service were sorry to hear about the concerns raised around a tongue tie referral and weight loss (faltering growth) of a baby. We are pleased that the Nursery Nurse (Now called Family Support Workers) was supportive in relation to infant feeding. As we do not have the details of the baby, we are unable to conduct an individual investigation and therefore our response is generic and outlines our policies and procedures for such concerns.

The health visiting service are unable to diagnose a tongue-tie, however, where this is suspected staff would follow the tongue-tie pathway and refer to a hospital Consultant. This pathway specifically states a referral can only be made where there is restricted tongue mobility and function and where the breastfeeding problems remain after support has been given on attachment and positioning. This is in line with the National Institute for Health and Care Excellence (NICE) guidance.

There is limited research to support any tongue-tie assessment tool and a visible tongue-tie (tight frenulum) does not always impact on breastfeeding. Tongue-tie can be very difficult to diagnose and the health visiting teams will complete a holistic assessment to inform their decision making. All health visitors complete training to identify poor positioning and attachment, and this can be assessed at any contact. Where issues continue to arise, there is a health visitor pathway for the

provision of specialist advice and support. There are several health visitors across the county who have extended training, knowledge and skills in breastfeeding and are available to offer the specialist advice, this includes a newly appointed Specialist Infant Feeding Health Visitor. There are also local breastfeeding groups to support mothers having breastfeeding difficulties.

The Health Visiting service also follow the NICE guidance regarding faltering growth. This pathway is followed from 10-14 days after birth. Prior to 10-14 days the care of mother and baby are under midwifery services. When staff identify significant weight loss, they seek supervision and refer to a medical professional as appropriate. As we are not able to complete an individual investigation it is hard to provide any further information on this area.

Families have access to additional support and advice by calling the Single Point of Access (SPA), where the call will be recorded and transferred through to a Health Visitor. There is a Health Visitor on call Monday to Friday 9am till 5pm and they will triage all calls and ensure the most appropriate member of the service contacts the family back within 48 working hours (working hours).

I hope this has provided an adequate explanation of the pathways and policy which the Health Visiting service follows. We appreciate this feedback and want to convey that we take all comments and concerns seriously as they provide us with an opportunity to review our services in order to improve the quality of the care we provide. If this family would like us to conduct an individual investigation into their personal experience, we would be more than happy to do so. If they could contact our Single Point of Access on 01522 843000, we can progress this investigation.

2. Case 13659 (17-06-2024)

Providers: Lincoln County Hospital

I have this morning been speaking with a very distressed family member (who has Power Of Attorney for Health) relative has just been diagnosed with Brain Tumour and currently in QMC, possibly in theatre as we speak. Previously had an MRI in February this year, tried to chase the results, but not reported on, only found the devastating results 2 months later when being admitted to Lincoln County Hospital A&E department in May 24, where they informed the patient of their diagnosis. Patient was very concerned as they had been driving around the county with no knowledge of this, which could have further implications.

Family member has requested a copy of medical notes using the correct forms, last week for November 2023 to current including MRI/CT Scans so they can have the opportunity to go private and get some treatment - has been offered an appointment but was unable to accept as medical notes would have been needed. Family member under the impression that it could be 4 weeks or more to get a copy of the notes, which under the circumstances is not viable due to the urgency of the patient's care needs.

A copy of their medical notes is essential moving forward for the patient to see if they are able to get private treatment / therapies asap, family member commented they do not have a couple of weeks to wait under the circumstances.

Due to the nature of the patient's diagnosis and possible outcome, is there a fast-track route? This is not to make a complaint but to assist/support in getting alternative options.

Family member would also like to have a disabled parking space painted out in relatives street so they are enabled to park close by as and when needed, is in receipt of a Blue Badge already.

Notes / Questions

Family member requested Healthwatch make contact with the Access to Medical notes department Healthwatch also provided information on Complaints and Lincoln County Council Disability customer care.

Provider Response

Response from ULHT - I can confirm that I have spoken to the patient this morning and they are happy for the records to be disclosed to themself and family member. The records will be disclosed on Monday.

26/6/24 Update - no records have been received, HW made contact with Access to records department, would resend and hardcopy in post. Patient and family member informed. Family member thanked HW for their involvement and had received a phone call from the department to confirm. Thank you so much. Notes now received.

It is hoped the author has now received the relevant documents and able to access desired treatment.

All Areas x 1

- 1 x General Comment

General Comment

1. Case 13639 (06-06-2024)

Providers: United Lincolnshire Hospitals NHS Trust (ULHT)

I'm trying to understand the best route to pursue first in terms of a very recent incident our relative has experienced with ULHT Hospital care during surgery which we believe would be classed as clinical negligence resulting in serious and potential life changing personal injury to them.

We are looking to achieve:

- . Getting quick access to appropriate physical and mental health care they need/will need (both hospital and in their home) following the personal injury caused by clinical negligence.
- . Improvements to care and process used in theatre so others do not have to go through this.
- potential discipline of clinician(s) depending on outcome of any investigation.
- full explanation of what went wrong and an apology.
- compensation for such a potentially life changing injury.

I understand we can speak to PALS, we can make a formal complaint through NHS and also approach a solicitor to act on our behalf, but it's hard knowing what route to take first, depending on route we take first will this then have an impact on achieving all the outcomes we want to achieve. If we need to speak to solicitors are you able to signpost to reputable companies experienced in medical complaints/claims? We as a family appreciated any advice you can give.

Notes / Questions

Information and Signposting given about how to make a complaint. PALS , LICB, CQC, PHSO contact details given.

Unable to provide legal information as outside of our remit.

Provider Response

It is hoped that the author contacted the relevant departments and received a satisfactory response.

Mental Health and Learning Disabilities

Area	Case Details
<p>West Locality x 2</p> <ul style="list-style-type: none">• 2 x General Comment	<p>General Comment</p>

1. Case 13653 (12-06-2024)

Providers: Better Births - Lincolnshire Maternity & Neonatal, Lincolnshire County Council - Children Services, Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

Experiences shared by individual who gave birth 5 months ago at Lincoln Maternity Unit. When they were pregnant they intended to breast feed. They breast fed and gave formula top ups for the first 3 months of babies life, now baby exclusively formula fed. They shared that they had an emergency c-section, had pre eclampsia, and were in hospital, on Nettleham Ward for 6 days with their baby following birth. They had problems with their milk supply, and baby had difficulties latching at the breast. They had difficulties expressing colostrum and wished that they had been informed about Antenatal expression of colostrum.

They said that the NHS provided very little information about the realities and coping strategies needed for successful breast feeding. Baby was given formula top ups in hospital. They shared that they had found this initial experience very distressing, baby was very unsettled and did not sleep. They felt physical recovery from c-section difficult and painful. They said that staff on Nettleham Ward were very helpful, and came every time they buzzed, and gave them support to help latch baby to the the breast. They felt very frightened when they were discharged, that there would be nobody at home to be able to confirm that baby was latched correctly at the breast.

They had difficulties at the start of their pregnancy accessing a Community Midwife in their area for an initial appointment and did not have this until they were 4 months pregnant. It was not until they went to PALs that this appointment was arranged. They felt that lack of continuity of care in the Antenatal period and following birth of the baby was one of the worst things . That they had a different Community Midwife at each appointment. Was discharged from the Community Midwife service when Mum and baby were still having difficulties with feeding, physical health and blood pressure were problematic. That there was issues with blood pressure medication being prescribed. That no Health professional physically looked at c-section wound and left this to the patient.

Given no information in Antenatal period about what strategies to use if breast feeding not going well, implications of the way that you birth on milk supply, poor latching technique. Paid for private bump to baby Antenatal Classes, only one session on after you have given birth.

Seen by Health visiting team, baby had lost over 11% of birth weight, still had poor latch. Professionals were unsure if baby had tongue tie eventually diagnosed. Parents paid privately for babies tongue tie to be cut. When baby 3 months old parents were completely burnt out. Unable to sustain breast feeding / pumping, 2 hourly, and unsettled baby who never slept, changed to formula feeding. Referred to Perinatal Mental Health Team as had Post Natal depression. Found this team really helpful had guilt and loss because gave up breast feeding. Nursery Nurse was really supportive in relation to feeding and baby cares.

Feels that some women may not have a choice how they feed their baby. Having breast is best everywhere, even on formula bottles, given to baby in hospital does not help if you feel you are failing your baby. They feel that they had to make formula feeding a lifestyle choice so that they were able to improve their mental health and enjoy being a parent.

Provider Response

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I hope that you and your baby are doing well but please contact us directly if we can be of any further help. If you would find this useful please contact us on PMA@ulh.nhs.uk

Lincolnshire County Councils Children's Health Visiting Service were sorry to hear about the concerns raised around a tongue tie referral and weight loss (faltering growth) of a baby. We are pleased that the Nursery Nurse (Now called Family Support Workers) was supportive in relation to infant feeding. As we do not have the details of the baby, we are unable to conduct an individual investigation and therefore our response is generic and outlines our policies and procedures for such concerns.

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There is limited research to support any tongue-tie assessment tool and a visible tongue-tie (tight frenulum) does not always impact on breastfeeding. Tongue-tie can be very difficult to diagnose and the health visiting teams will complete a holistic assessment to inform their decision making. All health visitors complete training to identify poor positioning and attachment, and this can be assessed at any contact. Where issues continue to arise, there is a health visitor pathway for the

provision of specialist advice and support. There are several health visitors across the county who have extended training, knowledge and skills in breastfeeding and are available to offer the specialist advice, this includes a newly appointed Specialist Infant Feeding Health Visitor. There are also local breastfeeding groups to support mothers having breastfeeding difficulties.

The Health Visiting service also follow the NICE guidance regarding faltering growth. This pathway is followed from 10-14 days after birth. Prior to 10-14 days the care of mother and baby are under midwifery services. When staff identify significant weight loss, they seek supervision and refer to a medical professional as appropriate. As we are not able to complete an individual investigation it is hard to provide any further information on this area.

Families have access to additional support and advice by calling the Single Point of Access (SPA), where the call will be recorded and transferred through to a Health Visitor. There is a Health Visitor on call Monday to Friday 9am till 5pm and they will triage all calls and ensure the most appropriate member of the service contacts the family back within 48 working hours (working hours).

I hope this has provided an adequate explanation of the pathways and policy which the Health Visiting service follows. We appreciate this feedback and want to convey that we take all comments and concerns seriously as they provide us with an opportunity to review our services in order to improve the quality of the care we provide. If this family would like us to conduct an individual investigation into their personal experience, we would be more than happy to do so. If they could contact our Single Point of Access on 01522 843000, we can progress this investigation.

2. Case 13643 (10-06-2024)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

For Information: Lincolnshire County Council - Adult Social Care, Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health), United Lincolnshire Hospitals NHS Trust (ULHT)

Ladies Luncheon (Lincoln) 6 June 2024

- Bereavement services and access to them in Lincolnshire in a timely manner. Some people finding it very difficult to access the right service at the right time. Those that had a partner looked after by one of the Hospices found access much easier as they were already known to the service and support was offered immediately. (both telephone, 1:1 and group sessions) Macmillan was a bit hit and miss and only telephone support had been offered within the last 12 months.
- GPs offered medication for bereaved loved ones and did not explore any other options e.g., talking therapies. Some were told by the Hospice staff how to self refer into the service which was useful for a couple in the early stage of bereavement especially when unexpected death had occurred. There seemed to be lack of empathy for the surviving spouse.
- Respite care was challenging to find and access. However, those patients who were known to the Hospices, again better support given and access to respite gained much quicker.
- A few had experienced respite care and then circumstances changed that the person was then not able to come home. Difficult times for the person and their family. Lots of guilt felt by the carer and little support given to them at this time. Mixed experiences through contact with adult social care and the care home. Communication was not always good. Important that carers are kept informed of any changes and they can support their loved ones.
- Different experiences in how bad news is delivered to patient / carer especially at palliative or end of life. It depends whether in a hospital setting (most experienced very poor communication) to Hospice, palliative teams very good and very sensitively handled with compassion. Lack of dignity in hospital settings against more personal and private by the Hospice Teams. Those that had experiences with Macmillan nurses directly expressed positive feedback generally.

Notes / Questions

Information given to the group about talking therapies and self referral

Provider Response

Thank you for sharing. Our teams have recently introduced a new training programme called 'Lets Talk Cancer' which was developed by the Royal Free Hospital which alongside Breaking Bad News training we hope will upskill all our staff. We would encourage anyone who has had a difficult experience or feels that communication was not as good as it could have been to please raise this with staff so we can address this for them and make improvements.

Patient Transport

Area	Case Details
East Locality x 3 <ul style="list-style-type: none"> • 3 x General Comment 	General Comment

1. Case 13661 (17-06-2024)

PCN: Meridian

Providers: East Midlands Ambulance Service NHS Trust (EMAS)

Patient raised a concern in not being eligible for the patient transport. The patient has had to cancel a much needed hospital appointment due to being informed they cannot have it and are not eligible, has previously had hospital transport under the previous company and had been informed that they would still be able to have this service.

The patient has a number of health conditions, atrial fibrillation; aortic aneurism; heart failure and unable to walk far (needs wheelchair when they get to the hospital). Is currently waiting for operation on legs. Patient currently undergoing Nuclear tests on Bowel.

Does have a car, but can only physically drive no more than 5 miles (local GP, local shop as and when needed) due to the pain they suffer afterwards, then cannot go out for a few days to recover.

The appointment had to be cancelled for mid June at Lincoln County Hospital due to no transport. No family or friends close by, unable to use public transport, due to the nature of their condition.

My concern for this patient is that they were initially informed yes, then informed as they had a car, no. I was of the understanding it is on medical need and with their condition can compromise their dignity.

Notes / Questions

Patient request for Healthwatch to make contact with the provider.

Provider Response

18/6/24 I am unable to find the patient within our system. I will pass this to my team for someone to make direct contact with them today.

25/6/24 update - I have spoken to the patient twice and advised them they are eligible and when their appointment comes through they can phone and book in. The patient was happy with that and phoned me back to advise that their appointments have come through and will call at 7 days when booking is allowed.

2. Case 13675 (19-06-2024)

PCN: First Coastal

Providers: East Midlands Ambulance Service NHS Trust (EMAS)

Met a individual who had gone to The Storehouse at Outreach clinic. Discussed that had a negative experience with the ambulance service. Elderly spouse had a fall at home in March of this year, had fallen onto their knees in the garden and could not get up. Called ambulance at 10.00am had not heard anything by 5pm. Rang Ambulance service at 5pm as by this time had managed to get their spouse up off the floor, though shaken and had a swollen knee looked ok, and cancelled Ambulance. They were concerned as the ambulance personnel who took this call seemed very grateful and relieved that the call was cancelled. This experience has put them off ringing for help again. They did not get checked out. They have never rung for an ambulance before.

Notes / Questions

Signposted to NHS 111 if this happens in the future and advised to make it clear that a fall had taken place discussed specialised Falls Team.

3. Case 13680 (21-06-2024)

Providers: East Midlands Ambulance Service NHS Trust (EMAS)

Carer directed by Carers First to Healthwatch. Has had a negative experience of non- emergency hospital transport with elderly relative. In the past few months relative who is 88 years old and cannot walk has had to go to Lincoln and Boston Hospitals for appointments and investigations. Twice they had to wait for 3 hours and 2 hours respectively. The last visit to Pilgrim Hospital was for an x-ray and a consultants appointment they were only with the consultant for 5 minutes. Following this they had a 5 hour wait to get home. Carer says that when you ring to make these appointments, they say that you may have to wait for an hour which is acceptable. So when they go to these appointments they are both stuck, carer attends with elderly relative. They do not feel that this is an acceptable wait for an 88 year old person who can not walk. Carer has tried to call number for EMAS PALS not answered.

South Locality x 1

- 1 x Signposting

Signposting

1. Case 13662 (17-06-2024)

PCN: Spalding

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Person looking for Voluntary Car Scheme contact number.

Notes / Questions

Healthwatch provided the information requested

Area	Case Details
<p>East Locality x 1</p> <ul style="list-style-type: none"> • 1 x Compliment 	<p>Compliment</p> <p>1. Case 13654 (13-06-2024)</p> <p>Providers: Lincolnshire County Council - Adult Social Care, Seacroft Court Nursing Home</p> <p>Resident from Seacroft Care Home Home visiting The Storehouse with their friend/carer, they do this on a regular basis as resident used to work here. Resident shared that had lived there for 2 years following a stay in hospital for a their condition. Found that could not manage at home anymore, spouse died 8 years ago. Has been assessed for dementia. Has care package and place funded by social care. Has Adult Social Worker but this worker has been replaced, no named social worker. Though Care Home staff chasing this up.</p> <p>Likes the Care Home. All staff good and listen to resident. Room clean and tidy and has a view over the sea. Has en-suite toilet and basin, shower over the corridor. Able to have a lie-in if wants. Loves the food and communal dining room. Feels that if pushed emergency buzzer would be answered quickly. Likes new sensory room and shop in the Home. Activities arranged that are good.</p>
<p>West Locality x 3</p> <ul style="list-style-type: none"> • 2 x General Comment • 1 x Formal Complaint 	<p>General Comment</p> <p>1. Case 13643 (10-06-2024)</p> <p>Providers: Lincolnshire Integrated Care Services (ICS/ICB)</p> <p>For Information: Lincolnshire County Council - Adult Social Care, Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health), United Lincolnshire Hospitals NHS Trust (ULHT)</p> <p>Ladies Luncheon (Lincoln) 6 June 2024</p> <ul style="list-style-type: none"> • Bereavement services and access to them in Lincolnshire in a timely manner. Some people finding it very difficult to access the right service at the right time. Those that had a partner looked after by one of the Hospices found access much easier as they were already known to the service and support was offered immediately. (both telephone, 1:1 and group sessions) Macmillan was a bit hit and miss and only telephone support had been offered within the last 12 months. • GPs offered medication for bereaved loved ones and did not explore any other options e.g., talking therapies. Some were told by the Hospice staff how to self refer into the service which was useful for a couple in the early stage of bereavement especially when unexpected death had occurred. There seemed to be lack of empathy for the surviving spouse. • Respite care was challenging to find and access. However, those patients who were known to the Hospices, again better support given and access to respite gained much quicker. • A few had experienced respite care and then circumstances changed that the person was then not able to come home. Difficult times for the person and their family. Lots of guilt felt by the carer and little support given to them at this time. Mixed experiences through contact with adult social care and the care home. Communication was not always good. Important that carers are kept informed of any changes and they can support their loved ones. • Different experiences in how bad news is delivered to patient / carer especially at palliative or end of life. It depends whether in a hospital setting (most experienced very poor communication) to Hospice, palliative teams very good and very sensitively handled with compassion. Lack of dignity in hospital settings against more personal and private by the Hospice Teams. Those that had experiences with Macmillan nurses directly expressed positive feedback generally. <p>Notes / Questions</p> <p>Information given to the group about talking therapies and self referral</p> <p>Provider Response</p> <p>Thank you for sharing. Our teams have recently introduced a new training programme called 'Lets Talk Cancer which was developed by the Royal Free Hospital which alongside Breaking Bad News training we hope will upskill all our staff. We would encourage anyone who has had a difficult experience or feels that communication was not as good as it could have been to please raise this with staff so we can address this for them and make improvements.</p>

2. Case 13686 (27-06-2024)

PCN: Imp

Providers: Lincolnshire County Council - Adult Social Care, Lincolnshire Integrated Care Services (ICS/ICB)

Veteran organisation suggested that individual make a call to Adult Social Care so that adaptations can be made to bungalow that lives in. Unable to get out of the back door to the garden as steep steps , no hand rails. Has had a fall previously, anxious not been out in their back garden for a year since moved in. Also difficult access to front door and needs a ramp. Has PTSD, anxiety, depression, has arthritis that affects mobility. Felt anxious and reluctant to access Adult Social Care, but did this, and now waiting for a call back to make a date for someone to visit the property. Feels that even though a Veteran and Covenants in place with NHS and other organisations, this does not make a difference, and does not feel listened to.

Notes / Questions

Individual will make contact with Healthwatch if delay in Adult Social Care getting in contact to assess home for adaptations and adjustments.

Formal Complaint

1. Case 13660 (17-06-2024)

PCN: South Lincoln Healthcare

Providers: Continuing HealthCare, Lincolnshire Integrated Care Services (ICS/ICB)

Hi I live in Lincolnshire (Branston) and am a disabled person with degenerative illness and multi organ issues.

I am on a full NHS funded package managed by myself via a Direct Payment allowing me to have the choice, control and independence, as per the NHS Universal personalised process. I as a member of the public believe if this is done properly, is the cheapest option for my care allowing me to make my life choices.

Recently due to to deterioration of my health, and not being able to recruit. I asked the continuing health team to look at my package to see if I could have an increase in my carers wages and to promote one of my carers to supervise the team, as with 7 carers this is a lot of work for somebody with severe disabilities.

My carers are on £12 per hour, a freedom of information request via the NHS states the maximum paid to a direct payment holder is £18 with agencies being paid between £23- £33 per hour. Almost double or triple what my carers get paid. Please note I am not asking for that level, only for my carers to be paid £15 per hour and the supervisor £18.

I understand the effect of austerity and how that has affected the NHS.

However in the most recent correspondence I'm told again I can't have an increase from £12 per hour but the continuing health team are saying they are happy for an agency to take over my care and be paid £23 + an hour.

Can you please explain how this can be justifiable? As a member of the public, why is this sort of thing taking place. I cannot in my conscience accept this situation, where rather than give my carers a pay rise and allow me to run my own care package. The continuing health team are happy to pay an agency over £80k a year more of public finances.

Notes / Questions

Healthwatch copied into complaint sent to local Councillor: ICB CEO

Other

Area	Case Details
<p>East Locality x 4</p> <ul style="list-style-type: none"> • 2 x General Comment • 2 x Signposting 	<p>General Comment</p>

1. Case 13642 (10-06-2024)

PCN: Boston

Providers: Lincolnshire Integrated Care Services (ICS/ICB), NRS Healthcare, United Lincolnshire Hospitals NHS Trust (ULHT)

Disability Action Group (Boston) 3 June 2024

Concerns raised on the following issues:

- Access to eye appointments for wheelchair users difficulty in being able to access all of the equipment for eye tests in general opticians. Some people are not able to get out of their wheelchair to get as close as possible to the equipment e.g., OCT photography, pressure testing.
- Diabetic eye testing if an appointment made at the mobile unit, not all patients can access the service as their wheelchair cannot be accommodated and therefore the patient has to cancel and rearrange at another site that can be accessed.
- Wheelchair service (new contract provider NRS) no communication with existing wheelchair users, no telephone number on the website. It has information on North Yorkshire, Hull or East Riding. However, when you ring any of these numbers, you get 2 options press one for prescriber and press two for service users. No general enquiry number and each option refers to a particular existing service user. Some service users have emailed the email address found on the website but have not had any reply back (nrs.lincolnshirewheelchairs@nhs.net)
- Confusion over how a disabled person can access the specialised dental service e.g., via a dentist or via a GP. Clarity needed about referrals and where to go. Many of the members did not have a NHS dentist so could not ask them to be referred. Criteria for who can be treated under the specialised services needs to be sent out.
- Questions were asked by the group around direct payments and the Lincs ICB. Has there been a change in policy?
- Lifeline phones – as BT, Virgin Media, Sky and some other providers switch over to a new mobile telephone network how is this affecting people who have lifelines in their homes. The switch over has already started and all should be completed by 2025. Group asked will this leave vulnerable people without their working lifelines? Will there be an increase in cost? Who are the providers for the lifeline service and how has this been communicated with the service users? The service users will need to ask for a battery back up in case of power cuts which should be provided by their telephone provider. They will also need to be able to offer you a solution if there is no mobile coverage during a power cut to make emergency calls. For some customers there may be the inconvenience of not being able to keep your old telephone number – need to check with provider. LHP has an integrated telecare service.
- Residents living in social housing managed by Housing Associations such as LHP need to get permission to have their wheelchairs that need charging. Some properties are designed to have scooter rooms. Many properties are not suitable to have the scooter inside the property and in these cases, people may need to consider moving to another more suitable property or to ask for reasonable adjustments to be made.

Notes / Questions

4 June 2024 Spoke with Specsavers Boston re access for wheelchair users. They make reasonable adjustments for patients with additional needs and each branch will support their patients in whatever way they can. Most have ground floor rooms that can be accessed and if new builds will comply with standards. Older buildings and settings will make reasonable adjustments.

4 June 2024 email sent ULHT to ask about adaptations that are made at the eye clinics and mobile units for diabetic eye tests.

4 June 2024 spoke with LHP re charging facilities for wheelchairs in their properties.

Provider Response

We are still waiting their response due to annual leave, will notify as soon as response received.

2. Case 13669 (18-06-2024)

PCN: First Coastal

Providers: Lincolnshire Integrated Care Services (ICS/ICB), Marisco Medical Practice

Resident of Mablethorpe diagnosed with Autism, no local support groups anymore, previously was a group, but no longer. Resident also commented that there is no specialist in the Surgery for patients with Autism. Has to go to Sheffield for review as nothing in Lincolnshire available. Unable to go to this as caring for parent with Leukaemia .

Notes / Questions

Provided information on another online support group and Carers first. Already registered with Carers First

Signposting

1. Case 13681 (25-06-2024)

Providers: East Lincolnshire Area Locality

Family member whose parent had recently passed away, looking for a deaf signer to attend funeral for the family and friends. Parent was of the deaf community and attended many clubs in and around Lincolnshire, family would like to provide this service at the funeral. Boston Crematorium.

Notes / Questions

Healthwatch made contact with Lincolnshire Sensory Services on behalf of the family member

Provider Response

Sending family member contact for register for professional interpreters

2. Case 13655 (13-06-2024)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Carer visiting The Storehouse with a friend. Has another friend who is elderly who lives alone, has sensory issues and mobility issues. Able to walk to the village with a mobility walker. Has glaucoma . Has a private cleaner. Is asking for more help, does access Royal Society for the Blind for talking books.

Notes / Questions

Signposted to contact us again when they have spoken to friend about what information they need. Contact details given.

South Locality x 1

- 1 x General Comment

General Comment

1. Case 13658 (14-06-2024)

PCN: South Lincolnshire Rural

Providers: NRS Healthcare

Healthwatch have been contacted by a carer on behalf of their disabled 22-year-old relative. They had a stroke 8 years ago and have difficulties with speech and are partially sighted and have been a wheelchair user ever since. They were assessed for a new wheelchair last year in October. This was for a power aided wheelchair as they were unable to self-propel any more, and because they are now 6ft 2 inches and his 5t 2-inch parent is unable to push them any more. They rang previous provider at the end of Feb who said that there were going to be delays as there were parts needed for the new chair. At this point his parent ordered a new Motability car that would accommodate his hoist and new power wheelchair.

In March parent rang again when they were told that it would not be a new power assisted wheelchair but a reconditioned one, so there would be further delays. By this time, the new Motability car had arrived that had come from Spain and had been adapted. Because the wheelchair that relative was using at that time was in such a state of disrepair and getting to be unusable a repair person was sent to the house and did a repair, unfortunately it was repaired at an angle that meant that relative would have been sat crunched forward so it was unusable. So, they have had to borrow a self-propelled wheelchair, which is not ideal , and limiting lifestyle as they must go to places that are not difficult for parent to push the wheelchair in.

End of March parent rang AJM who stated that would need to ring back after 1st April when there would be the new provider. Parent rang NRS on the 2nd of April who said can't repair wheelchair that has been ordered, need to order a new one.

Parent rang NRS ten days later in April as had heard nothing, who said that there would be delays because of the takeover and change of provider. Parent had still not heard anything so in mid May, so rang NRS who stated that this would be a priority order. By mid June parent rang NRS again who state that they did not know where the wheelchair was and to contact the therapy team. Assessment was done by Therapy team in October 2023.

Parent rang Healthwatch out of sheer desperation and frustration to see if they could help with this matter. Feels that this is affecting relatives quality of life as unable to go out independently, unable to continue with their organised internship. Parent unable to push relative long distances or uphill, and is a single parent. Affecting quality of life. Wanting to highlight situation as this is not the first time that they have had trouble with getting a wheelchair. Does not want this to happen to anyone else.

Notes / Questions

HW contacted NRS on patients behalf as requested. Consent given to share personal information.

Provider Response

No response to date.