

## Healthwatch Lincolnshire

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

# June 2025

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 2025 where **104** 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.

We give all service providers 20 working days to respond to any comments before we share the final version of the report.

Note:

A quick guide to the report:

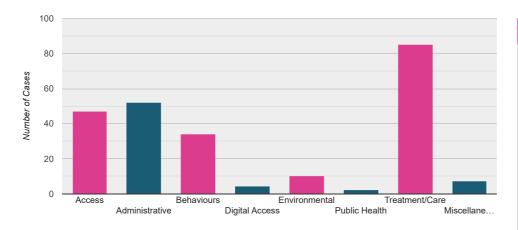
- Pink text shows the actions our team have taken.
- Green text highlights responses we've received from providers.
- Multiple Services section includes feedback where more than one service is involved, highlighting how different parts of the healthcare system interact. Following this section cases are categorised into service types:
- Community Health Services
- Primary Care Services
- Hospital Services
- Patient Transport
- Social Care Services
- Other

**Statistics** 

Total cases: 104

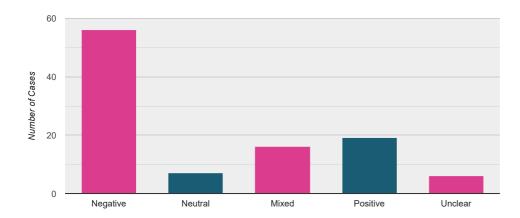
Cases responded to within 3 days: 104 out of 104 (100%)

## Theme Areas



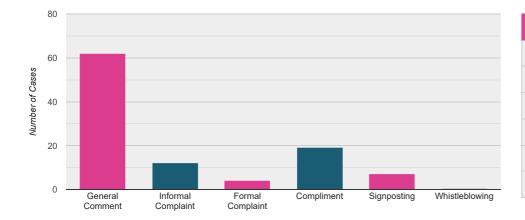
Theme Areas	Cases
Access	47
Administrative	52
Behaviours	34
Digital Access	4
Environmental	10
Public Health	2
Treatment/Care	85
Miscellaneous	7

# Sentiments



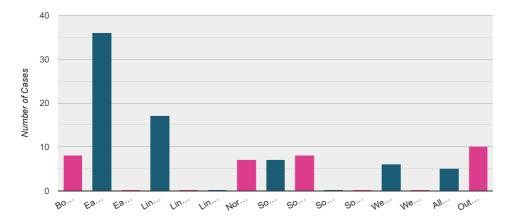
Sentiments	Cases
Negative	56
Neutral	7
Mixed	16
Positive	19
Unclear	6

# Case Types



Case Types	Cases
General Comment	62
Informal Complaint	12
Formal Complaint	4
Compliment	19
Signposting	7
Whistleblowing	0

## Areas



Areas	Cases
Boston District Council	8
East Lindsey District Council	36
East Locality	0
Lincoln City District Council	17
Lincolnshire CCG	0
Lincolnshire Integrated Care Services (ICS/ICB)	0
North Kesteven District Council	7
South Holland District Council	7
South Kesteven District Council	8
South Locality	0
South West Locality	0
West Lindsey District Council	6
West Locality	0
All Areas	5
Out of Area	10

# Мар

# Cases

# Multiple Services

This section of the report includes cases that relate to multiple services.

Area	Case Details
Boston District Council x	General Comment

#### 1. Case 14932 (19-06-2025)

PCN: Boston

Providers: East Midlands Ambulance Service NHS Trust (EMAS), Pilgrim Hospital

Patient arrived at A&E had been driven by a friend there after recognising they were having a heart attack this was while they were playing sport. Lived in Boston so thought quicker than waiting for an emergency ambulance, as when a fellow player collapsed with a cardiac arrest it had taken 20 minutes for an ambulance to arrive. It took 5 mins to be driven there. On arrival was experiencing crushing central chest pain, also in both arms and neck, sweating profusely, very grey in colour had used GTN spray with no effect, previous heart attack and stents 10 years ago then a episode of blocked stents 3 years later.

Both patient and friend, when they arrived went to newly refurbished A&E part of the Department where ambulances were waiting. Both told through sliding glass doors that needed to access A&E via front desk in Outpatients Department. So while obviously having signs of a heart attack was made to walk to Outpatients where there was a small A&E check in desk which was very busy and noisy then directed to a member of staff and taken to Resus. Spouse arrived obviously distressed and went to the same entrance and told the came thing, went to small A&E desk where luckily friend was waiting, also a Nurse at desk when spouse told them partner had been brought in with heart attack. Nurse asked name and said that they were having a heart attack and they would take me round to Resus, still had to give details at check in desk before going round. It is obvious that there is still work to do with refurbishment to A&E but directed a very sick patient and distressed relative to walk another 5 minutes is unacceptable.

Signage to the temporary A&E check in desk is very difficult to see and access, the temporary check in desk is small, not confidential, noisy and not fit for purpose for staff or patients. Where there is also the Urgent Treatment Centre and Outpatients desks.

Patient was not able to immediately go into Resus as there was not a room available and was left alone in pain, frightened having a heart attack. Then transferred into Resus room all observations, ECG in progress when spouse arrived. Cannulated bloods taken and also had de-fib pads in situ. Given clot buster medication, told having STEMI (ST elevation Myocardial Infarction). Issues with computer medical records, spouse and patient had to recount previous medical and medication history. It then took at least 20+ minutes to get morphine pain relief. Cardiac Nurse Practitioner organised Emergency Paramedic Transport to Lincoln County Hospital to go straight into Cardiac Catheter Lab.

Patient felt that was not given an explanation about what was happening, treatment and asking when the pain would stop and reassurance if they had a cardiac arrest. Understands this was an emergency and staff needing to put emergency treatment in place. But did feel that at times this was chaotic and unorganised.

Spouse who is retired Nurse/Midwife was able to tell them that pain would not stop until got to Lincoln to the cardiac catheter lab and investigated further for the cause of the heart attack and was having emergency treatment and pain relief as necessary. Luckily there was an Ambulance available that had just come back from Lincoln so transfer was reasonably quick. But patient still had to endure a 40 minute speedy, blues and twos, bumpy ambulance ride to Lincoln when they were very frightened in extreme pain having a major cardiac event.

If that Ambulance had not been available so quickly patient and spouse wonder what would the outcome would have been? They are also concerned about the risk and outcomes for other similar patients. As spouse followed the Ambulance to Lincoln expected to see Ambulance in a lay-by resuscitating their spouse. Also the pressure to the ambulance service and the knock on effect to the service as a whole transporting patients having an acute cardiac event from Boston to Lincoln.

That being said once able to access A&E and all medical staff, Nurses, Support staff, Paramedics were kind, caring and having to work under pressure with systems, protocols and pathways and temporary buildings and entrances that made their jobs even harder.

## Themes:

- Accessibility and signage to A&E while work being carried out that poses risks to patients, relatives and staff.
- Capacity of A&E when full when patients needing resus rooms.
- Controlled drugs and the time it takes to be given to the patient.
- Explanation and reassurance to patient at the time of heart attack happening of plan and of care and emergency treatment needed.
- Having to travel to Lincoln with an acute cardiac event and risks posed to patient. Knock on effect to emergency ambulance services.

2. Case 14935 (19-06-2025)

PCN: Boston

Providers: NHS 111 Service, Pilgrim Hospital, Swineshead Medical Group

A week after having a significant heart attack and receiving treatment and angiography to unblock coronary arteries and being a patient on Coronary Care and Cardiac short stay Ward at Lincoln County Hospital patient developed ongoing calf pain when discharged home. Calf was not red or swollen but did have significant pain on weight bearing and when stretching toes upward, and felt like there was a knot in calf.

Rang NHS 111 who assessed following giving history and concerns that this could be a DVT (deep vein thrombosis) and said that they would get GP from registered practice to give patient a call. GP rang patient, patient discussed recent medical history interventions, that calf was very painful, especially on weight bearing, felt a knot in calf, pain was not going away, same history given to NHS 111. Patient told GP that concerned that was a DVT advised that on blood thinners and no red flags, GP told to come into Practice as already booked appointment to see another GP face to face and that a note would be put on records and to ask GP to examine leg when they were being seen.

Seen by GP in practice the next morning. This GP was more interested in prescribing new medications that had been requested by Cardiologist following discharge from Coronary Care. Patient told GP about ongoing calf pain, giving the same history as to the other professionals. When patient and spouse asked GP for a scan to make sure that this was not a DVT. GP said that there were not any red flags for this and this was not necessary. GP was very dismissive of spouse and did not even acknowledge that they were in the room.

After leaving the room patient and spouse not happy with GPs attitude or clinical decision making, red flags were that a patient in front of them who had a recent significant heart attack, blockage of stents, treatment and had been immobile on CCU for 48 hours had ongoing significant calf pain, which was difficult to weight bear on, pain increased when toes turned up, and felt like a knot in calf.

All professionals seemed bothered about that calf was not swollen, or red and patient was on blood thinners. Patient discussed with spouse who was a retired Nurse /Midwife what they thought. Spouse said that they needed to go to A&E straight away for further assessment as they had seen DVTs that did not have swelling or inflammation and red flags were underlying cardiovascular disease, recent significant heart attack and treatment. Recent immobility, ongoing calf pain that hurt when weight bearing and toes stretching and felt like a knot in calf.

Patient accessed A&E straight after GP consultation. Seen straight away because of recent heart attack and history of calf pain. Bloods taken, cannulated, ECG done, triaged and observations done, assessed by Doctor and Consultant. Vascular scan booked for later that afternoon transferred to Same Day Emergency Care (SDEC) ward. Had vascular scan saw Doctors, Deep Vein Thrombosis (DVT) confirmed. Given clot busting injection, plan for patient to return the next day for further assessment and discussion for follow on treatment as Haematology and Cardiology opinion needed as now out of normal working hours. Patient had been at the hospital from 9.30am until 8pm.

Patient returned to SDEC the next morning for further assessment and consultation. Decided amongst the Consultants that needed further blood thinning medication that was different than prescribed previously for 2 weeks only. First part of medication given other medication prescribed and got from hospital pharmacy and discharged home.

## **Notes / Questions**

Luckily, this patient went to A&E.

## East Lindsey District Council x 9

- 6 x General Comment
- 1 x Informal Complaint
- 1 x Formal Complaint
- 1 x Compliment

## **General Comment**

#### 1. Case 14941 (23-06-2025)

**PCN:** First Coastal

**Providers:** Beacon Medical Practice, Lincolnshire Community Health Services NHS Trust (LCHS), NHS 111 Service

Skegness Urgent Treatment Centre (UTC)

I have been suffering from a water infection and swollen ankles and feet for a while. My GP gave me antibiotics and water tablets, and both symptoms went away. But the tablets stopped, and the infections returned. So the GP repeated the treatment with the same result.

Mid June, through the night, I started hallucinating. I was hot and cold and very confused, so I rang my GP, but there were no appointments. I was told to ring 111, so I did. I was told I needed to see the doctor within an hour, two at the most. So I was given an appointment for mid-day at the hospital.

I arrived at the allotted time and left 5 hours later, but that wasn't till after the doctor told me they could not help as I was under a GP for the same complaint. Every person in the waiting room had been given an appointment made by 111, and no-one was seen before a 4 to 5 hour wait.

What is the point first of all ringing 111? And what is the point of the appointments? So instead of a 10-minute appointment with my GP to get a prescription so I could go home, take my tablets, put my feet up to stop them swelling any more, I spent nearly 5 hours sitting with my feet down to be told they could not help and to go home and see my GP tomorrow.

Can someone please tell me were the logic is in any of this. There was a person sitting next to me, who had not long come out of the hospital, had been given an appointment for 9;30am left at 4pm without seeing the doctor. they looked terrible. When I suggested they tell them they were leaving, they said it was too far to walk and went home.

When people say the NHS is broken, it is an understatement. They triage you when you arrive. Would it not make sense to send home the ones they cannot help?

Another person only wanted an X-ray, they came in before me, they had to wait 5ish hours for the Doctor to sign the form for the X-ray to be done????

It was handy for me when people left because I was seen in their place; otherwise, I probably would still be there. I finally got an appointment with my Doctor today, who gave me my prescription, and yes, they were running late, but only 15 minutes.

Please, someone, take notice before you have a bigger problem than the one you have now.

## **Provider Response**

LCHS - request to release details - Healthwatch made contact with the patient. No response to date.

21/7/25 LCHS - Thank you for getting in touch to share your recent experience at Skegness Urgent Treatment Centre. I was very sorry to read about the difficulties you encountered while seeking care, particularly at a time when you were feeling unwell. I would like to thank you for taking the time to provide a detailed account. It has helped us to understand the situation more clearly and identify where improvements are needed.

Please accept my sincere apologies for the distress and discomfort you experienced. I recognise how frustrating it must have been to feel unwell, to be advised that urgent medical attention was needed, and then to face such long delays and uncertainty when you arrived at the centre.

You explained that you had a recurring urinary tract infection and swelling in your feet and ankles, which was initially treated by your GP. One night in mid-June, your symptoms worsened, and you experienced confusion, temperature fluctuations and hallucinations. You were unable to secure a GP appointment and were advised by NHS 111 to attend the UTC urgently. You were given a midday appointment but waited for several hours. When you were finally seen, you were informed that no treatment could be provided as your GP was already managing the issue. You observed other patients in a similar position, also waiting long periods despite being referred by NHS 111. You questioned the value of NHS 111 appointments, the triage process, the discomfort caused by long waits, and delays for patients requiring basic interventions such as X-ray forms.

All patients arriving at the UTC are assessed within 15 minutes by a clinician. This process, known as initial clinical assessment, ensures that those with urgent or potentially serious conditions are identified early and prioritised accordingly. If your condition had worsened or been found to be immediately life-threatening at the time of assessment, you would have been seen without delay. This process is designed to ensure patient safety at all times. Once assessed, patients are seen based on clinical need. Those requiring emergency care are prioritised first, followed by patients with prebooked appointments where it is safe to do so. Walk-in patients are then seen after that, again according to clinical need.

In some situations, it may be appropriate to redirect a patient to another service, such as their GP or community pharmacy. This can happen after initial assessment if the clinician deems that further care at the UTC is not necessary or possible. However, redirection decisions can only be made by senior clinicians, such as GPs or advanced practitioners. When a more junior clinician conducts the assessment, they must wait for a senior colleague to review the case. This can result in delays and, understandably, adds to patient frustration. We are currently providing additional training and

support to our junior staff, so they are better equipped to manage tasks such as clinical redirection and routine interventions, including X-ray requests, where this is appropriate and safe.

NHS 111 appointments are designed to help patients access the right care and reduce unnecessary attendance at emergency departments. However, a booking through NHS 111 does not guarantee that a patient will be seen immediately upon arrival. Clinical priority always takes precedence. I am sorry if this was not made clear when your appointment was arranged. We are working with our NHS 111 partners to improve how this information is communicated to patients before they attend the centre.

I am especially sorry to hear that you were left sitting for a prolonged period while dealing with swelling and discomfort. Long waits can make existing symptoms feel worse. Your feedback has been shared with our team to raise awareness of this, and to encourage staff to support patients by offering movement or elevation when appropriate.

You also raised concern about another patient who waited several hours for an X-ray form. Certain actions, including issuing diagnostic requests, must be carried out by clinicians with the appropriate training and authority. When those staff are not immediately available, delays can occur, even for tasks that may appear straightforward. We fully appreciate how frustrating this can be. During the summer months, Skegness experiences a large and rapid increase in visitors, which places additional pressure on local services. While we prepare for this seasonal demand, there are times when the number of patients exceeds what was planned. We are working with the wider NHS system to ensure better support and resilience during peak periods.

We are currently training and supporting junior clinical staff so they can carry out more tasks independently, including safe redirection after assessment and authorising diagnostics such as X-rays. We are also working with NHS 111 to improve the information given to patients at the time of referral, particularly around waiting times and clinical prioritisation.

I was pleased to hear that your GP was eventually able to provide the care you needed and that your follow-up appointment was only slightly delayed. However, the steps leading to that appointment caused you considerable discomfort and inconvenience, and for that I am truly sorry.

Thank you again for raising your concerns. Your feedback has been taken seriously and has helped inform local service improvements.

Information shared with the patient.

2. Case 14931 (19-06-2025)

PCN: Meridian

**Providers:** James Street Family Practice

For Information: Lincolnshire Integrated Care Services (ICS/ICB)

Spouse of patient rang Healthwatch and discussed issues that they are having getting an appointment at their registered Medical Practice which they are finding very frustrating. They have been having difficulties making an appointment with a Doctor following receiving a text message from the Practice in mid June, that they need to do this as they need to discuss blood tests taken recently. They are concerned that it is in relation to a reducing dose of medication and that they need a prescription for this next week. They tell me that they have rung twice and been into the Practice to try and make an appointment and have not been able to this.

## **Notes / Questions**

Patient requests that HW contact the Practice Manager. HW contacted Practice Manager.

## **Provider Response**

Practice Managers response: I understand your concerns and I appreciate the support you are providing to the patient. However, I must clarify that I am unable to bypass the standard appointment system to book directly on their behalf. We are currently experiencing significant pressures due to staff sickness, and appointments are unfortunately very limited at present. I would kindly ask that all appointment requests continue to be made through the usual channels, either via our online triage system or by contacting the reception team directly. While I appreciate the intention behind your email, it is not appropriate that I facilitate appointments in any other manner. Thank you for your understanding, and please do let the patient know we are doing our very best to manage demand and ensure fair access for all patients.

ICB response- Thank you for your email received by received by NHS Lincolnshire Integrated Care Board (ICB) Complaints and Customer Care Team on 20 June 2025. I am sorry to note the concerns raised by the patients. I am currently reviewing this with my colleagues in the ICB and will provide a response in due course.

## 3. Case 14850 (02-06-2025)

PCN: East Lindsey

**Providers:** Lincolnshire Community Health Services NHS Trust (LCHS) **For Information:** Lincolnshire County Council - Adult Social Care

Patient contacted Healthwatch as experiencing difficulties in accessing Occupational Therapy (OT) prior to having a procedure. Patient is a full-time wheelchair user and is due to have a procedure on their left hand in mid June. Has carers in place, and reablement services for outside of the usual carers visits, but needs to have an OT assessment prior so things are put in place before the event as a preventative measure.

Everyone keeps saying to the patient that it is someone else's responsibility to do this and no-one is actually doing anything. No integration of care.

## **Notes / Questions**

Healthwatch with patient consent made contact with PALs who are looking into this

## **Provider Response**

Unfortunately not. I initially sent an email which the patient responded to and advised his surgery had not gone ahead. In their response they listed off the services involved and it appeared their concerns were relating to Lincoln County Council. I then attempted to contact the patient. I reached out to the patient again requesting a contact telephone number, and requested further information on the services they are having issues with. We have received no further contact from the patient.

LCHS - It is hoped that contact with PALS received a satisfactory outcome.

#### 4. Case 14893 (11-06-2025)

**PCN:** First Coastal

**Providers:** Marisco Medical Practice

For Information: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

Patient had an accident in 2018, no pain relief by surgery and still in constant pain, nothing being provided. Is now living with elderly parent as lost their house when they went to prison, no support with mental or physical health. Uses a mobility scooter to get around.

#### **Notes / Questions**

Healthwatch provided:- ACIS Housing support; LPFT and ICB information

## 5. Case 14895 (11-06-2025)

**PCN:** First Coastal

**Providers:** Marisco Medical Practice **For Information:** Pilgrim Hospital

I saw 3 different GPs over a period of time about the same thing, and each one gave me different advice regarding whether to take or not take iron tablets. Made contact with the surgery on one occasion as black faeces, the GP stated they would need to go to A&E and the surgery contacted an ambulance, a number of hours later, the paramedics arrived and stated it was down to the iron tablets and they would not need to be seen in A&E.

Lack of communication from Pilgrim Hospital when elderly parent was an inpatient, informed to do things, then their information was not updated accordingly so other staff did not know. Very frustrating.

There seems to be no holistic approach from any of the services, they only look at one thing and not the person.

# 6. **Case 14894** *(11-06-2025)*

PCN: Solas

**Providers:** Pilgrim Hospital, The Surgery Stickney

Patient commented it used to be ok, but now when you phone in, you are not able to get an appointment. I had Out Of Hours the other weekend and I had an appointment at Alford really good service.

Not easy to get a blood test in a timely manner, as I need one 7 days prior to my appointment at the hospital for nephrology.

At the hospital, I am under a Consultant at Lincoln County, but see them in a clinic in Pilgrim, medication information is not always provided to the surgery in a timely fashion and I have to chase, then wait for it to be sent over.

## **Notes / Questions**

Healthwatch provided PALs information

## **Informal Complaint**

#### 1. Case 14851 (02-06-2025)

Providers: One Health North Hykeham

For Information: Lincolnshire Integrated Care Services (ICS/ICB)

Patient has been trying to get a referral to Hull Royal Hospital Interventional Radiology Department for the past 7 months, a referral was sent to Neurology (incorrect department) so a new referral would need to be sent - for vertebroplasty following an MRI report 7 months ago.

Patient has been in contact with Hull they have nothing on their system even though One Health state they have sent one to them.

Could you please look at when a referral to the Radiology department was sent,

Information from the Hull Royal Infirmary PALs team to the patient is below:-

I have just looked into this and the radiology department does not have any request from One Health or anyone else for this patient to have a Vertebroplasty.

I have just discussed this with one of the senior members of the radiology admin team who I have copied in. They tell me that it looks like this patient had a recent MRI but it can't have been with HUTH as we cannot see it on our system, the last one we can see or access is from 2017.

It seems as though the referral from One Health was sent to the neurosurgery team stating a request for vertebroplasty for osteoporotic spinal fractures. This request was rejected as it states Neurosurgery does not deal with this.

On the rejection letter dated 7th November 2024, that went to one health and the patients GP, it does clearly state the details of where to send a referral for a Vertebroplasty to. This suggests it gets sent to the Vertebroplasty MDT and details of which were provided in the rejection letter.

According to our system, this new referral has not been done, or if it has, it has not gone to the relevant department/people. As such we cannot provide any update on this process or provide a possible date for the procedure or waiting times, as we have no referral to check against.

Unless One Health send the referral to the details they have been provided with the radiology department is unable to help. I appreciate this is disappointing for the patient. But I would get them to either check with One Health to send it to the details they have in the rejection letter.

#### **Notes / Ouestions**

Patient request for Healthwatch to make contact with One Health

## **Provider Response**

One Health - We are looking into this and will get back to you.

HW asked for an update - One Health - Please be aware the MRI request has been sent over to the hospital and the patients scan has been booked for the end of June. Once we have the images and report available we will then liaise with the consultant regarding a follow up appointment.

7/7/25 - copy of response to complaint from One Health received. Original to the patient

## **Formal Complaint**

1. Case 14928 (18-06-2025)

PCN: Solas

**Providers:** Pilgrim Hospital

For Information: The Old Leake Medical Centre

I spoke at length with a young couple at the Disability Action Forum yesterday here in Boston. Both in their 30s who have found themselves in an overwhelming situation. The cared for person has recently been diagnosed with epilepsy that has left them unable to walk, having a number of seizures every day and at unexpected times. Their partner has given up work to be their carer as they need support. Moved back here from Yorkshire having completed their degrees there. Partner is originally from Lincolnshire.

Cared for person has a number of health issues and has had recent stays in Pilgrim Hospital: concerns raised around lack of access to a wheelchair, medication not being available at the hospital pharmacy (especially over the weekend). Some of their medication are controlled (morphine based), issues at pharmacy at Old Leake.

## **Notes / Questions**

Information provided: Connect to Support, H.A.Y., Carers First, social housing LHP, Wellbeing Service, VoiceAbility, Wheelchair Service, Butterfly Hospice (counselling services), Talking Therapies.

Signposted to LICB feedback re Hospital and GP Practice. Adult Social Care team contact information. CQC and PHSO information given.

## **Provider Response**

GP Surgery - If patient is having issues with medications dispensed from the practice please ask them to contact the dispensary manager directly who will try to resolve these.

## Compliment

1. Case 14876 (12-06-2025)

Providers: East Midlands Ambulance Service NHS Trust (EMAS), Pilgrim Hospital

I collapsed on Sunday and was rushed into Pilgrim Hospital in Boston. 1st responder and Paramedics were amazing. Although couldn't communicate and answer they spoke to me throughout giving me

On arrival in A&E and moving to Integrated Assessment Centre again treatment been amazing. Was then moved up to the penthouse suite on level 9!

Out of this world treatment from HCA's 9 Health Care Assistants, Nurses, Student Nurses and Doctors. HCA was amazing and went above and beyond not just for me but other patients on the ward.

## **Provider Response**

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

### Lincoln City District Council x 3

- 2 x General Comment
- 1 x Informal Complaint

## **General Comment**

1. Case 14878 (12-06-2025)

PCN: Imp

**Providers:** Cliff House Medical Practice, Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

I have received a good service from my GP surgery, who arrange appointments for blood tests, mental health checks etc. However recently they have cancelled and rearranged appointments quite a lot. My GP there is helpful and talks over with me what mental health medications are better.

I have attended Witham Court also more recently and the Consultant contacted me by phone especially to prescribe the most suitable medication. However I was taken aback when asked if I could read and write by one Consultant (possibly in training) and handed a tick box form. I wondered if I looked that uneducated!

2. Case 14907 (16-06-2025)

PCN: Lincoln Healthcare Partnerships

**Providers:** Newark Road Surgery, Pilgrim Hospital

GP surgery - Not being able to get an appointment when they have just opened is frustrating. Pilgrim Hospital Ward 2b - Being discharged after a procedure with no pain relief I ended up in emergency surgery 4 days later. I couldn't fault the care I received on the ward though.

## **Notes / Questions**

No patient details shared

## **Provider Response**

ULTH - Response from Lead Nurse TACC - Many thanks for the feedback. I am pleased that you were happy with your nursing care and will feed that back to the nursing staff; however I am very sorry to hear that there was no pain relief prescribed for you . I will pick this up with the medical team with the aim to ensure this does not happen for any patients in the future. I wish you a speedy recovery from your surgery.

# **Informal Complaint**

#### 1. Case 14860 (06-06-2025)

PCN: Imp

**Providers:** Lincolnshire Community Health Services NHS Trust (LCHS), Lincolnshire Integrated Care Services (ICS/ICB), Lindum Medical Practice

Caller is a carer for spouse.

Spouse had a severe fall and suffered a deep cut on their arm. Went to hospital and had it dressed and to change their dressings had previously attended their local surgery - Lindum Surgery. On trying to book an appointment, for the dressings to be changed, were told the surgery no longer does this and they were given the number for University of Lincoln Health Service Clinic. They tried to make an appointment over the phone but nobody picked up for 1.5 hours and a message said to book through website but the website said that the online booking service was down. When they eventually got through on the phone there were no appointments available.

The caller believes all surgeries in the area are sending people to University of Lincoln Health Service Clinic and it is overwhelmed.

Finally an appointment was made but it was in 10 days time, which the caller felt was far long for fresh wound dressing changes so on pushing further got a sooner appointment but said "I had to rattle the cage but shouldn't have to"

The caller rang the surgery to speak to the practice manager but hasn't heard back, so is hoping to speak to them on Monday morning.

#### **Notes / Questions**

Signposted to LICB, Customer Care and Complaints Team, PALs at LCHS, CQC and PHSO.

## **Provider Response**

LCHS - It is hoped the author made contact with the relevant departments and received a satisfactory outcome.

# North Kesteven District

#### • 1 x Compliment

## Compliment

1. Case 14880 (13-06-2025)

PCN: APEX

Providers: United Lincolnshire Teaching Hospitals NHS Trust (ULTH) / ULHT

I was referred for a chest x-ray by the GP Practice and went to new Community Diagnostic Hub at Lincoln was seen and returned home in 30 minutes. Very easy and positive experience.

# South Holland District Council x 2

## • 1 x General Comment

• 1 x Compliment

## **General Comment**

1. Case 14844 (02-06-2025)

**PCN:** Spalding

**Providers:** Beechfield Medical Centre, Lincolnshire Community Health Services NHS Trust (LCHS), Lincolnshire Integrated Care Services (ICS/ICB)

Not a personal experience but I am volunteer driver taking patients to appointments etc. We have just found out that Beechfield have stopped treating leg ulcers and patients are being referred to Gosberton surgery for treatments. We carry numerous patients to Beechfield on a regular basis for leg ulcer treatments which is a quick, short journey to the surgery at minimum charge. Chances are they are unable to drive themselves simply because of the nature of the treatment.

Having to take people to Gosberton a minimum 16 mile round trip is not only inconvenient to the patient but costs them more in our charges (let alone those who use taxis) and impacts our availability for other patients - ie we could do two or three local surgery patients in half a day but only 1 to Gosberton.

## **Notes / Questions**

Healthwatch asks - what is the reasoning for the move of clinic?

## **Provider Response**

UPDATE from ICB - The Leg Ulcer service for Beechfield Medical Centre patients is now provided by Lincolnshire Community Health services at Johnson Community Hospital Spalding Road Pinchbeck PE11 3DT.

## Compliment

1. Case 14952 (27-06-2025)

**PCN:** Spalding

**Providers:** Lincolnshire Community Health Services NHS Trust (LCHS) **For Information:** Lincolnshire County Council - Adult Social Care

Carer discussed that the Wellbeing Service that they have used have given excellent support and care. They care for their spouse full time who has Parkinson's Disease and Addisons Disease the care they receive from the Parkinson's Specialist Nurse and Team has also been excellent.

#### **Provider Response**

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

## West Lindsey District Council x 2

- 1 x General Comment
- 1 x Informal Complaint

## **General Comment**

1. Case 14938 (20-06-2025)

PCN: Trent

Providers: Lincolnshire County Council - Adult Social Care

For Information: Caskgate Street Surgery

Carer contacted Healthwatch after being told of us by organiser of Dementia Group in Gainsborough who has arranged a visit from Healthwatch in August. Carer looks after spouse at home, spouse has been diagnosed with dementia and has kidney failure. Spouse has had a stent put in their kidney in April and had an indwelling urinary catheter which stayed in for 2 months. Once this was taken out it has caused worsening urinary incontinence which is now creating havoc.

Carer unable to go out, both are not sleeping, struggles to get spouse up, washed and dressed. Feels has got to the point of no return. Has been to GP and has a referral to Adult Social Care Enablement Team. They did have a long conversation with the worker from the Enablement team but have heard nothing since and need support sooner rather than later. Feels that carers don't ask for help until things are really bad.

## **Notes / Questions**

Signposted to Carers First, Adult Social Care services, LCHS bladder and bowel services, Age UK, Silver line, Alzheimer's Society, Wellbeing service, Connect to Support.

## **Informal Complaint**

#### 1. Case 14934 (19-06-2025)

**Providers:** Continuing HealthCare, Lincoln County Hospital, Lincolnshire County Council - Adult Social Care, Lincolnshire Integrated Care Services (ICS/ICB)

Close relative contacted Healthwatch and not happy with the treatment and care that their parent has received while being a patient on Navenby Ward at Lincoln County Hospital. They do not believe that the correct clinicians have been to the MDT meetings held and request that a Clinician specialising in low Hb, an orthopaedic Consultant regarding union of fractures, and a dementia Consultant be present. They believe there has been a refusal to investigate the issues stated.

An MDT meeting was held yesterday and the Ward are stating that their parent is medically fit for Discharge. Their relative disputes this and says it would be an unsafe discharge and that their parent needs a period of intermediate care not a enablement package of care at home. That the level of care offered is not recognising the 2024 Care Act. Their parent has been on Navenby Ward since early May.

Patient is elderly with complex physical health problems and dementia and was readmitted to Lincoln County following complications and illness. Has fluctuating capacity relative has power of attorney for finances only. Relative was in hospital in Scunthorpe after fractures sustained to back and hips went home with home-based care and enablement. Partner also elderly and not in good health. Relative has already contacted LICB in relation to unsuitable care package following discharge from Scunthorpe and has contacted PHSO about this.

Patients partner/carer feels aggrieved that they have been misrepresented by either the Discharge Team or Social Worker, in terms of his coping abilities, arguably to facilitate a discharge via the LA/HBRS. Relative has raised this with the person from the MDT acting in the Safeguarding capacity, and again today when seeking Consultant meetings. Historically there has also been a reluctance and opposition from staff (both LA and NHS) to provide Consultant names, field, contact details and similarly those for their Secretaries .

#### Themes:

- Unsafe discharge from hospital
- Relatives being listened to
- Care packages

## **Notes / Questions**

Relative requests that Healthwatch make contact with PALs ULTH .

## **Provider Response**

Response from PALs : Thank you that you forwarded it to us I will be dealing with this case. **PALS Officer** Lincolnshire Community and Hospitals NHS Group

Response to patient from PALs: Thank you for your email and I hope that you received my email I sent to you at 10;08 today. I have spoken with the wards sister and matron and they will be in contact with you as soon as possible. I am sorry but PALS is not involved in patient's care or discharge process and I just forwarded your further email to them for their response and contact to be made.

## All Areas x 2

- 1 x General Comment
- 1 x Signposting

## **General Comment**

1. Case 14883 (13-06-2025)

## Providers:

**For Information:** Lincolnshire Integrated Care Services (ICS/ICB), United Lincolnshire Teaching Hospitals NHS Trust (ULTH) / ULHT

## Rheumatology

The Consultants never listen properly to what you say and letters to GP do not reflect what is going on. GPs try to fit you into a category but with a rare disease ( diffuse scleroderma) we don't fit. So feel isolated and alone the norm. Difficult and negative experience.

## **Notes / Questions**

No personal contact details provided. GP Practice and Hospital not recorded.

## **Provider Response**

ULTH - Response from Clinical Service Manager - We are sorry that you have had a poor experience of the Rheumatology Service at ULTH. It is difficult to provide further comment without additional information and it would have been investigated by contact with PALS (Patient Advisory Liaison Service) ulth.pals@nhs.net.

## Signposting

	1. Case 14848 (02-06-2025)
	Providers: Lincolnshire Integrated Care Services (ICS/ICB)
	Person completed carers survey and requested information on Private home care advice. Ear infections advice
	Notes / Questions
	Healthwatch provided information on Private Care Homes from Care Choices, pharmacy first and GP
Out of Area x 2	General Comment
• 2 x General Comment	1. Case 14870 (09-06-2025)
	Providers: Out of area
	Quick and easy appointment with musculoskeletal specialist at GP, and quick appointment made for x-ray.  Referred to physio and asked to call Connect Health for an appointment.  1st appointment given was 10 week wait and in a town that was a 70 mile round trip from Grimsby 2nd appointment available was August and they said 5 miles away, but forgot I had to travel to Humber Bridge and pay to go over it and back  No appointments available in local area until September or October.  How do they expect people to get better and back to work, my GP always had local appointments for physio within a week until told to use this company.  Notes / Questions
	As these comments were relevant to Pelham Medical Centre in Grimsby, which is out of our area, this email was forwarded to Healthwatch North East Lincolnshire .  2. Case 14892 (16-06-2025)
	Providers: Out of area
	Excellent treatment from hospital medical staff but let down badly by support services as results still not available after more than 7 weeks since biopsies taken despite being a 2ww patient.
	Notes / Questions
	Sent to relevant Healthwatch

# **Community Health Services**

Area	Case Details
East Lindsey District Council x 1  • 1 x General Comment	General Comment  1. Case 14900 (11-06-2025)  Providers: Lincolnshire Community Health Services NHS Trust (LCHS)  Louth Urgent Treatment Centre (UTC)  In shock initially after I had fallen and hurt my shoulder. Seen quickly within an hour and x-rayed, this was quite late at night, and the staff were all lovely.  However, x-ray was reviewed and a sling was placed, patient asked questions regarding recovery times and what it would look like, clinician wasn't sure, informed they would need physiotherapy and an MRI but they couldn't book this, but would get another clinician who was more senior to check the x-ray and phone them the following day.  No phone call came, patient contacted 111 who booked an appointment at the UTC, same clinician. Patient went through what they had been informed, the clinician denied this information, patient requested for the clinician to check the notes, nothing had been placed in the notes. The implication that the patient had made it all up.  Had an emergency appointment at surgery and have been referred to MSK.  Provider Response  LCHS - Response from Matron - I am really sorry that your treatment at the UTC did not go as expected, due to a breakdown in communication. This is not the experience we expect for any of our
South Holland District Council x 2  • 2 x Compliment	Compliment Compliment

	1. Case 14886 (13-06-2025)
	Providers: Johnson Community Hospital, Lincolnshire Community Health Services NHS Trust (LCHS)
	Quickly seen by triage nurse and x-ray arranged before seeing Dr. The Johnson Hospital, MIU ( Minor Injuries Unit). Very easy to get help and treatment needed. Positive experience of care.
	Notes / Questions
	No personal contact information provided.
	Provider Response
	LCHS - Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.
	2. Case 14856 (03-06-2025)
	Providers: Lincolnshire Community Health Services NHS Trust (LCHS)
	The Johnson Hospital MIU
	Quickly seen by triage nurse and x-ray arranged before seeing Dr
	Provider Response
	LCHS - Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.
South Kesteven District Council x 1	General Comment
Council x 1	1. Case 14881 (13-06-2025)
• 1 x General Comment	Providers: Peterborough and Stamford Hospital
	Stamford Hospital
	Our local hospital suddenly has a waiting time of up to an hour and a half for a blood test. Queues are outside for many and also elderly made to wait in the cold.
All Areas x 1	Compliment
1 x Compliment	1. Case 14939 (20-06-2025)
'	Providers: Lincolnshire Community Health Services NHS Trust (LCHS)
	Sexual health services. Staff were very knowledgeable and took a comprehensive history assessing all my needs and concerns in an empathetic, discreet and non-judgemental way in what felt like a safe space.
	Provider Response
	LCHS - Thank the responder for their feedback and assure them that the information has been passed onto the relevant teams.

# **Primary Care Services**

Area	Case Details
Boston District Council x  1  1 X General Comment	General Comment  1. Case 14890 (13-06-2025) PCN: Boston Providers: For Information: Parkside Surgery General Practice (GP) Not having to start ringing surgery at 0800hrs to be eventually told sorry no appointments available. Ring back tomorrow. Difficult to access help and support needed.  Notes / Questions No personal information shared.
East Lindsey District Council x 21  15 x General Comment 1 x Formal Complaint 4 x Compliment 1 x Signposting	General Comment

#### 1. Case 14879 (13-06-2025)

**PCN:** First Coastal

**Providers:** Beacon Medical Practice

Having moved to Ingoldmells 3yrs ago when I retired through ill health and needing an accessible smaller property. I joined the nearest practice as soon as we arrived. Myself and my spouse filled out a fairly comprehensive health and lifestyle questionnaire and when we returned it asked for any information about the practice and what services were available.

We also enquired about the appointment system and how to book in. After around a month we had not received anything from the practice so my spouse went in to see if there were any leaflets but was told it was all on the website which when we insisted it wasn't as we had checked, we were told to look again.

It's still not there! The first time I booked an appointment I arrived at Ingoldmells to be told I was in the wrong place and should have been in Skegness. I had not been told that it was one of 3 connected practices and appointments could be at any.

As I was in Ingoldmells and Skegness is a good 15 mins away I asked the receptionist to call them to explain while I drove there. I am a wheelchair user so it takes me a few minutes to load and unload the chair so I arrived a full 25 minutes late only to be told I would not be seen as I was over 10 mins late.

I was informed they'd received no messages about the mix up and my appointment was cancelled! Every appointment I've had has been problematic at this surgery and I have written to the Practice Manager twice but received no response. I have had to wait over an hour with no explanation and when I had to leave as I could not stay any longer due to a continence problem and tried to quietly let the receptionist know I was leaving, I was given a lecture on health emergencies and GP priorities and told I'd be marked as not attending so wouldn't get another.

Another occasion while waiting I heard my name called and as I'm slower than most in my wheelchair watched as another person got up and went in my place. I went to tell the receptionist who just said the Doctor would of realised and I'd be next. Yes I was next but in about 2 minutes I realised the Doctor was using another patient's notes to quiz me on my health!

On informing them that I'd seen the other patient take my place they seemed unbothered and I really felt less than listened to even when I expressed concern that their appointment details/health will of been put into my notes as a permanent record.

Generally I feel the system is useless to have to ring at 8am on a first come service is beyond dangerous and having tried to ring for days several times(up to 20+). I have ended up in hospital twice after contacting 999 and remained there for over 2 weeks.

I have used the callback service only to be told there were no appointments left, the first bookable appointment was in 3 weeks, if I was that ill then I should go to the walk in centre or A&E.

It's very disappointing to of been recently told that the GPs as a protest against their pay and conditions have been for a long while working to rule and will only see 25 patients a day and use procedures by the letter of their contracts. Again I'm trying to get an appointment before I end up in hospital and this is day 4 without much hope.

## Summary of themes

- GP access phone and online services
- Wheelchair user, complex health issues.
- Practice organisation, communication and attitudes of staff
- Information on Practice Website incorrect
- Confidentiality and medical records
- knock on effect to patient when can't get an appointment having to access acute services

## **Notes / Questions**

Signposted to Practice Manager or LICB, CQC, PHSO

2. Case 14947 (25-06-2025)

**PCN:** First Coastal

**Providers:** Beacon Medical Practice

I have just come off the phone with a quite distressed patient, who mentioned they had been diagnosed with AF a couple of months ago but informed over the phone of diagnosis and was terrified, they stated they had made a complaint about this though. They also suffer with Osteoporosis and more recently on having blood pressure checked at the Skegness pharmacy on Lumley road, it was a high reading of 195/? and was informed that they would email the practice as the patient would need to be seen.

The patient has been trying to get an appointment in any of the branches but has not been successful over the past 5 days, when ringing at 8am. Since diagnosis of AF 3-4 months ago, has not been seen for follow up.

Patient is in constant pain, worried about BP and AF diagnosis, isn't sure if they are managing their medication correctly. Patient was crying and distressed on the call today and stated they were terrified.

#### **Notes / Questions**

Patient request for Healthwatch to make contact with surgery.

## **Provider Response**

Patient called back to say they had missed a message from surgery and has an appointment for the end of the week. HW informed surgery of this

Practice - New medication had been issued, which will continue to be monitored. We have tried to contact patient to arrange a blood test. (Left a voice mail)

I will try to contact them again to arrange this. Patient has also recently been booked to speak to a GP face-to-face to discuss recent BP readings. (they have attended this morning). I hope the above has been informative, if you need any further information, please do let me know.

*Patient update - 1/7/25* - Following our conversation last Wednesday 25th June. I had an appointment with a GP from Beacon Practice Chapel St Leonard's regarding my very high blood pressure. It was still very high and I was given a letter to take to A&E at Boston. I was told if I drove myself and felt worse to pull over on the side of the road & ring 999. I was alarmed at this recommendation and took advice from the emergency service who told me to return to the Dr. However I rang a friend & they took me to A&E at Boston.

I was examined and had an ECG & Blood tests. Once these were completed I was seen by a Dr who showed me the ECG that showed I had not got Arterial Fibrillation. In fact my heart was perfect. Blood pressure remained high and a recommendation to change meds would be sent to the GP.

I was told over the telephone in March I had AF and the warnings of what could happen ie a stroke a heart attack random bleeding. With the advice to contact the surgery /111 /A&E.

Thank you for being supportive last week and intervention with Beacon Practice.

#### 3. Case 14861 (06-06-2025)

PCN: East Lindsey

Providers: Conningsby Dental Practice, Integrated Care Board Dental

Sibling of the caller has cancer and on attending their NHS Dental practice in Coningsby was advised that the practice is now going to become 'private' and therefore the cost of the treatment offered (capped tooth) would increase from £200-£300 to £1000+

The sibling, although diagnosed with cancer, is continuing to work part-time and is 61yrs old, not on benefits and cannot afford the price stated but would be happy to pay the initial NHS price originally quoted. Has tried to get PIP however, has been informed that as they can speak they are not entitled to this, so has to carry on working even when they have physical disabilities.

The caller has contacted many dental practices to enquire if their sibling could register with them but all to no avail with many being dismissive and uncaring, suggesting that the sibling simply have the tooth removed

The caller is seeking any help, assistance and advice.

## **Notes / Questions**

Signposted to LICB to make a complaint about an NHS Dentist, and private Dentist. Also provided Citizens Advice to see what benefits they are able to get to support. Volunteer Car Scheme information provided.

## **Provider Response**

Healthwatch contacted a number of NHS Practices - option in Wyberton as NHS also made contact with Winsover NHS Practice who would see what they could do.

All information passed onto the sibling.

3/7/25 - With the information provided the patient made contact with the Dental Practice and secured an appointment under NHS

#### 4. Case 14843 (02-06-2025)

Providers: East Lindsey Medical Group

On this occasion was not happy that medication was not prescribed of inhalers asthma/COPD with this effect mobility and stress is increased when struggling to get breathing

#### **Notes / Questions**

No patient details provided

## 5. Case 14899 (11-06-2025)

**Providers:** East Lindsey Medical Group Newmarket Medical Practice , Louth

We went for jabs/vaccinations for an upcoming holiday. All good with the jabs.

However, we were advised that we needed an additional yellow fever vaccination at a cost of £100 each. We did some research online and in fact we didn't need this jab for where we're going. This wasn't picked up on by the surgery.

## 6. Case 14923 (17-06-2025)

PCN: Meridian

**Providers:** East Lindsey Medical Group

East Lindsey Medical Practice

Giving up trying to get an appointment with GP here in Louth for a severe chest infection. Saturday surgeries accessible for people that work/ or much later/early am appointments, which is good.

## **Notes / Questions**

No patient details shared

## 7. Case 14944 (23-06-2025)

PCN: Meridian

**Providers:** East Lindsey Medical Group

The Wolds Branch Practice, Telford, Lincolnshire

I was informed by text that I need to book a blood test. If not my medication would be halved. I was late booking it due to mental health issues, however after I attended the appointment my prescriptions are still halved.

I spoke with a doctor last week who said that they would reinstate them.

I suffer with pancreatitis, spinal stenosis and find this extremely unacceptable. The local chemist needs a weeks notice and I am absolutely disgusted that I am left with no painkillers.

## **Notes / Questions**

No patient information provided

## 8. Case 14901 (11-06-2025)

**PCN:** First Coastal

**Providers:** Integrated Care Board Dental

Winsover NHS Dentist

Instant appointment for children in need and vulnerable adults is good. But general problem for general public is a 3 year waiting list after registration to get an appointment. Can go private but costs are prohibitive, this is not good enough. Dental care is not just cosmetic it should be on the same basis as other health care.

#### 9. Case 14862 (09-06-2025)

PCN: Solas

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

Spilsby surgery appears to have forgotten as to what service they provide and who to.

The community is hearing so many rumours that it's going to be closed that the elderly community in particular are worried as to what care they will receive and by whom.

Trying to get an appointment is beyond a joke as the usual message is they have reached capacity - at 10 in the morning not acceptable especially when they decline to even offer any advice over the simplest of questions. We need to know if the surgery is viable thank you.

## **Notes / Questions**

Signposted to LICB, CQC, PHSO

## 10. Case 14863 (09-06-2025)

**PCN:** Solas

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

I am contacting you on behalf of the concerned residents of Spilsby. Since Feb 25 all 8 of the resident Dr's have left Spilsby surgery, this is not a coincidence. Also residents are struggling to get appointments, phone lines are constantly not accepting calls. Lack of communication regarding charges to prescription ordering which is detrimental to elderly, disabled and vulnerable residents. It is not acceptable

## **Notes / Questions**

Signposted to LICB, CQC and PHSO.

## 11. Case 14853 (03-06-2025)

PCN: First Coastal

**Providers:** Marisco Medical Practice

Previous caller sent a long letter with information about how they are now taking a number of tablets and would like a review of all medications as do not understand why they are on most of them.

## **Notes / Questions**

On Healthwatch contacting the patient, this has now been resolved. Had an appointment at the weekend and the GP is dong a number of tests, referred to dietician, explained everything and what medication was for what condition. Patient very happy with this GP.

## 12. Case 14867 (10-06-2025)

PCN: First Coastal

**Providers:** Marisco Medical Practice

After a visit from an emergency ambulance I was told to phone my Doctors the next day to make an appointment. Phoned next day and was told the first appointment they had was the end of June, which was over three weeks away.

## **Notes / Questions**

No patient details shared

## 13. Case 14891 (16-06-2025)

PCN: First Coastal

**Providers:** Marisco Medical Practice

Being able to book an appointment with a doctor without having to wait almost a month would have been good. At least I was able to book one.

14. Case 14847 (02-06-2025)

PCN: East Lindsey

**Providers:** Market Rasen Surgery

Patient calling on behalf of their partner. Has collected a summary of their medical records this morning from the surgery and there is lots of information missing, such as recent MRI and results, medications they are taking, physiotherapy not noted on records. Requires this in full to provide information to a private clinic. Information on summary very disjointed.

## **Notes / Questions**

Healthwatch suggested speaking with the deputy Practice Manager

15. Case 14858 (04-06-2025)

**PCN:** Solas

Providers: The Old Leake Medical Centre

Trying to get an appointment is like hens teeth. You ring at 8am to get a message saying all appointments have gone and this is before 8.05am.

So what chance do you have? You can ring everyday and never get an appointment, it's crazy.

## **Formal Complaint**

1. Case 14845 (02-06-2025)

PCN: Meridian

**Providers:** East Lindsey Medical Group, The Wolds Practice

In early - mid May I went to collect my regular prescription from the Coop pharmacy in Horncastle. After asking my name, address and date of birth they proceeded to tell me "there is another person with the same name as me with a different address but same date of birth. This was then queried with the pharmacist who thought it strange. I then told them the medication I was expecting to be told that the prescription was for me but a different address. I then saw that my address had been changed to Wolds care home, Louth.

I called the surgery immediately because I was very upset and angry only to be told by the receptionist that it had "only been changed for about a week" as if that was OK. They then proceeded to tell me that they would get someone senior to contact me. I waited 2 days and absolutely no response. I called again a couple of days later to ask if the complaint form online goes directly to the practice manager. I was told it's just a general email address and as I'm sure you can understand I was not happy for others to see this.

The following day I rang the bowel screening number as I hadn't received my kit that should of been sent to me 2 weeks prior. I was told that my address had been changed to the Wolds care home. I now have to wait another 2 weeks to receive the kit due to this breach of my personal data.

After speaking to the surgery the next day they assured me none of my personal data had been sent to the care home but my worry is that the testing kit has been sent there with my personal data including my NHS number, I'm very unhappy about this.

I would like to know how this happened? Why this happened and who changed my personal address without my authorisation. Your website clearly states that to change address you must put it in writing or use the online form of which I did neither.

This has caused me a lot of stress and anxiety in the last week as the staff member did not follow the GDPR guidelines.

## **Notes / Questions**

Healthwatch provided CQC; ICO & ICB information.

Also at the request of the patient, made contact with the Care Home to ensure they have received no information about them. Also made contact with the Practice Manager at patient request.

## **Provider Response**

Healthwatch called the Care Home - no information has been provided to them about this patient, letter had been received from Bowel Screening that it had been done in error for their person.

Practice Manager - I can confirm that I have now sent a further response to the patient. The incorrect result has been removed from the record and the patient has indicated that the case should be closed once the record was corrected. We will of course still follow our in house significant event procedures

Patient update - I would like to say a massive thank you for all your reassurance and help with this matter. I realise mistakes are made but the fact that it was ignored by the practice infuriated me so much and it was that that made me reach out for help. With regards to the complaint I am now happy that finally it is sorted, .

Thanks again, it really was your hardwork that got things changed.

## Compliment

## 1. Case 14897 (11-06-2025)

**PCN:** First Coastal

**Providers:** Marisco Medical Practice

I have no complaints, I feel we get a good service from our GP Surgery, I am seen often as a diabetic, suffer with anxiety, depression, fibromyalgia and other things. I find them very approachable and they give me support.

2. Case 14902 (11-06-2025)

**PCN:** First Coastal

**Providers:** Marisco Medical Practice

Past year I have been able to get appointments quickly either by face to face or over the phone. Hospital appointment in a week at Louth for a scan and over the past 8 years all NHS has been very good. Never had a problem accessing surgery and have always found them supportive.

Even if I had to wait a week for an appointment, that's absolutely fine.

I'd like to say thank you.

## 3. Case 14903 (11-06-2025)

**PCN:** First Coastal

**Providers:** Marisco Medical Practice

I had breast cancer and felt the surgery looked after me very well and we're very supportive. As a whole I have had positive experiences with all in the NHS since I moved here.

Only difficulty is the 8am scramble.

## 4. Case 14914 (16-06-2025)

PCN: East Lindsey

**Providers:** Market Rasen Surgery

Myself and my elderly parent whom I care for, have had first class service from the surgery. With follow up appointments and quick answering of AskMyGP, always getting an answer or an appointment on the same day.

## Signposting

1. Case 14927 (18-06-2025)

**Providers:** Lincolnshire Integrated Care Services (ICS/ICB)

Patient has recently unexpectedly, become homeless living from one place to another. This is due to sale of property where they had to move out and the property they were buying fell through, had a rental however this fell through at the last minute. Currently in a caravan in the same location and waiting for another property to go through the purchase procedures, but could be 5+ weeks. Asking if their surgery could de-register them even though in same locality.

## **Notes / Questions**

Healthwatch provided information the patient requested.

## Lincoln City District Council x 8

- 6 x General Comment
- 1 x Compliment
- 1 x Signposting

## **General Comment**

1. Case 14904 (16-06-2025)

PCN: Imp

**Providers:** Abbey Medical Practice

I don't appreciate how some of the Drs speak to me, I feel it is out of line and makes me feel like I am nothing. I don't deserve to be spoken to like that.

## **Notes / Questions**

No patient details shared

2. Case 14915 (16-06-2025)

PCN: APEX

**Providers:** Boultham Medical Practice

I have had one bad service from my surgery and made a complaint, but the Doctor concerned moved to a different surgery and the complaint didn't get resolved.

I would say that the reception staff are really nice, polite and helpful and now the Doctors are also kind and caring. The ringing in the morning is hard work as the appointments go very quickly but the practice is very good - 5 stars

## **Notes / Questions**

No patient details provided

#### 3. Case 14909 (16-06-2025)

**PCN:** Lincoln Healthcare Partnerships **Providers:** Brayford Medical Practice

I work for a community care provider. We frequently order medication on behalf of the people we support through the prescription line. We can ring pharmacy 2-3 days later and nothing has been put through. One of our people whom we support went unmedicated for 2 days due to this issue and we had to use 111 to resolve the issue.

## 4. Case 14921 (17-06-2025)

PCN: Imp

**Providers:** Nettleham Medical Practice

Nettleham Medical Practice

The doctors are all lovely and very helpful. The issue is getting an appointment. I have waited for one appointment for over four months.

When I put a complaint in, it was brushed off with no apology.

#### **Notes / Questions**

Healthwatch provided ICB and CQC information

## 5. Case 14918 (17-06-2025)

PCN: APEX

**Providers:** Richmond Medical Centre

Patient had an appointment last week at the surgery as had been coughing for sometime, where they go bright red in the face and struggle, wondered if it was a chest infection. GP did not do any checks of the chest nor listen to their chest, just stated they would make a referral straight to the Gastroenterologist at the hospital.

Still struggling with cough so carer made a call yesterday to see if the patient could see someone to do a physical check, where they were informed that a call back would be made, at 6pm no call, so made contact again with the surgery, to be informed that nothing was on the system that a call had been made and no evidence, carer felt they were being called a liar.

The person, stated they would get a clinician from the other surgery to give them a call back last night, but again no call was made and doesn't know what to do now.

## **Notes / Questions**

Healthwatch advised to wait until this afternoon, then if no contact to make an online request to the surgery or 111 for Urgent Treatment Centre.

## 6. Case 14905 (17-06-2025)

PCN: South Lincoln Healthcare

**Providers:** The Branston and Heighington Family Practice

The diagnosis by the nurse practitioner was old age related re a shoulder problem. No action. Went again following deterioration. Referred to consultant who diagnosed severe arthritis, needs a replacement joint.

## **Notes / Questions**

Patient, although would like to be contacted, had left no contact details. Therefore Healthwatch Lincolnshire could not acknowledge or respond to their comments.

## Compliment

## 1. Case 14910 (16-06-2025)

**PCN:** Lincoln Healthcare Partnerships

**Providers:** Brant Rd Dental Practice, Integrated Care Board Dental

They are awful at answering the phone and never call back, but, I made contact with them for my spouse, who had broken their tooth while working away and they got them booked in as soon as they returned, also organised a referral for my childs orthodontic treatment and looked after them very well.

## Notes / Questions

No patient details shared

## Signposting

### 1. Case 14849 (02-06-2025)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Person completed carers survey and would like advice on Side effects of medicine.

## **Notes / Questions**

Healthwatch suggested speaking with GP surgery or local pharmacy as we are not medically trained

## North Kesteven District Council x 5

- 3 x General Comment
- 1 x Informal Complaint
- 1 x Compliment

#### **General Comment**

## 1. Case 14912 (16-06-2025)

PCN: South Lincoln Healthcare

**Providers:** Caythorpe and Ancaster Surgery

These aren't my most recent, but they are the pivotal points why I now often look at private options or holistic options first. Brief back history - I have been seeing orthopaedic / rheumatology consultant since I was about 10 years old. At 30 I was diagnosed with Ankylosing spondylitis, 10 years later a different consultant did an MRI and told me I didn't have this condition, "you have something but I don't know what, go away and come back when you are in a lot of pain"

During lockdown I was in a lot of pain and asked my GP to refer me back. I'd never met the GP, but they said "it's degenerative I'm not referring you", so I had a private MRI to discover the extent of progression.

I have since found a good Dr at my surgery who actually listens and acts. They don't rush me, gives the gift of time and friendliness which is lacking in surgeries these days.

## **Notes / Questions**

No patient details shared

## 2. Case 14857 (04-06-2025)

**PCN:** Four Counties

**Providers:** Lakeside Healthcare Stamford (St Mary's and Sheepmarket), Lincolnshire Integrated Care Services (ICS/ICB)

Terrible for trying to get an appointment, told no appointment and new service coming soon. Spouse needs to see a doctor soon as they give blood and has low iron so needs to be seen, but no appointment available. The practice should go back to having free slots available at the end of the people booked in.

Spouse is a blood donor and has given over 100 pints of blood but last time was turned away because of low iron. Has been taking iron tablets for over two months and has done two tests purchased from boots the chemist but it is still low and therefore would like an appointment to see the GP

Appointment to see any doctor when needed and not for the regular people going for more medication or a sick note.

## 3. Case 14940 (20-06-2025)

PCN: APEX

**Providers:** Richmond Medical Centre

GP listened to my concerns and what was important to me. Had a two way conversation and provided me with enough information for me to make an informed decision rather than just prescribing a medication and saying I should start taking it (a statin in this case).

Making the appointment could have gone better. The only option is to ring the surgery (or go in but difficult when I work pretty much the same hours as they do) and wait in a long queue then speak to a non clinician (receptionist) who triages why you are calling and makes the appointment.

Would like to be able to do this online myself or triage by a clinician.

# **Informal Complaint**

#### 1. Case 14872 (11-06-2025)

PCN: South Lincoln Healthcare

**Providers:** Lincolnshire Integrated Care Services (ICS/ICB), The Branston and Heighington Family Practice

Patient who has used Healthwatch previously contacted us as due to having Rheumatoid arthritis has had prolonged use of steroids which has caused sight loss in one eye and deteriorating vision in the other has now developed Type 2 diabetes . Is having difficulty getting more that 1 Libre kit for monitoring blood sugars prescribed by the GP Practice. One kit only lasts 2 weeks, needs a monthly supply. Unable to drive because of sight loss and arthritis and having to rely on partner and friends or pay for taxis out of PIP payments to collect prescriptions. Has contacted Practice and has asked to speak to Practice Manager about this but not heard anything back. Has found reception staff unhelpful and at times make in inappropriate comments , and now wants to make a complaint.

## Notes / Questions

Signposted to LICB Customer Care and Advice Team, GP Practice, and Lincolnshire Sensory Services.

## Compliment

1. Case 14885 (13-06-2025)

PCN: K2 Healthcare Sleaford
Providers: Millview Medical Centre

I use AskMyGP service and it works really well. Every time I have needed to use it there has been a return phone call offering me an appointment the same day. I have even been given a cortisone injection on that day without a return appointment or painful wait.

## **Notes / Questions**

No contact details provided.

# South Holland District

- 2 x General Comment
- 1 x Signposting

## **General Comment**

1. Case 14951 (27-06-2025)

**PCN:** Spalding

**Providers:** Boots Pharmacy Peterborough, Lincolnshire Integrated Care Services (ICS/ICB), Munro

Medical Centre

For Information: Pharmacy

Patient rang Healthwatch as concerned that heart medication that they have been on for many years as been changed without any consultation. They were notified by text which they think came from the NHS App. When they queried it with GP they said that " their hands were tied" and it was a supply issue. GP has doubled the dose and this has given some side effects which have been difficult to manage affecting kidney function and needing to pass urine all the time. Patient a carer for spouse so these side effects have been problematic. Has another GP appointment to follow up these side effects. Boots Pharmacy have been in contact and can't understand why prescription has been changed and there is not a supply and demand issue. Patient has issues that there does not seem to be any joined up thinking from Professionals and concerned that this information was given via text with no explanation.

## **Notes / Questions**

Signposted to Practice Manager or LICB, Carers First

2. Case 14946 (24-06-2025)

**Providers:** Sutton Bridge Medical Centre **For Information:** Integrated Care Board Dental

To get a dentist appointment is impossible. Most dentists round Sutton Bridge are private. Just cost my spouse £400 to have a tooth out.

*Doctor's appointment*, I don't know what time you can start ringing but I have rang at 8.30 am and appointments have all gone. I have said can I ring later to see if there's been a cancellation. Been told you can if you want. Not very helpful.

My spouse has had to travel to papworth to have a heart monitor fitted and go back next day. We have 3 hospitals closer to us. Kings Lynn, Boston and Peterborough. They have had it done at Kings Lynn before.

## **Notes / Questions**

Healthwatch provided information on NHS Choices Dental; Volunteer Car Schemes; online booking appointments at GP surgery. To ask the surgery why referred to Papworth.

## Signposting

1. Case 14887 (13-06-2025)

**Providers:** 

For Information: Lincolnshire Integrated Care Services (ICS/ICB)

Individual referred to Healthwatch by advisor at CAB Spalding. The issues are that they have had their driving licence withdrawn by the DVLA. The patient is disputing this and would like some assistance in communicating with the GP as to why they have contacted the DVLA and reported this.

# South Kesteven District Council x 4

- 2 x General Comment
- 1 x Formal Complaint
- 1 x Compliment

#### **General Comment**

1. Case 14874 (12-06-2025)

PCN: K2 Healthcare Sleaford

**Providers:** Caythorpe and Ancaster Surgery, Lincolnshire Integrated Care Services (ICS/ICB)

Patient called as unable to register at a local GP Practice in the area. Previously registered at Caythorpe and Ancaster has had an issue there as they prescribed and gave medication that they were allergic to. Has tried another GP Practice to register with.

#### **Notes / Questions**

Signposted to LICB Customer Care and Feedback Team

2. Case 14854 (03-06-2025)

PCN: K2 Healthcare Grantham and Rural

Providers: St Peters Hill Surgery

Communication, text to sort out BP review, 1 appointment for bloods, 1 appointment to be weighed and measured, no education, encouragement for healthy lifestyle. Told off for not bringing a urine sample, no one had asked me to, so another trip..no GP conversation or feedback about outcomes!!! I was processed like a factory item.

Less than 7 days later text saying filling another questionnaire for a HRT review ( done this year already in the last 4 months ) part of this wants the same weight heights BP taken last week !!! Blind automated systems making inefficiency.

From what I've read of it, I may again have no GP conversation! Yet it's seems to pushing cancer but no benefits. This isn't involving patient in their own health and take responsibility for themselves. Contact with surgery to question this all. "It's a new computer system, reviews will going forward will begin the month of my birthday". As a patient no-one has mentioned any benefit for me( there are none for any change) or other patients, nor how it helps the surgery.

Just a new computer system is a stock excuse, so staff clearly are not onboard / understanding the rationale either. Nothing communicated in the automated texts. I'm puzzled how this is using the scarce appointment resource in primary care, so far 2 appointments and 3 lots of data for someone to review at different points for 1 LTC review for each patient!

To start again in a week asking for the same stuff, for a different condition is inefficient. If this is repeated each year it will further damage relationships, to look at each condition intensively but separately

Some of this could have been helped by better communication and attitudes.

## **Notes / Questions**

Healthwatch provided Practice Manager information or LICB

## **Formal Complaint**

## 1. Case 14917 (17-06-2025)

**PCN:** Four Counties

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

I filled out an on line complaint form late April 2025 the Stamford surgery website but did not get any reply and still haven't. I then sent the same complaint to the complaints manager at Lakeside (also known as Sheepmarket and their new name Stamford Surgery). They can't even pick a name and stick with it! So I emailed this complaint a couple of weeks later in mid May 2025 and then received an email acknowledging my complaint and that they had 28 days to reply. I then went into the surgery in June to enquire when I would receive a response but no one could tell me.

When the 28 days was up I went back again and on the 2nd time Friday mid June the receptionist said I should receive an email or letter soon! The surgery can't even comply with its own policy either it has 28 days to respond or it doesn't They said they needed a doctors input regarding my complaint? I also just wanted another doctors letter free of charge with the updated reasons that my dependent maybe suffering fatigue (as I had already paid £55 for a doctors letter but then the doctors found out my dependent was deficient in B12 vitamin D and now also B6 and I wanted this included). So please explain the policy or procedure if a doctors has 28 days to respond to a complaint.

Also sending in complaints in a box like this to me is an extremely bad format. Especially as I can't see or get a copy of what I'm writing which is exactly the same format as my original complaint to doctors.

## **Notes / Questions**

Healthwatch provided information on complaints; ICB & CQC also provided.

## Compliment

1. Case 14922 (17-06-2025)

**PCN:** K2 Healthcare Grantham and Rural **Providers:** St Johns Medical Centre

St John's Medical centre in Grantham has been my NHS access point for nine years. It has always treated me with respect, efficiency and best of all KINDNESS. The reception staff are consistently unflustered, the practitioners listen to me. What I see is their ongoing struggle to incorporate new demands with increasing patient numbers. Their ability to access appropriate resources in a timely fashion frustrates them and then patients start complaining. This creates a tough working environment.

## West Lindsey District Council x 3

• 3 x General Comment

## **General Comment**

#### 1. Case 14919 (17-06-2025)

PCN: Trent

**Providers:** Cleveland Surgery

I have this morning had to send this message, using AskMyGP as the only means of contacting the surgery other than waiting in lengthy phone queues (which presupposes patients have nothing better to do, or are not urgent)

In late May I received an email telling me my triglyceride levels were elevated and I needed a repeat test. After some difficulty getting through I finally made an appointment for Mid June. Late May I received an email, thanking me for booking my appointment and asking me to fill in a form for my height and weight. I thought this a bit odd for a blood test and tried to get in touch with the surgery and failed.

A few days later in early June, before I had managed to contact the surgery about the height and weight thing, I received an email asking me to book an appointment for my annual review. The following day I received an email with the review questionnaire which I completed.

I managed to phone the surgery at 9:06 on that day to try and sort out any confusion between my already booked blood test and the annual review for which I did not as yet have a booked appointment. The person I spoke to said they would look into it and get back to me. That is the last I heard

Yesterday I received another email thanking me for booking my appointment and saying I needed to bring in a urine sample. ???

## To summarise:

- I have an appointment for a blood test in two days time
- I do not have an appointment for my annual review
- The surgery has not contacted me as promised to sort out the confusion.

I know they will say they are busy, or overwhelmed (odd when the surgery is always empty), but if they are, then the Welby group, or the Trust, should fix it. When the population of Gainsborough was half what it is now, our GP services had four times as many "resident" GPs. Now we have no resident GPs, they are bused in on a daily basis, never seeing the same GP twice in a row. With the monumental building programs going on in and around Gainsborough, things can only get worse.

I can make a noise, but what about the thousands of old folk who cant make a noise and don't have anyone to make a noise for them.

Our health service in this town is rapidly becoming a disgrace. We were so much better served in the 90s

## 2. Case 14945 (23-06-2025)

PCN: Trent

**Providers:** Cleveland Surgery

For Information: Lincolnshire Integrated Care Services (ICS/ICB)

There is something deeply wrong with patient care at Cleveland. I had to take my grown-up grandchild to hospital because of constantly low blood sugar readings but still they are being fobbed off by Cleveland because they don't have diabetes, they have quite the opposite of hyperinsulinemia. No treatment plan in place. Feels they have just ignored all grandchild's efforts to be taken seriously. They also are neuro-divergent and feel there is no support for such patients with reasonable adjustments.

## **Notes / Questions**

Healthwatch provided ICB information if they feel unable to go to the practice.

## 3. Case 14943 (23-06-2025)

PCN: Imp

**Providers:** The Willingham Surgery

Willingham by stow

Told I needed an annual review. It was a month early but went for blood test. Told only checking cholesterol nothing else. How can this be an annual review of my whole health picture.

Result from blood test was I needed a telephone call with a doctor I have never seen, who does not know me but to tell me to take statins? If the GP is being paid to carry out annual reviews then this to me is a failure as on the basis of one blood test and an unknown doctor how will this benefit me and the NHS? I refused the telephone call and the statins as I feel this is unsatisfactory and bad for my health.

## **Notes / Questions**

Healthwatch provided Practice Manager and ICB feedback information

#### All Areas x 1

• 1 x Informal Complaint

## **Informal Complaint**

1. Case 14855 (03-06-2025)

**Providers:** Lincolnshire Integrated Care Services (ICS/ICB)

Nothing went well . I accompanied an 86 year old person to see their GP. They are on special measures for over prescribing Opioids. There answer stop prescribing straight away. This person had been in Oramorph for 7 years . Just stopped Oramorph completely. Changed them from being independent to needing help, suffering anxiety and their blood pressure soring. This person has numerous health issues is in constant pain and has an 89 year old spouse dying from cancer. The Dr didn't care. They just smirked. Said they would allow the Oramorph for this next month and then review it

Messes about with their medication online and person has to wait till the last minute until they know if they can have it again. Anxiety through the roof. Paramedics called daily due to blood pressure being extremely elevated but after sitting 7 hours in an ambulance at Peterborough Hospital they refuse to go again.

Before interaction from the GP and their Oramorph being stopped they were able to function . No care for the spouse. No palliative care given .

The person is terrified they will find them dead . Nothing explained nothing offered .

CQC have been notified about the GP practice but have not replied. Safeguarding put in but the person is scared they will be struck off from the GP so doesn't action them when they ring . This is only two people. There are 100s affected but the GP doesn't care .

Plus getting past the receptionist who cut you off , lie to you ( proven ) and demand to know what your health problem is . Why do we have GDPR ? Why should we tell unqualified receptionist our business . They don't just want a general idea either they want to know the lot .

#### **Notes / Questions**

Unfortunatley no patient details nor which practice this relates to has been provided.

## Out of Area x 3

- 2 x General Comment
- 1 x Informal Complaint

## **General Comment**

1. Case 14871 (09-06-2025) **Providers:** Out of area

I have been on a repeat prescription of Oramorph for a couple of years, the dose I have been using was 10mls 3 times a day. I've had a letter from my GP surgery saying that if I continue to use this dose and ask for it when im going to run out then I will have to find a new GP surgery. This is after I asked if my prescription could be brought in line so I didn't run out. We have to fill in forms at the Doctors for this. The GP was aware of my dose as I have always disclosed this. I have a letter from the practice manager now saying if I keep asking for medication they will remove me from their practice. I find this very upsetting and alarming at the same time as I thought they had a duty of care to patients, so they should be helping me find a suitable alternative medication and providing support not just throwing me out of the practice with no help whatsoever. Im now in a situation where I feel scared to ask for help.

## Notes / Questions

Submission forwarded to Healthwatch North Lincolnshire.

2. Case 14868 (10-06-2025)

Providers: Out of area

There is no access to a doctor. Their records are incomplete, they have no records of me being diabetic in remission, there's no records of me having malaria. These were passed from my previous doctor.

## **Notes / Questions**

Comments from sender were forwarded to Healthwatch North East Lincolnshire on 10/06/2025 as this patient/GP Surgery was not in our area.

## **Informal Complaint**

## 1. Case 14953 (30-06-2025)

Providers: Out of area

My complaint is with a GP surgery I was a patient at during Sept 2024 - Feb 2025, called Southwell Medical Centre. The nurse who my complaint is with is an Advanced Practitioner.

I believe I first saw them around October 2024, I am now diagnosed with IBD with highly suspected Crohn's - although back then they were still undergoing diagnostics to rule out the most obvious causes. I had blood tests which ruled out coeliac and told them I was anaemic with raised ESR. Stool samples came back negative for bacteria/parasites and elevated FCP at 500. If you are not aware, 5-50 is normal. At 500, my levels were high and required urgent investigation. I'd also lost about 11kg at this point which is typical of unmanaged/untreated Crohn's. Not only did they not refer me to hospital at this point, they attempted to tell me that "weight fluctuation is normal". When I tried to tell them my levels being 500 was worrying they said "don't go all microbiologist on me" (at the time I was at uni doing a degree in zoology but thinking of switching to microbiology for context). They wanted to redo the tests. As they were a part-time nurse, it took me 3-4 attempts to book an appointment with them as they were usually fully booked so it delayed my retesting by weeks.

The Nurse Practitioner also performed a rectal exam on me, which beforehand they told me they "didn't do this very often" the exam was painful and they told me it shouldn't be. The following 2 weeks were immense pain as the physical trauma they'd caused to my anus caused me to develop large haemorrhoids which burst and bled. I could barely walk without being in pain and had to wipe using soaked toilet paper, I used to cry on the toilet in pain until they healed.

My re-tests of stool samples showed my FCP was now 3,000. The Nurse looked at me and asked how I felt. I was now critically ill compared to October. They referred me to hospital. My consultant gastroenterologist confirmed my files had not been sent over, so I had to go over my symptoms again with them.

Overall I feel incredibly angry at how I was treated. If I had been more ill when I saw the Nurse Practitioner originally, their delay of months to refer me to hospital I could've died. I don't know who I'm meant to go to as I'm usually very respectful of doctors and I comply with what they say but this has gone way too far. I would really like some help/guidance/advice on what to do with all this information.

## **Notes / Questions**

Healthwatch, although this is out of area, provided Local ICB; Practice Manager and CQC information. Would also forward to Nottingham Healthwatch

## **Hospital Services**

# Area

# Boston District Council x

- 1 x General Comment
- 1 x Informal Complaint
- 2 x Compliment

## Case Details

## **General Comment**

1. Case 14884 (13-06-2025)

PCN: Solas

**Providers:** Pilgrim Hospital

My partner has Alzheimer's and is in hospital due to a fall, breaking a hip, which has now healed. .....but they have hypotension therefore have been in a bed in hospital for 3 months. They SHOULD be having physio for rehab, however, unless I turn up and insist they get out of bed and walks a few steps, nothing happens!!! The staff have no idea how to obtain cooperation from a person with this disease when they say "no"......so they walk away! Very difficult and negative experience.

## **Notes / Questions**

Signposted to the Matron of the Ward and PALs at Pilgrim

## **Provider Response**

 $\ensuremath{\mathsf{ULTH}}$  - It is hoped the author contacted PALS and received a satisfactory outcome.

## **Informal Complaint**

1. Case 14929 (18-06-2025)

PCN: Boston

**Providers:** Pilgrim Hospital

In January of this year my elderly parent was admitted to Pilgrim Hospital. They had underlying health conditions particularly relating to their breathing and recurrent chest infections which had led to them being very frail. They also had osteoporosis which caused them lots of bone pain, collapse of the spine, and affected their mobility. They were deaf in both ears and wore hearing aids.

Initially in January they went to A&E with deterioration in condition and being unwell, coughing and breathlessness. They were seen assessed given antibiotics and sent home. Within a week they were back at A&E not any better, getting worse, very short of breath, coughing, coughing up large amounts of mucus, not eating. Following along wait they were seen and admitted to Integrated Assessment Centre. They continued to be very unwell needing high percentages of oxygen via a face mask, which they did not like, Doctors told me that this could not be given via a nasal cannula. Given IV antibiotics and other medication, they had a urinary catheter put in, they were unable to drink or eat unaided.

As a family we were insistent that they needed their hearing aids in as could not hear anything without, when visiting found them without them in and in the bed. Because they had lost so much weight, parent was frail and immobile, unable to move on their own it was at least 48 hours before they were put on a special mattress to prevent bedsores. At times they became very confused and disorientated probably due to the infection.

Medical team discussed with family and partner that they were going to aggressively treat the chest infection/ pneumonia with medication, but due to underlying respiratory condition this may be difficult. RESPECT form was discussed with my relatives partner and myself and a decision was made not to resuscitate them if an emergency arose, and that they may need to withdraw treatment if they did not respond to treatment. I had to make sure and clarify with my relative that they understood.

At this time IAC had given us open visiting as they were so unwell. I was then stopped by a Ward Clerk the next day when my other parent was visiting and told that I could not visit out of visiting times as they were better. I said for the last few days since admission I and their partner had been given open visiting as they were so unwell. I went on to the ward, sadly they died 24 hours later.

This member of staff was rude and unkind at this very distressing time . The rest of the staff on the ward were professional, caring to my relative and family. Within 24 hours Medical staff withdrew treatment as they were not responding, and had multi- organ treatment. That evening their partner had gone home at 7pm, they were notified by telephone at 10pm by medical staff that treatment had been withdrawn. When we got to the hospital at 10pm they had just moved them to Ward 7a for end of life care. My relative had been moved to a noisy 4 bedded ward, where radio/TV was blaring and a patient was very confused and kept calling out. My relative sadly died about 2 hours later.

I cannot fault the staff on Ward 7a who were kind, compassionate and professional. Looking after us and my relative. My question would be why were they moved from IAC? Why was there not another bed available where there was less noise and more privacy and dignity for end of life care of a patient and their relatives?

## Themes

- communication with family and patient especially patient who is deaf without hearing aids.
- attitudes of one member of staff to relative, who had no medical knowledge, this deflects from all the other professional staff we met.
- RESPECT form making sure patient understands implications.
- Lack of equipment air bed for pressure areas.
- Systems in place- end of life patient being moved to a noisy, undignified 4 bedded room 2 hours before they died.

## **Provider Response**

ULTH - IAC Response - This came through as a complaint and currently being answered by the team . Response A&E Matron - Unfortunately, the situation within the hospital was such that there were more patients needing admission into hospital than the number of beds available. With an increased number of patients needing admission into hospital, there is an extra strain on the emergency department because those patients who are waiting for beds remain in the emergency department.

## Compliment

1. Case 14933 (19-06-2025)

PCN: Boston

**Providers:** Lincoln County Hospital

Following being stabilised at Boston while having a STEMI (ST elevation myocardial infarction) heart attack and taken 40 mins by emergency ambulance to Lincoln County Hospital Cardiac Catherterisation Lab. Patient in Cardiac Lab for 2 hours felt that was reassured by a professional team of Medical Staff and Nurses who explained everything and plan of care and treatment while caring out the procedure to unblock cardiac coronary artery stents and give appropriate medication and treatment while monitoring their condition. Went back and to Coronary Care Unit and monitored closely for the next 48 hours and given further treatments . Remained on bedrest .Then moved to Cardiac Short Stay Ward was able to be mobilise as wearing portable ECG . Transferred home withn 72 hours with discharge plan and explanation of medication, cardiac rehabilitation and follow up. All staff were kind and caring and professional.

Spouse would like to thank the very kind and caring Nurse in charge of Coronary Care Unit on the night shift who let me wait on the ward, updated me on the proceedure every 15 mins and progress, answered all my questions, gave and offered me lots of cups of teas and biscuits and let my grown up children who had traveled a long way see their parent. They made a very emotional and worrying time a little easier.

## **Provider Response**

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

2. Case 14864 (09-06-2025)

PCN: Boston

**Providers:** Pilgrim Hospital

Patient had to go to A&E at Pilgrim Hospital with a suspected stroke. Patient was admitted to a ward and had been looked after very well by the staff. Stayed in hospital for a few days. Followed up by GP.

## **Provider Response**

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

## East Lindsey District Council x 3

- 1 x General Comment
- 2 x Compliment

## **General Comment**

#### 1. Case 14942 (23-06-2025)

**Providers:** Better Births - Lincolnshire Maternity & Neonatal, Lincoln County Hospital Maternity

I need to feedback about my care but don't feel I can share my details as I am still receiving care and frightened I won't get the care I need.

I have attended Maternity at Lincoln several times now and met some lovely staff and some staff who don't care and definitely don't listen. I have read their information about choice, listening to women but that's far from anything I have experienced. The clinic is not set up for people using the service more for the doctors! I don't know why I have had to go to hospital at times, I have sat there for 4 hours at one point, my appointment lasted 5 mins. Why do we have to go to the clinic when this could have been done over a call?

Has anyone really asked what we want, as it doesn't seem to matter? Why do the Dr's feel it's ok to talk to me like I don't have a brain? We all want to be well and have a healthy baby and would not choose to do any harm so why are we made to feel guilty when asking questions or wanting more information? I have just read about other maternity service where women are not heard, it all very frightening when it should be a wonderful time.

I want to say something but don't feel I could say anything at an appointment I bet I'm not the only one.

#### **Notes / Questions**

No patient details provided - Healthwatch asked Betterbirths for a comment Patient request - Healthwatch please ask people who use this service to say what they think

## **Provider Response**

Please can you let families know that we provide a free independent and confidential service for families to feedback about their maternity and neonatal experiences through the Lincolnshire Maternity and Neonatal programme. There is a lead for this programme and they would be very happy to talk to the person concerned directly or via email and the person's details would not be shared with maternity services. Or they can complete an online survey anonymously.

Here are some details:

#### We'd Love to Hear Your Feedback!

Have you or your partner had a baby in Lincolnshire? Then we'd really value your thoughts about your experience of Lincolnshire Maternity and Neonatal services.

Your feedback helps us understand what's working well and where we can improve.

We offer an **independent confidential service**, so even if you choose to share your contact details, they will **not be passed on to NHS services**.

You can share your feedback in one of two ways:

- 1. Complete our anonymous online survey <u>Give your feedback | Better Births Lincs</u>
- 2. Email us directly at <u>licb.mnvp@nhs.net</u>

Thank you for helping us make maternity and neonatal care better for families across Lincolnshire.

## Compliment

1. Case 14865 (09-06-2025)

PCN: First Coastal

**Providers:** Pilgrim Hospital

My dependent is in their late 20s and is severely physically disabled and has some mental health issues. Does not communicate very easily with people and needs time to form their answers. They recently felt very unwell at their day centre and managed to fall out of their wheelchair. The staff suspected that they may have broken their arm / wrist after having a seizure.

They called me at home and I met my dependent at the A&E department at Pilgrim Hospital (they had called for an ambulance to take them to the hospital). They had to wait about 2 hours for the ambulance to arrive, was assessed and taken to the hospital for further treatment. Had x-rays and it was confirmed that they had broken their wrist. Transport was arranged to get them home as I am not driving at the moment. My friend waited with me and drove me home.

Although very busy in the A&E department, the nurse that was looking after my dependent was very kind and did their best to communicate with them in simple terms.

Their arm was put in plaster and we were given an appointment for the fracture clinic for a few days later. As I don't drive at the moment due to recovering from an operation, transport had been arranged for us to go to the hospital for this appointment. While we were waiting my dependent got very anxious by the noise and number of people in the waiting area but the nurse at the clinic found us a quieter place to wait which helped to calm them down until the doctor could see them. We had to wait about 3 hours after the appointment for transport to bring them home in their wheelchair.

#### **Provider Response**

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

2. Case 14898 (11-06-2025)

**PCN:** First Coastal

**Providers:** United Lincolnshire Teaching Hospitals NHS Trust (ULTH) / ULHT

Orthopaedics

I have injections into my shoulder 3 times a year in Louth Hospital, I drive myself. Very happy with the service I get. Some people are too quick to complain, but do not like to compliment when things go well.

## **Provider Response**

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

#### Lincoln City District Council x 4

- 1 x General Comment
- 1 x Informal Complaint
- 2 x Compliment

## **General Comment**

1. Case 14906 (16-06-2025)

PCN: Imp

**Providers:** Lincoln County Hospital

Diagnosed with heart failure after blood clots crushed one of the left ventricals. Poor after care and lack of, conflicting information between hospital and GP Surgery.

A lapse of a year with no check up or follow ups, discharged from clinic at the hospital only to be told I still needed to be under their care due to heart function decreasing. I feel clearer communication between departments and patients is strongly needed.

The emergency care from ambulance and A&E care saved my life and got excellent care and support from them. Unfortunately this could all have been avoided as caused by a PE (Pulmonary Embolism) in the lungs, initially after I broke my foot, put in pot cast and no blood thinners given to help me as a plus size person with reduced movement.

## **Notes / Questions**

## No patient details shared

## **Provider Response**

ULTH - Response from Clinical Services Manager - I am sorry that your after care with cardiology is poor. We do have backlogs in our clinics for follow ups but are working hard to overcome these. If patient details had been shared this would have been investigated as to dates/delays that have affected their care.

Response from ED - Thank you for this positive feedback in relation to the emergency department.

## **Informal Complaint**

### 1. Case 14924 (17-06-2025)

**Providers:** Queen's Medical Centre (Nottingham)

Patient a few years ago had problems walking. Informed it was neck and thoracic spine problems. Went private at Leeds Nuffield, who were brilliant. They did 2 operations in one, on neck and spine and patient had a good recovery.

One Health under the NHS patient went on to have 2 further lumbar spine operations, thought everything was going ok afterwards, then hit a brick wall and things started to get worse again. Stated they would refer for urgent MRI and then to local Hospital.

When in Nottingham this May, patient didn't feel right, felt they would collapse and went to A&E at Queens Medical Centre where they contacted the spinal on- call surgeon, seemed none too pleased about being called out..... Adamant they would not admit the patient, but in the end they had to.

Next day had a full body MRI then the following day discharged. Patient was then seen in Leeds who looked at the MRI done in Nottingham and stated the patient required spinal cord & thoracic compression surgery again. End of May 25 patient was in having this done and discharged a few days later.

Would like to know, why QMC did not do anything whilst they were in there.

## **Notes / Questions**

Healthwatch provided information on Complaints process and contact details, plus PHSO information

## Compliment

1. Case 14916 (16-06-2025)

**Providers:** Lincoln County Hospital

Diabetic Clinic

A new referral and first appointment. The nurse listened carefully and explained clearly how to use the equipment. When blood sugar reader broken down, replaced quickly and efficiently.

## **Provider Response**

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

2. Case 14949 (26-06-2025)

**Providers:** Lincoln County Hospital

I was treated with stent in my heart due to an heart attack at the beginning of this week. My overall experience for receiving treatment was exceptional. Entire team at CCU (Coronary Care Unit) over past couple of nights were so helpful, calm and caring that made me feel home. I came from Australia and this happened to me 2nd day after my landing in UK.

## **Notes / Questions**

No patient contact details provided.

## **Provider Response**

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

## North Kesteven District Council x 1

• 1 x General Comment

## **General Comment**

1. Case 14950 (26-06-2025)

PCN: APEX

**Providers:** Lincoln County Hospital

I have been referred to Rheumatology at Lincoln County Hospital by my GP as I need infusion for osteoporosis. I rang after 3 months to see where I was on waiting list. Was told they are only now making appointments for people on list from July 2024. So I have at least another 11 months wait. Difficult to access the help and support needed. Negative experience of care.

## **Provider Response**

ULTH - Response from Clinical Services Manager - We are sorry that you have had a poor experience of the Rheumatology Service at ULTH. It is difficult to provide further comment without additional information. It would be appreciated if you would contact PALS (Patient Advisory Liaison Service) for further investigation ulth.pals@nhs.net.

# South Kesteven District Council x 2

- 1 x General Comment
- 1 x Informal Complaint

## General Comment

#### 1. Case 14936 (20-06-2025)

Providers: United Lincolnshire Teaching Hospitals NHS Trust (ULTH) / ULHT

After a successful cancer operation last year. Last February I was told I need a liver CT scan. I contacted Grantham Hospital at the end of March and I was told the waiting list is 7 months. Difficult to access the help and support needed. Experience of care was negative.

#### **Notes / Questions**

Signposted to GP and oncologist, if no resolution PALs or LICB feedback.

## **Provider Response**

ULTH - Please advise the author to contact PALS for this to directed to the appropriate team for investigation.

## **Informal Complaint**

1. Case 14948 (25-06-2025)

**PCN:** K2 Healthcare Grantham and Rural **Providers:** Lincoln County Hospital

Friend of a couple who is a member of local patient participation group at local surgery rang Healthwatch very angry about their recent experience at Lincoln County Hospital.

Discussed experience with spouse of patient who are both shocked and very worried about it. Patient had a recent admission to A&E at Lincoln County Hospital with a fall, has capacity, did stay in for a few days and recovered. No life limiting conditions. Concerned that RESPECT form was discussed with both of them and both stated that they did not want one completing or discussing.

Patient had a recent admission this week following having pneumonia, which they have had before and recovered from. The RESPECT form was brought up again by a Doctor on the ward. Both patient and spouse again said that they did not want a RESPECT form completing or discussing. On coming home they have found on the discharge information that a RESPECT form has been completed by a Consultant without their consent and they are very distressed and shocked and worried that this is on medical records.

#### **Notes / Questions**

Signposted to PALs in the first instance to make a complaint and direct to Clinical Teams involved.

## **Provider Response**

ULTH - It is hoped the author contacted PALS and received a satisfactory outcome.

#### West Lindsey District Council x 1

• 1 x General Comment

## **General Comment**

1. Case 14926 (18-06-2025)

**Providers:** Lincoln County Hospital

Friend/carer of individual discussed recent experiences of taking friend to A&E at Lincoln County Hospital twice 3 months ago and 6 weeks ago. First time took friend to A&E as unwell, they have dementia , they stayed with them for a long period of time before they were seen, advised that friend would be admitted, so they they went home to get nightclothes, belongings and took them back to friend. As it was very late they went home to get some sleep. Called by A&E after midnight woken and asked where their friend was as they could not find them, they were surprised and shocked as they had left them in A&E and were concerned as they have dementia. Following this incident the individual wrote to PALS not to make a complaint but to share an experience that they were concerned about. Response from PALs was that there had been no record of documented in medical notes. No information of this shared in Discharge letter.

Second time the individual took the same friend to A&E was 6 weeks ago as unwell again. Had a long wait in A&E to be assessed and have bloods done. Eventually decided that they would be allowed to go home. Following having a cup of tea friend fainted and fell was taken to resus area. Did eventually go home. No mention of faint or fall in Discharge letter. Following contacting PALs no mention of faint or fall in medical records.

## Themes

- Communication and documentation of events in hospital that could impact further treatment
- Patient had dementia so worrying that did not know where they were
- Individual did not want to make a complaint but wanted to share this negative experience felt that PALs saw it as a complaint

## **Notes / Questions**

We have heard previously that a Dementia patient was lost in the hospital - what reassurances are in place to ensure the safety of such patients?

#### All Areas x 1

• 1 x Formal Complaint

## **Formal Complaint**

1. Case 14937 (20-06-2025)

Providers: United Lincolnshire Teaching Hospitals NHS Trust (ULTH) / ULHT

Claim against ULHT. In December 2022 I had an operation which I'd had done 6 times previously and woke up delayed recovery after a General Anaesthetic... and with limb weakness and have had weakness since. Delayed referrals and treatment ... I would like to take a claim forward against the NHS as my life has changed. I have my hospital records and scans.

## **Notes / Questions**

Signposted what Healthwatch can and cannot do, NHS advocacy, PALS, LICB, CQC,PHSO

## **Provider Response**

ULTH - It is hoped the author contacted areas signposted and received a satisfactory outcome.

## Out of Area x 2

- 1 x General Comment
- 1 x Informal Complaint

#### **General Comment**

1. Case 14852 (02-06-2025)

Providers: Out of area

Breast Cancer Screening - June 2024 - caravan - Freshney Green Medical Centre carpark, Grimsby I went as usual when called: June 2024 - caravan - Freshney Green Medical Centre carpark, Grimsby Gained a not very good initial impression by having to listen to the youngish radiographer having a personal phone call whilst sat at the 'reception desk'. They obviously forgot that patient sitting waiting behind a curtain can still hear things.

This didn't help when I realised that the same person was going to be doing my mammogram. They didn't instil confidence when they kept manoeuvring me, to the point that I actually lost balance. That has never before happened in the almost 20yrs that I've been having mammograms.

This meant that when I got a letter asking me to go to Castle Hill for further tests, I presumed that it was because I'd moved or breathed at the wrong time, and so was totally unprepared for the outcome of that appointment.

## **Notes / Questions**

Information sent to relevant Healthwatch

## **Informal Complaint**

1. Case 14869 (09-06-2025)

Providers: Out of area

Patient was diagnosed with breast cancer and told the consultant surgeon on 3 separate occasions that they did not want chemotherapy and only wanted the tumour surgically removed, then wanted radiotherapy on the lymph nodes under their arm. Was told that they did not do this and the patient would have to have surgery on the lymph nodes as well. Patient told the consultant surgeon before surgery that they would only give permission for up to 10 nodes to be removed and asked that they take an extra wide margin around the tumour so there would be clear margins. After surgery the surgeon said that they had removed 28 lymph nodes and had not taken an extra wide margin around the tumour. 2 weeks later the results showed cancer in only 6 removed nodes and that there were still cancerous cells in the removed tumour margin so further surgery was needed. The NHS is supposed to allow patients to choose the treatment they want and allow them to refuse any they don't want but this consultant surgeon completely ignored the patient's wishes and did as they chose and not what the patient had requested. Hospitals should not be allowed to override patient's wishes. There should be someone to help cancer patients before surgery to make sure the doctors do not ride roughshod over their wishes. The cancer nurse has been no help.

As these concerns/comments were from an out of area patient this email was forwarded to Healthwatch North East Lincolnshire

## Mental Health and Learning Disabilites

Area	Case Details
Lincoln City District Council x 1	General Comment
1 x General Comment	

1. Case 14913 (16-06-2025)

Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health)

I have a load of mental health issues and when you have suicidal thoughts and they say to ring the crisis team, you can't be helped or they give you a list of numbers that don't help.

I haven't had the help from these, I have been taken off the crisis team and I have voices in my head, so I would like to see more support from the crisis team.

Notes / Questions

Healthwatch provided PALs information

## **Patient Transport**

Area	Case Details
East Lindsey District Council x 1  • 1 x General Comment	General Comment  1. Case 14896 (11-06-2025)  PCN: First Coastal  Providers: Non-Emergency Hospital Transport (NEPTS) EMAS  Elderly patient needed an x-ray at Pilgrim Hospital, as they do not drive and no family or friends available, Non emergency Transport was arranged. Patient found this an awful trip, went round the county and took over 10 hours for a 10 minute X-ray appointment. Has made the decision not to use this again, if the surgery want them to have anything else, they will refuse to go via this route.  Notes / Questions  Healthwatch provided local volunteer car scheme information.
Out of Area x 1  • 1 x Signposting	Signposting  1. Case 14873 (11-06-2025)  Providers: For Information: Out of area Individual contacted Healthwatch wanting contact information for Non Emergency Patient Transport as needing transport from Grimsby to Sheffield for a hospital appointment has been eligible for this transport previously.  Notes / Questions Signposted to Healthwatch North East Lincolnshire as lives in their area.

## **Social Care Services**

Area	Case Details
East Lindsey District Council x 1  1 x Signposting	Signposting  1. Case 14920 (17-06-2025) PCN: First Coastal Providers: Lincolnshire County Council - Adult Social Care Patient looking for a social worker and how to get one. Feels they need some support. Notes / Questions Healthwatch provided information on Adult Social Care needs assessment and provided contact details
South Kesteven District Council x 1  • 1 x General Comment	General Comment  1. Case 14908 (16-06-2025)  Providers: Lincolnshire County Council - Adult Social Care  Grandparent, 90 with dementia, resided in care home, left soiled, bedding soiled. Family felt they were neglected, made a formal complaint direct to the care home.  Notes / Questions  No patient details shared, nor care home

Signposting  1. Case 14925 (18-06-2025)  Providers: Lincolnshire Integrated Care Services (ICS/ICB)  Person requesting information on Dementia support, via carers survey.  Notes / Questions  Healthwatch provided information on - Memory Clinics; HAY; I forget service; Dementia friendly
communities; dementia support service and Altzhiemers Society.  General Comment  1. Case 14888 (13-06-2025)

2. Case 14866 (09-06-2025)

Providers: United Lincolnshire Teaching Hospitals NHS Trust (ULTH) / ULHT

In early June a patient story was shared at the June Patient Experience and Involvement Group meeting last week (ULTH / LCHS) with regard to a patient who was treated at Lincoln County Hospital. This patient was a patient who has for the last 16 years lived in Spain with their partner. Is a retired lecturer and is estranged from their family.

Following a fall and not recovering very well in Spain, close relative arranged for them to come back to the UK to be checked out. The patient spent 152 days in the hospital. There were 3 failed attempts to get them "home" to Spain which is where the patient wanted to be as they did not want to be placed in a care home here in UK away from their partner in Spain. Having been treated here and being assessed to be fit to be discharged the MDT thought that going back to Spain was not the right place for them. Their partner was being treated in Spain for falls induced by alcohol and it was felt that is was not the best place for them. However, the patient insisted that they wanted to go home to Spain.

Following a lot of interventions by the staff here in Lincoln, including Adult Social Care, Safeguarding, the Clinical Teams, Occupational Therapists etc and the use of interpreters contacting Spain. The patient was finally on their way home accompanied by 2 nurses and it had been arranged a private company in Spain would provide additional support in the home. Patient has since been in touch with the ward here in UK and they are doing well.

#### Questions:

- **1**. As the patient lived in Spain for the last 16 years, were they actually entitled to NHS Treatment here in the UK?
- 2. If they were not entitled to NHS Treatment, staying in the hospital for 152 days at an average cost of £345 per day for the bed, amounts to £52,440. Also the additional costs of all the agencies involved, flights and the cost of sending 2 nurses across to Spain with the patient to hand over to the carers in Spain.
- **3**. If patient was not entitled to NHS Treatment, has the Trust started the process of getting the costs of the hospital stay back from either the patient or their medical insurance?
- **4.** Is there an agreement with Spain for retired UK Residents who no longer live in UK but their permanent address is now in Spain to be covered via a reciprocal agreement for medical care?

#### **Notes / Questions**

## Please see questions raised

## **Provider Response**

ULTH - Response from Patient Experience Manager - Please thank the author for their questions and to confirm that the patient was entitled to full NHS care. Our Trust overseas team are diligent at assessing each case and on this occasion this patient was fully entitled to all the care they received. There is a much longer answer regarding the process we go through to carefully assess each case as we are committed to spending public funding well and on this occasion I can confidently say due diligence was used to assess this patients eligibility for NHS care. I hope the author is reassured by this information.