

Healthwatch Lincolnshire

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

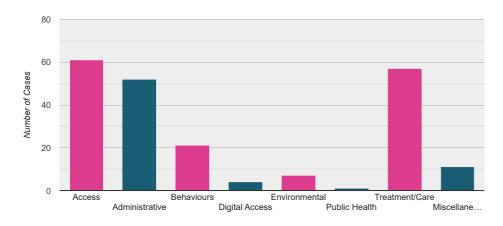
Healthwatch Lincolnshire Patient experiences: July 2025

Statistics

Total cases: 100

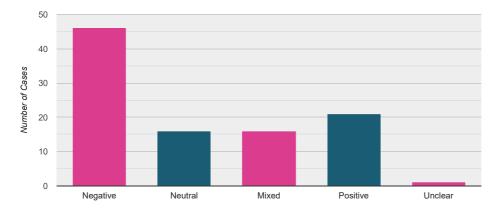
Cases responded to within 3 days: 100 out of 100 (100%)

Theme Areas

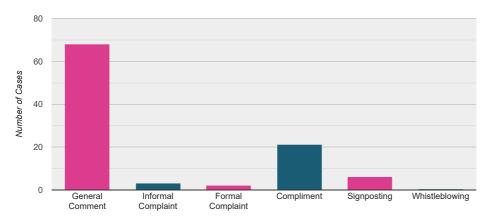


Theme Areas	Cases
Access	61
Administrative	52
Behaviours	21
Digital Access	4
Environmental	7
Public Health	1
Treatment/Care	57
Miscellaneous	11

Sentiments

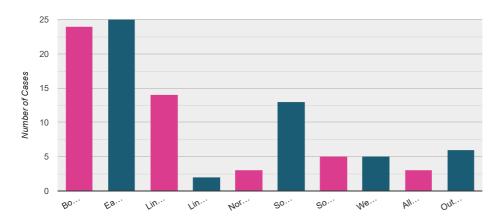


Sentiments	Cases
Negative	46
Neutral	16
Mixed	16
Positive	21
Unclear	1



Case Types	Cases
General Comment	68
Informal Complaint	3
Formal Complaint	2
Compliment	21
Signposting	6
Whistleblowing	0

Areas



Areas	Cases
Boston District Council	24
East Lindsey District Council	25
Lincoln City District Council	14
Lincolnshire Integrated Care Services (ICS/ICB)	2
North Kesteven District Council	3
South Holland District Council	13
South Kesteven District Council	5
West Lindsey District Council	5
All Areas	3
Out of Area	6

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Cases

Multiple Services

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

Area Case Details **East Lindsey District General Comment** Council x 9 1. Case 15036 (24-07-2025) • 7 x General Comment PCN: First Coastal • 1 x Compliment Providers: Beacon Medical Practice, Lincolnshire Community Health Services NHS Trust (LCHS) • 1 x Signposting Patient has concerns with GP Practice: Beacon Medical Centre, Skegness Patient is living with diabetes. From Feb to June 2025, the patient experienced severe dizzy spells between 5-6 per day. Could not get an appointment at the surgery so following the advice of the local pharmacist went to the local hospital, Skegness UTC (urgent Treatment Centre) and after a few hours there, they were sent to Pilgrim Hospital A&E Department. This happened on 2 occasions and on the second visit the doctor in A&E said that the patient should be followed up by GP. No follow up from the GP Practice. Patient rang and had a telephone consultation with a nurse who prescribed RYBELSUS (a slimming drug). Patient lost over 2 stone was very poorly whilst on the drug and thought that the end was near. Getting a face to face appointment with a Dr at the practice, the drug was removed and the patient was told by the Dr that they should not have been prescribed the drug in the first place. Has lived with diabetes for about 10 years and does not have regular diabetic check ups. They recently had their annual health check which was very thorough including a medication review. Patient has been to see the CAB about this and was advised by them to report this to Healthwatch. Notes / Questions Signposted the patient to the Practice Manager **Provider Response** UTC - Sent to relevant colleagues for their information. 2. Case 14972 (09-07-2025) PCN: Solas Providers: Child and Adolescent Mental Health (CAMHS) LPFT For Information: The Surgery Stickney Parent of 15 year old child, has diagnosis of ADHD, and not yet diagnosed autism. Suffers with social anxiety and is being home schooled. Child has lost confidence due to being bullied previously in the school environment. Struggles with all aspects of life and is under Consultant in paediatrics at Pilgrim Hospital. Doesn't go out on their own. Early help worker was mentioned, but unfortunately this was not funded so could not go ahead. Also mentioned about other child who lives with partner and suffering from anxiety and depression. Notes / Questions Healthwatch provided Social Prescribers; H.A.Y; connect to support for activities etc and Talking therapy information for older child

3. Case 15004 (14-07-2025)

PCN: First Coastal

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

Patient contacted Healthwatch as they are at their wits end are trying to locate the community Occupational Therapist who are due to come to their home on 21 July, in early afternoon, has been given an emergency appointment at Skegness Hospital for a scan and needs to change the date or time of the visit.

The OT have been previously and are attending again with some other equipment or looking at equipment. Named person was one, but the second time it was 2 other people.

Has tried several places and cannot find who they are or where they are from. No contact details have been left for the patient, no leaflet left and when the patient has been contacted it has always been via a withheld number.

Notes / Questions

At patients request Healthwatch made contact with Adult Social Care Team to see if this appointment was with them.

Provider Response

Is with ASC Team OT, however not been allocated as yet, informed the person that appointment needs to be changed and to contact the patient direct, also if a direct contact number could be provided when they make contact. In the meantime ASC number provided in case it was needed.

Patient update - all sorted Julie, thank you sooooo much x Received a call and has been provided with a contact number going forward

4. Case 15034 (24-07-2025)

PCN: East Lindsey

Providers: The Caistor Health Centre

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

Chronic pain, complex spinal history including fractured thoracic spine and anterior fixation. Spinal stenosis - lumbar spine.

Referred to spinal surgeon - saw physio; referred again to spinal surgeon - saw physio.

Arranged private appointment with spinal surgeon and they took my case to Regional Complex Spine MDT. Unanimous advice that I needed PLIF (posterior lumbar interbody fusion). Had to pay privately because pain making life unbearable. Cost me £27,000.

The problem seems to be a contract negotiated by local commissioning group that only allows GPs to refer to a MSK Team or One Health rather than a specialist at a local hospital. Not sure what happened to patient choice.

Notes / Questions

No patient details provided

5. Case 14960 (02-07-2025)

PCN: First Coastal

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

For Information: The Surgery Stickney

Patient expressed that since moving to Lincolnshire and registering with the Stickney Medical Centre they and their family have had a very good service from the practice overall.

Patient has a parent who is 72 has moved into Lincolnshire in the last 8 months to be nearer to the family. They live with the family in a "granny annexe" and living fairly independently. However, the family has noticed a change in the parent's outlook over the last few months and they have noticed a lot of low mood / depression and feeling that life is not worth living etc.

The relative was able to persuade the parent to go to the doctor who referred parent to Talking Therapy had an over the phone assessment was completed on them and after the 1-10 questions deemed that the parent did not meet the criteria for any mental health support.

The relative and family are worried about the parent who was always so full of life and energy. They have taken into account that the person had a big change moving to Lincolnshire but not sure what they can do to help and support them. They are worried that they person could develop more serious issues such as depression etc and what to prevent this from happening. They feel that the GP practice has provided medication for depression, however family are not sure what to do for the best.

Notes / Questions

Information provided to the relative a number of contacts such as Social Prescibers, Carers First, Wellbeing Lincs, Connect to Support, counselling services through St Barnabas and Butterfly Hospice.

6. Case 15045 (24-07-2025)

PCN: Boston

Providers: Parkside Surgery

Patient is waiting for a hip replacement and is waiting to be referred to the consultant at the Lincolnshire Health Trust. Patient is receiving 3 monthly injections via the GP surgery (Parkside). GP informed them that they will not be referred until they have had their third injection. Patient has asked for a change in pain relief which has been changed to paracetamol and codeine. Has made some difference but still not enough to be almost pain free. The level of pain is having a direct impact on their level of social and employment interaction.

Patient has been informed that their referral to the acute hospital will take until at least January 2026. However, if they wanted to pay £16,000 they could have it done tomorrow. Patient is not able to go privately to have it done.

Notes / Questions

No patient details provided

7. Case 14959 (02-07-2025)

Providers: The New Coningsby Surgery, United Lincolnshire Teaching Hospitals NHS Trust (ULTH) /

Patient was referred to the Pain Management service in December 2024 and still is waiting to hear from them in-spite of chasing by themselves and their GP.

The excuse that the patient has been given for not being seen yet by the Pain Management is due to "lack of staff".

All their hospital results are not being sent across to the GP and when the letters are being sent they are usually more than 2 months old.

Patient had a knee replacement at Grantham Hospital in 2024 which went badly wrong. Trust has denied all knowledge of anything not being done wrong and the complaint that they had made. No correspondence has been shared with patient. The patient is in a lot of pain and now has a very deformed leg having an impact on their daily life and reducing their mobility, activities and quality of life. This in turn is effecting their wellbeing overall.

Patient would like some answers. They have requested a second opinion which has been sent through for them to attend the Pilgrim Hospital in the next few weeks. No physio was given after the operation and no support from the Trust. The patient paid privately for support for 20 weeks which helped but was informed that they should have had intervention long before they were seen there. It has been implied that they may have to have another operation but the success rate is very low.

Provider Response

Please thank the author for providing their feedback and request contact to PALS for further investigation.

Compliment

1. Case 15007 (14-07-2025)

PCN: First Coastal

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Patient responded to the NHS Blood Donor recent call out to give blood. It had been a number of years since they had done so and having had a relative recently needing a blood transfusion felt that they might be able to help.

The process overall was fairly straightforward and they registered online, completed the form and was given an appropriate appointment time of their choice at their nearest location. A few days later they had a phone call from the NHS Blood transfusion with regard to more information required and clarification of some of the information that the patient had shared. This was recorded and the patient waited for their appointment which would be in a few weeks time. A few days later another person from the NHS Blood transfusion service made contact with them and went through the information again. On the day of the appointment the nurse again went through the same information with the patient even though the information had not changed between any of the conversations.

They first conversation flagged up that the patient had a heart murmur which the patient was not aware of, has had no symptoms and did not know that they had this. The patient was made aware that it was on their medical records since they were a teenager and they are now in their 60s. Patient had iron content tested and they were successful in donating blood. The patient also got informed that they would be emailed when their donation had been used at which hospital. Patient was impressed that the system was checking out information provided by the patient and these checks were being done. It has changed significantly since they last gave blood a number of years ago.

Notes / Questions

No patient details shared

Signposting

1. Case 14970 (09-07-2025)

Providers: Child and Adolescent Mental Health (CAMHS) LPFT

Young person aged 15, looking for therapy support, suffers with panic attacks/anxiety. Has previously had support a few years ago, but once finished feels they need support again. Prefers to talk to someone outside of friends or family.

Notes / Questions

Healthwatch suggested speaking with their GP and also provided Here4you information and self-referral details.

Lincoln City District Council x 1

1 x General Comment

General Comment

1. Case 15017 (21-07-2025)

PCN: APEX

Providers: Boultham Medical Practice, NHS 111 Service

I called 111 as we can never get in at the Drs. They said they would forward it to our Drs surgery as my child needs to see someone within 2 hrs.

After waiting I called to see what's was happening to be told they ignore the forms sent over as they are booked up and that they don't follow the same protocols as 111 in the surgery and I personally should call 111 and let them know the surgery is fed up of being in that situation.

This is disgraceful.

So I see the system is failing my child age 11. I then called 111 back to inform them to have the phone put down on me I only wanting them referred to another Drs or out of hours.

I will be making a complaint to our local Dr surgery too.

Surely if they take 111 patients they should follow the same protocols.

If anything happens in the meantime to my child I know who is to blame.

South Holland District Council x 4

• 3 x General Comment

• 1 x Compliment

General Comment

1. Case 15039 (24-07-2025)

PCN: South Lincolnshire Rural

Providers: Connect Health Services / Cora Health - Pain Management , The Deepings Practice

I've been waiting for 5 years following failed Back surgery.

I've had to pay for everything myself and been left to manage my own pain.

Just received a copy of a referral letter sent to the same Pain Consultant I was referred to in December 2020 who Lincs CCB (now ICB) wouldn't fund on the NHS. I wonder how long his waiting list is?

I've lost nearly 5 years of my life waiting for someone to look at my back, unable to walk our three dogs who have now all died within months of each other.

There is no continuation of care. Contracted out Pain Clinics are a waste of resources, just in it for the money.

Feeling let down.

Notes / Questions

No patient details provided

2. Case 15040 (24-07-2025)

PCN: South Lincolnshire Rural

Providers: Pilgrim Hospital

For Information: Holbeach Medical Centre

Referred by my GP to see a Rheumatologist in November 2024. My GP considered this an urgent referral.

I have been informed by the hospital that my referral has been downgraded to routine and was told that my appointment will probably be January 2026! a wait of 14 months, if I get seen then.

Notes / Questions

No patient details provided

Provider Response

Response, Clinical Service Manager - Thank you for your feedback. We are actively working to reduce the wait time for an appointment with the Rheumatology Service and have already seen significant improvements, as of today, the wait for a new appointment is around 10 months. If patient details had been provided author would have been requested to contact PALS for investigation.

3. Case 15042 (24-07-2025)

PCN: South Lincolnshire Rural

Providers: Spalding UTC, United Lincolnshire Teaching Hospitals NHS Trust (ULTH) / ULHT **For Information:** The Deepings Practice

Whichever service you use, you do not receive support for multiple long term health conditions or disabilities.

Nobody has ever heard of ME/CFS (Myalgic encephalomyelitis,/ chronic fatigue syndrome). Every department should have The Big Purple Book about ME and read it.

Nobody knows about Fibromyalgia and how it can cause all over body pain.

I've even been asked in Ophthalmology what Sjögren's means. I've been asked if I can transfer from my wheelchair to a small unstable stool on wheels when the eye examination table is adjustable (just inconvenient for the ophthalmologist). I'm made to feel like an inconvenience, just the next on the production line.

Staff need a big reminder every day - ONE DAY THIS COULD BE YOU.

Notes / Questions

No patient details provided

Provider Response

Thank you for taking the time to feedback. We are very sorry to hear about your experience and the lack of understanding you have encountered regarding your conditions as well as the accessibility concerns raised. This is not the standard of care we aim to provide and we sincerely apologise for the distress caused. We will share your concerns with the relevant departments and review staff training needs and opportunities to ensure better awareness of complex long-term conditions and disabilities. Your suggestion regarding the purple book will be considered as part of this. Thank you again for bringing this to our attention."

Compliment

1. Case 15046 (25-07-2025)

PCN: South Lincolnshire Rural
Providers: The Deepings Practice

Found breast lump one day. Saw GP next day. Hospital appointment in 7 days.

Diagnosed within 4 weeks.

Only concern was from diagnosis to operation was 3.5 months. All staff have been very polite, kind and respectful and reassuring.

Notes / Questions

Healthwatch Lincolnshire have responded to sender to acknowledge and thank for their feedback.

West Lindsey District Council x 2

- 1 x General Comment
- 1 x Compliment

General Comment

1. Case 14956 (01-07-2025)

PCN: APEX

Providers: Richmond Medical Centre, The Circle Health Group - Lincoln **For Information:** Lincolnshire Integrated Care Services (ICS/ICB)

Patient had foot surgery in Circle Hospital in Lincoln under the NHS. Surgery went wrong and now substantially worse and in constant pain. Has tried to speak with the surgeon who is not taking ownership of the concerns. Patient has had a second opinion via the NHS and it was deemed that corrections needed to be done. However nothing has been done so far. Did have physiotherapy for 8 weeks, but nothing improved.

Has spoken with their GP and felt this was dismissed. Has lost confidence in the services and wonders what they can do.

Notes / Questions

Healthwatch provided: Hospital Complaints and PHSO if not satisfactory response; Practice Manager and ICB

Compliment

1. Case 15041 (24-07-2025)

PCN: K2 Healthcare Grantham and Rural

Providers: Vine House

I'm usually treated with respect and given the help I need. I'm very grateful to the NHS and local services for their support

Out of Area x 2

• 2 x General Comment

General Comment

1. Case 14967 (07-07-2025)

Providers: Out of area

gave them treatment via a nebuliser.

Riverside Surgery

A few weeks ago my child (1 year old baby) had breathing difficulties so I contacted our GP surgery at 8am. When someone answered I explained the situation and they said the Urgent Care practitioner would call me back. About an hour later the Urgent Care Practitioner called me back and made an appointment for them to attend the surgery (not our local one as there were no appointments available. It was the one in the next town). Unfortunately, about half an hour later my child's breathing worsened and I had to call 999 for an emergency ambulance. The ambulance arrived very quickly, the paramedics were lovely and gave them oxygen on our way to the hospital. The hospital

staff at Scunthorpe General's Emergency Department were great, they immediately saw them and

During this time I contacted the GP surgery back to let them know my child would not be attending their appointment. When I phoned I was 26th in the queue. I selected the option for a call back. When I received the call the appointment time had passed; I apologised for this and explained the situation. The person who took the call was very understanding and said they would record on the system. Approximately half an hour later I received a text message saying that my child had failed to attend their appointment despite them being informed. When I later questioned the surgery on this they said that it is an automated message.

Notes / Questions

Information sent to relevant Healthwatch in North Lincolnshire

2. Case 15010 (15-07-2025)

Providers: Out of area

Breast screening service finding small cancer - early detection

Following on from that everything was a shambles, told I had BC from ultrasound biopsies, next appointment told no cancer but more biopsies taken, asked what's the likelihood of finding cancer in these biopsies told highly unlikely. Third appointment, you've got cancer.

Zero care/compassion/empathy.

Surgery day, actual surgery went ok, zero care given by any staff. Whilst coming round from surgery I heard staff attending to an elderly patient in the next room and laughing and saying "come on pissy pants", I found their treatment and lack of respect for this patient very traumatic.

Sent home and 4 weeks before next appointment. No contact from anyone. No care/compassion shown

What could have gone better was for it all to be a less mechanical experience and for some actual care be shown. Being diagnosed with any cancer is very traumatic and although I was given Macmillan telephone numbers to ring I felt that my distress/upset were natural emotions and I didn't really have anything to say, it's the old stoic British, not wanting to bother someone attitude. But I longed for someone to have reached out and just asked "how are you doing". ? Like the breast care nurses used to do.

I saw my oncology nurse following an issue with my arm, when I was told it was of no concern, the problem escalated and I had to use the out of hours GP service, and I've now had to delay my chemo, if I had been seen face to face initially maybe the issue could have been sorted.

I broke down at the appointment and described my disappointment/upset. The outcome is I have been referred to a psychotherapist. I don't need this??? I needed someone involved in my care to actually blooming care. I'm lucky I have a support system at home but what about all the people that live on their own and have no support. To have had a call from someone to randomly ask "how are you". Would mean the world.

I also feel I didn't want to complain in case it affects my ongoing treatment.

Notes / Questions

Webform came through inbox from Healthwatch England, not our area and therefore passed over to Healthwatch Kingston upon Hull, who acknowledged receipt of the email.

Community Health Services

Area	Case Details
South Kesteven District Council x 1	Signposting
• 1 x Signposting	

1. Case 15008 (14-07-2025)

PCN: South Lincolnshire Rural

Providers: Lincolnshire Community Health Services NHS Trust (LCHS)

Patient unable to get an email address for Complaints under LCHS (Lincolnshire Community Health Services) has tried a number of email addresses but not going through.

Notes / Questions

Healthwatch provided the information for Complaints department and full postal address should it be needed.

Provider Response

It is hoped the author contacted Complaints department and received a satisfactory outcome.

Primary Care Services

Area **Case Details** Boston District Council x **General Comment** 1. Case 14986 (09-07-2025) • 8 x General Comment PCN: Boston • 7 x Compliment **Providers:** The Sidings All is good. Not so easy to make an appointment though. 2. Case 14993 (10-07-2025) PCN: Boston **Providers:** The Sidings I came to the Medical Centre to register as a patient at the surgery. However, I was told to wait and no-one has come back to me to let me know if I will be seen. I have been waiting from more than one hour. Just wanted an answer as to whether they could register at the practice and to book an appointment. 3. Case 14994 (10-07-2025) PCN: Boston **Providers:** The Sidings A named member of staff is fabulous. Sadly, the same cannot be said about the most of the doctors at the practice. They need training in mental health and need to show more compassion towards their patients. The patient had one doctor that hung up the phone during their conversation when the patient asked to be referred to the CMHT team because they refused to have medication prescribed. Patient stated they had tried them all and they have not worked. Notes / Questions No patient information provided 4. Case 14995 (10-07-2025) PCN: Boston **Providers:** The Sidings Appointments if you are able to get them are about a month away which is too long. The door into the surgery should be an automatic door and opens the wrong way. The patient needs assistance to get to the surgery. Automatic message when phoning into the surgery and the patient is asked to book online. Patient only has a landline so has to come into the surgery to book an appointment as the phones never seem to get answered. Patient has mobility issues and had to navigate the heavy doors themselves. 5. Case 14996 (10-07-2025) PCN: Boston **Providers:** The Sidings Appointments aren't always available when the patient needs them and when you receive your appointment you've already got over your illness. The patient is always being told that their child has a viral infection and come back when worse.

6. Case 15000 (14-07-2025)

PCN: Boston

Providers: The Sidings

Observations when doing an engagement event at the surgery.

- Main entrance doors are powered, door to reception/waiting area is a heavy single door with no
 power assistance. Engagement team had to help a patient in a wheelchair as their companion
 pushing the chair was having difficulties in gaining access.
- Patient on crutches complained of the door difficulties as did a parent with a young child in a pushchair.
- There are no seats of different heights, one patient commented of the difficulties when getting up from the chair as too low.
- No chairs all are long benches
- No privacy at reception, all details can be clearly heard by everybody in the waiting area
- Despite there being a self check-in with 9 different languages, very limited use being made
- A number of non English speaking patients causing delays at reception. Receptionists doing their very best, as a last resort using language line, but taking a long time to process.
- Due to the shape of the building, there are a number of waiting areas, Not all signage to these are prominent

7. Case 15006 (14-07-2025)

PCN: Boston

Providers: The Sidings

HWLincs Volunteer Observations from Engagement Activity (end of June 2025): the Sidings, Boston

The medical centre is easily accessible and has ample parking spaces.

Permission to act under the permit was asked for and granted.

The visit took place between 1:00 PM and 4:00 PM. Thirty-two surveys were handled.

Note: 50% of the users were of none British origin; they received the flyer with the surveys.

The centre has staff who communicate in Eastern languages with them.

8. Case 15053 (30-07-2025)

PCN: Boston

Providers: The Sidings

Observations from GP Community Engagement: HWLincs Volunteer

I did see some of the medical staff who came into the waiting area wearing name badges but most weren't wearing uniforms which is probably appropriate depending on their role. Reception staff were wearing a uniform.

There wasn't any privacy in reception and I didn't notice any signs saying patients could ask if they wanted to talk privately. There was a self-check in screen for patients to use but most chose to queue at reception because they had questions. The layout of the seating meant that when I started talking to people I could actually talk to a larger group to explain who I was and what I was doing in the practice which was quite amusing really. At one point I asked if anybody would like to take a form and a leaflet from me and people from around the room put their hands up.

Staff coming into the waiting areas were polite when calling for patients. I did witness one elderly gentleman leaving quite cross because he wasn't able to get a solution to his problem from reception staff but I never heard her raise her voice at him.

Patients were told which waiting room to go to.

The main sign at reception was also written in Polish.

Plenty of seating available for the amount of patients attending during my visit.

4 waiting areas in total, 2 quite large and 2 smaller areas, Benches arranged around the edges of the walls in the larger waiting areas with a row running through the middle with seating back and front which were comfortable but didn't provide for anybody who wanted to be seated away from others. No screens.

Plenty of room for wheelchairs and automatically opening doors which were wide enough for pushchairs, mobility scooters and wheel chairs.

One toilet available in both the larger waiting areas which were generic.

A water cooler and plastic cups in both of the larger waiting rooms.

Waiting rooms 1 and 2 clearly signed. Waiting room 2 assigned to the 'leg clinic' while I was observing. Smaller waiting areas not so clearly signed and I wasn't aware of them until late in my visit when I saw a mum with a pushchair go through a door.

A lot of information on the walls and in the entrance way to the clinic. Not as many multi lingual as I would have expected given the ethnicity of a lot of the patients. Several people I spoke to were E2L speakers.

Very good amount of parking spaces available.

I noted 8 spaces in 2 different areas close to the clinic entrance. A large part of the buildings in the area are under development and no longer part of the NHS buildings which was quite confusing for me because I had never been before. However, the carpark dedicated to the clinic was clearly signed.

Compliment

1. Case 14978 (09-07-2025)

PCN: Boston

Providers: The Sidings

Just finished a course of injections for my holiday to India and found it easy and the staff carried out what I needed in a professional manner - Happy!

2. Case 14979 (09-07-2025)

PCN: Boston

Providers: The Sidings

Very Good

3. Case 14980 (09-07-2025)

PCN: Boston

Providers: The Sidings

Always had a good experience, I see the nurse as I need bloods every 3 months.

Always friendly and caring

4. Case 14982 (09-07-2025)

PCN: Boston

Providers: The Sidings

Very friendly and helpful when you ring up or are coming in.

5. Case 14984 (09-07-2025)

PCN: Boston

Providers: The Sidings

I have no problems with any NHS at all.

6. Case 14985 (09-07-2025)

PCN: Boston

Providers: The Sidings

I am diabetic, tablet controlled. Come for 'bloods' regularly. Brilliant Service

7. Case 14990 (09-07-2025)

PCN: Boston

Providers: The Sidings

Found it helpful especially today as I called and left message on the app and they called back almost immediately and made me an appointment.

East Lindsey District Council x 9

- 7 x General Comment
- 2 x Compliment

General Comment

1. Case 14958 (02-07-2025)

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

Patient has moved into Lincolnshire 3 years ago and has a number of long term conditions including hip dysplasia, fibromyalgia and chronic pain syndrome. Is being treated ongoing at Birmingham.

The patient had a faulty hip replacement and is in constant pain but the authority are not taking responsibility for this. The patient is looking at seeking legal advice on the treatment and issues since the operation.

A new scan needs to be done on their hip which their GP here in Lincolnshire and the ICB are refusing to authorise. The patient does not want to do a 200 mile round trip to have a scan done in Birmingham if it can be done here in Lincolnshire and the results shared with the Consultant in Birmingham.

Patient is proactive in their pain management and has been managing reasonably well until now but feels that at the moment, Lincolnshire NHS services are denying them the basic support that they need. They will continue to travel to Birmingham for treatment (injections) twice a year so the local authority is not paying for this but does not understand why the scan cannot be done here having been requested twice by the Consultant and refused twice.

Notes / Questions

No patient details provided

2. Case 14974 (10-07-2025)

PCN: East Lindsey

Providers: Lincolnshire Integrated Care Services (ICS/ICB), Woodhall Spa New Surgery

Caller telephoned. Long history of medical problems. They initially saw their GP with an infection on a scar, they made a referral and after 12 months the patient got to see the Vascular Surgeon in early June. They say that the patient needs medication but they don't want blood thinners, doesn't want statins, and doesn't want something else that they are allergic to.

Reception area not confidential all waiting area can hear everything. Patient has made contact with consultant secretary to speak with consultant as it was them who stated patient needed to be seen. Patient queried AskMyGP and why elements of text have been deleted, information is on there from previous messages and texts, however why would some text be taken out, but dates still showing on their app.

Notes / Questions

Healthwatch asks - how this could occur, regarding AskMyGP comment?

Provider Response

No response to date

3. Case 14999 (14-07-2025)

PCN: East Lindsey

Providers: The New Coningsby Surgery

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

I'm a 21 stone person who's 5'1 and age 50+. I'm diabetic though got my level down. Now I've high blood pressure high cholesterol have sleep apnoea and other health issues. And they won't give me Mounjaro on the NHS. Which I think I'm entitled to. I went and brought it and asked them to monitor me as I suffer from stomach problems. And hyperthyroidism. And they have refused me that as well. I think this is wrong on both counts. Or are they allowed to do this

Notes / Questions

Healthwatch suggested contacting Practice Manager, or ICB or seeking support from their local pharmacy

4. Case 14957 (02-07-2025)

PCN: First Coastal

Providers: Marisco Medical Practice

Patient saw a Nurse on Monday regarding a mole or wart on shoulder, the patient keeps catching it and it bleeds, is growing. Patient is diabetic. Would like something done, however Nurse stated not harmless and to come back in 3 months. Patient would like something doing before 3 months as it is stressing them out. Suffers with their Mental Health and has learning difficulties. Would like a conversation with the practice via phone so they can understand better.

Notes / Questions

Patient requested Healthwatch make contact with the surgery.

Provider Response

Thank you for your email. Having reviewed the patient's medical records we can see that they had an appointment with an advanced nurse practitioner on Monday, where it was agreed that they would take photos of the lesion and send them to Dermatology at Pilgrim Hospital for advice and guidance and send an SMS to the patient with the outcome, patient was happy with this plan. The advice and guidance came back on the 2nd July, which stated "Looks traumatised harmless dermal nevus, please, re-assess with dermoscopy after 3 months". I have contacted the patient and explained that Dermatology believes the lesion is harmless and that they have asked for it to be re-assessed in 3 months' time, I have also booked the patient an appointment with the advanced nurse practitioner for the beginning of August to discuss this matter further and to hopefully offer them some further reassurance.

5. Case 15003 (14-07-2025)

PCN: First Coastal

Providers: Marisco Medical Practice

Patient who is suffering from Bloated stomach, after eating anything, being sick and shortness of breath every now and then (not all the time), Has tried to make contact with the surgery to make an appointment for the past 3 days, but unable to either get through or all appointments have gone.

Notes / Questions

Patient requested Healthwatch make contact with the surgery. Also provided NHS 111 and or local UTC

Provider Response

Patient has been contacted by the surgery.

6. Case 14964 (07-07-2025)

PCN: East Lindsey

Providers: The New Coningsby Surgery

I wish to complain about my doctors. I put a request on AskMyGP, still not got seen whatsoever. I put it in, in late June, no offer on appointments for a phone call, I have been told I have got to a have a yearly review on my medication. I have had bloods and review within 6 months. To me they're not very good, but reception are doctors!.

Notes / Questions

Healthwatch provided information on complaints and Practice Manager information

7. Case 15026 (21-07-2025)

PCN: Solas

Providers: The Old Leake Medical Centre

You can only discuss one symptom with your GP per appointment. This is pointless when you have multiple autoimmune diseases.

You can be told to pick the most important symptom. How am I'm supposed to know.

I'm the person who went to bed with a migraine (not even a bad one) and woke up in resuscitation because it was actually multiple clots on my brain. I'm so used to being in pain that I will go to bed and sleep it off.

There needs to be a separate phone line for appointments that are not emergency same day. Sometimes I just need to check if my symptoms are an escalation of an existing condition or something new. Or I need a complete discussion about the entire set of overlap symptoms and write ups for blood works, referrals etc.

I don't need to sit on the phone for an hour to be told there are no appointments. I don't necessarily want one that day, or that i can't book an appointment for another day because they only open their books for a few days at the beginning of the month. It seems like a way of circumventing the waiting lists to me.

If I'm well enough to ring it's normally just a quick yes or no answer I need from a Dr.

If I'm not well but I have managed to ring being told to try again tomorrow.. well I'm not going to bother because I'm just going to try and sleep it off. I am in pain all the time. I am exhausted all the

Maybe letting us email our question through the NHS app so someone could respond within a few days would be an idea?

Notes / Questions

No patient details provided

Compliment

1. Case 14962 (07-07-2025)

Providers: Specsavers (Boston) **For Information:** Opticians

Specsavers Boston

Very good service, staff very friendly, appointments easy to make and opticians are very knowledgeable sharing information with you read your notes and answer questions with honesty and give positive advice if required. Always professional.

2. Case 15027 (21-07-2025)

PCN: Meridian

Providers: Tasburgh Lodge

My surgery (Tasburgh Lodge Surgery) have doctors that listen to you and help as much as they can. My only complaint is that when test results come back it says patient informed and I haven't been informed

Lincoln City District Council x 5

• 5 x General Comment

General Comment

1. Case 15009 (15-07-2025)

PCN: South Lincoln Healthcare
Providers: Brant Road Surgery

My blood pressure has risen again. I was asked to read it 3 times a day for 5 days and send the readings in to the surgery. I did this on Friday, and received a phone call from reception asking when it would be convenient to have a phone call from 'A' GP. The receptionist let me go through several days when I could do this - if I hadn't asked them to pick a day, would they have asked me to make myself available for several days?

Eventually they suggested this would be on Tuesday (this was Friday). They weren't able to tell me who I would be speaking to, but gave me a list of 5 names that it might be (including my regular GP) the other 4 of whom I'd never heard of. The receptionist also was not able to tell me what time to expect the call.

I know that this is the norm these days, and I am not lodging a complaint about my health centre per se, but I am registering my unhappiness at being treated in a rather cavalier fashion, with no apparent continuity and no opportunity to build any kind of relationship or trust with a specific GP. I get the impression that the patient is of secondary importance as far as the NHS is concerned. They are not there to serve me. I am there to fit into their system.

Notes / Questions

Healthwatch provided link to surgery website to raise comments, should they wish

2. Case 15022 (21-07-2025)

PCN: Lincoln Healthcare Partnerships

Providers: City Medical Practice (Portland), Heart Of Lincoln Medical Group

Portland Medical Practice, Lincoln

From time pain and fatigue started to be disruptive, it took 23 years to get a referral to gynaecologist, and even then I had to demand it. Another 4 years to get a diagnosis and treatment for endometriosis. After no improvement, two years more, with help from DWP and gynaecologist to find a GP willing to listen to everything and connect it all to diagnose fibromyalgia. Almost 30 years in total.

Notes / Questions

No patient details provided

3. Case 14973 (09-07-2025)

PCN: South Lincoln Healthcare

Providers: Navenby Cliff Villages Surgery

I am reluctantly, having to put a complaint in regarding my GP surgery - Cliff Villages Medical Practice in Navenby/Waddington.

The reason for my complaint is that in early March this year, my spouse had a stroke. Luckily, they are recovering well.

However, after being discharged from hospital, they were becoming increasingly agitated. On one occasion they were looking out of our patio doors and when I asked if they were alright the reply to me was 'I am just thinking of ways not to kill you'. As you can imagine, this was distressing as they are the most loving partner and had never shown any aggression either verbally or physically.

As a result, I rang the surgery to ask to speak to a doctor regarding this incident. I explained that I needed either a telephone or physical appointment but I needed to talk things through with someone as I was so upset. Where I provided my contact details.

So I got an appointment for one of the doctors to ring me. However, what that GP did was not ring me, but rang my spouse, who I had not told I was contacting the doctors. They asked them if they would give permission for me to talk to them, which they did give and handed me the phone. (what if this had been an abusive person)?

I asked the doctor why had my spouse received the call, and I was told that the doctor had to speak to them first and get their permission for their health issues to be discussed with me.

I explained to the doctor that it was *my* appointment and I knew that they could not discuss my partners health conditions with me as that is a breach of confidentiality. The doctor then repeated to me that they had to gain permission from them to speak to me - why.

My response to the doctor was that no, you did not have to talk to my partner as I only wanted to let them know how their behaviour had changed, being verbally aggressive to me and had thoughts of killing me and the doctor had breached my confidentiality by talking to my spouse as they were not aware that I had contacted the surgery and why.

My Spouse, although was understanding, was as you can imagine, upset, which then caused me to become upset and anxious.

I put a letter of complaint into the surgery in late April 2025 and posted it in the prescription post box as I could not find another way of posting it and the surgery was closed.

Since then I spoke to another GP during another phone appointment and explained that I had not had a response. The GP took it very seriously and put a message through to the surgery manager, to deal with asap. The GP also agreed with me that this was indeed a breach of my confidentiality. I then went into the surgery last week and spoke to the receptionist who promised to progress this further. Nothing was visible on my records and I requested that I have a response/acknowledgement within 48 hours.

I have still not heard anything, not a phone call or email.

I am not one to complain about things, but I do feel so strongly about this as it has caused me so much distress and anxiety. I feel that I am not being listened to and feel that they are not taking this issue seriously, making me feel worthless.

Notes / Questions

At patients request Healthwatch made contact with the surgery as no communication has been sent to the patient.

Provider Response

I can confirm that I wrote to the patient on the 7th July with a full response to their concerns and I also include a personal and sincere apology for the time it has taken me respond to them. Hopefully the patient will be satisfied with my response. We have raised a significant event to be discussed at the next team meeting and there are further actions that have been and are to be implemented to protect them going forward. I can't apologise enough. I will contact the patient when they have had time to consider my reply and see if they need any further support from me.

Healthwatch sent this information to the patient.

16/7/25 - Patient update, has now received the response. I feel better now they will not let this happen to anyone else. Thank you for your help as ever.

4. Case 15018 (21-07-2025)

PCN: Lincoln Healthcare Partnerships

Providers: Newark Road Surgery

Long term pain management and reviews. My short answer is no, never been reviewed, at the current GP or the one before

Notes / Questions

No patient details provided

5. Case 15005 (14-07-2025)

PCN: APEX

Providers: Richmond Medical Centre

Patient concerned that the breast clinic at the hospital have asked for a referral from the surgery twice. First time it was refused by the surgery, then when the patient asked why, they stated no request had been put through. Second time also refused, patient does not know yet why this is. Is experiencing a lot of problems in this area from a previous surgery a number of years ago. Breast Clinic would like to do a scan. Patient has been in contact with the surgery and made their feelings very clear, just waiting for a response.

Patient commented would like to move practices, but don't know what is available and where.

Notes / Questions

Healthwatch suggested waiting for a response. Also provided ICB information and alternative registration options in their catchment area.

North Kesteven District Council x 2

• 2 x General Comment

General Comment

1. Case 15043 (24-07-2025)

PCN: Four Counties

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

I'm reluctant to try to see a GP now. It's too difficult and I have been ridiculed when I did manage to get an appointment. I have no confidence in how my appointment will go.

I did however have a really good experience with the Social Subscriber

Notes / Questions

No patient details provided

2. Case 15031 (22-07-2025)

PCN: South Lincoln Healthcare

Providers: Navenby Cliff Villages Surgery

I moved to the surgery about a year ago luckily I have not had to use them regularly but if you call after 10am they close the phone lines as they're at capacity. When they do ask you to come in there are no appointments available. Just heard of someone who tried to get an appointment for 30/7 and was told the next one is September. I have held on the line, number 15 in the queue for an hour only to be told there are no appointments.

In the end I moved back to Caythorpe Surgery which is brilliant. This won't be helpful when I'm old and its 7 miles away as opposed to walking distance. Too many new houses built in Navenby and Waddington without improvements to Drs surgery.

South Holland District Council x 5

- 4 x General Comment
- 1 x Compliment

General Comment

1. Case 14963 (07-07-2025)

Providers: Holbeach Dental Surgery (Mr D Duplessis + Mrs L Duplessis)

For Information: Integrated Care Board Dental

This surgery is now no longer NHS for adults. How can this be allowed to happen?

Notes / Ouestions

Healthwatch explained that Dental Practices do not have to provide NHS options and provided NHS Choices to see if there are any in their area.

2. Case 15025 (21-07-2025)

PCN: South Lincolnshire Rural

Providers: Littlebury Medical Centre

Never see same GP twice and they never read notes so each visit is half allotted time telling history while they pretend to listen. Last time I took a list of symptoms I suffer I was told they can only deal with one so pick one. I feel they are all part of same issue but they just wouldn't listen.

3. Case 14983 (09-07-2025)

PCN: South Lincolnshire Rural

Providers: Moulton Medical Practice

Hard to get face to face appointment. Now, nearly 2 weeks wait for a blood pressure check with the

Notes / Questions

No patient details shared

4. Case 15035 (24-07-2025)

PCN: South Lincolnshire Rural
Providers: The Deepings Practice

Very hard to access a GP after surgery

Nasty pseudomonas infection disregarded by GP on the results - deemed satisfactory I.E NO FOLLOW LIP

Disgusting. I called, GP not bothering to contact me but left a message to book to see a nurse If GP had read my notes they would see I was seeing a nurse almost daily as had a hole in my wound Nursing staff great

GP couldn't be bothered

I could have been started on antibiotics two days earlier to avoid healing deadly

As a nurse myself I'm truly appalled by the negligence

Notes / Questions

Healthwatch acknowledged patients comments by email and suggested contacting the Practice Manager at the Deepings Surgery.

Compliment

1. Case 15024 (21-07-2025)

PCN: Spalding

Providers: Beechfield Medical Centre

I have a fabulous service in Beechfield Medical Practice (Spalding) and have always been listened to and treated with respect whomever I have seen. They have made a number of referrals to specialists to either identify issues for further support or to rule out possible issues. My medical history in the last 3.5 years has been complex and brought about by something that many have no knowledge of (either COVID-19 infection or vaccination - unsure which). My only concern is that each medical professional has put me on medication to help with symptoms and now I'm on a plethora of medication and regularly in pain. I have just had my third referral to pain management but only at my request. I do not feel that I have someone overseeing me and my life is now very much about selfmanagement. However, I do understand the complexities involved and I have been offered all within NICE guidelines for each diagnosed condition. The medical conditions I now have prevent me from work (I was medically retired in 2023 and now receive an enhanced pension early on the grounds of ill-health) and direct my daily life.

South Kesteven District Council x 3

• 3 x General Comment

General Comment

1. Case 15044 (24-07-2025)

Providers: Sleaford Medical Group

Can you advise how I can get a doctor to come out to my house for my dependent. They won't see them as they're not registered housebound but at the moment cannot walk far as they have no feeling/pain in their legs, feet and hands.

Notes / Questions

Healthwatch provided information on Practice Manager and how to get a home visit.

2. Case 15019 (21-07-2025)

PCN: South Lincolnshire Rural
Providers: The Deepings Practice

Stamford UTC (no complaints with them as they get all the hassle from Deeping)

Your GP will do everything to avoid seeing you so pushes you to the pharmacy. The pharmacy won't see you because you are too old and tell you to see your GP. GP say ring 111 or go to UTC. If you go early enough you don't have to wait hours so you wait until the next day and leave home at the crack of dawn. By this stage you could have already finished a 3-day course of antibiotics but you haven't even started.

At last you get a prescription but told if it has not cleared in 3 days, see your GP. Yes? The wait will be 3 weeks

Nothing went well. If you're over 70 you should be seen as a matter of urgency by your GP. My parent died of sepsis last week which began with a UTI.

Notes / Questions

No patient information provided

3. Case 15020 (21-07-2025)

PCN: South Lincolnshire Rural
Providers: The Deepings Practice

Deeping's/Glinton Surgery

Had waited for weeks for a HBa1C blood test. Attended Glinton Surgery. Staff very efficient. Later on found out that I'd been tested for everything BUT HBa1C, which had been lost/gone missing. To make matters worse, I'd been tested because I was taking Methotrexate which I haven't taken for years. I'm assuming that was my annual health check for my chronic conditions which include, inflammatory arthritis, osteoarthritis, severe degenerative disc disease with spinal stenosis and rotational scoliosis, Sjögren's, ME, fibromyalgia, FND, hypertension and now cataracts.

At least I had full blood tests but am still waiting for mr HBa1C test.

Notes / Questions

No patient details provided

All Areas x 1

• 1 x General Comment

General Comment

1. Case 15011 (15-07-2025)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

I am writing on behalf of my friend. For the last few years they have been very unstable & have fallen over several times including one time where they broke their wrist and had to have carers come in to look after them. They fall over nearly every day now and with great difficulty manages to get themselves up. They never go out unless either myself or another friend take them. We take them to coffee mornings or medical appointments. I am 19 years younger than my friend and our other friend is only 8 years younger, soon we will be needing help ourselves. Both myself, and the friend I am writing on behalf of, have spoken to the Doctors surgery to see if they can administer yearly injections at home but they insist my friend must be classed as Housebound. So do we have to stop keeping an eye on our friend for them to be classed as housebound and the surgery to help them. We are no spring chickens ourselves. Where is the care & compassion in that attitude.

Notes / Questions

Acknowledged the comments with sender, but request to remain anonymous.

Out of Area x 3

- 2 x General Comment
- 1 x Signposting

General Comment

1. Case 14955 (01-07-2025)

Providers: Out of area

Central surgery, Barton upon Humber

I have stage 4 bladder cancer. I completed an online form with complaints of left sided pain in my kidney area. The GP sent me a urinary tract infection tick box questionnaire which was totally inappropriate for me - I had my bladder surgically removed which I clearly informed the GP online form with my initial complaint. The GP so far hasn't been back in touch. That was 4 days ago. I ended up having to contact the hospital directly.

Notes / Questions

Information sent to the relevant Healthwatch in North Lincolnshire

2. Case 14966 (07-07-2025)

Providers: Out of area

Central Surgery, King Street, Barton upon Humber.

I was sent a text asking to book a blood test which we did over the phone. In neither the phone call or text did it advise it was fasting.

At the appointment the nurse asked it was fasting as she didn't know, to which my mum replied no as we hadn't been advised to and she said that's fine.

We had a call last Friday asking if he fasted, the answer was no as we weren't advised to. No communication since.

Today, 2 weeks to the day after the test on 2/7 we receive a call to ask if he fasted, and obviously again said no as per our previous 2 conversations.

Now we are informed we have to book in again and can't get seen until 15/7!

I have a huge phobia of needles as I have explained to the nurse and the receptionist, and now have the worry for almost 2 weeks, likely ruining my planned holiday next week.

An extremely annoyed and distressed patient!

Notes / Questions

Sent to relevant Healthwatch in North Lincolnshire

Signposting

1. Case 14969 (08-07-2025)

Providers: Out of area

Northampton

Attended dental surgery in Mid Oct 2023 with my child for first consultation.

Attended again early February 2024 to have braces fitted. The treatment was carried out by an orthodontic dr.

The next check up should be have been in April 2024 but everything was cancelled without clear reason and explanation. I have checked on the clinic website that everything is closed down. Information on clinic website is:"We took enforcement action to cancel the registration of Ortho Limited t/a Cheeyne Walk Orthodontics for failing to meet the regulations related to safe and well-led care"

My concern is that no-one is willing to complete the job or check on the braces, because NHS already paid them for that treatment which wasn't completed at all. They have left my child without any help and support at all.

I really need your help please as soon as possible. My child has got huge difficulties with teeth brushing ,eating ,sleeping and more. They are really shy and very worried about that situation. Once again no-one wants to help us because nobody wants to complete the orthodontic work for free. I do not have money to pay for the treatment privately. I am a single parent, please could you help me?

Notes / Questions

Healthwatch Lincolnshire have notified the sender that their case has been passed over to their local Healthwatch at West Northamptonshire.

Hospital Services

Area	Case Details
Boston District Council x	General Comment
3 x General Comment	1. Case 14991 (10-07-2025) PCN: Boston
• 5 x Compliment	Providers: Lincoln County Hospital
	Patient finally got an appointment with the rheumatology department at Lincoln County. Department is located in a hut which is really depressing for the patients to go to. Staff were very good.
	Sent everywhere for blood test and x-ray by Consultant.
	Blood department told me I needed to book an appointment. I had to go back and forth to the hut but finally got a blood test done that same day. Patient felt that it should not be the patient's responsibility to book an appointment when the Consultant (on site) has requested it. That would mean a second journey up to the hospital and inconvenience to the patient e.g., getting time off work, organising pick up or drop off for children etc.
	Notes / Questions
	No patient details shared
	Provider Response
	Response Clinical Services Manager - Thank you for the feedback. We agree that the rheumatology department building is looking tired and appreciate your feedback on our staff.
	Bloods for all rheumatology patients are taken by the Phlebotomy department which does require a separate appointment booking. The alternative for patients would be to approach your GP to have your bloods taken there. In future, we would like to increase the workforce within the Rheumatology department so we can provide an 'in-house' phlebotomy service to reduce the burden on patients and quicken their care pathways
	2. Case 14989 (09-07-2025)
	PCN: Boston
	Providers: Pilgrim Hospital
	A&E
	Long wait, not told how long. No water supplied or cups in waiting area. Staff seem rushed.
	Bus stop time tables hard to read
	Notes / Questions
	No patient details provided
	Provider Response
	Response, ED Matron - Thank you for providing feedback following your visit to Pilgrim hospital and I apologise that your experience of the department was not satisfactory. In order for me to investigate and help to rectify this, please contact me directly. Bus timetables provided by Outpatients, contact made with department.

3. Case 15016 (17-07-2025)

PCN: Boston

Providers: Pilgrim Hospital

Caller attended appointment with their GP at Swineshead where tests were carried out and the GP found that they thought the patient had a blood clot in their leg. The GP made out a same day emergency ultra sound scan referral to Pilgrim Hospital and instructed the patient to return home and prepare for a telephone call from Pilgrim asking them to attend an urgent appointment later in the day.

The patient followed the GPs instruction but no phone call came through so they contacted Pilgrim themselves and was told that the next appointment would be Monday (5 days later) as no appointments left.

The patient contacted PALs at Pilgrim to report the matter and request an earlier appointment, as very concerned that it should be in a 24 hour timeframe.

PALs did respond saying that they had spoken with the relevant department who apologised but insisted that there were no earlier appointments than the appointment given for Monday. The department were aware of the referral from the GP but advised that there are only 6 available slots per day for the same day emergency referrals, the 6 available slots had been taken and apologies but there was nothing more that they could do.

Family and friends of the patient have advised that they present themselves to A&E to be seen sooner but the patient does not want to do that as they feel it is unfair on other patients and appreciates that there is a system/process in place which must be followed but this system/process is broken.

The patient has contacted Healthwatch in the hope that their concerns can be reported and escalated in order for improvements to be made as they feel the present system of only 6 emergency slots available per day is putting patients lives at risk.

Notes / Questions

Healthwatch asks - with only 6 slots available per day for ultra sounds how can this accommodate patient need. This particular patient should be seen within 24 hours, however waited for 5 days. Are there plans to look at the service?

Provider Response

Response, Clinical Service Manager -There are plans to look at the whole of the vascular service and build a business case to go to board to expand the current workforce.

Compliment

1. Case 14992 (10-07-2025)

PCN: Boston

Providers: Lincoln County Hospital

Patient has recently attended Lincoln County Hospital and received very good treatment there. The staff were very friendly. Patient was admitted from home and was transferred to a number of different departments. Was in CCU (Coronary Care Unit)

Notes / Questions

No patient details shared

Provider Response

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

2. Case 14976 (09-07-2025)

PCN: Boston

Providers: Pilgrim Hospital Chemotherapy suite Excellent Service

Provider Response

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

3. Case 14977 (09-07-2025)

PCN: Boston

Providers: Pilgrim Hospital

Breast Clinic

Quick Appointment. Very Good Communication. Nice Staff

Provider Response

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

4. Case 14987 (09-07-2025)

PCN: Boston

Providers: Pilgrim Hospital

Sent to X-Ray by my GP. Brilliant, clean, staff lovely and seen on time.

Provider Response

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

5. Case 14988 (09-07-2025)

PCN: Boston

Providers: Pilgrim Hospital

A&E

Lovely new cubicle and lots of space. Staff very helpful - soon on my way.

Provider Response

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

East Lindsey District Council x 4

- 3 x General Comment
- 1 x Compliment

General Comment

1. Case 14971 (09-07-2025)

PCN: First Coastal

Providers: Diana, Princess of Wales Hospital (Grimsby), Lincoln County Hospital

Elderly parent 82 years old is currently under Cardiology in Grimsby and Heart Failure clinic in Lincoln County. Finds that they are attending clinics for both and having the same tests as not sharing the information. Which means more appointments for the parent and cost implications for the NHS. Why do they not share data, when providing the same service.

Would like all treatment and appointments in the same hospital so they do not need to have duplication of tests such as Bloods, ECGs, Scans etc twice. Has also had conflicting information so are very confused as to which is the correct information regarding medications.

Notes / Questions

Healthwatch suggested speaking with Consultants secretary to see if all can be done in the same hospital, also provided PALs information.

Provider Response

It is hoped the author contacted PALS and received a satisfactory outcome, or contact Clinical Service Manager

2. Case 15028 (21-07-2025)

Providers: Pilgrim Hospital

Drs do not understand the complexity of scleroderma and have no time to find out therefore if we don't fit into their remit and they have no idea how to support us.

Getting through to a consultant is hard and it's always via a secretary or helpline which is often misinterpreted

Provider Response

Awaiting a response.

3. Case 15029 (21-07-2025)

Providers: Pilgrim Hospital

Tried to book outpatients appointment for urgent cancer tests. Phone went from 5 in queue to 9! Rung again , went from 5 to 7. Got cut off twice when down to 1 but would take 2 minutes to answer. I was in the department I needed to book but its a centralised system. I asked the clients waiting how they'd booked. All had given up and waited for a letter! The receptionist witnessed all of it. I now have a 4 week wait for an urgent 2 week appointment after having customer service at the front of the hospital giving me an email to write to for one!!

A friend also had the same experience.

Notes / Questions

Healthwatch provided PALs information

Healthwatch asks - is there a problem with the current systems? if so how is this communicated to patients

Provider Response

Patient - I was concerned about the problems with the booking system for Lincolnshire Hospitals outpatient bookings in general. To be told your 5 in a queue and then being put back to 7 and then 9 means there are issues of it not working properly. Something the hospitals need to look at.

ULHT response - Unfortunately, we do not have enough people to answer the high volume of calls that we are experiencing. I have shared the information with our Telecomms Technical Engineer so they are aware should further instances occur. The same telephone system is also utilised by the digital service desk, PACS team, Occupational Health, EACH (ICB) and a few others. All seem to be fine and haven't mentioned any issues. We therefore think it might be a smaller scale problem at this stage. We have escalated the need for more phone handlers which would relieve some of the pressure and hopefully improve the queue situations. We are also monitoring call volumes on a monthly basis.

Compliment

1. Case 14968 (07-07-2025)

Providers: Pilgrim Hospital

Gynaecology

All went well. 3 named professionals were all lovely. Explained everything that needed to be done, very caring and professional.

Notes / Questions

No patient details provided

Provider Response

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

Lincoln City District Council x 5

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

General Comment

1. Case 14998 (11-07-2025)

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

I was recently contacted about my experience of care in the maternity clinic, again I have been to the clinic and again felt upset by the experience.

Please can you visit the service and speak to the people sitting there , I don't believe it's just me

Notes / Questions

No patient details shared

Provider Response

Betterbirths - We are sorry to read this experience. Thank you for sharing so honestly. We value feedback to shape and improve service user experiences. We will ensure this feedback is shared directly with Antenatal Clinic Services to address.

2. Case 15002 (14-07-2025)

PCN: South Lincoln Healthcare

Providers: Lincoln County Hospital

Patient had a stroke in March this year, had been provided with a follow up date in April (19) and letter stated this was via phone, however it turned out it should have been face to face which of course the patient wasn't aware of. On making contact with the Stroke Secretary, they said they would put the patient in for another appointment. Patient has not heard anything. Has had a recent MRI which the consultant requested, so wondered if this would be the reason, but no communication though so do not know when an appointment would be.

Is on holiday so won't be contactable from 20 - 29 July

Notes / Questions

At patients request Healthwatch made contact with PALs

Provider Response

Patient update - I received a call about 30 minutes after we spoke on the phone. I now have an appointment in August, could have been next week but I am away. Thank you so much for your help.

3. Case 15051 (29-07-2025)

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

CAB Lincoln and Lindsey made contact with Healthwatch in relation to a client that wanted the CAB to support them make a compliant about their treatment that has left them with sight impairment.

Notes / Questions

Information given for VoiceAbility, PALs and ICB Complaints.

Provider Response

It is hoped the author contacted the organisations provided and received a satisfactory outcome. It is hoped the author contacted the organisations provided and received a satisfactory outcome.

Informal Complaint

1. Case 15047 (28-07-2025)

PCN: Lincoln Healthcare Partnerships Providers: Lincoln County Hospital

I fell down the stairs after tripping over my cat in the early hours of the morning.

As my phone was upstairs, I crawled to the front door and shouted for help which arrived and ambulance called. Both ambulance and emergency department assumed that I must have been drinking to have fallen downstairs.

I was scanned at A&E but was given no pain relief nor fluids for the first eight hours I was there in spite of asking. Staff either polite, gas lighters, or just rude. At no point was I physically examined or given advice about treating my injuries.

Two discharge nurses from Community Health managed to get me a cup of water. Someone shouted at me when I declined paracetamol (causes me to vomit) after several requests from nurses, someone told me to open my mouth and squirted a doses of Oramorph. The cannula from scan was still in my arm when they were putting me in reception waiting to go to wait in Departure Lounge (7 hour wait on a hard chair). I was there from mid afternoon to mid evening during which time some four members of staff were rude and made me feel I was not worthy of their help.

Feeling is that they want to deter anyone going for help by being as unpleasant as possible. The ambulance staff are also less than professional. One of the people who answered my calls for help said they were "taken aback" because the first thing said by ambulance staff when they arrived was "had a few too many drinkies, have we?". It's the experience you would expect if you were being treated by the enemy in a war zone.

Notes / Questions

Healthwatch provided PALs information

Provider Response

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

Formal Complaint

1. Case 14965 (07-07-2025)

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

I am writing to raise a formal complaint on behalf of myself, and my spouse, regarding repeated and escalating failures by United Lincolnshire Hospitals NHS Trust (ULHT) to comply with the Accessible Information Standard (AIS), Subject Access Rights under UK GDPR, and their wider obligations to disabled patients under the Equality Act 2010.

We are both disabled patients with complex needs. I use hearing aids, require large print and easy-read documents, and have mobility challenges. Spouse is under my care as their registered Health and Welfare LPA, and also lives with significant physical and neurological disabilities. Despite notifying the Trust multiple times of these needs (verbally and in writing), we have consistently been:

- Sent letters and forms in small print and inaccessible formats
- Denied access to reasonable adjustments such as hearing loops, appropriate ramps, and proper communication methods
- Blocked from accessing personal data, even after submitting valid Subject Access Requests, LPA, signed consent, and ID in person
- Marked as "Did Not Attend" for appointments we were physically or communication-wise unable to attend due to lack of accessibility
- Ignored when requesting alternative communication methods or digital formats (e.g., CD, tagged PDFs)

Our experience is a textbook example of the failures on Accessible Information. Despite raising this repeatedly with ULHT, their legal and data protection departments have stonewalled us or demanded unnecessary additional documentation, all while refusing to meet basic accessibility duties.

We ask Healthwatch Lincolnshire to:

- 1. Investigate this case as a live reflection of the failings outlined in your own national research
- Raise our case to the local ICB and CQC as an example of ongoing patient harm due to communication discrimination
- 3. Provide public scrutiny and transparency regarding AIS enforcement in Lincolnshire NHS services We are happy to provide supporting emails, letters, legal documents, timelines, and the comparison table showing how other NHS Trusts comply lawfully and supportively, in contrast to ULHT. Thank you for your time, advocacy, and support.

Notes / Questions

Healthwatch provided information in large print of Advocacy Services and ICB information

Healthwatch asks - as part of the AIS why are these patients not able to get information in the way required?

Provider Response

Awaiting response from Accessibility Leads, but it is hoped the author contacted Advocacy Services & ICB and received a satisfactory outcome.

Lincolnshire Integrated Care Services (ICS/ICB) x

• 1 x General Comment

General Comment

1. Case 15049 (29-07-2025)

Providers: Lincoln County Hospital

I have been waiting 4 years for a knee replacement to replace a knee replacement that has failed, I would like to know why, doesn't my life matter? I am so upset and depressed, not to mention the extra pain in my Ankylosing Spondylosis spine as I am pulled to one side because my leg is now bowed and I can hardly walk. This is not living.

Notes / Questions

Healthwatch provided PALs information

Provider Response

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

North Kesteven District Council x 1

1 x General Comment

General Comment

1. Case 15032 (23-07-2025)

Providers: Lincoln County Hospital

Same Day Emergency Care (SDEC)

Missed diagnosing cancer, I had anaemia and was given an iron transfusion, a doctor came to speak to me for 30secs and mentioned a colonoscopy, but I didn't hear anymore about it. Three months later I was back at my doctors surgery with symptoms of anaemia again, it was my doctor who got the ball rolling and got me an emergency colonoscopy.

Notes / Questions

Healthwatch provided Complaints information

Provider Response

It is hoped the author contacted Complaints and received a satisfactory outcome.

South Holland District Council x 2

- 1 x General Comment
- 1 x Compliment

General Comment

1. Case 15023 (21-07-2025)

Providers: Pilgrim Hospital

Urology

I drove considerable distance to see a consultant after being sent to a different hospital for renal ultrasound and blood tests.

I waited a good while and when I finally went into their office they had no idea why I was there because the blood and ultrasound results were not online on my medical records. Consequently I have been told to get another blood test and have just received an appointment for a CT scan. A complete waste of an appointment, my afternoon and NHS resources to have to repeat everything. I think better communication would be a good start.

Notes / Questions

No patient details provided

Provider Response

Thank you for your comments on Healthwatch report. Please can you get in touch via PALS with your details to discuss this further

Compliment

1. Case 15038 (24-07-2025)

Providers: Queen Elizabeth Hospital Kings Lynn

Ophthalmology department

I was seen within half an hour of arrival although I was warned that it was likely I may have a long wait.

South Kesteven District Council x 1

• 1 x Informal Complaint

Informal Complaint

1. Case 15014 (16-07-2025)

PCN: K2 Healthcare Grantham and Rural

Providers: Peterborough and Stamford Hospital

Took ill, my neighbours alarmed at my disoriented state sent for medics. They sent for ambulance. I was admitted to Peterborough City Hospital early in the morning. Seen by Triage about half an hour later. They asked why I felt it necessary to have an ambulance?? Placed on trolley in corridor. Saw no one else other than to ask anyone nearby for water as I had a raging thirst. My condition declined right through the day. It was not until after 10 pm that 2 Doctors came to me. They sprang into frantic action. My heart and kidneys were critically failing. I had Sepsis. After being put on Dialysis, I spent the next 7 days in I.C.U. (Intensive Care Unit) where my treatment was exemplary.

From I.C.U., I was transferred to a ward. This should have been a Nephrology ward but no beds were available.

I was placed in a Diabetic Ward. I'm afraid my experiences there were diabolical. The first night, the ripple bed failed and I was placed on a hard plastic bucket seat at 3am my skin was bare on the plastic. At approx 8.45am I was helped back to bed. My skin was stuck to the chair and tore upon moving. I could not stand unaided so could not help myself. At this time I still had the unpleasant symptoms of Gastro-Enteritis and was left for hours in the night in soiled bedding. My bed table was not cleaned for several days until I was able to clean it myself.

I was very concerned while on this ward that I would pick up infections that I was unlikely to survive. My close relative who has worked in a very senior capacity in the Legal System made a serious complaint at Government level. I had a phone call when back home explaining that two senior staff on the ward were on holiday at that time hence lack of supervision?? WHAT? When nursing I had holiday leave cancelled more than once due to short staffing. I was asked if I was likely to sue. No, I do not believe in that route. I wanted to know that others would not have to endure such 3rd World experiences.

I was informed that I would be closely monitored by my GP post hospital stay. I did not in fact see a Doctor for over one year and after a further year of seeing different locums and losing confidence in their approach I changed Surgeries and am much happier now.

West Lindsey District Council x 3

- 2 x General Comment
- 1 x Informal Complaint

General Comment

1. Case 15054 (30-07-2025)

PCN: K2 Healthcare Grantham and Rural

Providers: Grantham + District Hospital

Patient lives with a diagnosis of Parkinson's Disease since their diagnosis in 2017. They have been on regular medication for a while. Patient is also a wheelchair user.

Following a consultation in May 2025, was given new drug for Parkinson's disease but no follow up appointment given to the patient. Medication was not suitable so ended up in hospital, critical for 5 days at Grantham Hospital following a call to NHS111 and being admitted. Symptoms included: shortness of breath, collapsed lung, blood clots. When the patient was discharged from hospital no discussion or communication with patient about the new drug including side effects or what to do in an emergency. Drugs were changed around mid to late May. Patient has tried to get some support from the Parkinson's Nurse but it was not very helpful as the nurse was not aware of the drug that the patient had been on and no follow up has been done for the patient.

Patient feels that they have been pushed aside and forgotten to get on with it.

Given new medication but still not suitable and does not know where to go for neurological support, no one seems to be able to help them, they were not given a discharge report and is really struggling. The discharge summary was very brief and did not give the patient enough information about what was happening to them and and long term support for their condition. It had been mentioned that they would be referred to the respiratory team but to date no appointment or consultation / contact has been made with the patient.

In the last few months the patient has seen 2 different consultants for a very brief 10 minute appointment. New drugs have been prescribed again with some side effects but not as bad as before. No communication on drug management with existing drugs and patient has been left feeling still very unwell including a persistent chest infection that they and their GP do not know if the cause is due to the change in medication or not.

No proper communication has been forwarded to the GP but the GP has been supporting the patient as best they can under the circumstances. All of this is leaving the patient and their spouse very anxious at the moment. The Patient would like some answers so that their condition can be managed much better and that they can experience better quality of life under the circumstances.

Patient also mentioned that when they were in hospital their spouse is their carer and was not allowed to support them when in hospital. This was in spite of a Carers Charter being displayed on the wall of the ward, the spouse was not made very welcome. At one point when the patient was trying to get a slice of bread and experiencing tremors nurses walked past them and did not help but one of the cleaners stopped and offered support to them. If the staff had allowed their carer onto the ward they could have helped them and reduce their anxiety.

Patient wants answers from the Trust in relation to the treatment that they have received and why there is a lack of communication between them and the patient and their GP. Trying to get hold of any of the clinicians has been very difficult. At one point when the patient made contact with the medical secretary was told to stop the medication but was not informed what would happen or what they might experience if they did that. No alternatives were offered and no communication at that point other than via email.

Notes / Ouestions

Healthwatch provided PALs information and ICB if not heard anything

Provider Response

It is hoped the author contacted PALs & ICB and received a satisfactory outcome.

2. Case 15013 (14-07-2025)

Providers: Lincoln County Hospital

Local resident runs a group for local people who live alone.

Last year one of the members had a difficult experience at Lincoln County Hospital A&E department. They contacted PALs where it was directed to the complaints department where they received a response and was assured changes would be made which would avoid a repeat of any future difficulties such as they had experienced.

This year another member of the group had to be taken to the same department and again there were problems, where they again made contact with PALs/Complaints. Received a response but was alarmed that the same similar problems, as on the previous occasion were still in evidence. Namely a basic lack of recording and evidence of what was happening in the department. Apparently, a complete lack of available notes.

Last year.

First elderly patient who suffers with dementia suffered a seizure at home was taken to A&E by the carer, where they stayed with the patient, handing over to another carer mid afternoon. Hospital stated they were going to admit the patient so carer left to collect some belongings for them, then stayed until teatime when patient was being admitted. Later that day, the next of kin received a phone call from the department enquiring if they knew where the patient was! they informed the department that all they knew was that the patient had been taken to A&E and was being admitted so should be in the hospital? Later that evening, they received another phone call from the department asking the same question, if they knew where the patient was. How do they not know where a patient is?

Next morning, next of kin made contact with the department who stated that the patient had been discharged 8 hours ago, which would have been around midnight as no longer being admitted.

- There was a lack of written notes No record of seizure
- No-one knew where the patient was.

Second elderly patient was accompanied by local resident. The patient passed out in the department witnessed by the resident yet there was nothing recorded in their notes. Just before this happened they were provided with a discharge letter, but because they passed out they were admitted to hospital for a further 4 days. However resident informed this did not happen as nothing in the patients notes.

They are not seeking to blame anyone, but rather to motivate an improvement in procedures and to keep accurate records.

Notes / Questions

Healthwatch suggested contacting PHSO

Healthwatch asks - is there a process/protocol that should be followed for each patient to ensure notes are kept up to date?

Provider Response

Operational Service Manager confirmed there is a process in place where all documentation should be recorded in the ED notes or on our electronic systems. It is best practice for patient notes to be updated contemporaneously throughout the shift with summaries completed at the end of each shift with a verbal handover to the next shift given. The details of this case have been shared with the Care Group's lead nurse for information and dissemination. It hoped the author contacted PHSO and received a satisfactory outcome.

Informal Complaint

1. Case 15048 (28-07-2025)

Providers: Queen's Medical Centre (Nottingham)

Nothing went well. Everything could have been done better. Suspected stroke. Blue lighted to hospital refused admission to Resus. Two hours in the ambulance then three hours in a corridor. Had to drag myself to the toilet. No help or treatment so wanted to go home. Still couldn't talk properly so all I could say was 'go home' nurse said 'you've not been booked in so go home, I don't care'. Found me a wheelchair they couldn't find one, so I could go to the toilet and left me in the waiting room till my lift got to me

All Areas x 2

• 2 x General Comment

General Comment

1. Case 15030 (22-07-2025)

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

In summer 2024 my GP referred me to an ENT Consultant. I saw one in April 2025. They prescribed and gave advice and said they'd like to see me in one month.

Via my NHS App I received 2 appointment for telephone consultations both on the same afternoon about an hour and a half apart. I rang the provided number to inform that a face to face was required and why 2 appointments consecutively. Being some 39th or so in the queue it was a long wait. The operator informed they hadn't notes and advised I ring Consultants secretary. I did, they effectively arranged an appointment which appeared on my app. Later a 2nd appointment appeared. I returned early from holiday and attended. The clinic had been cancelled and I had not been informed. The 2nd of this set was joined by a 3rd appointment. None were cancelled. Another appointment was received via text. This appointment is for September. At no point have I been informed of any cancellation. This appointment is some 15 months since my first referral. During this time my problem has increased significantly. A fall occurred resulting in an A &E visit X Ray's etc.

I informed about the early errors and received a telephone apology. Since the phone call the errors have continued.

I am deeply distressed.

Notes / Questions

No patient details provided

Provider Response

Service Manager Response - Thank you for raising a concern with the ENT service at ULTH. We are deeply sorry you have had the issues with appointments and the distress this has caused you. Your experience has not been one we would advocate for our patients accessing the ENT service. Unfortunately, without your details we are unable to look into this with more clarity and advise of your current appointment, in order to give peace of mind and to save a wasted journey and confusion. Just to note, most appointments are generated by the outpatient teams and some appointments are made by our secretarial team. If you would like to contact the secretarial team to check this for you on our patient administration system, please do so. It is our aim to ensure you have a more satisfactory experience of accessing the correct information.

2. Case 15056 (30-07-2025)

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

Too many individual appointments. Should be a one stop shop where all necessary tests are undertaken at the same time. Eg you see a Dr, they take a history and asks for a urine test and says they will see you in 3 months. After ringing up, I get an appointment after 6 months, see a different Dr, who takes another history and says I was given the wrong bottle, so they still need a urine test. And so on. 15 months later, I am no further forward

Notes / Questions

No patient details provided

Provider Response

Thank you for taking the time to share your experience. We are sorry to hear that your journey through our services has felt fragmented and frustrating. We understand how important it is for patients to feel that their time is valued and that care is coordinated as efficiently as possible. Your concerns about delays, repeated appointments and communication issues are taken seriously. Without specific details, it is difficult for us to provide a full response or look into your individual case in depth. However, if you would like us to investigate this further, we would encourage you to contact our Patient Advice and Liaison Service (PALS) at ulth.pals@nhs.net, who will be happy to support you and help resolve any issues where possible. Thank you again for your feedback, we are continually working to improve our services and comments like yours are essential in helping us identify where changes may be needed.

Out of Area x 1

• 1 x Compliment

Compliment

1. Case 15037 (24-07-2025)

Providers: Out of area

I have a telephone consultation monthly with a pain nurse specialist.

I also have an annual face to face appointment with the consultant. I also have 6 video sessions with a pain psychologist and I am going to have an inpatient course too.

I feel fully supported in every step of my journey to reduce my opioid medication. The staff are supportive and caring and tailor my support to suit my needs.

Notes / Questions

Healthwatch responded to patient acknowledging their comments.

Mental Health and Learning Disabilites

Area	Case Details
East Lindsey District Council x 1 • 1 x Signposting	Signposting 1. Case 15001 (09-07-2025) PCN: East Lindsey Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health) Patient commented they had poor mental health issues, were working on it but wanted support with depression and anxiety. Had been under CAMHS a few years ago and this didn't help. Would like to look at options of support. Notes / Questions Healthwatch provided Talking Therapy information, Connect to Support for activites and options.
Lincoln City District Council x 1 1 x General Comment	General Comment 1. Case 14961 (07-07-2025) Providers: Lincolnshire Partnership NHS Foundation Trust LPFT (Mental Health) You helped me before and I'm not sure if you can help me again. And if you can't directly help me, signposting me would be really helpful. I am under LPFT social services and having ongoing issues with my care. Notes / Questions Healthwatch provided PALs information.
South Holland District Council x 1 • 1 x Signposting	Signposting 1. Case 14975 (09-07-2025) PCN: Spalding Providers: Lincolnshire Integrated Care Services (ICS/ICB) Caller is getting lots of calls regarding ADHD Assessment and would like some information to help give the correct response. Do patients and their carers have the 'Right to Choose' or is it best to go through their GP? Just trying to work out when a parent can go down right to choose, is it before QB test? Or before ADOS is sent for ASD. If CAMHs or healthy minds are involved, would that rule out right to choose? Notes / Questions Healthwatch contacted the ICB for this information on behalf of the recipient. Provider Response ICB confirmed - I have chased this with the ICB's Mental Health, Learning Disabilities and Autism (MHLDA) & Child & Adolescent Mental Health Services (CAMHS) Commissioning Team who confirm that patients are able to utilise the Right to Choose pathway when the local service provision has a waiting list that exceeds 18 weeks, and the referral has been deemed to be clinically appropriate. If Healthy Minds or CAMHS are involved, a right to choose referral can still be made.

Patient Transport

Area	Case Details
Boston District Council x	General Comment
'	1. Case 14997 <i>(10-07-2025)</i>
1 x General Comment	PCN: Boston
	Providers: Non-Emergency Hospital Transport (NEPTS) EMAS
	Having booked non emergency hospital transport recently for my elderly parent we have been let down twice with the transport via EMAS. The transport has been cancelled without notice. My parent is in a care home with Parkinson's' and dementia and these experiences cause them extreme distress. I have to rebook the whole transport / appointment thing all over again.
	Now I feel that a wheelchair accessible taxi will be more reliable mode of transport for them however I will need to get further help from an abled body person to help me push them in the wheelchair as I am disabled myself.
	Notes / Questions
	No patient details provided.

East Lindsey District Council x 2

- 1 x General Comment
- 1 x Signposting

General Comment

1. Case 15050 (29-07-2025)

PCN: First Coastal

Providers: Non-Emergency Hospital Transport (NEPTS) EMAS

Patient requested information on hospital transport and alternatives for an elderly relative who would be attending an appointment at Lincoln County for an infusion

Notes / Questions

Information provided for Non Emergency Hospital Transport and community car schemes

Signposting

1. Case 15015 (16-07-2025)

PCN: Boston

Providers: Non-Emergency Hospital Transport (NEPTS) EMAS

Relative looking for transport for parent to go from Swineshead to Lincoln County Hospital next week.

Notes / Questions

Healthwatch provided Voluntary Car Scheme(s) and NEPTS information

Provider Response

21/7/25 - Returned call, has now got something arranged. But thank you so much for all the information.

Lincoln City District Council x 1

• 1 x General Comment

General Comment

1. Case 15055 (30-07-2025)

PCN: Lincoln Healthcare Partnerships

Providers: Non-Emergency Hospital Transport (NEPTS) EMAS

Contact was made by a support worker from Framework Housing on behalf of one of their vulnerable residents.

Their resident has been given an appointment to see a specialist orthopaedic surgeon at the Claremont Hospital in Sheffield on Friday 1 August 2025. Patient needs transport options to ensure that they can attend this appointment. Appointment is at 6 pm and client lives in Lincoln.

Notes / Questions

Information provided to Support Worker - Non Emergency Transport; Voluntary Car Schemes in local area and Connect to Support

Social Care Services

Area	Case Details
South Holland District Council x 1	Formal Complaint
• 1 x Formal Complaint	

1. Case 15012 (16-07-2025)

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

 $\label{thm:complaint:procedural} FormAL\ APPEAL\ \&\ URGENT\ COMPLAINT:\ Procedural\ Failings\ in\ DST\ -\ Immediate\ Reinstatement\ of\ Full\ NHS\ Continuing\ Healthcare\ Funding$

I am writing on behalf of my parent who holds Health and Welfare Lasting Power of Attorney and acts as Family Representative for grandparent

Master Evidential and Legal Challenge Pack and Formal Complaint,

The pack demonstrates that:

- The Fast Track Pathway was lawfully triggered and must not have been withdrawn without clear, robust and up-to-date clinical evidence of significant and sustained improvement, which does not exist.
- The Decision Support Tool process breached multiple statutory safeguards under the National Framework (October 2022), the Care Act 2014, the Mental Capacity Act 2005, the Equality Act 2010, and the binding principles in Coughlan [1999] EWCA Civ 1871.
- persons current needs clearly meet the statutory definition of a primary health need and remain the lawful responsibility of the NHS.

Explanation, evidence and reasons provided for appeal

Notes / Questions

Healthwatch copied into this concern, original to CHC; Also copied in were Safeguarding; Voiceability; Dementia Support Agency

Other

Area	Case Details
Lincoln City District Council x 1 • 1 x General Comment	General Comment 1. Case 15021 (21-07-2025) Providers: Connect Health Services / Cora Health - Pain Management Pain Management Lincolnshire pain management is now in my opinion utterly pointless they offer no treatment other than to tell me how to do my tasks over a longer period. They need to offer actual treatment. I need facet joint injections as I have been told this is about the only way to ease my pain. Lincolnshire pain management no longer offer anything in way of actual help. If I could talk or think the pain away I would be ok! I've been referred and discharged 5+ times now because nothing they can offer is of any use! Notes / Questions Healthwatch suggested speaking with their GP to see if a referral to MSK would be suitable.

Not Specified

Area	Case Details
Lincolnshire Integrated Care Services (ICS/ICB) x 1	General Comment
• 1 x General Comment	

1. Case 15052 (29-07-2025)

Providers: Lincolnshire Integrated Care Services (ICS/ICB)

Every-one facilitated a discussion via the Lincolnshire Military and Veteran Network on the challenges faced by the armed forces community when accessing NHS Services. This discussion was in preparation for the second Armed Forces & NHS Lincolnshire Symposium that was held at RAF Cranwell on 03 June 2025. Discussion themes included:

- Access to NHS Services:
 - Complexity of referral routes and lack of follow-up once referrals have been made meaning that some individuals are left in limbo and unable to 'wait well'.
 - Referrals not being actioned despite individuals being informed they would be referred.
 - Inability to match appointments to local transport availability leading to individuals having to cancel or miss appointments due to lack of available transport.
 - Lack of understanding of available NHS services due to technical language being used to describe services.
- Transition from the armed forces:
 - Protracted timescales to transfer medical documents from service to civilian services.
 - Lack of a consistent approach by GP surgeries when registering armed forces veterans.
 - Lack of dental services and ability to register with a Lincolnshire-based NHS dentist.
 - Armed forces need to do a better job of preparing individuals during the leaving process.
- Transition from CYP to adult services:
 - Appears to be a lack of dedicated pathways to support armed forces children and young adults
 - Lack of consistency in transferring position on a waiting list from one county to another when the family is posted (disadvantaging the child or young adult).
 - Lack of understanding amongst armed forces families of what CYP support is available 'outside of the wire'.
- Lack of awareness of the needs of the armed forces community:
 - Armed Forces Covenant does not look to advantage the armed forces community; it is
 designed to reduce disadvantage due to the unique challenges faced by the armed forces
 community.
 - Lack of understanding of the associated challenges within the wider health and social care
 workforce. <u>Veterans Support Service</u> offers a free 1-hour Veterans Awareness Seminar for
 those who support the armed forces community.
 - $\circ \;\;$ Lack of GP awareness of veteran specific support schemes.
- Information Sharing/Data:
 - Lack of information sharing protocols leads to individuals having to tell their story several times and creates delays in providing available support.
 - Delays in information sharing and subsequent delays in provision of support leads to a lack of trust and individuals disengaging with the 'system'.
 - Armed forces data not been collected on a consistent basis leading to a lack of understanding of the true need across Lincolnshire.
 - Lack of clarity on who is best placed to collect armed forces community data.

Note: Many of the themes highlighted above were discussed at the Armed Forces & NHS Lincolnshire Symposium on 03 June 2025.