

# healthwatch

Kingston upon Hull

---

## Intelligence Report

April 2020

---



## Contents

1. Introduction.....	3
2. Contact Statistics.....	4
3. Intelligence Received – April 2020.....	6
• 3.1 HUTH.....	8
• 3.2 GP Surgeries.....	10
• 3.3 Humber Teaching NHS Foundation Trust.....	13
• 3.4 Pharmacists.....	14
• 3.5 Voluntary & Community Sector.....	15
4. Theme Breakdown – April 2020.....	16
5. Theme Breakdown – January 2020 to April 2020.....	17
6. Compliments.....	18
7. NHS Complaints Advocacy Intelligence.....	21
8. Feedback form.....	26

## **1. Introduction**

The details in this report apply to April 2020 and refers to all the intelligence that Healthwatch and the NHS Advocacy Service received from the public during this period.

There are a couple of new additions to this month's report; we are now able to provide details of the time frames for when the experience occurred, details of PCN's and statistical information from the NHS Complaints Advocacy service. We have compared the data received by the NHS Complaints Advocacy with the data Healthwatch received to identify some common themes across both areas. We have also added a feedback form for commissioners to populate and return to Healthwatch.

All data is anonymised and is based solely on the patient experience. For the purpose of the report, we have categorised the patient experience under appropriate headings and we have also added some real "quotes" to demonstrate the values of "openness and transparency".

The report identifies the number of contacts received by Healthwatch. It also provides a breakdown of the chosen method of contact that people used to get in touch with and their reason for contact. Please note that the number of contacts differs from the amount of comments made about a service, due to people making multiple comments about a service during one contact.

The report also provides details of the types of services and the nature of the concerns and compliments that members of the public reported to Healthwatch during the month of April.

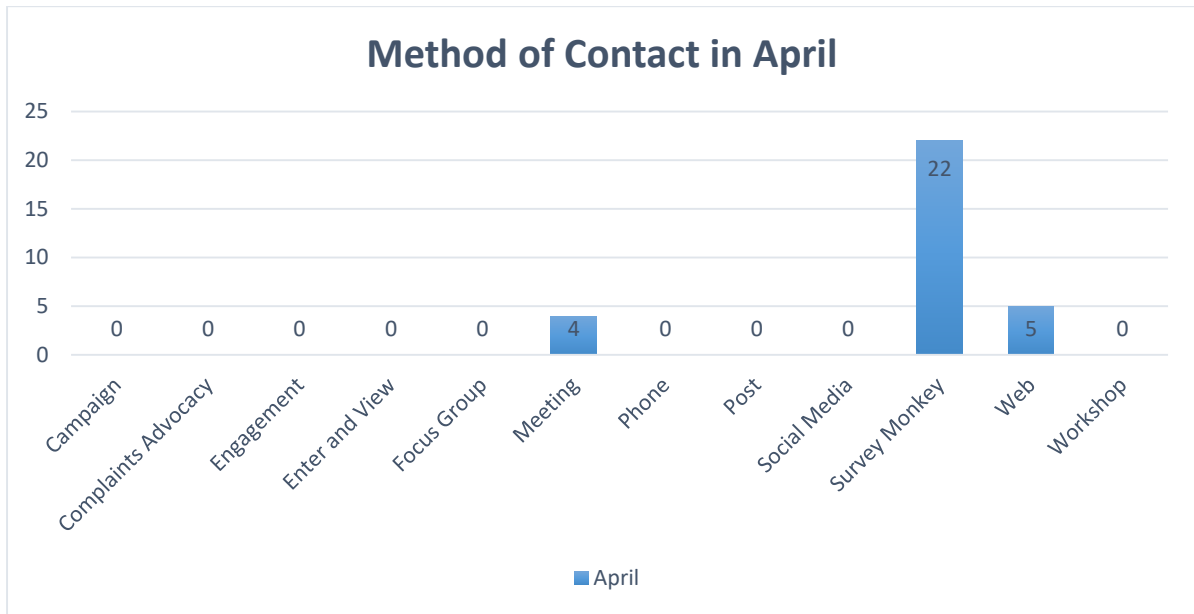
The services highlighted from the intelligence are as follows:

- Hospital
- GP Practices
- Mental Health Services
- Pharmacists
- Voluntary Sector Groups

The report also summarises some of the themes/trends that the public have raised with Healthwatch that have begun to emerge over these monthly reports since January 2020. Please note the quotes reflected in this report are exactly as they were written. For that reason, we apologise for the grammar and odd spelling.

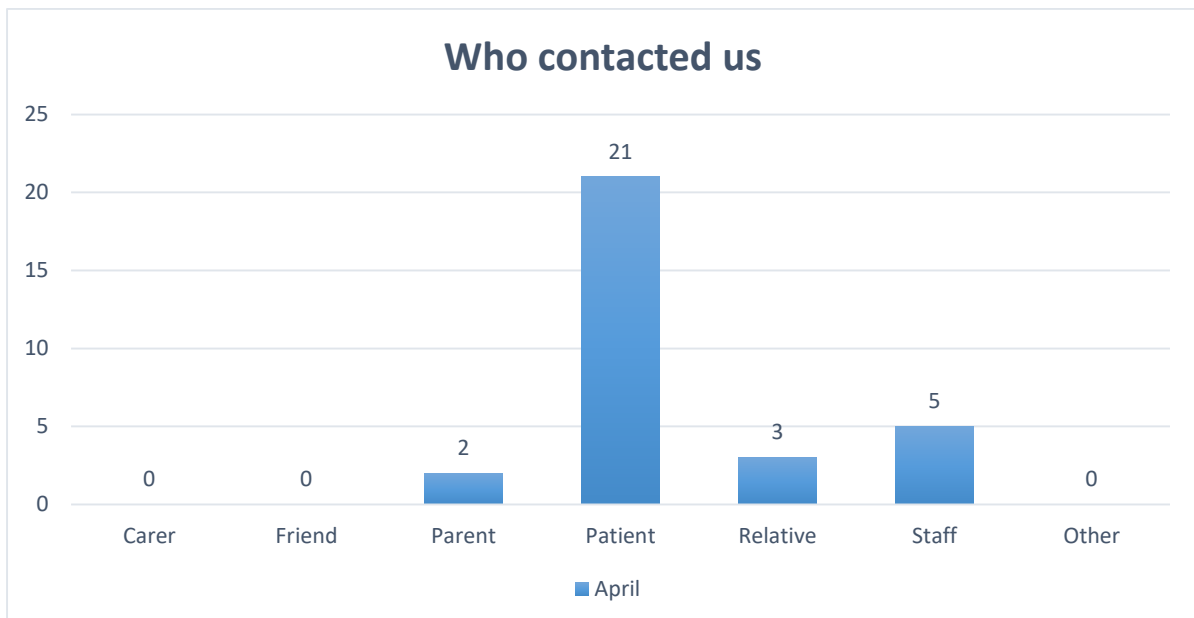
Please note that Healthwatch received all the comments in good faith. Healthwatch have not investigated any of the concerns raised and have acted in accordance with their role and responsibilities of Healthwatch.

## 2. Contact Statistics

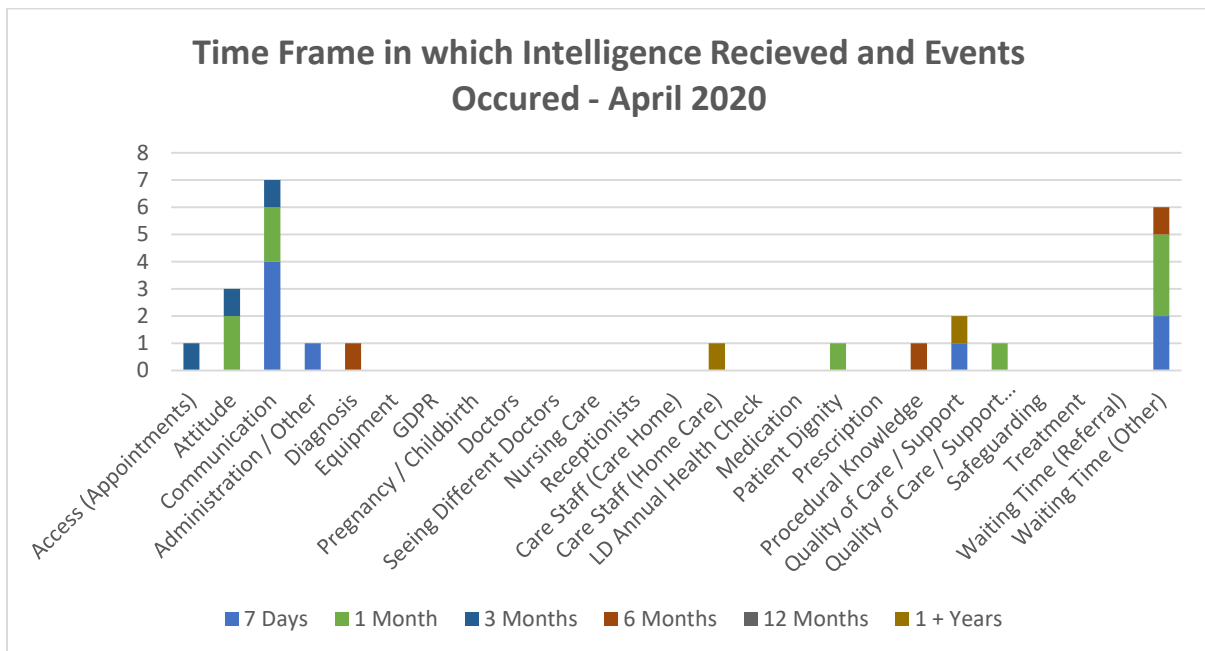


We received a total of 31 contacts during the month of April. It is important to point out that the number of contacts differs from the amount of comments made about a service, due to people making multiple comments during one contact. The graph above identifies the method of contact that people chose to use. The website contact refers to emails received through our site.

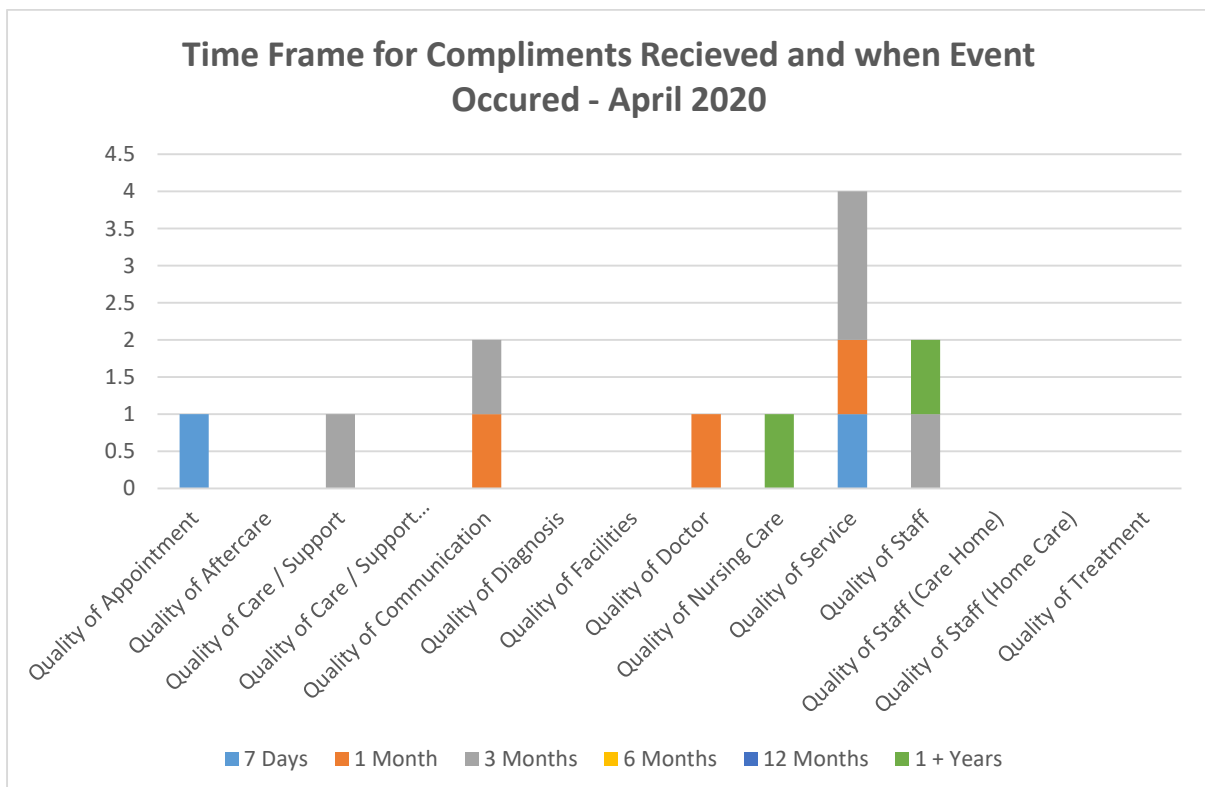
The graph below provides details of who contacted us, with the most contact being made by the patients themselves.



The graphs below provide the time frame of when the experience occurred, along with the category the experience relates to.



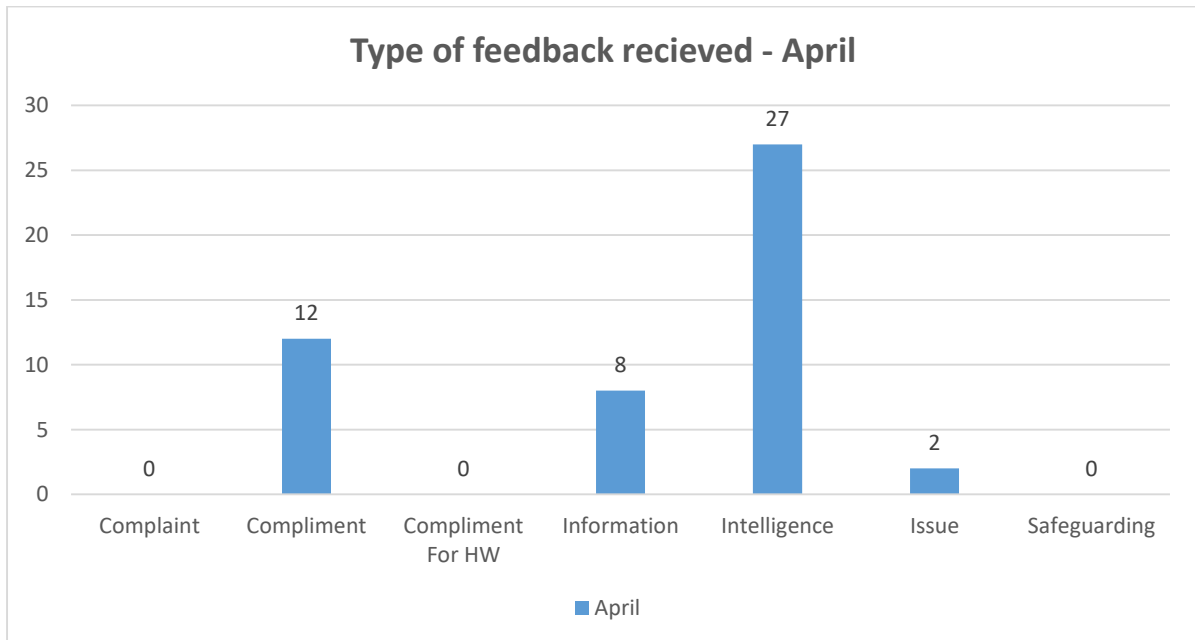
The following graph specifically relates to compliments that were made about services.



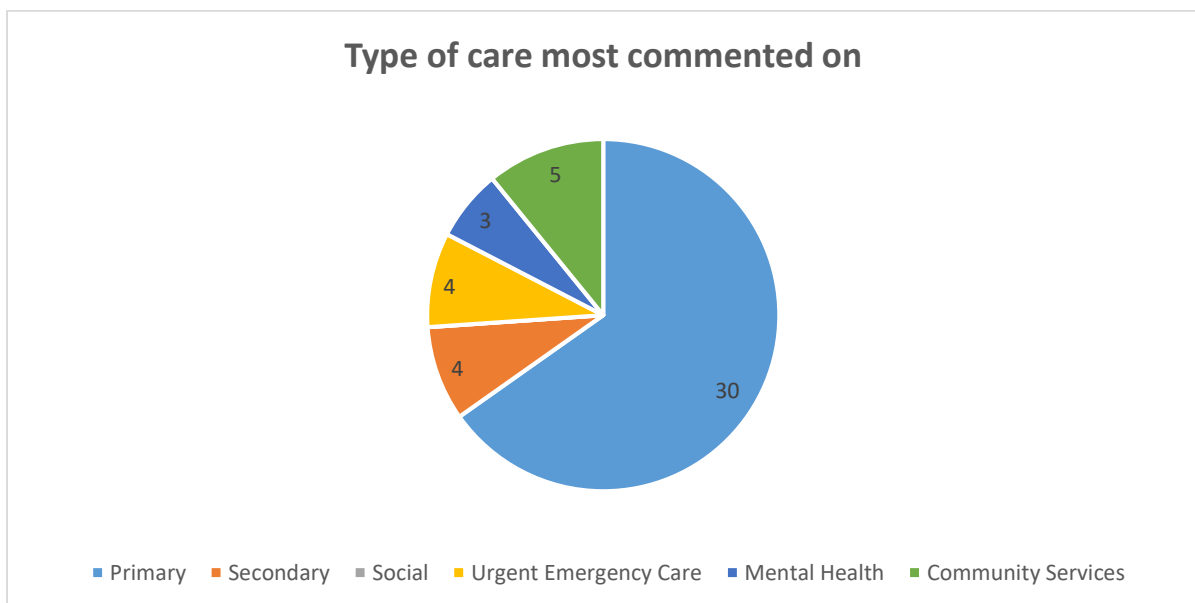
### **3. Intelligence Received**

#### **Overall Intelligence Statistics for April**

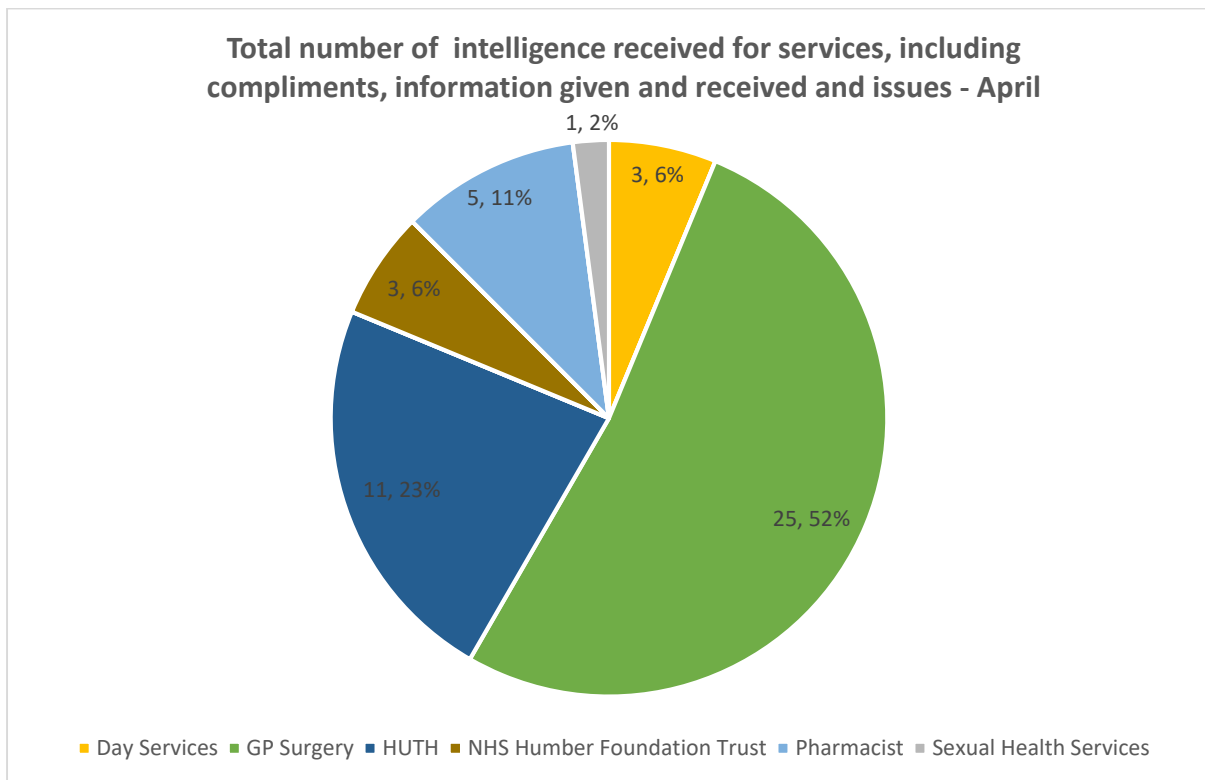
The graph below provides a breakdown of the purpose of the contacts Healthwatch received during April.



The graph below provides details of the services that received the most comments this month, with primary receiving the most comments.

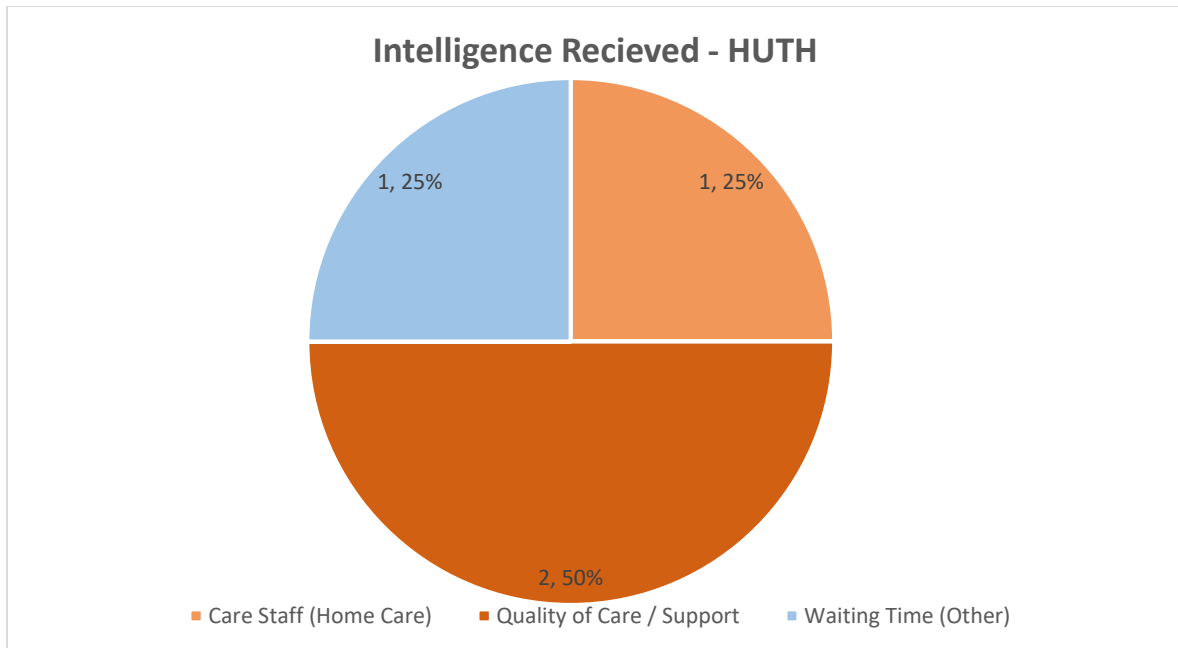


The graph below provides a breakdown of the services and the total number of comments that Healthwatch received, which in April was 48.



### **3.1. Intelligence Received - HUTH**

#### **Statistical Information and Graphs**



The graph above provides a breakdown of the number of comments made in relation to HUTH. There were four comments in all which were in relation to the quality of care and support, waiting times, being discharged without the correct support and gaps in community services; the latter impacting on the length of stay in hospital and the carers ability to care for their loved one.

#### **Intelligence Received/What people told us**

**Castle Hill Hospital (Acute Care Unit)** – *‘Despite all the wonderful care from different disciplinarians and also in spite of me being an experienced health care worker in the same Trust I have sometimes felt lost and abandoned and in a quandary as to what to do when my father has shown some signs of deterioration when at home. There has been little support for us in the Community and the support we have received has only been obtained by me ringing round and asking for it. There has been no contact from anyone unless I ring them, apart from the community dieticians, who have been in touch and visited my father once.*

**Castle Hill Hospital (Acute Care Unit)** - *At one point my father had a nasal gastric tube in situ and a feed was put through this daily. I had to manage this myself and ensure this was administered properly and was told that if I hadn’t been willing to do this my father would’ve had to stay in hospital for months whilst having this feed as there is no community support for a feeding tube. Taking total responsibility for the feed was sometimes difficult as I was working full time myself, was on call every other week, and couldn’t always be at my parent’s home. Also no one else in the family was able to help with this, for several different reasons, my mother is disabled and my brother is colour blind and could not read the PH sticks, so it was totally up to me and I had no freedom to go very far.’*



**Castle Hill Hospital (Acute Care Unit)** *'My thoughts during my father's illness were what would have happened to him if he had not had a caring, determined family to support him? As there was not much support from in the community.'*

---

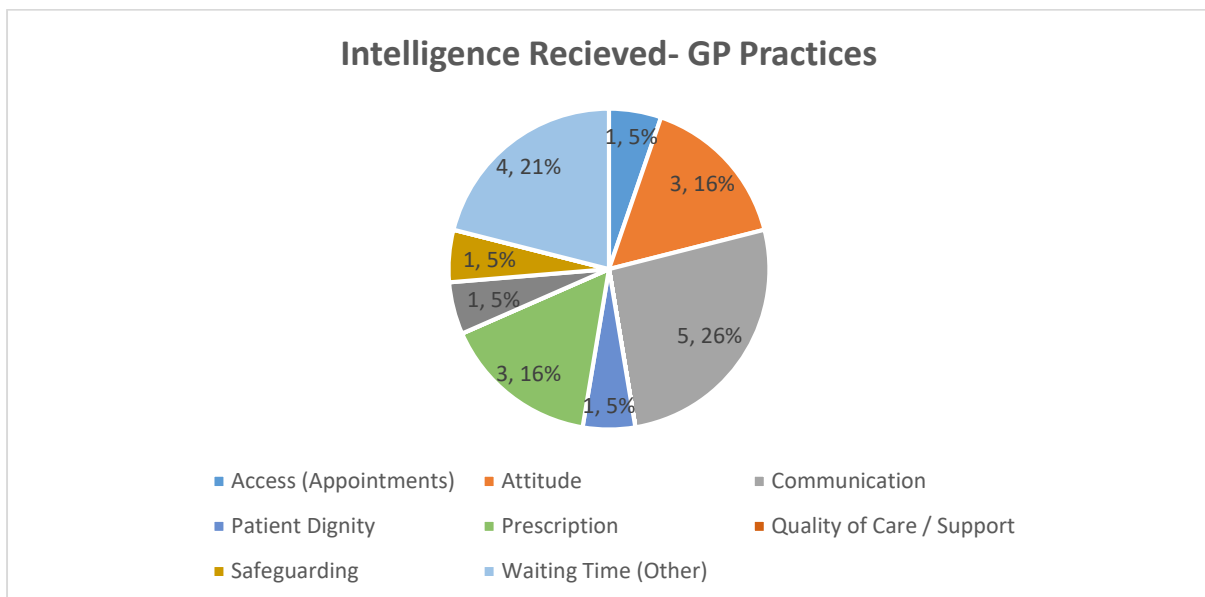
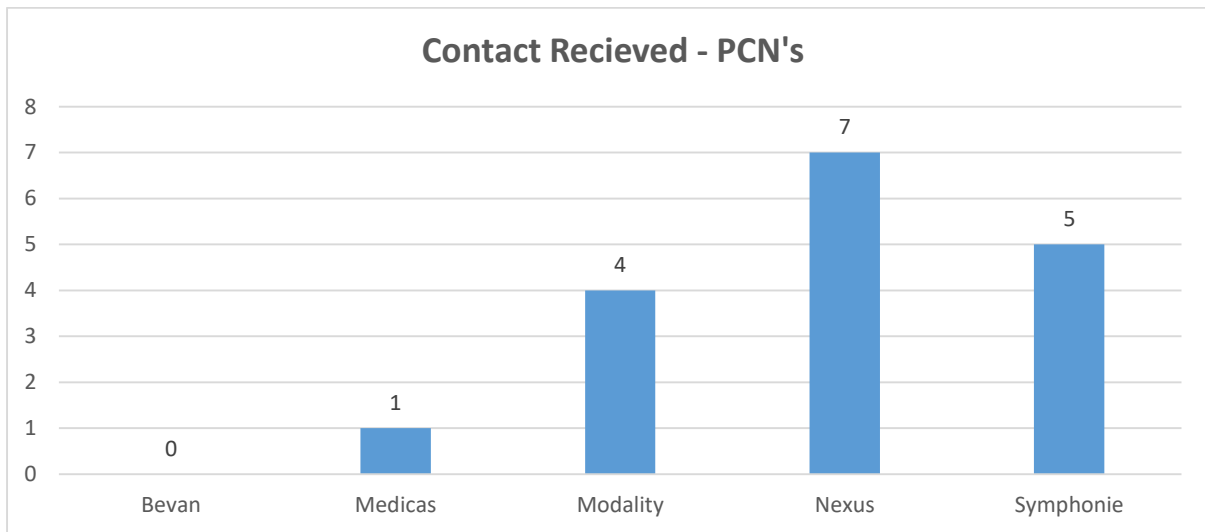
**Ambulance Services** – *'Fell downstairs home alone couldn't move called 999 said couldn't send anyone for 3hrs'*

---

### **3.2. Intelligence Received - GP Practices**

#### **Statistical Information and Graphs**

The graph below provides a breakdown of the PCNs and the number of comments made. Nexus received the most comments during the month of April closely followed by Symphony and Modality. Unfortunately, we are unable to provide a further breakdown of GP practices due to people not always providing the information. We are in the process of correcting this so it is hoped we can provide this additional breakdown in future reports.



The graph above provides a breakdown of the reason why people contacted us during the month of April, with the majority being in relation to communication, quality of care and waiting times.

Below you can find some examples of the feedback in the form of quotes that Healthwatch received. Please note that where possible we have provided the name of the GP surgery.

### Intelligence Received/What people told us

**Name not provided** – *‘Bad attitude of some staff’*

---

**Name not provided** – *‘Prescription printed off instead of sending to the chemist and no apology for the extra stress it caused’*

---

**Name not provided** – *‘The surgery called to make a telephone appointment regarding blood tests I had had taken in DECEMBER. Yes...4 months later. The appointment was made for the same day. I am still waiting for the call 3 WEEKS later’*

---

**New Hall Surgery** – *‘No chance to talk to anybody. No chance to see anybody, ages listening to recorded information I do not need.’*

---

**Oaks Medical Centre** - *I can't get to see my COPD nurse or even a call back only on phone diagnosis with illnesses. Can't get no support to use my app for repeat prescriptions due to needing a face to face to activate it for on line repeats via app but can't use it in place I've got asthma latent, anxiety mental health and tremors just a few spinal arthritis too. Couldn't get a call out either for my son early December not even 111 100% he had Covid-19 nearly died I'm an ex support worker in care so helped some still not tested but ok now'*

**New Hall Surgery** – *‘Spent an hour on hold then when answered call handler hung up, had to wait another half an hr to get through. When eventually spoke to a call handler she couldn't find any record of my last call with a nurse. Common experience from this practice recently’*

---

**Calvert/Newington Medical Centre** – *‘I need cancer diagnostic tests, told the GP I had poor hearing but they contacted by phone. They basically told me I didn't matter during Covid-19 and because I'm 65 I am disposable. I asked that my consultation not be done by phone as I am hard of hearing, yet the GP telephoned me. The GP involved basically told me I didn't matter because of the Covid-19 problem.’*

---

**Sydenham Group Practice** – *‘No social distancing in place, no segregation of those ill and those not, felt at risk, around 10 people in at once’*

---

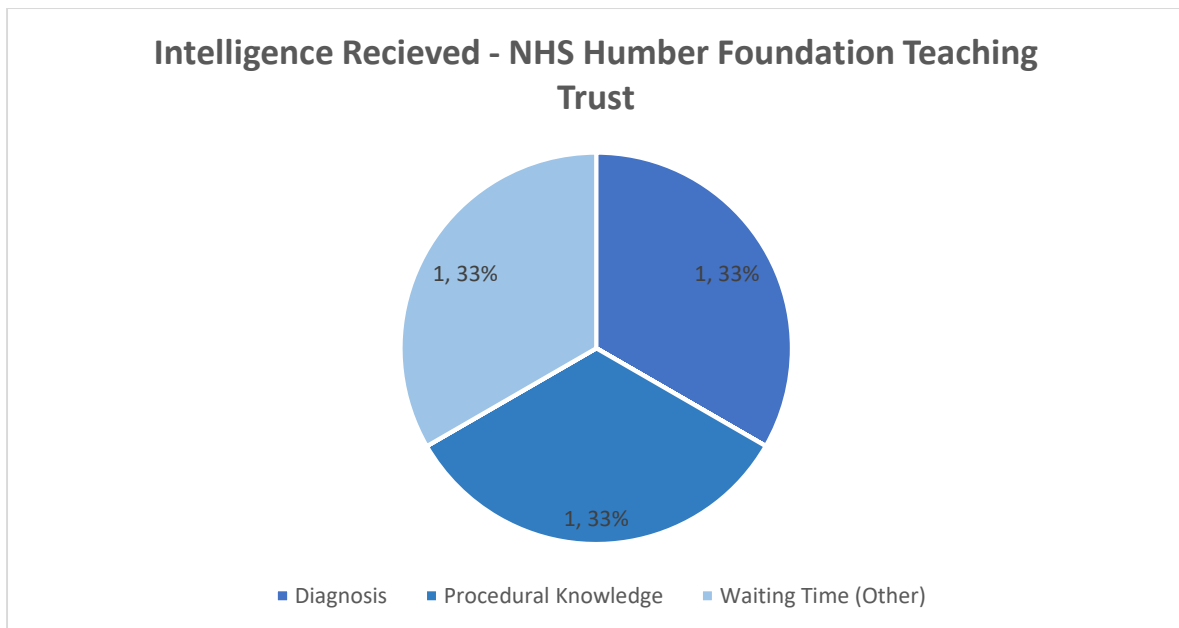
**Haxby Orchard Park Surgery** – *‘Beginning March I emailed them on a previously agreed email address asking for our repeat prescriptions to be sent to Boots in Orchard Park a week before they were due. I emailed a second time to make sure they had got the email. Went to collect and they weren't there Went to reception and was basically called a liar as they couldn't see the requests due to the email being secure. I make a complaint. Then again in April I again email in plenty of time due to the holiday weekend. Again I resend after the weekend to make sure the pharmacy has been sent the prescriptions and told yes they would get them.in 48 hours. Despite it being a week since I originally requested them. I'm on controlled meds I can't have a break a further 48 was too late so I reply saying as I had requested these a week previous so I didn't run out having to wait a further 48 hours was unacceptable and too late. I had originally emailed on 9th, repeat email on 14th this was now 15th I ran out on 15th. I'm*

*told they were at pharmacy. As I'm vulnerable in a wheelchair and no transport I arrange for someone to go collect them at Boots but when they got there The pharmacy had not received any prescriptions for me or my family all on repeats since beginning march the volunteer had made a wasted journey. I ring Haxby Group to complain but no one available. So I email. They call me back Friday and tell me prescriptions definitely at Boots. By this time its late Friday 17th I've been without medications for 48 hours two of which I'm supposed to take every 12 hours. I call the volunteer again and he gets there, only to find the pharmacy didn't have all the requested medications he was to wait until Sat afternoon for them all. By which time both myself and my husband had been without any meds for 72 hours. Which was not pleasant considering two of the medications are supposed to be taken every 12 hours'*

---

### 3.3. Intelligence received - Humber Teaching NHS Foundation Trust

#### Statistical Information and Graphs



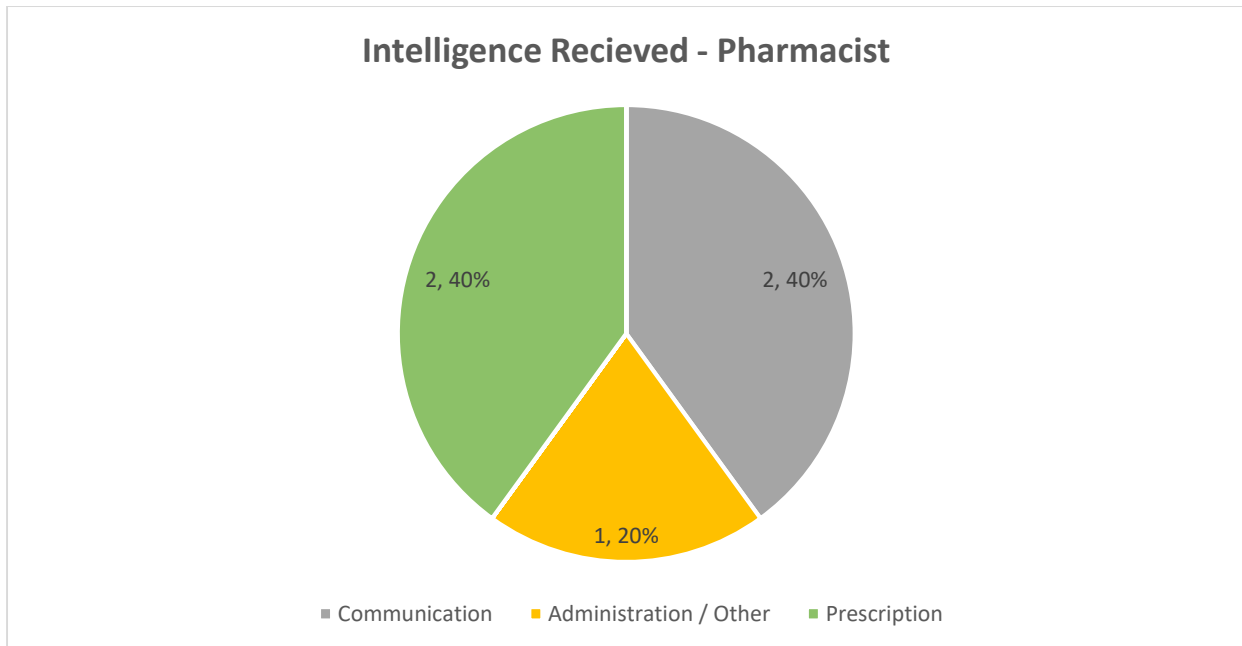
There was only one comment received by Healthwatch in relation the Humber Teaching NHS Foundation Trust but this comment touch upon three areas; Diagnosis, Procedural and Waiting times.

#### Intelligence Received/What people told us

**Child and Adult Mental Health Services** – *“I have concerns about my sons ASD Assessment that was carried out by CAMHS. I have previously addressed my concerns with the Team Leader and I have been waiting 2 years for an assessment to be carried out and when my son finally got his assessment, I was told my son is not on the ASD spectrum. I strongly disagree with this outcome. The actual report that I got from CAMHS reads as if there should be a diagnosis but ultimately there was no diagnosis made. My son has now been out of proper education for the last 3 years and I cannot find the right support for him. I have spoken to psychiatrists before and they understood where I was coming from in terms of my son’s behaviour. I do not understand why CAMHS are not acknowledging my concerns I know my son better than anyone and I also work with children so I have a good idea how children should behave. I just want the right support for my child but no-one seems to know what to do. I am prepared to pay for a second opinion but was told it will not make a difference and it would be invalid”.*

### 3.4. Intelligence Received - Pharmacists

#### Statistical Information and Graphs



This month we received comments about Pharmacists that touched on Communication, Administration and Prescriptions.

#### Intelligence Received/What people told us

**Boots Pharmacy Location not provided** – *‘Not happy with Boots; Never having scripts ready and Charging £5 for the delivery of scripts’.*

---

**Morrison’s Pharmacy** – *‘I have various patients who have their scripts sent electronically to this pharmacy. Due to having to self-isolate, or being identified at risk, they have been worried how to get their prescriptions as no one can get through on the telephone to ask if they will deliver or to even check that their meds are ready before I send a volunteer. I have been trying at least 3 times a day Mon-Fri for the last 2 weeks and have even sent 2 emails to which I’ve had no response. Patients are getting very upset as they too are ringing and ringing, no answer, then after a couple of mins the phone line goes dead. I have sent volunteers as we can’t get through, only to find meds aren’t ready etc etc. It’s not good enough! I realise they are very busy but so are the other chemists and they all manage to answer the phone at some point’.*

---

**Name of pharmacy not provided** – *‘I order my prescriptions online using SystmOnline, and it told me that my prescription would be ready in the usual 2 days. When I got the pharmacy attached to my practice, there was a sign saying allow 7 days ... wasted journey, no tablets’*

### **3.5. Intelligence Received – Voluntary & Community Sector (VCS)**

#### **Statistical Information**

This month we received intelligence from certain VCS Groups, whose names can be seen below. Each agency raised concerns on how Covid-19 and the current restrictions is having a direct impact on their service users. Please note we have not grouped the comments into themes but felt it was important to present their feedback to commissioners.

#### **Intelligence Received/What people told us**

**MESMAC Hull** – *‘Loneliness while with a group of people. Service users who are LGBT and are in lockdown with a family who may not know or understand or agree with the decisions of the young person and how they are coping without their usual peer support network.’*

---

**Hull Churches** – *‘Lack of face to face contact with people. A large number of volunteers are self-isolating themselves, so the remaining volunteers are pushed for time when on home visits. They are also lacking in PPE so are unable to interact in the same way with the service users. A large number of service users have no access to internet or technology to be able to interact in other ways and even if they, unsure how many would be able to use it without being shown first.’*

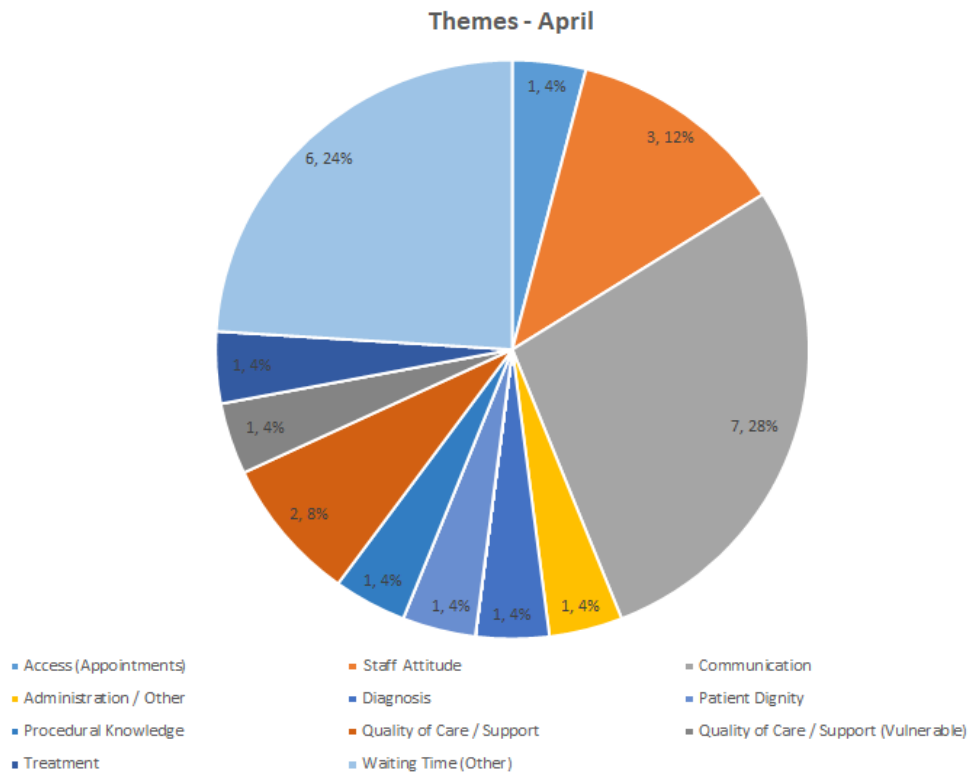
---

**Purple House** – *‘Purple House - volunteers are struggling at the minute as they feel valuable when volunteering so not being able to do this at the moment makes them feel worthless or without a purpose. They are trying to overcome this by holding Zoom events and have created a Whatsapp group for the volunteers and staff. Technology is however not for everybody.’*

---

**St Stephen’s Neighbour Centre** – *‘St Stephens Neighbour Centre - struggling to be able to get permission to have children’s email addresses to be able to hold Zoom meetings with them so they can continue to connect and see each other while they are unable to attend the centre for their usual clubs’.*

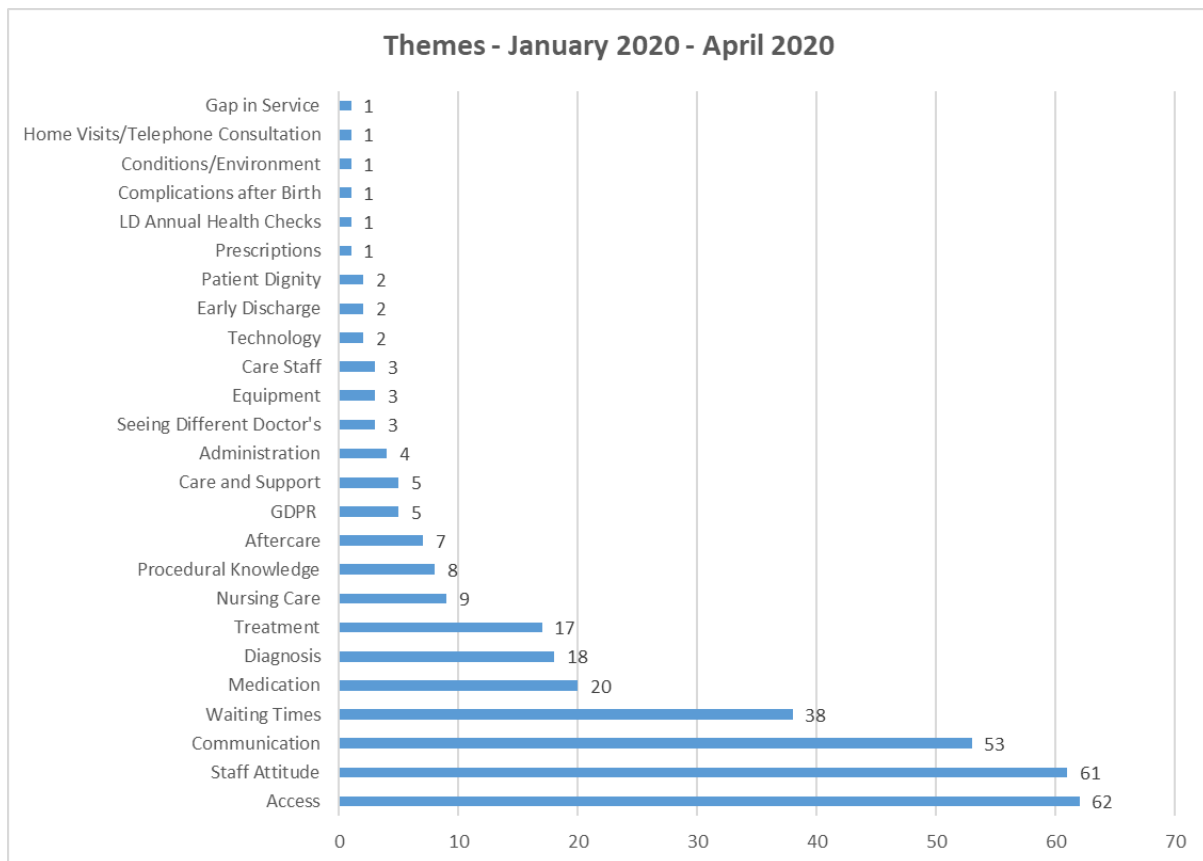
#### 4. Theme Breakdown – April 2020



This section provides a breakdown of the types of themes that have emerged during April. The graph provides the number of comments and percentage for each theme identified. A lot of the themes are similar to previous months such as, Communication 28%, Staff attitude 12% and waiting times 24%. However, this month we received less intelligence in relation to the public accessing appointments (4%).



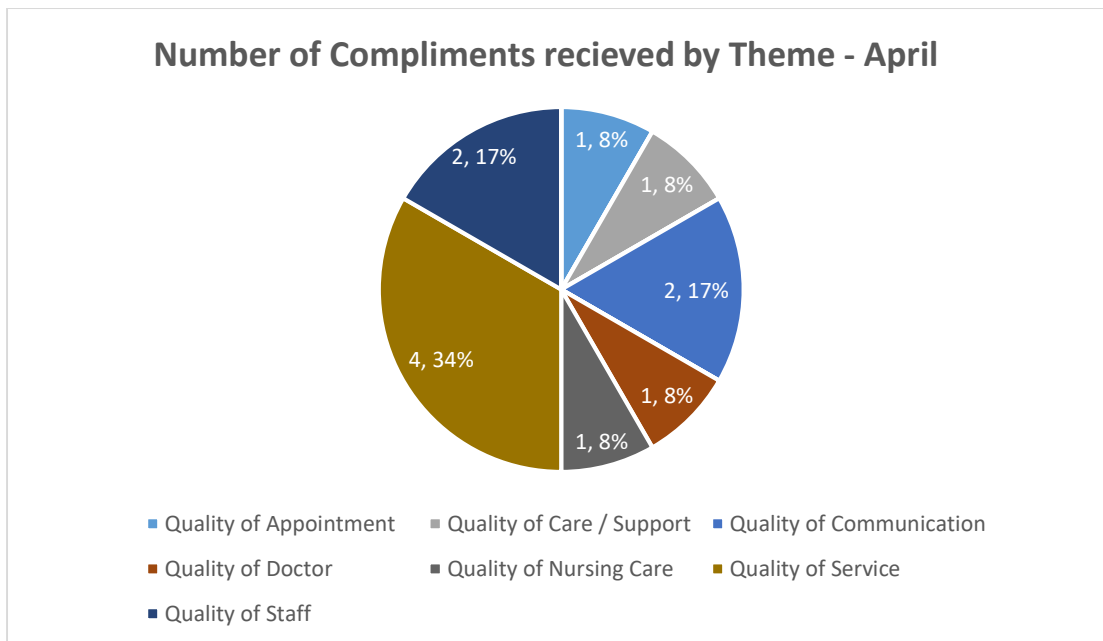
## 5. Theme Breakdown – January 2020 - April 2020



The graph above provides information on all the emerging themes since January. This month we have identified a total of 25 themes. However, the main themes continue to be access to appointments, staff attitude and communication.

## 6. Compliments – April 2020

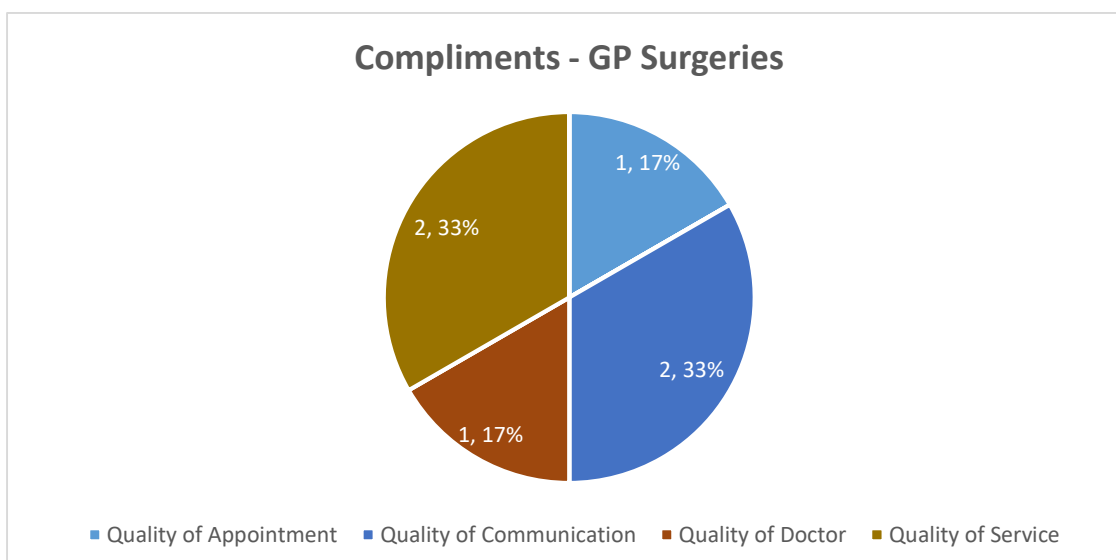
### Statistical Information



During the month of April, Healthwatch received a total of 12 compliments. The graph above provides a breakdown of the themes identified. The top three themes for this month are the quality of the service, the quality of the staff and quality of communication. All compliments received were in relation to GP practices and Hospital services.

### Compliments Received

The following graph refers to the compliments received by Healthwatch in relation to GP practices. The graph highlights the number of comments followed by the percentage.



What people told us

**Surgery name not provided** – *‘I left a message with the receptionist who e-mailed the GP. I got a call back within 2hrs.’*

---

**Surgery name not provided** – *‘Excellent. I spoke to my doctor as I was slightly concerned about my breathing after being unwell 4 weeks ago. He spoke to me on the phone at first but then held a video call so he could watch my breathing in case there was an issue’*

---

**Clifton House Medical Centre** – *‘I was due my regular injection, my GP called to say it was cancelled as clinics were merging, a new slot was quickly found - I felt safe at the surgery and was given a 3 month injection instead of my usual one month - saving me attending for the next couple of months and also NHS resources.’*

---

**Marfleet Group Practice** – *‘Rang GP surgery and doctor rang me back and explained my symptoms were due to gallbladder.’*

---

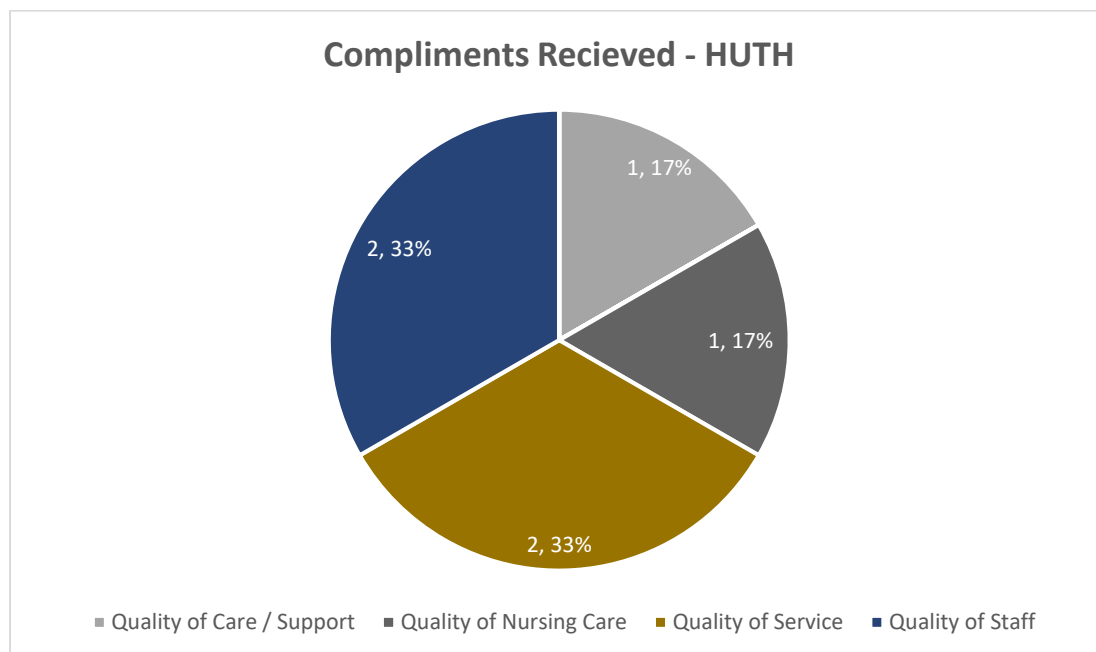
**The Avenues Medical Centre** – *‘I’m due for my B12 injections which I cannot go to the doctors for at the moment. They called me before I even remembered and have sorted me out a prescription to pick up from my local pharmacy. Lady on phone was so lovely’*

---

**Surgery name not provided** – *‘Excellent’*

---

HUTH



The graph above provides a breakdown of the compliments that Healthwatch received in relation to HUTH services., and related to the quality of the nursing care received 33%, and the overall quality of the service 33%. T quality of care/support by individual staff and the quality of staff both ranked at 17%.

What people told us

**No site name or ward provided – ‘Well cared for, all my needs were met.’**

**No site name or ward provided – ‘Pleasant respectful and honest’**

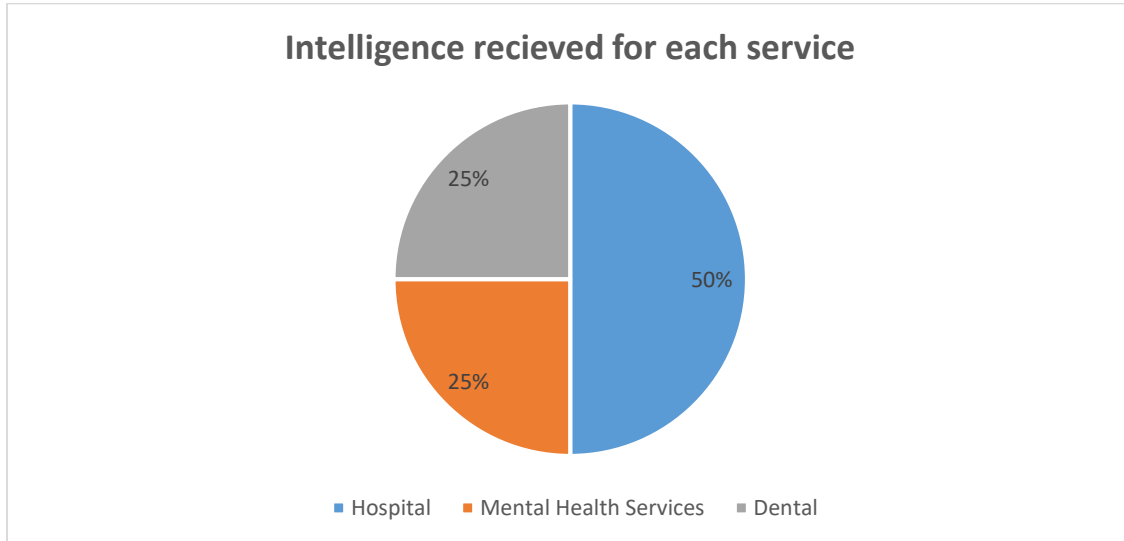
---

**Castle Hill Hospital – Acute Assessment Unit – ‘My 87 year old father was diagnosed with cancer of the oesophagus In January this year. We have had several contacts with the Oncologist, the Acute Assessment Unit at the Queens CHH, the radiotherapy department and ward 30 and 31. We have found the staff really helpful, kind and caring and the service to be extremely good. The staff on the Acute Assessment Unit, are extremely caring, patient, kind and helpful too and we appreciate everything they all have done and will continue to do. The Doctor is always lovely and encouraging and explains things to us with patience and understanding and seeing him in the clinic and having continuity of care with the consultant has made a massive difference to us. We would not want to take anything away from these people as they all deserve a lot of credit and we appreciate their efforts and everything they do for us’**

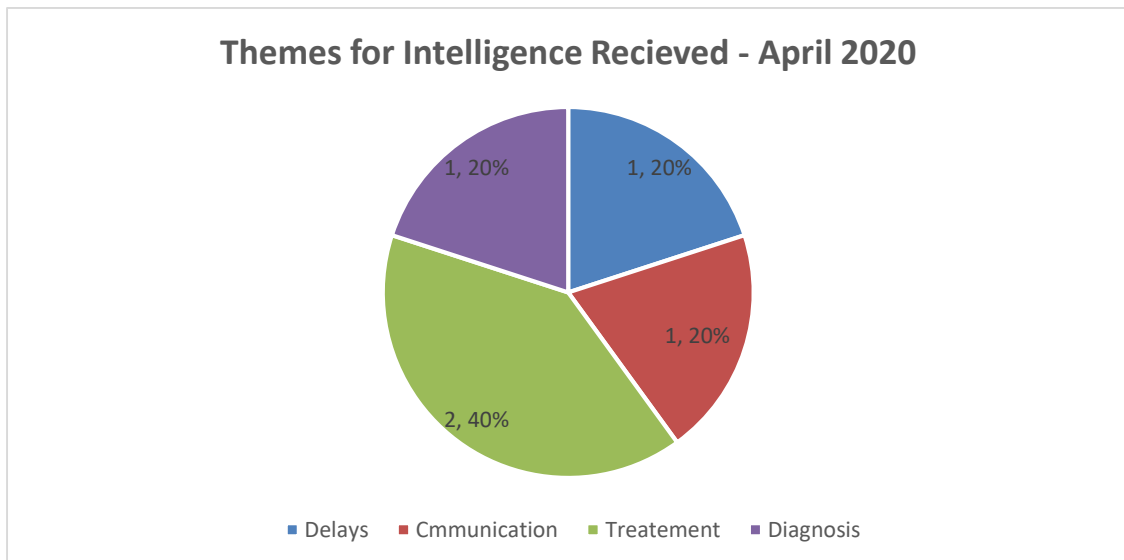
---

## **7. NHS Complaints Advocacy Statistics and Intelligence**

The graph below provides details of the complaints received by the NHS Complaints Advocacy Service during the month of April. The first graph provides details of the types of services and the percentage number of complaints received. Hospital services received the most complaints at 50%, followed by Mental Health and Dental services receiving 25% each.

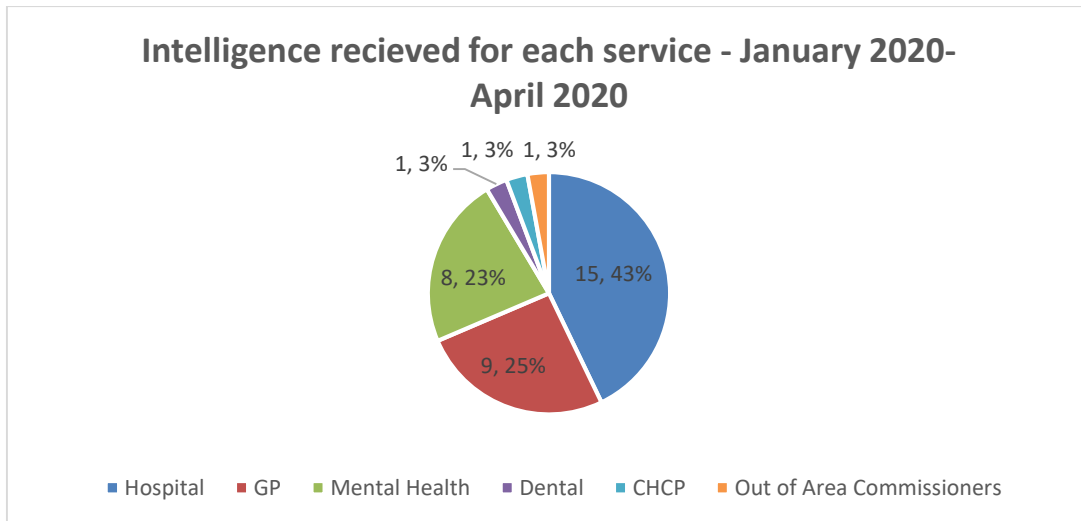


The graph below identifies themes emerging during April. Treatment (40%) received the most complaints, followed by Delays 20%, Communication 20% and Diagnosis 20%.

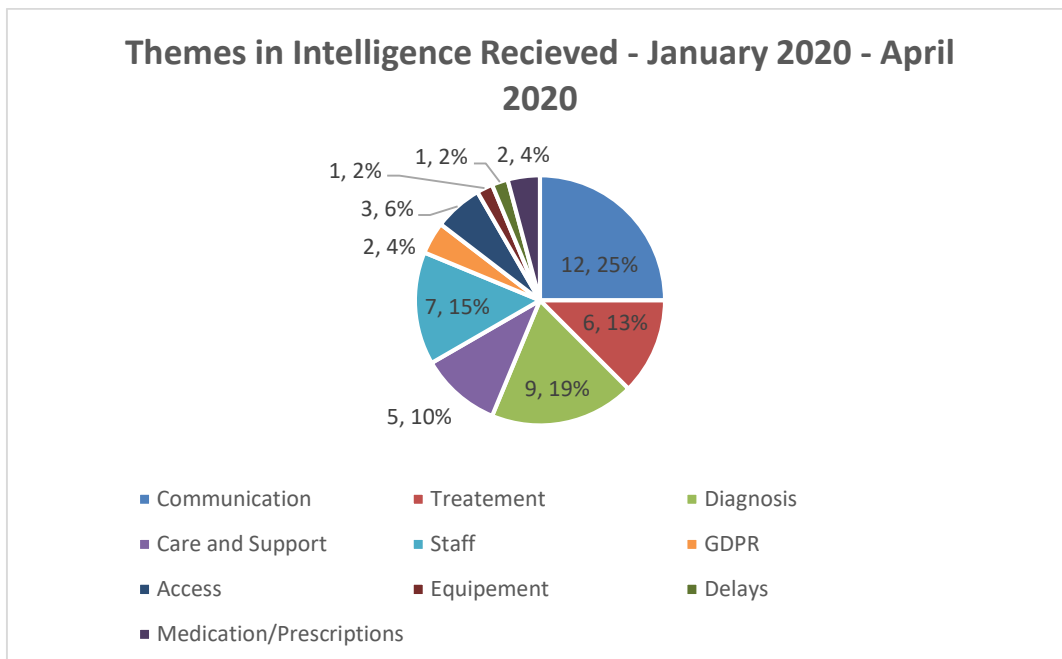


January 2020 – April 2020:

The following graph provides details of the services, the number and percentage of complaints that the NHS Complaints Advocacy Service received for the wider period of January to April. Hospital services (43%) have received the most complaints, followed by GP practices 25% and closely followed by Mental Health services 23%.



The graph below identifies the themes that have emerged since January to April. Communication 25% received the most comments, Diagnosis 19% and Staff Attitude at 15%. When comparing the intelligence received by both Healthwatch and the NHS Complaints Advocacy, communication and staff attitude appear to be the most common factors to date.



What people told the NHS Complaints Advocacy Service.

**Humber Foundation Trust** – *‘Alleged dissatisfactory level of support for depression and dissatisfactory response to expressed intention to self-harm.’*

---

**GP Practice** – *‘Allegation GP insisted patient rely on methadone for control of pain relating to diagnosed chronic osteomyelitis as opposed to conventional pain killers & As yet unexplained reference to diagnosis of cancer included in patient’s medical records (patient not informed of diagnosis prior to discovering information contained in medical records).’*

---

**Out of Area NHS Commissioner** – *‘Alleged breach of confidentiality. Allegation NHS Commissioner consciously divulged identity of victim to perpetrator after victim reported perpetrator’s actions as relating to an alleged Safeguarding issue.’*

---

**Humber Foundation Trust CAHMS** – *‘Breach of patient confidentiality by the Hull CAMHS service. 12 page detailed document with sensitive information including Autism assessment of a 13 year old child sent to incorrect address.’*

---

**Humber Foundation Trust** – *‘Allegation patient was forced to ingest hallucinogenic substance against their will whilst inpatient in Mental Health unit to enable staff to surgically implant an (electronic) foreign object in patient’s body’*

---

**GP Practice** – *‘Patient notified of medical diagnosis and then advised of proposed course of treatment for newly diagnosed medical condition by GP Receptionist with nil scheduled input or review by GP or Practice Nurse.’*

---

**Hospital** – *‘Dissatisfactory experience of palliative care delivered to patient (deceased) including alleged physical assault by fellow patient whilst Hospital inpatient, delay in access and delivery of medical equipment to patient’s home address (post discharge from Hospital) and dissatisfaction with Macmillan Nurse input (post discharge from Hospital).’*

---

**GP Practice** – *‘Difficulty with accessing a GP appointment at GP Practice to seek urgent support with Mental Health issues. Difficulty with actually getting through to Reception Team and then no available GP appointments.’*

---

**Hospital** – *‘Delay and mixed message regarding access to surgery for diagnosed hernia in groin.’*

---

**Hospital** – *‘Alleged delay in confirmation of cancer diagnosis approximately 3 – 6 months after identified nodule in lung.’*

---

**Hospital** – *‘Dissatisfactory care delivered to Learning Disabled patient whilst Hospital inpatient’*

---

**GP and Hospital** – *‘Multiple maladministration relating to care of elderly patient. Suspected mistaken identity.’*

---

**GP Practice** – ‘Maladministration of weekly prescriptions resulting in recurrent delays in access to medication & allegation of inappropriate conduct by GP during intimate examination which is being dealt with on a discretionary basis because the incident occurred 18 months ago.’

---

**Hospital** – ‘Cancelled Hospital outpatient appointment incurring £26.00 out of pocket expenses for taxi fares.’

---

**GP Practice** – ‘Poor communication from GP regarding annual blood test and maintenance of repeat prescription.’

---

**Hospital** – ‘Alleged delay in delivering diagnosis of Cerebral Palsy.’

---

**Hospital** – ‘Patient suffered unsupervised fall from commode whilst Hospital inpatient sustaining a broken neck. Patient (now deceased) suffered from weakness down the left side which complainant feels caused the patient to lose balance and fall.’

---

**Humber Foundation Trust** – ‘Alleged over prescribing of lithium medication approximately 15 years ago which patient believes has caused them to incur kidney failure and cardiac issues’.

---

**Hospital** – ‘Dissatisfactory outcome to assessment of Autistic patient (child) at A&E after episode of turning blue and floppy’

---

**CHCP-** ‘False allegation of physical violence towards Nurse Practitioner and dissatisfactory assessment of pain in hand during same consultation.’

---

**GP Practice** – ‘Dissatisfaction with GP attitude when announcing decision to halt pre-existing prescription of Propranolol (anxiety easing drug) and possible altering of pre-existing pain control medication.’

---

**GP Practice** – ‘Alleged six year delay in delivering diagnosis of deficiency in Vitamin B12 to 15 year old child by GP.’

---

**Hospital** - NHS declined to assess patient as possible candidate for knee surgery due to patient's Body Mass Index (BMI) exceeding 30.

---

**Hospital** - Alleged side effects of surgical mesh used for treatment of hernia.

---

**Hospital** - Dissatisfactory Nursing care delivered to husband (deceased) whilst Hospital inpatient.

---

**Humber Foundation Trust** - Sudden halting of previously successful DEPOT injections.

---

**Humber Foundation Trust** - Confusion regarding sudden halt of medical assessment of 5 year old's traits of Autism / ADHD after initial paediatric assessment in 2019.

---

**Hospital** - Patient's birthing plan changed after initially being informed a C-Section would be performed 1 week prior to due date.



---

**Humber Foundation Trust** - *Dissatisfactory community mental health care delivered to CAMHS patient immediately after discharge from inpatient stay.*

---

**Hospital** - *Dissatisfactory outcome to assessment of elderly patient after attending A&E on multiple occasions within a 7 day time period to investigate symptoms of dizziness and confusion. The complainant is most alarmed about medical staff attempted to communicate outcome to medical investigations directly to patient (whom is confused and allegedly unable to process and absorb information) without including updates to family members.*

---

**Hospital** – *‘Lack of clarity on when surgery for diagnosed gallstones will be scheduled.’*

**Dental** – *‘Delay in treatment for root canal which patient alleges resulted in unnecessary loss of tooth’*

**Hospital-** *‘Dissatisfaction with proposed course of treatment for Multiple Sclerosis (MS). PLEASE NOTE: This is a re-opened case and has been reported previously.’*

---

**Mental Health Services** – *‘Disagreement with NHS's failure to issue diagnosis of Autism for juvenile’*

## **8. Feedback Form**

We request that the feedback form below is completed by commissioners and/or provider responsible for the service to enable members of the public to be assured that their feedback is recognised and acted upon and contributes to ongoing service development.

Please complete the form and return to  
[mharrison@healthwatchkingstonuponhull.co.uk](mailto:mharrison@healthwatchkingstonuponhull.co.uk).

Organisation	Responsible person	Comments/Actions

---

# healthwatch

Kingston upon Hull

**April 2020**

