

Healthwatch Lambeth Information and Signposting Report October 2018 to March 2019

Introduction

Healthwatch Lambeth is the health and social care patient champion. One of our roles is to gather the views of Lambeth residents on their health and social care experience. We do this through engagement activities, outreach, and research.

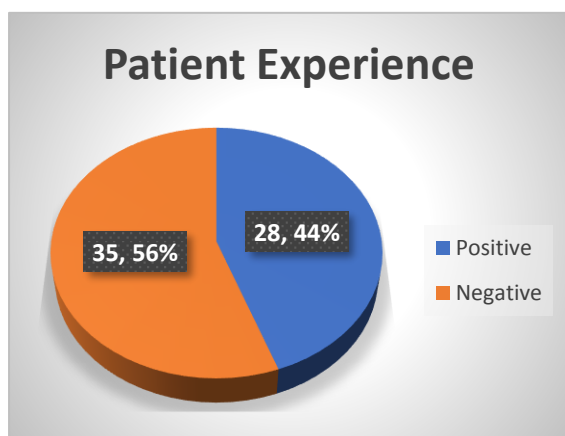
Another role is a statutory duty to provide an *Information and Signposting Service* to Lambeth residents where people can contact us via telephone, email or through our website. We record all calls in our CRM database and produce reports for the relevant service providers. All calls are anonymous although callers may choose to share their name and contact details with a view to follow up with the relevant service provider. Where this happens, callers sign a consent form.

From October 2018 to March 2019, we received 96 calls which was a 100% increase from the previous two quarters of 48 calls. The increase can be attributed mainly to an improved recording system.

Of the 96 calls, GP Practices and King's College Hospital still had the most numbers of calls or contacts: 24 and 23 calls, respectively.

Calls received

Healthwatch Lambeth received 96 calls from October 2018 to March 2019 (six months). Of these, sixty-three (63) or 66% were reporting their experience of services (positive and negative). The remaining 34% (33 calls) were from patients requesting information and signposting to services.



This report is on the 63 calls which were about patient experience (28 positive, 35 negative) in general practice and secondary care (Guy's Hospital, St. Thomas' Hospital, King's College Hospital, St. George's Hospital, and South London and Maudsley Hospital), the Living Well Network, Adult Social Care, Housing, and Lambeth Clinical Commissioning Group. All 63 were about incidents that happened between August 2018 and March 2019.

Of the 63 calls:

- 24 calls (58% negative) were about patient experience in general practice
- 23 calls (34% negative) were about patient experience at King’s College Hospital
- 6 calls (3 negative) were about patient experience at Guys and St Thomas’ Hospital Trust
- The Living Well Network, Adult Social Care, and SLaM each had two calls, all reporting a negative experience.
- 3 calls (all positive) were about patient experience at St. George’s Hospital
- Lambeth CCG, Mental Health Services (provider unknown), and Housing each had one call reporting a negative experience.

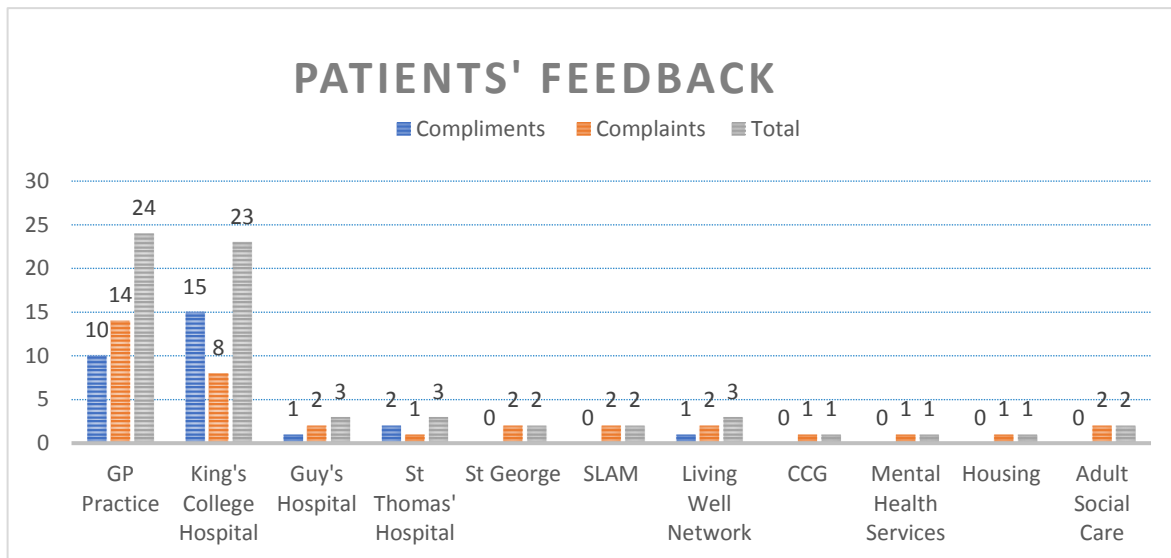


Chart 1: Patients’ feedback between Oct 2018 and March 2019

Summary of feedback on GP Practice

In the next section patient feedback has been summarised into themes including where we have had more than one call about an issue or service.

Positive experiences

a. Staff attitude and booking system

One patient had good experience of the Clapham Park Practice because the receptionist was nice but also reported that signage could be clearer. Another patient recommended South Norwood Medical Centre saying that the doctor was excellent and the booking system is better than their previous practice.

b. Disability-friendly

A patient with visual impairment was very complimentary of their GP who came out to the waiting area, announced the name of the person booked for the next appointment, waited for them and accompanied them into the consultation room. They said this is invaluable in terms of knowing when the doctor was ready to see them, and also providing a positive start to the consultation. They felt that this was an example of good practice which is of

benefit to all patients, but especially those with a visual impairment, learning disability or mental health concern as it was very personable and reassuring.

Negative experiences

a. Staff attitude and quality of care

Patient was refused a prescription for over-the-counter eye drops but GP did not offer alternative medication. They also found GP's attitude "*arrogant and argumentative*".

Patient is unhappy with the way they have been treated for mental health needs by their GP practice over the past eight years. The patient felt not being listened to with their medication.

Patient with chronic pain and unspecified liver abnormalities concerned that the GP [practice unknown] has refused to refer the person for further tests but has not explained why. They report only being able to work for three hours a day and problems going to the toilet. The person [not white British but didn't give ethnicity or nationality] feels discriminated against because of language issues, although they do feel able to communicate with the GP and that the GP understands. '*If I was English it wouldn't be happening.*' Feeling desperate about their situation: '*I only see the dark.*'

Patient is 64 years old. Attended A and E in November 2018 due to chest infection and given antibiotics. Called the surgery and the doctor said '*Well, you don't want to go to hospital again, do you?*' which they found odd. An X-ray showed 2 fractures and spent two days in the hospital due to inability to pass urine. The discharge letter suggested that the GP refer for bone scan. No one from the GP made contact. The only contact was when they requested a repeat prescription and prescription for stronger painkiller. They could not walk and was expecting the GP to follow up but this did not happen. The daughter lodged a complaint early February but this has not been acknowledged. Patient found it very distressing and would like this noted and shared with the practice so that other patients won't have the same experience.

b. Patient having to re-tell story

Patient required foot X-ray because of a long standing condition. Former GP made her feel very welcome but since this GP left, they have seen a different GP each time and all of them didn't seem to know the person resulting to having to retell the story.

c. Booking

Patient felt that accessing GP is becoming harder and harder, sometimes they have to wait for weeks to get an appointment that they can make, making it hard to manage their own care. They had needed to phone everyday for several days running to check for available appointments but the surgery phone number is frequently engaged and it can take a long time to get through. They felt there needed to be a better way of doing things in primary care, with more choice, more GPs and better access to them at times when needed.

Another patient said that the service was good but the waiting time was too long. The staff was nice and the doctor was good, the problem was gaining access to the appointments.

King's College Hospital with 15 positive and 8 negative

Positive experience

Patient from outside London is diabetic and had suffered an injury to their foot after stepping on a nail at work. The foot became re infected and wouldn't heal and local hospital offered surgery/amputation as the only option. He managed to get referral to Kings and was very positive about the care and options they were being given. Patient said: *'I can't fault King's; they are just excellent'*.

Another patient from outside London recently had arm amputated following an accident on the M2. They were very complimentary about the quality of care at King's, saying that it was very positive especially about caring staff and how his care had been discussed and agreed with him. They were also very positive about the arrangements which were being made around the discharge and introduction to a local hospital who will be taking over their care shortly. Only slight concern was that not all the TVs worked well.

Patient had been admitted to a surgical ward (procedure they did not wish to share). They reported that very good care was provided by nurses and doctors. The only thing they wished would improve was the quality of food and choices.

Patient who had been to regular Urology outpatients appointment was very complimentary about the clinic and praised the high quality of care. Another patient attended annual outpatient appointment reported that the *'service is great, staff are good, I would not change hospitals'*.

Patient gave very positive feedback about their experience of volunteers at KCH. They said they were *"marvelous and always helped them get to the place they needed when they felt overwhelmed and confused by the 'busyness' and number of different direction and signs"*.

Mum of four had all children at KCH and called them King's babies. Three were born prematurely. Mother was very positive about the excellent in-patient and outpatient services she had received in relation to her pregnancies. In particular, she thought the professional's warmth and caring nature of the staff made everything very positive even in difficult moments.

Patient said that they are being treated regularly and felt comfortable on each of their visits. They were visiting for a barium meal test, and although they said this was not a pleasant procedure, they felt that the staff were very attentive when the person felt nauseous.

Patient has a long term knee problem that often results in them having severe knee pain. They received an injection in their knee. They said that their appointment went very well and that they had a good experience that day with staff and with the procedure.

Negative experience

a. Booking/Communication

Patient who had X-ray complained of experience of confirming and arranging appointment with the automated phone system, saying it was a *'nightmare'* - leading to attending on the wrong day. Once there, the X-Ray was excellent.

Patient had an annual check-up in Ophthalmology clinic and complained of poor experience of arranging appointments via the automated system which he said is very

difficult to use, and there is often a conflict between the information about the time/day of appointment in letter and the automated service. Also the clinic regularly cancels appointments at very short notice which is not fair. The appointment time/day gets re organised three times each year.

Person has hearing problems and finds it hard to organise things over the phone especially the automated appointments service at KCH. As a result they feel they have to visit the building to check and make future appointments. They confirmed that they did receive written confirmation appointments, but for various reasons they often needed to change the dates/times - something they found very hard to do on the phone.

b. Pharmacy location

Patient was very happy of Urology outpatient clinic care. However, was unhappy with the (newish) on site pharmacy operated by Lloyds which had moved to a 'cabin' outside the dentistry school. Since its moved you now have to go outside in the cold to get your meds, the building is too small, too cramped, the waiting area is uncomfortable, very hard seats and too few of them. Queues are often out of the door or in a disorderly scrum inside the small building if its cold outside. The experience is poor especially for unwell or disabled people.

c. Waiting time

Person attending A&E with daughter who had damaged their leg complained of very long wait (over 4 hours) and 'chaotic' and uncomfortable atmosphere. They had had to leave their daughter there while they went to get coffee as the machine in A&E wasn't functioning correctly.

In the A&E department, waiting time was too long. The service was okay and the doctor did their best.

Carer of patient attending Urology Outpatients at KCH. Praised the service especially quality of care (once they were seen) - but had appointment for 9:30 and were not seen till after 11:30. There were simply too many people waiting for too long, some were having to sit on the floor.

d. Signage

Whilst at the appointment they needed to use the lavatory. When they asked a member of staff where it was they were simply pointed in the general direction, so they found it hard to navigate there. In addition, the internal layout of the lavatory was challenging as the person had no idea what to expect so they found it stressful and difficult to use. They felt that staff should have helped them understand the layout of the lavatory so they could have been '*properly orientated*' when they used it. This would have saved their distress and embarrassment. They felt all staff should be better trained to understand how to support people with a visual impairment.

e. KCH Dental

Patient made an appointment in August after having a root canal. After being assessed they asked for a second opinion and felt that the staff took this negatively. The appointment was booked for 17th of September, when they arrived at reception, they were told by a consultant that they would not be seen. They were laughed at and said that it was not right how they were treated. They would like a formal apology from the practice.

Guy's Hospital with 1 positive and 2 negative

Positive experience

Patient said that they had had a very good experience of having some teeth extracted.

Negative experience

a. Poor signage and misconception about disability

An older patient who regularly attends outpatient clinic finds the hospital not welcoming and difficult to navigate for people with visual impairment. Patient raised a number of concerns saying there was an assumption by some staff and in the way the building had been adapted that 'disability' always involved 'wheelchairs'. The person found particular difficulty in the fact that buttons in lifts had been lowered to enable people in wheelchairs to use them but this made it difficult for her to use them due to her visual impairment. They suggested that lifts should have two sets of buttons one at wheelchair height and another at a regular height.

Another patient recounted an experience in an outpatients clinic where they had dozed off, and as the wheelchair symbol is used in the hospital attached to individuals who are known to have access requirements, when the nurse came into the waiting area to look for them had not identified them and told them she had been expecting to see women in a wheelchair.

The patient woke up after the clinic had finished which caused some distress. They felt that all staff need training on disability awareness and should have an understanding of the different requirements of individuals have.

St Thomas' Hospital with 2 positive and 1 negative

Positive experience

Two patients complimented the service, saying it was good and the staff having the right attitude, being lovely, and the outcome was good.

Negative experience

One patient who was seen after 7 hours of waiting for an operation. They were told to come in at 7.30am but was only seen at 2.45pm.

St. George's Hospital with 3 positive

Positive experience

An adult with Learning disabilities reported that he had been admitted through A&E to St George's Hospital with a severe chest infection. They were taken there from his supported housing scheme in an ambulance. They were in hospital for four weeks, lost weight and found it difficult to exercise. They found it difficult to sleep because they were in bed 4 but bed 1 and 3 were always arguing and sometimes swore loudly. However, the disability nurse came to see them often and to help understand what was happening. She was very good.

Patient's child has learning disability. They reported that the nurse was very good in helping their child so he would be less anxious of waiting for their check-up.

A relative of a child with ADHD reported that the young person was accompanied to the A and E and got anxious upon hearing the long waiting time. The patient was also anxious having just received diagnosis of ADHD. The nurse was excellent in supporting the patient that made him less anxious.

Adults Social Care with 2 negative

Negative experience

a. Lack of Dementia support

Person had a poor experience of seeking and getting help and support for their caring role with their mother who suffered dementia. They felt there was overall a real lack of support and different forms of support for family carers, which created real stress for them and made it difficult for them to keep well themselves. Had been referred by the Council to a local carers organisation for a carers individual assessment, where they had stated what they wanted was a support group for carers of people with Dementia, to share experiences and develop expertise and understanding of how to cope etc.

Nothing was offered instead they later received a one off payment (£200) - which was not what they were seeking. They felt that you had to be far too persistent and assertive to get anything as a carer and that services wish could pro-actively reach out and engage carers and offer support. Her experiences had left her feeling very worn down and before her mother was admitted to a care home, at real risk of suffering mental ill health. Overall experience of the social care supporting carers was very negative.

b. Very delayed support (and still waiting)

Another patient reported difficulty in getting social services to arrange help to declutter flat to help reduce risk at home. Following financial assessment, the Council had agreed to make the provision, but staff turnover in the team had left the individual frustrated that they keep having to tell their story again. It has now been 12 months since the original assessment by the Council and still no service had been provided. This was causing them considerable distress. They asked for signposting to an advocacy organisation who could help them in conversations with the Council and also for advice about getting a direct payment so they could get things done more quickly in the way they wanted.

SLAM Services with 1 positive and 1 negative

Positive/negative experience

Patient was receiving treatment from SLAM after a 2 year wait. Once they got support they said they had a good experience. The person is worried that if they need further support they how they would be able to access it without a 2 year wait. The person was also being treated for cancer.

Negative experience

Patient said they met with one staff as they needed help to get back to employment. They met in a cafe and he made a comment about being thirsty and ask if she could buy them coffee. The staff called last Monday to cancel the next appointment. The staff said she

could no longer work with them because of their inappropriate comment. She also texted them to which they replied using emoticons. Further accusation of sending inappropriate text message was made by the staff. They were then signposted to a listening centre but they did not like it as it was inappropriate for their condition.

Living Well Network with 1 positive and 2 negative

Positive experience

Person has complex needs involving polydrug use (not heroin) and has been bi-polar for several years. Had previously been care co-ordinated was open case but psychiatrist they had seen had moved on - and they hadn't been allocated another. They were also using Addictions service at the time. They needed help with particularly difficult bouts of depression had difficulty accessing support through the LWN hub or getting the support they feel they needed from the CMHT- out of exasperation, their GP contacted senior managers in SLaM about accessing the Hub. Following this they were contacted by the Hub within a day or so, and received a home visit. They then were supported by the hub for six weeks who provided excellent practical help with '*here and now*' issues they faced. After six weeks they felt well enough to cease meetings with support worker at the hub.

Negative experience

a. Slow response

Same patient above was very pleased with the service, but felt that it was far too hard to get them to respond quickly.

b. Access to alternative therapy

Another patient was in a car accident visited the LWN as he was suicidal at the time and was told about a grant of £500 that could be available to them. They were unable to access this as they were told that they were 'too close' and were referred to SLAM for his suicidal behaviour. After recovering they went back to LWH to access the grant and they were told that they cannot. Patient was unhappy that they were given prescribed pills over and over and as they would like to engage in alternative therapy and would use the £500 to do so but was not being supported.

Clinical Commissioning Group with 1 negative

Negative experience

One patient with diabetes and other long term conditions feels that Lambeth CCG should add the 'Freestyle Libra' technology to the list of prescribed resources. The person feels it would make it much easier for them and others with multiple LTCs to manage their diabetes, especially alongside their other conditions. They are disappointed that the decision to prescribe the tech wasn't taken a year ago and that the current criteria for the decision-making process has not moved the situation on and instead, caused unnecessary suffering and wasted a lot of money through indecision. They feel the decision-making process should be more transparent and would like to know whether a decision on the technology will be taken at the next SE London Prescribing Committee."

Conclusion

Just over half of callers to Healthwatch Lambeth reported a negative experience. This related to the attitude and knowledge of the staff, long waiting times and difficulty in booking appointments, lack of access to services or difficulty accessing the building, and poor communication and signage. Interestingly, the people who reported a good experience also mentioned staff attitude and ease of booking appointments, in addition to the good quality of care received.

It is hoped that this report is helpful in work to improve the quality of patient experience. Particular areas to consider include:

- Staff training/awareness on disability,
- Communication and listening skills,
- Accessibility of buildings
- Communication options with the practice including different ways to book appointments,
- How to ensure services are timely and convenient for patients

Report written in April 2019

For more information, call Healthwatch Lambeth on 020 7274 8522 or email info@healthwatchlambeth.org.uk