
What we're hearing about Surrey Heath

February 2024



"I think the process is improving. I called and made an appointment, I'm not digitally savvy and I think it's simpler to speak to someone. I was called back by a GP...To have that call was extremely reassuring to me."



If you would like a paper copy of this document or require it in an alternative format, please get in touch with us.

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Report overview

This report is designed to highlight the themes we have been hearing about and includes quotes from local people to provide context on these themes. Whilst this report accurately reflects what we hear from the individuals we speak to, we are aware that it may not be representative of everyone's views of a particular service. Multiple references to a specific service may be due to where our community engagement has recently taken place.

Any urgent or concerning experiences within this report have been escalated to the appropriate teams. All appropriate information and advice and signposting to complaints processes has already been given.

The themes that we're highlighting in this report are:

- Access to General Practice- What's working well and what can be better
- Ways to improve support to carers
- Mental health needs not being fully met
- The importance of support in the community
- Hospital care- sharing feedback and waiting lists.

If you would like more information or examples of what people have shared, please get in touch.

This report has been designed to inform Surrey Heath Place what Surrey Heath residents are telling Healthwatch Surrey about health and care services.

Recommendations

Based on the experiences of Surrey Heath residents, we have identified 3 key areas for local services to address:

- Encourage local service staff to "think carer" as outlined in the report by the independent Giving Carers a Voice service ['Identifying as a carer.'](#)
- Review ways to work with local community groups to encourage the successful use of the NHS App.
- Provide clear, regular updates to those waiting to receive care.

Community Engagement

January 2024

In January 2024, our engagement team and local volunteers carried out engagement events to speak to residents of Surrey Heath and Farnham in the following locations:

- Farnham Hospital
- St Martin's Church, community breakfast
- Frimley Green Methodist Church
- Spire Café, Farnham.

In addition to speaking to people at these events, people have also shared their experiences of health and social care services through our Helpdesk, Independent Health Complaints Advocacy service, online Feedback Centre and postal submissions.

What we're hearing

Access to General Practice

Access to General Practice continues to be what most people we meet tell us about and experiences continue to be varied.

What's working well

This person with long-term conditions and a need to frequently contact their GP told us about improvements to processes and that they are familiar with different routes in. This example shows that the impact of having a reliable service means they were also able to access additional community support:

"I have multiple issues that I speak to my GP about, I am living with MS [Multiple Sclerosis], I have high blood pressure and depression.

I had a telephone appointment today, my GP practice is at the Bartlett Group in Frimley Green. It was better today as the phone call back was prompt and it meant I didn't have to wait in all morning and miss coming here [for community

support]. I book online usually via the website but I will also call in if I need to, I haven't had a face to face for ages."

208693

Other patients registered at the same practice also commented:

"I think the process is improving, especially getting through by phone. I called and made an appointment, I'm not digitally savvy and I think it's simpler to speak to someone. I was called back by a GP and had a consultation over the phone where they gave advice. To have that call was extremely reassuring to me and I didn't need to be seen face to face, the issue I had rectified itself through a change in diet as suggested by the GP. I like this way of being triaged and it works for me."

208706

What can be better

On the other hand, this experience from a patient at the same practice, highlights that they would appreciate more clarity on what to expect.

"My husband gets an annual check-up but I don't. We wondered if it was because he had his birthday that he got the invite but my birthday has come and gone and I haven't received an invite. I would like a review as I had breast cancer back in March 2018 and although I've been in remission, I am on tablets which I'm unsure if I should be continuing. I had 2 operations, chemotherapy and radiotherapy and have been on medication which they said would be for 5-10 years. I'm coming up for 5 years of the meds and haven't been contacted. Should I assume I'll be on them for 10? I just don't know.

I haven't been to the GP really since my initial referral for treatment - I've barely had any contact. There was no feedback or follow up from the GP practice after the referral and being in for cancer treatment, with the exception of the nurse at the practice who did the wound care after surgery. I

haven't been contacted the whole time I went through the treatment... I felt left to get on with it both at the hospital and the GP...I was given a breast care nurse number, for practical aspects of care... but in terms of emotional support or access to someone to speak too, I was left to it."

208694

Ways to improve support to carers

This unpaid carer didn't see the point of registering with their GP as a carer after being unsuccessful with a Universal Credit application and also said they would not take up a flu vaccination if offered:

"I'm not having it again. I got so ill after and I'm usually well all the time. I have had all the COVID vaccinations though."

They care for their adult grandson by helping with day to day tasks and collecting medication. Not getting a flu vaccination potentially puts them and their grandson at greater risk. We signposted them to local carer support and would encourage local service staff to "think carer" as outlined in the report '[Identifying as a carer.](#)'

Another unidentified carer said they wouldn't use digital options for any health care, following a previous negative experience:

"I don't do online for GP practice appointments or apps. I was put off the process after an eye appointment I had at the hospital. I received a text that told me I needed to register for an App to book in ahead of my appointment. It took me all afternoon to download the App and register. When I arrived at the appointment, they said they had no record of me, so the whole thing was pointless! The care was good and I have the all clear now but felt that was a waste of time."

209695

Once again, the following carer could be better supported, reducing stress and frustration for them. It would also aid the person they are caring for to get adequate support:

"I'm the only one with a smart phone and so I deal with all the appointments and anything tech related. At times it just defeats me and all I want is to talk to someone. Sitting in a phone queue is equally stressful and soul destroying, I put it on speaker and get on with something else until they answer... I was really worried about my husband last week, I knew he needed a GP appointment and the thought of trying to get one completely stressed me out. My husband had a really bad UTI [urinary tract infection] and I knew he couldn't make the appointment for himself. So, once I called up and explained (after a wait on the phone) they said someone would call back. I had popped out to get some supplies and when they called back, they called my mobile but I was in my car. I asked if I could explain about the situation but they said we can't talk to you about it and we need to talk to your husband. I said if they won't speak to me then I think he really needs a face to face appointment as he won't be any good over the phone. In the end they said ok we'll organise a face to face. I went with him to help explain and to hear what they had to say, they prescribed medication. Finding out what has happened at an appointment is impossible. He is being monitored for diabetes as he is borderline diabetic, finding out what happened at an appointment is as I said, difficult if I'm not there, he says 'it's fine' and doesn't communicate any further about advice given, which means I have no way of helping him. I cook his meals and so if there is a diet change, how can I help unless he tells me what I need to know.

My husband has poor mobility, he now shuffles and struggles to walk these days. Initially he was told he could have an auto immune condition which might be affecting everything or that it could be Parkinson's, but no actual diagnosis as far as I'm aware and he's been left to it since. After the more recent GP appointment I was called by social services to see if I needed any help with lifting my husband in and out of the bath or any other assistance. I said no, but now I'm wondering if I should have asked for more help. I told

them at the time, I'm coping at the moment but now that the incontinence issues persist even after the UTI has cleared up, it's become harder for me. I keep thinking as long as I have a washing machine that works, I can cope at the moment. I bought him incontinence pads, but he got annoyed and I found them chucked in the bin. He doesn't think he needs them, he doesn't think he needs anything."

We continued to ask this person whether they were getting support elsewhere:

"I started the process of applying for a blue badge, I spoke to someone at the council office, who explained the process. She said my husband needed to write something about his mobility. My husband is very proud and he is resisting the process, after pretty much begging him to write something he finally did. I said to him, do it for me, so at least we can park nearer at the hospital or at the doctors' practice. What I then found was that my husband's records don't support the application, they don't reflect or mention his lack of mobility. So, it's all come to a halt."

209695

Following our conversation, this person recognised that her caring responsibilities had changed more recently, and her husband couldn't cope without her. We told them about local drop in sessions and discussed what she felt would be beneficial to her and her husband going forward. We also suggested she could ask for a longer appointment with a GP for her and her husband to talk about his care needs/to look at his health holistically, especially if there had been a decline recently. She said she thought that would be a good idea and that she would follow up.

Even when caring responsibilities end, it is important to ensure that carers receive adequate support. The following quote is from a person who shared their experiences of this and how they feel support could be improved:

“After my husband died I found it really hard to find suitable bereavement counselling. I was ok to begin with, I just got on with things and kept busy.

Phyllis Tuckwell helped nearer the end and I felt the district nurses were really good, but if it was the middle of the night and they were giving care, they were restricted in what they could do without a doctor. It’s a very lonely, scary time when you are caring for someone at home near the end, you don’t know what you are doing and you are forced to deal with things that you are not trained to do.

After he died, I just ploughed on, until about a year after, it just hit me, it felt overwhelming and the doctor thought it was post-traumatic stress. I was recommended to contact Cruse, for bereavement counselling, but they were too busy for me. I tried other places, but they didn’t seem trained well enough, reading questions off a card. It didn’t seem natural and I didn’t feel listened to. Some of the places were too far away to travel. I called a list of places and in the end, I remember it was my sister who was staying with me at the time that just took the phone from me during one of the calls, she could see how much I was struggling over the phone and so she spoke for me. In the end she found somewhere and spoke to them on my behalf. I paid, as I needed immediate help and it was the only way to get it. I thought they were brilliant and helped me work through a really difficult time, along with my sister’s support. I think there is a real lack of free bereavement counselling in the area.”

208707

Mental health needs not fully met

People with other mental health needs also told us that they would like to see more timely support to avoid a crisis:

“I’ve tried CBT [cognitive behaviour therapy], it’s not enough. My GP is very supportive but I have been quite suicidal. I

don't want to be sectioned for help, I want intervention before it gets to that point. 2 years is too long to wait. I just can't afford to go private. It's about £90 a session."

207990

Young people and their families are particularly affected, with support varying considerably:

"My daughter was referred by GP to CAMHS [Child and Adolescent Mental Health Services] in the summer. School are chasing this up for me. I've also been referred to get a diagnosis of ADHD. Barnardo's have been helping us at the family centre in Old Dean. Sure Start was so helpful for me as a parent; a one stop shop. Good support which is lacking whilst waiting for services. Even when you get a diagnosis eventually, not much support is offered, you just have to get on with it."

207993

"My granddaughter is currently living with me. It's a nightmare, I'm caring for her but I'm exhausted and frustrated. She has lots of mental health issues and on waiting list to be assessed by CAMHS for ADHD. Told it will be ages and ages.

She turned 18 in December and all support ceased immediately. We didn't get a transition period or handover to adult social services. I really, really need help. I called at the beginning of January and explained. I've not heard anything back. She becomes so violent and unpredictable. She spends most of the day in bed and is awake all night causing us total disruption. She has tried to engage with services but it doesn't work for her so she leaves. I'm stressed literally all of the time."

207988

The importance of support in the community

As in the above examples, we find having conversations with people in non clinical settings provides a different perspective than they might share in medical appointments.

During our recent conversations, we have been asking specifically about the use of the NHS App and helping people who want to access the App. This should make it easier for people to access things like repeat prescriptions. For some, this is still a very difficult and frustrating process and we are finding that lots of people who are attending community support groups would benefit from more individual support to set this up:

“I had a stroke and am now living with paralysis. It makes some things harder for me... I'm not good with technology, but I would like to download the NHS App after speaking to you as I think it will help me with repeat prescriptions. At the moment I walk to the GP practice to arrange prescriptions and then to the local pharmacy for prescriptions then back again to collect. I have a lot of medication so I am interested in the App.”

We helped to download the App to this person's phone and went through the ID checking process. This person has difficulty with mobility particularly in their hands and so typing multiple times makes the process much longer without support. He did not have his NHS number to hand, so we also used the NHS number checker, which worked well. He has a smart phone and there are multiple checks between the App and sending a code. Having to come out of the App and get a code from a text adds time to the process. We completed the process and set up the App to remember his email address to cut down on the amount of times he has to type in. The App told him to wait 2 days and to check back then.

He was really pleased to have been supported through the process. After the event, we spoke to the digital welfare team from the local libraries to ask them to check in with this person when they attended the next community breakfast, they said they will follow up with him and check that he could use the App. We also left an NHS 'Making the most of the NHS App' leaflet and explained that there was a troubleshooting QR code on the

back. This demonstrates the value in reaching out to community settings and working with those who are supporting vulnerable members of the community.

Another person is awaiting mental health support which is a priority for them. For them getting the NHS App to work is less of a priority and an additional stress:

“I am on mood stabilisers. I have to take my prescriptions in manually as the NHS App stresses me so much. My prescription never goes through.”

207990

We helped to demonstrate the App and this person was able to order a repeat prescription successfully, thus reducing the stress.

Unfortunately, we are not always successful in helping people navigate the use of apps meaning people are still frustrated and less likely to use them in future:

“I’m glad you are here today, well I don’t know what apps I’m using, there are so many, I have one for the hospital and I know one of them is stuck on my old address. [Looked at apps on phone]. This is the one – Patient Access, I have been stuck with my old GP and it hasn’t updated to the new GP for the last 18 months.”

We continued to talk to this person about Patient Access and the NHS App and then looked at the NHS App which was already downloaded on their phone. Logged in and it showed her name but wouldn’t load information and so we couldn’t check the address.

“Well, you can see why I give up, I’ve tried to use this one before but as you see the NHS App is just taking me round in circles and not loading. It is confusing to have so many apps, there is My Frimley, NHS App and Patient Access. I’m pretty digitally savvy but it’s figuring out which one I need for which appointment alongside remembering log ins and

passwords. My husband booked his GP appointment over the website, but I haven't been able to do it yet."

209685

We also had discussions with volunteers and people running the support groups to hear the challenges they face. At 'Church on the Green' Frimley Green 'Meet up Monday and warm space soup lunch' they told us about the support they provide to the local community. One of the congregation identifies people who would benefit from their support and helps to organise transport. This and the running of the group is done by volunteers. The Reverend mentioned that whilst applying for grants has always been time consuming, they now have less support to do this and rely on church funds to fix things like their boiler; an important factor in running a warm space over winter. They have also identified a need for a youth worker but have not been able to recruit, meaning that there is still potentially an unmet need for young people in the area. We were able to connect them with other successful youth workers in Surrey to advise.

"I don't use the app and I'm happy with the paper prescription process, I prefer to go into RAMs (Pharmacy), they told me they prefer paper copies and said it's more reliable for them. I was using Boots (Frimley Green), but it was chaotic and queues outside the shop, think they had staff shortages."

208706

Hospital care

We have recently reported on our visit to Frimley Park Hospital where we aimed to learn from people about their attitudes and experiences of providing feedback on services in order to encourage more people to do so. The report ['What we're hearing about Frimley Park Hospital'](#) is on our website.

On the whole, the people we spoke to said they were satisfied with the quality of care they received and would share feedback if they felt it was necessary. However, most did not know how. We also heard similar experiences during our community visits elsewhere in Surrey Heath:

“A year ago my wife broke her shoulder and the whole process was excellent. She went to Frimley Park Hospital A&E, there was good care, good follow up and excellent physio provided at the GP surgery.”

Asked if they were asked for feedback/ told about the Friends and Family test:

“I don’t remember if we were asked for feedback, but I find I avoid those types of questionnaires now, you get asked about everything, not just health. In general, I think ‘feedback’ can take too long, it can be long winded and some of the questions are ridiculous, it makes you just not want to do it. It was good to be able to give feedback today like this.”

208706

In June 2022, we published our report [Waiting for hospital care](#) which emphasised the importance of regular, personalised communication with people while they are waiting for care. We continue to hear this is a problem:

“I went to the GP 3-4 times over a period of 6 months with ear problems. They referred me to ENT [Ear, Nose and Throat] at Frimley Park Hospital and then I was put on a waiting list to see an ENT consultant. Around June/July last year, I had an MRI and a hearing test at Frimley Park but I have been on the waiting list for a year now, they contacted me last week and asked if I still wanted to be referred and I said yes, as it’s still problematic for me. It’s been a long wait to be seen.”

209685

Thank you

We would like to thank everyone who gave their time and shared their experiences with us. We would also like to thank our volunteers who supported us on these visits/during our engagement sessions and to all those who welcomed us on our community visits.

About Healthwatch Surrey

Healthwatch Surrey champions the voice of local people to improve, shape and get the best from health and social care services.

We know that services are best improved by listening to those who use them and by highlighting this independent feedback to service providers and decision makers, we are able to inform, improve, and, when necessary, challenge decisions about current services and future plans.

We also provide information and signposting to help the people of Surrey find the care and support that best suits their needs.

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We are proud to be shortlisted for a national Healthwatch Impact Award, recognising our work helping to improve local NHS and social care. You can

view [our video](#) highlighting how feedback from local people has been used to make positive changes health and care support.



We are committed to the quality of our information.
Every three years we perform an audit so that we can be certain of this.

Luminus

The Healthwatch Surrey service is run by Luminus Insight CIC, known as Luminus.

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