

Insight Bulletin: July 2021

One of the statutory duties of Healthwatch Surrey is to share the experiences of local people with organisations who make decisions about health and social care services. Our monthly Insight Bulletins shine a light on some of the themes we have heard about over the past few months.

The themes highlighted in this month's bulletin are:

- Praise and thanks from the people of Surrey
- Dentistry - misunderstanding "the list"
- The consequences of delayed Autism Spectrum Disorders diagnosis
- GP receptionists - some unfortunate experiences
- Hospital communications - how hospitals responded to our recommendations

If there is a theme you would like to hear more about please contact Kate.Scribbins@healthwatchesurrey.co.uk.

Praise and Thanks

Every month we hear from service users who have experienced excellent care:

Praise for dentists:

"My dentist has been fantastic. His staff all have to wear dreadful rubber masks all day long and were instructed by the govt to wait an hour between patients in case of C19. Now they are trying to catch up with the backlog of treatments in a fair way. I don't blame the dentist, the government caused this problem. Dentistry has been underfunded for years and covid has underlined the problem."

Praise for a mental health care coordinator from a client with autism:

"My care co-ordinator has actually been pretty awesome. I think he's been on some autism training for tips. One of the absolute best things he does is rephrase questions when I don't seem to understand them properly. I wish more CareCo's had autism awareness training."

Praise for an efficient and proactive GP surgery:

“I completed the form on the [surgery] website to request to speak to a GP. I received a call back on the same day (Tuesday). The GP made me a face-to-face appointment on the Wednesday. He asked me to return in 1 week if my symptoms did not get any better. 1 week later I received an unexpected telephone call from the GP to check if my symptoms were any better. This was very reassuring.”

Dentistry – misunderstanding “the list”

Difficulties with access to NHS dentistry remains one of the issues we hear about most often. While many are looking for a dentist after house moves or changes in circumstances, we also hear from people who are shocked to discover they seem to have been removed from their dentist’s NHS “list”.

“John has been with an NHS Dentist in Bagshot since 2006. He has not been for a check up or treatment during lockdown. He phoned for an appointment recently to replace a missing filling and was told that as they had not had recent care, the practice has struck them off the NHS list... John has attempted to get practice to overturn decision in view of their length of time with the practice and lack of trouble with the surgery but to no effect.”*

“I tried to get an appointment this morning and was told I was no longer on their list because I have not been there for two years (but I don’t think 2020 should be counted. Should they have informed me this was going to happen? I have been with them for a long time (I am 75 years of age).”

“I’m currently registered with xxx in Dorking as an NHS dentist ... I have rung up today to ask for an appointment for [a bridge] to be stuck back in, to be told they’ve moved me and others from being NHS patients to private. And they are no longer taking on NHS patients when it clearly says on their website accepting NHS & private patients. Surely I cannot just be cut from being an NHS patient, I had a baby 6 weeks ago so should actually be receiving free NHS dental care until he’s 1, I’m now being charged £55 which I really cannot afford right now for it to be stuck back in.”

There is an assumption that NHS dentists operate in the same way as NHS GPs - once you are on their books, you remain a patient whether you use the practice or not. However this is not the case, and dentists have discretion to decline treatment if you haven’t visited regularly for check ups etc.

* All names have been changed to protect anonymity

We recommend dentists use clear and prominent communications to ensure:

- new and existing NHS patients are fully informed of their status as a patient
- there is clear information available on the policies of the practice regarding NHS patient retention.

The long term consequences of delayed diagnosis for ASD

Long waits for assessment for mental health issues and neurodiversity, especially for children and young people, predate the pandemic. Recently we have heard several experiences that throw the long term consequences of delayed ASD diagnoses into sharp relief.

“Jane’s 13 year old daughter has been waiting for two and half years for a CAMHS assessment. She did receive a phone assessment in October 2020 with a nurse but has never been assessed by a doctor. It has been suggested that Jane’s daughter may be on the autism spectrum, but no formal diagnosis has been given. Medication has been suggested but no medication was forthcoming. Jane feels the situation is becoming more serious as her daughter is self-harming and is bulimic. She started to ‘self-medicate’ with a family member’s prescription medication she illicitly acquired that was for an unrelated condition... Jane feels the numerous unfulfilled promises are setting her daughter back as she is inclined to take these at face value and gets very disappointed when nothing happens.”

“My child has been failed by CAMHS. He wasn’t diagnosed with Autism until he was 15 by which point it was too late - he’d already missed 5 years of school and suffered lots of mental health problems as a result.”

“Mental health providers shouldn’t place so much weight on an Autism diagnosis when planning treatment when they have a 2- year waiting list to give you one. I’d have been the exact same person whether or not they’d decided I had Autism - delaying treatment over it just seems silly.”

First Impressions – GP Receptionists

GP surgeries are under unprecedented pressure, and receptionists are often in the frontline when it comes to patient frustration. However, recently we have heard

several instances of practices from receptionists which do not feel at all patient-centred:

“I phoned and a receptionist said to fill in the online form and we should get a call back within a few days. I said it was urgent but although she didn't take his date of birth or name she stated that all urgent appointments had gone. She was holding another conversation with a member of staff laughing and not listening she then stated “oh well if he's that bad call an ambulance”... I emailed the Practice Manager and she did phone me and said to take him to the Surgery. When we arrived the nurse and the Doctor who saw him said they were really sorry and I had done the right thing in getting him seen!”

“Sue was upset about her recent experience with the receptionist at xxx Medical Practice. In her opinion, the receptionist, instead of assisting her with her needs she made her feel silly and undignified.”

“The receptionist was totally unhelpful, did not appear to be listening to me or trying to understand what I was asking for. She just kept repeating that she had “closed it down for the weekend” so I should try again on Monday. I am at a loss to understand what she meant by this and feel she hadn't understood what I'm asking about... she was just determined to rush me off the call even though she was making no sense at all.”

“I requested online for repeat prescriptions ... for the first time since I moved from Reading to Epsom and the receptionist rang me and she spoke downright rudely and raised her voice in anger that I have confused her by filling the wrong meds... I was polite but she was rude. She then put me on hold and came back and said ok and immediately cut me off.”

While we appreciate the stress receptionists are under and know that some patients can be very challenging, poor gatekeeping can result in poor outcomes for patients and added burden for surgeries.

Hospital communications – how local hospitals responded to our recommendations

In the first phase of the pandemic many hospital procedures were cancelled. There was general understanding and acceptance from patients at the time. However, as time passed people began to ask what would happen next - when would their procedure happen? Should they be doing anything to initiate treatment? Were they

still on the list? Now that long waiting lists look set to be with us for some time, it is vital that the NHS communicates well with patients who are still in their care whilst waiting.

In April 2021 we wrote to the hospitals in Surrey, making five recommendations relating to patient communication. We received responses from all five and these can be read here <https://www.healthwatchesurrey.co.uk/wp-content/uploads/2021/07/Communicating-to-patients-about-delayed-hospital-appointments-July-2021-summary.pdf>

The hospitals are taking a variety of approaches to communication - all are working to update their websites, but adoption of a single point of contact (a strong recommendation in the NHS guidelines) varies from hospital to hospital, as do approaches to frequency of communication with patients.

About Healthwatch Surrey

How we gather our insight

We gather feedback through channels including our Helpdesk, website, social media, and local Citizens Advice. We also distribute flyers, advertise, engage with groups through our partners and contacts, and initiate focus groups. The number of people we hear from and the topics we hear about varies from month to month. Topics covered may depend on the groups we engage with.

How we share our insight

If we hear a case of concern regarding patient safety we immediately signpost the sharer to the appropriate body and escalate the case with the provider/commissioner.

We share our wider themes with Trusts, CCGs, Surrey County Council, Public Health, CQC, and in various boards and groups across Surrey.

If there is a topic you would like to hear more about, please contact kate.scribbins@healthwatchesurrey.co.uk

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