

March 2021 Feedback Report



The feedback presented in this report represents 285 responses from the following sources:

- Calls and emails to Healthwatch Greenwich from Greenwich residents and service users
- Meetings between Healthwatch Greenwich and community representatives or leaders
- Meetings between Healthwatch Greenwich and groups of Greenwich service users
- Conversations as seen on Twitter and local community Facebook groups
- Online reviews of services
- A small survey of elderly members of the Chinese Women’s Association

COVID-19 Vaccination

Service users report an overwhelmingly positive experience of getting vaccinated.

However, there is concern that some are “slipping through the cracks”, and the system has become a “lottery”.

“I’m in the 4th stage of COPD. Can’t hardly breathe or walk and I’m 78. I haven’t been called to get vaccinated but some people in their 30s already have got their jab. Something unfair is going on”.

Not all service users receive notification and have needed to be proactive.

“I sent an email to my GP manager stating I was at high risk and have underlying health issues. I also care for someone who is clinically extremely

vulnerable, and within 48 hours I was sent a text to book, and a phone call to apologise for slipping through the system. This is not what I wanted to hear but at least I got my jab”.

CASE STUDY: Anna’s experience of digital access and getting vaccinated.

Anna is a White British female in her 50’s with a spinal cord injury resulting in multiple health needs. Anna describes herself as **“digitally literate but not a digital native”**.

Anna was not on the original NHS vaccine priority list. However, an advocacy organisation sent a letter to her GP explaining why patients with spinal cord injury should be prioritised. When Anna contacted her surgery about the letter, she was asked to send the letter to the surgery using a function on the GP website. This function on the website did not work. She wasn’t provided with an email address and struggled to navigate the website to send the document.

“It was confusing with the website divided into “rooms. I kept trying to find the relevant page where I could upload the document but couldn’t find it. The link, it didn’t exist”.

Anna contacted the Community Hub for help. The Community Hub offered to fax the document to her GP practice, but on searching the practice website, Anna found the practice did not have a fax number. The only option was for Anna to copy the letter and take it by hand, or by post, to the practice.

Anna did not want to put herself at risk of COVID-19 by leaving home, and she worried about keeping her medical information confidential. **“I didn’t want strangers to see my personal medical details whilst they were being photocopied”**. After struggling for ten days, Anna sent the letter to her practice and was placed on the vaccination priority list.

“I had to fight for myself just to get vaccinated. First, I slipped through the cracks, and then, even though I know how to use the internet, I faced barriers because the website was not designed in an easy to use format. I wonder how people with even less skills than me and with language barriers would fare.”

COVID-19 Post-Vaccination

Service users with post-vaccination symptoms, report not being offered help.

“I was feeling seriously ill on the fourth day after taking the vaccine and I phoned the GP practice to get some advice. Once the receptionist heard that its “after vaccine” problem, she said that no visits are available. It made me cry, feeling exhausted, weak, and vulnerable. I called them again and didn’t tell them anything about the vaccine and they booked a call back with no problem.”

COVID-19 Vaccination experience for elderly Chinese Women

Service users report receiving fake COVID-19 scam messages with suspicious links - opening them to potential digital and financial risk. As a result, some are apprehensive, unable to distinguish genuine NHS emails from non-genuine emails/links and are reluctant to book vaccination slots. Our work with Chinese women in Greenwich found vaccination anxiety and concern.

A proportion of older women from this community do not speak English and have limited digital skills. They struggle to find credible information in Cantonese. Despite available NHS information in Cantonese - these women do not know how or where to find it. Reoccurring questions, answered by Healthwatch Greenwich, from this group includes:

- Access to vaccination if not registered with a GP
- If vaccination is free for all
- How to receive ‘surplus doses’
- How to book for the 2nd vaccination dose

While information in Cantonese is available on the NHS website, these women do not have access because they are not aware of its existence. Moreover, limited digital skills means they do not know how or where to search for this information.

For these women, effective information must be in Cantonese, preferably in hard copy - ideally a letter from their GP sent to their home address. In addition, disseminating information via community organisations and trusted community leaders offers a more effective mechanism than assuming all service users are aware of, and know how to use, NHS websites.

GP services

Feedback on GP practices has been mixed. Two practices received overwhelmingly positive¹ comments for clinical care and the support and help from reception staff. Efficiency and professionalism is highly valued by service users.

“I really couldn't be happier with the service I have received here. I used the econsult system to report my concerns, I had a reply from a doctor within 24 hours, letting me know that she'd booked me an appointment for 1 week later to review me in person. Going to the doctors is never pleasant, but for an NHS service especially, this experience was very good.”

At another practice, we heard outstanding positive feedback about one GP who is extremely supportive, gives excellent clinical care, and really goes the extra mile for patients with mental health needs. Service users widely recommend this doctor to others.

Barriers and challenges

One practice received a wide range of negative comments from a growing group of dissatisfied patients. Service users face difficulty accessing services *“it's a battle to get anything done”* and *“feel deserted by the practice”*. Services users report:

- Waiting extended periods of time (weeks) for appointments
- Inability to get repeat prescriptions before their medications run out
- Lack of dignity and confidentiality - being made to stand outside the practice building and disclose personal medical details into the intercom without any privacy
- Website not being user friendly

“Getting copies of blood results to take to my hospital appointments causes me so much stress, I just don't do it anymore. I need to have three, monthly blood tests to monitor my drugs, getting the forms to have these tests is a battle and I am tired of fighting it. Getting prescriptions given by the hospital is another battle as they [GP practice] deny the repeat prescriptions without reading the consultants letter.”

“It's all become too much to deal with. It is seriously affected my mental health and I have never had issues like this before. The CQC needs to visit them fairly quickly but they [CQC] need to be very sure they speak to us [patients] as well.”

Another practice received poor feedback on the building and infection control. The building is *“old, dilapidated and in need of repair”*. Service users report having to wait outside in an unsheltered car park and not being able to maintain social distancing.

Service users report being confused with one practice refusing to take new patients saying they fall outside the catchment area, or that they don't have capacity, but the same patient being accepted when then try again.

“I used to live about 300 ft away and they tried to decline me too. When I tried a second time they let me [join].”

Using digital tools

Many service users are positive about digital access and report smooth and rapid service.

“I contacted this practice via an online form late on Friday afternoon regarding a non-urgent matter. I was contacted on first thing on Monday morning with advice and will be receiving an x-ray form posted to my address in the next couple of days. I have always rated this practice but their online service surpasses my expectations and I am pleased that I am registered with them.”

However, not all experiences are good. A minority of service users find navigating health services online and through apps difficult. Service users report completion of econsult is *“very long and tedious”* and the digital form asks for *“too many details”*.

“It takes about 15 minutes to complete the online form, and even then most of the time suggests you go urgent care. It's absolutely madness.”

“I tried to book an online consultation through the website and heard nothing back and I tried calling today, but the message went direct to ‘we're currently closed' please call 111”

Even those with basic digital skills can struggle to navigate websites and apps. Services users with language and digital barriers want more proactive support from services with health care professionals regularly reaching out to check the health status of patients with long-term conditions.

Telephone contact

Service users can call practices to book an appointment. Service users, very happy with other aspects of the practice, report having to wait for long periods of time before getting through and a lack of appointment slots.

“It is an excellent surgery with fantastic doctors, but the phone line constantly engaged and then when you do get through you are told all appointments are gone.”

Econsult and other digital tools offer a call-back facility, however, service users report frustration with not being told when they will receive a call, long waits for calls, or even missing calls because they don't know when the practice will call back.

One service user reported waiting for nine hours before speaking to their GP, having called the practice in the morning to book an appointment. Another said

they called their GP practice everyday for a week and were still unable to get an appointment.

“There is no way to book an appointment with the surgery through phone even after trying to phone at 8 am everyday, since that’s the only time you can call. The pressure of getting an appointment is more than the sickness itself. Management at this practice is very poor. There is no online system or econsult, the MyGP app for this surgery is useless. I had to go to the emergency [A&E] twice because of their poor service.”

Using hospital services as a substitute for GP access

Resorting to hospital services is not unusual for service users unable to access GP services when needed and/or for those who don’t receive a call-back or online consultation in a timely fashion.

“Since the COVID phone appointments started, sometimes they don’t call you when you have agreed an appointment and you are sick! You end up going to A&E.”

“As a resident of Greenwich, you cannot get even a telephone consultation with your GP. The line to the practice was engaged for very long and by the time I got through all the appointments were gone and I was told to access Urgent Care Centre. Their response always is that there is nothing they can do about it.”

Access to translation and interpreting services

Access to translation services is difficult for some of the service users we spoke to. Members of the Association of Chinese Women told us they cannot access translation services. When booking appointments, they are not aware of this facility as appointment information is sent in English.

It is not routinely offered to them when attending appointments. This is a particular problem when needing urgent care, such as A&E, as hospital services at the Lewisham and Greenwich Trust tell patients it’s difficult, or not possible, to access interpreters at short notice.

As a result, some are forced to use younger family members to interpret at medical (hospital and GP) appointments. However, younger family members, although fluent in day-to-day conversational Cantonese, do not have expert linguistic knowledge to translate complex medical language and issues. Mistranslation is not uncommon.

Reliance on family members can be a source of embarrassment (having to share intimate details with relatives) and lacks confidentiality. Moreover, appointments must be scheduled to accommodate the timetable of younger family members - often leading to delay in seeking treatment. As a result, many will only access health services only when the situation is acute.

“They have serious problems but keep them quiet. It causes a lot of health problems”.

Repeat Prescriptions

Service users report difficulty getting repeat prescriptions, with staff at practices forgetting to order it, service users being handed wrong prescriptions or service users having to chase prescriptions for days, and sometimes weeks. Service users would prefer to receive a text confirming their prescription is ready, rather than having to chase and call the practice several times.

One service user told us their repeat prescription was suddenly changed from three months to two months without discussion or prior notice, leaving them struggling to pay extra.

“The cost of a two-month prescription is the same as a three-month prescription, which means I’m suddenly asked to pay more for my medication because of this decision.”

Referrals

Service users report difficulty getting referrals. Many feel their needs are not taken seriously by GPs and practice staff. Some wait report for many months after getting referred². Service users have not been informed the knock-on impact of the pandemic has lengthened the waiting time for referrals.

“I was supposed to be referred to a specialist- only to find nine months later when I got to the appointment they had referred me to not only to the wrong person [specialist], but the wrong hospital too, which means almost two years later I am still waiting for that appointment.”

Complaints

Awareness of how to make a complaint and the complaints process is low. We were told that not all practice staff are helpful when service users try to make a complaint. One service user told us:

“I had issues with my GP and contacted the practice manager, but when I tried to complain I was told that the GP does not have a complaints department”

“I was given a fake email address by the staff member and I got my partner to call to get the actual email address. This is extremely wrong. The staff member who swore at me wouldn’t give me her name”

Service users report not being contacted once the complaint has been lodged.

“I am yet to receive an update from the practice manager. I left numerous messages with the desk staff for them to contact me, but still nothing. I’m also unable to contact the surgery through the online app since my complaint. It seems that my account has been blocked and erased for some reason. I’ve tried tirelessly to reactivate it. But I cannot get it up and running again.”

Physiotherapy

Service users report difficulty accessing physiotherapy services with calls to the service not being answered and patients not receiving calls for first assessment.

“I have had hip pains for over a year, which now have spread to my neck, ankle and knee. It's all on one side and it's starting to affect my daily life. If this leads to serious health problems where I won't be able to go back to work and miss out on earning money to pay bills or my rent or even take care of my children, I don't know what I will do. I am single mother and the sole provider for my children.”

Adult Social Care

Care Homes

Feedback is overwhelmingly positive with relatives praising good quality care and kind staff.

However, communication between care homes and relatives could be improved.

“They haven't issued any update to families on the current position or when we will be able to visit. All I did get was a fake email purporting to be the manager this week but turned out to be a scam email. The only way we can get updates is to ring the home, and even then they can't tell us anything, so we remain in limbo. And very upset.”

Dental care

Service users able to access dental services report positive experiences. However, service users continue to report long wait times for non-emergency NHS appointments, (often despite contacting multiple dental practices). Those who can afford to pay can access rapid routine dental treatment, increasingly leading to a two-tier system. Lack of access for those who cannot afford to pay means many service users have not had regular dental check-up since before the pandemic.

Mental Health

In our work with Chinese women, we were told mental health is a taboo topic within the community, and not openly discussed. As a result - those who might benefit from treatment do not access it. Elderly members of the community, living alone, report feeling depressed and worried about their health. A lack of adequate information - in Cantonese, and fear of accessing mental health services, increases feelings of isolation and loneliness.

Contact Us

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