

## November 2021 Feedback Report



The feedback presented in this report represents 263 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 social media
- Online reviews of services

### COVID / Vaccinations

#### Booster vaccinations

In November, booster vaccinations were made available to the over-50s, front-line medical staff and people with health conditions that put them at greater risk.

Service users report painless vaccinations and encourage others to get a booster

vaccination:

*“[Had my] Booster just now - didn't feel a thing.... Pls encourage all to get jabbed to defeat Covid”*

Many primary care services including pharmacies and GP practices received positive feedback on the efficiency of the COVID booster programme

*“Covid booster [was] well organised and prompt service”*

*“We were in and out within minutes”*

Reports from service users getting a booster vaccination at Queen Elizabeth Hospital were mixed. Many commented on the long wait, regularly 30+ minutes beyond the booked appointment time. Others said the queueing system was poorly organised:

*“40 minute wait for booster jab last week at the QE, very badly organised wouldn't book there again”*

*“[the queuing system] was very badly organised. Why not have one queue for walk-ins, another for appointments?”*

With booked appointments delayed as walk-ins were accommodated at the same time, many decided to rebook and to try and return another day:

*“QE very badly organised [for] covid jabs/boosters. Had an appointment for 2.30pm today for booster. Walked to centre and [there was a] massive long queue for appts and walk in all together. I went and asked the one person processing all and he said [that I] need to join queue and average wait time is 1-1.5 hours! I booked appointment as I cannot stand for long so had to abandon and need to make another appointment”*

*“I've booked my jab on 4 separate occasions, each time I've had to walk out as I don't have an hour to wait”*

Others report positive experience with a fast turnaround:

*“[booster] appointment [was] at 11.25 [and we were] all done and back in car by 12... staff were fantastic, and all run very professionally”*

*“Had my booster at QE 4th October and it was well organised without any waiting”*

## Primary Care

### Quality of care

GP practices nationwide are experiencing:

- A decline in GP numbers
- Difficulty in recruiting additional staff
- Rising demand

Additionally, GP practices continue to play a key role in the NHS's COVID response, delivering the vaccine programme whilst maintaining all non-COVID, business-as-usual, care.

Feedback on GP practices is mixed. Some receive positive comments, with service

users reporting high quality care:

*“I have never had a problem here, and always felt well looked after”*

*“Efficient, effective and also very caring. Highly recommend this practice. Saw another reviewer use the word "exemplary" which absolutely sums up my experience here”*

*“This has been my Dr. surgery for going on 6 years and I have always had a positive experience. The staff and care team, although often very busy, are knowledgeable, and always courteous and professional”*

### Online Consultations and bookings: PatientAccess

GP surgeries contract with one or more providers to deliver online consultations, schedule appointments and arrange prescriptions. These providers are commercial organisations offering a platform through which services are delivered<sup>1</sup>. The providers include eConsult, Patient Access and Dr iQ.

Feedback on the use of online booking systems continues to be mixed.

Some report difficulty registering on PatientAccess. The lengthy login process for PatientAccess has many questioning the need to enter so much personal information, with some questioning the provider’s legitimacy:

*“If they are NHS approved then why do they want our personal details again if we are already successfully registered with NHS for using an on-line service?”*

*“Seventeen windows of login/registration information they collect and still joining up is an utter failure.....Are PatientAccess rogues or legitimate? .... so far they have been a fruitless undertaking for me”*

### Booking an appointment

Service users continue to report difficulty accessing GP appointments:

*“The only way to make an appointment is on e-consult, which today had no appointments, so I called the practice to make an appointment only to be left on hold for 2 hours, then cut off!”*

*“You can't get an appointment or speak with a doctor, I did an online consultation and got an email back saying someone will call me in 5 days time”*

*“They don't allow you to book an appointment online... They don't answer the phone to book an appointment... Impossible to get an appointment”*

*“The econsult process is not fit for purpose and trying to ring at 8am for an*

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<sup>1</sup> <https://www.nhs.uk/nhs-app/nhs-app-help-and-support/appointments-and-online-consultations-in-the-nhs-app/online-consultations>

*appointment is frustrating as everyone doing the same thing and I can't be waiting 45 mins at a time!"*

### **Repeat Prescriptions**

We continue to receive mixed feedback on the use of GP websites and other digital platforms including eConsult to organise repeat prescriptions.

Those with digital skills say that online services have worked well for them and they receive prescriptions on time.

*"I use the website if I can. Works well for prescriptions"*

*"You can order your medication online and arrange to pick it up from a chemist of your choice. Never have a problem"*

Other service users say they've have had to chase prescriptions.

*"When you are lucky enough to get an appointment, they mess up sending over your medication and then don't answer the phone to fix the problem so I'm now without medication despite giving two weeks notice before my prescription ran out!"*

*"I've done it a few times via the app but the surgery doesn't release the medication and I still end up having to chase. Bit of a hassle really"*

Out of frustration, as a result of difficulty accessing GP services, some use 111 to get repeat prescriptions.

*"I am allergic to antibiotics [that] the doctor prescribed [me]. I couldn't get a telephone appointment to change the meds so rang 111... they did it in 5 mins sent a prescription to my chemist"*

*"I called 111 and told them the situation.... [that I] cannot be without [my medication] and they helped me"*

The 111 service can be used for advice on how to get a repeat prescription, and for advice on where to get an emergency supply of your prescribed medicine<sup>2</sup>.

## **Lewisham and Greenwich Trust**

### **Waiting times at A&E**

Waiting times in A&E at Queen Elizabeth Hospital and across the country have increased and tend to peak in the winter months<sup>3</sup>. This is a topic that we have repeatedly reported on.

Service users report extensive waits at A&E at Queen Elizabeth. Many service users

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<sup>2</sup> <https://111.nhs.uk/>

<sup>3</sup> <https://researchbriefings.files.parliament.uk/documents/CBP-7281/CBP-7281.pdf>

make repeated visits to receive treatment.

*“I was having gall stones pain for over a year, have been going back and forth to A&E - sat there for 5-6 hours and they have packed me with painkillers and sending me home. It got to the point the pain was just too much to handle I had to go back... Sat there for other 6 hours, vomiting and with fever”*

*“Urgent care takes 3-4 hours each time you come in, most of them [other patients] return back, frustrated that they are not being looked after by professionals”*

### Care for older people

We have had many reports on the care of older people at Queen Elizabeth. Some families are concerned that the staffing available is not adequate to support those living with dementia.

In some cases, the dignity of those living with dementia has not always been maintained:

*“My nan, 95, was on ward 2 at first. They was amazing with my Nan. She’s now on ward 20 and what I will say is I see the flip side. At times there has been 3 nurses on for the whole of ward 2 and the other ward. There are many older people and also many who have dementia because they are too ill to go home and waiting to be moved to a home.*

*I’ve seen patients with dementia shouting out and pulling their drips out and so on. The nurses just do not have the staff there to do on-on-one care”*

*“I was there [on ward 14] for around 4 weeks. Even now when I think of how they treated me I feel like crying...  
The old lady opposite me was eating her yogurt with a comb as she didn’t have a spoon and didn’t want to ask”*

Ben was called an ambulance by 111 as he was very ill. Ben arrived at Queen Elizabeth Hospital at 9am and was put on ward 2 while waiting to be seen. Ben waited for over 4 hours on ward 2.

Ben saw older patients living with dementia on the ward not receiving dignified care. Two patients near him were urinating on the floor.

*“How am I supposed to rest with all this going on?”*

Ben is seriously ill and vulnerable to infections. He felt unsafe on ward 2, unable to rest, and worried what might happen if he slept.

In desperation, Ben asked to be moved to another ward.

*“I expected to be moved literally anywhere where I felt safe and able to rest”*

The request to move was refused.

Ben didn’t feel staff took his concerns and vulnerability seriously. Ben took himself to A&E to be seen, only to be told to return to ward 2.

### Communication

Service users are struggling to get through via telephone to the correct departments at Queen Elizabeth and at Eltham Community Hospital.

The Orthopaedics department was temporarily moved from Queen Elizabeth to the University Hospital Lewisham during November<sup>4</sup>. During this period, some service users have been unable to get through to the relocated Orthopaedics department.

Unable to get accurate information from Queen Elizabeth Hospital, one service user turned to social media to find contact information for the orthopaedics department:

*“Any ideas on how to chase a fracture clinic appointment at QE? No one [is] answering the department phone and switchboard were not much help either”*

*“I just cannot get through to the number to this hospital. The one time I did the guy who answered had no clue who to put me through to. Main issue is you just cannot get through. Not good enough”<sup>5</sup>*

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<sup>4</sup> A Healthwatch Greenwich representative has verified the temporary relocation of the department with Queen Elizabeth Hospital Outpatient Department

<sup>5</sup> Eltham Community Hospital

### Care of children with special needs

Mary, a black mother of African descent, was concerned about her son. He'd been repeatedly sent home from school due to poor health. Her son, Oscar, is a non-verbal child of primary school age diagnosed with ADHD and Autism.

Mary went to their GP who advised her to take Oscar to see a paediatrician. The GP told Mary the quickest route to an appointment would be to go to A&E.

At A&E, Mary told staff Oscar had special needs and asked to wait in a less crowded space. Her request was refused. Mary asked again if she could wait in a side room - she could see that several side rooms were available. Again, her request was refused, and Mary felt Oscar's needs were dismissed out of hand.

*“The nurse signalled [no] to me with her hand... it was like she had no understanding of special needs. I felt like a leper. I was shocked”*

Oscar became more and more agitated. In the loud, busy environment of A&E, Oscar's behaviour deteriorated, and Mary found it impossible to calm him down. In desperation, Mary asked if she could wait with Oscar in the car to be called in when the paediatrician was ready. Mary was told this was not possible either.

There were no suitable toys available. Mary was offered a small pram for Oscar to play with, this was designed for smaller children and was not appropriate for Oscar. As Oscar's behaviour got worse, Mary was offered two chairs in a corridor.

Oscar became even more agitated and overstimulated in the corridor and started to interact physically with other patients. Mary was struggling to cope and worried that other patients were frustrated with Oscar.

*“We were in the corridor for hours... I spent my time chasing him up and down and stopping him from touching people”*

Mary and Oscar had been given seats near a cupboard which was being used frequently by staff. This was added stimulus for Oscar and unsettled him further. Unable to cope, Mary broke down in tears.

*“I wouldn't expect this in the UK in 2021, I don't want this to happen to anyone else. It was a very distressing experience”*

Eventually, after more than four hours, a doctor finally allocated a side room for Mary and Oscar to wait in.

Mary knows that waiting time is longer due to COVID pressures, but she was shocked at the treatment of her son.

*“I understand that NHS policy is that reasonable adjustments should be made to ensure that people with learning disabilities get the medical help they need but this did not happen”*

Mary compared her experience at Queen Elizabeth to other hospitals she's taken Oscar to in the past. Mary said other hospitals have a much better approach and understand Oscar's needs. Other hospitals provide sensory toys to keep him calm while waiting and immediately allocate a side room to avoid sensory overload. Mary's also been able to wait in the car with Oscar if a side room has not been available.

## MSK (Musculoskeletal) Physiotherapy

### Longer waiting time for appointments<sup>6</sup>

Service users report delays in referrals and access to care with some waiting for 6 months or longer.

*“Took me 6 months to get an appointment”*

*“An acknowledgment would at least let me know I’m on a list...I have actually been waiting since May!”*

Patients referred for specialist non-urgent treatment, should expect to be treated within a maximum waiting time of 18 weeks<sup>7</sup>.

### Ongoing Communication

MSK Physio service users are left unsure if their communications have been received as no confirmation of receipt is issued. Service users try multiple methods to get a response, often to no avail:

*“I sent email to MSK physio to see what is happening about my referral sent in August by my GP... as I couldn’t get response on phone. It’s over a week now and I haven’t had an answer or even an acknowledgement of my email”*

*“Emailed them three times over the last month. I have tried to phone too. No response to either”*

Confirmation that an initial email has been received, or a connected phone call with service staff could prevent service users from sending multiple emails and improve overall patient experience.

### Managing expectations

In many cases, service users’ expectations on how long they should expect to wait are not managed, leading to frustration and disappointment. Providing service users with a realistic timescale as to when they can expect to hear back could prevent this<sup>8</sup>

The service user below has been chasing their referral status since July 2021:

*“Phone never answered, and message says send only ONE e-Mail which I did. In the end spoke to my doctor who contacted MSK... They were told [that] there is a long waiting list, and I will just have to wait my turn. Still waiting!!”*

The service user, like many others, returned to the surgery to chase the status of their referral, causing more administrative workload for GP practices.

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<sup>6</sup> This is something that our earlier reports have also highlighted

<sup>7</sup> <https://www.nhs.uk/nhs-services/hospitals/guide-to-nhs-waiting-times-in-england/>

<sup>8</sup> <https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2021/01/C0855-i-good-communication-with-patients-guidance-v2.pdf>

## Dentistry

### Access

Healthwatch England has published a report on dentistry based on 1,300 comments from service users. National evidence suggests practices are prioritising private patients over NHS ones or are only offering non-urgent treatment to patients if they pay privately<sup>9</sup>.

Some Greenwich service users report difficulty in registering with a dentist, leading to long waits for dental care.

*“Does anyone know of a decent dentist in the area that accepts patients on ESA? It seems to be hard to find one that does, which didn’t used to be the case”*

*“We’ve had hell trying to find an NHS dentist over the last 3 years....I literally took a day off work to phone every clinic in south and central London and nobody has space. My partner was put on a six month waiting list for root canal - he couldn’t wait that long so it was cheaper and quicker to fly abroad and get it done there. My advice for people currently with NHS dentists is to never leave, even if you move 100 miles away, because you’ll never find a new one!”*

### Removal of patients from practice lists

Dentist surgeries will take patients off their books if they have not attended an appointment for 12 months. They do not have to tell patients they are doing this. This creates frustration and anxiety for service users as they struggle to find a new dentist to register with:

*“It’s really hard to find [an NHS dentist], I’ve been trying for weeks...[the dentist surgery] removed my whole family”*

*“I phoned for a dental appointment but because I haven’t been for 2 years because of Covid they have taken me off their books unless I pay private it’s so bad. I can’t get an appointment anymore”*

### Next steps

We will follow up on all concerns or issues raised. We will work with commissioners, providers, and service users to understand where services are working well and where further development may be needed.

### Contact Us

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<sup>9</sup> <https://www.healthwatch.co.uk/news/2020-12-09/dentistry-and-impact-covid-19>