

Healthwatch Lincolnshire Update Report – November 2022

Report covers the period July to September 2022

Contents

Key Performance Indicators Overview	2
Target 1 - Public sharing their views	3
Target 2 - Information and Signposting.....	5
Target 3 – Volunteers.....	8
Target 4 - Distribution list	9
Target 5 – Website & Social Media stats.....	10
Engagement and Involvement.....	10
Representation.....	13
Training.....	13
Looking forward Oct – Dec 2022.....	14

Key Performance Indicators Overview

Under LCC monitoring we have 5 measured Key Performance Indicators (KPIs).
Currently 4 KPIs are Exceeding target, 1 Target on Track.

	KPI area	Comment
1	Number of people sharing their views and experiences with us on Health and Social Care in Lincolnshire. 1500 yearly target	Exceeding Target – 3659 people have shared their views and experiences with us on Health and Social Care in Lincolnshire, 2369 through our survey work, 1290 directly with our Information Signposting Team.
2	Number of people provided with information and signposting. 1428 yearly target	Exceeding Target – 2272 people have been provided with information and Signposting. 638 people have been provided with information signposting directly with the team and an additional 1634 have accessed through the Information Signposting articles on our website
3	Volunteer Hours – Target for year 1414 hours	Exceeding Target – 1,738 hours across volunteering. Healthwatch Volunteers, taking part in 119 activities, meetings, and events.
4	Number of people signed up to our Distribution list – Target for year 2000 people	Exceeding Target – 2039 people on our Distribution lists, 1195 on our monthly Enews List, 83 on our media contacts, 160 Healthwatch Monthly Report list, and 601 on our groups, societies and other spreadsheet.
5	Website & social media stats – Target for year 42,027 website views Target for year 473,403 FB Post Reach Target for year 14,848 Engaged Users	Target on Track 35,860 website Page Views, website views increased each quarter 7,477 – 8,423 – 9,569 – 10,391 but was short of the aspirational target, however increased digital engagement has increased our social media reach where our reach has been exceeded. Facebook Post Reach 133, 900 (Facebook reach is the number of unique people who saw our content) Facebook Engaged Users 1,975 (Facebook reach is the number of unique people who saw our content)

Target 1 – Number of people sharing their views and experiences with us on Health and Social Care in Lincolnshire.

Number of people sharing their views & experiences with us on Health and Social Care in Lincolnshire	Quarter 1 Oct 21 – Dec 21	Quarter 2 Jan-Mar 22	Quarter 3 Apr-Jun 22	Quarter 4 Jul-Sept 22	Total
Annual target – 1500	412	1726	1226	295	3659
					Exceeding Target

Exceeding Target – 3659 people have shared their views and experiences with us on Health and Social Care in Lincolnshire, 2369 through our survey work, 1290 directly with our Information Signposting Team.

This quarter **295** people shared their views and experiences directly with our Information Signposting Team.

During this time, the main themes patients are contacting us about are:

Dental Services: we continue to hear from individuals who are struggling to access NHS dental services. This is a county wide problem, however, Grantham and Mablethorpe appear to be two particularly affected areas.

Key themes:

- Lack of access to NHS dental services
- NHS practices turning into private practices
- Patients are unable to pay for private care, which seems to be the only option

Difficulties accessing NHS dental care in the county persist. We continue to hear from people who are struggling to find practices taking on new NHS patients. Regardless of whether a patient is seeking preventative care such as a check-up or treatment for dental problems, for many, the only option is to pay for private treatment. However, this is not feasible for the majority.

Furthermore, as many have been unable to see a dentist for months and often years, their initial dental issues have deteriorated further and/or resulted in other problems. This means that they now need additional treatment.

Additionally, as time goes on, we are hearing from even more people whose dental practice has 'handed back their NHS contract' and are now only offering private treatment. Those registered with these practices are given little or no notice of this change. Again, many of these individuals cannot afford private treatment, so they too are now trying to find alternative NHS dental care, to no avail.

GP Referrals: coinciding with Healthwatch England's campaign to gather feedback on GP referrals, individuals in Lincolnshire shared their experiences.

Individuals shared their difficulties of getting a referral, the waiting times for referrals and poor communication around appointments. Some felt they really had to 'fight' for referrals and others were concerned about waiting times and the impact this delay would have on their prognosis. Whilst waiting for referral appointments, communication between patients and services was often poor. This lack of communication around timings of appointments, what to expect whilst waiting and how to 'wait well' often caused additional worry.

Hospital Services: poor communication, waiting times at A&E and for referral appointments continue to be ongoing concerns.

Key themes:

- Poor discharge from hospital and lack of follow-up care
- Poor communication
- Referrals and waiting times
- A&E

Several individuals shared their poor experiences of hospital discharge and the subsequent lack of follow up care. We were made aware of the fact that discharge was often delayed due to no home care being available or patients were discharged even though no home care was available. Furthermore, discharge often occurred late at night, without family members or carers being informed. This poor communication and lack of care is putting vulnerable patients at risk of harm, often resulting in them being readmitted to hospital. This causes considerable distress for all those involved and places a burden on family and/or carers to try to find care for their loved one. This often proves an impossible task.

Poor communication was not just exclusive to hospital discharge. Indeed, individuals expressed their concerns around being unable to stay in contact with loved ones in hospital and the difficulties of getting updates about their condition. Others shared their struggles in trying to contact a range of hospital departments to discuss appointments and referrals and the lack of communication whilst waiting for appointments.

Furthermore, worries around cancellations, length of waiting times for referrals (often over 2 years) and appointments were also shared. Understandably, individuals were concerned about the impact waiting times would have on their prognosis.

Finally, in relation to hospital services we are hearing from patients about the incredibly long waiting times at A&E, with patients often waiting for over 10 hours, with little or no food and drink and a comfortable place to sit.

What is Healthwatch Lincolnshire doing about this?

We continue to raise all of these concerns with providers. As a result of the comments, we are hearing in relation to A&E, we are about to commence Enter and View visits to the A&E departments in our county. This will allow us to gather additional patient experiences, examine what is working well and what needs to be improved. This feedback can then be shared with providers to help implement positive change.

Poor Communication: poor communication has been previously discussed specifically in relation to GP referrals and hospital services.

The recurring issues below relate to those two areas and more generally to communication between health and care professionals and patients:

- Patients not being clearly told the date and time of appointments
- Patients being unsure of which department and/or service their appointment was with
- The purpose of appointments not being clearly explained
- Long waiting times for appointments, results, treatment and follow-ups – during this time communication between services and patients was minimal to non-existent

What is Healthwatch Lincolnshire doing about this?

Earlier this year we produced our communications report which highlighted the recurring issues we hear in relation to communication between health and care services and patients. The issues outlined above were included (as the issues discussed above are the concerns we’ve been hearing for some time) in this report and the report was shared with providers. Encouragingly, last month we listened to a presentation given by the ICB in response to our report on how they plan to tackle the issues raised. We will continue to monitor if the interventions shared improve communication between services and patients.

Mental Health Services: access to support and being discharged from community support without prior consultation were recurring issues.

Access to mental health support in the community has been a concern raised to us this quarter. Individuals felt they had been abandoned by support (often without prior consultation) or were never able to access support to start with. A carer expressed their frustration of being repeatedly promised help for their dependent but the support never materialising. They felt let down by the system and other patients just wanted to be listened to and acknowledged.

Target 2 – Number of people provided with information and signposting

Number of people provided with information and signposting	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Year to Date Total
	Oct 21 – Dec 21	Jan-Mar 22	Apr-Jun 22	Jul-Sept 22	
Annual target - 1428	369	554	704	645	2272
					Exceeding Target

Exceeding Target – 2272 people have been provided with information and Signposting. **638** people have been provided with information signposting directly with the team and an additional **1634** have accessed through the Information Signposting articles on our website.

In the last quarter **645** people have been provided with information and signposting. **295** people have been provided with information signposting directly with the team and an additional **350** have accessed through the Information Signposting articles on our website.

During this period there were 70 comments which came from the Integrated Care Board Survey, this particular survey was a commissioned piece of work from CQC and was around services working together and how people felt this could be improved or if it works well, what they would like to see.

Comments by locality

East = 26 South = 22 Southwest = 5 West = 12 All areas = 3 and Out of Area = 2

For those who provided Healthwatch with contact details, they were provided with our protocols and if they wished to discuss on a 1-1 basis to make contact.

NHS Dental was again high on the feedback received, 49 were received during this period. Those who could not get access to an NHS Dentist, NHS practices handing back their NHS contracts and only accepting private patients. Children unable to access dentistry, patients unable to afford private treatment. All areas in Lincolnshire now not taking on new NHS patients.

Comments by locality

East = 11 South = 8 Southwest = 12 West = 12 All areas (as area not known) = 4 Out of area = 2 (these patients have also been provided with signposting information along with their relevant Healthwatch details).

If able to locate an NHS Dentist for these patients this has been provided, although out of county. NHS Choices website information given as this shows those only open to accepting new NHS Patients. NHS 111 information provided to these patients in case they experienced pain or swelling whilst waiting to get on an NHS dental list.

Those who have raised concerns around hospital or mental health care have all been provided with the relevant PALs team information to enable them to remain empowered, for those patients who would like to make formal complaints, Advocacy information for support has been provided along with who the patient needs to make the complaint to, this also relates to GP practices and who to make contact with, within the surgery. For some patients where and how to make a self-referral for their needs as and when necessary.

Main areas of concern for this period:-

- Communication
- Getting through to surgeries in the first place
- Keeping patients informed about progress (including sharing of information)
- Lack of sharing of information between professionals especially if patient receives treatment out of county
- Waiting Times
- At primary level access to appointments in the first instance
- Referrals to Acute services
- Lack of services (Dental etc.)
- Patients feel it is a postcode lottery
- Lack of specialisms in Lincolnshire and an expectation that Lincolnshire patients will have to travel further to get appropriate treatment or services
- Better signposting this could also be under communication as professionals lack knowledge on what is actually available to their patients within Lincolnshire or where to refer patients to get information for themselves

Top website Information Signposting Articles this quarter

- 1. Do you need help travelling to NHS services? (2019)**
<https://www.healthwatchlincolnshire.co.uk//advice-and-information/2019-09-27/do-you-need-help-travelling-nhs-services>
- 2. How to get an NHS dentist appointment during COVID-19**
<https://www.healthwatchlincolnshire.co.uk//advice-and-information/2020-06-22/how-get-nhs-dentist-appointment-during-covid-19>
- 3. What is monkeypox and who can get a vaccine?**
<https://www.healthwatchlincolnshire.co.uk/advice-and-information/2022-08-12/what-monkeypox-and-who-can-get-vaccine>
- 4. Where can I go for support for my mental health as a new parent?**
<https://www.healthwatchlincolnshire.co.uk/advice-and-information/2022-04-29/where-can-i-go-support-my-mental-health-new-parent>
- 5. What is long Covid?**
<https://www.healthwatchlincolnshire.co.uk/advice-and-information/2022-05-24/what-long-covid>
- 6. Support and treatment for long covid**
<https://www.healthwatchlincolnshire.co.uk/advice-and-information/2022-05-24/support-and-treatment-long-covid>
- 7. How can your pharmacy help you?**
<https://www.healthwatchlincolnshire.co.uk/advice-and-information/2022-07-29/how-can-your-pharmacy-help-you>
- 8. Information on Coronavirus - UPDATED 13/03/2020**
<https://www.healthwatchlincolnshire.co.uk/advice-and-information/2020-03-13/information-coronavirus-updated-13032020>
- 9. Does the NHS have to provide an interpreter?**
<https://www.healthwatchlincolnshire.co.uk/advice-and-information/2022-05-24/does-nhs-have-provide-interpreter>
- 10. What is a GP referral and how can you get one?**
<https://www.healthwatchlincolnshire.co.uk/advice-and-information/2022-09-15/what-gp-referral-and-how-can-you-get-one>

Quarterly Impact Case Study

You Said...

Patient long wait (over 4 years) for cataract surgery.

Healthwatch did...

Healthwatch with patient consent contacted the Hospital PALS, Peterborough Hospital - Information has been shared with the senior Ophthalmology Team to investigate.



Patient said: *"Thank you so much for your help in moving this forward. Thank you again words cannot begin to express how grateful I am and how this news has made me feel - at last there is some light at the end of a very long journey. I feel like throwing a party."*

You said...

Lincolnshire resident looking for home care provision for spouse who is living with dementia. Has direct payments and is looking for an agency for social care with prompting, at present no personal care is needed. Has been in contact with numerous agencies but finding it difficult. Resident asked if it is normal to be left to get on with it themselves? Looking for 40 hours a week home care as they work and spouse needs someone to be present.

Healthwatch did....

Healthwatch contacted Age Care Advice and Early Bird Lifestyle (are unable to cover this area).

Relative update

Response from recipient of our support – *"Thank you so much, I was phoned yesterday and is coming to see us this Thursday afternoon."*

Target 3 – Volunteers

Volunteer Hours	Quarter 1 Oct 21 – Dec 21	Quarter 2 Jan 22 – Mar 22	Quarter 3 Apr 22- Jun 22	Quarter 4 Jul 22- Sept 22	Year to Date Total
Annual target – 1414 hours	400.5	512.5	344.75	480.25	1,738
					Exceeded Target

Exceeding Target – 1,738 hours across volunteering. Healthwatch Volunteers, taking part in 119 activities, meetings, and events.

Update from our Volunteer and Membership officer Simon Parker.

"Volunteering between July and September this year was a busy period, I think "normality" was starting to return. The only pause in the period was during the mourning period for her Majesty the Queen. Joining the Charity only in June, meant hitting the ground running and getting to know the volunteers as quickly as possible using face-to-face, telephone and zoom!

During July volunteers commenced their first Enter and View training session, that training is ongoing, and we commence our actual visits very soon with 7 trained volunteers.

1 new volunteer was recruited/inducted.

Other events covered by volunteers included Social Eyes Group in Spalding and Boston, the Readers Panel proofread reports.

In August I held two volunteer coffee mornings in Swineshead and Lincoln, these were well attended. Volunteers assisted at two Young Person's Mental Health Events in Grantham and Louth and Headway Charity Event in Boston. Much data was inputted by our admin volunteers onto IMP.

In September, volunteers covered, Pilgrim Hospital Communication event, a mayor's car boot and charity event, data inputting continued, and a Primary Care Event in Boston was attended."

Target 4 – Number of people signed up to our Distribution list

Number of people signed up to our Distribution list	Quarter 1 Oct 21 – Dec 21	Quarter 2 Jan 22 – Mar 22	Quarter 3 Apr 22 – Jun 22	Quarter 4 Apr 22 – Jun 22	Year to Date Total
Target for year 2000 people	1523	1968	1953	2039	2039
					Exceeded Target

2039 people on our Distribution lists, **1195** on our monthly Enews List, **83** on our media contacts, **160** Healthwatch Monthly Report list, and **601** on our groups, societies and other spreadsheet.

We will continue to build our existing lists of community groups/contacts to build the distribution list through our engagement and help from our Volunteers. With our new look Enews we will be sharing and promoting people to sign up and get involved as this is an informative resource for the people of Lincolnshire.

Target 5 – Website & social media stats

	Quarter 1 Oct 21 – Dec 21	Quarter 2 Jan 22 – Mar 22	Quarter 3 Apr 22 – Jun 22	Quarter 4 Jul 22 – Sept 22
Website Page Views	7,477	8,423	9,569	10,391
Facebook Post Reach (Facebook reach is the number of unique people who saw our content)	143,165	130,581	133,900	133,651
Facebook Engaged Users (The number of unique users who engaged with the page and/or content, including clicking links reactions and comments)	2274	5346	3967	1975
	Target on Track	Target on Track	Target on Track	Target on Track

Across the contract year we have seen 35,860 website page views, despite being below the aspirational target of 42,027 website views we saw an increased each quarter 7,477 – 8,423 – 9,569 – 10,391. Digital engagement has increased our social media reach where our reach has been exceeded with a target of 473,403 post reach, we achieved 541,297.

With our social media scheduling software we are able to provide and plan a variety of social media content, we will be looking to utilise more video content with updates and interviews, we will also be increasing our promotion of Information and Signposting advice which we share on our website.

Engagement and Involvement

Healthwatch Quarterly Report: July to Sept 2022

Oonagh M Quinn Healthwatch Involvement Officer

Healthwatch Annual Report Presentation and YourVoice@healthwatch Joint Event

Date/ time and venue confirmed: Wed 26 October 2022 11 am to 2 pm at the Storehouse, Skegness, PE25 1BY

Theme confirmed: Your health and social care services in Lincolnshire

Format:

- **Presentation of Healthwatch Annual Report** by Chair of Healthwatch steering group, Elizabeth Ball and Healthwatch Contract Manager Dean Odell.
- **Performance** by the Coastal Community Choir
- **Guest appearance** by the Jolly Fisherman
- **Round Table Discussion** and **Market Place** (spaces for 20 organisations)

- **Guests:** John Turner Integrated Care Board, Andrew Morgan ULHT, Chris McCann Healthwatch England, Sally Stansfield LCC Young Carers, Kay Gamble LPFT (Patient Experience), Martin Fahey Integrated Care Board, Dr Sam Cook Lincoln University Research Unit.
- **Roundtable Discussion:** themed question for each area to promote discussion. Tables to have a Facilitator / note taker where possible. Involvement of HWLincs Volunteers – Officer to coordinate volunteer involvement and liaise with Healthwatch Involvement Officer.
- **Promotional materials:** via social media (FaceBook / Twitter), strapline on all staff emails, A4 and A5 fliers produced with a leaflet drop across the county with a focus on Skegness and Mablethorpe coastal areas, Grantham, Boston, Lincoln and East Lindsey area), electronic promotion through networks Healthwatch personnel linked into, YourVoice@healthwatch mailing list and contacts, via HWLincs contacts, PCN networks including GP practices and a number of community connections across the county.

Promoting Healthwatch (ongoing)

Much of this work is undertaken through a variety of engagement methods including informal presentations, attendance at organisations Events with a stall and through a network of voluntary and 3rd sector networks.

Harder to reach communities: There has been ongoing Contact with groups - Informal Presentations to community groups (virtual / face to face): e.g., SureStart Centres, community centres, CLIP college, Boots Chemist, Village Halls in east of county, Methodist Church Groups and Salvation Army Community Groups, PROBUS Group (Gainsborough), Wheelchair Users Forum, Lincolnshire Veterans Network, ULHT Patient Panel and Healthy Lifestyle Advocates (via VoiceAbility).

Professionals in Health and Care Services: attendance at organised events such as Boston Neighbourhood Team and Primary Care Network Event in Boston, EMAS Patient Voice Panel, Lincolnshire Ageing Better Conference, Older People and Frailty Event (LPFT) and YMCA International Day of Older Persons and Age Friendly Event.

Key areas of concerns

For many of the harder to reach communities, the issues are very similar. They have raised the following: accessibility to services and lack of transport links, communication and where to get information, lack of understanding of the community, dissatisfaction with the system, delays in getting treatment when needed, centralisation of services.

By keeping in touch on a regular basis Healthwatch Lincolnshire offers the communities an opportunity for an independent organisation to listen to their concerns and raise these on their behalf. Building up trust within the community is essential so that they feel valued and reporting back to them with updates. (You said, we did).

General Engagement Activities:

Develop a Programme of Enter and View (E+V)

Enter and View A focussed engagement tool as part of the Annual Plan.

Following the initial introduction to 'what Enter and View Is and Isn't Training Session', a further session planned at the beginning of November targeted at reviewing paperwork for targeted visits to A+E departments within ULHT. Meeting set up at end of October 2022 to discuss with Patient Experience Manager ULHT focussing on protocols and setting future dates for visits to ULHT sites.

Rural Communities

Following the desktop research completed and supported by Volunteers in early summer months. During Summer /Autumn months developed connections with named key community groups in 6 areas around the county. **Focus on 6 areas** in Lincolnshire.

To reach and engage Frontline Staff

Continued development of network connections already in existence build on working relationships by: Utilising existing networks, staff communication teams in LCHS / LPFT / ULHT, Health and Social Care Departments, Bishop Grosseteste University and Lincoln University. Identification of "gaps", opportunities to influence change in Health and Social Care. Attendance at Health and Care Events arranged through the Networks and partnerships already in existence.

Primary Care Networks / LinCA Membership meetings.

Development of ongoing engagement directly with care homes (staff and residents / carers / families). On Hold – to discuss with new Volunteer and Membership Officer.

Key Findings: challenges in recruiting staff and then retaining them, development of staff and ongoing training opportunities. Reduction in the number of nursing beds within Lincolnshire and deregistration of homes from nursing to a care home.

Accessible Information Standard focus on sensory loss Healthwatch England National Campaign

Ongoing contact made with Lincolnshire Sensory Services / South Lincs Blind Society / Lincoln Blind Society / Carers First / LPCF. Focus on using the dental campaign to gain insight into experiences from harder to reach communities.

What happens next: Attend face to face session(s) with sensory loss residents and gather feedback. Liaise with Volunteer and Members Officer to follow up on ongoing engagement with sensory loss groups. Sessions booked for volunteers to attend and record experiences. Record findings and input onto IMP.

Representation

In line with our core representation requirements, all meetings attended during the quarter were held virtually in response to the pandemic.

During this quarter Healthwatch have contributed to several meetings including:

- Lincolnshire ICP & Health and Wellbeing Board

- Lincolnshire ICB- Board, Quality Patient Experience Committee and 1:1 with Chief Nurse.
- Lincolnshire Surveillance Group
- Lincolnshire Outbreak Engagement Board
- Primary Care Commissioning
- Primary Care Quality and Performance
- Lincolnshire Health Scrutiny Committee
- 4-way liaison meeting with HWBB, HSC, CQC and Healthwatch
- Health Protection Board
- ULHT Board
- Lincolnshire Partnership Foundation Trust, Council of Governors and 1:1 with Chief Nurse
- LVET – Voluntary Engagement Team, supporting the voluntary and community sector

Operational Representation:

- EMAS Patient Voice
- Patient Experience Group PXG (ULHT)
- LinCA Membership Group
- Service Quality Review LCC
- ULHT Patient Panel
- Voices for All Forum
- Wheelchair Users Forum
- Healthwatch England Engagement Leads Sessions
- ULHT Patient Panel
- Lincolnshire Veteran Network and Veteran Network

Training

We continue to roll out mandatory training for all new Volunteers and Employees. Annually we carry out a review of existing modules to ensure all required training areas are covered. All newly recruited Staff and Volunteers are required to undertake mandatory training.

As mentioned in the volunteering section, several Volunteers have attended training relating to representation to become 'Observer Representatives' at external meetings.

Other training completed includes an in-house delivered course 'what makes a good funding application' and CPD courses continued.

Looking forward Oct – Dec 2022

Dental Campaign

Over 200 people have already shared their experiences of NHS dental care in Lincolnshire through our campaign 'An NHS Dentist 4 All'. The findings of this report will be shared and directly influence the Lincolnshire Dental strategy 2023-2026 that is currently being put together. This strategy will set out what needs to be done over the next three years to improve NHS oral health services and drive improvements in oral health across the county. We have also been asked to provide patient participation at the Lincolnshire Dental Strategy face to face stakeholder's workshop and because of overwhelming interest we are now setting up our own focus group to provide even more patient experience. Our campaign will next look at providing feedback from seldom heard groups from those who are living in deprived and rurally isolated areas, cancer patients, wheelchair users, pregnant women, parents, those with sensory loss as well as from the dental workforce themselves. Find Out More Here: <https://www.healthwatchlincolnshire.co.uk/nhs-dentist-4-all-improvingdental-services-across-lincolnshire>

Social Care overview report

Over the past year, we received 56 comments regarding Social Care in Lincolnshire and its borders, The key themes in these cases were: poor communication, poor quality care, lack of support, financial issues and signposting. This report is awaiting an LCC response before publishing.

Annual Plan Oct 22 – Sept 23

We have launched our Annual Plan for the next contract year (Oct 22 – Sept 23) where we outline our priorities for the new year and how we will involve the Lincolnshire public. Read the full plan here: <https://www.healthwatchlincolnshire.co.uk/report/2022-09-30/healthwatch-lincolnshire-annual-plan-2022-2023>

Seldom Heard Voices Report

A review report will be created looking at our seldom heard engagement and what these different groups have to say in terms of Health and Social Care in Lincolnshire including the challenges as well as sharing what works well. Will be published January 2023.

GP referrals to Hospital services – Healthwatch England Update

Getting a referral from GP teams to other services is the missing link. Healthwatch England launched a national survey in August to collect people's experiences of trying to get a referral. Unfortunately, Healthwatch England are not sharing the local data with us until February 2023, where we will then share these local findings.

Share your thoughts

You can help make health and care services better by sharing your experiences and ideas.

Healthwatch Lincolnshire, Rooms 33-35, The Len Medlock Centre, St George's Road, Boston, Lincs, PE21 8YB. | 01205 820 892 | info@healthwatchlincolnshire.co.uk | www.healthwatchlincolnshire.co.uk |



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