

Healthwatch Lincolnshire Update Report April-June 2024

Published September 2024

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Key Performance Indicators Overview

Under LCC monitoring we have 5 measured Key Performance Indicators (KPIs).

4 KPIs are Exceeding target, 1 target is On Track.

	KPI area	Comment
1	Number of people sharing their views and experiences with us on health and social care in Lincolnshire. 1,500 yearly target	Exceeding Target – 473 people have shared their views and experiences with us on health and social care in Lincolnshire, 244 directly with our Information Signposting Team and 229 through our Respiratory Health Survey. Last quarter: 826 YTD: 1,635 *YTD= Year to Date
2	Number of people provided with information and signposting. 2,000 yearly target	Exceeding Target - 1,584 people have been provided with information and signposting. 95 people have been provided with information signposting directly with the team and an additional 1,489 have accessed through the Information Signposting articles on our website. Last quarter: 1,745, YTD: 4,418 *YTD= Year to Date
3	Volunteer hours - 1,414 hours target for year	Exceeding Target – 273 hours across volunteering. Healthwatch Volunteers, taking part in 45 activities, meetings, and events. Last quarter: 334hrs , YTD: 1029.5hrs *YTD= Year to Date
4	Number of people signed up to our distribution list -2,300 target for year	Exceeding Target – 2,599 people on our Distribution lists, 1,688 on our monthly Enews List, 83 on our media contacts, 187 Healthwatch Monthly Report list, and 601 on our groups, societies list. Our Enews list has increased from 1,599 to 1,688.
5	Website & social media stats –	Target on Track
	Target for year: 30,000 website views	9,682 website page views Last quarter 9,393 page views
	Target for year: 200,000 Facebook	
	post reach	Facebook post reach: 26,134 Last quarter: 109,580 YTD: 159,751 (Facebook reach is the number of unique people who saw our content) *YTD= Year to Date

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 23 – Dec 23	Quarter 2 Jan 24 – Mar 24	Quarter 3 Apr 24 – Jun 24	Total
Annual target – 1,500	336	826	473	1,635
				Exceeding Target

This quarter, **243** people shared their views and experiences directly with us on Health and social care in Lincolnshire, through our Information Signposting Team.

An additional **230** people shared their experiences through our Respiratory Health Survey.

The service areas commented* on the most this quarter were:

- GP services (41%)
- All hospital services (39%) (10% of all comments were about A&E)
- Dentistry (12%)
- Social care (11%)

72% of all comments were negative and 10% were positive. Many of the experiences shared with us this quarter were case-specific.

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

GP services

26% of the comments relating to GP services related to the Boston and First Coastal PCNs. In the East Coast and Boston, access to GP services continued to be highlighted as an issue with individuals reporting difficulties getting through to the surgery on the phone (facing long waits) and online services being closed early in the morning. During this quarter we've held several outreach clinics on the East Coast which may explain why so many comments related to this locality.

^{*}Some comments relate to multiple service areas.

Dental Services

Access to NHS dental services is still an ongoing problem for many patients in Lincolnshire. This especially impacts those who cannot afford to pay for private treatment such as pensioners or those on benefits. Comments shared with us, not just in this quarter, show that many people have been unable to access NHS dental care since the pandemic (and for some, like those in Mablethorpe, even before the pandemic), leading to deteriorating oral health. The only option is private treatment, which many cannot afford. As their oral health worsens without care, they need more treatment, which remains unaffordable, creating a continuous cycle of untreated dental issues.

Case Studies - Wheelchair Service

We received two detailed concerns about the wheelchair service, highlighting longstanding difficulties in accessing necessary care. As a result of these access issues, their quality of life has been negatively affected.

Case Study 1

"This was previously sent to AJM Healthcare in December 2023 and liaised with Maddie Green at AJM who assured me it was being dealt with, as were several people within this service, only to find that it wasn't and the poor patient is still waiting for a headguard – MND condition has deteriorated, they are non-verbal so needs to liaise with family member. This is obviously not great with dignity and respect for a vulnerable person in great need, and very frustrating not only for the family but for us as a Healthwatch when reassured this will be sorted.

I have been speaking with a family member whose parent suffers with MND and has a lovely new wheelchair. No headrest was available, head flops down, requires assessment? MND is advanced. This of course is of utmost importance to this patient and has been waiting for four months now.

The parent and patient are distraught as they are unable to do anything, and as I am sure you are aware this is a very debilitating disease. Their head is currently being kept in place by a make-do sweatband, Occupational Therapist requested a headrest/guard to NRS Healthcare as knew it was changing over."

Case Study 2

"I have been waiting since October 2023 for my severely disabled child's replacement headrest from the wheelchair service. My child has had their headrest for many years, it is now very worn and it is very rough. My child has psoriasis on their head and the headrest cover has made their head sore due to how rough the cover has become. I have made numerous calls regarding the delay and have spoken to the Clinical Lead and many other members of staff who also worked for the previous company AJM. I have been told it's been ordered, it's not been ordered, it's been lost, waiting for quote, lost the quote etc, etc. I put in a complaint by email on 25th of April and never received a response. Today, June 27th, I have again spoken to NRS who have now informed me it hasn't actually been ordered and they have no idea why, as the clinical lead should have ordered it. I again explained it will be a year at the beginning of October and still I am no nearer closer to getting the replacement headrest cover for my child. I no longer feel that I am getting anywhere myself at trying to sort this problem and therefore ask for your urgent involvement before I take this matter up with NHS England.

The wheelchair service is NRS Healthcare, would you please contact them for my child to get this long-running matter resolved."

Case Study 3

"Healthwatch contacted by the local disability representative. The group has been approached by members that have concerns about the new provider of wheelchairs and disability aids in Lincolnshire. The negative experience members have are that the phone never gets answered and have to leave message on answerphone. This states that a call back will be made in working hours and this has not happened. That referrals are having to be chased by service users for long periods of time. Members were hoping that the service would be improved with a new provider but to date this has not happened."



Respiratory Health

During the second quarter of 2024, we ran our respiratory health campaign. 223 service users shared their views on accessing care for respiratory conditions, including asthma, chronic obstructive pulmonary disease (COPD), bronchiectasis and more. Seven healthcare professionals also shared their views on diagnosing and supporting those navigating respiratory conditions in Lincolnshire.

Key headlines from the report:

Experiences did not appear to differ based on whether the individual was, a carer, neurodiverse or which area of the county they lived in. Experiences somewhat differed based on the respiratory condition they had.

Respondents with asthma tended to rate the different aspects of their care including 'being able to access care for your condition' and 'involving you in decisions about your care' more highly than those with other respiratory conditions such as bronchiectasis or breathlessness. However, we were unable to tell if these differences were statistically significant.

Overall, regardless of the respiratory condition, the majority rated 'offering you different forms of treatment not just medication' and 'communication between professionals within the service and external services (e.g. therapist, dietitian, hospital services, pharmacies etc.)' as poor.

41% (80) had faced challenges getting medications that worked for them. These challenges included medication shortages, especially inhalers, difficulties accessing

specialist medication in the community, and finding medications that effectively controlled symptoms.

When asked what works well and what could be improved, service users and professionals raised many of the same areas.

What works well?

- Monitoring and reviews
- Specialist care both delivered in the community and secondary care
- Repeat prescriptions praised for their ease and convenience
- Support from GPs (although this was not a universal experience, with some saying this element of their care was poor)

What could be improved?

- Reduce inequality in the availability of services and support, both in terms of geographic location and specific conditions
- Localised clinics with respiratory specialists
- Local support groups including those with lived experience
- Provision of more information around causes of conditions, prognosis and management. This included holistic support to complement medication
- Reduce waiting times for specialist support and provide support to help people "wait well"
- Better communication between services, especially with out-of-county services
- Increase staffing
- Free prescriptions for asthma

Target 2 - Number of people provided with information and signposting

Number of people provided with information and signposting	Quarter 1 Oct 23 – Dec 23	Quarter 2 Jan 24 – Mar 24	Quarter 3 Apr 24 – Jun 24	Year to Date Total
Annual target: 2,000	1,089	1,745	1,584	4,418
				Exceeding Target

Exceeding Target – 1,584 people have been provided with information and signposting. 95 people have been provided with information signposting directly with the team and an additional 1,489 have accessed through the Information Signposting articles on our website. Last quarter: 1,745, YTD: 4,418
*YTD= Year to Date

Outreach

Healthwatch Lincolnshire signposting and information team arrange to go into different areas of Lincolnshire for the community to access in person signposting. We are aways looking for other areas in the county to support and offer this service. Please call 01205 820 892 or email info@healthwatchlincolnshire.co.uk

April 2024

- Grantham Citizens Advice
- Mablethorpe Coastal Centre

May 2024

- Spalding Citizens Advice
- Bearded Fishermen Gainsborough
- Grantham Citizens Advice
- Skegness The Storehouse

June 2024

- Skegness The Storehouse
- Spalding Citizens Advice
- Mablethorpe Coastal Centre
- Sutton On Sea Tideturners Community hub (NEW)
- Extra Time Hub, LNER Stadium, Lincoln (NEW)

We have been approached to attend a community learning centre in Louth in the near future.

The signposting team also raised one safeguarding concern and one poor practice concern during April – June 2024.

There have been 243 comments raised and the main themes Healthwatch signposting team has heard about in this timeframe have been:-

- Lack of communication to patients from hospitals/GP surgeries and wheelchair services
- Long waits in A&E across the county
- Trying to get through to make appointments or speak to someone in GP
 Practices across the county proving difficult
- Results of tests patients not being informed of their results in a timely manner
- NHS dentist access had eased a little, however very few people in the county are able to register with an NHS dentist, only emergency appointments available currently. (Prevention better than cure!)
- Access to certain medications causing problems

We signposted to a number of areas for these patients, including, PALs, complaints, NHS 111 and practice managers.

Positives / Compliments

During April – June there have been 25 compliments provided, which included:

- Urgent Treatment Centre Skegness
- Lincoln County Hospital
- Mobile eye unit
- Swineshead GP Surgery
- Scunthorpe Hospital

Quarterly case study

YOU SAID:

"Recently I made a visit to my GP. I felt that the person I saw was not fully engaging and try to brush my concern aside. I explained to them that the right side of my jaw felt lower down than the left side. Also, that the right side of my mouth was slightly lower. They put a pair of gloves on to feel my jawline and said things were fine and there was nothing to worry about, they didn't seem to think there was a difference, however I know that there definitely is a difference. The person was pleasant. It seemed that they wanted to close the conversation and end the appointment as soon as possible.

When I mention that there was osteoporosis in the family, they said they would refer me for a bone scan. Usually when you visit a practitioner, they will give you an indication as to how long it may be before you hear from the scan department. A practitioner would also ask questions. It seems that we were just going through motions. They said that they would have to ask someone about the scan. Surely a practitioner would know whether a scan was the right way forward or not. I am not sure where to go from here as at the beginning of the consultation they said that anything with the jaw was the responsibility of the dentist. I also wanted to discuss an issue that I had visited the surgery for recently concerning a problem with my neck. I wondered if the jaw and the neck issue were connected. I did not feel totally comfortable with them and didn't find it easy to engage. But as I said they weren't unpleasant."

WE DID:

Patient requested Healthwatch make contact with the practice manager. A couple of days later the patient contacted us to say: "The surgery contacted me today. They were very good and has arranged a telephone call for a week on Saturday with another practitioner. Thank you for all your support with this I feel much better now."

YOU SAID:

"Patient has chronic pancreatitis for years and has been on CREON medication. More recently though this particular medication has not been available in Lincolnshire, but can get in other counties, such as Cambridgeshire or Bath that the patient knows of at least. Their pancreas does not produce enough enzymes which is why this medication is needed. must get a paper prescription to take out of county every 28 days for this essential medication. GP has suggested contacting consultant, which the patient has done, but unable to provide any alternative options. If the patient does not get the medications they could end up in hospital, which of course they do not want to do, so will keep travelling to Cambridgeshire to get their medication. Not blaming GP surgery and understands that there are restrictions with certain medications but would like to know why other counties are able to get this medication yet unable to access in Lincolnshire?"

WE DID:

We asked Pharmacy Lead why there would be a difference in Lincolnshire.

"The fact that this can be obtained from pharmacies out of the county may be down to several factors, including the current stockholding of that pharmacy (as they may already have had sufficient stock on the shelves), different wholesaler chains being used, or simply coincidence that at the time the pharmacy may have been able to order some of the limited supply within the supply chain from their wholesalers. Sadly, we do also see some pharmacies over ordering and stockpiling some medicines when such shortage notices are issued, which then creates a greater impact on the already fragile supply chain."

Healthwatch also contacted a number of pharmacies and found one 14 miles away that potentially could get this medication. The patient was informed and would make contact with them.

YOU SAID:

"NHS dentist in Lincoln – I can't get to see an NHS dentist or register with one and my teeth are falling to bits due to medical conditions.

WE DID:

Healthwatch spoke to the patient at length, NHS options provided, further afield, but patient doesn't like driving too far, emergency options provided in Lincoln and an option closer to the patient.

Patient called back: "To thank you and say that you were really helpful. I'm very grateful of the information you provided and has now managed to get registered with the closer option you suggested."

Top website Information Signposting Articles this quarter

1. 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

2. 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

3. Help making a complaint

https://www.healthwatchlincolnshire.co.uk/help-making-complaint

4. 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

5. 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

6. What is adult social care?

https://www.healthwatchlincolnshire.co.uk/advice-and-information/2023-03-21/what-adult-social-care

7. Support and treatment for long covid

https://www.healthwatchlincolnshire.co.uk/advice-and-information/2022-05-24/support-and-treatment-long-covid

8. Essential First Aid Kit Supplies for Every Home

https://www.healthwatchlincolnshire.co.uk/advice-and-information/2023-07-11/essential-first-aid-kit-supplies-every-home

9. What support can I get as a carer?

https://www.healthwatchlincolnshire.co.uk/advice-and-information/2023-07-20/what-support-can-i-get-carer

10. What to expect after a dementia diagnosis

https://www.healthwatchlincolnshire.co.uk/advice-and-information/2023-05-23/what-should-you-expect-after-dementia-diagnosis

11. How to access mental health support if you're lesbian, gay, bisexual or transgender

https://www.healthwatchlincolnshire.co.uk/advice-and-information/2022-08-12/how-access-mental-health-support-if-youre-lesbian-gay-bisexual-or

Target 3 - Volunteers

Volunteer Hours	Quarter 1 Oct 23 – Dec 23	Quarter 2 Jan 24 – Mar 24	Quarter 3 Apr 24 – Jun 24	Year to Date Total
Annual target: 1,414 hours	422.5	334	273	1,029.5hrs
				Exceeded Target

Exceeding Target - 273 hours across volunteering with Healthwatch volunteers taking part in 45 activities, meetings, and events.

Last quarter: 334hrs, YTD: 1029.5hrs

Volunteer Numbers

• 31 volunteers and 8 trustees are registered with HWLincs as of 28th June 2024.

Below the table shows the locations and type of volunteering completed in this quarter.

April	May	June
Sleaford Community Engagement	Attend dementia conference	Compiling a spreadsheet for GP/surgery contact details
One NK Fair at North Hykeham	Readers panel report	Volunteers Week - Lincoln area coffee catch up
Newshound	Newshound	Newshound
YourVoice@Healthwatch event in Boston	Attend Boston Alliance dementia event	Veterans open day in Skegness
Readers panel report	Attend EMAS event	Readers panel report
Compiling of venue list for future engagements	Admin assistance	Admin assistance
	2 x Enter & View visits	

Future Engagement

- At the end of July, the second 2024 YourVoice@Healthwatch event will be held at the Ruston's Sports & Social Club in Lincoln. Three volunteers are assisting and others attending as residents.
- Throughout July we are supporting the REN market stall engagement, this is part of a Lincolnshire Voluntary Engagement Team (LVET) activity encouraging people to take part in research. Volunteers will be collecting feedback from the public on health and social care experiences.

- Beyond this we will be looking to provide engagement opportunities in libraries across the county, already in discussions with Sleaford, Boston and Spalding.
- Enter and View visits in Care Homes continues in July and August, undertaken by our trained volunteer Enter & View representatives team.

Target 4 - Number of people signed up to our distribution list

Number of people signed up to our Distribution list	Quarter 1 Oct 23 – Dec 23	Quarter 2 Jan 24 – Mar 24	Quarter 3 Apr 24 – Jun 24	Year to Date Total
Target for year: 2,300 people	2,357	2,470	2,599	2,599
				Exceeded Target

Exceeding Target – 2,599 people on our Distribution lists, 1,688 on our monthly Enews List, 83 on our media contacts, 187 Healthwatch Monthly Report list, and 601 on our groups, societies list. Our Enews list has increased from 1,599 to 1,688.

We will continue to build our existing lists of community groups/contacts and increase the distribution list through our engagements 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 23 – Dec 23	Quarter 2 Jan 24 – Mar 24	Quarter 3 Apr 24 – Jun 24
Website page views – Target for year 30,000 website views	6,778	9,393	9,682
Facebook post reach – Target for year 200,000 post reach (Facebook reach is the number of unique people who saw our content)	24,037	109,580	26,134
	Target on Track	Target on Track	Target on Track

Across this quarter we have seen **9,682** website page views. We have reached **26,134** people on Facebook.

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

Engagement and Involvement Activities (Involvement Officer)

Seldom Heard Community:

•	8 April	Traveller community	
•	29 April	Women's Health Hub	

• 29 April Lincolnshire Veteran Network

• 9 May Professional engagement with Traveller community:

Inclusive practice that works

• 17 May Veteran community

• 3 June Disability Action Group, Boston

5 June Voice for All, Sleaford

11 June VoiceAbility Healthy Lifestyles Group

• 24 June Armed Forces and NHS Symposium

• 26 June Veterans open day event, Skegness

• 27 June Lincolnshire Sensory Services open day event, Navenby

Main Themes: Access to services, especially face to face appointments, awareness of women's health issues and lack of understanding from clinicians across primary care resulting in delays and misdiagnosis, understanding the community and adapting methods of engagement and communication (e.g., use of interpreters, visual aids, Easy Read formats), concerns with the new provider for the wheelchair service in Lincolnshire, lack of understanding of the Armed Forces Covenant and how this can be supporting veterans and their families in our communities. The Traveller community expressing disengagement with services

26 April YourVoice@Healthwatch public event

Ageing Better and Moving Forward Together at YourVoice@Healthwatch

The Director of Public Health and the NHS director of Nursing and Quality spoke at Healthwatch Lincolnshire's April YourVoice@Healthwatch event at Boston's Jakemans Stadium.

We welcomed more than 80 guests and hosted a marketplace for service providers and charities, as well as talks from two guest speakers.



Prof. Derek Ward, <u>Lincolnshire County Council</u>'s Director of Public Health, spoke about the county's plans to help our people improve their quality of life as they get older. The talk drew highlights from the <u>Ageing Better in Lincolnshire: Adding Life to Years</u> report.

From practical advice such as standing on one leg while you brush your teeth to maintain muscle tone and bone density, through to the projected figures the county faces (Lincolnshire's over 65 population is projected to increase by 41% (74,351) by 2043 and its 85+ population will increase by 94%).

Areas of focus include community support and health services, respect and social inclusion, communication and information, social participation, civic participation and employment, outdoor spaces, transportation and housing. Each of these play a part in ageing well, Prof. Ward explained.

Martin Fahy, Director of Nursing and Quality for the NHS Lincolnshire Integrated Care Board (ICB), followed with a presentation that explained the aims of the ICB to bring together groups to take collective action and focus on prevention and early intervention, as well as tackle inequalities and equity in healthcare. The plan is outlined in the NHS Lincolnshire Joint Forward Plan 2023–2028.

Fahy said that the plan's ambition is "for the people of Lincolnshire to have the best possible start in life, and be supported to live, age and die well." This will be achieved by creating and maintaining a shared agreement with the public that determines what the best wellbeing, care and health looks like for Lincolnshire residents and the ways they can take a new approach to better living.

Both speakers took questions from the audience. The opportunity for people to have their voice heard and engage with decision makers is at the heart of the @YourVoice events. "It's a good opportunity for residents to get up to date, informative and reliable information from organisations that attend and have a stall in the marketplace, as well

as the HWLincs and Healthwatch Lincolnshire team for signposting and advice," said Oonagh Quinn, Healthwatch Lincolnshire's Involvement Officer.

Healthwatch Lincolnshire Contract Manager Dean Odell shared the success of the recent menstrual health campaign and took the opportunity to officially launch Healthwatch Lincolnshire respiratory health survey.

HWLincs CEO, Navaz Sutton, closed the speeches with a reminder of the importance of hearing the voices and views of people across the county, and urged partners to support the reach into communities they come into contact with and to promote volunteering opportunities.



The marketplace was attended by a variety of organisations, from health and care providers, including charities. It was also attended by a goat and a therapy dog, courtesy of CURO-Lincs.

Marketplace stallholders:

Butterfly Hospice Trust
Carers First
Connect to Support
CURO-Lincs
Every One
Headway Lincolnshire
Healthwatch Lincolnshire

Lincolnshire Community
Foundation
Lincolnshire Co-op
LPFT Governors and
Membership
LPFT/ How are You?
(HAY)

Engagement

•	7 May	Community group, Heckington
•	24 May	Community Primary Partnership meeting
•	4 June	Boston area volunteer coffee morning
•	6 June	Ladies luncheon group, Lincoln
•	12 June	Lincolnshire Volunteer Management Conference, Lincoln
•	20 June	Bourne and Stamford Wellbeing Network

• 21 June Long term conditions community group, Spalding

Main Themes emerging: access to accessible information, access to NHS dentists and face to face appointments, respite care and lack of joined up working between health and care, how to recruit and retain volunteers from across a wide range of skills to support organisations (e.g., access to appropriate training and involvement in an organisation, community groups working together, recognition of the value of the contribution volunteers make to an organisation), changes in circumstances for a unpaid carer and the lack of support for them from health and care professionals, involvement in their loved ones care and information sharing, lack of communication with patients. Sourcing timely support for people living with dementia and other long term conditions and access to reliable and timely information on social care including respite care. Long waiting times for assessments and referrals for children with additional needs that impact on their wellbeing. Lack of support while waiting for this to happen. Lack of information and availability of respite for carers.

Enter and View Activities:

• 22 May Woodview Care Home, Lincoln

Healthwatch Lincolnshire visited Woodview Care Home, Branston, Lincoln.

Healthwatch Lincolnshire, empowered by the Health and Social Care Act 2012, conducts Enter and View visits to health and social care services to gather on-the-ground perspectives from service users. These visits are not inspections but aim to understand users' experiences and whether services effectively meet their needs. Authorised Representatives, trained and vetted by Healthwatch, conduct these visits.

The announced visit to Woodview Care Home, Lincoln by two Authorised Representatives took place on 22 May 2024.

The visit involved interviews with residents and relatives, as well as staff members to understand their experiences.

Key findings

During this visit, six residents, four relatives and two members of staff had conversations with the Authorised Representatives.

- The Authorised Representatives were made to feel welcome by residents, relatives and staff
- Woodview Care Home is clean, tidy and has residents' artwork displayed in communal areas of the home. These areas include corridors, dining room and reading room.

Residents

- Residents said that they felt safe and looked after. The staff were friendly, approachable and supportive. They were aware that there had been some changes over the last six months, such as painting doors, displaying artwork and fire alarms being replaced.
- Residents and relatives expressed that they would like to have a daily activity programme with more variety and to include outings (e.g., visits to the seaside).

Read the full report here: https://www.healthwatchlincolnshire.co.uk/report/2024-08-05/enter-and-view-report-woodview-care-home

Representation

3 April Patient Experience Group (PEG) ULHT
 1 May Patient Experience Group (PEG) ULHT*

• 5 June Patient Experience and Involvement Group (PEIG)

(formerly PEG), (ULHT)

*Due to the merger of ULHT and LCHS the PEG will be now called Patient Experience and Involvement Group (ULHT/LCHS). This was the first meeting under the merger of the two PEGs. Separate Reports given from the divisions from both Trusts. It was agreed that there would be a rotation of patient stories from both to be presented at the meetings going forward. Presentations on Complaints Process (ULHT / LCHS). PLACE 2023 Report update shared. Urgent and Emergency Care LCHS. Corporate Governance LCHS. Stakeholder Tracker. Patient Information Group. Collaborative Community Care.

Children's and Specialist Services. Cancer Support Volunteers. Visiting Policy. Risk Register and ToR and Work programme.

- 14 May Service Quality Review (LCC) Adult Social Care
- 11 June Service Quality Review (LCC) Adult Social Care

Key things discussed:

- ICB Prevention Strategy task and finish group set up improving medicine guidance in care homes. Reduction of Section 42 Referrals (inappropriate referrals being made and duplication via CQC / Safeguarding and Local Authority). Changes in CQC processes may be behind all of this. LA to have meeting with CQC to get a more robust system in place. Three GP surgeries in special measures. Control drugs concerns in a few care homes being investigated. Emergency plans in place for residents who have epilepsy.
- LCHS diabetes management and care homes. District nurses are aware of a number of residents that are requiring urgent hospital admission due to their diabetes not being managed effectively. Competency and awareness training for care staff support being asked for to support providers and LCHS have responsibility for care plans.
- **Health Prevention** targeted screening in care homes, five outbreaks of diarrhoea and vomiting. Spring booster programme under way and on target.
- **Specialised Services** outbreak of scabies in specialised / supported living accommodation.
- Residents discharged from hospital with nursing needs and funding issues for care home. Short and Long term impact / re assessment of the person's needs.
- 21 May Patient Panel (ULHT)
- 18 June Patient Panel (ULHT)

Main Themes: impact of doctor's action on patients (delay in assessments and treatment, reduction of public support and trust for the NHS overall, recruitment and retention of staff in both health and care settings.

Representation

During this quarter Healthwatch have contributed to a range of meetings including:

- Health & Wellbeing Board/ICS Partnership Board
- Integrated Care Board (ICB)
- Health Scrutiny Committee
- Primary Care Co-commissioning Group PC3
- Lincolnshire System Quality Group
- System QPEC
- Health Protection Board
- Primary Care operational, quality, performance oversight Group (PCQP)
- Patient Experience Group (PEXG)
 ULHT
- Patient Panel ULHT
- Service Quality Review (SQR) LCC
- Patient Voice EMAS
- Lincs Veteran Network
- Regional Healthwatch Dentistry Meeting
- Lincolnshire Digital Inclusion Meeting
- Health Inequalities Programme Board

- Primary Care Access Working Group
- HWL,HWB, ICP, HSCFL & CQC Liaison Meeting
- Healthwatch CPL Pharmacy
- Healthwatch LCC
- Patryk and Dean LCC Contract Update
- East & West Midlands HW Network Meeting
- Co-Producing Health and Care in Lincolnshire Working Group
- Our Shared Agreement
- Equality Diversity and Inclusion (EDI)
- Disability Action Boston (as required)
- Ed Baker Adult Social Care LCC
- Healthy Lifestyles VoiceAbility
- LinCA Care Managers Meetings
- Carer First Events
- Family HUBS LCC
- Catch up with CEO's and Chairs across Trusts and LCC

Looking forward July – September 2024

Healthwatch Information and Advice - Outreach

Healthwatch Lincolnshire Information Signposting Team will be doing an Outreach Clinic in a number of areas across Lincolnshire so the community can access us face to face.

We can provide information and guidance to the public and record their comments, be they good, or not so good we are happy to have a chat.

OUTREACH in the next few months

July 2024

- Bearded Fishermen Gainsborough
- The Storehouse, Skegness
- Spalding Citizens Advice

August 2024

- Grantham Citizens Advice
- Sutton On Sea Tideturners Community hub
- Mablethorpe Coastal Centre
- Whisby Natural Centre Lincoln (New)
- The Storehouse Skegness

September 2024

- Spalding Citizens Advice Offices
- Bearded Fishermen Gainsborough

The signposting team have also been out and about at different events around the county speaking to patients about their experiences.

Book by calling 01205 820 892 or emailing info@healthwatchlincolnshire.co.uk

Enter & View

Visits planned for July to September 2024:

- Beckfield Care Home, Lincoln 11 July 2024
- Clarence House, Horncastle September 2024 (tbc) (supported living for adults with learning difficulties)

Neurological Survey

Healthwatch Lincolnshire has launched its Neurological health survey.



We want to hear your experiences of health and care services regarding neurological conditions including:

- Brain Injury
- Chronic pain
- Dementia
- Epilepsy
- Fibromyalgia
- Functional Neurological Disorder (FND)
- Migraines
- Multiple Sclerosis (MS)
- Myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS)
- Stroke
- Other neurological conditions

Whether good or bad, your feedback will help to create a picture of Lincolnshire's healthcare and inform what needs to be done to improve it.

The survey covers diagnosis, waiting times, treatment, management, what's working well, what needs to be improved and more.

It should take 5-15 minutes to complete and can be completed online here:

Complete the survey

If you are a health and care professional and work with those who have respiratory health conditions we want to hear from you too:

Health and care professionals

All information will be confidential and anonymous in reports.

If you would like help completing this survey or would like to do it over the phone, contact us at 01205 820892 or email info@healthwatchlincolnshire.co.uk

Pharmacy survey

Healthwatch Lincolnshire's latest focus is pharmacy services.



This will support the health and care system to ensure that people's experiences are included in discussions about pharmaceutical services in the county.

By exploring the accessibility and quality of pharmacy services, including the Pharmacy First scheme, we aim to involve more residents in conversations about their health and well-being.

This initiative is part of our continued effort to address health inequalities in Lincolnshire and ensure that everyone's needs are considered.

We are interested in hearing about your experiences with pharmacy services, such as:

- · Obtaining medications
- · Access to pharmaceutical advice
- Experiences with the Pharmacy First scheme
- Quality of care provided

The information you provide is confidential and will be anonymised before sharing. Personal information will never be included in our survey reports.

If you need additional support to complete this survey or would like it in an alternative format, please call 01205 820892 or email **info@healthwatchlincolnshire.co.uk**

Take part in survey

YourVoice@Healthwatch CPP



Healthwatch Lincolnshire YourVoice@Healthwatch Event Community Primary Partnership (CPP) Co-Production Opportunity

Event Date: July 31st, 2024

Location: Rustons Sport and Leisure Club, Lincoln

This is a unique co-production opportunity centered around Community Primary Partnerships (CPP), designed to gather your invaluable insights and shape the future of integrated care in our community.

Why Attend?

The development of Community Primary Partnerships is set to play a pivotal role in delivering integrated care close to home. Lincolnshire Health and Care leaders have agreed on a collaborative approach to inform the development of a CPP model for our region. The new partnership(s) will aim to drive collective action to improve health and care services and build strong relationships with local people and organisations to help us all live as healthily as possible.

Key Focus Areas:

- 1. Valued Community Services: Share which community services you find most valuable and frequently use.
- 2. Our Shared Agreement: We all want the best life for ourselves and those we care for, whatever our age or stage of life. Our Shared Agreement is creating new ways for health, care, people, and communities to work together to share knowledge, build skills and confidence, and grow relationships and support we can draw on to really live our lives. Join us to find out more and ways to get involved and be part of the movement.

What are Community Primary Partnerships (CPP)?

CPPs are envisioned as partnerships between healthcare providers, local organisations, and community members, promoting a preventive approach that goes beyond traditional medical care. Core characteristics include:

- Whole Population Health Management: Offering preventive and curative services, health promotion, and long-term care.
- Integrated, Multi-Disciplinary Workforce: Focusing on a holistic, personalized approach rather than a disease-centric model.
- Making the most of what we already have to keep us healthy: Using and sharing all of our resources to meet the health needs of everyone as efficiently as possible.

healthwatch Lincolnshire

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