

# Intelligence Report

November 2020



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## Introduction

The contents of this report refers to intelligence gained within the month of November 2020.

The intelligence detailed in this report was partially gained through the Healthwatch England's online feedback form. This is a form in which individuals can detail their experience of health and social care in their area, which is then made available to all local Healthwatch's on a monthly basis. These comments are anonymous and therefore have not gone through the same escalation process that comments directed to the East Riding of Yorkshire normally undertake. When submitting their comment using Healthwatch England online feedback form, the individual was asked for their permission to have their response " stored by Healthwatch in accordance with their privacy statement so that they can use it help improve the delivery of health and care services across the country and in the area in which I live". All of the comments in this report come from individuals that have given their permission.

In addition to this, on the 23<sup>rd</sup> of September a Survey Monkey survey entitled 'How Was It For You?' was launched. This survey emphasis the need for a shift away from covid specific feedback on services and aims to gain individuals perspective on any healthcare experience be it positive or negative. This survey can be completed anonymously or can be used to request further assistance from Healthwatch East Riding of Yorkshire, for example to escalate the complaint. As will be later demonstrated in the contact statistics section, this survey gave us two pieces of intelligence in the month of October.

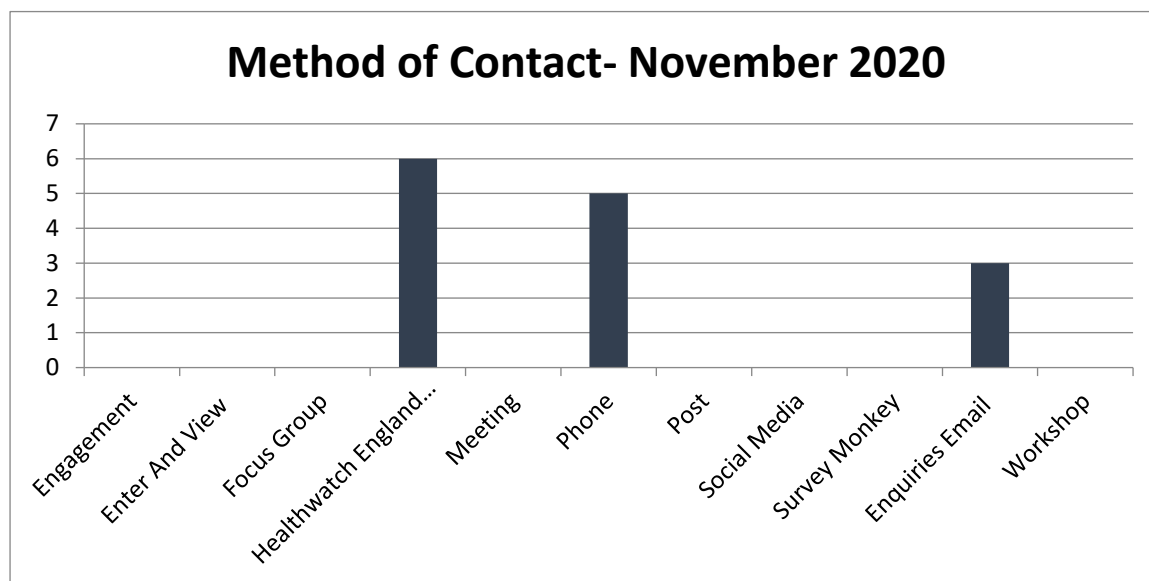
Furthermore, there are some comments that were gained over the telephone, through the enquiries email process, or which were signposted to us.

All data is anonymised and is based solely on the patient experience. For the purpose of this report, we have categorised the patient experience under appropriate headings and included direct quotations relating to the specific service.

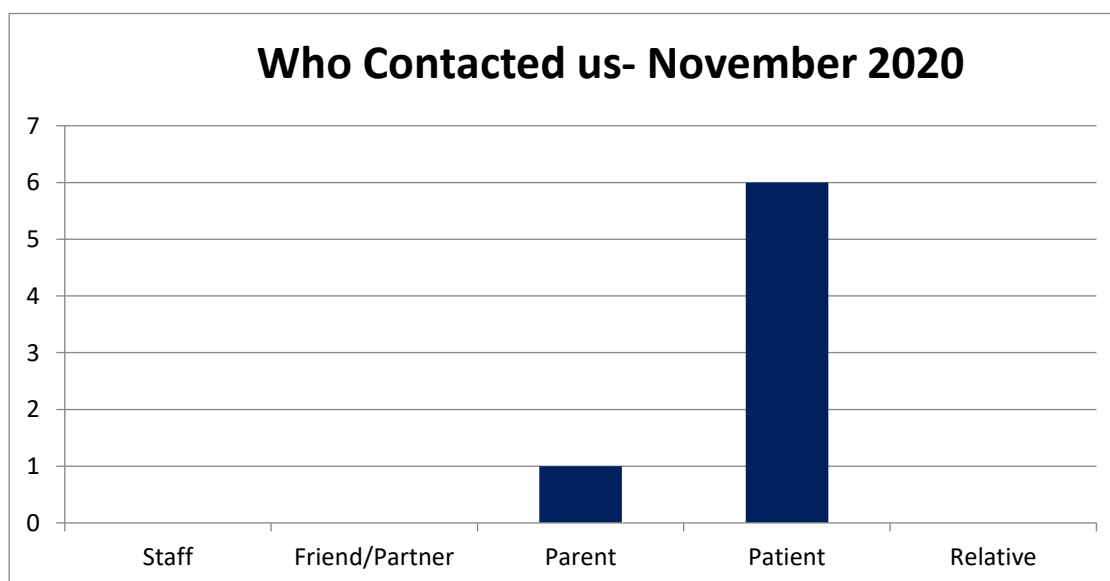
This report shows the sentiment of the comments received on the service, direct quotations to reinforce the sentiment and show real life experiences and concludes by highlighting the reoccurring themes of the intelligence. In addition to this, this report features a summary of the East Riding of Yorkshire NHS Advocacy team Cloverleaf's themes for November 2020, the newly updated Government Shielding data for the East Riding of Yorkshire region, the NHS GP appointment summary data for November and the John's Campaign findings.

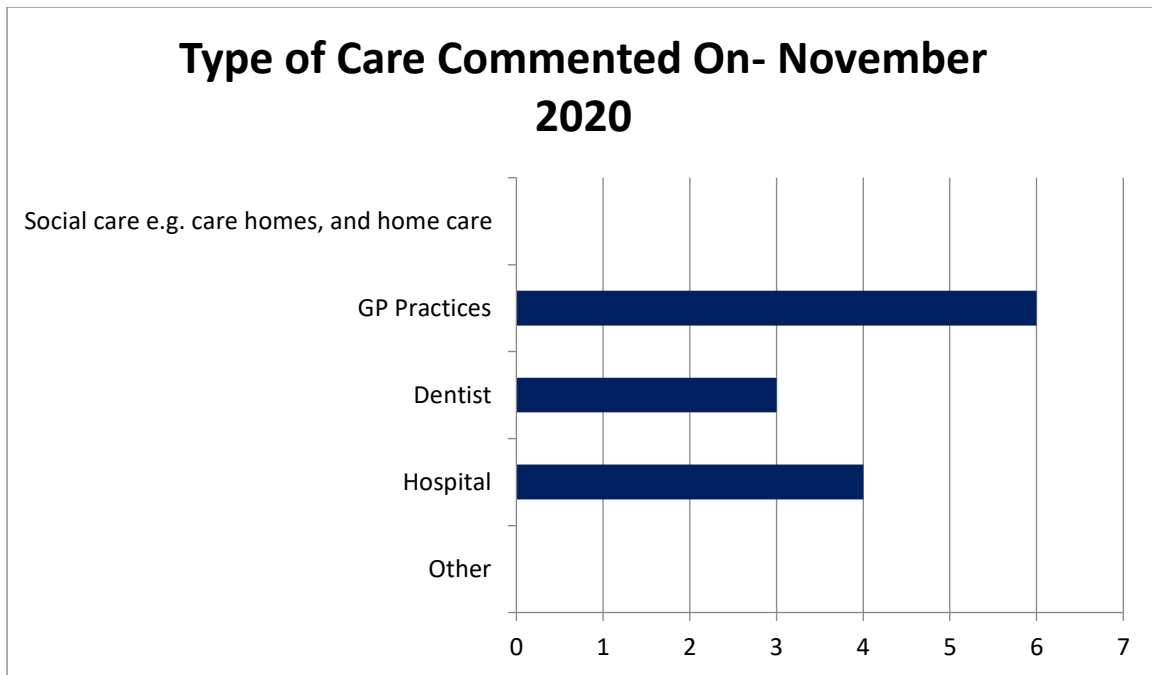
## Contact statistics

In the month of November 2020, we received a total of 16 contacts through various means as shown in the graph below. As the graph presents, the majority of the intelligence was gained through telephone communication. Additionally, much of the intelligence gained was through the Healthwatch England's online feedback form.



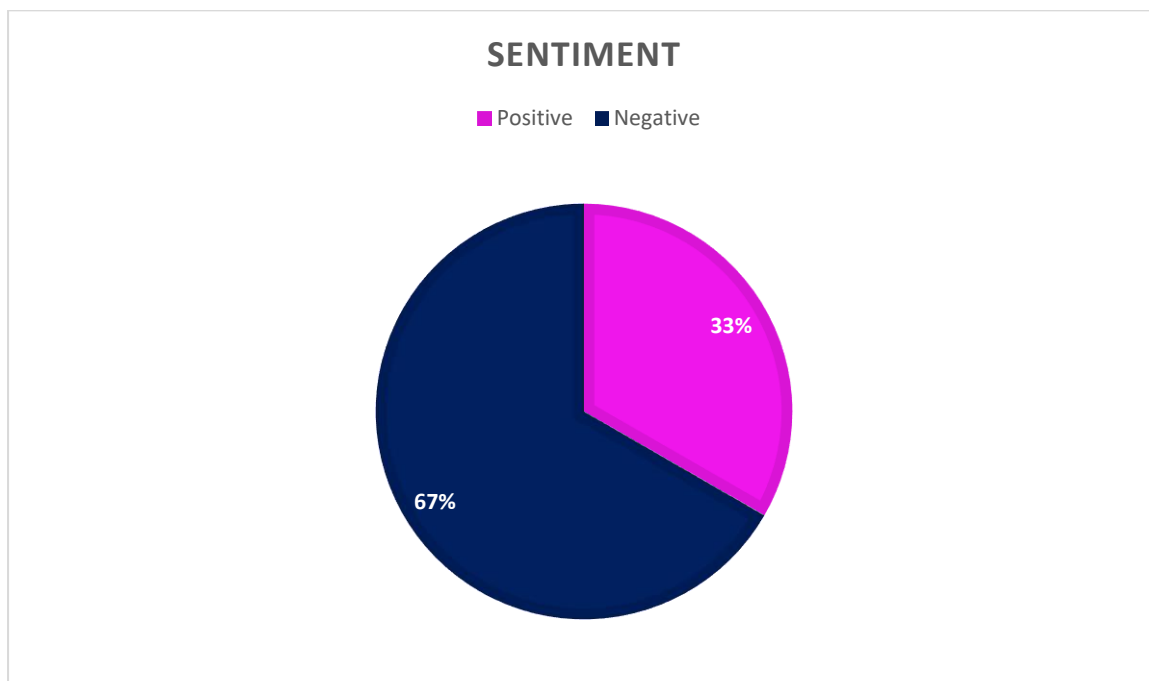
The graph below shows which demographics contacted us most during November 2020. As presented by the graph, the majority of those who contacted us were the patient themselves. However a small amount of comments were gained from a relative of the individual, parent or friend/partner of the individual or a health service staff member.





## Intelligence received

### GP Surgery



### Negative

<u>Reason</u>	<u>Number of comments</u>
Medication issues	2
Unsatisfied with service	2
Appointment issues	1
Staffing issues	1

#### *What people told us:*

" Unhappy about medication change, new medication is administered differently. out of touch with chemist due to how busy they are- aren't answering the phone- phone just rings and rings and tried for a week"

"GP surgery has said that you can only ring 4 days before repeat prescription is due - but Boots in were I collect the tablets say they need more notice"

"Appalling and very difficult service. Very dissatisfied"

"Initial contact awkward , after seeing someone your problem the follow up takes far too long"

## Positive

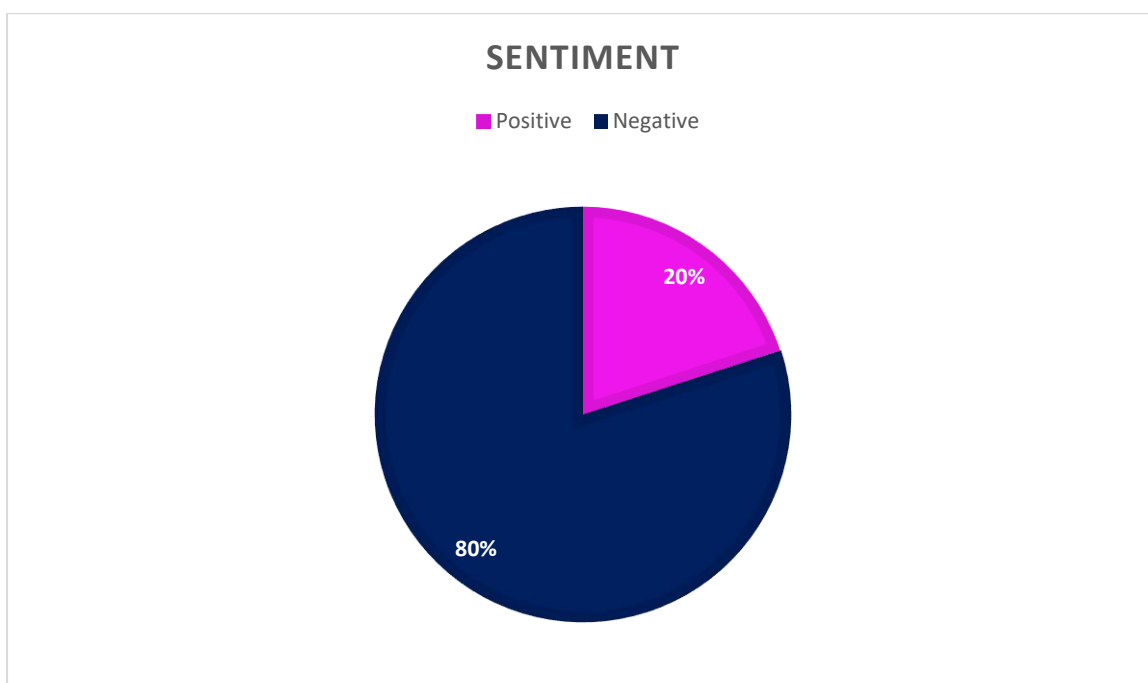
Reason	Number of comments
Good service	2

### *What people told us:*

“Easier to see GP now, very good and very satisfied”

“We order our prescriptions through the doctor and our tablets are delivered to the door within usually two days”

## Hospital



## Negative

Reason	Number of comments
Staffing issues	1

***What people told us:***

" I have an issue which needs a repair and my GP has suggested these kind of routine procedures are on hold because of the Covid situation"

Reason	Number of comments
Good service	1

**Positive*****What people told us:***

"All chemo treatment and appts as usual, had some appts by telephone, all CT scans have been carried out on time. Very satisfied"

**Yorkshire Ambulance service- hospital transport**

<u>Reason</u>	<u>Number of comments</u>
Poor service	1
Staffing issues	1

"When I was transferred from hospital in Leeds to hospital in Hull, I was under the impression that I was going to be on a stretcher with a two man crew. I can transfer safely using a banana board so when one ambulance crew came to collect me from the ward I thought I would be put on a stretcher in the ambulance. I've had my pelvis fused and cannot weight bear for a total of 12 weeks. It wasn't until I arrived at the ambulance that I was told that I would be on my own in the back of the ambulance and one driver. The journey was traumatic and took 2 hours and 10 minutes. I was unable to brace myself every time the ambulance turned or slowed down as I could not use my feet. I had to hang on to anything close by to support myself because of the pain in my pelvis. On arrival onto the ward I was found to have friction burns. On discharge I was assured that I would be stretcher transferred home with a two man crew and that they would have the use of a stair chair to get me up my stairs at my home. When the crew arrived on the ward at 1700 hours they didn't have the chair as they had been informed that I had a stair lift. I do not. The crew consisted of a young lady and an older lady who had a bad wrist and couldn't grip a certain way. I felt my concerns were not listened to. My concerns were proven to be right as halfway up the stairs after much stopping to alter their positions holding the chair they got into difficulty as the lady holding the top of the chair couldn't lift the chair up the last three stairs and the chair started to slide forward. Had it not been for my adult son who is fortunately strong intervening at my cries to help get the chair safely up the stairs I believe that all three of us would have fallen"

## Dentistry

<u>Reason</u>	<u>Number of comments</u>
Lack of local appointments	1
Staffing issues	1
Poor service	1

### *What people told us:*

"I am writing because I have been struggling for about a year to find a local dentist that is accepting new patients in this area. I understand the problems surrounding this in regards to COVID-19 however when we was out of lockdown I was still experiencing this issue. Although my dental situation is not an emergency it is definitely deteriorating and I would like it seen to ASAP"

"Not had a check-up for 12 months and my next appointment is in 10 months"

## Theme breakdown

### GP

- Medication issues- the majority of comments we received referred to difficulty obtaining medication or a change in medication that the patient was struggling to resolve.
- Appointment issues- some intelligence described issues regarding obtaining an appointment or being dissatisfied with the form of appointment given.
- However, as can be seen in the positive comments we received, some individuals praised their GP surgery for giving prompt and excellent care.

### Dentistry

- Lack of local services- some of the intelligence gained on dentistry referred to a lack of services in the individual's local area. It suggests that in some areas there is a high capacity of patients with a lack of available spaces on waiting lists.
- Lack of appointments- many individuals claimed that they were struggling to get to see their dentist unless that it was deemed an emergency appointment or were having their appointments consistently cancelled.

### Hospital

- The comments we received regarding hospital treatment mentioned a cancellation in minor operations due to the COVID-19 pandemic and staffing issues causing poor service

**NHS Complaints Advocacy East Riding of Yorkshire themes-**

**November 2020**

**Client 1**

**Nature and Substance of complaint:**

Client is raising a complaint regarding the care and treatment he received under Cardiology at Castle Hill Hospital. He has had multiple admissions for heart attacks. He underwent an angiogram which took 5 hours – heard nurses talking about blood all over the floor and he was left feeling traumatised by the event. Understands will need ongoing care by the team and wishes to rebuild the trust in the working relationship. At present he is having nightmares and struggling to process what has happened.

**Who delivered the care to patient?**

Hull University Teaching Hospital NHS Trust.

**Date of incident?**

1<sup>st</sup> November 2020

**Client 2**

**Nature & Substance of complaint:**

Client believes that there has been a data protection breach due to a supporting letter to the DWP his support worker had written on his behalf not being emailed to his correct address.

**Who delivered the care to patient?**

Humber Teaching NHS Foundation Trust

**Date of incident?**

2<sup>nd</sup> November 2020

### **Client 3**

#### **Nature & Substance of complaint:**

Client's daughter is Autistic, has a Learning Disability & Dyspraxia. There is currently an ongoing Tribunal with East Riding Council around funding of services and client believes her daughter has PDAS (Pathological Demand Avoidance Syndrome) which is rare and not recognised by East Riding. She has asked for her daughter to be assessed but has received a letter from CTLD based at The Alfred Bean Hospital in Driffield refusing to do it. She wants support to complain.

#### **Who delivered to care to patient?**

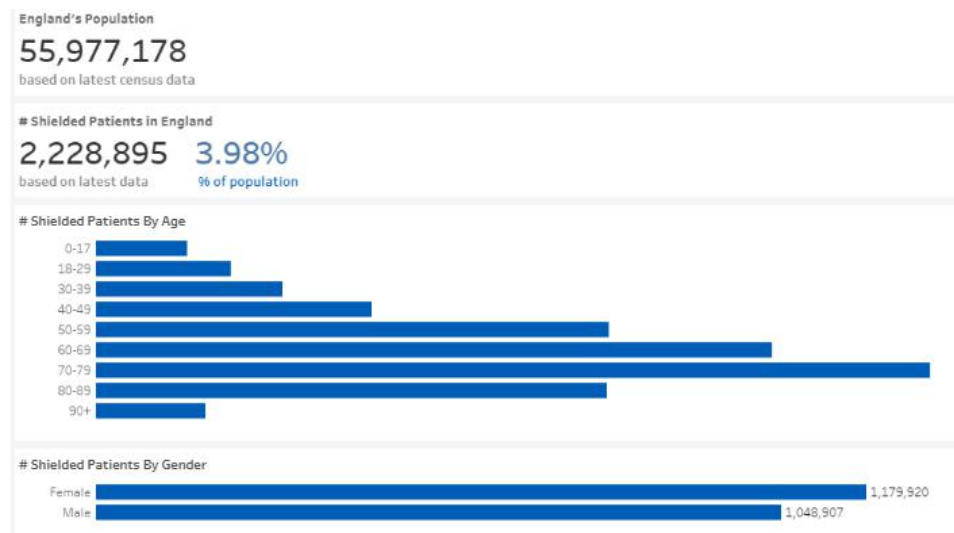
Humber Teaching NHS Foundation Trust

#### **Date of incident:**

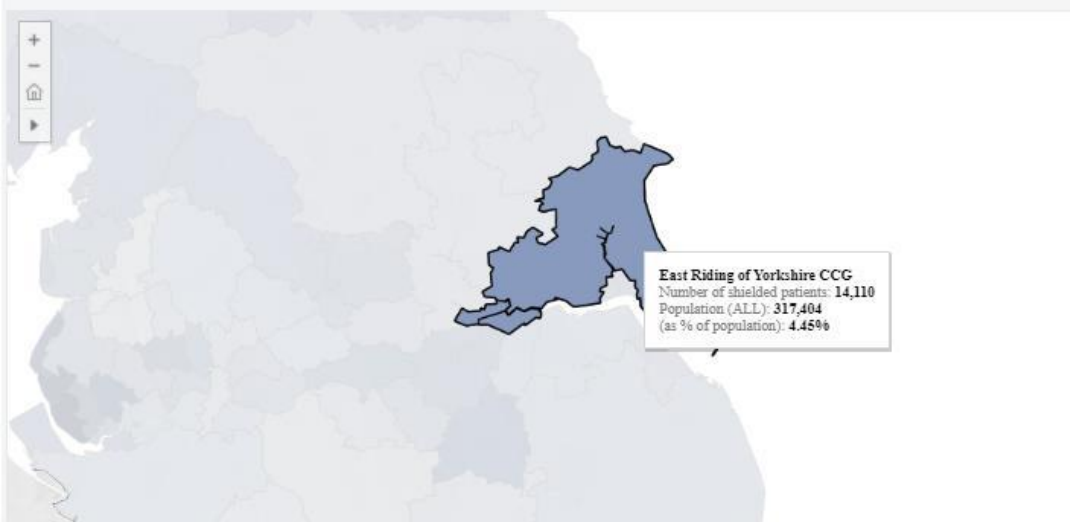
Not yet ascertained.

## Shielding Patients Data

The Government have released an open list of the United Kingdoms shielded patient list. This list can be filtered down into regional areas. Below shows the United Kingdoms shielding data as a whole. Here it can be seen that by the end of November, 3.98% of the population are currently classed as a 'shielding patients'. This is 0.04% less patients than as seen in the October Intelligence report. Looking more specifically at the 'North East and Yorkshire' data which includes the East Riding of Yorkshire, 4.44% of the regional population are currently categorized as 'shielding patients' which is clearly higher than the national rate.



### Density of Shielded Patients



For more info, see: <https://digital.nhs.uk/dashboards/shielded-patient-list-open-data-set#how-recent-this-data-is>

## Appointments in General Practice- November Weekly Data

**Table 1: Summary of appointments, by week, England**

	Week commencing					
	16/11/2020		09/11/2020		02/11/2020	
<b>Total Appointments<sup>1</sup></b>	<b>5,836,769</b>	<b>100.0%</b>	<b>5,884,465</b>	<b>100.0%</b>	<b>5,838,718</b>	<b>100.0%</b>
<b>Appointment Status</b>						
Attended	5,383,359	92.2%	5,420,297	92.1%	5,337,630	91.4%
DNA	230,157	3.9%	235,537	4.0%	257,760	4.4%
Unknown <sup>2</sup>	223,253	3.8%	228,631	3.9%	243,328	4.2%
<b>Healthcare Professional</b>						
GP	2,913,716	49.9%	2,923,869	49.7%	2,856,251	48.9%
Other Practice staff	2,735,543	46.9%	2,770,185	47.1%	2,793,191	47.8%
Unknown	187,510	3.2%	190,411	3.2%	189,276	3.2%
<b>Appointment Mode<sup>3,4</sup></b>						
Face-to-Face <sup>6</sup>	3,233,824	55.4%	3,273,617	55.6%	3,307,604	56.6%
Home Visit	34,717	0.6%	35,338	0.6%	35,003	0.6%
Telephone	2,329,801	39.9%	2,328,667	39.6%	2,255,166	38.6%
Unknown	213,431	3.7%	220,076	3.7%	215,171	3.7%
Video Conference/Online	24,996	0.4%	26,767	0.5%	25,774	0.4%
<b>Time between Booking Date and Appointment Date</b>						
Same Day	2,635,278	45.1%	2,650,659	45.0%	2,561,955	43.9%
1 Day	563,174	9.6%	577,039	9.8%	529,734	9.1%
2 to 7 Days	1,292,950	22.2%	1,271,994	21.6%	1,205,629	20.6%
8 to 14 Days	678,559	11.6%	682,639	11.6%	748,020	12.8%
15 to 21 Days	308,068	5.3%	334,761	5.7%	374,299	6.4%
22 to 28 Days	182,109	3.1%	191,217	3.2%	207,505	3.6%
More than 28 Days	174,056	3.0%	173,808	3.0%	209,389	3.6%
Unknown / Data Issue	2,575	0.0%	2,348	0.0%	2,187	0.0%

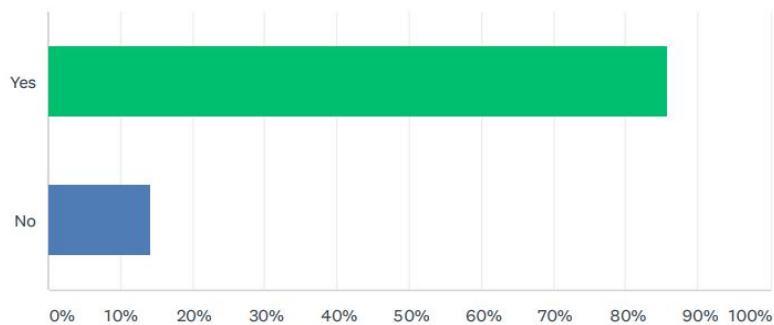
For more info, see: <https://digital.nhs.uk/data-and-information/publications/statistical/appointments-in-general-practice--weekly-mi/current>

### Johns Campaign survey data

Johns Campaign carried out a survey with relatives of care home residents (all age) in the last two weeks of November to get a snapshot of what was happening on the ground. Below is the survey results filtered for the East Riding of Yorkshire region.

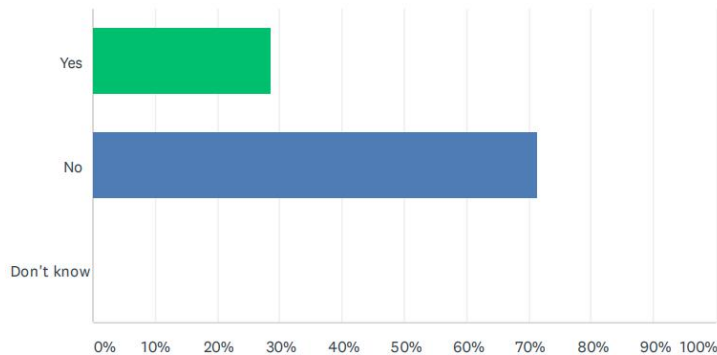
#### Q2 Is it run by a larger care home group?

Answered: 7 Skipped: 0

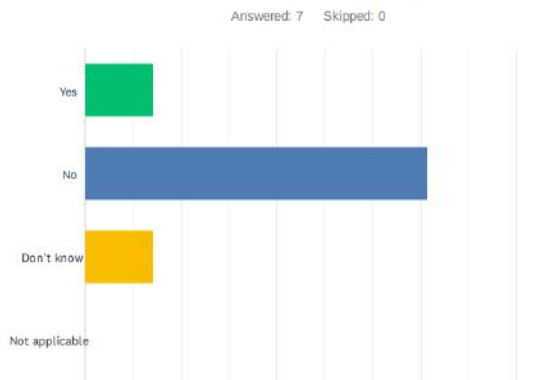


#### Q5 Does the care home have a visiting policy that has been shared with you?

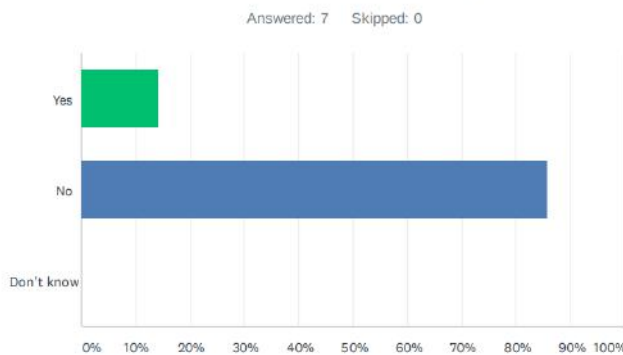
Answered: 7 Skipped: 0



Q6 Does the visiting policy include making individual risk assessments to accommodate people's individual rights and needs?



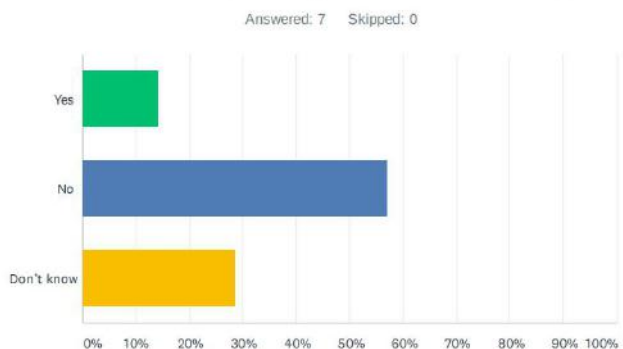
Q7 Have you or another family member had input into an individual risk assessment around visiting?



Q8 If your relative has limited or lacks mental capacity to make decisions around visiting, has a Mental Capacity Act assessment and best interests decision been made that involved a family member, Lasting Power of Attorney or Independent Mental Health Advocate putting forward what they believe to be in the resident's best interests?

Answered: 7 Skipped: 0

Q9 Does the visiting policy include how 'exceptional circumstances' will be considered to allow for changes in visiting? Exceptional circumstances could be anything that means that your relative might require increased visiting and support from you as a family member (eg. end of life, distress, deterioration, moving accommodation etc)



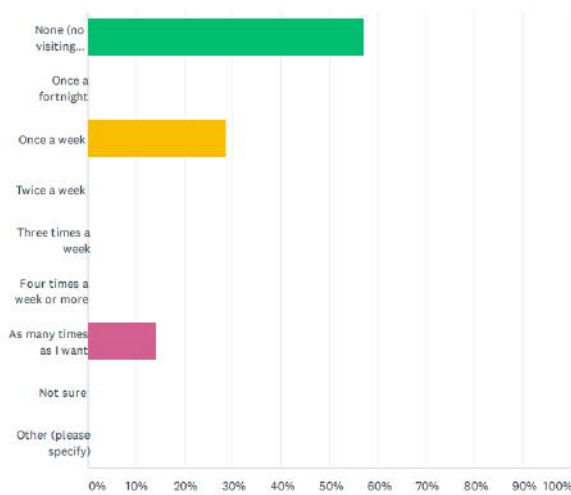
**Q10 What type(s) of visit have been made available to family members since 5th November? (tick as many as apply)**

Answered: 7 Skipped: 0



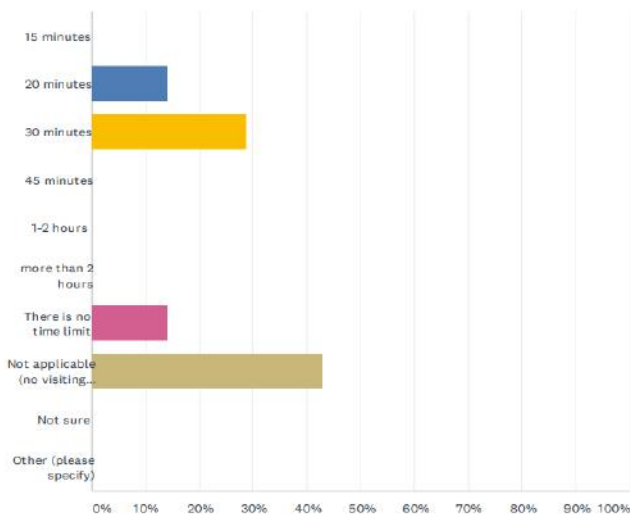
**Q11 How often are family members currently allowed to visit?**

Answered: 7 Skipped: 0



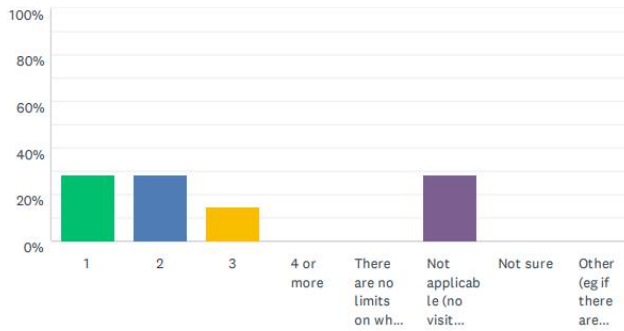
**Q12 How long are people allowed to visit for?**

Answered: 7 Skipped: 0



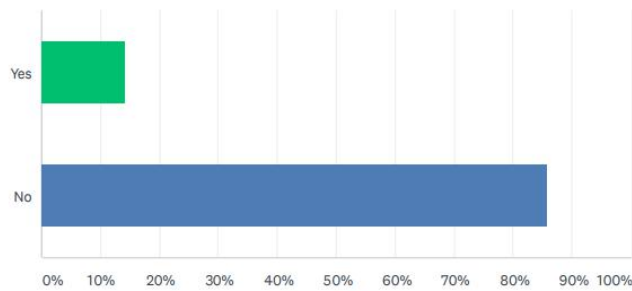
**Q13 How many different people are allowed to visit your relative on an ongoing basis?**

Answered: 7 Skipped: 0



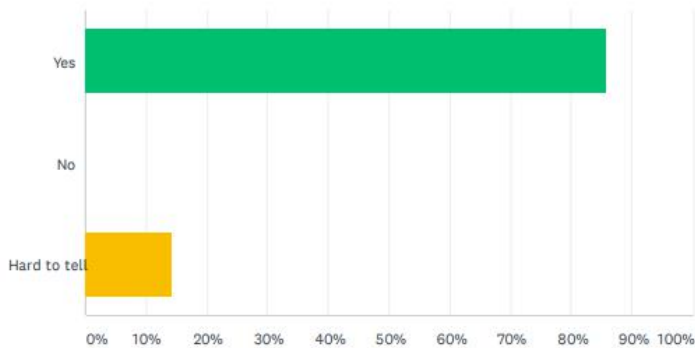
**Q15 Do you consider the visits made available to you since 5th November have met your / your loved one's needs?**

Answered: 7 Skipped: 0



**Q18 Would you say your relative's mental and/or physical health has deteriorated as a result of visiting restrictions were introduced in March?**

Answered: 7 Skipped: 0



**Q19 How have the consequences of care home visiting restrictions impacted your own mental health?**

**PLEASE TELL US MORE ABOUT THIS HERE**

We have to just live with this but it feels as though mum has been abducted. We have been responsible for her care for years and we are shut out. I can't find words to describe the frustration and helplessness. It particularly hits me during the night. I have episodes of insomnia brought on by anxiety and a sense of panic that mum is 'locked away' and I can't do anything about it. She has dementia and I know that she is frightened and might think we have abandoned her.

Worry re decline in Dads mental and emotional health

up against a wall of incomprehensible suffering with no answers or help to be found.

I worry sick about my mam she only went in for rest bite got caught up in lockdown when she went home she didn't settle due to having alzimers the care home has become her safe place xx

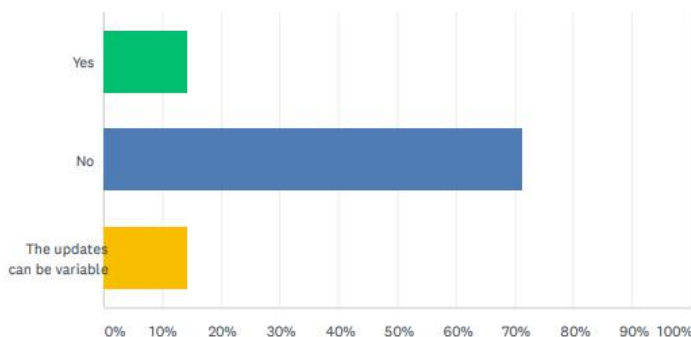
Really miss physical contact and her weekend visits home every 2weeks .

I often can't sleep for worrying about my mum. Trying to communicate with care home managers and trying to move mum to a home that has better visiting arrangements had been very stressful.

Felt very suicidal after being forced to leave hubby

**Q20 Does the care home give you regular updates about your relative's mental and physical health, how they are coping and identify any additional ways they might be better supported?**

Answered: 7 Skipped: 0



**PLEASE TELL US ANYTHING ELSE YOU WISH ABOUT THIS HERE**

Mum was only in the home for one week before lockdown. Initially the home made a great effort with supported calls, letters, photos etc. She then had a fall and had to move to the dementia wing. Since then - absolutely nothing. In a place where you would expect more effort it has actually been less. We were informed over Facebook that residents could have 1 phone call per week. It was such a devastating announcement. We have negotiated more but its hit and miss. We can ask for info but it's pretty basic. We don't even know the names of her carers. It just feels as though we are a bit of a nuisance whe actually as her daughters we are the only people on the world who know who she is..

Not proactive.They respond if I phone or email but often very busy so no time to talk at length.

**Q21 In terms of visiting your relative, which of the following best describes the situation since the government guidance on visiting changed on 5th November?**

This care provider has made it totally clear that they are not letting anyone in - no garden visits. They have a room with a screen but will not use it. We have had the window closed on us half way through a window visit in case we 'touched our relative' which we have Never done. The government guidance always has a caveat that allows homes to choose to do nothing. And that is what our home has done. We totally respect and feel for the carers doing a difficult job. But it gets harder and harder to support the management stance. We are trying to move mum to a home with better visiting policy. Social. Services intervened. They were seriously illinformed about the differences in visiting policy amongst care providers and questioned why we wanted to move. I think they were surprised to find out how unequal things could be. By the time they had given us permission to move mum - we don't have power of attorney - there was Covid in both the existing and new home and we are stuck in this situation for the foreseeable future.

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Initially visits stopped. Back on for 1 week but now ceased due to Covid outbreak.

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Communication which was always poor is now non-existent. There is a hostile atmosphere present.

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since March I have seen my mam about 5times for half a hour it is so wrong mam has ditariated so badly mam was in hospital at one point it took the care home two day s before informing me or my brother its discusting

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Closed window visits were stopped when the home got covid.

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They are in the top covid area

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For more information, please see: <https://johnscampaign.org.uk/>

# Intelligence Report

November 2020



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