

Healthwatch Suffolk Service User Feedback Report: NHS 111 and GP Out of Hours Services in Suffolk

1.0 Introduction

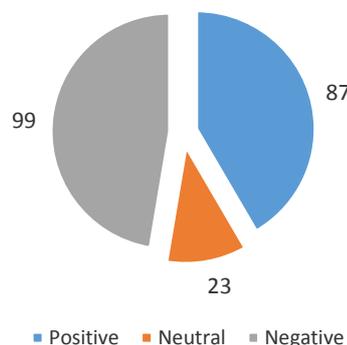
- 1.1 Healthwatch Suffolk has the role to listen to the views of local people as to their experiences and opinions of health and social care services in the county. It makes those views known to providers, commissioners and relevant health and care bodies to influence, shape and improve services now and for the future.
- 1.2 The consumer champion has an established feedback process that is underpinned by a comprehensive information database. It is an essential tool that enables Healthwatch Suffolk to analyse all of the feedback that it receives from people across the county about local health and care services.
- 1.3 The database uses a matrix of over 500 individual codes and nearly 100 topics (e.g. “Booking”, “Staff attitude” or “Environment”) recorded against sentiment (e.g. negative, neutral and positive) to establish trends in the feedback logged.
- 1.4 This report is informed by information extracted from the database and is intended as an outline of the commentary submitted to Healthwatch Suffolk about the NHS 111 service and GP out of hour’s services between 1st April 2013 and 9th April 2014.
- 1.5 It is noteworthy that many people often consider the 111 and GP out of hours services as a single entity. This may impact on how the feedback is reported.

2.0 Overview

- 2.1 A total of 212 comments have been recorded onto the Healthwatch Suffolk database of service user feedback during the above period.
- 2.2 Comments have been recorded from the following sources:
 - Emails submitted to Healthwatch Suffolk
 - Extracted from the ongoing Healthwatch Suffolk East of England Ambulance survey
 - The Healthwatch newsletter comments form
 - Outreach by the Healthwatch Suffolk Community Development Team
 - Healthwatch Suffolk website submissions
 - The NHS Choices website
 - Letters received by the Healthwatch Suffolk office

- Telephone
- At local events
- Quarterly surveys with providers of out of hours services

FIGURE 1: OVERALL COMMENT SENTIMENT



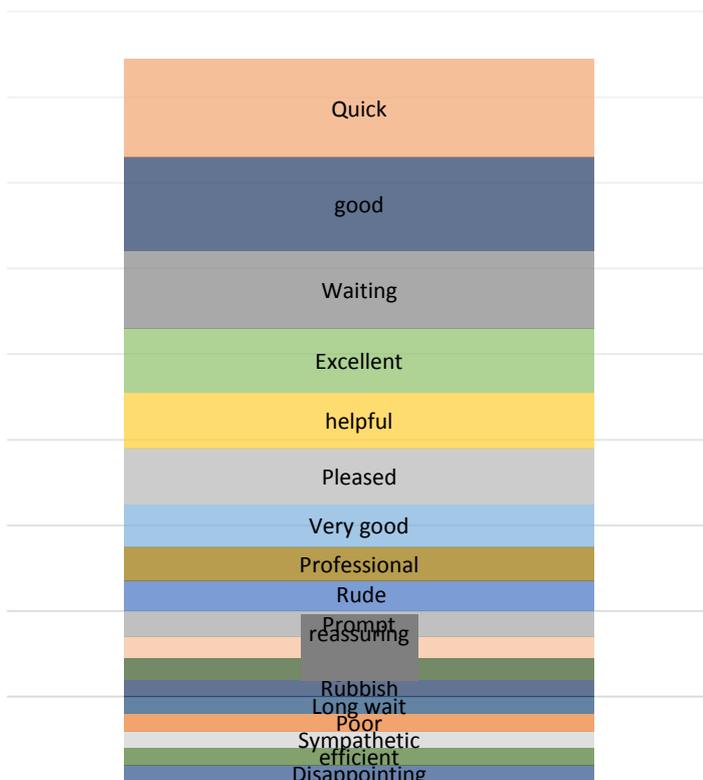
2.3 It is not a requirement for commentators to supply a postcode to Healthwatch Suffolk. Therefore it is not always known if the comments relate to services in Waveney or the rest of Suffolk.

2.4 From data available, it is determined that at least 15 of the comments are provided by people that live in Waveney. These comments could of course be relevant to either Waveney or the rest of Suffolk.

2.5 As Figure 1 shows, there is a relatively even split as to the overall sentiment of the comments with slightly more negative comments received than positive.

2.6 Figure 2 indicates some of the words and phrases that people have used frequently in their commentary.

FIGURE 2: COMMON WORDS AND PHRASES

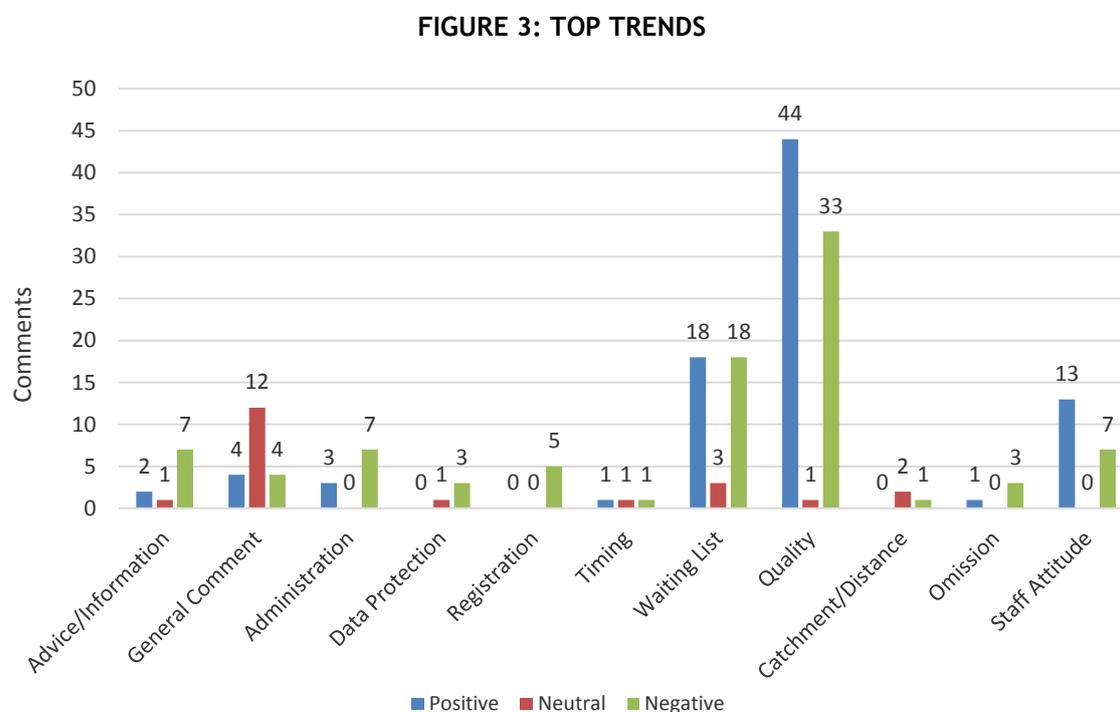


The chart left indicates specific words and phrases that occur frequently within the comments.

Words used most frequently are at the top with a bigger colour block. Those used less frequently are highlighted at the bottom of the tower.

3.0 Trends analysis

3.1 Figure 3 is a graphical representation of the top trends as extracted from our database of service user feedback. Please note that the comments do not amount to 171 because the graph is highlighting only the top trends.



3.2 The graph indicates that there is positive, neutral and negative commentary about the following key themes:

Advice and Information

3.3 The positive comment is reflective of the reassuring nature of the service and the prompt availability of helpful advice.

Example: “It’s reassuring to know that advice can be sought outside normal surgery hours... Advice via 111 is available with little or no delay.”

3.4 There are four negative comments which tend to question the quality of the advice given.

Example: “...I always have to ask for an appointment. Every occasion I have been told to look after my child/self at home and don’t need to see a doctor. On every occasion we have ended up with a prescription. Not sure how accurate or appropriate advice is over the phone. Are these (people) qualified to make these decisions?”

Example: “I found the doctor extremely abrupt to the point of rudeness. She offered no opinion on what may be wrong with the shoulder and no advice re ice, hot packs, exercises or when to see another doctor.”

Data Storage / Recording

- 3.5 Four comments are attributed to this area. They all relate to questions about how personal information may be used by the service and about its security. These comments appear to have been raised by a group of people during a focus group event.

Registration

- 3.6 There are two comments that express an apparent difficulty in getting through to 111. Unfortunately, neither participant has chosen to elaborate further on their comment, making it difficult to assess the reasonableness of their commentary.

Example: “found it difficult to get through to 111”

Waiting

- 3.7 There are 18 positive and 18 negative comments attributed to the theme of waiting.
- 3.8 Positive comments may be correlated with experiencing a quick response from the service.

Example: “I have used it once was very impressed quick response treatment excellent”

Example: “Very good and quick response”

- 3.9 Some commentators have however expressed disappointed as to the length of time that they waited for a call back.

Example: “It is rubbish, waited 4 hours for somebody to call”

- 3.10 There is an emerging theme however that, whilst a proportion of commentators are happy with the prompt response received from call handlers, they tend to express negativity about waiting to see a doctor at a service base.

Example: “The problem at West Suffolk Hospital seemed to be too few doctors there to see everybody at the clinic. Only one doctor on duty who was continually having to prioritise as the number waiting continued to increase all the time. (Waited 2½hrs).”

Example: “I waited over 2hrs to be seen, during which time I was struggling to breathe properly and was feeling nauseous and dizzy. Please don’t think I am blaming the doctors - not their fault. I suppose the system is open to misuse. The only other observation would be that the receptionist just shrugged her shoulders when asked how much longer I might have to wait (not asked in a rude manner)Overall very, very grateful to get seen and get much needed antibiotics.”

- 3.11 There is also negativity expressed about the length of time that call handlers take to ask questions and subsequently take action. One person commented that this form of waiting has led to frustration and a visit to A+E for quicker service.

Example: “My daughter fell through a garden table and she was finding breathing a little hard as it hit her in the chest. 111 took 10 minutes asking me questions, she got --- and I put the phone down and took her to hospital. Why do their questions take so long?”

Example: “By the time they have got through the initial questions, which seem to take an age, you wish you had just got in the car and gone to A&E as usually when it is your child you are calling about that’s what they get you to do.”

Example: “Generally very good, however I’ve had very long waits for clinician ringback. The call-takers are excessively robotic, leading you to have to go round and round in circles until the computer finally understands what you mean...”

Example: “Some of the questions asked on the phone seemed totally irrelevant. I realise it was a scripted check list but note specific questions would have produced more accurate, answers enabling an improved judgement call.”

Quality

- 3.12 Comments attributed to this theme are related to a number of issues. Perhaps the most popular of these are judgments about the appropriateness of decisions to dispatch an emergency ambulance.

Example: “They asked a lot of totally irrelevant questions and insisted on sending an ambulance when I felt it unnecessary”

Example: “Took too long for advice and tried to send an ambulance despite me saying I did not need one and I just wanted advice.”

Example: “Absolute disaster, called for pain relief advice, then told that they were sending an Ambulance. Ambulance crew arrived and gave me the advice I needed, a complete waste of an Emergency Ambulance. When I

called 111 back to complain they said they sent ambulance as they were not medically trained and the one other medical advisor was busy dealing with another pt and they had another 20 patients to speak to before they could speak to me.”

Example: “Complete waste of time, rang for advice & got told an ambulance would be on its way. Told call taker I didn’t want an ambulance & was told it already on its way. Ambulance crew turned up on blue lights, I apologised to crew to explain to which I was told, we know it’s not your fault, they (111) just like to make us drive 30mins on blues to do their work for them as there gp’s don’t want to come out & they have non clinical staff answer the phone that just do as the computer says”

3.13 Other issues identified include:

Diagnosis

Example: “Out of hours service (111) rang for my husband-wrongly diagnosed as sinusitis. Went to a&e and had pressure sores that were infected. Wouldn’t use the service again”

Responsiveness, action and continuity

Example: “A 91 year old lady who had a recent cataract operation woke up blind in that eye. Concerned friend rang 111 - 1st person told her he couldn’t talk to her but would ring the 91 year old and put the phone down. Didn’t in fact call the lady. Another call to 111 was made with no action resulting. A nurse then rang to say she’d lost the details but thought they’d been passed to someone else to call the lady, eventually the concerned friend took the lady to A+E where she was told that she should have brought the lady straight away as she could have lost her sight permanently.”

Example: “They never even rang back, Rubbish”

Example: “I used 111 to request a Doctor to certify a death so that the undertaker could attend to remove the body. I am still waiting for a ring back which was promised by the operator. People have no confidence in 111 as the people manning it are from private companies and are untrained in medical matters.”

Example: “It took many hours and huge perseverance to get help and advice for my mum who has lung cancer. We had to keep calling back to get what was going on and the advice was very patchy at best. We ended up after 4 hours calling an emergency ambulance.”

Staff Attitude

- 3.14 There are both positive and negative comments on the database attributed to this theme.

Example: “I did find my phone call helpful with a very kind voice on the other end...”

Example: “The nurse practitioner who came arrived with a sour face and a very unfriendly attitude; she did not introduce herself, which is why I don’t know her name, and she didn’t even say “hello”. She did not appear to have the information that had been given in great detail over the phone. She made my daughter, mother of xxxx, and me feel very uncomfortable.... we were very distressed that the Nurse Practitioner treated us with such contempt...I feel very strongly that after the positive, helpful 111 response we had to what was a very serious set of circumstances, the Nurse Practitioner in question acted with such disdain; having not said hello on arrival, she completed her rudeness by not even saying goodbye.”

Summary

- 3.15 The purpose of this report is to highlight issues from service user feedback submitted to Healthwatch Suffolk about NHS 111 and GP out of hour’s services since April 2013 to the Suffolk Health Scrutiny Committee.
- 3.16 It is important to note that there is significant positivity expressed about the services and Healthwatch Suffolk would like to encourage continued high standards in the areas identified.
- 3.17 Overall, whilst there is positivity clearly evident within the feedback, there are also individuals that have not received a service that met their expectations. This is indicative of inconsistencies with some patients receiving excellent service and others feeling disappointed.
- 3.18 The committee are asked to note the contents of the report and use it to inform discussions.
- 3.19 Healthwatch Suffolk has an established process for making the views of patients and the public known to providers and commissioners. It is available on our website via the following link:
<http://www.healthwatchesuffolk.co.uk/content/speak-out>
- 3.20 From January 2014, Healthwatch Suffolk has initiated an ongoing dialogue with providers and commissioners of services using reports extracted from the Healthwatch Suffolk database.