

You Told Us

January 2025



**New
engagement
officer Leila!**



You told us...

Based on January 2025 we've analysed the feedback we received to get an overview of the most common themes within health and social care in Westmorland and Furness. By encouraging people to share their experiences, it informs our future focus of engagement as well as highlighting any issues that we may need to escalate directly to the provider.

We also offer information and signposting if people need further support or want to make a complaint.



63 People were signposted to further assistance and help



We engaged with **352** members of the public, patients and charity sector

We reached **346** people through our social media and newsletter



We had the most feedback about...



- Access to services
- Booking appointments
- Communication with patients; treatment explanation; advice

You told us...

- Access to services
- Waiting for appointments or treatment; waiting lists
- Waiting times- punctuality and queuing on arrival
- Administration (records, letters, results)



- Other

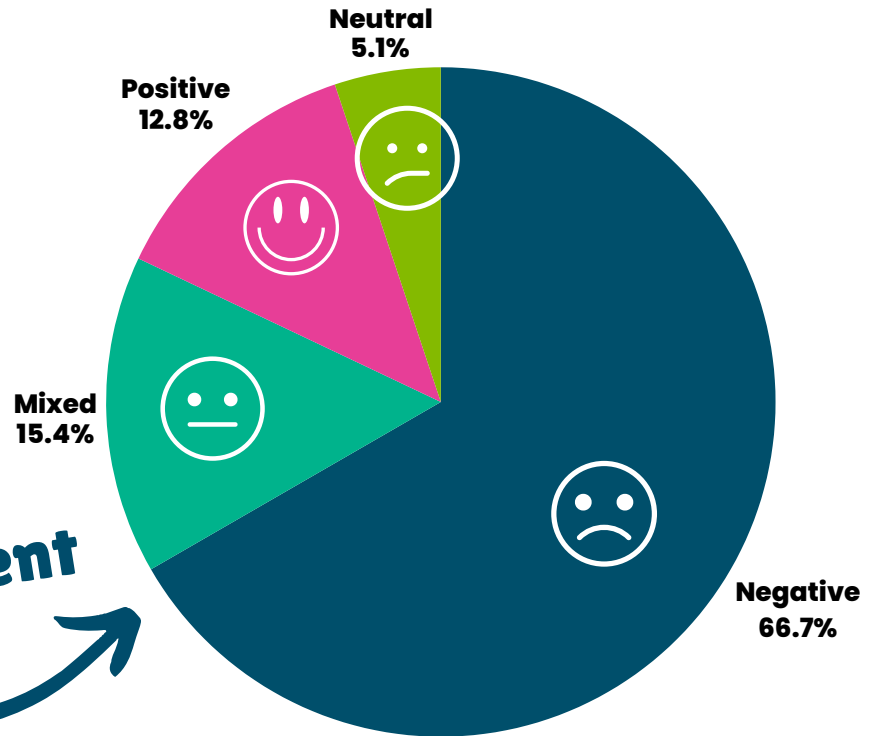


- Service organisation, delivery, change and closure
- Access to services
- Booking appointments

- Accessibility and reasonable adjustments



Feedback sentiment



- Communication with patients; treatment explanation; verbal advice
- Access to services
- Quality of treatment
- Booking appointments
- Administration (records, letters, results)

- Waiting for appointments or treatment; waiting lists.
- Other
- Service delivery, change and closure
- Complaints
- Accessibility and reasonable adjustments



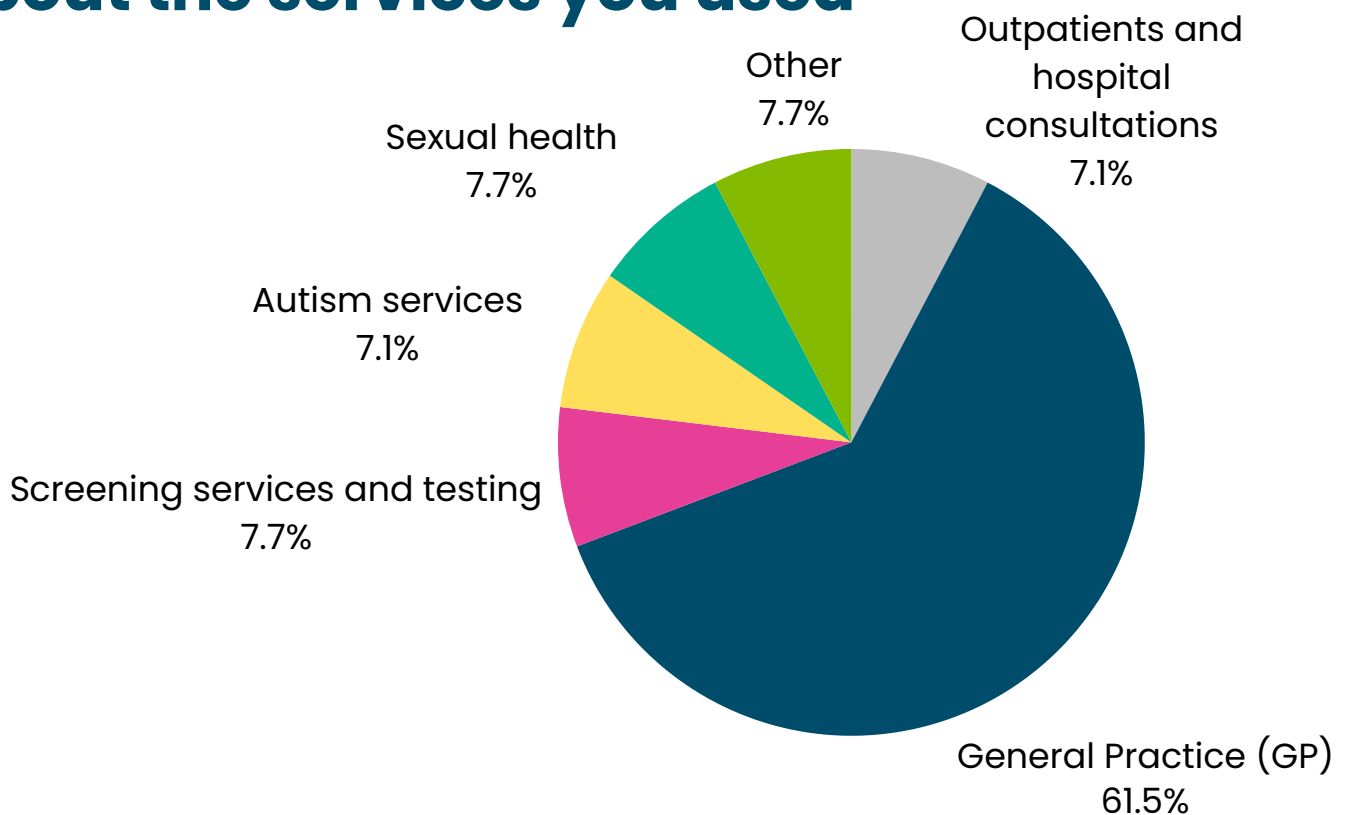
- Medication, prescriptions and dispensing (blank)
- Integration of services and communication between professionals
- Continuity of care and mental health services

Leave a 'review' of your GP, dentist, physio, consultant... on the feedback centre [here](#)



You told us...

About the services you used



Some of your feedback

A patient went to their GP surgery for a flu vaccination, but was given a Covid-19 vaccination by mistake. They didn't want a Covid jab and was extremely annoyed and upset. They put a complaint in against their GP, and has been assigned a different GP in the surgery.



Westmorland General Hospital X-Ray department is really accessible, as it can be visited at any time during their opening hours for routine x-rays.

A parent in South Cumbria described the transition from child to adult autism services as difficult and some services don't exist outside a school setting.



We went to...



Do you want to find out more about us?

Get in touch if you would like one of the team to come and talk to your community or group, or if you would like us to attend an event in your area. Please contact info@healthwatchwestfurn.co.uk

We did...

From Penrith to Barrow, you told our team about health and social care services

We began in **South Lakes** by attending Mid Furness Integrated Care Communities' (ICC) Multi-Disciplinary Team meeting, where community groups and NHS teams collaborate on local health priorities.

In Kendal, Leila, our new Engagement Officer, attended the South Lakes Menopause and Wellbeing Hub's evening Q&A event to discuss our Women's Health project and the stories shared with us.

In Kirkby Stephen, our Enter and View representatives visited Stobars Hall, where they received a warm welcome from staff and residents - read our February newsletter to read all about it!



We also visited **Ambleside** for Grange and Lakes ICC meeting, an opportunity to update signposting information and hear from community groups and NHS teams. Lisa, our Senior Engagement Officer, also attended the launch of **Vision Support Barrow and District's 2025-2028 Strategy**.

Our Lisa and VSBD's Caleb!

In **Kendal** we met Health and Wellbeing Coaches at their drop-in at Kendal Library, where Leila also joined the Knit and Natter Group to hear personal stories about local health services.

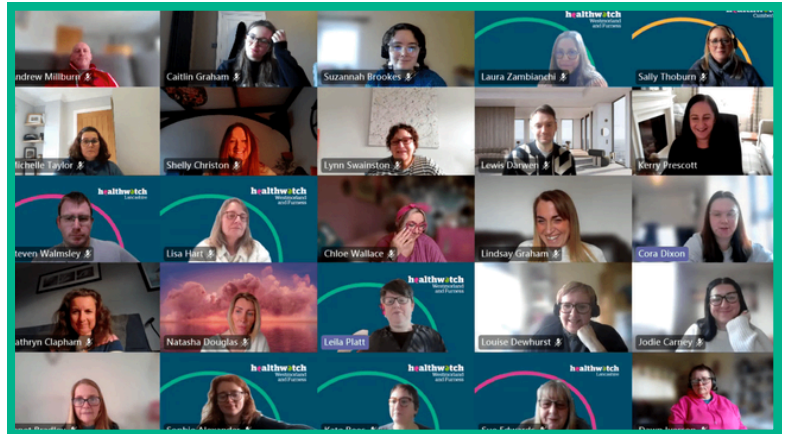


We did...

Healthwatch Development Day 2025

For the first quarterly Healthwatch Development Day of 2025 we were joined by colleagues from Lancashire, Cumberland and Stockton-on-Tees.

Despite Storm Eowyn, which forced us to transition to a virtual event, the day was a great success, with lots of learning and sharing great practise. We focused on reflecting, shaping our strategy, and defining what makes a 'People First Healthwatch'.



Director Lindsay Graham kicked off the event with a heartfelt welcome, particularly to Healthwatch Stockton, the newest addition to the People First community.

With four Healthwatch organisations now under our umbrella and plans for further growth, People First is positioned to set a new standard for Healthwatch operations nationwide.

In an effort to maximise our social value, Healthwatch Westmorland & Furness (HWW&F) donated the sandwiches we had ordered (but couldn't refund due to the change in plans) to [BlueJam Arts](#). This gesture supported attendees, including refugees and asylum seekers, showcasing our ongoing commitment to community welfare.



'People First is ambitious. We thrive on listening to communities, amplifying their voices and influencing meaningful change'

Lindsay Graham, Healthwatch Director



We did...

Enter and View at Stobars Hall

On the 15th of January we carried out an Enter and View visit to Stobars Hall, a residential care home in Kirkby Stephen, where we spoke face-to-face with residents and staff, as well as collecting feedback from relatives.

The report will be available next month. All Enter and View Reports are available to download from our website [here](#).

What is Enter and View?

Under the Health and Social Care Act 2012, we are able to 'Enter and View' local health and social care services. The purpose of an Enter and View visit is to see services in action and collect the views of people who experience them. It is an opportunity for us to use this evidence to make recommendations and inform changes. It is not a Care Quality Commission (CQC) assessment, although we do send them to the CQC.



Lisa and Laura at Stobars Hall

Partnership on equality and inclusion

On 29th January, the engagement team attended the first meeting of Westmorland and Furness Council's Equality, Diversity, and Inclusion (W&F EDI) Partnership of 2025, representing the voices of patients.

The partnership is an opportunity to work collaboratively with the council, third sector organisations and community groups within our authority, united in the aim of creating an equitable and inclusive community for us all.

Personal story

In praise of psychiatric support

(Names have been changed to protect privacy.)

Barry is in his 50s and lives in South Cumbria. He got a diagnosis of schizophrenia aged 18 and has lived with mental health difficulties all his life. He has a history of substance use – alcohol and ecstasy as a young person growing up in the rave era in the 1990s – but now only drinks on special occasions. He says he has depended on psychiatric support for 35 years.

Barry started out by saying that his “access to psychiatric services is exemplary”. He sees his GP and has two weekly depot antipsychotic injections. This helps him “keep at bay” symptoms such as seeing and hearing things that are not there.

He says that his GP practice is always quick to respond. Aside from the psychiatric medication, he takes some pills for his blood pressure. One day he realised he had lost the pills but the surgery were quick to act and he “had a prescription in hand by 5pm the same day”. He describes this as an exemplary service too.

He has had several, what he describes as, “nervous breakdowns” over the years and said the emergency psychiatric support he has received has been excellent, both through the mental health team and crisis team. “And this is all free,” he added, adding that “if I was in America I would not receive half as good care as here in the NHS”, as well as not being able to afford it. He feels very lucky to live in the UK with the the services available to him.



He used to use the services of Jubilee House day service in Barrow, describing it as “getting me through the rough years”. It was a place where he could go for support, companionship, food and shelter. He also said he knows about Mind in Furness and their eco-therapy services, which he described as invaluable.

Personal story continued

As a younger man, he was looked after by his mum, until she died of cancer. He described his situation as precarious at this time, and he could have been made homeless. However, he discovered Brewery Street Supported Housing, which supports people to rediscover their confidence and independence to live on their own. Then, because he was a good tenant in supported housing, he was able to get a good deal through the council and a great flat in the area where he now lives. Barry feels this has contributed a lot to his health and wellbeing.

He continues to live well with schizophrenia, and says he is confident as he knows he has the support there necessary should he be ill again.

- Are you struggling with your mental health? Do you need support and don't know where to turn? There are lots of charities and third sector organisations that can help you in our area. If you would like some support finding the right one please get in touch with us on 0300 373 2820 or email info@healthwatchwestfurn.co.uk.
- If you are in crisis, call Crisis Line free, 24 hours a day, 7 days a week on 0800 953 0110.

The Healthwatch Westmorland and Furness team are available to talk between 9am and 5pm, Monday to Friday. We're here to listen to your views and experiences, and we can help you find the health and care services you are looking for.

There are multiple ways you can share your feedback with us. If you have an inquiry, or want to share your general experiences, you can call the office on 300 373 2820 or email info@healthwatchwestfurn.co.uk.

If you would like to leave feedback about a specific service, such as your GP Practice, care home or hospital the best place to do this is on our independent Feedback Centre at www.healthwatchwestfurn.co.uk



Personal story

Cauda Equina Syndrome

Names have been changed to protect their privacy.

This case study [or personal story] involves a middle-aged person who had a sport-related accident causing lasting neurological damage. Jo (the name is a pseudonym/OR their name has been changed to protect anonymity) suffers from Cauda Equina Syndrome, a serious neurological condition affecting the cauda equina, which is a group of nerves at the end of the spinal cord.

CES occurs when the spinal nerves below the spinal cord become severely compressed. Any delay in the diagnosis of CES can impact recovery and could lead to permanent damage, such as bladder and bowel incontinence or paralysis of the legs [1]. "I had a 7-metre fall, and I hit the ground on my back with my right hand. I snapped my wrist (my ulna and my radius) and when I was laying on the ground I could feel that my back was really quite horribly painful, but I was more concerned about my wrist because it was really obvious that it was a bad break. So I pulled myself up to try and get some relief from my backache, and I could feel my toes, so I thought "I can feel my toes I am OK and I can stand up". I stood up and the back pain didn't get any better, and then I felt quite woozy, so I lay back down again. Everyone crowded around trying to decide what to do, and because I said I could feel my feet, they decided to carry me out up to this dirt road where they could get a land-rover. I was basically supported under each armpit by a variety of people and I was literally hanging off them. In that position my back didn't hurt actually because I was completely stretched out... and my spine wasn't compressed at all."

"Then, Mountain Rescue turned up and they put me on a stretcher, one of those things where you can't move at all, you're trapped... quite unnerving actually... and they gave me some gas and air... I think. I did go quite wobbly for a couple of minutes and I thought I was gonna pass out as the shock kicked in."

Personal story continued

They took me to the end of a dirt road where paramedics turned up to assess me... They gave me morphine, so I was fine then, and they couldn't tell how bad I was, but what they could tell was that I shouldn't be driven on a road in an ambulance because it'd be too bumpy, so they decided I had to have a helicopter, an air-ambulance and I was taken to a Major Trauma Unit[2], into A&E. First of all they did my wrist, they got that straightened out which was a relief. Then, it was so busy they shunted me up to a ward and hmm... I think I had a CAT scan... The next morning I had an MRI scan and then the surgeon had a look at it and said "OK, we need to operate, you've got quite a mess in your spine".

"They put a spinal fixation in... I think from L1 all the way up to... I can't remember... quite a lot of my discs were pinned and then hmm then it was basically recuperation after that. Once I had the operation and I was sort of fixed, they did a few tests on me and realised I have got quite acute nerve damage, so I couldn't pee without a catheter and my bowels were a bit slow, the nerve damaged the bowels. Basically, two or three days after the consultant came round and sort of described to me what was going on. They said "You've got Cauda Equina" and I said "What's that?", and they explained to me that when the nerve is damaged at a certain point, where they spread out at the base of the spine, like a horse's tail, that's when I first heard of it. I asked some questions because I wanted to know what was going on. I get the feeling that, if I had said nothing, probably they would have said nothing to me."

Jo left hospital with an in situ catheter and is taught how to self-catheterize.

"I went to the Spinal Injuries place and they basically took everything out... Two [healthcare workers] taught me how to self-catheterize. It was a bit unnerving the first time round, and they were annoyed it was left on for so long and said I should've gone earlier. I don't know why..."

Personal story continued

So, the nurses showed me what to do and then I was given a bundle of throw-away catheters and that was it. They said "Any problems just get in touch with us". A few days later I couldn't get the catheter in, maybe I was too scared but I had to go back to Spinal Injury and they immediately sorted it out for me and then it has never been a problem."

We asked Jo if they were given any information about Cauda Equina:

"A bit about my back, you know, about loss of flexibility, loss of muscle strength, stuff like that... And the Outpatient Unit arranged for me to get physio because I had problems bending. The physio went through all the exercises which I did religiously and that was it, I was fine. Those exercises were really good. But nothing really about self-catheterising... They went through that verbally with me... No one really mentioned about UTIs. (...) For the bowel I was told to take Loperamide, but took a roundabout route to getting this advice, going privately first and then being referred back to the main NHS."

Jo has mixed opinions about the care they received:

"At the hospital they were brilliant, extremely good. I mean, they were rushed off their feet, with limited resources; but then when they took me to the Post Surgical Unit it was chaos. It was the worse thing for me. I couldn't sleep properly, two nurses who were running a massive ward full of patients with Alzheimer's disease or other forms of dementia., seriously damaged people in terms of injuries and completely understaffed, underfunded... It made me quite ill being there, I should have left... The Outpatient place was fine, they were good. My only take on it in retrospect was that there was no real assistance in helping you understand the bowel side of it because depending on the degree of damage you can have really quite uncontrollable bowels, that you can actually control. As it turned out, a bit of Loperamide and a bit of care in my diet were easy remedies, but no one explained it to me. That wasn't talked about at all. I got all that information via that long route that I found myself."

Personal story continued

Jo feels that more awareness is needed:

“You shouldn’t move people, you keep them on the ground. A lot of sensible people were there that day, who knew that, and I think it’s probably because I felt... I stood up... It was assumed I was OK... I think we need more awareness on spinal injuries. The neck and the waist are the two key ones... It would be good to have more information like a poster with the body, the back showing where all the nerves go and what happens if you cut through. There are different degrees of nerve damage and they are, you know, life-changing things. It would be good to show people the outcomes.”

[1] Source: The Dudley Group NHS Foundation Trust.

[2] The hospital where Jo was taken is not situated in the Westmorland and Furness area.

The Healthwatch Westmorland and Furness team are available to talk between 9am and 5pm, Monday to Friday. We’re here to listen to your views and experiences, and we can help you find the health and care services you are looking for.

There are multiple ways you can share your feedback with us. If you have an inquiry, or want to share your general experiences, you can call the office on 300 373 2820 or email info@healthwatchwestfurn.co.uk.

If you would like to leave feedback about a specific service, such as your GP Practice, care home or hospital the best place to do this is on our independent Feedback Centre at www.healthwatchwestfurn.co.uk

