

# You Told Us

June 2024



# You told us...

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Based on June 2024, 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.



**We engaged with 984 people**  
**370 patients, public and charities**

**We reached 512 people**  
**through our social media**  
**and newsletter**



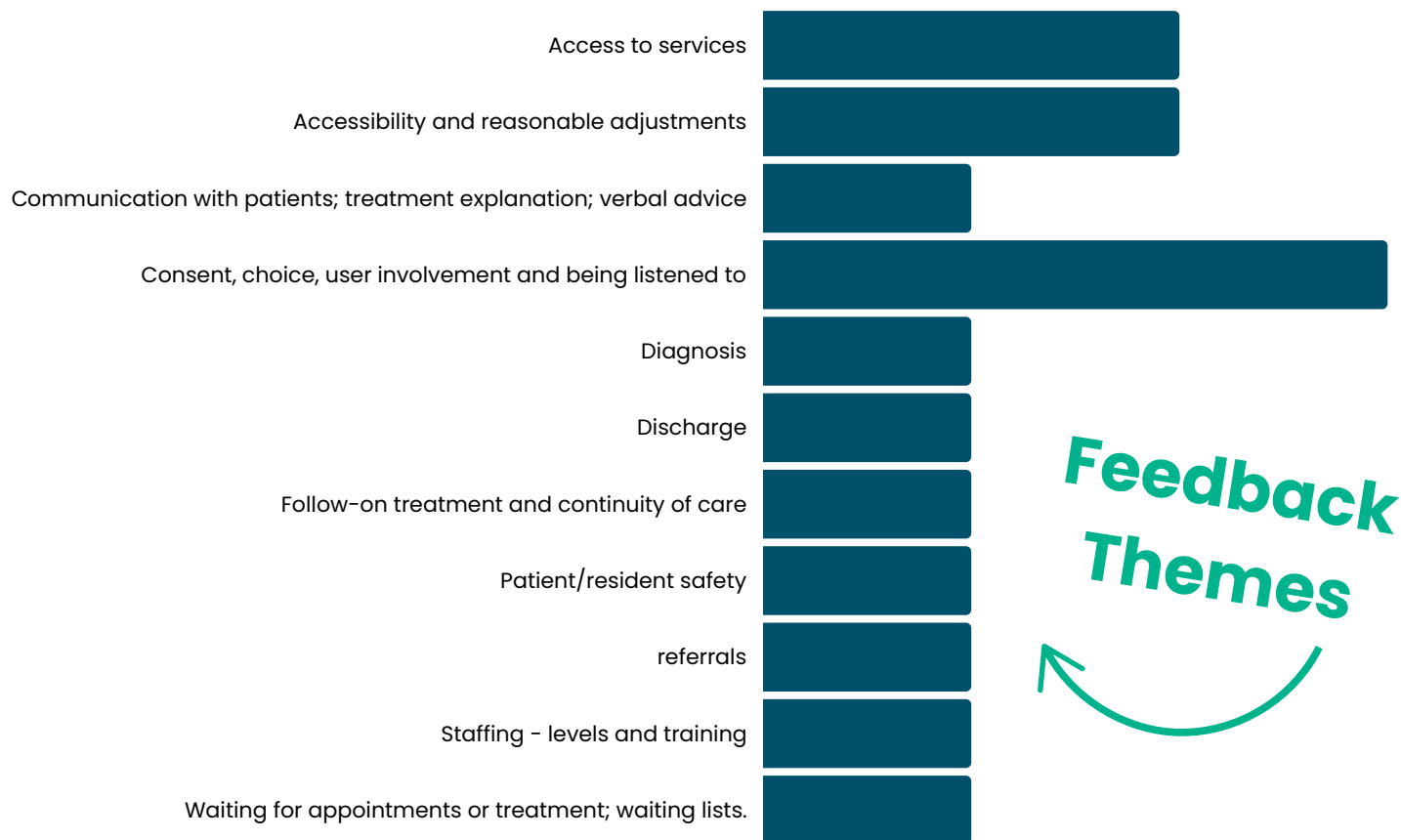
**We received the most feedback about**



1. Consent, choice, user involvement and being listened to
2. Access to services
3. Accessibility and reasonable adjustments

# You told us...

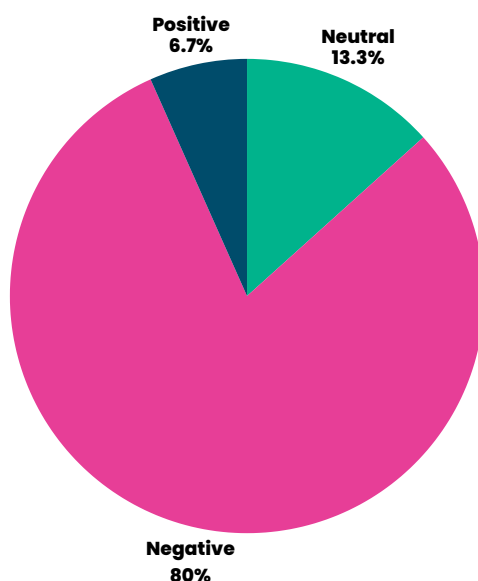
## We also heard about



## Feedback sentiments

Positive feedback was on **Access to services**

Neutral feedback was on **Accessibility and reasonable adjustments**



Negative feedback was on

- **Diagnosis**
- **Follow-on treatment and continuity of care**
- **Waiting lists**
- **Communication**
- **Access to services**
- **Reasonable adjustments**
- **Discharge**
- **Referrals**
- **Staffing**
- **Patient safety**
- **Consent, choice, user involvement**

# You told us...

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## Consent, choice, user involvement and being listened to

A member of the public sent us in to a complaint they wrote to University of Morecambe Bay Hospital Trust (UHMBT) regarding their mother's care at the point of discharge.

Having had a hip operation at Furness General Hospital (FGH) – where care was good – mum was sent to a rehabilitation step-down bed at Westmorland General Hospital (WGH) to continue her recovery.



When mum was ready to be discharged under the 'Home First' scheme (with no mobility but with four calls a day and assessed at home by the occupational therapist) the complex care team pushed for this despite mum's home being unfit for habitation due to building work which meant it had no roof, electricity or water.

The member of the public strongly pushed back, and spoke to the chief executive of UHMBT: "It was incredibly hard work to get it stopped". They said: "The complex care team had extremely poor communication around discharge planning and never once came to see my mum or family in person just phoning. I am articulate and can speak well for myself and family but not everybody can."

The member of the public contacted HWW&F to raise awareness of this issue. They are concerned about this happening to others who aren't able to speak up for themselves and their loved ones.

## Access to services

**A gentleman who finds it difficult to speak on the phone to GPs and 'always misses things out' praised Norwood Medical Centre in Barrow for offering face to face appointments for him whenever he needs to see them. He 'can't fault the service he receives'.**

# We did...

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Some of the ways we shared what patients have told us about their care and experience of services to improve future services

## LSC ICB Transforming Community Care

We were invited to be part of Lancashire and South Cumbria Integrated Care Board's Transforming Community Care event, setting off the day on a 'patient care journey to great community care'.

Along with colleagues and volunteers from Healthwatch Lancashire, Blackburn with Darwen, and Blackpool we spoke up on behalf of patients at the event, which brought together leaders from across the NHS, as well as local authorities and Adult Social Care.



From left, our colleague Sue, of HWL, and Lisa, Kate and Lindsay of HWW&F

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Our presentation brought patient voices to the event, through videos of those with lived experience, quotes from carers, and from our volunteers. We received lots of praise for our presentation, and feedback on how valuable it was to have Healthwatch in the room.

The event, hosted by NHS Impact and LSC ICB aimed to build on existing relationships, strengthen collaboration, and accelerate learning through sharing great practice: to move from 'acute-centric' priorities to a place where community is valued above all.

# We did...

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**229** people

Were signposted to the right place to get further assistance and help

## **We made an Enter and View visit:**

We visited a care home in South Lakes and spoke with **8** residents, **5** relatives and **39** staff. This report will be published shortly.



## **We were out in the community across Barrow, Eden and South Lakes, hearing local people's views of the health and social care, including:**

- HWW&F pop-up at Westmorland General Hospital, Kendal
- Carer Support Furness 30th Anniversary
- Furness Third Sector Health Forum
- Primary Care Network Multi-Disciplinary Team meeting, Ulverston
- East Cumbria Connect the Connectors event with social prescribers (Cumbria CVS Health Partnerships)
- Lancashire and South Cumbria Carers Partnership
- Westmorland and Furness Council Adult Social Care Listening Events, Penrith
- Woman Up! (inclusive women's charity event for North Cumbria)
- Eden Community Health Wellbeing Equity Partnership – Manager Kate Rees is co-Chair
- Cumbria Safeguarding Adults Board – Director Lindsay Graham
- Health Adults Overview and Scrutiny meeting – attended by CEO David Blacklock

# We did...



We published three reports following two announced Enter and View visits to South Lakes Birth Centre at Furness General Hospital, Barrow-in-Furness, and Helme Chase Maternity Unit at Westmorland General, Kendal, and a 'roadshow' to mum and baby groups in South Lakes and Barrow, all in March. The aim of an Enter and View visit is to gather views and experiences of patients, relatives and staff of a service and observe the environment to assess the quality of the service.

This project was commissioned by Lancashire and South Cumbria Maternity and Neonatal Voices Partnership (MNVP) through the Healthwatch Together partnership – Healthwatch Westmorland and Furness, Lancashire, Blackburn with Darwen, and Blackpool – to assess patients' experience of maternity care.

Healthwatch Together delivered a robust engagement project to investigate the experiences of women and families who have used maternity and neonatal services within Lancashire and South Cumbria, and whether they and their loved ones feel they have choice and personalisation in their care.

We produced 31 recommendations, which were sent with our reports to University Hospitals of Morecambe Bay (UHMBT), of which 18 have been actioned. We will continue to work with UHMBT to support them to fulfil the remaining recommendations, and Bay-Wide MNVP. We presented our headline findings to the Women's Health Quality Board in August.

**Read these and other reports at**  
<https://healthwatchwestfurn.co.uk/reports>

The following edited case study is part of the Roadshow report.



# Personal story

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It should be noted that this case study was shared with us via the project's anonymous survey and HWW&F was unable to follow-up with the individual to offer support. The information was sent to UHMBT midwifery team.

*Woman, aged 25-49 years, describing her birth experience at Furness General Hospital.*

"I started with contractions and contacted the birthing centre to be told to wait. I stayed at home and attended my midwife appointment for a sweep later on in the day. I was due to be induced the day after if I didn't go into labour naturally prior to 8.30 in the morning the following day.

Around 3am I began to have intense contractions. This is my second delivery, so I was aware I was in labour. I contacted the birthing unit to be told I was booked in for induction at 8.30am, I should wait until then and get a bath and take paracetamol at home.

After spending two hours in the bath the pain increased. I was told by the same lady that I could possibly not be in labour and contracting for that long as it was my second baby, and that if this was the case I would have given birth by now. After another hour I couldn't wait at home any longer and asked to come in to be told I was allowed to come in at 7.30am. When I arrived at the centre the midwife wouldn't examine me she just placed me on the monitor and said I wasn't contracting.



A different midwife apologised as she wasn't aware I was on the monitor and then examined me to discover I was in labour, and I was 5cms dilated. On examination we discovered the baby was back-to-back which we knew at the 39 week scan. The day shift staff were excellent and I had a student midwife next to me the whole time. Her care was phenomenal. During the day I had urinary retention and had to be intermittently catheterised.

# Personal story continued

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As the day progressed, I didn't deliver. The night staff midwife come in and introduced herself and within the hour I commenced pushing ... After an hour and 10 minutes she said to a student midwife this is going to be a doctor's delivery.

I was then taken to theatre for an instrument delivery, while I was lying in theatre awaiting to deliver the consultant asked what blood group I was and the midwife responded she didn't know as she didn't have time to read my notes, the theatre staff then questioned the consultant in regards to me being a risk of haemorrhaging and he said yes if he cut me.

As the information wasn't available the consultant then commenced the instrument delivery without carrying an episiotomy. The sister midwife was shouting at the consultant as my baby was born asking if it was the chin of the baby she could see appear first to which he said yes seconds after my baby was placed onto myself.



As the consultant was still at the bottom end I thought he was giving me stitches however, he was carrying out a manual evacuation of my placenta. The midwife returned four hours after the delivery and asked why I had fluids running and my catheter at this point was bursting so she just took it out. She said to take a shower at 3am but didn't assess my sensation in my legs and never did at any point.

I asked her to check my observations as I had a high heart rate throughout the labour. She said she was so busy typing everything that's happened that's why she hadn't been back in, I asked her if the blood loss was normal as the bed and my gown were covered in blood. Throughout the day they catheterised me again as they were making a plan in place to which urology wanted to send me for a CT scan which then didn't take place but instead I was to try without the catheter from 6am the next day.

# Personal story continued

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Later on, I had a temperature of 37.8 however nothing was escalated but I did explain I felt incredibly warm. I was given an antibiotic I think around 3am. The catheter was removed at 6am and again urinary incontinence continued therefore I was sent home with a catheter. Despite being discharged I was never given any information on how to manage the catheter. The purpose of a flip flow valve is to retrain the bladder but I didn't know when I needed a wee, so I did not make sense.

On several occasions I was reassured that my stitches would be fine, and it acts as an antiseptic, so I didn't need to worry about infection. I was confused as I didn't know if I had stitches or not and so my husband said no, they didn't do any and clarified me, a senior midwife then said you don't have any stitches do you to which I said no.



When I was discharged back into the community services the community midwives also asked about my stitches to which I had to say I don't have any and they questioned me as to why when I had an instrument delivery.

After a week I went in for the removal of my catheter. I explained I was still incontinent, and I still had no sensation, they were concerned by this however removal was complete and I was sent with information on how to retrain my bladder. I went to my GP to be told I had a prolapse, which is quite serious. I left the appointment upset as this also meant I could not have any further children. I was referred to gynaecology to be told it's scar tissue due to sustaining a tear that was not addressed.

There appears to be lots of lessons to be learned as there is concern about the care I received. I always thought observations after delivery were important and especially after a spinal block. However, no observations on the sensation of my legs were carried out other than the anaesthetist nearly 24 hours after I had it. I have issues with the fact the midwife didn't know my blood group, that the consultant did not assess my tear and leaving it, and that there was no patient education or information on catheter care.

# Get in touch

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**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](mailto: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](http://www.healthwatchwestfurn.co.uk)**