



## Enter and View Report

Billingham Medical Practice, Billingham  
General Practice Visits  
August 2015

## Summary

The following report into localised General Practice services was carried out following an enter and view visit to the Provider.

The work was carried out in direct response to the scheduled enter and view programme of work for Healthwatch Lincolnshire and also in response to the December 2014 report for 'GP missed appointments' along with patient feedback directly into Healthwatch.

The report, as appropriate, identifies areas where Healthwatch believes that a particular challenge to that service is presented, either to the provider or the patient.

Healthwatch is mindful that factors outside the control of the GP Practice can have a significant impact on the perceptions of the people using those services and this is acknowledged where it arises.

### Key Themes.

The report looked at 3 core areas - patient experience, the environment and feedback from staff. As part of this process themes and trends often occur and for Billingham Medical Practice the key themes that we identified were:

- Patient experience was overwhelmingly positive with a high degree of praise for the practice staff.
- The practice will at some point need to consider the impact of future expanding communities on the services being provided.
- Patients appeared to have a lack of understanding about staff functions, specifically the role of the Nurse Practitioner. This is not unique to Billingham but could be a potential area for patient education.

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<b>Place of Visit:</b>	<b>Billingham Medical Practice</b>
<b>Address of Visit:</b>	<b>39 High Street, Billingham, LINCOLN LN4 4AU</b>
<b>Service Provided:</b>	<b>General Practice</b>
<b>Date:</b>	<b>August 2015</b>

## 1. Background

This piece of work has been carried out by Healthwatch Lincolnshire who has a statutory function to enter and view any publically-funded premises providing health and care services. These visits are carried out with the sole intention of collecting information relating to the quality of services provided and gathering the views of patients, relatives and carers of those people accessing and receiving the services.

Healthwatch carried out this work as part of its Operational Plan but also as a direct response to countywide patient feedback and national coverage of the strain and impact being seen across our health and care services.

In addition to carrying out this work, we have a duty to ensure any information gathered is disseminated to the relevant organisations which have a monitoring and commissioning responsibility. We also have a duty to report to the relevant bodies any cause for concern relating to the safety and care of those in receipt of those services.

## 2. Methodology

Healthwatch authorised representatives were appointed to undertake this piece of work. A questioning framework was produced to enable the representatives to effectively talk with patients, relatives, carers and care providing staff and to make observations during the visits. The framework is not exhaustive, but does provide a background for establishing patient experience of their local General Practice.

The focus of this work was to specifically look at what experiences people had of using their local services, to identify what patients thought was good about the service and what they thought could be improved. We also listened to the views and experiences of the professionals working within those environments to gain a better understanding of some of the challenges they face in providing care to their patient population.

In the interest of confidentiality we do remove the names of those making specific comments although generic comments themselves maybe included within the report feedback.

## **The Provider**

The Billingham Practice operates from premises opened in 1992, extended in 2003/04 and re-built in 2007 following an extensive fire. It is a rural Dispensing GP practice and serves the surrounding villages. The practice at the time of the visit had around 4700 patients.

Support is provided to patients by 2 partner doctors and a full team of nursing (Nurse Practitioners, Nurses and Healthcare Assistants) and administration staff as well as a community nursing team. Most of the team members are part-time, creating flexibility for the practice.

The practice runs a number of clinics such as Asthma, Diabetes, COPD, Immunisation, Travel Health, Cervical Smears, Dietary Advice and Stopping Smoking advice.

Asthma and Diabetic review clinics along with other monitoring clinics are also available at the practice.

The practice has a PPG which has 15 active members. The group hold 4 meetings a year and support the patient and practice dialogue.

## **Acknowledgement**

Many thanks to the teams who took time out of their schedule to facilitate the visits but also to listen and contribute to the conversations around the findings and a special thanks to Nick Turner, Practice Manager who helped ensure the visit ran smoothly. In addition, we would like to thank all the patients who provided us with a real life understanding of general practice from a patient perspective.

## **3. Respondents.**

Prior to any conversation being held with a service user, we introduce ourselves and ask permission for any dialogue to continue as we respect that not all service users will want to engage in this way.

During the visit we spoke to as many patients who wished to and had capacity to talk with us. In addition and where appropriate, we spoke with staff to provide a more holistic view.

A total of 30 patients were spoken to during the visit and it is their views and experiences that have contributed to this report.

## **4. Findings from Respondent Experience Survey.**

The following provides an overview of the service from a lay-person's perspective. However, initially it is useful to understand the role of general practice and what it should mean for a patient. The following outlines national guidance and expectations of service provision.

## **The Role of a GP**

A General Practitioner (GP) is your family doctor and is the main point of contact for general healthcare for NHS patients. All UK residents are entitled to the services of an NHS GP.

*What the Care Quality Commission says you should expect when a GP Practice is meeting national standards of quality and safety.*

1. **You can expect to be respected, involved and told what's happening at every stage.**
  - You, or someone acting on your behalf, will be involved in discussions about your care and treatment.
  - You will get support if you need it to help you make decisions and staff will respect your privacy and dignity.
  - Before you receive any treatment you will be asked whether or not you agree to it.
  
2. **You can expect care, treatment and support that meets your needs.**
  - Your personal needs will be assessed to make sure you get safe and appropriate care that supports your rights.
  - You will get the care that you and your GP agree will make a difference to your general health and wellbeing.
  - Your healthcare needs are co-ordinated if you move between care services.
  - Staff respect your cultural background, sex (gender), age, sexuality (whether you are a lesbian, gay, bisexual or heterosexual person), religion or belief, and your disability, if you have one.
  
3. **You can expect to be safe.**
  - You will be cared for in a clean environment where you are protected from infection.
  - Where appropriate, you will get the medicines you need, when you need them, and in a safe way.
  - You will be treated in a safe and accessible place.
  - You will not be harmed by unsafe or unsuitable equipment.
  - Your GP Practice will take appropriate action if they suspect that a patient is at risk of harm.

#### 4. You can expect to be cared for by staff with the right skills to do their jobs properly.

- Your general health and welfare needs will be met by staff who are properly qualified.
- There will always be enough members of staff available to keep you safe and meet your needs.
- You will be looked after by staff who are well managed and have the chance to develop and improve their skills.

#### 5. You can expect your GP Practice to routinely check the quality of its services.

- The GP Practice regularly monitor the quality of its services to make sure you receive the care you need.
- Your personal records will be accurate and kept safe and confidential.
- You, or someone acting on your behalf, can complain and will be listened to. Your complaint will be dealt with properly.

For information relating to specific services that can be accessed at a local general Practice please refer to the provider's website and for further information on additional roles that can be found within a Health Centre please refer to Appendix A.

The same questions were asked of all the patients we spoke to. We understand that patients do not always understand the challenges a Practice faces and as such, we hope that this piece of work will highlight areas where patients and Practice could share specific information to support patient awareness. Likewise, it is accepted that General Practice is also not aware of the challenges patients face and therefore, where there was opportunity, we highlighted to patients the process of engaging with the Practice PPG where it existed and the Practice Manager.

All patient data collected is confidential and whilst we have only produced this report on the findings received on the day, we have also considered any additional feedback that Healthwatch may have received.

If at any point a patient wishes to feed back to Healthwatch on any part of the Practice they are welcome to do so by the contact methods given on the last page of this report.

#### **A Patient Perspective**

The NHS asks patients to consider a number of issues when looking to register with a GP practice, however in some areas the availability of GP practices may be quite restricted, this may be true of country practices as opposed to city practices where there is a greater concentration and greater choice.

*Some of these areas for patient consideration include:*

#### **Location**

Is it accessible for you?

### **Parking**

How easy is it to park and does it provide additional support via disabled spaces?

### **Atmosphere**

What does it feel like when you walk in the Practice?

### **Front Desk Staff**

What is your impression of staff? Are they welcoming and friendly?

### **Opening Times**

Are the practice opening hours or alternative arrangements appropriate for your needs?

### **Appointment Systems**

How does the practice operate its appointment bookings? Is it clear and easy for you to understand, can you book in advance, can you see someone on the day, can you book online?

### **Information**

Does the practice appear to offer a range of information about local services that can support you?

### **Carers' Support**

Does the practice have a clear policy on how they can support carers?

### **Long-term Conditions**

If you or a member of your family has a long-term condition is there additional support such as clinics and GP with special interests?

### **Patient Involvement**

Practices from 1<sup>st</sup> April 2015 are contracted to have patient participation groups. Has the practice got a mechanism for getting patients engaged and involved in the practice?

***We explored some of these areas with patients and the results of the findings are below.***

## **Accessibility of Service**

Billinghay Medical Practice operates the following consultation hours.

Monday	8.40 - 11.40 am and 2.00 - 4.40 pm (or 3.00 - 5.40 pm)
Tuesday	8.40 - 11.40 am and 2.00 - 4.40 pm (or 3.00 - 5.40 pm)
Wednesday	8.40 - 11.40 am and 2.00 - 4.40 pm (or 3.00 - 5.40 pm)
Thursday	8.40 - 11.40 am and 2.00 - 4.40 pm (or 3.00 - 5.40 pm)
Friday	8.40 - 11.40 am and 2.00 - 4.40 pm (or 3.00 - 5.40 pm)

The practice is currently offering an extended hours service every Wednesday evening 6.30 to 7.45 pm. Appointments for the practice are available to book online 7 days in advance. There are also appointments available on the day for urgent need. There is a sit and wait clinic at 12 noon each day to be seen without appointment if other clinics are full.

The practice is supported by the Sleaford Urgent Care Unit providing weekend and bank holiday cover and this has been operational since October 2014.

In general, the overwhelming majority of patients felt that the practice was able to provide an appointment for them when they needed it. One patient told us they felt there was a need for 7-day working and another patient said there needed to be more evening appointments available.

#### **How long are the waiting times in the practice before being seen?**

Once the patient is waiting for a consultation within the practice the waiting time appeared to be minimal with very little concern from patients. Patients told us that if they were kept waiting, it was generally only for around 5 - 10 minutes which was more than satisfactory for them.

#### **Contacting the Practice**

There was a general theme that patients spoken to mostly felt that the barriers faced in contacting the practice depended on what time of day they called. Patients said if you phoned at 8 am for a same day appointment then getting through to the practice could be a real challenge, however, phone calls made later in the day were not perceived to be problematic.

Most patients chose to contact the practice by phone or in person and there was a significant number that chose to book online. The main reasons given for not booking online was that appointments for GPs were not available and patients felt they needed to see a GP rather than nurse or nurse practitioner.

#### **The Practice Contacting the Patient**

Nine of the patients spoken to had received call backs or communication from the practice. In all, patients reported that the service received was good and that they felt it was an effective and caring approach to patient consultation.

#### **Online Services**

The practice does offer an online appointment booking system which is also available for prescriptions. Eleven of the respondents told us that they were registered with the online system, however, the majority said they wouldn't use it because they couldn't access the right appointments with the doctor and that only the nurse and nurse practitioner appointments were available which they felt were appropriate for their need. What wasn't ascertained during these discussions was whether the patient did actually need to see a GP or whether another member of staff would have been as appropriate. Of those remaining patients, a small number said they wouldn't use the service because they didn't have access to a computer or still preferred the telephone call option. Practice Nurse appointments not available online due to the varied nature of appointment types/durations.

## Quality of Care

The following questions have been consolidated. Where patients were happy they were generally happy across all 4 questioning areas and where patients were not 100% happy we have given some of the reasons provided.

- *Do you feel the doctor listens to you regarding your symptoms?*
- *How much does the doctor involve you in decisions about your care, do they explain the options and choices available to you (as appropriate)?*
- *Do you feel able to ask questions?*
- *Do you think there is enough time with your GP when you go to see them?*

100% of the patients spoken to felt that that in every way the GPs and Practice Nurses were fully engaged in the consultation and considered themselves fully involved in the process as a patient. Patients felt able to ask questions and generally felt that they got enough time and didn't feel rushed. Other patients commented that they knew they could book a double appointment if they wished or felt the doctor or nurse just took those few extra minutes where needed. It wasn't clear whether all patients realised they could book a double appointments when there were a number of health conditions to be considered.

### **Patient Experiences of Services other than the GP**

The practice provides a range of specific services and clinics to support patients such as Coronary Heart Disease, Diabetes and Hypertension; vaccinations and minor surgery is also available at the practice.

99% of the people spoken to who accessed the clinics said that they thought the services were very good with excellent and caring nursing staff. One respondent said they felt that the nurses could occasionally rush because they were short staffed.

## Patient Satisfaction

### **Patient Experience of the Reception**

The patients who spoke with us told us that the reception staff were good and that they listened and were caring. Patient experience for all but one respondent was excellent with very many positive statements about all the staff involved in a patient's care.

The Practice Manager told us that the patients seemed happy with reception staff. He felt they were an experienced, tactful and calm team which complimented the whole practice.

### ***Do you feel that the Practice offers the environment you need in terms of cleanliness, parking, and accessibility?***

Patients seemed to appreciate their well-positioned practice, with modern facilities and free car parking.

## Complaints

*Have you ever had a concern about your GP Health Centre and made a complaint? If so, were you happy with the way your GP Health Centre dealt with your complaint?*

*Have you ever wanted to make a complaint about your GP Health Centre but haven't?*

The majority of patients spoken to had not had cause to complain about the service, however of the 4 who had at some point made a complaint, all felt it was dealt with effectively.

The complaints processes and procedures are available from reception, but patients are encouraged to raise issues directly with the staff.

*Does your practice have a patient participation group or are you aware of one?*

The practice has a PPG which has 15 active members. The group hold 4 meetings a year and support the patient and practice dialogue. We asked the patients to what extent they were aware of their Patient Participation Group and what role they played for the patients and the practice. 75% of recipients said they were not aware of any patient group or what they were involved in. Of those that did know about the patient group, the majority weren't aware of what their role was although one patient was interested in getting involved and were signposted appropriately.

Patient Participation Groups vary enormously in their profile and involvement in the patient and practice engagement. Having spoken with members of the PPG they were extremely complimentary and supportive of the practice, however, it would seem there is a further opportunity to raise awareness with the general patient population.

## General Comments made by Patients

Comments made by patients were varied but included a few issues that appeared a number of times, these include:

“We are very fortunate to have a surgery as good as ours”.

“Nice staff, caring and welcoming”.

“Parking can sometimes be a problem”.

“It would be better if we could book GP as well as nurse appointments online”.

## Patients Recommending the Practice

99% of the patients responding said they would recommend the practice and that they were happy with the level of care and service. This overwhelming recommendation of the practice demonstrates a satisfaction between the patients and practice.

## General Overview of Observations and Conclusion Under this Section

Overwhelmingly, the patients at the practice had high levels of praise for the staff and doctors. They felt listened to and involved in their treatment and care and generally felt that they could get to see a doctor when then needed one.

Nevertheless, there were areas for practice development cited by the patients and we would ask the practice to consider the following:

- Development of the PPG could be supported further which could enhance its involvement with patient engagement. Patients spoken with were not aware of the role or existence of the PPG so further development could promote the excellent work the group currently carry out whilst also encouraging additional volunteers to support the core group.
- A significant number of patients commented about the inability to book GP appointments online and although registered would not use the system. Could the practice do more with the PPG and patients to promote the nurses and nurse practitioner and the work they are able to undertake competently?

### **A Discussion with the Practice Staff**

As part of this visit we took the opportunity to talk with the Practice Manager of Billingham Medical Practice. This was a good opportunity to explore some of the challenges and best practices specifically relevant to this service provider and it also provides a balanced approach to the piece of work.

At the time of the visit the practice provided primary care for 4700 patients supported by a full team of GPs, nurse practitioners, nurse and 2 healthcare assistants. The practice will use locums where GPs are on leave, however, they have been increasingly difficult to source over the last 6 months. In general the practice prefers to use nurse practitioners with a doctor on duty daily. The practice dispenses to 99% of practice patients and issues 12,000 prescriptions monthly.

The practice manager felt the presence of a PPG did enhance the surgery. One suggestion put forward by the PPG was to change the 0844 practice telephone number to a local number which is now available.

The practice does not consider there is a problem with patients not attending appointments and there is currently around 3% monthly DNA (do not attend) rate. The majority of those lost appointments are made by patients booking in on the day.

The practice told us the GPs hold 3-monthly safeguarding visits and palliative care meetings are held 3 times a month with Macmillan. Billingham Medical Practice is part of the Sleaford Neighbourhood Team and these teams meet and discuss patients with more complex needs to ensure they receive a joined up package of care across all the agencies. A midwife visits the practice once a week along with the district nursing team who support ulcer care and a diabetic specialist nurse has a monthly clinic which is self-managed by the nurse and the practice refers patients to the clinic.

The practice supports a number of care homes and also carries out home visits as and when necessary. The practice also perform Annual Health Checks for those patients with a learning disability. These health checks are carried out annually.

In terms of complaints, the practice has their own complaints leaflet along with a suggestion box and notices on how to raise a concern. It was felt that most problems could be sorted out quickly and easily if the person raises the issue there and then. For patients who wish to complain formally in writing, the practice aims to acknowledge receipt within 3 working days and to have looked into the matter within 10 working

days. The patient may then receive a formal reply in writing or be invited to meet the practice in an attempt to resolve the issue.

In addition to the very positive attitudes of the staff team it was clear that the NHS and external environment had its part to pay in creating a challenging operational infrastructure. We were told that the increasing amount of paperwork that was required added to staffing pressures and particularly communication between providers created issues as well with one specific example given around hospital referrals. We were told that it takes a lot of time to get a response from hospital secretaries on behalf of patients and the practice is finding it phones more and more on behalf of patients. It was felt that the communication between the hospital, practice and patients could be significantly improved. We were told the practice didn't physically book referral appointments unless it was urgent and patients are encouraged to use 'choose and book' themselves. Patients can choose if they want to book appointments, or the Practice will book on their behalf, especially if they are elderly or would have difficulty self-booking.

Internally, staff appeared to have frequent staff meetings either as a whole practice or within their own departments.

One future challenge for the practice may be the level of housing and development being considered for Billingham and surrounding villages in the future. Whilst this potential expansion might not have immediate impact for the practice, it will be likely that at some point the practice and surrounding practices will have to review service capacity.

## General Overview of Observations and Conclusion Under this Section

The main overarching theme which emanated from the conversations with staff was one of a culture of communication. The staff appeared supportive of each other and the practice generally.

We acknowledge and accept that there are areas which are outside of the practice's remit and control and as such the report will be signposted to other organisations to raise the profile of the challenges being faced in general practice. These areas will specifically cover:

- The concerns related to the level of support and communication being provided between the hospital, practice and patient require some multiagency consideration. Is there an opportunity for the practice to spend time with the hospital secretaries to look at some of their challenges (peer development for both parties)? The practice felt that this was unlikely to ever be feasible due to the large number of hospitals and departments utilised.

## Premises and Site Observations

This section covers issues such as the internal and external aesthetics of a provider including confidentiality, access, cleanliness and information.

The premises currently occupied are a modern new-build property with clear external signage and free parking for patients.

It was noted that the waiting room, although relatively small, was well presented with reasonably comfortable seating, a television screen and information posters. There appeared to be a happy and relaxed feel about the practice with patients and staff interacting confidently in a warm and friendly manner.

Although the reception desk had a high and low level counter it was felt that its close proximity to waiting patients did not provide a confidential area for discussion.

All staff greeted patients directly upon their arrival and doctors came out to collect patients and walk with them to the consultation rooms.

## 5. Final Recommendations.

In our view the following core observations and recommendations need to be considered by the commissioners and providers of care. We recognise that not all the points raised below are in the gift of the practice and therefore the report will be shared with others.

In addition to the points below, Healthwatch Lincolnshire would like to state that it found that Patient Experience feedback and what was observed during the visit to be consistent and that the Practice should commend itself for level of service provided to its patients.

- Consider further promotion of the PPG could be supported further which could enhance its involvement with patient engagement. 75% of patients spoke to during our visit were not aware of the PPG so further development could promote the excellent work they are currently carrying out whilst also encouraging additional volunteers to support the core group.

*Provider Response: We are actively recruiting for the PPG and it is a regular agenda item at each meeting. We publicise on the waiting room display screen, website, noticeboards and through word-of-mouth.*

*During October the PPG have been invited to assist with our charity event. In addition, the PPG have started engaging with patients by sitting in the waiting area and encouraging the patients to use the Friends & Family feedback form. South West Lincolnshire Clinical Commission Group have recently started engagement events with PPGs. We have had a representative at our meetings and PPG members have attended engagement events in Sleaford and Grantham.*

*Notwithstanding the above, the practice is always open to new ideas and will bring the report to the next PPG meeting for further comments and ideas.*

- A significant number of patients commented about the inability to book GP appointments online and although registered would not use the system. Could the practice do more with the PPG and patients to promote the nurses and nurse practitioner and the work they are able to undertake competently.

*Provider Response: The appointment system is under constant review. We offer a range of appointments that include same day, online, return and workflow and pre-bookable. We have found that if more appointments are pre-bookable, the DNA rate increases. However, the practice will continue to monitor the appointment system and, where possible, evolve to meet the expectations of the patients if it does not have a detrimental impact in other ways.*

*Nurse Practitioners have been employed at Billingham Medical Practice for several years. During that time we have asked them to attend PPG meetings to explain their role, had engagement displays to explain what they can do and advertised on our website and waiting room display screen. At a recent meeting we decided to try changing the name to 'Practitioner' in an attempt to reduce the focus on 'Nurse'.*

*The practice does feel that it has worked hard to promote the role, but will continue to find new and innovative ways to get the message to patients. Nurse Practitioners are highly skilled, but we find that patients still prefer to see a GP.*

#### External Points Raised:

- Query as to whether additional training and support between services could be developed, for example the medical secretaries from both the practice and the hospital Trust spending time shadowing their roles.

*Provider Response: This has been discussed with our secretary, but we consider this impractical due to the wide variety of hospitals and departments that referrals are made. It was felt that encouraging good communication between the practice and secondary care was sufficient.*

## Useful Information: Other Key Roles within General Practice

Apart from the GPs at your practice there are also a number of other key staff roles. The following helps to explain some of them:

### Practice Manager

The role and responsibilities of a Practice Manager are varied and are different from practice to practice. Generally, Practice Managers are involved in managing all the business aspects of the practice such as making sure that the right systems are in place to provide a high quality of patient care, human resources, finance, patient safety, premises and equipment and information technology. They support GPs and other medical professionals with delivering patient services and also help to develop extended services to enhance patient care. Practice Managers also enable the promotion of good practice across the local health community and some work across a group of practices. Often receptionists will refer to the Practice Manager or other senior administrative staff if they cannot help you with your enquiry or if you are upset about something and want to raise a concern. The Practice Manager is usually the first port of call for receiving written complaints.

### Practice Nurses and Nurse Practitioner

Practice Nurses are qualified and registered nurses. They can help with health issues such as family planning, healthy living advice, blood pressure checks and dressings. Practice Nurses usually run clinics for long-term health conditions such as Asthma or Diabetes. Nurses can have additional skills and train as Nurse Practitioners. Some nurses can prescribe medication and are called Nurse Independents or Supplementary Practitioners. Other nurses may run minor ailment clinics and most Practice Nurses carry out cervical smears.

### Healthcare Assistants

Healthcare Assistants support Practice Nurses with their daily work and carry out tasks such as phlebotomy (drawing blood), blood pressure measurement and new patient checks. They may act as a chaperone when a patient or doctor requests one.

### Receptionists

Receptionists provide an important link for patients with the practice and are your initial contact point for general enquiries. They can provide basic information on services and results and direct you to the right person depending on your health issue or query. Receptionists make most of the patient appointments with the GPs and nurses. They also perform other important tasks such as issuing repeat prescriptions and dealing with prescription enquiries, dealing with financial claims, dealing with patient records and carrying out searches and practice audits.

### Health Visitor

A Health Visitor is a registered nurse who has received training particularly related to babies, children and pregnant women. Their role is to provide families with children under 5 years old with support and advice around the general aspects of mental, physical and social wellbeing.

**Locum or Sessional Doctors**

A locum or sessional doctor is a fully qualified GP who works at the practice on a temporary basis to cover the regular doctors when they are away from the practice, for example on holiday or on maternity leave.

**GP Registrar or GP Trainee**

A GP Registrar or GP trainee is a qualified doctor who is training to become a GP through a period of working and training in a practice. They will usually have spent at least 2 years working in a hospital before you see them in a practice and are closely supervised by a senior GP or trainer.

Following the report being finalised:

- Healthwatch will publish the report on its website and submit to Healthwatch England in the public interest.

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