

## Stories and responses

## **About this report**

This report lists a selection of stories and responses published on Patient Opinion.

It was created on 21 February 2013.

## Which postings are included?

This report shows stories from Sheffield tagged with dementia

## Frequently asked questions

How do I find the original story online?

If you are viewing the report on a computer, you may be able to click the reference number to the right of the story. This will take you to the story on the Patient Opinion web site. If you are viewing the report on paper, you can find story number X online at: http://www.patientopinion.org.uk/opinions/X

#### Why might a story appear more than once in the list?

Some stories are about more than one service. If so, the story will be listed under each service it is about.

## What do the story counts mean?

To the right of an organisation/service you will see a count. This tells you the number of stories listed in the report about that organisation or service (including any services run by that organisation/service).

## Why might unexpected services appear in my report?

The services listed in the report depend on the stories that are included, and that depends on how you have filtered the report. So, for example, if you have filtered only according to where authors live, you may find they have used services some distance away.

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#### **About Patient Opinion**

Patient Opinion is a not-for-profit social enterprise which enables patients and carers to share the story of their care, and perhaps help health services make changes.

#### For more information, contact us:

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info@patientopinion.org.uk



#### Show/hide responses

This report lists 8 stories

UK	8 stories
Care homes	1 story
SheffCare Limited	1 story
Springwood Care Home	1 story

## Brilliant care, but maybe more staff are needed

21310

glacier107 a relative 02/10/2009

Springwood is brilliant, the staff are very caring and my mother is happy living there for the past year. The food is absolutely top class and smells wonderful. The rooms are spotless and my mother's personal hygiene is also top class. However, I feel that more staff are needed, perhaps one more carer on each day shift on each corridor. Since changing one of the floors into a dementia corridor, the staff seem more stretched and I feel that things have slipped a little, but I think that this is because there are not enough staff.

#### Anita Bland Registered Manager SheffCare Limited

Dear glacier107,

Thank you for such a glowing review of the care your mother has received this past year. First-time visitors to the home have also commented on the 'top class' cleanliness, personal care and 'wonderful' food, as you so nicely put it. These qualities of the home are all down to the hard work of staff (with my insistent push) to keep it all moving forward. There is no limit to the work we could achieve if the staffing ratios were more generous. Likewise, there is always more scope for individuals to 'up their game' and aim towards their personal best. Change can be unsettling, but it also creates opportunities for individuals to shine. The recent change of registration you mentioned has given staff that extra incentive to reach their full potential. The future of the home will be in the hands of those who rise to the challenge and become the care leaders of tomorrow. Insight and comments from relatives such as yourself only serve to make Springwood a better place to live and work, and for that we thank you.

England	7 stories
NHS England	7 stories
NHS Yorkshire and The Humber	7 stories
NHS Sheffield	3 stories

A diagnosis would have helped us cope

17454

EllieJoan a relative 23/02/2009



My mum experienced increasing memory problems over the last year of her life and when I went with her to the GP and suggested that she might be getting dementia, he just said 'I'll be the judge of that.' Mum did not think she had any problems and it was hard to get anyone to take my concerns seriously. She was also becoming increasingly frail and was losing her appetite. We were up at the doctors again later in the year when she developed a protruding left eye. I knew this might be a serious symptom but the GP just told me to continue with the glaucoma eyedrops which the hostipal had in fact discontinued on her previous visit. However, the GP did do a memory test, and agreed to refer her to the Memory Clinic, but they had a 3 month waiting list. Mum did had an appointment at the RHH eye clinic so I hoped that they might be able to get to the bottom of what was wrong with mum. It was a dreadful struggle to get mum up to the clinic; she was weak and not very mobile. The consultant just said that the swelling was positional and to stop the eyedrops again. I was devasted because I was sure mum was very ill. Over the next 2 weeks she continued to deteriorate and when she finally could not get out of bed, I rang again for the GP, but it 2 hours later when the GP had still not arrived that I rang for the ambulance. The paramedic who attended recognised straightaway how ill mum was and she was admitted to NGH. Mum's GP arrived after the paramedic and took me aside and told me bluntly that the problem was a malignancy. At the hospital, Mum was diagnosed with advanced lung cancer and died 9 days later. In all the time we were going to the GP in the last year, no blood tests, no observations, no X rays or investigations were done, so it is a puzzle how the GP was able to tell me on the day she was admitted to the NGH that she had cancer. Now I know that if mum had been diagnosed earlier the outcome would most probably have been the same. But this last year has been hell for mum and me. We were unsupported and I had trouble at work because of the amount of time I increasingly needed to support mum. If mum had been diagnosed, she would have had support and care from the lung cancer nurse specialists, social services, Macmillan Nurses and may have died with dignity and in comfort at home or in a hospice. As it was she died on a busy medical ward with me harassing the staff for analgesia because she looked in pain and uncomfortable for the last few days of her life. I am so angry with the GP who failed us completely.

NHS was excellent 20116

*Nature837 the patient* 23/06/2009

In March I went to A&E Milton Keynes with severe pain at the base of my spine. A rectal growth was diagnosed. I was sent straight to A&E Northern General where tests were taken. I had an operation in May to remove the cyst from between the base of my spine and rectal wall. The second operation was to clean and drain the abscess from the surgical wound. The district nurses changed my dressings daily. I was told the cyst was cancerous but investigation and debate is continuing as to the type of cancer and treatment for it. So the good points were the efficient GPs and the generally swift treatment given. There was good surgical and nursing care in the hospital and at home. I was impressed by the staff's kind treatment of patients with dementia. I felt that the bad points were the hospital admin. For example I was told to go for a pre-op assessment (along with others) but the unit was closed. I received an apology only from the ward sister. From what I saw, there was poor cleanliness too. The toilet on ward was blocked, and I feel there needs to be more toilets. I wasn't given an explanation for the surgical wound infection I got. The parking was terrible and very stressful for patient and visitor. The most frightening bit was the ineffective pain control in both A&E departments. I spent five hours in pain in the Northern General Hospital with morphine having little effect, but an apology was given. Generally the NHS was excellent and I appreciated it.

# My mother has worked hard all her life, and it now feels like she's being treated very unfairly by the NHS

43873

KayJay a relative 09/01/2011

My mother was born in 1930 before the NHS was born. She worked full time from leaving school to retiring at age 60. She started suffering from a rare form of Dementia when she was 70 and has sadly had to be in a Nursing home since 2004. According to the NHS [or should I say the PCT] she does not have a 'Primary Health Need' and has to pay for her Nursing care at £2000 plus each month. She has paid all her National Insurance/Taxes/Council Taxes and was led to believe that should she require Nursing Care at any time in her life then it would be given "free at the point of need" [as per the NHS Act]. In essense I feel that she [and thousands of other elderly patients] have been swindled out of all their assets which they have worked for all their lives. I strongly believe this needs to STOP. In my opinion, it is unfair and discriminates against elderly people with Dementia.

## **Sheffield Teaching Hospitals NHS Foundation Trust**

6 stories

#### **Northern General Hospital**

4 stories



## **Accident and emergency**

1 story

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Gastroenterology 1 story

## Treated with the utmost care by everyone concerned

29014

Rocket745 the patient 16/02/2010

Just before Christmas I had a routine blood test at Totley Medical Centre. On Christmas eve my doctor rang and asked if he could come to see me because I was very anaemic. He examined me and told me that he would fast track an appointment because of the weather, but I was admitted to Northern General Hospital Brearly 6 on the 25th Jan and stayed overnight to have the procedure on the 26th. I was treated with the utmost care by everyone concerned from the doctor at the surgery and everyone at NGH. Five years ago after being monitored regularly for an aortic aneurysm, I was found to have breast cancer and in the following couple of weeks I had a mastectomy in the Hallamshire G2. Again I was treated with the utmost care and 3 months later I was in NGH for the repair of the aortic aneurysm and apart from losing the first couple of days, I was well looked after and cared for by everyone, and al this was due to the NHS who I owe my life to. All this happened whilst I was struggling with my husband who has dementia. he is now in Woodland view nursing home where he is receiving excellent care form the NHS nurses and carers.

Geriatric medicine 1 story

A diagnosis would have helped us cope

17454

EllieJoan a relative 23/02/2009



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#### **Trauma and orthopaedics**

1 story

## Should not have been left so vulnerable

19690

Lost689 a relative 28/05/2009

My mother was admitted to Northern General Hospital following an RTA with a broken tibia, fibula and head injury. The best bits about her experience was that all the staff were very friendly. She was seen to quickly and kept informed of her progress. The CART team were excellent. However, the worst bits were that her pain was not well managed. She was diagnosed with a UTI, which was left untreated. Her bowel problems were not handled correctly, despite advice of family as to which combination of medication was most effective. She was then sent home too early with issues still not addressed. Other patients with dementia were left to shout and bang, and became very distressed without intervention. This was allowed to happen 24/7. Then the discharge liaison did not contact me as requested, hence mum was left home alone, not able to get to the toilet on her own or get a drink. She was also in a great deal of pain. She should not have been left this vulnerable. She was re-admitted four days later, because of bowel issues, leading to a further period in hospital of more than one week. I think that things should change to improve all of these concerns about my mother's care.

## **Royal Hallamshire Hospital**

4 stories

**Breast surgery** 

1 story

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Geriatric medicine 1 story

## Seperate wards are needed for Alzheimer patients

19284

main377 the patient 28/04/2009

I was admitted to the Royal Hallamshire Hospital for pneumonia and bowel stoppage in February. I think that Alzheimer patients should not be on the same ward as other elderly sick patients as they can cause many problems

Hepatology 1 story

## Cleaning left a lot to be desired

20386

Nuts859 the patient 14/07/2009

I attended the Royal Hallamshire for an operation on my liver at the end of March this year. It was the worst stay in the hospital. The night staff on my ward were not very considerate of patients trying to sleep as they were having loud conversations and making noise. I had to keep fetching staff for two old dears with dementia who kept trying to get out of bed because no one was taking any notice of them. Also the three toilets for the ward were cleaned only in the morning; by tea time it could do with cleaning more than once a day. Some of the cleaners idea of cleaning left a lot to be desired. Most of them were very good but the rest seemed to have no idea what they were doing.

Ophthalmology 1 story

## A diagnosis would have helped us cope

17454

EllieJoan a relative 23/02/2009

My mum experienced increasing memory problems over the last year of her life and when I went with her to the GP and suggested that she might be getting dementia, he just said 'I'll be the judge of that.' Mum did not think she had any problems and it was hard to get anyone to take my concerns seriously. She was also becoming increasingly frail and was losing her appetite. We were up at the doctors again later in the year when she developed a protruding left eye. I knew this might be a serious symptom but the GP just told me to continue with the glaucoma eyedrops which the hostipal had in fact discontinued on her previous visit. However, the GP did do a memory test, and agreed to refer her to the Memory Clinic, but they had a 3 month waiting list. Mum did had an appointment at the RHH eye clinic so I hoped that they might be able to get to the bottom of what was wrong with mum. It was a dreadful struggle to get mum up to the clinic; she was weak and not very mobile. The consultant just said that the swelling was positional and to stop the eyedrops again. I was devasted because I was sure mum was very ill. Over the next 2 weeks she continued to deteriorate and when she finally could not get out of bed, I rang again for the GP, but it 2 hours later when the GP had still not arrived that I rang for the ambulance. The paramedic who attended recognised straightaway how ill mum was and she was admitted to NGH. Mum's GP arrived after the paramedic and took me aside and told me bluntly that the problem was a malignancy. At the hospital, Mum was diagnosed with advanced lung cancer and died 9 days later. In all the time we were going to the GP in the last year, no blood tests, no observations, no X rays or investigations were done, so it is a puzzle how the GP was able to tell me on the day she was admitted to the NGH that she had cancer. Now I know that if mum had been diagnosed earlier the outcome would most probably have been the same. But this last year has been hell for mum and me. We were unsupported and I had trouble at work because of the amount of time I increasingly needed to support mum. If mum had been diagnosed, she would have had support and care from the lung cancer nurse specialists, social services, Macmillan Nurses and may have died with dignity and in comfort at home or in a hospice. As it was she died on a busy medical ward with me harassing the staff for analgesia because she looked in pain and uncomfortable for the last few days of her life. I am so angry with the GP who failed us completely.

#### **Yorkshire Ambulance Service NHS Trust**

1 story

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