



Enter and View Report

The Ingham Practice, Lincoln
General Practice Visits
July/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' and also 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 the key themes we identified for The Ingham Practice were:

- Patient experience was overwhelmingly positive with a high degree of praise for the practice staff.
- There was a desire to recruit a permanent GP rather than a locum, however, patients did seem to lack understanding regarding the challenges around this.
- There was limited knowledge of the Patient Participation Group and its role from the patient perspective with opportunity to develop this group and promote the excellent work they currently undertake.
- There appeared to be (from staff feedback) a lack of communication and connection between the Health Visiting teams/Midwives and the Practice.

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Place of Visit:	The Ingham Practice
Address of Visit:	Lincoln Road, Ingham, Lincoln LN1 2XF
Service Provided:	General Practice
Date:	August 2015

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 Lincolnshire 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-authorized representatives were appointed to undertake this piece of work and 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 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.

On this occasion we conducted the visit over 2 separate dates due to operational and practical requirements for both the practice and Healthwatch Lincolnshire and are thankful to both the Practice and the Enter and View Representatives for their flexibility.

The Provider Overview

The Ingham Practice is a rural Dispensing GP practice located in Ingham and serves the surrounding villages, the practice at the time of visit served around 3400 patients.

The practice runs a number of clinics such as asthma and diabetes but in addition also offer other services such as antenatal and postnatal care, minor surgery, childhood vaccinations and well-person check-ups.

The practice has a PPG which is active within the community. The practice also utilises the services of a voluntary car scheme provided locally.

The practice operates open (walk-in) morning surgery as well as bookable appointments in the afternoon.

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. A special thanks to Mai Sultan, 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 18 patients spoken to during the visit, 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?

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 1st 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

Consulting times are Monday to Friday separated into 2 consulting surgeries morning and afternoon with telephone consultation and home visits in between.

Consultation times are listed below with surgery closed on Thursday afternoons.

Monday 08:30 - 09:30 (walk-in) and 16:00 - 17:30

Tuesday 08:30 - 09:30 (walk-in) and 16:00 - 18:50

Wednesday 07:30 - 09:30 (walk-in) and 14:30 - 16:00

Thursday 08:30 - 09:30 (walk-in) Afternoon Closed but with a Dr on call

Friday 08:30 - 09:30 (walk-in) and 16:00 - 17:30

With exception of 3 patients, 2 of whom had been referred from a neighbouring practice, patients overwhelmingly reported that they had no difficulty accessing the practice when they needed it and felt that the use of the walk-in surgery was very useful and supported patients well. One patient said that the practice opening times were not convenient for patients who worked and where it was difficult to get out of work to attend appointments or to sit and wait an 'unknown' length of time. For those patients being referred in from other practices, the general feeling was the facility to share services across practices was effective.

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

All patients spoken to said that waiting times were reasonable. There was reference made to the morning sessions requiring longer waits depending what time patients arrived but most felt that the time was not unreasonable, patients cited anywhere from 10 minutes to 2.5 hours waiting times to see a clinician during morning sessions. However, it was stated that the waiting times had improved since the Nurse Practitioner had been in post.

Contacting the Practice

Thirteen of the patients spoken with said that they had to regularly contact the practice by phone and had no complaints regarding access. One patient told us that it could sometimes be difficult to get through and one patient told us they preferred to come into the practice if they needed an appointment. Patients did not appear to have any major concerns or issues relating to the telephone systems or verbal appointment systems.

The Practice Contacting the Patient

Thirteen of the patients spoken to said that the practice communicated effectively with patients and would call patients back as and when required. Again there were no concerns here with the majority of patients feeling the practice was caring and responsive to its patient's needs. Only one patient felt that the practice could sometimes be over cautious with patients.

Online Services

Only 2 of the patients spoken to were registered to make appointments online but neither of them opted to use the service. All other respondents either didn't know about the online service or were not online or had access to a computer.

In general, the awareness of online facilities was low and although it is referred to on the website as a service offered, if patients aren't visiting the website then they will need to be made aware through other means. In addition patients need to be registered to access either online booking or online prescription services.

The link on the website where patients can get information of online booking and registration is easy to find and clear, however, there may be other opportunities to raise awareness and promote the facility, *after discussion with the practice, a greater use of the PPG in promoting this may be of use and media coverage that might reach those who do not ordinarily access the surgery, considering opportunities like local schools and employers.*

Quality of Care

The following questions have been consolidated, where patients were happy, they were generally happy across all 4 question 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?*

Ten of the patients spoken to felt that that the GP and the patient were fully engaged in every way in the consultation and considered themselves involved in the process. Patients felt able to ask questions and felt that they got enough time, however, the remainder felt that they weren't always listened to and felt they were just a number and didn't get enough time with the doctor. In the vast majority of cases these comments were related to patients seen by a locum doctor rather than the full time partner. Patient experiences between the locum and partner GP were quite stark. Even considering this small sample it would seem to suggest finding the right doctor for this practice would need to have the same ethos as the existing practitioner and surgery in general.

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.

Most of the patients spoken to had attended one or more of the clinics and said they offered a good service and were pleased that they were available locally so that they didn't have to travel. This observation echoed a conversation with the staff where it was felt that the patients were less inclined to travel if they didn't have to.

Patient Satisfaction

Patient Experience of the Reception

All the patients spoken with told us that the reception staff were good. Patients felt reception had a hard job and that their approach to patients was kind, caring and polite. Patients commented on excellent care of staff by name and complemented the cleaning staff member.

We were told the practice staff undertake formal customer care training and undertake regular staff training sessions to improve the running of the practice and patient care. These efforts certainly seem to be echoed by patient opinion.

Do you feel that the practice offers the services you need in terms of cleanliness, parking and accessibility?

Patients seemed to appreciate their well-positioned practice with modern facilities and ample 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. Of the 4 who had made a complaint, all felt it was dealt with effectively.

From April to December 2014 the practice had received 7 complaints, some formal and some verbal. The complaints had no key themes but with 2 of them referring to patient medication issues but all were now resolved.

The practice said that they did not receive many complaints but when they did they collectively used them as a learning tool. We were told that each complaint was dealt with on its own merits and whilst it was acknowledged that they couldn't meet everyone's expectations they did strive to achieve the best outcome for all.

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?

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.

Patient Participation Groups vary enormously in their profile and involvement in patient and practice engagement. Having spoken with members of the PPG they were extremely complimentary and supportive of the practice. It was explained that there were currently 9 members of the group who were fundamental in developing patient activities such as Christmas parties, the Tuesday Lunch Club and patient surveys. All these activities support the community, the practice and its patients.

However, it was stated that they were constrained by the demographic of the PPG and the need to strengthen the identity of the group. Whilst they do get casual feedback from patients they are not proactively engaged in gathering patient views on a regular basis. The practice said that they did not want to overburden the PPG and it is easy to see why but it appears there is scope and a desire from the group members spoken to to develop in areas of collecting patient views, providing information and attracting additional members to support their function. ***Having spoken further to the practice they felt there was additional work that could be undertaken by the PPG and looked for some additional support in developing it, in terms of attracting new members, the practice said it worked hard to advertise the PPG and held meetings which would support family commitments.***

General Comments made by Patients

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

- Staff are very good at communicating with patients.
- Very fortunate to have an excellent Dr, it would be great if we could get another permanent GP rather than locums which we never get to know.
- The facilities and cleanliness are excellent.

- Our service is fine although it can sometimes take a while to see a doctor.

Patients Recommending the Practice

All 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 that generally they could get to see a doctor when then needed one.

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

- Development of the PPG could be supported further which may enhance its involvement with patient engagement. Patients spoken were not aware of the role or existence 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.
- Patients have a high opinion of the Partner doctor and expect the same from locum doctors. It would appear that whilst generally happy there was a clear distinction made by those patients spoken regarding their relationships with the full time doctor any visiting GP. Patients do not appear aware of the challenges faced in recruitment and the practice may consider some method of talking to patients about some of the challenges of recruitment and this will reinforce the current messages around patients not attending appointments. This could potentially be tasked to the PPG.

A Discussion with the Practice Staff

As part of this visit we took the opportunity to talk with the Practice Manager of Ingham 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.

Ingham Practice at the time of visit served around 3,400 patients with an approximate 50:50 split between male and female and a relatively equitable split across the age ranges.

Staffing has been a challenge particularly recruiting in GPs. This challenge we know is not unique to Ingham Practice and is a national problem. The practice has one full-time GP partner and at the time of the visit, were recruiting for another, a locum and at least 2 clinicians are available every day.

Ingham practice run a number of clinics such as Asthma and Diabetes but in addition also offer other services such as antenatal and postnatal care, minor surgery, childhood vaccinations and well-person check-ups. The minor surgery suite offers level 2 care providing such services as vasectomy with a full range available on the website and hope in the future to offer carpal tunnel surgery. The minor surgery suite currently offers 15 hours per week to its patients.

The practice has recently recruited a Nurse Practitioner to add to its team of one full-time GP, 3 Practice Nurses, 2 Health Care Assistants and a large front of house and administrative team.

In terms of appointments and whilst the practice tries to be flexible and meet as many patient needs as possible, it is accepted that the appointment system will work well for most but not for some of the population. Walk-in morning surgery appointments are available as well as bookable appointments in the afternoon. What has been shown, is the greatest number of patients not attending an appointment (DNA) is where it has been booked on-line. Patient DNAs are advertised on the website and patients are contacted after 2 occurrences, the practice told us that they do appear to be declining at the present time. At the end of the surgery doctors make call backs to patients.

On Thursday afternoons where the practice is closed there is always a doctor on call.

The Ingham Practice already provides online access to order repeat prescriptions. In March 2015 the Practice set up a facility for patients to book GP appointments and view their summary record online.

Home visits are provided as necessary and can also be provided for the administration of flu jabs. The practice also routinely calls all patients over the age of 75 years either quarterly or 6-monthly for a generic check.

We were also told that the practice has included 15 minute nurse appointments which cover such activities as DRUMS (Dispensing Review of the Use of Medicine) rather than the pharmacy carrying out the review. DRUMS are an opportunity for dispensers in Dispensing Doctor practices to review the patients in a similar way to the community pharmacist. They are an opportunity to check the patients' understanding of their medicines and their ability to obtain and use them. The practice dispenses medication to almost 99% of our patients

The website and practice are clear that the booking of GP and Advanced Nurse Practitioner appointments will be monitored for suitability as these appointments should not be booked for non-urgent queries that could be dealt with over the phone or by another professional within the practice.

The practice has a Primary Care Navigator (PCN) which works from the GP surgery offering one-to-one time limited information and care-coordination to older patients and their carers. This can be in the surgery, by telephone or in the person's home. Support will be provided to those patients with complex physical and/or mental health needs who need support for non-clinical matters. Each PCN will support patients to 'navigate' their way round health, social and third sector care.

Staff training and development comes in various ways including face-to-face and online training. The Practice Manager told us that they believed strongly in supporting and developing their staff and involved them fully in practice discussions.

We were told that waiting lists for Orthopaedic, Rheumatology, and Nephrologist (kidney specialist) referrals are currently problematic.

We also heard that there was no continuity from the health visitor team and that services could be fragmented. It was felt that the health visitors and midwives didn't interact with the practice teams, whereas the District Nurses although not based at the practice, do communicate effectively.

We were told that although there are a good deal of recognised positives around how the practice operates it still has its challenges, particularly in the area of staff recruitment. Uncertainty over NHS pressures and challenges and also the need for the federated 6 practices to function effectively together with their clinical services.

General Overview of Observations and Conclusion Under this Section

The main overarching theme which emanated from the conversations with staff was one of communication. The team seemed keen to hear patient views and experiences and learn from that feedback. They are keen on developing their staff and clearly hold that investment in the team with a high level of priority.

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 relating to Orthopaedic, Rheumatology and Nephrologist (kidney specialist) services.
- The lack of continuity from the health visitor team and that services could be fragmented. Also the belief that the health visitors and midwives didn't interact with the practice teams which would improve communication and patient care.

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 ample parking for patients and staff.

Inside there is a large waiting room from which consulting rooms, surgery and pharmacy can be accessed. The waiting area looks clear and airy with plenty of light and space for waiting patients.

The reception desk appeared to offer opportunity to maintain confidentiality although we were told if patients wanted to talk in private there was facility to do that.

The minor surgery area was comfortable in terms of waiting area and functional.

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 the points raised below are not always 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 the level of service provided to its patients.

- Consider and support for the patient group to evolve and provide the practice with a more structured process for collating patient feedback. *Having spoken further to the practice after the visit they felt there was additional work that could be undertaken by the PPG and looked for some additional support in developing it, in terms of attracting new members, the practice said it worked hard to advertise the PPG and held meetings which would support family commitments.*
- Patient online booking system did not inspire those we spoke to and we appreciate that online booking isn't for everyone but there could be a promotional role for PPG members to support patients with this. *Post visit discussion with the practice, a greater use of the PPG in promoting this may be of use and media coverage that might reach those who do not ordinarily access the surgery, considering opportunities like local schools and employers.*

External Points Raised:

- Practice points related to Health Visitors and Midwives.
- The concerns relating to referral time for Orthopaedic, Rheumatology and Nephrologist (kidney specialist) services.

Useful Information: Other Key Roles within General Practice

Apart from the GPs at your practice there 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 of 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 five 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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