NHS crisis tracker

- 38 nhscrisistracker.org/constituencies/574
- Personal experiences from Vauxhall
- Only in local health centres for simplest quick treatments e.g. Ear stringing!
- Every time I have managed to reach a health professional the treatment is excellent but it seems to take a long and complicated time to get there if your problem isn't urgent.
- I am a doctor. I had worked in the NHS for many years until I retired in 2009. I was aware more funding was needed.
- Yes, my GP surgery seems under constant pressure. I have complex health care but never see the same doctor twice so no-one has a decent overview of my condition. This is not how it was until about three years ago.
- Not personal one. I worked as a social worker until January 2016 and I saw every day how the lack of fundin impacted in people life's
- Yes: still waiting for a consultant appointment after four months despite long-term illness.
- I am of retirement age (baby boom era)+ cared for my mother for 3and1/2 years at home till she died. It was10 years ago. I'm very fearful I will receive same quality of care she did
- Yes, crowded waiting rooms presumably because of not enough specialists
- I have some itchy moles on my torso. I have not been able to have them removed because they are not malignant. 20yrs ago I had a similar one removed by a GP who did minor procedures of this sort. Apparently this is no longer funded.
- Very bad experience. Orthopedics team are made to work a conveyor belt system where there is little to zero interaction with the surgical team prior to an operation, and junior doctors are being used to filter concerns between all patients. As a result, communication in my personal experience broken down, and I now have a part of my body missing when I strictly stated that I did not want anything removed if they could not repair it. This happened in a foundation trust hospital. I would be happy to speak to someone about this only after I have gone through the formal complaints procedure, and to await the outcome and then speak to a lawyer. I will not compromise a case.
- The staff are fantastic but we're too thin on the ground to provide a safe service. Patients are discharged too soon into unsafe environments. There's not enough beds, district nlurses, community support, GP's or ambulances
- Might be funding but that is just a one line response. Too few GPs. And they take time to deliver so time and money and removal of depressing targets and blame -- politicians blaming the professionals.
- Yes long waits to see a physiotherapist.
- It took about 4 hospitalisations each lasting a week before i could get an operation to remove my gallbladder it was inconvinient for my final year of my degree, the excuse the surgeons gave everytime were ridiculous
- They are all over worked and yet still manage to look after the people
- Hip replacement . Excellent surgery however no physio follow up, this potentially leading to negating the excellent surgery.
- Observed crowded A&E department.
- yes, time between appointments is far too long

- Needs more beds and staff. I have had excellent care for over 50 years of chronic illness and receive top
 class specialist consultancy and drugs. But without intensive social care at home and more hospital beds my
 future is bleak.
- It's bad and requires the government to give more money asap
- Yes ... getting all relevant tests done, including MRI is incredibly costly but this did not deter the doctors I've
 seen over the years, even though these are difficult decisions to make given how strapped for cash the NHS
 is. Anyone who has attended hospital appointments can see that staffing levels are not ideal ... I'm in awe and
 admiration of our doctors and nurses, all NHS staff who do a fabulous job under increasingly difficult
 circumstances.
- Bad Only the wait of 3 weeks to get a doctor's appointment. Good being seen within minutes at a drop in surgery in Biggleswade when a blood vessel burst in my eye.
- I attend Liver Oncology at Kings College every 4 weeks and the clinic has got busier and busier over the last 2 or 3 years. Waiting times vary enormously but on the whole I am very pleased with them. The staff are excellent.
- Hospital beds are always in short supply and that is unacceptable.
- The waiting times are to long because they don't have the staff to cope with the amount of people attending the hospitals.
- Waiting times surely confirm shortage of resources, although this is easily achieved by comparing our healthcare spend to countries at a similar stage of 'development' [!?]
- Extremely long waiting times to see a specialist doctor in a hospital
- Yes A bad experience. A 6 hour overnight wait to see a doctor for a 2 minute examination in Whipps Cross Hospital once
- Good but always needs funding for extra staff
- Not for me, but about 6 -7 years ago with my mother, a woman in her 90's not St Thomas's or Guys.
- Yes. The breast care ward at Guy's is populated by brilliant doctors and nurses who are desperately over worked and have to deal with chaotic admin procedures.
- Inefficiency of admin staff and technology. Ended up calling to cancel an earlier appointment due to sickness and was instructed to call back in an hour to talk to a nurse about arranging a phone consultation for the appointment time instead. Ended up making two calls total call duration of an hour on hold. Answering phones is a basic thing, but it's not happening. Why instruct me to call back, when it's a pointless exercise? When I did eventually get through, the system was down so I was assured I would be called back. This didn't happen. Very poor follow-up aftwerwards and due to admin errors an endoscopy slot ended up being wasted as the appointment wasn't cancelled, despite us being unable to attend the pre-op appointment. Staff are either over-stretched or poorly organised.
- Ex partners mental health support has been significantly degraded by the conservatives underfunding the NHS
- The staffing issue would be fixed with more funding.

- I have been fortunate with my health issues, and living in London, appointments and treatment have been exemplary. However, I am also aware that this isn't the case for many other people. There needs to be more doctors and nurses trained. The idea that nurses will have to pay for their training should be cancelled. My partner needed dialysis a few years ago, and many of the dedicated staff had to work long hours, with long commutes because housing is unaffordable in London for many on NHS wages. This situation is likely to get worse. There needs to be a seachange in thinking holistically about societie's needs. This means better funding of the NHS, with an increase in taxation to fund it, before privatisation rears its ugly head still further. Re: making a GP appointment- this has become much more difficult, and subsequently appears to be putting additional unnecessary pressure on A and E.
- Yes. Old people who need medical care have to enter via A& E when the GP has already diagnosed their problems. This happened to my father. The whole A&E waiting area for trolleys was full of elderly people, all of whom could have been put straight in a bed after diagnosis from their GP rather than having to enter hospital via A & E
- Yes, my mother needs 6 monthly epidurals to control her pain caused by arthritus in her spine, she can have one on the NHS and after that the funding has been cut.
- Yes, waiting lists for non urgent surgery has increased so much more.
- slow waiting-time for set appointment

NHS crisis in SE1

18%



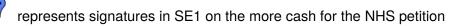
of patients in your area wait more than four hours to be seen in A&E. The official government target is a maximum of **5%**.

£934m

is the funding gap for the NHS in your area.

These are figures for the NHS in South East London. Click here to find out more about the data.

Each



To protect anonymity, we randomly assign locations in the constituency for each signature. No real locations are shown.

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