

Ref: FOI/GS/ID 6860

**Please reply to:**  
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02 November 2021

### Freedom of Information Act 2000

I am writing in response to your request for information made under the Freedom of Information Act 2000 in relation to Cancer complaints.

*You asked:*

- 1) *How many PALS enquiries and official complaints your Trust has received from patients concerned about*
  - a) *the impact of the coronavirus pandemic and your Trust's response on their or their family member's access to cancer treatment*
  - b) *and access to cancer testing - including tests to find out whether their or their family member's cancer has spread, returned or occurred for the first time*
- 2) *For the five most recent PALS enquiries/official complaints received, please provide me with*
  - a) *a summary of the complaint (e.g. a patient with stage 4 lung and breast cancer has contacted PALS to complain about their chemotherapy being postponed for a month)*
  - b) *the exact wording of the complaint, with redactions to remove potentially identifying information*
  - c) *what action the Trust took in response*

Trust response:

1. (total for a) and b) )

PALS enquiries: 3

Complaints: 2

2.

Summary	Exact wording	Outcome
Patient referred to Stroke Consultant in October. Appt booked for 05/01 that was cancelled and rescheduled for	N/A – enquiry made by telephone	Patient was signposted to Medway Hospital as she was under their care (not MTW).

<p>last Friday and never rang her. She left a message with his department and never got back. Went through to the Consultant and emailed the department and discharged her. She is waiting for an appt to remove breast cancer but needs to have an assessment with Stoke Unit before she receives Anaesthetic. Feeling really stressed about the situation and wants help.</p>		
<p>Patient is awaiting surgery due to cancer of the prostate but has experienced a delay in securing a date due to the COVID-19 pandemic.</p>	<p>I'd really appreciate some advice please. I was diagnosed with prostate cancer before Christmas and initially told I'd most likely have my operation in January. Of course the second COVID wave hit and I completely understood that I would need to wait. I live in Tunbridge Wells, Kent but was due to be operated on at Eastbourne in East Sussex as that is where my consultant does his operations. I waited patiently, not wanting to trouble anyone and expecting to hear that I was moving up the list. I recently followed up with my nurse as I had heard nothing about potential timings. She told me that Eastbourne was not operating on any patients out of area until it had cleared its own backlog. I hadn't realised that I was out of area and felt a little frustrated that no one had told me that I had been on a waiting list but not moving forward for the last few months. I have now opted to go onto Medway hospital's list as well. I realise that a prostatectomy is not considered the most urgent treatment for many patients and my consultant has told me that statistically I have a 99% chance of not dying as a result of a 6 month delay. Good odds I realise but still concerning given that in normal times I would now, most likely, be well on the road to post-operative recovery. I understand that many hospitals have continued operating on prostate cancer and that in many parts of the country I would not have had to wait as long as I am. I have no</p>	<p>Clinical Nurse Specialist was asked to contact patient. Surgery was undertaken within the month.</p>

	<p>hint of a date yet - just a statement that my consultant would be disappointed if it took more than 3 months. Reading between the lines, my best guess is that my operation may well not be till June which will be 6 months since diagnosis. It is now 4 months since diagnosis and I have no hint of a date for my operation. I am starting to feel concerned and a little let down by my local health service. I would appreciate any support or advice that you can give me on how I can help to make sure that I am not forgotten and that my operation happens as soon as possible.</p>	
<p>Would like to speak to someone about delays to her Cancer treatment and with receiving CT result</p>	<p>N/A – enquiry raised by telephone</p>	<p>On call back to enquirer, patient confirmed they had received their results and did not require any further assistance.</p>
<p>Concerns raised that diagnosis of inoperable cancer was incorrect as MRI scan was not undertaken. MRI at another hospital advised that cancer was operable and surgery undertaken. Concern that there was a delay in commencing chemotherapy.</p>	<p>In about July last year my son started to develop some painful stomach issues. The local Dr looked at everything, diverticulitis, IBS, inflammation etc. In the meantime he was experiencing ever increasing levels of pain. Eventually in Feb his wife took him in desperation to the Pembury A and E where he was immediately diagnosed with advanced Bowels and Stomach cancer. A scan was done and he was informed by the consultant, Mr Surgeon, that the Cancer was inoperable and incurable and X would undergo a course of Chemotherapy which would at best hold the cancer at bay. No MRI scan was done. It then took until mid-April for the chemo therapy to be initiated a further delay of two months. However, and luckily for X, Y's brother in law, who is a consultant at Manchester University Hospital suggested that an MRI scan should have been carried out and was able to arrange for this to be done in Manchester. The immediate response to the results of the Scan was that the tumour</p>	<p>Joint investigation between GP and MTW (lead). No delays identified in care provided by MTW. Explanation offered as to why MRI was not indicated.</p>

was operable and this is now been progressed.

So again we have a situation where for whatever reason the full diagnostic facilities were not used at Pembury. For instance what is the availability of MRI scanning at Pembury and Maidstone and what has the usage been in the past year. Why has this essential facility not been used.

Why was the local GP reluctant to immediately refer X in June for diagnostic evaluation when the symptoms exhibited clearly pointed to the strong possibility of cancer. Was pressure been put of the local GP's not to refer patients. Have we sacrificed some 300,000 potential cancer sufferers in order to "Protect the NHS".

In X's case why did it take a further two months to start the chemotherapy treatment.

I appreciate that individual cases are not evidence of structural issues but these cases seem to illustrate a lack of urgency and commitment within the local Hospital NHS.

When we accepted the 1st Lockdown "To Protect the NHS" I and all I have spoken to believed that this meant the NHS would carry on as before but also deal with the COVID crisis.

<p>Concerns raised with management of cancer treatment and delays in surveillance scanning. patient feels delays allowed cancer to spread undetected.</p>	<p>Dr Oncologist booked mid-progress breast scan which was scheduled for 6<sup>th</sup> April 2020, unfortunately this scan was cancelled due to the outbreak of coronavirus and lockdown.</p> <p><b>How do you justify Dr Oncologist failing to take into consideration how important it was to keep my appointment to avoid my cancer getting worse? I understand that coronavirus was rampant at this point, but I also understand that treatments which were considered to be lifesaving were rescheduled and conducted during the pandemic. For patients to be denied potentially life-saving diagnostic/treatment when hospitals were empty or running far below normal capacity and so many healthcare workers were able and willing to treat them is a clear breach of my human rights.</b></p>	<p>Joint investigation between Medway (lead) and MTW. Assurance offered that surveillance scanning was appropriate. Cancer progressed despite appropriate treatment/investigations. Full response to the complaint is held by Medway.</p>
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