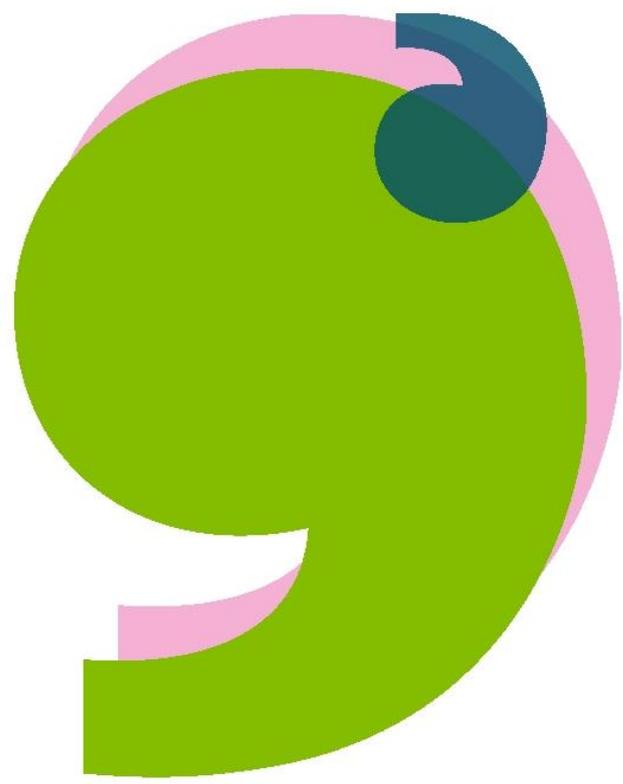




**Patient experiences of Outpatient clinics
in Hereford Hospital March 2019.**



Contents

Contents.....	2
1 Executive Summary.....	3
2 Recommendations	11
3 Service Provider Response	15
4 Introduction	18
4.1 Details of visit.....	18
4.2 Acknowledgements.....	18
4.3 Disclaimer	18
5.1 Purpose of Visit.....	19
5.2 Strategic drivers.....	20
5.3 Methodology.....	21
6 Results of visit.....	22
6.1 Gender, age and numbers of people interviewed.....	22
6.2 Ophthalmology	23
6.3 Ear Nose and Throat/ Head and Neck (ENT).....	37
6.4 Trauma and Orthopaedic - Fracture Clinic and Radiology.....	50
6.5 Urology and Rheumatology.	63
6.6 A&E Feedback - All clinics	74
6.7 All Clinics - combined statistics on waiting times after check-in.	78
6.8 Comparison of views by clinic on automatic Check-in	80
7 Appendices.....	81
7.1 Survey used as a basis for patient conversations	82
7.2 DRAFT Outpatient Clinics Early notes - observations and volunteer brief summaries of comments.	84

1 Executive Summary

165 people were interviewed about their experiences of Herefordshire Hospital outpatient clinics between 11th and 22nd March 2019.

56% of people identified as male, 42% as female, 52% of people were over 65, 36% were 25 - 65 and 10% under 25 years old.

Ophthalmology outpatient clinic

Experience of making an appointment and the booking system

- Most, (75-100%), of the patients that had waits to get appointments of up to 3 weeks felt the wait was reasonable. Over 60% felt their waits of up to 4-6 months was reasonable.
- 67% of people with ongoing appointments and 50% of people with annual appointments thought appointment waiting times were reasonable.
- Overall, 67% of patients felt the wait to get an appointment was reasonable and 10% thought not. 18% did not know and accepted when called.
- 76% of patients received bookings by letter, 14% through the optician and 7% by telephone.
- 62% of people preferred to receive a letter, 15% an email, 9% a telephone call, 9% a letter backed up with a text and 3% at time of previous appointment then confirmed with a letter.
- 67% of people gave a positive sentiment about communication, 8% neutral and 14% a negative sentiment.
- 74% of people had enough information about their appointment, 24% did not. Patients wanted to know how long appointment was likely to take, a bit more information about what to expect in their appointment and a few found changes to the clinic and finding it a challenge.
- Patients suggested improvements to the booking system including improved communication, information, and a few commented on avoiding split appointments, different clinic locations (mobile unit and Bromyard) and the potential better use of technology.

Caring for yourself between appointments

- 92% of patients felt that they had enough information to help care for themselves between appointments and 8% wished for more information. They sought more information on their conditions, what to expect going forward and one person wanted to know what treatment to expect to prepare an intellectually impaired dependent for future appointments.

Automatic check-in

- 52% of patients felt that automatic check in would not be of benefit and 28% thought it would be of benefit. Sight impairment was the greatest concern for many and wishing to speak to a person. A few felt there should always be both.

- Patients repeatedly said (across clinics) that such systems in GP surgeries were always breaking down/ were often not in operation.

Waiting times once checked in

- For 83% of the patients this was not their first visit to the clinic and for 17% this was their first visit.
- Patients estimated their waits from 10 minutes to (rarely) over two hours.
- Shorter times below 30 minutes were most likely to be thought reasonable.
- 33% thought up to 15 minutes was reasonable and 59% thought up to 30 minutes was reasonable, 7% thought 45 minutes to an hour was reasonable.

Staff

- Comments overall were very positive about staff.
- 88% patients said that in their appointment the doctor or nurse explain everything in a way that they understand.
- Most patients felt safe (100%), respected and treated with dignity (100%), treated as an individual (95%), listened to (90%), given opportunities to feedback and ask questions and express their point of views (81%) and given privacy (95%). Of the patients that had carers 95% felt their family carers were recognised appropriately in discussions, 5% felt they were not.

Clinic environment

- Clinic environment was generally viewed as ok with some suggestions that it was a bit cramped and that markings on the floor might help. Some acknowledged the changes so far but there was a general feeling that they had not made a great difference.

Eye Care Liaison Officer

- Very few people recognised that they had been supported by the Eye Care Liaison Officer. Those that had were content with the service.

What is good about Ophthalmology service

- Comments were made about what is good about Ophthalmology clinic service including changing appointments easily, Quality of service, A&E and waiting times.

What could be improved about Ophthalmology service?

- Comments were made about what could be improved and patients made suggestions about the environment (mobile unit '*not a pleasant experience*'), car parking, A&E, the NHS, waiting times, transport, and information (wishing to see specialist, knowing why tests repeated).

What alternatives to coming to clinic have you experienced, would consider or would prefer?

- Most patients said there were no alternatives, but a few said yes and made suggestions of local clinics and an option to email for people that have rapidly changing conditions.

Ear Nose and Throat (ENT), Head and Neck outpatient clinic

Experience of making an appointment and the booking system

- Up to 3 weeks wait was thought reasonable to gain an appointment. However, for regular and ongoing appointments 100% of the public felt 9 monthly or annual appointments were reasonable. A few commented that the period between appointments appeared to be lengthening.
- 100% thought 4-6month waits were unreasonable - this may be first appointments.
- Most patients received bookings by telephone (23%), or letter (32%), 6% by 'letter or telephone' and 10% 'letter backed up with a text'. 13% booked by an internal referral e.g. A&E or Stonebow and 13% by a GP letter referral.

- Patient preference was for letter (34%) or Telephone call (31%). 7% for letter/telephone and 7% a letter backed up with a text. 7% preferred to make booking at the time of their previous appointment and 3% preferred the idea of making Internet bookings. 3% said they did not mind.
- 87% of patients expressed a positive sentiment about communication. 4% neutral, 9% gave a negative sentiment.
- 97% of patients said that they had enough information about their appointments.
- 3% of patients wished for more information about their treatment.
- Suggestions were made about: electronic mode of contact; reception changes (there is no longer a reception in ENT department and many expressed concern and confusion about this and a little annoyance by a few for having to go back and queue at another reception); information indicating treatment; timing; and regarding checking patient condition prior to cancellations.

Caring for yourself between appointments

- 73% of people said that yes, they had enough information to help them to take care for themselves between appointments, 18% said partly and 9% said no.
- Additional information that patients wished for was more information on how to treat the condition and an explanation of cause of delays in the booking system.

Automatic check-in

- Most people (48.5%) felt that automatic check ins would be of benefit. 27.3% thought not.

Waiting times once checked in

- 43% are seen very quickly/ 10-15 minutes, 26% 15-30 minutes, 17% 30-45 minutes, 9% said 45 minutes to an hour and 4% over an hour.
- 75% of the people who thought their wait was unreasonable had waited over an hour and 25% 30-45 minutes. 94% of people who thought their wait was reasonable had waited 30 minutes or less. 6% felt their wait was reasonable and had waited 30-45 minutes.
- Asked what was a reasonable time 50% of people thought that once they had checked in a wait of 15-30 minutes was reasonable, 25% thought 10-15 minutes was reasonable. 8% said 45 minutes to an hour and 17% said they did not mind.
- Comments were about being informed about unexpected delays and the difficulties of car parking.

Staff

- Comments overall were very positive about staff.
- Most patients felt safe (100%), respected and treated with dignity (96%), treated as an individual (92%), listened to (100%), given opportunities to feedback and ask questions and express their point of views (96%) and given privacy (100%). Of the patients that had carers 81% felt their family carers were recognised appropriately in discussions, 19% felt they were not.

Clinic environment

- Most thought the environment was ok just needing a bit of brightening up. A patient pointed to out of date notices. A customer thought the chairs a bit too close together, another that they were uncomfortable. A patient noted that the area was not very child friendly.

Experience of other hospitals

- Only one patient had experience of another hospital in Worcester. They were expecting an operation in Hereford when they were given a date for Worcester, a further hour away. *“Had to have family take - it was a lot more difficult”*.

What is good about service.

- What is good about the service? Patients mentioned quality and speed of service, staff attitude and skills and that the service is local and convenient.

What could be improved about service.

- What could be improved? People suggested car parking, speed of service increased staff resources, reception in ENT.

What alternatives to coming to clinic have you experienced, would consider or would prefer?

- Most patients said there was no alternative to coming to the clinic, but some made suggestions including home visits, using the Internet/ Skype or telephone, and ear wax removal in the local GP surgery.

Trauma and Orthopaedic - Fracture Clinic and Radiology outpatient clinic

Experience of making an appointment and the booking system

- 100% of people who waited up to 3-4 days or 1-3 months for an appointment thought it was a reasonable wait. 80% of those that waited 2 months thought it a reasonable wait. 100% of those that waited 4-6 months thought it unreasonable.
- Overall, 70% thought their wait time was reasonable 17% thought not.
- 35% made their booking by letter, 27% through GP/MIU or Taurus, 12% made it in the clinic followed by receiving a letter, 8% by an internal referral or A&E, 8% through the drop in, 4% by Letter and text and 4% by telephone.
- 44% of patients expressed a preference for making a booking by letter, 19% at time of previous appointment followed up by a letter and 6% preferred a text. 31% Did not mind what method.
- 56% expressed a positive sentiment about communication, 28% a neutral sentiment and 6% a negative sentiment.
- 100% of patients said that they had enough information about their appointment.
- Patients suggestions to improve the booking experience included Online booking/ Self booking, improving Speed of service and considering speed of post using first class stamps if necessary. (A second class stamped letter had arrived after appointment date. Another had arrived so close to date that patient had great difficulty arranging transport).

Caring for yourself between appointments

- 72% of people said that they had enough information to help them to care for themselves between appointments. 9% said partly and 13% said no.

Automatic check-in

- 42% said an automatic check-in would be of benefit and 40% said it would not, 11% did not know.

Waiting times once checked in

- 40% of patients said that once they have been checked in the wait was very quick (10-15 minutes), 30% said 15-30 minutes 5% said 45minutes to an hour and 10% said over an hour.

- Of those that felt their wait was reasonable 54% had waited 10-15 minutes, 31% 15-30 minutes and 15% 30-45 minutes.
- Of those that felt their wait was unreasonable 50% had waited 30-45 minutes, 25% had waited 45 minutes to an hour and 25% for over 2 hours.
- Asked what a reasonable waiting time would be, once checked in, overall, 22% thought 10-15 minutes was reasonable, 44% thought 15-30 minutes, 22% thought 30-45 minutes and 11% thought 45 minutes to an hour was reasonable.

Staff

- Comments overall were very positive about staff.
- 94% of people felt that the doctor or nurse explain everything in a way that they understand.
- Most patients (84-97%) feel that they are given privacy, given opportunities to feedback and ask questions and express their point of view, are listened to, treated as an individual, respected and treated with dignity and are safe. Of those that have carers 93% felt that their family carers were recognised and involved appropriately in their care and included in their appointments and 7% felt partly involved.

Clinic environment

- Most people found the clinic environment fine and a few gave areas for improvement finding it cramped especially when injured.

Travel to and from fracture clinic/ Trauma to Radiology

- Most people did not find travelling to and from fracture clinic and radiology difficult but a few with mobility issues either through injury or otherwise found it difficult and painful.

What is good about service

- Patients gave many examples of what they thought was good about the service including the 'drop-in service in general', that it is free and available, has good waiting times, environment and staff and good service quality and information.

What could be improved about service?

- Patients suggested a number of areas for improvement including car parking, privacy, waiting times, hospital out of order lifts, seating, resources (usually comments about more staff), information, communication (use of first-class stamps), limiting activities, noise and distractions in Hospital Entrance, Service quality -issues around pain killer strengths, and a couple of GP/hospital communication issues.

What alternatives to coming to clinic have you experienced, would consider or would prefer?

- Most patients said there were no alternatives to attending the clinic that they have experienced, would consider or would prefer but a few suggestions were made including going to their own doctor, possibly attending a minor injuries unit. If appropriate, a few people were willing to have Skype or telephone consultations or email depending on the problem. One 80-year-old patient felt that Llandrindod hospital would have been more convenient facing an expensive 90-mile round journey. One person said they'd used a private service before.

Urology and Rheumatology outpatient clinic

Experience of making an appointment and the booking system

- Most of the patients we spoke to had come to Urology or Rheumatology with a few patients in the clinic for other reasons including cancer and the sleep clinic.
- Patients had waited from 1 week to 9 months for an appointment with 15% having routine or ongoing appointments.
- 75% of patients that had waited a week for an appointment thought it reasonable.
- 100% of people that waited 1-5 weeks thought their waits reasonable.
- 50%, 17%, and 50% respectively of those with 3 monthly, 5-6 monthly 9 monthly to annual ongoing appointments thought waits were reasonable.
- 67% of people with all other routine appointments thought their waits had been reasonable.
- 67% of people with ongoing 5-6 monthly appointments, 50% of ongoing 3 monthly appointments, 50% of 9 months to annual regular ongoing appointments and 33% of all other routine/ ongoing appointments thought the waits were unreasonable.
- 50% of people received a letter informing them of their booking, 8% letter and text, 8% in previous clinic and letter to follow, 11% following a hospital treatment with a letter, 8% through their GP, 3% by telephone call and 3% Letter and email.
- 50% prefer a letter, 10% Letter and email, 5% letter and phone call, 5% letter and text, 7% in previous clinic with a letter. 21% don't mind and have no preference.
- 74% expressed a positive sentiment about communication and 26% were neutral.
- 89% of people said yes, they had enough information about their appointment, 11% said no. People that said no suggested correct information, clearer directions and purpose of appointment.
- Patients made suggestions to improve the booking experience including improved information in communications, electronic bookings, improve appointment speeds. And one patient suggested that an answer machine was needed at Worcester bowel screening service.

Caring for yourself between appointments

- 75% of people said that they had enough information to help them between appointments, 7% said partly and 4% said no. 14% said that they didn't know if they had enough information.

Automatic check-in

- 44% of people said that an automatic check in would not be of benefit, 33% said it would be of benefit.

Waiting times once checked in

- 64% of people said that they waited 15-30 minutes to be treated/seen once they have checked in at the clinic and 32% said the wait was very quick/ 10-15 minutes, 5% said 30-45 minutes.
- Of the patients that said their wait was reasonable 92% had waited 15-30 minutes and 8% 10-15 minutes. Of those that said their wait was unreasonable 100% had waited 30-45 minutes.
- Asked what would be a reasonable waiting time, overall 28% said they would view 10-15 minutes as a reasonable wait, 50% said 15-30 minutes and 11% 30-45 minutes.

Staff

- Comments overall were very positive about staff.

- 80% of people said yes, in their appointment, the doctor/nurse explains everything in a way that they understand, 3.3% said partly and 3.3% said no.
- Most patients, (80-100%), feel that they are given privacy, given opportunities to feedback and ask questions and express their point of view, are listened to, treated as an individual, respected and treated with dignity and are safe. Of those that have carers 80% felt that yes, their family carers were recognised and involved appropriately in their care and included in their appointments, 13% didn't know and 7% said no.

Clinic environment

- Most people felt the clinic environment is ok and some suggested improvements of brightening up and improving seating as on crowded days some have to stand and wait to be seen.

One-stop clinic

- Two people were aware of the new one stop clinic. People thought it was a good idea.

What is good about service

- People said the service quality generally was good.

What could be improved about service

- People suggested improvements of speed of service, service quality (continuity - see the same doctor, one stop clinic when travel a long way, management improvements ('reduced unexpected targets and pressure'), written information when patient is anxious), transport and car parking, the environment brighter and less clinical.

What alternatives to coming to clinic have you experienced, would consider or would prefer?

- Most patients said there were no alternatives to attending the clinic that they had experienced, would consider or would prefer but a few suggested private, going to their GP, local service in Llandrindod, consultants going to market towns and some felt technology might be used where appropriate for consultations or check-ups.

All clinics

Combined statistics on waiting times after check- in.

Combined totals for all clinics are included but it should be noted that they may not make sense, as some patients are seeking emergency help and others are having routine follow up appointments. But overall the opinion of patients on what is a reasonable wait: 3% said 5-10 minutes, 15% said very quick/10-15 minutes, 32% said 15-30 minutes, 41% said 30-45 minutes, 4% said 45 minutes to an hour and 50% said I don't mind/ it doesn't matter. Depends/ give and take. Nobody said over an hour or over 2 hours.

Knowing about Healthwatch

- 87% of people did not know about Healthwatch Herefordshire and its role, 5% had partly heard about Healthwatch and 8% knew about Healthwatch and its role.

Accident and Emergency (A&E)

Experience

- 22 people had come to clinics via A&E. (13% of patients interviewed).
- 52% of people gave a positive sentiment about their experience of Hereford A&E, 19% Neutral and 29% Negative.
- 1 other person had come through A&E at Landrindod hospital and expressed a negative sentiment.

Waiting time after check-in

- 43% of patients waited under an hour after checking in, 14% 1-2 hours, 10% 2-3 hours, 0% 3-4 hours, 14% 4-5 hours and 19% over 5 hours.
- 48% of patients felt they were seen in a reasonable length of time, 52% felt that they were not seen in a reasonable length of time.
- Of the 52% who thought they were seen in an unreasonable length of time 27% were seen in between 1 and 2 hours, 18% between 2 and 3 hours, 36% between 4-5 hours and 18% over 5 hours.
- Asked what a reasonable waiting time was, 8 patients (36%) said that reasonable times were from straight away to 2 hours depending how bad you are.

What is good about service

- People said that what was good about the A&E service was speed of service, data access, efficiency and service comments, staff.

What could be improved about service

- People suggested that the A&E experience could be improved by improving data access, speed of service, speedier administering of stronger pain relief, information improvements, improved communication between staff, environment improvements (overcrowding/ poor seating), increased efficiency and individual service improvements e.g. moving someone very self-conscious with their issue to a side room.

Ambulance service

- Three people (14%) had come by ambulance, commenting that the ambulance service was good, and they were very pleased with it.

2 Recommendations

Ophthalmology

Experience of making an appointment and the booking system

Consider improving the booking system by:

- Offering Online booking or email appointment confirmation for patients preferring this mode.
- Increasing information:
 - How long appointments are likely to take.
 - What to expect in their appointment.
 - Any changes to the clinic that will impact a person who is visually impaired on arrival e.g. new layout.
- Avoid split appointments between different clinic locations (mobile unit and Bromyard).

Caring for yourself between appointments

- Offer patients more information on their conditions and what to expect going forward.

Waiting times once checked in

- Endeavour to keep waits below 30 minutes.

Clinic environment

- Continue to improve clinic environment to be less cramped considering any trip hazards for people whose vision is compromised.
- Consider whether the use of colour on the flooring can help lead patients into and around clinic.
- Check the gap in the right-hand toilet door.

Eye Care Liaison Officer

- Consider ways to make patients more aware of support offered by the Eye Care Liaison Officer e.g. explaining why tests are repeated, what to expect, self-care.

What alternatives to coming to clinic have you experienced, would consider or would prefer?

- An option to email for people that have rapidly changing conditions.

Ear Nose and Throat (ENT), Head and Neck outpatient clinic

Experience of making an appointment and the booking system

Consider improving the booking system by:

- Feasibility of offering Online booking for patients preferring this mode.
- Increasing information:
 - About treatments.
 - About duration of appointments.
 - About cause of delays in the booking system.
- Calling to check patient condition prior to cancellations.

Waiting times once checked in

- Endeavour to keep waiting times as low as possible preferably below 30 minutes and inform patients about unexpected delays.

Staff

- Consider how family carers are recognised appropriately in discussions.

Clinic environment

- Consider improving the environment by brightening it up, checking notice dates, reviewing chair comfort and placement to offer more room.
- Consider offering a child friendly area.
- Consider patient comments and concerns about reception in ENT to either replace it or clarify signage/ information.

Experience of other hospitals

- Consider patient concerns about appointments in other hospitals e.g. Worcester.

What alternatives to coming to clinic have you experienced, would consider or would prefer?

- Consider feasibility of patient suggestions about alternatives to coming to the clinic, including home visits, using the Internet/ Skype or telephone, and ear wax removal in the local GP surgery.

Trauma and Orthopaedic - Fracture Clinic and Radiology outpatient clinic

Experience of making an appointment and the booking system.

Consider improving the booking system by:

- Decreasing waiting times for people currently waiting 4-6 months as 100% people thought it unreasonable.
- Considering the possibility of Online booking/ Self booking.
- Improving Speed of service.
- Considering speed of post using first class stamps if necessary, to ensure reaching patient before appointment date and allowing people to make travel and support arrangements.

Caring for yourself between appointments

- Consider how to check that patients have enough information to care for themselves between appointments including clear contact information.
- Endeavour to keep waiting times as low as possible preferably below 30 minutes.

Clinic environment

- Consider ways to make clinic less cramped for people with injuries and for wheelchairs.

Travel to and from fracture clinic/ Trauma to Radiology

- Consider how to assist people with mobility issues either through injury or otherwise that find it difficult and painful, travelling to and fro, from fracture clinic and radiology.

What could be improved about service?

Consider service improvements suggested by patients including improving:

- Waiting times.
- Hospital out of order lifts.
- Communication (use of first-class stamps).
- Limiting activities, noise and distractions in Hospital Entrance.
- Service quality -issues around pain killer strengths.
- GP/hospital communication issues.

What alternatives to coming to clinic have you experienced, would consider or would prefer?

Consider the feasibility of patient suggestions for clinic alternatives:

- Going to their own doctor.
- Attending a minor injuries unit.
- If appropriate, Skype or telephone consultations or email depending on the problem.
- Attending a closer hospital Llandrindod hospital.

Urology and Rheumatology outpatient clinic

Experience of making an appointment and the booking system

Consider improving the booking system by:

- Decreasing waiting times that patients thought unreasonable.
- Offering email confirmation and electronic booking for patients that wish it.
- Offering information requested about purpose of appointments and clearer directions.
- An answer machine at Worcester bowel screening service.

Waiting times once checked in

- Endeavour to keep waiting times as low as possible preferably below 30 minutes.

Staff

- Consider ways to make sure that family carers are recognised and involved appropriately in the patient's care and included in their appointments.

Clinic environment

- Consider improving clinic environment by brightening up, making less clinical and improving and increasing seating.

What could be improved about service

Consider patient suggestions to improve service by improving:

- Speed of service.
- Continuity - see the same doctor.
- One stop clinic particularly for patients travelling a long way.
- Provision of written information when patient is anxious.

What alternatives to coming to clinic have you experienced, would consider or would prefer?

Consider feasibility of patient suggestions for alternatives to clinic visits where appropriate including:

- Going to their GP.
- Local service in Llandrindod.
- Consultants going to market towns.
- Use of technology for virtual consultations.

Knowing about Healthwatch

Continue to raise public awareness of Healthwatch.

Accident and Emergency (A&E)

Experience

Consider improving patient experiences of A&E by improving:

- Waiting times after check-in of under an hour.
- Data access.
- Speed of administering stronger pain relief.
- Information given to waiting patients.
- Communication between staff.
- Environment (overcrowding/ poor seating).
- Efficiency.
- Awareness of individual needs and concerns e.g. moving someone very self-conscious with their issue to a side room.

Automatic Check-in

Patients in different clinics are divided in their views about automatic check in. Two clinics in favour, two against. Consider patient concerns about automatic check-in if it is introduced especially:

- Sight impairment difficulties.
- People that struggle with technology.
- Ensure are kept in operations.
- Offer reception staff as alternative for those who cannot use automatic check-in or need additional information or help.

3 Service Provider Response

The Healthwatch enter and view visit undertaken in March this year has provided a useful report of patient feedback relating to the outpatient services at the County Hospital.

The report overall demonstrates that the many improvement projects being undertaken over the past few years have helped to make patients experience of outpatient services a better one. Notably we were pleased to read that patients told us that the Booking Systems and waiting times have improved. Indeed, innovations such as the implementation of one stop clinics in Urology is an area which we are already looking to expand across other specialties. However, we are not complacent, and the report has proven valuable to ensure that we continue to focus on patient views of where we can make further improvements. The suggestions noted in the report to look at how technology can help in this respect such as Skype Appointments will be fed into the elective care improvement projects.

The automatic check in project is moving forwards and will help to improve flow around the clinic environment. We are mindful of the feedback from the report which asks us to consider patients with sight impairments, and those patients who struggle with technology. Hence, we will continue to support those patients who require help with booking in by maintaining our reception services and providing volunteer support for patients at the point of check in.

The report highlighted that the general view of patients was that the clinic environment is cramped. Notably the improvements made to the Ophthalmology department with the rebuild completed has helped to address some of the concerns in that department. We are aware that the Trauma and Orthopaedic department is particularly challenging in terms of available space and a number of options have already been discussed. However, the feedback from the report has been useful to steer discussions on improving seating for patients with mobility issues e.g. crutches. There were some general comments about how the clinic environment can be improved in small ways such as improving notice boards and patient information, which has reminded us that small change can have big impact on the patients' experience.

It was heartening to read the positive comments in regard to patients experience in our Accident and Emergency Department, such as the efficiency of the service. Albeit that the number of patients interviewed would have been a significantly low proportion of the total number of patients who attend A&E, the comments are useful and we continue to monitor all areas of patients waiting times to ensure we work towards meeting the national targets.

The report provides a fair reflection of the services reviewed, there were some really positive comments about the staff being caring, helpful, welcoming with a friendly approach. The report will be shared with the specialty/department teams so that they have the opportunity to reflect on the findings and take forward any of the useful suggestions provided for us. The report will also be reviewed by the Patient Experience Committee to ensure that the patient engagement forum members provide any additional support for any service improvements.

Helen Byard

Deputy Director of Nursing



4 Introduction

4.1 Details of visit

Day, date and time in March 2019	Outpatient clinic Wye Valley Trust Hereford Hospital.	Location	Authorised Representatives
9.30 - 11.30 Monday 11 th	Ophthalmology	Eign Suite	Mary Simpson + Beth White + Philip Hudson
9.30 - 11.30 Wednesday 13 th	Urology	Fred Bulmer	Mary Simpson + Paul Picken
1.30 -3.30 Wednesday 13 th	Ear Nose and Throat	Oxford Suite	Mary Simpson + Patrick Hughes + June Emberton
9.30 -11.30 Friday 15 th	Fracture Clinic Radiology	Oxford Suite	Mary Simpson + Patrick Hughes
9.30 -11.30 Monday 18 th	Rheumatology	Fred Bulmer	Mary Simpson + Amy Chandler + June Emberton
1.30 -3.30 Monday 18 th	Ophthalmology	Eign Suite	Mary Simpson + Amy Chandler + David Faulkner
9.30-11.30 Tuesday 19 th	Trauma and Orthopaedics	Oxford Suite	Mary Simpson + Bethany White + Brenda Bayliss
1.30-3.30 Tuesday 19 th	Radiology	Oxford Suite	Mary Simpson + Marcus Allen
1.30-3.30 Wednesday 20 th	Rheumatology	Fred Bulmer	Mary Simpson + Patrick Hughes + Philip Hudson
9.30-11.30 Friday 22 nd	Ear Nose and Throat	Oxford Suite	Mary Simpson + Brenda Bayliss
1.30-3.30 Friday 22 nd	Urology	Fred Bulmer	Mary Simpson + Marcus Allen

4.2 Acknowledgements

Healthwatch Herefordshire would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme.

4.3 Disclaimer

Please note that this report relates to findings observed on the specific dates set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

5 What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies.

Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

5.1 Purpose of Visit

- To understand the outpatient experience of patients at Hereford hospital.
- To expand patient feedback in areas that appear to be a concern.
- Useful to Sustainability Transformation Plan.
- To gain some intelligence regarding A&E experience (project cut last year due to winter pressures).
- To add to knowledge of WVT in areas that will be useful and likely to improve service or be timely for in-service development or change.

Following discussions with Anne Miles, Clinical Manager - Outpatients & Patient Access, the following clinic visits were proposed and the benefit or points of interest to Health Watch Herefordshire, Healthwatch Worcestershire and Wye Valley Trust are listed:

Ophthalmology:

- A revision of rooms is going to take place this financial year because of cramped conditions. This was an issue two years ago.
- Has Eye care liaison officer WVT+RNIB joint funded. Does this improve communication/information?
- WVT practitioners would find it useful to confirm urgency when other strategic priorities may compete e.g. new wards

Ear Nose and Throat/ Head and Neck:

- Complex pathway using clinical nurse specialists, helpline service and different appointments using different hospitals - tertiary care (e.g. Worcester).
- Patient stories re tertiary care and not knowing who to call.
- Hospital wants to work on this pathway and customer experience would be useful.
- Telephone appointments are common so it would allow feedback about alternative methods to face to face appointments.

Trauma and Orthopaedic - Fracture Clinic and Radiology

- Linked clinics with a lot of travelling to and fro.
- Often initiated by a trip to A&E so we are likely to gain intelligence re patient experience of A&E.
- Patient stories re lack of information.
- WVT would find it useful to know how patients feel about travelling between clinics and privacy and dignity.

Urology and Rheumatology.

- New 1 stop clinic - scan + Consultant + scope to diagnose.
- Patient stories re long waits in rheumatology clinic.
- WVT would like feedback about a new service.

All clinics above

- Preferred mode of communication.
- Alternative delivery e.g. telephone.
- Expectations re appointment times.

5.2 Strategic drivers

- Outpatient clinics and A&E are a local Healthwatch priority.
- Sustainability Transformation Plan.
- NHS Long Term Plan.

Questions

Areas of questioning therefore included:

- A&E experience (if appropriate).
- Booking experience/ communication and mode.
- Waits and delays.
- Privacy and dignity.
- Information to attend and about condition/ self-help.
- Environment.
- New service feedback.
- Experience of complex pathway involving other hospitals.
- Alternative delivery e.g. telephone.

5.3 Methodology

This was an announced Enter and View visit. The Engagement and Volunteer Coordinator met with Anne Miles, (Clinical Manager - Outpatients & Patient Access), and Claire Carlson (Divisional ops for Clinical Support), of Wye Valley Trust and discussed areas that would benefit from feedback and observation in an Enter & View. Which clinics, and dates and times of visits were agreed. Due to winter pressures it was agreed to conduct the visits in March 2019 instead of the proposed January/February visits.

On each visit we received a briefing before we spoke to anyone in the waiting room/s and took the staff advice on safety and whether any patients should not be approached due to their inability to give informed consent, or due to safety or medical reasons.

Authorised representatives spent up to two hours in the waiting room/s having conversations with patients using a survey as an aid to ask them about their experiences at the clinics. (See survey in Appendix 7.1)

Posters alerting patients to the visit were erected on the day and a liberal distribution of Healthwatch Enter and View Easy read leaflets were placed on seats at the start of the clinic session. Authorised representatives asked patients if they wished to participate explaining the reason for the visit.

During the visit Authorised Representatives observed the surroundings to gain an understanding of how the clinic works and how the patients engaged with staff members and the facilities.

Following the Enter & View where appropriate, a brief summary of findings was related to the person in charge in order to offer immediate feedback.

A brief overview was given to Anne Miles on completion of all visits with the proviso that a full analysis was yet to take place. This was based on verbal feedback and observations of authorised visitors noted by the Engagement and volunteer co-ordinator. This is included in Appendix 7.2.

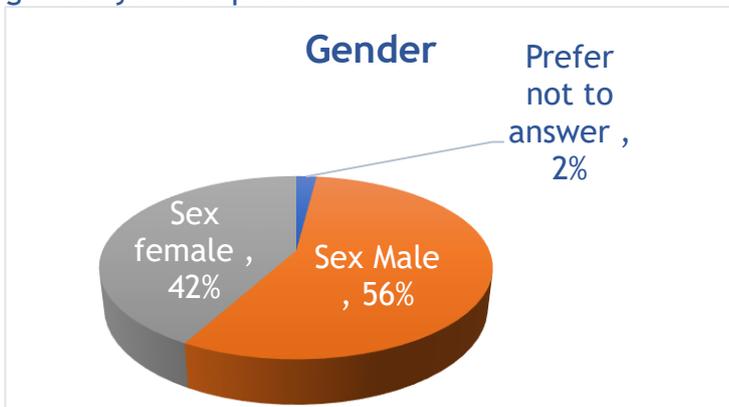
6 Results of visit

6.1 Gender, age and numbers of people interviewed.

We spoke to 165 people over a fortnight.

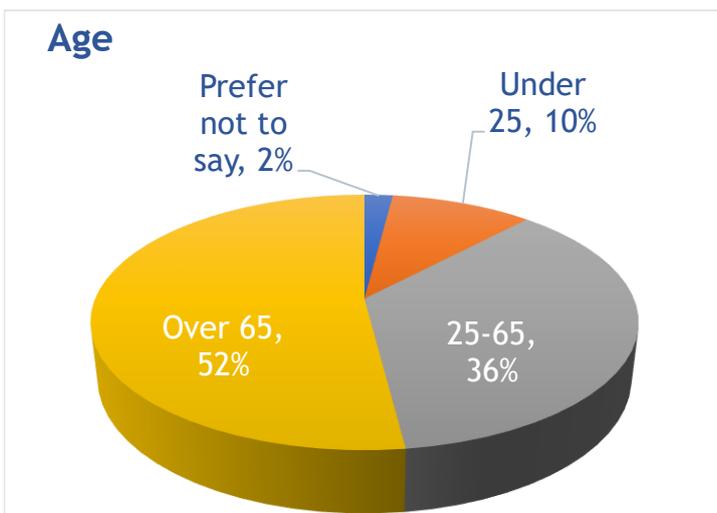
About You:

We want to make sure we ask a mix of people. Would you mind telling me which gender you are please?



56% of people were male, 42% were female.

What age bracket roughly?

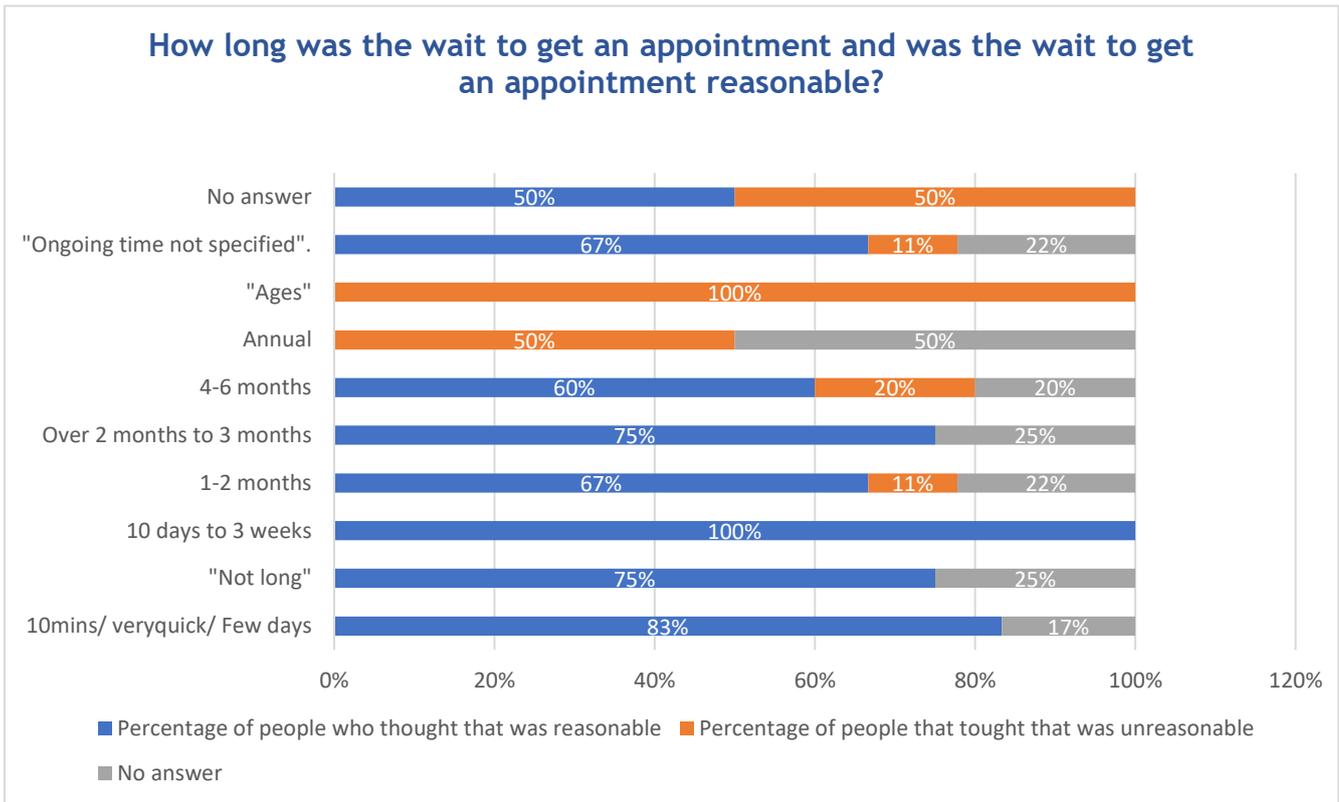


52% of people were over 65, 36% were 25 -65 and 10% under 25 years old.

6.2 Ophthalmology

What is your experience of making an appointment?

How long was the wait to get an appointment and was the wait to get an appointment reasonable?



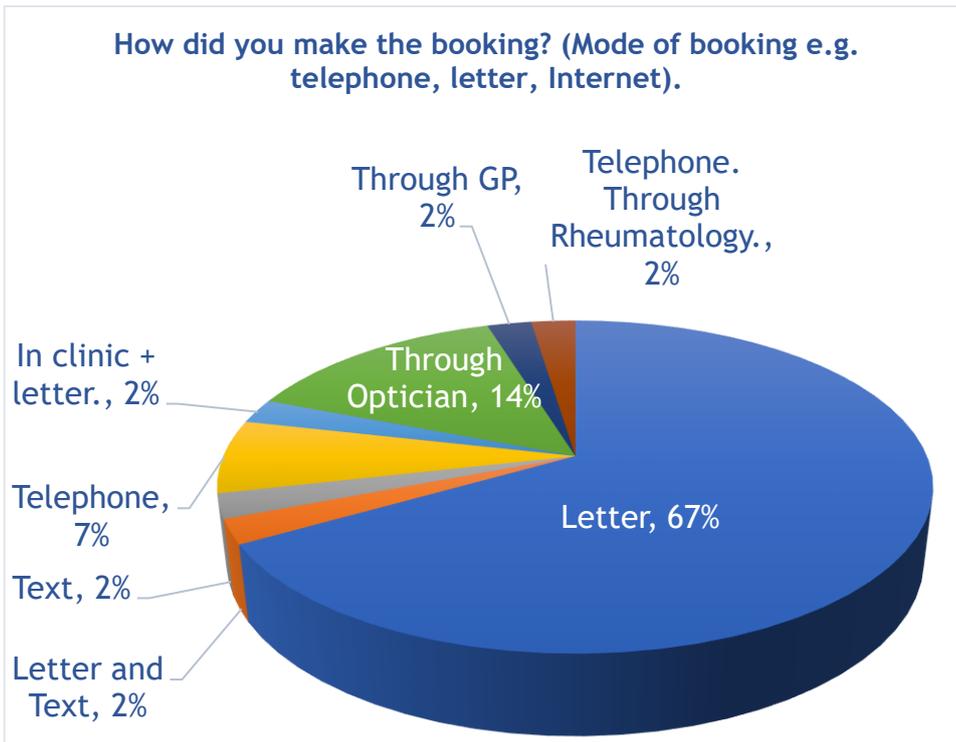
Most (75-100%) of the patients that had waits to get appointments up to 3 weeks felt the wait was reasonable. Over 60% felt their waits of up to 4-6 months were reasonable.



67% of people with ongoing appointments and 50% of people with annual appointments thought appointment waiting times were reasonable.

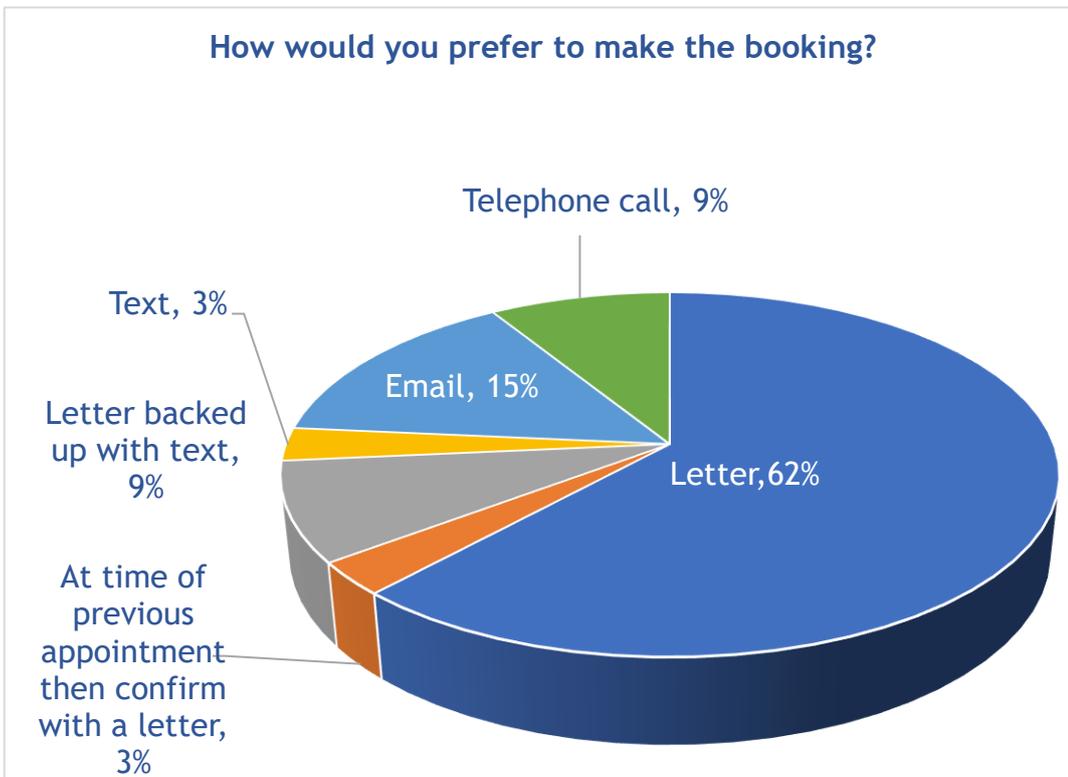
Overall 67% of patients felt the wait to get an appointment was reasonable and 10% thought not. 18% did not know and accepted when called.

How did you make the booking? (Mode of booking e.g. Telephone, letter, Internet?)



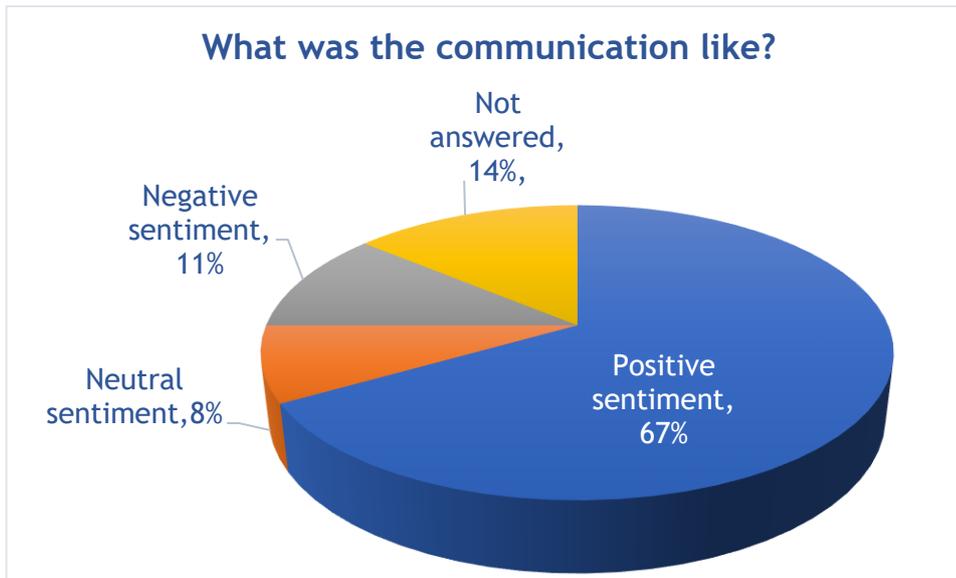
76% of patients received bookings by letter, 14% through the optician and 7% by telephone.

How would you prefer to make the booking? (Preferred mode of booking?)



62% of people preferred to receive a letter, 15% an email, 9% a telephone call, 9% a letter backed up with a text and 3% at time of previous appointment then confirmed with a letter.

What was the communication like?



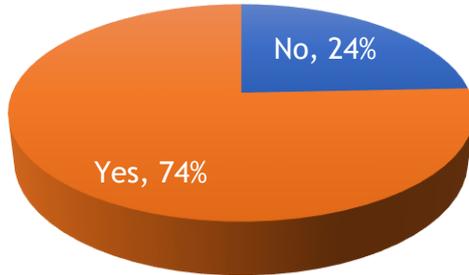
67% of people gave a positive sentiment about communication, 8% neutral and 14% a negative sentiment.

Comments

- *Learned if ring up after 6 or early am hear quickly. Transport near time get a reference number.*
- *Excellent and quick comes regularly.*
- *Not long system quite chaotic from doctor and optician.*
- *Would have liked sooner.*
- *Yes brilliant.*
- *Can be lengthy 6months.*
- *It was a follow up it was fine.*
- *I have regular appointments and the time varies between appointments. It seems to get longer between appointments. Not sure if that is clinical decision or because they are over busy. Just accept delay is acceptable and reasonable how would I know otherwise?*
- *Ophthalmology No (wait not reasonable). Should be every 4 months but was a year. Happens all the time.*
- *Yes, reasonable wait for a check-up it is ok. Emergency would be different.*

Did you have enough information about your appointment?

Did you have enough information about your appointment?



74% of people had enough information about their appointment, 24% did not.

Comments

- *Don't need much as I'm used to it now.*

If no, what information would you have wished for at this stage?

Patients wanted to know how long appointment likely to take, a bit more information about what to expect in their appointment and a few found changes to the clinic and finding it a challenge:

Length of appointment

- *How long going to be there.*
- *Length of time.*

Directions

- *Asked where to go?*
- *No did not know had relocated. Left without a sign once got part way here signs do not take you all the way.*

What to expect

- *Don't know what will happen.*
- *What was to happen, length of appointment.*
- *No indication of what may happen, how long.*
- *No don't really explain reason for appointment e.g. thought seeing specialist but just check up today.*
- *Would have liked to know a bit about test and implications and risks of medication.*
- *Don't think so would have liked to have known if they were going to do a procedure*
- *No - first time no, once I'd been a few times I understood - Could explain better what to expect, whether you can eat and drink for certain appointments.*
- *Yes, not about what will happen.*

How could the booking experience be improved?

Patients suggested improvements in communication, information, and a few commented on avoiding split appointments, different clinic locations (mobile unit and Bromyard) and the potential use of technology:

Information

- *Needs to be accurate and consistent.*
- *First time here, had an operation and didn't know it was going to happen. So need to know whether the appointment is assessment or procedure*
- *Would have liked to know how long will be.*

Communication

- *Get in touch with me! Reminder by text would be good like GP.*
- *Someone to answer phone.*
- *Very frustrated over process Needed to change appt and unable to do so because no one answers the phone.*
- *Sending a reminder.*
- *Why don't let me know at current appointment?*
- *The routine re-appointments usually work ok but patient had to ring once to find out what was happening.*
- *Appointments are usually more frequent than the supposed 6 months. Has been told of another appointment at the end of this week which was not known by patient. Has had 2 letters on same day and then a third later. Had a text for the appointment for today but no letter.*
- *Need to copy it for work, can't get time off without letter*

Appointment timings.

- *Give plenty of time to change shifts.*

Use of technology

- *Book Online.*
- *Do appointments by email?*

Split appointments

- *There now seem to be split appointments being made, in this case within the same week with a second appointment in Bromyard which was not local to the patient. These appear to be for follow up treatment after the session in Hereford.*

Do you have enough information to help you to care for yourself between appointments?

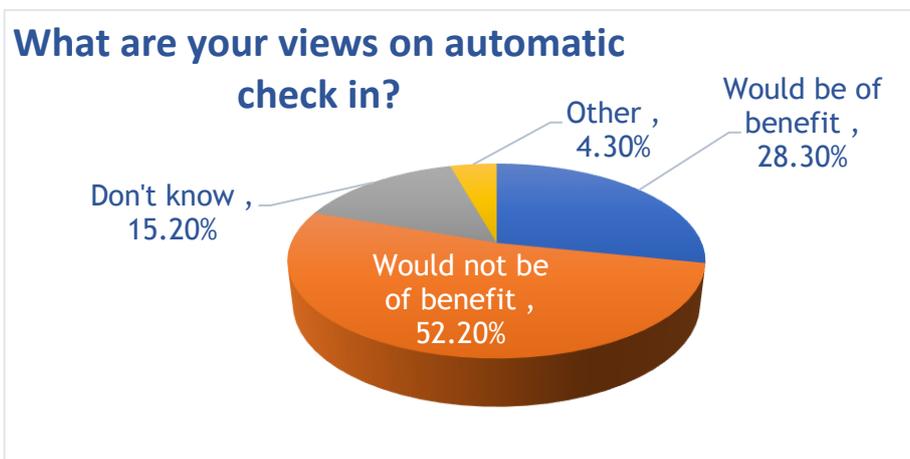


92% of patients felt that they had enough information to help care for themselves between appointments and 8% wished for more information.

Comments

- Any questions can always call secretary.
- Some basic information on different conditions would be useful. Some people want to know more. As a parent it helps to be able to prepare the child a bit before you get there about what to expect. If you know your child needs that.
- Patient referred to being able to go into a facility on Widemarsh Street if they needed information or help with problems.
- Last couple of times the Dr has sent letter to GP and sent a copy which is good.
- Don't really need anything in between appointments.
- A bit more information on condition. Accept treatment is keeping from going blind but, nothing said re if this happens or that this is abnormal.
- Makes patient sick seeing double sees wavy lines etc. feel powerless as relative don't know whether to fuss. On good side always want to know how you are getting on.
- Can never get through to clinic.
- Optician very good, very helpful.
- Would like a number to call for advice? GP no good.

What are your views on automatic check in? (Like the screen that is in many GP surgeries).



52% of patients felt that automatic check in would not be of benefit and 28% thought it would be of benefit.

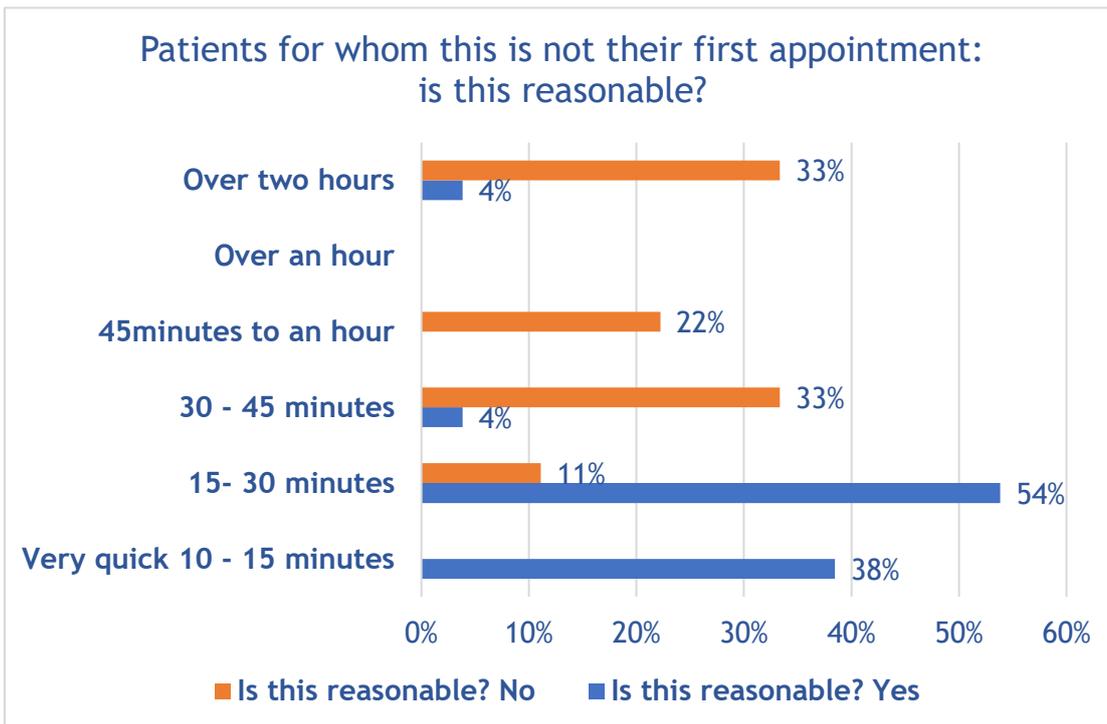
Comments

Would be of benefit
Much quicker.
Should have both can't always see well.
Works well at docs.

Would not be of benefit
As long as they're acted upon.
Asking for added info is good.
Eyesight - nice to see a friendly face.
Not good.
Problem at GPs where it doesn't sign you in if you don't press the last button.
Sight - old people.
Speak person to person. Know have done it right. Know that they know you are here.
Could lead to a queue.
Spread germs?
No benefit to the elderly?

Once you have checked in at the clinic how long do you wait to be treated/seen?
 For 83% of the patients this was not their first visit to the clinic and for 17% this was their first visit.

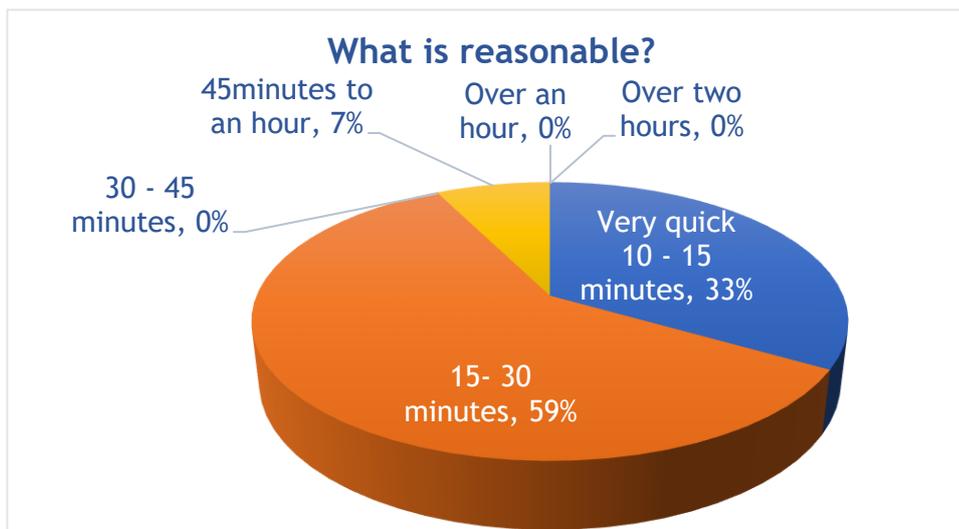
When you come to the clinic how long do you usually wait to be seen?
 Is that a reasonable amount of time?



Patients estimated their waits from 10 minutes to (rarely) over two hours.

Shorter times below 30 minutes were most likely to be thought reasonable.

What is a reasonable amount of time in your view?



33% thought up to 15 minutes was reasonable and 59% thought up to 30 minutes was reasonable, 7% thought 45 minutes to an hour was reasonable.

Comments

About appointment time

- No complaints.
- Has been up to 4-5 hours
- Has been up to 4 or 5 hours once.
- 30 minutes to half an hour - depends how busy clinic is.
- Can be straight away other times more - once was 2 hours.
- Varies in how busy clinic is.
- Brilliant seen quickly.
- What is the point of an appointment time if you are not seen at your appointment time?
- Been coming for 10 years used to wait a while but pretty good in the last 3 years.
- Aware of emergencies but would like explanation.
- Puzzling letter received with blanket approach to get there 15 minutes before appointment. For what?
- It is annoying when must wait. Would like to know if there are delays. Want to know how long.
- Bit long. It was a case of having extra patients, so he apologised.

About duration

- There can also be considerable waits between tests so the whole process can go to 3 hours.
- Initial test is quick but then can wait a while to see consultant, worst case has been 3 hours.
- Initial test is quick but then can wait - waited 3 hours once.
- Have had times when drops were put in and then worn off by the time seen again.

About parking

- Bit unsure for parking.
- Complicates transport.
- Parking is hard to judge.

How are the staff? (Are staff friendly, professional, approachable, knowledgeable and caring)?

Do you have any comments about the reception staff, nurses, doctors or other staff?

Positive sentiment

- *All absolutely brilliant. Very impressed.*
- *QE good example. Name came up on screen, told you where to go.*
- *All pretty good.*
- *Fabulous can't fault them.*
- *Everyone helpful and polite.*
- *Excellent.*
- *Very good reception.*
- *All people are nice.*
- *Delightful.*
- *Everybody is polite and efficient at their jobs. (Ophthalmology) Staff are helpful.*
- *All very good. Handle any hassle well.*
- *Always polite and pleasant. Willing to listen and understand home. circumstances. All good on phone etc understanding. Good to talk to someone.*
- *All fine.*

Neutral sentiment

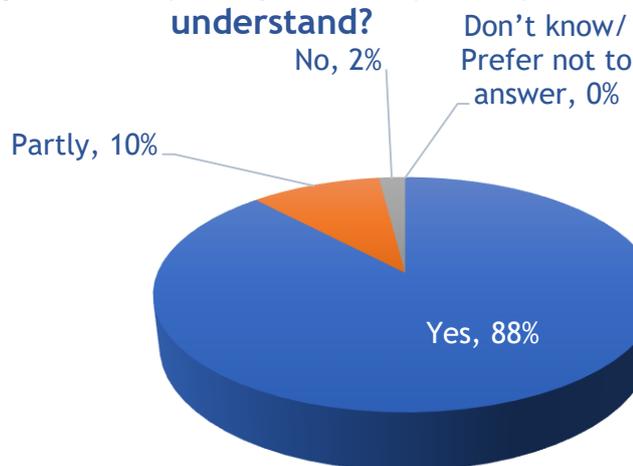
- *Don't know how reception staff manage.*
- *It just seems understaffed.*
- *Seem alright.*

Negative sentiment

- *Bit of a problem one time as file went on to the wrong pile so waited a long time to be seen.*

In your appointment does the doctor/nurse explain everything, in a way that you understand?

In your appointment does the doctor/nurse explain everything, in a way that you understand?



88% patients said that in their appointment the doctor or nurse explain everything in a way that they understand.

Comments:

Positive sentiment

- Patient trusts them completely. Given leaflets and other information which staff feel may benefit them.
- Doctors/nurses take the time to explain.
- Explains in detail really good.
- Explain quite good

Neutral sentiment

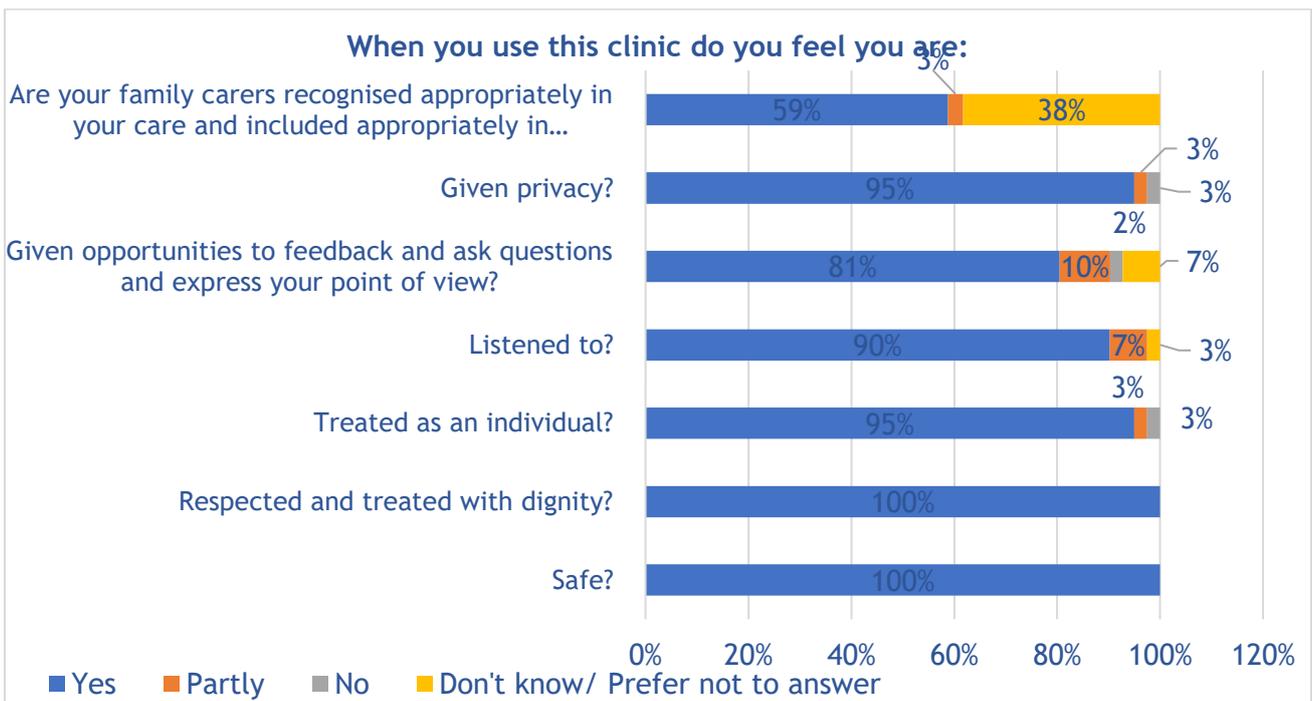
- Need to be proactive and ask.

Negative sentiment

- Comes over quite abrupt. Don't always understand
- Some adverse comment in that there does not seem to be continuity in who patient sees and they have no time to read the notes if the Dr. does not know them. Don't see the person they expect to see in according to their appointment letter.
- Very hard of hearing - could talk louder.
- They can gloss over things.
- Took several appointments to get to bottom of things.
- Generally, very good. Didn't get an answer last time. cause for anxiety.
- I knew from before but didn't explain it. Did the first time i.e. don't drive.

Staff - In your appointment do you feel you are:

Most patients felt safe(100%), respected and treated with dignity (100%), treated as an individual (95%), listened to (90%), given opportunities to feedback and ask questions and express their point of views (81%) and given privacy (95%). Of the patients that had carers 95% felt their family carers were recognised appropriately in discussions, 5% felt they were not.



Can you give an example of what staff do well?

Comments:

- *Dr smith understands (learning disability).*
- *Their job.*
- *Well - everything. Flows smoothly when you go through to them. From nurse to technician.*
- *Treat as a friend.*
- *Patient felt that staff do everything well.*
- *The feedback process is good.*
- *They communicate well and keep patient informed.*
- *No specific examples of what done well. Staff work well given the pressure which they are under.*
- *Staff show a very caring attitude.*
- *All staff do a good job. No suggestions about any changes leading to improvements*
- *Nurses taking your eye check are good*
- *No pretty good especially in outside unit.*
- *Tim makes you feel not worried takes away anxiety.*
- *Pleasant atmosphere, consistent, feels like it must come from the top.*
- *Very understanding of wheelchair use.*
- *Welcome you.*
- *Detailed checks. Feel everything is being done.*
- *Explain what will do before doing it. Good 2-way conversations.*
- *Very kind and respectful of age. There is appropriate communication in manner which is very positive.*
- *Doctor takes time to explain.*
- *Staff under pressure but always friendly etc.*
- *Always friendly.*
- *Sister very, very good.*
- *When I had my operation there was a mix up with my notes and the lady in charge of the day clinic sorted it out so that my operation was not cancelled. It was good.*
- *The girl who checks back of eye and gives eye drops is helpful. Gives a thorough check.*
- *They found us when we were lost in the hospital and pointed out the right way!*
- *Made to feel at ease e.g. they say, "won't be long".*
- *Ophthalmology staff do well: Do job perfectly. Take a lot of problems and handle it well.*
- *They look after me.*
- *Helpful Friendly.*
- *Professional*

Are there any changes to do with staffing that would improve your experience?

- *Feel sorry for children. Should be a special area. Staff do everything well considering push for time. Didn't like when eye test was in corridor*

- Ensuring more medical continuity and awareness of patient's medical history during the consultation given that there is a lot of information gathered over a long period.
- Wished at least once a year you would be able to see an ophthalmologist
- The splitting of appointments is not helpful.
- Opportunities for feedback or to express viewpoint is not always 100%.
- The only change would be the addition of more staff.
- When they come to call you to speak up.
- Privacy: didn't draw curtain sit in corridor to get eye drops. 3 people behind on telephones. Sign tells patients to be quiet because of eye tests but staff were on phones and making a noise. Ironic.
- Improve: when have Lucentis injection preliminary drops all done in corridor. I guess they don't want to move you about but feels a bit public.
- Car parking is abysmal
- Concerning being listened to: Need to talk to parent too.

Specific Clinics: Ophthalmology. Tell us what you think of:

The clinic environment?

Clinic environment

Comments:

- Waiting area not very nice.
- Could have markings on floor to help people with limited vision.
- A bit cramped worry about tripping over people's feet.

Have you received any support from the Eye care liaison officer that is jointly funded by RNIB and the hospital (WVT)?

Very few people recognised that they had been supported by the Eye Care Liaison Officer. Those that had were content with the service.

If yes, what did you think of this?

- Patient was unaware of Eye Care Liaison Officer despite there being a counter with a notice saying please visit me in the waiting room. My comment- People with vision problems may not see this and coming to an appointment may generate anxiety which detracts from scanning the environment.
- My comment, I did not notice the Eye care liaison desk until well into the session. I think the person behind the counter needs to come out and circulate and talk to people who are waiting.

What is good about the Ophthalmology Clinic service?

Comments were made about changing appointments easily, Quality of service, A&E and waiting times.

Changing appointments is easy

- If I can't do the date just ring up and change so all fine
- We were sent two appointments at two different times (elderly couple). We requested same time each month to suit us and they did. Very helpful.
- No complaints at all.

Waiting Times

- *Really good last time in and out before appointment time.*

A&E

- *Bought by ambulance very good.*

Quality of service

- *Everything's good, improvement goes on all of the time. Blind in the one eye so come annually to have steroid drops to avoid having a glass eye which I don't want.*

What could be improved?

Comments were made about the environment, Car parking, A&E, The NHS, Waiting times and transport, and information.

Environment

- *Come once a month Not a pleasant experience in mobile unit.*
- *Cup of coffee!*

A&E

- *It's a and e that needs to be improved. Waited too long and had to leave before being seen as due tablets.*

Car Parking

- *Understand the system first time - important to know how long it will be especially for car parking which is an absolute aberration. Against charges. Extortionate regular visitor it mounts up. Disabled users need to be close. Park somewhere else shouldn't have to go to supermarket feel guilty. If money to hospital would not mind so much.*
- *Car parks were full. I had to queue. Got ticket as said there were spaces but were not. Space too narrow for wheelchair to get out so had to pull out get out patient with chair then leave them and drive in. Was 3 or 4 minutes late. Frustrating. Reception were good about it though. Have not allowed space for wheelchair parking in clinic. You feel in the way or stuck out in corridors*
- *Used to be very good with disabled spaces rather have than Worcester though.*
- *Car parking must park close and worry if no space. Charges different queued to get in today. Very stressful if on your own. Charges extortionate. Gloucester don't pay for disabled parking.*
- *Car parking have to park close worry if no space. Charges different queued to get in today. Very stressful if on your own. Charges extortionate. Gloucester don't pay for disabled parking. Ophthalmology previous form submitted.*

Comments about NHS

- *More money in NHS so more staff.*
- *More money!*
- *Can't improve because so busy you have to be a patient patient nowadays*

Waiting times and transport

- *Administration re appointments. Had two tests in less than two months when it should be 6 months interval. Being sent to Bromyard when I live in Hereford is ridiculous.*
- *Had to wait 6 weeks. Grab bar etc border issues with Shropshire Hereford ring up here they are wonderful will rearrange. Only complaint is long wait and transport. Consultant come to Ludlow.*
- *All very good, just the waiting times need improvement. Understand as linked to a and e but still very long.*
- *Only improvement is quicker.*
- *Long wait times for eye operations.*
- *The length of time involved.*
- *Appointment at 2 should be on time.*
- *Everyone turned up at once why? All at 2.00 why?*
- *Difficult with moving car. Running late.*
- *Quicker?*

Information

- *Have come for a year have not seen specialist yet is that right?*
- *So many tests repeated*
- *Needs to have better information.*
- *Don't tell you that there is a secretary of doctor. I know as their parent so I know to ask for the secretary of the doctor but you are not told this.*

Are there alternatives to attending the clinic that you have experienced, would consider or would prefer?

Most patients said there were no alternatives, but a few said yes and made suggestions.

No

- *No. Face to face is better; the human touch.*
- *No because of the need to check eyes and use of equipment.*
- *No. Need to see the Consultant.*
- *Not that would be helpful to me.*
- *Not that I know of.*
- *No. Perhaps the chance to call so see if should get checked before appointment or sooner.*
- *No, easier to come here. Llandrindod not so good.*

Yes

- *An option to email might be useful. My child has lots of changing conditions so that would be good.*
- *Prefer local clinic.*
- *Locally.*

6.3 Ear Nose and Throat/ Head and Neck (ENT)

- Complex pathway using clinical nurse specialists, helpline service and different appointments using different hospitals - tertiary care (e.g. Worcester).
- Patient stories re tertiary care and not knowing who to call.
- Hospital wants to work on this pathway and customer experience would be useful.
- Telephone appointments are common so it would allow feedback about alternative methods to face to face appointments.

What is your experience of making an appointment?
 Was the wait to get an appointment reasonable?



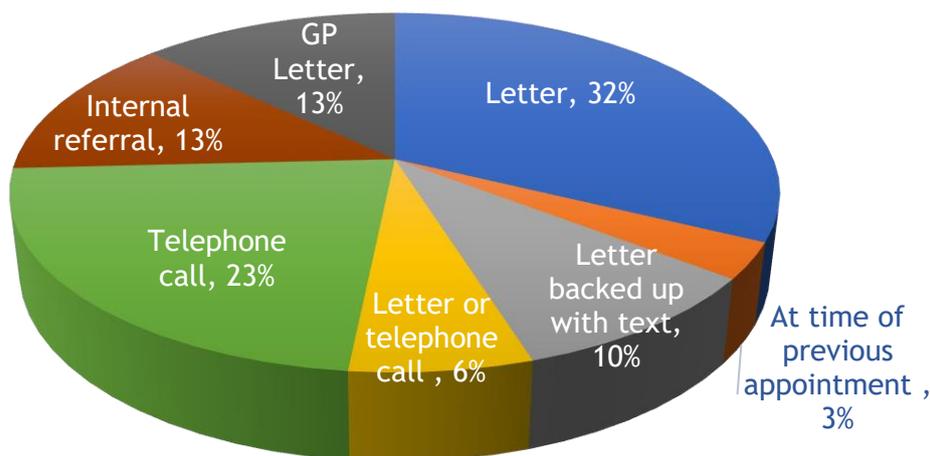
Up to 3 weeks wait was thought reasonable to gain an appointment. However, for regular and ongoing appointments 100% of the public felt 9 monthly or annual appointments were reasonable. A few commented that the period between appointments appeared to be lengthening. 100% thought 4-6months was unreasonable - this may be first appointments.

Comments

- *Lack of audiologists so, takes a time. Came a month ago. Ordered aids. Ordered second set took a time 6-8 months.*
- *I have 6 monthly appointments and have a few weeks' notice of them each time.*
- *I mostly use the drop in. I ring up for a hearing test and it is very quick.*
- *2 weeks reasonable 6 months not. Can't keep ringing up for cancellations when you work.*
- *Not too bad.*
- *For nowadays! Ok.*
- *Far too long.*
- *Not reasonable with hearing. Ledbury small clinic but don't have facilities.*
- *1st appointment was suffering a long time- six months got in touch and asked for a new appointment and got this one two weeks.*

How did you make the booking? (Mode of booking e.g. Telephone, letter, Internet?)

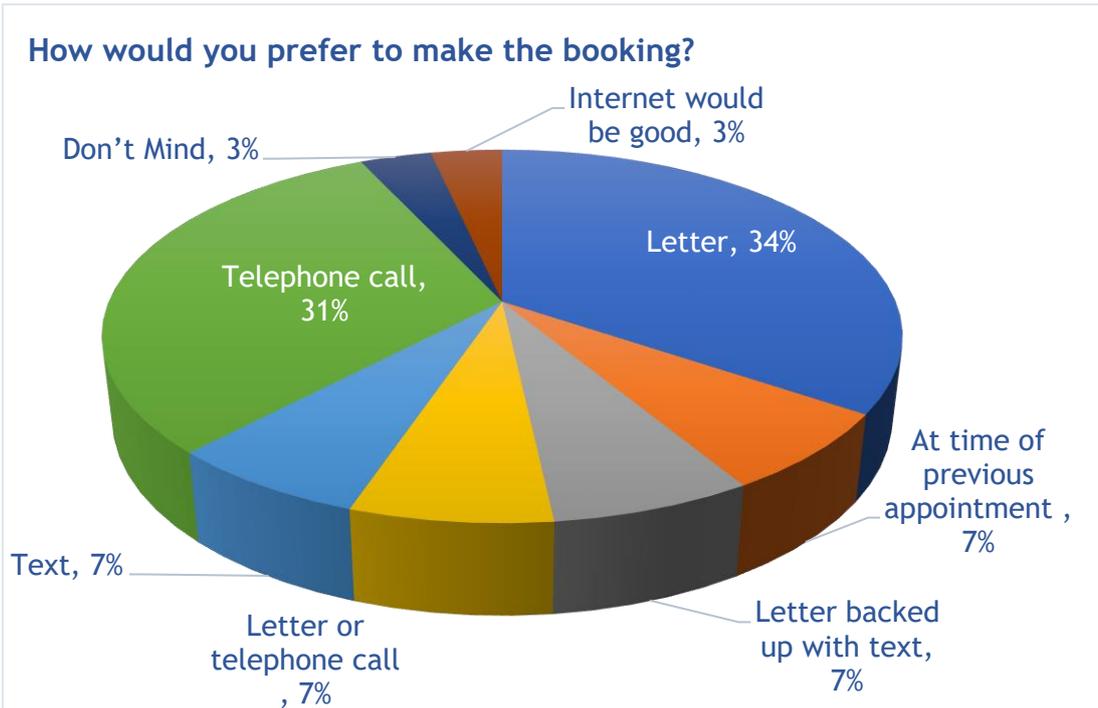
How did you make the booking? (Mode of booking eg. Telephone, letter, Internet).



Most patients made the booking by telephone (23%) or letter (32%), 6% by letter or telephone and 10% letter backed up with a text. 13% booked by an internal referral e.g. A&E or Stonebow and 13% by a GP letter referral.

How would you prefer to make the booking? (Preferred mode of booking?)

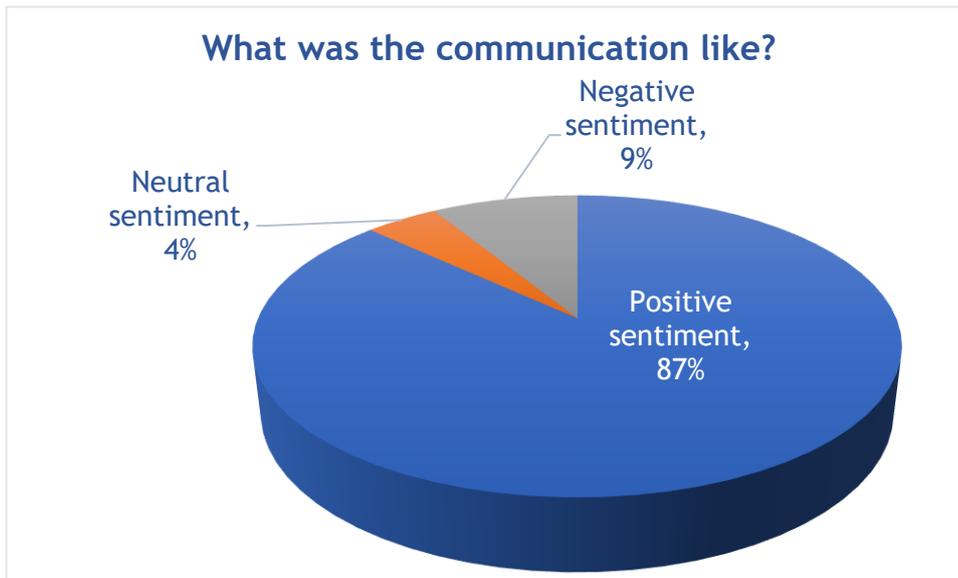
Patient preference was for letter (34%) or Telephone call (31%). 7% for letter/telephone and 7% a letter backed up with a text. 7% preferred to make booking at the time of their previous appointment and 3% preferred the idea of making Internet bookings. 3% said they did not mind.



Comments:

- Letter with text reminders a good idea.
- Dr made appointment
- Seen by nurse who booked them in.
- Referred internally. Took a month then cancelled which was a bit annoying. Made through Paediatrics.
- Arranged by nurse in charge of Strongbow unit
- Usually good. By telephone. And the walk in is good.
- Letter I can't text or do online.
- Prefer a letter or telephone call.
- Out at time so letter easiest. Could have missed message.
- Telephone. I would do email but am nervous of appointments online.
- Text too is a good idea.
- Fine as letter.
- Telephone or letter. No internet.
- Would be quite good if could do yourself over Internet.
- Prefer letter get text reminder a good idea.
- Best at time of previous appointment.
- Finds letter based booking the best medium.
- A faster method would be by phone rather than letter.
- The present method of communication often leads to multiple letters and some confusion.

What was the communication like?



87% of patients expressed a positive sentiment about communication.

Did you have enough information about your appointment? If no, what information would you have wished for at this stage?



97% of patients said that they had enough information about their appointments.

3% of patients wished for more information about their treatment.

Comment:

- *Easy.*
- *No problem.*
- *Its fine.*

How could the booking experience be improved? Comments:

Suggestions were made about electronic mode of contact, reception changes, information indicating treatment, timing and regarding checking patient condition prior to cancellations.

Mode of contact

- *Contact electronically.*

Information

- *Clear indication of treatment.*

Reception changes

- *Give receptionist back.*
- *Revert to old system.*
- *Expected a reception area or something to tell you what to do.*
- *Need reception in close proximity to ENT.*

Timing

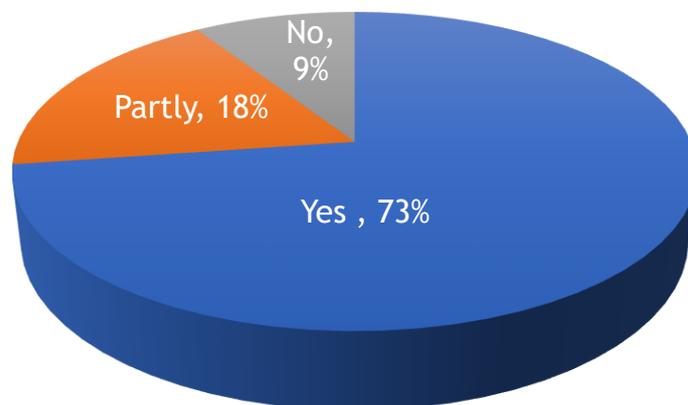
- *More immediate response.*
- *Appointment could be quicker.*

Check patient condition if cancellation necessary.

- *When cancel ring patient and ask if condition is getting worse or better.*

Do you have enough information to help you to care for yourself between appointments?

Information: Do you have enough information to help you to care for yourself between appointments? (*e.g. Medication, follow up treatment, whether you need to act for a referral, how and who to contact and in what circumstances).



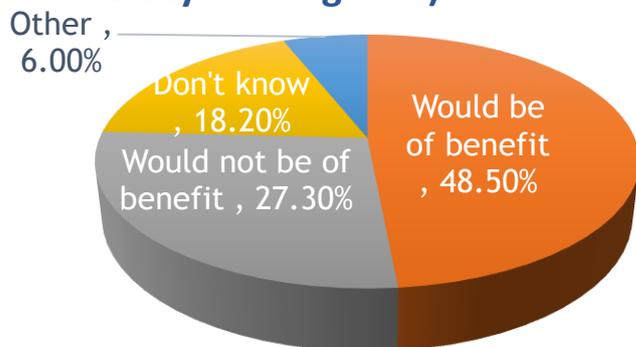
73% of people said that yes, they had enough information to help them to take care for themselves between appointments, 18% said partly and 9% said no.

Comments

- *Given advice on home treatment methods to avoid problems in future.*
- *Explanation of cause of delay in the booking system.*
- *If concern know where to get in touch.*
- *Don't affect.*
- *A bit more information on how to treat the condition.*
- *Have contact numbers*
- *Mainly dependent on staff at unit for info.*
- *The patient, although deaf has a good understanding of his needs.*
- *Everything explained clearly.*
- *Always feel can ring up ENT clinic.*
- *I know how to use oil though I don't use all the time.*

What are your views on automatic check in? (Like the screen that is in many GP surgeries).

What are your views on automatic check in? (Like the screen that is in many GP surgeries).



Most people (48.5%) felt that automatic check ins would be of benefit. 27.3% thought not.

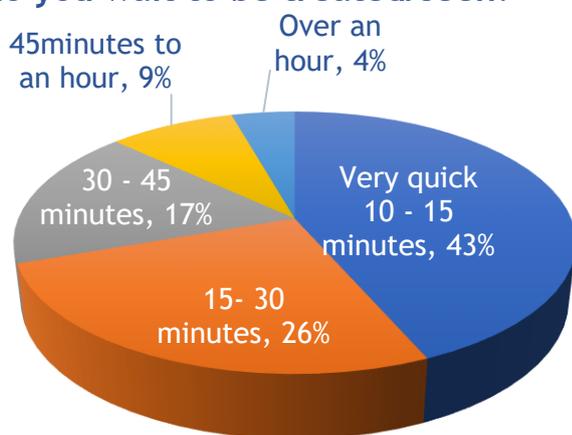
Comments - would be of benefit
• Yes, I'd use.
• If available.
• Would not phase me but might be difficult for others.
• Happy to use
• If working. If have questions it is good to have a person though.

Comments - would not be of benefit
• Not happy with screen-based systems.
• Prefer to speak to a person.
• Often need to ask additional questions
• Prefer a person.
• Prefer direct contact.
• Break down regularly

Once you have checked in at the clinic how long do you wait to be treated/seen?
When you come to the clinic how long do you usually wait to be seen?

43% are seen very quickly/ 10-15 minutes, 26% 15-30 minutes, 17% 30-45 minutes, 9% said 45 minutes to an hour and 4% over an hour.

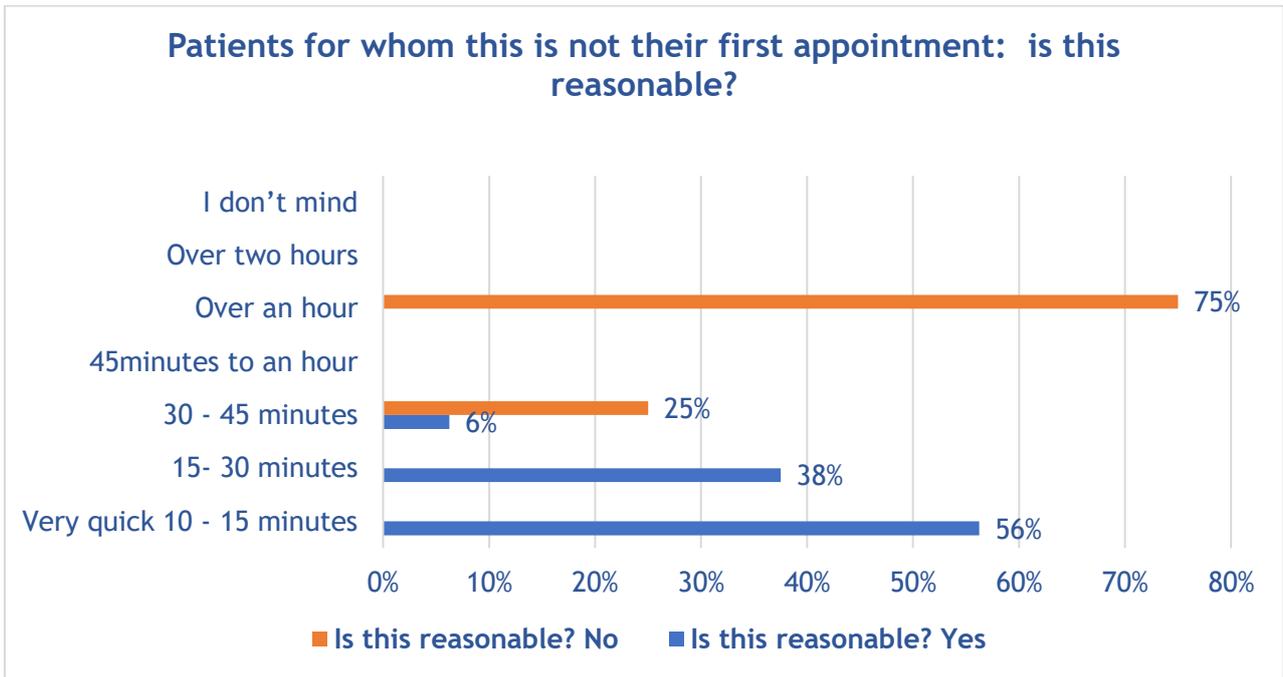
Once you have checked in at the clinic how long do you wait to be treated/seen?



Comments:

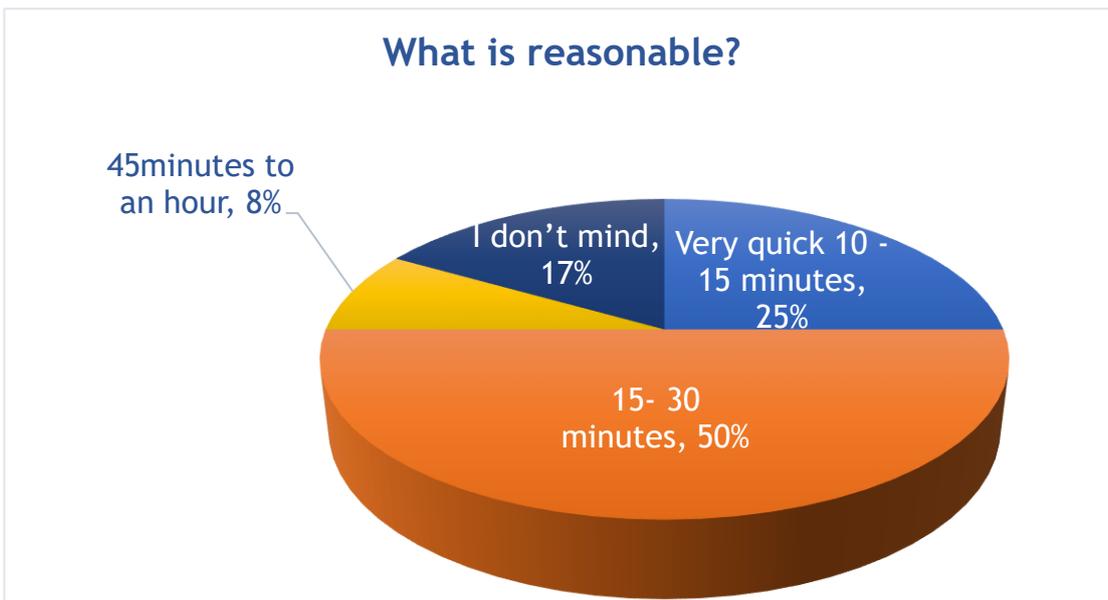
- Not normally made to wait too long.
- There was no delay in being seen
- Quick - they sometimes see me before my appointment time.
- Usually seen on demand.
- Usually seen within 10 minutes.
- 15-20 minutes.
- Up to 1 hour.

Is that a reasonable amount of time?



75% of the people who thought their wait was unreasonable had waited over an hour and 25% 30-45 minutes. 94% of people who thought their wait was reasonable had waited 30 minutes or less. 6% felt their wait was reasonable and had waited 30-45 minutes.

What is a reasonable amount of time in your view?



50% of people thought that once they had checked in a wait of 15-30 minutes was reasonable.

25% thought 10-15 minutes was reasonable. 8% said 45 minutes to an hour and 17% said they did not mind.

Comments:

About appointment time

- *A reasonable time to wait - half an hour.*
- *As long as it takes.*
- *I'm prepared to wait for drop-in - they are always very apologetic if you are kept waiting.*
- *Expect to be at appointment time.*
- *Expect small delays.*
- *It would be good if they could see you at the time of your appointment time. That would be good preferably*

About unexpected delays

- *I'd want to know if a delay is likely. That is important to me. Like today, I have to go in a few minutes if I am not seen. (At this point the patient prompted the staff and was told that they'd be seen very soon and they were just about to call him. 5 minutes later they did).*
- *It has to be quick because of work, I need to know how long it will be.*

About car parking

- *Much of the discontent with long waiting times is to do with the amount patient is having to pay for car parking.*
- *Difficulty when have parked for 2 hours and appointment takes longer.*
- *I need it to be no more than half an hour because of parking.*
- *Car parking is the issue. Worried will run out.*
- *Parking difficult.*

How are the staff? (Are staff friendly, professional, approachable, knowledgeable and caring)?

Do you have any comments about the reception staff, nurses, doctors?

Positive sentiment

- *Very happy with staff and service provided.*
- *All contacts were satisfactory.*
- *Been very good*
- *Very pleasant and good.*
- *Good so far.*
- *Very good very helpful.*
- *Yes, to all.*
- *All v friendly and helpful.*
- *Very good no problems with staff.*
- *Lovely helpful.*
- *Everyone very friendly and nice.*
- *Found everyone helpful.*
- *All staff seem to know their roles and are friendly and welcoming.*

- *Staff are very good. No problems at all.*
- *Fine no problems.*
- *Very friendly and helpful.*
- *All been very pleasant.*
- *All good.*
- *All been really good all nice.*
- *All staff helpful and thorough.*

Neutral sentiment

- *Never had any problems with staff.*
- *Nowhere to check in.*

Negative sentiment

- *Member of reception did not feel his request reasonable.*

In your appointment does the doctor/nurse explain everything, in a way that you understand?

Positive sentiment

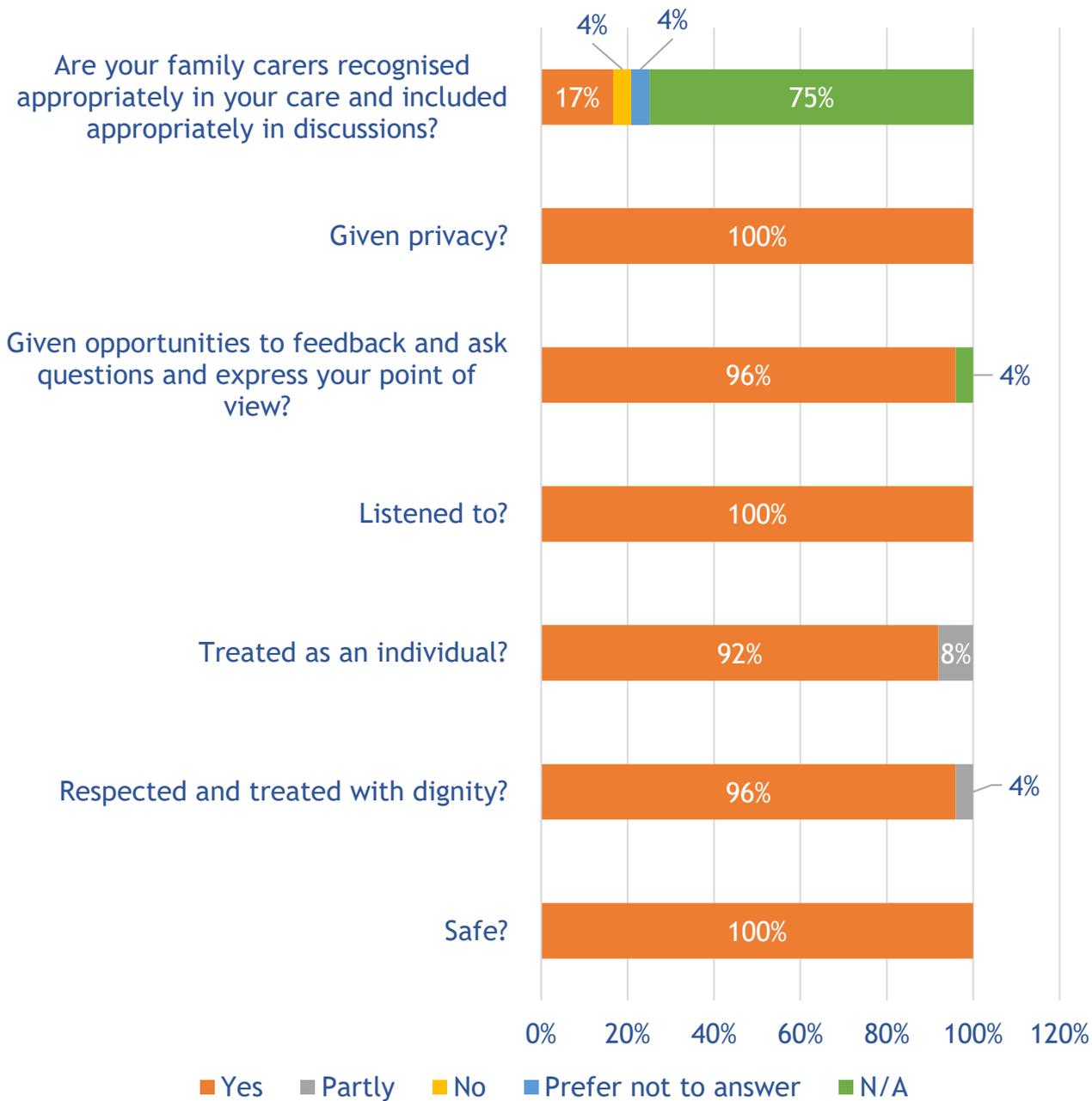
- *Very full explanation.*
- *A good explanation of treatment.*
- *Full explanation of hearing status.*
- *1st no 2nd time seen different consultant very good and explained everything.*
- *Yes (the patient lip reads).*
- *Nurse specialists run these clinics.*

Can you give an example of what staff do well?

- *Pretty clear precise.*
- *Listen and act on it.*
- *Audiologist initial hearing aid sorting out got spot on replacements v good.*
- *Let you know if running late. No improvement.*
- *Although deaf the patient comes to appointments alone. Staff do well in responding to crises quickly.*
- *Relatives not usually present Staff make patient feel at ease.*
- *Treatment carried out efficiently.*
- *Everything. Way they go about things - they know what I'm talking about and seem to be able to sort out ok.*
- *Have a 3-year check-up and given an hour. Good.*
- *Audiologist is very chatty and friendly.*
- *Gained advice about recovering my keyboard from a young nurse as I was distressed that I'd spilt my tea on my laptop keyboard!! Give advice. Chatty. Reception start to tell you where it is don't take for granted that you know or have been before. Very helpful. Always ask if you have any other worries. Encourage you to come back if you have any other concerns.*
- *A chat to you while they are working. When doing something they show humour. They do what they say they'll do.*
- *Communicate.*
- *Staff exhibited a great empathy with my condition.*

- Good communications. Nothing bad to report.
- Treatment provided was good and staff helpful.

Staff continued.... When you use this clinic do you feel you are:



Most patients felt safe (100%), respected and treated with dignity (96%), treated as an individual (92%), listened to (100%), given opportunities to feedback and ask questions and express their point of views (96%) and given privacy (100%). Of the patients that had carers 81% felt their family carers were recognised appropriately in discussions, 19% felt they were not.

Are there any changes to do with staffing that would improve your experience?

- *Improve on Worcester hospital strange bed did not sleep well.*
- *Very confusing have to make an appointment in another department.*
- *Soundproof room is different than real world. Do well try hardest. Need to test you with a bit of surrounding noise?*

Specific Clinics: Ear, Nose and throat, Head and Neck. Tell us what you think of:

The clinic environment?

Positive sentiment

- *Good x4.*
- *Clean.*
- *Fine x2.*
- *Brilliant.*
- *Nice. Close enough to talk to others when are waiting. Plenty of magazines.*
- *Fine x2.*

Neutral Sentiment

- *OK x4.*
- *Satisfactory.*
- *Same as any hospital.*
- *Not too bad.*
- *Alright.*
- *It is functional.*

Negative sentiment

- *Could do with painting.*
- *Check in at reception and not here now that has changed.*
- *Ok disappointing moved reception go back at end of queue.*
- *Ok all a bit on top of each other. Not child friendly.*
- *Could do with brightening a bit.*
- *Look at posters one is out of date.*
- *Could update the chairs they are not comfortable.*

Clinical nurse specialists?

Positive sentiment

- *Very good x3.*
- *Good x3.*
- *Knowledgeable.*
- *Once and they were good.*
- *In past. One I saw was very good.*

Negative sentiment

- *In past. One I saw was not so good. As I had to phone in and talk to secretary of consultant and never found out.*

Appointments at different hospitals?

Only one patient had experience of another hospital.

- *Worcester was expecting op in Hereford a further hour away had to have family take me a lot more difficult.*

What is good about the service?

Quality of service

- Always good and able resolve problems.
- Consistency is a good point in the service.
- Nurses prompt and give attention to detail.
- Found them very good. Usually very good only one incident ever when I needed to follow up. Usually told straight away.
- Find good all round. My wife is in and out too. They look after you. Make you feel comfortable.
- Functional for what I need
- Fairly professional.
- Thorough and complete service.
- Successful treatment.
- Effective x2
- All aspects.
- Good.

Staff attitude and skills

- Nothing is too much trouble.
- Friendliness and knowledge.
- Friendliness and knowledge.

Local - convenient

- 1/2 mile from home - convenient.
- Patient seems very content with coming to Hereford Hospital.

Speed of service

- Move on quick everyone working hard.
- How quickly get seen. X2
- Used to have a number system now have a system where told number of people in front of you. That is fine.
- I was seen early and had a good experience.

What could be improved?

Car parking

- Car parking prices.
- Live rurally difficult have to drive in most expensive. Parking

Speed of service

- Timings. Run on time.
- Turn around quick feel as if being processed.

Resources

- More staff.

Reception in ENT

- Changed as reception has gone - better with it here.
- Check in at reception and not here now that has changed.
- Don't have reception.
- Waiting procedure. The lack of information about where to wait and how patients are to be contacted, causes some confusion especially for first time users.
- Lack of information on what to do when you arrive in the waiting area.

Are there alternatives to attending the clinic that you have experienced, would consider or would prefer?

Most patients said there was no alternative to coming to the clinic but some made suggestions including home visits, using the Internet/ Skype or telephone, and ear wax removal in the local GP surgery.

No

- *No X5.*
- *None.*
- *Going private.*
- *Like coming here to get reassurance.*
- *None.*
- *n/a X3*
- *No alternative clinic to attend.*
- *Had an abscess at the dentist. At first, they tried to save tooth. Then said need to take out. Broke it off. I was sent to ASDA clinic. They looked at it and made an appointment for me at Gaol Street to have root taken out. This all wasted 2-3 weeks.*
- *Prefer to come here.*
- *See in person is best.*
- *Prefer to see someone.*
- *I am lucky to have started having regular treatment prior to GPs removing the service, so I am still getting my ears de-waxed in the hospital.*
- *The use of home-based treatment and commercial remedies has not worked.*

Yes

- *I've not thought about that. Would prefer a home visit. Have multiple conditions it would help if they could home visit.*
 - *Lives in Wales a long way just to speak re operation see you for 10 minutes would consider Skyping or telephone.*
 - *Wish they still cleared wax at GP. Waited a while one ear got wax every 3 or 4 months.*
 - *Can't book ahead so I had to go on a 9-month waiting list. If I pay it is £60 every 4 months. A lot of money and I don't have a lot. But if I don't, I feel I can't hear people and life is difficult.*
-
-

6.4 Trauma and Orthopaedic - Fracture Clinic and Radiology

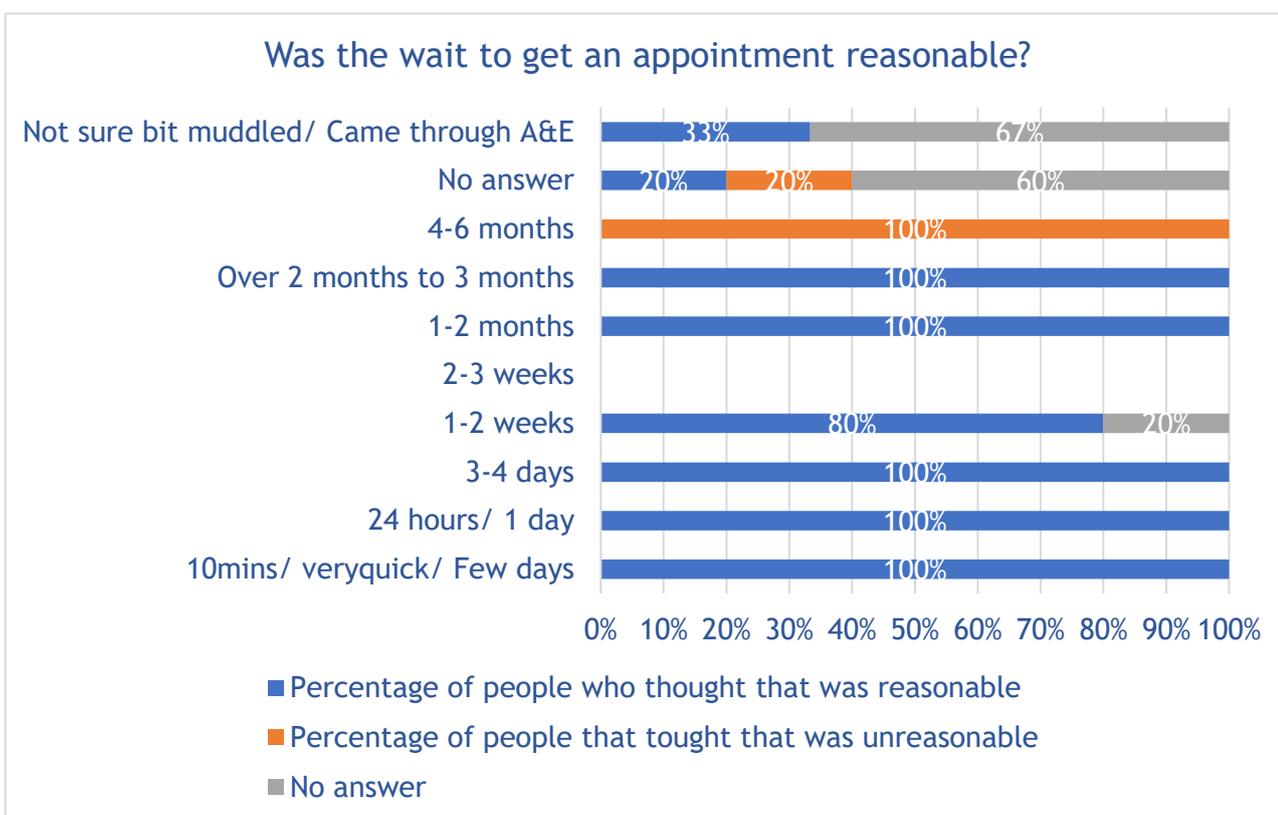
Linked clinics with a lot of travelling to and fro.

Often initiated by a trip to A&E so we are likely to gain intelligence re patient experience of A&E.

Patient stories re lack of information.

WVT would find it useful to know how patients feel about travelling between clinics and privacy and dignity.

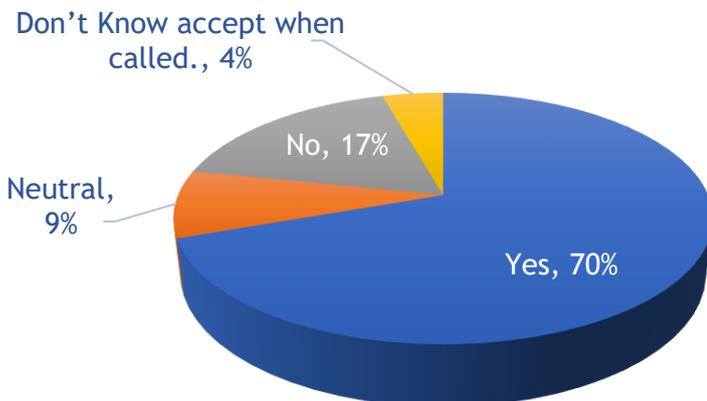
What is your experience of making an appointment?



Was the wait to get an appointment reasonable?

100% of people who waited up to 3-4 days or 1-3 months for an appointment thought it was a reasonable wait. 80% of those that waited 2 months thought it a reasonable wait. 100% of those that waited 4-6 months thought it unreasonable.

Was the wait to get an appointment reasonable?



Overall, 70% thought their wait time was reasonable 17% thought not.

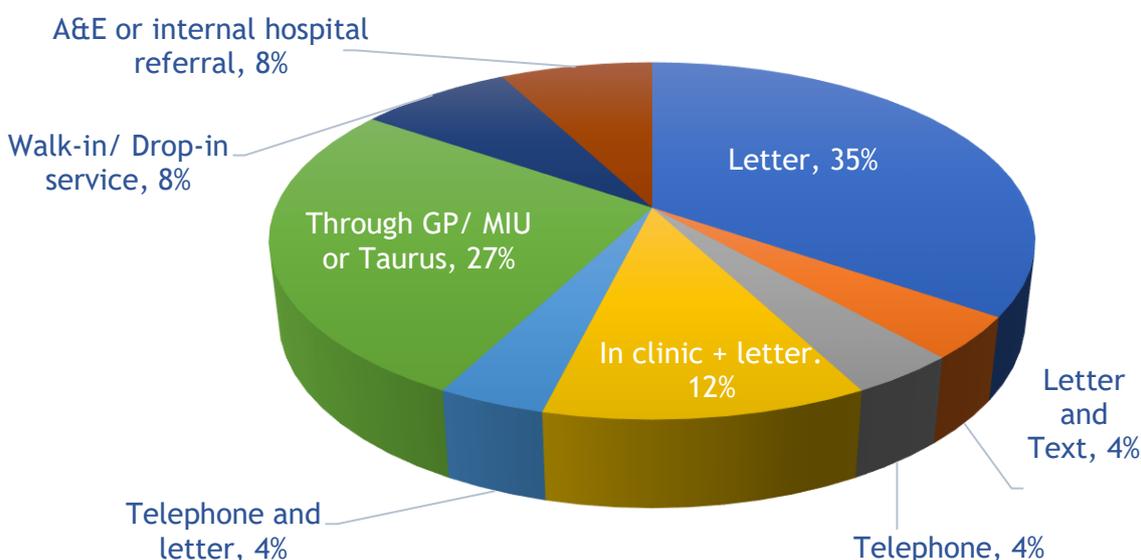
Comments:

- *Yep (reasonable) expecting longer.*
- *Don't mind they are experts.*

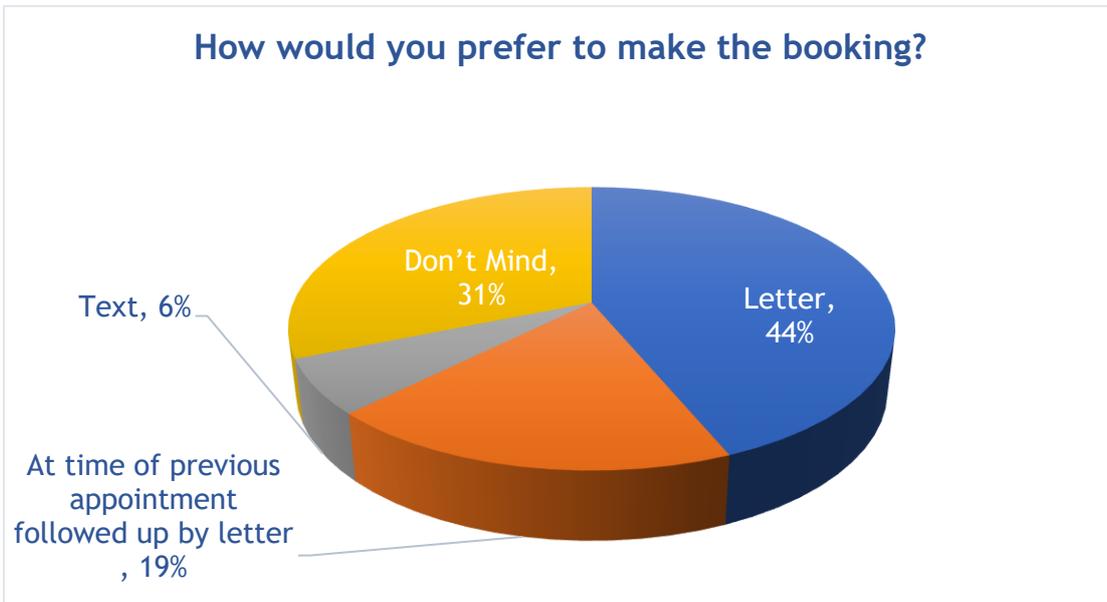
How did you make the booking? (Mode of booking e.g. Telephone, letter, Internet?)

35% made their booking by letter, 27% through GP/MIU or Taurus, 12% made it in the clinic followed by receiving a letter, 8% by an internal referral or A&E, 8% through the drop in, 4% by Letter and text and 4% by telephone.

How did you make the booking? (Mode of booking e.g. telephone, letter, Internet).

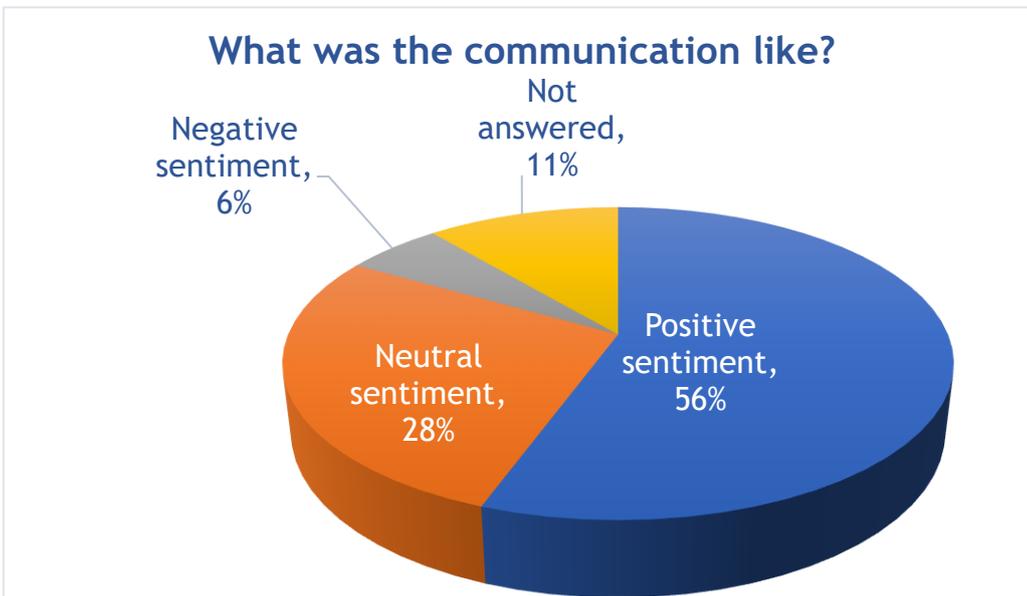


How would you prefer to make the booking? (Preferred mode of booking?)



44% of patients expressed a preference for making a booking by letter, 19% at time of previous appointment followed up by letter and 6% preferred a text. 31% Did not mind what method.

What was the communication like?



56% expressed a positive sentiment about communication, 28% a neutral sentiment and 6% a negative sentiment.

Did you have enough information about your appointment?

100% of patients said that they had enough information about their appointment.

If no, what information would you have wished for at this stage?

N/A

How could the booking experience be improved?

Online booking/ Self booking.

- Easier to have done it myself online.

Speed of service

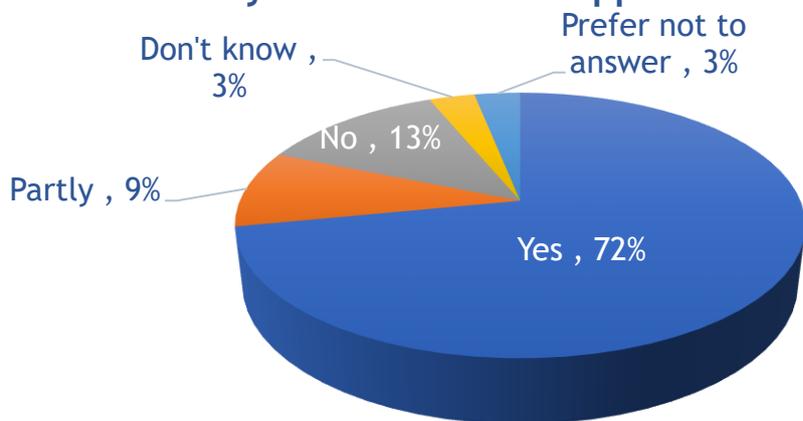
- Quicker X 2

Consider speed of post

- When they send letters second class. Changed appointment and the letter they sent arrived after the date of the new appointment they set. And then they get cross if you don't turn up.

Do you have enough information to help you to care for yourself between appointments?

Do you have enough information to help you to care for yourself between appointments?



72% of people said that they had enough information to help them to care for themselves between appointments. 9% said partly and 13% said no.

Comments
Positive

sentiment

- Have a number could call.
- Would use local doctor.
- Know where to go have to ring at 8 in morning appointments gone very frustrating.
- Almost overdone. Have number to call.
- Was a phone number.
- Will see a Doctor after the X-Ray results are completed.
- We're given explanation sheet about what to do and what not to do and given a number to call.
- Have a number to call.
- Radiology I know who to call.
- Given booklets. Do get info. Didn't want to read because of shock.
- Worry re conflicting medication. Pharmacist good. Chave and Jackson's.

Neutral sentiment

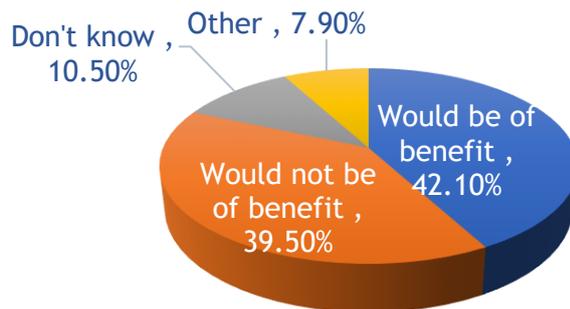
- No number but ok.
- Can always call 111.

Negative sentiment

- *Just got sent home to come back today to see Doctor.*
- *Try to explain but when in pain not helpful.*
- *Too long.*
- *I was advised to limit physical work, but my daily work depends on physical work, so will prove a problem.*
- *Not had X-Ray. Would have hoped to have had more information from GP.*
- *Radiology It is not so easy to get in contact if you need something in between.*
- *Apart from 111 nobody to call. Has multiple conditions worry if get infection. Felt had to make a fuss to get help. Had acute kidney failure and then cancer. 24 hr number but don't like to call that one. Don't want to make nuisance but don't want to miss something.*

What are your views on automatic check in? (Like the screen that is in many GP surgeries).

What are your views on automatic check in? (Like the screen that is in many GP surgeries).



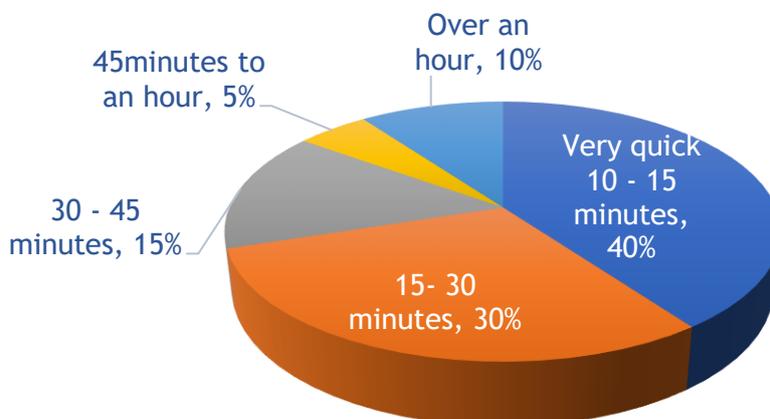
42% said an automatic check-in would be of benefit and 40% said it would not, 11% did not know.

Once you have checked in at the clinic how long do you wait to be

treated/seen?

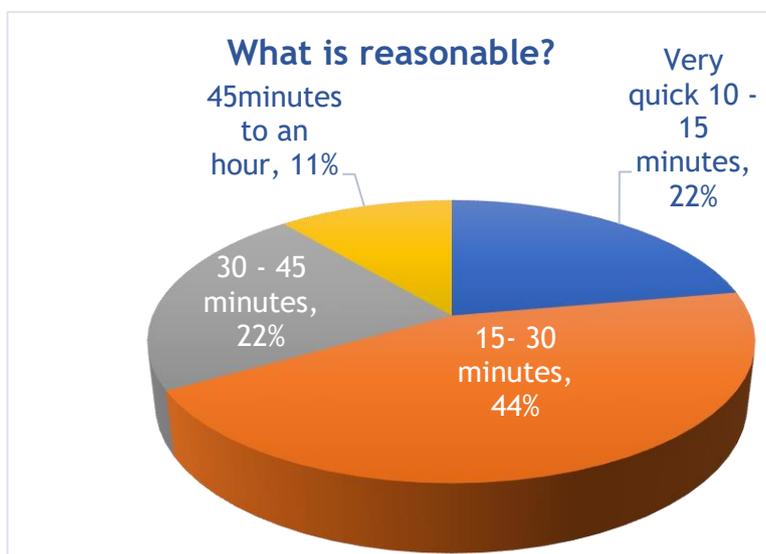
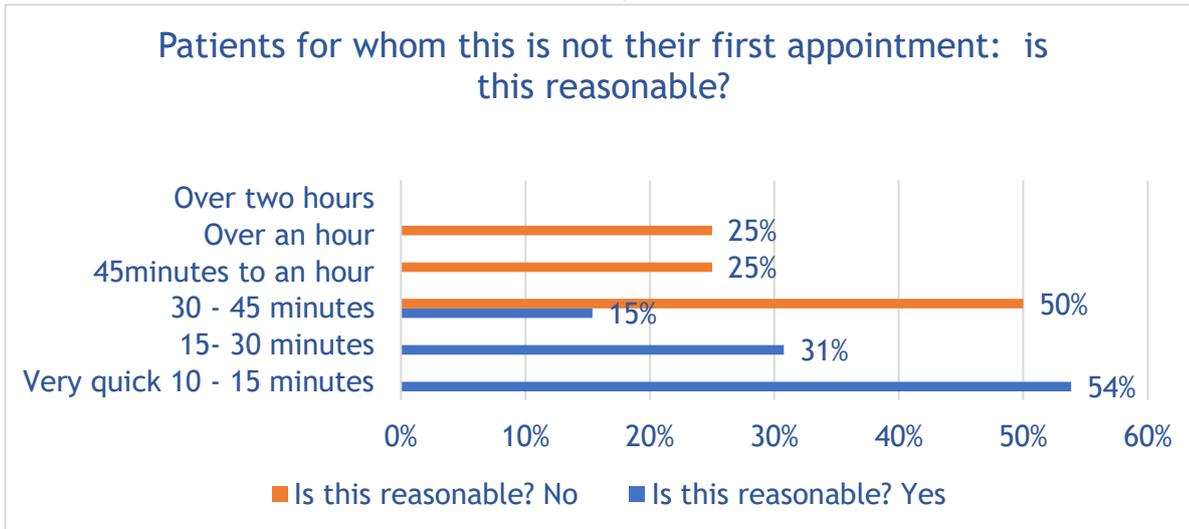
When you come to the clinic how long do you usually wait to be seen?

Once you have checked in at the clinic how long do you wait to be treated/seen?



40% of patients said that once they have been checked in the wait was very quick (10-15 minutes), 30% said 15-30 minutes 5% 45minutes to an hour and 10% over an hour.

What is a reasonable amount of time in your view?



Of those that felt their wait was reasonable 54% had waited 10-15 minutes, 31% 15-30 minutes and 15% 30-45 minutes.

Of those that felt their wait was unreasonable 50% had waited 30-45 minutes, 25% had waited 45 minutes to an hour and 25% for over 2 hours.

Overall, 22% thought 10-15 minutes was reasonable, 44% thought 15-30 minutes, 22% thought 30-45 minutes and 11% thought 45 minutes to an hour was reasonable.

How are the staff? (Are staff friendly, professional, approachable, knowledgeable and caring)?

Do you have any comments about the reception staff, the nurses, the doctors or other staff?

Comments

- All very good Mr Bissau an excellent guy all very good op at Nuffield was brilliant.
- All very helpful
- the overall staff performance is good.
- Have not had my X-Ray yet so cannot comment on other staff
- Had not yet received X-Ray, therefore not able to comment on other staff.
- Quite pleasant. Also, as an inpatient staff are alright.
- All very pleasant.
- Very nice. I was just saying how lovely they have been.
- Previously they were all fine.
- All fine - good. Radiology:
- Very good
- Mr Evans made sure everything was ok
- All good
- Very friendly
- All helpful professional and friendly
- Great but the problem is a lack of
- V good v friendly never come across obnoxious ones
- Great but the problem is a lack of
- Great
- All fine
- All staff fantastic
- Staff here are ok
- All staff very nice
- Alright lovely
- Always very helpful
- Great people very nice.

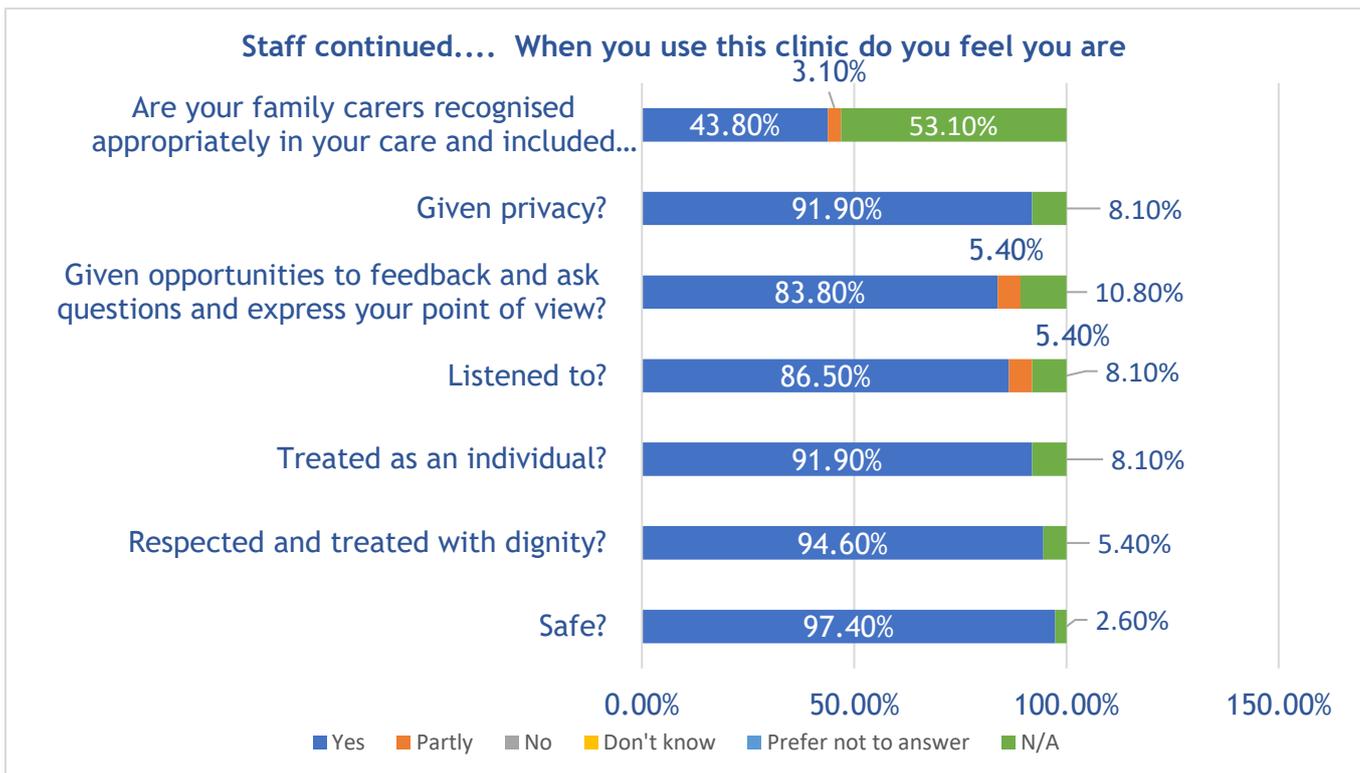
In your appointment does the doctor/nurse explain everything, in a way that you understand?



94% of people felt that the doctor or nurse explain everything in a way that they understand.

Comments

- Only tell parts.
- Hopefully haven't been in.
- Always X 2
- Drugs a bit out of it but ok.
- Visit via a referral.
- My doctor is quite pleasant.



Most patients (84-97%) feel that they are given privacy, given opportunities to feedback and ask questions and express their point of view, are listened to, treated as an individual, respected and treated with dignity and are safe. Of those that have carers 93% felt that their family carers were recognised and involved appropriately in their care and included in their appointments and 7% felt partly involved.

Can you give an example of what staff do well?

- Always ask if it's okay to come in.
- They do their jobs with pride.
- Good bedside manner.
- They do the best they can, they're fab.
- Ask if you have any concerns. Come up and tell you about where water is. Apologise for keeping you waiting. Nothing more they can do.
- NHS is great.
- Friendly and communicative. Receptive to questions.
- Giddiness not safe but use wheelchair. All very welcoming and that is the main thing all very pleasant and polite. A notice at reception about respecting confidentiality.
- Consultant very thorough and listened well Consultant came to ward and said hello I have immense faith and trust in her. Important to see the same one. But other ok too no do everything well. Even 111 and Taurus listen and see us when confused. Fred Bulmer infusion very good too iron infusion went out of way to get me a sandwich.
- Greet you well, nice smile, positive process. Information will tell you what is going on, where to sit. You know they know you are here.
- Treat as person. Wellbeing comes first.
- In real terms the staff are good.

- *Good at their job. (Bulgarian translator accompanied patient to translate). All positive re staff attitude and treatment of patient and translator.*
- *Mostly involve carer and don't leave out and explain well mostly.*
- *Everything is good. Greet well, the move along, keeping informed what is happening, everything. No changes I can think of to improve it.*
- *People try to understand me as I'm from Poland. They don't give up. Quick and efficient.*
- *In general, the system was quick when I had a heart attack.*
- *Radiology: They are calm and efficient. Quietly do one thing at a time and explain it as they go.*
- *Radiology: Make me feel at ease, don't feel nervous. Very chirpy which makes you feel better.*
- *Radiology Efficient.*
- *Radiology: Staff always friendly and helpful.*
- *Radiology: Calm me down. Stop me worrying.*
- *Made sure that I felt I had fully understood.*
- *Good.*
- *The staff are very professional*
- *Staff very professional.*
- *Talk and comfort. Listen to what I have to say.*

Are there any changes to do with staffing that would improve your experience?

- *Ignored some parts of what's wrong. Speak too quickly.*
- *Need more staff.*
- *Improve with more staff.*
- *More staff but obviously depends on funding.*
- *Coffee nearer.*
- *Concerned was maximum pain killers. (Strength not enough).*
- *Re carer involvement sometimes don't realise patient does not understand and need to talk to both of us.*
- *Only communication you have is when you go in. They don't talk to you personally. Just say turn, move. A bit of a chat would be good. How are you? Did you come far?*
- *Radiology Improve: I did find walking out of room in dressing gown in corridor not so good. But good to be with other people I suppose as quite scary.*
- *Radiology: Could shout a bit louder when calling you in.*
- *Was in hospital (heart attack). Felt that they were a bit impatient. Sent home too quickly. Could not cope so sent back. Difficulty with discharge too.*
- *Car parking still pay with a blue badge.*
- *Park and drop is bad - cars empty - they are parked there. Could do with someone organising them. V taxing at that time.*

Specific Clinics: Trauma and Orthopaedic - Fracture clinic and Radiology.

The clinic environment?

Positive sentiment

- *It is ok it is clean see cleaners coming in very good.*
- *Clean, plenty of space, water, things to read. Good.*
- *Quite nice - airy.*

- Good X 4
- Good; it's clean
- Clean
- Warm which is good. Staff are always friendly and sometimes make me laugh
- Fine X 3
- Good X 4
- Radiology Very good.

Neutral sentiment

- It is ok it is clean see cleaners coming in very good.
- Clean, plenty of space, water, things to read. Good.
- Radiology: Signage good. Clean. Arrows help.
- Fine
- Radiology: It's alright - good condition.
- Quite nice - airy.
- Clean.
- Warm which is good. Staff are always friendly and sometimes make me laugh.
- Fine X2

- Good; it's clean.
- Radiology Fine
- Radiology Very good
- Radiology: Signage good. Clean. Arrows help.
- Radiology: It's alright - good condition.
- Radiology Fine.

Negative sentiment

- Busy.
- Stuffy cramped.
- Busy a bit crowded.
- Bit cramped. Not as clean as could be.
- Below average. Feels unclean. Old building. Acceptance in Britain.
- Seating not good. Seats too close together for injuries.

Travelling to and from fracture clinic and radiology?

Positive sentiment

- Good.
- Easy X 4.
- Excellent.
- Radiology: Fine.
- Radiology: For me, no problem.
- Easy to navigate.
- Easy to find.
- Easy to get to.
- Good location.
- Fine.

Neutral sentiment

- Ok X 3.
- Alright.
- In a wheelchair.
- Radiology: Need the wheelchair to go back and forth but ok.

Negative sentiment

- Can be difficult travelling to vascular upstairs especially if lifts not working. Happened a couple of times stairs difficult.
- Quite a distance X 1, Significant distance X 2, Too far X 2
- Radiology: Forever being lost.
- Very long wait first time I came on a frame. It was painful. Someone did say are you managing when I first came.

What is good about the service?

All good

- *Smashing. Nothing to improve. All good.*
- *Radiology - always busy but fine.*
- *Radiology: Very good.*
- *Excellent.*
- *Nothing. Happy as is.*
- *No problems.*
- *Ok X 2*

Free and available

- *It's free X 2.*
- *Availability.*

Drop in service

- *Drop in service is good X2.*
- *Availability.*

Waiting times

- *Don't wait long.*
- *Radiology: Quick for me.*
- *Prompt after X-Ray.*

Staff

- *Excellent the way guided through received so smoothly excellent. All a plus.*
- *Radiology Friendly and helpful.*
- *Radiology: Best is help you get. I got lost when I first came. Nurse took me to where I needed to be.*
- *Staff are good X 2*

Environment

- *All very nice and scrupulously clean toilets nice.*

Service quality.

- *Provides a good service X 3*
- *Professional, nothing to improve.*
- *Excellent overall been really good.*
- *Helps me.*
- *Under one roof.*
- *Runs pretty smoothly.*
- *Clinic service was good X 2*
- *Good Wards swapped wards.*
- *Hospital transport really good.*

Information

- *A lot of information is good told where to go etc.*
- *Radiology Seems very efficient, everything clicks in well. You get a letter -recorded on computer - someone calls you - it works well.*
- *Radiology: All information I needed.*

What could be improved?

Privacy

- *More privacy.*

Car parking

- *Awkward to get in and out at night. KFC entrance.*
- *Parking is expensive. / Car park cost too high.*
- *Improve the car park. Could not get parking space. More disabled parking space always full v difficult. Resort to parking in Lidl for 2 hours.*

Waiting times

- *Waiting times X4.*
- *Waiting times. Nightmare to get here driving. Not enough seats with arms for people to get up from.*
- *Limit delays.*
- *Delays at X-Ray X 4*
- *Delays to attend X-Ray. The time delay experienced when being sent to X-Ray from the fracture clinic can be considerable.*

Lifts

- *Keep lift running. Planning for mobility issues. For individual patients.*

Seating

- *Seating. Assigned seats. Can't hear name at one end.*
- *More space*

Information

- *The general public are either unaware of the drop-in service or it is only available when referred.*

Resources

- *More NHS staff.*
- *Not enough staff for the number of people.*
- *Radiology: More money for workers.*

Communication

- *Radiology: Communication. Stamps sometimes need to use first class.*

GP issues

- *Communication between GP and hospital. Expo injection asked to do self. Did not want to GP's would not do. District nurses would not believe it. In end get district.*
- *GP phone transfer between prescription and surgery at Nunwell not possible seems ridiculous.*

Hospital Entrance

- *One time I came, and the front desk was selling stuff, there was music, a collection going on, the cafe and shop. As an entrance it was just very noisy and confusing when you arrive. Would be ok if you are fine but if you are unwell and have mobility issues it is too congested and scary with an injury. When in pain it did not give a good impression. And very noisy. The emergency entrance is fine though. I was up at 4 O'clock it's been a long day... local clinics would be good.*

Service quality

- *Stronger painkillers are needed. Paracetamol not strong enough. Person supports lots of people coming here - Bulgarian language. Witnessed somebody with kidney pain in agony crying. Bulgaria seems to use stronger pain killers.*

Are there alternatives to attending the clinic that you have experienced, would consider or would prefer?

Most patients said no but a few suggestions were made.

No

- No x 8
- Radiology All I need involves seeing me personally at hospital, I think.
- Come here and get it sorted.
- Phone call.
- Opportunities to check in in between phone calls would be acceptable.
- Radiology No alternatives

Yes

- Going to own Doctor
- Would rather come in
- Prefer 1:1 communication plus surgery good.
- Possibly attending MIU X 4
- Depends on problem. If could be solved on skype a very good system.
- Telephone consultation would be acceptable sometimes.
- Radiology: I might consider Skype or email for results.
90 miles round journey is not great. Llandrindod hospital is just 9 miles from me.
Also, would not be as expensive. Taxi cost £90 first time, after £45. Today I shared for £25. I think what they do here could be done in a local clinic. I'm in my 80's I had to get up at 4o'clock a.m. to get here. I'm very tired.
- Radiology Have used private before.
- Would prefer to go to Leominster.

6.5 Urology and Rheumatology.

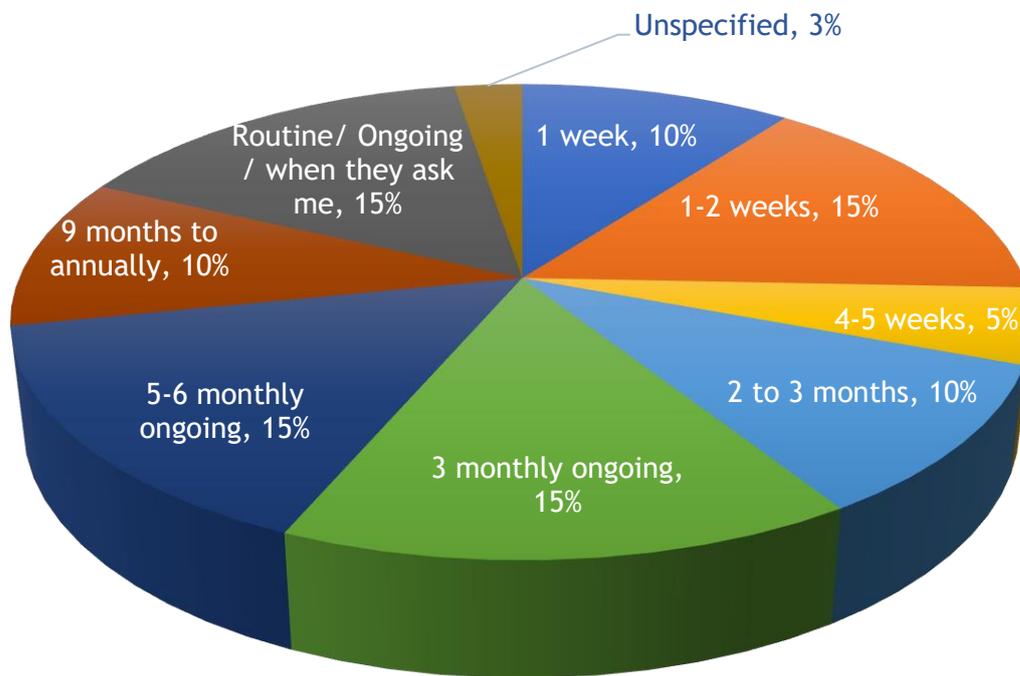
- New 1 stop clinic - scan + Consultant + scope to diagnose.
- Patient stories re long waits rheumatology.
- WVT would like feedback about a new service.

Most of the patients we spoke to had come to Urology or Rheumatology with a few patients in the clinic for other reasons including cancer and the sleep clinic.

What is your experience of making an appointment?

Was the wait to get an appointment reasonable?

Appointment waiting times

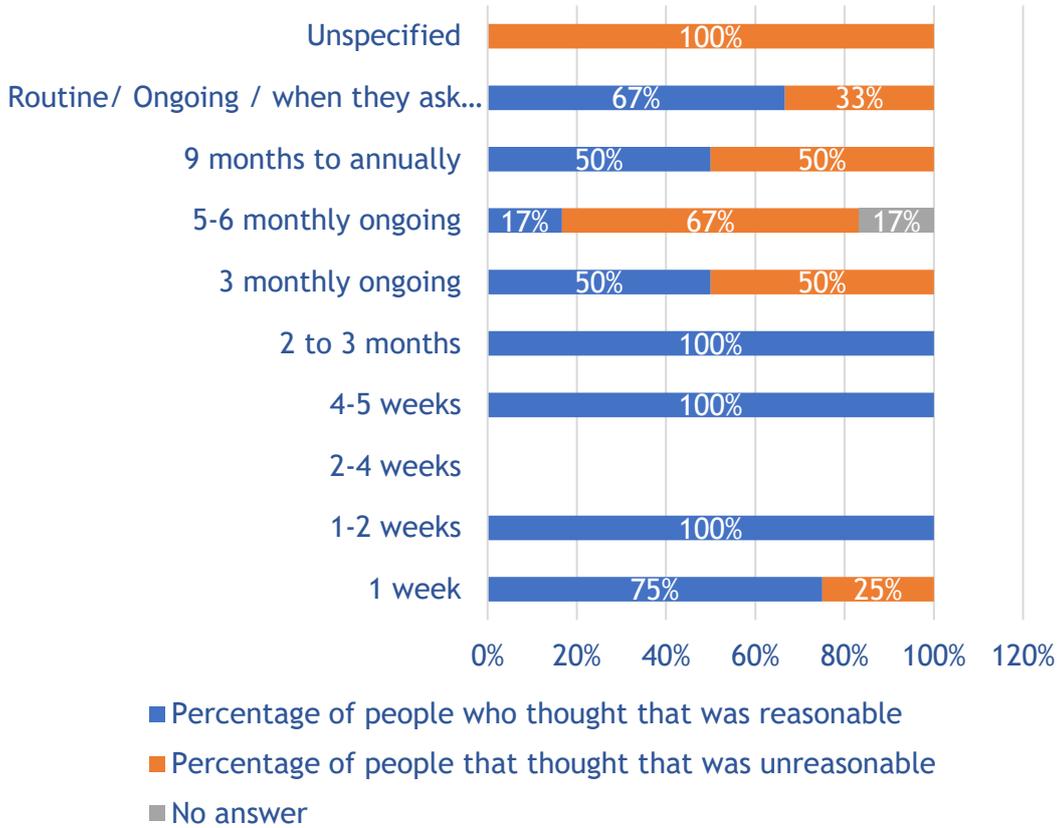


Patients had waited from 1 week to 9 months for an appointment with 15% having routine or ongoing appointments.

Comments

- No booked quicker private one interim.
- Far too long
- Not bothered
- Bit too long
- Considering stretched as good as can at moment.
- Seems long when in pain.
- Not reasonable a couple of months would be reasonable.
- Rang and got appointment straight away so good.

Was the wait to get an appointment reasonable?



75% thought it reasonable to wait a week for an appointment.

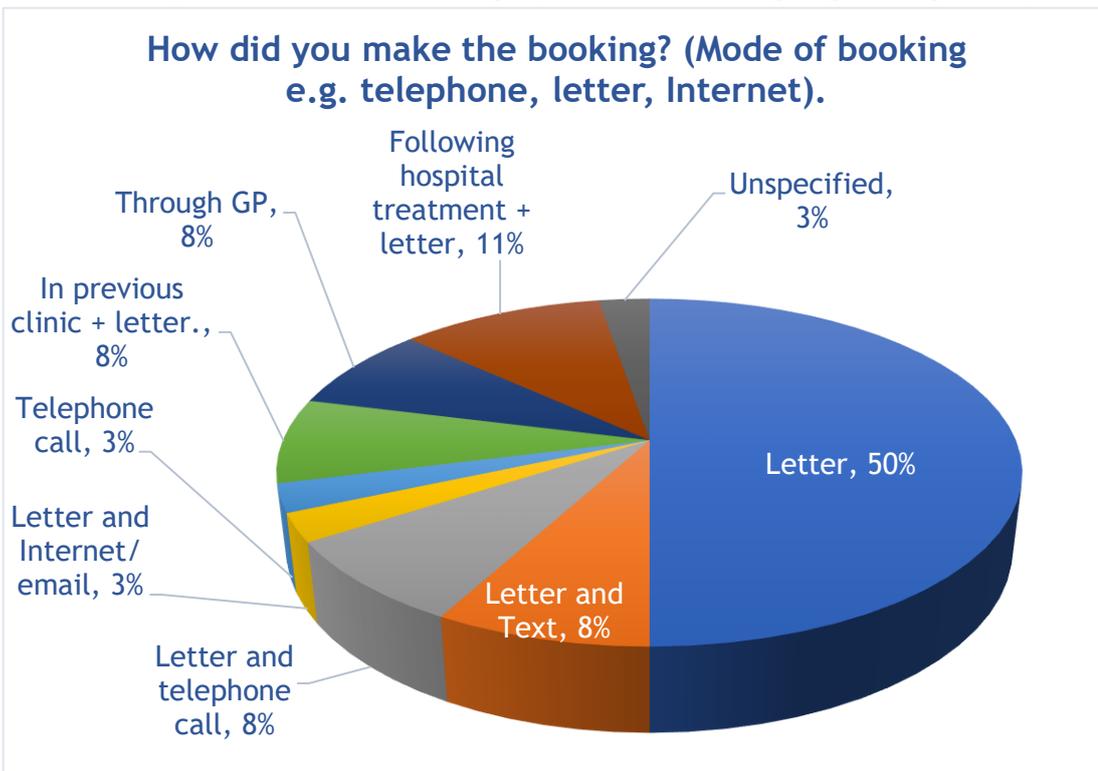
100% of people that waited 1-5 weeks thought their waits reasonable.

50%, 17%, and 50% respectively of those with 3 monthly, 5-6 monthly 9 monthly to annual ongoing appointments thought waits were reasonable.

67% of people with all other routine appointments thought waits were reasonable.

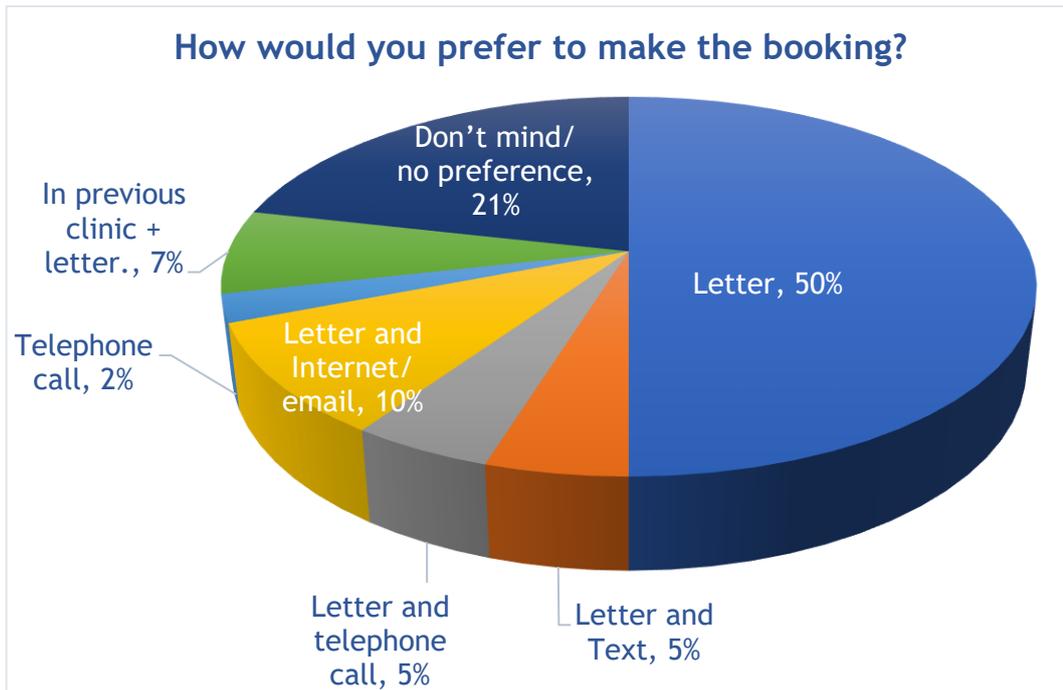
67% of people with ongoing 5-6 monthly appointments, 50% of ongoing 3 monthly appointments, 50% of 9 months to annual regular ongoing appointments and 33% of all other routine/ ongoing appointments thought the waits were unreasonable.

How did you make the booking? (Mode of booking e.g. Telephone, letter, Internet?)



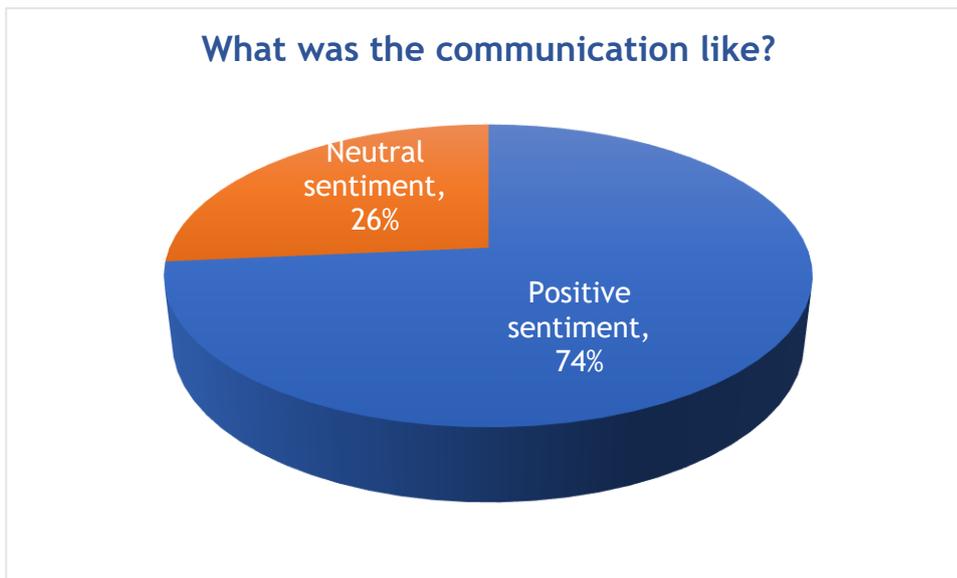
50% of people received a letter informing them of their booking, 8% letter and text, 8% in previous clinic and letter to follow, 11% following a hospital treatment with a letter, 8% through their GP, 3% by telephone call and 3% Letter and email.

How would you prefer to make the booking? (Preferred mode of booking?)



50% prefer a letter, 10% Letter and email, 5% letter and phone call, 5% letter and text, 7% in previous clinic with a letter. 21% don't mind and have no preference.

What was the communication like?



74% expressed a positive sentiment about communication and 26% were neutral.

Comments

- *Better than it used to be, used to say something about colour coding and didn't understand it.*

Did you have enough information about your appointment?



89% of people said yes, they had enough information about their appointment, 11% said no.

Comments

- *Given a leaflet on my problem.*
- *Available if want it.*

If no, what information would you have wished for at this stage?

Comments

Correct information

- *I received 2 conflicting letters.*
- *Yes, but then appointment got changed system went down.*

Clearer directions

- *Got a bit lost.*

Purpose of appointment

- *Correct information. I did not have all the tests done which it said would be done.*
- *To know the purpose of the appointment. Patient did not know the purpose of their follow up appointment.*
- *I did not know that I would be seeing the doctor after my flow test.*

How could the booking experience be improved?

Information in communications

- *letter clarity*
- *Needs to be accurate and consistent.*
- *Information printed or links would be good. General information about condition.*

Booking changes

- *Original booking as have had to wait around for 2 hours.*

Worcester

- *When called Worcester bowel screening there was no answer machine. That was not good.*

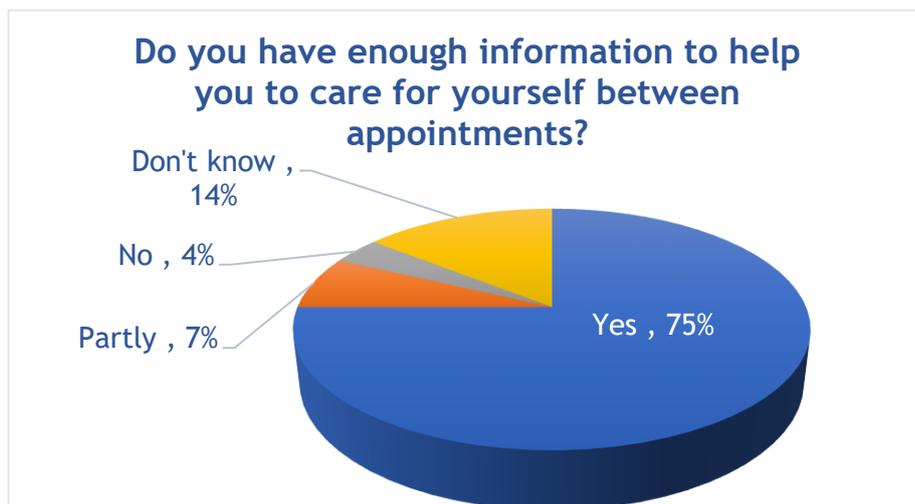
Electronic bookings

- *Having a way to check if and when appointment has been made.*
- *Book electronically.*
- *No but mobile phone reminder would be very acceptable*
- *Over 12 months seems too long and then don't see same person no continuity being given*

Appointment speed

- *2- 3 month's wait would have been more acceptable.*

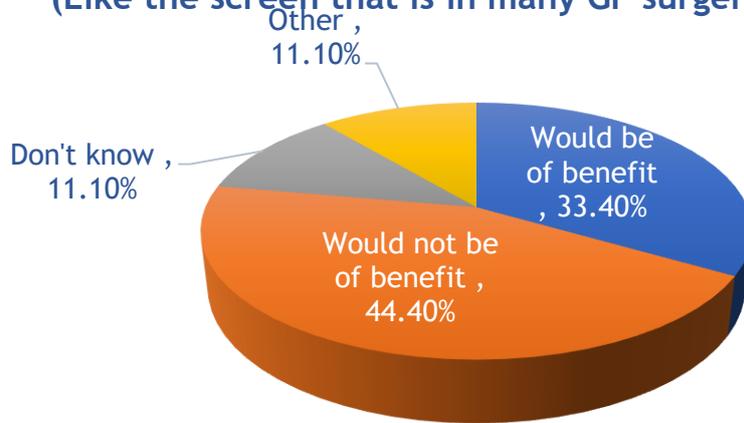
Do you have enough information to help you to care for yourself between appointments?



75% of people said that they had enough information to help them between appointments, 7% said partly and 4% said no. 14% said that they didn't know if they had enough information.

What are your views on automatic check in? (Like the screen that is in many GP surgeries).

What are your views on automatic check in?
(Like the screen that is in many GP surgeries).



44% of people said that an automatic check in would not be of benefit, 33% said it would be of benefit.

Would be of benefit

- Good method.
- Good system at GP works well.
- Happy to use.
- Happy with screen method.
- If it helps staff, no difference to me.
- Possibly.
- Use at the GP and is fine - easier.
- But would depend on the number people waiting to use the screen.

Would not be of benefit

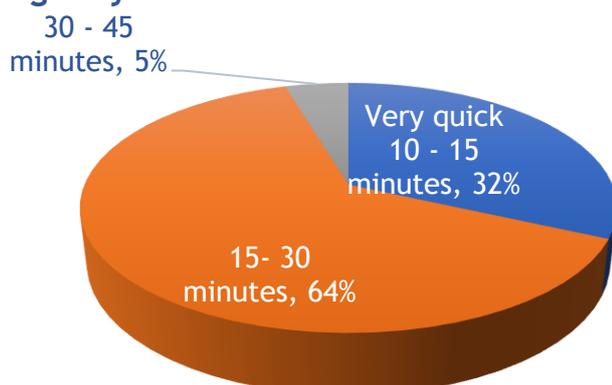
- Can go wrong.
- Not personal.
- Prefer receptionist.
- Preference to talk to a person.
- Would not use.
- It is helpful to have someone to speak to.
- Receptionist good.
- Automatic check in works well at doctors but, at OPD details have to be checked.

Don't know

- Can use them but don't have opinion.
- Personally, not bothered; might lead to some staff savings.
- Don't mind.

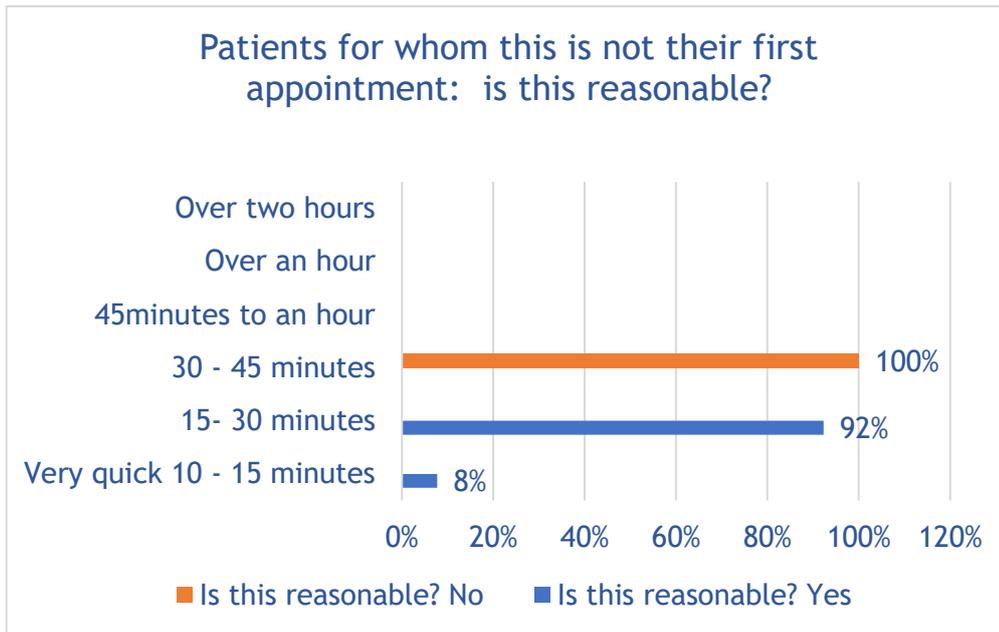
Once you have checked in at the clinic how long do you wait to be treated/seen?
When you come to the clinic how long do you usually wait to be seen?

Once you have checked in at the clinic how long do you wait to be treated/seen?



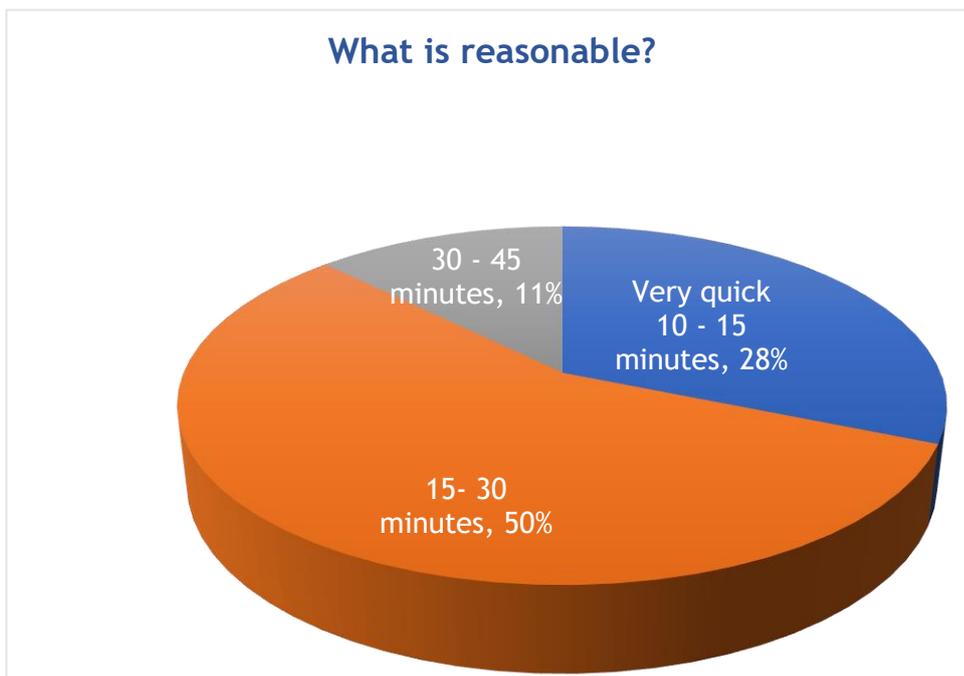
64% of people said that they waited 15-30 minutes to be treated/seen once they have checked in at the clinic and 32% said the wait was very quick/ 10-15 minutes, 5% said 30-45 minutes.

Is that a reasonable amount of time?



Of the patients that said their wait was reasonable 92% had waited 15-30 minutes and 8% 10-15 minutes. Of those that said their wait was unreasonable 100% had waited 30-45 minutes.

What is a reasonable amount of time in your view?



28% said they would view 10-15 minutes as a reasonable wait, 50% said 15-30 minutes and 11% 30-45 minutes.

Comments

- *No 5 hours wait*
- *Nearly missed bus last visit (time waited was over 1 hour). I was concentrating on the journey home rather than information given.*
- *Patient had experience of wait at Worcester clinic being bad.*

How are the staff? (Are staff friendly, professional, approachable, knowledgeable and caring)?

Do you have any comments about the reception staff, nurses, doctors or other staff?

Positive sentiment

- *After operation, was told of all agencies that can help.*
- *All excellent, came into hospital at weekend for an appointment 4 or 5 nurses called to check arrived. Was appalled that people don't turn up. Should be a penalty.*
- *Very helpful pleasant smiling.*
- *So far, very professional very friendly.*
- *I have not had contact with nurses and doctor yet - reception is good.*
- *Friendly reception.*
- *Fine professional polite.*
- *Always first class very helpful.*
- *All good very good (Rheumatology).*
- *They just do their job, as a whole, well.*
- *Very friendly in their approach.*
- *They do their whole job well.*
- *Looking after me.*
- *Can be a bit intimidating.*
- *Clear courteous professional.*
- *Nurses do nursing well surgeons brilliantly do their job.*
- *Empathise make you feel at ease. (Urology).*
- *Good Rheumatology: Good tell you where to go*
- *Staff are all dedicated.*
- *Caring.*
- *Well informed.*
- *Do jobs well work hard and are expert at what they do. Never had a bad experience at hospital treatment and staff.*
- *The nurse was very approachable.*
- *Generally, staff are kind, (including the cleaners), listen to questions and give information.*
- *Do well - all very polite eye contact very good.*

Neutral sentiment

- *Reception staff didn't return from lunch until 1.30 pm which was the time of the first appointments.*
- *Met a specialist nurse.*

Negative sentiment

- *Had to wait to be contacted by nurse.*
- *Keep to one doctor, changing the doctors has caused the problems.*
- *Had to wait to be contacted by nurse.*
- *Not seen yet by a doctor.*
- *Did not feel that the Health Care Assistants were so good. They came across as knowing better than me, but I did not feel that they were trained to be able to respond appropriately.*

- *Don't think there is enough of them.*
- *Last time could not understand.*
- *Main hospital consultants need a bit of push.*
- *Well. All do well but, not enough of them. Could have someone else typing and one dedicated to receiving people. Don't want to spend too much time elsewhere, filing, searching for records, typing -there are not enough staff.*
- *Kept on about taking tablets. Would not answer did not have chance to ask - babbled on about something else.*
- *Only human, have to make them listen to your point sometimes.*
- *I'm no better.*

In your appointment does the doctor/nurse explain everything, in a way that you understand?



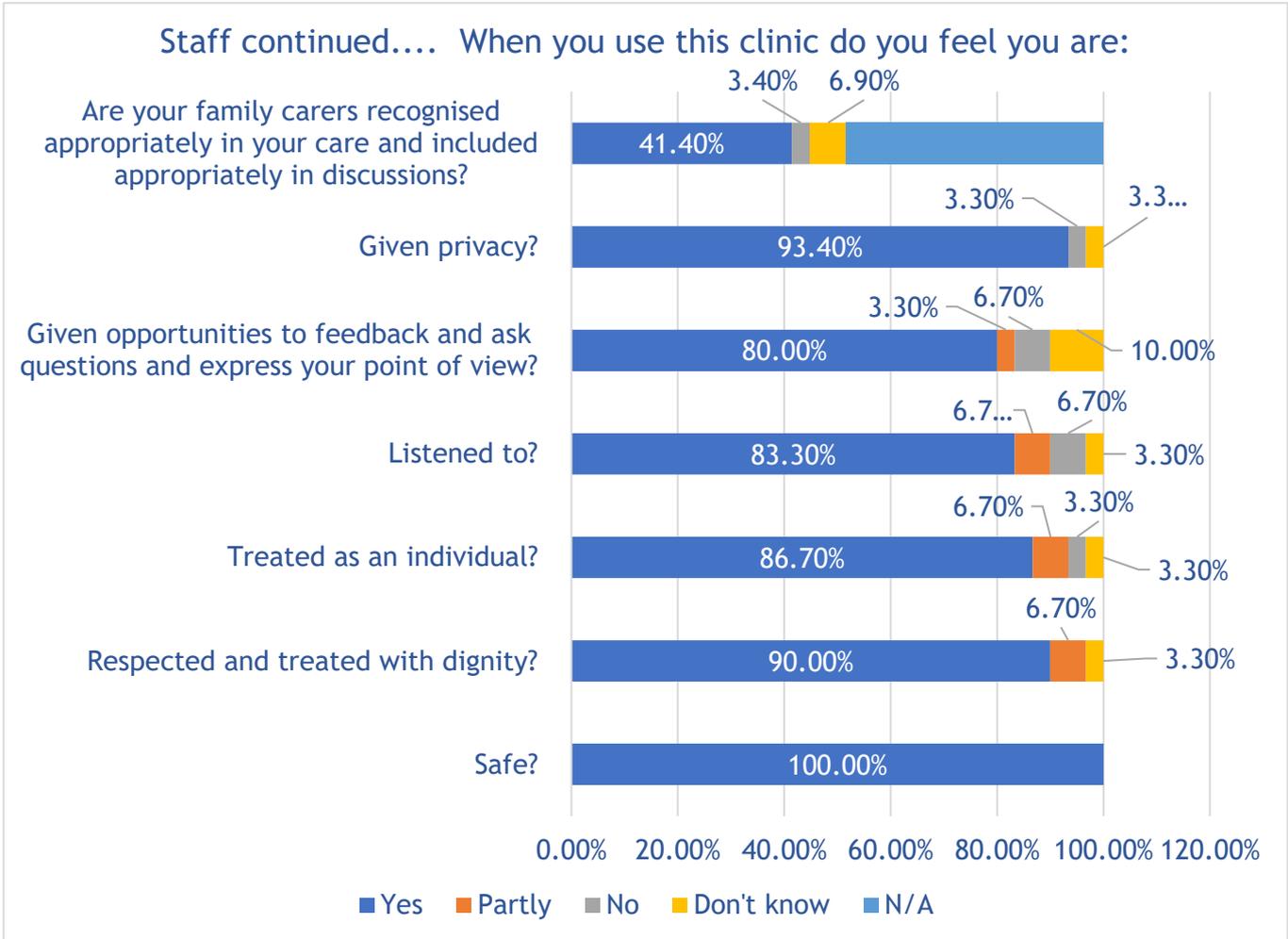
80% of people said yes, in their appointment, the doctor/nurse explains everything in a way that they understand, 3.3% said partly and 3.3% said no.

Comments

- *Dr peel also sends a letter to say what has been found, this is really useful.*
- *Always very good.*
- *Very good.*
- *I wonder afterwards. I just let them do what they need to do.*
- *Fully explained.*

Specific Clinics: Urology and Rheumatology. Tell us what you think of:

Most patients, (80-100%), feel that they are given privacy, given opportunities to feedback and ask questions and express their point of view, are listened to, treated as an individual, respected and treated with dignity and are safe. Of those that have carers 80% felt that yes, their family carers were recognised and involved appropriately in their care and included in their appointments, 13% didn't know and 7% said no.



The clinic environment?

Positive sentiment

- *Alright tip top.*
- *Very pleasant.*
- *Fine x 3.*
- *Good x 7.*
- *All good.*
- *Good-Bright; easy access; raised seats.*
- *Comfortable x 3.*
- *Reasonably comfortable.*
- *Warm, clean & comfy.*
- *Water a great thing. lots of information.*
- *Happy with it all. Clean.*
- *Peaceful.*

Neutral sentiment

- *OK x 3*
- *Basic easily maintained, typical, very clinical.*
- *Adequate.*
- *Satisfactory.*
- *Fairly typical. What you'd expect.*

Negative sentiment

- *Too smart.*
- *Quite aged and depressing.*
- *Not very inviting.*
- *Seats not comfortable not enough seats can be overcrowded people standing up.*

The new one stop clinic?

Two people were aware of it.

Comments**Positive sentiment**

- *Great idea*
- *Really good idea*

Negative sentiment

- *It wasn't one stop; did not deal with scan which was needed, and I have a long journey to get into Hereford.*

What is good about the service?**Access**

- *Saves travel.*

General positive sentiment

- *Very good*
- *Good as a whole*
- *Good nothing to improve.*
- *Once here is fine*
- *Just being there.*
- *No problem with what giving*
- *Have been well treated all the time. Urology*
- *Everything, never had any complaints*
- *A good service provided.*

Service quality

- *Very efficient, nothing to improve.*
- *Always fine. Nice that you see same doctor or registrar. (Continuity).*
- *Prompt and effective*
- *Very professional nothing to improve.*
- *It meets expectations.*
- *No complaints. Do what think they should do.*
- *Whole way they dealt with it was good. Friendly and gave ideas for care.*
- *Treat us with professional attention.*

What could be improved?

Speed of service

- *Takes too long to get appointment urgent 1.5 years ago and still not resolved.*
- *Shoot other patients! Population has outgrown service.*
- *Designated jobs for staff not having to multitask.*
- *Improve booking in procedure.*
- *More staff are needed so they have time to do their jobs.*

Service quality

- *Keep to one doctor (continuity).*
- *One stop clinic where there is a long journey involved.*
- *Changes: management needs to improve. Should reduce unexpected targets and pressure.*
- *Tricky when I'll get wound up and worry so don't always take in what are told. Writing it down might help.*
- *I thought it was a shambles, he was going to have his say and not answer.*

Transport and car parking

- *Transport issues can be difficult especially for those who live in rural areas and drive. Parking drop off area chaotic 20 minutes but seems people stay longer. One time had eye patch and had to park close. Trouble is disabled spaces are for those disabled all the time. Many using the hospital are temporarily disabled have to park close and little thought out to them. Too many disabled spaces we are all in difficulty.*
- *Patient mentioned the car parking fees as being excessive*
- *Transport issues can be difficult especially for those who live in rural areas and drive. Parking drop off area chaotic 20 minutes but seems people stay longer. One time had eye patch and had to park close. Trouble is disabled spaces are for those disabled all the time. Many using the hospital are temporarily disabled have to park close and little thought out to them. Too many disabled spaces we are all in difficulty.*

Environment

- *Better range of magazine. Prefer talking to somebody.*
- *Better seating. Hip replacements and elderly.*
- *Could do with more colour.*
- *Would like brighter and less clinical.*
- *Could like brighter and less clinical.*
- *Not inspiring.*
- *Signage biggest trouble.*

Are there alternatives to attending the clinic that you have experienced, would consider or would prefer?

No

- No x 11
- None
- *No tends to be hands on and no alternatives.*
- *Could be a benefit but feel that still need to see the doctor.*
- *I live in the sticks, but it is where the hospital is...*

Yes

- *Private.*
- *I'd prefer to go to my GP if I could.*
- *Would not object to using new technology in view of distance to travel.*
- *The clinic coming to me.*
- *Llandrindod appointments a long way patient living locally goes to Llandrindod.*
- *Consultants going to market towns. Would prefer Rheumatology consultant to do a clinic in Ledbury.*
- *Self-help if possible but often not.*

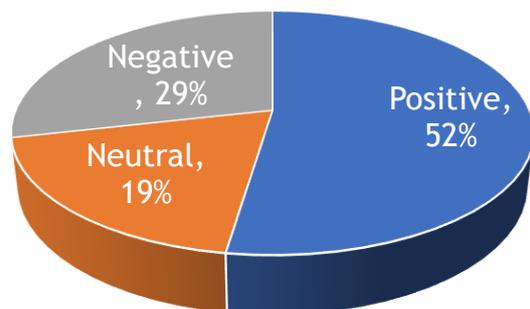
6.6 A&E Feedback - All clinics

Did you come to this clinic via A&E?

22 people had come to clinics via A&E (13% of patients interviewed).

What was your experience of A&E?

All clinics: What was your experience of A&E?

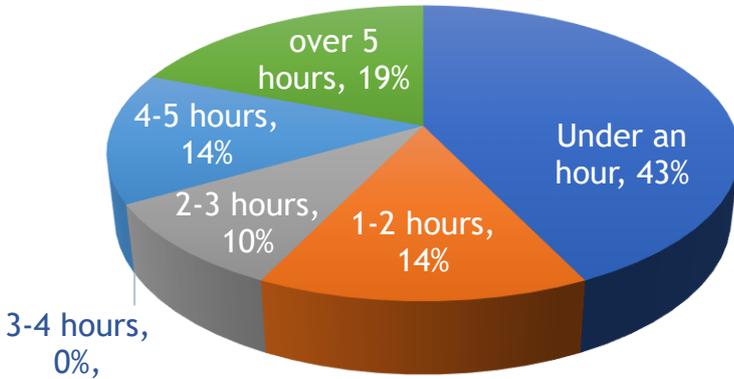


52% of people gave a positive sentiment about their experience of Hereford A&E, 19% Neutral and 29% Negative.

1 other person had come through A&E at Landrindod hospital and expressed a negative sentiment.

How long did it take to be seen or treated after you checked in?

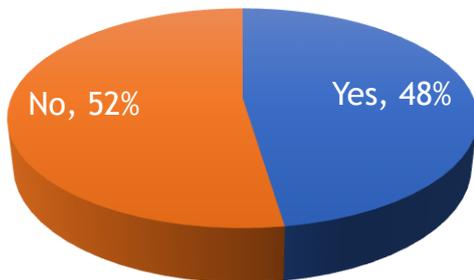
All clinics - How long did it take to be seen or treated after you checked in?



43% of patients waited under an hour after checking in, 14% 1-2 hours, 0% 2-3 hours, 0% 3-4 hours, 14% 4-5 hours and 19% over 5 hours.

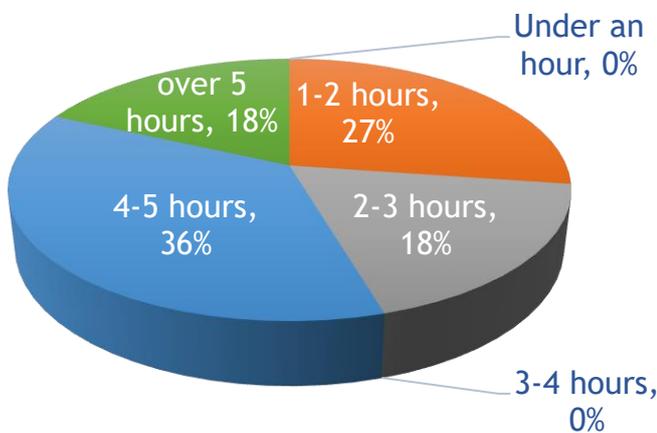
Did you get seen in a reasonable length of time?

Patients that came to any clinic via A&E - Did you get seen in a reasonable length of time?



48% of patients felt they were seen in a reasonable length of time 52% felt that they were not seen in a reasonable length of time.

How long it took to be treated after check in for patients that thought they were not seen in a reasonable length of time at A&E



Of the 52% who thought they were seen un an unreasonable length of time 27% were seen in between 1 and 2 hours, 18% between 2 and 3 hours, 36% between 4-5 hours and 18% over 5 hours.

If no, what would be reasonable in your view?

8 patients answered this saying:

- *Straight away/ No time/ Very quick*
- *20 minutes*
- *1 hour (x2)*
- *2 hours*
- *I suppose it depends how bad you are.*

What was good about the A&E service you received?

People said that what was good about the A&E service was speed of service, data access, efficiency and service comments, staff.

Speed of service

- *Never had to wait a long time/ Quick/ Very quick/ Swift*

Data access

- *Able to access my data just from my name.*

Efficiency and service quality

- *When first went in cast up everything and explained - very efficient.*
- *How quick they got follow up appointment.*
- *They were useful and followed through.*
- *The treatment after I was seen was good /Once got through A&E, couldn't fault the treatment.*

Staff

- *Caring/ Took good care/ Made comfortable.*
- *In and out. Lady behind counter very helpful.*
- *All polite and nice.*

How could the A&E experience be improved?

People suggested that the A&E experience could be improved by improving data access, speed of service, speedier administering of stronger pain relief, information improvements, improved communication between staff, environment improvements (overcrowding/ poor seating), increased efficiency and individual service improvements e.g. moving someone very self-conscious with their issue to a side room.

Data access

- *Difficulty gaining access to patient notes. /Awful. Doctors had no access to notes. Had to explain everything and the not sure if doctor understood.*
- *Fine, little frustrated that need to keep going through A&E instead of coming straight to the clinic.*

Speed of service

- *Less waiting time/ Needs to be quicker. Waiting an hour is too long/ Quicker service/ speed up/ 4.5 hours to be told come to trauma.*

Environment

- *Overcrowding/ Cramped.*
- *Comfy chairs. Not nice to wait/ seating was poor.*

Efficiency and service comments

- *Look at X-ray properly.*
- *The outcome was not very clear, hence need further activity.*
- *Nothing was good. They said nothing wrong when clearly there is.*
- *Bad experience felt self-conscious, would of been good to move to another room.*
- *Stop people coming to A&E who have brought their problems on themselves.*

Pain relief

- *There for hours, in pain. The pain relief was not strong enough.*

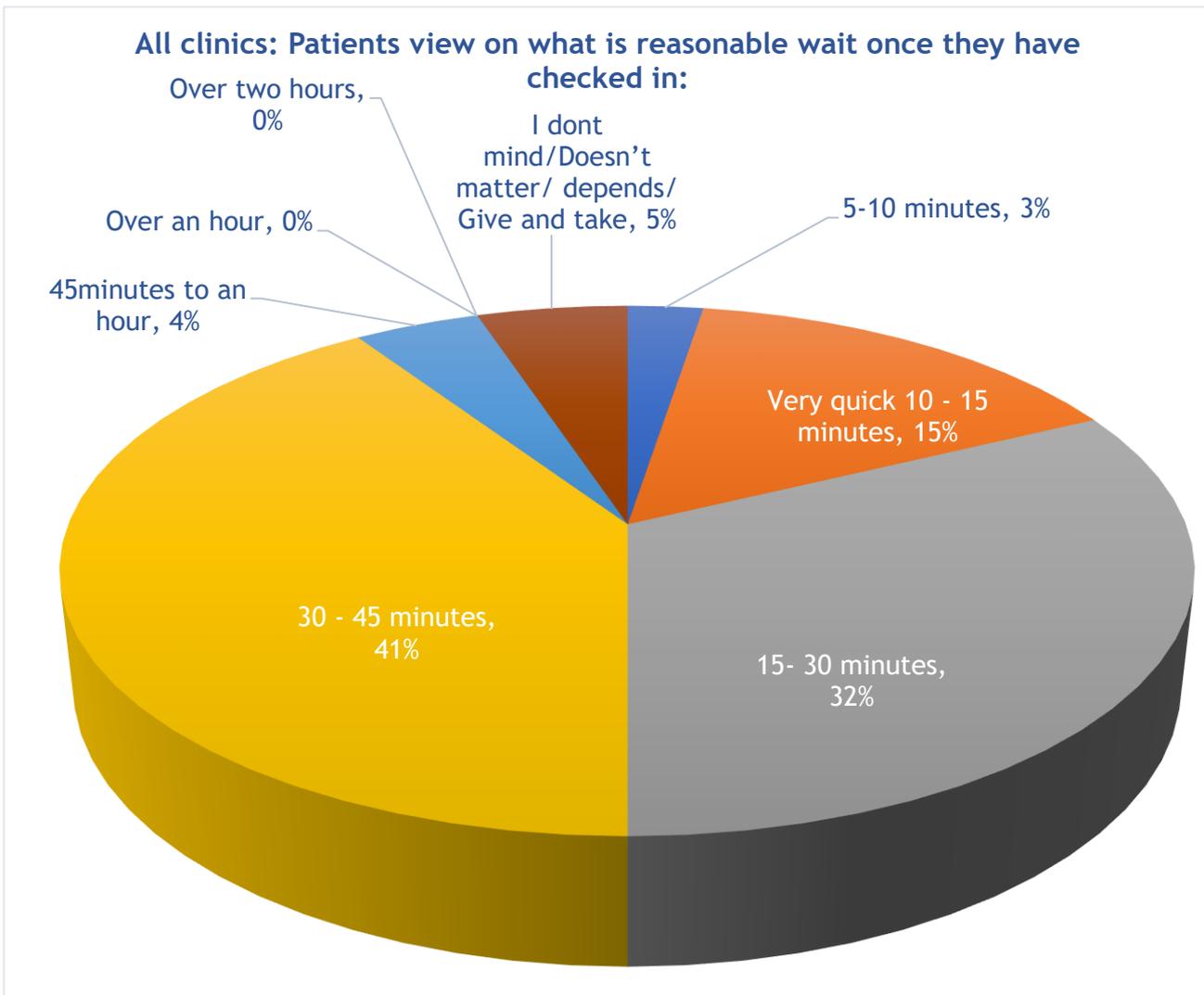
Information

- *Better information given.*
- *Better communication between nurses and doctors.*

Do you want to comment about the ambulance service you had?

Brilliant/ Very good/ good (x3)

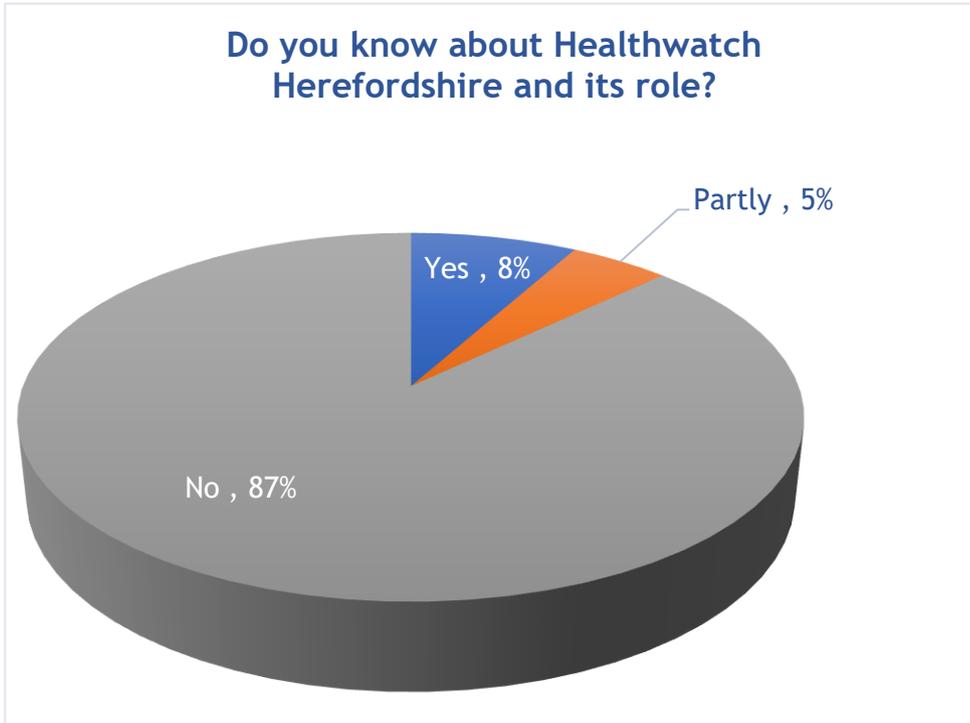
6.7 All Clinics - combined statistics on waiting times after check-in.



Combined totals for all clinics are included but it should be noted that they may not make sense, as some patients are seeking emergency help and others are having routine follow up appointments.

But overall the opinion of patients on what is a reasonable wait: 3% said 5-10 minutes, 15% said very quick/10-15 minutes, 32% said 15-30 minutes, 41% said 30-45 minutes, 4% said 45 minutes to an hour and 50% said I don't mind/ it doesn't matter. Depends/ give and take. Nobody said over an hour or over 2 hours.

6.7 Knowing about Healthwatch



87% of people did not know about Healthwatch Herefordshire and its role, 5% had partly and 8% had.

Do you know about Healthwatch Herefordshire and its role?

Comments

- *Explained the basics.*
- *Knows a little.*
- *Some information given. Links with Healthwatch Herefordshire.*
- *Heard of Healthwatch but not the Hereford Branch.*
- *Had a vague idea.*
- *Just read leaflet X 4*
- *Hope it help improve things.*

Other feedback

- *If you require inpatient treatment, there is a lack of vegetarian food options.*
- *It was a huge issue post-Christmas when I was discharged before I should have been.*
- *If have problem is GP.*
- *GPS are good.*

6.8 Comparison of views by clinic on automatic Check-in

All clinic comparison. Patients in different clinics are divided in their views about automatic check in. Two clinics in favour, two against.

Automatic check-in Views.	Ophthalmology.	ENT	Trauma and Orthopaedic, Fracture Clinic and Radiology.	Urology and Rheumatology.
Would be of benefit.	28%	48.5%	42%	33%
Would not be of benefit.	52%	27.3%	40%	44%
Patient concerns.	<ul style="list-style-type: none"> Sight impairment was the greatest concern for many and wishing to speak to a person. A few felt there should always be both. Patients repeatedly said (across clinics) that such systems in GP surgeries were always breaking down/ were often not in operation. 			

7 Appendices

7.1 Survey used as a basis for patient conversations

2. Did you come to this clinic via A&E?							
Did you come via A&E? If no go to next question. If yes...	No (cross)	Yes (tick)					
What was your experience of A&E?			Sentiment Positive +	Sentiment Neutral	Sentiment Negative	Prefer not to answer	Don't know
How long did it take to be seen or treated after you checked in?	Length of time						
Did you get seen in a reasonable length of time? If no, what would be reasonable in your view?	No (cross)	Yes (tick)	Other				
What was good about the A&E service you received?							
How could the A&E experience be improved?							
Do you want to comment about the ambulance service you had?							
Other Comments:							

3. What are your views on automatic check in?	Would be of benefit	Would not be of benefit	Don't Know	Prefer not to answer
Comments:				

4. Is this your first visit to this clinic?	Yes	What is a reasonable time to wait to be seen?	Reasonable Waiting time	Go to question 6
	No	Go to question 5		
Comments:				

How could the booking experience be	
-------------------------------------	--

5. Once you have checked in at the clinic how long do you wait to be treated/seen? (Waits and delays - after check in).				
When you come to the clinic how long do you usually wait to be seen?	Don't know	Prefer not to answer	Usual Waiting time	
Is that a reasonable amount of time?	Yes	No	Don't Know	Prefer not to say
What is a reasonable amount of time in your view?	Reasonable Waiting time			
Comments:				

6. Staff: How are the staff? (Are staff friendly, professional, approachable, knowledgeable and caring)?	
Do you have any comments about the reception staff?	
Do you have any comments about the nurses?	
Do you have any comments about the doctors?	
Do you have any comments about any other specific staff?	
Comments:	

7. In your appointment does the doctor/nurse explain everything, in a way that you understand?					
Comments:	Yes	Partly	No	Don't know	Prefer not to answer

8. Staff continued.... When you use this clinic do you feel you are:						
Safe?	Yes	Partly	No	Don't know	Prefer not to answer	N/A
Respected and treated with dignity?	Yes	Partly	No	Don't know	Prefer not to answer	N/A
Listened to?	Yes	Partly	No	Don't know	Prefer not to answer	N/A
Treated as an individual?	Yes	Partly	No	Don't know	Prefer not to answer	N/A
Given opportunities to feedback and ask questions and express your point of view?	Yes	Partly	No	Don't know	Prefer not to answer	N/A
Given privacy?	Yes	Partly	No	Don't know	Prefer not to answer	N/A
Are your family carers recognised appropriately in your care and included appropriately in discussions?	Yes	Partly	No	Don't know	Prefer not to answer	N/A
Can you give an example of what staff do well?						
Are there any changes to do with staffing that would improve your experience?						
Comments:						

9. Information: Do you have enough information to help you to care for yourself between appointments? (e.g. Medication, follow up treatment, whether you need to act for a referral, how and who to contact and in what circumstances.)					
Do you have enough information to help you to care for yourself between appointments?	Yes	Partly	No	Don't know	Prefer not to answer
If no or partly, what information would you have wished for at any stage? e.g. about my condition, how to improve, what happens next, whether can work or drive, how long condition will last, other (please note).					
Comments:					

10. Specific Clinics: Ophthalmology. Tell us what you think of:	
The clinic environment?	
Have you received any support from the Eye care liaison officer that is jointly funded by RNIB and the hospital (WVT)? If yes, what did you think of this?	
What is good about the service?	
What could be improved?	
Are there alternatives to attending the clinic that you have experienced, would consider or would prefer?	
Comments:	

11. Specific Clinics: Ear, Nose and throat, Head and Neck. Tell us what you think of:	
The clinic environment?	
Clinical nurse specialists?	
Appointments at different hospitals?	
What is good about the service?	
What could be improved?	
Are there alternatives to attending the clinic that you have experienced, would consider or would prefer?	

12. Specific Clinics: Urology and Rheumatology. Tell us what you think of:	
The clinic environment?	
The new one stop clinic?	
What is good about the service?	
What could be improved?	
Are there alternatives to attending the clinic that you have experienced, would consider or would prefer?	
Comments:	

13. Specific Clinics: Trauma and Orthopaedic - Fracture clinic and Radiology.	
The clinic environment?	
Travelling to and fro fracture clinic and radiology?	
What is good about the service?	
What could be improved?	
Are there alternatives to attending the clinic that you have experienced, would consider or would prefer?	
Comments:	

14. Do you know about Healthwatch Herefordshire and its role?	Yes	Partly	No	Don't Know	Prefer not to answer
Comments:					

15. About you				
We want to make sure we ask a mix of people. Would you mind telling me which age bracket you are in please?	Sex Male	Sex female	other	Prefer not to answer
What age bracket roughly?	Age under 25	Age 26 to 65	Age over 65	Prefer not to answer

Comments:

Thank You!

7.2 DRAFT Outpatient Clinics Early notes - observations and volunteer brief summaries of comments.

Ophthalmology

9th and 18th March

Observations

Issues

- Person with advanced dementia or severe memory issues given piece of paper with next appointment time, date and phone number but did not say “your next appointment at the eye clinic is”. Lady very confused kept asking what is this? Few minutes later asked again. Was waiting for hospital transport did not know why was waiting needed to know when to go to desk to find out if transport on the way. Recommend writing clearly on paper what information is as reminder. Could preprint slips.
- A bit cramped. When patient legs out, is difficult for people with sight issues to walk aisles without risk of tripping.
- Overheard consultant was 45 minutes late which made every appointment later. But patients did not appear to have been informed.
- One toilet has large gap inside frame that makes you feel your legs can be seen while you are on loo.

Positives

- Staff came out to collect patients and guide to treatment rooms.
- Calm and friendly atmosphere.
- Toilets clean
- Comments arising from survey conversations.
- Nurse helped someone in a wheelchair to use loo. No fuss, no problem done very sensitively.

Patient feedback

Issues

- Patients would like to know if delays are likely.
- Floor markings to make more friendly for people that can't see.
- Some mention of separate clinic at Bromyard. Having to do two step visits - could it be done in one?
- Birmingham specialist.
- Bookings could they sort out next one at time instead of waiting for a letter? Waiting for a letter makes planning your life difficult.
- 2 people said received no appointment for repeat visits and had to call to remind.
- Request for more information about common eye conditions or being given links to trusted internet sites.
- Overall automatic check in not favoured.
- Suggestions - TV, radio, coffee!

- Why did all come for 2.00 appointment?
- Lack of parking for disabled and what are you supposed to do if the car park is full?
- Number of spaces for wheelchairs in waiting room need to be increased. Feel in the way.
- Need more information in first appointment to know what to expect.
- One patient said it would be good to know what they are going to do at the appointment e.g. assessment or procedure as if it was an assessment there is no need to bring partner/ have someone else drive.
- Not always clear who to call if have a problem with appointment time. Phone not being answered.
- Great variation in waiting times e.g. 5-15 minutes, 30 minutes, 3-4 hours.
- Most don't think much of waiting room.

Positives

- Most people fairly happy and favourable remarks.
- "All staff really good".
- Generally, very pleased with clinic - people come on regular occasions so know what happens.
- Lots of people prefer letters to other forms of communication.
- Regarding automatic check in lots of people say they prefer the option of checking in at reception desk. One patient said you get additional information e.g. estimated waiting times, but mostly people say because it is good to talk to a person and they don't want their jobs being cut.
- Most very content with service.
- Staff friendly and helpful. Seem very willing to go extra mile. Try to help anyone who needs it.
- Doctors good with explanations.
- Patients very accepting of limitations of NHS.

Urology, Rheumatology

11th, 18th, 20th and 22nd March,

Observations

Issues

- Signs to say please clean hands and no hand cleaner in public corridor. Receptionist said had broken and not been replaced.
- Patient notes on trolleys in waiting room. Could be looked at? Not kept in section locked by number lock. Were on shelf below.
- There was a small hand cleaner bottle on the reception counter but did not observe anyone use it. Receptionist said people do.
- Patient arrived but no appointment could be traced. Nurse recognised the name. Turned out had been given a provisional appointment. Needed to get one on hospital headed paper or it was not a real appointment. Provisional appointment had been cancelled and another provisional had been set up but not yet guaranteed. Patient had come a long way and found it confusing. The receptionist

explained it clearly, was very sympathetic and gave patient a number to call. The patient commented that it was “all very complicated”.

- Several patients were confused about parking in disabled space outside Fred Bulmer’s. Didn’t know if had to get a ticket. Receptionist explained well that they did. Patient thought it was “ridiculous”.
- After dinner clinic. Queue at start and no receptionist. Good that nurse came to explain and invite people to sit down to wait.
- Receptionist having to multitask and leave desk.

Positives

- Friendly receptionist.
 - Clean and light.
 - Water dispenser.
 - Leaflets and information on common conditions e.g. psoriatic arthritis, lupus, living with dementia, Parkinson’s.
 - Higher chairs provided.
 - Person wanted cancer unit and was directed. Receptionist accompanied them as they looked confused.
 - Second occasion accompanied another patient part of the way.
 - Observed a nurse call out patient’s name loudly and then greet them with “Good afternoon” and “How are you”.
 - Patient arrived at reception saying they’d had a telephone message and text to come in and thought it was very good -“I knew you wanted me to come in because you sent a text and left a telephone message”.
 - Practitioner: “Hello sir, come on down”. Very jolly.
 - Receptionist explained politely that “we do ask you not to leave once you have checked in. We can sometimes see you earlier than your appointment time”.
 - Polite and friendly receptionist.
 - Efficient receptionist.
 - Receptionist example - “I’ll just be one minute - bear with me”.
-
- IT glitch appeared to have cancelled recent appointment in 2017! Receptionist dealt with this efficiently “I can’t apologise enough” and contacted IT support.
 - Staff interaction with patients was good and professional.

Patient feedback

Issues

- Automatic check in 50:50 in favour and not.
- A long wait for the first appointment.
- Space old fashioned could do with brightening up but understand not a lot of money.

Positives

- Text reminders appreciated and thought to be good.
- Receptionist good.

- Generally, content and lots of positives.
- Environment fine, bright clean water - what you'd expect.

Ear Nose and Throat

11th March + 22nd March

Observations

Issues

- No reception any more someone very confused. Have to go to main reception.
- Practitioner came out to call patient called louder and louder beginning to sound impatient instead of coming closer to waiting room.

Positives

- Clear signage.
- Variety of leaflets available e.g. about Tinnitus and deaf equipment.
- One out of date poster re Tinnitus week 4th - 10th February.
- Useful information re WVT repairs on a drop-in basis.
- Hearing loss group and drop-in repair sessions.
- Deaf Direct lip-reading classes.
- Macmillan Renton relaxation group.

Patient's feedback

Issues

- Didn't know where to go when came in to clinic.
- No official reception here I don't know what to do e.g. sit down and you'll be seen - do they know you are there?
- Came here then had to go back to main reception and queue.

Positives

- Can be long waits.
- Need more staff.

Radiology, Fracture Clinic and Trauma and Orthopaedics

15th + 19th March

Observations

Issues

- Surprised at how many doctor referrals there are rather than A&E.

- Wheelchairs available cannot be self-propelled. Volunteer tried to transfer to smaller wheelchair to move around clinic, but hospital wheelchairs brake comes on automatically and there was no means to move it yourself. So, stuck to bulky mobility scooter.
- Clinic space for wheelchairs or scooters not apparent in either clinic.

Positives

- Very supportive and accepting of assistive dog and finding a wheelchair.
- Jug of water provided for patients in Trauma clinic water machine in Radiology.
- Receptionist leapt up to clear up water spillage. Very friendly and helpful.
-
- Trauma Orthopaedic very quiet

Patient's feedback

Issues

- Main issues X Ray extremely busy.
- Some frustration with waiting times.
- People told to come on spec from Podiatry and see if they can fit them in.
- Does not tell you to check in (Trauma and Orthopaedic). Does not say approach staff and check in.
- Auto check in most not keen.
- Stronger pain killers than paracetamol. 3-4 hours in agony.
- Staff good.
- Environment - small number said shabby and very few said unclean. (Trauma)
- Radiology very small number said not clean.
- Car park - not enough disabled spaces.
- Patient expectations of reasonable waits = 15 to 30 minutes.
- Chairs too close together especially with types of injuries.
- Can't hear calling.
- Car parking - all disabled when have to come with a brake (broken bone) should be more provision for the temporarily disabled.
- Turn around area is chaotic and dangerous and needs policing.
- More staff needed.
- GP hospital communication an issue.
- Not enough GP's.
- GP expertise with medication cough medicine with cancer medicine.

Positives

- Environment fine.
- Lots of good comments about staff.
- Lots of positive comments about service.
- Many said clean one noted cleaners coming around.
- All good.
- Service good.
- 50:50 automatic check in approval.

- Excellent, only took 10 minutes.
- When you come to drop in you don't mind the wait.
- Reception staff greeting you is good. You feel like you are welcomed.

Incidental A&E comments

- Some quick some long waits 3-4 hours.
- One person waited from 5-11 O'clock



Telephone: 01432 277044

Email: info@healthwatchherefordshire.co.uk

Facebook: www.facebook.com/hwherefordshire

Twitter: [@HWHerefordshire](https://twitter.com/HWHerefordshire)