



Enter and View

Stoke Mandeville hospital pharmacy



March 2018

What was the project about?

Healthwatch Bucks wanted to find out about the patient experience of Stoke Mandeville's hospital pharmacy; as part of the discharge process for patients.

Why did we do the project?

One key finding in the Health & Adult Social Care Select Committee (HASC) Hospital Discharge report in March 2017 was that "We felt that there should be a more in-depth qualitative study undertaken to better understand the patient experience and to help with targeting the improvements." Healthwatch Bucks had also heard feedback specifically about hospital pharmacy services. We wanted to gather information about the patient experience of obtaining medication from the hospital pharmacy and identify good practice and ways to improve service delivery.

What did we do?

On 8th November 2017, we visited Stoke Mandeville Hospital to carry out an "Enter and View". Part of our 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. For more details on Healthwatch Enter and View and full details of the visit including the names of our authorised representatives please see Appendix 1.

We visited three locations in the hospital:

- the acute observation unit
- the day surgery unit and
- the outpatient pharmacy waiting area

Our authorised representatives used a set of questions to guide their conversation with patients. It covered topics such as:

- how easy it was to find the outpatient pharmacy
- how long patients or their relatives had been waiting [and whether this was for medicines]
- whether they had been given information about how long they might have to wait
- what information they had been given about the medicines
- whether they know where to get help with medicines when they'd left hospital.

We also spent time observing what went on at these locations, helped by a short observation sheet.

We talked to 28 patients or relatives in the three locations (see Appendix 2 for more detail). Many of those we spoke to were waiting for medicines following a clinic appointment. Not everyone answered all the questions.

What did we discover?

We heard a range of opinions and personal experiences during our conversations. The sections below pull out the main themes. Everyone we spoke to was happy for us to use their responses in this report.

What people told us and what we saw - in the outpatient pharmacy waiting area

What is the waiting area like for patients?

- Of the 13 patients or relatives who were waiting in the outpatient pharmacy for the first time 11 said it was easy to find.
- Everyone who expressed a view said the pharmacy staff were courteous and/or helpful. Our observations confirm this. One person mentioned that they had received an apology for the delay.
- From our observations the waiting area looked clean and free from trip hazards. It was well lit, felt safe and there was space for wheelchairs.
- During our visit we saw plenty of seats but people tended to cluster around the pharmacy windows.
- Two patients moved from the central seating area (which was in the direct line of the wind coming through the external doors) and confirmed they had done so because they were too cold. This meant they were a distance from the pharmacy counter and out of earshot of the pharmacist calling their name. We observed some people rejoining the queue to see if their prescription was ready. For some their name had been called out but they didn't hear.
- We observed a few magazines but they were on a table behind a pillar. We could not see any toys. One relative said there was nothing for children to do. They were aware of toys in another area but didn't want to move in case they missed their medicines.

What information had patients or their relatives received?

- 13 (out of 18) people had been told how long they would have to wait for the medicine. The waits varied between 20 and 45 minutes. From our observations seven out of the nine people we got feedback from received their medicines in the time or sooner than they had been told.
- Generally, people didn't seem to know why there was a long wait. For example, one assumed that the delay was due to the time it took to make up a prescription, another that it was because the staff were busy. Another asked "Why does it take so long to take a packet off a shelf?" Another had asked the consultant why they couldn't get a prescription from the high street chemist?
- One relative said they had expressed concern to the staff about having to wait so long because the patient they were with was living with dementia. Our observation was that they did receive the medicines sooner than expected.

- Everyone had been told about the medicines they were waiting for. Three had been given written information already and others assumed that written instructions would come with the medicines.
- None of the 13 people we asked knew if there was an area where they could talk in private to the pharmacy staff. Although this wasn't a problem for most, one person did say that they had been asked a question which they felt would have been better asked in private. Another noted that there was no privacy around the window and that there wasn't a notice offering a private consultation. We didn't observe any written information offering a private conversation.
- When we asked people whether they had been told where to get advice and help with medicines when they leave hospital their responses varied. Some didn't know, others would contact their GP while others would contact the hospital clinic.

What information was available?

- We didn't see any information that explained the medicine collection process nor a notice to let people know what the waiting time could be.
- Of those we asked no-one felt they needed information in any other language or format.
- We observed a number of notice boards in the waiting area:
 - + These gave information about various charities, services and how to give feedback but the information was not well organised
 - + There was a very out-of-date notice about the relocation of the pharmacy to the Mandeville Wing on 3rd November 2014
 - + The small notice board between the two pharmacy windows displayed some key information. There was an A4 poster saying "Please let staff know if you need help understanding us or communicating with us", in English, but not in any other language. It also had signs for hearing, visual, translation, BSL and learning disability. There were also notices giving information about the pharmacy's opening hours and a service to give help with medicines after leaving hospital.

How well did the medicines collection process work?

- At busy times we observed a queue developed to hand in prescriptions. This was highlighted by two of the people we spoke to. During a busy morning period, one relative said they had queued for 30 minutes to hand in a prescription.
- People's reactions to the waiting time varied. Several were surprised. One said they were "gobsmacked at the 45 minute wait". One expected a wait from previous experience. A couple of people mentioned the issue of car parking. As well as the difficulty of finding a space, one highlighted the anxiety associated with the concern that the ticket would run out.
- We observed that the pharmacist called out people's names (or often the unique number - given to a patient on the piece of paper when a prescription is handed in). Comments from some people suggested that this was done too quietly. One patient (with a hearing condition) mentioned that it was difficult to hear when the medicines were ready. Some said they felt they needed to keep going up to the counter to check whether their medicines were ready.
- Some people offered suggestions for how the process could be improved. One felt that the pharmacy room was too small. Another thought that the staff could be repositioned away from the window (to avoid the impression that they are ignoring people waiting) and there

were also views expressed about the benefits of a system to tell patients when their medicines were ready.

What people told us and what we saw - in the day surgery unit

- We spoke to one patient and one relative (accompanying a patient living with dementia) in the day surgery unit. Both were waiting for medicines that were not available on the unit.
- They had been told why the medicines were needed and were expecting further written information to come with them. Although the process had been explained to them neither knew how long they would have to wait (though one had been told there would be a wait).
- One patient chose to move to another part of the unit/ hospital (helped there by a member of staff) so we couldn't tell how long they had to wait. From our observations, the other relative and patient probably waited about 90 minutes for the medicines to arrive. We understand that sometimes the staff themselves may make two trips to the pharmacy (one to take the prescription and then to collect the medicines).
- Everyone was made comfortable and offered a drink while they were waiting. Both felt the process overall had gone well though the relative wasn't initially sure where they should wait.

What people told us and what we saw - in the acute observation unit

- We spoke to eight patients in this unit. We have summarised what we were told below. Many of the points people raised weren't directly related to their medicines.
- We heard about some very positive experiences. Several patients praised the excellent care provided by the staff. One commented on the peaceful environment, another said they had received prompt attention when the buzzer was pressed. One was also pleased that visitors could come at any time and said that they didn't feel neglected.
- One patient said that they weren't sure what was happening and another that they would have preferred to go to A&E that was closer to home.
- We observed the pharmacist discussing all the aspects of the new patient's medication with them.
- We spoke to one patient who had been taking six types of tablets but three had been stopped. The changes had been explained to them.
- We heard from another patient who had seen a pharmacist, that the nurse had been very helpful and they had been kept informed.
- One patient hadn't had any new medicines but said that sometimes had to wait for tablets in the past.

We also spoke to a pharmacist who explained that two pharmacists would come to the ward each day. They would visit each patient to explain any new medicines and possible side effects and when to take the medicines.

Our recommendations

Most of the people we spoke to about their medicines were in the outpatient pharmacy waiting area so the majority of our recommendations relate to this area. These are set out below under four broad headings.

The recommendations about patients having better information on waiting times and the possible reasons for delay would also apply to patients and their relatives waiting in the day surgery and acute observation units.

Improving the patient waiting experience in the Mandeville Wing

We recommend that:

- leaflets are put in display holders to help people see what is on offer and keep them tidier
- there is a more prominent display of magazines to read (and books or toys for children)
- in periods of cold or windy weather, options are explored to stop people having to sit in the cold waiting area (created when both sets of automatic doors open). Perhaps the freestanding noticeboards could be repositioned to reduce the wind tunnel effect?

Patient expectations

We recommend that:

- everyone is told how long they are likely to have to wait
- information giving the likely average wait is also displayed
- a loudspeaker and/or an electronic display is installed (perhaps linked to the numbered stickers handed out) so patients can see where they are in the queue and to tackle difficulties for those with hearing loss
- the 'prescription in' and 'prescription out' windows are more clearly labelled so they can be seen even when there is a queue
- a 'wait here' post is put up or 'wait behind this point' line to protect the privacy of the person at the window
- consider positioning the pharmacy technician's work station away from the window so that they can a) work uninterrupted and b) avoid the impression that they are ignoring waiting patients.

Patient information and signposting

We recommend that:

- the notice boards are updated and reorganised so that similar types of information are grouped together and out of date information removed
- key information (for example about how to access services and how to get help with medicines after leaving hospital) are displayed more prominently in the waiting area and patients signposted to these from the noticeboard between the pharmacy window
- the option to speak to a member of staff in private should be displayed
- signs offering translation are available in the principle languages (other than English) used in Bucks.

Patient information about medicines

We appreciate the range of statutory, professional and clinical considerations involved in prescribing medicines to take home and that sometimes delays are unavoidable. We recommend that information is provided to explain to patients why they may have to wait for their medicines. This should also cover why patients can't be given a prescription that they can use to collect their medicines from their local pharmacy.

The process of obtaining medicines to take home

We welcome the work already underway to speed up issuing of TTOs (to take out medicines). We recommend that the patient voice is clearly heard as part of the assessment of these changes.

Service Provider Response

The full response from Buckinghamshire Healthcare NHS Trust can be found on our website.

[Response from BHT to Stoke Mandeville Pharmacy Enter and View](#)

[BHT action plan in response to Healthwatch Bucks Enter and View Stoke Mandeville Pharmacy](#)

Please use [the contact information below](#) to request copies if necessary.

Acknowledgements

Healthwatch Bucks would like to thank Buckinghamshire Healthcare NHS Trust, service users, visitors and staff for their contributions to this Enter and View.

Disclaimer

Please note that this report relates to findings observed on the specific date 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.

Appendix 1: Enter and View Background and Visit Details

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 watch how service is delivered and talk to service users, their families and carers on premises such as hospitals, care 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.

Healthwatch Enter and View visits are not intended to specifically identify safeguarding issues, however, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.

Details of visit:	
Service Provider	Buckinghamshire Healthcare NHS Trust
Service Address	Stoke Mandeville Hospital Mandeville Road Aylesbury Buckinghamshire HP21 8AL
Date and Time	8 th November 2017 10am - 12noon Acute observation unit 11am – 1pm Outpatient pharmacy waiting area 2pm – 4pm Outpatient pharmacy waiting area Day Surgery Unit
Authorised Representatives	Liz Baker Jean Button Sheila Cotton Alison Holloway Joy Johns Deborah Sanders Helen Smith

Appendix 2: We spoke to...

Location

Outpatient pharmacy waiting area	18
Acute observation unit	8
Day surgery unit	2
TOTAL	28

Number of patients or relatives we spoke to

Patients	12
Relatives (with or without patient present)	8
Not answered	8

Gender

Female	14
Male	11
Not answered	3

Age

18-25	1
26-35	4
36-45	3
46-55	1
56-65	8
66-75	4
76-85	5
85+	1
Not answered	1

Ethnicity

Asian/British Pakistani	2
Black British/Caribbean	1
Black/British African	1
White British	23
Not answered	1

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Address: Healthwatch Bucks

6 Centre Parade,
Place Farm Way,
Monks Risborough,
Buckinghamshire
HP27 9JS

Phone number: 0845 260 6216

Email: info@healthwatchbucks.co.uk

Website URL: www.healthwatchbucks.co.uk

Twitter: @HW_Bucks

Facebook: HealthWatchBucks

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