

Patient experiences of the non-emergency patient transport service in Coventry and Warwickshire

May 2016



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1. Introduction

Healthwatch is the independent consumer champion for health and social care in Coventry. We give local people a voice - making sure that views and experiences are heard by those who run, plan and regulate health and social care services.

Healthwatch has set a strategic priority regarding patient transport services provided for Coventry people in order to follow up on previous work which identified quality concerns related to patient experience of the service.

The Non-emergency Patient Transport Service (PTS) provides non-emergency transport between patients' homes and treatment centres (largely hospitals). It operates to a set of criteria and its purpose is to ensure that those whose physical disability or health conditions preventing them from travelling for treatment or assessment can reach these services.

2. Background

2.1 Previous patient engagement work

In 2011 Coventry Local Involvement Network carried out a survey to gather experiences of the Non-emergency Patient Transport Service for renal dialysis patients. A report making recommendations for the improvement of waiting times, journey times and communication was produced¹.

Work continued to follow up these recommendations including providing input on a number of versions of draft service specifications being prepared firstly by the now abolished Coventry and Warwickshire Primary Care Trust (PCT) and subsequently by Coventry and Rugby Clinical Commissioning Group (CCG).

In November 2013 Healthwatch Coventry referred the commissioning of the Non-emergency Patient Transport Service to the Health and Social Care Scrutiny Board (Scrutiny Board 5) of the City Council because of repeated delays to the tender process for putting in place a new service contract and ongoing and increasing quality concerns related to the existing service. As a result Scrutiny Board 5 made a number of recommendations for action to Coventry and Rugby Clinical Commissioning Group.

The 3 Clinical Commissioning Groups across Coventry and Warwickshire worked together to commission a service across Coventry and Warwickshire and Coventry and Rugby CCG advised that they had increased their investment in the service.

¹ *Renal Patient Transport: Recommendations to improve patient transport for Renal Patients in Coventry* (June 2011)

2.2 New Non-emergency Patient Transport Service contract

The Non-emergency Patient Transport Service was put out to tender and a new contract was put in place for the service across Coventry and Warwickshire, beginning in April 2015.

As a result of the input of Healthwatch Coventry the PTS contract was split into two lots: meaning that there were separate standards for the patient transport service for renal dialysis patients addressing the specific requirements of running this part of the service to meet the needs of the patient group. This included specific waiting and journey time standards. The split into two lots also meant that there was potential for the main provider to subcontract some of the service delivery for transport for renal patients.

The contract was awarded to West Midlands Ambulance Service (WMAS) with some of the delivery of the renal patient transport service being subcontracted to the organisation Community Transport.

3. Our aims

The aims of this piece of work were to gather patient feedback and other intelligence in order to see if the new non emergency patient transport contract had improved the patient experience of the service.

This piece of work aimed to gather feedback about both the Non-emergency Patient Transport Service for renal patients and the general Non-emergency Patient Transport Service for other patients.

4. Our methods

We produced a questionnaire to gather feedback from renal patients and we visited the renal unit at University Hospital Coventry on 3 occasions on 10th, 11th and 14th December 2015 to talk to patients in the waiting area about their experience of the patient transport service and record their answers on the guided questionnaire (see appendix 1) . We visited at different times in order to speak to people who dialyse in both the morning and afternoon sessions.

We produced a separate online and paper survey for distribution to local people (see appendix 2). The paper survey was designed to be distributed by UHCW staff and we linked with the hospital via the patient involvement team. We specifically wanted the survey to reach departments and specialties where people were more likely to be users of the patient transport service eg:

- Oncology Clinics
- Discharge lounge
- Orthopaedics

This survey was also promoted via the Healthwatch Coventry website and a number of other channels such as voluntary sector organisations and Healthwatch Warwickshire.

Due to the initial response rate being low Healthwatch staff and volunteers undertook visits to outpatient waiting areas within the hospital in Coventry in order to complete surveys with people using PTS and to hand them out. Visits took place on:

| | |
|---------------------|-------------------|
| Thursday 14 January | 10.00am - 12.00am |
| Thursday 14 January | 1.15pm - 3.30pm |
| Tuesday 19 January | 10.00am - 12.00am |
| Friday 22 January | 1.45pm - 4.00pm |

We distributed a short survey aimed at clinic staff to gather their views on the patient transport service (see appendix 3).

We requested information from UHCW regarding Patient Advice and Liaison Service (PALS) enquiries and complaints related to the patient transport service logged with the trust.

5. Findings: transport for renal patients

5.1 Respondents

20 people were interviewed. The range of time respondents had been using the patient transport service ranged between 1 week and 19 years. Eight respondents were on the morning dialysis cycle; five the afternoon cycle, one on the evening and six did not answer.

We gathered the views from 10 women and 9 men (one person did not answer).

| Ethnicity | No. of respondents |
|---------------|--------------------|
| African | 1 |
| White British | 10 |
| Indian | 4 |
| White Irish | 2 |
| Other | 2 |
| Not stated | 1 |

| Age range of respondents | No. of respondents |
|--------------------------|--------------------|
| 35-44 | 1 |
| 45-54 | 4 |
| 55-64 | 1 |
| 65-74 | 7 |
| 75+ | 7 |

5.2 Means of transport

10 respondents were transported by the WMAS patient transport ambulances and seven by the Community Transport Service patient transport mini-buses, three did not answer this question. However, one patient who usually travels by ambulance was transported in a taxi on the day we spoke to them.

It was explained to us that the split between different vehicles was related to how much support the patients needed.

5.3 Journey to the unit

5.3.1 Collection from home

The standards in the contract vary depending on how far people live from the dialysis unit. Therefore we asked people to say how far away they lived or to give us their post code so that we could work this out.

| Distance home to dialysis unit | No. |
|--------------------------------|-----|
| 0-5 miles | 11 |
| 6-15 miles | 7 |
| 16-25 miles | 2 |

For the two people who lived over 15 miles away from the Unit one was on their first dialysis session at the unit and one had been travelling to the unit for three months.

The contract states the patients should be collected for their journey to the unit:

- Up to 45 minutes before appointment time if you live less than 15 miles away
- Up to 75 minutes before appointment time if you live more than 15 miles away

18 people lived under 15 miles from the unit. They said that on that day they were collected for their journey to the unit as follows:

| Collection time for those living under 15 miles from unit | No. |
|--|------------|
| Early: 1-15 minutes | 11 |
| Early: 16-45 minutes | 0 |
| Early: 46 minutes to 1 hour 15 minutes | 2 |
| Late: 1-30 minutes | 4 |
| Did not answer | 1 |

Therefore six people were not collected in accordance with the contract standard. Very early collection lengthens the day for people who will already be dialysing for four hours, may need recovery time and then need to travel back home.

Late collection may mean that people arrive late for their dialysis time slot, which will have a knock on impact for other patients during the day. However for this sample one of the people who was collected late arrived at the dialysis unit 1-20 minutes early; two were on time and one was 15-30 minutes late.

For the two people living over 15 miles away one was collected 1-15 minutes early and one 46 minutes to 1 hour 15 minutes early. This means one collection met the contract standard one did not.

5.3.2 Length of time on transport

The contract states that service users should be on the patient transport vehicles for:

- Less than 45 minutes for journeys within 15 miles of the hospital or appointment
- Less than 75 minutes for journeys of more than 15 miles but within the Arden area

| Length of time on patient transport vehicle: those living within 15 miles of unit | No. |
|--|------------|
| Less than 45 minutes | 17 |
| Did not answer | 1 |

| Length of time on patient transport vehicle: those living over 15 miles from unit | No. |
|--|------------|
| Less than 30 minutes | 1 |
| 46 minutes to 1 hour 15 minutes | 1 |

Therefore all the respondents had a length of time on the vehicle within contract standards.

We also asked about how many pickups/patients were sharing the vehicle on the inbound journey because in the past the number and routing of picks-ups caused delays.

We found that 12 respondents did not share the vehicle, one had one other pick up and five had two pickups. Two did not answer this question.

5.3.3 Arrival time at the unit

Patients should arrive at the unit within 20 minutes before their appointment time. Respondents told us they arrived as follows:

| Arrival time at Renal Unit | No. |
|----------------------------|-----|
| Early: 1-20 minutes | 8 |
| Early: 21-30 minutes | 5 |
| Early: 31-60 minutes | 2 |
| Late: 15-30 minutes | 2 |
| Late: 31- 60 minutes | 1 |
| Not known | 2 |

This means that 10 did not arrive within 20 minute before their appointment time. One explained they had been delayed due to an obstruction in their road.

5.4 Journey home from the unit

5.4.1 Waiting time

The latest draft of the service specification for renal patient transport we saw said: *All patients shall be collected within 60 minutes of request. [Given the nature of the service the dialysis treatment time is for the majority of cases known therefore the collection time should be known should be aligned with the treatment time rather than being individually requested.*

Two respondents told us they did not use the non emergency patient transport service for their journey home, they made their own arrangements.

Respondents told us they waited for the following times for their journeys home:

| Waiting time before journey home | No. |
|----------------------------------|-----|
| Less than 15 minutes | 4 |
| 15-30 minutes | 5 |
| Over 1 hour to 2 hours | 4 |
| More than 2 hours | 1 |
| N/A | 2 |
| No answer | 4 |

One patient had waited for 3 hours to be collected for their journey home the previous Friday (survey completed on Monday). They had been ready to go home at 6:30 pm. They reported that their usual waiting time for their home bound journey was at least 2 hours. They had also been collected early on their inbound journey with the collection booked at 1:30 pm and taking place at 12:30. Therefore they felt that the service had got worse since April 2015.

This patient highlighted that at the time they finished dialysis there was no one on the reception desk for the renal dialysis unit and therefore they had to catch a nurse in order to contact someone about delayed transport. They felt that patients should be able to call WMAS themselves at this time.

This patient lived in Nuneaton and was transported by PTS ambulance.

5.4.2 Time spent on vehicle on journey home

Again the contract standards are for time on the vehicle to be:

- Less than 45 minutes for journeys within 15 miles of the hospital or appointment
- Less than 75 minutes for journeys of more than 15 miles but within the Arden area

| Length of time on patient transport vehicle | No. |
|---|-----|
| Less than 30 minutes | 11 |
| 31-45 minutes | 1 |
| 46 minutes to 1 hour 15 minutes | 0 |
| More than 2 hours | 1 |
| Don't know | 1 |
| N/A | 4 |

For the two patients living more than 15 miles from the unit one had not yet experienced a return journey and the other spent 31-45 minutes on the vehicle.

5.4.3 Other patients sharing the vehicle

For the journey home respondents told us the following about how many shared the vehicle:

| No. of drop offs | No. of respondents |
|------------------|--------------------|
| None | 6 |
| Yes 1 | 2 |
| Yes 2 | 4 |
| Yes 3 or more | 1 |
| No answer/N/A | 7 |

The person who spent one to two hours on the vehicle had three or more pickups and they were travelling to CV12. Unfortunately, this respondent had also experienced an early collection from home and early drop off at the unit further extending their experience.

Some respondents indicated that the number of pickups/drop offs on their journey (inbound and outbound) varied and that the number had an impact on the overall time on the vehicle:

“Depends upon how many people are accompanying”

Sharing a vehicle on the way home may also cause delay because the other patients may be slower coming off dialysis, this may be because those patients were late in starting dialysis or because of issues such as bleeding when they come off:

“You are in the waiting room until other patients finish, it can be a long time”

5.4.4 Average waiting time to be collected to go home in the last month

We also asked about peoples’ average waiting time to go home in the last month to check if their last experience was typical. In response to this question people said they waited:

| Average waiting time for collection to go home | No. of respondents |
|--|--------------------|
| Less than 15 minutes | 3 |
| 15 to 30 minutes | 2 |
| Over 30 minutes to 1 hour | 6 |
| Over 1 hour to 2 hours | 1 |
| More than 2 hours | 2 |
| Don't know | 5 |
| 1 st visit | 1 |

Two of the people with long waits felt that the service overall had got worse since April 2015.

We gathered the following comments about average waiting time for collection in the last month:

- *“Sometimes quite quick, sometimes a long time”.*
- *“It depends on how many patients are being taken on the minibus”.*
- *“straight away often, occasionally 1-2 hours”*

One patient reported that the previous Friday they left the unit at 20:45 when it was supposed to be collection at 18:10 and that this pattern had happened 3 times since April 2015. Therefore, they felt the service was *‘very poor’* and that timeliness needed to improve.

5.4.5 Differences between morning and afternoon transport

For the eight people dialysing in the morning seven were collected to go to the unit as per the contract timings for the distance they lived from the Unit and one did not say.

Two arrived slightly late to the unit and then had a short wait of 15-30 minutes to start dialysis. Three arrived at the unit on time and two arrived early: one 31-60 minutes and the other 21-30 minutes.

For the five people on the afternoon dialysis session all were collected within contract timings. Two arrived on time; two were 21-30 minutes early and one was 31-60 minutes early at the unit.

Waiting time before journey home for those dialysing in afternoon and evening:

| Wait on the day of survey | Average waiting time in last month |
|---------------------------|------------------------------------|
| Less than 15 minutes | 15-30 minutes |
| 15-30 minutes | Over 30 minutes to 1 hour |
| 15-30 minutes | Over 30 minutes to 1 hour |
| Less than 15 minutes | Over 30 minutes to 1 hour |
| 15-30 minutes | Less than 15 minutes |
| 15-30 minutes | 15-30 minutes |
| Less than 15 minutes | Less than 15 minutes |
| Over 1 hour to 2 hours | Over 30 minutes to 1 hour |

This data shows that four people said that their average waiting time to go home was longer than the time they had waited to go home for their dialysis session immediately prior to our survey. Two people reported that the average wait was less; however for one the wait was still long at 30 minutes to 1 hour.

One respondent reported a variable service with a long wait of 2 hours on the return to home journey. They had arrived at 12:15 pm by PTS ambulance, one hour before their dialysis start time. Over the last month they said of their wait for the journey home: *'sometimes quite quick sometimes along time'*. For their previous dialysis session the Wednesday before we spoke to them on Friday they had waited two hours to go home. Their overall assessment of the service was: *"It has improved a little but still quite poor if you use an ambulance"*.

Another respondent who used a PTS ambulance commented: *"It is frustrating not to know the exact time of pick up - considering [my] dietary needs etc"*.

A third said: *"Pick up ok, taking home problem"*.

A fourth said: *"Was on the morning dialysis session but was changed to afternoon. Patient Transport was unreliable in the morning"*. This patient reported long delays in the afternoon too.

Therefore whilst the data collected for the most recent journeys for those we spoke to does not indicate a strong link to longer delays in the afternoon we collected other evidence to support this hypothesis from respondents' assessments of the average waiting times over the last month and the comments we collected related to the PTS ambulance.

5.5 Satisfaction with the service

5.5.1 Dignity/privacy and comfort

We asked to what extent respondents thought their dignity and privacy was respected by either community transport or WMAS ambulance staff during pick up(s) and journeys and received the following answers:

Very well 8 Well 9 Did not answer 3

We asked how comfortable people found their journeys in the Non-emergency Patient Transport vehicles and people rated this as follows:

Very comfortable 4 Comfortable 11 Uncomfortable 2 No answer 3

We collected the following specific comments regarding dignity and comfort:

- *“Drivers are lovely*
- *I'm well looked after*
- *Staff good*
- *Good service*
- *Look after us quite well*
- *Some of seats are narrow. Don't like seat facing backwards, can't do this but repeatedly have to sit backwards*
- *Timeliness needs to improve*
- *Generally good. Had one experience inappropriate language from driver - no longer employed*
- *the bumps and pot holes on the road don't make the journey comfortable”*

5.5.2 Rating of service overall

We asked respondents to rate the service overall:

Very Good 3 Good 13 Poor 0 Very poor 1 No answer or N/A 3

Despite the comments we collected about long waits, and other issues for some only one respondent rated the service as very poor and none rated it as poor.

5.5.3 Has the service changed since April 2015?

We asked people if the PTS had changed since April 2015 and seven people responded that the service had improved to some extent or a lot since the introduction of the new contract in April 2015. However this is a third of the sample. Specific comments we gathered are:

Positives:

- *“A much better service now”*
- *“The service has improved greatly”*
- *“It has got much better since Community Transport took it over”*
- *“For the better - Ambulances, taxis, community transport (prefer this)”*
- *“It's got better”*
- *“Better pickups”*
- *“We don't have so many late pickups. Less number of lateness occasions”*
- *“Been on dialysis since June, service has been pretty good”*

Negatives:

- *“If anything it has got worse”*
- *“Got worse”*
- *“Not improved”*
- *“Need to be on time”*
- *“More drivers needed, drivers taken off to do other jobs - not acceptable”.*

Other comments:

- One patient travels from Bulkington and the Community Transport only covers Coventry currently. But her ambulance service is generally good and is improving.
- *“The current vehicles are rather large - smaller size could be better and economical.”*

We spoke to two staff on the Dialysis Unit and they thought that the service had improved noticeably. They said that patients favoured the community transport service bus as this was more reliable. Ambulances can get called away to emergencies or other work.

5.5.4 PTS Community Transport Service

During one of our visits to the renal dialysis unit we spoke to a driver from Community Transport service and he explained the service had 2 dedicated minibuses for renal patient transport and that they cover the Coventry area.

For example: on Thursday 10 December 2015 PTS Community Transport brought 7 patients between 8-9am and took 4 home at lunchtime. At lunchtime they brought

in 5 patients and at tea time took home 4 patients. This was said to be a light clinic and that other days can be busier.

5.5.5 Journey Booking

Booking of patient transport journeys has changed: patients now book their transport themselves and staff said that this seemed to work well. Patients receive a letter every three months to remind them to renew their transport.

5.5.6 Problem solving

WMAS have a patient transport manager for the renal department who was said to be often on site. It is their job to problem solve. During our visit on 14 December we observed that the patient transport manager left the unit to take a patient home; this patient had been left behind due to no crew to take them.

We observed that the patient transport manager was having long waits in trying to get through on the phone to the ambulance control centre and we discussed this with reception staff who confirmed that this could be an issue; for example the manager spent 40 minutes trying to get through that day.

There is also an issue with reception staff cover in the Unit as one reception staff member was off on sick leave (long term) and the other works 3 days per week. This means that the reception desk will not be staffed for significant periods when there are people waiting for their patient transport home. This issue was specifically brought up by one patient who seemed to experience frequent long delays for his PTS ambulance transport home from dialysis. This was scheduled for the early evening, meaning that there were no reception staff around to help find out information if there were delays.

6. Findings: general patient transport service

This part of the patient transport service transports all other patients, who meet the criteria, to their hospital appointments/treatment and patients home from hospital.

6.1 Respondents

46 people completed the questionnaire. We asked when people had last used the patient transport service, 45 had used it within the last 6 months and one more than 6 months ago. We have not included the data for the response from the person who had used it over 6 months ago as this was in 2012. 30 respondents were female; 13 were male and two did not answer.

| Age | No. |
|----------------|------------|
| 45-54 | 8 |
| 55-64 | 11 |
| 65-74 | 9 |
| 75+ | 16 |
| Did not answer | 1 |
| TOTAL | 45 |

| Ethnicity | No. |
|------------------|------------|
| British | 34 |
| Irish | 5 |
| Eastern European | 1 |
| African | 1 |
| Indian | 3 |
| Other | 1 |
| TOTAL | 45 |

6.2 How far people travelled

The standards in the contract vary depending on how far people live from the hospital they are travelling to. Therefore we asked people to say how far away they lived or to give us their post code so that we could work this out. We also gathered information about which hospital they were travelling to.

| Distance between home to hospital | No. of respondents |
|--|---------------------------|
| 0-5 miles | 18 |
| 6-15 miles | 20 |
| 16-25 miles | 5 |
| 26-50 miles | 1 |
| Not stated | 1 |

| Where people were travelling to | No. of respondents |
|--|---|
| UHCW - Walsgrave site | 43 |
| UHCW - Hospital St. Cross Rugby | 1 |
| George Eliot Hospital | 1 |
| Other | NHS Employee bringing patient from George Eliot |

We asked respondents about the treatment or appointment they were travelling for:

| Reason for journey | No. of respondents |
|---|---------------------------|
| Outpatient appointment | 32 |
| Admission to hospital | 1 |
| Day case treatment | 7 |
| Discharge from hospital | 2 |
| Discharge from emergency department of hospital | 1 |

Other reasons given:

- Neuro appointment
- Emergency admission
- Radiotherapy
- Amputee clinic appointment every Tuesday morning - use WMAS every week

6.3 Journey to the hospital

6.3.1 Waiting time for collection

The contract states the patients should be collected for their journey to the hospital:

- Up to 45 minutes before your appointment time if you live less than 15 miles away
- Up to 75 minutes before your appointment time if you live more than 15 miles away

A) Those living within 0-15 miles away from hospital

17 people out of 38 were collected from home within the time period specified in the contract:

| Collection from home | No. |
|---|-----|
| 1-45 minutes early | 17 |
| 46 minutes - 1 hour 15 minutes early | 4 |
| Over 1 hour 15 minutes to 2 hours early | 3 |
| 1 - 30 minutes late | 4 |
| 31 minutes to 1 hour late | 2 |
| Over 1 hour to 2 hours late | 0 |
| More than 2 hours late | 1 |
| Don't know/no answer | 7 |
| TOTAL | 38 |

One person said they had been given a 3 hour time slot

B) Those living more than 15 miles away from hospital

Two patients were collected within the contract timings and three were collected late:

| Collection from home | No. |
|---------------------------|-----|
| 1-45 minutes early | 2 |
| 1 - 30 minutes late | 2 |
| 31 minutes to 1 hour late | 1 |
| Don't know/did not answer | 2 |
| TOTAL | 7 |

6.3.2 How many patients shared the vehicle

15 patients travelled in a vehicle alone and 27 with one or more other patients:

| In bound journey | No. of respondents |
|---------------------|--------------------|
| No other pick ups | 15 |
| 1 pickup | 10 |
| 2 pickups | 13 |
| 3 or more pick up's | 4 |
| Did not answer | 3 |

6.3.3 Length of journey and arrival time

The contract states that the time spent on the vehicle should be:

- Less than 45 minutes for journeys within 15 miles of the hospital or appointment
- Less than 75 minutes for journeys of more than 15 miles but within the Arden area

For those living within 15 miles five spent longer on the vehicle than the contract states:

| Length of time on the patient transport vehicle people living within 15 miles: | No. of respondents |
|--|--------------------|
| Less than 45 minutes | 30 |
| 46 minutes - 1 hour 15 minutes | 5 |
| 1 hour 16 minutes to 2 hours | 0 |
| More than 2 hours | 0 |
| Don't know | 3 |

For those living over 15 miles away, four spent a time on the vehicle within the contract standards and two did not:

| Length of time on the patient transport vehicle people living over 15 miles | No. of respondents |
|---|--------------------|
| Less than 75 minutes | 4 |
| 1 hour 16 minutes to 2 hours | 0 |
| More than 2 hours | 2 |
| Don't know | 0 |

When asked when people arrived compared to their appointment slot (if they had one) and found that five were on time, eight were over 30 minutes early and three were over 30 minutes late (with one more than 2 hours late):

| | |
|---|----------|
| On time: ie no later the 5 minutes after appointment time | 6 |
| 1-20 minutes early | 11 |
| 21- 30 minutes early | 6 |
| 31 - 60 minutes early | 6 |
| Over 1 hour to 2 hours early | 2 |
| 6 -20 minutes late | 2 |
| 21 -30 minutes late | 1 |
| 31-59 minutes | 2 |
| Over 1 hour to 2 hours late | 0 |
| More than 2 hours late | 1 |
| No particular time allocated | 2 |
| Don't know | 6 |

Reasons for delays given by respondents:

- Traffic x 3
- Two people already picked up before me
- Not told why they were late
- Other people on board
- Never given a time - just 2 hour slot. Taxi arrived.

Problems highlighted by respondents related to their arrival time:

- *“Wait usual 3 hours*
- *Missed appointment, had to go home and re-arrange*
- *NHS Employee regularly brings patients from George Eliot. Getting here is ok but often returning is a problem. They first wait in the waiting room for hours. So much so that the woman I spoke to brings an NHS lunch box for the patient*
- *Waiting around - patient has dementia which caused confusion. Carer reassuring all the time.*
- *Mum was left alone until I arrived. The ambulance crew should stay with the patient until escorts or family arrive. She was so disorientated by the time I arrive as she has dementia*
- *Ambulance driver did notify clinic of late arrival (on route there so consultant would not leave before my arrival). Had I arrived on time for my appointment, I may not have had to wait the extra 1 1/4 hours, as the photographer would not have gone to lunch and my notes instantly available following seeing consultant.*
- *Longer waiting*
- *They had to slot me in”*

6.4 Journey home

6.4.1 Waiting time for collection

The Contract states that for pre-booked collection after outpatient appointments, treatment and day cases, and for transport for hospital discharges, all patients shall be collected within 60 minutes of request (with a 98% achievement of this standard).

We asked people how long they had waited for the patient transport service and if it had arrived earlier or later than planned/booked.

20 people reported that the transport arrived later than the booked/planned time; with four experiencing a delay of 21-60 minutes; five a delay of 1-2 hours and eight of more than 2 hours, meaning 12 people were not collected within the contract timing:

| When did transport arrive | No. |
|---|-----|
| Transport arrived earlier than booked/planned | 1 |
| Transport was at the time booked/planned | 3 |
| Transport was later than time booked/planned | 20 |
| Don't know | 8 |
| N/A or did not answer | 13 |
| TOTAL | 45 |

For those with transport collecting them later than planned the following detail was given:

| Time later than planned | No. |
|-----------------------------|-----|
| 1 -20 minutes late | 3 |
| 21-60 minutes late | 4 |
| Over 1 hour to 2 hours late | 5 |
| More than 2 hours late | 8 |
| TOTAL | 20 |

We gathered the following comments from patients:

- *“Waited 2+ hrs. Unable to book - I go to reception desk after treatment and they call them for me and I wait”*
- *“Told 3 hours slots”*

One patient had just finished appointment and ambulance had just been called - last time was in out-patients had to wait 2 hours.

One patient didn't know expected arrival time of transport but had been waiting 1 1/2 hours at time of survey.

6.4.2 How long spent on the vehicle on journey home

The contract states the following journey times:

- Less than 45 minutes for journeys within 15 miles of the hospital or appointment
- Less than 75 minutes for journeys of more than 15 miles but within the Arden area

We gathered the following information about journey times home showing that for those living within 15 miles 23 people were transported within the contract timings and four people were not. For those living over 15 miles away three were transported within the contact timings and two were not:

| Length of time on the patient transport vehicle people living within 15 miles: | No. of respondents |
|--|--------------------|
| Less than 45 minutes | 23 |
| 46 minutes - 1 hour 15 minutes | 4 |
| Don't know/did not answer | 11 |

| Length of time on the patient transport vehicle people living over 15 miles: | No. of respondents |
|--|--------------------|
| Less than 75 minutes | 3 |
| 1 hour 16 minutes to 2 hours | 1 |
| More than 2 hours | 1 |
| Don't know | 1 |

25 patients shared a vehicle on the journey home and 11 did not:

| Journey home: number of other drop offs | No. of respondents |
|---|--------------------|
| None | 11 |
| 1 drop off | 7 |
| 2 drop offs | 13 |
| 3 or more drop offs | 5 |
| N/A or no answer | 9 |

6.5 Quality of experience

6.5.1 Dignity/privacy and comfort

We asked to what extent patients felt their dignity and privacy was respected by PTS staff during your pick up(s) and journey:

| | | | | | | | | | |
|-----------|----|------|----|------|---|-----------|---|-----------|---|
| Excellent | 25 | Good | 15 | Poor | 0 | Very poor | 0 | No answer | 5 |
|-----------|----|------|----|------|---|-----------|---|-----------|---|

- *“Very polite and caring*
- *Drivers have been friendly, try to be patient and treat us nicely, different drivers there and back.*

- *Last time, the driver not very nice, said he had been waiting 3 minutes, he said he would only wait 5 minutes, I needed the toilet, he was horrid. BUT today's driver was very nice. He stopped the vehicle because I was sliding down, he repositioned me/the seat*
- *They look after me. Make sure I am safe/ok*
- *Drivers make me feel comfortable; friendly and welcoming”*

We asked how comfortable the journey was in the WMAS non emergency patient transport vehicle:

| | | | | | | | | | |
|-----------|----|------|----|------|---|-----------|---|-----------|---|
| Excellent | 10 | Good | 25 | Poor | 4 | Very poor | 1 | No answer | 5 |
|-----------|----|------|----|------|---|-----------|---|-----------|---|

- *“Ambulance are a bit bumpy, strapped in so feel secure*
- *On the larger ambulances the rear suspension is appalling, causing unnecessary pain due to the journey ride*
- *The seats are too new. They have not been used before*
- *Please ensure that the ambulance or car is well heated during the winter months.*
- *Some of the patients were in severe discomfort for a very very long journey”*

6.5.2 Experience overall

We asked how patients would rate their experience of the non-emergency patient transport service overall:

| | | | | | | | | | |
|-----------|----|------|----|------|---|-----------|---|-----------|---|
| Excellent | 14 | Good | 19 | Poor | 2 | Very poor | 5 | No answer | 5 |
|-----------|----|------|----|------|---|-----------|---|-----------|---|

We received the following comments to explain these ratings:

A) Positive:

- *“I got to my appointment on time; I didn't have to wait too long to come home; staff were polite and helpful*
- *Speed and proficiency dealt with - excellent staff - very caring. Both by emergency and non emergency staff.*
- *Staff were excellent and caring;*
- *I have to attend daily for 15 days. I was never late for an appointment and understood the sometimes long wait to go home. The drivers, without exception were very pleasant and helpful*
- *Some are helpful at what they do*
- *Drivers friendly, long waiting*
- *All good*
- *They gave me time to get of the ambulance, and made sure I was in my house before leaving me and made sure I was comfortable”*

B) Issues:

- *“Sometimes I have to wait too long to get home and I end up getting a taxi which I can't afford*

- *Because we waited over 4 hrs to go*
- *Ambulance and taxi staff were excellent, but we found it stressful waiting 4 hours to come home. We were very worried that we would miss the bed-time carers in which case my husband would be unable to go to bed*
- *Arrived in good time for appointment at 11.30am. Ambulance to take patient back arrived at 12.58 pm and patients appointment finished at 13.00pm, ambulance wouldn't wait. Staff had to re-book ambulance, when it arrived the driver wouldn't take patient as he was in a wheelchair. They had to re-book at 16.00. Ambulance came again and during the journey back, the driver braked hard, the patient fell and had to be taken to A&E as a result. He finally got home at 10.50pm*
- *It took an extraordinary length of time*
- *The amount of time, after the end of treatment that the transport arrived*
- *Not good - waiting to go back to hospital*
- *Waiting around - uncomfortable - drowsy after treatment*
- *Overall the service is very good, however, I find the waiting for transport home tiring, especially when I have had to wait 1 and 3/4 hrs for transport, after my treatment.*
- *Waiting for over 2 hours and it was cold in the ambulance. Overall it was good as wheelchair was provided from the clinic to the ambulance and nice music was on!*
- *There were no hospital wheelchairs available on arrival at the hospital, so delay whilst ambulance driver borrowed one (but could not keep with me during appointment). I do not take my own wheelchair as you cannot take it folded up, but have to sit in it in the rear of ambulance. Unfortunately no head rest and this jars my neck and back too much and so can be in more pain (Fortunately only vomited once but that was on way to hospital and having to sit for a few hours in soiled clothing and smelling of vomit. Also unable to take more drugs for extra pain as too soon after last dose (pain become worse because of jolting ambulance)*
- *This time was ok but in the past I have waited 4 hours to be picked up. Also used to come here for chemotherapy. Waited on average 2-3 hours for collecting. One time they didn't come, got a taxi”*

6.5.3 Reaching appointments in time

19 people said they had experienced being late for their appointment due to patient transport delays. Eight people said they had missed their appointment completely. Of these, seven people had experienced both being late and missing an appointment. We also asked when these experiences were in order to check that this was recently, with most giving specific dates or recent months such as:

- 7/5/15
- Mid 2015
- 6 months ago
- April, June, August

- July and September
- Just before Christmas 2015
- December 2015
- Jan 2016
- Did not turn up had to rebook for another day, (Monday 11 January 2016)
- 12/1/16 and 13/1/16
- Last week
- Last month
- Today
- 14/1/16 - x2

6.5 Booking transport

We asked if respondents had booked the patient transport themselves and most did and found this an easy process;

| | No. of respondents |
|----------------------------------|--------------------|
| Yes and this was easy to do | 21 |
| Yes but this was difficult to do | 4 |
| No someone else did | 14 |
| Don't know/did not answer | 5 |

- *“It took 3-4 minutes it was very easy to do”*
- *“Booking is easy, they talk you through it2*

Issues with booking highlighted:

- *“But no one told me I had to book for myself as well as my husband*
- *I had to hold for 50 minutes to talk to them*
- *Not easy - was on hold for ages (up to 1 hour)*
- *I tried 4 1/2 hours on the phone. It took me from 9.15 till 1.15 before I got through which cost me £15.00 on my EE Phone. But all the dates was checked by member of staff at Arden Centre”*

Clinic staff highlighted an issue related to booking saying that patients are not asked which clinic they are attending:

- *“System does not seem to be working well on booking. Patients book it themselves but are not asked which clinic they need to go to so this causes confusion and delays getting them to the right place”*

The following information about who booked the PTS service if the respondent didn't was given

- *My Cleaner*
- *Nurse*
- *The Secretary*

- *Hospital discharge team*
- *Ambulance service via a planner*
- *Staff at Wisdem Centre*
- *Care home manager x 2*
- *Carer at Ribbon Court*
- *Carer*
- *Senior nurse at clinic*
- *My Daughter*
- *Clinic receptionist*

6.6 Other comments

6.6.1 Positive comments

- *“Ambulance Service do their best. Packed lunch is offered if waiting time is longer than expected. This is important especially for diabetics who need to eat at regular times”*
- *“If you are late [for your appointment], the hospitals are generally good and slot you in, both Coventry and Rugby”*
- *“I would like to thank them. They do a good job, a very good job”.*
- *“The staff manning the ambulance are usually very good and the service generally gets me to my appointment on time”*

6.6.2 Delays

- *“Because of arriving late the clinic was closing. When I came out I had to go to the hospitality lounge to wait for someone to take me home - eventually got home at 8.45 pm”*
- *“We feel it is unacceptable to wait 4 hours for transport home. Our appointment was for 2.20pm. We arrived home at 8.05pm. A very stressful experience”.*
- *“Sort out the return journeys, 4-6 hours is too long to wait. Inform ambulance service if patient is in a wheelchair”.*
- *“After my treatment I feel ill and just wanted to get home, unfortunately I have a 2-3 hour wait for transport. This needs more vehicles on to reduce waiting”.*
- *“Please ensure the waiting time to return home is minimised to 1 hour or less”*

- *“We should not have to wait up to 4 hours or more just to being picked up to go back home. That has happened a lot of times”.*
- *“I waited 3 1/2 hour the first time and number two was next day ended up in the waiting room until 6.30 pm”*
- *“I have waited over 3 hours for an ambulance to pick me up from the fracture clinic, diabetic clinic and eye clinic. Something needs to be done about this. I am in a wheelchair, I am a diabetic and I find it hard to get a drink when I have waited so long and sometimes end up having a diabetic hypo. Otherwise a very good service”*
- *“I have had too many poor experiences in the past that I always worry I will be late or miss my appointment; sometimes people they [the PTS ambulance] call for are not ready (I always am) and this delays them; Why don't they use cars (sometimes I have one take me home - this is more comfortable; what about using volunteer drivers”*
- *“I travelled on the ambulance once with mum and had to pick other patients up on the way which is totally understandable for costs. However, on the return journey we had to wait over 2 hours before the ambulance came back. As Mum is incontinent not only was it embarrassing it was very unsettling. Each patient's needs should be taken into account and I am sure for those who use it a small donation would be acceptable if the services times were good”*
- *“On one occasion the receptionist booked a taxi for me because we waited so long and there were ambulances called to emergencies”*
- *“When they say be ready 1.5 hours before pick up, I think this is too early. It would be best to say 1 hour before”*

6.6.3 Routing issues

- *“People who send them [the PTS ambulance] out don't know the Coventry area- should ensure people from same post code in same ambulance - or neighbouring post codes. Have been in ambulance with people from opposite side of city when patient lives nearby not able to fill vacant seat”*
- *“Look at pick up times and appointment times and plan better”*

6.6.4 Resourcing

- *“Another company should do it. Ambulances are too busy”*
- *“Need more staff; more vehicles”*

- *“It was pointed out by hospital staff that there is insufficient resource to cope with wheelchairs and stretchers, therefore these people have to wait”*
- *“If they can't cope then they need to get someone else to do it who can cope with demand. I was told if I got a taxi they would take me off their bookings altogether and I'd have to re-apply”*

6.6.5 Wheelchairs

- *“I understand from the ambulance driver that all ambulance (since new ones on lease) can only take one wheelchair at a time (instead of 2 in same ambulance as previously) so there maybe longer waits for wheelchair users now. Ability to secure a strap to allow patients to take their own wheelchair (walking frame strapped to the side of vehicle, so patients can sit by the front part of the ambulance and not be jolted. Lease/purchase more ambulance cars or better large ambulances with good suspension/more comfort (seating)”*

6.6.6 Communication

- *“It would be helpful to know a more realistic pick up time. It would also be good to be told what is happening when I am waiting for an ambulance to take me home. I have waited for up to 5 hours without knowing if I had been allocated or been given ETA for the driver who is collecting me”.*

6.6.7 Other

- *“Ambulances don't carry any water for patients to have a drink to take medication with”*

One patient had been transported to the Arden Centre 20 times within the last few months and reports their experience:

They had arrived both early and late for their appointment and reported they had recently arrived late and recently missed their appointment completely.

On the journey home transport has been later than the time booked/planned from 21 minutes to 3 ½ hours late. And their length of journey ranged between 45 minutes to more than 2 hours on the transport home.

They had spent 4 ½ hours on the phone regarding patient transport bookings costing £15 in mobile phone charges.

However, they rated the service overall as Good.

6.7 Comments from clinic staff

6.7.1 We received five completed surveys from clinic staff. None thought that the patient transport service was better at getting people to appointments or the waiting time to go home had been reduced since April 2015.

6.7.2 Delays

Three said that delays on the journey to the hospital had a knock on impact on their clinics.

Staff respondents gave the following comments regarding delays for the journey home:

- *“We have experienced patients having to wait up to 3 hours for transport by ambulance after their treatment”*
- *“We have seen patients wait about 3 hours on average, often longer. I feel sorry for them and buy them food and drink sometimes. It’s awful, not fair on patients”*

Different perspectives were given about whether the time of day made a difference to reliability and waiting times for the patient transport service.

One staff member thought that morning patients got picked up quicker than afternoons, whilst another said they had seen those for morning appointments wait longer. Another said that late/evening calls tend to be more busy and delayed.

6.7.3 Communication

Three said communication with WMAS were poor and one that it was good, the following comments were made:

- *“Patients are not asked which clinic they require and this can cause delays getting them to clinic on time”*
- *“Makes staff feel bad for how long people wait. Patients will keep asking us to chase up WMAS for them and we often cannot get through. Wait 20 minutes sometimes”*
- *“We can’t get through for ages on the phone. Having to chase up transport. Told it will be another 20 minutes, never is. Always much lounge”*
- *“Coding for each step in the process seems to get mixed up. Patients receive a letter to book their transport 3-5 days before and have to call the booking office”.*

7. Data from UHCW

From the information provided to Healthwatch by UHCW regarding Patient Advice and Liaison Service (PALS) enquiries about non emergency patient transport service: three rated to eligibility for the patient transport service; 11 for information about the service and how to organise this; and five related to service issues:

| | |
|------------|--|
| 13/04/2015 | Chasing for transport for outpatient appointment |
| 21/04/2015 | Unhappy with ambulance booking, do not arrive on time or not at all |
| 01/05/2015 | Enquirer left voicemail asking for contact regarding ambulance transport that didn't arrive for an appointment for enquirer's father |
| 27/05/2015 | Patient has an outpatient appointment at UHCW on the same day he needs to attend Rugby St. Cross. PTS are refusing to make two trips on same day to different hospitals |
| 29/07/2015 | Patient attended an appointment at clinic 3 Patient was at wrong clinic ambulance service have dropped him off at wrong place staff have helped the patient to locate right area for appointment |

8. Conclusions and recommendations

8.1 Renal Patient transport

Overall our findings show a mixed picture regarding patient experience of the non emergency patient transport service and the delivery of the contract standards for the service for renal patients.

We heard from some patients and staff that they felt the service had improved since April 2015 in terms of how reliable they found it to be and the waiting and journey times they experienced.

The introduction of the community transport service minibuses to transport some patients has been a positive addition. Some patients also reported that individual taxi use took place.

Patients also rated dignity and comfort highly.

The longest delays and concerns about reliability were associated with WMAS PTS vehicles.

10 patients (half of the sample) did not arrive within 20 minute before their appointment time. Only one explained and outside reason for this: they had been delayed due to an obstruction in their road.

Waiting times for journey home are an issue. Healthwatch has campaigned for no more than a 30 minute wait and nine patients experienced and average waiting times of more than this with two reporting very long waits, and that this was not unusual for their journey. We also found some indications that journey waiting times are greater in the afternoon and early evening.

One person reported spending more than 2 hours on patient transport vehicle on journey home.

In this context the overall ratings of the quality of service we collected seem generous and may indicate that patients have fairly low expectations of the service as their starting point.

The issue of patients being alone in the renal dialysis unit waiting area when waiting for transport remains - this is due to the availability of reception staff and the WMAS Patient Transport Manager and these posts not covering all of the time when the unit is in operation.

The introduction of ambulance service staff member for problem solving seems positive however communication channel issues still exist in terms of getting through to the control centre and the flow of information regarding journey waiting times etc.

8.2 General patient transport service

The sample for this survey was smaller than we had hoped. However, we have collected rich information from those who responded due to the number of comments they made on their returned questionnaires. This was the first Healthwatch survey regarding the general patient transport service and therefore we do not have previous data to make comparisons with.

There are indicators from the comments of some patients and from the reduction in PTS related PALS enquiries logged by UHCW that the service may have improved for some. However the UHCW staff who provided us with information did not feel that the service had improved and we collected a large number of comments from survey respondents asking for changes/improvements or highlighting the waiting times they experienced.

The greatest issue reported related to PTS journeys home from the hospital. We received significant reports of long waits. 20 patients experienced a waiting time later than booked/planned, and of these five waited for 1-2 hours and 8 more than

2 hours. We also gathered information about previous delays, which patients had experienced since April 2015, through the comments made to us.

Once patients are collected, journeys home (time on the vehicle) are largely within the contract standards.

For the journeys to hospital 17 out of 38 patients living within 15 miles of the hospital were collected within contract timings and 14 (36.5%) were not. Most journeys meet the length of time on the vehicle standards, but the service is not meeting standards for arrival related to the appointment time/slot with variance early and late. Only three stated the traffic had been a factor in this. This resulted in 19 people saying they had experienced being late for their appointment due to patient transport delays and eight people saying they had missed an appointment completely.

The level of delays points to a capacity issue in the service.

There was a high rating for privacy and dignity on the PTS vehicles and praise for PTS ambulance staff. The overall rating of the service was also surprising high given the comments we collected regarding delays and the impact of this for patients.

Issues were highlighted regarding wheelchair users and their comfort on the vehicle and also restrictions on number of wheelchair users in vehicles, which need further exploration.

Hospital staff reported communication challenges in terms of liaison with the PTS service and whilst most patients found the PTS booking process was simple some reported issues getting through on the phone.

8.3 Recommendations

Patient transport service for renal patients

1. WMAS and commissioner to ensure that individual patients are not experiencing repeated long delays for any or multiple parts of their journey - undertake a review to identify any patients who have this kind of repeated experience and identify how to address this.
2. WMAS to review and improve communication mechanisms with the WMAS PTS control room so that there is a better flow of information and easier problem solving regarding delays to journeys.
3. WMAS to lead discussions with UHCW to identify a way for those patients waiting for patient transport outside of hours when the renal Unit's reception desk is staffed (with UHCW or WMAS staff) to make contact with the PTS service if they encounter long waiting times.

4. WMAS to build on the success of the Community Transport Service element of PTS by expansion to other geographical areas.

General patient transport service

5. Service commissioner and WMAS to review achievement of contract journey time standards, paying particular attention to delays reaching appointments/missed appointments, and waiting times for journeys home and how long waits for patients can be addressed.
6. Booking system - WMAS to ensure patients are asked which clinic they require when they book transport in order to avoid delays
7. Commissioner and WMAS to review provision for wheelchair users on PTS vehicles to see if improvement to comfort and capacity for transporting wheelchair users can be made.

9. Acknowledgements

Thank you to staff at UHCW who helped to distribute our questionnaires, to Healthwatch volunteers for helping to gather responses, local voluntary groups for helping publicise the survey and to all patient who took part in the survey.

10. Responses to recommendations from WMAS and CRCCG

10.1 Response from WMAS:

I am writing in response to the 'Patient experience of the non-emergency patient transport service in Coventry and Warwickshire t March 2016' that you so kindly sent to me for response.

I think it only fair to say thank you to you and your team on the hard work that was put into this report, from people attending University Hospital Coventry and Warwickshire (UHCW) site themselves and to those involved in the formulation of this extensive report.

Overall, your findings are pleasing and feel that you have captured the views of the patient's well. I also feel that information provided in this report will help me as a manager to improve the service for patients. The renal patients and staff were interviewed and spoken to in December 2015 and you say that you interviewed 20 patients. During December 2015 we undertook a total of 1127 journeys to UHCW renal unit.

I am pleased that the utilisation of the volunteers and Community Transport has been received well and we also feel that these are key to the delivering a quality service. One of our frustrations is that we would like to utilise this service more for those patients who require regular journeys to and from their treatment centre.

I will now address each of the recommendations highlighted as follows:

WMAS and commissioner to ensure that individual patients are not experiencing repeated long delays for any or multiple parts of their journey - undertake a review to identify any patients who have this kind of repeated experience and identify how to address this.

The key areas are about patients receiving their treatment at their nearest treatment centre, but as we know this is not always the case due to ongoing capacity issues within the renal network. Some patients still have to travel over 20 miles to their treatment three times a week. Again this is a major role for the renal coordinator, engaging and communicating with patients, and unit staff to ensure patient satisfaction is the priority.

The report mentions that some patients arrived earlier that 20 minutes prior to their appointment, this is sometimes due to the traffic around UHCW and again having to ensure that we arrive at the hospital in time to find wheelchairs for the patient. We also respect that patients attending the renal unit like to arrive early in order to get themselves weighed in and to arrange their personal belongings ready to undergo their treatment. One recommendation I

would make is that we ask patients if it is their preference to arrive prior to this time as we do consider the patient's choice to arrive earlier than the Key Performance Indicators (KPI's).

Waiting times are a concern and I do have plans to increase our community and volunteer services to support this. I appreciate we do have problems around lunch time and this is due to high capacity of patient movement both into and out of the unit and also due to the increase in patient traveling in their own wheelchairs.

We designed our vehicles to carry only one wheelchair, at a time in line with the activity forecasts but this activity has increased and we need to reduce and manage this increase. The coordinator is doing regular reviews with patients with the supports of the renal staff informing them of the benefit of walking to and from the vehicle with assistance from our staff if they can, we would not want to compromise patient safety.

Looking at the feedback from the general patient transport, this is again overall good but the main trend are with patient suffering significant delays when being collected from hospital to home. I do not wish to proportion blame but we have had ongoing issues with the wheelchair availability at the UHCW site. This affects not only our service users but also patients making their own way to their appointments at UHCW.

The delays caused by staff trying to locate chairs on the site does create a significant impact on our delivery of service and staff have reported that they have on occasions taken up to 40 minutes to locate a wheelchair within the hospital. Since this survey was undertaken we have worked with the volunteers within UHCW to have two chairs designated to our staff and patients and have recently introduced the Ambulatory porters. These staff are on site assisting with the unloading of patients arriving at the hospital and the collection of patient from the wards and outpatient areas. This is to assist in reducing the turnaround times for vehicles and in turn reducing the waiting time for patients.

WMAS to review and improve communication mechanisms with the WMAS PTS control room so that there is a better flow of information and easier problem solving regarding delays to journeys.

I am aware that there have been issues with staff contacting the control, but since the date of this survey the control room has been relocated locally to Coventry. The local control now operating six days a week working from 07:00-22:00 hours. This has not solved all the problems but I would say it has improved communication and planning significantly.

West Midlands Ambulance Service NHS Foundation Trust are working closely with NHS England and renal representatives at UHCW on a number of key issues that are affecting the overall service delivery.

We have also recently implemented a text messaging system that patients can opt into. This updates the patient via text on the booking reference number, and also

will inform them when the vehicle has mobilised to collect them.

WMAS to lead discussions with UHCW to identify a way for those patients waiting for patient transport outside of hours when the renal Unit's reception desk is staffed (with UHCW or WMAS staff) to make contact with the PTS service if they encounter long waiting times.

The documented states that patients are waiting in the reception area with no renal staff available to assist them, unfortunately this is out of our control directly.

Further initiatives can be looked into as this has been raised and we would like to improve the patient experience. We will as a Trust approach UHCW to ask if we can place a phone in the reception area direct to our control for patients out of hours only.

This I believe will help the patient feel less vulnerable when left knowing that they can speak with someone. Control staff will also be undertaking further training on the duty of candour to help with honest and open communication.

WMAS to build on the success of the Community Transport Service element of PTS by expansion to other geographical areas.

Community transport is working well within the renal contract as these are regular patients being transported on set days and set times. We are able to cohort the patient to give the most effective transport to all those patient allocated to them.

We have looked at building on this in other areas and will continue to grow this part of our operating model to ensure all patient receive the benefits.

Service commissioner and WMAS to review achievement of contract journey time standards, paying particular attention to delays reaching appointments/missed appointments, and waiting times for journeys home and how long waits for patients can be addressed.

WMAS and the three commissioners attend regular meeting with acute leads and renal leads looking at activity and demand and also the overall performance of the contract.

There are some issues that are outside of both our control relating to some of the delays which as mentioned include wheelchairs, access to the UHCW site and also traffic issues around Coventry due to ongoing work and delayed work ongoing at Tollbar islands just to name a few.

Booking system - WMAS to ensure patients are asked which clinic they require when they book transport in order to avoid delays.

The booking staff are being given a script in which to follow when booking ambulance transport, we currently do ask which hospital the patient is attending

and which clinic. We rely on the information given to us by the patient, relative or carer at the time of booking.

Issues can arrive at the hospital when patients are taken to their clinic but then during their treatment they are moved to another area. If this information is not always shared with us.

Taking on board what has been raised we will ensure that our liaison assistant and porters on site communicate this to departments to ensure that we are aware if patients are moved.

Commissioner and WMAS to review provision for wheelchair users on PTS vehicles to see if improvement to comfort and capacity for transporting wheelchair users can be made.

One of the ongoing issues is the availability of wheelchairs at UHCW, we have found that we have had an increase in the number of patients wanting to travel in their own wheelchair which has created capacity issues for us.

We are actively working with the Commissioners, UHCW and renal unit staff to try and instill confidence to patients that the hospital are trying to resolve the ongoing issues. In an effort to help resolve some of the problems, we have placed our own wheelchairs on site to assist those who are not able to make the journey from the drop of point to the department.

I am also very pleased to hear that the introduction of the renal coordinator has also been seen as an improvement in the overall service. The role of the coordinator has helped significantly with the implementation of the new eligibility criteria; he is also a member of the renal patient forum meetings.

The only comment I would make around the questionnaires is that I feel they are too long, we understand that we want an overall view and within the contract we have to deliver and report on a number of questionnaires but asking patient to complete a few questions will get a better response than asking them almost 20, this is only a personal observation.

West Midlands Ambulance Service NHS Foundation Trust is committed to delivering a first class, patient centred service to patients through a skilled and committed workforce. The content of this report is welcoming and I hope that the members who participated in this survey would welcome a partnership approach to improving the service for patients and other health care professionals.

I believe that we all strive to achieve the same objectives in patient care and services available to them and with the service we deliver I know that working together will only improve the overall patient experience.

Thank you for allowing the Trust to comment on these findings, as a Trust we welcome patient feedback so that we can learn from the experiences of the patients that we serve.

Should you wish to discuss the contents of this letter, or you would like to meet to discuss the initiatives being put in place for the renal and general patient, please do not hesitate to contact me on 07795 027 260.

Yours sincerely

Mrs Susan Bunyan
Senior Operations Manager for Arden

10.2 Response from CRCCG:

Thank you for your letter dated 10th March 2016, outlining your recent work on reviewing the patient experience of the non emergency patient transport service. Please find below CCG responses to each of your recommendations:

1. WMAS and commissioner to ensure that individual patients are not experiencing repeated long delays for any or multiple parts of their journey - undertake a review to identify any patients who have this kind of repeated experience and identify how to address this.

CCG Response: As you are aware the Arden CCGs recently retendered the NEPTS revising and increasing the KPI targets in a bid to improve the patient experience. We continue to monitor these on a monthly basis with the provider in order to sustain a high quality service. Where improvement of a KPI is necessary the CCG has agreed Remedial Action Plans in place and use all contractual levers, as applicable to improve performance to the required level. We also monitor and review any patient complaints by type/theme on a monthly basis via the contract review process and ensure that any issues/trends are identified and addressed, as applicable.

2. WMAS to review and improve communication mechanisms with the WMAS PTS control room so that there is a better flow of information and easier problem solving regarding delays to journeys.

CCG Response: As per the WMAS response; the CCG can confirm that the NEPTS has recently relocated their control room to Coventry and extended the operating hours of the local service to help elevate these communication issues. The CCG can also confirm that there is a Remedial Action Plan in place to improve the 'call handling response times'.

3. WMAS to lead discussions with UHCW to identify a way for those patients waiting for patient transport outside of hours when the renal Unit's reception desk is staffed (with UHCW or WMAS staff) to make contact with the PTS service if they encounter long waiting times.

CCG Response: As per the WMAS response, the provider is working to ensure that all patients are aware of how to contact the NEPTS control room when UHCW

Renal Staff are not available. The CCG will also raise and discuss this issue at the Contract Operational Meeting attended by the CCGs, Provider and Acute Trusts to ensure that this idea for improvement is taken forward and formalised.

4. WMAS to build on the success of the Community Transport Service element of PTS by expansion to other geographical areas.

CCG Response: The CCG and provider will continue to review and adapt the community transport service coverage in line with current requirements and within the terms of the contract.

General patient transport service

5. Service commissioner and WMAS to review achievement of contract journey time standards, paying particular attention to delays reaching appointments/missed appointments, and waiting times for journeys home and how long waits for patients can be addressed.

CCG Response: As detailed above; we continue to monitor KPIs on a monthly basis with the provider in order to sustain a high quality service. Where improvement of a KPI is necessary the CCG has agreed Remedial Action Plans in place and use all contractual levers, as applicable to improve performance to the required level.

6. Booking system - WMAS to ensure patients are asked which clinic they require when they book transport in order to avoid delays

CCG Response: Patients are asked to provide this level of information when booking their NEPT journey via the Patient Booking Line.

7. Commissioner and WMAS to review provision for wheelchair users on PTS vehicles to see if improvement to comfort and capacity for transporting wheelchair users can be made.

CCG Response: WMAS purchased a fleet of new vehicles as part of the new contract award, based on the activity levels / journey types at the time of the tender. As WMAS have indicated the journey types have changed somewhat and we are working with them to address this and reduce unnecessary wheelchair journeys. We are currently satisfied that all vehicles are maintained and driven to a high standard to ensure maximum comfort for patients, regardless of the journey type/vehicle i.e. Walkers, Wheelchairs or Stretchers.

We hope that you find this information useful, along with the direct response you will receive from WMAS.

We note your disappointment that the sample for your survey was smaller than you had hoped and would echo WMAS' recommendation that a more concise questionnaire in the future may garner a higher response rate. However, we are pleased to see that positive feedback relating to the overall service is improving

and we will continue to work towards the delivery of a high quality transport for patients.

Yours sincerely,

Juliet Hancox
Chief Operating Officer
Coventry and Rugby CCG

11. Appendices

Appendix 1: Survey for people using the West Midlands Ambulance Non Emergency patient transport service

Section 1: About your most recent WMAS non emergency patient transport journey

Q1) What is the date today?

Q2) When did you last use the West Midland Ambulance Service non emergency patient transport service?

- | | |
|-----------------------|--------------------------|
| Today | <input type="checkbox"/> |
| Within the last week | <input type="checkbox"/> |
| Within the last month | <input type="checkbox"/> |
| 2-3 months ago | <input type="checkbox"/> |
| 4-6 months ago | <input type="checkbox"/> |
| Over 6 months ago | <input type="checkbox"/> |

Q3) For your most recent journey approximately how far away from the hospital or place you were being transported to or from do you live?

- | | | | |
|-------------|--------------------------|--------------------|--------------------------|
| 0-5 miles | <input type="checkbox"/> | 26-50 miles | <input type="checkbox"/> |
| 6-15 miles | <input type="checkbox"/> | More than 50 miles | <input type="checkbox"/> |
| 16-25 miles | <input type="checkbox"/> | Don't know | <input type="checkbox"/> |

If you are not sure please give us your postcode so we can work this out

Q4) For your most recent journey please say which hospital or service you were travelling to or from?

- | | |
|--|--------------------------|
| | (tick one) |
| UHCW - Walsgrave site | <input type="checkbox"/> |
| UHCW - Hospital St. Cross Rugby | <input type="checkbox"/> |
| George Eliot Hospital | <input type="checkbox"/> |
| South Warwickshire Foundation Trust- Warwick hospital | <input type="checkbox"/> |
| South Warwickshire Foundation Trust - Stratford hospital | <input type="checkbox"/> |
| South Warwickshire Foundation Trust - Ellen Badger Hospital | <input type="checkbox"/> |
| South Warwickshire Foundation Trust Royal Leamington Spa Hospital | <input type="checkbox"/> |
| South Warwickshire Foundation Trust Royal Leamington Spa Rehabilitation Hospital | <input type="checkbox"/> |
| Other (please say) | <input type="checkbox"/> |

Q5) What was the reason for your journey?

- | | | |
|---|--------------------------|-------------------|
| Outpatient appointment | <input type="checkbox"/> | |
| Admission to hospital | <input type="checkbox"/> | |
| Day case treatment | <input type="checkbox"/> | |
| Discharge from hospital | <input type="checkbox"/> | (go to section 3) |
| Discharge from emergency department of hospital | <input type="checkbox"/> | (go to section 3) |
| Other (please say what) | <input type="checkbox"/> | |

Section 2: For those who were collected from home by WMAS non emergency patient transport

Q6) Did the transport arrive to collect you from your home at the time you expected or had been told (please tick one box)?

Early:

| | | | |
|--------------------------------------|--------------------------|---|--------------------------|
| 1-15 minutes early | <input type="checkbox"/> | Over 1 hour 15 minutes to 2 hours early | <input type="checkbox"/> |
| 16 - 45 minutes early | <input type="checkbox"/> | Over 2 hours early | <input type="checkbox"/> |
| 46 minutes - 1 hour 15 minutes early | <input type="checkbox"/> | | |

Late:

| | | | |
|---------------------------|--------------------------|-----------------------------|--------------------------|
| 1 - 30 minutes late | <input type="checkbox"/> | Over 1 hour to 2 hours late | <input type="checkbox"/> |
| 31 minutes to 1 hour late | <input type="checkbox"/> | More than 2 hours late | <input type="checkbox"/> |

Don't know

Q7) How long did you spend on the WMAS non emergency patient transport vehicle (both when it was moving and if it was parked or stopped) during your journey to the hospital or appointment?

| | | | |
|--------------------------------|--------------------------|------------------------------|--------------------------|
| Less than 30 minutes | <input type="checkbox"/> | 1 hour 16 minutes to 2 hours | <input type="checkbox"/> |
| 31 - 45 minutes | <input type="checkbox"/> | More than 2 hours | <input type="checkbox"/> |
| 46 minutes - 1 hour 15 minutes | <input type="checkbox"/> | Don't know | <input type="checkbox"/> |

If your journey was delayed what was the reason for this (if you know)

Q8) Were any other patients picked up, before or after you, on your way to hospital?

| | | | |
|---------------|--------------------------|--------------------------|--------------------------|
| No | <input type="checkbox"/> | Yes- 2 pickups | <input type="checkbox"/> |
| Yes- 1 pickup | <input type="checkbox"/> | Yes- 3 or more pick up's | <input type="checkbox"/> |

Q9) When did you arrive, compared to your appointment slot (if you had one)?

On time: ie no later the 5 minutes after appointment time

Early:

| | | | |
|-----------------------|--------------------------|------------------------------|--------------------------|
| 1-20 minutes early | <input type="checkbox"/> | Over 1 hour to 2 hours early | <input type="checkbox"/> |
| 21- 30 minutes early | <input type="checkbox"/> | More than 2 hours early | <input type="checkbox"/> |
| 31 - 59 minutes early | <input type="checkbox"/> | | |

Late:

| | | | |
|---------------------|--------------------------|-----------------------------|--------------------------|
| 6 -20 minutes late | <input type="checkbox"/> | Over 1 hour to 2 hours late | <input type="checkbox"/> |
| 21 -30 minutes late | <input type="checkbox"/> | More than 2 hours late | <input type="checkbox"/> |
| 31-59 minutes | <input type="checkbox"/> | | |

No particular time allocated
 Don't know

If your arrival time led to any problems please say what

Section 3: about WMAS non emergency patient transport journey back to your home

Q10) How long did you have to wait for your patient transport home?

Don't know
Transport arrived earlier than booked/planned By minutes
Transport was at the time booked/planned
Transport was later than time booked/planned By minutes

If Transport was later than the time booked/planned how long was this by:

1 -20 minutes late Over 1 hour to 2 hours late
21-60 minutes late More than 2 hours late

Q11) How long did you spend on the WMAS non emergency patient transport vehicle on your journey home?

Less than 30 minutes 1 hour 16 minutes to 2 hours
31 - 45 minutes More than 2 hours
46 minutes - 1 hour 15 minutes Don't know

Q12) Were any other patients dropped off, before or after you, as part of your journey home?

No Yes- 2 drop offs
Yes- 1 drop off Yes- 3 or more drop offs

Part 4: Your overall experience

Q13) To what extent was your dignity and privacy by patient transport staff respected during your pick up(s) and journey?

Excellent Good Poor Very poor

Q14) How do you rate the comfort of your journey in the WMAS non emergency patient transport vehicle?

Excellent Good Poor Very poor

Q15) Overall how would you rate your experience of the patient transport service on this occasion?

Excellent Good Poor Very poor

Please explain your ratings below ie say what was good and what was not good

Q16) Did you book your patient transport yourself?

Yes and this was easy to do

Yes but this was difficult to do

Why was this?

Who as this?

No someone else did

Don't know

Q17) Thinking about any other experiences you have of the WMAS non-emergency patient transport service since April 2015...

Since April 2015 have you ever?

a) Arrived late for your hospital appointment or treatment because of problems with patient transport?

b) Missed your appointment completely because of delayed patient transport?

| No | Yes | If yes when was this? |
|--------------------------|--------------------------|-----------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | |
| <input type="checkbox"/> | <input type="checkbox"/> | |

Anything else you would like to say about patient transport or suggestions for change?

About you

What ethnic group would you say you are from?

White

British

Irish

Traveller/Romany

Eastern European

Other White (please say)

Mixed

White and Black Caribbean

White and Black African

White and Asian

Other Mixed (please say)

Asian or Asian British

Indian

Pakistani

Bangladeshi

Other Asian (please say)

Black or Black British

Caribbean

African

Other Black (please say)

Chinese or other ethnic group

Chinese

Other (please say)

Your gender

Male

Female

Transgender

Please indicate your age

| | | | | | | | |
|----------|--------------------------|-------|--------------------------|-------|--------------------------|-------|--------------------------|
| Under 16 | <input type="checkbox"/> | 25-34 | <input type="checkbox"/> | 45-54 | <input type="checkbox"/> | 65-74 | <input type="checkbox"/> |
| 16-24 | <input type="checkbox"/> | 35-44 | <input type="checkbox"/> | 55-64 | <input type="checkbox"/> | 75+ | <input type="checkbox"/> |

Thank You for Your Time - We Appreciate It

Please return this survey to:

Freepost RSZB-RKRJ-KSKK
Healthwatch Coventry
Voluntary Action Coventry
29 Warwick Road
Coventry
CV1 2EZ

Confidentiality and data protection

The information we are gathering from this survey will be used by Healthwatch to identify issues and good practice regarding patient transport services in Coventry and Warwickshire. The information you provide will be used anonymously. Personal contact details will be treated as confidential and will not be passed on to third parties without your consent. Data will be stored in accordance with the Healthwatch confidentiality and data protection policy

More information about us

Healthwatch Coventry can improve the services within your NHS and social care. If you want to find out more visit our website www.healthwatchcoventry.co.uk or call 024 7622 0381.

Optional

Would you like more information about Healthwatch activities and feedback on our findings from this survey? Yes No

If YES please give us the following details:

| | | | |
|----------------|----------|--------|--|
| Your name: | | Title: | |
| Address: | | | |
| | Postcode | | |
| Email address: | | | |
| Telephone no. | | | |

Appendix 2: Survey for people using the West Midlands Ambulance Non Emergency patient transport service

Section 1: About your most recent WMAS non emergency patient transport journey

Q1) What is the date today?

Q2) When did you last use the West Midland Ambulance Service non emergency patient transport service?

| | |
|-----------------------|--|
| Today | |
| Within the last week | |
| Within the last month | |
| 2-3 months ago | |
| 4-6 months ago | |
| Over 6 months ago | |

Q3) For your most recent journey approximately how far away from the hospital or place you were being transported to or from do you live?

| | | | |
|-------------|--------------------------|--------------------|--------------------------|
| 0-5 miles | <input type="checkbox"/> | 26-50 miles | <input type="checkbox"/> |
| 6-15 miles | <input type="checkbox"/> | More than 50 miles | <input type="checkbox"/> |
| 16-25 miles | <input type="checkbox"/> | Don't know | <input type="checkbox"/> |

If you are not sure please give us your postcode so we can work this out

Q4) For your most recent journey please say which hospital or service you were travelling to or from?

| | | |
|--|--------------------------|--|
| | (tick one) | |
| UHCW - Walsgrave site | <input type="checkbox"/> | |
| UHCW - Hospital St. Cross Rugby | <input type="checkbox"/> | |
| George Eliot Hospital | <input type="checkbox"/> | |
| South Warwickshire Foundation Trust- Warwick hospital | <input type="checkbox"/> | |
| South Warwickshire Foundation Trust - Stratford hospital | <input type="checkbox"/> | |
| South Warwickshire Foundation Trust - Ellen Badger Hospital | <input type="checkbox"/> | |
| South Warwickshire Foundation Trust Royal Leamington Spa Hospital | <input type="checkbox"/> | |
| South Warwickshire Foundation Trust Royal Leamington Spa Rehabilitation Hospital | <input type="checkbox"/> | |
| Other (please say) | <input type="checkbox"/> | |

Q5) What was the reason for your journey?

| | | |
|---|--|-------------------|
| Outpatient appointment | | |
| Admission to hospital | | |
| Day case treatment | | |
| Discharge from hospital | | (go to section 3) |
| Discharge from emergency department of hospital | | (go to section 3) |
| Other (please say what) | | |

Section 2: For those who were collected from home by WMAS non emergency patient transport

Q6) Did the transport arrive to collect you from your home at the time you expected or had been told (please tick one box)?

Early:

| | | | |
|--------------------------------------|--------------------------|---|--------------------------|
| 1-15 minutes early | <input type="checkbox"/> | Over 1 hour 15 minutes to 2 hours early | <input type="checkbox"/> |
| 16 - 45 minutes early | <input type="checkbox"/> | Over 2 hours early | <input type="checkbox"/> |
| 46 minutes - 1 hour 15 minutes early | <input type="checkbox"/> | | |

Late:

| | | | |
|---------------------------|--------------------------|-----------------------------|--------------------------|
| 1 - 30 minutes late | <input type="checkbox"/> | Over 1 hour to 2 hours late | <input type="checkbox"/> |
| 31 minutes to 1 hour late | <input type="checkbox"/> | More than 2 hours late | <input type="checkbox"/> |

Don't know

Q7) How long did you spend on the WMAS non emergency patient transport vehicle (both when it was moving and if it was parked or stopped) during your journey to the hospital or appointment?

| | | | |
|--------------------------------|--------------------------|------------------------------|--------------------------|
| Less than 30 minutes | <input type="checkbox"/> | 1 hour 16 minutes to 2 hours | <input type="checkbox"/> |
| 31 - 45 minutes | <input type="checkbox"/> | More than 2 hours | <input type="checkbox"/> |
| 46 minutes - 1 hour 15 minutes | <input type="checkbox"/> | Don't know | <input type="checkbox"/> |

If your journey was delayed what was the reason for this (if you know)

Q8) Were any other patients picked up, before or after you, on your way to hospital?

| | | | |
|---------------|--------------------------|--------------------------|--------------------------|
| No | <input type="checkbox"/> | Yes- 2 pickups | <input type="checkbox"/> |
| Yes- 1 pickup | <input type="checkbox"/> | Yes- 3 or more pick up's | <input type="checkbox"/> |

Q9) When did you arrive, compared to your appointment slot (if you had one)?

On time: ie no later the 5 minutes after appointment time

Early:

| | | | |
|-----------------------|--------------------------|------------------------------|--------------------------|
| 1-20 minutes early | <input type="checkbox"/> | Over 1 hour to 2 hours early | <input type="checkbox"/> |
| 21- 30 minutes early | <input type="checkbox"/> | More than 2 hours early | <input type="checkbox"/> |
| 31 - 59 minutes early | <input type="checkbox"/> | | <input type="checkbox"/> |

Late:

| | | | |
|---------------------|--------------------------|-----------------------------|--------------------------|
| 6 -20 minutes late | <input type="checkbox"/> | Over 1 hour to 2 hours late | <input type="checkbox"/> |
| 21 -30 minutes late | <input type="checkbox"/> | More than 2 hours late | <input type="checkbox"/> |
| 31-59 minutes | <input type="checkbox"/> | | <input type="checkbox"/> |

No particular time allocated
 Don't know

If your arrival time led to any problems please say what

Section 3: about WMAS non emergency patient transport journey back to your home

Q10) How long did you have to wait for your patient transport home?

Don't know
 Transport arrived earlier than booked/planned By minutes
 Transport was at the time booked/planned
 Transport was later than time booked/planned By minutes

If Transport was later than the time booked/planned how long was this by:

1 -20 minutes late Over 1 hour to 2 hours late
 21-60 minutes late More than 2 hours late

Q11) How long did you spend on the WMAS non emergency patient transport vehicle on your journey home?

Less than 30 minutes 1 hour 16 minutes to 2 hours
 31 - 45 minutes More than 2 hours
 46 minutes - 1 hour 15 minutes Don't know

Q12) Were any other patients dropped off, before or after you, as part of your journey home?

No Yes- 2 drop offs
 Yes- 1 drop off Yes- 3 or more drop offs

Part 4: Your overall experience

Q13) To what extent was your dignity and privacy by patient transport staff respected during your pick up(s) and journey?

Excellent Good Poor Very poor

Q14) How do you rate the comfort of your journey in the WMAS non emergency patient transport vehicle?

Excellent Good Poor Very poor

Q15) Overall how would you rate your experience of the patient transport service on this occasion?

Excellent Good Poor Very poor

Please explain your ratings below ie say what was good and what was not good

Q16) Did you book your patient transport yourself?

| | | |
|----------------------------------|--------------------------|---------------|
| Yes and this was easy to do | <input type="checkbox"/> | |
| Yes but this was difficult to do | <input type="checkbox"/> | Why was this? |
| No someone else did | <input type="checkbox"/> | Who as this? |
| Don't know | <input type="checkbox"/> | |

Q17) Thinking about any other experiences you have of the WMAS non emergency patient transport service since April 2015...

Since April 2015 have you ever?

- b) Arrived late for your hospital appointment or treatment because of problems with patient transport?
- b) Missed your appointment completely because of delayed patient transport?

| No | Yes | If yes when was this? |
|--------------------------|--------------------------|-----------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | |
| <input type="checkbox"/> | <input type="checkbox"/> | |

Anything else you would like to say about patient transport or suggestions for change?

About you

What ethnic group would you say you are from?

White

- British
- Irish
- Traveller/Romany
- Eastern European
- Other White (please say)

Mixed

- White and Black Caribbean
- White and Black African
- White and Asian
- Other Mixed (please say)

Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Other Asian (please say)

Black or Black British

- Caribbean
- African
- Other Black (please say)

Chinese or other ethnic group

- Chinese

Other (please say)

Your gender

Male

Female

Transgender

Please indicate your age

Under 16

25-34

45-54

65-74

16-24

35-44

55-64

75+

Thank You for Your Time - We Appreciate It

Please return this survey to:

Freepost RSZB-RKRJ-KSKK
Healthwatch Coventry
Voluntary Action Coventry
29 Warwick Road
Coventry
CV1 2EZ

By 4 March 2016

Confidentiality and data protection

The information we are gathering from this survey will be used by Healthwatch to identify issues and good practice regarding patient transport services in Coventry and Warwickshire. The information you provide will be used anonymously. Personal contact details will be treated as confidential and will not be passed on to third parties without your consent. Data will be stored in accordance with the Healthwatch confidentiality and data protection policy

More information about us

Healthwatch Coventry can improve the services within your NHS and social care. If you want to find out more visit our website www.healthwatchcoventry.co.uk or call 024 7622 0381.

Optional

Would you like more information about Healthwatch activities and feedback on our findings from this survey?

Yes

No

If YES please give us the following details:

| | | | |
|----------------|----------|--------|--|
| Your name: | | Title: | |
| Address: | | | |
| | Postcode | | |
| Email address: | | | |
| Telephone no. | | | |

Appendix 3: Survey for UHCW staff /managers about the West Midlands Ambulance Non Emergency patient transport service

Healthwatch Coventry is gathering feedback about the West Midlands Ambulance Service (WMAS) Non Emergency Patient Transport Service.

Healthwatch Coventry is independent from NHS organisations. We work to represent the interests of patients and the public. In the past we have gathered feedback about patient transport and used this to campaign for improvements - which led to commissioners investing more money in the service. We are following this up to see what has changed.

1. Name of hospital clinic, service or department

2. Form completed by (role)

3. Since the new contract with West Midlands Ambulance Service for the non emergency patient transport service began in April 2015:

Yes No Don't know

a) Does the patient transport service get a greater proportion of people to the hospital on time for their appointment/treatment time?

b) Have waiting times for the collection of patients by the service for journeys home reduced?

c) Overall would you say the service has improved?

If you have said NO please say what the problems are:

4. Does the time of day (morning, afternoon, evening) make a difference to whether the patient transport service is able to get people to appointment/treatment times on time?

yes

no

Don't know

If yes say how

5. Does time of day (morning, afternoon, evening) impact on how long patients wait to be collected by the service on their journey home?

yes

no

Don't know

If yes say how

6. How easy and effective do you find communication with West Midlands Ambulance Service regarding journey problem solving or changes to journey plans?

Excellent

Good

Poor

Very poor

7. Are there any issues or knock on impacts on UHCW services/treatment arising from the non emergency patient transport which you would like to be addressed?

yes

no

Don't know

Please say what

8. Any other information you think would be useful for us

Thank you for your time

Please return this survey to:

Freepost RSZB-RKRJ-KSKK
Healthwatch Coventry
Voluntary Action Coventry
29 Warwick Road
Coventry
CV1 2EZ

The information we are gathering from this survey will be used by Healthwatch to identify issues and good practice regarding the patient transport service in Coventry and Warwickshire. We will produce a report of our findings, which does not identify individuals, to be sent to the commissioner of the service.

Find out more about Healthwatch Coventry at www.healthwatchcoventry.co.uk

or contact 024 7622 0381.

healthwatch
Coventry

29 Warwick Road
Coventry
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024 76220381

Email: healthwatch@vacoventry.org.uk
www.healthwatchcoventry.co.uk



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