

Outpatient Service Engagement

October 2022

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Healthwatch Herefordshire

Healthwatch is your consumer champion for health and social care. We are local people working for you, to represent the views of children and adults. We are inclusive, and we want people from every part of the community to participate.

As part of a national scheme, every local council in England has their own Healthwatch. The national body, Healthwatch England, gives advice and guidance to local Healthwatch. Healthwatch England is a statutory body, and an independent committee within the Care Quality Commission, accountable to the Secretary of State for Health.

What we do:

- Listen to your views
- Improve services today and shape them for tomorrow
- Make your needs known to those who plan services
- Provide information about how to access services
- Champion fairness, equal access and treatment
- Speak up on your behalf

What it means for you: Health and care services work best when they are shaped by people like you, and others like you. Together with Healthwatch, you can influence the design of health and social care services and how they function. It is not only for people who use the services now but anyone who might need them in the future. It belongs to you: children, young people and adults. It reflects you and your local community.

Introduction

Background

Wye Valley Trust provide acute and community health services in Herefordshire at The County Hospital; the Community Hospital sites in Bromyard, Leominster and Ross on Wye; the Child Development Centre; Community Health Services at Belmont; and a range of home visiting services such as district nursing and therapy services.

There are approximately 270,000 outpatient appointments provided a year.

Wye Valley Trust are currently reviewing Outpatients services and Healthwatch Herefordshire is undertaking an exercise to ask patients about their experience of using the services in the last six months.

With long waiting lists and the impacts from the Covid-19 pandemic, there is a need to make sure these services are efficient and making best use of available technology, as well as appropriate forms of communication to meet the needs of patients.

In addition to patient engagement, Wye Valley Trust will be consulting with members of staff to gain their input on outpatient service improvement.

What We Did

Healthwatch Herefordshire, in collaboration with the Outpatient Transformation team at Wye Valley Trust, designed a questionnaire to explore a number of the Outpatient experiences, such as; which department the patient had used, communication regarding the appointment; getting to the appointment; the waiting room; the level of care received in Outpatient services; delays; and the post appointment experience.

There are many different specialities or departments within Outpatient services who all work slightly differently, so it was important to try and get a varied amount of feedback from the public across the range of services delivered.

Healthwatch Herefordshire provided a number of different ways for patients to provide feedback on these services :

A small card was produced, with information about the project and a link to the survey. These were given to patients during an outpatient appointment from July-September;

Healthwatch promoted the survey with paid advertising on social media channels, and shared with partner organisations;

Printed copies of the survey were left at various Outpatient departments for patients to complete either whilst they were waiting or following an appointment with the option of a freepost addressed envelope to send it back or to leave in a box at the County Hospital;

Healthwatch and volunteers at Wye Valley Trust also attended some Outpatient clinics to sit and complete the survey with patients.

What People Told Us

Survey Results

121 people completed surveys covering a large variety of clinics and departments. The top number of responses came from the following departments;

Department	Number of responses
Trauma & Orthopaedics	19
Ophthalmology	19
Urology	11
Heart & Lung (Cardiology)	10
Rheumatology	8
Other Departments / Clinics	54

Summary of themes per department

Trauma & orthopaedics

- Confusion with signage / booking in within Oxford Suite

Ophthalmology

- Positive comments regarding staff
- Concern with the organisation of the waiting area and feeling crowded

Urology

- Positive comments regarding signage and booking in
- Suggestions made regarding the waiting area

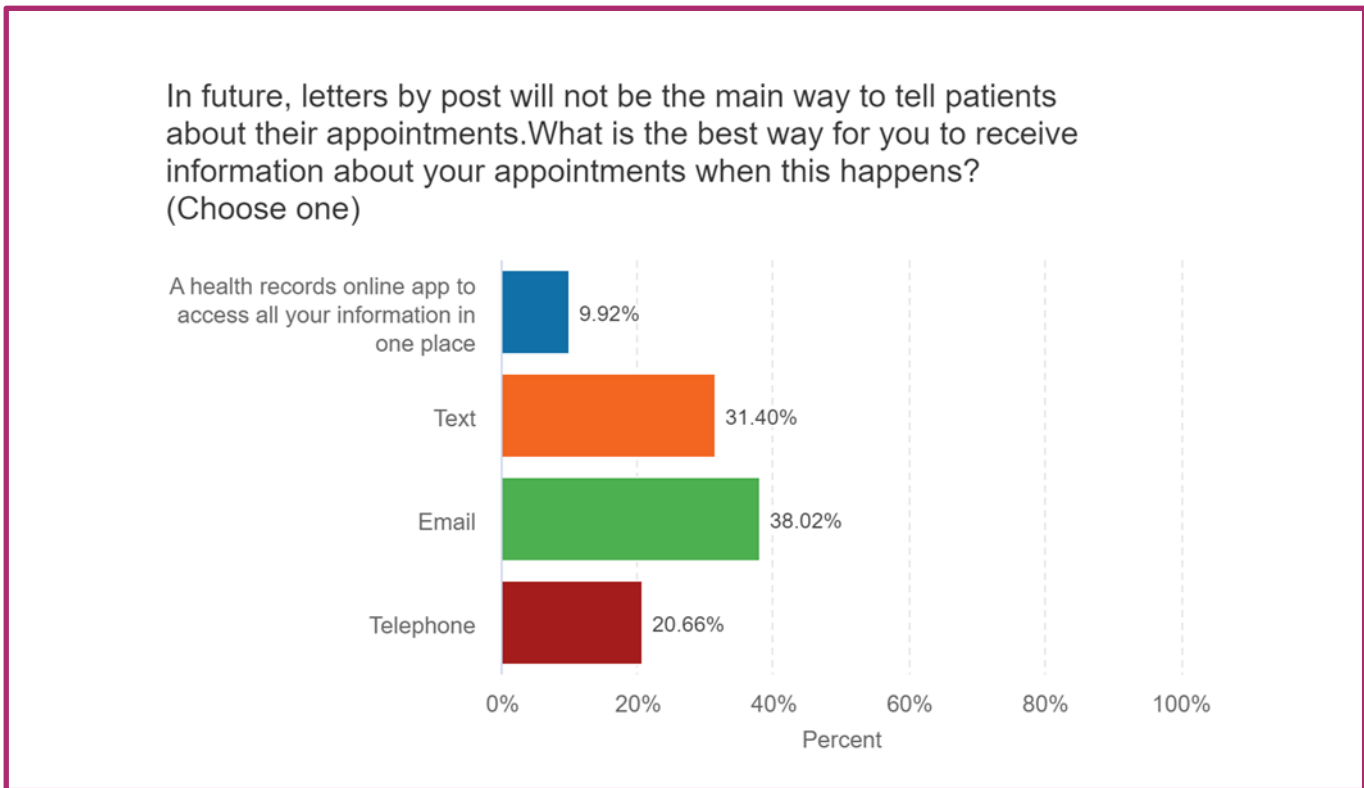
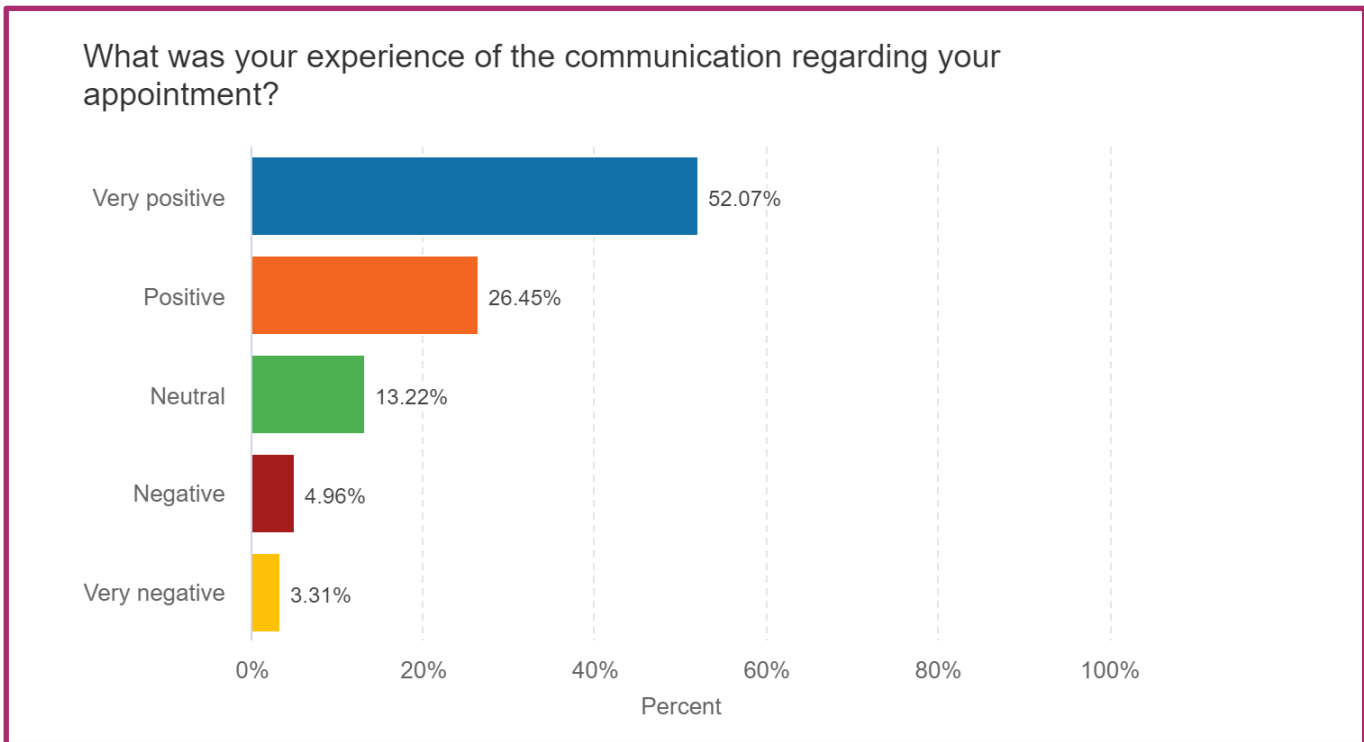
Heart & Lung

- Suggestions made regarding signage

Rheumatology

- Comments made regarding distance between Fred Bulmer building and main reception.

Below is a summary of graphs, charts and comments from the results of the survey. The full raw set of results can be viewed in Appendix 1.



Comments from Q10 'Forms of communication regarding information about your appointment'



"I do not want to use any sort of online app!! The whole World is not online! There are those who do NOT wish to use any online tools, and also because my hands are so bad with Rheumatoid Arthritis makes it impossible!!!"

"My parents cannot do this at all, so all communication would have to come through me"

"No idea, the apps from NHS sources have been poor to date, either no response to passwords, difficult forms, lack of replies etc."

"My mobile telephone is not an up to date one and I have trouble accessing website for my GP so an app would be out of the question for me."

"I don't have a computer, tablet or smart phone. I wouldn't know where to start. I wouldn't know how to use it. I couldn't do it."

"Do not have access to smartphone. Have autistic neuroma so difficult to hear. 78 years old. I would prefer a letter to show family"

"Sorry as you haven't provided a place to commit above, but even with access to all of the above, I find a letter invaluable. And I am quite sure many others to do. And will continue to request one"

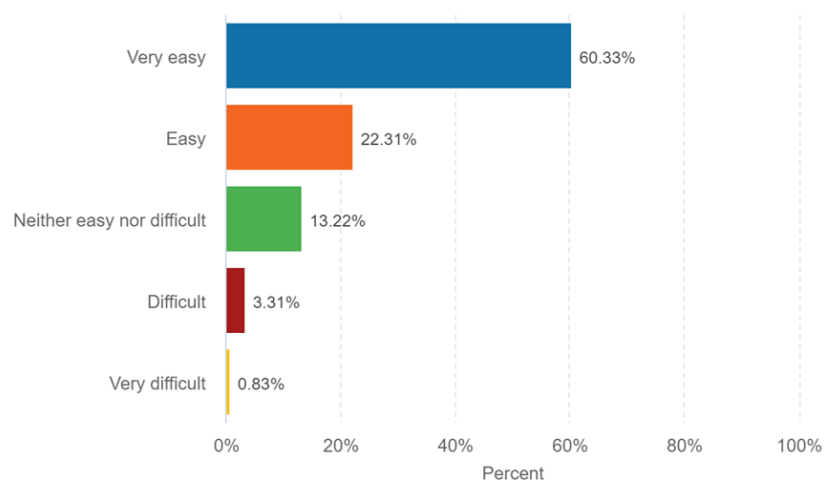
"As I am registered blind I find emails easier to use but would try the app"

"I cannot use apps as they are too small to read and my fingers shake. You MUST continue to send letters to tell patients about their appointments ANYTHING ELSE IS TOO INFORMAL. Do not stop sending letters! Other methods are too casual and go astray and are inappropriate. People's lives are at stake. You are abandoning patients and keeping us at arm's length if you do it. Stop it! This abandonment of normal, formal letters is driving me insane. Just stop the madness."



"Would need to ensure it is accessible without Internet. Wouldn't like to miss an appointment because my Internet connection was poor and the app hadn't updated."

How easy was it to find where your appointment was?



Comments from Q13 'How easy it was to find your appointment?'



"Maybe there could be a tech option available - like a sat nav kind of thing for inside."

"The distance from Fred Bulmer building (Rheumatoid Arthritis) Is far too long, and couldn't find a wheelchair?"

"How about a mobile phone map of hospital where you can tap in destination, and it takes you there 😊"

"Once in Oxford suite a sign for each area there"

"More details would be useful. When I arrived at the cardiac rehabilitation unit, I was told that there was a shorter route from reception."

"Usefully placed signs at roundabout to use out-side approach rather than through reception"

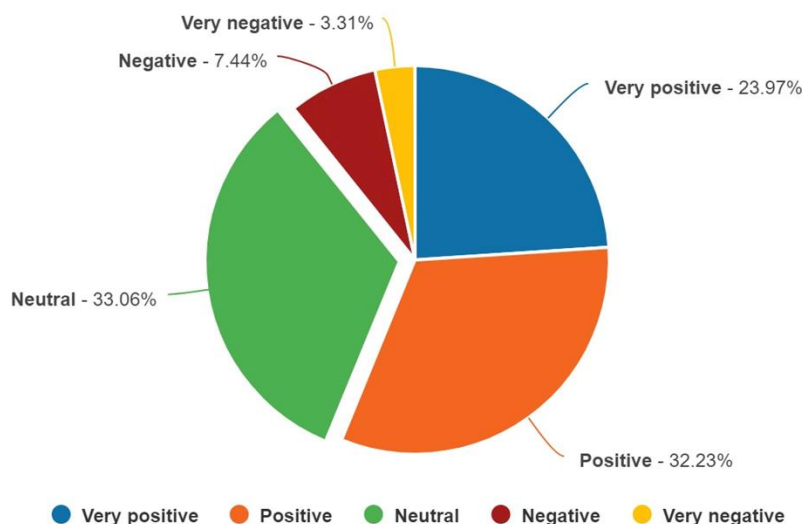
"Bit of chaos with main reception being very busy but needing to check in there first. Used to check in at the Oxford Suite."

"Extra signage for ECG"

"Lots of clinics in Oxford suite. Clear signage or staff to direct you."

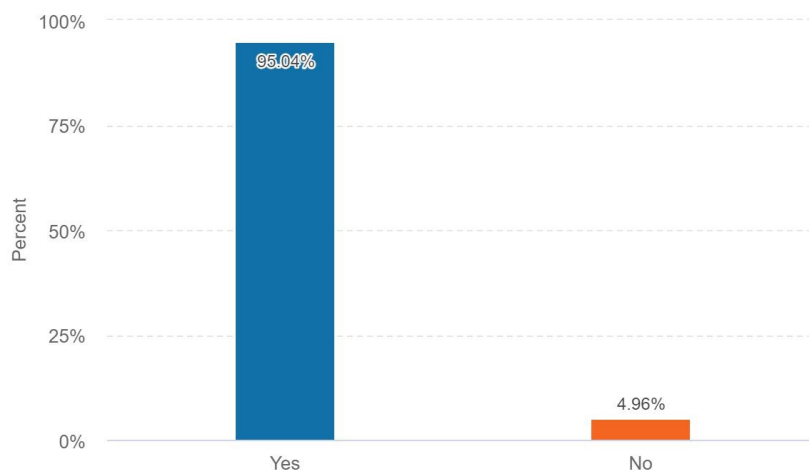


What was your experience of the waiting area?



Suggested improvements for waiting areas	Number of responses
No Comment / Happy with the area	59
Seating improvements	14
Water Availability	6
Background music	5

During your outpatient appointment, were you satisfied with the level of care you received?



Suggestions on what could have improved the outpatient experience

Number of responses

No Comment / comments of a positive experience

71

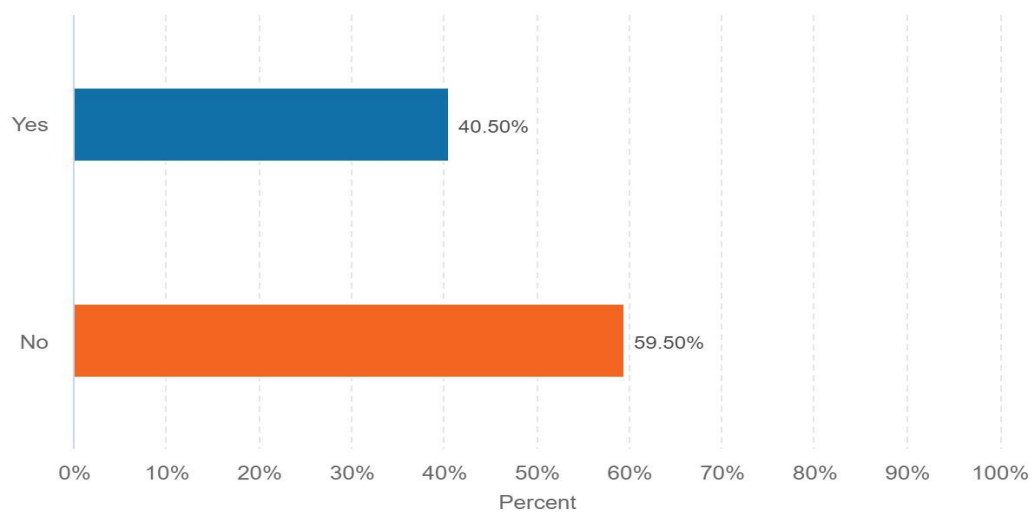
More live information on delays / reduce waiting times

17

Negative comments regarding staff attitudes towards patients

5

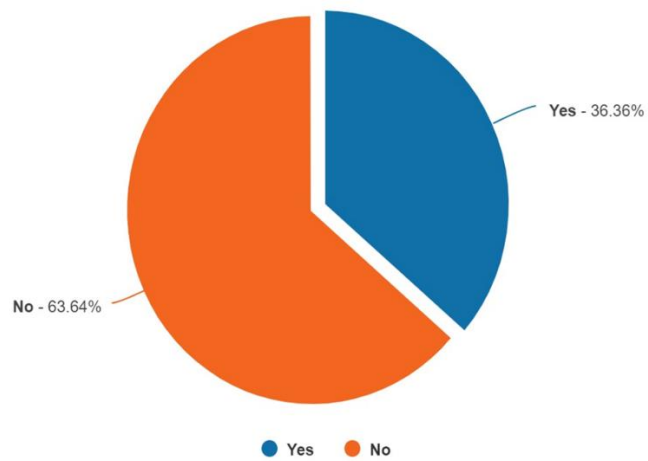
Did you prepare questions to ask before your appointment?



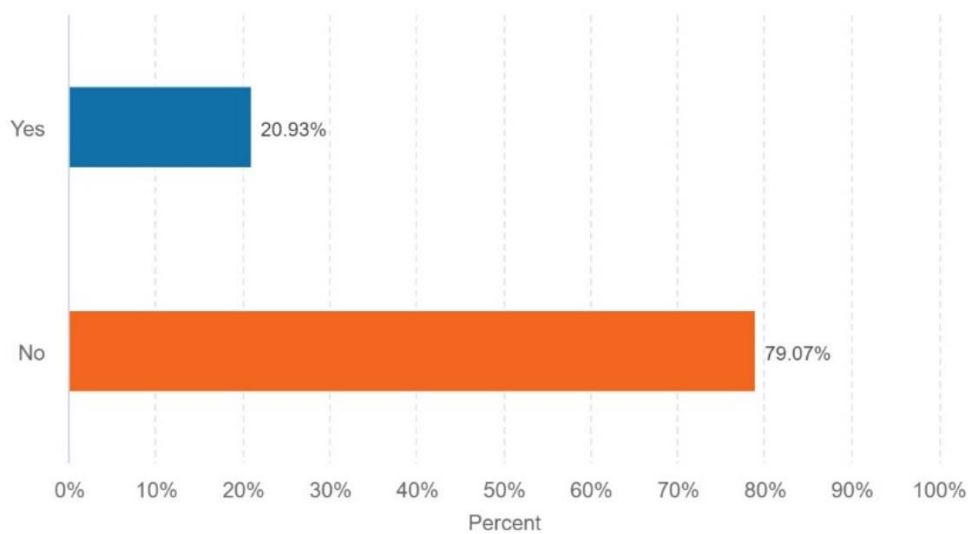
Q24 : At the end of the appointment, did you :

Answer Choices	Yes	No	Not applicable	Response Total
Feel you had been able to ask all the questions you needed to?	78.51% 95	5.79% 7	15.70% 19	121
Feel like all your questions had been answered?	74.38% 90	9.09% 11	16.53% 20	121
Feel like you understood what would happen next?	76.03% 92	8.26% 10	15.70% 19	121

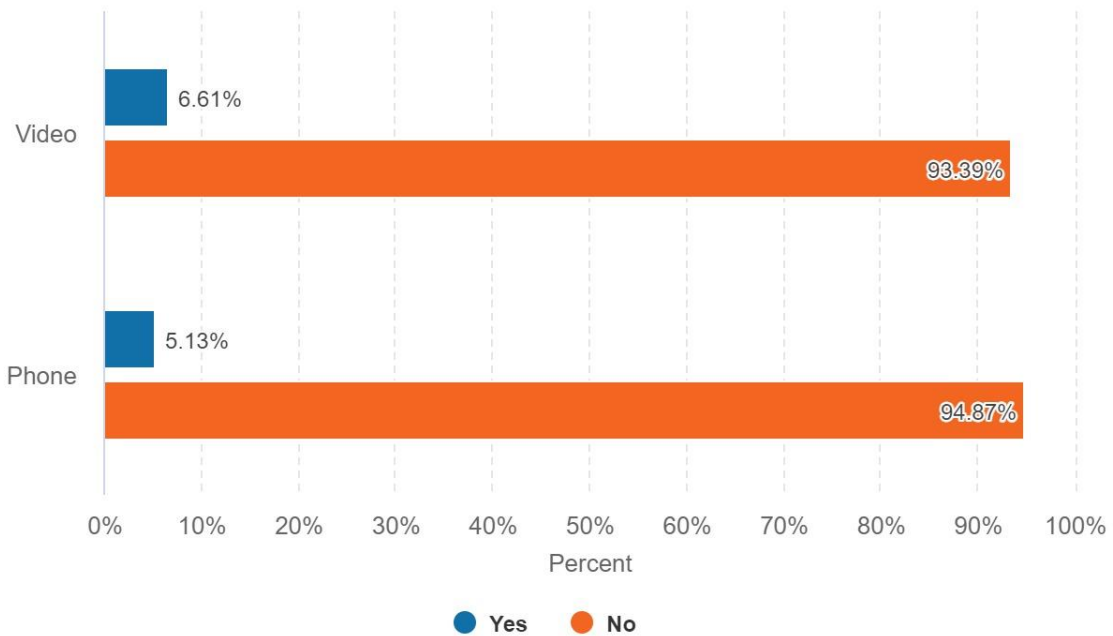
Were there any delays with your appointment?



If so, was there adequate communication about when you would be seen?



Did you think this appointment could have taken place over :



Managing Different Health Conditions

Q30. Do you regularly go to different clinics for different health conditions?

Answer Choices	Responses	Count
Yes		41.32% 50
No		58.68% 71

Q31. How do you find this? (Comments)

- The majority of people (40 out of 50 comments) responded in a positive or satisfactory way, with comments implying that it is what's to be expected with living with multiple conditions. However, there are some specific comments below highlighting where improvements could be made:



"I attend' an oncology clinic in Worcester, usually with telephone review appointments. I attend a liver medicine clinic in Birmingham, sometimes by telephone review and sometimes face-to-face. I am now attending the eye clinic in Hereford as well. All this is fine. I chose to come to Hereford for eye surgery because of the specific expertise of the surgeon involved. The most frustrating thing is the lack of shared digital information among the 3 laboratories. Each hospital insists on taking blood samples for testing in its own laboratory because the results from the other laboratories are not accessible. This imposes unnecessary duplication of venepuncture on me and is a waste of resources. Having myself worked with the PRSB on digital standards for record-keeping, this clearly fails to meet those standards."

"Not what one might call easy. It would be helpful if there was better co-ordination. For example, I had an appointment in Endocrinology in the morning and then a telephone appointment at home 2 or so hours later!?! As I was on site so to speak, it would have been better for me to do the other appointment on site as well. Note that the receptionist in Endocrinology noted that I had 2 appointments same morning and looked mystified as why I needed to go home."

"Fragmented care between different GPs and trusts that do not forward all relevant notes, or without sharing data effectively"

"Sometimes challenging juggling appointments on different days to suit work & travel schedules"

"Terrible as none of the teams communicate with each other"



Q32. Could there be any improvements made to help you to manage multiple conditions and associated appointments?

Answer Choices	Responses
Yes	40.00% 20
No	60.00% 30

Q32. Could there be any improvements made to help you to manage multiple conditions and associated appointments?



"Ensure that laboratory results from different hospitals are easily accessible digitally by all hospitals and GP surgeries."

"Better information sharing systems are required"

"Trying to coordinate appointments to certain days, group them together"

"Communication between teams and look at the whole picture not just that specialities area"



Q33. Is there anything else you would like to tell us that would improve the way Outpatients services work?

- 77 out 121 responses were either positive about their experience or had nothing to add within this question. Some of the more detailed suggestions/responses can be seen below :



“Put a booking in system similar to doctors' surgery or as found at Gloucester Hospital you identify yourself at the log in display and it advises you that you are booked in and which waiting room to go to and where the area is. If lost there are the volunteers there to direct you.”

“Easier check ins on wards I know you book in at main reception but when it comes to a waiting room some of them have no presence to tell that you have arrived, and you worry whether your actually booked in as you sit waiting to be seen”

“I had to chase the follow up (MRI Scan & Results) a lot. Then given 6 days' notice to come for follow up that had been classed as urgent. If I didn't have capacity to drive my own follow up, not sure how long the process would have been. How would this be for more vulnerable?”

“Getting an appointment letter the day after the appointment seems a little pointless.”

“Weekend diabetes clinics would be useful. I am a working age diabetic, and 9-5 weekdays clinics are really difficult as I struggle to get time off work to attend.”

“Clearer communication on the letter. Ensure that the person is able to hear and have support at home if phone appointment. Stop assuming everyone has a computer or smartphone - ask first!!”

“Letter was not received in time and all letters at least a week old. If appointments then cannot be met, not as efficient to reschedule.”

“The NHS is stretched as it is but maybe a Saturday clinic but then you have to staff”

“Better communication around timing of appointments, if running to time and likely wait, also consultants reading notes prior, so you don't repeat the same info on every visit”

“Pre consultant tests like bloods should be done at the GP prior to the appointment so that the consultant can see the whole picture. The whole letter writing to patients should be obsolete - only take place if patients don't have smart phone or access to the net.”

“Oxford suite needs updating massively. It's dated and more of a series of corridors, not an outpatient department.”



Social Media Feedback

Whilst promoting this Outpatient survey on social media channels, Healthwatch Herefordshire also received 24 comments which included experiences of Outpatient services. 4 were positive comments and 20 were negative.

Some themes emerged from these comments which are summarised in the table below:

Comment/Theme	Number of responses
Waiting Times	8
Concern over appointment method (e.g., over the telephone)	5
Services delivered Out of the County	2
Concern over transport into Hereford from market towns	1

Summary

Overall, there has been a lot of positive feedback within the survey results with many patients feeling satisfied with the level of care they have received

Communication regarding appointments

78% of respondents commented their experience of communication regarding their appointment was either very positive or positive. The current methods of communication are mainly letters with some text reminders and some telephone calls being made.

When asked about communication moving forward into the future, the top responses were Email with 37%, Text with 31% and Telephone Call with 20%. This highlights that there is a large proportion of patients that are willing to receive communication in a new way and don't necessarily need to receive a letter.

The following question gave the opportunity to write comments about this. There was a cohort of people who strongly advised that they would need to continue to receive communication by letter as they were not familiar or confident in using other forms of technology.

This suggests the need for a patient to be asked or to advise Wye Valley Trust if they are not comfortable with a 'default' email or text option. At this point it would also be worth asking patients if there have any additional needs, for example, assistance with sight or hearing so that if they required a telephone or video appointment, it could be checked whether they have adequate support to make that appointment possible.

Finding your appointment

82% of respondents said they found it very easy or easy to find their appointment, however there were many comments and suggestions relating to navigating the hospital. There were a number of suggestions for a map of the hospital site in the main reception allowing patients to see where they needed to go to. For clinics such as the Fred Bulmer Medical Day Case Unit, it would appear that patients mainly came through to the main reception first, making it quite a long walk to the Fred Bulmer building. This would be fine for some patients but for others with particular health conditions and mobility issues they felt they needed assistance with a wheelchair, which wasn't available. There was a comment suggesting signage by the roundabout at the front of the hospital to the Fred Bulmer building to avoid going through the main reception and going straight to the department.

Several comments expressed concern over the Oxford suite. Most people, although not all, had seen information and therefore were aware of having to book in at the main reception of the Oxford Suite, however there was confusion when entering the Oxford Suite on where to go next. With a department that could be hosting multiple clinics on different days, there was a suggestion of having clearer information on whiteboards detailing health professionals on duty, where they are located and using magnetic strips instead of whiteboard marker pens, potentially highlighting a difficulty in reading information the way it is currently displayed. A separate reception desk within the Oxford Suite could also assist with some of these issues.

The waiting Area

Again, questions relating to the waiting areas were mainly very positive and it is difficult to analyse as answers will relate to different departments with different waiting rooms. However, suggestions for improvements were more comfortable seating and in some areas for it to be more spread out; greater availability of drinking water and low level background music.

Preparing questions

When asked whether patients had prepared questions before their appointment, 59% said no and therefore this raises the question as to whether the public need more encouragement to prepare questions in order to get the most out of their appointment; to feel more included and involved in the decisions about their care as well as making appointments run smoother and more efficiently.

Delays

36% of people reported that they had experienced delays for their appointments. Patients have different reactions to delays with some being very understanding, acknowledging when staff and departments are busy and coming prepared to wait, whilst others find it very frustrating, particularly if they have arranged appointments around work schedules, transport or become anxious about issues such as parking arrangements.

Of the people that had delays, 79% reported there was not adequate communication about this and sometimes it is this part that the patients find

most frustrating. If they receive communication about how long they are likely to have to wait or aware of how many patients are in front of them, it can make it easier for patients to plan their time, for example, with parking arrangements. A suggestion to improve this is to have live information on a visual board in a waiting room or there could be a simpler solution of a staff member/receptionist informing patients how long they may have to wait.

Different methods for appointments

Whilst many patients were happy to explore new ways of using technology to communicate regarding appointments, the majority of respondents felt that their appointments could not be done via telephone or video with 93% saying they didn't think the appointment could be done via video and 94% saying their appointment couldn't be done over the phone. This area potentially needs to be explored further with the public with feedback gathered from more people who have experienced telephone and video appointments to understand the benefits and challenges.

Managing Different Health Conditions

Of the people that attend outpatient departments for various health conditions, there were various positive comments with many accepting that lots of appointments are just part of living with multiple conditions. Some people said that having appointments with different specialities coordinated for the same day would be good (particularly, working aged people who schedule appointments around work), but acknowledged this would be very difficult to achieve. They also felt that weekend appointments would be beneficial but acknowledged that this could be problematic to staff.

Many of the suggestions from people with multiple conditions were related to sharing of health records between different departments to avoid duplication (e.g., taking multiple blood samples for different departments) and to be able to treat the patient in a holistic way without the patient repeating their story.

Challenges

The survey was promoted across a variety of channels in order to get a breadth of data from the public about this topic. The most effective way to gather feedback was whilst people were waiting at the hospital, however, this meant that many of these people weren't fully able to answer questions in the survey that related to the post appointment experience.

For some people who regularly attend the outpatient department, they were able to draw from previous experience. For others, it may have been their first time attending the department and whilst they could have had the opportunity to complete the survey, after leaving the hospital, the likelihood of this was reduced. Therefore, combining this data with staff feedback will be useful, as well as continuing to hear from the public about their experiences in future.

We did ask respondents to indicate if they would be willing to get involved in any follow up work and specific focus group work by speciality.

Recommendations

- **Live information of delays** – the public are much more likely to be understanding of delays if they can prepare themselves, this would particularly be of use to anxious patients.
- **Reception desk in Oxford Suite** – due to complexities of the Oxford Suite layout and offer of clinics, an extra booking in desk where reception staff can assist patients would be valued.
- **Signage of health professionals and clinic rooms** – particularly in areas such as the Oxford Suite. Use of magnetic strips (as opposed to whiteboard markers) with the date so that patients know it is up to date information.
- **Site map of the hospital in the main reception** – this could potentially help patients to know whether they need assistance in getting to departments that are further away.
- **Availability of wheelchairs** – for patients to use for departments that are further away from the main reception desk.
- **Explore the idea of self-check in monitors**
- **Separation of patients in departments such as Women's Health** – for example, some may find it difficult to be seated with pregnant women if they are attending for a different gynaecological issue.
- **Information to encourage patients to ask questions** – helping patients to become more involved in the decisions regarding their care as well as well enabling appointments to run for efficiently.
- **Outreach clinics** – to assist patients living outside Hereford City who may have transport difficulties. Further engagement with the public may be needed to determine the extent to which transport plays a role when patients do not attend.

Appendix 1

To view the full set of raw data from the data, please visit this link :

https://healthwatchherefordshirecou-my.sharepoint.com/personal/christine_healthwatchherefordshire_co_uk/Documents/Shared/Project%20work/Outpatients%202022/Full%20Raw%20Data.csv



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