



# Rochdale Infirmary Outpatients Department Enter and View Report

February 2023

# Introduction

## About Healthwatch Rochdale

Healthwatch Rochdale is the local independent health and social care champion for the Rochdale borough. We are here to listen to local people's experiences of using health and social care services and we use those experiences to help improve services locally and nationally.

## About Enter and View

Healthwatch Rochdale is part of the Healthwatch network which was established by the Health and Social Care Act 2012, with the right to 'Enter and View' places that deliver health and care. The right to 'Enter and View' is a statutory power for Healthwatch.

The objective of an 'Enter and View' visit is to understand the experiences of patients, collect their views and make observations of the site.

As part of an Enter & View visit Healthwatch Rochdale:

- Collect the views and lived experiences of people at the point of service delivery (users, carers and relatives).
- Observe the nature and quality of services being delivered.
- Write up a report which may include recommendations or praise for good practice.
- Share findings & reports with providers, regulators, local authority, NHS commissioners and quality assurers, the public, Healthwatch England and other relevant partners.
- Use insights and recommendations to shape health & care decisions that are being made locally.

Our Enter and View policy is available to view at

<https://healthwatchrochdale.org.uk/news/2023-01-18/our-policies>

You may also wish to look at The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013 available to view at

[http://www.legislation.gov.uk/uksi/2013/351/pdfs/uksi\\_20130351\\_en.pdf](http://www.legislation.gov.uk/uksi/2013/351/pdfs/uksi_20130351_en.pdf)

## Acknowledgements

Healthwatch Rochdale would like to thank Rochdale Infirmary management and staff members, patients and all those who took the time to speak to us on the day.

## Disclaimer

Please note that this report relates only to the service observed at the time of the visit. This report is not a representative portrayal of the experience of all patients and is only an account of the views of those who met with the Enter and View team at the time of the visit. Enter and View visits are not inspections but are an opportunity for patients to share their views on the care they are receiving. It is not the role of Healthwatch Rochdale to see evidence of policies, procedures, care plans or any other written evidence.

## Enter and View Visit Information

Service address	Whitehall Street, Rochdale, Lancashire, OL12 0NB
Service Provider	Northern Care Alliance NHS Foundation Trust
Type of service	NHS Hospital
Date and time of Enter and View visit	Wednesday 1 <sup>st</sup> February 1.00pm – 3.00pm
Authorised Enter and View Representatives	Claire Birch, Margaret Parker, Rosemary Nunwick and Karen Kelland.

## Care Quality Commission rating

The Care Quality Commission (CQC) monitor, inspect and regulate services to make sure they meet fundamental standards of quality and safety. The CQC publish their findings, including performance ratings to help people choose care. To read the inspection report please visit <https://www.cqc.org.uk/location/RM316>

## Visit Background & Purpose

The Enter and View Visit was the first carried out by Healthwatch Rochdale since the Covid 19 pandemic. The visit was a planned visit with the provider being notified in advance and given a two week timeframe of when the visit would take place. In addition, a pre visit meeting was held between the Enter and View lead representative and Rochdale Infirmary management staff.

## Methodology

Due to NHS pressures at the time of the visit it was decided by Healthwatch Rochdale not to speak to staff members to avoid disruption to the delivery of the service. Representatives observed the department through the eyes of a patient and patient questions were focused on waiting times, communication and quality of service.

Enter and View representatives on this visit were:

-  Claire Birch
-  Margaret Parker
-  Rosemary Nunwick
-  Karen Kelland

On arrival we spoke to the duty sister in charge who gave us a tour of the outpatients department and advised us what clinics were being held that day. At the time of our visit the department was quiet as the majority of clinics had been held in the morning. Therefore, on the visit we spoke with 11 patients.



Following the visit, we met with management staff, provided feedback on the visit and advised that we would be sending a report with recommendations which require a response within twenty working days in line with the following legislation

<http://www.legislation.gov.uk/uksi/2012/3094/regulation/44/made>

## What is working well

- All patients we spoke with were happy with the quality of service they were receiving.
- The department was clean bright and tidy with comfortable seating and refreshments available to purchase in the main foyer.
- Staff wore name badges and appeared friendly and approachable.
- Patients were verbally informed of any delays on the day.
- Plenty of wheelchairs were available and assistance was given for those who needed it.
- Hand sanitisation was available throughout.

## Results of visit

### Waiting times

4 patients were attending for a first appointment and 7 were attending for a follow up appointment. Waiting times for a first appointment varied from 1 week to 6 months. For follow up appointments waiting times varied from 1 week to 12 - 13 months. Some patients felt the time for a follow up appointment had been delayed.



“Should have had an appointment in November. I should have had phone consultations but the hospital didn’t have the right number and so I had to come for a face-to-face appointment”.

“Should have been two weeks – now six weeks for follow up”.

None of the patients we spoke with had received any advice or support to help maintain their physical or mental health whilst waiting for their appointment such as 'While You Wait'.

4 patients contacted the hospital whilst waiting for their first appointment.



"Just to check what was going on. Difficult to get through".

"Got no answer – very busy people".

"Rang four or five times to chase up because they had the wrong number".

We spoke with patients prior to them being seen in clinic so they were unable to provide a final time of waiting to be seen in clinic. We noted the positive practice of patients being informed of delays through the observation of a nurse verbally updating patients that the clinic was running 45 minutes late and we spoke with a patient who told us they had been personally informed of the delay. However, we noted that those who were hard of hearing or who arrived following the nurse's announcement would be unaware of the delay.

**Therefore, we recommend that waiting times are written on the noticeboard in addition to the verbal update.**

## Communication

8 patients we spoke with received a letter explaining the clinic they would be attending. 2 said they had received no communication and 1 was attending a long term routine appointment.



6 patients said the letter stated the name of the consultant they would be seeing. 3 patients said they had received an information booklet about what to expect at their appointment. No patients received a map showing the location of the clinic.

7 patients had been told how long they would have to wait for a first appointment and 8 patients were told who to contact for advice if their condition changed whilst waiting for treatment.

Some patients we spoke with were not Rochdale residents and had not visited the hospital before. **Therefore, we recommend that for first appointments all patients receive an information booklet about what to expect at their appointment and a map of the hospital to show the location of the clinic.**

## Quality

All patients we spoke with were happy with the care they were receiving and told us:



“Great staff, very pleasant”

“Brilliant care from all staff”

“I saw a consultant that I was familiar with which was important to me”.

“The Dr listened and gave me a treatment plan. I am happy with the waiting times today”.

“No complaints, except it would be difficult to get here if I didn’t drive as I live in Saddleworth”.

Only one patient felt that things could have been improved and this was regarding the location and transport issues.



“I come from Middleton and have to get the bus. It’s two buses to get here. I had to leave early to get here on time as the buses aren’t always reliable and getting two buses is expensive”.

## Observations

### Reception

The main entrance to the hospital was a clean, bright, welcoming entrance with reception manned by volunteers to assist with enquiries. In contrast however, the entrance to the outpatients department was not welcoming and looked as though it was being used as a storeroom. In addition, the outpatient reception desk had a grille which was closed so even though there were receptionists behind the grille it appeared as though reception was closed. We observed patients bypassing reception and going straight to clinic only to be told they had to go back to book in at the main reception. In addition to the grille being down there was no sign informing patients of the requirement to do this. We asked reception staff why the grille was closed and was informed it was broken.



The waiting area was clean and bright, with comfortable seating and refreshments available to purchase. We observed plenty of available wheelchairs for those who may require them and assistance being given to those using the wheelchairs.

We noted that signage was only available in English and not suitable for those with a visual impairment. Considering the diverse population of the Rochdale borough we anticipated seeing information in languages other than English. As the main reception also appeared closed lack of information for those with a visual impairment or with a language other than English is a potential barrier for some patients.



**Therefore, we recommend:**

- **The reception grille to be fixed and for a sign to be visible informing patients of the need to book in at the main reception before going to clinic.**
- **Information and/or signage to be available in other languages in accordance with the needs of Rochdale borough residents.**



## Quality and patient safety

We observed that all staff wore a name badge, except reception staff. Clear information about infection control and hand sanitation was available throughout the department. The department was clean and we saw no rubbish or dirty items. We did not find any clear information on how patients could give feedback or make a complaint and found no evidence of the NHS Family and Friends Test. There were available toilets which were well signposted and clean.



## Information

Notice boards in reception areas and corridors were very cluttered and it was hard to find relevant information. Some notices were outdated. We found no information in the main reception as to what clinic was being held that day and in which suite. Waiting times were not updated on the notice board in clinic. **Therefore, we recommend that notice boards are updated with information on how to provide feedback or make a complaint and that waiting times are written on notice boards in clinic.**



## Debrief

On conclusion of our visit, we provided management staff with an overview of our initial findings. They informed us that the outpatients department building will shortly be undergoing a transformation and will be rebuilt. **Therefore, we recommend:**



- **consulting with patients or a patient experience group to ensure the new outpatients department is created in coproduction with patients and their needs and requirements are taken into consideration.**
- **to carry out an Equality Impact Assessment (EIA) regarding the transformation of the outpatients department to identify impact on patients and identify actions to mitigate this.**

## Recommendations

The findings in this report are based on our observations on the date of the visit and the information that people told us. Following our visit we recommend the following:

1. Waiting times to be written on the notice board in the clinic
2. All patients to receive an information booklet about what to expect at their appointment and a map of the hospital to show the location of the clinic.
3. For the reception grille to be fixed and for a sign to be visible informing patients of the need to book in at the main reception before going to clinic.
4. Information and/or signage to be available in other languages in accordance with the needs of Rochdale borough residents.
5. Notice boards to be updated with information on how to provide feedback or make a complaint and that waiting times are written on notice boards in clinic.
6. To consult with patients or a patient experience group to ensure the new outpatients department is created in coproduction with patients and their needs and requirements are taken into consideration.
7. To carry out an EIA regarding the transformation of the outpatients department to identify impact on patients and identify actions to mitigate this.

## Response from Provider

Below received from Steve Taylor, Rochdale Care Organisation Chief Executive Officer, with an action plan.

Thank you for the Enter and View report you sent following the Healthwatch visit to the main Outpatient Department in February 2023. We are pleased that Healthwatch has been able to recently recommence the Enter and View visits to the clinical wards and departments on the Rochdale Infirmary site, following the Covid 19 Pandemic. This is a valuable source of independent patient feedback and we hope to use this information positive to improve our services and the experience of patients who use them.

We have attached the action plan outlining the actions and timescales relating to the recommendations set out in the report. I am pleased to say that the action plan generated by the Division, has been agreed by the Care Organisation Directors today, as part of the governance process for the report. Our plan is that the action plan is then monitored by the Patient Experience Committee in conjunction with the Planned Care Division, who will include a quarterly progress report to the Rochdale Care Organisation Quality and Patient Experience Committee for assurance until the action plan is complete.

As you are aware from the discussion with our Planned Care Divisional Team prior to the visit we have an ambitious estate plan for our main Outpatient Department that has recently secured national funding via a TIF bid to develop the department. Work has already commenced with architects but is in initial stages and we will complete the full estate plan for this area until early 2025.

Please contact any of the team if you require further information or update and thank you again for your feedback.

## Action Plan – Enter and View Outpatients

Action Ref no		Action plan owner Name and Job Title			Action plan review date		
Action Ref no	Recommendation	Action required	Lead person (job title)	Target date for completion	Progress notes	Date of actual completion	Evidence of completion
1	Waiting times to be written on the notice board in the clinic	Boards in each OPD suite to be checked regularly during the day by the circulating nurse	B&S Operational Manager, Operational Lead of Group Health Records	March 23			
2	All patients to receive an information booklet about what to expect at their appointment and a map of the hospital to show the location of the clinic.	GPAA to consider if link to information leaflet and map of the site can be included in all appointment letters	Rochdale Health System Estates Manager/ RI estates manager	September 23			
3	For the reception grille to be fixed and for a sign to be visible informing patients of the need to book in at the main reception before going to clinic.	Reception grille to be removed as part of OPD reception redesign Signage to be reviewed as part of OPD redesign	Rochdale Health System Estates Manager	June 23			
4	Information and/or signage to be available in other languages	Signage to be reviewed across the site for and	OPD manager	September 23			

	in accordance with the needs of Rochdale borough residents.	proposal discussed at patient experience group					
5	Notice boards to be updated with information on how to provide feedback or make a complaint and that waiting times are written on notice boards in clinic.	PALS information to be displayed in each Suite of OPD  'Time to talk' posters displayed in each suite	OPD development group	May 23			
6	To consult with patients or a patient experience group to ensure the new outpatients department is created in coproduction with patients and their needs and requirements are taken into consideration.	Patients or patients representative to be consulted regarding planning of new OPD development	B&S Operational Manager, Operational Lead of Group Health Records	December 23			
7	To carry out an EIA regarding the transformation of the outpatient's department to identify impact on patients and identify actions to mitigate this.	EIA to be completed as part of redesign process	OPD development group	December 24			



# Contact us



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