

Mystery Shop Activity: January 2023

United Lincolnshire Hospital Trust (ULHT): Accident and Emergency Departments

*based at Lincoln County Hospital, Pilgrim Hospital and
Grantham and District Hospital*

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Healthwatch Lincolnshire

Healthwatch Lincolnshire is your health and social care champion. We make sure NHS leaders and other decision-makers hear your voice and use your feedback to improve care. We are part of a national network of 152 local Healthwatch in England.

We have three main areas of work:

- **Listening to feedback** we listen to people's experiences and we seek out views as part of larger research projects. Healthwatch has legal powers to undertake Enter and View visits to NHS services and care settings. This is to observe and hear how users are experiencing the services.
- **Influencing Providers and Commissioners of Health and Social Care** we also spend a lot of time building relationships and attending meetings within the local health and care system so that the patient's voice can be heard in the right places, at the right time.
- **Advice and information** we help people to navigate health and care services.

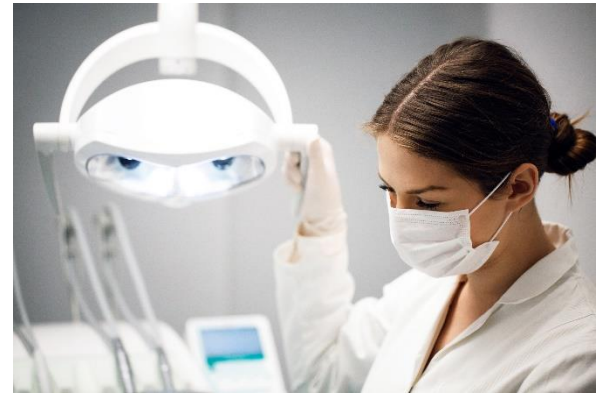
Your experiences matter, we strive to be a strong voice for local people to help shape how services are planned, organised and delivered.

Acknowledgements

Healthwatch Lincolnshire would like to thank United Lincolnshire Hospital Trust (ULHT) for accommodating the Mystery Shop visits to the three sites across the Trust (Lincoln County Hospital, Lincoln, Pilgrim Hospital, Boston and Grantham and District Hospital, Grantham).

Disclaimer

Please note that this report relates to the findings by the Healthwatch Lincolnshire Representatives during the period between Monday 23 January 2023 to Friday 3 February 2023. This report is not a representative portrayal of the experiences of all service users.



What is Enter and View?

Healthwatch Lincolnshire has the statutory right under the Health and Social Care Act 2012 to carry out “**Enter and View**” visits to NHS health and social care services.



Healthwatch Lincolnshire staff and Volunteers (known as Authorised Representatives) work together to carry out these visits.

The primary aim of the visits is to listen to the feedback of the service users, their families, carers and staff and observe service delivery and the facilities available for patients.

The feedback and observations are then collated into a report including any suggestions or recommendations. The service has the opportunity to comment on the report before it is published.

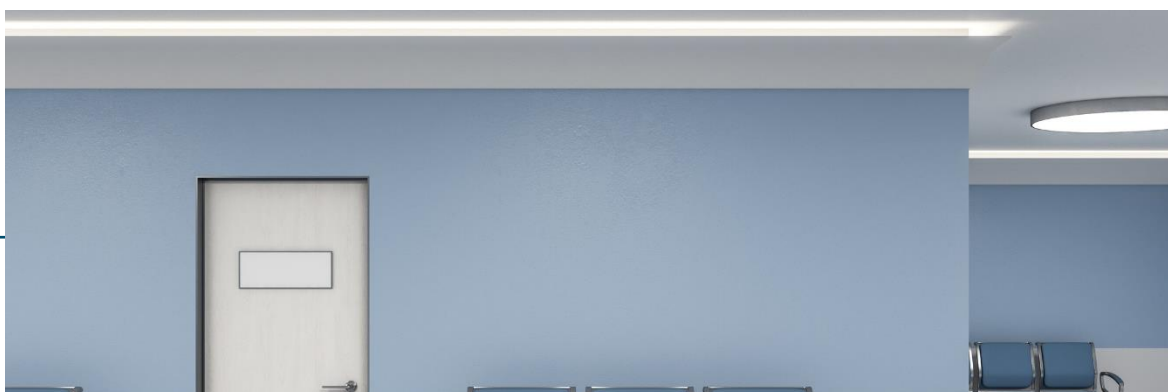
- A service can be visited for several different reasons such as:
- the public has provided feedback about the provision
 - it is part of a rolling programme of visits to similar services
 - a service is running well and good practice could be implemented in other places.



What is a Mystery Shop Activity?

Mystery Shopping is a technique used by retailers, market research and consumer watchdogs to measure the quality of customer service and to collect information about products and service delivery.

The Aim of the Mystery Shop Activity Across United Lincolnshire Hospital Trust (ULHT) Accident and Emergency (A+E) Departments



Background

Here at Healthwatch Lincolnshire we have received feedback from the public and through monitoring of statements on social media that Lincolnshire residents are experiencing difficulties and long delays when accessing services through the Accident and Emergency Departments across the Trust (in particular at both Lincoln County and Pilgrim Hospitals).

The primary aim behind the Mystery Shop Visits was to make observations at the three hospital sites across a number of days and different times within that time period. This would help Healthwatch Lincolnshire to be better informed about the situation and better inform members of the public who would be accessing these services. These visits will be part of a rolling programme of Mystery Shopping Activities to visit the Accident and Emergency Departments in the Trust and would form the basis of a planned Enter and View programme of announced visits to obtain feedback from the service users themselves.

Having a new team of Authorised Representatives, its secondly function was to give the Volunteer Team an opportunity to familiarise themselves with the Accident and Emergency Departments, to practice their observational and recording skills before embarking on Enter and View visits and interacting with patients, carers and their families, as well as staff.

Objectives

- **To observe the service and how it runs.**
- **To identify best practice or areas of concern.**
- **To provide a short report, including recommendations that will be made available to the service provider (ULHT), commissioners and the public.**





Glossary and Abbreviations Used in this Report:

Abbreviation	Definition
A+E	<p>Accident and Emergency Department</p> <p>An emergency department, also known as an accident and emergency department, emergency room, emergency ward or casualty department, is a medical treatment facility specialising in emergency medicine, the acute care of patients who present without prior appointment; either by their own means or by that of an ambulance.</p>
E+V	Enter and View
E+V Authorised Representative	<p>An Authorised Representative is a trained Volunteer who participates in Healthwatch Lincolnshire's 'Enter and View' activities, alongside other Healthwatch Lincolnshire Volunteers and staff.</p>
ULHT	<p>United Lincolnshire Hospital Trust</p> <p>United Lincolnshire Hospitals NHS Trust is an NHS Trust which runs County Hospital Louth, Lincoln County Hospital, Pilgrim Hospital in Boston, Skegness and District Hospital, and Grantham and District Hospital.</p>
UTC	<p>Urgent Treatment Centre</p> <p>Urgent Treatment Centres provide medical help when it's not a life-threatening emergency.</p>

Details of Visits:

Service Address	<p>Lincoln County Hospital Greetwell Road LINCOLN LN2 5QY</p> <p>Pilgrim Hospital Sibsey Road BOSTON PE21 9QS</p> <p>Grantham and District Hospital 101 Manthorpe Road GRANTHAM NG31 8DG</p>
Service Provider	<p>United Lincolnshire Hospital Trust Greetwell Road LINCOLN LN2 5QY https://www.ulh.nhs.uk/</p>
Date and Timings	<p>Monday 23 January 2023 to Friday 3 February 2023 (2 weeks Monday to Friday only)</p> <p>Morning session 8 am to 11.30 am Afternoon session 12 noon to 4 pm Evening 5 pm to 8 pm</p>
Healthwatch Representatives	<p>Oonagh Quinn Healthwatch Involvement Officer</p> <p>Simon Parker Volunteer and Members Officer</p> <p>HWLincs Volunteers: Ann Morgan Anna Pastuszko Helen Nicholls Jacqui Sclanders Valerie Talbot Yuchen Liang</p>

Methodology

- Healthwatch Involvement Officer and Volunteer Officer identified suitable and interested Volunteers to participate in the Mystery Shop Activity. They also provided suitable training and background information. 
- Healthwatch Lincolnshire liaised with Jennie Negus, Head of Patient Experience, ULHT and Jeremy Daws, Head of Compliance, ULHT to set the period of Mystery Shop Visits in diary so that they did not clash with other visits to the Trust in the diary.
- All Healthwatch Representatives issued with a Visitor badge from ULHT prior to first visit to the site and each would also have Healthwatch Lincolnshire photo ID. 
- During the period Monday 23 January 2023 to Friday 3 February 2023 a timetable was devised allocating a maximum visit of 2 hours per Representative to each site.
- Each date was divided into three sections: morning (8 am to 11.30 am), afternoon (12 noon to 4 pm) or evening (5 pm to 8 pm) and Authorised Representative would visit during one of these times on that individual day.
- Each unannounced visit was completed by one Volunteer at the allocated time slot.
- Each Representative was issued with the Observational Sheet for recording throughout their visit and this was to be returned to the Healthwatch Involvement Officer as soon as possible after their visit. 
- Throughout each visit, the Representative recorded their observations on: quality of care, interaction and communication between staff and patients, the environment and cleanliness, signage, car parking, food and drink, additional needs such as accessibility and comfort and toilets.
- Over a two week period from Monday 23 Jan to Friday 3 Feb 2023, 2 staff members (Healthwatch involvement Officer and HWLinCs Volunteer Officer) along with six Volunteers completed a series of Mystery Shopper Activities at the three A+E Departments on ULHT sites (Lincoln County, Pilgrim and Grantham).
- Each session was for a maximum of 2 hours for each Representative to observe and record what they found in each of the departments during their visit. Once collated, a report has been written and information / findings to be shared. 

Dates and Times of Mystery Shop Activity across each site

- **Lincoln** 2 morning, 2 afternoon and 1 evening visit
- **Pilgrim** 2 morning, 2 afternoon and 2 evening visits
- **Grantham** 2 morning, 3 afternoon and 1 evening visits.

	Lincoln County Hospital	Pilgrim Hospital	Grantham Hospital
Week One: 23 Jan to 27 Jan 2023			
8 am to 11.30 am	1	1	
12 noon to 4 pm		2	1
5 pm to 8 pm		1	1
Week Two: 30 Jan to 3 Feb 2023			
8 am to 11.30 am	1	1	2
12 noon to 4 pm	2		2
5 pm to 8 pm	1	1	
Total Visits	5	6	6

Findings / Observations

Grantham District Hospital

Good Practice / Observation of Person Centred Care: no observations made of this practice during visits to Grantham District Hospital.

Arrival and Reception at A+E

- Signage to the department from town and on site very clear and it is easy to identify the department.
- It was not evident that people asked for privacy when checking into the department and the wearing masks meant that people were having to speak louder than normal to be heard and understood. The Receptionist supported people when some information was a bit vague from the patient.



Car Parking

- Car parking wasn't a major issue on all the visits, though some afternoon visits had around 10% vacancy due to Outpatient Clinics being run at the hospital.

Staff

- Staff observations - Some staff were wearing name badges, including cleaning staff. The nursing and medical staff seemed to be inconsistent with name badges. Hard to identify uniforms unless there was a photo sheet on display saying what uniform is what.
- Receptionist was unfailingly polite and engaged with dealing with patients and others. Receptionist was kept busy and kept up a strong presence and was assured and confident.
- It seemed that most nurses observed were polite and engaged in a patient focussed way. Some staff just announced patient names.



Food and Drink

- Patients have access to a number of vending machines and a café on site if required for a longer waiting period.

Environment and Cleanliness

- Overall impression of the A+E department - a very clean and tidy department, with plenty of available seating for patients waiting. Very quiet on the visits made here. Staff were very friendly and professional and supported the patients during their visit to the department.



Patient Comfort

- There were a number of wheelchairs available if required for patients.

Lincoln County Hospital

Good Practice / Observation of Person Centred Care: Health Care Assistant assisted a patient who was alone and sitting in a wheelchair to the toilet and then encouraged the patient to move out of the wheelchair into a chair, gave him a cushion and asked if he was diabetic which he was and then asked for a nurse to do a blood sugar check. Son then arrived to support the patient.

Arrival and Reception at A+E



- Signage outside Hospital was clear and within the department Consulting Rooms 1-10 had signage. Though not clear what Clinic 11 was. An electronic display board indicated how many patients waiting within department and waiting times. No leaflets available for patients, though some information displayed on notice boards.

Car Parking

- Car Parking – it was found during the morning sessions, the car park was very full but afternoon and evening sessions there appeared to be more spaces available. Disabled car parking spaces all full on all visits regardless of time of visit.

Staff



- Handwashing facilities for staff were not seen on the visits.
- Staff interactions with patients overall were very positive. All staff were pleasant and supportive to the waiting patients. Staff were witnessed on a few occasions having discussions about patients in the corridors which could be overheard by the Volunteers.

Food and Drink

- No vending machines in waiting areas however, drinks (hot), cereals and sandwiches were distributed at appropriate times to patients waiting.

Environment and Cleanliness



- Masks and hand sanitiser available for patient use on entering the A+E Department.
- Screens placed between newly furnished chairs in waiting areas – implemented since COVID outbreak.
- Environment overall, was very clean and it was witnessed on a number of the morning sessions the cleaning team in the department carrying out their duties.

Patient Comfort

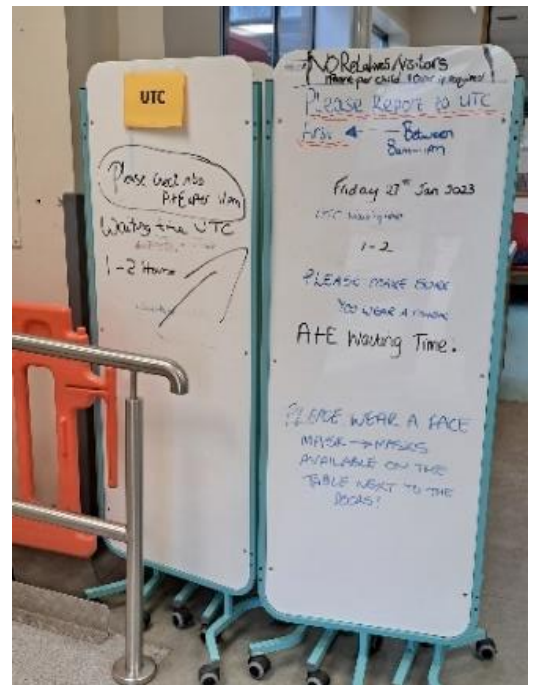
- Disabled toilet was unavailable during the whole period of the visits, though it had been observed that the Estates Team had visited and made notes of this on a number of occasions.

Pilgrim Hospital

Good practice / Observation of Person Centred Care: Clinician dealing with an anxious Mental Health patient made sure that both the patient and others in the UTC waiting area were all kept safe and responded to in a very calm and professional way for a very distressed patient. This led to the patient feeling listened to and resulted in the patient becoming much calmer. Patient was frustrated when they arrived and very agitated expressing that they felt that they may want to lash out due to this and was seeking help before anything happened. Patient was offered the opportunity to go somewhere more private to have a chat with the clinician. The patient was offered the opportunity to be seen by the Mental Health Liaison Team and was offered a hot drink while they were waiting.

Arrival and Reception at A+E

- Signage to the department was clear outside, but within the department was a little overwhelming. Many sheets of A4 paper stuck on walls or screens in a haphazard way and handwritten and very confusing messages on mobile screens that were not up to date. The photo opposite shows signage used by the UTC (a service provided by Lincolnshire Community Hospital Trust on a ULHT site). This was confusing for patients / carers on entering through the main entrance.



- Very little privacy within the department and no Volunteer witnessed patients being given the opportunity to talk in private.

Car Parking

- Car parking at times was difficult especially when trying to avoid the large potholes and when visiting at busier times of the day. All disabled car parking spaces were full on most of the visits. Some Volunteers had to drive around the car park a number of times to find a vacant space and this would be a problem for someone with mobility issues. No wheelchairs were visible near the UTC or A+E departments on these visits.



Staff



- Interactions between staff and patients overall were very task focussed and little holistic support seen taking place. Majority of interactions happened when observations needed to be done by the Health Care Assistants. No privacy offered for the patient.
- A number of different staff on duty through the different visits, all wearing different uniforms and many patients did not know “who was who”, so most patients referred to that staff member as “Nurse”.

Food and Drink

- During our visits, we saw that water was available in jugs for patients but did not witness any other access to food or drinks where appropriate.

Environment and Cleanliness



- On all of the visits to Pilgrim A+E, it was very busy with long waiting times for patients. The department felt very claustrophobic and disorganised. With the UTC portable cabin attached to the side of the building, there is confusion when patients enter as to where they report in.

Patient Comfort

- Within the department in the “Fit to Sit” and UTC, chairs are newly refurbished with screens between them. In the corridor this is not the case. Overall, the department looked clean and during some of the morning visits, the cleaning team were seen within the department. However, overall, the department feels chaotic and claustrophobic.

Emerging Themes

- Patients are waiting a long time for treatment and this varies across the three sites.
- Information is not updated on information boards regularly for patients and their carers.
- There is confusion amongst the public about what is treated at an Accident and Emergency (A+E) Centre and an Urgent Treatment Centre (UTC).
- Those patients that had “talked before they walked” and made contact with NHS111, were often referred to the A+E Department when they could have been seen in the UTC.

- Post COVID-19 and generalised pressures on access to appointments at Primary Care: many people are presenting at A+E due to lack of appointments at Primary Care Level (via a GP Practice) and this is forcing a number of patients to attend the UTC / A+E Department where they know that they will have to wait on average more than 3 hours to be assessed by a clinician but they will be treated.

Recommendations:

General

- Have the Carers Charter on display.
- Display information about data protection.
- Simplify the signage e.g., Pilgrim Hospital A+E / UTC very confusing in a very overcrowded area. Keep it updated and displayed professionally.
- Communicate with the patients regarding waiting times and that some patients will be seen before others due to clinical / medical needs that are greater than others.
- Ensure NHS111 have up to date information on opening times and what can be treated at each centre (e.g., UTC / A+E) so that patients can be directed to the best possible service for their need.
- Develop the role of the ULHT Volunteer within the A+E Department. One Representative reported witnessing good practice by a ULHT Volunteer supporting a patient waiting in Lincoln County A+E who had been overlooked by the staff team and was able to respond to that patient's needs ensuring that they were not overlooked further and therefore not deteriorating.
- ULHT has signage stating that it is a non smoking Trust and externally there are a number of signs on site indicating this, however, on most of the visits to the Trust, the Volunteers witnessed a number of patients, carers and family members as well as staff smoking on the premises. This needs to be enforced across the Trust or have designated Smoking Areas.



Conclusions and Next Steps

- Overall, the Volunteers were able to observe the services at three different A+E Departments across United Lincolnshire Hospital Trust sites.
- Within the time period in January / February 2023, Pilgrim Hospital was experiencing a huge increase in demand for medical assistance.
- Unify the quality of signage and communication across the Trust to avoid unnecessary confusion to patients.
- Healthwatch Lincolnshire will liaise with the Trust to carry out further Mystery Shops at regular intervals over the next 12 months.
- Healthwatch Lincolnshire will liaise with the Trust to carry out announced E+V Visits to the three A+E Departments to get feedback directly from the patients / carers and families using the services.

Service Provider Response

Thank you for sharing your Mystery Shopper Report and for the opportunity to provide a response to your observations and recommendations.

Grantham Hospital

- At the time of the visits, masks were still required in clinical areas and we acknowledge these are inhibitive and are pleased they are no longer required.
- Thank you for highlighting that not all staff were easily identifiable and indeed this featured on other sites. We will, as a result of your observations refresh and reissue our posters that illustrate uniforms. However despite this we are mindful that agency staff wear the uniform of their agency and not the Trust and so will raise this issue directly with them and explore options.
- We will also reiterate the expectation for all staff to introduce themselves and their role under the principles of '#Hello my name is'. New badges have been ordered for staff and the Patient Experience Team are leading a project this year to introduce a communication Always Event to drive the expectation to always introduce yourself and to be sure patients and carers have had the chance to ask questions and be involved.
- We will explore implementing the **#CallMe** campaign designed by Worcestershire Acute Hospitals, where making the effort to address a patient by their preferred name sends a clear message that we respect them as individuals at a time when they may well be feeling particularly vulnerable.
- In relation to food and drink, we are pleased to inform that the **Tea Bar** in Outpatients will soon be reopened providing further refreshment opportunity.

Lincoln County

- Thank you for your feedback about signage and we acknowledge that consulting rooms 1 – 10 and the 'Clinic 11' is confusing. Clinic 11 is the Fracture

Clinic and tends to be known by both names. We will review and amend the signage to reflect this.

- Patient information leaflets are currently under review as part of a Trust wide piece of work and a focus on Accident & Emergency patient information is being scheduled to expedite this need. Digital solutions are also being considered.
- Concerns about car parking are unfortunately not new to us and could reasonably be considered in leadership terms as a 'Wicked Problem'. Wicked Problems are those that are very complex and require a collaborative process to make any kind of progress. Demand on services, increased service delivery to address backlogs alongside building works and lack of public transport all contribute to the challenges. Please be assured that discussions are ongoing and this report has been shared within the organisation.
- Whilst Healthwatch Volunteers did not see staff handwashing facilities please be reassured that these are widely available within treatment areas and are well used. Staff have individual hand gel dispensers and regular handwashing and general Infection Prevention and Control (IPC) audits are conducted regularly; we would be pleased to provide further information if requested.
- We were pleased that the kindness and supportive nature of staff was witnessed but will feedback to and remind staff about the importance of privacy and the risk of being overheard particularly when the department is overcrowded.
- We are pleased to report that vending machines have arrived at Lincoln and two hourly nutrition and hydration rounds are conducted across all our Accident and Emergency Departments.
- We are sorry that the disabled toilet was out of use and although it was noted that the Estates Team were in attendance and was subsequently repaired. We will ensure that should this happen again a notice is placed indicating where the nearest available alternative is and that if anyone needs assistance to speak to a member of staff.

Pilgrim Hospital

- We are pleased to report that there is a programme of works already underway addressing the potholes and general condition of the car parks and fully acknowledge the distress and frustration for patients and visitors when trying to find a car parking space. Unfortunately, this is an ongoing challenge as mentioned above.
- We were surprised to read that wheelchairs were not available as these are usually present. Recently new wheelchairs were purchased by ULH Charity that are managed by our Volunteers and have tracking devices on so they can be found and retrieved for whoever needs them next. 50 chairs were purchased, 20 each for Lincoln and Pilgrim and 10 for Grantham. We will ensure a number of these trackable wheelchairs are made available at our A&E departments.
- In relation to patients having observations and intravenous infusions whilst in the waiting room we appreciate this can be upsetting for some, however our waiting room is, in these times of high demand, also having to be utilised as a 'chairs for treatment' area for some patients. You will be aware of the plans for the new A&E at Pilgrim Hospital acknowledging the fact that the department needs expanding and rebuilding and we are excited that this is now beginning to happen as it will provide more dedicated space for chairs for treatment and waiting areas.
- As noted earlier with regards to food and drink, a vending machine has been ordered and new water fountains being purchased to remove the need for water jugs.
- The back corridor where patients were waiting for UTC is now closed; at the time of the visit this was a LCHS service.

Emerging themes

- There is a significant programme of work being undertaken across the system to address A&E attendance and admission avoidance and this includes promoting NHS111, primary care alternatives and a range of transformation projects. All of these will impact on long waits.
- Listening to patient feedback in relation to confusion between A&E and UTC is important and sits alongside confusion from some NHS 111 and GP messaging that we will consider at our system meetings and we will pass this report on to colleagues in the Integrated Care Board (ICB).

Recommendations

Thank you for sharing these and we are pleased to consider them.

- Carers Charter– this has now been finalised and a range of Carers resources are being circulated.
- Data protection – Thank you for the feedback and we will discuss with the team as discussed above.
- Signage – this information has now been removed; however we recognise there will likely be ongoing changes as part of the new build so will be mindful of any changes in real time.
- Waiting times – electronic boards have been installed on all sites.
- Develop the role of the ULHT Volunteer – we have a number of A&E volunteers on all our sites and are sorry you did not get to meet them. Please be assured that any deterioration in patient condition would have been noted and managed with staff being allocated to waiting areas.
- Smoking – This has been highlighted by the Trust and that a smoke free site status is something we continue to strive for, however, the Trust is looking for options to improve the patient and staff experience on the site for smoking

We were very pleased to see the positive feedback and examples of good practice highlighted within the report and will feed this back to the teams.

Jennie Negus. Head of Patient Experience.

On behalf of ULHT Accident & Emergency and Patient Experience teams.

23.06.23

Distribution

The report is for distribution to the following:

- United Lincolnshire Hospital Trust (ULHT)
- Lincolnshire Integrated Care Board (ICB)
- Care Quality Commission (CQC)
- Lincolnshire County Council (LCC)
- NHS England
- Healthwatch England and the local Healthwatch Network

Published on www.healthwatchlincolnshire.co.uk

Appendices

Healthwatch Lincolnshire: Lone Working Risk Assessment

Healthwatch Lincolnshire			
Enter and View and Mystery Shopper Authorised Representative Volunteer Role			

Assessment Carried out by:		Date of Assessment:	
Job Title:		Duty Holder Name:	
Department/Location:			

Ref No		Yes/No	Comments	Action Required
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EQUIPMENT

1	Can equipment be safely transported/carried - information stands, banner and clip boards.	Yes	Includes use of vehicle to and from location set up and take down at venue	
		N/A		
		No		
		N/A		
2	Have the Volunteers had correct lifting and erecting awareness techniques shown to them	Yes		
		No		
		N/A		
3	Is there sufficient space to erect the promotional stand/banner without causing damage to people or property?	Yes		
		No		
		N/A		

PEOPLE

1		Yes		
		No		

	Has the Volunteer been advised of how to conduct engagement with members of the public?		N/A		
2	Is the Volunteers own health adequate for the activity		Yes		
			No		
			N/A		

INFORMATION STAND /BANNER

1	If promotional stand/banner being used after erection are people able to pass properly without prospect of a tripping hazard?		Yes		
			No		
			N/A		
2	Is the stand/banner safe from being knocked or blown over?		Yes		
			No		
			N/A		

FIRE SAFETY

1	Is a fire drill due during the period you are there		Yes		
			No		
			N/A		
2	Are fire exits clearly signed?		Yes		
			No		
			N/A		
3	Are evacuation routes and exits free from obstruction?		Yes		
			No		
			N/A		
4	Are you aware of their nearest evacuation route and their assembly point?		Yes		
			No		
			N/A		
5	Make a note of who to raise any concerns with		Yes		
			No		
			N/A		

Ref No		Yes/No	Comments	Action Required
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INTERNAL ENVIRONMENTAL SAFETY FACTORS

1	Are the premises reasonably comfortable in relation to temperature and ventilation most of the time?		Yes		
			No		
			N/A		
2	Are lighting levels adequate?		Yes		
			No		
			N/A		
3	Is the area free from loose floor coverings or unexpected changes in floor level?		Yes		
			No		
			N/A		
4	Are low head heights appropriately marked?		Yes		
			No		
			N/A		
5	Are you familiar with personal needs, - drinks, toilets, first aid, staff room		Yes		
			No		
			N/A		
6	Are the noise levels adequate		Yes		
			No		
			N/A		
7	Are you Volunteering alone if yes have you signed in at the appropriate place/area and are you familiar with the protocol for lone Volunteering.		Yes		
			No		
			N/A		
8	At the end of your Volunteering session sign out at appropriate place/area and advise HWL contact		Yes		
			No		
			N/A		

Assessor Name:		Duty Holder Name:	
Signature:		Signature:	
Date:		Date:	

Observation Sheet

Name:

Hospital:

Date:

Time:

Part 1 – Quality of care, information and communication

	Yes	No	Comments
Are staff wearing name badges that are clearly displayed and clearly identifiable uniforms?			
Are reception staff treating patients in a friendly and caring manner?			
Whilst at reception, can patients discuss their concerns without being overheard by others?			
Do staff check on patients in the waiting areas?			
Are patients in waiting areas responded to if they are clearly in pain or distressed?			
Are medical staff treating patients in a friendly and caring manner?			
Are staff providing patients with clear information? (e.g. explaining what will			

	Yes	No	Comments
happen next; what treatment patients are receiving & why)			
Is this information appropriate for those with language difficulties, sensory impairments or learning disabilities?			
Are patients able to discuss personal issues/concerns in private?			
Is patient dignity protected? (e.g. whether curtains provide adequate cover and are used appropriately)			
Any other comments:			

	Yes	No	Comments

Part 2 – Environment and cleanliness

	Yes	No	Comments
Are medical supplies and equipment safely stored? (e.g. is medication stored securely)			
Is the department clean? This includes:			
Floors			
Walls			
Toilets			
Chairs			
Waiting Area			
Treatment Area			
Ward			
Are there enough seats?			

	Yes	No	Comments
Are the seats comfortable?			
Is the department accessible for people with mobility difficulties?			
Are there clear places for patients and staff to wash their hands?			
Are patients able to access food/drink?			
Are there clear signposts/directions to the department?			
Is there clear information available to patients about the service provided here? (e.g. signs, display screens, leaflets)			
Are there enough car parking spaces?			
Are there enough disabled spaces?			

	Yes	No	Comments
Any other comments:			



healthwatch

Healthwatch Lincolnshire
Rooms 33-35
St Georges Road
Boston
Lincs
PE21 8YB

www.healthwatchlincolnshire.co.uk

t: 01205 820892

e: info@healthwatchlincolnshire.co.uk

 [@HealthwatchLinc](https://twitter.com/HealthwatchLinc)

 [Facebook.com/healthwatchlincolnshire](https://www.facebook.com/healthwatchlincolnshire)