

**Enter and View analysis of visits to
specific places of support services related
to diabetes**



March 2024

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Aim of the report

This report will provide an overview of the Enter and View visits conducted between April 2023 and March 2024.

This will include visits to support services related to diabetes however, the visit to Harvest View, 28 Harvest Rd, Rowley Regis will not be included as it will be a standalone report.

NB: to access the report for each visit:

<https://www.healthwatchesandwell.co.uk/news-and-reports/>



Introduction

Healthwatch Sandwell (HWS) have the power¹ to visit health and social care services, where health and social care is publicly funded and delivered, these visits are known as Enter and View visits.

The Health and Social Care Act (2012) allows Authorised Representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrist and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation so that we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

This power to Enter and View services offers a way for HWS to meet some of their statutory functions and to collect evidence of what works well. HWS use this evidence to make recommendations to commissioners and providers of health and social care services and to inform changes both for individual services as well as system wide and to improve people's experiences.

The rationale for a visit is always evidence-based by using:

- Feedback and experience from members of the public and community

¹ Section 225 of the Local Government and Public Involvement in Health Act 2007

Part 4 of The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives)

Regulation 2013 Section 221 of The Local Government and Public Involvement in Health Act 2007

The Health and Social Care Act (2012)

- Regulators feedback or reports
- Information from commissioners, providers and/or regulators
- Follow up points raised during a prior CQC inspection to establish whether planned corrective actions are being taken
- Assessment of the impact of change
- Sharing of “best practice” in a specific area and providing support

Background

In addition the Engaging Communities Solutions criteria² for deciding if an Enter and Visit is announced, semi announced or unannounced states that:

An announced visit may be selectedwhere it contributes to larger ongoing piece of work.

Taking into consideration the rationale and criteria for visits, the Enter and View programme for 2023/24 supported the theme of the priority project :

Diabetes – exploring Sandwell health, care and support services through Patient experiences and voices.

The 2023/24 Enter and View programme focused: on Patient’s experiences of support services related to diabetes e.g. diabetes clinics, phlebotomy, retinal screening services (at hospital eye clinics and opticians etc), foot clinics and urology. There were a range of these services (22 venues approx.) A sample of Clinics were visited to ensure that the 6 towns were covered – see **appendix 1**. Some sites offer a range of these services so some visits were combined.

² ECS Enter and View Policy June 2022



During the visits, the team of Authorised Representatives focussed on:

- Observing how people experience the service through watching and listening
- Speaking to people using the service to find out more about their experiences and views
- Observing the nature and quality of services
- How long they have waited to access this service
- Will ask about their experiences of diabetes (if applicable) and how this service assists in the management of the condition.

What we did

A pre-set of questions were asked that covered:

- Patient experience of the service including booking appointments, care by staff, accessibility to the building and information and any suggestions to improve the service.
- How staff meet individual needs of Patients including the communication needs of Patients who have impairments, handling anti-social behaviour from Patients/relatives, how to support Patients who want to raise a complaint/concern about the service and suggestions to improve the service.
- Observations were made of the environment both externally and internally, that included: Signposting, accessibility, lighting, refreshments, cleanliness, parking and transport links.

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Healthwatch principles

HWS Enter and View programme is linked to the eight principles of Healthwatch, and questions were asked around each one. See **appendix 2**.

Publicity

Prior to the visit a poster was sent to each Provider to advertise the visit, it was expected that this was displayed prior and during the visit.

Enter and View reports are shared with providers, regulators³, the Local Authority, NHS commissioners and quality assurers, the public, Healthwatch England and any other relevant partners based on what was found during the visits.

They are published on all our social media platforms and website.

<https://www.healthwatchesandwell.co.uk/>

After each visit a report was produced and the provider was given an opportunity to comment on the report before publication. Each report gave an overview of the service and provided customer experience feedback. Where appropriate, recommendations were made based on the findings of the visit and it was anticipated that these recommendations will contribute to improving service delivery within the and in turn improve the service experience for Patients.

³ Care Quality Commission

360° evaluation/feedback form

Once the report was published HWS sent each a 360° evaluation/feedback form. The aim of form is to gain feedback about the visit to ensure that future visits are effective for Providers as well as people using the service. The form was returned directly to the Manager of Healthwatch so that a review of our practice could occur.

23% of the forms were returned and those Providers rated the visits as **5** (very satisfied).

There were no suggestions to improve the visits. The Providers stated that the visits had helped them to identify areas for improvement.



Comments from 360° evaluation/feedback forms



"The visit was planned well, and enough notice was given"

"We were able to act upon the recommendations which were highlighted"

"Polite and courteous with easy going manner which encouraged conversation and honest feedback"

"Thank you so much....we received the report positively, thank you for the detail....We are now focused on addressing the concerns raised"



Findings

This section gives an amalgamation of the findings from **all** the visits.

Waiting time for appointment

69 % had waited less than 4 weeks for an appointment.

One of the Patients at the Urology Outpatient's Clinic was on a two week wait referral system (from GP), which allows a Patient with symptoms that may indicate they have cancer to be seen. This Patient and their relative were very happy about this as they were experiencing anxiety at this time.

The Foot Clinics had the longest waiting times, this was attributed to a back log which accumulated during the Covid-19 pandemic.

Being listened to

100% said they were listened to and **89 %** said they had their questions answered by staff. Staff were described as 'understanding' and showed empathy.

WHO WE SPOKE TO...

90 people both men and women
from mixed ethnic backgrounds



Patients gave extremely positive feedback about staff, the feedback stated that that the majority of staff were polite, courteous, friendly, patient, helpful, treated them with dignity and respect and were professional.

However 2 people commented that upon arrival at Birmingham Midland Eye Centre (BMEC), they did not find the receptionist helpful and lacked empathy, but staff were attentive once in the clinic.

Patient's comments about staff



'The staff at this clinic are so helpful...I really appreciate this service'

'Fantastic, I can talk to them easily'

'I have been treated well ... staff are good at communication ... very nice polite people'

'Lovely ...they do more than enough...they listen to me'

'Staff are excellent'



Choice

59 % were given a choice of Provider.

Concern about choice of venue was expressed by Patients attending the Diabetic Screening Service at ASDA Oldbury Superstore. 100% of these Patients had **not** been given a choice to attend this clinic and 40% of these Patients were disappointed that this was not closer to home.

All Diabetic Eye Screening appointments are allocated by InHealth Intelligence, who have the contract for Diabetic screening in Birmingham, Solihull and Black Country. Patients informed us that their appointment letter explained that if the appointment was not convenient then they needed to contact InHealth Intelligence to obtain an alternative appointment, the onus is on the Patient to ask for a different appointment with an alternative provider which may be closer to their home which would avoid travel costs and inconvenience. 20% struggled to get to the venue as it is not close to their home and had to book a taxi.

This was corroborated by Chapman Opticians whose Patients can make their own appointment at a time that is mutually acceptable for regular eye testing. However, to attend for a diabetic eye screening appointment these are allocated by InHealth Intelligence.

Booking system

58% found the booking system easy and the majority knew who to contact in between visits.

However Patients at Victoria Health Centre (Foot Clinic) described booking an appointment as '**difficult**' as they were unable to get through to their GP who makes the referral for the service.

Rating of service

81% rated the services as '**excellent**' and **50%** were '**very likely**' and **33%** to '**likely**' recommend this service to friends and family.

Patients comments



'it's great, they should send me here all the time instead of City Hospital'

'This is a good service... second to none...they have an understanding about dementia and let me assist with my relative'

'very happy with this clinic, it's a relief to get my feet seen to'

'I really appreciate this clinic...I can ask questions and not feel silly'

'Always a good service plus it didn't hurt!'

'It's a pleasure to visit this clinic and especially as it's local to me'

'It's been a pleasure to visit this optician...the shop is lovely and welcoming'

'So thankful to have this appointment as I want to look after my eye health'



Access

Building

69 % of Patients found access to the clinic easy and had received clear instructions. Most venues were well signposted. However, the Urology Outpatient's Clinic at Birmingham Treatment Centre, Dudley Road, Birmingham, Patients had difficulty navigating the venue.

Information

100% stated that all the information received about their appointment was clear and easy to understand. **44%** Patients were mainly communicated with by letter and

preferred this form of communication although some received an email or text. Patients appreciated having a text to remind them of the appointment.

At BMEC **95%** stated that all the information received about their appointment was clear, concise and easy to understand. Although this is a high percentage rating to receiving clear information, Patients identified a number of issues based on their experiences including the text did not specify which service the appointment was with also a Patient showed us **3** letters with different dates for the same appointment which included one letter with no date on, so they were confused as to whether the appointment was still happening so they just turned up.

Meeting the communication needs of Patients

Communication needs due to a disability, sensory loss or an impairment are covered under the Equality Act 2020 and the NHS Accessible Information Standard (2016) states that NHS funded health and social care providers must meet the information and communication needs of people who access services. Communication should be undertaken in ways that meet identified needs and information should be provided in formats that are clear and easy to understand. This means that people with disabilities, impairments or sensory loss, their parents or carers have rights to reasonable adjustments so that they can access information. Health and social care providers must ask and identify communication needs and preferences, recording the answers so needs can be met.

Meeting the needs of people who are hearing impaired

There a variety of ways people with a hearing impairment can be assisted, including the provision of a loop system.⁴



We found that **8 %** of the places visits had a loop system and we were informed by the Facilities Manager (after the visit) that Urology Outpatient’s Clinic that there was a loop system facility on site in the past, but was unsure if still currently available.

We were informed that that the Consultant’s secretaries book British Sign Language Interpreters when necessary.

Some Providers, the staff speak clearly for lip readers and family/friends are encouraged to join the Patient.

⁴ This is a special type of sound system for use by people with hearing aids. It provides a magnetic, wireless signal that gets picked up by the hearing aid when it is set to ‘T’ (Telecoil) setting. It is the only assistive listening technology that can broadcast directly to a wide range of hearing aids, making them the most popular option for accessible audio in public spaces.

Meeting the needs of people with a visual impairment

The Providers shared the various ways they assist Patients , this included:

- utilise the Eye Clinic Liaison Officer (employed by RNIB) at BMEC. This person aims to assist anyone experiencing sight loss, or their relatives and carers, to access the support they may need
- various staff have developed their verbal communication e.g. say Patient's name and offer appropriate assistance
- staff guide Patients and explain what is happening during the consultations
- staff adjust lighting and occasionally use the torch on mobile phone to brighten the area.
- the consultation is confirmed by telephone by some Providers
- Some Providers record on Patients records if they need large print

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Meeting the needs of people with a learning disability

Staff described how they assist people with a learning disability⁵

Some clinics use Health passports.⁶ The Young Adult Diabetes Transition Clinic access a Learning Disabilities nurse from the Sandwell and West Birmingham NHS Trust.

Many of the Providers encourage carers /chaperones to join the consultation and Staff endeavour to put Patients at ease, including speaking slowly and simply. Practitioners described taking their time and liaising with support workers. The Foot Clinic teams can offer home visits if Patients require this.

Meeting the needs of people with English as a second language

Many of the clinics in Sandwell and West Birmingham NHS Trust described using Language Line⁷ for non-English speakers which are booked via secretaries.

⁵ A learning disability is a reduced intellectual ability and difficulty with everyday activities – for example household tasks, socialising or managing money – which affects someone for their whole life.

<https://www.mencap.org.uk/>

⁶ A Health Passport is for anyone with a learning disability, learning difficulty or autism. It is an important document which tells NHS staff about a person's needs such as medication, personal details and what they like.

⁷ Language Line is a telephone interpreting service that connects via telephone individuals who wish to speak to each other but do not share a common language. The telephone interpreter converts the spoken language from one language to another, enabling listeners and speakers to understand each other.

Some staff are bilingual which is an asset. Family/friends are also encouraged to join the Patient.

Issues identified with communication

The recording of Patients communication needs varied between Clinics. Some clinics described the information technology system flagging the needs once staff recorded them. This was not consistent across the providers and was dependent on staff asking the Patient for the information.

Complaints Process

48% were **unaware** of how to raise any issues. Some stated that they didn't know as they had never had a cause to raise any concerns.

Posters/leaflets about making a comment, compliment or complaint were **not** in all waiting areas. At some clinics in the Sandwell and West Birmingham NHS Trust there were laminated posters displayed that requested Patient's views, entitled '**You said... we did**', and included contact details for the Local Resolution Team and the Complaints Team. This poster also encourages Patients to talk to staff about concerns and compliments.

At the Diabetic Screening Service at ASDA Oldbury Superstore there wasn't a complaints, comments, compliments process advertised at Diabetic Eye Screening service, however, after the consultation InHealth Intelligence send Patients a text requesting feedback about the appointment.

Staff described how they support Patients who want to raise a complaint/concern about the service, this included calmly talking the issue through to 'nip it in the bud' and being honest and transparent. It was explained that the majority of times most complaints are resolved at this stage, however, if it can't be resolved they signpost to manager/reception for a form/leaflet, give contact number for the Local Resolution Team.

We were informed that some staff receive compliments via emails from Patients but they do not actively seek feedback. Staff described perceiving comments/complaints as a learning opportunity.

Staff Issues

Staff were committed and enjoy their roles and aimed to give the Patient a good service. Staff described enjoying making a difference to Patients' lives and working in an effective team.

We were informed that all staff receive on going staff development, which includes supervision and annual appraisals, where training needs were identified, relevant training provided to meet staff's needs. We were also informed that there were career progression opportunities within some Providers. One person had been in the service for 8 years and had access to career progression including a Post Graduate Qualification. Staff were keen to enhance their skills and knowledge in any way that they can.

We were informed by some staff that they are able to achieve a good work life balance with flexible hours and this was appreciated.

Staff have the opportunity to attend monthly staff meetings (either face to face or virtual). These meetings aim to discuss current issues and how to improve the service. Some services appreciated having receptive and supportive management and a Manager with an open door policy⁸ and being effective and a good listener.

Staff comments



'Enjoy promoting good health by using coaching skills'
'Providing hope that Diabetes Type 2 can be reversed with healthy lifestyle choices/habits'



'I love working with people. I like to see happy faces when they leave'
'It's local to where they live'
'Supportive colleagues'

Staff suggestions

Staff involved in the visits were keen to make suggestions on how to improve the service for Patients:

Written communication with Patients

Patients letters need to be in large print and on yellow paper to improve access and independence for people, who are visually impaired. There is a need for standard Patient letters, currently one of the letters asks for a urine sample which isn't necessary, this can cause stress for Patients at times.

Leaflets in other languages are available in the Sandwell and West Birmingham NHS Trust but some clinics need a supply for those Patients who can read and require written information.

⁸ Employees can have direct access to their manager if they want to raise any issue.

Patient transport

On occasions the Patient Transport Service (West Midlands Ambulance Service) can be very late and on one occasion when the Eye Clinic was closed, this left a Patient without access to drinks etc. The same service was described as unreliable and does not meet Patients' needs e.g. provision of ramp to board the ambulance.

Opening hours

The Young Adult Diabetes Transition Clinic identified that the opening hours should be extended to accommodate weekends, especially as young people gain employment. This was also identified at the Foot Clinic at Neptune Health Centre.

Appropriate equipment

At the Eye Clinic a Fundus camera was suggested to capture the images of the retina, optic nerve head, macula, retinal blood vessels, choroid, and the vitreous this would enhance the service provided.

Challenges

Staff identified a number of challenges, which included:

Workload

Staff shortages due to retirements has resulted in large workloads which is a challenge to staff's time management skills.

Some clinics had large workloads:

- The Diabetic Retinal Screener can see up to **40** Patients per day (one every **5** minutes approximately)
- Phlebotomy clinics up to **84** Patients each in all daily clinics which is usually a total of **168** per day if all Patients attend.

BMEC are currently facing workload issues as they treat Patients from outside of the Sandwell and West Birmingham NHS Trust catchment area which is impacting on workloads.

The working environment

The Diabetic Screening Service at ASDA Oldbury Superstore were working in a very small room, this posed challenges when there are wheelchair users and the Practitioner could be at risk if there was anti-social behaviour from Patients.

Technology

At Phlebotomy Clinics, the booking system (Airmid UK app) is relatively new and this has caused confusion for Patients. It is also challenging when the local GP practices do

not follow the procedure e.g. completing request forms this can mean that the Patient has to go back to the GP.

Inappropriate referrals

GPs refer Patients that do not meet the specified criteria for the Foot Clinic.

Anti-social behaviour

We were informed that occasionally staff face anti-social behaviour. However, it was stated these situations are rare. This included rudeness, verbal aggression and racial abuse to staff.

The main causes were attributed to:

- when Patients are irate and frustrated due to waiting to see the consultant/practitioner
- alcohol abuse
- wanting a home visit
- cancelled appointments
- wanting equipment that may not be available e.g. insulin pumps

Recommendations

There were a variety of recommendations made specific to each Provider, however the most common recommendation for **85 %** of Providers was to be proactive in informing Patients of the comments and complaints process.

All Providers need to install a loop system for hearing impaired Patients and advertise this facility with a sign promoting the T sign for the loop system.

Some recommendations related to the need for accessible information e.g. providing letters in larger print for Patients who have a visual impairment, leaflets in community languages to be available on request, the clinic's Information Technology system to flag Patient's communication needs on Patient records and consider extending opening times to accommodate weekends at The Young Adult Diabetes Transition Clinic and services at Neptune Health Park.

Provider feedback about report

54 % of the Providers gave feedback which were involved in their final report which outlines what action they were going to take, this included feedback from:

- the Interim Group Director of Nursing from Sandwell and West Birmingham NHS Trust Primary Care Community and Therapies
- Interim Group Director of Nursing, The Directorate Lead Nurse – Ophthalmology

- The Phlebotomy Service Manager
- Managing Director & Partner Chapman Opticians
- Deputy Programme Manager – Diabetic Screening Service.

Conclusion

This report has provided an overview of the Enter and View visits conducted between April 2023 and March 2024. The visits were made to **13** venues that offer support to people with diabetes as well as the general public. These Providers were chosen to contribute to larger ongoing piece of work, the priority project :

Diabetes – exploring Sandwell health, care and support services through Patient experiences and voices.

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During the visits, using a pre-set of questions the team of Authorised Representatives focussed on observing, speaking to people about their experiences and views of the service. They asked questions including their experience of the service including booking appointments, care by staff, accessibility to the building and information and any suggestions to improve the service.

Observations were made of the environment both externally and internally.

HWS spoke to **90** people both men and women from mixed ethnic backgrounds.

Patients gave extremely positive feedback about staff which included being professional and being treated with dignity and respect. **81%** rated the Provider as **'excellent'**.

The majority of Patients were given a choice of venue to attend, although concern was expressed by Patients attending the Diabetic Screening Service at ASDA Oldbury Superstore.

The majority of Patients stated that all the information received about their appointment was clear and easy to understand. Patients were mainly communicated with by letter and preferred this form of communication.

NHS funded health and social care providers must meet the information and communication needs of people who access services (the Equality Act 2020 and the NHS Accessible Information Standard 2016). This report has highlighted how the services meet the needs of people who are hearing impaired, visually impaired, have a learning disability and people who speak English as a second language.

The recording of Patient's communication needs varied between Clinics, there was a lack of consistency and was dependent on staff asking the Patient for the information.

48% were unaware of how to raise concerns and compliments. Staff described perceiving comments/complaints as a learning opportunity.

Staff were committed to their roles and aimed to give the Patient a good service.

Staff receive ongoing staff development, which includes supervision and annual appraisals, where training needs are identified and relevant training provided to meet staff's needs. We were also informed that there are career progression opportunities within some Providers. Staff were keen to enhance their skills and knowledge in any way that they can.

Staff have the opportunity to attend regular staff meetings (face to face or virtual).

This report has included suggestions made by staff to improve their service and challenges that staff face, which included, workload, working environment and anti-social behaviour. The latter situations were rare.

This report has given an overview of the recommendations that were made, however the most common recommendation for **85 %** of Providers was to be proactive in informing Patients of the comments and complaints process.

All Providers need to install a loop system for hearing impaired Patients and advertise this facility with a sign promoting the T sign for the loop system.

Acknowledgments

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Appendix 1

Overview of visits 2023/24	
23 rd May	Diabetes clinic Sandwell General Hospital Lyndon West Bromwich B71 4HJ
The Diabetes Clinic gives Patients the chance to meet a range of different members of staff who have specialised and have years of experience looking after people with diabetes who can check that they are as healthy as possible and give them highly specialised advice on how to look after their diabetes. Most referrals come via the GP.	
13 th June	Eye Clinic Sandwell General Hospital Lyndon West Bromwich B71 4HJ
Ophthalmology is a large area of medicine with ophthalmologists specialising in different conditions of the eye. The Patient's GP will have referred to the most appropriate consultant's clinic.	
11 th July	BMEC – Out Patients City Hospital NHS Trust Dudley Road Birmingham B18 7QH
Birmingham and Midland Eye Centre is one of the largest tertiary level facility of its kind in Europe which provides expertise in clinical care, research and education. It offers a comprehensive set of services including ophthalmology Accident and Emergency, diagnostics, day surgery and out patients, as well as housing administrative and educational facilities	
18 th July	Urology Outpatient's Clinic City Hospital NHS Trust Dudley Road Birmingham B18 7QH
Urology focuses on the urinary tracts of men and women, and on the reproductive system of men. The Urology Department at both City and Sandwell Hospital sites provide a general urological service as well as sub-specialist tertiary referral care.	

26 th July		Young Adult Diabetes Transition Clinic City Hospital NHS Trust Dudley Road Birmingham B18 7QH	
The Young Adult Diabetes Transition Clinic is a service aimed at providing care, treatment and education for young people with diabetes aged from 19 to 24 years old depending on needs.			
1 st August	Neptune Health Park Sedgley Road West Tipton	8 th August	Victoria Health Centre 5 Suffrage Street Smethwick
5 th September	Mesty Croft Clinic Alma Street Wednesbury	20 th September	Warley Medical Centre Ambrose House Kingsway Oldbury
The Department of Foot Health cares for a wide range of foot and lower limb problems amongst the population of Sandwell and West Birmingham community, with the primary focus on preventative care to minimise the risk of complications which are associated with, but are not exclusive to, diabetes. Patients can be referred to the Department of Foot Health by any healthcare professional. A GP referral is required to access specialist services, Rheumatology, Neurology, Nails surgery and Biomechanics clinics. Patients can self-refer for core services (general podiatry and foot care)			
1 st August	Neptune Health Park (Phlebotomy) Sedgley Road West Tipton	8 th August	Victoria Health Centre (Phlebotomy) 5 Suffrage Street Smethwick
Phlebotomy is the process of taking blood samples from Patients, to aid doctors in their investigations and diagnosis. At Sandwell and West Birmingham NHS Trust, all blood tests are by appointment only and can be carried out at a number of locations in the Borough.			
27 th September		Chapman Opticians Ltd. 61 Union Street Wednesbury WS10 7HB	

Chapman Opticians are an independent family-owned opticians incorporating Chapman Opticians and Chapman & Myers. As Opticians they offer eyecare for the whole family using cutting edge technology such as Optical coherence tomography scanning and digital photography, they provide in depth glaucoma screening, macular degeneration assessment and overall eye health checks.

3rd October

Diabetic Screening Service
ASDA Oldbury Superstore
Wolverhampton Road
Oldbury
B69 4PU

The provider of the NHS Diabetic Eye Screening Programme for Birmingham, Solihull and Black Country changed is InHealth Intelligence, on behalf of the NHS. The service delivers Diabetic Eye Screening in a variety of locations throughout the area, including GP surgeries, hospitals and optician practices.

Asda is the first supermarket in the UK to offer NHS Diabetic Eye Screening in its stores as part of a partnership with InHealth Intelligence.

Appendix 2

Healthwatch principles:

A healthy environment: Right to live in an environment that promotes positive health and wellbeing.

Essential Services: Right to a set of preventative, treatment and care services provided to a high standard to prevent Patients reaching crisis.

Access: Right to access services on an equal basis with others without fear of discrimination or harassment, when I need them in a way that works for me and my family.

A safe, dignified and quality services: Right to high quality, safe, confidential services that treat me with dignity, compassion and respect.

Information and education: Right to clear and accurate information that I can use to make decisions about health and care treatment. I want the right to education about how to take care of myself and about what I am entitled to in the health and social care system.

Choice: Right to choose from a range of high quality services, products and providers within health and social care.

Being listened to: Right to have my concerns and views listened to and acted upon. I want the right to be supported in taking action if I am not satisfied with the service I have received.

Being involved: To be treated as an equal partner in determining my own health and wellbeing. I want the right to be involved in decisions that affect my life and those affecting services in my local community.

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