

# Northampton General Hospital

## Ophthalmology

### Enter and View

April 2024



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## Introduction

Healthwatch aims to conduct regular evaluations of selected health and social care services within the community. Conducting these reviews help us to directly support and give valuable feedback to services that have been identified as needing focus. Our investigations result in our service making recommendations for ways that service providers can continue to provide effective and satisfactory care. Healthwatch North and West Northamptonshire's aim with this Ophthalmology Unit visit was to evaluate the services being provided within Northampton General Hospital's Eye Unit which included Ophthalmology Outpatients, the Eye Casualty Unit and the Singlehurst Clinic.

Northampton General Hospital's recent rating from the CQC<sup>1</sup> – Care Quality Commission was noted as requiring improvement, and this was kept in mind during our visit to the various services. Although we do recognise that this rating is representative of the whole hospital and not a specific rating for the Ophthalmology Department. During the planning phase of this visit, the Friends and Family survey ratings were reviewed, and it was noted that Ophthalmology had been slightly lower than other areas within the hospital. This is also an area within the hospital that Healthwatch has not previously reviewed.



<sup>1</sup><https://www.cqc.org.uk/location/RNS01/inspection-summary#care>

## Key Findings

### Positives

- Overall the staff are friendly and helpful, they have positive impacts when interacting with patients and give the impression that they are dedicated to their jobs and care for the patients within their clinics.
- Patients have a positive experience with the clinical teams within the Ophthalmology Departments
- The facilities are clean and well-maintained in terms of functionality and patient safety.
- The seating areas were clean and there are infection prevention measures in place to ensure patients and staff are kept safe, with hand gels available around the department and necessary notices were displayed appropriately.
- The directional signs and the toilets are dementia friendly with their contrasting colours.
- The facilities are accessible for those with physical disabilities, with wide corridors and a lift to access the Singlehurst Clinic.
- There was positive moral and satisfaction of staff within their current roles and responsibilities.

### Challenges

- The environment within the unit is needing improved décor, as this takes away from the quality of service being provided.
- The patient information that is displayed is limited and difficult to read due to the small print.
- Lack of patient information and materials available for patients in other languages.
- The notice boards could be better organised and utilised more effectively.
- The parking issues experienced by patients is significantly affecting their experience of the services.
- The Ophthalmology Outpatient's Department is lacking patient engagement resources, such as TV to keep patients engaged.
- Patients feedback that the wait times were longer than expected for their appointments.

## Recommendations

### Environment

We understand that the NHS is under budgetary pressures, and this can cause challenges around minor improvements, such as environment and décor. However, we feel that some minor changes could be made to the environment that would help the overall image of the facility. It is clear that the department would benefit from a refresh on the paint work, as in many areas it is peeling and chipping, causing areas of the service to look visually unappealing. There were a few areas on the floors of the Ophthalmology Outpatient's Department where the flooring was lifting and peeling back and to mitigate this, duct tape was used. Although it is a temporary solution, it would be of benefit to repair these areas so that the risk of someone tripping is reduced, particularly as this cohort of patients may have visual impairments or may be elderly.

### Engaging Patients

In the waiting room of the Ophthalmology Outpatients Department, we recommend that more is done to keep patients engaged while they wait for their appointment. It would be beneficial to mirror the approach of mounting TVs on the walls and playing shows while patients wait in the Ophthalmology Outpatients waiting room, as seen in Eye Casualty and the Singlehurst Clinic. The department does have a new, large TV that is mounted in the waiting room, which can be utilised. We did note that the Directorate Manager stated that there are plans for it to be set-up and used to display notices, so this is something we will look to review again in future.

It is worth noting that one patient suggested that the department add in a vending machine with food for patients that must wait a long time for appointments. This could be a beneficial addition for patients, as there is no easy access to food or facilities near the Eye Unit section of the hospital.

### Communication

We noted that posted information and the use of notice boards across the departments could use some improvement. The size of the font used for important notices and patient information could benefit from being increased, or alternatively the size of the printed flyers could be increased. We suggest this as we found that although the visible notices mostly contained helpful information

and support for patients, the font made the messages difficult to read, which may pose challenges for patients who are attending the clinic due to sight difficulties. We also noted that as some of the notices were not relevant, it is suggested to review the current posted information to ensure that they are kept up to date and relevant to the needs of those attending the clinics.

Patients expressed some concerns over the length of waiting times and lack of communication regarding the expected wait times. We noted that more could be done across the Ophthalmology Department to update and communicate with patients regarding the expected waiting times for each clinic. By ensuring that notice boards that display clinic timeframes and expected wait times are kept up to date, it will ensure that patients expectations are managed.

We noted that information displayed that would inform patients which staff and physicians working within the clinics also needed updating.

We observed that there was a need for the service to improve on its approach regarding inclusivity and equality measures, as it was noticed that those who do not speak English as their first language, may struggle due to a lack of informational materials available in other languages. We recommend that this issue is addressed by the department to see how the posted information and materials can be made more inclusive. This also applied to the need for more notices and patient information that is targeted to diversity and minority groups to ensure they are receiving support.

### Hospital Facilities

A theme we heard from patients about issues they experienced while accessing their appointment was parking. Many patients experienced frustration and challenges when trying to find parking at Northampton General Hospital. Unfortunately, this is an issue with the facility as a whole, but it effects each department within the hospital. Due to the length of time it is taking patients to find a parking spot, we found that patients are experiencing stress and upset because of the issue. One patient who required assistance and support to navigate their appointment had to do so on their own as their carer could not find a place to park in time to meet them for their appointment. We acknowledge that this is an ongoing issue that we regularly hear from service users of NGH, but it is essential that something be done to address this issue.



## Methods

Healthwatch North and West Northamptonshire have a statutory right to enter Adult Health and Social Care Services to view the premises and to speak with both patients and staff members. We used our ability to enter services and review through a format called an Enter and View. This methodology is a tool originally created by Healthwatch England, and our visit was conducted alongside their guidelines and our Enter and View Policy<sup>2</sup>. This ability to Enter and View services offers a way for Healthwatch to meet some of their statutory functions and allows for the ability to identify what is working well with services and where they could be improved<sup>3</sup>.

We preplanned and arranged this visit with the team at NGH, allowing time for staff and patients to have notice. Prior to our visit, Healthwatch North and West Northamptonshire (HWNW) posters were distributed and displayed within the Ophthalmology Department, informing patients about what HWNW does as an organisation.

Upon arriving at the department, the aim of the review was to ensure that the perspective of the patient is captured, therefore Healthwatch Representatives (staff and volunteers) focused on seeing things through the “eyes of the patient”. Healthwatch representatives used an Enter and View template to guide them through the visit and walked around and observed the department. By walking around, observing the surroundings of the Ophthalmology Department, speaking and asking questions to both staff and patients, Healthwatch was able to gather a thorough understanding of how the service was functioning.

Our team of Healthwatch Representatives used elements of the Patient-led Assessments of the Care Environment (PLACE) framework as a part of the Enter and View, so that we could assess whether the environment would be considered accessible and dementia-friendly<sup>4</sup>. This allowed our organisation to highlight the positives and the elements of the service that are effective, as well as looking to reflect on what can be improved. These findings were documented and summarised by our Healthwatch representatives, which were then expanded and reported on within this report. After the report is finalised, a copy of the report is sent to the Directorate Manager of Ophthalmology services, who will be given the opportunity to respond and asked to formulate an action plan for our recommendations.

<sup>2</sup><https://www.healthwatchnorthamptonshire.co.uk/report/2023-01-17/our-enter-and-view-policy>

<sup>3</sup> [https://network.healthwatch.co.uk/guidance/2019-04-23/guide-to-enter-and-view?gad\\_source=1&gclid=Cj0KCQjwncWvBhD\\_ARIsAEb2HW9oQ\\_19jklyXM7W8hblfMPSyK7rDPcjjGCh25TLBnBvIFr7ar9XH8aAgIHEALw\\_wcB](https://network.healthwatch.co.uk/guidance/2019-04-23/guide-to-enter-and-view?gad_source=1&gclid=Cj0KCQjwncWvBhD_ARIsAEb2HW9oQ_19jklyXM7W8hblfMPSyK7rDPcjjGCh25TLBnBvIFr7ar9XH8aAgIHEALw_wcB)

<sup>4</sup><https://digital.nhs.uk/data-and-information/areas-of-interest/estates-and-facilities/patient-led-assessments-of-the-care-environment-place/dementia-friendly-environments-guidance-for-assessors>

## Summary

On the 8<sup>th</sup> of February 2024, Healthwatch Representatives which consisted of two volunteers and one staff member from Healthwatch North and West Northamptonshire visited Northampton General Hospital's Ophthalmology Department to carry out an "Enter and View". This visit aimed to view the services provided by the department through the perspective of the service users. The Healthwatch Representatives were joined by NGH's Head of Patient Experience and Engagement and the Directorate Manager of the Ophthalmology Department.

On the day of the visit, Healthwatch North and West Northamptonshire representatives went to the Ophthalmology Outpatients, Eye Casualty Unit, the Singlehurst Clinic and the Singlehurst Theatre Bubble. The information gained from the visit was used to make some recommendations, and areas in which the service was providing quality care, were acknowledged.





## Findings from the Ophthalmology Department

The Ophthalmology Department or Eye Unit is comprised of two floors within the southwest section of Northampton General Hospital. The department typically sees an average of 45,000 patients per year. Within the Ophthalmology Department is Ophthalmology Outpatients, Eye Casualty Unit, the Singlehurst Clinic and the Singlehurst Theatre Bubble. Our findings from the department are detailed below.

### Ophthalmology Outpatients

#### Environment

Upon first arriving at the Ophthalmology Outpatients Department, the atmosphere was calm and quiet, the space smelled clean and overall, we were left with a pleasant impression. The department was clean, uncluttered and well maintained. Patients were seen navigating their way through the unit and staff were checking in patients at the front desk and helping direct patients to the right services and waiting rooms. Staff were wearing name badges that were clearly displayed and were seen interacting with patients and staff in a kind and friendly manner.

The waiting room is an open-plan space and it is able to comfortably accommodate a large number of patients. At the time of the visit there were a few patients waiting as well as many spare seats and spaces. The seating areas were clean and there are infection prevention measures in place to ensure patients and staff are kept safe, with hand gels available around the department and necessary notices were displayed appropriately. There is a coffee machine and a water dispenser available for patients to use. It was noted that the waiting room was lacking elements for patients to engage with, like a TV playing a show or displaying key messages, and there was little wall décor for patients to observe while waiting for their appointment. There was a large screen TV facing the seating area in the waiting room, but it was not being utilised.

Within the walkways and wide corridors of the Outpatients Department, it is noted that some areas are in need of repair. It was observed that in the hallway leading to the treatment rooms, the flooring is lifting and to prevent this, duct tape is securing it in place, which could pose a trip hazard. We observed that the paint on the walls in many areas of the department is peeling and chipping.

We observed a few treatment rooms, all of which were clean and well-kept by the department.

## Accessibility and Communication

The Outpatient's Department is accessible for those who have a disability or impairment. There is a hearing loop at the reception to support patients who are hard of hearing. There are no obstructions within the facility that limit movement. We consulted the PLACE guidelines to assess whether the department is dementia friendly and from this we found that the toilets were in contrasting colours as was the signage around the department, making it a space that is friendly to those with dementia.

The signage around the department that directs patients where to go is clear and easy to read. The information posted on notice boards within the waiting room is helpful and information to support patient wellbeing is visible, however we found that especially considering that this department caters to those with vision impairments, all the font on the notices is quite small and difficult to read. The signage and patient information are friendly to those with learning disabilities, but not accessible for those whose first language is not English, which could pose challenges. It was also noted that the board which typically shows the clinic times and expected wait times was not filled in and needed updating.

## Eye Casualty Unit

### Environment

Upon arriving at the Eye Casualty Unit, patients need to have a pre-arranged appointment, this can be done same-day due to the nature of the issues people present with at the unit. Patients must press a buzzer at the door and wait for a staff member to accept the buzzer notification and unlock the door into the unit. Staff were helpful but had minimal interaction with the patients apart from the 'buzz-in' at the entrance and the initial check in at the reception window. The environment felt calm and welcoming.

The casualty unit has two waiting rooms, the immediate waiting area on the right had wall décor catered to engaging with children and a few rows of seating. The waiting area past the check in desk, also had ample seating for patients and children's pictures and prints on the walls. Through a conversation with a staff member, we learned that the waiting area at the front of the unit was

waiting for some additional materials to keep children occupied, although none were present on our visit. Although the unit sits within an older section of the hospital it is well-maintained and well-lit, the chairs within the unit are comfortable. There were various TVs mounted on the walls of the waiting rooms for patients to watch to keep them occupied while waiting for their appointments. It was noted that patients in the far waiting room were watching the TVs, but the patients were not in the first waiting room and this may be because the TV is positioned on a side wall and is slightly awkward to watch in many of the seats due to its position.

There is a water dispenser present for patients to access while they are waiting for their appointment. There is also an air conditioning unit to help regulate the temperature of the waiting room. The space and seating areas were mostly clean, with a few of the seats feeling slightly tacky. There are infection prevention measures in place to ensure patients and staff are kept safe, with hand gels available around the department and necessary notices were displayed appropriately.

### Accessibility and Communication

The Eye Casualty Unit's environment is accessible for those with disabilities. The space has a clear route through the unit to the waiting rooms and appointment rooms. We consulted the PLACE guidelines to assess whether the department is dementia friendly and from this we found that the toilets were in contrasting colours as was the signage around the department, making it a space that is friendly to those with dementia.

The visible notices mostly contained helpful information and support for patients, however not all notices were relevant and some were outdated. A yellow notice in the first waiting area informs patients that if they see the nurse practitioner, they will have a shorter waiting time than if waiting for a doctor. While the notices are accessible for those with learning disabilities, the provision of notices in a range of languages was not apparent, which may pose a barrier for those whose first language is not English.

## Singlehurst Clinic

### Environment

Upon arriving at the Singlehurst Clinic the reception area was clearly visible and the waiting area and treatment rooms were close by. The general impression when entering the clinic, was that the décor was clean and bright, and the atmosphere appeared to be calm and unhurried. On the day of our visit, the clinic was run by the visiting team from Oxford University Hospitals Eye Hospital who were reviewing patients who have had treatment under their care.

Reception staff were very welcoming and friendly, they were observed calling in patients to go through to the consulting rooms and checking in patients at reception.

Preliminary exam rooms and equipment appeared clean and uncluttered for a working environment. When asking about the equipment, we were told that there is an equipment review done on a regular basis that helps procure funding for new and up to date equipment. The initial eye treatment rooms looked clean and equipment was fit for purpose. The area is compact and areas easy to access without the patients needing to travel far. The consulting rooms were partitioned off and would facilitate privacy. The toilets were clearly visible and near to all areas, there are two toilets, one for males and one for women and those with disabilities, they appeared clean and well kept. Hand sanitising units clearly visible on entrances to rooms, ensuring health and safety measures were observed. The corridors were relatively clear for passage to waiting areas.

The waiting room was spacious and at the time of the visit there were spare seats available for incoming patients. The seats were of hospital standard and most had arm rests to support patients to get from sitting to standing. Our team was informed by the Head of Patient Experience and Engagement that larger chairs for bariatric patients can be arranged if there is a need. Within the waiting room there were two TV screens, one showing a TV programme and the other displaying information for patients.

### Accessibility and Communication

The Singlehurst Clinic was concluded to be accessible for those with disabilities. The clinic is located on the first floor and can be accessed by a lift. The doorways and corridors leading to waiting area appear wide enough to accommodate

mobility aids and wheelchairs. We found the directional signage and bathrooms were dementia friendly, with appropriate contrasting colours.

The general signage and patient directives were easily read and had contrasting colours. There were notice boards on the walls of the clinic as well as a patient survey box located within the waiting room. We found that the patient information displayed could have been clearer, including ensuring the information to indicate who the clinic team staff were for the day was visible. It was noted that the use of plain language/s, large font, and better use of colour would help improve the posted information. Information available in other languages was not observed.

The Singlehurst Clinic has a Northamptonshire Association for the Blind (NAB) liaison officer who has been contracted to the department to give advice and support to patients provide information to patients as they navigate their sight difficulties. It was reflected by clinic staff that there has been great benefit to having the NAB liaison officer available for patients to engage with.

## Singlehurst Theatre Bubble

### Environment

Upon entering the Theatre Bubble, it was noted that the area is relatively small and appeared clean and tidy. The atmosphere appeared calm and organised, and patients appear to be looked after in a professional and friendly fashion. We observed staff calling in patients to the initial assessment rooms, they were always friendly and professional when interacting with patients.

The Bubble has two small assessment rooms and seating along one wall for patients, with a few patients seen waiting. The seating area is limited, but this is not an issue as there is not typically many patients waiting at one time, due to the small size of the area. The entrance to the theatre suite is through closed doors. The assessment rooms were observed and were found to be well-maintained and fit for purpose. Hand sanitising units clearly visible on entrances to rooms, complying with patient health and safety. The corridors were relatively clear for passage to the waiting area.

### Accessibility and Communication

As the Theatre Bubble is an off shoot of the main Singlehurst Clinic, it is equally accessible by the lift for those with limited mobility. The few signs and visual



aides present within the Bubble were concluded to be easily read and friendly for those with dementia and learning disabilities. There is a board present by the front of the Theatre Bubble which highlights the patient-led decision-making group for the Ophthalmology Department. This was a great way to show the impact patients have had in the changes and environment of the department and patient voice.

The waiting area is a small space outside initial assessment rooms and because of this we noted the possibility that the area could become congested if wheelchairs or walking aids were present.

## What People Told Us

We spoke with staff and patients within the Ophthalmology Department at NGH to ensure that we gathered a comprehensive understanding of their experiences and feedback both from working in and being patients of the department. When speaking to patients and staff we informed them at the beginning of the interviews that their identify would be kept anonymous. We were able to speak with a total of 13 patients and 4 staff members, and this is what we found.

## Service User Feedback

### Communication

We spoke with patients about communication and asked them how they found the communication from NGH leading up to their appointment. For the patients who were accessing the Eye Casualty Unit this was different from a regular appointment at the Outpatients or Singlehurst Clinics, so we kept this in mind when speaking with patients. The overall experience from patients was mixed, with the majority of patients experiencing good communication from NGH and a few patients experiencing issues, with one patient expressing frustration with a few appointment cancellations.

### Access

We asked patients whether it was easy to access and find their appointment's location and this question received mixed sentiments. Some patients found it easy to find and access, especially if they had been to the clinic or department previously, saying:

*Service User: "I found it easily, as I am familiar with hospital and department".*

For the patients who did not find it easy to access and find their appointment's location, this was solely due to the issues experienced with parking at the hospital's site, saying:

*Service User: "No, it is always difficult and stressful. The car parking is poor. Carer needs to park at drop off, take mum to department, leave her then find a parking space. One time it took so long to find a space his mother saw the clinical staff on her own."*

*Service User: "No, it was terrible. Bad experience with parking, and very difficult to find a spot."*

*Service User: "It took 45 minutes to park, however once I looked at the map, I was able to follow signs to department."*

*Service User: "Parking very stressful, causes extra stress and worry - 45 mins."*

This feedback identifies that the parking issue at NGH one which needs to be addressed by the organisation as a whole.

## Experience

We asked patients about how their interactions with staff members were during their visit to the Ophthalmology Department, every patient unanimously reported a positive experience with staff members. A few patient voices are highlighted below:

*Service User: "Doctors are easy to talk to and other staff very good"*

*Service User: "Staff at NGH always helpful"*

Patients were asked if there was anything that they wanted to highlight as a good experience regarding their appointment, themes identified from patients were as follows:

- Kind and friendly staff
- Appreciated the ability to see the surgeons who conducted their operations.

Patients were asked if there was anything that could be improved about their appointment, the majority of feedback was surrounding the long wait times and delays experienced with their appointments. Patients said the following:

*Service User: "Waiting times in the clinic too long. Seen by nurses initially quickly but waiting to see doctors can be a 4 hour wait. Outpatients' appointment made later to enable people who need to travel can get to the appointment without issues"*

*Service User: "Waiting times in clinic too long. Use of medical terms not understood. User friendly language needed or better explanation."*

*Service User: "Appointment running behind. Scheduling/timing not being delayed by an hour. No one has informed me about the delay."*

*Service User: "This particular appointment takes so long, no access to food if waiting for a long time. I think the Eye Unit needs a food vending machine."*

This issue with experiencing delays of appointment times was experienced across all clinics within the Ophthalmology Department.

## Staff Comments

We spoke to staff about their experience of working within the department, we asked about the best part of the department as well as what they think could be improved, and asked about support and training.

### Training and Support

We asked staff if they felt adequately trained to handle and understand the services offered in this department, all staff said yes. We asked staff if there has been any training that has benefited them since working at the clinic, one staff member reflected that learning about scanning machines has been helpful to their role. On the topic of training, we asked staff if there was any training they wished to have, there was nothing noted, however some sentiments were shared regarding the method of training provision. One staff member stated that they preferred online training, but another staff member felt frustrated with the online training, stating *"Most of training is online. I feel unable to do it in work time so I do it at home. Due to doing it at home I do not get paid to do it."* This would benefit from a review to ensure that staff can receive protected time to complete necessary trainings on their shift as necessary.

We asked staff about the support they receive from the team, all of the staff said they felt supported, with one staff member saying:

*Staff 1: "I always feel supported by the staff and have worked with the team for a while."*

## The Good and the Bad

We spoke with staff and asked them what the best part is about working within the Ophthalmology Department. Staff said the following:

*Staff 1: "Colleagues, good team that works well together"*

*Staff 2: "The best part of working is being part of a supportive team including emotional support"*

*Staff 3: "Like the variety of the role and needing to adapt to situations and service to individuals"*

*Staff 4: "I feel that I have job satisfaction. It is definitely the team you work with that makes a difference."*

Overall, the staff were complimentary of the team in which they work, which leads us to conclude that there is a good sense of pride in the work the staff do and there is support for staff within the team.

We asked staff members if there was anything that could be improved within the Ophthalmology Department and Northampton General Hospital. Staff said the following:

*Staff 1: "The décor could be upgraded, for example the department needs new blinds, painting in some areas. We also need air fresheners"*

*Staff 2: "In the department the décor is a bit bland and not visually exciting"*

*Staff 3: "Better signage everywhere both within and navigating to the department. I would like to see general signage for our NAB services within department."*

*Staff 4: "TV screens for the patients to watch whilst waiting would be of benefit. Waiting times can be long. More comfortable seating for the patients should be considered."*

Themes identified where staff feel improvements could be made, were around the experience of patients while waiting to be seen by the medical team. Staff felt that the décor needs upgrading within the department. Staff spoke about the need for an increase in resources like TVs for patients to engage with while waiting for their appointment. One staff member highlighted the need for improved signage for patient support services.

## Commissioner and Provider Responses

We were delighted to welcome the visit from the members of Healthwatch. Their observations and feedback will help us to understand how we can improve our services from the perception of the patient. The visit covered our Outpatient areas, Eye Casualty and our Theatre bubble which gave Healthwatch a fantastic insight to the services that our patients encounter when visiting Northampton General Hospital.

We have already started the process of having information screens installed into our Eye Casualty waiting areas to improve the communication and keep our patients informed with regular updates on waiting times and any delays. These screens will also allow us to engage our patients in our short educational videos. Our large tv screen in our downstairs Outpatient waiting area will also shortly be live for our patients to watch whilst waiting for their appointment.

Shortly we will be commencing work with our Equality, Diversity and Inclusion Patient Liaison Officer to review the information and noticeboards across the department, so that we can include multiple language options for our patients as well as looking at providing information such as waiting times for our clinics.

By working in a collaborative approach, we are able to drive forward improvements with the focus on the experiences of patients and their carers being at the heart of our service. This report encapsulates very valid recommendations provided during the Healthwatch visit as well as helping us celebrate aspects that the team felt were positive.



## Acknowledgements

Healthwatch North and West Northamptonshire is grateful for the time, efforts, and cooperation of Northampton General Hospital's Ophthalmology team and Patient Experience team. We appreciate the ability to be allowed into the Ophthalmology Facilities to evaluate and assess the premises, as well as being able to speak with staff and patients to better understand their experiences. Thank you to our volunteers for their hard work and time dedicated to gathering the data and valuable information needed for this Enter and View. Special thanks to Julie Wilson the Directorate Manager for Ophthalmology and Chris Johnson the Head of Patient Experience and Engagement at NGH. Healthwatch North and West Northamptonshire's volunteers Christine Drage and Mark Vincent.



## About Healthwatch North and West Northamptonshire

Healthwatch North and West Northamptonshire is the local independent consumer champion for health and social care. We are part of a national network of local Healthwatch organisations. Our central role is to be a voice for local people to influence better health and wellbeing and improve the quality of services to meet people's needs. This involves us visiting local services and talking to people about their views and experiences. We share our reports with the NHS and social care, and the Care Quality Commission (CQC) (the inspector and regulator for health and social care), with recommendations for improvement, where required.

Our rights and responsibilities include:

- We have the power to monitor (known as "Enter and View") health and social care services (with one or two exceptions). Our primary purpose is to find out what patients, service users, carers and the wider public think of health and social care.
- We report our findings of local views and experiences to health and social care decision-makers and make the case for improved services where we find there is a need for improvement.
- We strive to be a strong and powerful voice for local people, and to influence how services are planned, organised and delivered.
- We aim to be an effective voice rooted in the community. To be that voice, we find out what local people think about health and social care. We research patient, user and carer opinions using many different ways to discover views and experiences. We do this to give local people a voice. We provide information and advice about health and social care services.

Where we feel that the views and voices of Healthwatch North and West Northamptonshire and the people whom we strive to speak on behalf of are not being heard, we have the option to escalate our concerns and report our evidence to national organisations including Healthwatch England, NHS England and the Care Quality Commission.

Find out more at [www.healthwatchnorthamptonshire.co.uk](http://www.healthwatchnorthamptonshire.co.uk)

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# About Connected Together

Connected Together Community Interest Company (CIC) is the legal entity and governing body for Healthwatch North and West Northamptonshire.

The remit of the Connected Together CIC includes:

- Contract compliance
- Legal requirements
- Financial and risk management
- Sustainability and growth
- Agreeing strategy and operations
- Agreeing policies and procedures



Connected Together CIC is a social enterprise and a partnership between the University of Northampton and Voluntary Impact Northamptonshire. It aims to be first for community engagement across the county of Northamptonshire and beyond.

By using our expertise and experience, we can help you in delivering community engagement programmes including workshops, research, surveys, training and more. Contact us to find out how we can help your community.

We welcome ideas and suggestions for projects that benefit Northamptonshire and its community.

Find out more at [www.connectedtogether.co.uk](http://www.connectedtogether.co.uk)



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