

Enter and View report

Cambridge University Hospitals NHS Trust

Service: Addenbrooke's Hospital Clinic 3 - Ophthalmology

Date: Thursday 17th March 2016

Time: 08:30 to 16:00

Authorised representatives: Jenny Egbe, Ann Redshaw, Brian Reynolds, Maria Garner, Susan Dowling, Jane Belman and Kate Hales

Final report - 23rd June 2016



Acknowledgement

Healthwatch Cambridgeshire want to thank the staff and patients at clinic 3 - ophthalmology. You made us feel welcome, and took the time to complete our questionnaire.

We also want to thank the Manager of Outpatient Services, and the Deputy Manager for helping to arrange the visit, and giving us the information we asked for.

This report only relates to:

- what we saw during two 15 Step Challenges carried out on 17th March; and,
- patients' replies to a questionnaire asked between 08:30 - 16:00 on 17th March 2016.

Our report is an account of what was seen and contributed at the time.

When we do an Enter and View visit, we give the organisations' time to reply to us about any issues raised. We include what they tell us in the final report.



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Introduction and methodology

What is Enter and View?

The Health and Social Care Act gives local Healthwatch a statutory power to Enter and View. This is our legal right to visit places that provide publicly funded health or care services, to see and hear how people experience the services.

This gives us the opportunity to:

- collect the opinions and experiences of people using these services, their carers or relatives.
- talk to staff who are providing care.
- to see the nature and quality of services.
- develop insights and recommendations and report to providers, the Care Quality Commission, commissioners and quality assurers, Healthwatch England and any other relevant partners.

Part of our work programme includes carrying out Enter and View visits to local health and social care services. We do these to see and hear how people experience care.

All visits are carried out by our trained authorised representatives.

We can make recommendations or suggest ideas where we see areas for improvement.

Enter and View visits can happen if people tell us there is a problem with a service. Equally they can occur when services have a good reputation, so we can learn about and share examples of what they do well from the perspective of people who use the service.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. If any safeguarding concerns arise during a visit, they are reported in accordance with our safeguarding policies.



What is the 15 Step Challenge?

The “15 Steps Challenge” is a way of assessing care through the eyes of people who use the service. It is intended to be a “fresh pair of eyes” on care.

Each 15 Steps assessment is done by a team of people who visit the clinic at a specific time, and make notes of their first impressions.

The team walk through the clinic environment, stopping to watch patients and staff in the public areas. The team observe what it is like to be there from a patient’s perspective.

Observation guides are used to help structure thoughts, observations and discussions. See Appendix 1 for details.

The results are reported to the clinic team to:

- to help them improve on issues that affect patients’ confidence,
- make changes where they need to, and
- praise what they do well.

Note:

The indicators noted in the Observation Guides are aligned with the Care Quality Commission’s fundamental standards

<https://www.cqc.org.uk/content/fundamental-standards> and to the evidence base on what matters to patients.

http://www.institute.nhs.uk/patient_experience/guide/the_patient_experience_research.html

Purpose of the outpatient clinic visits

We work closely with local health and care providers, welcoming any opportunity to gather people’s opinions and experiences of care, to help improve services.

We know a key challenge for Cambridge University Hospitals (CUH), is managing people’s waiting times for treatment. This was raised as a concern in their recent Care Quality Commission (CQC) inspection.

Our Enter and View visits were organised to help find out about people’s experiences of waiting for their outpatients’ appointments.



We wanted to know:

- about the quality of the information people are getting;
- if they think that their 'waiting experience' could be improved;
- and their first impressions of the clinic on the day.

CUH welcomed our staff and volunteers. They helped us design the questionnaire used as a framework to talk to patients. Our findings will help them test how their systems are working, and show any areas that need improving.

What we did

15 Steps Challenge

Our Authorised Representatives conducted the 15 Steps Challenge independently on arrival at the clinic. The findings were then collated (see Appendix 1).

Questionnaire

Our Authorised Representatives asked patients attending the clinic that day to complete a questionnaire about their experiences (see Appendix 2). We helped people complete the questionnaire if they needed it.

81 patients completed the questionnaire. 20 patients (25%) were new patients, 57 patients (70%) were attending a follow up appointment, one patient (1%) was unsure of the nature of their appointment, and three patients (4%) did not comment.



Summary of findings

What we found out

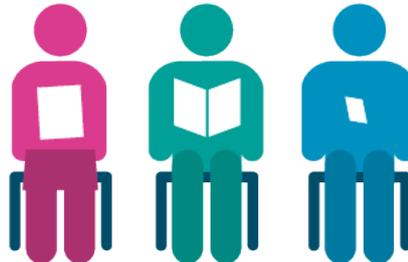
- Waiting times for patients can be very different. Emergency referrals to the clinic were dealt with promptly. We heard from people who had waited up to a year. This included people who had several appointments re-arranged by the clinic.
- Cancellations and re-scheduling of appointments was mostly due to issues at the hospital.
- The length of time on the waiting list may be dependent on which area of ophthalmology a patient is referred to, and to whom.



- The majority of patients (92.5%), found the information they received about their appointment clear and easy to understand.
- Some patients said improved signage to help them find the clinic would help; our 15 Steps Challenge team agreed.
- Patients said to help improve the information they got before their first appointment, they would like to get:
 - a map of the inside of the hospital.
 - information by text or email.
 - an improvement to the answerphone messages patients' receive, so that they are easier to understand.
- Patients wanted better information on how to contact clinic if they wanted or needed to.



WAITING ROOM



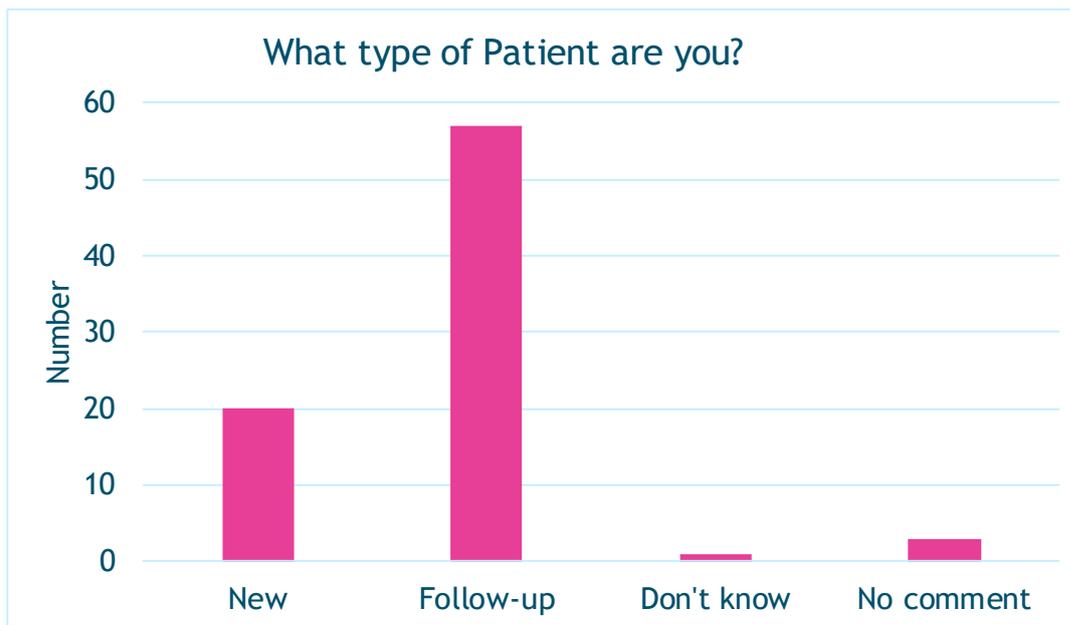
- Patients' first impressions of the clinic were mainly positive, even though it was busy.
- Patients appreciated the clinic being well organised and efficient; they found staff helpful and friendly.
- Patients said that the clinic environment could be improved; our Enter and View 15 Step Challenge team agreed with this.
- Patients wanted to see improved booking in procedures at the clinic's reception.
- We saw staff on the telephone for periods of four to five minutes, with queues forming. The 15 Steps Challenge team noted that telephone calls took priority over waiting patients.
- Patient confidentiality was compromised by the number of people waiting at the reception desk at any one time.



The findings

Analysis of questionnaires

Question - Are you a new patient or a follow up patient?



In the clinics on the 17th March 2016, twenty patients (25%) were newpatients; 57 (70%) were attending a follow up appointment; one patient (1%) was unsure of the nature of their appointment and threepatients (4%) did not comment.

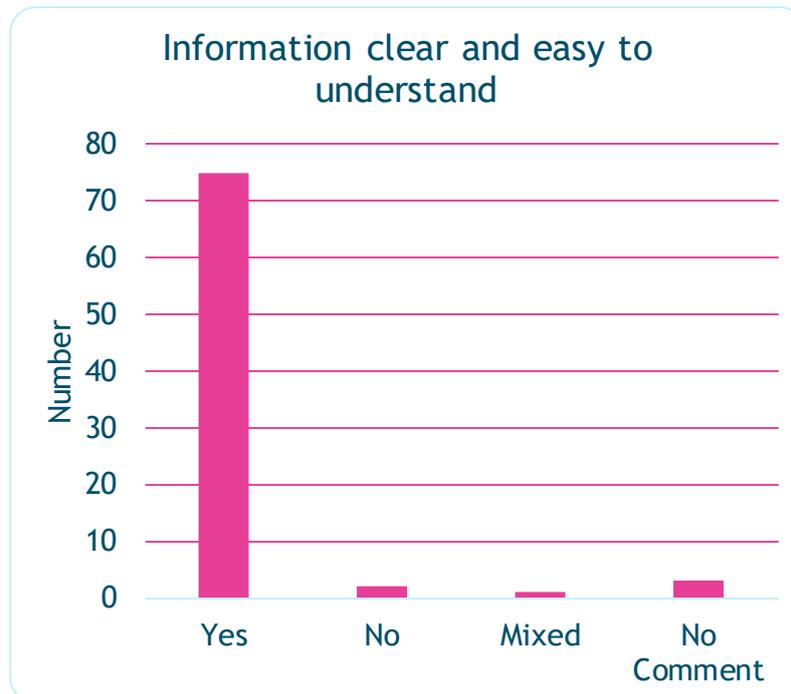
Question - How many weeks did you have to wait for the date of this appointment? (You can approximate this from when you first went to your GP)

- New patients waited between 1 day (emergency referrals) and approximately 12 months for a first appointment.
- Follow up patients had appointments with a waiting time between 1 week and 7 months (the longer time was following a cancellation).
- Some patients had a regular waiting time between appointments e.g. *“regular 6 monthly appointments”*.

Waiting times for appointments seemed to depend on which team within the clinic, and who a person was referred to.



Question - Was all the information you received about your appointment clear and easy to understand?



- 75 patients (92.5%) were happy with the information they received.
- Two patients (2.5%) found the information received unclear and difficult to understand or did not answer.
- One patient (1.3%) found that some information was clear and easy to understand, and some was not.
- Three patients (3.7%) did not comment.

The majority of patients said the information they received about their appointment was clear and easy to understand.



Question - Were you sent clear and easy to understand directions?



- 54 (72%) patients said that the directions they received were clear.
- 11 (15%) patients said that directions were unclear.
- 10 (13%) patients were unsure if the directions they received were clear, or did not comment.

Question - Did you have any problems finding the clinic?

- 69 (85%) patients found the clinic with no problems, although some told us they were a **“regular visitor”**.
- 12 patients (15%) required help to find the clinic. Of these
 - Four patients found the help from volunteers or other staff members.
 - One patient relied on the support of a family member.
 - Four patients said improved signage would help. A staff member at the clinic also felt that signage could be improved.
- One patient suggested an **“Addenbrookes Hospital App. for directions”** would be helpful.
- Some patients had been confused by labelling changes e.g. from **“Eye Clinic”** to **“Clinic 3”**.
- One patient said the signs to clinic 3 were a different colour to other clinics. It caused confusion as they couldn’t immediately see the clinic they wanted.



Question - What was good about the information you received?

- Patients generally said the information was “*clear*” with “*good directions*”.
- Some patients had had appointments made by telephone following a visit to the emergency department. They were impressed with the speed they were informed of their appointment:
“*emergency nurses called back very quickly with an appointment.*”
- Some patients valued telephone confirmation of appointments for example:
“*I had a clear message on my answering machine.*”
“*Confirmed on phone and in writing to make sure you didn’t forget.*”

Question - What could have been improved about the information you were sent?

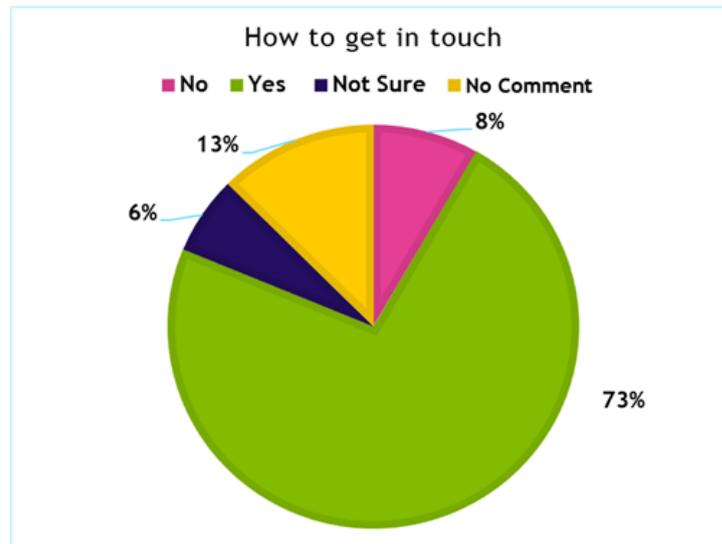
Some suggestions were made by patients, these included:

- A map of the inside of the hospital /site map.
- Better signage.
- Directions for those travelling to the hospital by car.
- Improved booking in procedures.
- Explanation of terms such as “Humphrey Field” so that patients don’t assume it is a name or place.
- Clearer instructions for car parking.

79% of patients felt that the information they received was adequate.



Question - Would it have been helpful to get the information in a different format?



- 26 patients prefer email.
- 11 patients prefer text.
- 1 patient wanted information in a different language.
- 11 patients prefer large print.
- 14 patients were happy with the information as it currently is.

Some patients said they prefer to receive information in a text/email as this stores the information for them.

Question - While you were waiting for this appointment, did you know what to do/ where to ring if you had a query / question / just wanted to talk to someone?

- 50 (61%) patients knew how to make contact with the ophthalmology clinic if they wanted or needed to.
- 14 (18%) were unsure how to contact the ophthalmology clinic if they wanted or needed to.
- 7 patients (9%) did not know how to contact the clinic.
- 10 patients (12%) did not comment.
- 39% of patients in total did not know or were unsure how to contact the Ophthalmology clinic or made no comment.

A high number of people didn't know how to make contact with the clinic, indicating this area needs to be reviewed so information is helpful and accessible to patients.



Question - Do you have any suggestions that would have made your experience on the waiting list better?

Patient suggestions for making their time on the waiting list a better experience included:

- Being given information about waiting times on arrival, especially if the clinic is running late. The 15 Step Challenge team noted that the electronic information screen was not updated when the clinic was busy.
- More efforts to reduce waiting times in clinic.
- More clinics to cope with the high demand.
- Coffee and tea available for those with a long wait.
- A confirmation letter/telephone reminder for follow up appointments.
- Patients *“filling in”* cancelled appointments to reduce waiting times.
- Improve telephone answering service to patients trying to telephone the clinic.
- One central unit for all eye clinics; clinics 14 and 3 confusing for some patients with poor eyesight.
- Opportunity to make subsequent appointments at the time of the current appointment.
- Linking all tests so that multiple appointments are not necessary.



Question - What was your first impression of the clinic today?

Most patients attending the clinic were positive about it, commenting on the quality of care, *“friendly and efficient”* staff, the organisation and cleanliness.

- 28 (37%) patients said that the clinic was busy, some felt that it was *“crowded”*.
- One patient commented on the length of the booking in time. The 15 Step Challenge noted that patients were left queueing while receptionists answered the telephone.
- One patient said they had been waiting a long time in the clinic; others expressed surprise at being seen so quickly.
- One patient said the organisation within the clinic had *“improved greatly in the last year when waiting times were a lot longer.”*
- 16 (21%) patients specifically commented on the friendly, helpful staff for example, *“The male receptionist was fantastic,”* and *“very good eye clinic, well organised, friendly staff, wouldn’t want to go anywhere else.”*
- Some patients felt that the clinic was too hot. One suggested that it *“needs a bit of a decorate.”* The 15 Step Challenge team noted the lack of ventilation and the need for redecoration and refurbishment.

Question - Is there any other information which is not recorded on the form you want to include?

Patients said they would also like the clinic to:

- Improve the answerphone messages so that they are easy to understand.
- Ensure access to the clinic telephone number.

One patient was impressed with the speed they were given an appointment from an emergency department attendance, stating they had had *“excellent service”*.



Summary of 15 Step Challenge

Enter and View Representatives conducting the 15 Step Challenge found that their observations matched patients' opinions.

Positives

- Receptionists were seen to be friendly and polite when talking to patients.
- Corridors were spacious and there were several seating areas.
- Children had a large play area to entertain them; this was enclosed for the children's safety.
- Medical staff were caring and respectful to patients.
- Some staff were informing patients of waiting times.
- A water cooler and water was available.
- When it was quieter in the clinic, the information screens were up to date.
- Information screens were updated following complaints from patients.

Negatives

- Patient registration procedures did not ensure privacy / confidentiality.
- Patients were held in long queues while reception staff answered telephones.
- Seating arrangements were cramped, uncomfortable and worn.
- Posters and notices/signage were cluttered, contained too much information and were out of reach to many patients.
- The patient feedback station was hidden from view between chairs, and difficult to get to.
- Signage for personal comfort was difficult to find, for example toilets.
- The electronic screens were not updated regularly.



Ideas to take forward

Waiting times in clinic

Undertake a review to find out why some people wait a long time in clinic. Waiting times varied depending on which team a person was being cared for by. Can something be learnt from teams with shorter waiting times?

Waiting times for appointments

Look at why some people are having several appointments cancelled, so this can be avoided.

Reception

Look at ways to improve patients' experiences of booking into the clinic.

- How can people's privacy / confidentiality be protected?
- Can reception staff be dedicated to patients' arriving at the clinic reception, as opposed to taking telephone calls?
- Can the electronic information board be updated regularly, so patients know expected waiting times?
- Could there be a dedicated member of staff for telephone queries, not the front desk receptionist?

Impressions of the clinic

Is it possible to update the furniture and furnishings, and reduce the temperature on hot days?

Signage

Review signage to the clinic to make sure it is consistent. Make sure all patients are aware of any changes to signs, e.g. from eye clinic to clinic 3.

Information for contacting the clinic

Look at the appointment information sent to patients, to make sure they know how to make contact with the clinic.

Patient information

Can appointment information be sent by text or email to patients who request it? Appointment information to be provided in large print for those who need it.

Patient opinion

Listen to what patients say will help improve their experience of the clinic.



What the hospital said

Page 7. Ophthalmology is a very busy clinic and therefore sometimes has to rearrange and reschedule appointments based on the clinical priority of the patient's.

Page 8 The trust is currently exploring the possible use of self check in kiosks to improve the booking in process which would also help with improving patient confidentiality..

Page 11 The trust is about to implement a wayfinding app specifically designed for those people with visual impairment to help direct patients to the appropriate location within the hospital.

Page 14 Since the inspection, outpatients introduced a drinks and snack trolley which visits all clinics so patients who have been waiting have the opportunity for beverages.

Page 17 (The hospital will) undertake a review of the chairs and furnishings and replace as necessary if funds available

Page 19 (The hospital will do a) review of the appointment letter to make it clearer which clinic the patient is attending and its location.

The outpatient department itself is quite old in configuration and decoration, and while every effort is made to make patients as comfortable as possible we completely acknowledged that the environment can sometimes be cramped and/or uncomfortable.

The trust is looking at a refurbishment programme to see how we can improve the environment but this is a longer term project both due to the complexities and cost involved.

The trust acknowledges that it has a backlog of patients currently, both in terms of new and follow-up patients, and it is working hard to try and resolve this. Patients are always seen in line with their referral to treatment time and clinical priority, and this sometimes necessitates moving patients around to achieve this. As the backlog is reduced the need to reschedule patients will be significantly less which should lessen the inconvenience caused to patients.

**Andi Thorton,
Outpatients Operations Manager,
Cambridge University Hospital NHS Foundation Trust**



Appendix 1

SUMMARY - 15 Steps: CUH Outpatients

Clinic 3 - Ophthalmology
Date 17 March 2016 - 10:30am

Welcoming:

Positives	Recommendations
<ul style="list-style-type: none">• Very welcoming• Friendly and relaxed but not very busy	

Safe:

Positives	Recommendations
<ul style="list-style-type: none">• Main passages clear• Enclosed play area• Loud talking by reception staff to each other, making it difficult for the visiting patient to know who is being spoken to.	<ul style="list-style-type: none">• Seating area cramped and tricky to get in and out of, especially difficult for people who are visually impaired.• Some chair legs stick out, old and worn with broken arm rests. Replacement seating to ensure safety and comfort.

Caring & involving:

Positives	Recommendations
<ul style="list-style-type: none">• Water machine working and stacked with cups.	<ul style="list-style-type: none">• Signage for snacks/water - prominently placed• Updating patients as to wait times / electronic screens regularly updated. (This was actioned after complaints by patients)



Well organised & calm:

Positives	Recommendations
<ul style="list-style-type: none">• Calm and organised• Updated electronic screens• Reception staff helpful	<ul style="list-style-type: none">• Electronic screens?<ul style="list-style-type: none">- Are they useful?- Are they up to date? Staff have to be told by medical staff waiting times! Communication???? <ul style="list-style-type: none">• Signage for the Toilets - not visible to Patients and they have to ask the Reception staff

Other:

Positives	Recommendations
	<ul style="list-style-type: none">• There is confusion by the patient as to which 'eye clinic' they are visiting - for example 3 or 14, patients unsure and have to ask reception staff who are also unsure (14 being opposite the bus station)• Clearer instructions needed on appointment information



SUMMARY - 15 Steps: CUH Outpatients

Clinic 3 - Ophthalmology

Date 17 March 2016 - 14.30 pm

Welcoming:

Positives / Negatives	Recommendations
<ul style="list-style-type: none">• Reception - talking on the telephone and queue forming - no eye contact and patients beginning to crowd around the desk (busy times)• No sense of privacy• Friendly to some patients and greeting with a smile• Large children's play area	<ul style="list-style-type: none">• At busy times - decide answer phones or handle patients' arrival and booking-in.

Safe:

Positives / Negatives	Recommendations
<ul style="list-style-type: none">• Spacious corridors• Several seating areas	<ul style="list-style-type: none">• Chairs - some - falling in bits / torn, broken / loose arms - scruffy• Lack of space between rows - over crowded - there is enough room to re-design chair layout...check out the seating plan in Clinic 10• Patient confidentiality - or lack of? How to improve patient check-in?



Caring & involving:

Positives / Negatives	Recommendations
<ul style="list-style-type: none"> • Feedback terminal for Patients • Watercooler and cups • Medical staff caring and respectful to patients • Stuffy, warm and lack of ventilation 	<ul style="list-style-type: none"> • Feedback terminal, hard to see / notice; make more accessible for patient use • Hand gel? To be used or not decide with appropriate signage

Well organised & calm:

Positives / Negatives	Recommendations
<ul style="list-style-type: none"> • Electronic screen does not update frequently - manual process • Staff chatting with patients and telling them wait times • Queues manic at times 	<ul style="list-style-type: none"> • Electronic screens? <ul style="list-style-type: none"> - Are they useful? - Are they up to date? Staff have to be told waiting times by medical staff. Communication? • Signage for the toilets - not visible to patients and they have to ask the reception staff

Other:

Positives / Negatives	Recommendations
<ul style="list-style-type: none"> • Small signage in main entrance to the clinic - have to assume to go up the stairs • Posters - information not inviting to read 	<ul style="list-style-type: none"> • Look at signage in main entrance - clarify how to reach the clinic? • Support posters, Chaplaincy, information - decide what is important - easy to read and access <ul style="list-style-type: none"> ○ Collate into subject areas ○ Make large the '4-hour' poster for patients to know and understand • The clinic looks tired - decoration need refreshing • Staff very busy on the phones and no time for queueing patients - at busy times



Appendix 2

HEALTHWATCH CAMBRIDGESHIRE ARE CARRYING OUT A SURVEY ABOUT WAITING FOR AN OUT-PATIENT APPOINTMENT TO HELP MAKE SURE YOU GET THE BEST POSSIBLE SERVICE.

Questionnaire

1. **How long did you have to wait for the date of this appointment?**
(You can approximate this from when you first went to your GP)
_____ weeks / don't know
2. **Was all the information you received about your appointment clear and easy to understand?** Yes / Mixed / No
3. **Are you:**
A new patient A follow-up patient Don't know
4. **What was your first impression of the clinic today?**
5. **Did you have any problems finding the clinic?**
6. **Were you sent clear and easy to understand directions?**
Yes / No / Not sure
7. **What was good about the information you received?**
8. **What could have been improved about the information you were sent?**
9. **Would it have been helpful to get the information in a different format?**
Large print Different language Text Email
10. **While you were waiting for this appointment, did you know what to do / where to ring if you had a query /question / just wanted to talk with someone?** Yes / No / Not sure
11. **Do you have any suggestions that would have made your experience on the waiting list better?**



Contact Us

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