

Enter and View Report

New Cross Eye Infirmary
Unannounced Visit
24th July 2018



healthwatch
Wolverhampton

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What is Enter and View

Part of Healthwatch Wolverhampton's remit is to carry out Enter and View visits. Healthwatch Wolverhampton Authorised Representatives will carry out these visits to Health and Social Care premises to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allows Authorised Representatives to observe service delivery and talk to service users, their families and carers on premises such as Hospitals, Residential / Nursing Homes, GP Practices, Dental Surgeries, Optometrist and Pharmacies. Enter and View visits can occur 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 good practice from the perspective of people who experience the service first hand.

Healthwatch Wolverhampton's Enter and View visits are not intended to specifically identify Safeguarding issues. However, if Safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Wolverhampton's Safeguarding Policy, the service Manager will be informed, and the visit will end. The local Authority Safeguarding Team will also be informed.

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Provider details

Address: Wolverhampton Road, Wolverhampton, WV10 0QP

Contact: Laura Morris, Head of Business Intelligence

Acknowledgments

Healthwatch Wolverhampton would like to thank the management, staff and all the patients and relatives for their co-operation during our visit.

Disclaimer

This report is related to findings and observations made during our visit that took place on Tuesday 24th July 2018 at 10:00-12:00. The report does not claim to represent the views of all service users, only those who contributed during the visit.

Authorised Representatives

Ashley Lovell, Lead Authorised Representative
Rose Urkovskis, Authorised Representative

Who we share the report with

This report and its findings will be shared with New Cross Eye Infirmary, Wolverhampton City Council, Councillors, Wolverhampton Clinical Commissioning Group (CCG) and the Care Quality Commission (CQC). The report will also be published on the Healthwatch Wolverhampton website.

Healthwatch Wolverhampton details

Address:

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Healthwatch principles

Healthwatch Wolverhampton's Enter and View programme is linked to the eight principles of Healthwatch, and questions are asked around each one.

1. **A healthy environment:** Right to live in an environment that promotes positive health and wellbeing
2. **Essential Services:** Right to a set of preventative, treatment and care services provided to a high standard to prevent patients reaching crisis
3. **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
4. **A safe, dignified and quality services:** Right to high quality, safe, confidential services that treat me with dignity, compassion and respect
5. **Information and education:** Right to clear and accurate information that I can use to make decisions about Health and Social 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
6. **Choice:** Right to choose from a range of high-quality services, products and providers within Health and Social Care
7. **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
8. **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

Purpose of the visit

There are a number of factors which resulted in a Enter and View visit taking place at New Cross eye Infirmary, including:

- Feedback received from a patient who has used the service for some time, highlighting communication and appointments as areas they have had difficulties with



New Cross Hospital Eye Infirmary

What we did

Upon arrival to the Eye Infirmary, the Authorised Representatives made themselves known to the Sister who introduced the representatives to the manager and her colleagues, following a wait for approximately 45 minutes while staff verified who the representatives were, a tour of the building and the various department and specialisms was given.

Findings:

Environment

The building and its interiors were well maintained with wide corridors, clean floors and plenty of light. It was noticed that there was plenty of hand sanitisers which were in working order. There was plenty of information around the building about its lay out, your location in relation to the building, how to make complaints and Patient Advice and Liaison Service, (PALS), as well as various health related posters and flyers. It was noticed that there was plenty of clear signage most of which was black text on a yellow background which would be excellent for patients to see. One area of the Eye infirmary had information about the team members and their roles with photographs. It was not noticed if there is any information available to help patients distinguish staff based on the colour of their uniforms.

It was observed by Authorised Representatives that patients were being taken through corridors on beds, but that when the bed came to a set of double doors it was awkward for the porter to both turn the bed and move it as well as open the doors.

While there was seating in the corridors on the first floor this was done in such a way that it did not block the corridors or make it difficult to get around when there were people waiting to be seen.

All areas of eye care are in the one building from eye tests, to theatre to an emergency department allowing patients to easily move to various teams depending on the reason for their visit and if the staff feel that the patient needs more tests. There are different colour seating areas around the building for different departments. However, there was no information noticed in the building that explained the colours for patients. It was not noticed if this is something that is explained to patients when they are told to go to another area for further tests or treatment.

Consulting rooms are large with a welcoming and calming colour scheme of white and blue. The same is true in the children's area which also uses images to help keep children's attention on the tests and make it easier by asking children to look at the dinosaur and then the lion rather than referring to the equipment itself. The children's waiting area was also decorated with a range of cartoons and other images to make the area more child friendly.

Patient Experience

Authorised representatives spoke with a number of patients and a relative during the visit.

The patients that we spoke to reported that they felt that their needs were being met in regard to the level of care and treatment they received. They also felt that the staff were incredibly helpful with one patient telling representatives that “the staff always go the extra mile” and another said that the staff “go out of their way to give me the support I need”

All patients that took part in our visit felt that they were able to ask any questions if they didn't understand something or if they had any concerns and that the staff listened to them. One patient told us that they felt the explanations to their questions were very good.

Patients were specifically asked about the communication and information they receive from the Eye Infirmary and all patients explained that they thought the communication was good. They said that they had never had any problems being notified of appointments or receiving any other information in regard to their treatment and care. Patients reported that they got the information in a timely manner and that they didn't have any problems with the appointment system.

This was backed up by the experience of a relative who also felt that their parents had received “amazing care and treatment” from the staff and that there had never been any issues accessing appointments or with the communication of these appointments. They also explained that if for whatever reason someone cancelled their appointment, the Eye Infirmary would offer that appointment out, and in fact that was the reason they were there during the visit as the original appointment was due some weeks after.

The patients and relatives that we engaged with spoke very highly of the staff at the Eye Infirmary and no one raised any issues or concerns about the clinical care, administrative support or waiting times.

Authorised Representatives asked how the department gathers views and experiences from patients and it was explained that there are patient forms and that surveys are undertaken to gather patient feedback. This feedback is then shared at governance meetings and at regular audit meetings which all staff are encouraged to attend. The patient forums have a dual purpose to share education information as well as any updates to patients as well as gathering feedback. The staff audit meetings also have a dual purpose as there are special education and information sessions followed by discussions about the patient feedback.

Staff Experience

The Authorised Representatives spoke to a number of staff, including those who dealt with appointments and the discussion focused on the appointment system and communication of appointments.

Staff acknowledged that on occasion miscommunication can occur, but that this is usually due to an unexpected cancellation of a clinic because of sickness or another unexpected event. It was observed that staff keep detailed records of when patients are due for treatment and how often these appointments occur for each patient. Not only are appointments on a diary system but the staff also kept a paper copy which is checked to ensure that appointments have been booked and that the patient has been informed.

It was observed that the staff that handle the appointments take their roles very seriously as one member of staff mentioned “if an appointment is missed it could cost someone their vision, so we make sure that everyone’s appointments happen when they are supposed to.”

While the setting of appointments and letters are handled by the staff at the Eye Infirmary, the letters are sent to an external contractor, Synotech who print and send them to patients. It was explained that a miscommunication due to an issue with the address should not occur as Synotech check to see if the address is correct. If it is not the letter does not get sent out to the patient and the team at New Cross are informed so that they can address the issue. The system also prioritise letters based on the appointment date, those whose appointments are within the next 2 weeks are sent first class while others are sent second class.

Patients are told when at the Eye Infirmary that they should receive a letter with in a given time frame, and that if the patient does not hear from them to give them a call.

When someone cancels their appointment, staff call other patients to offer them the appointment however they mentioned that sometimes they can “call over 40 people before someone takes the earlier appointment”.

All the support staff that we spoke to highlighted that the big issue that they have is capacity, and that they have fed back to the Trust on a number of occasions, that more clinics are needed to deal with demand. It is understood that a business case is being prepared to request the additional clinics.

There is an Eye Clinic Liaison Officer on site to assist patients with issues around benefits and other support during and following their treatment.

Authorised Representatives were told that the Eye Infirmary usually receives referrals from GPs and opticians, and that these patients go directly to the Eye Infirmary. However, patients go via the Emergency Department.

Authorised Representatives were also told that staff are working closely with and holding training sessions with opticians and patients to help them better understand

some conditions which they may come across but are generally unusual for optician to come across. This aims to better improve referrals and a paper will soon be published along with results to demonstrate if this scheme has been a success.

It is also understood that the department is at the forefront of research, with 2 professors and dedicated research nurses. Patients are also asked if they would like to take part in clinical trials.

Recommendations

1. Investigate the use of visuals which help to distinguish staff and their roles by the colour of their uniform, and ensure that these are placed throughout the building
2. Information should be made available which explains the various colours for different seating areas as it is not clear to visitors what each colour means
3. Investigate ways to ensure that porters are not struggling to manoeuvre beds through sets of double doors, such as having two porters to a bed would ease patients journey through the building
4. Investigate more effective methods of gathering patient feedback while ensuring that there is feedback going back to patients such as a “You Said We Did” system to ensure that communication is two way
5. Investigate a reminder system to ensure patients receive their appointment notifications and to remind them about their appointments
6. Royal Wolverhampton Trust to investigate the possibility of investment in additional clinics to help meet public demand

Questions

1. Clarification is needed regarding how patients are being signposted from the Emergency Department

Provider feedback

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