



Mystery shop exercise completed at Chesterfield Royal Hospital



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1. Thank you

Healthwatch Derbyshire (HWD) would like to thank the staff at Chesterfield Royal Hospital who were instrumental in setting up this mystery shop exercise.

HWD would also like to express thanks to our volunteers who offered support in collecting the data for this report.

2. Disclaimer

The comments outlined in this report should be taken in the context that they are not representative of the experiences of all patients accessing the Chesterfield Royal Hospital, but nevertheless offer a useful insight. They are the genuine thoughts, feelings and issues that Healthwatch volunteers observed and experienced at the time of the visit. The data should be used in conjunction with, and to compliment, other sources of data that are available.

3. About us

HWD is an independent voice for the people of Derbyshire. We are here to listen to the experiences of Derbyshire residents and give them a stronger say in influencing how local health and social care services are provided.

We listen to what people have to say about their experiences of using health and social care services and feed this information through to those responsible for providing the services. We also ensure services are held to account for how they use this feedback to influence the way services are designed and run.

HWD was set up in April 2013 as a result of the Health and Social Care Act 2012, and is part of a network of local Healthwatch organisations covering every local authority across England. The Healthwatch network is supported in its work by Healthwatch England who build a national picture of the issues that matter most to health and social care users and will ensure that this evidence is used to influence those who plan and run services at a national level.

4. Understanding the issue

This mystery shop was conducted as a result of public and patient feedback collected by both HWD and Chesterfield Royal Hospital (CRH).

It was hoped the exercise would offer feedback into the hospitals appointment letters and offer insight as to the patient experience of attending the hospital for an outpatient appointment.

5. What we did in brief

In partnership with CRH, HWD volunteers tested the journey a patient would follow when being invited to the hospital for an outpatient appointment. This involved presenting themselves as patients at various outpatients departments.

Volunteers then commented on their experiences from receiving the patient letter inviting them to the outpatient appointment at the hospital, to travelling to the hospital for that

appointment and navigating the hospital site in order to find the correct department. They also commented on their experiences of the outpatient clinics.

6. Key findings

6.1 Appointment letter

Generally, the letter was well received by volunteers. They found this easy to understand and to the point.

The volunteers commented that they found the letter to be clear and easy to read with good use of typeface and bold print for more significant information.

The appointment letters for the eye clinic gave an idea of how long the appointment was likely to take and what they needed to bring with them. Volunteers found this useful.

The appointment letters for the eye clinic also included a simple bold sketch showing the clinic and nearest car park, which was appreciated by the volunteers.

One appointment letter was for an outpatient's clinic based in the hospital's McMillan Unit. This appointment letter gave clear notification as to why the unit is so named and that it is used by all patients including those without a diagnosis of cancer. This was welcomed by the volunteer concerned.

However, volunteers asked if the appointment letters are available in other formats i.e. easy read, large print, different languages.

For the eye clinic volunteers suggested the letter would be better in large print, in black print on yellow paper.

6.2 Internet research

Most volunteers used the internet prior to their 'appointment' to look for information about directions to the hospital, public transport and a site map. Our feedback to the hospital was that people found this information to be very useful.

However, the volunteers felt that those visitors unable to access the internet may be at a disadvantage in not being able to access this information.

Volunteers asked whether more information could have been included with the appointment letter including a location and site map, public transport details and details of wheelchair collection points and the pre-bookable scooter scheme.

6.3 Travel to the hospital

Most volunteers found the hospital easy to find with plenty of signs en-route with the entrance to the hospital being clearly marked.

However, one volunteer travelling from a Bolsover/Staveley direction commented about the lack of signs for the hospital from that direction.

6.4 Parking and drop-off areas

Volunteers liked the illuminated sign displaying how many vacant spaces there were in each car park and the car park location map at entrance to the hospital.

However, volunteers noted that car park 7 was not signposted on the signs at the main entrance.

Also, some volunteers found that they had to queue for parking. Volunteers felt that this could lead to congestion around the hospital site and may impede emergency vehicles. This being said, nobody queued for more than 15 minutes.

Volunteers commented on the lack of adequate drop-off points for patients with mobility difficulties. Some of the drop-off areas were occupied by unattended vehicles who were observed to have been there for over the ten minutes.

6.5 Car park charges

Volunteers found the payment machines to be easy to use and tariffs were displayed at each of the machines seen. The machine also “spoke” making it easier to use and machines were sheltered from the elements.

Volunteers also saw large banners that explained about the availability of a multi-visit discount car park pass. The availability of these was also displayed with the charges at the payment machines and was welcomed for use by frequent visitors.

6.6 Experience in main reception

Volunteers encountering reception staff and volunteers found them to be helpful and friendly.

The availability of the self-service machines allowed for swifter booking in times.

One volunteer commented that staff had noticed her walking stick at reception and asked her if she would like the ‘Royal Rider’ to take her to the clinic. She described the staff member as being very helpful and found the volunteers operating the Royal Rider to be “lovely, friendly and well-trained volunteers.”

6.7 Navigation to clinics

Volunteers positively commented that they liked the large aerial photograph site maps located in each car park which were described by one as, “a great navigational tool”.

Volunteers found that members of staff asked to help people with directions when they appeared to be ‘lost’. Staff assisting were friendly and very helpful.

However, some volunteers commented on the lack of resting areas on the way to the clinics.

Additionally, all signage is positioned at a high level and may not be visible to people using wheelchairs.

6.8 Outpatient clinics

Volunteers were asked to visit a number of different clinics and their experiences varied from clinic to clinic.

Those volunteers that had a positive experience described the clinics as being calm, welcoming and efficient. Volunteers welcomed the waiting areas that offered a well-lit, spacious environment that had comfortable, well-spaced seating including ample space for wheelchair users and buggies.

Volunteers gave more positive feedback when they experienced good communication, which was particularly apparent when there were delays to the clinic timings.

Overall, most volunteers appeared to find the attendance at clinics a good experience with staff generally being praised.

However, volunteers described some waiting areas as being restricted in space with wheelchair space being limited.

One clinic was described as reaching capacity and a couple of older patients, who were sat near to a sensor that operated a sliding door, complained of a draught despite the warm air blower located above the door. Some of these patients had been wheeled in by porters who had left the patients near to the doors, and the patients concerned were then unable to move themselves to a more comfortable place.

Another volunteer described the clinic as being tight on space and, as it was quiet, they were able to hear staff talking to patients in a nearby consulting room.

Volunteers liked being informed of any delays to the clinic. However, in one clinic signs were displayed on the consulting room's doors saying that the clinic was running on time when it was in fact running 50 minutes late.

Finally, one volunteer expressed difficulties in hearing when they were being called for their appointment. Indeed, in some areas the seating faced the same way and all communication came from behind. It was noted that a person with a hearing impairment might struggle in this environment.

6.9 Additional issues

Volunteers also positively comments that:-

- There was plenty of artwork throughout the hospital. One was giving a history of the hospital and prompted conversation. Artwork displayed in the reception depicted places near to Chesterfield and were good to look at
- Reception was described as bright with lots of natural light. One volunteer commented, "It does not feel like a hospital at all!"
- The LGBT rainbow was advertised on one wall and one member of staff was seen wearing rainbow lanyard which was seen as welcoming and inclusive
- A winter health check day was observed in reception for staff members whereby staff were seen having their blood pressure checked and being offered massages.

These days are apparently held quarterly and staff that were asked seemed to very much welcome these.

7. What should happen now?

From our findings, we have identified several recommendations and actions going forward:

7.1	Appointment letters
7.1.1	The inclusion of a location map, site map, public transport details, transport costs, information about the pre-bookable scheme and details of where wheelchairs could be found could be useful. If these cannot be sent, patients should be given the opportunity to telephone and request this information.
7.1.2	The eye clinic letter included a site map. This would have been useful for other clinics too.
7.1.3	The letter could be improved to include clinic specific information i.e. suggested car park to use, nearest drop-off points, Royal Rider information and whether a patient can be accompanied etc.
7.1.4	Appointment letters should be made available in other formats i.e. easy read, large print, different languages. These should be advertised as being available on request.
7.2	Internet research
7.2.1	The appointment letter should include the hospital's website details for patients to access the above mentioned information there if they so choose..
7.3	Travel to Chesterfield Royal Hospital
7.3.1	Consider the possible introduction of signage for the hospital from the Bolsover/ Staveley direction.
7.4	Car parking
7.3.1	Consider a review of signage and inclusion of car park 7 on signs at the entrance.
7.4	Car parking and patient drop-off areas
7.4.1	Consider a review of available drop-off points and possible creation of more zones and introduce monitoring of correct usage.
7.5	Car park charges - no recommendations
7.6	Experience in main reception
7.6.1	Volunteers and reception staff should be congratulated for being friendly and helpful and creating a positive experience for the volunteers.
7.7	Navigation to clinics
7.7.1	Consider the introduction of more resting areas for patients walking to the various clinics.
7.7.2	Consider a review of signage and possible repositioning to aid readability for wheelchair users.

7.8	Outpatient clinics
7.8.1	Action should be taken to avoid breaches of privacy and confidentiality due to waiting patients being seated too close to consultation rooms. Seating should be relocated or additional sound proofing installed.
7.8.2	Consider reviews of the waiting areas to ensure there is adequate space for wheelchairs in a comfortable environment.
7.8.3	Consider the training of hospital porters to address inappropriate positioning of patients within clinic settings.
7.8.4	Take action to create a better environment for those with a hearing impairment.
7.8.5	Consider improvements to ensure that clinics have a system whereby clinic delays are displayed and updated.
7.9	Addition issue
7.9.1	The use of the LGBT rainbow should be extended to more areas within the hospital.

8. Response from service provider

8.1	Appointment letters
8.1	<p><i>The hospital is in a process of reviewing their existing appointment letters. The suggested rewording and possible inclusion of additional information will be considered by the Trust. There is a possibility that HWD volunteers could be used in providing further feedback on these amended letters along the established Trust partner's reader panel.</i></p> <p><i>Letters will be made available in other formats and advertised more widely as being available on request.</i></p> <p><i>The hospital is also looking into the possibility of providing patients with alternative electronic communications such as e-mail and Patient Portals i.e. via web based software.</i></p>
8.2	Internet research
8.2.1	<i>The hospital will include this within the review of their existing appointment letters and in future plans for electronic correspondence.</i>
8.3	Travel to Chesterfield Royal Hospital
8.3.1	<i>The hospital will review the signage from Bolsover and work with our partners to improve it.</i>
8.4	Car parking and patient drop-off areas
8.4.1	<i>Several areas have already been enhanced across the Trust as part of building projects e.g. outside the NGS Macmillan and the emergency department. We will recommend a review of the drop-off areas across the site to include the positioning and number of spaces as a part of the site strategy.</i>

8.4	Patient drop-off areas
8.4.1	<i>The monitoring of the drop-off points will be discussed as a part of the above review.</i>
8.5	Car park charges - no recommendations
8.6	Experience in main reception.
8.6.1	<i>This praise has already been fed-back to the volunteers and receptionists via their managers.</i>
8.7	Navigation to clinics
8.7.1	<i>The hospital is in the process of developing patient rest stops to support those walking from area to area. These rest stops will have a distinctive character and provide a place to rest and way finding information. The buggy service currently stops to ask people if they 'look like they may like a lift', however moving forwards they will <u>also</u> always ask anyone at the rest stops</i>
8.7.2	<i>The hospital acknowledges that the signage and wayfaring across the Trust requires development. Part of this is being fulfilled with the new oversized welcome signs being placed outside the out-patient suites. The overall strategy for way finding is being reviewed as a part of the out-patient improvement plan.</i>
8.8	Outpatient clinics
8.8.1	<i>The hospital porters will receive feedback and updated training regarding the placement of patients in wheelchairs in the clinical environment.</i>
8.8.2	<i>Currently the hospital is in a process of reviewing all of the outpatient reception areas. This includes the appropriate space and location for those using wheelchairs etc. Several areas have already been improved e.g. Suite 3, and Suites 5, Suites 1 and 8 are due to be refreshed this year. We will continue to feed these messages into subsequent plans.</i>
8.8.3	<i>The clinical staff will be made aware of the potential issues around voices carrying outside of the clinical rooms and will be asked to be mindful of this. Current and future building works will take this into account. Hospital porters will also receive feedback and updated training regarding the placement of patients in wheelchairs in the clinical environment included in point 8.8.1.</i>
8.8.4	<i>With the 'refresh' of the outpatient suite reception areas (see point above) the seating will be placed to ensure those waiting can see those calling them.</i>
8.8.5	<i>The clinic staff have been reminded to update their waiting time signage and this will be audited. There is a planned trial of a TV displaying waiting times alongside other information in the NGS Macmillan Centre and once successful we will roll out to other areas.</i>
8.9	Addition issues
8.9.1	<i>The LGBT rainbow has been discussed within the Trust and is accepted as a great way to communicate that a person has enhanced understanding/training regarding diversity issues. There is a plan to use this as a wider marker for those who have gone through our specific training.</i>

9. Your feedback

Healthwatch Derbyshire is keen to find out how useful this report has been to you, and/or your organisation, in further developing your service. Please provide feedback as below, or via email.

1) I/we found this report to be: Useful

2) Why do you think this?

The findings of this report have helped us to understand the patient perspective with regards to care and treatment in our outpatient services. Furthermore, findings have reflected projects already being undertaken as part of the Trust's outpatient improvement programme, reinforcing the need for this work. In addition, the report has helped us to identify a potential solution in supporting our LGBT+ patients, which has been supported by the Trust's Be Yourself - Equality Diversity & Inclusion Group.

3) Since reading this report:

a) We have already made the following changes:

- a. Education to staff around the placement of patients in wheelchairs
- b. Feedback the praise to reception and volunteers
- c. Discussed the report finding and recommendations with the managers for each area involved
- d. Used the comments to help find a solution to support our LGBT+ patients.

b) We will be making the following changes:

- a. We have passed the recommendations to existing working groups to ensure future refurbishments, communications and projects are mindful of the observations
- b. Adding e-information and links to letters so patients can access more information as required
- c. An audit will be undertaken and repeated until the waiting times displayed are updated regularly
- d. The signage and way-finding will be reviewed as part of overall site strategy.

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