

Details of visit	Medical Outpatients
Service address:	Royal Hallamshire Hospital
Service Provider:	Sheffield Teaching Hospitals NHS Foundation Trust
Date and Time:	Tuesday 27 September 2016, 2.00 pm – 4.00 pm.
Authorised Representatives:	Carrie McKenzie, Wendy Eyre
Contact details:	Healthwatch Sheffield, The Circle, 33 Rockingham Lane, Sheffield S1 4FW

Acknowledgements

Healthwatch Sheffield would like to thank the management and staff of Medical Outpatients for facilitating this visit and thanks also to the patients who took time to talk to us on the day and for sharing their experiences.

Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

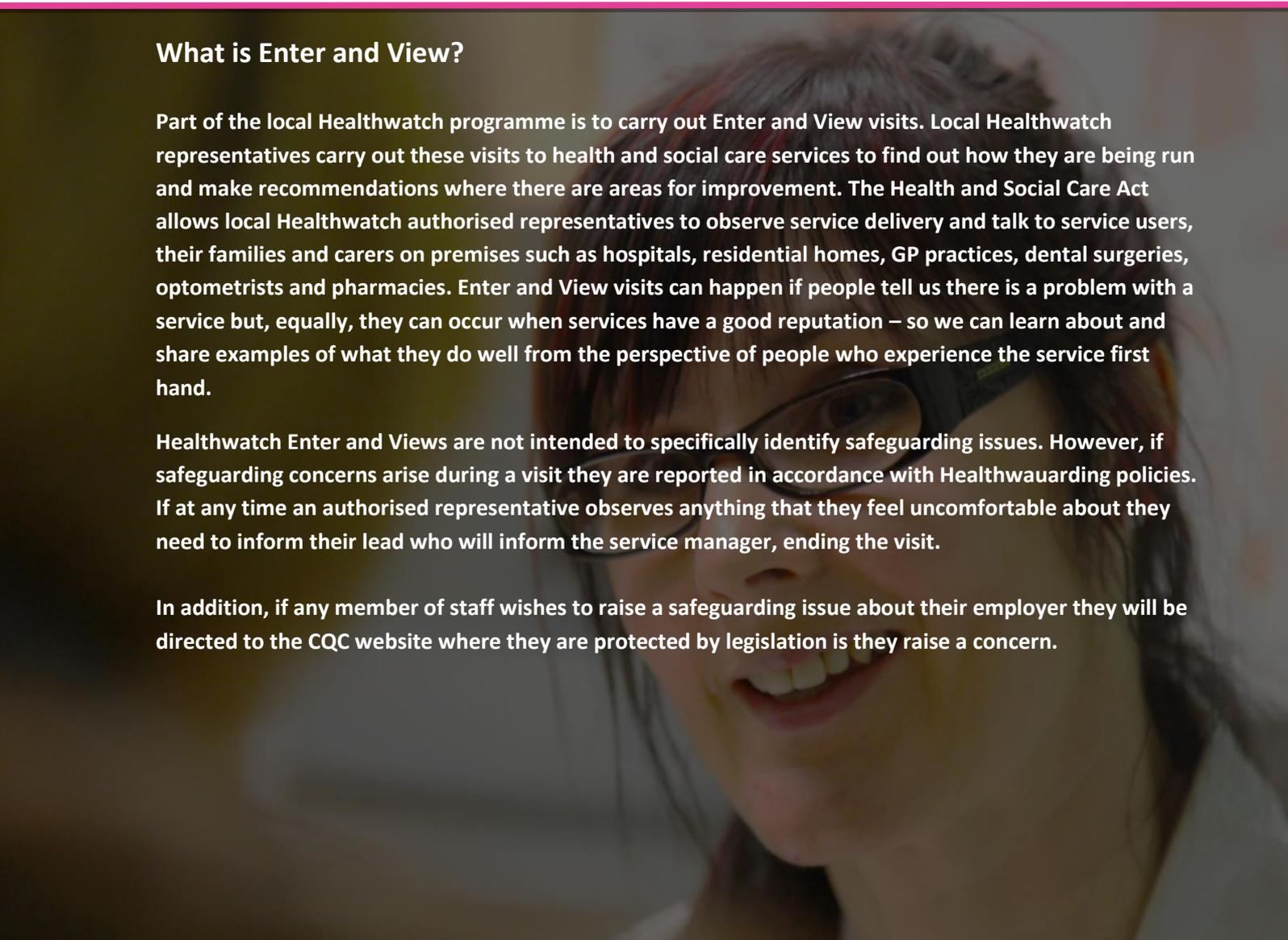


What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation – so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwauarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC website where they are protected by legislation is they raise a concern.





Purpose of the visit

- To gather information to inform us about how the service is viewed by patients and relatives, with special reference to those with particular needs.
 - To identify examples of good working practice.
 - To observe the environment and processes in the service area.
 - To identify any areas for improvement and make suggestions if appropriate.
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Strategic drivers

- Healthwatch Sheffield focus on access for excluded groups
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Methodology

This was an announced Enter and View visit.

This visit was arranged via the senior management team. Access was given to the reception area and all waiting areas. The visit was advertised in advance with Healthwatch flyers being placed in the displayed in public areas within the department.

We spoke to seven patients in the reception area and seven people completed general Healthwatch Sheffield feedback forms about the department in the main waiting area.

We also spoke to 5 people in the ambulance waiting area.

Summary of findings

- **Some patients were happy with the service in general, whilst others were unhappy about issues relating to waiting times in the department**
 - **There are high levels of staff continuity and retention which enables good continuity of care for patients who attend regularly.**
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Results of Visit

Access and the Physical Environment

The Physical Environment

There is a large non-emergency ambulance waiting area which is situated next to the Medical Outpatients Department. This is the main waiting area for people waiting for patient transport at the Royal Hallamshire Hospital site.

There are several waiting rooms in the department and a long corridor lined with chairs provides further seating for patients to use while they wait.

Access

The Medical Outpatients Department can be accessed directly via a set of automatic doors at the entrance dedicated to the department (Entrance 3) which is situated to the left of the main Outpatient Department entrance on A Road at the Royal Hallamshire Hospital. There is a zebra-crossing just outside Entrance 3.

Medical Outpatients Clinics can also be accessed via the main entrance on A Road, and then turning left through double doors which have the Medical Outpatients sign above them. We entered the department via the main entrance to the hospital on A Road. On arrival into the building we noticed a significant number of people waiting in wheelchairs in the foyer. This is the Ambulance Waiting Area which is used by some of the patients attending clinics at the Medical Outpatients Department when they are waiting for patient transport to take them home.

The ambulance waiting area felt very chaotic with 17 out of 18 patients waiting for ambulances at the time of our visit. It was explained that people generally wait 1.5 hours to 2 hours for a single person ambulance or 3 hours to 3.5 hours for two person crewed ambulances.

Service Provision

About the Clinics

There are a number of different clinics held on different days. Clinic opening times are 08:00 -18:00. However, we were informed that the Haematology Clinic sometimes runs over.

Clinics held within the Medical Outpatients Department are:

- Haematology
- Endocrinology
- Diabetes
- Foot Clinic

Cardiology
Gastroenterology
Hepatology
Neurology
Care of the elderly
Palliative care

Services processes and procedures

On arrival into the department, we observed that patients usually went to the front desk with their appointment letter. Reception retrieved their medical notes; patients were then called to be weighed and their height taken if required in one of two separate observation rooms which are situated next to the main waiting area by the reception desk. To ensure privacy, doors to the observation rooms were closed whilst patients were weighed and measured.

All patients are asked to wait in the correct waiting area for their clinic until their name is called by a member of staff who collects them and takes them to the relevant room for their clinic appointment.

Staffing levels

Many of the staff work 2 days per week and there is 1 full-time Matron, who covers cross-city outpatient department. There is a high level of staff continuity and retention and no use of Bank staff. A positive aspect is that staff members get to know the patients who attend regularly. Whilst staff retention is good, there is concern that many staff members are nearing retirement.

Feedback on services (What people told us)

We spoke to seven patients in the waiting area next to the Reception. Overall, patients said that staff were friendly and everything was sufficient. Some patients were happy with the service, for example a patient told us that their “experience on the whole is very good - excellent”. Some were less satisfied with their experience, particularly in respect to waiting. One patient commented that “Waiting in the corridor does not help the experience”. Additionally, three people specifically mentioned the long waiting times, one patient commented that “waiting time could be improved, always running late; had 2 previous appointments cancelled”. Seven patients in the waiting area said that they had not been told what would happen at the clinic they were attending.

Staff raised concerns regarding patients waiting for patient transport beyond 6pm. They informed us that delays in transport arriving to take patients home can lead to staff from the Medical Outpatients Department finishing their shift late as they can't go home until the last patient has been collected.

Ambulance Waiting Area

We also spoke to five people who were waiting for ambulances in the ambulance waiting area. They provided the following comments on waiting:

- One patient had been waiting 3 hours - they visit the hospital regularly and were visiting again 2 days later. They needed a 2-person ambulance so often had to wait 2 - 3 hours to be picked up
- A patient reported using the patient transport service two days per week as they needed to be carried up and downstairs from their flat
- Some patients felt that more double-handed ambulances were required.
- 3 people said they would like cushions for wheelchairs
- Some patients said they would like a TV as well as tea and coffee refreshments to be available in the actual ambulance waiting area.

Facilities

Staff can make people drinks if requested whilst they are waiting in the Medical Outpatients Department waiting areas. There is a trolley with hot refreshments, and a water cooler, that patients can use to get a drink. Sandwiches are offered to patients visiting the diabetic clinic.

There is a cafe next to the ambulance waiting area, just inside the main outpatients entrance which is run by the Royal Voluntary Service (RVS).

There are three waiting areas in the department with a TV to help people pass the time.

In the ambulance waiting area we observed that books were provided at the desk for waiting patients, but many people would not be able to go and get them as they were in the wheelchairs, and therefore required assistance.

Immediate Service Improvements

None

Additional Findings

- One observation which caused us concern was that Oncology patients are kept in the same waiting areas as other patients, which doesn't offer any protection from picking up infections from other patients
- There is no discharge lounge for patients to wait in at the Royal Hallamshire Hospital but there is one at the Northern General Hospital. This may add to the crowded environment in the ambulance waiting area.

Recommendations

- Consider a Meet and Greet Volunteer role in the department and the ambulance waiting area to support people waiting a long time. The volunteers could assist patients with getting refreshments, accessing the books provided, and alerting a member of staff if they require a toilet break and need assistance
- Inform patients verbally about what attending the clinic will involve for them on arrival, and display a poster in easy read format which outlines the process
- Consider dedicated seating in the waiting area for oncology patients visiting the clinic, to reduce the risk of picking up illnesses from other patients
- Install a television in the ambulance waiting area to help pass the time when patients are waiting for transport home
- Review the provision of non-emergency ambulance provision, especially the availability of 2-person ambulances.

Service Provider Response

We are very pleased with the overall positive feedback from the report and this has been shared with the staff. Our response to the specific recommendations within the report is as follows:

1. Consider a Meet and Greet Volunteer

Medical Outpatients have one meet and greet volunteer who supports the department most Tuesday mornings; we will approach our Hospital Volunteer Services Team to hopefully increase support within our area.

The introduction of volunteer support is a great idea for the Ambulance Waiting Area. As per the above, we will liaise with the Hospital Volunteer Services Team and seek to introduce such support.

2. Inform patients verbally about what attending the clinic will involve for them on arrival

Within the majority of clinics, patients are attended to by the clinic nurse on arrival; assessments are undertaken and they are directed to the clinic area. The nurse within the clinic area then keeps patients informed of processes and waiting times. This process can differ within the Haematology and diabetic foot clinics when patients are attended to initially by reception staff. We will look at our ways of working within these specialist clinics, look at resourcing the role of a clinic coordinator who engages with and attends to waiting patients. We have developed

some posters informing patients of the service improvements taking place within the diabetic foot clinic and will look toward resourcing further posters to support all specialties.

3. Consider dedicated seating in the waiting area for oncology patients visiting the clinic, to reduce the risk of picking up illnesses from other patients

We have a number of Haematology, bone marrow transplant and palliative care clinics in which patients attending are immunosuppressed and vulnerable to infection. The clinical nurse specialist or medical team involved in the patient's management will generally forewarn the clinic nurse team; a separate waiting area is provided by use of examination rooms, patients are advised to wear a surgical mask whilst in communal areas or review is arranged on one of the day wards.

As a result of this review, we will prompt the medical and clinical nurse specialist team to continue to forewarn of vulnerable patients being brought to clinic for review. We will raise awareness amongst the clinic nurse team to be proactive in managing patients vulnerable to infection, struggling with body image and ill effects of treatments.

4. Installation of a television in the Ambulance Waiting Area

As per the Healthwatch report, inadequacies with the Ambulance Waiting Area have also been identified within the Trust. As such, a cross-organisational review meeting is being arranged for late February/early March 2017 with the Yorkshire Ambulance Service. The review will explore the patient environment, the utilisation of the area to ensure both patient and staff satisfaction and safety, and to maximise the timely drop-off and collection of patients by non-urgent ambulance transport.

5. Review the provision of non-emergency ambulance provision

Please see number 4. above.

In addition, Sheffield's commissioners of non-emergency ambulance service are currently carrying out a tender for non-emergency patient transport services. This is in tandem with STH and other Sheffield health and social care organisations, with a view to putting in place revised arrangements for improved service provision with specific performance metrics in 2017.