What's it like being in a hospital waiting room?

People's views: Birmingham Children's Hospital





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Birmingham Children's Hospital

^e Key findings



With two exceptions, people were satisfied with waiting times, with average delays of less than half an hour



Some people were concerned about a lack of autism awareness and other sensory issues in the waiting room process



Some people found the waiting area too small and said conditions were cramped



Most people said the standard of cleanliness in waiting areas is good, but there were cases of floors and toilets needing more frequent attention



Several patients said there was a lack of refreshments in the waiting area, and that they were not offered anything by staff even after waiting for several hours



Patients, especially those with hearing impairments, could not hear when their name was called, and people with visual impairments said they needed more support to find their way around



People were happy with the communication and attention from staff





Introduction

In 2018, Healthwatch Birmingham asked members of the public across the City to share their views about what NHS or social care topics we should investigate next. People voted on five key health and care issues, and 71% of them asked us to evaluate the quality of service in waiting rooms in Birmingham's hospitals. This report, one of a series of nine for the hospital trusts we looked at, presents the results of that work for Birmingham Children's Hospital.

Background

We started our investigation into NHS hospital waiting rooms in Birmingham in autumn 2018. Our main focus was on people's experiences of waiting times, the environment, communication, accessibility, and dignity and respect.

To capture a representative sample of patients' views across Birmingham, our investigation consisted of two stages.

Stage 1

We collected feedback directly from patients who were in hospital waiting rooms, so that we would have information on the experience of patients in real time.

Stage 2

Based on initial feedback that led to the study and the experiences we heard in stage one, we worked closely with third-sector organisations (including Birmingham Focus, BID Services and deafPLUS) and interpreters to host focus groups to collect the experiences of people who have a visual and/or hearing impairment. Focus groups were held in four districts of Birmingham.

Healthwatch Birmingham also developed an online questionnaire to collect feedback from people with a visual and/or hearing impairment. This questionnaire included the same questions that were asked during our visits to waiting rooms and at focus group meetings. It was shared with the support of third-sector groups (including Birmingham's Disability Resource Centre, Action on Hearing Loss, Thomas Pocklington Trust and the National Deaf Children's Society) and extensive use of social media. The online questionnaire was available from 25 January to 8 February 2019.

Patients could choose to remain anonymous, or provide their contact details. A selection of patients who chose the latter were contacted again to participate in more in-depth interviews. We wrote these up as case studies.

We also looked at research on the effect of the experience of waiting on patient well-being. Poorly designed, uncomfortable waiting rooms and long waiting times have been found to contribute to a patient's stress and anxiety, perhaps because in addition to physical discomfort or accessibility problems, these spaces send a negative message that patients are a lower priority than the overall hospital system.^{1,2} Other issues, such as anxiety, insecurity, thirst and hunger, are not always easily detected by busy healthcare professionals, leading to a failure to offer appropriate and timely patient care.³ The quality of the waiting experience can also affect recovery times and mental well-being: a therapeutic waiting area design is associated with improved mood and greater satisfaction with healthcare services.⁴

Patients come into contact with the NHS at their most vulnerable, so emotions and negative feelings are heightened. The government's best practice guidance notes that it is important for NHS organisations to ensure that patients' emotional and physical needs are met at all stages of their journey:

For example, a patient kept waiting for an appointment ... may have a good emotional experience if they feel someone cares about them (that is, they are given regular information about why they are being kept waiting and an update on how long they will have to wait). The same patient left to wait without any information is likely to have a negative experience because they feel abandoned and neglected. Improving patients' emotional experience is about treating people as we would want to be treated - with dignity and respect. ⁵

The Disability Discrimination Act 1995 states that hospitals must provide 'reasonable adjustments' for disabled people to enable them to access services more effectively. The more recent Accessibility and Information Standard (AIS) further emphasises the need to ensure that providers are identifying, recording, flagging, sharing and meeting the information and communication needs of service users, for example to support people who have aphasia, autism or a mental health condition that affects their ability to communicate.⁶



Birmingham Children's Hospital

Birmingham Children's Hospital is located in Birmingham City Centre. It provides general and highly specialised care to children and adolescents, including mental health services. It is part of the Birmingham Woman and Children's NHS Foundation Trust.

As part of this study Healthwatch Birmingham heard 488 pieces of feedback from people across Birmingham, of which we heard 36 pieces of feedback about their experiences of the Birmingham Children's Hospital. Feedback was heard through our online Feedback Centre, Information and Signposting Service and through our community engagement activities. This included feedback on waiting areas in the Accident and Emergency, Outpatients, Ophthalmology, Rehabilitation and Orthopaedics departments. Two of the 3 6 pieces of feedback were from people who completed our online survey for people with sensory impairments.

What people said

Q Waiting times

Many people taking part in our study said they were satisfied with the length of time they had to wait to be seen.

Have been waiting 5 minutes, which is unusual as appointments are normally on time. Good waiting areas – great hospital. (Outpatients Department)

Have been waiting for 15 minutes as the clinic is over running. Normally have to wait a bit, but it's not excessive. (Outpatients Department)

Cases of very long waiting times were rare, although they did occur.

Very bad experience at Birmingham Children's Hospital, waited for 7 hours with no support and information. (Accident and Emergency Department)

Environment

The response to the cleanliness of the environment was mixed. Some people found the level of cleanliness acceptable or good, but several patients commented negatively on the condition and cleanliness of the toilets and floors. Although this was not a universally held observation, it was raised often enough for it to be a matter of concern.

Cleanliness is good - not clinical and geared for kids. (Outpatients Department)

The staff here are very good, but the waiting room is not very clean as the floor is grubby. (Accident and Emergency Department)

Could be more cleaning and is not ideal for sick children. The toilets are also dirty.

(Accident and Emergency Department)

Most people found the layout of waiting areas acceptable, but at busy times, overcrowding and noise presented problems.

Seating in waiting area is good and more space than at Heartlands Hospital. (Accident and Emergency Department)

The waiting room is crowded - too much furniture and no space. (Rehabilitation Department)

If you have to attend with children who have any special needs, it will be very difficult due to the noise levels and lack of space and a quiet area. (Accident and Emergency Department)

The lack of available refreshments in waiting areas was a common concern, particularly when patients had been waiting for long periods as this caused anxiety and restlessness among children in particular.

I have attended the Children's Hospital A&E recently on two separate occasions with my two small children. On both occasions we had to get to A&E quickly as were sent there by GP. Because of this I didn't have any drinks, food or cash with me. The average waiting time was five hours so we ended up spending many hours without any food or drink. In the end another patient who saw how much we were struggling gave my children some crisps as they were so hungry and starting to have tantrums on top of my 3-year-old having high temperature as well. Once we finally got in, we were offered food and drinks after I asked for it, which was really great, however we really needed it sooner ... I do think that they should provide fresh drinking water and some snacks for free as people don't always have money with them due to emergency. (Accident and Emergency Department)

Accessibility

Access for people with mobility problems was generally felt to be satisfactory, but several patients drew attention to the limited awareness of autism among staff. They wanted waiting areas to be arranged in ways that would reduce the sensory discomfort that children with autism experience.

The doctors and nurses in A&E are very good, but they have no knowledge of autism. They do not understand the condition and the challenges. They need to improve their knowledge and trust that what carers are telling them is the truth.

(Accident and Emergency Department)

My daughter is in a wheelchair and the access is good. Staff are helpful. (Accident and Emergency Department)

Case study

A mother, in the 25-49 age range and who is registered blind, attended the Ophthalmology Department for an appointment with her son. She felt that the design of the waiting area was good and supported her needs, but found the lighting inadequate and said there was no access to refreshments.

She added that the staff were not knowledgeable and supportive of her needs. When it was her son's turn to be seen, the staff called out names:



As a person who is registered blind, I am unable to see who is calling me, so I stand with my son looking like an idiot until they come to collect us on our name being called a couple of times.

She said staff could have managed her needs better by being able to sight guide.

Communication

Comments on the quality of communication were mixed. In general, people said that the manner and attentiveness of the staff in waiting areas were good. The friendliness of staff towards patients was mentioned.

They have someone who makes sure the kids are entertained ... Impressed with hospital. Staff amazing - can't fault anything. (Outpatients Department)

Staff are very helpful and caring. We would definitely recommend. (Rehabilitation Department)

However, some patients needed better communication from staff if there were delays.

Waiting 40 minutes so far and have been told that an emergency has come in, but communication could be improved. (Rehabilitation Department)

Communications with the hospital's administration was rated less highly. A number of patients told us about the problems they had in communicating with the hospital. One patient had tried to ring the hospital to say they would be late, but could not get through. Another saw her appointment delayed without notice.

My son had an appointment for minor surgery and had to fast. When we arrived at surgery, the appointment had been put back and my son was very hungry as he had to fast all day.

Dignity and respect

We asked people with a hearing impairments how their particular needs were being met. Several patients said that when nurses called patients by name, it was not easy to hear them, either because the patients hearing impairment, or the waiting area was crowded and noisy. This left patients feeling anxious and fearful about missing their slot.

Staff are very helpful and caring. We would definitely recommend.

(Rehabilitation Department)

They should have proper sound system using speakers for patient calling. This will make things easy for everyone. Nurses don't need to shout out names, and patients can sit in a relaxing mood and can hear their name easily when called. Everything else is in good shape. (Outpatients Department)

Can't hear if names are being called, particularly when it is busy. (Outpatients Department)

Summary

Many people said they had a good general experience of Birmingham Children's Hospital, with reasonable waiting times in most departments and particular praise for staff who were helpful and kind. However, there were concerns raised about the waiting room environment, particularly for patients who have sensory sensitivity, or visual and/or hearing impairments. Sometimes refreshments were not easily available. People wanted to see improvements in the process of calling patients to appointments.

Recommendations

Based on the feedback from service users, Healthwatch Birmingham recommends that the Trust:



Makes fresh drinking water readily available to all patients, and puts up clear signposting to food and facilities such as toilets



Ensures that staff undertake customer service and disability awareness training annually, and that this is reviewed regularly to ensure staff have appropriate support and training to meet patients' needs and rights, especially those with autism and similar conditions



Introduces a staff member or volunteer on each shift with a specific brief to monitor the food and hydration needs of vulnerable people, such as elderly people, children and people with disabilities



Reviews the efficiency and response times of call handling and produces an action plan to address issues identified



Reviews its current performance management systems to ensure that cleanliness improves and is more responsive to patient and staff feedback



Offers patients with a hearing impairment, a buzzer, or equivalent mechanism, so that they know when it is their turn to be seen



Undertakes a review of electronic signage across the hospital and considers using similar electronic system as used in The Royal Orthopaedic Hospital to keep patients up to date with waiting times and which room they need to go to

NHS trusts should work with community and service user organisations, and directly with those with disabilities, impairment or sensory loss, to understand what actions need to be taken to improve people's experience of waiting areas. Working in collaboration in this way will ensure actions are patient-centred and meaningful, and will make a difference.

In 6 months time, Healthwatch Birmingham will be tracking the progress of these improvements, requesting an update from the Trust which evaluates the specific changes made to improve patient's experiences of waiting rooms.



Trust's Response

^e Birmingham Women's and Children's NHS Foundation Trust Response

We recognise the issues raised in the report and have plans in place to improve upon the experience in our waiting rooms. We are pleased that our efforts to ensure children, young people and their families wait for their appointments in a fun and relaxed environment were noted. We also appreciate that we have some improvements to make and these will be monitored by our Patient Experience Committee. We have plans to re-run the methodology with our YPAG or FPAC members to test out that the improvements have been sustained.

Healthwatch Birmingham's Response

Healthwatch Birmingham will request the following information, for inclusion in our six-month follow-up report.

In six months we will require the Birmingham Women's and Children's NHS Foundation Trust to provide evidence the following.

- Findings of any reviews undertaken due to recommendations, detailing any changes made by the Trust.
- Current patient feedback heard by the Trust that demonstrates that all the issues highlighted in our recommendations have been resolved.

References and Endnotes

¹Leather, P., Beale, D., Santos, A., Watts, J. and Lee, L. (2003). Outcomes of environmental appraisal of different hospital waiting areas. *Environment and Behavior* 35(6), pp. 842-869.

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⁴Leather, P., Beale, D., Santos, A., Watts, J. and Lee, L. (2003). Outcomes of environmental appraisal of different hospital waiting areas. *Environment and Behavior* 35(6), pp. 842–869.

⁵ Department of Health (2005). 'Now I feel tall' What a patient-led NHS feels like: Best Practice Guidance, p. 5. London: Department of Health. At https://webarchive.nationalarchives.gov.uk/20130123205405/www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH 4124475

⁶ Accessible Information Standard: Overview 2017/18. At www.england.nhs.uk/publication/accessible-information-standard-overview-20172018/



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