Impact Report How patient feedback has improved hospital waiting rooms





Introduction

Healthwatch Birmingham published a report "What is it like being in a hospital waiting room: People's views in Birmingham" in 2019. This report described the experiences of people using hospital waiting rooms, made recommendations to NHS hospital trusts and the Community Health NHS Trust, and provided the responses from trusts to these recommendations.

You can find the full report on our website.

All participating trusts were keen to act on the information provided by people using their service and to use it to plan for improvements. They provided written responses to the patient feedback provided and set up work plans to ensure that they made required improvements.

Changes include immediate improvements, such as installing more signage or water fountains. Where appropriate, trusts undertook reviews of current and best practice and shared best practice between trusts. Staff and volunteer training was undertaken and inspections made. You can find the full trust response to each recommendation in the Appendix of this report.

Due to these improvements, patients visiting the waiting rooms of participating NHS trusts should experience:

- Shorter waiting times
- Better quality service for people with disabilities
- Better appointment calling and appointment displays
- Improved access to water, supporting hydration
- Greater awareness that feedback is welcomed, and more opportunities to provide it
- Cleaner environments

The following section includes posters summarising changes that patients may directly experience due to our investigation at each hospital. They also request patients, and their friends and family, to continue to share their feedback. Trusts with display boards in waiting areas have agreed to display these A3 laminated posters.

Next steps

Healthwatch Birmingham will request updates from NHS trusts regarding progress on all outstanding work included in the response tables in the Appendix. We will report this progress on our website. We will also continue to hear feedback regarding hospital service provision, and will include this feedback in our quarterly report to the Care Quality Commission, the Clinical Commissioning Groups and Birmingham City Council. If your organisation would like to display copies of any of the posters please contact us.

Healthwatch Birmingham would like to thank the trusts, patients and community and voluntary organisations for their participation and involvement in this investigation.



What is it like being in a hospital waiting room?

Birmingham and Midlands Eye Centre

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The Trust has since reported to Healthwatch Birmingham that they have improved:

- Waiting times in clinics (e.g. by introducing virtual consultations online, and by starting a Single Point of Access service for GP emergency referrals that signposts people to the appropriate clinical service rather than them waiting unnecessarily in the Emergency Dept.)
- Awareness of the needs of people with hearing/sight loss/learning disability by introducing training sessions. Staff and service users are working together to develop a tool kit for supporting patients with hearing impairments /loss.
- Seating in the Emergency Dept. Replacement colour coded seating has been ordered.
- Staff collection of patients who are visually impaired in order to guide them to their appointments.
- The efficiency and response times of telephone call handling.

The following reported improvements were confirmed by a Healthwatch Birmingham secret shopper exercise:

- The way people are called through to their appointments by introducing patient held call systems. These allow patients to leave the waiting areas without the anxiety of missing their appointment.
- Staff in the main Emergency Dept. areas undertake regular patient rounds and patients are asked frequently if they are comfortable, pain free and hydrated. Where safe to do so patients are

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offered snacks and drinks and encouraged to keep hydrated.

- Cleanliness of the Outpatient/Emergency Dept. Posters that encourage people to give feedback/raise concerns.
- Boards that display expected waiting times.
- The cleanliness of toilets.
- Staff collection of patients who are visually impaired in order to guide them to their appointments.



The full list of recommendations and resulting actions taken by the Trust can be found on our website: https://healthwatchbirmingham.co.uk/

To help improve the quality of service for you and other patients, please tell us your experience of waiting rooms in this hospital.

You can do this by:

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City Hospital

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- Waiting times in clinics (e.g. by introducing virtual consultations online, and by starting a Single Point of Access service for GP emergency referrals that signposts people to the appropriate clinical service rather than them waiting unnecessarily in the Emergency Dept.)
- The way people are called through to their appointments by introducing patient held call systems. These allow patients to leave the waiting areas without the anxiety of missing their appointment.
- Staff in the main Emergency Dept. areas undertake regular patient rounds and patients are asked frequently if they are comfortable, pain free and hydrated. Where safe to do so patients are offered snacks and drinks and encouraged to keep hydrated. A secret shopper exercise confirmed that vending machines were available in all clinics we visited.
- Cleanliness of the Outpatient/Emergency Dept. Posters that encourage people to give feedback/raise concerns. A secret shopper exercise confirmed that these posters are being displayed.
- Boards that display expected waiting times.
- Awareness of the needs of people with hearing or sight loss or learning disability by introducing training sessions. Staff and service users are working together to develop a tool kit for

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Who are Healthwatch Birmingham? We listen to and gather public and patient experiences of using local health and social care services. Examples are general practices, pharmacists, hospitals, dentists, opticians, care homes and community-based care. You can read more about Healthwatch Birmingham at www. healthwatchbirmingham.co.uk/about-us/

supporting patients with hearing impairments /loss.

• Emergency Dept. teams are currently working with the Trust Volunteer Services to scope the introduction of a volunteer model to ensure patients' hydration and nutrition are maintained.

Sandwell and West Birmingham

What is it like being in a hospital waiting room?

Birmingham Dental Hospital

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The Trust has since reported to Healthwatch Birmingham that they have improved:

- Telephone answering times, and continuously monitor these to try to avoid delays answering calls.
- Cleanliness of toilets and waiting rooms.
- A number of doors to clinic waiting areas. These are now automatic, to assist with accessibility.
- Patient announcements in clinics, to ensure all patients know when it is their turn, particularly those with hearing impairments or sight loss.
- Actively encouraging people to give feedback about the service they received.

A Healthwatch Birmingham mystery shopper exercise in November confirmed that boxes were widely available for healthw tch

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patients to leave feedback.

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resulting actions taken by the Trust can be found on our website: https://healthwatchbirmingham.co.uk/

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Birmingham Community Healthcare NHS Foundation Trust

What is it like being in a hospital waiting room?

Royal Orthopaedic Hospital

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The Trust has since reported to Healthwatch Birmingham that they are improving:

- Customer service and disability awareness: The Trust has offered staff in reception areas in both Outpatients and Admissions and Day Case Unity (ADCU) additional customer service training, which includes managing distressed and/or upset individuals.
- The parking needs of people with disabilities: There will be assistance signage in the patient car parks. Additional signage near accessible parking spaces has been requested.
- Sharing best practice: Visits to other hospitals have been arranged for Departmental Managers to review each other's processes with a view to sharing learning and best practice.
- Wheelchair availability: Provision of additional wheelchairs has been explored and requests for funding have been made. In addition, volunteers and staff have been made aware of all wheelchair location points.
- Clinic running times: Details of any clinics that regularly over-run are shared with operational managers to identify causes and to abange the guarantee of the clinic where percent.

change the running of the clinic where necessary.

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The Royal Orthopaedic Hospital NHS Foundation Trust

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What is it like being in a hospital waiting room?

Good Hope Hospital

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The Trust has since reported to Healthwatch Birmingham that they are working to improve:

 Signage: A patient, who is an architect by profession with expertise in signage, has assisted a site walk round and will be part of further Trust work to improve wayfinding.

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- Disability awareness:
 - A meeting with audiology patients provided insight into the needs of deaf and hearing impaired patients. Suggestions are being considered.
 - A consultation workshop, together with patient and carer feedback identified issues relating to inclusion. Following this, a Trust Inclusion Strategy outline was agreed at Board level. Staff training will improve knowledge and skills when caring for people with disabilities.
 - Will be explored and developed further through the Task and Finish Group and in conjunction with visually impaired patients.
 - The Trust is working to ensure patients can update their communication preferences.
 - The Trust is to improve the information cards currently available for people with specific needs.
 - Disability aid boxes have been provided to outpatient areas to support staff with disability issues.
- Long clinic running times: The Outpatient Improvement Group is reviewing the management of appointments for clinics that have consistently long running times.



 Access to fresh water: Increased supply of drinking water in outpatient areas. Water filters are being plumbed into the Emergency Dept. A secret shopper exercise confirmed that vending machines were available in all clinics we visited.

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Heartlands Hospital

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 - Disability aid boxes have been provided to outpatient areas to support staff with disability issues.
- Long clinic running times: The Outpatient Improvement Group is reviewing the management of appointments for clinics that have consistently long running times.
- Access to fresh water: Increased supply of drinking water in outpatient areas. There is now a hydration station in the Emergency Dept. Healthwatch Birmingham's secret shopper exercise confirmed that vending machines are available.

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What is it like being in a hospital waiting room?

Queen Elizabeth Hospital

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 - The Trust is working to ensure patients can update their communication preferences.
 - Disability aid boxes have been provided to outpatient areas to support staff with disability issues.
- Long clinic running times: The Outpatient Improvement Group are reviewing the management of appointments for clinics that have consistently long running times.
- Access to fresh water: Increased supply of drinking water in outpatient areas. Water filters are being plumbed into the Emergency Dept. A secret shopper exercise confirmed that vending machines were available in all clinics we visited.
- Seating in the Emergency Dept: Updated bespoke seating for the Emergency Dept. will be produced with a more durable polyurethane covering, suitable for use in that department.
- Communication boxes: A Healthwatch Birmingham mystery shopper exercise in November confirmed that boxes were widely available for patients to leave feedback.

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What is it like being in a hospital waiting room?

Birmingham Children's Hospital and Birmingham Women's Hospital

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A Healthwatch Birmingham mystery shopper exercise in November confirmed that boxes were widely available for patients to leave feedback. The Trust has since reported to Healthwatch Birmingham that they have improved:

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- Signage to fresh drinking water or explaining that staff or volunteers can provide water on request. A Healthwatch Birmingham secret shopper inspection confirmed these signs are in place.
- Access to toilets. There is now extra signage to direct to the closest facilities.
- Awareness of the needs of people with hearing loss or learning disability by:
 - Introducing training sessions. Staff and service users are working together to develop a tool kit for supporting patients with hearing impairments /loss.
 - Awareness badges. Visible, bold, yellow and black badges

 I am here to help with sensory awareness have been launched at both sites. These have been swiftly adopted by reception teams.
 - Providing information about interpreters at the main reception of the Women's Hospital. Signage to indicate British Sign Language interpreters can be booked and iPad interpreters are available on demand.
 - Signage includes disability symbols.

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NHS

Birmingham Women's and Children's NHS Foundation Trust The full list of recommendations and resulting actions taken by the trust can be found on our website: https://healthwatchbirmingham.co.uk/

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Appendix: Trust responses

Royal Orthopaedic Hospital Update to HealthWatch Birmingham Waiting Room Study October 2019

The Royal Orthopaedic Hospital NHS Foundation Trust has continued to utilise the feedback provided by HealthWatch Birmingham in this study to embark on a programme of continuous improvement for waiting areas within the Trust. The Trust takes pride in the positive feedback it receives, but is always keen to act upon information provided by patients to ensure that wherever possible, it is incorporated into planning for improvement.

Staff and Managers from the Outpatients and Admission and Day Case Unit (ADCU) convened to form a working group and create a dedicated action plan from the information provided.

Work has been undertaken in the following areas:

Training

Staff in Reception Areas in both Outpatients and ADCU have been offered additional customer service training, which includes managing distressed and/or upset individuals.

Parking

Additional signage has been ordered for assistance signage on the patient car-parks, and a further request has been made for additional signage near accessible parking spaces.

Sharing Best Practice

Visits to other hospitals have been arranged for Departmental Managers to review each other's processes with a view to sharing learning and best practice. This will be discussed in team meetings and within the working group once complete.

Wheelchair Availability



Provision of additional wheelchairs has been explored and requests for funding have been made. In addition, volunteers and staff have been made aware of all wheelchair location points.

Clinic Templates

As part of the Trust's continuing commitment to reducing waits in Out-Patients, details of any clinics that regularly over-run are shared with operational managers to identify causes and to change the running of the clinic where necessary.

The Trust remains committed to working with partners in order to ensure that patients have a variety of ways in which to share feedback and will continue to monitor all of the planned actions until they are complete. This is currently expected to be December 2019.



Appendix: Trust responses

Sandwell and West Birmingham NHS Trust

HWB Recommendations	SWBH Response	Update S&WB NHS Trust	Actions
Take action in response to feedback on uncomfortable seating by making timely improvements, particularly for clinics that regularly over run	We continue to review how best to ensure our clinics run to time and ensure we apologise to patients if they are unavoidably delayed. Our Group Directors of Nursing will set up arrangements to monitor clinic running times	Outpatients We continue to review how best to ensure our clinics run to time and ensure we apologise to patients if they are unavoidably delayed and keep patients informed where they are delays Service leads/Clinicians work in partnership with the Trust scheduling and booking teams to ensure appropriate optimization of outpatient clinics A number of clinical services are introducing virtual consultations which will negate the need for a face to face consultation thus reducing the patient needs to travel and improving efficiencies in waiting times in our outpatient departments. BMEC -appointment letters give information regarding potential wait times.	 As an Integrated care Trust we are working tirelessly with our primary care partners and Sandwell and West Birmingham CCG to introduce innovations to our emergency and elective care pathways that reduce the need for face to face outpatient consultations/ attendance in ED. A number of our outpatient departments are scoping initiatives to improve the patient experience whilst in our waiting areas: Volunteer pathent held call systems (which will allow patients to leave the waiting areas without the anxiety of waiting to be called Established emergency/urgent care facilities (hot clinics)



Provides fresh drinking water which is readily available to all patients, and displays clear signposting to refreshments and toilets	We are increasing our volunteer numbers in key waiting areas so that they can better support patients and visitors.	Emergency Department Over the last 12 months the Trust has implemented a Single Point of Access service for GP emergency referrals that signposts referrals to the appropriate clinical service rather than patient's being accommodated unnecessarily in ED. We have water coolers in place for patients across a number of our departments. The Trust has a number of machines that offer snacks and cold drinks and all of our sites have small outlets that offer food as well as hot and cold drinks. Staff in our main ED areas undertake regular patient rounds and patients are asked frequently if they are comfortable, pain free and hydrated. Where safe to do so patients are offered snacks and drinks and encourage to keep hydrated Visitor's toilets are clearly signposted across all our sites with a range of able bodied and disabled facilities.	external to ED for Respiratory/colorectal/urology and trauma services The Trust has recently implemented UNITY (an electronic patient record). The ED e-documentation includes rounding chart - compliance to the completion of the rounding tool will be monitored by ED matrons. The introduction of volunteers into our outpatient and ED departments will support in enabling staff to advise and signpost patients in regard to toilets and refreshment outlets and water coolers. We will endeavour to scope as to whether on our patient information boards we can add directions to patients are message to ask staff if requiring assistance.
Ensures actions are put in place to improve cleanliness and react quickly to	We have dedicated service officers for all areas of the Trust. We will reinforce the	The Trust undertakes regular PLACE reviews across all of our wards, departments and outpatient areas - estate, equipment , access and cleanliness are	The Trust is seeking patient representation on its Infection Control Operational Group.



patient and staff feedback where this is an issue	message to staff to raise issues where they see anything that needs attention, and to follow up when a patient raises a concern. Our Group Directors of Nursing will monitor this.	 inspected and feedback to service leads and managers. PLACE results/recommendations are reviewed by the Trust Infection and Control Operational group and monitored by the Trust Infection and Control Advisory Committee. The Trust Infection Control Audit chaired by the Chief Nurse reviews compliance to the NHS cleaning standards indicators and scores. Hot spot areas are identified and action plans are instigated where improvement is required. Matrons undertake environmental audits on a monthly basis with ward teams. The audits are completed and issues that cannot be managed locally are escalated through group governance structure, as well as the Trust Infection Control Committee and Operational groups. We encourage patients to raise concerns locally to ward and department teams so that issues can be resolved in a timely manner. We also have our purple phone initiative which allows patients to give feedback either whilst they are receiving care or pre admission or post discharge. 	Our outpatient/ED dept. areas are high usage area with a high volume footfall. However we will ensure through our volunteer initiative and posters that patients are informed and encourage to give feedback/raise concerns.
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Undertakes a review of electronic signage across the hospital and considers using a 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.	The Emergency Departments do have electronic message boards informing patients of waiting across Majors, Minor Injury and paediatric streams BMEC have introduced boards which are updated throughout the clinic session with expected waiting times.	regard to our move to Midland
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Ensure that all patients who need a BSL interpreter are given priority so that they attend their appointments on time, meaning that booked BSL interpreters can support patients for the whole consultation, even if clinics over run.	We have a robust system in place to book interpreters for appointments	The Trust offers access to BSL interpreters where we are alerted by the patient that they require the service.	. .
Ensure that staff undertake specialist disability awareness training annually, and that this is reviewed regularly to ensure staff have appropriate support and training to meet patients' needs and rights (ensuring that BSL interpreters are promoted to all who require them).	All Trust staff are required to undertake equality and diversity training as part of our mandatory training programme.	The Trust will launch a LD awareness programme in November focusing on enhancing the care we offer to patients with learning difficulties. As part of the launch the Trust has a LD Awareness day on the 6th November. BMEC staff are provided with training on how to guide visually impaired people run by our ECLO's (Russell Stephenson and Lisa Kilford).	Guiding training has been organised for E and OPD staff at BMEC. Information on guiding has been circulated to all staff from the RNIB.
Identify, record, flag, share and meet the	This is in place.		The introduction of Unity has also improved the recording of



information and/or communication needs of patients and service users - and where appropriate their carers or parents - in line with the Accessible Information Standard			requirements under the Accessible Information Standards. In BMEC our electronic Lorenzo system provides additional people to send letters to, including the patient, and is utilised at the patient's request.
Should work directly with people with hearing impairments to develop an information card that can be used to support Trust staff to identify people's specific needs	We will consider this.	A small group is being established to scope how we can improve the experience of patients with hearing loss/impairments.	We will work with service users and staff groups to develop a tool kit for supporting patients with hearing impairments/loss. Scope resources currently available to patients across all our services.
City Hospital only			
Take action in response to feedback on uncomfortable seating by making timely improvements, particularly for clinics that regularly over run.	See above.	We continue to review the resources provided in all our waiting areas to ensure the provisions are safe and comfortable. We also aim to reduce the need for patients to attend our outpatient and ED facilities through a wide range of initiatives (see above) We have also launched several new ways of working in our ED departments to support the timely care management this includes :	



		Single point of access - GP referrals SMART - Triage and Streaming model Wide range of urgent and hot clinics Ambulatory care services - for Medical and Surgical assessment	
Allocates 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.	We are increasing our volunteer numbers in key waiting areas so that they can better support patients and visitors.	In line with the national "Fit to Sit" initiative we aim to keep, maintain patients' independence and functional level whilst in our assessment area. Our ED department nurses undertake regular care rounding ensuring patients' hydration and nutrition are maintained. Monitoring is based on individual need and the clinical management of the patient.	Our E-patient notes "Unity" provide evidence of compliance to care rounding. ED teams are currently working with the Trust volunteer services to scope the introduction of a volunteer model across all of our depts.
Works with patients to identify the areas where signage is most crucial and uses this feedback to draw up an action plan to improve the quality of signage to meet a range of patient needs.	We are increasing our volunteer wayfinders to support patients and visitors.		We are currently scoping the use of signage across our hospital site.
Should provide appropriate, understandable and accessible ways for people to	We have a system in place to book interpreters for appointments.	Please see response above.	



independently book interpreters, including BSL interpreters, relay speakers or lip speakers. When communication needs are identified, this is recorded on a patient's notes and interpreters automatically booked for subsequent visits (dependent on communication preferences). BMEC only		
Ensures actions are put in place to improve cleanliness and react quickly to patient and staff feedback where this is an issue.	We have dedicated service officers for all areas of the Trust. We will reinforce the message to staff to raise issues where they see anything that needs attention, and to follow up when a patient raises a concern. We have reviewed the standards of cleanliness at BMEC OPD. Our Group Directors of Nursing will monitor this.	schedules throughout BMEC as the footfall has increased significantly and the requirements to keep the areas clean and tidy have altered. Cleaning rotas have been reviewed, cleaning schedules have been altered and additional cleaning of toilets has
Ensures all waiting rooms should have allocated wheelchair zones and priority- seating systems are in place.	We have zoned seating areas for clinics and emergency patients. We have increased our wheelchair availability. Space within BMEC OPD is limited and we provide support to patients/relatives in wheelchairs. A review of the space is being	Additional temporary OPD space has



	undertaken and the Executive team are sighted on the need for expansion of the service. Replacement colour coded seating has been ordered for BMEC ED to support the patients with navigating around the department.	
Ensures that staff collect patients who are visually impaired in order to guide them	We agree and will reinforce this important message and ensure that this is monitored.	
to their appointments. Reviews the efficiency and response times of call handling and produces an action plan to address issues identified.	We have done this to ensure that calls are answered at all times. New VOIP call system has been implemented in BMEC ED at the end of April 2019. Additional hours for ED telephone triage have been identified, increasing to include Saturday mornings, and are now in place.	



Healthwatch Birmingham

Follow-up report to 12 December 2018 visit to Birmingham Dental Hospital

Response October 2019

Recommendations based on issues heard	Dental Services Division, Birmingham Community Healthcare NHS Foundation
	Trust Response
Reviews the efficiency and response times of call handling and produces an action plan to address issues identified.	The Division reviews monthly the management of calls through the Booking Contact Centre. This includes the activity and the management of the calls. There has been an improvement with how calls are managed within the last 6 months, which directly links to the ongoing experience for patients with how they communicate with the service and manage their appointments. Work continues to look at staffing and expectations of service users when using this service.
Reviews its current performance management systems to ensure that cleanliness improves and is more responsive to patient and staff feedback, for example by implementing spot- checks of toilets and waiting areas.	The Birmingham Dental Hospital has a new on site Facilities Co-ordinator who manages the onsite cleaning contract. New signage has been displayed in toilet facilities to communicate to service users how they can report and raise a concern. Spot checks and auditing continues to be undertaken across the hospital to review cleanliness.
Undertakes a review of electronic signage across the hospital and considers using a 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.	Work continues to enhance the use of electronic signage. A pilot is due to be undertaken to display patient waiting times, within the next 3 months. Current electronic signage shares key information and messages to services users about the hospital and also rolling news stories.
Works with patients to identify the areas where signage is most crucial and uses this feedback to draw up an action plan to improve the quality of signage to meet a range of patient needs	We continue to improve signage for the hospital. New signage has been installed to entrance areas to clearly direct service users to the Ground floor atrium. New signage has been displayed for our X-ray Department and for the onsite General Anaesthetic Theatre. Following feedback from service users though our Friends and Family Cards it was identified that our external AA road signs had been removed. A further application was made to extend the use of AA signs to direct services users from the



	surrounding roads to find the hospital. A joint application with the building landlords will be made for permanent signage across Birmingham once the site has been fully developed. We will continue to link with our disability network to support further work on enhancing the navigation experience around the building and monitor patient feedback.
Review access for disabled people to make sure that people who use a wheelchair are easily able to access the hospital building and have the constant use of disabled toilets. Current patient feedback heard by the Trust that demonstrates that all the issues highlighted in our recommendations have been resolved.	Work continues to look at how access around the building can be enhanced for all service users internally and externally. This includes looking at signage and accessibility e.g. introduction of automatic doors from waiting areas to clinics. We are linking with our disability network to support this work. The Division continues to offer service users opportunities to provide feedback using Friends and Family feedback cards and an online website link. Feedback is monitored monthly by the Divisional Quality Committee. Overall performance has continued to be above the 85% target each month. Noted comments are received about signage and waiting areas/times and this continues to be reflected in some of the engaging work being undertaken to improve the corvine for users.
Evidence and findings of the clinical capacity review, including any changes undertaken and planned by the Trust.	of the ongoing work being undertaken to improve the service for users. The Division has undertaken a full capacity review of staffing including clinical, nursing and administrative support. This has been a comprehensive review of identifying our staffing requirements to support the service. Waiting times when attending an appointment link actively to the dynamics of the services provided. We continue to look at how we can improve and manage patient expectations, including patient appointment letters, patient information screens and the future implementation of Wi-Fi within the building. We continue to monitor patient feedback regularly, observing that feedback continues to remain positive. We actively encourage patients to give feedback to help us to improve our services.
 Current patient feedback heard by the Trust that demonstrates improvement through the following initiatives: 'Starlight' distraction boxes. Hospital staff improving the way they announce which patient is next, including whether the written whiteboards are accessible to patients, 	 Feedback directly from our clinical staff who have direct patient care, acknowledge that the 'starlight' distraction boxes are a great way to occupy patients following the administration of a pre-med for General Anaesthesia. They are also used to distract the children whilst undertaking procedures. The box offers a variety of little toys for the children to play with whilst waiting for their procedure. We also hand them out to patients post



particularly those with visual	operatively in recovery as a 'reward' for being so brave during this scary
impairment.	time.
	2. We have reinforced the message to staff and students to promote the need to be clear and stepping into the patient waiting area when calling the next patient. This has been reinforced through Governance meetings
	and our internal 'Lessons Learnt' bulletin to staff. This is an ongoing message which we will continue to remind staff/students of.



Update - October 2019 UHB Trust

A Task and Finish group has been established up to initiate improvements for patients, relatives and carers relating to access and environment in our waiting areas.

An Outpatient Improvement Group has been has also been established, led by a Trust Director of Operations, to look at operational improvements.

Recommendations UHB TRUST - (recommendations made for at least two UHB hospitals)	Response received from UHB	Update
Works with patients to identify the areas where signage is most crucial and uses this feedback to draw up an action plan to improve the quality of signage to meet a range of patient needs.	A review of outpatient signage is underway at the Queen Elizabeth Hospital Birmingham site, where feedback has been gained from patients around what works for them and where they think improvements could be made. Actions are underway and learning will be shared across all of our sites.	The Trust has had an initial meeting with AccessAble and will consider whether this approach would be used by patients.
		A patient, who is an architect by profession with expertise in signage, has assisted a site walk round and will be part of further Trust work to improve wayfinding.
		Wayfinding guides used at Birmingham Heartlands Hospital are useful to patients and will be considered for other sites.
		Volunteers continue to be located at main access points to each site to help guide patients to their destination.
Undertakes a review of electronic signage across the hospital and considers using a 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.	This recommendation will be reviewed against our current practice to see if improvements can be made.	Some clinics have some forms of electronic signage with varying degrees of success. Many patients tell us that they like the personal approach. This recommendation will continue to be considered in the Task and Finish group to decide on a clear approach.



Offers patients with a hearing impairment a buzzer, or equivalent mechanism, so that they know when it is their turn to be seen.	We recently held an awareness session on visual and hearing impairment for lay members of our Patient, Carer and Community Councils as they can help us to identify good practice or areas for improvement during their visits to wards and departments. This recommendation will be reviewed against our current practice to see if improvements can be made.	Attendance at Trust PPI group for Audiology Patients (PANDA) provided further insight into the needs of deaf and hearing impaired patients. Members of the group made suggestions to help better identify patients so that staff could recognise them easily for their appointment. The suggestions made are being considered by the Task and Finish group to establish which suggestions would be most workable. Use and usability of the current buzzer alert units available to the Trust is being reviewed.
Ensure 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 (ensuring that BSL interpreters are promoted to all who require them).	We recently held an awareness session on visual and hearing impairment for lay members of our Patient, Carer and Community Councils as they can help us to identify good practice or areas from improvement during their visits to wards and departments. Staff also have access to training but this is not mandatory, we will review the current situation and include any actions in our action plan.	A consultation workshop was held with staff to identify issues relating to inclusion. This was supplemented with patient and carer feedback already collected. Following this a Trust Inclusion Strategy outline was agreed at Board and objectives are currently being set. Part of the new strategy relates to knowledge and skills of staff (e.g. training) as well as practical inclusion which will offer readily accessible advice. Communication boxes are also being
		distributed to all outpatient areas and wards to support staff with communication resources.



Identify, record, flag, share and meet the information and/or communication needs of patients and service users – and where appropriate their carers or parents – in line with the Accessible Information Standard.	Work continues in ensuring that the Accessible Information Standard becomes fully embedded to ensure that we are fully aware of our patients' communication needs.	Following the merger the Trust is currently updating and merging outpatient recording and booking systems across all sites. Part of this project will include consideration for how patients can update their communication preferences, in particular at electronic self-check-in kiosks, in line with the requirements of the Standard.
		Work will also be undertaken to advise patients, careers and relatives, via existing electronic screens, how communication preferences can be updated.
		The Outpatient Improvement Group has a remit to support the Trust in meeting national access standards.
Provides appropriate, understandable and accessible ways for people to independently book interpreters, including BSL interpreters, relay speakers or lip speakers. When communication needs are identified, this is recorded on a patient's notes and interpreters automatically booked for subsequent visits (dependent on communication preferences).	This recommendation will be reviewed against our current practice to see if improvements can be made.	The Trust is currently updating and merging outpatient recording and booking systems across all sites. Part of this project will include consideration for how patients can update their communication preferences, in particular at electronic self-check-in kiosks, in line with the requirements of the Standard. This will include any interpreting requirements.
		As part of the Task and Finish work, outpatient letters will be reviewed by community contacts to assess their



		usability for patients whose first language is not written English. Outpatient letters will also be reviewed via the Trust's staff inclusion networks and the Patient, Carer and Community Councils.
Should work directly with people with hearing impairments to develop an information card that can be used to support Trust staff to identify peoples specific needs ⁷	During our recent workshop with BID Services they showed us a card similar to this that is available in Birmingham. We will work with BID to see if we can promote this within our hospital sites.	The Trust's Head of Equality and Diversity (Inclusion) and Lead Nurse for Dignity have met to discuss the information cards currently available at the Trust for people with specific needs. Review and update of this information will be taken forward through the Task and Finish Group's work.
Provides fresh drinking water which is readily available to all patients, and displays clear signposting to refreshments and toilets.	Fresh drinking water and signage to refreshments and toilets is largely available, however we will review any gaps identified.	Fresh drinking water fountains are in place in outpatient areas at the QE and provision of water in other outpatient areas has been introduced. Increased supply of drinking water in outpatient areas across the organisation has been discussed with the Associate Director of Nursing responsible for outpatients. Water provision will be scoped further with the Outpatient Matron.
		Signage to facilities will be developed in line with the work described above regarding signage and wayfinding.
		The Ambulatory Care and Diagnostics Centre soon to be under construction at Birmingham Heartlands Hospital will have beverage points for patients.



Allocates 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.	This recommendation will be reviewed against our current practice to see if improvements can be made.	This is an existing expectation of nursing staff during their shift. Additional help from volunteers is being introduced into the emergency departments, under the guidance of nursing staff.
Ensures that staff collect patients who are visually impaired in order to guide them to their appointments.	This recommendation will be reviewed against our current practice to see if improvements can be made.	This recommendation will be explored and developed further through the Task and Finish group and in conjunction with visually impaired patients to further improve the actions already taken by staff in this regard.
Ensures that all patients who need a BSL interpreter are given priority so that they attend their appointments on time, meaning that booked BSL interpreters can support patients for the whole consultation, even if clinics over run.	This recommendation will be reviewed against our current practice to see if improvements can be made.	BSL interpreting services are available Trust-wide. The minimum contracted booking time for a BSL interpreter is two hours and patients' appointments are accommodated within this timeframe.
Tracks the quality of interpreter provision.	This recommendation will be reviewed against our current practice to see if improvements can be made.	Incident reports regarding interpreter provision are electronically flagged to the Trust's Head of Equality and Diversity and any immediate remedial action is implemented. These incident reports are regularly reviewed for themes, together with any complaints or feedback received regarding interpreter provision.
Reviews the management of appointments for clinics that have consistently long running times, to make sure they are being run in the most efficient manner possible	This recommendation will be reviewed against our current practice to see if improvements can be made.	This recommendation is being addressed through the Outpatient Improvement Group as a defined work stream and standing agenda item.



		Alternative models for outpatient appointment provision are also being scoped and will be considered.
Update - October 2019		
Take action in response to feedback on uncomfortable seating by making timely improvements, particularly for clinics that regularly over run.	Emergency Department waiting rooms are currently under review at Heartlands and the Queen Elizabeth hospital sites. This will include replacing the seating with more comfortable seating provision which we will select in conjunction with our patient groups to ensure they are suitable for different patients' requirements.	Updated bespoke seating for the ED will be produced, similar to that in place in the QE Atrium, with a more durable polyurethane covering, suitable for use in the ED.
Update - October 2019		
Undertakes a full review of medical notes to ensure that people's individual communication preferences are up to date.	Work continues in ensuring that the Accessible Information Standard becomes fully embedded to ensure that we are fully aware of our patients' communication needs.	The Trust is currently updating and merging outpatient recording and booking systems across all sites. Part of this project will include consideration for how patients can update their communication preferences, in particular at electronic self-check-in kiosks, in line with the requirements of the Standard.
		Work will also be undertaken to advise patients, careers and relatives, via existing electronic screens, how communication preferences can be updated.
Works directly with people with hearing impairments to develop an information card (see example in endnote7) that can be	During our recent workshop with BID Services they showed us a card similar to this that is available in Birmingham. We	The Trust's Head of Equality and Diversity (Inclusion) and Lead Nurse for Dignity have met to discuss the information cards currently available at



used to support Trust staff to identify people's specific needs.	will work with BID to see if we can promote this within our hospital sites.	the Trust for people with specific needs. Review and update of this information will be taken forward through the Task and Finish Group's work.
Reviews systems for allocating appointments and the transferring of patient files and develops an improvement plan to address deficiencies identified.	This recommendation will be reviewed to ascertain if there is an issue.	The Trust is currently updating and merging outpatient recording and booking systems across all sites.





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