



Mystery shop exercise completed at Royal Derby Hospital



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1. Thank you

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

Healthwatch Derbyshire 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 Royal Derby 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

Healthwatch Derbyshire 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.

Healthwatch Derbyshire 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 Healthwatch Derbyshire and Royal Derby Hospital. It was hoped the exercise would also offer feedback into new letters to be introduced by the hospital produced in an 'easy read' format designed to be more easily understood by patients with learning disabilities.

5. What we did in brief

In partnership with Derby Hospital, Healthwatch Derbyshire volunteers tested the journey a patient would follow when being invited to the hospital for an outpatient appointment.

Volunteers commented upon their experiences, from receiving a patient letter inviting them to a fictitious 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.

6. Key findings

6.1 Appointment Letter

The letter looked by volunteers was an ‘easy read’ letter designed to be more easily understood by patients with learning disabilities. This version of the standard Trust letter is being rolled out for those patients who have expressed the need for such a format and is produced for the Trust by an outside agency, Synertec.

Volunteers found the language used within these letters was easy to understand and to the point. They found the font size made the letter clear.

However, volunteers found the grammar and meaning was confusing in places and spotted some typographical errors.

The use of pictures was welcomed by volunteers but volunteers found some of the symbols confusing and suggested these be replaced.

A volunteer with a visual impairment was unable to read the font which needed to be larger. We suggested that letters be tailored for those patients with visual impairments who require large print.

6.2 Internet research

Ten out of twelve 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.

The hospital added that they are, “Also in the process of being mapped on Google Streetview so patients can see a 360 degree view of the hospital from outside and into the building. Eventually, all hospital sites will be on Google Streetview and people will be signposted to it from the website.”

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.

For those without internet access, the Trust said, “All letters sent by the Trust include a contact number, which can be used to make general inquiries, including around travelling to the hospital.”

6.3 Navigating the one-way system

Volunteers who had been to the hospital before the introduction of the one-way system commented that the one-way system is an improvement. However, some were confused by faded road markings and suggested these be repainted to improve visibility.

6.3 Parking

Volunteers found that there are insufficient parking spaces for visitors at the hospital. This can lead to congestion around the hospital site.

Volunteers described being confused about where to pay for parking and found the ticket machine instructions were confusing.

6.4 Disabled parking

Volunteers felt it was unclear whether blue badge holders needed to pay for parking.

The Trust confirmed that any Blue Badge Holders that use a car parking space within a car park will pay the normal hourly rate. There are dedicated blue badge spaces outside the entrances to the hospital that are free of charge with a maximum stay of three hours.

One volunteer found the disabled parking bays were not signposted on entry to car park 6. The volunteer drove past these bays, and then found they were unable to reverse to access these as the weight of traffic entering would make this manoeuvre dangerous.

6.5 Car park charges

Volunteers found that car parking charges were not clear and the availability of a weekly/monthly pass was not widely advertised.

Derby Hospitals offer savings on long stay car parking tickets. Patients, relatives and visitors can purchase weekly/monthly car parking tickets, which have an unlimited use, and can be shared between friends and relatives. Banners advertising these should be displayed within the hospital but these had not been seen by the volunteers nor were their availability advertised at the pay stations.

We felt that regular visitors would be financially penalised if they were unaware of these passes and we suggested greater advertising of the availability of these.

Volunteers also commented that parking tariffs were not advertised at the parking payment machines. They said that the fee they needed to pay only became clear upon the presenting of their ticket for payment. They felt that this could mean visitors are unable to calculate in advance what they should expect to pay.

6.6 Car park 6 exit

A volunteer using car park 6 had difficulty finding the car park exit. Although there were signs on the ground, these became lost when the car park was busy.

6.7 Navigation to clinics

Some volunteers found it difficult to cross the road on exiting the car parks.

One volunteer with a visual impairment bumped into a bollard upon leaving car park 6 presumably there to stop access to motorcycles.

6.8 On-site navigation

A volunteer found that navigation to the clinics was made much easier by the assistance of volunteer hospital navigators. Volunteers assisted by these found them to be “very helpful” and a “great service”. They were also found to be proactive in offering assistance and also transporting people in buggies.

6.9 Additional issue

A visually impaired volunteer went to take a seat in the gynaecology department. These were not fixed to the floor or located next to a wall. As such, the volunteer nearly fell backwards when trying to sit. We recommended the seats be repositioned to prevent accidents.

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 grammar/meaning and typographical errors in the appointment letters need to be addressed and rectified.
	Some of the symbols used were found to be unclear and it was suggested that these are replaced.
7.1.2	The format of letters need to be tailored to aid specific needs of patients say with the visual impairments.
7.2	Navigating the one-way system
7.2.1	Consider repainting road markings around the one-way system for clarity to avoid confusion
7.3	Car parking
7.3.1	HWD are aware that the hospital is looking at ways of addressing the constant car parking concerns
7.3.2	The locations of car park ticket machines and instructions on how to pay for car parking are to be made clearer
7.4	Disabled parking
7.4.1	Suggest clearer signposting of disabled parking bays to prevent these being missed by patients requiring disabled parking.
7.5	Car park charges
7.5.1	Parking tariffs should be advertised at all parking payment machines.
7.5.2	Look at prominently advertising the discounts available to long-term car park use.
7.6	Car park 6 exit
7.6.1	Look at clearer signage indicating the location of the exit from car park 6
7.7	Navigation to clinics
7.7.1	Consider increasing the safety of pedestrians navigating around the hospital site

7.7.2	Consider the placement of potential obstructions around the site, especially in respect of the visually impaired
7.8	No recommendations made
7.9	Addition issue
7.9.1	Review the safety of seating within clinics

8. Response from service provider

8.1	Appointment letters
8.1.1	<p>All typographical error and grammatical errors have been addressed.</p> <p>“As well as developing Easy Read letters, the Trust is producing letters in large font (as well as Braille and MP3 audio format, sent via email) when they are requested. Furthermore, if a patient requires letters in Easy Read format with large font text, we can produce this on request. However, it is important to note that not all letters sent by the Trust are sent through Synertec, and only those which are sent through this company will be able to be ‘translated’ into Easy Read, Braille, MP3 audio or large font format.”</p> <p>The availability of such accessible information is widely advertised by Derby Royal Hospital to GP surgeries and at all outpatient areas at the hospital to encourage patient’s to flag their needs and request information in a format to meet these needs.</p> <p>“We agree that the meaning of the symbols identified could be unclear, and have approached the company who produces letters on our behalf for clarification on what they intend to do to change any that. The company are currently seeking a broader range of feedback from a number of organisations before implementing changes.”</p>
8.2	Navigating the one-way system
8.2.1	The hospital provided assurance that road markings are repainted as part of a life cycle so are on a planned program, and have been repainted recently.
8.3	Car parking
8.3.1	The hospital provided assurances that this is a problem that they are aware of, and are tackling in a number of ways. They said, “There are a number of schemes being looked at by the Trust to ease parking congestion, including the construction of an extension to the staff car park, which will ease the use of some of the hospital’s on-site parking which can then be reserved for patient use.”
8.3.2	The hospital confirmed that this would be reviewed at the next strategic parking meeting.

8.4	Disabled parking
8.4.1	The hospital has agreed to look at a solution to identify where the disabled parking spaces are located when these are situated within existing car parks rather than within designated disabled zones.
8.5	Car park charges
8.5.1	“RDH are committed to introducing the advertising of parking tariffs at all parking payment machines including the advertising of car parking discounts such as weekly passes.”
8.5.2	“RDH are committed to prominently advertising the discounts available to long-term car park use introducing of car parking discounts such as weekly passes at all parking payment machines.”
8.6	Car park 6 exit
8.6.1	The hospital has advised that they have looked at this and are going to add additional raised signs as it was agreed that, “The “the floor” gets lost when we are busy.”
8.7	Navigation to clinics
8.7.1	The hospital told us, “We have been looking at this issue and have installed a new zebra crossing in place for the pedestrian entrance by the King’s Treatment Centre to improve safety.
8.7.2	The hospital has advised us that this matter would be reviewed.
8.8	No recommendations made
8.9	Addition issue
8.9.1	The hospital assured us that they will review the opportunities for improving the seating within the gynaecology department to prevent this occurring again.

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 / Not Useful

2) Why do you think this?

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.....
.....

3) Since reading this report:

a) We have already made the following changes:

.....
.....
.....

b) We will be making the following changes:

.....
.....
.....

Your name:

Organisation:

Email:

Tel No:

Please email to: karen@healthwatchderbyshire.co.uk or post to FREEPOST RTEE-RGYU-EUCK, Healthwatch Derbyshire, Suite 14 Riverside Business Centre, Foundry Lane, Milford, Belper, Derbyshire DE56 0RN.