

HS Foundation Trust







Focus on Newcastle Eye Centre

Service user feedback on macular services at Newcastle upon Tyne Hospitals NHS Foundation Trust

Contents

About Healthwatch Newcastle	
Executive summary	
Introduction	
How we did it	3
Results	
Responses	
Key themes from the results	12
Recommendations	13
Acknowledgements	17
Appendix	18
Monitoring information	24
Contact details	25

Author: Healthwatch Newcastle Publication date: November 2017 © Healthwatch Newcastle 2017

About Healthwatch Newcastle

Healthwatch Newcastle is one of 152 local Healthwatch organisations established throughout England on 1 April 2013 under the provisions of the Health and Social Care Act 2012. We have a dual role to champion the rights of users of publicly funded health and social care services for both adults and children, and to hold the system to account for how well it engages with the public.

We collect feedback on services from people of all ages and from all communities. We do this through our network of voluntary and community sector organisations, during events, drop-in sessions and listening events at a range of venues across the city, online through the feedback centre on our website, via social media and from callers to our 'Just ask' helpline. As part of the remit to gather views, we also have the power to 'enter and view' services and conduct announced and unannounced visits

Executive summary

Healthwatch Newcastle gathered the views of service users with age-related macular degeneration (AMD) during April 2017. We worked in collaboration with the Newcastle Eye Centre at the Royal Victoria Infirmary (RVI), which is part of the Newcastle upon Tyne Hospitals NHS Foundation Trust. Our research was carried out across two sites: Newcastle Eye Centre at the RVI and the Trust's clinic at Manor Walks Shopping Centre in Cramlington.

We asked service users about their experiences of their appointment, and the information and support they received before and after their appointment. Ninety-seven service users participated, with an equal split across the two sites.

Overall, feedback was very positive at both sites and comments about staff were particularly favourable. The Manor Walks clinic received universally positive comments from service users. The quality of care at Newcastle Eye Centre was highly regarded, but many people wanted shorter waiting times. Service users also wanted more information about support available to them in the community, locally and in the wider region.

Service users made a number of suggestions about improving their care, resulting in 13 recommendations which the Trust fully supports and is taking forward. The Trust has also identified an additional three actions to improve care based on the feedback received, which can be read in the recommendations section of this report.

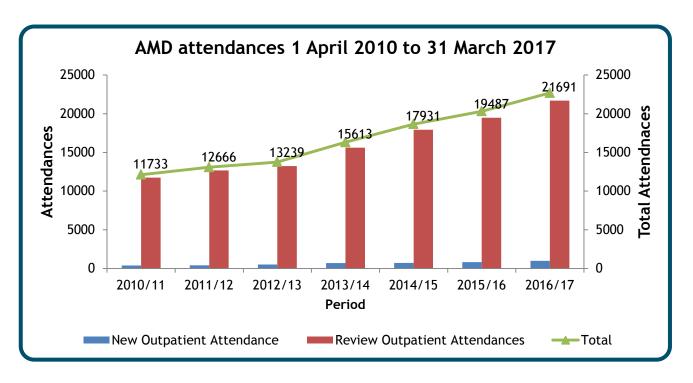
Introduction

During 2016 we received feedback from service users about issues at Newcastle Eye Centre at the RVI. We asked neighbouring local Healthwatch whether they had also received feedback about the centre (this service attracts patients from beyond Newcastle) or heard similar concerns.

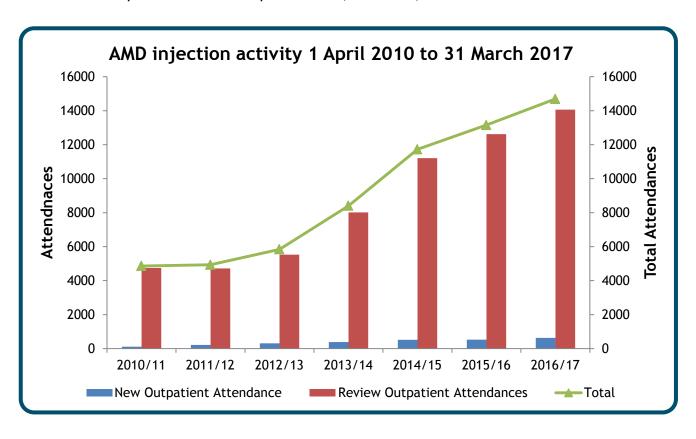
We approached the Newcastle Eye Centre to discuss the initial feedback and the work that we wanted to do. Newcastle upon Tyne Hospitals NHS Foundation Trust saw this as an opportunity to supplement other methods of service user feedback gathered at the Trust and help improve the services it offers.

We worked together with the staff of Newcastle Eye Centre on this project. Our aim was to gather the experiences of people using the centre's macular services at both Newcastle Eye Centre and the clinic at Manor Walks Shopping Centre. We chose to focus on age-related macular degeneration (AMD) services as this is a large and important part of the services offered by Newcastle Eye Centre. It is the service under the most demand and continues to grow rapidly — the number of service users has almost doubled over the past six years from 11,700 to 22,700 per year.

The Trust has found it challenging to expand the service to meet the rapid increase in demand and this work was seen as a good opportunity to seek service users' involvement in order to improve the service. The graph below shows the growth in the number of age-related macular degeneration (AMD) patients at the Trust.



As can be seen in the graph below, the number of AMD patients requiring an injection over the same time period has over tripled from 4,700 to 14,700.



How we did it

We worked with the Trust to develop a short questionnaire (see appendix). The feedback we had received over the previous year was used to develop specific questions; and staff at the Trust chose questions based on issues which they felt were important or were based on previous feedback (quality of care, waiting times and information sharing).

We gathered the views of 97 service users throughout April 2017 (similar numbers of people participated at each site). Healthwatch Newcastle volunteers and staff carried out the questionnaire with service users in the waiting areas at both locations. Service users either completed the questionnaire themselves or were offered help (i.e. were asked the questions and had their responses noted by Healthwatch staff/volunteers). Service users were also offered the use of a private room nearby to complete the questionnaire. Over 90% of questionnaires were completed by Healthwatch volunteers on behalf of service users, and everybody completed the questionnaire in the waiting area.

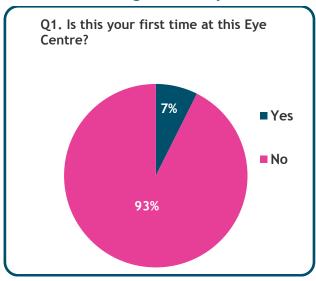
The completed questionnaires were all entered into an online survey tool (SurveyMonkey), and the results analysed. A sample of questionnaires was checked for data entry accuracy and found to be error free. We reviewed the findings with Trust staff and then made recommendations, which were agreed by the Trust.

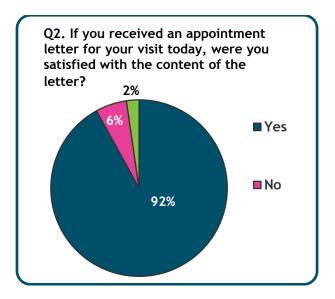
Results

Responses

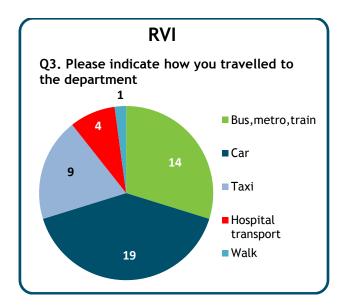
Total questionnaires completed:	97
Total questionnaires completed at the Eye Centre, RVI:	48
Total questionnaires completed at the Manor Walks clinic, Cramlington:	49

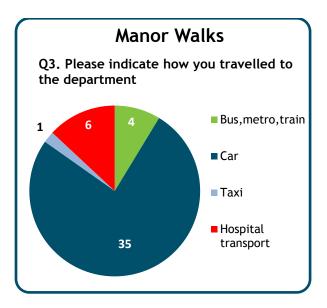
Section 1: Getting to the Eye Centre





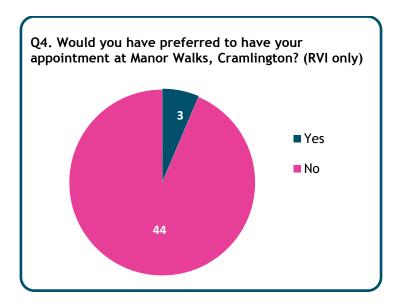
As can be seen from the two charts above, nearly all the AMD respondents were returning patients, with only 7% being first time patients. Nearly all respondents were satisfied with the appointment letters (92%).



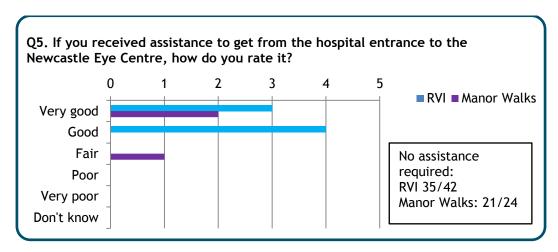


From the two charts above you can see that the way people travelled to the RVI or Manor Walks was very different. The car was the most common mode of transport to both locations but at Manor Walks this accounted for 76%, whereas at the RVI it was 40%. Only four respondents at Manor Walks attended their appointment by bus, whereas at the RVI it was 14. Taxis were common to the RVI, but only one person went to Manor Walks by taxi.

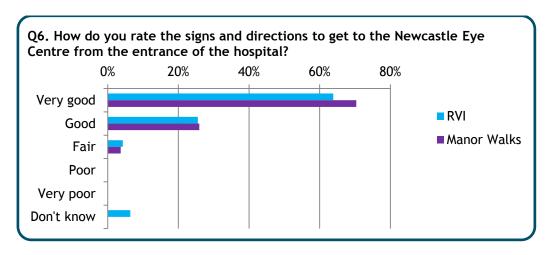
We asked patients at the RVI if they would have preferred to have their appointment at Manor Walks. As Q4 below shows, only three out of the 47 people who responded to this question said 'yes'.



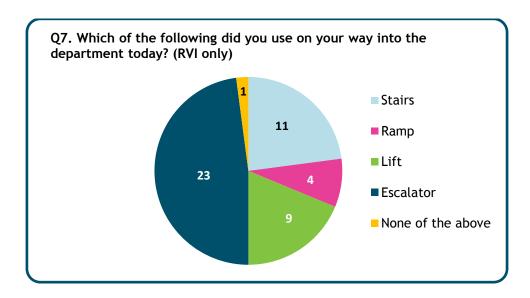
We asked people to rate the help available to get from the entrance of the hospital or clinic to the waiting area. Few people needed assistance but those that did gave positive feedback, as seen in Q5 below.



We also asked how people rated the signs and directions from the eye clinic entrance to the waiting area. Again, we received positive responses with over 90% saying it was 'good' or 'very good'. Similar results were received at both sites.



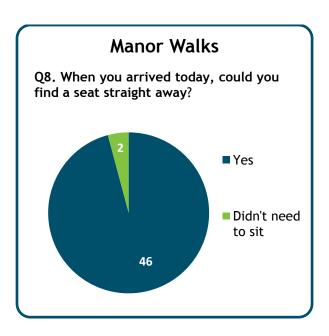
We asked patients at the RVI which route they took to get to the Newcastle Eye Centre, as the Trust was particularly interested in the use of the escalator. We found that almost half of RVI respondents (23/48) used the escalator.



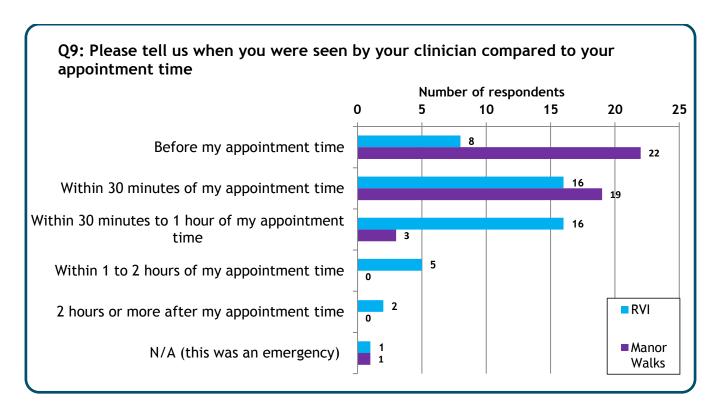
Section 2: Your experience of the Eye Centre

We asked if people were able to find a seat straight away when they attended their appointment. As seen in Q8 below, almost everyone was able to find a seat straight away, with one exception.





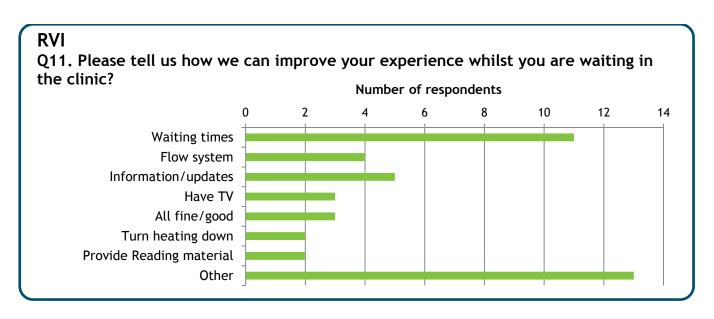
We also asked about the length of time service users had to wait to see their clinician. Overall, waiting times were much longer at the RVI than at Manor Walks. Over 90% (41/45) of service users were seen within 30 minutes of their appointment time at Manor Walks, compared with less than half at the RVI. At Manor Walks, almost half of service users (22/45) were seen before their appointment time which compares with 8/49 (16%) at the RVI. No service user had to wait over an hour at Manor Walks, but seven out of the 48 who answered this question (14%) waited more than an hour at the RVI.



We asked service users for suggestions on how to improve their waiting experience. In the graph below you can see that the most common suggestion was to reduce waiting times. The main themes were:

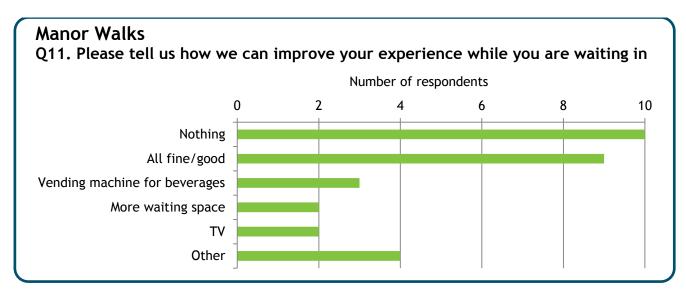
- Waiting times service users wanted to see shorter waiting; the length of waiting time for the injection was particularly mentioned
- Information this was mostly about being kept up to date with delays (suggested use of the electronic board) and setting expectations with first timers
- Flow system there was a suggestion to amalgamate eye drops and photography, and to speed up the wait before injection

If there were two or more suggestions with a similar theme, they feature on the graph below.

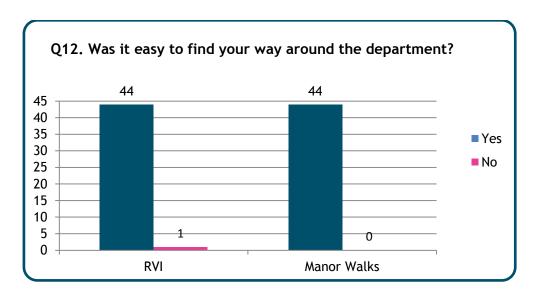


The themes for improving the waiting experience at Manor Walks were very different to the RVI, with the most common answer being 'nothing', followed closely by various compliments about the service. In terms of improvements, the following suggestions were made:

- More waiting space this related to the pre-consultation area
- More disability parking spaces directly outside (there are only two) having to park in other disabled spaces further away was awkward

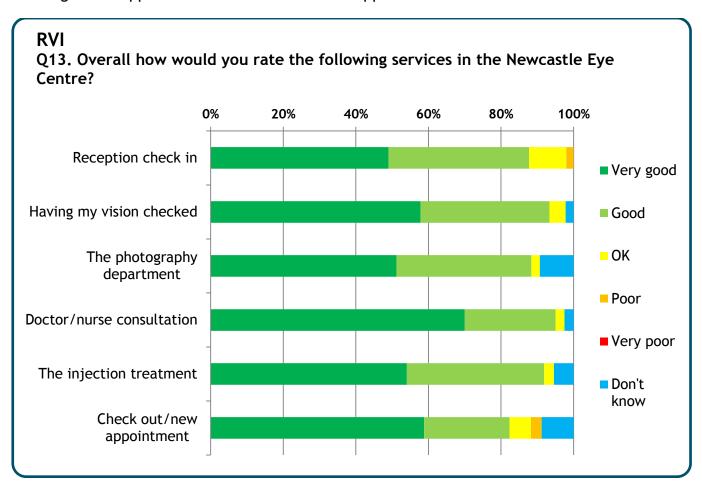


We asked service users if they found it easy to get around the department. As you can see in Q12 below, almost everyone answered this positively, with one exception.

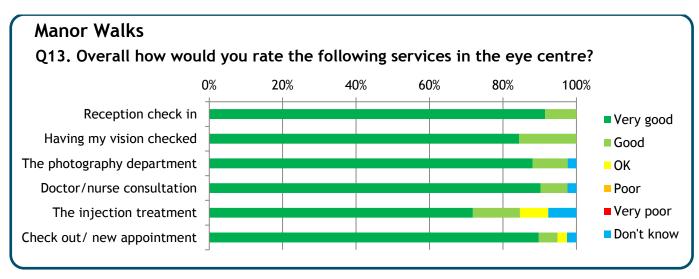


Section 3: Your experience with staff

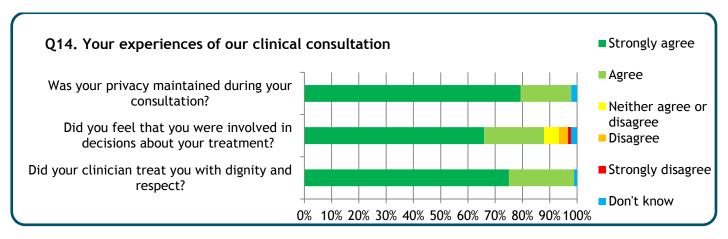
In Q13 we asked people to rate different aspects of their appointment, from check in on arrival, all the way through to check out before departure. As you can see below, feedback was very positive overall at the RVI, with 80% of service users rating every service 'very good' or 'good'. The areas which received the lowest rating were the reception at check in, and booking a new appointment at the end of their appointment.

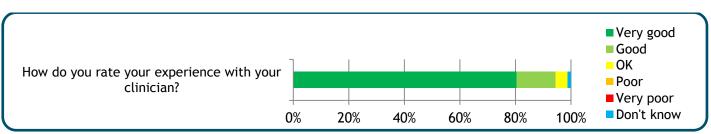


Service users rated the services even more positively at Manor Walks. All but one service (the injection room) was rated 'very good' or good' by 90% of service users. Two services (reception and having their vision checked) saw 100% of service users rating the service 'very good' or 'good'.

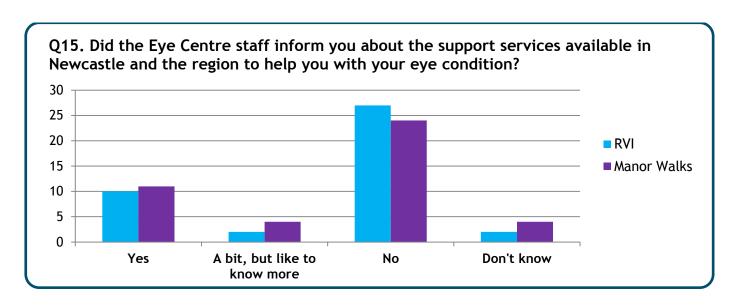


We asked service users for more detail on their views about specific aspects of the consultation including privacy, involvement in decisions about their treatment, dignity and respect. We also asked about the consultation experience overall. You can see from the two graphs below that responses were extremely positive (the results from both sites were combined as they were almost identical). The only category that was noticeably lower related to whether service users were involved in the decisions about their treatment. However, almost 90% of service users still said they 'strong agree' or agree' to feeling involved in decisions about their treatment.



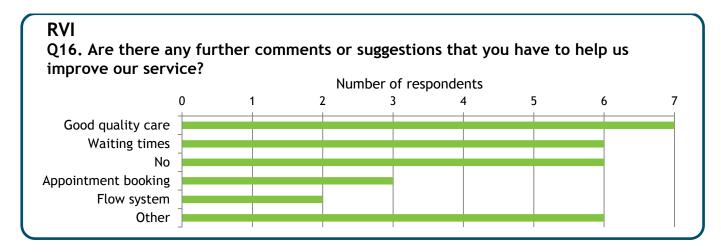


We asked service users if they had been informed about support services available in the community to help with their condition. As you can see from Q15 below, the majority of respondents had not been informed about support services available in the community. It was a similar proportion at both sites, with 53% not being informed at the RVI and 56% at Manor Walks.



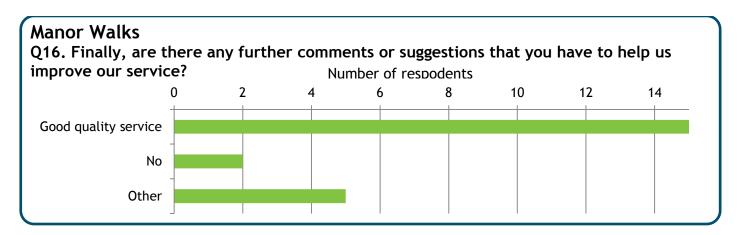
The final question asked service users if they had 'any additional comments to help improve the service'. The main themes at the RVI were:

- Good quality care all comments were positive, including:
 "We are very fortunate to have such an excellent service here in the North East"
 "Seen an improvement in recent years since it's become an 'Eye Centre'"
 - "The waits are often long, but the service is of high quality"
- Waiting times comments were similar to Q11 (people thought the wait was too long)
- Appointment booking comments were about rescheduling



When Manor Walks respondents were asked an open question about improving the service responses included:

- Many compliments about Manor Walks (many service users preferring it to the RVI)
 "The service provided at Manor Walks is excellent. I do not have any suggestions for
 improvement as they deliver the service well as it is. Long may it continue."
 "Found Manor Walks in Cramlington better than the RVI same still but less busy, still
 very relaxed, RVI like a mad house."
 "Very happy to be here rather than the RVI. Treated much better here, you are just a
 number at the RVI."
- One person thought the appointment system at Manor Walks was much better than the RVI
- One person said how much they would appreciate more disabled spaces closer to the clinic (there are only two and they are often full)



Key themes from the results

This sample of service users has shown some useful themes.

- 1. Service users had high satisfaction in the following areas:
 - Appointment letters
 - Assistance received from the entrance to the eye services
 - Signs and directions to the eye services
 - Ability to find a seat straight away
 - Finding their way around the department
 - Staff in general
- 2. Overall, service users were very positive about their experiences at the Manor Walks clinic more than at the RVI.
- 3. Feedback about the services received during clinic visits was almost exclusively positive (there was only one negative response). Manor Walks had a higher overall satisfaction score, with at least two thirds of service users saying all services were 'very good'. At the RVI, the lowest scoring area was check in on arrival and check out before departure. People said there was sometimes a queue when they were checking in, or staff were busy on the phone. One person complained that they found the person organising the queue was rude. Some people told us that they disliked the amended appointment system on check out, where people don't find out the date of their appointment until they receive a letter in the post.
- 4. There was very positive feedback about the consultants, and highly consistent between the different consultants and across both locations. However, when service users were asked if they were involved in decisions about their treatment the response was slightly, but noticeably, lower across all consultants.
- 5. Waiting times at the RVI were overall much longer than at Manor Walks.
- 6. The main suggestions to improve the waiting experience in the RVI included:
 - Reduce the waiting time, especially before the injection
 - Update people on current waiting times (a screen was proposed)
 - Have a TV and reading material
 - Turn the heating down
- 7. Suggestions to improve the waiting experience at Manor Walks included:
 - Increase the size of the waiting area prior to seeing the consultant
 - Provide more disabled car park spaces in the car park near the clinic

- 8. The majority of service users at both the RVI and Manor Walks were not informed about support services provided outside the Trust: only 24% at the RVI and 26% at Manor Walks said they had been provided with information. This response corresponded with feedback we had received which prompted us to carry out this work.
- 9. People liked the appointment system at Manor Walks more than the one at the RVI.
- 10. Survey monitoring information contained a good mixed sample by age, gender, disability and level of visual impairment. However, every service users' ethnicity was white in our sample. Although this was a modest sample size we would have expected a small proportion of respondents from ethnic minority backgrounds. We recommend this should be investigated to make sure there isn't under representation of ethnic minorities.

Recommendations

Based on the feedback from users of age-related macular degeneration (AMD) services at both Newcastle Eye Centre at the RVI and the eye clinic at Manor Walks in Cramlington, we make a number of recommendations. The 13 recommendations have been supported by the Eye Centre management team. Below each of the recommendations is a response from the Eye Centre, outlining its next steps to implement these changes.

At both locations

- 1. Raise awareness of support services available in Newcastle and the wider region to help service users have the best possible quality of life with their eye condition. This could include:
 - a. Where appropriate, all newly diagnosed patients should meet an Eye Clinic Liaison Officer to make sure service users are informed about support services in the community that can help them adapt to their condition
 - b. Specific staff should be responsible for advising service users about support and directing people to information
 - c. Leaflets outlining support services should be provided in the initial appointment letter pack
 - d. Hospital volunteers should be used to inform service users about available services and leaflets

Eye Centre response

- Newcastle Eye Centre will liaise with the Newcastle Society for Blind People (NSBP) and Macular Society to develop a leaflet that has all relevant community support for newly diagnosed patients, based on the perspective/experiences of existing macular patients
- Aim to recruit additional volunteers to provide extra support to clinics

2. Use the positive feedback about Manor Walks in Cramlington as publicity material to encourage service users to have their appointment there and help reduce the pressure at the RVI.

Eye Centre response

Positive feedback to be used in any future promotional materials.

3. Review the ways service users are involved in decisions about their care to see if there are ways that this can be increased.

Eye Centre response

A more detailed patient survey has been developed regarding shared decision making which will be conducted across a range of ophthalmology outpatient clinics.

4. The monitoring information in this small sample had a good spread by sex, age, disability and level of visual impairment. However, every respondent was ethnically white. This may or may not reflect the wider cohort but it raises the question of whether ethnic minority communities are appropriately represented in this service. We recommend that Newcastle Eye Centre check the local ethnic minority demographics by age to see if there is the appropriate representation.

Eye Centre response

What we do know is that Asians (for instance) have long been considered a low risk group for AMD, which is a leading cause of vision loss in older Caucasians. There is theory that may be slowly changing but as it stands the size of the survey sample is not large enough to draw definite conclusions. 100 patient appointments represented in the survey is a very small percentage of the total AMD group of appointments (circa 21,000 annually). So, for the purpose of the report the BAME findings are non-remarkable and further investigation regarding this part of the report could be considered.

5. Share the extremely positive staff feedback with the clinic staff

Eye Centre response

Findings have been shared with staff and disseminated to heads of department.

Newcastle Eye Centre, Royal Victoria Infirmary

6. Continue to find solutions to reduce the waiting time, in particular the wait before the injection, at Newcastle Eye Centre at the RVI.

Eye Centre response

More disciplines of staff are now trained and administering injection treatments, this allows the macular service to be more flexible in its approach to managing demand at busy times. In September 2017, Medical Retina Practitioner hours have been increased to provide additional resource into the clinics and injection rooms.

7. Look for ways to inform service users of the waiting times when they arrive for their appointment. This could include via a member of staff and/or the use of boards/screens.

Eye Centre response

Department to introduce white boards displaying clinic and treatment waiting times. A gold standard has been introduced to ensure that a Health Care Assistant supports and coordinates the flow of patients through the injection treatment rooms.

8. Look for solutions to reduce the queueing at check in at the beginning of morning clinics.

Eye Centre response

Trial checking patients in at clinics A, B and C as opposed the main desk. This is dependent on an IT solution to ensure the correct clinician name information is displayed on appointment letters — see recommendation A below.

9. Reduce the temperature in the department, with priority given to the injection room.

Eye Centre response

New air handling units installed in the department.

10. Continue to increase the proportion of patients who receive an appointment letter for their follow up appointment before they leave. Review what staff say when they are unable to book their next appointment straight away to reduce the anxiety that this causes for some people.

Eye Centre response

- An electronic request queue for patients leaving the department with no appointment (due to full clinics) has been introduced; this will give patients (and staff) additional reassurance that the next appointment will be sent out in a timely fashion
- Telephone details issued to patients at checkout as a reminder to ring the department if no appointment has arrived within 2 weeks

Manor Walk clinic, Cramlington

11. Ask the management of the shopping centre to increase the number of disabled parking spaces outside the nearest entrance to the clinic.

Eye Centre response

This feedback has been escalated to the relevant Trust representative to take forward.

12. Increase the seating capacity in the waiting area before seeing the consultant.

Eye Centre response

At this time this recommendation is unable to be progressed. However staff are aware that any seating issues within the waiting room should be escalated to the Senior Nurse on duty.

13. Install a hot drink vending machine in the clinic, recognising people are anxious about having to leave the clinic to get refreshments once they have arrived in case they miss their appointment.

Eye Centre response

This feedback has been escalated to the relevant Trust representative to take forward.

In addition Newcastle Eye Centre will undertake the following additional work based on the feedback from this survey:

Recommendation A

Newcastle Eye Centre is looking at appointment letters and the clarity of information contained in these. For example the correct doctor's name, expectations around waiting times, careful use of the escalator, driving instructions after the administration of eye drops and clarity of directions into the Newcastle Eye Centre.

Recommendation B

Newcastle Eye Centre is currently developing a patient passport which will allow ownership of a patient's treatment regime. This will also support Recommendation 3 regarding greater communication, involvement and transparency of a shared decision making process.

Recommendation C

Reading materials (magazines) have been agreed by the infection control team and these will now be purchased for the waiting areas.

Acknowledgements

We would like to thank the following Healthwatch Newcastle volunteers for their invaluable help to make this work possible:

- Cath Smart
- Hazel Hyland
- Linda Woodcock
- Violet Rook

We would also like to thank the staff of Newcastle Eye Centre for their support with this work. In particular, we would like to thank Anya Connor and Julie Graham who made this a successful collaboration between Healthwatch Newcastle and Newcastle Eye Centre.

EYE CENTRE PATIENT FEEDBACK QUESTIONNAIRE

Thank you very much for giving your time to provide us with your valuable feedback. It is greatly appreciated! What you say will help us improve the service at the Newcastle Eye Centre.

This Questionnaire is completely anonymous and asks about your experience of the Eye Outpatients Department at the Newcastle Eye Centre, RVI, or the eye clinic at Manor Walks shopping centre in Cramlington.

Please answer questions where possible by placing an "X" in the box like this:⊠

If you want to change an answer then please completely fill in the box you want to discard, and place a new "X" in the box you want to answer.

A public report will be made about the information collected using these questionnaires and will be available from Healthwatch Newcastle website and the Newcastle Eye Centre

SECTION 1: GETTING TO THE EYE CENTRE

Q1. Is this your first time to this Eye Centre?
☐ Yes ☐ No ☐ Don't know
Q2. If you received an appointment letter for your visit today, were you satisfied with the content of the letter?
□ Yes □ No
If no please tell us how we can improve the letter (tick as many boxes as are appropriate)
 □ More information how to get to the Eye Centre □ More information what happens during the appointment □ More information about how much time you can expect to be at the appointment □ Otherplease state

Q3. PI	ease indicate how you travelled to the department:
	by Bus, Metro or train by taxi by car by hospital arranged transport other (please specify):
	ould you have preferred to have your appointment at Cramlington (Manor Walks bing centre), if that was a possibility? (RVI only)
	Yes No
	you received assistance to get from the hospital entrance to the Newcastle Eye e, how do you rate it?
	Very good Good Fair Poor Very Poor Don't know I did not need any assistance
	ow do you rate the signs and directions to get to the Eye Centre from the entrance hospital?
	Very good Good Fair Poor Very Poor Don't know
Q7. W only)	hich of the following did you use on your way into the department today? (RVI
	Stairs Ramp Lift Escalator None of the above Don't know

SECTION 2: YOUR EXPERIENCE OF THE EYE CENTRE

Q8. When you arrived today, could you find a seat straight away?				
☐ Yes ☐ No ☐ Didn't need to sit				
Q9. Please tell us when you were seen by your clinician compared to your appointment time:				
 □ before my appointment time □ Within 30 minutes of my appointment time □ Within 30 minutes to 1 hour of my appointment time □ Within 1 to 2 hours of my appointment time □ 2 hours or more after my appointment time □ N/A (this was an emergency) 				
Q11. Please tell us how we can improve your experience whilst you are waiting in the clinic?				
Q12. Was it easy to find your way around the department?				
□ Yes □ No				
How could we make it easier?				

SECTION 3: YOUR EXPERIENCE WITH OUR STAFF

Q13. Overall how do you rate the following services in the Eye Centre (Please tick one box from each row)

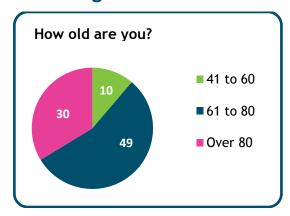
		Very good	Good	OK	Poor	- 7	on't now
Reception-check-in Having my vision checked The photography department Doctor/nurse consultation The injection treatment Check-out/new appointment			_ _ _ _				
If you HAVEN'T why below.	If you HAVEN'T rated any of the above services as 'good' or 'very good', please explain why below.						
 We are especially keen to know about: How our staff has communicated with you? If they have shared all the information you need? If they have been caring and supportive? If sensitive information has been shared in private? 							
Q14A. How do yo	ou rate your	experience wit	h your clini	cian?			
Very good □	Good □	oK □	Poor □	Very po □	or	Don't know □	
Q14B. Did your	Q14B. Did your clinician treat you with dignity and respect?						
Strongly agree	agree	Neither agree or disagree	disagree		trongly sagree	Don't knov	V
				Ε	3		
14C. Did you feel that you were involved in decisions about your treatment?							
Strongly agree	agree	Neither agree or disagree	disagree		trongly sagree	Don't knov	V
				[]		
14D. Was your privacy maintained during your consultation?							
Strongly agree	agree	Neither agree or disagree	disagree		trongly sagree	Don't knov	V

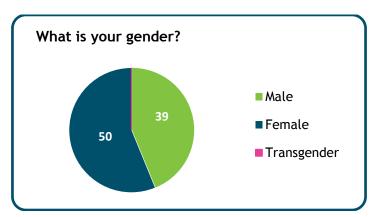
Newca	Q15. Did the Eye Centre staff inform you about the support services available in Newcastle and the region to help you with your eye condition?					
	 ☐ A bit, but would have liked to know more ☐ No 					
If 'yes	or 'a bit', \	which servic	es were you in	formed about?		
	Finally, are to ve our serv		rther comments	s or suggestior	ns that you have	to help us
	oring Inforn					
A. Hov	w old are yo	ou?				
	Under 21 21 to 40					
_	41 to 60					
	61 to 80 Over 80					
	I prefer no	t to say				
B. What is your gender?						
	Male Female					
	Transgend	ler				
C. Do	you consid	er yourself o	disabled?			
	Yes					
	No					
D. If you considered yourself to have a visual impairment, how would you describe it today?						
	•	r taking into	account any vi	ision aids you v	were using at th	e time):
	I prefer no	•	elf to have a vis	sual impairmon	4	
	Very Mino	•	en to nave a vis	suai iiiipaii iiieii	·	
	Minor Moderate					
	Severe					

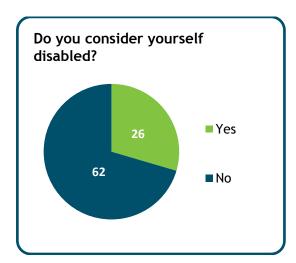
E. What is your ethnicity?					
White √		Asian or Asian British ✓			
British		Indian			
Irish		Pakistani			
Gypsy or Irish Traveller		Bangladeshi			
Any other White background		Chinese			
		Any other Asian background			
Mixed ✓		Black or Black British ✓	'		
White and Black Caribbean		Caribbean			
White and Black African		African			
White and Asian		Any other Black background			
Any other mixed background					
Other ethnic groups ✓					
Arab		Any other ethnic group (please say))		

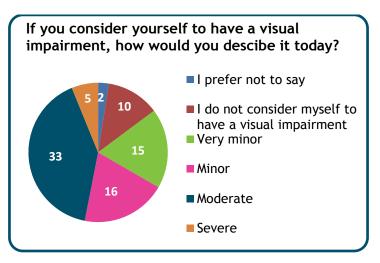
END OF QUESTIONNAIRE

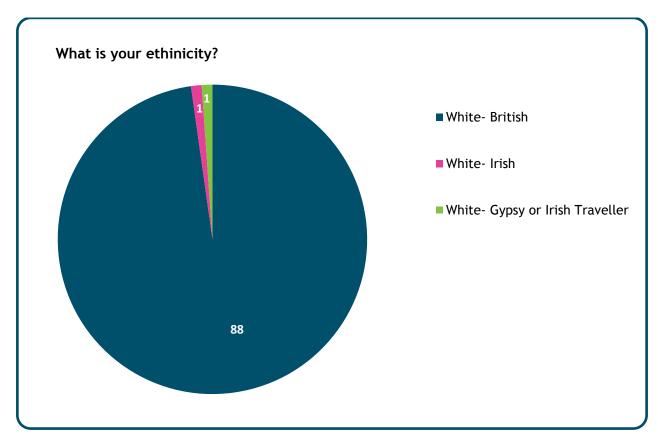
Monitoring information











Contact details



Healthwatch Newcastle, Broadacre House, Market Street, Newcastle upon Tyne, NE1



0191 338 5720



07551 052 751



info@healthwatchnewcastle.org.uk



www.healthwatchnewcastle.org.uk



@HWNewcastle



HWNewcastle



Healthwatchnewcastle



HWNewcastle



If you require this report in a different format please call Freephone 0808 178 9282



Healthwatch Newcastle is part of Tell Us North CIC, company no. 10394966. We use the Healthwatch trademark (which includes the logo and the Healthwatch brand) when carrying out our activities. The Healthwatch logo is a registered trademark and is protected under trademark law