



Healthwatch Kent - August 2018

If you had a sight impairment, how easy would it be to attend a hospital appointment in West Kent?



Foreword

Attending a hospital appointment can be daunting. If you struggle to read, hear, understand or communicate these worries can be extreme. We regularly hear from patients who have major concerns before attending an appointment. They are worried that they might not find their appointment, or that they won't be able to read and understand the information or that they won't be able to communicate with the Doctor and make themselves understood.

Since August 2016, all NHS organisations (and local authorities) must make it possible for anybody and everybody to be able to communicate and to be understood. This is called the Accessible Information Standard and it is a legal requirement. You can find more information about the Standard and what it involves here **www.england.nhs.uk/ourwork/accessibleinfo**

In Kent we know that organisations have been working to ensure they meet the Standard and that every patient can access information. We published a report earlier this year summarising what each organisation told us they were doing. You can read the report on our website.

We wanted to test these assumptions for ourselves and understand how a patient with a sight impairment would access an appointment at Maidstone Hospital. We worked in partnership with Kent Association for the Blind to visit Maidstone Hospital and see for ourselves what is in place to support someone who is partially sighted. On this occasion we visited the main reception and Outpatients and we have made several recommendations for Maidstone and Tunbridge Wells Hospitals Trust.

We have already met with them to share our findings and discuss our recommendations. We also shared our feedback directly with staff on the day of our visits. We will continue to work with the hospitals to ensure they improve their support for patients.

Do tell us your thoughts and share your own experiences with us. Contact us anytime for free on **0808 801 0102** or email **info@healthwatchkent.co.uk**

Steve Inett

Chief Executive, Healthwatch Kent



What were we trying to achieve

We wanted to see for ourselves how a partially sighted patient would experience an NHS Hospital appointment.





What did we find? What did we see?

In Summary

- The staff we spoke to generally knew how to assist patients who may have additional communication needs
- There were posters situated in most reception areas stating that assistance was available for people with additional communication needs, but they were too small for our partially sighted volunteers to read.
- Not all information available was suitable for people with a sight impairment.
- The Trust has produced a communication booklet for staff to use when supporting a patient. Most of the receptionists we spoke to knew about the booklet apart from pharmacy who were not aware of it at all.

- Only two of the receptions we visited were able to show us a copy of the communication booklet. The remainder were unsure of where the booklet was, although one receptionist noted that they could view it online.
- We found that although the need for an interpreter may be flagged on a patients' notes, often patients find there is no interpreter available for their appointment.
- The buttons on the lifts were so small that our volunteers couldn't use them meaning that they always had to take the stairs.
- The maps and signs around the hospital were very difficult to read for our volunteers.



What did we find? What did we see? Continued

What have we recommended?

Healthwatch Kent & Kent Association for the Blind have identified the following areas to be addressed:

- All staff, especially reception staff should receive A text phone number should be provided mandatory training around the Accessible Information Standard and practically how to support patients with additional needs.
- Communication aids must be provided for all patients who have a sight or hearing impairment and staff should know how to use them.
- The Trust should conduct an audit of its Accessible Information Standard across both Hospitals to ensure it is compliant with its legal responsibilities.
- Information on patient letters should be reviewed and colour coding explored, to help patients find their way to their appointment.

- on the main website with the other phone numbers that are shown.
- Patients should be encouraged to ask reception for support if they need it, especially if they are attending an appointment on their own.
- An audit of posters and banners within the hospital should be completed to ensure more are of an appropriate size. Currently many posters are printed on an A4 sheet, these are not always accessible to people with a sight impairment, they need to be much larger. We appreciate that not every piece of information will be accessible, but we would like to see an improvement

Issues relating to signage

- Signage from the bus stops to the main reception entrance at Maidstone hospital should be improved to ensure it meets the needs of partially sighted patients
- Posters should be in place to inform patients about fire evacuation procedures in Easy Read formats.

We will be reviewing these recommendations with the Trust and will publish an Impact report in six months detailing the progress.



Our findings in more detail

Main reception and outpatient clinic receptions

We visited Clinic's 1 and 2 on the ground floor where we introduced ourselves to the staff, who were polite and helpful. We asked if they had a copy of the communication book and they told us that they knew there was one but didn't know where to locate it. We also asked if they had received any training. They told us that there was online training that they could do. We asked how they would identify anyone that appears to need some additional assistance. They told us that they can usually tell when a patient needs assistance, which they offer and assist someone to the waiting area of the clinic if needs be.

In main reception we asked the receptionist if she knew about the communications booklet. She had seen it but was unaware of where it was currently. There was a hearing loop sign, so we asked if we could test it. The receptionist hadn't been shown how to operate it and no one had asked to use it. The receptionist was very apologetic and as we walked past a little later she told us that she had found out how to use the loop and our volunteer confirmed that it was working.

In the ear, nose and throat clinic reception we could not see the communication poster that we had seen in other areas, and the member of staff wasn't sure if they had seen the communication book. They were polite and helpful and said

that if a patient appeared to need support or assistance, they would willingly give it. On our first visit to the ear, nose and throat reception area, the white board with black writing, which gave clinic details could not be read by our partially sighted volunteer. On our second visit the white board had red writing, and again could not be read. The reception displayed the communication poster, but it was too small for our volunteer to read and positioned too high on the wall. The hearing loop we were told was on continuously, but our volunteer could not hear via the loop, so it may not have been working properly. One of our party noted that when a consultant comes out to call a patient to their appointment they call their name, this could mean that the person may miss their appointment if they had a hearing impairment.

In the diabetic reception area, the hearing loop worked and there was a hearing loop sign offering the service. The staff also produced the communications booklet that we asked to see but noted that they had not referred to it before.

In the pharmacy we were told that there was no facility to print medication information in large print. When we asked to see the communication book, we were told that they didn't have one. There was also no communication poster in sight and there was no hearing loop.



Our findings in more detail Continued

In the stroke unit there was no communication poster, but a member of staff showed us the communication booklet. There was a portable hearing loop available. Our volunteer was impressed with the magnetic signs that could be put on a patient's bed noting: nil by mouth, swallowing difficulty, hearing impaired, assistance required etc.

In the Oncology reception the hearing loop worked, the additional communication needs poster was visible, and staff told us that they could get a copy of the communications booklet online. The staff told us that any additional communication needs

would be flagged on a patient's records.

In A & E reception the additional communication needs poster was on display and the hearing loop worked. Our volunteer asked what would happen if a patient came in with a guide dog. The staff told us that they would be welcome and did not see it as being an issue.

In the ophthalmology department the hearing loop was not working, which was rather disappointing, given that they deal with sight loss patients. There were also no communication posters visible.





Our findings in more detail Continued

Information for staff

- We asked the Deputy Chief Nurse about information for patients that had additional communication needs. She explained that the needs would be added to their 'all-scripts' computer system. Staff do this by clicking on a yellow caution triangle and enter any additional information needs, previous infection history and so on. The Trust is currently looking into a way of making the triangle more obvious, so that staff must click on it before they can go any further on the system. It can currently be bypassed.
- We asked if reception staff had received training on the Accessible Information Standard. She informed us that there had been no 'bespoke' training as such. But they are currently looking to identify 'champions' in each department that would have responsibility for passing on information to other members of staff. We also asked if there were any 'meet and greet' volunteers. She explained that the day of our visit, there weren't as many volunteers as usual due to holidays.
- We asked if all receptions had a communication booklet that could be used by the staff to assist patients that had additional communication needs. We were told that all receptions had been provided with the communications booklet. She explained that there is also a page on the staff intranet site relating to the Accessible Information Standard, and there is a link to go to the resource page.



Our findings in more detail Continued

Additional Needs

- There were few visible leaflets in Main reception and a small A4 sign on the desk asking people 'Do you need support to Communicate?' with a series of symbols underneath - identifying easy read, braille, etc.
- The same poster was displayed behind a glass cabinet opposite main reception, but this was partially covered by another poster. There were also two copies that we saw in the restaurant.
- Infection prevention points are in red text on a white background, which meant our volunteer couldn't read it.
- Leaflets in different formats could be requested from reception points we were told.
 But they would need to be requested before an appointment to ensure that they were printed in a timely manner.
- During our visit although we saw fire exit stickers on external facing doors, we did not come across any evacuation plans on the walls.
- The Dementia sign in the green zone could not be read as it has a yellow background and red writing. The text was also too small.
- Posters that have coloured text on different backgrounds is hard to read for this group of people.





Our findings in more detail Continued

Website

We asked our volunteers to review the Hospital website to understand how a partially sighted patients would find it. The volunteer found that although the website was 'okay' some enhancements would be beneficial such as the colour contrast to help them read the pages. Currently this is not as good as it could be for someone with a sight impairment. There was

no speaker available so that information could be read out to the user, however, the volunteer noted that the majority of sight impaired users would have a built-in capacity within their own computer to read the information out. Although there were phone numbers on the website there was not a text phone number offered.

Appointments

Very often appointments are scheduled for 9 to 9.30am. This can be a difficult time for many patients including a partially sighted patient who is reliant on public transport. Would it be possible to flag on a patients' records that they need an appointment after 11am, so that they didn't have to keep calling to change their appointment?

Overall our volunteer found that there was a lot of help available, but patients need to be made aware of what is available to them during an appointment. The main receptionist told us that if a patient came in alone they would be able to organise a porter to show them to their appointment, if no volunteer greeters were available. All the staff we spoke to were very

helpful, even when we appeared a little lost, there was always a member of staff that asked us if they could help.

Some patients receive appointment reminders by phone and they must 'push 1' or type in their date of birth. Unfortunately, some people are unable to do this in time, so they do not know if the appointment will go ahead.



Our findings in more detail Continued

Estates-Directions

- We found that parking can be a fair distance from the actual hospital for someone with a sight impairment.
- There were plans of the hospital in most corridors, showing where you were and how to get to which department, although our volunteer was unable to read these. Our partially sighted volunteer felt embarrassed trying to look at them too closely. The use of coloured zones was useful, but he could only read the signs about which zone he was in from the signs suspended from the ceiling. Our second volunteer couldn't read the signs suspended from the ceiling due to tunnel vision, noting that eye level signs would be easier.
- Signage identifying the toilets and cafes and restaurant were clear.
- The floor plan maps dotted around the corridors and reception to aid navigation of the hospital were too busy with too much information included.
- We walked up to the main bus stops at the hospital, but there
 was no signage or markings to show which way to go to get to the
 main entrance.
- The lifts were totally inaccessible due to the buttons being very small with no markings to distinguish what they were for. Also, the lifts we visited all had different internal buttons.



Response from Maidstone & Tunbridge Wells NHS Trust

Maidstone and Tunbridge Wells welcomes the opportunity to work in collaboration with Healthwatch as we work towards achieving compliance against the Accessible Information Standard. We value the insight and feedback that has been gained through this process and are already working on actions to make changes in line with the recommendations. In addition, we are looking forward to inviting Healthwatch to our Trust's December Board to present on the patients experience agenda.





Healthwatch Kent

Healthwatch Kent is the independent voice for local people in Kent.

We gather and represent people's views about any health and social care service in Kent.

Our role is to understand what matters most to people and to use that information to influence providers and commissioners to change the way services are designed and developed.

Our FREE Information and Signposting service can help you navigate Kent's complicated health and social care system to ensure you can find and access the services that are available for you. Call us on 0808 801 0102 or email info@ healthwatchkent.co.uk



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Face to Face:

Call 0808 801 01 02 to arrange a visit



By Text: Text us on **07525 861 639**. By texting 'NEED BSL', Healthwatch's British Sign Language interpreter will make contact and arrange a time to meet face to face.