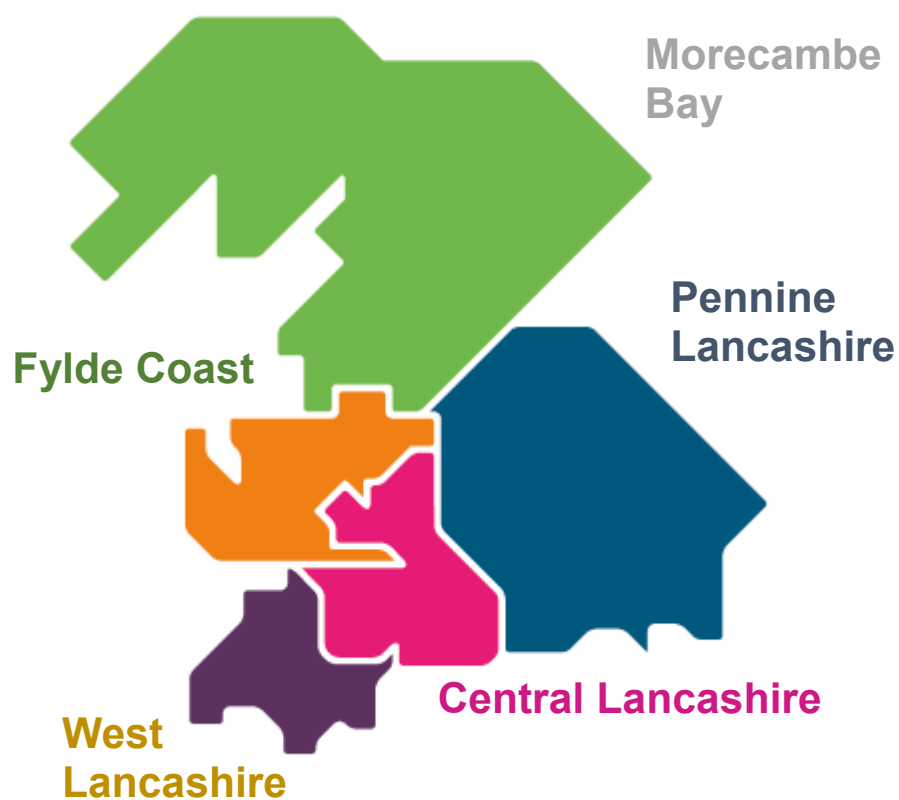


# **Lancashire & South Cumbria Vascular Services Programme Patient Engagement Spring 2019**



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## Executive summary

The Lancashire and South Cumbria Vascular Services Programme is an established improvement programme tasked with increasing the efficiencies and the quality of care and to improve patients' experiences and outcomes within vascular services.

To inform this work a round of engagement activity took place between February and May 2019. The purpose of this engagement was to better understand the services' strengths and weaknesses from the patients' perspectives. This report outlines the methodology used for this recent engagement activity and presents the findings.

The insight obtained demonstrated that the respondents appreciated the vascular services' workforce, receiving prompt treatment, being kept appropriately informed and continuity of care. There was also positive feedback for the "hot clinic" arrangement and having specialist vascular wards.

Areas for improvement were also identified, for example, where possible to receive treatment locally, consideration of other health problems and reduction of waiting times in outpatient clinics. Cost of car parking was also an issue and some suggestions for improving communication were also received.

To support the activity of evaluating the possible options for service delivery against criteria relating to patient experience, the specific items that result in positive patient experience have been collated.

The aims of the engagement were met in terms of obtaining the views of people who use vascular services in Lancashire and South Cumbria and those that support them to inform this programme of work.

The responses relating to the Equality and Inclusion monitoring questions indicate that more engagement needs to be carried out to obtain the views from people of ethnicities other than White British.

This report will be shared with the support groups that have taken part in the engagement and will be published in the soon to be published Vascular section of the [Healthier Lancashire and South Cumbria](#) website.

## 1. Introduction

The Lancashire and South Cumbria Vascular Services Programme is an established improvement programme tasked with increasing the efficiencies and the quality of care and to improve patients' experiences and outcomes within vascular services.

To inform this work a round of engagement activity took place between February and May 2019. The purpose of this engagement is to better understand the services' strengths and weaknesses from the patients' perspectives.

The views of patients and their families will support the programme of work by providing a resource that sets out what good patient experience in vascular services looks like. This resource will be used during the exercise to evaluate the possible options for service delivery against criteria relating to patient experience. Geographical information was not requested from participants as the purpose of the engagement was to find out what is most important to patients and their families when receiving care and treatment and what they think works well or could be improved, the purpose is not to compare Provider Trusts.

This report outlines the methodology used for this recent engagement activity and presents the findings.

## 2. Methodology

An on-line survey was created to capture the views of patients and their families and carers. The link to this survey was shared with the Healthwatch and carers' support organisations and the Voluntary Community and Faith Sector (VCFS) network in Lancashire and South Cumbria, the [Amputation Foundation](#), [Heartbeat](#) and the [Lancashire BME Network](#).

Despite some confirmed promotion of the survey the response rate to the on-line survey was negligible. To increase the response rate, visits to gym sessions at [Heartbeat](#) and the hospitals' vascular services were arranged to obtain patient insight by carrying out the survey face to face. The timetable for the engagement visits is shown in Appendix 1 (page 11).

It was explained to respondents that the vascular services' workforce were working on options to improve the delivery of the services and the purpose of the survey was to obtain patient insight to support this work to ensure that the strengths of the services are identified and retained and any areas for improvement can be considered as part of the overall improvement work.

There was also a question requesting people's contact details if they would like to be involved or receive further information about the programme of work.

### 3. Findings from the Vascular services patient experience survey

A total of 93 surveys were completed and the findings are as follows.

#### 3.1 In which year (approximately) did you use this service?

If a participant had used vascular services over a number of years, they were asked to choose the most recent year in which they had used the services. As the majority of the surveys were completed in hospital settings, the majority of the respondents were current users of the services, with 80 of the respondents using the service in 2019 and 13 of the respondents last using the service in 2018.

#### 3.2 What works well in vascular services?

Responses to this question were very complimentary about vascular services in general, and made many positive references to **the workforce**:

*“The relationship between staff and patients is fantastic. Every member of staff tries their best and make you feel like family.”*

*“The attention from all members of staff and every point of contact has been good.”*

*“Nurse are every hard working and do all that they can. The surgeons have done a good job. They checked up on me and I have been kept well informed of my treatment by different surgeons.”*

*“The secretaries are helpful and brought my appointment forward due to need. They are very good, they listen, understand and take correct action.”*

*“The issue was a blockage in my leg, and I was worried about having the procedure. The staff really reassured me which helped me go ahead with the procedure.”*

*“About ten years ago I felt fobbed off...just take these tablets...then I saw this Consultant who has been very helpful and is resolving the problem, it is like winning the lottery what he has done for me.”*

Other aspects of vascular services that respondents thought worked well were **receiving prompt treatment** regardless of the referral route in, and **being informed**:

*“I was referred by the GP and it only took a week to get an appointment at the vascular hot clinic.”*

*“I initially visited out of hours for what I thought was an ulcer. An emergency appointment requested on the Friday and was booked in by the Monday.”*

*“The speed from being referred by the podiatrist in the diabetic foot team to having the procedure in five days was good. There is a fast track system in place. I appreciated this.”*

*“The speed of sorting things out. I had surgery in the morning, further surgery was needed that day, which also failed resulting in further surgery a week or so later.”*

*“Consultant from another service made the referral. Quick response.”*

*“Consultants spend time with you and inform you and help you make a decision.”*

*“Good explanation. Opportunity to ask questions.”*

*“There is time to ask questions and the explanations have been good. Never felt left alone or out of it.”*

**Continuity of care** was identified as a positive by patients using vascular services:

*"I attend the vascular nurse clinic. I see the same person every time so I don't have to keep explaining and that same person can better understand my condition and situation. In contrast with the District Nurses where I see a different person every time."*

*"At the leg clinic, you always see someone different and go through the same explanation as to why you're attending the clinic. When I attend the vascular clinic, I see an improvement."*

*"Been using the services for years. Seeing the same specialist works well - they know your history. Don't have to repeat myself."*

*"Appreciated the 1-2-1 service."*

Respondents appreciated the **"hot clinic" arrangement** where all the necessary tests are carried out on the same day and the patient is provided with the results of these and supporting information before they leave:

*"It's good to have all the tests done on the same day, in the same place as opposed to having to attend different places on different days. It's a lot more convenient and you get the results and information on the same day."*

*"The full day hot clinic was really good. All tests are carried out in one day, visited all the relevant departments and at the end of the day I knew the conclusion and what the situation was. Excellent system. The doctors and nurses also seemed to enjoy it themselves, pulling all the results together in collaboration. Good system. This was better than attending separate appointments, which was my experience when I was living in another area and received care there."*

Two respondents specifically mentioned the benefits of being treated on a **vascular ward** as opposed to a general ward:

*"Staff training and their fantastic attitude, regular communication and updates so I know what is happening. The actual care - perfect, second to none - when unwrapping bandages, the area was covered in tissue paper until the doctor was ready to see (this didn't happen on another ward - maybe because it is not a vascular ward?"*

*"The vascular ward was so positively different. I was given assistance to wash and dress myself."*

Respondents also referenced the **positive outcomes** they had experienced:

*"Treatment has gone to plan. The surgeons have been great, everybody has. I would have no qualms in coming back."*

*"The feedback from the MDT was that [the proposed treatment] was too risky so instead it was advisable to manage as I am and receive some lifestyle advice."*

*"The service saved my leg."*

*"The two bypasses have resolved the pain from claudication and my walking problem so I am pleased with that."*

*"I had concerns due to an experience years ago, but this time it has been completely different. the procedure was done differently. I was seen quickly, everybody has been lovely, really good with me during procedure, sat talking with me throughout procedure. The whole experience from arriving at hospital to leaving was only two hours. I would never worry if I had to have this done again."*

### **3.3. Is there anything that could work better in vascular services?**

#### **To receive treatment locally**

Respondents had a desire to have shorter travel distances for appointments and treatment, and where possible to be seen closer to home at a local hospital.

*"If there was treatment available more locally that would be better. I am attending today to have compression bandages changed and will be enquiring whether this can be accessed more locally."*

*"I had to go to a hospital further away for a procedure to insert "balloons" in my legs. Car parking is an issue, it's a long way for a relative to drop off and then return later to collect. This procedure has been done at my local hospital in the past."*

*"Clinic at my local hospital is more convenient, had investigations at my local hospital but had to attend a different one for results - this causes trauma - it is hard work to arrange transport and there is a distance to get from the car park to the clinic."*

*"Why could the pre-op not have been done more locally?"*

*"Early into the experience I had to attend a hospital further away for consultation which was a struggle, but this has not happened since."*

*"Having to go to a hospital further away for surgery - there is nowhere nearer. It's a bit daunting and two hours travel for visitors."*

*"Having to be at a hospital further away for 7.30am to have surgery. I couldn't drive due to undergoing surgery, my relative doesn't drive and there was nobody who could take us, so we had to stay in a hotel the night before. I was advised on arrival by numerous team members that a bed wasn't available, and the surgery may not be going ahead."*

*"Location for the day case procedure would have been better at my local hospital, but I guess the location is due to the availability of beds/theatres etc."*

*"Treatment/consultation at local hospital wherever possible as this is most convenient as transport can be problematic."*

#### **Responsive access to treatment**

Two respondents raised issues around having better systems in place to access vascular services more flexibly:

*"People with vascular issues have no direct route into the hospital at times when a clot may have re-occurred. On the surface it looks as if the vascular lab is the route, but this does not always offer the solution and out of hours a visit to A and E is always a terrible experience. Often, we are only told "make an appointment with your consultant, we cannot help" after up to 10 hours wait."*

*"Following operations, I had a planned follow up appointment booked, but due to other health issues, I tried to bring the appointment forward but was told by the consultant's secretary this was not possible. I had to go through the whole system by going back to see the GP to be referred."*

#### **Outpatient Clinic delays and the cost of car parking**

Respondents recognised the demand on services and understood some delays in out-patient clinics were necessary and unavoidable but felt waiting times could be improved. It was suggested longer appointment times should be assigned to help reduce delays in clinics as appointments often take longer than 10 minutes. The cost of car parking was identified as an issue, especially when clinics are delayed, and this increases the car parking charge.



## **Communication**

Some respondents mentioned it would be useful to have different communication methods:

*"More contact by email - this is better than a letter."*

*"Clearer correspondence, better communication - more text messages."*

*"There was an assumption in clinic today that I was aware of results etc. but I have not received copies of clinic letters, correspondence, which would be helpful."*

Two respondents also mentioned it would be useful to have more information around the purpose of the appointment:

*"Appointment letters could be made clearer. The appointment letter just stated who I would be seeing but didn't clarify whether I would be having a pre-op for second procedure to be cleared or whether it was a review to see how I was doing from the first procedure. I felt that clarity was needed."*

*"I'm not sure why I've got this appointment today as I've already had a consultation and discussed things at a previous appointment. This could be a duplication of appointments."*

## **Administration systems**

A number of respondents highlighted issues with administration systems:

*"I've not always been able to get answers to questions. This could be due to having consultations at one site and procedures at another. The communications are not getting between sites."*

*"I attended a half day assessment, doplar, treadmill, monitoring etc but I was advised at the follow up clinic appointment that the results were not accessible. I phoned the secretary to check that the results would be accessible for the next clinic appointment and was advised they would be, but at the next clinic appointment the consultant said they were still not on the system. I never got the results from that cardiovascular assessment."*

*"The communication between the team at the leg clinic wasn't there. They rely on a system whereby you update the notes field and info is being missed."*

*"The systems at Blackpool and Preston don't talk to one another. The information at Blackpool is not automatically available at Preston, it needs to be sent as a separate e-mail."*

## **Consideration of other health problems**

The "Provision of services for patients with vascular disease 2018" states that the age of the average vascular patient is increasing with more associated co-morbidities. This issue of numerous health problems and the complexity this brings was reflected in a number of responses:

*"The experience seems protracted - it is taking a long time due to a number of ongoing things, not just vascular - cardiology, stroke kidneys. I'm going to different hospitals as each deals with different things - Blackpool for heart, Salford for kidneys."*

*"I have multiple appointments on different days in different departments. Would be better if departments talked to each other and have appointments on same day as difficulty travelling and costly."*

*"Fitting appointments in over different hospitals - have to get taxis and it's expensive. Got two appointments today between two hospitals today."*

*"The referral process from 'problem' to treatment took a long time, and during this period there were lots of different visits/referrals and being passed around."*

### 3.4 What is most important to you when receiving care and treatment from this service?

The following elements, in no particular order, were most important to patients when receiving care:

- Being seen and treated quickly
- Being kept appropriately informed
- Being listened to
- Clean environment
- Good quality after care and pain management
- Personalised care
- Personalised information and advice
- Receiving care close to home/where is convenient wherever possible
- Understanding staff

### 3.5 Further updates and involvement

A total of 19 people provided their contact details to receive updates about the work of the Lancashire and South Cumbria Vascular Services programme or would like to be involved further.

## 4. Conclusion and next steps

The engagement activity has been extremely valuable to obtain the views of people who use vascular services in Lancashire and South Cumbria and those that support them.

The insight obtained during this activity will be used to inform the programme's Model of Care and the process of evaluating the service delivery options. To support the exercise to evaluate the service delivery options, the key points for consideration when evaluating whether a service delivery option will improve patients' and carers' experiences are collated in [Appendix 3 \(page 19\)](#). This section contains a summary of what patients thought worked well, what could be improved and what was important to them. This collated insight demonstrates what is needed to provide a good experience for the person using vascular services and their family/carer.

The responses relating to the Equality and Inclusion monitoring questions (Appendix 2, page 17) indicate that more engagement needs to be carried out to obtain the views from people of ethnicities other than White British. This will be raised as an issue through the appropriate channels in order to resolve this inequality.

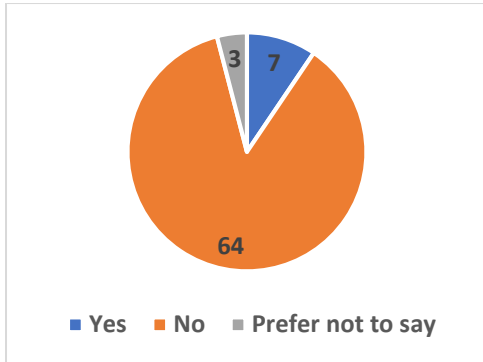
This report will be shared with the support groups that have taken part in the engagement and will be published in the soon to be published Vascular services section of the [Healthier Lancashire and South Cumbria](#) website.

**Appendix 1 Timetable for the visits to engage around vascular services**

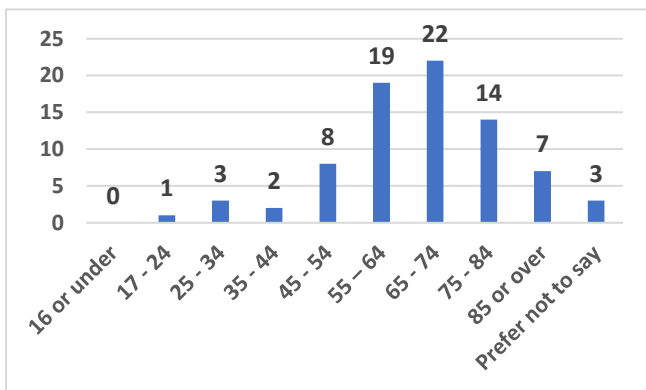
<b>Organisation</b>	<b>Type of Clinic/Meeting</b>	<b>Date</b>
Heartbeat	Gym sessions for people with cardiovascular conditions	18/02/19
Blackpool Teaching Hospitals Trust	Outpatients clinics at Blackpool Victoria Hospital	05/03/19
		12/03/19
		26/03/19
East Lancs Hospitals Trust	Royal Blackburn Hospital Vascular nurse clinic	19/03/19
		20/03/19
		27/03/19
		28/03/19
	Royal Blackburn Hospital Vascular consultant clinic	19/03/19
Lancashire Teaching Hospitals Trust	Outpatients clinics at Royal Preston Hospital	04/03/19
		12/03/19
		15/03/19
	Vascular "hot clinic"	14/03/19
		21/03/19
	Ward 15	14/03/19
		15/03/19
		21/03/19
University Hospitals of Morecambe Bay Trust	Outpatients clinics at Royal Lancaster Infirmary	17/04/19
		23/04/19
		30/04/19
	Outpatient clinic at Furness General Hospital	04/04/19
	Wrightington, Wigan and Leigh Trust	Outpatient clinics at Royal Albert Edward Infirmary
29/04/19		
01/05/19		

## Appendix 2 Responses to the Equality and Inclusion monitoring questions

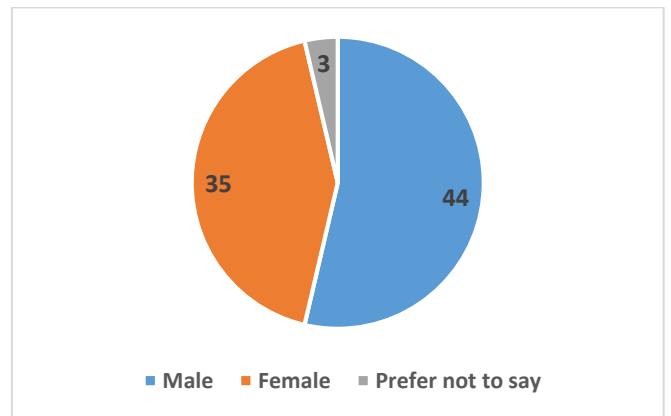
Are you the main carer for an adult or child with disabilities / long term condition?



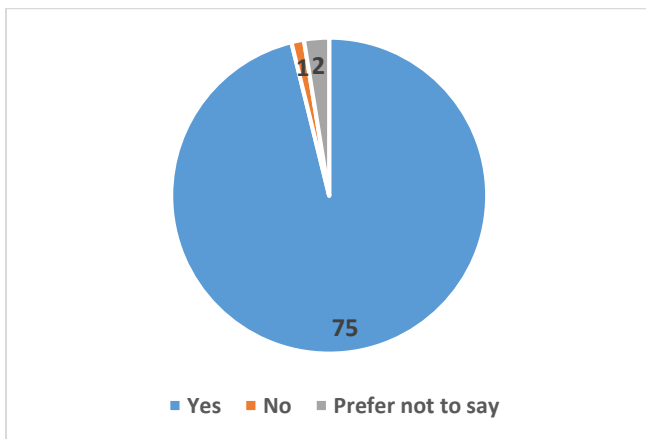
Which age range are you?



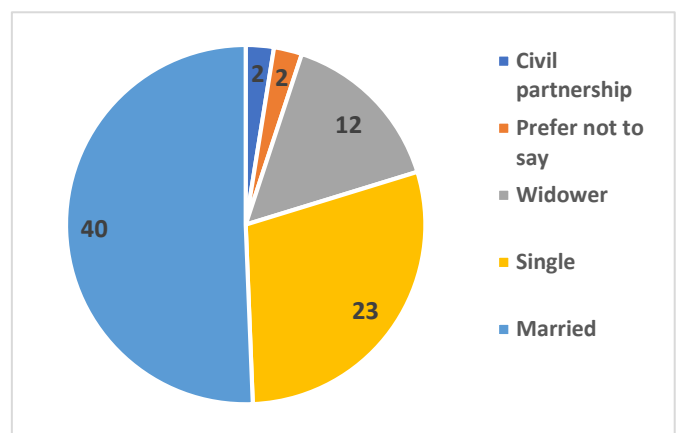
How would you describe your gender?



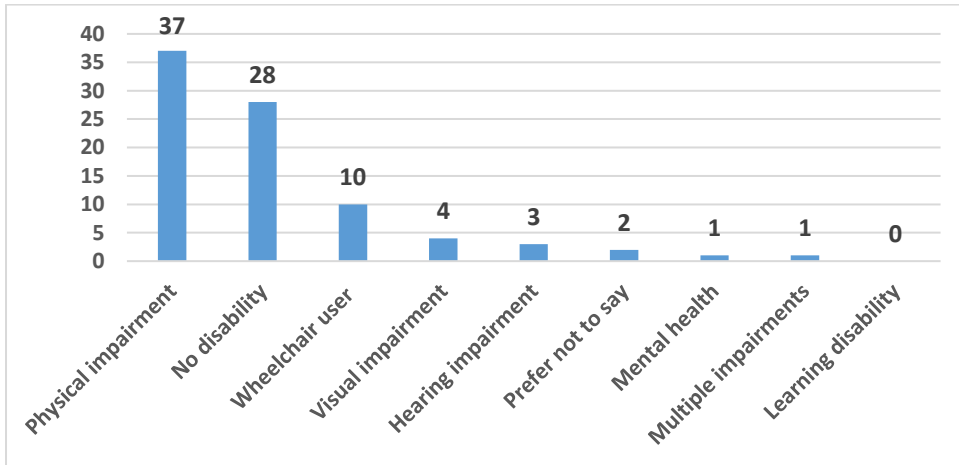
Is this the same gender you were given at birth?



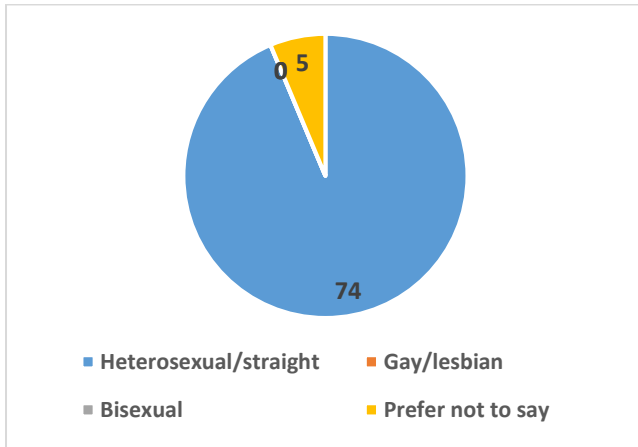
What best describes your marital situation?



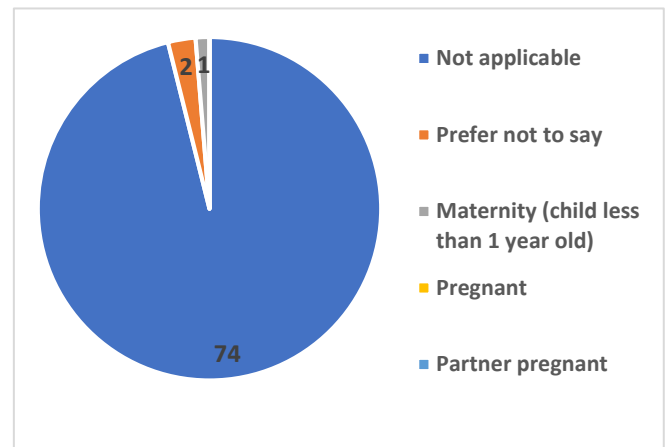
Please choose the category that best describes your level of disability...



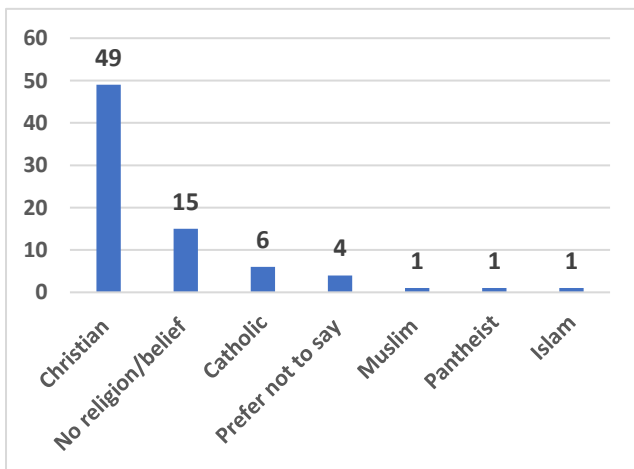
What is your sexual orientation?



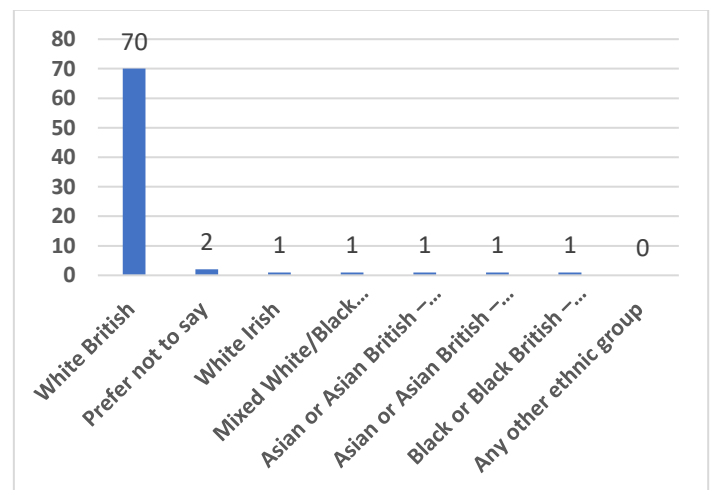
Are you currently pregnant or on maternity leave?



What is your religion/belief?



What is your ethnic group?



#### **Appendix 4 Factors that improve the experiences of patients and their families/carers**

This section contains a summary of what patients thought worked well, what could be improved and what was important to them. This collated insight demonstrates what is needed to provide a good experience for the person using vascular services and their family/carer.

##### **Workforce related factors to improve patients' and their families'/carers' experiences:**

People want to be treated as an individual by attentive, experienced, reassuring and understanding staff delivering a high quality of care that meets their individual needs. They want to be kept appropriately informed and be listened to.
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##### **Treatment pathway related factors to improve patients' and their families'/carers' experiences:**

Appointments and treatment should be close to home, at a hospital of choice and with continuity of location, wherever possible.
Better access to other hospitals' IT systems to make referrals, exchange information etc.
Consideration of other health problems.
Continuity in who patients see for their care
Flexibility to access service at time of need.
Having positive outcomes and experiencing an improvement in their health problem.
"One stop" or "hot clinic" arrangements are appreciated.
Prompt treatment – to be seen quickly via a variety of referral routes.
Receiving treatment on specialist vascular wards as opposed to general wards.

##### **Other factors to improve patients' and their families'/carers' experiences:**

A variety of methods for communication e.g. e-mail and text
Shorter waiting times in outpatient clinics
A reduction in car parking charges