

Engaging Hard to Reach Groups

North Middlesex University Hospital Trust

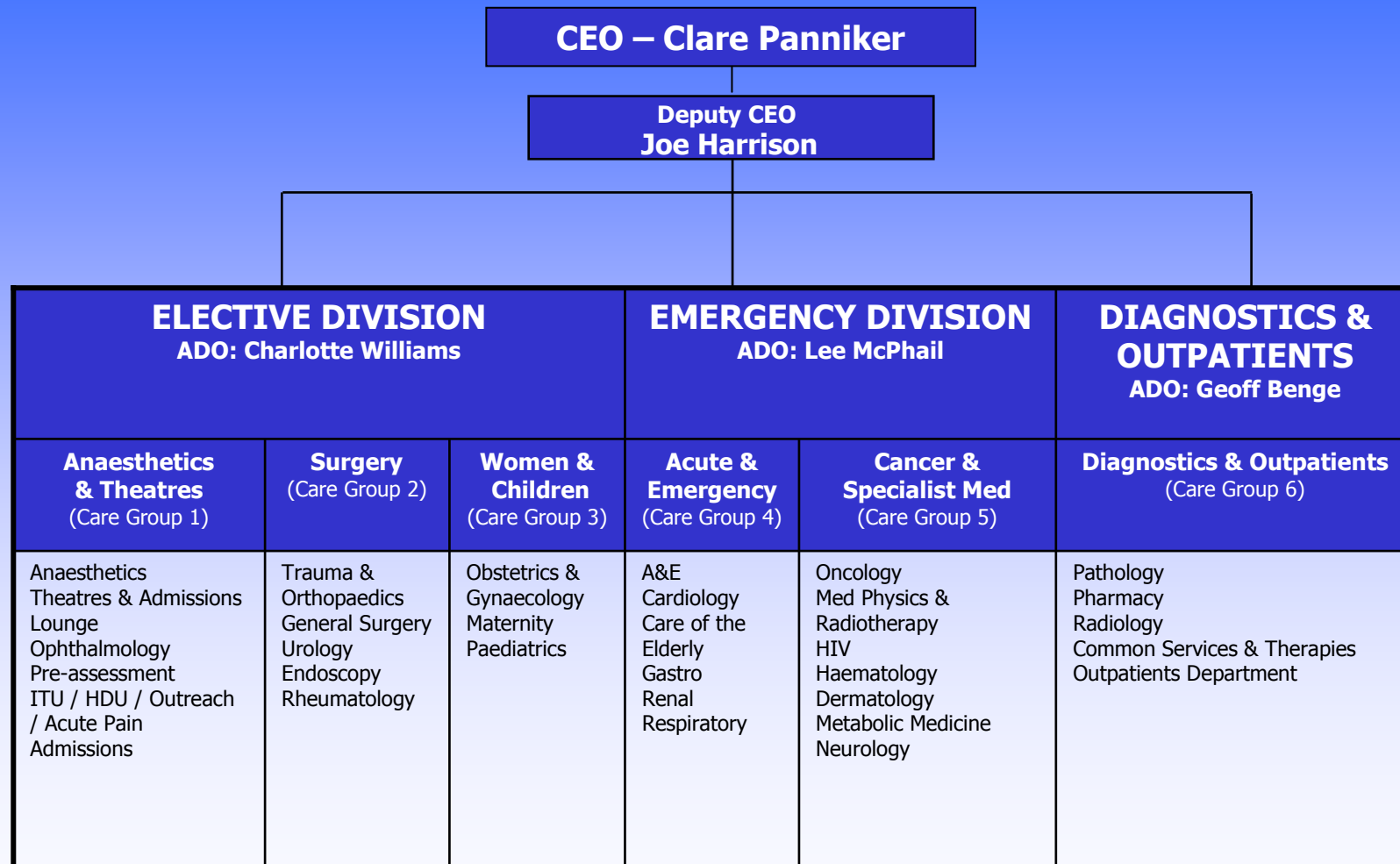
Director of Service Development

November 2009

Background to the Trust

- Income around £155m a year
- Diverse patient population of c.500k (Haringey, Enfield & Waltham Forest),
- Employ almost 2500 staff, most living locally
- Activity split is 70% emergency and 30% elective
- Bed base of 280 - 330
- One of London's busiest A&Es c.130k patients a year
- Around 35,000 inpatient and day cases a year

The services we provide



Taking “HtR” seriously

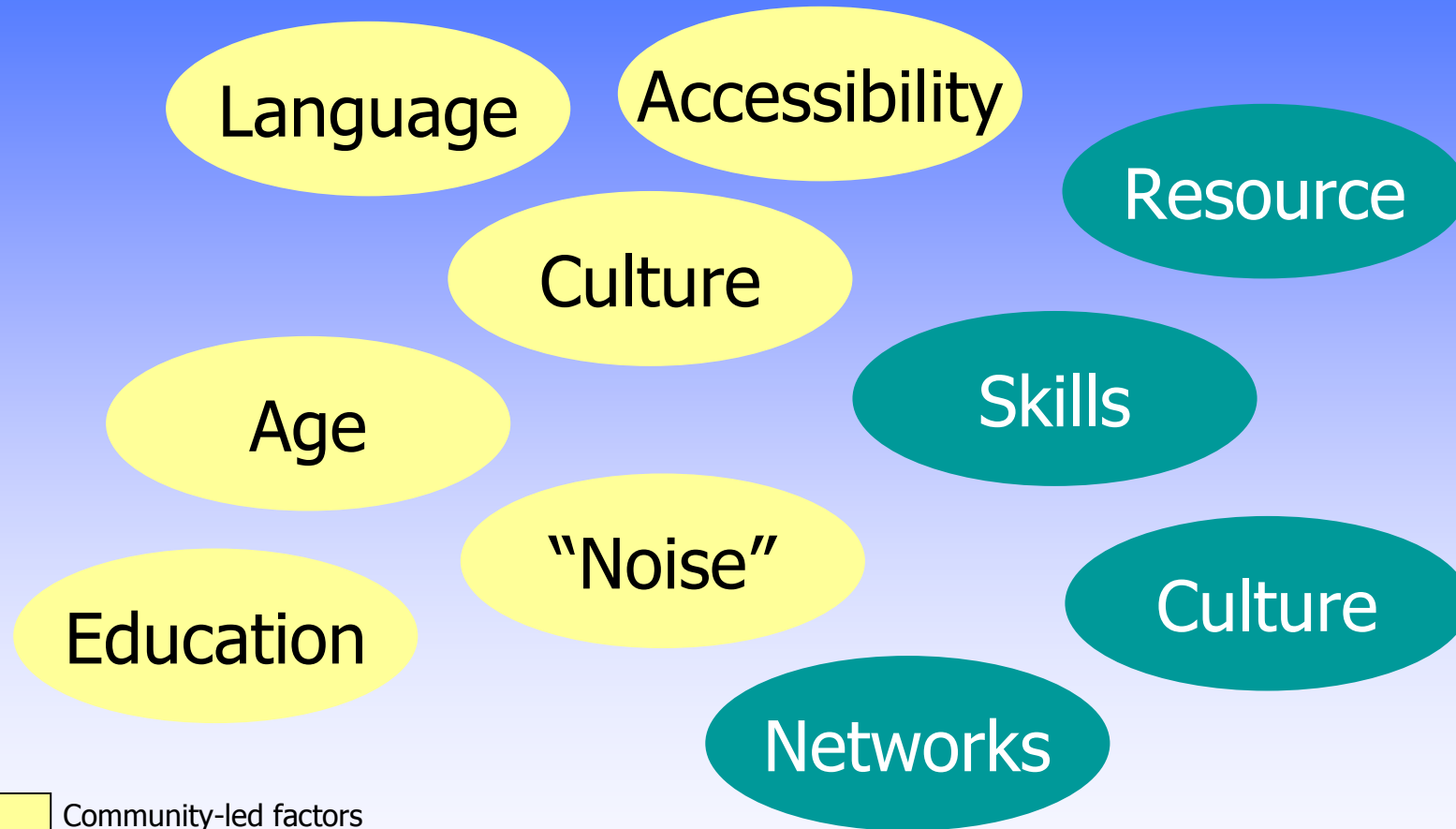
Plays a key role across our organisational objectives

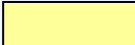
1	That the patient experience is improved	
DN	1A	Provide patients with a safe environment through the introduction of the Safer Patient Initiative
	1B	Implement improved system for gaining patient feedback and acting on results
	1C	Introduce methods to improve staff attitude/behaviour when dealing with patients and relatives (person care)

5	That we become the hospital of choice for local people, providing access to the full range of health services	
DSD	5A	Develop relationships with Primary Care and General Practitioners
	5B	Establish a focused approach to marketing
	5C	Develop cultural awareness across the organisation

10	That the Trust’s role as a socially responsible “corporate citizen” is improved	
DCEO	10A	Establish NMUHT as a focal point in the community
	10B	Continue to develop the Foundation Trust agenda
	10C	Minimise the carbon footprint of the Trust

What makes a patient “HtR” for us?



 Community-led factors

 Hospital-led factors

What are we doing about it?

Accessibility

- Way-finding Group
- Better signage

Language

- Interpreting
- Translation

Culture

- Interpreting
- Translation

Age

- League of Friends
- Third sector

Noise

- Building and borrowing networks

Education

- SEN groups
- HAVCO

Resource

- Investing in communications

Skills

- Training staff in relevant competencies

Culture

- Setting standards
- Managing performance

Networks

- Building and borrowing networks

Where we still need to improve

- Working out who/where the silent groups are
- Ensuring services are as accessible as possible for all (meeting a wide-ranging set of needs)
- Increasing satisfaction across our diverse users

One improvement example: Wayfinding



 X-Ray



panitone 287c



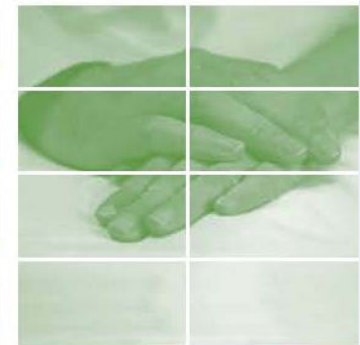
 Surgical Wards

 Surgical Ward 1

 Surgical Ward 2

 Surgical Ward 3

panitone 368c



 MRI



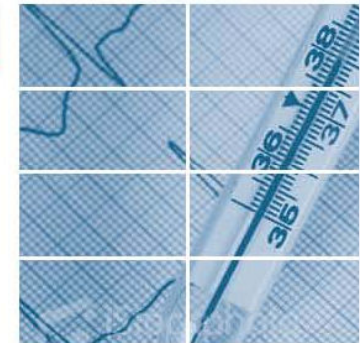
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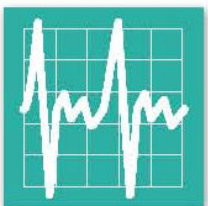
 EAAU Ward



panitone process blue c



 Critical Care



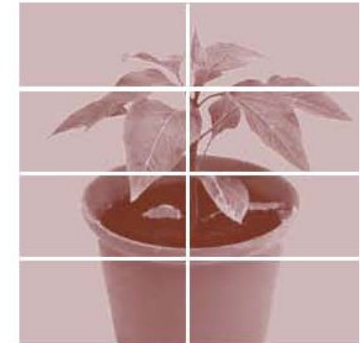
panitone 3385c



 Early Pregnancy



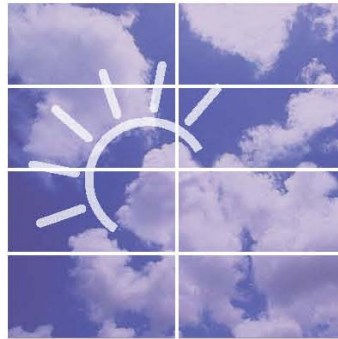
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Day Surgery



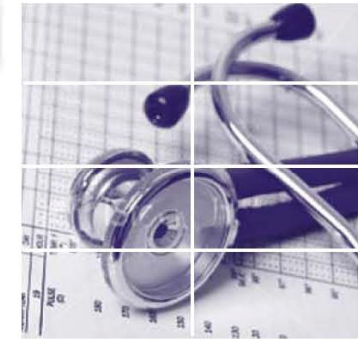
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Outpatients Dept



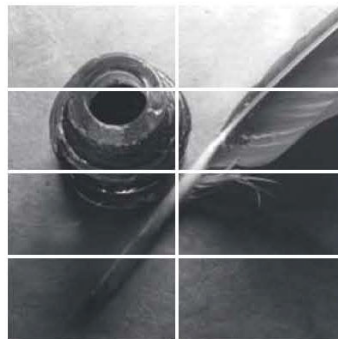
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Administration



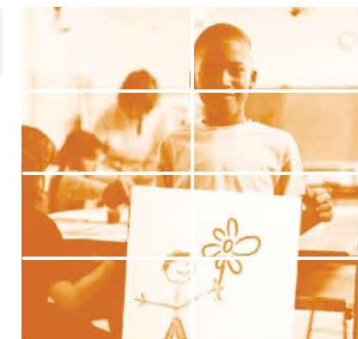
panitone cool grey 11c



Children's OPD



panitone 144c
[Photograph of children to be taken at local school]



Pharmacy



panitone 354c
[Photographs of pharmacy signs to be taken locally]



A & E

panitone warm red
[No symbol to be used, supergraphic image of detail of ambulance to be photographed at the hospital]

