

How we did it

- In November 2015, exactly one year after our first visit, we went back to the unit and spoke with 73 dialysis patients to discuss their experience during August, September and October 2015.
- Some key questions asked in 2014 were replicated to identify any changes, and questions using an improvement scale were asked.
- We also included questions related to the specific actions implemented by Arriva in order to gather direct patient feedback on these.

Summary of key findings

Overall experience

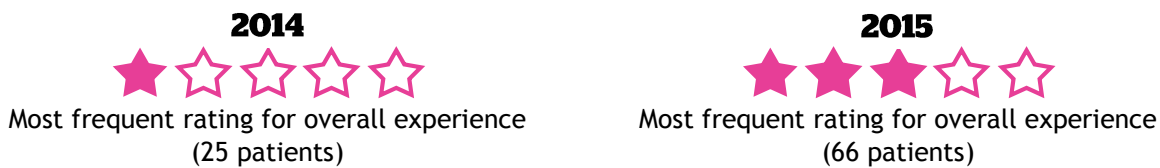


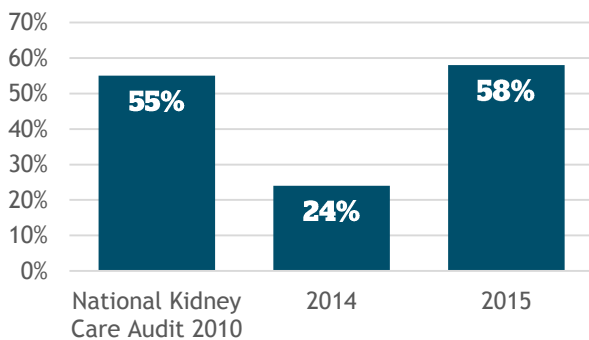
Figure 1 Improvement of overall experience



Source: 2015 patient interviews (count = 57 patients using the service longer than three months)

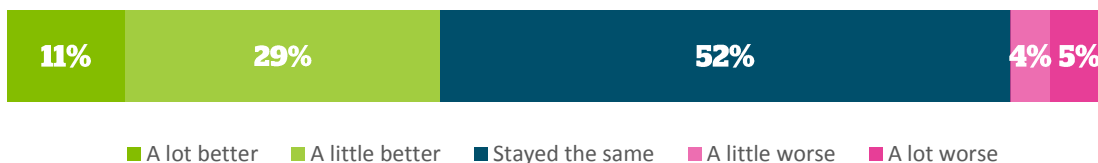
Punctuality of the service

Figure 2 Percentage of dialysis patients happy or very happy with punctuality of patient transport service



Note: When using a five point response scale from very happy through to very unhappy
Source: 2014 patient surveys (count = 25); 2015 patient interviews (count = 64)

Figure 3 Improvement in punctuality of the service



Source: 2015 patient interviews (count = 56 patients using the service longer than three months)

- The majority (78%; n = 43) of patients identified that they normally arrive in the unit within the 30 minutes of their appointment time, although almost two thirds (63%; n = 30) had experienced an earlier drop off.

- Over seven out of ten (71%; n = 51) stated that they had arrived in the renal unit after their appointment time. For the majority this was only an occasional occurrence, but there were a significant but small number of patients who talked about this happening more frequently and that it was the norm.
- The most significant impact of a late drop off is patients not receiving their full prescription of dialysis; our follow up visit found that during the three months previous to our visit:

15 patients had lost minutes of dialysis due to arriving late

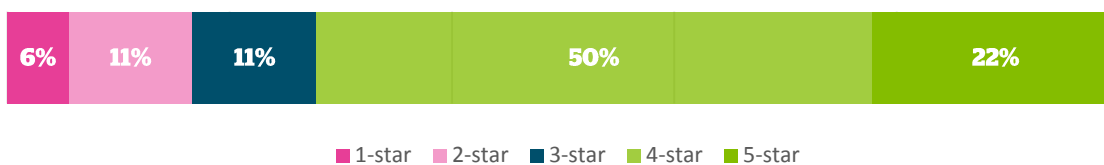
615 was the estimated minutes of dialysis lost due to arriving late

This equates to an average of **41** minutes per patient

- Evidence from our return visit indicates there had been some improvement in the times patients are picked up from the renal unit; two thirds (67%; n = 40) provided at least one example of waiting longer than 30 minutes, compared to 90% of patients in our original visit.
- This was more likely to be a frequent (63% of patients) rather than occasional (37% of patients) experience; the majority identified this happens at least once a week or most of the time and others used words such as '*normally*' or '*often*'.

Communication with patients

Figure 4 Five star rating of Arriva Renal Transport Co-ordinator



■ 1-star ■ 2-star ■ 3-star ■ 4-star ■ 5-star

Source: 2015 patient interviews (Count = 18)

- Patients talked about how the co-ordinator had been able to resolve their transport issues and how this had led to improvements in their experience of the service.
- However, the most talked about aspect of the co-ordinator was negative, relating to their availability in the unit. This was most likely to be talked about by evening patients who identified they were not there during their dialysis sessions, but was also mentioned by morning and afternoon patients.

Planning and co-ordination of journeys

- Almost half of all patients provided examples of poor planning and co-ordination of journeys. Concerns reflected those reported in 2014 and were namely journey length, planning at the control centre and inefficient use of multiple vehicles to transport patients who could be taken together.
- There were still seven references to patients simply being 'forgotten' and having no transport booked.

Carry by scheme:

- A third of patients (35%; n = 21) reported travelling with the same people regularly, whilst another 40% (n = 24) stated that this was inconsistent.
- Opinions about the impact of this were also mixed; some people appreciated this familiarity and didn't mind waiting for others, whilst others resented this waiting.

Use of taxi's:

- The use of taxis for some patients is still high. 70% (n = 42) of patients we spoke to had been transported into or home from the unit in a taxi.
 - 42% (n = 25) stated this was a frequent occurrence travelling by taxi more often than with Arriva or for at least half of their journeys.
- Negative experiences of transport by taxi outnumbered positive experiences, the most frequent five star rating provided was 2-stars. Interviews revealed little progress from 2014 as the main issue focussed on poor quality care in comparison to Arriva transport crews.
- However, it is important to note there is a cohort of patients who do have consistently positive experiences indicating a preference for this mode of transport.