



**Maidstone and
Tunbridge Wells**
NHS Trust



Cardiology Services, Telephone Resident Survey

January 2022

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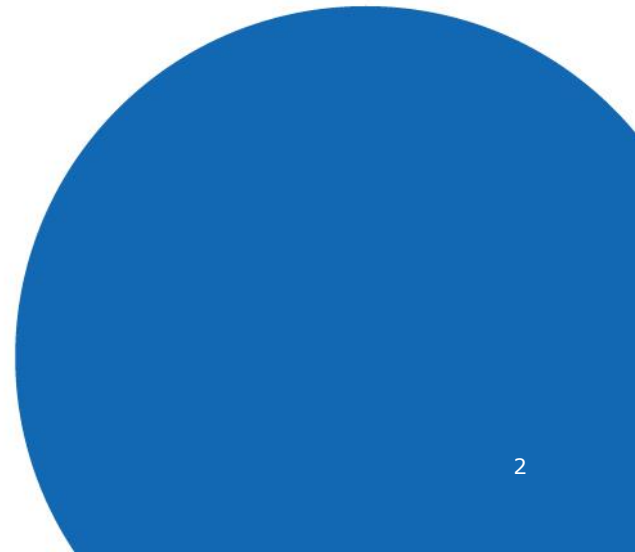
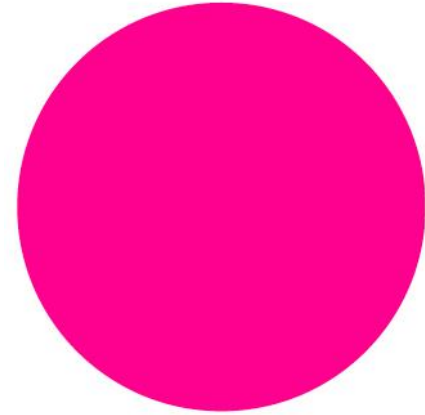
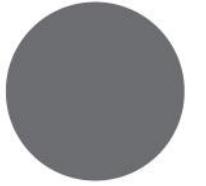


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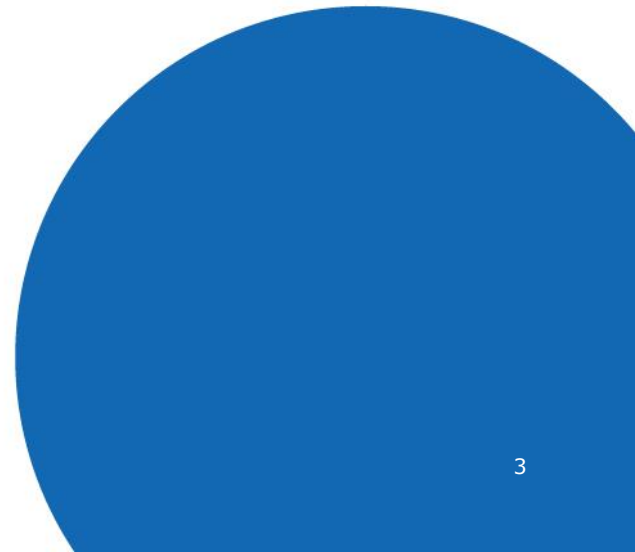
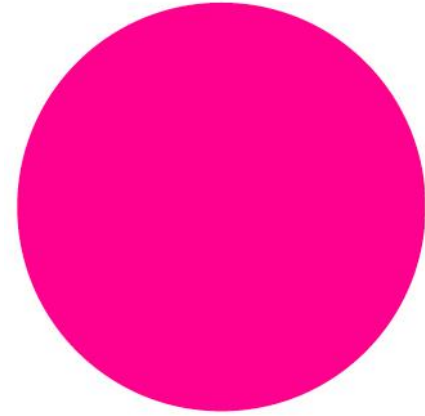
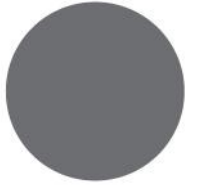


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Background and methodology



Research objectives

Maidstone and Tunbridge Wells NHS Trust conducted a 12 week engagement exercise looking at ways to improve the quality of their inpatient cardiology services.

Local residents were offered a wide variety of ways to find out more and share their views on the proposal including:

- Attending virtual meetings and pop-up information stalls
- Listening events
- Promotion of dedicated consultation materials through digital and virtual channels (inc. websites, bulletins and newsletters)
- Completing the engagement questionnaire

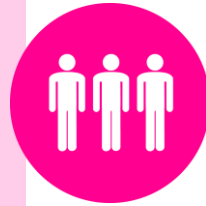
In addition to the above, DJS Research was commissioned to conduct 200 telephone surveys that collected the views of a representative sample of residents. This document outlines the results of those telephone surveys.



Methodology & participant profile

Telephone interviews completed by experienced DJS interviewers.

200 residents



Telephone interviews:
15-20 minutes



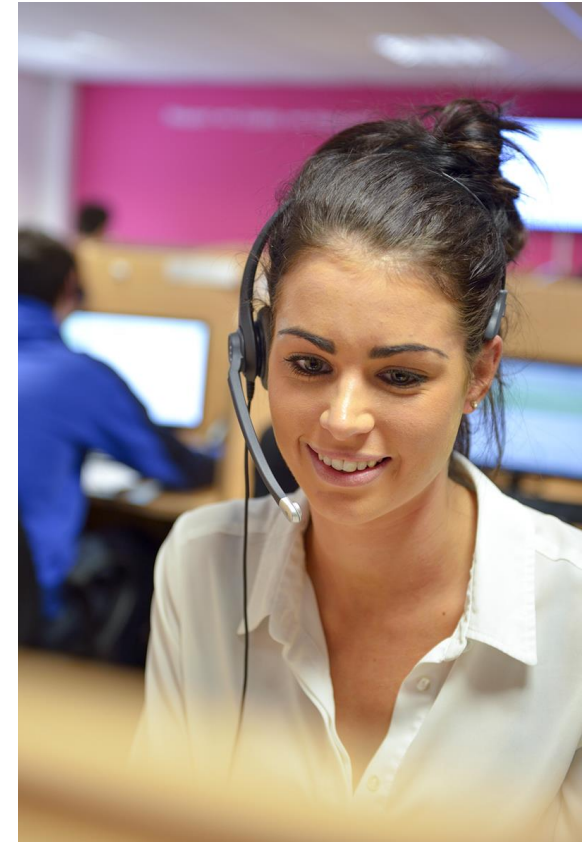
Fieldwork:
24th November to
15th December 2021



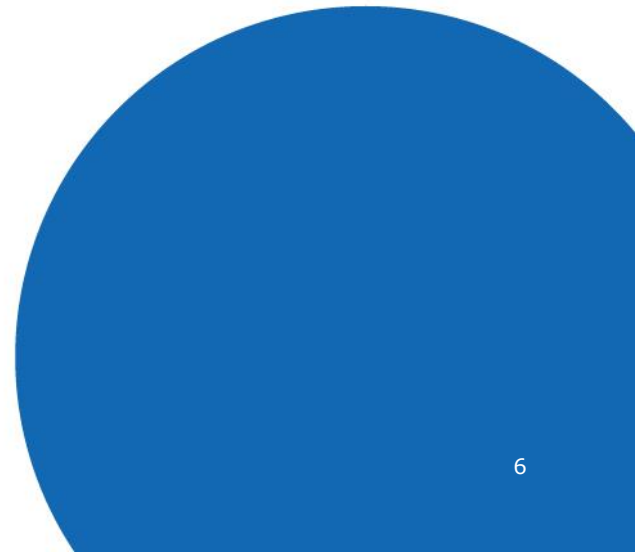
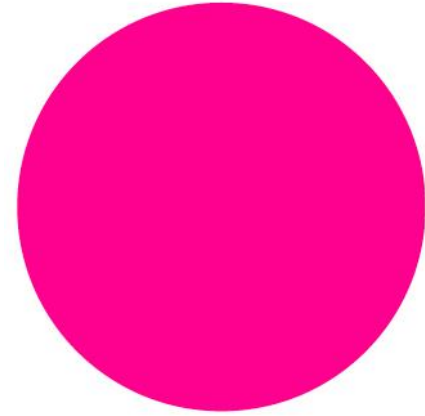
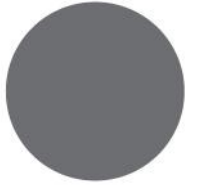
Screening questions were used to ensure that the profile of participants was broadly representative of the Maidstone and Tunbridge Wells population as a whole. The age profile was skewed towards the 75+ age group as it was deemed these are the residents most likely to have need for cardiology services.

Screening questions covered:

- Location
- Gender
- Age
- Ethnicity
- Disability



Key findings



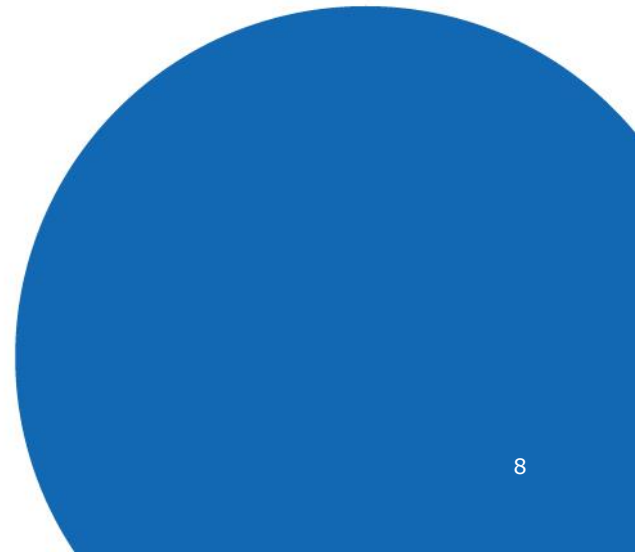
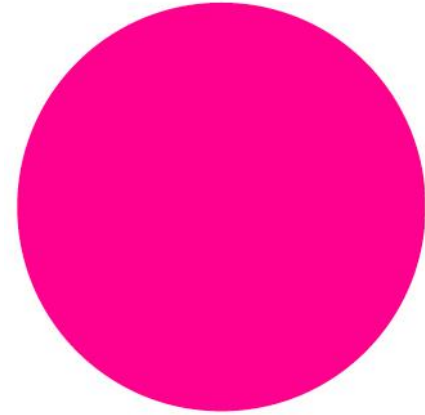
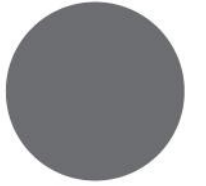


Key findings

The proposals are generally very well received; however there are some concerns, mainly relating to the additional travel required to access a different facility.

- There is strong support for the idea of **consolidating some specialist care at one hospital**, agreeing that the plans would improve the care and experience of inpatients.
- There is also strong support for the idea of **bringing specialist and inpatient cardiology services together onto one hospital site**.
- When asked to think about the most important factors to consider when evaluating the options, the fact that it provides **the best clinical outcome for patients** far outweighs any other factor. Travel time is a concern for around half.
- Potential advantages of bringing services together focused on **receiving specialised services in a single location** and no changing between hospitals.
- Potential disadvantages of bringing services together focused by far on **the distance to each site** – this was an equal concern for both Maidstone and Tunbridge Wells postcodes.
- The hospitals/Trust could reduce the impact of the disadvantages of bringing the services together on one site by **improving transport offerings** (e.g. taxi, shuttle bus, etc).
- Other potential options that would address the need to change include **better access to GPs/quicker appointment times**.
- **Participants like to be consulted/listened to**, so this needs to continue throughout the process.

Survey questions





Maidstone and Tunbridge Wells NHS Trust has been looking at ways to improve the quality of their cardiology care

The cardiology consultants at Maidstone and Tunbridge Wells (MTW) have set out three potential ways to improve patient care and meet national best practice standards. The proposed changes would only affect **INPATIENT** services for those who need the most intensive care with overnight stays in hospital. Outpatient services will stay the same as they are now, delivered at Maidstone Hospital, Tunbridge Wells Hospital, Crowborough Hospital and Sevenoaks Hospital.

The proposals will allow MTW NHS locally to:

- Offer dedicated (ring-fenced) cardiology inpatient beds;
- Have 7-days-a-week cardiology consultant ward rounds for all cardiology inpatients;
- Have a 24/7 cardiac catheter lab for specialist procedures;
- Provide weekend access to planned/urgent echocardiography;
- Offer more sustainable on-call rotas for the cardiology team;
- Provide weekend access to coronary angiography and pacing for inpatients – two specialist procedures to help those with heart problems.

Doctors at Maidstone and Tunbridge Wells NHS Trust believe that the information and evidence they considered shows that the best model of care for cardiology services at MTW is to consolidate some specialist inpatient care at one hospital while continuing to provide more day-to-day and routine care at the other hospital.

Both Maidstone and Tunbridge Wells will continue to offer routine outpatient diagnostic tests; and all four hospitals – Maidstone, Tunbridge Wells, Sevenoaks and Crowborough will continue to offer routine outpatient appointments.



Current cardiology care from Maidstone and Tunbridge Wells NHS Trust

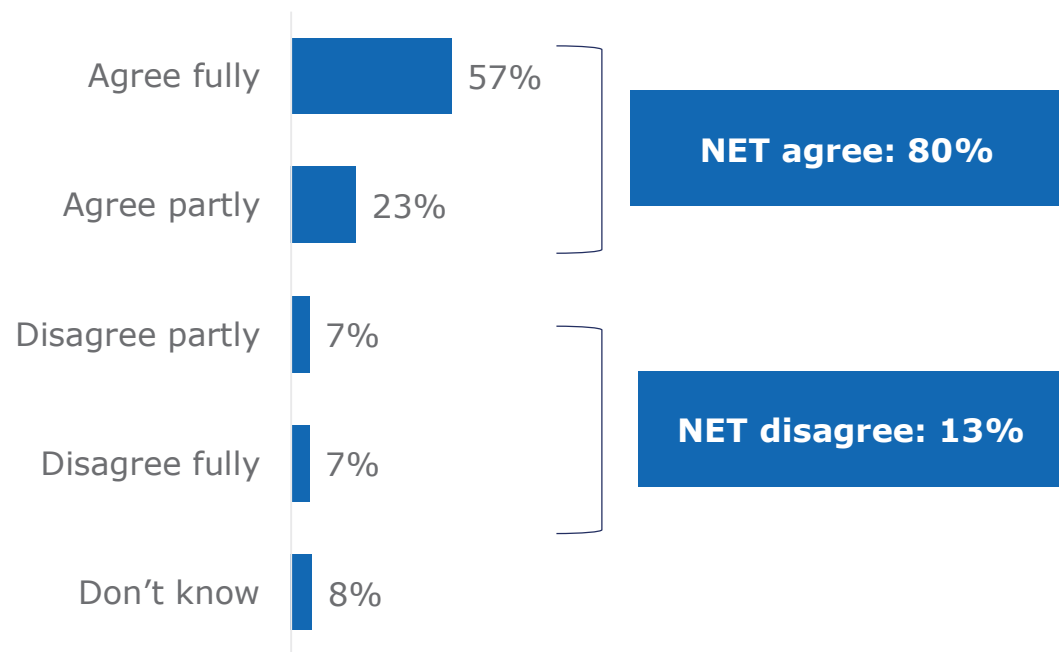
At the moment, the way that specialist inpatient cardiology services are organised between Maidstone Hospital and Tunbridge Wells Hospital presents some key challenges, for example:

- Patients often need to be transferred to the other hospital to get the care they need as each site specialises in different elements of cardiac care;
- Specialist cardiology staff are spread across the two sites, making it difficult to provide 7-day a week services;
- Not having the right number of staff in one place also means they sometimes have to cancel planned care because of emergencies, and there aren't enough heart specialists out there to easily recruit more people to the team;
- Consultant cardiologists have to be on-call more often and this makes these hospitals less attractive places to work than hospitals with less demanding on-call rotas;
- The team can't work as efficiently across two sites meaning they're not able to see as many patients or make the best use of resources.

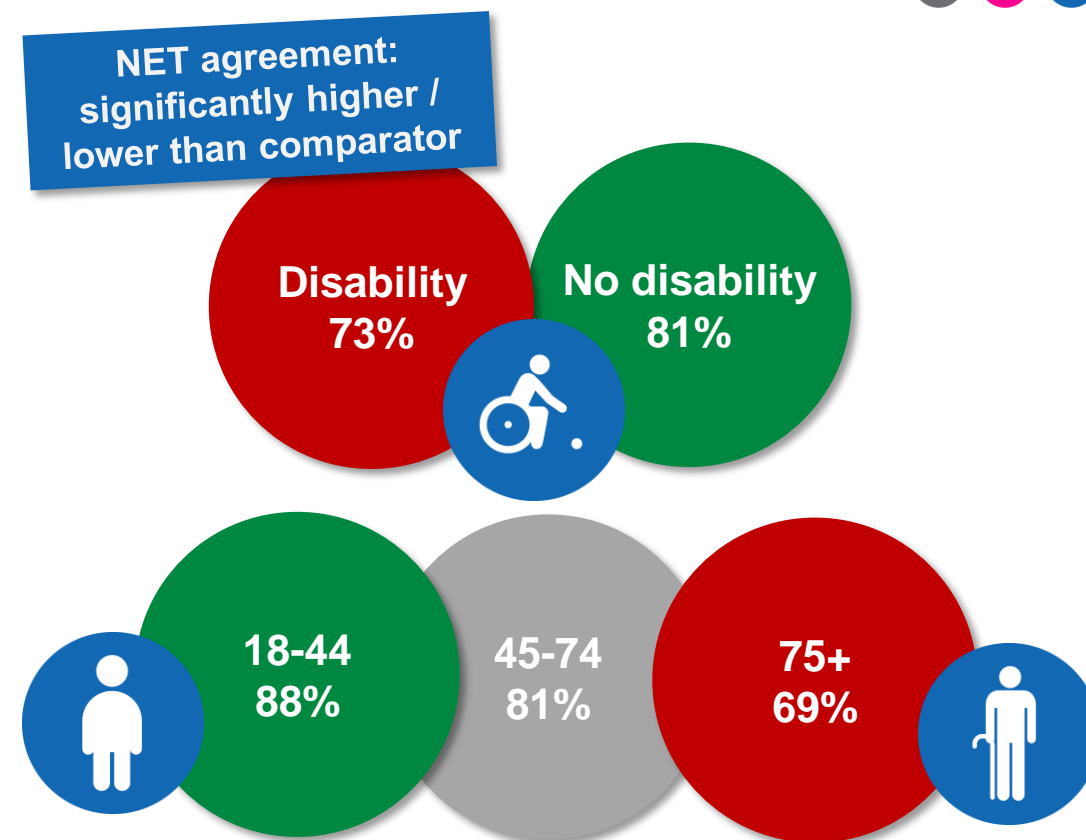
Views on the overall proposal

There is strong support for the idea of consolidating some specialist care at one hospital, with four-fifths (80%) agreeing that the plans would improve the care and experience of inpatients.

Q02: To what extent do you agree or disagree that the plans would improve the care and experience of heart patients being in hospital?



Source: Q02. Thinking about what the proposals would mean as I've just read out, to what extent do you agree or disagree that the plans would improve the care and experience of heart patients being in hospital?
Base: All Respondents (n=200)



ME Postcodes	TN Postcodes
84%	77%

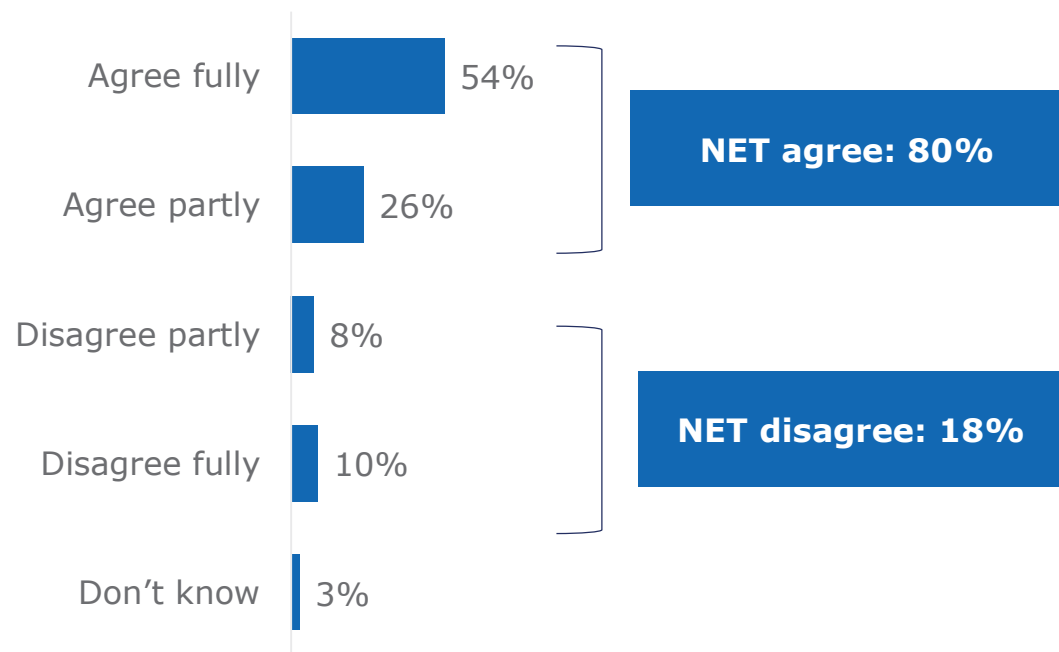
● Significantly higher than comparator ● Significantly lower than comparator



Views on inpatient services being on one site

There is strong support for the idea of bringing specialist and inpatient cardiology services together onto one hospital site, with four-fifths (80%) agreeing with the proposal.

Q03: To what extent do you agree or disagree with the proposal to bring specialist and inpatient cardiology services together onto one hospital site?



Source: Q03. To what extent do you agree or disagree with the proposal to bring specialist and inpatient cardiology services together onto one hospital site?

Base: All Respondents (n=200)

The proposal includes consolidating specialist inpatient services (where people need to stay overnight) at either Maidstone or Tunbridge Wells hospital using existing space, or consolidating services at Maidstone hospital by building a new space as well as using existing space.

ME Postcodes	TN Postcodes
85%	76%



Significantly higher
than comparator



Significantly lower
than comparator



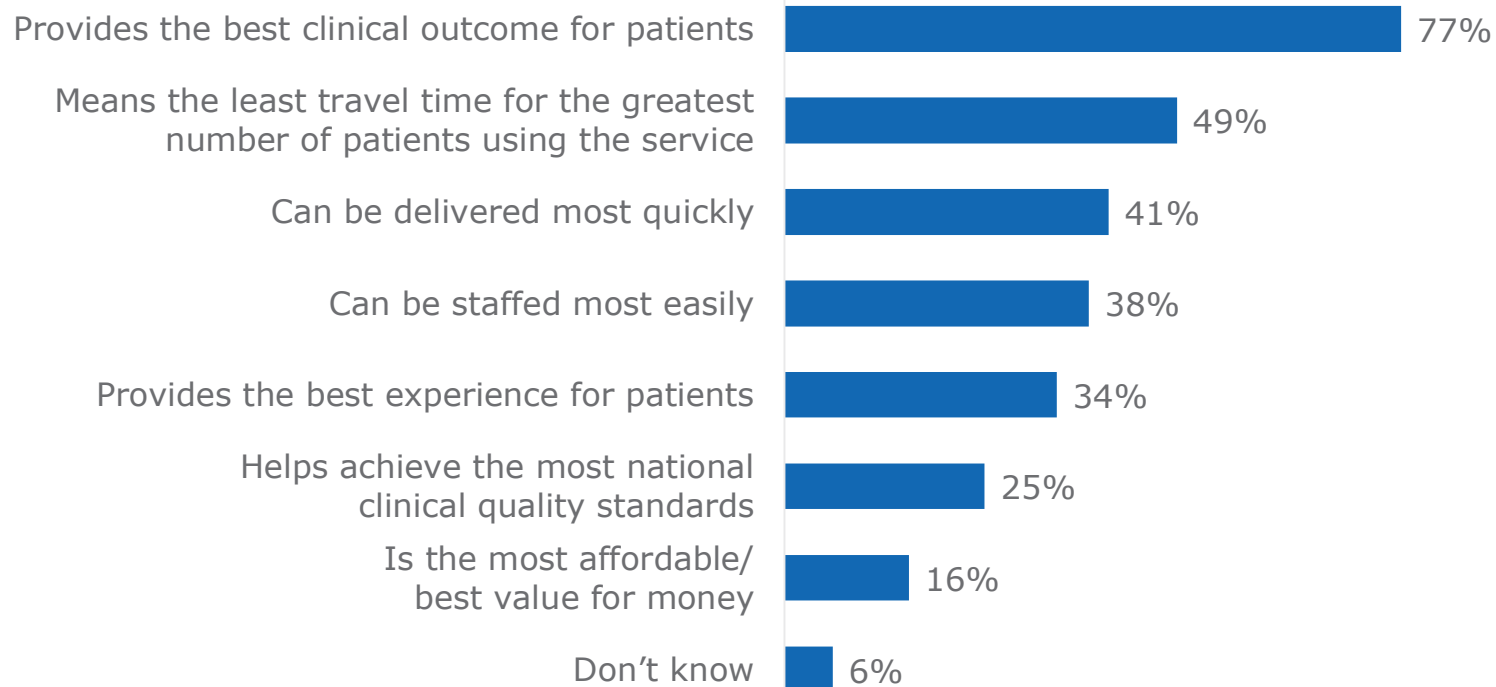
Factors to consider when evaluating the options

When asked to think about the most important factors to consider when evaluating the options, the fact that it **provides the best clinical outcome for patients** far outweighs any other factor; mentioned as one of the top 3 by over three-quarters of participants

Travel time is a concern for around half of participants

Affordability is less of a concern than any other factor provided

Q07: Which of these do you think are the most important factors to consider when evaluating these options – top three priorities.



Source: Q07. Which of these do you think are the most important factors to consider when evaluating these options – please choose the top three priorities for you from the list I'm going to read out.

Base: All Respondents (n=200)



Example comments

Patients should be a priority/want the best clinical outcome.

"Transport, I have explained earlier as it is quite important for people to access. The distance of the two extremes. The other two, they are the most important things of putting the customer first, and the highest priority is that the highest clinical outcome is achieved."

"If the patient has a good experience they will recover more quickly."

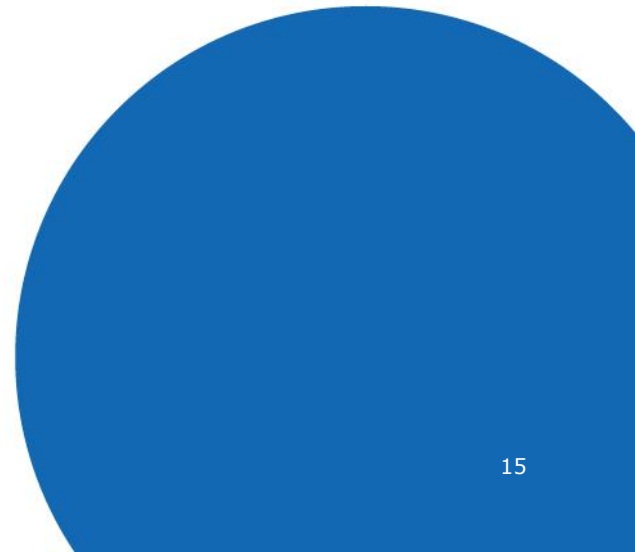
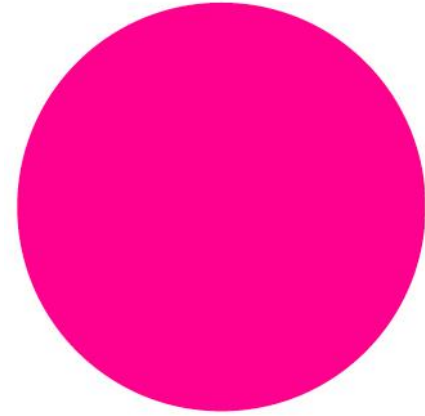
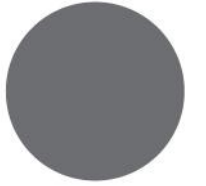
"Take longer and achieve something that would work better long term rather than a quick fix. Outcome for the patient is most important."

"Users of a service should not care about background, administration, targets. Nothing to do with service users. The whole role of the medical service is to make people better."

"It's more local. That people get the care more immediately. They need it quickly with the cardiology services. For the patients, for their well-being, if they are getting looked after and getting a good services, I think that helps a lot."

"I believe if we have the best standards, we will reduce the time. The best standard for patients will reduce the time. if you have to move and delay, this will not be the best quality for patients."

Thematic analysis



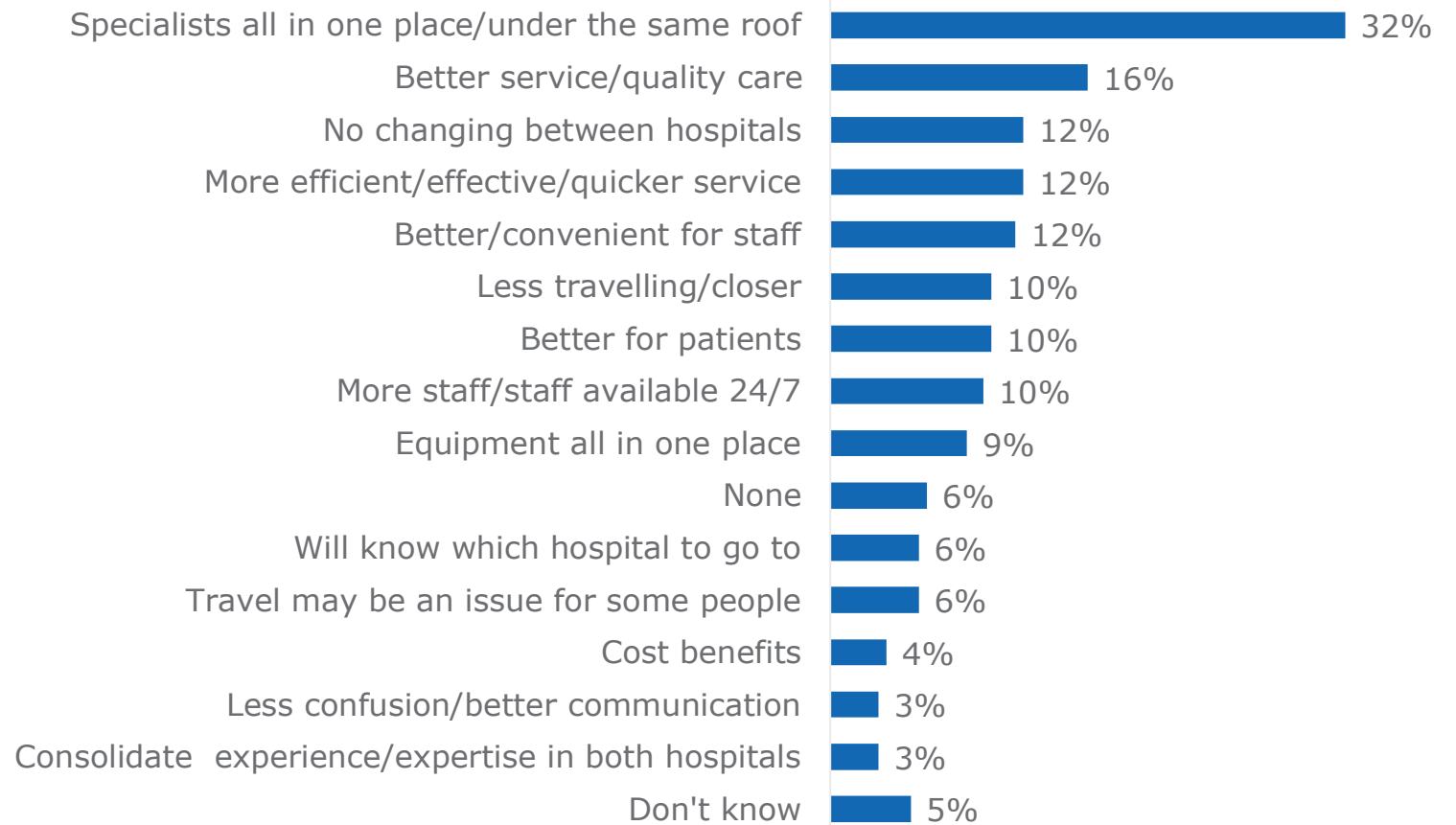
Thematic analysis:

potential advantages

When asked to describe the potential advantages of bringing services together, participants focused on the advantages of receiving specialised services in a single location and no changing between hospitals.

The benefits to patients was also cited in several guises including: improved care and service and less travelling.

What do you think are the advantages of bringing services together in this way?





Example comments

Specialists all in one place/under the same roof.

"It seems obvious that it would be better to have the specialist treatment in one place. It gives people a better chance of hiring decent people."

"It can be nice to have a top-notch hospital. London has specialists all in one place and it avoids the fragmentation."

"Simple consolidation having a single location, having a resources one place is better. Instead of having everything spread thinly and having everything in one place. The locations aren't that far apart. I personally wouldn't mind if it was at Maidstone or Tunbridge Wells."

"Prefer Tunbridge Wells, less travelling. Some advantages. But we have to think of our practicalities. If having heart attack, you would want to go to the best place, worth going that bit further. More specialist care."

"If you have very specialist equipment which isn't used at full capacity, then it could make more sense to have the both units merged. However, if already in full capacity it makes no differences, and might even worsen it."

"I think from moving into Maidstone it becomes more central. So, it could open it up to a more wide range of people."



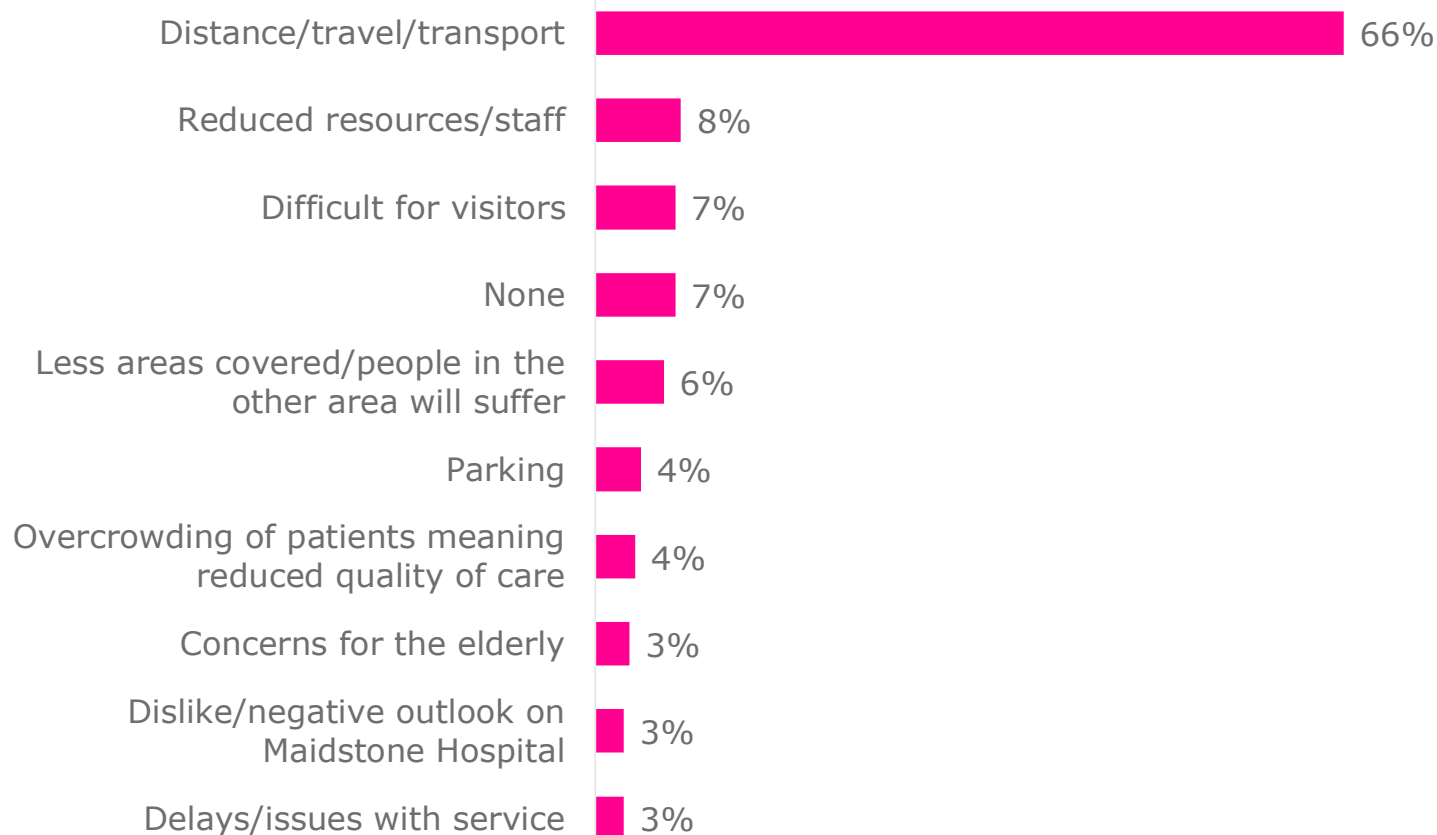
Thematic analysis:

potential disadvantages

What do you think are the disadvantages of bringing services together in this way?

When asked to describe the potential disadvantages of bringing services together, participants focused by far on the distance to each site – this was an equal concern for both Maidstone and Tunbridge Wells postcodes.

Other disadvantages were mentioned by fewer than 1 in 10 participants, but centred on reduced resource/staff and increased numbers of patients in one place, leading to overcrowding or delays with service.





Example comments

Distance/travel/transport.

"If you lived in Maidstone and had to travel to Tunbridge wells or vice versa that could be life threatening. As long as you can go to your nearest emergency department and be transferred if needed then that's ok."

"If you have to travel to visit the other hospital and nobody can take you. Also, if you can't get transport and have got to get a bus or train you can't do that if you have a heart attack."

"If they concentrated all the specialist responsibilities in one place during a critical time this would make it difficult for people on the periphery of the area."

"I see the benefit of the idea, however, its a nightmare to travel from Maidstone to Turnbridge Well. It is better if each local area has its own hospital. Cardiac illness is also time-sensitive so its better if hospitals are closer to people."

"Got to choose between Maidstone or Tunbridge Wells and people travelling to these places. In Tunbridge Wells, not sure of the catchment areas. Does it go as far as Ashford, does Tunbridge Wells hospital catchment go far as Sevenoaks, Crowborough? Public transport. Don't use it. Cumbersome, long winded. I live in East Peckham. Bus services are pretty poor. Bus to Maidstone, car 12 mins to 15. Bus takes around 1 hour. Could get bus from here for Eastbourne Hospital. 3 hours total though."

"Speed is crucial for cardiology issues, as they are usually emergencies. If you live far from where the hospital is located, then there could be issues and increased complications."

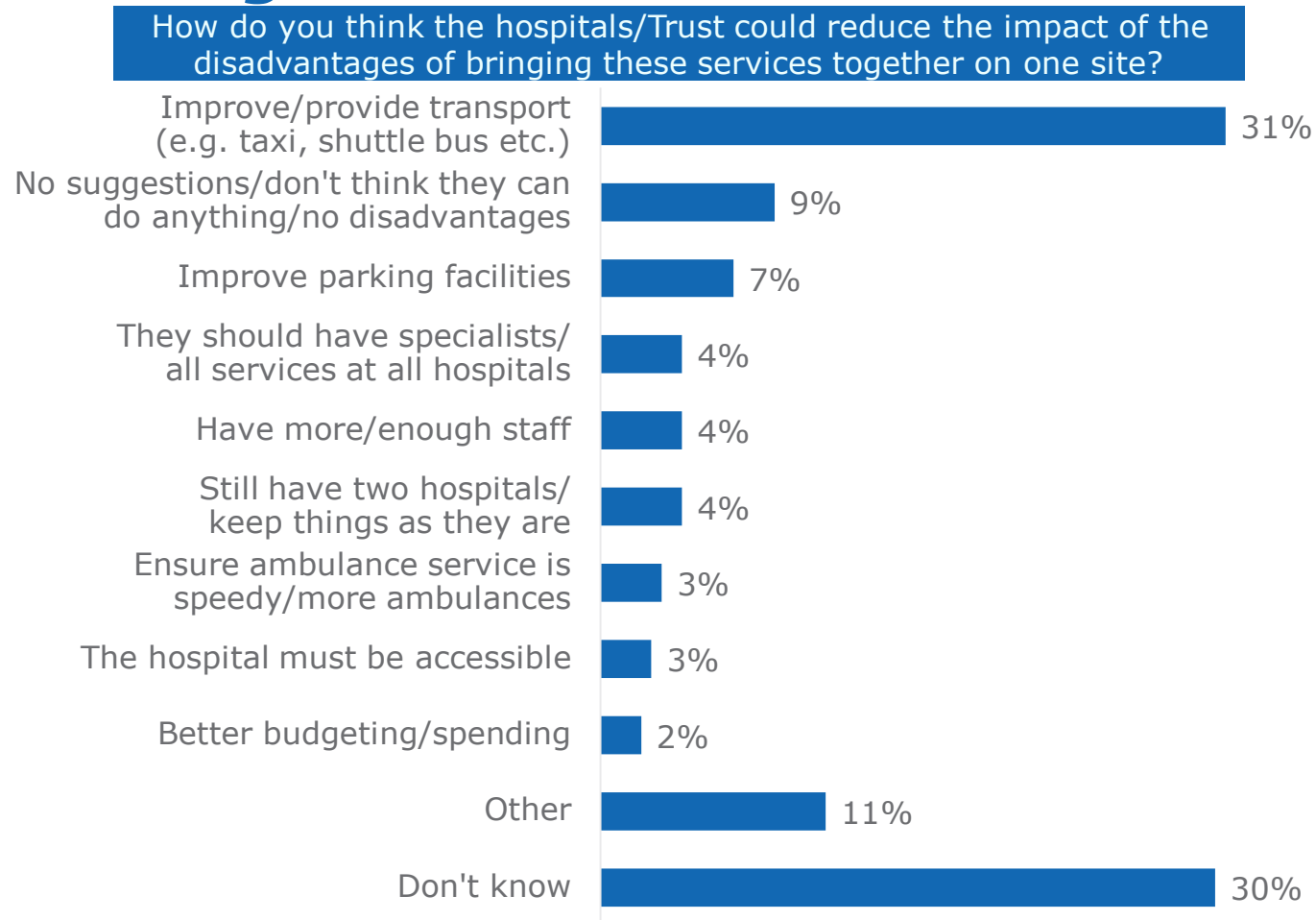


Thematic analysis:

reducing potential disadvantages

When asked how the hospitals/Trust could reduce the impact of the disadvantages of bringing the services together on one site, the main response concerned improving transport offerings (e.g. taxi, shuttle bus, etc).

Three in ten said they didn't know how the hospitals/Trust could reduce the impact.





Example comments

Improve/provide transport.

"I think you mention having routine services at multiple sites. I think that is quite important. I would say stuff about transport, but I don't think that is realistic. I am concerned about promises being made but not being kept in the longer term."

"Good transport service and bus service. Might be difficult for patients to get to the hospital if merge. Transport from one hospital to the other. Parking at Maidstone is awful - expand parking, not enough spaces for people if merged."

Improve transport links, aside from that there isn't much you can do. The centralisation of the unit may also help improve people's ease, as they know where to go and see the same healthcare practitioners.

"If you had people that need transport, then you could potentially set up a transport service between the hospitals for people who need it."

"Some people are very fortunate have family to take them in a car. But particularly unwell people might not have someone to take them in for appointments, so for the Trust to find transport options needs to be considered financially of course but might be an option in these instances."

I think what you are doing now with people answering the survey. People feeling part of it rather than people feeling they are forced. Another big factor is personal experience. People who have recent experience of heart surgery. They know that members of staff are professionals who know what they are doing in the vast majority of circumstances. Hearing the work of others is an under-utilised asset.

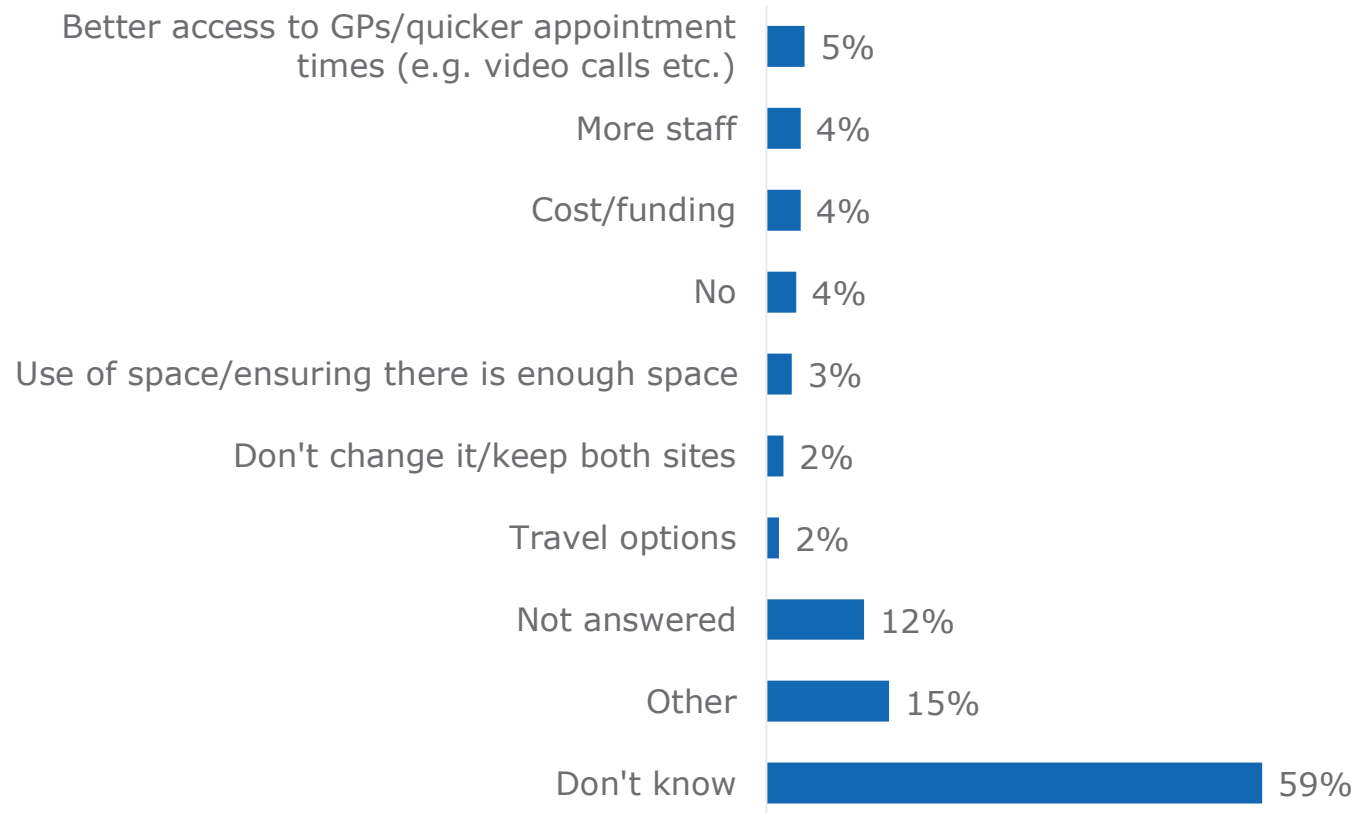


Thematic analysis:

potential options that would address the need to change

When asked whether there were any other potential options that would address the need to change, participants spoke of better access to GPs/quicker appointment times, but in the main they didn't have any large scale potential options that should be taken into consideration

Are you aware of any other potential options that would address the need to change, that should be taken into consideration?





Example comments

Better access to GPs/quicker appointment times (e.g. video calls, etc.).

"Staffing would be better in one area. Not having to travel between two locations. If you suddenly have to call in from another hospital. If new, it's more modern."

"I don't want to spend too much money building new things, if you are building in one hospital then not the other, it would be better to use existing space."

"If we're talking about overnight... but if it's a long term stay than the accessibility to visit for close relations would be a big concern. If it's possible for the expertise to be under two roofs then that would be preferred but if they want to build up a expert team at Maidstone then I understand that."

"There is no reason to change the situation as it is. I got the best care and treatment I could have got from a personal point of view."

"Think about how to effectively utilise the free space after the merger. Is there a space in whichever hospital to accommodate the expanded unit - environmental factor."

"Quicker appointment times, i.e. when you are referred to someone and you have to wait for the referral or the operation. Maybe if they had the staff there wouldn't be as long of a wait. If they could make it easier for people to be able to get into that line of work then maybe they would have more members of staff."

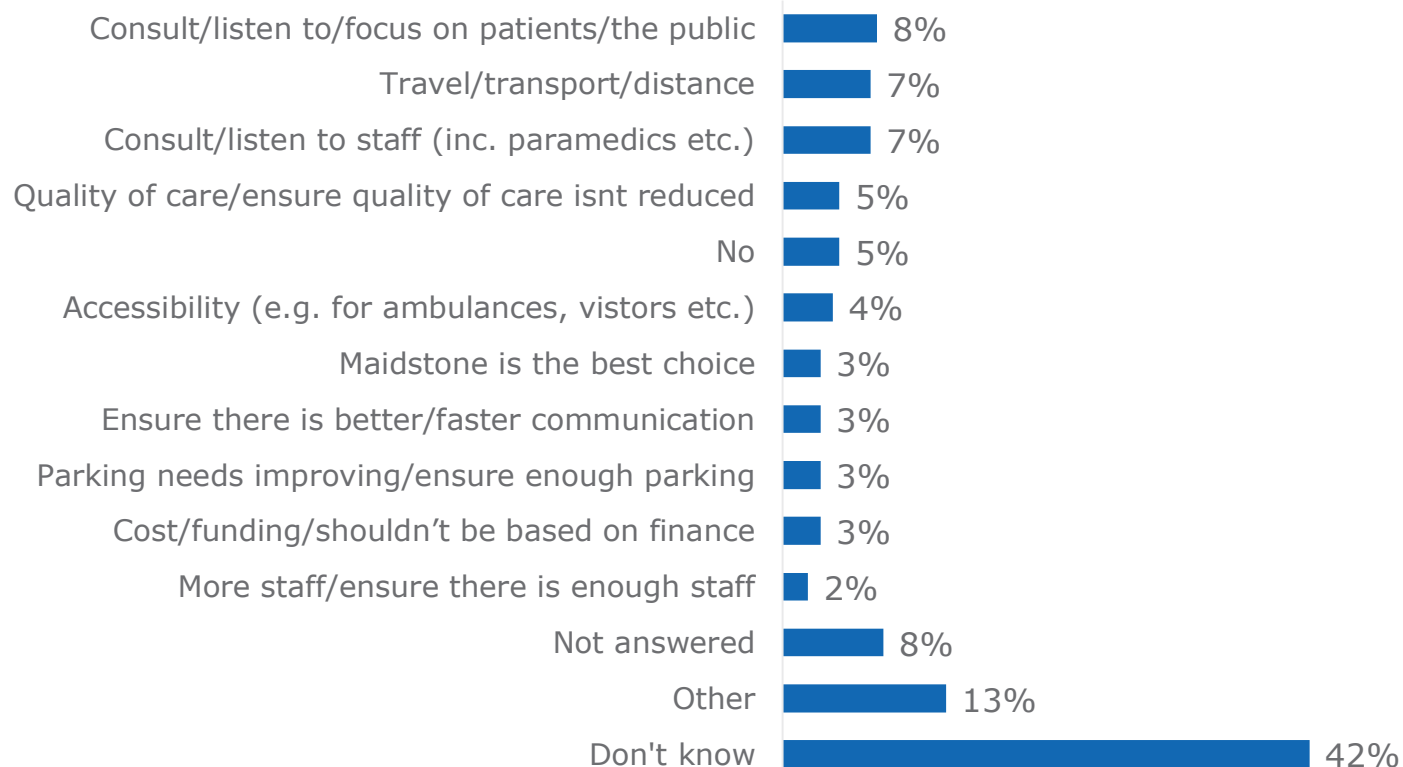


Thematic analysis:

other considerations to be aware of

When asked what they would like to be considered before the final decision is made, participants spoke of consultation with patients and the public, but in the main they didn't have any large scale considerations for the hospitals/Trust.

Is there anything you think the hospitals/Trust should consider or be aware of before making their final decision on the shape of specialist and inpatient cardiology services in the area?





Example comments

Consult/listen to/focus on patients/the public.

"Can they afford to amalgamate? Get someone to look into if the infrastructure is good enough for people to be transported quickly. Can ambulances go to and fro without problems? Have a conversation with paramedics to see what they think."

"Listen to their staff because they know the hospitals best and the way it works."

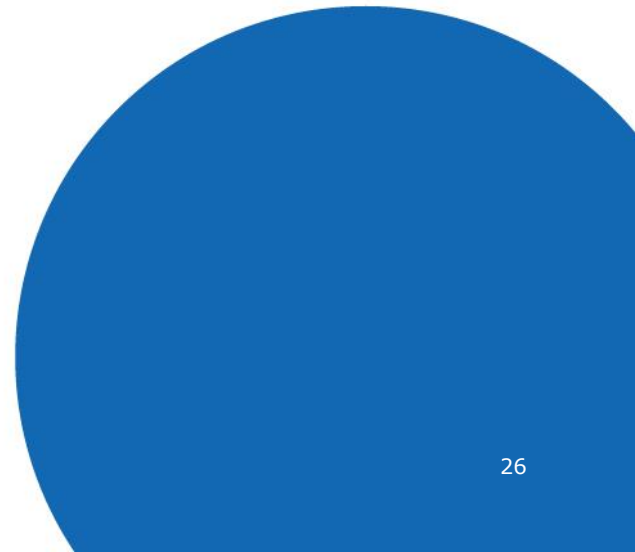
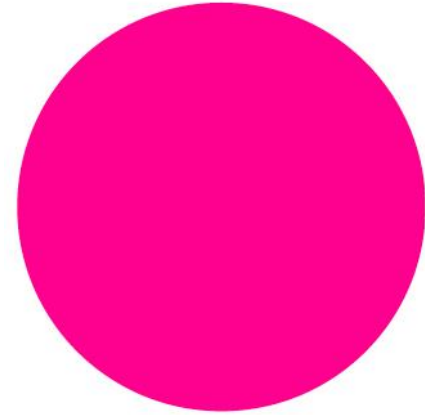
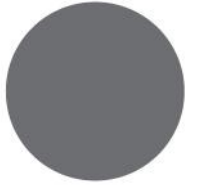
"Just be aware of when your letting people know about this that you empathise that there are still things happening in your local hospital and not that they have to travel miles. You don't want to cause anxiety which makes things worse. If you do communication right, things are likely to go better."

"Hopefully it leads to a better experience for patients. As a patient, you want to be able to see the consultant regularly."

"Do what they need to do, but not on the basis of simply saving money. Whatever they need to do, the spending of money should not feature into it. Focus on the patient, not how much it costs."

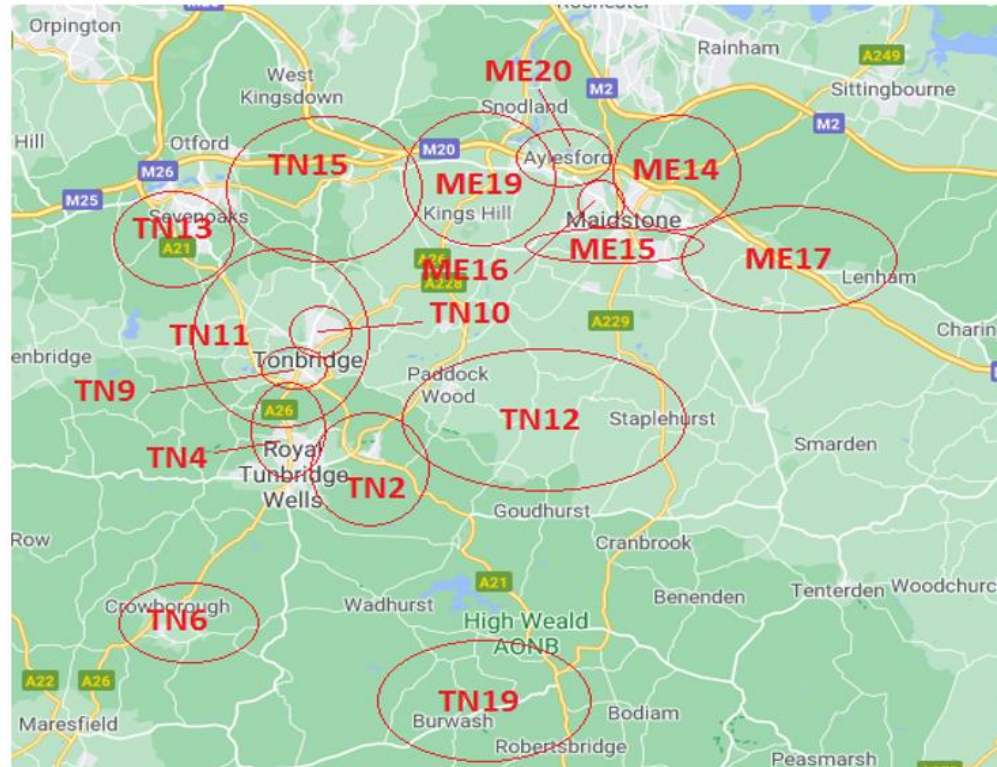
"They are quite well experienced, and it is nice they are getting peoples' views, but I think they have already made up their mind and they are just fine tuning it."

Participant profile



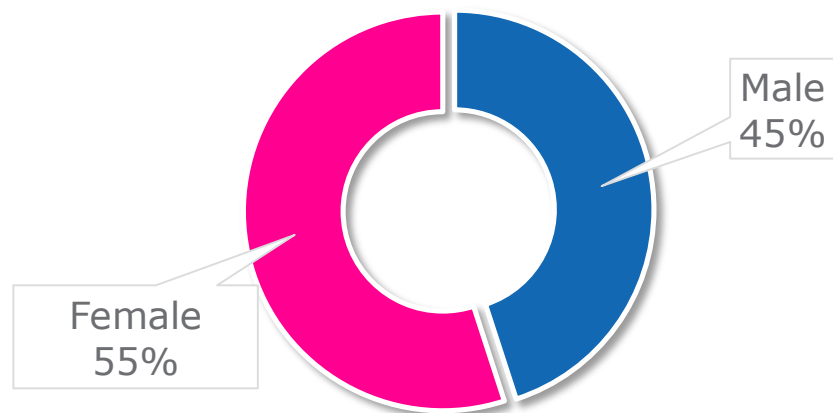
Participant profile

The engagement programme can be accessed by anyone in any postcode region. However, in order to get as much productive feedback as possible, we concentrated our sample population to postcodes in closer proximity to Maidstone and Tonbridge Wells hospitals.

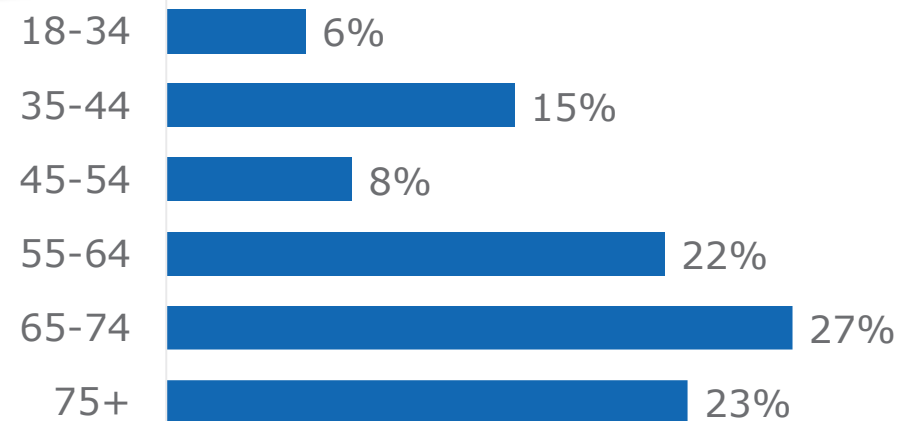




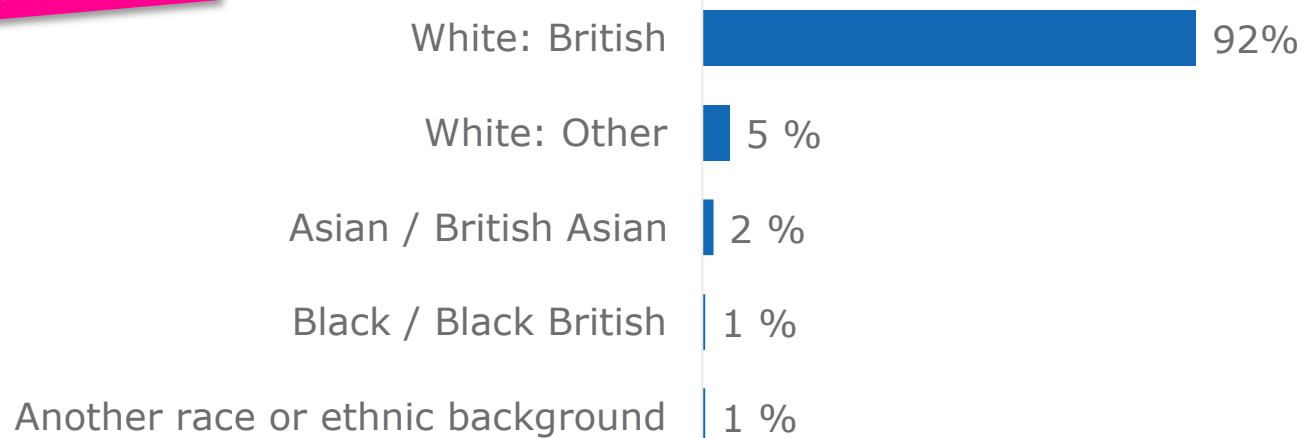
Gender



Age group

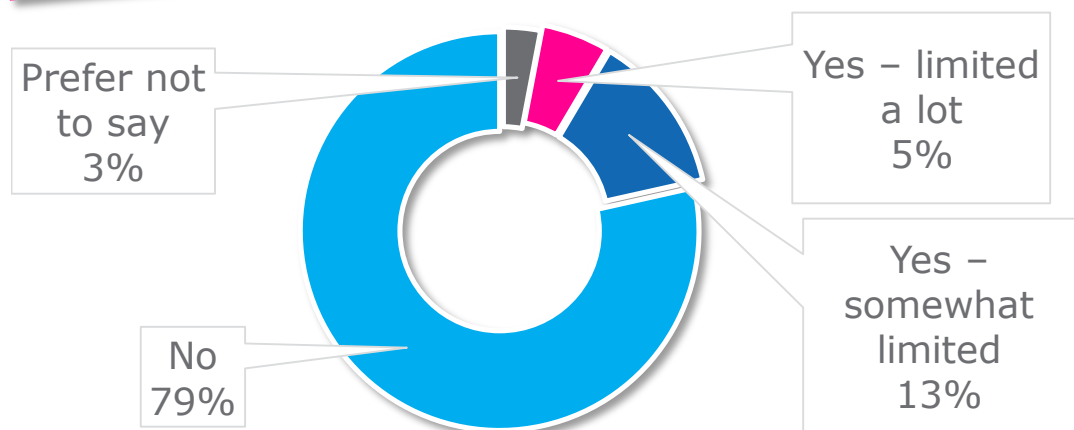


Ethnicity

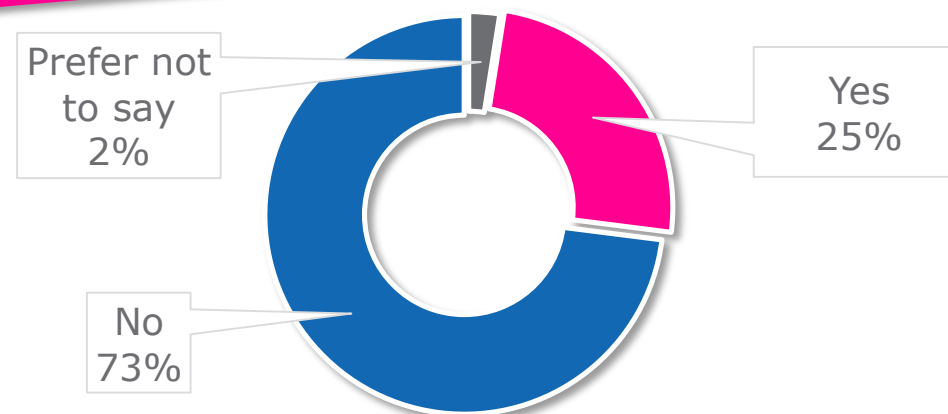




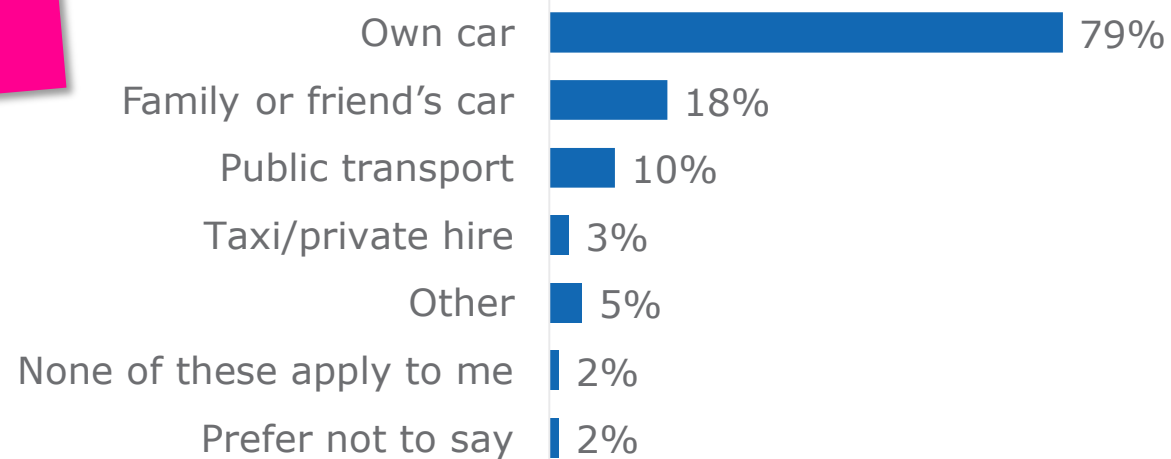
Disability



Caring responsibilities



Travelling to appointments



For more information

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