

Finding our way around King's College Hospital

On February 1st 2018, 3 teams of people with learning disabilities, all members of the Lambeth Learning Disabilities Assembly and HealthWatch R4E Enter and View visitors programme, visited Kings College Hospital to assess effectiveness and accessibility of signage for people with learning disabilities within the grounds and hospital. The 3 teams had different trial routes to explore to give a broad range of customer experience in terms of signage.

Finding Kings College Hospital via public transport was good. Denmark Hill Overground station signage was clear to the Hospital and the bus alighting announcement and digital display was also clear and good. The team that came by taxi found the drop off at the main Hamblin entrance difficult and busy as there were so many cars and a member with mobility issues worried about her safety while being supported to the entrance.

External Signage

Finding **A & E** was mostly clear and easy however the signs were high and it was noted that the terms 'Emergency' and 'A & E' were interchanged on signage and this was confusing. The ambulance staff outside the hospital were very helpful when requesting directions to A & E.

Building signage was considered to be bright, eye catching, mostly clear, of good font size and style and building names were easy to read. Café's, toilet and disabled access ramps signage were not evident externally.

It was noted that walking from A & E to the Golden Jubilee Ward was a busy pedestrian route but not very pedestrian friendly.

Internal Signage

Most internal signage was colourful, eye catching, good font style and size, colour coding for wards, and generally of good height however it was noted some could be a bit lower to accommodate wheelchair users. Directional signs were positioned well.

Signs to the **Main Reception** and **Help Desk** were not clear. The glass panels either side of the entrance to the Help Desk had vertically written glass etching that was not easy to read. However, visitors stated if the main reception was not found they would follow the 'i' sign to the information desk. None of the teams were able to locate Main Reception. Some thought it was the Golden Jubilee entrance. All teams that had contact with help desks said the staff were helpful and kind.

Toilets were clearly indicated on hospital maps. However, wall signs to the public toilets were not always clear. There was no image on some toilet doors to indicate it was a toilet and it was difficult to know if they were vacant or engaged.

Hospital Maps had mixed reactions. One team that had good reading skills found the hospital maps very helpful, clear and just right in terms of information. Another team found the amount of information confusing. All teams acknowledged the necessity of the hospital maps. Some of the colour coding on the map could have better colour differentiation (eg: red and brown looked quite similar). **Disabled access** facilities were clear on the hospital map but not necessarily on wall signage.

Notice Boards and Ward Lists in building foyers were mostly good at directing in the right direction however some signs/symbols on the notice boards and ward lists were not consistent with the sign on the door or ward itself. eg: PALS. It wasn't clear that wards and services had their own lists as some teams tried to find wards, etc. on the map before realising they were on a separate list on the righthand side.

Some visitors felt **Refreshment** areas were clearly sign posted. Whilst others felt signs to refreshment services were not clear and that they stumbled across them. However, it was felt there were quite a few refreshment areas and generally the seating was adequate.

Lifts and Stairs at times were well sign posted and at other areas not well placed or clear. (eg: notice for Ruskin Ward lift pointed left but wasn't clear there was several doors and corners, etc. to get to the lift). In the lifts there were no signs or voice indicating which ward was on which floor, this was very confusing. The Cheyne lift had a notice about some of the departments but not wards. The lifts were nice and big but the floor number buttons in the lift were hard to read.

When in a **Hospital Ward or wing** other ward /wing signage was very confusing if it existed at all. It was not clear whether a wing could be accessed down a corridor or via outside. **Ward reception desks** were not necessarily easy to find or clearly signed.

Hospital exits signs were clear. However, the different exits were confusing and some people came out at a different road than anticipated.

Details from specific Journeys

The signs between the **Ruskin Wing and the Main Hospital Street** were confusing as the 2 signage boards had an arrow pointing right and an arrow pointing left. The arrow to MacMillan Cancer Information was on a board with an arrow pointing the other way. The paper notice about "Brunel Ward and Gynae Day treatment" was confusing, it was not clear they were accessed through the Guthrie Ward. Perhaps this could have been colour coded pink.

The Help desk gave **directions for Suite 2** as it wasn't clear how to find it. Whilst the directions were good it was a lot of information to retain and without support visitors wouldn't have been able to remember all the directions. The team did not understand the term 'suite'. The team had to go through a couple of doors which did not have any signs to indicate they were going in the right direction. Public spaces were busy and navigating through various sections of the hospital was quite complicated.

Note:

5 of the 6 visitors had attended Kings Hospital at least once, however always with carers or support. The one member who was not familiar with the hospital felt very lost for most of the visit.

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Summary of the results of a 1st February 2018 walkabout carried out by 6 learning disabled visitors in 3 teams who are all members of the Lambeth Learning Disability Assembly and HealthWatch R4E Enter and View visitors programme.

Finding Kings College Hospital Recommendations

1. Announcement on the Overground train indicating alighting for Kings Hospital.
2. Eye level fence sign by the bus stop with an arrow pointing in the correct direction to the hospital.

External Recommendations

1. One consistent term when referring to 'A&E' and 'Emergency' in signage and when speaking.
2. Eye level signage on fences, etc with directional arrows as not everyone is familiar with posts with attached arrow signage.
3. External signs for toilets, disabled access and cafes to be displayed on the door as well as in the corridor.
4. Indication of the colour of the sign and building that people need to attend, in their appointment letter, as some people do not read ie: blue sign for the golden Jubilee building, etc.
5. Colour coordination of Building and Ward names eg: 'Golden Jubilee' colour should be golden.
6. Better safety organisation outside Hamblin entrance at Taxi drop off.
7. More pedestrian friendly route between A & E and the Golden Jubilee Ward.
8. Better safety organisation outside Golden Jubilee Ward as it doesn't always feel safe for pedestrians.
9. Better signage for Main Reception.

Internal Recommendations

1. Colour coded lines/paths on the floor/lower wall would be helpful for people to follow to the appropriate destination.
2. A graphic image on the toilet door to indicate it's a toilet as well as directional signs visible from the corridor.
3. PALS and the Help Desk need to be more clearly marked around the hospital as the places to go for help.
4. Consistent ward colour coding and colours could be incorporated into appointment letters.
5. Internal Lift signage (and voice) with wards floors.
6. New 'no photographs' sign as existing signs not clear.
7. Better signage for Main Reception and Help Desks
8. Better signage for Ward receptions in terms of height and colour.
9. Better wall signage for Disabled access facilities.
10. Improved lift and stair wall signage
11. Clearer signage indicating from ward to another.
12. More signs to reassure visitors are on the correct path

Other Recommendations

1. More chairs to sit on in each corridor.
2. Consistency of all names, signage and wards (eg: Emergency/A & E, Main Reception/Help Desk/Information, old ward names/new ward names, PALS, etc)
3. Ward and building colour coding to be consistent and perhaps a picture system (eg: help desk or appointment letter to provide a visual showing what the sign to the entrance to unit/ward looks like to help find it).
4. Remove Ruskin Park from the Hospital map as some people thought it was a hospital building due to its shape, or put tree shapes in the green box so people could identify it as a park.