

Mother-of-four Julie lost her sight five years ago and finds tasks as simple as making a cup of coffee a chore unless the correct processes are in place.

At just 50-years-old she was diagnosed with diabetic retinopathy but with the help on her husband of 38-years, Alan, and best friend Tammy, an adorable German Shepherd/Retriever-cross guide dog, she has not only learned to live again but is now working with Shropshire's two acute hospitals to improve the experience for visually impaired patients.

Julie Southcombe, of Bridgnorth, has spent many hours in hospital waiting rooms and consultant clinics and knows exactly how it feels to be a patient. So, when approached to be a patient representative as part of SaTH's latest area of improvement work in partnership with the Virginia Mason Institute in Seattle, it was an offer she could not refuse.

"The key to coming to terms with sight loss is to learn what you can do. Making a cup of coffee is a classic example, you can sit back and let someone else make it for you or you can work out ways in which you can assist the process – I have a level indicator that beeps when my mug is filled to the right level and I keep all of my mugs in the same place every day," explained Julie.

"The work that happens within SaTH's Transforming Care Institute – the building that houses the improvement work done in partnership with the USA's 'Hospital of the Decade' – is very similar in the fact they take little steps to solve important problems.

"The staff at the Trust are amazing but sometimes they need to hear 'why are you doing that?' This is where I come in and already my experiences, along with their expertise, have allowed us to improve many aspects of SaTH's Ophthalmology services.

"For example, when it was suggested a curtain be used to divide a consulting room to create a sub

waiting room I said 'no thank you' because as a patient in a stressful situation I want privacy. As someone waiting to see a consultant I don't want to hear a fellow patient having a test.

"I've also been able to bring a stop to consultants being interrupted when with a patient. The number of times I have been mid conversation with a doctor only for his assistant to walk in and offer a cup of tea or to bring through some patient notes is ridiculous. As a patient it is very distressing when you keep losing your trail of thought when you are trying to find out what is happening to your eyes and coming to terms with sight loss."

The changes have resulted in improved patient experience and reduced waiting times. In fact, Julie's contribution has been so impressive that she will now front-up the next area of improvement work within the Ophthalmology Value Stream – reducing the number of cancelled appointments.

Julie said: "I was sceptical and dubious of SaTH's Transforming Care work when I was first asked to get involved. I wanted to have a voice but had concerns it would not be heard amongst doctors and nurses, but I am so pleased and excited I got involved, as having a patient's voice is of huge value to the Trust and the staff here really appreciate my contribution.

"I would recommend the process to anyone wanting to get involved. What we have done, and what we hope to achieve in the future, is rewarding, exciting and very constructive. By having different voices from different backgrounds you make sound decisions. It is also ok to fail because there is no blame culture within the Transforming Care Institute, and by eliminating blame you promote creativity so you can try new ideas in a safe environment."

Mr Tony Fox, Deputy Medical Director at SaTH and the Medical Advisor to the Transforming Care team,

has worked closely with Julie over the past few months and has been hugely impressed with her contributions.

He said: "Working alongside Julie has had a crucial impact on improving the quality of care we offer patients within our Ophthalmology department.

"As healthcare professionals we make decisions because we think it is what's best for the patient, but by having the voice of a patient in the room with us when making these important decisions makes us realise we don't always get it right first time.

"By working collaboratively with people like Julie we are able to provide the very best services for patients, their families and our staff."

Julie isn't the first patient to work with SaTH as part of the Transforming Care work. Previously a team of doctors, nurses and other healthcare professionals worked closely with Lin Stapely, a seriously visually impaired patient, and her guide dog Woody.

It was Lin who encouraged Julie to get involved after she was the catalyst for an overhaul to the Ophthalmology Department's booking process.

Ian Green, Learning and Development Trainer at SaTH, worked closely with Lin and says her contribution resulted in positive changes to the way the Trust communicates with patients.

He said: "We have not reinvented the wheel, but it took a patient to tell us where we have been going wrong in order for us to make the improvements. It is one thing testing our ideas with doctors and nurses but working alongside patients who regularly use our hospitals in invaluable."

To ensure the work done during an RPIW is sustained the teams involved in them monitor the improvements and report their findings to the public after 30 days, 60 days and 90 days