

# Visually Impaired Perspective: A Walkthrough at Midland Metropolitan University Hospital

September 2025



## Introduction

Healthwatch Sandwell (HWS) is the independent voice of the public in health and social care in Sandwell. Healthwatch Sandwell collect feedback from the public in Sandwell about their experiences of using health and social care services and use that feedback to work with service providers and commissioners to find ways to improve services. One of the ways that we collect feedback is to carry out projects that reflect the priorities of the public and that focus on particular services, conditions, or parts of the community.

#### Context

The Midland Metropolitan University Hospital (MMUH) opened on 6 October 2024. With such a huge change in patient service delivery locations, there are challenges for patients, visitors, and staff wayfinding around the hospital. The usefulness and effectiveness of hospital signage is a key part of the experience people receive.

The term **wayfinding** describes the processes people go through to find their way round an environment. The wayfinding process is fundamentally problem-solving and is affected by many factors, people's perception of the environment, the wayfinding information available, their ability to orientate themselves spatially, and the cognitive and decision-making processes they go through, all affect how successfully they find their way."

Through our work programme 2025/26 listening tour we found that people were dissatisfied with services and care received at the Midland Metropolitan University Hospital, including **wayfinding** to appointments and when visiting people who were receiving treatment.



In March 2023 HWS produced a report Accessibility: Are health and social care services meeting information and communication needs? The finding provided insight and detail to highlight that overall services are not sufficiently, or consistently, meeting the Accessible Information Standard. Therefore, Sandwell residents with disabilities, sensory loss, or impairments there is inequity in access and receipt of health and care services and inequalities in health and mental wellbeing.



https://www.healthwatchsand well.co.uk/report/2023-03-24/screen-readeraccessibility-are-health-andsocial-care-services-meeting

Sandwell and West Birmingham Hospital Trust (SWBHT) also recognised that there were challenges with **wayfinding** especially for people who had semantic barriers, physical disabilities or who were frail.

# **Aim and Objectives**

This project is looking at the experiences of people from vulnerable and marginalised groups who reside in Sandwell **wayfinding** around the hospital. This will include:

- **❖ COMMUNICATION FROM SWBHT ABOUT "APPOINTMENT" DETAILS**
- **❖** PREPARATION FOR THE VISIT
- **❖ G**ETTING TO THE SITE
- **GETTING AROUND THE SITE**
- **❖** ARRIVING FOR THEIR "APPOINTMENT"

# Target population and recruitment

Participants have been recruited through networks, social media platforms, and our website. We will work closely with other organisations who will collaborate with HWS to support in the **Wayfinder** experience.

- **❖ PEOPLE WITH SENSORY IMPAIRMENTS**
- **❖ PEOPLE WITH PHYSICAL DISABILITIES**
- **❖ PEOPLE WITH LEARNING DISABILITIES**
- **❖ PEOPLE WITH AUTISM**
- **❖** People who have poor mental health
- ❖ PEOPLE WHO ARE FRAIL
- **❖** People who do not speak English.

#### Why the views of People who are Visually Impaired / Blind Matter?

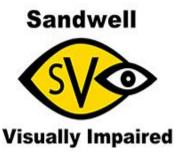
Sandwell MBC had **951** people registered as sight impaired as of February 2025. According to RNIB (Royal National Institute of the Blind) statistics, Sandwell would be expected to have an estimated 9,150\*\* adult residents living with some level of sight loss.

However, this figure is expected to be higher as to increase due to factors such as:

- An ageing population. Increase in age related Macular Degeneration.
- Increase in health conditions such as diabetes and diabetic retinopathy.

Sight loss or visually impairment affects people in many ways and in particularly everyday life tasks that people who don't hot have sight loss can take for granted. Being in public space can be very challenging for people with sight loss and in particularly large unfamiliar buildings and places.

#### Wayfinding Experiences of people with Visually Impairments / Blind.



Sandwell Visually Impaired (SVI) is a user led, not for profit, charitable incorporated organisation (CIO). Their aim is to make living in Sandwell better for people with sight loss.

SVI members are visually impaired themselves or actively support people who are. Over three quarters of their Board of Trustees are visually impaired. Healthwatch Sandwell have worked with

members of SVI for many years helping champion the importance of views and experiences of people who are blind or visually impaired. Some of the projects that we have worked very closely with SVI members include:

- Accessible information standards work by Healthwatch Sandwell endorsed by the Black country Integrated Care System (ICS).
- Digital inequalities and sight loss. (Work with service users and digital inequalities stakeholder looking at accessibility and IT.
- Accessing GP services. Views of service users.

We visited the Midland Metropolitan Hospital in the morning of the 7<sup>th of</sup> October. There were two participants accompanied by a Support Worker and a Healthwatch Representative travelling from West Bromwich Bus Station to the hospital. Three other participants met us at entrance of the hospital. One of the representatives was also accompanied by their guide dog.

# **Appointment Scenario Letters**

On the occasion No appointment scenario letters were used. However, participants informed us that sometimes when they received texts or emails for appointment that are often encrypted which makes it difficult to access.

### **Using Public Transport**



We asked a member of staff at the bus station how to get to MMUH, who told us to get the 89, no directions to the correct bus stop were given. The staff member also said "over there" which is not helpful if you are blind. Staff also made direct contact with the support worker and not the person who was blind.

When we got to the stand for 89, braille and the sign were too high up. It also said that it was a thirty-minute wait for the bus.

The participants didn't want to stand for that long and we decided to get the number 54 to Oldbury and then get the direct bus from Oldbury to the hospital. The journey took us over an hour to get there.

Members of the group recommended the following improvements that would make a journey to MMUH better.



#### **Accessing MMUH First Initial Thoughts**

As we came in the back route from the carpark into the main atrium a volunteer member quickly came up to us and asked if we needed any help which was good. We declined the offer only due to meeting other members of the group outside the main entrance.

#### Flooring Main Entrance



On arrival at the main entrance participants informed us that it was not clear when the entrance started and that it would **be useful to have tactile flooring to decipher when the entrance starts.** 

Participants also wondered if it would be possible to have a rolling audio on the first sign in the main entrance saying welcome to The Midland Metropolitan Hospital.

After making our way to the 5<sup>th</sup> floor the participants were greeted by volunteers who did ask if they could help which was very positive.

Some of the participants told us that having the coloured floor makings was a positive. However, we were told that yellow is one of the main colours that some people who are visually impaired can still see, **but they found the yellow and green lines to be too similar.** 

Participants told us that it was much harder to navigate on that day due to celebrations that were taking place, making the environment noisy and that hearing plays a vital role in supporting them.

Participants decided to way find to Gynaecology department and the Urgent Treatment Centre.



#### **Audio in Lifts**

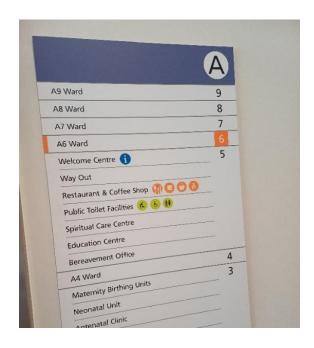
We found that there was audio is some lifts but not all list that we used and as lifts went up and down that without support this would be confusing for a blind or visually impaired person.

#### **Gynaecology Department**



We found that there were no signs on the department markings on floor 5 so we asked a very helpful volunteer who took us into the lift. Once we arrived, we noticed double doors in front of us which said controlled room this looked as though it was the staff entrance. There we no signs that said Gynaecology. We were let into the reception area and explained what we were undertaking. A staff member explained that there had been a sign outside the department which we had been informed had been removed.

We were also told by staff in the department that there are signs on level 5 directing to Gynaecology, but this was not the case.



#### Urgent Treatment Centre (UTC) via Accident and Emergency (A&E)



One of member of the group went to the welcome centre on floor 5 and asked how to get to A&E. They were told to follow the green line. They explained that they were blind, so the staff member started to talk to the support worker rather that the person who was asking the questions, there was no direct eye contact towards the blind person.

We followed the green line which ended at 2 main doors. It was difficult to know where to go next, until we noticed that there were two small paper signs on the door. Seen below.





We would recommend that the greenspace on the wall directly opposite the main doors at the end of the green line be used for large clear signage to relevant departments.

When we arrived at A&E reception, we asked a member of staff how to get to the Urgent Treatment Centre; we were told we needed to go outside. Members of the group found this journey very confusing; there were tight corners to navigate and also a sign that directed people across the road. This road was busy as it was where the ambulances arrived and departed.



Fortunately, the volunteer that was supporting us took us around the side of the building to a controlled door and it was unclear how we would get inside. We also observed the red line going around the ambulance drop off area which was again confusing.

#### Other observations

# Talking to support workers rather than the person who was blind/visually impaired.

On numerus occasions where staff would directly look at the support worker and not the person with the visual impairment.



Members of the group felt that there needs to be basic training on approaching visually impaired and blind people and although people may not be able to see it is courteous for eye contact to still be made and discussion directly with them.

#### **Toilets**

The group members support workers also found the main sign for the toilets on level 5 was too small and needed to be in colour preferably yellow as we were informed that this was the main key colour that visually impaired members may be able to see. They also found the toilet doors to be heavy.

There were lots of printed laminated signs pointing to lifts, check-in areas and the waiting area and these were confusing.

#### Navigators (Volunteers)

We would like to state that the volunteers were exceptionally polite and helpful to us. One volunteer stayed with us for over an hour in case we needed any help.

#### **Review**

Members of the group highlighted that they had found the visits useful. However, it was stated that for most people having a support worker would be essential.



Facebook: HWatchSandwell X (Twitter): HWSandwell

Instagram: healthwatchsandwell LinkedIn: Healthwatch Sandwell



# Get in touch

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Online: https://www.healthwatchsandwell.co.uk/contact-us

Share your feedback on Health and Social Care services in Sandwell by using the "Have Your Say" section on our website.

https://www.healthwatchsandwell.co.uk/share-your-views



