



Eye clinics – Enter & View

Findings from our recent visits to eye clinics based in Cambridgeshire hospitals

September 2024

healthwatch
Cambridgeshire

healthwatch
Peterborough

Image above shows Clinic 14 at Addenbrooke's Hospital

Visit information

This report relates to:

Sunflower eye clinic, Hinchingsbrooke Hospital, Huntingdon.

Tuesday 20th August 2024 10am-12pm.

Service provider- North West Anglia Foundation Trust. (NWAFT)

Clinic 14, Addenbrooke's Hospital, Cambridge.

Wednesday 21st August 2024. 10.30am-12.30pm

Service provider- Cambridgeshire University Hospital (CUH)

Peterborough Hospital

Thursday 22nd August 2024. 1.30pm-3.30pm

Service provider- North West Anglia Foundation Trust. (NWAFT)

This report contains accounts of what we observed and what people told us during the visits. It is not a representative portrayal of the experiences of all patients, carers, visitors and staff.

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About the visits

Why we visited

We visited Ophthalmology departments to find out about people's experience of eye clinics in Cambridgeshire and Peterborough hospitals.

We wanted to find what worked well during their appointment, what could be improved, and whether they had access to signposting and information to support their eye care.

During our Healthwatch Summit 2022, Cambridge University Hospital heard Jackie Cook give a presentation and she agreed to share her story:

<https://www.youtube.com/watch?v=2bT5bFzyXVk>

Although her experience specifically focused on Addenbrooke eye clinics, it illustrated the issues in all eye clinics and voices other people's experience. We have also heard that people with Wet Macular Degeneration are having long waits to receive regular sight saving injections. People are making numerous calls to eye clinics to make appointments for this treatment as switchboards are constantly busy.

What we did

During our visit, we viewed the public areas to gain an understanding of a typical day in an eye clinic. Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, it is merely an account of observations and contributions made at the time of the visit.

We spoke to patients and visitors about their care, using a survey to guide and log our findings. We asked:

- How easy do you find communicating with the eye clinic?
- Did you have a choice of communication- text, letters in large print, phone call?
- Are you informed about any delays during the appointment?
- Do you know where to get further support for eye care?
- What works well at this clinic
- What could be improved?

We also partially used the King's Fund "Is your hospital ward dementia friendly" assessment tool. This had been developed for use in hospital settings. It can help develop better supportive design for the surrounding environment for people with dementia.

Hinchingbrooke Hospital

Key findings

We spoke with staff and patients within the Ophthalmology Department at Hinchingbrooke Hospital to gain an understanding of their experiences of the department. During our visit, we spoke to 18 people waiting for treatment.

Positives

- People were pleased to have the fast track Wet Age-Related Macular Degeneration referral pathway and eye casualty service.
- Patients have a positive experience with the clinical teams within the Ophthalmology Departments.
- Some long-term care patients are able to maintain care with established teams even when not living locally.
 - The facilities are clean and well-maintained in terms of functionality and patient safety.
- The directional signs and the toilets are dementia friendly with signage.
- There is water and cups available on the main check in desk.
- We were told people have access to in-person language and BSL translators if requested.

Challenges

- People we spoke to are unaware of the Eye Clinic Liaison officer (ECLO) service.
- The wayfinding signage and signage above doorways to clinics are not a consistent colour design for people with low vision.
- The single screen to announce any delays only faces one part of the waiting area.
- The Ophthalmology Outpatient's Department is lacking patient engagement resources, such as a TV to keep patients engaged during long waits.
- Leaflets were plentiful, however situated at the furthest point in the waiting area.
- We were told that getting timely injections for Wet Macular Degeneration is difficult.
- Lack of patient information and materials available for patients in other languages. However, we were told posters informing people about translation services and Signlive for BSL are in the consulting rooms.
- People are expected to wait 2-3 hours for some appointments with treatments. There is no access to hot drinks or snacks for long waits.
- Some patients are asked to sign forms after having received eye drops and when they are unable to focus.
- Some visually impaired /blind people told us they are sometimes called into their clinician/treatment room without staff offering an escort.

- Due to the glass wall structure before the clinic waiting area, when the sun shines, shadows on the floor will give people with low vision or dementia the idea there are obstructions to climb around/over.

What people told us

People said they were happy with the professional and friendly treatment they receive from the teams, and that newly diagnosed people with serious eye issues are seen within a day or two.

Some people told us they have longer than expected waits between the recommended 8–12-week injection for Wet Macular Degeneration. They have to phone the clinic themselves to enquire about treatment.

"I know and trust the team and travel from out of the area for their care."

"There are no long waiting periods. The Doctor explained very thoroughly"

"I don't use my computer often as I have low vision and don't know where to get help to make type bigger"

"It seems to be a general issue, but I have to battle to get timely injections for wet macular degeneration treatment, the time between injections are getting longer and I don't want to go blind"

Summary - Hinchingsbrooke Hospital

Environment

The Sunflower eye clinic is found on Level 1 within the Treatment Centre. The modern Treatment Centre of this hospital is clean, calm and airy. The parking is a short walk from the car park and bus stop. The clinic is accessed either by stairs or lifts close to the stairs.

The general impression when entering the clinic was that the décor was clean and bright, and the atmosphere appeared to be calm and unhurried. The booking-in desk has a range of information posters at either side, which cannot be seen clearly, whether standing at the desk or sitting in the waiting area.

There is a mix of chairs and benches available. People told us the benches were

uncomfortable during a long wait for treatment. At the time of our visit, the waiting area was very busy, with all seats taken.

The treatment rooms were located via a doorway leading from the waiting area.

There is a separate area for children located away from the main waiting area

The Treatment Centre has closed its café situated below the eye clinic. This means people must walk to the main hospital to purchase a drink and snack. The main check-in desk at Sunflower eye clinic had a jug of water and cups available for patients and carers.

Accessibility and Communication

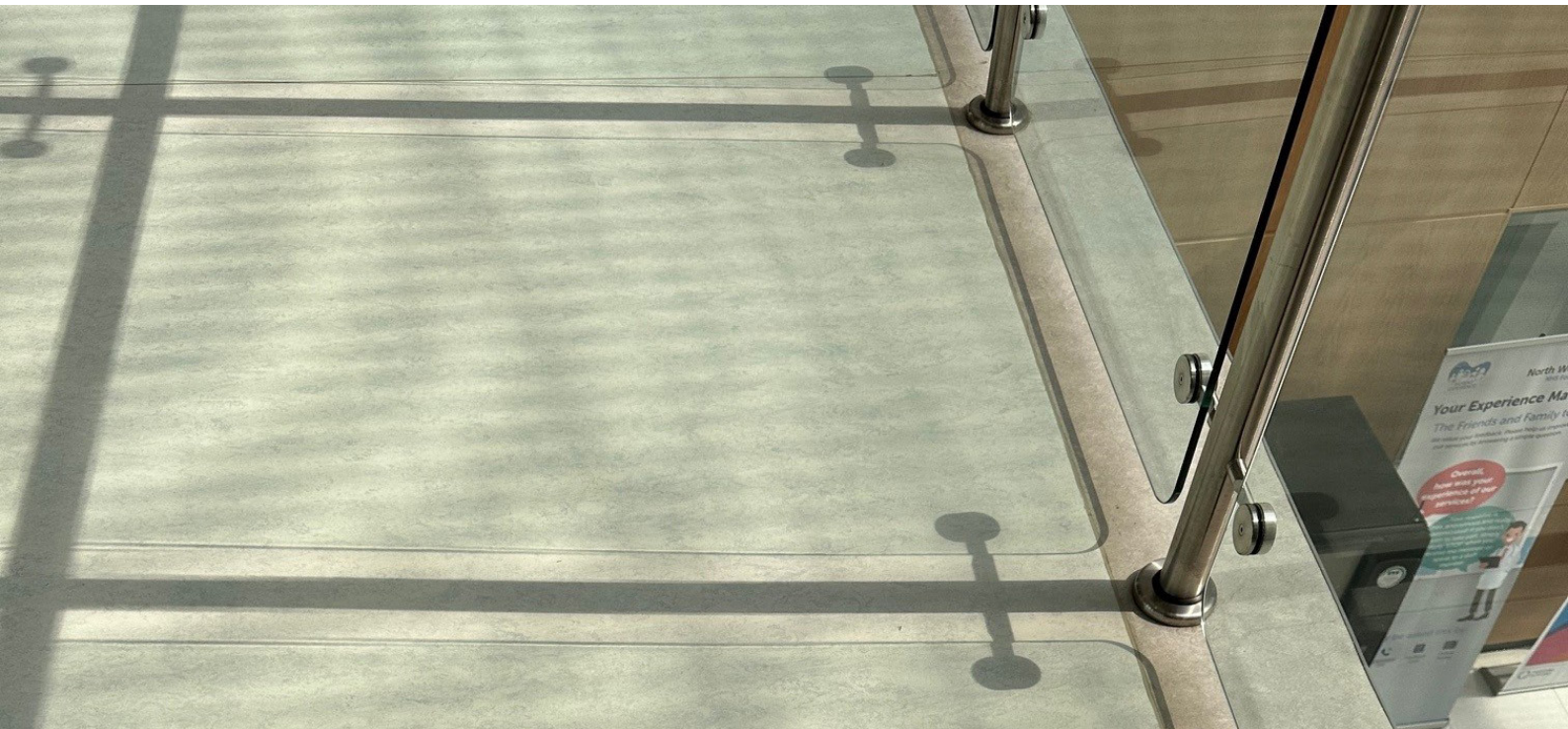
People told us they received appointments in various methods – texts, letter, email and NHS app. Some people preferred using the NHS app as they could use screen resizers to enlarge font sizes.

There is limited space for wheelchairs, which are parked along the glass sided walkway leading into the waiting area.



The clinic was very busy during our visit, and people in wheelchairs and their carers were unable to sit together.

The location being above the atrium is very echoey, meaning people find it difficult to hear their names being called. We have received feedback from people saying they have missed appointments because of this issue at all clinics.



At the time of our visit, we did not observe any person being assisted/guided to the consultation rooms.

There were insufficient screens to inform/announce any delays in appointment time to the whole waiting area.

The toilet within the eye clinic waiting area had a contrasting colour and was signed to be dementia friendly. The toilet seat was not a contrasting colour and could cause issues for people with dementia.

There was a disabled access toilet by the lift area.

There is a glass fronted display of equipment and large print books, puzzles and cards, which are made available by the Hunts Society for the Blind. There is also a large poster detailing information about the RNIB.

The signage for and around the eye clinic is not of a uniform standard. People told us if they check for signage in yellow and black text, this relates to

eye care/clinics.

While the notices are accessible for those with learning disabilities, the provision of notices in a range of languages was not apparent. This may pose a barrier for those whose first language is not English.

There is a glass wall either side to the waiting area from the lift/stairwell. When the sun shines through the roof, it gives a shadow which could be interpreted by people with low vision, or dementia as an object/barrier to climb over or walk around.

Recommendations

- Promote the Eye Clinic Liaison Officer (ECLO) services to people receiving treatment.
- People with reduced vision would like signposting to peer support groups.
- Offer people with low visibility the option to have letters and appointments in large print.
- Add an additional screen for announcing delays.
- Consider setting aside areas for wheelchairs and seating for carers.
- Review the system of completing paperwork by people prior to having eye drops.
- Review staff awareness to escort people through to clinic rooms if required.
- Consider placing a frosting/colour film over the glass walled area to reduce shadows on the floor.
- Review signage to ensure a uniform colour to identify ophthalmology services, entrances and exits.
- If providing refreshments is difficult at this venue, a note in appointment letters/texts etc to bring a snack if expecting a lengthy treatment would be helpful.
- Relocate information leaflets to a more accessible position and include translated versions.

Addenbrooke's Hospital Clinic 14

Key findings

We spoke with staff and patients within the Ophthalmology Department at Clinic 14 to gain an understanding of their experiences of the department. During our visit, we spoke to 11 people waiting for treatment.

Positives

- People were pleased to have the fast track Wet Age-Related Macular Degeneration referral pathway and eye casualty service.
- Patients have a positive experience with the clinical teams within the Ophthalmology Departments.
- Some long-term care patients are able to maintain care with established teams even when not living locally.
- The facilities are clean and well-maintained in terms of functionality and patient safety.
- The directional signs and the toilets are mostly dementia friendly with signage.
- During our visit, a few people were given refreshments if their appointments were a long wait time.

Challenges

- The Ophthalmology Outpatient's Department is lacking patient engagement resources, such as a TV to keep patients engaged during long waits.
- There is no easy access to purchase snacks during long waits.
- There is a hot drink dispenser but is situated towards the end of the corridor where most people may not see it.
- There is a water dispenser and cups available by the main check in desk, but people waiting may not return to this area for water in case they miss being called into the treatment room.
- People had to ensure they book hospital transport immediately after booking their appointment to ensure they could attend appointments.
- Some visually impaired /blind people told us they are sometimes called into their clinician/treatment room without staff offering an escort.
- There are no screens to display/announce any delays within clinic waiting areas.

What people told us

They said they were happy with the professional and friendly treatment they receive from the teams.

One person told us they live on their own and are feeling vulnerable. As they

may have a procedure on both eyes on the same day. RNIB have advised them the hospital cannot discharge home after an operation on both eyes without care in place. Addenbrooke's have said they will be discharged and advised them to contact adult social care who will assess on the day. However, at this time, social care has a 6-8 week wait for assessment.

Some people told us they have longer than expected waits between the recommended 8-12-week injection for Wet Macular Degeneration. They have to phone the clinic themselves to enquire about treatment.

One person told us that having signage in yellow and black text for all departments throughout the hospital "would be confusing as they would not be able to separate ophthalmology from other health issues".

"It would be good to know of any delays as I would know if I could go to the toilet and not miss the appointment"

"I am privileged to be treated here"

"The clinic is much more efficient than 6-10 months ago"

"My son (who is visually impaired) is going to school soon. I don't know what help he can get"



Summary - Addenbrooke's Hospital Clinic 14

Environment

We visited Clinic 14, one of three eye clinics at Addenbrooke's. The clinic can be approached either by the side of the building via the footpath, or through the main entrance and lift. The clinic is difficult to find if approaching from the outside road/footpath Robinson Way, as it is not signed. There is a sign above the door which can be seen if people approach from the Eye Unit side.



There is a new disability access ramp leading to the clinics. The handrails are grey but would be better if changed to yellow for people with low vision.



Outside the clinic is an assistance dog spending pen. During our visit we found the pen to have some remaining building materials inside. The footpath to the pen is overgrown with weeds and loose stone which could be hazardous.

There are several benches outside Clinic 14. The cataract clinic which runs alongside Clinic 14 have colourful hanging baskets making the environment cheerful. However, there were no hanging baskets outside Clinic 14.

Access to the clinic from the main building requires using the lift. This could be confusing to some people, as the level one button to gain access to the clinic area is marked "staff only". Once inside the corridor leading to the eye clinic, we found wheeled cages, a large yellow bin and a motorised vehicle throughout the corridor leading to the clinic.

The general impression when entering the clinic, was that the décor was clean and bright, and the atmosphere appeared to be calm and unhurried.





The main checking-in area had plenty of seating and information for people. Once called through, the clinical area had three waiting areas. All have plenty of seating with space for wheelchairs.

People we spoke to said they would like access to refreshments during waits between treatment. There is a hot drink vending machine opposite Clinic Room 7, but it is situated away from Waiting Areas 1 and 3 and most people were unaware of this. Some people are given a drink and biscuits in the booking in waiting area if there is a delay.

Waiting Area 3 is usually designated for people with young children. This has an inbuilt child's activity centre. During our visit, a child was in Waiting Area 2 for some time. This area does not have an inbuilt child's activity centre.

Accessibility and Communication

Patients can receive their information in various accessible formats including large print, email, audio, Braille, and via the My Chart App which is compatible with screen readers. All ophthalmology patient information leaflets produced internally are converted to large print as standard.

Large print eye clinic contact number flyers at reception and large print patient

feedback forms available.

People have access to in person language and BSL interpreters if requested and access to phone / tablet interpreting on demand is available in clinic. Interpreting services are also available via the website.

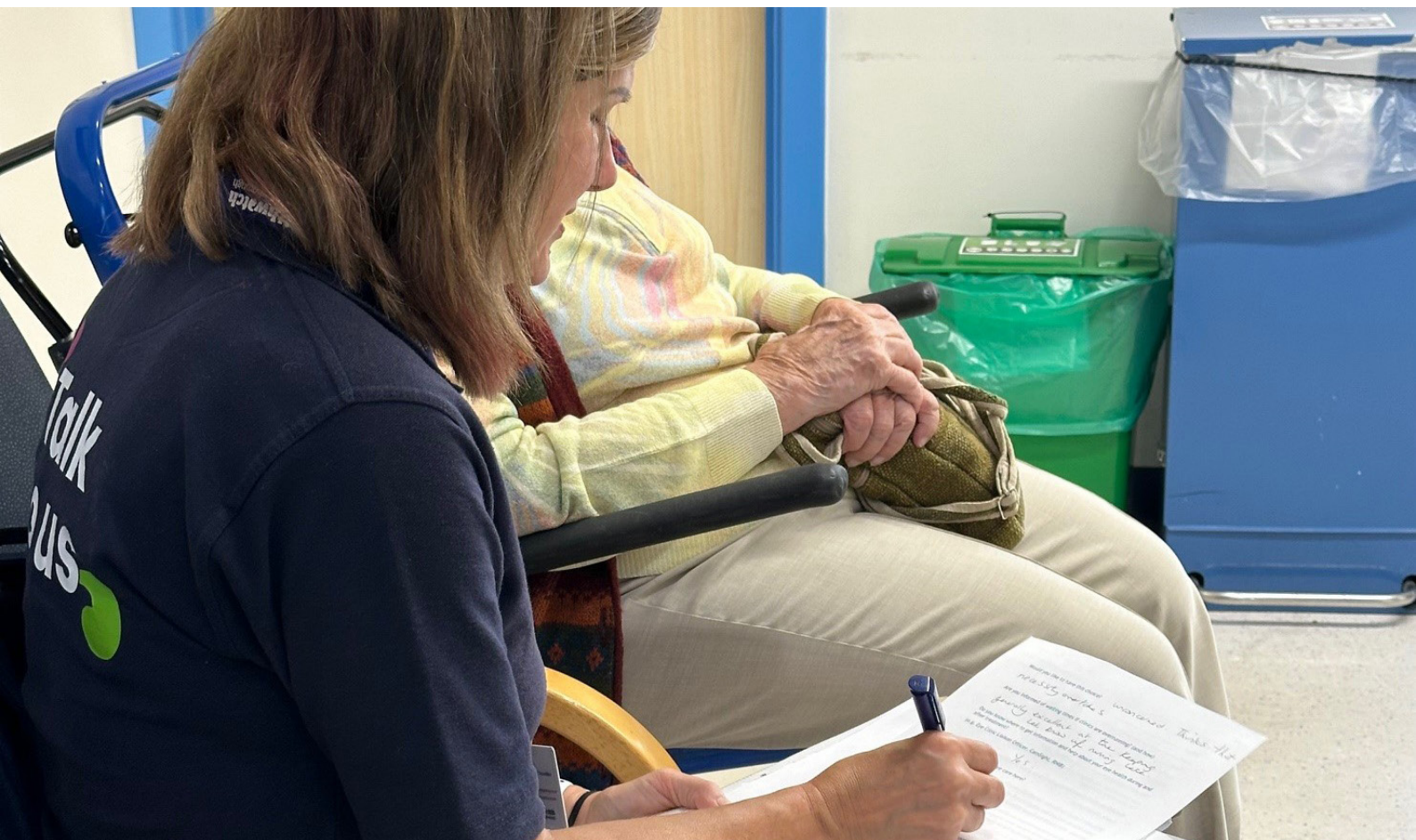
The accessible toilets had contrasting seats and rails which are suitable for people with dementia.

The ECLO service has an office located in the middle of Clinic 14. This has a leaflet dispenser outside to inform people about their service.

People we spoke to had not heard about the ECLO service but though it would be a useful service to them. However, The ECLO is also not suitable for all patients

The patients are called into consultation rooms by name. Some people who are hard of hearing could miss their appointment as they may not hear their name.

We were told people have to phone (a direct number for the clinic) to either make or change an appointment. This goes to an answerphone which is not responded to for a few days. People worry their message has not been received, or have to organise transport at short notice.



Recommendations

- Promote the Eye Clinic Liaison Officer (ECLO) services to people receiving treatment. Perhaps a walk through the waiting areas would make them more accessible.
- Add signage to the side of Clinic 14 entrance to be viewed from the road/footpath. This could be a large poster placed in the window
- Handrails of the access ramp reinstated to yellow colour has been raised previously. Healthwatch recommendation can be added as support for this request.
- If the dog spending area is to be used, weed and clean access and clear the pen of building materials.
- Review staff awareness to escort people through to clinic rooms if required.
- People with reduced vision would like signposting to peer support groups.
- Add a screen in each waiting area for announcing delays.
- Review signage to ensure a consistent standard colour to identify ophthalmology services, entrances and exits.
- Include translated information leaflets at information points.
- Review the storage of equipment in the route to the eye clinic from the lift area within the hospital.
- Add signage to the hot drink vending machine.

Service Response to Recommendations

“Thank you for sharing this report following the recent Enter and View visit in Clinic 14 which is one of our eye units. We are particularly pleased to see patients having a positive experience in our department, especially when interacting with the clinical teams. We value all patient feedback and external reviews and ensure that the recommendations are used to help improve our services.

“Working with our Ophthalmology and Estate teams we have already started to address some of the issues highlighted; our dog spending pen has been weeded and cleaned, more prominent signage to highlight the ECLO teams office has been reviewed and a request to reinstate the yellow handrail has been made.

“We will share the report with our Patient Engagement Group and ensure that actions are tracked and addressed and would like to say thank you to the Healthwatch team for your visit and for the positive feedback.”

Clare Hawkins, Head of Nursing Patient Experience and Engagement

Peterborough City Hospital

Key findings

We spoke with staff and patients within the Ophthalmology Department at Peterborough City Hospital to gain an understanding of their experiences of the department. During our visit, we spoke to 21 people waiting for treatment.

Positives

- People were pleased to have the fast track Wet Age-Related Macular Degeneration referral pathway and eye casualty service.
- Patients have a positive experience with the clinical teams within the Ophthalmology Departments.
- Some long-term care patients are able to maintain care with established teams even when not living locally.
- The facilities are clean and well-maintained in terms of functionality and patient safety.
- The directional signs and the toilets are mostly dementia friendly with signage.
- A water dispenser is provided in the main booking in area.
- An emergency phone number is provided to access triage from on call doctors 8am-6pm.
- The notice boards show how to make a formal complaint and how to escalate an issue.

Challenges

- The wayfinding signage and signage above doorways to clinics are not a consistent colour design for people with low vision. Signage at the bottom of the stair well is a piece of paper in black type and with no pictogramme.
- The main booking-in area sign to the eye clinic is partially hidden by a pillar.
- To access the clinic consulting room waiting area, people must go through manual solid double doors. People are not able to see anyone through the doors on the other side, and wheelchair access is very restricted.
- People we spoke to are unaware of the Eye Clinic Liaison officer (ECLO) service.
- Some visually impaired /blind people told us they are sometimes called into their clinician/treatment room without staff offering an escort.
- There are no screens to display/announce any delays.
- The Ophthalmology Outpatient's Department is lacking patient engagement resources, such as a TV to keep patients engaged during long waits.
- People are expected to wait 2-3 hours for some appointments with treatments. There is no access to hot drinks or snacks during long waits.
- Some people said there are long waits and wondered if several people are given the same timed appointment.

- Hospital volunteers and staff require training how to support people in wheelchairs.
- Some people who are hard of hearing do not hear their name called.

What people told us

People we spoke to said they were happy with the professional and friendly treatment they receive from the teams, and that newly diagnosed people with serious eye issues are seen within a day or two.

Some people told us they have longer than expected waits between the recommended 8–12-week injection for Wet Macular Degeneration. They have to phone the clinic themselves to enquire about treatment.

A wheelchair user told us a volunteer pushed them to the waiting area: “They left me facing the wall. When the clinician called my name, I had to raise my hand to be seen. I felt I was invisible”

Also when leaving the treatment: “The nurse faced my wheelchair away from the booking area and made the appointment without my consultation”

“I lost my vision very quickly; I would like to find support groups or peer support groups to help me live better.”

“It would be nice to get refreshments when waiting a long time between treatment”

“ I am pleased to get an appointment here today, it has been battle. I had an urgent problem with my eye. My GP sent a text sending me to a different hospital at first. They told me to attend A&E at PCH who told me to go to the eye clinic here”

The general impression when entering the clinic waiting areas are the décor

Summary – Peterborough City Hospital

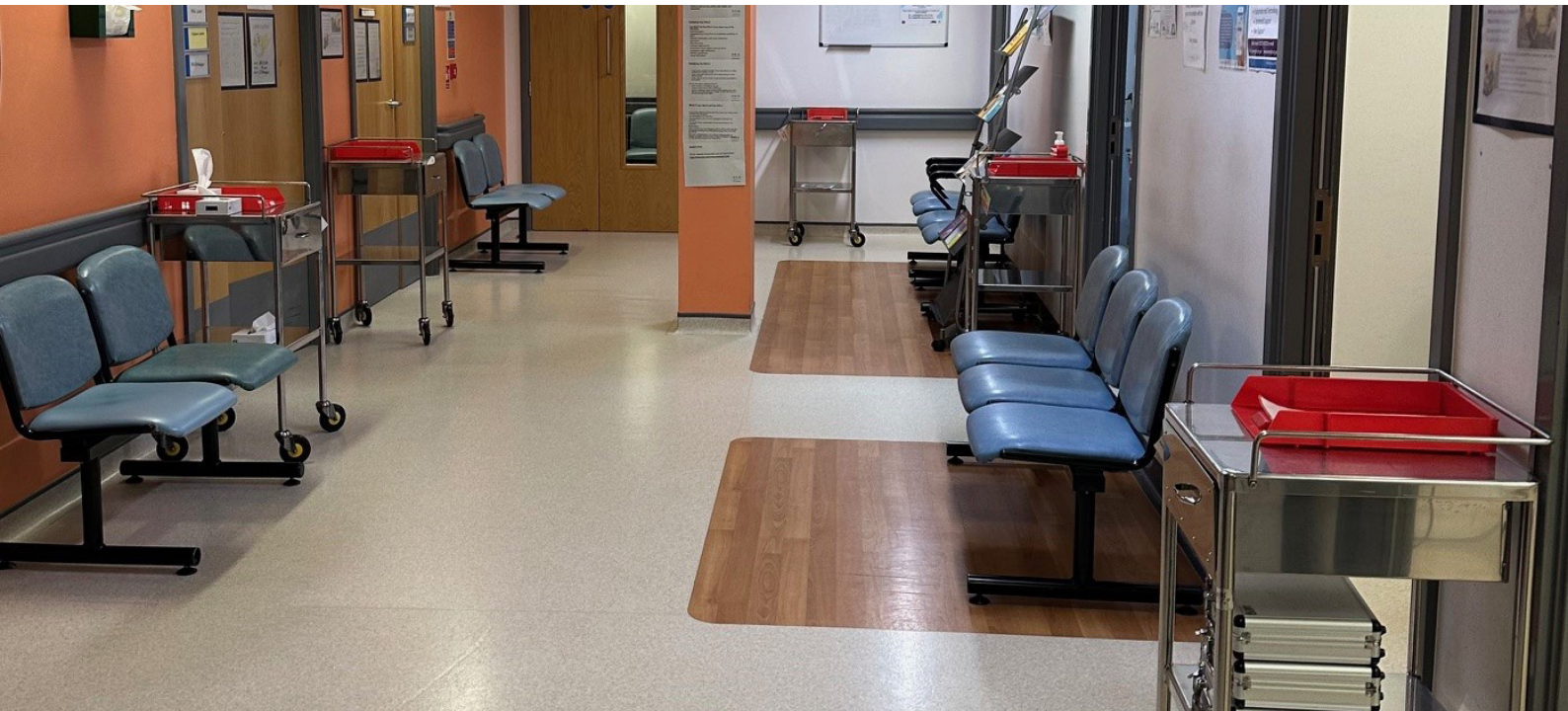
Environment

Access to the eye clinic is via staircase or lift. The signage on the staircase has a paper black and white label signing the way to the clinic.



People book into the clinic and wait in a booking-in area before being called through to the clinical waiting area. The booking-in area was clean and bright, and the atmosphere appeared to be calm and unhurried. There is a separate play area for children to one side.

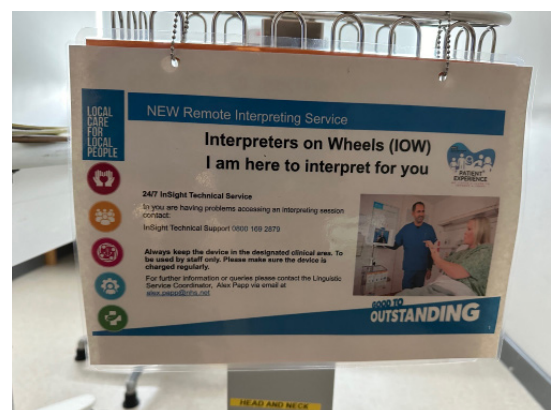
There is no TV screen to indicate any delays.



Accessibility and Communication

People received appointments through various methods – texts, letter, email and NHS app. Some people preferred the app as they could use screen resizers to enlarge font sizes.

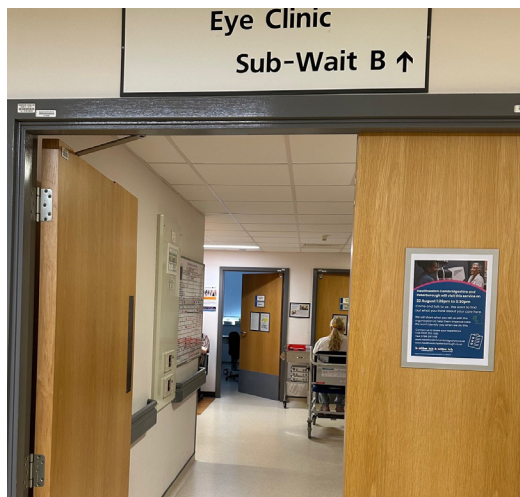
The clinic has an “Interpreter on wheels” which provides language interpretation and British Sign Language 24/7.



There is an accessible toilet with plenty of room and correct signage.

There is space within the waiting area for wheelchairs.

Manual solid double doors lead from the booking-in area through to the clinical waiting area. This is not ideal for people with accessibility issues.



Only one person we spoke to had used the ECLO service. They said it was very useful but could have used further support.

There are information leaflets available, but none in other languages.

Recommendations

- Promote the Eye Clinic Liaison Officer services to people receiving treatment. This could include a large poster with details of help available in each waiting area. Edit the patient information sheet to include details about the ECLO service.
- Refresh training staff and volunteers how to transport and support people in wheelchairs.
- Review staff awareness to escort people through to clinic rooms if required.
- People with reduced vision/newly blind would like signposting to peer support groups after discharge.
- Offer people with low visibility the option to have letters and appointments in large print.
- Add a screen in each waiting area for announcing delays.
- Review signage to ensure a consistent standard colour to identify ophthalmology services, entrance and exits.

- Include translated information leaflets at information points.
- Provide water and cups in the clinical waiting area.
- Suggest in appointment letters/phone calls to bring own snack in case of long waiting times.

Service Response to Recommendations

“Thank you for forwarding your report following Healthwatch Cambridgeshire and Peterborough’s positive visits to our Ophthalmology Departments at North West Anglia NHS Foundation Trust.

The patient experience and voice is incredibly important to us and we have found your report supportive in illustrating areas where we can, and will, improve.

I have met this morning with the Ophthalmology Sisters and Divisional Operations Manager to go through the report and work through your clear recommendations.

We will now transcribe this into an action plan which we will take through our internal governance processes to offer assurance that we are working to improve our environment and increase patient satisfaction.

I would like to thank you and your team for such lovely feedback and for your thoughtful recommendations.”

Melanie Spani, Matron- Ophthalmology, ENT, Oral Surgery, Plastic Surgery and Dermatology (NWAFT - Hinchingsbrooke and Peterborough City Hospitals)

Method

Healthwatch Cambridgeshire and Peterborough have a statutory right to enter Adult Health and Social Care Services to view the premises and to speak with both patients and staff members.

We used our ability to enter services and review through a format called an Enter and View. This methodology is a tool originally created by Healthwatch England, and our visit was conducted alongside their guidelines and our Enter and View.

The ability to Enter and View services offers a way for Healthwatch to meet some of its statutory functions and to identify what is working well with services and where they could be improved.

We preplanned and arranged this visit with the teams at the three eye clinics, allowing time for staff and patients to receive notice.

Prior to our visit, posters were distributed and displayed within the Ophthalmology Department, informing patients about our planned visits.

The aim of the review at each clinic was to ensure that the perspective of the patient is captured, therefore Healthwatch Representatives (staff and volunteers) focused on seeing things through the “eyes of the patient”.

By walking around, observing the surroundings of the Ophthalmology Department, speaking and asking questions to both staff and patients, Healthwatch was able to gather snapshot of how the service was functioning on that day.

The visits gave us an opportunity to:

- Collect the opinions and experiences of people using these services, including their carers or relatives.
- See the nature and quality of services.
- Talk to staff who are providing care.

This report recommends or suggests ideas where we see areas for improvement.

These visits were carried out by members of staff and two volunteers who are all trained to do this work. They are called Authorised Representatives. Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch safeguarding policies.

Partnership Boards

Part of Healthwatch role is to facilitate Cambridgeshire County Council and Peterborough City Council’s Adult Social Care Partnership Boards.



The Sensory Impairment Partnership Board role is to support and improve care for people who use health and adult social care services. They do this by including people who use these services in their design, delivery and evaluation.

King's Fund Toolkit

Our team of Healthwatch Representatives used elements of the King's Fund environmental assessment tool for use across health and care settings to assess whether the environment would be considered accessible and dementia friendly.

The questions chosen are relatable to the eye clinic environment.

1. The environment promotes wellbeing.
2. The environment encourages eating and drinking.
3. The environment promotes mobility
4. The environment promotes orientation.
5. The environment promotes calm, safety and security.

Find out more about this toolkit from The King's Fund:

<https://www.kingsfund.org.uk/insight-and-analysis/projects/enhancing-healing-environment>

Acknowledgements

Healthwatch Cambridgeshire and Peterborough would like to thank the North West Anglia Foundation Trust (NWAFT) and Addenbrookes for their cooperation and warm welcome to their ophthalmology facilities.

Thank you to our Authorised Representative volunteers for their work and time dedicated to gathering the feedback from people using the service needed for this Enter and View.

We would like to thank:

Melanie Spani, Matron- Ophthalmology, ENT, Oral Surgery, Plastic Surgery and Dermatology (NWAFT)

Elizabeth Trewick, Ophthalmology Sister. Hinchingsbrooke Hospital (NWAFT)

Jo Bridger, Ophthalmology Sister. Peterborough City Hospital. (NWAFT)

Dorita Plichowsha, Senior Sister. Outpatients Ophthalmology Clinic 3&14. Addenbrookes

Clare Hawkins, Head of Nursing Patient Experience and Engagement. Addenbrookes.

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Share your views

Services need to know what needs improving. Do you have an experience of health or social care you would like to share? You can use the contact details above to get in touch or text us on 0752 0635 176

Feedback via our websites:

<http://www.healthwatchcambridgeshire.co.uk/content/have-your-say>

<https://www.healthwatchpeterborough.co.uk/feedback-on-care/>

Please get in touch if you would like this report in a different format. We can offer this publication to be in other languages, large print, braille etc.

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