

# S.U.D.A Cancer Services in Focus Mini Report

## Who we are

We are Healthwatch Derby – Derby's only independent consumer watchdog with a remit to scrutinise and report on Health and Social Care services. These include public funded services such as NHS Trusts, Walk in Centres, Primary Care, Mental Health, Community Care, Social Care, Domiciliary Care, and any kind of Specialist Care or any other services that supports health or social care needs of residents living in Derby city – or accessing services in Derby City.

### What we do

We observe services directly and conduct 'Enter & Views'. We carry out a number of public facing engagements and speak to patients and carers directly, as well as hearing from staff members. We undertake mystery shoppers and engage volunteers. We produce bespoke reports and feed local intelligence directly to those who are responsible for commissioning services in Derby City.

## **About this report**

This report focuses on the Cancer Services available at Royal Derby Hospital, part of Derby Teaching Hospitals NHS Foundation Trust.

Patient Experience (100 individual comments in total) was collected via specific public facing engagements in January 2017, and presented to the Trust for a full response which is included on page 15 to end of report.



#### What did we observe

One patient waited really long for community transport to take him home, when he was collected, he was told that he wasn't down on the records for collection and that's why he got missed.

All patients in waiting room, were offered free tea/coffee, the gentleman who was waiting a long time for transport to take him home, was given a sandwich while he was waiting.

### **Case Studies**

# Case Study 1

"I am overwhelmed at the treatment, every single person that works here from the receptionists to the consultants, are so kind.

The only negative is the car park, the only way to guarantee a parking space or not get caught in gridlocked traffic, is to arrive way too early for your appt. The clinic is really busy, so unfortunately even though you arrive early, you are not seen until your appointment time.

I stayed on a cancer ward last year, on the day of my discharge, I was told I could go and so I rang my husband to collect me, we don't live in Derby and so he had a 45 minute drive to get here, he parked in the short stay because we both thought I could go immediately. I did not leave until five and half hours later, waiting for a doctor to sign a prescription, I should have been told how long the process takes, I would never have rang for my husband to come and wait, I took them at their word that I could go home.

The cost of parking on that day was £25, and this was through no fault of our own, we were not impressed (Healthwatch Derby informed patient to report back to the relevant department if a similar situation arose in the future)

All of the staff are really good, kind friendly, I have to give a special mention to Drs Laugharn, Jones and Vijayan they are excellent"



## Case Study 2

"My medical condition is new to me, and there is a lot I don't know, I have been given a lot of information, but I don't feel as if I am on "information overload," they seem to give you just enough to take in and digest and I think that's really good.

The staff have given information to me about my health in a way that is not frightening, it is given in an "acceptable way." I think even the most nervous person would be ok about the way sensitive health information is given to cancer patients by RDH staff.

I am the partner of a patient with cancer and the staff here make me feel very involved, I am able to ask questions and they take the time to give me the answers that I need. I have been linked with a breast cancer nurse and it's great, I can call her at any time.

I have previously been treated at Nottingham City hospital and did not like the way I was treated there, so when I got ill with breast cancer, I asked to be treated at RDH and I have not regretted it, I have been so well looked after.

My only problem with RDH is the parking, it is a nightmare, I don't live in Derby and so I travel for an hour to get here, and then wait around, because I have to arrive much earlier than I need to, in order to get a parking space, and then my radiotherapy treatment is just for 5 minutes and then I go. I have to repeat this every day for a month.

My suggested solution to the parking problem, is a mobile "radiotherapy van," it could travel around to key areas in Derby/shire and people come to it for their appointment rather than everyone coming to the hospital and causing a traffic grid lock"

# Case Study 3

I am treated with dignity, I have breast cancer and am always in a state of undress, but after examinations/treatment, the staff always ensure that I am covered up by my gown and that is a very nice touch



Sometimes it can be difficult to get through on the phone to the section that deals specifically with breast cancer. I had an operation on my breast and I thought the wound was leaking, I rang the department and when I did get through, they just said, it was fine and would be ok, that was without seeing the wound. When I went for my radiotherapy, they said they could not treat me, because the wound was infected and told me to contact the breast cancer ward.\*\* this happened end part of last year (2016), Healthwatch Derby were unsure whether issues are with a ward or OPD, patient definitely doesn't want to take the issue any further as really feels that RDH gives an excellent cancer service, despite this recent issue \*\*

The staff are very friendly, they get used to seeing the patient, because you have to come everyday for your treatment. When it comes down to the last day of treatment, they are so happy for the patient

I am extremely afraid of needles, I would consider myself to be needle phobic, radiotherapy department has been really great, they have had to compromise my treatment plan, as I cannot take anything administered via a needle. The staff take the time to talk to me about how the treatment can be offered in an alternative way, the doctors talk to me and I feel as if I have had a say in how I receive my treatment.

When I had my initial mammogram I was fine, when I had the appointment to be told that I had breast cancer, I was fine, the problem was they wanted me to immediately go for a biopsy and I just couldn't because of the needle, I literally had to walk out of the hospital as I couldn't face having an injection. Once my needle phobia had been discussed, a date was set for my biopsy, I turned up and they wanted to inject me, they were not aware of my needle phobia and it had not been written on my notes anywhere. I would never have coped with the needle, so fortunately, they were able to do a quick swop and I had the operation with gas and air. I feel as if radiotherapy don't compromise my wishes and know to never give me needles, but "breast care," just don't understand, e.g. they have to put a " tattoo" on to identify the affected breast, they say it's just a small tattoo, a small needle prick, but they don't seem to have the understanding that I just cannot do it, this is my



only little issue, but I still maintain that RDH cancer care is fantastic and would never fault them"

## Case Study 4

"The staff here are fine, they are helpful and considerate. The appointments are not rushed, you feel as if you have time to ask questions.

The radiotherapy equipment seems to break down quite often, this is not the fault of the staff, but it does make your appointment time last longer.It's a real issue, depending on your appointment time, you have no choice but to arrive much earlier than your appointment time, to try to get a space and not get grid-locked in queues.

Patients in this clinic get concessionary parking at £1 per visit, it's a great help when you have no choice to come everyday to receive your treatment. If you have to come to the hospital really often, parking works out cheaper with a weekly pass, it is good to have that option available. I like the fact that the weekly pass is transferable between family members/friends. I have previously been treated in Leicester Royal and the weekly parking pass was dedicated to one vehicle only and so on that score, Derby does much better.

I notice that there are patients here from places such as Leicester and Lichfield, it is an indication to me of how good this hospital is and I am sure they could go to closer hospitals"

## Case Study 5

"I can't fault the service, the staff are brill and vey pleasant. I was admitted for chemo in 2016 and the experience was brilliant, I was very well looked after. I have been given a dedicated telephone number to ring, and if I am unwell, I don't need to go through my GP or A&E, I can just ring and be admitted onto a cancer ward

The hospital have really included my husband in everything and we both feel really happy about this, he knows me and knows what I want

I have to travel on the A38 to get to the hospital and there can be delays if there is an accident and then parking at RDH is ridiculous, sometimes I have



been stuck in a queue at RDH for nearly an hour, fortunately the staff are really understanding if you are late for an appt.

Communication/admin is great, you get letters sent in time for appointments/information etc they phone you if they need to speak to you about something. The staff will support me and listen to me, if I feel as if I just want to talk

(Partner of patient) I supported a family member through cancer in 2008 and currently doing the same again with current partner, one improvement I can definitely see is communication, patients are better informed about their appointment times also the staff have more time to speak to patients and give relevant information in more of a caring and sympathetic nature

My previous partner died of cancer in 2008, at that time, my GP visited me at home as I was in a bad state, he prescribed me some meds to calm me down. I decided not to take them, but instead I "hit the bottle." I got myself off the drink and I got myself "back together." The doctor never followed me up to see if I was ok or whether I took the meds, I was just left. Losing a loved one to cancer is a hard journey and only "the bereaved" really understand what it is like"

## **Case Study 6**

"The doctors are really good and I appreciate the way patients have a say in their own treatment. I was having chemo, they kept changing them, but none of them suited me and I was getting really ill. In the end, I said to the doctors, I am not taking any more chemo and they agreed because they could see the affect it was having on me.

My cancer was discovered through a mammogram, they are free of charge and I just cannot understand why people will not go and have them done.

Once I was diagnosed with breast cancer, all appointments etc moved very quickly and efficiently.

When I went for my biopsy, I asked the nurse the direct question, do I have cancer, she was very honest and her reply was "there is something there," which I read as "yes," I have cancer. I appreciated this very much and when I



went to see the consultant to confirm the diagnosis of cancer, I was already mentally prepared for what he had to say, that may not work for everyone, but it certainly worked for me.

I haven't cried since my diagnosis of cancer, perhaps at the end of my treatment, I will be relieved and my emotions will kick in then. I look back on the last 7 months and my journey with cancer and I can't believe what I have been through, one good thing is that the cancer team have been great, and I have felt very safe under their care, I have been well looked after"

## Case Study 7

"I started off my cancer treatment in Burton and then it was taken over by RDH, everything has been good, RDH explained every thing well when I started treatment here.

Appointments are executed well, you know exactly when your appointments are, I got an appointment schedule right at the start of my treatment so it was all planned out, I got information to tell me what will happen during the appointment, everything is done really well at RDH, it's excellent.

I live out of Derby and the staff have kindly pre-agreed all my appointments that work around my travel, every patient has to accept late appointments at 6.30 pm and they agreed to only give me 1 late during my course of treatment and I really appreciate that.

The car paring is terrible, but now that I understand the issue, I factor that into my travel arrangements.

Currently, I am on 15 consecutive days of treatment, and the concessionary car park agreement is great, it only costs £1 per visit for patients receiving cancer treatment - its' great.

The communication between the hospital and my local GP has been great, when I have needed a sick note, I have only had to ring my GP and ask for one, because they have all the info they need from the hospital to write the sick note"



## **Case Study 8**

"Due to my condition and treatment, I cannot go home in a car or public transport and so I have to have the community transport, it can be a bit of a wait. Currently I attend hospital 5 days a week for treatment and I sometimes arrive 2 hours before my appointment and then wait a long time after to be picked up and then I have to travel the journey out of Derby to get home, but that's not really the hospital's fault it is just how community transport works.

My life has been on hold since Oct 2016 when I was diagnosed with cancer, I feel as if I cannot plan or get on with my life until the journey is over. However, RDH are great at their admin and at the start of my treatment, I had all my appointments all set out for me and this has been great, I cannot get on with my life, but at least on a daily basis I know where I am with my appointments.

I have been give a "rapid response no," so I can ring for help or info at any time, it is so comforting to know that number is there and if they cannot respond to your call immediately, they always ring you back within minutes"

# Case Study 9

"I became really ill with my medical condition 2 days ago, I was literally lying on the bathroom floor in major pain, my husband called the ambulance and they arrived in moments, they gave me morphine and were very patient with me, they waited until the pain subsided and I was able to move and then they moved me and took me to hospital, they were very caring.

My medical condition has been on/off for the past 2 years and I have been in/out a number of times between medical and surgical assessment wards. I was taken straight to surgical assessment as I am awaiting surgery. The staff here are always nice and always look after me well, they keep me posted with test results and their plans for my future treatment.

I was told I was having my operation at the end of the week and so I would be discharged and re-admitted, however, my test results were quite bad and so I woke this morning and they said they would do the surgery today. I was



really pleased about that, as it meant I could just get it done here and now rather than go home and then come back in again in the future.

I have multiple illnesses and so I attend several different OPDs, for most of them, the waiting time is poor, orthopaedics does have a board which indicates the waiting time and that helps

This clinic must have the longest waiting time, and they are not even polite enough to let you know that you will be delayed and the reason for it

My GP has referred me for several appointments at the RDH, and it has taken ages from the time of referral to the appointment, I have been told e.g. that the wait is 3 months and then waited twice as long. I would prefer the hospital to be honest and if you are going to have a long wait just tell me the truth so I can prepare for it and not get anxious thinking I have been forgotten.

Parking is terrible, I have to arrive a lot earlier than my appointment just to make sure I get somewhere to park. Having attended various clinics I would conclude that the staff are 50/50 - a mixture of good and bad.

I don't live in Derby and there are other hospitals I could go to for treatment, despite parking issues, waiting around for your appointments and some of the staff not as nice as others, given the choice, I would always chose to come to RDH for treatment"

## Case Study 10

"Dr Smith is a really good doctor, he is very nice, he knows that I come a long way to see him and if I arrive early for my appt, he will see me early and not leave me waiting

I like seeing Dr Smith because his appointments are very informal, he will let me see his computer screen and go through all test result and information

I didn't want to have chemo when I was diagnosed with cancer, my previous doctor (before Dr Smith) "bullied" me into having it, where as Dr Smith talked to me nicely and explained the benefit of having it......there is such a



difference in the approach"\*\*Patient did not wish to raise a formal complaint\*\*

## **Case Study 11**

"I am Polish and I need an interpreter for my appointments, the hospital provides one for each appt. I am very happy with the hospital and how they have looked after me so far.

I am with my elderly mum today for her appointment and on my mums behalf I would say RDH give a first class service to their patients.

Appointments are great, you never have to wait too long to be seen. One time the cancer blood clinic was closed and so we had to go the general blood clinic and it was a very long wait.

We don't live in Derby and my mum could have her treatment at other hospitals, Nottingham being the nearest one to us, but we also chose RDH as we feel this is where she will get the best treatment.

As a family we feel able to discuss and be involved in our mum's treatment and we feel that RDH values our views as the family of an elderly woman who is not really able to make decisions for herself"

## **Patient Comments**

- The service received from this department is excellent
- The staff talk to you and not at you
- **❖** I feel listened to by the staff
- ❖ Some cancer patients don't want to know about their condition, I wanted to know everything, I can see where doctors have a difficult time trying to balance what they say to patients, I wanted to know every detail of my cancer and I was told everything, it was all very clear the staff are brilliant, they just know what their patients need and they treat you as an individual
- I am in my mid 70s and I thought the NHS only cared for young people, but the care I have received has proved me wrong



- ❖ The treatment I have received is so good, I don't think I could have got any better treatment if I paid privately
- This is just my 2nd visit and I have no complaints at all, the service here is brilliant
- ❖ I have had a lot of useful information about my condition and I get answers to all the questions I ask
- **❖** The staff here are so nice, I am always well looked after.
- ❖ There are times when I have been quite afraid about my health issues, and the staff always take the time to explain my condition and treatment to me.
- I just cannot find any fault with this service
- They accommodate me with appointment times and try to give time slots that suit me
- **❖** The service in this department is excellent, I just cannot fault it
- The staff are kind and efficient
- ❖ After treatment, I have to wait for community transport to get me home, sometimes it's a long wait and sometimes it's quick, if I have to wait long, then so be it, I wont complain, everyone has a job to do and I just appreciate the lift
- ❖ I feel able to ask questions, I get answers to my questions and if they cannot help, they will sign post me to where I can get answers/the information I need
- ❖ I don't live in Derby and so initially I was treated at St Oswalds hospital in Ashbourne, I was then passed over to RDH to continue with my treatment, everything was explained to me and the transition was smooth
- ❖ I recently had a biopsy "day case" operation at RDH, I was fed, I had enough drinks, I was treated well, the whole experience was positive
- ❖ RDH is a big hospital, but it is easy to find your way round as the signage is good
- ❖ I had my cancer operation in Burton and my radiotherapy I am having in RDH - the service from both hospitals has been excellent
- The staff explain things very well and you also get answers to your questions

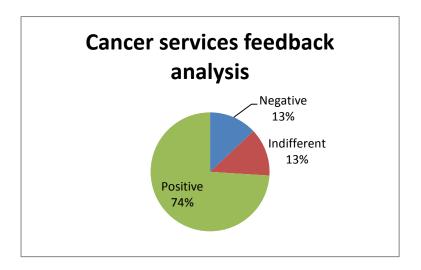


- **❖** I have a 50 mile journey from RDH to/from home, it is really frustrating to arrive and have so much problems finding somewhere to park.
- The £1 concessionary parking for patients is really good
- ❖ Derby people should not complain as they have a big super hospital right in their midst with easy access to it, a lot of people that use RDH (like myself,) live right on the border of East Staffs and Bham and their "local" hospitals are not so easy to access, based on route, traffic etc it is actually easier for us to come all the way to Derby for treatment
- ❖ The treatment here is marvellous, I cannot fault anything, the service and the staff are all brilliant.
- ❖ The staff go out of their way to help you, I can query things and ask questions without feeling bad about it.
- ❖ I have a dedicated number that I can ring at any time if I have any questions, it's been useful when the clinic has been closed.
- ❖ The service is marvellous, you do wait around for a bit, but I expect that to happen anyway, I am just grateful for a service that will take me to and from the hospital
- All the staff here from the receptionists to the surgeons are fantastic, they explain everything really well
- ❖ I can't fault the doctors, once you are actually in your appointment, the doctors are good
- **❖** The staff here are lovely
- ❖ I never feel fearful of asking questions, the staff will always try to give an answer to my questions
- ❖ I once waited outside clinic for a taxi I had called, and I was waiting for ages, he kept calling me and said he was on the hospital grounds but grid locked in traffic and just couldn't get to me



## **Summary**

What have we heard from all the patients we have spoken to, we collected 100 comments in total:



## **Analysis**

Although there are strong numbers of positives, the report reflects some of the negatives which have caused real distress to patients and their families. It would be wise to have a balanced approach to both positive and negative trends. While we showcase the positives, we would encourage the Trust not to dismiss the negatives – for in improving these negatives the service would not only benefit from positive trends, but provide a much better service to all involved.

Specific Issues Highlighted - RAG Rated

Parking is a major issue

- Delays with Community Transport
- Poor waiting times for OPDs
- ❖ One patient advised they felt bullied by a member of medical staff
- **!** Empathy, compassion, and excellent service by Cancer Services staff
- Good level of information provided to patients
- Enabling patients to deal with a difficult diagnosis
- **\*** Effective initiatives such as the rapid response number for patients



- Good communication (categorised as improved communications by patients/family who have used the service before)
- Giving time and not rushing patients
- Listening to what patients have to say
- Overall classed as a caring service by the majority of patients interviewed

# Recommendations

- Waiting times in OPDs could be better communicated so patients are better prepared
- Review of resources such as Radiotherapy van to perform outreach across Derbyshire
- More publicity of concessionary parking charges needed
- ❖ More information should be made available so patients feel able to complain if on any occasion they feel bullied by a member of staff – patients should be asked at each stage of diagnosis and treatment how their experiences have been overall.

## S.U.D.A Details

- S.U.D.A stands for Service User Data Analysis a reporting format piloted by Healthwatch Derby in 2013, and used to capture patient feedback in a balanced and exploratory manner.
- Engagement activities were undertaken by Healthwatch Community Engagement Officer Sandra Dawkins in January 2017
- Report produced by Healthwatch Quality Assurance & Engagement

  Manager Samragi Madden in April 2017
- Report approved by Healthwatch Derby CEO James Moore in April 2017
- Report quality assurances sought from Healthwatch Derby Chairman

  Steve Studham and the Healthwatch Derby Board in April 2017
- Report sent to Derby Teaching Hospitals NHS Foundation Trust April 2017
- Response received from Derby Teaching Hospitals NHS Foundation

  Trust June 2017



- Final collation, quality assurance, draft approval July 2017
- Final report which includes a full response from the Trust published July 2017

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# **Response from Derby Teaching Hospitals NHS Foundation Trust**

Cancer Services in Focus
What did we observe

1. One patient waited really long for community transport to take him home, when he was collected, he was told that he wasn't down on the records for collection and that's why he got missed.

We are extremely sorry to hear of the delay this patient experienced due to not being placed on the list for transport home after their appointment. The Trust is having ongoing discussions with East Midlands Ambulance Service (EMAS) regarding issues with community transport. For Cancer Services, the General Manager is aware of the transport issues patients are experiencing and is taking these forward by personally meeting with colleagues from EMAS to try to resolve these.

2. All patients in waiting room were offered free tea/coffee, the gentleman who was waiting a long time for transport to take him home, was given a sandwich while he was waiting.

Thank you for this positive feedback. We aim to ensure patients feel comfortable, safe and welcome while they are here and it is really pleasing to hear that patients were offered refreshments and food in the waiting area.

Case Studies
Case Study 1

"I am overwhelmed at the treatment, every single person that works here from the receptionists to the consultants, are so kind.

The only negative is the car park, the only way to guarantee a parking space or not get caught in gridlocked traffic, is to arrive way too early for your appt. The clinic is really busy, so unfortunately even though you arrive early, you



# are not seen until your appointment time.

We are so pleased that this patient found all of the staff involved in their care to be kind. Often the small things we do make a big difference to our patients and offering a kind word or gesture is just as important as the actual treatment.

We are sorry to hear of the difficulties with gridlocked traffic, parking and needing to arrive early in order to secure a space. We were aware of the problems our patients were experiencing with gridlock in the internal road system and introduced a new one way system around the hospital site on 10 April 2017 to address this. The new one way system has alleviated some of the gridlock we had around the site and has received positive comments from patients and visitors. Please see the map below which shows how the new one way system works:

There are a number of other developments underway to improve access to parking spaces for our patients and visitors. These improvements include gaining planning permission to extend the staff car park, which in the long term will alleviate some of the capacity issues for patient and visitor parking, and changing the front two car parks to short stay (up to three hours) to release spaces that would otherwise have been occupied by drivers staying all day.

Unfortunately, if patients arrive early it is not always possible for them to be seen ahead of their appointment time. Patients will be seen in the order in which they are scheduled. However, if other patients do not arrive, we will bring others forward. Occasionally clinics can over run if patients need additional time with the doctor.

We hope that this patient is reassured by the ongoing work to improve access to parking spaces in the hospital grounds.

I stayed on a cancer ward last year, on the day of my discharge, I was told I could go and so I rang my husband to collect me, we don't live in Derby and so he had a 45 minute drive to get here, he parked in the short stay because we both thought I could go immediately. I did not leave until five and half hours later, waiting for a doctor to sign a prescription, I should have been told how long the process takes, I would never have rang for my husband to



# come and wait, I took them at their word that I could go home.

We would like to apologise for the delay in this patient's discharge. This has been fed back to the ward areas so they can be more vigilant in trying to arrange more timely processing of prescriptions and communicating timescales with patients.

It normally takes around two hours for medications to be prescribed and dispensed. We are sorry that this patient waited in excess of the usual time and that they were not informed of the delay. Work is being undertaken within the Trust to improve the discharge process for the benefit of our patients.

The cost of parking on that day was £25, and this was through no fault of ourown, we were not impressed (Healthwatch Derby informed patient to report back to the relevant department if a similar situation arose in the future)

Carparks 1 and 8 were changed to short stay (maximum of 3 hours) carparks in 2016. This was done to assist with problems with the internal road system becoming gridlocked at the front of the hospital site each day.

Our intention is to never charge a patient or relative £25, especially if their extended stay is due to care, treatment or discharge being delayed.

Departments have been provided with a stamp to mark tickets if this should happen and patients can exchange their stamped ticket for a pre-paid 3 hour ticket at the main reception.

Had this been raised at the time we would have offered to reimburse the family and we would be happy to do so if they would like to contact us via the Patient Advice & Liaison Service (PALS).

The Senior Nurse for Cancer Services will ensure that this arrangement is communicated to patients in the clinic area to make them aware.

All of the staff are really good, kind friendly, I have to give a special mention to Drs Laugharn, Jones and Vijayan they are excellent"

Thank you for your kind words which will be passed on to the staff involved.



We report on compliments at the Cancer Programme Board, Divisional Quality Meeting so that the positive feedback and best practice is highlighted.

## Case Study 2

My medical condition is new to me, and there is a lot I don't know, I have been given a lot of information, but I don't feel as if I am on "information overload", they seem to give you just enough to take in and digest and I think that's really good.

It is really good to know that the information provided to our patients is of the right level so that it does not overwhelm them during a time when they are absorbing the news of their diagnosis. This feedback has been passed onto the teams in Cancer Services.

The staff have given information to me about my health in a way that is not frightening; it is given in an "acceptable way." I think even the most nervous person would be ok about the way sensitive health information is given to cancer patients by RDH staff.

Thank you for letting us know that the information was provided in sensitive way. Our staff are very conscious of the importance of taking care to communicate information to patients following a diagnosis of cancer.

I am the partner of a patient with cancer and the staff here make me feel very involved, I am able to ask questions and they take the time to give me the answers that I need. I have been linked with a breast cancer nurse and it's great, I can call her at any time.

Thank you for these kind words about staff taking the time to listen and answer questions. This positive feedback has been forwarded to the Breast Cancer Nurses who were very appreciative.

I have previously been treated at Nottingham City hospital and did not like the way I was treated there, so when I got ill with breast cancer, I asked to be treated at RDH and I have not regretted it, I have been so well looked after.

Thank you for these kind words about our service. This positive feedback has been forwarded onto our Breast Cancer Service.



My only problem with RDH is the parking, it is a nightmare, I don't live in Derby and so I travel for an hour to get here, and then wait around, because I have to arrive much earlier than I need to, in order to get a parking space, and then my radiotherapy treatment is just for 5 minutes and then I go. I have to repeat this every day for a month.

We are very sorry to hear of the impact parking has had on this patient. We have been aware of the capacity issues with parking in relation to the increasing number of patients and visitors to our hospital for some time and have put a number of things in place to improve the availability of spaces, which include the following:

②②Car parks 1 and 8 have been changed to short stay with a maximum of 3 hours. This helps to release spaces in the front two car parks that would have previously have been taken by long stay occupants.

②②The Trust has been granted planning permission to extend the offsite staff car park, which in the long term will alleviate some of the issues that we have with car parking capacity in the hospital grounds.

②②The next phase of our car parking improvement plan is to seek planning permission to extend one of our onsite car parks. This part of the plan is in its infancy will go through what can be a lengthy planning permission process.

My suggested solution to the parking problem, is a mobile "radiotherapy van," it could travel around to key areas in Derby/shire and people come to it for their appointment rather than everyone coming to the hospital and causing a traffic grid lock"

Thank you for forwarding this suggestion, which would certainly benefit patients and help to reduce the number of vehicles around the hospital site if it were possible. Unfortunately, it radiotherapy equipment does not lend itself to a mobile unit. However, we are exploring the opportunities around introducing a mobile chemotherapy unit to be used in the community.

# **Case Study 3**

I am treated with dignity, I have breast cancer and am always in a state undress, but after examinations/treatment, the staff always ensure that I am covered up by my gown and that is a very nice touch.



Thank you for this compliment regarding the maintenance of privacy and dignity. Our staff strive to respect the privacy and dignity of all patients and visitors, especially during intimate examinations.

Sometimes it can be difficult to get through on the phone to the section that deals specifically with breast cancer. I had an operation on my breast and I thought the wound was leaking, I rang the department and when I did get through, they just said, it was fine and would be ok, that was without seeing the wound. When I went for my radiotherapy, they said they could not treat me, because the wound was infected and told me to contact the breast cancer ward. \*\* this happened end part of last year (2016),

Healthwatch Derby were unsure whether issues are with a ward or OPD, patient definitelydoesn't want to take the issue any further as really feels that RDH gives an excellent cancer service, despite this recent issue.

We are very sorry to hear about the difficulties this patient had contacting our Breast Unit. Sometimes the service can be very busy but we do try to do everything we can to ensure calls are answered as soon as possible. Normally, when a patient contacts the department, one of the breast care nurses will deal with the call and offer advice. If they have concerns about the patient's wound, they will arrange for the patient to come back to clinic to be seen. We are sorry if this wasn't the case in this particular situation and will feedback to the department.

The staff are very friendly, they get used to seeing the patient, because you have to come every day for your treatment. When it comes down to the last day of treatment, they are so happy for the patient.

Thank you for this lovely feedback about the friendly, positive approach of our colleagues, which has been shared at staff meetings.

I am extremely afraid of needles, I would consider myself to be needle phobic, radiotherapy department has been really great, they have had to compromise my treatment plan, as I cannot take anything administered via a needle. The staff take the time to talk to me about how the treatment can be offered in an alternative way, the doctors talk to me and I feel as if I have had a say in how I receive my treatment.

We were really pleased to hear that this patient was listened to and involved in



arranging an alternative method for their treatment. It is important that we acknowledge worries and fears and respond to the individual needs of our patients wherever possible.

When I had my initial mammogram I was fine, when I had the appointment to be told that I had breast cancer, I was fine, the problem was they wanted me to immediately go for a biopsy and I just couldn't because of the needle, I literally had to walk out of the hospital as I couldn't face having an injection. Once my needle phobia had been discussed, a date was set for my biopsy, I turned up and they wanted to inject me, they were not aware of my needle phobia and it had not been written on my notes anywhere. I would never have coped with the needle, so fortunately, they were able to do a quick swop and I had the operation with gas and air. I feel as if radiotherapy don't compromise my wishes and know to never give me needles, but breast care, "just don't understand, e.g. they have to put a " tattoo" on to identify the affected breast, they say it's just a small tattoo, a small needle prick, but they don't seem to have the understanding that I just cannot do it, this is my only little issue, but I still maintain that RDH cancer care is fantastic and would never fault them.

The lady comments that she is extremely afraid of needles and talks about her concerns with the knowledge of needle phobia being shared between the Breast Unit and Radiotherapy. The Radiotherapy Services Manager explains that the two departments do not have a shared electronic system for information; however they do have access to information in the patient's hospital notes. Information regarding needle phobias should be recorded on the Radiotherapy referral to make the staff aware.

The Radiotherapy department use a "tattoo" which is done using a small needle. Staff would always encourage patients to have the tattoo as it is the best way to ensure that the radiotherapy treatment is delivered to exactly the right area every day over the course of treatment. We have and do use alternatives for patients who are either needle phobic or don't want the tattoos and this is usually by using permanent skin marker pens and tape to protect the marks. However, these are not ideal as they do fade, tapes slip and peel off and it is therefore a less reliable method which may mean that the patient has to go back to our CT scanner for a repeat scan. It is unclear from the feedback if this was the case for this lady.

In terms of policies and guidelines to ensure discussions follow the patient



pathway, we have policies and work instructions for everything we do in radiotherapy (we are accredited to ISO 9001:2015) and these cover the whole patient pathway.

If the patient has raised particular concerns or phobias with the medical staff this should be included on the radiotherapy referral form so that the Radiotherapists can make adjustments for the individual.

Sometimes patients discuss their fears/phobias when they attend for the first CT scan prior to commencing radiotherapy treatment. In such cases, the staff will discuss alternatives such as the use of permanent markers, as described above.

This feedback has been shared with the Deputy General Manager who oversees the Breast Unit and Radiotherapy and has been communicated to the teams to highlight the importance of acknowledging and communicating such phobias.

## Case Study 4

The staff here are fine, they are helpful and considerate. The appointments are not rushed, you feel as if you have time to ask questions.

It is encouraging to know that we provide enough time for patients to discuss their condition and any questions they have about their treatment. It is particularly important for patients with a diagnosis of cancer to be given the appropriate time to talk through what can be complex and detailed information.

The radiotherapy equipment seems to break down quite often, this is not the fault of the staff, but it does make your appointment time last longer. It's a real issue, depending on your appointment time, you have no choice but to arrive much earlier than your appointment time, to try to get a space and not get grid-locked in queues.

We would like to offer our apologies for the delays caused by the breakdown of radiotherapy equipment. Our staff do their best to mitigate any problems caused by breakdowns.

The Trust is investing in replacing all of our linear accelerator radiotherapy



machines. As of April 2017 we have replaced two out of four linear accelerators. These new machines are more reliable and will help to minimise the occurrences of breakdowns and the impact on our patients.

We are very sorry for the impact of parking and gridlocked roads on this patient. As explained previously in this report we have introduced a number of measures to alleviate the problems and there are plans in place to further improve the availability of parking spaces.

Patients in this clinic get concessionary parking at £1 per visit, it's a great help when you have no choice to come every day to receive your treatment. If you have to come to the hospital really often, parking works out cheaper with a weekly pass, it is good to have that option available. I like the fact that the weekly pass is transferable between family members/friends. I have previously been treated in Leicester Royal and the weekly parking pass was dedicated to one vehicle only and so on that score, Derby does much better.

We are pleased that our arrangements for concessionary parking are flexible and well received by patients, their relatives and carers. We provide concessionary parking for people who need to attend several times during the week and the reduced rate for cancer patients.

Patients are informed of concessionary parking in the information pack given to them when they receive their diagnosis. We will improve the awareness of this by ensuring there are posters in all patient areas.

I notice that there are patients here from places such as Leicester and Lichfield, it is an indication to me of how good this hospital is and I am sure they could go to closer hospitals.

We take great pride in the care and treatment we provide and it is encouraging to know that patients from other areas choose to come here because of this.

## **Case Study 5**

I can't fault the service, the staff are brill and very pleasant. I was admitted for chemo in 2016 and the experience was brilliant, I was very well looked after. I have been given a dedicated telephone number to ring, and if I am unwell, I don't need to go through my GP or A&E, I can just ring and be



## admitted onto a cancer ward.

We are pleased to hear this patient received a positive experience whilst undergoing treatment for cancer. It is never easy and we hope that the support of our staff helps people through their journey. The Lead Nurse for Cancer Services has passed on this encouraging feedback to the teams involved.

The hospital has really included my husband in everything and we both feel really happy about this, he knows me and knows what I want.

I am pleased to hear this patient's husband was involved in her care, treatment planning and decision making and they have received a positive experience.

I have to travel on the A38 to get to the hospital and there can be delays if there is an accident and then parking at RDH is ridiculous, sometimes I have been stuck in a queue at RDH for nearly an hour, fortunately the staff are really understanding if you are late for an appt.

There is a current bus service from Burton to Derby, which is the X38. We are currently exploring ways of working more closely with Burton Hospitals to improve, sustain and expand quality services for patients across our combined catchment areas. Consideration for transport between the hospital sites will be given as part of the discussions regarding the collaboration.

Communication/admin is great, you get letters sent in time for appointments/information etc. they phone you if they need to speak to you about something. The staff will support me and listen to me, if I feel as if I just want to talk.

Thank you for your compliments regarding the communication and administration of appointments. The Trust gives real focus to ensuring our patient administration processes work well, as they contribute to the delivery of safe and effective healthcare.

An improvement event was held in March 2017 to look in detail at the whole clinical administration process and how we support outpatients, day case and inpatients. This has generated ideas to help improve what we offer our patients by endeavouring to get things right first time and these are being



developed for future implementation.

(Partner of patient) I supported a family member through cancer in 2008 and currently doing the same again with current partner, one improvement I can definitely see is communication; patients are better informed about their appointment times also the staff have more time to speak to patients and give relevant information in more of a caring and sympathetic nature.

My previous partner died of cancer in 2008, at that time, my GP visited me at home as I was in a bad state, and he prescribed me some meds to calm me down. I decided not to take them, but instead I "hit the bottle." I got myself off the drink and I got myself "back together." The doctor never followed me up to see if I was ok or whether I took the meds, I was just left. Losing a loved one to cancer is a hard journey and only "the bereaved" really understand what it is like.

We are very sorry to hear that this person has endured two experiences of supporting partners through cancer, and particularly the first experience where they felt unsupported after losing their loved one. There are support services available in the community, which can be accessed through GP surgeries and we are sorry that these were not offered.

In 2016 NHS England introduced a five year Cancer Strategy which is designed to increase prevention, speed up diagnosis, improve the experience of patients and help people living with and beyond the disease. The strategy makes it clear that it is everyone's responsibility to support patients and their relatives/carers and we are working closely with everyone involved in the journey – GPs, commissioners and the voluntary sector to improve the experience and ensure support is offered.

# Case Study 6

The doctors are really good and I appreciate the way patients have a say in their own treatment. I was having chemo, they kept changing them, but none of them suited me and I was getting really ill. In the end, I said to the doctors, I am not taking any more chemo and they agreed because they could see the affect it was having on me.

The Lead Nurse for Cancer Services is really pleased to hear this feedback about patients being involved in their care, treatment planning and decision



making. This is extremely important to people receiving chemotherapy and radiotherapy treatment.

My cancer was discovered through a mammogram, they are free of charge and I just cannot understand why people will not go and have them done. Once I was diagnosed with breast cancer, all appointments etc. moved very quickly and efficiently.

When I went for my biopsy, I asked the nurse the direct question, do I have cancer, she was very honest and her reply was "there is something there," which I read as "yes," I have cancer. I appreciated this very much and when I went to see the consultant to confirm the diagnosis of cancer, I was already mentally prepared for what he had to say, that may not work for everyone, but it certainly worked for me.

Thank you for taking the time to provide this positive feedback. It is good to know that this patient appreciated the honesty of the nurse involved and that this helped to prepare them for their discussion with the consultant.

## Case Study 7

I started off my cancer treatment in Burton and then it was taken over by RDH, everything has been good; RDH explained everything well when I started treatment here. Appointments are executed well, you know exactly when your appointments are, and I got an appointment schedule right at the start of my treatment so it was all planned out. I got information to tell me what will happen during the appointment, everything is done really well at RDH, and it's excellent. I live out of Derby and the staff have kindly preagreed all my appointments that work around my travel, every patient has to accept late appointments at 6.30 pm and they agreed to only give me 1 late during my course of treatment and I really appreciate that. The car parking is terrible, but now that I understand the issue, I factor that into my travel arrangements. Currently, I am on 15 consecutive days of treatment, and the concessionary car park agreement is great, it only costs £1 per visit for patients receiving cancer treatment - its' great. The communication between the hospital and my local GP has been great, when I have needed a sick note, I have only had to ring my GP and ask for one because they have all the info they need from the hospital to write the sick note.

It is reassuring to hear that this patient experienced a positive transfer of their



care to the Royal Derby Hospital and that the flexibility we offer for appointments helped them to maintain their work.

With regard to parking, we hope that the information provided earlier in this report helps to reassure our patients and visitors that we are working to improve access to parking spaces. Again, we are really pleased that the concessionary parking charges are helpful in keeping the cost of parking down for patients attending regularly for treatment.

## **Case Study 8**

Due to my condition and treatment, I cannot go home in a car or public transport and so I have to have the community transport, it can be a bit of await. Currently I attend hospital 5 days a week for treatment and I sometimes arrive 2 hours before my appointment and then wait a long time after to be picked up and then I have to travel the journey out of Derby to get home, but that's not really the hospital's fault it is just how community transport works.

We are sorry that this patient's visits to hospital are extended due to the time taken with using community transport. Community transport can be provided by the Council and non-emergency patient transport is provided by East Midlands Ambulance Service (EMAS). Please see contacts for both organisations below:

Community Transport:
Senior Transport Officer (Community)
Transport & Technical Policy
County Hall
Matlock

Tel No: 01629 536713

East Midlands Ambulance Service NHS Trust:

Trust Headquarters
1 Horizon Place
Mellors Way
Nottingham Business Park
Nottingham
NG8 6PY
emas.pals@nhs.net



My life has been on hold since Oct 2016 when I was diagnosed with cancer, I feel as if I cannot plan or get on with my life until the journey is over. However, RDH are great at their admin and at the start of my treatment, I had all my appointments all set out for me and this has been great, I cannot get on with my life, but at least on a daily basis I know where I am with my appointments. I have been given a "rapid response no," so I can ring for help or info at any time, it is so comforting to know that number is there and if they cannot respond to your call immediately, they always ring you back within minutes"

Cancer treatment has a huge impact on people's lives and it is important that we provide the right information, appointment details and support to help patients through their journey.

# **Case Study 9**

I became really ill with my medical condition 2 days ago, I was literally lying on the bathroom floor in major pain, my husband called the ambulance and they arrived in moments, they gave me morphine and were very patient with me, they waited until the pain subsided and I was able to move and then they moved me and took me to hospital, they were very caring.

My medical condition has been on/off for the past 2 years and I have been in/out a number of times between medical and surgical assessment wards. I was taken straight to surgical assessment as I am awaiting surgery. The staff here are always nice and always look after me well; they keep me posted with test results and their plans for my future treatment.

Thank you for these kind words about the staff on the Surgical Assessment Unit (SAU). This feedback has been forwarded to the Matron to share with the whole team.

I was told I was having my operation at the end of the week and so I would be discharged and re-admitted, however, my test results were quite bad and so I woke this morning and they said they would do the surgery today. I was really pleased about that, as it meant I could just get it done here and now rather than go home and then come back in again in the future.

We appreciate that the scheduling of operations has a significant impact on our patient's lives and emotions and wherever possible we try to take these



into account.

I have multiple illnesses and so I attend several different OPDs, for most o fthem, the waiting time is poor, orthopaedics does have a board which indicates the waiting time and that helps. This clinic must have the longest waiting time, and they are not even polite enough to let you know that you will be delayed and the reason for it.

We are very sorry to hear that this patient has experienced problems with waiting times in our clinics. It is good practice to display waiting times on boards so that patients are aware and this should be in place in all clinics. The Lead Nurse for Cancer Services has forwarded this feedback to the Senior Sisters in our outpatient areas to remind them of the importance of keeping patients informed.

My GP has referred me for several appointments at the RDH, and it has taken ages from the time of referral to the appointment, I have been told e.g. that the wait is 3 months and then waited twice as long. I would prefer the hospital to be honest and if you are going to have a long wait just tell me the truth so I can prepare for it and not get anxious thinking I have been forgotten.

All patients who are referred due to a possible cancer have to be seen within two weeks. The Trust has to adhere to these timescales and performs well against this important target.

We are recruiting two new consultant oncologists who are due to join the Trust in June/July 2017 and an additional consultant haematologist will be employed this financial year. These extra posts will help to improve our waiting times and the smooth running of outpatient clinics.

We are sorry to hear that this patient waited longer than expected and would be happy to look into this further if they would like to contact us through the Patient Advice & Liaison Service (PALS). It appears that their experience was not within the Cancer Clinic and we would welcome further feedback in order to address this fully.

Parking is terrible; I have to arrive a lot earlier than my appointment just to make sure I get somewhere to park. Having attended various clinics I would conclude that the staff are 50/50 - a mixture of good and bad.I don't live in



Derby and there are other hospitals I could go to for treatment, despite parking issues, waiting around for your appointments and some of the staff not as nice as others, given the choice, I would always chose to come to RDH for treatment"

Please see earlier comments regarding the ongoing work to improve parking onsite.

We are very concerned about this patient's experience of our staff. The Trust's C.A.R.E standards set out expectations of compassion, positive attitude, and respect whilst recognising the equality and diversity of patients, carers, visitors and colleagues. These values motivate us to provide for the individual needs of our patients in a compassionate and professional manner. We would welcome further feedback on this matter in order to address this fully.

## Case Study 10

Dr Smith is a really good doctor, he is very nice, he knows that I come a long way to see him and if I arrive early for my appt, he will see me early and not leave me waiting. I like seeing Dr Smith because his appointments are very informal, he will let me see his computer screen and go through all test result and information I didn't want to have chemo when I was diagnosed with cancer, my previous doctor (before Dr Smith) "bullied" me into having it, where as Dr Smith talked to me nicely and explained the benefit of having it......there is such a difference in the approach"\*\*Patient did not wish to raise a formal complaint\*\*

The General Manager for Cancer Services was extremely concerned that this patient felt they were 'bullied' into having chemotherapy. We appreciate this this patient did not wish to raise a formal complaint. However, we would welcome more informal contact from them in order to investigate this matter with further details.

## Case Study 11

I am Polish and I need an interpreter for my appointments, the hospital provides one for each appt. I am very happy with the hospital and how they have looked after me so far. I am with my elderly mum today for her appointment and on my mums behalf I would say RDH give a first class



## service to their patients.

Appointments are great, you never have to wait too long to be seen. One time the cancer blood clinic was closed and so we had to go the general blood clinic and it was a very long wait. We don't live in Derby and my mum could have her treatment at other hospitals, Nottingham being the nearest one to us, but we also chose RDH as we feel this is where she will get the best treatment.

As a family we feel able to discuss and be involved in our mum's treatment and we feel that RDH values our views as the family of an elderly woman who is not really able to make decisions for herself.

Thank you for this positive feedback regarding provision of interpreters, keeping waiting times down and the best possible treatment. If patients wish their families to be involved in care and treatment we will work with them to ensure they are included along the care pathway, as we appreciate the comfort that both patients and their relatives/carers take from this. One example of supporting family involvement is the provision of rooms in our inpatient areas where families can stay overnight.

Derby Teaching Hospitals NHS Foundation Trust would like to thank Healthwatch Derby for the valuable and detailed feedback provided in this report which focuses on the Cancer Services provided at the Royal Derby Hospital. The report includes useful feedback on our communication with patients who have cancer and their relatives, maintaining privacy and dignity, management of appointments, parking facilities/arrangements, specific care and treatment and a number of other key issues that affect patients with cancer and their relatives.

The report has been shared with senior staff within our Cancer Services, Facilities Management, Radiology and Breast Care departments. The teams were very appreciative of the positive feedback which has been shared widely with the staff in each area. The areas of concern, analysis and recommendations were also very useful in helping us to identify a number of actions and learning, which are detailed within our responses to the case studies.



Once again, we would like to thank Healthwatch Derby for collecting and forwarding this focussed feedback and to the patients and carers for taking the time to pass on their thoughts, comments and suggestions.

Responses have been provided by colleagues from Cancer Services, the Radiotherapy Service, Facilities Management, and the Breast Unit.

Kerry Than
Complaints/PALS Manager
Derby Teaching Hospitals NHS Foundation Trust