



Blue Outpatients Area John Radcliffe Hospital Enter and View Report

December 2025

healthwatch
Oxfordshire

Contents

Contents	2
Acknowledgements	2
Visit details	3
About Healthwatch Oxfordshire	4
What is Enter and View?	4
Summary of findings.....	5
Recommendations	7
Service response to recommendations.....	8
Report.....	11
Summary of patients and staff feedback	22
Patients feedback.....	22
Staff feedback	24

Acknowledgements



Healthwatch Oxfordshire would like to thank all the patients we heard from, and the staff of the Blue Area Outpatients at the John Radcliffe Hospital in Oxford for their support and contribution to our Enter and View visit.



Visit details

Service	
Service Name	Blue Area Outpatients at the John Radcliffe Hospital
Service Address	Headley Way, Headington, Oxford OX3 9DU
Service Provider	Oxford University Hospitals NHS Foundation Trust (OUH)
Date and Time of Visit	8th July 2025 10am–1pm
Authorised Representatives	Amier Alagab Katharine Howell
Visit Status	Announced visit
Contact details	Healthwatch Oxfordshire Office F20 Elmfield House New Yatt Road Witney Oxfordshire OX28 1GT T: 01865 520520

Disclaimer

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.

About Healthwatch Oxfordshire

Healthwatch Oxfordshire works to make sure NHS and social care leaders, and other decision-makers hear your voice and use your feedback to improve health and social care services. We can also provide you with reliable and trustworthy information and advice about local health and care services. We are an independent charity.

What is Enter and View?



Healthwatch Oxfordshire gathers information on people's experiences of using health and care services. One of the ways we do this is by visiting places where publicly funded health and care services are being delivered. This enables us to see and hear how those services are being provided.

These visits are called **Enter and View visits** and can be announced or unannounced. In an announced visit we will work with the service provider to agree the visit. As the local Healthwatch for Oxfordshire, we have statutory powers under the Health and Care Act 2012, and Local Government and Public Involvement in Health Act 2007, to carry out Enter and View visits to local health and care services.

Enter and View visits are carried out by a team of trained and DBS checked volunteers and staff. We call these our authorised representatives. We use what we hear and see on the day of our visit to report to providers and others with recommendations to inform change for the health and care services we visit. Enter and View visits are not an inspection and will always have a purpose.

Purpose of the visit

- To observe how the Blue Area Outpatients operates and provides its services.
- To collect views from patients and staff on the service.
- To identify 'Best Practice' and highlight any areas of concern.
- To report what we observe and hear about the quality of the services.

Strategic drivers

- These Healthwatch Oxfordshire Enter and View visits are part of a programme of visits to a range of services within Oxfordshire.
- These visits were planned and implemented in 2025 – 2026.

Summary of findings

During our visit to the Blue Area Outpatients at John Radcliffe Hospital in Oxford we heard from twelve patients and nine staff members on the day.

Signage and information













There was clear signage for the Blue Area Outpatients from the main reception at the entrance of the hospital and a welcome sign near the door when entering the area.

The opening hours were clearly on display.

Once inside the Blue Area, the reception was clearly visible from the entrance. Reception staff directed patients to where they should sit in the waiting area whilst waiting to be seen, and then staff accompany patients

when being called to clinical rooms.

The following information was on display:

-  Perioperative quality improvement programme
-  Patient paging system
-  Energy efficiency funding eligibility
-  Be part of research
-  Patient feedback board
-  Supporting your wellbeing
-  The friends and family test, please tell us your views
-  Staff notice board
-  Coronavirus information
-  Some leaflets related to patient conditions

There were no translated information or leaflets in other languages on display and no information about how to access an interpreting service while using the service.

We did not see staff pictures or the Care Quality Commission (CQC) report on display.

The Blue Area Outpatients has no hearing loop in place.

There was a suggestion box, and information about how to give feedback, but the hospital website does not include information about Blue Area Outpatients department.

The general environment



The Blue Area Outpatients was very clean. The chairs were in good condition, and a variety of chair widths and heights were provided. The area feels bright and spacious, with colourful art on the walls.

On the day we visited, the clinics and services running included a pre-operative assessment clinic, blood testing, a dietitian service and the cardiac department were operating a pacemaker clinic.

Hand sanitiser machines containing gel were available.

The manager and team members were welcoming and greeted patients with warmth and friendliness. We saw patients being greeted in a friendly way by clinical staff when called, this culture of hospitality ensured that patients felt valued and respected from the moment they entered the Blue Area Outpatients. We did not see staff pictures.

The waiting room and clinical rooms were very clean. One side of the waiting room, by corridor B and the blood test rooms, was more crowded when we visited.

The ticketing system for blood tests seemed to work well – both calling out the number and having it on the screen makes it easier for patients with visual or hearing impairments to know when it is their turn.

There are two disabled toilets, male toilets, female toilets, one gender neutral toilet, and one gender neutral staff toilet. The toilets were clean but there was some paper on the floor.

The unit is operated by a dedicated manager who joined recently, who aims to deliver excellent care through collaborative efforts. We saw the staff going above and beyond to provide person-centred care, for example offering refreshments to patients waiting for patient transport and helping liaise with patient transport when there were delays.

The parking issues at the John Radcliffe Hospital continue to be a significant challenge, with patients and staff frequently experiencing long waits of 30–45 minutes, difficulty finding available spaces, and considerable frustration, sometimes even missing appointments due to the lack of parking.

Patient and staff feedback



Patients consistently expressed appreciation for the staff input, care and support, describing them as caring, committed and friendly, which fostered a sense of trust and comfort that made patients feel able to raise concerns about their treatment directly with the team. However, despite this open and supportive environment, some patients were not aware of the formal processes for providing feedback, leaving comments, or making complaints, highlighting the importance of clear

communication and accessible information to ensure all patients can fully participate in shaping and improving their care experience.

Patients raised the issue of parking, and how difficult it was to find a space – although staff were able to be flexible to support patients who experienced delays. For example, one patient from out of county arrived 15 minutes late due to the parking issue, and staff were able to rearrange their appointment.

The staff team is highly dedicated and the staff we spoke to indicated they felt well-supported in their career development and professional training, which not only enhanced their skills and confidence but also contributes to greater job satisfaction and retention.

Staff raised the staff shortage and lack of staff rooms which affected their wellbeing.

Staff members expressed considerable appreciation for the new management's open and accessible leadership style, as well as the effective communication surrounding ongoing unit improvements.

Recommendations

- 🗣️ To enhance the user experience and improve transparency, the OUH website should provide more comprehensive information about the unit and its services, including detailed descriptions, and access information.
- 🗣️ Provide translated materials to ensure that all patients, regardless of their primary language, have access to important information. This accessibility is crucial in making healthcare services inclusive and equitable.
- 🗣️ Provide and display clear information on how people can access the interpreting service.
- 🗣️ Implement hearing loops in the unit to improve accessibility for patients with hearing impairments. Also consider alternatives to calling out patient's names, especially for Deaf/Hard of hearing patients, e.g. screen as per blood tests. This might also help reduce crowding on one side of the waiting area.
- 🗣️ Continue to focus on addressing parking and transport issues to help alleviate patient and staff concerns and to ensure that there are sufficient, accessible spaces available for everyone who needs to visit the hospital.
- 🗣️ It is recommended that real-time waiting times be clearly displayed on screens within the waiting area. Providing patients with up-to-date information about expected wait times can help manage their experiences, reduce anxiety and improve overall satisfaction with their experience.
- 🗣️ Enhancing staff wellbeing by increasing staffing levels and investing in proper rest room will improve staff morale.
- 🗣️ The Care Quality Commission report should be displayed as per [the Health and Social Care Act 2028 regulations](#).

Service response to recommendations



Oxford University Hospitals
NHS Foundation Trust

The John Radcliffe Hospital
Trust Headquarters
Academic Centre
Headley Way
Headington
Oxford
OX3 9DU

Tel: 01865 221383

Enter and View Draft Report - Blue Outpatients Area

Dear Healthwatch Team,

Thank you for visiting blue outpatients and providing us with your report and recommendations. We are pleased to hear that you felt welcomed by staff across the department. As you will be aware, Blue Outpatients hosts several specialties and shares the department with the Pre-Operative Unit and Cardiac Unit which are managed separately. We were grateful that you were able to meet with staff and patients from across all three services and will ensure this feedback is shared with all relevant leads.

It was encouraging for our staff to receive positive feedback from patients and from Healthwatch colleagues. It was equally reassuring to know that both patients and staff felt comfortable speaking openly with you.

We are grateful for the recommendations you have made, and the department have reflected on your feedback to celebrate the excellent work already being done, and to identify areas for improvement. As a result, we are committed to developing a clear and concise action plan to ensure the required improvements are made, whilst continuing to deliver high standards of care for our patients.

Kindly find our response to your recommendations below:

Recommendation: To enhance the user experience and improve transparency, the OUH website should provide more comprehensive information about the unit and its services, including detailed descriptions and access information.

Response: We have identified that the outpatient service is only listed on the Trust intranet, which can only be viewed by staff. We will address this with the Trust's Communications and Media Team to ensure details about the department are included on the OUH website. We will undertake

a review of the information provided by the other outpatient departments across the Trust, to ensure we meet the same standard. We will include descriptions about the services and specialities that we host, as well as the accessibility arrangements for the department.

Recommendation: Provide translated materials to ensure that all patients, regardless of their primary language, have access to important information.

Response: We recognise that it is imperative that patient information is available in translated format. Patients can request any of the patient information leaflets in the department to be translated into the required language. It is acknowledged that we need to do more as a department to advertise this and so will work with the Trust's Patient Experience Lead to address this. As Blue Outpatients is a host department, we will ensure each specialty is reminded of the importance of checking with patients whether they require translated materials.

Recommendation: Provide and display clear information on how people can access the interpreting service.

Response: There is a Trust-wide interpreting service available for patients during consultations. This service is either pre-booked or arranged on the day. At check-in, reception staff identify with the patient whether an interpreter is required, and this is then coordinated by nursing staff. Information about the service is displayed in both corridors on the unit and in each clinical room. We will further enhance visibility by placing more signage at the front desk and waiting area. The interpreting leaflet clearly outlines how the service can be accessed and so we will ensure increased visibility of these leaflets in the waiting area.

Recommendation: Implement hearing loops in the unit and consider alternatives to calling out patients' names, especially for Deaf or Hard of Hearing patients (e.g. screens as used in phlebotomy).

Response: A hearing loop is available in the unit. Unfortunately, prior to your visit, the hearing loop signage was broken but this has now been replaced. In addition, for improved visibility of the loop system, signage has been placed in all clinic rooms. Currently reception staff inform the nursing team if at check-in, it is identified that a patient is Deaf or Hard of Hearing. This enables nurses to ensure patients are made aware of when their name has been called for their appointment. Additionally, the receptionist advises patients to be seated in the front row of the waiting area so they can hear more clearly when called for their appointment. All staff are reminded to speak clearly and audibly, particularly as we recognize how busy and noisy the waiting area can become. To help manage this further, there is a message displayed on the waiting room screen advising patients to speak to the receptionist if they have waited longer than 30 minutes. This system ensures that no-one misses an appointment and allows staff to manage patient waiting times effectively.

The suggestion to display patient names on screens is an excellent one, and while it is not currently adopted in many outpatient departments within the Trust, we will explore this. Given that our unit hosts multiple specialties simultaneously, there is a risk of confusion if names for different services are displayed together. However, we will engage with the Digital Team to assess the feasibility of this recommendation to see how we can enhance the patient's experience within the department.

Recommendation: Continue to focus on addressing parking and transport issues.

Response: Parking remains an ongoing Trust-wide challenge, and the Trust is actively working to manage this issue. At a local level, we advocate for patients who are delayed due to parking difficulties as we fully recognise that parking pressures may lead to late arrival. Patients are reassured that their appointments will not be cancelled solely for this reason and staff ensure that they are still seen.

Patients are encouraged to contact the reception team if they are running late due to parking or any other unforeseen circumstances and the relevant contact details are clearly included in the appointment letters provided. Patients are also advised to allow additional travel time due to known parking pressures and are encouraged to use alternative modes of transport such as the park and Ride services, to help minimize delays.

We continue to escalate all patient transport-related issues to our current service providers and concerns are logged via the Ulysses system and followed up by email correspondence with the relevant teams.

Recommendation: Display real-time waiting times on screens in the waiting area.

Response: Currently, the Nurses and reception staff update the display screens with information real-time waiting times and any delays regularly throughout the day. Further verbal announcements and apologies are made where necessary to keep patients informed.

We recognize this system could be improved and will review how we communicate delays more clearly, particularly given the complexity of running multiple clinics simultaneously. We will consult with the Digital Team to explore potential digital solutions that better serve patients attending the department.

Recommendation: Enhance staff wellbeing by increasing staffing levels and investing in proper rest facilities.

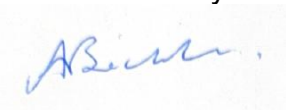
Response: Staff wellbeing remains a key priority for us. Currently, we have a small kitchen area with limited seating, which we recognize is not suitable, particularly given the growing number of services operating in the department. We are actively seeking alternative rest spaces and will escalate the issue through appropriate organisational processes to ensure that this is resolved as quickly as possible.

In terms of staffing, an establishment review is underway for Blue Outpatients to ensure that the number of staff and skill mix are appropriate for delivering safe, high-quality care to our patients.

Recommendation: Ensure the Care Quality Commission report is displayed in line with the Health and Social Care Act 2008 regulations.

Response: At the time of your visit this was not in place. It is now displayed in the clinical area.

Yours sincerely



Aletha Bicknell
Head of Patient Experience

Report

Methodology

When organising an announced Enter and View we follow the steps below:

- **Plan:**
 - Appoint an Enter and View lead for the visit.
- **Communicate:**
 - Inform the provider of the visit, and relevant details including the purpose, date, time, estimation of how long it will take, how many people will be carrying out the visit, and the name of the lead person.
 - Prepare visit posters including the purpose of the visit, time and date, and dispatch these to the provider for display, so that people using the service are clear why the visit is taking place.
 - Include information about how members of the public can contact Healthwatch Oxfordshire if they are not able to when the visit is taking place.
- **Prepare:**
 - Prepare resources such as surveys and questionnaires.
 - Identify any requirements for special support necessary to facilitate the visit such as access or security. This must be done before the visit, as you may be refused entry.
 - Meet with the service provider before the visit.
- **Report:**
 - On completion of the visit a draft report is shared with the service provider requesting comments on factual accuracy and responses to any recommendations within 7 – 20 working days.
- **Follow up:**
 - The final report is published on Healthwatch Oxfordshire's website and shared with the Care Quality Commission (CQC) and service provider.

The visit took place from 10am to 1pm on 8th July 2025, with two trained Enter and View representatives. During the visit, the team were able to spend time observing the daily work of the Blue Area Outpatients, noting the general environment, such as cleanliness, comfort, and information displays, and to speak to both patients and staff.

About Blue Area Outpatients



The Blue Area Outpatients is run by Oxford University Hospitals NHS Foundation Trust (OUH) and located at John Radcliffe Hospital main building, at the ground floor on the right side ahead from the main entrance.

The Blue Area Outpatients offers a range of services in a very busy unit:

- Pre-operative assessment clinic
- Dietitian
- Blood Tests
- Cardiac Department
- Pacemaker Clinic
- Other outpatient clinics such as gastro-enterology and bronchiectasis

There are not many details about the Blue Area Outpatients at the website.

More details about Blue Area Outpatient and the services they offer can be here

<https://www.ouh.nhs.uk/hospitals/jr/>

Our visit



During our visit, we were welcomed by a member of staff at reception, who asked us to wait for the manager (Sister) in the waiting area. We were then welcomed by the manager, who has recently joined the unit. They explained about the service offered. We had a tour around the building before starting our visit.

On the day of the visit, clinical staff were working at the reception to cover for the receptionists who were not on duty on the day.

On the day we engaged with twelve patients and nine staff.

Access and signage

The signage guiding patients from the hospital's main entrance to the Blue Area Outpatients was very clear, both externally and internally. Clear wayfinding signs were visible from the entrance, making it easy for patients to navigate directly to the reception and outpatient area without confusion. A welcome sign was displayed at the entrance along with the unit opening hours which is essential for patients and visitors.

The unit environment

The atmosphere of the Blue Area Outpatients was very busy. Staff were welcoming and interactions between staff and patients seemed friendly. There was a water fountain and a vending machine in the patients' waiting area at the unit. The hospital, in general from the entrance and the Blue Area Outpatients, was very clean and tidy.



Welcome sign



Opening hours

The Blue Area Outpatients included well-equipped consultation rooms, providing patients with a private and comfortable setting to discuss their health concerns or receive treatments without feeling exposed or rushed; such dedicated spaces are essential for fostering a welcoming and secure environment, which is a key aspect of patient-centred care. By ensuring privacy and comfort, the facility helps patients feel respected and supported, ultimately enhancing their overall experience and satisfaction with the services provided.

Additionally, the patients waiting area was very clean and well organised. The seating was in good condition and there was a variety of chair widths and heights provided to accommodate people's different needs. There was nice colourful artwork on the walls and the area felt bright and spacious.



Waiting area

There is clear signage from the main entrance, which supported patients and visitors to navigate the facility with ease – a crucial aspect in reducing anxiety and ensuring a positive first impression in a healthcare setting.

Once inside the Blue Area Outpatients, the layout and additional signage made it immediately apparent where the reception was located, further supporting effective wayfinding.

Reception staff are available to greet patients, provide directions to the appropriate seating area and to ensure that patients know where to wait. Staff members then personally accompany patients to the clinical rooms when it is time for their appointments. This combination of clear signage, intuitive layout and attentive staff guidance creates a seamless and reassuring experience for patients as they move through the facility, minimising confusion and helping them feel supported at every stage of their visit.



Reception

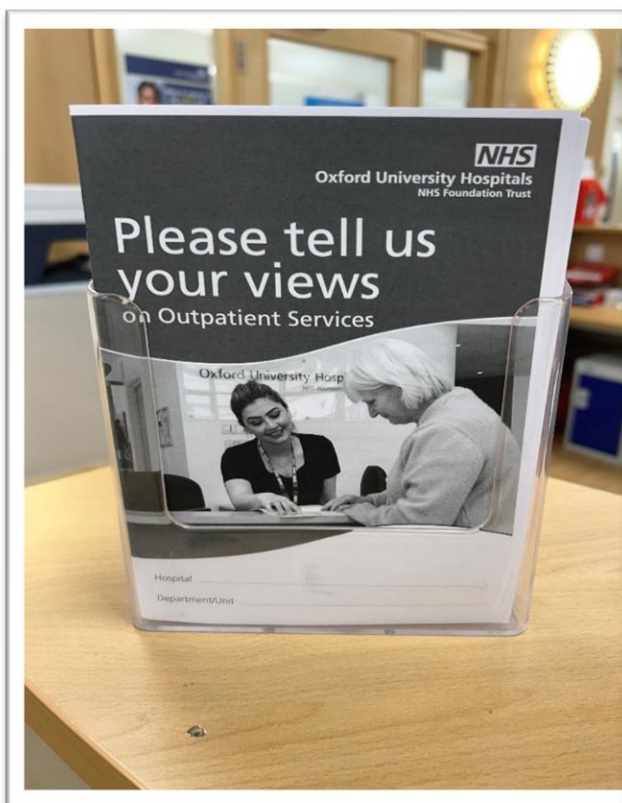
There was a television screen displaying information about the staff members and service information. The screen also displays information about waiting times, stating: "If you have been waiting for more than 30 minutes, please contact us." This message helps manage patient expectations and encourages patients to reach out if their wait exceeds the usual timeframe, ensuring that concerns are addressed promptly, and patients feel supported and reassured during their visit.

The waiting area provided a vending machine and water fountain for patients.



Vending machine and water fountain

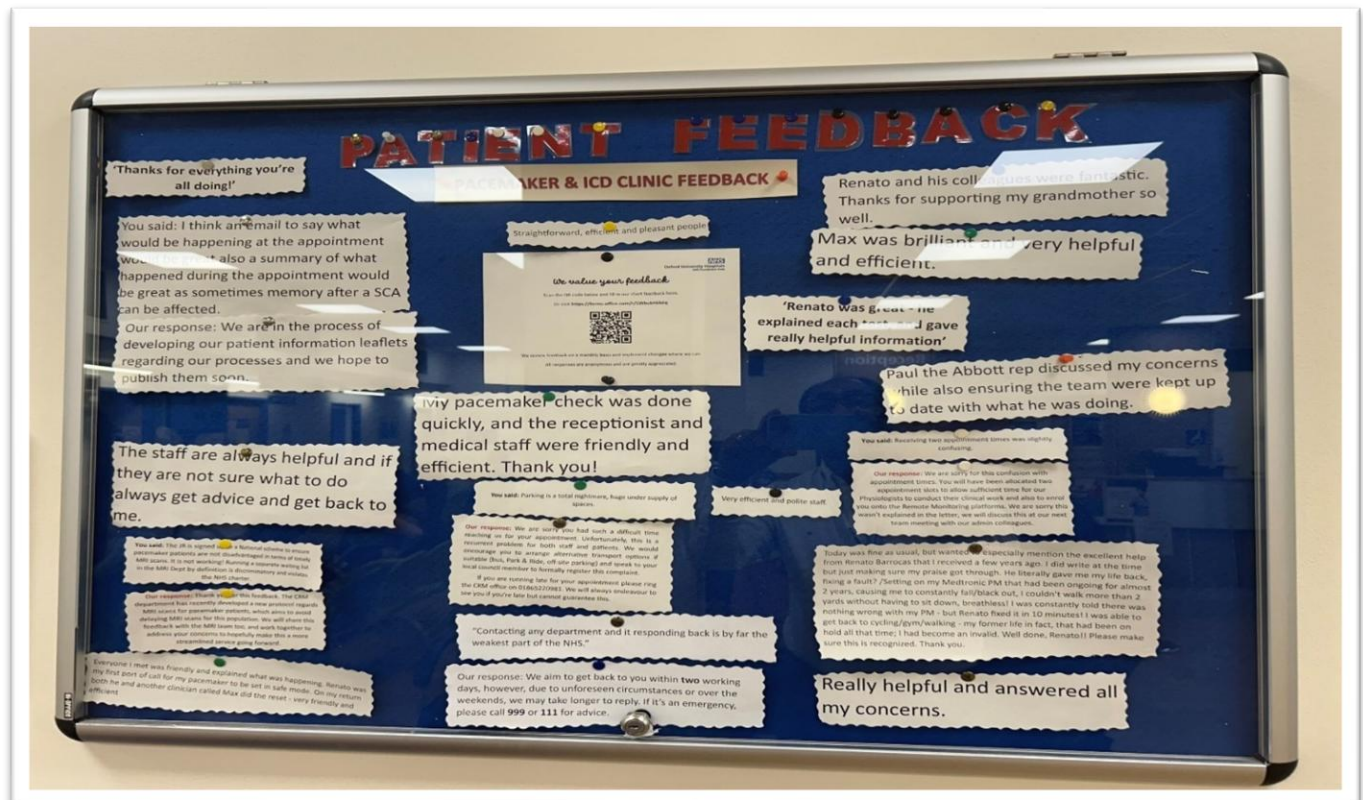
There was a suggestion box at the reception desk for patients to submit their feedback and complaints. Patient feedback forms were available and there were boards displaying patient feedback with links through a QR code to enable patients to feedback. However, we heard from some patients that they didn't know how to submit their feedback and suggestions, suggesting that this information could be clearer.



Feedback forms



Suggestion Box



Patients feedback

Information on display

There were leaflets displayed about the services provided by the unit, including posters about research studies, support groups, and events. Leaflets on display provided information to patients, such as advice on specific health-related topics.



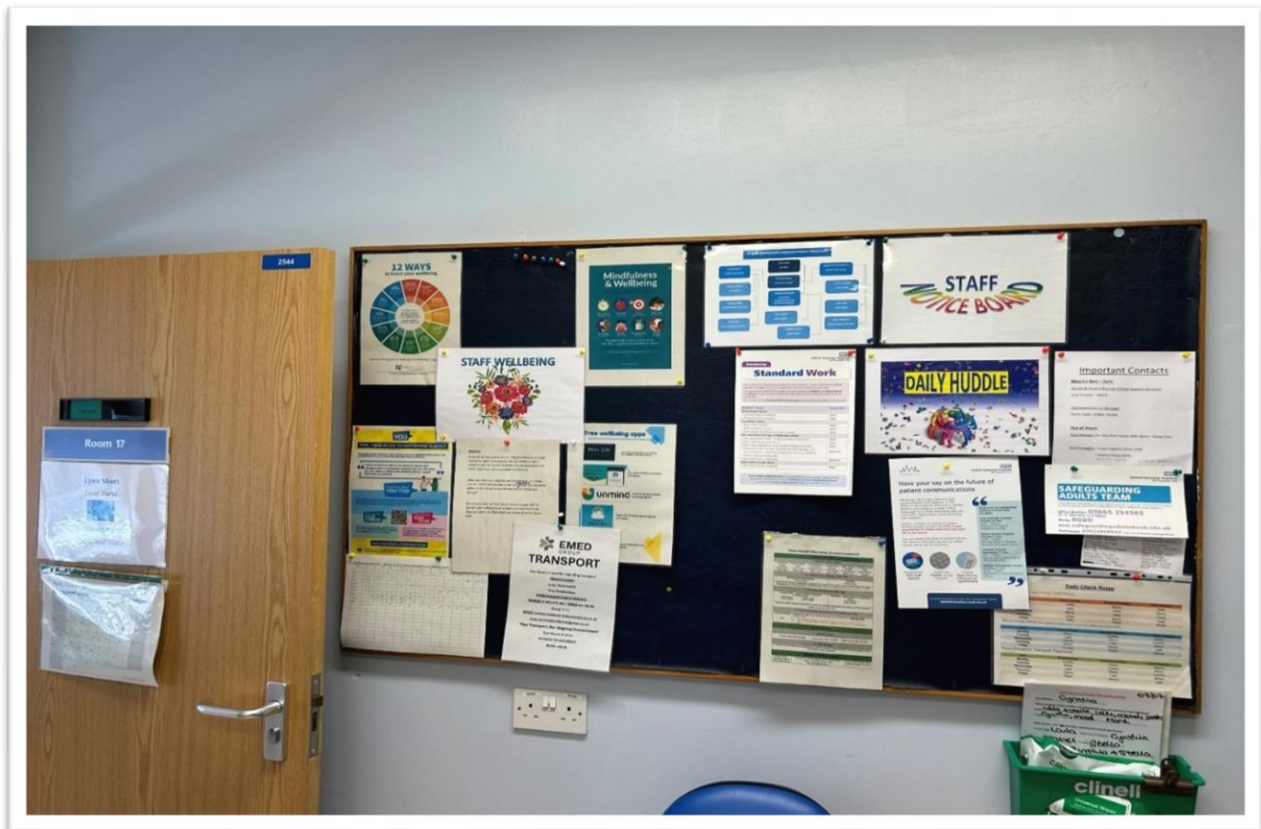
Information on display

We could not see any translated materials or information about how patients can access the interpreting services, and there was no evidence of a hearing loop in place.

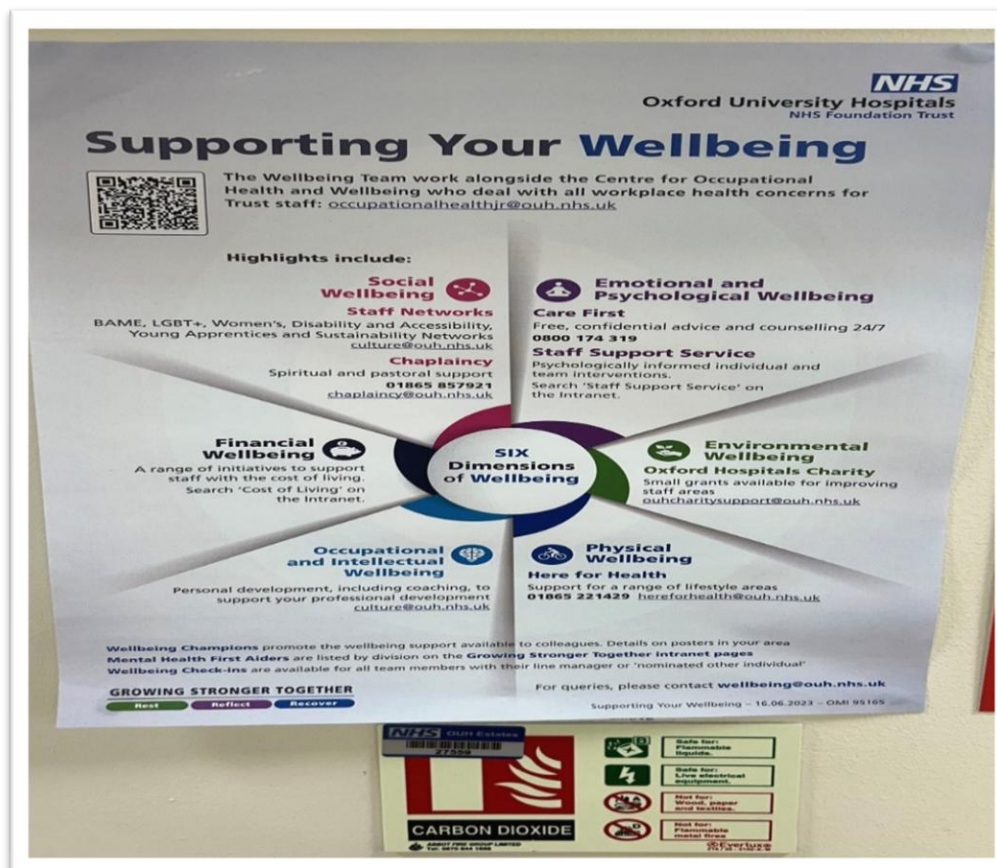


Patients leaflets

There was small staff room available where the staff notice board displayed information about staff wellbeing, have your say on the future of patient communications, and details about the safeguarding adults' team.



Staff notice board



Wellbeing information

Summary of patients and staff feedback

Patients feedback

During the visit to the Blue Area Outpatients, we spoke to twelve patients, of whom six were men and six women. The age range of the patients we spoke to was between 18 and 79 years old. Additionally, nine of them identified as White British / English / Northern Irish / Scottish / Welsh, two Asian / Asian British: Pakistani and one mixed Multiple and White ethnic groups: Asian. We heard that many patients are regular visitors to Blue Area Outpatients – as one person said, “I know my way around here now.”

We asked patients to tell us about accessing the department. Most patients were aware of the services available. We heard praise for the efficiency of the service provided, but that many patients had experienced challenges and delays with parking. Some patients had also experienced delays with patient transport. We also heard about challenges around finding out about appointments in advance and, for one patient, not being able to hear their name being called when it was time for their appointment. What we heard from patients included:

‘It’s been a long day, we left home at quarter to seven, there was a lot of traffic, so the ambulance was very delayed.’

‘I waited about an hour for my appointment, I know my way around here now, we sat over here because it’s so busy but it’s hard to hear your name being called from here. Parking is the worst part of the visit.’

‘I would say this is the most efficient clinic I have been to; I have been coming for 15 years, how on time it is really impresses me. The staff are lovely, fabulous, they send you a letter, with a time, you turn up at the time and are seen, they check the machine and off you go. The parking here is horrendous, it took 20 minutes, I have been in and out of all the different car parks, so I hope I don’t get parking fines for all of them, I didn’t know about the one at the bottom but there was plenty of space there.’

‘I only knew about the appointment time from ringing the pacemaker clinic, as I knew the battery was running down, if I hadn’t called the only notification I got would have been two or three weeks before. Either you get bombarded with notifications or nothing at all. I heard nothing for two years but in the last two weeks I have had six notifications including two yesterday.’

We asked patients to tell us about their care and the information they received during their visit.

Patients appreciated the care and support provided by the team members. The patients we spoke to said:



'It's been all good, everybody's been polite. They gave me good advice and information.'

'All been pretty efficient really, the staff are pleasant. It sometimes gets a bit mobbed, but you can't help that.'

'Staff are always lovely and supportive and can't fault them. There is a nurse who isn't here today but is normally here and remembers me. The doctor I saw explained things with a clear understanding.'



'The reception staff here are very pleasant and always have been great.'

We asked the patients if they knew about how to give feedback and complaints. We heard:

Most people we spoke to were happy about the service and they wouldn't have any complaint.

'Wouldn't know how to give feedback.'

'Could speak to staff, but nothing to complain about.'

When we asked the patients about any improvement required in the unit we heard:

'The environment is ok, nothing needs improvement, I have had a good experience overall.'

Staff feedback

We received feedback and comments from nine members of staff on the day, representing a cross-section of roles. The positive attitude expressed by staff members towards their work, interactions with patients, and the care they provide, created a supportive environment in the unit. Staff appreciated the support given by the new manager. We heard from all the staff that they had all the essential and required training that helps in managing their role.

What is the best thing staff said about the job?

Staff indicated that they are satisfied with their jobs. We heard:

'Able to help the vulnerable ones, gain more knowledge and experience, build the connection with other people/patients.'

'An opportunity to make a positive impact on people's lives, particularly during vulnerable time, and witnessing patients' recovery.'

'Once the patients feel better after their [visit] makes me happy.'

What are the challenges staff raised?

We asked about any frustrations or challenges that staff might experience in their work and the service they provide.

Comments we heard included:



'Unrealistic deadlines.'

'Trying to support two teams of nurses across two different sites.'

'Lack of clinic rooms to see patients, some nurses are allocated to work from home because we have insufficient rooms.'

'Staffing issues / no reception staff. Lack of funding. Suitable clinic rooms complete with appropriate equipment like, ECG machines, BP monitor, blood track.'

'Staffing shortage, emotional and mental strain.'



We asked staff if they would raise concerns? They said:

'Suggestions were made e.g., more clinic rooms are needed, but for the last three years did not listen to us, staff have requested for staff room for wellbeing, but no one take forward as a priority.'

'Now we have new manager who have been very helpful.'

We asked how staff thought the Blue Area Outpatients and service they provide could be improved

We heard suggestions including a need for more staff, as well as changes to facilities and ways of working to improve patient experience and staff wellbeing:

'One service for each site.'

'Team working together could benefit patients and staff morale, provide staff rest rooms for lunchtime, we have no staff room.'

'Patients that are listed for fibro scans requires the room near waiting area to perform the scan.'

'Snack lunch for transport patients.'

'More engagement from patients (like turning up for their appointment, patients should be made aware of the effort the team puts in for their outcome).'



If you would like a paper copy of this report or would like it in a different format or language, please get in touch with us:

Office F20

Elmfield House

New Yatt Road

Witney

OX28 1GT

WWW.Heathwatchoxfordshire.co.uk

t: 01865 520520

e: hello@healthwatchoxfordshire.co.uk

✕ twitter.com/healthwatchoxon

f facebook.com/healthwatchoxfordshire

in healthwatch-oxfordshire

✉ healthwatchoxfordshire.co.uk