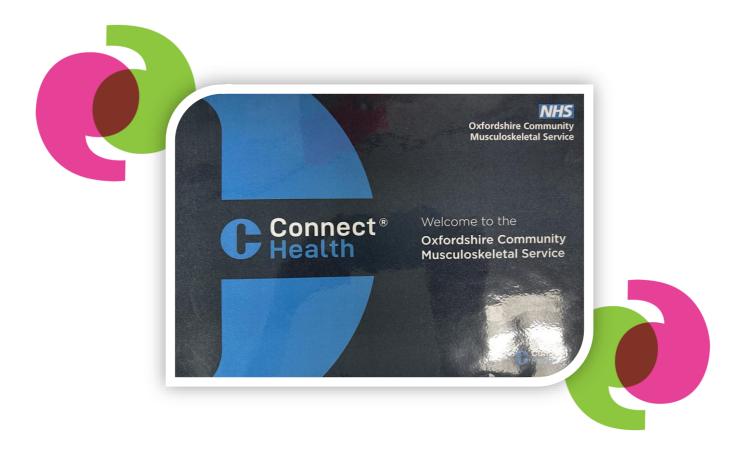


# **CONNECT HEALTH**

(Now known as Cora Health)

# **Enter and View Report**



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#### **Acknowledgements**



Healthwatch Oxfordshire would like to thank all the patients we heard from and all the staff of Cora Health at Hanborough House Botley, Bicester Community Hospital and Townlands Community Hospital at Henley-on-Thames for their support and contribution to our Enter and View visits

Since our visits, Connect Health and Healthshare have come together as one organisation - Cora Health. At the time of our visits the organisations had not merged so in this report we will refer to the service as Connect Health - as it was known at the time of our visits.

# 1. Details of visits

Service Provider	Connect Health	Connect Health	Connect Health
Service location	Hanborough House	Bicester	Henley-on- Thames
Service address	Hanborough House, Wallbrook Court, North Hinksey Lane, Botley, Oxford, OX2 0QS	Bicester Community Hospital, Piggy Lane, Bicester, Oxfordshire, OX26 6HT	Townlands Community Hospital, York Rd, Henley-on- Thames, Oxfordshire, RG9 2DR
Date and time of visit	8th April 2025 10am-1pm	29th April 2025 10am-1pm	20th May 2025 10am-1pm
Authorised representatives	Amier Alagab Jaz Kundi	Amier Alagab Vicky Tilley	Amier Alagab Jaz Kundi
Visit status	Announced visit		
Contact details	Healthwatch Oxford Office F20 Elmfield House New Yatt Road Witney OX28 IPB T: 01865 520520	shire	

#### **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.

# 2. 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 Connect Health 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.

# 3. Summary of findings

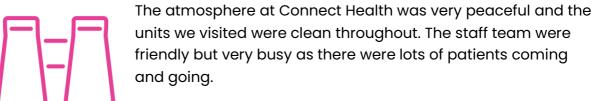
Connect Health provides a comprehensive variety of treatments for musculoskeletal (MSK) conditions and symptoms across ten locations around Oxfordshire. We visited three of these locations to speak to patients and staff to find out their experience of the service on the day that we visited. This is a summary of what we saw and heard.

#### Signage and information

Information provided to help patients navigate could be improved. There is no clear external signage at any of the three locations we visited. We did not find it easy to find the locations without asking someone or seeking directions from the hospital's main reception. The internal signage was much better.

There is also a lack of leaflets and information about the service available for patients. Opening hours were only on display at only one of the locations we visited. CQC rating was displayed at all three sites we visited. On the days of our visits, we observed that no staff were wearing identification badges displaying their names.

#### The general environment



The Hanborough House building is new and consisted of 10 clinic rooms which are well equipped, providing an

opportunity for therapeutic activity, storage room and a large welcoming patient waiting room.

The other two locations, Townlands and Bicester, consist of one big treatment room divided by curtains and one separate physic room.

The floors at Hanborough House are modern and feature new wooden finishes, creating a fresh and updated appearance. Hand sanitisers were available at the main reception and in several different areas.

At all three locations, there were no receptionists present, and patients were required to use a digital self-check-in system which wasn't clearly explained. After completing the check-in process, patients waited in the designated waiting area until they were collected by the clinicians for their appointments.

The water fountain at the Bicester site was not working and there were no fountains provided at Hanborough House or Townlands Hospital.

#### Patient and staff feedback

Patients are required to sign in digitally at the reception, but some patients were



not happy about the self-check in process and found it challenging. The patients we spoke to were satisfied with the cleanliness of the buildings and expressed their appreciation for the support and care given by the staff. Parking was an issue raised by patients at Hanborough House as there is no parking for patients and disabled people and we heard of some difficulty at the other two locations.

Patients commented on the challenges with access to the location of Hanborough House with no easy public transport. Some were having to use taxis costing some people over £20. Patients at Townlands Hospital complained about the distance they had to travel for the service. Patients we spoke to were not aware that they were entitled to an interpreter and one patient mentioned their daughter attending the appointment to help them understand the 'hard words'.

The staff team is dedicated and appreciated the opportunity to help patients in their recovery journey. Staff at all locations told us they feel supported in their career development and professional training. The staff appreciate the open and accessible management style, which promotes effective communication between management and employees where employees feel valued and acknowledged.

In addition to our Enter and View visit, we have collated the patient feedback on Connect Health services we have heard over the last year (2024-25) via our online feedback centre, information and advice service and from talking directly to patients. This feedback can be found at Appendix 1 and highlights additional themes about the service for reference.

# 4. Recommendations

Recommendations are based on what we heard and saw during our three visits and not including information from Appendix I feedback.

### **General recommendations**

To counter the frustration felt by patients with admin and communication with the service, Connect Health should seek to improve their communication and administration as follows:

- Ensure patients receive appointments in a timely manner and by a communication method that suits them. This would reduce the number of 'no shows' freeing up clinical time. This could also reduce the number of telephone calls they receive, thereby reducing waiting times on the telephone.
- Work actively to reduce waiting times for telephone callers.
- Produce a patient leaflet clearly explain to patients the pathway followed before an onward referral is considered.
- Review the patient referral form to ensure that the data being requested from patients is relevant and clearly explain why the data being asked for is relevant to the purpose.
- The presence of an admin staff at the reception could benefit patients to navigate the service and support in digital check-in.

#### Service locations:

- Work to actively match patients with the service in their local area thereby reducing the amount of travel patients need to undertake when attending appointments, especially important for those patients who are in pain and /or have to use public transport to attend appointments.
- Seek to provide services at locations that are accessible with parking and with good transport links and provide information about accessing services via public transport.

#### Recommendations across the three locations

- Offering translated materials is essential to ensure that all patients, regardless of their primary language, have access to important information.
- Ensure patients are aware of their right to an interpreter.
- Noticeboards need to be updated and include performance information.
- Water fountains should be available for people in the waiting area.
- Provide information about access to a hearing loop in the centres informing individuals in need of it of its availability.
- Opening times should be displayed prominently on the building.

## **Recommendations for Hanborough House**

- Car parking for disabled people could be offered from the allocated staff spaces.
- The screen/TV in the patient waiting area should be made functional to enhance the patient experience while waiting.

## **Recommendations for Bicester Hospital site**

- Ensure that all necessary precautions to maintain patient confidentiality during consultations and information sharing, even when using curtain partitions in the main treatment area.
- Look at providing a separate room/kitchen for staff use.

#### **Recommendations for Townlands site**

- The patients thanks/compliments board could be displayed at the waiting area instead of the admin office.
- Ensure that all necessary precautions to maintain patient confidentiality during consultations and information sharing, even when using curtain partitions in the main treatment area.
- Look at providing a separate room/kitchen for staff use,
- Ensure the opening times are displayed prominently.

# 5. Service response to recommendations

Response received by email on 18th August 2025 from Danielle Chulan, Head of Operations – Community Division.

#### Cora Health Response to Healthwatch Oxfordshire Observations

#### Introduction

Cora Health would like to extend our sincere thanks to Healthwatch Oxfordshire for their recent visit and for sharing valuable feedback regarding our services. We are committed to delivering high-quality, patient-centred care and view this engagement as an important opportunity to reflect, improve, and evolve. Below is our detailed response to the observations made, highlighting the actions we have taken and our ongoing efforts to enhance patient experience across our Oxfordshire sites. We would like to provide additional context regarding service demand and innovations. The service is contracted to accept 61,000 patient referrals each year, based on the last 6 months demand the service is forecast to exceed that referral demand by >10%. There is currently no additional provision for this demand and the service is dynamically adjusting the clinical model to ensure that patient experience and outcomes remain high. Innovations include piloting Flok; an end to end AI embedded digital tool for the treatment of back pain, and one stop clinics to improve efficiency in our tier 2 pathway. Patient reported outcome measure scores for the Oxfordshire service are outstanding and far exceed national standards in MSK. Our clinical model was praised externally, with Cora Health achieving A HSJ award for Clinical Innovation. Pre-move to Hanborough House the Botley Bridge road works had a completion date of September 2024. This has been significantly postponed to August 2026 – this is not within our control but impacts public transport to Hanborough House.

#### External Signage

We recognise the importance of clear signage in supporting patient access. Our Estates team is actively working with landlords at Hanborough House, Bicester Community Hospital, and Townlands Community Hospital to secure permission

for external signage. We are confident this will significantly improve visibility and ease of navigation for patients.

#### Patient Information Materials

We are pleased to share that a new patient leaflet has been developed in our refreshed Cora Health branding. To improve accessibility, we are introducing QR codes at all sites, allowing patients to access digital versions instantly. Easy-read formats are also being created to ensure inclusivity.

### Display of Opening Hours on site

While our services operate strictly by appointment, we understand the importance of clarity. Opening hours for our departments are now clearly displayed at all sites. We have ensured that signage reflects our specific service hours, which may differ from the broader hospital operating times.

#### Staff Identification

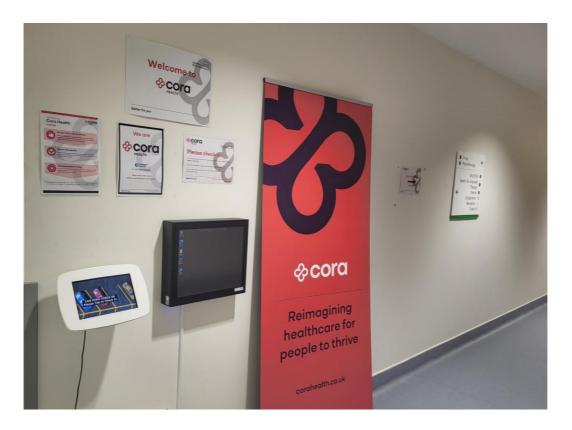
All staff have now been issued new Cora Health lanyards and ID badges. A reminder has been circulated to reinforce the expectation that these are worn at all times within clinical areas, ensuring professionalism and patient reassurance.

#### Water Fountain Access

While Cora Health does not manage water facilities, we have raised the issue with the estates team at Bicester. We have also signposted patients to alternative fountains located nearby, ensuring hydration options are available within a short walking distance. For Hanborough House we are exploring the installation of a water fountain in the waiting area.

#### Self Check-In Experience

We appreciate this feedback and are taking steps to improve the experience. Clinicians always collect patients from the waiting area, regardless of check-in status. We are enhancing guidance through audio messages and TV screens to support patients upon arrival. Additionally, we are updating messaging on checkin desks to provide clearer instructions and reassurance.



#### Parking at Hanborough House

We have reviewed and clarified parking options, including nearby public facilities and drop-off arrangements for patients with mobility challenges. Blue badge holders may park on adjacent single yellow lines (the same distance as the staff car park). These details are being added to our website to ensure transparency and ease of planning.

#### Transport Accessibility

Our service is contractually required to operate within 20 miles of GP practices. We offer appointments across 10 sites and provide patients with the choice of the earliest available or most convenient location. A recent audit demonstrated that 93% of patients travelled less than 20 miles to their appointment and the average miles travelled was 7 miles. For the patients who travelled further (less than 30 miles), this was largely linked to specialist service lines. Virtual consultations and digital pathways are also available, offering flexibility and reducing travel burdens. When we moved to Hanborough House in February 2024, the Botley Bridge roadworks were due to be completed by September 2024. That deadline is now far exceeding the original date and is set to be August 2026. This is outside our sphere of control.

#### Interpreter Services

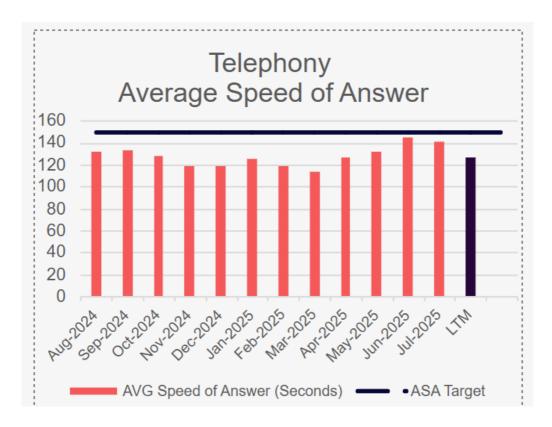
Digital video and telephone interpreter services are available on demand and can be accessed during appointments and when contacting patients on the telephone. We have introduced posters in waiting areas to raise awareness (in the most commonly requested languages). Our referral form and digital triage prompt referrers/patients to identify interpreter need. We are committed to ensuring language is never a barrier to care. Our digital triage tools and patient portal are translatable in over 120 languages.

#### Appointment Communication

Appointments are booked 4–6 weeks in advance to ensure that patients have adequate time to plan their attendance. Patients receive SMS to notify them that we have received their referral, and a follow-up call to book their appointment. We have also introduced digital booking options for Tier 1 services, offering greater convenience and autonomy.

#### • Telephone Access

Our average call answer time remains just over 2 minutes, exceeding national standards, with >90% of calls received answered successfully. We are excited to be upgrading our telephony platform from September 2025, which will introduce web chat, speech analytics, and virtual agents to further enhance responsiveness and service quality.



#### Patient Pathway Clarity

A comprehensive patient leaflet outlining the referral pathway is available via Physitrack (our digital exercise and information app), and can be shared electronically or in print. We are committed to ensuring patients understand their journey through our service.

#### Referral Form Relevance

The GP referral form is owned by the ICB and aligns with system requirements. Details asked of patients during self-referral and pre appointment questionnaires align with NHSE/BestMSK guidance and include nationally recommended datasets. We continually review these to ensure they remain purposeful and patient-friendly.

#### Reception Support

Our operational model prioritises clinical delivery. While we do not routinely employ receptionist, we are enhancing digital and visual support tools to guide patients effectively, this includes TV streaming with guidance and adjusting the messaging on the check-in desk. We believe this approach aligns with the NHS 10-year plan- analogue to digital and allows us to invest more directly in clinical care.

#### Local Appointment Matching

Patients are offered the next available appointment and can opt for locations closer to home. We also offer virtual consultations where clinically appropriate. Our bi-annual estates and demand review ensures capacity is aligned with geographical demand. Our DNA rate is 5%, which is far lower than the national average for MSK Services.

#### Translated Materials

We have reviewed all patient leaflets to align with NICE guidance and evidence base and are translating key documents into the most commonly requested languages. A digital model project is underway with the aspiration to support real-time translation and ensure accessibility for all.

#### Noticeboard Updates

Following the visit and feedback received, noticeboards at all sites have now been updated to include relevant service performance information, supporting transparency and patient engagement.

#### Hearing Loop Access

Signage has been placed at all sites. We are working with landlords to review and improve hearing loop coverage, particularly in clinic rooms.

#### Disabled Parking Allocation

Due to APNR constraints, it is not currently feasible to change staff parking to disabled bays. However, blue badge holders can park on adjacent single yellow lines with equal proximity to clinic entrances and our new website has been updated with this detail.

#### Waiting Area TV Screens

The screen at Hanborough House is now fully operational, streaming patient guidance and health information. We are reviewing other sites to ensure similar functionality.

#### Staff Facilities at Bicester

Staff utilise the admin room for breaks, which is fully equipped. While kitchen access is limited by lease terms, we have ensured staff have the necessary amenities.

#### Shared Care Records

We requested access to shared care records in 2022 and are working with the ICB to progress this initiative, which we believe will enhance continuity of care. In addition to this we have recently been given enhanced ICE (diagnostics platform) access which improves our visibility of blood results and imaging reports arranged by GP's.

#### GP Engagement

Our leadership team regularly engages with GP practices and attends the Monthly North Oxford Network Group. We also distribute quarterly newsletters and have presented at LMC meetings to ensure pathway clarity and service visibility. Recent GP engagement across 10 practices that were deemed as low referrers, did not highlight any concerns with pathway understanding.

#### Staffing Levels

At the time of the visit, we were staffed to 97% of our FTE plan, with active and successful recruitment underway. A proposal has been submitted to the ICB to consider the additional demand and to work on a collaborative and sustainable solution.

#### • Learning from Feedback

Feedback is actively collected via various channels, including the Friends and Family Test (FFT). Complaints and compliments are also captured through the website, phone, in person, and via written communication.

We collect Friends and Family Test patient experience data via:

- A URL link sent with first appointment reminder text message
- A reply text message on discharge
- A IVR voice messaging to landlines on discharge
- Patient feedback is also collected via paper submissions in clinic.



All feedback is thematically analysed and reviewed at both local and national levels. Lessons learned are shared across our governance structure and inform service development. Thematic analysis is shared with the ICB in our quarterly quality report. Complaint frequency is consistent quarter on quarter, at ~1.3 informal complaints per 1000 patient contacts and ~0.5 formal complaints per 1000 patient contacts.

#### Consultation and Admin Time

Our clinical delivery model aligns with exceptional patient reported outcomes, great system value and good patient experience measures. There is not a one size fits all approach and appointment lengths are adjusted based on patient complexity. We have introduced innovations such a Lexacom echo dictation software to streamline clinical administration tasks, such as letter writing and have embedded robotic automation across our administration pathway to streamline processes.

#### Patient Co-Production

Engagement with patients and the public is central to service development. We host quarterly patient and public engagement groups (PPEGs). We also participate in community events, such as the Windrush Leisure Centre Community Engagement event to raise awareness of MSK conditions and promote selfmanagement



National innovations are co-designed by patient stakeholder groups. We value patient voices and see them as integral to our evolution. We have attended 3 SEOXHA patient engagement events in past 18 months supporting the PCN to engage some of their patients with chronic pain and multiple comorbidities and help them better understand what they can do to manage their health and what services there are to support them.

We have attended 4 Oxfordshire on the Move networking events and this has supported us to develop better links with:

 Move Together service (exercise on referral) - we regularly refer & signpost patients to them

- 2. Beezee (weight management service) They have attended our team meeting to give an overview and we have attended on of theirs
- 3. Stop for Life Oxon (smoking cessation) they have shared digital and print resources for us to use with patients.

These events enable us to strengthen relationships with partners across the system and ensure that pathways are effectively utilised.

#### Service Expansion

Recruitment is ongoing, and location capacity is reviewed bi-annually. We are committed to expanding our reach in line with patient demand and service sustainability and have plans to increase group exercise provision and locations by the end of 2025.

#### Appointment Duration

Our model allows for flexibility in appointment length based on clinical need. We continue to monitor and adapt to ensure optimal patient outcomes and satisfaction. In the Oxfordshire service the patient reported outcome measures are exceptional.

#### Conclusion

Cora Health is grateful for the opportunity to respond to Healthwatch Oxfordshire's observations. We are proud of the progress made and remain committed to delivering compassionate, accessible, and high-quality care. We look forward to continued collaboration and welcome ongoing feedback as we strive to improve and innovate.

# 6. Main Report

## Methodology

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

#### Plan:

o Appoint an Enter and View lead for the visit.

#### **Communicate:**

- o 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 authorised representative. We also send a leaflet explaining what Enter and View is.
- We send posters explaining the purpose of the visit, including the time and date, to the provider for display. This is to inform people using the service when and why the visit is taking place.
- Include information about how people can contact Healthwatch Oxfordshire if they are not able to talk to us when the visit is taking place.

#### **Prepare:**

- Prepare resources such as surveys and questionnaires.
- Identify any requirements to facilitate the visit such as access or security protocols to follow. 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 asking them for a response to any recommendations within 20 working days of receipt.

#### Follow up:

 The final report is published on Healthwatch Oxfordshire's website and shared with the Care Quality Commission (CQC) and service provider.

#### **About Connect Health**

Connect Health provides a comprehensive variety of treatments for musculoskeletal (MSK) conditions and symptoms for patients in Oxfordshire. As an NHS provider, the service is free of charge and clinics are held across 10 locations in Oxfordshire.



## What services are provided:

- Physiotherapy
- Pelvic Health
- Pain
- Podiatry
- PhysioLine
- Group Classes
- 1:1 Rehab

# 7. Our visits

On the days of our visits, we were welcomed by the area operations manager who told us that the service offered is free of charge to all patients. The service is commissioned by the Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB ICB).

A welcome sign is prominently displayed at all locations, however, there was no external signage at any of the three locations we visited, and it was hard to navigate from the car park to the building without getting help from someone or contacting the reception.

The signage to help patients navigate could be improved. Signage inside the buildings at Hanborough House and Townlands Community Hospital were clear about offering physiotherapy but did not show signs for Connect Health as the provider, while at Bicester the signage wasn't very clear - we found only a small sign near the lift.

The patients waiting room was very welcoming and well maintained at Hanborough House with comfortable seats, information, leaflets and hearing loop, screens and some information about the service. At Bicester the area was shared with another department from Oxford Health NHS Foundation Trust and there was a small waiting area at Townlands Hospital.



Hanborough waiting area



Townlands waiting area

There were 10 self-contained clinic rooms at Hanborough House which were well equipped with all educational materials. At both Bicester and Townlands, support was provided within a large treatment room that was divided into separate sections using curtains.

The treatment rooms at all three locations are as shown in pictures below:







Hanborough House

**Townlands** 

**Bicester** 

At Hanborough House, there are dedicated spaces for the staff, storage room and separate kitchen, but these facilities were not available for staff at Bicester and Townlands. The lack of facilities at the Bicester and Townlands community hospitals may impact on staff.



Storeroom and admin room at Hanborough House





Storage area and kitchen at Townlands admin's office

Connect Health provides a variety of information materials for patients, including leaflets and educational content, to help them better understand their conditions and treatment options. Demonstrations in person classes and exercise equipment are also available to support patient engagement and rehabilitation.

Key information such as CQC ratings, some patient leaflets, the patient complaints policy, Tell Us Now and Healthwatch leaflets, are displayed. However, information provided was not consistent across sites – for example, the opening hours were only displayed at the Townlands Community Hospital site.



Complaints policy



Information on display at Hanborough House



On display at Bicester Hospital

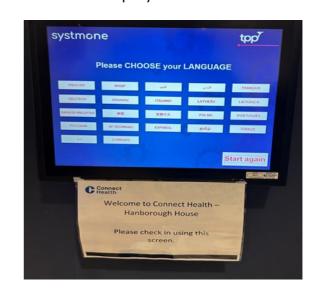


Townlands compliments and feedback from patients

The Townlands compliments and feedback board was displayed inside the admin

office, which may not be seen by many patients and visitors.

A self-check in system applies for all the three locations we visited - there is no receptionist available.



Parking is an issue at Hanborough House, no parking provided for blue badges, and sign at the entrance indicating **NO PARKING** on site.



The feedback mechanism provided at Connect Health sites, featuring paper forms and a submission box, is an effective way to engage patients and gather insights for continuous improvement.



Suggestions box

The water fountain at Bicester community hospital was labelled as **out of order** and needs to be fixed or replaced. There were no water fountains provided at Hanborough House or at Townlands.



# Summary of patient and staff feedback across the three locations

## What we heard from patients

We gathered feedback from 14 patients across three visits: 12 women and two men. Four patients were from Hanborough House, seven from Bicester Community Hospital, and three from Townlands Community Hospital in Henley-on-Thames.

# Appointment Booking Experiences Hanborough House:

Patients shared mixed experiences of booking appointments with Connect Health. Patients commented on the time taken to see a health professional. One patient booked their own appointment, which took five months to secure. Others were referred by their GP, with one receiving confirmation after six weeks via phone, while another waited eight weeks.

'I was referred by my GP, six weeks later Connect Health called.'

# 'Booked my appointment myself, it took five months to get an appointment.'

#### **Bicester Community Hospital**:

Most patients were referred by their GPs, while a few self-referred through the website. Some expressed frustration with the difficulty of securing appointments.

'I self-referred by the website.'

One commented highlighted that information about what to expect from the process could be made clearer.

'We're not really sure what our appointment is for today, we thought the next stage was to speak to a surgeon or a consultant about whether my mum should have a knee replacement or not, but the man I spoke to on the phone was not very helpful, and the process isn't clear - he basically said we would have to jump through hoops, and this was the next hoop. It would certainly have been easier to keep seeing [name] in Banbury. The whole thing is quite tricky to navigate.'

#### **Townlands Community Hospital:**

One patient was referred by the John Radcliffe Hospital, while another booked by phone and waited eight weeks for their appointment.

'By phone and had to wait eight weeks to get an appointment.'

'It is very difficult to book appointments it takes a long time to get through.'

#### Reception staff and check-in process

Across all three locations, patients commented on the absence of reception staff to help them on arrival, or to answer questions and help navigate. This impacted on patient experience. Many expressed difficulties with the digital self-check-in system, which they found impersonal, and people sometimes couldn't get the self check-in to work and then didn't know what to do as there was no one available to ask.

'No reception staff - you have to sign in which I hate doing.'

'They used to have a receptionist here but they glossed over the window and now an admin lady sits behind it so there is someone there, but she's not supposed to deal with patients as she's there to make calls. The physios try to help when they can but there is no real system to deal with patients.'

## Patient views on waiting rooms

#### **Hanborough House**:

Patients suggested improvements such as adding a drinks machine, a receptionist and functional TV screens.

'To have a drinks machine and a receptionist to greet you. To have screens that work.'

#### **Bicester Community Hospital**:

Patients described the waiting area as clean and functional, with one patient appreciating guidance from a staff member at the hospital main reception.

'The fact they don't have a receptionist is a problem. It lets them down. The screen often doesn't work, and their phone lines don't open till 8.30am so often we get asked about things and we just can't help.'

#### **Townlands Community Hospital**:

Patients described the waiting room as small, with no windows and uncomfortable, commenting on the 'school-like chairs'.

'No receptionist, hard sometimes to find someone to talk to.'

'Small waiting room, nice no window.'

'Chairs are like school chairs.'

#### Awareness of feedback processes

Not all patients were aware of how to provide comment or feedback to Connect Health. While some mentioned the presence of a feedback box in the waiting room, they were unfamiliar with the complaints process. One patient noted they had not been informed about it.

'There is a feedback box at the waiting area but not aware of the complaints process.'

#### **Additional patient comments**

**Hanborough House:** Patients suggested improvements could include having more leaflets about Connect Health at reception and improving appointment booking processes, which they felt lacked clarity and were not patient focused.

'Booking appointment needs to be better - not clear communication, not patient focused.'

Bicester Community Hospital: One patient described a particularly frustrating experience that stemmed from miscommunication regarding their appointment location. They were directed to the wrong place, which not only caused inconvenience but also led to confusion and dissatisfaction with the service. However, another patient praised the staff for their patience and the valuable health insights they provided. One patient told us how difficult it was to explain the pain they were in, as English was not their first language, they told us they would not know how to ask for an interpreter nor had they been offered an interpreter. Another said their daughter helped them with difficult words.

'English is not my fluent language, and he was patient with me. I manage okay without an interpreter, but it is hard to describe the pain, even in my own language.'

'I didn't know how to do this [book an interpreter]. To be honest I don't really need one, it's just some words that are hard, but my daughter has come with me to help.'

One patient mentioned the form they needed to complete for their referral asking about their mortgage, they felt this was not relevant and it was invasive.

'... there are pages and pages of it, asking quite personal details like do I have a mortgage? It was quite invasive. But you have to fill it in to progress to an appointment.'

**Townlands Community Hospital**: Patients recommended employing a receptionist, improving parking facilities, and creating a proper reception area.

#### What we heard from staff

We spoke to 21 staff members across the three locations: six at Hanborough House, eight at Bicester Community Hospital and seven at Townlands Community Hospital.

#### What staff enjoy about their jobs

- Hanborough House: Staff appreciated the opportunity to make a meaningful difference in patients' lives, work with supportive colleagues, and develop their professional skills.
  - 'The people I work with and the fact that the job we do makes a real difference to people's lives.'
- **Bicester Community Hospital**: Staff valued working with both patients and colleagues, problem-solving, helping patients recover, and the flexibility in their working hours.
  - 'Problem solving and helping people every day. Being part of a patient's recovery. Working as part of a team. having time to develop my own learning. Flexibility in working hours/pattens.'
- Townlands Community Hospital: Staff highlighted the satisfaction of helping patients and contributing to their recovery.
  - 'When patients get back to meaningful activity, work, hobbies that they have been unable to do.'

#### **Challenges and frustrations**

We heard a mix of challenges, including staff work pressure and capacity, and need for better joined up system working across services and information sharing across primary care, as well as administration challenges with appointments.

- Hanborough House:
  - Challenges in recruiting skilled staff in a competitive market.
  - Balancing competing priorities across services.

'Hard to find anything. Important to have more educational structures to make it easy for patients to understand.'

#### Bicester Community Hospital:

- > Limited access to patient information and incomplete referrals.
- Insufficient time for patient appointments and follow-ups.
- > Time pressures and the need for better admin training to organise appointments.
- Managing patient expectations while working in a high-pressure environment.

'Time pressures. Admin should be trained to how to organise the longer appointment not to be all together in one day.'

### Townlands Community Hospital:

- Overloaded clinicians leading to burnout.
- Lack of communication between GPs and clinicians, especially regarding imaging results.
- > Insufficient time for personal development and patient appointments.

'Lack of flow between GPs and us, if they have had imaging and we can't see it. Some appointments not long enough.'

#### **Suggestions for improvement**

#### Hanborough House:

- > Increase awareness of referral pathways and improve GP engagement.
- Hire more physiotherapy staff in areas like Witney, Abingdon and Botley.
- Learn from complaints and feedback to implement changes aligned with national MSK standards.

#### **Bicester Community Hospital**:

- Provide open access to patient records and improve communication with secondary care and GPs.
- Create a separate lunch area for staff, as clinicians currently eat in the admin office.
- Allocate more time for patient consultations and admin tasks, including training for admin.

Reinforce teamwork and ensure the welcome area and screens are functional.

#### **Townlands Community Hospital**:

- > Facilitate discussions and co-production among patient stakeholders to improve and streamline pathways and improve patient understanding.
- Increase the number of locations and clinicians to enhance appointment availability.
- > Extend appointment times to better meet patient needs.

# 8. Appendix 1

We regularly listen to patient voices though our online feedback centre and signposting service, and take approprate action and response. Below is a summary of the feedback we have received from service users about Connect Health between June 2024 and May 2025.

Theme	Comment
Long wait for physio	I saw the consultant last October and was told I would need physiotherapy well I'm still waiting for an appointment! I see the consultant in just a months time. My knee is very swollen need to use a stick an cannot bend down
Trying to contact the physio service	I have been told I can self refer to the physio service - but I don't know who they are?
Long wait for referral	I have had an issue with my foot since the end of November 2023, and despite numerous e-consults to my GP and a referral to Connect Health I am no further forward. I have had enough now, I just want to be out of pain and wear normal shoes. If this is not the correct channel to complain to then please let me know who I should be sending this information to.

Taken off list as had	My physio and doctor arranged - wanted me to have a
not made contact!	cortisone injection under ultra sound. The letter arrived
	and I duly registered this was (2023) was told it could
	take about three months for appointment however (four
	months later) received a letter to say they had taken me
	off list as they had had no response from me to book. As
	I'd had no contact from them I went back to physio who
	confirmed all my contact details were correct on the
	system and she would raise a complaint and re-ask the
	clinic to make me an appointment. I am still waiting.
Promised physio at	The Physio Dept. at Abingdon hospital was excellent, and
home but didn't	they told me I would be given physio when I returned
receive any!	home, and details inc. contact tel. nos. were written
,	down. When I contacted these, an Assessor came to my
	home and told me that my Carers would give me
	physio. The Carers, quite rightly, said they were not
	trained. So I have had nothing.
	When I had a fractured pelvis before, I had been
	discharged with a full care package which included
	good physiotherapy for seven full weeks. This time the
	Assessor tried to get me to admit that I had paid
	privately, but this was NOT so - it was all on the NHS.
Pointless	They don't do anything. You get a piece of paper if you
	are lucky with exercises which have never worked for
	me. I have old injuries from [details] and several old
	broken bone not treated at the time. Didn't get any
	empathy just rushing through the same stuff I already
	told them on the phone and off you go feeling worthless
	as again no one has helped at all. Very upsetting and
	demoralising.
Failed appt - didn't	I honestly can't fit everything in here to even make a
get a letter	start in how stressful this whole process is. You will be
	discharged over and over again despite even ringing
	them to confirm you do need an appointment. Even had
	the cheek to tell me I didn't turn up for an MRI
	appointment, sorry but you always receive letters for
	this. I'm going to take this matter further as I do feel this
	service should be investigated. Discharged twice despite
	you have every contact detail know to man. Years of

	waiting, no one wonder people can't get back to work, not to mention the mental health strain.
Waiting time for appointment	The wait for an appointment is ridiculous. Eight weeks before they will contact you to book an appointment, which may be in another eight weeks after that. While some staff are helpful, others seem not to care. Also, they don't have access to the local NHS systems which would make things so much simpler. This service needs to be moved back under the NHS.
Well done	Sorted my two year problem with a targeted injection
Dreadful admin	I had a referral from the GP. I was able to get an appointment after six months, in December. I had to wait for another appointment. We phoned in February and were told to call at the end of May. In mid-May I received a letter saying that I had been removed from the waiting list. It is difficult to accept and impossible to understand at all. It's stressful! They knew I was waiting for a date and did nothing to help me. This is either unprofessionalism or total indifference to people who need medical help! I am devastated and disappointed! I will complain further
Awful communication	On more than one occasion my GP has asked them to refer me for X-rays and a scan. But they (always a very junior physio) have said we don't think this is appropriate for you. Awful communications. I had a private scan and my GP was correct, I needed a hip operation. Once I told them they promptly referred me to the Nuffield.

Received notification we would be notified for a
telephone appointments. I phoned in August to ask how
long my husband would have to wait for appointment. I
was told he is on the list but would not say how it would
be. Husband in excruciating pain so have now, at a cost
of thousands of pounds, gone private. Arthritis so severe.
Hip replaced but told arthritis was so severe that lot of
chiselling out needed. Now received letter saying as we
have not requested an appointment my husband has
been discharged. Why were we told we would be
contacted for an appointment?
Saw [name] at Townlands Hospital last week. Friendly
and professional. Happy with all suggested exercises.
But I had cramp in my legs that night and wondered if
slightly ambitious for my age? Happy to continue and
tailor them to meet my needs. Slight problem in that
they haven't arrived on my iPad yet? The others are still
there, just not the ones for the rest of the spine. Many
thanks.
I saw a physio who said she would refer me to the NOC.
However when I called for confirmation, I am now being
triaged seeing an advance practitioner in a months
time. Who will say I need another x-ray. Contacted my
GP who has arranged an x-ray for tomorrow. I am
diabetic, my bloods are going high as I can not exercise
to keep this under control, and not sleeping well.
Have finished with my case but not resolved.
Almost impossible to get an appointment. Very poor
information sharing, poor diagnostics, leading to the
wrong treatment.

Late cancellation despite waiting 6 weeks for an appointment,	I live in Witney. My appointment was at Banbury Connect Health was at 3pm. My phone rang whilst I was in the car all ready for my journey to Banbury. I'd checked out car parking, spent the morning doing that. Checked petrol, cancelled all engagements and I got a message literally JUST before my departure telling me my appointment was cancelled! No reason given. I had waited six weeks for this appointment Had I driven just a little earlier, I'd have wasted hours getting there. What anxiety and hardship it's been today. I have lost faith in Connect Health. Eventually, I managed to contact Connect Health (very difficult indeed). Was told there are no foreseeable appointments in the future at present except in Henley!. I am in my 70's and wouldn't drive from Witney there. Why does Connect Health make it SO difficult to connect with them? It's really bad, this system where you can't make any contact. It takes forever to connect on phone. Horrible music.
	Please, please try to improve your services. Just put yourselves in the patient's shoes.
	I can't really afford private care Sad that our service
	here with physio is almost inaccessible. Thank you for reading this honest review.
Changing	-
Changing consultants and	Change of consultants and venues. After x ray and
	ultrasound recommended new shoes. Eventually
venues!	suggested more insoles but this over three years.
Waited ages for an appointment	Waited ages for an appointment after being missed originally - spent most of my time when my injury was critical chasing to be seen which was very much an anti-climax.
Travelled 50 miles to	Referred in spring for sciatica by my GP. Telephone
see a physio!	conversation with Connect Health in July. No
	appointments face to face until October in my area so
	had to travel 50 miles to Banbury to see the physio.
	Appointment lasted all of 10 minutes and made my back
	worse due to being in the car so long. Then unable to get
	a follow up appointment where I live.
Really listened to me	[Name] really listened and assessed my problem
	thoroughly. She tuned the exercise to my needs and my
	likes and dislikes, so I stuck at them. She explained what

	the exercises were doing and showed me diagrams on the screen - that helped me understand and focus.
Thorough and sincere at initial appointment however, why do NHS services not communicate?	The [type of] clinician that I met with initially at Townlands Community Hospital in Henley in April was the first NHS professional who had taken time to listen and discuss my long-term back pain. They were thorough and seemed to sincerely care. I left feeling more optimistic than I had for years. However, the follow up was very disappointing. In June I had an MRI scan and after that I heard nothing. No letters, no phone call (I learnt later they had tried to call me late July but my phone was on silent. No voicemail left.) In September I went to the doctors who told me it was nothing to do with them as it was a different service. They did, however, have a copy of the original letter which they gave me. It was the first time I had seen the letter. I then contacted Oxfordshire Community Musculoskeletal Service who told me they had rung me in July (but not left a message!) and gave a me a phone appointment for September. I was told the call would discuss the results and discuss the procedure. I took this to mean that they had found a solution to my pain and so was incredibly happy. In September I spoke again with the clinician I had met back in April. This time they seemed a little less engaged and told me the MRI hadn't come up with anything conclusive. On politely expressing my extreme disappointment, as the previous operator had mentioned a 'procedure', they said that was a misunderstanding and that would refer my case to the Pain Management service. I have had this . pain for over 16 years. Why do NHS services not communicate with one another? I am back to square one.
Inaccessible for disabled people	I am disabled. I was offered an appointment in Banbury. The other end of the county. Connect Health service is not accessible if you are disabled. I am being referred to another physio service.

Exercise didn't work	I had a long wait for a physio appointment for a
but having to go	shoulder injury. No scan was offered. I followed the
back through them	exercise plan but never recovered. Asked GP for referral
as can't get an	to a surgeon; was bounced back to these people who
onward referral	said I had an exercise plan to pick up again.
I wasn't listened to, I	The [practitioner] I saw was the most uncaring person
was crying and they	that I have ever met, I have been in absolute agony and
showed no	have a lot of medical problems. I was crying and they
compassion	showed me absolutely no compassion at all. I wish I
	hadn't bothered as it has really upset me, I'm not one to
	complain and have always been treated well before. I
	found them very cold towards me and I felt I wasn't
	listened too. I would never want to see them again.
Travel difficulty	I was referred to Connect Health as the physio at my
	surgery has left, but they wanted me to go to the one on
	Botley Road, but with the road closed I would have had
	to get someone to take me, all the way round Oxford, it
	was too hard to get there so I ended up at Bicester. I had
	one appointment and then told to do the rest of the
	exercises via a screen online, but as I am visually
	impaired this is very hard to do, or to make sure I'm
	doing them right.



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01865 520520



hello@healthwatchoxfordshire.co.uk

