



Katharine House Hospice

Enter and View Report
May 2026

healthwatch
Oxfordshire

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Visit details

Service	
Service Name	Katharine House Hospice
Service Address	Aynho Road, Adderbury, Banbury, Oxfordshire, OX17 3NL
Service Provider	Katharine House Hospice, partnership with Oxford University Hospitals NHS Foundation Trust (OUH)
Date and Time of Visit	3rd March 2026 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 Katharine House Hospice 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 with full support of OUH.

Summary of findings

During our visit to Katharine House Hospice, we heard from one patient and eight family and carers, and 16 members of staff (eight on the day and eight responses received by email next day).

Signage and information



Katharine House Hospice is clearly signposted from the main road into the building entrance. Friendly reception staff and volunteers are on hand to direct patients and visitors to where they would like to go.

The hospice has a well-organised and resourced reception area and environment, designed to provide visitors and patients with accessible information and a welcoming atmosphere. Information on display was tailored around end-of-life and palliative care. The availability of leaflets covered various aspects of end-of-life care, reflecting a commitment to supporting patients and their families with their care journey.

The following information was on display on the day of our visit:

- Your feedback matters poster (how was your experience of our service?)
- Meet the team (staff pictures)
- Community spotlight
- Upcoming events
- Photographs taken by people supported by the Living Well programme
- A memorial tree
- Quality and improvement board
- Thank you cards
- Staff wellbeing board
- Mental Capacity Act 2005
- Training opportunities board
- Adult inpatient survey information in visitors' toilet.
- Patient advice and liaison service (PALS)
- Did you know all the services we offer?



- Volunteering (have you ever thought about volunteering?)
- Information and leaflets at the reception.
- Healthwatch Oxfordshire poster.

The general environment



The environment was of a very high standard, not only impeccably clean and in good condition, but also comfortable and thoughtfully designed with soothing colours, beautiful flowers, carefully chosen paintings, and an abundance of natural light, complemented by well-tended gardens thoughtfully planted with a variety of flowers even at this time of year. The use of wood flooring, exposed beams, and wooden doors added a warm, natural touch that made the space feel far less clinical

than a typical hospice or a hospital.

Facilities include a welcoming reception area for visitors, a large lounge that was well-furnished and decorated, a guest room for visitors to stay overnight, children's playroom, sanctuary, café and space where patients and visitors can eat at a dining table or watch television on the sofa.

All the patient rooms open directly onto the garden, and it is easy to go outside, including in a bed or wheelchair if necessary.

The ward provides space for visitors to sleep in the same room or in a separate room kept for visitors.

The hospice is looking to obtain wider "cuddle" beds which will also be more inclusive of bariatric patients.

The house is surrounded by a well looked after garden, with many seating areas.

The living room has books and craft materials, and comfortable chairs for patients or carers to sit and talk together.

We did not see a hearing loop.



The environment reflects a harmonious blend of thoughtful design, natural elements, and artistic inspiration, creating a space that is not only functional but also deeply calming and restorative.

Patient and staff feedback



The patients/relatives we spoke to during our visit expressed high levels of satisfaction with the hospice. They appreciated the effective communication, and the kindness and professionalism of staff.

Overall, they told us that they felt well cared for and appreciated the quality of care provided throughout their entire stay in the hospice.

The patients indicated that the food at Katharine House is good.

Staff members told us it was truly a pleasure to work at Katharine House, where the team is exceptional, with many members bringing years of valuable experience in palliative care.

The staff team is very dedicated, and all staff members we spoke to said they felt supported in their career growth and training. This helps them to improve their skills and confidence and makes them happier in their jobs and able to perform better.

Recommendations

- Provide and display clear information on how people can access an interpreting service.
- Provide opportunity for paper-based feedback as well as online.
- Install hearing loops in the hospice to improve accessibility for patients with hearing impairments.
- Work with patient transport providers to improve communication and planning to provide a seamless experience for patients.
- Review plans about housekeeping services to ensure where possible they are available when needed.
- The Care Quality Commission report should be displayed as per [the Health and Social Care Act 2028 regulations](#).

Service response to recommendations

Enter and View visit to Katharine House Hospice

Dear Veronica and Amier,

Thank you for your letter dated 27 April 2026 providing your draft Enter and View Report following your visit to Katharine House Hospice on 3 March 2026.

Table 1, below, shows your recommendations, together with our responses.

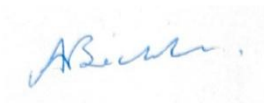
Healthwatch Recommendation
1) Provide and display clear information on how people can access an interpreting service.
Update
We have installed signage in the ward lounge area and main reception with information on how to access interpreting services.
Healthwatch Recommendation
2) Provide opportunity for paper-based feedback as well as online.
Update
Paper based feedback forms are now available and will be placed beside the feedback results board. We are also liaising with Volunteer Services to support patients and visitors with completing feedback forms, both online and paper based.
Healthwatch Recommendation
3) Install hearing loops in the hospice to improve accessibility for patients with hearing impairments.
Update
A mobile hearing loop is available, and signage has been installed to ensure visitors are aware of this.
Healthwatch Recommendation
4) Work with patient transport providers to improve communication and planning to provide a seamless experience for patients.
Update
All incidents relating to patient transport are reported to the relevant providers to support service improvement.
Healthwatch Recommendation
5) Review plans about housekeeping services to ensure where possible they are available when needed.
Update
We are in ongoing discussions with Housekeeping Services, with the aim of extending cover from 8am to 8pm. This will help support patient flow in the Hospice.
Healthwatch Recommendation

6) The Care Quality Commission report should be displayed as per the Health and Social Care Act 2028 regulations.
Update
The CQC report, which was removed during refurbishment and not reinstated, has now been re-displayed in the main entrance.

Table 1: Action plan

Thank you once again to you and the Healthwatch team for the visit. We value our partnership, and we are keen to continue focusing on providing an effective and welcoming experience for our patients and their families.

With best wishes



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 3rd March 2026, with two trained Enter and View representatives.

During the visit, the team were able to spend time observing the daily work of the Katharine House Hospice, noting the general environment, such as cleanliness, comfort, and information displays, and to speak to both patients and staff.

About Katharine House Hospice



The service is run by Katharine House Hospice in partnership with Oxford University Hospitals NHS Foundation Trust (OUH) and Katharine House Hospice charity, which is located at Aynho Road, Adderbury, Banbury, Oxfordshire.

Katharine House Hospice provides specialist palliative care for adults with an incurable illness across north Oxfordshire and south Northamptonshire.

The service is for anyone over the age of 18 years who has an advanced life-limiting illness. At Katharine House, the care is delivered by a multi-professional team who have specialised in this field and take a holistic approach, considering physical, emotional, social and spiritual needs.

The hospice has ten beds in the inpatient unit, arranged in two spacious four-bedded bays (men and women have separate accommodation).

More details about Katharine House Hospice and the services they offer can be found at <https://khh.org.uk/our-hospice/about-our-hospice/what-we-do/>

Our visit



During our visit, we were welcomed by administrative staff and volunteers at the reception and then by the Ward Manager, who explained about the services offered. We had a tour around the building and then proceeded with the visit.

During our visit we spoke to one patient and eight family and carers, and 16 members of staff (eight on the day and eight responses received by email next day).

Access and signage

The signage guiding patients and visitors from the main road was very clear.

It is easy for patients and visitors to navigate directly to the house.

Inside the building, the reception team, including volunteers, were available for more support and guidance.



The centre environment

The atmosphere in the house was calm; the staff and volunteers were welcoming and interactions between staff and patients seemed friendly.

There were many patients and visitors' waiting areas at the house, including a children's playroom.

The house in general, including the entrance and the gardens surrounding the building, was very clean and tidy. The toilets were clean, and the staff room and kitchen are well established with good facilities.

The rooms for patients were thoughtfully designed and meticulously equipped with all the necessary facilities to ensure the highest standard of service and comfort, with the added benefit of every room offering garden views to enhance the overall experience and relaxation for the patients.



Patients room

The reception area was staffed by a dedicated team of administrative staff and volunteers who warmly greeted patients and visitors upon their arrival, providing them with clear and friendly directions to the appropriate seating areas. These included two waiting rooms conveniently located adjacent to the reception, as well as two spacious lounge areas, one of which was situated near the inpatient ward, and the other which is used for Living Well activities. There was also a children's room, thoughtfully designed with toys and delightful decorations to create a welcoming and comfortable environment for younger visitors.

At the reception there was a screen welcoming people and demonstrating the services provided and indicating the importance of the volunteers.



Reception

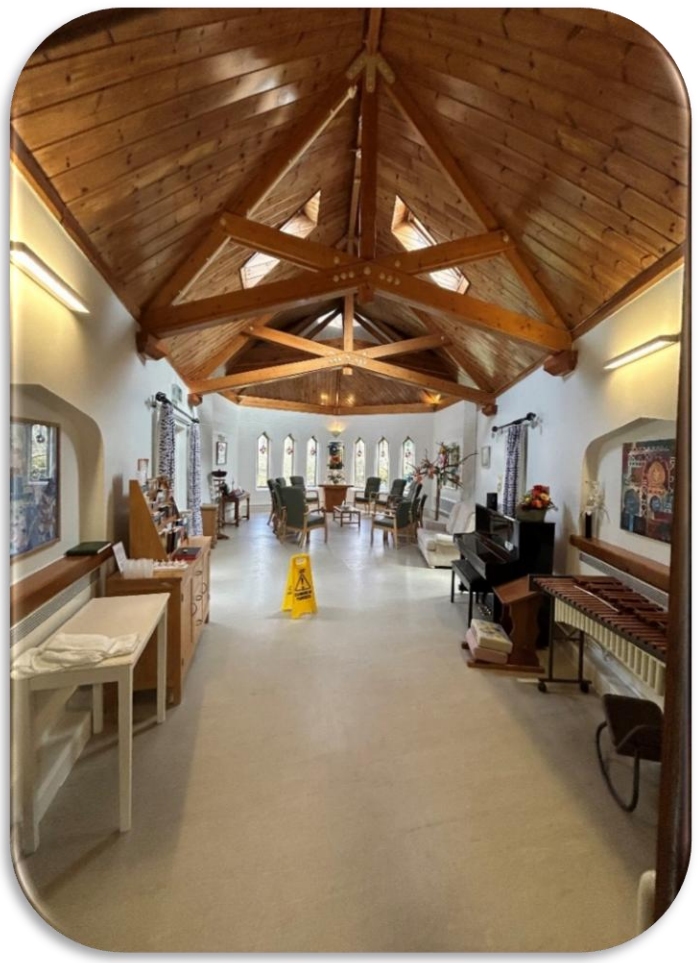
The patients' and visitors' waiting area was exceptionally clean and thoughtfully arranged, featuring seats of various sizes to accommodate different needs and a beautifully displayed memorial tree managed by the charity.

It was observed that there was no hearing loop available either at the main reception or within the inpatient area.

The house provided a variety of spaces and lounges for quiet reflection, alongside a separate children's waiting room that had been carefully equipped with toys, activity box and child-friendly decorations to create a welcoming and engaging environment for younger visitors.



Memorial tree



The hospice was beautifully surrounded by a well-maintained garden reflecting the hard work dedicated to its upkeep, while also offering a range of outdoor seating areas.



The garden

The hospice offers a dedicated separate room for relatives who wish to stay overnight close to their loved ones.

The room was furnished with a comfortable bed and a cozy sofa, complemented by tasteful decoration and well-appointed facilities to ensure a pleasant and accommodating stay.



Information on display

There was a variety of information materials and leaflets available about palliative care and end-of life services, and what patients can expect during their stay. These materials provide clear and easy to understand information, helping patients know what to expect during their stay at the house and where to find support in the community.



Information on display



There was no suggestion box at the hospice, but there was a 'your feedback matters' poster near the visitors' tea and coffee station and information about the adult inpatient survey in the visitors' toilet. Patient advice and liaison (PALS) leaflets were clearly on display.

The community spotlight board served as an informative and engaging feature, highlighting recent community involvement and activities while also providing details about upcoming events to keep everyone well-informed and connected.

The hospice displayed comprehensive information about wellbeing, providing visitors and patients with valuable resources and insights to support their physical, mental, and emotional health in a welcoming and accessible manner and promoting a holistic approach to care.

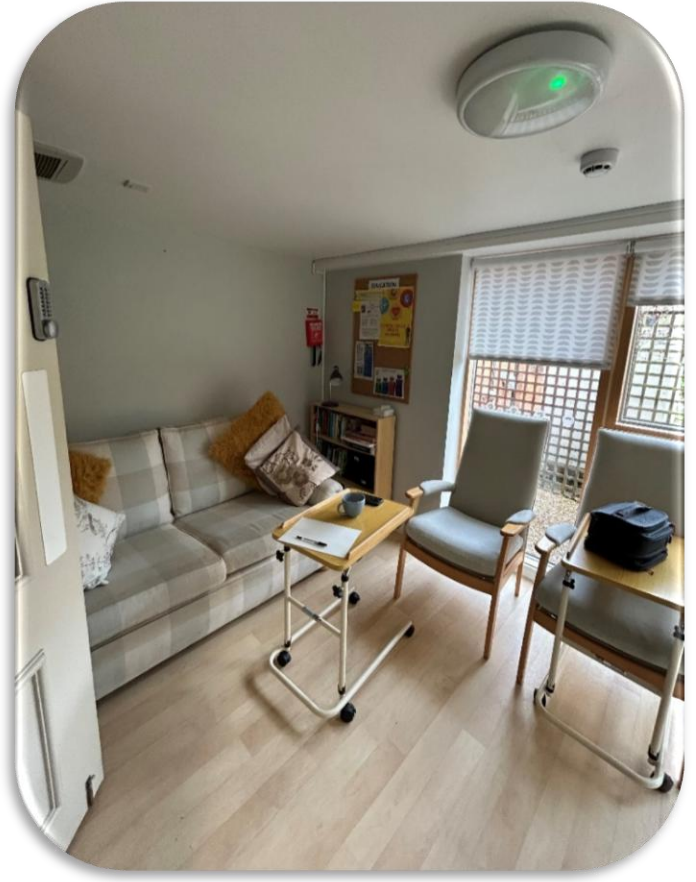
There was a quality and improvement board displayed within the hospice, designed to showcase ongoing efforts and initiatives by staff aimed at enhancing the overall experience and well-being of both patients and visitors. This reflected the hospice’s dedication to continuous improvement and high-quality care.



There was a wide range of informative leaflets thoughtfully displayed throughout the house to ensure that patients remained well-informed about palliative medicine and end-of-life care. Posters were prominently positioned to provide clear guidance on coronavirus precautions and safety measures, complemented by the placement of hand sanitiser at every corner to promote hygiene for all visitors and staff. There was a display board featuring various training opportunities for staff including intermediate communication skills training, advanced ethics in palliative and end-of-life care, and foundational principles of palliative care. We saw a board offering information booklets for patient displayed in the house, and a Healthwatch Oxfordshire poster. The staff room, as well as the kitchen, were both exceptionally well-maintained and thoughtfully equipped with high quality facilities, providing a comfortable and functional environment that clearly reflected the attention to detail and care taken to ensure that staff members had access to spaces that supported their needs and overall wellbeing.



Staff kitchen



Staff room

Summary of patient, carer, relatives and staff feedback

➤ Patient, carer and relatives' feedback

During our visit, we spoke to one patient and eight relatives and carers, including those attending a Living Well event.

We asked patients, carers and relatives to tell us about accessing the hospice and the services provided by the Hospice.

People we spoke to said they were aware of the services available and how to access them.

When we asked patients, carers and relatives about how the staff addressed and managed their individual needs, we heard responses such as:

'They're good. So attentive, friendly, knowledgeable.' (Patient)

'The staff are easy to talk to.' (Relative)

'This place is amazing. Not just the medical staff – the cleaners, the volunteers, it's a big team effort. Everything's in-house, and they come to you. I spoke to the social worker and the chaplain yesterday.' (Relative)

We asked patients, carers and relatives about the communication with the staff.

Most people we spoke to were happy with the communication and felt involved in their care. We heard:

'The communication is very good. I haven't been left in the dark at all; at every turn I've understood what's happening.' (Patient)

'There's good communication, the social worker will make sure she talks to you even if you don't plan to talk to her.' (Relative)

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

We heard people appreciated the compassionate care and support provided by the team members. We heard:

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'I've improved – I've been here three or four weeks, and I've improved so much that I'm being discharged.' (Patient)

'It's night and day between the care home and here. The nurse checks every hour, they turn her regularly, they treat her like a person. They talk to her like she's aware of her surroundings (which she is). Every procedure – bathing, turning – they talk to her and explain what they're doing. It gives me comfort to know that she's not being done 'to' and then just walked away from.' (Relative).

'The care is not just for the patient, it's for families. The nurses are just as supportive to us as they are to my relative.' (Relative)

'My mum came in on Monday, and [patient] had a nappy thing on, even though he can use the toilet – we think it was because there weren't as

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many staff as possible over the weekend. But we did ask them about it, and it hasn't happened since.' (Relative)

When we asked patients, carers and relatives about the food in the house heard:

'The food is much better than hospital! Though my taste buds are funny, so sometimes I order something and then don't feel like it, but they're flexible about it and bring me sweet things.'
(Carer)

'The food – he's loving it, he's not able to choose but he's enjoying everything that he's given.'
(Relative)

'Today I got food from the café for the first time, I got a full plate of food for £4.60, cooked to perfection. They brought it to me and took the plate away to wash.' (Relative)

We asked patients, carers and relatives if they knew about how to give feedback and complaints if needed.

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

'I know you can give feedback via the website.'
(Relative)

When we asked the patients, carer and relatives about the environment in the house we heard:

'It's lovely and relaxing. My family have been taking me round the grounds in a wheelchair.'
(Patient)

'The last time he had a room on his own, which was a bit nicer. But he's up for a chat with anyone so he's OK in the bay.' (Relative)

'It's peaceful and calm here – and very, very clean. There's a pull-down sofa I use, they brought me pillows and bedding. I was offered the family room but wanted to stay with [relative] and they were open to it.' (Relative)

When we asked the patients, carers and relatives about any improvement required in the centre we heard:

'I don't think there's anything that could be improved, this place is amazing.'
(Relative)

When we asked the patients, carer and relatives about any other comments, we heard responses such as:

'Everyone thinks hospice is doom and gloom and it's not – the main objective is still to get you better! I've had physio sessions which have been all right though I'm a bit wobbly on my legs! You can have visitors from 8 to 8, and its near home, so I've had family and friends visiting, and mates from work.' (Patient)

'It's nice to feel you're not in anyone's way, as soon as you walk in you feel welcome.'
(Relative)

'We need a few more facilities like this! I can't thank this place enough – it's saved the family.' (Relative)

'Would like to say how helpful this [carers'] group has been – to share how we're all feeling, even though we've all been living with it for different lengths of time. It's helped me feel it's natural and normal to feel what I'm feeling. It's a safe space.' (Relative)

'The support group is good for sharing practical things too – like a special kind of shampoo. Sharing the feelings is really supporting, and hearing others going through them. It helps with the path of acceptance – which is crucial for peace of mind, but not easy. Instead of overthinking and always anticipating what's coming.' (Relative)

'Today was a wonderful experience. We know a family who lost their son, he died here. The experience of being here was so amazing and one of the nurses said what a privilege it was to care for him.' (Relative)

➤ **Staff feedback**

We received feedback and comments from 16 members of staff – eight on the day and the other eight the next day by email, representing a cross-section of roles. A positive

attitude was consistently expressed by staff members about their work, their interactions with patients, and the high standard of care they provide. Their positivity collectively fostered a supportive and welcoming environment within the hospice, and we were informed by all staff that they had received all the essential and required training necessary for them to effectively manage their roles. Comments by staff also indicated some challenges around interaction with wider health support system and capacity, for example patient transport, housekeeping service plans – which we recommend taking account of.

What is the best thing staff said about the job?

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

'Going the extra mile for patients and relatives, giving the best care I can give.'

'Very proud to work for Katharine House. It is a privilege to care for patients at the end of their lives and to be able to impact care from a senior nursing level.'

'I enjoy working with a mix of different professions, including our charity. It is very rewarding, knowing that you have played a part in making a very difficult time for someone a little easier. My colleagues are very supportive, and our managers team are approachable.'

'I think it's amazing to be let into people's lives, at such an important time, and to helpfully take burden away families.'

'Working as part of the team. The holistic nature of the hospice e.g. psychological, social and physical support.'

'Feeling that I have supported people through the uncertainty, difficulty and stress of end of life. I feel lucky to work with such an amazing team who are passionate about what they do and have shared goals.'

'Being the first person to greet people. Meeting relatives and patients is probably the best thing about my role. Hopefully able to put visitors at ease when arriving. Making it a place where people feel welcomed.'

'When people get a letter to say 'hospice', they worry they won't come back from an outpatient appointment. I talk to people about what we offer, not just place and time. 'Seeing people arrive who are nervous and the doctor brings them to Living Well - giving information in a gentle way and they can see it. And sometimes doctors can show them the inpatient unit, taking that barrier away, makes them feel better about it.'

'Volunteers are really essential to the hospice. I've been in the NHS 30 years, and this is the most special job I've had, I feel privileged to work here. I love my job.'

'Providing support to patients and their families in times of great need. Sharing their joy and struggles. Being trusted to walk alongside them. Supporting other staff in their amazing work. Being part of this wonderful community. Helping people to prepare for their death with hope and freedom from pain.'

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:



'Not being heard sometimes.'

'Not all policies/process are reflective of the area.'

'Discharge - very long process which often ends up cancelled as by the time paperwork is ready patient usually deteriorates and not fit for discharge.'

'Lack of availability at Katharine House such as music therapy, pre-bereavement support, complementary therapy or psychological support.'

'Working in a hospice can be emotionally draining, however, we are well supported by colleagues. Being a satellite unit poses extra hurdles in arranging investigations, medications and public transport.'

'Patient transport.'

'We have an isolated unit, and we have not much support nearby if needed. Dealing with pharmacy is difficult at times as is not on site.'

'The nature of the work is very heavy and can be eventually very demanding. I see how hard our staff work in the face of systemic issues in the NHS and worry sometimes for their wellbeing. Staff support - for nurses - should be better funded.'



We asked staff if they would raise concerns? We heard:

'Yes, any concerns I have raised, or suggestions have been listened to by both the ward manager and our deputy matron. I feel that my opinions are taken seriously.'

'Our ward manager is always very happy to listen and take on board suggestions. She will always explain and give reasonable reasons if it is not possible. I have never felt that my suggestions or concerns are not listened to.'

'Yes, I feel able to raise any concerns I may have. I feel that everyone has a chance to speak and are listened to.'

'The senior staff are all very approachable can go out of their way to speak to us when I'm in duty.'

We asked how staff thought Katharine House Hospice and the service they provide could be improved? We heard:

'Like all hospitals, greater investment in staff wellbeing is needed. Staff working in palliative care been a particular burden and the trust and wider NHS should reorganise their need for psychological and practical support in their work.'

'Housekeeping currently finish at 4pm, this could prevent an out of hours admission (for later in day) as room is not cleaned. No security available but we have CCTV.'

'More formal pre-bereavement support.'

'Ideally more complementary therapies for patients ex. Hand massage, music therapy - patients respond to them very well.'

'Provision of complementary therapies could be increased to maximise the holistic philosophy of hospice care, Increased focus on psychological/mental health support.'

When we asked the staff about any other comments, we heard responses such as:

'We are going through some organisational changes this might mean that services may be cut. I have worked for the NHS for over 35 years, and this is the best role so far.'

'Language - we are proactive, if it is a booked appointment, we book the interpreter or phone call with Absolute. We make sure we speak clearly for lip reading. We don't have a hearing loop because the reception is such an open space, but we get to know patients.'

'Katharine House is a wonderfully supportive and pro-active place, where patients and families receive excellent care. We are a diverse and highly skilled team who work together to utilise our corrective expertise in our field.'

*'It is a real joy to work at Katharine House, the team here are fantastic, and many of them have years of experience in palliative care, they care a huge amount about every patient
, I have learnt so much from them while I have been working here.'*

'Truly believe patients and their families receive care to the very highest standard. I would be happy for someone I love to be cared for here at the end of their life.'



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:

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