

Your voice on health and care services

Ambulatory Care Unit, Cancer and Haematology Centre, at the Churchill Hospital Enter and View Report



Contents

1.	Visit details	3
2.	What is Enter and View?	4
3.	Summary of findings	5
4.	Recommendations	6
5.	Service response to recommendations	7
6.	Report: Visit to the Ambulatory Care Unit 14th May 2024	9

Acknowledgements

Healthwatch Oxfordshire would like to thank all the people we spoke to and heard from, and all staff at the Ambulatory Care Unit (ACU), Cancer and Haematology Centre, at the Churchill Hospital for their support and contribution to the Enter and View visit.

1. Visit details

1.1 Details of Visit

Service Address	Ambulatory Care Unit (ACU)
	Cancer and Haematology Centre,
	Churchill Hospital, Oxford, OX3 7LE
Service Provider	Oxford University Hospitals NHS Foundation Trust (OUH)
Date and Time	May 14th 2024 10am to 1pm
Authorised Representatives	Amier Alagab, Tania Wickham
Contact details	01865 520520 Healthwatch Oxfordshire

1.2 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, only an account of what was observed and contributed at the time.

2. What is Enter and View?

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.

Under this legislation, Enter and View visits can be made to any premises where health and social care is publicly funded - such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies.

Through an Enter and View visit we collect evidence of what is working well and identify how patient experience could be improved. We use what we hear and see to report to providers and others with recommendations to inform change for health and care services we visit.

2.1 Purpose of the visit

- To observe how the facility operates and provides its services.
- To collect views from patients, volunteers, and staff on services.
- To identify 'Best Practice' and highlight any areas of concern.
- To report what we see and hear to improve the quality of health and care services.

2.2 Strategic drivers

- Our Enter and View visit to the Ambulatory Care Unit, Cancer and Haematology Centre, at the Churchill Hospital, is part of a number of visits to a range of services within Oxford University Hospitals NHS Foundation Trust (OUH).
- These visits were planned and implemented in 2024 2025 with full support from OUH.

3. Summary of findings

Please note these findings represent a portrayal of what we observed and heard about the experiences of the service users and staff on the day that we visited:

The Ambulatory Care Unit (ACU) is part of the Oncology and Haematology
Directorate, Level 1, in the Cancer and Haematology Centre at the Churchill
Hospital. Patients come as day patients for care and treatment. The unit is
equipped with comfortable chairs and beds, and it has all the equipment
needed to treat and monitor patients. The unit is staffed by experienced
chemotherapy nurses with the support of consultant if needed.

Signage and information

The signage, directing patients from the main entrance to the Oncology ward, was clear. However, the sign to the ACU was not clearly visible (on A4 paper) compared to the fixed signage in the building, and this could be more prominent.

- The unit has a comprehensive range of information, well presented in all wards. This included information on a variety of topics.
- There were patients thank you card boards on display inside the unit.
- The unit opening hours are on display, from 8am 6pm.

The general environment

- The staff at the Ambulatory Care Unit (ACU) are welcoming, which creates a positive first impression for patients and visitors.
- The atmosphere of the unit was busy, and full of activity, but calm. Staff were welcoming, and staff-patient interactions were friendly.
- The Cancer and Haematology Centre was clean and tidy despite the space constraints. The ACU is made up of one large room with two beds and three chairs for patients, and a patient's toilet.
- The space on the unit, although tight, was efficiently organised across all the wards.
- The waiting room is very small, but clean, tidy and with good ventilation.
- All the staff are based in the same treatment room as well as the patients and are always busy. There is no separate room provided for the staff.

 The ACU room was fully occupied by patients, who were sitting close to each other, making it difficult to maintain confidentiality when speaking to the unit staff.

Patient and staff feedback

- It was wonderful to hear that patients expressed a high level of appreciation for the support and care they received at the ACU. Patients had praise for the unit staff team and told us they appreciated the care and support they received.
- There is no suggestion box, but a feedback form is available at the entrance of the ACU for patients.
- One of the chairs provided for patients didn't recline and was broken.
- There are no TVs in the unit.
- There were no lockers provided for the staff to use to store personal items in the unit. Staff use a side cabinet for their belongings along with other unit equipment.

4. Recommendations

- Internal signage could be improved to help patients find the ACU.
- Explore the possible provision of a side room for patients to help minimise the chance of infections, and to help with confidentiality.
- Implementation of curtains between beds could support patient confidentiality and create a more conducive environment for medical treatment.
- Explore provision of separate lockers for staff belongings.

5. Service response to recommendations



Healthwatch Report following the Oxfordshire Healthwatch Enter and View Visit on 14th May 2024 to the Haematology/Oncology Ambulatory Care Unit (ACU), Churchill Hospital, Oxford

Dear Amier and Tania,

Thank you again for undertaking the Enter and View Visit on 14th May 2024 and for the report which was extremely helpful. We wanted to take the opportunity to thank you for your findings. We have discussed these findings with the leads in the area and have developed a plan below, which I hope will provide you with the assurance you require. The team have also found some points for accuracy, which are outlined in Table 1 below, and the ACU team would be grateful if the report could be amended to reflect these changes.

Page no	Healthwatch Report	OUH comment for factual change
5	The Ambulatory Care Unit (ACU) is part of the Oncology Ward, Level 1, in the Cancer and Haematology Centre at the Churchill Hospital.	The Ambulatory Care Unit (ACU) is part of the Oncology and Haematology Directorate, Level 1, in the Cancer and Haematology Centre at the Churchill Hospital.
5	The unit opening hours are on display, from 8.30am – 6pm.	The unit opening hours are on display, from 8.00am – 6pm.
17	A patients' board shows patients' comments and feedback.	This is oncology ward's board. Please see action table.

Table 1: Factual Accuracy

Table 2, below, show the project objectives with the completion timescales and the specific action plan developed from the Enter and View visit on 14th May 2024.

Healthwatch Recommendation		Trust Action	Timescale
1.	Improvement to internal signage	The directorate have a signage project underway and since the Healthwatch visit, some signage has been completed. We are currently awaiting the removal of the hospedia machines prior to completing the next phase. Waiting Area Area Waiting Area	In progress anticipated 31 Dec 2024
2.	Explore provision of side room for infection control and confidentiality	Continue to work closely with Triage, Early Phase Trials Unit, and the wards to maximise use of side rooms. Remind all staff of the importance of maintaining confidentiality where feasible. To encourage staff to take patients to a quiet area if sensitive information being discussed. Curtains around all feasible areas. Formal space requirements are part of the directorate strategy and is on the trust risk register. New chairs and tables ordered to maximise space	Continual practice and reinforced. Complete Complete Expected delivery 31 Oct 2024
3.	Explore provision of separate lockers for staff belongings.	Remind staff of the availability of lockers on level 2 and on the Oncology and Haematology wards.	Complete
4.	Ambulatory care unit does not have a suggestion box or display patient feedback results	The current board is being updated to reflect the friends and family test and results. We are installing a red box for paper suggestions.	31 Aug 2024
5.	There is a broken chair in the unit	This has been changed.	31 July 2024

Your report has also highlighted to us the requirement to update our visitor policy. We have ordered stackable chairs and placed a poster about visiting on our notice bords. We have informed all staff and current patients. A request to update the trust communication website has been undertaken.

Thank you once again to you and the Healthwatch team for the visit and the detailed and thoughtful report. We would very much welcome a further Healthwatch Enter and View visit later in the year as we greatly value our partnership, and we are keen to continue focusing on providing an effective and welcoming experience for our patients.

With best wishes

Andrew Carter

Deputy Chief Nursing Officer

6. Report: Visit to the Ambulatory Care Unit on 14th May 2024

Methodology

We follow Healthwatch England guidelines for Enter and View visits. The steps below summarise the process:

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:

o Prepare resources such as surveys and questionnaires.

^{*}Amendment done for table no (1)

- 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.
- o 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 20 working days.

• Follow up:

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

The visit took place from 10am to 1pm on 14th May 2024 with two trained Enter and View representatives.

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

Additional question sheets, with FREEPOST envelopes for return, were left with staff and patients for comment and feedback.

Service background

The Ambulatory Care Unit (ACU) at the Churchill Hospital is an integral part of the range of support and services offered to patients by the Cancer and Haematology Centre under the Oxford University Hospitals NHS Foundation Trust (OUH).

The ACU is located on level 1 of the Cancer and Haematology Centre on the Oncology Ward and on the left past the triage reception desk.

The ACU is the unit where people come to spend the day for their treatment. It is a two-bedded unit with three chairs where patients can have their treatment during the day. The unit is equipped with comfortable chairs and beds, and it has all the equipment needed to deliver treatment and monitor patients.

In the past, some chemotherapy treatments would require admission to hospital for the whole of the treatment. Ambulatory Care Unit is a way of giving these treatments without admitting the patient to the ward. It means that some high-dose chemotherapy treatments, or chemotherapy that is given over several days, can be given to the patient as a day patient and the patient does not have to stay in the hospital overnight. At the end of the day, patients are able to go home or to the dedicated flat provided on the hospital site. In some cases, a patient may continue to receive some of the treatment via a small electronic pump overnight.



Flowers in the waiting room

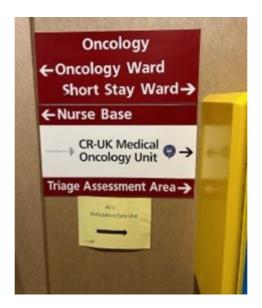
More details about the Ambulatory Care Unit can be found at the link below:

<u>Ambulatory Care Unit (ACU) - Clinical Haematology (ouh.nhs.uk)</u>

Access and signage

External signage from the hospital car park guiding patients to the main entrance was very clear and it was easy to find.

The sign to the ACU was not clearly visible (A4 paper) compared to the fixed signage in the building.



ACU Internal Sign

The ward environment

The unit is operated by qualified nurses from Monday to Sunday 8am – 6pm seven days a week, with the capacity of 6-8 patients a day.

The unit is made up of one room with two beds and three chairs, and a patient's toilet. All the staff are based in the same room with patients and are always busy.

On the day of our visit, the room was fully occupied by patients, who were sitting close to each other, making it difficult to maintain confidentiality when speaking to the unit staff.



A patient bed

There is a small, tidy, clean waiting room adjacent to the unit. Friends and family are not allowed inside the unit – due to space constraints. The room has pleasant pictures on display which supports a calm atmosphere.



ACU waiting room



Storage for staff belongings

There were no lockers for the staff to use to store personal items in the unit, staff use a side cabinet for their belongings along with other unit equipment.

Face masks and hand sanitisers are available in all areas of the wards.

The atmosphere of the unit was busy, and full of activity, but calm. Staff were welcoming, and staff-patient interactions were friendly.

Information on display

The presence of informative displays helps patients and visitors navigate the facility, making it easier for them to find their way around and locate the services they need. The oncology ward in general has a lot of information on display. The ACU, due to the space capacity, provides patients with a lot of information on leaflets such as:

- Going home with a Computerised Ambulatory Delivery Device (CADD)
 Pump
- Food safety when you are less able to fight infection
- Dealing with a chemotherapy spillage
- Going home with ambulatory ifosfamide chemotherapy.

This information contributes to creating a welcoming and informative atmosphere within the ACU supporting the hospital's commitment to patient-centered care and effective communication. Staff team photos enhance this welcome.



ACU welcome board

There were two boards on display with 'thank you' cards received from patients. Information about a Computerised Ambulatory Delivery Device (CADD) Pump which is offered for patient usage at home was also on display. There is also a board which shows the name of the nurse in-charge and the number of nurses on duty on the day, patient feedback, and patients thank you board.





Patients thank you display board

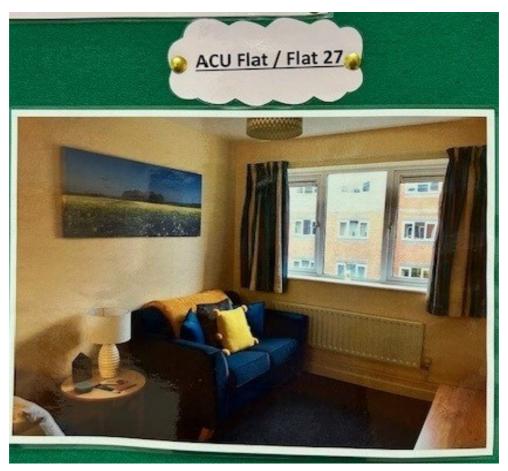
CADD pump

Additional notice boards in the ward displayed a mix of regulatory and patient-oriented content highlighting a range of topics. This included how to give comment and feedback, and the Friends and Family Test. Boards also provided medical information for patients on infection prevention and control, Leukaemia and Myeloma plus palliative care, among other topics.

Although the ACU provides services during the daytime only, patients can be offered overnight accommodation with their carer or companion in a dedicated flat.

The accommodation is located a 10-minute walk away from the ACU on the Churchill Hospital site.

The patient flat has four separate en-suite rooms with a single bed and one pullout bed per room. It has a shared kitchen/dining and living area. The room is decorated with pictures and fittings to create a welcoming, calm and homely environment.



ACU flat

There were posters at the unit and the wards reminding people that individuals waiting in this area may be immunocompromised, and hence, special consideration of social distancing guidelines may be required.

By providing a comprehensive and well-organised range of information and leaflets, the unit demonstrates its commitment to patient-centered care and the promotion of health education.





Oncology pharmacy

Waiting area

There was a specialised oncology pharmacy, which provides essential support and services to cancer patients, including access to specialised medications, personalised care, and coordination with oncology practices.

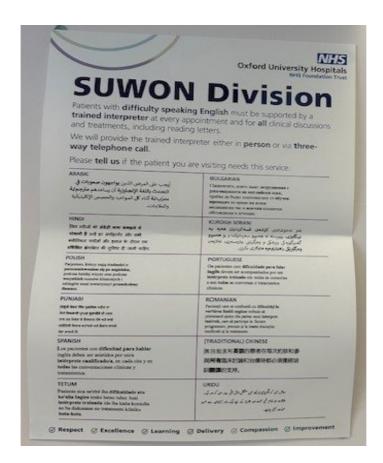
There was no suggestion box at the unit, but feedback forms 'please tell us your views' are available. The oncology ward's board shows patients comments and feedback.





Opportunities for patient feedback

There is clear information at the entrance to the unit about how patients who have difficulty speaking English can access an interpreter and translated information. There are well-presented details about 'who's who' in the unit, and staff on reception had name badges with their names prominently written down the side of the ribbon, so easy to identify.



Interpreter access

Patient feedback

In all we heard from four patients on the day, representing a range of ages. All were women and White British. Patients we spoke to were attending regularly for their treatment plan.

It was wonderful to hear that patients expressed a high level of appreciation for the support and care they received at the ACU at the Churchill Hospital.

The patients praised and thanked the staff team; they told us:

'Very helpful. Get to know them as you come often.'

'Exceptionally helpful. If you ever have a problem and they didn't know, they will email/call someone. Multi-disciplinary team really good.'

'Very professional. They know what they are doing.'

Patients comments on the waiting time included:

'Came in between 9 and 10 am. Had bloods taken today.'

'Waited an hour for the scan. Get blood sample back straight away.'

Most patients valued the information provided on the notice boards.

One patient out of the four we spoke to were not sure how to give suggestions, make a complaint, or give any feedback about the service.

Patients we saw told us they don't need an interpreter but had been offered the service if needed.

Patients praised the care and treatment received at the ambulatory care unit.

'Really helpful. booklet with information. staff are really good at managing information they tell you.'

'Listen: nothing is too much for them. This hospital is top tier.'

'I'm very satisfied and very grateful. When my blood test result was not good, they acted on this immediately. Good for me that there was no delay. They have saved my life'.

'I'm hugely grateful for all the work they do, they are very good on the ward as well. They try not to disrupt your day-to-day life'.

'They do the best they can do. If you have an issue that is not to do with the ward, other wards/departments can be very busy, and it can be hard to get transferred.'

When we asked patients about the environment, they said:

'Lovely clean, spotless, lovely small space - comfortable, convenient.'

'Can choose chairs I want. If I want to lie down, I can.'

'One of the chairs does not work - can't adjust it.'

Patients told us they received information about their care and condition at the beginning and were always kept updated.

Staff feedback

We received feedback and comments from five staff members, within the unit.

Every member of staff we spoke to was friendly, approachable and helpful, especially during the busy time which reflects good communication and positive interactions.

Staff seem very dedicated and professional and know how to deal with each patient according to the treatment plan and protocol demonstrating commitment to providing high-quality care and support to patients.

Staff were positive about their work in the ACU, and especially valued the patient interactions and care.

Staff told us that the present management is open to receiving suggestions and feedback from them.

We heard from staff that the management is incredible and supportive. They are always keen for them to gain new skills and complete training to meet personal and career goals.

Staff told us there is an open-door policy in their immediate team but were not sure about how to feedback to higher up management, and were unsure as to how concerns were addressed at a higher level.

Staff commented that they felt satisfied with what they were doing and felt listened to and able to make suggestions on the unit. They felt that their concerns would be taken seriously.

What is the best thing staff said about the job?

Staff told us they are happy in their job, and we heard that:

'Because I have in depth knowledge of the treatments, I can make patients feel very safe and also always deal with concerns. Seeing them relax and trust us is very rewarding. This also develops great relationships with patients.'

'The patient interactions and the response we make. We often treat patients for extensive periods of time and get to know them and their families.'

'ACU is small unit, a lot of autonomy, nurse led service, experienced, dependable colleagues who all have patient interests driving care or clinical decisions. Building strong rapports with our patients from varied backgrounds and continuity of care, and support because of our small size, I feel we are able to provide a very high standard of personalised, efficient care for patients.'

What are the challenges staff raised?

We asked staff to tell us about any frustrations or challenges with their work.

Comments included that they are facing significant challenges with restricted treatment space, which can take a toll on their well-being.

'Space - challenges around being able to accept all patients who require ACU.'

'Lack of space - so we spend a lot of time trying to fit patients in, only to have delays so we say 'no' to a referral... then in the end we have space.'

'Our team is often called upon to help with patient care from different departments (inpatient care /chemo), sometimes difficult to predict/manage workload. Also have cancellations - go from busy - quiet - busy.'

'Capture systems, multiple high priority referrals. Upsetting patient outcomes. Lack of treatment space.'

'Delivering care in an efficient, timely manner often depends on various factors all lining up - medical inpatient/pharmacy inpatient /delivering of chemo, each department has its own focus and principles which don't always align with these of ACU.'

'Delays to care caused by delivery of chemo/transport issues.'

'Unpredictable nature of space capacity and bed availability if we need to admit a patient/ward (capacity). Poor Wifi network connection (ECGs) difficult to upload.'

What suggestions did staff make?

Staff suggestions included:

'The only way I could improve the service would be to have a side room.
 This would mean we could have more confidential conversations (without having to borrow side rooms from other departments) and expand the service so we can take more patients.'



Healthwatch Oxfordshire - our friendly staff are here for you to help answer questions or give you information on health and care services in Oxfordshire. If you need more information or advice, call us on **01865 520520** from 9am-4pm Monday to Friday.

To find out more about Healthwatch Oxfordshire please see **www.healthwatchoxfordshire.co.uk**

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:



01865 520520



hello@healthwatchoxfordshire.co.uk

