



Trauma Outpatient Unit John Radcliffe Hospital

**Enter and View Report
October 2026**

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Visit details

Service	
Service Name	Trauma Outpatient Unit
Service Address	John Radcliffe Hospital Headley Way, Headington, Oxford OX3 9DU
Service Provider	Oxford University Hospitals NHS Foundation Trust (OUH)
Date and Time of Visit	19th May 2026 10am-1pm
Authorised Representatives	Amier Alagab Carol Ball
Visit Status	Announced visit
Contact details	Healthwatch Oxfordshire Office F20 Elmfield House New Yatt Road Witney Oxfordshire OX28 1GT T: 01865 520520

Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff; it is merely an account of observations and contributions made at the time of the visit.

About Healthwatch Oxfordshire

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

What is Enter and View?



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

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

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

Purpose of the visit

- To observe how the Trauma Outpatient Unit at the John Radcliffe Hospital operates and provides its services.
- To collect views from patients, relatives and staff on the service.
- To identify 'Best Practice' and highlight any areas of concern.
- To report what we observe and hear on the day about the quality of the services.

Strategic drivers

- This Healthwatch Oxfordshire Enter and View visit to the Trauma Outpatient is part of a programme of visits to a range of services within Oxford University Hospitals NHS Foundation Trust (OUH).
- These visits were planned and implemented in 2026 – 2027 with full support of OUH.

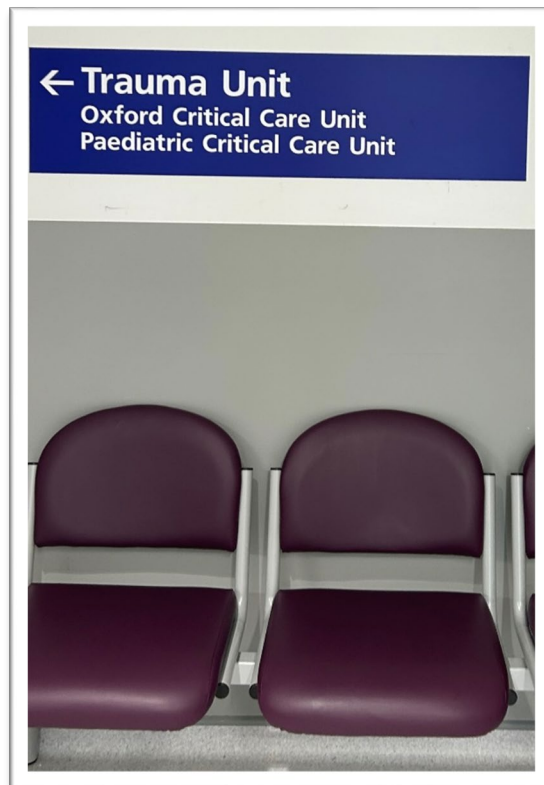
Summary of findings

During our visit to the Trauma Outpatient Unit, we heard from eight patients, and 11 members of staff (ten on the day and one response received by post).

Signage and information



The Trauma Outpatient Unit is signposted from the main hospital entrance. However, once we got to the lift by the unit it wasn't clear where to go and we had to ask for directions. Once in the unit there was a staffed reception area to support and direct patients and visitors.



The unit has a large well-organised and welcoming reception area, providing patients and visitors with a pleasant area to wait in with easy access to information and support. The environment was designed to be accessible, ensuring that key information was readily available helping to create a positive first impression.

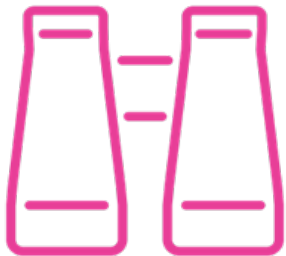
We found the following information on display on the day of our visit:

- Welcome sign at the entrance
- Opening hours displayed at the entrance
- The Oxford Trauma service history
- Support with your blood thinning injection at home
- Patient transport contact
- Trauma research board
- Patient experience board with a "Tell us your views" poster with a QR code on, and results on display from the February patient feedback
- Supporting your wellbeing
- Complaints, comments, and compliments information
- Your X-ray test information
- Hospital map at the reception
- A TV which advertises the clinics running on the day
- Healthwatch Oxfordshire poster.

We did not see any translated information materials at the unit, and no sign on display to inform the patients about the offer of interpreting support.

The general environment

The environment was maintained to a high standard, and was clean, well-presented, and in good condition throughout. The unit provided a comfortable and welcoming atmosphere for patients, with a spacious waiting area designed to support patient comfort while waiting for appointments.

An icon consisting of two simple line drawings of chairs, each with a backrest and four legs, connected by a horizontal line.

There were a variety of seating options, including chairs of different sizes and colours, allowing patients to choose seating that best met their preferences and needs.

The unit included a children's playroom, which was attractively decorated with bright colours and equipped with toys to help create a child-friendly environment whilst waiting in the unit.

Additional facilities included a vending machine, a water fountain for patients and visitors and a staff kitchen. There were bins dotted around the unit for people to dispose of their waste.

We saw accessible toilet facilities which again were spotlessly clean and available throughout the unit.

We did not observe the presence of a hearing loop.

The unit also housed two X-ray rooms conveniently located adjacent to the waiting area which we did not enter.

Overall, the environment reflected a harmonious design, creating a space that was not only functional but also calming, welcoming and supportive of patient wellbeing.

Patient and staff feedback

The patients we spoke to during the visit reported high levels of satisfaction with the unit. Patients commended the effective communication provided and the kindness, professionalism and supportive approach demonstrated by staff. Two patients

mentioned not having the opportunity to ask questions of their clinician, whilst other patients said they felt fully communicated with.

Overall, patients and relatives reported feeling well cared for valued throughout their time in the unit. They expressed appreciation for the high standard of care provided and the positive experience they had during their waiting time.



Staff members told us that it was a pleasure to work within the unit, describing the team as highly supportive and experienced, with many staff bringing valuable expertise and knowledge to their roles.

The team demonstrated a strong commitment to delivering high-quality care. All the staff members we spoke with reported feeling well supported in their professional development and training, which enhanced their skills, confidence and job satisfaction, enabling them to provide high-quality patient care.

Staff highlighted the lack of sufficient parking spaces as an ongoing concern. They reported that both staff and patients often experience difficulties finding parking, which can cause delays and resulted in some patients arriving late for their appointments.

Feedback from both patients and staff highlighted patient transport as an area where further improvements are required.

Recommendations

- 🗣️ Provide and display clear information on how people can access an interpreting service
- 🗣️ Install hearing loops in the unit to improve accessibility for patients with hearing impairments
- 🗣️ Ensure patients are clear about the treatment pathway on the day of their appointment to avoid patient frustration at perceived inefficiencies
- 🗣️ Remind clinicians to ask patients if they have any questions about their treatment/recovery enabling patients to leave the unit fully informed and confident
- 🗣️ Improve the signage near the lift adjacent to the unit to avoid confusion
- 🗣️ Continue to focus on addressing the parking challenges experienced by patients and staff
- 🗣️ Work with patient transport providers and commissioners to improve communication and planning to provide a seamless experience for patients
- 🗣️ The Care Quality Commission report should be displayed as per [the Health and Social Care Act 2028 regulations](#).

Service response to recommendations

Response received by email on 1st October 2026.



Oxford University Hospitals
NHS Foundation Trust

Response to Healthwatch Oxfordshire Draft Enter and View Report – Trauma Outpatient Unit at John Radcliffe Hospital

Dear Veronica and Amier,

Thank you for your letter dated 29 June 2026 and for sharing the Enter and View report, Trauma Outpatient Unit at John Radcliffe Hospital.

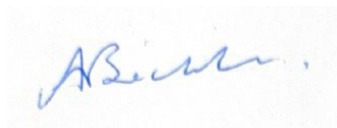
Table 1 below sets out each recommendation and the Trust's response.

Healthwatch Recommendation 1) Provide and display clear information on how people can access the interpreting service
A multilingual 'welcome' poster has been obtained and will be displayed at reception to help patients identify that interpreting support is available. We now have a language identification card in all areas of the department so that we can identify the language that patients having difficulties communicating in. This will allow staff to accurately book interpreting services in line with Trust guidelines. We have now also put our own sign in the waiting room to inform patients that we have an interpreting service available as the Trust does not have one.
Healthwatch Recommendation 2) Install hearing loops in the unit to improve accessibility for patients with hearing impairments
Two hearing loops have been obtained for the unit: one for reception and one for the clinical area. These are now available for immediate use to support patients with hearing impairments.
Healthwatch Recommendation 3) Ensure patients are clear about the treatment pathway on the day of their appointment to avoid patient frustration at perceived inefficiencies
We recognise the importance of helping patients understand what to expect during their appointment. Pathways within the Trauma Outpatient Unit can vary depending on individual clinical need; for example, some patients require X-rays before clinical review, some attend for cast removal, and others proceed directly to a clinician. Providing tailored pathway information for each patient would require additional screening and planning, which is not currently in place. However, we agree that this would be valuable and will explore practical options, including learning from approaches used in other outpatient departments.
Healthwatch Recommendation 4) Remind clinicians to ask patients if they have any questions about their treatment /recovery enabling patients to leave the unit fully informed and confident

Clinical teams will be reminded to routinely ask patients whether they have any questions about their treatment, recovery, or next steps before they leave the unit. This will help support patients to feel informed and confident following their appointment.
Healthwatch Recommendation 5) Improve the signage near the lift adjacent to the unit to avoid confusion
Signage near the lift leading to the Trauma unit has been reviewed there are clear directions to the Trauma Unit and further specific direction available when you get closer to Outpatients.
Healthwatch Recommendation 6) Continue to focus on addressing the parking challenges experienced by patients and staff
We acknowledge that parking remains a significant challenge for both patients and staff. This is a Trust-wide issue and continues to be considered through wider organisational planning and improvement work. Staff will continue to support patients where parking-related delays occur, and appointment information will continue to include guidance on travel and parking arrangements.
Healthwatch Recommendation 7) Work with patient transport providers and commissioners to improve communication and planning to provide a seamless experience for patients
We continue to advocate for patients experiencing challenges with EMED transport and raise concerns through the appropriate routes as issues arise. Feedback has also recently been provided to the CQC regarding the EMED transport service. We will continue to work with relevant partners to support improved communication, planning and patient experience.
Healthwatch Recommendation 8) The Care Quality Commission report should be displayed as per Health and Social Care Act 2008 regulations .
The CQC report is now displayed clearly in the waiting room in line with regulatory requirements.

Thank you once again to you and the Healthwatch team for sharing the report. We value our partnership and remain committed to providing an effective, compassionate and welcoming experience for 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 19th May 2026, with two trained Enter and View representatives.

During the visit, the team spent time observing the day-to-day activities within the Trauma Outpatient Unit. This included reviewing the general environment, such as cleanliness, patient comfort and the availability of information on display, as well as engaging with both patients and staff to gather their views and experiences.

About Trauma Outpatient Unit



The service is run by Oxford University Hospitals NHS Foundation Trust (OUH) at the John Radcliffe Hospital in Oxford.

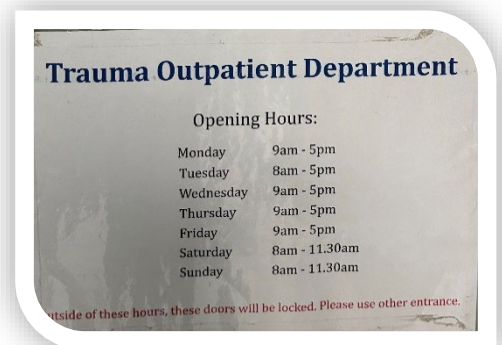
The unit provides services during the daytimes only with the opening

hours clearly displayed at the entrance to the unit.

The unit only closes on Christmas Day.

The unit consists of 11 consultation areas, a plaster room and is supported by two X-ray units providing services to patients.

More details about the unit and the services they offer can be found at <https://www.ouh.nhs.uk/services/departments/general-surgery/trauma/>



Our visit



During our visit, we were welcomed by the administrative staff at reception and the Unit Manager, who provided an overview of the services delivered within the unit. We were subsequently given a tour of the facility, which enabled us to familiarise ourselves with

the environment before continuing with the remainder of the visit.

During our visit we spoke to eight patients, and 11 members of staff (ten on the day and one response received by post).



Access and signage

The signage guiding patients and visitors from the hospital main entrance to the lift by the trauma unit was clear.

However, once got to the lift by the unit it wasn't clear where we needed to go and we had to ask someone for direction.

Inside the unit, the reception team were available to provide patients with support and guidance.



The unit environment

The atmosphere within the unit was calm yet busy, with staff demonstrating a welcoming approach. We observed positive, friendly interactions between staff and patients. The unit benefits from spacious waiting areas for patients and visitors, as well as a separate, well-designed and well-equipped children's play area that was brightly decorated and child friendly.



Children's play area

The children's room was designed with toys and decorations to create a welcoming and comfortable environment for younger visitors.

Patients were taken into curtained cubicles for their consultations, providing privacy during discussions and examinations, while signage at the reception desk asked patients to wait until the desk was free, helping to maintain the confidentiality and privacy of those being assisted.



Reception

The reception area was staffed by a dedicated team of administrative staff who greeted patients and visitors upon their arrival. The reception team provided patients with clear and friendly directions to the appropriate seating area.



The waiting area for patients and visitors was exceptionally clean, well-organised, and furnished with seating of various sizes to accommodate different needs.

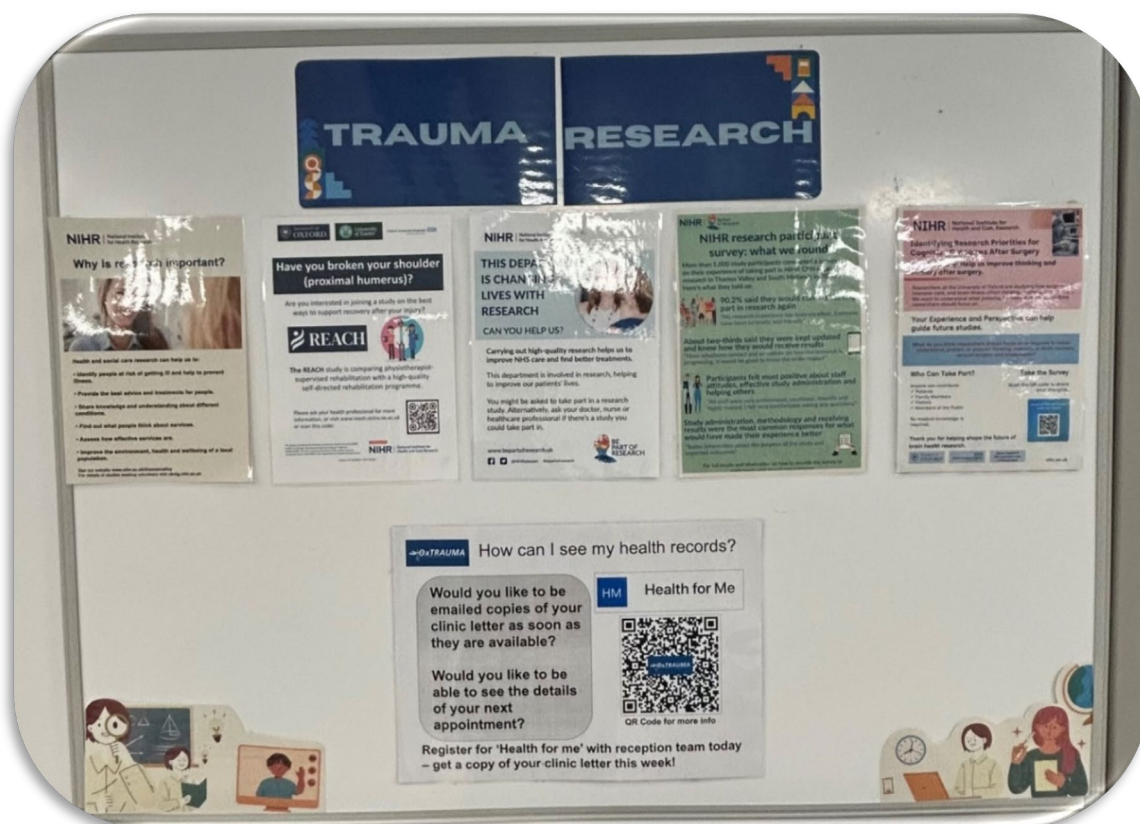
A vending machine and water fountain were available for patients and visitors. The unit was very clean, well maintained and equipped with the facilities necessary to support the delivery of effective patient care.



It was noted that signage indicating the availability of a hearing loop was displayed at the reception desk; however, no hearing loop was physically available at either the main reception or within the outpatient area.

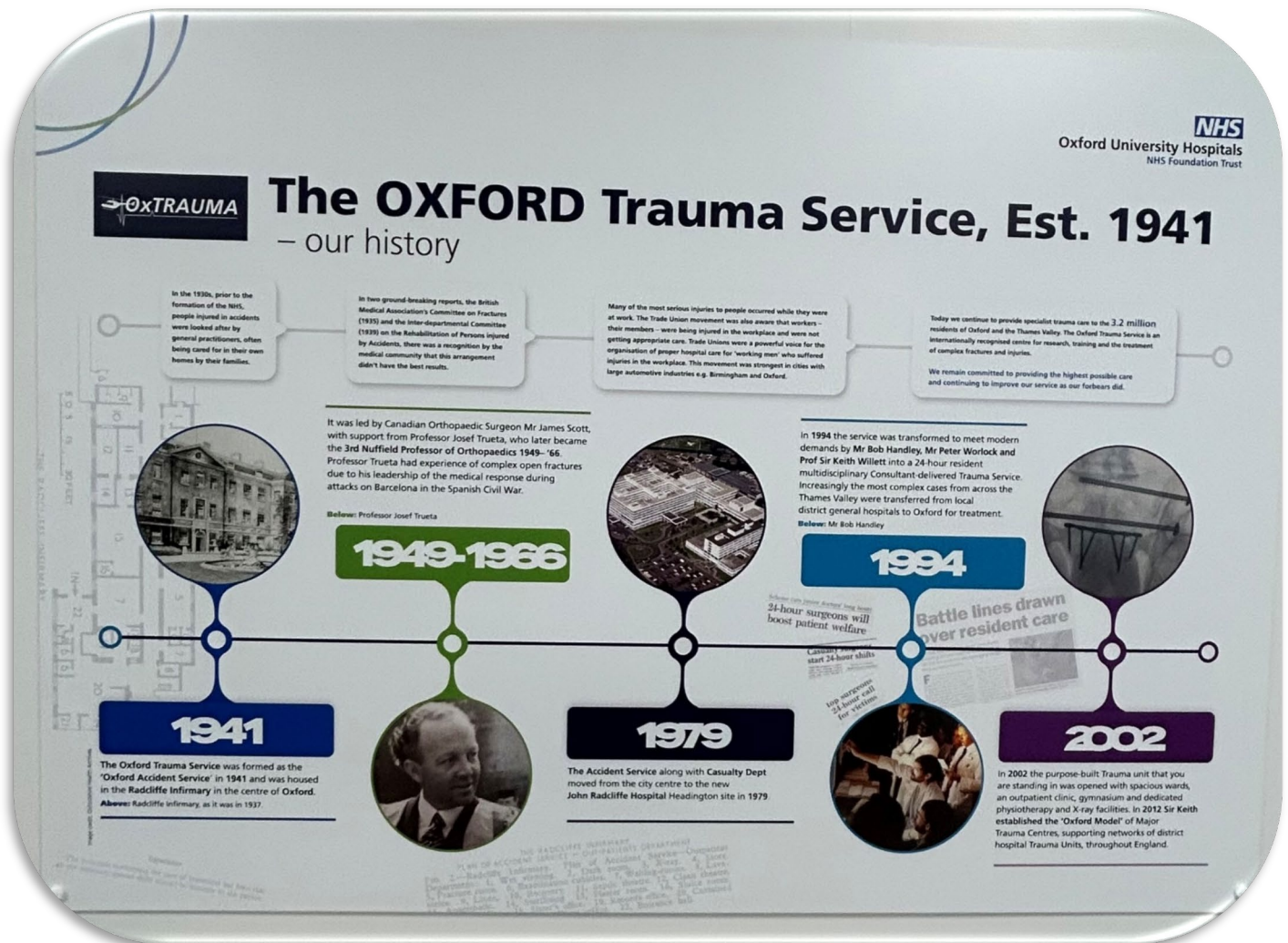
Information on display

A variety of information materials and leaflets were available, outlining the services provided and what patients could expect during their visit. The information was clear and accessible, enabling patients to understand the support available during their stay at the unit. There was a television displaying service information at the waiting area.



At the reception there was a suggestion box, and a please tell us your views noticeboard informing patients on how to give us your feedback or raise a concern.

Patient transport contact information was prominently displayed within a designated information box at reception, supporting patients and visitors to access transport services when required.



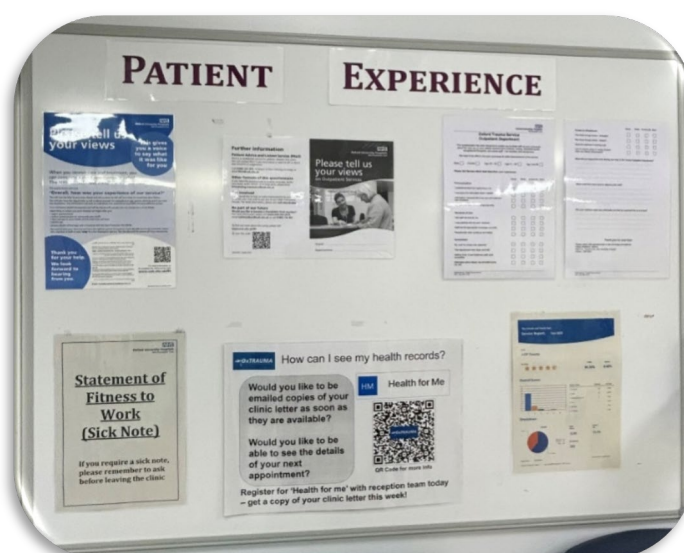
Trauma history

Information displayed included a staff photo board, patient experience feedback, Trauma Service Outpatient Survey, and resources to support wellbeing.

Hospital maps were readily available at reception, providing patients and visitors with clear guidance on how to navigate the hospital and access the appropriate departments and services.



The patient experience board was prominently displayed within the department, providing patients and visitors with access to patient feedback, service updates, and performance information, including the Service Report for February 2026.



Summary of patient, carer, relatives and staff feedback

➤ Patient, carer and relatives feedback

During our visit, we spoke to eight patients.

We asked patients, carers and relatives to share their views on what was working well within the service?

We heard:

'Routine appointment. My treatment was fully explained to me and how my injury was expected to heal. The unit put me in touch with the physio team at Cora Health - although I did wait a while for my first appointment. The staff here are very friendly and to be honest I am usually seen quite quickly. The unit is efficient and although I wasn't prescribed any medication, I was told what I could take if I needed to. When they saw me it was clear they had read my notes as they knew my medical history, and I felt the care plan was personal to me. The clinician was very reassuring which gave me the confidence about the healing process.'

'This was my second visit, and the unit are very good and helpful, in fact I would say the staff are excellent - brilliant. The person I saw explained my treatment and the exercises I needed to do. They also gave me some leaflets so I could see pictures of what it looked like when I was doing the exercises.'

'The staff explained everything to me, what to expect and all about follow up appointments. The staff here are trying their best to see people quickly. The reception staff were helpful; they are good people doing a good job. It's a nice waiting area with machines for drinks and snacks and also a water fountain - it's nice for when you have to wait a while to be able to get refreshments.'

'It's a very efficient unit with helpful reception staff. I was here early and got seen straight away. The physio I saw great and he referred me for an MRI scan. The nurse explained everything to me, my treatment plan and next steps, and was really nice. To be honest I was referred from Abingdon Minor Injuries and the experience was seamless.'

'I went to the plaster room - the staff were lovely. Clearly explained everything to me the staff were very confident and knowledgeable and answered all my questions.'

We asked patients to share their views on aspects of the unit that were not working well and to identify any areas where improvements could be made.

We heard:

'The waiting time is disappointing - I think they could do with more staff.'

'Didn't get a chance to ask any questions, I thought the doctor was coming back but they didn't - I will remember that next time. I think it would have been reassuring to have been asked if I had any questions. I couldn't find it from main reception and I had to ask. The parking is an absolute nightmare.'

'The parking is a massive issue, we were circling the car park for nearly two hours. In the end I had to get out of the car and come to the clinic on my own whilst my family tried to park. The signs from the bottom of the hill to trauma sign you to go left at the roundabout but there is no car park there - it's a building site now. So, we ended up driving around the site to the main car park - it needs sorting out. They should improve the signs from the main reception as I couldn't see any. Once I found them, I lost them again as I came out of the lift. I felt the clinic felt disorderly I was called in and the Dr wanted an X-ray, so I had to wait for an X-ray and then back to see the Dr. Could have had the X-ray first.'

'My surgery was cancelled four times whilst I was an inpatient, and I ended up being transferred to the Horton almost a week after my injury - it was a nightmare. The operation was not clearly explained to me, and I was just left to worry.'

'The administration is awful, appointment letters are delayed, appointments are cancelled.'

We asked patients, carers and relatives if there was anything else they would like to tell us about the service.

We heard:

Patients, carers and relatives spoke positively about the kindness, compassion, and support provided by team members throughout their experience of the service.



'I know how to give feedback if I wanted to and I can say overall it's been a positive experience coming to the clinic. The bus service here is very good although they are less frequent at the weekend.'

'When my (parent) was being discharged no one talked to us about aids and adaptations, we were just left to get on with it. Advice and support would have been really helpful. The parking is awful, and it is such a long walk (if you can) from the car park to the unit.'

'I don't know how to give any feedback - I think I would probably just speak to the staff and tell them or possibly go on the website. I'm not sure really.'

'I think when you come to clinic the clinician should explain "today we are going to..." And improve the nightmare that is called parking!!'



➤ Staff feedback

We received feedback and comments from 11 members of staff – ten on the day and another by post, 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 unit, 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 and car parking.

What is the best thing staff said about the job?

Staff indicated that they are satisfied with their jobs.

We heard:

'Supporting people on their recovery after a traumatic injury. And I love interacting with patients on a daily basis.'

'Helping patients in a stressful time, help give them information about the injury management, and care at home. It's good to see people improve and retain to normal function.'

'Very specialised skill set. Making a real difference to patients. Good team to work with. Able to make changes.'

'My team are amazing to work with, communication is great, support is great. But the best thing is being able to be there for my patients during a time of need or a time of vulnerability. I enjoy caring for people, supporting people. I also enjoy helping the doctors anything to make the patient experience excellent or at least near excellent.'

'Effective, efficient care pathway for acute trauma.'

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:



'Car parking for patients particularly and staff. Budgets being cut without any communication.'

'Lack of opportunities for professional growth. Low pay considering Oxford's expensive renting housing.'

'Overbooked clinic. Patients' frustration due to long waiting times. (both in clinic and for surgery).'

'Staff shortage.'

'Demand on job, time, car parking, all about no's not necessary quality patient experience.'

'Transport service – delay taking patients home. Not enough clinicians to see patients.'

'Parking around the hospital and across the department. Unreliable transport service.'

'Busy schedule and overload.'



We asked staff if they knew how they would raise concerns?

We heard:

'I do. My manager, team leaders and my team are very supportive. We have a morning huddle, we talk about the previous day, voice concerns, take things through and talk about the day ahead.'

'I feel able to make suggestions to my line manager and to raise concerns. I believe they are taken seriously. My intention is that my manager or even matron have limited scope team of management of the service they are running.'

'Yes, given opportunity to be heard, but not always resulting in action e.g. minimum staffing policy, patients into leaflets problem.'

'We do raise concerns, i.e. staffing levels, workloads, stress due to trying to keep up to date. We don't feel like much is done to help.'

We asked how staff thought the unit and the service they provide could be improved?

We heard:

'EMED transport – system not reliable for staff chasing. Car parking for staff and patients. Shuttle bus needed for staff to and from park and ride, needs to be an affordable option. Better public transport option.'

'I think in a service like this there will always be challenges but if we work in line with trust values and keep patients at the centre that would be good. I'm not sure, I think just care with excellence, be advocates for patients, be empathetic.'

'The IT system can take time to get up and running. Nowhere to park for both staff and patients/visitors, trauma outpatients who require easy access don't have it. The transport system is consistently uncoordinated often crews arrive to pick up patients before they have even arrived in clinic. Effective coordination of systems – I blame the managers, but no one seems to own this service.'

'Patient transport definitely needs improvement. Elderly patients with trauma injuries waiting up to five hours for transport home. Prioritise the neediest patients.'

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

'I really enjoy my job, I try to provide excellent care to our patients, I hope the trust administration keeps working on making this excellent for both service users, the community and the people that work here.'

'We endeavour as a team to provide the best care we can to our patients, and we have an excellent team.'



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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