Enter and View
Oncology Department // Radiotherapy
Queen’s Hospital, Romford
18th-19th September 2017
Enter and View
Oncology Department with a focus on Radiotherapy

Queen’s Hospital, Romford
18th & 19th September 2017
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1 Introduction

1.1 Details of visit

<table>
<thead>
<tr>
<th>Details of visit:</th>
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<tbody>
<tr>
<td>Service Address</td>
<td>Queen's Hospital</td>
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<tr>
<td></td>
<td>Rom Valley Way</td>
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<td></td>
<td>Romford</td>
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<td></td>
<td>RM7 0AG</td>
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<tr>
<td>Service Provider</td>
<td>Barking Havering Redbridge Hospital Trust</td>
</tr>
<tr>
<td>Department/ward</td>
<td>Oncology Department</td>
</tr>
<tr>
<td>Date and Time</td>
<td>18th and 19th September 2017</td>
</tr>
<tr>
<td>Authorised</td>
<td>Manisha Modhvadia (Lead Officer)</td>
</tr>
<tr>
<td>Representatives</td>
<td>Val Shaw (Authorised Representative)</td>
</tr>
<tr>
<td>Author of report</td>
<td>Manisha Modhvadia</td>
</tr>
<tr>
<td>Announced/Unannounced</td>
<td>Announced</td>
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<tr>
<td>Contact details</td>
<td>Healthwatch Barking and Dagenham</td>
</tr>
<tr>
<td></td>
<td>Lifeline House</td>
</tr>
<tr>
<td></td>
<td>Neville Road</td>
</tr>
<tr>
<td></td>
<td>Dagenham RM8 3QS</td>
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<tr>
<td></td>
<td><a href="mailto:Manisha.modhvadia@healthwatchbarkinganddagenham.co.uk">Manisha.modhvadia@healthwatchbarkinganddagenham.co.uk</a></td>
</tr>
<tr>
<td></td>
<td>0800 298 5331</td>
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</tbody>
</table>

1.2 Acknowledgements

Healthwatch Barking and Dagenham would like to thank the service provider, service users, visitors and staff for their contribution during the visit.

1.3 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 of the visit.
2 What is Enter and View?

- The Health and Social Care Act 2012 allows local Healthwatch to carry out Enter and View visits.

- Healthwatch representatives are recruited and trained to carry out visits to observe specific settings and give feedback.

- During a visit information is gathered through the experiences of service users, their relatives/friends and staff to collect evidence of the quality and standard of the services being provided.

- Enter and View visits can happen if people tell us there is a problem with a service but, equally they can occur when services have a good reputation.

- The visits enable us to share examples of best practice and make recommendations where improvements are needed from the perspective of people who experience the service first-hand.

- An opportunity to give authoritative, evidenced based feedback to organisations responsible for delivering and commissioning services.

- The visits assist local Healthwatch to alert Healthwatch England or the Care Quality Commission to concerns about specific service providers of health and social care.

If you are interested in finding out more about Enter and View visits or Healthwatch Barking and Dagenham then please visit: 
www.healthwatchbarkinganddagenham.co.uk

2.1 Purpose of Visit

Our purpose was to observe and engage with patients who access the services within the Oncology department, with a focus on the radiotherapy service. The main areas being looked at were:

- Appointments
- Care and treatment
- Facilities and Environment
- Communication between staff and patient
2.2 **Strategic drivers**

This visit was undertaken as a direct result from the feedback received from the local community.

The following areas were highlighted by members of the public:

- appointments being re-arranged at short notice within the radiotherapy department.
- long waits for people who are undergoing chemotherapy treatment.
- no communication between receptionists and patients in regards to any delays to see the oncologists.
- people praising the staff from all three services.

2.3 **Methodology**

**Before the visit**

- Enter and View Representatives undertook a pre-meeting to look at the feedback that was provided by the community.

- The information was used to devise a questionnaire reflecting the issues identified. The questions would be used as prompts to speak to patients on the day of the visit (This can be found in Annex A).

- A date was set for the visit and notification sent to the patient experience team at the trust outlining the intentions of the visit. A response was received from the hospital trust acknowledging the advance notice.

**Day of the visit**

- Representatives were escorted to the Oncology department by the Head of Radiotherapy.

- Representatives had the opportunity to speak with the manager, nurse and an oncologist to ask questions about the provision on the department.

- Representatives were show around the department and then left to speak with service users, family members and staff.
To enable respondents to give their views without the fear of their personal details being shared or have an impact on the services they receive, Healthwatch explained the below as part of the Enter and View visit:

- Participation is voluntary, and individuals are not required to answer any questions that they do not want to.
- Participation or non-participation will not affect access to the service they are currently receiving.
- Information collected would be kept strictly confidential.
- Business cards were offered in case patients wanted to make contact after the visit.
3 Summary of findings

Healthwatch Barking and Dagenham authorised representatives undertook the visit to speak with patients about their experiences of the services received on the Oncology department. We spoke to 42 patients on the day of the visit.

Evidence gathered from the visit shows that the experience of patients was primarily positive. There were no negative responses in regard to our questions about the treatment received from staff.

All the patients spoken to on the day, felt their needs were met with respect and dignity: with the facilities and staff being sufficient for the task.

However, feedback indicates there is room for improvement within each service.

- **Radiotherapy service:** staff calling patients from the corridor resulting in some individuals not hearing their name.

- **Chemotherapy Service:** patients are given appointment times, yet there were delays in receiving treatment. It was highlighted that waits could be 2 hours or more.

- **Consultant appointments:** no communication between the receptionists and patients when there are delays in clinics.
4 Service Provision

General information

Facilities offered include:

- There is a car park for cancer patients. All oncology patients can park for free, and are given a parking card for the duration of their treatment.
- Separate reception desk for radiotherapy and chemotherapy patients.
- Waiting areas are separate for consultant appointments, chemotherapy and radiotherapy patients.
- Phlebotomy service specifically for oncology patients.
- Macmillan information center within the Oncology department.
- Complementary therapy room within the Oncology department.

Radiotherapy department

- Open Monday to Friday.
- Treatment appointments are from 8am-6pm.
- An on call service is available if patients feel unwell after hours.
- 90 radiotherapy appointments per day.
5 Findings

5.1 Radiotherapy department

Interaction between staff and patients including care and treatment

Healthwatch representatives wanted to explore the experiences that patients and relatives had when interacting with hospital staff.

Whilst speaking to patients it became evident that they were happy with the service being provided. All patients spoke very highly and positively about staff. Whilst radiotherapists and support staff were described as caring, understanding and kind, the receptionist was referred to as being friendly and someone who tried to remember everyone’s names.

Patients highlighted care on the department as being excellent. Staff were seen smiling and laughing with patients, which brought a positive vibe to the environment. Family members told us that staff were always ready to answer questions and were approachable.

We had the opportunity to watch a radiotherapy session being undertaken and noticed staff communicating with the patient to ensure they were comfortable.

Healthwatch Representatives observed interaction between the staff and patients and noticed the positive attitude of staff.

“Radiologists are good, understanding and try and make you feel comfortable.”

“Staff are very good, the receptionist is always smiling and the radiographers try their best to make you feel at ease.”

During the visit 13 patients told us they did not always hear staff calling their name. Healthwatch Representatives observed radiographers and supporting staff calling patients names from the corridor. This contrasted with the hospitals deaf aware quality mark, although all the individuals spoken to were not deaf.
Healthwatch Representatives had the opportunity to see an educational presentation as part of the pre-assessment stage for men who were diagnosed with prostate cancer.

After the presentation, patients told us they found it very informative and helpful.

Family members also commented that the session gave them a good breakdown of what to expect and a better understanding of what the treatment would consist of.

The staff member who delivered the session offered to send copies to the patients by email.

“It’s a good way of showing us the steps that we need to take to make the treatment as effective and for our well-being.”

“Very informative and gives me all the points and information I need.”

“I am happy with the session, there is a lot of information to take in, but it’s all relevant, I will now be able to relate a bit more to my husband about what he needs and how he is feeling.”

**Facilities and environment**

Changing facilities are situated next to the main waiting area and gowns are made available for those who need to change. Women of a smaller build highlighted the need for adjustable gowns as the ones provided were all one size.

Feedback from patients shows that the facilities are adequate.

We spoke to 37 patients and 13 of those expressed that the temperature of the department was cold. People told us they thought it was because the environment had to be cold for the radiotherapy treatment to work.
The department was clean, well maintained and adequately signposted. Each waiting area had a sign up which made it easier for patients to know where to wait. Patients knew which subwait area to go to as it was noted on their appointment letter.

Although patients were appreciative of the water dispenser, individuals who needed their bladder full for the radiotherapy felt the water was too cold and room temperature water should be made available.

The corridors were free of obstructions and there were lots of pictures mounted on the walls along the corridors.
Appointments

We asked patients their opinions on:

- waiting times to be seen
- cancellations
- notification of changes to their appointment time

Patients are given appointment schedules, these consist of the dates and times as well as which clinic they would be treated in.

The intention of the team is to ensure each individual feels comfortable therefore each session is booked within the same clinic. This also helps staff to get to know the patient and their needs.

If one clinic is running late, there is flexibility to move patients around. Staff will only do this if individuals are happy with being treated by a different team.

Staff informed us that the old radiotherapy machines are being replaced gradually.

Patients expressed the inconvenience of this, but highlighted the benefits the new equipment would bring for people using the service.

“Sometimes I get a call in the morning, as the machine isn’t working and am told to come in later, this is inconvenient but the machines are getting replaced which is a good thing.”

“It’s a positive step forward, I get frustrated, but at least they are doing something about it.”
Staff

We spoke to one Radiographer on the visit, she told us about how the team ensures the service is patient focused.

“We have briefing meetings every morning so the whole team is aware of the patients we will be treating and issues we need to be aware of, for example there is one patient who suffers from anxiety, she does not like being moved to another clinic and if there is delay she would rather wait to be treated by the team she knows, therefore we do not move her.

Every patient is different: whilst some are positive, others are fearful. It’s about having the right approach for each individual.”

We also spoke to a Bookings administrator:

“One aspect of my job is booking appointments. Having good communication with the chemotherapy department works very well, especially when patients are having both treatments. I need to ensure people who have booked patient transport are scheduled to have their treatment on time, so they don’t miss their ride home. Patients have been very understanding when I have called to rearrange their appointment time due to the treatment machines being replaced”
5.2 **Chemotherapy service**

Although the main focus for the visit was Radiotherapy. Healthwatch Representatives also spoke to 5 people receiving chemotherapy.

All 5 patients praised the staff within the Chemotherapy department and described them as being caring and kind. Positive comments were made about the care provided and attitude of the staff, this included patients commenting on some staff being cheerful and happy and speaking politely to patients.

Feedback gathered from the day highlights the long waits patients face when waiting for the chemotherapy. When patients enquired about the delays, they were told that the department were waiting for the chemotherapy to be sent by the pharmacist. Some people said they waited for two hours or more.

Healthwatch would be interested in knowing what is causing the delay. If it’s about the chemotherapy being made fresh, there needs to be a system in place where patient’s treatment time is not prolonged.

“We can be waiting for two hours or more, I know it needs to be fresh, but they should begin to make it earlier as truly who is going to purposely not turn up for their chemotherapy?”

“It’s always delayed and when I ask, I get told they are waiting to receive it for the pharmacist. This is the case most of the time; maybe they need a pharmacist specifically for chemotherapy.”

I bring my relative for the treatment. As it’s always late, I called to check if there was going to be a delay. I was told ‘no everything is on time’, I came and then we waited nearly 2 hours.
5.3 Oncologists appointments

Particular themes were highlighted whilst speaking to patients in relation to their consultant appointments.

Patients were happy with the interaction they had with oncologists and felt clinical procedures were explained in a way they understood.

“The consultant could not be more helpful.”

“Every little bit is explained, anything I ask I get an answer for.”

One person mentioned that rather than receiving a letter notification about their appointment, they were sent a text. This issue was resolved once they spoke to the appointments team.

Patients told us there is no communication from staff if a clinic is running late. Some of those felt that when they do ask how long the wait is, staff are not very appreciative of this.

Healthwatch representatives saw a display board which had information for the patients and there was also magazines and newspaper for those who were waiting to be seen.
Patients and family members both felt having the Macmillan Center on site was an asset for service users.

“Having the center on site, has worked really well for mum. When we first found out that she has cancer, we weren’t ready to take in any information, but afterwards we did make use of the center. There is a wealth of information which was really helpful. The Macmillan nurse was also open to answer questions and assist.”

“When I was diagnosed with cancer the Macmillan nurse contacted me directly; the cancer has now returned and I have had no contact. I know I can make the contact but sometimes it’s all too much and that first call can help and it’s a reminder of what is available.”

There is a display of head gear within the center which is open to patients to have a look at and place an order.

“It gives people the chance to have a look and try them before making a choice. We also have information on the wig service.”

Macmillan Nurse
6  Recommendations

Evidence from patients and family members highlight the great staff that work within all three departments. Throughout the visit, staff were praised by patients highlighting good attitudes, caring mentalities and kindness. This should be highlighted as good practice within the trust and used as an example to improve other areas.

Recommendations for the Radiotherapy Department

- **Calling names:** staff approach patients directly in the area they are waiting rather than calling from the corridor.
- **Water dispenser:** senior staff should look for a solution that means room temperature water can be made available.
- **Temperature of department:** have a notice on in the waiting area informing patients and family members about the temperature of the ward so people can come prepared.

Recommendations for the Oncology consultants

- **Inform patients of waiting times:** a small notice near the receptionist’s area letting people know if there is a delay.

Recommendations for the Chemotherapy Department

- **Delays for chemotherapy:** senior staff need to review the length of time patients are waiting for chemotherapy to arrive on the ward.
7 Service provider response

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NHS Trust

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Tel: 01708 435 444
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Sent via email
manisha.modhvadia@healthwatchbarkinganddagenham.co.uk

Manisha Modhvadia
Healthwatch Barking and Dagenham

20 December 2017

Dear Manisha,

Enter and View Visit – Oncology and Radiotherapy 18 & 19 September 2017

I am writing to thank you for your recent report on our Oncology and Radiotherapy Department at Queen’s Hospital, following your enter & view visit on 18 and 19 September 2017.

We very much appreciate comments and support from our local Healthwatch community and therefore welcome the findings and recommendations detailed in your report. Please see enclosed our action plan and comments based on your report.

Should you require any additional information, please do not hesitate to contact the patient experience team via email at PatientExperience@bhrhospitals.nhs.uk and they will be happy to assist you.

Yours sincerely,

Matthew Hopkins
Chief Executive

Enclosures
ENTER AND VIEW VISIT – ONCOLOGY AND RADIOTHERAPY 18TH & 19TH SEPTEMBER 2017

1 INTRODUCTION

Healthwatch Barking and Dagenham is the local consumer champion for both health and social care. Their aim is to give local citizens and communities a stronger voice to influence and challenge how health and social care services are provided for all individuals locally. Under Section 221 of the Local Government and Public Involvement in Health Act 2007, Healthwatch Barking & Dagenham has statutory powers to carry out Enter and View visits to publicly funded health and social care services in the borough, such as hospitals, GP practices, care homes and dental surgeries, to observe how a service is being run and make any necessary recommendations for improvement.

2 HEALTHWATCH REPORT

The visit was completed to the Oncology and Radiotherapy department on 18 and 19 September 2017. This response should be read with the report. The visit was announced and was to observe and discuss appointments, care and treatment, facilities and communication between staff and patients.

3 BHRUT RESPONSE TO HEALTHWATCH BARKING & DAGENHAM REPORT

We would like to thank Healthwatch Barking & Dagenham for presenting their findings in relation to this visit and for the recommendations made. We have outlined below the Trust response to each recommendation.

RADIOTHERAPY

Calling names from the corridor:
It is recognised that calling patients from the corridor is not professional and does not meet the standards expected by the Trust or the service. Patients with hearing difficulties will be disadvantaged as they will not be aware that their name is being called. This will be raised at the radiotherapy monthly staff meeting and team leaders will be asked to monitor this. It is recognised that this recommendation would be relevant to services across the hospitals and therefore a reminder will be made to all staff via the Trust electronic newsletter.

Temperature of the department:
The department is aware of concerns regarding the temperature however, this cannot be adjusted due the requirements of the machinery used within the area. We will put posters in the main waiting areas informing patients that the treatment room / CT scanner room can feel cold. Staff will endeavour to cover patients up as much as the treatment position allows.

Water dispenser:
This has been discussed with the procurement team who have advised that a new water dispenser will be in place before the end of the year and will include an ambient water temperature setting.

ONCOLOGY

Keeping patients informed:
This is disappointing to hear, as overall the feedback from the visit was very positive. The service will ask staff to keep the notice board updated and to ensure they communicate with patients in sub waiting areas.

Delays in chemotherapy sent to department:
We are aware of the challenges around patients waiting for their chemotherapy treatment and a working group has been initiated to look at ways in which we can improve the service offered.
CONCLUSION

We would like to take the opportunity to thank Healthwatch Barking & Dagenham for undertaking this Enter and View visit and for the feedback provided in the report. We are aware of some of the issues identified and are managing these as part of the on-going aim to improve patient experience in relation to our Oncology and Radiotherapy Department. The Trust hopes that the enclosed action plan provides Healthwatch Barking & Dagenham with the assurance that these recommendations have been taken on board.
<table>
<thead>
<tr>
<th>Item No.</th>
<th>Ward</th>
<th>Issue</th>
<th>Lead</th>
<th>Target closure date</th>
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<th>Status</th>
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<td>1</td>
<td>Radiotherapy</td>
<td>Calling names from the corridor</td>
<td>Stuart McCaighy</td>
<td>08/12/17</td>
<td>The importance of appropriate communication has been raised at the monthly radiotherapy staff meeting on Friday 8th December and Team Leaders will be asked to monitor this.</td>
<td></td>
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<tr>
<td>2</td>
<td>Radiotherapy</td>
<td>Temperature of the room</td>
<td>Stuart McCaighy</td>
<td>31/12/2017</td>
<td>The temperature of the rooms cannot be adjusted due to the requirements of the treatment machines. We will put posters in the main waiting areas informing patients that the treatment room / CT scanner room can feel cold. Staff will endeavour to cover patients up as much as the treatment position allows.</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Radiotherapy</td>
<td>Water dispenser</td>
<td>Stuart McCaighy</td>
<td>31/12/2017</td>
<td>Procurement have confirmed that the water dispenser will be replaced by the end of the year with one that includes an ambient water setting.</td>
<td></td>
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<td>4</td>
<td>Oncology</td>
<td>Informing patients when there are delays in seeing the consultants</td>
<td>Jodi Brooking</td>
<td>31/12/2017</td>
<td>Outpatient nurses will liaise with reception staff to ensure that the notice board behind reception is kept updated. Patients in sub waiting areas to be kept informed.</td>
<td></td>
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<tr>
<td>5</td>
<td>Oncology</td>
<td>Delays in chemotherapy sent to department and patients receiving treatment</td>
<td>Liz Crees</td>
<td>31/03/2018</td>
<td>A Chemotherapy Working Group has been initiated to look at ways in which we can improve the service offered to patients. This is a multi-disciplinary group with clinical, nursing, pharmacy and management representatives. Part of this work is to look at delays in patients receiving chemotherapy. A waiting time audit has been recently completed, and the reasons for delays will be investigated and actioned.</td>
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The questions below, were used as prompts by Healthwatch Representatives during the visit.

- Which Treatment do you attend for?
  Radiotherapy
  Chemotherapy

- How would you describe the front line staff?

- How would you describe the professional who undertakes the treatment?

- Have you been given a number to call if you have any problems in relation to your treatment? (out of hours)

- What is your opinion on the way the service deals with cancellations or changes they make to your appointment?

- Are you told about any delays? Yes, always Yes, sometimes  Never or rarely
  There were no delays

- What is the environment like of the department? (the waiting room, treatment area)

- Are the facilities on the ward adequate?

- Do you feel the changing facilities / arrangements allow you to maintain your dignity?

- Additional comments