

Enter and View visit report

Cancer Services for Sandwell Patients at the Queen Elizabeth Hospital, Birmingham.

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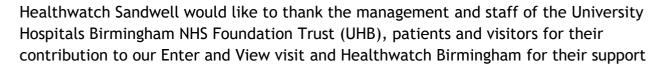
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Queen Elizabeth Hospital, Mindelsohn Way, Birmingham. B15 2TH

Acknowledgments



Disclaimer

Please note that this report relates to findings observed on the specific date of our visit. Our report is not a representative portrayal of the experiences of all patients and staff, only an account of what was observed and contributed at the time.

Visiting Team

The team of authorised representatives carrying out this visit were John Clothier and Mark Guest. They were accompanied by our staff support officer Ian McGarry.

Purpose of the visit

• To talk with patients from Sandwell about their experience of receiving chemotherapy for solid tumour, lung, skin, Upper Gastrointestinal, Urology and breast oncology services at the Queen Elizabeth Hospital, Birmingham and see how patients experience these services.

This visit follows feedback from patients using the services that was raised at a Sandwell & West Birmingham CCG/NHS England consultation event in relation to oncology services.

Methodology

The visit was announced to the hospital prior to our arrival.

The visit took place on the morning of Wednesday 11th July 2018

During our visit, we talked to 7 patients from Sandwell, and 2 staff members.

Overview

In early 2018 NHS England (NHSE) and Sandwell and West Birmingham CCG (SWBCCG) began a process to engage with patients, relatives, carers and staff regarding the future of solid tumour oncology previously provided in Sandwell and West Birmingham by staff from University Hospitals Birmingham.

Currently patients from Sandwell receive their treatment at the Queen Elizabeth Hospital, Birmingham, (QE) on an interim basis, whilst this engagement process takes place.

The services involved are: chemotherapy for solid tumour, lung, skin, Upper Gastrointestinal, Urology and breast oncology as well as the future location of the Pan-Birmingham Gynae-Oncology Centre.

Prior to 2018, these services were delivered at Sandwell and City Hospitals by oncologists from University Hospitals Birmingham until October 2017 when Sandwell and West Birmingham Hospitals (SWBH) and UHB were unable to reach agreement over the future of the service.

With the current engagement process underway by NHSE and SWBCCG, the purpose for this Enter and View visit is to talk with patients who previously received chemotherapy services at Sandwell and City hospital, to hear how the services, travelling arrangements and the continuity of staff compare.

Summary of findings

Our general impression was that a good service was being provided that was sensitive to patients' needs. There were differences to the previous service that may have caused anxiety to some patients but nothing that be considered a deficiency.

Challenges caused by the increased numbers were acknowledged and addressed. There was no evidence that the service fell below standard.

Overall, patients were pleased with the service. This included:

- Refreshments were freely available. Teas, coffee and sandwiches were taken round the ward and there is a free machine.
- Patients felt that they could share any worries they had with the staff.
- Patients were given a card with details of whom to contact when they returned home this happened at City as well.
- Patients saw the same oncologist on every visit although this was not an issue with some 'Brilliant - Dr Williams.'
- Some patients were not aware of the consultation process and most felt they had not been asked to give an opinion.
- On the whole patients thought the current service was the same or better than before, although two felt the service was worse, one with there being too many patients.
- Travelling to the QE was a concern to some patients, but not all. Most travelled by car.
- All of the patients were allowed a carer with them with examples of more than one person accompanying them, and staff confirmed that this had always been the case
- Some of the staff are the same as those providing the service at City Hospital before

Fewer than half of the patients were aware of the current service consultation. This does not mean that they have never been given information, but that they may not be able to recall it.

Views were split as to how the service compared with the Sandwell/City service. Issues raised included, feeling like too many patients and less friendly. There had been issues with the booking line; one patient told us that they rang at least 15 times over 3 days and did not get a reply and eventually resolved this by ringing the ward direct. Another told us that ice packs were not available at first. It was also said, however, that the service has been improving.

Of the patients who needed blood tests, some said they were given the option of having the blood taken locally but some were not.

The travelling distance was an inconvenience but not noted as a major problem. Some commented that parking was easier.

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It was commented that City was more personal:

- Staff knew you by name.
- Nearly always saw same staff, but not at QE.
- Same nurse for whole session at City, but not at QE would like to have the same nurse.

Additional findings

Staff told us that blood could be taken locally and then tested at QE. It can be repeated on the ward if necessary.

We were told that there was an extra bay available if numbers increased.

There was a separate room available for patients who needed to lie down or be nursed separately.

A patient who required admission for acute oncology reported they had had a prolonged wait to be seen and were then moved to a 'cupboard' which had a computer in it and was used overnight. Found this very upsetting and insistent that it was not repeated

Recommendations

We would recommend that:

The same nurse to be available for the whole session - something that was previously done at City Hospital.

All patients given the option of having blood taken locally prior to appointment.

The booking line system be reviewed.

Review the capacity for acute oncology admissions to ensure patients are treated with respect.

Service Provider response

Thank you for providing this report, we were glad to be able to show your team around the Chemotherapy Unit (621) and the Cancer Centre.

The same nurse to be available for the whole session - something that was previously done at City Hospital.

It is certainly the intention of the team on the Chemotherapy Unit to ensure that the nurse who commences the patients treatment also completes their treatment and discusses any side effect or issues the patient may be experiencing therefore providing continuity in care. We acknowledge that this is the preference for patients but on occasion another nurse in the bay may help out by changing a bag of chemotherapy for example.

All patients given the option of having blood taken locally prior to appointment.

The nursing team in the Cancer Centre have information leaflets regarding the local clinics that are able to provide the blood taking service. They give out these leaflets to patients from the Sandwell area to enable patients to have the choice.

The team on the Chemotherapy Day Unit are also aware of the service available and have been reminded to always offer the leaflets.

The booking line system be reviewed.

The Chemotherapy bookings team phone line system is currently being reviewed. We have also set up an electronic answerphone log that all of the team have access to, to ensure that any messages left on that phone line are checked daily and acted on/calls returned within 24 working hours.

Review the capacity for acute oncology admissions to ensure patients are treated with respect.

The Acute Oncology Unit comprises of a bay of 4 trolley's and a room that is used as a 'Hot Clinic' these are both located within the Oncology Ward 622. These are used for patients who attend for assessment

Unfortunately at times of maximum capacity across the Trust the 'Hot Clinic' room has been used to care for a patient overnight. We do however aim to ensure that patients are seen promptly and accommodated on one of our in-patient wards if required. We are very aware that the use of this room overnight does not provide an optimum patient experience so will continue to use the room for this purpose only when all other options have been exhausted.

Appendix 1

Analysis of Questions asked

	Question	YES	NO	NOTES
4	Do you fool stoff troop you with room of?	7		Not at first
1.	Do you feel staff treat you with respect?			Had about 6 appts
2.	Are you called by the name you prefer?	6	1	Nobody using
	Can you get refreshments if you need them?			Believe so
3.		6		Man going round
				Brought round plus teas coffee sandwiches
	During your treatment, is there someone you can talk to if you have any worries?	7		Own nurse or nurse in charge
4.				Usually Here and at City some of the staff are the same
		7		All really good
5.	Are you told who you can contact if you needed after you return home?			Have a card same as city
	, our recurrence			Nurses game me a card - same at city
				'Brilliant' - Dr Williams
,	Do you see the same oncologist every visit, is this the			Нарру
6.	same oncologist that treated you at Sandwell or City hospital?	6		Not an issue
				Positive experience
7.	The NHS has been talking to patients for some time about the changes to this service, are you aware of this?	3	4	Overheard talking about it here
				Had heard of but didn't attend
	(b)Have you been asked to give your opinion?		6	No to (b) 'not till today
	If you previously received chemotherapy at Sandwell or City Hospital, how does this service compare Prompt GOOD, THE SAME, WORSE			WORSE Feels too many patients,???
8.				WORSE - ????
				N/A
				Getting better - city was excellent - easier to get services
				THE SAME
				Different - more formal, still friendly still very good
				Problem with acute oncology service with prolonged wait to be seen and then moved to a 'cupboard' which had a computer in it which was used overnight. Found this very upsetting insistent that it was not repeated

	Question	YES	NO	NOTES
9.	a. How long was your last visit in total			a. 4 hrs - 2-3hrs wait, hrs
	b. Did this include a blood test?c. Were you given the option of having a blood test locally before you're appointment?	1	3	b. Bloods done 2 days before2 days beforeHad at WEBloods done yesterday
				a. Had before at UHB Told had to be done at UHB Had to see consultant anyway Told you have it done locally then told we can't Service at QE joined up. Not wait oo long for everything
10.	Can carers/relatives/friends be with you during your treatment?	6		N/A Husband x 1
	Are there any limitations?			No limitations Don't know Never asked
11.	a. How did you travel here today?			Car X 4 Taxi - have used public transport Car Car
		2		1 1/2hrs (city 20 mins) N/A
	b. If it was for your condition and treatment how would you have travelled?			West Brom lot easier to get to city Car park easier to access - about the same No difference
	c. Is it a lot more difficult than it was previously?			Started at half 7 got here 20 past 8
12.	Is there anything you would like to change in your care? Or do you have any other comment to make. If yes, please give details			
	(Information included within main report)			

What is Enter and View

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. 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 - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.

To find out more about Healthwatch Sandwell, or to tell us your views on residential and nursing homes in Sandwell, please visit our website.



Healthwatch Sandwell CIC Company No. 8956077 Walker Grange, Central Avenue, Tipton DY4 9RY Tel 0121 569 7210 info@healthwatchsandwell.co.uk

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