

# **Bicester Community Hospital**

## **Inpatient Ward**

### **Enter and View Report**



**February 2024**

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## Acknowledgements

Healthwatch Oxfordshire would like to thank all the people we spoke to and heard from, including patients and staff of the Inpatient Ward at Bicester Community Hospital for their support and contribution to the Enter and View visit.

## 1. Visit details

### 1.1 Details of Visit

<b>Service Address</b>	Bicester Community Hospital, Piggy Lane, Bicester, OX26 6HT
<b>Service Provider</b>	Oxford Health NHS Foundation Trust
<b>Date and Time</b>	November 14 <sup>th</sup> 2023 10am to 2pm
<b>Authorised Representatives</b>	Amier Alagab, Carol Ball
<b>Visit Status</b>	Announced
<b>Contact details</b>	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?

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The Health and Social Care Act 2012 legislation allows Enter and View activity to be undertaken on premises where health and social care is publicly funded such as hospitals, residential homes, GP practices, dental surgeries, optometrists, and pharmacies. We visit:

- To gather the views of health and social care service users, families, and carers.
- To report what we see and hear to improve the quality of health and care services.

### 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.

### 2.2 Strategic drivers

- Healthwatch Oxfordshire Enter and View visit to the Inpatient Ward at Bicester Community Hospital is part of a number of visits to a range of services within Oxford Health NHS Foundation Trust.
- These visits were planned and implemented in 2023 - 2024 with full support from Oxford Health.

### 3. Summary of findings

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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:

During our visit to the inpatient ward at Bicester Community Hospital, we heard from four patients and nine staff members.

- Comments from patients about the environment, efficiency of services, and attitudes of staff were generally very positive.
- There is a clean kitchen not in use for cooking food. Food provided to patients comes from an external contractor with limited choices. Patients indicated the food was 'okay'.
- There was no information on display offering patients access to an interpreter, and no translated materials were visible during our visit.
- We didn't see a hearing loop at the reception or in the ward.
- There was no clear information on how to give comments and feedback, and no feedback or suggestion box was available for visitors, despite the availability of patient's experiences displayed and an 'I WANT GREAT CARE' noticeboard.
- The presence of stickers on the windows of the rooms is impacting the natural light in the patients room. Direct access to the garden is a desirable feature, as it can provide a pleasant view and potentially improve the overall well-being of the patients. However, the stickers on the windows are likely obstructing the amount of natural light that enters the room.
- The Care Quality Commission (CQC) report is not displayed.
- Patients said the staff were friendly and they felt able to raise concerns with the staff team about their treatment and care directly as an important aspect of patient-centered care.
- There was limited storage available, with the physiotherapy room being used to store aids, meaning that staff had to move the aids each time the room was in use. The quiet room was also being used to store additional equipment.
- The day room had broken chairs in it with a sign on indicating this.
- It was easy and clear to follow the signage from the car park to the hospital main reception.
- The hospital was very welcoming; there is a welcome sign at the main entrance.
- The hospital is clean and had a very calm and quiet atmosphere.

- Face masks and hand gel are available at the main entrance before passing to the units.
- The Inpatient Ward has 12 beds, 10 rooms are single rooms which were well equipped with bathroom attached. There is also a big day room which patients can use with a TV and reading books available.
- There were two bays each with two beds in, these were same sex bays.
- There was a reception desk with admin staff to help and guide the visitors and patients.
- Bicester Community Hospital provides rehabilitation services for mainly elderly patients who are admitted to the hospital. These rehabilitation services aim to support the recovery and well-being of patients through specialised care and therapies. Rehabilitation services can include physical therapy, occupational therapy, speech therapy, and other interventions tailored to the individual needs of the patients.

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## 4. Recommendations

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Following our visit, we would like to make these recommendations:

- To gather feedback and suggestions from visitors and patients, it would be beneficial to have a suggestion box in the ward. This provides patients and visitors with a convenient and anonymous way to share their thoughts and ideas. The suggestion box can be placed in a visible and accessible location within the ward.
- Display posters and information about access to interpretation in visible areas, such as waiting rooms, reception areas, and patient information boards. These materials can inform patients about the availability of interpreter services and provide instructions on how to access them.
- Offer translated versions of important written materials, such as patient information leaflets, and discharge instructions. These materials should be available in multiple languages commonly spoken by patients.
- Explore ways to maximise the storage capacity of the unit. This can involve utilising shelving units, storage bins, or other organisational tools to optimise the available space. Consider implementing a system that prioritises frequently used items for easy access.
- Ensure that food provided for patients is fresh and it is important to consider patients' nutritional needs and preferences in the menu.
- The presence and information about access to a hearing loop in the ward can be beneficial for individuals in need of it.

- To ensure that all pending maintenance, repair, and action items are followed up on, it is important to assure that repairs are done in timely fashion.
- The stickers on the windows are likely obstructing the amount of natural light that enters the room. If the stickers serve a specific purpose, such as privacy or safety, consider using alternative methods that still allow natural light to pass through, such as decorative window films or blinds.
- The Care Quality Commission report should be displayed as per the attachment:

<https://www.cqc.org.uk/sites/default/files/2015024%20Guidance%20for%20providers%20on%20meeting%20the%20regulations.pdf>

## 5. Service response to recommendations



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Primary, Community & Dental Care**

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7<sup>th</sup> February 2024

Dear Amier,

### **Enter and View Visit – Bicester Community Hospital 14<sup>th</sup> November 2023**

Thank you for your report detailing the findings from undertaking the Enter and View visit of the inpatient ward at Bicester Community Hospital. These findings have been shared across the Community Hospitals and an action plan has been developed by the service team.

The action plan is scheduled to be reviewed at our Primary, Community & Dental Care Directorate Quality SMT Committee, which next meets at the end of February, so in the interim please see the table below setting out our provisional plan. This identifies the Healthwatch recommendation, the action/update identified by the Ward Team and the Senior Leadership within the Community Rehabilitation pathway, and the timescale identified for this to be completed within.

Ref	Healthwatch Recommendation	Trust Action/Update	Timescale	Lead
1	<p>To gather feedback and suggestions from visitors and patients, it would be beneficial to have a suggestion box in the ward. This provides patients and visitors with a convenient and anonymous way to share their thoughts and ideas. The suggestion box can be placed in a visible and accessible location within the ward.</p>	<p>1. Suggestion box to be put in place on the ward.</p> <p>To support this the ward have a link staff member who ensures that all patients have an opportunity to provide feedback. The ward also benefits from PALS clinics.</p>	29.2.24	Operational Support Officer
2	<p>Display posters and information about access to interpretation in visible areas, such as waiting rooms, reception areas, and patient information boards. These materials can inform patients about the availability of interpreter services and provide instructions on how to access them.</p>	<p>Positioning of display posters and information available has been reviewed to ensure these are in prominent patient facing areas.</p>	Complete	
3	<p>Offer translated versions of important written materials, such as patient information leaflets, and discharge instructions. These materials should be available in multiple languages commonly spoken by patients in the area.</p>	<p>2. Community Hospitals to review what key documentation should be included in this.</p> <p>3. Trust process to be confirmed.</p> <p>4. Process to be relayed to the wards on what to do when documentation requires translation.</p>	<p>31.3.24</p> <p>30.4.24</p> <p>31.5.24</p>	<p>Matrons/ Senior Matron</p> <p>PCDC Regulation &amp; Accreditation Oversight Group</p> <p>Matrons/Ward Managers</p>

<p>4</p>	<p>Explore ways to maximise the storage capacity of the unit. This can involve utilising shelving units, storage bins, or other organisational tools to optimise the available space. Consider implementing a system that priorities frequently used items for easy access.</p>	<p>Equipment has been removed from the Quiet Room. Only relevant equipment is present within the Physiotherapy room. The storage room has been arranged to support access to equipment. Where possible storage has been maximised but there are limitations on what can be done in the building as it is not OHFT owned building)</p> <p>The Monthly Matron walkaround/IPC tool has been amended to monitor clutter on the ward and support prompt reporting and escalation of faulty items. This ensures this is reported on an ongoing basis.</p>	<p>Complete</p> <p>Complete</p>	
<p>5</p>	<p>Ensure that food provided for patients is fresh and it is important to consider patients' nutritional needs and preferences in the menu.</p>	<p>Since the Healthwatch visit the food provider has changed. More healthy snack options have been introduced. Work is taking place to look at alternative fresh fruit suppliers as this has been identified as a key issue.</p> <p>Patient/family/carer feedback is monitored on an ongoing basis, with food being a key area taken into consideration.</p>	<p>Complete</p>	

6	The presence and information about access to hearing loops in the ward can be beneficial for individuals in need of it.	<p>5. Hearing loop to be installed.</p> <p>6. Hearing loop information to be displayed in key areas that are visible to patients/family/carers/visitors.</p>	<p>31.3.24</p> <p>31.3.24</p>	
7	To ensure that all pending maintenance, repair, and action items are followed up on, it is important to assure that repairs are done in timely fashion.	<p>There is a process in place for reporting broken items as well as a process for monitoring pending maintenance and repairs. Outstanding works are regularly followed up. Limitations in works being completed are outside of the wards control but are escalated through estates meetings and relevant forums.</p> <p>Since the visit the riser recliners in day room have all been fixed (the delay was due to the availability of parts).</p> <p>7. Progress in fixing the tap on the hot water boiler is on hold due to a technical disagreement on what corrective action is required between the maintenance FES and the installer. Issue to be further escalated for resolution.</p>	<p>Complete</p> <p>Complete</p> <p>29.2.24</p>	<p>Head of Operations</p>
8	The stickers on the windows are likely obstructing the	The stickers ensure privacy and dignity for patients	Complete	

	amount of natural light that enters the room, if the stickers serve a specific purpose, such as privacy or safety, consider using alternative methods that still allow natural light to pass through, such as decorative window films or blinds.	when others are using the garden with various options being explored prior to installation. In the warmer months patients are welcome to have their doors open. Staff encourage patients to use the Day room which does not have stickers on the windows.		
9	The Care Quality Commission report should be displayed as per the attachment.	8. CQC ratings poster to be displayed.	Complete	
10	Please can you ensure that this report is sent to the relevant service providers.	Report has been shared with the relevant service providers.	Complete	

Although not made into Healthwatch recommendations, there were other areas of feedback in the report that we would like to acknowledge:

- The water leak in the treatment room has been repaired since the Enter and View visit took place, and no further issues have since been reported. The team continue to report and escalate concerns as they arise and follow the established processes in place with the landlords.
- We note the concerns reported to you by some staff about staff shortages and morale. Staff welfare and patient safety are priorities for the Trust and the ward staffing levels are reviewed continually by the Matron, reported to senior management on a weekly basis and are in line with safer staffing requirements. A wellbeing group has been set up on the ward and there are plans in place to renovate the staff rooms to make these a better environment. Alongside this a review involving staff, is underway to improve patient documentation in relation to efficiency and patient safety.
- We continue to work closely with our partners in the patient transport service to improve the care and service that our patients receive.

We would welcome your clarification of one part of the report. On page 16 it says *"The specific reasons for referral may vary depending on the patient's condition and treatment requirements... It was a very quiet and busy day when we made our visit."* Please could you clarify the wording used.\*

We appreciate the work you and your team have put into conducting the Enter and View visit and providing this report, and we welcome the opportunity this provides to further develop our partnership with Healthwatch.

Yours sincerely,

A handwritten signature in black ink that reads "Ben Riley". The signature is written in a cursive style with a large, sweeping flourish at the end.

**Dr Ben Riley FRCGP**  
**Executive Managing Director**  
**Primary, Community and Dental Care**

\*The wording used on page 16 (now page 21) has been amended as requested by Dr Riley in his response above.

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## 6. Report: Visit to the inpatient ward at Bicester Community Hospital on 14<sup>th</sup> November 2023

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### 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:**
  - 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 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 to the inpatient ward at Bicester Community Hospital took place from 10 am to 1pm on 14<sup>th</sup> November 2023, with two trained Enter and View representatives, including the lead member.

During the visit, the team were able to spend time observing the daily work of the hospital, 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 Inpatient Ward at Bicester Community Hospital provides rehabilitation and palliative care for individuals who no longer require acute care services. Patients admitted to the ward are accommodated in single rooms, each with an attached bathroom and direct access to the hospital garden. This setup allows for a more private and comfortable environment for patients during their stay.

The hospital has 12 beds and a dedicated team of nurses, and occupational therapists, supported by GPs and gerontologists (doctors specialising in the care of older people). The team works closely with social services.

Patients have individual rooms with suites. There are also two small same sex bays with two beds in which curtains can be pulled around each bed.

Bicester Community Hospital, run by Oxford Health NHS Foundation Trust, offers a range of services to the community. In addition to the Inpatient Ward providing rehabilitation and palliative care, the hospital also has a First Aid Unit (FAU), therapy services, and X-ray facilities. Outpatient clinics are also available at the hospital.

More details can be found at the link below:

<https://www.oxfordhealth.nhs.uk/service-description/bicester-community-hospital/>

### **Access and signage to the inpatient ward**

The main entrance to Bicester Community Hospital faces the car park, and there are clear signs that make it easy to follow the directions to the ward. Additionally, there is a clear sign outside the main doors of the unit with an intercom button to access the ward when the doors are closed.

The Bicester Community Hospital has wheelchair access and a disabled car park near the main entrance.

The hospital provides free car parking for both patients and visitors. This allows individuals to conveniently park their vehicles while accessing the hospital's services. Additionally, there are a few spaces available on the road near the hospital for parking purposes.

The hospital had a welcoming sign displayed at the main entrance.



Welcome Sign



Internal Board

**The environment**

Staff were welcoming and staff patient interactions were friendly.

Patients arrived with referrals from the acute hospitals. This ensures a smoother transition and continuity of care for the patients.

The ward had a very busy atmosphere; however, the individual rooms/bays were very calm. We were given a tour by the ward manager around the ward before commencing our visit.

The corridors were very warm with little opportunity for ventilation as there were no windows, only a door at each end of the "U" shaped corridor.

The hospital was bright and clean, but hot with no temperature control in the corridor.

The reception is well-organised and provides lots of information for patients and families. The administrative staff are responsible for tasks such as ward reception desk tasks, maintaining the medical staff database profile information, and supporting medical staff.

The hospital has a central garden with outdoor facilities where patients can enjoy walking around and breathe fresh air.

There was a fully equipped kitchen which is not used for cooking food, as food is ordered in from an external company and patients eat in their rooms or in the day room.

The day room feels cluttered with freezers and broken chairs, making it feel unwelcoming. Additionally, there are maintenance issues with the hot water boiler and Riser Recliners. The sticker on the hot water boiler indicates that it has been broken for over a year, and there are notices on the Riser Recliners stating that they are out of use, which was reported in September 2023.

The rooms had direct access to the garden, however, there were stickers on the windows to stop people looking into the room - this impacted on natural light in the room.

The quiet room also had equipment stored in it, this made the space feel unwelcoming and not so restful.

The physiotherapy room was cluttered due to mobility equipment, such as walking frames, being stored there due to lack of storage space.

It appears that there is an issue with a leak in the treatment room, which was reported in September 2023 and is awaiting action to be taken. A leaking ceiling can be a cause for concern as it can lead to water damage, mould growth, and potential safety hazards. It is important to address this issue promptly to ensure the safety and well-being of both patients and staff.



Day Room



Ceiling Leak – Treatment Room

The stickers on the windows and doors block patient to enjoy the view of the garden during winter.



The garden



The window

The storage room was crowded with equipment and too small to accommodate it all.



The Storage Room

### **Information on display**

There is comprehensive information about health care services for patients displayed in the main reception area, including on rehabilitation, patient advice and liaison services (PALS), falls, infection control, and a staff update.





Quality Board



Patient Experience

### Patient feedback

Patients are usually referred from acute hospitals to the rehabilitation ward at Bicester Community Hospital according to their needs. Bicester Community Hospital provides inpatient rehabilitation and palliative care for individuals who no longer require acute care. The specific reasons for referral may vary depending on the patient's condition and treatment requirements. The ward was fully occupied however, we were only able to speak to four patients on the day of the visit.

We spoke to two men and two women; all were over 80 years old and white British.

Overall, the patients were hugely appreciative of the support and care they received at the hospital. They praised and thanked the staff team.

The patients told us their experience at the ward was positive.

The patients were very happy about the care and services received and told us the staff are well qualified and offer a high quality of care, always supporting them and providing information related to their need.

**We asked the patients about their experience of the transfer journey between hospital or home to Bicester community hospital.**

We heard from a patient that; *'the transfer was done very quick, the trip was bumpy, but it wasn't their fault it's just the state of the roads'*.

Another patient said *'transfer was delayed by SCAS, due to a communication problem'*.

**When patients were asked 'do you feel that you've had your care clearly explained by the health professionals you have met', they said:**

*'Staff are wonderful'*

*'Very good communication, well documented and recorded efficiently. There has been clear communication. At the other hospital I had regular physio, and I am not sure what is happening here. It seems to be staff led and I haven't seen the physio yet'*

**Have you been told what will happen and when?**

*'Yes, I have been kept in the loop as to what the plan is'*

**Are the staff helpful in relation to your individual needs?**

*'Yes, they are all very kind and considerate, they are busy, but this doesn't reflect on patient care'*

**Food/dietary preferences/drinks**

We heard from one patient that they were sometimes not getting their choice of food. One patient mentioned:

*'The food is not particularly nice, it's very bland'*

**Have you spoken to anyone about what will happen when you are ready to leave Bicester? Have you been kept up to date with this?**

*'Discharge plan has been clearly explained to me and my family for when I go home'*

All patients we spoke to were not aware of how to give comment and feedback on their care and hospital stay.

**Staff feedback**

We received feedback and comments from nine members of staff on the day, representing a cross section of roles within the unit.

We heard positive feedback from staff about their work in the inpatient ward, as well as their appreciation for patient, family, and carer interactions and care. Such positive interactions and relationships can contribute to a supportive and effective care environment.

Staff told us that the present management are open to suggestions and feedback. Staff commented that they felt listened to and able to make suggestions on the hospital. They felt that their concerns would be taken seriously.

The staff in the inpatient ward valued the sense of team atmosphere and found that meetings and daily team "huddles" supported this positive environment. Team huddles are short, focused discussions that ensure team members are on the same page about the specific needs of the day. These huddles can help improve workflows, strengthen team culture, and enhance communication and collaboration among team members.

We heard from staff about the patient's journey and communication between the service and patient's families that:

*'Generally good, although there are issues with SCAS, medical devices contractor and maintenance provider'*

All the staff we spoke to indicated that they had the required training, and most of them mentioned that they were up to date with the required training.

### **What is the best thing staff said about the job?**

Staff told us they support each other and noticed the difference in changing people's mood, and that it was very rewarding when patients, families and staff give positive feedback.

### **What are the challenges staff raised?**

During our discussions with the staff, they mentioned some frustrations and challenges they face in their work. Two common challenges mentioned were staff shortage and staff morale.

Staff said that there is a demand for the services with increased paperwork. However, delivering an effective service that is accessible with limited resources are significant challenges faced by the service.

Currently the staff told us they are working as a team and that everyone is supportive and approachable.

### **What suggestions did staff make?**

Staff suggestions included:

- Recruiting additional staff can help alleviate the workload and ensure that there are enough healthcare professionals to meet the needs of the patients.
- Financial incentives can be an effective way to encourage staff to book more shifts. By offering rewards or bonuses, employees are motivated to increase their availability and take on additional shifts.

- Improve patient transport service as sometimes patients arrive late due to delay in South Central Ambulance Service (SCAS) service.
- Improving the food provided to patients is essential for their well-being and recovery.
- Improving the documentation within the EMIS (Electronic Medical Information System) can greatly enhance efficiency and safety, particularly in relation to the electronic medications chart.



**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](http://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:



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