# 'Enter and View' Report Bladder and Bowel Service

Jubilee Gardens Medical Centre, Southall, UB1 2TJ



Healthwatch Ealing 18<sup>th</sup> December 2019

Service Visited:	Bladder and Bowel Service
Address:	Jubilee Gardens Medical Centre, Jubilee Gardens, Southall,
	UB1 2TJ
Service Manager:	Rosemary Gifford
Date & Time of Visit:	18 <sup>th</sup> December 2019 (10 am – 1 pm)
Status of Visit:	Unannounced
Healthwatch Ealing "Enter &	Fatima Abdi and Eunice Park
View" Authorised	
Representatives:	
Lead Authorised	Fatima Abdi
Representative:	
Healthwatch Ealing contact	Healthwatch Ealing, 45 St. Mary's Road, Ealing, W5 5RG
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CQC rating of West London NHS	Good
Trust	
Date of CQC Report:	21 <sup>st</sup> December 2018

Healthwatch Ealing (HWE) has the power to 'Enter and View' services in the borough of Ealing. 'Enter and View' visits are conducted by teams of trained 'Enter and View' Authorised Representatives.

#### Purpose of the visit

The Health and Social Care Act allows Healthwatch Ealing 'Enter and View' Authorised Representatives to observe service delivery and speak to patients, residents, staff, relatives, friends and carers. The visit can happen if people tell us there are concerns, but equally, the visits can take place when services have a good reputation. We can therefore learn from shared examples of what they are doing well from the perspective of the people who experience the service first hand.

'Enter and View' visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with the HWE Safeguarding Policy. If at any time an Authorised Representative observes a potential safeguarding concern, they will inform their lead. The lead Authorised Representative will then end the visit. In addition, if any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the Care Quality Commission (CQC) and Ealing Council's Safeguarding Team.

On this occasion, two 'Enter and View' Authorised Representatives attended the visit. The Authorised Representatives spoke with patients, staff and visitors. Recommendations have been made on how to improve the service and good practice has been highlighted. HWE had liaised with the CQC, Clinical Commissioning Group (CCG) and the Local Authorities (LA) to create an 'Enter and View' Programme. A number of health and social care providers were selected to be visited.

#### Acknowledgements

Thanks to our 'Enter and View' Authorised Representatives: Fatima Abdi and Eunice Park.

Thanks to the staff, patients and visitors of Jubilee Gardens Medical Centre for taking the time to speak with us.

#### Background

The Bladder and Bowel Service is a Community Health Service offering assessment, treatment and support for adults and children with a bladder and bowel condition. The service offers assessment at clinics, which have disabled access. It can offer assessment in a patient's own home if individuals have a condition that prevents them from leaving the house easily. Conditions the service can care for include, stress and urge urinary incontinence; functional urinary incontinence; urinary incontinence after a prostatectomy; faecal incontinence; neurological bladder and bowel incontinence; nocturia; constipation; childhood continence difficulties.

Care is provided from the following sites:

- Acton Health Centre, Church Road, Acton, W3 8QE
- Featherstone Road Health Centre, Hartington Road, Southall, UB2 5BQ
- Grand Union Village Health Centre, Taywood Road, Northolt, UB5 6WL
- Jubilee Gardens Health Centre, Jubilee Gardens, Southall, UB1 2TJ
- Mattock Lane Health Centre, 78 Mattock Lane, Ealing, W13 9NZ.

Provision of the Bladder and Bowel Service is by Ealing Community Partners, West London NHS Trust, who took over the provision of Community Health Services from 1<sup>st</sup> July 2019.

Healthwatch Ealing chose to visit the Bladder and Bowel Service to follow up on concerns previously received from patients and to understand how the service was functioning under the new provider.

#### Arrival

On our arrival, we spoke to the receptionist who was friendly and welcoming. We were asked to sign the visitor book.

#### Accessibility to the clinic

The clinic is accessible by the 95 or 105 buses, which connect to Southall Broadway. There is free car parking available for patients or visitors in the small car park; two bays are marked disabled.

The Bladder and Bowel Service is located on the ground floor and there is ample space between the reception area and seating areas for wheelchair access.

#### Entrance area

The entrance area was clean, well-maintained and pleasant. The patient waiting area was spacious, with a reception table, lots of comfortable seating and plenty of space for wheelchair users, accommodating both the community health service and the GP practices (also located within the Health Centre). There are also lifts to all floors.

The reception/seating area appeared to be new and modernised with a sufficient amount of chairs. There was a water dispenser available, however there were no cups.

#### Notice Board

A large community health service notice board was on display containing information about Family Clinics, Children's Centres, Ealing Carers Centre, Tuberculosis, Flu, Diabetes, Bowel Cancer, Sepsis, Pregnancy, Cognitive Behaviour Therapy (CBT), the complaints procedure and the contact number for the CQC inspector, but none related to the Bladder and Bowel Service.

All the information displayed was monolingual except for 'Do you need an interpreter', which was translated into different languages.



#### Fire safety

There were signs above the doors leading to a fire exit and a notice to say that there would be a fire alarm practice every Thursday morning. 'Enter and View' Authorised Representatives noticed there were no fire procedures displayed on the notice board (e.g. what to do if you find a fire).

#### **Odour and Environment**

The waiting area was well-lit and well-ventilated with a large open area. There were no unpleasant odours present and it was generally a well-maintained environment.

#### Accessibility to toilets

Toilets were easily accessible for patients and it was generally a well-maintained and clean environment. There was a unisex toilet inside the reception area and a baby feeding room. There were further toilets in a corridor, leading off reception and the provision appeared to be adequate as there was no queuing.

#### Check-in system (for patients)

We noticed there were two self-check-in machines for patients registered with GP practices by the main entrance area on the right (one for Jubilee Gardens Medical Centre and one for Woodbridge Medical Centre). However, Bladder and Bowel patients report to the community health service receptionist on arrival and check in with the community health service receptionist. The nurse is informed of their arrival, and then takes the patient in for their consultation.

#### **Opening days and times**

We were informed the clinic is open from Monday to Friday from 8:00 am to 6:30 pm. However, there are no specific opening hours displayed for the Bladder and Bowel service in the reception area. When a referral is made from the GP, a letter is sent to the patient outlining the day the clinic is operating and the time of their appointment.

Four clinics are operating on different days throughout the week via the West London NHS Trust. The Adults Bladder and Bowel nurse conducts weekly appointments at Mattock Lane Health Centre, Acton Health Centre, Jubilee Gardens Medical Centre and Grand Union Village Health Centre. The Paediatric Bladder and Bowel nurse conducts weekly appointments at Featherstone Road Health Centre.

However, when a patient has been seen by the nurse, they continue to have their reviews with the nurse which usually takes 6-8 weeks for a follow up appointment.

#### **Reception table**

There were leaflets displayed on the reception table containing information on abuse, contacting police, and carers, however, there were no relevant leaflets on Bladder and Bowel Service at the reception area or clinic.

#### Signage

There was no clear signage indicating the community health service or Bladder and Bowel Service. We found it difficult to find the Bladder and Bowel Service as there were no appropriate signs directing us.

#### Feedback/suggestion

There was no feedback or suggestion box available at the clinic.

#### **Observations about consultation area**

'Enter and View' Authorised Representatives were not able to observe the consultation area due to patients' not attending their scheduled appointments during our visit.

#### **Observations of patient consultation**

There were four appointments scheduled on the day of our Enter & View visit, however, no patients turned up to any of the appointments. We were therefore unable to observe a consultation.

#### Interview with the staff member

The member of staff told us that she has been working across multiple sites in Ealing.

#### Induction process

The member of staff highlighted to us she feels she is up to date with her training.

We were informed that most training is done online. She added that when she joined the clinic, mandatory training was done face to face on topics including Mental Health Capacity, Dementia, and Safeguarding.

During the induction process, she felt supported by her management and colleagues. The induction was held across two weeks. The member of staff felt the induction process ran smoothly.

#### Support from management

During the interview, the member of staff informed us there have been huge changes over the last three years. They advised that many staff have left due to management style and this has had an impact on patient care and delivery.

#### Staff breaks

'Enter and View' Authorised Representatives were informed by staff that the lunch break lasts for 30 minutes.

Due to the shortage of staff, the member of staff said sometimes it can be difficult to book annual leave.

#### Staff meetings

Staff advised our 'Enter and View' Authorised Representatives that staff meetings used to be weekly, but this is no longer the case. However, we were told meetings are conducted when necessary or as any issues arise.

#### Safeguarding procedure

The member of staff told us she is aware of the safeguarding procedure and how to raise a safeguarding alert. She stated that reports go to the manager first and then to the safeguarding team.

#### Handover procedure

Staff told us assessments are done by each staff member. She explained at the end of each assessment, a care plan is put in place and review booked if necessary, advising and referring patients. The member of staff told us she liaises with the GP via electronic letter/referrals.

#### Method of booking an appointment/ease of getting an appointment

On receipt, the admin staff book appointments or home visits after referrals.

Generally, the appointment waiting time is two months but patients can be seen before, if there are cancellations.

#### **Emergency or urgent appointment**

We were informed that if an urgent patient appointment/assessment is required, the admin staff would liaise and book an appointment for the patient.

#### Treatment, care, and support from staff

The member of staff stated to us that patients are treated with respect and dignity.

The member of staff also informed us patients receive a range of information as per their care plan e.g. fluid advice, bladder retraining, bladder reflux etc and advice on starting toilet training.

'Enter and View' Authorised Representatives were told patients who require incontinence pads are sent samples to establish the appropriate pad for the patient.

#### Patient communication and feedback

'Enter and View' Authorised Representatives were told patients are generally positive about their care and that their needs were met by the service. No complaints have been received by the member of staff.

We were told by the member of staff there is no feedback system in place at the moment at the Bladder and Bowel Service.

#### Challenges

During the interview, the member of staff repeatedly informed us that there is a shortage of staff. 'Enter and View' Authorised Representatives were told a lack of staff had led to staff feeling overwhelmed, overworked and stressed which sometimes results in sickness or absence from work.

We were told that there had not been enough staff over the last three years, to carry out appointments, and this had an impact on the delivery of patient care.

#### Conclusion

Overall, our visit to Jubilee Gardens Medical Centre was positive. The consultation room was clean and well-maintained. During our visit, we saw that staff were friendly and attentive towards patients, treating them with dignity and respect. The staff we spoke to were friendly and supportive however they felt there could be major improvements made for the overall effectiveness of the patient care and delivery.

#### Good practice

- 1. The clinic demonstrated a good level of cleanliness across the entire community health service.
- 2. Despite the apparent staff shortage, 'Enter and View' Authorised Representatives were impressed with the nurse's attitude and professionalism.

#### Recommendations

#### Facilities

- 1. During the interview, the staff advised rooms are limited to service here and staff could benefit from more clinical room availability.
  - a. The trust may want to review this issue and facilitate more room availability.
- 2. Patients (and Enter & View Authorised Representatives) were initially unable to locate the correct reception/desk to report to on arrival.
  - a. Ensure adequate building signage for Community Health Services and associated clinics.

b. Ensure clear reception desk signage for Community Health Service and associated clinics on each day.

c. Review appointment letters and patient communication to ensure clear guidance and instructions regarding building and service location/features and where to go on arrival.

#### Staff

- 1. Across all sites, staff indicated a lack of staffing was impacting on the level of care they could provide.
  - a. Management to review the shortage of staffing levels within the service.
- 2. During the interview, staff advised over the last three years management style and support had changed within the Bladder and Bowel Service.
  - a. Management to consult with staff to understand their concerns and where possible to implement practical changes.
  - b. Review 3 months after implementation to ensure effectiveness.

#### Feedback

- 1. There is no feedback or suggestion box displayed at the reception area.
  - a. Review the feedback system in place and ensure clear guidance on how to access feedback or complaints procedure.

#### Leaflets/posters

1. 'Enter and View' Authorised Representatives observed no leaflets or posters on Bladder and Bowel.

- a. Review the internal and external posters/leaflets about Bladder and Bowel so patients are kept informed.
- b. Review the material on an annual basis.
- c. Ensure there is a supply availability of leaflets for attendees and visitors.

#### Signage

- 1. 'Enter and View' Authorised Representatives observed no signage at the Community Health Service consultation area.
- a. Ensure clear and appropriate signage for Community Health Service consultation/treatment rooms.

#### **Opening hours**

- 1. There are no clinic opening hours on display in the reception area or on the trust website.
- a. Review publication of opening hours information to support patients understanding and access of the service.

#### Appendix I

#### **Observations about the Community Health Service**

Name of the clinic/practice	
Date/time of visit	

#### 1) Entrance area (any odours and general environment including cleanliness)

2) Notice board

3) Fire exit (e.g. fire procedure)

4) Accessibility to toilets and cleanliness- for patients, visitors and staff

5) Digital board (displaying patient name and announcement) - is it clear/easy to read?

6) Check in system for patients

- 7) Environment of the practice (e.g. lighting, ventilation)
- 8) Opening times including weekend opening times
- 9) Reception table- practice leaflets, voluntary organization leaflets /booklets etc
- 10) Signage is it clear/concise?
- 11) Additional facilities: Change room for staffs
- 12) Feedback/suggestion box

Other notes:

# Appendix II

# **Questions for management**

Name of	
service	
Date and	
time of visit	
Name of	
manager:	
Manager	
since:	

Induction and training	
What induction do staff receive?	
How long is the induction process?	
What is the handover process for new staff? How long is this handover process?	
What type of training do staff receive? (E.g.: classroom based, online, shadowing)	
What training is mandatory and what training is preferred?	
Staff meeting	
Are there regular staff meetings? (E.g.: monthly)	
Formal. How many formal meetings are held throughout the year?	
Informal (briefing) How and when is the informal meeting conducted?	
How is case work shared/communicated between the team?	
Supervision and appraisal	
What is the supervision and appraisal policy?	
Are there supervision and appraisal training available for staff?	
Any other comments or feedback?	

Audits and checks
Do they carry out their own checks and audits? (E.g.: patient records)
Where are patient observation notes kept?
Were there any recent improvements or concerns to the service through these checks and audits?
How are concerns or improvements made aware to staff?
Safeguarding
What is the sefection ratio 2
What is the safeguarding policy?
Are staff aware on how to make a safeguarding alert?
Is safeguarding information available to staff? If so, how?
How often are safeguarding concerns raised?
Complaints procedure
What is the complaints procedure?
Is the complaints procedure easily accessible/available to patients?
Are all complaints recorded and investigated?
How often are formal/informal complains raised?
What recent changes have been made as result of patient feedback?

Views collected	
How are patients/families/ carers views about the service collected? (e.g. surveys, questionnaires)	
If views are collected, how are they circulated to families/carers?	
Skills and knowledge of staff	
What support do staff receive?	
What steps are taken to keep the staff up to date in terms of skills and knowledge?	
Are staff provided with ongoing training?	
Incontinence products and devices (e.g. pads)	
What types of incontinence products are available to patients?	
What type of incontinence devices are available to patients?	
Are they easily accessible to patients? Are they provided by the NHS or external organisations (e.g. charities)?	
What choice do patients have?	
Are patients happy with products?	

Provision of home service
Do you provide home services for bed bound patients?
What is the process of delivering home services?
What challenges do you face with the home service provision?
Any other comments?

# Appendix III

# Questions for staff

Name of service	
Date/time of visit	

Induction/training process	
How was the induction process?	
Did you feel supported during the	
induction process?	
What training have you readined?	
What training have you received?	
Support from	
management	
5	
Do you feel	
supported by	
management	
? If so, how?	
Staff breaks	
Do you receive adequate staff	
breaks?	
Staff wages	
What are the current staff wages	
(including senior staff)?	
Do you receive staff wages according	
to the minimum wage?	
Staff meetings	
Are there regular staff mostings? $(\Gamma, \sigma)$	
Are there regular staff meetings? (E.g.: monthly)	
monuny)	
Safeguarding procedure	
Are staff aware on how to make a	

safeguarding alert?	
Is safeguarding information available to you? If so, how?	
Handover procedure	
What is the handover procedure at your service?	
How do staff communicate over the handover process?	
Patient feedback	
How do you engage with patients to gain feedback?	
Are patients aware on how to provide feedback to the service?	
Good practices	
Challenges	
Other notes	

#### **Questions for patient**

Name of service	
Date/time of visit	

Healthwatch Ealing is an independent body who is committed to trying to make changes to health and social care services that reflect the needs of the people in the local community. We are visiting today to collect patient feedback and views on the adult Bladder and Bowel Service. The information provided by you in the questionnaire will be used anonymously for research purposes only.

Accessibility to Clinic	
How did you travel to the clinic today?	
How is the accessibility to the clinic (walk, car etc)?	
Is it wheelchair accessible?	
How is the car park accessibility?	
Appointments (Method of booking an appointment, ease of getting an appointment)	
How long have you been coming here for your appointments?	
What was the referral process like from your GP to the service?	
What is the process for booking an appointment?	
Can you book over telephone/online/ walk-in?	
What is your preferred method of booking an appointment? (phone or	

online or walk-in)	
Is it easy to make an appointment?	
What options are there if you need an	
emergency/urgent appointment?	
Can you book to see a specific	
clinician? Do you have any choice?	
Do the appointment times on offer suit	
you?	
When booking, how for should to you	
When booking, how far ahead to you have to wait for an appointment?	
How often do you have an appointment?	
Are you happy with the booking	
process?	
When you are at the clinic, how long	
do you have to wait to be seen? Do appointments run on time?	
If you want to change your booking,	
what is the process?	
Do you ever have to cancel an	
appointment?	
Does the clinic ever cancel your	
appointment?	
Reception/check in	
When you arrive what is the sheet is	
When you arrive what is the check in process?	
Is there a receptionist/staff member on hand?	
Was the receptionist welcoming?	

#### Treatment and care

Are you happy with the quality and level of treatment and care?

What could be improved?

Do you see the same clinician each time?

Incontinence products and devices (e.g. pads)

Do you have good access to the pads and equipment devices?

Are you given choice of incontinence pads?

Are you with happy with quality of pads?

Are you given the relevant information and advice regarding a wide range of incontinence devices?

If so, have you been given training on how to insert the incontinence devices?

Are you given choice around your options/treatment?

# Involved in the decision about your care

Do you feel involved with the decision making regarding your care?

Are family/relatives/carers involved with your decisions regarding your treatment/care?

# Communication How do you keep informed about your condition the treatment and care and how to stay well? Have you been provided with relevant information about your condition from the clinic? Are you happy with the level of communication with staff? Any other comments or feedback? Feedback and complaints procedure Are you aware about the feedback and complaints procedure? Do you know how to make a complaint and provide feedback? Have you given any feedback or made a complaint before? Is information about to make a complaint easily available? Support from staff Do you feel supported by staff? If so, how? Do you feel listened to by staff? Do the staff treat you with the dignity and respect?

#### Appendix V

#### **Patient Consent form**

Information about Healthwatch Ealing's Enter & View visit:

Healthwatch Ealing is a consumer champion for health and social care. We are committed to trying to make changes to health and social care services that reflect the needs of the people in the local community. We are visiting a number of community health services throughout the year for the purpose of observing and collecting the views and feedback of service users.

We are carrying out an Enter & View visit today at

.....

Date: ...... Time: ...... we would like to ask for your consent for Healthwatch Ealing and Authorised Representatives to observe your appointment.

I, .....consent to Healthwatch Ealing observing my appointment for the purpose of the Enter & View visit.

Date:		 ••	 	• •	• •	 	 	 • •	 			•	• •		 •
Signatur	e:	 	 			 	 	 • •	 	• •	•	• •	• •	•	 ••

#### Disclaimer

This report is a representative sample of the views of the staff members that Healthwatch Ealing spoke to within the time frame. This does not represent the views of all the patients and staff members at bowel and bladder service. The observations made in this report only relate to the visit carried out on the 18<sup>th</sup> December 2019.

'At this stage, we have informed the provider that they are welcome to make a response. We are yet to receive a response, however, dialogue is still open and once we do receive a response it shall be included alongside the final report'