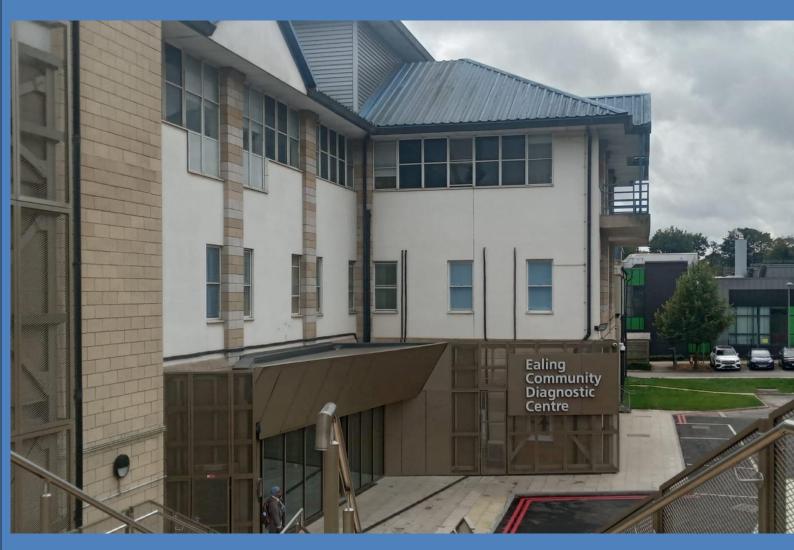
# Enter and View Report

Ealing Community Diagnostic Centre October 3<sup>rd</sup> 2024.



A report by Healthwatch Ealing

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Visit Details	
Service Visited	Ealing Community Diagnostic Centre
Manager	Mark Titcomb
Date & Time of Visit	10:00 AM October 3rd 2024
Status of Visit	Announced
Authorised Representatives	David Crawley, Chloe Howcroft, Ruchi Wadhwa.
Lead Representative	David Crawley

### 1. Visit Background

#### 1.1. What is Enter & View?

Part of the local Healthwatch programme is to undertake 'Enter & View' (E&V) visits.

Mandated by the Health and Social Care Act 2012, the visits enable trained Authorised Representatives (ARs) to visit health and care services - such as hospitals, care homes, GP practices, dental practices/services, and pharmacies.

E&V visits can happen if people tell us there is a problem with a service but can also be made when services have a good reputation.

During the visits we observe service delivery and talk with service users, their families, and carers. We also engage with management and staff. The aim is to gain an impartial view of how the service is operated and being experienced.

Following the visits, our official 'Enter & View Report', shared with the service provider, local commissioners and regulators, outlines what has worked well, and makes recommendations on what could work better. All reports are available to view on our website.



#### 1.1.2 Safeguarding

E&V visits are not intended specifically to identify safeguarding issues. If safeguarding concerns arise during a visit they are reported in accordance with safeguarding policies. If at any time an Authorised Representative (AR) observes anything they feel uncomfortable about they will inform their lead who will inform the service manager, ending the visit.

If any member of staff wishes to raise a safeguarding issue about their employer, they will be directed to the Care Quality Commission (CQC) where they are protected by legislation if they raise a concern.

#### 1.2 Disclaimer

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

#### **1.3 Acknowledgements**

Healthwatch Ealing would like to thank the service provider, service users and staff for their contribution and hospitality in enabling this E&V project to take place. We would also like to thank our ARs, who assisted us in conducting the visit and putting together this report.

### 2. About the Visit

#### 2.1 Ealing Community Diagnostic Centre

On October 3<sup>rd</sup> 2024 we visited the Community Diagnostic Centre (referred to as the CDC from this point onward) at Ealing Hospital.

The service is operated by the London North West University NHS Trust.



#### 2.2 Online Feedback

Recent feedback via the Friends and Family Test for the Outpatient Services for the North West London ICB has a 93% positive rating, a 4% negative rating, and 3% neutral.

#### 2.3 Purpose of the Visit

Enter and View visits enable Healthwatch Ealing to form an impartial view of how the service is operated and how it is impacting local residents. This report is a follow up to a previous visit we conducted whilst the CDC was in its early stages.

## **3. Executive Summary**

This section of the report details the key findings from our observations and the resident and staff feedback collected during our visit.

#### **Observations**

#### What has worked well?

- There are 5 disabled parking spots outside of the CDC's own entrance.
- There are clear indicators for where pedestrians should walk.
- Each department is colour coded.
- ARs were very impressed with the environment of the first floor of the CDC. It is clean, tidy, and very organised.

#### What could be improved?

- There were multiple instances of emergency chords in accessible restrooms being either taped to the wall or wrapped around mobility aids.
- We observed an interaction between the reception staff and a patient that was colour blind, and the colour coding of the different departments did not help them find where they needed to go.



#### **Patient Feedback**

#### What has worked well?

- Patients told us that their appointments were on time.
- We were told that they found the staff to be professional, kind, communicative, efficient, and respectful.
- Patients told us that they felt comfortable communicating with staff who were administering their tests. They felt okay with asking questions.

#### What could be improved?

- A patient was late, and they had been assured that their delay would be communicated with the hospital/reception staff. This had not occurred, and the patient had to inform reception themselves upon arrival.
- Patients we engaged with told us that they would have liked clearer directions in the appointment letters they were sent to find the CDC or during the call or text they received the day before to confirm their appointment.

#### Staff Feedback

#### What has worked well?

- Trainings include MRI Screenings, CT Screenings, X-Ray Trainings, and Management.
- The effectiveness of training was described as 'Very good' or 'Good' by all respondents.
- Overwhelmingly it was expressed to us that teamwork was the thing that people enjoyed the most about their job.

#### What could be improved?

- Some members of staff told us that tight schedules can be difficult.
- One member of staff mentioned that they did not like having to pay for parking.





# 4. Full Findings

During our visit, we collected responses from 7 service users.

It is important to note that the full CDC site opened on August 12<sup>th</sup> 2024. While it is fully operational, there are still things that are being changed as the centre goes through "growing pains".

This report is based on their collective feedback, plus notes and observations made at the visit.



We would like to thank the staff and management for their time and for their warm welcome and cooperation.

#### **4.1 Observations**

During our visit, our team of Authorised Representatives made observations on Entry and General Accessibility, General Environment, Safety and Visiting, Personal Care and Activities, and Staffing and Management. We have highlighted both good practice and areas for improvement.

Level 2
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Cardiology
Lung Function
Phlebotomy You are now on
Level 1
Â. Jar ()
Reception
X-ray & DEXA
Ultrasound
СТ
MRI

#### Entry, Getting to Appointment, and General Accessibility

#### Notes

• Ealing Hospital, where the CDC is based, has several bus stops outside of it.



- There is ample parking, and blue badge parking right outside of the main entrance of the hospital.
- The CDC has its own entrance that is newly constructed. There is a lift to take an individual down to the CDC entrance from the main entrance if there are mobility issues.
- While the CDC has the capacity to treat those with mobility issues, most with these issues are seen in the main hospital.

#### What has worked well?

- There are 5 disabled parking spots outside of the CDC's own entrance.
- There are clear indicators for where pedestrians should walk.
- Each department is colour coded.
- To make sure that patients attend their appointments, reminders are sent via the post and by text message. Patients are called 2 days before appointments. The email option hasn't been explored yet.

#### What could be improved?

- There were multiple instances of emergency chords in accessible restrooms being either taped to the wall or wrapped around mobility aids.
- We observed an interaction between the reception staff and a patient that was colour blind, and the colour coding of the different departments did not help them find where they needed to go.





#### General Environment of the Ground Floor

#### Notes

- This is a newly built section that opened on August 12<sup>th</sup>
- Tests conducted on this floor include DEXA, X-Rays, MRIs, CTs, and Ultrasounds.
- Some patients had difficulty finding the CDC. There is an ongoing wayfinding project being conducted by the Trust to improve signage in the CDC and main hospital to combat this.
- Staff changing rooms are clean, with lockers, toilets, and showers for staff to use.
- Each section of this floor has changing rooms for patients to use, where they can leave their belongings in lockers.

#### What has worked well?

• ARs were very impressed with the environment of the first floor of the CDC. It is clean, tidy, and very organised.



- One staff member told us that a patient believed the CDC was a private venture, instead of the NHS because of how nice it was.
- Signs leading to this area are clear.
- There are drinking water stations placed throughout the CDC.
- The ultrasound suites all have ensuite restroom facilities to allow for easier use for patients.
- There are CCTV cameras for the waiting area, so patients who need to wait around after their tests to ensure they are okay can be observed by staff.







#### What could be improved?

• One patient voiced confusion with the locker system. They had to leave their belongings in a locker because metal was not allowed in the MRI suite, but they also had to leave the key to the locker. They felt that this was not safe and that someone could take the key and their belongings.



(examples of testing facilities on the ground floor of the CDC)

#### General environment of the first floor

#### Notes

- The second floor is where tests for blood, heart, and lungs are conducted.
- The main hospital is connected to this floor.



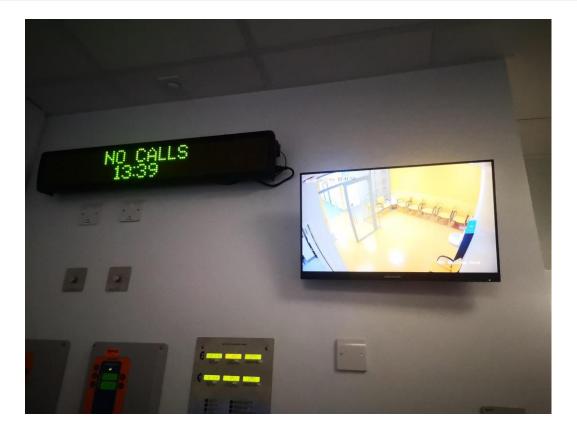
• There is ongoing construction to the entrance of this section of the CDC.

#### What has worked well?

- The space is well lit, tidy, and clean.
- Water was made available for patients in the waiting room.
- The area was well signposted, with the restrooms having dementia-friendly signage.
- There were plenty of drinking water stations on this floor.

#### What could be improved?

• We found no areas for improvement





#### **4.2. Service User Feedback**

At the visit we collected feedback from 7 service users.

#### Staff

- Patients told us that their appointments were on time.
- We were told that they found the staff to be professional, kind, communicative, efficient, and respectful

#### Communication

- Patients we engaged with told us that they would have liked clearer directions in the appointment letters they were sent to find the CDC or during the call or text they received the day before to confirm their appointment.
- Patients told us that they felt comfortable communicating with staff who were administering their tests. They felt okay with asking questions.
- A patient was late, and they had been assured that the delay would be communicated with the hospital/reception staff. This had not occurred, and the patient had to inform reception themselves upon arrival.
- One patient who was equipped with a 24-hour testing device wished that they
  had been told this would be the case prior to arriving, as arrangements would
  need to be made for the device to be returned. Staff could also inform them that
  the device can be collected from their home by the service.
- Most patients said that staff clearly explained to them what to expect next. The exception to this was the individual with the 24-hour testing advice, as what happens next depends on those test results.

#### Travel to the site

- Residents gave us a mixed reaction when it came to traveling to the CDC. Some mentioned they have no problems, while others highlighted issues
- The average travel time of those we spoke with was 40 minutes.
- One patient told us they had never been to the CDC. They were unsure how to get here. They privately hired a mini cab to get to the CDC. This was done at great cost to them.
- Another service user mentioned that the taxi the hospital arranged was late, causing them to be late to the appointment.

#### Getting the appointment



- Most of the patients we spoke with told us they did not have long waits to get an appointment. The average wait was only 3 weeks
- Most of our respondents were referred to the CDC by their GP, but some were referred by a specialist.
- Most respondents told us that they were not given a choice in where they would get their scan. However, most of these respondents also did not express any ill will towards that fact. One person told us they would have liked to have a choice due to the distance from their home to the CDC. Another patient would have preferred going to a different closer hospital for their scan.
- Those who were given a choice in where to get their scan chose the CDC because it was more convenient for them.
- Patients were not given a choice when it came to the time of their appointment.

#### Thoughts and Opinions of the Community Diagnostic Centre.

- None of the patients we spoke to knew what a CDC was.
- A patient was lost in the main hospital looking for the CDC.
- When asked about the benefits of a CDC, patients told us that they believed the site would be more convenient for getting more scans done.
- People also told us that they found the environment to be quiet, calm, and very clean.

#### **Selected Comments**

#### Thoughts on the CDC

"Getting the appointment was faster than expected and I have the appointment in 5 minutes and they have already called me in"

"I think they are good as they have less waiting time and you get an appointment pretty soon"

#### **Thoughts on Staff**

"[The Staff] are very thorough, explained everything, answered whatever questions I had."

"The receptionist and staff made this a very positive experience."



#### 4.3. Staff Interviews

During the visit we received feedback from 7 staff members from varied roles including radiographers, administrators, and department assistants.

#### **Selected Comments**

"The current team that we have makes [the job] enjoyable. We all work well together, and we respect each other."

"I enjoy the patients the most. I'm quite a bubbly person. I like helping and calming the patients who come here for scans. The patients give me good feedback. It is like we are giving back [to the community].

#### Training

- Trainings include MRI Screenings, CT Screenings, X-Ray Trainings, and Management.
- The effectiveness of training was described as 'Very Good' or 'Good' by all respondents

#### What they enjoy about the job

- Overwhelmingly it was expressed to us that teamwork was the thing that people enjoyed the most about their job.
- Staff told us that they felt their co-workers made working at the CDC a better place.

#### Support

- Everyone we spoke with mentioned how much they felt supported by their management.
- One individual went as far as to say that they would not be where they are without this support, they recently completed an apprenticeship to gain a certificate with support from management.

#### How do you usually feel at the end of a shift?



- When asked how they felt at the end of shift, most members of staff told us they felt either energised or neutral on a scale from 'Very Energised' to 'Very Drained'.
- They told us that it is dependent on the shift they work, and that 12-hour long days can feel more draining than 8-hour shifts.

#### Difficulties

- Some members of staff told us that tight schedules can be difficult.
- One member of staff mentioned that they did not like having to pay for parking.
- · Most members of staff did not report any difficulties they have in their roles.

#### Communicating with patients and their family

- When asked if staff are able to foster as much communication with the patient and their family as they can, staff told us that they either strongly agreed or agree that they could.
- When it comes to communicating with patients, language barriers were listed as the number one issue for staff. Every single member of staff we spoke with told us that this was the primary obstacle they face.
- Staff told us they deal with this by either using telephone interpreter services, having a member of staff who can speak the language translate, or by having a family member translate. By using these methods, they are able to understand what they are being told during appointments

#### **Selected Comments**

"We want to make the most of this £30 million investment".

"Our goal is to be the main hub for West London"

#### 4.4 Management Feedback

We spoke with Mark Titcomb about a variety of topics regarding the CDC.

#### In Summary



#### Why this location was chosen

• Primarily, residents of Ealing, Harrow, and Brent use the CDC for their tests, with residents of other boroughs using alternative sites.

#### **Challenging Aspects?**

- We acknowledge that there are issues with wayfinding for the CDC and we are taking steps to ensure that this is corrected.
- We also want to know how people who are coming from outside of Ealing feel about travelling to this site.

#### Improvements

• There is ongoing construction at the main entrance of the hospital, to give it a "face lift"

## **5.** Recommendations

Healthwatch Ealing would like to thank the service for the support in arranging our E&V visit.

Based on the analysis of all feedback obtained, we would like to make the following recommendations.

#### Recommendations

#### Entry, Getting to Appointment, and Accessibility

• There were multiple instances of emergency chords in accessible restrooms being either taped to the wall or wrapped around mobility aids.

5.1: We recommend ensuring that the emergency chords are left free flowing to the floor in case of an emergency. We acknowledge that false alarms do



happen, but this is not an excuse to tape up emergency chords. We suggest adding signs to the restrooms clearly labelling where patients should flush.

Response: Thank you for highlighting this issue. We can confirm we have assigned the nurse in charge at the CDC to do a round every morning before opening, to ensure the cords are free, and to follow up in the afternoon. We have installed temporary signage, to be followed by permanent signage regarding flushing.

• One observation we made in the waiting area was of a colour-blind patient, who had difficulty with the colour coding system.

5.2: Ensure that colour-blindness is considered when developing the wayfinding strategy.

Response: Our full Wayfinding work is progressing, and since the visit new, updated signage has been installed alongside the refurbishment of Ealing Main Entrance. The ethos of our signage is to include clear, plain-English instructions alongside pictorial signs and colour-coded zoning, to ensure that patients with different abilities can navigate their way with ease. We will provide staff escort to patients who need it.

#### Environment of the First Floor

 One patient voiced confusion with the locker system. They had to leave their belongings in a locker because metal was not allowed in the MRI suite, but they also had to leave the key to the locker. They felt that this was not safe and that someone could take the key and their belongings.

5.3: We recommend having lockers with code-based locks for patients, so they do not need to account for a key.

Response: We would like to assure patients that our MRI suite and changing rooms are under staff visibility and are not left unattended. The patients can now bring the key into the MRI room but place the key at a safe distance, the MRI staff will be directing them how to do this.



#### **Patient Feedback**

• Patients mentioned to us that they had difficulties finding the CDC.

5.4: We recommend that the Trust continues to explore its wayfinding improvement options. We also recommend that detailed directions are included in appointment letters.

Response: While we continue to improve our Wayfinding, and have now further improved the entrance areas at Ealing Hospital, we have also developed a 'Your appointment at the Ealing Community Diagnostic Centre' document, to accompany patient letters, to ensure they can prepare for their journey. We have also added the FAQ section as recommended. This material is now in the approval process with our Communications team. We have also communicated with our staff, who call the patients two days before their appointment, to provide instructions on how to find their destination upon arrival.

 One person told us they would have liked to have a choice due to the distance from their home to the CDC. Another patient would have preferred going to a different closer hospital for their scan. Patients do not understand what the CDC is or what its benefits are.

5.5: We acknowledge that this is a long-term issue, and that it will take a while for the concept of the CDC to permeate within North West London. However, we recommend partnering with GP practices to advertise what a CDC is to patients who are referred there. Consider adding in a FAQ section with CDC letters during the first few years of appointments.

Response: The new Head of Operations for Radiology has met with the GP's via their Forum (in January 2025), where he was able to present on the performance and role of the CDC. He was able to share a presentation on activity for the past quarter, along with details linked to the opening and access for the service. This was well received and allowed for queries and questions to be answered in real-time. We have our designated Primary Care Liaison function, meeting regularly with borough GPs and primary care professionals, and through this we can directly address any queries there may be regarding the CDC



#### Staff Feedback:

• Some members of staff told us that tight schedules can be difficult.

5.6: We recommend reviewing the structure of schedules six months after all CDC testing facilities are fully operational in order to see if 'catch up time' can be added to allow for some leeway in schedules.

Response: For schedule booking, it is expected that there will be some patients who do not attend their appointments, and to optimise the number of people being able to have their appointments as soon as possible, to ensure the CDCs support the wider purpose of reducing patient waiting times and diagnostic backlog which can cause inequity for our communities. There is a regular review of schedules and templates that reflect the variation in demand and flow through the department, with catchup time scheduled in both CT and MRI. Our ultrasound schedules meet British Medical Ultrasound Society guidelines for scan/reporting times.

• One member of staff mentioned that they did not like having to pay for parking.

5.7: Review this policy with members of staff, explore if a parking stipend is available in the budget.

Response: Our staff are entitled to discounted parking with our staff parking permit. Our Communications team shares regular information on how to apply for parking on Ealing site. Our parking policy is aligned our partner Trusts in our sector, and as part of our sustainability plan we offer staff alternatives to encourage cycling and usage of public transport.

### 6. Glossary of Terms



ARAuthorised RepresentativeCQCCare Quality CommissionEnter & ViewE&V

## 7. Distribution and Comment

This report is available to the general public and is shared with our statutory and community partners. Accessible formats are available.

If you have any comments on this report or wish to share your views and experiences, please contact us.

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"Everyone in the department works together as a team. Coming together to help patients is very important."

- Member of Staff

