

## Community Diagnostic Centre Improvement Vignette

<b>Site Name:</b> Leeds Community Diagnostic Centre
<b>Core Components/Principles</b> <p>Using patient and staff experiences at key Community Diagnostic Centre (CDC) pathway touchpoints to co-create service improvements</p>
<b>Our Challenge</b> <ul style="list-style-type: none"> <li>• Outdated facilities affecting patient experience of the CDC.</li> <li>• Unclear signage caused wayfinding confusion for patients.</li> <li>• Gaps in communication with GP practices affected patient flow and referrals.</li> </ul>
<b>What we did (the process)</b> <p>The Leeds Community Diagnostic Centre (CDC) at Seacroft operates as a critical hub for radiology and other diagnostic services, serving approximately 1,500 patients weekly. The CDC participated in the Experience-Based Design (EBD) programme, which allowed patients to provide feedback on how they felt leading up to and during their appointment, as well as suggest areas for improvement. The process began with EBD surveys, supported by staff actively encouraging patient participation. Despite some initial limitations, such as low engagement with QR codes, the feedback provided valuable insights.</p> <p>Despite the majority of feedback being positive, several challenges were highlighted through the EBD surveys, including outdated facilities, limited wayfinding, and a lack of inviting environments for patients. In particular, patients felt that the waiting area was dated and had worn, uninviting chairs. Staff noted the frequent need to redirect patients due to unclear signage. It was also clear further work was required with GPs so that patients would understand why they were attending the CDC.</p> <p>Using £72,000 of funding from NHS England, via the CDC EBD programme, the CDC team embarked on a comprehensive improvement project. The efforts focused on creating a more welcoming and accessible environment. Updates included refurbishing radiology spaces, introducing accent walls, and incorporating a cohesive color-coded wayfinding system. For example, the waiting areas were designed with distinct colours—orange for CT and X-ray services, and teal for ultrasound—helping with both navigation and aesthetics. The colour-coding themes for each service were also continued throughout the website, letters, and communications, ensuring visual aid for patients and continuity. Additional service-coloured seating will be installed to improve patient flow and wayfinding. Areas were also split to separate phlebotomy and cardiology services, enhancing overall coordination.</p> <p>A television system was upgraded to provide tailored information, including details about diagnostic procedures, rather than generic programming. Leaflet holders were added for patients who preferred written information, reducing clutter while still offering practical resources. Plans for a new digital screen in the reception area are also underway, with the goal of displaying real-time updates to manage expectations about waiting times.</p> <p>The team worked to address wayfinding challenges at both Seacroft and its spoke sites, Beeston and Armley. Large external signs were installed at Beeston to differentiate the CDC from adjacent GP practices, significantly reducing confusion. Unfortunately, planning constraints at Armley limited similar external signage, but internal solutions helped guide patients to the right areas.</p>



Figure 1

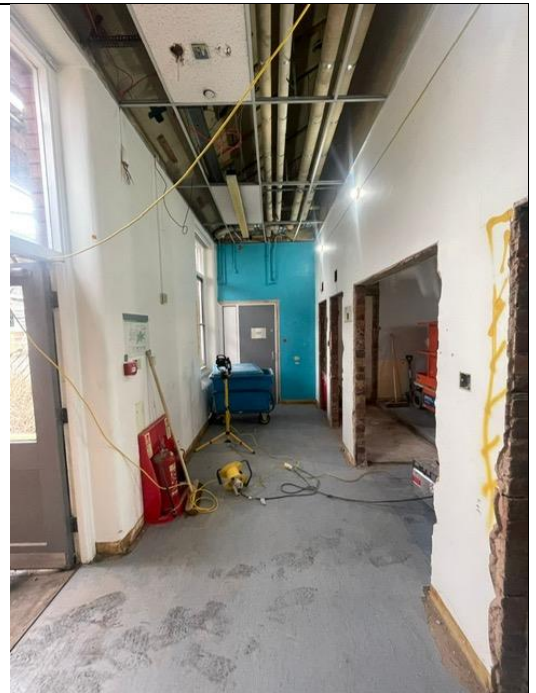


Figure 2



Figure 3

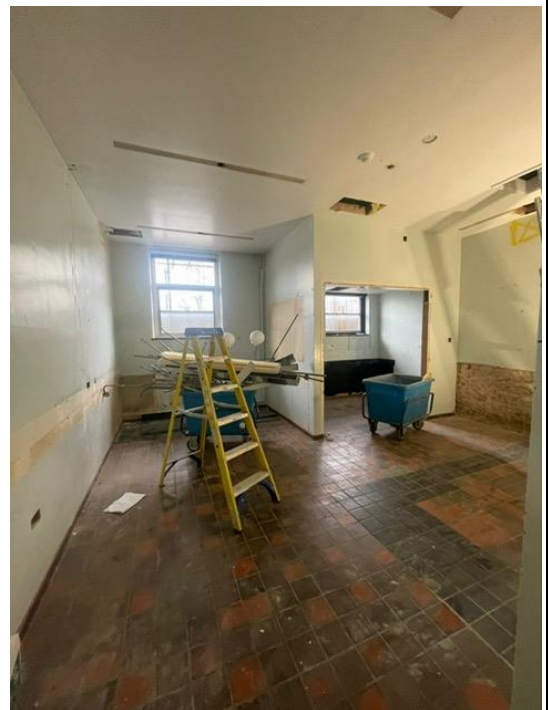


Figure 4

Figure 1- Seacroft CDC old x-ray room reconfigured in the build to enable installation/addition of CT

Figure 2- Seacroft CDC old corridor/waiting area which was updated/reconfigured in the build to enable updated changing facilities, CT installation, and 2 updated x-ray rooms

Figure 3 & 4- Seacroft CDC old x-ray room and processing area which was reconfigured and updated to allow updated x-ray rooms, processing area and larger more inviting waiting area.

### What we achieved (the outcomes / data)

The improvements have already yielded noticeable benefits for both patients and staff. The enhanced waiting areas are brighter, more inviting, and better equipped to meet patient needs. It is hoped that in the next wave of EBD surveys, feedback will show that patients feel more comfortable and informed about their appointments.

At Beeston, the new external signage has drastically reduced the number of misdirected patients, while Seacroft's color-coded system has improved navigation within the facility. The refurbishment of radiology spaces has been transformative, making them more modern and welcoming for both patients and staff.

Engagement with GPs has also improved through initiatives such as monthly newsletters detailing the CDC's services and capacity. This has started to address gaps in communication and foster better collaboration with the 86 GP practices that refer patients to the CDC



Figure 5



Figure 6



Figure 7

Figure 5, 6 and 7 show Seacroft CDC's updated colour-coded patient waiting area's:

**Ultrasound = Turquoise**  
**X-ray/CT = Orange**  
**Reception = Grey**





Figure 8



Figure 9



Figure 10

Figure 8- Seacroft CDC new x-ray equipment and reconfiguration/updated x-ray room

Figure 9-Seacroft CDC new CT installation

Figure 10- Seacroft CDC new US equipment and one of our Radiology Assistants

### Testimonial

*"Despite some initial challenges with the EBD survey, it was reassuring to receive feedback that affirmed we were focusing on the right areas for improvement. By focusing on the patient pathway - from the moment they are referred by the GP to when they leave the CDC after their appointment - we've made the journey as welcoming, accessible, and calm as possible. This allows us to provide the care that we want to provide."*

**Laura Lamping**  
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### Key System contacts

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