

Healthwatch Tameside

Urgent care report

Survey data collected
March 2021 to July 2021

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@HealthwatchTame

Introduction

Healthwatch Tameside is the independent consumer champion for health and social care in Tameside.

We listen to local people, and gather information about their experiences of using health and social care services.

We use this information to talk to the people who arrange (commission) the services and the people who provide the services. We can influence changes which will make these services better for everyone. If we hear about good practice, we encourage this to be shared. If you tell us about something that could be improved, we will talk to the people in charge about this too.

Any information we are given will remain anonymous. We are careful to share ideas in a way which will not identify any individuals.

Earlier this year, the NHS 111 service launched NHS 111 First. When a person feels they need to visit A & E, they are asked to contact NHS 111 before they do. This is how the service provided by NHS 111 is described on the Tameside & Glossop Clinical Commissioning Group website:

Anyone who thinks they need the emergency department due to an urgent but not life-threatening medical need, should make sure they contact NHS 111 first rather than going straight to the emergency department.

NHS 111 can now book people in to be seen quickly and safely in the emergency department. As well as this, NHS 111 is also able to direct to, or book an appointment at Urgent Treatment Centres, GP practices, pharmacies, emergency dental services and other key services.

To contact NHS 111 visit their website 111.nhs.uk or call 111. It is available 24 hours a day, 7 days a week.

If you attend the emergency department without an appointment when it is not a life-threatening emergency, you *may be referred elsewhere for treatment or be assisted to use NHS 111*.

Healthwatch Tameside received feedback suggesting people were not aware of the new ways to access urgent care. Our urgent care survey was launched to ask about people's knowledge of the urgent care access system. If they had experience of using it, we asked how it worked for them.

The second part of the survey asked for feedback about using other services, and these responses will be included in a separate report.

The survey was open from mid-March 2021 to the end of July 2021.

We want to give as many people as possible an opportunity to complete our surveys. They are available online, on paper, and we offer to complete them over the phone with people.

We received 136 completed responses to this survey, broken down as follows:

Online	-	76 (56%)
On paper	-	42 (31%)
By phone	-	18 (13%)

Healthwatch England (HWE) launched a survey about using NHS 111 in August 2021. Most of the questions required tick-box answers. After the Healthwatch Tameside survey closed, we included a link to their survey on our website. Any comments to the HWE survey received via our website which are relevant to the questions in the Healthwatch Tameside survey have been included in our analysis for this report. There were only 6 completed HWE surveys.

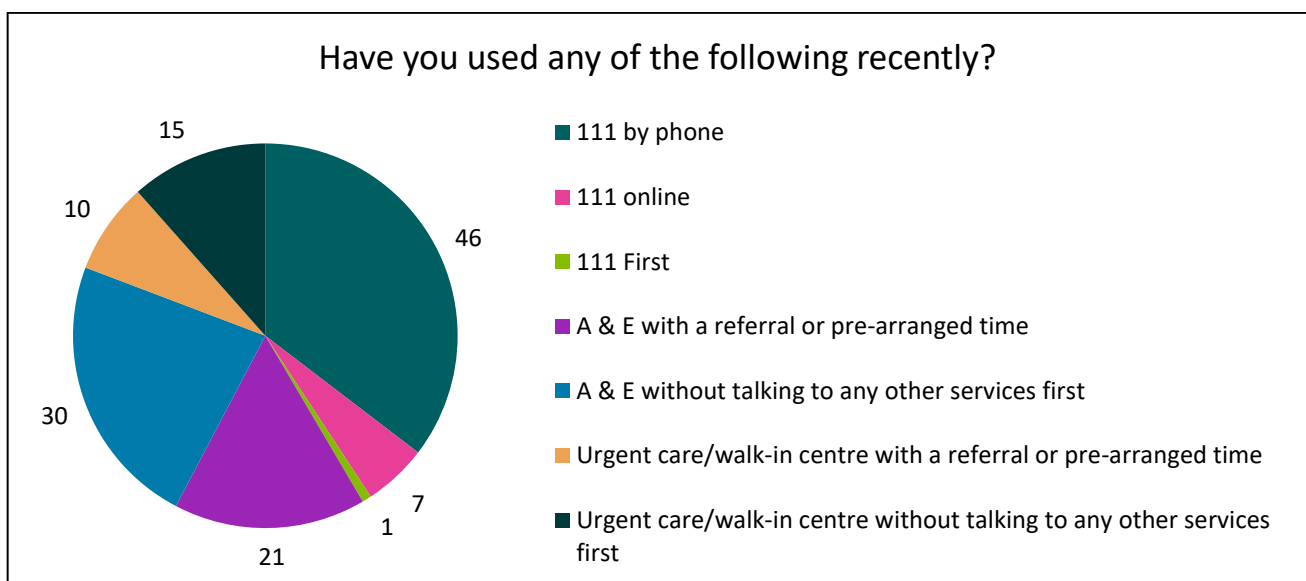
We have not requested comments from commissioners and providers of services for inclusion in this report. Healthwatch provided information regularly while the survey was still open. There were a number of meetings being held to discuss the provision of urgent care going forwards, and it was important that the views of the public were made known at that time. This report brings together all the responses for publication.

Some of the questions on the Healthwatch Tameside survey ask for tick-box responses, and some for free-write feedback.

Here is what we were told.

Question 1 - Have you used any of the following recently? Tick all that apply.

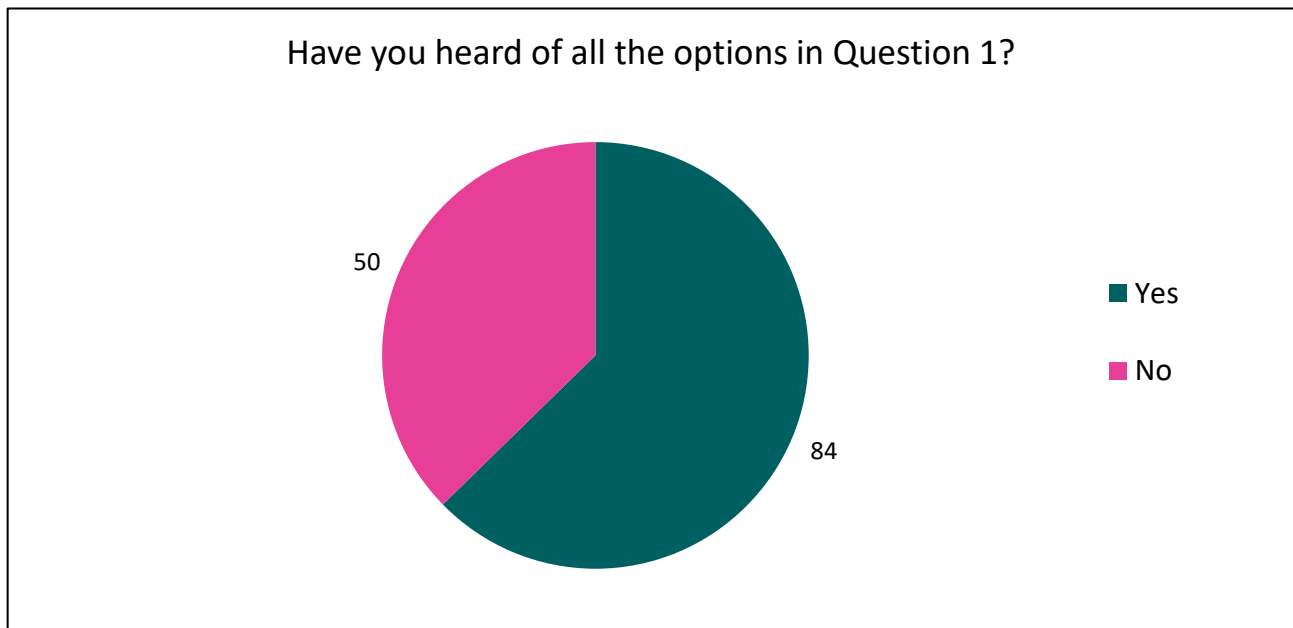
89 people answered this question.



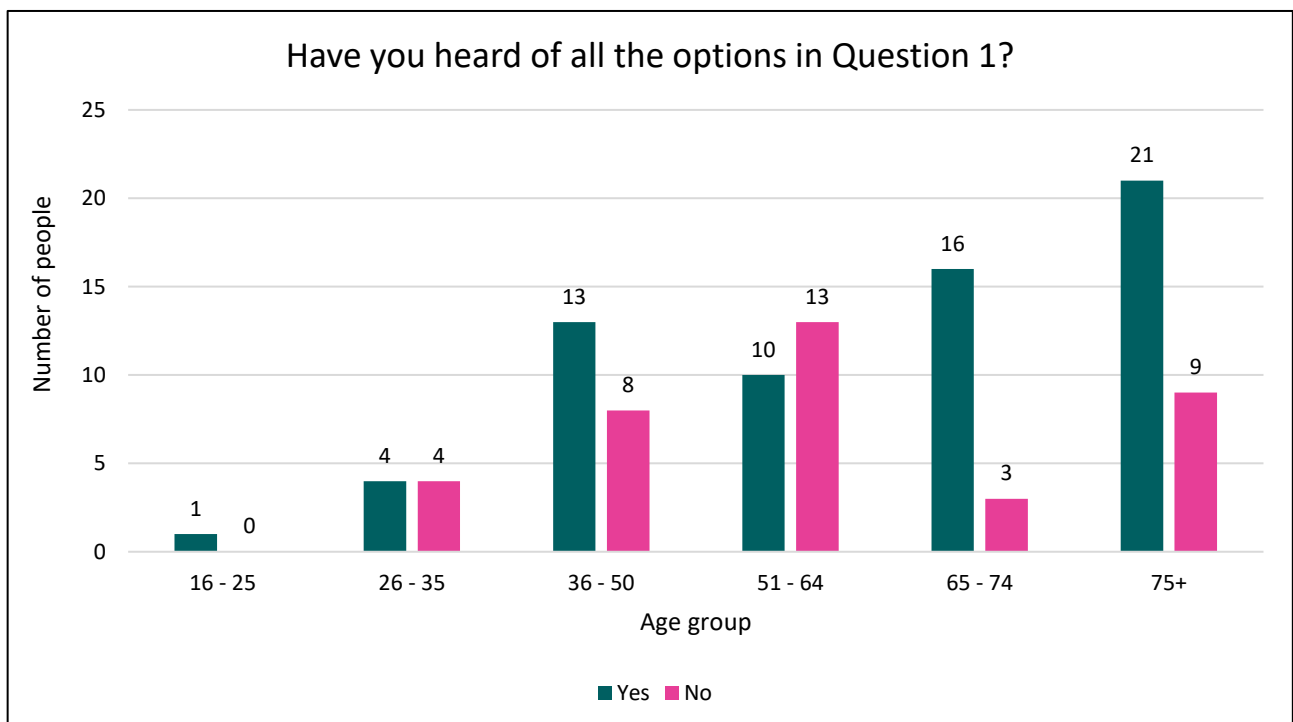
4 people had contacted NHS 111 by phone in the HWE survey.

Question 2 - Have you heard of all the options in Question 1?

134 people answered this question.



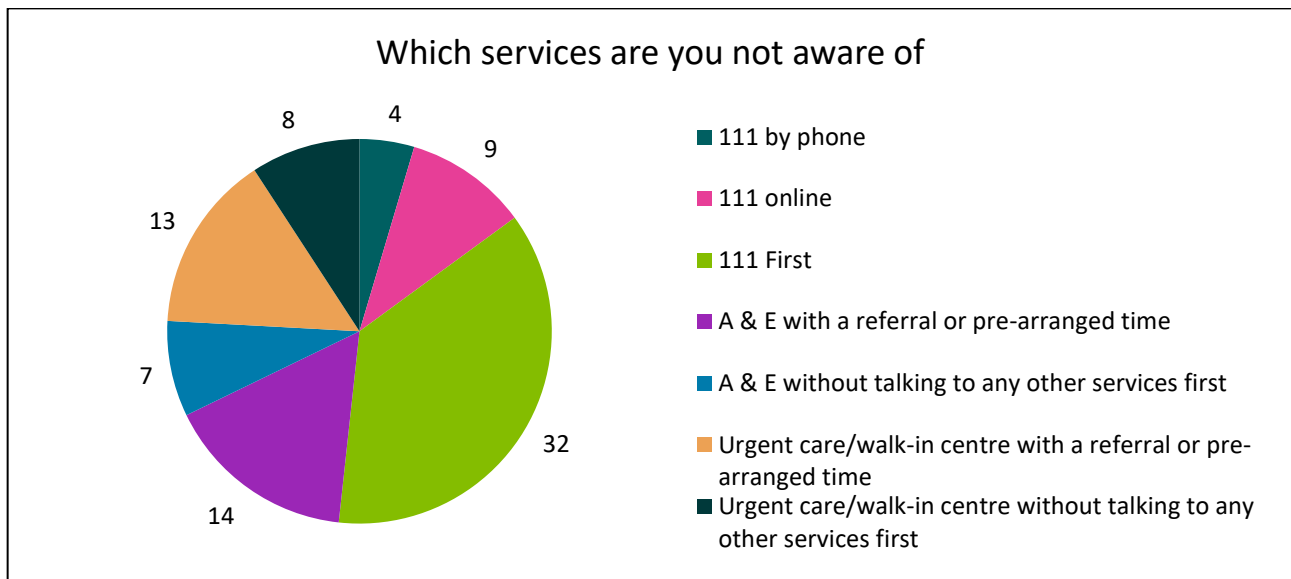
For the people who answered this question and also answered the demographic question about age, we can show the information in a different graph.



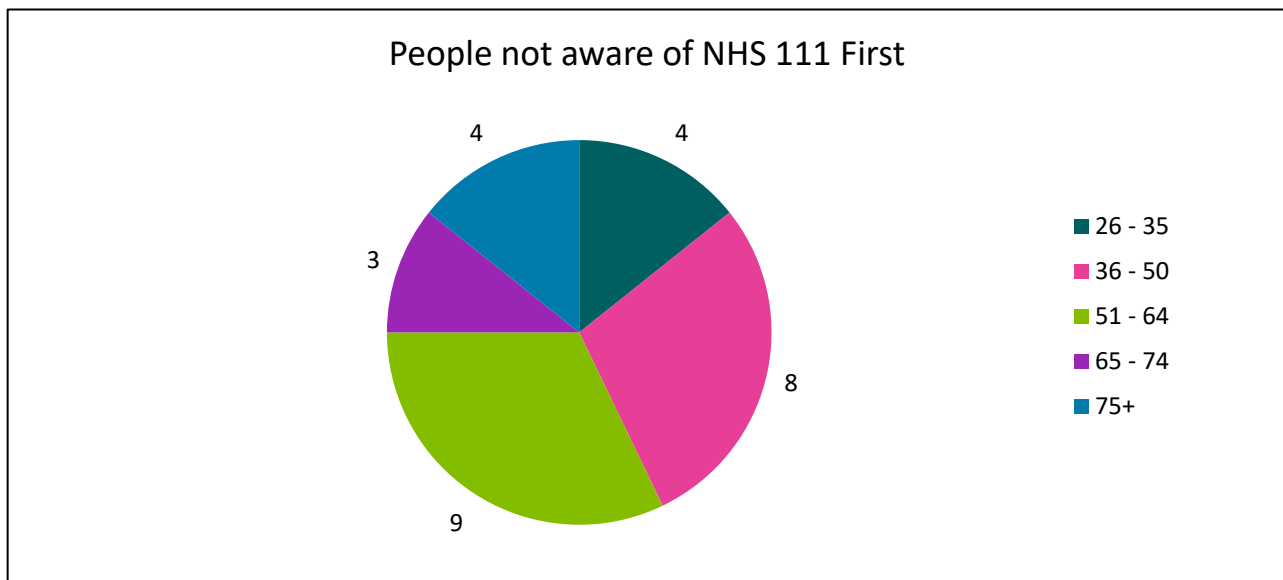
It would appear that for people over 65, who are likely to be higher users of urgent care services, many have been made aware of the options available. The number of Yes/No responses are more equal in the younger age groups.

The second part of this question asked:

‘Please say which you are not aware of’



Of the 50 people who were not aware of all the services, 32 (64%) said they were not aware of ‘111 First’. For the people who were not aware, and also provided their age group, this can be shown as:

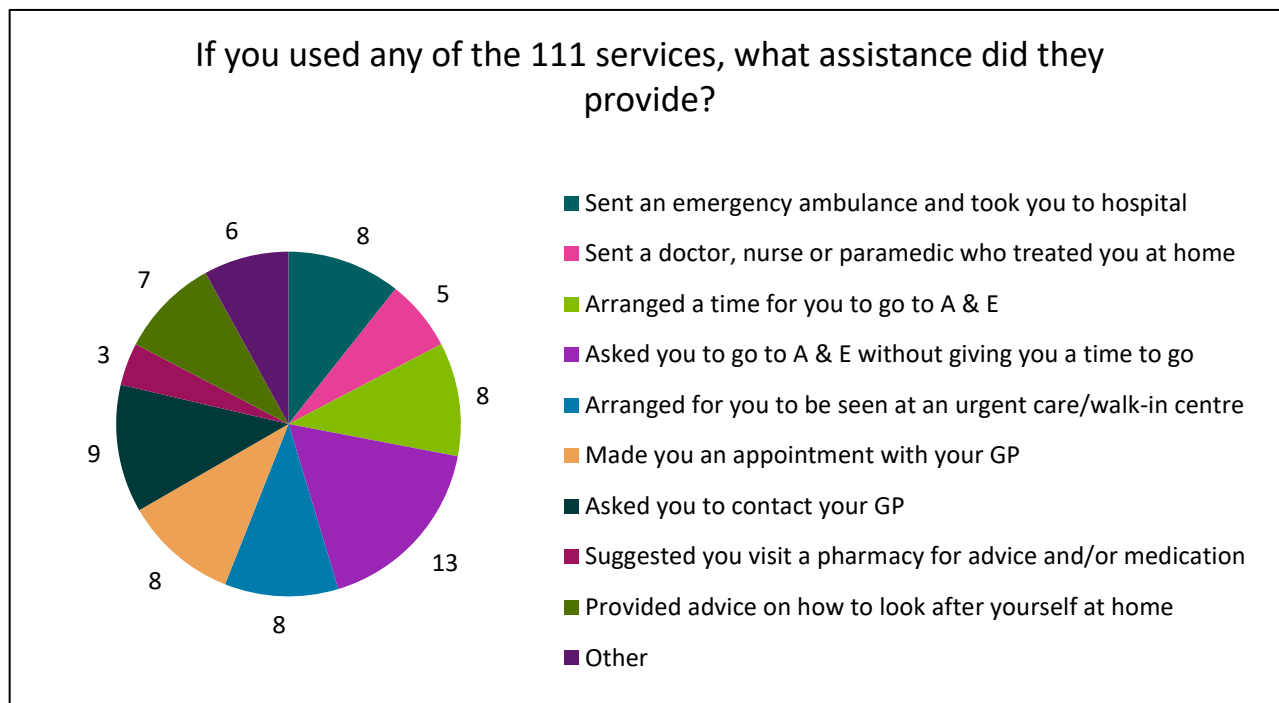


Looking at the other responses, it is possible there was a misunderstanding when reading the list of choices. Seven people said they were not aware of ‘A & E without talking to any other services first’ (i.e. just turn up).

In the HWE survey two people were not aware an appointment could be made for them at A & E or the urgent care centre by NHS 111.

Question 3 - If you used any of the 111 services, what assistance did they provide?

75 people answered this question, although only 54 provided a response to the question asked. For these 54 people, the assistance provided can be seen in the next graph.



In the HWE survey two people received a call back from a medical professional.

Other (please describe)

Some of the responses to this question stated that the person had not used the NHS 111 service, and others provided feedback which has been included with the analysis of the free-write responses to later questions.

Of the relevant responses to this question, 'Other' assistance was:

- Told to wait for a dentist to phone.
- Telephone consultation with a doctor (not clear whether a 111 doctor or a GP referral).
- Told me to ring back later as they were too busy.
- Gave a phone number for emergency dentist which was no longer recognised.
- 111 arranged for me to speak to a member of the medical team who then passed it through to a doctor who prescribed antibiotics, and sent them to a local pharmacy.
- Sent a prescription to the pharmacist.

Question 4 - Please tell us more about your recent experiences of using urgent care services. Which service(s) did you use? What went well? What could be improved?

We will look at the responses to each part of the question separately.

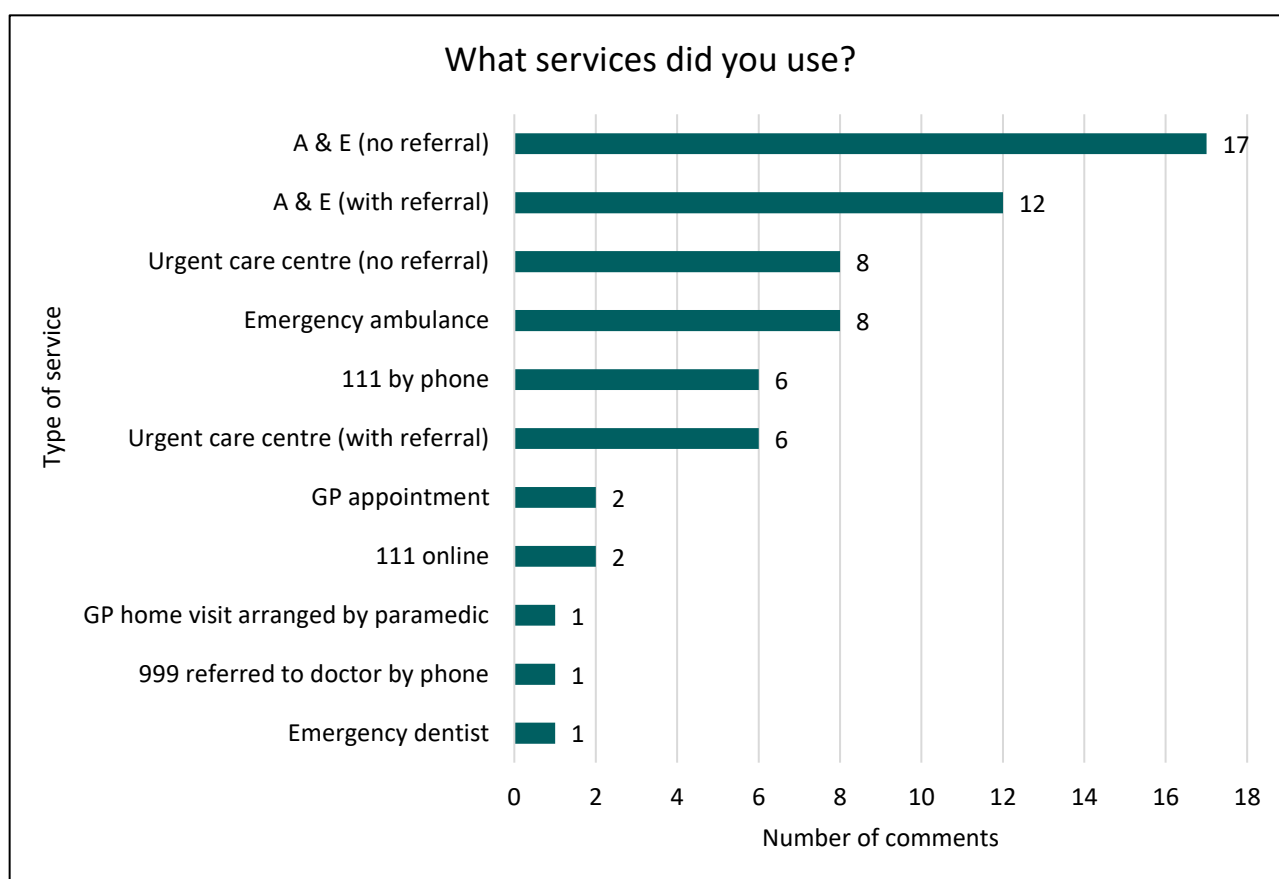
In this report we have included the part of the response relevant to urgent care services. Where this care led to experiences of other departments or services, this will be included in the separate general feedback report to be published separately.

64 people answered this question.

Which services did you use?

We have listed the services as described in the feedback.

If a referral to A & E or an Urgent care centre is not mentioned, we have recorded this as a visit without a referral. The other services used were arranged by NHS 111.



What went well?

The comments received will be summarised in the order of services listed in the graph on the previous page.

A & E

The positive comments about A & E included feedback about:

- Feeling safe, feeling COVID safe
- Medical care and treatment
- Prescribed antibiotics
- Prompt treatment
- Service provided
- Staff were thorough, kind, polite, understanding, supportive
- Well organised
- X-rayed quickly

“We were really looked after and felt they explained everything that had happened to”

(Family of patient with learning disability)

“Pre-arranged appointment by 111 - much smoother than previous experiences of just turning up at A & E.”

Urgent care (walk-in) centre

The positive comments included were about:

- Care
- Cleanliness
- Easy
- Safe
- Service
- Speedy

“Being able to use the online service and then triage and treatment all at the same location was a very positive and timely experience”

(NHS 111 online then A & E and Urgent care centre at Tameside Hospital)

“Went to walk in. Amazingly within an hour of going, finally got face to face appointment at Doctor’s surgery.”

Emergency ambulance

The positive comments included:

- Felt safe
- Listened
- Understood situation
- Very good
- Very quick to arrive

NHS 111 by phone

Two people said NHS 111 had explained clearly to them about accessing urgent care services.

Other

In addition to the above comments four people said everything went well.

Three people described the care they received as very good.

What could be improved?

The comments answering this part of the question are summarised below.

A & E

The negative comments, and areas for improvement, include:

- Accessibility for people needing quiet sensory environment
- Attitude of staff
- Cleanliness of waiting area (especially after patient vomiting)
- Cold temperature whilst waiting
- Communication (several comments)
- COVID-secure measures
- Customer service at reception
- Lack of compassion
- Long delays
- Mental health care
- Need to listen to patients
- No access to water
- No knowledge by staff of referral from NHS 111 (several comments)
- Not received x-ray results after 6 weeks
- Pain relief not offered
- Problem with booking-in iPad sending person back to desk to queue again
- Uncomfortable hard chairs in waiting area/corridor

“When I arrived at A & E (Tameside Hospital) they didn't have a clue what I was talking about when I said that 111 had arranged an appointment. We had to wait 7 hours in A & E instead. Appalling service.”

“My wait from admittance by NWS to discharge was 8hrs 30 minutes, most of it on a hard plastic chair in a cold corridor.”

“A and E was inaccessible to me because of my disability and sensory environment. I could not access the building and was made to wait outside in the rain next to ambulance sirens and flashing lights which is another sensory problem.”

Urgent care (walk-in) centre

The negative comments included:

- Did not resolve the dental treatment I needed
- Long time to wait (several comments)
- Need more seating
- Said they couldn't help, I needed to see my GP

"I was provided with an urgent appointment at the Walk in Clinic. When I arrived at the clinic I still had to wait 3 hours to be seen."

Emergency ambulance

The negative comments included:

- Attitude of paramedic
- Waiting time

NHS 111 by phone

The negative comments included:

- Insisted I had COVID and to isolate. A & E diagnosed serious pneumonia and chest infection which needed treatment.
- It would have been better if more helpful advice was given.
- Not helpful, too busy to take call. Ring back later.
- They just called for an ambulance. I could have done that sooner myself if we had not been told to call 111 first.

"The waiting time for the doctor to call me back needs to be improved. I found myself getting distressed more waiting for a doctor on the phone."

Other

Negative comments about other services included:

- Having to use emergency dental care, as no NHS dentists available
- Cost of dental treatment

"The repeating of information numerous times throughout is something that should no longer be needed, technology and giving consent should allow health professionals to access this much more easily."

One person described their experience as 'not brilliant'. Another person said it isn't always easy for people living alone.

One person said nothing went well.

"111 online took me round in circles assuming all covid related."

Question 5 - How do you think new ways to access services should be explained to people?

The free-write answers to this question varied considerably. Some people were able to find all the information they needed, whilst others felt the system was not fit for purpose.

There were many suggestions about ways to provide information to people. Several people commented that there should be a variety of ways used, as not everyone has access to emails, social media or online services.

“Explained in 'simple' everyday languages and NOT just by email, www. etc. as not everyone has these facilities - I am one of them.”

People want information to be written in simple, plain language. Use of graphics was also suggested.

Comments were also made about access to information for people who were visually impaired (large print and audio), older, vulnerable, or where English is not their first language (available in other languages).

“More support from IT. Tec should be offered more if agencies keep moving more and more online etc.”

People want to be sure the information is up-to-date, especially on websites. One person commented that leaflets, etc. could be incorrect very quickly, if they have been produced whilst changes to services are still happening.

“TV advertising. I am visually impaired so written explanations would be of no benefit to me.”

Here are the ideas for sharing information that people included in their responses, with some being mentioned several times:

- Leaflets (well-written) - could be found at:
 - GP practices
 - In A & E/Urgent care (walk-in) centre waiting areas
- Local support groups
- Media adverts and articles including:
 - TV (where this is a national issue)
 - Radio
 - Streaming services
 - Podcasts
 - Local press
- Online
 - Q & A page
 - Websites such as:
 - GP practice
 - NHS 111
 - Adverts, including Google
 - Emails
- Phone calls
- Post delivered to the house (could be retained like bin collection leaflet)
- Posters - could be displayed at:
 - GP practices
 - Pharmacies
 - Hospitals
 - On buses
 - Billboards
 - Supermarkets
 - Public buildings
- Social media, including Council accounts
- Staff (in clinical settings) having conversations, e.g.
 - Doctors and nurses
 - Care assistants
 - Pharmacists
 - In A & E/urgent care (walk-in) centre
- Text messages

“I feel that not everyone has internet access so for those who do not go to the GP surgeries, something up in chemists and supermarkets would be helpful.”

“Social media - Facebook, Instagram. For the elderly, adverts in appropriate reading material/posters at GP and other medical places they would go for appointments.”

“When checking in with A&E or the walk-in centre, staff explaining how new ways have been introduced, or even a leaflet that can be read whilst waiting to be seen in triage.”

“By text message from their GP surgery.”

People also asked that staff are told about the types of access too.

We were told about referrals to A & E by NHS 111, where the patient was not expected, or the appointment time was not kept to, and the patient had to join the queue with the walk-in patients. Some members of staff did not seem to understand about NHS 111 referral with an appointment time.

Conclusion

Information about services available

From looking at the answers to the survey questions, communication about the options available for urgent care is still needed. We know from previous Healthwatch Tameside projects that people often only retain information they hear/see if it is relevant to them at that time. This might explain why the older people who completed the survey had more awareness than younger people.

- Recommendation - Messages need to be repeated from time to time.

Feedback

Regarding the services used, some people had positive feedback about the care received. Other people said improvements could be made, and gave examples of where they would like to see changes.

- Recommendation - Commissioners and providers of services to review feedback received from this survey, and other sources. There are some easy 'fixes' which would improve patient experience.

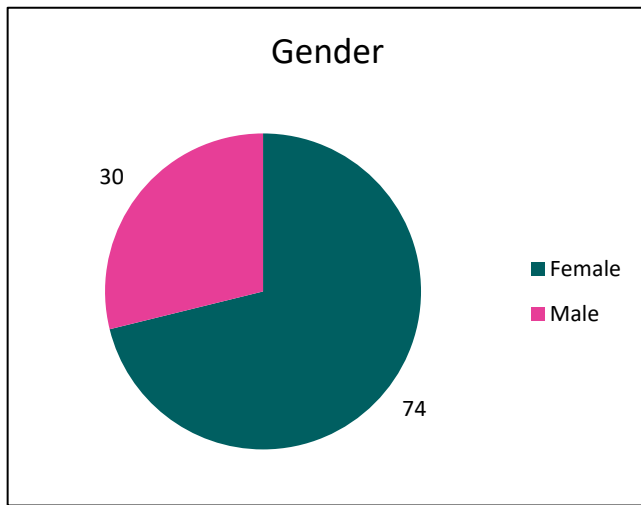
Communication about changes to services

Many ideas of ways to tell people about changes were suggested. These also included comments about making sure communication was available to everyone, including staff. Specific mention was made regarding people without access to the internet and/or technology, people who are visually impaired, older, vulnerable, or where English is not their first language.

- Recommendations:
 - Communication to be accessible to all.
 - Communication to be written in plain, simple language.
 - Use illustrations/images/graphics.
 - Keep communication formats up-to-date.

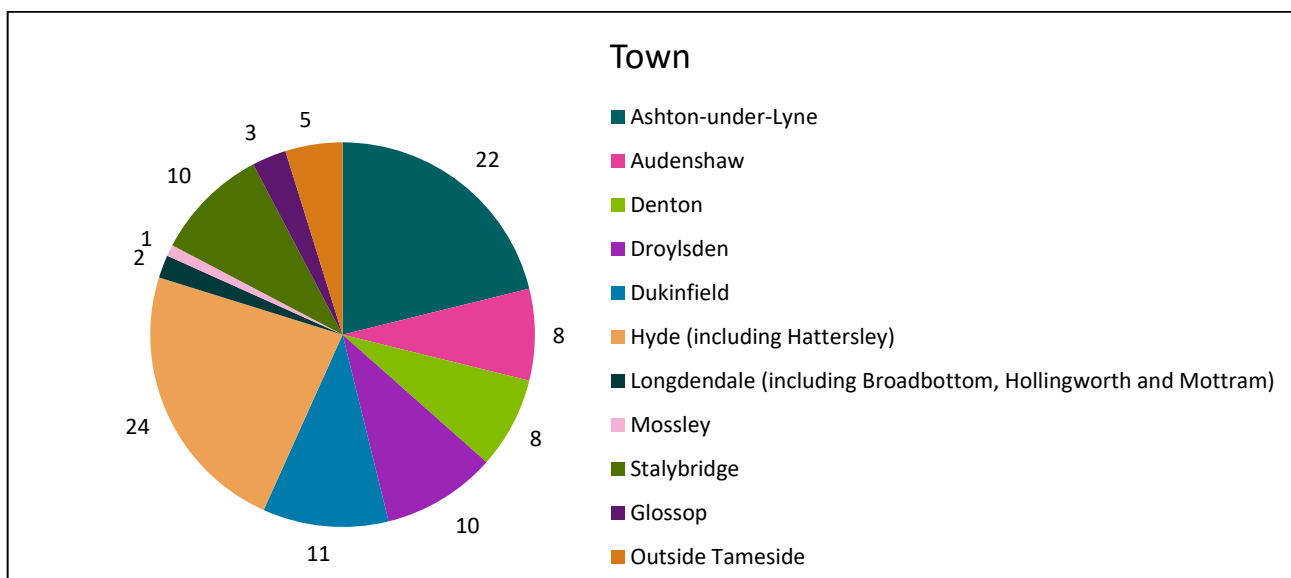
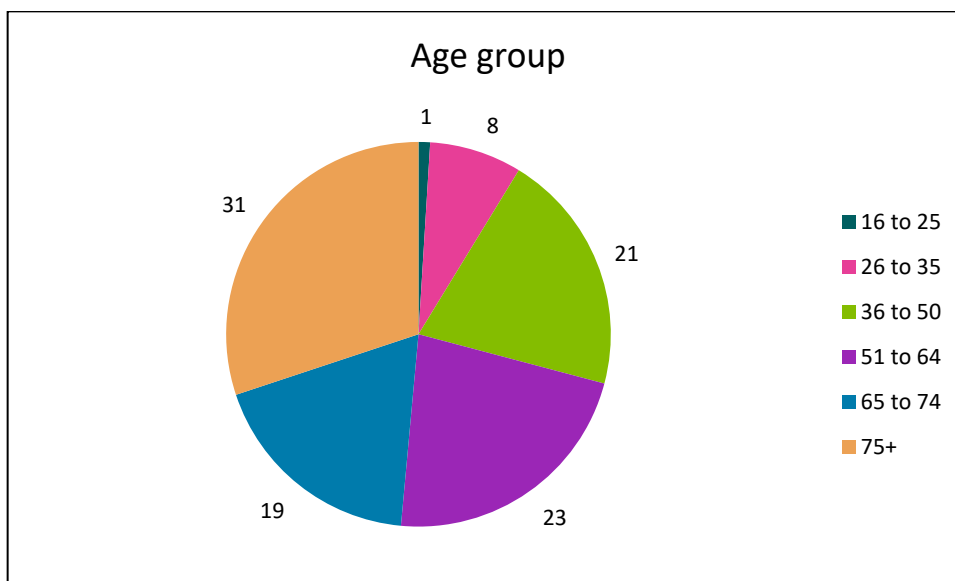
Demographics

Answering these questions was optional. Not everyone who completed the survey also answered these questions, Some people answered some, but not all.

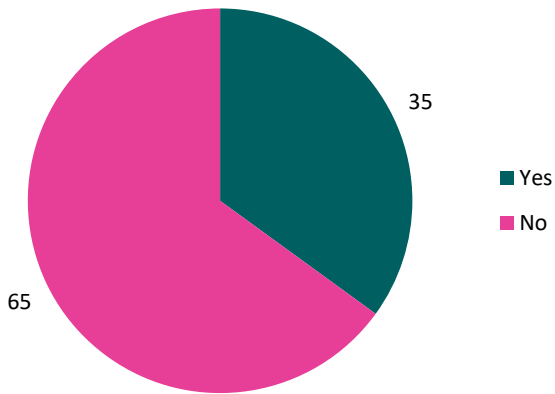


Is your gender identity the same as the sex you were assigned at birth?

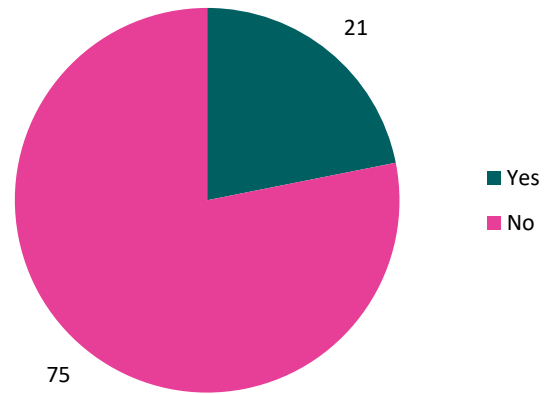
100 people answered this question, and all said 'Yes'.



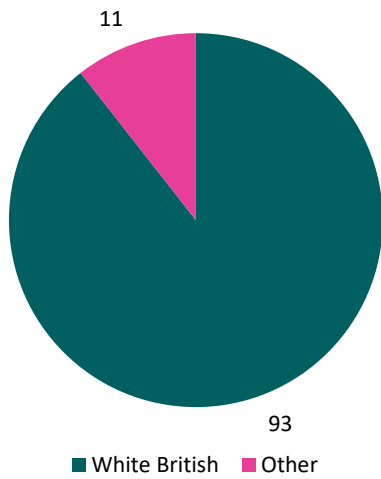
Are you a disabled person?



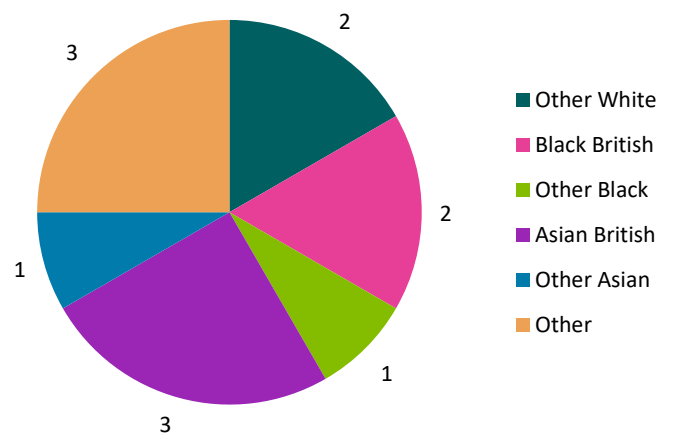
Are you an unpaid carer?



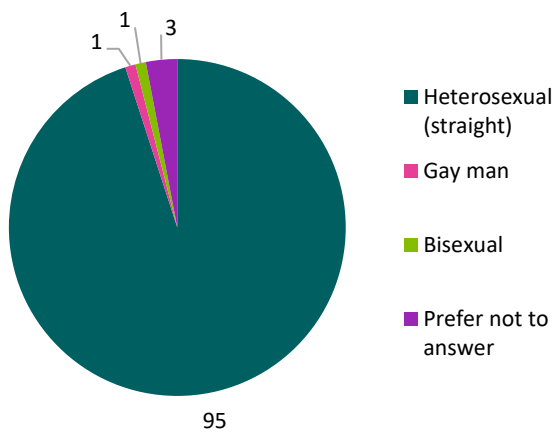
Ethnicity



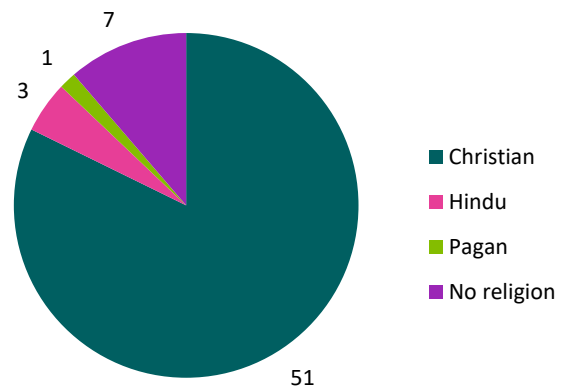
Ethnicity (not White British)



Sexual orientation



What is your religion, faith or belief



In the HWE survey, of the people who completed these questions, the demographics were:

Gender - 5 female

Age group - 25-49 (1), 50-54 (1), 65-79 (3)

Town - Ashton-under-Lyne, Denton, Hyde (including Hattersley), Manchester, Oldham

Disabled? - Yes (2), No (1), Prefer not to say (2)

Carer? - Yes (1), No (2), Prefer not to say (2)

Ethnicity - White British (4), Prefer not to say (1)

Sexual orientation - Heterosexual (3), Prefer not to say (1)

Religion - Christian (3), No religion (1), Prefer not to say (1)

Acknowledgements

Healthwatch Tameside would like to thank all the organisations and individuals who have shared our survey links with others. This includes statutory partners, community groups and charities, as well as members of the public and our volunteers.

Without your help, we would struggle to complete our projects.