

Healthwatch Leicestershire spend 12 hours in A&E

Patients' Experiences of Accident and
Emergency (A&E)

Foreword

University Hospitals of Leicester (UHL) Accident & Emergency (A&E) Department located at Leicester Royal Infirmary (LRI) has been under considerable pressure and has failed to consistently hit the Government set target to see and discharge 95% of patients within 4 hours.

We acknowledge UHL's commitment to addressing A&E performance and are encouraged by the recent improvements in which we hope will be maintained.

UHL and the three local Clinical Commissioning Groups (CCGs) have been working together to try to improve the situation for some time. Initiatives include introducing a new triage A&E reception point and the 'Choose Better' campaign.



On the 27 June 2014, a team of Healthwatch Leicestershire staff and volunteers spent 12 hours in A&E. We listened to 88 patients to understand why they had come and what they thought of the care and treatment they were receiving. As the independent health consumer champion in Leicestershire, our aim was to understand what matters most to people attending A&E from a patients' point of view and also see first hand why the A&E had been struggling to meet its target.

We discussed the initial findings of this report with John Adler, Chief Executive at UHL, at the quarterly members meeting on 9 July 2014. The full report is being shared with Leicestershire Members of Parliament, UHL, three local CCG's, East Midlands Ambulance Service, Leicestershire County Council, neighbouring Local Healthwatch and respective local authorities.

We look forward to working with all of these groups to continue to strive for an improvement in A&E performance in Leicestershire.

The patients stories are insightful and informative and we hope to revisit A&E in January 2015.

Gillian Adams
Vice Chair, Healthwatch Leicestershire

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Executive Summary

Overview

Healthwatch Leicestershire (HWL) spent 12 hours in the Adult and Children's A&E Departments at Leicester Royal Infirmary (LRI) on Friday 27 June 2014 from 8.30am to 8.30pm.

Our aim

Our aim was to understand patients' experiences and ensure their views are heard and acted upon in light of LRI consistently failing to meet the national target of 95% of patients seen and discharged within 4 hours. In the week we visited, 93.6% of patients were seen and discharged within 4 hours at LRI and 263 patients were not seen and discharged within 4 hours¹.

We spoke to 88 patients across the adult's and children's A&E Departments. Here are the findings from listening to patients' experiences:

1. Why patients come to A&E

- 42% of patients we spoke to came straight to A&E without seeking alternative care. These patients may have been better treated elsewhere. Reasons provided by patients for not seeking alternative help include long-term conditions or severity of injury.
- 58% of patients we spoke to had tried to get help elsewhere before coming to A&E from their GP, NHS 111 and NHS 999.
- Two out of five patients we spoke to attended A&E at least once in the previous 12 months.
- 5 patients felt they should not have come to A&E. Some of these patients indicated they would have preferred to see a GP if the option was available.

2. GP Access

GP access remains an ongoing issue for some patients. A small number of patients told us there were no appointments available at their GP, so they came straight to A&E. This causes a burden on A&E resources.

In total 60 patients told us the name of their GP practice, of which:

- 55% were from Leicester City Clinical Commissioning Group
- 23% were from West Leicestershire Clinical Commissioning Group
- 19% were from East Leicestershire & Rutland Clinical Commissioning Group
- 3% were registered at a GP practice out of the area.

¹ NHS England (2014) 'A&E weekly activity statistics, NHS and independent sector organisations in England', published 4 July 2014, available at: <http://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/weekly-ae-sitreps-2014-15/>

3. Positive experience in A&E

Patients spoke positively about their A&E experience. In particular:

- Patients had promptly seen a doctor or nurse at the point of triage
- Patients were provided with information that was clear and easy to understand
- Vast majority of patients were seen and discharged within the 4 hour target
- On the day we visited one patient was not seen and discharged within 4 hours, however they rated their experience as excellent

“Doctors, nurses and staff very professional and met my expectations of the NHS”



Recommendations

Based on our findings, Healthwatch Leicestershire offers five key recommendations:

1. Adequate resourcing and better promotion of alternative care pathways available to patients before accessing A&E. Whilst we found that more than half of patients are using more suitable care pathways before accessing A&E, more work needs to be done to promote alternative pathways and reduce the unwanted burden on A&E for those patients who may have been better treated elsewhere.
2. Better information. We suggest better promotion of the feedback and reporting systems available (these do not appear to be used by patients, yet would provide valuable feedback for UHL to act on) and better use of available wall space to promote the importance of ‘choosing better’ and when to access GP, Pharmacy, NHS 111 and 999 emergency services. In addition, the highly rated information should continue to be provided upon arrival as part of the wider strategies to promote positive patient experience.
3. More collaborative and integrated working between Urgent Care Centre (UCC) and A&E, for example reallocating resources or re-directing patients at peak times. We found communication and teamwork between UCC and A&E could be improved.
4. The existing strategies for access and inclusion should continue to be supported and enhanced further. This extends to disability access, more inclusive parking facilities and the support provided to assist with mobility across LRI.
5. Improved signage. We recommend reviewing the signage to UCC and the Adult A&E Department as it was potentially confusing to first time visitors.

This report will provide you with further details on the methodology, the findings and patient stories.

Introduction

Healthwatch Leicestershire (HWL) is the independent, influential consumer champion of health and social care in Leicestershire. HWL's role is to understand what matters most to people and use that information to influence providers and commissioners to change the ways services are designed and delivered.

Waiting times for Accident and Emergency (A&E) are key performance measures set out in the 'NHS England Improving A&E Performance' paper.²

Leicester Royal Infirmary (along with other A&E Departments in England) has an operational standard to ensure 95% of patients are being seen and discharged within 4 hours.

University Hospitals of Leicester (UHL) have not been consistent in meeting the target for more than three years. It is estimated that in the week ending 29 June 2014 only 93.6% of patients were seen and discharged within 4 hours. This equates to 263 patients.³

2 NHS England: Improving A&E Performance Gateway ref: 00062: <http://www.england.nhs.uk/wp-content/uploads/2013/05/ae-imp-plan.pdf>

3 NHS England (2014) 'A&E weekly activity statistics, NHS and independent sector organisations in England', published 4th July 2014, available at: <http://www.england.nhs.uk/statistics/statistical-work-areas/ae-waiting-times-and-activity/weekly-ae-sitreps-2014-15/>



12 hours in A&E on Friday 27 June

Healthwatch Leicestershire (HWL) spent 12 hours in the A&E Department at Leicester Royal Infirmary (LRI) to understand patients' experiences and gain their views on LRI's A&E Department. A team of HWL staff, volunteers and Board members listened to 88 people who visited Minors, Majors and Children's A&E on the 27 of June 2014 from 8.30am to 8.30pm.

In the majority of cases we spoke to the patients directly, but where this was not possible (e.g. Children's A&E) we spoke to their parents or carers. HWL tended to speak to patients after they had been triaged, and while they were waiting to be treated. HWL used a survey (Appendix 1) to gather data, and we also spent time listening to patients' experiences.

How patients access A&E:

- When patients arrive at LRI, they are directed to the Urgent Care Centre (UCC) (run by George Elliot Hospital) where they are triaged. Depending on the nature of their injuries, patients are either treated in UCC or sent to Minors.
- If patients are sent to A&E from their GP and have a GP letter, patients do not need to be triaged by UCC. They can go directly to A&E where they are treated.
- If patients arrive by ambulance, they go directly to A&E.
- Paediatric patients can either go UCC or direct to Children's A&E.



Overview

Methodology

The Healthwatch Leicestershire (HWL) survey was delivered in two parts, Part A and Part B. Part A was completed with the patient and gathered the majority of the data. Part B was left with the patient to complete when they at the end of their treatment when leaving A&E. This allowed HWL to track arrival and departure time.

88 patients completed Part A, this is what they told us:



2 in 5 patients tried to book a GP appointment before arriving at A&E



94%

Felt they should have come to A&E



86%

were given information that was clear and easy to understand upon arrival at A&E

40 patients completed Part B of the survey this is what they had to say:



38

patients rated their overall experience as either "good" or "excellent".



1

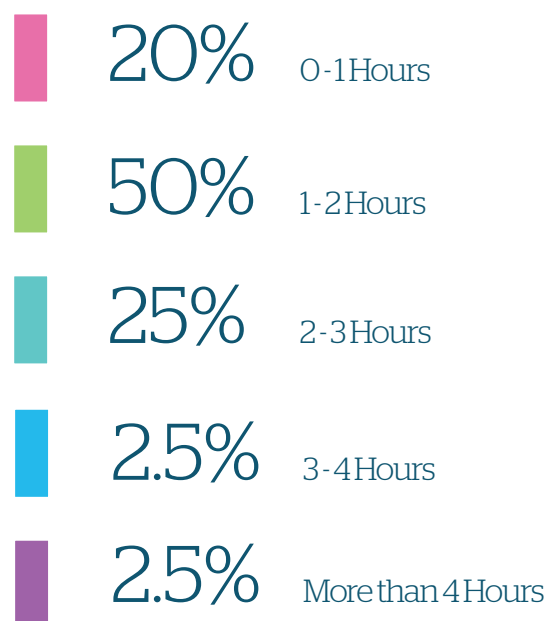
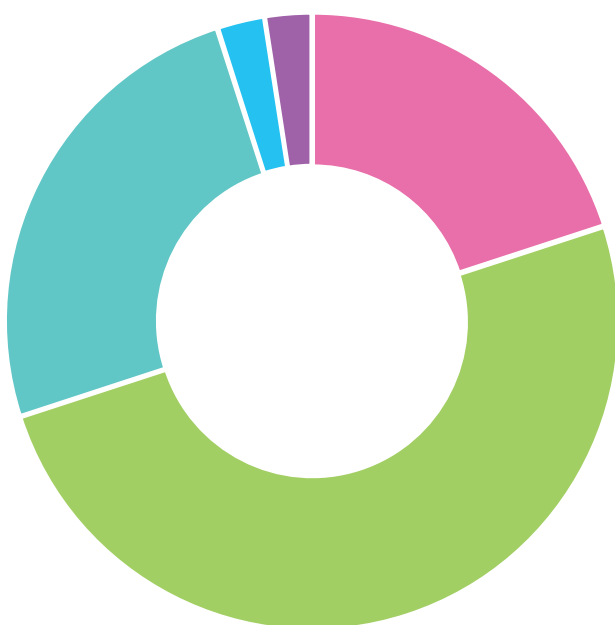
described their experience as "poor" (this patient was seen and treated within approximately 3 hours).

On a scale of 1 to 5, 1 meaning poor and 5 meaning excellent, patients rated their experience overall at an average of 4.39.

4.39



How long have you been waiting in A&E today?



1. Why patients come to A&E

We asked patients 'Did you try to get help anywhere else before you arrived at A&E?'

42% came straight to A&E without seeking help elsewhere

58% tried to seek help elsewhere

Of the patients that were successful in seeking help elsewhere, they were advised to come to A&E by:



21

a GP or Health Professional

999

4

999



4

NHS 111



3

a Walk in Centre / Urgent Care



2

a GP receptionist

3 people did not answer this question.

Patient Stories

LE4 - Leicester City CCG

A GP advised the patient to attend A&E after the patient's carer spoke to the GP on the phone. The patient did not think they should have gone to A&E and would have preferred to see their GP. The patient said it would have been helpful if the GP was able to assess the problem and prescribe painkillers. They found going by car and utilising the wheelchair at the hospital very difficult.

LE13 - East Leicestershire and Rutland CCG

Attempted to book an x-ray at a local GP practice but would have been required to wait for more than a week. Patient went to A&E by car to get an x-ray. Overall they had a very good experience.

LE5 - Leicester City CCG

The patient contacted their local GP but they had no facilities to stitch a finger so went to A&E by taxi service. The patient had also been to A&E in November 2013 and they waited 4 hours in A&E whilst bleeding so put in a complaint.

LE8 - East Leicestershire and Rutland CCG

The patient contacted the GP the night before (26 June) and an appointment could not be arranged until 7 July 2014. On the morning of the A&E visit, patient went straight to GP practice for a drop-in appointment and waited to see GP. GP advised patient to visit A&E and a taxi was arranged. Patient was happy with care at A&E.

LE2 - Leicester City CCG

A guardian took a child by car to the Children's A&E Department after attempting to contact NHS 111 and experiencing long waiting times whilst queuing on the phone. As it was the evening and the child was experiencing a 'bad' stomach ache, the guardian felt compelled to go to A&E as booking an appointment with the GP was not appropriate. Within an hour of arrival, a nurse assessed the child and spoke to the guardian, providing information that was clear and easy to understand.

LE5 - Leicester City CCG

Patient made contact with NHS 11 and a walk-in centre. They were advised to go to A&E. They travelled by bus to A&E from the LE5 area. Whilst at minor injuries, they felt the information on the next steps could have been more clear. Overall service from staff was reported to be very good although they experienced rude and abrupt behaviour from one administration staff member.

LE67 - West Leicestershire CCG

This was the patient's second visit to A&E in the last 12 months. In this case the patient called 999 and was brought to hospital in an Ambulance.

“If my GP could have looked at my injury and given me stitches, this would have been better than going to A&E.”

2. GP Access

We asked 60 patients in A&E to name their GP practice, of which:



55%

were registered with Leicester City CCG

Patients from Leicester City CCG and East Leicestershire and Rutland CCG were almost two times more likely to come straight to A&E than patients from West Leicestershire CCG.



23%

were registered with West Leicestershire CCG

“Rang GP, diabetic specialist nurse not available, so told to come in to A&E”



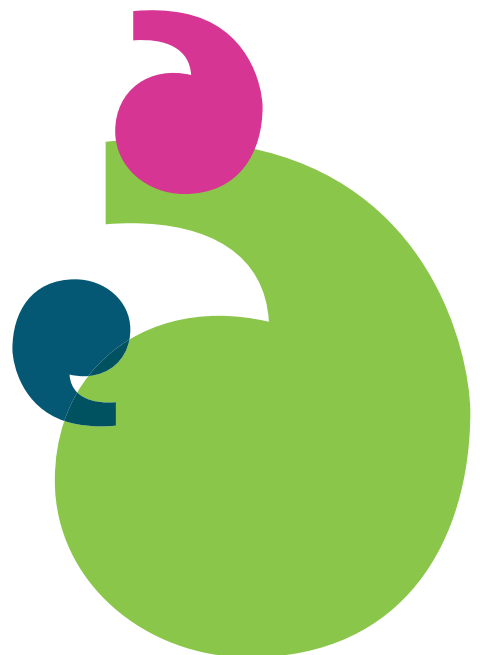
18%

were registered with East Leicestershire CCG



3%

were registered elsewhere



Patient Stories

Some patients were unable to get a GP appointment and therefore came straight to A&E, this is what they told us.

LE6 - West Leicestershire CCG

Patient arrived at A&E at 8am after being unable to book a GP appointment until the beginning of the following week.

LE5 - Leicester City CCG

The patients' last option was to come to A&E as they could not get an appointment with their GP. They said this was as an ongoing problem.

LE10 - West Leicestershire CCG

Contact was made with NHS 111 when unable to book a GP appointment. NHS contacted the Out Of Hours service who advised patient to visit A&E. Patient did not think they should have gone to A&E and would have preferred to visit the local GP (to stitch the injury) or a visit from the Out Of Hours service. The patient had to travel 12.5 miles to attend the nearest A&E department.

LE4 - Leicester City CCG

Patient first called their GP and was unable to obtain an appointment; then contacted the NHS 111 service who phoned an ambulance on the patient's behalf. Nurse advised A&E was the right place for the patient but the patient was not sure.

“Tried to book an appointment the day before” - LE6

“Phoned GP this morning - no appointments. Phoned NHS 111 who phoned an ambulance” - LE4

“I would have preferred to be seen by a GP” - LE4

3. Patients' Experience

Overwhelmingly the patients we spoke to had a positive experience in A&E.



86%

were given information that was clear and easy to understand

“Treated brilliantly, really helpful”

“Very quick, good clear advice”

“Excellent, very cheerful and helpful”

“Excellent high spirits, good feeling all around”

“All staff friendly while being treated”

“Treated very well by staff”



38/40

patients that completed Part B of the survey rated their experience very highly with stating the overall experience as “good” or “excellent”.

Patients that were not satisfied by their experience gave the following reasons:



14%

were **not** given information that was clear and easy to understand



1

rated their experience as 'poor'



1

describing their experience as 'average'.



3

people commented on car parking

Here is snapshot of what patients told us:

“Limited parking spaces”

“People who came in after me seemed to get seen before me. The waiting time seemed long, it was not an hour like it said it was.”

“Wait for car park too long as delays getting to A&E.”

“Urgent care centre - door not wheelchair friendly - no release”

“No help getting a wheelchair on arrival.”

Observations

Spending 12 hours in A&E not only gave us the opportunity to listen to patients about their experiences but also see how the service is provided. We have made the following observations:

In addition to understanding what people told us, we noted that:

- UCC & A&E have different staff and management teams, which may impact on patient experience.
- Throughout the day University Hospitals of Leicester (UHL) staff warmly greeted Healthwatch Leicestershire (HWL) staff, volunteers and Board members, and genuinely wanted to help. This positive experience is also reflected in the patients' feedback.
- The patient feedback computer was not used at all on the day. This could possibly be related to a patient's ability or enthusiasm to complete a survey assessment at the exit point.
- Finally, the signage was viewed as confusing for both visiting staff and patients. Often patients questioned whether or not they were waiting in the correct area and some cited difficulties finding respective departments upon arrival.

Next Steps

- HWL has shared its findings with John Adler, Chief Executive at UHL at the previous quarterly meeting on 9th July 2014, and has agreed to work with UHL and CCGs to help implement our recommendations.



Appendix 1 - Survey

Reference no:
healthwatch
Leicestershire

A&E Survey

We would like to ask you some questions today about your experience of how you arrived at Accident & Emergency, if you feel this is where you should be and how you have been treated since you arrived.

We would also like you to complete a short form after you have received treatment to let us know about your experience while in Accident & Emergency department. We are not asking you to divulge any medical or confidential information about your visit.

Healthwatch Leicestershire is the independent consumer champion created to gather and represent the views of the public. Healthwatch will play a role at both national and local level and we make sure that the views of the public and people who use services are taken into account.

1. Please tell us if it is you who is seeking help at A&E today?

 Yes No Prefer not to say

1a. If you answered 'No' to Q1, are you:

 Parent/ family member Partner/ Spouse Friend Prefer not to say

1b. Do you provide care or day to day support for the person you are with?

 Yes No Dont Know

2. Is this your first visit at A&E in the last 12 months?

 Yes No Dont Know

3. Did you try to book a GP appointment before you arrived?

 Yes No Dont Know

3a. Did you try to get help anywhere else before you arrived?

 Yes No Dont Know

3b. If you answered 'Yes' to Q3a, please tell us where:

4. Who told you to come to A&E?

- Came Straight here
 GP/Health Professional
 Called 999
 Called NHS 111 Service
 Out of Hours GP
 Other please specify:

A&E Survey

healthwatch
Leicestershire

5. How did you arrive at A&E?

- Ambulance
 By myself
 Friend/Family
 Carer
 Other please tell us how you got to A&E?

6. Do you think you should have come to A&E?

 Yes No Dont Know

6a. If you answered 'No' or 'Don't Know' please tell us why:

7. How long have you been waiting at A&E today?

- 0-1 hours
 1-2 hours
 2-3 hours
 3-4 hours
 More than 4 hours

8. Since you arrived at A&E, have you been given information that is clear and easy to understand?

 Yes No Dont Know

9. Have you seen a nurse or doctor since you arrived at A&E?

 Yes No Dont Know

10. To help us analyse these results and ensure the answers you have given help improve access to services, please could you tell us the following:

Your Postcode:

Your registered GP Practice:

Are you a resident of Leicestershire? Yes No

Further comments about your experience today:

Time completed:

Thank you for completing this survey

Appendix 2

People were forced to wait for more than 4 hours in Leicestershire (University of Hospitals of Leicester NHS Trust)

Longer than four hours waits:

All data refers to weeks ending 29 June 2014 unless otherwise specified.

A&E attendances > 4 hours from arrival to admission, transfer or discharge.

| Name | A&E attendees | | | | A&E attendees > 4 hours from arrival to admissions, transfer or discharge | | | | |
|--|---------------|---------------------------------------|--|---------|---|---------------------------------------|--|-------------------------------|-------------------------------|
| | | Type 2 Departments – Single Specialty | Type 3 Departments – Other A&E/Minor Injury Unit | All | Type 1 Departments – Major A&E | Type 2 Departments – Single Specialty | Type 3 Departments – Other A&E/Minor Injury Unit | Percentage in 4 hours or less | Percentage in 4 hours or less |
| England | 296,048 | 12,359 | 144,942 | 453,349 | 19,598 | 61 | 421 | 93.4% | 95.6% |
| University Hospitals Of Leicestershire NHS Trust | 2,487 | 376 | 1,242 | 4,105 | 251 | 0 | 12 | 89.9% | 93.6% |

Appendix 3 – List of GPs and CCGs

| List of GPs and health services where patients are registered | Clinical Commissioning Group | Number of patients we spoke to from practice or health service |
|---|-------------------------------------|--|
| Alpine House Surgery | West Leicestershire CCG | 1 |
| Castle Mead Medical Centre | West Leicestershire CCG | 1 |
| Charnwood Medical Group | West Leicestershire CCG | 1 |
| Desford Medical Centre | West Leicestershire CCG | 1 |
| Dr R W Lawrence & Partners – Whitwick Road Surgery | West Leicestershire CCG | 1 |
| Ibstock House Surgery (PMS) (dispensing practice) (Training Practice) | West Leicestershire CCG | 1 |
| Groby Surgery | West Leicestershire CCG | 3 |
| Heath Lane Surgery | West Leicestershire CCG | 1 |
| Hugglescote Surgery | West Leicestershire CCG | 1 |
| Orchard Medical Practice | West Leicestershire CCG | 1 |
| Ratby Surgery | West Leicestershire CCG | 1 |
| Station View Health Centre | West Leicestershire CCG | 1 |
| Maidstone Kent | Other | 1 |
| Oxford, Oxfordshire | Other | 1 |
| Bowling Green Street Surgery | Leicester City CCG | 1 |
| Brandon Street Surgery | Leicester City CCG | 1 |
| Downing Drive Surgery | Leicester City CCG | 2 |
| Highfields Medical Centre | Leicester City CCG | 2 |
| Saffron Group Practice (Saffron Lane) | Leicester City CCG | 5 |
| Pasely Road Health Centre | Leicester City CCG | 1 |
| Groby Road Medical Centre | Leicester City CCG | 2 |
| Hedges Medical Practice | Leicester City CCG | 1 |
| Hockley Farm Medical Practice | Leicester City CCG | 2 |
| Humberstone Medical Centre | Leicester City CCG | 2 |
| Oakmeadow Surgery | Leicester City CCG | 2 |
| Petworth Drive Surgery | Leicester City CCG | 1 |
| Queens Road Medical Centre | Leicester City CCG | 2 |
| Rushey Mead Medical Centre | Leicester City CCG | 2 |
| Spinney Hill Medical Centre | Leicester City CCG | 3 |
| Springfield Medical Centre | Leicester City CCG | 1 |
| St Matthews Health & Community Centre | Leicester City CCG | 1 |
| Merlyn Vaz Health & Social Care Centre | Leicester City CCG | 1 |
| The Practice Asquith | Leicester City CCG | 1 |
| Bushloe End Surgery | East Leicestershire and Rutland CCG | 1 |
| The Croft Medical Centre | East Leicestershire and Rutland CCG | 1 |
| Dr Kilpatrick & Partners | East Leicestershire and Rutland CCG | 1 |
| The Forest House Medical Centre | East Leicestershire and Rutland CCG | 1 |
| Glenfield Surgery | East Leicestershire and Rutland CCG | 1 |
| Kibworth Health Centre | East Leicestershire and Rutland CCG | 1 |
| Latham House Medical Practice | East Leicestershire and Rutland CCG | 2 |
| The Limes Medical Centre | East Leicestershire and Rutland CCG | 1 |
| Northfield Medical Centre | East Leicestershire and Rutland CCG | 2 |



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