

Communication Survey 2016: Walsall Manor Hospital Accident and Emergency Department

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Introduction

Healthwatch Walsall is an independent consumer champion created to gather and represent the views of the public. Healthwatch plays a role at both national and local level and makes sure that the views of the public and people who use services are taken into account.

At a local level, Healthwatch Walsall works to help people get the best out of the health and social care services in their area; whether it's improving them today or helping to shape them for tomorrow. Local Healthwatch is all about local voices being able to influence the delivery and design of their services – not just people for who use them, but for anyone who might need them in the future.

Summary

The Accident and Emergency (A&E) Workstream of Healthwatch Walsall carried out a survey in the Accident and Emergency Department of Walsall Manor Hospital during May 2016. This report is based on the 79 responses received from people who had used A&E services.

There is a shared waiting room at the Manor Hospital for A&E and the GP led Urgent Care Centre and 20% of respondents to the survey said that they did not know which reception to go to when they first arrived. It was also observed that a number of people were re-directed between the two reception areas when they arrived at the department.

Long waiting times were a key area of concern for respondents and there were a range of comments in relation to it. Although most people said that they had been kept informed about waiting times a number of people felt that there was a lack of communication with them about waiting times and reasons for delays.

Communication in general was commented on and some of it centred on being kept informed about waiting times but there was also comment about the lack of availability of interpreters as well as a need to be more responsive to individual need where patients had communication difficulties such as hearing loss or memory problems. There was comment about a lack of communication between different medical staff and how that was dealt with by staff at the hospital to ensure that the patient was not disadvantaged by the lack of shared information. Some respondents also raised concerns about medical staff not listening to them although the majority of respondents did feel that they were listened to by the staff in the department.

Most respondents felt that they had been treated with dignity and respect whilst they were in A&E and that there was enough privacy at reception. However, there were a number of comments about ensuring that patients were given enough privacy in cubicles and making sure that staff observed basic privacy measures such as closing curtains and doors. Additionally there could be issues with staff availability to assist people with personal care whilst in the department that could cause a loss of dignity for vulnerable patients.

Although people raised issues with the length of time that they had to wait to be seen generally people were happy with the quality of care that they received and there were a number of

positive comments about the way that they were treated whilst they were in the department and the attitudes of the staff that they encountered.

Background

In response to issues raised with Healthwatch Walsall (HWW) by members of the public, members of the A&E Workstream visited the Accident and Emergency department at Walsall Manor hospital in August 2015. This visit was supplemented by additional information received in response to queries submitted to the Trust and this enabled members of the Workstream to gain an understanding of how the department operated prior to carrying out the A&E survey.

Walsall Healthcare Trust (the Trust) was inspected by the Care Quality Commission in September 2015 and the subsequent report published in January 2016, rated the Trust as 'inadequate' overall and the Chief Inspector of Hospitals recommended that the Trust should be placed into special measures.

The inspection found that the Trust needed to make urgent improvements to ensure it was consistently delivering care which was safe, effective, caring, responsive to people's needs and was well led. The inspectors had concerns about staffing in a number of areas and workloads in A&E were seen to have resulted in care falling below the standards patients should be able to expect. Following the inspection, the CQC gave notice to the Trust to make significant improvement in a number of areas including emergency care. The Trust responded by setting out a detailed plan for remedial action.

HWW has seen the improvement plans for A&E and notes that there are already plans to address some of the issues covered by this survey e.g. the layout of the reception area.

As the CQC has inspected the A&E department in depth, Healthwatch Walsall decided to focus on 'softer' aspects of the patient experience, in particular communication whilst the patient was in the waiting area and the patient's overall experience of how they were treated during the patient journey in A&E.

Methodology

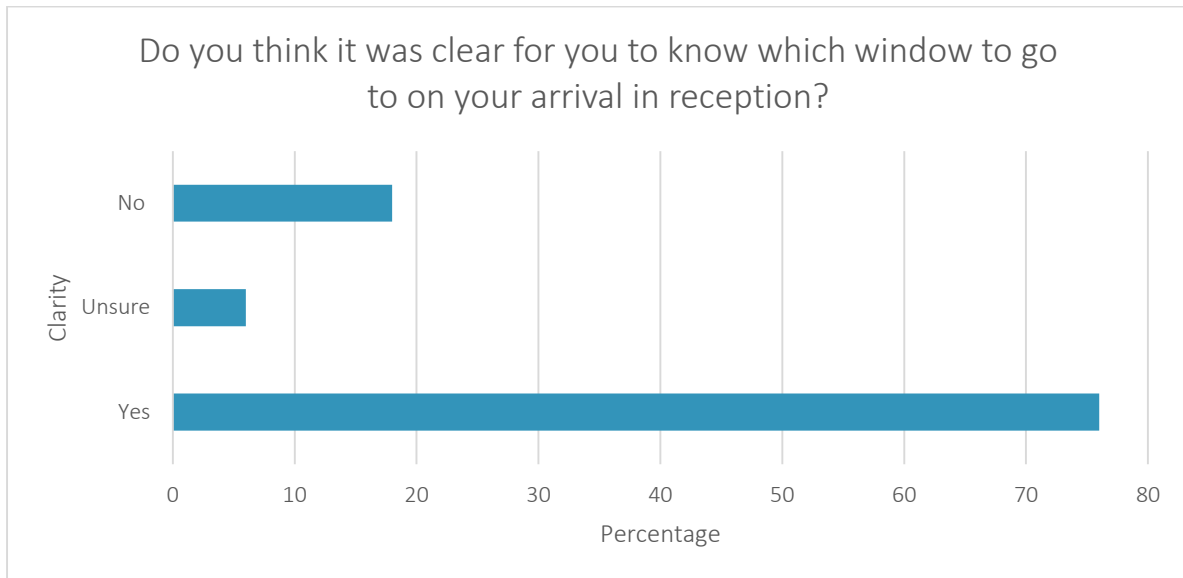
Over a two week period in mid- May 2016 staff and assembly members from HWW attended the Trust's A&E department to give the survey to patients waiting their turn to be seen in the waiting area. All days of the week and all time periods from 8am to 9pm were covered at some point during the two week period. A large number of patients attend by ambulance and the views of these patients are not included in this survey.

At the Walsall Manor Hospital, a GP run Urgent Care Centre is co-located with the A&E Department; the two reception desks are adjacent to each other and colour coded waiting areas are used to differentiate patients waiting for each service within the same waiting room. The Healthwatch Survey was given out to people waiting to be seen by the A&E department. Reply paid envelopes were provided and whilst some people completed the survey as they waited in the department, the majority were posted back, enabling patients to reflect on the whole A&E experience.

Findings

Waiting area

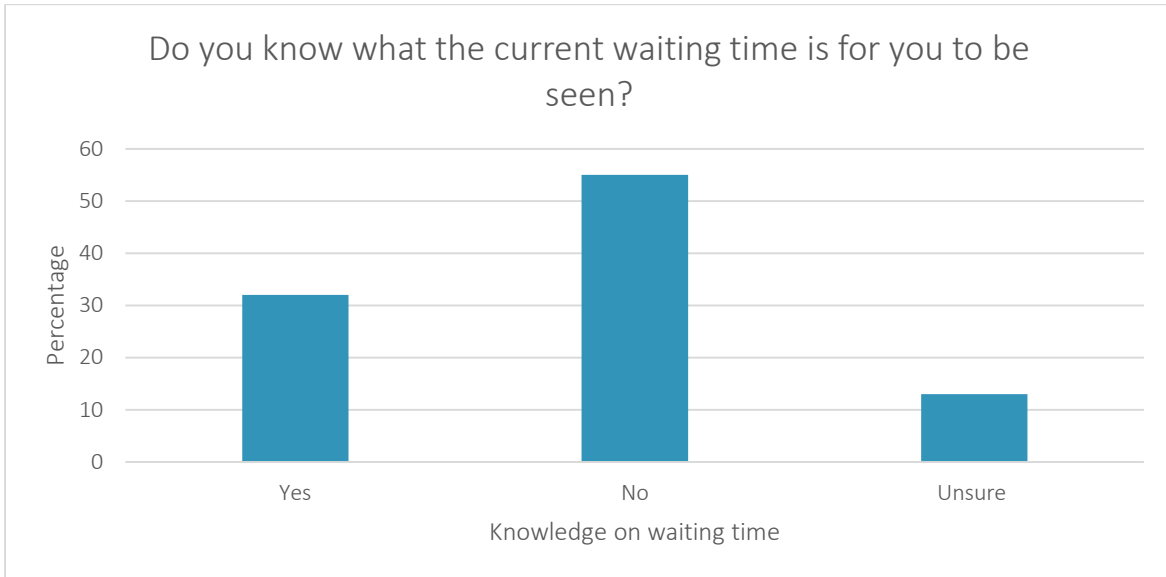
Almost a fifth of patients reported that they were not sure or did not know which reception window to go to.



The co-location of the Urgent Care Centre and the A&E Department, and the use of adjacent receptions, does present some patients with a confused picture at the outset. On entering the department, the urgent Care reception is the one directly in the patient's view and, although it is clearly indicated, some patients may not be clear about the distinction between the two services. HWW observed a number of patients being referred from one window to the other. This may create a sense of disorganisation for some patients and reduce their overall confidence in services received.

Waiting times

There appears to be a lack of clarity around the expected waiting time before being seen. Only a third of respondents reported that they knew how long they would have to wait to be seen and only a similar proportion had been kept informed.



There is a waiting time banner which scrolls on a TV screen in the waiting area but the TV is not always switched on, the banner is small and difficult to read and it takes time for it to scroll round due to other information being displayed.

Waiting times and communication issues were linked with some of the comments received and although there was one positive comment about waiting times with the respondent saying that 'staff were pleasant, kind and concerned over my lengthy wait' most comments were negative. One commented that once they had booked in at reception 'no-one communicates with you... [they] don't tell you anything.' Another commented that they had not been kept informed and referring back to issues with the waiting area reported that they had been 'kept waiting for a long amount of time in different parts of the hospital, firstly in Urgent Care and then in A&E.'

It is clear from comments received that there are varied opinions regarding waiting times which are affecting some patients' experience. Some comments referred to lengthy waiting times without patients being kept informed of progress and one told of being in the department with their small child and seeing people who had arrived after them being seen first, 'so I went to the receptionist and asked how long do I need to wait? After 20 minutes we were seen by a doctor. I am not sure how long I'd have waited if I had not asked the receptionist.' This may well leave patients feeling devalued and adds to the sense of disorganisation in the service. However, one respondent told that they had 'to wait a long time to see a doctor but every time I asked it was explained what the delay was.' Whilst this

respondent was happy to keep asking it may have been a better service if there had been regular updates without them having to ask.

Keeping people informed of how long they might expect to wait would help to alleviate some of the negative feedback about the department, this was illustrated by one respondent saying that ‘informing us would have helped us know what to expect...the actual care when we got it was excellent.’

Communication

62% of respondents reported that staff communicated well with them whilst they were waiting to be seen.



Some respondents gave examples of overall positive communication during their visit to A&E. These related particularly to their clinical experience with one respondent saying that staff ‘showed me X-rays and explained everything’ and another saying that there was ‘very good communication during clinical discussion.’

There was some negative feedback about communication with one respondent telling how they had ‘to come with my own interpreter because when I asked to have one, twice I was refused- they said I would manage.’ The lack of an interpreter could mean that vital information is missed that could affect the diagnosis and subsequent treatment if needed.

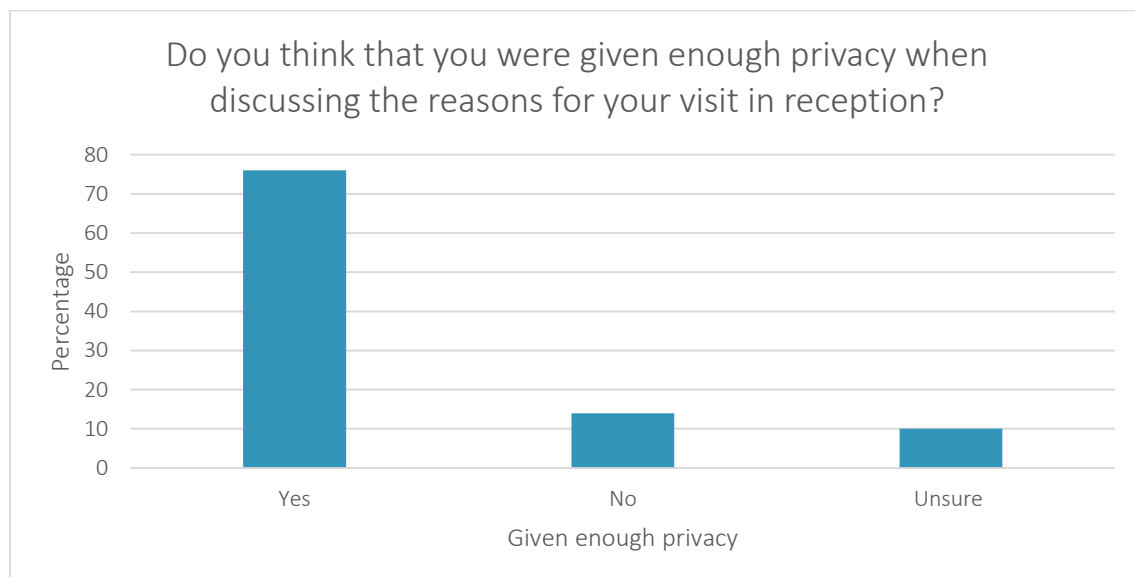
Another respondent raised issues with information between different medics when a 'triage nurse on duty...was rolling her eyes and complained that insufficient information had been sent by the GP- not my issue, I am the patient who is in pain and upset.'

Most people (79%) felt that they had been listened to by staff during their visit and one respondent commented that staff had 'listened and answered questions.' However, one respondent commented that a doctor had 'tended to talk over me, not giving me time to answer or put my point forward.'

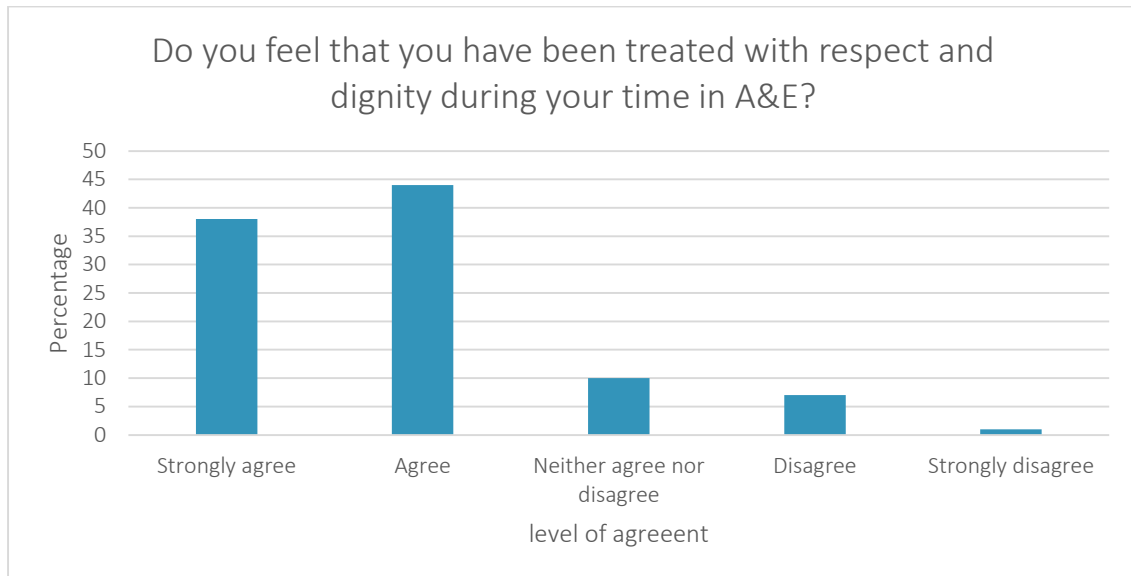
Another respondent told how when they had taken their mother to A&E staff had been slow to realise her communication needs because she was 'hard of hearing...[had] memory problems [and] needed more time.' They suggested that there was a need to 'proactively think about modifying their communication style to ensure every patient including the very vulnerable are fully involved in the process.'

Dignity and Respect

76% of respondents reported that they were given sufficient privacy in reception when discussing the reason for their visit.



82% of respondents said that they had been treated with dignity and respect whilst they were in A&E.



However, privacy and dignity concerns were apparent in several of the comments received. One respondent told how when they were changing into a hospital gown ‘they only shut the curtain and then someone walked into the cubicle when I was naked.’ The same respondent then told that when the doctor had told them that they could go home the doctor ‘walked out and left the door open. I had to get off the bed half naked and shut the door. As well as the intrusion when in cubicles, another respondent told how ‘having to wait in a gown in a general outpatient’s area waiting for an x-ray, felt exposed and uncomfortable.’

For another respondent told of their experience when there was a lack of staff available and they had ‘a pad on that was full...asked the nurse to change it but she was on her own and I didn’t have spare pants. My daughter had to help roll me over which was not dignified.’ It is not clear why it was not possible for the nurse to get someone to assist her to help the respondent with personal care and maintain their dignity.

Respect and dignity are key factors in healthcare settings and their absence can cause distress to patients.

Standard of care

Although many respondents spoke about the length of time that they had been waiting to be seen several of them also followed this up with positive comments about their treatment once they were seen. Respondents used words like 'excellent' and described the staff as 'faultless'.

However, one respondent did comment that they had experienced a lack of care from staff prior to seeing a doctor saying that 'the lady behind reception and the nurse knew I was unable to sit on the chairs in A&E...but did not offer me any other option and left me stood there for 3hours and 30 minutes.'

Conclusions

This report is based upon 79 responses from members of the public who had used A&E services at Walsall Manor Hospital in May 2016. There were a number of key themes identified from the feedback that offer opportunities for improvement and learning.

The waiting area for A&E is shared with the Urgent Care Centre and for some respondents this was a cause of confusion with people being re-directed to different reception desks from those that they initially approached.

Waiting times were a key area for comment with the length of waits being mentioned by a high number of respondents. Being kept informed of waiting times was an area of concern for some but a relatively high number of respondents were happy with the level of information that they received. For those that commented there was a general feeling that there wasn't enough information and that their wait in A&E would have been better if they had been kept informed of progress.

Communication with patients and between medics were commented on although respondents generally felt that they had been communicated with well by staff. However, there were some comments about the need for interpretation services and also tailoring communication to the needs of the patient to ensure that vulnerable patients were properly involved in their treatment.

Although most respondents agreed that they had been treated with dignity and respect there were some comments about the need to protect patient privacy more particularly in relation to hospital gowns, and people being able to change without being exposed when doors or curtains were not closed. Being able to maintain personal care was also pinpointed as an area for concern with there not being staff to assist patients with personal care.

The standard of care was generally seen as being very good and words such as excellent were used. However, they were often prefaced with comment about waiting times and this suggests that waiting times have a negative impact on the overall sentiment about A&E services.

Recommendations

Healthwatch Walsall recognises the pressure that the Trust is working under. The Accident and Emergency Department is currently dealing with significantly more patients than it was designed for. There are examples of good practice where patients reported being pleased with the staff response and the treatment received and these are to be commended. However, some of the adverse issues flagged up by patients in this survey are fairly basic and should be respected.

- **Waiting times-** ways of communicating better with patients in the waiting area should be considered to update them about the length of time they will be waiting. This includes making sure that information screens are working. It is appreciated that individually updating people in the waiting room is not possible but giving them an indicative waiting time when they register at reception may be a possibility. The TV needs to be on at all times with a dedicated banner running across the bottom of the screen at all times or a separate digital information screen running continually.
- **Interpretation services-** consideration should be given to how to ensure that interpretation services can be more accessible for patients whose first language is not English.
- **Communication needs assessments-** ensure that individual communication needs are assessed and acted upon to ensure that vulnerable patients are able to be properly involved in their treatment.
- **Dignity and respect-** it is acknowledged that the department is short of space, however, staff should be reminded of the need to treat patients with dignity at all times including shutting cubicle doors and ensuring that there are enough staff available to assist with personal care tasks.
- **Appropriate clothing-** The practice of making patients wear hospital gowns whilst waiting in general areas where other patients are fully dressed should be reviewed so that patients are not left feeling vulnerable.
- **Customer care-** whilst there are many positive comments about staff, the negative attitude of some staff should be addressed. Customer care training, including refresher courses should be mandatory for all staff dealing with patients, and managers should monitor and address any issues of poor attitude which impact on patient care.
- **Combining reception –** consideration ought to be given to combining the two receptions for urgent care and A&E so that trained receptionists can direct patients to the appropriate service rather than patients having to make that distinction themselves. This would reduce the amount of complaints arising from being passed from one window to another and having to repeat all your information and make sure people are dealt with in a timely manner.

Appendix 1

Communications Survey for Walsall Manor Accident and Emergency

Date / Time: _____

About you

Gender Male Female

Age Under 12 12-17 years 18-24 years 25-34 years 35-44 years
45-54 years 55-64 years 65-74 years 75 years or over

Status Please tick whichever of the following best applies to your current situation:

WORKING RETIRED UNEMPLOYED HOMEMAKER BENEFITS

Ethnicity

White

Asian / British Asian

Black/African/Caribbean/Black British

Mixed / multiple ethnic group

Other ethnic group

Disability

Do you consider yourself to have a disability? Yes No

Postcode / **Name (optional)**

The personal details you provide will not be passed on to any third party or be used for any purpose other than gathering data about this survey by Healthwatch Walsall. The information provided will be held in accordance with the provisions of the Data Protection Act 1998. The monitoring information will be used to show how effective Healthwatch Walsall is in reaching out to all communities in Walsall.

For office use only: Initials:

Date logged:

1. Do you think it was clear for you to know which window to go to on your arrival in reception?

Yes No Unsure

2. Do you think you were given enough privacy when discussing the reason for your visit in reception?

Yes No Unsure

3. Do you know what the current waiting time is for you to be seen?

Yes No Unsure

4. During your visit do you think you have been kept informed of any delays for you to be seen?

Yes No Unsure

5. Since you have been here has anyone explained to you what will happen?

Yes No Unsure

6. Would you feel comfortable to ask any questions of hospital staff while you are waiting?

Yes No Unsure

7. Do you know where/how to get a hot or cold drink while you are waiting to be seen?

Yes No Unsure

8. Do you feel that you have been treated with respect and dignity during your time in A& E?

Strongly Agree Agree Neither Agree nor Disagree
Disagree Strongly Disagree

Please add any comments you wish to make....

9. Do you feel that staff have communicated well with you while you were waiting to be seen?

Strongly Agree Agree Neither Agree nor Disagree
Disagree Strongly Disagree

Please add any comments you wish to make....

10. Do you think you have been listened to by staff during your visit today?

Strongly Agree Agree Neither Agree nor Disagree
Disagree Strongly Disagree

Please add any comments you wish to make....

Please add any other comments/feedback about the service you received today.....

Thank you for your time today

The results of this survey will be published on our website at
www.healthwatchwalsall.co.uk

Appendix 2

Staff

Appendix 2

Positive comments

"I think staff are doing their upmost best" [1]

"Friendly staff and doctors" [2]

"Appeared pleasant" [6]

"Questionnaire completed prior to assessment in department. However, they do a fantastic job" [7]

"The staff here have been very helpful to me and explained what I needed to know" [9]

"The staff are kind, helpful and knowledgeable" [42]

"Filled in by patient's parent- patient aged 2. Staff all friendly and professional" [53]

"Cannot fault A&E. Great staff. I have not got anything bad to say" [54]

"Really nice, really good" [55]

Negative comments

"Some reception staff rude. Go to one reception window and get sent to another. A&E car park too far away unless disabled" [38]

"Staff not friendly, not all staff but majority" [61]

"Receptionist was not friendly, as in smiling. Generally staff were polite except the doctor who looked me up and down and laughed at my comment about exercise (I'd hurt my foot) and said he doubted I did much physical activity or sport (based on my size)" [62]

Waiting times

Positive comments

"Staff were pleasant, kind and concerned over my lengthy wait. Although I spent 3 hours in A&E and 4 hours in urgent care, the standard of treatment has been very good." [4]

Negative comments

"I was sent to the wrong department that put two hours extra on my visit" [16]

"They did not come back to inform us how long more we would have to wait" [42]

"The waiting time is too long" [52]

"Absolutely disgusting service. They got me mixed up with someone else. I waited 3 hours before I had to get up myself and walk into the office as they had not called me in" [60]

"....could have been treated quicker" [71]

"I have been to emergency with my 13 month old daughter. She had a very high temperature (39.5) we had to wait about 3 hours. We came to the hospital at 7pm and we got back home at 11:30pm. After 2 hours waiting I noticed that people who came later than me were seen by doctors before us, so I went to the receptionist and asked how long do I need to wait. After 20 minutes we were seen by a doctor. I am not sure how long did I need to wait if I would not have asked the receptionist." [74]

Communication

Positive comments

"I was greeted nicely and booked in efficiently" [7]

"A&E was very busy and I had to wait a long time to see a doctor, but every time I asked it was explained what the delay was" [32]

"Showed me X-rays, explained everything" [33]

"Very good communication during clinical discussions" [42]

"The Dr knew where I was waiting, however he did not communicate with me. However, a nurse who was not involved in my care kept asking the Dr for me" [70]

"Kept us informed on what was happening" [71]

Negative comments

"No speak to you" [5]

"Just wait for my turn" [6]

"Very poor communication during my visit" [16]

"Went to Urgent Care who told me to wait in A&E seats, but got here at 11.20am, but was not booked in, so I sat waiting until my husband asked why so long at 3pm" [18]

"I was there for 3hours 30minutes and no one told me anything whilst I was waiting" [19]

"Unhappy with initial attitude of triage nurse on duty who was rolling her eyes and complain that insufficient information had been sent by the GP- not my issue, I am the patient who is in pain and upset" [20]

"During my visit to the hospital today, I feel I was not kept informed of what was going on. I was kept waiting for a long amount of time in different parts of the hospital firstly in Urgent Care then in A&E on a bed in a room with two other patients in this time

not one person spoke to us in a good 3 hours. It was only when my partner asked what was happening that things started to get done. I was taken to a ward still unaware of what was going on. After a while I was told I had to wait for a doctor to assess me. Myself and my partner waiting for nearly 5 hours and the doctor didn't come resulting in us being at the hospital around 15 hours with no answers of what was wrong at this point, I discharged myself because I had waiting long enough. I was tired and fed up and hungry. I am utterly dissatisfied with the service I received" [21]

"Not enough doctors. No one communicates to you once you book in reception. Don't tell you anything" [26]

"Very little communication about processes e.g. you will wait 'X' long or coming back to say 'I'm sorry, but you will be seen in 'X' time" [42]

"They didn't speak to me" [62]

"I had to come with my interpreter because when I asked to have one, twice I was refused- they said I would manage" [77]

Neutral comments

"Only contact was with reception until I was called in" [38]

"There was no communication whilst I was waiting, but my injury was not severe and I was quite calm, not needing comfort" [39]

"Only one nurse has spoken to me" [60]

Listened to by staff / staff attitude

Positive comments

"A&E Dr very thorough and attentive as were A&E nurses. Very approachable and friendly. Radiographer's very friendly, giving good explanation of procedures" [20]

"Although busy they made time to speak to me" [32]

"Listened and answered questions" [33]

"Nurse and X-ray specialist were friendly" [62].

"Staff was very efficient and friendly, especially the doctor who treated my 81 year old mother" [71]

Negative comments

"When seen eventually staff very good but no apology over the mix up which was their fault" [18]

"Polish/ Eastern European doctor in A&E tended to talk over me, not giving me time to answer or put my point forward" [22]

"Staff very helpful, but it took all staff a minute to realise our mom was a) hard of hearing, b) memory problems. C) needed more time. I think they should proactively think about modifying their communication style to ensure every patient including the very vulnerable are fully involved in the process. Get a speech therapist to assess the environment and make recommendations" [42]

"Nobody has told me what's happening with my granddaughter" [63]

"One doctor did not want to look at photos of what the illness looked like a few days before, and she was not very helpful or nice." [77]

Respect and Dignity

Positive comments

"When I saw the doctor I was in a private room" [33]

Negative comments

"Privacy when getting changed into a robe. They only shut the curtain and then someone walked into the cubicle when I was naked. After I was told I could go home by the surgeon. He walked out and left the door open. I had to get off the bed half naked and shut the door" [19]

"Did not like having to wait in theatre gown in a general outpatient's area whilst waiting for an x-ray, felt exposed and uncomfortable" [20]

"Has a pad on that was full and asked the nurse to change it, but she was on her own and I didn't have spare pants. My daughter had to help roll me over which was not dignified" [32]

Overall A&E experience and treatment received

Positive comments

"Although I spent 3 hours in A&E and 4 hours in urgent care, the standard of treatment has been very good" [4]

".....treatment staff were faultless" [18]

"My husband was admitted with Pneumonia. The attention he received was excellent" [29]

"I was very impressed with the service I received. I saw a doctor in 2hours" [33]

"I found the experience to be quite pleasant, was dealt with and treated quickly" [45]

“Considering how busy the hospital is I was treated as an individual” [50]

“Very pleased with the treatment my mom received” ...[71]

Negative comments

“Several times I was told conflicting information by the doctors I saw” [16]

“Would probably go to New Cross in the future, as better communication and waiting times” [18]

“I had been referred as an emergency by my GP. We already knew what the problem was and until I spoke with the surgeon everyone treated me like I had nothing wrong. The lady behind reception and the nurse knew I was unable to sit on the chairs in A&E due to a problem below, but did not offer me any other option and left me stood there for 3hours and 30minutes” [19]

“Initially I felt upset and frustrated with triage nurses attitude and felt it unprofessional to discuss/complain about GP referring me. I was in a lot of pain and was upset by this. Following on from this all staff were friendly and helpful and all care

and treatment beneficial. Seen and treated in 4hours 30minutes” [20]

“I stood outside the treatment A&E cubicle for 2-3minutes and all staff avoided making eye contact with me. We had been waiting over an hour by this time. I had to interrupt someone to ask how long it would be before we were seen. It looked busy but informing us would have helped us to know what to expect. It looked like things could have been organised more efficiently. But the actual care when we got it was excellent” [42]

“It was horrible. Both of my lips had horrible wounds. I waited 3hours - nobody helped me. I had to storm into the office” [60]

“Overall experience not very good due to lack of information during the waiting between departments. Initial assessment was good” [64]

Other comments

“Came by ambulance so I didn't go through reception” [50]