

Urgent or primary care

- Why Urgent Care? Are people in the right place at the right time?

November 2018

Please note that this report relates to findings observed and contributed by members of the public in relation to the specific project as set out in the methodology section of the report.

Our report is not a representative portrayal of the experiences of all service users and staff, only an analysis of what was contributed by members of the public, service users, patients and staff within the project context as described.

This report is based on conversations or responses freely given by members of the public. Where possible quotations are used to illustrate individual or collectively important experiences.

Engagement officers collect responses verbatim and we also present these in our final report as an appendix. This is important in showing the accuracy of our analysis, and so that further work can be done by anyone wishing to do so.

A full explanation of the guiding principles and framework for how we do engagement and analysis can be found online on our website www.healthwatchwiganandleigh.co.uk.

- Transforming Primary Care was considered a high priority for Healthwatch Wigan and Leigh in our priority setting process. Work is ongoing in the Borough to change the way that services are delivered. This means that GPs will be more involved in the delivery of services, in an integrated way, and led by Primary Care. Primary Care will need to more closely integrate their service delivery with nursing, therapy, social care, and third sector providers.
- There is no shortage of information around urgent care services not being able to cope with the demand and the amount of patients accessing services through A&E and Walk-in centres. Yet, there has been huge effort and promotion by the system to create opportunities to access Primary Care outside of 'normal' GP hours.
- In Wigan, there is evidence from key partners, CCG, Wrightington Wigan and Leigh, to show a rise in people accessing Urgent Care; particularly at peak times such as weekends and public holidays. Healthwatch Wigan and Leigh are interested to speak to people to understand their choices when seeking care.
- It would seem that there is a particular increase in attendance around bank holidays and this could be in some part related to the fact that until recently the extended hours service was not commissioned over a bank holiday.
- This project will inform the work of Healthier Wigan Partnership, Wigan Borough Clinical Commissioning Group, and Wrightington Wigan and Leigh management.

- Most people that we spoke to had been triaged, or were waiting for triage.
- A majority of people were in A&E due to some kind of injury.
- We asked if people had contacted anyone before attending A&E; the responses were evenly split between GP, another service, and none.
- Roughly half of people thought there was no alternative to them being present at the site we saw them, with the other half roughly believing there was an alternative.
- We also investigated some more specific questions on what people thought of the site they visited and collected general comments on healthcare.
- It was unclear if GP closures at weekends or bank holidays were having a significant effect on A&E attendance, however we did gather four comments specifically related to this issue.

Methodology

Summary of where we met people in this study...

...we gathered 356 comments.

Waiting area	Responses
Children's A&E	3
Main A&E waiting area (Majors 2)	27
Primary Care Centre	20
Leigh Walk-in Centre	19
TOTAL	69

WAITING ROOM



How we carried out the research

- Face to face semi structured interviews with people attending the services shown above over 5 half day sessions in August and September 2018, including one session on the August Bank Holiday Monday.

What we asked people?

- What were the deciding factors that led to the patient attending A&E or the Walk-in Centre?
- What do people know and understand about 'out of hours', 'extended hours', and 111 services?
- Particularly at weekends and bank holidays is there a lack of knowledge of, or difficulty accessing other services, a factor for people in deciding to use A&E/Walk-in services?
- Services will be asked if they wish Healthwatch to ask a particular question on their behalf.
- Demographic information will not be collected at each event due to the nature of the engagement.

The questions

1. What has brought you here today?
2. Which services have you contacted before arriving here?
3. Were you directed here by a clinician or did you make the decision to come? Can you think of an alternative to the care you will receive?
4. Comments about your/family members care – prompt for waiting times, transport, environment, food and drink, information needs, communication.
5. Question to be determined by Wrightington Wigan and Leigh staff – Do you know who you will be seeing next or what's going to happen next?
6. Any other comments about your care?

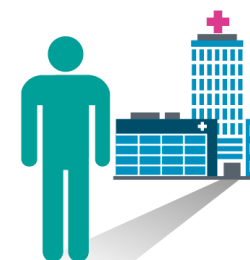
Analysis

Triage?	Responses
Yes	39
Other	16
TOTAL	55

**Within 'other' – 14 people awaiting triage, 2 awaiting going to the next stage.*

Issue	Response
Injury	35
Post treatment	8
Concern over condition	7
Child unwell	6
Pain	6
Skin related	4
Infection	2
TOTAL	68

When we spoke to them, most people had already been triaged. Of those remaining, almost all were waiting to be triaged.



A variety of reasons for attending urgent care were given. A large proportion (35) of the total (68) had some kind of injury.

Within those we met, a small number were returning having already had treatment.

Contacted service	Responses
GP surgery	23
None	22
NHS 111	7
Walk-in centre	4
Hospital	2
Pharmacist	2
A&E	1
District nurse	1
Emergency dental	1
Physiotherapist	1
TOTAL	64

Two thirds of the people we spoke to had contacted another health site or health professional before attending at A and E the walk-in centre or the primary care centre

GP - 36%

In this study just over one third of people had contacted their GP before arrival at the urgent care sites visited.

Other avenues - 30%

About one third had contacted another service (other than their GP) before deciding to come.

None - 34%

Just over one third had come straight to the urgent care centre without consulting any other service.



Clinician directed - 31



Not clinician directed - 37

Total - 68

There was a nearly equal split between those directed and those not directed to attend by a clinician.



Alternative - 22



No Alternative - 28



Unsure - 4

Total - 54

Just over half the respondents thought there was no treatment alternative to the urgent care site they were visiting.

Waiting times

“We've waited about one and a half hours; we didn't think we'd be here that long. We've parked here and paid for 2 hours - it's quite expensive. I don't know why they have to charge so much.”
(Leigh walk-in centre)

Priority

“I arrived about 11.10 and its now 12.40. I'm in pain and I've not seen anyone yet. It's been difficult to understand why other patients appear to have been seen before me.” (main A&E)

Vending machines

“I noticed the vending machines are empty in the main waiting room.” (Primary Care centre)

Positives

“I have gone through the system pretty quickly today.” (Primary Care centre)

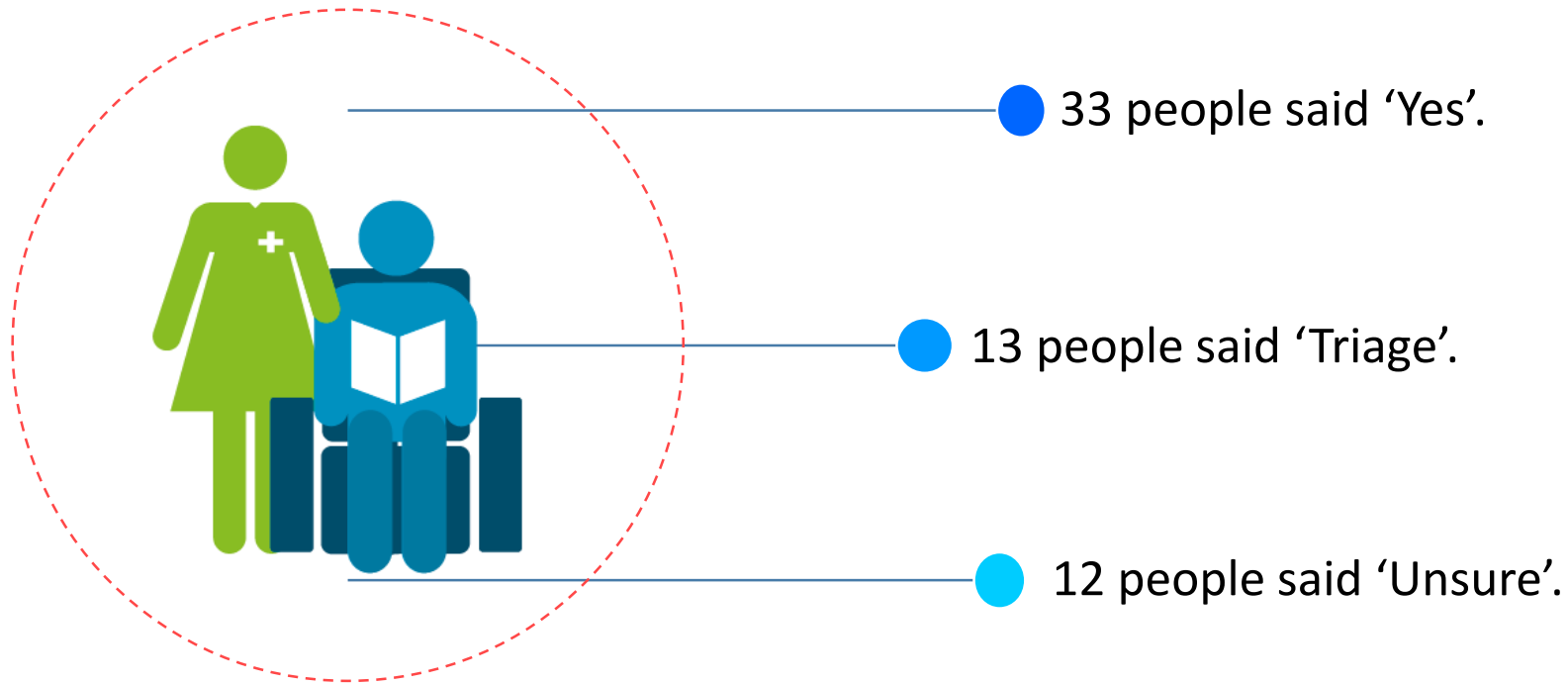
“The environment appears clean and friendly. We were sent straight through from reception to children's A&E and he was seen by a triage nurse straight away and given some calpol so I am very pleased.” (Children's A&E)

Childcare/space

“What I have noticed is there are no toys for my other child to play with.” (Leigh walk in centre)

“The Children's waiting area is separate here which is good.” (Children's A&E)

Do you know where you are going?



A majority of people (80%) knew where they were going on to, or were waiting for triage.

A smaller number of people (20%) were unclear where they were going next.

Total 58

“The GP sent me here saying I needed stitches and a tetanus but triage have said they don't do that - they will clean the bite and give me antibiotics. My GP could have done that but I've wasted more than 3 hours here already.”

“The NHS 111 service was inadequate, unhelpful and not joining the dots in the NHS. With hindsight I should have thought about the GP Alliance appointments as I do know about them. I wasn't offered that information by NHS 111 and I felt they should have known about them and, because they didn't, weren't able to navigate around NHS resources effectively.”

“Why can't Leigh open their A&E again? We're concerned about the potential closure of Chorley Hospital's A&E and the effect its going to have here. The Walk-in-centre at Leigh is a waste of time;.... We've been frequently and the staff have no compassion. We've often been told that, after waiting 2 hours, that 'we cant treat you but we can advise you' or 'we're about to close'...”

Leigh
walk-in
centre

Primary
Care
Centre

A&E

Children's
A&E

“I'm disabled and walking down to the Primary Care Centre from Children's A&E is difficult and painful for me.”

We did not have a large number of people mentioning weekend or bank holiday closures as the reason for attending A&E. However this does not mean it was not a factor in people's decision, as they may have neglected to mention it.

The comments below are those gathered that specifically refer to GPs and weekend or Bank Holiday closures.



“Our chemist closes at 13.00 on a Saturday. It's a weekend surgery which closes Sunday and the bank holiday Monday. I've heard of NHS 111 but you can't describe it (the problem) on the phone.” (main A+E)

“...I know to come to A&E if things aren't good. I would have gone to my own GP but it's not open with it being Bank Holiday Monday.” (main A+E)

“I knew I needed to be here. Alternative - I made the assumption that my GP was closed as it's Bank Holiday.” (Primary care centre)

“The walk-in centre sent me here with a letter. Alternative - my GP is closed today and has been over the weekend too. I tried to get through but it said the surgery was closed. I would have consulted a GP if that had been possible.” (main A+E)

Engagement officer reflections...

Thoughts on GPs and relation to urgent care

- Patients experienced difficulty in getting through on their GP practice number.
- Patients either couldn't that day, or had previous experience of not being able to get an appointment that day, at their GP, and made the assumption that would be the case on that occasion also.
- Some patients had made the assumption that their GP surgery was closed as it was a bank holiday and therefore had not attempted to contact a primary care service.
- Some patients were experiencing a clinical deterioration in their symptoms since being seen by their GP and had decided that they needed a more urgent response.
- GP's did not seem able to refer patients directly for x-ray other than through A&E or the Primary Care Centre.

The NHS 111 service and helplines

- Patients reported long waiting times to access the NHS 111 service.
- Patients did not find it useful having to wait to access the NHS 111 service in order to get the 'Out of Hours' contact number.
- Patients reported not being given the 'HUB' number in order to access their primary care appointments.

Conclusions and Recommendations

In this study we engaged people at children's A&E, main A&E waiting area (majors 2), primary care centre, and Leigh walk-in centre. We found a wide variety of reasons for people's attendance, as well as looking at the actions they had taken before arriving at these sites.

Regarding who people contacted before attending A&E, 'GP' and 'other services' made up two thirds of responses. Only one third of people arrived having contacted 'no-one' beforehand.

About half of responses suggest that the people felt there was no alternative to coming to the site visited that day. It was difficult to tell whether this was based on a clinical judgement or a personal one, there were likely specific factors in each case.

We did not find strong evidence that GP closures over the weekend or Bank Holiday had a significant impact on A&E attendance, however we also did not directly ask about this; instead leaving the question open to see if such an issue arose for people.

NHS 111 was a source of frustration for patients, particularly the waiting times and the lack of clear advice. The perception that NHS 111 does not know how to help patients navigate to the right part of the system is worrying. NHS 111 commissioners need to ensure that NHS 111 have these skills.

Phone numbers for the GP OOH service should be promoted widely along with details about extended opening hours for GP practices. This could include advertising the number in the hospital, particularly in A and E, in the Walk in Centre, in GP receptions and in Pharmacies, on the hospital and GP websites, in the community book and in community hubs and advice centre.

Some comments suggested that patients had been sent to A and E from GP practices for treatment that was not available at A and E. Some mechanism needs to be found for resolving this issue, either through training or information updates or via direct contact with GP practices when these types of incident occur. Meanwhile people who are triaged in A and E should be informed at the point of triage if this is the case.

Healthwatch Wigan and Leigh would like to thank all those that took part in this research or facilitated it to take place.