

# A&E Watch

# Leighton Hospital

7<sup>th</sup> October 2019



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## Introduction

### What is Healthwatch?

Healthwatch Cheshire, consisting of Healthwatch Cheshire East and Healthwatch Cheshire West, is an independent consumer champion for health and care across Cheshire East and Cheshire West and Chester, forming part of the national network of local Healthwatch across England. Our role is to make sure that those who run health and care services understand and act on what really matters to local people.

Healthwatch Cheshire East and Healthwatch Cheshire West undertake continuous engagement activities with the public to hear about concerns and compliments regarding health and care services. The information we gather is then analysed so that we can identify and act upon trends and common themes by presenting our findings to decision makers in order to improve the services people use. We also share people's views locally with Healthwatch England who make sure that the government put people at the heart of care nationally.

### What is A&E Watch?

A&E Watch is designed to gain a snapshot view of the NHS Accident and Emergency (A&E) departments in Cheshire. Healthwatch Cheshire undertake A&E Watch periodically to gain experiences of patients and understand why they attended and how they thought services could be improved. The purpose of A&E Watch is to explore themes emerging from the comments we have received about A&E during our regular general engagement activity.

### What happens at A&E Watch?



The Healthwatch Cheshire team of staff and volunteers usually visit the three A&E departments in Cheshire at the same time on one particular day in order to gain a snapshot of what is happening in our hospitals. On this occasion, Healthwatch Cheshire specifically visited Leighton Hospital on 7<sup>th</sup> October 2019 to follow up on the A&E Watch that took place on 11<sup>th</sup> February 2019.

Four members of staff, including our Service Lead, Volunteer Coordinator, and Community Engagement and Project Officers, assisted in engaging with people in Leighton Hospital A&E Department across eight hours, from 10am until 2pm, and 4pm until 8pm.

To inform our research, we conducted two surveys based upon conversations with people attending A&E. Firstly, an A&E Watch questionnaire to be completed whilst the patient is in A&E to find out why they attended, how frequently they have visited, and their experiences whilst in A&E. This is included at the end of this report as Appendix 1. A post-visit survey to be returned on exit or by Freepost entitled 'After your A&E visit', is designed to find out about the patient's experience after being treated in A&E. This is included at the end of this report as Appendix 2.

This report details our findings from A&E Watch conducted on 7<sup>th</sup> October 2019. Copies of the questionnaires and total responses are included later in the report.

## Findings from our previous report

On Monday 11th February 2019, Leighton Hospital A&E Department was relatively busy but retained a sense of calmness and organisation rather than any feeling of the department being overstretched. Since our previous visit in January 2018, the waiting area had been renovated and made open plan with the addition of a streaming desk. The presence of a streaming nurse in the waiting room area meant that people had spoken to a health professional very soon after arrival which people told us helped to keep them informed. However, the position of the streaming desk combined with the lack of signage, did result in some confusion as to whether people should first go there or to reception.

The report concluded that during the time we visited, at Leighton Hospital over half of people (56%) attended A&E first and did not attempt to visit a non-urgent care service beforehand. Our research showed that the most common non-urgent care service accessed was the GP Practice with nearly two-thirds of those who had been elsewhere first accessing this service. The main reason appeared to be not because of a lack of GP appointments, but that a decent majority did not consider going anywhere else other than A&E because people believed their problem to be too urgent to wait.

Around 40% of people rated their experience of Leighton Hospital A&E as five stars out of a possible five, with only 9% of people rating their experience as one or two stars out of five. Waiting times and how they were managed in particular received positive praise from respondents.

## Hospitals visited for A&E Watch:

Our A&E Watch usually takes place in each of the A&E departments in Cheshire West and Chester and Cheshire East, namely Countess of Chester Hospital, Leighton Hospital, and Macclesfield Hospital. A full A&E Watch incorporating all three hospitals will take place in early 2020. On 7<sup>th</sup> October 2019, Healthwatch Cheshire specifically visited Leighton Hospital to consider the impact of their changes to the streaming process since our previous report in February 2019.

In February 2019, Leighton Hospital had recently began their 90-day workstream on improving the streaming process for patients attending A&E. The streaming process is what happens to patients when they arrive at A&E; how they are assessed, where they are sent, and deciding by whom they will be treated. More information on the streaming process as we found it in February 2019 is included in Appendix 4 of our 'A&E Watch - 12 Hours in A&E - February 2019' report, available to view at [www.healthwatchcheshireeast.org.uk/what-we-do/our-reports](http://www.healthwatchcheshireeast.org.uk/what-we-do/our-reports). Healthwatch Cheshire were asked by Mid-Cheshire Hospitals NHS Foundation Trust to revisit Leighton Hospital on 7<sup>th</sup> October 2019 in order to assess the success of the new streaming system following its implementation in the time since the previous A&E Watch report.

The design of the questionnaires was based on that of the previous report from February 2019, but for this visit an additional question was added based upon feedback from health professionals relating to whether people attending A&E found difficulties in accessing healthcare at any other service other than A&E.

## When was A&E Watch?

In February 2019, A&E Watch was conducted over a 12-hour period from 9am until 9pm to ensure we also captured people attending in the evening. On this occasion, we decided to engage with people in two four-hour periods, from 10am until 2pm, and 4pm until 8pm. This

was because from previous experience, the number of new patients begins to quieten in the mid-afternoon, but a second shift still allowed us to capture evening attendance.

The visits again took place on a Monday in line with previous A&E Watch activity. Anecdotally Healthwatch has evidence to suggest that this is a busy day for A&E departments - this can be after people become ill or injured over the weekend or decide that they have not gotten any better over the weekend, and so decide to go to A&E on the Monday.

## Summary of Findings

As a result of the responses from 89 people to our 'A&E Watch' survey at Leighton Hospital A&E Department, the major findings were:

- A slight majority of people had tried to visit another service before attending A&E, at 54% of people overall. This is in contrast to the findings from Leighton in February 2019, when we found that 56% of people had not attempted to visit another service before A&E.
- Of the people who tried to go elsewhere before A&E at Leighton, over two-thirds (69%) had been, or had attempted to go to their GP Practice first. This is a similar level to our findings in February 2019 which showed that 65% of people had been to their GP Practice first. Around one in five (21%) people had also attempted to access NHS111 prior to A&E.
- The majority of people we spoke to who had been elsewhere before visiting A&E were advised to attend by a GP. This figure was almost exactly the same as in February 2019, when 41% of people cited this reason.
- The most common reason people gave for attending A&E without going elsewhere was that 'It was too urgent/it was an emergency' (59%). This is in line with the findings of our previous A&E Watch report in February 2019, when this figure was 65%. The second most common answer was that a friend or family member thought the person needed to go to A&E.
- Some people thought that their GP would likely refer them to A&E anyway so decided to go straight there, potentially feeling they needed an X-ray.
- The majority of respondents were driven by friend or family member, or had driven themselves.
- Ambulance satisfaction rating indicates that 68% found this service to be excellent (rated 5 out of 5), which is lower than the 95% who did so in February 2019, although no one rated their experience as less than 3 out of 5 on this occasion.
- People we spoke to were fairly evenly split on whether they felt they were being kept informed of timings or delays, with 40 people saying they were and 39 saying they were not.
- 32 people (51%) indicated that they did not know why they had been waiting the time they had.
- On the day we visited, 90% of the people we spoke to rated their experience of A&E as being at least 3 out of 5. 22% rated their experience as excellent (5 out of 5). This is less than the 40% who did so in February 2019. Positive comments tended to centre round the attitudes and efforts of staff, with some praising the short length of waiting times.
- Only 10% of respondents rated their experience as 2 out of 5 or less. This is a similar figure to February 2019, when 9% of respondents rated their experience this way. Waiting times, communication around waiting times, and the comfort and availability of seating in the waiting area were the most common reasons cited for a negative experience.

As a result of the responses from 8 people to our 'After Your A&E Visit' survey, the major findings were:

- There was a low response rate to the 'After Your A&E Visit' survey, with only 8 completed overall. Of those who did respond, two-thirds waited over 4 hours to be treated. Although 50% rated their experience as 5 out of 5.

## Survey Results - A&E Watch Survey

The A&E Watch survey that informs this report received 89 responses from people who attended A&E at Leighton Hospital between 10am and 2pm, and 4pm and 8pm, on Monday 7<sup>th</sup> October 2019.

The following is a breakdown of the results received by question. Note that in some cases patients chose more than one response to the questions or failed to answer certain questions.

### What made you come to A&E today?

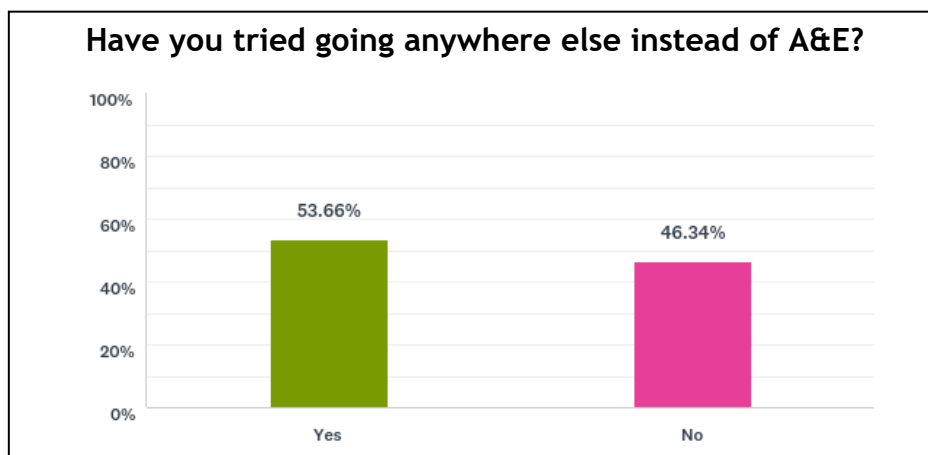
This question is intended to get an idea of the types of issues people were presenting with. The types of issues people described as to why they attended A&E at Leighton Hospital included:

- People feeling generally unwell.
- A fall or falling over.
- Head or neck injuries.
- Eye problems such as conjunctivitis.
- Chest, abdominal, or back pain.
- Suspected fractures or injuries to thumb, finger, wrist, shoulder, ribs, hip, ankle or foot.
- People who had difficulty in breathing.
- Someone who had passed out and had a seizure.
- An individual who had attempted suicide.

### Have you tried going anywhere else instead of A&E?

The purpose of this question is to gain an idea of people’s perceptions and knowledge of the alternative services available to them other than A&E. 82 people answered this question.

	<b>Yes</b>	<b>No</b>	<b>Total</b>
<b>Number of people</b>	44	38	82



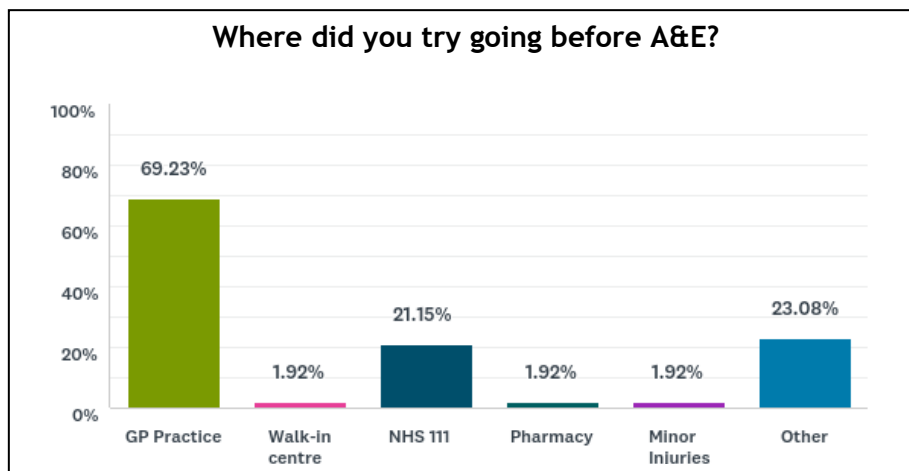
- A slight majority of people had tried to visit another service before attending A&E, at 54% of people overall. This is in contrast to the findings from Leighton in February

2019, when we found that 56% of people had not attempted to visit another service before A&E.

### Where did you try going before A&E?

Those people who had tried elsewhere before attending A&E were then invited to tell us which services they had attempted to access first. This question was answered by 52 people but it was unclear why an extra 8 people answered this based on the results of the previous question.

	<b>GP Practice</b>	<b>Walk-in Centre</b>	<b>NHS 111</b>	<b>Pharmacy</b>	<b>Minor Injuries Unit</b>	<b>Other</b>	<b>Total</b>
<b>People</b>	36	1	11	1	1	12	52



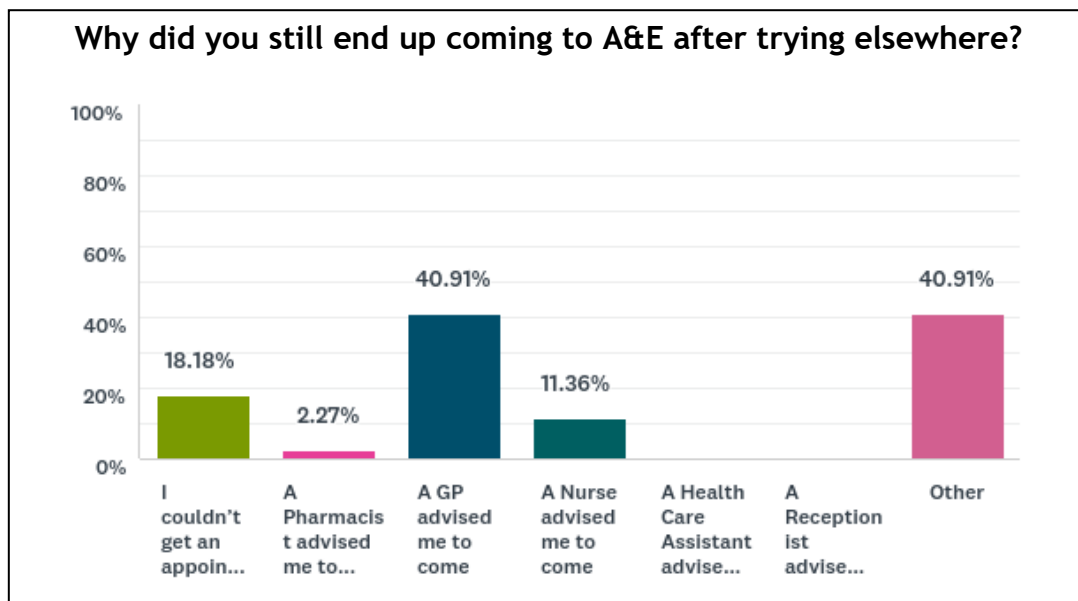
- Of the people who tried to go elsewhere before A&E at Leighton, over two-thirds (69%) had been, or had attempted to go to their GP Practice first. This is a similar level to our findings in February 2019 which showed that 65% of people had been to their GP Practice first.
- The second most common answer was ‘Other’ at just over 23%.
- At Leighton Hospital, people who answered ‘Other’ had been or had tried to go to an optician, dentist, chiropodist, and an out of area Minor Injuries Unit.
- Around one in five (21%) people had also attempted to access NHS111 prior to A&E.

### Why did you still end up coming to A&E after trying elsewhere?

This question is to establish why people attended A&E after going elsewhere first. 44 people answered this question.

	<b>Number of people</b>
I couldn't get an appointment with my GP	8
A Pharmacist advised me to come	1
A GP Advised me to come	18
A Nurse advised me to come	5
A Healthcare Assistant advised me to come	0
A Receptionist advised me to come	0
Other	18
<b>Total</b>	<b>44</b>



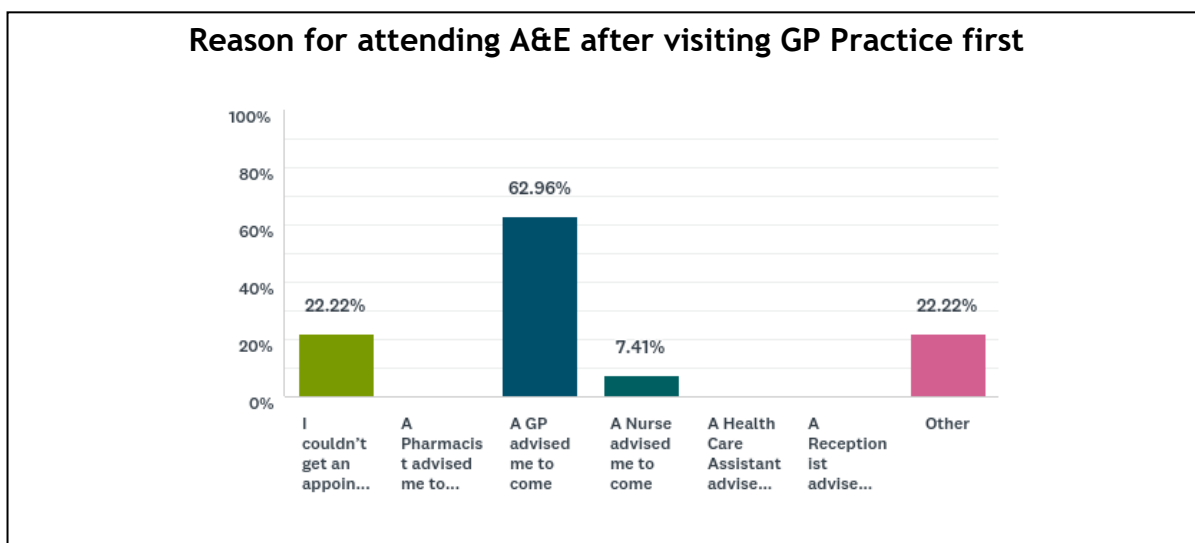


- The majority of people we spoke to who had been elsewhere before visiting A&E were advised by a GP to attend A&E. This figure was almost exactly the same as in February 2019, when 41% of people cited this reason.
- On this occasion, just as many people categorised 'other' reasons for attending A&E after going elsewhere. These reasons included - being advised by a dentist, an optician, or requiring an X-ray or ECG.
- Similarly to February 2019, being told to attend A&E by NHS111 was the most prevalent reason categorised as 'other' - most of those who contacted NHS111 first however did not categorise the person they had spoken to as a health professional as indicated in the question.

People who had gone elsewhere first were also asked to elaborate on why they were now attending A&E. The most common themes were being advised to attend by a GP or NHS111 for reasons such as needing a scan or that they thought the issue required A&E attendance. There was also a perception from some people that it would be quicker and more efficient to go straight to A&E.

### **Attendance at A&E after visiting the GP Practice**

As the most prevalent reason for attending A&E after going elsewhere is those who have attended a GP Practice first, it is useful to look at who within the GP Practice directed the person to A&E and why. This is a question included based on feedback from health professionals on previous reports.

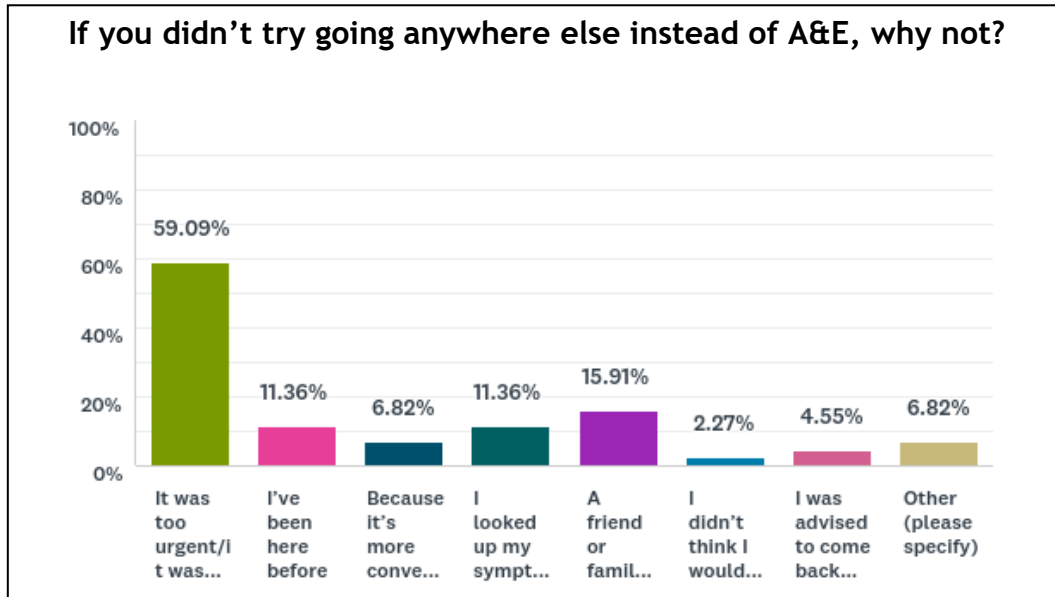


- Of the 27 people who visited a GP Practice first before attending A&E and answered this question, 17 people (63%) were advised by their GP.
- The next highest response was an inability to obtain an appointment, an option chosen by six people (22%).
- Reasons provided included the GP believing attendance was necessary and/or requiring a scan.

### **If you didn't try going anywhere else instead of A&E, why not?**

The purpose of this question is to ascertain why people attend A&E instead of going elsewhere first. Respondents were provided with set category answers to this question. 44 people responded to this question but it was unclear why an extra six people answered this based on the results of the initial question as to whether people tried to attend anywhere else first.

	<b>Number of people</b>
It was too urgent/it was an emergency	26
I've been here before	5
Because it's more convenient	3
I looked up my symptoms on the internet and felt I should come	5
A friend or family member thought I should come	7
I didn't think I would be able to get an appointment with my GP so didn't try	1
I was advised to come back here by A&E staff previously if my problem continued	2
Other	3
<b>Total</b>	<b>44</b>



- The most common reason people gave for attending A&E without going elsewhere was that 'It was too urgent/it was an emergency' (59%). This is in line with the findings of our previous A&E Watch report in February 2019, when this figure was 65%.
- The second most common answer was that a friend or family member thought the person needed to go to A&E.
- Two of the three people who answered 'other' said that they thought they needed an X-ray and that this would be unavailable at their GP Practice.
- Only one person cited perceiving that they would be unable to get an appointment with their GP as a reason, which is a similarly low level to February when nobody gave this answer.

### Why was this the case?

When asked to elaborate on reasons why respondents did not try somewhere else first, answers were varied:

- Some people thought that their GP would likely refer them to A&E anyway so decided to go straight there, potentially feeling they needed an X-ray.
- Others attempted to get in touch with their GP Practice but were unable to get through.
- People also felt that what they were presenting with required A&E attendance.

### Do you have any difficulties in accessing health care at places other than A&E?

This question was included based upon feedback from health professionals on the February 2019 report, and is used to establish whether there are any issues in the wider health system impacting upon A&E attendance.

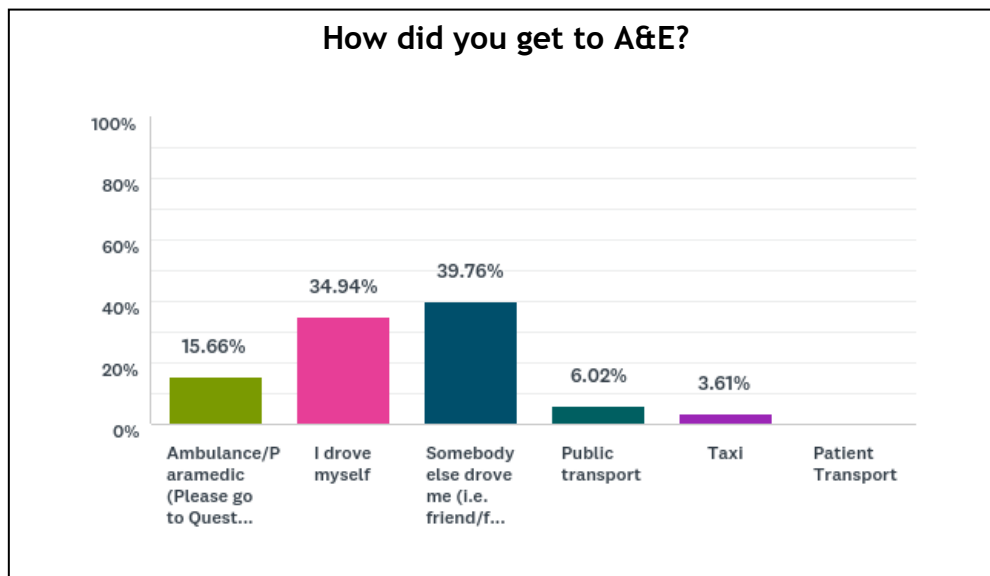
The majority of respondents told us that they had no issues, but others used it as an opportunity to talk about their GP Practice. Despite not directly linking this to their A&E

attendance on this particular day, 11 people told us that they usually find it very difficult to get appointments to see their GP. On the other hand, 10 people told us that they had no problems in accessing a GP appointment.

### How did you get to A&E?

This question is useful in establishing how people travel to A&E. This question was answered by 83 people.

	Number of people
Ambulance/Paramedic	13
I drove myself	29
Somebody else drove me (i.e. friend/family member)	33
Public transport	5
Taxi	3
Patient Transport	0
<b>Total</b>	<b>83</b>



- The most common means of accessing A&E on the day we visited was to be driven by a friend or family member, accounting for 40% of all respondents.
- This was closely followed by 29 people who had driven themselves.
- In February 2019, 31% of the people we spoke to at Leighton had arrived by ambulance but the number this time was only 16%. This does not necessarily mean that less people were arriving by ambulance, but could reflect that we had less opportunity to speak to them compared to last time.

### If you came by ambulance, how would you rate the care you received (1 being poor and 5 being excellent)?

This question allows us to find out more about people's experience of being brought to A&E by ambulance. 19 people responded to this question, which is a higher number than people

who told us they had arrived by ambulance in the last question, so likely reflects those that did not respond to the previous question.

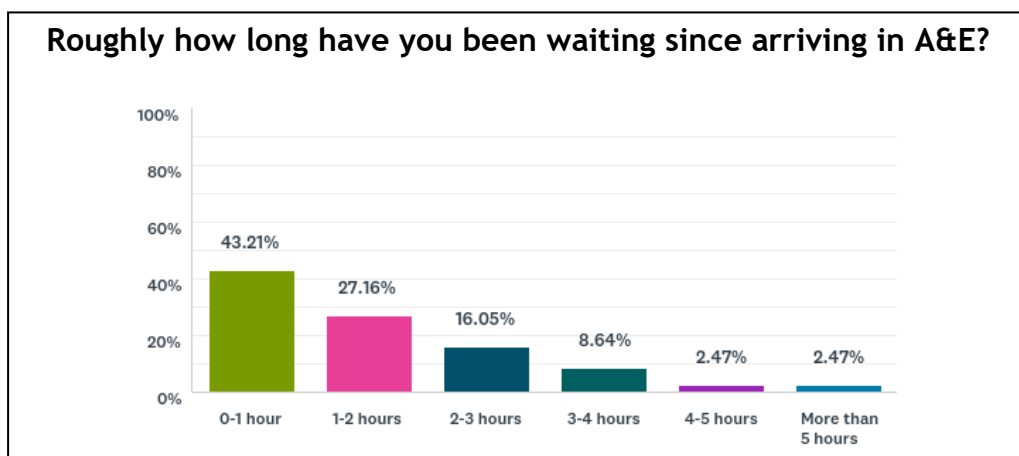
	Rating					
	1	2	3	4	5	Total
<b>Number of people</b>	0	0	3	3	13	19

- The satisfaction rating indicates that 68% found this service to be excellent (rated 5 out of 5), which is lower than the 95% who did so in February 2019, although no one rated their experience as less than 3 out of 5 on this occasion.
- People were also asked to provide feedback on why they rated the ambulance service in this way. Responses included: “A bit cheeky - made to feel at ease. Every faith they knew what they were doing”; “Thoughtful, considerate, professional crew”; and “Quick response and very reassuring, calm, test in ambulance, very professional with some humour which helped calm the situation.”

## Roughly how long have you been waiting since arriving at A&E?

The nature of the question does not reflect the total length of time before being seen and dealt with by a health professional as a good proportion of people were surveyed whilst in the main waiting room, so is not necessarily reflective of total waiting times, but does indicate how long people had been waiting at the time we spoke to them. This question was answered by 81 people.

	Waiting Times						
	0-1 hour	1-2 hours	2-3 hours	3-4 hours	4-5 hours	More than 5 hours	Total
<b>Number of people</b>	35	22	13	7	2	2	81

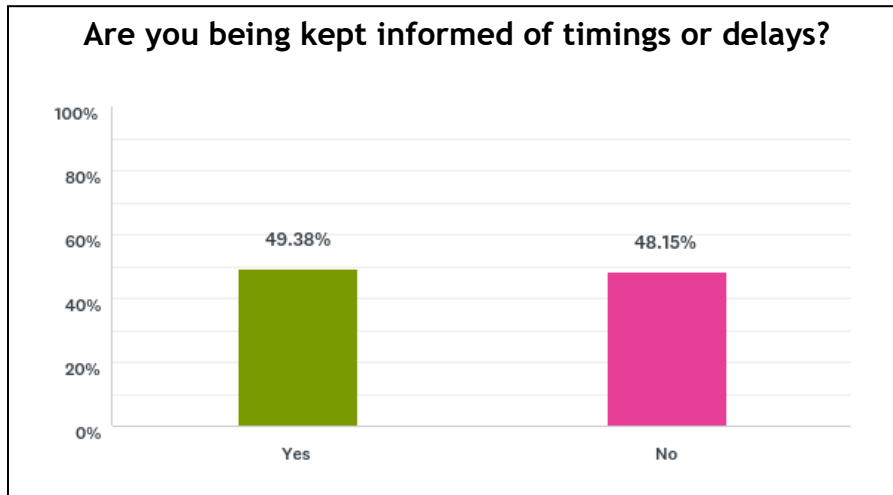


- 43% of people asked had been waiting for 0-1 hours, which largely reflects the time at which we spoke to them.
- The number of people waiting reduced as time elapsed, with those waiting more than five hours showing the smallest number at 2.5%.

- We spoke to more people who had waited longer amounts of time in this report, which could suggest that people were waiting longer.

### Are you being/have you been kept informed about timings or delays at each stage?

This question is important in contributing to a view of the patient experience, i.e. to what extent they are kept informed as they wait. 79 people answered this question.



- People we spoke to were fairly evenly split on whether they felt they were being kept informed of timings or delays, with 40 people saying they were and 39 saying they were not.
- This represents a slight decrease from February 2019 when 57% of people felt they were being kept informed.

If they answered 'yes' to this question, people were also asked how they were being informed:

- Of the 40 people who said that they were being kept informed, 17 people said that a member of staff, mostly the triage or streaming nurse, had giving them an indication of waiting times. 10 people said they were kept up to date by the TV screen, whilst 7 said it was the information board, although it is unclear if these people are talking about the same thing.

### Do you know why you have been waiting this amount of time?

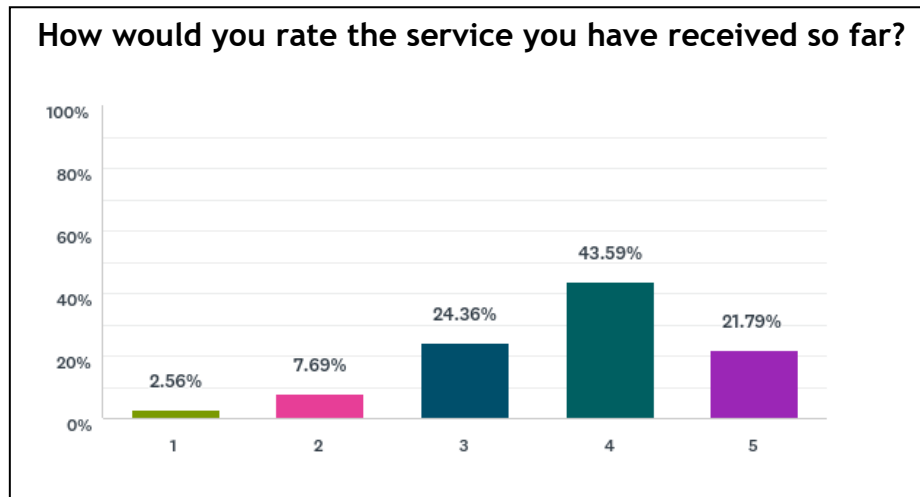
The purpose of this question is to ascertain how well-informed patients were with regards to the reason for delays. This question provides a more rounded picture in regard to waiting times. 63 people provided a response to this question.

- 32 people (51%) indicated that they did not know why they had been waiting the time they had.
- 20 people told us that they thought they had been waiting this amount of time because the department was busy, although it is unclear whether this was through perception or whether they had been told.
- Those that did know, told us that it was because they were waiting for a bed or for blood results.

## How would you rate the service you have received so far in A&E?

People were asked to rate the service that they had received so far in A&E that day - with 1 being poor and 5 being excellent. 78 people answered this question.

	Rating					
	1	2	3	4	5	Total
Number of people	2	6	19	34	17	78



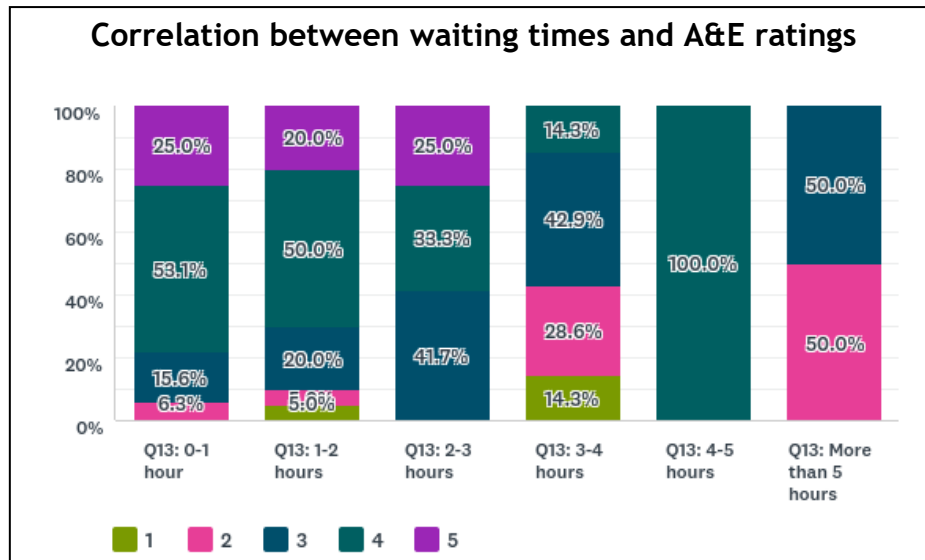
- On the day we visited, 90% of the people we spoke to rated their experience of A&E as being at least 3 out of 5.
- 22% rated their experience as excellent (5 out of 5). This is less than the 40% who did so in February 2019.
- Only 10% of respondents rated their experience as 2 out of 5 or less. This is a similar figure to February 2019, when 9% of respondents rated their experience this way.

### Correlation between waiting times and star rating at A&E

It is useful to look at a comparison between waiting times and rating of the service to see how far it can be suggested that a long wait effected people's experience. It is worth noting that when surveyed people were at different stages in their A&E journey, e.g. waiting to be triaged, already triaged and waiting to be called, waiting to see a further doctor/x-ray.

- A rating of excellent (5 out of 5) was not given by any respondent who had been waiting for more than three hours at the time we spoke to them.
- There is a reasonable distribution across the waiting times of people who rated their experience as 1, 2 or 4 out of 5, which suggests that how long they had to wait was not necessarily indicative of how they rated the service that they received up until around the four-hour mark. Although no rating over 4 out of 5 from people waiting more than five hours suggests that by this time the waiting time did have a bearing on experience.

The below chart displays the hours spent waiting with a different colour for each star rating out of 5 awarded by respondents for their experience.



### Correlation between star rating and being kept informed of waiting times

Star Rating (1 is poor, 5 is excellent)	Yes, I have been kept informed of waiting times (number of respondents)	No, I have not been kept informed of waiting times (number of respondents)
1-2 stars	3	5
3-4 stars	26	22
5 stars	9	8

- It is interesting to note that there is little correlation between those who have been kept informed of their wait and star rating awarded.
- For those who rated a poor experience (1 or 2 out of 5), 37.5% had been kept informed and 62.5% had not. Whilst of those rating their experience as good (3 or 4 out of 5), 54% had been kept informed and 46% had not. Of those who had rated their experience as 5 out of 5, 53% had been kept informed and 47% had not.

### What have you found positive about your experience in A&E?

This question invites qualitative responses from people with regards to any positive experiences they have had in A&E:

- As in February 2019, again the most common positive theme was around ‘staff’, for example; “Staff help me as my English isn’t good”; “Triage were so polite and helpful”; “Staff are very helpful and concerned in respect of their colleagues who may be patients requiring examination or treatment”; “Staff have been nice so far and explained the situation”.
- Again, the theme of ‘waiting times’ received both positive and neutral comments. For example; “I have not waited longer than I expected and the waiting room is warm and comfortable”; “Seen by triage within half an hour and I was told I would probably be seen in an hour, but it is busy”; “check in was quick”; “I went through triage quickly”.



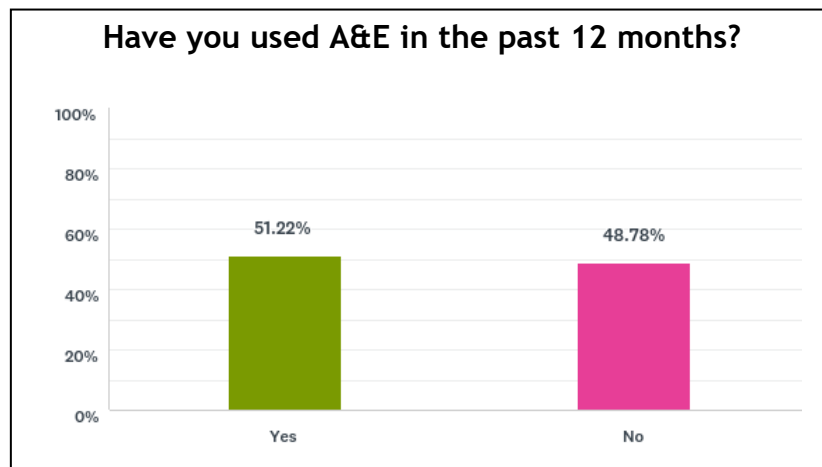
### What could be improved about your experience in A&E?

People were also asked to reflect about anything that they feel could be improved about their A&E experience.

- As in February 2019, ‘waiting times’ proved to be the most common theme, including communication around how long these waiting times would be. For example; “Let us know how long the wait will be”; “If people take the time to listen it could save so much time and money”; “more indication of time to be seen”; “Whether I am a minor or major patient to look at waiting times in the right category”; “More information [needs to be] shared i.e. average waiting times/what is the next stage”; “Difficult to say, high demand and finite resources will always mean lengthy waits. Perhaps an update every hour may help;” “Names are being called but no-one is moving, needs to be a different system. Perhaps a ticket to be given out and that appears on the screen.”
- There were also comments about the comfort of seating and the need to provide more seats. For example; “Chairs are very uncomfortable”; “Uncomfortable seating if you are waiting a long time”; “More seats in waiting room”; “Not enough seats, not comfortable”.

### Have you used A&E in the past 12 months?

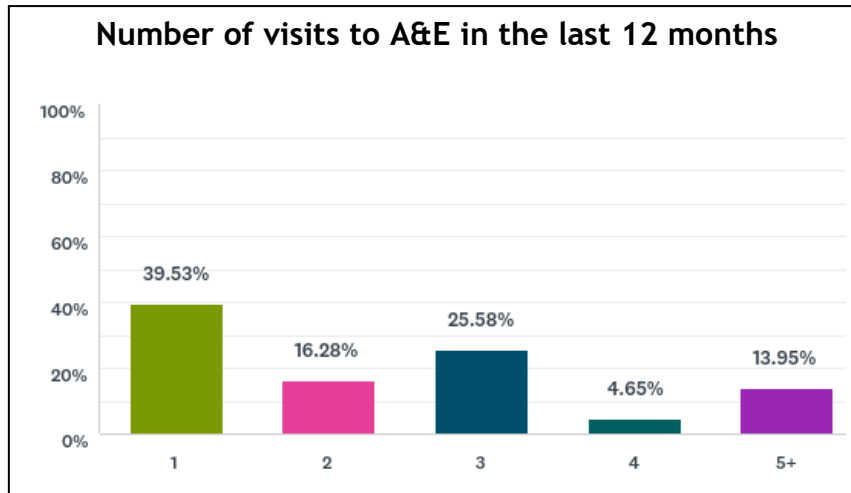
	Yes	No	Total
<b>Number of people</b>	42	40	82



- Of those who attended A&E on the day we visited and responded to the survey, responses were pretty much split at 51% to 49%. Responses in our February 2019 report were also relatively even, but with 49% having accessed A&E in the 12 months previous and 51% having not.

In terms of those who had visited A&E in the last 12 months, it was also useful to ascertain how frequently they had visited A&E during this period:

	Number of visits					Total
	1	2	3	4	5+	
<b>Number of people</b>	17	7	11	2	6	43



- The most common response was those who had visited A&E once in the past year (40%). This is slightly higher than February 2019’s figure of 33%.
- 42% had visited 2 or 3 times in the last 12 months, lower than the 52% figure in February 2019.
- There was a slight increase in those who had visited on five or more occasions, up to 14% from 9% in February 2019.

### Age Profile of Respondents

We asked survey respondents to tell us their age. Of all survey respondents, 76 provided this information (85%). Although an open field, ages have been grouped for ease of reference:

	Under 16	16-25	26-35	36-50	51-65	65+
Number of people	8	9	17	14	13	15

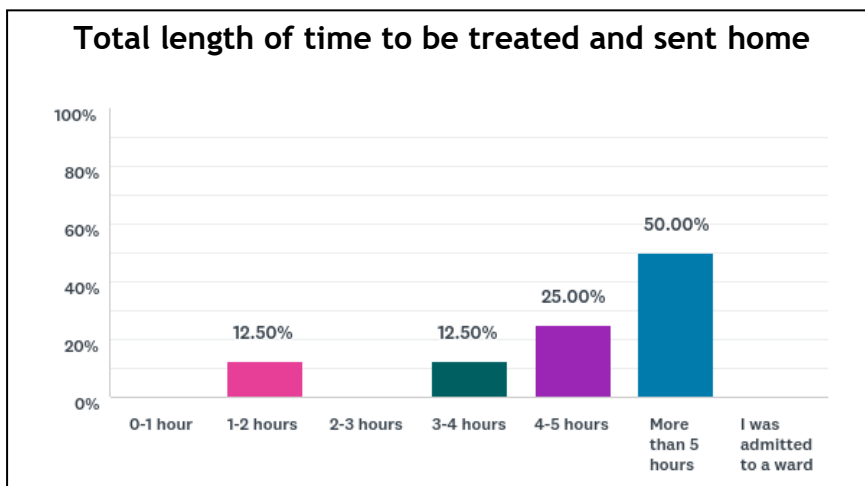
- The largest grouping occurred in those aged 26-35, although people aged 36-50, 51-65, and 65 and over also represented a similar amount of respondents.

## Survey Results – After Your A&E Visit Survey

- There were 8 respondents to the ‘After your A&E visit’ survey across the three hospitals visited.
- The low response rate likely correlates to the nature of the surveys having to be completed after the A&E visit and sent to Healthwatch via freepost rather than collected in person.
- This is probably not a large enough sample to take away definite conclusions, although it does provide a snapshot of the experiences of people using A&E at the time we visited.

### How long has it taken from your arrival in A&E to be treated and sent home?

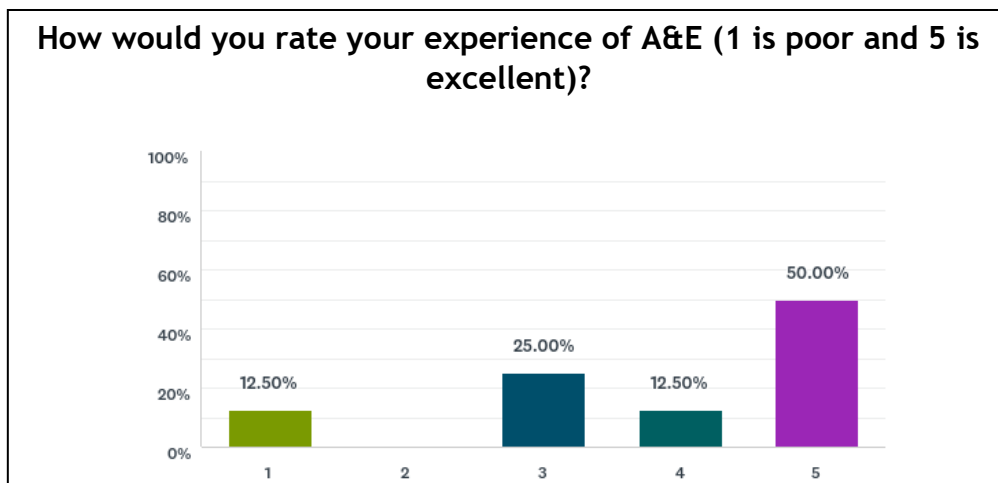
Although a small sample size this question can provide an indication as to average total waiting times of people who attended A&E on the day.



- There was a mixed response to this question and a small sample size, but 6 out of 8 the 8 people who returned a survey waited for over four hours. Just one person waited less than two hours.

### How would you rate your experience of A&E (1 is poor and 5 is excellent)?

People who responded were also asked to rate their experience of A&E on the day:



- There was a mixed response across the ratings, though a rating of 5 was the most common at 50%.

### **Are there any other comments about your experience today?**

Comments received included:

- *“It was a Monday and apparently it is always busy on a Monday. Why? The name A&E to me implies injury/illness happened now! Do GPs need extra resources on Monday to relieve hospital? Staff were excellent despite pressure.”*
- *“Wait was dreadful, however all the staff, doctors, nurses are truly exceptional. They need more staff desperately. How they remain so professional and caring under such circumstances is incredible. Well done and thank you all.”*
- *“The staff that were working in A&E were very good but being pushed to the limit. More staff are needed, in fact another bigger hospital is really needed.”*
- *“Waiting times awful, staff magnificent and absolute credit to the NHS, never met such a compassionate professional bunch of people.”*
- *“Ideally I would have or preferred to have an x-ray, but the A&E was empty when I arrived and full when I left. The staff said there was no point and sent me home with pain killers. I still don't know for sure if I have broken ribs, it was the doctor's guess.”*
- *“Excellent, thorough service from all the staff from the porters to the radiographer, nurses and doctors. Mine was a very positive experience.”*

## Conclusion

### Why do people attend A&E?

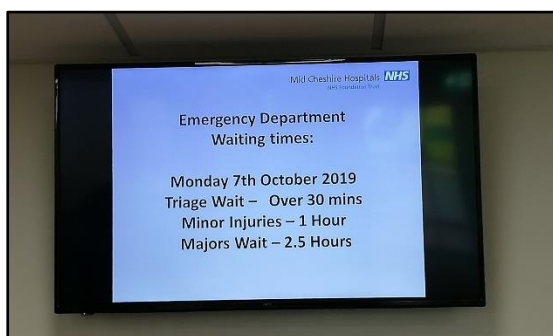
Our survey found that a slight majority of people had tried to visit another service before attending A&E, at 54% of people overall. This is in contrast to the findings from Leighton in February 2019, when we found that only 44% of people had attempted to visit another service before A&E. Similarly to February 2019, of the people who tried to go elsewhere before A&E at Leighton, over two-thirds (69%) had been, or had attempted to go to their GP Practice first, and had most commonly been advised to do so by the actual GP. Around one in five (21%) people had also attempted to access NHS111 prior to A&E.

The most common reason people gave for attending A&E without going elsewhere was that 'It was too urgent/it was an emergency' (59%). This is in line with the findings of our previous A&E Watch report in February 2019, when this figure was 65%. The second most common answer was that a friend or family member thought the person needed to go to A&E. There was also a perception from some people that their GP would likely refer them to A&E anyway so decided to go straight there to speed up the process. Some of these people felt that potentially they would need an X-ray or other scan.

### How often do people attend A&E?

Of the people we spoke to, 51% had visited A&E in the past year. Most people had only done so on one occasion, albeit this was a slight increase on the amount of people in this category in February 2019. There was a slight increase in those who had visited on five or more occasions, up to 14% from 9% in February 2019. The majority of respondents were driven by friend or family member, or had driven themselves. The largest age group that responded to our survey were aged between 26 and 35, although age groups over the age of 35 were almost as common. Numbers of people attending A&E who were aged 25 or under were less than the older age groups on the day we attended. This suggests that A&E is seen as a more efficient way of accessing healthcare for those who are more likely to be of working age.

### What are the waiting times like in A&E?



On arrival at 9.30am, the waiting times displayed on the screen read that triage was 30 minutes, Minor Injuries 1 hour, and Majors 6-7 hours. By 10 am this had been changed to reflect 2.5 hours for Majors. In the evening between 4pm and 8pm, the wait for Minor Injuries became 3 and 4 hours, and the wait to be seen in Majors became 4 and 5 hours. In the morning, the number of people waiting in the corridor in the Majors department was

relatively few, but by 6pm this had reached 14 people.

People we spoke to were fairly evenly split on whether they felt they were being kept informed of timings or delays, with 40 people saying they were and 39 saying they were not. 32 people (51%) however, indicated that they did not know why they had been waiting the time they had. In the 'After Your A&E Visit' survey, 6 out of 8 respondents waited over 4 hours to be treated.

## Streaming process

The rationale for our re-visit to Leighton was the completion of the 90-day workstream on improving the streaming process in A&E. On 7<sup>th</sup> October 2019, there was a relatively steady flow of patients throughout late morning becoming progressively busier as the day went on. On the date of our last visit, the waiting area had been renovated with the addition of a streaming desk. On this occasion new signage including direction from the streaming desk toward reception and two television screens displaying waiting times for separate departments, have also been added.



The position of the streaming desk being the first thing people see as they come through the entrance did seem to confuse some people, especially as the streaming desk was not signposted in itself. This resulted in people visiting the streaming nurse upon arrival rather than the receptionist. This caused some others to follow suit creating a somewhat disjointed queuing system that at times had the potential to cause obstructions to staff and visitors. The addition of the streaming nurse remained a positive addition for patients who felt they had received contact early in their visit. However, anecdotally some people did not always feel well enough informed about their own patient journey in regards to how and when they would be treated, and by whom.

## What are people's experiences of A&E?

On the day we visited, 90% of the people we spoke to rated their experience of A&E as being at least 3 out of 5. 22% rated their experience as excellent (5 out of 5) in the A&E Watch survey, and 4 out of 8 (50%) did so in the 'After Your A&E Visit' survey. Positive comments tended to centre round the attitudes and efforts of staff, with some praising the short length of waiting times. Overall, patients appeared calm and satisfied with their experience.

Only 10% of respondents rated their experience as 2 out of 5 or less. This is a similar figure to February 2019, when 9% of respondents rated their experience this way. Waiting times and communication around waiting times were the main themes people responded with when asked how their experience could improve. This perhaps links to the perception people held that despite being seen by the streaming nurse, they were not really offered a clear indication of how and when they would be treated.

In terms of experience of the physical environment, there were various negative comments regarding uncomfortable seating and an inadequate amount of seating in the waiting area. Others commented on the lack of a water fountain and the vending machines being too expensive. During the evening, several people complained that the waiting room was too warm. On the day of our visit the only disabled toilet in the A&E Department was marked as out of order with no signage directing people to an alternative disabled toilet.

## **Provider and Commissioner Feedback**

### **Chris Oliver - Chief Operating Officer, Mid Cheshire Hospitals NHS Foundation Trust**

I would like to thank Healthwatch for undertaking this second review of Leighton Hospital's Emergency Department this year. The Trust had requested this in response to the Healthwatch visit in February and to review the improvements we had put in place since. It was pleasing to see the developments in streaming and infrastructure were appreciated by our patients and pleasing to note the signage that went up post the review will address the outstanding concerns of patients.

As a system we are working hard to ensure appropriate signposting for our patients, to the service that best fits their need. The review highlighted there is more work to do on this agenda.

### **Jamaila Tausif - Associate Director of Strategy and Partnerships, NHS South Cheshire and NHS Vale Royal Clinical Commissioning Groups**

The CCGs extend their thanks to Healthwatch for the visit and subsequent report. This will support commissioners and providers to build on and enhance care and improve patient outcomes.

## Appendix 1 – A&E Watch Survey Questionnaire

<b>healthwatch</b> Cheshire West	<b>A&amp;E Watch</b>	<b>healthwatch</b> Cheshire East
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1. What made you come to A&E today?

2. Have you tried going anywhere else instead of A&E?  
Yes (please go to Question 3)  No (please go to Question 7 over the page)

3. If yes, where? (Please tick all that apply)  
GP Practice  Walk-in centre  NHS 111  Pharmacy   
Minor Injuries Unit  Other (please specify):

4. Why did you end up coming to A&E after trying elsewhere? (Please tick all that apply)  
I couldn't get an appointment with my GP  A Pharmacist advised me to come   
A GP advised me to come  A Nurse advised me to come   
A Health Care Assistant advised me to come  A Receptionist advised me to come   
Other (please specify):

5. Why was this the case?

6. Which GP Practice are you registered with?  
 I am not registered with a GP



7. If you didn't try going anywhere else instead of A&E, why not? (Please tick all that apply)

It was too urgent/it was an emergency  I've been here before

Because it's more convenient

I looked up my symptoms on the internet and felt I should come

A friend or family member thought I should come

I didn't think I would be able to get an appointment with my GP so didn't try

I was advised to come back here by A&E staff previously if my problem continued

8. Why was this the case?

9. Do you have any difficulties in accessing health care at places other than A&E?

10. How did you get here?

Ambulance/Paramedic (please go to Question 10)  I drove myself

Somebody else drove me (i.e. friend/family member)

Public transport  Taxi  Patient Transport

11. If you came by ambulance, how would you rate the care you received (1 being poor and 5 being excellent)?

- ★
- ★ ★
- ★ ★ ★
- ★ ★ ★ ★
- ★ ★ ★ ★ ★

12. Why would you rate your ambulance experience as you have above?

13. Roughly how long have you been waiting since arriving at A&E?

- 0-1 hour  1-2 hours  2-3 hours  3-4 hours   
4-5 hours  More than 5 hours

14. Are you being/have you been kept informed about timings or delays at each stage?

- Yes  No

If yes, how?

15. Do you know why you have been waiting this amount of time? (Please specify)

16. How would you rate the service you have received so far in A&E (1 being poor and 5 being excellent)?

- ★  
 ★ ★  
 ★ ★ ★  
 ★ ★ ★ ★  
 ★ ★ ★ ★ ★

17. What have you found positive about your experience in A&E?

18. What could be improved about your experience in A&E?

19. Have you used A&E in the past 12 months? Yes  No

If yes, how many times? 1  2  3  4  5+

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We would very much like to know how your visit goes. If you would like to share any comments with us about your care or waiting times, please send back our After Your A&E Visit survey via FREEPOST

**Some details about you:**

First part of your postcode:  Age:  Gender:


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**For Healthwatch Use:**


Hospital:  Completed by:

Thank you for taking part in this survey!

## Appendix 2 – After Your A&E Visit Survey Questionnaire



**After your A&E visit**



Thank you for taking part in the first part of our survey. We would appreciate it if after your visit you could answer the questions below and return the survey in the attached FREEPOST envelope.

**1. How long has it taken from your arrival at A&E to being treated and sent home?**

- 0-1 hour
- 1-2 hours
- 2-3 hours
- 3-4 hours
- 4-5 hours
- More than 5 hours
- I was admitted to a ward

**2. On a scale of 1 to 5 (1 being poor and 5 being excellent), please rate your experience today.**

- ★
- ★ ★
- ★ ★ ★
- ★ ★ ★ ★
- ★ ★ ★ ★ ★

Any other comments about your experience today? (e.g. What was good? What could be improved?)

First part of your postcode (e.g. CW2, CW9, etc.)

This survey and your comments are confidential. You do not need to give your name. However, if you would like us to contact you to talk about your situation you can share your details below:

Name:  Telephone or email:

**Please return this slip using the FREEPOST envelope attached.**

**Thank you for taking part in this survey!**