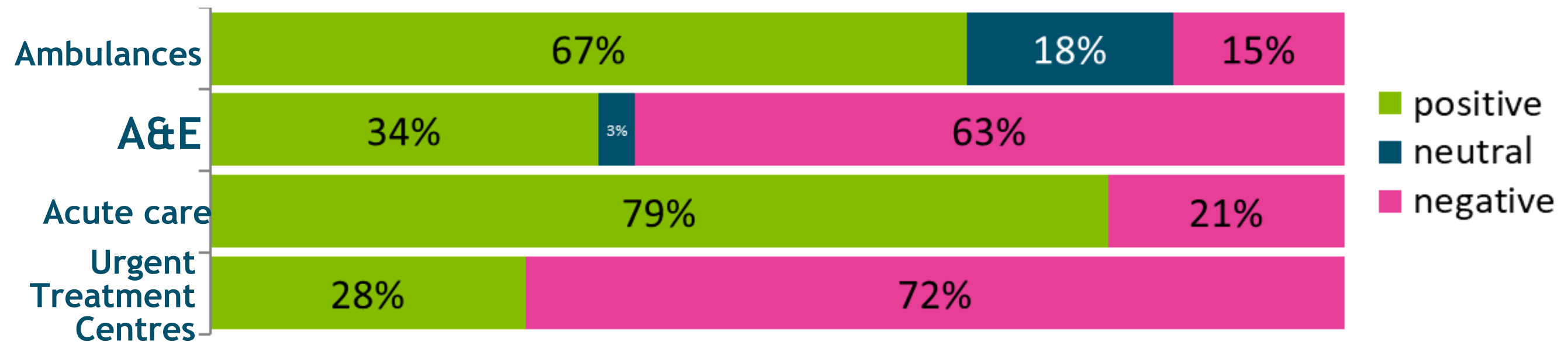
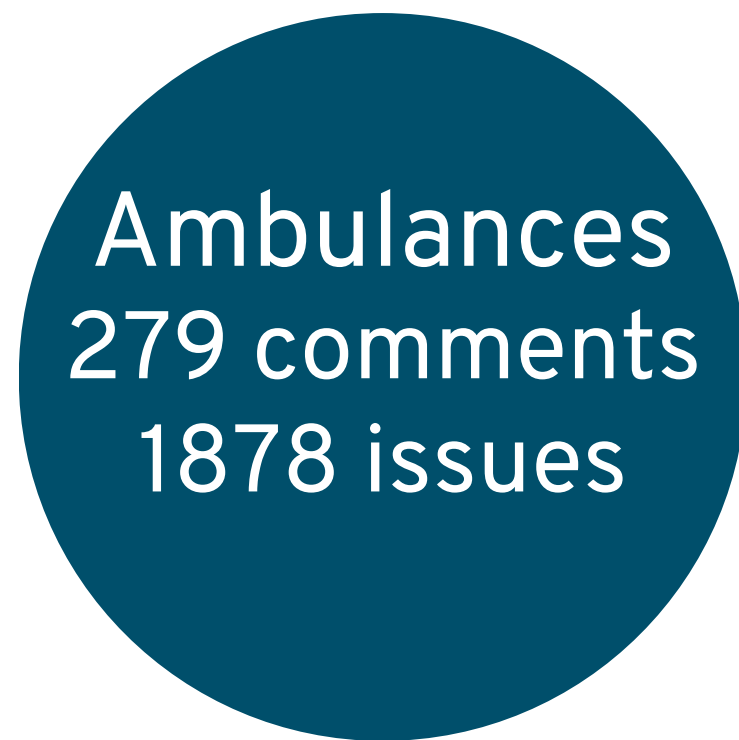


Urgent care in North East London



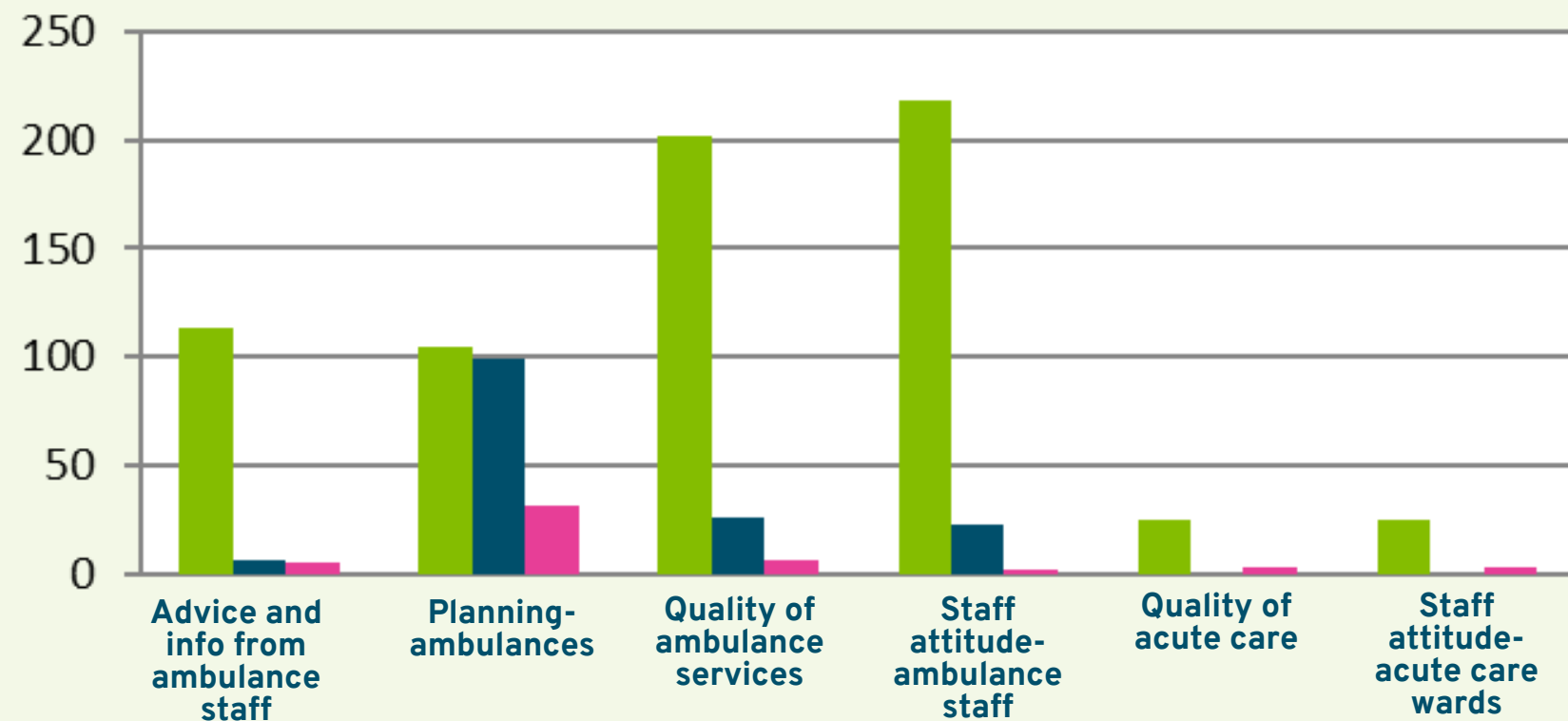
Comments received by Healthwatch between October 2021 and February 2023



Urgent care in North East London

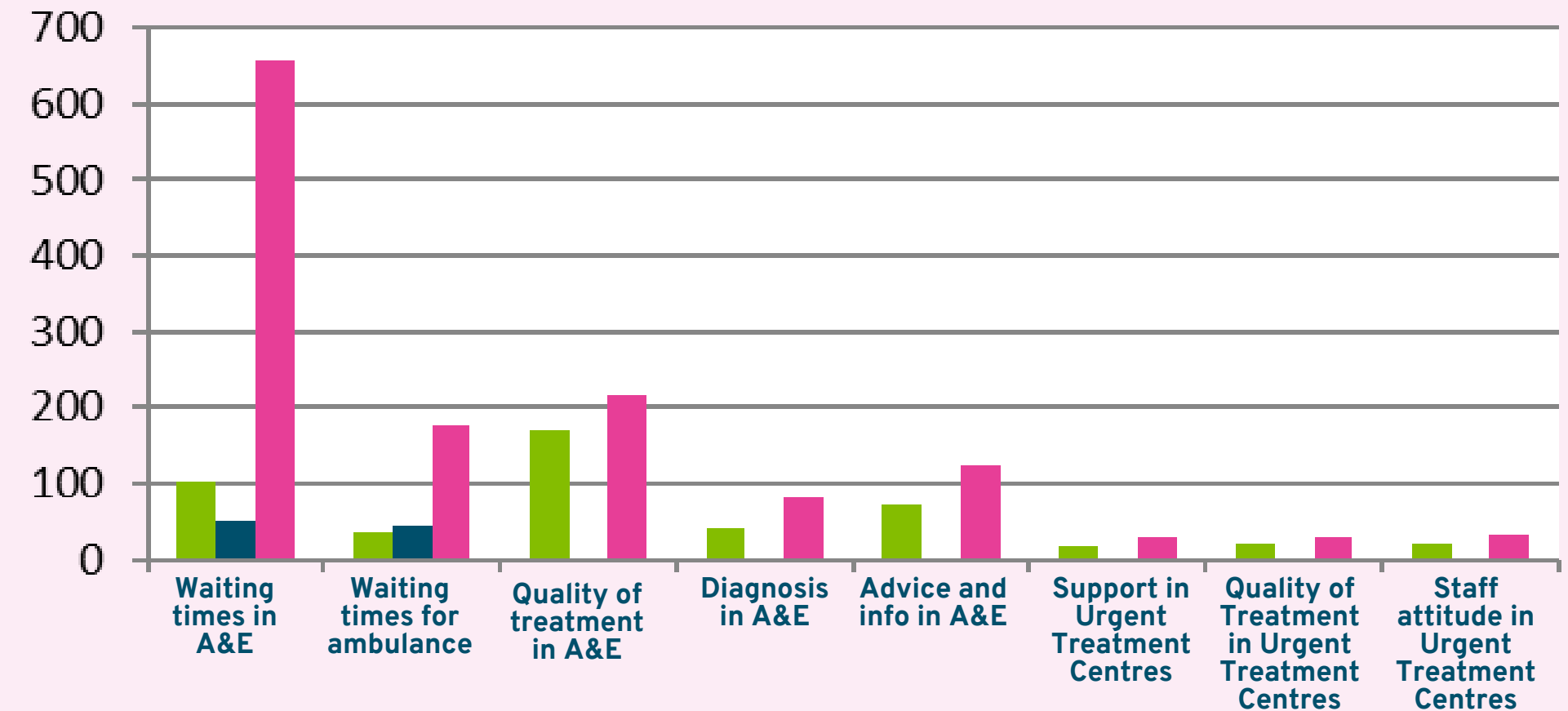


What works well

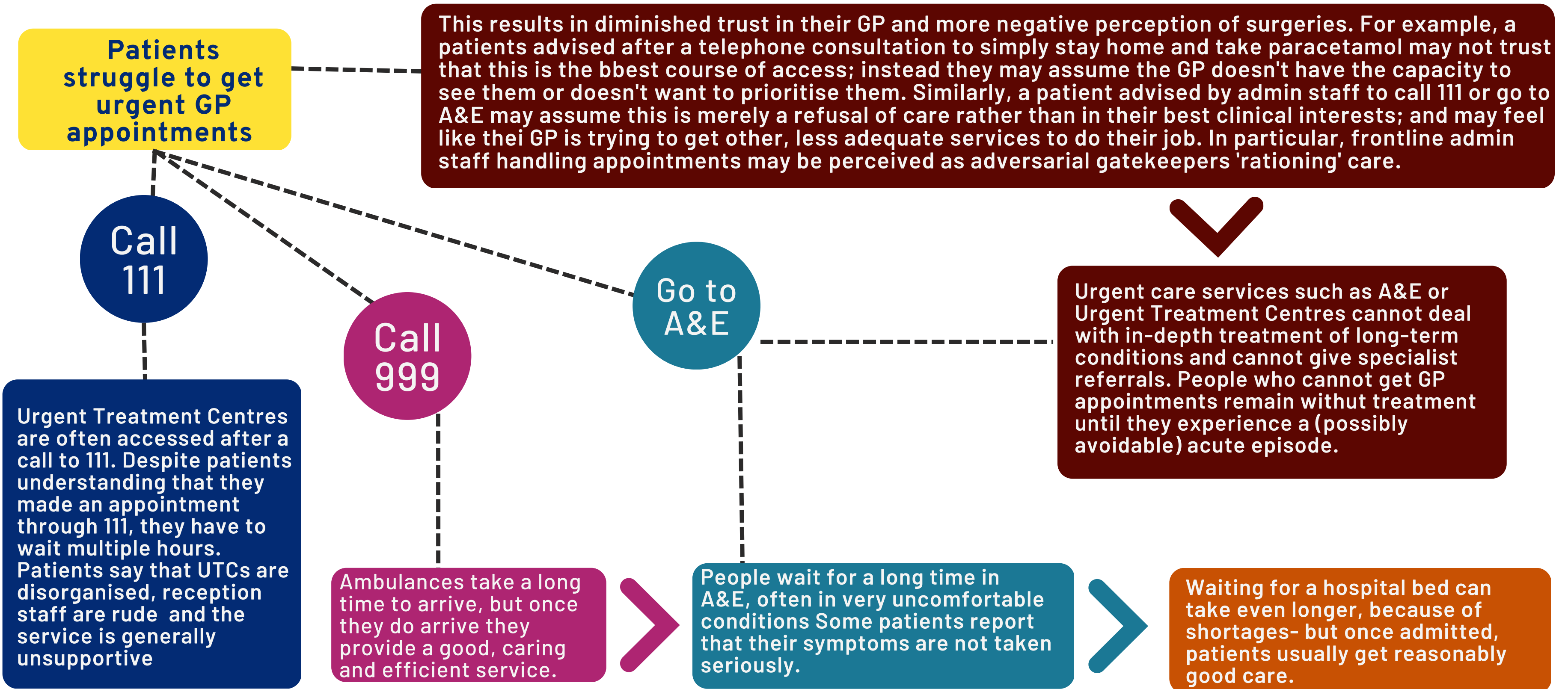


■ positive ■ neutral ■ negative

What needs improvement



Patient journeys



We analysed 127 comments, received between 2019-2022, from patients in Waltham Forest, Newham and Tower Hamlets who accessed urgent care after trying to make a GP appointment, or who expressed concerns that they need to access urgent care services for aspects of healthcare that should be within the remit of their GP instead.

**Source for comments: 76% reviews on NHS Choices and Google, 24% local Healthwatch activities.*

76

**patients ended-up
calling 111 after trying
to access GP care**

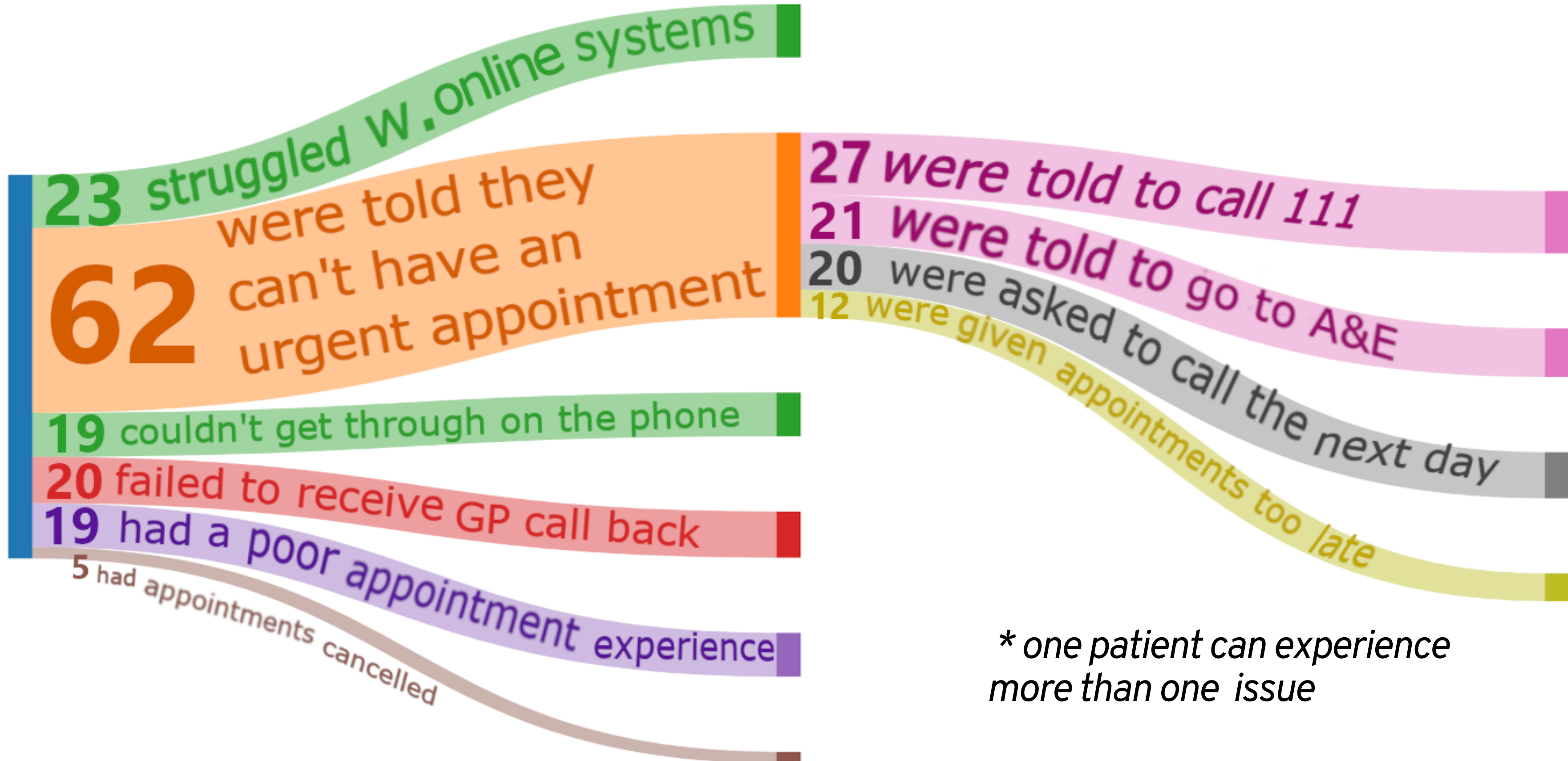
31

**patients ended-up
going to A&E after
trying to access GP
care**

Patients are conscious of wasting NHS resources if they turn up in A&E for issues that could be treated elsewhere; and feel that GPs are failing in their duty of care, or attempting to delegate their own jobs to A&E or NHS 111.

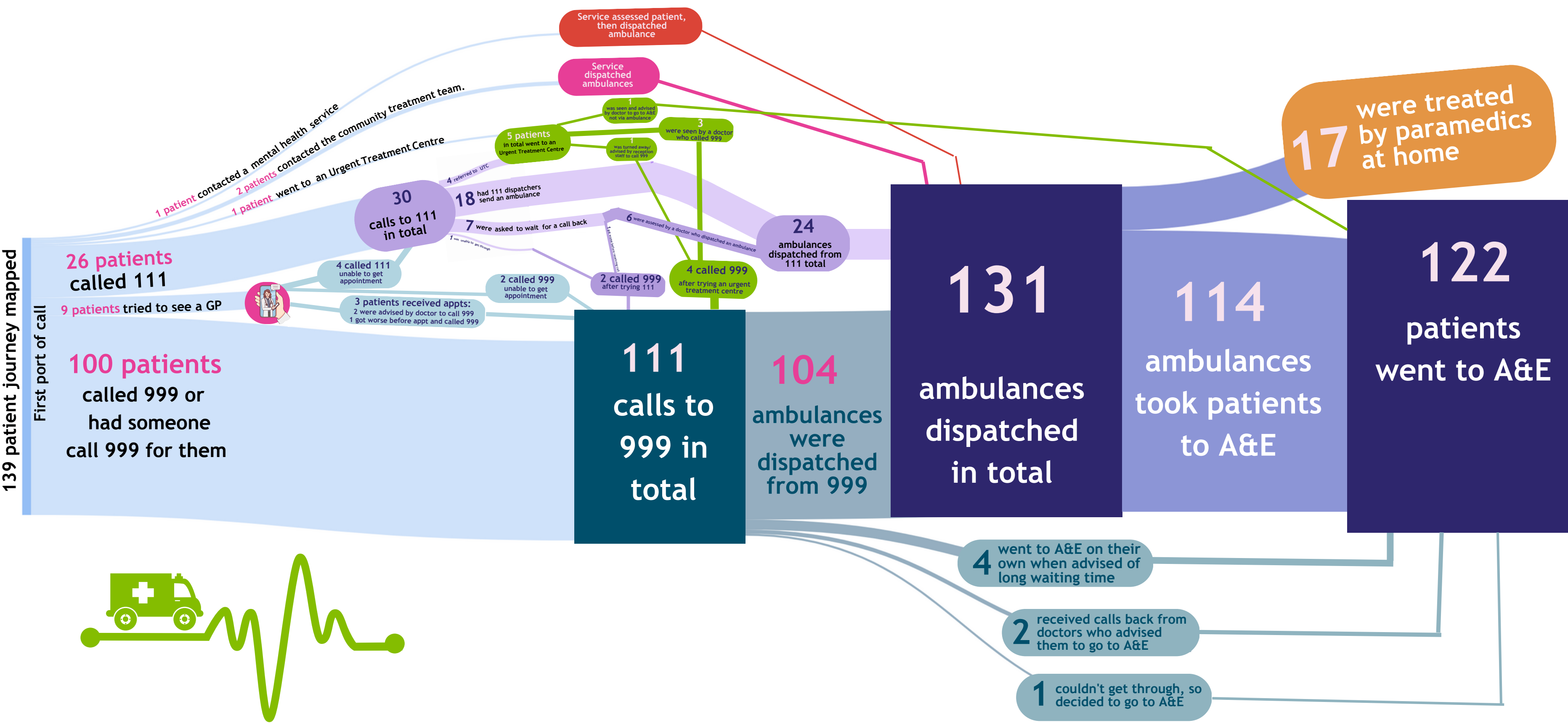
The problems experienced by patients

127 patients



* one patient can experience more than one issue

In 2023, we engaged with 139 people who accessed or tried to access ambulance services (City, Hackney, Havering, Newham, Redbridge, Waltham Forest)



How can we make services more efficient?

Current situation

In order to get same-day **GP appointments**, patients need to call the surgery early in the morning; this is the only way to be seen.

Phone lines are over-stretched and not all patients get appointments. Those who do not may be advised to **call 111** or **go to A&E**.

There are reports of patients being advised by **111** to call **their GP** and *being passed back and forth*. Some patients feel like GPs are trying to push their own triage work onto 111.

Some patients end-up in **A&E** with symptoms that could have been dealt with in an **Urgent Treatment Centre** or **GP Hub**.

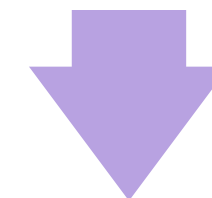
A&E is overstretched, with long waiting times and negative impact on the quality of service.

Urgent care services can't provide long-term care or referrals; they end up passing patients back to GPs who keep signposting them back to urgent services.

Opportunities for change

GP surgeries

Consider how different patients could access services in different ways (e.g- some patients would be open to having **online appointments**, some to attend **in-person appointments** in a hub rather than their own surgery.

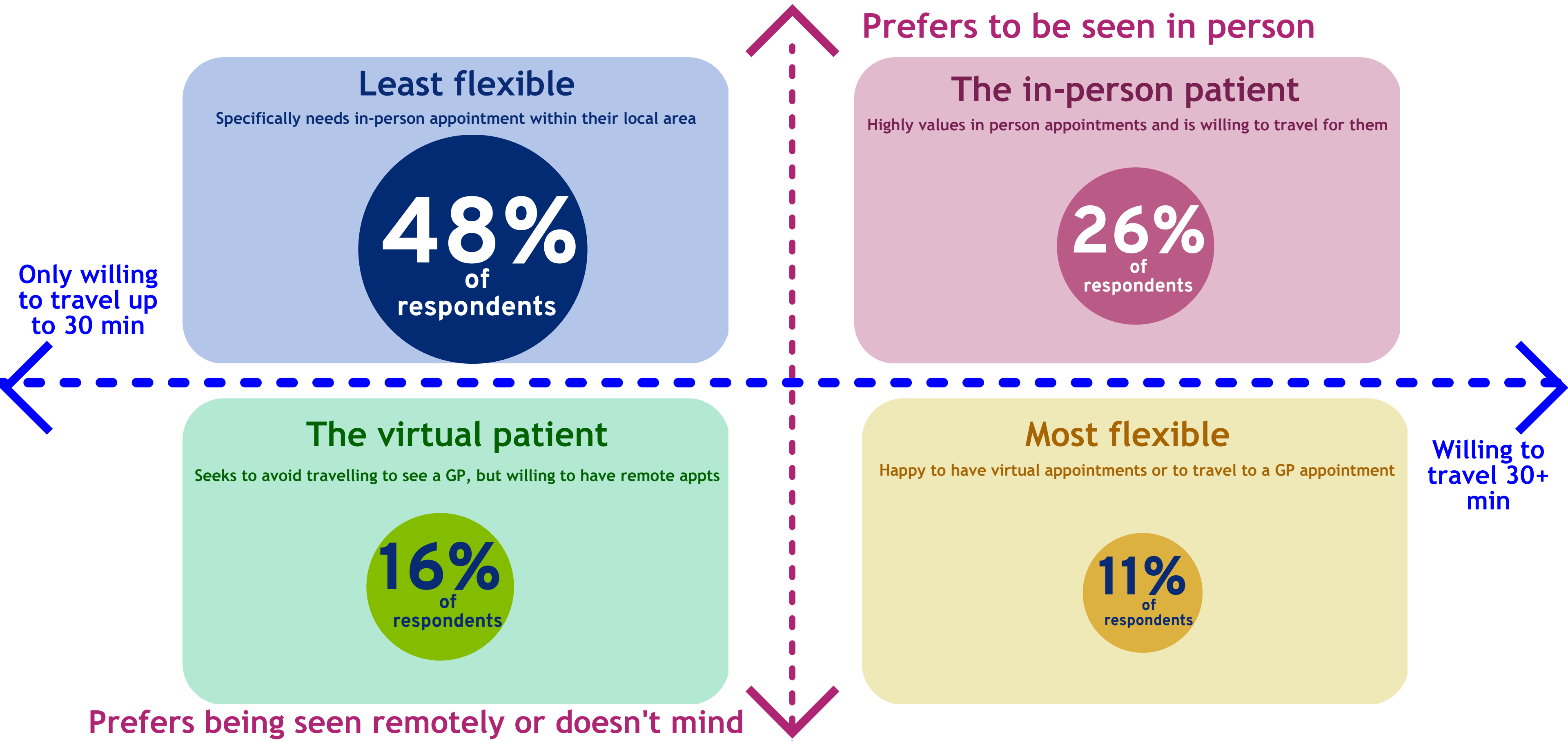


Urgent treatment hubs

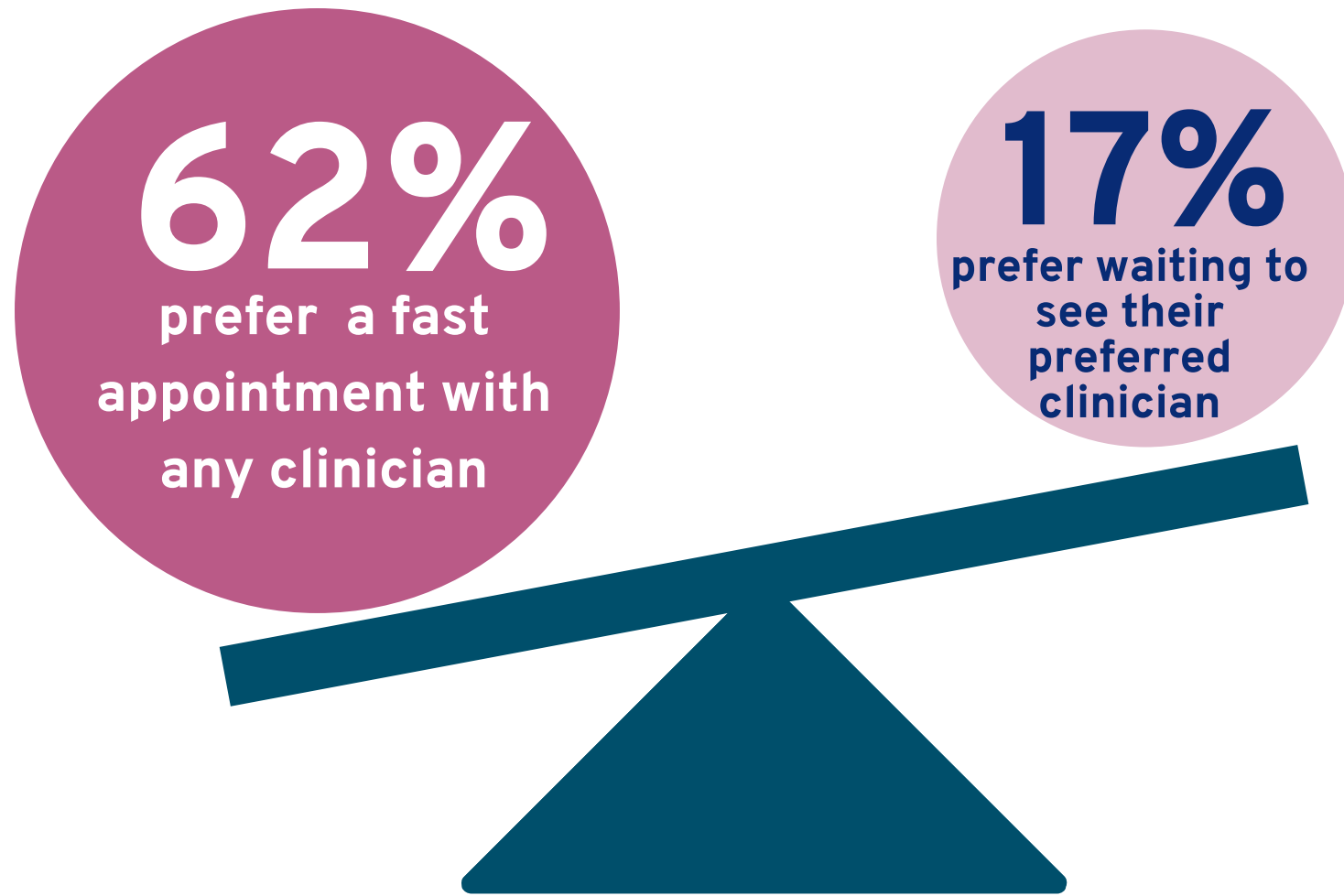
could handle primary care online and in-person appointments from GP surgeries on a same-day basis; they could take over some duties from GPs (issuing repeat prescriptions, giving referrals) while providing non-life threatening urgent care and reducing pressure on A&E.

Access to those should be possible in multiple ways (e.g phone or online booking, walk-in etc.)

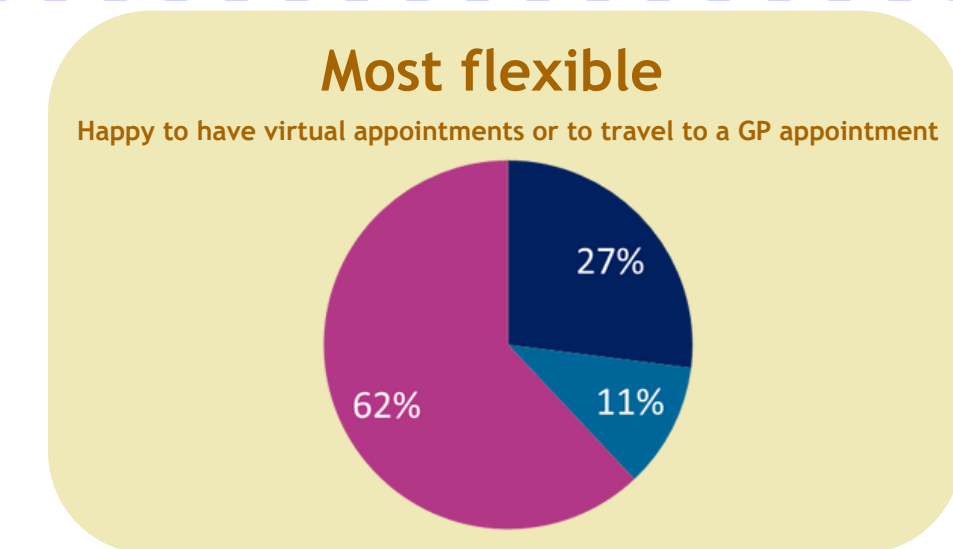
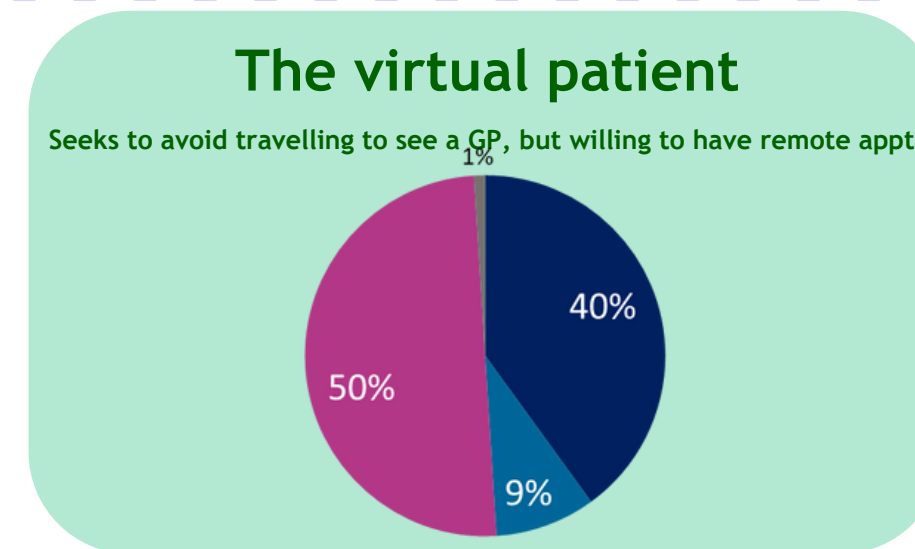
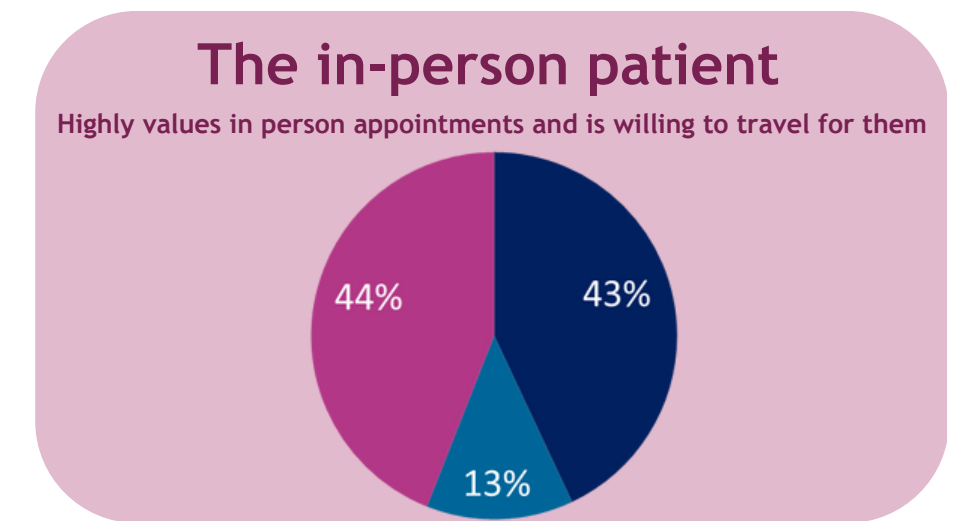
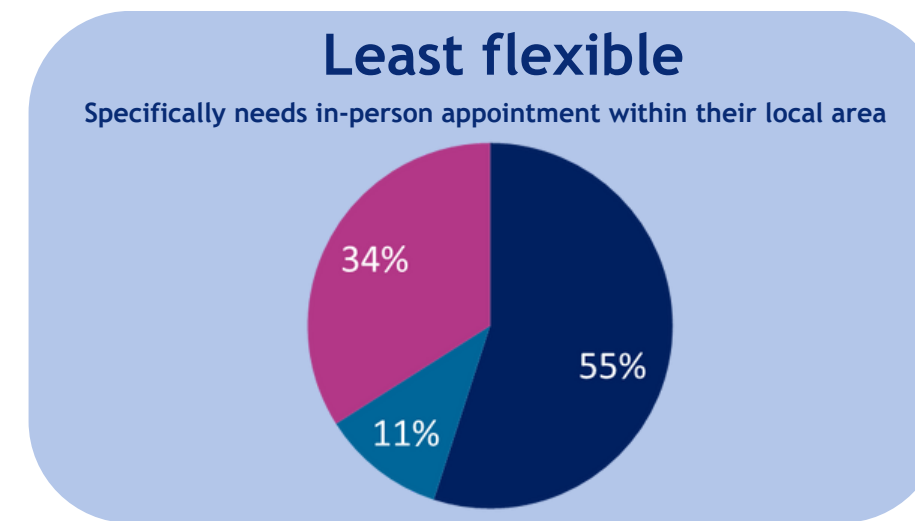
We have analysed data from the NEL Extended Opening Hour survey to determine how different patients prefer to access primary care.



We have analysed data from the NEL Extended Opening Hour survey to determine how different patients prefer to access primary care.



Preferred booking method



- Calling the practice
- Using a booking line
- Booking online

Unblocking the pipeline

