Blackpool Victoria Hospital Accident & Emergency review

January 2016

Healthwatch Blackpool





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1 Introduction

1.1 Details of visit

Details of visit:		
Service Address	Accident & Emergency, Blackpool Victoria Hospital	
Service Provider	Blackpool Teaching Hospitals	
Dates of Visit	28 th & 29 th January 2016	
Researchers	Steven Robinson, Steven Garner, Valerie Pemberton, Kim Rushton and Anish Verma	
Healthwatch Blackpool Contact details	0300 32 32 100 (opt #7)	

1.2 Acknowledgements

Healthwatch Blackpool would like to thank the service provider, service users, visitors and staff for their contribution to this consumer review. We would also like to thank Healthwatch Lancashire for their support.

1.3 Disclaimer

Please note that this report relates to findings observed on the specific dates set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

2 Purpose of the visit

In April 2015 Healthwatch Blackpool surveyed Blackpool residents to discover issues they have with health and social care services. We received many responses sharing both positive experiences of Blackpool Victoria Hospital's Accident and Emergency department. We wanted to speak to people attending A&E to learn more about their experience, why they attended and if they were aware of or had considered any alternatives.

There is also a national "Think! Why A&E?" campaign to reduce demand on A&E admissions, with many signs at the hospital. It suggests people take the following actions: Contact 111 to seek general advice or have fever/rashes Visit walk-in centres for sprains, strains, cuts and itches Visit the pharmacy for prescription refills/diarrhoea/stings Visit GP for back aches, blood in pee etc. Self care for colds and sore throats Visit A&E for difficulty breathing, chest pain, and life threatening illnesses



2.1 <u>Methodology</u>

Healthwatch Blackpool wanted to learn why people chose to come to A&E. Were they told to by another medical professional, through a call centre such as 111 or were there other reasons that influenced their choice? There are many reasons why A&E isn't always the most appropriate place for medical issues and the campaign by the NHS reflects this. Healthwatch Blackpool felt that while the accident and emergency department at Victoria Hospital is situated in Blackpool many of the residents who attend seeking help and support come from the Fylde coast. Therefore we invited Healthwatch Lancashire to join us on this piece of work, who assisted in the delivery of the review.

Blackpool Victoria hospital operates a unique accident and emergency department. On arrival you are triaged by the reception into more 'traditional' A&E services or primary care, an appointment based afterhours service. This triage is done by using a computer algorithm to work out the best place for a particular patient to go based on their needs and as much medical history available. NHS 111 operates a similar system where the caller is asked several questions and then either sent to accident and emergency or if available given a primary care appointment.

After a planning session with Healthwatch Lancashire and some discussion with the hospital and Fylde Coast Medical Services (the service provider for A&E and primary care), we felt that we should visit primary care as well to ask why people attending this service also decided to attend the hospital. Using this approach we would reach as many people as possible. We visited Blackpool Urgent care centre (A&E and primary care) over 2 days at 3 different times.

Thursday 28 th January 2016	13:00 - 17:00 and 18:00 - 20:00
Friday 29 th January 2016	09:30 - 13:00

We designed a questionnaire to discover patient's knowledge of what choices available to them. We did not supply answers to these questions to respondents, however we did have a prompt list. This way we could also ask respondents if they were aware of other services enabling them to indicate if an option was previously unknown to them, or if they did not consider it an option for themselves. We designed the questions to act as prompts and conversational starters. While it was not our intention to make recommendations or ask questions about the staff or the quality of service, we included a question about any changes they did have that might make people choose other alternatives to A&E.

We did not want to discuss individual patient illnesses or conditions as we felt the waiting area was confined and privacy should be respected. We also ensured all our volunteers and staff were DBS cleared and fully briefed on patient privacy and respect. We maintained a table at the entrance and had volunteers in the 3 waiting rooms around the hospital: A&E waiting room, Primary care, and the Children's A&E waiting room.

The questions we asked were:

- We don't need the exact details of your condition but in your opinion do you feel that Accident and Emergency is the best option for you at this time?
- What other NHS options are you aware of that you could also use?
- Did you contact any of the above before coming to A&E?
- Would you consider using other NHS options next time you have a medical emergency?
- Do you have any suggestions or changes that you feel would improve patient experiences or reduce people going to A&E?



2.2 <u>Results of our visits to Blackpool Victoria Hospital</u> <u>Accident and Emergency department</u>

During the 3 days we attended A&E we spoke to 61 people.

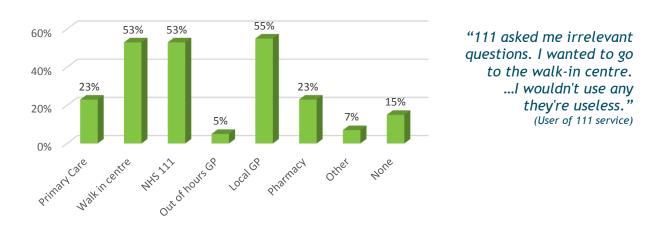
Do you feel A&E is the best option for you at this time?

85% - Yes	"I had a bad experience at the other services"
03 /0 - Tes	"I wanted my GP but couldn't get an
15% - No	appointment so I rang 111 and
	they said to go to A&E"

Around **20%** of the people we spoke to told us they only attended due to the hospital having an x-ray facility.

"If the walk-in [centre] did x-rays I would have gone there." "I wanted to go to Fleetwood [Health and Wellbeing Centre] but was told by 111 to go to A&E."

What other NHS options are you aware of that you could have also used?



The majority of people knew at least 3 different services they could potentially access in the event of them requiring medical treatment. 75% of people indicated to us they were aware of both the walk in centre *and* their GP as options for them to use.

Did you contact any of the above before coming to A&E?

66% of people *did* contact an alternative before visiting A&E and were told to attend. Several respondents expressed frustration about visiting places they didn't intend to go. Many of those who wanted to go to the walk-in centre or to their GP were unable to do so for several reasons such as lack of availability for brief or same-day appointments. *(Please see feedback comments on page 7 for further information)*



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We asked people to tell us if they were told to come to A&E. We wanted to know who told them to attend. Of those who were told by other services to attend:

- **70%** told us they ended up in A&E because they contacted 111.
- 1 in 10 said they were told to attend by their GP.
- One individual told us that due to the difficulties parking at the walk-in centre they were left with no choice other than come to A&E.
- Some respondents said they felt they needed an x-ray which meant they couldn't go to the walk-in centre.
- The remaining had been sent by hospital departments due to no beds or as a medical emergency.

70% of people said that 111 told them to attend A&E. Many of those said that 111 *always* sent them to the A&E department when that rang them.

We only saw 10 people from Primary Care, all of whom had called 111 before attending.

Would you use NHS alternatives next time you have a medical emergency?

Overwhelmingly **80%** told us they would use NHS alternatives the next time they had a medical emergency. Many people were either concerned about the long waiting times, guided by their preconceptions and experiences of A&E departments or more informed to weigh up their options. "I phoned the GP, they told me to come into the walk-in centre so I phoned 111 to get an appointment. They sent me here [to A&E]. There is a perception that A&E is full of drunks and people on drugs so I really didn't want to come here."

"[I'd like] more awareness of other services. We wouldn't be here if we knew of somewhere else."

"No, I'd never use 111. They just say go to A&E. I'd prefer not to use out of hours [services] so I came here. I'm not satisfied with 111 [or] the emergency GP. I'm not satisfied they gave me an antibiotic which I'm allergic to."

"If I needed an x-ray I'd go to A&E. If I didn't I'd go to the walk-in centre."

"I'd use the walk-in [centre] but I don't know enough information about it... is it open on the weekends?" Many of the 20% who said they would go straight to A&E told us they would do so because they have had a bad experience with the other services. We were often told that '111 just send you to A&E so why bother ringing them'. Other told us they didn't have enough information or they felt A&E was the best choice for their situation.



Do you have any suggestions or changes that you feel would improve patient experience or reduce people going to A&E?

Many of the people we spoke to on the day told us if they could get better access to their GP, an x-ray at the walkin centre and more information and awareness of the other services they'd consider them in the future and not attend A&E.

55% of the people that we had spoken to considered their GP before attending whilst **10%** were sent by their GP. People felt that if they could get a GP appointment on the same day they wouldn't have come to Accident and Emergency.

Many of the people we spoke to were attending due to suspected broken bones, especially in the children's waiting room. They felt their experiences could be improved if the waiting room was more grown-up and not just for toddlers, as well as xrays being available at the walk-in centre. *"If we could get quicker GP appointments that'd help. But every time we phone 111 they tell us we have to call back after 6:30 for us to get an appointment with out of hours."*

"Same day appointments at the GPs"

"GPs could be open on weekends. They can't expect you to get III or injured just when they are open."

"Very small waiting area. [There is] no immediate parking for people coming to A&E; it's on a hill which is hard for people with poor mobility."

"I went to the walk-in centre, their x-ray service was closed so I had to come [to A&E]. I had to be seen before they told me the same thing: I needed an x-ray. I couldn't go straight to [the x-ray department] which took time. If the walk-in centre x-ray was open longer I could have been seen quicker."

"Waiting times, information and seating. I have to wait to be told I need an x-ray, why can't I just go? I've got a suspected broken bone. I've not been given any other information - I'm standing in the corridor [there's] nowhere to sit."

"Having awareness of what the other services do. Also the schools should of aware of other services. The children's waiting room is very child like the chairs are too small for adults and older children. It's more for babies and toddlers not young people."

What changes could be made that would reduce people attending A&E?

"If the person can't see their doctor quickly enough they rely on the walk-in centre for urgent appointments."

"I'm always told to go to A&E by 111, they should send me somewhere better."

"I would have gone to the walk-in centre but the last time I was there I waited 7 hours. I'd have gone to the GP but can't get same day appointments"

"I only came here because I can't get an appointment with the GP. Even if I phone at 8 in the morning I can't get an appointment the same day."



2.3 Additional comments and anecdotal evidence from attendees of Blackpool Victoria Hospital's A&E department.

"I'm pregnant and I've just moved home. I haven't had time to change my address with my GP or anyone yet. I was worried so I phoned 111 they told me to come here."

"We came in last night but there was a 5 hour wait and she wouldn't have got any pain relief until she was seen. We came back today [the following morning] for an xray."

"I've been sat in the corridor in a wheel chair for 4hr 45mins. [I've had] no pressure relief. I've got my carer with me who's having to stay late. I've not been given information why I'm here I was told my blood results would be back in an hour it's now been over 2."

"I was sent from cardiac centre; been here since 12:45 [it's now 18:35], I'm here alone, I've no money or food and I've not been offered any [food or drink]."

"There are no beds free for gastro[enterology] admissions, I was told to go to A&E by the [gastroenterology] consultant."

"I've been waiting for 3 hours just to get an x-ray referral, why have I waited so long?"

"I'm satisfied but it's a long wait, I saw the nurse on arrival. I think we're now waiting to see the doctor but not had further information."

"Parking is a nightmare. However the staff are lovely they even brought me a chair."

"I came in last night but [A&E] didn't give me a bed so they asked me to go home. Then [A&E] asked me to come back at 2pm but they have just given me a scan and I'm waiting for them to find out what my issue is. I went for a chest x-ray earlier but there were no bays so I had to get changed in the toilets. My GP said to come for a scan but I've no idea what I'm supposed to do now."



2.4 **Findings**

- 1. It was felt that 111 send too many people to A&E and people were put off contacting them because they felt they knew what they were going to say.
- 2. Many people attended requiring x-rays, and there appeared to be a lack of knowledge around other services which provide them and when they are available.
- 3. People with additional care needs and pre-diagnosed conditions such as diabetes were waiting long times without food or drink and didn't have money for machines.
- 4. People expect waiting times and so they do not wish to come to A&E. They would like information on other services and options.
- 5. Many people told us the waiting room was full. (When we visited on the Thursday evening it was very busy and we saw many people standing for hours. This wasn't an issue on the other times we visited).
- 6. **75%** of people are aware of both the walk-in centre and their GP. 79% of these said they and would use either of them the next time they need emergency medical care.
- 7. There was a lot of positive feedback and respect for the staff, with an acknowledgement that they are doing the best job that they can. It appears that time, resources and demand on the service are the main issue for people awaiting treatment.
- 8. Community health services and other hospital departments do not appear to be joined-up with A&E resulting in a burden on the emergency services. Based on responses given to Healthwatch Blackpool the issues appear to be:

- A high volume of 111 referrals to A&E. Resulting in pressure on a service which isn't informed or aware of the potential and likely demand it's about to face.

- Lack of explanations of choice before attending A&E.
- GP surgeries quickly exhausting their amount of available same-day emergency appointments.

- An apparent inability for other services (such as GP surgeries, cardiac centre etc.) to make bookings at Primary Care or alternative services to ease the pressure on the urgent care department.

- 111 are unable to book out-of-hours appointments until 6.30pm.

- Those told at an alternative NHS services (such as GP or walk in centre) that they require an x-ray, then they attend A&E to wait only to be told they need an x-ray again wasting their time. <u>(In some cases around 6 hours)</u>

- Other in-house hospital services (such as gastroenterology) reportedly sending patients to A&E when they are unable to provide a bed.

- A lack of communication to the patient between triage, nurse and consultancy stages of treatment and outcomes of results.

This report and its findings have been given to the service provider for a response and actions they will take as a result of them. The response will be provided in the next section.



2.5 Service Provider response

2.6 Demographic information

Healthwatch Blackpool spoke to 61 individuals over the 3 days attended at Blackpool Victoria Hospital.

Age Range	<u>%</u>	Gender	<u>%</u>
Under 16	29%	Male	27 %
17-34	30%	Female	63%
35-54	17%	Background	
55-74	19%	White British	95 %
Over 75	5%	Asian Indian	3%
		Chinese	2%

