



Urgent Care Service Review

November 2017

Engaging Communities
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Contents

Executive summary	3
Introduction	5
Background	6
Healthwatch Solihull's role	8
Plan & Methodology	9
Methodology	9
Demographic of respondents	9
Quality plan	11
Findings	12
Arrival at the service	12
Knowledge of service	14
Accessibility of service	16
Experience of the service	19
Service reception	19
Surroundings in the service	22
Facilities in the service	24
Experience with staff	26
Satisfaction with service	31
Conclusions	32
Recommendations	33
Appendix	34
Demographics	34

Executive summary

Arrival at the service

- 56.45% chose to visit Urgent Care themselves rather than being referred
- The majority of respondents knew to come to the service as they had used the service previously.
- 64.71% used Urgent Care Services as they were unable to get an appointment with their GP.
- Respondents reported being confused about the lack of an A&E Department at Solihull Hospital as some reported they were attending for 'emergency care' reasons.

Knowledge of service

- 47.27% of respondents reported that they did not know what services they could access through Urgent Primary Care, Acute Medical Unit and Minor Injuries Unit
- The majority of respondents also reporting using another service prior to attending Urgent Primary Care, with most commonly citing their GP (38.10%).

Accessibility of service

- Respondents found it somewhat easy (36.67%) or extremely easy (31.67%) to find the services.
- 55.26% of respondents in Urgent Primary Care reported that they did not know which reception desk to report to.
- It was also observed that while there were signs to show the way for booked primary care, there was no clear signage for walk-in primary care.
- A case study also highlighted confusion about the language used, particularly in reference to 'booked in'.
- Researchers also observed signage issues, as signage still states that there is an A&E department. Additionally, the main entrance lists 'Minor Injuries' and 'Urgent Primary Care' with no 'Urgent Care' centre/ services being referred to.

Experience of the service

Service reception

- Respondents felt that they had a good experience of the service reception in terms of privacy, friendliness of staff, helpfulness of staff and understanding of staff.

- 46.15% reported that information was made available about how respondents could make a comment, compliment or complaint.

Surroundings in the service

- Respondents felt that the surroundings were largely very good or good in terms of cleanliness, lighting, decoration, room temperature, comfort of seating, availability of seating and condition of toilets.

Facilities in the service

- Overall, information posters, information leaflets and signage were reported to be good.
- Access to wifi was largely reported to be not applicable as participants report not being able to get on the network, as well as not even being told that there was any wifi around.

Experiences with staff

- 60.61% of respondents reported that they had waited less than an hour before being seen for triage.
- The average observed waiting time to be seen by a Consultant or for treatment varied between 1-3 hours, depending on the time of day.
- 66.67% of respondents in Minor Injuries Unit felt that the person who treated them did not give them their name, while 55.56% of respondents in Urgent Primary care felt that the person who treated them did give them their name.
- 11.11% of respondents in the Minor Injuries Unit and 55.56% of respondents in Urgent Primary Care felt that the person who treated them did explain their job role/title.
- 29.63% of respondents did feel that they were given enough time to explain their problem to a clinical member of staff (triage/nurse).
- When asked how they felt they were treated, the majority of participants agreed that they were treated with dignity and respect and were treated well overall.

Satisfaction with service

- Majority of respondents felt extremely satisfied (19.23%) or somewhat satisfied (57.69%) with the service that day.

Introduction

Healthwatch Solihull is the independent consumer champion for health and social care in Solihull, delivered by Engaging Communities (ECS). Our job is to champion for the consumer interests of those using health and social care services across the borough and give local people an opportunity to speak out about their concerns including their health and social care priorities.

Our reports are designed to be transparent, clear and easily accessible that create sustainable improvements in the delivery of services.



Background

Heart of England NHS Foundation Trust (HEFT) operates Heartlands, Solihull and Good Hope Hospitals. Heartlands and Good Hope Hospitals have Accident and Emergency (A&E) departments, while Solihull Hospital does not and rather has operated a successful Minor Injuries Unit for a number of years.

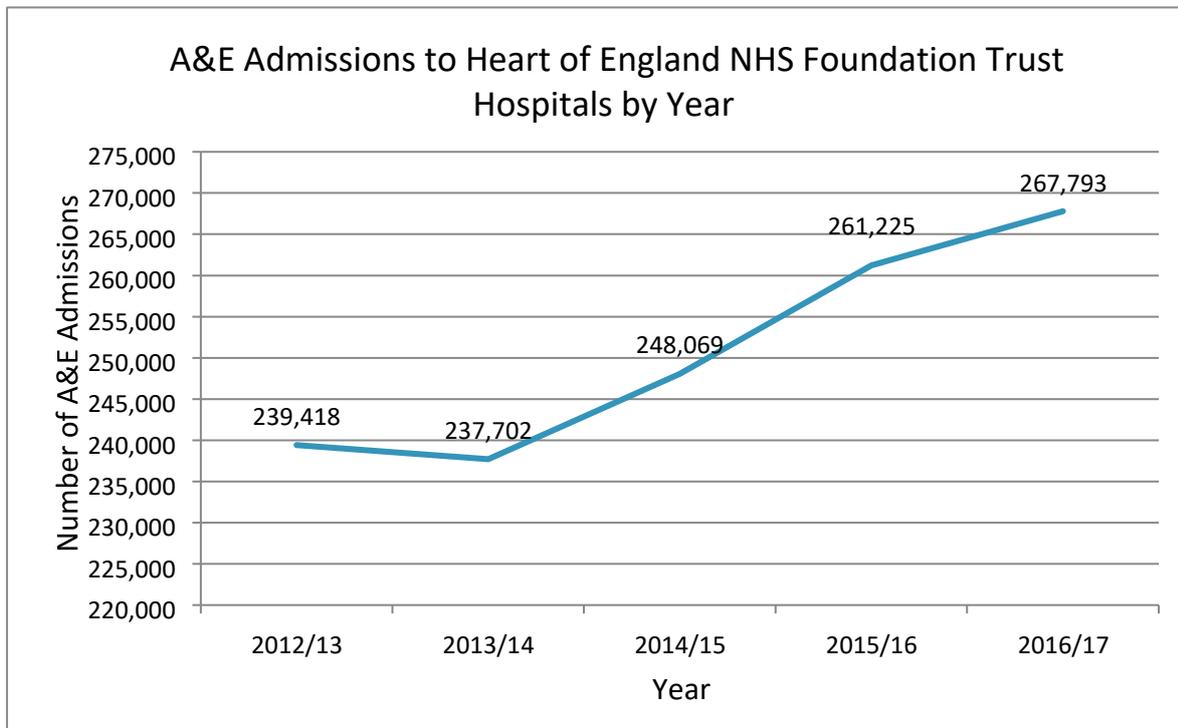
Over the five years from 2012 to 2017, all three hospitals operated by HEFT saw an increase of 28,375 patients admitted to their A&E's¹ and therefore identified a need for Urgent Care Centres (UCC), Walk-In Centres and Minor Injuries Units to take the pressure off A&Es. UCC, Walk-In Centres and Minor Injuries Units are all classified by the NHS as Type 3 A&E services and these see around 7 million visitors every year in England². Urgent Care Services are

¹ Heart of England NHS Foundation Trust Annual Report and Accounts, yearly

²

<http://www.nhs.uk/NHSEngland/AboutNHSservices/Emergencyandurgentcareservices/Pages/Minorinjuriesunit.aspx>

intended to take the pressure off Type 1 A&E departments and provide care when a GP is unavailable.



In Solihull, Solihull Hospital was struggling to meet the demand for emergency care, particularly in the winter³. Walk-In Centres in the wider Birmingham area were also under review and the contracts for both Solihull's walk-in and out-of-hours service were up for renewal, as was the building lease for the Walk-In Centre. In addition, Solihull Hospital received a rating of 'Requires Improvement' for urgent care in its 2014 CQC review⁴. This review was carried out in the context of a wider review of urgent and emergency care in England, following the publication of the Keogh Review in November 2013. In particular, the Keogh Review recommended using the name 'Urgent Care Centre' to reduce confusion among patients faced with a choice of Walk-Ins, Minor Injuries Units and other branches of Urgent Care Services⁵.

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<http://eservices.solihull.gov.uk/mginternet/documents/s8328/Urgent%20Care%20Consultation%20and%20Engagement%20Final%20Report%20v2%20pdf.pdf>

⁴ http://www.cqc.org.uk/sites/default/files/new_reports/AAAD4967.pdf

⁵ <http://www.nhs.uk/nhsengland/bruce-keogh-review/documents/outcomes/keogh-review-final-report.pdf>

For these reasons, HEFT and Solihull CCG drew up a proposal to streamline urgent care at Solihull Hospital and create a new Urgent Care Centre (UCC). A public consultation was carried out from January to March 2014 to gauge the public's opinions about the proposed UCC. 91% of respondents agreed that the current urgent care provision at Solihull Hospital should be continued, with 89% agreeing that the service should be simpler, less confusing to access and therefore safer³. 91% of people said that walk in GP services should be maintained and 90% agreed that an out-of-hours GP service should be available³. 83% of people agreed with the overall vision of the Clinical Commissioning Group that the UCC should be a joined-up service working around the needs of the individual and 76% agreed with the idea of urgent care at Solihull Hospital being delivered under one roof, with one front door and one reception³. People also agreed that the UCC should offer a Minor Injuries Unit (86%), walk-in GP (85%), walk-in nursing service (82%), hospital admissions via the medical assessment unit (74%), DVT service (71%), pharmacy services (70%) and emergency contraception provision (56%)³. 87% of people felt that the centre should be open 24 hours, 7 days a week, and 72% agreed with the name "Solihull Urgent Care Centre" being used³. In general, the response to the proposal was positive, and gave the CCG a mandate to go ahead with the plans.

As a result, at the end of October 2016, the temporary Walk-In Centre was closed and Urgent Care Services transferred under the same roof as the Minor Injuries Unit to form the Urgent Care Centre (UCC)⁶. It was proposed that the Solihull UCC would consist of:

- Urgent Primary Care
- walk-in service for minor injuries
- Booked Primary Care (a referral based service that patients are directed to through NHS 111 or the out-of-hours GP).

The UCC was designed to make the process of accessing urgent care more straightforward to patients, offer care when a GP appointment was unavailable and relieve pressure from A&E Departments.

⁶ <http://solihullccg.nhs.uk/publications/walk-in-centre/2065-frequently-asked-questions/file>

Healthwatch Solihull's role

Since the UCC's implementation, Healthwatch Solihull have been interested to find out patients' experiences of the new service. The objective of the research would be to identify if the proposed plans for the UCC are designed and carried as per the consultation proposal and to see if the UCC is indeed, offering better care for patients. The key areas that Healthwatch Solihull planned to look at was regarding:

- Patient experience about the environment and facilities within the urgent care setting
- Is there 'one roof, one entrance, one reception' housing walk-in GP, booked appointments, Minor Injuries Unit and the Acute Medical Unit (AMU)?
- Do patients experience a 'joined up' experience when they visit the UCC?
- Are consultations given on a 'see and treat' basis rather than a triage approach?
- Do local people know what is on offer at the UCC, and what help can be sought prior to visiting the UCC?
- Are patients seen within the 2 hour Heart of England Foundation Trust target (national target time 4 hours)

Plan & Methodology

Methodology

A total of 71ⁱ surveys were undertaken with patients using urgent care services at Solihull Hospital focusing on patients who were using the Minor Injuries Unit and the Walk-In/Booked Primary Care service. These also include 2 case studies conducted with patients who offered more insight into their experience. Findings are divided into sections:

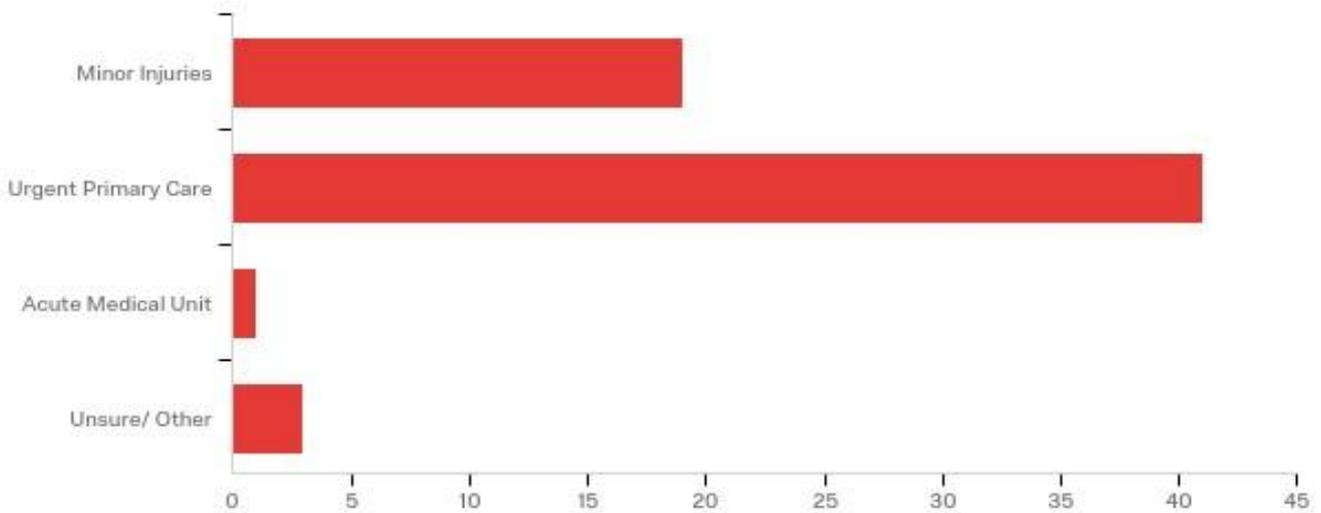
- Arrival at service
- Knowledge of service
- Accessibility of service
- Experience of service

Quotes from free-text survey questions are reflected in blue. Exact response numbers are denoted by the letter, n, next to the percentage representation. Data regarding demographics and percentages are weighted for to ensure that the sampling is representative.

Demographic of respondents

Of the total responses gathered, 64.06% (n=41) of survey respondents were mainly using services at Urgent Primary Care, while 29.69% (n=19) of respondents used Minor Injuries.

For Urgent Primary Care, 94.87% (n=37) of respondents were walk-in patients.



Of these respondents, the demographic breakdown is as follows. Only the top 2 largest responses per demographic category are listed here. Detailed breakdown of categories can be found in the Appendix section:

Demographic	Demographic category	Percentage of total responses	Count
Definition of gender identity	Male	32.73%	18
	Female	67.27%	37
Age	18-29	27.27%	15
	30-39	27.27%	15
Ethnic group	White English/Welsh/Scottish/Northern Irish/British	61.11%	33
	Asian/Asian British- Pakistani	12.96%	7
Religion or belief	Christianity	39.62%	21
	None	39.62%	21
Relationship status	Married	47.17%	25
	Single	22.64%	12
Sexual orientation	Heterosexual/Straight	92.16%	47
	Bisexual	3.92%	2
Pregnant or have given birth in the last year?	Yes	5.66%	3
	No	88.68%	47
Disability (if any)	None	82.35%	42
	Mental Health condition	5.88%	3
Postcode*	B90	15.09%	8
	B28	15.09%	8

*Note: 3.77% (n=2) of participants were from North Solihull, 39.62% (n=21) were from South Solihull and the remaining 50.94% (n=27) were from outside of Solihull (including Birmingham).

Quality plan

Healthwatch Solihull abides by the quality standards and data protection policy as set by Engaging Communities Staffordshire (ECS). ECS has a responsibility to ensure that the research it undertakes and creates is of high quality and aligned to best practice across the industry. Research ultimately provides the evidence on which sound decisions should be made, which is why it is important to state up front how quality was ensured during this project. The Research team underpins its research activities by applying the Market Research Society Codes of Conduct (MRS, 2014). ECS is a company partner of the Market Research Society. During this project, Healthwatch Solihull adhered to a strict data protection policy that ensured that:

- Everyone handling and managing personal information internally understands they are responsible for good data protection practices;
- There is someone with specific responsibility for data protection in the organisation;
- Staff who handle personal information are appropriately supervised and trained;
- Queries about handling of personal information are promptly and courteously dealt with if received;
- The methods of handling personal information are regularly assessed and evaluated;
- Necessary steps are taken to ensure that personal data is kept secure at all times against unlawful loss or disclosure.

ECS have firm guidelines for data storage, data retrieval, data security and data destruction. There is also a strict process in place should a data breach occur (which includes containment and recovery, assessment of ongoing risk, notification of breach, evaluation and response).

Where data is not robust, it will be statistically suppressed to prevent disclosure.

Findings

Arrival at the service

Patients largely arrived at the centre by their own accord (56.45%, n=35). This was especially interesting because 57.89% (n=11) of Minor Injuries Unit and 61.54% (n=24) of Urgent Primary Care patients chose largely to come to the service by themselves, rather than through any other means (For example, either through NHS 111 or their GP).

		What service are using today at Solihull Hospital?				Total
		Minor Injuries	Urgent Primary Care	Acute Medical Unit	Unsure/ Other	
How did you decide to visit the services today? ▾	I was sent by NHS 111	1 5.26%	1 2.56%	0 0.00%	1 33.33%	3 4.84%
	I was sent by an Out Of Hours GP	0 0.00%	0 0.00%	0 0.00%	1 33.33%	1 1.61%
	I was sent by my own GP	7 36.84%	11 28.21%	0 0.00%	1 33.33%	19 30.65%
	I chose to come here myself	11 57.89%	24 61.54%	0 0.00%	0 0.00%	35 56.45%
	Other:	0 0.00%	3 7.69%	1 100.00%	0 0.00%	4 6.45%
Total		19 100.00%	39 100.00%	1 100.00%	3 100.00%	62 100.00%

When asked how they knew to come to the service, having *'been here before'* was the most commonly cited response. Respondents felt that they knew the service and had previously used it and therefore, knew to come here when they were not able to get appointments with their GP.

"A friend due to me not being able to get a doctor's appointment for one"

"Remember 5 years ago because I was here with a friend and I remember it. We needed an urgent appointment but GP was closed so we came"

Live locally
Hospital
Been here before
Word of mouth
Online

When asked about the specific circumstances that led them to use Urgent Care, 64.71%

(n=33) of patients stated that they had *contacted my GP but could not get an appointment*. What is particularly noticeable about the data is that 33.33% (n=11) of patients who stated that they contacted their GP but were unable to get an appointment were actually using the Minor Injuries Unit, instead of the expected Urgent Primary Care, which would be the normal pathway for accessing a GP.

		What service are using today at Solihull Hospital?				Total
		Minor Injuries	Urgent Primary Care	Acute Medical Unit	Unsure/ Other	
What circumstances led you to seek help from the service today? ▾	I contacted my GP but could not get an appointment	11 33.33%	21 63.64%	0 0.00%	1 3.03%	33 100.00%
	I did not want to travel to the Emergency Department	1 100.00%	0 0.00%	0 0.00%	0 0.00%	1 100.00%
	My condition started when my GP was closed	0 0.00%	1 100.00%	0 0.00%	0 0.00%	1 100.00%
	I was unsure where else I could go	3 60.00%	2 40.00%	0 0.00%	0 0.00%	5 100.00%
	Other:	0 0.00%	8 72.73%	1 9.09%	2 18.18%	11 100.00%
	Total	15 29.41%	32 62.75%	1 1.96%	3 5.88%	51 100.00%

Additionally, some of the responses provided in the free-text option of ‘other’ also suggested that perhaps there is some confusion around the lack of A&E at Solihull. The largest theme arising from these respondents reported that they came for emergency care, and were under the impression that there was an A&E.

Came for A&E
Faster care
Nearby Work

“Day care procedure directed me to GP and GP advised me to come to A&E because I needed urgent medical attention”

Knowledge of service

When asked if they knew what different services can be accessed through Urgent Primary

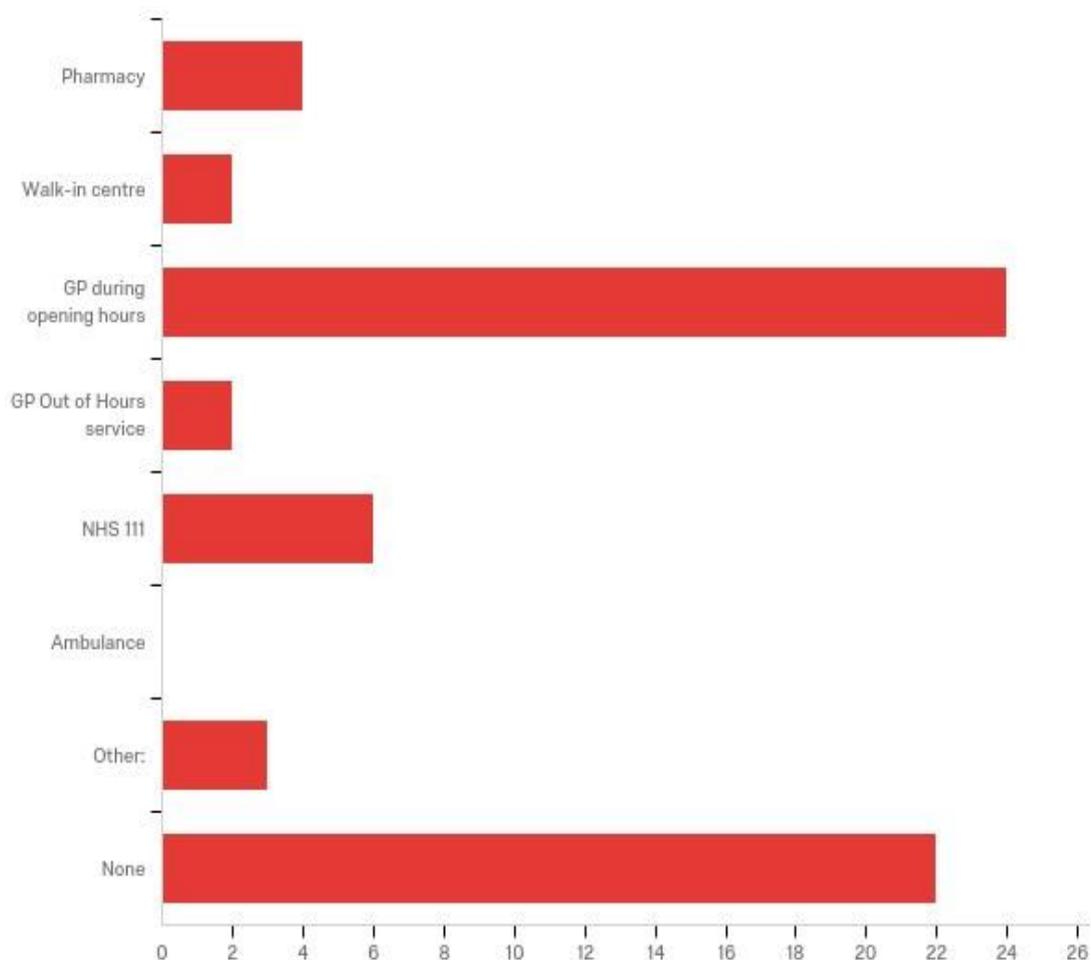
Care, Acute Medical Unit and Minor Injuries Unit, 47.27% (n=26) of participants stated no.

		What service are using today at Solihull Hospital?				Total
		Minor Injuries	Urgent Primary Care	Acute Medical Unit	Unsure/ Other	
Do you know what different services you can access via the urgent primary care centre, acute medi...	Yes	6 33.33%	14 42.42%	0 0.00%	0 0.00%	20 36.36%
	Maybe	5 27.78%	3 9.09%	0 0.00%	1 33.33%	9 16.36%
	No	7 38.89%	16 48.48%	1 100.00%	2 66.67%	26 47.27%
	Total	18 100.00%	33 100.00%	1 100.00%	3 100.00%	55 100.00%

When cross-referenced against the service that participants were using, 38.89% (n=7) of respondents in Minor Injuries Unit stated that they did not know what services they could access. This finding, together with results around the circumstances that led respondents to Urgent Care, suggest that it is likely that respondents are not aware of what the Minor injuries Unit actually does offer and are possibly using Minor Injuries Unit when they should be using Primary Care Services.

However, a large majority of respondents did use another service prior to attending Urgent Care Services, with the most common being their GP (38.10%, n=24).

Urgent Care Service Review



#	Answer	%	Count
1	Pharmacy	6.35%	4
2	Walk-in centre	3.17%	2
3	GP during opening hours	38.10%	24
4	GP Out of Hours service	3.17%	2
5	NHS 111	9.52%	6
6	Ambulance	0.00%	0
7	Other:	4.76%	3
8	None	34.92%	22
	Total	100%	63

Accessibility of service

		What service are using today at Solihull Hospital?				Total
		Minor Injuries	Urgent Primary Care	Acute Medical Unit	Unsure/ Other	
How easy was it to find the service?	Extremely easy	5 27.78%	12 31.58%	0 0.00%	2 66.67%	19 31.67%
	Somewhat easy	8 44.44%	12 31.58%	1 100.00%	1 33.33%	22 36.67%
	Neither easy nor difficult	1 5.56%	4 10.53%	0 0.00%	0 0.00%	5 8.33%
	Somewhat difficult	4 22.22%	8 21.05%	0 0.00%	0 0.00%	12 20.00%
	Extremely difficult	0 0.00%	2 5.26%	0 0.00%	0 0.00%	2 3.33%
Total		18 100.00%	38 100.00%	1 100.00%	3 100.00%	60 100.00%

Overall, respondents found it somewhat easy (36.67%, n=22) or extremely easy (31.67%, n=22) to find the service, with a larger proportion finding it easier in Minor Injuries Unit than Urgent Primary Care. This could perhaps be because the Urgent Primary Care waiting room does not have clear signs and directions. This is also further highlighted through the observations made by Healthwatch researchers, who report that signs at the hospital show the way for Booked Primary Care but Walk-In Primary Care patients are also seated in the same area, even though there are no signs or boards to demonstrate this. There is a sign for Urgent Primary Care but it is not evident that this indeed is the walk-in service to access GPs.

HEALTHWATCH OBSERVATIONS

When you approach Solihull Hospital from Lode Lane the signage still states that there is an A&E department. Researchers also observed that when you approach the hospital the first sign that you come to before the main entrance lists Minor Injuries and Urgent Primary Care but no Urgent Care Centre/ services are referred to

When you approach the actual department, there is a very large sign for Minor Injuries and two smaller signs for Urgent Primary Care and Urgent Primary Care booked (north), which is confusing.

Further signage does direct you to the main reception for “Urgent Primary Care” but it became apparent on our first visit that this was not the reception desk for Urgent Primary

Care until the changes were made on our second day. Additionally, during an early site visit, we were informed that during Monday to Friday, the Urgent Primary Care team did not staff the main joint reception desk.

Free-text responses from survey respondents also echoed this confusion, reporting:

“It’s because I know the system so accessibility is easy but could be hard for the elderly. Can be confusing and it’s a lot of walking to be shuffled between places.”

“I’ve been here before so I knew where to go but it can be confusing for someone who doesn’t know the centre.”

“Signs here are confusing.”

In addition, 55.26% (n=21) of respondents in Urgent Primary Care also reported that they did not know which reception desk to report to. Even with Minor Injuries Unit respondents, this was a split decision.

		What service are using today at Solihull Hospital?				Total
		Minor Injuries	Urgent Primary Care	Acute Medical Unit	Unsure/ Other	
Did you know which reception desk to report to?	Yes	9 50.00%	17 44.74%	0 0.00%	3 100.00%	29 48.33%
	No	9 50.00%	21 55.26%	1 100.00%	0 0.00%	31 51.67%
Total		18 100.00%	38 100.00%	1 100.00%	3 100.00%	60 100.00%

A case study with a patient in Urgent Primary Care highlights this discrepancy further. This patient is female, 79, and was a walk-in patient who did not manage to get an appointment at her GP practice and so chose to come here:

CASE STUDY 1:

I called my GP practice and there was no appointment, so I came here. I worked here so I know this hospital well. I knew this was the old fracture clinic, so I came by this booked primary care reception but the woman at the reception told me it changed today. I suppose that's the nature of hospitals, isn't it? They change all the time. But because I've worked here I know where things are but it's not easy especially for the elderly to get around. When I got here, I was taken by the receptionist to the main reception to 'book in'. So, I had to go over to the main reception and fill in the form only to be sent back here. Why can't we just make a booking when we walk in at this reception? We can just as well fill in a form here as we can there. It's easy for me but it's probably confusing for others.

The case study above demonstrated that not only is access to the service confusing, the language used (for instance, booked in) is confusing. Observations made by Healthwatch during this visit highlights some of these changes and confusions:

HEALTHWATCH OBSERVATIONS

On our second day we noticed some changes in the Urgent Primary Care service in that they had moved one of their receptionist's round to the main entrance alongside the Minor Injuries Unit. We spoke to staff and they said before today they were two entrances once entrance staffed by the minor injuries staff and a second reception desk staffed by Urgent Primary Care staff labelled North entrance (pre-booked primary care) which was the entrance for all Primary Care appointments. On the day of the change this meant that people were now coming to the north entrance to access the primary care service and were now being redirected to the front entrance to fill in a form before being redirected to the Urgent Primary Care reception area. In addition, we realised that there is some confusion about the language 'booked in'. Booked Primary Care refers to patients who have a booked appointment through NHS 111 or through an out-of-hours GP. Anyone else who used the services without the referral would be considered a 'walk-in'. However, some patients told us they booked in, because the receptionists

told them to 'book-in', even though they were walk-in patients (Further highlighted in Case Study 1 above).

Since the change in Urgent Primary Care the team felt it was busier than usual. Staff also felt that members of the general public are not fully aware of the service here under Urgent Primary Care because the service they associated as the Walk-In service had visibly closed, and they were unsure because of the name change, people instantly knew that the Badger Clinic (previous name of service provider/service name) offered a walk-in service where you could access a GP appointment.

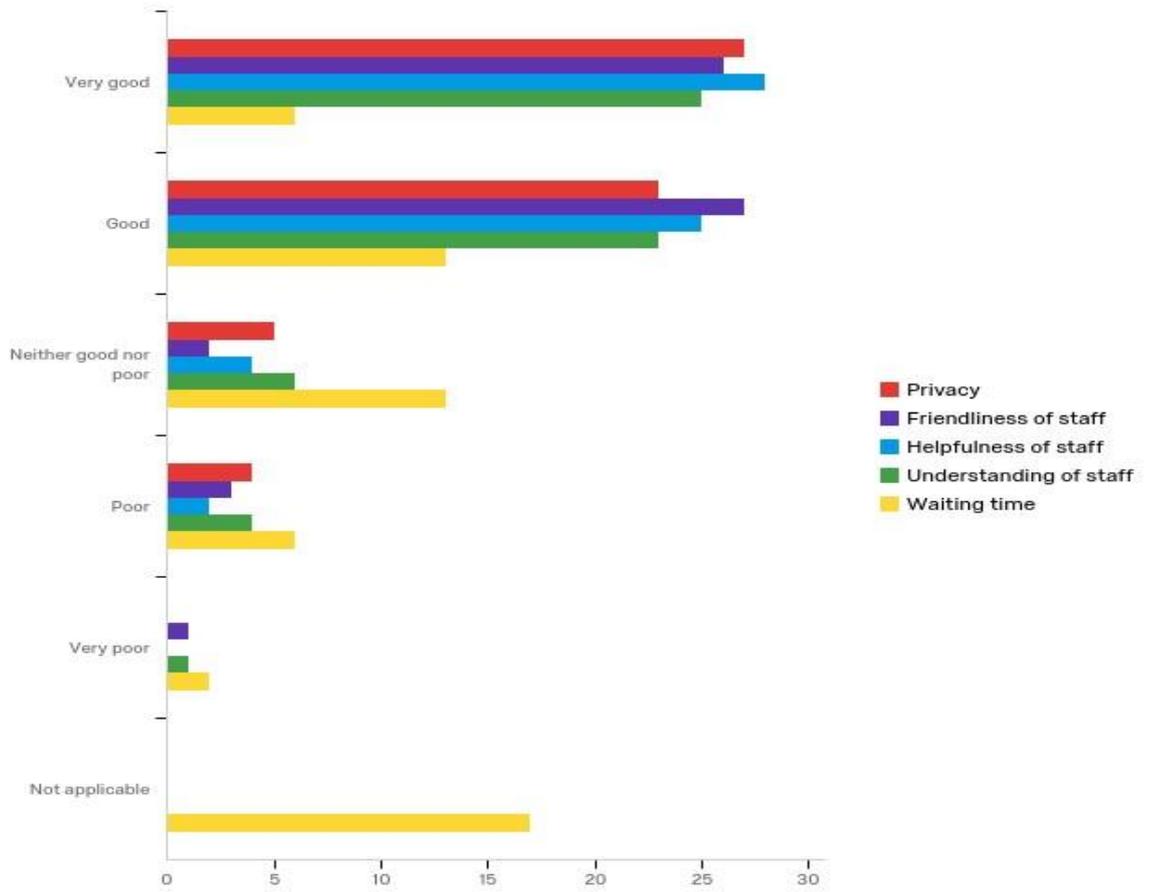
Experience of the service

Service reception

Overall, respondents felt that they had a good experience of the service reception in terms of privacy, and the staff's friendliness, helpfulness and understanding.

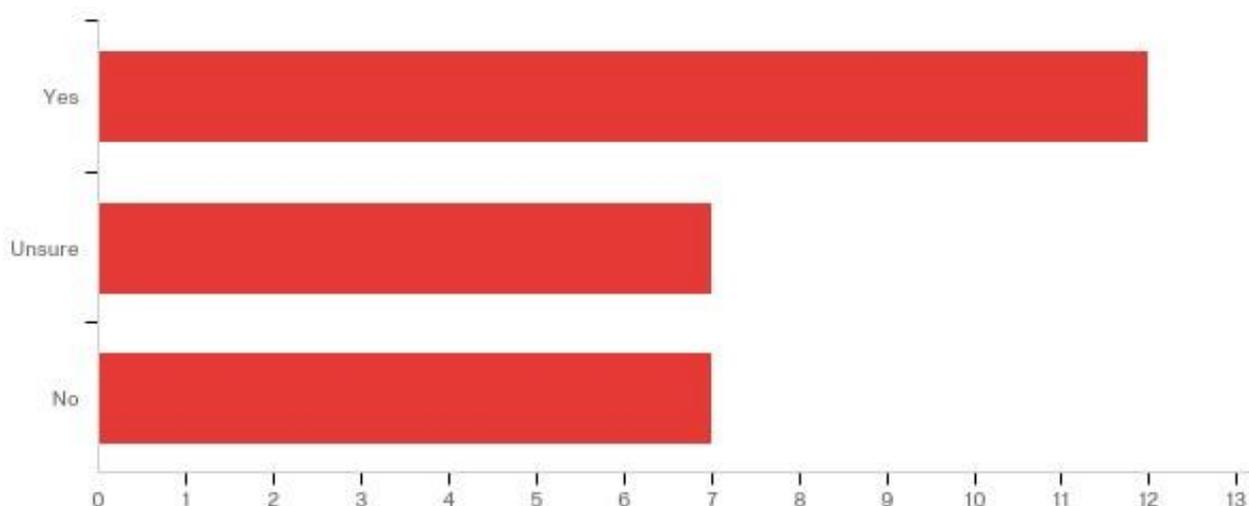
Waiting times were largely non-applicable for respondents as many of them were still waiting to be seen and had yet to know how long they were going to wait.

Urgent Care Service Review



#	Question	Very good	Good	Neither good nor poor	Poor	Very poor	Not applicable	Total
1	Privacy	45.76% 27	38.98% 23	8.47% 5	6.78% 4	0.00% 0	0.00% 0	59
2	Friendliness of staff	44.07% 26	45.76% 27	3.39% 2	5.08% 3	1.69% 1	0.00% 0	59
3	Helpfulness of staff	47.46% 28	42.37% 25	6.78% 4	3.39% 2	0.00% 0	0.00% 0	59
4	Understanding of staff	42.37% 25	38.98% 23	10.17% 6	6.78% 4	1.69% 1	0.00% 0	59
5	Waiting time	10.53% 6	22.81% 13	22.81% 13	10.53% 6	3.51% 2	29.82% 17	57

When asked if information was made available about how respondents could make a comment, compliment or complaint, 46.15% (n=12) felt that it was available, 26.92% (n=7) of respondents felt that information was not readily available.



A case study with a patient in Urgent Primary Care also reported his experience with the centre. This patient is male, 70 and was a walk-in patient who did not manage to get an appointment at his GP.

CASE STUDY

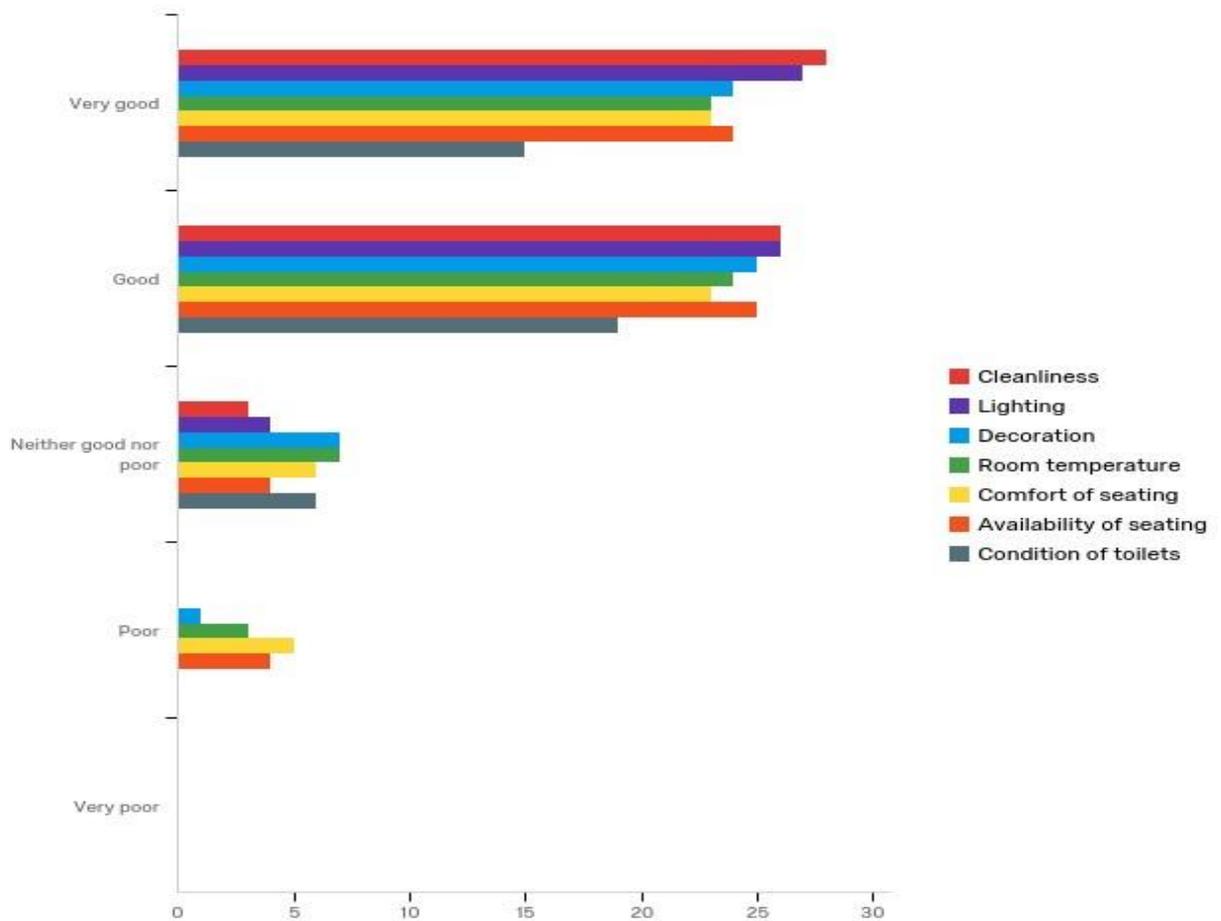
Patient is an elderly man who lives with his wife. He is currently waiting for a knee replacement and has mobility issues. Some days are worse than others, but he struggles to mobilise. He tried to contact his GP to gain an appointment on the day but could not get through until 8:30am and when he did get through he was told that they were fully booked. He was also informed that they were very busy for the rest of the week. He explained that he had been in this position before and had used the Walk-In Centre. When asked about this procedure he said he knew he could go to the Walk-In Centre situated next to the Minor Injuries Unit. He stated that he was generally happy with the service at the walk in but felt that he should be able to use his doctor's surgery without having to come here but equally this served its purpose and they were happy to utilise the service. He felt that it was unfair as a patient that he could not utilise the online booking system at his doctors and felt that on the day appointments were booked by patients that had access to this service, which left him and his wife at a disadvantage because they did not have access to the internet and equally did not know how to use the online system.

Surroundings in the service

#	Question	Very good		Good		Neither good nor poor		Poor		Very poor		Total
1	Cleanliness	49.12%	28	45.61%	26	5.26%	3	0.00%	0	0.00%	0	57
2	Lighting	47.37%	27	45.61%	26	7.02%	4	0.00%	0	0.00%	0	57
3	Decoration	42.11%	24	43.86%	25	12.28%	7	1.75%	1	0.00%	0	57
4	Room temperature	40.35%	23	42.11%	24	12.28%	7	5.26%	3	0.00%	0	57
5	Comfort of seating	40.35%	23	40.35%	23	10.53%	6	8.77%	5	0.00%	0	57
6	Availability of seating	42.11%	24	43.86%	25	7.02%	4	7.02%	4	0.00%	0	57

7	Condition of toilets	37.50%	15	47.50%	19	15.00%	6	0.00%	0	0.00%	0	40
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Overall, respondents felt that the surroundings in the service were largely very good or good in terms of cleanliness, lighting, decoration, room temperature, comfort of seating, availability of seating and condition of toilets.

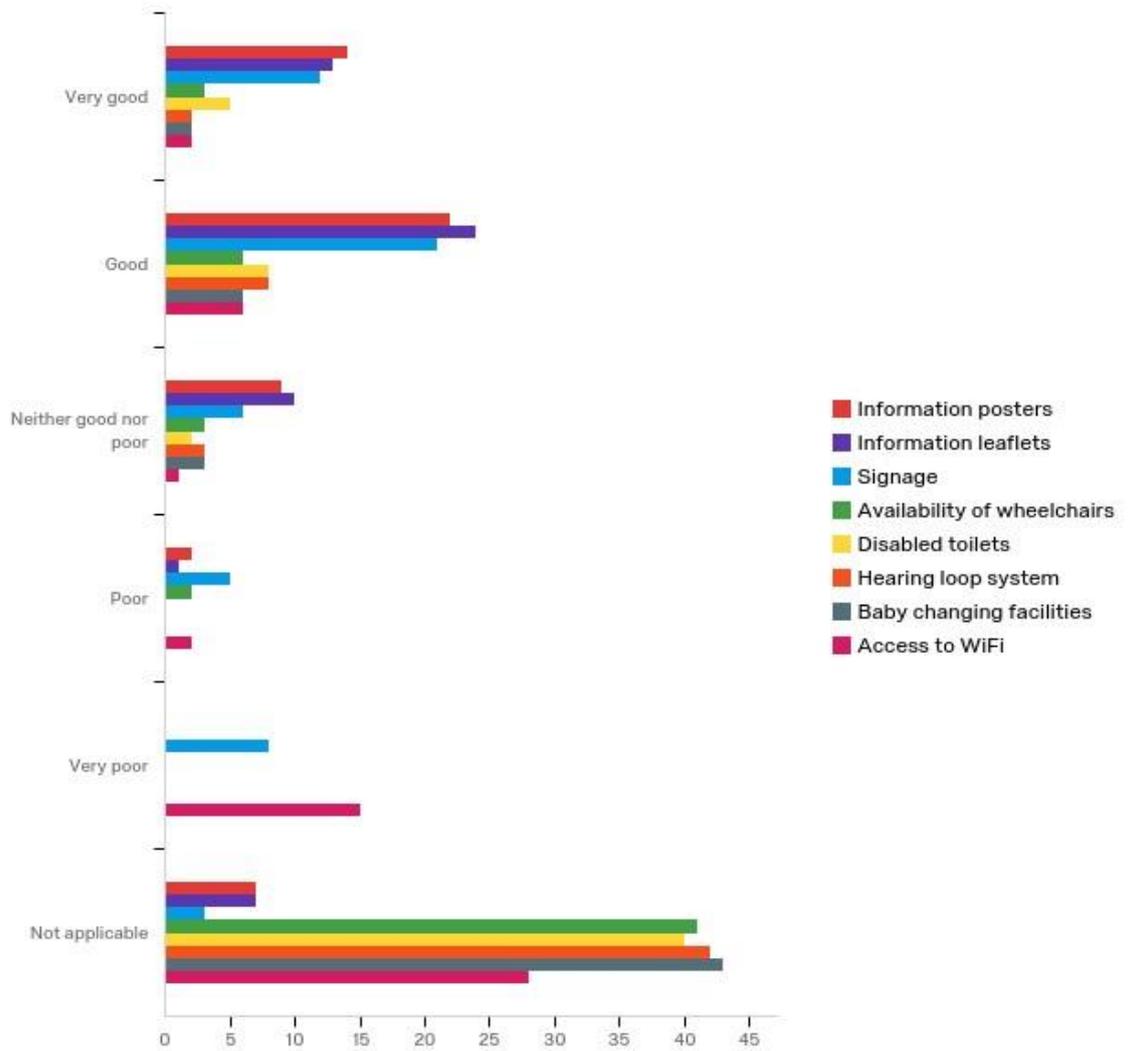


Facilities in the service

Overall, information posters, information leaflets and signage were reported to be good. Availability of wheelchairs, disabled toilets, hearing loop system and baby changing facilities were not widely used during our visit and therefore were largely not applicable to participants.

Access to wifi was largely reported to be not applicable as participants report not being able to get on the network, as well as not being informed that there was any wifi around. Others also highlighted that it requested a username and password, neither of which they had.

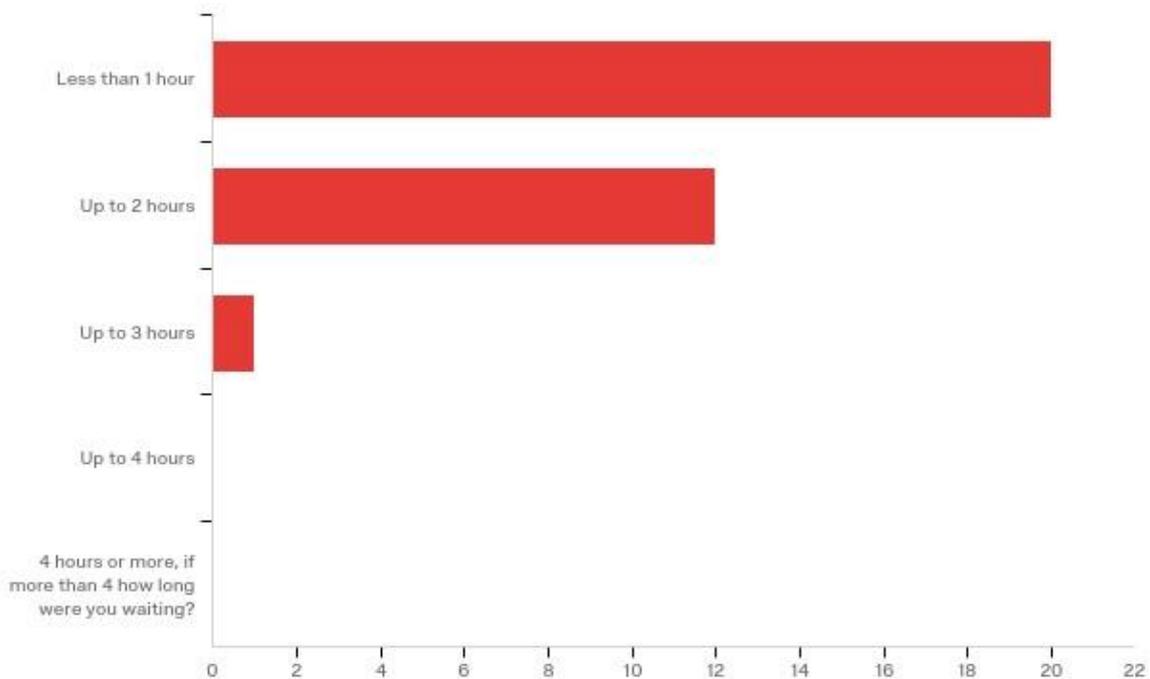
Urgent Care Service Review



#	Question	Very good	Good	Neither good nor poor	Poor	Very poor	Not applicable	Total
1	Information posters	25.93%	40.74%	16.67%	3.70%	0.00%	12.96%	54
2	Information leaflets	23.64%	43.64%	18.18%	1.82%	0.00%	12.73%	55
3	Signage	21.82%	38.18%	10.91%	9.09%	14.55%	5.45%	55

4	Availability of wheelchairs	5.45%	3	10.91%	6	5.45%	3	3.64%	2	0.00%	0	74.55%	41	55
5	Disabled toilets	9.09%	5	14.55%	8	3.64%	2	0.00%	0	0.00%	0	72.73%	40	55
6	Hearing loop system	3.64%	2	14.55%	8	5.45%	3	0.00%	0	0.00%	0	76.36%	42	55
7	Baby changing facilities	3.70%	2	11.11%	6	5.56%	3	0.00%	0	0.00%	0	79.63%	43	54
8	Access to WiFi	3.70%	2	11.11%	6	1.85%	1	3.70%	2	27.78%	15	51.85%	28	54

Experience with staff



On average, 60.61 % (n=20) of all patients reported that they waited less than an hour. However, in terms of use of specific service, 72.73% (n=8) of Minor Injuries Unit patients and 52.63% (n=10) of Urgent Primary Care patients stated that they waited less than an hour.

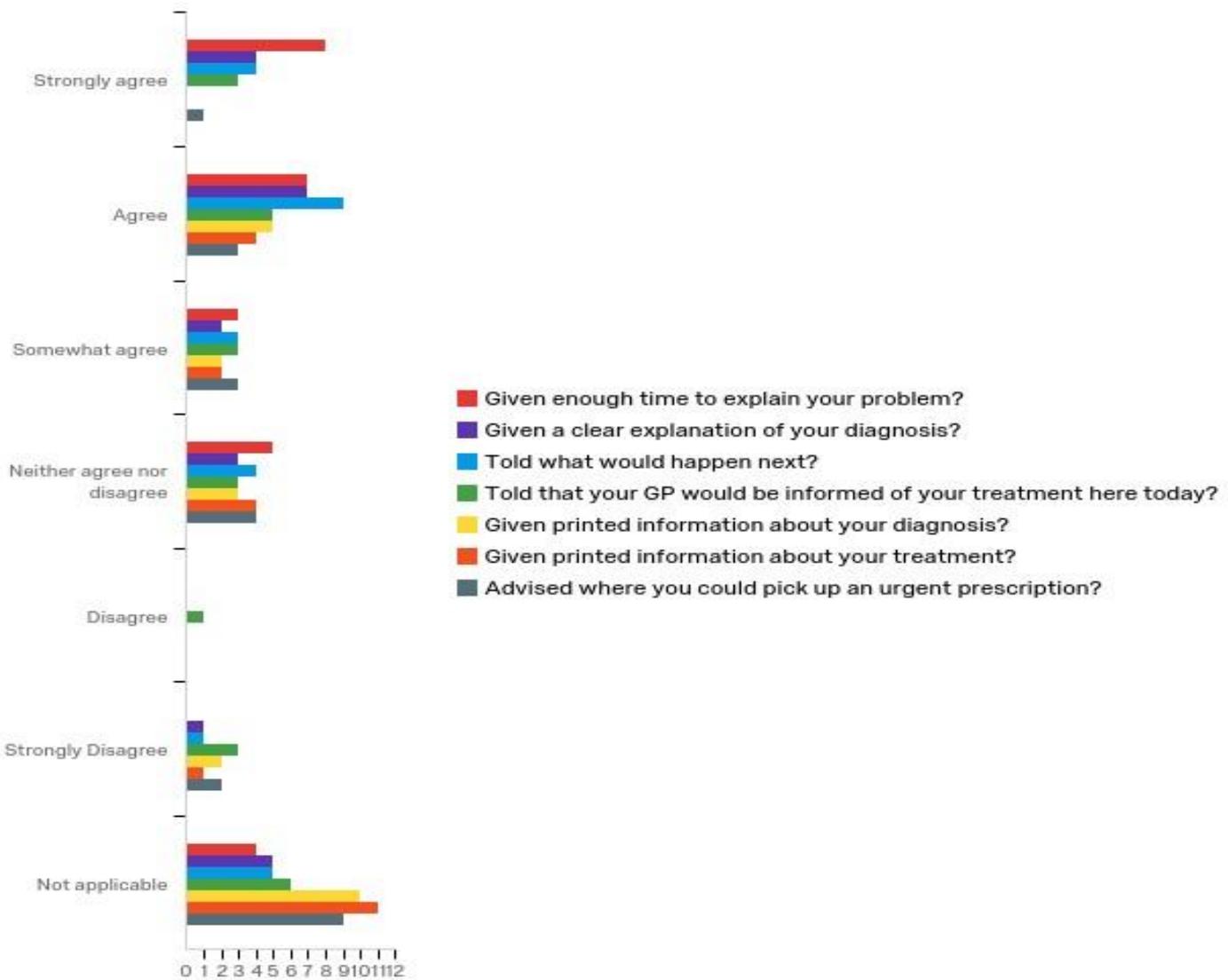
It is worth noting here that most of the respondents in Urgent Primary Care have stated their experience based on their first contact with a clinical staff member (i.e. triage/ nurse) and therefore, experience of waiting times and staff members could vary. The average observed waiting time to be seen by a consultant or for treatment varied between 1-3hours, depending on the time of day. 66.67% (n=6) of respondents in Minor Injuries Unit felt that the person who treated them did not give them their name while only 11.11% (n= 1) of respondents in the Minor Injuries Unit felt that the person who treated them did explain their job role/title.

The opposite was the case in Urgent Primary Care, where 55.56% (n=10) of respondents in

Urgent Primary Care felt that who treated them did give them their name while 55.56% (n=10) stated that the person who treated then explained their job role/title.

		What service are using today at Solihull Hospital?				Total
		Minor Injuries	Urgent Primary Care	Acute Medical Unit	Unsure/ Other	
Did the person who treated you give you their name?	Yes	3 33.33%	10 55.56%	1 100.00%	1 100.00%	15 51.72%
	Maybe	0 0.00%	3 16.67%	0 0.00%	0 0.00%	3 10.34%
	No	6 66.67%	5 27.78%	0 0.00%	0 0.00%	11 37.93%
	Total	9 100.00%	18 100.00%	1 100.00%	1 100.00%	29 100.00%
Did the person who treated you explain their job role/title?	Yes	1 11.11%	10 55.56%	1 100.00%	0 0.00%	12 41.38%
	Maybe	3 33.33%	2 11.11%	0 0.00%	1 100.00%	6 20.69%
	No	5 55.56%	6 33.33%	0 0.00%	0 0.00%	11 37.93%
	Total	9 100.00%	18 100.00%	1 100.00%	1 100.00%	29 100.00%

Unfortunately, because a large number of respondents were not seen by a doctor prior to filling out the surveys, a number of questions listed were not applicable. However, some respondents did report their experience with the staff member who undertook their triage. Overall, 29.63% (n=8) of respondents did feel that they were given enough time to explain their problem.



When asked how they felt they were treated, the majority of participants agreed that they were treated with dignity and respect and were overall treated well. The word cloud below shows the themes that arose from this question:



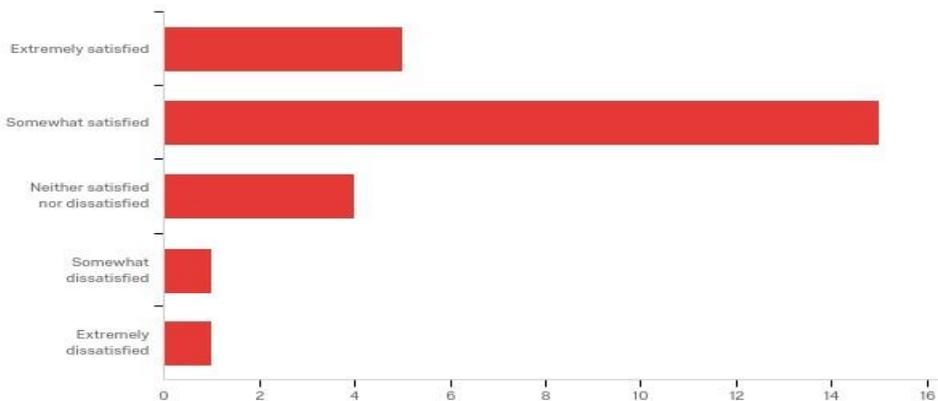
“In a dignified way as never interrupted when telling the problem and spoken to in a polite manner.”

“The nurse was too authoritative. I feel that she needs retraining as her manner was poor.”

“Like an inconvenience”

Satisfaction with service

Overall, respondents felt extremely satisfied (19.23%, n=5) or somewhat satisfied (57.69%, n=15) with the service that day.



When asked to describe their experiences further, a few respondents provided their insight about the service overall. Quotes from some patients are as listed below:

"I used this service instead of accessing a GP... Fairly good service. It was referred to as a walk-in centre. Phoned for appointment at 8:30 all gone so I had to go to walk in centre fill in a form and book with a GP

"I was just surprised [my] chest pains being presented were ignored at reception."

"The A&E needs to do scans and tests rather than say 'your GP needs to refer you'. What if your GP is crap and doesn't take any notice? We all come to A&E as we are in pain, not for the fun of it."

Conclusions

Respondents generally felt that overall, they had a good experience with the environment and facilities in Minor Injuries Unit and Urgent Primary Care, aside from some comments about bad experiences with staff. Patients are not always seen within the time target, with the waiting time averaging between 1-3 hours depending on the time of day.

In Urgent Primary Care responses also suggest that consultations are not given on a 'see and treat' basis as patients go in to see a nurse and then have to come back into the waiting room to be seen again, suggesting that the triage approach is still at use.

The findings also show that a large majority of people do not know what is on offer within "Urgent Care" and what help can be sought prior to visiting Urgent Care and the ones who do know, are the people who have used the service before. Future studies need to look at getting insights from the general public to understand this further.

However, there still seems to be confusion around the layout of the Urgent Care Services and the signage. Many of our respondents had to go elsewhere before being re-directed to the right place, suggesting that the signage to the service is confusing. Additionally, attention needs to be given to the presence of some confusion as to whether Solihull Hospital has an A&E Department. It is vital that other primary care services who will come into first contact with patients are aware of this change and use the appropriate language with the patients so that there is no confusion.

Overall, it is important to note that part of the Clinical Commissioning Group consultation found that people were in favour of calling the new service the Urgent Care Centre but this does not seem the case.

Services seem to act as separate services: Minor Injuries, Acute Medical Unit and Urgent Primary Care - rather than providing a joined up Urgent Care Service. This can be seen through the large proportion of people in Minor Injuries Unit were there because they could not get an appointment with their GP, there may not be a clear pathway between the services to make sure people are utilising the right service and in the right time.

Recommendations

- We are still not sure if the Urgent Primary Care staff will continue to staff the main reception desk so as to provide a single point of access for people using urgent care services. It is also not clear if this will be the main reception for all patients or only specifically for walk-in patients. Equally it is unclear if booked patients will continue to use the North Entrance. Consideration will need to be given as to whether the signage for the Minor Injuries Unit remains and whether or not the signs for 'Urgent Care Centre' or services becomes more visible. It is also felt that a clear patient pathway is developed for those who use the reception as a first point of access so that walk-in patients are utilising the service that meets their needs.

- Clarify language used, particularly with 'booked'. It could be useful to have two separate signs (Booked and Walk-in) so patients are aware that there are two different types of services offered at Urgent Primary Care. Receptionists should perhaps also look at saying 'register' or 'check-in' rather than 'book in' to avoid confusing patients about whether they are in booked or walk-in primary care. The North Entrance sign at the site could also be removed so as to avoid further confusion and to simply rename it as Urgent Primary Care. Signage needs to reflect the patient journey and highlight where they need to go to get registered and the process to follow if they need to go elsewhere.
- Clear information provision to the general public about the changes to Solihull and how to access them. This would include information about the services that are available as well as the services that are not (e.g. A&E). This information could be provided to each home in Solihull and provide clear information of how to access the services etc.
- Provide wifi access in Urgent Primary Care as there is no reception in the area. It may be important for patients to be able to contact family members etc when needed. If password access is required, access to this should be made easy as well.

NHS Birmingham and Solihull Clinical Commissioning Group's response to the Healthwatch Solihull report: urgent care service review

Many thanks for the opportunity to respond to this report. We welcome Healthwatch Solihull's review of the urgent care service provided at Solihull Hospital; it is very positive to see that the majority of respondents felt satisfied with the service they received.

We look forward to working closely with Healthwatch Solihull on carefully considering the recommendations within the report, in partnership with the service providers, whilst also considering the broader context in which this urgent care service operates; specifically, the use of NHS 111, other related NHS services and national guidance on urgent care.

By working together with you, we can address some of the wider issues within this particular review, to improve the accuracy of any future work and ensure that we can fully support Healthwatch Solihull.

We were very grateful to Healthwatch Solihull's external scrutiny during the public consultation, which is detailed in the report, and your support with subsequent development of the service.

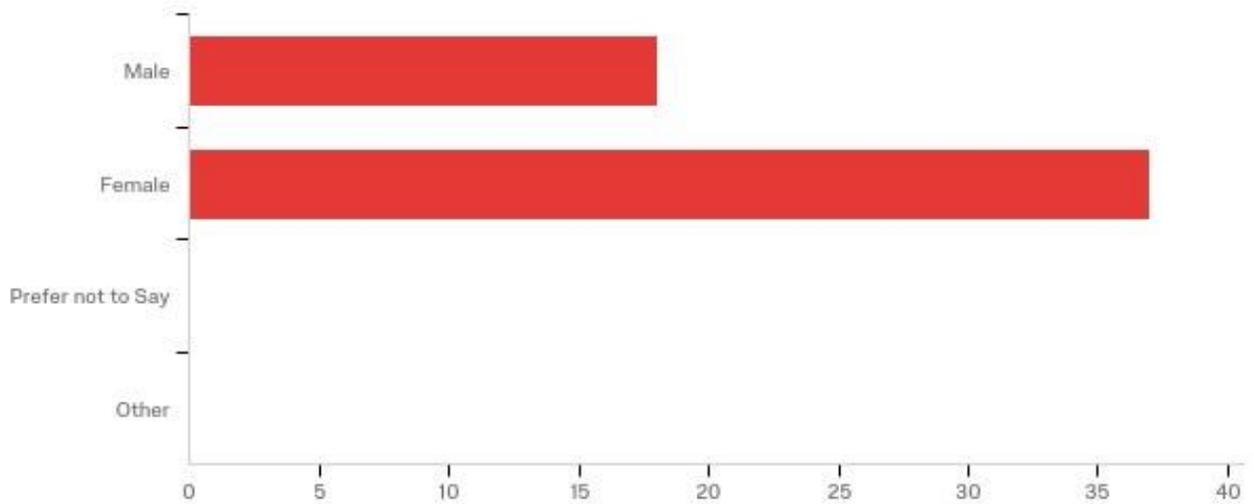
We very much look forward to working with you in the future, to ensure that we are able to offer the best and most responsive health services to the people of Solihull.

Karen Helliwell
Director of Integration
NHS Birmingham and Solihull Clinical Commissioning Group

Appendix

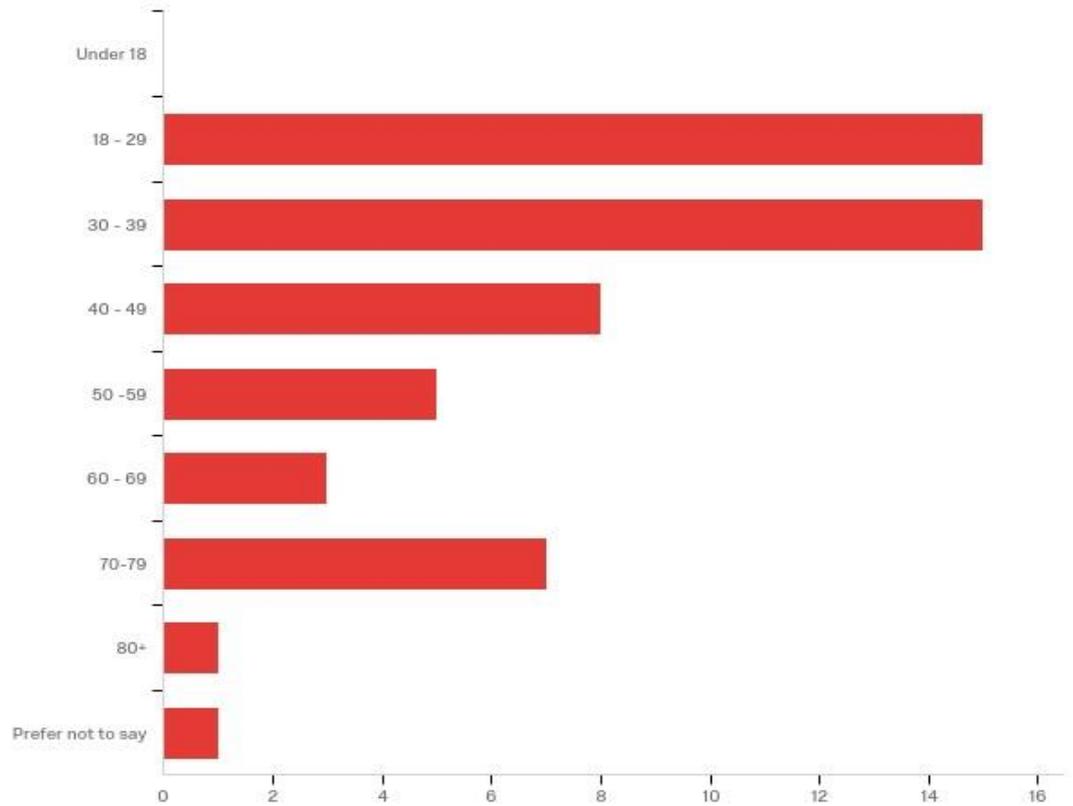
Demographics

Q6.2 - How do you define your gender identity?



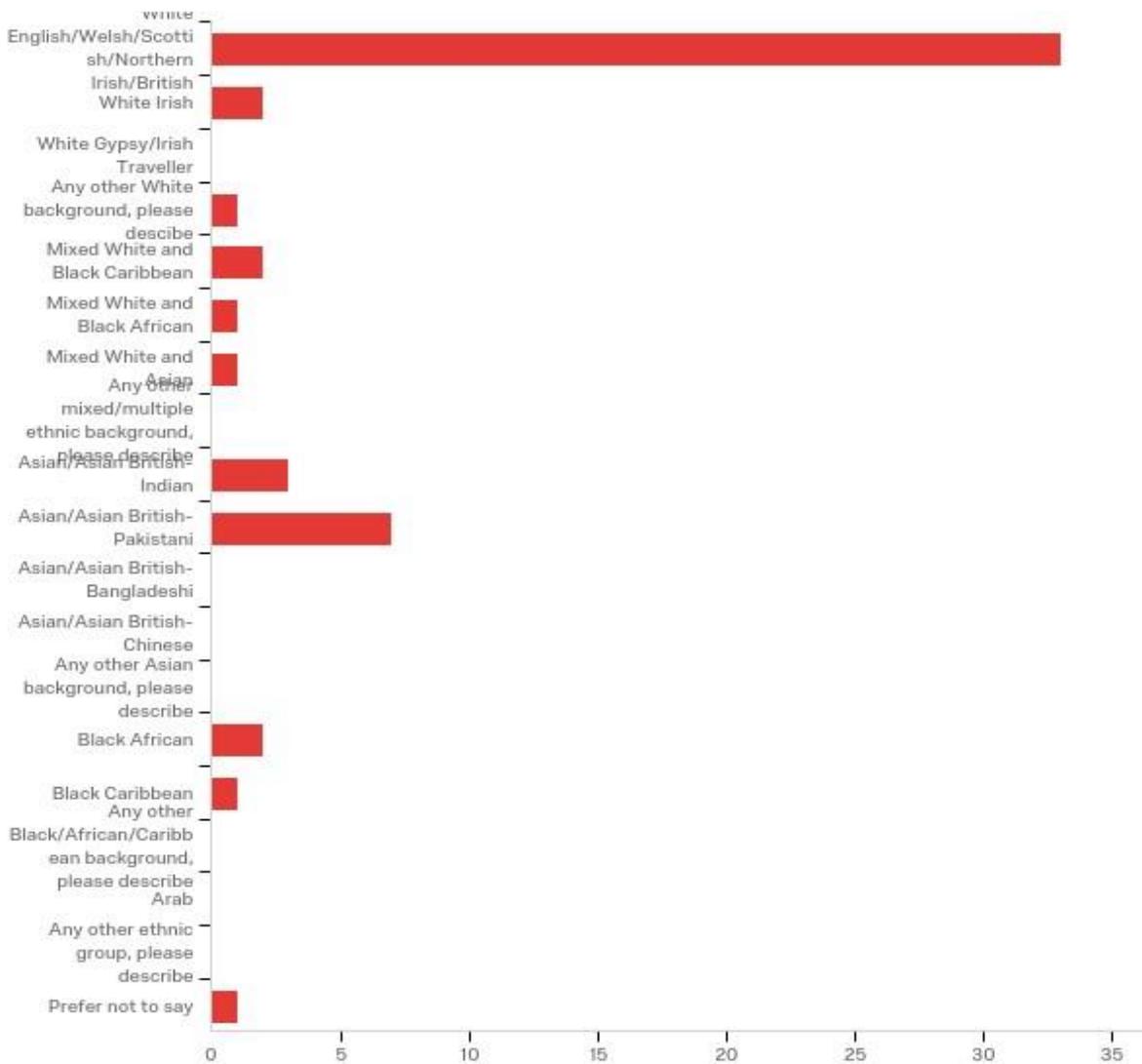
#	Answer	%	Count
1	Male	32.73%	18
2	Female	67.27%	37
3	Prefer not to Say	0.00%	0
4	Other	0.00%	0
	Total	100%	55

Q6.3 - What is your age?



#	Answer	%	Count
1	Under 18	0.00%	0
2	18 - 29	27.27%	15
3	30 - 39	27.27%	15
4	40 - 49	14.55%	8
5	50 - 59	9.09%	5
6	60 - 69	5.45%	3
7	70-79	12.73%	7
8	80+	1.82%	1
9	Prefer not to say	1.82%	1
	Total	100%	55

Q6.4 What is your ethnic group?

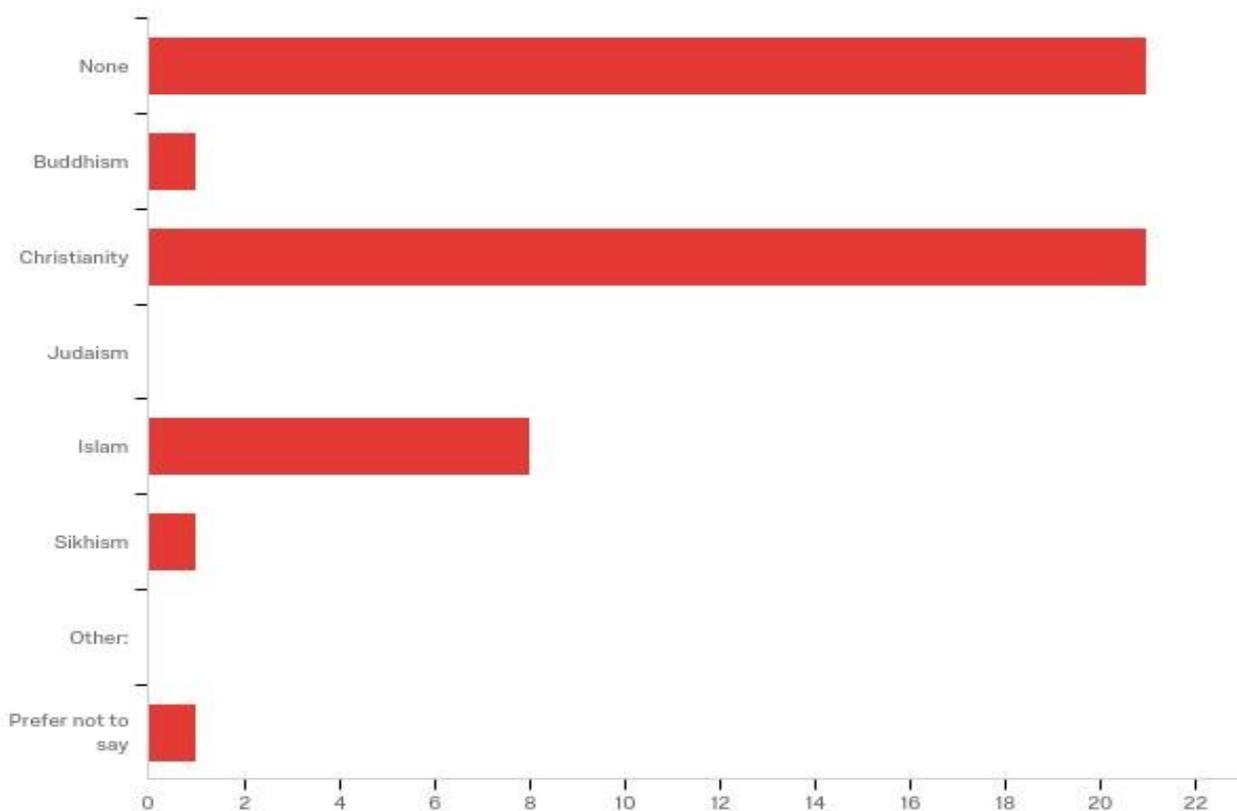


#	Answer	%	Count
1	White English/Welsh/Scottish/Northern Irish/British	61.11%	33
2	White Irish	3.70%	2
3	White Gypsy/Irish Traveller	0.00%	0
4	Any other White background, please describe	1.85%	1
5	Mixed White and Black Caribbean	3.70%	2
6	Mixed White and Black African	1.85%	1
7	Mixed White and Asian	1.85%	1
8	Any other mixed/multiple ethnic background, please describe	0.00%	0

Urgent Care Service Review

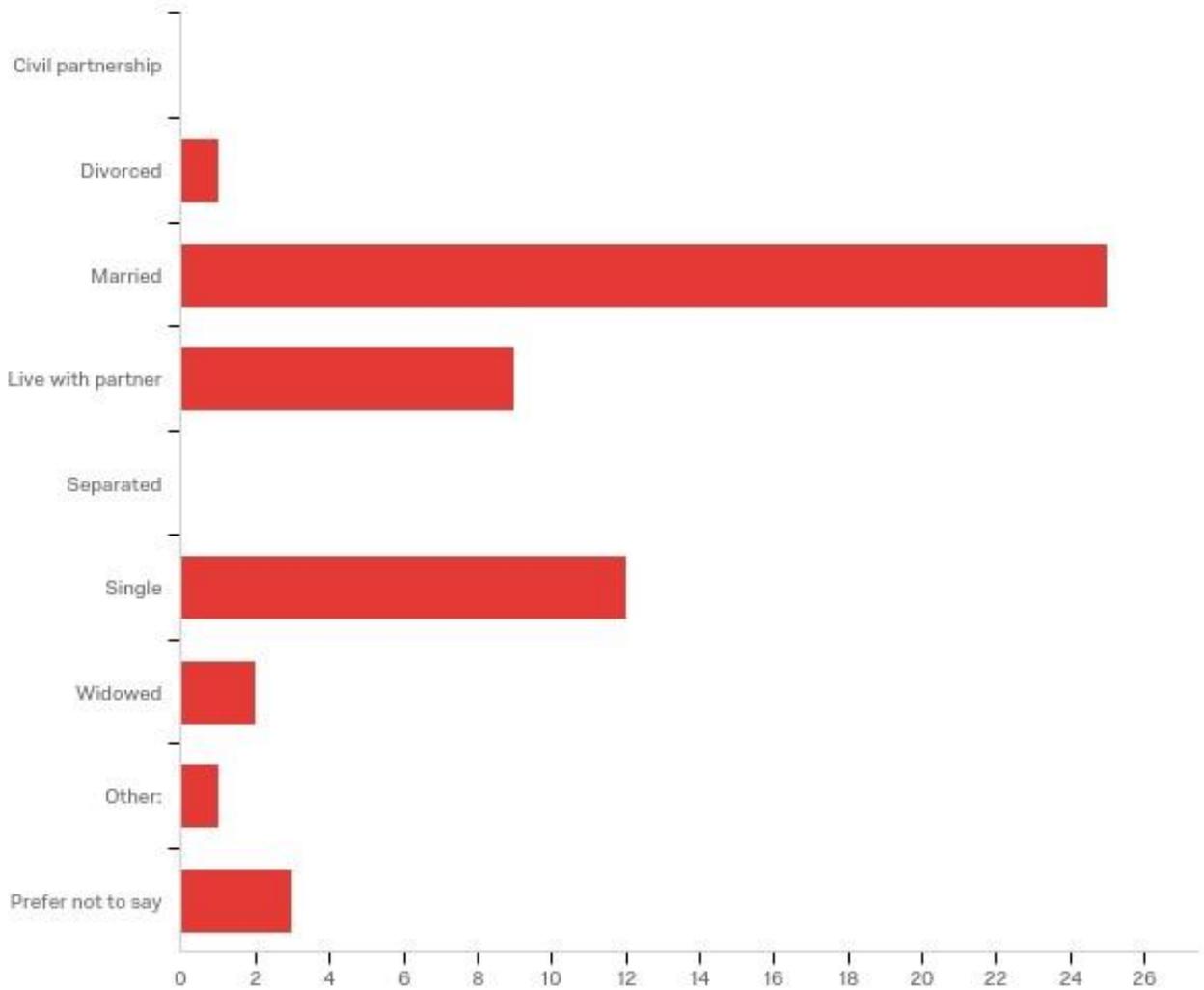
9	Asian/Asian British- Indian	5.56%	3
10	Asian/Asian British- Pakistani	12.96%	7
11	Asian/Asian British- Bangladeshi	0.00%	0
12	Asian/Asian British- Chinese	0.00%	0
13	Any other Asian background, please describe	0.00%	0
14	Black African	3.70%	2
15	Black Caribbean	1.85%	1
16	Any other Black/African/Caribbean background, please describe	0.00%	0
17	Arab	0.00%	0
18	Any other ethnic group, please describe	0.00%	0
19	Prefer not to say	1.85%	1
	Total	100%	54

Q6.5 What is your religion or belief?



#	Answer	%	Count
1	None	39.62%	21
2	Buddhism	1.89%	1
3	Christianity	39.62%	21
4	Judaism	0.00%	0
5	Islam	15.09%	8
6	Sikhism	1.89%	1
7	Other:	0.00%	0
8	Prefer not to say	1.89%	1
	Total	100%	53

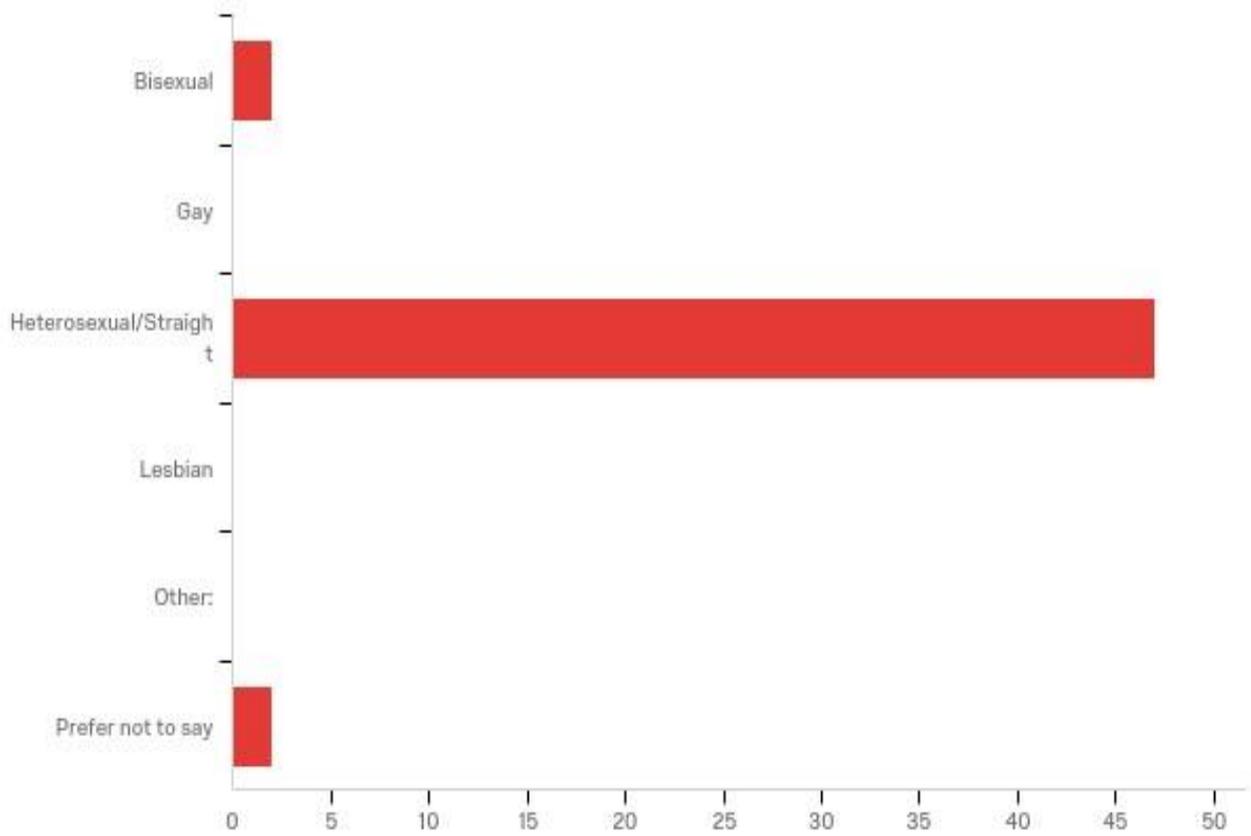
Q6.6 What is your relationship status?



#	Answer	%	Count
1	Civil partnership	0.00%	0
2	Divorced	1.89%	1
3	Married	47.17%	25
4	Live with partner	16.98%	9
5	Separated	0.00%	0
6	Single	22.64%	12
7	Widowed	3.77%	2
8	Other:	1.89%	1

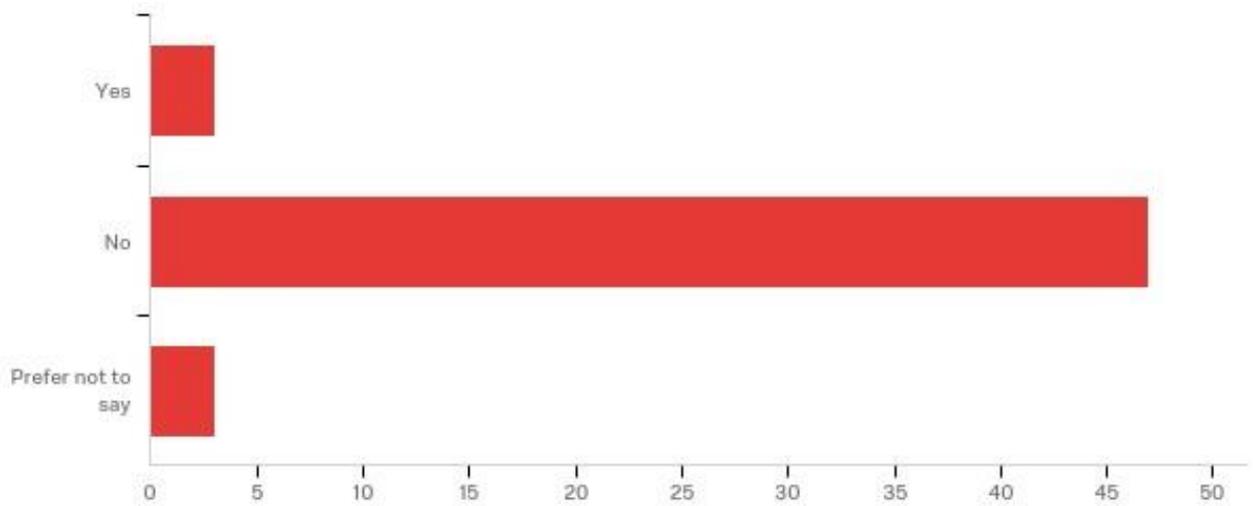
9	Prefer not to say	5.66%	3
	Total	100%	53

Q6.7 What is your sexual orientation?



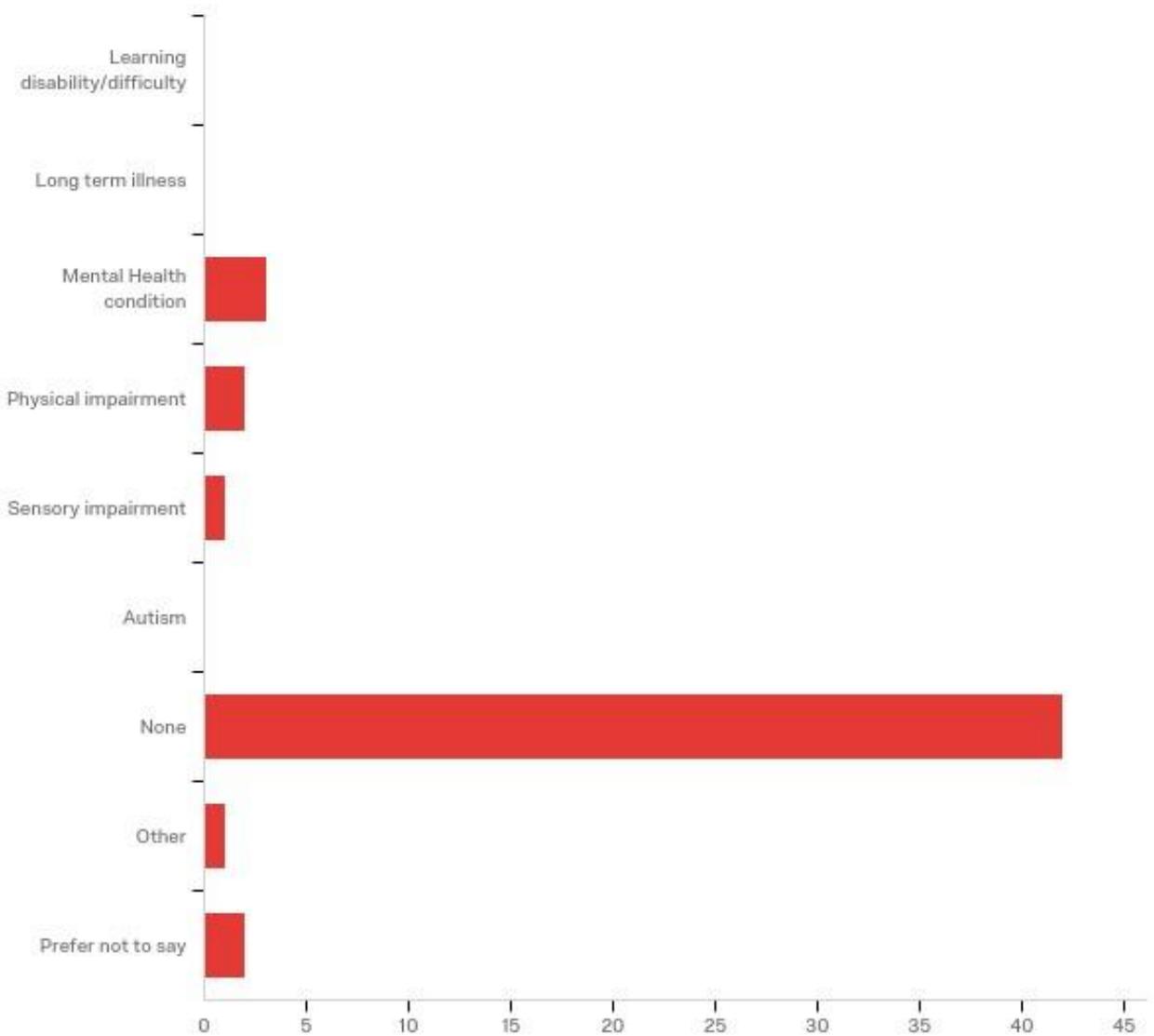
#	Answer	%	Count
1	Bisexual	3.92%	2
2	Gay	0.00%	0
3	Heterosexual/Straight	92.16%	47
4	Lesbian	0.00%	0
5	Other:	0.00%	0
6	Prefer not to say	3.92%	2
	Total	100%	51

Q6.8 Are you pregnant at this time or have given birth in the last year?



#	Answer	%	Count
1	Yes	5.66%	3
2	No	88.68%	47
3	Prefer not to say	5.66%	3
	Total	100%	53

Q6.9 Do you consider yourself to have any of the following?



#	Answer	%	Count
1	Learning disability/difficulty	0.00%	0
2	Long term illness	0.00%	0
3	Mental Health condition	5.88%	3
4	Physical impairment	3.92%	2
5	Sensory impairment	1.96%	1
6	Autism	0.00%	0
7	None	82.35%	42

8	Other	1.96%	1
9	Prefer not to say	3.92%	2
	Total	100%	51

Q6.10 - What is your postcode?

#	Answer	%	Count
1	B35	0.00%	0
2	B36	0.00%	0
3	B37	3.77%	2
4	B40	3.77%	2
5	B90	15.09%	8
6	B91	9.43%	5
7	B92	11.32%	6
8	B46	1.89%	1
9	B28	15.09%	8
10	B27	11.32%	6
11	B26	7.55%	4
12	B94	1.89%	1
13	B34	1.89%	1
14	CV7	1.89%	1
15	B93	0.00%	0
16	Prefer not to say	3.77%	2
17	Other?	11.32%	6
	Total	100%	53

Other text:

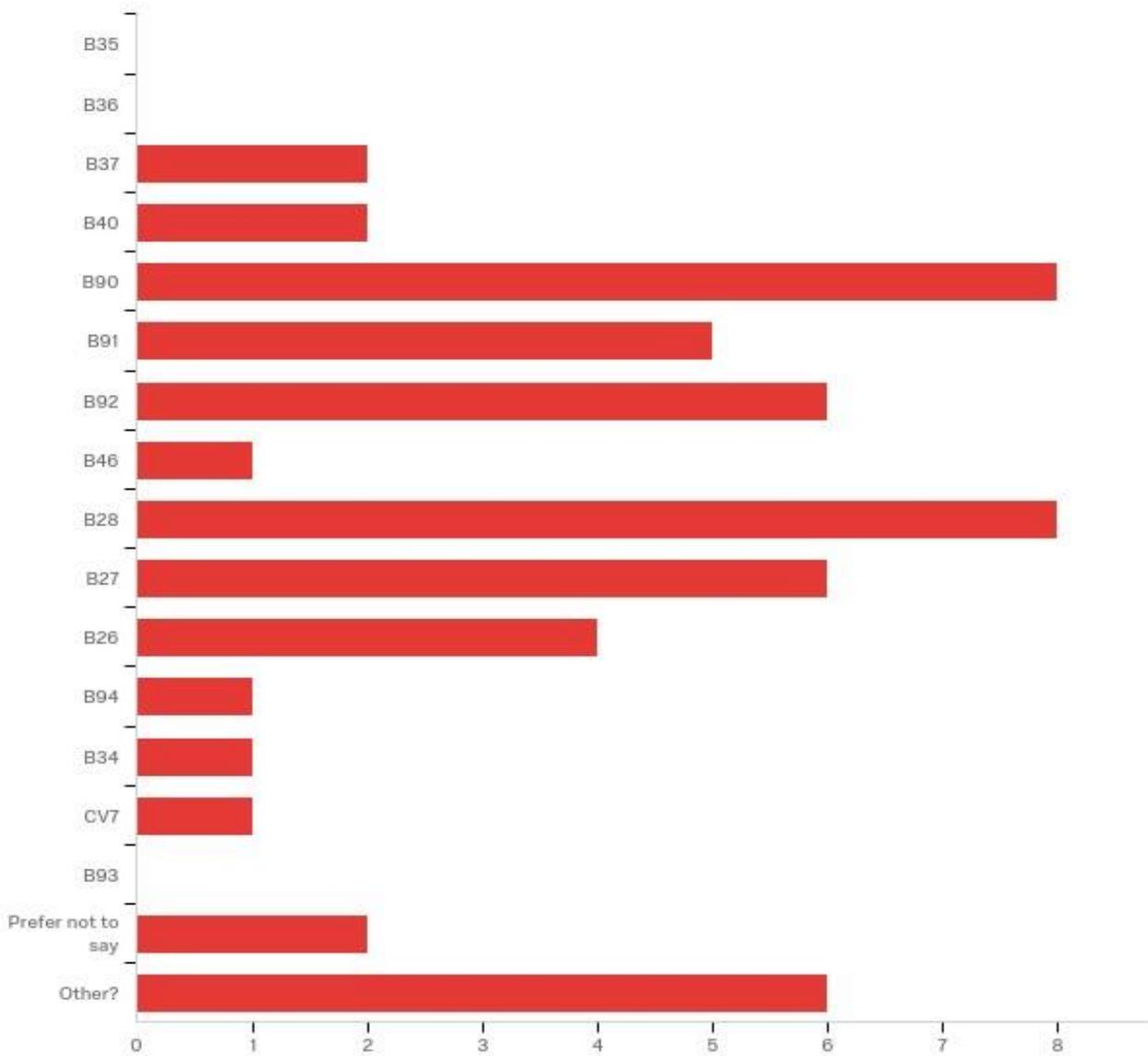
2NJ

B94

B33

B11

B25



ⁱ Please note that of the 71 questionnaires recorded not all surveys were fully complete and therefore total numbers do not always equal 71, they have been included in this report as it provides a useful overview of people's experiences of the Urgent Care Centre.