

Urgent and Emergency Care Review 'The case for change'

Supplementary Data – insights

January 2018

Introduction

There have been a number of surveys, focus groups, reviews, research and public workshops carried out in Wirral between 2009 and 2016 on the topic of urgent care. This document summarises the insights gained from these events and surveys, from which there were many common themes. The findings from each are presented below (most recent first). A summary of all the insight, with a focus on the recurring themes is presented in Box 1.

Box 1: Summary of insight of use Urgent Care Services in Wirral

- There has been a great deal of insight collected via a variety of methods in Wirral over the past decade; many common themes emerge time and time again
- Confusion about the range of urgent care services is often mentioned and is not peculiar to Wirral. It is also a national finding that people report being confused about the differential range of services available at Walk-In Centres (WIC), Minor Ailment/Illness Services and GP Out of Hours (GPOOH) services
- This confusion leads people to go for the option they feel most knowledgeable about, which is usually A&E. This was especially true if they had used A&E previously (past A&E use tended to predict future use) because people remembered A&E providing reassurance and familiarity at a time of anxiety and crisis
- This effect was multiplied if the patient is an infant and parents require urgent reassurance; a need that is well recognised by urgent care professionals
- Around one in three of all visits (in those aged 0-16) to any urgent care venue in Wirral are for an infant aged 2 or under
- Parents of children said they would be more likely to use WICs in the future if they knew what services were available (e.g. paediatric skills, required medication was available, nurse or doctor led services, X-ray etc...) and were clear on practicalities such as opening times
- Improved advertising and marketing of what services are available in which settings is seen as key by both parents and frontline urgent care staff, as was having advice or people they can contact to help them discuss the symptoms prior to making a decision about which service to attend
- A recurring theme across multiple Wirral surveys and reviews was patients reporting attending A&E because they could not get an urgent GP appointment. Again, this is not particular to Wirral and is also a national finding
- Local data indicates that the groups most likely to use A&E for non-urgent conditions which could be dealt with in primary care for example, were mental health patients, younger people in their 20s, people living in deprivation and those living near A&E; this is also in line with national findings
- A large proportion of people attending with conditions which could have been seen elsewhere, reported having been referred directly from primary care. This was echoed by further local research in which Wirral A&E clinicians reported frustration at what they saw as inappropriate referrals from primary care
- Data indicates that high rates of attendance at Victoria Central Hospital WIC in children aged 0-16 appears to divert attendances from A&E, as attendances are low from those wards which surround this WIC (Seacombe, Liscard) despite these wards being fairly deprived, which usually results in high levels of A&E usage
- Walk in Centres and Minor Injury Units were valued in the communities they serve. Over 90% of respondents agreed that they would recommend the service to friends and family
- Patients wanted access to an urgent care facility that would provide an accurate diagnosis and appropriate treatment quickly (within 2 hours of attending) and would prefer extended hours (9am -9pm) or 24 hours a day; most people indicated a preference for 7 day access.

Workshops for public and professionals on Urgent Care: 2016

In 2016, Wirral CCG conducted three Urgent Care Value Stream Analysis¹ events. The events included representative from local NHS organisations and members of local patient groups. The events looked at the challenges faced locally, as well as information on service usage. The main insights collected from these workshops were as follows:

- People were confused about what is offered and therefore will choose to go to A&E, because they know they will be seen
- There should be a greater use of technology to enable people to make the right choice when they need to access urgent care services
- There should be more coordination in how urgent care is delivered.
- There should be a greater emphasis on 'Self Care', meaning that people make every effort to care for themselves before using urgent care services
- Related to the above, an increased focus on promoting health and wellbeing
- Consistent availability of urgent access to GP practices
- Re-design of services to deal with non-urgent issues like wound dressings

Workshops for the public: January 2016

In January 2016, the Healthy Wirral partnership held a series of public workshops² on urgent care which asked the question, "What matters to Wirral". A large proportion of responses indicated a preference for A&E over other services (including people's own GP) for various reasons, including:

- Having access to support/treatment the same day (unlike GPs, where urgent appointments or appointments at weekends were unavailable)
- Greater trust in the service provided
- Preferring to take a cautious approach

People also expressed a desire for more joined up services and specifically mentioned concerns such as not to have to tell their story repeatedly, and for services to provide more holistic care, rather than being seen as a set of diseases.

Survey of Walk-In Centre (WIC) and A&E users: 2015

Using the questionnaire used by Wirral CCG (see below 'Survey of Wirral residents 2015'), Healthwatch completed face-to-face surveys with patients at WICs and A&E; findings included:

- When asked why they had chosen to use a WIC or A&E, the most common response was that patients could not get a GP appointment, or that patients thought that the service they had chosen was the most appropriate for their condition.
- Almost 2 in 3 patients (65%) said that they would consider using an alternative if they were aware of an appropriate service available
- The three most highly rated services that patients would recommend to family and friends were Pharmacies (98%), Walk in Centres/Minor Injuries (93.59%) and A&E (81.94%) The lowest rated service was NHS 111 at 38.89%, but it should be noted that this service had the most 'unsure' responses, due to the fact that many of the patients surveyed had not used the service or were unaware of it.

¹ Value Stream Analysis is a technique used to document, analyse and improve the steps in a patient's journey and flow of information or material required to produce or improve a service

² 'What Matters to Wirral' presentation, Healthy Wirral, 07-03-2016

Survey of Wirral residents: 2015

In September 2015, Wirral CCG conducted a survey (as part of the Healthy Wirral programme) to ask at an early stage, the views of residents on urgent care and gauge how residents thought these services could be changed to ensure that urgent care services meet need. There were 443 respondents, key findings included:

- People were unclear about the different urgent care services offered
- People were most likely to feel knowledgeable about A&E (43%), General practice (38%) and pharmacies (36%) compared to other services such as WICs and Minor Ailments/Injuries units
- The most common reason for choosing to attend a WIC or Minor Ailments/Injuries unit was because they were unable to get a GP appointment (46.3%)
- The majority (73.6%) of respondents felt that a reasonable time to wait for an assessment at an urgent care facility was less than 1 hour
- The majority (64.4%) of respondents felt that a reasonable time to wait for treatment at an urgent care facility was less than 2 hours
- A high proportion of respondent felt that urgent care facilities should be open 24hrs a day, 7 days a week; some respondents felt that extended hours would be suitable.
- When asked, 'What matters most to you', in relation to urgent care facilities 'Accuracy of diagnosis' and 'Quality of treatment' were identified as most important by respondents

Surveys of Urgent Care service users: 2015

The findings from reviews carried out by Healthwatch in 2015 with Urgent Care service users³ found that although in most cases, quality of care was good, there were some recurring themes, see below:

- Waiting times from registration of attendance to treatment was very long
- Patients were on trolleys in corridors often for a considerable time
- Frequent attendees did not receive appropriate referrals to other services which could help them
- Patients with mental health conditions were discharged and referred to services that they had been signposted to many times before, but ended up back at A&E regardless
- Patients did not know what different services (e.g. GP Out of Hours, A&E, WIC) provided, resulting in inappropriate attendances at A&E
- There should be clear, consistent communication about opening times, possibly to include generic opening times to remove confusion
- Clear communication of what each urgent care service offers patients (e.g. whether it is Nurse or Doctor led service, X-ray available)

Surveys of Minor Ailments service users: 2014

Healthwatch undertook several, 'Enter and View' quality reviews the Minor Injuries services at Miriam and Parkfield medical centres⁴ in 2014. Findings included:

- The main reason for choosing to attend the clinic was because respondents were unable to get an appointment with their GP
- If there had been a choice of additional locations, 78% of respondents would attend another minor injuries unit
- Patients were pleased with the care they received and the short waiting time, with the majority of patients rating the experience as 'good' or 'excellent'. All patients surveyed were either 'extremely likely' or 'likely' to recommend the service to family and friends

³ Healthwatch Wirral: Urgent Care Survey results (2015)

⁴ Healthwatch Wirral (2014) Miriam Minor Injuries/Illness Service Survey results

Qualitative research with patients and professionals: 2014

In 2014, in-depth qualitative research was undertaken by Wirral CCG. A total of 25 interviews were undertaken with parents and frontline staff (GPs, receptionists, Nurses, Managers) 12 of the interviews were conducted with parents of children who had visited A&E, the remaining 13 interviews were conducted with front line staff from several healthcare settings; Children's A&E Service, GP Practices, GP Out of Hours (GPOOH) and Walk In Centres. The key findings from the analysis where:

- GP Surgeries were identified as the most appropriate place for parents to take children for non-emergency care. However, there was a perception from both parents and frontline staff that GP access is a problem when parents want to see someone urgently.
- In the majority of cases that have led to an A&E attendance, there was a reported feeling of panic and anxiety from parents about the health of their children. Parents needed re-assurance and felt that A&E staff fulfilled this need. Re-assurance was also seen as key by frontline staff when dealing with worried parents and children
- Whilst Wirral Children's A&E was considered excellent by parents, it was indicated that improved communication around waiting times and discharge procedures could reduce stress and frustration of parents
- It was felt that WICs would be used more often if they had more paediatric skills and required medication available. There was a perception by parents that they might as well go direct to A&E, as they would ultimately have to go there anyway
- It was believed that there is a lack of awareness amongst parents about other health care alternatives available in the health community and what these services can provide
- Advertising and marketing were seen as key by both parents and frontline staff as to the services available and that social media could help facilitate this
- It is important for parents to have advice or people they can contact to help them discuss the symptoms prior to making a decision on which service to use. This can be family, friends, NHS Direct, GP or dedicated web sites with advice
- There was a clear belief amongst staff and service users that education and experience combine to help parents self-manage conditions and potentially prevent A&E attendances
- There was a perception among staff that a 24 hour Children's A&E Service would improve the service and care for parents and children
- It was believed that some parents will always choose to go to the A&E Service purely based on location because it is the most convenient place for them

Review of data on children's urgent care usage: 2013

A review of urgent care usage data among children aged 0-16-year olds in Wirral in 2013 found that;

- Children most likely to visit any urgent care venue were those aged under 2 years old. One in three of all visits (33.6%) to any urgent care venue in Wirral in 2012/13 were for a child aged 2 or under
- The peak age for children to attend any urgent care service was age 1
- Boys had a consistently higher number of attendances at A&E (at all ages 0-16)
- In the very youngest children (those aged <2), the GPOOH was more commonly used than A&E (A&E was the second most popular option for the under 2s)
- For all other ages, A&E was the urgent care service most likely to be attended
- There was a second, much shallower peak in attendances to A&E at ages 11 and 12, the age at which children become more independent and go to secondary school
- Deprivation appears to have a marked effect on attendances. High levels of deprivation equalled high rates of attendance (at A&E, GPOOH and Victoria Central Hospital WIC). Eastham WIC appeared unaffected by deprivation
- The wards with the highest rate of both attendances and admissions were the most deprived (e.g. Birkenhead and Tranmere)

- The highest rates of attendance at any venue were seen for children from Seacombe, Wallasey, Liscard and New Brighton using Victoria Central Hospital WIC. These four wards also had correspondingly low rates of usage of other urgent care services
- Proximity appears to have an effect on attendances (at both A&E and WICs), but not admissions (e.g. Upton ward has high rate of attendance, but not admissions).
- The GPOOH service did not seem to be affected by either deprivation or proximity

Focus groups and literature review: 2009

An evidence review of the literature on reasons for urgent attendances, followed by focus groups with parents who had used A&E on behalf of their children, were both carried out by NHS Wirral in 2009⁵. Findings were:

- Self-referrers to A&E were no more likely to be 'inappropriate' than those referred by primary care. A large number of non-urgent A&E cases had been referred by other health services or professionals. This was echoed by more recent research⁶ in which A&E clinicians reported frustration at what they felt were inappropriate referrals from primary care (solely to reassure anxious parents)
- Estimates of 'inappropriate' A&E use vary widely. Definitions used, and different population groups affect estimates, making them virtually impossible to quantify
- There are certain population groups more likely to use A&E for non-urgent conditions (e.g. mental health patients, younger people, people living in deprivation)
- Targeting frequent attendees has the potential to reduce a significant proportion of A&E workload, investigation of underlying (medical, psychological or social) conditions may yield positive results
- Alternative services such as WICs and Minor Ailments/Injuries services will have an effect on A&E usage, but it is likely to be small and significantly less than the 55% cited in some studies. In addition, the facilities available at such sites need to be widely publicised (e.g. availability of X-ray)
- The most commonly cited reason for people (classed retrospectively as 'inappropriate') to go to A&E was belief that they need an X-ray
- Use (of A&E) promotes future use, as although waits can be considerable, because A&E was seen as providing safety, reassurance and familiarity at a time of anxiety and crisis

⁵ Wirral Public Health Intelligence Team (2009) Evidence briefing on avoidable or non-urgent attendances at A&E.

⁶ Experience Led Commissioning: Urgent Care findings (2014)