



Review of Urgent and Emergency Care Services in Wirral



Background

In February 2018 NHS Wirral CCG published its intention to review [Urgent and Emergency Care services in Wirral](#) during 2018.

From 7th – 28th February Wirral CCG invited views from the public and local stakeholders on Urgent and Emergency Care services via the following channels:

- Online questionnaire
- Writing directly to Wirral CCG
- In person at APH, walk-in centres and minor injury units across Wirral
- Focus group

The feedback from the listening exercise will help Wirral CCG develop options for a public consultation in Summer 2018.



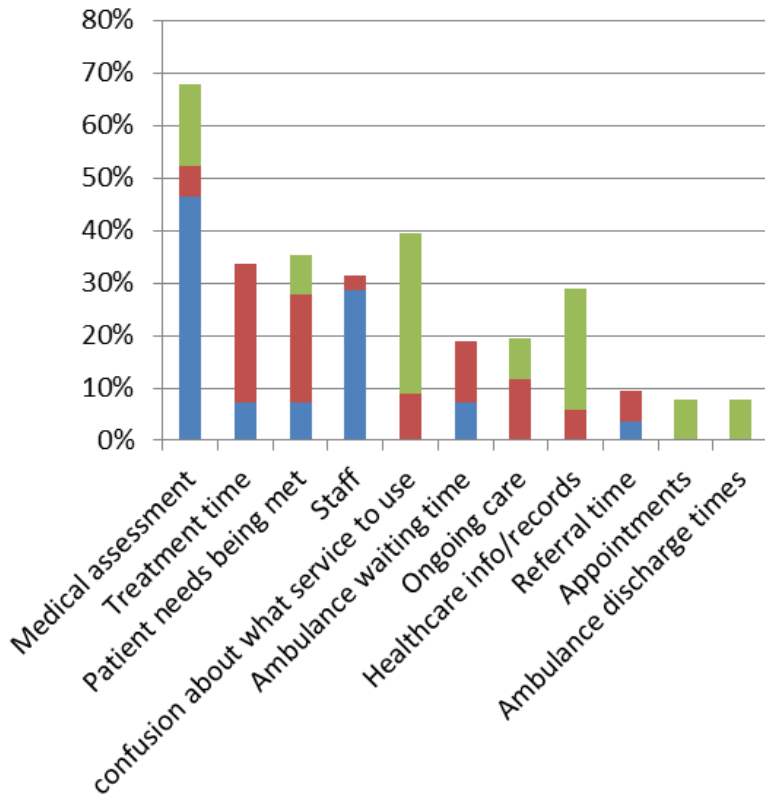
Listening Exercise

- 405 completed **surveys** (approx 150 face to face)
- The **roadshow** to capture insights from staff and patients included:
 - Thursday 15th February: Moreton Health Clinic (10am-1pm)
 - Monday 19th February: Arrowe Park Hospital main reception (1pm-4pm)
 - Tuesday 20th February: Victoria Central Health Centre (10am-1pm)
 - Wednesday 21st February: Arrowe Park Hospital Walk in Centre (1pm-4pm)
 - Friday 23rd February: Miriam Medical Centre Birkenhead (10am-1pm)
 - Monday 26th February: Eastham Walk in Centre (PM - 2pm-5pm)
- Advertisements & Social Media
 - On bus tickets (96,000 adverts) on Stagecoach buses w/c 19th Feb for a week
 - On facebook targeted at Wirral residents – reach of 4724 people
 - Organic facebook posts had a reach of 5146, including 48 shares.
 - Twitter – reach of 4247, and 186 engagements with the post (clicking through, sharing or liking)
- Email comments & calls
- Focus groups/presentations with various groups: YMCA/homeless workers, Older People's Parliament, mental health workers, youth voice group
- Additional feedback gathered via Forum 14-25 Housing, Looked after Children Group and young people with disabilities
- Presentations and Q&A sessions with Elected Members and Local Medical Committee,
- Data review and insight gathering meetings with WIC/MIU/A&E providers

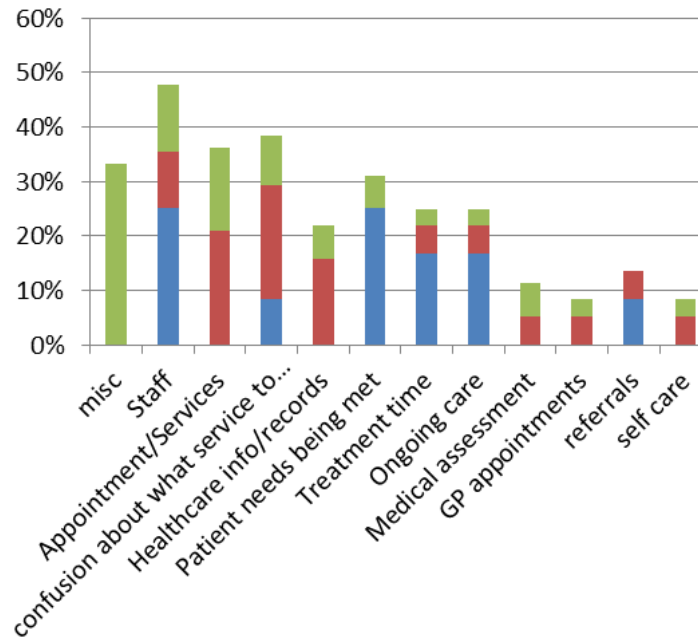


Key themes

Focus groups



Providers/elected members



■ improvement/opportunity
■ negative
■ positive



What was good about your Urgent and Emergency Care experience?

Ranking	Online survey	%	Comments
1	Speed	29%	The care and treatment I received and the speed it was carried out in, regardless of a very busy department. Very professional. Promptness of attention. Caring attitude
2	Staff	22%	
3	Quality of care	14%	
Ranking	Focus Groups	%	Comments
1	Medical Assessment	46%	'Assessed by doctor immediately at Arrowe Park' 'Friendly receptionist, understood the situation and now how to deal with efficient yet quick. Once treated the staff there calm, cheerful.'
2	Staff	29%	
3	Treatment Time	7%	
3	Patient needs being met	7%	
3	Ambulance waiting time	7%	
Ranking	Providers/Members	%	Comments
1	Patient needs being met	25%	'The art of being a WIC is spotting the really poorly patients' 'Have done demand and capacity modelling and workforce redesign to try to meet footfall, have different model for Sat & Sun, plan for bank holidays, some days very busy eg New years eve'
1	Staff	25%	
2	Treatment Time	17%	
2	Ongoing Care	17%	



What could be improved ?

Ranking	Online survey	%	Comments
1	Nothing	31%	On that day, nothing. I was very grateful to all at A&E Arrowe Park' 'The waiting times were far too long. I was unwell, in a lot of pain' 'Long wait times for a simple problem. Lack of staff available to see number of patients in waiting room.'
2	Waiting time	22%	
3	More staff	4%	
3	GP access	4%	
Ranking	Focus Groups	%	Comments
1	Treatment time	26%	'delays in A&E - relative in pain. No pain relief given due to Dr not assessed patient' 'Left for hours waiting for mental health support, not much patience with explanation of no money, drugs taken and no support' 'client not received well at A&E (complex needs client) . Frequent attenders get labelled' 'No emotional support given at time'
2	Patient needs being met	21%	
3	Ambulance waiting time	12%	
3	Ongoing care	12%	
Ranking	Providers/Members	%	Comments
1	Appointment/Services	21%	'MIU said that some patients come from VCH WIC because the WIC may stop seeing people 3 hours before closing if there is a queue. Also said the WIC refer a lot of people on to GPs' 'Urgent care system as it is too confusing, people don't know what each venue provides, and different opening times' 'A lot of people go to WIC first and then A&E.'
1	Confusion about which service to use	21%	
2	Healthcare info/records	16%	
3	Staff	11%	



Improvements/opportunities for consideration

Ranking	Focus Groups	%	Comments
1	Confusion about what service to use	31%	Ensure that paperwork for treatment is there.' 'Clearer instructions on when to use the different services.'
2	Healthcare info/records	23%	'Liaison professionals meet up with housing, health and services to take into account. Need more support to attend follow up's.'
3	Medical assessment	15%	'Need better route into A&E for suicidal teenagers for dignity and privacy. Route into area of safety and privacy without added confusion of untrained staff.'
Ranking	Providers/Members	%	Comments
1	Misc	33%	Issues with mental health presentations – cant diagnose mental health within 4 hour wait....issues of getting hold of social workers for mental health patients – emergency duty team (EDT) won't see emergency patients.'
2	Appointments/services	12%	'if MIUs had more resource they could provide better skill mix and prioritise patients coming through more. Said there was more demand than capacity at the moment.'
2	Staff	15%	'A&E cant see peoples data, e.g. care plans for alcohol and MH patients, or end of life patients' 'MIU said that they see some people from practices that will not see patients the same day, or make patients wait for a long time for appointments, or have a policy of telephone appointments first, then often send patients to the MIUs.'

Transport, costs and modelling were among the miscellaneous topics discussed providing an insight in to issues faced by frontline workers.



Reason for using Urgent and Emergency Care Service

Reason for urgent care use	Total
Infection e.g sore throat/ear/urinary tract	100
Generally unwell-other	98
Chest pain	51
Possible break/fracture	43
Dressing or wound care	32
Stomach pain	26
Skin problems e.g. rash	21
Back pain	19
Head injury	16
Respiratory-asthma	12
Burn	10
Fall	6
Head pain	6
Diabetes	4
Stroke	4
Pneumonia	4
RTA	3
Sepsis	3
Leg pain	3
Minor Injury	2
Mental health	2
Grand Total	465

The most common cause of utilising urgent care services was for infections, or the ‘catch all’ definition category of ‘Generally unwell/ other.’

A&E saw a high proportion of these two ailments (35.6% of A&E activity from the respondents.



Why did you choose to go to this service?

7 Thinking about this same occasion, where and why did you go there for urgent care?	Most Suitable	GP appointment or advised	NHS 111 advice	Location	Ambulance conveyance	GP Access issues	Diagnostics-availability	Grand Total
A&E at Arrowe Park	42	7	3	4	14		1	71
GP Practice Appointment		26	1	2		1		30
Walk in Centre - Arrowe Park	10	2		3		5	1	21
NHS 111	2		16			1		19
Walk in Centre - Mill Lane Wallasey	5		1	8		1	2	17
GP Out of Hours Service		2	5	2		2		11
Walk in Centre - Eastham Clinic	1		2	5		2		10
Minor Illness/Injury Centre - Miriam	5			2				7
Pharmacy	2							2
Minor Illness/Injury Centre - Moreton		1						1
Grand Total	67	38	28	26	14	12	4	189

Individual subjectivity was a factor in determining their choice of setting. They chose A&E as they believed that it was the most suitable location to receive the treatment that they believed they needed.

“It was life threatening,” “I had faith in the service.”



When deciding where to go, what was the most important reason for you?

Reason for choice	Total
Quickness	42
Nature of illness	30
Location	21
Best care	13
Advised to go	6
Advice	5
Appropriate staff	5
Parking Issues	4
Other	53
Grand Total	179

Location for choosing a service was a feature of several responses linked to Walk in Centres and Minor injury units.

When deciding where to go, quickness, nature of the illness and location were the main three contributory factors. With speed being the main driver for all settings.



Would you use an urgent treatment centre?

Response	Total	Percentage
Yes	198	59.3%
No	123	36.8%
Don't know	13	3.9%
Grand Total	334	100.0%

59.3% of those that responded (343 replies) to the question “Would you use an Urgent Treatment Centre?” said that they would use it.

Why would you not use it?	Total
Needed emergency care	24
Would use GP firstly	7
Transport	6
Parking	4
APH too hard to get to	4
Mill lane closer	4
Other	61
Total	110

Those that wouldn't, believed that the question related to the present reason for urgent care usage which they deemed required emergency care.

Others would attempt to seek a GP appointment as their first response instead of using the Urgent Care Centre.

Those that said 'no' thought that it was specific to that condition- so if had a stroke-then they said no as they did not think a UTC was the best place.



Responses to the ‘reasons for change’ leaflet

Change due to patients and pressures	Total
Inform people-Better education	9
Something needs to be done	9
A&E more efficient	9
Reduce A&E need	6
Need more efficient system	4
Demographics require this change	4
Other	63
Total	104

The patients insights contained on the published leaflet made people believe that there was a sufficient reason for change (71.6%).

The changing needs of patients and pressures on the urgent care system made people believe that was a sufficient reason for change (80.1%).

“People need to be educated where to go and to see the appropriate medical professional and not abuse A&E for minor ailments.”

“The General public need more advice on treating symptoms themselves..”

“The need to change identifies the changing population and the demands this on the services available as the current system is not working.”

“...i believe that they are struggling to cope with the current capacity.”

“Free up accident and emergency for the real emergencies.”

How important do you think the following are in improving urgent care services?

Responses	How important do you think the following are in improving urgent care services? (Total Responses)
Quick access to care in an emergency	189
Effective, easy to use services	178
Standardised and simplified access	161
Joined up services	113
Effective staff skill mix and use of technology	94
Person centred care	88
Services which staff are proud to be part of	72

Quick access to care in an emergency: if I need an ambulance or treatment at A&E, I am confident that I will be treated to a high standard within a safe timeframe

Effective, easy to use services: I have access to urgent care services that are easy to get to and to use. I am confident that I will be seen quickly and my healthcare needs will be met.

Standardised and simplified access: I know where to go or who to contact when I need urgent or emergency care or advice. I receive the same standard of advice and care whichever service I come into contact with



LMC Meeting feedback

Following a presentation from Wirral CCG outlining the drivers for the Urgent Care Transformation the following themes summarise the main points of discussion.

Primary Care

- Primary Care needs to feel and see that they are an integral and important part of the Wirral Urgent Care System and as such any options developed for consultation should recognise this aspect.
- Primary Care in Wirral does not have a consistent UC offer – this developed a further discussion about the variation in provision of urgent same day access across GP practices and as such the CCG needs to begin to work to capture data to understand this further. It was felt that there needed to be openness and transparency from some practices about this as it would provide a true picture of urgent care across Wirral.
- Practices should be incentivised with regard to Urgent Care access.



LMC Meeting feedback

Urgent Treatment Centre at Arrowe Park Hospital

There was support for the rationale presented that the mandated UTC for Wirral should be located at APH by developing the existing Walk in Centre although there was a strong view that it should be led and run by Primary Care .

- The only way an UTC will work effectively will be if people are restricted from A & E minors through a proper Single Front Door.
- GP OOH should be incorporated into the UTC offer.
- Consideration for UTC to be open 24 hours a day.

Urgent Dental provision is not part of the current NHS 111 and patients can go much further beyond Wirral for urgent dental treatment.

Use of Technology – Needs to be a greater consideration

Primary Eye Care – Consideration as to how this will fit with the UTC.

Walk in Centres – Specific question as to whether WICs are mandated – CCG confirmed that they are not nationally mandated.

Single Point of Access – need to ensure that any options for a revised urgent care system align with SPA and other admission avoidance schemes

