

## **Health and Wellbeing Board**

**24 April 2017**

### **Healthwatch Walsall Update Report**

#### **1. Purpose**

1.1 The Purpose of the report coming to Health and Wellbeing Board is to update the Board members on the activities of Healthwatch Walsall since the last report was tabled in Jan 2017

#### **2. Recommendations**

2.1 That the Health and Wellbeing Board notes the content of this report

#### **3. Report detail**

3.1 Healthwatch Walsall published two reports in February 2017.

3.2 One report was about GP Performance across the Borough.

#### **Findings**

Overall patient satisfaction was high with 84% of respondents saying that their practice was either excellent or good. 78% of respondents also said that they would recommend their GP practice to friends or family members.

64% of respondents said that they were able to get an appointment when they felt that they needed one and there was better availability of appointments for nurses than doctors. On the day appointment availability could be problematic but so could the availability for routine appointments within the next few days with long waiting times meaning that some patients were taking emergency appointments when it was not really necessary just to secure an appointment. 22% of respondents also reported that they had used A&E when they had been unable to get a GP appointment. Being able to get through by telephone to make an appointment was also cited as an issue for some respondents as was waiting for a call back from a GP to see if they needed an appointment when a practice operated a triage system. 84% of respondents said that they were always treated with respect by the staff at the practice and 89% said that their doctor was good. However, there were some comments made about the doctors seeming to be rushed and not allowing time for patients to communicate with them. Nurses attracted positive comment about their care and compassion.

Reception staff were also reported to be excellent or good by 82% of respondents although there were negative comments particularly in relation to attitude. Comments were also made about there needing to be more reception staff in some practices

and them being more reflective of the local population such as more people from BME communities.

Some participants reported that it could be difficult to see the same doctor when there was an ongoing medical issue due to a lack of appointments being available. It meant that either they had to wait longer for an appointment or they'd have to see a different doctor and lose the continuity of care.

Opening times for surgeries were considered by 86% of respondents to be acceptable however, there were some comments about needing hours to be more flexible for those who worked or had to go to school and these generally centred on appointments being available early in the morning or later in the evenings.

The surgery environment attracted some comments in relation to privacy at reception with one suggestion that there should be a privacy sign at reception to ensure that people are given enough space to be able to speak to reception in confidence. However, 60% said that they considered the privacy at reception to be excellent or good at their practice.

Facilities for children in waiting rooms was also discussed with comments being made about the lack of provision of toys for children and these were attributed to infection control measures. However, there was also a comment that where toys were provided they could prove to be a source of risk for people elderly or less mobile patients when children were not kept under proper control.

HWW has devised the following recommendations based on the findings:

- While the majority of people appear satisfied with their GP services there remains a sizeable number that have poor or very poor experiences. HWW feels that this is a concern and that there ought to be a specified threshold of satisfaction set for key aspects of service for all practices e.g. using the average of the upper quartile showing the highest satisfaction levels. Practices falling below this threshold should then be asked to develop action plans in collaboration with their PRG for presentation to Walsall CCG to improve patient experience.
- We would like to see a pilot project developed in collaboration with the CCG, NHS England and of course PRG's to focus on a few GP practices that are not scoring well and set up a working group to evaluate results, explore factors affecting those results and jointly arrive at solutions.
- As there were concerns raised regarding the length of time taken to answer calls, where telephone queueing systems are in use review the average waiting times and potential cost impact to patients of being left on hold.
- In respect of comments about reception staff and attitudes consider introducing customer service training for reception staff and where there is a role for reception in determining urgency of need for appointments ensure that reception staff have undergone recognised triage training relevant to that role.
- Review the availability of early morning and later evening appointments for people who have school, work or caring commitments.
- Review the availability of routine appointments in order to enable appointments to be available within a few days and reduce pressure on urgent appointments.

3.3 The second report is about communications in the A&E Dept. at the Manor Hospital.

### **Findings**

- The waiting area for A&E is shared with the Urgent Care Centre and for some respondents this was a cause of confusion with people being re-directed to different reception desks from those that they initially approached.
- Waiting times were a key area for comment with the length of waits being mentioned by a high number of respondents. Being kept informed of waiting times was an area of concern for some but a relatively high number of respondents were happy with the level of information that they received. For those that commented there was a general feeling that there wasn't enough information and that their wait in A&E would have been better if they had been kept informed of progress.
- Communication with patients and between medics were commented on although respondents generally felt that they had been communicated with well by staff. However, there were some comments about the need for interpretation services and also tailoring communication to the needs of the patient to ensure that vulnerable patients were properly involved in their treatment.
- Although most respondents agreed that they had been treated with dignity and respect there were some comments about the need to protect patient privacy more particularly in relation to hospital gowns, and people being able to change without being exposed when doors or curtains were not closed. Being able to maintain personal care was also pinpointed as an area for concern with there not being staff to assist patients with personal care.
- The standard of care was generally seen as being very good and words such as excellent were used. However, they were often prefaced with comment about waiting times and this suggests that waiting times have a negative impact on the overall sentiment about A&E services.

Based on the patients sharing their experiences HWW has set the following recommendations:

- **Waiting times-** ways of communicating better with patients in the waiting area should be considered to update them about the length of time they will be waiting. This includes making sure that information screens are working. It is appreciated that individually updating people in the waiting room is not possible but giving them an indicative waiting time when they register at reception may be a possibility. The TV needs to be on at all times with a dedicated banner running across the bottom of the screen at all times or a separate digital information screen running continually.
- **Interpretation services-** consideration should be given to how to ensure that interpretation services can be more accessible for patients whose first language is not English.
- **Communication needs assessments-** ensure that individual communication needs are assessed and acted upon to ensure that vulnerable patients are able to be properly involved in their treatment.
- **Dignity and respect-** it is acknowledged that the department is short of space, however, staff should be reminded of the need to treat patients with dignity at all times including shutting cubicle doors and ensuring that there are enough staff available to assist with personal care tasks.
- **Appropriate clothing-** The practice of making patients wear hospital gowns whilst waiting in general areas where other patients are fully dressed should be reviewed so that patients are not left feeling vulnerable.
- **Customer care-** whilst there are many positive comments about staff, the negative attitude of some staff should be addressed. Customer care training, including refresher courses should be mandatory for all staff dealing with

patients, and managers should monitor and address any issues of poor attitude which impact on patient care.

- **Combining reception** – consideration ought to be given to combining the two receptions for urgent care and A&E so that trained receptionists can direct patients to the appropriate service rather than patients having to make that distinction themselves. This would reduce the amount of complaints arising from being passed from one window to another and having to repeat all your information and make sure people are dealt with in a timely manner.

### 3.4 Healthwatch Walsall has also successfully recruited a new Advisory Board.

In consultation with the new Chair, John Taylor, of the HWW Advisory Board a recruitment campaign was devised for the recruitment of the Advisory Board Members. The advert went out by Social Media, through our network of stakeholders, via One Walsall, as a press release, on our website and with share request to all major stakeholders to request they share through their own communication channels.

HWW interviewed eight following a rigorous shortlisting exercise to ensure all met the standards required of the positions and asked to be demonstrated in the application forms.

All eight applicants, following a detailed interview that followed a standardised set of questions designed to test peoples experience and involvement in boards/committees set within a voluntary sector, business or professional setting, were offered a position on the Advisory Board. A lay member, Mike Able, from Walsall CCG was again involved in the recruitment process to ensure stakeholder involvement to ensure processes were followed appropriately.

All eight advisory board members bring a wealth of diverse experience to the table that will enrich the advisory board and enable it to look at priorities and issue that crop up with great insight.

The following Advisory Board members were appointed:

1. A'isha Khan
2. Maureen Cornish
3. Teresa Tunnel
4. Prof Lucy Land
5. Sylvia Bailey
6. Sarah Lloyd
7. Ross Hicklin
8. Andrew Brown

3.5 Finally, the report lists the feedback from the Priorities public event about the scoping of the top five main priorities the public would like Healthwatch Walsall to look to focus upon over the next 12 – 18 months.

## **Healthwatch Walsall – priorities – scoping exercise at the ‘What next for health services in Walsall?’ held on 15 March**

### **A&E**

1. Communication – very negative communication when in A&E; need to change to positive communication; access to refreshments when waiting for long periods
2. Physical environment of A&E – co-location of urgent care and A&E leads to confusion and difficulties to access refreshments for eg
3. Capacity – implications of closure of Sandwell
4. Better pathways and treatments – at peak times it's a struggle but people do have positive experiences

### **GP Access and GP Out of Hours Access**

1. Opening hours – availability including weekends sat and Sun
2. Triaging – more appropriate use of skill mix of staff – signpost to appropriate service
3. Education and communication – for communities i.e. help communities know where they can go before going to Dr when its not critical such as pharmacy/opticians
4. Work with patient groups at each GP Surgery

### **Mental Health**

1. Preventative work – identification of services ie when people at partner services and exhibiting MH issues – knowing where to refer
2. Simplification of complexity around services and access to – important a person centred approach is used and simplified approach for individual
3. Cross agency education – support all groups to understand what each other's do rather than trying to be the expert on something that they're not – regularly share knowledge around all groups and raise awareness

### **Social Care**

1. Access to Social Workers – consistent workers; training; knowledge of local area; aware of culture they are in (funding)
2. Speed – delays can be months; rapid assessment processes; funded services not being used; simplification of jargon and pathways
3. Equity of access to services

3.6 This results of the public event and the findings of the two reports that are due for publication will then be discussed at the Healthwatch Walsall Advisory Board to plan a programme of work taking account of the public priorities but also needing to retain capacity to look at other significant impacts for example the need to address issues such as the STP for the Black Country and West Birmingham and the Walsall Together agenda.

## **4. Implications for Joint Working arrangements:**

Healthwatch Walsall will always seek to work collaboratively with commissioners and providers of health and social care services. The results of Healthwatch Walsall's work will be shared with the relevant commissioners and providers of services with the aim of contributing to service improvement and delivery.

## **5. Health and Wellbeing Priorities:**

The current priorities remain as Infant Mortality and Diabetes until the new Health and Wellbeing Strategy is published.

The top 2 priorities of Healthwatch Walsall are A&E and GP Access and Out of Hours. Any research and engagement work that Healthwatch Walsall undertakes that leads to recommendations for service improvement will have beneficial impacts for people that fall within the two Health and Wellbeing Board priority areas. So too will any research and engagement work into the provision and delivery Adult or Children's social care, which is Healthwatch Walsall's third priority area.

### **Background papers**

Healthwatch Walsall GP Performance Report February 2017.

Healthwatch Walsall A&E Communications Report February 2017.

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## GP Patient Experience Report

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2016

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## Executive Summary

### Background

Healthwatch Walsall carried out a survey of Walsall residents in 2013/14. The results of the initial survey suggested that there were wide variations in patient satisfaction levels between different practices. As a result of the feedback and concerns raised through the initial survey a GP performance and satisfaction work stream was established and further survey activity took place in February and March 2016.

### Methodology

A survey was used that was more focussed upon patient experiences and outcomes of seeing their GP rather than on process questions that would identify high and low performers in terms of satisfaction. This was in order to understand the factors that may influence satisfaction levels. It was supported on-line and by some GP practices, surveys were also completed with patients at GP practices by Healthwatch Walsall.

### Findings

There were 983 survey responses to the survey received by mid-May 2016 when the survey closed.

Overall patient satisfaction was high with 84% of respondents saying that their practice was either excellent or good. 78% of respondents also said that they would recommend their GP practice to friends or family members.

64% of respondents said that they were able to get an appointment when they felt that they needed one and there was better availability of appointments for nurses than doctors. On the day appointment availability could be problematic but so could the availability for routine appointments within the next few days with long waiting times meaning that some patients were taking emergency appointments when it was not really necessary just to secure an appointment. 22% of respondents also reported that they had used A&E when they had been unable to get a GP appointment. Being able to get through by telephone to make an appointment was also cited as an issue for some respondents as was waiting for a call back from a GP to see if they needed an appointment when a practice operated a triage system.

84% of respondents said that they were always treated with respect by the staff at the practice and 89% said that their doctor was good. However, there were some comments made about the doctors seeming to be rushed and not allowing time for patients to communicate with them. Nurses attracted positive comment about their care and compassion.

Reception staff were also reported to be excellent or good by 82% of respondents although there were negative comments particularly in relation to attitude. Comments were also made about there

needing to be more reception staff in some practices and them being more reflective of the local population such as more people from BME communities.

Some participants reported that it could be difficult to see the same doctor when there was an ongoing medical issue due to a lack of appointments being available. It meant that either they had to wait longer for an appointment or they'd have to see a different doctor and lose the continuity of care.

Opening times for surgeries were considered by 86% of respondents to be acceptable however, there were some comments about needing hours to be more flexible for those who worked or had to go to school and these generally centred on appointments being available early in the morning or later in the evenings.

The surgery environment attracted some comments in relation to privacy at reception with one suggestion that there should be a privacy sign at reception to ensure that people are given enough space to be able to speak to reception in confidence. However, 60% said that they considered the privacy at reception to be excellent or good at their practice.

Facilities for children in waiting rooms was also discussed with comments being made about the lack of provision of toys for children and these were attributed to infection control measures. However, there was also a comment that where toys were provided they could prove to be a source of risk for people elderly or less mobile patients when children were not kept under proper control.

## Recommendations

- While the majority of people appear satisfied with their GP services there remains a sizeable number that have poor or very poor experiences.

HWW feels that this is a concern and that there ought to be a specified threshold of satisfaction set for key aspects of service for all practices e.g. using the average of the upper quartile showing the highest satisfaction levels.

Practices falling below this threshold should then be asked to develop action plans in collaboration with their PRG for presentation to Walsall CCG to improve patient experience.

- We would like to see a pilot project developed in collaboration with the CCG, NHS England and of course PRG's to focus on a few GP practices that are not scoring well and set up a working group to evaluate results, explore factors affecting those results and jointly arrive at solutions.
- As there were concerns raised regarding the length of time taken to answer calls, where telephone queueing systems are in use review the average waiting times and potential cost impact to patients of being left on hold.
- In respect of comments about reception staff and attitudes consider introducing customer service training for reception staff and where there is a role for reception in determining

urgency of need for appointments ensure that reception staff have undergone recognised triage training relevant to that role.

- Review the availability of early morning and later evening appointments for people who have school, work or caring commitments.
- Review the availability of routine appointments in order to enable appointments to be available within a few days and reduce pressure on urgent appointments.

## Background

Healthwatch Walsall (HWW) established a GP performance and satisfaction work stream (the work stream) as a result of receiving feedback and concerns about aspects of GP services through the first HWW survey of public opinion in 2013/14.

Access to GPs and satisfaction with GP services has been subject to a range of research nationally. NHS England carry out a national patient survey and this provides feedback about all GP practices nationally and it is possible to assess the satisfaction levels with key aspects of accessing GP services for each area and by practice. HWW found from the results of the survey that there are significant variations between the highest and lowest performing practices in terms of patient satisfaction.<sup>1</sup>

A report produced by the Kings Fund in November 2012<sup>2</sup> identified that clinical effectiveness and patient experience are key domains of healthcare quality. Considering them together is an effective way for general practices to understand the quality of care they are providing and areas for improvement.

## Methodology

A survey was used to gather feedback from patients using GP services in Walsall. The survey was designed to evaluate organisational factors and GP characteristics that may affect patient experience of their GP. As such the survey was more focussed on patient experiences and outcomes of seeing their GP rather than on process questions as this would assess factors that might explain why some practices are particularly high or low performers. Advice was taken from Healthwatch England and the University of Wolverhampton in the development of the survey.

The survey was conducted between February and May 2016. It was available as an on-line survey as well as paper copies in GP practices. HWW also completed surveys with their patients in the waiting rooms of some practices after being invited to do so by the practice.

## Findings

There were wide variations in the number of surveys received. The highest number of responses were from practices where there was active support from the Patient Representative Group (PRG), the Practice Manager and where HWW were able to carry out surveys at the practice itself.

The findings reflect the views of 983 respondents whose surveys were received by mid- May 2016.

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<sup>1</sup> <https://gp-patient.co.uk/surveys-and-report>

<sup>2</sup> The Kings Fund (2012) Improving GP services in England: exploring the association between quality of care and the experiences of patients

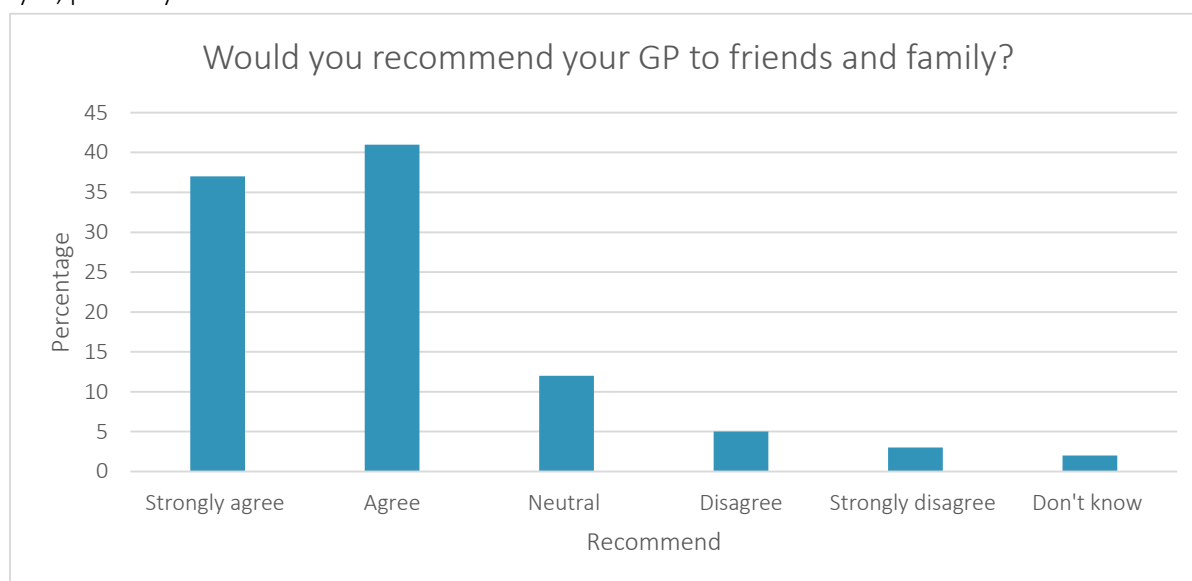
## Themes

### Overall patient satisfaction

Patients' overall satisfaction with their practice was high with 84% assigning a good or excellent score to their practice. The larger survey undertaken by NHS England, which was published in January 2016, found that 42% rated their overall experience as very good in Walsall practices and this is the same as the number of people who rated their practice as excellent in the HWW survey. This is marginally below the England average of 43%.



37% strongly agreed and 41% agreed that they would recommend their practice to family and friends. A similar question in the NHS England survey asked people whether they would recommend their surgery to someone new to the local area. In this case the figures were 44% 'yes, definitely' and 31% 'yes, probably' for Walsall.



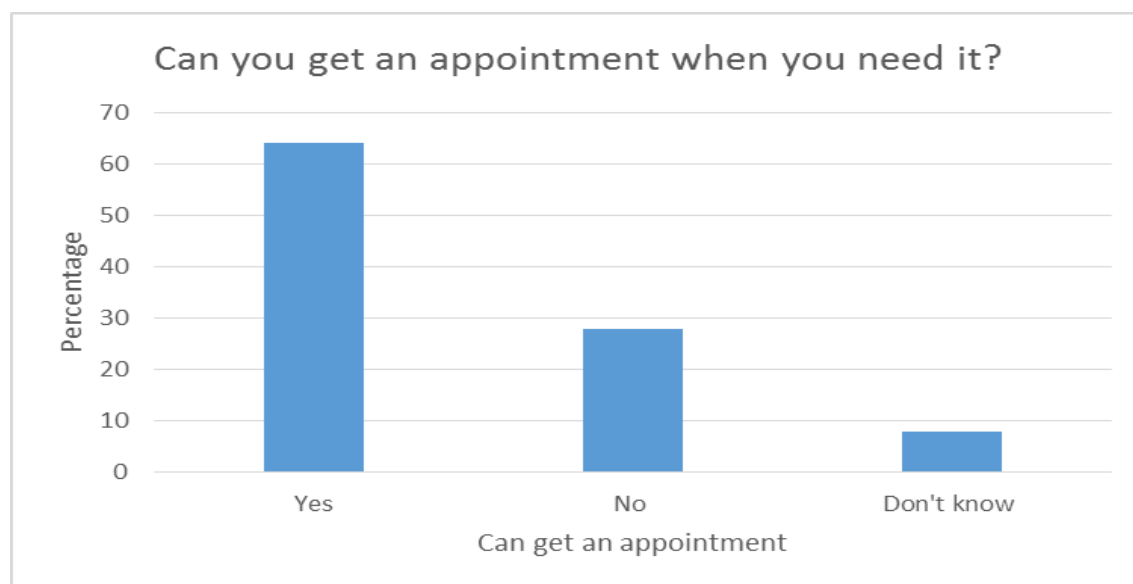
There were a number of comments from respondents that reflected that they were happy in general with their GP practice and these tended to comment on the staff in general with comments such as 'I have nothing but praise and admiration as well as utmost respect for ALL the staff... I could not have dreamt of being with a better practice.' Another commented that they 'consider myself very lucky to belong to this practice'. This respondent attributed this to the ability to get an appointment when she needed one and also the support she had received from the practice staff when she had been bereaved.

However, not all comments were positive with one respondent commenting that 'I have autism. I feel like I am on a 10 minute timer and not given enough time to explain my needs or to understand what I have to say.'

### Appointments

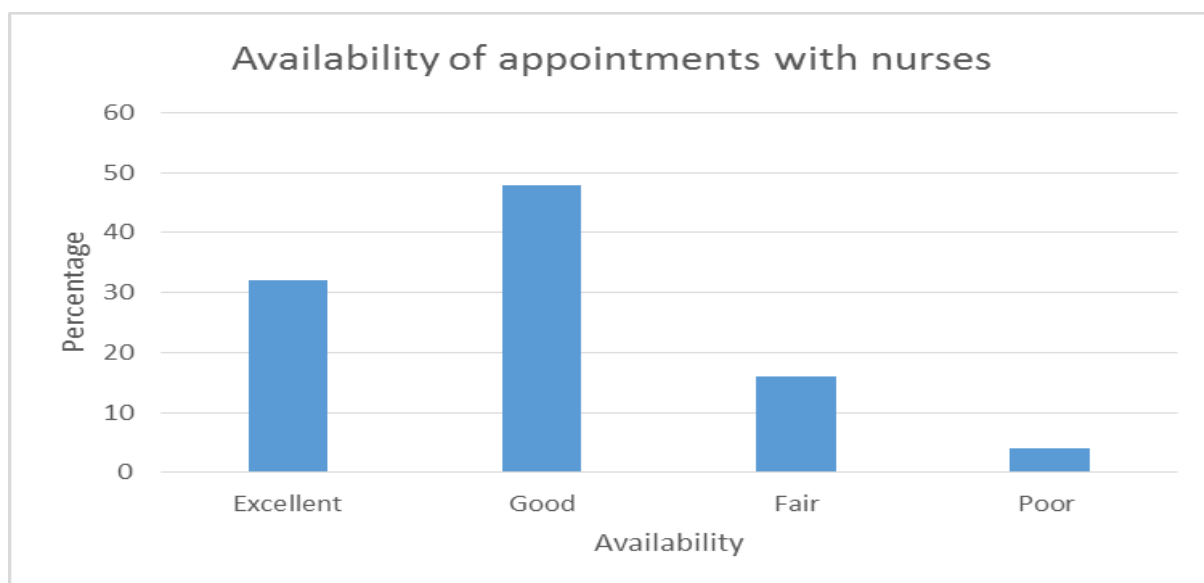
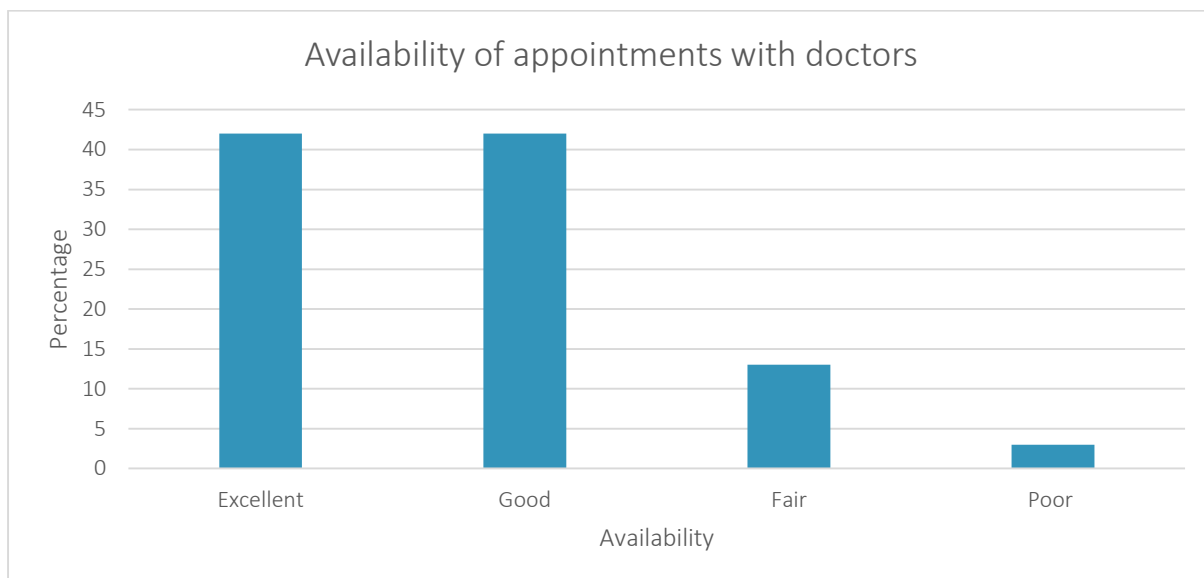
64% of respondents reported that they were able to get an appointment when they needed it whereas nationally 87.4% said that they could get an appointment when responding to the National Patient survey published in July 2016.<sup>3</sup>

This is in line with the 62% who were confident of getting an appointment when they called the practice. However, nearly 30% of people were unable to get an appointment when they felt that they needed one.



<sup>3</sup> <http://gp-survey-production.s3.amazonaws.com/archive/2016/July/July2016NationalSummaryReport.pdf>

65% of respondents felt that availability of appointments with doctors was good and this rose to 80% for appointments with nurses.



Despite the numbers of people who said that they were able to get an appointment and there was good availability of appointments the appointments system and waiting times for appointments generated the most comments from patients.

People could find it difficult to get a timely appointment, such as a same day appointment or in the next couple of days. One respondent commented that [‘the appointment system is atrocious; you cannot book an appointment on the day or within the next couple of days. You cannot plan when you will be ill.’](#) Another commented that [‘it is very difficult to see a doctor if you feel ill at the time, not two weeks down the line.’](#)

There was dissatisfaction with the process in some surgeries of having to ring the practice at 8am in order to get a same day appointment.

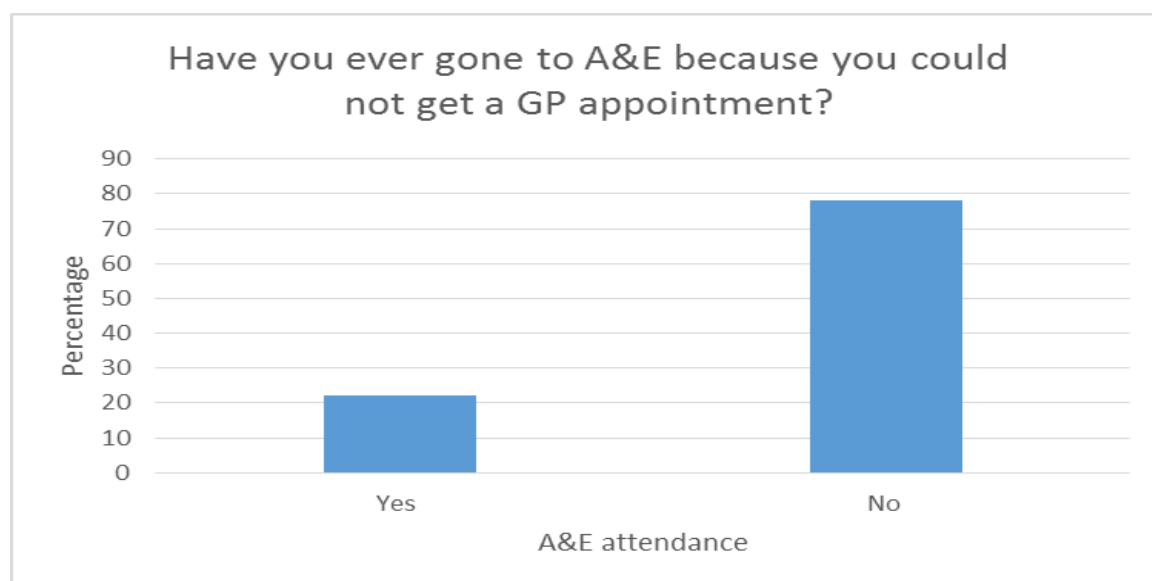
Furthermore, appointments for the same day could quickly run out with one respondent commenting that the 'the appointment system is not good. Unable to get an appointment on the day... they say they are fully booked within five minutes.'

The telephone call back system and the consequent waiting time was disliked. One respondent commented 'I do not like their booking system. I never get an appointment straight away. They expect you to wait at home or have your phone on you all day to wait for their phone call, before they decide whether I should have an appointment.'

Delays in the call being answered were a source of frustration for some respondents with one commenting that 'my surgery used to be easily available but now I can be on the phone for 15-20 minutes and then have to wait two weeks for an appointment.' Another commented that although they could get through to the surgery answering service quickly they were then held in a queue to speak to someone and 'then you have to wait and wait.' There is a cost implication for the caller and for the respondent 'if I am using my mobile phone...it can work out quite expensive to call.'

One consequence of not being able to get a timely appointment may be that people are asking for an emergency appointment when it is not strictly necessary. One respondent commented that 'if you want a same day emergency appointment, that is easy to get. If it isn't an emergency, you have to wait over a week for an appointment. The result is that you may ask for an emergency appointment because it cannot wait a week but it is no urgent for that day.' Another commented that they felt it was 'difficult to gain a routine appointment within a short space of time. I've had to ring 2-3 weeks in advance or take an emergency appointment when it is not really an emergency but it can't wait 2-3 weeks.'

There was also evidence that when people were unable to access a GP appointment when they felt that they needed one they were instead presenting at A&E. 22% of respondents reported that they had been to A&E because they could not get a GP appointment.





The reasons for this were not explored and on the surface this seems a relatively high proportion. However, one respondent commented that 'I've had to attend A&E with my child at the weekend when the surgery has been closed when it isn't actually an emergency therefore, misusing services just because it was the weekend.'

The comment suggests that there may be a lack of knowledge of out of hours services but at Walsall Manor Hospital, an Urgent Care Centre (GP run) is located adjacent to A&E and patients use the same entrance and an adjacent reception desk. This may have led to some confusion amongst patients and some over reporting as some patients purporting to have attended A&E because they could not get a GP appointment may in fact have attended the Urgent Care Centre.

### Staff

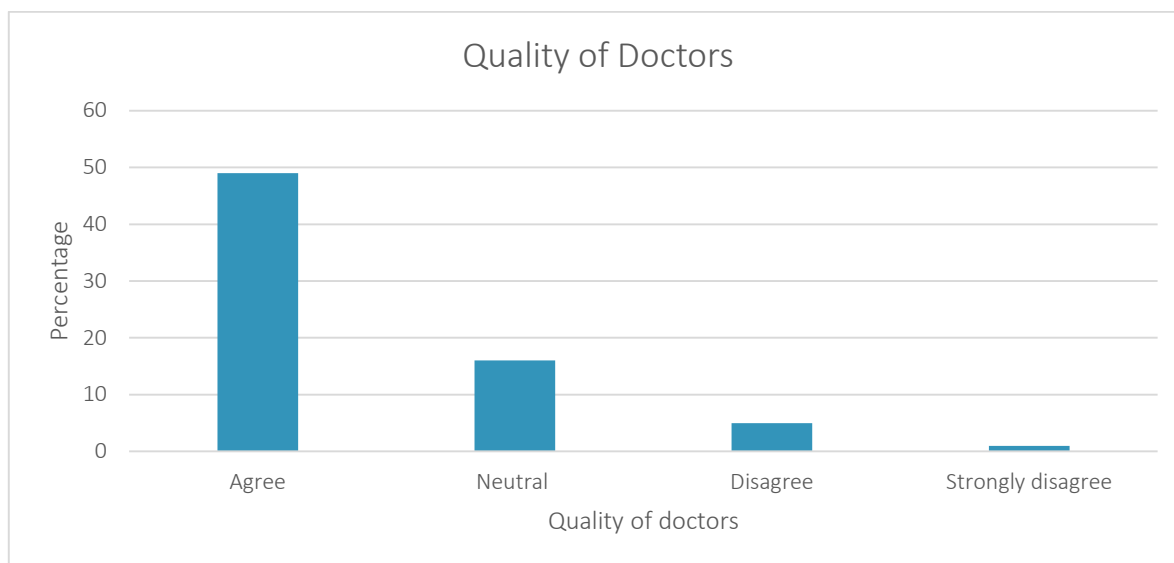
84% reported that they were always treated with respect by practice staff. 89% considered that their doctor was good, including 47% who considered that their doctor was excellent.



### Doctors

There were many positive views of GPs and the comments particularly focused on the care and support that they have received from their doctor. One commented that their doctor 'always listens and shows empathy.' Whilst another commented how their doctor had supported their son 'when he was having problems through bullying... he has time for him and never rushes him.'

However, some commented that they sometimes felt the doctor did not listen to what they had to say and that 'some are very dismissive'. Others commented that when they saw the doctor they 'always seem to be in a rush to get me out of the door.'

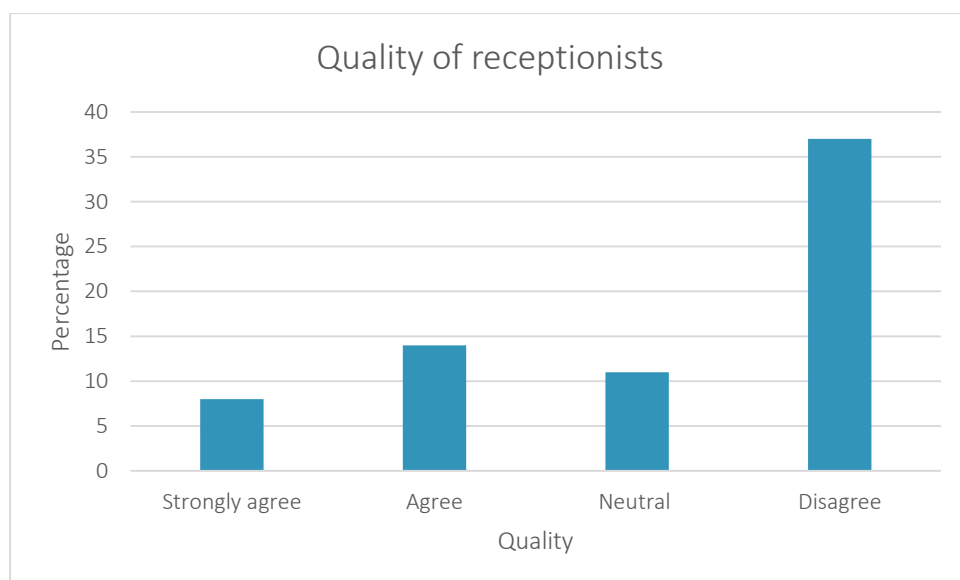


### Nurses

There were fewer comments made about nursing staff but these were generally positive. For one respondent the nurse showed them 'care and compassion' and another commented that when they saw the nurse at their practice they had 'arrived feeling despondent and left feeling positive. I learnt a lot about my medication and felt that she was invested in my treatment plan.'

### Reception staff

Reception staff were rated as good or excellent by 82% of patients.



There were many comments about receptionists with varying levels of satisfaction with their experience of reception staff. In some surgeries they were perceived as being doing an excellent job with one respondent saying that 'the reception staff are brilliant and really try to do their best.' Another said that 'the receptionists are exceptional at this surgery, always welcoming, friendly and helpful and professional.'

In contrast there was some poor feedback about receptionists with one respondent describing them as 'rude and unhelpful'. As a consequence of this they were 'looking at changing my GP.' For one respondent there was a sense that receptionists at their practice 'don't have time or compassion for you.' Another respondent felt that reception staff were unhelpful and said that they 'argue with you at reception'. The same respondent felt that reception staff should not be able to ask why an appointment was needed because 'they are not doctors.' Another considered that having to tell the receptionist the reason for the appointment was 'like trying to get through a brick wall.'

Some respondents made suggestions on how their experience of receptionists could be improved including employing reception staff from BME groups in order to be more representative of the local community with one saying that 'it will help patients to join the practice from this community.' Another suggested that there should be more reception staff after witnessing that 'at 8.30am...there was only one receptionist, dealing with reception and answering the phone. She had to leave the desk unattended to deal with an enquiry at reception, the queue built up and phones rang and rang.'

### Continuity of care

There was concern raised that the lack of available appointments was having an impact on the continuity of care with a number of patients commenting on the difficulty of getting appointments with the same doctor. One respondent equated the difficulty of being able to see the same doctor with their being 'too many patients'. For another one they equated the difficulty in getting to see the same doctor with there being 'fewer GPs and more doing part time. So obviously it is more difficult to get an appointment, often it is not the same doctor so there is no continuity.' Another respondent commented about the turnover of doctors at their practice saying 'the doctors seem to change regularly at this practice so continuity of care with one doctor is not possible.'

Those respondents who did manage to see their doctor of choice reported that 'there is usually a wait if wanting to see a specific doctor'. However, for this respondent this was not an issue because 'my visits tend to be planned [so] this is not a problem.'

Not being able to see the same doctor did influence how some respondents felt about their practice with one commenting that they 'previously would have put excellent for most things but now seem to see a different doctor most times.' They felt that this meant they were 'losing your patient/doctor feeling' and that 'having so many complaints it would be nice to see the same doctor each time.' This was echoed by another respondent who said that they 'never know which doctor they will have an appointment with. This disturbs when I need continuous treatment.'

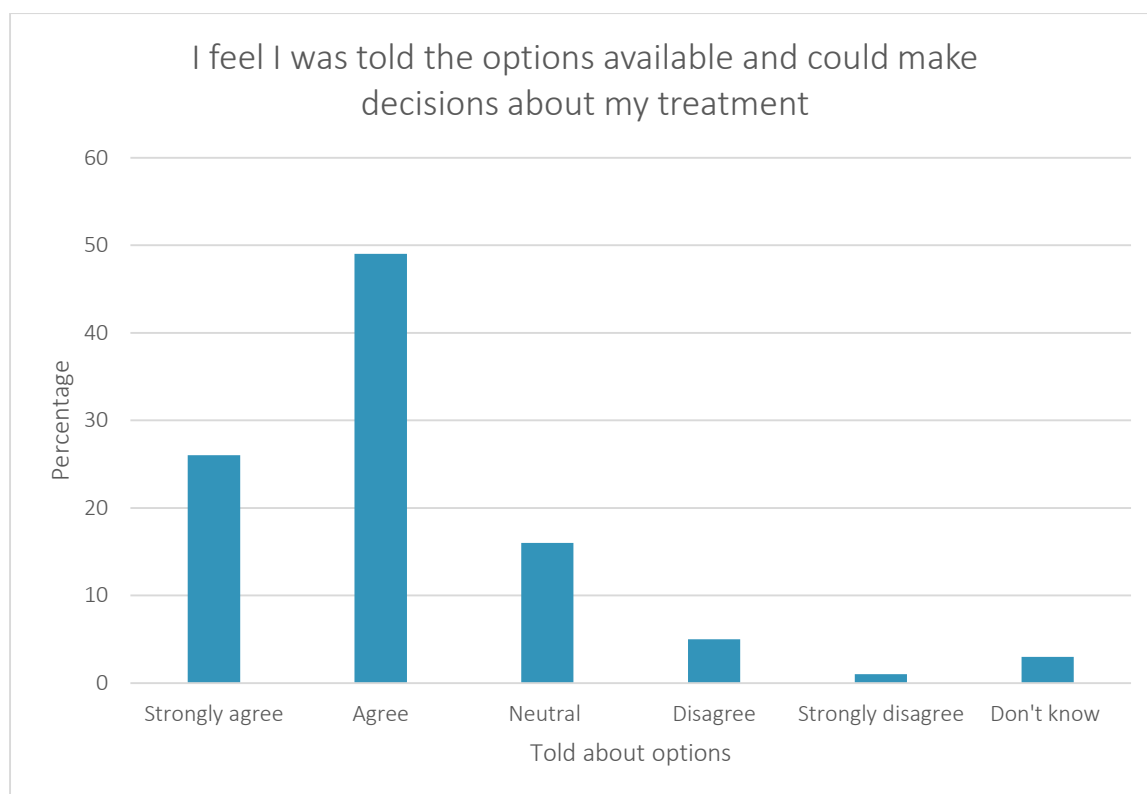
The impact of not seeing the same doctor for ongoing health issues means that patients have to 'explain entire history again' and also means that treatment can change with 'new doctors changing med at their own accord.'

The benefits of being able to see the same doctor were explained by one patient who said 'the doctor knows me and my husband. He understands life issues. He has helped me and my husband over some very difficult times over the years.'

Where there was regular use of locums at practices it appeared to exacerbate the issues with continuity of care. One respondent commented that there were 'lots of locum doctors at the surgery which makes it difficult to discuss ongoing issues and continuity of care.' Another commented that they had only seen their named doctor 'a handful of times' and that they believed the locum they saw 'isn't interested in what I have to say.'

### Involvement in own care

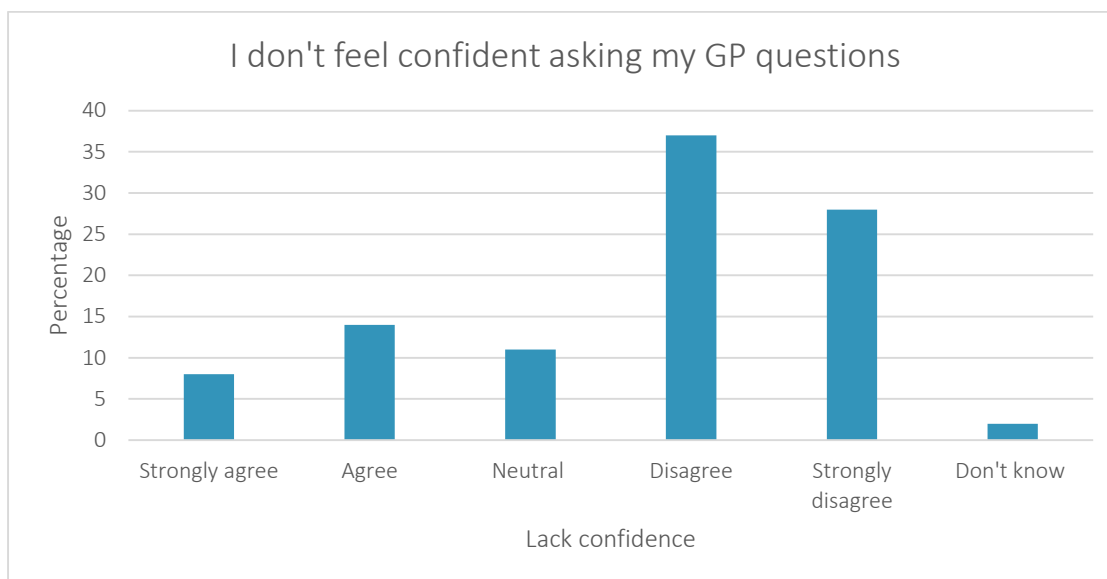
80% considered that their GP always explained their treatment clearly and 75% felt that they were told about the options available and could make decisions about their treatment.



Most people (80%) found it easy to connect and discuss their problems with the doctor and 83% said their doctor listened and understood what was on their mind.

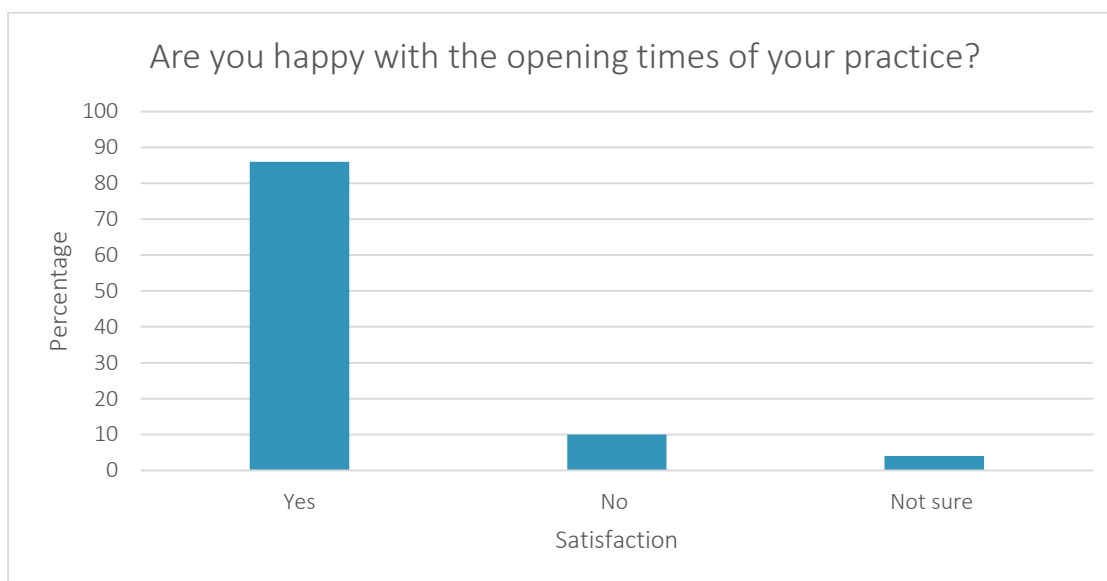
However, one respondent told how they felt that some doctors 'don't listen to mine and my partner's views, which has in the past led to a misdiagnosis which could have been fatal and a lot of upset and discomfort.' Another commented that they had experienced 'doctors not really listening to what you say and how you would like to have treatment.'

22% of respondents also said that they did not feel confident asking their doctor questions.



### Opening times

86% of respondents were happy with the opening times of their GP practice.



However, when people expressed an opinion about the opening times of their practice it tended to be that people were seeking early morning, evening or weekend opening times. One respondent suggested that earlier opening times would be helpful 'even if one day a week for people start work early.' Another suggested there should be 'blood testing/extra GP appointments...available after 5-6pm or at weekends. Makes medical help more accessible for full time workers.'

There was also a comment from a parent who felt that 'my GP surgery does ok to meet my needs [but] a few things I feel aren't always met are out of school hours appointments for my children.'

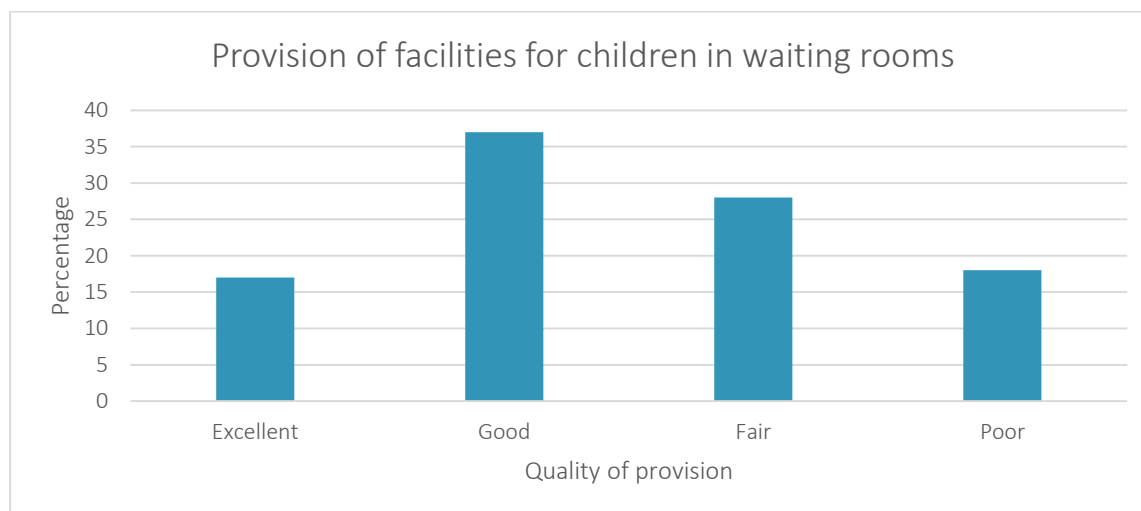
### Surgery environment

Some respondents raised issues with the privacy at the reception area at their practice and one made the suggestion that 'a "please wait here" sign would be advantageous.' However, 60% of survey respondents thought that privacy at reception was either excellent or good and only 14% said that it was poor.



Others made comment on facilities for children in waiting rooms. One respondent commented that there was 'no provision for children in the waiting room apart from new playhouse, no toys, books, etc.' Another said that 'it would be good if there was something in the waiting room for children to play with.' However, one respondent believed that such things had been removed from their practice in order to 'comply with infection control measures.'

Alternatively, one respondent commented that there were facilities for children at their practice but they caused problems for other patients because 'not all parents/guardians keep their children under control and often they are running around and getting under people's feet. Quite a hazard for elderly or less mobile individuals.'



## Conclusions

Overall there is more satisfaction with GP services in the borough of Walsall than there is dissatisfaction. Respondents to the survey indicated that there were high levels of satisfaction with their GP practice in general and that there were similarly high numbers who would recommend their practice to friends and family members.

Appointments were a key area of comment. 64% of respondents said that they were able to get an appointment when they felt that they needed it. It was also indicated that appointments with nurses had better availability than with doctors. However, there could be problems with accessing same day appointments or in some cases routine appointments that were needed within a few days with waits of 2-3 weeks being reported in some cases. This meant that there were occasions when emergency appointments were used when they were not really needed. Around 20% of respondents also said that they had used A&E when they could not get a GP appointment.

Being able to get through to the surgery to make an appointment could be problematic for some respondents and the use of queuing systems meant that calls could become expensive when booking an appointment. There were also some frustrations with the use of telephone triage systems that meant waiting for a call back before an appointment could be made with the surgery.

Feedback on staff at GP practices was generally good with particularly positive comment about nursing staff. Where there was negative comment about doctors it was in relation to their listening skills and the sense that they were rushing patients because of short appointment slots.

Reception staff attracted more negative comment despite 82% of respondents rating them as excellent or good. The more negative comments related to the attitude of reception staff towards patients. There were also comments about there needing to be more reception staff at some practices and in some cases that it would be beneficial if the reception staff better represented the ethnic diversity of the local community.

Continuity of care was identified as a key issue for some people with them struggling to get an appointment with the same doctor for an ongoing medical issue. This meant that they either had to wait longer or had to see a different doctor and explain the whole issue again.

80% of respondents considered that their GP always explained their treatment and 75% felt that they were given options and could make decisions about their care. However, some respondents felt that their doctor did not always listen to their concerns and that this could have an impact on their care.

Opening times for practice were considered to be excellent or good by the majority of respondents but there were some comments made that there could be better flexibility of hours in terms of early morning or later evenings for people who were working full time or for those attending school.

Privacy at reception was generally good for most practices but there were some concerns raised about the need for more privacy and a suggestion made that there should be signs at reception to encourage patients to allow enough space at the front of the queue to allow adequate privacy.

Facilities for children were viewed as inadequate by some respondents and comment made about the lack of toys being due to infection control. However, comment was also made that the availability of toys and lack of supervision could create a less pleasant waiting room experience for older people and those with mobility issues.



## Recommendations

- While the majority of people appear satisfied with their GP services there remains a sizeable number that have poor or very poor experiences.

HWW feels that this is a concern and that there ought to be a specified threshold of satisfaction set for key aspects of service for all practices e.g. using the average of the upper quartile showing the highest satisfaction levels.

Practices falling below this threshold should then be asked to develop action plans in collaboration with their PRG for presentation to Walsall CCG to improve patient experience.

- We would like to see a pilot project developed in collaboration with the CCG, NHS England and of course PRG's to focus on a few GP practices that are not scoring well and set up a working group to evaluate results, explore factors affecting those results and jointly arrive at solutions.
- As there were concerns raised regarding the length of time taken to answer calls, where telephone queueing systems are in use review the average waiting times and potential cost impact to patients of being left on hold.
- In respect of comments about reception staff and attitudes consider introducing customer service training for reception staff and where there is a role for reception in determining urgency of need for appointments ensure that reception staff have undergone recognised triage training relevant to that role.
- Review the availability of early morning and later evening appointments for people who have school, work or caring commitments.
- Review the availability of routine appointments in order to enable appointments to be available within a few days and reduce pressure on urgent appointments.

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## Appendix 1

### Information for patients

*Healthwatch Walsall is the public champion for people using healthcare services in Walsall. Its role is to gather and understand the experiences of patients and public and to present them to providers and commissioners so that services can be improved in line with their needs.*

*We are carrying out this survey at all GP practices in Walsall to get the best picture we can of patient experiences of their Practice. We have discussed this survey with NHS England, Walsall Clinical Commissioning Group (CCG) and the local Primary Care Provider Committee. Your support in completing this questionnaire is gratefully acknowledged and we assure you that any information you provide will remain entirely confidential.*

Name of practice:

.....

.....

**Please tick the boxes that apply to you and that most accurately reflect your opinions.**

	Poor	Fair	Good	Excellent
1 What overall score would you give to your GP Practice?				

2 In general, how regularly do you think you have had appointments with your GP?	
Around once a week	
Around once a month	
A few times a year	
One or two times a year	
Less than once a year	
Never	

	Yes	No	Not sure
3 Can you book your appointment online?			
3a If no, would you use this service if it was available?			

	Every time	Occasionally	Never
3b If yes, how regularly do you book an appointment online?			

	Yes	No	Not sure
4 Can you get an appointment for when you need it?			

5 Are you satisfied with your surgery opening times?			
--	--	--	--

	Always	Sometimes	Never
6 Do you feel staff treat you with respect?			

7 How would you rate the following items....?	Excellent	Good	Fair	Poor	Don't know
The quality of doctors at your surgery					
Availability of appointments with doctors at your surgery					
Availability of appointments with nurses at your surgery					
The quality of the reception staff at your surgery					
Patient privacy at the reception desk at your surgery					
The provision for children in your surgery's waiting room					
The information leaflets available in your surgery's waiting room					
The overall waiting room environment					

8 Please advise how you feel about the following statements						
	Strongly agree	Agree	Neutral	Disagree	Strongly disagree	Don't know
I feel confident I'll get through to reception within 5 minutes when I call my GP practice						
I feel confident I'll be able to get an appointment when I call my practice						
I always get to discuss everything I want to in my GP appointment						
I feel I get a say in my own medical care						
I don't feel confident asking my GP questions						
I feel my GP doesn't let me discuss more than one issue in an appointment						
I feel my GP always explains my treatment clearly						
I feel I was told the options available and could make decisions about my treatment?						
Do you think it was easy to connect and discuss your problems with the doctor?						
Do you think the doctor listened and understood what was on your mind?						
Do you feel reassured after your visit to the GP practice						
Do you feel you would recommend your GP practice to Family and Friends						

	All of them	Most of them	Some of them	Very few	None of them
9 Do you feel that the visit dealt with all the health concerns you had?					
	No confidence	Not much confidence	A bit of confidence	Have confidence	A lot of confidence
10 Do you feel you have confidence in the diagnosis and treatment of your problems?					
11 Tell us about how you felt before and after your last visit to your GP....					
	Before my visit I felt:		After my visit I felt:		
Worried					
Depressed					
Tired					
Tense					
Unconcerned					
Cheerful					
Strengthened					
Relaxed					
12	Yes	No	Not sure		
Do you prefer to avoid any doctors?					
Do you prefer to see a particular GP?					
Do you think it is easy for you to know when the doctor is ready to see you? (system in reception for alerting you to see your doctor)					
	Yes	No			
13 Have you ever gone to A&E because you couldn't get a GP appointment?					
13a Do you have a long term health condition? (such as diabetes, heart condition, depression)					
13b If yes, do you feel you have enough information to help you manage your condition?					

Please add any further comments you wish to make about any questions in this box:

**About you**Your postcode:     /   Gender Male ☐ Female ☐Age 65+ ☐ 40-64 ☐ 26 -39 ☐ 16 -25 ☐**Ethnicity**White British ☐ Irish ☐ Eastern European ☐ Other White Background ☐Asian or British Indian ☐ Pakistani ☐ Bangladeshi ☐ Chinese ☐Asian Other Asian Background ☐Black or Black Caribbean ☐ African ☐ Other Black Background ☐

British

Other Mixed Race ☐ Traveller/Romany ☐**Disability**Do you consider yourself to have a disability? Yes ☐ No ☐

Questionnaire to be completed by 18 March 2016 - Please return to your GP practice or to:  
Healthwatch Walsall, The Hub, 17 Lichfield Street, Walsall, West Midlands, WS1 1TU

This survey is available for download from our website and can be emailed back to  
[info@healthwatchwalsall.co.uk](mailto:info@healthwatchwalsall.co.uk)

Thank you for completing this survey. You will be able to view the findings of this survey of all GP Practices in Walsall on our website at [www.healthwatchwalsall.co.uk](http://www.healthwatchwalsall.co.uk) a few weeks later

## Appendix 2

### Overall patient satisfaction

'I think they do their best in difficult circumstances.'

'Good service at times but sometimes not so good.'

### Appointments

'Appointment system are not good, unable to get an appointment on the day if you call even after 8am they say fully booked within five minutes.'

'The appointment system is atrocious; you cannot book an appointment on the day or within the next couple of days. You cannot plan when you will be ill. A recent change again means no online appointments available.'

'It is very difficult to see a doctor if you feel at the time not two weeks down the line.'

'I do not like their new booking system. I never get an appointment straightaway. They expect you to wait at home or have your phone on you all day to wait for their phone call before they decided whether I should have an appointment.'

'If you want a same day emergency appointment that is easy to get. If it isn't an emergency then you have to wait over a week for an appointment. The result of this is that you might ask for an emergency appointment because it cannot wait a week but is not urgent for that day but needs to be in the next couple of days.'

'I feel that it is difficult to gain a routine appointment within a short space of time. I've had to book 2-3 weeks in advance or take an emergency appointment by ringing on the morning when it's not actually an emergency but can't wait 2-3 weeks either. I've had to attend A&E with my child at the weekend when the surgery has been closed when it wasn't actually an emergency therefore, misusing services just because it was a weekend.'

'Over the past 4/5 years, it has become increasingly difficult to get an appointment. In the last 6 months, the appointment system has been changed three times without any notice. It is almost impossible to get through to the surgery by telephone and you are unable to book an appointment on-line. Has the surgery reached saturation point- too many patients, not enough appointment, not enough doctors?'

'My surgery used to be easily available but not I can be on the phone up to 15-20 minutes and then have to wait two weeks to get an appointment.'

'I can get through the surgery answer machine almost immediately but then you have to wait and wait and wait. It is very frustrating if I am using my mobile phone as it can work out quite a bit expensive to call.

'Would like the system on telephone to be less daunting.'

'The telephone system is disgusting. Never get through, Staff are lovely.'

'I have timed my wait on phone before speaking to the receptionist more than 10 minutes and also been cut off.'

'It is difficult to get an appointment with GP of choice for two weeks. Can get any appointment at walk in surgery with Duty Doctor but can only deal with one problem. On a booked appointment more issues can be discussed.'

'The doctors are brilliant, need shorter waiting times. Too many people wanting appointments and not enough doctors available.'

'The doctors at the surgery are brilliant but it is impossible to get an appointment. After Christmas I was told I couldn't have an appointment for 27 days.'

'I am totally confident in my GP. However, at times my GP is not available for me to see and appointments are not available.'

'The waiting list for appointments is terrible and when I call for an emergency appointment the phone is rarely answered in the morning.'

'We need more permanent doctors so we can access more appointments. I feel there is too much pressure on our nurse and doctor as there are no other regular staff available or are off. Overall the GPs are excellent, we just need more available instead of so many locums.'

'The reception service lets the practice down, it is inadequately staffed. On my last visit at 8.30am there was only one receptionist, dealing with reception and answering the phone. She had to leave the desk unattended to deal with an enquiry at reception. The queue built up and phones rang and rang unanswered. I have been waiting for my phone to be answered on many occasions, more staff are required. It is very frustrating to get no reply when ringing. A few weeks ago it took five attempts and I hung on whilst it rang for quite some time.'

'Not happy with the system at my surgery. If I wish to see a GP I have to initially speak to the receptionist who wants to know a little about the reason I wish to see the GP. She will then get the GP to call me at some point that day. When the GP phones me it may not be a convenient time for me. I may be driving or at work. He will discuss with me over the phone my problem and try to resolve it without seeing me. Should he not be able to resolve it over the phone, only then am I given an appointment.'

'Appointment system is very bad and I have had to go to A&E and the walk in centre when my son/daughter have been seriously ill. When tests are done at the hospital or other NHS centres often the results get misplaced when they get to the surgery and we have had to do tests again because of it.'

'Has not attended A&E because he could not get a GP appointment but has attempted the walk in centre when the nurse was not available at his practice to give him the injection he required on a regular basis. He would attend A&E if needed to.'



'One week I tried to get an appointment and was unable to as it was locum doctors and the other were off. I ended up at the walk in centre and spent three hours where. I would rather have come to the doctors to be diagnosed.'

## **Staff**

'In general, I have a good relationship with staff at the surgery and am happy with the service.'

'Very happy with the practice and staff service. A regular user and always feel happy at service and treatment. Seem very caring.'

'Highly recommend surgery. Brilliant doctors and professional reception staff. Attentive and caring staff.'

'Staff are very helpful and kind. The doctor always listens to your questions and gives you the best care.'

'Staff at the surgery have always been polite and helpful and the doctors always very patient and informative.'

'Always treated with respect by everyone at the surgery. Always helpful and try to solve any problems.'

'I have nothing but praise and admiration as well as utmost respect for ALL the staff, from the wonderful reception staff to nurses and doctors. I could not have dreamt of being with a better practice and think myself so very lucky. I suffer from a lifelong disability and depression but cannot thank all the staff [enough] for all their help and support- plus the reception staff always make me smile.'

'Staff are pleasant and obliging, there is a good friendly atmosphere on entering the surgery.'

'I consider myself very lucky to belong to this practice. When I am poorly and rung up to see a doctor, I always get one that day... I recently lost my husband, and the doctors and the reception lady were very kind to me- made all the difference to me at my sad time.'

## **Doctors**

'Dr X is a fantastic doctor.'

'I am quite happy to see my GP to discuss any health worries I may have without any apprehension.'

'Dr X has helped my son when he was having problems through bullying. He got him help with CAMHS and now when he visits Dr X he has time for my son and never rushes him. He has been a great asset to this practice.'

'When I need to talk to a doctor there are a couple who have made a fantastic effort to understand my complicated case and its effects on my life, so I have confidence in the treatment that I receive.'

'Dr X is the most amazing Dr/person I have ever met. He always listens and shows empathy, my family have had nothing but a first class professional service. The staff are brilliant. I have no idea how we will manage when he retires.'

'My doctor is one in a million, always on time to see you. He works very hard and is very thorough.'

'Dr X always has time for patients.'

'The doctor always seems in a rush to get me out of the door. Have little confidence.'

'Doctors at this surgery have been quite rude. Jumping to conclusions, making you feel worse.'

'I feel that now I don't have the help and support from my GP. I feel very alone with my illness and have no-one to discuss my mental health with anymore.'

'I feel there are some good doctors but I always walk away feeling I have wasted their time. I feel that they don't understand what I am saying and some are very dismissive. I am a quiet person so maybe I am not clear enough.'

'I feel confident when I see the female GP as I feel she listens to me, she reassures me.'

'I usually see a locum who isn't interested in what I have to say. Saw a locum... rude and uncaring.'

### **Continuity of care**

'Too many patients sometimes makes it difficult to get appointed with a particular GP.'

'Juts concerned about the length of time it takes to get an appointment. There are fewer GPs and more doing part-time now so obviously it is more difficult to get an appointment, often it is not the same doctor so there is no continuity.'

'The doctor knows me and my husband. He understands our life issues. He is supportive and always gives reassurance. He has helped me and my husband through some very difficult times over the years.'

'There is usually a wait if wanting to see a specific doctor but as my visits tend to be planned, this is not a problem. I am happy to see any doctor if needed urgent care.'

'Previously would have put excellent for most things but now seem to see a different doctor most times. This is good if you want more doctors but it's losing your patient/doctor feeling. With having so many complaints it would be nice to see the same doctor each time.'

'It would be nice to choose which doctor you would like to see.'

'The practice has many doctors (some of them I see for the first time) I never know which doctor I will have an appointment with. This disturbs when I need continuous treatment.'

'Annoying when doctors constantly change, then you have to explain entire history again, along with the new doctors changing meds at their own accord.'

'The doctors seem to change regularly at this practice so continuity of care with one doctor is not possible.'

'As a training surgery I see a lot of young doctors. Although they are very capable pleasant and easier to deal with than most GP's they are not there for very long and I do not build up a relationship with them.'

'It might be helpful if people with long term chronic conditions have one GP in control of their care as the elderly would not feel happy discussing gynaecological problems with a male GP and sometimes it is difficult to see a female.'

'I have been at this surgery for years and have only seen my doctor a handful of times.'

'I work in healthcare so don't visit my GP regularly, only in severe cases. I don't usually see my own GP but I don't mind seeing a locum GP.'

### **Locums**

'Locum doctors not reliable- turning up late or not at all. Lots of locum doctors at the surgery which makes it difficult to discuss ongoing issues and continuum of care. Several times been to this surgery for booked appointment and waited 1.5 hour only to be told that they doctor has not turned...many times have had to rearrange other commitments due to waiting at the doctor's.'

'Doctors understanding; depends on who you get. No consistency especially with the amount of locum doctors.'

'It would be good to see more regular salaried GPs. However, the locums and registrars are quite good. This is due no doubt to the lack of salaried GPs in general.'

### **Nurses**

'This nurse always shows care and compassion in her approach to my treatment. She goes above and beyond to be helpful and caring. I cannot speak highly enough of how grateful I am for the treatment that I receive.'

'The practice nurses... have made real progress with their treatment. I know that they make a real effort to accommodate me and it is very much appreciated.'

'Yesterday I had an appointment with the nurse for an asthma review. I arrived feeling very despondent and left feeling positive. I had a plan! I learnt a lot about my medication and felt she was invested in my treatment plan and care.'

### **Receptionists**

'The reception staff are brilliant and really do try their best and are always polite but the surgery simply needs more reception staff and doctors to keep up with the demand.'

'I'm happy with the reception staff.'

'..and the receptionists are very polite.'

‘Excellent reception staff.’

‘I am looking at changing my GP. The reception staff are rude and unhelpful.’

‘Some of the reception staff are excellent at their job, others could do with re-training especially with sympathy, understanding and caring.’

‘Reception staff can be very rude and unhelpful.’

‘Sometimes the reception staff seem like they don’t have time or compassion for you.’

‘The receptionists are exceptional at this surgery, always welcoming, friendly and helpful and professional.’

‘Reception are very unhelpful, argue with you at the reception and can be very rude. They ask you what is wrong with you, when you phone to book an appointment but why do they need to know, they are not doctors?’

‘We struggle with appointments and reception staff vary from helpful and caring to brusque and impatient.’

‘I also dread calling in to reception as I have been on hold for more than 20 minutes, and I am on my mobile which is not free to call. Also some staff on reception are not so caring and can be sharp.’

‘The GP is very good, that’s if you can get an appointment. You have to get through the receptionist first, that’s if they don’t keep putting the phone down on you, which has happened on numerous occasions to me. The receptionists all think they are doctors- you have to explain- not very polite to you. I personally think the receptionist should treat patients with a bit of respect.’

‘On making an appointment I had to tell the receptionist the problem before I was given one.’

‘When I do have to go to the doctors it is impossible to get an appointment. You have to wait for 2 or 3 weeks sometimes. When you get there you cannot see the doctor you want to. The receptionists can be really nasty with you sometimes. They ask you what is wrong with you when you phone for an appointment. It is like trying to get through a brick wall to get to see a doctor. They can be very arrogant towards you. They put the phone down on you as well when you are waiting on the phone.’

‘I would like to see South Asian staff at reception- this will help patients wanting to join the practice from this community, because some people need staff to be able to understand their cultural needs and speak the language. Some people from South Asian communities cannot speak English, this is a barrier for people from this community.’

‘It would be good to have at least one male receptionist.’

### **Involvement in own care**

‘Most doctors at the surgery try hard and are good practitioners, some however, do not listen to mine and my partner’s views, which in the past led to a misdiagnosis which could have been fatal and a lot of upset and discomfort.’

'Doctors not really listening to what you say and how you would like to have treatment. Forgetting to refer you to see doctors for specialities.'

'I have autism, I feel I am on 10 minute timer and not given enough time to explain my needs or to understand what I have to say.'

### Opening times

'Maybe an early morning surgery available even if one day a week for people who start early.'

'Wish blood testing/extra GP appointments were available after 5/6pm or at weekends. Makes medical help more accessible for full time workers.'

'I feel my GP's surgery does ok to meet my needs, a few things I feel aren't always met are out of school hours appointments for my children.'

### Environment

'The waiting time once in the waiting room is ridiculous.'

'Sometimes the waiting times take too long i.e. if my appointment is 12pm, sometimes I don't see myself called in until 1pm/1.30pm. Having to get to school- sometimes these appointment waiting times make my day hard.'

'Surgery is large, spacious and welcoming.'

'I do feel a bit more privacy could benefit at the reception.'

'The health centre continues to be in a poor state of repair.'

'The practice is trying very hard under extreme pressure. Due to the limitation on the building it is unable to extend and needs new premises.'

Car park not big enough. People without a disabled blue badge parking in disabled places and nobody seems to care. People parking without any thought to other drivers.'

'Privacy is lacking at the reception desk. A "please wait here" sign would be advantageous.'

'A lack of privacy at the reception.'

'We used to have toys and books but these have had to be removed to comply with infection control measures.'

'No provision for children in waiting room apart from new playhouse, no toys, books, etc.'

'There is some facility for children but unfortunately not all parents/guardians keep their charges under control and often they are running around and getting under people's feet. Quite a hazard for elderly or less mobile individuals. Can also be fairly exuberant and noisy.'

'It would be good if there was something in the waiting room for children to play with.'

‘Need more friendly place for children.’

### Other comments

‘Usually very pleased with practice. But not after my last visits with my new doctor. Follow up communication let me down.’

‘I had a lot of problems getting my appointments sorted for my operation. When I ring the hospital or easy book they say go back to the doctors. I have had a few letters from the hospital for wrong things because reception have sent wrong details. I have been waiting so long for the operation. Not very happy patients.’

‘Only have home visits now due to age. Sometimes I cannot understand due to hard of hearing and GP being foreign.’

‘I feel treatment is delayed too often on a wait and see basis, I visit a doctor for a result (I have usually given time for self-healing before my appointment). I leave feeling that money is the reason for no action. Skin cancer was treated in this way resulting in disfiguring surgery due to delay.’

‘The patient participation can be ineffective and unwelcoming.’

‘I have been waiting for hospital appointments for five months, doctor told me wrote urgent, still having a lot of pain. Doctor says you have to wait for 1-1.5 years for the appointment.’

‘I was referred by my GP re: query arthritis in August 2015, it is now March 2016 and I still have not had an appointment.’

‘On too many occasions problems have arisen with the electronic prescription service- some because of problems at the chemist, but a significant number appear to come from the practice. On too many occasions I have to go from doctors to chemist trying to discover why a prescription hasn’t been filled. There does not appear to be a full understanding of the process by everyone at the practice.’

‘Repeat prescription service is awful, should be two days but it is often longer or mistakes are being made.’

‘Would like online prescription ordering system.’

### Mental health

‘The surgery is quite handy for me to get to but I would like it if a mental health nurse could be at the surgery on other days. She only does Tuesdays and I cannot attend on a Tuesday. I would like someone to talk to as I have no family. I used to have nurses come to me but they had to stop years ago, to many patients to see, we need mental health people to care about us.’

‘The practice is very supportive of me as a carer for my mother and address my concerns as well as hers. The practice is excellent at addressing mental health problems with respect. I feel this is overlooked in much of the NHS.’

‘I am a new patient and had some concerns. Tests were done, referral made to Manor Hospital. Also very good with my daughter (15) who is under CAHMS.’

## Communication Survey 2016: Walsall Manor Hospital Accident and Emergency Department

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Healthwatch Walsall

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## Introduction

Healthwatch Walsall is an independent consumer champion created to gather and represent the views of the public. Healthwatch plays a role at both national and local level and makes sure that the views of the public and people who use services are taken into account.

At a local level, Healthwatch Walsall works to help people get the best out of the health and social care services in their area; whether it's improving them today or helping to shape them for tomorrow. Local Healthwatch is all about local voices being able to influence the delivery and design of their services – not just people for who use them, but for anyone who might need them in the future.

## Summary

The Accident and Emergency (A&E) Workstream of Healthwatch Walsall carried out a survey in the Accident and Emergency Department of Walsall Manor Hospital during May 2016. This report is based on the 79 responses received from people who had used A&E services.

There is a shared waiting room at the Manor Hospital for A&E and the GP led Urgent Care Centre and 20% of respondents to the survey said that they did not know which reception to go to when they first arrived. It was also observed that a number of people were re-directed between the two reception areas when they arrived at the department.

Long waiting times were a key area of concern for respondents and there were a range of comments in relation to it. Although most people said that they had been kept informed about waiting times a number of people felt that there was a lack of communication with them about waiting times and reasons for delays.

Communication in general was commented on and some of it centred on being kept informed about waiting times but there was also comment about the lack of availability of interpreters as well as a need to be more responsive to individual need where patients had communication difficulties such as hearing loss or memory problems. There was comment about a lack of communication between different medical staff and how that was dealt with by staff at the hospital to ensure that the patient was not disadvantaged by the lack of shared information. Some respondents also raised concerns about medical staff not listening to them although the majority of respondents did feel that they were listened to by the staff in the department.

Most respondents felt that they had been treated with dignity and respect whilst they were in A&E and that there was enough privacy at reception. However, there were a number of comments about ensuring that patients were given enough privacy in cubicles and making sure that staff observed basic privacy measures such as closing curtains and doors. Additionally there could be issues with staff availability to assist people with personal care whilst in the department that could cause a loss of dignity for vulnerable patients.

Although people raised issues with the length of time that they had to wait to be seen generally people were happy with the quality of care that they received and there were a number of

positive comments about the way that they were treated whilst they were in the department and the attitudes of the staff that they encountered.

## Background

In response to issues raised with Healthwatch Walsall (HWW) by members of the public, members of the A&E Workstream visited the Accident and Emergency department at Walsall Manor hospital in August 2015. This visit was supplemented by additional information received in response to queries submitted to the Trust and this enabled members of the Workstream to gain an understanding of how the department operated prior to carrying out the A&E survey.

Walsall Healthcare Trust (the Trust) was inspected by the Care Quality Commission in September 2015 and the subsequent report published in January 2016, rated the Trust as 'inadequate' overall and the Chief Inspector of Hospitals recommended that the Trust should be placed into special measures.

The inspection found that the Trust needed to make urgent improvements to ensure it was consistently delivering care which was safe, effective, caring, responsive to people's needs and was well led. The inspectors had concerns about staffing in a number of areas and workloads in A&E were seen to have resulted in care falling below the standards patients should be able to expect. Following the inspection, the CQC gave notice to the Trust to make significant improvement in a number of areas including emergency care. The Trust responded by setting out a detailed plan for remedial action.

HWW has seen the improvement plans for A&E and notes that there are already plans to address some of the issues covered by this survey e.g. the layout of the reception area.

As the CQC has inspected the A&E department in depth, Healthwatch Walsall decided to focus on 'softer' aspects of the patient experience, in particular communication whilst the patient was in the waiting area and the patient's overall experience of how they were treated during the patient journey in A&E.

## Methodology

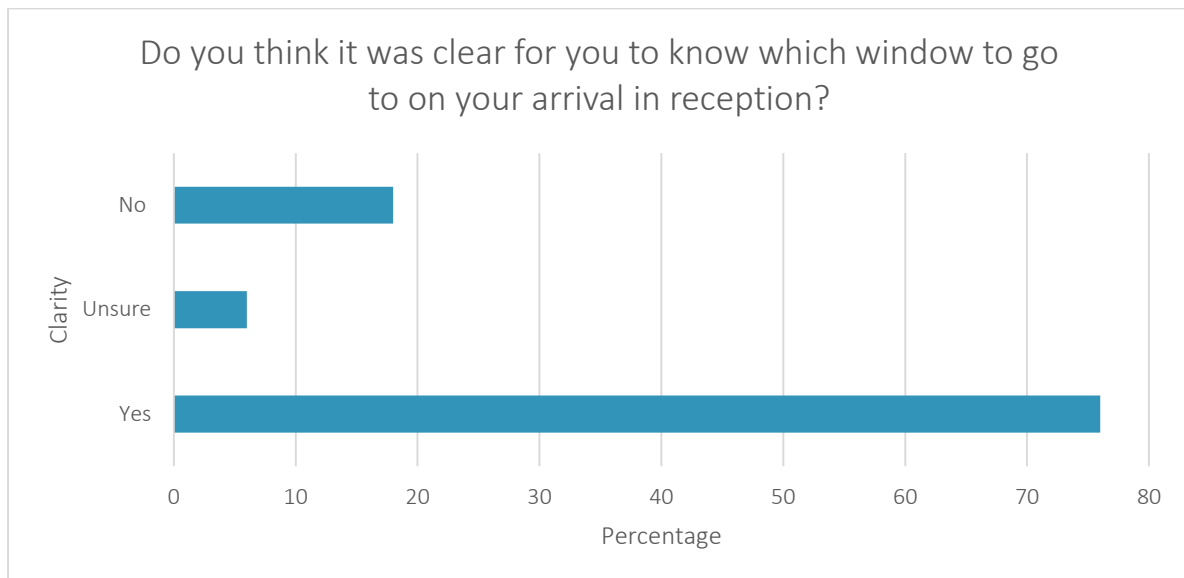
Over a two week period in mid- May 2016 staff and assembly members from HWW attended the Trust's A&E department to give the survey to patients waiting their turn to be seen in the waiting area. All days of the week and all time periods from 8am to 9pm were covered at some point during the two week period. A large number of patients attend by ambulance and the views of these patients are not included in this survey.

At the Walsall Manor Hospital, a GP run Urgent Care Centre is co-located with the A&E Department; the two reception desks are adjacent to each other and colour coded waiting areas are used to differentiate patients waiting for each service within the same waiting room. The Healthwatch Survey was given out to people waiting to be seen by the A&E department. Reply paid envelopes were provided and whilst some people completed the survey as they waited in the department, the majority were posted back, enabling patients to reflect on the whole A&E experience.

## Findings

### Waiting area

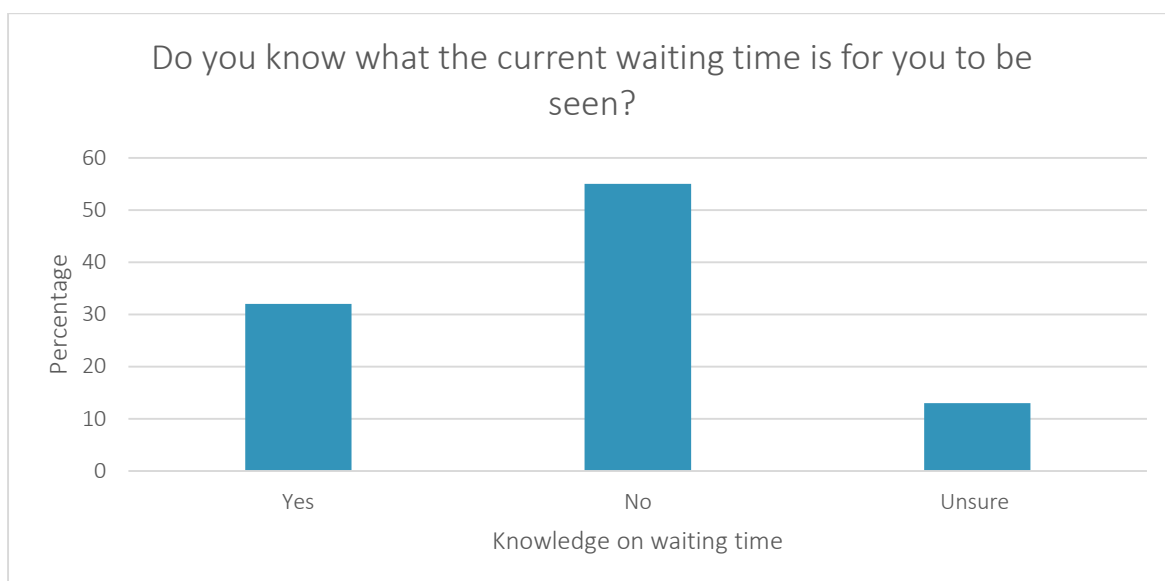
Almost a fifth of patients reported that they were not sure or did not know which reception window to go to.



The co-location of the Urgent Care Centre and the A&E Department, and the use of adjacent receptions, does present some patients with a confused picture at the outset. On entering the department, the urgent Care reception is the one directly in the patient's view and, although it is clearly indicated, some patients may not be clear about the distinction between the two services. HWW observed a number of patients being referred from one window to the other. This may create a sense of disorganisation for some patients and reduce their overall confidence in services received.

### Waiting times

There appears to be a lack of clarity around the expected waiting time before being seen. Only a third of respondents reported that they knew how long they would have to wait to be seen and only a similar proportion had been kept informed.



There is a waiting time banner which scrolls on a TV screen in the waiting area but the TV is not always switched on, the banner is small and difficult to read and it takes time for it to scroll round due to other information being displayed.

Waiting times and communication issues were linked with some of the comments received and although there was one positive comment about waiting times with the respondent saying that 'staff were pleasant, kind and concerned over my lengthy wait' most comments were negative. One commented that once they had booked in at reception 'no-one communicates with you... [they] don't tell you anything.' Another commented that they had not been kept informed and referring back to issues with the waiting area reported that they had been 'kept waiting for a long amount of time in different parts of the hospital, firstly in Urgent Care and then in A&E.'

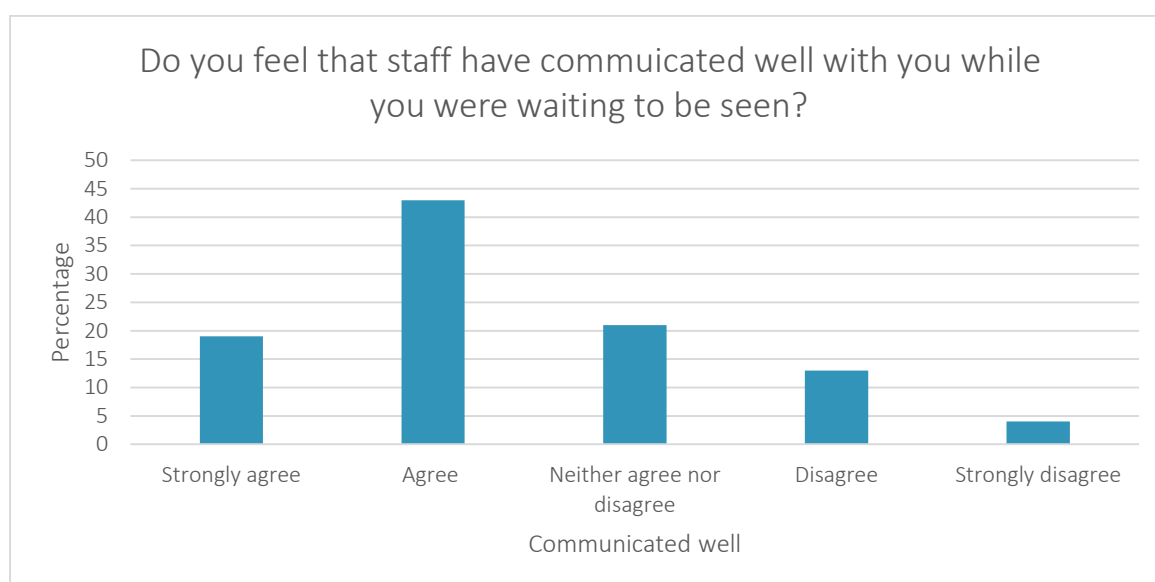
It is clear from comments received that there are varied opinions regarding waiting times which are affecting some patients' experience. Some comments referred to lengthy waiting times without patients being kept informed of progress and one told of being in the department with their small child and seeing people who had arrived after them being seen first, 'so I went to the receptionist and asked how long do I need to wait? After 20 minutes we were seen by a doctor. I am not sure how long I'd have waited if I had not asked the receptionist.' This may well leave patients feeling devalued and adds to the sense of disorganisation in the service. However, one respondent told that they had 'to wait a long time to see a doctor but every time I asked it was explained what the delay was.' Whilst this

respondent was happy to keep asking it may have been a better service if there had been regular updates without them having to ask.

Keeping people informed of how long they might expect to wait would help to alleviate some of the negative feedback about the department, this was illustrated by one respondent saying that ‘informing us would have helped us know what to expect...the actual care when we got it was excellent.’

## Communication

62% of respondents reported that staff communicated well with them whilst they were waiting to be seen.



Some respondents gave examples of overall positive communication during their visit to A&E. These related particularly to their clinical experience with one respondent saying that staff ‘showed me X-rays and explained everything’ and another saying that there was ‘very good communication during clinical discussion.’

There was some negative feedback about communication with one respondent telling how they had ‘to come with my own interpreter because when I asked to have one, twice I was refused- they said I would manage.’ The lack of an interpreter could mean that vital information is missed that could affect the diagnosis and subsequent treatment if needed.



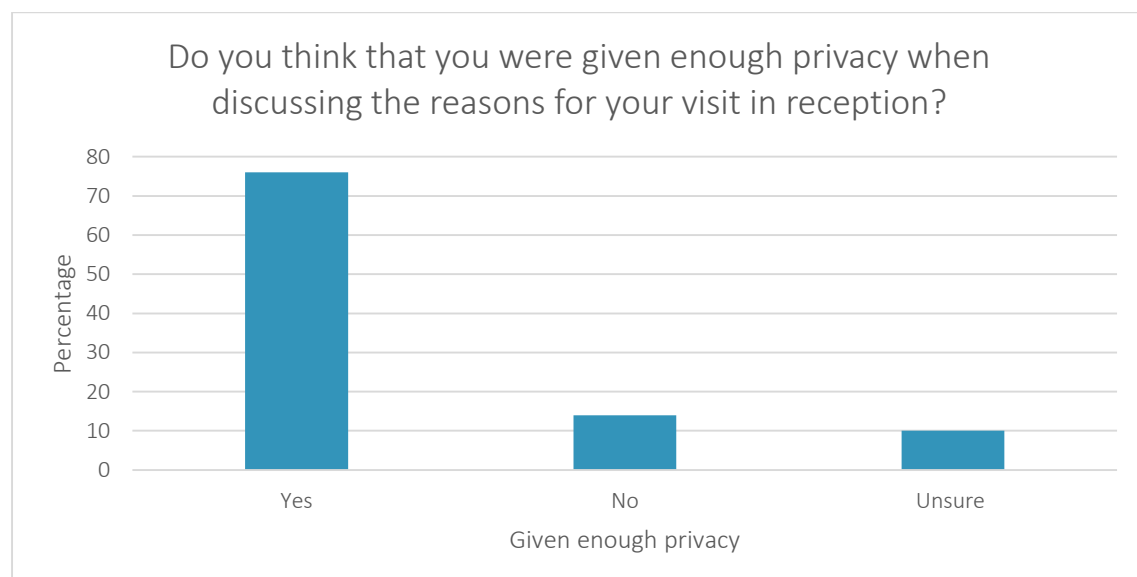
Another respondent raised issues with information between different medics when a 'triage nurse on duty...was rolling her eyes and complained that insufficient information had been sent by the GP- not my issue, I am the patient who is in pain and upset.'

Most people (79%) felt that they had been listened to by staff during their visit and one respondent commented that staff had 'listened and answered questions.' However, one respondent commented that a doctor had 'tended to talk over me, not giving me time to answer or put my point forward.'

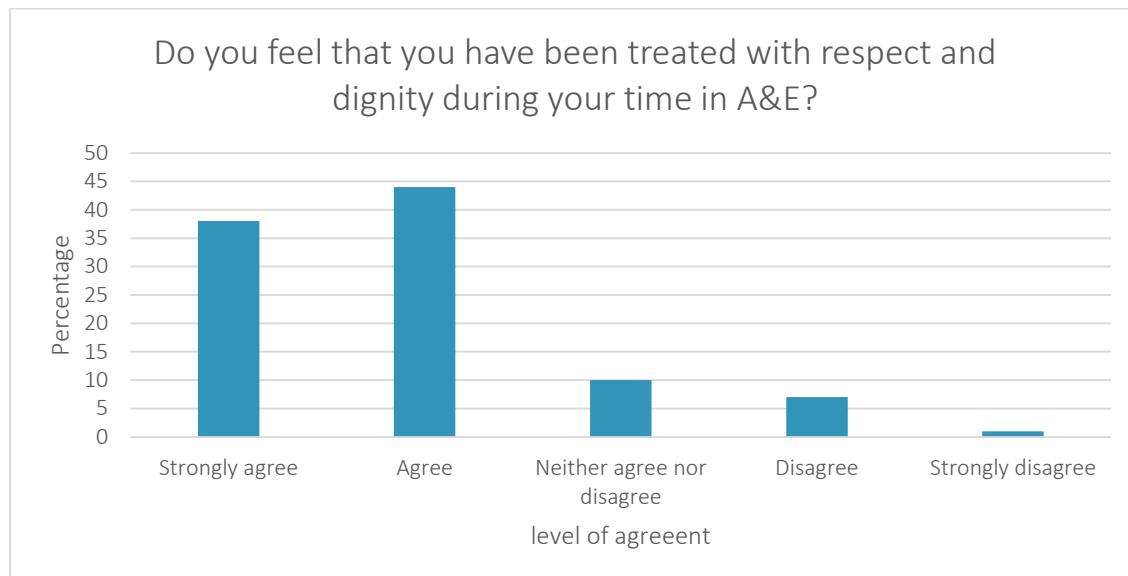
Another respondent told how when they had taken their mother to A&E staff had been slow to realise her communication needs because she was 'hard of hearing...[had] memory problems [and] needed more time.' They suggested that there was a need to 'proactively think about modifying their communication style to ensure every patient including the very vulnerable are fully involved in the process.'

## Dignity and Respect

76% of respondents reported that they were given sufficient privacy in reception when discussing the reason for their visit.



82% of respondents said that they had been treated with dignity and respect whilst they were in A&E.



However, privacy and dignity concerns were apparent in several of the comments received. One respondent told how when they were changing into a hospital gown ‘they only shut the curtain and then someone walked into the cubicle when I was naked.’ The same respondent then told that when the doctor had told them that they could go home the doctor ‘walked out and left the door open. I had to get off the bed half naked and shut the door. As well as the intrusion when in cubicles, another respondent told how ‘having to wait in a gown in a general outpatient’s area waiting for an x-ray, felt exposed and uncomfortable.’

For another respondent told of their experience when there was a lack of staff available and they had ‘a pad on that was full...asked the nurse to change it but she was on her own and I didn’t have spare pants. My daughter had to help roll me over which was not dignified.’ It is not clear why it was not possible for the nurse to get someone to assist her to help the respondent with personal care and maintain their dignity.

Respect and dignity are key factors in healthcare settings and their absence can cause distress to patients.

## Standard of care

Although many respondents spoke about the length of time that they had been waiting to be seen several of them also followed this up with positive comments about their treatment once they were seen. Respondents used words like 'excellent' and described the staff as 'faultless'.

However, one respondent did comment that they had experienced a lack of care from staff prior to seeing a doctor saying that 'the lady behind reception and the nurse knew I was unable to sit on the chairs in A&E...but did not offer me any other option and left me stood there for 3hours and 30 minutes.'

## Conclusions

This report is based upon 79 responses from members of the public who had used A&E services at Walsall Manor Hospital in May 2016. There were a number of key themes identified from the feedback that offer opportunities for improvement and learning.

The waiting area for A&E is shared with the Urgent Care Centre and for some respondents this was a cause of confusion with people being re-directed to different reception desks from those that they initially approached.

Waiting times were a key area for comment with the length of waits being mentioned by a high number of respondents. Being kept informed of waiting times was an area of concern for some but a relatively high number of respondents were happy with the level of information that they received. For those that commented there was a general feeling that there wasn't enough information and that their wait in A&E would have been better if they had been kept informed of progress.

Communication with patients and between medics were commented on although respondents generally felt that they had been communicated with well by staff. However, there were some comments about the need for interpretation services and also tailoring communication to the needs of the patient to ensure that vulnerable patients were properly involved in their treatment.

Although most respondents agreed that they had been treated with dignity and respect there were some comments about the need to protect patient privacy more particularly in relation to hospital gowns, and people being able to change without being exposed when doors or curtains were not closed. Being able to maintain personal care was also pinpointed as an area for concern with there not being staff to assist patients with personal care.

The standard of care was generally seen as being very good and words such as excellent were used. However, they were often prefaced with comment about waiting times and this suggests that waiting times have a negative impact on the overall sentiment about A&E services.

## Recommendations

Healthwatch Walsall recognises the pressure that the Trust is working under. The Accident and Emergency Department is currently dealing with significantly more patients than it was designed for. There are examples of good practice where patients reported being pleased with the staff response and the treatment received and these are to be commended. However, some of the adverse issues flagged up by patients in this survey are fairly basic and should be respected.

- **Waiting times-** ways of communicating better with patients in the waiting area should be considered to update them about the length of time they will be waiting. This includes making sure that information screens are working. It is appreciated that individually updating people in the waiting room is not possible but giving them an indicative waiting time when they register at reception may be a possibility. The TV needs to be on at all times with a dedicated banner running across the bottom of the screen at all times or a separate digital information screen running continually.
- **Interpretation services-** consideration should be given to how to ensure that interpretation services can be more accessible for patients whose first language is not English.
- **Communication needs assessments-** ensure that individual communication needs are assessed and acted upon to ensure that vulnerable patients are able to be properly involved in their treatment.
- **Dignity and respect-** it is acknowledged that the department is short of space, however, staff should be reminded of the need to treat patients with dignity at all times including shutting cubicle doors and ensuring that there are enough staff available to assist with personal care tasks.
- **Appropriate clothing-** The practice of making patients wear hospital gowns whilst waiting in general areas where other patients are fully dressed should be reviewed so that patients are not left feeling vulnerable.
- **Customer care-** whilst there are many positive comments about staff, the negative attitude of some staff should be addressed. Customer care training, including refresher courses should be mandatory for all staff dealing with patients, and managers should monitor and address any issues of poor attitude which impact on patient care.
- **Combining reception –** consideration ought to be given to combining the two receptions for urgent care and A&E so that trained receptionists can direct patients to the appropriate service rather than patients having to make that distinction themselves. This would reduce the amount of complaints arising from being passed from one window to another and having to repeat all your information and make sure people are dealt with in a timely manner.

## Appendix 1

### Communications Survey for Walsall Manor Accident and Emergency

Date / Time: \_\_\_\_\_

#### About you

**Gender** Male ☐ Female ☐

**Age** Under 12 ☐ 12-17 years ☐ 18-24 years ☐ 25-34 years ☐ 35-44 years ☐  
45-54 years ☐ 55-64 years ☐ 65-74 years ☐ 75 years or over ☐

**Status** Please tick whichever of the following best applies to your current situation:

WORKING ☐ RETIRED ☐ UNEMPLOYED ☐ HOMEMAKER ☐ BENEFITS ☐

**Ethnicity**

White ☐

Asian / British Asian ☐

Black/African/Caribbean/Black British ☐

Mixed / multiple ethnic group ☐

Other ethnic group ☐

**Disability**

Do you consider yourself to have a disability? Yes ☐ No ☐

**Postcode** / **Name (optional)** .....

The personal details you provide will not be passed on to any third party or be used for any purpose other than gathering data about this survey by Healthwatch Walsall. The information provided will be held in accordance with the provisions of the Data Protection Act 1998. The monitoring information will be used to show how effective Healthwatch Walsall is in reaching out to all communities in Walsall.

**For office use only:** Initials:

Date logged:

**1. Do you think it was clear for you to know which window to go to on your arrival in reception?**

Yes ☐      No ☐      Unsure ☐

**2. Do you think you were given enough privacy when discussing the reason for your visit in reception?**

Yes ☐      No ☐      Unsure ☐

**3. Do you know what the current waiting time is for you to be seen?**

Yes ☐      No ☐      Unsure ☐

**4. During your visit do you think you have been kept informed of any delays for you to be seen?**

Yes ☐      No ☐      Unsure ☐

**5. Since you have been here has anyone explained to you what will happen?**

Yes ☐      No ☐      Unsure ☐

**6. Would you feel comfortable to ask any questions of hospital staff while you are waiting?**

Yes ☐      No ☐      Unsure ☐

**7. Do you know where/how to get a hot or cold drink while you are waiting to be seen?**

Yes ☐      No ☐      Unsure ☐

**8. Do you feel that you have been treated with respect and dignity during your time in A& E?**

Strongly Agree ☐    Agree ☐    Neither Agree nor Disagree ☐  
Disagree ☐    Strongly Disagree ☐

Please add any comments you wish to make....

**9. Do you feel that staff have communicated well with you while you were waiting to be seen?**

Strongly Agree ☐ Agree ☐ Neither Agree nor Disagree ☐  
Disagree ☐ Strongly Disagree ☐

**Please add any comments you wish to make....**

**10. Do you think you have been listened to by staff during your visit today?**

Strongly Agree ☐ Agree ☐ Neither Agree nor Disagree ☐  
Disagree ☐ Strongly Disagree ☐

**Please add any comments you wish to make....**

**Please add any other comments/feedback about the service you received today.....**

**Thank you for your time today**

**The results of this survey will be published on our website at**  
**[www.healthwatchwalsall.co.uk](http://www.healthwatchwalsall.co.uk)**

Appendix 2

Staff



## Appendix 2

### Positive comments

*"I think staff are doing their upmost best"* [1]

*"Friendly staff and doctors"* [2]

*"Appeared pleasant"* [6]

*"Questionnaire completed prior to assessment in department. However, they do a fantastic job"* [7]

*"The staff here have been very helpful to me and explained what I needed to know"* [9]

*"The staff are kind, helpful and knowledgeable"* [42]

*"Filled in by patient's parent- patient aged 2. Staff all friendly and professional"* [53]

*"Cannot fault A&E. Great staff. I have not got anything bad to say"* [54]

*"Really nice, really good"* [55]

### Negative comments

*"Some reception staff rude. Go to one reception window and get sent to another. A&E car park too far away unless disabled"* [38]

*"Staff not friendly, not all staff but majority"* [61]

*"Receptionist was not friendly, as in smiling. Generally staff were polite except the doctor who looked me up and down and laughed at my comment about exercise (I'd hurt my foot) and said he doubted I did much physical activity or sport (based on my size)"* [62]

### Waiting times

### Positive comments

*"Staff were pleasant, kind and concerned over my lengthy wait. Although I spent 3 hours in A&E and 4 hours in urgent care, the standard of treatment has been very good."* [4]

### Negative comments

*"I was sent to the wrong department that put two hours extra on my visit"* [16]

*"They did not come back to inform us how long more we would have to wait"* [42]

*"The waiting time is too long"* [52]

*"Absolutely disgusting service. They got me mixed up with someone else. I waited 3 hours before I had to get up myself and walk into the office as they had not called me in"* [60]

*"....could have been treated quicker"* [71]

*"I have been to emergency with my 13 month old daughter. She had a very high temperature (39.5) we had to wait about 3 hours. We came to the hospital at 7pm and we got back home at 11:30pm. After 2 hours waiting I noticed that people who came later than me were seen by doctors before us, so I went to the receptionist and asked how long do I need to wait. After 20 minutes we were seen by a doctor. I am not sure how long did I need to wait if I would not have asked the receptionist."* [74]

### Communication

### Positive comments

*"I was greeted nicely and booked in efficiently"* [7]

*"A&E was very busy and I had to wait a long time to see a doctor, but every time I asked it was explained what the delay was" [32]*

*"Showed me X-rays, explained everything" [33]*

*"Very good communication during clinical discussions" [42]*

*"The Dr knew where I was waiting, however he did not communicate with me. However, a nurse who was not involved in my care kept asking the Dr for me" [70]*

*"Kept us informed on what was happening" [71]*

#### **Negative comments**

*"No speak to you" [5]*

*"Just wait for my turn" [6]*

*"Very poor communication during my visit" [16]*

*"Went to Urgent Care who told me to wait in A&E seats, but got here at 11.20am, but was not booked in, so I sat waiting until my husband asked why so long at 3pm" [18]*

*"I was there for 3hours 30minutes and no one told me anything whilst I was waiting" [19]*

*"Unhappy with initial attitude of triage nurse on duty who was rolling her eyes and complain that insufficient information had been sent by the GP- not my issue, I am the patient who is in pain and upset" [20]*

*"During my visit to the hospital today, I feel I was not kept informed of what was going on. I was kept waiting for a long amount of time in different parts of the hospital firstly in Urgent Care then in A&E on a bed in a room with two other patients in this time*

*not one person spoke to us in a good 3 hours. It was only when my partner asked what was happening that things started to get done. I was taken to a ward still unaware of what was going on. After a while I was told I had to wait for a doctor to assess me. Myself and my partner waiting for nearly 5 hours and the doctor didn't come resulting in us being at the hospital around 15 hours with no answers of what was wrong at this point, I discharged myself because I had waiting long enough. I was tired and fed up and hungry. I am utterly dissatisfied with the service I received" [21]*

*"Not enough doctors. No one communicates to you once you book in reception. Don't tell you anything" [26]*

*"Very little communication about processes e.g. you will wait 'X' long or coming back to say 'I'm sorry, but you will be seen in 'X' time" [42]*

*"They didn't speak to me" [62]*

*"I had to come with my interpreter because when I asked to have one, twice I was refused- they said I would manage" [77]*

#### **Neutral comments**

*"Only contact was with reception until I was called in" [38]*

*"There was no communication whilst I was waiting, but my injury was not severe and I was quite calm, not needing comfort" [39]*

*"Only one nurse has spoken to me" [60]*

#### **Listened to by staff / staff attitude**

#### **Positive comments**

*"A&E Dr very through and attentive as were A&E nurses. Very approachable and friendly. Radiographer's very friendly, giving good explanation of procedures"* [20]

*"Although busy they made time to speak to me"* [32]

*"Listened and answered questions"* [33]

*"Nurse and X-ray specialist were friendly"* [62].

*"Staff was very efficient and friendly, especially the doctor who treated my 81 year old mother"* [71]

#### **Negative comments**

*"When seen eventually staff very good but no apology over the mix up which was their fault"* [18]

*"Polish/ Eastern European doctor in A&E tended to talk over me, not giving me time to answer or put my point forward"* [22]

*"Staff very helpful, but it took all staff a minute to realise our mom was a) hard of hearing, b) memory problems. C) needed more time. I think they should proactively think about modifying their communication style to ensure every patient including the very vulnerable are fully involved in the process. Get a speech therapist to assess the environment and make recommendations"* [42]

*"Nobody has told me what's happening with my granddaughter"* [63]

*"One doctor did not want to look at photos of what the illness looked like a few days before, and she was not very helpful or nice."* [77]

#### **Respect and Dignity**

##### **Positive comments**

*"When I saw the doctor I was in a private room"* [33]

##### **Negative comments**

*"Privacy when getting changed into a robe. They only shut the curtain and then someone walked into the cubicle when I was naked. After I was told I could go home by the surgeon. He walked out and left the door open. I had to get off the bed half naked and shut the door"* [19]

*"Did not like having to wait in theatre gown in a general outpatient's area whilst waiting for an x-ray, felt exposed and uncomfortable"* [20]

*"Has a pad on that was full and asked the nurse to change it, but she was on her own and I didn't have spare pants. My daughter had to help roll me over which was not dignified"* [32]

#### **Overall A&E experience and treatment received**

##### **Positive comments**

*"Although I spent 3 hours in A&E and 4 hours in urgent care, the standard of treatment has been very good"* [4]

*".....treatment staff were faultless"* [18]

*"My husband was admitted with Pneumonia. The attention he received was excellent"* [29]

*"I was very impressed with the service I received. I saw a doctor in 2 hours"* [33]

*"I found the experience to be quite pleasant, was dealt with and treated quickly"* [45]

*"Considering how busy the hospital is I was treated as an individual" [50]*

*"Very pleased with the treatment my mom received" ...[71]*

#### **Negative comments**

*"Several times I was told conflicting information by the doctors I saw" [16]*

*"Would probably go to New Cross in the future, as better communication and waiting times" [18]*

*"I had been referred as an emergency by my GP. We already knew what the problem was and until I spoke with the surgeon everyone treated me like I had nothing wrong. The lady behind reception and the nurse knew I was unable to sit on the chairs in A&E due to a problem below, but did not offer me any other option and left me stood there for 3hours and 30minutes" [19]*

*"Initially I felt upset and frustrated with triage nurses attitude and felt it unprofessional to discuss/complain about GP referring me. I was in a lot of pain and was upset by this. Following on from this all staff were friendly and helpful and all care*

*and treatment beneficial. Seen and treated in 4hours 30minutes" [20]*

*"I stood outside the treatment A&E cubicle for 2-3minutes and all staff avoided making eye contact with me. We had been waiting over an hour by this time. I had to interrupt someone to ask how long it would be before we were seen. It looked busy but informing us would have helped us to know what to expect. It looked like things could have been organised more efficiently. But the actual care when we got it was excellent" [42]*

*"It was horrible. Both of my lips had horrible wounds. I waited 3hours - nobody helped me. I had to storm into the office" [60]*

*"Overall experience not very good due to lack of information during the waiting between departments. Initial assessment was good" [64]*

#### **Other comments**

*"Came by ambulance so I didn't go through reception" [50]*