

## The Pathway to Urgent Care - Turning Up Where The Light Is On

A patient's perspective of their road to treatment

Version 3.0

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## Contents

1. Background	Page 3
2. What did we do?	Page 3 - 4
3. At first glance - What did the responses say?	Page 4 - 7
4. A look deeper - the A&E focus	Page 7 - 12
5. Overall what did people say about a department?	Page 12 - 13
6. Conclusions - overall and paths to A&E treatment	Page 13 - 15
7. Thanks and acknowledgements	Page 15

Appendices (Supplementary Information - patient experience and volunteer observations, equalities information and example documents)

**1**

**Background**

Since its inception in April 2013, Healthwatch East Sussex (HWES) has been aware of the complex interplay between out of hours GP access, the NHS 111 service, Ambulance attendances and the pressures reported in urgent care departments, especially in Accident and Emergency (A&E).

During April, HWES was approached for a media comment about the pressures being reported in A&E, which at the time was not taken up, as HWES was only just formed and had no available information to report. HWES representatives attended meetings with partners and reviewed data from various organisations and conducted its own research into some of the issues.

**2**

**What did we do?**

Information available to commissioners and providers includes a wealth of statistical information about waiting times, A&E transfers via ambulance and call volumes from the NHS 111 service. While this information is vital to inform and direct activity, it was felt that there was little information captured around the patient experience to present a fuller picture.

HWES planned a short activity, conducted over a two week period by HWES volunteers, to undertake a series of short, semi structured interviews with patients, using a questionnaire to gather views and experiences. This was completed over a two week period, August 12<sup>th</sup> - August 25<sup>th</sup>, with volunteers attending urgent care departments between 10:00 - 22:00 every day, including weekends and a bank holiday. A total of **623** people took part across the major Accident & Emergency Departments (A&E), Minor Injury Units (MIU) and Walk In Centres (WIC).

<b>Accident &amp; Emergency</b>	<b>Total:511</b>
Conquest Hospital	228
Eastbourne District Hospital	283
<b>Minor Injury Unit</b>	<b>Total:42</b>
Crowborough War Memorial Hospital	8
Lewes Victoria Hospital	19
Uckfield Community Hospital	15
<b>Walk In Centre</b>	<b>Total:70</b>
Station Plaza Hastings Walk In	42
Eastbourne Station Health Centre Walk In	28
	<b>Overall Total:623</b>

Table 1: Number of responses by departments attended

Table 1 shows the number of responses across these departments. As can be seen the main focus was around A&E.

The questionnaire was developed alongside partners as well as the volunteers undertaking the activity and a copy of the A&E version is attached in appendix 5. As part of these discussions, there was a request from the Head of Quality for two CCG's in East Sussex to ask for some supplementary information from the people taking part about their experiences after they had received treatment. This was agreed and a copy of this supplementary form is also available, along with the HWES Equalities Monitoring form, which was completed voluntarily by patients if they wished to do so. The supplementary and equalities information was returned via a freepost envelope, given to a person when the main questionnaire was completed.

This report focusses upon the responses received to help identify, in the decision making process, if people are attending A&E as a default and what, if any help they sought beforehand and what paths people are taking to urgent care. This information will compliment statistical information for partners and also provide HWES valuable insight about the patient experience.

### 3

## At first glance - what did the responses say?

The numbers of people who indicated in Question 1 that they were seeking help for themselves is shown below in table 2.

Department	Response - "Yes"
Accident & Emergency	65% (329 people)
MIU	63% (63 people)
Walk In Centre	71% (50 people)

Table 2: People seeking treatment for themselves (by department overall)

- For A&E departments, **66%** (185 people) for Eastbourne DGH and **64%** (144 people) for Conquest Hospital responding that they were presenting for treatment themselves
- Of the people who responded that they were not presenting for treatment themselves at A&E, **73%** (136 people) said that they were a Parent/Family member and a further **16%** (29 people) were a Partner/Spouse. The remaining **11%** (21 people) were either a friend or were seeking help themselves, but were not alone

### Access to GP's and other help

HWES researched the availability of information, including looking at GP practice websites around out of hours help and the NHS 111 service, availability of leaflets in surgeries and intelligence gathering from partners.

Question 2 and 2a of the questionnaire asked people if they tried to book a GP appointment about their problem or if they tried to seek help anywhere else, before attending an urgent care department. Table 3 shows the overall totals for each department for question 2.

Department	Response - "Yes"
Accident & Emergency	23% (117 people)
MIU	20% (8 people)
Walk In Centre	19% (13 people)

Table3: Did you try to book a GP appointment? (Question 2)

- **76%** overall (383 people) said that they did not try to get help from a GP before attending A&E
- For A&E departments, the Eastbourne DGH had only **25%** (70 people) and the Conquest Hastings had **21%** (47 people) saying that they did try to seek GP help

Question 2a asked if someone tried to get help from anywhere else. Table 4 below shows the overall responses for each department.

Department	Response - "Yes"
Accident & Emergency	36% (178 people)
MIU	31% (12 people)
Walk In Centre	31% (21 people)

Table 4: Did you try to get help anywhere else? (Question 2a)

Many comments received show that people were able to receive advice from a range of sources and there are other positive avenues which can contribute to the decision making process for an individual. There were many references to Opticians, Pharmacists and Dentists being able to provide advice and guidance, as well as showing that people are beginning to use the 111 service, although these numbers were small.

- *"Rang own GP and was told to go to A&E"*
- *"Tried for a doctor and told no times available"*

Question 3 of the questionnaire asks "Who told you to come". The overall results of this are shown below in table 5 below.

	A&E	MIU	WIC
Response			
Came straight here	51% (252 people)	71% (29 people)	48% (32 people)
GP / Health Professional	24% (117 people)	20% (8 people)	22% (15 people)
Called 111 service	8% (41 people)	0% (0 people)	4% (3 people)
Out of Hours GP	1% (5 people)	0% (0 people)	0% (0 people)
Other	15% (75 people)	10% (4 people)	25% (17 people)
Blank - a further 25 respondents did not answer this question			

Table 5: Who told you to come to the department? (Question 3)

- Overall many of those who responded said that they went straight to an urgent care department. While this is good with regard to the MIU and WIC's, this equated for over half of all those who responded in A&E
- In many of these cases a clear pathway could be evidenced, with people getting advice either from a GP, health professional or the NHS 111 service. However a large number of respondents did not try to seek GP help or advice anywhere else.

Initially this would appear that many are not attempting to contact a GP or seek medical help before deciding to report to an A&E department. The next section of this report looks at the relationship between questions 2, 2a and 3 in more detail for A&E.

### **How did people get to urgent care?**

Questions 4 & 5 asked people about their method of travel to a department and if the person themselves felt that they should be there.

Table 6 below shows the overall responses to Question 4 "How did you arrive at the department?"

	A&E	MIU	WIC
Response			
Ambulance	11% ( 58 people)	0% ( 0 people)	0% ( 0 people)
By myself	33% (168 people)	45% (19 people)	77% (54 people)
Friend / Family	50% (256 people)	45% (19 people)	21% (15 people)
Carer	1% ( 5 people)	0% ( 0 people)	0% ( 0 people)
Other	4% ( 21 people)	10% ( 4 people)	1% ( 1 people)
Blank - a further 3 respondents did not answer this question			

Table 6: How did you arrive at the department? (Question 4)

- A third of those presenting at A&E came by themselves, compared to over three quarters attending a WIC. However, some of those presenting at a WIC may have been registered patients, which would have influenced this figure
- Half of those who attended A&E had another person with them, in effect doubling the numbers of people waiting for treatment
- Many of those who travelled with another person stated that they travelled by car, public transport or taxi. This may indicate that some attendees could have attended an MIU or WIC if they had a minor complaint or injury and did not require an emergency medical intervention

Question 5 asked the individual if they felt that they should have attended the department. Table 7 overleaf shows these responses.

	A&E	MIU	WIC
Response			
Yes	95% (483 people)	97% (38 people)	94% (65 people)
No	4% ( 20 people)	3% ( 1 person)	1% ( 1 person)
Don't Know	1% ( 4 people)	0% ( 0 people)	4% ( 3 people)
Blank - a further 8 respondents did not answer this question			

Table 7: Should you have come to the department? (Question 5)

- For each of the urgent care units overall, more than **90%** of the people who were asked felt that they should have attended the department at that time
- Of those who felt that they should not have been there, many commented they should have seen a GP in the first instance but were not able to

<b>4</b>	<b>Looking Deeper - the A&amp;E focus</b>
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This section looks at the 2 Accident and Emergency departments for East Sussex, as these were the main focus of this project and where most of the volunteer resource was delivered.

While many of the questions provided useful information when looked at on their own, as in the previous section, insight can be further drawn out by looking at some of the questions together, to see how one answer may influence another.

It was also found that of the **511** people who responded to the A&E questionnaire, **20%** were either not residents of East Sussex or did not answer this question (**99** people). In order to focus on the East Sussex picture it was decided to not include these people in the analysis for this section. The understanding that those who were not residents would seek out an A&E department if necessary was used.

**How was the information looked at?**

Diagrams 1 to 4 reflect the whole number of respondents for each question in their own right, by each of the A&E departments, to establish an overall picture. Further analysis cross comparing results, was then undertaken and the results of this follow each of the diagrams. It should be noted that not all questions were answered by respondents, meaning that there is some minor differentiation between the totals for each question. When reviewed the numbers were found to be minimal and did not adversely impact on the overall indications.



### Eastbourne District General Hospital A&E

The number of people who stated that they were a resident of East Sussex for the Eastbourne District General Hospital was **227**

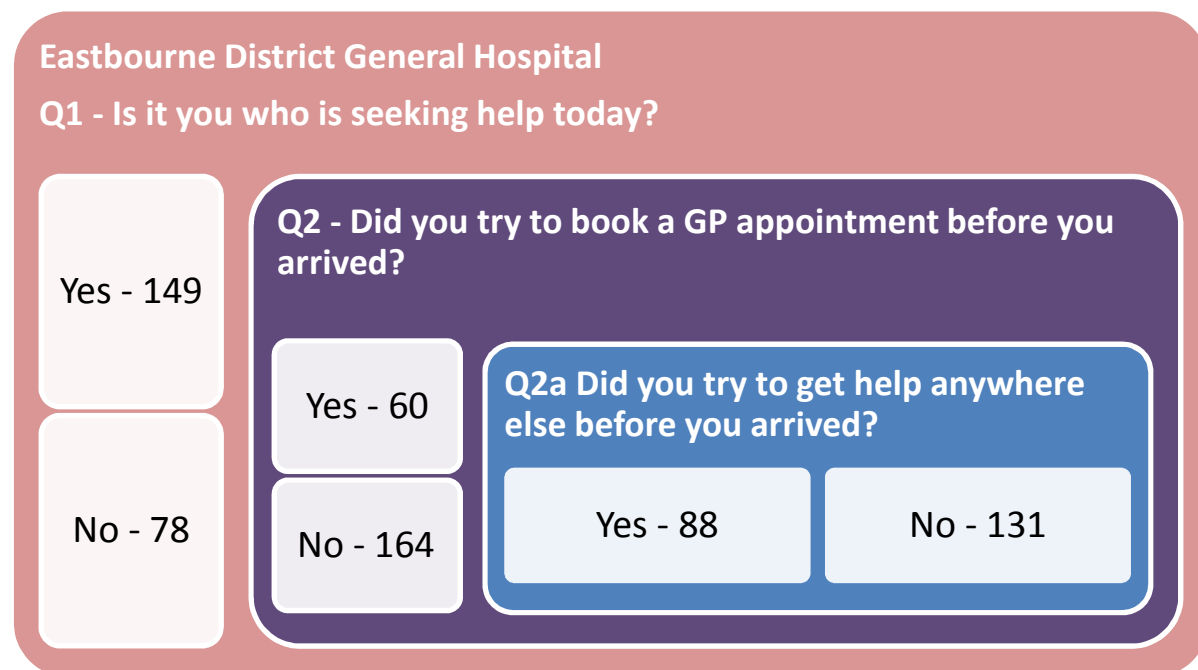


Diagram 1: EDGH - Where did you go to seek help?

When the above questions were cross compared, some interesting correlations were found. The main points are highlighted below;

- **39** people who said that they were seeking help for themselves also said that they had tried to book a GP appointment, compared to only **20** of those who said that they were seeking help for someone else
- **56** people who said that they were seeking help for themselves also tried to get help elsewhere, compared to **32** people who were seeking help for someone else
- **78** of those who said that they were seeking help for themselves also said that they did not try to book a GP appointment or seek help anywhere else, compared to **40** of those who said that they were trying to seek help for someone else



## Eastbourne District General Hospital

### Q3 - Who told you to come to A&E?

Came straight  
here - **116**

GP / Health  
professional -  
**56**

Called 111 -  
**16**

Out of Hours  
GP - **3**

Other - **31**

### Q4 - How did you arrive at A&E?

Ambulance - **31**

By Myself - **66**

Friend / Family - **117**

Carer - **1**

Other - **13**

### Q5 - Do you think you should have come to A&E?

Yes -**218**

No - **7**

Diagram 2: EDGH - How did you get here?

Following on from the questions in diagram 1, diagram 2 shows the following 3 questions and their overall responses. These were again cross tabulated with some of the preceding questions and also as a group.

- **62** people who were seeking help for themselves, but did not try to book a GP appointment or seek other help, said that they went straight to A&E, compared **33** people who said that they were seeking help for someone else. This means a total of **95** of the **116** people overall, who said they went straight to A&E, did not try to seek prior medical help or advice.
- **36** people who said they were seeking help for themselves and did not seek GP or other help and went straight to A&E, went with a family member or friend. **20** people who were seeking help for themselves, with the same responses went by themselves to A&E. This equates for nearly a third in both categories in question 4 who did not seek medical advice prior to attending A&E.
- **6** people of the **31** overall appear to have gone straight to A&E via an ambulance, without trying to seek prior medical advice, indicating a direct 999 call was made.
- **16** people overall who said that they called the NHS 111 non-emergency service whereas **56** people overall said that they were referred by a GP or other health professional. However, some of the comments relating to a GP / Health professional referral also stated that they had contacted NHS 111.
- **6** people who contacted NHS 111 also stated that they had been in contact with a GP.

- Of the **218** people who felt that they should have come to A&E, **112** had said that they did not try to book a GP appointment or seek help elsewhere. **91** of these people also said that they went straight to A&E

### Conquest Hospital Hastings

As with the Eastbourne District General Hospital information the same exercise was undertaken for the Conquest Hospital Hastings.

The number of people who stated that they were residents of East Sussex and attended A&E at this hospital was **182**

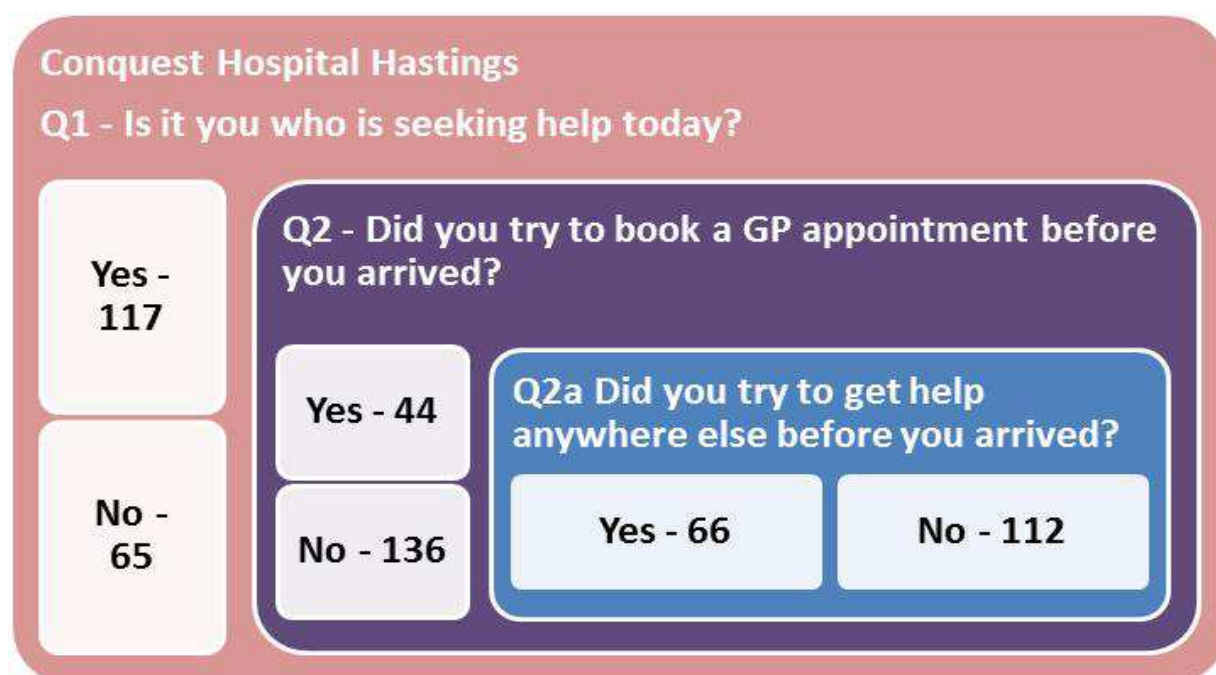


Diagram 3: Conquest - Where did you go to seek help?

As with the EDGH responses in this section, questions were cross tabulated against each other and some of the questions that followed and the correlations noted. These main points are highlighted below;

- 30** people who said that they were seeking help for themselves also said that they had tried to book a GP appointment, compared to only **14** of those who said that they were seeking help for someone else
- 43** people who said that they were seeking help for themselves also tried to get help elsewhere, compared to **21** people who were seeking help for someone else
- 64** of those who said that they were seeking help for themselves also said that they did not try to book a GP appointment or seek help anywhere else, compared to **35** of those who said that they were trying to seek help for someone else

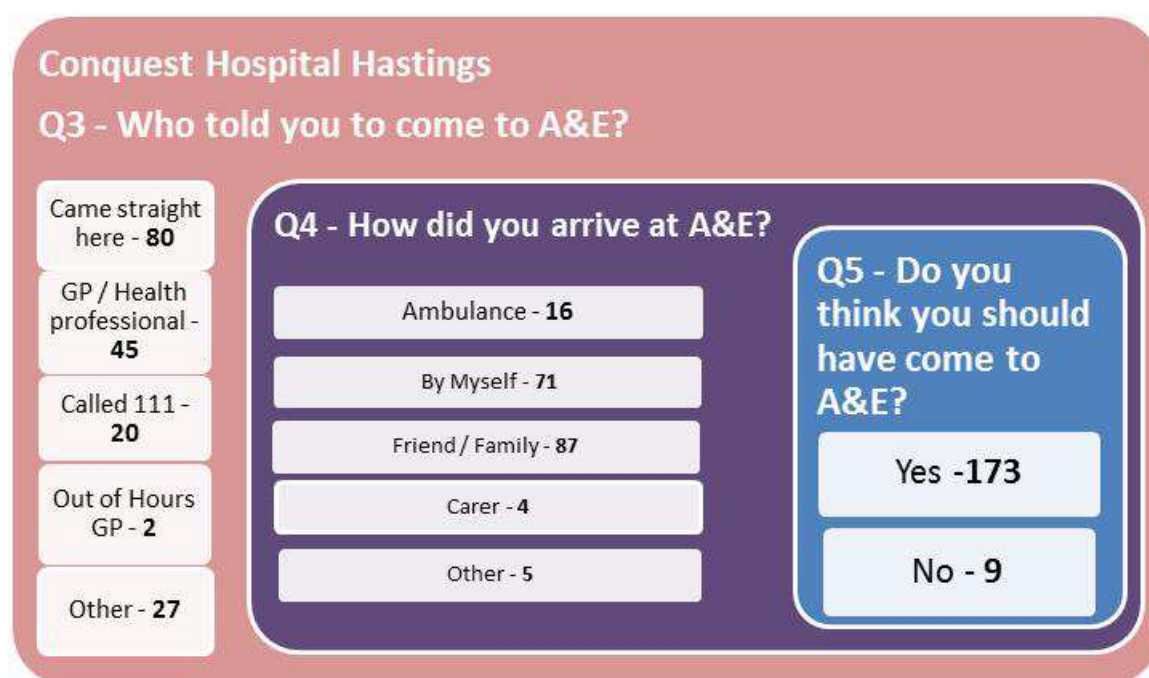


Diagram 4: Conquest- How did you get here?

Diagram 4 shows questions 3 - 5 and their overall responses. These were again cross tabulated.

- **39** people who were seeking help for themselves, but did not try to book a GP appointment or seek other help, said that they went straight to A&E, compared **27** people who said that they were seeking help for someone else. This means a total of **66** of the **80** people overall, who said they went straight to A&E, did not try to seek prior medical help or advice
- **20** people, who said they seeking help for themselves, did not seek GP or other help and went straight to A&E, went with a family member or friend. **16** people who were seeking help for someone else, with the same responses went by themselves to A&E
- **2** people of the **16** overall appear to have gone straight to A&E via an ambulance, without trying to seek prior medical advice, indicating a direct 999 call was made
- **20** people overall who said that they called the 111 non-emergency service whereas **45** people overall said that they were referred by a GP or other health professional. Of the available comments, very few said that they had been in touch with a GP, with many people saying they had been in touch with the 111 service, or had decided to call 999 or go straight to A&E to receive treatment

- Of the **173** people who felt that they should have come to A&E, **95** had said that they did not try to book a GP appointment or seek help elsewhere. **63** of these people also said that they went straight to A&E

<b>5</b>	<b>Overall - what did people say about a department?</b>
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The final questions asked people about their experience of waiting in a department. These responses, as with those in section 2 include answers received from non-residents.

Table 8 below shows overall how long people had been waiting for at the point of taking part in the questionnaire.

	A&E	MIU	WIC
Response			
0-1 Hour	<b>64%</b> (312 people)	<b>80%</b> (32 people)	<b>75%</b> (51 people)
1-2 Hours	<b>22%</b> (108 people)	<b>10%</b> ( 4 people)	<b>16%</b> (11 people)
2-3 Hours	<b>9%</b> ( 42 people)	<b>8%</b> ( 3 people)	<b>7%</b> ( 5 people)
3-4 Hours	<b>3%</b> ( 13 people)	<b>3%</b> ( 1 person)	<b>1%</b> ( 1 person)
More than 4 Hours	<b>2%</b> ( 9 people)	<b>0%</b> ( 0 people)	<b>0%</b> ( 2 people)
Blank - <i>a further 31 respondents did not answer this question</i>			

Table 8: How long have you been waiting at the department today? (Question)

- Less than **15%** of people were found to have been waiting for more than 2 hours across all departments

The A&E departments were further analysed to see if there were any differences between these 2 departments. The results of this are shown below in table 9.

	EDGH	Conquest
Response		
0-1 Hour	<b>72%</b> (192 people)	<b>55%</b> (120 people)
1-2 Hours	<b>18%</b> ( 49 people)	<b>27%</b> ( 59 people)
2-3 Hours	<b>6%</b> ( 15 people)	<b>12%</b> ( 27 people)
3-4 Hours	<b>2%</b> ( 5 people)	<b>4%</b> ( 8 people)
More than 4 Hours	<b>2%</b> ( 4 people)	<b>2%</b> ( 5 people)
Blank - <i>a further 27 respondents did not answer this question</i>		

Table 9: Break down of question 6 for A&E departments (Question)

- The 0-1 and 1-2 hour wait times for each of the A&E departments were perceived to be less than those widely reported in the media, although it should be noted that the Conquest did report slightly higher numbers for the 2 Hours and above categories than for the Eastbourne DGH A&E department

Table 10 below shows the overall breakdown of the results for this question.

	A&E	MIU	WIC
Response			
Yes	79% (399 people)	90% (36 people)	87% (60 people)
No	18% ( 90 people)	8% ( 3 people)	18% ( 9 people)
Don't Know	1% ( 7 people)	3% ( 1 person)	0% ( 0 people)
Blank - a further 18 respondents did not answer this question			

Table 10: Were you given clear and easy to understand information (Question)

- Many of the answers received also indicated that the person was directed to sit down and wait in the waiting room. Interestingly some added that this was good and clear advice while others felt that it was not. Overall, many were happy with the information they received once they had arrived for treatment.

Question 8 asked the person if they had seen a nurse or doctor since they had arrived. Table 11 shows the overall results for this below.

	A&E	MIU	WIC
Response			
Yes	69% (348 people)	64% (25 people)	33% (23 people)
No	30% (153 people)	36% (14 people)	67% (46 people)
Don't Know	0% (1 person)	0% ( 0 people)	0% ( 0 people)
Blank - a further 13 respondents did not answer this question			

Table 11: Have you seen a nurse or doctor since you arrived? (Question)

- Most people who responded had seen a nurse or doctor since they had arrived
- The highest numbers of people reporting that they had not seen anyone were from the WIC's, however it is possible that in many of these cases they were patients of the clinics, waiting for an appointment.

<b>6</b>	<b>Conclusions - overall and paths to A&amp;E treatment</b>
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### For Partners

The first look overall at each of these questions does highlight some interesting points

- Less than a quarter of those who attended an urgent care department had tried to book a GP appointment, while just over a third said that they tried to seek help about their problem, before deciding to present themselves for treatment



- Over half of the people who responded A&E and MIU departments said that they went straight there. For an MIU this is positive, as it shows that people may indeed be seeking help at alternative places
- Few people of people who attended either of the A&E departments said that they were directed by an out of hours GP contact or the 111 service
- Of the **196** people who stated that they were residents and said they went straight to A&E, **161** people went straight to A&E without seeking a GP appointment or any other help
- Overall, half of the people attending an A&E department said they came with at least one other person, increasing the perception on busy waiting rooms
- Positive alternatives were found, with some people saying that they had been advised by a pharmacist or other health professional to attend an urgent care department

Again some of the factors such as location to an urgent care department ease of access and knowledge/information will affect this, but this does give some insight into patterns of attendance.

While the purpose of this report is not to highlight any cost implications this may have for busy A&E departments, HWES did find information that nearly 1 in 4 admissions to an A&E department result in a discharge which did not require any treatment. Using this as a benchmark, potentially **40** people would have been discharged and not needed treatment at an A&E department, or nearly **3** people a day for the 2 week period of the project.

It could be concluded that if some of these people were aware about alternatives for receiving treatment there would potentially be a decrease in the numbers attending unnecessarily in A&E. With **95%** of people overall felt that they should have gone to A&E to receive treatment, there is a clear indication that there are possibly gaps in peoples understanding about where they can go for help and what they should go for and with information that is easy to find and available in a wide range of places, people can make the right choice about treatment options.

The supplementary information and elements of the questionnaire did show that many people have a positive experience when they do arrive at an urgent care department.

### **For Healthwatch**

Healthwatch East Sussex has in the course of this project found that the information available to residents is comprehensive and readily outlines where to go and what to do if treatment is required. Leaflets such as the 'Choosing Well' NHS leaflet provides clear information about alternative facilities and treatment centres available and explains simple treatments for some of the more common ailments people may experience. However this leaflet was found mainly in GP





practices and in urgent care departments. If, as some of the findings have shown, people are going to A&E without seeking help, they would possibly not have access to this information until they are physically presenting themselves or a family member/friend for treatment. A wider availability of this leaflet could be beneficial, especially to those without Internet access.

Research around GP practice websites found information which could be confusing or difficult to locate, even for the staff undertaking this initial research! While information about practices themselves is generally good and informative, information about who to contact for out of hours assistance did show inconsistencies in some cases. Many of the demographic of people returning their equalities forms were in the working age bracket and would potentially use the internet as their method of looking for information.

The answering of telephone calls for Out of Hours is now commissioned by the NHS 111 service provider and will be able to deal with out of hours GP enquiries. It was found that there are some websites which do not state this clearly, with references to PCT's still shown. This may prevent a person from seeking advice or assistance if they wanted to contact a GP out of Hours, possibly resulting in an A&E attendance which could have been avoided.

Healthwatch East Sussex concludes that, while the information available is informative and people attending an urgent care department find the experience a positive one, many people are simply defaulting to an A&E department rather than seek alternatives. Some of the information available is potentially difficult to find, to allow a person to make an informed decision about where to go when seeking treatment. A follow up initiative from this project will be to review and promote further, access to information for residents and work with our partners to ensure that this information is made available widely where possible.

It would also be useful to conduct this exercise again in the future as the numbers of response and richness of patient experience information has been positive.

## 7

## Thanks and acknowledgements

The HWES volunteers for their dedication and time in making this happen, East Sussex Hospital Trust for their input and accommodating our volunteers, all other partners involved in developing this project - SECAMB, Clinical Commissioning Group colleagues, Health Overview Scrutiny Committee leads and other HWES staff for coordinating the project and the staff at all of the urgent care departments visited.



## Appendix 1

## Supplementary Information

At the request of East Sussex Healthcare Trust the HWES volunteers asked patients to share their experiences of an urgent care department after they had received treatment. Patients were provided with a free text from and free post envelope and the supplementary information could be sent back to HWES. A total of **54** forms were returned from A&E and MIU patients, with none being received from WIC.

The comments received were analysed as either ‘positive’, ‘negative’, ‘both positive and negative’ or ‘neutral’. The difference between the ‘both positive and negative’ and ‘neutral’ answers is that a comment could contain elements which were had both positive and negative aspects around a visit and ‘neutral’ would not contain anything else and not relate to a person’s experience.

As well as looking at the positivity of the comments, a method of thematically coding them was also applied. By coding comments in this way, themes can be drawn out and reviewed and comments which have multiple themes identified. The themes used were; Dignity and respect, Quality of Life, Choice and Control, Information and Advice, Health and Safety, Timeliness of Service, Staff, Satisfaction with service, Environment.

**(Note:** Analysing any kind of comment is a subjective exercise and using themes helps standardise responses for the consumer and allow some quantitative analysis to also be undertaken.)

- A total of **42** forms were returned from A&E and **12** from MIU. This represents **8%** for A&E and **28%** for MIU of respondents to the main questionnaire who sent back supplementary information
- Overall for A&E **33** comments were analysed as ‘positive’, **6** were ‘both positive and negative’ and **3** were ‘neutral’. For MIU all 12 comments were analysed as ‘positive’

There is a difference between the overall number of positive and negative comments and the number of themes analysed by each comment. This is because a single comment may contain multiple themes. For example the comment;- “Treated with dignity and respect, treatment taking too long” contains themes which are both positive and negative regarding dignity and timeliness. In the above table this would be counted against the ‘Both Positive & Negative’ category and against the ‘Dignity & Respect’ and ‘Timeliness of Service’ themes.

Table 12 below shows the comments analysed by themes.

Accident & Emergency	Dignity & Respect	Quality of Life	Choice & Control	Information & Advice	Health & Safety	Timeliness of service	Staff	Satisfaction with service	Environment
Positive	15			2		9	14	15	
Negative									
Both Positive & Negative	2					5	4	1	1
Neutral	1							2	

Table 12 - Analysed themes for A&E supplementary information received

Many people commented positively about their interactions with the staff and their treatment. Overall people were satisfied with the service they received, with only 1 negative comment in this area. The neutral comments both stated that the service met their expectations. Some examples of these positive comments are outline below;

- “My husband was triaged within 10 minutes of our arrival for anaphylaxis following 2 wasp stings. He was given routine checks and an ecg and was seen by a doctor within 30 minutes. The staff were all excellent. He was discharged with medication and reassurance. He continues to recover at home. This was my 2nd visit to A&E in a week, having spent all night there with my mother following her head injury last Thursday. Once again I can say that the staff were brilliant despite the obvious huge workload.”
- “I think the service is very good all members of staff are friendly and helpful”
- “We have been treated courteously and respect. It would be better if it was quicker.”
- “Treated with dignity and respect, treatment taking too long”

The final two example comments also highlight the highest area found for negative aspects of comments, waiting times for treatment. However no one mentioned this as a negative on its own.

Similar analysis was undertaken on the MIU responses, which can be seen overleaf in table 13.

MIU	Dignity & Respect	Quality of Life	Choice & Control	Information & Advice	Health & Safety	Timeliness of service	Staff	Satisfaction with service	Environment
Positive	5			2		1	8	5	1
Negative									
Both Positive & Negative									
Neutral									

Table 13 - Analysed themes for MIU supplementary information received

All comments received were positive, with people mentioning staff being the highest received. Some examples of comments are shown below.

- “The visit was managed with minimum of fuss and the treatment was efficient with full explanation. After 2 x-rays, plaster and information given I was sent home. At all times paramedic doctor was kind and caring.”
- “Pleasant visit, staff are very friendly and constantly updating you to as what's going on”

The analysis of comments this was provides a useful method of presenting patient thought and opinion, without having to reprint every comment received. If providers would like a complete list of comments please email the author of this report, as per the title page.

<h2>Appendix 2</h2>	<h2>Volunteer Observations</h2>
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As well as undertaking the questionnaire exercise, HWES volunteers provided observations about their surroundings outside of the scope of the main project. These have been reproduced in the embedded document below and are entered as they were received. These are again subjective to an individual observer and have not been used to influence the main body of the report, but may provide useful information for partners.



## Appendix 3

## Equalities Information

The following charts show some of the demographic information received from this project. This was sent back to HWES via a freepost envelope provided and has been analysed anonymously. A total of 111 equalities forms were received back, a response rate of 18%. Some of the key themes are highlighted in the following charts.

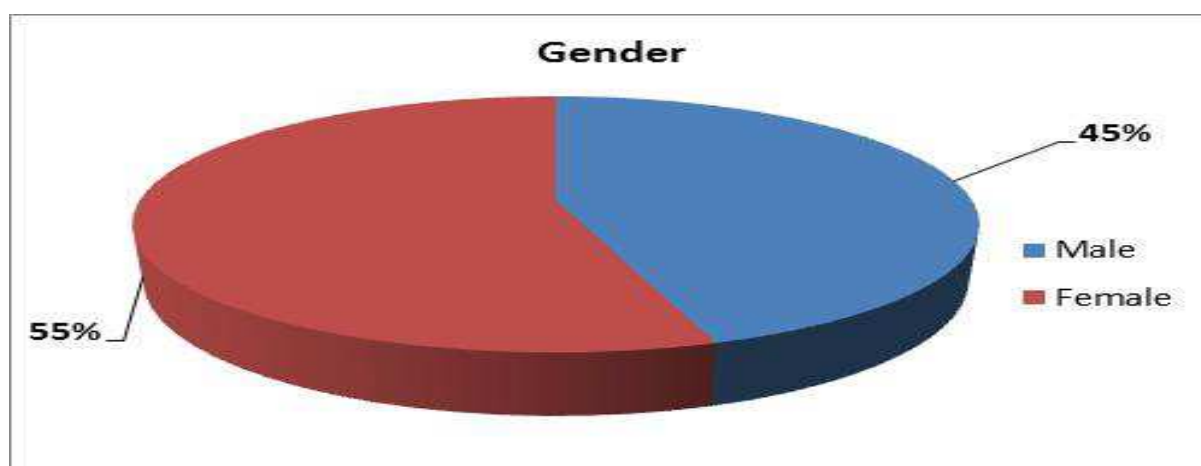


Chart 1 - Respondent Gender

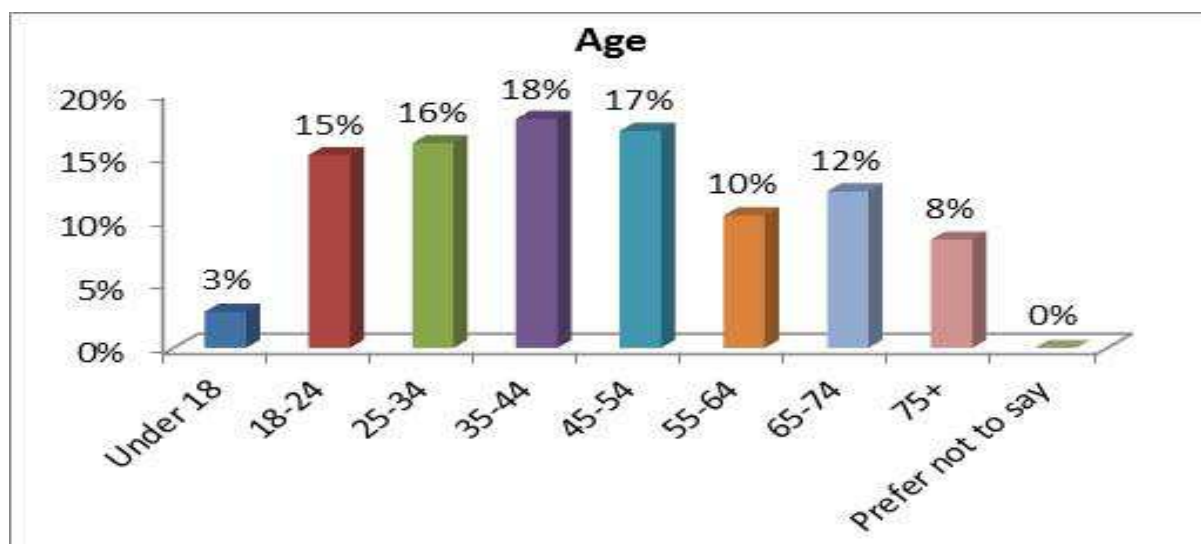


Chart 2 - Respondent Age Range

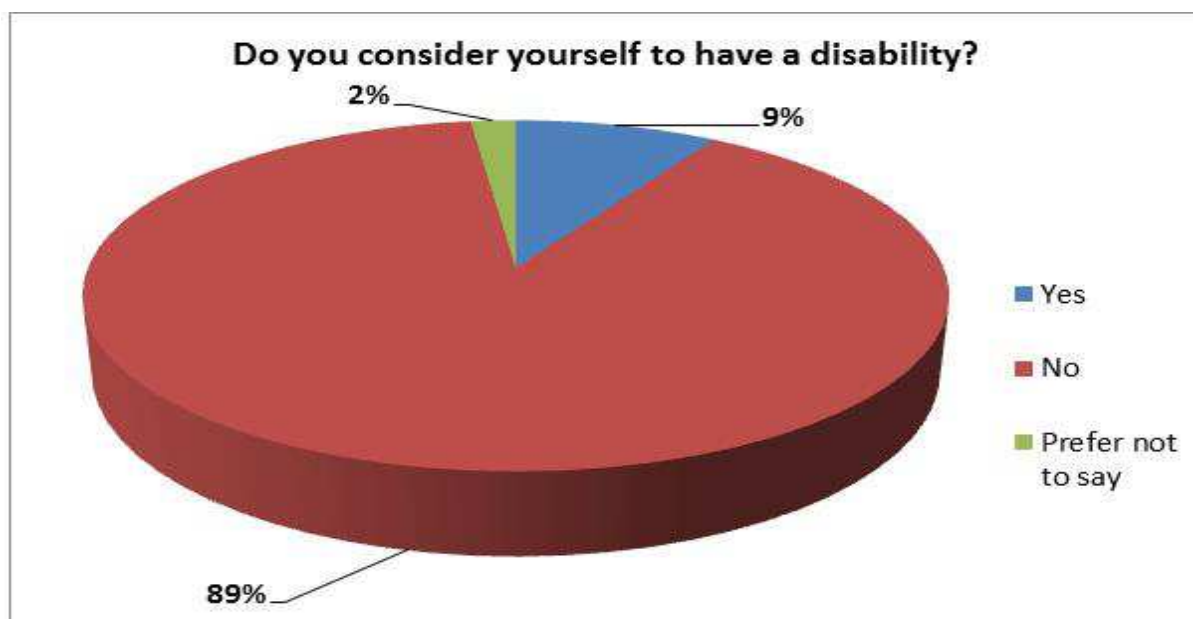


Chart 3 - Do you consider yourself to have a disability?

## Appendix 5

## Example Documents

Embedded below are the main documents used in this project. Please note that only the A&E examples are embedded, the MIU and WIC examples used the same layout and questions.



A and E Survey  
final.docx



AE Supplementary  
Info.docx



Equalities Form.docx