

Accident and Emergency Survey Report

January 2025

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Background

Channel 4 aired a documentary programme called Dispatches on 24 June at 9pm titled 'Undercover A&E: NHS in Crisis'.

The programme said at the time in its promotion of the episode:

“Over two months, a Dispatches reporter has filmed secretly while working in a major NHS A&E department. The undercover footage exposes the suffering and dangers patients face on a daily basis.”

The programme says it has filmed poor care, long waits, people in pain for long periods of time, lack of dignity and internal messaging warning of shortcomings. This comes on the back of a Care Quality Commission report published on 15 May highlighting concerns regarding Accident and Emergency (A&E) services in Telford and Shrewsbury hospitals.

Healthwatch Telford and Wrekin are people's health and social care champion. We make sure NHS leaders and other decision makers hear people's voice and use their feedback to seek improvements to services.

We needed people to let us know about their experiences of care in the Accident and Emergency Departments at the Princess Royal Hospital in Telford or the Royal Shrewsbury Hospital in Shrewsbury.

We asked people to tell us their experiences of being treated in either accident and emergency department, whether the experience was poor or negative or if people found their experience to be positive and felt well cared for. We are here not just to capture the not so good but to also highlight when things are working well.

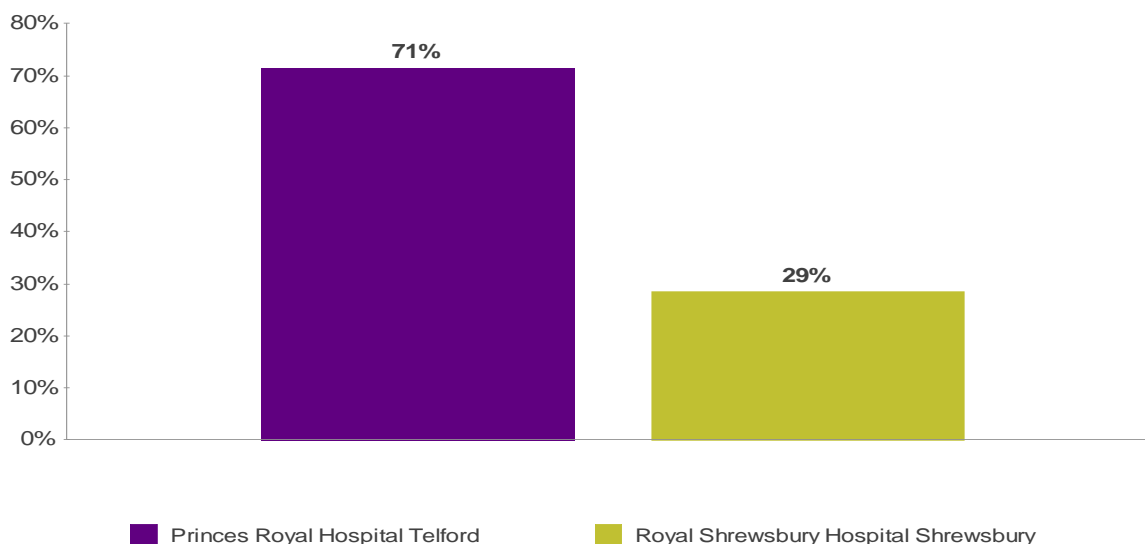
We wanted to get to the bottom of what services are like on a day to day basis not just on a few occasions. We asked people to help in sharing their experiences and created a short survey for people to share their experiences on.

Healthwatch Telford and Wrekin are hearing so many worrying stories and accounts in the press about the state of care in Telford and Shrewsbury Hospitals from people, the Care Quality Commission and now Channel 4 Dispatches. This report sets out peoples experiences up until the beginning of August 2024. We are planning a follow on survey to ask people to share their experiences post August to see how the changes made in A&E services have impacted on peoples experiences.

Findings

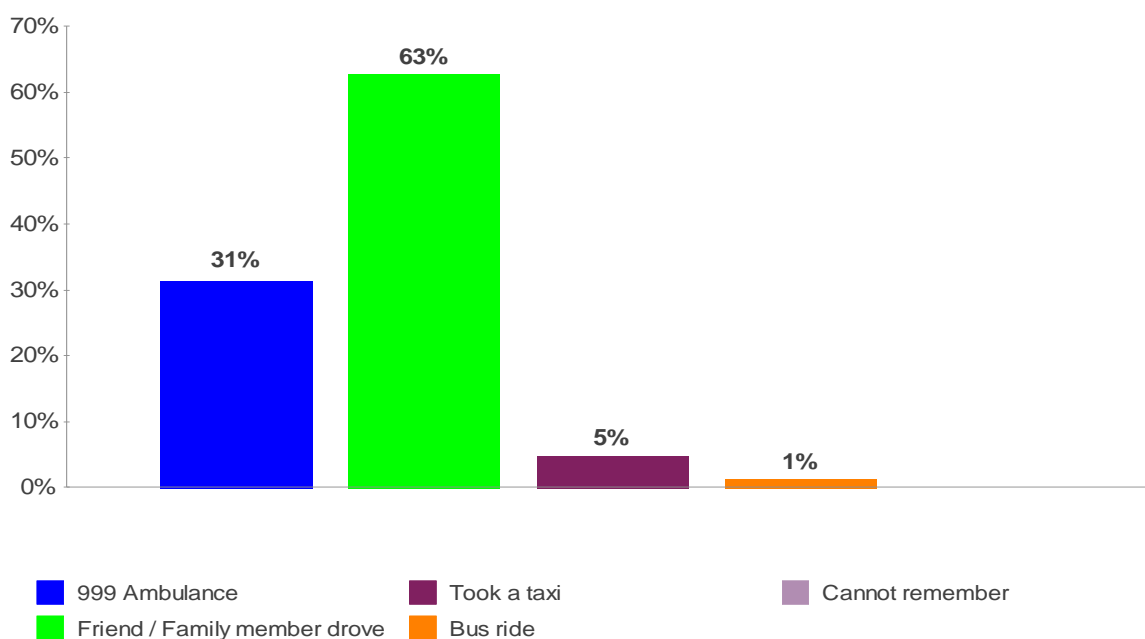
252 people responded to the online survey. 71% (180) attended the Princes Royal Hospital in Telford and 29% (72) attended the Royal Shrewsbury Hospital in Shrewsbury.

Please tell us which A&E (Accident and Emergency) Department you used?



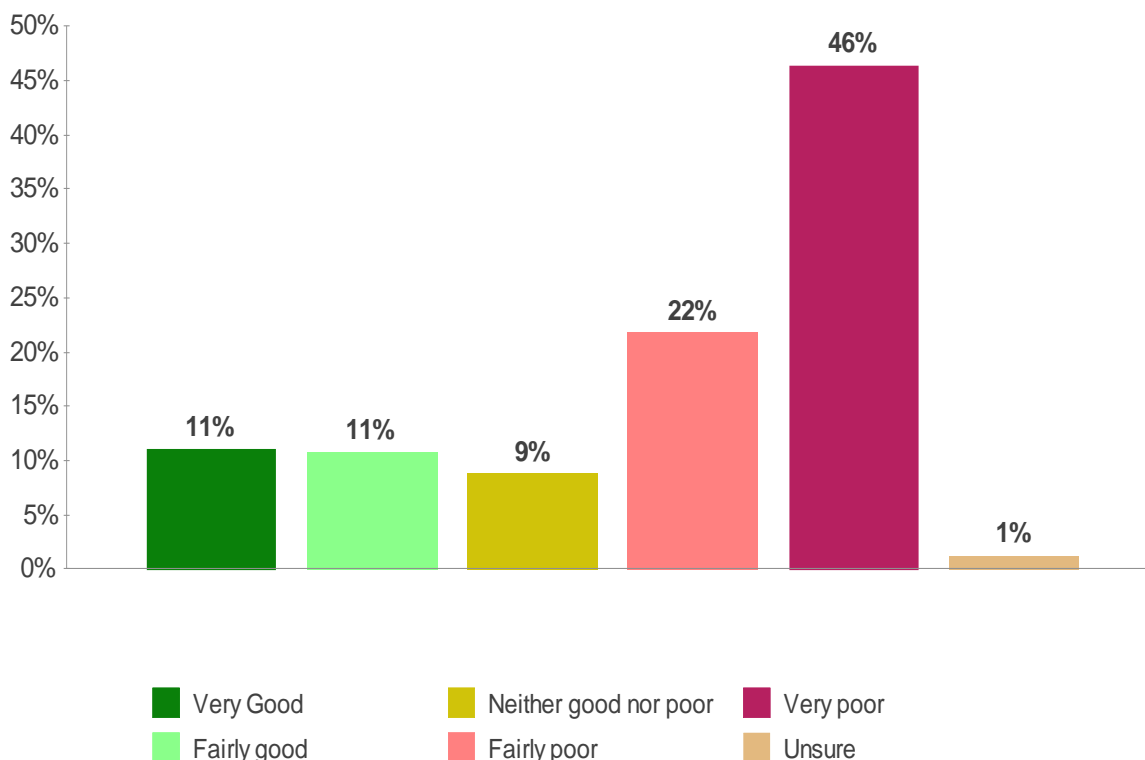
The majority of people were driven to A&E by a family member or friend 63% with 31% arriving by ambulance, with 5% using a taxi and 3% took a bus journey.

How did you go to A&E?



We next asked people to rate their experience of care while in the A&E Department.

Overall, how would you describe your experience of care while in the A&E Department?



11% of people described it as ‘very good’ with a further 11% saying it was ‘good’. 9% said it ‘neither good nor poor’ and 1% were unsure of their rating. 22% rated their experience as ‘fairly poor’ and 46% as ‘very poor’.

We then asked people to tell us why they had chosen their answer. Most people actually provided a comment, some short and some much more detailed. They are presented under the themes that the comments were about. The full responses are detailed in an addendum to this report.

Positive experiences

- ☺ The level of care I received was phenomenal. I arrived at around 9am and left at around 3pm with a full diagnosis and medication. I felt safe and the checks done were thorough. Staff were kind, patient and I felt listened to. Despite multiple tests coming back as “normal”, staff could see the pain I was in and a kidney stone was then found on a CT scan. Staff from different departments collaborated together to ensure I had the best care possible.
- ☺ I had obs taken within 15 minutes, ECG done, cannula in place and 5 lots of bloods taken within an hour. We had to wait for phlebotomy, but it was fine.

Every staff member was kind and the doctor was great. I really was surprised at how good it was.

- ☺ All staff there treated my three year old daughter with utmost care and compassion.
- ☺ I was first told by 111 to attend my local A&E and wait for an ambulance. I was then told I had been booked an apt at the Urgent Care Centre (UCC) and if possible to make my own way to hospital. I was seen quite quickly by a doctor in the UCC but was told I needed to be seen by A&E because I had collapsed. There wasn't much of a wait to be assessed by triage. I eventually saw an emergency doctor after a 4 hour wait who went through my blood results and arranged a scan. I was in the A&E for approx 6 hours. At this point I wasn't feeling unwell so the wait was fine and the doctor in A&E was very good.
- ☺ I went to A&E with my son, he was seen as soon as the nurses could, we waited but it was absolutely rammed in A&E. The nurses were apologetic even though it was out of their control. The staff were calm, non judgmental and simply amazing. They were patient and dealt with my son absolutely amazing! I couldn't be more grateful for them.
- ☺ The staff were amazing and treated my daughter quickly and appropriately.
- ☺ I was rushed into resus after having 6 cluster seizures and was looked after brilliantly by everyone I dislocated my shoulder spent 10 days in hospital after the seizures and dislocated shoulder I had my shoulder put back in place within 12 hours.
- ☺ The staff ensured that I was hydrated, took vitals regularly and kept me informed of what was going on.
- ☺ I have never been to A&E within my 24 years of life, I went recently at the start of June 2024 and was seen and discharged within 2 hours. I had obs done 20 minutes after waiting and was sent straight for bloods and X-ray then straight for oral surgery. I couldn't thank the team enough and praise the hard work. I am so pleased with the care I received and the outcome. Would recommend 100%.
- ☺ Was triaged within half hour. Took straight through into fit to sit area. Within 5 minutes I had bloods and ECG completed. Waited a few hours before seeing the doctor who arranged CT scan which was completed within 10 minutes of seeing him. Shortly after spoke to dr again who discharged with a referral.

Mixed experiences

- ☹ I went 4 times in the space of 1.5 months because of the same issue. In all instances we called 999 and we're told there were no ambulances for at least an hour so my husband drove me in. Once there in all instances I wasn't waiting for over an hour, because I was presenting with severe pain when breathing around one side of my lungs. Each time I was given pain relief enough to let me go home and when I asked what it was they weren't helpful. I mentioned my

recent gynaecological procedure, and how I had been told I may have a gallbladder issue and the first three times was told it wouldn't be that. But we were left with no answers or real help (in one instance he made me feel a little silly for asking if it could be that). HOWEVER, the final time I went in, again driven by my husband the morning after a previous trip to the same A&E, they saw me in 10 minutes again, the triage nurse took one look at me and asked about gallbladder issues. It was decided pretty quickly that's what it was, they did tests, I waited in the waiting room during and they confirmed an inflamed gallbladder that needed surgery asap. They were very kind to me, after a couple of hours of waiting for test results they put me on pain relief and discussed with me the quickest way to get me admitted to the Shrewsbury hospital for surgery as it couldn't be done at PRH. That trip to A&E went very well, everyone was really helpful and not at all dismissive, and I had surgery very quickly after that.

- ⊖ Staff were brilliant but the system is broken, long waits in crowded A&E waiting rooms. Staff unable to clinically manage all those in A&E and see deteriorations in their physical health. They rely on the person/family alerting staff to changes.

Negative experiences

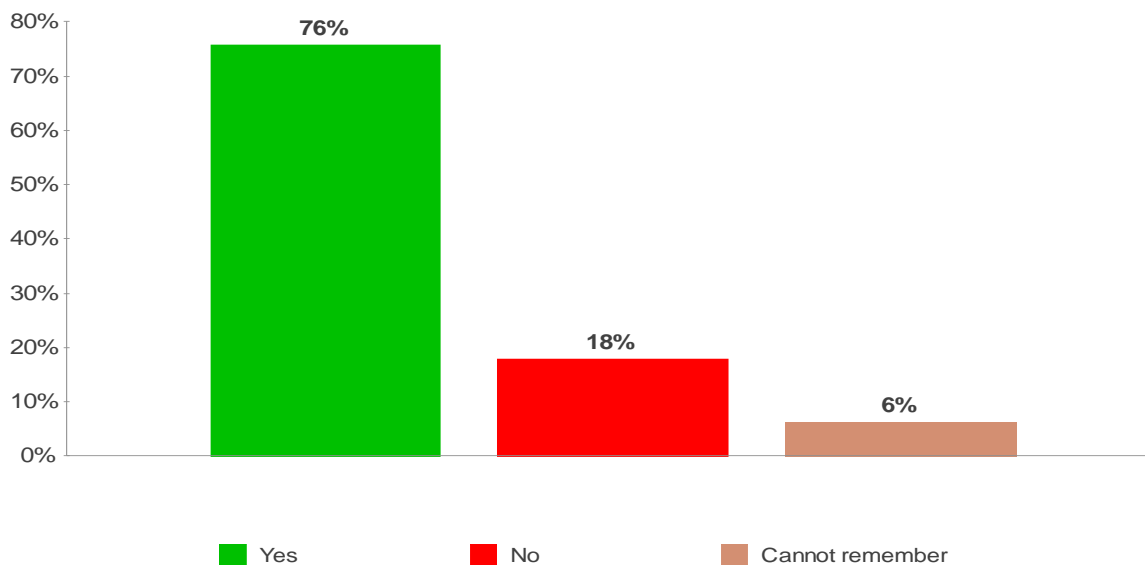
- ⊖ I was stuck in an ambulance outside for 9 hours then in ante A&E for 6 hours. A consultant was brought to the ambulance because my blood pressure dropped dangerously. He said I needed IV anti biotics immediately, ambulance crew said they're not allowed to give them. Consultant went inside to get permission but came back saying he'd written them up so as soon as I got a bed in ante A&E they could be started. That happened 2 hours later. My gall bladder was severely infected and I needed emergency surgery. Protocol over patient care.
- ⊖ I was parked in the waiting room and left by the ambulance at approx. 8am. A nurse called me after a while and told me I was probably suffering indigestion. I said the pain was unbearable and was told to wait in a seat. A Dr saw me a few hours later and diagnosed a chronically inflamed gallbladder. I was put on morphine and spent over 12 hours in the chair. In the early hours I was moved to a trolley in a bay upstairs where I stayed for nearly 48 hours until I was moved into a bed at 2am.
- ⊖ My dad was very ill, confused, wanted to urinate asked two people for bottle they said they hadn't any, I left and found one in different dept., when I got back it was too late. The people I had asked were talking. I had to change my dad, he was mortified, also not given his meds till I made a nuisance of myself. No food, I sent home for food to be sent, decided to stay with dad for 12 hours until he was seen and next step was sorted. I know they are under pressure, but there is no discipline, silly smalltalk, slovenly staff, no organisation at all, have experienced lots of problems over last two years, being told my dad didn't have long to live only to discover they were talking about other patient, wrong

tablet list that I picked up on, still sent to community hospital with wrong meds, I felt I had to fight for every bit of help.

- ⊖ Waiting time for treatment was appalling and my step-father experienced hypoglycaemia and was seriously ill. I kept advising the staff that his condition was worsening (and that he was experiencing hallucinations) but no-one would help us. At the point of collapse, several staff did not have the "code" to use the blood glucose monitoring machine. Ten hours after arriving, we were told that he would be admitted to AMU and I left him for the evening. When arriving the next morning, he was in the Fit to Sit area and had been told that he was being discharged. About 5 hours later, I took him home even though, he had started hallucinating again. He was discharged with a revised insulin dosage but no paperwork and he could not remember what he had been told.
- ⊖ I took my son to hospital because he swallowed a balloon, struggled to get a seat, no one to book us in then very rude, men's toilets door broken, very unclean rubbish on floor, women's toilets out of order flooded. One old lady in a wheel chair crying because she wanted the toilet and no one would take, I asked 3 members of staff to take her and then a nice male nurse took her, another oldish lady in her 80 said she had been in the ambulance for 4 hours and then had been waiting to be seen for 3 hours, she was so distressed, she was worried about how she looked because family was picking her up.
- ⊖ 96 yrs old patient, told by ShropDoc to attend PRH as a matter of some urgency, having been discharged from RSH A&E the previous day. Having spent 4 days in A&E in RSH, then had to wait 5 hours to be given a bed on a corridor in PRH A&E. Not a clinical space, a corridor by a repurposed surgical theatre. Apparently it was not possible to turn off the A/C in the theatre, so the corridor was very cold. Most of the staff were pleasant, but the whole system was a farce! So much of what was in the programme resonated with what we experienced.
- ⊖ I had a fall which resulted in my head opening, I was in and out of consciousness and my nose was also broken, I am a type 1 diabetic, I was given insulin without food which resulted in my blood sugars dropping massively which was life threatening for me I wasn't fed until 10 minutes before I left which was just a slice of toast and I arrived at the hospital at 7am and left at 8pm.

We then asked if people 'When you arrived were you seen by a nurse and triaged (assessing your condition)?'

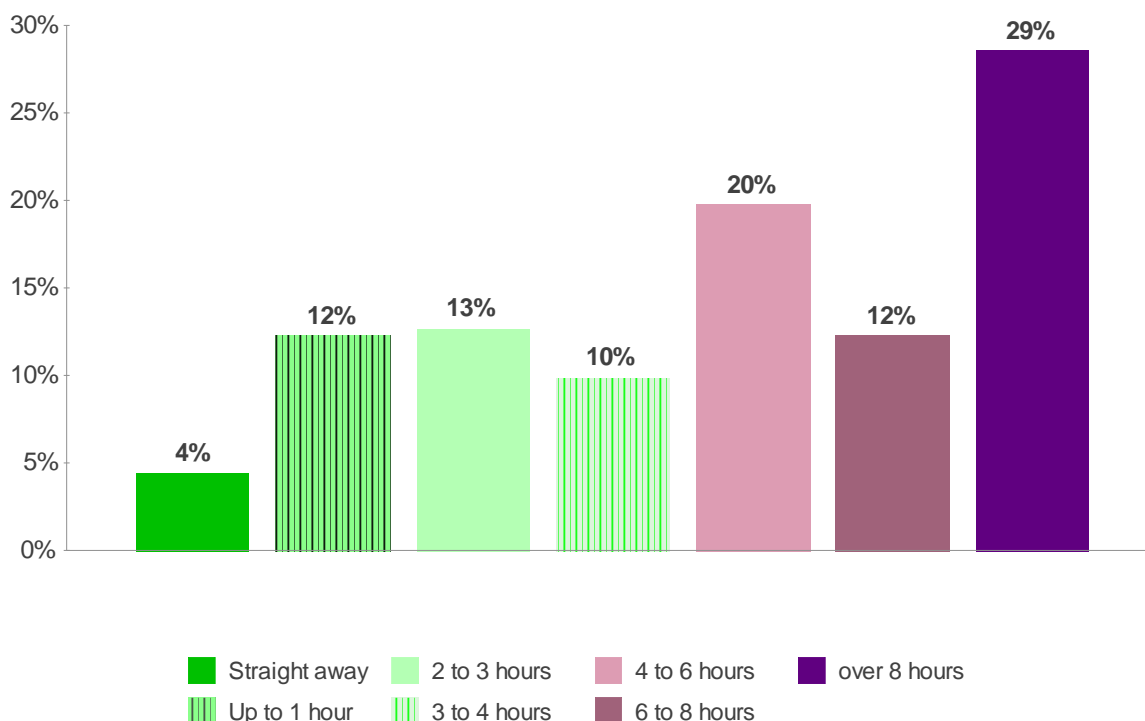
When you arrived were seen by a nurse and triaged (assessing your condition)?



76% (191) of people responding answered yes they had been triaged, 6% could not remember if they were or not. 18% (45) said they weren't triaged.

We then asked people how long they waited to see a doctor.

How long did you wait to see a doctor?



4% (11) of people said they were seen straight away, 12% (31) within an hour, 13% (32) between two to three hours and 10% (25) waited three to four hours.

20% (50) of people said they waited from four to six hours, less people, 12% (31) waited six to eight hours. The largest group of people, 29% (72) waited for over eight hours.

39% waited for up to four hours and 61% waited over four hours to see a Doctor.

We asked people to describe your experience of care and treatment whilst in the Accident and Emergency department. There as a 100% response rate to this question with 252 people providing a description, ranging from one word through to multiple sentences. They are presented under the themes that the comments were about. The full responses are detailed in an addendum to this report.

Positive experiences

- ☺ Staff were attentive and kind. They took us straight to the childrens waiting area which has more support for fidgety and impatient children. We saw a nurse who was very thorough and took all my daughters vitals. She explained everything she was doing so as not to worry her. She also gave her a cute little teddy bear which she absolutely adores to this day. It was a little wait but that is always to be expected as we went in on a busy time. When we saw the doctor, he was kind and compassionate and completely reassured me as a first time mum.
- ☺ Absolutely incredible, couldn't of asked for more.
- ☺ My daughter was assessed within 5 minutes of arrival, not liking how ill my daughter appeared she had bloods taken and rushed through and antibiotics started via IV within a hour, she was treated for sepsis and underlying abdominal infection and admitted to the appropriate ward within 3 hours.
- ☺ No complains. They work so hard and its a very busy A&E. I was seen within 2 to 3 hours assessed and had x-ray. The doctor then saw me and explained my injury and what the treatment would be moving forward. Professional team and well cared for.
- ☺ Absolutely amazing, from the triage nurse to the nurse taking bloods, the lady performing xray and then the maxillofacial surgeon. I was so pleased and happy with the process and I did not wait long at all, in and out within 1 hour 45 mins/2 hours.
- ☺ Maybe I was lucky - it was mid-morning and the A&E department wasn't packed. There seemed to be system in play following triage. I had damaged my shoulder in a fall. The doctor I saw did a thorough examination and sent me through for an X-ray - which took about 5 minutes. The results came back within 10 minutes, and my shoulder was put into a sling. The doctor explained that he was booking me in to the outpatients clinic for a follow up appointment.
- ☺ Very good. Staff were quick to help and reassure.

- ☺ Very good. We were sent to Telford Children’s Assessment Unit and them admitted and couldn’t fault any of it.

Mixed experiences

- ☺ My 80+ year old parent waited in a chair for 20 hours, 7 and a half in a wheelchair I had to keep complaining to make them more comfortable and they moved them to the fit to sit area but they were by no means fit to sit. It took 12 hours for them to see someone that referred them for an X-ray, within the first 12 hours they saw one doctor who took bloods then didn’t see a doctor for 12 hours who then said you need an X-ray (which was obvious so why the first doctor hadn’t sent them for one is ridiculous) they ended up with a pressure sore after their visit to A&E was sent home after 20 hours via the virtual ward. The staff nurse ‘J respiratory CNS’ was fantastic however! And checked up on us several times after we left and making sure the virtual ward had made contact, otherwise I can only describe the experience as debilitating and unfit for purpose, and for fit to sit areas only work when people are genuinely fit to sit not for poorly 80+ year olds struggling to breath and waiting a hip replacement. Also, the first doctor said they didn’t need oxygen and so was given none for about 16/17 hours in A&E and they did need oxygen and was sent home with oxygen
- ☺ Some staff are superb but others just don’t seem to care at all.
- ☺ Care and treatment was thorough and compassionate on the whole. However the wait was crazy and I came across other people in terrible conditions. Every member of staff I saw was pleasant, but I did just get handed a prescription at the end and sent home with no one coming back to explain my test results or what I was being given antibiotics for.
- ☺ Staff were lovely, just didn't have time to treat people. Over worked!
- ☺ When I finally arrived there was still a long wait. I can't complain about the staff.
- ☺ Care and treatment was thorough and compassionate on the whole. However, the wait was crazy and I came across other people in terrible conditions. Every member of staff I saw was pleasant, but I did just get handed a prescription at the end and sent home with no one coming back to explain my test results or what I was being given antibiotics for.
- ☺ Treatment overall was ok, staff very kind and provided explanations for all procedures, blood tests, ECG etc however a 6 hour wait to be seen by a doctor for treatment for DVT is unacceptable, not to mention an extremely busy waiting area resulting in no clinical observations or monitoring for deterioration in physical health, DVT tracked significantly up left leg in the time waiting in reception, this could of had a very different outcome if the clot had moved and nobody would of realised until it was too late!

- ☹️ There was a long wait but once procedures started late evening the staff was sufficient I could see a lot of cross work/information to people around me as there was no time for staff to communicate. No checking procedures how doing etc food or drink, checking meds required were taken. I wasn't doing great when left home. I'd not got clothes, money, charger, home keys, bag etc. On discharge nothing checked how getting home at 2am and getting back to Telford. Wasn't allowed to go to Telford that is two minutes from my house. Happy on how staff spoke to me explained etc considering how stressed the shift was for them and no let up. No privacy when results discussed or info passed on all done in fit to sit. Luckily a side room was found for my examination and info discussed with doctor. Everything was rushed, poor staff didn't know if coming or going most of the time.
- ☹️ I was in absolute agony with fractured ribs. The wait on uncomfortable seating was awful. Having to wait over 3 hours to see a triage nurse is unexceptionable. The care I received by the doctor and x-ray operators was good. It was the fact that getting to this stage was not acceptable.

Negative experiences

- ☹️ Arrived 3pm spent 1st night on hard plastic chair in A& E trying to sleep across chairs. took hours between tests and seeing doctor. No food or drink. Second day saw cardiologist at 11.30 am told will be admitted. Moved to fit to sit, no better care, or drinks, information etc. 11pm given bed in corridor. No plug for my CPAP machine now second night without treatment. Row of beds with men and women, man in next bed was obnoxious. Nurses came from away and didn't know the hospital or even where the toilets were! Admitted to ward 9 am discharged at lunchtime with 8 new medications and little explanation of problem. Had to see my GP for help.
- ☹️ I was going into a and e because I was told an ambulance was 11 hours wait for a 9 day old baby who was sucking in at the chest I then arrived and checked in at A & E department and they told me to wait and I would be called through to triage to the children's assessment unit I waited 20 minutes stood up with being 1 week postpartum carrying a heavy car seat because the floor was too dirty to even put the car seat on I then finally got called to be triaged they did give me a side room with baby being so little they were a lot more caring than the adult side of A and E but I still waited 8 hours to see a Dr with a newborn baby was beyond ridiculous I needed to get home with being 1 week postpartum really poor when I finally got round to seeing the Dr the children's Dr the paediatrician wouldn't even come speak to me directly they was passing messages through to another Dr which was not giving me hope my baby was ok and fit and well enough to leave I will never ever take my children here again I will go further afield if I can.
- ☹️ Awful !!!!! 2 days in fit to sit????

- ⊖ Left in busy corridor for two days. No privacy. No food or even water. No hygiene. Dirty sheets not changed. Bright overhead lights 24/7. Nobody checking how patient is. Constant staff passing by as outside staff room and delivery route. No communication. Nurses heard gossiping around staff room area but not interacting with patients. No one overseeing patients, staff seemed to want to turn a 'blind eye' / not my problem attitude. Patients relying on their visitors to sort them out. No communication between staff when passing to next shift. When telephoned you have to explain situation from the beginning each time. Different staff mean no continuity. No one answering phones so you don't know what is happening.
- ⊖ I find the staff lack care, compassion and empathy. Did not feel listened to in the time I was there, felt belittled by triage nurse, no blood test taken as told me amount of blood I coughed up would not be a large amount as nothing is a large amount to him. Left on a chair for hours in the waiting room and then fit to sit with no food or drink offered despite a suspected blood clot on lung. Told I had to be admitted as they had left seeing me too late day and couldn't have a CT scan until the next day despite an incredibly high D dimer. Escalations of pain were not listened to, asked to go home as more comfortable was told I couldn't. Eventually put on a trolley about 24 hours after arrival but right next to nurses station.
- ⊖ Awful, treated like I was a nuisance, I just sat overnight whilst feeling extremely anxious with palpitations and chest pain. No food or drink offered. In the morning when I asked about food and said I had an allergy I was asked why I hadn't brought food with me. I explained GP had told me to come and said it would be a 4 hour blood test so I hadn't expected to be there for 16 hours.
- ⊖ We were ignored for over 6 hours, asked for pain medication and help as so unwell to be ignored and forgotten for over 8 hours. My mother who was the patient managed to get to the bus stop whilst I was attending my animals and begged me to come and get her, she still had her cannula in. I called the department on my way back to inform them they lost a patient and they were uninterested and rude. No compassion what so ever. When I arrived back I managed to get her back in and a poor doctor was horrified as he had asked another doctor to see her 7 hours ago but they'd forgotten. We were there as she was so poorly and they didn't give a care in the world. Not offered a drink, didn't get one even when we asked for one. My poor mother said next time she would rather take her chances at home alone.
- ⊖ When booking in I was in severe pain, the lady at reception did not acknowledge me for around five minutes, she was chatting about tv programmes with a colleague. When she finally asked why I was there, I explained that I believed I had a kidney infection. She huffed and reluctantly asked me for my details. I explained that I felt very faint and needed to sit to which she replied, "can't your partner just hold you up while I get the rest of your details". Whilst waiting in the waiting room, all that could be heard was the staff in the reception area laughing and joking. I waited an hour to see

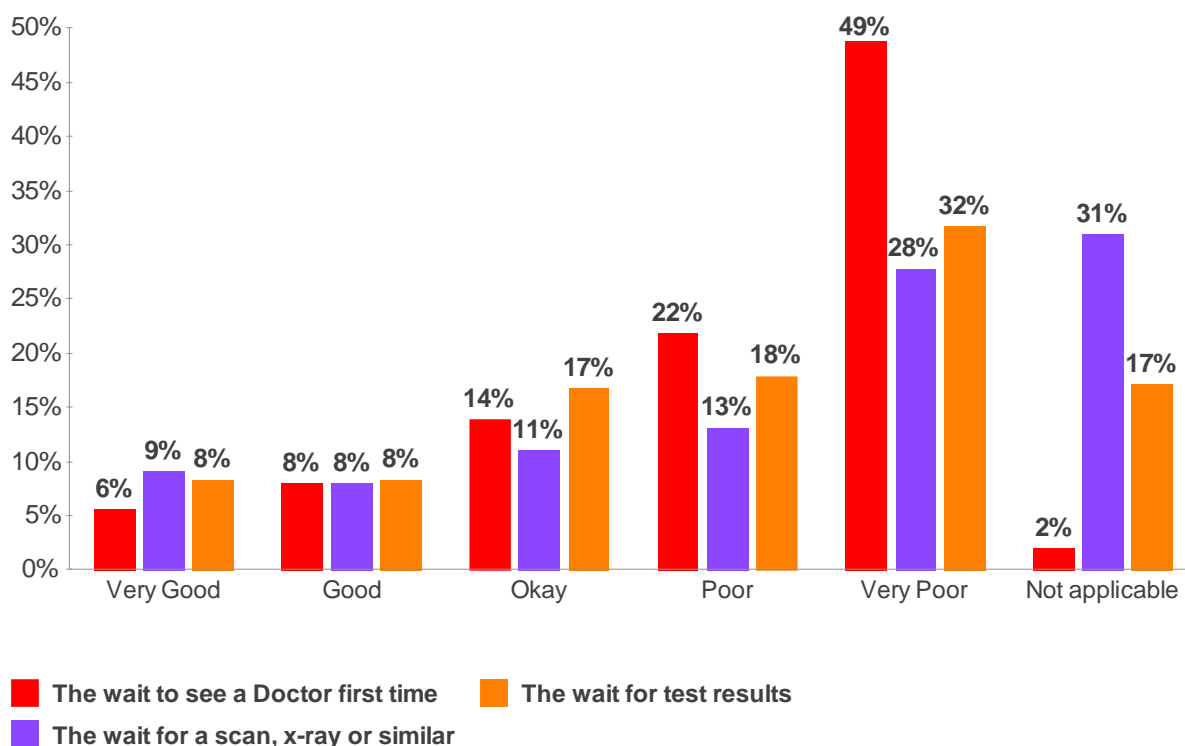
- triage who asked for a urine sample & for me to do this straight away. I waited 4 hours to see a doctor. When I saw him he shared that my sample could not be used and I had to do another.
- ⊗ I was ignored for 4 hours before I was assessed by a nurse, it was 6 hours and midnight before I saw a Dr. I was not offered any water or food even when I was moved out of the main A&E section into a triage room with about 10 other people.
 - ⊗ We were left in the waiting room throughout the whole process. I found the triage staff rude and a little rough in the way I was handled. I never use A/E (not a regular). My husband also picked up on the attitude of triage staff. My blood was taken and came back with a concern flagged. The wait for results ran into hours. I was sent home very scared with what I was told. No explanation. Ended up going private.
 - ⊗ I was sent to the hospital by my GP due to severe dehydration in my pregnancy, my GP contacted EPAS directly who accepted me as a patient but told me I had to go into the A&E entrance but tell the receptionist that I just needed to be sent directly to EPAS as i had already been accepted as a patient due to my GP referral. They refused to listen to me, refused to contact EPAS to speak to them and refused to read the letter my Dr had provided to explain the situation in order to be able to bypass A&E and go directly to EPAS. The receptionist refused, made me go through triage and be assessed, poked and prodded by the nurses there for them to tell me exactly what my GP had already told me, they then took a further 3 hours to contact EPAS who as soon as they were aware I was in A&E came and collected me immediately. Due to this, it went from a one night stay in EPAS and turned into a 3 night stay because it took over 8 hours for them to get me to the correct department causing further damage. I was referred by my GP at 5pm and accepted as a patient at this time, I got through to EPAS at 3am due to a receptionist refusing to listen to me.
 - ⊗ The initial triage process was ok. The wait wasn't too long - perhaps an hour. I then had to wait in the waiting room until I was seen by a Dr. I was there for a suspected stroke & was not seen within the 4 hour window. I did eventually see a Dr and had a scan and was then returned to the waiting room again. At the 12 hr point I was advised that although they wanted to keep me in there were no beds in the whole hospital and I would have to wait in the waiting room for an unknown period of time (possibly a day or more) until a bed became at available. It was only at the 12 hr point that I was given aspirin and I then agreed with the stroke nurse that I would go home & rest & return to TIA clinic a couple of days later.
 - ⊗ The wait in the department was appalling. I felt so so ill after having a heart attack (I was a late 60 year old woman) and was just left as they didn't seem to think there was a problem. It wasn't until a fabulous young nurse asked me how I felt and I said "I just can feel impending doom" that she pulled out all stops and ordered a very technical blood test and yes that came back as I'd had a heart attack ... then they seemed to bother about me.

People were then asked to rate their experience of nine areas:

1. The wait to see a Doctor first time
2. The wait for a scan, x-ray or similar
3. The wait for test results
4. The wait to see a Doctor to explain your test results and treatment
5. The wait to be admitted to a ward
6. Being listened to during your appointment
7. Explaining your care or Treatment
8. Meeting your needs
9. Care given to you while were in A&E

They were asked to rate their experience from Very Good / Good / Okay / Poor / Very Poor / Not applicable

Please rate your experience of the following:

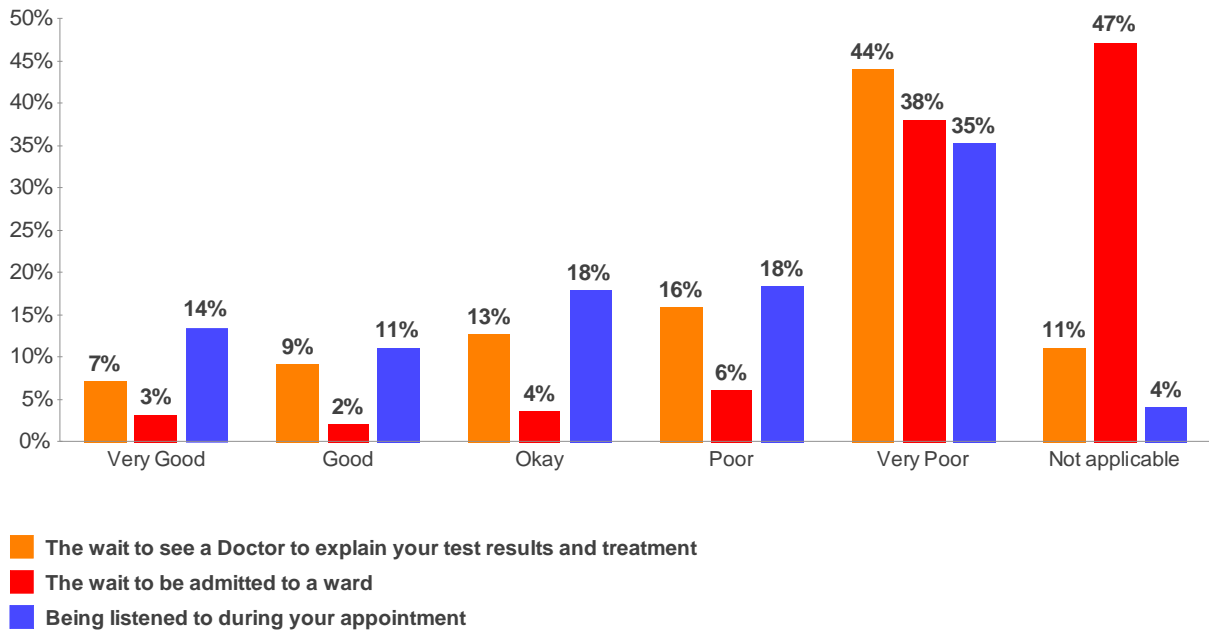


The wait to see a Doctor for the first time was rated the worst experience with 71% rating it as poor or very poor, with 49% selecting the lower rating satisfaction. Only 2% of people said it wasn't applicable to them suggesting most people did see a doctor during their visit.

The best achieving element of this grouping saw the wait for a scan, x-ray or similar score 17% for good including 9% as very good, though 41% rated this as poor or very poor (28%). It must be noted that just under a third of people did not have a scan, x-ray or similar.

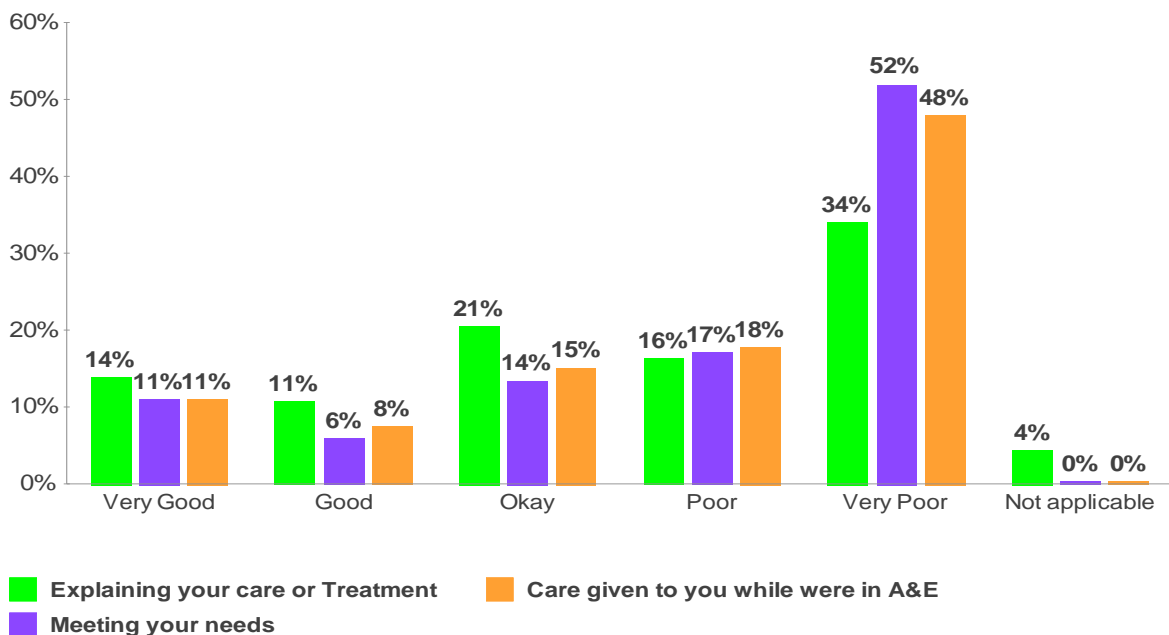
The wait for test results was the second poorest satisfaction rating with 50% indicating it was poor or very poor (32%), 17% indicating they hadn't had tests.

Please rate your experience of the following:



Waiting for a Doctor to explain the test results and treatment was rated by 60% of people as poor or very poor (44%). Being listened to during the appointment was judged to be good or very good by 25% of people though it was also judged to be poor or very poor (35%) by 53% of people. Just under half of people said it wasn't applicable to them to rate their experience of waiting to be admitted to a ward. Of those that did wait to be admitted to a ward 44% said it was poor or very poor (35%).

Please rate your experience of the following:



25% of people rated their experience of the explanation of their care or treatment as good or very good (14%) though 50% rated it as poor or very poor (34%), notably 21% said it was ‘okay’.

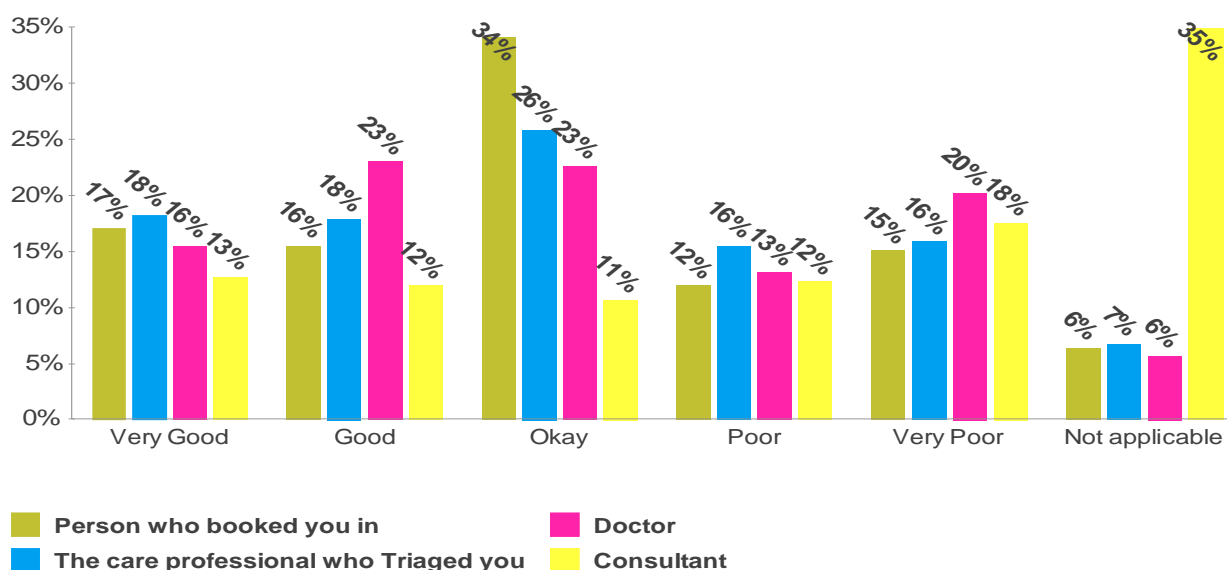
When it came to meeting peoples needs 69% of people rated it as poor or very poor (52%) contrasting 17% who rated it as good or very good (11%). With regard to the care given to people while they were in A&E 19% rated it as good or very good (11%) while 66% said it was poor or very poor (48%).

People were then asked to rate their overall confidence in various health professionals that they saw, these roles covered:

- Person who booked you in
- The care professional who Triaged you
- Doctor
- Consultant
- Nurses
- Care Assistants
- Porters
- X-ray/Scanning Dept staff

They were asked to rate their overall confidence in each role from: Very Good / Good / Okay / Poor / Very Poor / Not applicable

Please rate your overall confidence in the following health professionals that you saw or spoke to:

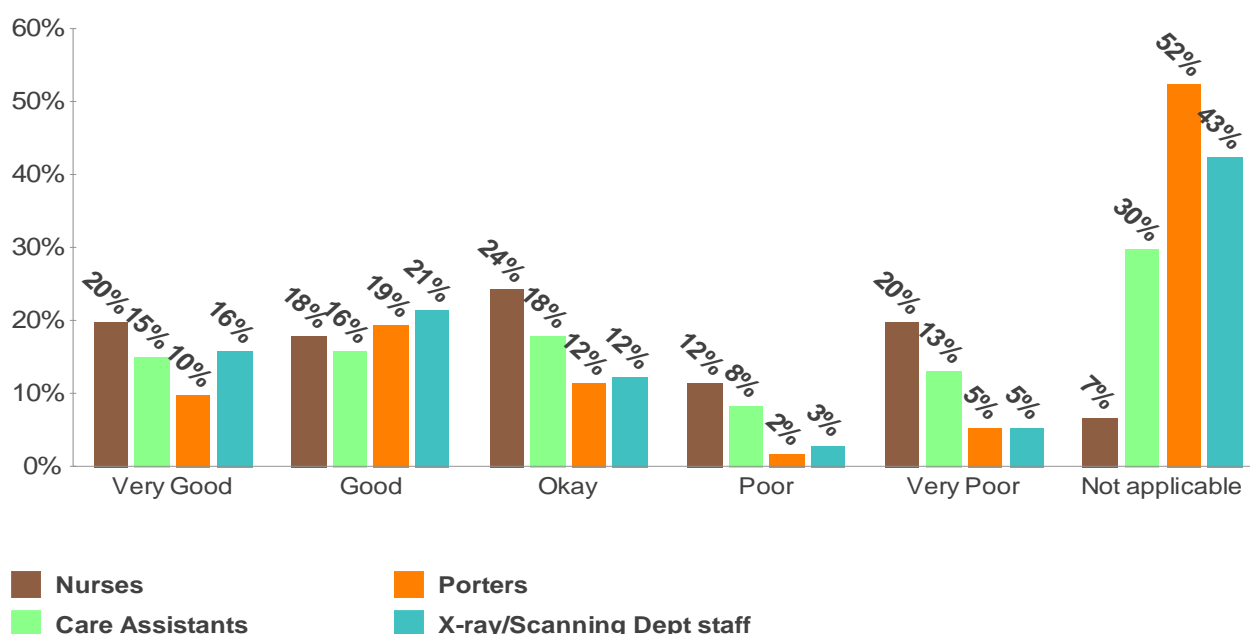


In respect of the person that booked people into A&E 33% said they had good or very good confidence in them with 34% saying it was okay and 27% saying their

confidence was poor or very poor. The confidence rate for the care professional that triaged people was judged as good or very good by 36% of people, with 26% saying it was okay 32% judging it as poor or very poor.

People were then asked to differentiate between Doctors and Consultants. 39% had good or very good confidence in the Doctors and 25% for Consultants. 23% said it was okay for Doctors and 11% for Consultants. 33% said their confidence in Doctors was poor or very poor and 30% for Consultants. Notably 35% said it was not applicable to them to rate Consultants.

Please rate your overall confidence in the following health professionals that you saw or spoke to:



38% of people said they had good or very good confidence in Nurses, for Care Assistants it was 31%. 24% said their confidence was okay for Nurses with 18% for Care Assistants. 32% said it was poor or very poor for Nurses and 21% for Care Assistants. 30% of people said it wasn't applicable to rate Care Assistants.

For Porters 29% of people rated their confidence as good or very good, in respect of X-ray/Scanning Dept staff it was 37%. Both groups were rated as 12% for okay. Porters were rated as poor or very poor by 7% of people and X-ray/Scanning Dept staff were rated by 8%. Those saying it wasn't applicable to rate their confidence in Porters was 52% and 43% for X-ray/Scanning Dept staff.

We then asked people to tell us if they have any suggestions to improve services in A&E.

What suggestions do you have for improving services in A&E, if any? Over 230 people responded to this with suggestions for improving services.

They are presented under the themes that the suggestions were about. Some suggestions do cover multiple themes. The full responses are detailed in an addendum to this report, part 3.

Positive appreciation of staff

Absolutely no suggestions for the staff that go to work day in, day out and help in any way they can. You are appreciated. We are all human beings and it is not the hospital staffs fault that wait times are long and beds are full. The suggestion I do have for improving is for members of the public to be more understanding for appreciation and money be given to the NHS - as a country, we are so proud to call you ours.

Not applicable, staff do their best and work with what they have. Everyone shows care and compassion.

A&E sadly is part of a broken system, the doctors and staff do an excellent job but they know they are fighting a losing battle.

Better care of patients

Better care of patients, more understanding, the obvious answer of more beds, don't put people who aren't fit to sit in the fit to sit area. Doctors actually giving patients the help they need and send them for tests they need instead of doing a blood test for them to sit for another 12 hours before having chest X-ray, ECG, etc.

Staff (nurses) need to stop gossiping & being on personal mobiles when they are clearly around people who have come to be helped. Doctors need to explain clearly & stop dismissing how patients feel if not clear on a scan. Sometimes things do not show on something as simple as an X-ray. They also need to clearly explain what they are considering & what they have confirmed it isn't.

There needs to be better systems in place to ensure patients are receiving the correct care in an acceptable amount of time to ensure they don't deteriorate. Reception staff need to more compassionate and helpful and listen to patients. Communication needs to be greatly improved between all departments.

Patients treated with respect and empathy

Showing more respect and empathy towards patients and their loved ones. It may not speed up the process but will offer reassurance to patients and their families

that they are in the right place which can be all that can be done in some circumstances.

That if a patient is presenting with a life threatening condition they are seen straight away and not left hours. The A&E is covered in posters for stroke/sepsis telling you that urgent care is critical which is ironic. Doctors who deal with you in A&E were dismissive and then when the result came through to show a stroke, had left it to another doctor to see us. He was unaware we hadn't been told it was a bleed to the brain. His blood pressure wasn't even taken until a nurse pointed out and once it was he had to be rushed to Resus.

Treating people with respect and dignity. An elderly lady was taken to the toilet by patients as the nurses were "too busy".

Prioritising very poorly people

Honesty about waiting times, prioritising a suspected heart attack over someone with a minor injury, better seating for long waits, access to free water, vending machines that work.

Triage for priority cases should include those in ambulances. Where a patient needs treatment in an ambulance it should be given under doctors supervision. Protocol and process should never trump patient care. I was eventually diagnosed with emphysematous cholecystitis and multiple large gall stones. My gall bladder was removed the day after admission in a "life saving operation". Earlier intervention with antibiotics would without doubt have reduced my risk.

To prioritise babies & children not leave them waiting 8/9 hours for a week old newborn baby to be seen by a Doctor.

Better support from management

I feel as if the staff need more support from heads of department or just seniors in general. They seem very stressed out in some instances and that they don't know what to do with what they have available. I also feel they need more equipment or assistants to help them in patient care as it felt as if people are waiting ages for some form of equipment as they only have one piece to share in an entire department or through multiple departments.

As a former senior Change Manager for a multinational organisation I know you won't effect change by just telling off front line staff. However, you must listen to their ideas and NHS middle managers must spend several days a month with front line staff to listen and learn. Most importantly the Senior Leadership Team must be people who believe in making positive change with short, medium and long term plans. SLT must have training and coaching in making organisational change

stick.

Visibility and presence of senior staff managing the situation no one taking control it was chaotic and frightening, still reliving the experience and trauma of the time pleading to see a Doctor. The dept was dirty, people smoking near to the entrance, no baby changing available, not enough seats, nowhere to breast feed. Staff seemed overwhelmed and hiding from patients, they were exhausted and demoralised, confusing messages on wait time or access to Doctors, couldn't seem to locate equipment, busy with admin which was having to be repeated many times. A number of patients obviously very poorly and in pain waiting with some apparently minor cuts and bumps following a day at school. Timely triage was not happening, arriving in an ambulance with an unresponsive baby it was shocking to be directed to an area with no seats available or basic facilities. If we had an alternative we would have left as felt safer with the ambulance crew who were monitoring the baby. Need to have a separate area for babies with breastfeeding/changing areas. Better communication and information so patients calmer and feeling confident.

The need for two separate A&Es for Telford and Shrewsbury

There's a clear need for 2 A&E's in Shropshire & Telford, Shrewsbury cannot cope as shown on C4Dispatches, how is adding more patients from Telford going to work?

I'd like Telford to stay open!!! I don't drive, and couldn't afford a taxi. To get to Shrewsbury. It's very scary.

Do not move the A&E to Shrewsbury, open a large GP connected to both A&E, that's after hours, so appropriate care can be given to all, hire more health care assistants, some for just patient moral and comfort, one on one care for vulnerable patients!

Better triage

This is difficult as you should not have to teach a supposed caring profession what caring or empathising with your patients is. People need to always revert back to what if it were your family member or yourself sat in the waiting room, how would you feel then... Earlier intervention e,g when someone's told you they've coughed up blood, order a blood test from triage. A lot of people were only just having tests done after waiting 7-9 hours to see a doctor which could have been done identified and dealt with sooner if requested from triage.

More triage nurses to filter out the people who do not really need to be there any are only there because they could not get a doctors appointment!

There needs to be a system where patients with conditions which impair their mental awareness are identified and not allowed to leave A&E whilst waiting for

admittance to a ward. All 'Fall Risk' patients are identified and given wrist bands, so there should be something similar for patients who are obviously confused.

Utilise the triage system to pinpoint people to alternative care. There was a gentlemen next to me who was in A&E for a suspected sprained ankle, as advised by his GP. This was during the day, when multiple minor injuries units were available. If this would flagged and signposted at triage, it would avoid the wait for a doctor.

Smarter working practices

My test results were back after 6 hours, the blood wasn't taken until 2 hrs into my wait, but there was no one qualified to give me the results. I had to wait 10 hrs for a doctor to be available. The flow of work isn't flowing there needed to be someone qualified to give test results and make decisions on care needed who isn't on the front line dealing with the resus cases. All departments seem to be in competition with each other instead of working to benefit the whole.

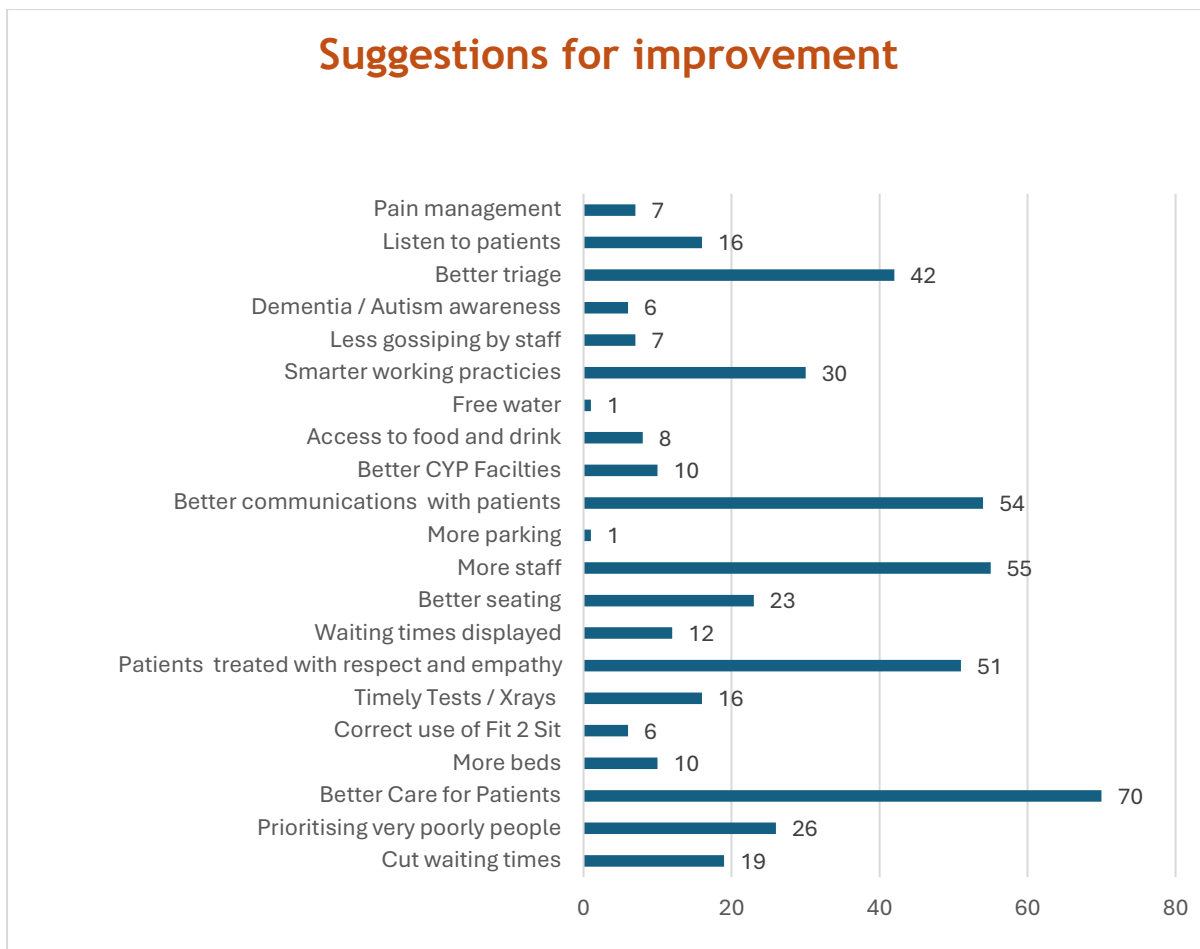
In my opinion the carnage is not about staff levels it is the way in which the hospitals are actually operating. During every visit I have had to hospitals locally I have witnessed very poor operational situations. I would highly suggest that you bring in LEAN consultants.

Need for a minor injuries unit

There really needs to be an 24hour properly staffed minor injuries unit and a properly staffed separate children's unit. That would free up doctors and nurses in the majors unit.

Waiting times need to be cut. There needs to be a 24hr walk in centre

The following table captures the main themes in terms of the number of times they are mentioned from peoples suggestions for improvements.



We finally asked people if they would like to add any other comments about their experiences during their time in A&E.

They are presented under the themes positive, mixed and poor that the additional comments relate to. Some suggestions do cover multiple themes.

Positive comments

- ☺ The level of care I received was phenomenal. I arrived at around 9am and left at around 3pm with a full diagnosis and medication. I felt safe and the checks done were thorough. Staff were kind, patient and I felt listened to. Despite multiple tests coming back as “normal”, staff could see the pain I was in and a kidney stone was then found on a CT scan. Staff from different departments collaborated together to ensure I had the best care possible.
- ☺ Paediatric nurses at PRH A/E are amazing.
- ☺ The staff at the Princess Royal A&E and hospital are excellent and their reward for this is closure.

Mixed comments

- ☹️ Most of the staff worked hard but were clearly overwhelmed by the sheer numbers of people attending.
- ☹️ I have no issue with the doctors and nurses - they could not be working harder. The leadership should get out of their offices and be in A and E and watch what is happening on their watch. I moved back from Australia and what I am witnessing is subhuman. Not about clinical care- it is about processing and sequencing. That needs active management every minute.
- ☹️ Staff were really good but you could tell they were tired and overworked. Too many parents letting their children run wild around there and roll about on the floor played, causing a tripping hazard.
- ☹️ Numbers in A&E could be greatly reduced if an effective walk-in clinic was made available particularly in Telford. Down grading A&E at PRH can only make the problems at the Royal Shrewsbury A&E a lot worse. This decision needs to be revisited!
- ☹️ The staffs attitude and care were excellent! They are working in poorly managed, staffed and underfunded situations day in day out.

Negative comments

- ☹️ I was over 70 and I will never go to A&E again. I went to A&E with a suspected heart attack. Early help can save people yet I waited 4 hours to be assessed even though I was in pain and very uncomfortable. I waited 6 hours to see a Dr and then I waited until 8am in the morning to be moved to a holding ward where I was finally offered something to eat and a drink. It took 24 hours since arriving at A&E to have a bed and then in the middle of the night, after being awake for almost 36 hours, I was moved to the cardiology ward in Telford where I was finally told I wasn't having a heart attack, my heart medicine needed adjusting. Had I had access to a cardiologist on arriving at A&E, I wouldn't have had to suffer so much neglect and stress.
- ☹️ Aswell as the very poor care, horrendous waiting times, the cleanliness was disgusting, patients sat with urine samples or on the floor. No care offered for pain relief, or communication of any sort.
- ☹️ The Trust is broken. Total lack of care and accountability. They have learnt nothing from Mid-Staffs! 72 hours in A&E without basic care.
- ☹️ It needs more staff less agency staff and more permanent experienced staff, ward sisters, modern matrons, need to do work rather than always being sat at a desk chatting and not providing care.
- ☹️ Left in chair in A&E for 14hrs then at 3am stood outside to transfer to corridor where I spent another 36 hours on a trolley holding a fire door open blocking

plant room doors with one HCA to look after 8 people. My family had to get me a drink, take me to the toilet, get a sheet to cover the plastic bed, I had a temp of 39, battling cancer hadn't passed water for 48hrs, then my daughter was asked by bed administrator to take me in her car to Shrewsbury hospital as they may have room as no ambulance transport available! The staff lost all my clothes and shoes, when asked about daughter told to go look in end of corridor cupboard, if not in there don't know!! Worst treatment I've ever received in my life would rather die at home than go to A&E again.

- ⊖ It took forever for results to come back, they needed a blood transfusion which took several hours to organise and 3 staff to administer. There is far too many managers and not enough staff. There is an immense amount of waste. The NHS must be the ONLY business that operates on an INVERSE pyramid business model. More highly paid, ineffective, unnecessary Managers instead of having more useful staff. The effects of FUTURE FIT will ensure that SaTH is NOT FIT FOR the FUTURE
- ⊖ Think about the patient - they haven't had your training. They are scared frightened and overwhelmed.
- ⊖ Being given information about what is happening and what is likely to happen.

Conclusions

The responses people expressed to the questions posed does provide a more generally negative representation of peoples experiences. To be fair there are some positive experiences shared with a few glowing references to the care and commitment of staff within A&E.

Two thirds of people rated their overall experience of care while in the A&E Department as poor or very poor. This can not be ignored.

39% of people reported waiting for up to four hours and 61% waited over four hours to see a Doctor.

When we again asked people to tell us about their experience of care and treatment whilst in the A&E Department everyone responded with some comment. Putting all the responses into three categories of positive, mixed and negative as we did for the overall rating of experience of care we again saw two thirds of people sharing what are negative descriptions of care and treatment. This confirms their consistent accounts.

People were asked to rate their experience of nine areas within the emergency department.

	Good / Very Good	Okay	Poor / Very Poor	N/A
The wait to see a Doctor first time	14%	14%	71%	2%
The wait for a scan, x-ray or similar	17%	11%	42%	31%
The wait for test results	16%	17%	50%	17%
The wait to see a Doctor to explain your test results and treatment	16%	13%	60%	11%
The wait to be admitted to a ward	5%	4%	44%	47%
Being listened to during your appointment	25%	11%	53%	4%
Explaining your care or Treatment	25%	21%	50%	4%
Meeting your needs	17%	14%	69%	
Care given to you while were in A&E	19%	15%	66%	

Of note is the ratings for the time taken to see the Doctor for the first time and also the wait to have test results explained. Both ‘meeting your needs’ and ‘care given to you while you were in A&E’ are similar to peoples overall experiences and the amount of negative experiences in care and treatment accounts.

We went onto to ask people to rate their overall confidence in each of the following roles:

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	Good / Very Good	Okay	Poor / Very Poor	N/A
Person who booked you in	33%	34%	27%	6%
The care professional who Triaged you	36%	26%	32%	7%
Doctor	39%	23%	33%	6%
Consultant	25%	11%	30%	35%
Nurses	38%	24%	32%	7%
Care Assistants	31%	18%	21%	30%
Porters	29%	12%	7%	52%
X-ray/Scanning Dept staff	37%	12%	8%	43%

We see peoples confidence in care professionals significantly different to that of their experiences of care and treatment as they show generally a lesser dissatisfaction with no role being rated more than a third as poor or very poor and when looked at from the very good or good plus okay ratings.

The sets of ratings show people are clearly rating the process and the delays experienced from these as the causal factors to their lower ratings of care and treatment experienced from waits to see Doctors, have results explained to them, time to be admitted to a ward and the like and then correspondingly if people are waiting to see Doctors, have results explained to them this may in turn translate in the Doctors and other health professionals rushing their examinations, explanations, not do as many checks as normal, not check pain management or basic personal care needs as often as people need: which people - the patients, then translate as a lack of care causing a friction in relations and affirmation of negative press perpetuating an going negatively by a large section of the community as to what to expect when visiting A&E.

This can further be seen through the range of themes for improving the service:

- Better care of patients
- Patients treated with respect and empathy
- Prioritising very poorly people
- Better triage
- Listening to patients
- Better support from management
- Smarter working practices.

On reflection there are some patients reporting positive experiences and giving praise to staff, others have mixed views on the hard task of staff to work in the circumstances the A&E Department faces and poor views of managements role. This is exacerbated with what people see as neglect and feeling their or their loved ones dignity isn't respected and basic care needs ignored.

The Trust has been under intense scrutiny from the Care Quality Commission with Must Do and Should Do actions to address their recent inspection, the TV viewing audiences, local authorities, local commissioning bodies and the like. The key issue for patients is have process and procedures been changed within the A&E Department that actually deliver better outcomes for them? Our recommendations are reflective of this rather than being granular and repeating what other organisations are similarly asking for.

Recommendations

1. A patient charter to be developed that sets out what patients can expect in terms of service while in A&E
 - a. Time to be triaged
 - b. Prioritisation of very poorly people
 - c. Pain management
 - d. Frequency a patient will be checked during their wait
 - e. Frequency people can expect updates about waiting times:
 - i. Regarding their personal health issue
 - ii. Department average waiting times
 - f. Respect and Dignity - what patients can expect from all staff within the Emergency Department
 - g. Additional support for people such as those living with Dementia
 - h. Access to drinks and food with timescales eg after two hours you will be asked about a beverage, after fours a beverage and snack, after 6 hours...
 - i. Provision of refreshments to buy outside of hydration and nutrition care in 'h.'
2. Consider replacing the uncomfortable metal seating with more appropriate comfortable seating considering people using them are generally poorly and in pain.
3. Provision of a separate reception for people referred to the UCC by 111, currently people are booked in at the A&E and triaged, if this took part in a separate reception process it would alleviate some pressure on the main A&E and a quicker check in for patients using either service.
4. Provision of refreshments - hydration and nutrition, both by SaTH and for purchase ensuring people are not exploited with the charges.
5. Promotion of Healthwatch Telford and Wrekin as independent champions for people using the NHS, with encouragement to share their experiences independently be they good, indifferent or poor.

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