





Enter and View Haywood Hospital Walk-in-Centre

Announced Visit 4 July 2024

What is Enter and View?

Part of Healthwatch Stoke-on-Trent's remit is to carry out Enter and View visits. Healthwatch Stoke-on-Trent Authorised Representatives (ARs) will carry out these visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows Authorised Representatives to observe service delivery and talk to service users, their families, and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists, and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation so that we can learn about and share examples of what they do well from the perspective of people who experience the service first hand. Healthwatch Stoke-on-Trent's Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Stoke-on-Trent's Safeguarding Policy, the Service Manager will be informed, and the visit will end. The local authority Safeguarding Team will also be informed.

Details of the Visit

Details of Visit	
Service Address	Haywood Walk-in-Centre Ground Floor, Haywood Hospital High Lane Stoke-on-Trent ST6 7AG
Date and Time	4 July 2024
Authorised Representatives undertaking the visit	Tracy Cresswell Sophia Leese

Acknowledgments

Healthwatch Stoke-on-Trent would like to thank all the staff and all the patients for their co-operation during our visit.

Disclaimer

Please note that this report is related to findings and observations made during our visit on 4 July 2024. The report does not claim to represent the views of all service users, only those who contributed during the visit.

Who we share the report with

This report and its findings will be shared with the Operational Lead, Care Quality Commission (CQC), MPFT Quality Team and Healthwatch England. The report will also be published on the Healthwatch Stoke-on-Trent website.

Healthwatch Stoke-on-Trent's details

Address:

Commerce House Festival Park Stoke-on-Trent STI 5BB

Website: www.healthwatchstokeontrent.co.uk

Telephone: 03303 130247

Healthwatch principles

Healthwatch Stoke-on-Trent's Enter and View programme is linked to the eight principles of Healthwatch, and questions are asked around each one.

- 1. A healthy environment: Right to live in an environment that promotes positive health and wellbeing.
- **2.** Essential Services: Right to a set of preventative, treatment and care services provided to a high standard to prevent patients reaching crisis.
- **3.** Access: Right to access services on an equal basis with others without fear of discrimination or harassment when they need them in a way that works for them and their family.
- **4.** A safe, dignified and quality service: Right to high quality, safe, confidential services that treat you with dignity, compassion, and respect.

- **5.** Information and education: Right to clear and accurate information that you can use to make decisions about health and care treatment. You want the right to education about how to take care of yourself and about what you are entitled to in the health and social care system.
- **6.** Choice: Right to choose from a range of high-quality services, products and providers within health and social care.
- 7. Being listened to: Right to have your concerns and views listened to and acted upon. You want the right to be supported in taking action if you are not satisfied with the service you have received.
- **8.** Being involved: To be treated as an equal partner in determining your own health and wellbeing. You want the right to be involved in decisions that affect your life and those affecting services in your local community.

Purpose of the visit

The visit was announced and was part of a joint visit with Midlands Partnership University NHS Foundation Trust (MPFT) Quality Standards Assurance visit (QSAV) to minimise the disruption to the service.

Details of the service

The Walk in-Centre is situated on the ground floor of Haywood Hospital, they are open 7am to 10.30pm 7 days a week.

Provider Service and Staff

The Senior management shared that all staff work across Haywood Hospital Walk-in-centre and their satellite site in Leek Minor.

They are currently in transformation for Haywood Hospital to go from a Walk-in-Centre to an Urgent Treatment Centre (UTC), however their Satellite site will remain as a Minor Injuries Unit (MIU).

They have a mixture of Nurses, health care assistants, clinical leads, and receptionists. There are 2 dual trained paediatric nurses, with all staff being trained to Paediatric Intermediate Life Support (PILS). Staff work a mixture of 12.5-hour shifts (7am to 8.30pm or 9am to 10.30pm), and shorter shift patterns are 7am to 3pm and 2.30pm to 10.30pm.

A typical day in the Walk-in-Centre.

7am - the nurse prescriber starts their shift

8am - x-ray starts, patients who arrive before this time must wait.

9am - morning huddle including staff at Leek via video call.

2 practitioners carry out triage, any patients that need urgent assistance get seen by the priority nurse, all patients are seen by follow up nurses.

Patients who have contacted 111, are still triaged, and they are seen within a 2 hour window.

There are other clinicians to support both the morning and afternoon shifts.

In the afternoon there is another huddle.

The last admission into the centre is at 9.30pm

Results of the Visit:

First impressions

There was building work to the left of the building when entering from the car park. The car park at the time of our visit had several parking spaces available but there was a short walk to the entrance of the hospital, however there was a drop off point right outside the entrance of the hospital.

On entering the building, patients were directed to use the 111 self-check-in, however the AR's observed that the only option was in English, this was confirmed by the staff. It was clean, warm, bright, and well-decorated.

There were two waiting areas, the ARs were informed that the outpatients' waiting area on the left-hand side of the entrance into the hospital was used as an overflow waiting area for the walk-in centre, this would change when the building work was completed.

On entrance into the waiting room for the walk-in-centre, there were 2 reception areas, one for the Walk-in-centre and one for x-rays, with waiting areas for both, however several of the patients that the ARs engaged with sat wherever there was a free space. The AR's observed that patients waiting for x-ray mainly sat on the seats near to the x-ray entrance.

Well Lead

The AR's observed that the staff were supported by senior managers and was also reflected on some staff not wanting to progress any further within the

bands as they are happy with the support they are receiving from the senior managers at the Centre, the retention of staff was 93.6% and the management explained that where ever possible staff can choose what shifts they want to work, however it this causes an issue with shifts not being covered the senior manager will discuss this and come to a solution that suits both the staff and department.

All staff cover both sites and flexible working is offered, this supports those that don't drive being able to arrange alternative ways to get to the site that is furthest away from them, this could be car sharing. All staff can claim expenses travelling to and from each site.

Access to Services

Parking was an issue for some patients even though it was free, some were unable to drive, with one patient sharing with the ARs that they had tried a few days earlier and was unable to park, so they went home and even today they had to park off the site of the hospital.

Patients who ARs engaged with explained that for patients that don't drive, the distance could be an issue.

Patients who attend the Walk-in-Centre may be referred to Royal Stoke for further treatments, tests etc.

Safety and Privacy

All the patients that we engaged with felt safe within the centre. There are always 2 members of staff at reception.

The waiting room had a mixture of chairs in both the waiting area and the sub wait area.

The staff are also able to use a computer that they can wheel from room to room if required.

Reception staff expressed that they observe the patients whilst they are in the waiting area and alert the clinical staff if they see any changes.

There is a quiet room for patients who need a quieter space or need to isolate.

When asked about their privacy and safety, patients did not raise any concerns. However, upon speaking with staff, it was brought to our attention that they felt they could not always offer patients complete privacy when presenting themselves at the desk due to noise levels requiring patients and staff to raise their voices in order to be heard.

Communication

Several of the patients that we engaged with expressed that they had been updated on waiting times after being triaged, however there were a small number that expressed that they had not been informed of any waiting times, they were just asked to take a seat. Overall, no-one we engaged with had been waiting for more than 1.5 hours.

Due to the layout of the waiting room and the overflow area, staff were asked how many times they call patients, the staff informed the AR's they are called up to 3 times before marking them as absent.

When a patient has been discharged from the Walk-in-Centre a letter goes direct to GP, Health visitor etc. For patients who need to attend the Emergency Department (ED), the information of the consultation is sent directly to the department.

Several of the patients explained that they used the 'NHS Wait Times' mobile app that updates the waiting times, so they were aware of how long they would be in the centre.

Patients who check in at the 111 kiosks also have to report to reception, the staff informed the ARs that all patients report to reception, however some who have been sent for an x-ray need to report at x-ray reception desk, this confuses patients sometimes. Patients who do not want to use the 111 checks in kiosk can check in at the desk.

The ARs observed that that was a TV in the waiting area that displayed the waiting times, however these were not visible to everyone in the waiting area(s), the information on them was not clear, up to date, or accurate.

For patients who required interpreting services, the staff use an iPad that is linked to language line, including British Sign Language (BSL). They have a diverse range of staff that can also support with some language barriers.

Signage allocated each department with a colour, for the Walk-in-Centre and x-ray department the colour was red. The colour red was thematically used throughout the areas as decorative wall colour. The external walls were painted in blue.

Throughout the visit the AR's observed that the majority of staff wore their name badges, however there was one or two that the AR's could not see a name badge on. The ARs asked the senior management what each of the uniforms represented. We were informed that Health Care Assistants (HCA's) wore blue uniform, the nurses were in grey, and the clinical leads were in maroon.

Refreshments

Several of the patients that the AR's engaged with were aware of the water cooler available in the waiting area but there were no cups for patients to use, the ARs updated the staff as part of the feedback. Only a small number of patients were aware of the vending machine that was available in the overflow waiting area.

One patient explained that due to their health condition they had been guided by the staff on where they could purchase food.

Effective

During the visit, the ARs observed one patient being dropped off by a relative. The patient was checked in at reception, triaged, assessed and sent to the ED as they had a head injury within less than one hour of attending the Walk-in-Centre.

The ARs observed that there were two mask dispensers by the main entrance, and they were empty, however the staff informed the ARs that they had originally been put up due to the mask mandate that was introduced due to COVID-19 pandemic, at the time of our visit there was no requirement for people to wear masks. The dispensers are filled up by Sodexo when it is deemed necessary for patients and people attending the hospital to wear. Patients who wished to wear masks were able to get one from Walk-in-Centre reception.

Patient Voice

The patients can share their overall experience within the centre, they are able to complete a short survey along with a friends and family test.

All the patients that we engaged with as part of the visit were generally happy with the service they had received and receiving good quality treatment in a timely manner.

Patients were able to see the feedback and compliments that were displayed on the noticeboard by the reception.

Conclusion

Overall, the service was well presented and well kept. Patients were triaged within 15 minutes of entering the Walk-in-Centre. Patients were happy with the quality of treatment they had received in a timely manner. There is building work that is currently taking place at the hospital, which when complete will improve the experience of the patients attending the Walk-in-Centre.

Recommendations

Recommendations made from findings	
1	Consider replacing the signage by the water dispenser to explain to patients that cups can be obtained from reception.
2	Consider dating the feedback / compliments that are displayed by the notice board by the reception.
3	Although the service makes great effort to manage expectations by communication waiting times through one of the TVs displayed in the waiting area, due to poor design it does not serve its purpose as well as intended and should be reviewed.
4	The 111 questionnaires only took up a small portion of the screen meaning the text was quite small, there were no clear options on how to adjust text size, background colour, etc. Consider having additional languages and accessibility tools made available at the 111 kiosks.
5	Consider installing post office/bank-style screens and to raise desks at the reception to improve the privacy of conversations taking place.

Provider comment

This report has been shared with Midlands Partnership University NHS Foundation Trust (MPFT) and the managers of the Walk-in Clinic at the Haywood Hospital and invited them to provide the following response to the report and our recommendations:

"Firstly, we thank you for an accurate and informative report, we fully agree with every aspect of your report.

We have taken immediate steps to resolve recommendation 1, and we are working through your other recommendations with our partners in an attempt to further improve the experience of our patients when accessing our service."

The contract to provide the Healthwatch Stoke-on-Trent service is held by **Engaging Communities Solutions C.I.C.**Meeting Point House, Southwater Square, Telford, TF3 4HS



We are committed to the quality of our information. Every three years we perform an in-depth audit so that we can be certain of this.

healthwatch Stoke on Trent

Healthwatch Stoke-on-Trent Commerce House Festival Park Stoke-on-Trent ST1 5BE

www.healthwatchstokeontrent.co.uk

t: 03303 130 247

e: info@healthwatchstoke.co.uk

f Facebook.com/HealthwatchStoke