

# A summary of what you told us about urgent and emergency care services in Staffordshire and Stoke-on-Trent





**Between 23 September and 31 October 2021, the Together We're Better health and care partnership for Staffordshire and Stoke-on-Trent ran a survey and held three workshops about local urgent and emergency care services.**

This was the latest stage in a conversation we started in 2019, when we held a 12-week listening exercise.

Thank you to everyone who took part in this conversation. We received a wealth of comments that will help us to understand local needs and improve health and care services.

This is a summary of the comments we received, and how they will be used to inform future improvements to local services. You can read our **[full report of findings on the Together We're Better website.](#)**



# Why change is needed?

In 2019, we shared the challenges our local urgent and emergency care services face. We still face these challenges in 2021, alongside the extra pressures of responding to COVID-19. They are explained in more detail in our [listening exercise refresh document](#).



Pressures on our workforce – having enough trained, experienced staff to meet the demand



Longer waiting times



Confusion between 'urgent' and 'emergency'



Ambulance waiting times



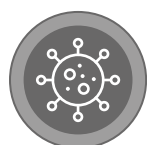
A mix of locations, run by different organisations, offering varying services



Varying health of our population



Rising demand



COVID-19.

Our work to improve urgent and emergency care services was paused in 2020 due to the COVID-19 response. Some of our services evolved during the pandemic and we had to make some temporary service changes. COVID-19 isn't over yet, and we're still having to work in a different way to help deliver safe services.

We are grateful to the staff who worked so hard to keep services running, and to you for being so understanding during the pandemic. It has been challenging for everyone, and now we want to learn from the changes we have made and from the experience of the pandemic so we can continue to provide fair and quality services now and in the future.



# What will be different?

We are still developing our proposals and do not have all the answers yet. However, our clinicians and staff have been helping to design our local approach.

## Developing urgent treatment centres

Urgent treatment centres (UTCs) will bring together the services provided by walk-in centres and minor injuries units, but will also be able to treat more complex cases. They can provide access to specialist care, knowledge and advice with the aim of getting you home. The national standards say they must be open at least 12 hours a day, 365 days a year.

Since our listening exercise in 2019, there is also new national guidance for UTCs that we will need to review as we develop our future services.

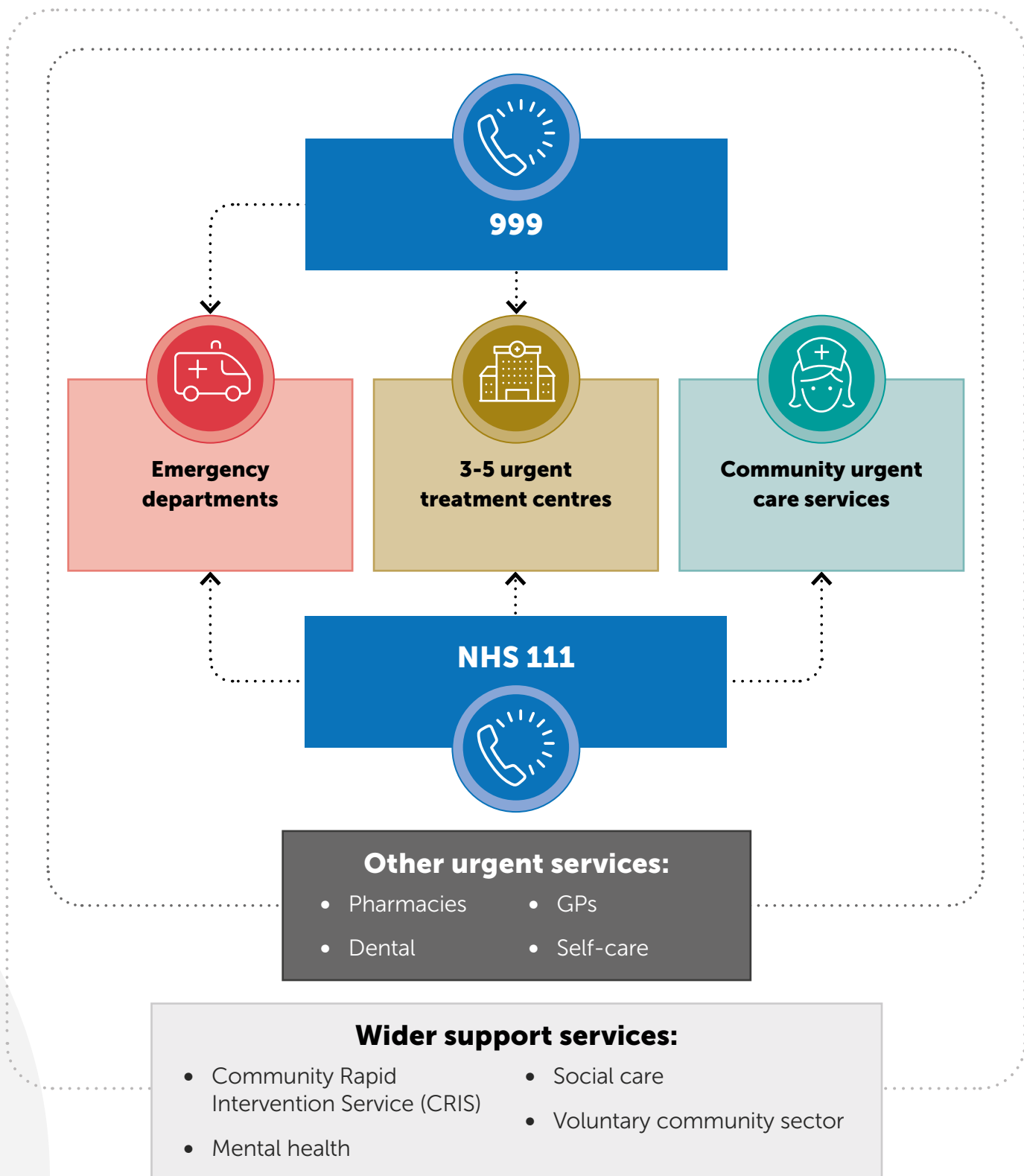
UTCs are explained in more detail in our [listening exercise refresh document](#) and in this [video from NHS England](#).

UTCs cannot work alone, so we need a range of services that 'wrap around' them, offering the right level of support. They need to work in liaison with our emergency departments, which have access to the specialist services, including emergency theatres, anaesthetics, cardiac and stroke services.

We know there is not the demand, workforce, or the budgets available to support UTCs in every community. We need to design a whole system approach, which connects all our services, so they work together as a network. This includes an enhanced community urgent care offer, which helps you access urgent care locally.

We also need to improve access to other services, including mental health and our community teams to offer early support. Sometimes this will be referrals into hospital services, bypassing our urgent and emergency care services altogether.





# What did we want to find out?

## We wanted to understand:



## Who did we talk to?



**428 people** responded to our survey



**1%** responded formally on behalf of an organisation



**88%** were patients or members of the public



**34 people** joined in our online events



**8%** were NHS employees

## Working with communities

We wanted to involve as wide a range of people as possible who use our services.

We contacted local voluntary organisations, service providers, councils, support groups and religious organisations, by phone and email, offering meetings and asking for their help to promote our survey and workshops.

We promoted the survey and events on our website and social media, and we sent out press releases to newspapers, and radio and television stations.



**783** stakeholders engaged with



**3,000+** emails sent



**85** phone calls made

# Your experiences before and since COVID-19

We asked about your experiences of using different services for urgent and emergency care, both before and since COVID-19. You gave us lots of information, and you can [read the full report of findings on our website](#).

We asked people what they felt had gone well, and what challenges they faced when they used urgent and emergency care services.

Many of you had concerns about being able to get the help you needed quickly. However, we were glad to hear that many of you received good care.

Below are the most frequently mentioned comments about each service, before and since COVID-19, with the percentage of respondents who said them.



## Same-day GP

**Appointment booking process needs to be improved**

Before COVID-19: **37%**

Since COVID-19: **32%**



## A&E / Emergency department

**Waiting times for care and treatment are too long**

Before COVID-19: **63%**

Since COVID-19: **42%**



## NHS 111

**Concern about accessing help through NHS 111**

Before COVID-19: **32%**

Since COVID-19: **38%**



## Walk-in centre

**Concern about accessing help through walk-in centre**

Before COVID-19: **32%**

Since COVID-19: **38%**



## Minor injuries unit

**Waiting times were short**

Before COVID-19: **42%**

Since COVID-19: **30%**

At our events, you raised similar concerns about long waits. You also mentioned concerns about travelling distances to hospitals, and lack of services in rural areas and in specific locations.

# Views on the model of care

We asked for your views on the new model of care, which includes creating the new urgent treatment centres in Staffordshire and Stoke-on-Trent.

More than **7 out of 10** said you fully understand the challenges facing urgent and emergency care.

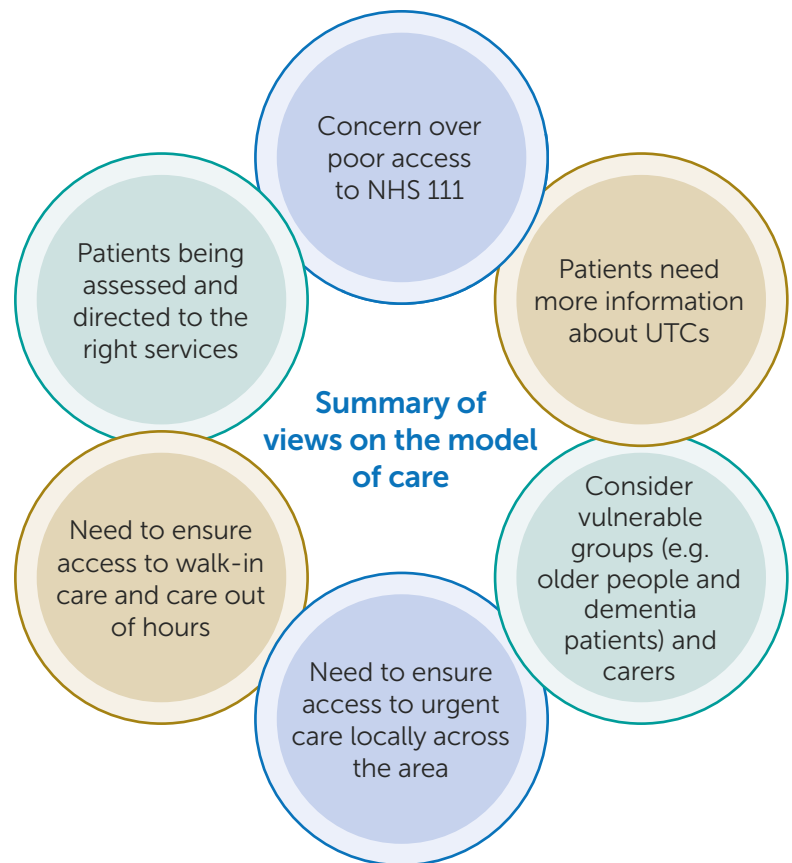
### You would like to see:

- ✓ Better access to alternative services to A&E and GP appointments
- ✓ More GP appointments made available

Around **2 in 3** of you said you fully understand the new model of care.

### You would like to see:

- ✓ Patients being assessed and directed to the right services – by clinically trained staff at A&E, at NHS 111, and by GPs
- ✓ Improved access to NHS 111 – it should be easier to get through, and call-back waits should be shorter



"I think the staff do a great job under the pressures they face. It would definitely ease pressure on a&e if there was a way to check wait times at local urgent care centres and walk ins."

"NHS 111 appears to be referring people into urgent and emergency care most of the time...perhaps even increasing workload unnecessarily."

"After ringing NHS 111 more local knowledge would be helpful. When I rang it was early morning and they wanted me to attend a GP that was the other side of the city, and I was in no state to drive."

"Work needs to be done with local people to educate them – most people locally head to A&E when they can not get a GP appointment for example. Also, GPs need to open to thier patients."



# Your views...

## Your views on delivering services at urgent treatment centres

### How concerned are you about the move to UTCs?

Nearly **half** of you were concerned or very concerned

"I can see that something needs to change, so this structure may work better than the current one. There needs to be actual follow through though and not just another way to pass patients from service to service."

### Are there specific groups whose needs we should think about when we develop UTCs?

More than **1 in 3** asked us to think about the needs of older people

Nearly **1 in 4** asked us to think about people using public transport

"Elderly people who do not understand how to use these centres or not be able to get to them. Locations should be easy to get to."

## Your views on where UTCs should be placed

### When thinking about where UTCs should be located, what are the most important things to consider?

**More than half** of you said we need to make sure that locations of UTCs are accessible

More than **1 in 4** of you said we need to make sure that appropriate parking is available

"Ease of access by all methods – on foot, those using public transport and private transport. Must be substantial appropriate (ideally free) parking near by."

### How far would you be willing to travel to a UTC?

Overall average distance you would be willing to travel

**6.5**  
miles

### How long would you be willing to travel for?

Overall average time you would be willing to travel

**18**  
mins

## What else should we think about when planning UTCs?

### Your main suggestions were:

Nearly **1 in 5** of you asked us to provide more services locally

Around **1 in 10** of you asked us think about improved public transport access

Around **1 in 10** of you asked us to think about the need for adequate staffing

"Centres should be centrally located, evenly distributed and be at a site where access and parking are not an issue that patients have to worry about."

# Next steps

## Thank you again for taking the time to tell us your views.

Our clinicians and staff are working to develop our proposals for local urgent and emergency care. In line with the national plan, this includes creating UTCs, which will replace the services currently provided in minor injuries units and walk-in centres.

### We are now inviting local people to be part of our next stage of involvement.

We are planning to hold an online reference group early in 2022, made up of local service users, people who support service users, and staff. We aim for the groups to represent the local population as closely as possible.

The groups will look at the proposals that we are currently developing. The comments and discussions from these will build on the information we have already gathered from our surveys and events.

**We are in the early stages of developing proposals for future services, and this work is likely to take several months. If we need to make substantial changes, there will be further opportunities to get involved. We will keep you informed about our plans as we move forwards.**

## Contact us



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