

YOUR VISIT TO THE ACCIDENT AND EMERGENCY (A&E) DEPARTMENT

Healthwatch Worcestershire is an independent organisation. We find out what people think about health and care services. We use this information to tell those who run the services how they can be improved.

We are carrying out this survey to understand the reasons people attend A&E. Taking part will not interfere with the time that you are seen or the treatment you receive. Health services will use this information to understand the use of the A&E Department and to help people find the help they need, when they need it.

The information you provide is confidential, except that anonymised quotes may be used. Personal identifying information will not appear in any publications resulting from this survey.

from	this	survey.						
	_	ee that I (as indicat			ne purpose of tl	nis survey and consent to the use of		
	WRF	ł		ALEX	DATE	TIME (AM / PM / EVE)		
Q1		Self Child/Yo	ung P	erson Ur	ding A&E toda nder 16 state relationsh			
Q2	we		for he	elp with (9)		LTH SERVICE that you contacted, or ent's condition TODAY?		
Q3	Before coming to the A&E department, which health service did you contact or go to, for help with your/the patient's condition? Select ONE only - if more than one option applies, select the last one you contacted, or went to, before A&E Pharmacist NHS 111 online service NHS 111 telephone service My GP practice GP out-of-hours service Hospital Department (e.g. Cancer, Orthopaedics, Heart etc.) Dentist Other health professional (e.g. optician, physio, nurse) Minor Injuries Unit 999 emergency service Other (please specify below)							



Q4	Did the service that you contacted refer you / tell you to go the A&E Department?							
	☐ Yes (Go to Q5) ☐ No (Go to Q13)							
Q5	Which service referred you to A&E? Select <u>ONE only</u> - if more than one option applies, select the <u>last one</u> you contacted, or went to, before A&E							
	 □ Pharmacist (Go to Q13) □ NHS 111 online service (Go to Q6) □ NHS 111 telephone service (Go to Q6) □ My GP practice reception or administrative staff (Go to Q8) □ My GP (Go to Q8) □ Another health professional at my GP Surgery (Go to Q8) □ GP out-of-hours service (Go to Q8) □ Hospital Department (e.g. Cancer, Orthopaedics, Heart etc.) (Go to Q13) □ Dentist (Go to Q13) □ Other health professional (e.g. optician, physio, nurse) (Go to Q13) □ Minor Injuries Unit (Go to Q13) □ 999 emergency service (Go to Q13) □ Other (please specify below) (Go to Q13) 							
Q6	Did NHS 111 book you a time slot/alert someone you were attending A&E today?							
	 □ NHS 111 booked a time slot (Go to Q7) □ NHS 111 alerted A& E and they were expecting me (Go to Q13) □ NHS 111 said they would alert A&E but they were not expecting me (Go to Q13) □ NHS 111 didn't book a timeslot or alert A&E (Go to Q13) 							
Q7	How long after your NHS 111 allotted timeslot did you wait before you first spoke to a nurse or doctor?							
	 □ 0 -15 minutes (Go to Q13) □ 16 - 30 minutes (Go to Q13) □ 31 - 60 minutes (Go to Q13) □ More than 60 minutes (Go to Q13) □ Don't know / can't remember (Go to Q13) 							
Q8	Did a GP (your own or an Out of Hours GP) or another health professional based at your GP surgery make an arrangement with the A&E Department before they sent you here today? (e.g. contacted the hospital, gave you a letter)							
	☐ Yes (if YES please state below how this arrangement worked for you)							
	□ No							
	(Go to Q13)							



	Select <u>ONE</u> only (If Yes to Q2)					
	 I need an X-Ray or other diagnostic test My injury or illness is too serious to be dealt with outside of the hospital I thought I would have to wait too long for an ambulance I didn't think I would be seen quickly enough by my GP I'm not registered with a GP Had/waiting for an outpatient's appointment or hospital treatment but wanted to be seen earlier Had medical treatment/surgery and told to go to A&E if I felt unwell Told to come to A&E by someone else (e.g. friend/relative, school, workplace) (record below NOTE if medical professional TODAY go back to Q2) Following an internet search of my symptoms Most convenient option for me (near to me, open when I need it) Unsure where else to go for advice or treatment Visiting the area Other/ who sent the patient to A&E (please specify below) 					
Q10	Are you aware of the "Think NHS 111 FIRST" initiative?¹ Yes No Are you aware of the "HELP US TO HELP YOU" NHS 111 online campaign?					
	☐ Yes ☐ No					
Q11	Are you aware of Minor Injuries Units (MIU) in the County? (These are located in Bromsgrove, Evesham, Kidderminster, Malvern and Tenbury) Yes (Go to Q12) No (Go to Q13)					
Q12	What is the MAIN reason that you did not visit a Minor Injuries Unit (MIU) today? (select ONE answer only)					
	 □ Not sure if a MIU could treat the illness/ injury I attended A&E with □ Not sure that I could get an X-Ray or other diagnostic test at a MIU □ Thought the MIU would send me to A&E/main hospital anyway □ Too far away from me □ Not sure when it is open □ Not open when I need it □ Other (please specify below) 					

What is the MAIN reason that you came to the A&E Department today?

Q9

¹ **Think 111 First** asks people to contact 111 first if they are thinking about going to A&E for an urgent, but not serious or life-threatening, health problem. **Help Us to Help You** explains NHS111 online services



ALL RESPONDENTS

☐ Don't know

Q13	If you had a GP appointment today or tomorrow, either with your own GP or with an Out of Hours doctor, would you have still attended A&E today?									
		☐ Yes (Go to Q14) ☐ No (Go to Q15)								
Q14	lf \	/ES, why is this?								
	☐ It is an accident/ emergency / my condition has deteriorated									
	☐ Thought the GP would send me to A&E/Hospital anyway									
		☐ Past poor experience with GP								
		A&E is more convenient t	o me	e (e.g. nearer, open whe	n I n	eed it)				
		Other (please state)								
Q15.	_ Is y	our/the patient's illness	or i	njury today related to	the	following?				
	Injury to muscle/ joints			Back pain or injury Breathing problems Eye problem		Head injury Chest pain Stomach /digestive				
	١	Wounds, bruising or cuts		Rash/	issu	Burn				
	Mental health Headache		sor	eness/swelling Fever Just feeling unwell		Sore throat or cough Other condition				
Q16	16 Before your visit to A&E today, had you previously been to the same A&E department about the same condition or something related to it?									
		Yes, within the previous	weel	<						
		Yes, between one week a	one month earlier							
		Yes, more than one mont	h ea	rlier but in the last 6 mo	nths					
	□ No									
		Don't know / Can't reme	mbe	r						
Q17 Are you currently under treatment by a hospital for the same condi something related to it, that you attended A&E for today?										
		Yes No Don't know								
Q18	Are you currently on a waiting list for hospital treatment for the same condition, or something related to it, that you attended A&E for today?									
	☐ Yes ☐ No									



Q19 Are you aware of the Handi Paediatric app? The app provides advice or to manage common childhood illnesses and advises on whether to treat the home, by GP appointment, or to go to A&E.											
		Yes No Not relevant	to me								
	_	not retevant	to me								
Q20		Would any of the following have made a difference to your decision to visit the A&E Department today? Select <u>up to THREE answers</u>									
	 □ Better information about the services offered by Pharmacies □ Better information about alternative health services to A&E (e.g. Minor Injuries Unit) 										
 Better information about how the NHS 111 service can help me (e.g. me to urgent care services, health professional call back) Easier access to NHS 111 telephone service (e.g. got through / called more quickly) 											
	 Easier access to GP appointments Easier access to hospital treatment/Outpatient appointments Other types of Urgent Care closer to me (e.g. Minor Injuries Unit or Walk In Clinic) 										
		☐ Real time information about waiting times at A&E and MIU									
	_	■ Better information about NHS information / apps that would help me decide whether I needed to go to A&E									
☐ No, I am in the right place											
	☐ Other (please specify below)										
know we h	who	o we have ga received.	thered feedb	oack from and	better under	ı. It just helps us stand the feedba THE PATIENT					
Q21	Plea	se tell us wh	nich age cate	egory you are	in?						
□ 0	-1	☐ 2-5	<u> </u>	☐ 14-17	□ 18-24	□ 25-34					
□ 35	5-44	□ 45-54	□ 55-64	□ 65-74	□ 75-84	□ 85+					
Q22 '	Whic	ch of the fol	lowing optio	ns best descri	ibes how you	think of yoursel	f?				
	ale	☐ Tr	ans Male	☐ Non-bina	ıry 🔲 In	another way					
☐ Female ☐ Trans Female			☐ I prefer not to say								



	Q23 Where do	you liv		worcestershire						
	☐ Worcester C	ity 🔲 Wychavon		☐ Wyre Forest ☐ E	omsgrove					
	Redditch		☐ Malvern Hills	Outside of Worcesters	shire					
	Q24 APPROXIM	ATELY	what was the distar	nce you travelled to the A	A&E Department?					
	☐ Under 1 mile	□1 -2	miles 🗌 3 - 5 miles	☐6 - 10 miles ☐11 - 20	miles 21+ miles					
	Q25 Do you ha	ıve a di	sability?	Yes						
	If yes, please s	elect fr	om the following:							
	☐ Learning disa	bility	☐ Autism Spectru	m Condition 🔲 Visual	impairment					
	☐ Mental Healt	h	☐ Hearing Impair	ment Physic	al disability					
	☐ Long term co	ndition								
	026 Please se	ect voi	ır ethnic backgrou	nd:						
Vhite	QZO FIEdse sei		ethnic groups	Asian / Asian British	Black / Black British					
] British] Irish			e and Caribbean e and Black African	☐ Indian ☐ Pakistani	☐ African☐ Caribbean					
	rish Traveller	☐ White and Asian		☐ Bangladeshi	☐ Any other Black:					
] Europea] White o			other mixed:	☐ Chinese ☐ Any other Asian:	☐ Arab/any other group					
	Q27. Is English	your f	irst language?	Yes No (please	state)					
	Q28. Which of	the fol	lowing best descri	bes how you think of yo	urself?					
	☐ Heterosexual / Straight ☐ Gay or lesbian ☐ Bisexual									
	☐ Prefer not to say ☐ Other sexual orientation not listed									
	Q29. Which of the following reflects your housing situation									
	☐ Owner Occupier ☐ Private Tenant ☐ Social / Housing Association Tenant ☐ Sharing or Lodging ☐ Supported Accommodation ☐ Temporary Accommodation									
	\square Leaving care \square Rough Sleeping \square Student accommodation									
	\square Living at home with family \square Other (please state)									
	-		•	ons on behalf of the pat	ient, do you					
consider yourself to be an unpaid carer? \square Yes \square No										