



How did you get here?

**Responses to those arriving at the
Croydon University Hospital
Accident and Emergency Department
November 2020**

Findings in brief

Over 50% of people use A&E as a first choice.

62% were sure where to go when they had an illness or injury when they chose A&E.

60% used GP services and majority had a positive experience.

Severity of injury was main reason for attending A&E after first contact.

15% of people attended A&E as there were no GP appointments, or GP was busy or closed.

Customer journeys are varied and individual and did not follow pathway.

Recommendations in brief

Realigning the pathway to reflect real patient use.

Communicate alternatives to A&E with an emphasis on speed of response.

GPs need to focus improving capacity so that people go to A&E who need to go there.

Understand more about influence behind choices.

Communicate the revised pathway with clarity.

Executive Summary

Between July and August 2019, Healthwatch Croydon asked those who were visiting Croydon University Hospital's Accident and Emergency department how they arrived there. We wanted to understand the journey they took to get to A&E and what helped inform their choices. This would help gain insight to support improved working between primary and secondary care on an area of health services used by a significant number of Croydon residents every year.

These are our findings based on the survey of 364 service users

- **Over 50% of people use A&E as a first choice:** They saw A&E as their first choice because they needed to see something quickly (89%), their illness was too serious to be seen outside A&E (72%), attending hospital was most convenient (65%) and 50% found it difficult to get an appointment with their GP. (*see page 17*).
- **62% were sure where to go when they had an illness or injury when they chose A&E:** A majority knew where to go and still came to A&E and found it convenient and knew they would be quickly seen. (*see page 17*). Almost everyone that was surveyed felt that they needed to see someone quickly for their illness or injury. Parents surveyed felt that their child's condition was too serious to be seen outside of hospital. (*see page 23*).
- **For those who did not choose A&E first, 60% used GP services and the majority had a positive experience:** 111 phone and GP Hubs were about the same, with a small amount of negativity about 111. Despite pharmacy having a role in the pathway, very few used this service, or 111 online. (*see page 31*).

- **Severity of injury was main reason for attending A&E following first contact:** Almost 70% of people were advised to attend A&E due to the severity of illness or injury, with the referrals coming from the GP and NHS 111. *(see page 30)* There was a range of issues which people feel they need to attend A&E with, some of which could have been managed at GP surgery or GP hub. How can the pathway be better communicated? *(see page 12)*.
- **15% of people attended A&E as there were no GP appointments, or they were busy or closed:** *(see page 30, 32-33)*. Most people agree that it is difficult to get a GP appointment apart from those between 19-25 and over 65. *(see page 23)*.
- **Customer journeys are varied and individual and didn't follow pathway:** For those who did not go directly to A&E, their choices are varied, but did not always follow the pathway of calling 111, GP or GP Hub and then A&E. Under 18s contact one other service at most. Young adults and over 65s are more likely to contact two or more services. *(see page 21)*.
- **Age and gender may have an influence on choices:** 19-25 year olds are more likely to contact 111 than their own GP first, 26-40 year olds are more likely to contact their GP before attending A&E. *(see page 23)*. Those looking after under 12s were the surest where to attend when they required care. Over 40% of those 19 to 25 years old were unsure where to access care. *(see page 22)*. More males than females prefer to go directly to hospital and strongly agreed that hospital was most or more convenient. More males strongly agreed they wanted to see someone quickly and saw their condition as too serious to be seen elsewhere. *(see page 24-28)*.

These are our recommendations:

- **Realign the pathway to reflect real patient use of services:** Service providers need to understand patients' access and use of services to design a pathway that works for patients as well as clinicians.
- **Communicate alternatives to A&E with an emphasis on speed of response:** Many people come to A&E because they know they will receive a speedier response than other methods. This may not be the case, so communication should focus on the best place to get a speedy response.
- **GPs need to focus improving capacity so that people go to A&E who need to go there:** GPs were mostly well received, but a significant number cannot get appointments, or found services busy or closed. Either through individual surgeries or signposting to GP urgent care hubs, work needs to be undertaken to improve capacity, so that only those who go to A&E should be those who need to go.
- **Understand more about influence of choices:** Some choices of whether to go straight to A&E seem to be reflected by age or gender. More insight is needed to understand different peoples' needs based on age, gender or, whether they have an illness or disability.
- **Communicate the revised pathway with clarity:** Clearer explanation on the best way to access services understanding patient experience and reflecting this in the messaging.

1 Background

1.1 Context

About Healthwatch Croydon

Healthwatch Croydon works to get the best out of local health and social care services responding to the voice of local people. From improving services today to helping shape better ones for tomorrow, we listen to people's views and experiences and then influence decision-making. We have several legal functions, under the 2012 Health and Social Care Act.

Context

Accident and Emergency services (A&E) are one of the most used services by residents after GP services. In Croydon, Accident and Emergency services is within Croydon University Hospital. It has had significant pressure for some time to meet demand and provide an effective service.

There was a full redevelopment of facilities with the launch of the new department which opened in November 2018. Even with the new department, demand was still increasing, due in part to the perception of the new facility would deliver enhanced treatment. This increased the popularity of the new facilities - indeed demand increased.¹

We had discussions with the Senior Management Team at Croydon University Hospital on how understanding about patient experience of the new department would help aid their delivery strategy. We also worked with the NHS Croydon Clinical Commissioning Group about the role that primary care may have in supporting this. We agreed that two insight projects would come out of this:

¹ Croydon Health Services NHS Trust Board Papers, July 2019, page 43.
<https://www.croydonhealthservices.nhs.uk/download.cfm?doc=docm93jjm4n1725>

One how people accessed A&E, which is the subject of this report and the experience of A&E once they have completed their time using the service (which is a separate report to this).

Croydon has a network of suppliers that residents may take on their journey to A&E. They may visit one of 55 GPs, they may ring NHS 111 or visit one of three GP-led Urgent Care Hubs in East Croydon, Purley, New Addington and a fourth Urgent Care Centre based in Croydon University Hospital on London Road. These are delivered by the Croydon Urgent Care Alliance made up of Croydon Health Services NHS Trust, Croydon GP Collaborative (a consortium of Croydon GPs) and service deliver AT Medics.

The aim of Croydon's new GP Hubs are to make it easier for people in the community to access the right care closer to home. The Hubs offer booked appointments with a GP available from 8am to 8pm, seven days a week. Walk in appointments are available at GP Hubs but patients may need to wait longer.² It was expected that patients would go to these hubs rather than A&E unless they needed care that A&E provides, but there is confusion. NHS England and Improvement suggests this is due to different names for the same facilities.³

Aim

The aim of this insight is to understand more about the decisions and pathways people took that brought them to A&E. We understand how busy each individual part of the urgent care system is in isolation. We do not fully understand a citizen's journey into Croydon A&E.

By asking people while they were sitting in A&E to tell us how they got there, we could gain some insight of the journey they took. This would help provide insight to both the Croydon Health Services NHS Trust who deliver the A&E service and NHS Croydon Clinical Commissioning Group who commission services and that support A&E including primary care and urgent care centres and GP surgeries as

² Croydon Health Services (2020) <https://www.croydonhealthservices.nhs.uk/croydon-urgent-care-alliance/>

³ NHS England (2020) <https://www.england.nhs.uk/urgent-emergency-care/urgent-treatment-centres/>



well as NHS 111. This research helps us understand which services people contact prior to attending A&E in Croydon and the reasons why their needs could not be met at that service.

1.2 Rationale and Methodology

We spent 44 hours from 15 July to 11 August 2019, mostly afternoons but some mornings and one weekend.

Sample size:364.

Limitations: We offered postcards to gain insight from attendees when we were not undertaking outreach, but these were not adequately distributed.

Coding challenges: We included other under illness even though we had a comprehensive list of conditions. Postcode or geographical area quite varied as well and needs further analysis.

Method

We needed to ask people who were currently in A&E the way they had accessed the service. We met services users in the waiting area at A&E and asked the following questions:

1. Who are you here for?
2. How old is the person who is unwell/ injured?
3. What illness or injury brought you here today?
4. How many different services did you contact before your arrival at hospital today? For example, your own doctor (GP), NHS 111, 999, Pharmacy, GP Hub. *

5. For those using hospital first: To help us understand why people choose hospital as the first option, please can you rate the following:

- I am unsure where to go for advice when I have an injury or illness.
- Attending hospital is most convenient for me when I am unwell or injured.
- I needed to see somebody quickly about my injury or illness.
- It is difficult to get an appointment with my GP.
- My injury or illness is too serious to be dealt with outside of the hospital.

Is there anything else that influenced your decision today?

6. Is this the only service you used today?

For those that went somewhere first:

7. Which service did you contact first? *

- My GP (Doctor)
- Pharmacy
- 111 (phone)
- 111 (online)
- 999
- GP Hub
- Other (please specify):

8. What was your experience of using this service? *

9. Why did you choose to go to hospital after contacting this service? *

- I was unable to contact that service because it was too busy or closed.
- I was advised to come to hospital because there were no appointments.
- I was advised to come to hospital because of the severity of my illness or injury.
- I was not happy with the advice/treatment from that service.
- It was more convenient to attend the hospital.
- Other (please specify):

10. Was this was the last service you contacted before coming to hospital today? *

Questions 7-10 repeated for second contact, third contact and fourth contact.

Limits of the research

- We could only speak to people at the time we attended. While we tried to distribute cards to encourage people to reply on their phones, we received very few responses. The cards were not adequately distributed at times.
- We spoke to people in process of being seen and so the focus was on their journey to A&E. Where they refer to particular conditions, these may not have been fully explored or diagnosed.
- It took place over one month between July and August 2019 and so responses may reflect the particular conditions of this time.

2. Insight results

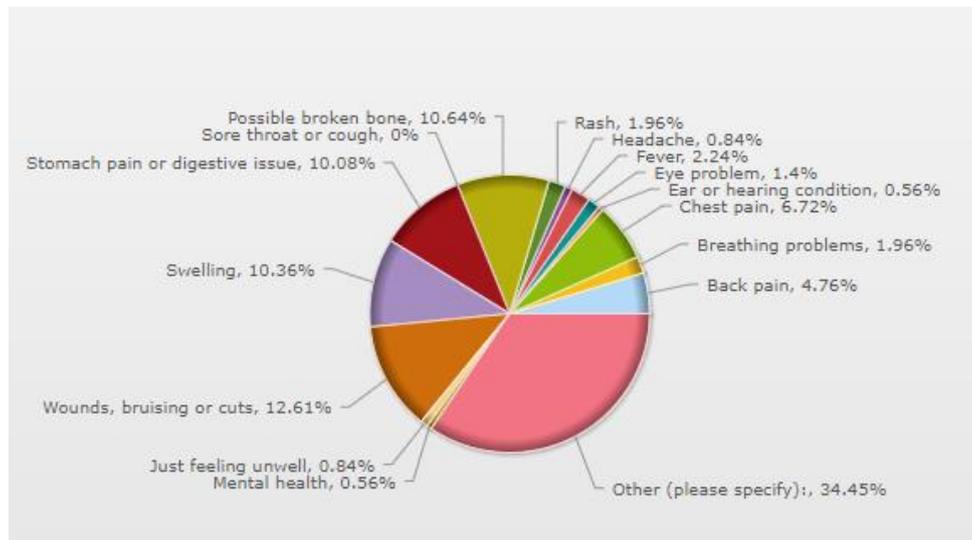
2.1 What illness or condition brought you here?

- We asked people when they were waiting in A&E reception awaiting treatment what they were here for. It may be that their diagnosis had not yet been received. A limit here is that we do not know the outcome. All these responses are from patients and so we cannot assess the severity of their condition or whether they should have come here.
- While it was clear that some people were here for the kind of issues that would be expected at A&E - broken bones, chest pain, swellings, and wounds. Other issues such as digestive issues, minor injuries might have been solved in urgent care, GP or even pharmacy settings such as bad circulation, earwax problem. Some also had issues following operations while others had mental health issues.
- What is shown is the diversity of issues and crucially how residents should decide to respond based on what they know.

3. What illness or injury brought you here today?			
		Response Percent	Response Total
Back pain		4.76%	17
Breathing problems		1.96%	7
Chest pain		6.72%	24
Ear or hearing condition		0.56%	2
Eye problem		1.40%	5
Fever		2.24%	8
Headache		0.84%	3
Rash		1.96%	7
Possible broken bone		10.64%	38
Sore throat or cough		0.00%	0
Stomach pain or digestive issue		10.08%	36
Swelling		10.36%	37
Wounds, bruising or cuts		12.61%	45
Just feeling unwell		0.84%	3
Mental health		0.56%	2

3. What illness or injury brought you here today?

		Response Percent	Response Total
Other (please specify):		34.45%	123
		answered	357
		skipped	7



- Responses recorded under Other include: Accident; Achillies (sic); Anemia (sic); Back pain possibly connected with heart problem; Bad circulation; Bladder trouble and back pain; Blood pressure; Blurred vision and slurred speech; Bone issue; Broken toe; Car accident; Concerned about pregnancy; Cut off fingers Dizziness (3 times); Dizziness, nauseous, difficulty breathing; Ear problem; Elbow pain; Eye problem/ pressure in head; Face palsy; Febrile seizure; Fell down from ladder; Fell down, old injury; Fistula Foot (2 times); Had seizure; Hand pain; Hand trauma; Head (2 times); Head injury; Head pain; Headache, vision problems; Heart problems; Heart rate and palpitation is very high; Hurt wrist; Infection (2 times); Internal bleeding; Joint pain; Kidney stone; Knee injury; Knee problem; Leg pain (4 times); Leg pain nerve pain; Mental; Mental health (2 times); Mental illness; Neck pain cant move; Neurological; Ongoing illness; Pain in abdomen; Pain In elbow; Pain in my leg; Pain on the upper arm; Pains all over; Palpitations; Possible insipidus diabetes; Possible TIA; Post operational paint perinal (sic) abcess; Pregnant experiencing spotting; Prostate; Q13 weeks pregnant with abdominal pains; Rash; Ribs; Right side pain; Saw (sic) throat Selulitus (sic); Severe Heel Pain; Shortness of breath; Shoulder; Sore on ankle; Stomach pain & back pain; Stomach pain as well; Suspected infection referred by GP; Swelling fluid knee; Take out stiches; Thumb seems crack the bone painful; Unwell child; Urine; Uterus; problems; Virgina (sic); Vomited blood; Wrist swelling; Xray (2 times)

There were also some descriptions:

“Lots of bleeding.” “injury on face.”
“swelling in leg and skin peeling after holiday.”
“Operation in the throat.”
“Asthmatic patient.”
“Xtray relating to toe.”
“More cramps in body , legs and waist region.”
“Pregnancy.”
“Possible broken toe.”
“Injury in the hand.”
“Operation on head.”
“Possible broken my arm.”
“Had a lower back pain and wanted to get a proper diagnosis.”
“Tripped over and hurt my shoulder. Awaiting xtray results.”
“Feeling pain in the right arm.”
“Redo cast. Very painful.” “Inhaled chemicals . Irritated throat.”
“Fell down and hit thumb.” “Cut finger.”
“Crohns.” “Fell on the floor . Missed a chair and fell on the floor.”
“Severe stomach pain.” “Cut a hole in hand.”
“Am 92 here to Have my leg dressed There shld be ruled for older people like us.” “Ear full of wax can hear properly.”
“Kidneys.” “Fall affected testicles. Very uncomfortable.”
“Strong back pain all the way to legs, headaches. Cant walk , feeling really weak.”
“My daughter had very high temperature of 40.3 degrees and had a febrile seizure.”

“Slipped in the bathroom and cut my elbow. Had 39 stiches was toLd to come back because it's not healing properly.”

“Bowel problems was om antibiotics.”

“Swelling of knee preventing knee bending.”

“Possible dislocated bone.”

“School rang me child is not well, skeepy, lethargic. recently was on antibiotics, so was not sure, rather to bring her in to be checked as child is SEN non verbal.”

“Possibility of leg broken.” “Has rashes.”

“Sprained finger.” “Fell from the cot.”

“Chest infection.” “Very weak eight high temperature.”

“Chesty cough.” “High tempersture (sic).”

“Injury with finger.” “Suspected jaundice.”

“Fell down at gymnastics.”

“Sliced the end off my finger and it wouldn't stop bleeding.”

“Pregnancy.” “Had a surgery few weeks ago it's now infected.”

“To get dressing redone after minor procedure.”

“Call to come in re negative blood results.” “Swelling of big toe.”

“Had an operation on my foot now have server (sic) pain in it.”

“Fell down stairs, poss foot fracture.”

“Allergy also stress.” “Lumps in eye.” “Can't use my foot.”

“Infection to the thumb.” “Mixture of things.” “Bite wound.”

“Flank pain. “Allergy.”

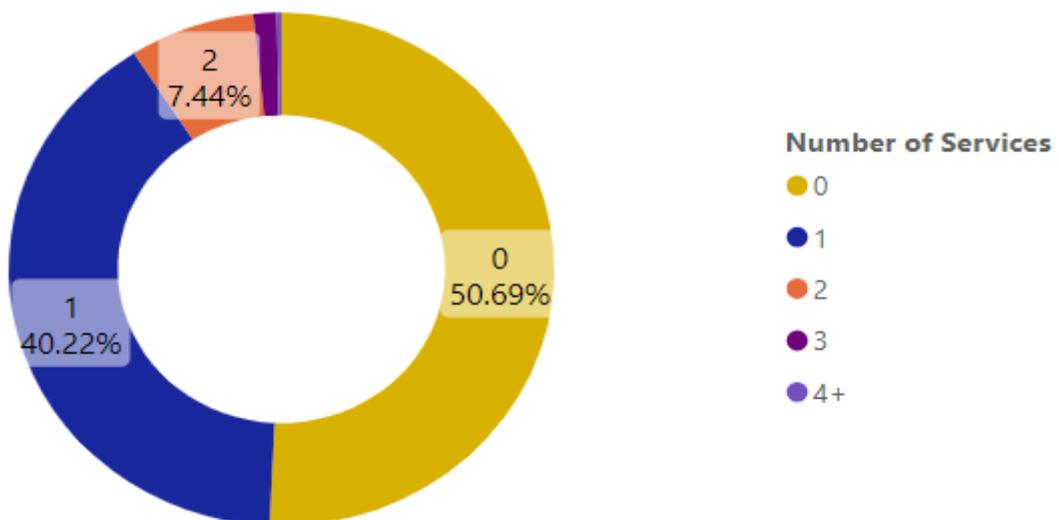
“Cuh wrote to me inviting me for x ray. I have been here since 1pm there has been no communication as to how long I will be. It has been three hours. I'm appalled. I'm not l'll with an emergency.”

“And headache.”

2.2 How many different services did you contact before your arrival at hospital today? For example, your own doctor (GP), NHS 111, 999, Pharmacy, GP Hub.

- We asked this question to understand the journey more that patients took to A&E.
- Over 50% had arrived at A&E having not contacted anyone else, just over 40% had contacted one other, 10% contacted two or more.

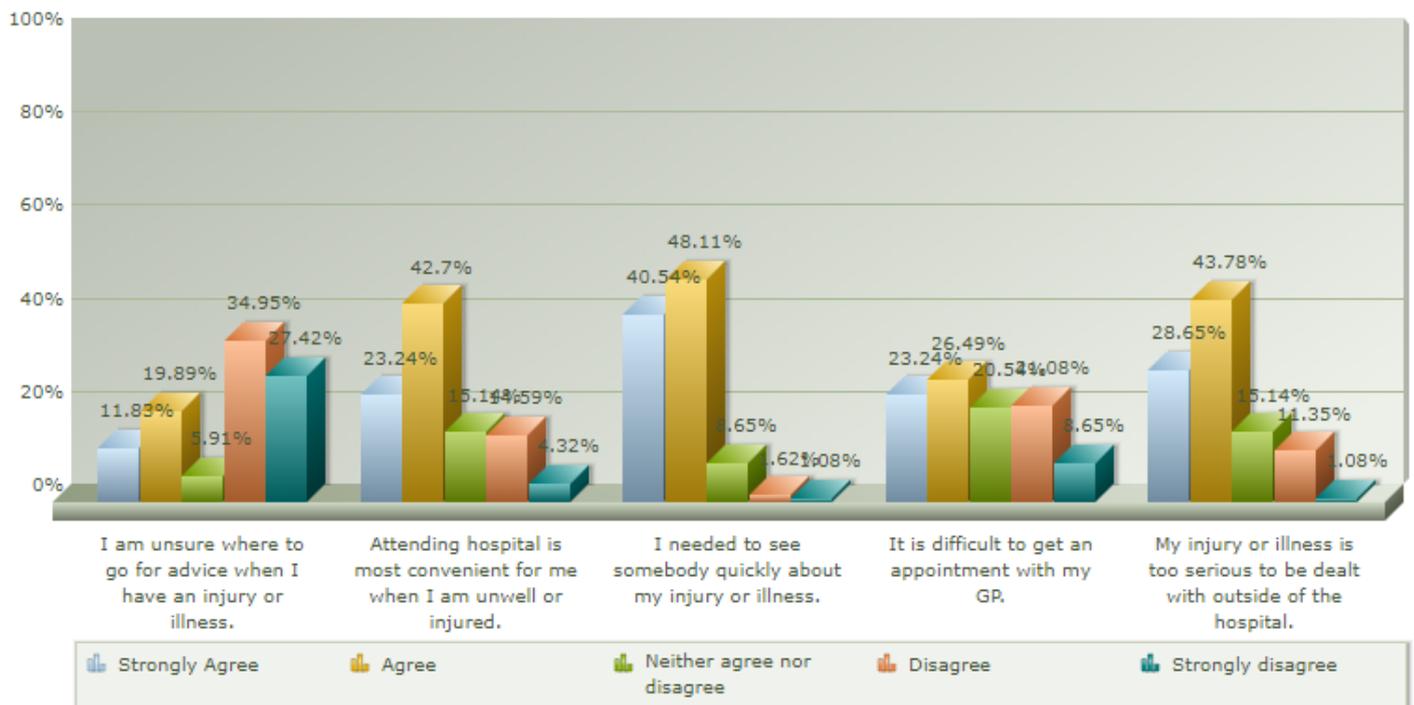
4. How many different services did you contact before your arrival at hospital today? For example, your own doctor (GP), NHS 111, 999, Pharmacy, GP Hub.			Response Percent	Response Total
1	0 - This was the first place I have contacted		50.69%	184
2	1		40.22%	146
3	2		7.44%	27
4	3		1.38%	5
5	4+		0.28%	1
			answered	363
			skipped	1



2.3 Reasons for choosing hospital as first option

We asked why people chose A&E as their first option.

5. To help us understand why people choose hospital as the first option, please can you rate the following:						
	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Response Total
I am unsure where to go for advice when I have an injury or illness.	11.8% (22)	19.9% (37)	5.9% (11)	34.9% (65)	27.4% (51)	186
Attending hospital is most convenient for me when I am unwell or injured.	23.2% (43)	42.7% (79)	15.1% (28)	14.6% (27)	4.3% (8)	185
I needed to see somebody quickly about my injury or illness.	40.5% (75)	48.1% (89)	8.6% (16)	1.6% (3)	1.1% (2)	185
It is difficult to get an appointment with my GP.	23.2% (43)	26.5% (49)	20.5% (38)	21.1% (39)	8.6% (16)	185
My injury or illness is too serious to be dealt with outside of the hospital.	28.6% (53)	43.8% (81)	15.1% (28)	11.4% (21)	1.1% (2)	185
					answered	186
					skipped	178



Here is what we heard:

- **Not sure where to go:** Over 30% were unsure where to go, but 62% were sure where to go when they had an illness or injury when they chose A&E.
- **Convenience:** 65% found hospital strongly agreed or agreed it was convenient with only 20% finding it inconvenient.
- **Be quickly seen:** Over 88% chose the hospital because they would be seen quickly.
- **Difficulty with GP appointment:** 49% had difficulty with accessing a GP.
- **Injury too serious:** 63% felt their injury was too serious to be dealt outside hospital but curiously 11% knowing that their injury was not serious enough, but they still turned up.

This throws an interesting challenge around communication alternatives to A&E. A majority knew where to go and still came to A&E and found it convenient and knew they would be quickly seen. Issues with GP appointments added to the decision making with half of respondents. It shows that despite the waiting times, A&E is still seen as the most accessible service.

We also asked what might have influenced their decisions:

“Advice from family members. You experience to a GP on a previous occasion -waited 2.5 hours and nobody saw me. I left before seeing anyone as I had to go to work. Second time - saw someone, they listened to my complaint, printed paper on exercise - didn't scan, didn't xray, didn't give painkillers.. The pain had continued for the last 6 weeks I am suffering moving, sitting, walking, climbing. North Croydon Medical Practice.

“Resident came to A&E over the weekend and was given antibiotics, but the swelling has not gone down on arm, so have come again after the advice from the doctor.”

“Husband has been in pain for three weeks.”

“Lots more nicer.”

“The services have improved especially the accident and emergency unit . Waiting period is too long especially for elderly people.”

“Service are good.”

“I have an appointment following an accident,”

“Eldridge road in longer a walk in .”

“Came here as most appropriate to my needs.”

“The nurses used to treat patients quickly . But now it takes long and patients have to wait.”

“Having problems with my ears. Seems the wax is pushed in. My ear was painful, bleeding . Have glaucoma. My ear affects my hearing.”

“Coming to the hospital makes alot of difference for me .”

“Nhs website.” “Child with special needs on verbal and allerted by school.”

“The pediatric triage and the GP have influenced my decisions been here today.”

“Employer sent the patient to A&E.”

“Because resident can't get a doctors appointment.”

“I have been having severe pain in legs, and chest pain for a number of weeks. I consider very urgent.”

“Working away from home.” “Advised by NHS helpline.”

“Mum is a nurse, suggested here.” “I was home alone.”

“So inconvenient must be seen.”

“GP can take three weeks.”

“Close to home, knew I'd be seen, been suffering for a month.”

“Suspected fracture, took medical advice from doctor who referred me to Purley originally, then it was pointed out it was a fracture . Doctor said A&E.”

“Broken bone not GP matter.”

“The emergency department is easy to access and ask help from

“Having a very bad painful hip and pins and needles in your legs>”

“Would not use hospital for illness unless life threatening, questions not relevant.”

“I was requested to come here.” “No choice but to attend.”

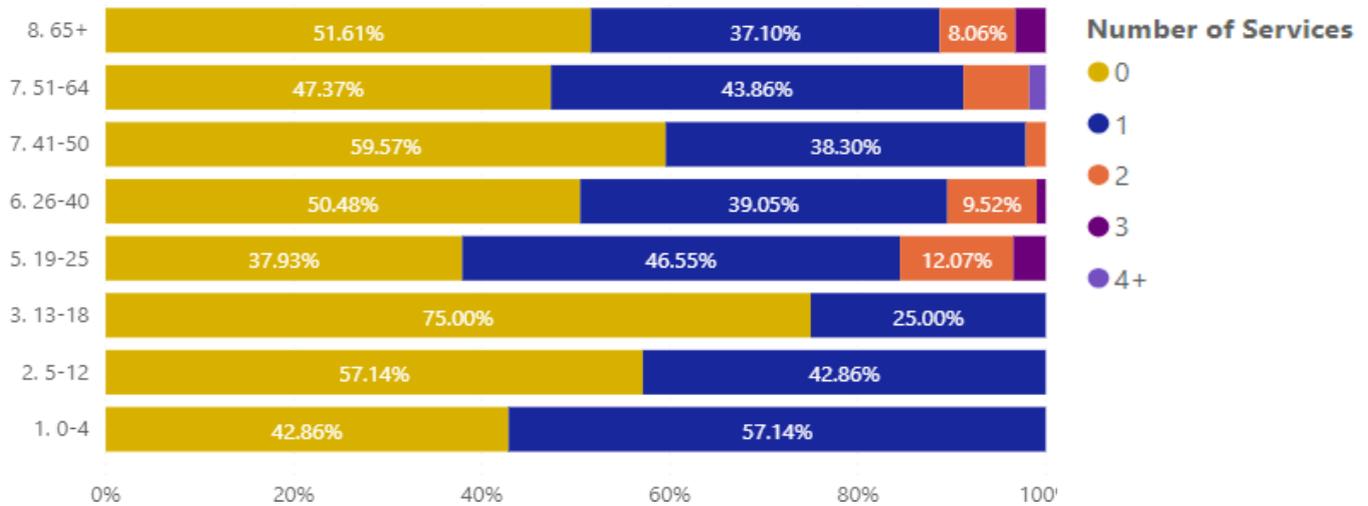
“I've been in an investigation with the hospital for about 6 months

“Never knew about go hubs until today. Looked on line. Only saw hospitals. Googled walk in centre. Ended up here. Need better info.”

“Just wanted a tetanus shot as wounded by gall in soil during gardening.”

2.4 Comparing choice of A&E and reasons given against age

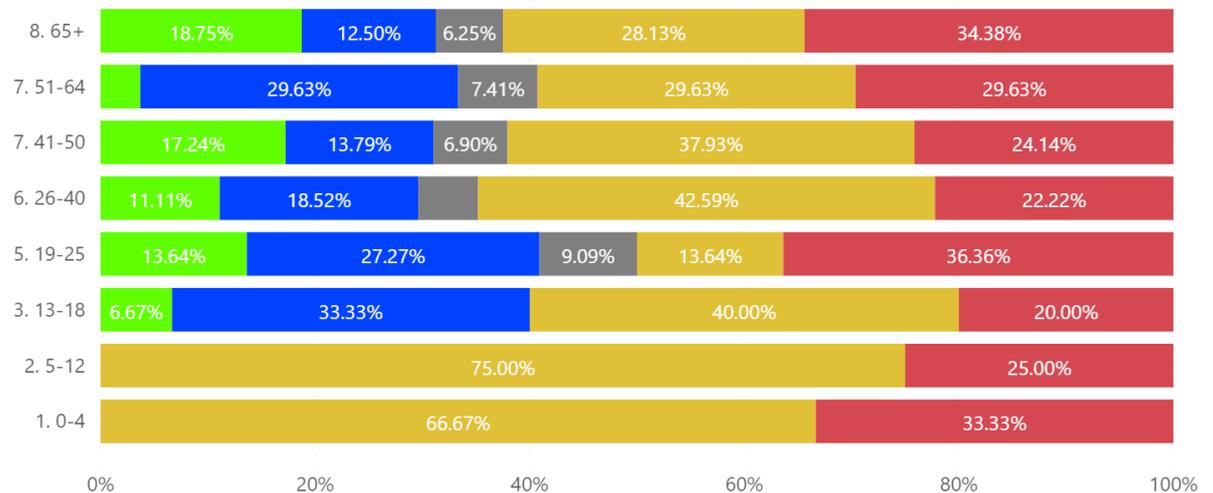
Overall number of services



- Under 18s contact one other service at most.
- Young adults and over 65s are more likely to contact two or more services.
- Customer journeys are varied and individual and did not follow pathway.

Unsure where to go when I need care

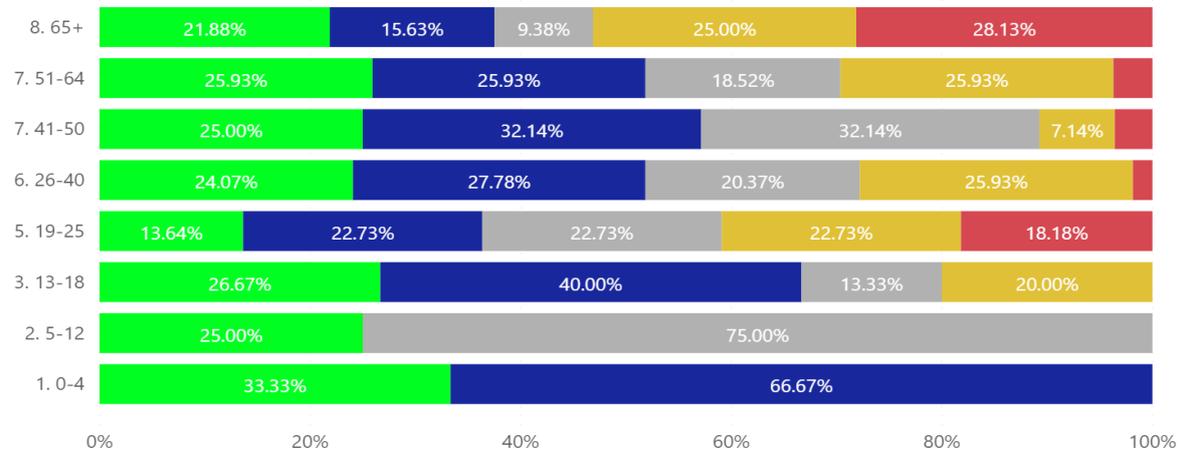
● 1 - Strongly Agree ● 2 - Agree ● 3 - Neither agree nor disagree ● 4 - Disagree ● 5 - Strongly Disagree



- Under 12s were the surest where to attend when they required care. Over 40% of those 19 to 25 year olds were unsure where to access care.

Difficult to get a GP Appointment

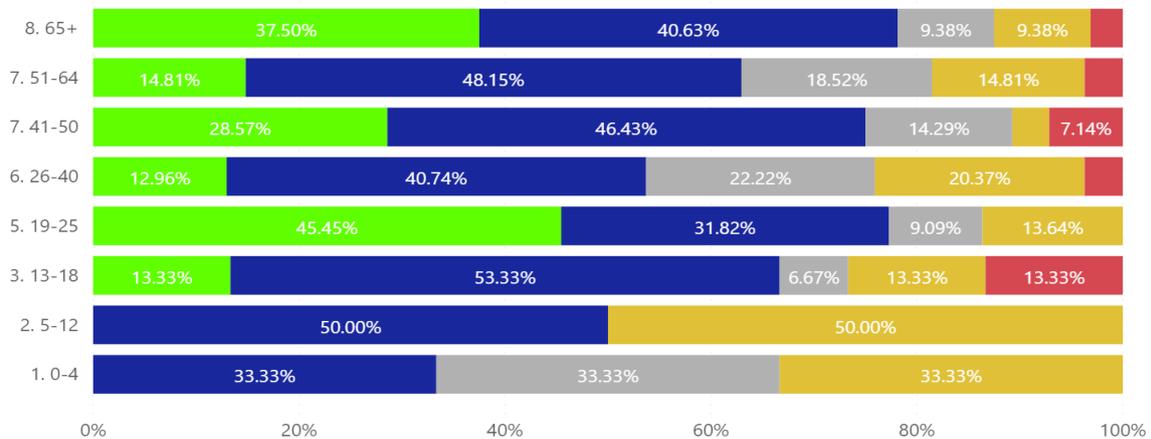
● 1 - Strongly Agree ● 2 - Agree ● 3 - Neither agree nor disagree ● 4 - Disagree ● 5 - Strongly Disagree



- Most people agree that it is difficult to get a GP appointment apart from those between 19-25 and over 65.

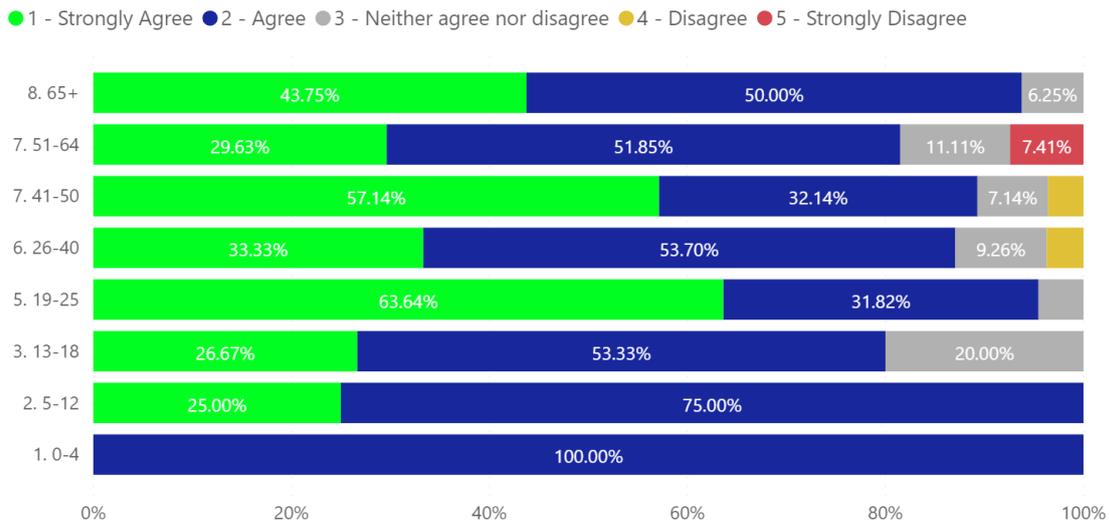
Hospital is the most convenient place to receive care

● 1 - Strongly Agree ● 2 - Agree ● 3 - Neither agree nor disagree ● 4 - Disagree ● 5 - Strongly Disagree



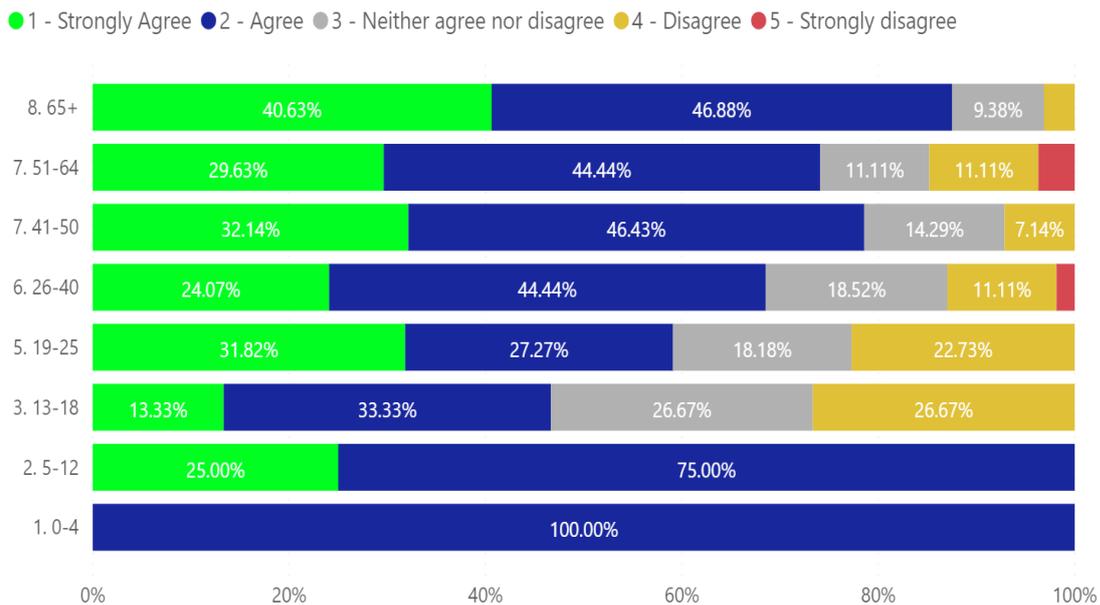
- Hospital is not seen as the most convenient place to receive care for under 12s compared to the other age groups.

Needed to see someone quickly



- Almost everyone that was surveyed felt that they needed to see someone quickly for their illness or injury.

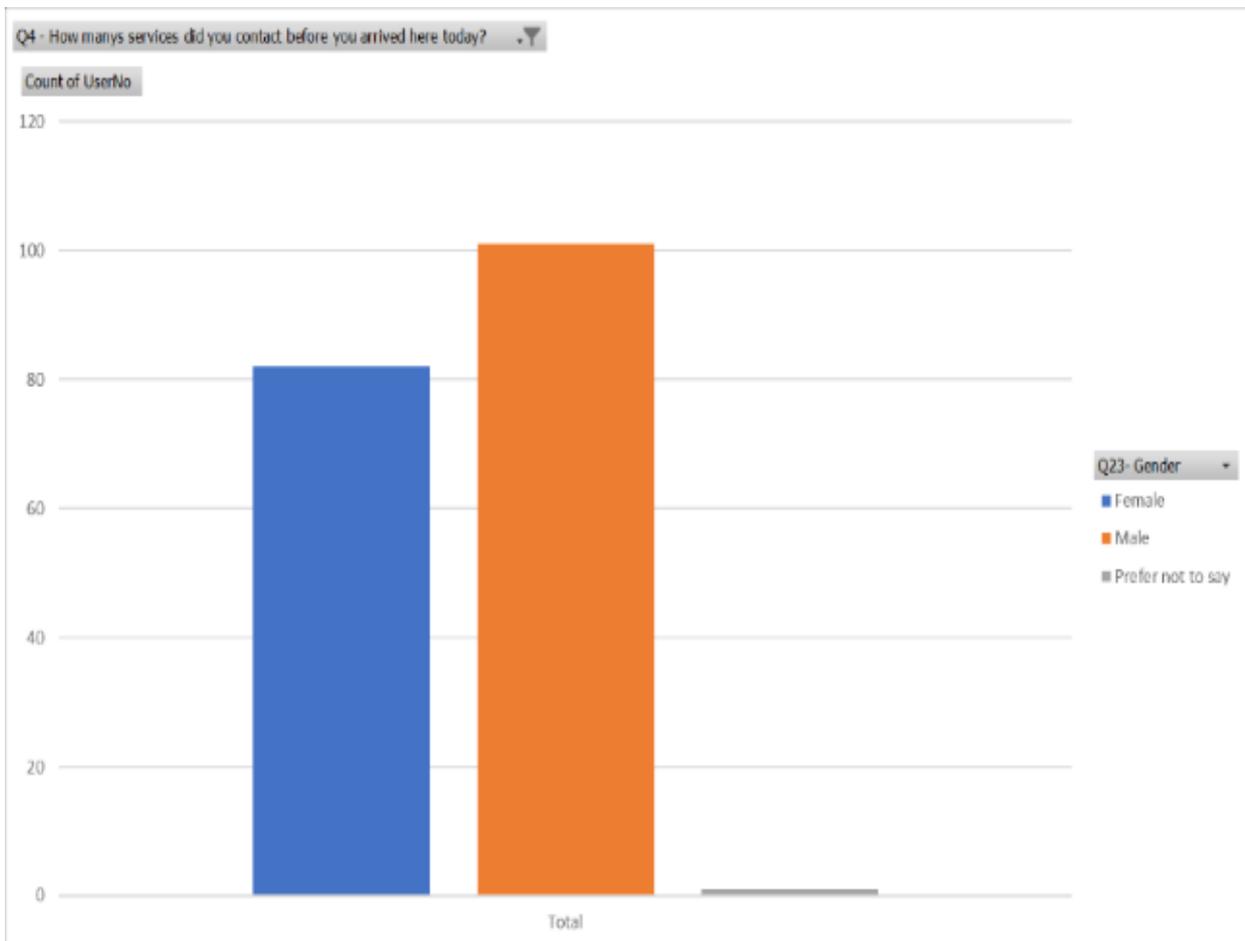
Illness too serious to be dealt with outside of the hospital



- Parents surveyed felt that their child's condition was too serious to be seen outside of hospital.

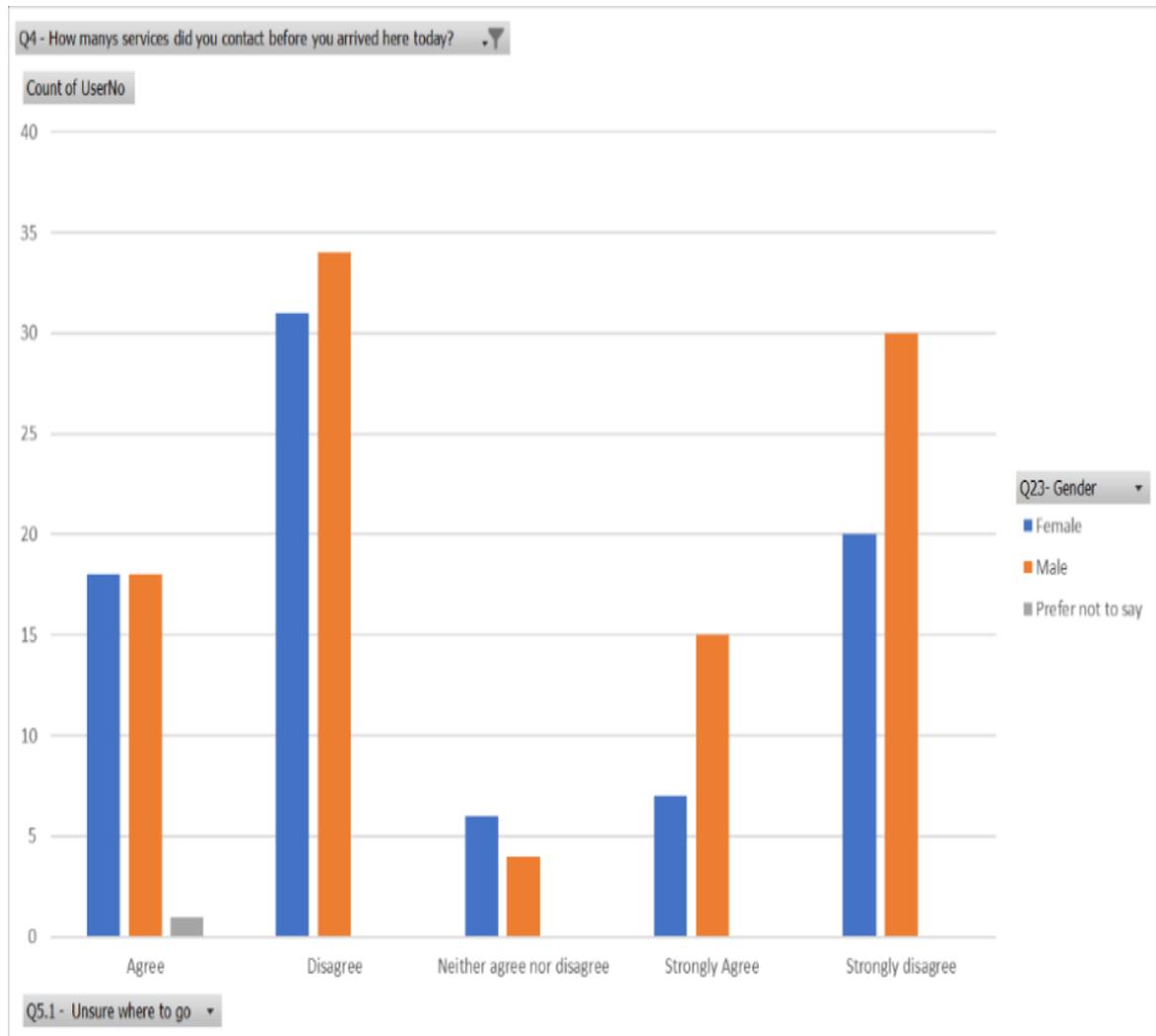
2.5 Comparing decisions against gender

A&E first service contacted



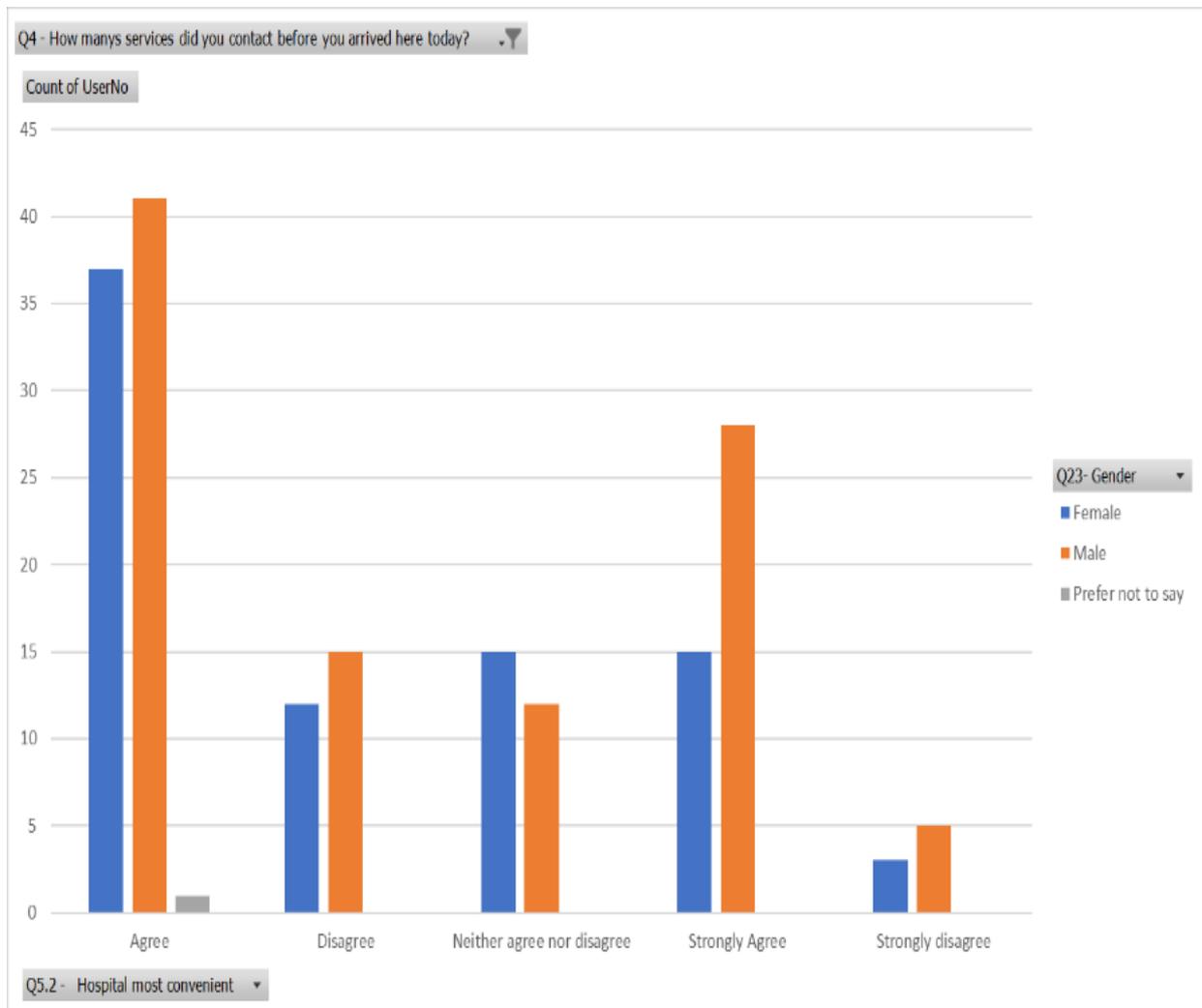
- More males than females prefer to go directly to hospital.

Unsure where to go



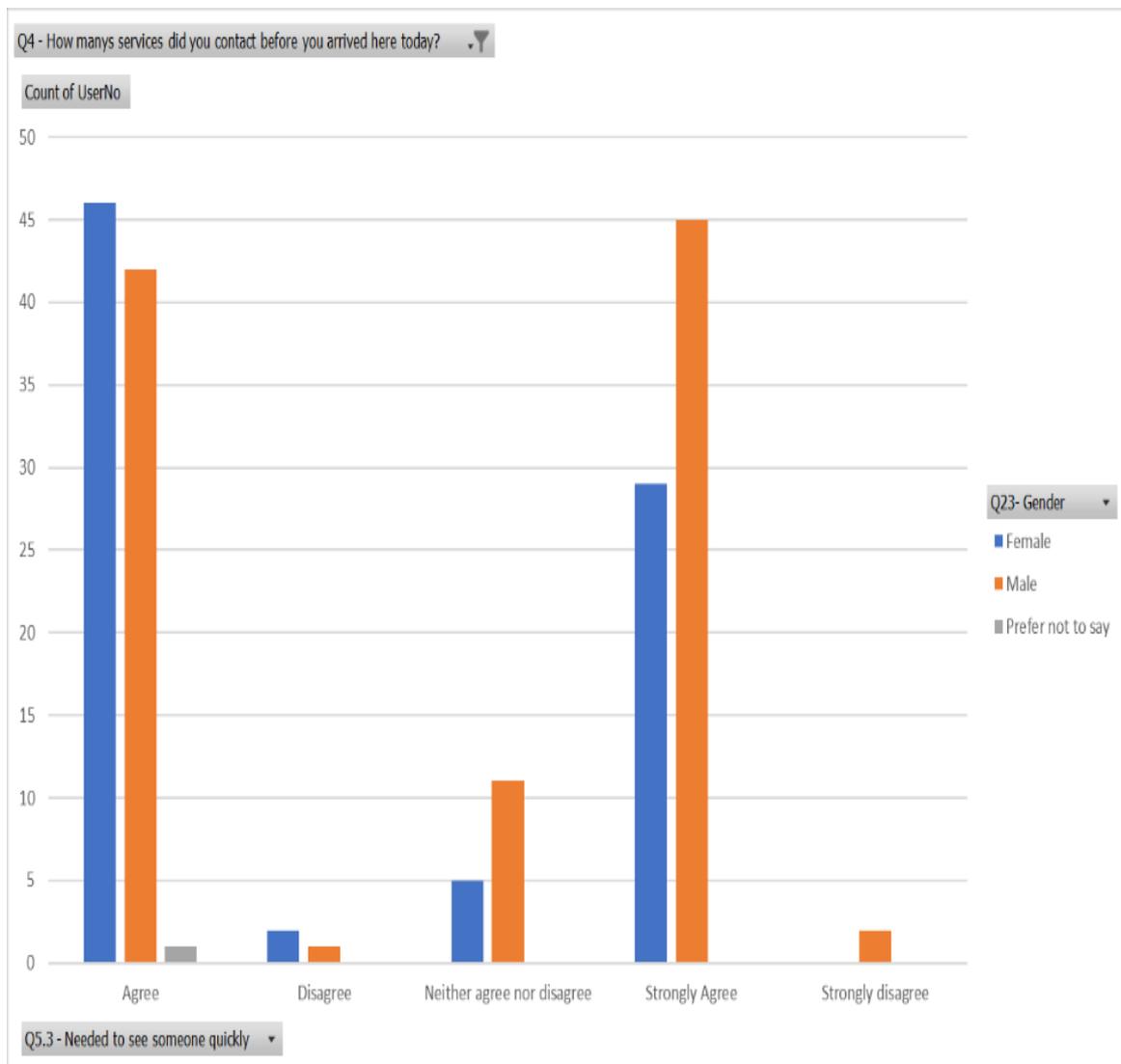
- More males strongly agreed that hospital was most convenient.

Hospital most convenient



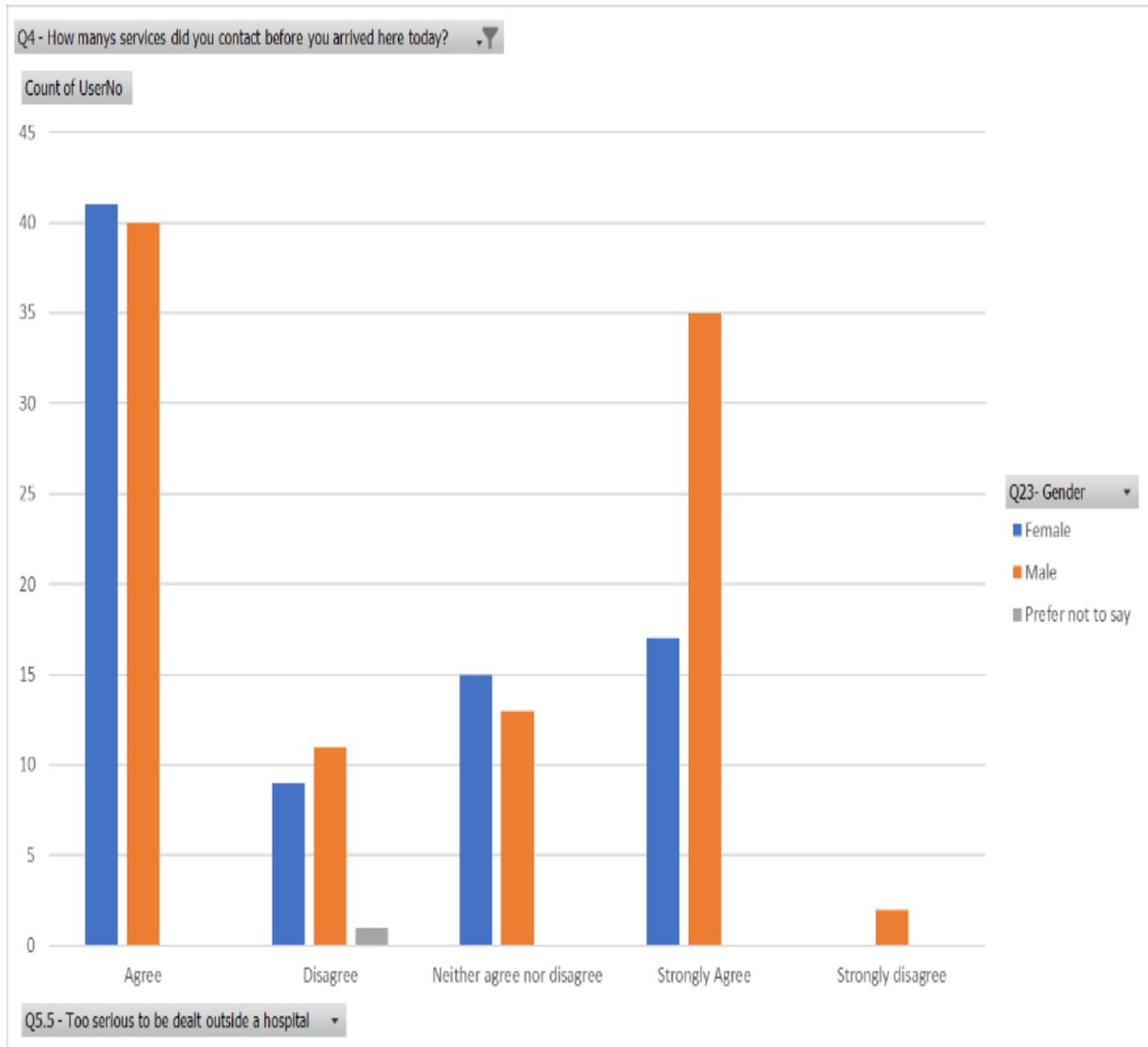
- More males felt hospital was more convenient.

Needed to see someone quickly



- More males strongly agreed they wanted to see someone quickly.

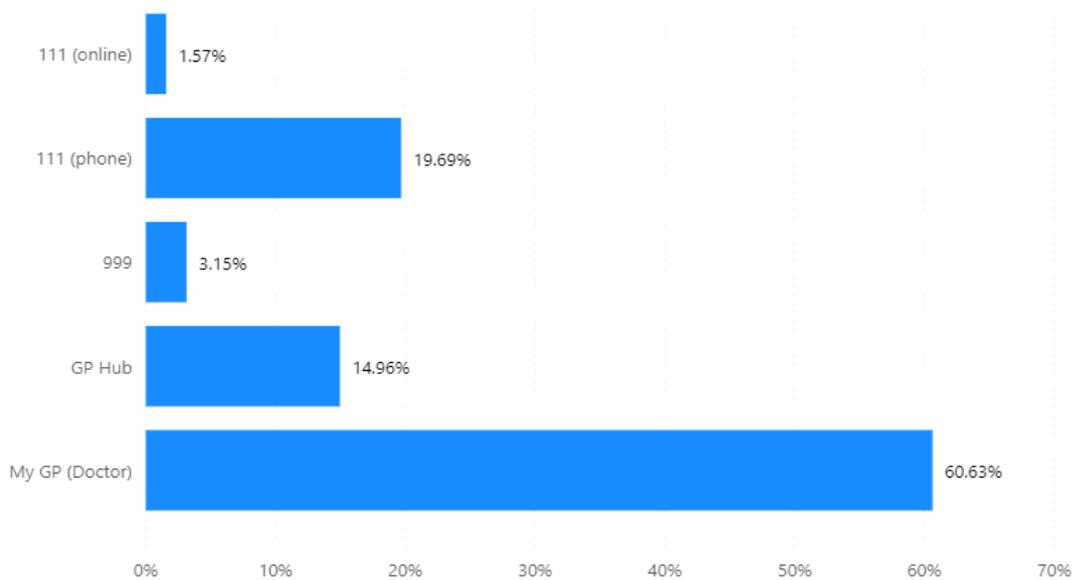
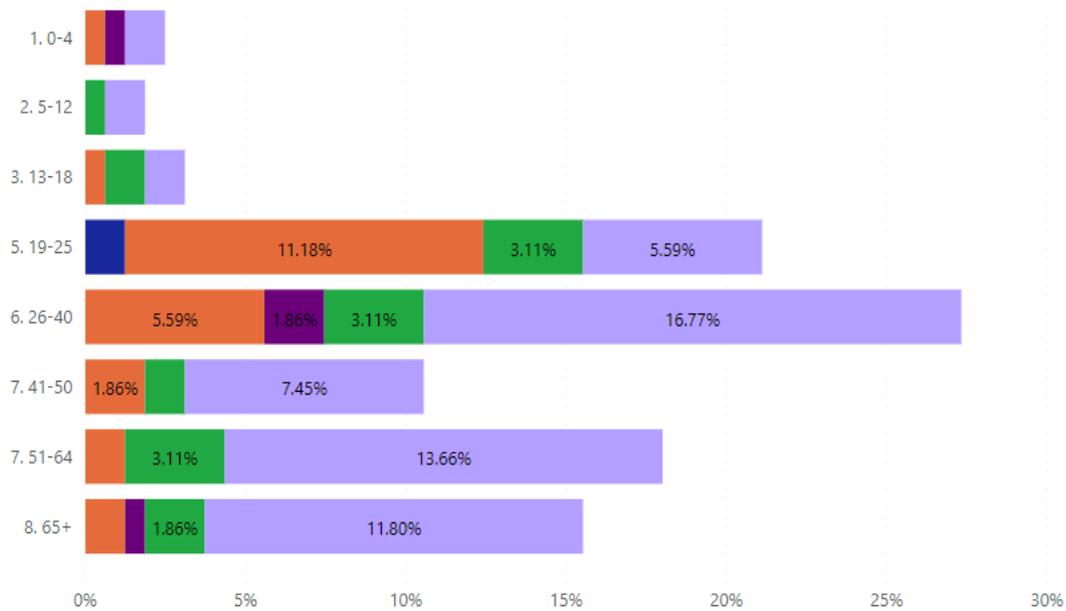
Too serious to be dealt outside a hospital



- Males saw their condition as too serious to be seen elsewhere.

2.6 First Contact - Which service did you contact before attending hospital?

Service: ● 111 (online) ● 111 (phone) ● 999 ● GP Hub ● My GP (Doctor)



- 60% of people contact their own GP first before attending A&E.
- 19-25 year olds are more likely to contact 111 than their own GP first.
- 26-40 year olds are more likely to contact their GP before attending A&E.

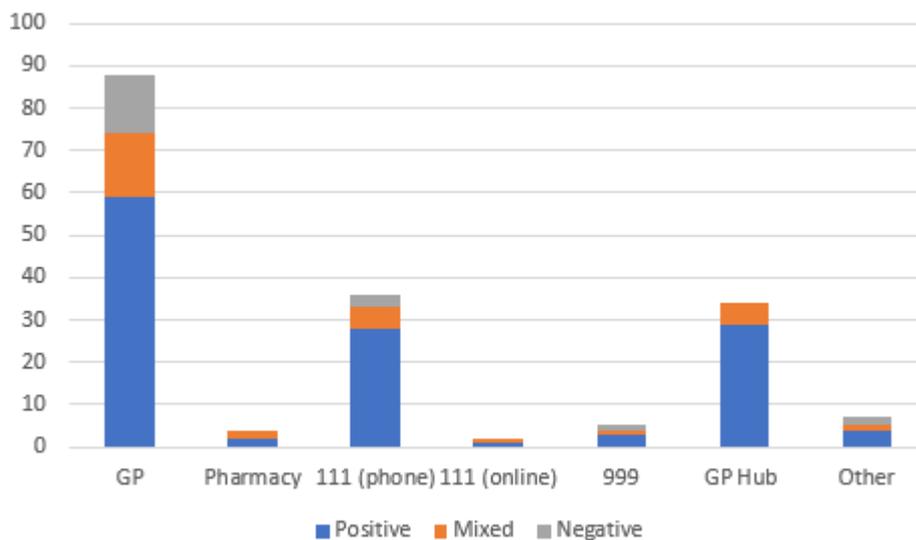
2.7 First contact - Reason for attending A&E following first contact



- Almost 70% of people were advised to attend A&E due to the severity of illness or injury.
- 15% of people attended A&E as there were no GP appointments, the GP was busy or closed.
- Severity is most prevalent from the GP and NHS 111.

2.8 Patient's experiences of different services if they did not select A&E first

	GP	Pharmacy	111 (phone)	111 (online)	999	GP Hub	Other	Total
Positive	59	2	28	1	3	29	4	126
Mixed	15	2	5	1	1	5	1	30
Negative	14	0	3	0	1	0	2	20
Did not access	0	0	0	0	0	0	3	3
Total	88	4	36	2	5	34	10	179

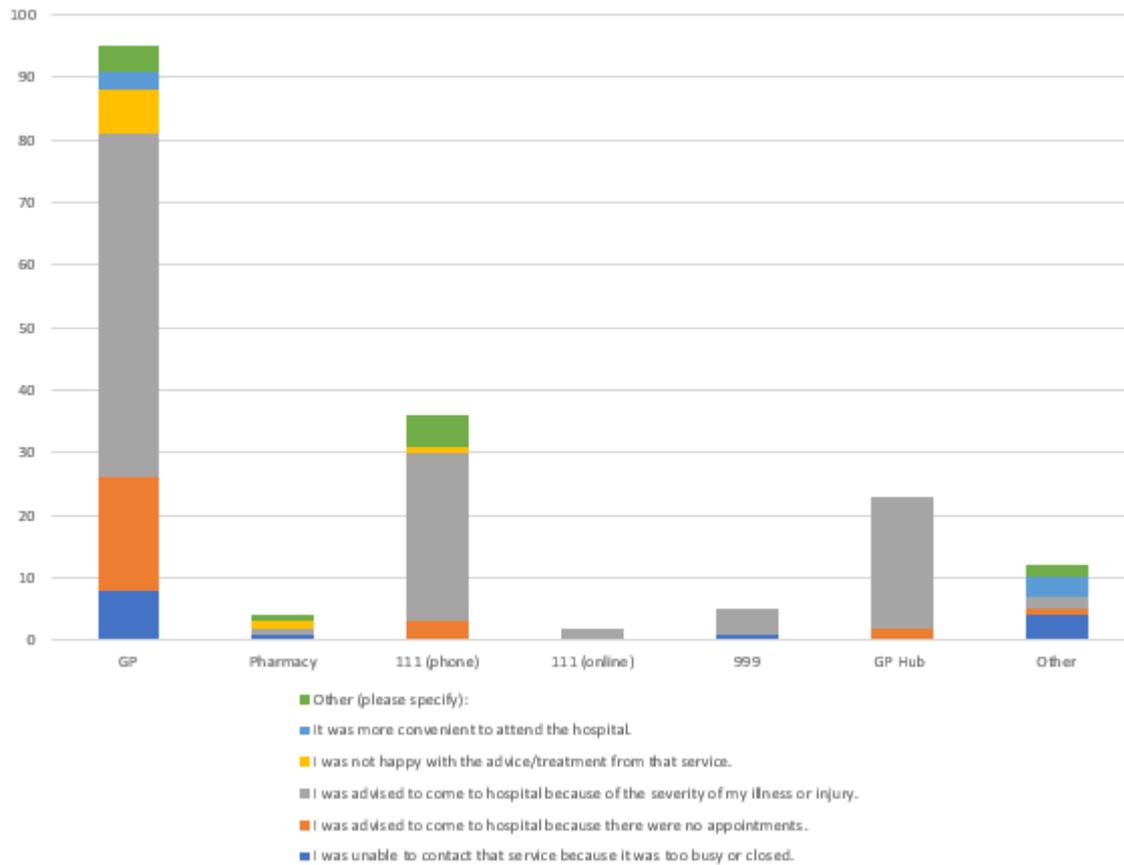


- GP services were most used, and majority had a positive experience.
- 111 phone and GP Hubs were about the same, with a small amount of negativity about 111.
- Despite pharmacy having a role in the pathway, very few used this service, or 111 online.

Of the 88 people who contacted the GP first, 42 named the surgery that they contacted: AT Medics New Addington; Ashburton; Auckland Road Practice; Brigstock Road; Brigstock Medical; Broad corner thorn health (sic); Broom Road medical practice; Caterham; Coulsdon valley; Denmark surgery South Norwood; East Croydon Medical Centre, Croydon; Eldridge Rd; Friends road medical practice; Gillet (sic) Road health centre; Greenside; Keston medical practice; Leander practice (2 times); Michley Avenue; Morgan Road surgery; Morland Rd; Norbury

medical; Old coulsdon medical practice (2 times); Out of borough; Parchmore medical centre; Parkway; Prentice practice, Streatham; Queenhill Medical Practice; Selsdon; Shirley Medical Practice (2 times); St James Surgery (2 times) Stovell House (2 times); Streatham Common practice; The moorings; Thornton heath; Thornton road surgery; Tulasi medical center; Whitehorse Practice: Whitehorse road, Woodcote medical; Woodside group practice.

- When analysed against first choice provider, most were advised to come to hospital because of the severity of my illness or injury. The second key issue was lack of appointments, or services busy or closed which due to the numbers was focused on primary care services.



2.10 Which service did you use second, third and fourth and what was the advice given?

- With only 31 respondents using a second service before A&E and only 18 responding by which service, they used, the responses are shown below in a table.
- Again, it shows the variety of issues but 6 being advised to come to hospital due to severity of injury, four due to services, busy, closed or no appointments, and two who found it more convenient. There were a few who were advised to go to Purley for an x-ray.
- This shows the journey of those who needed multiple services before arriving at A&E.

Second service responses

Q11- Which service did you use second?	If you chose GP (Doctor), what is the name of the practice/ surgery?	Q12 - Why did you contact this service? (2)	Q13 - What was your experience of using this service? (2)	Comments:	Q14 - Was this the last service you used? (2)
St George hospital	-	It was more convenient to attend the hospital.	Positive	-	Yes
GP Hub	-	I was advised to come to hospital because of the severity of my illness or injury.	Positive	-	Yes
My GP (Doctor)	-	I was advised to come to hospital because of the severity of my illness or injury.	Neutral	-	Yes
My GP (Doctor)	Old coulsdon medical practice	I was advised to come to hospital because of the severity of my illness or injury.	Positive	-	Yes
My GP (Doctor)	Selsdon park practice	To be advised.	Positive	-	Yes

Maternity triage	-	I was advised to come to hospital because of the severity of my illness or injury.	Positive	-	Yes
GP Hub	-	I was advised to come to hospital because of the severity of my illness or injury.	Neutral	-	No
My GP (Doctor)	-	I was advised to come to hospital because there were no appointments.	Positive	-	No
111 (online)	-	I was advised to come to hospital because of the severity of my illness or injury.	Neutral	-	Yes
Purley	-	I was advised to come to hospital because of the severity of my illness or injury.	Negative	Waste of time , couldn't help sent us to kuh	Yes
My GP (Doctor)	-	I was advised to come to hospital because of the severity of my illness or injury.	Neutral	-	Yes
GP Hub	??????	It was more convenient to attend the hospital.	Negative	-	Yes
111 (online)	-	Needed more info	Positive	But took two hours to attend to us	No
My GP (Doctor)	-	It was more convenient to attend the hospital.	Positive	-	Yes
My GP (Doctor)	-	I was advised to come to hospital because of the severity of my illness or injury.	Positive	-	Yes
111 (phone)	-	I was advised to come to hospital because of the severity of my illness or injury.	Positive	-	Yes
Pharmacy	-	Advised to see GP	Neutral	-	Yes
X	-	X	Neutral	X	Yes

Diagnostic x-ray at Purley Memorial Hospital - referred by GP Eldrige Road	-	I was advised to come to hospital because of the severity of my illness or injury.	Positive	Really quick. Took ten minutes. The xray said it was fractured and they advised me on my assessment. This could not be done at Purley so I was sent here.	Yes
Purley hospital	-	Was advised to get xrays at purley by GP	Positive	-	Yes
GP Hub	-	I was advised to come to hospital because there were no appointments.	Positive	-	Yes
111 (phone)	-	Wanted advice re knee	Positive	Very helpful and made appointment for me at East Croydon GP hub within 2 hours> Gp gave me letter to take to Accident and Emergency	Yes
None	-	None	Neutral	None	Yes
My GP (Doctor)	Trying to register at GP for two weeks	I was unable to contact that service because it was too busy or closed.	Negative	-	Yes
Purley hospital	-	To go for an X-ray	Positive	-	Yes
Partner of the GP	-	I was advised to come to hospital because there were no appointments.	Neutral	-	Yes
111 (phone)	-	I was unable to contact that service because it was too busy or closed.	Neutral	I was advised to go to the GP hub	No
111 (phone)	-	Unsatisfied with gp	Positive	-	Yes
Cuh yesterday	-	Felt so ill	Neutral	Sent me to st George's	Yes
My GP (Doctor)	East Croydon	Advised by therapist	Positive	-	Yes
Gum clinic	-	The gum clinic could not see her, so she came to A&E	Neutral	-	Yes

Third service responses

- With only 5 respondents using a third service before A&E most arrived at a GP Hub, and for most that was the last service they used before arriving at A&E.

Q15 - Which service did you contact third?	Q16 - Why did you contact this service (3)	Q17 - What was your experience of using this service? (3)	Comments:	Q18- Was this the last service you used? (3)	Q22- Was this the last service you used before coming to hospital today
GP (Doctor)	I was not happy with the advice/treatment from that service.	Neutral	-	Yes	-
A&E/GP Hub	I was advised to come to hospital because there were no appointments.	Positive	-	Yes	-
111 (online)	It was more convenient to attend the hospital.	Positive	-	No	No
A&E/GP Hub	-	-	-	-	-
A&E/GP Hub	I was unable to contact that service because it was too busy or closed.	Neutral	I was advised to go to A&E	No	Yes

Fourth service responses

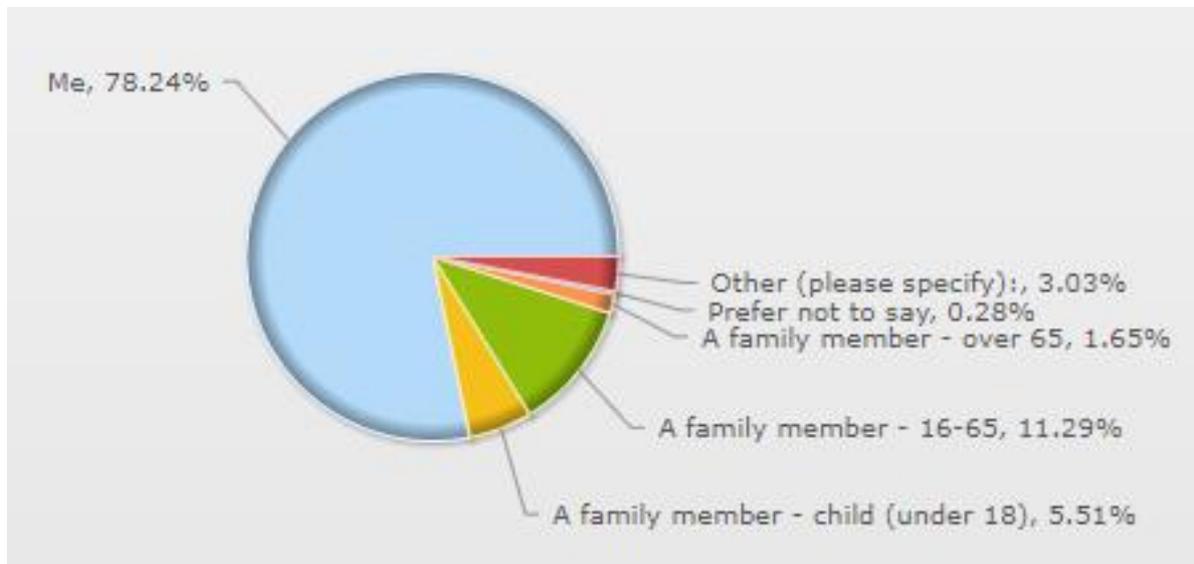
- With only 2 respondents using a fourth service before A&E most arrived at a GP Hub, and for most that was the last service they used before arriving at A&E.

Q19- Which service did you contact fourth?	Q20 - Why did you contact this service? (4)	Q21 - What was your experience of using this service? (4)	Comments:
111 (online)	It was more convenient to attend the hospital.	Neutral	-
A&E/GP Hub	I was advised to come to hospital because of the severity of my illness or injury.	Neutral	I was advised by the triage nurse to see my GP. She called my practice and insisted that I saw a doctor as a matter of urgency. An appointment was private 0930 the following morning

3 Key demographics of sample

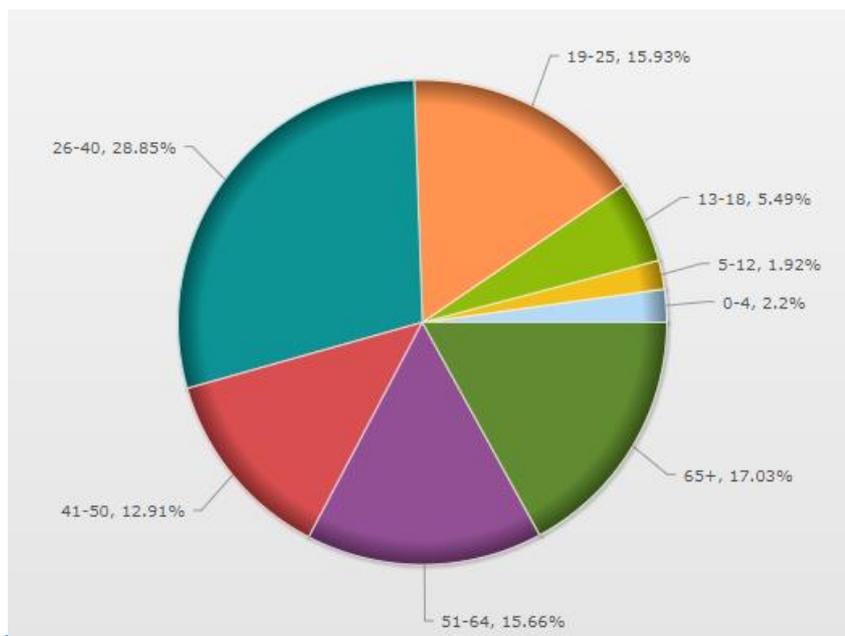
3.1 Who are you here for?

1. Who are you here for?			
		Response Percent	Response Total
Me		78.24%	284
A family member - child (under 18)		5.51%	20
A family member - 16-65		11.29%	41
A family member - over 65		1.65%	6
Prefer not to say		0.28%	1
Other (please specify):		3.03%	11
		answered	363
		skipped	1



3.2 How old was the person unwell or injured?

2. How old is the person who is unwell/ injured?				Response Percent	Response Total
1	0-4			2.20%	8
2	5-12			1.92%	7
3	13-18			5.49%	20
4	19-25			15.93%	58
5	26-40			28.85%	105
6	41-50			12.91%	47
7	51-64			15.66%	57
8	65+			17.03%	62
				answered	364
				skipped	0

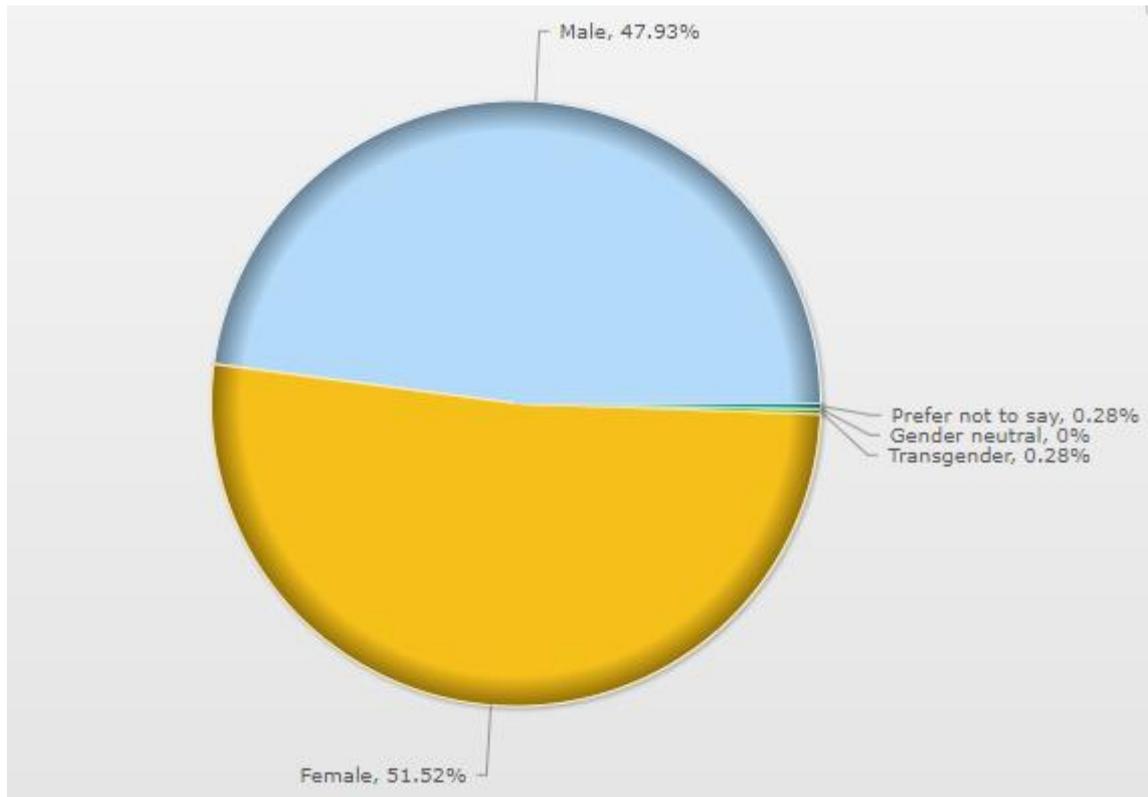


3.3 What is your gender:

4 23. What is your gender?				Response Percent	Response Total
1	Male			47.93%	174
2	Female			51.52%	187
3	Transgender			0.28%	1
4	Gender neutral			0.00%	0
5	Prefer not to say			0.28%	1

4 23. What is your gender?

	Response Percent	Response Total
answered		363
skipped		1



Respondents came from the following locations:

Postcode	
Addiscombe	1
Bd3 8ee	1
Bedington	1
Br3	1
Central london	1
CH66	1
Coulsden	3
CR0	111
CR2	28
CR3	2
Cr4	3
CR5	12
CR7	47
CR8	13
Cr9	1
Croydon	9
Crystal palace	1
East Croydon	7
Horley	1
Mitcham	2
New Addington	5

Norbury	1
Purley	4
SE19	7
SE20	4
SE24	1
SE25	21
SE4	1
Shirley	1
Sm4	1
Sm5	1
Sm6	1
South Croydon	4
South Norwood	4
SW1	1
SW11	1
SW16	17
Thornton Heath	8
TN4	1
UB6	2
Visitor/ Other	5
Wallington	3
West Croydon	5
	345
No postcode	20
	365

4 Response to our research

Matthew Kershaw, Trust Chief Executive and Place Based Leader for Health said:

“It is good to know that the majority of people surveyed knew to come to our Emergency Department if they needed life-critical care and trusted that they would be seen quickly in Croydon. However, we agree that more is needed to promote the alternatives available to get urgent care for less serious conditions in our borough. Since this report, we have expanded NHS 111 in Croydon and launched a new campaign to encourage people to phone ahead or check online before coming to A&E.

“Trained health advisors, including Croydon doctors, nurses and paramedics are now available 24/7 on NHS 111 for help and advice to direct people to the best urgent care available to them. Depending on an individual’s clinical needs, this could include call back from a local GP, a virtual consultation, or a same day booked appointment in the Emergency Department or Urgent Treatment Centre at CUH.

“All of this is to help people access the right care first time, help us to reduce waits in A&E and help us protect patients and staff from COVID-19 with fewer people in waiting rooms for safe social distancing.”

5 Quality assurance

Does the research ask questions that:

Are pertinent? The insight asks people their journey to A&E which will help those who are responsible for pathways to understand patient experience.

Increase knowledge about health and social care service delivery? This insight helps both commissioners and providers of services both in the health sector understand how patients are experiencing the service and help future delivery.

Is the research design appropriate for the question being asked?

a) **Proportionate:** Yes, to gain views of those who use a commonly used service

b) **Appropriate sample size: Has any potential bias been addressed?** The sample size is 364, based on 45 hours of time in A&E waiting room over a four-week period. Most were face-to-face but some from self-completion via website link.

Have ethical considerations been assessed and addressed appropriately?

Beyond the usual standards of anonymity, here were no further ethical considerations required for this insight.

Has risk been assessed where relevant and does it include?

a) **Risk to well-being:** None.

b) **Reputational risk:** That the data published is incorrect and not of a high-quality standard. All data was collected via Smart Survey and analysed by the Healthwatch Croydon Team. We endeavour to show accurately the results we receive.

c) **Legal risk: Have appropriate resources been accessed and used to conduct the research?** There was no need to refer to legal resources for this research.

d) **Where relevant have all contractual and funding arrangements been adhered to?** We agreed to undertake this work so Croydon Health Service

NHS Trust and South West London NHS Clinical Commissioning Group could gain insight into services, but this was not funded. The decision to go ahead was made by the Healthwatch Croydon board.

Data Collection and Retention

Is the collection, analysis and management of data clearly articulated within the research design? Yes.

Has good practice guidance been followed? Yes.

Has data retention and security been addressed appropriately? Yes.

Have the GDPR and FOIA been considered and requirements met? Yes.

Have all relevant legal requirements been adhered to ensure that the well-being of participants has been accounted for? ie the Mental Capacity Act. None required for this research.

Has appropriate care and consideration been given to the dignity, rights and safety of participants? Yes. People gave their views anonymously.

Were participants clearly informed of how their information would be used and assurances made regarding confidentiality/anonymity? Yes.

Collaborative Working

Where work is being undertaken in collaboration with other organisations have protocols and policies been clearly understood and agreed, including the development of a clear contractual agreement prior to commencement? There was no contractual agreement. We had permission to undertake the survey in the A&E waiting area and to provide postcards to be distributed to service users

Have any potential issues or risks that could arise been mitigated? These are shown below:

Risk factors	Level of risk	Contingency
Cannot access key people to research	Low	We extend the number of sessions until we gain enough respondents.

Organisation let you down	Low	CHS agreed for this be undertaken so this is a low risk.
Limited access to speak to people in evenings and weekends or other times we are not there	High	We provide postcards with a link to the survey as ask the staff to distribute around the time we are not there.
Question set does not work with group	Low	Look at early responses to see if insight will be useful.
Data is seen as being out of date	Medium	Initial findings planned to be presented at A&E Delivery Board in September 2019.
Not enough respondents	Medium	Extend the deadline for closing the survey.

Has Healthwatch independence been maintained? Yes. All considerations were discussed by the board

Quality Controls

Has a quality assurance process been incorporated into the design? There was a proper process of scoping with Croydon Health Services NHS Trust.

Has quality assurance occurred prior to publication? Data collection was checked and re-checked.

Has peer review been undertaken? No peer review was undertaken. It was not required for this research project.

Conflicts of Interest

Have any conflicts of interest been accounted for? Healthwatch Croydon is satisfied that its independence and neutrality has been maintained on this project.

Does the research consider intellectual property rights, authorship and acknowledgements as per organisational requirements? The research is owned by Healthwatch Croydon, who are managed by Help and Care. Other organisations support has been recognised and suitably referenced.

Is the research accessible to the general public? It appears on our website as of 26 November 2020.

Are the research findings clearly articulated and accurate? To the best of our knowledge, we believe they are.

6 References

Croydon Health Services NHS Trust(2019) *Croydon Health Services NHS Trust Board Papers for July 2019*

<https://www.croydonhealthservices.nhs.uk/download.cfm?doc=docm93jjjm4n1725>

Croydon Health Services (2020) *Croydon Urgent Care Alliance*

<https://www.croydonhealthservices.nhs.uk/croydon-urgent-care-alliance/>

NHS England (2020) <https://www.england.nhs.uk/urgent-emergency-care/urgent-treatment-centres/>



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