



2018 Urgent & Emergency Care (UEC) Survey: Early release of CQC benchmark results for Type 3 services (Urgent Care Centres, Urgent Treatment Centres, Minor Injury Units)

This report provides benchmark results for The Royal Wolverhampton NHS Trust, in advance of publication of the 2018 UEC Survey later this year. It contains the same scoring and 'banding' (how your trust performed compared to other trusts across England), but does not include national scores. These national results can only be shared at official publication of the survey results.

This report includes **Type 3 service results only**. Questions have been numbered T4, T7 etc. to differentiate this report from the Type 1 reports. The pre-release data for Type 1 results will be provided to you in a separate report.

By receiving results now, you will be able to see how your trust performed on individual questions in advance of the national publication.

Information on how to interpret this information is similar to that provided within the published benchmark reports and is detailed below. If you require any assistance, have any queries, or would like to provide feedback on the format of this report, please contact the CQC Surveys Team at: patient.survey@cqc.org.uk

2018 Urgent & Emergency Care (UEC) Survey

The 2018 survey of people who used UEC services involved 132 NHS trusts with a Type 1 accident and emergency (A&E) department¹. Sixty-three of these trusts had direct responsibility² for running a Type 3 department³ and will therefore also receive benchmarked results for their Type 3 services. Two separate questionnaires were used, one for Type 1 services and one for Type 3 services. To see the questionnaires please see the 'Further Information' section below.

Responses were received from 42,707 people who attended a Type 1 department, a response rate of 30%. Responses were received from 7,419 people who attended a Type 3 department, a response rate of 29%.

Patients were eligible for the survey if they were aged 16 years or older and had attended UEC services during September 2018⁴. Full sampling criteria can be found in the survey instruction manual (see 'Further Information' section).

Trusts responsible for only Type 1 departments drew a random sample of 1,250 patients. Trusts that also directly ran Type 3 departments sampled 950 patients from Type 1 departments and 420 patients from Type 3 departments

¹A Type 1 department is a major, consultant led A&E Department with full resuscitation facilities operating 24 hours a day, 7 days a week.

²The survey only includes Type 3 departments that are run directly by acute trusts, and not those run in collaboration with, or exclusively by others, for example, that are managed by a Clinical Commissioning Group (CCG).

³A Type 3 department is an A&E/minor injury unit with designated accommodation for the reception of accident and emergency patients. The department may be doctor or nurse-led, treats at least minor injuries and illnesses and can be routinely accessed without appointment.

⁴Trusts that had an eligible Type 3 service and could not achieve the required sample size in September could also sample back to August

totalling 1,370 patients. Questionnaires and reminders were sent to patients between October 2018 and March 2019.

Similar surveys were carried out in 2003, 2004, 2008, 2012, 2014 and 2016. Please note that as no trust level scored results for Type 3 services were published in 2016, it is not possible to compare results for 2018 with 2016. Redevelopment work carried out ahead of the 2016 survey also means it is not possible to compare results for 2018 with any earlier surveys.

The Care Quality Commission will use the results from this survey in our regulation, monitoring and inspection of NHS acute trusts in England. We will use data from the survey in CQC Insight, an intelligence tool which identifies potential changes in quality of care and then supports us in deciding on the right regulatory response. Survey data will also be used to support CQC inspections.

NHS England and NHS Improvement will use the results of the Urgent and Emergency Care Survey to check progress and improvement against the objectives set out in the NHS mandate, and the Department of Health & Social Care will hold them to account for the outcomes they achieve. They will use the results to guide work to improve the quality of care provided by NHS Trusts and Foundation Trusts and also in the development of policies aimed at improving the quality of care at a national level.

Making fair comparisons between trusts

Trusts have differing profiles of people who use their services. For example, some trusts have a higher proportion of young patients than others trusts. Demographic factors can influence a trust's survey results because people's answer to questions about their care is influenced by demographic characteristics (e.g. a person's gender or age). To account for this, we 'standardise' respondent data to ensure that a trust does not appear better or worse than another due to its respondent profile. For the UEC survey, we standardise by **age and gender**.

Scoring

For each question in the survey, the individual (standardised) responses are converted into scores on a scale from 0 to 10. A score of 10 represents the best possible response and a score of zero the worst. The higher the score for each question, the better the trust is performing. It is not appropriate to score all questions within the questionnaire, since some questions do not assess the trust in any way.

Interpreting your data

The 'better' and 'worse' categories, displayed in the column with the header '2018 Band' in the tables below, are based on a statistic called the 'expected range', which determines the range within which the trust's score could fall without differing significantly from the average. If the trust's performance is outside of this range, its performance is significantly above or below what would be expected. If it is within this range, we say that its performance is 'about the same'. This means that where a trust's survey results have been identified as 'better' or 'worse' than the majority of trusts it is very unlikely that these results have occurred by chance. If your trust's results are 'about the same', table cells in this column will be empty.

If fewer than 30 respondents have answered a question, a score will not be displayed for this question (or the corresponding section). This is because the uncertainty around the result is too great.

Any comparisons you may wish to make between your Type 1 and Type 3 results should be done with caution due to the differences in services offered and differences in patient case-mix. You will be the best judge of your own services and whether it is appropriate to make comparisons across the results for any questions. You should also use an appropriate statistical test to ensure that any differences are statistically significant. A statistically significant difference means that you can be very confident that the difference is real and not due to chance.

Notes on specific questions

T7 (*How long did you wait before you first spoke to a health professional?*)

T8 (*Sometimes, people will first talk to a health professional and be examined later. From the time you arrived, how long did you wait before being examined?*)

These questions are only scored for people who said they **did not have an appointment** at T6 (*Did you have an appointment on your most recent visit to the urgent care centre?*)⁵. This is because there are different principles around waiting times for people attending with an appointment who should usually be seen quicker⁶. However, the number of people at each trust who had an appointment was too low to be able to analyse that data.

The results for four questions are not able to be reported due to a large number of trusts having less than 30 respondents. These are:

T10: While you were waiting, were you able to get help from a member of staff?

T35: Did a member of staff explain the purpose of the medications you were to take at home in a way you could understand?

T36: Did a member of staff tell you about medication side effects to watch for?

T38: Did a member of staff take your family or home situation into account when you were leaving the urgent care centre?

New features

We have added a brief executive summary section to this report, which provides you with an overview of your trust's results. The executive summary presents the following information:

- The total number of respondents and response rate for your trust.
- The number of questions where your trust did 'better', 'worse' or 'about the same' as most other trusts that submitted a Type 3 sample.

⁵If the response to T6 is missing, or the respondent did not know/could not remember, T7 and T8 are not scored. For more information please see the scored questionnaire and the technical document (see 'Further Information' section).

⁶Urgent Treatment Centres principles and standards (<https://www.england.nhs.uk/publication/urgent-treatment-centres-principles-and-standards/>) sets out expectations for Urgent Treatment Centres which NHS England plan will replace the current UEC choices by December 2019. It states that patients who have a pre-booked appointment should be seen and treated within 30 minutes of their appointment time.

Further Information

When the survey is published, the results for the 2018 survey will be available on the CQC website. Here you will find an A-Z list to view the results for each trust, the technical document which outlines the methodology and the scoring applied to each question, a statistical release with the results for England and a Quality & Methodology document:

www.cqc.org.uk/uecsurvey

When the survey is published, the benchmark reports will be available on the NHS surveys website:

<https://nhssurveys.org/surveys/survey/03-urgent-emergency-care/year/2018/>

The results for the 2016 survey can be found below. Please note that due to redevelopment work carried out ahead of the 2016 survey, **results from 2018 are only comparable with 2016**. Please also note that as no trust level results for Type 3 services were published in 2016, it is not possible to compare results for 2018 with 2016.

<https://nhssurveys.org/surveys/survey/03-urgent-emergency-care/year/2016/>

Full details of the methodology for the survey, including questionnaires, letters sent to patients, instructions on how to carry out the survey and the survey development report, are available at:

<https://nhssurveys.org/surveys/survey/03-urgent-emergency-care/year/2018/>

More information on the patient survey programme, including results from other surveys and a programme of current and forthcoming surveys is available at:

www.cqc.org.uk/surveys

More information about how CQC monitors hospitals is available on the CQC website at:

www.cqc.org.uk/content/monitoring-nhs-acute-hospitals

Results for The Royal Wolverhampton NHS Trust: Executive Summary

Respondents and response rate

- 86 The Royal Wolverhampton NHS Trust patients responded to the survey
- The response rate for The Royal Wolverhampton NHS Trust was 21.13%

Banding

Your trust's results were better than most trusts for **0** questions.

Your trust's results were worse than most trusts for **0** questions.

Your trust's results were about the same as other trusts for **26** questions.

Tables of Results

Table 1: Arrival at the Urgent Care Centre

Question	Respondents	2018 Score	2018 Band
T4. Were you given enough privacy when discussing your condition with the receptionist?	78	7.5	

Table 2: Waiting Times

Question	Respondents	2018 Score	2018 Band
T7. How long did you wait before you first spoke to a health professional?	58	7.2	
T8. Sometimes, people will first talk to a health professional and be examined later. From the time you arrived, how long did you wait before being examined?	58	5.8	
T9. Were you informed how long you would have to wait to be examined?	62	4.2	
T11. Overall, how long did your visit to the urgent care centre last?	75	7.5	

Table 3: Healthcare professionals

Question	Respondents	2018 Score	2018 Band
T12. Did you have enough time to discuss your condition with the health professional?	83	9.1	
T13. While you were in the urgent care centre, did a health professional explain your condition and treatment in a way you could understand?	80	9.0	
T14. Did the health professional listen to what you had to say?	83	9.3	
T15. If you had any anxieties or fears about your condition or treatment, did a health professional discuss them with you?	53	7.9	
T16. Did you have confidence and trust in the health professional examining and treating you?	83	8.8	
T17. Did health professionals talk to each other about you as if you weren't there?	65	9.4	
T19. If a family member, friend or carer wanted to talk to a health professional, did they have enough opportunity to do so?	37	8.5	

Table 4: Care and Treatment

Question	Respondents	2018 Score	2018 Band
T20. While you were at the urgent care centre, how much information about your condition or treatment was given to you?	82	9.5	
T21. Were you given enough privacy when being examined or treated?	82	9.7	
T22. Sometimes, a member of staff will say one thing and another will say something quite different. Did this happen to you?	80	9.3	
T23. Were you involved as much as you wanted to be in decisions about your care and treatment?	82	8.2	
T29. Do you think the staff did everything they could to help control your pain?	45	6.9	

Table 5: Tests

Question	Respondents	2018 Score	2018 Band
T25. Did a member of staff explain why you needed these test(s) in a way you could understand?			
T26. Before you left the urgent care centre, did you get the results of your tests?			
T27. Did a member of staff explain the results of the tests in a way you could understand?			

Table 6: Environment and Facilities

Question	Respondents	2018 Score	2018 Band
T30. In your opinion, how clean was the urgent care centre?	81	8.8	
T31. While you were in the urgent care centre, did you feel threatened by other patients or visitors?	82	9.9	
T32. Were you able to get suitable food or drinks when you were at the urgent care centre?	36	7.2	

Table 7: Leaving the urgent care centre

Question	Respondents	2018 Score	2018 Band
T37. Did a member of staff tell you when you could resume your usual activities, such as when to go back to work or drive a car?	36	5.9	
T39. Did a member of staff tell you about what symptoms to watch for regarding your illness or treatment after you went home?	47	7.7	
T40. Did a member of staff tell you who to contact if you were worried about your condition or treatment after you left the urgent care centre?	62	7.8	
T41. Did staff give you enough information to help you care for your condition at home?	55	8.8	

Table 8: Respect and Dignity

Question	Respondents	2018 Score	2018 Band
T42. Overall, did you feel you were treated with respect and dignity while you were in the urgent care centre?	80	9.3	

Table 9: Experience Overall

Question	Respondents	2018 Score	2018 Band
T43. Overall, I had a very good experience	80	8.3	

Table 10: Section Scores

Section	2018 Score	Band
Section 1. Arrival at the Urgent Care Centre	7.5	
Section 2. Waiting Times	6.2	
Section 3. Healthcare Professionals	8.8	
Section 4. Care and Treatment	8.7	
Section 5. Tests		
Section 6. Environment and Facilities	8.6	
Section 7. Leaving the Urgent Care Centre	7.6	
Section 8. Respect and Dignity	9.3	
Section 9. Experience Overall	8.3	

Table 11: Demographic Information

Characteristic	%
Total respondents	86
Response rate	21.1
Gender	
Male	46.5
Female	53.5
Age	
16-35	17.4
36-50	22.1
51-65	27.9
66+	32.6
Ethnicity	
White	70.9
Multiple ethnic groups	1.2
Asian or Asian British	12.8
Black or Black British	7.0
Arab or other ethnic group	1.2
Not known	7.0

Table 12: Demographic Information (Continued)

Characteristic	%
Religion	
No religion	18.5
Buddhist	1.2
Christian	58.0
Hindu	6.2
Jewish	0.0
Muslim	3.7
Sikh	6.2
Other religion	3.7
Prefer not to say	2.5
Sexuality	
Heterosexual	91.2
Gay/lesbian	1.2
Bisexual	0.0
Other	1.2
Prefer not to say	6.2