

Improving patient access to urgent and emergency care in Dorset

Why are people confused about what services to use?

October 2023



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About us

Healthwatch Dorset is your health and social care champion.

We're here to listen to your experiences of using local health and care services and to hear about the issues that really matter to you. We are entirely independent and impartial, and anything you share with us is confidential. We can also help you find reliable and trustworthy information and advice to help you to get the care and support you need.

As an independent statutory body, we have the power to make sure that NHS leaders and other decision makers listen to your feedback and use it to improve standards of care. This report is an example of how your views are shared.

Healthwatch Dorset is part of a network of over 150 local Healthwatch across the country. We cover the geographical area of Dorset, which includes the unitary authority areas of Bournemouth, Christchurch and Poole and Dorset.

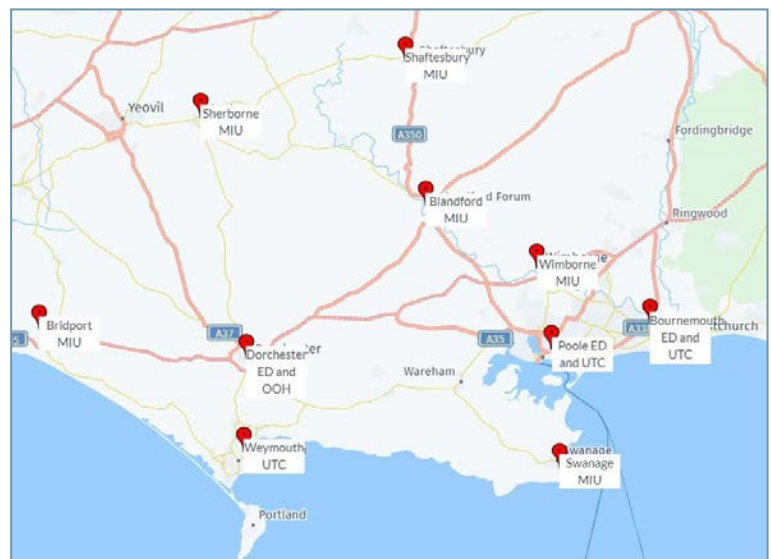


Introduction

Urgent care services

Minor Injury Units (MIUs) play a crucial role in providing prompt and appropriate care for people with non-life-threatening injuries, and they help alleviate the pressure on hospital emergency departments.

Dorset currently operates six MIUs, located across the county to provide accessible care to local communities. These units are staffed by trained healthcare professionals capable of handling a range of minor injuries, such as cuts, sprains, fractures, minor burns, and minor head injuries.



Urgent Treatment Centres (UTCs) provide medical help when it's not a life-threatening emergency and offer similar help to MIUs. A UTC is open for at least 12 hours a day. Dorset currently has two UTCs in Weymouth and Poole.

Emergency Departments (EDs) are for serious injuries and life-threatening emergencies only. They are also known as the A&E or casualty and there are three in Dorset based at Dorchester, Bournemouth and Poole.

Dorset also operates one **Out of Hours (OOH) GP** referral service currently based in Dorset County Hospital.

Our aim

NHS Dorset asked us to evaluate resident's understanding of the different healthcare settings available (MIU, ED and UTC) and how easily accessible they are. In addition, we wanted to find out about people's experiences of using MIUs and to understand the staff perspective on how systems could be improved to make services more effective.

This report uses the feedback we gathered from patients and staff to assess the effectiveness of the MIUs and UTC in Dorset, evaluating their accessibility, patient satisfaction, and overall impact on the healthcare system, as well as analysing the rationale of patient's decisions to attend an MIU, UTC or ED.

Any challenges or limitations identified during the evaluation process are outlined, along with our recommendations to improve the effectiveness of MIUs in Dorset.

What we did


In April 2023, our volunteers visited all 12 urgent and emergency care sites across Dorset. In each unit, we spent two hours gathering patient feedback, using a survey designed by NHS Dorset (see Appendix 1) and an hour observing the service in action and talking to staff. We spoke to 56 patients over the course of our 15 visits.


Key findings

Our findings suggest that not all patients are being accurately redirected to MIUs or the UTC by other healthcare professionals, NHS 111 or the EDs.


- There is a serious lack of communication between units, patients and NHS 111.
- Patients are not aware of the difference between MIUs and UTCs and what each service provides. Patients have a common knowledge of what a pharmacy, GP and ED can provide. Most patients expressed that they would call NHS 111 or walk-in to an ED, before considering an MIU or UTC.
- Some patients expressed that they are not aware NHS 111 is a booking service (this information is provided on the NHS and Dorset Healthcare websites); it is generally thought of as an advice line and preliminary triage. We saw a mix of patients who were 'walk-ins' and some patients had been directed to the unit via NHS 111.
- Literature providing information within the units is inconsistent and out-of-date.
- In the more rural units, MIU services were being underused and they have capacity to treat more patients.
- Staff told us there has been a dramatic increase in primary care cases being seen within MIUs and UTCs. Patients who cannot get an appointment with their local GP or dentist are accessing urgent and emergency care. Some surgeries are advising patients to go to MIU/UTC due to their own lack of capacity, which is putting pressure on these services as this is not what they are designed for.
- The [Stay Well Dorset](#) website provides incorrect geographical information regarding UTCs and MIUs.


Inter-use of acronyms confuses the public

 I initially went to my GP, who informed me that I needed to attend the MIU at Poole Hospital. However, when I got to Poole Hospital you can imagine my surprise when I couldn't find it on the map or signage. I asked at reception and was told I was to attend the Urgent Treatment Centre, but I couldn't go there directly, and must go to the reception at A&E first. I felt awful queueing at A&E as it was obvious there were people there in a much worse state than me, and when I got redirected to the UTC the reception was quiet and I was seen quickly.





NHS 111 gave wrong information about MIU location

 I called [NHS] 111 as I was in Dorset on holiday visiting my son. 111 informed me that my closest MIU was either Somerset or Isle of Wight. Luckily my son is local, and knows the area, and we insisted on an appointment at Blandford Hospital.





Stay Well Dorset website has wrong geographical information

 I've been promoting the Stay Well Dorset website at Swanage Medical Practice, but then I tried following the link they give on the Urgent Treatment page for finding my nearest urgent care - it takes you to the NHS website and it gives me Boscombe & Springbourne Walk-In Service, Lymington UTC and Dorset County Hospital, with no mention of Swanage MIU or Poole UTC. I've tried at different times of the day, but always get the same results. I also tried putting Weymouth in and it just gives Dorset County Hospital, with no mention of Weymouth UTC - even though there is a piece about this service on the Stay Well Dorset website. For Wimborne, you're given Boscombe & Springbourne Walk-In Service, Lymington UTC, Central Health Clinic in Salisbury, Dorset County Hospital and an UTC in Southampton!



UTC misdirected patient to ED

 I came to the UTC at Bournemouth initially with a swollen eye (as a walk-in). They signposted me to the ED, where I took the Healthwatch Dorset survey as I was waiting to be seen. It was only after talking with the volunteer who conducted the survey that they advised me there was an emergency eye department at Bournemouth Hospital, and to check with the ED reception if I could be sent there. After talking to reception, I was referred immediately to that department. Had I not spoken to the volunteer, and without his local knowledge, I would have been waiting at the ED for over four hours!





What patients told us

Waiting times

Overall, people were satisfied with waiting times, and they would prefer to attend an MIU than an ED as the waiting times are generally significantly less.

NHS 111 booking or walk-in appointment?

There was a mix of booked appointments (58.5%) and walk-ins (41.5%). Patients who said they booked an appointment mainly did so via NHS 111, through their GP, or they booked it themselves.

Who booked your appointment?

Answer choices	Responses	
Myself	28.95%	11
Family/friend	-	0
NHS 111	31.58%	12
GP	15.79%	6
Pharmacy	-	0
Other	23.68%	9
Total		38

Many people told us they were not aware that NHS 111 is a booking service; it is generally considered to be an advice line.

Many patients said they had arrived as a walk-in, only to be sent away by the hospital to come back later (dependent on severity of condition, most hospitals had a waiting room where patients could be monitored and wait for treatment if deemed necessary).

People told us that had they known to call NHS 111 first it would have saved them a journey.

Those who called NHS 111 told us that unless they insisted on a unit which was geographically closer to them, the NHS 111 algorithms would send them to an inappropriate location based on next availability.

Travelling to get treatment

Almost 60% of the patients we talked to had travelled 0–5 miles to the MIU or UTC, taking roughly 10 minutes or less. 85% of patients travelled by car.

How far have you travelled to this healthcare setting?

Answer choices	Responses	
0-5 miles	59.62%	31
6-10 miles	25.00%	13
11-15 miles	5.77%	3
16-25 miles	1.92%	1
26+ miles	7.69%	4
Total		52

How long has the journey taken to get to the healthcare setting?

Answer choices	Responses	
0-10 mins	52.94%	27
11-20 mins	31.37%	16
21-30 mins	7.84%	4
31-40 mins	1.96%	1
40+ mins	5.88%	3
Total		51

Which mode of travel did you use?

Answer choices	Responses	
Walk	1.85%	1
Bicycle	-	0
Car	85.19%	46
Taxi	1.85%	1
Bus	7.41%	4
Train	-	0
Other	3.70%	2
Total		54

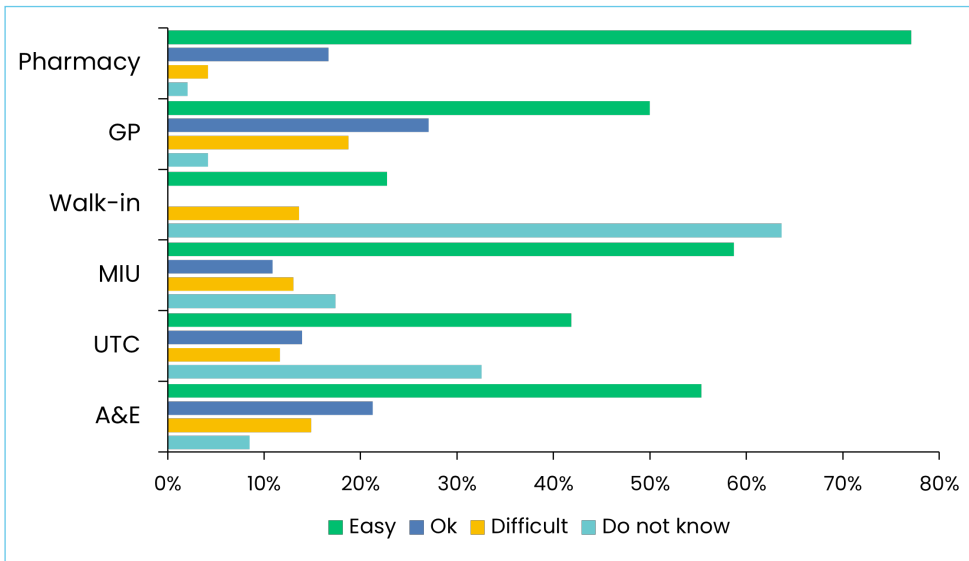
Understanding and accessing different services

Patients overall voted that it was easy to access different healthcare settings in their area but they were less confident on how to access a UTC.

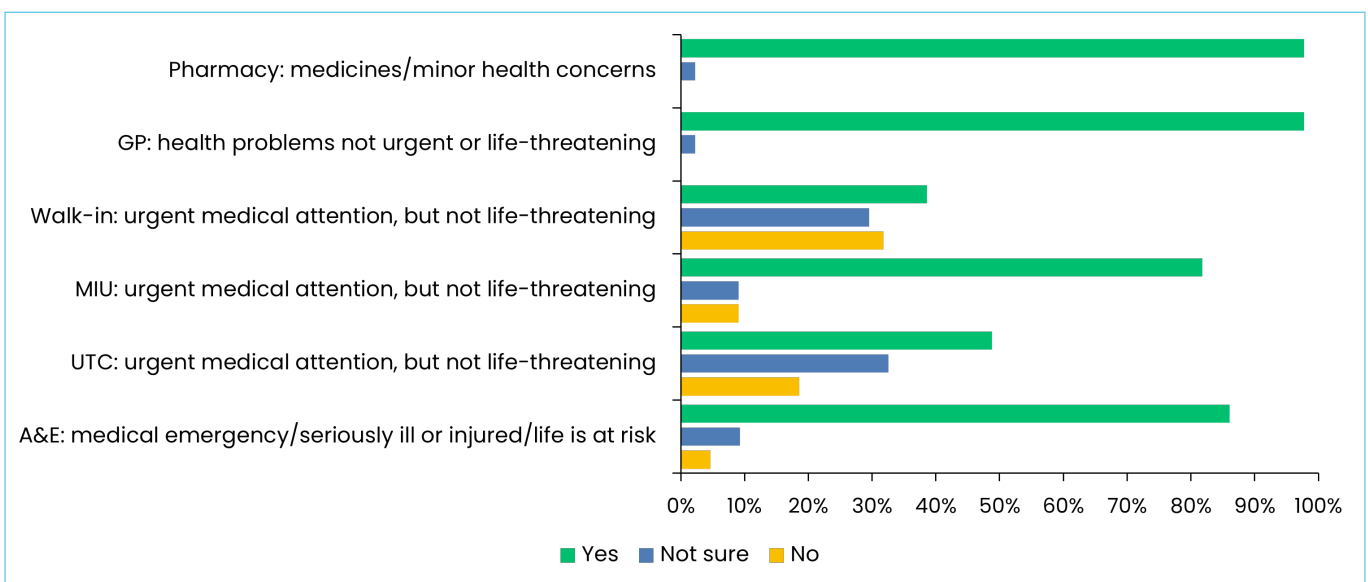
Patients said it was most difficult to access their GP compared to the other healthcare settings. Around 65% said they did not know what a 'walk-in centre' is; just over 30% of patients did not know what you could attend a UTC for; and just under 20% of patients did not know what an MIU was.

Upon initial questioning, patients accurately stated what health concerns they could see a GP or pharmacy for, but were more unsure of what an MIU/UTC/ED and walk-in service could provide. Most patients were unaware that ED was for life-threatening emergencies only.

How easy is it for you to access healthcare settings in your local area?



Do you know the difference between each healthcare setting and why you should go to one over the other?

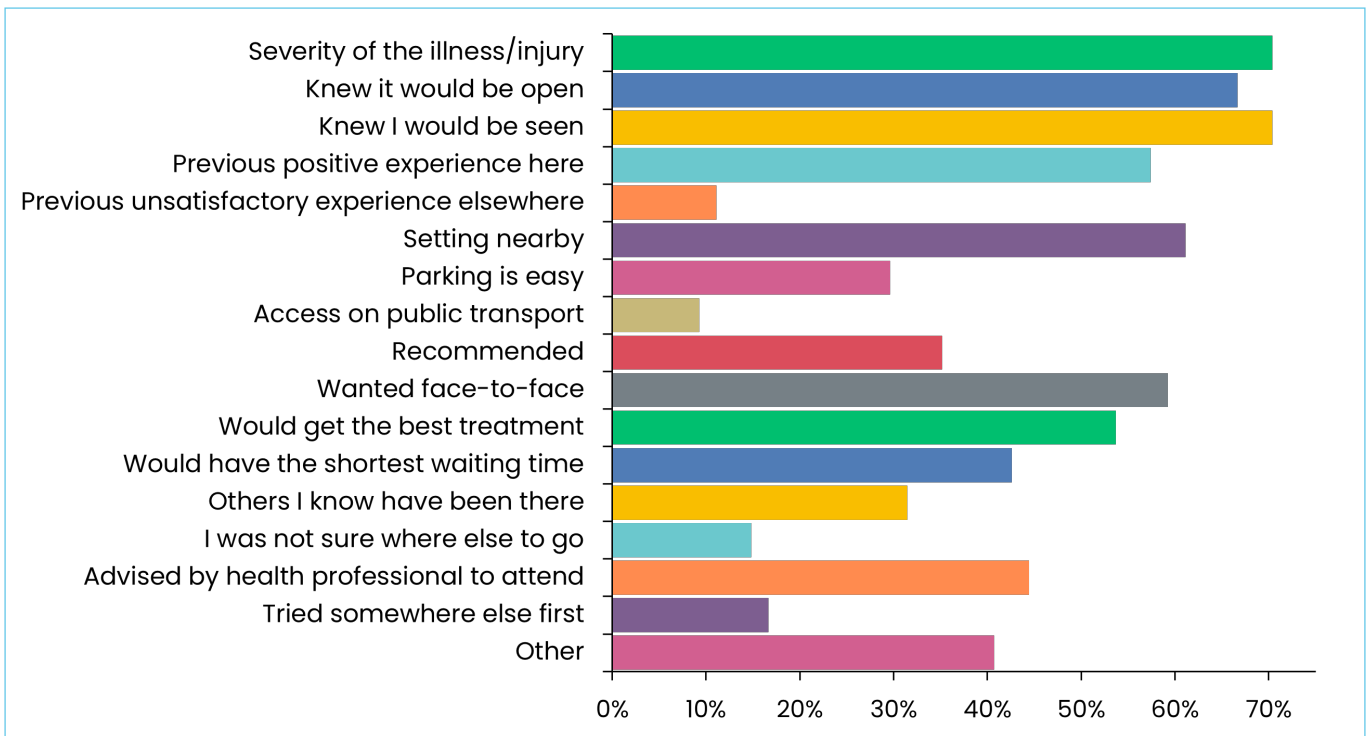


Deciding which service to use

Factors that most influenced patients' decisions about which service to visit were:

- The severity of their illness or injury
- They knew the service would be open and they would be seen
- The healthcare setting was near so less travel time
- They knew they would be seen face-to-face
- They felt they would get the best treatment
- They previously had a positive experience of the service.

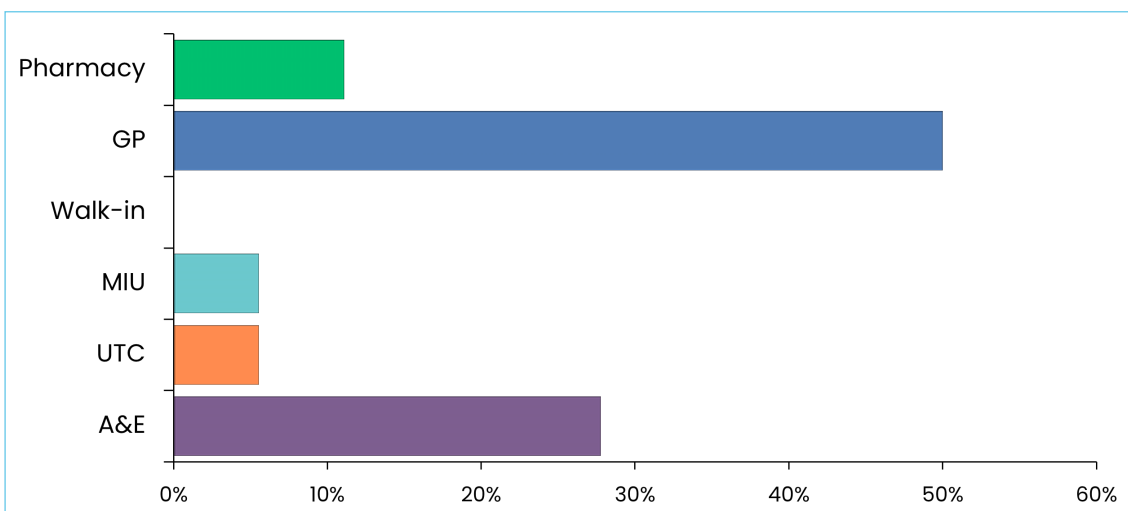
Did anything influence your decision to attend this healthcare setting for this visit?



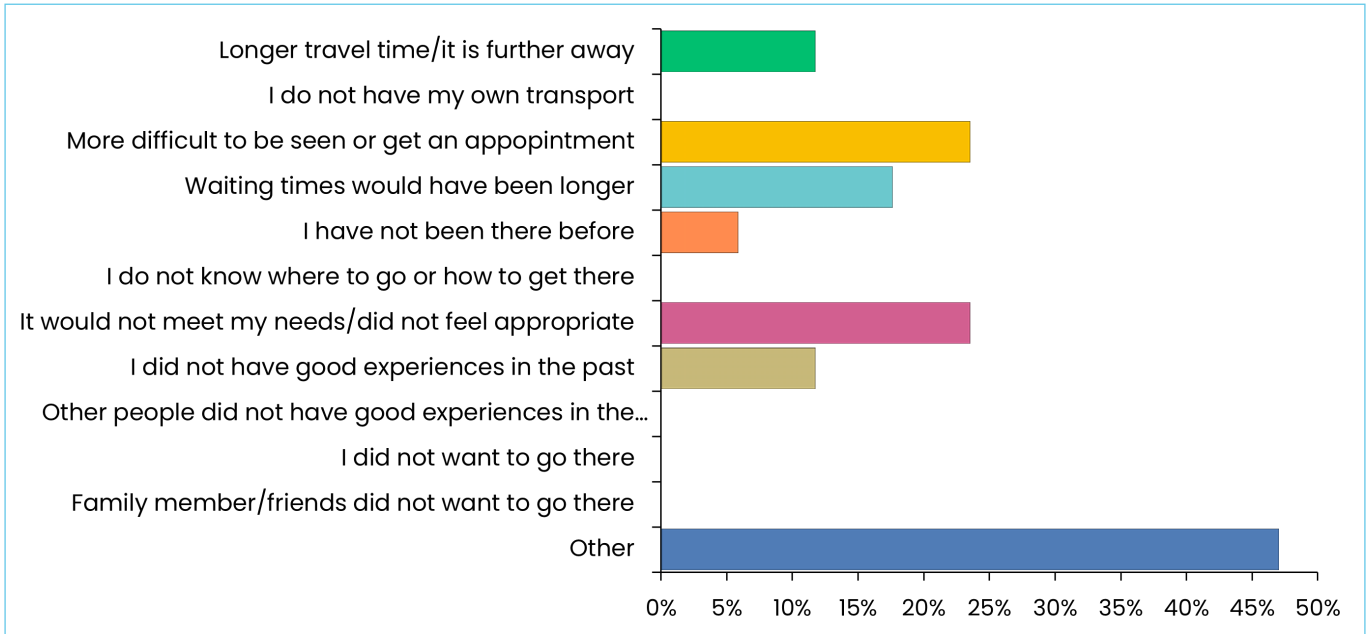
41% of patients said they had considered using another healthcare setting - 50% of these had considered their GP, 28% the ED, and 11% the pharmacy.

The main factors that influenced their final decision was their belief that they had chosen the appropriate service for their needs, it would be easier to get an appointment/be seen and the length of waiting time.

If you considered an alternative healthcare setting, which one?

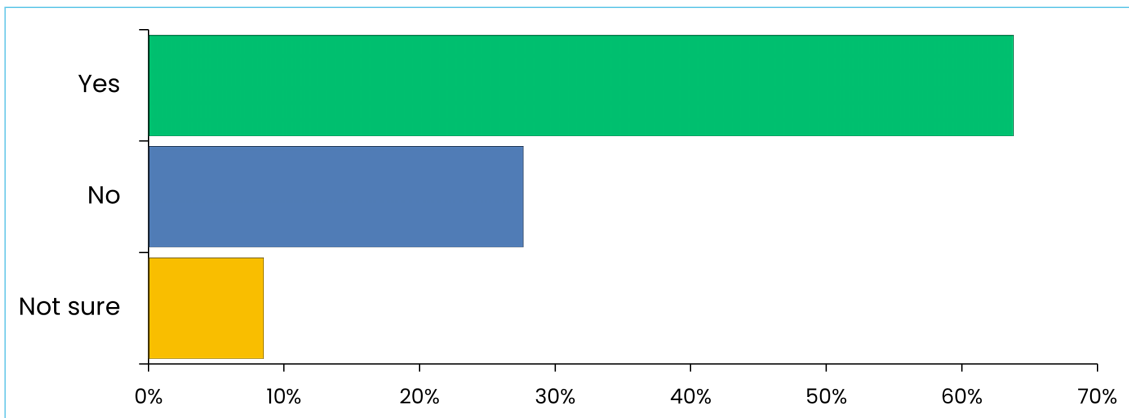


If you considered using an alternative service, what changed your mind?

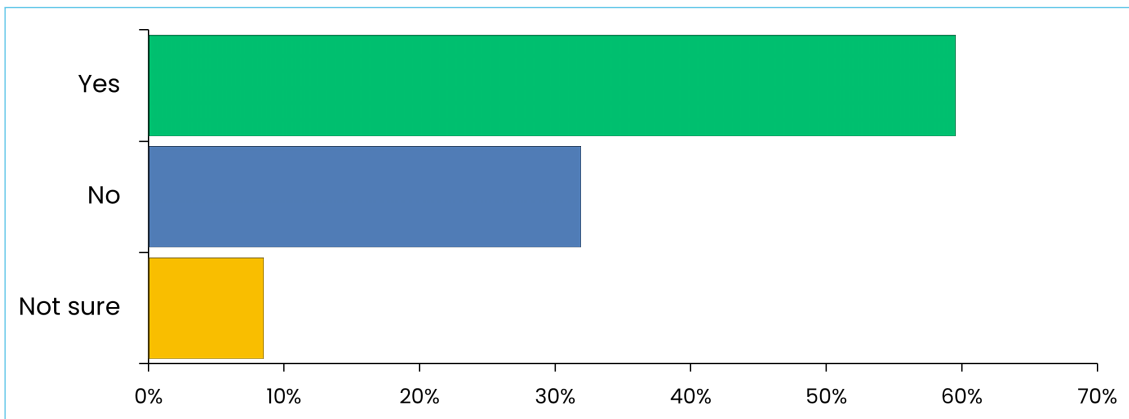


Many patients voted that if there was an App or website which showed waiting times at different healthcare settings they would use it, and it would influence their decision on which healthcare setting to attend.

If there was an App or website that showed you the waiting times at different healthcare settings, would you use it?



If there was an App or website that showed you the waiting times at different healthcare settings, would this influence your decision on where to attend?





What staff told us

Increased demand due to lack of access to GPs and dentists

Staff told us that overall, they are seeing a major increase in primary care cases. Patients who can't get an appointment with their GP or dentist are visiting the MIU and UTCs instead.

Problems with NHS 111

Staff also told us that overall, there are issues with the NHS 111 service. Many commented that they must intercept 111 bookings and redirect patients as many were put on incorrect or dangerous pathways due to the algorithm of NHS 111.

A lack of communication between units and NHS 111 has led to patients being sent to inappropriate services, geographically or in terms of the care provided. Once NHS 111 slots are filled at UTC/MIU a patient is automatically sent to ED, even though this is not the correct place for them.

Staff also felt that the NHS 111 service sets high patient expectations by promoting the idea ED 'bookings' can be made via NHS 111. They commented that patients cannot get a booked appointment in an ED, which leads to high levels of patient frustration. The NHS 111 service can check if spaces are available at EDs and send advance notice to an ED that a patient will be attending, but this does not guarantee a booked time slot or length of waiting time and patients are still required to sign in and be triaged according to urgency.

Staff shortages

Staff shortages in some units have led to decreased opening hours.

What we observed

Positives

Overall, we observed clean settings with a good range of seating, this was more prominent in larger units. The staff we spoke to were proud of their job, hardworking and organised.

Inconsistencies

There were inconsistencies across all units, with each MIU and UTC running its own way.

The message communicated by the NHS is that appointments must be booked, but in practice many MIUs and UTCs accept walk-ins. This can lead to a delay in care given to patients, depending on the severity of the condition a patient presents with.

Units are also staffed differently, so the level of care that is given is dependent on which staff are present on a particular day. Each unit also has a different check-in process for the patient, different facilities and different information on posters in waiting areas.

Underused services?

Some of the MIUs were very quiet when we visited. We used NHS data to choose the busiest times for our visits, but our observation was that rural MIUs are very underused.

NHS messaging confuses patients

We found that the public don't currently know where to go for the treatment they need because messaging from the NHS is so confused. People do not know about MIUs and UTCs and the NHS Dorset Stay Well website and NHS 111 confusion means patients are inappropriately attending ED rather than other services. This is significantly increasing the waiting times at ED, leading to feelings of aggravation and frustration.



There is indeed real confusion on what services are specifically available and under what circumstances a patient can access those. The first point of contact at reception does not dovetail the services available and increases patient stress and discomfort in what is clearly a difficult set of circumstances. However, on the plus side, NHS are seeking to improve services via patient experiences.

Paul, Healthwatch Dorset volunteer



The common theme of patient comments was the lack of availability of GP appointments. Patients felt their concerns if treated earlier at primary level might have prevented their use of hospital facilities. My observations were that each hospital facility was unique, operating well independently. The NHS staff interviewed were polite, knowledgeable, and professional, able to manage unexpected situations effectively and in a timely manner.

Abbigail, Healthwatch Dorset volunteer



Recommendations

We believe that health and care providers can best improve services if they listen and learn from people's experiences and feedback.

Based on what patients and staff told us we recommend the following actions to help improve public understanding of the different urgent and emergency care services in Dorset, and to support more effective service delivery and better access to the right care.

1. There is an urgent need for good communication with patient pathways clearly explained. The acronyms MIU/UTC are confusing for the public and terminology isn't consistent across the sites. We recommend a clear, simple definition of the different services provided at each unit, and in primary care settings. Ensure all the sites have clear signage so that when people are directed to them, they know where to go.
2. Engage with front line staff. Ask them regularly about the types of patients they are seeing, and ways in which to improve the service for staff and patients alike. Celebrate and replicate models in units which are working well and gain shared learning.
3. NHS 111 algorithms and pathways need to be re-examined to support clear signposting that does not send patients to ED if they could be more appropriately seen somewhere else. NHS 111 staff should talk to the patients about their options, rather than placing them wherever the next available slot is allocated.
4. We recommend a more consistent service is offered across MIUs and UTCs, with evenly distributed staffing to enable the units to provide the same level of care and opening hours across the county. This would help to guide patients to the most appropriate care setting and cut down on the pressure felt at EDs.
5. The [Stay Well Dorset](#) website needs to be urgently updated to provide accurate geographical information about UTCs and MIUs in Dorset.
6. Launch a targeted NHS public awareness campaign about the different types of healthcare facilities and their specific roles and services. Enhance communication by collaborating with local healthcare providers, community organisations, and media outlets to disseminate accurate information about accessing health care.

Next steps

We have shared this report with NHS Dorset, University Hospitals Dorset NHS Foundation Trust (UHD), Dorset County Hospital, Dorset Healthcare and NHS 111 to highlight the difficulties faced by people trying to access MIUs and UTCs across Dorset. We have also shared our report with Healthwatch England.

We are now working with NHS Dorset and our local hospitals to include patient engagement and experience in the design and delivery of services. The outcomes from this project will give NHS Dorset a better understanding of local needs and community assets, inform planning for access to MIUs/UTCs and improving general patient experience, as well as addressing staff needs and concerns.



Stakeholder response

**Dorset HealthCare University
NHS Foundation Trust:
James Spriggs, Transformation Project Manager**


Dorset HealthCare University
NHS Foundation Trust

Dorset has a huge opportunity to remodel our Urgent Care services in line with population need. National guidance emphasised the confusion generated by having a model with multiple layers and many services with different names that provide very similar types of treatment. The Urgent Care Transformation Programme was set up with the objectives of creating an objectively clear and consistent Community Urgent Care Offer in Dorset, while increasing staff and public satisfaction and wellbeing. One of the key ambitions is to co-design and co-produce the new care model with the public. To do this effectively, we need to take an evidence-based approach and garner public opinion to inform the design.

The knowledge and experience of Healthwatch and the team of volunteers has supported us to gather hugely valuable evidence directly from people using our services. The team have gained access to feedback from groups we would not have otherwise heard from and shown real flexibility and determination to do so. Feedback during the process also enabled the team to make the approach more effective and we can learn lessons for future public feedback exercises. The people involved are obviously very passionate and considerate of the situation and the work they have completed adds genuine weight to the case for changing the way we deliver Urgent Care services in the future.

Acknowledgments

We would like to thank everyone who shared their experiences with us - without you we would not be able to do the work that we do. We would also like to thank the staff at each hospital who supported our visits and our dedicated volunteers for carrying out all of the site visits across Dorset.

If you'd like to find out more or share your experience of using urgent and emergency care services in Dorset please visit our website: healthwatchdorset.co.uk/talk-to-us/your-views-and-experiences.

Appendices

1. NHS Dorset Survey

Urgent Care – Your Experience

Your choices to access healthcare services in Dorset

Urgent and emergency care services are currently seeing high volumes of people needing treatment.

We know urgent care services can be difficult and complex to access and we would like your help to improve this. To help us understand how our services are being used we would appreciate you taking 10-15 minutes to answer this survey. Understanding what is important to you will really help us in addressing some of the big challenges we are facing.

The information will be collected and seen by NHS Dorset and health and social care partners in Dorset. The survey will not request any personally identifiable information and therefore all responses will be anonymous. Information collated will only be shared with project partners.

1. Which healthcare setting did you visit?

- Dorset County Hospital
- Poole Hospital
- Yeatman Hospital – Sherborne
- Wareham Community Hospital
- Bridport Community Hospital
- Weymouth Urgent Treatment Centre
- Swanage Community Hospital
- Royal Bournemouth Hospital
- Christchurch Hospital
- Blandford Community Hospital
- Victoria Hospital – Wimborne
- Westminster Hospital – Shaftesbury
- Other

2. Date of your visit.

3. What time did you arrive at your healthcare setting?

- 12 am to 2 am
- 2 am to 4 am
- 4 am to 6 am
- 6 am to 8 am
- 8 am to 10 am
- 10 am to 12 pm
- 12 pm to 2 pm
- 2 pm to 4pm
- 4 pm to 6 pm
- 6 pm to 8 pm
- 8 pm to 10 pm
- 10 pm to 12 am

4. What was your reason for your visit to the healthcare setting?

5. Who was the visit for?

- Myself
- Family – adults
- Family – children
- Friend
- Other

6. Please tell us the age of the person who the visit was for.

- Under 18 years
- 18–24 years
- 25 to 34 years
- 35 to 44 years
- 45 to 54 years
- 55 to 64 years
- 65 to 74 years
- 75+ years

7. What is the first part of your home postcode?

8. How far have you travelled to this healthcare setting?

- 0-5 miles
- 6-10 miles
- 11-15 miles
- 16-25 miles
- 26+ miles

9. How long has your journey taken to get to the healthcare setting?

- 0-10 mins
- 11-20 mins
- 21-30 mins
- 31-40 mins
- 40+ mins

10. Which mode of travel did you use?

- Walk
- Bicycle
- Car
- Taxi
- Bus
- Train
- Other

11. Were you attending a booked appointment?

- Yes
- No

12. Please describe the process of how you were welcomed on arrival.

13. On a scale of 1 to 10 how welcome did you feel? (1 = Not welcome, 10 = Very welcome)

14. Did anything influence your decision to attend this healthcare setting for the visit?

- The severity of the illness/injury
- I knew it would be open
- I knew I would be seen
- I've had a previous positive experience here
- I have had a previous unsatisfactory experience elsewhere
- The setting was near so there was not much travel time
- Parking is easy
- I can access the setting using public transport
- Someone recommended going to the setting
- I wanted to be seen face-to-face
- I thought I would get the best treatment
- I thought it'd have the shortest waiting time
- Others I know have been there
- I was not sure where else to go
- I was advised by another health professional to attend
- I tried somewhere else first
- Other

15. How easy is it for you to access healthcare settings in your local area?

(Easy | OK | Difficult | Don't know)

- Pharmacy
- General Practitioner (GP)
- Walk-in
- Minor Injuries Unit (MIU)
- Urgent Treatment Centre (UTC)
- Accident and Emergency (A&E)

16. If you have described any of the healthcare settings as difficult to access, please explain why

17. Do you know how to access healthcare settings in your local community?

(Yes | No | Not sure)

- Pharmacy
- GP
- Walk-in
- MIU
- UTC
- A&E

18. Please explain your answers to question 17 if required.

19. Are you familiar with the advice for accessing different types of healthcare setting?

(Yes | No | Not sure)

- Pharmacy (medicines and minor health concerns)
- GP (health problems not urgent or life-threatening)
- Walk-in (Urgent medical attention but not life-threatening)
- MIU (Urgent medical attention but not life-threatening)
- UTC (Urgent medical attention but not life-threatening)
- A&E (Medical emergency where someone is seriously ill or injured and their life is at risk)

20. Did you consider attending a different healthcare setting?

- Yes
- No

21. If your answer to question 20 was Yes, please select which alternative healthcare setting you considered?

- Pharmacy
- GP
- Walk-in
- MIU
- UTC
- A&E

22. If your answer to question 20 was Yes, what changed your mind?

- It would have meant a longer travel time/it is further away
- I do not have my own transport
- It would be more difficult to be seen/get an appointment
- Waiting times would have been longer
- I have not been there before
- I do not know where to go or how to get there
- It would not meet my needs/it did not feel appropriate
- I have not had good experiences in the past
- Other people have not had good experiences in the past
- I did not want to go there
- Family member/friends did not want to go there
- Other

23. Is there anything else you would like to share with us about your awareness of healthcare settings, how you use them, or what is important to you when you have an urgent health need?

Equalities Monitoring

The following questions will help us to make sure we provide the best level of care for people from all walks of life and communities. We will keep your answers confidential, and they will not be linked to your medical records. You do not have to answer these questions if you do not want to.

24. Ethnic origin

- Bangladeshi
- Indian
- Pakistani
- Any other Asian background
- African
- Caribbean
- Any other black background
- White and Asian
- White and Black Caribbean
- Any other mixed background
- White
- Prefer not to say
- Other

25. Please select your age

- 0-18
- 18-29
- 30-49
- 50-69
- 70+
- Prefer not to say

26. With what gender do you identify?

- Male
- Female
- Nonbinary
- Prefer not to say
- Other

27. Is your gender identity the same as the gender you were registered at birth?

- Yes
- No
- Prefer not to say

28. Please select the option that best describes your sexuality

- Heterosexual
- Homosexual
- Bisexual
- Prefer not to say
- Other

29. Do you consider yourself to have a disability?

- Yes
- No
- Prefer not to say

Thank you for completing this survey

If you have any questions or comments about the survey or its contents, or would like to speak to us further about your experience, please contact communication@nhsdorset.nhs.uk

2. Summary of our observations and recommendations for each unit visited

The following information is based on our volunteer's observations of each unit during a three-hour visit. Staff were aware we were visiting at the exact date and time. Each unit was only visited once, except for Swanage MIU. The following findings are of the perception of the volunteers only during this time frame. We acknowledge that our observations are, in most cases, based on one visit – and we cannot assume that what was seen during these visits necessarily reflects what is happening at other times.

Note: For all rating figures given below, 5 indicates the best rating and 1 the poorest rating.

Blandford MIU

First impressions of this service were rated 5/5

The waiting area is clean and very spacious with a variety of chairs in all sizes and wheelchair friendly. There are toilets located in the waiting area, as well as free Wi-Fi, PPE, water dispenser, and a vending machine. A notice board displays accurate and up to date information. We were especially impressed with the poster advising if a patient wanted to speak privately to inform staff – this was lacking at all other units visited.

There is a café located on site of the hospital but not near MIU. Signage inside the hospital is good and easy to follow. Easy to navigate from the road as well. Parking is free but car park is small. On-road parking available but patient may be forced to park quite far, bear this in mind if difficulty walking to hospital. Inform reception staff if you require a wheelchair, as to get to the MIU you must walk through the main hospital.

Upon entry to the MIU you must press a bell to inform staff you have arrived. It is not apparently clear that this is the check-in procedure. There are signs detailing this, but they are not obvious, and the bell is not in a position of clear view. Booked appointments only. If patients walk-in, they will be sent away to come back later that day or the next to control the allocated timings. Call NHS 111 to book an appointment. Booked appointments only mean patients are seen quickly and effectively, and the MIU is very organised. Patients get 30-minute slots for appointments, which means wait times are virtually non-existent and there is no cause for overcrowding in the waiting area.

Staff reiterated similar sentiments about the NHS 111 service. It doesn't work effectively. Patients are placed on incorrect pathways and easily get lost in the system. The staff here would like patients to walk-in and wait so local staff can professionally triage. Patients complained of not knowing they had to book the MIU through NHS 111, they also told us that 111 redirected them to other units, not Blandford, some as far as Somerset or the Isle of Wight.

Lasting impressions of this service were rated 5/5

Patients were seen quickly and efficiently, and the waiting area was calm, clean and quiet. Negative comments stemmed from NHS 111 confusion NOT about the MIU.

Bournemouth UTC

First impressions of this service were rated 4/5

Staff were accommodating and forthcoming. Patients were easily directed and could self-refer to UTC. Good signage internally and externally. UTC was very easy to find. Everything was 'on your doorstep', no corridors to navigate.

Large spacious waiting room easily accessed and signposted from East Wing entrance. Drop off zone directly in front of entrance; car park directly in front of entrance but small. Large car park to the rear of the building. Fees paid. Good layout and patient flow. Space was clean and well-ventilated with lots of room.

Facilities included vending machine, water dispenser, toilets, television, teleprompter displaying waiting times, a café a short distance away and NHS volunteers to assist. Wi-Fi is provided but does not work. Patients commented on this as service was also bad inside the hospital so no means of distraction through internet.

The reception is positioned away from main seating area allowing for a greater deal of privacy and dignity. Patients could walk-in or book through NHS 111 and could self-refer directly (no need to go through ED, and ED patients were signposted to UTC). It is obvious that this was a busier unit than the more remote ones visited, but the combination of walk-ins and booked appointments meant longer waiting times and raised feelings of anxiety and frustration from patients.

Staff were well organised, energetic and friendly, gave patients confidence that they would receive the best treatment. Staff commented that to improve the service better information and education around the different healthcare settings should be targeted at the public and be more accessible, cohesive, collaborative, and clear.

Lasting impressions of this service were rated 4/5

The main thing that let this unit down was the lack of Wi-Fi and signal for communication and distraction (and conducting surveys!)

Bournemouth ED

First impressions of this service were rated 3/5

The waiting area is small for an ED, but clean and patient pathway is clearly displayed on the walls in an inviting and concise manner. Patients seemed distressed and most declined to take part in the survey. Some had come from UTC, but none were being directed from ED to UTC.

Patients can walk-in or be referred from UTC/healthcare professional/NHS 111. Check-in at reception and were then triaged before proceeding to wait.

Nursing staff were informative and helpful. Reception staff were very busy.

There was no teleprompter displaying wait times, but we were told it was around four hours. This was not communicated to patients, however. It would be helpful for patients to know this as there was an aura of anxiety amongst them at lack of updated information available.

There is adequate seating, of varying sizes and well-spaced. On the day of the visit the waiting area was quiet, clean, and clinical. Patient flow is straight forward (and the process clearly advertised), signage for the ED is clear and bold and easily recognisable. Pick-up/drop-off outside the UTC only, directly in front of ED for ambulance only. Patient would have to travel from UTC to ED (same as Poole Hospital – staff commented that the ‘two front doors’ can be confusing for patients).

Wi-Fi is provided but it does not work. The walls of the waiting area are busy with information but at least this gave patients something to read. A lack of access to Wi-Fi/signal meant many patients got restless at the lack of distraction. A vending machine, water dispenser and toilets are available.

Staff fed back that they were seeing an increase in primary care cases (a common theme across all units). Staff also told us that they receive abuse and threatening behaviour from patients daily.

Lasting impressions of this service were rated 3/5

General communication to the public regarding alternative healthcare settings needs to be consistent and widely publicised.

Bridport MIU

First impressions of this service were rated 5/5

Staff were welcoming, friendly, incredibly helpful, and very professional. They listened to patients needs and asked the right questions; kept calm and were reassuring. Staff were organised and effectively intercepted patients as they entered the hospital and put them on the correct pathways.

Staff reported that they are seeing a major increase in primary care cases and younger children. The same applies for dental cases, which causes a predicament as the national guidelines state they cannot treat or prescribe for cases regarding the teeth, but can treat and prescribe for the gums, but only if a follow-up appointment is made with a dentist. But what happens if you cannot get a follow-up dental appointment? Read our latest report on the dentistry crisis in Dorset - [Why are people finding it difficult to access NHS dental care in Dorset?](#) (February 2023).

Other comments were made about patients being redirected from Dorchester (DCH) to Weymouth and Bridport. Patients felt frustrated about being 'ping-ponged' between units. Staff seemed unaware of the changes made recently to the ED and OOH GP service at DCH, and the reasons why patients were being redirected.

Large waiting area was quiet with a very homely feel, well-ventilated and did not feel clinical. Wi-Fi provided as well as vending machine, television for entertainment, water dispenser and magazines. Notice boards are clear and display information well. However, information displayed is incorrect and needs updating, the messaging was inconsistent with what we were told by the staff. Large carpark on site free of charge. Signs are easy to follow and consistent. Signage to the hospital from town very clear and easy to navigate.

Patients were relaxed and happy to participate. Patient flow is very good, with seamless transition between waiting to triage to X-ray (if needed). Patients seen promptly and there was no waiting time.

Booked appointment only through NHS 111 and walk-ins. Would see walk-ins there and then if had capacity but generally stick to allocated time slots. The pathways are incredibly quick.

Lasting impressions of this service were rated 5/5

Dorchester Out Of Hours (OOH) GP

First impressions of this service were not indicative of the service provided as we were declined access by the staff due to a lack of communication about our planned visit.

Second impressions of this service were rated 5/5

The area was clean, nicely laid out with plenty of seats and staff were pleasant and made the area welcoming.

Staff were happy to help and very friendly and knowledgeable, came across very professional and instilled confidence that they would treat patients well. They expressed a frustration regarding the location of the service, it is a satellite unit, and they would like a permanent space. Currently space is used for other clinics in the day and shared with dermatology at the weekend. Staff expressed that they struggle with staff shortages. Due to being OOH staff struggle with accessing pharmacies which do not run out of hours and prescribing medicine to patients who need it. Patients become frustrated as unable to access the medication needed to recover, but the unit can only store so much temporarily. Staff said that the terminology is too convoluted and needs to be simplified for the sake of patients, they said they think the services could be improved through better patient education around the different healthcare settings.

Patients were happy to partake in the survey, very calm, and happy with the service provided. They were seen quickly, even with the 30-minute delay. Negative comments mostly arose from not being able to access medications from local pharmacies (including hospital pharmacy) as none operated outside of usual business hours.

Wi-Fi is provided and it works. There is a vending machine and water dispenser, television for entertainment and parking on site close to the unit. Staff informed us that if there was a particularly long wait that they would even print out crosswords for patients, which we thought was a kind, personal touch.

The waiting area is bright and spacious and decorated well without being 'too busy', but signage is very poor. No obvious signs for the bathrooms, and signs for the unit are homemade and on a board propped up on a stairwell outside the main entrance to the unit. There is no official signage for the unit, and staff even struggled to tell us how to access the service. NHS 111 does give accurate directions via text if booked appointment through them.

To access this service patients must book through NHS 111, however they accept referrals from ED and, dependant on capacity, will see walk-ins, but this is not standard practise. However, staff explained that they would never turn a patient away, they would ask them to wait to be treated or signpost to ED. We witnessed appointment slots running with a 30-minute delay due to walk-ins (we witnessed two), but patients did not seem to mind.

Lasting impressions of this service were rated 4/5

Dorchester ED

First impressions of this service were rated 5/5

It is apparent that the recent renovations to the ED department have significantly improved the service provided.

The waiting area is clean, spacious, light, airy and bright. Information is clearly displayed but needs updating – too much conflicting information on posters. Some signs need updating.



Patient flow is good, smooth, timely, functional and privacy and dignity were taken into consideration. Patients were happy to take part in the survey, seemed well informed and kept up-to-date as well as pleased/thankful for the facilities in ED and the staff taking care of them. Patients felt reassured and safe. By moving through the different pathways and different waiting areas patients didn't have time to feel restless or aggravated. We witnessed patient turnaround time to be around two hours in ED.

ED accepts walk-ins, ambulance, referral from healthcare professional and NHS 111 (no bookings). Main reception directs to triage, patients seen in under seven minutes by triage, then directed on to relevant area for level of care after assessment. There are several patient areas – pre-triage, 'fit to sit', 'seat and treat' and a general reception area which is used for relatives waiting and a children's waiting room. Fit to sit and seat to treat essentially work as an MIU, which enables the ED to be effectively reserved for patients with life-threatening conditions and function as it is intended.

Wi-Fi is provided and works well. Lots of seating of various sizes in various arrangements which even at full capacity ensures the spaces never feels crowded. A television and magazines are provided for entertainment, there is a water dispenser, parking (fees apply but free at the time of visit due to expansion of new multistorey car park) and NHS volunteers on site.

Staff came across as relaxed and friendly, professional, quick, efficient, smiley, very caring and kind.

Lasting impressions of this service were rated 5/5

The system in place is efficient and addresses the patient need. Patients are moved through pathways clearly and effectively. Separate zones are clearly defined and appropriately staffed to ensure patients receive the correct treatment. Patients have fed back annoyances about being sent to the other units (Bridport MIU and Weymouth UTC); clearer information would improve this.

NB: Healthwatch Dorset carried out a 'telephone interview' project with recently discharged patients of the ED in 2022. Many of our recommendations have been implemented. Read the full report - [*Dorset County Hospital A&E: People's experiences - What works well and what could be improved?*](#) (April 2022).

Poole UTC

First impressions of this service were rated 3/5

This rating was given as there was a lot of redirection and initial confusion upon finding the unit. Several times the UTC was called the MIU by healthcare professionals inside the hospital, and we heard directly from a patient of their GP doing the same. The acronyms are confusing, and this was highlighted in the results from the patient feedback. Patients cannot refer to UTC directly, they must be directed from ED or NHS 111.

Receptionists were helpful, friendly, and welcoming. We observed that the staff were organised and not stressed and eager to help with our project.

Patients were happy to partake in survey, calm, and seen very quickly due to allocated time slots. Patients waited a minimal amount of time (30 minutes) if staff were delayed. Patients were happy to wait this extended period.

Seating area was small for the size of the unit, was calm and quiet. There was no decoration or stimulus. Overflow seating was in the main corridor of the hospital. Staff told us there was an issue with children running/playing in the corridor while waiting. Due to the location of UTC next to ED beds get wheeled past very quickly. There was a lack of seats with armrests which are essential for patients who struggle to get up and off chairs. Teleprompter advertises waiting times above UTC reception but not in the waiting area. Separate reception allows for a greater deal of privacy and dignity for patients. Free Wi-Fi is provided and works well. Other facilities include water dispenser, paid parking (although far from the UTC, a wheelchair would be required for patients who struggle walking) and NHS volunteers to assist with signposting. There is also a small shop.

Lasting impressions of this service were rated 3/5

After our observations it was surmised that there was room for improvement in areas regarding signage.

Poole ED

First impressions of this service were rated 1/5

Signage from main reception indicates that you access ED via external doors. There is still some confusion from the public regarding entrance and drop off area as the UTC and ED entrance historically was the original hospital entrance. Outside the ED entrance there was quite a lot of litter, and the first point of contact is a very small access area where you must wait to be admitted.

Seating was poor. Not enough and no variety. None with armrests. Not particularly wheelchair friendly.

Wi-Fi is provided and it works well, the only other facilities are NHS volunteers. The general environment of the waiting room is dull. Very stuffy, no ventilation and no air conditioning on. Patients seemed bored or fed-up. Out-dated furnishings and well-worn. No entertainment or means of distraction provided, no TV or magazines (this could be due to infection control although we have seen this provided at other services). Not a very welcoming environment.

Staff were friendly, not rushed. Forthcoming with information. They make a great team, but they told us retention of staff is difficult. They can recruit but they cannot retain.

The check-in process for Poole ED is a nurse at first point of contact. From there walk-ins are admitted to waiting area and seen by triage (this occurs quite quickly). Staff commented that average waiting time to be seen was four hours however patients told us that they had already been waiting for six hours and almost 10 hours respectively. One patient said he was at ED at total of 27 hours upon last visit.

There is a flow-chart describing patient journey through ED in the main waiting area which is good for managing expectations (to a degree). Signage from main reception advises to access ED externally (although you can internally, this is what we experienced by putting ourselves in the patients' shoes). Pickup/drop off point for ED unclear. Only ambulances outside the main doors. Patients would struggle to access if were unable to walk. Main drop off area for ED is at main hospital entrance, very small and not ideal. No teleprompter present advertising waiting times. Volunteers present once through the waiting room doors after admittance providing tea and biscuits and having a chat. Sometimes would ask patients waiting if they would like a drink. No water dispenser. Costa Coffee round the corner but patients don't feel confident leaving the waiting area unless they are called but have no idea when that would be. Once admitted patients generally gave positive feedback about staff and volunteers.

Lasting impressions of this service were rated 3/5

Staff are undergoing major changes in the hospitals currently. Poole ED will become a 24/7 UTC. Undergoing processes now to streamline patients from Poole to Bournemouth future ED (including transport). Public are nervous about this merger and the dissolution of the ED, however if they had greater understanding of what the UTC offers this would ease tensions.

Ideally would like public campaign like NHS 111 First campaign to educate public on UTC/MIU. Seeing a big increase in primary care cases. Did not know that Swanage MIU was reducing service hours which may put pressure on Poole UTC/ED - lack of communication and consistency between units. Would benefit from collaborative working and improved communication.

NB: Healthwatch Dorset carried out two patient experience surveys at Poole ED in 2019 and 2021. Many of our recommendations have been implemented. Read the full reports:

- [*What matters to people using Poole Hospital Accident & Emergency?*](#) (February 2020)
- [*Poole Hospital A&E: Local people's experiences - What works well and what could be improved?*](#) (September 2021)

Shaftesbury MIU

First impressions of this service were rated 3/5

We arrived on a day of covid vaccinations which made parking difficult and the hospital incredibly busy. It was a very small hospital for the volume of people occupying it, making the waiting area overly warm, loud, and uncomfortable. The waiting areas were not clearly defined, and there was an aura of organised chaos, but the staff were very helpful despite running behind schedule due to shortages.



Not easy to find, the hospital is in a small residential area down a narrow road. Small car park provided free of charge; if full patients have to walk quite far to access the service.

Small waiting area inside the hospital, not enough chairs provided. Not wheelchair friendly if hospital running at full capacity with patients. Wi-Fi is provided free of charge, as well as a vending machine, water dispenser, magazines to read, and volunteers present to assist. Hospital was very clean. A noticeboard displaying information and staff working is present in the waiting area and a nice personal touch to help patients feel at ease. The environment is well lit, decorated, and ventilated.

Signage unclear within the hospital and externally in town was poor. Not obvious where toilets located. MIU was booking only, well organised and had quick turnaround. On the day of the survey MIU patients were waiting an extra 30 minutes due to staff shortages. Walk-ins were turned away and booked for an appointment same day or next day. Patients expressed issues with the NHS 111 service, not knowing they had to book to be seen.

Patients were happy to take part in the survey, happy to wait past appointment slot due to the level of care received from staff and happy to come back later/another date due to the confidence in the service provided. Patients were calm despite the chaos of the vaccinations taking place. Any negative comments were directed at the NHS 111 booking service.

Lasting impressions of this service were rated 3/5

This is a small hospital and on the day of our visit was very busy which didn't leave us with much confidence around waiting times, but the staff were lovely and so helpful, and we don't doubt the level of care and treatment that patients would receive.

Sherborne MIU

First impressions of this service were rated 5/5

The waiting room (despite its small size) is clean, bright with clear signage (internally) and welcoming staff. No external sign stating MIU, and signage in town was poor.

Very small service with limited opening hours and staff. NHS 111 needs to be updated on this fact as we heard that patients were being booked appointments on days when the service was closed, which leads to frustration on the patient and staff's expense.

Limited number of seats, but Wi-Fi provided along with a water dispenser. Car park was free but small. No toilet.

Accepted NHS 111 bookings and walk-ins. This meant patients would have to wait, and the waiting area couldn't accommodate. Delays in the service meant patients were generally restless and anxious due to the mix of booked appointments and walk-ins, patients were not seen at their allocated time. Privacy and dignity should be given better dedication as patients can hear what is occurring in triage through the MIU doors from the waiting area. The staff present were doing a heroic job of trying to treat patients in order of need, rather than order of appointment, but it felt disorganised and ineffective. The space was very calm when not busy but felt noisy and cramped when an influx of patients walked in, which led to delays of booked appointments.

Staff informed us that the NHS 111 booking system was ineffective (a similar sentiment shared across most units) as the information communicated had not been updated to inform NHS 111 that the service was running on reduced hours. Due to staff shortage, it also made it more difficult to intercept incorrect NHS 111 bookings and redirect effectively – which is time consuming.



Lasting impressions of this service was rated 3/5

The staff were doing their best to deal with an influx of patients, but due to staff shortages, were not able to meet patient need.

Swanage MIU

This report is based on observations made by Healthwatch Dorset volunteers during three visits to the MIU – they were there for six hours in total.

First impressions of this service were rated 4/5

The MIU was easy to find, with free parking on road outside the hospital. Depending on the luck of the day, patients may be required to walk up or down the steep road outside the hospital to get to the MIU, which could prove inappropriate for some.

The waiting room is very small, with overflow in the corridor, quiet, welcoming, tidy, and clean. A water dispenser is present but on the day of our visit no cups provided to drink the water from. Free Wi-Fi is the only other facility at this unit.

Staff were friendly and forthcoming with information, calm and professional. The receptionist at the main entrance books patients in on the IT system and then directs them to the waiting area. There is signage to show patients where to go but this was unclear and could be improved. Staff impressions are that the service is underutilised – access to the MIU was harder during the pandemic and they thought that the public's perception may not have changed since the return to 'normal'. They also informed us that some patients are put off by having to ring NHS 111 first. They said that GP practices are advising patients to attend the MIU inappropriately and misleading patient expectation.

Patients expressed irritation at being asked to ring NHS 111 before attending as a walk-in, which historically you could do. Since the pandemic there has been a large public campaign around NHS 111 First. The Receptionist commented that it was better for patients to call NHS 111 to manage capacity better and ensure patients were placed on correct pathways. However, staff would still see walk-ins, which could lead to greater waiting times at peak periods.

On the days of observation very few patients used this facility. We speculated that this was likely to change during the peak tourist season over the summer with more holiday makers potentially using the service.

As of 19 June 2023, we understand that the opening hours of Swanage MIU have been reduced with immediate effect due to staff shortages. This is likely to have a direct impact on the capacity of the 999 service and Poole UTC and ED.

Lasting impressions of this service were rated 5/5

Weymouth UTC

First impressions of this service were rated 5/5

Main reception is clear, large, light, airy, and clean with a variety of seating options and plenty of room for wheelchairs. Nicely decorated and welcoming with small, homely touches, a friendly, open space. Staff are friendly and approachable. The unit was well organised and calm, we felt confident that patients would be seen in a timely manner and receive the best treatment. Patients flow through the system effectively on their treatment pathway.

Facilities available include toilets, television for entertainment, vending machine, Wi-Fi, water dispenser, children's waiting area, and large car park (charges apply). The signage from the main waiting area for the toilets and water dispenser/vending machine are out of sight, we recommend moving the signs to be more accessible for patients waiting. Signage in town is virtually non-existent for the hospital or hospital carpark. A teleprompter in the

main reception area clearly displays waiting times and additional information. We were especially pleased to see a clear, uncrowded noticeboard which displayed information about the UTC but also local community support and organisations (this was not witnessed at any other unit and would be a recommendation for other units moving forward).

Weymouth UTC sees a mix of NHS 111 bookings and walk-ins.

During our visit patients were seen quickly and due to information displayed regarding waiting times, happy to wait. There is a separate triage area which is incredibly helpful, and children's waiting area. Patients were relieved to be at the UTC to be seen and get help, they expressed an inability to get an appointment with their local GP. Patients had nothing negative to say about the UTC aside from the poor signage for the carpark/parking.

Staff were well organised, and they expressed how they could all rely on each other to meet the patient's needs. Staff requested that maintenance requests were followed-up in a timely manner to improve the service for the patients. They also expressed a wish for more radiographers to extend their X-ray opening hours (especially at weekends). This would also reduce frustration for patients who would have to be sent to DCH or Bridport to be seen for X-ray and increase feelings of being 'ping-ponged' between the units.

Lasting impressions of this service were rated 5/5

Wimborne MIU

First impressions of this service were rated 5/5

Very welcoming, staff incredibly friendly and helpful.

Booked appointments only, through NHS 111 or walk-in (walk-ins are briefly triaged and sent away to come back same day or next). Efficient service runs on time. Cannot call hospital directly.

Main reception area was large and spacious, well-lit and decorated. Calm atmosphere, clean and well organised. Main reception is directly in front of waiting area, so privacy and dignity is an issue. CCTV in waiting area is present so staff can maintain patient welfare.

Cannot access MIU directly, a member of staff will collect patients from main waiting area. There are several corridors to navigate, which would be easy to get lost in, hence the escort. Staff collecting patients however gave for greater confidence over care being received. There is a second waiting area directly in MIU for patients who need an X-ray or to be monitored. Patients were seen very quickly so there were few overlaps of patients, and they did not wait long.

Corridors are wide, so it is wheelchair accessible and both waiting rooms are very large. Wi-Fi was provided but did not work. Parking was free of charge and carpark was spacious. A water dispenser, vending machine, television and toilets also present. Teleprompter does not display waiting times (as booked appointments only) but clearly explains the check-in process. Staff were happy, organised, calm. Signage to the hospital from town was clear, and inside the hospital. Noticeboards displaying information were stark and need updating.

Lasting impressions of this service were rated 5/5

We have every confidence that the patients being seen were there for the right reasons (due to staff intercepting inappropriate bookings) and would receive treatment quickly and effectively due to the strict booked appointment slots.

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