



## Enter and View Report – March 2024 Royal Sussex County Hospital

<b>Service name:</b>	<b>The Emergency Department at the Royal Sussex County Hospital</b>
<b>Service Provider:</b>	<b>University Hospitals Sussex NHS Foundation Trust</b>
<b>Date and Time:</b>	<b>Friday 22nd March 2024</b>
<b>Representatives:</b>	<b>Mazzie Sharp &amp; Conor Sheehan</b>
<b>Contact details:</b>	<b>Clary Collicutt, Project Co-ordinator <a href="mailto:clary@hwbh.co.uk">clary@hwbh.co.uk</a> Healthwatch Brighton and Hove Community Base, 113 Queens Rd, Brighton, East Sussex BN1 3XG</b>

### Acknowledgements

Healthwatch Brighton and Hove would like to thank our volunteers, service providers, service users and staff for contributing to the Enter and View programme.

### Disclaimer

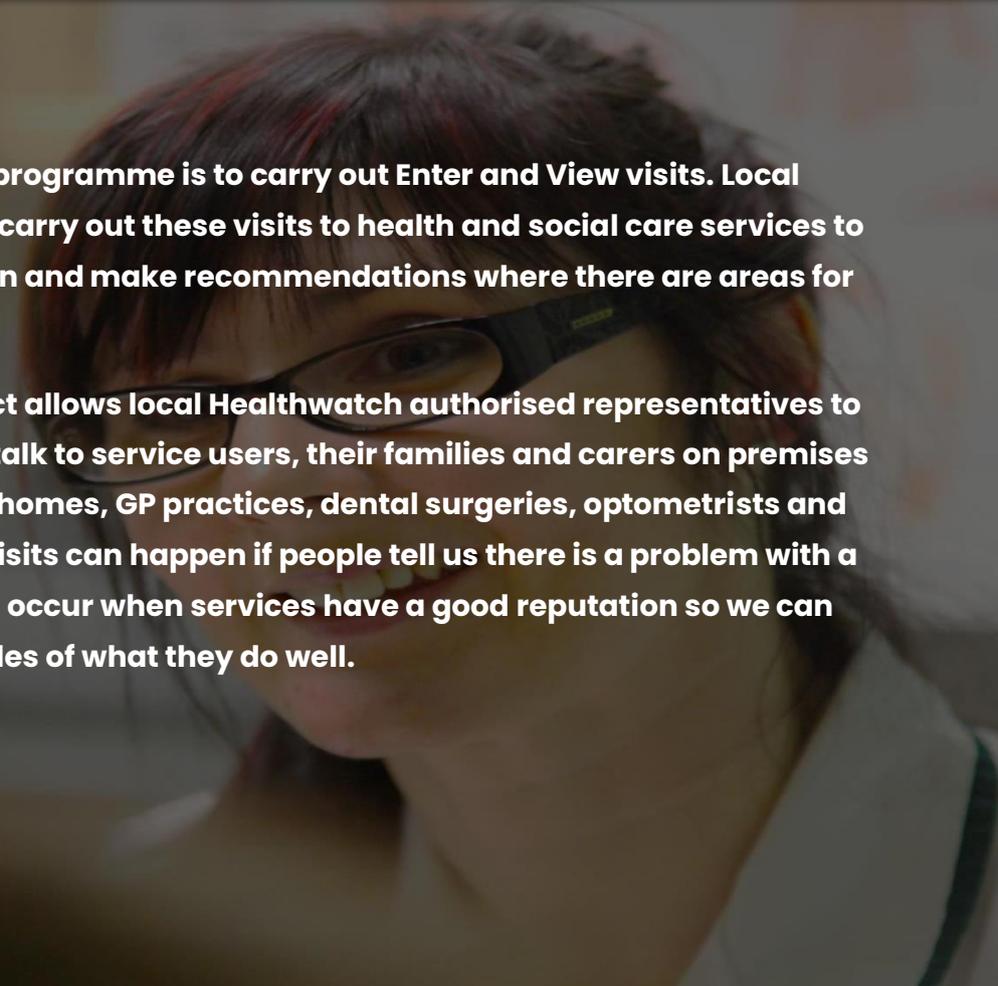
Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.



### What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service, but, equally, they can occur when services have a good reputation so we can learn about and share examples of what they do well.





## Purpose of the visit

Healthwatch Brighton and Hove have worked in partnership with our local hospital trust for several years to conduct regular Enter and View visits. These visits to wards and other units are carried out by trained volunteer lay assessors and are called Healthwatch Hospital Enter and View visits. The visits are an extension of a national programme of audits called PLACE – Patient Led Assessment of the Care Environment.

These Healthwatch visits:

- Provide valuable insight into the work of our local trust and its hospitals.
- Allow us to see first-hand the many positive aspects of our hospitals.
- Provide an opportunity to raise any concerns directly with senior trust staff.

Healthwatch Hospital, Enter and View visits are intended:

- To provide a regular, independent supply of information about the environment of our hospitals to the trust, which empowers them to act on emerging issues.
- To ensure that patients and staff benefit from an ever-improving hospital environment which in turn supports the delivery of high standards of care, dignity, and safety.
- To provide Healthwatch with an audit trail of intelligence and evidence which it can use to assess how our recommendations are helping to improve hospital environments.
- To enable Healthwatch to share our findings with interested partners such as the Care Quality Commission and the public.

## Methodology

Two trained DBS-checked Enter and View volunteer lay assessors visited the Emergency Department at the Royal Sussex County Hospital. They talked with seven patients and their relatives and asked for their views on their experience of the Emergency Department including whether they had been able to access refreshments or been offered any; whether they had been kept informed on waiting times; had they been offered pain relief



whilst waiting; whether they were comfortable and what one thing would improve their experience. They were also free to discuss any aspects raised by the people they met.

The representatives were accompanied by David McKenna, Head of Nursing on the Acute Floor at the Royal Sussex County Hospital. They observed the environment at the Urgent Treatment Centre, the Emergency Department reception, The Ambulatory Clinical Decision Unit, Majors and Resus and the Enhanced Observation Unit (for patients with mental health concerns). The representatives recorded their views of the physical environment, and they also completed a checklist to capture positive findings, challenges, and concerns, as well as anything staff told us and our recommendations.

The checklist which Healthwatch uses is based on the NHS publication "[The Fifteen Steps Challenge: Quality from a patient's perspective](#)", which explores what good care looks like through a patient's eyes. When completing the checklist, volunteers are asked to say whether specific criteria have been met in full, partially or not at all and to award a suitable score out of ten. Volunteers are provided with the opportunity to record any positive findings and make recommendations under four headings:

- (i) Is the environment welcoming?
- (ii) Is the environment safe?
- (iii) Is the environment caring and involving?
- (iv) Is the environment well-organised?

Lastly, the volunteers spoke to outpatients and their relatives, who were happy to have a short chat. Notes from these conversations were recorded anonymously to maintain patient confidentiality.

## Results of visit

Healthwatch asks volunteers to give a score out of 10 for each area as a simple way to assess things. The scores represent the subjective views of our trained volunteers and are not part of a national scoring system. Healthwatch considers that:

- 9 or 10 indicates that the ward or unit is performing strongly with little or no room for improvement and areas of excellence have been observed.
- 7 or 8 suggests there are a number of areas which require attention in order to improve the environment, but overall, things are good.

- a score of 6 or less indicates that significant changes may be needed to improve the environment.

**UTC – Urgent Treatment Centre**

<b>(a) Welcoming environment</b> <b>Score awarded: 8 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"> <li>• Clean, tidy and calm space with fairly comfortable seating</li> <li>• Clean uncluttered and modern consultation/treatment rooms</li> <li>• Appropriate reception area with screen and desk – sessionally staffed (patients are currently still received at ED reception and then requested to attend this UTC building opposite ED)</li> <li>• Signage displaying patient information is clear and prominent.</li> </ul>	<ul style="list-style-type: none"> <li>• Staffing of reception area is under review—as many patient referrals come directly from GPs, removing the need to register at the ED reception would be more convenient for patients.</li> </ul>

<b>(b) Safe environment</b> <b>Score awarded: 10 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"> <li>• Well-lit, clean public areas and consulting rooms</li> <li>• Purpose-built and designed for its function so excellent</li> </ul>	<ul style="list-style-type: none"> <li>• Staff presence in the receiving and waiting areas would be desirable for security reasons.</li> </ul>

<b>(c) Caring environment</b> <b>Score awarded: 8 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"> <li>• Medical staff who were attending to patients appeared friendly and reassuring</li> <li>• Calmness lends itself to good care.</li> </ul>	<ul style="list-style-type: none"> <li>• Staff presence in the receiving and waiting areas would also be desirable as this would offer patients reassurance and allow them to ask questions about the treatment process and likely waiting times.</li> </ul>

<b>(d) Well organised &amp; calm environment</b> <b>Score awarded: 9 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"> <li>Comfortable appearance and layout of waiting area</li> </ul>	

### **Emergency Department Reception**

<b>(a) Welcoming environment</b> <b>Score awarded: 4 out of 10</b>	
<b>Positives</b>	<b>Weaknesses/Recommendations</b>
<ul style="list-style-type: none"> <li>New soft seating</li> </ul>	<ul style="list-style-type: none"> <li>Cluttered layout</li> <li>Reception/registration staff appeared somewhat resigned/indifferent – reception staff may need customer service training</li> <li>Not enough seating.</li> </ul>

<b>(b) Safe environment</b> <b>Score awarded: 5 out of 10</b>	
<b>Positives</b>	<b>Weaknesses/Recommendations</b>
<ul style="list-style-type: none"> <li>Medical and nursing staff appeared pleasant</li> <li>Relatively clean.</li> </ul>	<ul style="list-style-type: none"> <li>Poor air circulation in very cramped waiting area space</li> <li>55 patients were seated in the waiting area when we visited (there were very few if any spare seats).</li> </ul>

<b>(c) Caring environment</b> <b>Score awarded: 4 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
	<ul style="list-style-type: none"> <li>No obvious availability of drinking water and (snack) food despite very long waiting times reported by patients</li> <li>TV for waiting patients was not working</li> </ul>

	<ul style="list-style-type: none"> <li>• Patients need to be made aware of where water and food can be obtained/ purchased (these were available nearby but not signposted)</li> <li>• Too busy and hectic to be able to offer appropriate care, which would be difficult for staff and patients.</li> </ul>
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<b>(d) Well organised &amp; calm environment</b>	
<b>Score awarded: 5 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"> <li>• Despite waiting times and overcrowding issues, there appeared to be a flow of patients being called for triage, consultation/treatment with doctors.</li> </ul>	<ul style="list-style-type: none"> <li>• Information flow to waiting patients could be more effective e.g. guidance on waiting times, the triage process, consultation and treatment stages</li> <li>• Improve the organisation and legibility of patient information on walls and electronic screens</li> <li>• Patients need to have quicker access to painkillers.</li> </ul>

### **Ambulatory Clinical Decision Unit**

<b>(a) Welcoming environment</b>	
<b>Score awarded: 9 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"> <li>• Peaceful and reassuring atmosphere</li> <li>• Large calm space with comfortable furniture.</li> </ul>	<ul style="list-style-type: none"> <li>• Signage directing people to the refreshment facilities is needed.</li> </ul>

<b>(b) Safe environment</b>	
<b>Score awarded: 9 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"> <li>• Moving towards 24hr opening service in the near future</li> <li>• Patients are monitored/observed by staff nurse at reception desk.</li> </ul>	

<b>(c) Caring environment</b> <b>Score awarded: 8 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"> <li>Food and drink are available to all patients waiting there (including complimentary lunch and dinner).</li> </ul>	<ul style="list-style-type: none"> <li>Signage advising patients of the availability of refreshments is needed.</li> </ul>

<b>(d) Well organised &amp; calm environment</b> <b>Score awarded: 9 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"> <li>Tranquil atmosphere-subtle relaxing lighting</li> <li>High standard of cleanliness in washrooms and toilets.</li> </ul>	

### **Majors and Resus**

<b>(a) Welcoming environment</b> <b>Score awarded: 5 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
	<ul style="list-style-type: none"> <li>Very congested areas within Major A and B – patients on trolleys (12 trolleys) in corridors.</li> <li>Observation/consultation bays were rather narrow and not conducive to patients' privacy/dignity</li> <li>Signage and information on observation and treatment could be more prominent – no up-to-date patient information signs</li> <li>In majors A it was overwhelmingly overcrowded.</li> </ul>

<b>(b) Safe environment</b> <b>Score awarded: 5 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
	<ul style="list-style-type: none"> <li>Need for more space and distance between patient treatment and observation areas. It was understood, however, that a</li> </ul>

	<p>delicate balance needed to be maintained between patients' privacy and the need for nursing staff to observe them</p> <ul style="list-style-type: none"> <li>• The atmosphere was rather warm and airless</li> <li>• No privacy for patients on arrival</li> <li>• Very busy and feels stressful.</li> </ul>
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<b>(c) Caring environment</b> <b>Score awarded: 8 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"> <li>• Staff were clearly committed to assessing and treating patients and were appeared to be working calmly and conscientiously to do this.</li> </ul>	

<b>(d) Well-organised &amp; calm environment</b> <b>Score awarded: 6 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"> <li>• The staff appeared to be working calmly in what was clearing a pressured environment.</li> </ul>	

### **Enhanced Observation Unit – mental health**

<b>(a) Welcoming environment</b> <b>Score awarded: 9 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"> <li>• Peaceful and quiet unit conducive to mental wellbeing</li> <li>• Calm and welcoming</li> <li>• DVD/TV player is available for patients to help them pass the time during the longer assessment and observation periods typical in the MH facility.</li> </ul>	



<b>(b) Safe environment</b> <b>Score awarded: 9 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"><li>• All MH patients have 1-1 observation with Health Care Assistant (HCA) or Band 3 nurse</li><li>• Generally good standard of cleanliness.</li></ul>	

<b>(c) Caring environment</b> <b>Score awarded: 9 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"><li>• Staff appeared very committed to maintaining close supervision/ observation of patients.</li></ul>	<ul style="list-style-type: none"><li>• Plans to introduce special training for enhanced care for key HCA and nursing staff support workers. Training to support people with neurodiversity.</li></ul>

<b>(d) Well organised &amp; calm environment</b> <b>Score awarded: 8 out of 10</b>	
<b>Positives</b>	<b>Recommendations</b>
<ul style="list-style-type: none"><li>• As stated in (a) above - A peaceful and quiet unit conducive to mental wellbeing</li></ul>	<ul style="list-style-type: none"><li>• Lack of natural light could make some patients feel confined – consider simulated daylight panels or calming photos.</li></ul>

## Conversations with patients

- I spoke to a woman at 11.40am, she was feeling unwell and sitting with her daughter. The woman told me that they arrived at 10 am and collapsed, her daughter had to get a wheelchair, however, no clinicians or paramedics helped her. The woman had received triage but had still not been called for treatment. The woman said that 'no-one has been helpful or welcoming.'
- The patient was attending for the second time and had been waiting for 3 hrs and 50 minutes. At their first visit, they waited seven hours and decided to leave because they had not seen anyone and were in a lot of pain. On this visit he has been seen, painkillers have been organised and a scan is



due. He was called when I was with him. There was a sense of acceptance of the long waits by the patients. 🍷

- 🍷 An elderly patient in a wheelchair with her two daughters had been triaged and has had an x-ray. They were waiting for painkillers and their x-ray result. They had been waiting for 2 hours and 45 minutes and one daughter told me that 'all staff were amazing, they do their best'. 🍷
- 🍷 A patient I spoke to expressed frustration and confusion as to why so much money had been spent on the Louisa Martindale Building and no money had been spent on the ED, she said it had not changed for over 10 years. 🍷
- 🍷 I have been waiting in ED for 3 and a half hours. I have been seen by doctors (also had triage and bloods). I am waiting now for a hydration drip. Nobody has offered me water or told me where I can go to buy some food to keep me going. 🍷
- 🍷 I have no idea how much longer I will be waiting. When I first arrived there was no information on waiting and treatment times. 🍷
- 🍷 The system here in (ED) is bizarre. I arrived with a pulse rate of 190 and I have been waiting for two hours to be seen and yet a really drunk person who arrived at the same time as me was seen straightaway. Where is the logic? 🍷

## Overall

Healthwatch last visited the Emergency Department at the Royal Sussex County Hospital during the PLACE (Patient-led assessments of the care environment) visits in October and November 2023. Unfortunately, at the time, Healthwatch volunteers were unable to complete the assessment forms due to the overcrowding of the department. Therefore, we wanted to go back to see how things might have improved.

The lay assessors scored the Urgent Treatment Centre, Ambulatory Clinical Decision Unit and Enhanced Observation Unit all highly for the environment being



welcoming, safe, caring, well-organised and calm, with the scores ranging from between eight to ten out of ten (average score 8.75). However, the lay assessors scored the Emergency Department Reception and Majors and Resus much lower, with scores ranging from between four to eight out of ten (average score of 5.25). The most pertinent recommendations provided by the lay assessors were more staff presence in the receiving and waiting areas, improved signage to where refreshments can be purchased, and patients needing quicker access to painkillers.

The lay assessors reported that the visit felt like hardworking, dedicated staff were working extraordinarily hard to deliver care in an environment that was not fit for purpose. They reported that the background areas away from the frontline are working much better.

The lay assessors spoke to seven people during their visit to the Emergency Department. Patients reported mixed attitudes towards the staff; one felt that the staff had not been welcoming, and on the other hand, another reported that the staff were amazing and doing their best. In general, patients felt that communication from the staff could be better, by providing information on where refreshments could be bought and an indication of waiting times. Finally, patients reported long waits. However, the lay assessors got the impression that patients have unrealistic expectations of waiting times. One patient they spoke to said that they had been waiting nearly an hour for triage. The lay assessors think there is a need to manage patient's expectations.

## **Next steps**

Healthwatch will discuss our visit findings with the trust at their Patient Experience and Engagement Group where we will ask for an action plan to be created to follow up on our findings.



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