

## **BRIEFING NOTE: ISSUES HIGHLIGHTED BY THE 2008 EMERGENCY DEPARTMENT SURVEY**

Understanding what patients think about their care and treatment is an important part of the Healthcare Commission's duty to assess and report on the quality and safety of services provided by the NHS.

This is the third national survey of patients who have used emergency departments, following those of 2003 and 2004. In 2008, the survey was carried out by 151 acute and specialist NHS trusts. Just under 50,000 people who had attended A&E or emergency departments responded to the survey, a response rate of 40%.

This briefing shows the percentage of patients giving a particular response to key survey questions, for England as a whole.

In September 2008 the Healthcare Commission published *Not just a matter of time: A review of urgent and emergency care services in England*. This is referred to throughout this briefing as 'the review'. The review looked at out-of-hours GP services, A&E services and urgent care centres, emergency ambulance services and, to a lesser extent, urgent GP services delivered during surgery opening hours and NHS Direct. In contrast the patient survey only examined the experiences of people who had attended an A&E / emergency department in a hospital and therefore findings from the review and patient survey cannot be directly compared.

### The significance of changes

This briefing note on the 2008 Emergency Department survey focuses on those areas where patients' responses in 2008 are significantly different from those reported in 2003 or 2004. These changes may appear small – often around one percentage point – but we have reported the differences that are “statistically significant”. This means that we have carried out tests to identify the changes that are unlikely to have occurred by chance. Where there has been no “significant” change, differences or comparisons are either not mentioned or we clearly state that there has been no change. In some cases we are unable to present comparisons to either 2003 or 2004, where questions were new to the survey in 2008 or were not repeated from the previous years.

## **Summary**

A higher proportion of respondents rated their overall care as excellent in 2008 (35%), compared with 2004 (34%) and 2003 (31%). However, the percentage rating their care as poor or very poor has not improved since 2004 (5%).

There were notable and encouraging improvements with regard to communication by staff, with higher proportions of respondents saying:

- they definitely had enough time to discuss their health or medical problem with doctors and nurses in 2008 (69% compared with 66% in 2004 and 62% in 2003)
- that doctors or nurses definitely listened to them (76%) than in 2004 (74%) and 2003 (73%)
- that a doctor or nurse ‘completely’ discussed any anxieties or fears about their condition or treatment with them (53% compared with 51% in 2004 and 49% in 2003).

Progress has also been made with regard to staff helping to control patients' pain and in the provision of information to patients on leaving the emergency department:

- of those respondents who experienced pain in 2008, 59% thought staff definitely did everything they could to help control their pain compared with 56% in 2004 and 55% in 2003
- The percentage of respondents who said that the purpose of their new medication was completely explained to them by staff increased to 84% in 2008, up from 81% in 2004 and 82% in 2003.
- A greater proportion of patients said they were given a complete explanation of possible side effects of their medication, increasing from 35% in 2003 to 36% in 2004 and 37% in 2008
- Of those patients who needed information about when they could resume their usual activities, such as going back to work or driving a car, 37% said they definitely received it; an increase from 35% in 2004.
- Almost two thirds of respondents (65%) said that a member of staff told them what danger signals regarding their illness or treatment to watch for after they went home, either completely or to some extent. This is an increase from 63% in 2004 and 2003.

Areas that show no improvement or show a deterioration include:

- the involvement of patients in decisions about their care and treatment  
Of those respondents who wanted to be involved in decisions about their care and treatment, 62% said that they were definitely involved as much as they wanted to be, a decrease from 64% in 2004 and 63% in 2003.
- being given enough privacy when being examined  
Although the majority (79%) said that they were definitely given enough privacy when being examined or treated, this had decreased from 80% in 2004 (though is an increase from 78% in 2003).

Results also suggest that respondents perceived they waited longer at various stages of their care than in 2004. Though when compared with results from 2003, some improvements in waiting times are shown:

- A smaller proportion of respondents reported that they first spoke to a nurse or doctor within 15 minutes of arriving at the emergency department (40%) than in 2004 (47%). This question was not asked in 2003.
- Fewer respondents said they were examined by a doctor or nurse within an hour of arrival in 2008 (73%) compared with 2004 (74%). However, this represents an improvement from the 2003 survey, where 66% of respondents said they were examined within an hour of arrival.
- The proportion of respondents who said they stayed in the emergency department for more than four hours has increased from 23% in 2004 to 27% in 2008. Though again, this is an improvement from the 2003 survey results, where 32% of respondents reported that they were in the emergency department for more than four hours.

## Getting to the emergency department

### Making the decision to go

As part of the Government's strategy to provide a variety of emergency services and improve access to appropriate care, additional services such as NHS Direct and NHS walk-in centres have been introduced. The survey asked patients the main reason they went to the emergency department. Just over a quarter (27%) said that they decided for themselves that they needed to go to the emergency department. Twenty six percent said they were taken to the emergency department by the ambulance service. Another 24% were told to go to an emergency department by a health professional, such as a GP, nurse or NHS Direct. Relatively small proportions of respondents attended the emergency department because their GP was not available (5%), because they wanted a second opinion (1%), or because they were not aware of any other service available at the time (1%). The remaining 15% of respondents said that somebody else (e.g. friend, relative or colleague), decided that they needed to go to an emergency department.

### Arrival at the emergency department

Compared with the 2004 survey there were changes in how patients travelled to the emergency department. In 2008, more respondents had used an ambulance to get to the emergency department (33%<sup>1</sup> compared with 28% in 2004 and 31% in 2003); and fewer had travelled by car (53% compared with 57% in 2004 and 54% in 2003).

Availability of parking at hospitals can be an important issue for patients. The patient survey shows that of those patients who had travelled to hospital by car, over a quarter (26%) said that it was not possible to find a convenient place to park in the hospital car park.<sup>2</sup>

### Ambulance services

Of those respondents who travelled to hospital in an ambulance, 78% said the ambulance crew had definitely explained their care and treatment in a way they could understand, and 18% said they had to some extent. Most respondents rated the overall care received from the ambulance service as excellent (69%) or very good (22%). Only 3% of respondents rated the care from the ambulance service as fair, poor or very poor.

## Time in the emergency department

### Initial contact with a health professional

There has been a decrease in the proportion of patients who said they had first spoken to a nurse or doctor within 15 minutes of their arrival at the emergency department, down from 47% in 2004 to 40% in 2008. Thirteen percent of

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<sup>1</sup> This figure differs from the percentage in the 'making the decision to go' section as some respondents did not consider the fact that they were taken by ambulance to be the main reason that they visited the emergency department. For example, of those who said they travelled to hospital by ambulance, 9% said the main reason they went to the emergency department was because they were told to go by a health professional.

<sup>2</sup> Respondents who travelled to hospital by car, but did not need to find a place to park, were excluded from this calculation

respondents said they waited more than an hour before they first spoke to a nurse or doctor, up from 10% in 2004.

### **Waiting to be examined**

Patients were asked how long they had to wait before being examined by a doctor or nurse. Almost three quarters of respondents (73%) said they were examined by a doctor or nurse within an hour of arriving at the emergency department. This is an increase from 66% in 2003 but a drop of one percentage point since 2004 (74%).

Compared with the 2004 survey results, fewer respondents said they either did not have to wait or that they waited between one and 30 minutes to be examined: down from 53% in 2004 to 51% in 2008. Only 2% of respondents said they waited more than 4 hours before being examined by a doctor or nurse, a drop of one percentage point since 2004 (3%) and a decrease of five percentage points since 2003 (7%).

Of those respondents who had to wait to be examined by a doctor or nurse, more than half (56%) said they had not been told how long the wait would be; the same proportion as in 2004 but an improvement on 58% in 2003.

### **Overall time spent in the emergency department**

The Department of Health set a standard that from January 2005, 98% of patients should not be waiting for more than four hours in emergency departments from arrival to admission, transfer or discharge. Performance against this standard has shown to have improved considerably over recent years.<sup>3</sup>

Waiting times reported by patients in the survey cannot be directly compared with waiting time data from NHS trusts for a number of reasons, such as the exclusion of patients aged under 16 years from the survey. However, the information can be used to assess trends over time.

The proportion of respondents who said they stayed in the emergency department for no more than four hours has fallen from 77% in 2004 to 73% in 2008, however, this is an improvement from 68% in 2003. This finding may reflect a more recent change in how emergency department attendances are managed, rather than a decline in trust performance since 2004. A review of accident and emergency services by the Healthcare Commission in 2005<sup>4</sup> showed that around 45% of emergency departments can admit patients into their own admission or assessment units. These may be used for those patients who, for clinical reasons, require more than four hours in A&E departments, because they need further assessment, observation or tests before a final diagnosis can be made. There is evidence to suggest that the practice of admitting patients from emergency departments to admission units is increasing.<sup>5</sup> It is possible that patients do not always distinguish between the period in the emergency department and the period in an admission or assessment unit, and may count both as the overall time spent in the emergency department.

## **Care and treatment**

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<sup>3</sup> Healthcare Commission, *Management of admission in acute hospitals: Review of the national findings 2006*, 2006.

<sup>4</sup> Healthcare Commission, *Acute hospital portfolio: Accident and emergency*, August 2005.

<sup>5</sup> Healthcare Commission, *Management of admission in acute hospitals: Review of the national findings 2006*, 2006.

## **Communication by staff**

Despite increasing numbers of patients attending emergency departments, a greater proportion of respondents said they definitely had enough time to discuss their health or medical problem with a doctor or nurse – up from 62% in 2003, 66% in 2004 to 69% in 2008. Similarly, the 2008 survey found that more patients reported the doctors and nurses had definitely listened to what they had to say, up from 73% in 2003, 74% in 2004 to 76% in 2008.

The survey results show further improvements over time in staff communication with patients. A greater proportion of respondents (53%) said a doctor or nurse discussed any anxieties or fears they had about their condition or treatment with them completely. This is an increase of two percentage points since 2004 (51%) and four percentage points since 2003 (49%).

In the 2008 survey, 67% of respondents said a doctor or nurse explained their condition or treatment in a way they could completely understand, while 27% said they did to some extent. These are unchanged from findings in the 2004 survey though an improvement from 65% receiving a complete explanation in 2003.

There has been no change from 2003 and 2004 in the results with regard to the proportions of respondents who said doctors or nurses talked in front of them as if they were not there. Eleven percent of respondents reported that doctors or nurses talked in front of them to some extent, and 6% said this definitely happened.

## **Confidence and trust in staff**

Almost three-quarters of respondents (73%) reported that they definitely had confidence and trust in the doctors and nurses examining and treating them, and 22% said they did to some extent. These figures remain unchanged since the 2003 and 2004 surveys.

There has, however, been a decline in the proportion of respondents who said they could always get a member of staff to help them if they needed attention: down from 57% in 2004 to 55% in 2008.

The survey asked patients whether sometimes one member of staff said one thing and another said something quite different. The proportion of respondents who said that this did not happen to them in the emergency department has fallen slightly from 84% in 2003 and 2004 to 83% in 2008.

## **Information and involvement in decisions**

Providing patients with enough information about their condition or treatment is important to encourage their involvement in decisions about their care. Over three quarters of respondents (77%) said they were given the right amount of information about their condition or treatment. Fifteen percent of respondents said they did not get enough information and 7% said they were not given any information about their condition or treatment. These findings remain unchanged since 2004 though are an increase from 2003 where 75% said they definitely got the right amount of information.

For those respondents who were well enough to be involved in decisions about their care and treatment, 62% said they were definitely involved as much as they wanted to be. This is a decrease from 64% in 2004 and 63% in 2003. There was a corresponding increase in the proportion of respondents who said they were involved to some extent, increasing from 27% in 2003 and 2004 to 28% in 2008.

## **Managing pain**

Compared with previous surveys, fewer respondents said they experienced pain while in the emergency department (66% compared with 69% in 2004 and 70% in 2003). Of those respondents who experienced pain, over a third (35%) requested pain relief medication. For respondents who requested medication to control their pain:<sup>6</sup>

- 16% said they received it straight away
- 22% said they received it after 1 to 5 minutes
- 27% said they received it after 6 to 15 minutes
- 25% said it took over 15 minutes to receive it
- 9% reported they did not receive any

The surveys have shown a continued improvement in the experience of patients with regard to staff helping to control their pain. In 2008, 59% of respondents said that staff definitely did everything they could to help control their pain, up from 56% in 2004 and 55% in 2003. Over a quarter (27%) said staff helped to control their pain to some extent, leaving 14% who said staff did not do everything they could to help control their pain, a drop of 2 percentage points since 2004 (16%) and four percentage points since 2003 (18%).

## **Tests**

There has been an increase in the proportion of respondents who have had tests (such as x-rays, scans or blood tests) when they visited the emergency department, rising from 56% in 2003 to 62% in 2004 and 67% in 2008.

For those patients who had tests, 62% said that a member of staff definitely explained the results to them in a way they could understand and 25% were able to understand to some extent. These findings are similar to the results of the 2003 and 2004 surveys. Eight percent of respondents said a member of staff did not explain the results of the tests in a way they could understand, a decrease from 10% in 2003. There was a corresponding increase in the proportion of respondents reporting that they were never told the results of tests (3% in 2003 compared with 5% in 2004 and 2008).

## **Emergency department environment**

### **Privacy**

On arrival at an emergency department, patients may be booked in by a receptionist. Of those respondents who had discussed their condition with a receptionist, less than half (41%) said they were definitely given enough privacy and 44% said they had only been given enough privacy to some extent.

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<sup>6</sup> Due to a change in response categories for the preceding filter question, results are not comparable with those from 2004

Patients were also asked if they were given enough privacy when being examined or treated. Although the majority of respondents said that they were definitely given enough privacy (79%), this is a drop of 1% point since 2004 (80%) though is an increase from 78% in 2003. There was a corresponding increase in the proportion of respondents to say they had enough privacy to some extent, in 2008 increasing from 17% in 2004 to 18% in 2008 (though no change compared with 2003).

### **Personal security**

A small proportion of respondents (3%) said that they definitely felt bothered or threatened by other patients while they were in the emergency department. Eight percent said that they felt bothered or threatened to some extent. The majority of respondents (90%) did not feel bothered or threatened, a decrease from 91% in 2004 though this represents an increase from 2003 (89%).

A greater proportion of respondents (14%) said they felt bothered or threatened by other patients if they attended the emergency department between 6pm and 6am, when compared with those patients who arrived between 6am and 6pm (8%).

### **Cleanliness**

Less than half of respondents (44%) rated the emergency department as very clean, representing no significant change since the 2004 survey but a decrease from the 2003 survey (48%). The proportion who rated the emergency department as fairly clean has increased from 43% in 2003, 46% in 2004 to 47% in 2008. The same percentage of respondents rated the emergency department overall as not very clean or not at all clean in 2008 as in 2003 and 2004 (9%).

There have not been any changes in the survey results since 2004 with regard to respondents' reports of the cleanliness of the emergency department toilets, for those that used them. Of those respondents who had used the emergency department toilets, 38% rated them as very clean, 46% as fairly clean, with the remainder reporting that they were not very clean (12%) or not at all clean (5%). However, this represents a shift from the 2003 survey findings, where more respondents rated the emergency room toilets as very clean (43%) though fewer reported them to be fairly clean (42%) and not very clean (10%).

### **Leaving the emergency department**

Over a quarter of respondents (27%) said they were admitted to the same hospital at the end of their visit to the emergency department, up 4 percentage points from the 2004 survey (23%) and the 2003 survey (24%). A smaller proportion of respondents went home at the end of their visit than in 2004 (67% in 2008 compared with 71% in 2004 and 70% in 2003). Two percent of respondents were transferred to a different hospital or to a nursing home at the end of their visit to the emergency department, whilst the rest either went to stay with a friend or relative (3%) or went to stay somewhere else (1%).

### **Information on medicines**

Just over a third of respondents (36%) said they were prescribed new medication before they left the emergency department, two percentage points lower than in 2004 (38%) and one percentage point lower than 2003 (37%).

The survey results indicate that there has been improvement in the provision of information to patients on the purpose and possible side effects of their medication. The percentage of respondents who said that the purpose of their new medication was completely explained to them by staff increased to 84% in 2008, up from 81% in 2004 and 82% in 2003. Similarly, a greater proportion of patients said they were given a complete explanation of possible side effects of their medication, increasing from 35% in 2003 to 36% in 2004 and 37% in 2008. The proportion of respondents who said staff did not tell them about any possible side effects has decreased from 51% in 2003 to 49% in 2004 to 45% in 2008. Whilst this shows progress in performance, there is still scope to improve the information provided to patients on medication side effects.

### **Other information**

The survey asked patients if staff told them when they could resume their usual activities, such as when to go back to work or drive a car. Of the patients who reported they needed this type of information, 37% said they definitely received it; an increase of two percentage points since 2004 (35%). Just over two fifths of patients, however, said they were not given this information from staff (41%). Whilst this represents a drop of one percentage point since the 2004 survey (42%), this is still an area where improvements can be made.

Almost two thirds of respondents (65%) said that a member of staff told them what danger signals regarding their illness or treatment to watch for after they went home, either completely (40%) or to some extent (25%), an increase of two percentage points since 2003 and 2004 (63%). A similar proportion of respondents said they were told who to contact if they were worried about their condition or treatment after leaving the emergency department (68%), up two percentage points since 2004 (66%). However, this still leaves around one third of patients in 2008 who were not told about danger signals to watch for (35%) or who to contact following their discharge (32%).

### **Overall satisfaction**

As in previous surveys, the percentage of respondents rating their overall care as excellent, very good or good was high at 88%. A greater proportion of respondents rated their overall care as excellent in 2008 (35%) than in 2004 (34%) and 2003 (31%). However, there was a drop in the proportion of people who said that the main reason they went to the emergency department was dealt with completely to their satisfaction: 67% in 2008 compared with 68% in 2004. Fewer respondents (78%) said they had been treated with respect and dignity all of the time while in the emergency department than in 2004 (79%). Only four percent of respondents said that they were not treated with respect and dignity, a decrease from 5% in 2003. The remainder (18%) were sometimes treated with respect and dignity.