

Two week trial at Queen's Hospital A&E - Monday 11 July to Friday 22 July

From **Monday 11 July to Friday 22 July**, we will be trying something new at Queen's Hospital in Romford. If you arrive at the Emergency Department between 8am and 8pm, and could be seen and treated elsewhere – and don't really need A&E - you will be given advice on where to go to get the care you need.

That may be from your own GP, a pharmacist, our late night GPs' service or even at home with your feet up for a day or two.

Children aged 16 and under will continue to be seen as usual.

This will mean our A&E teams can focus on those who really do need their help and expertise to deal with very serious and life threatening illness or injury. That's what an A&E is really for.

There's no need to worry - no-one will be 'turned away' until they've been checked over by a senior doctor and given advice on what they need to do.

This two-week trial will also help us see what people do when they can't simply walk in to A&E and wait to be seen. We'll understand what the new approach means for all our GPs and other health and care services. We can then make a decision about what is best for patients and what it means for health services across Barking and Dagenham, Havering and Redbridge.

Our UEC services remain under pressure, and local health and social care partners are working together to improve the quality of services we provide for the people living in BHR.

One of our priorities is to look at how all the partners can work together to help our Emergency Department teams at our local hospitals so they can concentrate on those that need their help most.

One in three people in our local A&Es today simply do not need to be there. They do not have a life-threatening condition and they are not an emergency. We know this because a recent trial at Queen's Hospital A&E told us exactly that.

Many people are no longer put off by long waits in A&E and our doctors and nurses are finding it harder to cope. We need new ways of assessing and helping local people to get the right care in the right place - and reducing the pressure on our busy A&Es at the same time.

This trial is one of the key UEC Transformation Programme projects this year. It builds on evidence from our recent research study into local people's awareness and understanding of UEC services, which saw us talk to more than 4,000 local people in March. This is the largest research study into UEC services ever undertaken in BHR, and its findings are already shaping our work and our priorities.

The study is now being published and can be found on the [BHR Partnership website](#).
Key findings include:

- Local people are very aware of alternative services, but default to A&E due to confusion about choices
- Those who are given professional healthcare advice will tend to follow it
- A&E is seen as a reliable, same-day service for urgent care needs and long waits are not a deterrent. People are prepared to wait as they believe they will be seen and treated – even though they understand it's not always the appropriate place to go
- People are more than twice as likely to use their GP than go to A&E
- GPs are the most commonly used service (72%) followed by pharmacy/chemist (69%) – with A&E third most commonly used at 31%
- Of those attending A&E
 - 39% sought no advice before attending A&E
 - 37% had seen their GP with the same issue
 - 26% had been to A&E before with same issue

Analysis by the Trust also estimates that up to 40% of people who go to A&E could be seen more quickly and appropriately elsewhere – by their own GP, at a walk-in clinic, out of hours GP service or by getting self-care advice from a pharmacist.

Our work to improve urgent and emergency care continues to receive national backing. In May, NHS England confirmed we would be allocated £1.3million to support our UEC Transformation Programme. This is the 2016/17 allocation for our UEC Vanguard projects which will focus on making sure BHR is delivering integrated urgent care in line with national standards, as well as funding for projects such as the two-week trial at Queen's Hospital.

We remain committed as health and social care partners to improve the urgent and emergency care services that we provide to local people, and will keep you informed of our progress on a regular basis – including the outcome of this trial.

BHR System Resilience Group

Better care, better lives together