

Response from Derby Teaching Hospitals NHS Foundation Trust

Dear Colleague,

Firstly I would like to send my genuine thanks to you for all the work you have undertaken in recording, analysing and collating this report.

The feedback is extremely important to us as we care very much about the people we provide services to and their views on the experiences they have. It is important for several reasons but mostly to help us continually improve the experience our patients have within A&E.

In response to the report I would like to respond to some of the highlights / recommendations of the report:

- It is important that the A and E services are used for the right reasons and it is important to
 highlight that during the Winter months we have been running a GP service at weekend colocated next to A&E which has helped manage the patients who attend but can be
 'managed' by a GP service. This service is continuing until the end of May and is currently
 being reviewed by the Commissioners, we do not publicise this service as we don't want
 people to see this as an alternative of their own practice obviously.
- On the Hospital website the public can view waiting times at A&E as well as the Derby Urgent Care Centre (DUCC), frequently the DUCC has a significantly less of a wait to be seen than A&E.
- 24 hours in A&E it is fantastic to see that staff performed consistently well during your periods of observations, showing patience, care, skill, empathy and compassion. A&E is sometimes used as a holding place for patients as it is seen as a Place of Safety; this is an issue that is being currently looked into. Many of the patients that are within ED, because of the above don't have a more appropriate place to be, it would be useful to define what is viewed as patients being brought in to 'cool off' as there may be some clarity needed regarding what is meant by this. Some patients attend who are under the influence of drink or drugs or both and their safety is a priority at that time but undoubtedly there is a need for a review of alternatives places for care.



- There are times when patients who are generally suffering from the effects of drink, drugs or mental health problems do ' cause a situation ' where several members of the staff need to become involved but in answering the dilemma made in the previous bullet point would help resolve this issue too.
- In response to the recommendations made our team is really keen to be involved in any education / awareness raising events (and area already actively involved in some).
- We are fully supportive of the view that the continued integrated approach to resolutions needs to be across the whole Social and Health Communities.

Once again I would like to thank you for your continued work and feedback,

Kind regards

Jenny

Jenny Deakin, General Manager of Acute Medicine, Derby Teaching Hospital