Urgent Treatment Centre (UTC) Engagement
Drop-in session – Leeds Autism Hub, Lovell Park Hub, LS7 1AH
02.04.2019

Attended:
Adam Stewart, Engagement Officer, NHS Leeds CCG
Leanne Winfield, CCG Volunteer

We attended the Leeds Autism Hub to chat with people about the proposals to bring Urgent Treatment Centres to Leeds. We spoke with six people on a one to one basis where we went through the engagement and encouraged attendees to complete the surveys. A number of surveys were also left at the Leeds Autism Hub in case others wanted to complete the survey or take it away with them.

Feedback:
- **Communication** was identified as a big issue and the need to communicate and raise awareness, specifically, about UTCs; what they and what they are for, was highlighted as very important.
  - A suggestion was made that we outline the process, perhaps using some real examples so people with know exactly what will happen. This would be very helpful for people with autism.
- **Keeping patients in the loop** when they are in services was also identified as very important.
  - When you are waiting for a long time, for example at A&E, it can be difficult for people with autism to know what is going on and to worry that they have been missed or forgotten about.
  - It’s important to find a way to provide updates, or keep people in the loop. A poster at Leeds General Infirmary (LGI) that explains how A&E works was identified as being very useful.
- The **waiting environment** was mentioned as being an important element to consider. For people with autism, the environment can be very stressful/overwhelming due to the busyness, loud noises etc. This can add to an already stressful situation of needing urgent/emergency health care and might be so daunting to some that they might not go at all.
- People told us that **students** have a lot of health needs and have we considered additional urgent care services in the more ‘student-y’ areas?
- UTCs need to promote and provide **good mental health support** so it is less stressful people who might have to those additional needs to attend.
- People told us that they don’t want UTCs becoming “**advanced drunk tanks**” as drunk people can add to the stress of people attending urgent care centres.
● We were told that it’d be good to know what UTCs provide over Minor Injury Units and what additional services are provided.

● People told us that it is very difficult to go to A&E, especially if you have autism:
  ○ It’s a very big and overwhelming environment
    ▪ A quiet waiting area for people who were more hyper-sensitive to certain things would be a great help – can this be considered for the new hospital and UTCs?
  ○ It can be a scary experience, people with autism benefit from knowing what is going to happen and if there was a process clearly mapped out as to what is going to happen when you go to A&E (or other services) would be very helpful.
    ▪ Another person told us that it isn’t clear what “you’re supposed to do”.

● People told us that differentiating between the terms ‘urgent’ and ‘emergency’ is very difficult. What’s urgent and what’s an emergency?
  ○ Should UTCs name be changed to something else?

● People told us that there needs to be reasonable adjustments for people with specific needs:
  ○ People told us that some places have the ‘flag’ come up that they have autism or other additional need but then don’t change their behaviours or are accommodating
    ▪ One example given was that the patient had explained they were autistic and the reception staff replied “I can see that here” and then handed a daunting looking survey with little instruction or explanation.
    ▪ People told us that they were subjected to poor attitudes and a lack of information as to what was happening regarding tests and diagnoses, with one staff member asking “are we doing the scary one?” and “this is going to hurt you know?”, without any information about what they are testing for.
    ▪ It was fed back that some people have had staff who have not taken the time to listen or pay attention to what an autistic person is saying is distressing them and not doing anything to help.
  ○ One person commented that they were surprised that the Accessible Information Standard wasn’t being followed in this respect as they didn’t feel able to communicate as they were not being properly informed as to what is going on.
  ○ People told us that staff need to be appropriately trained and to ask if people have specific needs or additional support, especially if it is flagged on the system.

● A person centred approach and awareness and understanding of mental health, autism, learning disability is needed so that delivery of information is in a way that is understandable.
We were asked if **patient records** would be easily accessed at UTCs and if different services would use the records and evidence that was already in patients’ notes.

- We were asked how UTCs and the 111 system will work if you have a long-term condition that might be multi-factorial; you might not be able to relay succinctly or quickly in a phone call or urgent scenario a number of important details.

- Being able to use **hospital passports** would be very helpful.
- Some people who are autistic **might not go to A&E** unless they are told to as some people follow the rules and won’t know/think to go there in an emergency unless it is expressly said.
- We were told that services need to make the effort to **deliver differently**.
- An instructional video/DVD might be of benefit to people who may struggle to understand the changes.

Many thanks to everyone at the Leeds Autism Hub who took the time to sit with us and give us their feedback and complete a survey.