

# Enter and View Report

Chaperoned review of the  
Temporary Escalation Areas  
(corridor care) within the  
Accident & Emergency (A&E)  
Department at Wirral  
University Teaching Hospital  
NHS Foundation Trust



19 March 2026  
**healthwatch**  
Wirral

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# Acknowledgement

Healthwatch Wirral would like to extend our thanks to the staff, patients and visitors for their cooperation during our visit.

**Name of Healthcare Provider:**

Wirral University Teaching Hospital NHS Foundation Trust

**Name of Chaperone:**

Yasmin Habib, Deputy Director of Nursing (DDN) for A&E at WUTH



# Foundations of Quality

*“Foundations of Quality Improvement should always have what people tell us about their treatment and care at the heart of everything, as a system, that we plan and do. We must be able to evidence that all actions and decisions made come back to this, making certain that everyone feels respected, involved and valued at each and every part of the journey. We should all feel confident that we are either giving or receiving quality care.”*



Healthwatch Wirral, Age UK Wirral, NHS England and ECIST, Wirral System.

# What is Enter and View?

Healthwatch has statutory powers and duties to carry out Enter and View visits to any site where regulated care is given. Local Healthwatch Authorised Representatives carry out these visits to health and social care services to find out how they are being run and can make recommendations where there are areas for improvement.

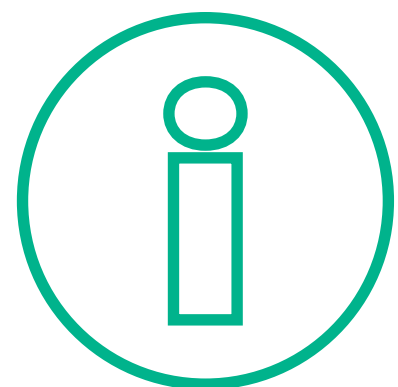


Section 221 of the Health and Social Care Act allows local Healthwatch Authorised Representatives (HWAR) to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP Practices, dental surgeries, optometrists and pharmacies. Enter 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 from the perspective of people who use, or provide, the service first-hand.

Healthwatch can also be invited in by providers to seek a 'fresh pair of eyes' on their service and gain some external assurances that they are on the right track prior to their CQC inspections.

## Disclaimer

The contents of Enter & View (E&V) reports are based on what the patients, service users and staff tell Healthwatch Wirral Authorised Representatives during our visit. The information within this report does not recommend or advocate on behalf of any service. Individuals should use a variety of information, such as CQC reports, when making a decision on where to obtain care.



E&V visits are risk assessed and planned well in advance. When situations occur such as unannounced CQC visits, Infection Prevention and Control issues (IPC),

bereavement, safeguarding or suspension of the service for whatever reason, HWW's visit and, ultimately, reporting processes may be affected.

When a visit can take place, every endeavour will be made to provide balanced feedback before departure from the premises. If reflections from the HWWARs raise issues that were not addressed at the end of the visit, then a follow up call to advise the Provider will take place before the report is published.

Wording within the report which references a response from an individual may not be verbatim (word-for-word). Comments received from the service provider are added unedited.

## Purpose of Visit

This visit is not designed to be an inspection, audit, or investigation, rather it is an opportunity for Healthwatch Wirral to get a better understanding of the service by seeing it in action and talking to staff and service users and carers /relatives. The visits provide a snapshot view of the service and what we observed at the time of the visit.



On this occasion, HWW's visit was planned as a chaperoned exploration to better understand the reasons and process of opening Temporary Escalation Areas. The observations from the chaperoned visit will be used to support the coproduction of a checklist from the *Red Lines Toolkit* for HWW's use at a subsequent visit.

Healthwatch Wirral seeks to identify and disseminate good practice wherever possible. If during a visit, Healthwatch Wirral considers there may be a serious concern then this will be referred to the appropriate regulator. This also applies if we have safeguarding concerns and these will be referred to the Local Authority or Commissioner for investigation, and our visit will cease with immediate effect.

Once the report has been drafted by Healthwatch Authorised Representatives it will be sent to the service provider allowing them the opportunity to add their comments, which will be added verbatim to this report. The report will be published after twenty days have passed.

# Site Introduction



## **Provider Address:**

Wirral University Teaching Hospital NHS Foundation Trust  
Arrowe Park Road, Upton, CH49 5PE



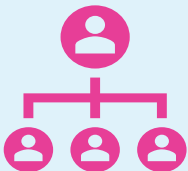
## **Setting Provider:**

NHS Trust



## **Date of Visit:**

19<sup>th</sup> March, 2026



## **Manager:**

Yasmin Habib, Deputy Director of Nursing for Emergency Care



## **Phone Number:**

0151 678 5111



## **Healthwatch Wirral Authorised Representatives**

Karen Prior  
Jacqueline Canning

# About Accident and Emergency

- **Where is the A&E department located?**
  - As of July 2025, the entrance to the A&E department has temporarily moved to the rear left of the main site, behind the Eye Department and opposite the staff accommodation block.
- **How many patients do the A&E department staff care for?**
  - Arrowe Park Hospital A&E department's staff see over 90,000 patients per year (approximately).
- **What does the A&E department provide?**
  - A&E provides 24/7 services for life-threatening emergencies, severe injuries, and critical illnesses. The department provides specialised care for conditions like severe bleeding, chest pain, stroke, and major trauma. Patients are prioritised based on clinical need, not arrival time.
- **What facilities does the A&E department offer?**
  - Triage, assessment, diagnostics and treatment.
- **How many staff does the hospital have?**
  - Arrowe Park Hospital, part of Wirral University Teaching Hospital NHS Foundation Trust, employs over 6,500 staff.
- **What types of staff do the hospital employ?**
  - Doctors, consultants, nurses, midwives, clinical support workers and care workers, as well as allied health professionals, such as physiotherapists and dietitians). Administrative staff, domestics, and specialist nurses are also employed.

# The Visit

## Environment

At the time of our visit the Temporary Escalation Areas (Corridors 2 and 3) were not open. The HWWARs were met by Yasmin Habib, the ADN for A&E. They were then escorted in all areas visited, and the purpose of the Temporary Escalation Areas was explained.

The department is undergoing major refurbishment; however the refurbished areas we were able to visit appeared to be exceptionally clean and projected an atmosphere of calm.

The environment in some areas would benefit from some modernisation and refreshing, such as the room that has been allocated for personal care on Corridor 2 (X-ray corridor).

Corridor 3 (main corridor) had a long line of empty beds which, we were advised is not the normal case as the corridor is generally used as a thoroughfare.

Ward 44 and the Physio Gym were both occupied during our visit. HWWARs were not informed of the new location of the Physio Gym and there was no clear indication of what these areas were being used for.

These areas would also benefit from modernising. HWWARs will seek clarification on whether these areas are part of the refurbishment.

As this visit was a 'familiarisation' visit and the HWWARs were chaperoned throughout, we were unable to experience the process through a patient's lens. However, the next visit will be conducted from the view of a patient, following their journey from arrival through to 'next steps'.

## Health and Wellbeing

The Red Line Toolkit has been developed to include 'Moral Injury' which relates to *staff wellbeing at times of extreme pressure and when a staff member feels they are unable to give the standard of care, they believe is necessary e.g. 'their red line is crossed'*. Healthwatch Wirral have helped in the development and inclusion of 'Moral Injury' in the Red Line toolkit and made suggestions for a standard approach for staff who have been called to help in areas outside of their daily routine.

## Safety

In the future visit, HWWARs will seek assurance that safe staffing, with the right skill mix, is at the heart of the best standard of care and that the ethos in relation to Moral Injury is paramount, understood by all staff providing care and evidenced throughout A&E.

## General

HWW will be conducting an unannounced visit in the future. The day HWWARs visited neither Corridors 2 nor 3 were in use. Therefore, we have suggested as a reactive approach to learning from a busy day, that Yasmin, the DDN, could contact HWW for an unannounced impromptu visit at short notice.

## Families

HWWARs did not speak with families on this occasion. However, we plan to speak with people who are with patients in the future visit.

## Staff

HWWARs are aware that Staff Huddles take place three times per day to discuss the patients and the current situation. We would suggest that a slot is allocated to check on staff wellbeing during these Huddles and that staff are aware of who, when and where they can comfortably escalate concerns.

## Plans Moving Forward

During HWW's unannounced visits we will seek assurances and evidence in relation to the Red Line Toolkit and the impact for staff, patients and families following the completion of the Urgent & Emergency Care Upgrade Programme (UECUP) scheduled for July 2026.

# Conclusion

Following the familiarisation visit an unannounced visit is planned, which will allow us to utilise the knowledge and tools discussed earlier in this report.

It may be advantageous to take a more reactive approach to a future visit given the variation of opening the Temporary Escalation Areas and the imminent UECUP completion.

At an earlier meeting, HWWARs cross-referenced the action plan developed by Yasmin Habib, Deputy Director of Nursing for Emergency Care, against the Red Line Toolkit and made suggestions, which will be included in HWW's E&V checklist used at the unannounced visit in the future.

Sight of the Quality Impact and Equality Impact Assessments on the UECUP would enable HWWARs to ensure the impact on patients, staff and families has been acknowledged and mitigated. In this case, utilising the independence of HWW can support the assessment of Impact and provide an unbiased evaluation.

## Distribution

Healthwatch Wirral submits the report to the provider for comment, and once comments are received and added to the report, the report will be sent to the Commissioner and CQC. Healthwatch Wirral publishes all Enter & View reports on its website and submits to Healthwatch England in the public interest.

# Provider's Comments

## Comment Box

As ADN for the Emergency Department, I agree with the contents of the report.

We have the opening of the new build Emergency Department in July 2026 that will present an opportunity to review the footprint of physio gym and ward 44, however as of yet there is no formal decision as to what these areas will be utilised for.

## Social Value

### Measuring Social Value

*Social Value is a broader understanding of value. It moves beyond using money as the main indicator of value, instead putting the emphasis on engaging people to understand the impact of decisions on their lives. The people's perspective is critical.*



*Organisations will always create good and bad experiences, but on balance should aim to create a net positive impact in the present and for a sustainable future. They should measure their impacts and use this understanding to make better decisions for people.*

*Social Value UK, 2024*

### How Healthwatch Wirral demonstrates Social Value

Healthwatch Wirral (HWW) is dedicated to ensuring how Providers meet Social Value standards. Our social value commitments aim to put people's perspectives first when

supporting vulnerable individuals, economic pressures, and promoting environmental sustainability.

## Vulnerable People, Economic Pressures, and Environmental Sustainability

People experience vulnerability at different points in their lives, which can increase and decrease over time. During our Enter and View (E&V) visits, we aim to understand the needs of vulnerable people who live in Care or Residential Homes.

During our visits, we discuss with the Providers their training practices, how they support both staff and families, and where they would signpost or refer to when supporting a person's clinical or non-clinical needs. We offer suggestions and recommendations to help ensure the Provider is utilising all available care and support resources. Our aim is to ensure that residents are allocated the right care at the right time, and to avoid unnecessary trips to A&E if the situation can be managed effectively for the person where they live.

By utilising our knowledge of the care system, we can assist Providers and members of the public in navigating what can appear like a complicated system. This includes directing them to the appropriate services like the Urgent Community Response Team, or GP Enhanced Access appointments, et cetera.

Providing the correct care in the right place and time can ensure a positive experience for residents while reducing pressures on the health and care system. Effective communication between providers, carers, and residents (such as promoting available clinical and non-clinical services) enables Care Providers to utilise the support they need more effectively.

HWW promotes Wirral InfoBank <https://www.wirralinfobank.co.uk/> which provides an online directory of provisions available across all sectors (clinical and non-clinical). We also promote HWW's Feedback Centre <https://speakout.healthwatchwirral.co.uk/> to ensure people can leave feedback about their experiences. This helps influence the design, commissioning, and deliverance of care to better reflect the needs of the community.

HWW ensures it is as paperless as possible. However, it is vital that everyone gets information in a format that is suitable to them. Our website is available in different languages and audio, and we share Public Health's commitment to addressing inequalities by providing documentation in different formats and languages.

We have adopted a culture of seeking assurances in relation to:

- Quality and Equality of care.

- Clinical and non-clinical support and treatment.
- Equality Impact Assessments.
- Coproduction and integrated commissioning.

We engage health and care Commissioners and Providers in discussions about how effectively they collaborate to deliver integrated, seamless care and support for people, families, carers, and the workforce. Coproduction is integral to achieving meaningful social value.

We prioritise using local services and providers for all our administration, office and operational needs, ensuring that our finances are spent locally. Whenever possible, we utilise free premises and have sponsored local sports clubs for women and children. Additionally, we support HWW staff by being Mindful Employers and providing equipment to meet the needs of individuals.

## Healthwatch Wirral CIC 2025

# Glossary

<b>A&amp;E</b>	Accident and Emergency (usually as hospital department)
<b>ADN</b>	Assistant Director of Nursing
<b>CQC</b>	Care Quality Commission
<b>ECIST</b>	Emergency Care Improvement Support Team
<b>GP</b>	General Practitioner
<b>HWW</b>	Healthwatch Wirral
<b>HWWAR</b>	Healthwatch Wirral Authorised Representative
<b>IPC</b>	Infection Prevention Control
<b>MORAL INJURY</b>	recognising when staff need support if they feel unable to give the standard of care they believe is necessary.
<b>NHS</b>	National Health Service
<b>Red Line Toolkit</b>	The NHS "Red Lines" toolkit, particularly within Cheshire and Merseyside, provides safety measures to manage high-pressure situations, aiming to eradicate "corridor care" and ensure patient safety in non-bedded areas. These tools support staff during peak demand to maintain care quality.
<b>UECUP</b>	Urgent & Emergency Care Upgrade Programme
<b>[...]</b>	Indicates that information has been omitted for anonymity



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