healthwatch
North Northamptonshire

Corby Urgent Treatment Centre Enter & View Report

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Introduction

Healthwatch North Northamptonshire is the independent champion for people using health and social care services across North Northamptonshire. One of our statutory powers is to undertake Enter and View visits, which enable authorised representatives to visit health and care services, observe how services are delivered and gather feedback from patients, carers, families and staff.

Healthwatch North Northamptonshire undertook an Enter and View visit to Corby Urgent Treatment Centre (UTC) to better understand the experiences of people accessing urgent care services within the local area. The visit sought to explore patient experience, accessibility, communication, patient flow, workforce wellbeing and the effectiveness of referral pathways into and out of the service.

The Enter and View programme was developed following discussions with service leaders and was informed by Healthwatch's wider work gathering public feedback regarding access to urgent care services, primary care access and patient navigation across the healthcare system.

Corby Urgent Treatment Centre plays a significant role within the local urgent and emergency care pathway. The service supports people who require urgent assessment and treatment for illnesses and injuries that are not life-threatening but require prompt medical attention. By providing an alternative to Emergency Departments for many conditions, the service contributes to ensuring patients receive care in the most appropriate setting whilst helping to manage demand across the wider healthcare system.

The purpose of this report is not only to highlight areas of good practice, but also to identify opportunities for further improvement. The report brings together feedback from service users, observations made during the visits and perspectives shared by members of staff. The findings are intended to support learning, continuous improvement and ongoing development of the service.

Throughout the Enter and View programme, a consistent theme emerged around the importance of ensuring patients receive the right care, in the right place, at the right time. This principle was reflected in discussions with both patients and staff and remains central to the role that Corby UTC plays within the wider healthcare system.

Notes on Methodology

The Enter and View programme was conducted under the powers granted to Healthwatch North Northamptonshire by the Local Government and Public Involvement in Health Act 2007 and the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013.

Prior to the visits, a planning meeting was held with representatives from DHU Healthcare and Corby Urgent Treatment Centre. The meeting provided an opportunity to discuss the purpose of the Enter and View programme, review the layout and operation of the service, agree practical arrangements and identify key areas for exploration.

During these discussions, Healthwatch North Northamptonshire outlined several areas of interest which reflected themes commonly raised through patient engagement and previous Healthwatch activity. These included:

- Communication between staff and patients.
- Communication regarding waiting times.
- Accessibility of the service.
- Staff wellbeing and workplace culture.
- Patient flow and operational pressures.
- The physical environment.
- Referral pathways into and out of the service.
- Experiences of people requiring reasonable adjustments.
- Integration with wider health and care services.

Visits were undertaken on 12 May 2026 and 2 June 2026. Conducting activity across different dates and times allowed the Enter and View team to observe the service during varying levels of demand and gain a broader understanding of patient experiences and operational pressures.

Evidence gathering included:

- Direct observation of the service environment.

- Observation of patient flow through the service.
- Informal conversations with patients and visitors.
- Structured interviews with 32 service users.
- Structured interviews with six members of staff.
- Review of information provided by the service.

Staff interviewed represented a range of clinical, managerial and leadership roles, enabling Healthwatch North Northamptonshire to gather perspectives from individuals working across different aspects of service delivery.

All findings were analysed thematically. Responses were reviewed to identify common experiences, recurring issues and examples of good practice. Whilst the findings reflect the views and experiences of those who participated, they also provide valuable insight into broader themes affecting the delivery of urgent care services.

The Enter and View programme was undertaken in a spirit of collaboration and continuous improvement. Healthwatch North Northamptonshire would like to thank DHU Healthcare, Corby UTC staff and all patients who took the time to contribute to this work.

Service Overview

Corby Urgent Treatment Centre is operated by DHU Healthcare on behalf of the NHS and forms part of the wider urgent and emergency care system across Northamptonshire.

The service provides urgent medical assessment, treatment and advice for patients experiencing illnesses and injuries that require prompt attention but do not require emergency intervention. Patients can access the service through a variety of routes including self-presentation, NHS 111 referrals, referrals from General Practice and onward referrals from other healthcare services.

The UTC is designed to ensure patients receive care in the most appropriate setting. In doing so, it plays an important role in reducing avoidable attendance at Emergency Departments and helping patients access timely treatment closer to home.

The service provides assessment and treatment for a broad range of urgent health needs and works closely with local GP practices, community health services, hospitals and emergency care providers. Staff described these relationships as essential in supporting safe patient care and ensuring individuals are directed to the most appropriate service when their needs fall outside the scope of the UTC.

During pre-visit discussions, service representatives highlighted that the centre regularly manages significant levels of demand, with activity often reaching approximately 30 to 40 patients per hour during busy periods. Staff described predictable fluctuations in attendance, particularly during evenings and periods when access to primary care services may be limited.

The service has implemented a range of initiatives aimed at improving patient experience and operational efficiency. These include electronic registration and triage systems, revised staffing arrangements, improvements to the waiting environment and enhanced approaches to managing patient flow. Following clinical triage, clinically appropriate patients can also be offered an allotted appointment time and leave the UTC before returning for their assessment, reducing the need for patients to remain in the waiting area throughout their wait. A Patient Engagement role has also been introduced alongside eTriage to provide face-to-face support to patients who require assistance with the digital process.

Leadership teams described a strong commitment to service improvement, with patient feedback, complaints and performance data routinely reviewed to identify

opportunities for development. Staff interviews reinforced this commitment, with participants consistently expressing a desire to improve patient experience and adapt services to meet changing demand.

A particularly important feature of the service is its role within wider healthcare pathways. Staff repeatedly emphasised the importance of helping patients access the right care at the right time and recognised that effective urgent care depends upon strong relationships between primary care, community services, hospitals and emergency care providers.

The Enter and View programme found that Corby UTC is viewed by both patients and staff as an important and valued component of the local healthcare system.

Executive Summary

Healthwatch North Northamptonshire undertook Enter and View visits to Corby Urgent Treatment Centre on 12 May 2026 and 2 June 2026. The purpose of the visits was to understand how effectively the service delivers safe, accessible and patient-centred urgent care and to identify opportunities for improvement.

Evidence was gathered through observation of the service, structured interviews with 32 service users and interviews with six members of staff representing clinical, managerial and leadership roles.

Overall, findings were positive. Patients consistently described staff as caring, professional and approachable, and many expressed confidence in the care they received. Staff demonstrated a strong commitment to delivering high-quality care and showed considerable pride in the service they provide.

The strongest theme emerging from the Enter and View programme was the role that Corby UTC plays in helping people access appropriate care when they are unable to obtain support elsewhere within the healthcare system. Many patients reported attending the service because they had been unable to secure a GP appointment or because they believed the UTC was the most appropriate option for their healthcare needs. Staff similarly reported increasing demand linked to wider pressures across the NHS and difficulties accessing primary care services.

Patients generally reported positive experiences upon arrival, with many describing the triage process as efficient and reassuring. The introduction of electronic registration and triage systems was viewed positively by many service users and staff. Feedback also highlighted that some patients, particularly older people and those with limited digital confidence, may require additional support to navigate digital systems. The service has advised that a Patient Engagement role is already in place alongside eTriage to provide face-to-face support to patients who require assistance with the digital process. This provides an existing mechanism for supporting accessibility alongside digital innovation.

Communication regarding waiting times remained an important theme within patient feedback. However, the service has advised that an appointment booking process has been introduced following triage, enabling clinically appropriate patients to leave the UTC and return at an allotted appointment time rather than remaining in the waiting room for the duration of their wait. This represents an existing improvement in patient flow and patient experience and should be considered alongside the feedback regarding uncertainty during periods of waiting.

Accessibility was another prominent theme throughout the Enter and View programme. Staff demonstrated a strong awareness of the needs of people with disabilities, neurodivergent individuals, people with sensory impairments and those who may require reasonable adjustments. Interviews revealed a workforce committed to providing inclusive care and increasingly conscious of the importance of identifying additional needs at the earliest opportunity.

Staff highlighted opportunities to strengthen accessibility through additional training, improved identification of support needs and greater use of reasonable adjustments. Particular emphasis was placed upon autism, ADHD, learning disabilities, hidden disabilities and communication support requirements.

The physical environment was also discussed extensively by both patients and staff. Although recent improvements had been made to the waiting area, concerns remained regarding comfort during busy periods, sensory considerations and the impact of long waits on patient experience. Staff identified opportunities to further enhance the environment through improved information displays, sensory-friendly resources and additional support for children and families.

Workforce wellbeing emerged as a key consideration. Staff described a supportive workplace culture, positive relationships between colleagues and effective leadership. Daily multidisciplinary huddles were identified as an important mechanism for communication and operational planning. However, staff also reported concerns relating to verbal abuse, aggressive behaviour and the impact of sustained operational pressures. These challenges were often linked to increasing demand and patient frustration associated with waiting times.

The Enter and View programme also highlighted broader system challenges affecting service delivery. Staff described difficulties arising from fragmented digital systems, limited interoperability and barriers to sharing information across organisational boundaries. Participants felt that improved system integration would benefit both patients and clinicians by reducing duplication, improving continuity of care and supporting more efficient decision-making.

Despite these challenges, the overall picture presented by the Enter and View programme was positive. Corby UTC benefits from a highly experienced workforce, committed leadership and a strong culture of continuous improvement. Staff demonstrated a genuine commitment to delivering compassionate, patient-centred care whilst adapting to increasing demand and changing patient needs.

Healthwatch North Northamptonshire identified a number of opportunities to further enhance patient experience, accessibility and workforce support. These include improving communication regarding waiting times, strengthening support for people requiring reasonable adjustments, continuing improvements to the waiting environment, supporting staff wellbeing and enhancing integration across healthcare systems.

The findings contained within this report demonstrate the important contribution made by Corby Urgent Treatment Centre to the local urgent care pathway and provide a foundation for future service development and improvement

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Service User Findings

Service User Demographics

Healthwatch North Northamptonshire spoke with 32 service users during the Enter and View programme. Participants represented a broad range of ages, backgrounds and health needs, providing valuable insight into the experiences of people accessing urgent care services within Corby and the surrounding area.

Of those who participated, 14 identified as male and 13 as female, whilst two participants identified using another gender identity. Three participants chose not to disclose their gender.

The largest age group represented was people aged 65 years and over, accounting for approximately one-third of participants. Eleven participants were aged 65 or above, reflecting the importance of urgent care services for older people, many of whom may be managing multiple health conditions or require additional support when accessing healthcare. Eight participants were aged between 41 and 64 years, whilst younger adults and children were also represented.

The majority of participants identified as White British, although a range of ethnic backgrounds were represented within the sample. Several participants also identified as living with a disability or long-term health condition, highlighting the importance of ensuring urgent care services remain accessible and responsive to diverse needs.

Almost half of participants reported living with a long-term health condition. This is significant as people with ongoing health needs may require more frequent interaction with healthcare services and may experience additional challenges when navigating urgent care pathways.

The demographic profile gathered during the Enter and View programme reflects the varied population served by Corby UTC and provides an important context for understanding the experiences described throughout this report.

Accessing the Service

One of the most consistent themes emerging from service user interviews was the variety of routes through which patients accessed Corby UTC.

Patients described attending the service following self-referral, recommendations from family members, advice from healthcare professionals and referrals from NHS services. Whilst the pathways into the service varied, many participants described Corby UTC as a trusted and familiar source of healthcare support when they were unable to access care elsewhere.

A significant number of participants reported attending because they had been unable to secure a timely appointment with their GP practice. For some individuals, symptoms required assessment more quickly than routine primary

care appointments could accommodate. Others described frustration with appointment availability and viewed the UTC as the most realistic option for obtaining prompt medical advice and treatment.

This finding mirrors themes identified nationally regarding increasing demand on urgent care services and the impact that access to primary care can have on patient behaviour. Whilst patients generally recognised that the UTC was intended for urgent rather than routine healthcare needs, many felt they had limited alternatives available to them.

The findings suggest that Corby UTC plays an increasingly important role in supporting patients who may otherwise experience delays in receiving assessment and treatment. The service is therefore functioning not only as an urgent care provider but also as an important access point within the wider healthcare system.

Why Patients Chose Corby UTC

Service users described a range of reasons for choosing to attend Corby UTC. Many felt the service provided an appropriate balance between accessibility and clinical expertise, particularly when compared with attending an Emergency Department.

Several patients reported that they had previously used the service and returned because of positive past experiences. Familiarity with the service and confidence in the quality of care appeared to influence decision-making for many participants.

Patients commonly described the UTC as a practical alternative to Accident and Emergency services for conditions that required urgent assessment but were not perceived as life-threatening. Many recognised that Emergency Departments should be prioritised for the most serious cases and felt that the UTC offered a more suitable option for their particular healthcare needs.

Some participants also described receiving advice from family members, friends or colleagues who had recommended the service based on their own positive experiences. This suggests that community awareness and reputation continue to play an important role in encouraging appropriate use of urgent care services.

Overall, feedback indicates that patients view Corby UTC as a valuable and trusted healthcare resource within the local community.

Patient Experience

The overall patient experience reported during the Enter and View programme was positive.

Many participants described staff as welcoming, professional and compassionate. Patients frequently commented on the courteous manner of

reception staff and the professionalism demonstrated by clinicians throughout their visit.

Several patients described feeling reassured following interactions with healthcare professionals and reported confidence in the assessments and treatment they received. Staff were frequently praised for taking time to listen, explain clinical decisions and answer questions.

Many participants recognised the pressures under which urgent care services operate and expressed appreciation for the efforts made by staff to manage high levels of demand. Despite sometimes lengthy waits, patients generally distinguished between frustration with waiting times and their experiences of individual staff members, which were largely positive.

The Enter and View team observed numerous examples of respectful interactions between staff and patients throughout both visits. Staff were seen engaging positively with patients and working to maintain a calm and supportive environment despite fluctuating demand.

The findings indicate a workforce committed to delivering patient-centred care and maintaining positive patient relationships, even during periods of operational pressure.

Communication and Information

Communication emerged as one of the most important themes identified during service user interviews.

Patients generally reported that communication from clinical staff was clear once they reached the assessment and treatment stages of their journey. Many felt they understood the advice they were given and appreciated the opportunity to discuss their concerns with healthcare professionals.

However, communication during periods of waiting was identified as an area where further improvements may enhance patient experience.

Several participants reported that they did not receive regular updates regarding waiting times or information about how long they might expect to wait before being seen. Whilst most patients understood that urgent care services prioritise patients according to clinical need, a lack of information sometimes contributed to frustration and uncertainty.

A number of participants described feeling unsure about where they were within the overall process or what would happen next. This was particularly evident during periods following triage and before clinical assessment, where waiting times could be difficult for patients to predict.

Patients suggested that more frequent updates, clearer explanations of the triage process and greater visibility of waiting time information could help reduce anxiety and improve overall satisfaction.

The findings indicate that communication remains a key determinant of patient experience, particularly during periods when demand exceeds available capacity.

Waiting Times and Patient Expectations

Waiting times were discussed by the majority of participants. Most patients reported being triaged relatively quickly upon arrival and felt reassured that their immediate healthcare needs had been assessed promptly. Waiting between triage and clinical assessment was frequently described as the longest part of the patient journey.

The service has advised that an appointment booking process has been introduced following triage, allowing clinically appropriate patients to leave the UTC and return at an allotted appointment time rather than remaining in the waiting room for the duration of their wait. This is an important existing improvement in patient flow and patient experience and provides additional context to the experiences described by patients during the Enter and View visits.

Where patients do remain within the service while waiting, communication remains important. Some participants expressed uncertainty regarding delays or why other patients appeared to be seen before them. In many cases, this appeared to reflect limited understanding of clinical prioritisation rather than dissatisfaction with the quality of care.

The findings therefore suggest that, alongside the existing appointment booking process, continued attention to communication about patient flow, clinical prioritisation and what patients can expect following triage may further improve patient experience during periods of high demand.

Digital Access and Self-Service Check-In

The introduction of electronic registration and self-service check-in systems was generally viewed positively by service users.

Many participants described the system as straightforward, efficient and easy to use. Patients appreciated the ability to register quickly and felt the process supported efficient management of patient arrivals.

However, feedback also highlighted that not all patients experience digital systems in the same way.

Some older participants reported finding the touchscreen process challenging or unfamiliar. Others suggested that individuals with learning disabilities, sensory impairments or limited digital confidence may require additional support when using electronic systems.

Importantly, patients did not suggest removing digital systems. Rather, feedback indicated a preference for maintaining alternative methods of support for those who may struggle to engage with technology independently.

The findings suggest that a blended approach combining digital innovation with accessible face-to-face assistance is likely to provide the most inclusive experience.

Accessibility and Inclusion

Although accessibility was not always explicitly raised by service users, several findings highlighted its importance.

Participants generally described the service as accessible and welcoming. However, experiences shared during interviews reinforced the need for healthcare services to recognise that not all accessibility needs are immediately visible.

Patients living with disabilities, long-term health conditions or additional support needs may require reasonable adjustments to help them navigate healthcare environments effectively. This may include communication support, assistance with digital systems, additional explanation of processes or environmental adaptations.

The findings support themes identified through staff interviews regarding the importance of recognising hidden disabilities and ensuring that support needs are identified as early as possible.

As healthcare services increasingly adopt digital solutions and manage rising levels of demand, ensuring equitable access for all patients will remain an important consideration.

Environment and Facilities

The physical environment was discussed by several participants during the Enter and View programme.

Overall, the service was viewed as clean, organised and professional. Patients generally felt comfortable accessing the centre and described the environment as appropriate for urgent healthcare delivery.

However, some areas for improvement were identified.

Parking was one of the most commonly raised concerns. Several patients reported difficulty finding available spaces, particularly during busy periods. Whilst parking availability extends beyond the direct control of the UTC, it nevertheless forms an important part of the overall patient experience.

Some participants also discussed comfort within the waiting area, particularly during periods of high demand when larger numbers of patients were present.

The findings suggest that continued investment in the waiting environment may further enhance patient experience and support the wellbeing of individuals who may be waiting for extended periods.

Overall Service User Feedback

Overall, feedback gathered during the Enter and View programme demonstrates that Corby Urgent Treatment Centre is a valued and well-regarded service within the local community.

Patients consistently praised the professionalism, kindness and dedication of staff and recognised the important role that the service plays in providing timely access to urgent healthcare. Many participants expressed confidence in the care they received and viewed the UTC as an effective alternative to attending an Emergency Department.

Whilst opportunities for improvement were identified, particularly regarding communication, waiting time information and aspects of accessibility, these findings should be viewed within the context of largely positive feedback regarding the quality of care delivered.

The evidence gathered suggests that Corby UTC is providing a service that patients trust and value, supported by a workforce committed to delivering safe, compassionate and patient-centred care.

Staff Findings

Staff Demographics

Healthwatch North Northamptonshire conducted structured interviews with six members of staff representing a range of clinical, operational and leadership roles within Corby Urgent Treatment Centre.

Participants included Advanced Clinical Practitioners, an Advanced Nurse Practitioner, a paramedic practitioner, operational management and senior leadership representatives. Together, they provided perspectives from across the patient pathway and offered valuable insight into the opportunities and challenges associated with delivering urgent care services.

The workforce interviewed reflected a mature and highly experienced team. Four participants were aged between 41 and 65 years, one participant was aged over 65 and one participant was aged between 26 and 40 years. Four participants identified as White British and two identified as Black African.

Several participants reported significant healthcare experience, with most having worked within healthcare settings for approximately twenty years. Whilst length of service at Corby UTC varied from four months to eight years, all participants demonstrated a detailed understanding of urgent care delivery and the wider healthcare system.

The workforce profile reflects a team that combines substantial clinical expertise with a commitment to ongoing service development and patient-centred care.

Delivering Urgent Care in a Pressured System

One of the strongest themes emerging from staff interviews was the increasing pressure facing urgent care services and the challenges associated with responding to growing patient demand.

Staff consistently described Corby UTC as an essential component of the urgent and emergency care pathway, providing timely access to assessment and treatment whilst helping to reduce pressure on local Emergency Departments.

Interviewees described a service that regularly experiences high levels of activity, particularly during evenings and other predictable peak periods. Staff reported that demand is often influenced by wider healthcare system pressures, including difficulties accessing General Practice appointments and increasing public reliance upon urgent care services.

Several participants reflected on how patient attendance patterns have changed over recent years. Whilst the UTC was originally designed to support patients with urgent but non-life-threatening conditions, staff reported increasing numbers of patients attending because they were unable to access timely appointments elsewhere within the healthcare system.

This was not presented as criticism of patients but rather as a reflection of the wider challenges currently facing health services nationally.

Staff described the need to continually balance patient safety, service efficiency and patient experience whilst managing fluctuating levels of demand. This requires effective triage systems, clear communication and a flexible workforce capable of responding to changing operational pressures throughout the day.

Despite these challenges, staff consistently demonstrated pride in the service and a strong commitment to ensuring patients receive appropriate care as quickly as possible.

A recurring message throughout interviews was that Corby UTC plays a vital role in ensuring patients receive the right care, in the right place, at the right time.

A Strong Commitment to Patient-Centred Care

A particularly positive finding from the staff interviews was the consistent focus on patient-centred care.

Regardless of role or seniority, participants repeatedly emphasised the importance of treating patients as individuals and ensuring that clinical decision-making is guided by patient need.

Staff described a culture in which patient experience is regarded as everyone's responsibility. Interviewees spoke positively about efforts to improve communication, enhance the physical environment and make services easier for patients to navigate.

Senior leaders described how patient feedback, complaints and performance data are regularly reviewed to identify opportunities for improvement. Staff reported that learning from patient experience forms an important part of service development and influences operational decision-making.

Several examples of recent improvements were highlighted during interviews, including enhancements to reception processes, electronic registration systems, staffing models and the waiting environment.

Clinical staff also described the importance of empowering patients to understand their own healthcare needs. Rather than providing generic advice, clinicians reported taking time to explain symptoms, treatment options and signs that should prompt patients to seek further support.

This approach reflects a culture focused not only on treating illness but also on helping patients understand and manage their health more effectively.

Healthwatch North Northamptonshire observed strong alignment between the experiences reported by patients and the commitment to patient-centred care described by staff. The positive feedback received from service users reinforces the effectiveness of this approach.

Accessibility, Neurodiversity and Hidden Disabilities

Accessibility emerged as one of the most significant and progressive themes identified through staff interviews.

Participants demonstrated considerable awareness of the challenges faced by people whose support needs may not be immediately visible. Staff spoke extensively about the experiences of individuals living with autism, ADHD, learning disabilities, sensory impairments, mental health conditions and other hidden disabilities.

A consistent message from interviews was that healthcare services must move beyond viewing accessibility solely in terms of physical access. Staff highlighted the importance of recognising communication needs, sensory sensitivities, cognitive differences and the impact that unfamiliar environments can have on individuals who require additional support.

Several participants discussed situations where patients may appear calm or independent but nevertheless require reasonable adjustments to access care effectively. Staff expressed concern that these needs can sometimes go unrecognised until later in the patient journey.

Interviewees felt that earlier identification of support needs would improve both patient experience and clinical outcomes. Suggestions included improved alert systems, enhanced information sharing and greater use of reasonable adjustments from the point of arrival.

Particular emphasis was placed on the importance of ensuring that reasonable adjustments are understood as measures that promote equity rather than preferential treatment.

Staff described occasions where patients with additional needs may benefit from being prioritised differently, supported more closely or offered alternative approaches to care delivery. Interviewees felt that clearer organisational understanding of these issues would help ensure consistent and inclusive practice.

The findings indicate a workforce that is increasingly aware of neurodiversity and hidden disabilities and actively seeking ways to improve accessibility for all patients.

Equality, Diversity and Inclusion

Closely linked to accessibility was a broader discussion regarding equality, diversity and inclusion.

Staff demonstrated a willingness to engage with complex issues relating to culture, language, identity and differing healthcare expectations. Participants recognised that patients access healthcare services from a wide range of backgrounds and that individual experiences may influence how people communicate, seek support and engage with treatment.

Examples discussed included cultural preferences regarding clinician gender, language barriers, differing health beliefs and the experiences of communities that may traditionally experience barriers to healthcare access.

Staff acknowledged that significant progress has been made in promoting inclusive healthcare but also identified opportunities for further learning and development.

Many participants expressed support for enhanced Equality, Diversity and Inclusion training, particularly in relation to cultural competence, inclusive communication and supporting patients whose needs may differ from those most commonly encountered in clinical practice.

There was a strong recognition that inclusion should not be viewed as a separate activity but rather as a fundamental component of delivering safe, effective and person-centred care.

The willingness of staff to openly discuss these issues demonstrates a positive culture and a commitment to continuous improvement.

Communication and Managing Expectations

Communication was identified as both a strength and a challenge within the service.

Staff recognised the importance of providing patients with clear, timely and consistent information throughout their healthcare journey. Participants understood that communication has a significant influence on patient experience, particularly during periods of prolonged waiting.

Interviewees acknowledged that frustration regarding waiting times is often linked not solely to the duration of the wait itself but to uncertainty regarding what is happening and why.

Several staff members highlighted the difficulties associated with explaining clinical prioritisation within a busy urgent care setting. Whilst clinicians must prioritise patients according to need, this process is not always visible to those waiting and can sometimes create confusion when patients who arrived later are seen first.

Staff identified opportunities to improve communication through clearer information displays, regular updates and enhanced explanations regarding patient flow.

The findings suggest that strengthening communication processes could further improve patient experience whilst helping to reduce frustration and anxiety during busy periods.

The Waiting Room Environment

The waiting room environment emerged as one of the most frequently discussed areas for improvement.

Although staff recognised recent investment in the physical environment, many felt there remained opportunities to further enhance patient comfort and wellbeing.

Interviewees described how waiting rooms can become challenging environments during busy periods, particularly for children, neurodivergent individuals and people experiencing anxiety.

Staff highlighted several factors that can influence patient experience, including noise levels, overcrowding, uncertainty regarding waiting times and limited opportunities for distraction.

Some participants felt the environment could be made more engaging and supportive through the introduction of improved information displays, sensory-friendly resources and activities for younger patients.

The impact of environmental factors on accessibility was also discussed. Staff noted that patients with autism, ADHD or sensory sensitivities may find busy waiting areas particularly difficult to navigate.

These findings support broader themes relating to accessibility and patient-centred care and suggest that environmental improvements could contribute positively to both patient experience and wellbeing.

Workforce Wellbeing and Staff Safety

Staff generally described Corby UTC as a supportive workplace with positive team relationships and effective leadership.

Participants frequently praised colleagues and highlighted the strength of multidisciplinary working within the service. Daily team huddles were identified as a particular area of good practice, supporting communication, operational planning and team cohesion.

Despite these positive experiences, staff also discussed the challenges associated with working within a high-pressure urgent care environment.

Participants described occasions where staff have experienced verbal abuse, aggression and inappropriate behaviour from members of the public. Such incidents were often linked to frustration regarding waiting times or dissatisfaction with healthcare outcomes.

Several interviewees expressed concern regarding the cumulative impact that these interactions can have on staff wellbeing over time.

Alongside concerns regarding patient behaviour, staff also reflected upon the emotional demands of working within urgent care services. Sustained exposure to high workloads, complex clinical presentations and increasing demand creates a risk of fatigue and burnout if not managed effectively.

Participants welcomed existing support mechanisms but felt continued attention should be given to workforce wellbeing, staff safety and psychological support.

The findings highlight the importance of ensuring that staff wellbeing remains a strategic priority, recognising the direct relationship between workforce wellbeing and patient care.

Learning and Professional Development

The interviews revealed a workforce that is highly motivated to learn and develop professionally.

Participants spoke positively about training opportunities and demonstrated enthusiasm for expanding their knowledge and skills. Staff recognised that healthcare continues to evolve and felt ongoing development is essential to maintaining high standards of care.

Several priority areas for future learning were identified, including mental health, neurodiversity, learning disabilities, cultural competence, safeguarding and communication.

Whilst staff generally valued existing development opportunities, some interviewees felt that participation in training can be challenging during periods of operational pressure.

Protected learning time was identified as a potential area for further development. Staff felt dedicated time for professional development would help ensure learning opportunities remain accessible whilst supporting both workforce development and service improvement.

The findings suggest that continued investment in learning and development will be important in supporting workforce resilience and maintaining high-quality patient care.

System Integration and Continuity of Care

The final major theme identified through staff interviews related to system integration and continuity of care.

Participants repeatedly described the challenges created by fragmented digital systems and organisational boundaries. Staff reported occasions where limited access to patient information, diagnostic results or records from neighbouring services created inefficiencies and delays.

Interviewees felt that improved interoperability between healthcare systems would benefit both patients and clinicians by reducing duplication and enabling more informed clinical decision-making.

Staff also emphasised the importance of strong working relationships with GP practices, community services, hospitals and voluntary sector organisations. These partnerships were viewed as essential in supporting continuity of care and helping patients navigate increasingly complex healthcare pathways.

Several participants highlighted the valuable role played by community organisations in supporting individuals whose needs extend beyond clinical treatment alone.

The findings reinforce the importance of collaborative working across the health and care system and demonstrate that effective urgent care relies upon strong connections between multiple organisations and services.

Areas of Good Practice

Healthwatch North Northamptonshire identified a number of notable strengths throughout the staff interviews:

- Strong patient-centred leadership.
- A highly experienced and committed workforce.
- Positive multidisciplinary team culture.
- Daily operational huddles supporting communication and teamwork.
- A strong commitment to accessibility and inclusion.
- Continuous review of patient feedback and service performance.
- Investment in service improvement initiatives.
- A willingness to innovate and adapt to changing demand.
- Effective partnership working across urgent care pathways.
- Clear commitment to ensuring patients receive the right care, in the right place, at the right time.

Overall, the staff interviews revealed a thoughtful, experienced and compassionate workforce that remains committed to delivering high-quality urgent care despite increasing operational pressures. The findings demonstrate a service that continues to evolve, learn and seek opportunities to improve outcomes and experiences for both patients and staff.

Implications & Recommendations

Implications

The findings from this Enter and View programme present a positive picture of Corby Urgent Treatment Centre and demonstrate the important contribution the service makes to the local urgent and emergency care system. Feedback from both patients and staff highlights a service that is valued, well utilised and delivered by a workforce committed to providing safe, compassionate and person-centred care.

The evidence gathered suggests that many of the challenges identified are not unique to Corby UTC but reflect wider pressures being experienced across the NHS. Increasing demand, difficulties accessing primary care, workforce pressures and fragmented digital systems all influence the environment in which urgent care services operate. However, the findings also indicate several opportunities where targeted improvements could further enhance patient experience, accessibility and service effectiveness.

A key implication arising from this work is the importance of communication throughout the patient journey. Whilst patients consistently praised the quality of care received from staff, uncertainty regarding waiting times and a lack of information about what to expect during periods of waiting emerged as recurring themes. The findings suggest that communication has a significant influence on how patients perceive their experience, particularly during busy periods when waiting times may be unavoidable.

The service has provided additional information regarding measures already introduced to manage some of the issues identified through patient feedback. In particular, the appointment booking process following triage provides an alternative to patients remaining in the waiting room throughout their wait where this is clinically appropriate. Similarly, the Patient Engagement role provides face-to-face support alongside digital registration and triage. This additional information indicates that the service is already taking action in response to some of the challenges identified through the Enter and View programme. The focus for further development should therefore include evaluating and strengthening existing approaches, as well as identifying any remaining gaps.

Accessibility also emerged as a significant consideration. Staff demonstrated a strong awareness of the needs of people living with disabilities, neurodivergent individuals and those requiring reasonable adjustments. However, both staff and patient feedback suggest there is scope to further strengthen systems that identify and respond to additional needs at the earliest opportunity. As healthcare services continue to evolve and make greater use of digital

technology, ensuring that all patients can access care equitably will become increasingly important.

The physical environment also warrants ongoing consideration. Whilst improvements have already been made, the findings indicate that the waiting environment continues to influence patient experience, particularly for children, older people, individuals experiencing anxiety and those with sensory sensitivities. The environment should be viewed not simply as a waiting space but as an important component of the overall patient journey.

Staff wellbeing represents another important consideration. The service benefits from a highly experienced and committed workforce that clearly values patient care. However, staff also described increasing demand, challenging interactions with members of the public and the emotional impact of working within a pressured healthcare environment. Supporting workforce wellbeing remains essential not only for staff themselves but also for maintaining high-quality patient care and service sustainability.

Finally, the findings reinforce the importance of system-wide collaboration. Staff repeatedly described the challenges associated with fragmented information systems and organisational boundaries. Whilst many of these issues extend beyond the direct control of Corby UTC, improvements in information sharing and integration could significantly enhance patient experience, continuity of care and operational efficiency.

Taken together, the findings suggest that Corby UTC is performing an important role within the local healthcare system and has established strong foundations upon which further improvements can be built.

Recommendations

The recommendations below have been developed from the themes identified through patient interviews, staff interviews and observations undertaken during the Enter and View programme.

Communication and Patient Experience

Continue to strengthen communication regarding waiting times throughout the patient journey.

· The service has introduced an appointment booking process following triage, allowing clinically appropriate patients to leave the UTC and return at an allotted appointment time rather than remaining in the waiting room for the duration of their wait. This provides an existing approach to managing the impact of waiting times and patient flow. Continued consideration of how patients are informed about their appointment time, what happens following triage and any changes to expected waiting times may further improve patient experience.

Provide clearer information explaining triage processes and clinical prioritisation.

· Several patients expressed uncertainty when other individuals appeared to be seen ahead of them. Providing clear information about how patients are

prioritised according to clinical need may improve understanding and reduce frustration during periods of high demand.

Continue to strengthen public awareness of the role and purpose of the Urgent Treatment Centre.

· Many patients reported attending because they were unsure where else to access care. Supporting public understanding of the UTC's role within the wider healthcare system may help ensure patients access the most appropriate service first time.

Accessibility and Inclusion

Build on existing approaches to identifying and supporting patients who require reasonable adjustments.

· Staff demonstrated strong awareness of disabilities, communication needs and reasonable adjustment requirements. The existing Patient Engagement role also provides face-to-face support for patients who require assistance with the digital registration and triage process. Continued development of approaches to identifying additional needs at the earliest appropriate stage may further support inclusive care.

Continue to develop staff knowledge and confidence in supporting autism, ADHD, learning disabilities, sensory impairment and other hidden disabilities.

· Staff demonstrated strong awareness of these issues and identified opportunities for further learning and development. Continued training and development may help build consistency and confidence in providing appropriate support and reasonable adjustments.

Continue to review the use of patient alerts and reasonable adjustment flags within clinical systems.

· Where appropriate and in line with information governance requirements, effective use of alerts and reasonable adjustment information may support continuity of care and ensure additional needs are recognised throughout the patient journey.

Continue to improve access to interpretation services and accessible information formats.

· Ensuring information is available in formats that meet diverse communication needs will support equitable access to care for all patients.

Environment and Facilities

Continue to support improvements to the waiting room environment, including comfort, privacy and accessibility.

· The service has advised that further improvements to the waiting room environment are being considered as part of ongoing service development. Continuing to consider the needs identified by patients and staff will help ensure that the environment remains welcoming, comfortable and accessible.

Explore sensory-friendly resources and quiet spaces where feasible.

· Such resources may particularly benefit neurodivergent individuals, people experiencing anxiety and others who may find busy waiting environments challenging. These considerations could be incorporated into planned improvements to the waiting environment.

Consider activities or distraction resources for children and families.

· Staff identified that busy waiting environments can be particularly challenging for younger patients and families. Age-appropriate resources may help improve the experience of children attending the service.

Review seating arrangements and capacity during peak periods.

· Ensuring sufficient and comfortable seating remains important in supporting patient dignity and comfort during periods of high demand.

Digital Access

Continue to provide accessible support and alternative routes alongside digital registration and triage processes.

· The Patient Engagement role provides face-to-face support for patients who require assistance with the digital registration and triage process. Continuing to ensure that patients who cannot use digital systems independently can access appropriate support will help maintain an inclusive approach to digital service delivery.

Workforce Wellbeing and Development

Continue to monitor staff wellbeing and the impact of sustained operational pressures, building on existing support arrangements.

· The service has advised that staff have access to an externally provided 24-hour support line and an internal Wellbeing Lead who can provide one-to-one support where required. These existing arrangements complement the supportive workplace culture identified during the Enter and View programme. Continued monitoring of staff wellbeing and awareness of available support remains appropriate given the operational pressures described by staff.

Continue to review measures to protect staff from verbal abuse, aggression and harassment.

· Staff described challenging interactions with members of the public, particularly during periods of prolonged waiting. Continued review of safety measures, reporting arrangements and escalation processes remains appropriate alongside the existing wellbeing support available to staff.

Ensure staff have access to protected learning and development opportunities.

· Participants demonstrated a strong commitment to professional development. Protected learning time may help support workforce capability and service improvement, particularly during periods of operational pressure.

Continue investment in Equality, Diversity and Inclusion training.

· Enhanced training relating to cultural competence, inclusive communication and diverse patient needs may further strengthen the service's commitment to equitable care and build on the existing awareness demonstrated by staff.

Service Delivery and Patient Flow

Continue to monitor and evaluate the effectiveness of the appointment booking process introduced following triage.

· The service has introduced a process whereby clinically appropriate patients can leave the UTC following triage and return at an allotted appointment time. This represents an existing approach to managing patient flow and reducing the impact of extended waits within the waiting environment. Continued monitoring of patient and staff feedback may help assess how effectively the process supports patient experience during periods of high demand.

Continue to monitor demand patterns and align staffing arrangements where possible.

· Staff described predictable periods of increased demand. Ongoing workforce planning should seek to ensure resources are aligned with service activity and changing patterns of attendance.

Continue collaborative working with primary care partners to support patients to access the most appropriate care pathway.

· Many patients reported attending due to difficulties accessing General Practice services. Strong partnership working remains important in ensuring patients receive care through the most appropriate pathway and supporting the wider urgent and emergency care system.

System Integration and Continuity of Care

Support improved interoperability between healthcare systems.

· Staff consistently identified fragmented digital systems as a barrier to efficient care delivery. Improved information sharing may reduce duplication, support clinical decision-making and improve continuity of care.

Strengthen access to diagnostic information and patient records across organisational boundaries.

· Where appropriate, improved access to information may support continuity of care, reduce duplication and enable clinicians to make more informed decisions.

Continue to develop partnerships with community, voluntary and social care organisations.

· The wider determinants of health frequently influence patient outcomes. Strong links with community support services can help ensure patients receive holistic support beyond their immediate clinical needs.

Looking Forward

The findings from this Enter and View programme demonstrate that Corby Urgent Treatment Centre is a valued service delivered by a dedicated and experienced workforce committed to continuous improvement.

The service has highlighted a number of initiatives that were already in place or underway, including the appointment booking process following triage, the Patient Engagement role supporting patients using eTriage, established workforce wellbeing provision and further planned improvements to the waiting room environment.

These developments provide important context to the recommendations within this report. Healthwatch recognises that the recommendations do not sit separately from existing service improvement activity. In several areas, the most appropriate next step is to sustain, evaluate and further develop approaches that are already in place rather than introduce entirely new processes.

The patient and staff experiences gathered during the Enter and View visits nevertheless remain important in identifying where patients may continue to experience uncertainty, difficulty or barriers to access. Healthwatch therefore encourages Corby UTC to consider the recommendations alongside its existing improvement programme, using patient experience and staff feedback to assess the effectiveness of current approaches and identify where further development may be beneficial.

Healthwatch North Northamptonshire recognises the considerable pressures facing urgent care services and acknowledges the efforts of staff in maintaining high-quality care in a challenging operating environment. The recommendations contained within this report are intended to support ongoing improvement and strengthen the service's ability to deliver accessible, responsive and patient-centred care for the communities it serves.

Summary

Whilst patient experiences were largely positive, the findings also identified several areas where further development could enhance the patient journey. Communication regarding waiting times emerged as one of the most consistent themes throughout service user interviews. Many patients reported uncertainty regarding how long they would be waiting or what stage of the process they had reached. The service has also highlighted the appointment booking process introduced following triage, whereby clinically appropriate patients can leave the UTC and return at an allotted appointment time. This existing approach is an important part of the service's response to managing waiting times and patient experience.

Accessibility was another important theme identified throughout the Enter and View programme. Patients and staff alike highlighted the importance of ensuring services remain inclusive and responsive to the needs of people with disabilities, long-term health conditions, sensory impairments and hidden disabilities. Staff demonstrated a particularly strong awareness of the challenges faced by neurodivergent individuals and those requiring reasonable adjustments. The Patient Engagement role introduced alongside eTriage provides an existing mechanism for face-to-face support for patients who require assistance with digital processes. The opportunity for further development therefore relates to building on and evaluating existing inclusive approaches.

The physical environment was also recognised as an important contributor to patient experience. Whilst the service was generally viewed as clean, organised and welcoming, feedback highlighted opportunities to further improve comfort, accessibility and communication within the waiting area. The service has advised that further improvements to the waiting room environment are already planned or underway, providing an opportunity to incorporate the themes identified through the Enter and View programme within this existing work.

Staff interviews revealed a highly experienced workforce with a strong commitment to patient-centred care and continuous improvement. Participants consistently demonstrated pride in the service and a willingness to identify practical solutions to challenges affecting both patients and colleagues. Staff described positive working relationships, supportive leadership and a culture that encourages learning and service development. The service has also highlighted existing workforce wellbeing provision, including access to a 24-hour support line and an internal Wellbeing Lead providing one-to-one support where required.

Service Response

Following receipt of the draft Enter and View report, Corby Urgent Treatment Centre provided additional information to ensure that the report reflects the service's current position and developments that were already in place or ongoing at the time of the Enter and View programme.

The service acknowledged the value of the recommendations and the opportunities identified through the Enter and View process. It also highlighted a number of existing initiatives and areas of ongoing development which provide important context to the findings.

Waiting times and patient flow

The service recognises that waiting times can be challenging within an urgent care environment, particularly during periods of high demand. Corby UTC has introduced an appointment booking process following clinical triage. Where clinically appropriate, patients can leave the UTC and return at an allotted appointment time rather than remaining in the waiting room for the duration of their wait.

The service considers this approach an important improvement in patient experience and patient flow, particularly in reducing the impact of extended waits within the waiting environment. This existing process should be considered alongside the report's findings regarding waiting times, communication and patient flow.

Support alongside digital processes

The service also highlighted the Patient Engagement role introduced alongside electronic triage. This role provides face-to-face support to patients using the digital process, including people who may require assistance to navigate electronic registration and triage.

This provides an existing mechanism for supporting patients who may otherwise experience difficulties using digital systems and is relevant to the report's findings regarding digital accessibility and reasonable adjustments.

Workforce wellbeing

The service reported that staff have access to a range of wellbeing support in addition to the supportive workplace culture identified during the Enter and View programme. This includes an externally provided 24-hour, seven-day support line and an internal Wellbeing Lead who can provide one-to-one support where required.

This existing provision provides an important context to the findings regarding workforce wellbeing and should be considered alongside the continuing pressures associated with working in urgent care.

Waiting room environment

The service advised that further improvements to the waiting room environment are already being considered and are part of ongoing service development. These planned changes provide context to the report's findings regarding comfort, accessibility, sensory considerations and the experience of patients during periods of high demand.

Healthwatch response

Healthwatch North Northamptonshire welcomes the additional information provided by Corby UTC. The purpose of the Enter and View recommendations is to support continuous improvement rather than to suggest that no action has previously been taken by the service.

Where existing initiatives or improvement work are already in place, these should be recognised as part of the service's current position. The recommendations should therefore be read as opportunities to sustain, evaluate and further develop existing practice where appropriate, rather than as an assumption that no work has been undertaken.

The patient and staff experiences gathered during the Enter and View visits remain an important part of the evidence base. The additional information provided by the service has been incorporated to provide a more complete picture of the current position and to ensure that recommendations are proportionate and appropriately targeted.

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