

## St Bartholomew's Hospital Minor Injuries Unit Visit

### Introduction

Visit Details	
<b>Service Visited</b>	St Bartholomew's Hospital Minor Injuries Unit Visit
<b>Address</b>	Kenton and Lucas Block, St Bartholomew's Hospital, W Smithfield, London EC1A 7BE
<b>St Bartholomew's Team</b>	<b>David Curran</b> , Director of Nursing & Governance, Barts Health NHS Trust <b>Sam Atkinson</b> , Associate General Manager, Emergency Department & Pre-Hospital Care Royal London Hospital
<b>Healthwatch City of London Team</b>	<b>Lynn Strother</b> , Trustee, Healthwatch City of London <b>Janet Porter</b> , Associate Board Member, Healthwatch City of London.
<b>Date of Visit</b>	13 <sup>th</sup> August 2025
<b>Status of Visit</b>	Announced

Healthwatch City of London (HWCoL) are undertaking a project looking at emergency care pathways for City residents. The Minor Injuries Unit at St Bartholomew's is just one of the services available to residents who require immediate clinical care.

HWCoL have been informed by residents that the unit is not well known about and is an underutilised service.

### Purpose of the visit

The principal reason for this informal visit was to find out the details of services provided by the unit, establish how it is managed and identify opportunities for it to be better utilised.

## Methodology

Before the visit a preliminary meeting was held with David Curran, Director of Nursing at St Bartholomew's hospital and Healthwatch. David was fully briefed on the reason for our visit.

A questionnaire was sent to the team at St Bartholomew's Hospital beforehand to indicate the information required during the visit.

## The Unit

The unit is based in the grounds of St Bartholomew's Hospital in the City of London and is to be found off the hospital courtyard, in the Kenton and Lucas block.

The unit is funded by Barts Health NHS Trust and is directly managed by Sam Atkinson, Associate General Manager, Pre-Hospital Care at The Royal London Hospital and the Emergency Care Department at The Royal London Hospital.

Care and clinical procedures carried out by the team are mainly contained within the unit, but the team has access to the X-ray department within St Bartholomew's hospital.

## Staffing

This is a nurse-led facility, with an emergency nurse practitioner and another qualified nurse on duty at any one time, plus a receptionist. These are rotated from the Royal London's A&E department. No doctors are based in the unit. The team have access to advice from doctors and the team at the Royal London.

Staffing the MIU is challenging at times. On the day we visited, there was no receptionist. Instead, patients had to call the Royal London switchboard on an internal phone to book in on arrival.

Very rarely, as during the recent doctors' strike, the Royal London Hospital is unable to spare nurses from the A&E department, and so the MIU is temporarily closed.

## Opening hours

The opening hours are Monday to Friday, 8am to 4pm. This is a walk in service. No appointments are required.

The waiting room has plenty of seating and is light and airy. There are leaflets and instructions on contacting the Royal London Hospital to book in if there is no receptionist on duty.

## Services provided

The services provided are clearly stated on the notices in the waiting area and the informative leaflets provided.

Adults and children over the age of two can be treated for the following:

- cuts and grazes,
- broken and dislocated bones,
- minor burns and scalds,
- bites and stings,
- sprains and strains,
- minor head and facial injuries,
- minor eye and ear injuries,
- rib injuries,
- management of simple boils,
- simple back pain or injuries.

The staff are able to stitch wounds, make requests from the hospital X-Ray facilities, plaster broken bones and treat minor injuries.

Conditions that are not treated include chest or stomach pain, headaches, rectal bleeding, vomiting and diarrhoea, flu-like symptoms, rashes, prescription requests and earache/ear infections.

These patients will be directed to nearby A&E departments or advised to see their GP. The nurse on duty will talk to patients and call an ambulance or arrange a taxi if required.

Only patients who are likely to be experiencing a heart attack (MI) can be transferred directly to St Bartholomew's Hospital.

Patients with minor injuries with pre-existing medical conditions will be treated.

## Signposting to the unit

As stated above the unit is based in the grounds of the hospital off the main square. The unit is not immediately visible upon entering the hospital grounds.

There are prominent signs at each hospital entrance stating that there are no A&E services, and that the nearest departments are at UCLH or the Royal London. However, the same notices provide information about the MIU at Barts including opening hours.

Although there are signs within the grounds of the hospital pointing to the unit, there are none in the main hospital reception area, in the King George V building.

## Utilisation

The team at Barts Health have identified that the unit is under-utilised, and they believe it could handle considerably more patients per day.

At present the unit has capacity to see eight patients an hour which is 56 patients a day. When looking at the statistics provided (see appendix), the unit treated 39 patients on its busiest day.

Based on these estimations the unit could treat 13,440 patients per year.

At the time of the visit the unit had treated 2,770 patients so far in the year.

The busiest time of day for the unit is between 11am and 2pm, but even then, it is not working to full capacity. In 2025, the highest average occupancy rate recorded has been 70% at 2pm, as a percentage of eight patients per hour that the unit could treat. Lowest occupancy rates of 32% and 26% are experienced at either end of opening hours.

Drilling down into the statistics, the information the trust uses to manage its services show that the busiest period so far this year was in March when on one particular day, 20 people arrived for treatment in a single hour. More often, it is nearer 10.

## The visit

On the day of the visit, the unit was quiet, and consequently there were virtually no delays in treating patients. Two patients arrived during the visit and were seen straightaway.

## Where do patients come from?

Information from the team clarified that those who attend the unit from the City are mainly local residents (some referred by the Neaman Practice) and City workers but not many tourists. Visitors to the City tend to go to one of the big London hospitals for treatment.

Most adults treated at the MIU are from Islington (587 between January and mid-August 2025), the City of London, Hackney and Tower Hamlets, but a few come from as far away as Hillingdon, Kingston, Sutton, Bexley and other outer London boroughs. It is not known if those patients travelled some distance specifically to visit the MIU or were already in the City for work or other purposes.

The majority of children treated live in Islington, the City, Tower Hamlets and Hackney.

The NHS 111 service will direct suitable patients to the MIU.

## Observations

The unit is an underutilised resource with a good clinical team in place able to offer a good level of service.

Anecdotally we've heard from our population that people find it a good service and that it is highly rated. From a patient's point of view, this may in part be because it is quiet and uncrowded, with short waiting times.

Managers recognise that it is under-utilised, and probably more could be done to raise awareness of the facility.

## Recommendations

1. The facility needs to be better utilised, and Barts Trust needs to raise awareness about the services available at the unit, and where it is located. HWCoL could help sign post to the relevant City channels
2. Well-written and easy-to-understand leaflets have been produced, and these could be distributed more widely in local libraries, pharmacists, the City visitor centre, offices, and other outlets.
3. Barts Health Trust needs to review its own website, as information on the unit is at the bottom of the page on accessing emergency services and not immediately visible.
4. Receptionists and/or triage nurses at the Royal London could also advise patients with minor injuries that there is an alternative treatment centre at St Bartholomew's, just two stops on the Elizabeth Line (a map would be useful).
5. Signage around the hospital needs to be improved and plans to do this are already in place once the new North Wing re-opens. HWCoL could provide some input on signage,
6. The team could consider how volunteers could support the receptionist and/or be ready to step in during staff absences. This may be as simple as being there to help patients check in over the phone.

## Conclusion

Because footfall is low, there is always a risk that the MIU could be shut down as the NHS seeks savings. However, it provides a useful service in the City of London for local residents, offices, construction teams, and shop workers, as well as students and tourists.

If patients are diverted from nearby A&E and Urgent Treatment Centres this would relieve pressure in those units, in addition to this patients could avoid lengthy A&E waiting times in crowded surroundings.

It may be useful for staff to explore ways of enabling the MIU to make greater use of facilities at St Bartholomew's such as the phlebotomy clinic. This could reduce referrals from the MIU to A&E.

HWCoL could work with Barts Trust to help raise awareness by advertising the unit to ease demands on A & E services.

## Appendix

Data provided by the department which has been used in this report is as follows:

Figure 1: Arrivals per hour

Year	Month	WeekSt	8	9	10	11	12	13	14	15
2025	Jan	30/12/2024	6	4	2	3	4	1		2
		06/01/2025	7	10	10	10	12	6	6	7
		13/01/2025	11	19	8	11	10	12	10	5
		20/01/2025	16	11	13	17	14	10	12	18
		27/01/2025	13	10	4	11	12	12	11	8
	Feb	03/02/2025	18	16	15	11	10	11	13	12
		10/02/2025	11	16	8	5	13	13	10	7
		17/02/2025	11	7	7	15	14	14	12	5
		24/02/2025	10	8	9	9	11	13	13	4
	Mar	03/03/2025	7	15	10	12	8	3	10	4
		10/03/2025	11	12	9	18	11	13	13	3
		17/03/2025	15	16	10	20	9	11	10	2
		24/03/2025	16	12	12	17	9	6	9	3
		31/03/2025	3	3	6	4	3	4	1	4
	Apr	31/03/2025	15	15	6	8	4	8	9	4
		07/04/2025	6	5	7	8	6	7	8	4
		14/04/2025	15	6	8	13	8	4	6	6
		21/04/2025	8	8	8	9	3	7	12	4
		28/04/2025	12	4	4	10	6	10	3	6
	May	28/04/2025	6	3	3	8	5	4	3	6
		05/05/2025	6	9	13	4	12	7	6	9
		12/05/2025	16	10	15	11	11	9	15	2
		19/05/2025	11	11	12	16	9	7	7	6
		26/05/2025	11	10	11	11	9	11	9	4
	Jun	02/06/2025	10	10	11	7	11	11	15	9
		09/06/2025	10	8	10	12	10	8	13	6
		16/06/2025	15	17	11	13	16	12	9	10
		23/06/2025	13	17	17	18	10	18	12	8
		30/06/2025	5	1	7	3	1		1	2
	Jul	30/06/2025	12	5	7	10	12	9	14	6
		07/07/2025	17	8	10	10	12	10	11	10
		14/07/2025	8	15	7	12	13	13	13	7
		21/07/2025	10	8	12	5	7	10	12	1
		28/07/2025	9	1	7	4	4	2	1	3
	Aug	28/07/2025	1	1		2	3	1	3	2
		04/08/2025	13	9	8	11	6	10	10	11
		11/08/2025	9	12	15	10	8	10	5	10
		18/08/2025	12	7	10	14	14	10	14	10
		25/08/2025	5	7	4	3	6	4	3	2
2025 Total			410	366	346	395	346	331	344	232
Grand Total			410	366	346	395	346	331	344	232

Figure 2: 2025 MIU occupancy by hour

\*estimated occupancy level based on 8 patients an hour

Hour	8	9	10	11	12	13	14	15	16
Occupancy level	32%	53%	60%	66%	64%	69%	70%	59%	26%

Figure 3: Geographical impact of St Bartholomew's MIU – Adults

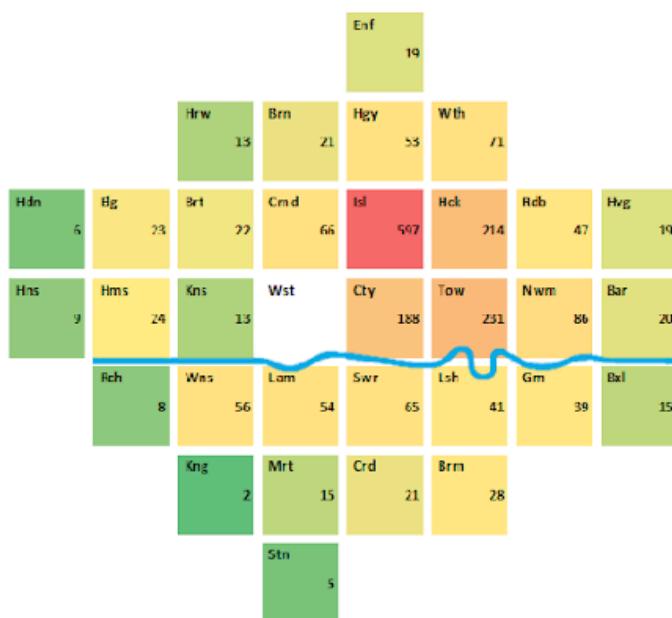


Figure 4: Geographical impact of St Bartholomew's MIU – Paediatrics

