Hands-on senior clinicians ‘could reduce demand’

Initial assessments can cut pressures on emergency care wards

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Having senior clinicians on hand to assess emergency department (ED) patients can transform patient demand, according to a new report from the Institute of Healthcare Management.

The Winter’s Tale report draws on staff views to identify the ‘leadership secrets’ of high-performing ED teams.

It states that when consultants make immediate patient assessments in EDs, there is less replication of work and decisions about next steps are made more quickly.

Consultants take, on average, four minutes to reassure patients they are safe to go home, according to the report.

One unnamed London trust that has adopted this approach reports sending 60-70 adults a day, or about 30% of patients who present at the ED, back into the community.

The institute’s chief executive, Jill de Bene said: ‘When experienced staff see patients first and make the big judgement calls, the positive impact is unquestionable. You need someone with the clinical confidence to say “No” to a patient whose problem should be dealt with elsewhere in the system.’

RCN professional lead for acute, emergency and critical care, Anna Crossley said advanced practice nurses also have an important role to play in assessment in EDs.

‘Many senior nurses can redirect patients to urgent care centres, out-of-hours GP services and walk-in centres if these are available,’ said Ms Crossley.

‘It is about having someone senior enough to take decisions for discharge.’

The report also highlights the importance of effective collaboration.

‘A lot of people think meeting the four-hour wait target is entirely the ED’s business, but it is everyone’s role to hit the target,’ she said.

Ms Crossley warned that the ‘elephant in the room’ is staffing. ‘Emergency care is haemorrhaging nurses with knowledge and experience,’ she said.

YOUNG PEOPLE

Number of children being admitted rises

Emergency department admissions for babies and young children have risen by almost one third in a decade, a report has found.

The report by the Nuffield Trust and Health Foundation also shows that many admissions could have been avoided with better care and support in community settings. Many of these admissions are for conditions that can be managed outside hospital, such as asthma and tonsillitis.

The report is based on an in-depth analysis of patient records from 2006-07 and 2015-16.

Nuffield Trust research analyst and lead author Eilís Keeble said: ‘Children and young people are frequent users of emergency services. While not all emergency hospital admissions can be prevented, many children are treated in emergency settings for chronic conditions, such as asthma.

RCN professional lead for children and young people Fiona Smith said: ‘The increase in short-term emergency admissions could be a sign parents and young people still struggle to access the right services.’

Disproportionate increase

The research finds emergency hospital admissions for the under 25s have grown by 14% over the past decade, compared with 20% for the entire population. Yet admissions for babies has risen by 30% in ten years, with a disproportionate increase in emergency admissions among young children. In addition, the study shows that over the past decade:

» Admissions for viral infections in young people under the age of 25 more than doubled, from 42,243 to 91,386 cases.

» Children and young people admitted for acute and chronic tonsillitis rose by 68%.

Read the report at tinyurl.com/ny5s2dn
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