

# The Royal College of Emergency Medicine

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## PRESS STATEMENT

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# RCEM calls for improvements amid wide variation in the speed of asthma care in UK Emergency Departments

Joined-up solutions are needed to provide asthma care faster as EDs struggle to meet standards, according to a new audit by the Royal College of Emergency Medicine.

The report published today audited 14,043 children and adults with moderate and acute severe asthma presenting to 201 Emergency Departments (ED). It shows that many EDs are finding it challenging to adhere to the time standards set by the British Thoracic Society and RCEM. It is thought that this, in part, reflects the increasing demands on EDs with higher volumes of patients with increasingly complex health needs.

The audit is designed to drive clinical practice forward by helping clinicians examine the work they do day-to-day and benchmark against their peers, and to recognise excellence. There is much good practice occurring and RCEM believes that this audit is an important component in sharing this and ensuring patient safety.

Dr Taj Hassan, President of the Royal College of Emergency Medicine, said: "There are approximately 5.4 million people in the UK who suffer from asthma, with one in five households being affected. Of greater concern is that every 10 seconds someone is having a potentially life threatening asthma attack and despite remarkable efforts by NHS staff, 3 people will die of acute asthma every day in the UK."

In providing care for these patients at the ED front door, resources are stretched. Time to first assessment and treatment can be delayed and therefore re-assessment in a timely fashion more difficult to achieve. Identifying derangement in vital signs and peak flow early is a very important part of good asthma care as it guides treatment and therefore leads to a reduction in morbidity and mortality.

Dr Hassan added: "The reasons for the concerning figures are probably multifactorial. The 'big ticket items' are likely to be a lack of adequate numbers of medical and nursing staff in EDs to cope with demand, crowding due to exit block compromising care delivery, a lack of robust protocols and pathways to support decision making, and lack of education in key areas for staff."

There is much that can be learned from departments who do manage to adhere well to these standards and they should be congratulated. Better sharing of working practices is needed where these are achieved and rapid cycle quality improvement work to raise standards where this is possible. It is not enough to say it is busy and there is no scope for improvement.

Dr Jeff Keep, Emergency Medicine Consultant, said: "There is unacceptable variation when it is known that all EDs are busy. Action must be taken by Departments on fundamental standards that they are failing to achieve. These fundamental standards are priority areas for Quality Improvement Projects (QIPs) in the department."

Dr Hassan emphasised the need for joined up working to improve care: "This report should be discussed by senior multidisciplinary ED teams to look at the key areas of clinical practice so that, where possible, appropriate refinements to the care pathway can be made. More importantly, the data will be of interest to regulators as a surrogate marker of quality care, which is perhaps being compromised due to inadequate staffing levels or overcrowding in the ED. Clinical Directors should consider these issues when making business cases to address staffing and system shortcomings well before the regulator visits."

"There is no doubt that we must identify and address the factors that are compromising our ability to deliver the care we would want for our patients. Thanks again to the authors for shining a brighter light on this common life threatening condition that can be so well managed in the ED and improve the lives of so many."

### -Ends-

### Contact

For further information, or to speak with a spokesperson for The Royal College of Emergency Medicine (between 9am and 5pm), please contact Luke O'Reilly at <u>luke.oreilly@rcem.ac.uk</u> or on 020 7067 1275.

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### About the Royal College of Emergency Medicine

The Royal College of Emergency Medicine is the single authoritative body for Emergency Medicine in the UK. Emergency Medicine is the medical specialty which

provides doctors and consultants to A&E departments in the NHS in the UK and other healthcare systems across the world.

The Royal College works to ensure high quality care by setting and monitoring standards of care, and providing expert guidance and advice on policy to relevant bodies on matters relating to Emergency Medicine.

The Royal College has over 5,800 fellows and members, who are doctors and consultants in emergency departments working in the health services in England, Wales, Scotland and Northern Ireland, Republic of Ireland and across the world.