The Therapy Team at East Surrey Hospital acknowledged the scale and nature of these challenges and identified the need to be proactive in supporting the Trust to address them, helping to create a sustainable healthcare system for the future.

Introduction of the Therapy Team to the Emergency Department in 2012

Service Provision:
The Team is based in the Emergency Department and provides a highly responsive, extended hours, 7-day service helping to facilitate flow within the department. This supports the Trust to achieve operational standards such as the 4-hour target.

The Solution

The Therapy Team receive an average of 191 referrals per month.

The Impact

The team have received multiple care commendations from patients including:

- "The Therapists were wonderful, helpful and understanding of my needs. Top marks for them!"
- "The Therapists were extremely supportive helping with the information I needed!"
- "The Therapy Team in the Emergency Department were brilliant!"
- "The Emergency Department Therapists were extremely helpful in offering assistance and advice to aid my recovery"

The team have received overwhelmingly positive feedback from members of the Emergency Department team including:

- "The Therapy Service are extremely approachable and referrals to them are very easy to make."
- "The team are crucial in facilitating and organising safe and timely discharges, getting patients home and avoiding admission."
- "The Therapy team in the Emergency Department provide a vital service for the Trust."

Lessons Learnt

- It is essential to identify and engage key stakeholders early in the improvement process
- Use of an improvement methodology e.g., the PDCA cycle is vital to ensure actions taken and changes implemented are evidence based
- Develop robust data collection systems which incorporate quantitative and qualitative measures to evaluate effects of changes implemented
- Actively promote and market the service within and external to the organisation
- Working in an Emergency Department was historically a non-traditional role for Therapists. Successful integration into the department required Therapists to adapt to the environment and develop new rapid acute assessment and decision making skills

References

5. Oliver, D (2008) 'Acopia' and 'social admission' are not diagnoses: why older people deserve better' Journal of the Royal College of General Practitioners
6. Crane J, Delany C. Physiotherapists in emergency departments: responsibilities, accountability and education. Physiotherapy
7. The case for change

Older people often have complex medical and social needs over and above the clinical cause of their attendance. Fragility, defined as reduced functional reserve in older people, may result in significant impairment of activities of daily living following relatively minor illness or injury. These types of attendance result in 48% of older people being admitted to hospital from the Emergency Department compared with 20% of younger patients. The clinical risks associated with hospitalisation of older people are clearly documented including loss of function, delirium, and hospital acquired infections.

In 2011, the NHS London Care Commissioning Standards, stated that a multi-disciplinary assessment should be made within 12 hours of a patient presenting to A&E, highlighting the crucial role of therapists in the Emergency Department. Other national guidelines and frameworks which highlight the importance of early assessment and intervention include:

- National Service Framework for Older People (2001)
- Acute medical Care - The right person, in the right setting - first time (2007)
- Quality Care for Older People with Urgent and Emergency Care Needs - 'The Silver Book' (2012)

Consequently, the Trust identified that having a Therapy team present at the front door of the hospital would enable patients to be holistically assessed and a comprehensive and timely multidisciplinary management plan formulated and implemented. This would help to avoid unnecessary admission and enable timely discharge to a safe environment, with appropriate therapy or social support to reduce the risk of re-admission.