

AIM:

To **improve care** for women presenting to the Emergency Department (ED) with **Hyperemesis Gravidarum (HG)**

OBJECTIVES:

- 1.To develop a Same Day Emergency Care (SDEC) service for **Acute Gynaecology** patients
- 2.To provide a **direct access pathway to speciality care** for women presenting with **Hyperemesis Gravidarum**
- 3.To enable **admission avoidance** by managing appropriate patients in an **ambulatory setting**
- 4.To improve **patient flow** through the ED

BACKGROUND:

- In the year prior to launching the unit, an average of **21.3 patients attending ED per month** with hyperemesis in this London tertiary referral centre.
- Average length of stay in ED **5 hours and 46 minutes**
- The **NHS England operational plan** encourages the **development of SDEC units** to improve access to specialty care

METHOD:

We successfully applied for **£18,973 of funding** from Health Education England, to enable the **acquisition and training of clinical staff** to develop a Gynaecology SDEC unit, initially focussed on women with HG.

The development of the unit was over a 5 month period from January to May 2022, and it was subsequently launched to initially **receive referrals directly from ED clinical staff**.

MEASURES OF SUCCESS:

- A **reduction in the number** of HG patients and **length of stay** seen in the ED
- A **reduction in the length of stay** in ED and **number of hospital admissions** with HG
- Availability of the SDEC unit** – aiming for 12 hours a day, 7 days a week

RESULTS:

AVAILABILITY OF THE SERVICE

- We initially opened the SDEC unit **8 hours a day, 5 days a week** based on the staffing capacity, based on the **predicted demand** for the service as well as **capacity** based on staffing levels

UTILISATION OF THE PATHWAY

- In the year since launching the pathway, we saw a **steady increase in utilisation** indicating **successful embedding**

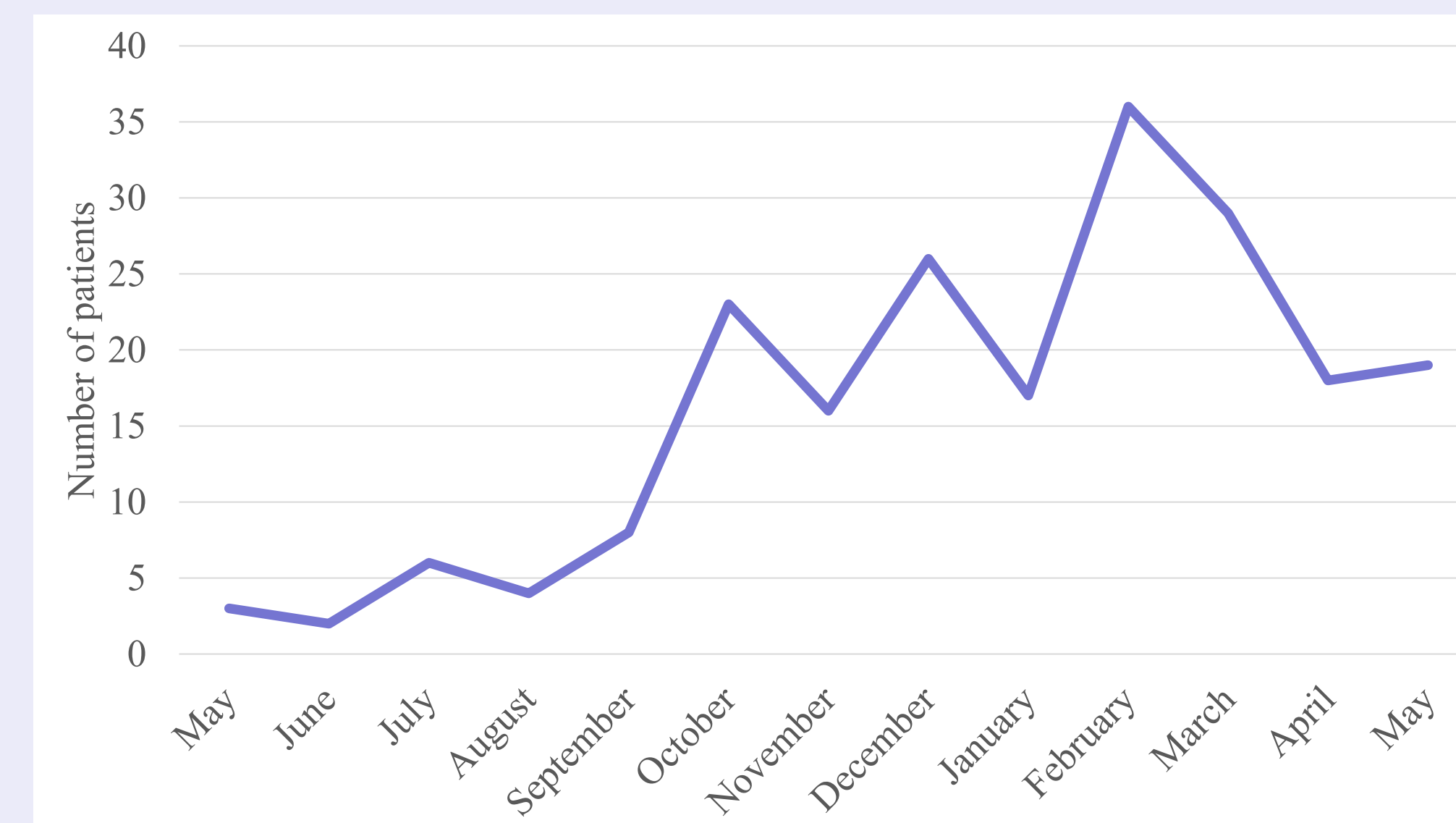


Table 1:

Monthly attendances at the Gynae SDEC Unit since launch, May 2022-23

RATE OF ADMISSION

There has been a significant reduction in admission rate for patients attending ED with HG (a **30% reduction** from **24% pre launch**, **16.5% post launch**, $p < 0.01$)

Of patients attending SDEC, only 2.88% required overnight admission to hospital

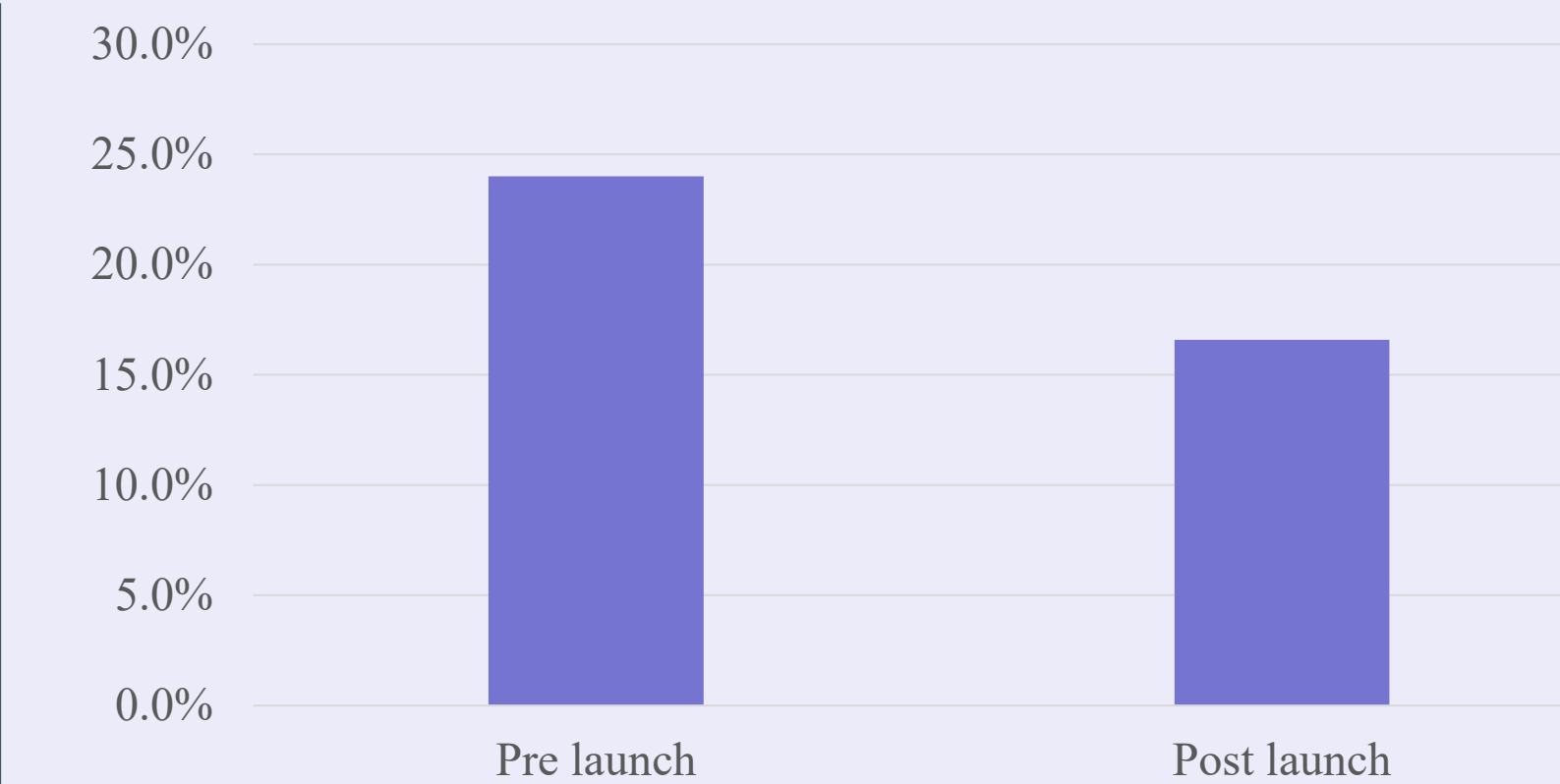


Table 2:

Rate of admission for patients attending ED with HG before & after introduction of the SDEC unit

There has been a trend towards a **reduction in number of patients attending ED with HG per month** – from 21.3 per month pre launch, 19.6 per month, which represents a **reduction of length of stay of 9 hours 48 minutes per month**

CONCLUSIONS:

With the development of the new SDEC pathway, there has been a **significant reduction in the rate of hospital admission** for patients attending the ED with HG.

There is a trend towards a **reduction in number of patients attending the ED**, with an **increase in number of patients receiving direct to specialty care**.

This helps to **improve flow of patients** through the ED, as well as significantly **improving the patient experience** for these women

NEXT STEPS

- **Patient feedback** is currently being collected.
- As the pathway has become more established, it will be further expanded by **allowing direct access via GP and 111 referrals**. This will allow greater access to the pathway for appropriate patients and further reduce footfall through the ED
- There is scope in the future to **expand the pathway** to care for other acute Gynaecology conditions

With thanks to the Gynaecology & Emergency Department clinical and administrative staff for their support in establishing the unit, as well as Health Education England for the funding to allow the pathway to be developed

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