



Reducing the strain on patients, hospitals and clinicians

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The Royal College of Physicians and Surgeons of Glasgow acknowledges recent concern expressed by the College of Emergency Medicine (CEM) in Scotland regarding capacity of Accident and Emergency Departments in Scottish Hospitals. This is an issue that affects our Fellows and Members, not just in Scotland, but across the UK.

The issues around emergency admissions to hospital are complex and multi-factorial. They will not be resolved with a single measure.

Many patients who are referred to, or present at, A&E departments do not need to be there. A combined approach including better integration of health and social care along with earlier detection of illness and better preventative strategies are needed to reduce the strain on our hospitals. This includes targeting our culture of excessive alcohol consumption, smoking, lack of exercise and poor dental health, along with improvements in the early detection of cancer.

Reduced hospital bed numbers without question adds to the pressure on A&E departments, as do the challenges of discharging patients who need support in the community which is not available on a 24/7 basis. We applaud an excellent initiative in Lanarkshire where patients are prevented from unnecessary hospital admission by investigation and treatment in their home with appropriate medical and nursing support. We can also learn from success within palliative care, which provides all care at home or in a hospice at the end of life. Previously, these patients were admitted through emergency departments because no alternative was available.

The reduced willingness of trainees to work in emergency departments is also adding pressure on A&E admissions. The CEM has reported that rising workloads, intensity of work and unsocial hours make Emergency Medicine a less attractive option for young doctors. We support the CEM's call for safe and sustainable working patterns for trainees and consultants across the specialties to be able to provide clinical care and time for supervision which reflects the intensity of the work they do. We are currently involved in discussions with the Academy of Medical Royal Colleges and the Federation of Royal Colleges of Physicians of the UK about these issues.