

**News : 29 October 2007**

## **Right place, right person, first time, 24/7**

A radical new report from the Royal College of Physicians says that ill people should be directed as soon as possible to the most appropriate clinical decision maker who can diagnose their condition accurately and start treatment. This should happen no matter what time of day it is and be supported by round-the-clock diagnostic facilities for both community and hospital-based care.

The report '**Acute medical care: The right person, in the right setting, first time**' says that out-of-hours care outside of hospitals is largely inadequate and inflexible, so patients go to hospitals because there is nowhere else for them to go to get the reassurance and care they need. We need an expansion in the range of services, providers and facilities offering immediate acute medical care outside traditional hospitals, but this expansion should be evidence-based and shown to work before any existing services are removed.

The report is the work of the **Acute Medicine Task Force**, which comprises over 40 representatives directly involved in clinical care for acutely ill people in acute and community care settings, primary care and nursing; in addition to management and lay advisers. The first question the Task Force set out to answer was "If I were really ill, what would I want to happen?" The resulting report sets out a new vision for acute medical services in the UK, which if implemented, could improve patient care and save lives.

**Professor Bryan Williams**, Chair of the Task Force and Professor of Medicine at the University of Leicester, said:

"At the heart of this report was our desire to continue to improve the quality and safety of care for people with acute illness. Getting it right for acute medical care needs changes in the way care is organised to get the most and the best out of staff and local resources and to provide fast and efficient care for patients. It needs changes in the way we work as professionals across the board, to provide wider and more flexible access to clinical decision makers. This report provides the template for a world class acute medicine service - but change itself requires more empowered clinical leadership from within the service."

In addition to recommendations on expanding acute services, the report also recommends:

- A local "navigation hub" with a local, well-publicised telephone number to direct patients to the most appropriate service, linked to a more locally relevant NHS Direct
- In large acute hospitals, the 'front door' should comprise an 'emergency floor' including the emergency department, acute medical unit, critical care and ambulance services - this will make it easier for patients to get to the right place quickly
- Nationally standardised assessment, documentation, and clinical management of common acute medical conditions to reflect best practice. This includes recommendations for a national NHS Early Warning score (NEW score) to aide assessment of illness severity and prompt an appropriate level and speed of response. These recommendations would improve clinical practice, support clinical governance, and make case reviews, clinical audit, and transferring clinical information easier.

**Professor Ian Gilmore**, RCP President, said:

"Since the start of the series of RCP reports on acute medicine in 2000, great strides have been made in reorganising services around the needs of the acute patient, with the introduction of acute medical units and the development of the new specialty of acute medicine and training curriculum. This report builds on that work and presents us with a challenge - to change what we do, when we do it and how we do it. For doctors, nurses, managers and all those involved with the care of acutely ill patients, this task will not be easy, but the status quo is not an option if we are to give these patients a consistently high standard of care."

**Professor Derek Bell**, Professor of Acute Medicine at Imperial College London and a member of the Task Force, said:

"This is by far the most comprehensive report on acute medicine to date and health care professionals, health service managers and policy makers must now work together to deliver better care for patients requiring urgent medical care."

**Claire Perry**, Chief Executive, University Hospital Lewisham, and a member of the Task Force, said:

"Professionalism involves setting and meeting standards, and in their report, the Royal College of Physicians have made clear the quality standards for clinical care of acutely ill medical patients that should be provided to assure the best outcomes. Implementing the recommendations in this report could have far reaching effects on the organisation of acute medical services, and this should be welcomed by NHS staff, the public and patients alike."

**Glynis Dack**, Senior Nurse, Norfolk and Norwich University Hospitals NHS Trust, said:

'From a nursing perspective this report is crucial as it provides suggested nursing establishments for Acute Medical Units, something which has never been available before'.

#### **Editors Notes**

The report will be available priced £12 from the RCP Publications Department - see weblink below

- [Acute medicine report ordering details](#)

**Journalists:** For further information on any story, please contact Linda Cuthbertson, Press and PR Manager on 020 7935 1174 ext.254 or e-mail [Linda.Cuthbertson@rcplondon.ac.uk](mailto:Linda.Cuthbertson@rcplondon.ac.uk).