

Surgical Ambulatory Care: GST Experience

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Surgical Ambulatory Care

General surgery consultant on call pre-June 2015

- 6 colorectal consultants
- 5 upper gastro-intestinal consultants
- 1 endocrine
- 24 hour on call weekdays
- 72 hour weekends
- 'Take and roll system'
- No surgical ambulatory care
- Poor compliance with NHS London standards





Emergency General Surgery

- Two EGS consultants appointed June 2015
- Monday Thursday long days
- Focus on emergency patients, flow, pathways
- No nurse
- Dedicated General surgery emergency theatre list
- 13.30-17.30 Mon-Thurs



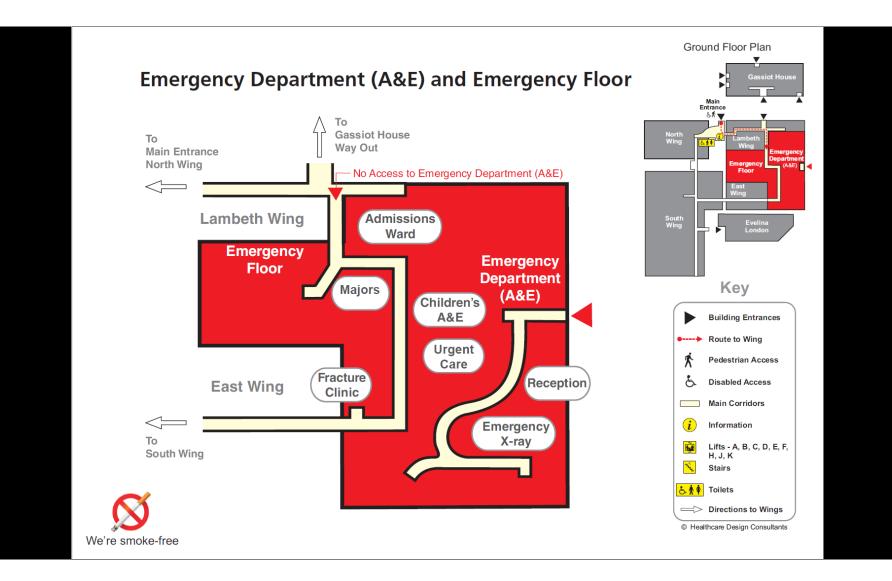


Location, Location, Location

- Originally SAU part of Emergency Department (budget, staffing)
- £20 million rebuild of ED









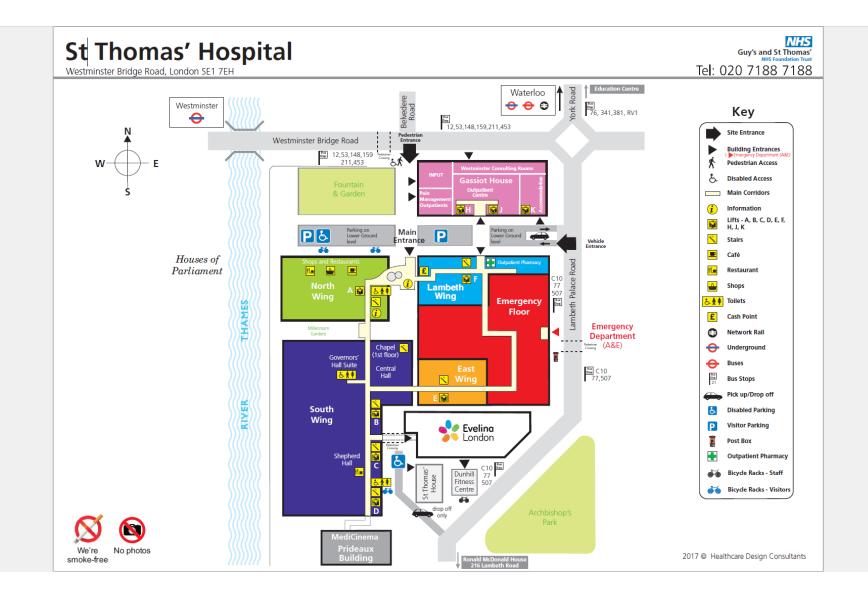


Location, Location, Location

- Originally SAU part of Emergency department (budget, staffing)
- £20 million rebuild of ED
- No provision for SAU in rebuild
- 4 physical locations and 5 SOPs in 7 months











Moving out of ED

- 8 beds on stand alone ward 12th Floor different wing
- Difficulties staffing
- Changed to 12 hour ward worked well, 54% of SAU referrals managed as ambulatory –ie no overnight stay
- Moved as ward destined for another speciality





Sharing with medicine

• 5 beds on 60 bed medical Acute Admissions Ward

- No facility for ambulatory care
- Beds frequently taken by medicine, plastics, vascular average had 1.5 pts there
- Large pool of nurses with no surgical background
- Couldn't take post-operative patients





Sharing with CDU

- 5 beds on temporary CDU
- Attempted to bring returning patients back to UCC
- Difficulties with coding visits, culture, room availability



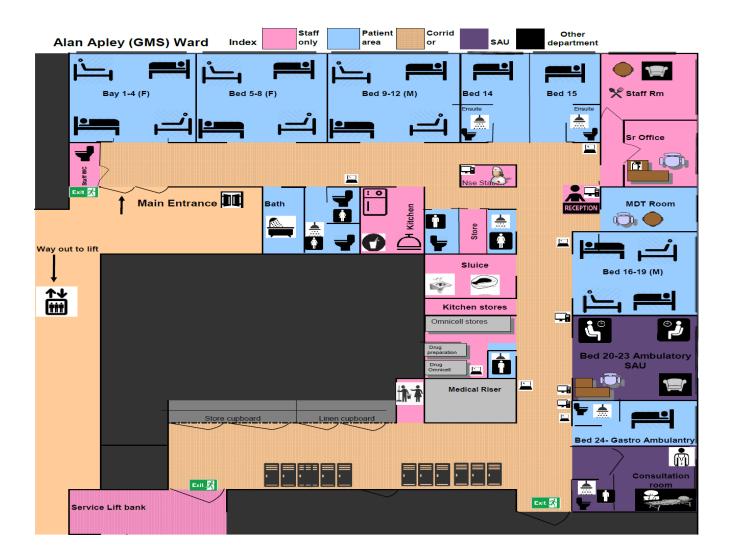


Gastrointestinal Medicine and Surgery Directorate

- GMS Directorate took on SAU no resources
- 6 beds SAU 12 beds gastroenterology
- Ambulatory paracentesis bed, ambulatory SAU room
- Converted a bay into waiting room, recliner chairs











SAU Nurse

- Dedicated SAU nurse Band 6
- Mon- Fri 08.00-17.00
- Attend EGS handover
- SAU diary review/ management
- Liaise with consultant assigned to SAU Hot Clinic
- Carry mobile hotline for ED-> SAU
- Triage SAU referrals from ED and co-ordinate with SNP
- Assist with minor procedures, dressings, phlebotomy and cannulation
- Prepare patients for surgery, walk patients there







- SAU staff nurse Band 6
- SAU HCA Band 3
- Receptionist
- SAU consultant
- SAU F1
- SAU SHO





Communication

- ED -> SAU nurse
- GP -> SAU consultant
- Patient -> SAU





SAU pathways





Alan Apley-SAU Admission process for Pt accepted by Emergency Surgical Team

SAU Ambulatory pathway (Seat)

Patients must be stable
NEWS ≤ 2
Pain score < 5
No D&V
Able to walk to SAU
Be made aware that they will have to sit in ambulatory are for team to review- not appoint

8am - 5:30pm:

•ED nurse phone SAU nurse on 07795287517 for SAU triage assessment •If accepted, pt can walk themselves with their own notes to SAU waiting area for review

5:30pm-8am:

•Surgical team to assess the pt in ED or take handover over the phone •If pt returning the next day- letter and direction to Alan Apley SAU must be given to pt

SAU Bed

NEWS score ≥ 3
Pain score ≥ 5
Had vomiting and/ or diarrhoea in last 48 hours (not infectious)
Infections (MRSA/ CRO)
Not Mobile

Bed on SAU

•ED Nurse to phone SAU nurse on 07795287517 for bed •If bed available on SAU follow triage assessment

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<u>No Bed on SAU</u>

•SNP to be contacted for bed on GI wards (GI Unit/ Nightingale) •If no bed on GI wards and pt allocated elsewhere the pt must be reviewed in ED by the surgical team •Pts are not to be transferred from ED with out review by the surgical team Patients not suitable for SAU

Surgical Emergency Pathway contact Emergency Surgical Team on contacts below + SNP

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Patients Not for SAU •NEWS score 4 •Trauma (Not GI Pathology)

•AAA •Requiring rapid rehydration •D+V in last 48 hrs (infectious) •Dementia or frail •Infections (MRSA/ CRO) •Non-surgical pts e.g. gynae, orthopaedic, medical

Pts will be reviewed in ED by surgical for consideration under the EGS pathway

SAU Nurse: 07795287517 SHO: Bleep 0145 Reg: Bleep 0810 Consultant: no. via rota watch on call

GP Referrals: GP can call EGS consultant directly on 07919880293 (not for ED contact)

•Patients presenting to ED Initial assessment with referral letter addressed to general surgeons can be referred directly to SAU Nurse 07795287517

•Patients will need to have observations taken by ED team- to check NEWS score meets SAU ambulatory criteria •Can walk to SAU ambulatory waiting area on Alan Apley SAU on 8th Floor North Wing





Specific Pathways

- LA abscess
- GA abscess DSU
- Dedicated USS slots
- Priority CT / MRI slots
- EGS DSU lists
- Patient leaflets and map!
- Consistent team medical and nursing
- Virtual and telephone clinics





'Yo-Yo' patients

- Cutaneous abscesses
- Breast abscess
- Testicular torsion
- Trauma
- Gynaecology

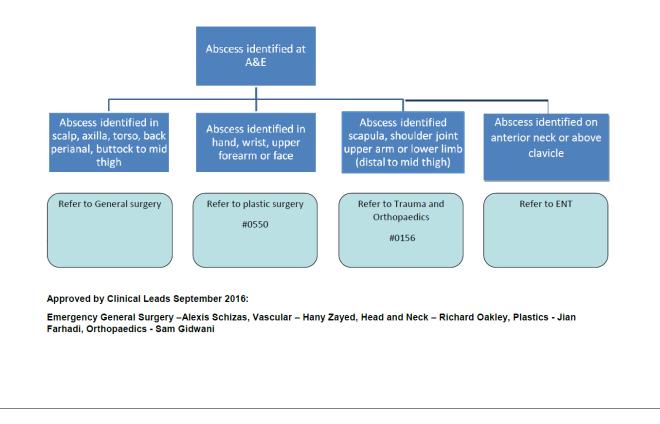




GSTT Trauma Pathways



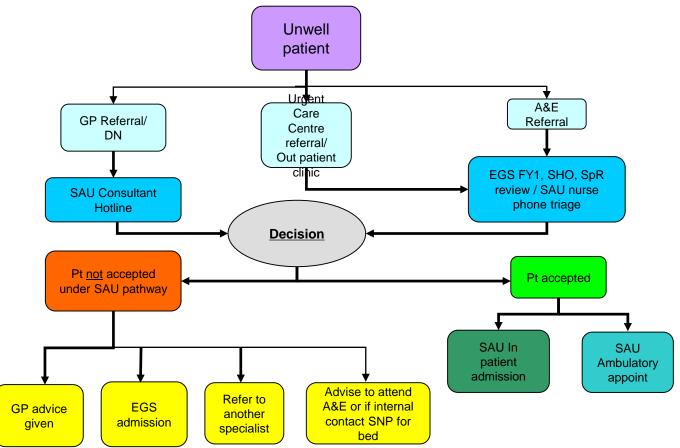
Guy's and St. Thomas' NHS Foundation Trust Abscess Referral Pathways







SAU Patient pathway

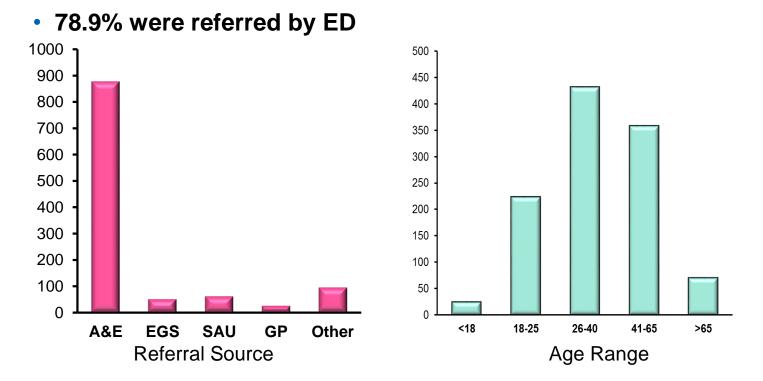






Referral Source

1111 patients transited through the SAU Feb 2016-Jan 2017 Gender- 55% female - 61.2% under 40 year old

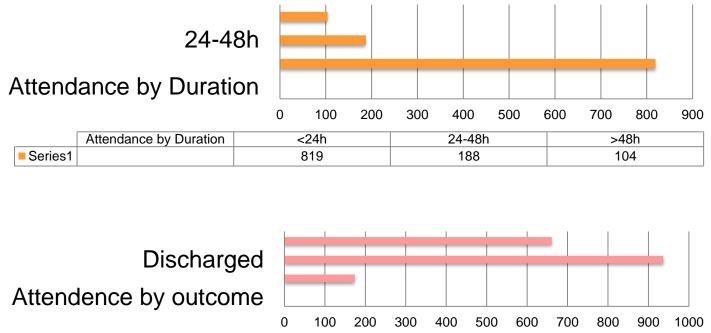


Data: 01/02/16 to 31/01/17; Retrospectively collected Sources: SAU Diary, PIMs (Patient Index Management), E-noting and EPR (Electronic Patient Record)





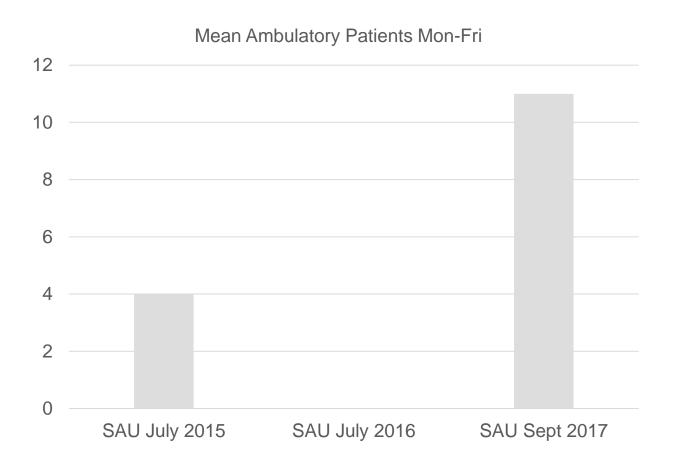
SAU stay by duration and outcome



	Attendence by outcome	Admitted	Discharged	Total returning
Series1	-	174	937	661











Patient satisfaction: Friends & Family

Recommend	Not Recommend	Total Responses	Extremely Likely	Likely	Neither Likely or Unlikely	Unlikely	Extremely Unlikely	Don't Know
94.215%	1.653%	242	167	61	8	3	1	2





Success

- Patient satisfaction
- ED satisfaction
- GP satisfaction
- Increasing number of patients
- Teaching / training





Challenges

Inflow

- Small no. beds
- Communication non ambulatory referrals

Outflow

- bed management transfer to inpatient beds
- pharmacy
- outliers





Challenges

Space

- Second clinic room
- Location?
- Seven day service
- IT support paper diary
- ANP
- Medical staffing
- Data collection
- Coding
- Pharmacy





Acknowledgements

- Martine Osborne Ward sister
- Catherine Bilborough Matron
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