

# Where's SDEC?

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# Emergency Care Data Set

## Urgent & Emergency Care “Flying Blind”

- Commons Health Select Committee 2013
- Started 2015
- Finished 2019

Approx. 200 Type 1 / 2 EDs [+ UTCs]

40 different IT suppliers

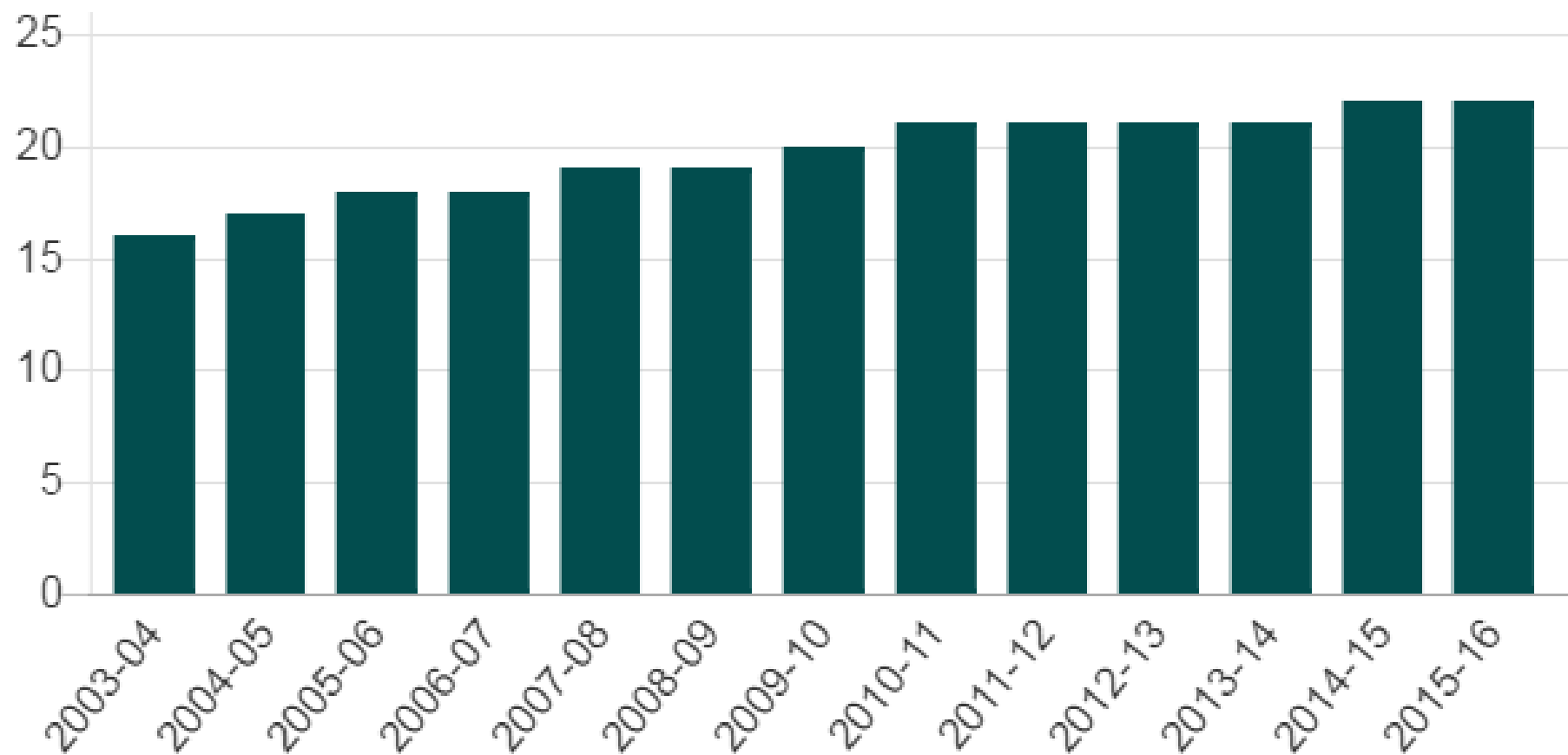




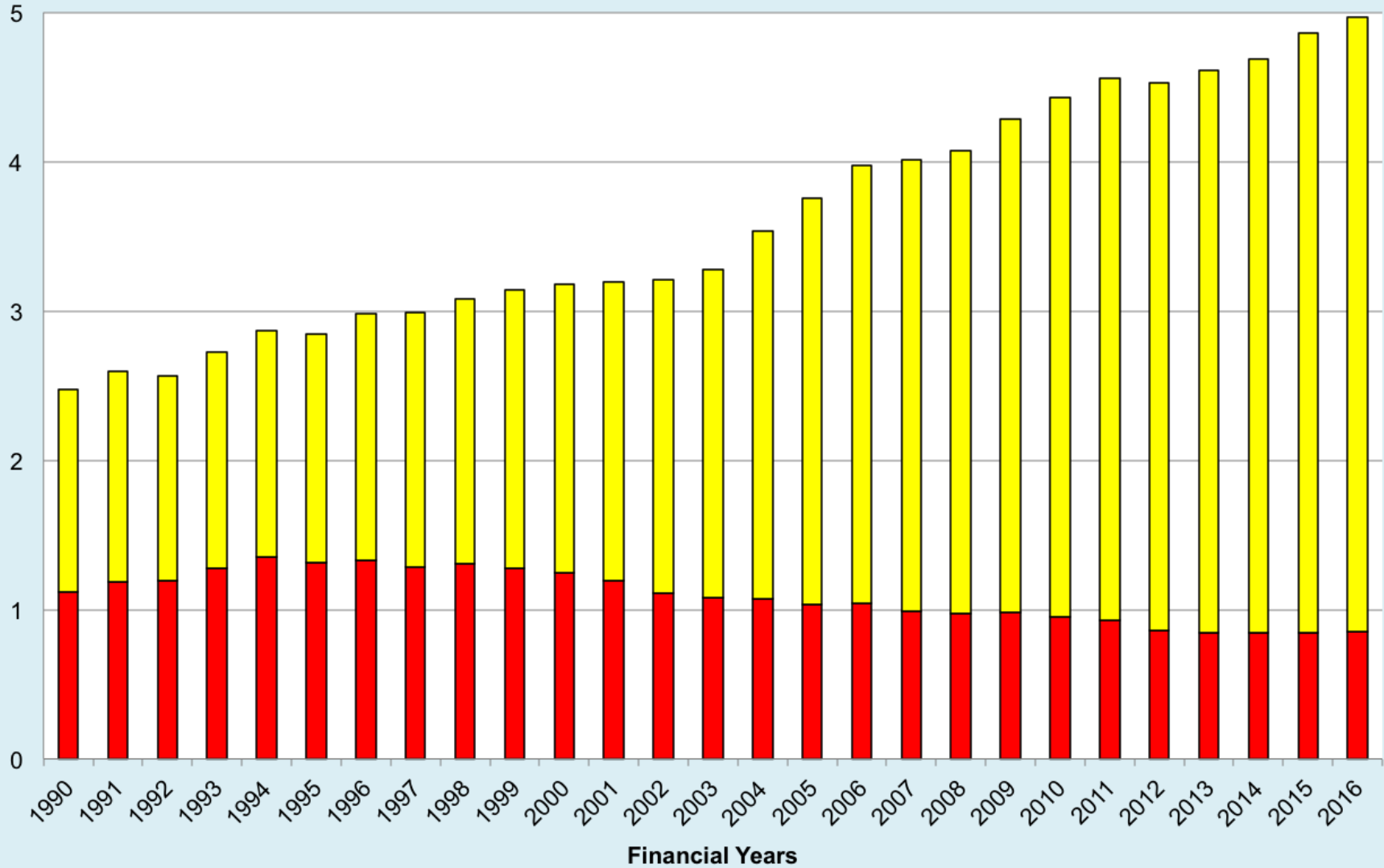


## Increasing demand for urgent treatment

Visits to A&E in England (in millions)

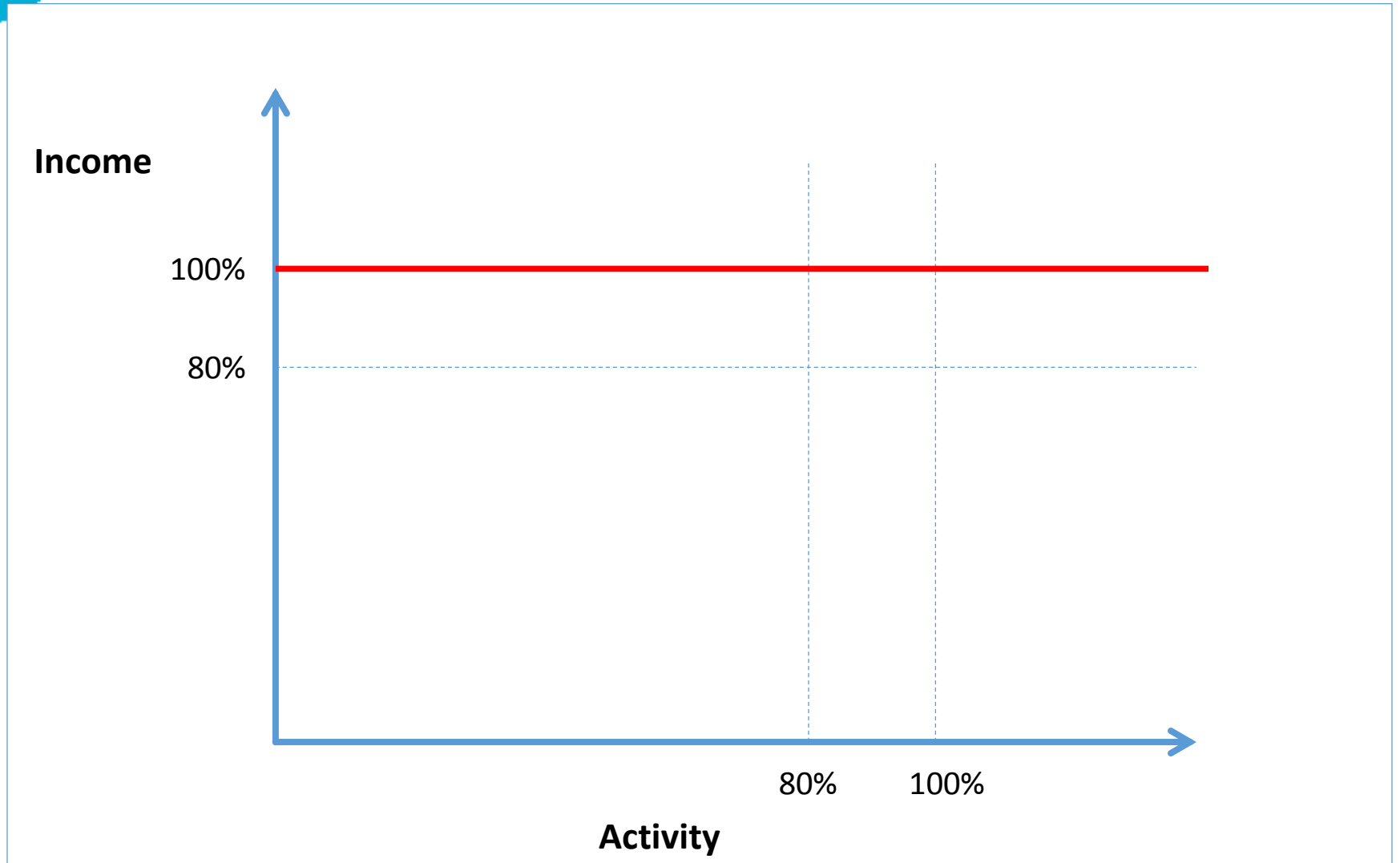


# NHS Hospital Emergency Admissions [millions patients] from Emergency Department (yellow) vs GP (red)





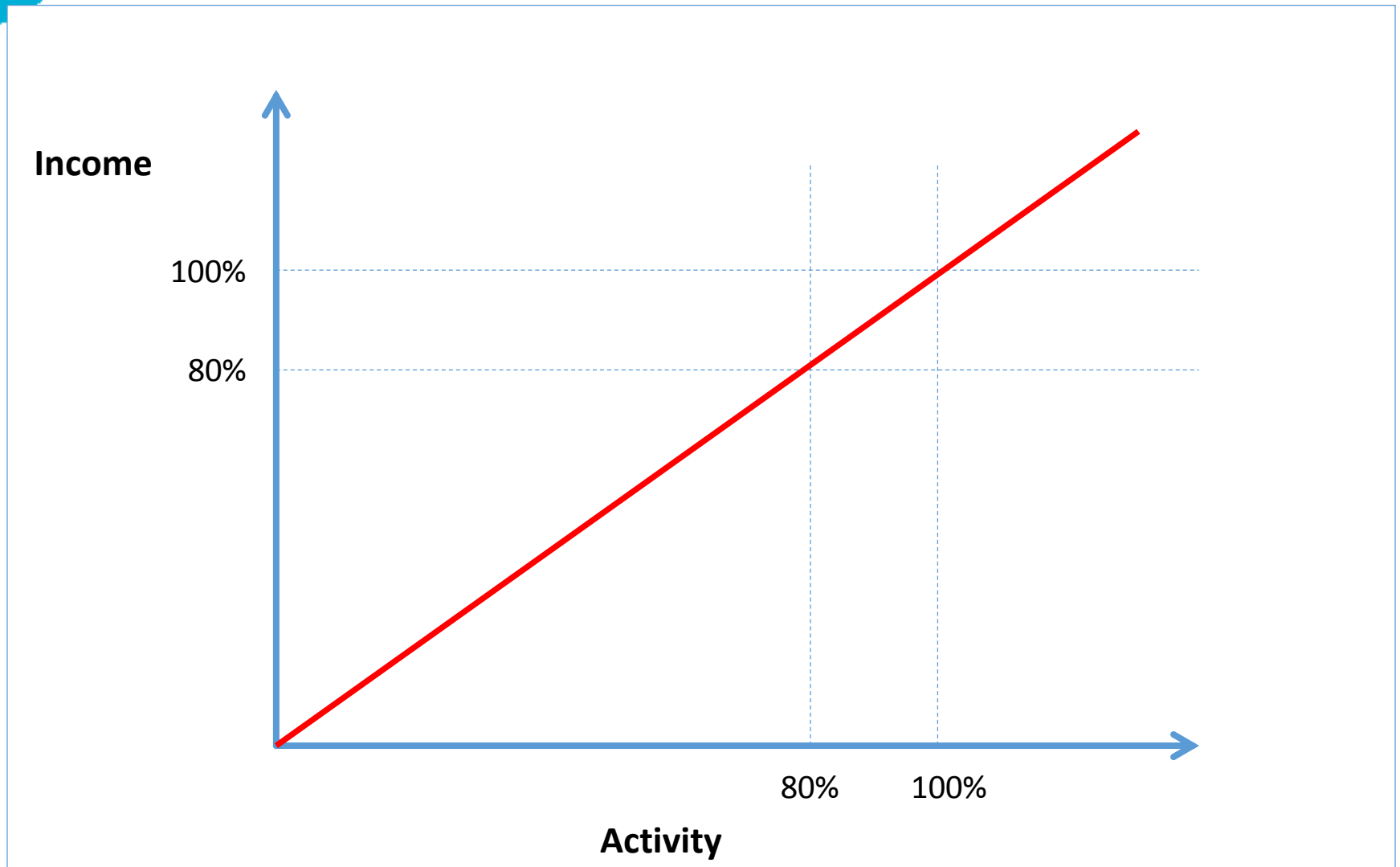
# Block Tariff







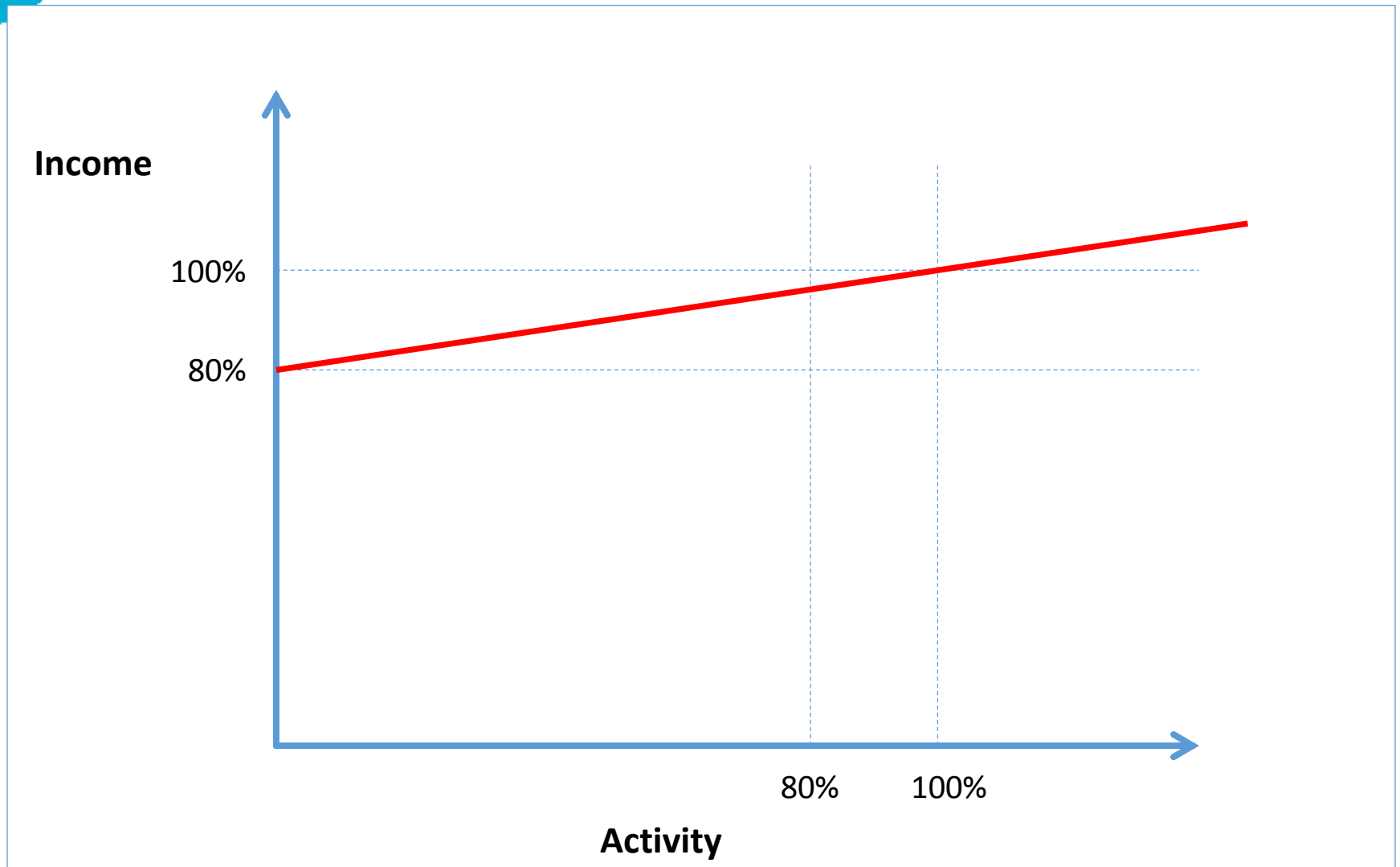
# PbR Tariff (HRGs = DRGs)







# Blended payment

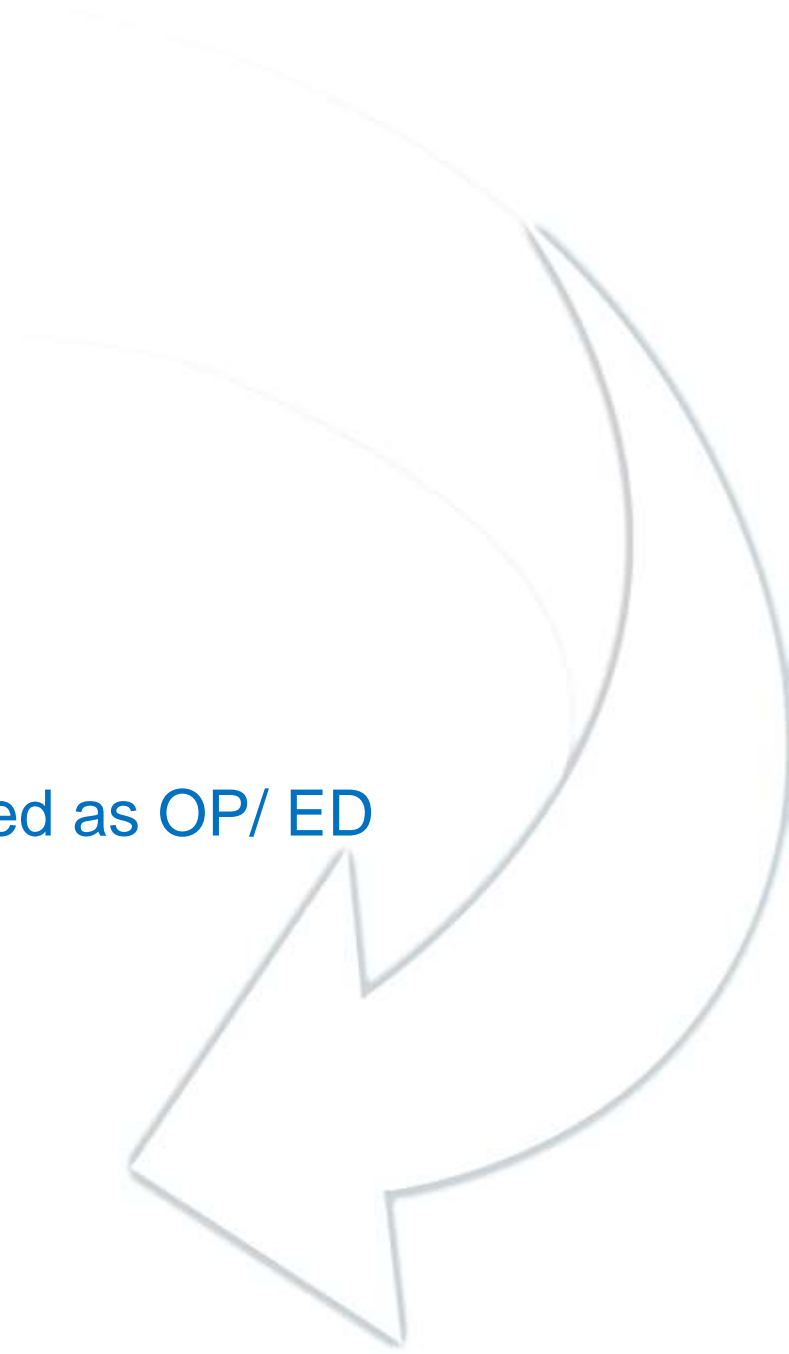


# Best Practice Tariff

- Variable take up
- ? Level of activity
- ? All SDEC recorded
- BPT not claimed
  - Local arrangements – recorded as OP/ ED
  - Block tariff

OR

- Not doing SDEC



# Success ?

Zero Day LoS admissions

**^ 9.6% (2017-18)**

- ? Zero / Low value-added SDEC
- ? High value-added SDEC
- ? Gaming
- ? Breach avoidance

Expanding rapidly, we don't know why



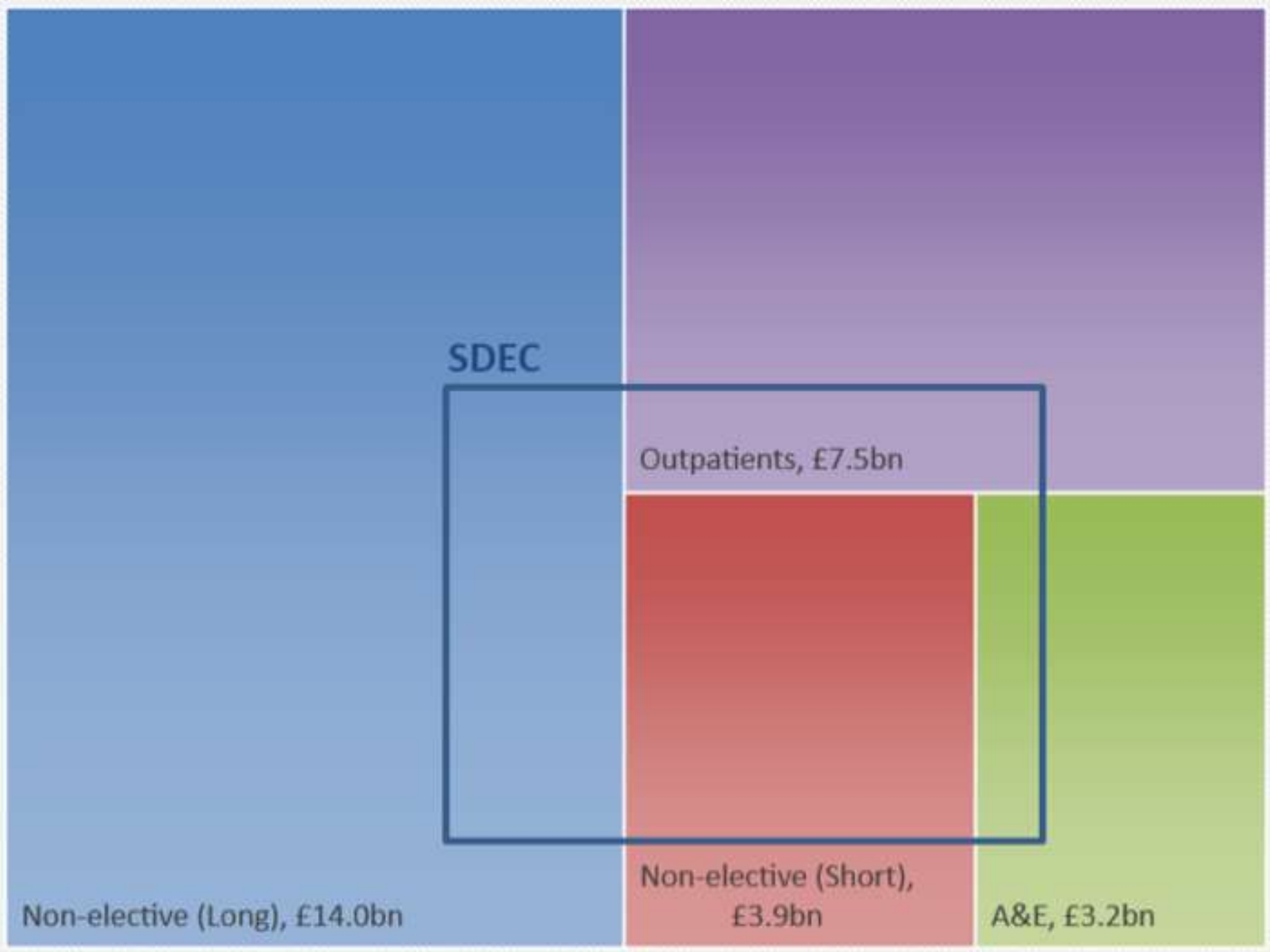


known  
unknowns









SDEC

Outpatients, £7.5bn

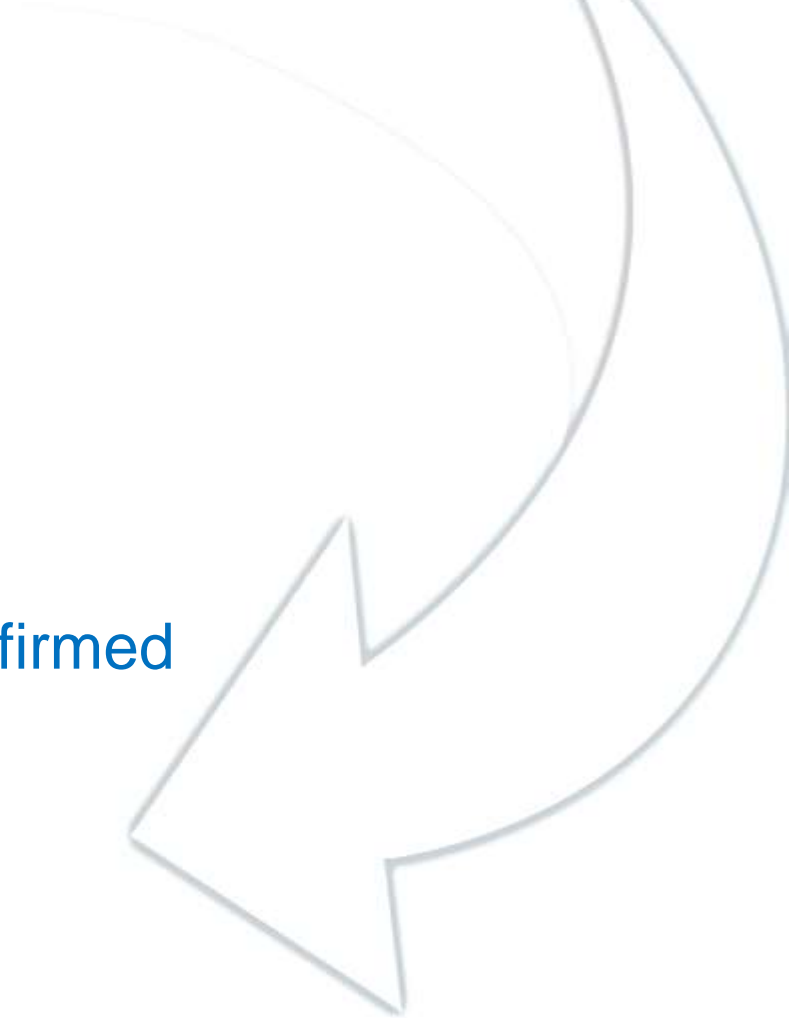
Non-elective (Short),  
£3.9bn

A&E, £3.2bn

Non-elective (Long), £14.0bn

# Why use ECDS for SDEC?

- Baked in from the start
  - Worked with AEC Network
- Time based, milestones
- Input & Output metrics
  - Chief Complaint & Acuity
  - Diagnosis & Suspected / Confirmed









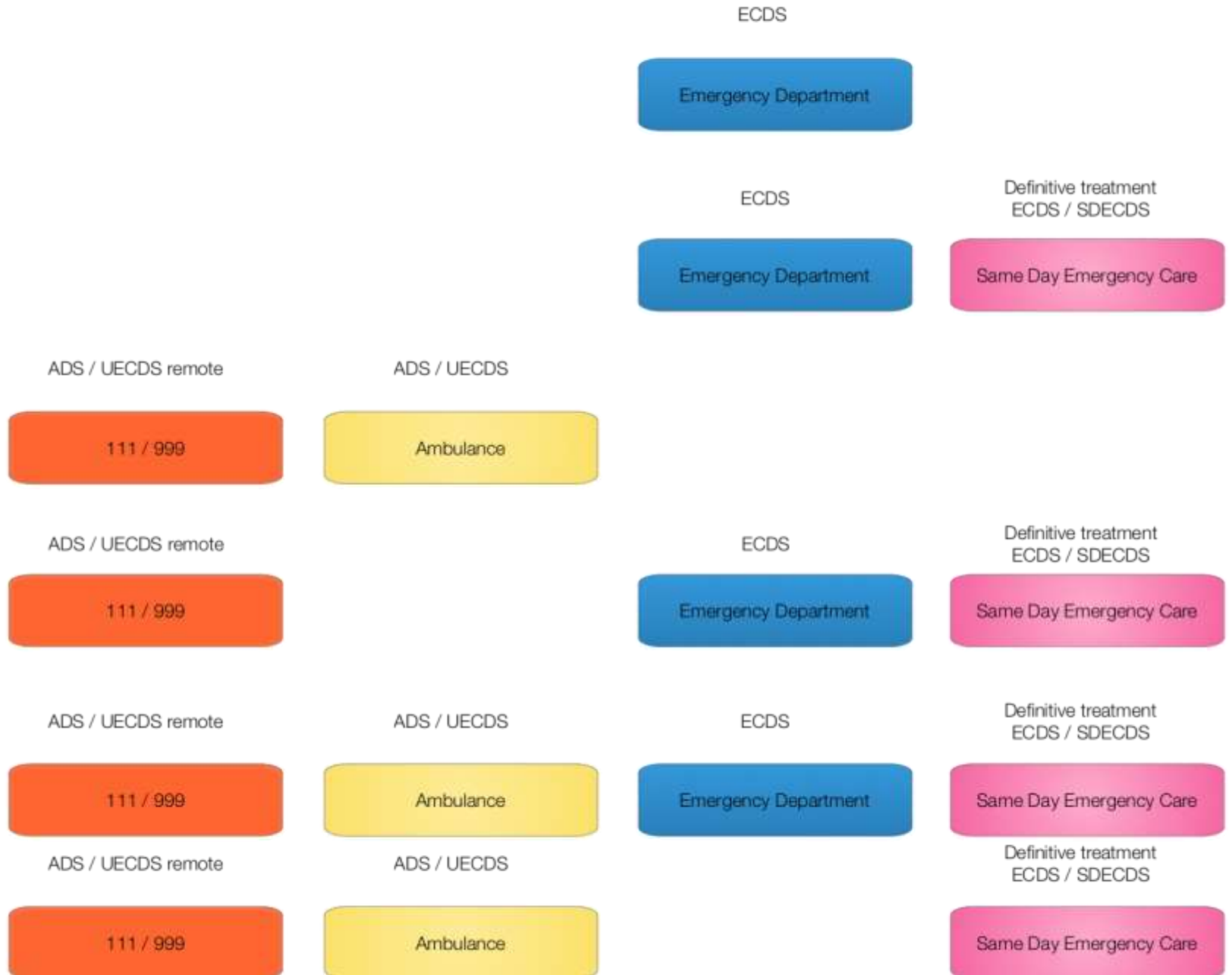
**ADS**

**IUCDS**

**ECDS**

**SDECDS**

# Urgent and Emergency Care : Modular Data Set



# Process Re-engineering

## SDEC Short-term aims

- Count SDEC consistently
- Enable tariff – value-based commissioning

## SDEC Long-term aims

- Co-located with ED
- Flexible patient flow / staffing
- Process model vs. condition model





# Where we are now

Piloting ECDS in SDEC – 10 Trusts

- First site live (Wexham Park)



# Summary

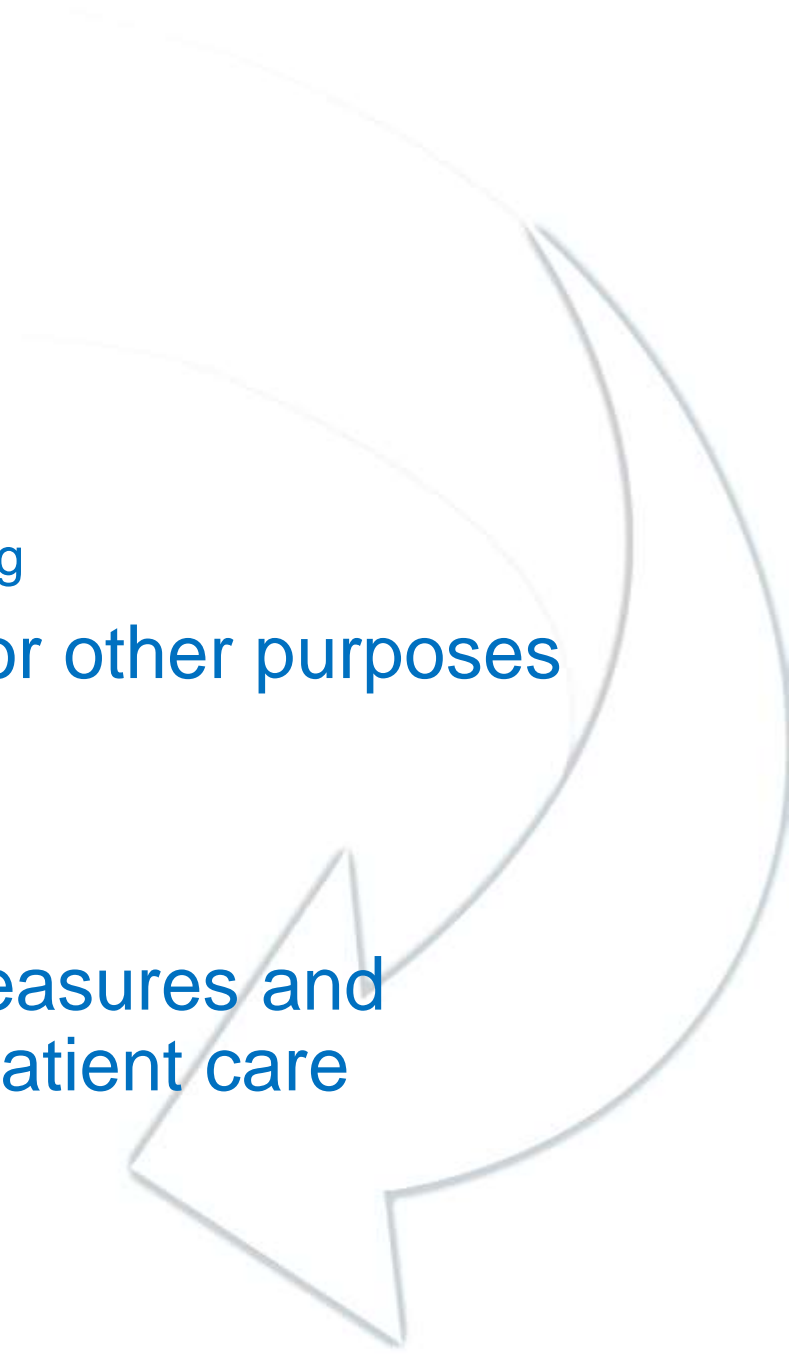
## 1. The world has changed

- Patients have changed
- Can't keep doing the same thing

## 2. Existing data – collected for other purposes

- Not valid
- Not reliable

## 3. We need a system that measures and rewards excellent SDEC patient care



"If you can't measure it,  
you can't improve it."

Peter Drucker

