



**Dr Tom Hughes, Consultant, John
Radcliffe Hospital**

ECDS Update

Collecting data – Who cares?

Tom Hughes MSc MBA MRCP FRCS FRCER FFCI

Consultant, John Radcliffe Hospital

Hon. Sen. Lecturer in EM

ECDS Clinical Lead

ECDS
Emergency Care Data Set



WINTER IS COMING

Topics

- EM are completely hopeless
- Why did EM need better data?
- How is ECDS different ?
- Using ECDS in Same Day Emergency Care



HOME NEWS AND ANALYSIS NEWS

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Emergency care

Placing pharmacists in emergency departments could help 36% of patients

The Pharmaceutical Journal | 13 MAY 2016 | By Debbie Andalo CA

Studies carried out by Health Education England suggest pharmacists can take pressure off hospital emergency departments



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CONTENT

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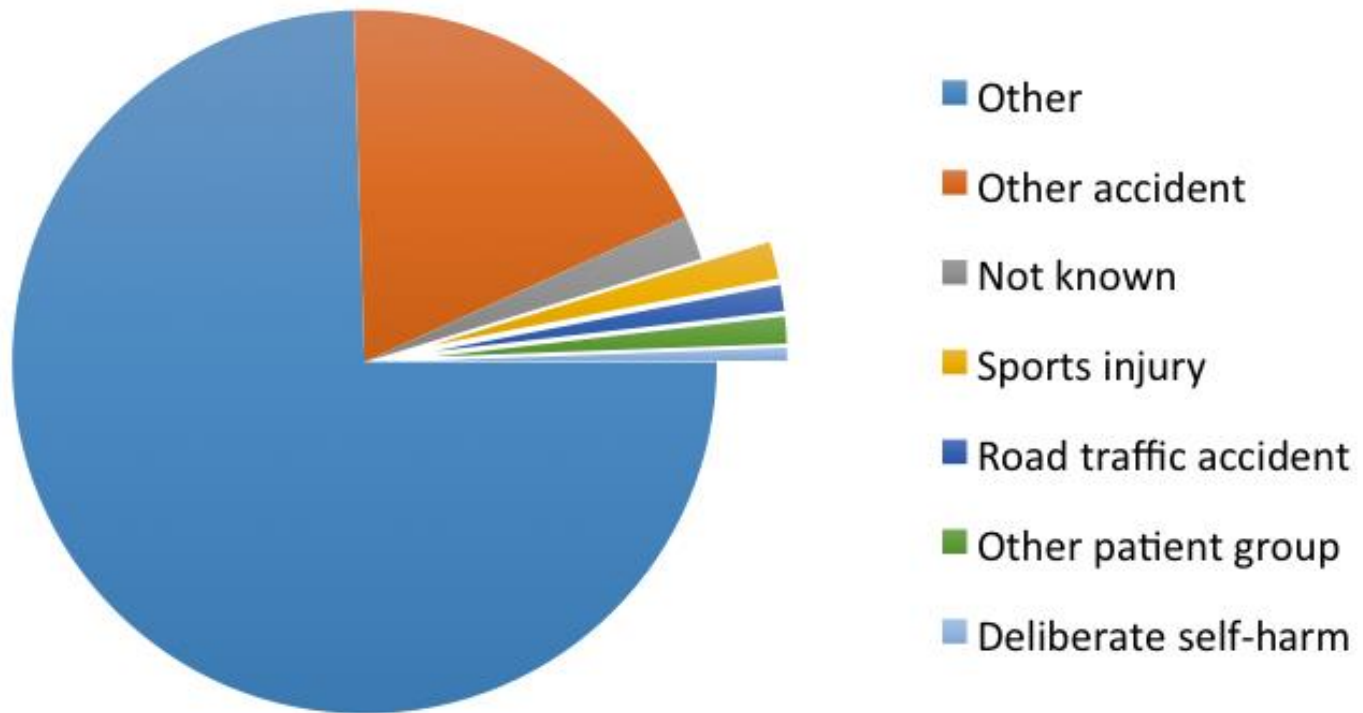
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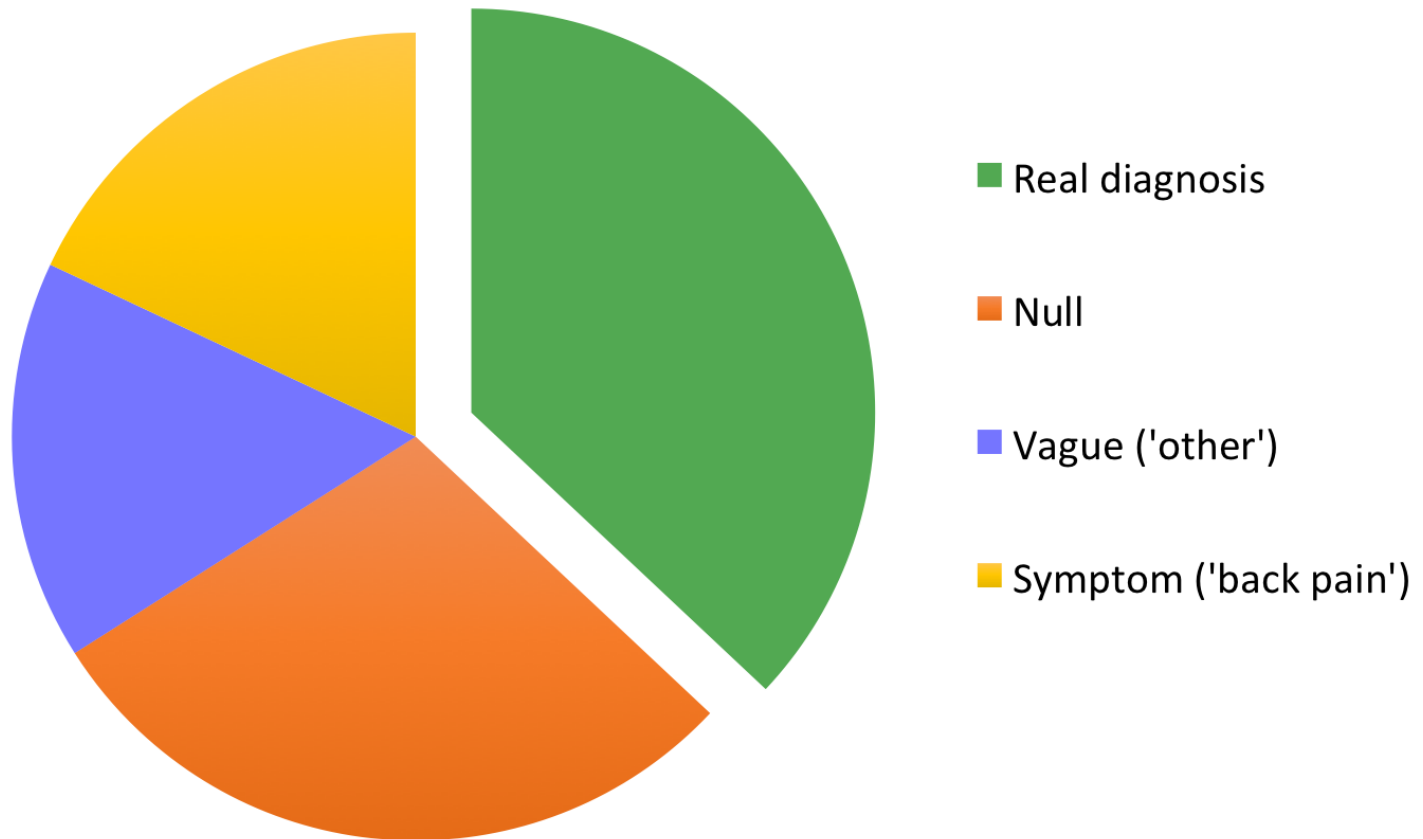
- Only 3% NHS budget
- 99% EM work done better / cheaper by others
- EM = North Korea
 - Always in crisis, causing trouble
 - No friends
 - Anyone could do a better job running it



Reason for attendance : 5% real



% 'real' diagnosis



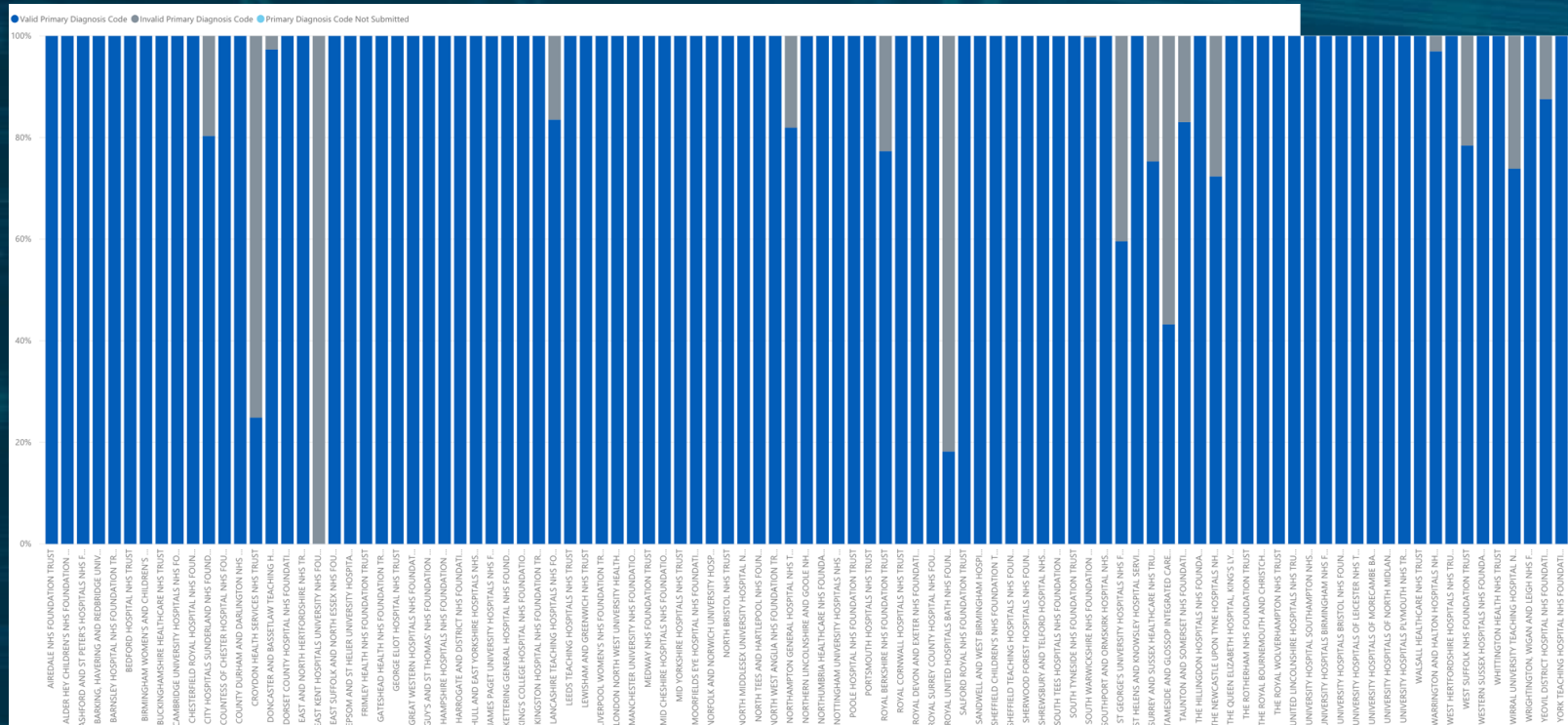
What's different in ECDS?

- Every patient has
 - Chief Complaint (150 items)
 - Acuity (1-5)
 - Diagnosis (920 items)
 - + Qualifier (suspected / confirmed)
 - Not vague
 - Not a symptom

Pilot site : Pre / Post

Pre ECDS - SNOMED (2013-15)		Post ECDS – ECDS SNOMED Subset (2 months)	
Description	Volume	Description	Volume
Disease (disorder)	41,343	Concussion with no LOC (disorder)	3,891
Chest pain (finding)	22,224	No abnormality detected (finding)	3,743
Minor head injury (disorder)	21,977	Lower respiratory tract infection (disorder)	3,344
Abdominal pain (finding)	14,110	Urinary tract infectious disease (disorder)	2,313
Soft tissue injury (disorder)	9,968	Upper respiratory infection (disorder)	2,285
Urinary tract infectious disease (disorder)	9,480	Sprain of ankle (disorder)	1,881
Abdominal pain - cause unknown (finding)	7,851	Infectious gastroenteritis (disorder)	1,721
Sprain of ankle (disorder)	7,816	Acute coronary syndrome (disorder)	1,482
Headache (finding)	7,285	Cellulitis	1,339
Falls (finding)	6,661	Sprain of knee (disorder)	1,175
Total	148,715	Total	23,174

ECDS Data quality Aug 2018



ECDS : Clinically led measurement

- Led by RCEM
 - Board with NHSE / I / D / PHE
- Started Feb 2015
- Implemented Autumn 2017
- Same Day Emergency Care
- Urgent Emergency Care Data Set
 - (Ambulance / 111 / GP OOH)

Why do I care?

- No measures = no value
 - Movement of work towards front door
 - No movement of tariff
- Vague diagnoses = no value = no tariff

SDEC/ AEC = 'flavour of month' BUT

- No consistent measure
[if using ECDS in SDEC/ AEC –please contact us]



So what?

Direct benefits

- Clinical data
- Process data – who/ when/ why
- Communication GP / Patient
- Research
- Audit / Quality / Safety

Indirect benefits

- Commissioning
- Strategy, Policy

‘Without data, you are
just another person
with an opinion’

W. Edwards Deming

