

Evidence Brief: Urgent and Emergency Care

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Produced by the HEE Knowledge Management team Evidence Briefs offer a quick overview of the published reports, research and evidence on a workforce-related topic. A starter for 10 on the evidence if you will.

Key publications – the big picture

[Securing the future workforce for emergency departments in England](#) HEE, NHS England, NHS Improvement and Royal College of Emergency Medicine, February 2016

This plan aims to grow a multi-professional workforce, reduce attrition in medical training and ensure emergency departments in England are attractive places to work.

[Transforming urgent and emergency care and the vanguard initiative: learning from evaluation of the southern cluster](#) RAND Europe, October 2017

This RAND Europe evaluation aimed to examine the impact of the Urgent and Emergency Care (UEC) vanguards, the processes underpinning delivery and implications for future policy and practice.

[Coordinated, consistent and clear urgent and emergency care: implementing the urgent and emergency care vision in London](#) Health Partnership London, November 2017

Professor Sir Bruce Keogh's national Urgent and Emergency Care Review called for the transformation of services to address the unsustainable pressures on the

urgent and emergency care system and offered recommendations to deliver transformation. In London, they made significant strides in improving urgent and emergency services. They wanted to build on these efforts and draw from the Keogh review to accelerate transformation and deliver high quality, safe urgent and emergency care, seven days a week.

[Safe, sustainable and productive staffing in urgent and emergency care](#) NHS Improvement, November 2017 (updated June 2018)

An improvement resource to help standardise safe, sustainable and productive staffing decisions in urgent and emergency care. It describes the principles for safe urgent and emergency nurse staffing to ensure services users receive high quality, safe care appropriate to their needs and wishes.

[Evidence Review](#) | [Improvement Resource](#)

[Safer, faster, better: transforming urgent and emergency care](#) NHS Improvement, August 2015

A guide for local health and social care communities, which details how to redesign models of care through a fundamental shift in the way urgent and emergency care services are provided.

[A workforce fit the future: working together to improve the delivery of urgent and emergency care](#) NHS Confederation, August 2014

This briefing paper brings together the learning from two workshops held by NHS Confederation's Hospitals and Urgent and Emergency Care Forums and hosted by PwC, which explored how to develop a more flexible, integrated workforce to deliver urgent and emergency care.

[Acute and emergency care: prescribing the remedy](#) Royal College of Physicians, July 2014

This report set out 13 recommendations to address the challenges facing urgent and emergency care services across the UK and Ireland. Key challenges discussed include rising acuity levels, providing alternatives to emergency departments, complex discharge, and community integration, emergency department crowding and patient flow, acute care workforce recruitment and retention and meeting specific patient group needs. It contains recommendations and proposals.

[Whole system solutions for Emergency and Urgent Care](#) ScHARR (University of Sheffield), March 2014

This report examines the challenges facing emergency and urgent care and discusses the whole system solution which could help to create a system fit for purpose for the future.

[Transforming urgent and emergency care services in England: End of Phase 1 report](#) NHS England, November 2013

This evidence base set out to review the urgent and emergency system in England and draw out evidence to illustrate the main challenges it currently faces.

Case Studies

[A simple red bag improving care for care home residents](#) NHS Long Term Plan, January 2019

Care home residents are benefitting from the 'red bag', a dedicated bag that includes all their necessary paperwork, medication and personal items and accompanies them into hospital when they need hospital care. This is having a positive impact on their care and discharge.

[NHS 111 pharmacy scheme reduces pressures on wider health system](#) NHS Long Term Plan, January 2019

A NHS pharmacy scheme is speeding up access to clinical advice for patients, as well as reducing pressure on the wider health system. The Digital Minor Illness Referral Service enables trained NHS111 health advisors to refer people with minor health concerns to their chosen pharmacy for a clinical assessment and same-day booked consultation with a pharmacist, during the day, at the weekend and out of hours.

[Community First Responders: making a difference](#) NHS Long Term Plan, January 2019

Dispatching Community First Responders to people who have fallen without injury or need of a welfare check, is making a difference at South Central Ambulance Service.

Leading to a reduction the number of patients taken to hospital and reduced impact on ambulance capacity, while patients benefit by staying in their own home.

[Responding to the emergency workforce crisis in Derby](#) NHS Employers (Derby Teaching Hospitals NHS FT), June 2015

Derby Teaching Hospitals redesigned its workforce, with positive results for its staff and patients. Recognising the value in investing in its staff, the trust has taken a holistic approach to developing a workforce that can meet current demand, but which is also flexible and skilled enough to adjust to future needs.

[New ways of working: the holistic worker model](#) NHS Employers (Nottingham CityCare Partnership), March 2015

Nottingham CityCare (CityCare) Partnership has introduced a new model of integrated working called the 'holistic worker model'. It aims to change the way care is delivered and to provide tangible social benefits for the city. Under the new model, health and social care workers in the 'Urgent Care' team trained in each other's disciplines to enable them to more efficiently respond to crisis calls, thereby avoiding unnecessary admissions to hospitals or care homes.

[Musculoskeletal specialist practitioner in emergency care](#) eWIN (Workforce Information Network), June 2014

The A&E department at Royal Bolton Hospital conducted a pilot to explore the impact of adding a Specialist Physiotherapist to the A&E team and to assist the department in achieving the four-hour targets.

HEE Star

More resources and tools are available in the “In hospital” section of the HEE Star:

<https://www.hee.nhs.uk/our-work/hee-star>

Statistics

You can find relevant statistics on the Health and Care Statistics Landscape under “Secondary and hospital care”

<https://gss.civilservice.gov.uk/hc-statistics-landscape/>

Published Peer Reviewed Research

New or extended roles

[Pre-hospital assessment by a single responder: The Swedish ambulance nurse in a new role – a pilot study](#)

International Emergency Nursing Journal, May 2016

Abstract only available

The study aims to describe patient characteristics and assessment level made by the single responder (SR) nurse among patients assessed by the dispatcher as low priority and/or vague symptoms. Results suggested a relatively high level of patient safety and the usefulness of SR among patients assessed by the dispatcher as low priority.

[Advanced clinical practitioners in emergency care: past, present and future](#)

British Journal of Hospital Medicine, September 2018

Advanced practice has developed in the UK in many specialities and the new advanced practice framework from Health Education England allows a cross-discipline understanding of the principles and key aspects of advanced practice. However, this framework is naturally generic and does not focus on what a practitioner is capable of within a specific clinical area, but more on the core capabilities. This article outlines the development of a UK-wide curriculum and credentialing process for

emergency care advanced clinical practitioners and reports on progress to date.

[*Skill mix changes and new roles in emergency and urgent care*](#) Nursing Times, January 2018

Abstract only available

To try and respond to pressures in emergency departments and urgent care, new roles have been introduced and the skill mix altered. What is the evidence around these changes?

Nurse Practitioners

[*How emergency department staff perceive acute nurse practitioners*](#) Emergency Nurse Journal, March 2016

Abstract only available

The well-established nurse practitioner role, which focuses on patients with minor illnesses and injuries, is being expanded and remodelled, partly to fill the gap created by the decline in the number of emergency medicine doctors. One emergency department in Scotland has introduced an extended nursing role called the acute nurse practitioner, which enables nurses to work at an extended level in the major areas of the department. This article discusses findings from a study that examined a range of healthcare clinicians' perceptions of this newly established service.

[*Physician assistants and nurse practitioners in rural Washington Emergency Departments*](#) The Journal of

Physician Assistant Education, June 2016

One role of physician assistants (PAs) and nurse practitioners (NPs) is to meet the growing demand for access to rural healthcare. Critical Access Hospitals, those with less than 25 beds, are usually located in rural communities, often providing continuity of care that clinics cannot deliver. Because little is known about staffing in these small hospital emergency departments, an exploratory study was undertaken using a mixed-methods approach.

[*How emergency nurse practitioners view their role within the emergency department: a qualitative study*](#)

International Emergency Nursing Journal, January 2016

Abstract only available

The Emergency Nurse Practitioner (ENP) role has become established over the last two decades within emergency care. This role has developed to meet the rising demands of healthcare, combat the continuing medical workforce shortfall and address targets around healthcare delivery within emergency care. This research seeks to explore how Emergency Nurse Practitioners view their role within the Emergency Department and Emergency Care Team.

[Practice Standards for the Emergency Nurse Practitioner Specialty](#) Advanced Emergency Nursing Journal, October 2018

The Emergency Nurse Practitioner (ENP) specialty in the United States has grown rapidly since its origins during the 1980s following the establishment of the emergency medicine specialty. ENPs are now participating to a greater extent as part of the emergency medicine team in the delivery of emergency care. Given the relative infancy of the ENP specialty and persistent confusion regarding nurse practitioner (NP) educational preparation and scope of practice, clarification of the unique knowledge and skills of the ENP is needed to improve their integration into ED practice.

New ways of working

[Evaluating a new model of nurse-led emergency department mental health care in Australia: perspectives of key informants](#) International Emergency Nursing Journal, January 2016

Abstract only available

Mental health nurse services have existed in Emergency Departments (ED) for many years. However, there is considerable variation in the way these services operate, and no standardised model of care has been articulated. The research aimed to evaluate an extended hours nurse practitioner-led mental health liaison nurse (MHLN) based in an ED in Sydney, Australia.

[Examining the emerging roles for pharmacists as part of the urgent, acute and emergency care workforce](#) The Pharmaceutical Journal, February 2017

In the future, acute and emergency medicine clinical workforce, new models of care and care delivery need to be developed, in order to maintain and enhance standards of safe and accessible patient care. A departure from traditional (doctor-led) approaches to workforce planning, and an understanding of scope and governance surrounding emerging clinical roles is necessary to develop a sustainable, multi-skilled workforce across primary, community and secondary care.

[Using systems thinking to identify workforce enablers for a whole systems approach to urgent and emergency care delivery: a multiple case study](#) BMC Health Services Research, August 2016

Overcrowding in emergency departments is a global issue, which places pressure on the shrinking workforce and threatens the future of high quality, safe and effective care. A multiple case study design framed around systems thinking was conducted in South East England across one trust consisting of five hospitals, one community healthcare trust and one ambulance trust. The key workforce enablers for whole systems and urgent and emergency care delivery identified were: clinical systems leadership, a single integrated career and

competence framework and skills facilitation of work-based learning.

[Acceptance of primary practitioner physiotherapists in an emergency department: a qualitative study of interprofessional collaboration within workforce reform](#)

Journal of Interprofessional Care, March 2017

Athens log in required

Primary contact practitioner physiotherapists (PPs) are increasingly common in emergency departments (EDs) and provide targeted care to people with uncomplicated musculoskeletal conditions such as sprains, strains and simple fractures. Workforce redesign can be challenging and success is influenced by staff attitude and opinion. The study aimed to explore the experiences and perceptions of ED team members about a recently introduced PP services on existing staff and services in a large regional ED.

[The impact of advanced practice nursing role on quality of care, clinical outcomes, patient satisfaction, and cost in the emergency and critical care settings: a systematic review](#)

Human Resources for Health, September 2017
The objectives of this study are to present, critically appraise, and synthesise the best available evidence on the impact of advanced practice nursing on quality of care, clinical outcomes, patient satisfaction, and cost in emergency and critical care settings. The researchers concluded that capitalising on nurses in advanced

practice to increase patients' access to emergency and critical care is appealing. This review suggests that the implementation of advanced practice nursing roles in emergency and critical care settings improves patient outcomes.

[Occupational therapists in emergency departments: a qualitative study](#)

British Journal of Occupational Therapy, March 2018
Abstract only available

Globally occupational therapists are establishing their role in emergency care, especially in emergency departments. This practice development merits investigation due to its nascence and the challenges that face emergency department professionals. The researchers concluded that occupational therapists are establishing their presence in the emergency department; professional identity is forming and the practice paradigm requires further consideration.

[Emergency Departments and Occupational Therapy: Integration, unscheduled care and over-crowding](#)

International Journal of Integrated Care, October 2017
Occupational therapists are well-placed to address some of the issues around unscheduled care. This is because they assess and treat people directly in the Emergency Department and determine whether a discharge directly home is feasible. There are good reasons why occupational therapists are well-placed to address issues

of overcrowding in the Emergency Department. However, based on current evidence, there can only be a limited understanding of its role and efficacy. There is a need for largescale, well designed research studies of occupational therapy within emergency care.

[Ambulatory emergency care: improvement by design](#)

Clinical Medicine Journal, 2018

Ambulatory emergency care (AEC) has been developed by clinicians as a means of providing emergency care without the traditional bed base of a hospital. Given that AEC is provided in a clinic-style setting, it can continue to operate during periods of high bed occupancy, alleviating bed pressures and continuing to provide timely care for selected patients.

Workforce demographics and experiences

[The Emergency Medicine Workforce: Profile and Projections](#)

Journal of Emergency Medicine, April 2016

Abstract only available

The researchers reviewed current available data on patient volumes and characteristics, the overall physician workforce, the current emergency physician workforce, the impact of physician extenders and scribes on the practice of emergency medicine, and project emergency physician staffing needs into the future. They concluded that there remains a shortage of board-certified emergency physicians, but it is decreasing every year.

The use of physicians from other specialities to staff EDs has long been based on the theory that is a long-standing shortage of available American Board of Emergency Medicine/American Osteopathic Board of Emergency Medicine physicians, both now and in the future. However the investigation showed that this is not supported by the data.

[The World Health Organisation Global Health Emergency Workforce: what role will the United States play?](#)

Disaster Medicine and Public Health Preparedness Journal, August 2016

During the May 2016 World Assembly of 194 member states, the World Health Organisation (WHO) announced the process of developing and launching emergency medical teams as a critical component of the global health workforce concept. This article discusses future options available for health-related nongovernmental organisations and the required educational and training requirements for health care provider accreditation.

[The novel roles of paramedics in collaborative emergency centres aligns with their professional identity: a qualitative analysis](#)

Canadian Journal of Emergency Medicine

(CJEM), July 2018

Abstract available only

Little is known about the experiences of paramedics working in CECs. This study sought to ascertain the attitudes, feelings and experiences of paramedics working

within the Nova Scotia CEC construct. The study found positive collaboration between RNs and paramedics, need for improved support from leadership, value placed on CECs by communities and this new role aligning with paramedic professional identity. This study will contribute to the ongoing growth of the model by providing clinicians and decision makers with valuable information from frontline workers on CEC functioning.

Upskilling and workforce development

[Providing a navigable route for acute medicine nurses to advance their practice: a framework of ascending levels of practice](#) Acute Medicine, 2016

This article conveys concerns raised by delegates at the International SAM conference regarding how to advance nursing practice in acute medicine. It endeavours to capture the essence of 'how to advance practice' and 'how to integrate advanced practice' within the workforce structures of an acute medicine unit (AMU). This article offers an early conceptual framework through which levels of advancement and potential transition points to advance nursing practice in acute medicine are articulated.

[Extended training to prepare GPs for future workforce needs: a qualitative investigation of a one-year fellowship in urgent care](#) British Journal of General Practice, 2017
Abstract only available

It has been argued that UK general practice specialist training should be extended to better prepare GPs for the challenges facing 21st century healthcare. To investigate the experience of recently trained GPs undertaking a 1-year full-time fellowship programme designed to provide advanced skills training in urgent care, integrated care, leadership, and academic practice; and its impact on subsequent career development.

Recruitment, retention and supply

[Current Workforce Characteristics and Burnout in Paediatric Emergency Medicine](#) Academic Emergency Medicine Journal, January 2016

Changes in health care delivery and graduate medical education have important consequences for the workforce in paediatric emergency medicine (PEM). This study compared career preparation and potential attrition of the PEM workforce with the prior assessment from 1998. They concluded that while satisfaction with fellowship preparation for professional activities in PEM is improving, gaps remain in training in nonclinical skills. Symptoms of burnout are prevalent, and there is likely to be substantial attrition of PEM providers in the near future.

[The psychological health and wellbeing of emergency medicine consultants in the UK](#) Emergency Medicine Journal, July 2017
Athens log in required

To explore the experience of psychological distress and wellbeing in emergency medicine (EM) consultants. The analysis formed three superordinate themes: systemic pressures, physical and mental strain and managing the challenges. They concluded that EM consultants experience considerable physical and mental strain. This strain is dynamically related to consultants' experiences of diminishing self-worth and satisfaction, alongside current socio-political demands on EM services. Recognising the psychological experiences and needs of EM consultants and promoting a sustainable EM consultant role could benefit individual psychological wellbeing and the delivery of emergency care.

Competency Frameworks

[National Curriculum and Competency Framework: Emergency Nursing \(Level 1\)](#)

[National Curriculum and Competency Framework: Emergency Nursing \(Level 2\)](#)

Royal College of Nursing, June 2017

These frameworks, developed by leading emergency nursing experts, are founded on nursing philosophy and detail the depth and breadth of knowledge and skills required of emergency nurses. They offer long overdue clarity on the nomenclature of nursing roles in emergency care settings and provide a clear career structure for those wishing to advance in this specialism.

[The Common Clinical Competency Framework for Non-medical Ophthalmic Healthcare Professionals in Secondary Care: Acute and Emergency Care](#)

The Royal College of Ophthalmologists, November 2016

The framework benefits the non-medical HCP workforce within a hospital setting so they can continue to take on expanded roles to help manage demand and to continue to provide safe and efficient care for patients with competencies that are transparent, transferable and based on recognised training. The Framework will also improve opportunities to recruit more non-medical healthcare professionals to take on expanded roles.

[An integrated career and competency framework for registered nurses in acute medicine](#) The Society for Acute Medicine, 2013

This document proposes to introduce an integrated career and competency framework for nurses working in acute medicine through core acute medicine competency standards. The acute medical unit is an area rich in diverse opportunities for experiential learning and the aim is to maximise the value of this learning through provision of the framework setting out the standards expected at each level of experience.

Help accessing articles or papers

Where a report/ journal article or resource is freely available the link has been provided. If an NHS OpenAthens account is required this has been indicated. It has also been highlighted if only the abstract is available. If you do not have an OpenAthens account you can [self-register here](#).

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