

# Establishing Enhanced Care Standards of the High Care Area at the Royal Liverpool University Hospital

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## 1. Background

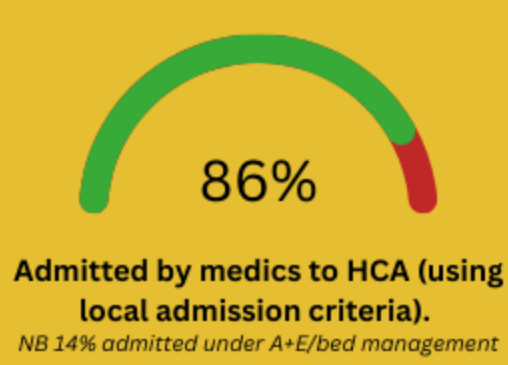
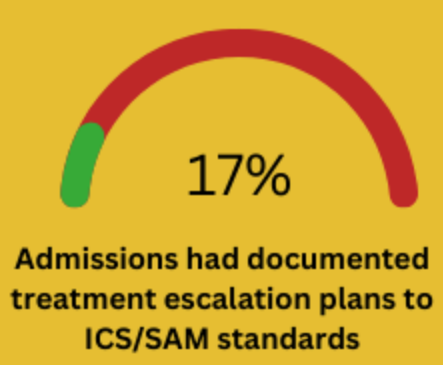
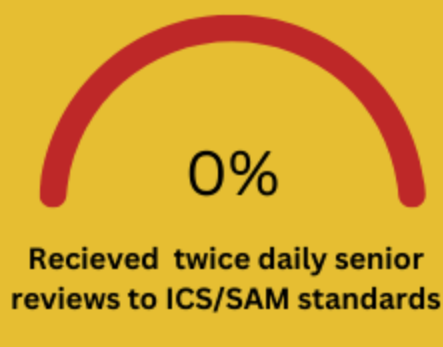
UK inpatient beds have reduced in numbers<sup>1</sup>, with finite intensive care resources<sup>2</sup>. Moreover, there is an increasing patient cohort who do not require intensive care, *but* benefit from higher levels of monitoring and management than on the wards, defined as Enhanced Care (EC). The Intensive Care Society (ICS) and Society of Acute Medicine (SAM) published joint national standards in 2022, for the development and management of EC units, to ensure high quality care for those patients who are sick and at risk of deterioration.

Within the month of publication, the Royal Liverpool Acute Medical Unit opened their High Care Area (HCA) to deliver EC, after moving into their new hospital.

The objectives after our first audit were to improve upon particular national standards. Our HCA patients had no twice daily formal senior/consultant reviews. Only 17.4% had documented treatment escalation plans. Furthermore, there was no nursing lead nor a HCA safety checklist and inappropriate patient cohort were admitted to HCA due to bed pressures.

## 2. First audit results (October to November 2022)

- Sixty-nine patients were admitted within a one month period (average 2.3 admission/day).
- Majority of patients were admitted from A+E Resus (58%).
- Median length of stay was 1 day 7 hours 28 minutes.



## 3. Objectives

To fulfil National ICS/SAM standards, particularly:

1. Establishment of twice daily senior reviews.
2. Decision and documentation of treatment escalation plans.
3. EC admission within four hours of decision made solely by the senior medical take clinician/team.
4. Provide training for nurses in EC related interventions.

## 4. Targeted Interventions

- Increased consultant/SpR availability for twice daily reviews - via departmental agreement and rota changes.
- Nominated Nursing HCA lead - with implementation of ICS Daily Safety Briefing.
- Standardised proformas for HCA AM and PM rounds including escalation plans.
- Guaranteed HCA admission rights by medical team only - consensus multidisciplinary agreement with A+E and bed management, based on HCA admission criteria SOP.
- Tea Trolley Teaching for Nursing Staff - regular drop in sessions for high flow oxygenation (HFO) set up/troubleshooting.

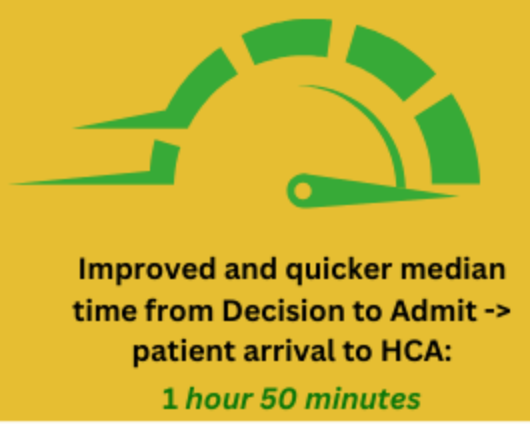
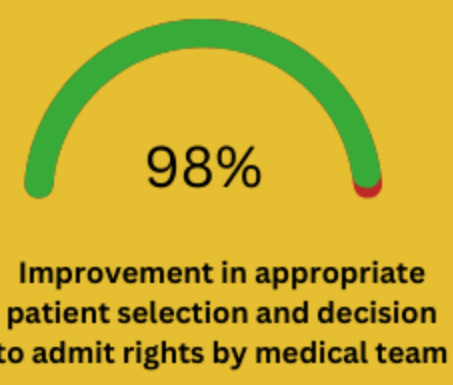
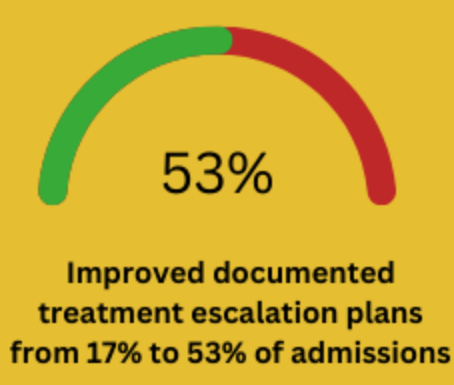


## 5. Challenges during implementation

- Industrial action x 3 - nursing, junior doctors, teachers strikes.
- Winter pressures adversely affecting bed flow.
- Cognitive and mental burdens for staff: adjusting to new location, logistics, redistribution of speciality services.

## 6. Re-audit results (January - February 2023)

- Forty-five patients were admitted within a one month period (average 1.5 admission/day).
- Majority of patients were admitted from A+E Resus (64%).
- Median length of stay was 1 day 18 hours 42 minutes (↑ from previous).



## 7. Conclusion

Despite challenging circumstances, through concerted multidisciplinary efforts, our second audit demonstrated departmental improvements towards the new UK standards of enhanced care - a bridge between ward level and intensive care, tailored to the needs of this increasing patient cohort.<sup>4</sup>



Tea Trolley HFO drop in sessions ran by Critical Care Outreach for Resus and EC nursing staff - feedback well received and plan to be ran more frequently.

### References

1. The King's Fund. NHS hospital bed numbers: past, present and future. <https://www.kingsfund.org.uk/publications/nhs-hospital-bed-numbers> (2021, last accessed 13 April 2023).
2. Wong DJN, Popham S, Wilson AM et al. Postoperative critical care and high-acuity care provision in the United Kingdom, Australia, and New Zealand. *BJA* 2019; 122(4): 460-469.
3. Intensive Care Society. Enhanced care units: guidance on development and implementation within acute medicine. <https://ics.ac.uk/resource/enhanced-care-guidance-am.html> (2022, accessed 13 April 2023).
4. Faculty of Intensive Care Medicine. Enhanced care: guidance on service development in the hospital setting. Executive summary and key principles. [https://www.ficm.ac.uk/sites/ficm/files/documents/2021-10/enhanced\\_care\\_guidance\\_executive\\_summary\\_key\\_principles\\_-\\_may\\_2020.pdf](https://www.ficm.ac.uk/sites/ficm/files/documents/2021-10/enhanced_care_guidance_executive_summary_key_principles_-_may_2020.pdf) (2020, accessed 13 April 2023).