



# NEWSLETTER

## April 2023

Including.....

- SAMCopenhagen
- Education Evenings
- New NICE guideline available
- Podcast
- Acute Neurology
- GIRFT
- Climate change
- ACP update
- IMPACT course

**Remember:** If you have anything you wish to share with SAM members, please let us know by e-mailing [administrator@acutemedicine.org.uk](mailto:administrator@acutemedicine.org.uk)

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The Society for Acute Medicine

April 2023



## SAMCopenhagen

The Society for Acute Medicine's Spring 2023 Conference will take place on 4-5 May 2023 at the Scandic Hotel in Copenhagen. In-person attendance at the conference is now fully booked but virtual attendance is still available.

Working with our European colleagues, we have created a great programme for you to enjoy and learn from.

Those registering as virtual attendees will be able to watch all sessions online both live and on demand for 3 months following the conference. The conference virtual platform also offers the opportunity to message and network with other conference attendees.

Nurses/AHPs/Pharmacists/PAs qualify for the 3 for 2 offer – pay for only 2 places for 3 people to attend. Contact [samconference@eventage.co.uk](mailto:samconference@eventage.co.uk)

**REGISTER at:** [www.samcopenhagen.org](http://www.samcopenhagen.org)



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## Educational evenings

We are providing a series of monthly education sessions this year and they are being led by a different member of our MDT representatives each month. These sessions all have CPD accreditation and the idea is to provide some free education sessions for all including those members of SAM that don't always find it easy to get access to a study budget. So whilst all SAM members will be able to access these for free, please remember to encourage your colleagues to join, especially those who don't have easy access to a study budget.

We are also keen to get suggestions for speakers and topics, so do please let us know!

Next session is:

**Tuesday 16 May 2023, Managing Mental Health patients on an Acute Medical Unit**

**Simon Woodward & Sean McDonnell**

The webinar runs from 7.30-9.00pm.

2 CPD points have been approved.

The session will be run on the Zoom webinar platform.

The webinars are free to attend for SAM members. Non-members are required to pay a fee of £15.

Register at <https://www.acutemedicine.org.uk/sam-events/>

## New NICE guideline available

NICE have released a new update on a quality standard that is relevant to acute medicine.

### **NICE acute kidney injury update (QS76)**

We are pleased to announce that the NICE acute kidney injury update quality standard has been published on the NICE website today: <https://www.nice.org.uk/guidance/qs76>



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## SAM Podcast

<https://www.acutemedicine.org.uk/learning-hub/>

The Podcast team have been really busy producing more podcasts.

Currently we have the following available:

- Cases that changed our practice (episodes 1-4)
- Reflections from SAM Bristol
- Hypertension
- An interview with Nick Scriven
- Stroke part 1
- Stroke part 2
- AIM GIRFT discussion
- PE – interview with an expert
- Debrief
- Rheumatology

Heart failure, headache, managing patients with LD, SDEC, asthma and more coming soon!

## Acute Neurology

We got contacted by the Neurological Alliance who are looking at a piece of work on how we think Acute neurology should focus its priorities. They are asking for your help with this survey.

It literally takes 1 minute – all they want you to do is list what you think should be the top three priorities for acute neurology on AMU. I think they are keeping it deliberately vague so they get a good response of answers – they only want brief responses - not essays!

They want to hear from all 4 nations.

Please do spare a minute of your busy day completing this – it will be much appreciated.

<https://www.surveymonkey.co.uk/r/8JMY2L>



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## GIRFT improvement tools

NHS England's Getting It Right First Time (GIRFT) and Urgent and Emergency Care (UEC) teams are rolling out [two new online improvement tools](#) to help ease local pressures on hospital emergency departments.

The [Alternatives to ED \(A-tED\)](#) tool offers a scoring system to measure, rate and compare the accessibility, availability and opening hours of any services patients might use in their area as an alternative to attending the ED (e.g. walk-in centres, telephone advice services, urgent 'hot' clinics and community services).

Together with a sister tool – [Alternatives to Admission \(A-tA\)](#) – they can support ICSs to enhance capacity in their EDs and admissions wards, improving staff and patient satisfaction by reducing the pressures caused by overcrowding.

More than 20 early adopters of the system have given positive feedback, and the tools are now being rolled out nationally. Contact [england.a-ted@nhs.net](mailto:england.a-ted@nhs.net) for more information.

## Climate Change

SAM has been looking at our environmental footprint and ways that we can improve as a society. Having taken part in the climate change initiative questionnaire score card, we also were asked about ways specific to our specialty that we can suggest for acute medicine. For example, the British Society of Gastroenterology are looking at ways to make their endoscopy process more environmentally friendly.

We'd like your help on this! Can you think of any ways that are specific to acute medicine that we can start to make positive changes?

It's unlikely to be completely isolated to acute medicine but between us we may think of some good changes and you may already have lots of good ideas/practice. We can then share them with members.

So please do share any good practice with us and if you want to get involved in this with us if you have any ideas or examples of good practice. Please do get in touch also if you'd like to get involved with this initiative: [secretary@acutemedicine.org.uk](mailto:secretary@acutemedicine.org.uk)



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### ACP update- from our rep Elaine Clark

Hope all ACPs are doing well in these extremely difficult and challenging times and environments. One thing that I am certain of is that with the redevelopment of services and transformational change of the NHS there will be lots of exciting opportunities to grow our community even further.

#### **Conferences**

For those going to Copenhagen you will really enjoy the programme that has been put together whether in person or virtually. Please do network with each other and share ideas and innovations in your service, even virtually there is functionality on the hosting platform to do that.

We are also really keen for you to share the amazing work you are doing and we hope to see many more abstracts from ACPs this year. The Autumn Conference will be held in Glasgow in October so now is the time to start thinking about work you may wish to present. Please do contact me if you need any help at all in your preparations for this.

#### **Wellbeing**

We are all acutely aware of wellbeing at the moment whether work related or even financially. Again please reach out to colleagues, friends, peer to peer services or wellbeing services. I can also be contacted via the SAM website and can signpost you to helpful resource and organisations that can help.

#### **Finally**

I really just wanted to say thank you. Thank you for all the hard work our ACP community does within our Acute Medical Teams, for our patients and families and the service provision you provide your hospitals. Sometimes you forget you are awesome so this is your reminder!

### Impact course

We are delighted that Michael Trimble our Northern Ireland representative has been appointed as National Medical Director for IMPACT course. This is great news, congratulations to him and we will keep you posted on any updates.



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## **And Finally**

We are not in a very good place at the moment are we? It's hard to sugar coat any of our experiences in the NHS and as our President wrote there are "*extremely troubled times ahead in urgent and emergency care*"

<https://www.acutemedicine.org.uk/extremely-troubled-times-ahead-in-urgent-and-emergency-care-says-sam-president/>

However, there are always examples of good practice everywhere and I certainly had a big smile as I watched a porter giving an elderly lady a "fast push" in the wheelchair as I listened to her delighted chuckle. When you work in the NHS you are surrounded by examples of compassion and care and people doing something extra, whether it is directly patient care or setting up services that will benefit patient care. We must still notice these and appreciate them.

Our hospital had a GIRFT meeting this week and there was definitely a feeling of nervous trepidation before the meeting. This is quite sad as it just shows the mentality that we always feel that we are about to be criticised or told off or given yet more work to do with less resources.

Instead, it was a really positive experience. A great opportunity to look at all the things where we are doing well and think about changes we can make together to improve things. I'd definitely encourage everyone to get involved with their hospital GIRFT reports, it's a great opportunity to be supported as you look at the bigger picture and what you can realistically achieve within your hospital (see above GIRFT tool section as well as our podcast on the national report).

SAM council are continuing to represent our members and push for changes to improve patient care whilst also looking at training and our working lives within Acute Medicine nationally. There are many opportunities to get involved as this summer there will be lots of posts coming available as several tenures are coming to an end. Although these positions are voluntary, it is a way of getting satisfaction, knowing you are working together to make a difference on a national level. I'd highly recommend it, please get in touch if you'd like more details.

**Vicky Price, Secretary, Society for Acute Medicine**