

NEWSLETTER

December 2024

Including...

- Upcoming SAM Events
- SAM QI
- Surveys
- Further Notices
- And Finally...

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

PRESIDENTDr N Murch

PRESIDENT ELECTDr V Price

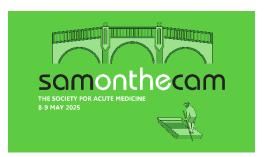
PAST PRESIDENT
Dr T Cooksley

SECRETARY Dr N Patel

TREASURERDr M Wheble

Upcoming SAM Events

SAMontheCAM



Join us for The Society's Annual Spring Meeting which will take place at Hinxton Hall near Cambridge on $8^{th} - 9^{th}$ May.

Registration now open. Early bird rates available until 2nd March.

Abstract Submission now open. Closing date for submissions: 2nd March.

Further information, registration and abstract submission: http://samonthecam.org/

Save the Date for the next SAM Webinar

The next SAM webinar will take place on Wednesday 29th January (730pm – 830pm).

High Consequence Infectious Diseases for the Acute Medic

Booking available soon on the SAM website.

Advanced Week of Education



Date: March 5-7th 2025 **Venue:** Bangor, North Wales **Spaces:** 16 (so apply early!) **Price:** £100 for SAM members

The Society for Acute Medicine is delighted to offer a 3 day residential finishing school which will offer a transformative experience for senior AIM doctors approaching CCT to prepare for their first Consultant post (and interview). The course will ensure that attendees Step confidently into their future role as a consultant in Acute Medicine and is designed to enhance clinical leadership and personal growth in a supportive and inspiring setting.

Further information and applications here: https://www.acutemedicine.org.uk/sam-events/sam-advanced-week-of-education-5-7-march-2025-bangor/

AIM SCE Revision Course – free to SAM members

Once again, **The Society for Acute Medicine** will hold the **Acute Medicine SCE Revision Course** online in preparation for the SCE Exam on 5th March. The course will run on four Tuesday and Wednesday evenings throughout January and February (21st and 28th January) and (4th and 12th February).

The course programme has been designed to be delivered over 4 webinars and allows for full interactivity between the faculty and participants with time for discussion built into each presentation.

Registration and Further Information here

SAM QI

Acute Medics as Improvers

The next Acute Medic as Improvers course is now available for booking and the new look course has 19 CPD points applied for (previously 13 CPD). This course is designed around QI training with a focus on Same Day Emergency Care but in particular focus to support an individual to complete a QI project by the end of it.

Further information and booking: https://www.acutemedicine.org.uk/sam-events/acute-medics-as-improvers/

Occupancy Stewardship

SAM QI has just completed delivery of a 12-month Occupancy Stewardship training programme which blends face to face interactive sessions with frequent online coaching to support teams developing novel approaches to reducing unnecessary bed occupancy.

The programme is unique in joining up three key factors; technical operations management knowledge, QI leadership development and most importantly, acute medicine clinicians, the people who know what really goes on in the acute admissions process. The goal is to create a network of experts who can not only impact local bed-states but can go on to develop occupancy stewardship as part of their portfolio locally and nationally.

The curriculum includes sessions on:

- 1. Eliminating flow bottlenecks and waits;
- 2. The mathematics of queues;
- 3. Health economics of bed usage;
- 4. Enhancing use of ambulatory care;
- 5. Inspiring and leading;
- 6. Quality improvement tools;
- 7. Occupancy data analysis.

In the first cohort, teams from University Hospitals Leicester NHS Trust and from Merseyside and West Lancashire NHS Trust delivered projects on reducing LOS for respiratory admissions by introducing early IV antibiotic switch and O2 wean, and transferring patients waiting in beds for diagnostics into ambulatory care.

A second cohort is about to begin in-house across University Hospitals Sussex.

In the coming months we hope to offer a further round through SAMQI. The programme invites teams led by an acute medicine consultant, with ideally other consultants, resident doctors or multi-disciplinary colleagues.

The Royal College of Physicians has agreed 25 external CPD points.

SAMPLING @Worthing Hospital Enhancing Acute Medicine: Insights from Worthing Hospital Site Visit by SAM QI



The delivery of Acute Medicine varies across NHS hospitals, with learning opportunities often limited to local practices. To address this, the Society for Acute Medicine's (SAM) Quality & Innovation Committee introduced pilot site visits, inspired by the Institute for Healthcare Improvement's approach. The third pilot visit, during the SAM Brighton conference, explored Worthing Hospital's acute care model.

Visit Overview

Preparation of the visit included an online Q&A session with Worthing's medical unit lead. The visit started with a walk-

through of their Acute Medical Unit and Emergency Department and a discussion on managing medical admissions. The hospital, with 500 beds, handles 50-70 medical emergencies daily alongside surgical and geriatric admissions. Its Emergency Floor features a 20-chair waiting area, a 6-bed Ambulatory Care Unit, and 70 inpatient beds (17 centrally monitored). Medical ED patients are cared for by resident doctors and prioritized to ensure stays under 24 hours.

Worthing employs structured board rounds, focusing on "sick and quick" cases to maximize specialist input. Co-located services enable collaboration between Acute Medicine, Surgery, and Geriatrics. Frail patients receive Comprehensive Geriatric Assessments, while a seven-day Acute Physician presence helps manage admission and discharge surges.

Key Discussion Points

Participants of the visit discussed challenges faced by Acute Medicine teams while looking after patients in EDs, including balancing efficient use of space with reducing admissions, addressing the ethical and practical dilemmas of providing care in suboptimal environments and recognizing the tension between short-term hospital efficiencies and long-term system needs.

Takeaways for Practice

Worthing's integration of surgical and medical admissions has demonstrated improved outcomes, supporting the benefits of co-location and interdisciplinary collaboration. Their streamlined leadership model fosters an excellent training environment, particularly for junior doctors. However, balancing the care of medical ED patients with hospital-wide efficiency requires careful management.

Future Recommendations

To scale learning opportunities, SAM proposes regional site visits over several months, focusing on "hot topics" like patient flow and resource optimization. Visits should include diverse teams (clinical and non-clinical) and culminate in collaborative discussions as part of a session at the next SAM conferences. Standardized reporting and follow-up would ensure shared insights and wider adoption of best practices.

This visit highlights the potential for cross-site learning to address shared challenges in Acute Medicine, paving the way for improved patient care and operational efficiency.

SAM QI is looking for sites that would be happy to host a visit by 4-6 neighbouring unit teams with inputs from the SAM QI team. For information and discussion please contact <u>c.subbe@bangor.ac.uk</u>.

Surveys

Anticoagulation at End of Life

Please can we get your support to complete this national survey on Anticoagulation at End of Life. This is being undertaken by Tom Shevlin (IMT Merseyside) and Olga (Haematology SpR London).

Deciding what to do with a patient's oral anticoagulation as they approach the end of their life is a common and sometimes anxiety-provoking scenario encountered across the breadth of medicine, and yet there is very little clinical research to guide decision-making.

If you could take just ten minutes of your time to complete the survey and, if possible, help to distribute it to other secondary care colleagues, either locally or nationally, we would be extremely grateful - we want this survey to reach every corner of the UK.

https://forms.office.com/Pages/ResponsePage.aspx?id=DQSIkWdsW0yxEjajBLZtrQAAAAAAAAAAAAAA q e1NFlUQkNUUVZSOEgyNlFOT1NEOFlDWUczWTlGMC4u

Hypercalcaemia of Malignancy

Hypercalcaemia of malignancy is the commonest metabolic complication in cancer patients and there is a lack of evidence in this area, leading to potential variation in clinical practice.

Dr Jan Hoong Ho and Dr Safwaan Adam at The Christie NHS Foundation Trust are interested to know how hypercalcaemia of malignancy is managed in your clinical practice and would be grateful if you could complete and disseminate this survey.

https://forms.office.com/Pages/ResponsePage.aspx?id=slTDN7CF9Ueylge0jXdO42vOq5V-X79Lk7YUbqNtpj9URUVBNUdKS0I0M0JNWDZBT0kxOFJFS041Vy4u

The survey will take under 5 minutes to complete. The results will be collated and shared anonymously. Your responses are very valuable and will contribute to the ongoing work around management of hypercalcaemia in malignancy.

Safer use of time critical medicines

The RCP Time Critical Medications committee are looking to interview health care professionals working with various conditions as part of their appreciative enquiry relating to Time Critical Medicines.

If you have undertaken any work on the use of time critical medicines, whether big or small, in progress or fully implemented, successful or experiencing challenges please contact lnwh-tr.sps-mso@nhs.net and you may be invited to an interview to discuss your work in more detail.

Further Notices

Medicine Shortages

The Royal Pharmaceutical Society Medicines Shortages Report can be viewed here: <u>Medicines Shortages:</u> <u>solutions for empty shelves</u>.

This report, backed by charities and patient groups, highlights the impact of shortages on patients, pharmacists and the NHS. It explains how supply chain vulnerabilities have combined with unplanned spikes in demand, such as shifts in prescribing practice or increased diagnosis of some conditions, to

create a perfect storm of unstable supply. This has made it harder for patients to access treatment and frustration for pharmacists and their teams who want to focus on patient care rather than spend hours chasing down supplies.

Better collaboration across the whole medicines supply chain is needed. Prompt notice of a supply problem allows time to act, find solutions and produce clear guidance, meaning pharmacists are fully informed and patients are saved from delays and confusion that can cause distress and harm to health.

Flourishing on the Frontline

SAM are aware that it can be challenging as well as rewarding to work in Acute Medicine at times. We heard some amazingly powerful stories at SAM Brighton from members who shared their experiences on a personal level, and Hannah Skene helped signpost ways that we can recognise in ourselves that we are struggling and in others, and what to do about it.

We have put together a website page with some resources and we are planning to expand this further. If you are interested in helping us design this page or have suggestions - please do let us know!

Outgoing SAM Council Representatives

Tash Kelly - Nurse Representative

Tash has made a huge impact on SAM council since joining us 5 years ago and will be sorely missed. If anyone can cut through the nonsense and say it like it is - it's Tash. As well as being an endless fount of common sense, she is also a truly kind and compassionate soul who will always make you feel better with well chosen words and a hug. She has made a real difference as SAM nursing rep - advocating on several different forums nationally and helping write many documents. You'll always be welcome back - thank you Tash.

Gordon Mackinnon – Trainee Representative

Gordon joined us as trainee representative 2 years ago and we very much hope to see him back in another role one day as he starts his consultant career. Gordon was a really dedicated member of SAM council who achieved so much in 2 years that we had to check he hadn't snuck an extra year in. Trainees are a massively important part of Acute Medicine, and it is important they have a strong voice on council, which is exactly what Gordon offered. The trainee surveys are really appreciated and such an important piece of work so we can advocate on their behalf. We're really grateful for all the work you did attending meetings and writing documents and we will miss Gordon very much, almost as much as we will miss his baking! We would really appreciate a delivery prior to the 5 hour council meetings please ...!

And Finally ...



The SAM Council and Administration Team would like to extend our warmest wishes to all our members for the festive season.

In what continues to be a challenging and demanding environment, we want to take this opportunity to express our gratitude for the incredible work you do every day. Your dedication, resilience, and compassion make a real difference to patients, colleagues, and the wider healthcare community.

Please remember that you are not alone—SAM and the whole 'SAM-ily' are here to support you every step of the way.

The Admin Office will be closed from lunchtime on 23rd December until Monday 6th January.