



# EMERGENCY BED SERVICE

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REPORT FOR THE YEAR  
ENDED 31st MARCH

1953

**THE KING'S FUND  
INFORMATION CENTRE**

11-13 CAVENDISH SQUARE  
LONDON W1G 0AN

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# EMERGENCY BED SERVICE

Report for the Year ended 31st March, 1953

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## INTRODUCTION

During the period from April to August 1952, applications to the Service continued at approximately the same level as the previous year. In September however, applications for general acute cases were 14% higher than in 1951, and by November this increase was 21%, doubtless due to the almost unbroken bad weather experienced. December started with applications already abnormally high for the time of year, and rising fast; before the end of the first week, the Service was at the start of what proved to be a prolonged period of stress. The dense fog which enveloped London from December 5th to 9th caused a phenomenal rise in respiratory, and to a lesser extent cardiac disorders, and the Service was called upon to deal with an unprecedented rush of cases. After a short lull at Christmas, applications again rose rapidly, and with the impact of the influenza epidemic, the Service was soon under extremely heavy pressure again. This was maintained without any slackening until the latter half of February by which time applications, though still very numerous, had fallen to more manageable proportions. During the three months December to February a total of 27,998 cases of all kinds were dealt with as compared with 24,216 during the corresponding months of the previous crisis in the winter of 1950-51.

Taking the year as a whole, applications have increased considerably as was anticipated in the last report. Analysis tends to confirm however, that the increase is due to a rise in sickness rather than to an increase in the number of doctors using the Service. Applications for most types of illness show no great variation from last year; those in respect of respiratory and heart conditions however have increased greatly, and the rise in the work of the Service during the year under review is almost entirely due to these two categories and to an increase in infectious disease.

The year has shown a decline in the admission rate for general acute cases from 88.6% last year to 88.4% this year. This small decline was perhaps inevitable with applications 24% higher than last year, and, as was to be expected, has affected the older patients most. It is nevertheless encouraging that the figures in these age groups have remained much better than in the last crisis year 1950-51.

### **THE WINTER CRISIS OF 1952-53 (see Fig. 1)**

The cold weather of November 1952 had caused the work of the Service to rise steadily throughout the month, so that on December 1st, 243 general acute applications were received at a time when about 140 would have been normal. This rise continued until, on December 5th, fog settled on London, and applications at once rose very rapidly, reaching a peak on December 9th when 492 were received. This compares with 293 general acute applications on the worst day of the 1951 influenza epidemic. Under this strain admissions failed to keep up with applications, and on December 8th, a "White" warning was issued in accordance with the scheme prepared after the 1951 crisis. This was followed on the 9th by a "Yellow" warning indicating that the admission rate had fallen below 80%. The response to this warning was immediate,

and despite heavy pressure, the fall in the admission rate was arrested. By the 13th applications were decreasing fairly quickly, the "Yellow" warning was cancelled on the 15th and the "White" on the 17th. Pressure on the Service was still however abnormal, as is shown by the fact that even in the middle of the usual Christmas "lull" applications were still about 100 a week above the highest peak reached during the winter of 1951-52.

After Christmas, pressure increased rapidly and by January 4th the weekly rate of applications was once more in excess of the 1951 influenza peak, (see Fig. 1). The admission rate fell, and a "White" warning was issued on January 5th. During the next fortnight, applications remained between about 1,700 and 1,800 weekly with an admission rate of 80-85%. This rate was maintained largely as a result of the Regional Medical Admissions Officers freely using their powers to refer cases to the Medical Referees for admission.

By January 21st, the influenza epidemic was beginning to affect London, and applications again climbed steeply reaching a peak on the 30th, when the weekly total was 2,261 (see Fig. 1). A "Yellow" warning was sent out on the 24th and a "Red", indicating that admissions had fallen to less than 75% of applications, was issued on the 27th. The "Red" warning produced an immediate effect, and by the 30th the admission rate was again above 75% despite the fact that applications were still rising. This was only achieved as a result of exceptional steps taken by the hospitals, such as opening extra wards, stopping cold surgery and admissions from the waiting lists, and the earlier discharge of patients. The majority of hospitals co-operated magnificently to overcome the emergency, but it was felt that it would be unwise to cancel the "Red" warning until there were definite indications of a reduction in pressure. By February 3rd, applications were falling fairly

quickly and the "Red" warning was cancelled. This was followed on the 4th by cancellation of the "Yellow" warning. Applications however remained between 1,800 and 2,000 weekly until after the middle of the month, and it was necessary to re-impose the "Yellow" warning from the 10th to the 19th. By the latter date applications had reached a more normal level and by the 3rd March when the "White" warning was cancelled, the crisis was over.

The above account refers only to general acute cases. In addition, there was during the winter a high incidence of infectious diseases, especially measles. Some 350 infectious cases were dealt with weekly between December and February. This was about 100 a week less than during the winter of 1950-51, but nevertheless represented an appreciable extra burden on the already hard-pressed staff.

### **THE WARNING SYSTEM**

The winter has seen the first real test of the warning system devised by the Service as a result of the crisis caused by the influenza epidemic of January, 1951. In general it worked remarkably well, and the steps taken by the Ministry of Health and the Metropolitan Regional Hospital Boards on receipt of the warnings undoubtedly enabled many more patients to be admitted than would otherwise have been the case.

Although an outstanding success, experience has shown however, that improvement is possible. At present the issue and cancellation of the warnings is solely dependent on the admission rate, and the winter has shown that this tends to result in the warnings being put on rather too late and taken off too early. A modification of the scheme is being worked out whereby account is taken not only of the admission rate, but also of the number of applications being received, and of the number of admissions made only after referring the case to the Medical Referees.

## **Visit of the Parliamentary Secretary to the Ministry of Health**

When the winter crisis was over, Miss Hornsby-Smith, M.P., Parliamentary Secretary to the Ministry of Health visited the Service to see how the work was carried out. The staff much appreciated the interest taken by Miss Hornsby-Smith and her thanks for their work during the winter.

## **FINANCE**

The estimates for 1953-54 showed a decrease on those for 1952-53. This was partly due to the closing of the South Western Office of the Service at Wimbledon, with consequent reduction of staff, and partly to a decrease in the estimated expenditure on telephones which was over estimated in the previous year.

## **STAFF**

The closing of the South Western Office in July and consequent re-distribution of the work formerly done there enabled a reduction of 4 to be made in the operational staff of the Service.

The winter, which brought crisis conditions continuing for 3 months, imposed a heavier burden on the staff than they had ever before been called upon to bear. They nevertheless carried on cheerfully, and in spite of all difficulties fully maintained the high tradition which they have established for themselves.

## REVIEW OF THE YEAR ENDED 31st MARCH, 1953

### WORK DONE

The total number of applications received during the year ending 31st March, 1953, and the corresponding figures for the previous year were as follows:—

	1952	1953	<i>Percentage increase or decrease</i>
General Acute Cases	47,653	59,320	+ 24.4
Infectious Cases	12,088	13,611	+ 12.5
Chronic Sick Cases	3,120	2,296	- 26.4
Total	62,861	75,227	+ 19.6

### ACUTE CASES

The great increase in the number of applications during the year as compared with 1951-52 is due almost entirely to the exceptional pressure experienced between mid-November and the end of March; other months show little change from the previous year.

Of the 59,320 cases offered, 52,452 were admitted, an increase of 10,292 on the previous year. Cases withdrawn by the applicant totalled 1,674. No beds could be found for the remaining 5,194 and these were referred back to the applicant. In 734 of these cases the patient was in the casualty department of a hospital.

Comparing the winter months (November to March inclusive) of 1951-52 with those of 1952-53, the number of cases admitted expressed as a percentage of cases offered was 88.0% for 1951-52 and 84.9% for 1952-53.



As is usual, the main difficulty has been in admitting the more elderly patients. In the difficult conditions prevailing this winter, nearly all age groups show a decline in the proportion of cases admitted, but it is most marked in the patients over 50. The following table for a period from early November to late February gives figures for the last winter together with the percentage increase or decrease as compared with similar periods in 1951-52 and 1950-51

### GENERAL PRACTITIONERS' GENERAL ACUTE CASES

NOVEMBER 2nd, 1952 — FEBRUARY 21st. 1953.

<i>Age Group</i>	<i>Cases Offered</i>	<i>Percentage Admitted</i>	<i>Increase or Decrease compared with</i>	
			1951-52 %	1950-51 %
Birth—20	5,053	99.5	— 0.4	+ 1.0
21—30	1,952	98.9	+ 1.7	+ 3.3
31—40	1,914	96.9	— 0.5	+ 2.7
41—50	2,159	93.0	— 2.3	+ 4.8
51—60	3,288	86.3	— 6.4	+ 6.4
61—70	4,329	81.4	— 7.6	+ 9.9
71—80	3,556	71.7	— 8.8	+ 9.6
over 80	1,012	66.7	— 8.5	+ 13.6

*Total Offered 23,263*

### INFECTIOUS CASES

The winter has seen a heavy incidence of infectious diseases, and it was necessary to impose restrictions in the case of measles whereby only cases with medical complications or very bad home conditions were

taken on by the Service. During the year 198 infectious cases had to be referred to the group Medical Referees before securing admission. This compares with 25 cases last year.

### **CHRONIC SICK CASES**

There has been a further reduction in the number of chronic sick cases dealt with. Since the Service can do little but act as a forwarding agent in such cases, endeavours are now made to confine our work in this respect to cases originally offered as acute, but where the general practitioner subsequently agreed to the patient being put on the chronic sick waiting list.

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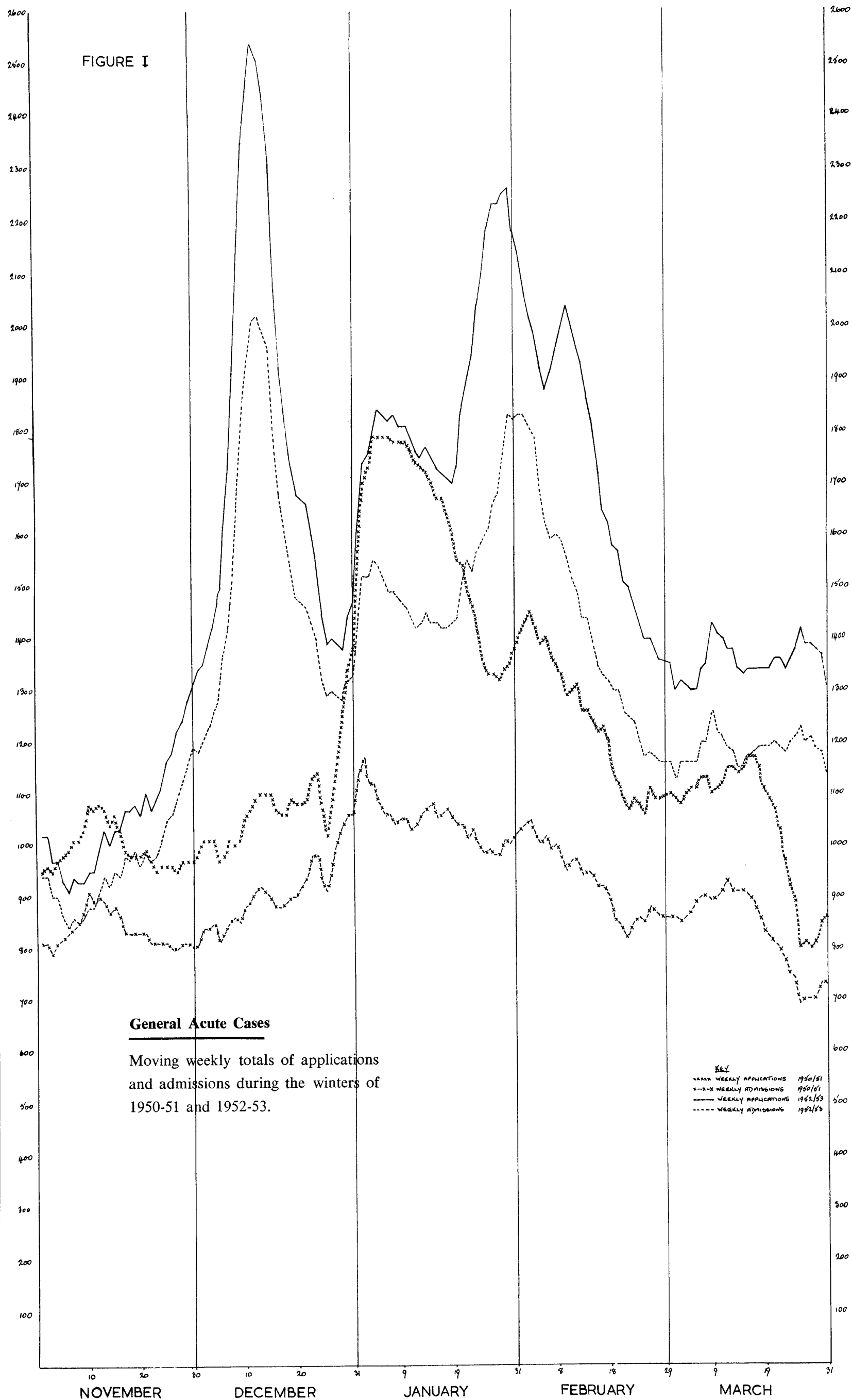
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FIGURE I



# **CASES DEALT WITH BY LONDON OFFICES, 1st APRIL, 1952—31st MARCH, 1953**

## **GENERAL ACUTE CASES**

				Applications	Admissions	Cases not admitted :		
						Failures to admit G.P. Cases	Hospital transfers	Cases withdrawn by applicant
<b>1952</b>								
April	..	..	..	4313 (3942)	3858 (3289)	262 (404)	75 (119)	118 (130)
May	..	..	..	3989 (3857)	3623 (3349)	155 (292)	83 (112)	128 (104)
June	..	..	..	3325 (3355)	3141 (2943)	69 (225)	40 (86)	75 (102)
July	..	..	..	3255 (3302)	3079 (3038)	57 (110)	25 (74)	94 (80)
August	..	..	..	2946 (2939)	2815 (2753)	31 (86)	30 (27)	70 (73)
September	..	..	..	3407 (2990)	3240 (2754)	44 (134)	35 (41)	88 (70)
October	..	..	..	4299 (3936)	4006 (3502)	106 (242)	79 (85)	108 (107)
November	..	..	..	4597 (3797)	4196 (3407)	204 (210)	84 (80)	113 (100)
December	..	..	..	7992 (4644)	6852 (4300)	823 (180)	57 (47)	260 (117)
<b>1953</b>								
January	..	..	..	8579 (5233)	6970 (4405)	1251 (544)	77 (131)	281 (153)
February	..	..	..	6664 (4909)	5449 (4216)	966 (442)	55 (86)	194 (165)
March	..	..	..	5954 (4749)	5223 (4213)	492 (273)	94 (105)	145 (157)
TOTAL				59320 (47653)	52452 (42160)	4460 (3142)	734 (993)	1674 (1358)

Figures for the corresponding month of the previous year are shown in brackets.

# INFECTIOUS CASES

				Total Applications	Total Admissions
<b>1952</b>					
April	..	..	..	1083 (1244)	1057 (1176)
May	..	..	..	1055 (1215)	1041 (1180)
June	..	..	..	945 (1135)	941 (1109)
July	..	..	..	1152 (1120)	1134 (1092)
August	..	..	..	956 (812)	944 (800)
September	..	..	..	810 (765)	802 (760)
October	..	..	..	1106 (851)	1090 (841)
November	..	..	..	1317 (905)	1281 (893)
December	..	..	..	1558 (967)	1370 (952)
<b>1953</b>					
January..	..	..	..	1338 (834)	1238 (826)
February	..	..	..	1027 (1050)	967 (1021)
March	..	..	..	1264 (1190)	1171 (1162)
TOTAL	..	..	..	13611 (12088)	13036 (11811)

Figures for the corresponding month of the previous year are shown in brackets.

# CHRONIC SICK CASES

			Applications	Withdrawn	Placed on H.M.C. Waiting Lists			
					N.E.	N.W.	S.E.	S.W.
1952								
April .. ..	..	..	204 (359)	5 (15)	87 (112)	52 (101)	17 (57)	43 (74)
May .. ..	..	..	189 (291)	2 (8)	89 (101)	40 (90)	26 (39)	32 (53)
June .. ..	..	..	146 (233)	2 (2)	80 (92)	26 (50)	13 (37)	25 (52)
July .. ..	..	..	139 (220)	1 (2)	70 (83)	25 (51)	17 (25)	26 (59)
August .. ..	..	..	115 (196)	— (6)	58 (72)	21 (46)	15 (35)	21 (37)
September .. ..	..	..	126 (168)	2 (5)	58 (71)	32 (36)	13 (26)	21 (30)
October .. ..	..	..	144 (268)	3 (14)	75 (87)	20 (66)	14 (37)	32 (64)
November .. ..	..	..	215 (284)	1 (11)	89 (120)	57 (60)	14 (38)	54 (55)
December .. ..	..	..	311 (225)	8 (7)	132 (103)	75 (54)	34 (33)	62 (28)
1953								
January .. ..	..	..	313 (365)	4 (10)	148 (153)	68 (97)	29 (44)	64 (61)
February .. ..	..	..	216 (268)	3 (4)	117 (111)	31 (59)	26 (32)	39 (62)
March .. ..	..	..	178 (243)	3 (4)	85 (102)	29 (62)	27 (30)	34 (45)
TOTAL ..			2296 (3120)	34 (145)	1088 (1207)	476 (772)	245 (433)	453 (620)

Figures for the corresponding month of the previous year are shown in brackets.

King's Fund



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