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EMERGENCY BED SERVICE

28th ANNUAL REPORT

Report for the year ended 31st March, 1966

The late DR. H. ALEXANDER

Dr. Alexander had been a member of the Committee for 16 years and his death is deeply regretted. He had an unrivalled knowledge and experience of the problems of the general practitioner and of the work of the Service, and his wise advice will be greatly missed.

GENERAL REVIEW OF THE YEAR

The total number of applications for admission to hospital was 59,496 as against 60,131 in the year ended 31st March, 1965. Applications for infectious cases fell to 3,188 from 4,389.

From 15th January until 15th March, 1966, the percentage of Medically Refereed cases never fell below 17%, and on the 28th February reached 24.5%. On that day 10 hospitals had wards closed for maintenance and repairs. It appears that this was due to painting and decorating and it was unfortunate that this should have been necessary at this time of year. A further 21 hospitals had restricted the admission of emergency cases owing to lack of beds or staff. The reason for this high rate of refereed cases is not entirely clear; doubtless it is in part due to the shortage of beds but also a practice is growing amongst hospitals to refuse a patient when first offered, being aware that the E.B.S. will try elsewhere and may obtain admission. If, however, no hospital can freely admit, the patient will in fact be refereed to the first hospital tried, or dealt with in another

way. Although the patient is in the end admitted, he has to suffer delay. It is fully realised that this procedure is due to the heavy pressure on the hospitals.

Appendix VI shows that the hospitals of the North-East and North-West Metropolitan Regional Boards have consistently had a greater number of cases passed by the Service to the Group Medical Referees than the hospitals situated south of the Thames. As the Emergency Bed Service offers each case to six or more hospitals before resorting to the Medical Referee procedure, it may reasonably be assumed that the demand for medical and surgical beds in winter is so great that the strain on the hospitals must be very severe.

UNDERGRADUATE TEACHING HOSPITALS

The power of the Regions to insist that hospitals admit cases when necessity demands extends only to the hospitals under their control. The Teaching Hospitals are not bound to accept orders from the Regions. In recent years however the Teaching Hospitals have increasingly undertaken voluntarily to accept the responsibility of a district hospital, and to accept the consequential liability to admit cases referred to them by the Regional Medical Admissions Officer attached to the E.B.S. Beginning 4 years ago with University College Hospital and St. Bartholomew's, this practice has spread and the Teaching Hospitals have recently indicated their willingness to accept the obligations of the Medical Referee system. The Regional Hospital Boards have offered, when necessary, to accept transfer of "long stay" cases to their hospitals from Teaching Hospitals. One of the main objections which the Teaching Hospitals have had to cases refereed from the Emergency Bed Service has thus been overcome.

MATERNITY CASES

In 1964 the Ministry of Health set up the Catchment Area System which puts the main responsibility for maternity admissions on to the hospitals concerned. Since the scheme has been in operation, the demand on the E.B.S. for maternity admissions has fallen from 4,202 in 1963 to 929 in 1965/6. It is true that a few additional beds have been provided, but it is a remarkable demonstration of the results of improved administration.

MISCARRIAGES

The monthly totals of applications for the admission of miscarriages and other gynaecological cases have been slightly fewer in number than for the previous year, but it should be noted that 12.2% and 9% respectively of these cases had to be admitted via the referee procedure. In view

of the importance of immediate hospitalisation that these patients require, the referee rate is still very high.

Misca	rriages	Other Gyi	nae. cases
1965	1964	1965	1964
5,670	5,816	1,066	1,181

AIR-POLLUTION

A report issued by the Medical Research Council for the period October 1963 to March 1965 (HMSO Cmnd. 2787) sets out details of the work being carried out by the "Air-Pollution-Research Unit" situated at St. Bartholomews' Hospital, Charterhouse Square, E.C.1, whose Director is P. J. Lawther, M.B., F.R.C.P.

"The Unit is concerned primarily with the investigation of the clinical aspects of air-pollution as it affects general and industrial populations. Studies are being made on the physical and chemical characteristics of pollutants and on the significance of polluted air, especially in relation to lung cancer and chronic bronchitis."

The Service has noted that an increase of air-pollution appears to be linked to an increase in the number of emergency applications for the admission of patients suffering from bronchitis, pneumonia and congestive cardiac failure. On the 18th February air-pollution by sulphurdioxide (SO₂) was .5 parts per million, i.e. ten times greater than normal. On that day the moving weekly total of applications for acute respiratory cases numbered 434, rising to 535 in seven days. This raises a hope that it may be possible to forecast increases in applications in future.

VISITS

Throughout the year E.B.S. has been pleased to welcome several hundred visitors from hospitals, chiefly nursing staff. A closer understanding between the hospitals and E.B.S. has been brought about by these visits and materially assists in the working of cases.

ACKNOWLEDGEMENTS

The E.B.S. would like to acknowledge the assistance of the Ministry of Health, the Metropolitan Regional Hospital Boards, the Doctors, Nurses and Administrative staff of the Hospitals. It would also like to thank the General Practitioners of London for their co-operation. Finally, the Chairman and Committee wish to thank the Regional Medical Admissions Officers attached to the Service for their valued help and advice.

APPENDIX I

GENERAL ACUTE CASES

6

					C	tted	
					Failures t		
			Applications	Admissions	G.P. Cases	Hospital Transfers	Cases withdrawn by applicants
190	65						
April		• • •	4,983 (4,722)	4,871 (4,572)	26 (56)	8 (12)	78 (82)
Māy		• • •	4,214 (4,430)	4,133 (4,331)	17 (33)	7 (11)	57 (55)
June			4,149 (4,272)	4,061 (4,177)	27 (27)	7 (4)	54 (64)
July		•••	3,940 (4,015)	3,857 (3,947)	19 (17)	6 (7)	58 (44)
August		• • •	3,818 (3,788)	3,743 (3,717)	22 (14)	6 (5)	47 (52)
September		•••	3,894 (3,850)	3,821 (3,758)	16 (12)	9 (11)	48 (69)
October		• • •	4,317 (4,347)	4,222 (4,247)	30 (35)	5 (6)	60 (59)
November			4,766 (4,552)	4,645 (4,443)	35 (31)	10 (7)	76 (71)
December	•••	•••	5,127 (5,046)	5,022 (4,946)	27 (32)	3 (2)	75 (66)
196	66						
January			6,275 (5,764)	6,069 (5,585)	85 (63)	13 (8)	108 (108)
February			5,403 (4,866)	5,260 (4,729)	52 (52)	- (5)	91 (80)
March	•••	•••	5,422 (6,090)	5,283 (5,907)	39 (74)	1 (12)	99 (97)
TOTAL	•••	•••	56,308 (55,742)	54,987 (54,359)	395 (446)	75 (90)	851 (847)

APPENDIX II

INFECTIOUS CASES

			Total A _l	oplications	Total Admissions		
1965							
April		•••	322	(340)	321	(337)	
May			264	(272)	264	(270)	
June		•••	240	(327)	237	(324)	
July			247	(334)	246	(332)	
August			236	(257)	233	(257)	
September	• • •		215	(257)	213	(256)	
October	• • •	• • •	225	(330)	223	(326)	
November		• • •	269	(333)	267	(332)	
December	• • •	•••	296	(424)	292	(419)	
190	66						
January		•••	330	(488)	321	(482)	
February		•••	281	(499)	279	(487)	
March	•••	•••	263	(528)	260	(508)	
Total			3,188	(4,389)	3,156	(4,330)	

APPENDIX III GENERAL PRACTITIONER'S ACUTE CASES ANALYSIS AGE GROUPS

November 14th, 1965—March 5th, 1966

Age Groups	Cases Offered	Percentage Admitted		
Birth — 20 21 — 30 31 — 40 41 — 50 51 — 60 61 — 70 71 — 80 Over 80	3,123 (3,449) 2,121 (2,348) 1,333 (1,298) 1,223 (1,194) 2,247 (2,089) 3,666 (3,123) 4,111 (3,294) 2,655 (2,204)	100.0 (99.8) 99.8 (100.0) 99.8 (100.0) 100.0 (99.6) 98.7 (99.1) 99.0 (98.9) 98.6 (98.4) 97.7 (99.5)		
Total Offered:	20,479 (18,999)			

APPENDIX IV

MATERNITY CASES

			Total A	Applications	Total Admissions		
1965							
April		• • •	121	(275)	119	(272)	
May		•••	103	(278)	100	(272)	
June			87	(270)	84	(263)	
July	•••	•••	92	(239)	90	(234)	
August	•••		74	(219)	68	(214)	
September	•••	•••	68	(220)	68	(206)	
October			66	(139)	65	(136)	
November		•••	70	(123)	70	(120)	
December	•••		63	(136)	62	(132)	
Бесенност	•••	•••	03	(130)	02	(132)	
190	56						
January			59	(138)	58	(132)	
February		•••	63	(110)	60	(108)	
March	• • •	•••	66				
iviaicii	• • •	•••	00	(120)	62	(115)	
TOTAL		•••	932	(2,267)	906	(2,204)	

APPENDIX V

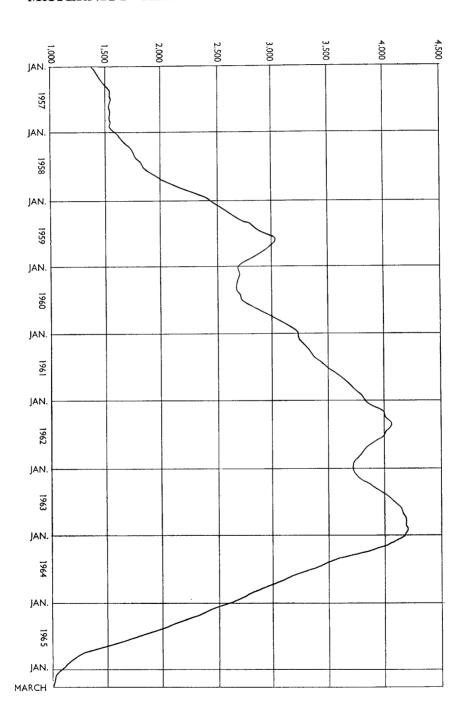
MEDICALLY REFEREED CASES

196	6 5		
April May June July August September			665 (563) 377 (366) 348 (400) 278 (303) 232 (189) 291 (237)
October November December			383 (346) 569 (362) 487 (307)
January February March	66 		1,269 (757) 1,089 (688) 1,036 (1,199) 7,024 (5,717)
IOTAL	•••	•••	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

APPENDIX VI
MEDICALLY REFEREED CASES IN REGIONAL BOARD AREAS

			North	West North East		South	South West		South East	
19 October November December	65 	•••	130 224 183	(78) - (96) (83)	128 200 190	(114) (128) (109)	86 90 67	(75) (84) (57)	39 55 47	(79) (54) (58)
190 January February March	66 	•••	437 327 263	(212) (202) (375)	495 410 429	(285) (271) (447)	199 155 178	(133) (124) (199)	138 197 166	(127) (91) (178)
Total		•••	1,564	(1,046)	1,852	(1,354)	775	(672)	642	(587)

APPENDIX VII MATERNITY CASES—MOVING ANNUAL TOTAL



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