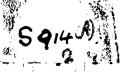


EMERGENCY BED SERVICE

(KING EDWARD'S HOSPITAL FUND FOR LONDON)

REPORT FOR THE YEAR ENDED 31st MARCH

1955



THE KING'S FUND INFORMATION CENTRE

11-13 CAVENDISH SQUARE LONDON W1G 0AN

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KING EDWARD'S HOSPITAL FUND FOR LONDON

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EMERGENCY BED SERVICE

Report for the Year ended 31st March, 1955

INTRODUCTION

During the year the Service received 63,791 applications for admission to hospital. If the exceptional year of 1952-53, when the great fog was followed by an influenza epidemic, is excluded, the number of applications received this year is much as usual. For the first time since the Service was founded in 1938 there was no December peak. Indeed this year the general acute applications in November were actually less than in October, and those in December were only slightly greater. The winter which began so quietly ended just before Easter with an unusually heavy demand, which nearly caused a warning to be issued.

It was particularly noticeable that although taking London as a whole no unusual demand was experienced, in limited areas the hospitals were most severely pressed. In the first few weeks of the year this was confined almost entirely to the inner portions of the North East Metropolitan Region. Then towards the end of February the pressure shifted to the North West Region. The movement of demand was so marked that the

Service has suggested to the Regional Boards that some form of local warning system should be considered.

Apart from these seasonal areas of pressure there are certain areas which seem permanently to be unduly pressed; for example the Battersea and Putney Group and the neighbourhood around the Royal Northern Hospital are constantly in difficulty, and the explanation seems to be that there are insufficient beds to provide for the wants of the population in these areas. The remedy for these difficulties does not lie in the hands of the Service but it is most distressing to have to insist on the admission of cases to these hospitals when they are already full.

Though general emergencies seem likely to remain at about 65,000 a year, fever applications vary considerably from year to year. 1955 began with a large increase over the corresponding months of 1954. This was mainly due to a measles epidemic and was not unexpected. The increase is only about half as big as that which occurred in January 1951. Nevertheless it has not always been easy to find all the beds required, and it seems that the cutting down of fever beds, which has gone on since the Health Service started, may result in much hardship should a severe epidemic occur.

MEDICAL REFEREE PROCEDURE

Ever since the severe winter of 1952-53, the Service has been uneasy about the steadily rising proportion of cases which have had to be admitted through medical referees. As is well known these are cases which, the Service having failed to admit by normal application, are adjudged by the Regional Medical Officers of the Boards attached to the Service to require immediate admission and are therefore passed to the

medical referees of the Groups for admission, even if the hospitals are already stated to be full.

By the beginning of the year under review the situation had been reached at which extremely urgent surgical cases had to be admitted by this procedure and the Regional Boards were informed of this problem. They felt the matter to be so serious that they asked that instances where acute surgical emergencies had been refused by a number of hospitals, should be notified to them. On receiving these the Boards made enquiries of the hospitals as to the reasons that made them unable to accept such urgent cases at the first request and we were glad to be able to report that the situation had eased considerably. Needless to say the Service dislikes having to use the medical referee procedure for it often means that a hospital which has willingly helped the Service to its utmost is, in the end forced to take yet further cases.

CHRONIC SICK CASES

Although it is the Service's duty to find beds for acute cases, there is no set definition of the word "acute". In consequence the Service frequently receives applications on behalf of acutely sick old people whose removal to hospital is made more urgent by their domestic circumstances. Among these cases some are deemed emergencies by the R.M.A.O., others have to be referred to the local hospital's waiting-list. General practitioners realise that the Service cannot deal with non-acute cases and the number offered is steadily declining. In 1954 there were 880 cases referred to waiting-lists, as against 1,446 in the previous year, but this, of course, does not mean that there are fewer "chronic sick" old people in London.

FIELDEN HOUSE

Ever since the beginning of the Health Service in 1948, the staff have worked in very cramped quarters in Old Jewry, and in addition there have been branch offices in various hospitals, which it has always been difficult to staff. With the completion of the new office at Fielden House, it has been possible to move the staff from Old Jewry into excellent new offices and to call in the branch staff so that all now work under one roof. All this movement of staff had to be undertaken without any break in the continuity of the Service and it is greatly to the credit of the staff that this was so smoothly carried out. The thanks of the Service are due to the Management Committees of Leytonstone, Woolwich and South West Middlesex Groups for so kindly housing and looking after the branch staffs from 1949 until 1954.

On the opening of the new offices the Service was honoured by an informal visit by H.R.H. The Duke of Gloucester. This was H.R.H.'s second visit to the Service and members of the Committee and staff were glad to welcome him and were most grateful for the interest he has shown.

On January 3rd, when the winter demand was at its peak, the Service was visited by Rt. Hon. Iain Macleod, Minister of Health, Sir Russell Brain, President of the Royal College of Physicians, Sir Harry Platt, President of the Royal College of Surgeons, Sir Arthur Gemmell, President of the Royal College of Obstetricians and Gynaecologists, other distinguished members of the profession and the Chairmen of the Metropolitan Regional Hospital Boards. During their visits the guests were able to study the Service closely and many of them expressed their admiration of the way in which the staff dealt with the work under difficult circumstances.

APPENDIX 1
CASES DEALT WITH 1st APRIL, 1954—31st MARCH, 1955

GENERAL ACUTE CASES

		•			Cases not admitt		ed:
			Applications	Admissions	Failures	Failures to admit	
					G.P. Cases	Hospital transfers	Cases withdrawn by applicant
1954							
	April		4232 (4521)	3992 (4129)	106 (179)	45 (97)	89 (116)
	May	• • •	4592 (4077)	4272 (3754)	155 (152)	71 (76)	94 (95)
	June	• • •	3658 (3870)	3488 (3612)	53 (93)	45 (66)	72 (99)
	July	•••	3653 (3870)	3481 (3580)	59 (112)	39 (62)	74 (116)
	August	• • •	3306 (3409)	3167 (3257)	50 (47)	25 (39)	64 (66)
	September		3500 (3515)	3348 (3356)	40 (51)	46 (49)	66 (61)
	October	• • • •	4408 (4369)	4136 (4081)	102 (100)	75 (91)	95 (97)
	November		4072 (4878)	3903 (4515)	64 (151)	43 (Ì10)	62 (102)
	December	•••	4817 (5473)	4596 (5196)	102 (126)	41 (51)	78 (100)
1955					1		
	January		6855 (6241)	6103 (5474)	480 (510)	82 (60)	190 (197)
	February	•••	5413 (5816)	4948 (5106)	302 (455)	26 (75)	137 (180)
	March	•••	5838 (5252)	5199 (4809)	411 (262)	38 (71)	190 (110)
Total		54344 (55291)	50633 (50867)	1924 (2238)	576 (847)	1211 (1339)	

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

INFECTIOUS CASES

		Total Applications	Total Admissions	
19	54			
April	•••	•••	753 (964)	738 (936)
May	•••		626 (1003)	620 (995)
June			612 (945)	609 (926)
July		• • •	629 (1021)	625 (974)
August	•••		576 (804)	573 (771)
September			480 (700)	479 (693)
October		•••	570 (751)	568 (742)
November	• • •		578 (690)	577 (678)
December	•••	•••	675 (740)	670 (718)
19	55			
January			895 (646)	855 (630)
February			926 (609)	897 (599)
March	•••	•••	1247 (847)	1197 (833)
Total		•••	8567 (9720)	8408 (9495)

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

APPENDIX 2

GENERAL PRACTITIONER'S GENERAL ACUTE CASES ANALYSIS BY AGE GROUPS

October 31st 1954—February 19th 1955

Age Groups	Cases Offered	Percentage Admitted	Increase or Decrease compared with corresponding period	
Birth-20 21-30 31-40 41-50 51-60 61-70 71-80 over 80	3936 (4490) 2019 (1986) 1618 (1711) 1732 (1938) 2558 (2479) 3319 (3421) 3119 (3170) 1275 (1207)	99.9 (99.8) 99.5 (99.2) 98.9 (98.2) 98.4 (97.7) 95.9 (94.6) 94.5 (92.2) 92.2 (87.9) 89.6 (84.9)	$egin{array}{c} + \ 0.1 \\ + \ 0.3 \\ + \ 0.7 \\ + \ 0.7 \\ + \ 1.3 \\ + \ 2.3 \\ + \ 4.3 \\ + \ 4.7 \\ \hline \end{array}$	
Total offered	19576 (20402)			

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

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