

## EDITORIAL

### Emergency Department: Basic Prerequisites for the Upgrade of the NHS

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#### Abstract

The Emergency Department is an autonomous hospital unit comprised of doctors, nurses and paramedics, who deliver emergency care on a 24-hour basis. It provides an interface between patients and their specialized treatment, as well as a point of contact between primary and tertiary care.

The need for medical services has increased disproportionately to the available resources for medical care; a fact that has given rise to difficulties in maintaining the effective function of the Emergency Department. As a result, the provision of high standard services is not ensured.

In order to help establish and maintain the effective operation of the Emergency Department, new methods should be established which efficiently utilize existing and up-and-coming information and communication technologies. This will allow for the acceleration of the Department's operational procedures, more effective treatment of emergency cases, and ultimately assists in maintaining a high level of patient satisfaction. The expansion and development of specific services offered by the ED will also assist in the Department becoming a system of qualitative assessment for primary care. This would lead to a better outcome for emergency cases as a result of fast, spherical and effective treatment.

**Key words:** emergency departments, emergency medicine

#### Emergency Department: Basic Prerequisites for the Upgrade of the NHS

Nowadays, one of the major issues that health care systems around the world experience is the influx of a high percentage of patients to ED's that require non-emergency treatment (Susan et al. 1999). This phenomenon becomes a handicap in the treatment of real emergencies, lowering the standard of services provided by the Department while increasing the overall expenses. The role of the Emergency Department is recognized internationally as an interface between patients and their specialized treatment needs, as well as a point of contact between primary and tertiary care (Saluzzo et al. 1997).

According to the EuSEM "the Emergency Department is the hospital department whose aim is to receive, rejuvenate, diagnose and treat patients with emergency and acute problems which runs the spectrum of illnesses, injuries and behavioral disorders as well as their treatment until the moment of discharge or the undertaking of further care by other doctors." The Emergency Department's goal is to provide a high standard of medical care through correct diagnosis and emergency medicine therapeutics so as to minimize mortality and morbidity rates (Carpentier, 1990). Furthermore, it constitutes a basic index of effective and quality running of the hospital itself since

it influences the smooth operation of other hospital departments, clinics, labs etc, and tests the collaboration between other departments and services.

The Emergency Department is where the NHS' trustworthiness and quality is tested on a daily basis (Votsi 2000). The individual goals of the Emergency Department's mission make it necessary for the Department to provide emergency medicine in a functional environment staffed with suitable, specialized medical and nursing staff. It also requires the Department to have all necessary, modern biomedical technology equipment.

The continuously increasing need for hospitalization of large numbers of emergency cases in many European countries has resulted in government and public concern. Whereas scheduled admissions are decreasing, emergency admissions tend to increase on a daily basis, requiring hospitals to care for the fluctuating and unexpected needs of emergencies.

The health initiatives that develop within the framework of the NHS through pre-hospital, primary, secondary and tertiary care are usually connected to deficiencies in basic sectors which form the beginning of dysfunction in Emergency Departments. That, in turn, leads to the departments' overload (Zilidis, Filalithis, Vlachonikolis 1992). The need for an immediate and timely provision of emergency care to an unscheduled and non-uniform

number of cases with differing levels of complexity and severity requires the existence of a functionally and administratively autonomous unit within the hospital dedicated to such services (Askitopoulou 1991).

The immediate treatment and support of an emergency case in a comprehensive and continuous fashion presents distinct benefits for the Emergency Department for the following reasons:

1. It results in a better outcome for emergency cases in terms of survival chances and a decrease in morbidity rates in terms of duration and severity.
2. It restricts ambiguous admissions thus more properly utilizing the hospital's infrastructure.
3. It decreases hospitalization time.
4. It greatly decreases the socioeconomic costs of an emergency case.
5. It constitutes a system of quality assessment for pre-hospital and hospital care as well as primary care.
6. It provides training in emergency medicine and emergency care for doctors and nursing staff.
7. It advances research in the subject of emergency medicine, in which time is of the essence.

Another parameter which becomes an immediate necessity for the appropriate organization and administration of Emergency Departments is the specialty of Emergency Medicine, the recognition of which has helped greatly the development of Emergency Departments (American College of Emergency Physicians 2008). Emergency Medicine in Europe traditionally consists of two ideologies:

**i.** The Anglo-American which uses specialized Emergency Departments and Emergency Medicine pre-hospital services with trained rescuers (paramedics).

**ii.** The French-German based on a very well-organized Emergency Medicine pre-hospital system including doctors and nurses, which has the basic setup of hospital Emergency Medicine (Anderson SP et al. 2006).

In recent years, the disparity between those two practices is decreasing as a result of the rapid development throughout Europe of independent Emergency Departments in clinical, financial and managerial terms (Tintinalli 2010). In the same manner that a severe injury requires treatment in specially focused sections of the hospital, an acute injury needs treatment in a specialized section such as the Emergency Department.

The expansion and development of services which are offered by the Emergency Department through Emergency Medicine practices aims at creating an Emergency Department that becomes a system of qualitative assessment for primary care. It also aims

at a better outcome for emergency cases through a spherical, rapid and effective manner of stabilization and treatment (Agouridakis et al 1996). It further aspires to an upgrade of services provided in the emergency sector while protecting the hospital from ambiguous admissions.

The staffing of Emergency Departments with specialized medical and nursing personnel and their move towards autonomy will improve greatly their services, a fact that will have a resounding effect on society more than any other intervention in the NHS.

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