Improving the provision and quality of safety netting instructions for patients seen in Same Day Emergency Care (SDEC)

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Introduction
Patients need know what to do should they deteriorate at home following assessment in same day emergency care (SDEC). The SAM/RCPE quality standards for SDEC[1] specify safety netting instructions should both be clear and written down for the patient.
Furthermore, ensuring this safety net is patient-centric optimises effectiveness, and aligns with a key ethos of the NHS[2].

Objective:
To improve the provision of written safety netting instructions, to at least 85% of patients in any given 7-day period, in the John Radcliffe SDEC Unit, named locally the Ambulatory Assessment Unit (AAU).

Methods
Safety netting instructions were defined as "instructions for what a patient should do if they were to deteriorate at home, and whom they
should contact should they have any concerns"[1]. Inclusion of written safety netting instructions in the discharge summary were recorded. All data were collected over a 7-day period, and mean average results were inputted into a run chart. Baseline data were collected in September 2021, and repeated on a monthly basis until December 2021. Two patient and public surveys, and a staff survey, were carried out.

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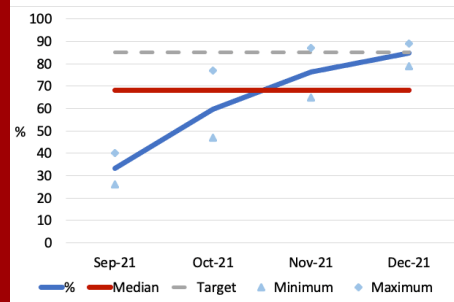
We improved the provision of **patient-centred, written safety netting instructions** from 33% to 85% of patients in a 7-day period in the John Radcliffe Acute Medical SDEC unit using:

- A dedicated safety netting section in our clerking/discharge summary proforma
- Patient and Public surveys
- Staff education, awareness and feedback



Results
The baseline data showed 33% of AAU discharge summaries included written safety netting instructions. This improved to 60% in October 2021 following introduction of a dedicated safety netting section in the proforma. In December 2021, following further reminders and education of staff, this reached 85%. In addition, a patient and public survey was carried out on 4th November with 18 patient and 18 public respondents, finding a preference for written instructions and for advice specific to their condition rather than generic. A further
survey carried out on 23rd December had eight respondents and found all had received, and were confident with the safety netting advice provided. In the staff survey the main barrier identified in delivering safety netting instructions was time pressure.

Discussion
A simple intervention of including a prompt in the discharge summary proforma significantly improved the provision of safety netting instructions. This would be feasible to replicate in similar units, and the convenience of the prompt in the proforma may allay the time pressures in a busy clinical setting. Furthermore, written and tailored instructions were preferred by surveyed patients.

References
[1] Society for Acute Medicine, Royal College of Physicians of Edinburgh "Standards for Ambulatory Care", March 2019. https://www.rcpe.ac.uk/sites/default/files/ambulatory_care_report.pdf Date accessed 23rd Jan 2022
[2] National Health Service England "NHS Five Year Forward View", October 2014.