

01st October 2015

Dear Sir/Madam,

Thank you for your recent follow-up Freedom of Information request regarding the ITU Department at the Homerton Hospital Trust.

The Trust can provide the following information:

1. When a patient is admitted into resus / a&e department in your hospital what is the criteria for the patient to be transferred to ITU?

There are no definitive or absolute criteria, this is a clinical assessment and judgement that ITU review and or admission may be required. There is automatic involvement of the ITU team for all adult and paediatric trauma calls and cardiac arrest calls within the ED.

2. (a) is the resus / a&e department having discretionary and mandatory right to transfer patient to ITU department, or

2.(b) is the resus / a&e department not having discretionary and mandatory to transfer patient to ITU department and requires first it to have an ITU department lead doctor arrive into resus / a&e department to do an assessment (for permission) on the patient to see if they should be transferred to their ITU department?

Any patient that the ED team feel may benefit from ITU admission is referred to the ITU team (on call registrar) for initial review and then decision regarding ITU admission. The ITU registrar discusses with the ITU Consultant before any admission to ITU. All referrals are discussed with the duty ITU consultant, whom ultimately decides re admission.

3. If your answer to 2.(b) requires resus / a&e department to first seek assessment and permission from ITU department lead doctor who sees the patient before they can transfer patient from resus / a&e department to ITU department, then similarly is their assessment and permission required from other department lead doctors before the patient is transferred from one department to another, for example, transfer from resus / a&e department to acute ambulatory care and transfer from acute ambulatory unit to care of the elderly etc? If not, why is it different to transfer from resus / a&e department transfer to ITU department?

Any ED patient, who requires any specialist opinion, will be referred whilst in ED to that specialist team. The ED team have a process whereby they can admit the patient to the dedicated acute admitting ward prior to that specialist team physically seeing that patient, but not without accepting the referral. This is done so that the flow process within ED is maintained and allows the specialists team to see the patient on the ward. (There are some exceptions to this which include patients too unwell to do so and obstetrics and gynaecology patients. This is for safety reasons.)

There are no direct admissions from ED to 'specialist wards' without prior review by specialist teams. From ED some patients can be directly streamed to other areas of the hospital without accepting doctor agreement. These areas include delivery suite, early pregnancy unit, and Medical day unit. There are clear processes for these streams.

If you have any queries about this response please contact the information governance manager at foi@homerton.nhs.uk , in the first instance. If, following that, you still have any concerns, you may contact the Information Commissioner either by letter, FOI/EIR Complaints resolution, Wycliffe House, Water Lane, Wilmslow, Cheshire SM9 5AF, or by email www.informationcommissioner.gov.uk to take them further.

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Yours sincerely

Mike Dunne
Information Governance Manager/Deputy Calidcott Guardian