

# Southwark Community Health Council

75 Denmark Hill, London SE5 8RS

Telephone: 0171-703 9498

(also 24 hour answer phone)

Fax: 0171-277 1805

Noshur



Chair: Sally Keeble

Secretary: Malcolm Alexander

**Southwark CHC**

OUR REF: CHC12.95/1102b/FF

Natalie Tiddy  
Director of Quality  
The Health Commission  
1 Lower Marsh  
London SE1

20 December, 1995

Dear Natalie,

I am writing to apply for a grant from the Health Commission's Quality funds for the period 1996/97.

## 1. The Casualty Watch Programme

The proposal is to develop the Casualty Watch Programme and a computerised Casualty Watch System based on a Systems Dynamics approach.

The Casualty Watch Programme has now been running for several years and has provided an excellent link between CHCs for the production of data about the effectiveness of Casualty Departments in serving the needs of acutely ill patients.

The data is collected simultaneously by CHCs across London who fax it to Southwark CHC on the last Monday of each month. The Casualty Watch Co-ordinator collates the data, processes it and produces reports which go out to CHCs across London, Providers, Commissioners, MPs and Regional Performance Management Staff.

The Casualty Watch Programme is the first ever co-ordinated community based system to collect detailed information about what happens to patients in the casualty system. Because it is carried out simultaneously, a valuable snap-shot of casualty conditions across London is obtained which enables CHC to regularly monitor the specifications for casualty services collectively and individually. Thus we can now co-operatively monitor contract compliance within the Lambeth, Lewisham and Southwark area and simultaneously reflect on this and pressures from other areas.

*The Community Health Council is a statutory body which represents the community and campaigns for the best possible Health Service*



An additional benefit of the co-ordinated regular style of monitoring is development of a close working relationship with colleagues in casualty departments which is both facilitative for information collection and of practical benefit for the collection of other random bits of information, eg particular problems with bed management, efficiency of pathology services and linen supply.

Our proposal is to continue with the project for a further year and to look closely at the means of refining the system so that data can be produced more rapidly to enable immediate intervention by Commissioners, Providers and CHCs when unusually intense pressures on casualty services are identified.

We also aim to refine the methodology used to assist with the collection, collation and production of data to enable Patients Charter Standards to be more closely monitored.

Costs:	1.	Staff Costs per annum	£1,200
	2.	Stationery	£ 150
	3.	Postage	£ 300
	4.	Telephone/Fax Rental etc	£ 250
	5.	Photocopy	£ 350
			£2,250

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## 2. Development of a System-Dynamics Approach to the Casualty Watch Programme

Over the past year the CHC has worked closely with the Operational Research Department of the London School of Economics to examine more precisely the factors that lead to long waits on trolleys for casualty patients. We have tried to steer away from the bed based model, and approach the problem as a multifactorial one. Our premise is that if the actual determinant of long casualty waits can be more precisely defined, that problems will be amenable to both prediction and immediate ameliorative action. We also believe that different management systems may be predicated by the finding we have so far produced, ie successful management of pathology, transport, x-ray systems and staffing may be as important as bed supply, but because of diverse accountability there's little co-ordinated control of these constituent factors.

The work with LSE led to the development of a System Dynamics Model of casualty departments, which is fully described in the attached study "Casualty Watch: Development of a Model to Investigate Sensitivity of Waiting Times in A & E" and is briefly described below:

### "Motivation Behind the Computerised "Casualty Watch" System-Dynamics Model"

The fact that patients spend an unacceptably long time waiting in casualty departments is perceived to be an indication of pressure on acute health care provision. "Casualty



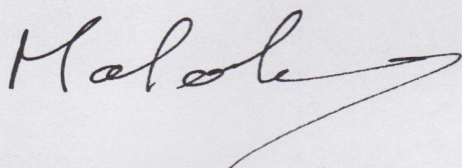
Costings for this component which will be carried out jointly with the London School of Economics are as follows:

Labour Costs	- 3 months salary for one worker	£4,500
Computer Software	}	
Laplink	}	£ 700
Telephone, Fax etc		£ 200
Stationery		£ 120
Photocopying		£ 60
Travel		<u>£ 35</u>

Total	<u>£5,615</u>
Grand Total	<u>£ 7,865.</u>

I hope that you find this proposal acceptable and will be able to support this interesting and we believe highly innovative approach to the problems faced by casualty departments in London.

Best Wishes.



Malcolm Alexander  
Chief Officer

Enc: MSc Thesis - Camilla Monefeldt  
GLACHC Report

cc: Ogl  
Noshi Patel  
Special Projects Box  
Casualty Watch Box