



## Could You Survive A&E?



### Introduction

Whether you know it as Accident & Emergency, A&E, Emergency, the Emergency Department, ED, the Emergency Room or ER, what is sure is that it's the busiest department of any hospital.

1. Look at the pictures and note 4-5 adjectives to describe this department.

e.g. *busy*

2. Take a moment to think about the questions:

- What is your experience of A&E as a medical professional in the UK?
- What is your experience of A&E as a patient or relative in the UK?
- How do your experiences differ from those in your country?

### Vocabulary

1. Here are some of the positions you'll find in A&E in the UK. Match the position to the correct description.

Position	Description
a. Consultant	1. someone who prioritises the initial treatment of patients in A&E
b. FY1 (Foundation doctor)	2. status following 2-year postgraduate programme, registered with the GMC
c. FY2 (Foundation doctor)	3. doctor hired on a temporary contract to replace an absent staff member
d. Junior doctor	4. doctor, one grade below a consultant and undergoing specialist training
e. Locum doctor	5. fully qualified specialist doctor after 8 years of postgraduate training
f. Registrar	6. status during the first year of a postgraduate training programme
g. Senior registrar	7. status during the 2-year postgraduate training programme
h. Triage nurse	8. status during the second year of a postgraduate training programme

2. What are the equivalent positions in your country?

### Prepare for Reading

You're going to read an extract from an article written by an experienced senior registrar in A&E. Look at the title of the article and answer the questions.



**Surviving a Night in A&E: A doctor's story**

- a. What topics do you think the writer will cover in the article?
- b. To what extent do you think you will be surprised by the revelations in the article?
- c. Why do think the writer wishes to remain anonymous?

**Extract N°1**

1. As you read Extract N°1, complete the writer's job description.

*As a senior registrar in A&E on the nighttime shift, I am* .....

.....

**Extract N°1**

**Surviving a Night in A&E: A doctor's story**

I am a senior registrar A&E doctor in a major teaching hospital. I qualified over 10 years ago and have been an A&E doctor for three quarters of my career. On most daytime shifts, I am in charge of a section of our department, such as the resuscitation room, majors, minor injuries, children's A&E or clinical decision unit; when I work night shifts; I am in charge of the entire department, covering all those areas.

The difficulties we are facing this winter arise from patient and population factors, issues around senior staffing of A&E departments, and problems with the broader health and social care system. Most of the difficulties are not new, but the chronic strain they have been putting on the system for years has, for many reasons, been felt particularly acutely in 2014. It's being called a winter crisis, but the summer of 2014 was the most difficult I have seen in my career; winter is only making matters that little bit worse – and so far, we are lucky that there has not been a big spike in influenza cases.

Source: The Guardian (8.01.15)

2. Answer the questions about Extract N°1.

- a. Which adjectives, usually associated with symptoms, does the writer use to describe the situation in A&E?
- b. The situation in UK A&E departments is described as a crisis. Why?
- c. The 'winter crisis' could be made worse. How?

**Extract N°2**

1. Look at the data. What do you think they refer to?

- |            |       |                  |           |
|------------|-------|------------------|-----------|
| a. 72      | b. 36 | c. 100%          | d. 60mins |
| e. 3 hours | f. ½  | g. double-triple | h. 2 in 6 |

2. As you read Extract N°2 write notes about the data.

- |  |         |               |         |
|--|---------|---------------|---------|
| a. 72 patients in A&E when article written | b. .... | c. 100% ..... | d. .... |
| e. ....                                    | f. .... | g. ....       | h. .... |
| .....                                      | .....   | .....         | .....   |

**Extract N°2**

**10pm**

I start work and take a handover of all areas of the department.

There are 72 patients in A&E. Half of them haven't seen a doctor yet. Ten of them haven't even seen a triage nurse who will decide how serious their case is. We don't have enough space for them all.

## Worksheets 4 Emergencies



[www.englishformedicine.net](http://www.englishformedicine.net)

All the beds in the resuscitation room (“resus”) are full.

Patients with chest pain are sitting on chairs, waiting for up to an hour for an electrocardiogram (ECG) to make sure they’re not having a heart attack.

Patients with minor injuries have been waiting for more than three hours to see a doctor. The day shift is finishing; more doctors are going home than are starting for the night shift. That waiting time is going to get longer. I cannot divert more doctors to see those patients because I need them with me in majors and resus to see the more unwell cases.

Three of the six doctors working under me tonight are locum doctors. They are not employed full time; they pick up the shifts they want, when they want, at different hospitals, for two or three times the pay I’m getting for tonight. Some of them are great doctors; others not so good. Two of them have never worked in this department before, so I’m going to have to show them round, explain our local policies, and teach them how to use the computer system before they can even see one patient. The reason? Nobody wants to take up full-time jobs in A&E any more – especially the more senior posts like registrar and consultant.

And why would they? For the same amount of training and experience, I could be a dermatologist or a kidney doctor. I’d work the same number of hours for the same pay, but much less (or no) evening and nighttime work, with regular, predictable, scheduled activities in my day, time for lunch, and no drunk people to deal with. Most of my patients wouldn’t be acutely unwell; I wouldn’t be making life-and-death decisions every shift. So why choose A&E, with constant pressure from dealing with really sick patients, drunks causing havoc all night, often no time for a lunch or dinner break, and frequent evening and night shifts? So – we’re really short of senior doctors, every day.

Source: The Guardian (8.01.15)

### 3. Answer these questions.

- Why does the number of patients put a strain on resources in this department?
- How does the staffing issue impact on this situation?
- In what way do the new locums further impact on this situation?
- Why is the writer not surprised about the senior staffing issue?

### Time for Discussion

Choose one of the topics to discuss.

- Staff members agree to work voluntarily to help deal with the winter crisis. Discuss.
- The current situation in A&E is due entirely to an aging population in the UK.
- GP or A&E doctor, which would you prefer?

### Further Reading

Read the rest of the article at:

<http://www.theguardian.com/society/guardianwitness-blog/2015/jan/08/surviving-night-nhs-hospital-a-and-e-doctors-story>

These resources may help you prepare the topics above:

<http://www.independent.co.uk/news/uk/nhs-staff-are-working-unpaid-to-help-avert-a-winter-ae-crisis-9978651.html>

<http://www.medicalcareers.nhs.uk/>

<http://www.nhscareers.nhs.uk/explore-by-career/doctors/careers-in-medicine/>



## Answer Key

### Introduction

**1. Sample answer:**

busy, difficult, dynamic, energetic, exciting, exhausting, fast, frantic, fun, hard working, interesting, overcrowded

### Vocabulary

**1.**

**a.** 5

**b.** 6

**c.** 8

**d.** 7

**e.** 3

**f.** 2

**g.** 4

**h.** 1

**NB:** It is important to note these refer to the UK. Some positions may also be found in Ireland, Australia and New Zealand. FY1 were previously known as PRHO (Pre-registration House Officer) and/or junior doctors. FY2 were previously known as SHO (Senior House Officer) and/or junior doctors.

### Extract N°1

**1. Sample answer:**

As a senior registrar in A&E on the nighttime shift, I am in charge of all the different sections of the department including the resuscitation room and children's A&E.

**2.**

**a.** chronic, acutely

**b.** The problems in A&E are due to the number of patients and insufficient number of senior staff to manage the departments

**c.** An outbreak of influenza would make the situation worse.

### Extract N°2

**2. Sample answers:**

**a.** 72 patients in A&E when article written

**b.** 36 patients hadn't seen a doctor at 10pm

**c.** 100% of the resuscitation beds taken

**d.** patients wait 60mins for an ECG

**e.** minor injury patients waited more than 3 hours to see doctor

**f.** ½ of doctors in department are locums

**g.** locums earn double-triple the writer's salary

**h.** 2 in 6 locums have never worked in this department before

**3. Sample answers:**

**a.** Waiting times are longer and there are not enough beds for the number of patients.

**b.** There are not enough staff members to cover the priority areas, such as the resuscitation room and major injuries unit, as well as the other areas in the department.

**c.** New locums are neither aware of the specific hospital policies nor the computer system and have to be trained, which takes time away from the patients.

**d.** Senior doctors could work as specialists with regular hours and fewer problems for the same salary