

ENHANCED CARE: GUIDANCE ON SERVICE DEVELOPMENT IN THE HOSPITAL SETTING

20 May 2020

As part of our [Critical Futures project](#), following a detailed research survey into the future requirements of critical care services with multiple stakeholders and partners, the provision of Enhanced Care services was identified as crucial.

We are pleased to announce, in collaboration with the Royal Colleges of Physicians of the UK, the release of guidance for the development of Enhanced Care in the acute hospital setting. The guidance outlines a framework to consider when creating a service for patients whose care needs fall into the gap between what can be provided on a normal ward and in critical care. By keeping patients as the focus, and accepting that there will be different drivers for implementation, multiple models will be required so we provide examples of how this has worked in a variety of situations. To ensure there is an overarching governance structure we recommend a set of principles to follow during development and implementation, including close liaison with critical care so that there can be seamless transition for patients should they need it.

The benefits of Enhanced Care are far reaching but most importantly, it will bridge the current gap to ensure that patients receive the right care, in the right place, at the right time and by the right people.

‘Implementation of Enhanced Care services also has the potential to improve patient flow, support operative scheduling and release capacity within critical care, which is absolutely vital in the current landscape.’

We hope that investment in the development of Enhanced Care services will have an impact on the degree of critical care expansion currently required and be a much more efficient use of resource. In light of COVID-19, it also offers the potential to utilise the skills that non-critical care staff have acquired during the pandemic for the continued benefit of patients.

Dr Alison Pittard, Dean, Faculty of Intensive Care Medicine



Bridging the gap, enhancing care: a service development with the patient at its very heart.

Professor Andrew Goddard, President, Royal College of Physicians, London

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COVID-19 has taught us more than ever that the interface between wards and the higher levels of critical care is a grey one. This report shows we can improve the care for people in that grey zone and the RCP is delighted to support it.

Professor Andrew Elder, President, Royal College of Physicians, Edinburgh

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The flexible nature of this guidance will enable clinicians and their teams to innovatively improve patient care in a way tailored to their local circumstances.

Professor Jackie Taylor, President, Royal College of Physicians and Surgeons of Glasgow

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The current health crisis has shown us all the need for professional, flexible care if we're to meet our patients' diverse range of needs. This guidance will help achieve this, and that's why we fully support it.

NOTES TO EDITORS:

The Faculty of Intensive Care Medicine was founded in 2010 and has well over 3,500 members, making it the largest organisation of critical care medical professionals in the UK. The Faculty is the professional and statutory body for the specialty of intensive care medicine, the doctors who lead critical care services and Advanced Critical Care Practitioners.

<https://www.ficm.ac.uk/faculty-membership/about-faculty>

Intensive Care, also known as critical care, is a place in every acute hospital that manages patients who are critically ill. Critical care is normally divided into two units, a Higher Dependency Unit and an Intensive Care Unit (although they may physically inhabit the same floor space).

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