

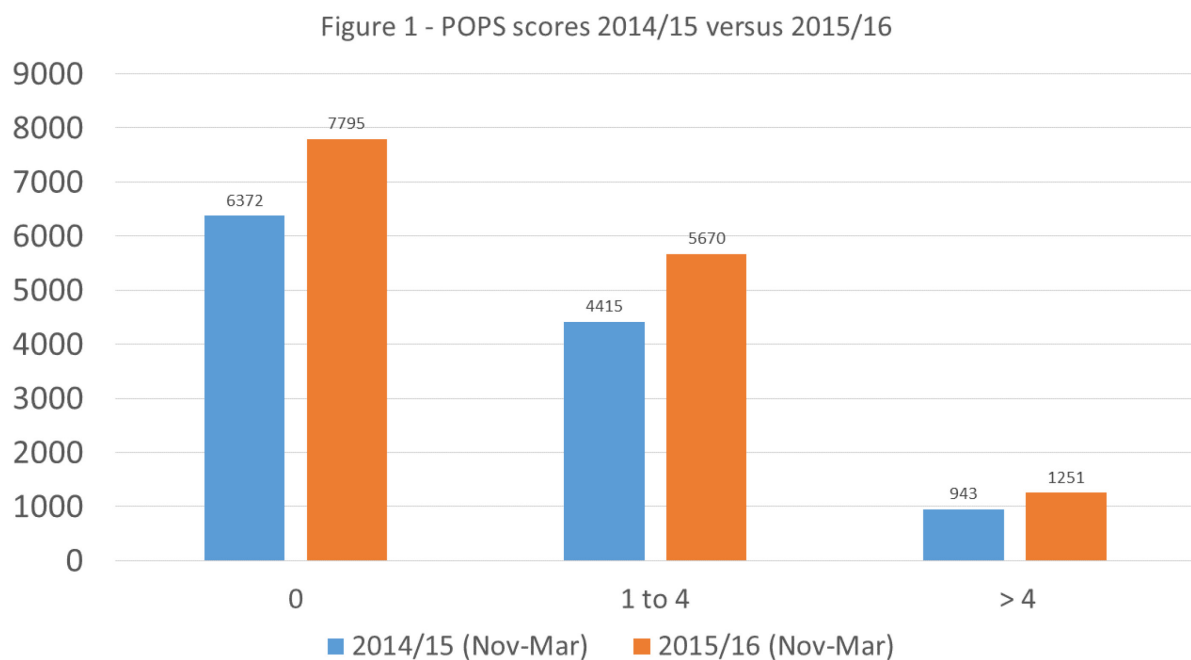
Are increasing volumes of children and young people presenting to Emergency Departments due to increasing severity of illness?

Background: Increasing utilisation of Emergency and Acute Care services by children and young people is a worldwide trend. This is thought to be a result of parent and carer desire for more “on demand” health care assessment and not a consequence of increasing severity of disease. A bespoke acuity assessment system in our department allowed us to test this hypothesis.

Methods: This data is based on the Paediatric Observation Priority Score, a previously published and validated assessment tool designed specifically for Paediatric Emergency Care [1]. It is scored from 0-16 and consists of physiological, observational and historical components with a unique ‘gut feeling’ element. Data was available from November 2014 to March 2016.

Results: There has been a 32.6% increase in the number of children with a POPS>4 (Figure 1) with a small (non-significant) increase in relative acuity.

Figure 1 – Total number of children with POPS 0,1-4 and >4



Conclusion: In light of the overall total increase in attendances and relative increase in acuity it appears the general cohort of children presenting are more unwell. Given a POPS > 4 is associated with an increased risk of admission for more than 24 hours [1] it can also be concluded that a significant proportion of attendances to the department are ‘appropriate’.

Words: 212

1. Roland D, Davies F, Coats T. The Paediatric Observation Priority Score (POPS): outcomes of 24000 patients. Arch Dis Child. 2014;99(S2):A24.