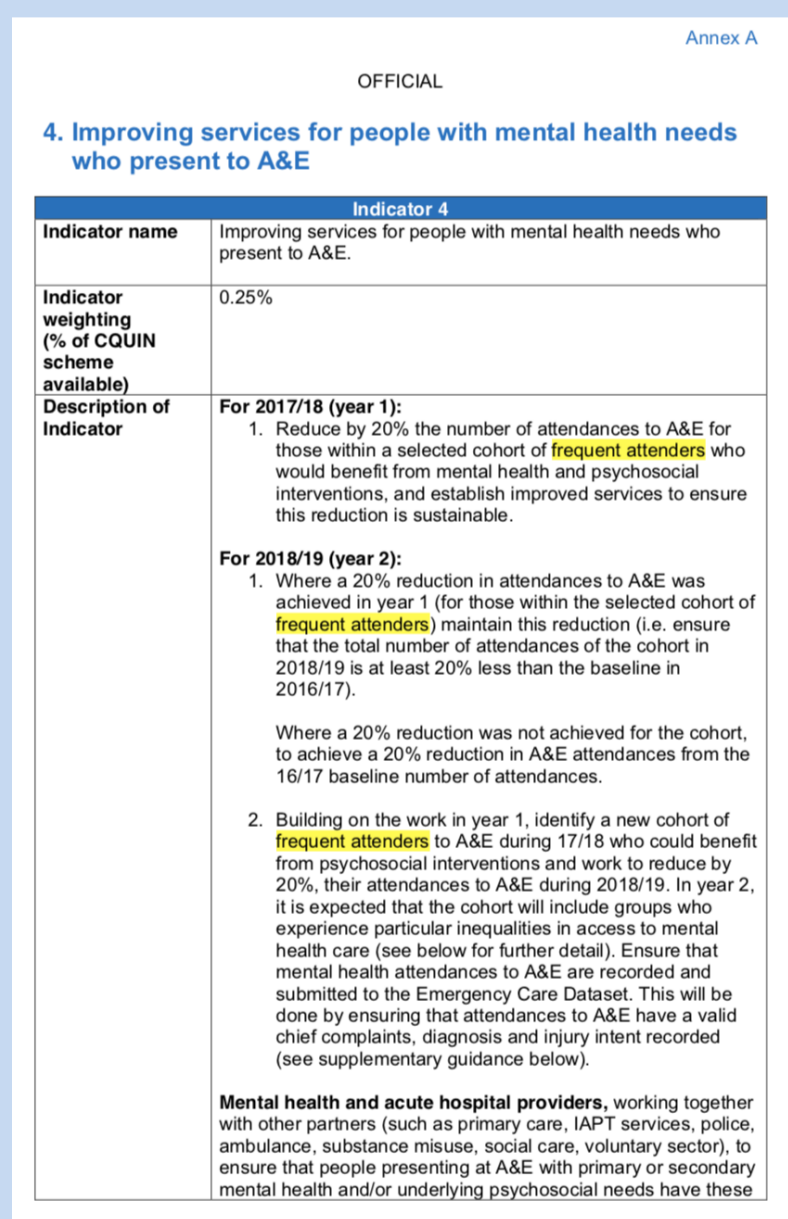
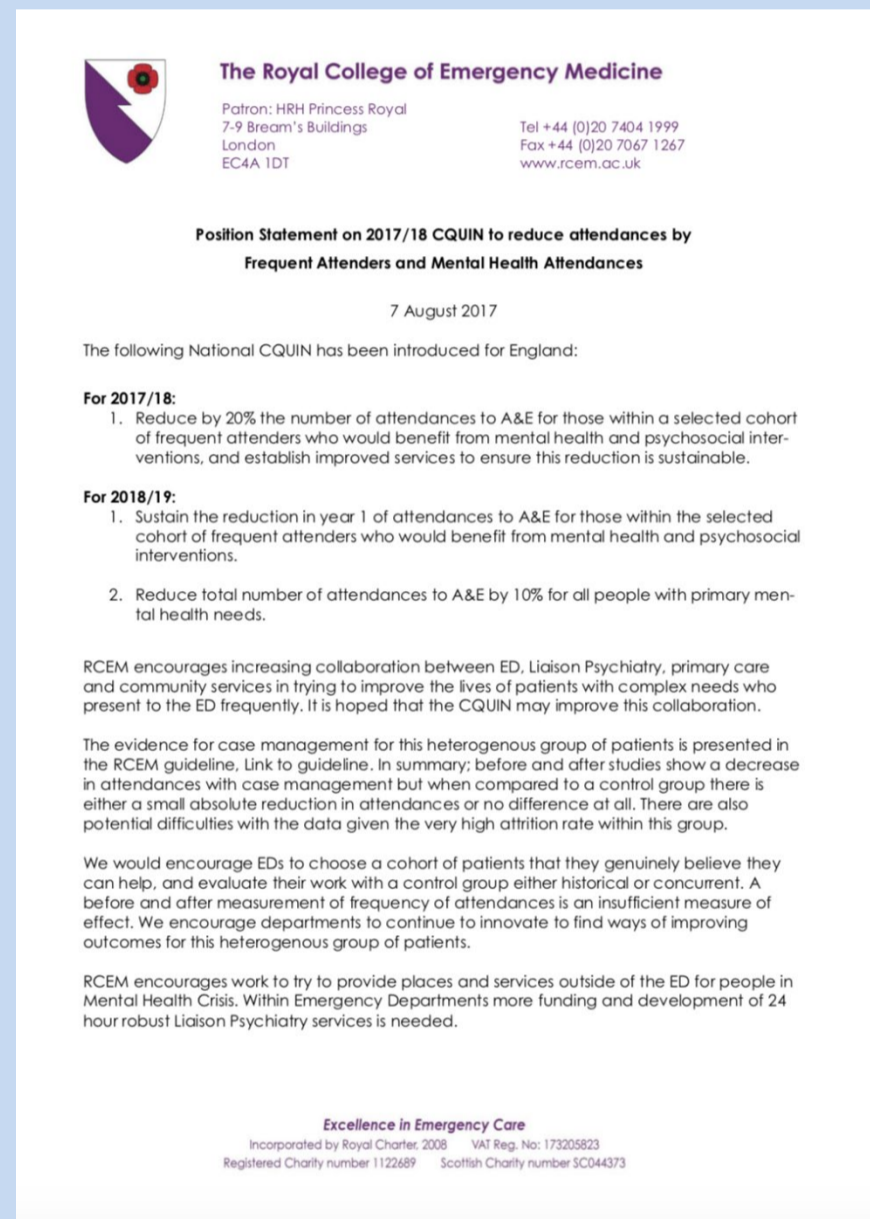
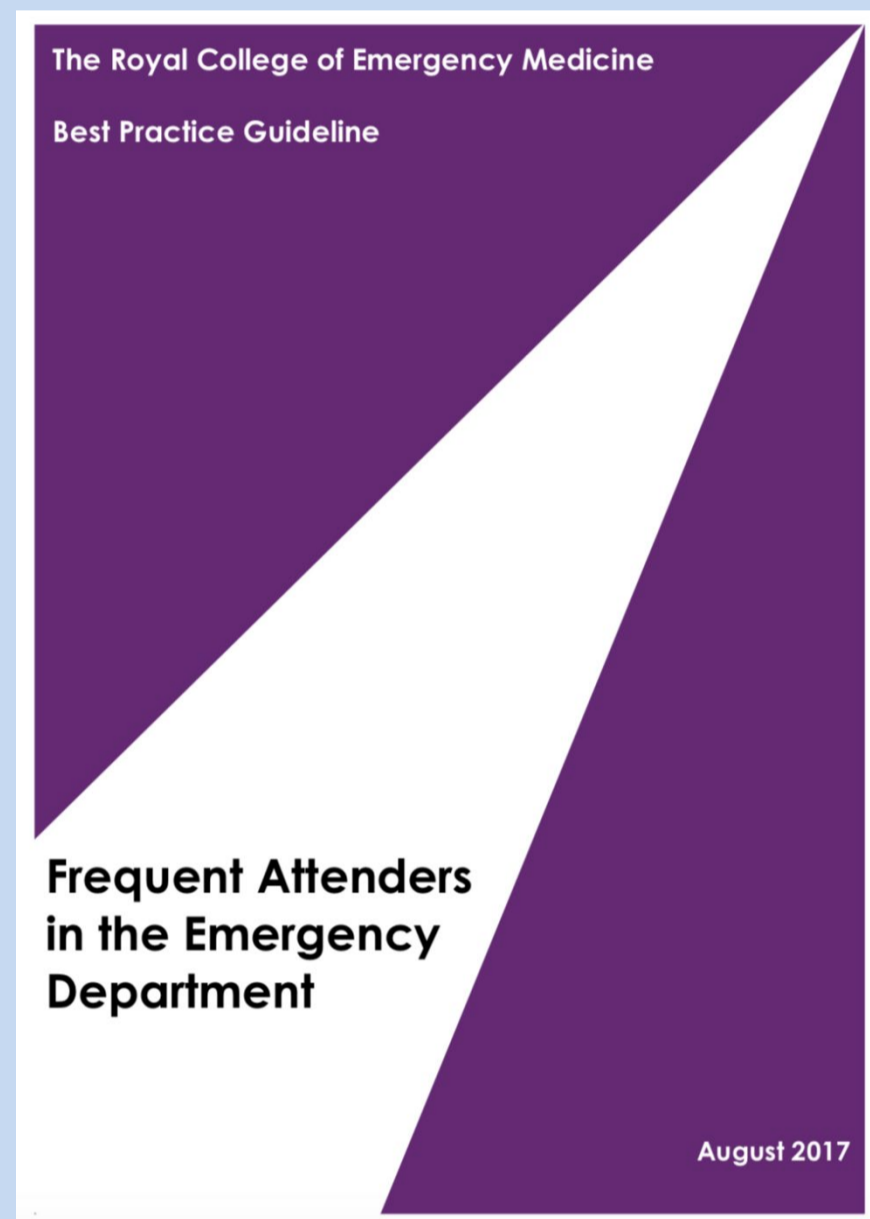


BACKGROUND

Frequent attenders make up a significant volume of the emergency department (ED) workload each year [1]. As such, research and guidelines, both at a local and national level [2], have been published to reduce unnecessary attendances, decrease associated financial burdens, and to ultimately improve patient care.

The existing research and guidance principally focusses on adult attendees, or targets specific patient groups such as the paediatric asthmatic [3,4], while minimal research exists within general paediatric emergency medicine.



RESULTS

- 47 patients were identified, accounting for 584 attendances in total.
- Median age of patients was 26 months (IQR 52 months).
- Patients were admitted to the observation unit, or to an in-patient bed on 42.8% (n=250) occasions (Figure 1).
- Common reasons for attendance are shown in Figure 2. Other reasons for attendance included: vomiting, abdominal pain or being generally unwell.
- 77% (n=36) of these patients had complex pre-existing medical conditions including seven oncology patients, eight patients who were born prematurely, and four patients with a confirmed neurological diagnosis. Most presentations related to these underlying conditions, but some did not.

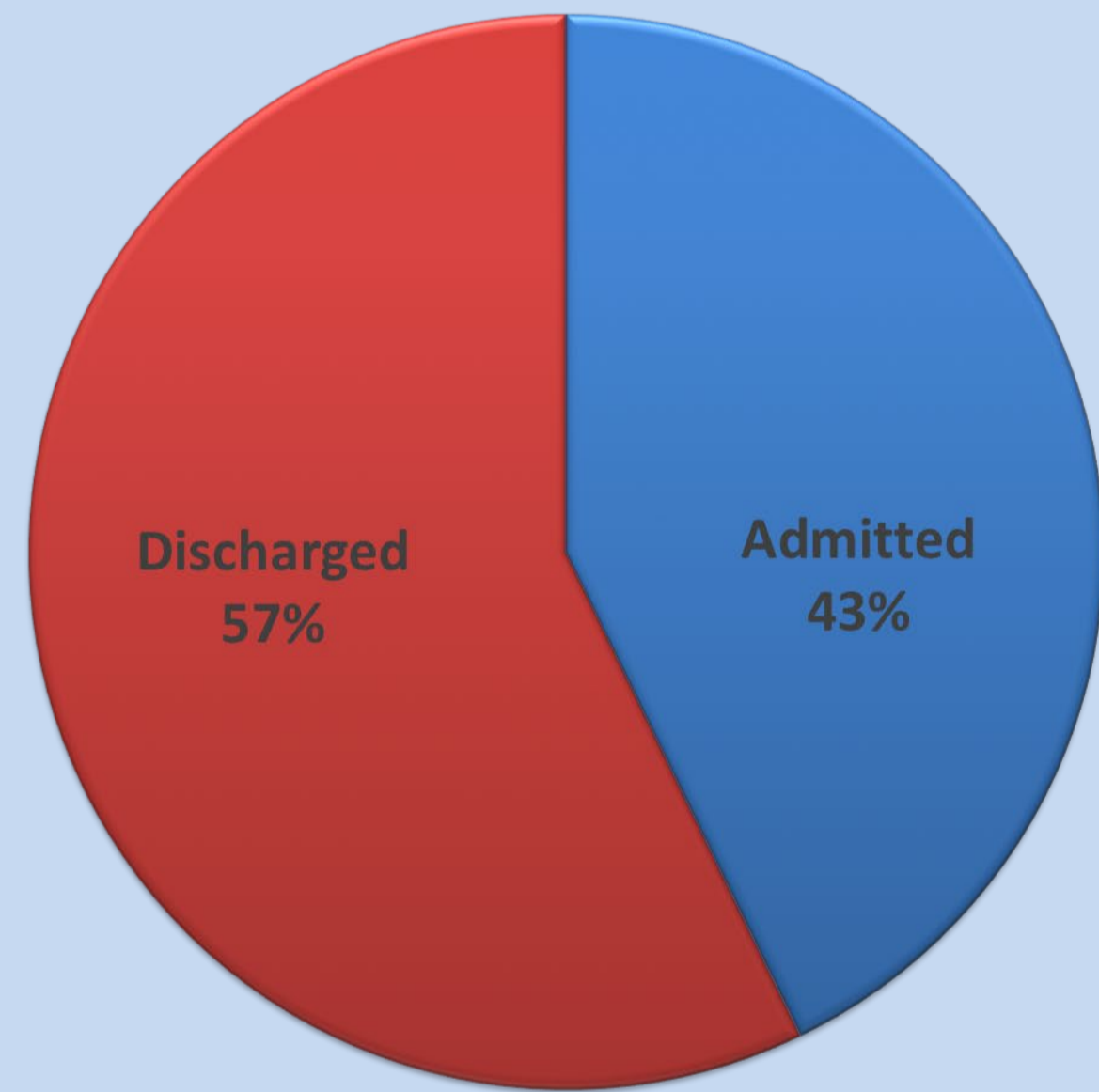


Figure 1: Rates of admission

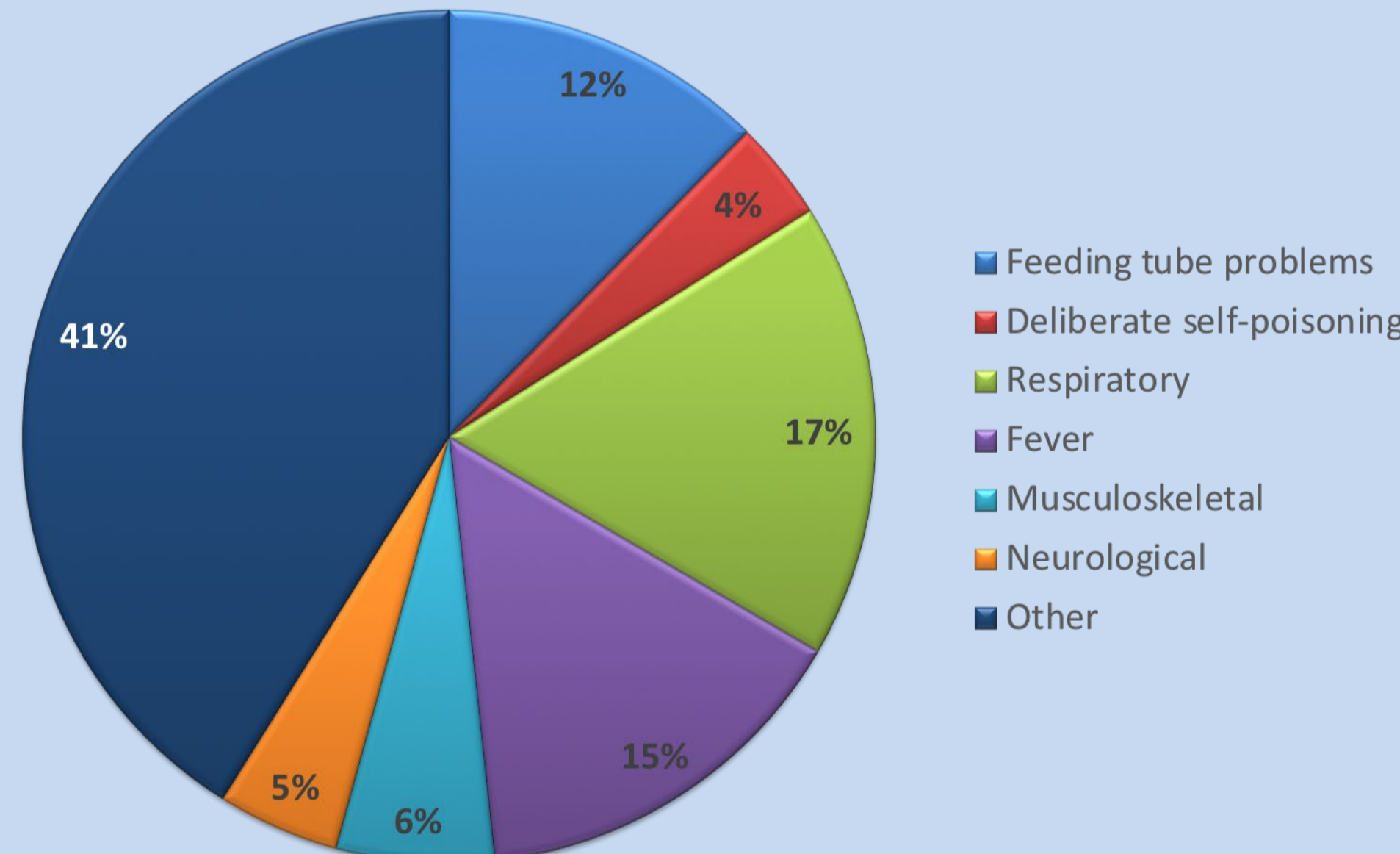


Figure 2: Reason for attendance

DISCUSSION POINTS

The majority of paediatric frequent attenders are younger than 3 years old, with far fewer adolescent patients than initially expected.

This cohort often have complex medical backgrounds or pre-existing conditions that contribute to attendances, which is reflected in the minimal existing research [3, 4, 5].

Increased admission rate could represent the higher morbidity carried by this group.

We postulate that increased patient and parent education could minimise some reattendances, particularly in those presenting with minor illness, which has previously been trialled in patients with asthma [6, 7].

Further allocation of resources towards areas identified as causing re-attendance (e.g. feeding tube problems) or support for 'high-risk' patient groups (ex-premature or oncology patients) could also decrease frequency of attendances.

CONCLUSION

We hope that by identifying trends within paediatric frequent attendee data we can target interventions to enhance patient and carer experience and avoid ED presentations that could be better managed elsewhere. Further research is required on this subject.

AIM

To report epidemiological information on the paediatric frequent attenders at an urban tertiary paediatric hospital, in order to identify trends within this group that could be targeted for intervention.

METHODS

- Retrospective analysis.
- Inclusion criteria: All patients (<16 years old) who presented on ten or more occasions within a 12 month period. No exclusion criteria.
- Data collection period: August 2015 to July 2016.
- Scanned electronic records were used to collect information on clinical presentation and demographic data for each attendance.

REFERENCES

- Dent A, Hunter G, Webster AP. The impact of frequent attenders on a UK emergency department. *European Journal of Emergency Medicine*. 2010; 17(6): 332-6.
- Hayhurst C, Smith S, Chambers D. Frequent Attenders in the Emergency Department. *RCEM Best Practice Guideline*. August 2017.
- Blair M, Poots AJ, Lim V, Hiles S, Greenfield G, Crehan C, Kugler B, Boreham C. Preschool children who are frequent attenders in emergency departments: an observational study of associated demographics and clinical characteristics. *Archives of disease in childhood*. Jan 2018; vol. 103 (no. 1); p. 19-23.
- D'Apollito V, Memo L, Selicorni A. Children with rare disease in Emergency Department. *Italian Journal of Pediatrics*. Jan 2017; vol. 43 (no. 1).
- Mueller EL, Hall M, Carroll AE, Shah SS, Macy ML. Frequent Emergency Department Utilizers Among Children with Cancer. *Pediatric blood & cancer*. May 2016; vol. 63 (no. 5); p. 859-864.
- Rangachari, P. A framework for measuring self-management effectiveness and health care use among pediatric asthma patients and families. *Journal of asthma and allergy*. 2017; vol. 10 ; p. 111-122.
- Craiu M, Stan IV. Tele-monitoring decreases unscheduled outpatient visits in pediatric patients with severe asthma. *Clinical and Translational Allergy*; 2017; vol. 7.

With thanks to Joanna Hooper at UHB Library for the literature search.