

## **Lay Summary**

*Streaming/Assessment of patients attending Emergency Departments. How to describe the different approaches used in order to be able to see what works best.*

UK Emergency Care Departments (EDs) have recently been given funding to encourage them to employ GPs working within or alongside an ED. In most cases, patients are assessed on arrival and are directed towards the most appropriate service, which could be a GP or an emergency doctor. This process is known as 'streaming'. How patients are streamed and who makes the decisions on streaming varies widely across the UK. We want to compare these different streaming methods to find out which are the safest, most effective and most efficient. To do this we need to be clear about the different ways streaming is done so we did surveys, interviewed staff, and visited EDs to build a clear picture of the different methods.

The most common approaches observed were:

1. front door streaming before patients register
2. streaming inside the ED
3. without streaming but GPs selecting patients to see

These approaches were often adapted to suit local circumstances such as skill mix and interests of GPs, department layout and patient demand levels.

Patients with non-urgent primary care problems were also sometimes referred to community primary care services. Use of this approach varied with local staffing, patient demand and availability of links to community primary care services.

Comparisons between the different pathways will help local clinical leads and managers in deciding which one(s) are most suitable for their local needs. In order to make comparisons, consistent descriptions of the streaming methods both within the ED and with community care are needed. Once these are in place, comparisons can take place across different sites which will allow performance to be measured and quality of service to be improved.