What evidence is there on the effectiveness of different models of delivering urgent care? A rapid review

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Plain English summary

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What was the problem/question?

The emergency and urgent care services in the NHS are under serious pressure. In response to this, NHS England reviewed these services and developed a plan to transform how they work so that patients can expect to receive ‘the right care, in the right place, first time’ (NHS England. High Quality Care for All, Now and for Future Generations: Transforming Urgent and Emergency Care Services in England – Urgent and Emergency Care Review End of Phase 1 Report. Leeds: NHS England; 2013).

What did we do?

We have looked at what we can learn from the research about five main topics that are related to the review by NHS England: (1) factors affecting demand for care; (2) telephone services for people with urgent health problems, such as the NHS 111 telephone service; (3) training ambulance crews (paramedics) so they can treat more people at home; (4) delivering care in emergency departments; and (5) developing networks so that different services work more closely together.

What did we find?

We found a great deal of research that could help in the development of emergency and urgent care services. Some of this research is of poor quality and it does not always clearly show benefits for patients. The research often does not measure the costs of providing these services.

What does this mean?

We have found three main areas that need more research: (1) understanding the reasons for increasing demand and how to provide patients with the right care at the right time; (2) better information on how best to develop urgent care networks so they plan services that meet the needs of local populations; and (3) assess the implications for expanding existing services, such as specialist paramedic services.
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This report

The research reported here is the product of an HS&DR Evidence Synthesis Centre, contracted to provide rapid evidence syntheses on issues of relevance to the health service, and to inform future HS&DR calls for new research around identified gaps in evidence. Other reviews by the Evidence Synthesis Centres are also available in the HS&DR journal.

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