

Development of Local Injury Units in the Republic of Ireland

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Definition

Local Injury Units (LIUs) treat patients with injuries that are not life-threatening and unlikely to result in serious long-term disability. LIUs will not treat medical conditions, pregnancy-related or gynaecological problems, injuries to the chest, abdomen or pelvis and serious head and spine injuries.

(EMP Report 2012 p362)

Background

As part of health service restructuring described in Securing the future of Smaller Hospitals : a framework for development (DoH, 2013) Local Injury Units as recommended by the EMP Report (2012) were formally proposed, although the first unit in Monaghan General Hospital predated the report being established in 2009.

Our Journey:

- Currently there are 10 units delivering high quality care to a defined cohort of patients.
- Defining a list of conditions suitable & unsuitable for treatment in LIUs (Figures 3 & 4).
- Ensuring patient safety is a key priority for the LIUs therefore, pathways have been developed to support onward transfer of patients who present that are outside the remit of LIUs (Figure 5).
- Media campaigns to inform the public of the change to the service being delivered locally (Figure 1 & 2).

Current work:

- Development of standardised documentation.
- Standardising naming of units.
- Aligning opening times.

Future work:

- Development of quality metrics for LIUs.
- Review staffing levels in-light of increasing attendances.
- RANP led services.
- Dedicated national training programme for LIU clinical staff.



Figure 1



Figure 2

Local Injury Unit Sub-group

The Local Injury Unit subgroup is a subgroup of the National Emergency Medicine Programme. The group aims to seek and develop constructive, critical opinion and expertise on a wide range of key nursing issues in relation to the delivery of quality, safe, timely and cost efficient nursing care to patients in need of their services. This group offers LIU nursing staff, through their nominated representative an opportunity to guide, shape and influence LIU emergency nursing in Ireland currently and into the future.

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Adult Patients:

Conditions Suitable and Unsuitable for Care in a Local Injury Unit

What the Local Injury Unit may treat	What the Local Injury Unit may NOT treat
✓ Suspected broken bones to legs from knees to toes	✗ Conditions due to medical illness e.g. fever, seizures, headache.
✓ Suspected broken bones to arms from collar bone (clavicle) to finger tips	✗ Suspected serious injury or inability to walk following a fall from a height or a motor vehicle collision. Patients with neck pain or back pain that started on the day of injury should attend an ED rather than a Local Injury Unit.
✓ All sprains and strains	✗ Injury causing chest pain, abdominal pain or shortness of breath
✓ Minor facial injuries (including oral, dental and nasal injuries)	✗ Serious head injury
✓ Minor scalds and burns	✗ Chest pain
✓ Wounds, bites, cuts, grazes and scalp lacerations	✗ Respiratory conditions
✓ Small abscesses and boils	✗ Abdominal pain
✓ Splinters and fish hooks	✗ Gynaecological problems
✓ Foreign bodies in eyes/ears/nose	✗ Neck/back pain
✓ Minor head injury (fully conscious patients, who did <u>not</u> experience loss of consciousness or have more than one episode of vomiting after the head injury)	✗ Pregnancy related conditions
	✗ Pelvis or hip fractures
	✗ Injuries due to self-harm

Appendix 3

Figure 3

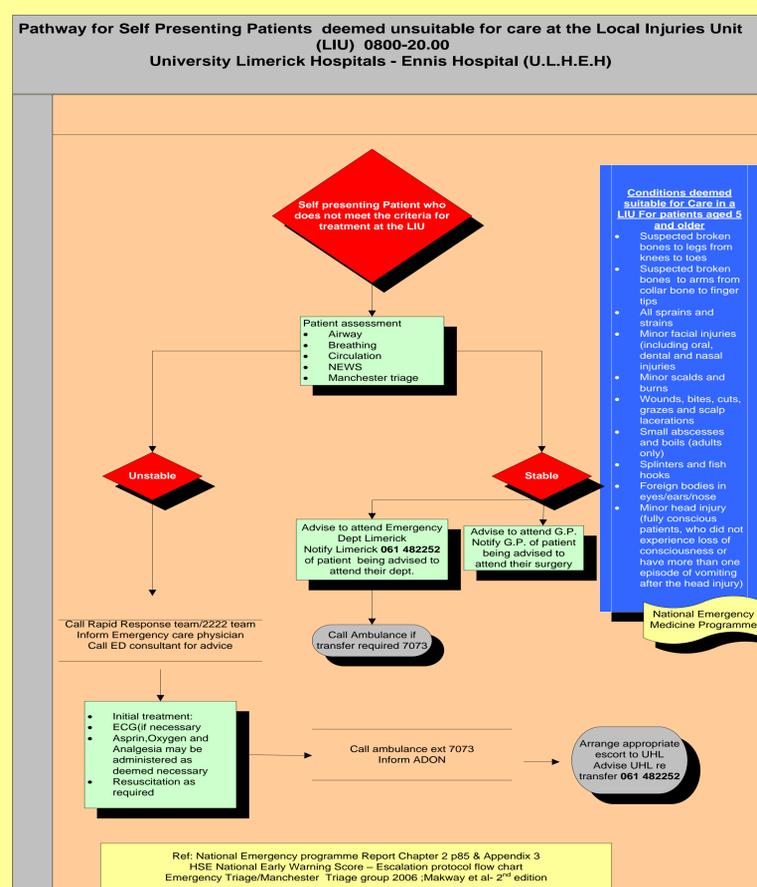


Figure 5

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Paediatric Patients:

Conditions Suitable and Unsuitable for Care in a Local Injury Unit

What the Local Injury Unit may treat	What the Local Injury Unit may NOT treat
✓ Any child aged five years or older with:	✗ Any child of any age with a medical illness e.g. fever, seizures, respiratory symptoms
✓ Suspected broken bones to legs from knees to toes	✗ Any child younger than five years
✓ Suspected broken bones to arms from collar bone (clavicle) to finger tips	✗ Any child aged five years or older with:
✓ Any sprain or strain	✗ Non-traumatic limp or non-use of a limb
✓ Minor facial injuries (including oral, dental and nasal injuries)	✗ Injuries following a fall from a height or a motor vehicle collision
✓ Minor scalds and burns	✗ Serious head injuries
✓ Wounds, bites, cuts, grazes and scalp lacerations	✗ Abdominal pain
✓ Splinters and fish hooks	✗ Gynaecological problems
✓ Foreign bodies in eyes/ears/nose	✗ Injuries due to self-harm
✓ Minor head injury (fully conscious children, who did not experience loss of consciousness or vomit after the head injury)	✗ Neck pain or back pain

Appendix 3

Figure 4