Trauma

**Silver Trauma Pathway: A New Gold Standard in Elderly Trauma Care**

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The elderly are increasingly represented in trauma. Low level falls are the leading cause of injury. Special attention should be paid to their altered physiological reserve and increased comorbid disease. The Whittington Hospital is a Trauma Unit in London.

A team of junior doctors, led by a senior trainee, conducted a retrospective audit. Using SMART framework, our goal was improving care of elderly trauma patients, measured against elderly trauma guidelines (2017). It was believed better compliance with the guidelines, particularly holistic aspects of elderly care, was achievable and realistic given available resources. The timeframe for our study was 10 months.

108 elderly trauma patients attended the Emergency Department (ED). Forty-six (43%) were admitted. Three patients received full trauma team assessment. While most received ECG, blood tests and imaging, 53% received a cognitive assessment, and few had assessment of anti-coagulation, movement status or treatment escalation plans (TEP). During inpatient stay, 38% had a tertiary survey, which led to 4 missed injuries. Excellent involvement of the multidisciplinary team (MDT) was noted. The results were presented to the Acute Medical Board, ED, the Frailty Group, and Trauma Rehab Group. Input was sought from the MDT to find solutions to issues raised. The results were presented to all stakeholders.

A new ‘Silver Trauma Pathway’ was initiated, which highlights undertaking a primary and secondary survey in low level trauma, and prompts assessment of features specific to elderly care: cognition, anticoagulation status, TEP and frailty. In addition, an inpatient pathway has been developed. Though uptake was slow, illustrating the difficulty in changing organisational culture, re-audit has shown improvement in elderly trauma care and clinician documentation. Our pathway was presented at the London Trauma Symposium, where it was awarded first prize for innovation, illustrating the power of a collaborative approach.

Leadership development

**The Oxford Emerging Leaders Programme: Development and Evaluation**

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Background Leadership is a core competency of medical professionals, including junior doctors.

In junior doctor representative committees at Oxford University Hospitals (OUH):

1. Motivation for engagement has historically dropped throughout the year
2. There is a perceived lack of formal leadership development opportunities available
3. There is an appetite for leadership training

To address these concerns the Oxford Emerging Leaders’ Programme (ELP) was developed.

Development The programme was developed from existing resources at OUH through interviews with potential participants.

The 4 month programme included 6 half-day workshops alongside team quality improvement projects (QIPs). 13 participants completed the course.