POSTER ABSTRACT

The affect of a pilot Discharge to Assess process on unscheduled care performance.

19th International Conference on Integrated Care, San Sebastian, 01-03 April 2019

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This study was conducted after introduction of a Discharge to Assess process to improve patient flow in Aneurin Bevan University Health Board in Wales which cares for 650 000 people. The main hospital sites for urgent care are at the Royal Gwent Hospital and Nevill Hall Hospital. The pilot was started in February 2017 at Nevill Hall.

Unscheduled care performance in Welsh Hospitals is reported daily to the Integrated Unscheduled Care Dashboard in the National Health Service. It is a traffic light reporting system of green (Level 1), yellow (Level 2), amber (Level 3) and red (Level 4) situation reports (SITREPs), where Level 4 reports greatest problems in escalation status of the hospital.

The Discharge to Assess process involved safely discharging medically fit patients from hospital within 48 hours of being deemed safe to discharge and avoided unnecessary prolonged hospital stays which result in harm to frail and elderly patients. It is common for prolonged hospital stay to result in increased frailty of patients and increased mortality from events such as hospital acquired pneumonias.

The independently reported Unscheduled Care Dashboard was analysed for hospital performance of Nevill Hall and Royal Gwent hospitals for May through to January inclusively for 2016 (prior to the pilot project) and the same months for 2017 (during the process). Data was also analysed for August 2018 after the pilot had ended.

Data on SITREPs was collected for all days during the study periods from the Unscheduled Care Dashboard and numerical data assigned, green 1, yellow 2, amber 3 and red 4. The data was analysed and paired for SITREPs on the same date for each month in the study period for 2016 and 2017 using paired t test.

The SITREP for Nevill Hall Hospital during the pilot period for seven of the nine months analysed was significantly improved compared to the SITREP before the pilot project (2016).

The SITREP for Nevill Hall Hospital was significantly better for the months studied for 2017 during the Discharge to Assess process compared to the SITREP for Royal Gwent Hospital (where there was no participation of the pilot) for same months of 2016 and 2017.

The pilot ended in July 2018. The SITREP data was interrogated for August 2018 for Nevill Hall Hospital and the findings were that the escalation status had reverted to that seen prior to the Discharge to Assess pilot study.
Edwards; The affect of a pilot Discharge to Assess process on unscheduled care performance.

This study shows significant benefits on a Discharge to Assess process on improving patient flow and improving hospital performance in managing unscheduled care.

**Keywords:** discharge to assess unscheduled care