

Optimising Care in the Older People's Decision Unit (OPDU)

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Introduction

- In November 2018, the Older Person's Decision Unit (OPDU) opened within Same Day Emergency Care (SDEC) at Southampton General Hospital.
- Patients are pulled from the emergency department to a dedicated 6 bedded area to be assessed by multidisciplinary professionals.
- Once the beds in the unit are full, we can no longer pull patients from ED.
- My proposed project involved initially looking at where barriers were to flow, before trying to reduce them.

Actions

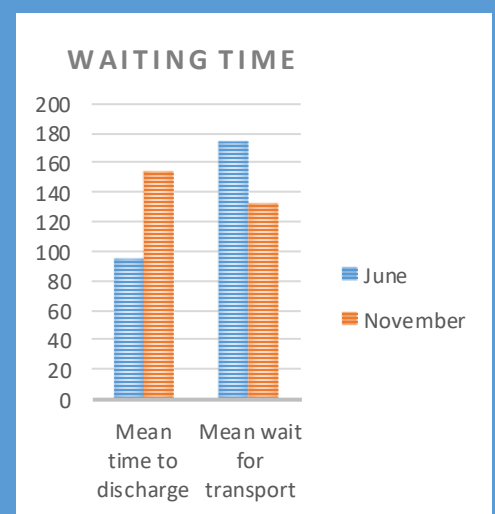
- The data was presented at a meeting of hospital management, different possibilities were discussed to improve flow and improve transport.
- While different options were explored by management, I asked the practitioners in SDEC to book transport at the earliest opportunity, before post take ward round.

Objectives

1. Identify the delays to admission or discharge from the OPDU
2. Reduce the delays to admission or discharge from the OPDU

Method

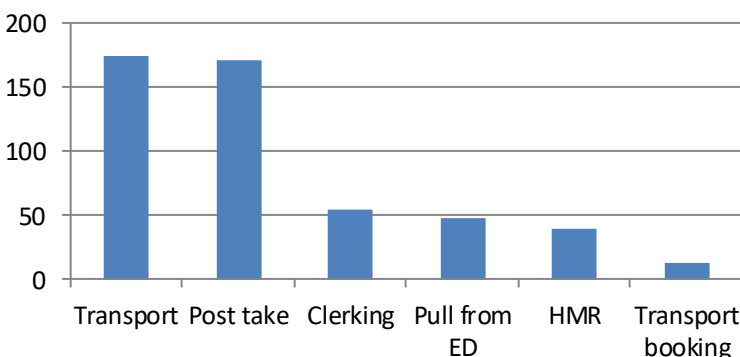
- I produced a process map to identify the stages between presenting to ED and discharge.
- I prospectively gathered data to add times to the process map in June 2019.



Summary of Data Collection

The initial data collection showed that the longest wait was for transport at 174 minutes (ranging from 1hr 40 mins to 5hr 11 mins) – transport was booked before post take ward round for the 1 hr 40m mins wait.

Pareto chart showing delays to discharge in OPDU, (minutes)



Discussion

- It is likely that the introduction of the Hospital to Home scheme has reduced the mean length of time patients wait for transport, as the scheme runs regularly throughout the day. For those patients who meet the eligibility criteria this has improved patient care and helped to free up beds within OPDU.
- The pressures on the hospital in November were greater than in June and this may explain in part why the total time waiting to be discharged was greater in November.
- Another limitation of this work was the difficulty in gathering accurate and complete data. As the data is not all available from the electronic systems in place, it must be collected prospectively which is arduous for the practitioners working in an already busy unit.

Summary

- The initial data gathering showed that the biggest barrier to flow in OPDU was time spent waiting for transport. I encouraged the practitioners in OPDU to book transport as early as possible. In addition, the data was presented to management and influenced change including the Hospital to Home scheme which started on the 7th October 2019.
- The data collected in November suggests that while the time waiting for transport to arrive has reduced compared to in June, the overall time to discharge patients has increased.