

Acute medicine clinics: the pathway to earlier discharge?

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Aims

To determine if the introduction of new acute medicine urgent access clinics in December 2017 have enabled doctors to discharge patients earlier from the acute medical take / acute medical unit (AMU).

Methods

A questionnaire was distributed to medical doctors (consultants/registrars/senior house officers; Fig 1) to determine whether they believed that the introduction of the new acute medicine urgent access clinic has supported them to:

- > discharge patients from the acute take earlier
- > expedite discharges from the emergency department (ED) that otherwise would have been admitted under medicine
- > expedite discharges from the post-take ward round (PTWR)
- > expedite discharges from AMU.

Results

Ninety-three percent of doctors felt the introduction of the new acute medicine urgent access clinic in December 2017 has allowed them to discharge patients from the acute take earlier (Fig 2).

- > Seventy-seven percent believe the clinic has helped expedite discharges from ED who otherwise would have been referred for admission under medicine (Table 1).
- > Seventy-nine percent believe the clinic has helped expedite discharges from the PTWR (Table 1).
- > Eighty-seven percent believe the clinic has helped expedite discharges from AMU (Table 1).

Conclusion

The vast majority of doctors felt that the introduction of acute medicine urgent access clinics have resulted in expedited discharges from the acute medical take. Given the recent winter pressures that have gravely impacted not only Warrington Hospital, but hospitals nationally with deferral of all non-urgent

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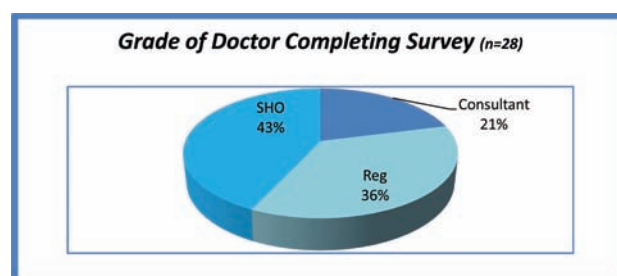


Fig 1. Grade of doctor completing survey.

inpatient elective care and routine operations in January 2018,¹ this is an important step to improve the current bed pressures. Furthermore, with the establishment of these clinics, Warrington Hospital is now striving towards the Future Hospital Commission's vision of 'care focused on prevention and recovery' which states: 'Patients should only be admitted to hospital if their clinical need requires it... Hospitals should promote ways of working that allow emergency patients to leave hospital on the same day'.² The new clinic provides an alternative avenue for patients, allowing early outpatient review as opposed to hospital admission. Less than 1% of patients have required admission directly from the clinic, demonstrating that patients are being selected and managed appropriately for review as an outpatient in the acute clinic. We plan to review admission rates on the acute medical take and length of stay on AMU in the coming months to see if there has been any change since the introduction of the clinics, and publish the results. ■

Conflict of interest statement

None declared.

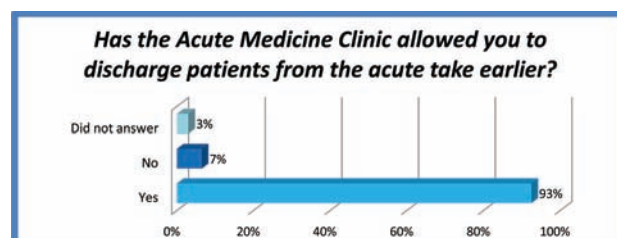


Fig 2. Results from the acute medicine clinic and earlier discharge.

Table 1. Survey results

Do you think the clinic has helped expedite discharges from emergency department who otherwise would have been admitted under medicine?	%
Yes	77
No	23
Did not answer	7
Do you think the clinic has helped expedite discharges from post-take ward round?	
Yes	79
No	21
Did not answer	14
Do you think the clinic has helped expedite discharges from acute medical unit?	
Yes	87
No	13
Did not answer	46

References

- 1 NHS England. *Operational update from the NHS National Emergency Pressures Panel*. NHS, 2018. <https://www.england.nhs.uk/2018/01/operational-update-from-the-nhs-national-emergency-pressures-panel/> [Accessed 14 March 2018].
- 2 Future Hospital Commission. *What the future hospital report means for patients*. London: RCP, 2013. <https://www.rcplondon.ac.uk/file/384/download?token=x5inVUN1> [Accessed 14 March 2018].