

# Ambulatory care: to bed, or not to bed

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## Aims

To improve access for patients to the Royal Berkshire Hospital ambulatory service and increase the number of same day discharges.

## Methods

The ambulatory care service was relocated from a ward bay area in the acute medical unit (AMU) to a designated, purpose-built ambulatory emergency care unit (AECU) in November 2017.

### Stage 1: Stakeholder engagement

AECU cannot accommodate patients requiring overnight admission which meant that consideration needed to be made to changes in working practices and operating procedures across clinical groups.

Formal and informal listening exercises were undertaken to understand stakeholder perspectives. The chief registrar (CR) regularly met with members of the trust executive and operations team and facilitated an ‘away day’ for front door clinicians to discuss the impact of relocating AECU. Additionally, the CR visited other ambulatory care services to identify and incorporate areas of good practice.

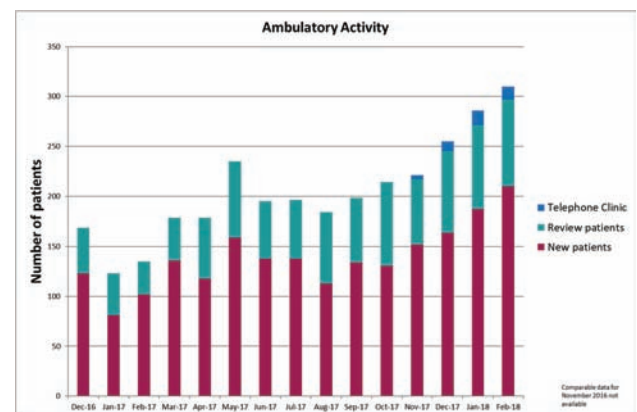
### Stage 2: Planning and relocation

To ensure proper functioning of the new AECU, a new standard operating procedure was developed by the CR in conjunction with mapping and streamlining other clinical pathways within the hospital. In order to practically facilitate the move, planning, including consideration of the impacts upon information technology switchboard, estates, workforce, pharmacy and radiology, was undertaken.

### Stage 3: Collaboration

Several associated projects ran concurrently to ensure collaboration between teams; in-reaching of the acute medicine consultants (APs) to the emergency department (ED) to ‘pull patients’ into AECU and APs offering a direct telephone service for general practitioner referrals. The CR led a team of junior doctors who analysed the clerking process in ED and have collaborated on introducing a single clerking pro forma. An enhanced focus on

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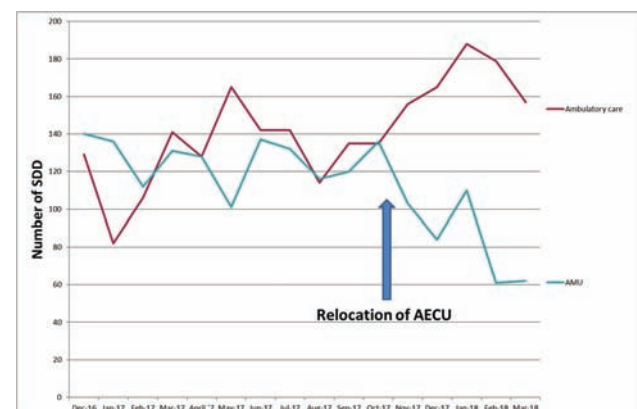


**Fig 1. Ambulatory activity.**

using data and measurement to drive change has also been incorporated.

## Results

The total number of patients being seen in an ambulatory setting has increased compared to the same time period for 2016/17 (Fig 1). The number of same day discharges has increased compared to the same time period in 2016/2017 while the number of same day discharges for AMU has almost halved (Fig 2). There has been no increase in incident reports, serious untoward incidents or



**Fig 2. Number of same day discharges.**

complaints. Patient feedback has consistently described the unit as 'excellent', 'friendly', 'professional' and 'caring'.

### Conclusion

The relocation of the ambulatory care unit and the catalyst this provided to wider system changes has enabled patients to access ambulatory care and ensure they are seen in a more appropriate

care setting. Having only relocated a few months ago, there are new challenges to face in order to ensure continued growth and development. ■

### Conflict of interest statement

Nothing to declare.