

Ambulatory Emergency Care

Test Days at

Warrington & Halton Hospitals NHS Foundation Trust

April/May 2013

Background

Ambulatory Care has been tried and tested in a discrete are of the AED, involving a multi-disciplinary team from AED, acute medicine and general practice

Tools Used

- AMB Score
- Experienced based design
- AEC Directory

SUMMARY OF DATA FOR TEST DAYS

APRIL: 20 patients – 1 day – 4 admissions

Mean time (target) mins	Ambulatory	Non-ambulatory	Control
Time to stream (95% ≤ 15 min)	11 (63%)	13 (59%)	36 (39%)
Time to assessment (50% ≤ 60 min)	42 (80%)	35 (88%)	93 (42%)
Time to discharge (95% ≤ 240 min)	107 (100%)	112 (96%)	192 (81%)

MAY: 28 patients – 2 days – 5 admissions

Mean time (target) mins	Ambulatory	Non-ambulatory	Control
Time to stream (95% ≤ 15 min)	22 (50%)	31 (46%)	25 (59%)
Time to assessment (50% ≤ 60 min)	67 (50%)	75 (60%)	85 (44%)
Time to discharge (95% ≤ 240 min)	142 (93%)	171 (97%)	177 (96%)

Improvement so far

- Clarified model of care
- Improved flow of non-ambulatory patients through AED and rest of hospital
- Highlighted different types of ambulatory patient attending weekend/weekday
- Identified need for peer review of accepted GP patients
- Identified need to modify AMB score each. Each test day resulted in 25% incorrect AMB scores.

Challenges

- Finding permanent location in Trust for ambulatory unit.
- Making a decision on local tariff
- Agreeing data capture and reporting

Results & Next Steps

- Formulate model
- Explore local tariff versus best practice tariff
- Agree physical location

