

Beyond the Hospital Walls: Retrospective Evaluations of the CTMUHB @Home Service Patient Outcomes



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Ysgol Meddygaeth

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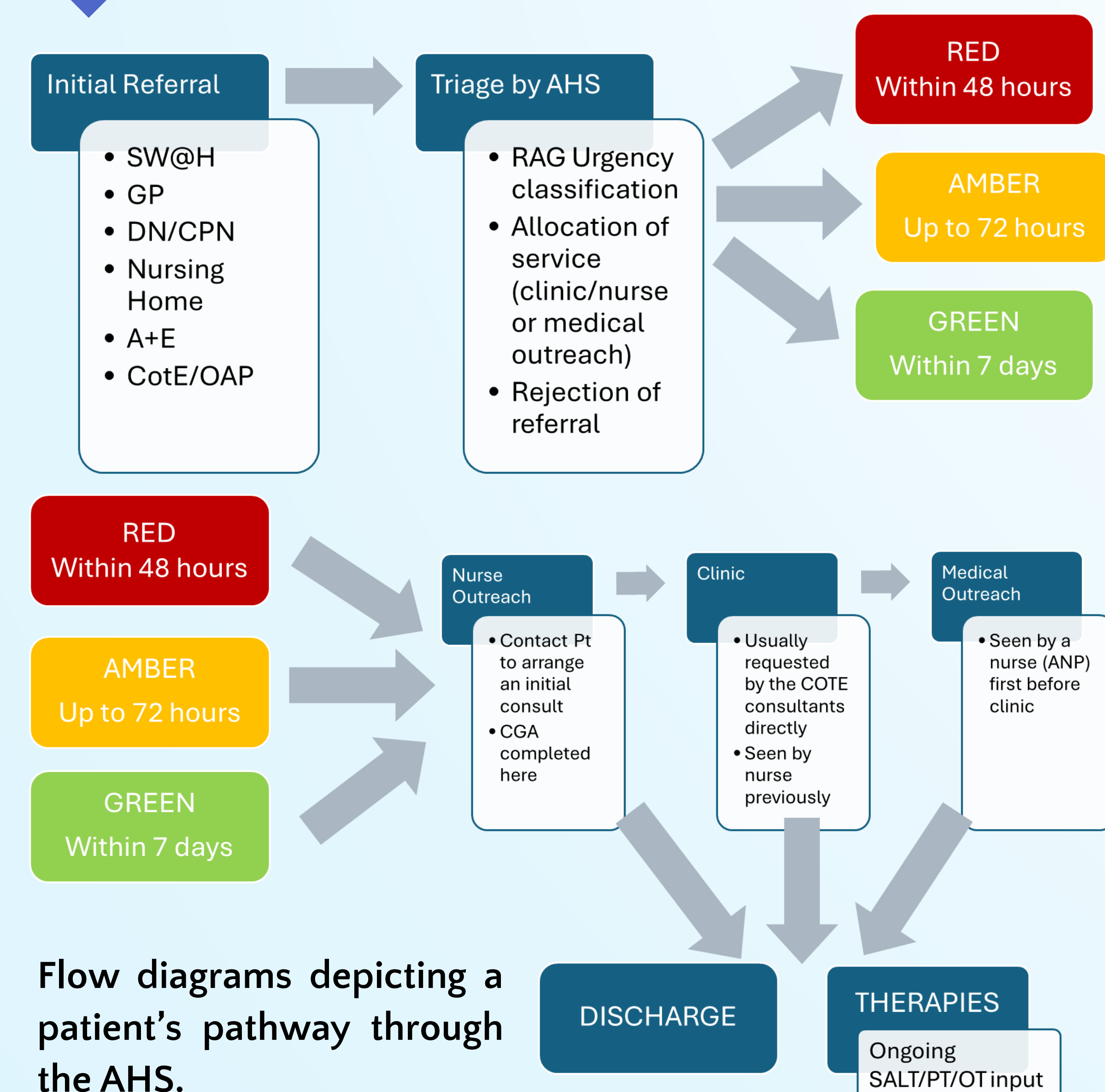
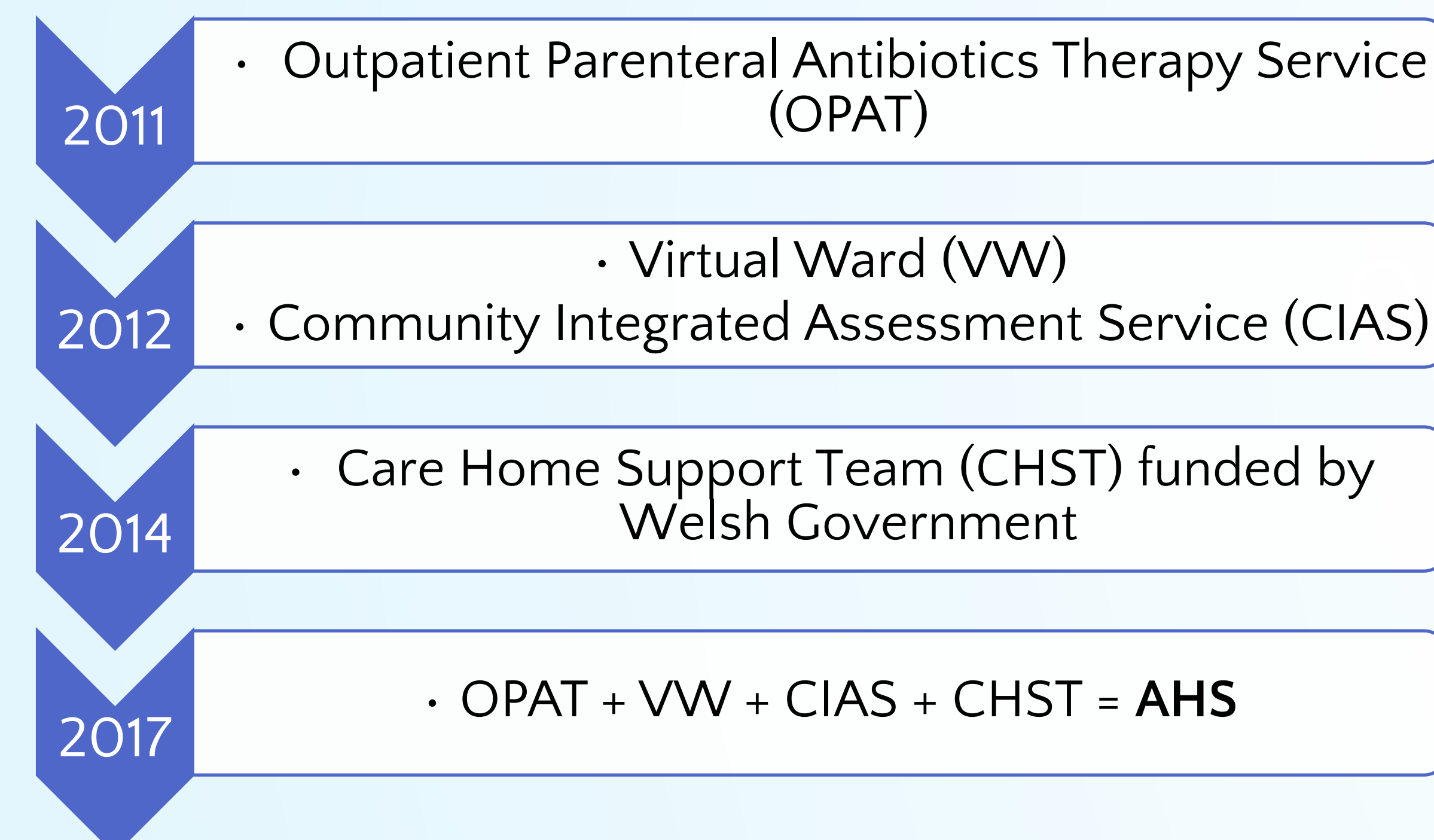
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About the CTM AHS

The Cwm Taf Morgannwg @Home Service (AHS) is made up of a team of Allied Healthcare Professionals (AHPs) working towards providing domiciliary and community-based care to patients at risk of hospital admission. Referrals to the Service tend to cover patients that have been categorised into several criterion describing deteriorating level of frailty, acute changes in gait & balance, complex polypharmacy & comorbidity, and weight loss where not felt to be cancer – all at risk of an acute admission.

The AHS as it stands today is made up of multiple facets which came together in 2017.



Flow diagrams depicting a patient's pathway through the AHS.

Methodology

Relevant data for both the Nursing/Medic register and the IV Antibiotics Administration service was collected from patient records with the use of Welsh Clinical Portal. This list of patients was derived from the register of nursing discharges from the respective months, compiled by the entire nursing team, organised by Miss Samantha Pendlebury, an RN within the team.

List of discharged patients "pulled" from nursing discharge register.

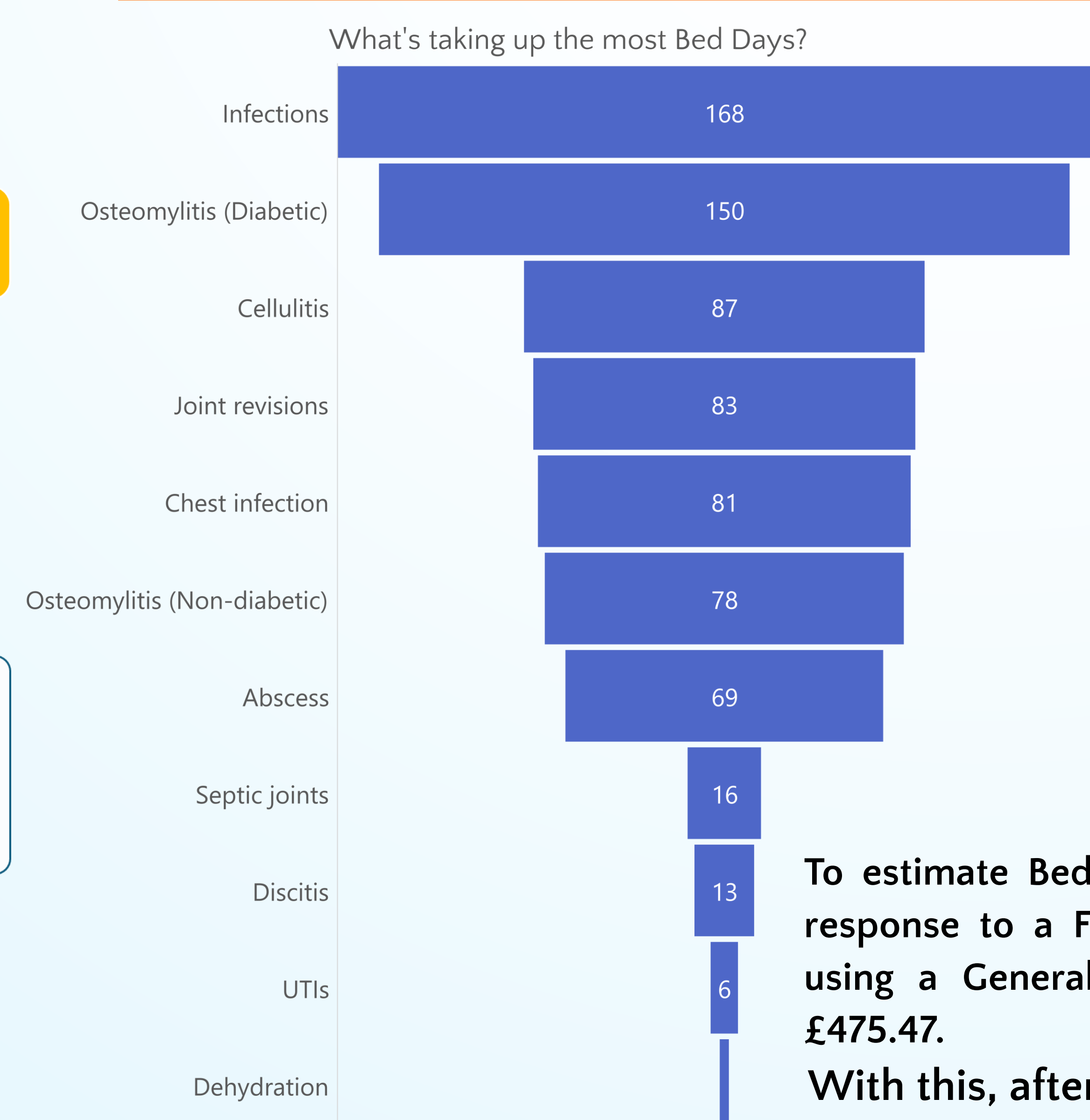
SO to go through documentation present on WCP. Patients with insufficient data/complex documentation highlighted.

SO and SP go through highlighted patients with the use of WelshPAS.

Source of admission and immediate outcome after AHS discharge noted, categorised, and counted.

Sankey diagrams generated for Nursing/Medic register, bar graph for IV Antibiotics Administration Service

Results



On average, **64.6%** of our patients have avoided an acute hospital admission within 2 weeks!

Scan for monthly (January to June 2024) Sankey Diagrams for insights into proportions.

To estimate Bed Day costs, we used Betsi Cadwaladr UHB's response to a Freedom of Information request which stated using a General Acute Medical Ward per day would cost £475.47.

With this, after finding that our IV Abx service has saved 753 Bed Days, £475.47 x 753 = **£358,028.91.**

Conclusion

This project has reviewed the patients from January to June 2024, and the AHS team now have a better idea of the population they cover. It has highlighted our strengths (i.e. most of our discharged patients have been stable at the time of data analysis, or that we've forwarded their referral onto a more appropriate specialty), and things we can explore to further improve the service (e.g. to further advertise the Service where appropriate, potentially a rebrand etc.)

Discussion

We aren't a Falls Clinic!

The very high proportion of patients having been referred to us for falls calls into question the awareness of healthcare professionals about the features of the AHS

Is our IV Antibiotics Service Cost-Efficient?

The saved cost calculated seems very positive, but it is still uncertain whether this is a conclusive measure of the service's cost-effectiveness. Currently there is no insight into the costs for nurse transport, supplies, shipping to a patient's residence, and potential wastage if the medications are no longer necessary

Future Projects!

It would be worth exploring the reasons why patients have fallen into the yellow and red categories, with the aims of shedding more light onto our performance, patient impressions of the Service, and the quality of referrals coming into the AHS.