

Acuity Audit - 2018

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Background

Analysis of bed occupancy to identify and define the care needs of the inpatient population across the STP footprint on the audit date – 15 May 2018

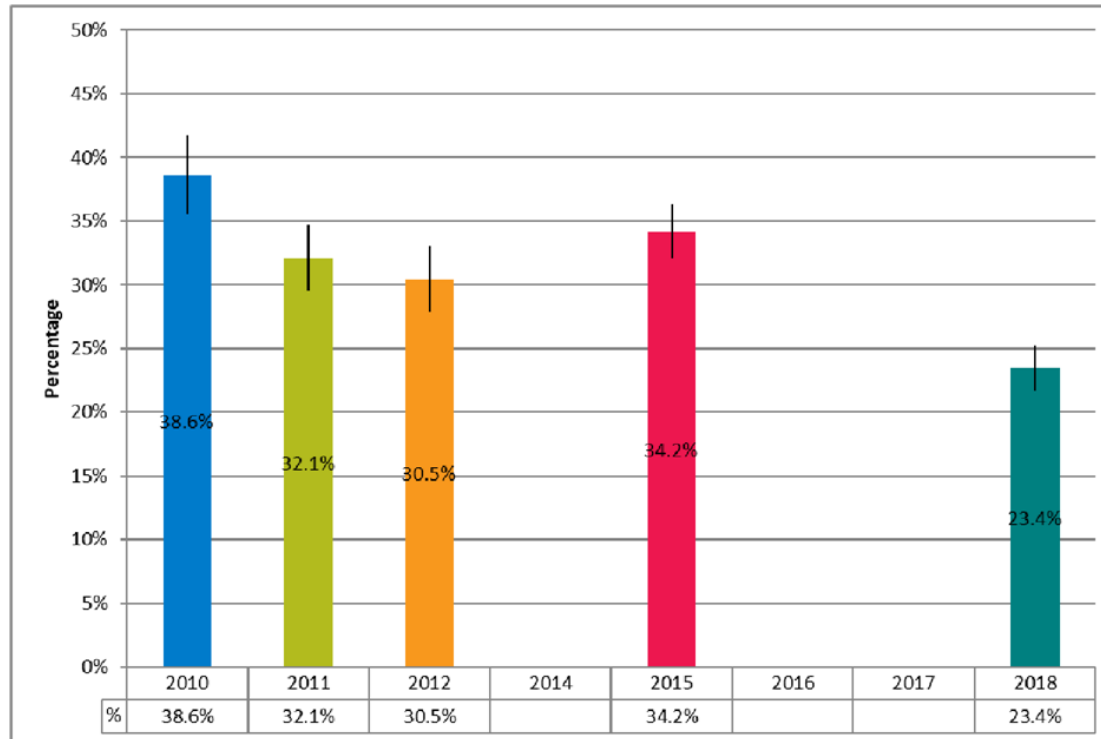
Fifth audit - 2010, 2011, 2012, 2015, **2018**

Key statistics

- 2,223 respondents
- 1,963 Acute/ 260 Community
- Occupancy levels 94.5%



Patients fit to leave by year



- In 2018, 23.4% of patients were fit to leave their hospital setting
- Significantly lower rate than previous audits

Patients 'fit to leave'

Acute Hospitals

Acute

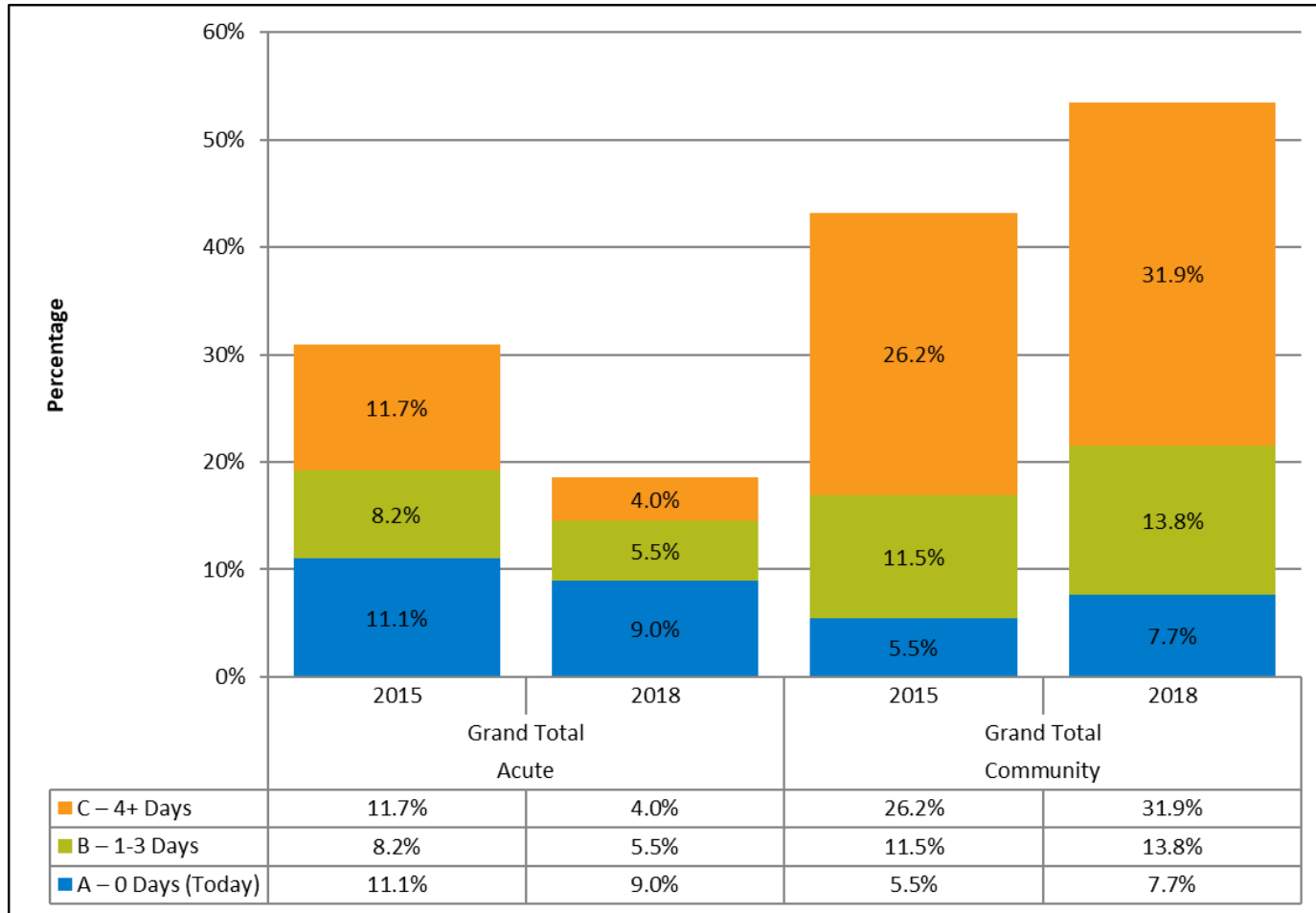
- Overall 2018 rates significantly lower than all previous audits
- 2018 significantly lower (n=381)
- Hard reset of processes conducted in Plymouth two week prior to audit

Community

- 2018 fit to leave increased on 2015 but not statistically significantly higher



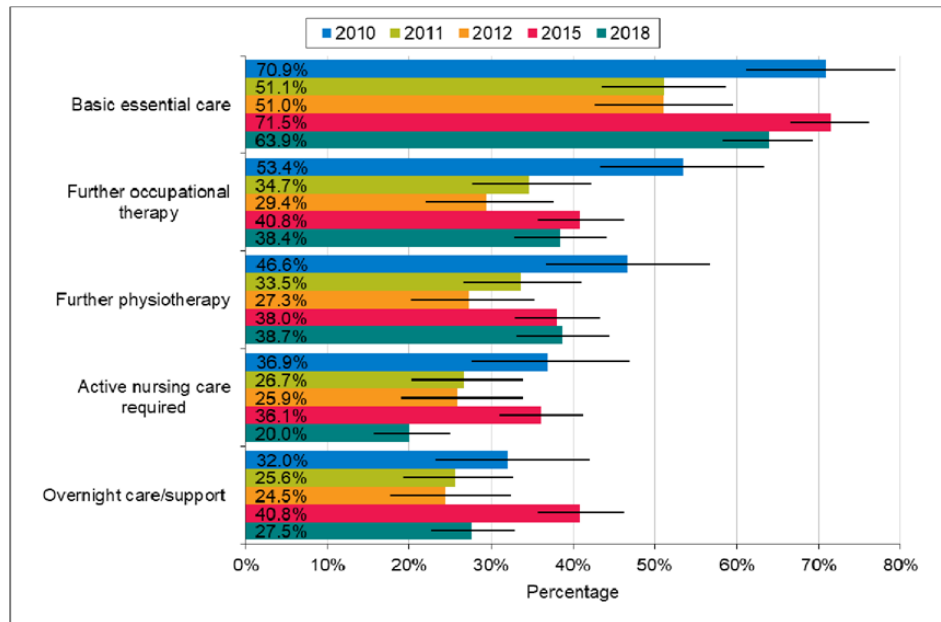
Number of days 'fit to leave'



‘Fit to leave’ - Reason for delay

- Overall percentage and number of patient delays were lower
- Health or social care package
- Awaiting community Hospital placement
- Family involvement/choice

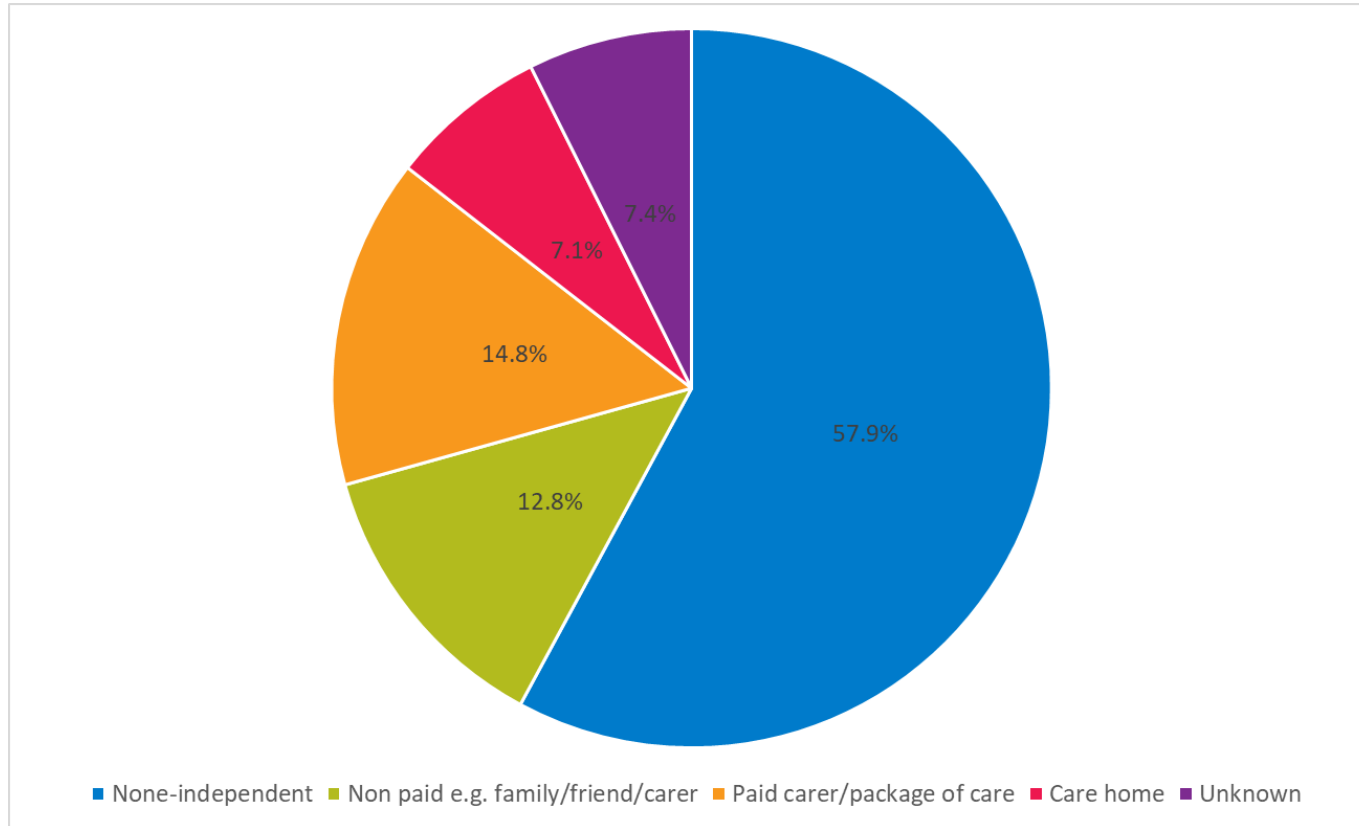
Ongoing needs



The following care needs of patients who were medically fit to leave the care setting and who could be managed at home with support were

- Basic essential care (63.9%), Further physiotherapy (38.7%), Further occupational therapy (38.4%)
- Fairly static profile – showing levels of complexity

Caring support prior to admission



- Majority of patients had no caring support prior to admission
- Higher levels of support for community hospital patients than acute hospital patients

Audit Updates

2018

- Caring support prior to admission
- Torbay – additional Sunday audit
- Morecambe Bay
- End of life

Other consideration

- 160 patients were fit to leave for 4+ days, 48 did not have a discharge date set
- Discharge date – 73.6% of patients had a discharge date
- Age of patient
 - Acute – 71
 - Community – 82
- Route of admission
 - Admission to Acute settings were unplanned
 - Most patients in Community Hospitals had been transferred from another hospital



Recommendations

Particular attention should be given to indicators which correlate to patients remaining in a hospital bed when they could be cared for in an alternative setting. These indicators include

- Older age
- Unplanned admission
- Identifying patients experiencing dementia or cognitive impairment
- Receiving care prior to admission

The audit did identify some areas that require further analysis which include

- End of life care
- Admission from care homes
- Dementia diagnosis



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presentation prepared by Donna Lockett – Public Health
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The current report and previous
reports can be found on Devon's
Health and Wellbeing Board's
website

<http://www.devonhealthandwellbeing.org.uk/library/annual-reports/acuity-audit-2018>

