

P1875
Poster Session VI
Electronic and economic resources in infectious diseases
INNOVATIVE USE OF A MODERN ARRAY OF ELECTRONIC TOOLS USING AVAILABLE RESOURCES TO RUN A TWIN SITE BASED OUTPATIENT PARENTERAL ANTIBIOTIC THERAPY [OPAT] SERVICE IN NORTHWEST ENGLAND

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First enter the hospital number and click Find Patient:

AB61245 Find Patient

Patient Details	
First Name	Jack
Surname	Red-Blister
Date Of Birth	30/08/1965
Address	57 CLIFTON DRIVE LYTHAM ST. ANNES LANC FY8 1AL
NHS Number	6497085041
Name of Primary Consultant	

The details above are from the last admission held in MaxIMS, amend details if necessary before continuing.

Referral Details	
To	Guleri Dr (BFWH)
From	PCAU WARD

OBJECTIVES:

A community based outpatient parenteral antibiotic therapy [OPAT] service offering clinic and home based infusions to patients is a futuristic model of NHS commissioning in UK taking quality care closer to the patient in community. Blackpool Teaching Hospitals and community service provide health services to a population of 440,000 residents in northwest England. The service includes a hospital based team of microbiologists, specialist nurse and pharmacist and community clinic based team of rapid response nurses. The service efficiencies, patient safety and governance relies on easy and user friendly referral of patient, review of patient and patient management plan, prescriptions, venous access including central line [PICC] for selected patients, weekly review of patients, blood monitoring, etc. All this requires user friendly system of communication. The web designer team in hospital have team worked with OPAT team and created a modern array of electronic tools to enable communication.

METHODS:

OPAT team and hospital web designer team discussed the team requirements. After few sessions fine tuning the formats/contents of electronic tools, they offered an array of tools. This includes: e-referral from GP desk top [EMIS system] or trust intranet to the microbiologist (received on smart phones); e-referral acceptance auto-email with read only patient details on click of a button; e-discharge of patient; e-prescription; e-patient management plan; e-patient review & end of treatment report; e-governance check list; etc. These are received promptly by all OPAT team members.

RESULTS:

The OPAT service has evolved over last 18-months [Jun 12 – Nov 13]. These electronic tools have played a significant role in managing patient recruitment, monitoring and follow up between the hospital and community teams.

To be presented.

Analysis of data over 18-months [June12 – Nov13] reveal 169 patients recruited to OPAT [average 9.38/month] and 2068 IV bed days saved [average 114.8 days/month]. Indications included cellulitis 42%[71/169]; Diabetic foot / wound infections 13.6% [23/169]; Deep abscesses 11.2%; UTI 10%; followed by prosthetic joint infections, bronchiectasis, endocarditis, etc. Longest duration of treatment 121 days and oldest patient 92-years.

CONCLUSIONS:

NHS is experiencing financially challenging times. Funding any electronic systems is prioritised and difficult. However, the patient safety, governance and good communication between teams based at two locations [acute hospital and community clinic] was crucial to running the newly piloted OPAT service. Web designer team used existing IT resources and systems to create an excellent array of modern tools for the OPAT service. These will be worth sharing with the OPAT service community. A picture of e-referral form is attached.