The Introduction of an Acute Medical Assessment Clinic
Hoare, L

Problem
The NNUH AMU admits 70-100 patients daily. Admissions were increasing annually with no increase in bed capacity. 25% of patients were discharged on day of admission.
We aimed to reduce admissions by establishing an Acute Medical Admissions Clinic to assess patients on an outpatient basis, negating the need for inpatient admission.

Findings
436 patients seen in Clinic in 6 months
86% (373/426) discharged from Clinic
14% (63/426) required admission

Method
Patients were selected for Clinic using our pre-existing referral system – a designated triage nurse – and deemed suitable if they had an Early Warning Score of 0 or 1 and a presenting complaint or likely diagnosis included in the Directory of Ambulatory Emergency Care for Adults.
The patient was assessed by a nurse who performed basic observations, ECG and blood tests, then reviewed by a Doctor who arranged investigations and treatment, admitted or discharged the patient, and arranged any necessary follow up.

This shows a significant reduction in admissions - prior to Clinic all of these patients would have been admitted as inpatients.

Only 7% (29/426) of patients were admitted to hospital within 30 days of their clinic attendance.

Conclusions
Clinic has been shown to significantly reduce medical admissions. This service should continue to expand to further streamline medical admissions. By reviewing patients on an outpatient basis on an outpatient tariff, we can further improve our Acute Medicine service by reducing costs.

Future Recommendations
Initially, this project was run thrice weekly by Consultants. Over the course of this project, we introduced Registrar-led clinics with Consultant supervision to improve training opportunities as well as to increase Clinic capacity. We have since increased the clinic to a 5-times weekly service and plan to further expand to a 7-day service in the near future.