Pan-London Day of Care Survey: common reasons for in-hospital delays
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A Introduction
The NHS is working at high bed occupancy levels on a background of limited funding and staffing. Patients whose hospital stays are prolonged unnecessarily, contribute to daily pressures on bed availability leading to delays in care and access, thereby impacting on normal hospital functioning. Developing a better understanding of reasons for delays will help focus change and allow for targeted improvement actions. This study describes the largest survey of in-patient beds in 23 hospitals in London.

B Method
Assessing inpatient delays in acute hospitals across London was done through a Day-Of-Care Survey (DoCS). This assessed whether patients met criteria to be occupying acute hospital beds, as well as identifying reasons for delays for every patient, which were then categorised. 23 of 27 London hospitals participated during two weeks in October/November 2017. Surveys were carried out by trained reviewer teams a each site between 8 and 10am and taking 1 to 3 hours for completion. Data was checked and entered anonymously, with site reports with recommendations produced.

C Results
- Of 9004 beds surveyed, a total of 7856 patients were included (excluding 800 patients for discharge)
- 76% (5937) of patients met criteria and 24% (1919) of patients did not meet criteria for on-going inpatient care
- In terms of AMU/CDU wards, 14% of patients were delayed (136/967)
- For 34% of patients who did not meet criteria, reasons were within the hospital’s control and for 61% reasons were due to wider system issues (5% other)
- The 8 top reasons equalled 67% of all reasons for delays; 4 reasons within hospital control and 4 wider system issues

D Conclusion
- A significant proportion of patients occupying acute beds could be managed more effectively or in a different setting, with a considerable number delayed in CDU/AMU
- Reasons within hospital control accounted for more than 1/3 of delayed discharges
- Patients should be assessed at point of entry, both by allied health professionals and social/community services
- To reduce these delays, an on-going systematic approach is needed to target improvements to release capacity
- It is essential multi-professional teams are adequately supported across the patient pathway

E References