

Outpatient Parenteral Antibiotic Therapy (Semple 2012)

Inputs

Investment

- › Funding
- › Pilot project set up costs **£125,000**
- › Running / operational costs
£3123,307

Resources

Direct

- 1 WTE CNS Band 7
- 2 WTE CNS Band 6
- Clinical Supplies
- Travel

Indirect

- Clinical lead: Consultant in ID
- Out of hours cover by ID ward nurses
- Antimicrobial Pharmacist
- › Office supplies
- › Ward medical team
- › Administrator support

The Service

Journey through Service

- › Accepted patients are put on an individualised OPAT pathway and receive their care from staff with specialist knowledge and technical expertise in IV antimicrobial therapy in the community.

Referral routes

- › Patients preferring an alternative to inpatient care are referred from acute inpatient services and primary care across GG&C HB

Activity/ delivery

- › In 2011/12, 377 referrals were received. 321 patients were assessed as suitable for OPAT
- › 5 day 8am-4pm service
- › Patient assessment
- › Patient education
- › Nurse led Skin & Soft Tissue Infection Service
- › Weekly Consultant Clinic
- › Weekly MDT virtual ward round
- › Routine blood monitoring
- › Investigations e.g x-rays CT scans, ECGs etc.
- › Prep. & admin. of IV therapy
- › Database Audit

Specialist technical expertise

- › Cannula placement/maintenance
- › Venepuncture and care of long term intravenous devices
- › Tissue viability / Wound care

Summary of Benefits

For service users

- › Patients requiring intravenous antimicrobial therapy have the choice of receiving their treatment in the community and receiving their care from nurses with specialist knowledge and technical expertise.
- › Patient survey's indicate 100% patient satisfaction with the service
- › By all measures, the service is both safe and effective

For healthcare system

- › Costs are avoided by keeping patients out of hospital: the service avoids 4,767 occupied bed days through admission avoidance, low readmission rates and infection (MRSA) prevention
- › Depending on the costs of an inpatient bed, the **costs avoided range £1, 773,324 - £3,408,405 indicating the OPAT service saves at least £1,667,693**

Opportunities for service development

- › By increasing investment in the OPAT service by an additional £250,000, the service could be expanded to 7 days. This would allow a further 400 patients to be received into the service avoiding GG&C HB £2,138,000 in occupied bed days. The OPAT provides an efficient, clinically effective and safe alternative to inpatient care: **for every additional £1 invested in the service, GG&C HB can potentially save £8.55**