Out-Patient and Home Parenteral Infusion Therapy (Whitwam 2015)

Inputs

Investment

Running/ operational costs (yearly)

£290,502.61

Resources

Direct

- > 1 WTE band 7 Lead nurse
- > 3 WTE band 6 OHPiT nurse
- > 1 WTE band 3 Healthcare assistant
- > 0.2 WTE Antimicrobial Pharmacist
- > Floor space usage
- > Pool car service
- > Drug costs
- > Clinical consumables

Indirect

- > Consultant Microbiologist
- > NHS 111 service
- > District nursing service

The Service

Journey through Service

The service can deliver IV antimicrobial therapy in the community as opposed to in the acute hospital setting for patients who have an acute or chronic infection.

Practical support

The referring clinician maintains clinical responsibility throughout the course of OHPiT treatment, though the day-to-day management will be coordinated by the OHPiT team which adopts a multidisciplinary approach with input from the Consultant Microbiologists and the Antimicrobial Pharmacist.

Referral routes

Referrals to the service can come from either the primary or secondary care setting.

Activity/ delivery (12 months)

- > 1720 hospital inpatient bed days avoided
- > 658 of the 1720 were complete admission avoidance
- > **1062** of the 1720 were through facilitation of early discharge

Summary of Benefits

For service users

- Promotion of patient choice
- Independent / normal daily activities may be possible
- No separation from family
- Reduced risk of healthcare acquired infections
- Increased patient satisfaction

For healthcare system

- 24hr provision of parenteral therapy for £168.90 (cf £267.20 av. inpatient costs) 1720 hospital inpatient bed days avoided
- > Total = £396,862 (£106,359.39 saving)
- Reduction in length of hospital stay
- > Reduction in surgical waiting times
- > Decreased pressure on emergency departments
- Reduced hospital acquired infection rates
- Enhanced multidisciplinary working across Primary and Secondary care

Opportunities for service development

If the OHPiT service continues to deliver at the activity level achieved, this indicates a very cost effective alternative to the usual inpatient care delivery. Through the utilisation of the OHPiT, the Trust can create capacity within the hospital to see more complex / critical patients.







