



The British Society for
Antimicrobial Chemotherapy



OPAT
Outpatient Parenteral
Antimicrobial Therapy

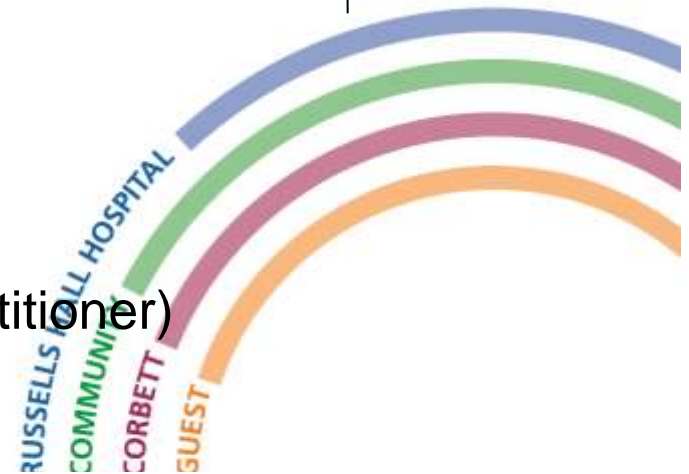
A Successful NHS Provided Service

Sister Kate Owen

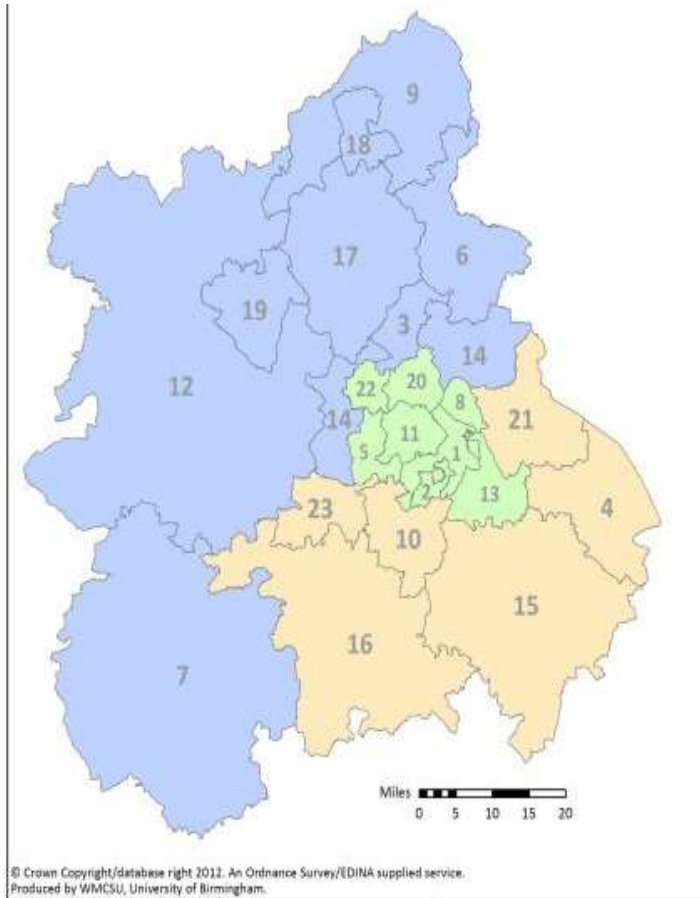
Dudley Group NHS Foundation Trust Outpatient Parenteral Antibiotic Therapy

Horses for courses –
one model don't fit all!
A successful NHS
provided service

Kate Owen (District Nurse Specialist Practitioner)



Dudley



- Second largest town in England
- Population 313,000

Dudley OPAT Service

- Following the integration of the acute and community services as a Foundation Trust and in line with Transforming Community Services, OPAT was launched
- Joint project between hospital and community staff
- Launched in January 2012
- Truly integrated pathways
- Weekly ‘virtual ward rounds’
- Bimonthly operational meeting

Dudley OPAT Service

The Team:

Hospital Staff

- Acute Medical Unit consultant and registrars
- Acute Medical Unit nurses
- Pharmacy
- Microbiology

Community Staff

- Community nurse IV team
- Senior nurses with NMP
- Community clinic

Policies and Pathways

Overarching OPAT policy

Strict inclusion criteria

Ratified specific pathways for:

Cellulitis, Complex UTI (including ESBL and pyelonephritis)

Diabetic foot ulcer and osteomyelitis

Development of new pathways:

Pseudomonas chest infections in patients with bronchiectasis

Future pathways

Discitis, Septic arthritis, Osteomyelitis, Infective endocarditis,

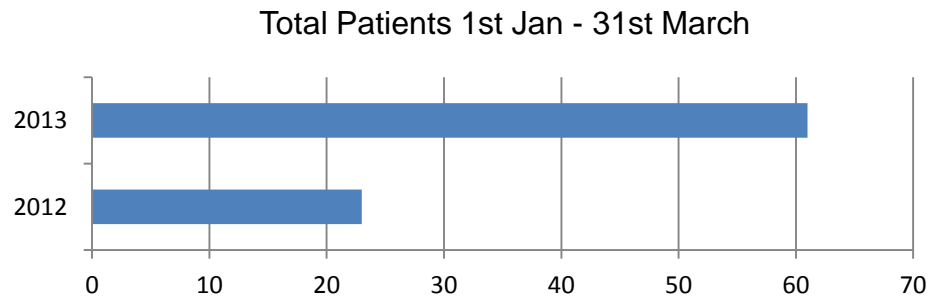
Performance

From January 2012 to March 2013

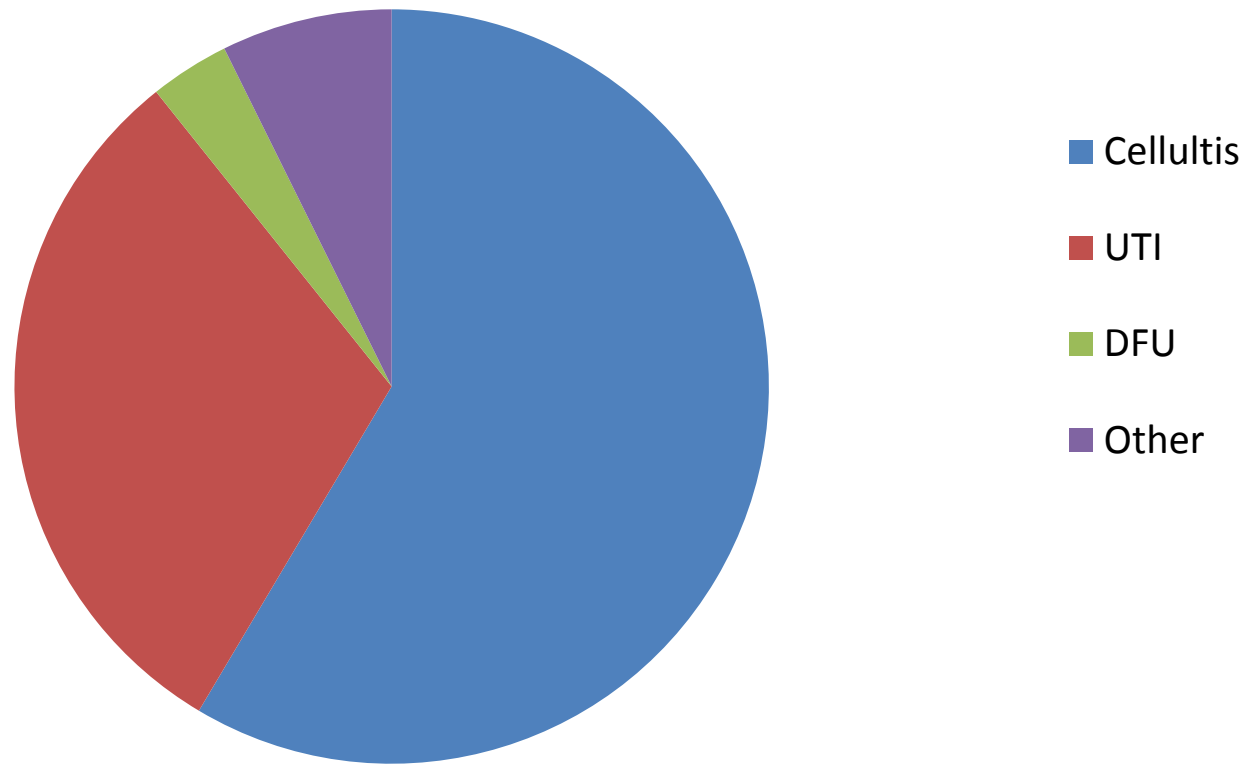
Over 1,700 bed days saved, more capacity in hospital

Over 250 patients treated with high level of patient satisfaction, only 3.6% patients readmitted

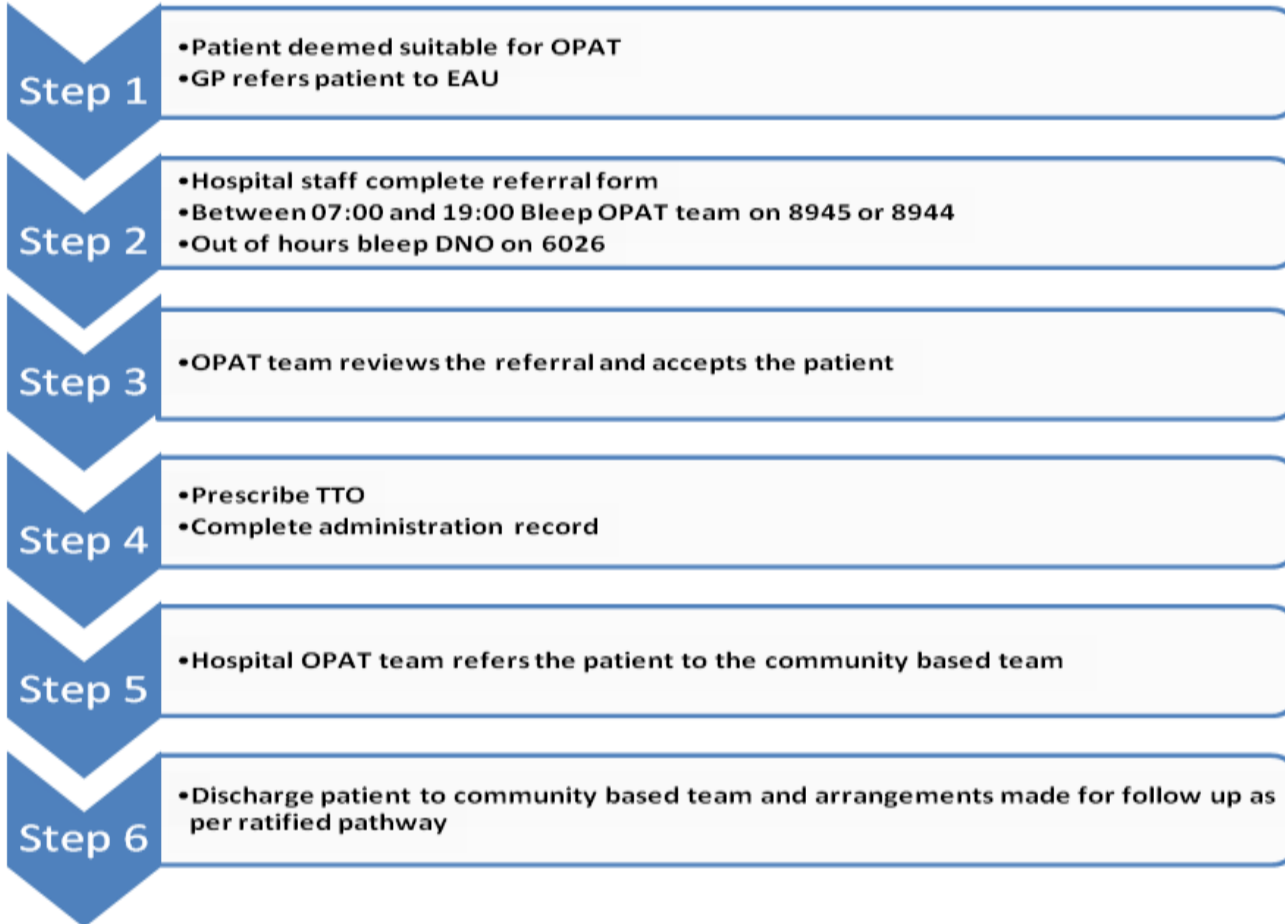
In the quarter Jan to March, we have seen 3 times as many patients as this time last year



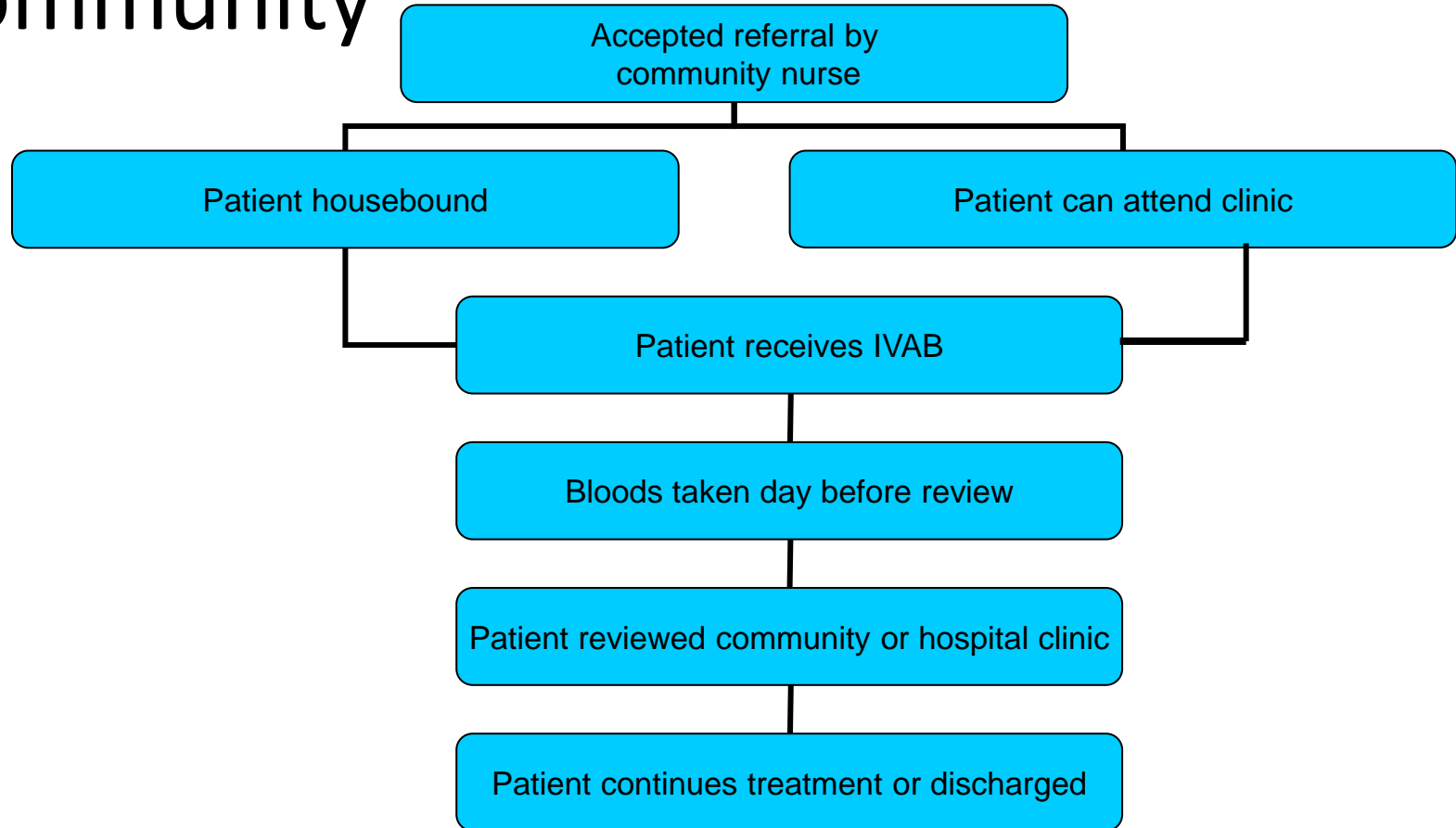
Diagnosis



A Patient Journey – hospital



Patient journey continues in the community



Success and Challenges

High level of patient satisfaction

The Internet Hub is updated regularly and as pathways are ratified. The antibiotic choice is explained

Continually working to improve communication to all of staff:
ward nurses / doctors / ward clerks / commissioners / GP staff

Work with neighbouring Trusts to support patients

Vascular access was a challenge for some patients however the use of PICC, Midlines and Winged Infusion Devices has helped

Conclusion

Excellent working relationship between hospital and community staff.

Shared aims and objectives to improve patient experience and facilitate capacity within the hospital.

Safe working, pathways developed, success going from strength to strength!