How can frontline expertise and new models of care best contribute to safely reducing avoidable acute admissions? A mixed-methods study of four acute hospitals

Jonathan Pinkney,1* Susanna Rance,1,2 Jonathan Benger,3 Heather Brant,4 Sian Joel-Edgar,5 Dawn Swancutt,1 Debra Westlake,1 Mark Pearson,6 Daniel Thomas,1 Ingrid Holme,7 Ruth Endacott,8 Rob Anderson,6 Michael Allen,6 Sarah Purdy,4 John Campbell,6 Rod Sheaff9 and Richard Byng1

1Centre for Clinical Trials and Population Studies, Plymouth University Peninsula Schools of Medicine and Dentistry, Plymouth, UK
2Institute for Health and Human Development, University of East London, London, UK
3Department of Nursing and Midwifery, University of the West of England, Bristol, UK
4School of Social and Community Medicine, University of Bristol, Bristol, UK
5University of Exeter Business School, Exeter, UK
6University of Exeter Medical School, Exeter, UK
7Faculty of Social Sciences, University of Ulster, Londonderry, UK
8Faculty of Health and Human Sciences, Plymouth University, Plymouth, UK
9School of Government, Faculty of Business, Plymouth University, Plymouth, UK

*Corresponding author

Declared competing interests of authors: none

Disclaimer: This report contains transcripts of interviews conducted in the course of the research and contains language that may offend some readers.

Published January 2016
DOI: 10.3310/hsdr04030
Plain English summary

The safe reduction of avoidable acute admissions
Health Services and Delivery Research 2016; Vol. 4: No. 3
DOI: 10.3310/hsdr04030

NIHR Journals Library www.journalslibrary.nihr.ac.uk
Plain English summary

Hospital emergency departments are becoming more crowded every year, with higher numbers of accident and emergency (A&E) visits, and pressures on staff and beds. The Avoidable Acute Admissions (3A) study looked at four hospitals in South West England, focusing on how decisions were made about admission and discharge. Researchers observed ways of working, measured patients’ waiting times and talked to professionals, patients and carers about their experiences. Most patients reported positive experiences overall. Relatives were more critical about limitations in nursing care. Some wanted patients to be admitted because of difficulties with their home care. A common complaint at all sites was the lack of explanation about long waits and delays in discharge. Influences on decision-making included pressure on staff to keep within the 4-hour target for moving patients out of A&E; professionals’ ability to balance risk and safety; and patients’ home care situations. The four hospitals were trying new ways to prevent unnecessary admissions. Some of the most effective were observation wards where patients could stay for several hours without 4-hour target pressure; ambulatory units where staff and patients did not have the expectation of overnight admission; a hospital service communicating with general practitioners about patients they wished to send to A&E; teams linking patients with community services; and specialist teams finding care outside hospital for elderly patients. Senior doctors may play important parts in avoiding admissions, not just by supporting decision-making at the A&E.
Health Services and Delivery Research

ISSN 2050-4349 (Print)
ISSN 2050-4357 (Online)

This journal is a member of and subscribes to the principles of the Committee on Publication Ethics (COPE) (www.publicationethics.org/).

Editorial contact: nihredit@southampton.ac.uk

The full HS&DR archive is freely available to view online at www.journalslibrary.nihr.ac.uk/hsdr. Print-on-demand copies can be purchased from the report pages of the NIHR Journals Library website: www.journalslibrary.nihr.ac.uk

Criteria for inclusion in the Health Services and Delivery Research journal

Reports are published in Health Services and Delivery Research (HS&DR) if (1) they have resulted from work for the HS&DR programme or programmes which preceded the HS&DR programme, and (2) they are of a sufficiently high scientific quality as assessed by the reviewers and editors.

HS&DR programme

The Health Services and Delivery Research (HS&DR) programme, part of the National Institute for Health Research (NIHR), was established to fund a broad range of research. It combines the strengths and contributions of two previous NIHR research programmes: the Health Services Research (HSR) programme and the Service Delivery and Organisation (SDO) programme, which were merged in January 2012.

The HS&DR programme aims to produce rigorous and relevant evidence on the quality, access and organisation of health services including costs and outcomes, as well as research on implementation. The programme will enhance the strategic focus on research that matters to the NHS and is keen to support ambitious evaluative research to improve health services.

For more information about the HS&DR programme please visit the website: http://www.nets.nihr.ac.uk/programmes/hsdr

This report

The research reported in this issue of the journal was funded by the HS&DR programme or one of its preceding programmes as project number 10/1010/06. The contractual start date was in July 2012. The final report began editorial review in February 2015 and was accepted for publication in August 2015. The authors have been wholly responsible for all data collection, analysis and interpretation, and for writing up their work. The HS&DR editors and production house have tried to ensure the accuracy of the authors' report and would like to thank the reviewers for their constructive comments on the final report document. However, they do not accept liability for damages or losses arising from material published in this report.

This report presents independent research funded by the National Institute for Health Research (NIHR). The views and opinions expressed by authors in this publication are those of the authors and do not necessarily reflect those of the NHS, the NIHR, NETSCC, the HS&DR programme or the Department of Health. If there are verbatim quotations included in this publication the views and opinions expressed by the interviewees are those of the interviewees and do not necessarily reflect those of the authors, those of the NHS, the NIHR, NETSCC, the HS&DR programme or the Department of Health.

© Queen's Printer and Controller of HMSO 2016. This work was produced by Pinkney et al. under the terms of a commissioning contract issued by the Secretary of State for Health. This issue may be freely reproduced for the purposes of private research and study and extracts (or indeed, the full report) may be included in professional journals provided that suitable acknowledgement is made and the reproduction is not associated with any form of advertising. Applications for commercial reproduction should be addressed to: NIHR Journals Library, National Institute for Health Research, Evaluation, Trials and Studies Coordinating Centre, Alpha House, University of Southampton Science Park, Southampton SO16 7NS, UK.

Published by the NIHR Journals Library (www.journalslibrary.nihr.ac.uk), produced by Prepress Projects Ltd, Perth, Scotland (www.prepress-projects.co.uk).
Health Services and Delivery Research Editor-in-Chief

Professor Jo Rycroft-Malone  Professor of Health Services and Implementation Research, Bangor University, UK

NIHR Journals Library Editor-in-Chief

Professor Tom Walley  Director, NIHR Evaluation, Trials and Studies and Director of the HTA Programme, UK

NIHR Journals Library Editors

Professor Ken Stein  Chair of HTA Editorial Board and Professor of Public Health, University of Exeter Medical School, UK

Professor Andree Le May  Chair of NIHR Journals Library Editorial Group (EME, HS&DR, PGfAR, PHR journals)

Dr Martin Ashton-Key  Consultant in Public Health Medicine/Consultant Advisor, NETSCC, UK

Professor Matthias Beck  Chair in Public Sector Management and Subject Leader (Management Group), Queen's University Management School, Queen's University Belfast, UK

Professor Aileen Clarke  Professor of Public Health and Health Services Research, Warwick Medical School, University of Warwick, UK

Dr Tessa Crilly  Director, Crystal Blue Consulting Ltd, UK

Dr Peter Davidson  Director of NETSCC, HTA, UK

Ms Tara Lamont  Scientific Advisor, NETSCC, UK

Professor Elaine McColl  Director, Newcastle Clinical Trials Unit, Institute of Health and Society, Newcastle University, UK

Professor William McGuire  Professor of Child Health, Hull York Medical School, University of York, UK

Professor Geoffrey Meads  Professor of Health Sciences Research, Health and Wellbeing Research and Development Group, University of Winchester, UK

Professor John Norrie  Health Services Research Unit, University of Aberdeen, UK

Professor John Powell  Consultant Clinical Adviser, National Institute for Health and Care Excellence (NICE), UK

Professor James Raftery  Professor of Health Technology Assessment, Wessex Institute, Faculty of Medicine, University of Southampton, UK

Dr Rob Riemsma  Reviews Manager, Kleijnen Systematic Reviews Ltd, UK

Professor Helen Roberts  Professor of Child Health Research, UCL Institute of Child Health, UK

Professor Jonathan Ross  Professor of Sexual Health and HIV, University Hospital Birmingham, UK

Professor Helen Snooks  Professor of Health Services Research, Institute of Life Science, College of Medicine, Swansea University, UK

Professor Jim Thornton  Professor of Obstetrics and Gynaecology, Faculty of Medicine and Health Sciences, University of Nottingham, UK

Please visit the website for a list of members of the NIHR Journals Library Board: www.journalslibrary.nihr.ac.uk/about/editors

Editorial contact: nihredit@southampton.ac.uk