
PREVALENCE AND PATIENT CHARACTERISTICS OF OUT OF HOUR DISCHARGES FROM PICU AND THEIR IMPACT ON HOSPITAL LENGTH OF STAY

Joshi C, Zin T, Davidson M, Gillis C.

PICU, Royal Hospital for Sick Children, Glasgow, United Kingdom

Introduction

PICU has a high proportion of OOHD especially during winter. The objective of this clinical audit is to determine the rate of readmission from out of hours discharges (OOHD) from Paediatric Intensive Care Unit (PICU) and to find out the demographic and logistical factors associated with OOHD rate.

Methods

This is a retrospective observational audit. We reviewed the episodes of OOHD from PICU and rate of readmission within 48 hours since discharge.

Results

A total of 55 OOHD's were noted during the audit period. Over the study period 5% of admissions to PICU were discharged out of hours, with a significant seasonal variation with 17.3% of PICU patients having an OOHD in December 2019.

45% of the patients who had an OOHD were admitted to PICU for less than 24 hours and amongst them 62% did not require any critical care interventions.

During the period 3.5% of patients with an OOHD were re-admitted. This compares favourably to the overall PICU readmission rate of 3.6% during this time period.

Discussion and Conclusion

A considerable number of the cohort did not require any intensive care support and stayed less than 24 hours in the unit.

Discussion and Conclusion

Our data suggest that those patients who had an OOHD were appropriate for ward level care however they perhaps would be best served by timely discharge during normal working hours when there are enhanced levels of staffing.

The establishment of an Intermediary or high dependency care area is another way to reduce OOHD which is well recognised to be associated with adverse events.

Further audit cycles focussing on patient cohorts who can be electively discharged in a timely fashion, other confounding factors on OOHD's and effects of OOHD's on receiving team should be undertaken.