

Transformation

South London pilot updates

Cardiac Network overview

KCH is on track to save 563 bed days through OPAT service (Sep-Nov)

Treating appropriate patients in the community through an outpatient parenteral antimicrobial therapy (OPAT) service for care closer to home with realised operational efficiencies

- **The new King's College Hospital outpatient parenteral antimicrobial therapy (OPAT) service, launched 5 September, has saved 563 bed days, proving an exceptionally effective way to move people from the hospital setting.**
- Beyond caring for these patients closer to home, further bed days have been saved through the identification of referred patients to the OPAT service who were appropriate for discharge from hospital.
- There has been a steady flow of referrals across a range of clinical specialties: spine, brain abscess, diabetic foot, infective endocarditis, and bone and joint pathways.
- The OPAT team has capacity to receive more referrals via the team email, kch-tr.opatnurses@nhs.net.
- A clinical dashboard has been developed to track the success of this initiative – patient, outcomes, efficiencies, and populations served.
- This six month pilot has been funded by NHS South East London ICS. A business case for recurrent funding will be submitted to the KCH board in January for continuation of this successful endeavour.
- By January 2023, it is calculated that the service will save approximately 1,800 bed days. Bed day savings are calculated by the number of days already saved, plus the expected saved days for patients currently active on OPAT.

Read more about the OPAT project.

18-24 November ([link](#))

WHO World Antimicrobial Awareness Week

Questions may be directed to [Andrea Marlow](#).

How can my trust replicate OPAT bed day savings and better outcomes?

The OPAT pilot demonstrates viable solutions for decompressing hospital pressures – particularly important given rising demands, winter pressures, and busy staff.

Specialised services have historically been discrete from wider hospital services. This project shows how specialist clinical input for patients can result in operational savings and better patient outcomes, proving the aims of the integration agenda.

It also creates learning opportunities beyond interventions provided by specialists, through the expert advice across pathways and other disciplines.

By involving clinicians in the referral process, they can evaluate appropriate candidates for OPAT or discharge.

This not only frees up hospital beds, but provides patient care closer to home and contributes towards antimicrobial stewardship.

Target:

1,800

bed days saved

between

Sep 2022 and Jan 2023