## Scottish Intensive Care Society Audit Group **HDU Monthly report**



- 1. Patients admitted during the reported month: Admissions, readmissions, admitting specialty.
- 2. Patients discharged during the reported month: Length of stay, delayed discharges, night time discharges, early discharges.

  3. Patients treated during reported month: occupancy, vasoactive drugs, NIV/CPAP, level of care, epidurals.

Detailed methodology can be found in Appendix 1. For further information on this report, please contact:

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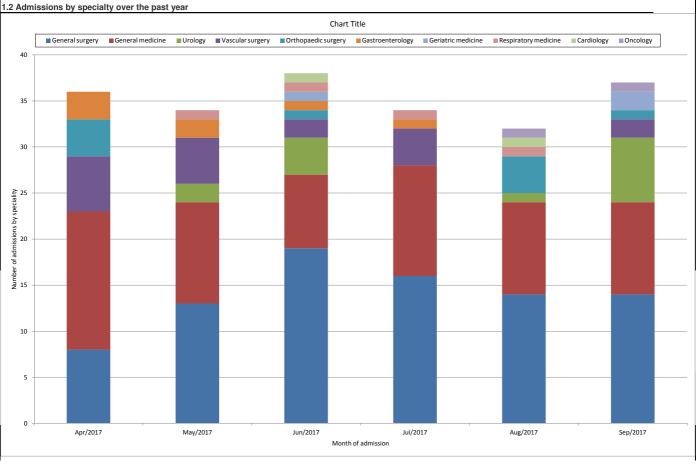
Lorraine Smyth Senior Information Analyst lorraine.smyth@nhs.net 0131 275 6529

Please note: This information has been released for management information purposes only. The data have not been adjusted to protect against potential disclosure risks and may contain information which enables (perhaps with the aid of further knowledge of the topic) an individual patient to be identified. Please ensure circulation is restricted and that patient confidentiality is not compromised.

For further guidance see ISD's Statistical Disclosure Control Protocol http://www.isdscotland.org/isd/4489.html. Please contact psmith44@nlhs.net if you have any queries regarding this.

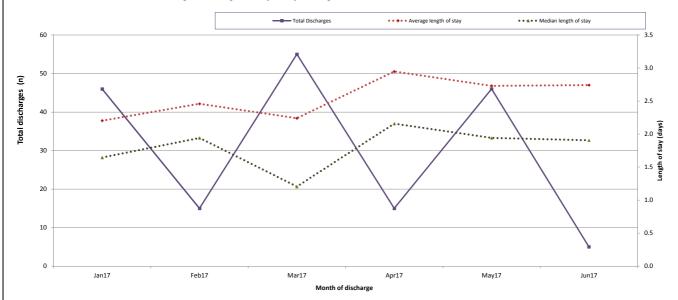
SICSAG data is subject to ongoing validation and must be regarded as dynamic. Therefore if this analysis was to be re-run at a later stage it may be subject to change.





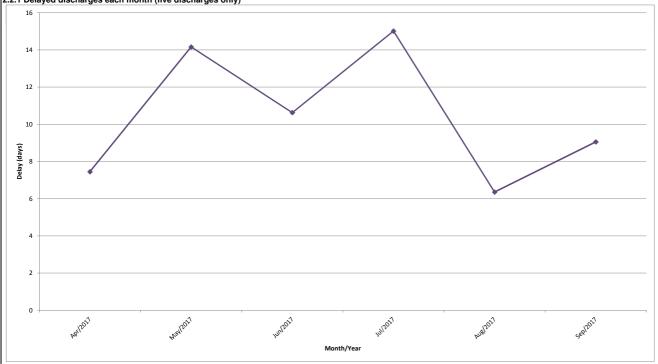
Unit Code Hospital Name January 2017

# Section 2: Discharged Patients 2.1 Table and chart of the number of discharges and length of stay in days during the last six months



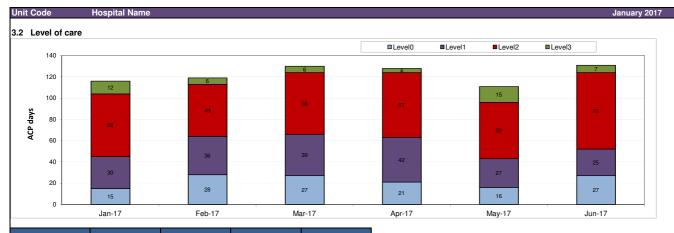
	Number of	Length of Stay		
Month	discharges	Mean	Median	
Jan17	46	2.2	1.6	
Feb17	15	2.5	1.9	
Mar17	55	2.2	1.2	
Apr17	15	2.9	2.2	
May17	46	2.7	1.9	
Jun17	5	2.7	1.9	
Total	182	2.6	1.9	

2.2.1 Delayed discharges each month (live discharges only)



	Number of	Occupied time due to delay			
Reasons	delayed discharges	Days	Hours	Hours Minutes	
CU bed shortage	0	0	0	0	
HDU bed shortage	0	0	0	0	
Ward bed shortage	15	10	14	20	
Nursing staff shortage	0	0	0	0	
Other staff shortage	0	0	0	0	
Transport shortage	1	0	11	0	
Other	1	0	0	0	
Jnknown	0	0	0	0	
Total	17	8	25	20	

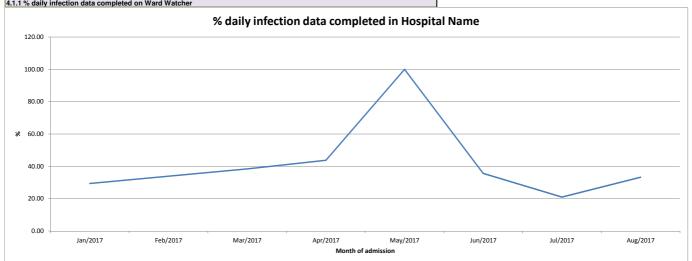




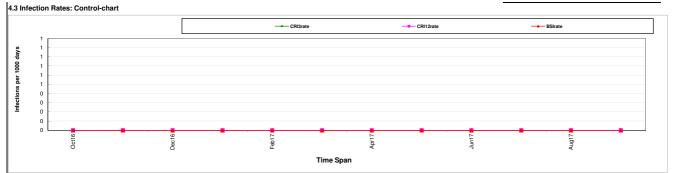
Month	Level 0	Level 1	Level 2	Level 3
Jan17	20	30	59	12
Feb17	28	36	25	6
Mar17	25	45	58	10
Apr17	21	42	61	4
May17	78	27	53	15
Jun17	27	25	72	7
Total	199	205	328	54

Unit Code Hospital Name January 2017

Section 4: Healthcare Associated Infection (HAI) Data 4.1.1 % daily infection data completed on Ward Watcher



	<del>-×-</del>		
4.1.1 Catheter related blood stream infections (CRI-3)			
Number of CRI-3	0		
Number of central line days	23		
Infection rate per 1000 central line days	0		
Number of central line days since last infection	2342		
4.1.2 Local and general CVC infections (CRI-1 & CRI-2)			
Number of CRI-1		0	
Number of CRI-2		0	
Total number of infections		0	
Number of central line days		23	
Infection rate per 1000 central line days		0	
Number of central line days since last infection		2342	
4.2 Blood stream infections (BSI-A & BSI-B)			
Number of BSI-A			0
Number of BSI-B			0
Total number of infections			0
Number of patient days			85
Infection rate per 1000 patient days			0
Number of patient days since last infection			9,451



### Treated patients

This is the total number of patients treated in this HDU for each of the last six months.

Occupancy

Occupancy is calculated by dividing the total amount of time all beds in this HDU were occupied, by the total number of bed days available. This is displayed as a percentage for each of the last six months.

### Specific interventions

This is the number of patients who have had specific interventions recorded at least once during this HDU stay. This is displayed as the number of patients with specific interventions recorded, and as a percentage of total number of patients treated for each of the last six months.

### Section 3.2

Levels of care

Levels of care are calculated on a daily basis from the Augmented Care Period (ACP) section of WardWatcher.

Calculating Levels of Care
WardWatcher will score levels of care based on support of five different organ systems: respiratory, cardiovascular, renal, neurological and dermatological. The GI section is not included.

- Advanced respiratory support (connected to a ventilator via ETT or tracheostomy) OR
   Two or more organ systems are being supported (except basic respiratory and basic cardiac) OR
   One organ system is being supported and a different system is in chronic failure\*

Level 2
One organ supported

# Level 1

Epidural or/and

General observations requiring more monitoring than can be provided on a general ward

# Level 0

• A patient is assessed as level 0 if not assessed as level 1, 2 or 3 (e.g. no organ support and adequate monitoring could be provided on a general ward)

\* Chronic failure is collected from the PMH section of the history page in WardWatcher.