A 24-HOUR LIVE AUDIT OF LOCAL PRACTICES IN THE ACUTE MEDICAL UNIT AT UNIVERSITY HOSPITAL SOUTH MANCHESTER
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Introduction: The quality of care experienced by patients in acute medical units (AMU) is key to clinical outcomes.

Objectives: To examine whether this Acute Medical Unit (AMU) was implementing the standard of care recommended by national guidelines and national benchmarking standards set out by the Society of Acute Medicine’s Benchmarking Audit (SAMBA) 2012 [1].

Methods: Live patient data was collected in the AMU at the University Hospital of South Manchester (UHSM) over 24-hours on 20th June 2013.

Results: This AMU underperformed compared to national guidelines and SAMBA 2012 in key areas including consultant review times, number of discharges and diagnostic investigation of pulmonary embolism (PE). 69% of patients were reviewed by a Consultant within 14 hours and 53% were seen within 6 hours between the hours of 8am and 6pm. 3 patients were suspected of having a PE and none receive a computed tomography pulmonary angiogram within 24-hours of admission. Significantly, 43% of patients were not assessed for venous thromboembolism (VTE).